

Appendix B

Initial Study

INITIAL STUDY
LONG BEACH MEMORIAL MEDICAL CENTER EXPANSION

PREPARED FOR:

CITY OF LONG BEACH
DEPARTMENT OF PLANNING AND BUILDING
333 WEST OCEAN BOULEVARD, 5TH FLOOR
LONG BEACH, CALIFORNIA 90802

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AUGUST 20, 2004

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SECTION 1.0

PROJECT DESCRIPTION

1.01 PROJECT TITLE

Long Beach Memorial Medical Center Expansion

1.02 LEAD AGENCY

The City of Long Beach is the Lead Agency for the proposed project.

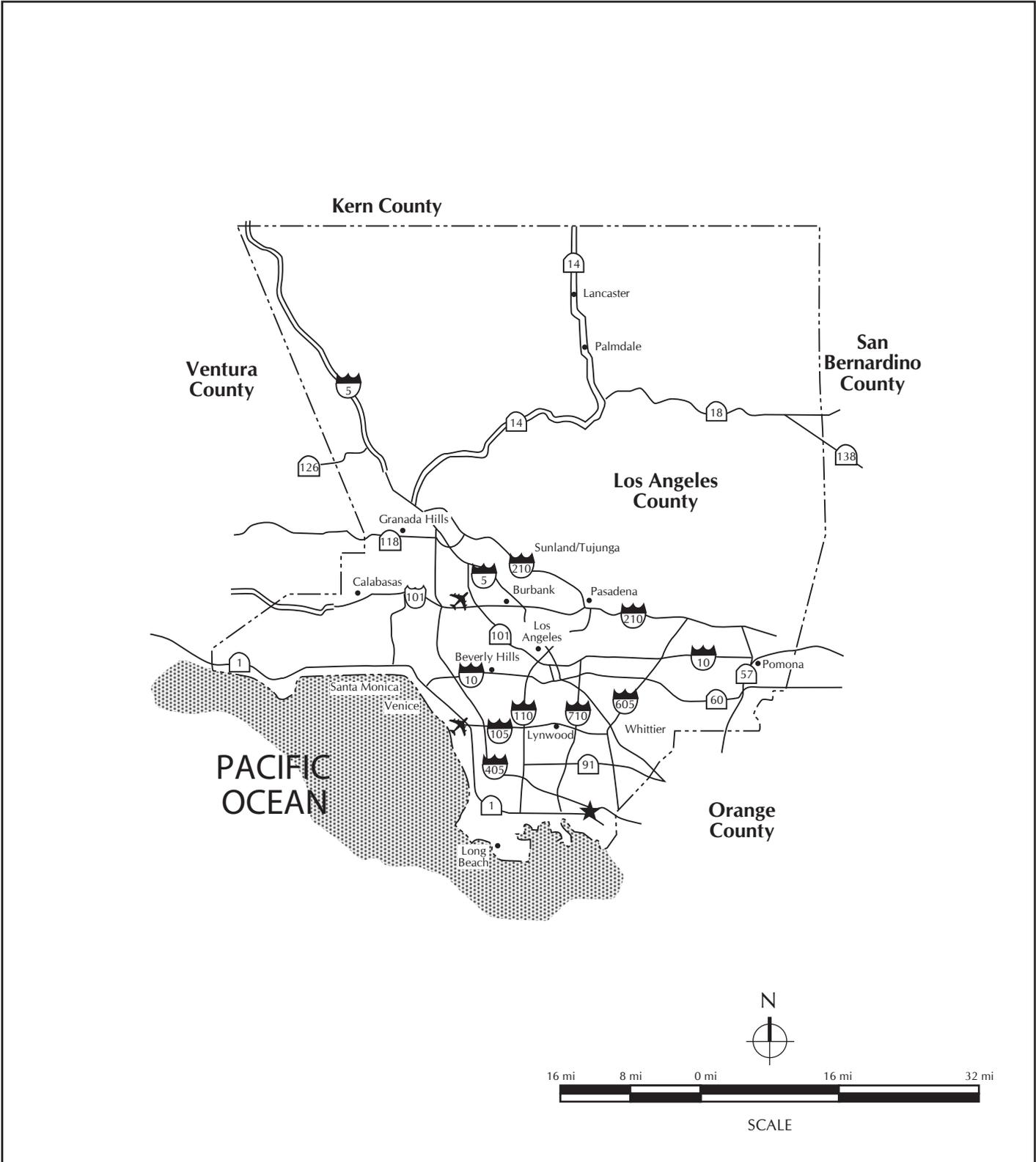
1.03 CONTACT PERSON AND PHONE NUMBER

Ms. Anita Garcia
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Department of Planning and Building
City of Long Beach
City Hall, 5th Floor
333 West Ocean Boulevard
Long Beach, CA 90802
Telephone: (562) 570-6193

1.04 PROJECT LOCATION

The Long Beach Memorial Medical Center Expansion project (proposed project) addresses proposed master planning for land uses and the development of specific project elements, within the approximately 54-acre project site in the Long Beach Memorial Medical Center (Campus) located in the City of Long Beach, County of Los Angeles, California (Figure 1.04-1, *Regional Vicinity*). Within the 54-acres Campus, it is anticipated that up to approximately 16 acres would be affected by the construction, operation, and maintenance of six proposed project elements in the next 20 years. The proposed project is located on the USGS 7.5-minute series Long Beach, California, topographic quadrangle (within the southwestern portion of the Los Cerritos Land Grant Boundary) (Figure 1.04-2, *Topographic Map*).¹ The elevation of the proposed project site ranges from 19 feet above mean sea level to approximately 67 above mean sea level. The Campus is located less than a mile south of U.S. Interstate 405 (San Diego Freeway), approximately 1 mile east of U.S. Interstate 710 (Long Beach Freeway), and approximately 1 mile north of State Route 1 (Pacific Coast Highway). The Campus is located approximately 3.5 miles northeast of Port of Long Beach, approximately 1 mile east of the Los Angeles River, and approximately 1 mile west of the Long Beach Airport. The Campus is bound on the north by East Spring Street, on the east by Atlantic Avenue, on the south by Willow Street, and on the west by Long Beach Boulevard (Figure 1.04-3, *Long Beach Memorial Medical Center Location*). The Campus includes two licensed hospitals, Long Beach Memorial Medical Center (LBMMC) and Miller Children's Hospital (MCH), and related facilities and infrastructure.

¹ U.S. Geological Survey. Photorevised 1981 (1964). Long Beach, California, 7.5-Minute Series Topographic Quadrangle. (Scale 1:24,000.) Contact: U.S. Geological Survey National Center, 12201 Sunrise Valley Drive, Reston, VA 20192.

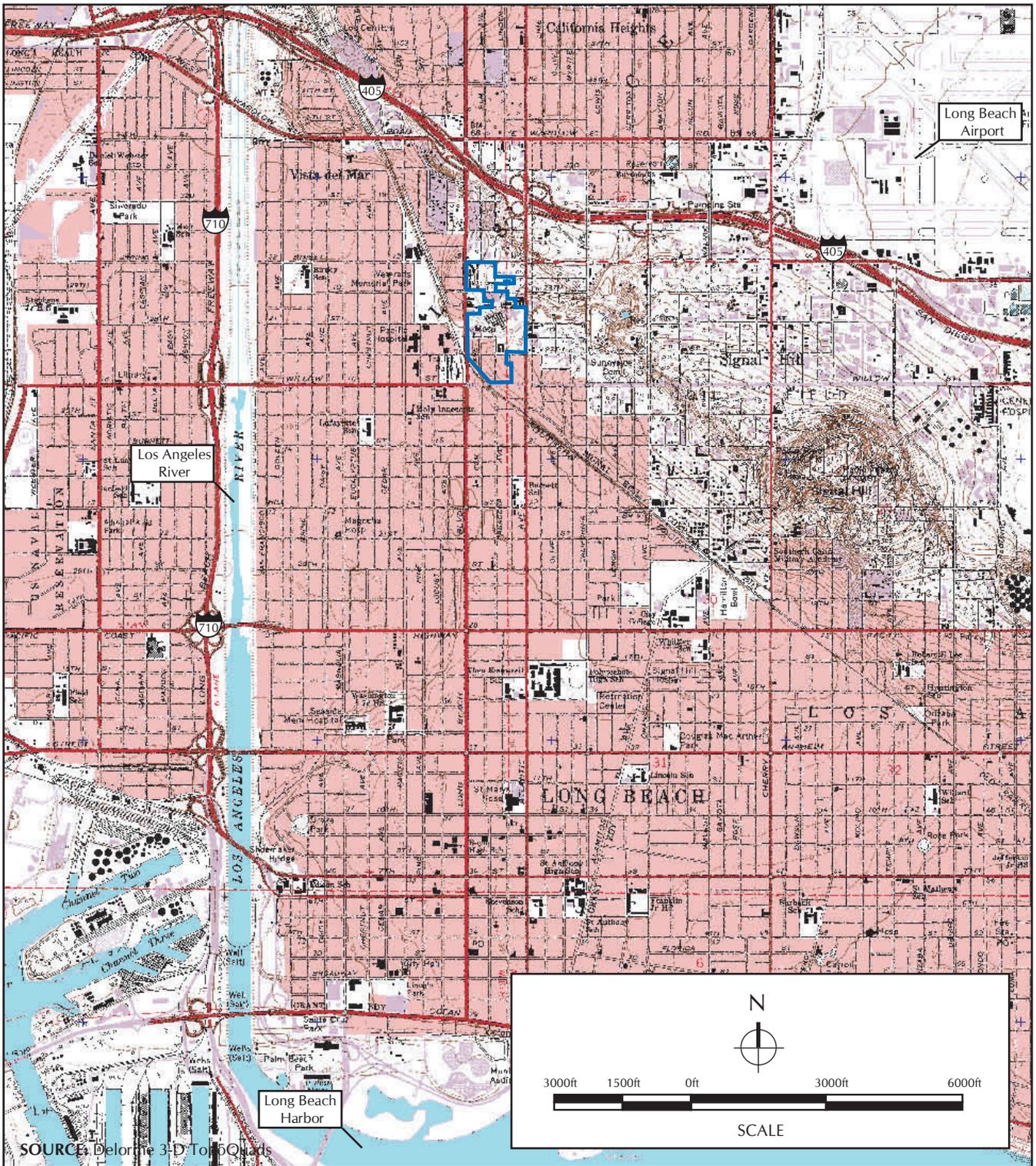


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★ Project Location



FIGURE 1.04-1
Regional Vicinity

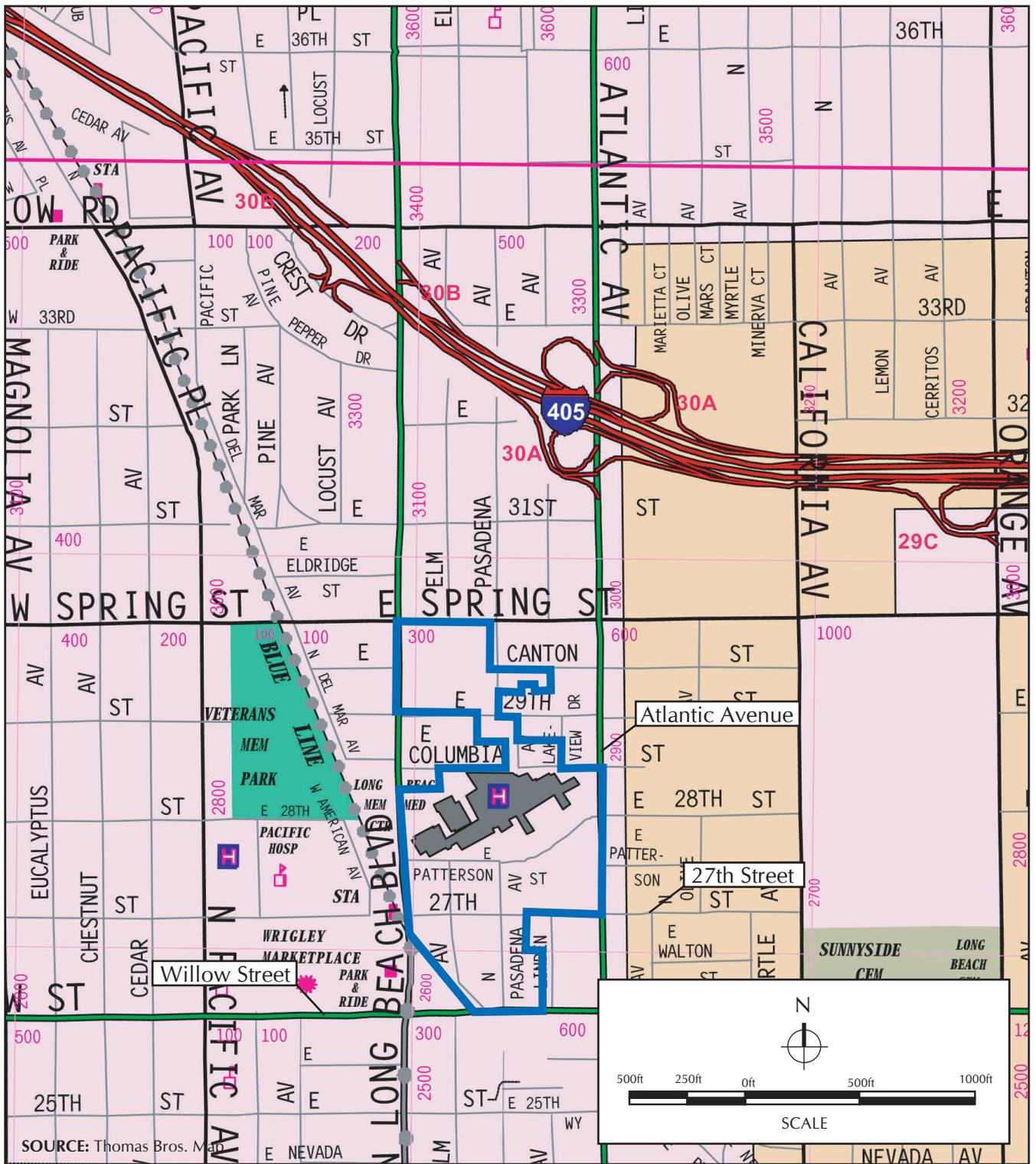


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 Long Beach Memorial Medical Center Campus Boundary



FIGURE 1.04-2
Topographic Map



SOURCE: Thomas Bros. Map

LEGEND

-  Project Boundary



FIGURE 1.04-3
Long Beach Memorial Medical Center Location

1.05 PROJECT SPONSOR

Mr. Pat Johner
Vice President, Facilities
Long Beach Memorial Medical Center
2801 Atlantic Avenue
Long Beach, CA 90806-1737

Designated Agent:
Mr. Jerry Oksner
Adams Project Management Consulting, LLC
600 Anton Boulevard, Suite 1100
Costa Mesa, CA 92626

1.06 GENERAL PLAN LAND USE DESIGNATION

The Campus is designated as Land Use Designation (LUD) No. 7 Mixed-Use District in the Land Use element of the City of Long Beach General Plan.² This district is intended for use in large, vital activity centers, such as medical facilities, that by their nature involve mixed uses.

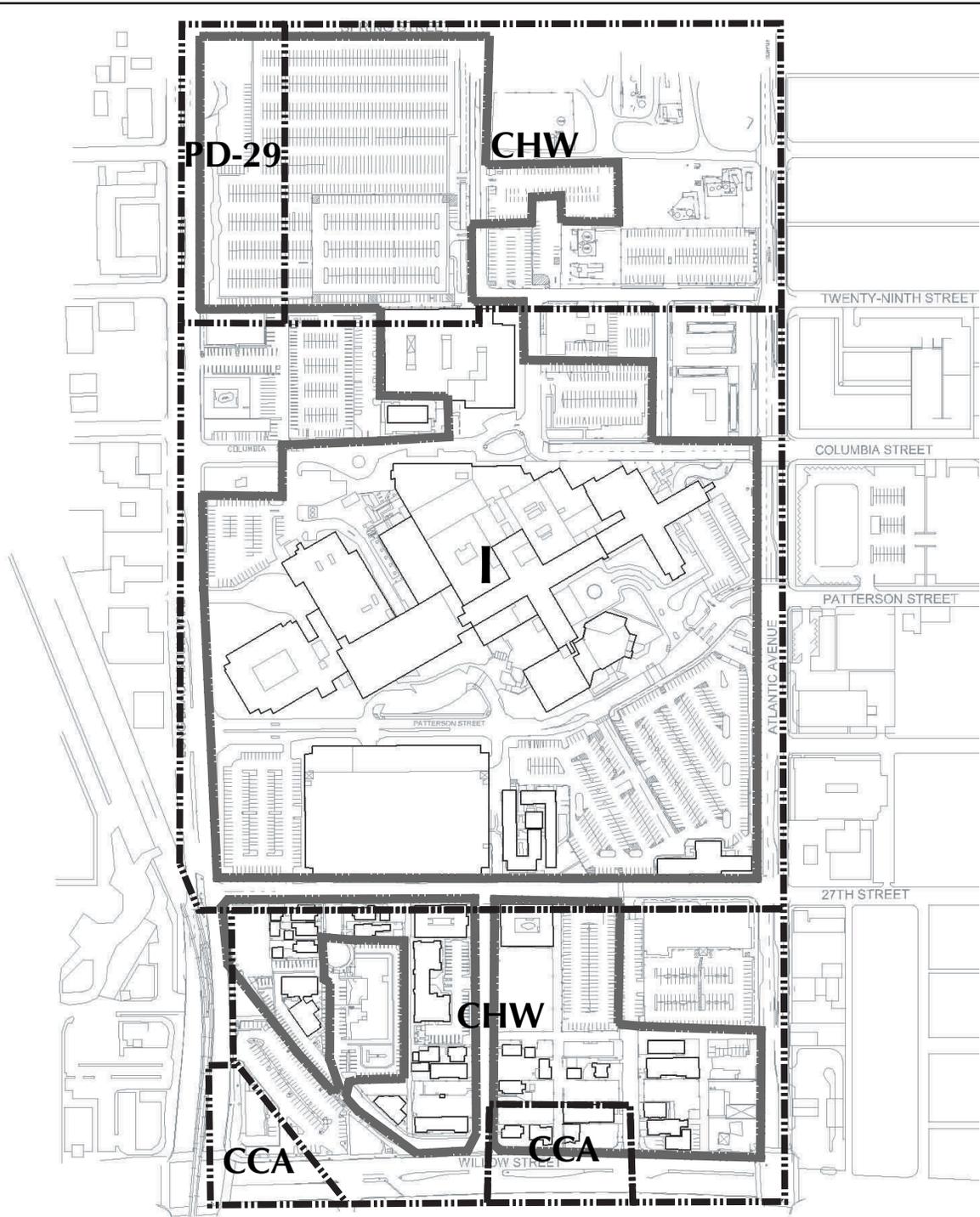
The proposed project is located within the Central Long Beach Redevelopment Area.

1.07 ZONING

There are currently four zoning designations applied to the Campus (Figure 1.07-1, *Existing Zoning Districts*). Approximately a third of the Campus, located between 29th Street and 27th Street is zoned Institutional (I) by the City of Long Beach. The principal permitted use of the Institutional designation is that of a public or institutional nature, including hospitals, medical centers, medical office complexes, convalescent hospitals, parking, schools, social service office of nonprofit organizations, and special group residences. The portions of the Campus between 29th Street and Spring Street are zoned as Planning Development (PD) and Regional Highway (CHW) Districts. The PD District was established to allow flexible development plans to be prepared for areas of the City that may benefit from the formal recognition of unique or special land use and the definition of special design policies and standards not otherwise possible under conventional zoning district regulations. The CHW District is a commercial use district for mixed-scale commercial uses along major arterial streets and regional traffic corridors. The portions of the Campus between 27th Street and Willow Street are zoned CHW and Community Automobile-Oriented (CCA).³ The CCA District permits retail and service uses for an entire community, including convenience and comparison shopping goods and associated services. LBMCC has requested rezoning of the entire site to Institutional (Figure 1.07-2, *Proposed Zoning Districts*).

² City of Long Beach, Department of Planning and Building. July 1991. *General Plan Maps and Descriptions of Land Use Districts*. Prepared by: City of Long Beach, Department of Planning and Building, City Hall, 333 West Ocean Boulevard, Long Beach, CA 90802.

