
1.0 INTRODUCTION

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This Environmental Impact Statement (EIS) evaluates the potential environmental effects associated with implementing the Long Range Development Plan (LRDP) for the San Francisco Veterans Affairs Medical Center (SFVAMC) at Fort Miley in San Francisco, California (SFVAMC Fort Miley Campus).

This EIS has been prepared in compliance with the National Environmental Policy Act (NEPA) (42 U.S. Code [USC] Sections 4321–4370d [1994]); the Council on Environmental Quality (CEQ) Regulations for Implementing the Procedural Provisions of NEPA (40 Code of Federal Regulations [CFR] Parts 1500–1508 [2004]); the Environmental Effects of the Department of Veterans Affairs Actions (38 CFR 26); and U.S. Department of Veterans Affairs’ (VA’s) *NEPA Interim Guidance for Projects*. This EIS is intended to provide a full and fair discussion of environmental impacts associated with a range of alternatives and to inform decision-makers and the public. This EIS will be used in conjunction with other relevant materials to plan actions and to make decisions.

1.2 OVERVIEW AND BACKGROUND

The mission of the Veterans Health Administration (VHA) branch of VA is to “Honor America’s Veterans by providing exceptional health care that improves their health and well-being.” In fulfillment of this mission, VHA provides comprehensive, integrated healthcare services to Veterans and other eligible persons.

Since 1930, the VA healthcare system has grown from 54 hospitals to include 152 medical centers; more than 1,400 outpatient centers, community-based outpatient clinics, and outreach clinics; 135 nursing home care units (Community Living Centers); and 48 domiciliaries.¹ The number of Veterans requiring VA health benefits has grown during the last decade. The growing population of Veterans (both service-connected and nonservice-connected) seeking healthcare services has resulted in an increase in the demand for medical facilities, including research space, on VA medical center campuses.

VA operates the SFVAMC, located at Fort Miley in San Francisco, California (Figure 1-1). Fort Miley was established as a coastal defense battery in 1893. Approximately 29 acres of land were transferred from the U.S. Army to VA in 1932 for construction of a new Veterans hospital and diagnostic center to provide healthcare options to the San Francisco Bay Area’s Veteran population. This area became the SFVAMC in 1934 and was included in VA’s VHA system. The only VA medical center in San Francisco County, the SFVAMC also serves Veterans from the North Coast of California. The existing SFVAMC Fort Miley Campus facilities occupy approximately 1 million square feet and include a 124-bed tertiary-care hospital, primary and specialty care services, and a 120-bed Community Living Center. The SFVAMC has a long history of conducting cutting-edge research, establishing innovative medical programs, and providing compassionate care to Veterans.

¹ A domiciliary provides residential rehabilitation treatment programs for a wide range of problems including medical, psychiatric, vocational, educational, and social.



Source: Data provided by the SFVAMC Engineering Department in 2010

Figure 1-1: Location of SFVAMC Fort Miley Campus within the Urban Context of San Francisco

The San Francisco VA Medical Center serves a Veteran population of more than 179,000 Veterans in Marin, Napa, Sonoma, Lake, Mendocino, Humboldt, San Francisco and San Mateo Counties. In Fiscal Year 2011, the Medical Center treated over 37,000 unique patients with over 326,000 outpatient visits and 5,600 inpatient stays. The SFVAMC has several national centers of excellence in the areas of epilepsy treatment; cardiac surgery; posttraumatic stress disorder (PTSD); human immunodeficiency virus (HIV); and renal dialysis. The SFVAMC has many other nationally recognized centers and programs including the Parkinson's Disease Research, Education, and Clinical Center; the Hepatitis C Research and Education Center; the Mental Illness Research & Education Clinical Center; and the Western Pacemaker and AICD Surveillance Program. The SFVAMC was selected to head the Southwest Regional Epilepsy Center of Excellence and provides epilepsy care, supports the training and educational needs of the network, and manages a VA epilepsy registry. It has been designated as one of only five VA Centers of Excellence in Primary Care Education in the U.S. and has been selected as a community resource and referral center, making it only one of 12 locations designed to serve homeless and at-risk-for-homeless Veterans and their families.

The SFVAMC has been affiliated with the University of California, San Francisco (UCSF) School of Medicine for over 50 years. All physicians are jointly recruited by the SFVAMC and UCSF School of Medicine. SFVAMC personnel currently consist of 189 residency and fellow positions and 40 allied health professionals. More than 700 UCSF trainees from 36 programs rotate through the SFVAMC on an annual basis.

The SFVAMC has the largest funded research program in the VHA system, with \$83 million in research expenditures in the 2011 fiscal year. Areas of particular interest are prostate cancer, aging, oncology, cardiovascular disease, hepatitis C, breast cancer, PTSD, substance abuse, neurological diseases, health services research, and advanced medical imaging. The SFVAMC is one of the few medical centers in the world that is equipped for studies using both whole-body magnetic resonance imaging (MRI) and spectroscopy, and it is the site of VA's National Center for the Imaging of Neurodegenerative Diseases, one of the largest research groups in the world focusing on MRI of neurodegenerative diseases.

