

LONG RANGE DEVELOPMENT PLAN



**San Francisco Veterans Affairs Medical Center (SFVAMC)
Fort Miley Campus**

January 31, 2014

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Introduction 1



View to the north of the SFVAMC Fort Miley Campus

Purpose and Scope of the Long Range Development Plan (LRDP)

As part of the United States' largest integrated health care system, the San Francisco VA Medical Center's (SFVAMC) number one priority is to provide personalized, proactive, patient-centered care to America's Veterans. The purpose of preparing this Long Range Development Plan (LRDP) is to provide a strategic and organized approach to enable this early 20th-century medical center to effectively and efficiently serve the 21st-century needs of Veterans and their families. To achieve this goal, SFVAMC must modernize existing facilities, retrofit or replace seismically threatened buildings, and create new structures that house patient care, education, administrative, hoptel¹ and research functions, and must provide increased parking for Veterans, staff members, and visitors for the next 15 years.

This LRDP does not constitute a mandate for growth; rather, it is intended to guide future development and phasing of development at a conceptual planning level and in an organized framework for the SFVAMC Fort Miley Campus. The 29-acre site is located in the northwestern corner of the City and County of San Francisco, adjacent to the Outer Richmond District neighborhood (see **Figure 1-1, "Regional Context"**). It is bounded by Clement Street/Seal Rock Drive and the outer Richmond District neighborhood to the south, and by Golden Gate National Recreation Area land owned by the National Park Service to the north, east, and west (see **Figure 1-2, "Neighborhood Context Map"**). This LRDP is a comprehensive plan that guides physical development such as the location of buildings, open space, circulation, and other land uses.

Figure 1-1 shows the location of SFVAMC within the region along with some of the other U.S. Department of Veterans Affairs (VA) facilities around the San Francisco Bay Area. As indicated in the figure, VA has facilities in many different cities in the region: Clearlake, Eureka, Fremont, Martinez, Menlo Park, Oakland, Palo Alto, San Bruno, Santa Rosa, Sausalito, Ukiah, Vallejo, and several other locations.

¹ A hoptel is an overnight, shared lodging facility for eligible Veterans receiving health care services. This temporary lodging is available to Veterans who need to travel 50 or more miles from their home to the existing SFVAMC Fort Miley Campus.

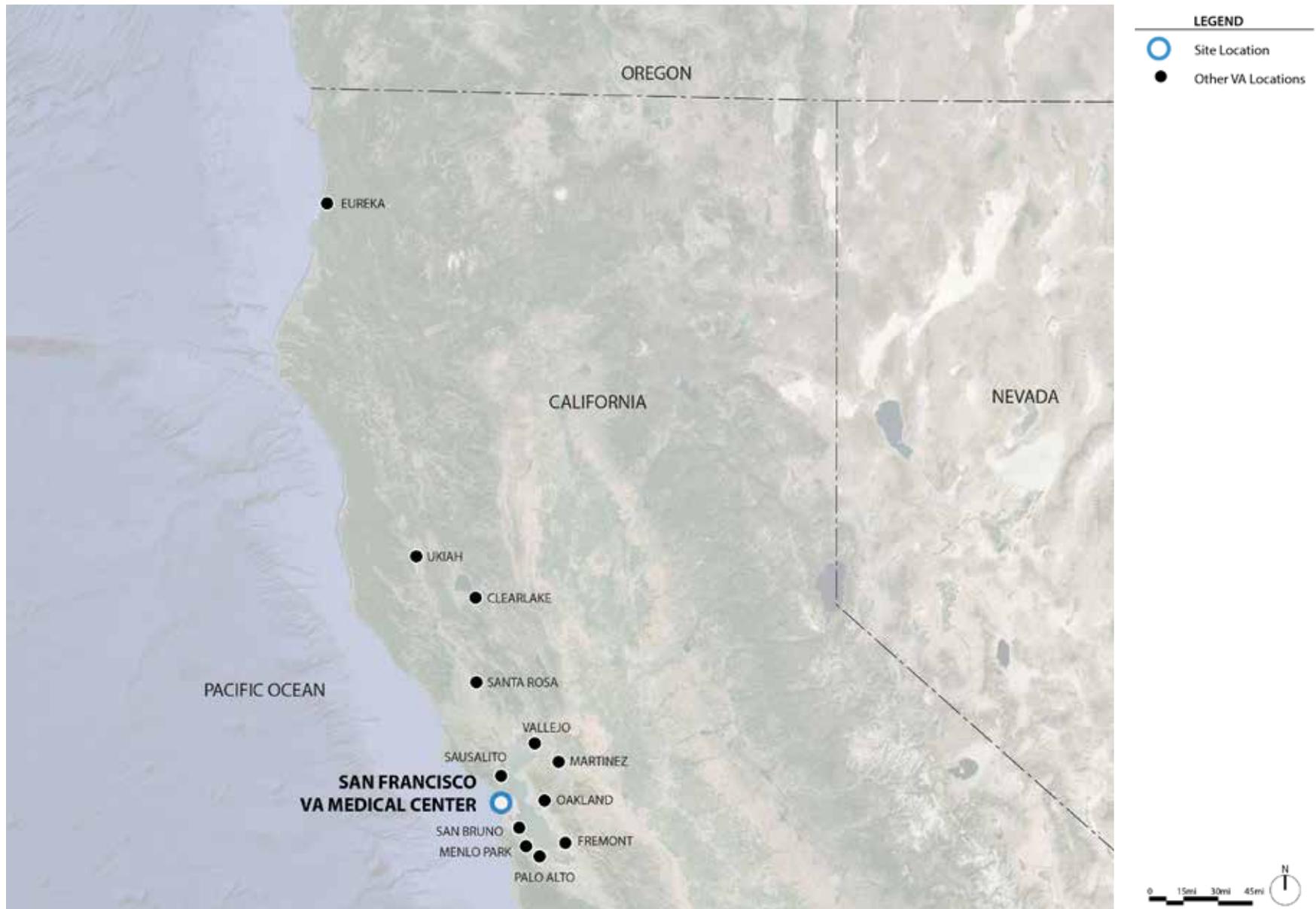


Figure 1-1: Regional Context



Figure 1-2: Neighborhood Context

The LRDP identifies the physical development and enhancements needed to provide for the health care needs of Bay Area and North Coast Veterans. The development program included in this LRDP describes the type and amount of development required for SFVAMC to continue to serve the needs of the growing Veteran population and to provide appropriate space and facilities to provide and conduct state-of-the-art clinical care, education, and research.

This LRDP provides the framework and development program to guide the location of future facilities at the SFVAMC Fort Miley Campus. The LRDP defines and guides new development, enhancement of existing facilities, and retrofitting of existing buildings and structures that house patient care, research, education, administrative, and hoptel functions, as well as parking. Implementation of the development program in this LRDP will occur in two major phases, with buildout anticipated in 2027.

SFVAMC recognizes that its plans to accommodate increasing Veteran demand have impacts on neighboring communities. The LRDP process is designed to address community issues and concerns and environmental impacts, while allowing for manageable growth in the Veteran population.

The LRDP is conceptual, provides a present-day analysis, and offers a visionary sketch for a better future for Veterans and their families. The LRDP is a living, dynamic document that will outline a sequence of steps for implementation in both the short term and long term, while providing SFVAMC with the flexibility to shift priorities as needed. The plan undoubtedly will undergo changes in the future as priorities change and shift to meet the ever-changing needs of Veterans.



Existing hoptel facility located along the eastern edge of the SFVAMC Fort Miley Campus

The main priorities of the development program contained in this LRDP are to modernize existing facilities; retrofit or replace seismically threatened buildings; and create new structures that house patient care, education, administrative and research functions, as well as provide increased parking for Veterans, staff members, and visitors. SFVAMC is the premier VA research facility in the nation and its programs have a far-reaching impact on treating disease and disability. Its research programs not only serve only as a resource for Veterans but have played a significant role in advancing medical science. However, the SFVAMC Fort Miley Campus is an aged facility requiring retrofitting and enhancement. SFVAMC has identified a space deficiency of approximately 589,000 gross square feet (gsf) of building space; this amount of space is needed to adequately serve San Francisco Bay Area and North Coast Veterans through the year 2030. The LRDP defines two phases of development, from 2013 through 2027, and includes a total of approximately 386,300 gsf, or 322,200 net new square feet, of development in this time frame.² The SFVAMC LRDP provides a blueprint for growth, including upgrading outmoded clinical, education, and research facilities to meet contemporary VA standards and requirements; coordinating the location and massing of buildings to create the most functional site for Veterans, staff members, and visitors; addressing existing space and utility deficiencies; and allowing for continued excellence in medicine, education, and research. While this LRDP plans for the buildout of the existing SFVAMC Fort Miley Campus, it is possible that expansion at another site could be considered to accommodate potential future development. Potential expansion sites could be considered in the Mission Bay area of San Francisco or in areas where SFVAMC already has an outpatient clinical presence.

² Parking spaces and facilities are calculated separately from gsf of habitable buildings. A complete inventory of existing and proposed parking facilities is included in this LRDP.

U.S. Department of Veterans Affairs Planning Process

VA has developed and implemented an internal planning process to which the agency is mandated to adhere for planning processes. In this case, the LRDP represents the master planning for both the short-term and long-term development at the SFVAMC Fort Miley Campus projected out through 2027.

Each VA Medical Center must revisit its planning forecasts annually because projections vary from year to year and components of the master plan (or LRDP in this case) are dependent on federal funding cycles issued by the VA Central Office (VACO) in Washington, D.C. VA uses data and capital planning systems such as the Strategic Capital Investment Planning (SCIP) tool in the context of the Veterans Integrated Services Network (VISN) planning cycle to develop multiple options for addressing infrastructure needs and service gaps. VA organizes and develops plans for proposed projects into implementation scenarios in an attempt to account for the time lag between a SCIP planning year and the funding of projects from the Congressional Budget Office. In cases where certain critical-path projects are not funded in the anticipated SCIP submission year, the implementation of plans can be modified to address facility needs along a proposed alternate path.

To carry out strategic health planning initiatives, VA develops options as part of the master planning process. VA uses a variety of tools that analyze influential development factors including reviews of staffing, patient-centered care, Veteran feedback, patient flow, service capacity and demand, assessments of existing physical inventory and infrastructure, and process improvements that may involve the reengineering of a facility. VA uses the data and capital planning systems to establish a market-level demand analysis and workload reallocation modeling to align capital planning with the projected needs of Veterans.



Building 7 entrance



Looking at Building 7, which is situated within the boundary of the National Register Historic District

VACO and the VISN take into account strategic, operational, and functional considerations to ensure that these requirements become the drivers of local space allocation and facility decisions. During its annual development of facility-level VA SCIP plans, VA analyzes and integrates input and direction provided in facility- and network-level strategic and capital asset plans, medical center staff input, Veteran feedback, SCIP gap data, VA Support Service Center space calculations, Facility Condition Assessments, Capital Asset Inventory, energy assessment/requirements, and construction planning. These VA planning tools contributed to the LRDP planning process.

National Environmental Policy Act Process

In compliance with the National Environmental Policy Act and concurrent to the development of the LRDP, SFVAMC is preparing an environmental impact statement (EIS) that evaluates the potential environmental impacts associated with implementing this LRDP. The EIS also is providing a thorough analysis of potential environmental impacts and ways to reduce impacts associated with a range of alternatives to inform decision-makers and the public.

National Historic Preservation Act Process

In compliance with Section 106 of the National Historic Preservation Act, SFVAMC is also taking into account the potential for the LRDP to affect historic properties located on and adjacent to the SFVAMC Fort Miley Campus. SFVAMC is working closely with the California Office of Historic Preservation, the Advisory Council on Historic Preservation, and organizations with a demonstrated interest in the heritage of VA and the Land's End area of San Francisco to identify affected historic properties and ways to reduce effects posed by the LRDP.

LRDP Goals and Objectives

The overarching goals of the SFVAMC LRDP are:

- Enhance the SFVAMC Fort Miley Campus' function as a significant resource and facility for Veterans and their families.
- Continue to provide personalized, proactive, patient-centered care to Veterans well into the future.
- Provide appropriate space to conduct/manage clinical, administrative, educational, and research programs.

The specific objectives of the building program included in this LRDP are:

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



Landscape elements contribute to the Campus' character and sense of place.



Community Living Center

San Francisco VA Medical Center Overview

Organization Mission

The San Francisco VA Medical Center has a long history of establishing innovative medical and education programs; providing personalized, proactive, and patient-centered care to Veterans; and conducting cutting-edge research. The SFVAMC Fort Miley Campus provides medical services for Veterans in the San Francisco Bay Area and the North Coast of California, a population of more than 179,000 Veterans. SFVAMC is dedicated to providing state-of-the-art health care and supporting a world-renowned teaching and medical research program. SFVAMC is also a “ready resource” for U.S. Department of Defense (DoD) backup, serving as a Federal Coordinating Center in the event of a national emergency.

The following are the overarching mission statements that drive the services for Veterans and excellence in medical education and research at the SFVAMC Fort Miley Campus.

VA’s Mission Statement is:

To fulfill President Lincoln’s promise “To care for him who shall have borne the battle, and for his widow, and his orphan” by serving and honoring the men and women who are America’s Veterans.

The mission of the Veterans Health Administration (VHA) branch of VA is:

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 health care services to Veterans and other eligible persons. It is anticipated that over the next two decades, SFVAMC will experience growth to fulfill a multitude of newly created roles in medical research, clinical, and educational programs while greatly enhancing its traditional core function as a vital medical center for the nation’s Veterans. The SFVAMC Fort Miley Campus must evolve to continue to fulfill its mission and meet future growth projections.

Services Provided and Key Accomplishments

The San Francisco VA Medical Center provides comprehensive, integrated health care services to Veterans and other eligible persons pursuant to the provisions of the Veteran's Health Care Eligibility Reform Act of 1996 (Public Law 104-262) and other related statutory authority and regulations. VA health care facilities provide a broad spectrum of medical, surgical, and rehabilitative care.

Since 1930, the VA health care system has grown from 54 hospitals to include 152 medical centers, more than 1,400 outpatient clinics, 135 Community Living Centers, and 48 domiciliaries³. The number of Veterans requiring VA health benefits has grown during the last decade. This growing population of Veterans (both service-connected and non-service-connected) seeking health care services results in an increase in demand for medical facilities, including research space, on VA medical center campuses.

Facilities at the SFVAMC Fort Miley Campus include a 124-bed tertiary-care hospital, primary- and specialty-care services, and a 120-bed Community Living Center. Outpatient clinics are located in Clearlake, Eureka, San Bruno, Santa Rosa, Ukiah, and downtown San Francisco.

The research conducted at SFVAMC is focused on improving health care for Veterans; the results of the research being conducted usually have a larger benefit in terms of advancing medical technology and care for the community as a whole. In addition, the active and vibrant research program allows SFVAMC to recruit and retain some of the most highly successful and sought-after clinicians to enhance the clinical care for Veterans.

The SFVAMC Fort Miley Campus has several National Centers of Excellence in the areas of cardiac surgery, post-traumatic stress disorder (PTSD), human immunodeficiency virus (HIV), and renal dialysis. Additionally, the Campus was selected to head the Southwest Regional Epilepsy Center of Excellence. This center provides epilepsy care, supports the training and educational needs of the network, and manages a VA epilepsy registry.