³ City of Long Beach. 1982. City of Long Beach Municipal Code (Ord. C-5831 § 1, 1982), Chapter 21. Available at: <http://www.longbeach.gov/apps/cityclerk/lbmc/title-21/frame.htm>



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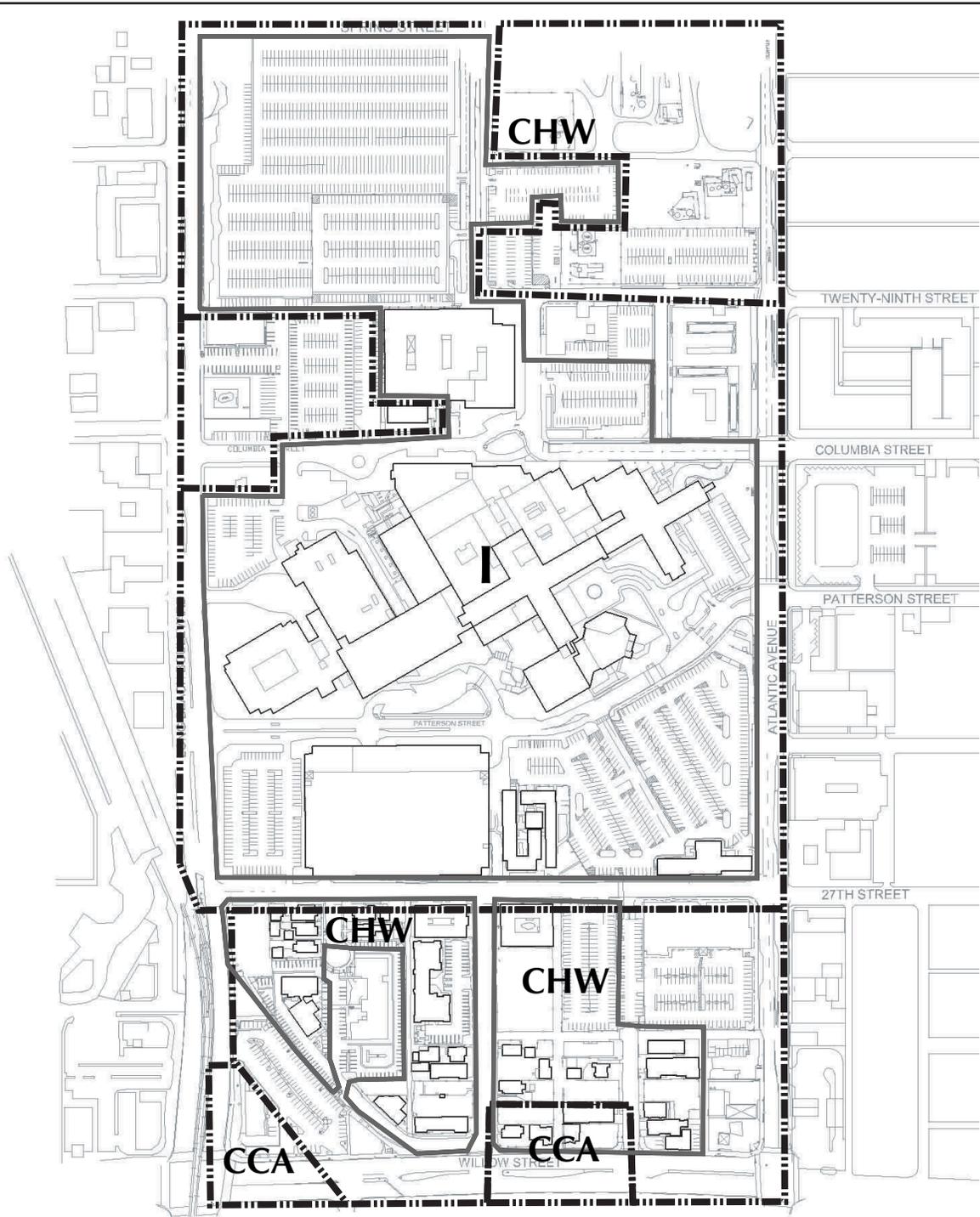
-  Zoning Districts
-  LBMCC Boundary



Not to Scale



FIGURE 1.07-1
Existing Zoning Districts



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-  Zoning Districts
-  Proposed LBMMC Boundary



Not to Scale



FIGURE 1.07-2
Proposed Zoning Districts

1.08 EXISTING CONDITIONS

The 54-acre Campus is completely developed and characterized by six general land uses: (1) inpatient medical facilities, (2) outpatient medical facilities, (3) mixed-use facilities (nonresidential), (4) utilities, (5) circulation, and (6) parking (Figure 1.08-1, *Existing Conditions*). Photographs of the proposed project site are included in Figure 1.08-2, *Site Photographs*. There are approximately 1,213,945 gross square feet of structures located within the Campus (Table 1.08-1, *Existing Conditions: Gross Floor Areas*).⁴ There are two licensed hospitals within the Campus, LBMMC and MCH. These facilities are centrally located on the Campus, north of 27th Street, east of Long Beach Boulevard, south of Columbia Street, and west of Atlantic Avenue. In addition to inpatient services, outpatient services are provided in structures located north and south of LBMMC and MCH. There are a variety of mixed uses housed in structures located south of 27th Street, including a child care center, nutrition programs, and outpatient clinics. Approximately 1.93 acres are dedicated to circulation within the Campus, not including public right-of-ways. There are a total of 3,452 parking spaces located in 11 locations throughout the Campus, including 135 surplus parking spaces (Figure 1.08-1; Figure 1.08-3, *Existing Parking*; Table 1.08-2, *Existing Parking*).

**TABLE 1.08-1
EXISTING CONDITIONS: GROSS FLOOR AREAS**

Building Number per Existing Building Plan*	Building	Gross Floor Areas (Square Foot)
1	Miller Children's Hospital	175,162
2	Long Beach Memorial Medical Center	697,630
3	Administration Building	129,531
4	Memorial West Facility	76,515
5	Miller House	25,000
6	Ranch House / WIC Medical Center	12,000
8	Memorial Guest Residence Hotel	12,000
9	Research Building	20,000
17	Buffums Plaza	35,000
	Rehab	31,107
	Total	1,213,945

NOTE:

Building numbers as shown on "Existing Buildings" diagram by Taylor and Associates, dated July 2004.

⁴ Marie Campbell, *Personal Communication*, 9 August 2004. Pat Johner, Long Beach Memorial Medical Center, 2801 Atlantic Avenue, Long Beach, CA 90806-1737.

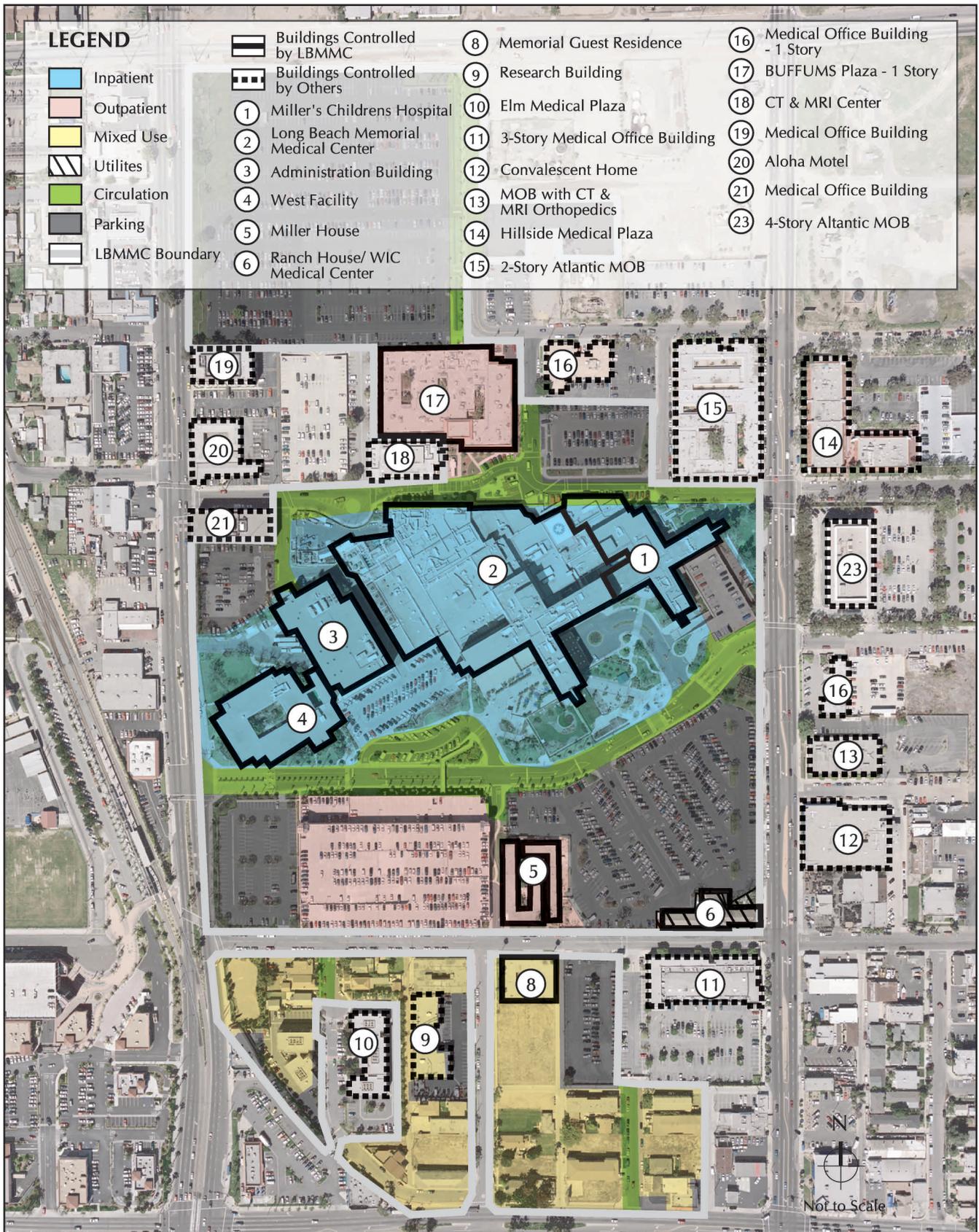


FIGURE 1.08-1
Existing Conditions



PHOTO 1
View of Entrance to Long Beach Memorial Medical Center



PHOTO 2
View from Atlantic Ave. and Spring St.



FIGURE 1.08-2
Site Photographs

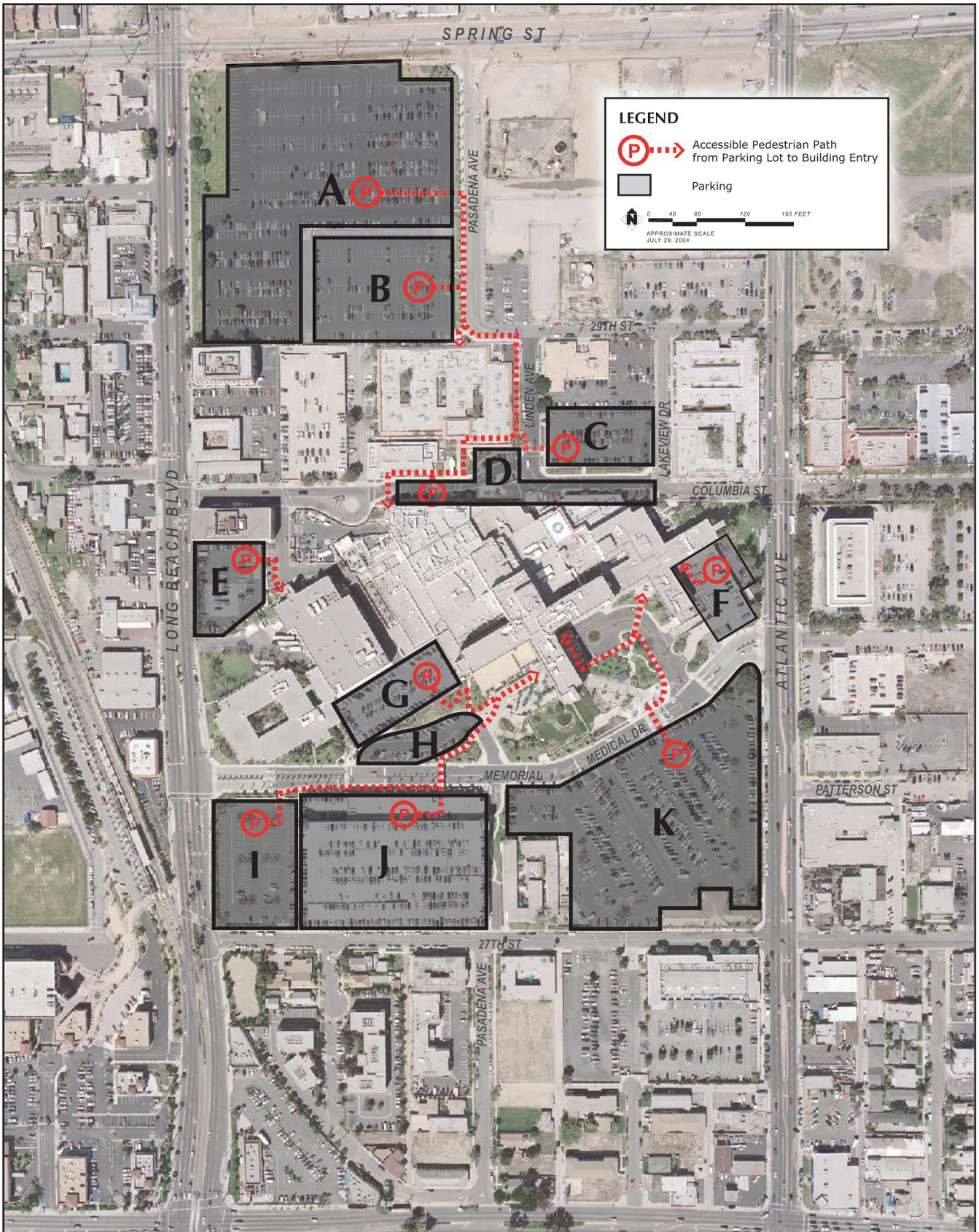


FIGURE 1.08-3
Existing Parking

**TABLE 1.08-2
EXISTING PARKING**

	Staff/Employee Spaces	Patient/Visitor Spaces	Doctor Spaces	Total Spaces
Existing Parking Demand				3,317
Existing Parking Supply				
Lot A	675	—	—	675
Lot B	—	217	—	217
Lot C	—	74	—	74
Lot D	—	—	28*	28
Lot E	85	—	—	85
Lot F	—	26	60	86
Lot G	—	—	87	87
Lot H	—	29	—	29
Lot I	150	—	—	150
Lot J	1,430	164	—	1,594
Lot K	—	427	—	427
Subtotal	2,340	937	175	3,452
Existing Parking Surplus				135

NOTE:

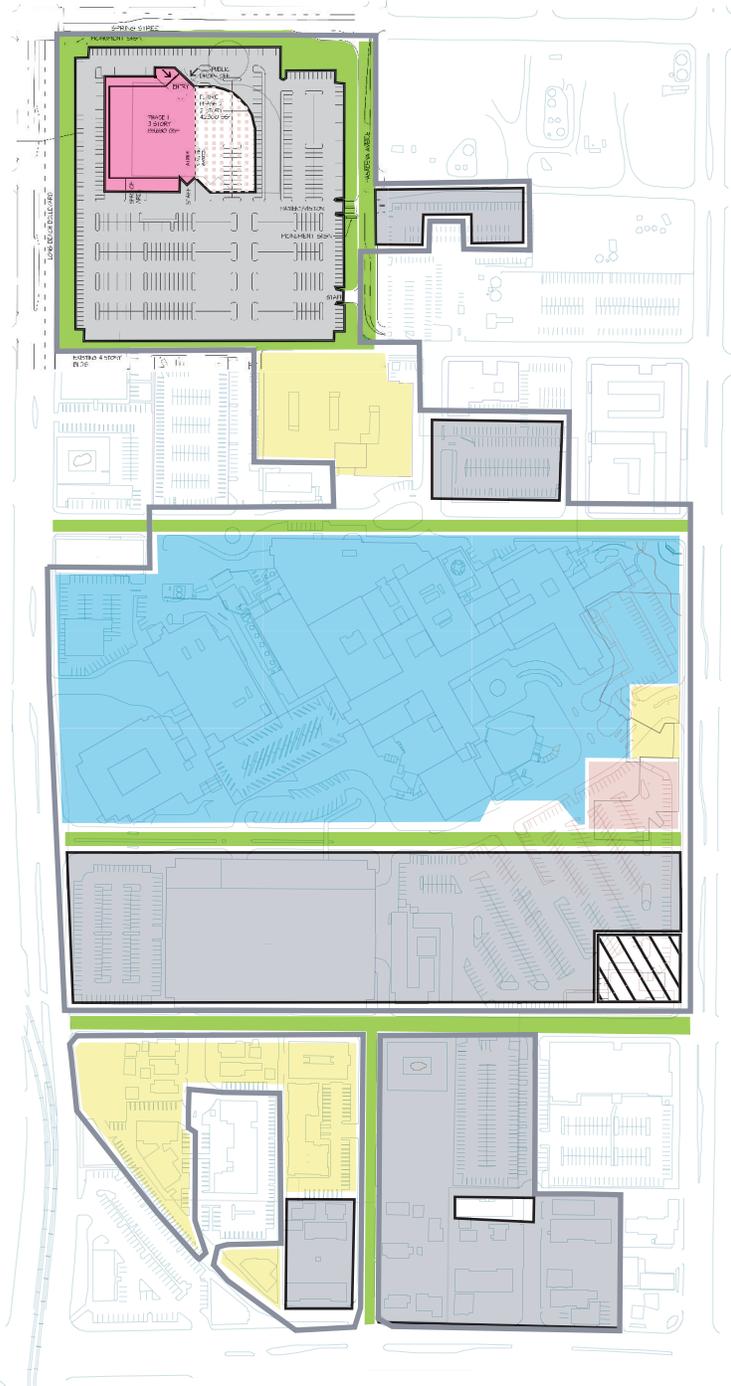
Spaces shared with patients and visitors.

1.09 PROJECT DESCRIPTION

The proposed project consists of a Master Plan of Land Uses that provides a conceptual framework for reorganization of the six existing land uses: (1) inpatient medical facilities, (2) outpatient medical facilities, (3) mixed-use facilities (nonresidential), (4) utilities, (5) circulation, and (6) parking (Figure 1.09-1, *Proposed Master Plan of Land Uses*). Within this conceptual framework, six proposed project elements could be constructed within the next 5 to 10 years:

1. Todd Cancer Institute (TCI)
2. Miller Children’s Hospital—Pediatric Inpatient Tower, Utility Trench, and Central Plant Building
3. Miller Children’s Hospital—Pediatric Outpatient Building
4. Miller Children’s Hospital—Link Building
5. Roadway Realignment
6. Parking Program

The TCI would facilitate expansion of the Campus by relocating cancer treatment programs currently located within the licensed hospital facility and other diverse locations to a single building dedicated to cancer treatment programs. The comprehensive expansion of MCH would ultimately consist of three new buildings: the pediatric inpatient tower, the pediatric outpatient building, and the link building supporting mixed uses that would connect the inpatient tower and the outpatient building (Figure 1.09-2A, *Miller Children’s Hospital Expansion Phase I North Elevation*; Figure 1.09-2B, *Miller Children’s Hospital Expansion Phase II East Elevation*; and Figure 1.09-2C, *Miller Children’s Hospital Expansion South and West Elevations*).



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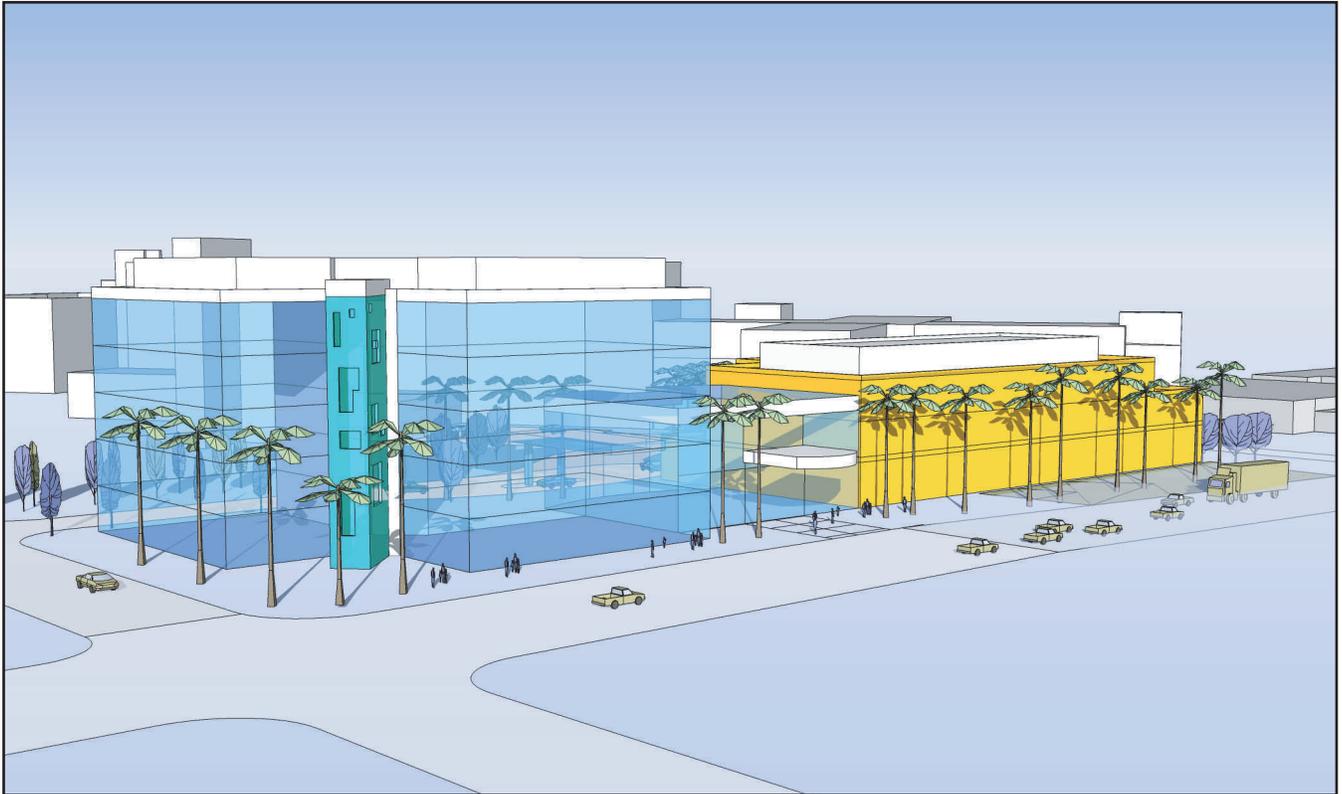
- Phase I
- Inpatient
- Outpatient
- Mixed Use
- Circulation
- Parking
- LBMCC Boundary
- Utilities



Not to Scale



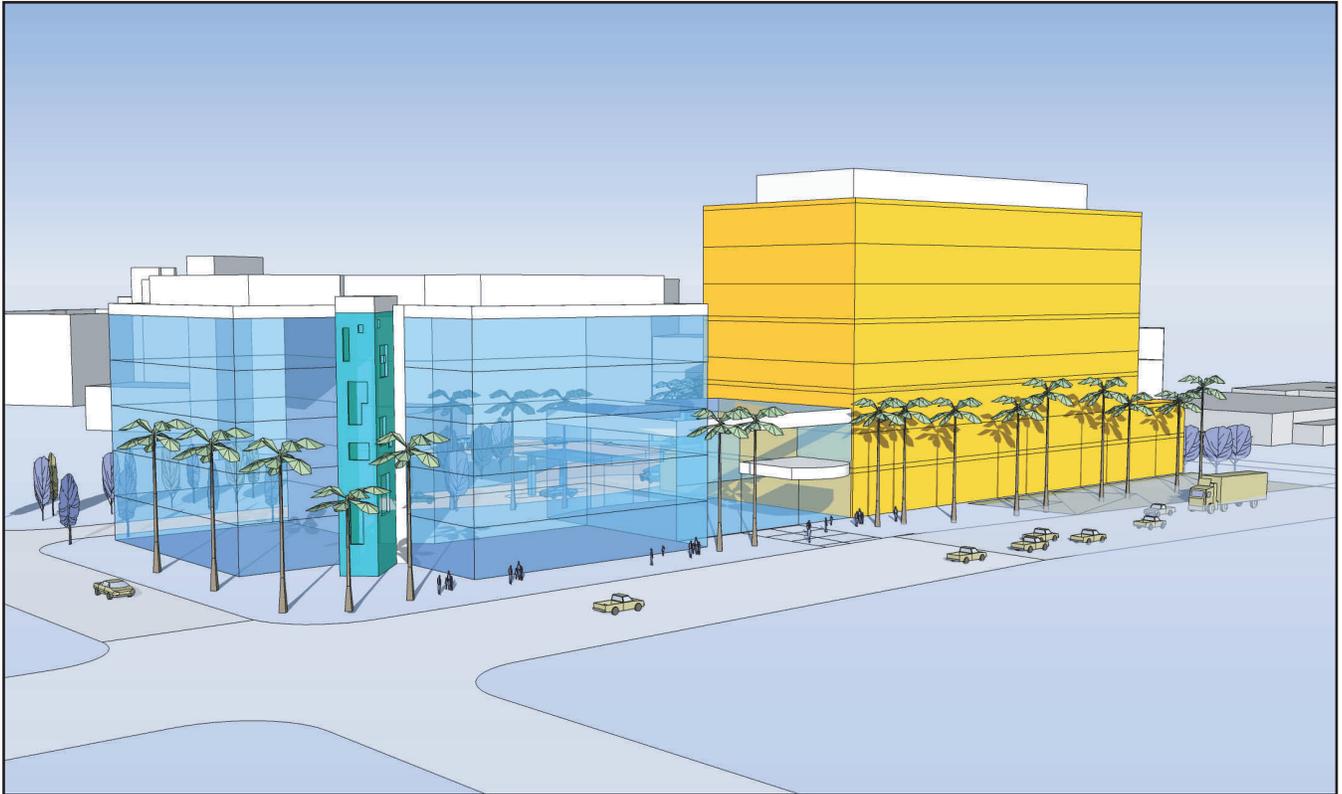
FIGURE 1.09-1
Proposed Master Plan of Land Uses



Note: Conceptual massing study. Buildings have not been designed.