SFVAMC has identified a deficiency of 589,000 square feet of building space. This amount of space is needed to adequately serve San Francisco Bay Area and North Coast Veterans through the year 2030.

1.3 SUMMARY OF PROPOSED ACTION

The Proposed Action is a LRDP that supports the mission of the SFVAMC and provides for the healthcare needs of Bay Area and North Coast Veterans. The LRDP includes development of new and retrofitting of existing buildings and structures that house patient care, research, administrative, and hoptel² functions, as well as parking. Implementation of the LRDP would occur in two phases over a 20-year time frame through the year 2030. For a more detailed description of the Proposed Action alternatives, including information regarding square footage and phasing, see Chapter 2.0, "Alternatives."

² A hoptel is an overnight, shared lodging facility for eligible Veterans receiving healthcare services. This temporary lodging is available to Veterans who need to travel 50 or more miles from their homes to the SFVAMC Fort Miley Campus.

1.4 PURPOSE OF AND NEED FOR THE PROPOSED ACTION

The purpose of the Proposed Action is to meet VHA's mission of providing for care of military Veterans in the San Francisco Bay Area and Northern California by providing necessary medical center and research space. This EIS has been prepared by VA as the lead agency responsible for NEPA evaluation of the Proposed Action. SFVAMC has identified a need for retrofitting existing buildings to meet the most recent seismic safety requirements and for an additional 589,000 square feet of medical facility space to satisfy the needs of all San Francisco Bay Area and North Coast Veterans over the next 20 years.

The SFVAMC, the only VA medical center in San Francisco County, has major space and parking deficiencies at the SFVAMC Fort Miley Campus. The mission of the SFVAMC is to continue to be a major primary and tertiary healthcare center providing cost-effective and high-quality care to eligible Veterans in the San Francisco Bay Area and North Coast. The SFVAMC strives to deliver needed care to Veterans while contributing to healthcare knowledge through research. The SFVAMC is also a ready resource for U.S. Department of Defense backup, serving as a Federal Coordinating Center in the event of a national emergency. New major construction initiatives would transform the Campus, providing seismic improvements and additional facility space over the next 20 years. The Proposed Action is needed for the SFVAMC to continue to serve the ever-changing needs of the growing Veteran population and to provide appropriate space and facilities to conduct important research.

The overarching goals of the Proposed Action include:

- Enhance the SFVAMC's function as a vital medical center for Veterans.
- Continue to be a state-of-the-art medical facility to serve Veterans well into the future.
- Provide appropriate space to conduct/manage research, clinical, administrative, and educational programs.

The specific objectives of the Proposed Action are as follows:

- Address the space deficiency at the SFVAMC Fort Miley Campus.
- Retrofit existing buildings to the most recent seismic safety requirements to meet current VA seismic design requirements (VA Directive H-18-8), in compliance with Executive Order 12941.
- Provide appropriate space to conduct research.
- Strengthen clinical inpatient and outpatient primary and specialty care for San Francisco Bay Area and North Coast Veterans.
- Improve the efficiency of clinical and administrative space through renovation and reconstruction.
- Meet patient privacy standards and resolve Americans with Disabilities Act deficiencies.
- Increase parking supply to meet current and future demands.
- Improve internal and external campus circulation, utilities, and infrastructure.
- Maintain/improve public transit access to the SFVAMC Fort Miley Campus.

1.5 EXISTING SFVAMC FORT MILEY CAMPUS LOCATION AND SETTING

The existing SFVAMC Fort Miley Campus is located at 4150 Clement Street in the northwestern portion of San Francisco, adjacent to the outer Richmond neighborhood, approximately 2 miles west of State Route (SR) 1 (also known as Park Presidio Bypass Drive in this area) (Figure 1-1). The Campus is situated approximately 6 miles west of downtown San Francisco. The Campus is located on federal lands that are owned by VA.

The SFVAMC Fort Miley Campus encompasses approximately 29 acres. The Campus is bordered by Clement Street and private residential uses to the south, and National Park Service lands to the north, east, and west (Figure 1-2). Regional vehicular access to the Campus is provided by SR 1, via Geary Boulevard and Clement Street. The Campus has two entrances located off of Clement Street at the southeast corner of the site, at 42nd and 43rd Avenues. An internal loop road (Fort Miley Circle) rings the site.

As shown in Figure 1-2, the SFVAMC Fort Miley Campus contains 36 buildings totaling approximately 987,000 square feet of habitable development, including all of the following:

- An inpatient hospital building
- An outpatient clinical building
- Research buildings
- Two hoptel buildings
- A Community Living Center
- Administrative/office buildings
- Various storage, infrastructure, and other facilities

In addition, 10 surface parking lot areas and two parking structures provide a total of 1,253 parking spaces. A helipad is located at the northwestern corner of the SFVAMC Fort Miley Campus.