³ A domiciliary provides residential rehabilitation treatment programs for a wide range of problems including: medical, psychiatric, vocational, educational, and social.



SFVAMC is dedicated to providing state-of-the-art health care to Veterans.

The facility has many other nationally recognized programs including Parkinson's Disease Research, Education, and Clinical Center; Hepatitis C Research and Education Center; Mental Illness Research, Education, and Clinical Center; and the Western Pacemaker and Automatic Implantable Cardioverter Defibrillator (AICD) Surveillance Program. It has also been designated as one of only five VA Centers of Excellence in Primary Care Education and selected as a community resource and referral center to serve homeless and at-risk-for-homeless Veterans and their families.

Among SFVAMC's many clinical accomplishments, it was the first VA medical center in the country to perform magnetic resonance imaging (MRI)–guided deep brain stimulation surgery and is one of only a few VA medical centers to perform the state-of-the-art transcatheter aortic valve replacement surgery. A SFVAMC doctor was one of the first doctors in the world to perform computed tomography (CT) colonography, known as virtual colonoscopy, and has developed many of the innovative aspects of this procedure at SFVAMC.

The SFVAMC Fort Miley Campus has the largest funded medical research program in VHA, with \$87 million in research expenditures. Areas of particular research interest are prostate cancer, aging, oncology, cardiovascular disease, hepatitis C, breast cancer, PTSD, substance abuse, neurological diseases, health services research, and advanced medical imaging. This Campus is one of the few medical centers in the world equipped for studies using both whole-body MRI and spectroscopy, and is the site of VA's National Center for the Imaging of Neurodegenerative Diseases—the only imaging center in VA's system dedicated exclusively to brain imaging. The research performed at the SFVAMC Fort Miley Campus has played a significant role in advancing medical science. Some successes include:

- Defined the mechanism by which space flight decreased bone density.
- Demonstrated that beta blockers given before and after surgery reduce mortality for patients with heart disease risk.
- Demonstrated that PTSD is accompanied by structural/functional changes in the brain.
- Identified leading and potentially modifiable risk factors associated with Alzheimer's disease.
- Demonstrated a link between traumatic brain injury and increased risk of dementia in older Veterans.

Partnerships

The San Francisco VA Medical Center works to develop collaborative relationships with its community partners. Partnerships with Veteran Service Organizations, local governmental agencies, businesses, and nonprofit organizations/service and community groups play an important role in fostering and enhancing the care and service to Veterans and their families.

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 SFVAMC and UCSF School of Medicine. SFVAMC also maintains affiliations with the UCSF Schools of Nursing, Dentistry, and Pharmacy. SFVAMC currently has 189 residency and fellow positions and 40 allied health professional trainees. Annually, more than 700 UCSF trainees from 36 programs rotate through SFVAMC.

SFVAMC is also partnered with the Northern California Institute of Research and Education (NCIRE)–Veterans Health Research Institute, which is a nonprofit research organization established in 1988 to administer health research at the SFVAMC Fort Miley Campus. NCIRE supports the research of over 200 principal investigators at the Campus working to improve health and health care for Veterans and active military personnel on the frontiers of many fields, including brain imaging, neurodegenerative disease, PTSD, cardiovascular disease, cancer, hepatitis, and HIV. Many of NCIRE’s principal investigators are also directly involved in patient care at SFVAMC.

A unique partnership is maintained with DoD to study the basic neuroscience and neuroimaging of combat-related brain and spinal cord injuries, PTSD and other neurological combat-related injuries, and predictors of injuries of war fighters. This program is considered a national resource by DoD.

SFVAMC has a partnership with City College of San Francisco to provide mental health services and outreach to Veterans. Mental health and outreach staff are on-site at SFVAMC five days per week to provide social work and evidence-based mental health care as well as health benefits counseling to more than 1,300 student Veterans. SFVAMC was one of the first VA medical centers in the country to establish a full-time partnership with a college or university.



San Francisco VA Medical Center Population

The San Francisco VA Medical Center serves nearly 1,500 Veterans daily, including inpatients, outpatients, and Community Living Center residents. In Fiscal Year 2013, the medical center treated 59,804 unique patients who had 444,016 outpatient visits, and 5,271 inpatient visits at the SFVAMC Fort Miley Campus. The Campus has a daily population of more than 3,500 staff members, contractors, and volunteers. This estimate includes employees as well as visiting UCSF-affiliated and other hospital-affiliated employees.



Existing Building 1, located east of Building 200 at the core of the Fort Miley Campus



Planning Context **2**



Historic photos of SFVAMC

Planning Context Overview

This chapter provides an overview of the SFVAMC Fort Miley Campus' existing conditions and setting, which set the stage for the Campus' future growth and development.

Site and Development History

The earliest documented Euro-American presence in what is now the City and County of San Francisco occurred in 1776, when a Spanish exploring party led by Lieutenant Colonel Juan Bautista de Anza arrived in the area to locate sites for a military base and a mission. By the 1830s, the small settlement of Yerba Buena had been established between the presidio and the mission. In 1847, Yerba Buena became known as San Francisco, and its primary function served as a shipping and transportation hub.

The Fort Miley Military Reservation, the current site of the SFVAMC Fort Miley Campus, was first conceived in 1850, when President Millard Fillmore set aside Point Lobos for military purposes, but the land was not officially acquired from the City and County of San Francisco until 1893. Construction began on the defense fortifications at Fort Miley in 1899 and continued through 1948. In 1900, the reservation was named Fort Miley after Lieutenant Colonel John D. Miley, one of the planners of San Francisco's coastal battery network. The Fort Miley post was developed between 1902 and 1906, and included a U-shaped parade ground surrounded by wood-frame barracks and other post buildings. The Fort Miley post continued to grow through the 1920s, although it was reduced to caretaker status in 1922.

In 1930, the Federal Board of Hospitalization chose the Fort Miley Military Reservation as the future site of a VA hospital. In 1932, Fort Miley was divided into two parts when land was transferred from the U.S. Army to VA for the SFVAMC; most of the buildings and structures that composed the original Fort Miley post were demolished, but the major defense fortifications at East and West Fort Miley remained. Fort Miley Military Reservation was revived as an active post during World War II, but soon afterward the defense fortifications were decommissioned and in 1972 the Fort Miley Military Reservation Historic District became part of the National Park Service's Golden Gate National Recreation Area. Construction of the SFVAMC hospital and diagnostic center began in 1933, and the hospital was dedicated in November 1934. The original SFVAMC Fort Miley Campus was composed of 21 concrete buildings, designed by VA architects in the Mayan Art Deco style.

The SFVAMC Fort Miley Campus has expanded over time. By 1942, 11 additional buildings had been constructed under an appropriation for rehabilitation by the U.S. government. In 1963, VA began a modernization program to enhance outdated facilities; three new buildings were constructed—the administration building, a clinic building, and a 440-bed hospital—and existing buildings were rehabilitated, including the research building and the outpatient building. A new parking structure and a 120-bed Community Living Center were added in the 1990s. Between 2009 and 2011, VA completed a seismic retrofit on the main inpatient hospital (Building 203); expanded Building 200 to add an emergency room; and constructed the Mental Health Parking Garage (212).

Today, the SFVAMC Fort Miley Campus is composed of 36 buildings containing nearly 1 million gross square feet (gsf) of habitable development. The existing building program is described in more detail in this chapter, and illustrated in **Figure 2-1, “Existing Building/Structure Inventory,”** and **Figure 2-2, “Existing Building Massing.”**



Campus aerial view (1960s)



The Campus provides extraordinary views of San Francisco Bay and the Pacific Ocean.



Example of surrounding residential neighborhood

Neighborhood Context

The SFVAMC Fort Miley Campus is a 29-acre site located in the northwestern corner of the City and County of San Francisco, adjacent to the Outer Richmond District neighborhood. The site is bounded by Clement Street/Seal Rock Drive and the Outer Richmond District neighborhood to the south, and by Golden Gate National Recreation Area (GGNRA) land (owned by the National Park Service [NPS]) to the north, east, and west (see **Figures 1-1 and 1-2** in Chapter 1).

The aesthetic of the SFVAMC Fort Miley Campus is informed by the natural beauty of the site and its surroundings. Stunning views of the Pacific Ocean, San Francisco Bay, the Golden Gate Bridge, and the Marin Headlands are available from northern areas of the Campus. Mature, native trees are prominent, located both within and adjacent to the developed areas of the Campus. Monterey pine and Monterey cypress are the most prevalent vegetation types in the area, and are found in landscaped areas of the Campus as well as in the adjacent, natural GGNRA areas. The site was originally considered an ideal location for a hospital, based on the therapeutic properties of the site's proximity to the ocean, views, and natural areas.

The adjacent portions of East and West Fort Miley, adjacent to the SFVAMC Fort Miley Campus, contain buildings and artillery bunkers and were not included in the land transfer to VA. East Fort Miley and West Fort Miley are managed by NPS and are part of the GGNRA. East Fort Miley and West Fort Miley were listed in the National Register of Historic Places (NRHP) in 1980. Other land uses surrounding the Campus include other portions of the GGNRA to the north, the Lincoln Park Golf Course to the north and east, the California Palace of the Legion of Honor museum to the northeast, and the residential Outer Richmond District neighborhood to the south. The Outer Richmond District is a residential neighborhood comprised of medium-density development, with a mix of single-family homes and apartment buildings, mostly built after the 1906 earthquake. The residential area immediately south of the SFVAMC Fort Miley Campus is zoned RH-1 (Residential, 1 Unit per Lot) and RH-2 (Residential, 2 Units per Lot). The Outer Richmond District was ultimately built out by the 1920s and is primarily residential, interspersed with mixed-use areas.

The San Francisco zoning map designates the SFVAMC site as "P," or Public; however, it is important to note that as federally owned land, it is exempt from the City and County of San Francisco's planning regulations.

Existing Conditions¹

Campus Character and Urban Design Patterns

The SFVAMC Fort Miley Campus consists of a mixture of architectural styles that have been developed over the long history of the site. The hospital and medical buildings built in the 1930s were designed in the Art Deco style. Subsequent development in the 1960s and 1970s doubled the size of hospital services and enhanced functionality with the period's mid-century and modern design, which reflected the importance of efficiency during this design period. Later development of the SFVAMC Fort Miley Campus occurred in the mid-1990s with the addition of new medical buildings in a series of architectural styles intended to be modern and seismically safe. The site also contains a water tower.

Existing Building Inventory

The SFVAMC Fort Miley Campus contains a mixture of buildings, architectural styles, and historic value. As shown in **Figure 2-1**, the Campus contains 38 buildings totaling approximately 987,500 gsf of habitable development.² Many buildings at SFVAMC have mixed-use functions; the efficiency of some of these buildings should be explored to fully maximize their potential to serve Veterans.

Existing facilities include the following:

- One inpatient hospital building
- One outpatient clinical building
- Research buildings
- Two “hoptel” buildings (short-term patient accommodations)
- A Community Living Center
- Administrative/office buildings
- Various storage, infrastructure, and other facilities

¹ Baseline information as of 2012.

² Major infrastructure facilities, such as the reservoir and the pump station, and parking structures (209 and 212) are shown in the Existing Building/Structure Inventory figure, but are not included in total gsf of habitable development.



Building styles and architectural details all lend character to the Campus.

In addition, a helipad³ is located at the northwestern corner of the Campus (designated with an “H” in **Figure 2-1**). In **Table 2-1, “Existing Building/Structure Inventory,”** each building is listed by building number, and includes a description of square footage, if applicable, and current use.

³ The helipad is used for national emergency situations.

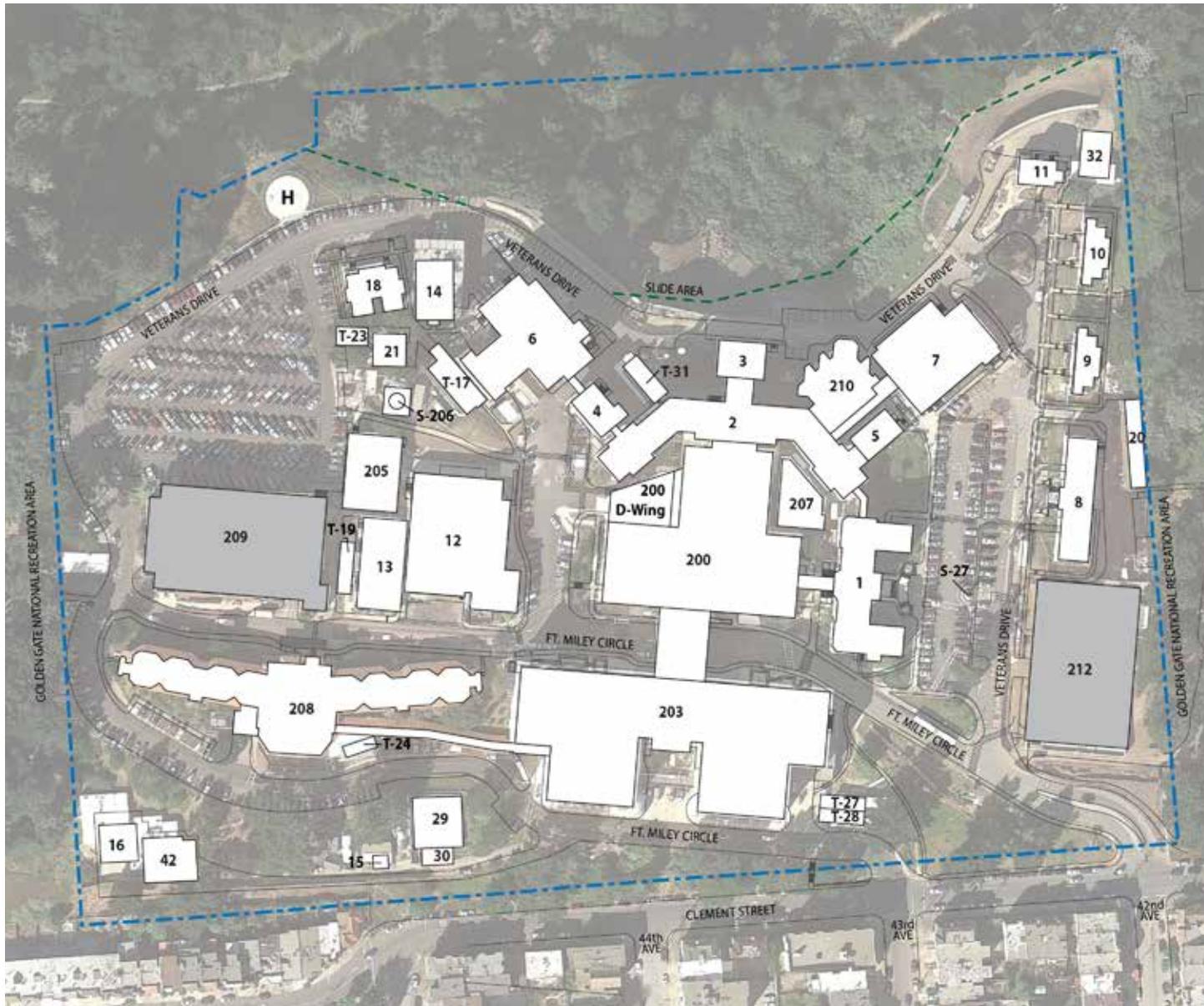
Table 2-1: Existing Building/Structure Inventory

#	gsf	Current Use
1	37,765	Clinical, Research, Geriatrics
2	126,249	Administration, Research, Clinical
3	6,871	Engineering, Administration
4	7,127	Research, Administration
5	4,590	Prosthetics, Research, Clinical, Administration
6	52,261	Administration, Shops, Research
7	22,803	Canteen, Auditorium, Chapel
8	25,521	Mental Health, Research, Clinical, Administration
9	4,750	Hoptel
10	4,750	Hoptel
11	3,720	Mental Health, Research
12	38,910	Medical Research
13	9,595	Medical Research
14	6,480	Northern California Institute for Research and Education, Research
15	350	Storage
16	3,587	Medicine AIDS Project
T-17	1,700	Research
18	9,711	Medical Research, Administration
T-19	840	Magnetic Resonance Imaging Modular Building
20	2,373	Storage
21	1,725	Research
T-23	920	Research

#	gsf	Current Use
T-24	1,056	Medical Offices
25*	1,397	Engineering Shops
T-27	600	Administration
S-27	-	Flagpole
T-28	600	Administration
29	-	Pump Station
30	-	Reservoir
T-31	1,508	Home-Based Primary Care
32	1,443	Child Care Center
T-33	1,400	Psychiatry
42	9,500	Research
200	168,295	Ambulatory Care, Clinical Support
203	335,011	Inpatient Hospital, Diagnostics, Specialty Care
205	10,093	Energy Plant
S-206	-	Water Tower
207	3,578	Information Technology
208	61,311	Community Living Center
210	18,785	Executive Offices, Reg. Counsel, Administration
Total	987,500	

*Building 25 is located directly beneath Building 3 and thus is not shown in Figure 2-1.
 Note: This table includes habitable spaces only; parking spaces and facilities are calculated separately from gsf of habitable buildings.