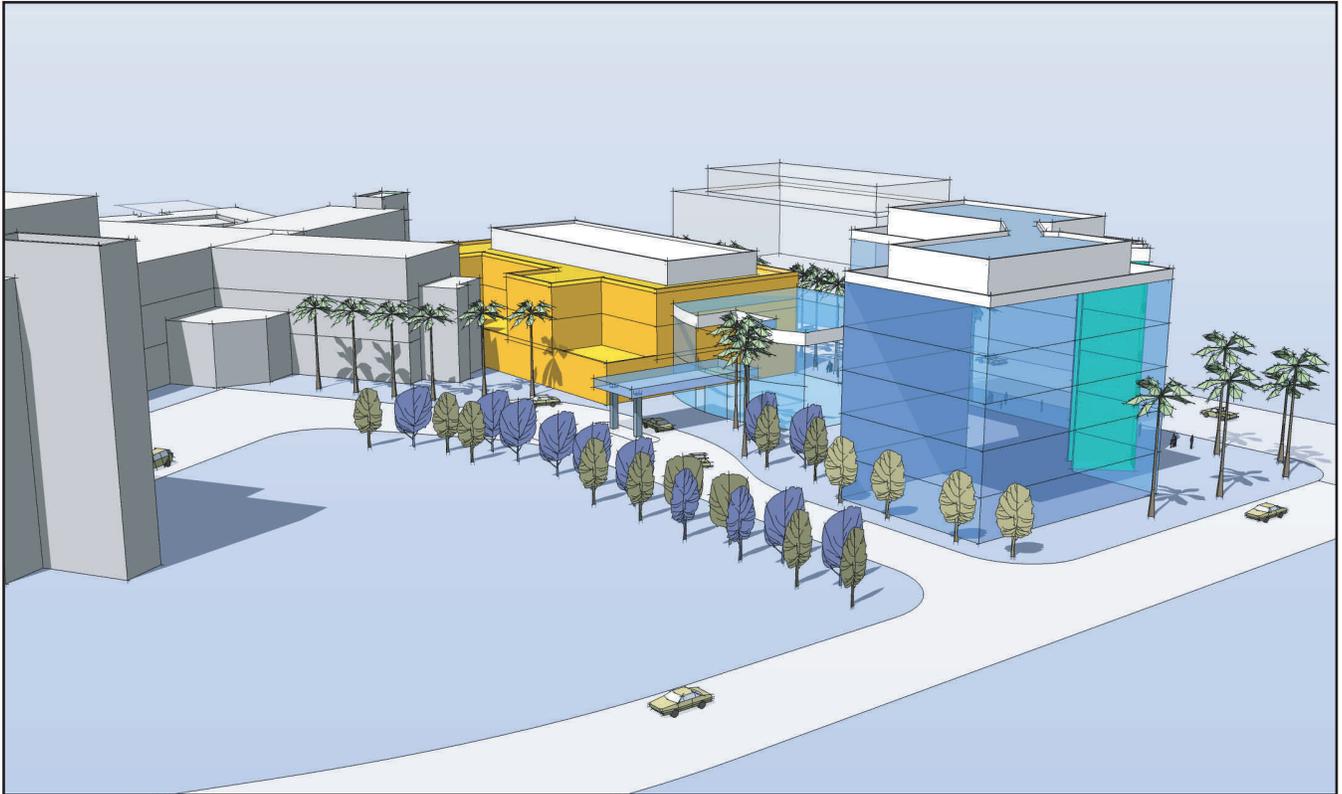
FIGURE 1.09-2A
Miller Children's Hospital Expansion Phase I North Elevation



Note: Conceptual massing study. Buildings have not been designed.



FIGURE 1.09-2B
Miller Children's Hospital Expansion Phase II East Elevation



Note: Conceptual massing study. Buildings have not been designed.



FIGURE 1.09-2C
Miller Children's Hospital Expansion South and West Elevations

1.09.1 Master Plan of Land Uses

The City of Long Beach Zoning Code, Section 21.34.020,⁵ requires that all sites zoned as Institutional and having an area greater than 40,000 square feet in the City of Long Beach to submit a Long Range Development Plan that includes all development of the site and site expansions (within a zone designated as Institutional or under the institution's ownership, whichever is greater) anticipated over the next 20 years. It is set forth in Section 21.34.020 that all future projects must be consistent with the approved Long Range Development Plan. The proposed Master Plan of Land Uses provides a conceptual framework for the reorganization of the pattern of land uses within the Campus to meet the identified immediate needs and anticipated long-term needs of the Campus and community over the next 20 years (Table 1.09.1-1, *Anticipated Projects Over the 20-Year Period of the Long-Range Master Plan*). The proposed land uses are consistent with the existing LUD No. 7 Mixed-Use District in the General Plan land use designation, and the Institutional zoning. It is anticipated that the land owned by LBMMC between 29th Street (to the south) and Spring Street (to the north), which is currently zoned PD-29 and CHW, would be rezoned to Institutional. However, the land owned by LBMMC between 27th Street (to the north) and Willow Street (to the south), currently zoned CHW and CCA, would not be rezoned because the proposed uses for those areas are consistent with the existing zoning class specifications.

**TABLE 1.09.1-1
ANTICIPATED PROJECTS OVER THE 20-YEAR PERIOD OF
THE LONG-RANGE MASTER PLAN**

Project Title	Total Square Feet / Number of Stories	Anticipated Construction Start Date / Completion Date
Todd Cancer Institute Phase I	83,630 / 3 stories	July 2005 / September 2006
Todd Cancer Institute Phase II	42,300 / 2 stories	July 2010 / June 2011
Miller Children's Hospital—Pediatric Inpatient Tower, Phase I	124,500/ 4 stories	October 2005 / January 2008
Miller Children's Hospital—Pediatric Inpatient Tower, Phase II	73,500 / 3 stories	January 2012 / June 2013
Utility Trench	1,000 linear feet, underground	July 2005 / January 2008
Central Plant Building	3,500 / 1 story	June 2006 / August 2007
Miller Children's Hospital—Pediatric Outpatient Building	120,000 / 8 stories	October 2005 / May 2007
Miller Children's Hospital—Link Building	20,000 / 3 story	July 2010 / June 2011
Roadway Realignment	820 linear-feet	July 2005 / October 2005
Parking Program	2,187 parking spaces	July 2005 / December 2007

⁵ City of Long Beach, 1982. City of Long Beach Municipal Code (Ord. C-5831 § 1, 1982), Chapter 21. Available at: <http://www.longbeach.gov/apps/cityclerk/lbmc/title-21/frame.htm>

1.09.2 Todd Cancer Institute

The TCI would be located on the northwestern corner of the Campus, southeast of the intersection of Long Beach Boulevard and Spring Street (Figure 1.09.2-1, *Todd Cancer Institute Conceptual Site Plan*). The existing land use at this location is an 872-stall surface parking lot. The TCI building would provide comprehensive outpatient cancer services in a single facility designed for the unique requirements of cancer patients and their families. These services are currently provided in approximately 24 distinct locations distributed throughout the Campus and in nearby, leased facilities. The TCI building would also be designed to reinforce a sense of arrival to the northern edge of the Campus. Visitors would access the TCI from entry driveways located on Spring Street and on Pasadena Avenue. An additional driveway from Pasadena Avenue would provide staff and service access. Outpatient cancer services would ultimately encompass approximately 125,930 gross square feet of new space constructed in two phases (Figure 1.09.2-2A, *Todd Cancer Institute North and South Elevations*; Figure 1.09.2-2B, *Todd Cancer Institute West and East Elevations*).

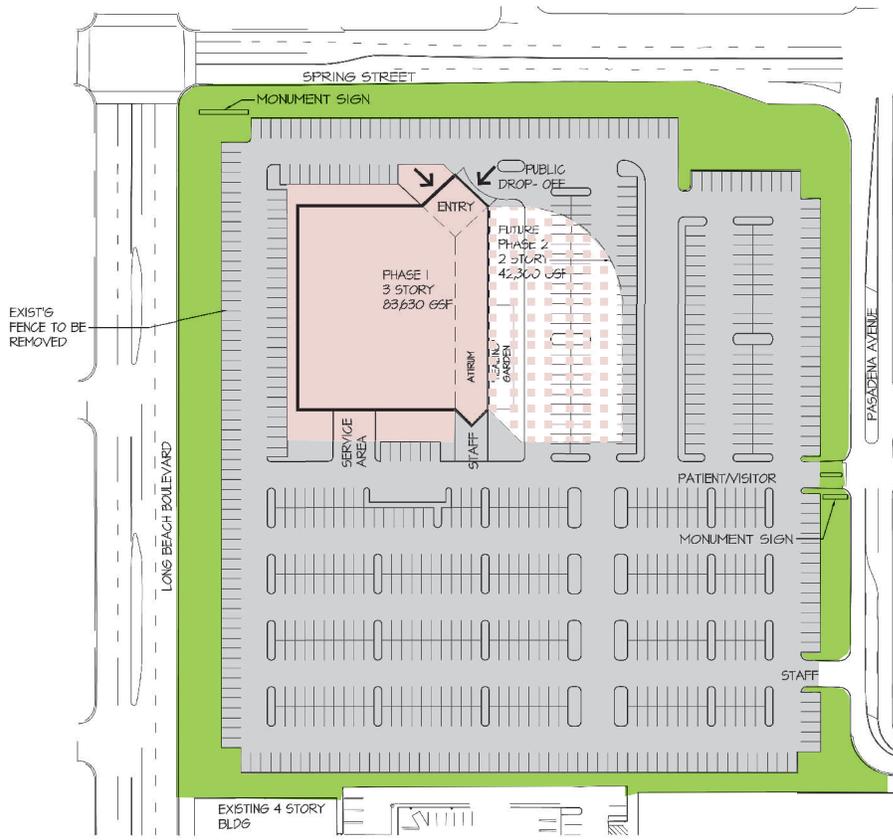
Landscaping would be provided along Long Beach Boulevard and Spring Street frontages consistent with City of Long Beach requirements. Landscaping within the Campus would be consistent with existing Campus landscaping. A healing garden would be developed adjacent to the TCI on the east side of the building. Amenities and plant selections would be sensitive to the needs of cancer patients and would accentuate the healing and medicinal properties of certain plants.

Phase I of the TCI would provide 83,630 gross square feet in a 54-foot-high, three-story building and an atrium featuring a 70-foot-high skylight. The building would be identified by two illuminated building signs reading "Todd Cancer Institute" and ground-level monument signage. The Phase I portion of the building would require 419 parking spaces. It is anticipated that there would be a maximum of approximately 120 employees working in the building at one time. Phase I of the TCI is proposed to initiate construction in July 2005. Upon completion of Phase I in September 2006, the undeveloped portions of the site would accommodate approximately 700 parking stalls.

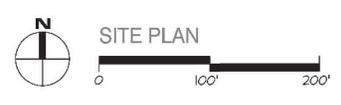
Phase II would provide an additional 42,300 gross square feet in a new 33-foot-high, two-story horizontal expansion. The Phase II portion of the building would require 212 parking spaces. Upon completion of Phase II, the undeveloped portions of the site would accommodate approximately 642 parking stalls. It is anticipated that there would be a maximum of approximately 60 additional employees working in the building at one time. Construction of Phase II of the TCI is contingent on growth of outpatient cancer services, the needs of the Long Beach community, and philanthropy. The likely dates to initiate and complete construction are July 2010 through June 2011.

1.09.3 Miller Children's Hospital—Pediatric Inpatient Tower, Utility Trench, and Central Plant Building

The expansion of MCH, through the addition of a pediatric inpatient tower, would be located immediately adjacent to the existing MCH facility, southwest of the intersection of Atlantic Avenue and Columbia Street (Figure 1.09.3-1, *Miller Children's Hospital Expansion*). The existing land use at this location is an 86-stall, multilevel parking structure. The parking structure would be demolished to accommodate the proposed pediatric inpatient tower. Access to the pediatric inpatient tower would be provided on multiple floors of the existing MCH facility and by a new pedestrian entrance on the south facade of the building. At build-out, the MCH would provide 205,250 gross square feet (Figure 1.09.3-2A, *Miller Children's Hospital North and South Elevations*; Figure 1.09.3-2B, *Miller Children's Hospital West and East Elevations*).



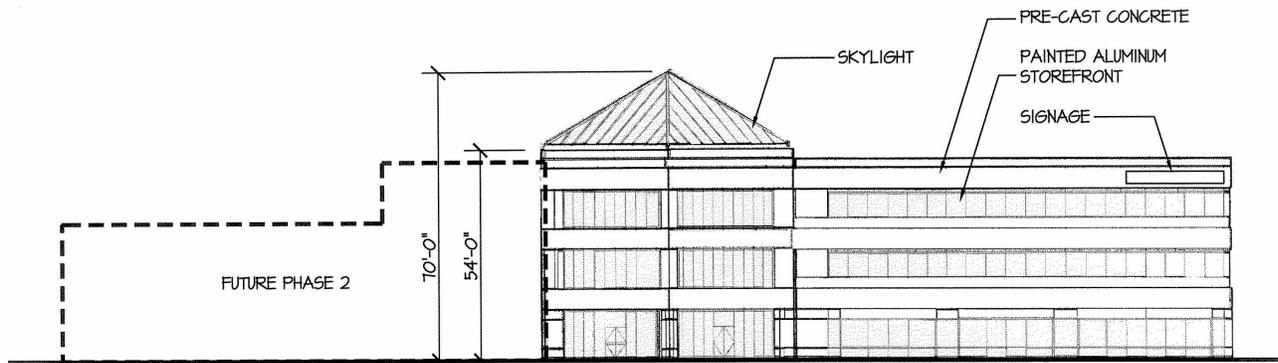
PHASE 1	
BUILDING AREA:	83,630 SF
PARKING SUMMARY:	
1. PARKING PROVIDED ON SITE	121
2. PHASE 1 REQUIRED PARKING (@ 5 SPACES PER 1000 GSF)	419
3. SURPLUS PARKING	302
PHASE 2	
BUILDING AREA:	42,300 SF
PARKING SUMMARY:	
1. REMAINING PARKING FROM PHASE 1	230
2. PHASE 2 REQUIRED PARKING (@ 5 SPACES PER 1000 GSF)	221
3. SURPLUS PARKING	3



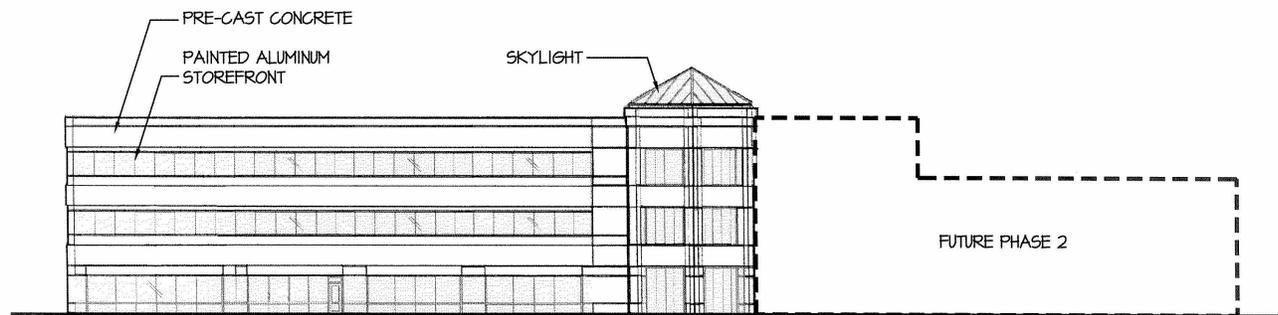
- LEGEND**
- Phase I
 - Phase II
 - Circulation
 - Parking