1.6 NEPA ANALYSIS OF SFVAMC LRDP: NEAR-TERM VERSUS LONG-TERM PROJECT COMPONENTS

This EIS examines specific portions of the SFVAMC LRDP with analysis at either a project level or a program level, depending on the extent of detail available for each proposed development project at the time this environmental review was conducted. A program-level EIS is useful because it provides an opportunity to evaluate the overall impacts of a proposed project(s) or plan for an area larger than is generally intended for an individual site-specific project. It allows VA to consider the full buildout of the SFVAMC LRDP earlier than would be possible for specific development proposals, and it provides an analysis of cumulative impacts that considers all SFVAMC Fort Miley Campus development. Projects for which detailed development plans are available are typically analyzed at the project level, because the action is ready to move forward toward implementation. This EIS also incorporates those proposed projects for which NEPA environmental assessments (and associated findings of no significant impact) have recently been issued. Long-term phases of a project for which less detail is known may be analyzed at the program level. Typically, program-level project components require additional environmental analysis and review at a later date when more detailed plans are available and the action is being considered closer to the implementation time.



Source: VA, 2012

Figure 1-2: Existing SFVAMC Fort Miley Campus Layout

VA's *NEPA Interim Guidance for Projects* acknowledges that there are cases where a programmatic NEPA evaluation of a proposed action or series of actions is more appropriate. This guidance document goes on to state that upon completion of the NEPA evaluation, one must conduct an evaluation for each individual action to ensure that the conclusion reached at the programmatic level applies to each individual site. If it is determined that there are site-specific concerns beyond those evaluated in the programmatic document, a supplemental NEPA evaluation is required.

The master plan for the SFVAMC is referred to as the LRDP and includes the program and phasing of projects in the near term through mid-2015 and the long term through the year 2023. Note that long-term projects would commence after mid-2015 and are contingent on the completion of near-term projects, availability of adequate funding, and potentially the ability of VA to acquire real property. As stated above, this EIS includes a near-term project-level analysis and long-term program-level analysis, to the extent that potential impacts associated with those projects can be reasonably forecasted. Long-term projects for the SFVAMC may require additional or supplemental project-level environmental review at a later date. See Chapter 2.0, "Alternatives," of this EIS for a breakdown of the details of near-term versus long-term projects.

1.7 PUBLIC INVOLVEMENT PROCESS

1.7.1 NEPA-Specific Public Involvement

The EIS process is designed to involve the public and agencies. CEQ regulations implementing NEPA (40 CFR Section 1501.7) require an early and open process for determining the scope of issues that should be considered in an EIS. VA initiated the scoping process on October 12, 2010, by publishing a notice to prepare an EIS in a local newspaper, the *San Francisco Chronicle*, and by sending copies of the notice to federal, State, and local agencies, and other parties known or expected to be interested in the Proposed Action under consideration. VA extended the 30-day public scoping comment period to 60 days, with the end date changing to December 12, 2010. In addition, VA opened another public scoping period starting on March 30, 2011, following publication of the Notice of Intent (NOI) to prepare an EIS in the *Federal Register* (Volume 76, Number 61). The NOI is included in Appendix A.

A scoping meeting was held on October 26, 2010 to inform the public about the Proposed Action under consideration and to solicit the public's participation and comments. The scoping meeting was held at the SFVAMC Fort Miley Campus Auditorium. Approximately 18 people attended the meeting, and six of those provided public comments. A second scoping meeting was held on April 26, 2011, with 13 people in attendance and 11 people providing public comments.

In addition, 22 written comment letters were received during the scoping periods. The letters and summaries of verbal comments are included in the EIS Scoping Report (Appendix A). These comments were taken into consideration throughout the evaluation of the alternatives and potential environmental impacts in this EIS.

Public and agency comments will be solicited during a 60-day public review period for the Draft EIS. The public's input, as well as feedback from applicable resource and permitting agencies, will be taken into consideration in addressing the alternatives and potential environmental impacts.

After public review of the Draft EIS, a final EIS and a record of decision (ROD) will be prepared and signed by VA. A ROD is a document that states what the decision is; identifies the alternatives considered, including the environmentally preferred alternative; and discusses mitigation plans, including any enforcement and monitoring commitments. A ROD considers all factors, including any considerations of national policy that were contemplated when VA it reached its decision.

1.7.2 Other Public Involvement Processes

The SFVAMC has been conducting quarterly meetings with the local community since 2008. The SFVAMC regularly meets with the National Park Service Golden Gate National Recreation Area, which maintains the land bordering the SVAMC Fort Miley Campus. Meetings are also held with staff, volunteers, Veterans service organizations, congressional representatives, and other stakeholders where issues related to the SFVAMC are discussed in an open forum.

1.8 REFERENCES

U.S. Department of Veterans Affairs (VA). 2012. *San Francisco Veterans Affairs Medical Center Fort Miley Campus Long Range Development Plan*. San Francisco, CA.