Source: VA Capital Assets Inventory Database - June 7, 2012



**Building 25 is located directly beneath Building 3 and thus is not shown in this figure.*

Figure 2-1: Existing Building/Structure Inventory



**Baseline information as of 2012*

Figure 2-2: Existing Building Massing

Existing Parking Inventory

As of 2012, the SFVAMC Fort Miley Campus consisted of 10 surface parking lot areas and two parking structures that provide a total of approximately 1,250 parking spaces, as shown below in **Table 2-2** and **Figure 2-3, “Existing Parking Inventory.”**

Table 2-2: Existing Parking Inventory

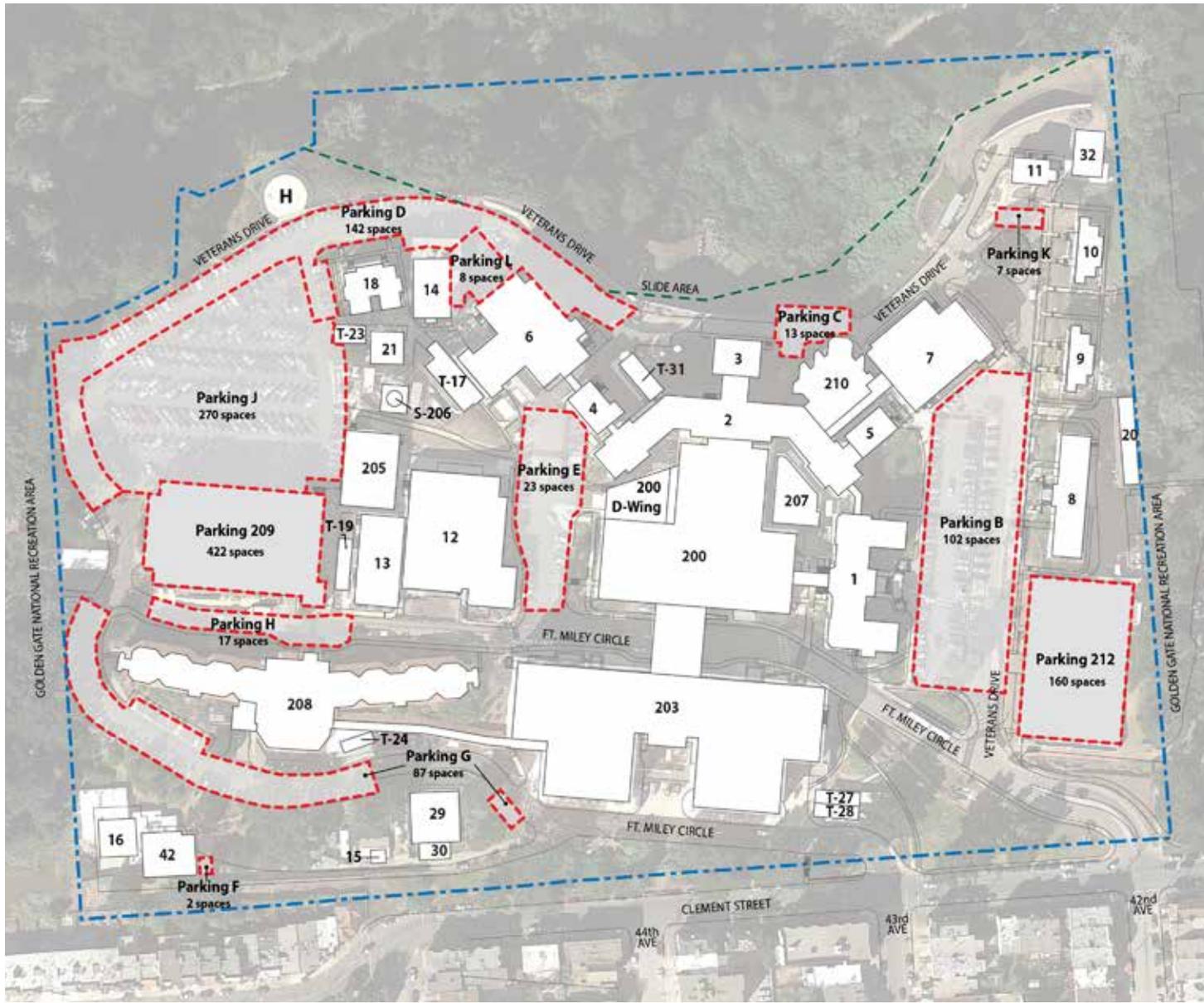
Parking Area	Type of Parking	User	Total Number of Spaces
212	Structure	Patient	160
B	Surface	Patient	102
C	Surface	Employee	13
D	Surface	GSA/Employee	142
E	Surface	Patient	23
F	Surface	Employee	2
G	Surface	Employee	87
H	Surface	Patient/Visitor	17
209	Structure	Patient/ Employee	422
J	Surface	Employee	270
K	Surface	Employee	7
L	Surface	Employee	8
TOTAL			1,253

Source: Institutional Master Plan, 2010

*Baseline information as of 2012



Existing parking areas on Campus



*Baseline information as of 2012

Figure 2-3: Existing Parking Inventory

Landscape and Open Space Conditions

Several open space areas are integrated within development at the SFVAMC Fort Miley Campus; however, the Campus does not exhibit a unified landscape theme. A picnic area located on a turf lawn north of Buildings 3, 210, and 7 provides views of the Pacific Ocean and the Marin Headlands. There are two additional landscaped lawns at the site: at the entry between 42nd and 43rd Avenues and between Buildings 1 and 5. The North Slope Stabilization Project built a retaining wall along the north side of the Campus as protection from slope slippage. This project incorporates walking trails and picnic tables, providing views of the GGNRA lands to the north and of the Pacific Ocean. The area directly north of Clement Street, at the southern end of the Campus, is heavily vegetated and serves as a landscape buffer between the site and the neighborhood to the south.

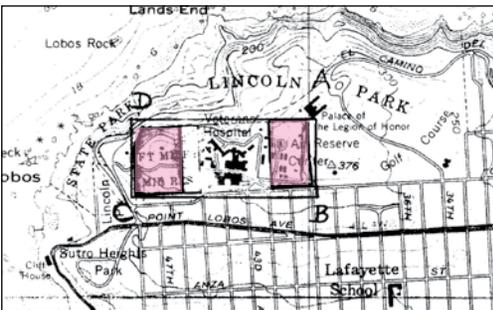
The open space conditions on the GGNRA lands immediately surrounding the SFVAMC Fort Miley Campus are exceptional, with ocean views and linked hiking trails. The transition from the formal landscape of the Campus to a more unmanaged/wooded open space is evident around the perimeter of the Campus, particularly to the north and west at the boundaries with the GGNRA areas. (Note: Chapter 4, "Urban Design Framework," contains a discussion of future landscape goals and concepts for the SFVAMC Fort Miley Campus.)



Views from SFVAMC and toward the North Slope Stabilization Project



A range of architectural styles are represented at the SFVAMC Fort Miley Campus.



Fort Miley Military Reservation Historic District
Source: National Register of Historic Places

Historic District

The northern and eastern portions of the SFVAMC Fort Miley Campus compose a historic district. The district (see **Figure 2-4, “National Register Historic District Boundary”**) was listed in the NRHP in 2009. The district is eligible under NRHP Criterion A as an example of early-20th-century standardization of VA hospitals and under Criterion C as an early example of a federal building designed with seismically resistant building technologies and for its Mayan Art Deco design. The historic district encompasses 12 acres of the Campus and contains 14 contributing buildings or structures (1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 18, 20, and the flagpole and base), and 11 noncontributing buildings or structures (14, 25, 26, T-27, T-28, 31, 32, 33, 202, 210, and 212). The boundaries of the historic district correspond to the areas that retain the highest degree of architectural integrity and historic landscaping. The period of significance for the historic district is 1934 to 1941.

Starting in the mid-20th century, the SFVAMC Fort Miley Campus underwent modifications to accommodate expanding services and new medical standards. Physical changes to the original site plan included the removal of semiformal landscape and hardscape and the introduction of modern construction of varying mass and scale in former open space areas. Most of these changes have occurred on the south and west portions of the Campus. The northeastern part of the Campus contains the core of unaltered original buildings dating to the period of significance.

The historic district retains its integrity despite these changes to the Campus over the decades. The northeastern area of the SFVAMC Fort Miley Campus retains sufficient levels of design, materials, and workmanship to adequately convey the historic appearance of its period of significance. The building materials used throughout the historic district help express the 1930s design, including reinforced concrete, steel framing, stucco and terra cotta ornament, and aluminum fixtures. The Campus’ external setting has been preserved because it is bounded by protected lands in the GGNRA to the north, east, and west. This includes the NRHP-listed Fort Miley Military Reservation Historic District to the east and west of the Campus, which recognizes the late-19th- and early-20th-century Army subpost of the Presidio that was responsible for coastal defenses.

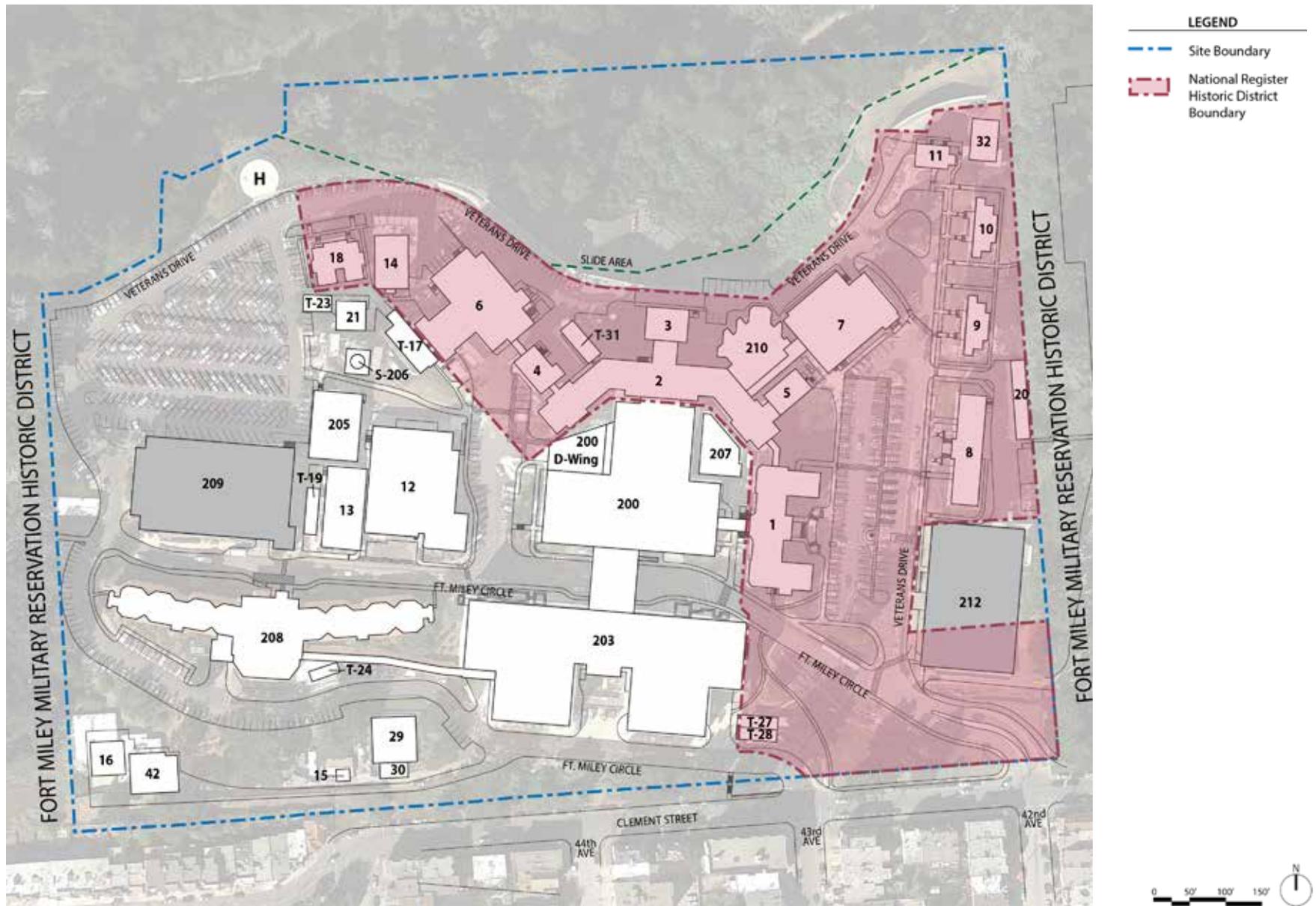


Figure 2-4: National Register Historic District Boundary



Existing circulation areas

Overview of Existing Circulation and Access

The SFVAMC Fort Miley Campus can be reached by multiple modes of transportation, which together serve to make the Campus accessible to Veterans throughout the region, as well as to employees, volunteers, and Campus visitors. Internal circulation and access are also critical factors to consider when planning for the future of the Campus, ensuring that there is clear and safe access between buildings, parking, and open space areas. The following is a description of existing access and the Fort Miley Campus' circulation network.

