

**Office of the President**

**TO MEMBERS OF THE FINANCE AND CAPITAL STRATEGIES COMMITTEE:**

**DISCUSSION ITEM**

*For Meeting of July 18, 2018*

**HILLCREST CAMPUS REDEVELOPMENT PHASE 1, SAN DIEGO CAMPUS**

**EXECUTIVE SUMMARY**

The approximately 60-acre Hillcrest Campus, located 13 miles south of the La Jolla Campus, serves as an academic medical center supporting the clinical, research, and teaching missions of UC San Diego. In addition, the Hillcrest Campus is a critical regional resource, with the UC San Diego Medical Center Inpatient Hospital (Hospital), a Level 1 Trauma Center, and a Regional Burn Center, serving San Diego, Riverside, and Imperial counties. Built in 1963, the Hospital must be removed from service by 2030 due to seismic requirements set by Senate Bill 1953. Because of its aging infrastructure, it would be both costly and challenging to seismically retrofit the Hospital to meet modern standards. The Hospital would need to remain operational at current capacity and level of service during the renovation, requiring extremely expensive and complex phasing. For these reasons, renovation is not feasible. The strategic redevelopment of the Hillcrest Campus includes construction of a replacement hospital/inpatient services, requiring a multi-phase construction effort over the next ten to 15 years that begins with this first-phase project.

The UC San Diego Hillcrest Campus Redevelopment Phase 1 project is part of the overall 2019 Long Range Development Plan (LRDP) that would guide the development of the Hillcrest Campus. Phase 1 would redevelop 11 acres of the Hillcrest Campus and strategically consolidate many uses that are within the footprint of the proposed replacement hospital site.

Phase 1 would provide space for outpatient services by constructing an Outpatient Pavilion (225,000 to 300,000 gross square feet), up to 2,000 parking spaces for faculty, staff, patients, and visitors, and related utility infrastructure. Outpatient services would include a broad range of diagnostic and treatment services in a number of specialty areas, and address existing demands for outpatient services, as well as clinically and financially support the replacement hospital. The Regents' Health Services Committee endorsed the proposed Phase 1 program at its April 2018 meeting.

The campus anticipates seeking approval by the Regents of preliminary plans funding for Hillcrest Campus Redevelopment Phase 1 in fall 2018, with budget and external financing approval in early 2019. Regental approval of design pursuant to the California Environmental

Quality Act is anticipated in summer 2019, following adoption of the 2019 LRDP and certification of the LRDP Environmental Impact Report. Anticipated completion of the proposed Phase 1 project is early 2022.

### **BACKGROUND – HILLCREST CAMPUS**

UC San Diego Health is dedicated to delivering the highest level of care and medical innovation in a nurturing and supportive environment. Redevelopment of Hillcrest Campus would allow the continuance of this mission for the local community and region.

**Strategic Importance.** UC San Diego Health currently has two campuses: (1) the Hillcrest Campus (Campus), located 13 miles south of the main campus; and (2) the La Jolla Campus, on the eastern portion of the main campus (refer to Attachment 1). Situated on approximately 60 acres, the Hillcrest Campus is bordered by residential and other medical uses to the east, canyon open space reserves to the north and west, and residential and community commercial uses to the south (refer to Attachment 2). Today the Campus contains approximately 40 buildings with just over one million gross square feet (gsf) of space (excluding parking structures). Many of the existing buildings are out of date and inefficient structures, requiring significant maintenance and ongoing investment.

UC San Diego benefits from strong public and political support for its presence in the Hillcrest community. Located one mile north of downtown San Diego, the Hillcrest Campus currently serves as the focal point for community service missions. The Hillcrest neighborhood and nearby areas are some of the more densely populated areas in San Diego County. The urban context of these communities contributes to its diverse population, which includes some of UC San Diego Health's most vulnerable patients, with the most complex conditions. This diversity allows for a comprehensive experience for medical residents, many of whom continue their practice in the San Diego region.

As of 2016, approximately 40 percent of patients who received care at the Hillcrest Campus lived within San Diego's Central Metropolitan Statistical Area. The Hillcrest Campus provides a significant service to underserved populations, 40 percent of whom are on Medi-Cal, and functions as a major healthcare safety net provider for a significant portion of San Diego County's uninsured inpatient care.

The Hillcrest Campus is also home to the Owen Clinic, among the nation's top human immunodeficiency virus (HIV) care programs and the behavioral unit, which provides needed inpatient mental health services. These specialty care centers serve as a major tertiary and quaternary referral center for San Diego, Riverside, and Imperial counties.