FIGURE 1.09.2-1
Todd Cancer Institute Conceptual Site Plan



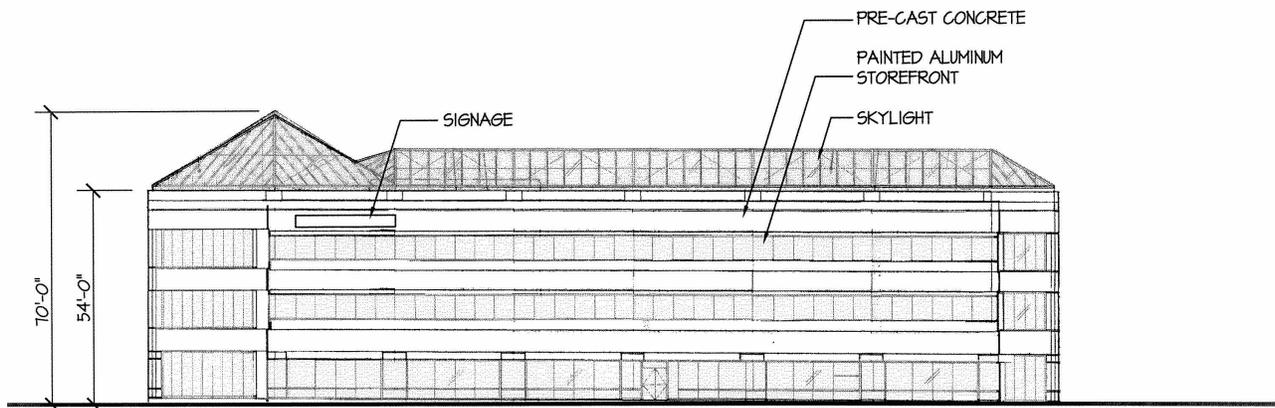
NORTH ELEVATION



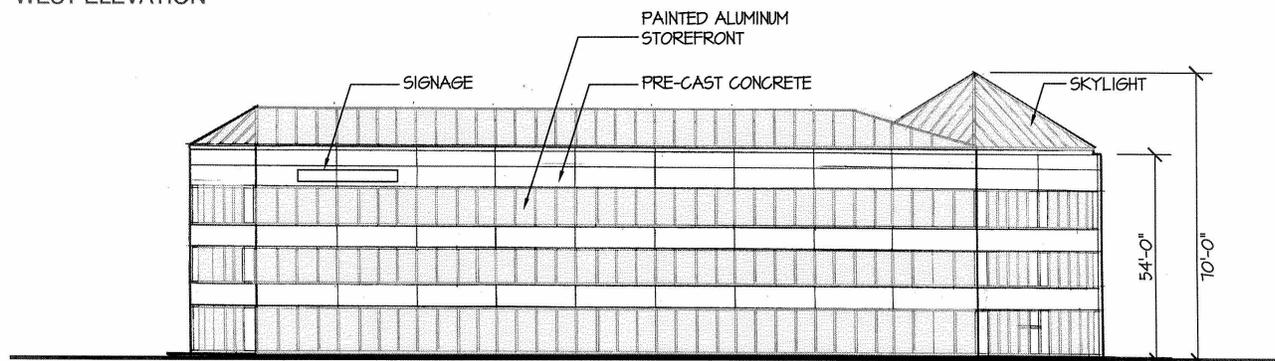
SOUTH ELEVATION



FIGURE 1.09.2-2A
Todd Cancer Institute North and South Elevations



WEST ELEVATION



EAST ELEVATION



FIGURE 1.09.2-2B
Todd Cancer Institute West and East Elevations

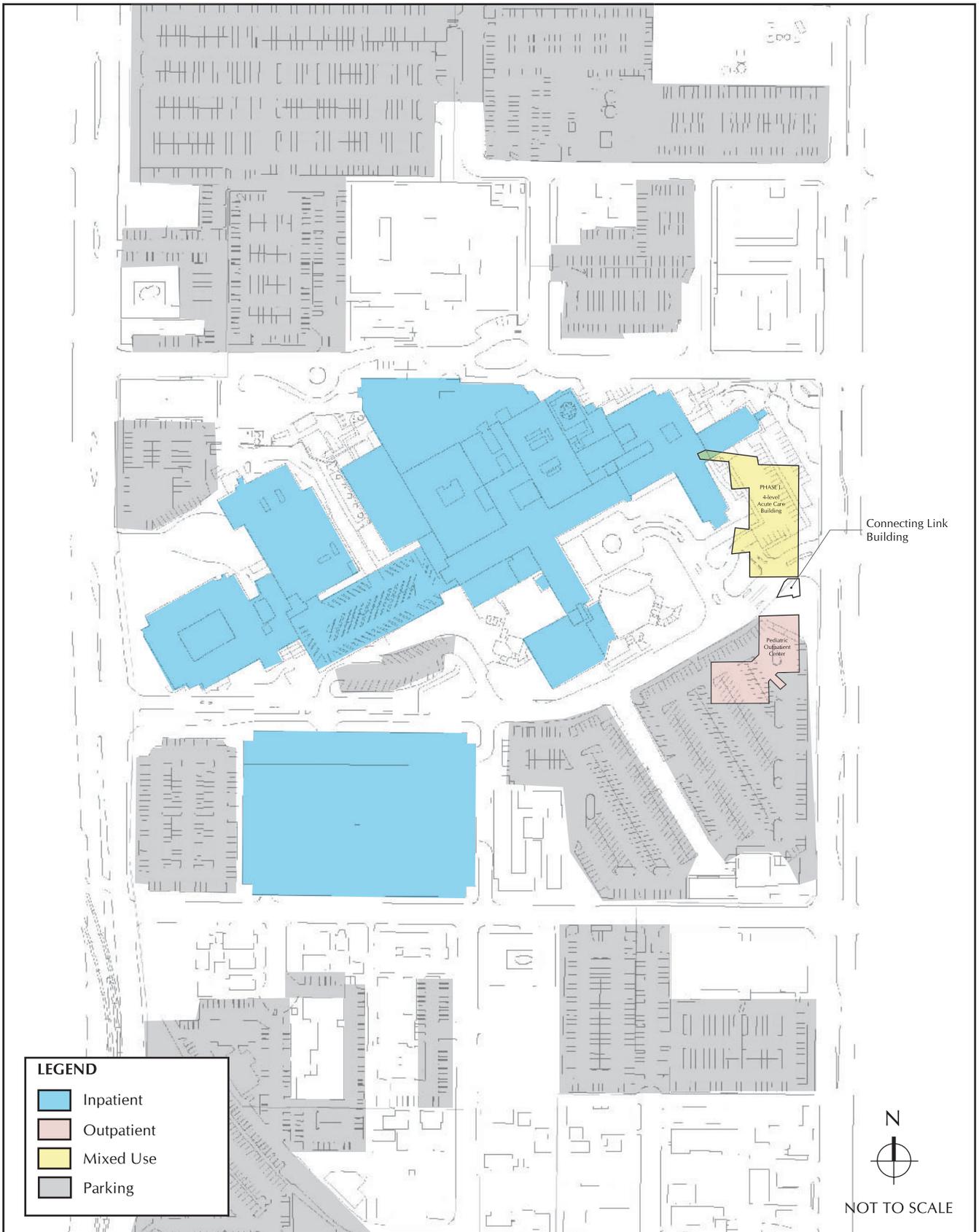


FIGURE 1.09.3-1
Miller Children's Hospital Expansion

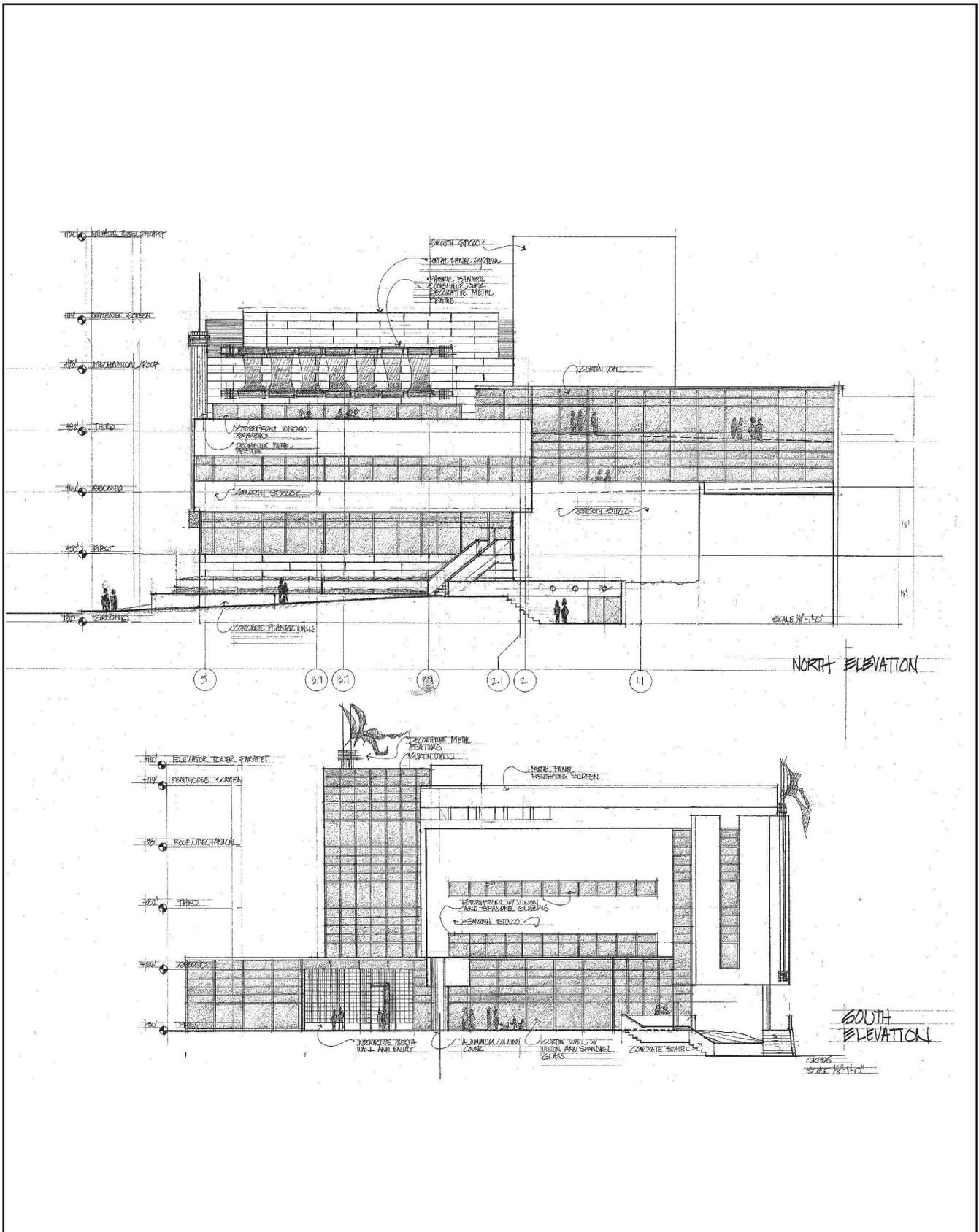


FIGURE 1.09.3-2A
Miller Children's Hospital North and South Elevations

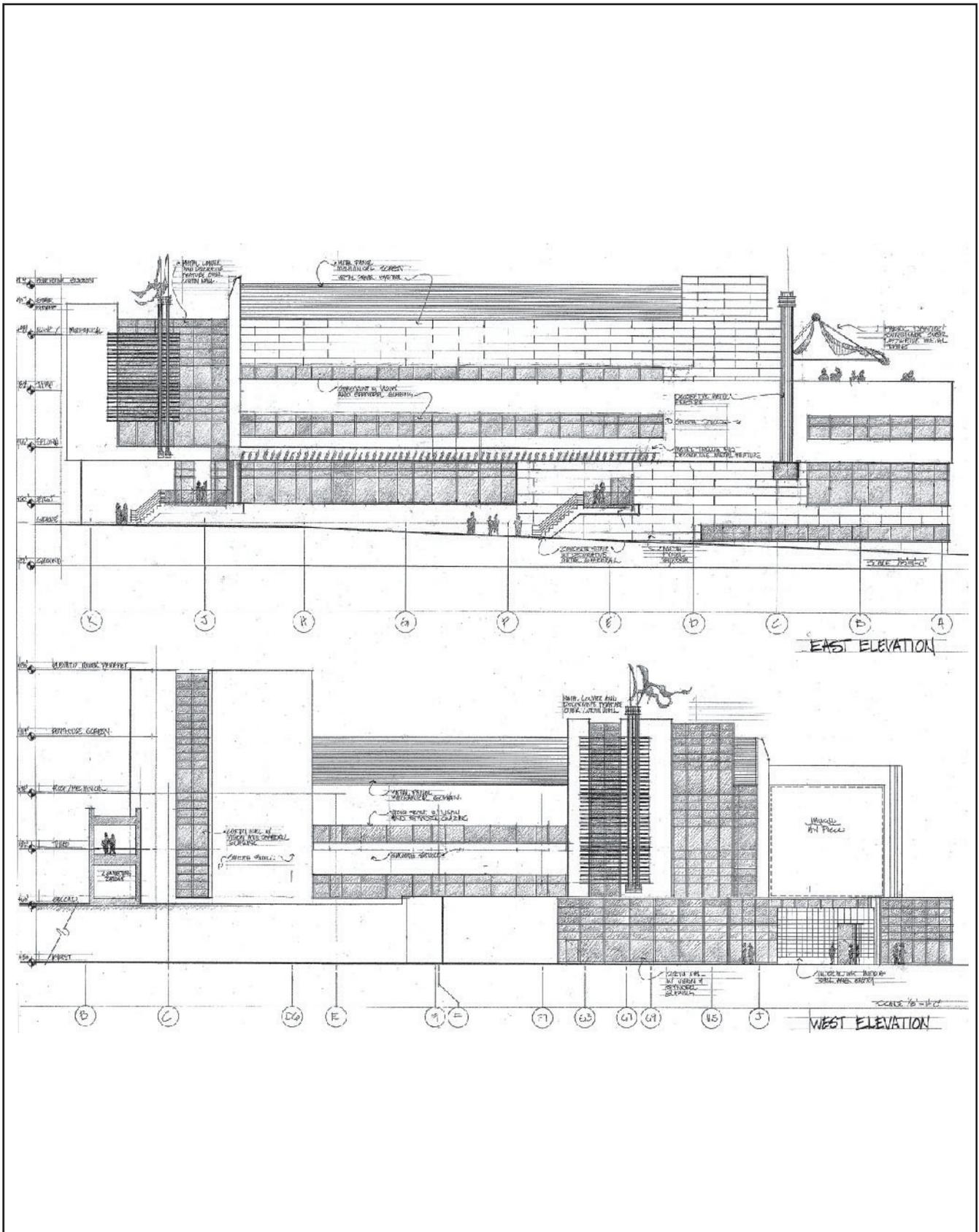


FIGURE 1.09.3-2B
Miller Children's Hospital West and East Elevations

Phase I of the MCH pediatric inpatient tower would provide approximately 129,220 square feet of new space for pediatric surgical services, imaging, lobby, newborn intensive care services, and general pediatric inpatient care services. It is anticipated that there would be a maximum of approximately 310 employees working in the building at one time. Phase I would consist of a four-story building with one story below grade and three stories above grade. The Phase I structure's highest point would be approximately 84 feet above grade. The building would be identified by three illuminated building signs reading "Miller Children's Hospital" and ground-level monument signs. The Phase I portion of the building would require 144 parking spaces. Phase I of the new pediatric inpatient tower is proposed to initiate construction in October 2005, with completion in January 2008. Phase II would provide approximately 86,030 square feet in a vertical expansion of the Phase I structure. The highest point of the combined Phase I and Phase II structure would be approximately 148 feet above grade. The Phase II portion of the building would require 192 parking spaces. Construction of Phase II is contingent on the growth of inpatient pediatric cancer services, the needs of the Long Beach community, and philanthropy. The likely dates to initiate and complete construction of Phase II of the MCH pediatric inpatient tower are January 2012 and June 2013, respectively.

Landscaping would be provided along Atlantic Avenue and 27th Street frontages consistent with City of Long Beach requirements. Landscaping within the Campus would be consistent with existing Campus landscaping.

A central plant building designed to support Phases I and II of the new pediatric inpatient tower would be constructed northwest of the intersection of Atlantic Avenue and 27th Street. The existing land use at this location is a small, wood-framed building referred to as the "WIC Building" and "Ranch House" on the northeastern portion of the surface parking lot located north of 27th Street. The uses currently provided at the Ranch House include women's, children's, and infant food and nutrition programs, and would be relocated elsewhere at the Campus prior to the initiation of demolition activities. Development of the central plant building within a portion of the existing surface parking lot would displace 14 parking spaces. The central plant building would consist of a single-level structure of approximately 3,500 square feet and approximately 5,000 gross square feet of open yard, plus 8 parking stalls. Construction of the central plant building is proposed to begin in June 2006 and finish in August 2007. The central plant building would contain equipment and storage for the provision of emergency power, chilled water, and bulk medical oxygen for the inpatient tower. The central plant building would be staffed by existing engineering staff; therefore, no additional parking would be required for the central plant building. Vehicular access to the central plant would be from 27th Street.

The inpatient pediatric tower would be served by the central plant building via a 1,000-linear-foot underground utility trench along the eastern edge of the Campus, parallel to Atlantic Avenue. Utility piping between the central plant and the inpatient tower would be direct buried within a protected, slurry back-filled trench. The utility trench would be a permanent, underground facility that would not generate any additional demand for parking; therefore, no additional parking would be required for the utility trench.

1.09.4 Miller Children's Hospital—Pediatric Outpatient Building

A new pediatric outpatient building would be located south of the existing MCH facility, west of Atlantic Avenue and approximately midway between Patterson Street and 27th Street (Figure 1.09.3-1). The existing land use at this location is a portion of the surface parking lot located north of 27th Street. Approximately 43 parking spaces would be demolished to accommodate the proposed pediatric outpatient building. Pedestrian access to the outpatient building would be provided from an entrance on the northwest facade of the building. The MCH outpatient building would provide approximately

80,000 gross square feet (Figure 1.09-2A, Figure 1.09-2B, and Figure 1.09-2C). The pediatric outpatient building would consist of an eight-story, B-occupancy, medical office building housing an array of pediatric care clinics and support services. It is anticipated that there would be a maximum of approximately 140 employees working in the building at one time. The structure's ground floor would be located below grade, with the upper seven floors rising above grade. The highest point of the building would be approximately 130 feet above grade. The MCH pediatric outpatient building is proposed to initiate construction in October 2005 and finish construction in May 2007. The building would be developed as a shell building, with internal tenant improvements for MCH-operated services and private physician practices. Four types of uses and clinics are under consideration for the outpatient pediatric building: (1) dental clinic, (2) pediatric rehabilitation, (3) children's and specialty care clinic, and (4) support space, including physician's offices.

Landscaping would be provided along the Atlantic Avenue frontage consistent with City of Long Beach requirements. Landscaping within the Campus would be consistent with existing Campus landscaping.

The pediatric outpatient building would require approximately 400 parking spaces. Construction of the pediatric outpatient building is contingent on the identification of funding, philanthropy, and lease agreements with private physician groups.

1.09.5 Miller Children's Hospital—Link Building

A new mixed-use building connecting the pediatric inpatient tower and the pediatric outpatient building would be located southwest of the intersection of Atlantic Avenue and Patterson Street (Figure 1.09.3-1). The existing land use at this location is an 86-stall, multilevel parking structure that would be demolished to accommodate the proposed inpatient tower. Access to the mixed-use building would be provided on multiple floors from the inpatient hospital to the north and the outpatient building to the south. Grade-level pedestrian entrances would also be provided on the east and west facades. The MCH link building would provide approximately 20,000 gross square feet (Figure 1.09-2A, Figure 1.09-2B, and Figure 1.09-2C). The link building tower would consist of a 50-foot-high, three-story building that would contain retail spaces, offices, and retail food service for the users of the adjacent inpatient tower and outpatient building. Nonresidential space would be provided. The structure's ground floor would be located below grade, with the upper three floors rising above grade. The MCH link building is proposed to initiate construction in July 2010 and finish construction in June 2011.

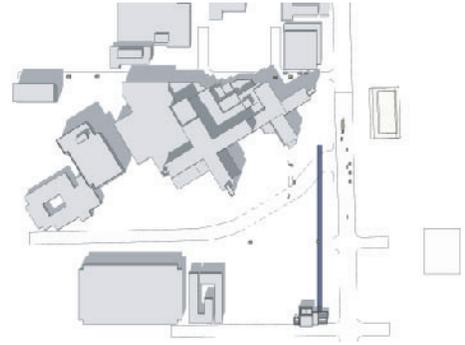
Landscaping would be provided along the Atlantic Avenue frontage consistent with City of Long Beach requirements. Landscaping within the Campus would be consistent with existing Campus landscaping.

The mixed-use building would require 10 parking spaces. Construction of the link building is contingent on the identification of a funding source.

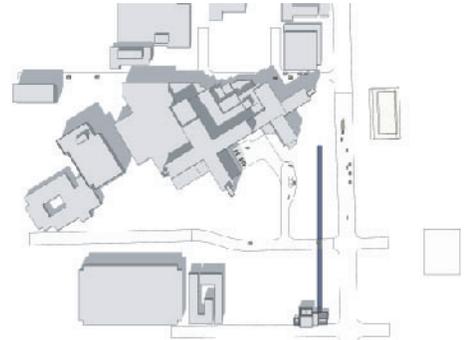
1.09.6 Roadway Realignment

Vehicular and pedestrian circulation patterns would be improved through realignment of selected internal roadways and a signage and wayfinding program (Figure 1.09.6-1, *Central Plant, Utility Trench, and Roadway Realignment*). Specifically, a 520-linear-foot section of the alignment of Patterson Street/Memorial Medical Campus Drive as it extends through the Campus would be realigned southward by approximately 300 feet from its current intersection, at Atlantic Avenue near 28th Street on the east side of the Campus, to make a closer connection with the existing alignment of Patterson Street at Atlantic Avenue. As a result, the intersection of Atlantic Avenue and 28th Street would become a T-intersection. The roadway would consist of three site entry lanes and three site exit

Existing Condition



Roadway Realignment



Final Configuration

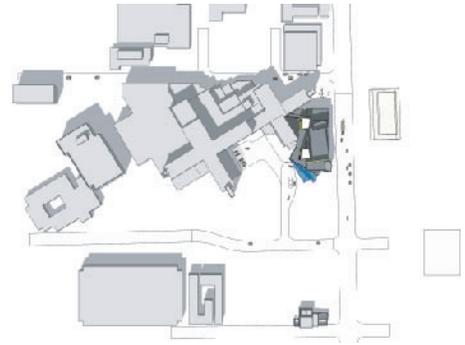


FIGURE 1.09.6-1
Central Plant, Utility Trench, and Roadway Realignment

lanes with an automated traffic control gate for each lane. The present roadway is approximately 85 feet wide at Atlantic Avenue. The roadway would narrow to 40 feet where it transitions to the existing alignment of Patterson Street near Pasadena Avenue. The road curvature has a radius of approximately 500 feet to transition from Patterson Street to the existing roadway alignment. The roadway realignment would result in the loss of 195 parking spaces from the surface parking lot located north of 27th Street. The existing T-intersection at Atlantic Avenue and Patterson Street would be replaced by a signalized through intersection. The grading and realignment would be undertaken such that the roadway and curbs are adjusted to provide access to adjacent buildings at the first-floor level. The roadway realignment is proposed to initiate construction in July 2005 and finish construction in October 2005.

1.09.7 Parking Program

A phased parking program would be designed to offset the 1,394 parking stalls displaced by the proposed project and accommodate the additional demand for 1,417 parking stalls resulting from the expansion project components (Table 1.09.7-1, *Required Parking*). It is anticipated that the phased parking program would consider the use of surface parking areas on property owned by the Campus (Figure 1.09.7-1, *On-Site Parking Opportunities*), nearby off-site surface parking areas (Figure 1.09.7-2, *Off-Site Parking Opportunities*) that could be leased by the Campus, and possible future construction of one or more parking structures when justified by total demand (Figure 1.09.7-1). All on-site parking would be developed in areas designated for interim or permanent use of parking in the Master Plan of Land Uses. If determined to be necessary, a multilevel parking structure capable of accommodating approximately 100 spaces per level would be sited in an area designated for long-term parking. Surface parking areas and structures would be landscaped in accordance with City of Long Beach requirements. All parking facilities constructed by the Campus would incorporate best management practices consistent with the requirements of the Regional Water Quality Control Board.