Regional Vehicle Access

Regional access to and from the SFVAMC Fort Miley Campus is provided by State Route 1 (SR 1), U.S. Highway 101 (U.S. 101), Interstate 80 (I-80), and Interstate 280 (I-280). Regional access to and from the Campus and the East Bay is provided by I-80 and the Bay Bridge, via U.S. 101. Access to I-80 is provided via the U.S. 101 on- and off-ramps at the Octavia Boulevard/Market Street intersection, followed by an interchange with I-80.

Regional access to and from the SFVAMC Fort Miley Campus and South Bay is provided by SR 1 (called Park Presidio Boulevard in the vicinity of the Campus) and I-280. Access to SR 1 is provided via its intersections with Clement Street and Geary Boulevard. Access to I-280 is provided via its interchange with SR 1 south of the Campus.

Regional access to and from the SFVAMC Fort Miley Campus and the North Bay is provided by SR 1 (Park Presidio Boulevard) and the Golden Gate Bridge. Access to SR 1 is provided via its intersections with Clement Street and Geary Boulevard.

Local Vehicle Access

Local access to the SFVAMC Fort Miley Campus is provided by either 42nd Avenue or 43rd Avenue via Clement Street or Geary Boulevard (see **Figure 2-5, “Existing Circulation System”**). Clement Street is an east-west roadway running from 45th Avenue to Arguello Boulevard, and Geary Boulevard is a major east-west roadway that runs between 41st Avenue and Gough Street. On-street parking is allowed on both sides of the streets surrounding the Campus.

Internal access within the SFVAMC Fort Miley Campus is provided via Fort Miley Circle and Veterans Drive. Fort Miley Circle is a two-way internal roadway located completely within the Campus. It provides one travel lane in each direction. Fort Miley Circle connects with Veterans Drive and forms an access loop around the perimeter and through the center of the site.

Passenger Vehicle Access

Passenger vehicles are the primary mode of transportation to and from the SFVAMC Fort Miley Campus. Passenger vehicle circulation around and through the Campus is provided via Fort Miley Circle and Veterans Drive. Staff members, Veterans, and visitors enter the Campus via the 42nd Avenue and 43rd Avenue entrances. Generally, the destination for Veterans and visitors is one of the parking areas on the east side of the Campus (Parking Area 212 or B) or Parking Area E in the center of the Campus. Veterans may also be dropped off and picked up on Fort Miley Circle between Buildings 200 and 203. Staff members generally park in areas on the west and north side of the Campus.

Fire Access

The San Francisco Fire Department provides emergency fire service for the SFVAMC Fort Miley Campus. Fire access is provided to each building via Fort Miley Circle and Veterans Drive. Emergency fire apparatus and related vehicles may use either the 42nd or 43rd Avenue entrances to the Campus.



42nd Avenue entrance at the southeast corner of the Campus



Muni provides bus access to the SFVAMC Fort Miley Campus

Emergency Medical Access

The SFVAMC Fort Miley Campus provides limited emergency medical service. Building 200 is the current destination of emergency vehicles arriving at the Campus. The primary entrance for emergency medical vehicles is via 42nd Avenue, and patients are delivered to the west side of Building 200 via Fort Miley Circle. Ambulance access and circulation is shown in **Figure 2-5**.

Delivery Vehicle Access

Medical, office, and food service supplies are delivered daily. Fort Miley Circle and Veterans Drive provide access to several individual building delivery bays, some of which can accommodate semitrailers. Delivery trucks currently may use either entrance to the Campus, depending on the type and destination of the delivery. Delivery vehicle access and circulation is illustrated in **Figure 2-5**.

Transit

The San Francisco Municipal Transportation Agency operates the 38 Geary, 38L Geary Limited, and 38AX Geary A Express in the vicinity of the SFVAMC Fort Miley Campus. Every other bus on the 38 Geary route provides direct access into the Campus via Veterans Drive/Fort Miley Circle. Otherwise, all three 38 lines (38 Geary, 38 L Geary Limited, and 38 AX Geary A) stop at Point Lobos Avenue, one block south of the Campus. The 38BX Geary B Express route does not run through the Fort Miley Campus; the last outbound stop on this line is located at Geary Street and 25th Avenue.

Shuttle

The SFVAMC transport system consists of a fleet of buses and operates along the U.S. 101 corridor. This transport system takes Veterans to and from appointments at clinics in Clearlake, Eureka, Santa Rosa, Ukiah, and the SFVAMC Fort Miley Campus. The transport system also provides daily shuttles between the SFVAMC Fort Miley Campus and the San Francisco VA Downtown Clinic, San Bruno VA Outpatient Clinic, and the University of California, San Francisco (Parnassus).

In addition, SFVAMC contracts with a major transportation service to provide free daily bus and shuttle service to Veterans and staff members. The service operates between the SFVAMC Fort Miley Campus and major transportation hubs in San Francisco from 5 a.m. to 9:40 a.m. and from 2:30 p.m. to 7:05 p.m. More than 200 Veterans and staff use this service daily.

Taxi Access

Veterans may be dropped off and picked up on Fort Miley Circle at designated taxi stops located between Buildings 200 and 203 and between Buildings 209 and 208. Taxis enter the Campus through either the 43rd Avenue entrance or 42nd Avenue entrance, depending on their final destination.

Pedestrian Access

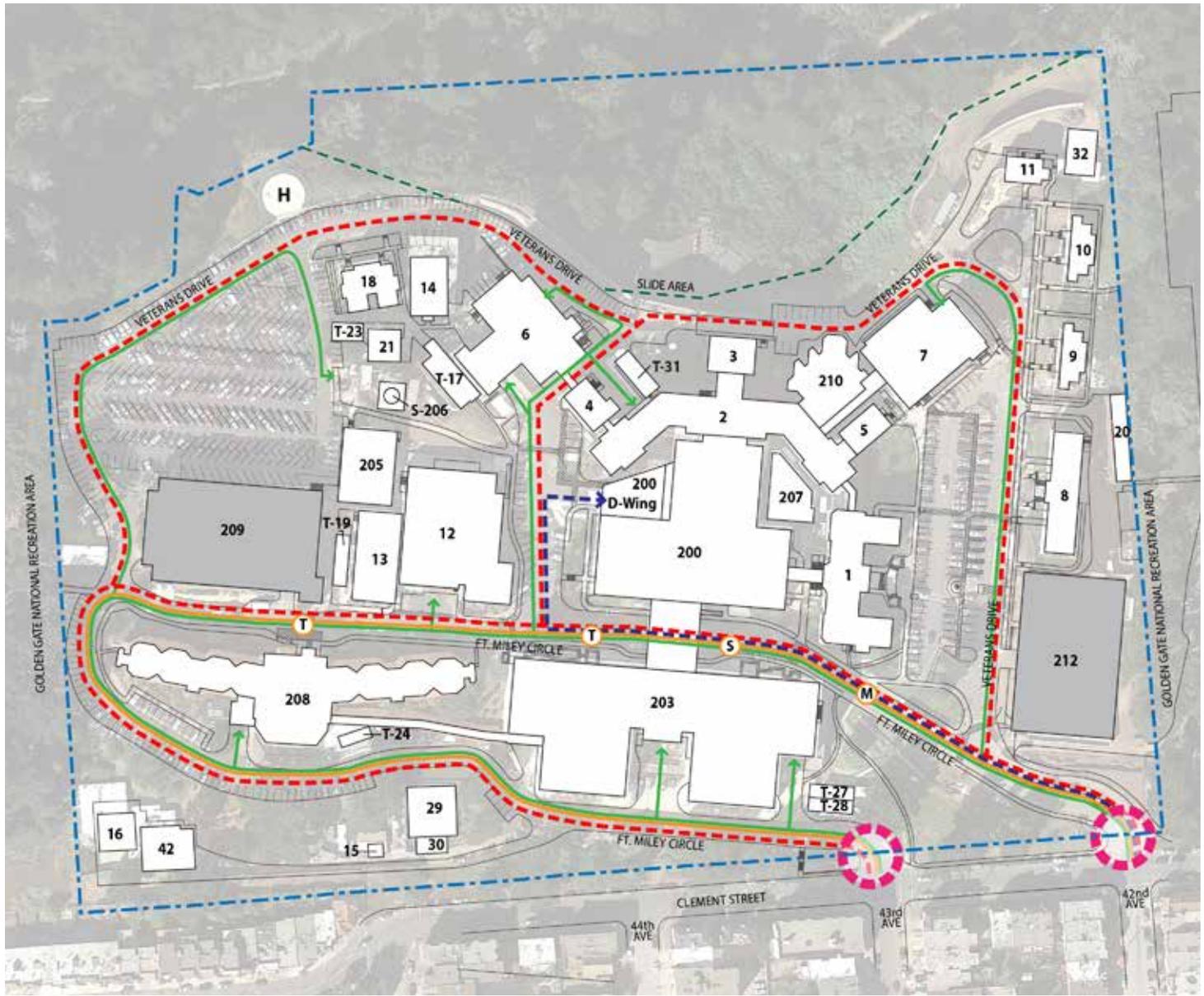
Sidewalks and walkways are provided within the SFVAMC Fort Miley Campus and connect to sidewalks along Clement Street. Sidewalks are provided around Fort Miley Circle and Veterans Drive, and between buildings within the Campus. Accessible paths of travel across designated patient and visitor parking areas are clearly indicated. All major streets in the vicinity of the Campus have sidewalks and all major intersections have marked crosswalks. In addition, most intersection corners in the vicinity of the Campus provide Americans with Disabilities Act-compatible curb ramps.

Bicycle Access

Four major citywide bicycle routes (Routes 10, 85, 95, and 395) consisting of Class I bikeways (paved off-street paths) and Class III bikeways (signed routes, where bicyclists share travel lanes with vehicles) are located in the vicinity of the SFVAMC Fort Miley Campus. Routes 10 and 95 travel along Clement Street (immediately south of the Campus) while Routes 85 and 395 travel from Legion of Honor Drive to El Camino del Mar to the north and east of the Campus. Bicycle lockers are provided to staff members to encourage biking as an alternative means of transportation.



VA shuttle



*Baseline information as of 2012

Figure 2-5: Existing Circulation System



Development Program **3**



The SFVAMC Fort Miley Campus must evolve to continue to meet future growth projections and the needs of its patients.

Development Program Overview

The development program contained in this LRDP is intended to upgrade SFVAMC to serve the 21st-century needs of and provide the highest quality medical care to Veterans, and to ensure that SFVAMC is able to address the current space deficiency at the Fort Miley Campus. To achieve this goal, SFVAMC will modernize existing facilities; retrofit or replace seismically threatened buildings; and create new structures that house patient care, education, administrative, hoptel, and research functions, as well as provide increased parking for Veterans, staff members, and visitors. The projects will also allow for continued medical research, ensuring that the SFVAMC Fort Miley Campus remains a leader within the overall VA system.

All new construction included in the LRDP program will be designed to achieve Leadership in Energy and Environmental Design (LEED®) Silver certification and will implement VA's Strategic Sustainability Performance Plan, which identifies VA's sustainability goals and defines policy and strategy for achieving these goals.

Figure 3-1, "Summary Site Plan," provides a graphic overview of the actions anticipated as part of the LRDP, organized by the following categories:

- **Retrofitting** (seismic upgrades, according to VA Seismic Design Requirements; seismic retrofits of existing buildings that do not involve adding new square footage/ space)
- **Demolition or removal** (demolition of existing buildings with a foundation or removal of existing modular/trailer buildings without a foundation)
- **Expansion** of existing buildings (construction of new square footage/space as an expansion to an existing building, without a new building footprint area)
- **New construction** (construction of new square footage/space that includes new building footprint area)

- **Temporary modular swing space** (addition of temporary new modular/trailer square footage/space without construction of a foundation; the space would be necessary during LRDP construction and would be removed once no longer needed)
- **No action** (existing buildings for which no action is proposed)
- **Modular** (addition of new modular/trailer square footage/space without construction of a foundation)

As indicated in the Summary Site Plan, the development program for the SFVAMC Fort Miley Campus is comprehensive, with new construction, seismic retrofits, and expansion planned. All construction staging will occur on the Campus, within previously disturbed areas.

The circulation and access network will also be amended to improve access to existing and new buildings (described in more detail in Chapter 5, "Circulation"). This LRDP does not contain detailed information about infrastructure improvements; however, it is assumed that all infrastructure systems will be upgraded as needed to meet capacity requirements to serve the development program described in this plan.

Table 3-1, “LRDP Development Summary,” provides an overall summary of planned new construction and demolition, organized in two development phases, as well as the SFVAMC Fort Miley Campus’ total gross square footage at plan buildout.

Table 3-1: LRDP Development Summary

	Phase 1	Phase 2	Totals
New Development (gsf)	216,300	170,000	386,300
Demo/Removal (gsf)	-64,100	0	-64,100
Net New Development	152,200	170,000	322,200
Net New Parking Spaces	450	0	450
Existing Development			987,500
LRDP Buildout			1,309,700

Note: This table includes habitable spaces only; parking spaces and facilities are calculated separately from gsf of habitable buildings.



Scenarios A and B

VA has developed a complex internal planning process that it follows to create master plans for its campuses. This LRDP represents the master planning for the SFVAMC Fort Miley Campus for both the short term and long term, as projected through to 2027.

However, VA revisits its planning forecasts every year because implementation of facility components in the LRDP is dependent on federal funding cycles. As part of the planning process, VA has developed two scenarios, Scenario A and Scenario B, for the SFVAMC Fort Miley Campus.

Detailed descriptions of each development phase (1 and 2) for each scenario (A and B) are included in this chapter. LRDP Scenario A and Scenario B entail different construction phasing, schedules, and temporary modular swing space locations; however, the ultimate buildout of both scenarios at the SFVAMC Fort Miley Campus would ultimately be the same in terms of gross square footage, building locations on Campus, and intended building functions.

Summary of Scenario A, Phase 1

Actions planned for Scenario A, Phase 1 will occur between 2013 and mid-year 2020 and will include a combination of proposed building actions. **Table 3-2, “Scenario A, Phase 1 Development Program,”** summarizes the development program for Scenario A, Phase 1, including information about building plans and anticipated construction start and end dates. **Figure 3-2, “Scenario A, Phase 1 Plan (2013 to mid-year 2020),”** provides a graphic illustration for Scenario A, Phase 1 development; **Figure 3-3, “Scenario A, Phase 1 Massing (2013 to mid-year 2020),”** illustrates the approximate massing of the development program for Scenario A, Phase 1.

Phase 1 of development for this scenario includes a range of new construction projects, expansion of existing buildings, seismic retrofits, and demolition, which will provide significant upgrades for medical care and research facilities, parking facilities, and enhancements to the Campus’ character and experience.