#### ***Hillcrest Long Range Development Plan Update***

To guide the redevelopment of the Hillcrest Campus, including the Phase 1 project, UC San Diego is preparing a new Long Range Development Plan (LRDP) for the Hillcrest Campus; the Regents adopted the current Medical Center-Hillcrest Campus LRDP in September 1995. The

proposed 2019 LRDP anticipates redevelopment of 30 to 35 acres of the approximately 60-acre campus. The majority of the approximately 40 existing buildings, including the existing 11-story hospital, would be removed. The campus anticipates seeking Regents' approval for the new LRDP in summer 2019.

The proposed 2019 LRDP is intended to accomplish multiple goals. The primary goal is to plan for the replacement of the existing Hospital and consolidate fragmented outpatient services, research, and support activities. The 2019 LRDP would respond to changes in health care, improve the compatibility of the land uses on the campus, and create a more cohesive and welcoming campus, while enhancing the land use interface with the surrounding community, all in a thoughtful and sustainable manner.

**Redevelopment Objectives.** The Hospital building at the Hillcrest Campus was leased from San Diego County in 1966 and purchased by UC San Diego in 1981. The majority of land on the Hillcrest Campus was deeded to the UC Regents from the County of San Diego. Deed restrictions on this land allow the County to repossess the property if UC San Diego ceases to use it for academic/medical purposes. The LRDP recognizes the importance of continuing to utilize this land within the deed restrictions related to the original acquisition from the County of San Diego.

Senate Bill 1953 (SB 1953), passed in 1994, mandates that all acute care hospitals in California become compliant with the seismic safety provisions of the California Building Standards Code (Title 24); subsequent legislation has extended the compliance date to the year 2030. The existing Hospital cannot be renovated without significant operational impact and costs to meet these requirements and will therefore need to be removed from acute care service and replaced by 2030. In addition, due to the age of the structure (55 years old), significant annual investment is required to maintain the Hospital.

A key objective during the redevelopment of the Hillcrest Campus is that the existing Hospital, clinics, and research activities remain in operation while replacement occurs. During this time, UC San Diego Health will continue to provide a full spectrum of primary, specialty, and emergency services, and will continue to operate the Regional Burn Center and the Level 1 Trauma Center.

Another major objective of redevelopment is to support both clinical and academic functions through replacement of out of date facilities. Certain clinical services currently spread throughout the campus would be better suited in centralized outpatient settings, as clinical care and reimbursement models evolve in favor of care delivery in lower-cost settings. The Hillcrest Campus redevelopment would allow for an academic medical campus complete with flexible learning environments and accessible neighborhoods focused on healthy living, recreation, and wellness. An overarching urban design objective is to create a welcoming campus environment. Inclusion of multi-family housing at the Hillcrest Campus would respond to the housing deficit affecting the San Diego region. Housing could provide an innovative source of funding for Hillcrest infrastructure and support facilities through a pre-paid ground lease and would be developed through a public-private-partnership model. The new housing would support smart

growth objectives for the San Diego region in a high-density neighborhood with walkability and biking opportunities. Campus affiliates, including faculty, graduate/professional students, and staff, would be the primary residents and would benefit from a live-work-learn environment. Affordability would be achieved through creative design, unit size, and shared amenities. Retail for healthy dining, preserved open space, and enhanced views would be amenities that benefit residents, patients, visitors, faculty, staff, and the local community.

Redevelopment objectives for access include providing additional site entry points and relieving neighborhood traffic by means of improving access from Interstate 8 via Bachman Place. Delivery of sufficient parking to meet displacement of existing structures and increased demand is another important element of Hillcrest redevelopment.

**Redevelopment Phases.** Site redevelopment on the Hillcrest Campus is anticipated to occur in six major phases over approximately 15 years, involving relocation of existing operations, building demolition, and construction activities. The majority of the existing buildings on the Campus, including the existing 11-story Hospital, would eventually be demolished (refer to Attachment 3 for representation of the six phases).

Site and timing for the replacement hospital facility, as well as the need to maintain full operations, have been driving factors in this redevelopment phasing strategy. The replacement hospital requires a new central utility plant (CUP); access for public, service, and emergency vehicles; and direct access to parking. With these requirements, a master planning study was conducted for the Campus that evaluated three locations for the replacement hospital: east, west, and north of the existing Hospital. The east location was inadequate due to constructability concerns, the west location conflicted with existing operations, and both the east and west locations brought the replacement hospital closer to the neighborhood edges, conflicting with the massing strategies identified in the proposed and past LRDPs. The north location provides the appropriate footprint size and the most functional opportunity, both during development and for the final campus buildout. Thus, the Phase 1 project site is coordinated with both the existing Hospital (located directly west) and the future replacement Hospital (located directly north): proximate access to Hospital services is necessary for the Outpatient Pavilion.

Below is a summary of each phase as currently envisioned in the 2019 LRDP (refer to Attachment 3 for graphics). Phases may overlap as construction logistics and program details are further refined.