**TABLE 1.09.7-1
REQUIRED PARKING**

	Completion Date	Required Parking per LLG Empirical Ratios		Required Parking per City of Long Beach Code	
		Net Change	Total Spaces	Net Change	Total Spaces
Total Existing	—	—	3,317	—	3,317
Phase I					
TCI Phase I	September 2006	247	3,564	419	3,736
Pediatric Outpatient Building	June 2007	236	3,553	400	4,136
Central Plant	August 2007	8	3,561	—	4,136
MCH—Pediatric Inpatient Tower, Phase I	May 2008	360	3,921	144	4,280
Total Completion, Phase I		851	3,921	963	4,280
Phase II					
TCI Phase II	July 2012	125	4,046	212	4,492
MCH—Link Building	July 2012	10	4,056	50	4,542
MCH—Pediatric Inpatient Tower, Phase II	June 2013	480	4,536	192	4,734
Total Completion, Phase II		615	4,536	454	4,734



FIGURE 1.09.7-1
On-Site Parking Opportunities



FIGURE 1.09.7-2
Off-Site Parking Opportunities

1.10 PROJECT GOALS AND OBJECTIVES

The Long Beach Memorial Medical Center campus is the second largest private hospital on the West Coast and has served the Long Beach community and Southern California since 1914. Being a comprehensive medical campus, it combines the resources of six major entities: the LBMMC, MCH, Memorial Women's Hospital, Memorial Rehabilitation Hospital, Memorial Heart Institute, and Memorial Cancer Institute. Expansion of the Campus's facilities and services is in line with the hospitals' shared mission: "To improve the health and well being of individuals, families and our communities through innovation and the pursuit of excellence."

Specifically, the TCI building would consolidate approximately 24 departments currently distributed across the Campus. The pediatric inpatient tower would increase capacity for pediatric surgical cases, newborn intensive care services, and general pediatric patients. The new pediatric inpatient tower would also satisfy a mandate from the California Department of Health Services for new pediatric operating rooms by January 2008. A new pediatric outpatient building would increase capacity and improve access to pediatric specialty care. A building linking the pediatric inpatient and outpatient structures would facilitate access for patients and families, while providing space for complementary functions and support services. Realignment of a portion of an internal surface street would improve access to the Campus and increase vehicular access. Additional parking on site and on adjacent land leased by the Campus would accommodate new employees and visitors, and one or more new parking structures would permit staff, patients, and visitors to conveniently park on the Campus nearer to their destinations.

This proposed project would create hundreds of jobs for Long Beach citizens and those in neighboring communities during both the design/construction phase and for many years thereafter in new support staff and professional staff positions. These proposed projects also demonstrate the hospital's intent to comply with Senate Bill 1953 (SB 1953), a 1994 amendment to the Alquist Hospital Facility Seismic Safety Act of 1973.

It is vital to the community's health that the Campus be given the opportunity to achieve its vision: "To become Southern California's preferred, operationally excellent, fiscally sound provider of comprehensive, high quality, health services."

1.11 CONSTRUCTION SCENARIO

Construction would be scheduled in compliance with City of Long Beach regulations, and would commence at 7:00 a.m. and cease no later than 8:00 p.m. on weekdays. Work would be conducted on Saturdays and would commence at 7:00 a.m. and cease no later than 5:00 p.m. The information contained in the construction scenarios for reasonably anticipated proposed project elements was developed from empirical data for construction of comparable projects and was used in the assessment of potential construction impacts to air quality, ambient noise levels, and traffic and circulation in this Initial Study.

The construction scenario for the proposed project is envisioned as a 10-step process to be completed in eight years between 2005 and 2013, where construction of certain elements is contingent on the availability of funding. The sequence of the construction scenario has been developed based on the most aggressive scenario to allow consideration of a reasonable worst-case scenario (Figure 1.11-1A through 1.11-1J), *Construction Scenarios, Steps 1 through 10*

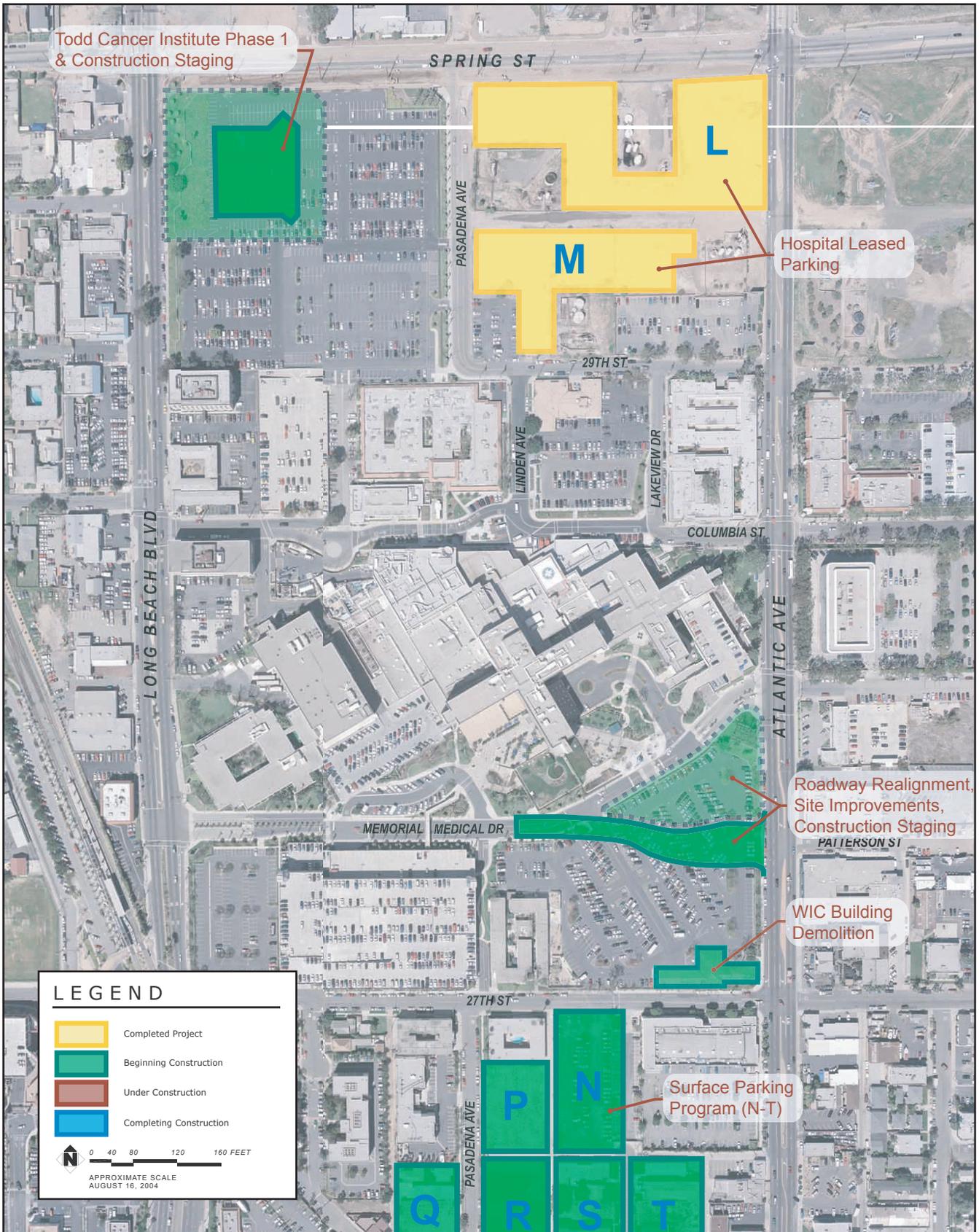


FIGURE 1.11-1A
Construction Scenario, Step 1, July 2005 to October 2005

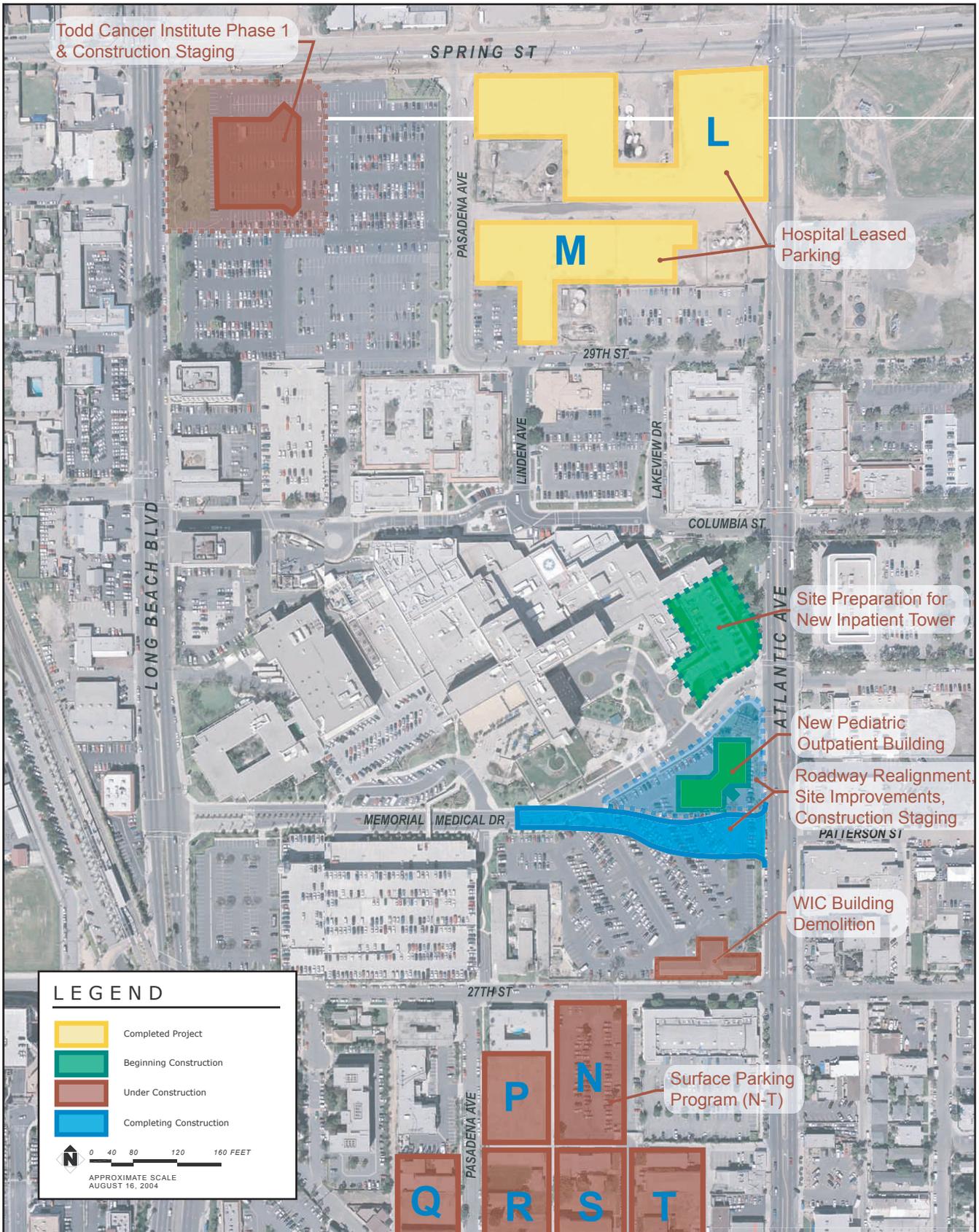


FIGURE 1.11-1B
Construction Scenario, Step 2, November 2005 to May 2006

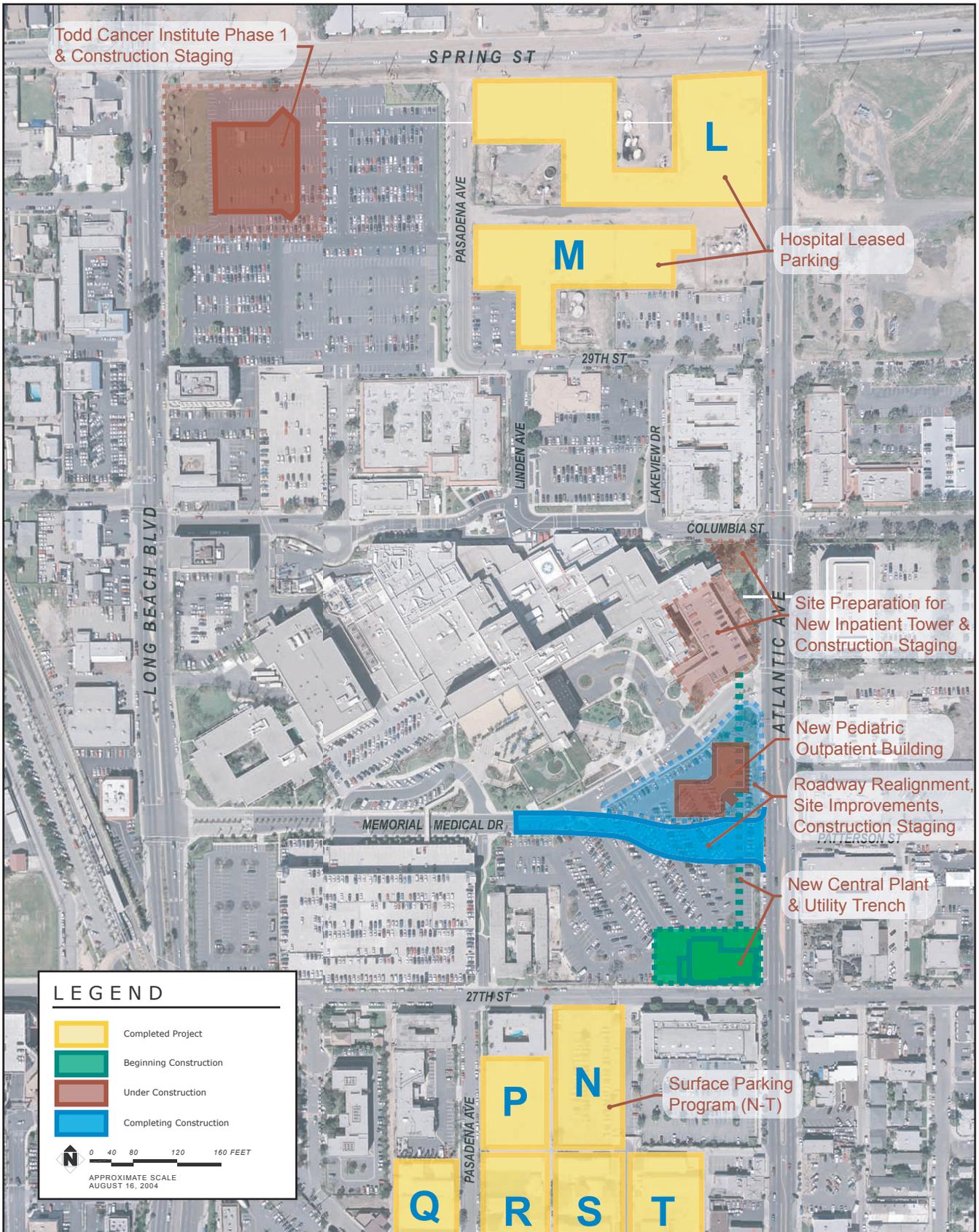


FIGURE 1.11-1C
Construction Scenario, Step 3, June 2006 to September 2006

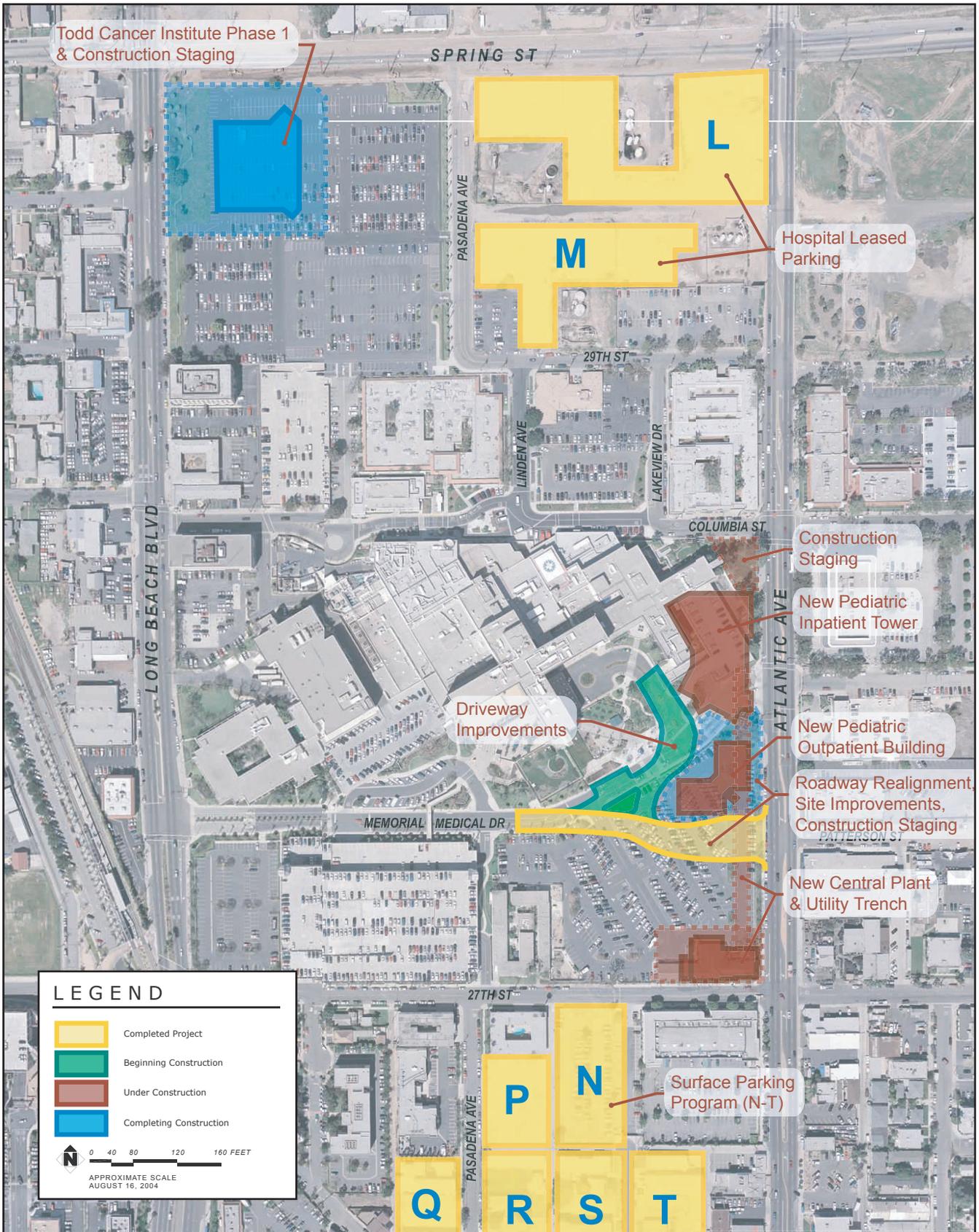
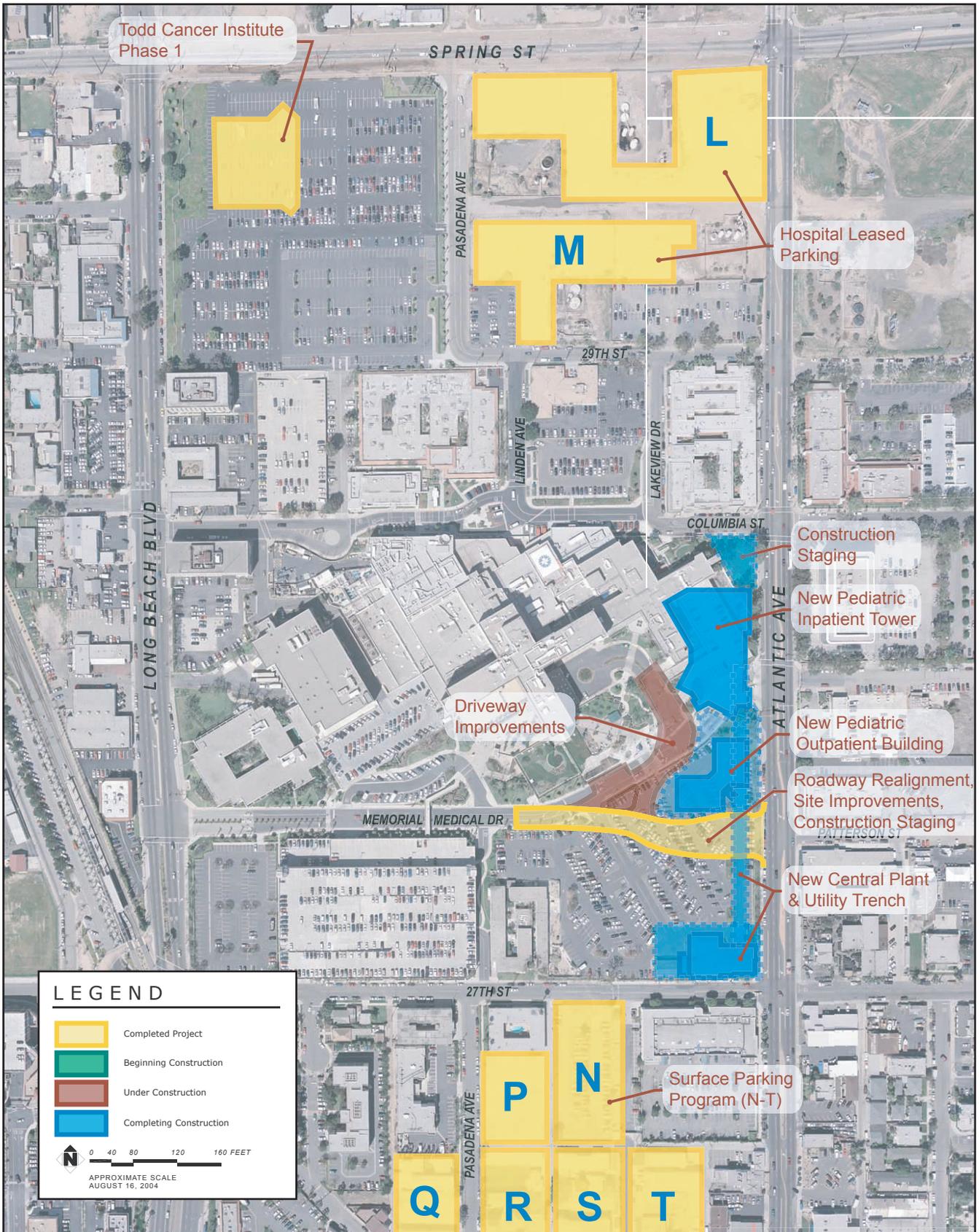