Table 3-2: Scenario A, Phase 1 Development Program

Phase 1: 2013 to mid-year 2020								
Phase	Building	Action	gsf	Demo	Net New Parking	Stories	Construction Start	Construction Complete
1.1	Building 211 (Emergency Operations Center & Parking Garage)	Construction	5,000	0	200	4	Jul-13	Jul-14
1.2	Trailer 17	Removal	0	-1,700			Dec-13	Jan-14
	Building 41 (Research)	Construction	14,200	0		2	Jan-14	Mar-15
1.3	Buildings 5 and 7	Seismic Retrofit	0	0			Mar-14	May-15
1.4	Buildings 9 and 10	Seismic Retrofit	0	0			Mar-14	May-15
	Building 22 (Hoptel)	Construction	8,700	0		2	Mar-14	May-15
1.5	Parking Garage Extensions (Buildings 209 & 211)	Construction	0	0	250	5 & 4	Mar-15	Mar-16
1.6	Building 203 C-Wing Extension (Ground Floor Patient Welcome Center) & Drop-Off Area with Canopy Structure	Construction	7,100	0		1	Jun-15	Aug-16
1.7	Building 200 Expansion (Operating Room D-Wing)	Construction	5,300	0		1	Jun-15	Jun-16
1.8	Building 20	Demolition	0	-2,300			Aug-15	Sep-15
	Building 24 (Mental Health Clinical Expansion)	Construction	15,600	0		3	Sep-15	Oct-16
1.9	Building 18	Demolition	0	-9,700			Sep-15	Dec-15
	Building 14	Demolition	0	-6,400			Sep-15	Dec-15
	Building 21	Demolition	0	-1,700			Sep-15	Dec-15
	Trailer 23	Removal	0	-900			Sep-15	Dec-15
	Structure 206 (Water Tower)	Installation	0	0			Sep-15	Dec-15
	Structure 206 (Water Tower)	Removal	0	0			Sep-15	Dec-15
	Building 40 (Research)	Construction	110,000	0		5 plus basement	Dec-15	Dec-18
1.10	Building 207 Expansion (IT Support Space)	Construction	7,000	0		2	Nov-15	Jan-17
1.11	Trailer 31	Removal	0	-1,500			Nov-15	Dec-15
	Building 43 (Research and Administration)	Construction	15,000	0		2	Dec-15	Feb-17
1.12	Trailer 36 (New Modular)	Installation	2,200	0			Jun-16	Sep-16
1.13	Building 23 (Mental Health Research Expansion)	Construction	15,000	0		3 plus basement	Oct-16	Dec-17
1.14	Building 203 Extension (Psychiatric Intensive Care Unit C-Wing)	Construction	1,200	0			Dec-16	Jun-18
	Trailer 24	Removal	0	-1,000			Dec-16	Feb-17
1.15	Building 208 Extension (Community Living Center & National Cardiac Device Surveillance Center)	Construction	10,000	0		3	Feb-17	Aug-18
1.16	Buildings 1, 6, & 8	Seismic Retrofit	0	0			Jul-17	Mar-19
1.17	Building 12	Demolition	0	-38,900			Sep-19	Aug-20
	Phase 1 Total New Construction		216,300					
	Phase 1 Total Demolition			-64,100				
	Phase 1 Net New Construction		152,200					
Temporary Space¹								
	Temporary Modular Swing Space (multiple locations)		60,000				Apr-16	Mar-17

1 Not included in total gsf, as it is temporary space

Note: This table includes habitable spaces only; parking spaces and facilities are calculated separately from gsf of habitable buildings.



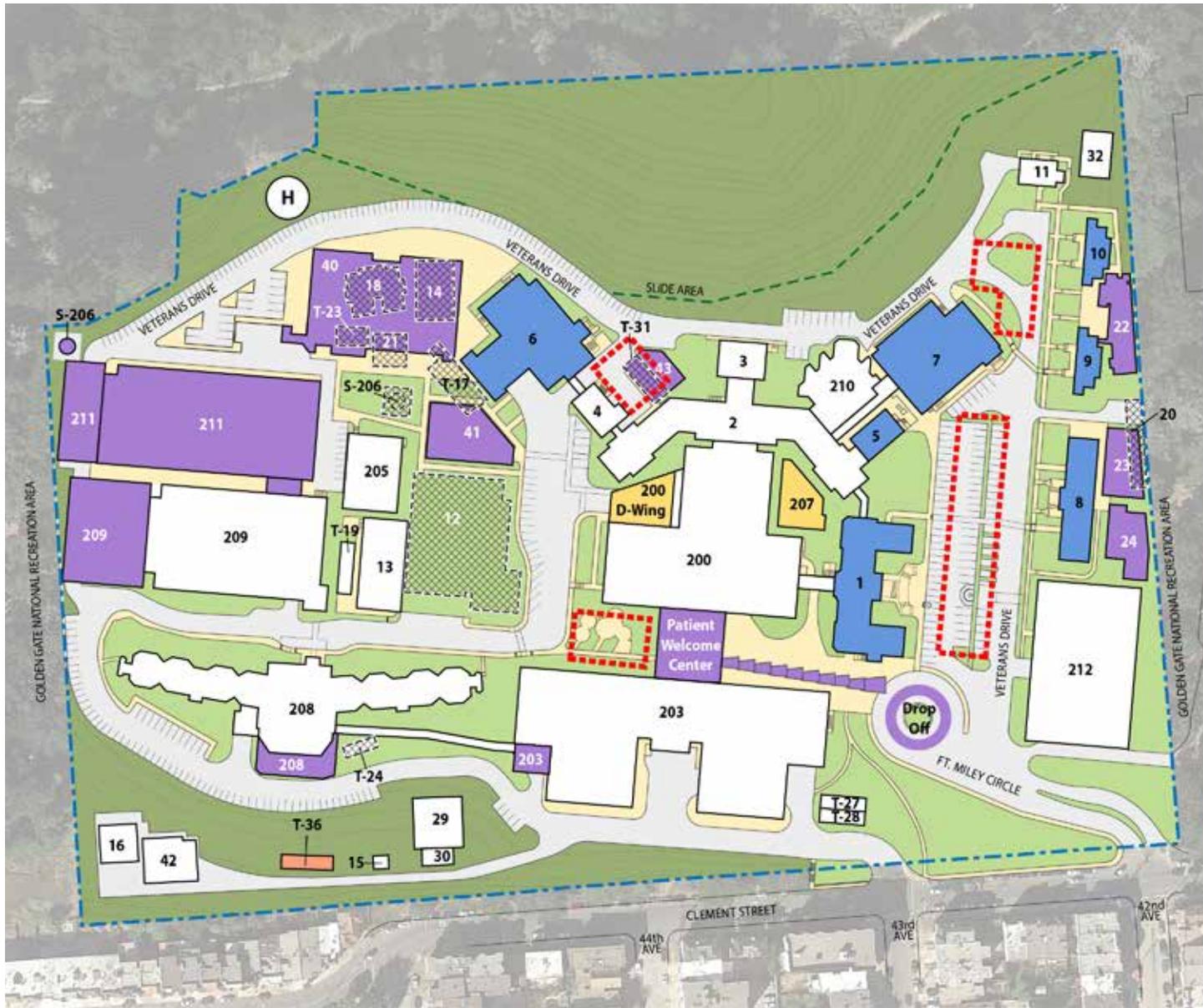
SFVAMC requires premier space to conduct and manage clinical, administrative, educational and research programs.

The following projects are included in Scenario A, Phase 1:

- Construction of Building 211, which will contain an emergency operations center, storage area, and new parking structure providing 200 net new spaces, on the western side of the Campus. This project also includes a vehicular connection to Building 209, an existing parking structure.
- Removal of Building 17 and subsequent construction of Building 41, designed as a new research facility, within the western portion of the Campus.
- Seismic retrofit of Buildings 1, 5, 6, 7, 8, 9, and 10 to current seismic safety requirements.
- Construction of Building 22, a new hoptel facility, located between Buildings 9 and 10 (existing hoptels) along the eastern side of the Campus and construction of a connection from Building 22 to Building 9.
- Construction of the parking garage extensions at Buildings 209 and 211 providing 250 net new spaces along the western side of the Campus. The at-grade levels of these two parking garage building extensions would overhang Veterans Drive, maintaining the existing circulation.
- Construction of Building 203 C-Wing extension, a new ground floor Patient Welcome Center, and drop-off area with a canopy structure connecting to the Welcome Center. The Welcome Center, which will be located between Building 200 and Building 203 (Hospital) in the center of the SFVAMC Fort Miley Campus, is intended to simplify and enhance the patient and visitor experience at the Campus. It is anticipated that all Veterans entering the Campus will start their visits at the Patient Welcome Center and will be directed or accompanied to their destinations. The Patient Welcome Center will also incorporate a healing garden area, envisioned as a place of sanctuary and serenity for all Veterans, employees, and visitors. As indicated in **Figure 3-2**, the drop-off area within the southern portion of the Campus will be designed as a roundabout outside the Patient Welcome Center and will be clearly signed and accessible from the 42nd Avenue entrance to the Campus.

- Expansion of Building 200 in the northwest corner, providing additional operating room space, specifically a new D-Wing.
- Demolition of Building 20 and subsequent construction of Building 23, designed as a mental health research expansion, on the eastern side of the Campus.
- Construction of Building 24, a new and expanded space for the Mental Health Clinic, on the eastern side of the Campus.
- Demolition of Buildings 14, 18, and 21 and removal of T-23, demolition of the existing water tower and construction of a replacement tower at the northwest corner of the proposed Building 211, and subsequent construction of Building 40 (designed as a new research facility) within the northern portion of the Campus.
- Expansion of Building 207, providing additional IT support space.
- Demolition of Building 31 and subsequent construction of Building 43, which will replace the medical research and administrative functions currently contained within Building 18, within the northern portion of the Campus.
- Installation of Trailer 36, a new modular, within the southern portion of the Campus, west of Building 15.
- Addition of 60,000 gross square feet (gsf) of temporary modular swing space spread over four locations on Campus (refer to **Figure 3-2**).
- Construction of Building 203 extension (Psychiatric Intensive Care Unit) along the southern portion of the Campus.
- Removal of Trailer 24 within the southern portion of the Campus.
- Construction of Building 208 extension, housing the Community Living Center and National Cardiac Device Surveillance Center.
- Removal of the 60,000 gsf of temporary modular swing space spread across the Campus.
- Demolition of Building 12, which contains medical research functions.

3 Development Program



LEGEND

- Site Boundary
- New Construction
- Expansion
- Retrofit
- Modular
- No Action
- Demolition/Removal
- Temporary Modular Swing Space (60,000 gsf in total)

New Development (gsf)	
Building 22	8,700
Building 23	15,000
Building 24	15,600
Building 40	110,000
Building 41	14,200
Building 43	15,000
Building 200 D-Wing Exp	5,300
Building 203	1,200
Building 207 Exp	7,000
Building 208	10,000
Building 211	5,000*
Patient Welcome Center	7,100
T-36	2,200
Total	216,300

Demolition (gsf)	
Building 12	-38,900
Building 14	-6,400
Building 18	-9,700
Building 20	-2,300
Building 21	-1,700
T-17	-1,700
T-23	-900
T-24	-1,000
T-31	-1,500
Total	-64,100
Net New Total	152,200

* Habitable Space

Figure 3-2: Scenario A, Phase 1 Plan (2013 to mid-year 2020)



LEGEND

- - - Site Boundary
- New Construction
- Expansion
- Retrofit
- Modular
- No Action



Figure 3-3: Scenario A, Phase 1 Massing (2013 to mid-year 2020)

Summary of Scenario A, Phase 2

Actions planned for Scenario A, Phase 2 will occur between mid-year 2020 and 2027 and will include construction of Building 213, the new Clinical Addition Building, which will be located in the center of the Campus. Construction of the Building 213 will occur roughly in the location of the demolition footprint of Building 12. **Table 3-3, “Scenario A, Phase 2 Development Program,”** summarizes the development program for Scenario A, Phase 2. **Figure 3-4, “Scenario A, Phase 2 Plan (mid-year 2020 to 2027),”** provides a graphic illustration of the Campus for Scenario A, Phase 2 development; **Figure 3-5, “Scenario A, Phase 2 Massing (mid-year 2020 to 2027),”** illustrates the approximate building massing.

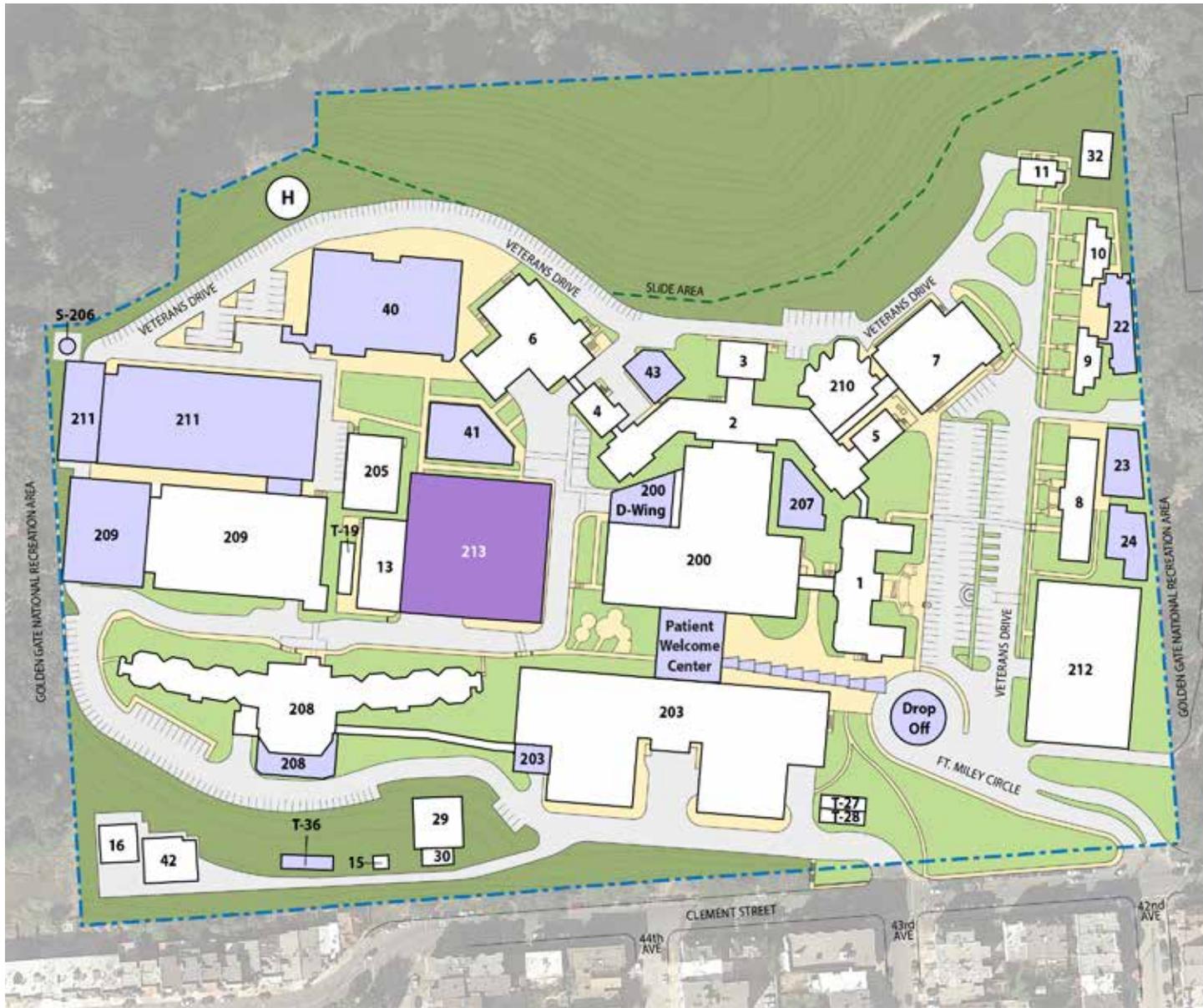
Table 3-3: Scenario A, Phase 2 Development Program

Phase 2: Mid-year 2020 to 2027						
Phase	Building	Action	gsf	Stories	Construction Start	Construction Complete
2.1	Building 213 (Clinical Addition Building)	Construction	170,000	5 plus basement	Mar-24	Mar-26
	Phase 2 Total New Construction		170,000			
	Phase 2 Net New Construction		170,000			

Note: This table includes habitable spaces only; parking spaces and facilities are calculated separately from gsf of habitable buildings.