In **Phase 1**, development between Front Street and Bachman Place would include the construction of up to three structures. This area was selected for development in order to accommodate the programs in buildings in the footprint slated for the hospital replacement. As proposed, Phase 1 construction would provide outpatient services, medical office and support space, parking, and related utility infrastructure. Outpatient space would include replacement outpatient facilities for services in space currently in or attached to the existing hospital building as well as additional outpatient space required to support the growing healthcare market. Approximately 400 structured parking spaces associated with the new outpatient facility would be immediately adjacent to the new building (under the extension of First Avenue). A new main

parking structure, primarily for patients and visitors, of up to 1,600 spaces, would be built north of the Outpatient Pavilion, providing direct and convenient patient/visitor access to the Campus (including the future hospital replacement). Demolition of structures on the Phase 1 site would be part of Phase 1. These structures may include the Surgery Research Laboratory, modular buildings, and other small structures.

**Phase 2** would focus primarily on the development of residential and mixed-use districts. Ground lease revenues from multi-family housing present an opportunity to partially subsidize the substantial capital costs required to rebuild and improve campus infrastructure and support facilities. The new residential district would include underground parking. The demolition of Arbor and Bachman parking structures may occur in this phase. A new driveway from Bachman Place to provide access to the residential parking and future hospital service entrance may also be constructed.

**Phase 3** would concentrate on site preparation for the new hospital and could include construction of a new multi-use building with research and office spaces. Remaining buildings within the footprint of the future hospital would be removed in this phase. Improvements to Bachman Place, including partial widening, would occur in this phase to improve access and circulation to the Campus.

In **Phase 4**, the replacement hospital and a new Central Utility Plant (CUP) would be constructed. Any remaining circulation elements surrounding the hospital parcel would also be completed. A bridge and underground connection to existing structures including the main parking structure and the Outpatient Pavilion may be built during this phase.

In **Phase 5**, the existing Hospital and associated CUP would be deconstructed and removed.

In **Phase 6**, construction of the remaining residential units would occur, along with a new central green open space serving the Hillcrest Campus. Final circulation improvements would include pedestrian enhancements within the campus core.

**Hillcrest Redevelopment Funding Strategy.** UC San Diego plans to use an innovative funding model, leveraging a portion of its property at Hillcrest to develop multi-family housing. The revenues from this project, augmented by fundraising and external support, would help fund overall infrastructure at Hillcrest.

## **PHASE 1 PROJECT DRIVERS**

The project drivers remain consistent with those endorsed by the Regents' Health Services Committee at its April 2018 meeting. Briefly, the drivers for Phase 1 redevelopment for outpatient clinical services and research programs include:

***Outpatient Clinical Services***

- Replacement of clinical facilities that are out of date or obsolete and will eventually fall out of seismic regulatory compliance.
- Reorganization and physical redesign of Hillcrest Campus would promote multidisciplinary collaboration, increase patient access, enhance patient experience, improve financial performance, and grow market share.
- Adoption of industry trends that emphasize care delivery in outpatient settings.
- Accommodation of growth to support competitive recruitment of key clinical faculty and community physicians.
- Expansion of clinical programs and space needed to maintain and enhance UC San Diego's commitment to the communities it serves.

***Parking***

The Hillcrest Campus currently has a total of 2,250 parking spaces located in Arbor Parking Structure (553 spaces), Bachman Place Parking Structure (1,032 spaces), and surface lots (665 spaces) spread throughout the Campus. The Arbor and Bachman structures have ongoing maintenance issues and require significant investment to remain operational. In addition, the Bachman Parking Structure is located on the site planned for the future central utilities plant that would serve the hospital replacement, and the parking structure's location constrains the flow of traffic from Bachman Place.

The Phase 1 project would provide up to 2,000 parking spaces to replace the aging Arbor and Bachman Parking Structures and to meet new demand. Additional spaces are necessary for the proposed expanded outpatient services not currently offered at Hillcrest, as these new services will generate more parking demand. By consolidating the parking into one general area, parking demands can be better managed, thus the net new spaces are marginal. Upon completion of the Phase 1 parking, Arbor and Bachman Parking Structures may be demolished as part of the proposed Phase 2 project.

**PHASE 1 PROJECT DESCRIPTION**

The Phase 1 project would be comprised of the following components: an Outpatient Pavilion (including medical offices and support space), a main parking structure/other associated parking, and related utility infrastructure.

***Project Site***

The proposed Phase 1 project would be located on the eastern area of the Hillcrest Campus along the mesa edge and into the small canyon bounded by Dickinson Street, Front Street, and Arbor Drive (refer to Attachment 4). At 8.5 acres, the project site currently contains many older, low-

density structures and modular buildings, with the oldest built in 1942. Phase 1 redevelopment would occur in the following three areas:

- Area 1 – Main Parking Structure,
- Area 2 – Outpatient Pavilion and adjacent underground parking built concurrently, and
- Area 3 – Road and utility improvements.