FIGURE 1.11-1D
Construction Scenario, Step 4, October 2006 to May 2007



LEGEND

- Completed Project
- Beginning Construction
- Under Construction
- Completing Construction

0 40 80 120 160 FEET

APPROXIMATE SCALE
AUGUST 16, 2004



FIGURE 1.11-1E
Construction Scenario, Step 5, February 2008 to June 2010

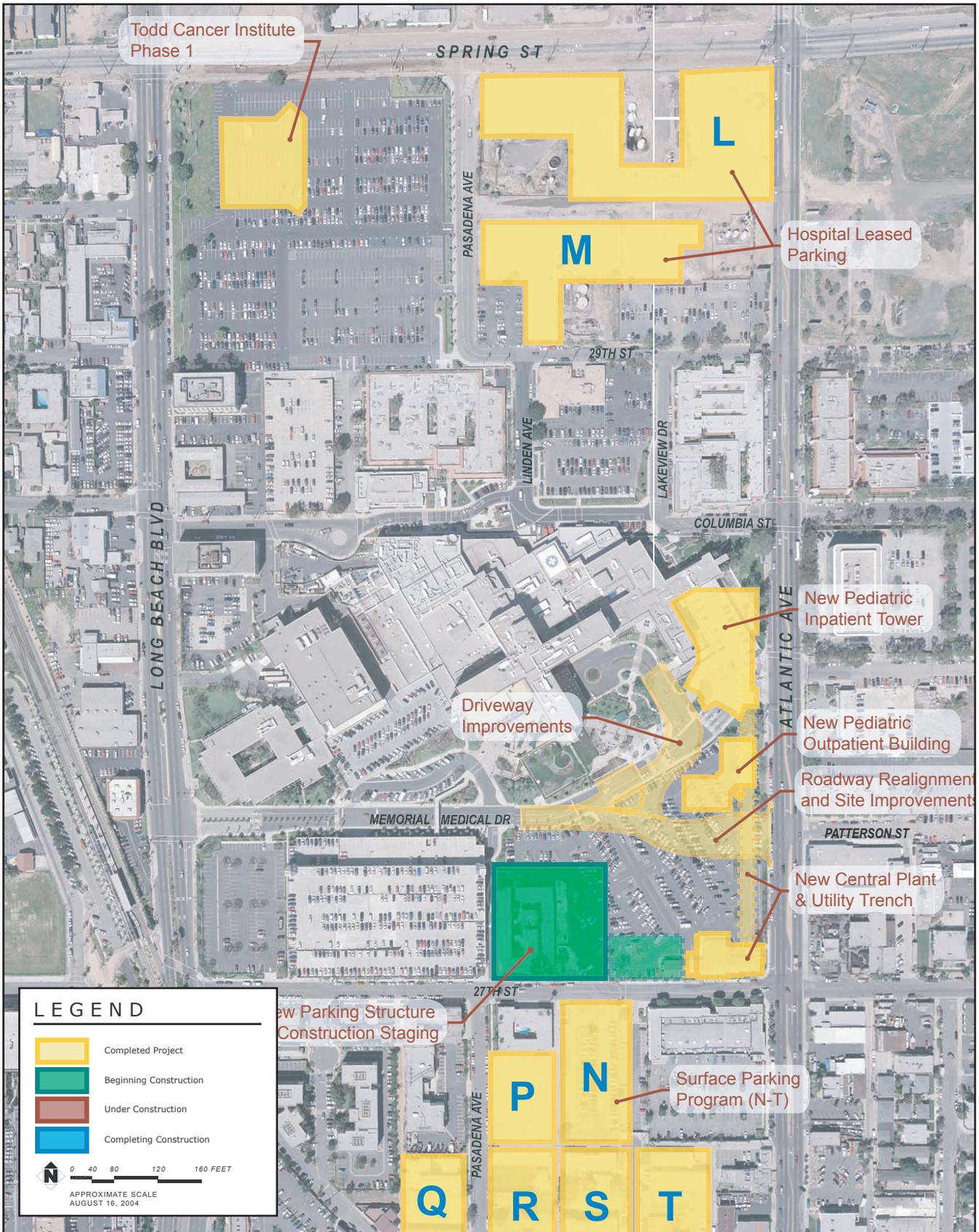


FIGURE 1.11-1F
Construction Scenario, Step 6, February 2008 to June 2010

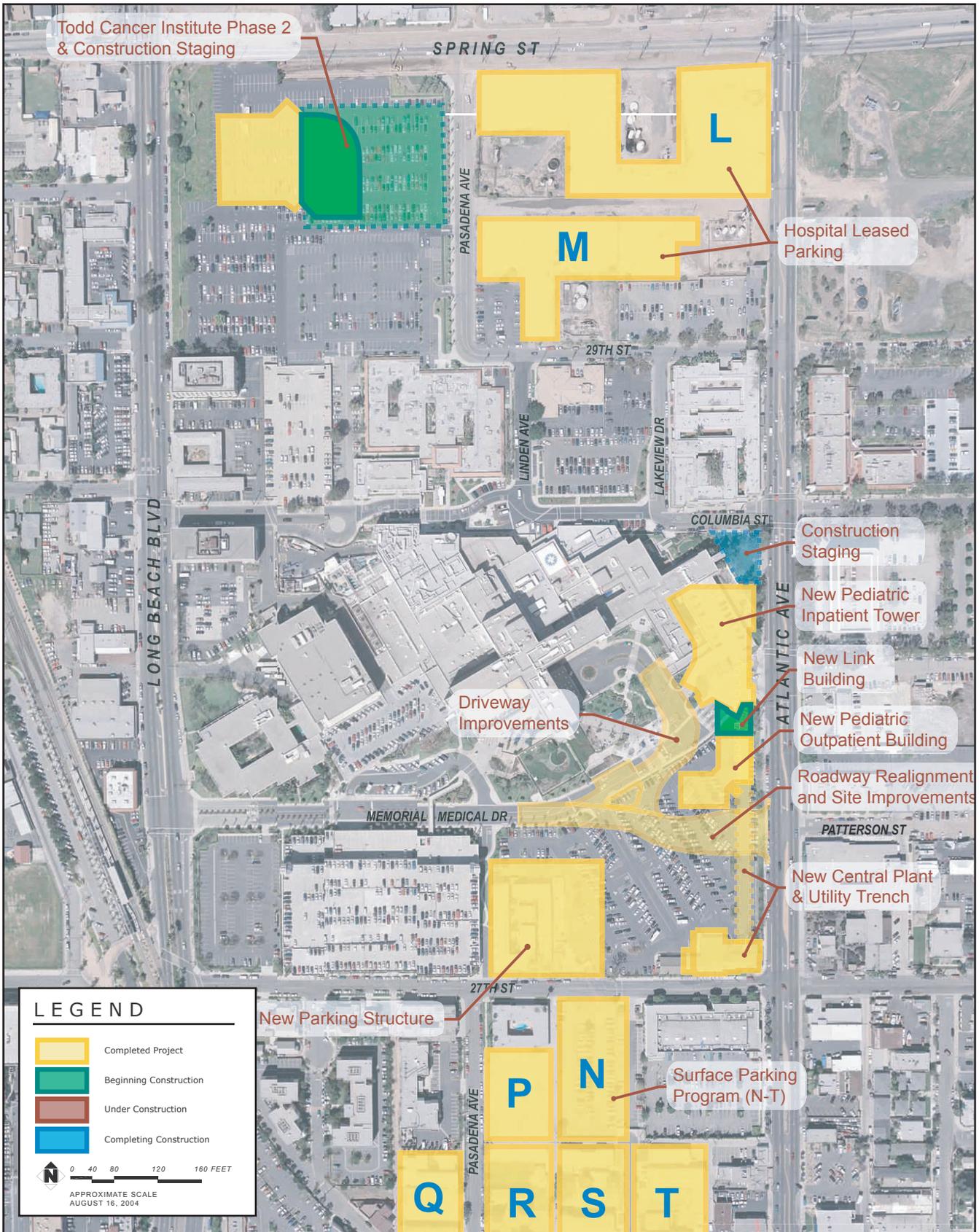


FIGURE 1.11-1G
Construction Scenario, Step 7, July 2010 to June 2011

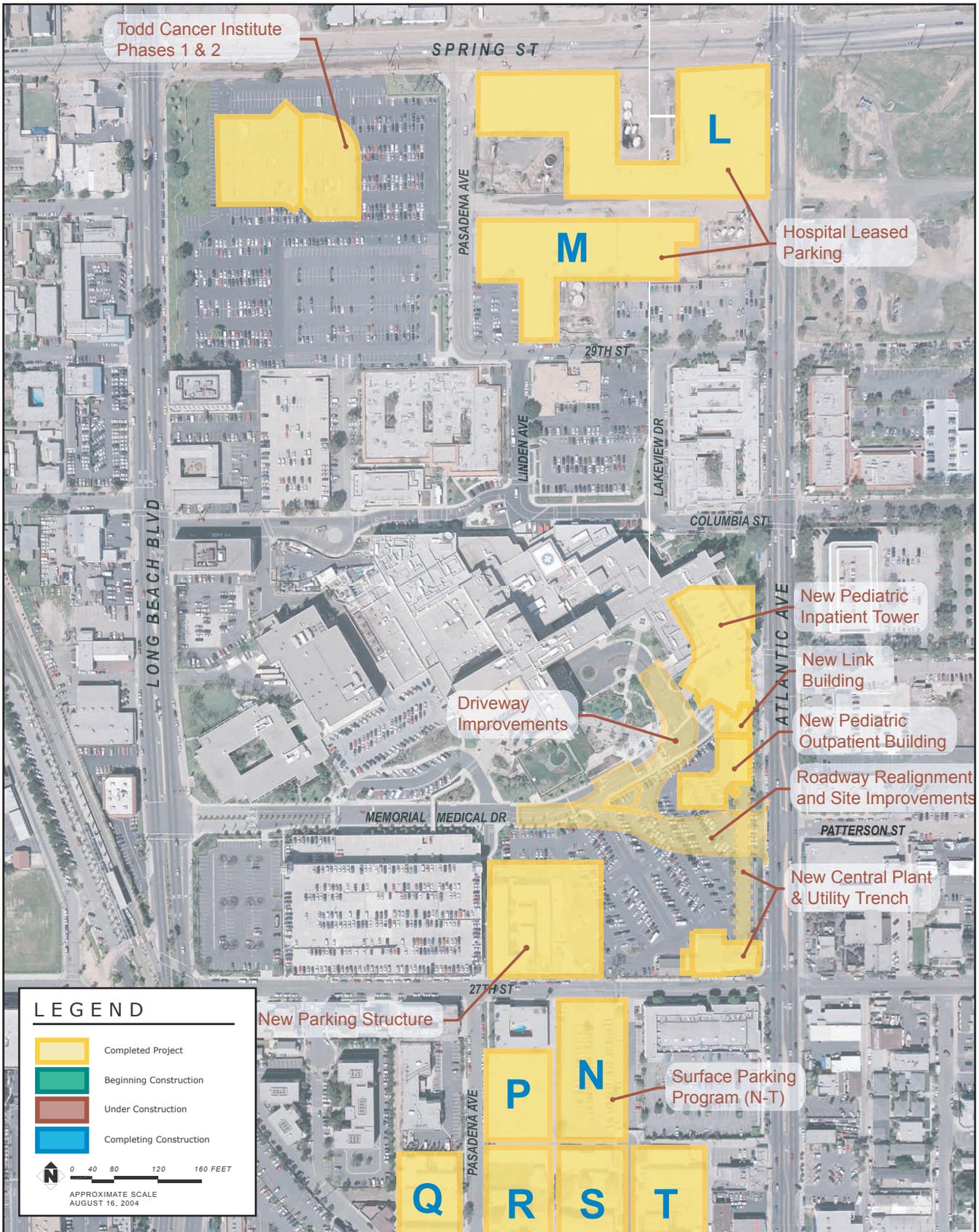


FIGURE 1.11-1H
Construction Scenario, Step 8, Completed by December 2011

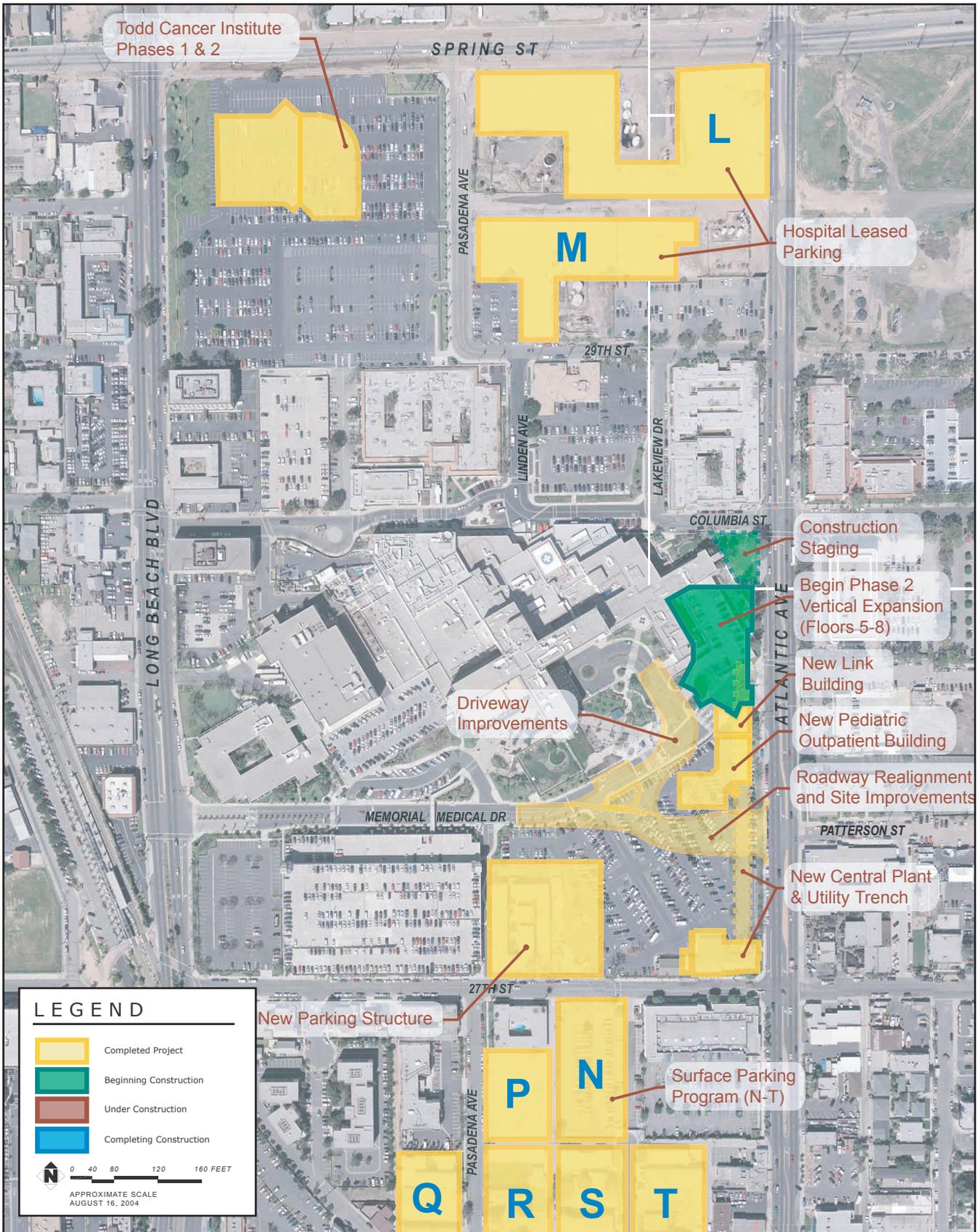


FIGURE 1.11-II
Construction Scenario, Step 9, January 2012 to June 2013

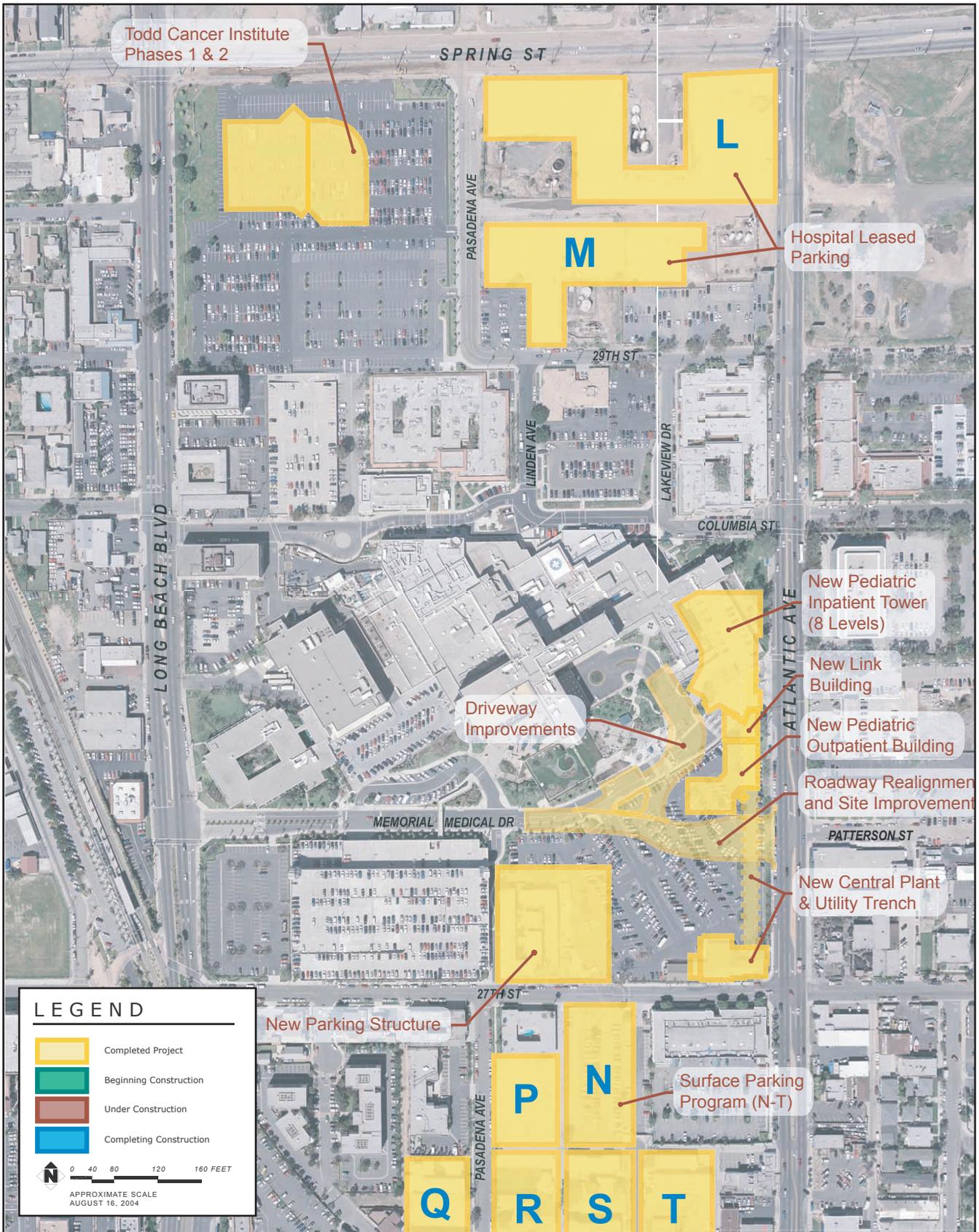


FIGURE 1.11-1J
Construction Scenario, Step 10, Completed by June 2013

1.11.1 Master Plan of Land Uses

The proposed Master Plan of Land Uses provides a conceptual framework for the reorganization of the pattern of land uses within the Campus. Construction, operation, and maintenance of new Campus elements that are reasonably foreseeable are evaluated at the project level of detail in this Initial Study. Development of other elements, consistent with the land use designations provided in the Master Plan of Land Uses would need to be evaluated by the City of Long Beach on a case-by-case basis to determine if the activity constitutes a project pursuant to the California Environmental Quality Act (CEQA). If future activities are determined to constitute a project, then the City of Long Beach would need to determine the appropriate level of environmental documentation to be prepared to support the decision-making process related to the proposed element. Revisions to the Master Plan of Land Uses would be subject to a discretionary decision by the City of Long Beach and the appropriate related level of review pursuant to CEQA.

1.11.2 Todd Cancer Institute

The 125,930-gross-square-foot TCI building would be constructed in two phases. Phase I of the TCI consists of the construction of 83,630 gross square feet. Construction of Phase I would be anticipated to be initiated in July 2005 and completed by December 2007. Phase II consists of 45,500 gross square feet. Construction of Phase II would be undertaken on an as-needed basis that is anticipated to occur no sooner than 2010. The estimated duration of construction for Phase II is 18 months. Construction staging would be accomplished within the build-out area of Phases I and II of the TCI and associated parking area (Figure 1.11-1A)

Phase I

A list of the type and quantity of equipment that would potentially be used in construction of the TCI is provided in Table 1.11.2-1, *Anticipated Equipment for Construction of TCI Phase I*.

**TABLE 1.11.2-1
ANTICIPATED EQUIPMENT FOR CONSTRUCTION OF TCI PHASE I**

Quantity (Approximate)	Type	Total Number of Trips to and from Site during Construction	Duration of On-Site Construction Activities
2	Dozer	18 trips	12 weeks
1	Front-end loader	4 Trips	12 weeks
1	Water truck	20 trips	130 weeks
1	Grader	4 trips	12 weeks
60	Pick-up truck	39,000 trips	130 weeks
5	Dump truck	280 trips	12 weeks
3	Crane	3 trips	70 weeks
16	Concrete mix truck	500 trips	100 weeks
1	Roller	4 trips	7 weeks
15	Materials delivery	650 trips	130 weeks
3	Fork lift / grade all	10 trips	100 weeks

Construction of TCI Phase I would require connection to existing utilities, sewer facilities, storm water drain facilities, paving, building construction, landscaping, and fencing. Approximately 90 workers would be expected to be on site during peak construction activity periods. Fewer than 90 workers would be expected to be on site during nonpeak construction activity periods.