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3 Development Program



LEGEND

- Site Boundary
- Phase 2 New Construction
- Phase 1 Buildings
- No Action

New Development	(gsf)
Building 213	170,000
Total	170,000

Figure 3-4: Scenario A, Phase 2 Plan (mid-year 2020 to 2027)





- LEGEND**
- - - Site Boundary
 - Phase 2 New Construction
 - Phase 1 Buildings
 - No Action



Figure 3-5: Scenario A, Phase 2 Massing (mid-year 2020 to 2027)



SFVAMC staff provide personalized, proactive, patient-centered care.

Summary of Scenario B, Phase 1

Actions planned for Scenario B, Phase 1 will occur between 2013 and mid-year 2020, and will include a combination of proposed building actions. **Table 3-4, “Scenario B, Phase 1 Development Program,”** summarizes the development program for Scenario B, Phase 1, including information about building plans and anticipated construction start and end dates. **Figure 3-6, “Scenario B, Phase 1 Plan (2013 to mid-year 2020),”** provides a graphic illustration; **Figure 3-7, “Scenario B, Phase 1 Massing (2013 to mid-year 2020),”** illustrates the approximate massing of the development program for Scenario B, Phase 1.

Phase 1 of development for this scenario includes a range of new construction projects, expansion of existing buildings, seismic retrofits, and demolition, which will provide significant upgrades for medical care and research facilities, parking facilities, and enhancements to the Campus’ character and experience.

Table 3-4: Scenario B, Phase 1 Development Program

Phase 1: 2013 to mid-year 2020								
Phase	Building	Action	gsf	Demo	Net New Parking	Stories	Construction Start	Construction Complete
1.1	Building 211 (Emergency Operations Center & Parking Garage)	Construction	5,000	0	200	4	Jul-13	Jul-14
1.2	Trailer 17	Removal	0	-1,700			Dec-13	Jan-14
	Building 41 (Research)	Construction	14,200	0		2	Jan-14	Mar-15
1.3	Buildings 5 and 7	Seismic Retrofit	0	0			Mar-14	May-15
1.4	Buildings 9 and 10	Seismic Retrofit	0	0			Mar-14	May-15
	Building 22 (Hoptel)	Construction	8,700	0		2	Mar-14	May-15
1.5	Parking Garage Extensions (Buildings 209 & 211)	Construction	0	0	250	5 & 4	Mar-15	Mar-16
1.6	Building 203 C-Wing Extension (Ground Floor Patient Welcome Center) & Drop-Off Area with Canopy Structure	Construction	7,100	0		1	Jun-15	Aug-16
1.7	Building 200 Expansion (Operating Room D-Wing)	Construction	5,300	0		1	Jun-15	Jun-16
1.8	Building 20	Demolition	0	-2,300			Aug-15	Sep-15
	Building 24 (Mental Health Clinical Expansion)	Construction	15,600	0		2	Sep-15	Oct-16
1.9	Building 18	Demolition	0	-9,700			Sep-15	Dec-15
	Building 14	Demolition	0	-6,400			Sep-15	Dec-15
	Building 21	Demolition	0	-1,700			Sep-15	Dec-15
	Trailer 23	Removal	0	-900			Sep-15	Dec-15
	Structure 206 (Water Tower)	Installation	0	0			Sep-15	Dec-15
	Structure 206 (Water Tower)	Construction	0	0			Sep-15	Dec-15
1.10	Building 40 (Research)	Construction	110,000	0		5 plus basement	Dec-15	Sep-18
1.10	Building 207 Expansion (IT Support Space)	Construction	7,000	0		2	Nov-15	Jan-17
1.11	Trailer 31	Removal	0	-1,500			Nov-15	Dec-15
	Building 43 (Research and Administration)	Construction	15,000	0		2	Dec-15	Feb-17
1.12	Trailer 36 (New Modular)	Installation	2,200	0		1	Jun-16	Sep-16
1.13	Building 23 (Mental Health Research Expansion)	Construction	15,000	0		3 plus basement	Oct-16	Dec-17
1.14	Building 203 Extension (Psychiatric Intensive Care Unit C-Wing)	Construction	1,200	0		2	Dec-16	Jun-18
1.15	Trailer 24	Removal	0	-1,000			Dec-16	Feb-17
	Building 208 Extension (Community Living Center & National Cardiac Device Surveillance Center)	Construction	10,000	0		3	Feb-17	Aug-18
1.16	Building 12	Demolition	0	-38,900			Nov-18	Oct-19
	Phase 1 Total New Construction		216,300					
	Phase 1 Total Demolition			-64,100				
	Phase 1 Net New Construction		152,200					
Temporary Space¹								
	Temporary Modular Swing Space (single location)		60,000				Oct-19	Oct-20

¹ Not included in total gsf, as it is temporary space

Note: This table includes habitable spaces only; parking spaces and facilities are calculated separately from gsf of habitable buildings.



SFVAMC seeks to continue to be a state-of-the-art medical facility to serve Veterans and explore the latest in medical technologies.

The following projects are included in Scenario B, Phase 1:

- Construction of Building 211, which will contain an emergency operations center, storage area, and new parking structure providing 200 net new spaces, on the western side of the Campus. This project also includes a vehicular connection to Building 209, an existing parking structure.
- Demolition of Building 17 and subsequent construction of Building 41, designed as a new research facility, within the western portion of the Campus.
- Seismic retrofit of Buildings 5, 7, 9, and 10 to current seismic safety requirements.
- Construction of Building 22, a new hoptel facility, located between Buildings 9 and 10 (existing hoptels) along the eastern side of the Campus and construction of a connection from Building 22 to Building 9.
- Construction of the parking garage extensions at Buildings 209 and 211 providing 250 net new spaces along the western side of the Campus. The at-grade levels of these two parking garage building extensions would overhang Veterans Drive, maintaining the existing circulation.
- Construction of Building 203 C-Wing extension, a new ground floor Patient Welcome Center, and drop-off area with a canopy structure connecting to the Welcome Center. The Patient Welcome Center, which will be located between Building 200 and Building 203 (Hospital) in the center of the Campus, and is intended to simplify and enhance the patient and visitor experience at the SFVAMC Fort Miley Campus. It is anticipated that all Veterans entering the Campus will start their visits at the Patient Welcome Center and will be directed or accompanied to their destinations. The Patient Welcome Center will also incorporate a healing garden area, envisioned as a place of sanctuary and serenity for all Veterans, employees, and visitors. As indicated in **Figure 3-6**, the drop-off area within the southern portion of the Campus will be designed as a roundabout outside the Patient Welcome Center and will be clearly signed and accessible from the 42nd Avenue entrance to the Campus.

- Expansion of Building 200 in the northwest corner, providing additional operating room space, specifically a new D-Wing.
- Demolition of Building 20 and subsequent construction of Building 23, designed as a mental health research expansion, on the eastern side of the Campus.
- Construction of Building 24, a new and expanded space for the Mental Health Clinic, on the eastern side of the Campus.
- Demolition of Buildings 14, 18, and 21 and removal of T-23, demolition of the existing water tower and construction of a replacement tower at the northwest corner of the proposed Building 211, and subsequent construction of Building 40 (designed as a new research facility) within the northern portion of the Campus.
- Expansion of Building 207, providing additional IT support space.
- Demolition of Building 31 and subsequent construction of Building 43, which will replace the medical research and administrative functions currently contained within Building 18, within the northern portion of the Campus.
- Installation of Trailer 36, a new modular, within the southern portion of the Campus, west of Building 15.
- Construction of Building 203 extension (Psychiatric Intensive Care Unit) along the southern portion of the Campus.
- Removal of Building T-24 within the southern portion of the Campus.
- Construction of Building 208 extension, housing the Community Living Center and National Cardiac Device Surveillance Center.
- Demolition of Building 12, which contains medical research functions.
- Addition of a two-story, 60,000-gsf temporary modular swing space in one location (within the demolition footprint of Building 12) in the center of the Campus.

3 Development Program



LEGEND

- Site Boundary
- New Construction
- Expansion
- Retrofit
- Modular
- No Action
- Demolition/Removal
- Temporary Modular Swing Space (60,000 gsf in total)

New Development (gsf)	
Building 22	8,700
Building 23	15,000
Building 24	15,600
Building 40	110,000
Building 41	14,200
Building 43	15,000
Building 200 D-Wing Exp	5,300
Building 203	1,200
Building 207 Exp	7,000
Building 208	10,000
Building 211	5,000*
Patient Welcome Center	7,100
T-36	2,200
Total	216,300

Demolition (gsf)	
Building 12	-38,900
Building 14	-6,400
Building 18	-9,700
Building 20	-2,300
Building 21	-1,700
T-17	-1,700
T-23	-900
T-24	-1,000
T-31	-1,500
Total	-64,100
Net New Total	152,200

* Habitable Space

Figure 3-6: Scenario B, Phase 1 Plan (2013 to mid-year 2020)



LEGEND

- - - Site Boundary
- New Construction
- Expansion
- Retrofit
- Modular
- No Action



Figure 3-7: Scenario B, Phase 1 Massing (2013 to mid-year 2020)

Summary of Scenario B, Phase 2

Actions planned for Scenario B, Phase 2 will occur between mid-year 2020 and 2027 and will include construction of Building 213, a new Clinical Addition Building, in addition to seismic retrofits. **Table 3-5, “Scenario B, Phase 2 Development Program,”** summarizes the development program. **Figure 3-8, “Scenario B, Phase 2 Plan (mid-year 2020 to 2027),”** provides a graphic illustration for this phase, and **Figure 3-9, “Scenario B, Phase 2 Massing (mid-year 2020 to 2027),”** illustrates the approximate building massing.

The following projects are included in Scenario B, Phase 2:

- Seismic retrofit of Buildings 1, 6, and 8 to current seismic safety requirements.
- Removal of the 60,000 gsf of temporary modular swing space in the center of the Campus.
- Construction of the Clinical Addition Building roughly within the location of the demolition footprint of Building 12 in the center of the Campus.

Table 3-5: Scenario B, Phase 2 Development Program

Phase 2: Mid-year 2020 to 2027							
Phase	Building	Action	gsf	Net New	Stories	Construction Start	Construction Complete
2.1	Building 8	Seismic Retrofit	0	0		Oct-20	Dec-21
2.2	Building 1	Seismic Retrofit	0	0		Oct-20	Jun-22
2.3	Building 6	Seismic Retrofit	0	0		Jun-22	Feb-24
2.4	Building 213 (Clinical Addition Building)	Construction	170,000	170,000	5 plus basement	Mar-24	Mar-26
Phase 2 Total New Construction			170,000				
Phase 2 Net New Construction			170,000				

Note: This table includes habitable spaces only; parking spaces and facilities are calculated separately from gsf of habitable buildings.

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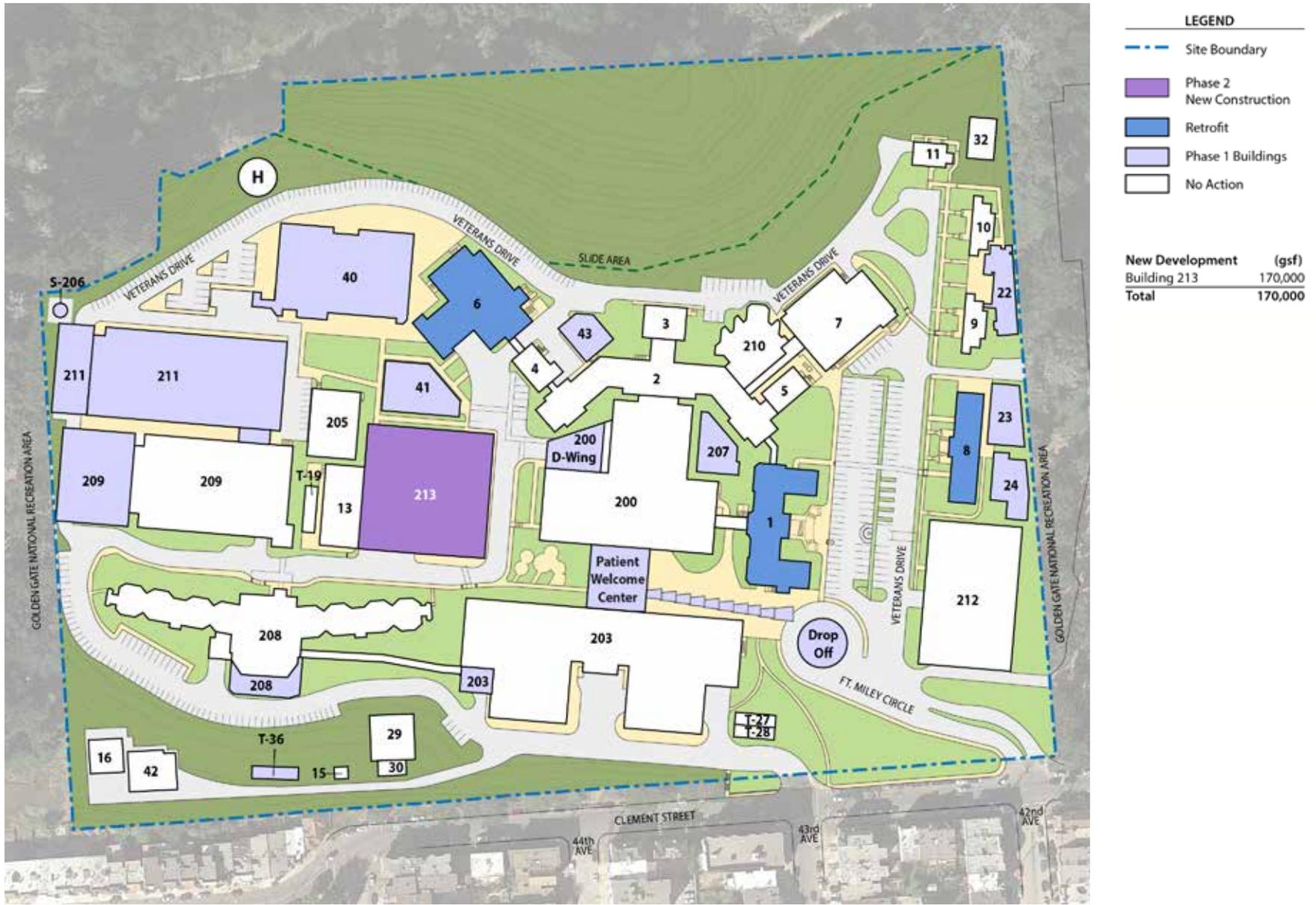


Figure 3-8: Scenario B, Phase 2 Plan (mid-year 2020 to 2027)



LEGEND

- - - Site Boundary
- Phase 2
New Construction
- Retrofit
- Phase 1 Buildings
- No Action



Figure 3-9: Scenario B, Phase 2 Massing (mid-year 2020 to 2027)



The Mission Bay area of San Francisco is a potential expansion site.