***Outpatient Pavilion*** (225,000 to 300,000 gsf)

The Outpatient Pavilion would serve as the centralized home for existing clinical services and would house services complementary to those offered in the replacement hospital and other surrounding buildings. The facility would include necessary space for continuity and planned growth of these clinical services as well as provide space for multidisciplinary oncology clinics, infusion, and other treatments currently not offered at the Hillcrest Campus. The facility would also include medical offices and support space.

Final composition of services in the proposed Outpatient Pavilion would be defined during the development of a Detailed Project Program and could include:

- specialty clinic space, including exam rooms for services such as: cardiology, gastroenterology, neurology, orthopedics, plastic surgery, pulmonary, sports medicine, and urology
- ambulatory surgery center/gastroenterology suite with operating rooms and procedure rooms
- cancer center with clinic space, infusion therapy, and radiation therapy
- other clinical services such as dialysis, EEG/EMG, as well as physical, occupational, and speech therapy
- medical offices and support space

***Parking*** (up to 2,000 spaces)

The parking would be provided in a new main parking structure and one underground parking structure. The new main parking structure (up to 1,600 spaces) would support the entire healthcare district, but primarily serve the campus's patients and visitors. The underground parking structure would provide 400 spaces adjacent to the Outpatient Pavilion.

***Funding Plan***

Preliminary plans would be funded with campus funds and hospital reserves. Phase 1 project costs are expected to be funded with a combination of external financing, gift funds, hospital reserves, and campus funds. Raising philanthropic funds for the proposed project is a top priority

for UC San Diego. One avenue of philanthropic support for the proposed Outpatient Pavilion could occur through naming opportunities.

The Outpatient Pavilion would be funded from incremental and accretive patient revenues. The parking facilities would be funded from patient and visitor parking revenues and from faculty and staff permits.

### ***Project Delivery***

Immediately following the architect/design professional selection, the campus will competitively bid for the services of an Integrated Construction Manager/General Contractor (Integrated CM/GC) for the project, thus assembling the key players before any substantive design has begun. Phase One/Preconstruction Services will include detailed initial construction cost validation, constructability, phasing input, site logistics, design management, and schedule development with the intent of significantly reducing the risk of false starts and construction cost and schedule overruns. This Integrated CM/GC delivery model locks teams in early and also affords opportunities to heighten interest in the project within the subcontractor community, engage them early in the process, obtain real-time market pricing through each project phase, and fine tune sub-trade construction costs to fit the overall project construction budget.

### ***Project Schedule***

The campus anticipates seeking Regents' approval of preliminary plans funding in fall 2018. The preliminary plans funding would include Phase 1 preconstruction services and would allow the campus to confirm and refine the scope of work through detailed programming, preliminary design, and project cost estimating, prior to seeking full budget and external financing approval from the Regents in early 2019. The campus anticipates submitting the project for approval of design pursuant to the California Environmental Quality Act in summer 2019 following adoption of the 2019 LRDP and certification of the LRDP Environmental Impact Report. Anticipated completion of the project would be in early 2022.