Phase II

A list of the type and quantity of equipment that would potentially be used in construction of the TCI is provided in Table 1.11.2-2, *Anticipated Equipment for Construction of TCI Phase II*.

**TABLE 1.11.2-2
ANTICIPATED EQUIPMENT FOR CONSTRUCTION OF TCI PHASE II**

Quantity (Approximate)	Type	Total Number of Trips to and from Site during Construction	Duration of On-Site Construction Activities
2	Dozer	18 trips	7 weeks
1	Front-end loader	2 trips	7 weeks
1	Water truck	10 trips	72 weeks
1	Grader	2 trips	7 weeks
35	Pick-up truck	21,450 trips	72 weeks
3	Dump truck	155 trips	10 weeks
3	Crane	3 trips	45 weeks
9	Concrete mix truck	250 trips	65 weeks
1	Roller	4 trips	7 weeks
8	Materials delivery	450 trips	72 weeks
2	Fork lift / grade all	6 trips	65 weeks

Construction of TCI Phase II would require connection to existing utilities, sewer facilities, storm water drain facilities, paving, and building construction. Approximately 55 workers would be expected to be on site during peak construction activity periods. Fewer than 55 workers would be expected to be on site during nonpeak construction activity periods.

1.11.3 Miller Children’s Hospital—Pediatric Inpatient Tower, Utility Trench, and Central Plant Building

The 198,000-gross-square-foot pediatric inpatient tower would be constructed in two phases. Phase I of the pediatric inpatient tower consists of the construction of 124,500 gross square feet. Construction of Phase I would be anticipated to be initiated in July 2005 and completed by December 2007. Phase II consists of 73,500 gross square feet. Construction of Phase II would be undertaken on an as-needed basis that is anticipated to occur no sooner than 2012. The estimated duration of construction for Phase II is two years. The pediatric inpatient tower requires construction of a central plant. The central plant would be constructed concurrently with Phase I of the pediatric inpatient tower. The central plant would be constructed with sufficient capacity to support the anticipated ultimate build-out of pediatric inpatient services. The central plant would also provide redundant support to other inpatient services on the Campus. The link building and the pediatric outpatient building would be constructed with their own utility connections and would function independently of the hospital buildings. The central plant would consist of a single-level structure of approximately 3,000 gross square feet, approximately

5,000 gross square feet of open yard, plus 8 parking stalls. The pediatric inpatient tower would be served by the central plant building via a 1,000-linear-foot underground utility trench along the eastern edge of the Campus, parallel to Atlantic Avenue, which would be constructed concurrently with the pediatric inpatient tower.

Phase I Pediatric Inpatient Tower

Construction of Phase I of the pediatric inpatient tower would be anticipated to be initiated in July 2005 and completed by December 2007. A list of the type and quantity of equipment that would potentially be used in construction of Phase I of the pediatric inpatient tower is provided in Table 1.11.3-1, *Anticipated Equipment for Construction of Pediatric Inpatient Tower Phase I*.

**TABLE 1.11.3-1
ANTICIPATED EQUIPMENT FOR CONSTRUCTION
OF PEDIATRIC INPATIENT TOWER PHASE I**

Quantity (Approximate)	Type	Total Number of Trips to and from Site during Construction	Duration of On-Site Construction Activities
3	Dozer	15 trips	19 weeks
2	Drill rig	4 trips	16 weeks
1	Man lift	2 trips	80 weeks
2	Front-end loader	8 trips	20 weeks
1	Water truck	20 trips	80 weeks
2	Grader	4 trips	19 weeks
96	Pick-up truck	50,400 trips	105 weeks
8	Dump truck	450 trips	19 weeks
3	Crane	3 trips	80 weeks
26	Concrete mix truck	1,200 trips	80 weeks
1	Roller	4 trips	15 weeks
24	Materials delivery	600 trips	105 weeks
5	Fork lifts / grade all	10 trips	90 weeks

Construction of Phase I of the pediatric inpatient tower would require connection to existing utilities, sewer facilities, storm water drain facilities, paving, building construction, landscaping, and fencing. Approximately 144 workers would be expected to be on site during peak construction activity periods. Fewer than 140 workers would be expected to be on site during nonpeak construction activity periods. Construction staging would be accomplished with the parking area of Phase I of the pediatric inpatient tower (Figure 1.11-1C).

Phase II Pediatric Inpatient Tower

A list of the type and quantity of equipment that would potentially be used in construction of Phase II of the pediatric inpatient tower is provided in Table 1.11.3-2, *Anticipated Equipment for Construction of Pediatric Inpatient Tower Phase II*.

**TABLE 1.11.3-2
ANTICIPATED EQUIPMENT FOR CONSTRUCTION
OF PEDIATRIC INPATIENT TOWER PHASE II**

Quantity (Approximate)	Type	Total Number of Trips to and from Site during Construction	Duration of On-Site Construction Activities
1	Dozer	2 trips	6 weeks
1	Man Lift	2 trips	80 weeks
1	Water truck	2 trips	6 weeks
56	Pick-up truck	34,320 trips	104 weeks
1	Dump truck	40 trips	11 weeks
2	Crane	4 trips	80 weeks
15	Concrete mix truck	745 trips	100 weeks
1	Roller	2 trips	6 weeks
13	Materials delivery	550 trips	104 weeks
3	Fork lift / grade all	10 trips	80 weeks

Construction of Phase II of the pediatric inpatient tower would require connection to existing utilities, sewer facilities, storm water drain facilities, paving, and building construction. Approximately 85 workers would be expected to be on site during peak construction activity periods. Fewer than 85 workers would be expected to be on site during nonpeak construction activity periods. Construction staging would be accomplished within the parking and the build-out area of Phase II of the pediatric inpatient tower (Figure 1.11-11).

Utility Trench

Construction of Phase I would be anticipated to be initiated in August 2006 and completed by March 2007. A list of the type and quantity of equipment that would potentially be used in construction of the central plant to support Phase II of the pediatric inpatient tower is provided in Table 1.11.3-3, *Anticipated Equipment for Construction of Utility Trench*.

**TABLE 1.11.3-3
ANTICIPATED EQUIPMENT FOR CONSTRUCTION OF UTILITY TRENCH**

Quantity (Approximate)	Type	Total Number of Trips to and from Site during Construction	Duration of On-Site Construction Activities
1	Dozer	1 trips	20 weeks
1	Front-end loader	2 trips	20 weeks
1	Water truck	2 trips	34 weeks
1	Grader	1 trips	4 weeks
6	Pick-up truck	1,080 trips	34 weeks
2	Dump truck	200 trips	12 weeks
1	Crane	1 trips	12 weeks
2	Concrete mix truck	180 trips	34 weeks
1	Roller	1 trips	4 weeks
1	Materials delivery	120 trips	34 weeks

Construction of the utility trench to support the MCH expansion would require connection to existing utilities, sewer facilities, storm water drain facilities, paving, and building construction. Approximately 20 workers would be expected to be on site during peak construction activity periods. Fewer than 20 workers would be expected to be on site during nonpeak construction activity periods. Construction staging would be accomplished with the parking and build-out areas of MCH (Figure 1.11-1D).

Central Plant

Construction of the central plant would be anticipated to be initiated in March 2007 and completed by December 2007. A list of the type and quantity of equipment that would potentially be used in construction of the central plant to support Phase II of the pediatric inpatient tower is provided in Table 1.11.3-4, *Anticipated Equipment for Construction of Central Plant*.

**TABLE 1.11.3-4
ANTICIPATED EQUIPMENT FOR CONSTRUCTION OF CENTRAL PLANT**

Quantity (Approximate)	Type	Total Number of Trips to and from Site during Construction	Duration of On-Site Construction Activities
1	Dozer	1 trips	12 weeks
1	Water truck	2 trips	43 weeks
1	Grader	1 trips	12 weeks
25	Pick-up truck	5,000 trips	43 weeks
1	Dump truck	60 trips	12 weeks
1	Crane	1 trips	25 weeks
2	Concrete mix truck	360 trips	43 weeks
1	Roller	1 trips	4 weeks
1	Materials delivery	200 trips	43 weeks
1	Fork lift / grade all	2 trips	25 weeks

Construction of the central plant to support the MCH expansion would require connection to existing utilities, sewer facilities, and storm water drain facilities, paving, and building construction. Approximately 50 workers would be expected to be on site during peak construction activity periods. Fewer than 50 workers would be expected to be on site during nonpeak construction activity periods. Construction staging would be accomplished within the parking area of MCH (Figure 1.11-1D).

1.11.4 Miller Children’s Hospital—Pediatric Outpatient Building

The MCH pediatric outpatient building would provide approximately 120,000 gross square feet. The outpatient building would consist of an eight-story, B-occupancy, medical office building housing an array of pediatric care clinics and support services. Construction of the outpatient building is contingent on the identification of funding, philanthropy, and lease agreements with private physician groups that would be anticipated to be constructed in an 18-month time period initiated for construction no sooner than January 2006.

A list of the type and quantity of equipment that would potentially be used in construction of Phase I of the pediatric outpatient building is provided in Table 1.11.4-1, *Anticipated Equipment for Construction of Pediatric Outpatient Building*.

**TABLE 1.11.4-1
ANTICIPATED EQUIPMENT FOR CONSTRUCTION
OF PEDIATRIC OUTPATIENT BUILDING**

Quantity (Approximate)	Type	Total Number of Trips to and from Site during Construction	Duration of On-Site Construction Activities
3	Dozer	15 trips	22 weeks
1	Water truck	20 trips	50 weeks
2	Drill rig	4 trips	20 weeks
1	Man lift	2 trips	60 weeks
3	Front-end loaders	4 trips	22 weeks
2	Grader	4 trips	22 weeks
96	Pick-up truck	59,904 trips	78 weeks
8	Dump truck	450 trips	22 weeks
3	Crane	6 trips	50 weeks
26	Concrete mix truck	1,500 trips	78 weeks
1	Roller	4 trips	20 weeks
24	Materials delivery	500 trips	78 weeks
6	Fork lift / grade all	12 trips	60 weeks

Construction of the pediatric outpatient building would require connection to existing utilities, sewer facilities, storm water drain facilities, paving, building construction, landscaping, and fencing. Approximately 144 workers would be expected to be on site during peak construction activity periods. Fewer than 140 workers would be expected to be on site during nonpeak construction activity periods. Construction staging would be accomplished within the parking area of MCH (Figure 1.11-1D).

1.11.5 Miller Children’s Hospital—Link Building

A new, 20,000-gross-square-foot, mixed-use building connecting the pediatric inpatient tower and the pediatric outpatient building would be located southwest of the intersection of Atlantic Avenue and Patterson Street. Construction of the link building is contingent on the identification of a funding source that would be anticipated to be constructed in 12-month time period initiated for construction no sooner than July 2010.

A list of the type and quantity of equipment that would potentially be used in construction of the MCH link building is provided in Table 1.11.5-1, *Anticipated Equipment for Construction of MCH Link Building*.

**TABLE 1.11.5-1
ANTICIPATED EQUIPMENT FOR CONSTRUCTION OF MCH LINK BUILDING**

Quantity (Approximate)	Type	Total Number of Trips to and from Site during Construction	Duration of On-Site Construction Activities
2	Dozer	4 trips	12 weeks
1	Front-end loader	2 trips	12 weeks
1	Water truck	2 trips	50 weeks
1	Grader	2 trips	12 weeks
35	Pick-up truck	21,450 trips	72 weeks
3	Dump truck	100 trips	12 weeks
3	Crane	3 trips	50 weeks
9	Concrete mix truck	465 trips	65 weeks
1	Roller	2 trips	7 weeks
8	Materials delivery	275 trips	72 weeks
2	Fork lift / grade all	4 trips	50 weeks

Construction of the MCH link building would require connection to existing utilities, sewer facilities, storm water drain facilities, paving, and building construction. Approximately 55 workers would be expected to be on site during peak construction activity periods. Fewer than 55 workers would be expected to be on site during nonpeak construction activity periods. Construction staging would be accomplished within the parking areas of MCH (Figure 1.11-1G).

1.11.6 Roadway Realignment

Vehicular and pedestrian circulation patterns would be improved through realignment of selected internal roadways and a signage and wayfinding program. Specifically, a 520-linear-foot section of the alignment of Patterson Street/Memorial Medical Center Drive as it extends through the Campus would be realigned southward by approximately 300 feet from its current intersection at Atlantic Avenue, near 28th Street on the east side of the Campus, to make a closer connection with the existing alignment of Patterson Street at Atlantic Avenue. As a result, the intersection of Atlantic Avenue and 28th Street would become a T-intersection. The roadway would consist of three site entry lanes and three site exit lanes with an automated traffic control gate for each lane. The present roadway is approximately 85 feet wide at Atlantic Avenue. The roadway would narrow to 40 feet where it transitions to the existing alignment of Patterson Street near Pasadena Avenue. The road curvature uses

a radius of approximately 500 feet to transition from Patterson Street to the existing roadway alignment.

A list of the type and quantity of equipment that would potentially be used in the construction of the roadway realignment is provided in Table 1.11.6-1, *Anticipated Equipment for Construction of Roadway Realignment*.

**TABLE 1.11.6-1
ANTICIPATED EQUIPMENT FOR CONSTRUCTION OF ROADWAY REALIGNMENT**

Quantity (Approximate)	Type	Total Number of Trips to and from Site during Construction	Duration of On-Site Construction Activities
2	Hydraulic excavator	4 trips	6 weeks
2	Water truck	8 trips	20 weeks
2	Grader	6 trips	9 weeks
8	Pick-up truck	4,160 trips	52 weeks
5	Dump truck	186 trips	20 weeks
2	Asphalt paver	6 trips	3 weeks
7	Concrete mix truck	8,910 trips	22 weeks
1	Roller	6 trips	9 weeks
3	Rubber tire loader	6 trips	12 weeks
6	Materials delivery	380 trips	22 weeks

Construction of the roadway realignment would require connection to existing utilities, sewer facilities, storm water drain facilities, paving, and building construction. Approximately 50 workers would be expected to be on site during peak construction activity periods. Fewer than 50 workers would be expected to be on site during nonpeak construction activity periods. Construction staging would be accomplished within the parking areas of MCH (Figures 1.11-1A, 1.11-1D, and 1.11-1E).

1.11.7 Parking Program

A phased parking program would be designed to accommodate up to 2,986 parking stalls in surface parking areas on property owned by LBMMC, nearby off-site surface parking areas that could be leased by LBMMC, and possible future construction of one or more parking structures when justified by total demand. If determined to be necessary, a multilevel parking structure capable of accommodating 100 spaces per level would be sited in an area designated for long-term use of parking. For each element of the proposed project, sufficient parking would be constructed to accommodate any existing parking spaces displaced by construction, and sufficient additional parking would also be constructed to accommodate the parking demand generated by construction of the proposed project element.

A list of the type and quantity of equipment that would potentially be used in construction of the parking facilities is provided in Table 1.11.7-1, *Anticipated Equipment for Construction of Parking Facilities*.

**TABLE 1.11.7-1
ANTICIPATED EQUIPMENT FOR CONSTRUCTION OF PARKING FACILITIES**

Quantity (Approximate)	Type	Total Number of Trips to and from Site during Construction	Duration of On-Site Construction Activities
3	Hydraulic excavator	6 trips	9 weeks
3	Water truck	12 trips	20 weeks
3	Grader	6 trips	14 weeks
12	Pick-up truck	6,240 trips	78 weeks
8	Dump truck	278 trips	12 weeks
3	Asphalt paver	6 trips	5 weeks
11	Concrete mix truck	5,200 trips	33 weeks
5	Roller	10 trips	14 weeks
5	Rubber tire loader	10 trips	18 weeks
9	Materials delivery	400 trips	33 weeks

Construction of parking facilities would require connection to existing utilities, sewer facilities, on-site storm water pollution prevention devices, paving, and possible construction of a parking structure. Approximately 75 workers would be expected to be on site during peak construction activity periods. Fewer than 75 workers would be expected to be on site during nonpeak construction activity periods. Construction staging would be accomplished within the parking area of MCH (Figures 1.11-1A, 1.11-1B, and 1.11-1F).

SECTION 2.0 ENVIRONMENTAL CHECKLIST

This section contains a copy of the Environmental Checklist prepared for the Long Beach Memorial Medical Center Expansion. The checklist used is consistent with Appendix G to the State of California Environmental Quality Act (CEQA) Statutes and State CEQA Guidelines. A discussion of the environmental issues is contained in Section 3.0, Environmental Analysis, of this document. The answers contained in this Environmental Checklist are based on literature review (see Section 4.0, References, for a list of reference materials consulted) and field reconnaissance undertaken during the month of June 2004 by Sapphos Environmental, Inc.; Linscott, Law & Greenspan Engineers; Moffat & Nichol; SCS Engineers; and VSA n Associates.

DETERMINATION

On the basis of this initial evaluation:

- I find that the proposed project COULD NOT have a significant effect on the environment, and a NEGATIVE DECLARATION will be prepared.
- I find that although the proposed project could have a significant effect on the environment, there will not be a significant effect in this case because revisions in the project have been made by or agreed to by the project proponent. A MITIGATED NEGATIVE DECLARATION will be prepared.
- I find that the proposed project MAY have a significant effect on the environment, and an ENVIRONMENTAL IMPACT REPORT is required.
- I find that the proposed project MAY have a “potentially significant impact” or “potentially significant unless mitigated” impact on the environment, but at least one effect 1) has been adequately analyzed in an earlier document pursuant to applicable legal standards, and 2) has been addressed by mitigation measures based on the earlier analysis as described on attached sheets. An ENVIRONMENTAL IMPACT REPORT is required, but it must analyze only the effects that remain to be addressed.
- I find that although the proposed project could have a significant effect on the environment, because all potentially significant effects (a) have been analyzed adequately in an earlier EIR or NEGATIVE DECLARATION pursuant to applicable standards, and (b) have been avoided or mitigated pursuant to that earlier EIR or NEGATIVE DECLARATION, including revisions or mitigation measures that are imposed upon the proposed project, nothing further is required.

Signature

Date

Printed Name

For

ENVIRONMENTAL CHECKLIST

	Potentially Significant Impact	Less than Significant with Mitigation Incorporation	Less than Significant Impact	No Impact
I. AESTHETICS — Would the project:				
a) Have a substantial adverse effect on a scenic vista?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b) Substantially damage scenic resources, including, but not limited to, trees, rock outcroppings, and historic buildings within a state scenic highway?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
c) Substantially degrade the existing visual character or quality of the site and its surroundings?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
d) Create a new source of substantial light or glare, which would adversely affect day or nighttime views in the area?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
 II. AGRICULTURE RESOURCES — In determining whether impacts to agricultural resources are significant environmental effects, lead agencies may refer to the California Agricultural Land Evaluation and Site Assessment Model (1997) prepared by the California Department of Conservation as an optional model to use in assessing impacts on agriculture and farmland. Would the project:				
a) Convert Prime Farmland, Unique Farmland, or Farmland of Statewide Importance (Farmland), as shown on the maps prepared pursuant to the Farmland Mapping and Monitoring Program of the California Resources Agency, to non-agricultural use?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b) Conflict with existing zoning for agricultural use, or a Williamson Act contract?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
c) Involve other changes in the existing environment that, due to their location or nature, could result in conversion of Farmland to non-agricultural use?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
 III. AIR QUALITY — Where available, the significance criteria established by the applicable air quality management or air pollution control district may be relied upon to make the following determinations. Would the project:				
a) Conflict with or obstruct implementation of the applicable air quality plan?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

	Potentially Significant Impact	Less than Significant with Mitigation Incorporation	Less than Significant Impact	No Impact
b) Violate any air quality standard or contribute substantially to an existing or projected air quality violation?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) Result in a cumulatively considerable net increase of any criteria pollutant for which the project region is non-attainment under an applicable federal or state ambient air quality standard (including releasing emissions that exceed quantitative thresholds for ozone precursors)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d) Expose sensitive receptors to substantial pollutant concentrations?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e) Create objectionable odors affecting a substantial number of people?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
IV. BIOLOGICAL RESOURCES — Would the project:				
a) Have a substantial adverse impact, either directly or through habitat modifications, on any species identified as a candidate, sensitive, or special status species in local or regional plans, policies, or regulations, or by the California Department of Fish and Game or U. S. Fish and Wildlife Service?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b) Have a substantial adverse effect on any riparian habitat or other sensitive natural community identified in local or regional plans, policies, regulations or by the California Department of Fish and Game or U. S. Fish and Wildlife Service?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
c) Have a substantial adverse effect on federally protected wetlands as defined by Section 404 of the Clean Water Act (including, but not limited to, marsh, vernal pool, coastal, etc.) through direct removal, filling, hydrological interruption, or other means?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