Off-Site Scenario

Although this Long Range Development Plan plans for the buildout of the SFVAMC Fort Miley Campus, it is possible that an expansion at another site in San Francisco will be considered to accommodate potential future development. Potential expansion sites could be considered in the Mission Bay area of San Francisco.



Urban Design Framework

4



View from the SFVAMC Fort Miley Campus to the north



View from the SFVAMC Fort Miley Campus to the south

Urban Form Vision

As the development program contained in this LRDP is implemented, several key urban design factors should be considered to create and maintain an attractive, usable, and accessible SFVAMC Fort Miley Campus with a distinct sense of place and identity. Three fundamental elements together form a cohesive vision for the Campus' urban form:

- Iconic location and status of the Campus, contributing to the user experience
- Environmentally sensitive setting and exceptional views
- Historic architecture and building character

Each of these elements is described in detail in the following sections.

Campus Location and Status

This LRDP strives to build on the SFVAMC Fort Miley Campus' location and status and considers a holistic approach to creating a cohesive Campus character and providing a positive experience for Veterans, visitors, and employees.

Visual Components

The SFVAMC Fort Miley Campus enjoys a special and iconic position within the San Francisco landscape, located at the top of a hill and adjacent to spectacular open space areas that provide exceptional views of the Pacific Ocean, the Marin Headlands, and the Golden Gate Bridge. The Campus' location and existing development fabric signal a clear sense of place and arrival at a destination. The Campus' character is enhanced by distinct architectural styles of buildings. Future development patterns should embrace and build on the SFVAMC Fort Miley Campus' hilltop location status, continuing to provide exceptional views and enhance Campus character.

Access

Access to and mobility throughout the SFVAMC Fort Miley Campus is a key element to creating a cohesive sense of place and enhancing the user experience. This LRDP provides a hierarchy of roadways, with separate zones designated primarily for Veterans/visitors and for employees and service functions, as illustrated in **Figure 4-1, “Campus User Zones.”**

The 43rd Avenue entrance will be designated primarily for employees and service/delivery vehicles, with clear signage and direction to parking and delivery areas, while the main Veteran and visitor entrance will be accessed from 42nd Avenue. Upon arrival at the 42nd Avenue entrance, a motorist will be directed to the drop-off area and Patient Welcome Center and will have the option to park in designated areas. Transit and shuttle vehicles, as well as fire and delivery trucks, can access the Campus at both entrances and follow signage along the outer loop road that will direct them to their final destinations.

Two gates will be installed to provide a separation between employee-only and publicly accessed areas. One gate will be located south of the parking garage extension area at Building 209 on the western edge of the Campus and the other will be situated northeast of Building 6. Access beyond these points from Campus entrances will require a credential VA-issued badge. Adequate queuing areas will be provided.

The LRDP also emphasizes pedestrian mobility. Building placement and orientation will consider pedestrian access, with clear entryways and destinations. Pathways between buildings, parking areas, and open spaces will be clearly defined to enhance the pedestrian experience.

Signage

It is important that Veterans, visitors, and employees are able to quickly find where they need to be; therefore, clear direction should be provided through an effective signage program. Signage should address pertinent information such as the layout of the Campus and buildings, the user’s currently location, destinations, and directions to move comfortably and efficiently around the site. Wayfinding signage should provide contrast and highlights to quickly direct attention and ensure that users can easily reach their destinations throughout the Campus. Signage style and materials should be highly visible and consistent throughout the Campus.



Pedestrian crosswalk to promote safety



Example of existing signage for convenient wayfinding

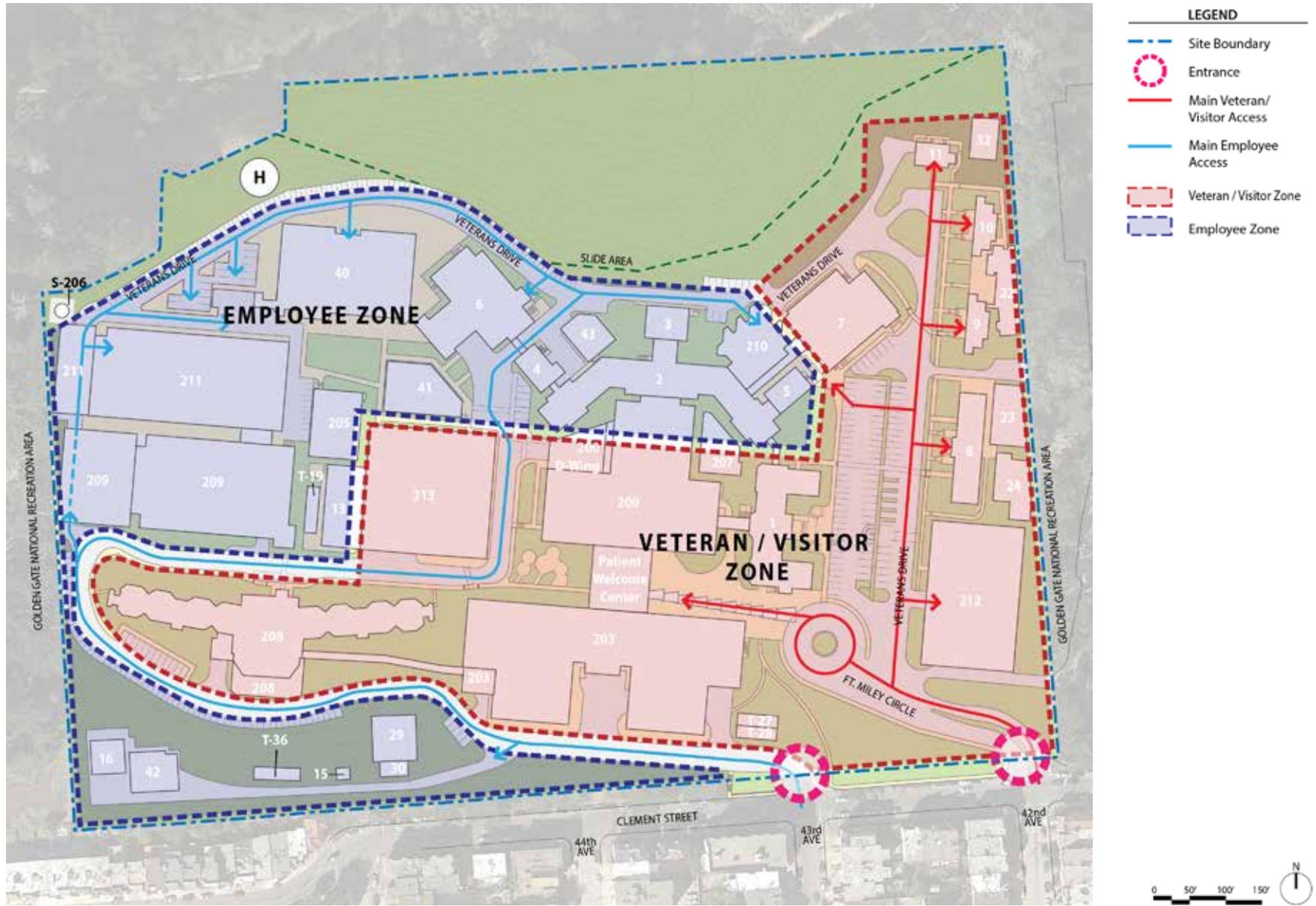


Figure 4-1: Campus User Zones

Environmental Setting and Views

The location near the Pacific Ocean and the beauty of the natural setting factored into the original decision to locate a VA hospital at Fort Miley, as the setting is valued for its therapeutic and calming qualities. The SFVAMC Fort Miley Campus boasts some of the most incredible views in San Francisco.

The open space and landscape concept for the Campus takes cues from the natural setting and is designed to preserve and enhance Campus character, as well as to provide transitions to the surrounding Golden Gate National Recreation Area (GGNRA) and residential neighborhoods. The open spaces located within the SFVAMC Fort Miley Campus should be designed and oriented to provide options for all Campus users to enjoy the natural setting and views that the Campus offers, and to serve as buffers for surrounding land uses.

Views out from the Campus to the surrounding parklands should be protected by careful buffer plantings and building placement. Conversely, views into the Campus should be screened properly to provide appropriate buffers from the surrounding neighborhoods. This can be achieved through careful design of landscaped areas and use of planting materials. Buffer plantings in edge areas should be designed to balance preserving views out from the site with the need to screen views into the Campus from neighbors.



Land's End Trail (adjacent to GGNRA area)



View of the SFVAMC Fort Miley Campus from adjacent GGNRA area

Landscape Concept

The landscape concept contained in this LRDP is intended to provide high-level design direction for transforming the landscape of the SFVAMC Fort Miley Campus into one that takes advantage of the spectacular natural setting, and is sensitive to the surrounding neighbors. The following goals and objectives are intended to provide guidance for future landscape improvements.

Reinstate a landscape character of dignity, quality, and professionalism, that honors America's Veterans and communicates the excellent standards of the Campus.

- Use quality materials and a consistent palette.
- Create a Campus-like setting that visually unifies the site.

Create a landscape that supports health and healing.

- Ensure the highest standards of accessibility.
- Apply the latest evidence-based design research in the creation of healing gardens.
- Incorporate patient walking loops, as well as comfortable resting and gathering areas.

Promote good relations with Campus neighbors.

- Provide clear and attractive pedestrian connections between the residential neighborhood and surrounding open space, as well as use of publicly accessible open space on the Campus.
- Partner with GGNRA to improve the ecology and environmental health of the area.

Create a welcoming environment.

- Reinforce site geometries and circulation routes, improving wayfinding and site comprehension.
- Provide pleasant outdoor gathering and eating areas for employees, Veterans, and visitors.

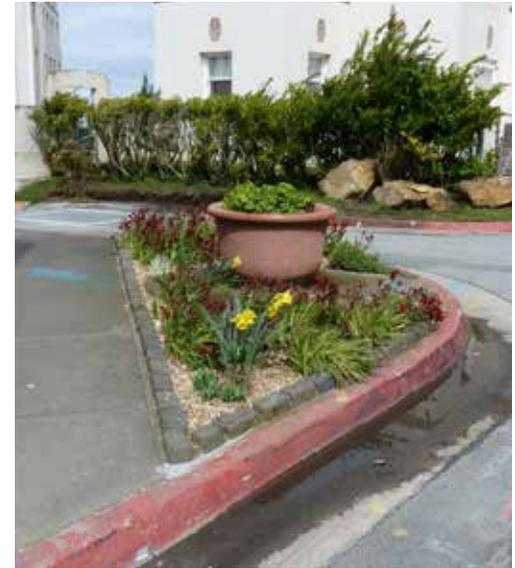
Integrate sustainability.

- Prioritize plant species that are drought tolerant and climate appropriate and that provide habitat value.
- Promote stormwater quality and reduce runoff with integrated vegetated stormwater management strategies.
- Use locally sourced materials that are aesthetically compatible with the surrounding natural landscape.

With these goals and objectives in mind, future landscape improvements at the SFVAMC Fort Miley Campus will be designed to be compatible and complementary with the surrounding natural areas, focusing on the features of the dramatic natural setting and views that provide the Campus with its unique character. **Figure 4-2, “Proposed Landscape Zones,”** illustrates SFVAMC’s conceptual landscape and open space pattern, highlighting the distinct character and purpose of each zone.

Figure 4-3, “Proposed Landscape Concept,” highlights the way that landscape elements will be integrated with existing and future development. This diagram also illustrates conceptual tree locations, highlighting entryways, landscaping areas, surrounding buildings, and pedestrian pathways.

Landscaping plans will consider species that are compatible with the existing landscape, both within the Campus and in the surrounding natural areas. Additionally, landscape improvements will be sensitive to the character and resources contained within the SFVAMC Fort Miley Historic District. The following sections describe the conceptual improvements envisioned in each of the distinct landscape zones found on the Campus.



SFVAMC seeks to enhance existing landscape elements at the Campus, as needed.

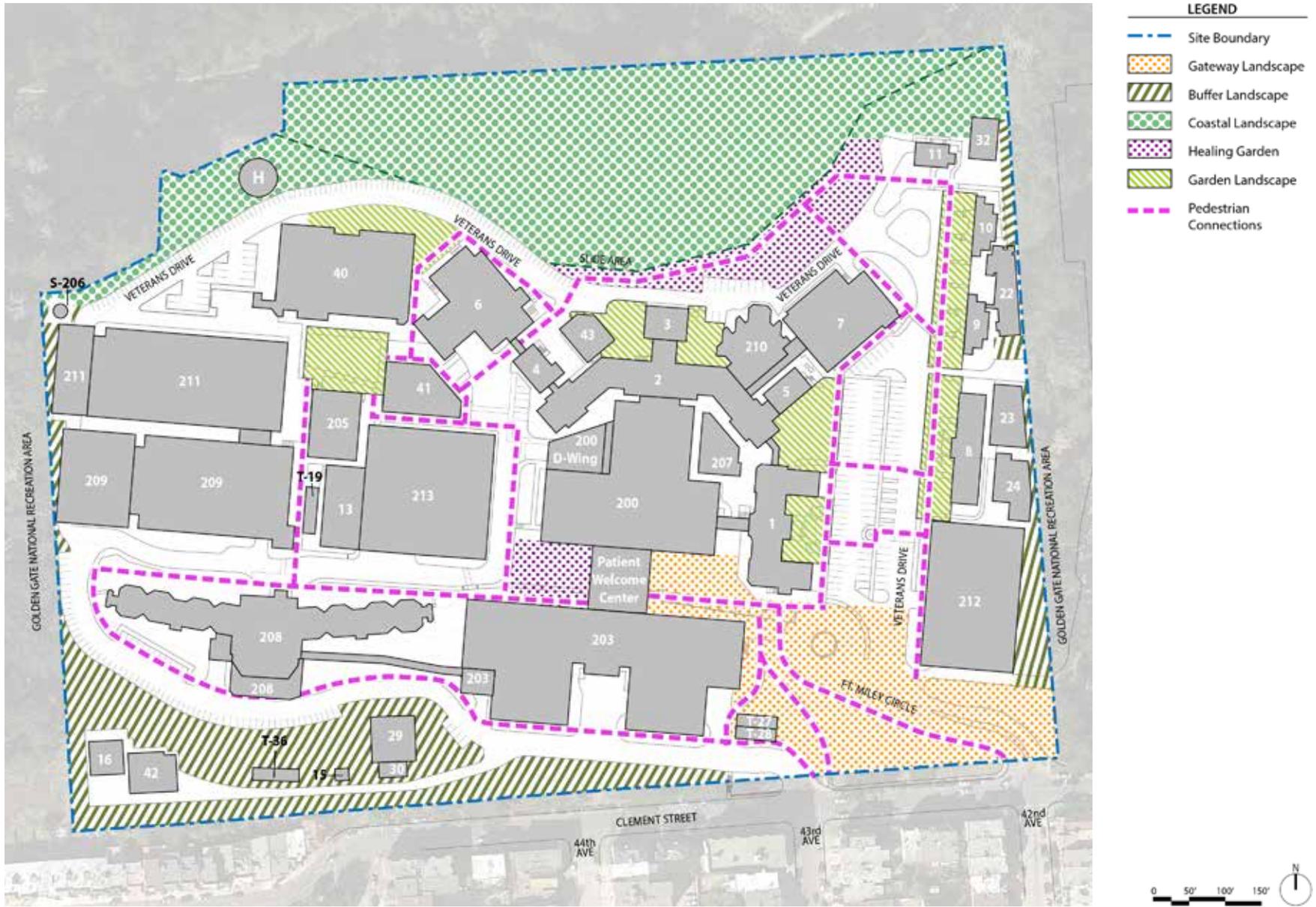


Figure 4-2: Proposed Landscape Zones

Gateway Landscape Zone

Because the Gateway Landscape Zone will serve as the entry to the SFVAMC Fort Miley Campus, and as a primary zone of interface with the surrounding residential neighborhood, landscape design for this zone should receive critical attention. The main Campus entry at 42nd Avenue is envisioned as a formal gateway, marking a transition from the adjacent city grid to the Campus setting. The green landscaped areas will transition up the hill, providing a clear orientation to the drop-off area and Patient Welcome Center.