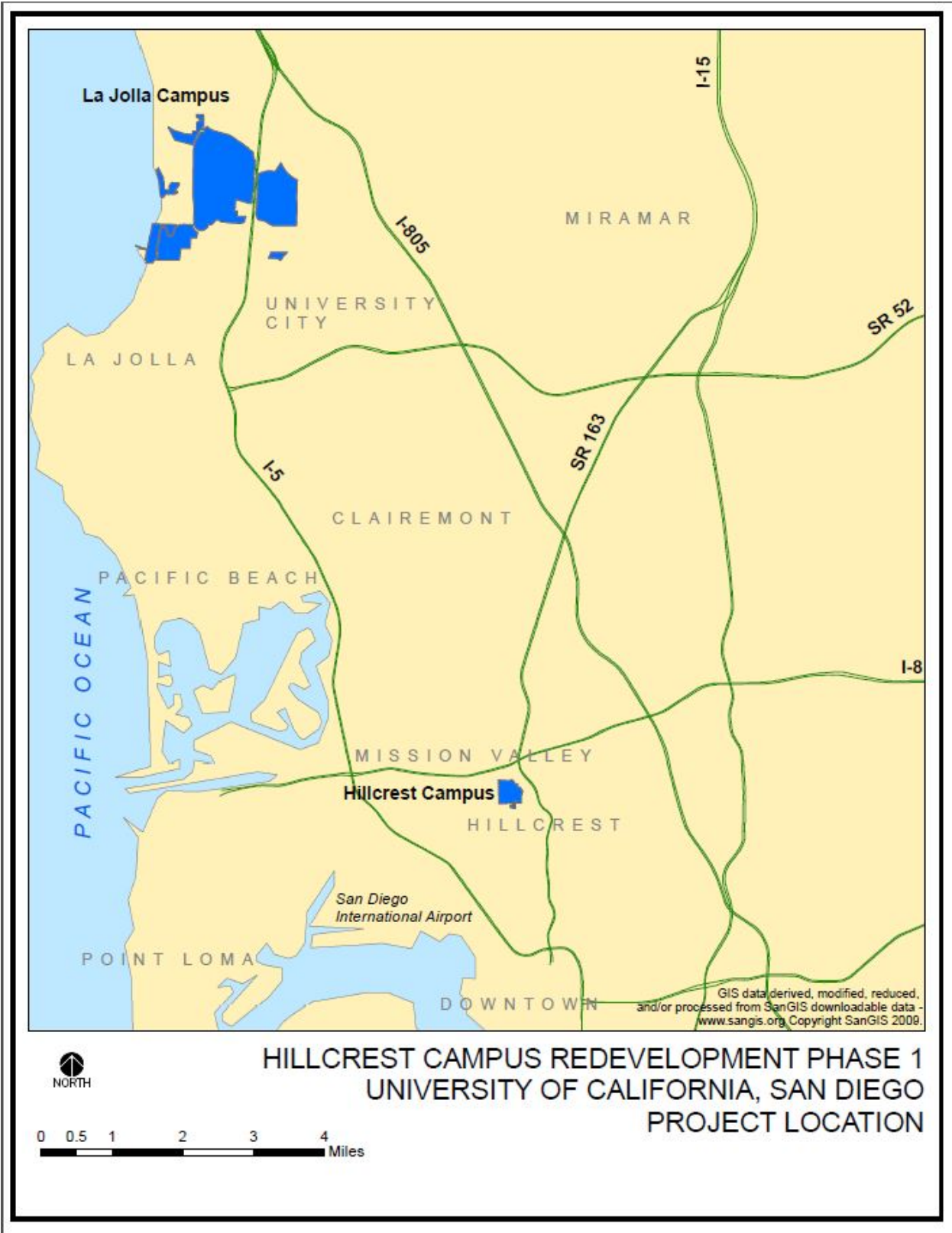
### **KEY TO ACRONYMS**

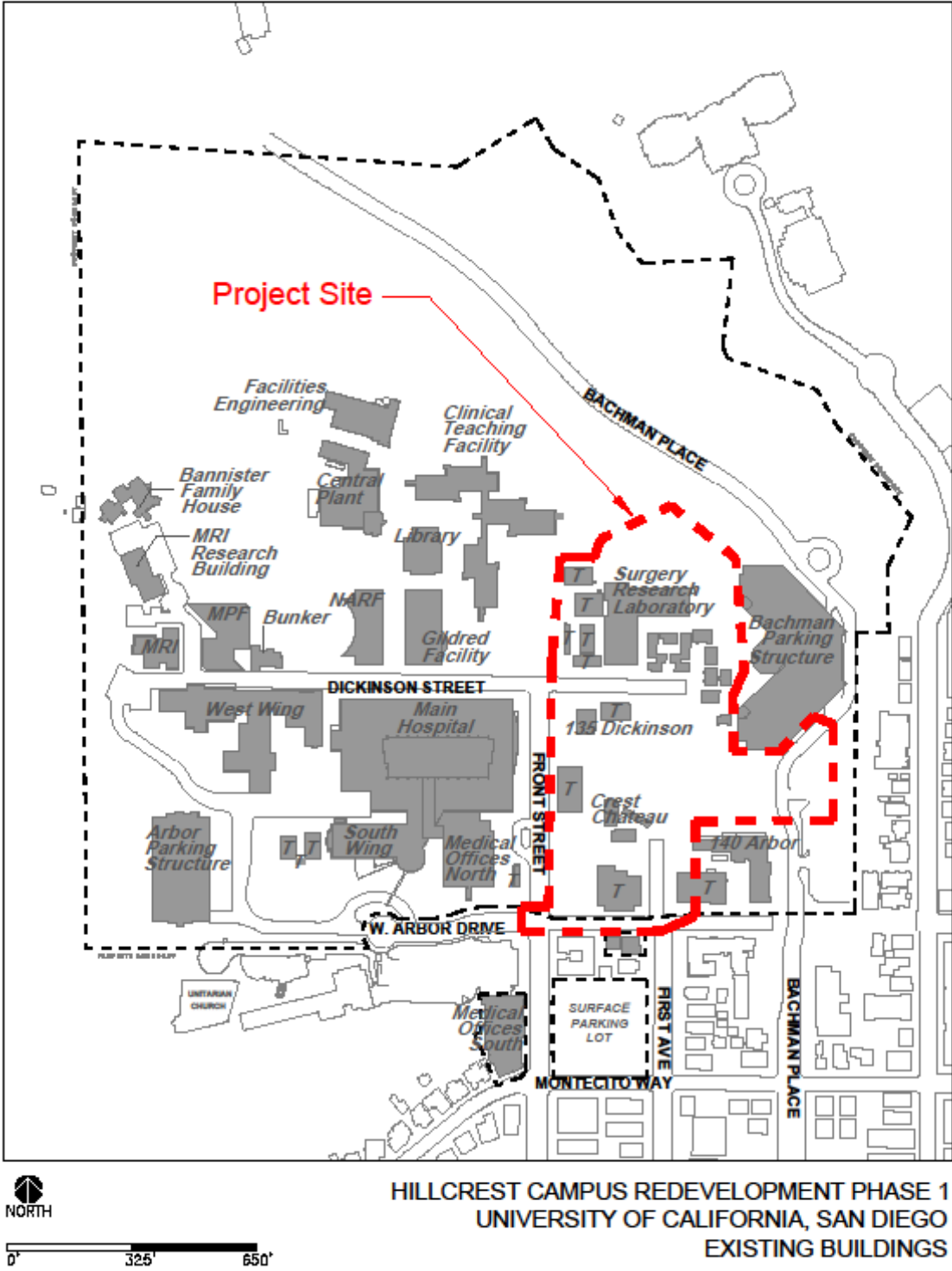
Campus	Hillcrest Campus
CUP	Central Utility Plant
EEG/EMG	Electroencephalography/Electromyography
GSF	Gross-Square-Feet
Hospital	UC San Diego Medical Center Inpatient Hospital
Integrated CM/GC	Integrated Construction Manager/General Contractor
LRDP	Long Range Development Plan
OSHPD	Office of Statewide Health Planning and Development
SB 1953	Senate Bill 1953