Gateway Landscape Zone concept imagery



Coastal landscape



The Buffer Zone area provides open space for picnic areas within the Campus.

Buffer Zone (Park Edge and Neighborhood Edge)

The areas at the edges of the Campus will be designed and maintained to serve as appropriate buffer and transition areas. The hillside landscape area at the northern portion of the site provides an excellent open space resource for SFVAMC users, with trails, picnic areas, and exceptional views of the Pacific Ocean and the Golden Gate Bridge. This area also acts as a buffer and transition zone to the surrounding GGNRA area to the north. New development and open space areas at the eastern and western edges of the Campus will be oriented and maintained to create transitions to the bordering open space areas. At the southern end of the Campus, the open space will be well maintained, attractive, and accessible to create a transition and pleasant buffer to the Outer Richmond District residential neighborhood to the south.

Coastal Landscape/Overlook Trail

The coastal landscape/overlook trail area at the northern edge of the Campus is one of the most spectacular open space opportunities on the Campus. The recent design improvements of the North Slope Stabilization Project maximize opportunities to enjoy the views and the promenade walkway's overlook points for gathering and highlighting special vistas, as well as a landscaped park area intended for use by employees, Veterans, and visitors. The coastal landscape zone also includes walking trails, providing opportunities to enjoy the stunning views while enjoying exercise and fresh air. This zone provides a location for formal events, as well as informal gatherings and reflection.

Healing Garden Zone

This zone contains two designated healing garden locations, one adjacent to the Patient Welcome Center and the other at the northern boundary of the Campus. These gardens will be designed as areas of quiet relaxation and contemplation, incorporating the area's natural setting and views while providing a therapeutic benefit for Veterans and employees. The healing gardens will be designed to be visually integrated with other open space and landscaped areas throughout the Campus.



Garden Zone

As illustrated in the diagram depicting landscape zones (**Figure 4-2**), the garden landscape areas are integrated throughout the Campus and surround the development areas. These garden landscape areas are envisioned as formal landscaped areas that provide a pleasant and comfortable pedestrian environment, and as attractive areas that surround buildings and are located near parking areas. These areas should be designed with a unified theme, considering compatibility with existing landscape elements and the use of appropriate species and materials. Landscaping in these areas should be of an appropriate scale to encourage pedestrian circulation, and design should be consistent with the architectural styles of surrounding buildings.



Pedestrian Pathways

Pedestrian pathways and connections should be emphasized throughout the SFVAMC Fort Miley Campus with the intent of enhancing the pedestrian environment and encouraging mobility. Pedestrian pathways should create connections to landscaped areas and destinations. Pathways should be clearly signed and, where appropriate, marked by trees or other planting elements. Elements such as street furniture (benches, picnic tables) should be integrated along pedestrian pathways where appropriate, to allow for gathering spots and areas for rest and relaxation.



Garden Zone concept imagery



Figure 4-3: Proposed Landscape Concept

Planting Material and Style

Planting is a critical element of overall landscape character. Planting materials should be selected carefully according to the envisioned character of the SFVAMC Fort Miley Campus; an important consideration for the planting palette is the use of local natives. Plant species should be considered with the following criteria in mind:

- Tolerance of a cool, maritime climate
- California-appropriate character
- Drought tolerance/compatibility with low water use
- Priority for regional natives
- Habitat value
- Noninvasive character
- Nontoxic/nonallergenic qualities
- Longevity
- Avoidance of thorns (except for barrier planting)
- Sturdiness and resilience
- Low-maintenance type
- Year-round aesthetic value



View from the SFVAMC Fort Miley Campus, looking north



Diversity of building character and styles at the SFVAMC Fort Miley Campus

Architectural and Building Character

Many of the existing buildings contribute to the SFVAMC Fort Miley Campus' overall character and sense of place, providing a rich tradition of regional vernacular architectural styles. This tradition was established by the Mayan Art Deco design elements uniformly applied to the original 1934 buildings. The historic architectural quality is mixed with more modern buildings, offering visual diversity along with an interesting mix of styles. As new development occurs on the Campus, architecture and building orientation should be consistent with the existing development character, considering colors, materials, building height, and massing. New development should not necessarily mimic historical styles but should be compatible with existing architectural quality and character and contribute to the Campus' sense of place and destination within San Francisco.



Circulation **5**



Fort Miley Circle

Circulation Overview

This chapter describes recommended improvements to the SFVAMC Fort Miley Campus' circulation system intended to support the LRDP's development program. The Campus' circulation system should provide clear access and mobility for multiple modes of transportation: pedestrians, private vehicles, public transit, and shuttles, as well as emergency and delivery vehicles. The LRDP improvements emphasize creating clear and accessible routes and connections to serve all Campus users and enhance their overall experience at SFVAMC. The existing circulation network and parking inventory are described in Chapter 2; this chapter focuses on recommended improvements to the circulation system and parking areas.

Circulation System Improvements

Figure 5-1, "Proposed Circulation System," illustrates the proposed circulation improvements, which support multimodal transportation with an emphasis on clear pedestrian and vehicular accessibility, as well as improved mobility throughout the SFVAMC Fort Miley Campus.

The following is a description of the major circulation system improvements.

- A significant improvement to the circulation system includes a reconfigured entrance at 42nd Avenue, including a new traffic circle designed for efficient patient and visitor drop-off and access to the new Patient Welcome Center and healing garden, located between Buildings 200 and 203.
- To create the Patient Welcome Center and healing garden, Fort Miley Circle will terminate at the drop-off area.
- Fort Miley Circle will be narrowed between Buildings 200 and 213 to provide traffic calming and incorporate pedestrian access to the healing garden from the west.

Access Improvements

The 43rd Avenue entrance will be designated primarily for employees and service/delivery vehicles, with clear signage and direction to parking and delivery areas, while the main Veteran and visitor entrance will be accessed from 42nd Avenue. Upon arrival at the 42nd Avenue entrance, motorists will be directed to the drop-off area and Patient Welcome Center and will have the option to park in designated areas. Transit and shuttle vehicles, as well as fire and delivery trucks, can access the Campus at both entrances and follow signage along the outer loop road that will direct them to their final destinations.

Transit

San Francisco Municipal Transportation Agency (Muni) vehicles will enter the Campus via the 42nd Avenue entrance and proceed to a stop on the west side of the traffic circle, near the Patient Welcome Center. Muni vehicles will continue around the traffic circle and will exit the Campus at 42nd Avenue.

Shuttle

Employee and visitor shuttles can enter the Campus via either 42nd Avenue or 43rd Avenue. Using the 42nd Avenue entrance, shuttles will head toward the designated transit stop located at the Patient Welcome Center and drop-off area, or travel north along Veterans Drive and loop through the center of Campus before exiting via 43rd Avenue. Alternatively, shuttles entering through the 43rd Avenue entrance will travel along the southern edge of the Campus, have the opportunity to drop off and pick up passengers at the transit stop located between Buildings 209 and 208, continue north on Veterans Drive, and exit at 42nd Avenue.

Taxis

Two taxi stands will be located on the Campus: one outside the Patient Welcome Center (accessed via the drop-off area and the 43rd Avenue entrance) and the other north of Building 208 (accessed via the 42nd Avenue entrance).



SFVAMC seeks to provide easily accessible, clearly marked Muni stops on Campus.



Figure 5-1: Proposed Circulation System

Parking Improvements

This LRDP includes new parking spaces to serve the proposed new development and provide adequate parking for Veterans, employees, and visitors. The current parking inventory is described in Chapter 2 and includes approximately 1,250 parking spaces, located in surface lots and structures located throughout the Campus.

At full buildout, the total parking inventory will be increased by approximately 300 spaces, to provide a total of approximately 1,560 spaces. The future parking inventory is outlined and illustrated in **Table 5-1** and **Figure 5-2, “Future Parking Inventory,”**

The primary location for additional parking spaces will be in the existing 209 structure and 211, which is a proposed parking structure planned for the western side of the Campus, located north of 209. Several existing smaller surface parking spaces will be removed to consolidate parking in the new structure areas. Parking areas will be clearly signed and will be designed to provide clear pedestrian access to nearby buildings.



Existing surface parking lot at the Campus

Table 5-1: Future Parking Inventory

Parking Area	Type of Parking	User	Total Number of Spaces
212	Structure	Patient	160
B	Surface	Patient	102
C	Surface	Employee	13
D	Surface	Employee	122
F	Surface	Employee	2
G	Surface	Employee	87
209	Structure	Employee	588
J	Surface	Employee	24
211	Structure	Employee	461
TOTAL			1,559

**The future parking inventory information reflect approximate numbers*

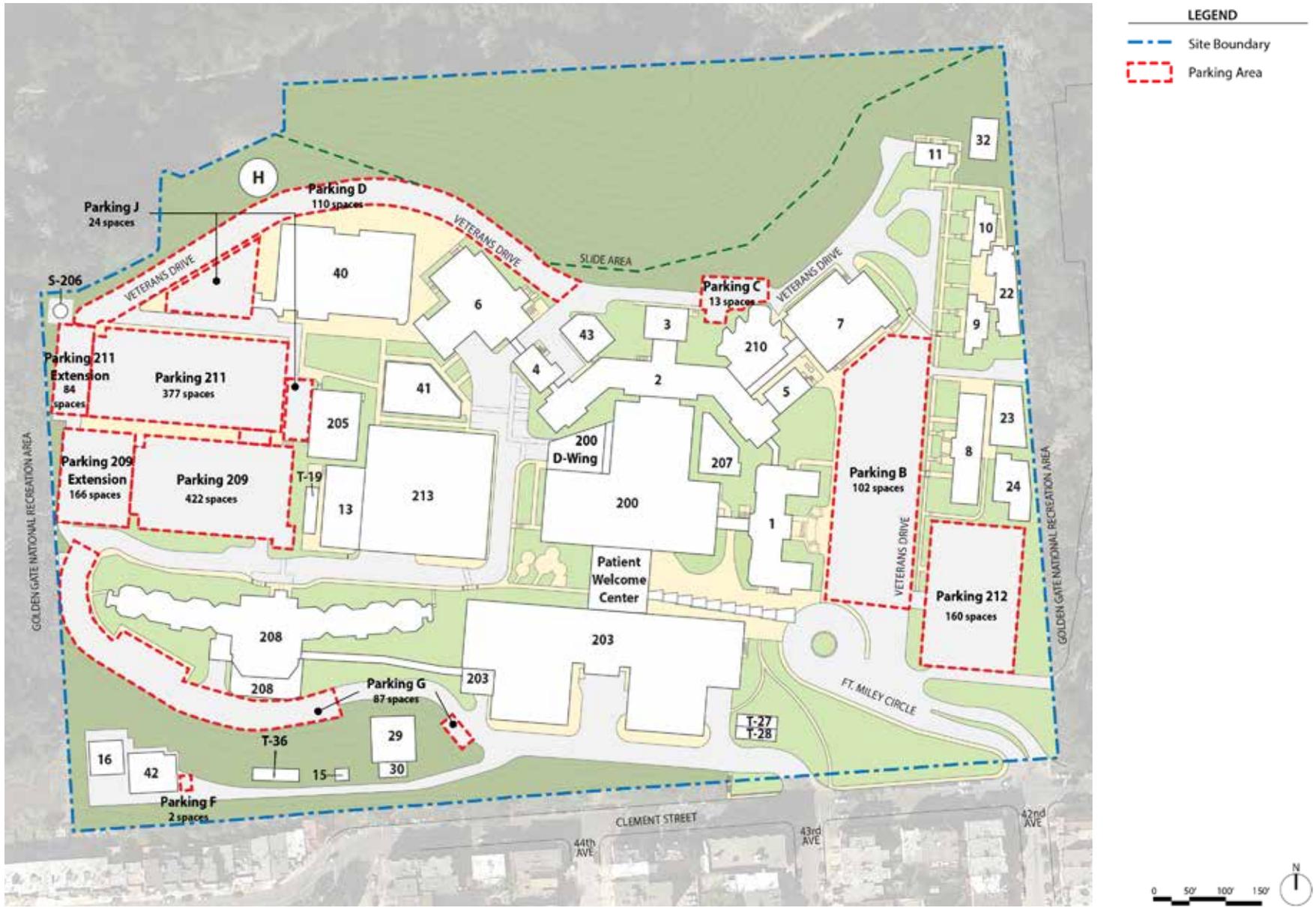


Figure 5-2: Future Parking Inventory

Appendices

List of Acronyms and Abbreviations

ACCAmbulatory Care Center
 ADA Americans with Disabilities Act
 AICDAutomated Implantable Cardioverter Defibrillator
 CLCCommunity Living Center
 DoD..... U.S. Department of Defense
 EIS Environmental Impact Statement
 GGNRA.....Golden Gate National Recreation Area
 gsfgross square feet
 HIVhuman immunodeficiency virus
 I-80.....Interstate 80
 I-280.....Interstate 280
 LEED®..... Leadership in Energy and Environmental Design
 LRDPLong Range Development Plan
 MRI magnetic resonance imaging
 MuniSan Francisco Municipal Transportation Agency
 NEPA National Environmental Policy Act
 NCIRE..... Northern California Institute for Research and Education

NPS.....National Park Service
 NRHP.....National Register of Historic Places
 nsfnet square feet
 PTSDpost-traumatic stress disorder
 SCIP..... Strategic Capital Investment Planning
 SFMTASan Francisco Municipal Transportation Agency
 SFVAMC San Francisco Veterans Affairs Medical Center
 SR 1State Route 1
 SSPPStrategic Sustainability Performance Plan
 UCSF University of California, San Francisco
 U.S. 101 U.S. Highway 101
 VAU.S. Department of Veterans Affairs
 VACO U.S. Department of Veterans Affairs Central Office
 VA SSPP..... VA Strategic Sustainability Performance Plan
 VHA.....Veterans Health Administration
 VISN.....Veterans Integrated Services Network

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