**ATTACHMENTS:**

Attachment 1:	Project Location Map
Attachment 2:	Project Site Map – Existing Buildings
Attachment 3:	Potential Redevelopment Phasing
Attachment 4:	Project Site Map – Areas of Development
Attachment 5:	Summary of Alternatives Considered





## ATTACHMENT 3



### Phase 1



#### Construction:

- Outpatient Pavilion
- Main and Underground Parking Structures
- Parking Driveway

#### Demolition:

- Surgery Research Laboratory
- Modulares and other small structures

### Phase 2



#### Construction:

- Multi-family Housing with retail amenities
- New Driveway

#### Demolition:

- MPF, MRI, MRI Research buildings
- Arbor and Bachman Parking Structures

### Phase 3



#### Construction:

- Multi-Use Facility
- Bachman Place street improvements

#### Demolition:

- 140 Arbor Drive
- Research/office buildings in future hospital site

**HILLCREST CAMPUS REDEVELOPMENT  
UNIVERSITY OF CALIFORNIA, SAN DIEGO  
POTENTIAL REDEVELOPMENT PHASING**

## ATTACHMENT 3



### Phase 4



#### Construction:

- Replacement hospital
- New Central Utility Plant

### Phase 5



#### Demolition:

- Existing Hospital and Central Utility Plant

### Phase 6

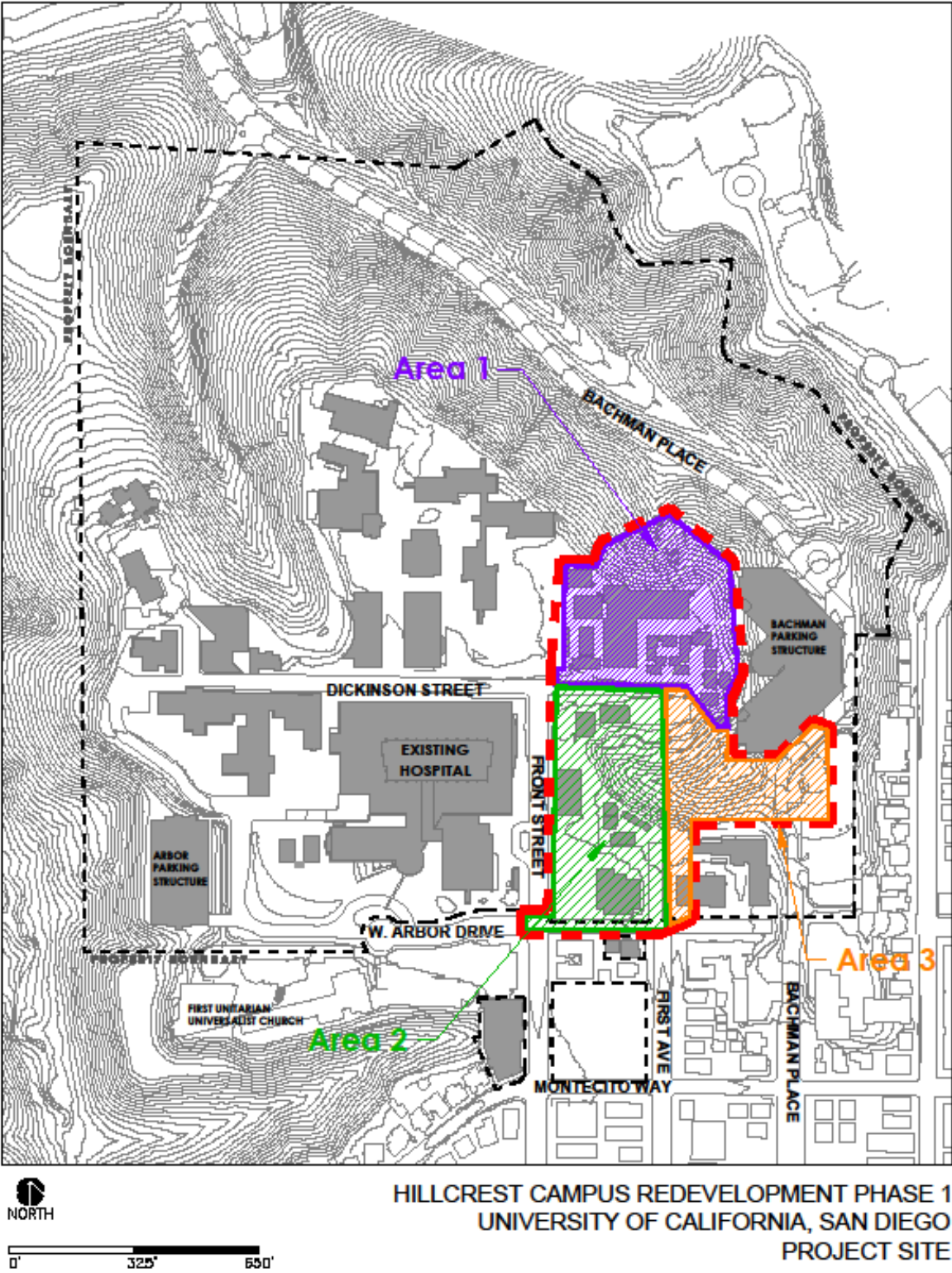


#### Construction:

- Multi-family Housing with retail amenities
- Central Open Space

**HILLCREST CAMPUS REDEVELOPMENT  
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POTENTIAL REDEVELOPMENT PHASING**





## SUMMARY OF ALTERNATIVES CONSIDERED FOR OUTPATIENT PAVILION

Four project alternatives were considered: 1) new construction on campus; 2) lease/purchase; 3) renovation of existing campus facilities; and 4) no project / “do nothing”.

The Alternative Solutions were evaluated in terms of the following criteria, with priority given to the factors that contribute the highest value to the program.

- **Amount of Program Space:** Does the option provide space to meet program goals for outpatient services?
- **Quality of Environment:** Does this option meet the goals for consolidation and collaboration/adjacencies of patient services?
- **Project Cost and Financial Risk:** How does this option compare in terms of financial risk?
- **Lifecycle Cost:** How does this option compare in terms of ongoing cost of operation, maintenance, and renewal?

### 1) New Construction on Campus

By constructing a new Outpatient building on the Hillcrest Campus, UC San Diego Health would be able to provide the necessary space – in both quantity and type – to centralize outpatient services that are currently fragmented. Also, these outpatient services are currently located within or attached to facilities that will fall out of seismic regulatory compliance and are slated for removal. The new building would be designed to support Office of Statewide Health Planning and Development (OSHPD) Level 3 compliance and the unique requirements of specialized health services. The proposed project site is adjacent to the existing and future hospital facilities.

With this option, several specialty clinics currently located throughout the Hillcrest Campus would be consolidated into a single on-campus outpatient location, located together with operating and procedure rooms, imaging, clinical laboratory, pharmacy, and other ancillary services such as outpatient rehabilitation. Patients would have single-point access to a variety of outpatient services in a centralized facility, while maintaining close proximity to the future hospital for services and programs that may be needed there. Faculty in the new building would benefit as well from a location proximate to the Hospital and research spaces. The proposed physical redesign in the LRDP also conserves higher-cost hospital space for inpatient or emergency department services.

Specialty clinic growth and outpatient program development on the Hillcrest Campus has been hampered by outdated and inadequate facilities. The new building would not only provide the necessary spaces for existing facilities, but would be designed to accommodate growth of faculty and services (such as cancer care) required to meet the needs of the community. The field of health care is moving in a new direction, focusing on team-based outpatient care-delivery settings, and strategic placement of specialty clinics within the new building can promote cross-specialty collaboration and enhance patient care and outcomes.

The additional clinical capacity and services provided by the new facility are expected to generate incremental margin to UC San Diego Health. Initial financial modeling indicates that the facility would operate at positive margin from opening, based on the current mix of services and conservative estimates of future reimbursement trends.

In this scenario, space program of approximately 225,000 to 300,000 gsf can be met. This option also would meet the goal of consolidating outpatient clinics in a single location, adjacent to inpatient services on the Hillcrest campus. UC San Diego Health expects additional clinical capacity to be provided by the new facility and increased volume, thus moderating financial risk. This option requires annual operations and maintenance that would be covered by incremental margin described above, which would prolong the life of the facility.

## **2) Off-Campus Option (Lease or Purchase)**

Due to the limited availability of medical office space in the Hillcrest area, off-campus leased space could not accommodate the minimum amount of ambulatory space required in a single location. Even if space were available, at current market rents for medical offices and for surgical and procedure centers near campus, the first year's annual base rent for a building with 225,000 to 300,000 gsf of space would exceed \$14 million, and subject to ongoing rent escalation.

Similar to leased spaces, there are no options to purchase medical office space or land in the Hillcrest area that would accommodate the needed scope of the outpatient facility being proposed. Although off-campus clinical space will always be required to provide convenient access points for patients, such use of off-campus space for this magnitude of related clinical services may lead to lower patient satisfaction as a consequence of sending patients to multiple locations for services and limited opportunities for multi-disciplinary care in the clinic setting. This alternative could lead to reduced faculty morale and efficiency by forcing clinicians to divert time from clinical care, teaching, and research in order to commute between campus and multiple off-campus locations. This option would result in diminished clinical revenue by the reduction in the amount that can be collected per patient visit.

Moreover, this alternative does not meet the required space program, nor does it meet the goals of consolidating outpatient clinics and services in a single location, adjacent to inpatient services on the Hillcrest campus. Financial risks include reduced clinical revenue and increasing rents. Upfront design and construction costs would fluctuate depending on the facility, and operations and maintenance would likely be included in rental agreements.

## **3) Renovation of Existing Campus Facilities**

The acute care Hospital on the Hillcrest campus will fall out of compliance with State seismic requirements by 2030 and must be replaced or closed. Current outpatient buildings and services within or attached to the Hospital need to be vacated and removed as a result. Outpatient services are located in Medical Office North, which is attached to the Hospital (refer to Attachment 2). It is not feasible or advisable to remodel existing outpatient buildings as a long-



term solution as it is both costly and challenging to retrofit these facilities to meet current standards.

#### **4) No Project**

The option to not undertake the project is not feasible. Failing to provide an adequate solution for displaced outpatient specialty clinics and services will severely affect patient care as well as UC San Diego Health's reputation in the community. Patients would need to travel for care, putting an undue burden on an already vulnerable population. As the field of health care continues to emphasize outpatient care delivery, this option is not advisable.

#### **Conclusion/Recommended Solution**

Option 1 is the preferred solution. It meets all of the space requirements necessary to support a consolidated outpatient clinical enterprise on the Hillcrest Campus, including quantity of space and adjacencies to existing and future healthcare facilities. As such, UC San Diego proposes construction of a new outpatient facility to ensure the seamless and continued delivery of a wide spectrum of healthcare services on the Hillcrest Campus. The Phase 1 project would be comprised of an Outpatient Pavilion and a main parking structure/other associated parking.

#### **Parking Alternatives**

There are no feasible alternatives that would meet the proximate parking needs of patients and visitors to the Hillcrest Campus. The Phase 1 project would provide up to 2,000 parking spaces to replace Arbor and Bachman Structures and meet new demand. Additional spaces are necessary for the proposed expanded outpatient services not currently offered at Hillcrest, and these new services will generate more parking demand. By consolidating the parking into one general area, parking demands can be better managed, thus the net new spaces are marginal.

The Hillcrest area is proximate to San Diego transit systems including Metropolitan Transit System bus lines, light rail transit, dockless bikeshare programs, and walkable street grids. As the Light Rail Transit UC San Diego Blue Line extends to University City, the Hillcrest Campus will be well-positioned to connect to this network and to the La Jolla campus by modes other than private vehicle. Despite this nearby connectivity, the Hillcrest Campus does not have immediate access to transit stations and serves a population that is heavily dependent on vehicles to visit the campus. The patient population served by UC San Diego Health, especially in its Hillcrest location, is often amongst the most ill and least ambulatory. Many caregivers must have reasonably proximate parking in order to respond to the urgent needs of patients, while other research and administrative staff already embrace alternative transportation for their daily commutes.