	Potentially Significant Impact	Less than Significant with Mitigation Incorporation	Less than Significant Impact	No Impact
d) Interfere substantially with the movement of any native resident or migratory fish or wildlife species or with established native resident or migratory wildlife corridors, or impede the use of native wildlife nursery sites?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
e) Conflict with any local policies or ordinances protecting biological resources, such as a tree preservation policy or ordinance?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
f) Conflict with the provisions of an adopted Habitat Conservation Plan, Natural Community Conservation Plan, or other approved local, regional, or state habitat conservation plan?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
V. CULTURAL RESOURCES — Would the project:				
a) Cause a substantial adverse change in the significance of a historical resource as defined in Section §15064.5?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) Cause a substantial adverse change in the significance of an archaeological resource pursuant to Section §15064.5?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) Directly or indirectly destroy a unique paleontological resource or site or unique geologic feature?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
d) Disturb any human remains, including those interred outside of formal cemeteries?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
VI. GEOLOGY AND SOILS — Would the project:				
a) Expose people or structures to potential substantial adverse effects, including the risk of loss, injury, or death involving:				
i) Rupture of a known earthquake fault, as delineated on the most recent Alquist-Priolo Earthquake Fault Zoning Map issued by the State Geologist for the area or based on other substantial evidence of a known fault? Refer to Division of Mines and Geology Special Publication 42.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
ii) Strong seismic ground shaking?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	Potentially Significant Impact	Less than Significant with Mitigation Incorporation	Less than Significant Impact	No Impact
iii) Seismic-related ground failure, including Liquefaction?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
iv) Landslides?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b) Result in substantial soil erosion or the loss of topsoil?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c) Be located on a geologic unit or soil that is unstable, or that would become unstable as a result of the project, and potentially result in on- or off-site landslide, lateral spreading, subsidence, liquefaction or collapse?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
d) Be located on expansive soil, as defined in Table 18-1-B of the Uniform Building Code (1994), creating substantial risks to life or property?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
e) Have soils incapable of adequately supporting the use of septic tanks or alternative waste water disposal systems where sewers are not available for the disposal of wastewater?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
VII. HAZARDS AND HAZARDOUS MATERIALS — Would the project:				
a) Create a significant hazard to the public or the environment through the routine transport, use, or disposal of hazardous materials?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) Create a significant hazard to the public or the environment through reasonably foreseeable upset and accident conditions involving the release of hazardous materials into the environment?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) Emit hazardous emissions or handle hazardous or acutely hazardous materials, substances, or waste within one-quarter mile of an existing or proposed school?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d) Be located on a site, which is included on a list of hazardous materials sites compiled pursuant to Government Code Section 65962.5 and, as a result, would it create a significant hazard to the public or the environment?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e) For a project located within an airport land use plan or, where such a plan has not been adopted,	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	Potentially Significant Impact	Less than Significant with Mitigation Incorporation	Less than Significant Impact	No Impact
within two miles of a public airport or public use airport, would the project result in a safety hazard for people residing or working in the project area?				
f) For a project within the vicinity of a private airstrip, would the project result in a safety hazard for people residing or working in the project area?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
g) Impair implementation of or physically interfere with an adopted emergency response plan or emergency evacuation plan?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h) Expose people or structures to a significant risk of loss, injury or death involving wildland fires, including where wildlands are adjacent to urbanized areas or where residences are intermixed with wildlands?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
VIII. HYDROLOGY AND WATER QUALITY — Would the project:				
a) Violate any water quality standards or waste discharge requirements?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) Substantially deplete groundwater supplies or interfere substantially with groundwater recharge such that there would be a net deficit in aquifer volume or a lowering of the local groundwater table level (e.g., the production rate of pre-existing nearby wells would drop to a level which would not support existing land uses or planned uses for which permits have been granted)?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c) Substantially alter the existing drainage pattern of the site or area, including through the alteration of the course of a stream or river, in a manner that would result in substantial erosion or siltation on or off site?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d) Substantially alter the existing drainage pattern of the site or area, including through the alteration of the course of a stream or river or substantially increase the rate or amount of surface runoff in a manner which would result in flooding on or off site?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e) Create or contribute runoff water which would exceed the capacity of existing or planned storm water drainage systems or provide substantial additional sources of polluted runoff?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

		Potentially Significant Impact	Less than Significant with Mitigation Incorporation	Less than Significant Impact	No Impact
f)	Otherwise degrade water quality?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g)	Place housing within a 100-year flood hazard area as mapped on a federal Flood Hazard Boundary or Flood Insurance Rate Map or other flood hazard delineation map?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
h)	Place within a 100-year flood hazard area structures that would impede or redirect flood flows?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
i)	Expose people or structures to a significant risk of loss, injury or death involving flooding, including flooding as a result of the failure of a levee or dam?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
j)	Inundation by seiche, tsunami, or mudflow?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
IX.	LAND USE AND PLANNING — Would the project:				
a)	Physically divide an established community?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b)	Conflict with any applicable land use plan, policy, or regulation of an agency with jurisdiction over the project (including, but not limited to the general plan, specific plan, local coastal program, or zoning ordinance) adopted for the purpose of avoiding or mitigating an environmental effect?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c)	Conflict with any applicable habitat conservation plan or natural community conservation plan?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
X.	MINERAL RESOURCES — Would the project:				
a)	Result in the loss of availability of a known mineral resource that would be of value to the region and the residents of the state?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b)	Result in the loss of availability of a locally-important mineral resource recovery site delineated on a local general plan, specific plan or other land use plan?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
XI.	NATIONAL POLLUTION DISCHARGE ELIMINATION SYSTEM — Would the project:				
a)	Result in a significant loss of pervious surface?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b)	Create a significant discharge of pollutants into	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	Potentially Significant Impact	Less than Significant with Mitigation Incorporation	Less than Significant Impact	No Impact
the storm drain or water way?				
c) Violate any best management practices of the National Pollution Discharge Elimination System permit?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
XII. NOISE — Would the project result in:				
a) Exposure of persons to or generation of noise levels in excess of standards established in the local general plan or noise ordinance, or applicable standards of other agencies?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) Exposure of persons to or generation of excessive ground-borne vibration or ground-borne noise levels?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) A substantial permanent increase in ambient noise levels in the project vicinity above levels existing without the project?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d) A substantial temporary or periodic increase in ambient noise levels in the project vicinity above levels existing without the project?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e) For a project located within an airport land use plan or, where such a plan has not been adopted, within two miles of a public airport or public use airport, would the project expose people residing or working in the project area to excessive noise levels?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f) For a project within the vicinity of a private airstrip, would the project expose people residing or working in the project area to excessive noise levels?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

	Potentially Significant Impact	Less than Significant with Mitigation Incorporation	Less than Significant Impact	No Impact
XIII. POPULATION AND HOUSING — Would the project:				
a) Induce substantial population growth in an area, either directly (for example, by proposing new homes and businesses) or indirectly (for example, through extension of roads or other infrastructure)?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b) Displace substantial numbers of existing housing, necessitating the construction of replacement housing elsewhere?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c) Displace substantial numbers of people, necessitating the construction of replacement housing elsewhere?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
XIV. PUBLIC SERVICES — Would the project result in substantial adverse physical impacts associated with the provision of new or physically altered governmental facilities, need for new or physically altered governmental facilities, the construction of which could cause significant environmental impacts, in order to maintain acceptable service ratios, response times or other performance objectives for any of the public services:				
a) Fire protection?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) Police protection?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c) Schools?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
d) Parks?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
e) Other public facilities?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
XV. RECREATION —				
a) Would the project increase the use of existing neighborhood and regional parks or other recreational facilities such that substantial physical deterioration of the facility would occur or be accelerated?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b) Does the project include recreational facilities or require the construction or expansion of recreational facilities which might have an adverse physical effect on the environment?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

	Potentially Significant Impact	Less than Significant with Mitigation Incorporation	Less than Significant Impact	No Impact
XVI. TRANSPORTATION/TRAFFIC — Would the project:				
a) Cause an increase in traffic which is substantial in relation to the existing traffic load and capacity of the street system (i.e., result in a substantial increase in either the number of vehicle trips, the volume to capacity ratio on roads, or congestion at intersections)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) Exceed, either individually or cumulatively, a level of service standard established by the county congestion management agency for designated roads or highways?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) Result in a change in air traffic patterns, including either an increase in traffic levels or a change in location that results in substantial safety risks?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
d) Substantially increase hazards to a design feature (e.g., sharp curves or dangerous intersections) or incompatible uses (e.g., farm equipment)?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
e) Result in inadequate emergency access?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f) Result in inadequate parking capacity?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g) Conflict with adopted policies supporting alternative transportation (e.g., bus turnouts, bicycle racks)?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
XVII. UTILITIES AND SERVICE SYSTEMS — Would the project:				
a) Exceed wastewater treatment requirements of the applicable Regional Water Quality Control Board?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) Require or result in the construction of new water or wastewater treatment facilities or expansion of existing facilities, the construction of which could cause significant environmental effects?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) Require or result in the construction of new storm water drainage facilities or expansion of existing facilities, the construction of which could cause significant environmental effects?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	Potentially Significant Impact	Less than Significant with Mitigation Incorporation	Less than Significant Impact	No Impact
d) Have sufficient water supplies available to serve the project from existing entitlement and resources, or are new or expanded entitlement needed?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e) Result in a determination by the wastewater treatment provider which serves or may serve the project that it has adequate capacity to serve the project's projected demand in addition to the provider's existing commitments?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f) Be served by a landfill with sufficient permitted capacity to accommodate the project's solid waste disposal needs?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g) Comply with federal, state, and local statutes and regulations related to solid waste?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

XVIII. MANDATORY FINDINGS OF SIGNIFICANCE —

a) Does the project have the potential to degrade the quality of the environment, substantially reduce the habitat of a fish or wildlife species, cause a fish or wildlife population to drop below self-sustaining levels, threaten to eliminate a plant or animal community, reduce the number or restrict the range of a rare or endangered plant or animal or eliminate important examples of the major periods of California history or prehistory?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b) Does the project have the potential to achieve short-term environmental goals?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) Does the project have impacts that are individually limited, but cumulatively considerable? ("Cumulatively considerable" means that the incremental effects of a project are considerable when viewed in connection with the effects of past projects, the effects of other current projects, and the effects of probable future projects)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d) Does the project have environmental effects that will cause substantial adverse effects on human beings, either directly or indirectly?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

SECTION 3.0

ENVIRONMENTAL ANALYSIS

The environmental analysis provided in this section describes the information that was considered in evaluating the questions in Section 2.0, Environmental Checklist. The information used in this evaluation is based on literature review (see Section 4.0, References, for a list of reference material consulted) and field reconnaissance undertaken by Sapphos Environmental, Inc.; Linscott, Law & Greenspan Engineers; Moffat & Nichol; SCS Engineers; and VSA n Associates during the month of June 2004.

3.01 AESTHETICS

This analysis is undertaken by the City of Long Beach to determine if the proposed Long Beach Memorial Medical Center Expansion (proposed project) may have a significant impact on aesthetics in accordance with Section 15063 of the State of California Environmental Quality Act (CEQA) Guidelines (California Code of Regulations, Title 14, Division 6, Chapter 3, Sections 15000–15387, Appendix G). The assessment of aesthetics considers all phases of project planning, implementation, and operation in addressing the environmental checklist form recommended in the State CEQA Guidelines. The conclusions rely on expert opinion supported by facts, technical studies, and the City of Long Beach General Plan, the City of Signal Hill General Plan, the Report to the City Council for the Proposed Re-Adoption of the Central Long Beach Redevelopment Project, the City of Long Beach Redevelopment Agency Design Review, and records of scenic, including historic and open space, overlay zones. Aesthetics at the proposed project site were evaluated with regard to these documents, as well as the California Department of Transportation's (Caltrans) Scenic Highway System designations, and information regarding the visual character of the site, including light and glare.

The State CEQA Guidelines recommend the consideration of four questions when addressing whether the proposed project would have potentially significant impacts on area-wide aesthetics. This section briefly describes the rationale for the answers to the questions related to aesthetics in Section 2.0, Environmental Checklist, of this Initial Study.

(a) *Would the proposed project have a substantial adverse effect on a scenic vista?*

Implementation of the proposed project is not expected to have a substantial adverse effect on scenic vistas. The proposed project would not take place within the viewshed of a California State Scenic Byway designated by the Caltrans Office of State Landscape Architecture¹ or an All-American or National Scenic Byway as designated by the U.S. Department of Transportation, Federal Highway Administration.² The new structural development would take place within the existing Long Beach Memorial Medical Center campus (Campus), with structures of similar height and scale, and in an urbanized area with compatible development. The proposed project is not expected to obstruct scenic coastal or waterway views because it is greater than 3 miles north of the Long Beach Harbor. There is a residential neighborhood at a higher elevation north of the proposed project site, and the proposed project would not substantially change any scenic view of the coast to the south.

Because the proposed project would be implemented in a blighted, physically degraded³ area designated by the City of Long Beach as the Central Long Beach Redevelopment Area, the proposed project's impacts are anticipated to contribute to a relative aesthetic improvement. Physical development of the proposed project is expected to minimally

¹ California Department of Transportation, 29 June 2004. *The California Scenic Highway System: A List of Eligible (E) and Officially Designated (OD) Routes (by Route)*. Available at: <http://www.dot.ca.gov/hq/LandArch/scenic/schw1.html>

² U.S. Department of Transportation, Federal Highway Administration, 29 June 2004. National Scenic Byways Program. Contact: National Scenic Byways Program, HEPN-50, Room 3232, 400 Seventh Street, SW Washington, DC, 20590. Available at: <http://www.byways.org/browse/states/CA/travel.html>

³ City of Long Beach, Redevelopment Agency, December 2000. *Report to the City Council for the Proposed Re-Adoption of the Central Long Beach Redevelopment Project*. Prepared by: Keyser Marston Associates, Inc., 500 South Grand Avenue, Suite 1480, Los Angeles, CA 90017.

impact the aesthetics of the residential and commercial fabric of the immediately surrounding neighborhood during project demolition and construction activities; however, these effects would be limited to properties already owned and occupied by the Long Beach Memorial Medical Center (LBMMC). The proposed project would be aesthetically consistent with land use recommendations for mixed-use commercial development in both the City of Long Beach⁴ and City of Signal Hill⁵ General Plans.

One City of Long Beach open space amenity exists adjacent the proposed project site to the west—the approximately 6-acre Veterans Memorial Park (Section 1.0, Project Description, Figure 1.04-3, *Long Beach Memorial Medical Center Location*). The proposed project is not expected to degrade scenic vistas to, or from, the park as the intended land uses are consistent with those planned for the area in the City of Long Beach's General Plan land use designations.⁶ Moreover, the conceptual plan for the proposed project does not call for the removal of any open space amenity, but includes open space development of a healing garden for cancer patients, which is consistent with the City of Long Beach's Open Space and Recreation element of the General Plan, as well as those of the County of Los Angeles and the Southern California Association of Governments ("providing open space for public health and safety").⁷

Because the proposed project is not expected to have a substantial adverse effect on a scenic vista; further analysis is not warranted.

- (b) *Would the proposed project substantially damage scenic resources, including, but not limited to, trees, rock outcroppings, and historic buildings within a state scenic highway?*

The implementation of the proposed project is not expected to have a significant impact on scenic resources within a state-designated scenic highway. There is no state-designated highway in the vicinity of the proposed project site. Although portions of the Pacific Coast Highway are designated as a California State Scenic Highway, the segment of the highway that runs east to west less than 1 mile to the south of the proposed project site is not subject to the scenic highway designation. Nevertheless, views of the proposed project area from the Pacific Coast Highway are not expected to be significantly altered by the proposed project because the street-level and skyline intrusion of the planned new construction is consistent with the existing visual character of the community and with that planned for the future development of the community. The existing 54-acre Campus is completely developed and characterized by six existing land uses: (1) inpatient medical facilities, (2) outpatient medical facilities, (3) mixed-use facilities (nonresidential), (4) utilities, (5)

⁴ City of Long Beach, Department of Planning and Building, July 1991. *General Plan Maps and Descriptions of Land Use Districts*. Prepared by: City of Long Beach, Department of Planning and Building, City Hall, 333 West Ocean Boulevard, Long Beach, CA 90802.

⁵ City of Signal Hill, Community Development Department, 3 July 2001. *Land Use Element of the Signal Hill General Plan*. Contact: City of Signal Hill, Community Development Department, 2175 Cherry Avenue, Signal Hill, CA 90755. Available at: http://www.signal-hill.ca.us/community_development/general_plan.php

⁶ City of Long Beach, Department of Planning and Building, July 1991. *Land Use Element of the Long Beach General Plan*. Prepared by: City of Long Beach, Department of Planning and Building, City Hall, 333 West Ocean Boulevard, Long Beach, CA 90802.

⁷ City of Long Beach, Department of Planning and Building, 30 April 1973. *Open Space Element of the General Plan*. Prepared by: City of Long Beach, Department of Planning and Building, City Hall, 333 West Ocean Boulevard, Long Beach, CA 90802.

circulation, and (6) parking. The new development would involve similar land uses and would affect only a 16-acre subsection of the 54-acre Campus.

The open space amenities that would be provided by the proposed project have the potential to improve the scenic character of the neighborhood. The County of Los Angeles Los Angeles River Master Plan includes goals of developing open space along the river corridor in the Long Beach area.⁸ Because the proposed project open space would function as a connecting link to the green spaces heading west (via Veterans Memorial Park) and toward the Los Angeles River (approximately 1 mile to the west of the proposed project site), this aspect of the proposed project is consistent with the goals of the Los Angeles River Master Plan. Overall, because the proposed project would improve the scenic resources north of Pacific Coast Highway, further analysis is not warranted.

- (c) *Would the proposed project substantially degrade the existing visual character or quality of the site and its surroundings?*

The construction phase of the proposed project may have a temporary adverse effect on the existing visual quality of the site and its surroundings due to the physical upheaval caused by soil disturbance, waste debris generation, and security barriers required of the construction activities. However, it is anticipated that the potential impacts and short-term nature of the degradation of the visual character of the neighborhood are less than significant and would be outweighed by the long-term visual enhancement to be derived from the completed project and its provision of visually attractive structural and landscape amenities.

Landscaping would be provided along Long Beach Boulevard, Spring Street, Atlantic Avenue, and 27th Street frontages consistent with City of Long Beach requirements. Landscaping within the Campus area would be consistent with existing Campus landscaping. A healing garden would be developed adjacent to the Todd Cancer Institute (on the northwestern corner of the Campus, southeast of the intersection of Long Beach Boulevard and Spring Street, and on the east side of the proposed building). Amenities and plant selections would be sensitive to the needs of cancer patients and would accentuate the healing and medicinal properties of certain plants. The City of Long Beach–approved landscaping plan would ensure that the proposed project would contribute to the visual quality of its surroundings.

Given that the proposed project would not displace or degrade the visual character of the site and its surroundings, but would instead contribute to a visual improvement, further analysis is not warranted.

- (d) *Would the proposed project create a new source of substantial light or glare that would adversely affect daytime or nighttime views in the area?*

Implementation of the proposed project may have a potentially significant effect on daytime and nighttime views in the area due to the introduction of a new source of substantial light or glare; however, the effects can be mitigated. The proposed project

⁸ County of Los Angeles, Department of Public Works, 13 June 1996. *Los Angeles River Master Plan*. Contact: County of Los Angeles, Department of Public Works, 900 South Fremont Avenue, Alhambra, CA 91803. Available at: <http://www.ladpw.com/wmd/watershed/LA/LARMP/>

proposes construction of large, multistoried structures with reflective exterior surfaces. Depending on the composition of these reflective surfaces and their abilities to redirect daytime sunlight and diffuse nighttime exterior and interior lighting, an adverse glare impact may be created. This scenario, in conjunction with an anticipated increase in vehicular traffic, could have both a daytime and nighttime lighting and glare impact on the proposed project's neighborhood. The addition of security lighting around the facility could also create an aesthetic impact. Careful selection of exterior building materials and window glass treatments, along with appropriate street and parking lot lamp shading, would likely serve to mitigate these potential impacts to a less than significant level. Given these considerations, further analysis of the effects of the potential new sources of light and glare are warranted.

3.02 AGRICULTURAL RESOURCES

This analysis is undertaken by the City of Long Beach to determine if the proposed Long Beach Memorial Medical Center Expansion (proposed project) may have a significant impact on agriculture resources in accordance with Section 15063 of the State of California Environmental Quality Act (CEQA) Guidelines (California Code of Regulations, Title 14, Division 6, Chapter 3, Sections 15000–15387, Appendix G). The assessment of agricultural resources considers all phases of the Master Plan of Land Uses (providing a conceptual framework for reorganization of the six existing land uses) and project planning, implementation, and operation. The conclusions rely on expert opinion supported by facts, technical studies, and the existing available information contained in the City of Long Beach General Plan,¹ the City of Long Beach Municipal Code,² and the City of Long Beach Land Use element of the Long Beach General Plan, Urban Design Analysis.³ Agricultural resources at the proposed project site were evaluated with regard to these documents.

This section briefly describes the supporting documentation for the answers to the questions related to agricultural resources in Section 2.0, Environmental Checklist, of this Initial Study.

- (a) *Would the proposed project convert prime farmland, unique farmland, or farmland of statewide importance (Farmland), as shown on the maps prepared pursuant to the Farmland Mapping and Monitoring Program of the California Resources Agency, to nonagricultural use?*

Implementation of the proposed project would not result in significant impacts to Farmland.⁴ There are no prime farmlands, unique farmlands, farmland of statewide importance, or any existing farmlands present at the proposed project site. The proposed project would not convert any farmland to nonagricultural use. No further analysis is warranted.

- (b) *Would the proposed project conflict with existing zoning for agricultural use or a Williamson Act contract?*

Implementation of the proposed project would not result in significant impacts to existing zones for agricultural resources. The zoning for the area does not provide for any agricultural uses. The proposed project site is located in an area designated as a Mixed-Use District in the Land Use element of the City of Long Beach General Plan.⁵ The zoning designation for the area includes Institutional (I; including hospitals, medical centers,

¹ City of Long Beach, Department of Planning and Building, July 1991. *General Plan Maps and Descriptions of Land Use Districts*. Prepared by: City of Long Beach, Department of Planning and Building, City Hall, 333 West Ocean Boulevard, Long Beach, CA 90802.

² City of Long Beach, 1982. City of Long Beach Municipal Code (Ord. C-5831 § 1, 1982), Chapter 21. Available at: <http://www.longbeach.gov/apps/cityclerk/lbmc/title-21/frame.htm>

³ City of Long Beach, Department of Planning and Building, July 1991. *Land Use Element of the Long Beach General Plan*. Prepared by: City of Long Beach, Department of Planning and Building, City Hall, 333 West Ocean Boulevard, Long Beach, CA 90802.

⁴ U.S. Department of Agriculture, Natural Resources Conservation Service, 17 June 1994. "Farmland Protection Policy Act." *Federal Register*.

⁵ City of Long Beach, Department of Planning and Building, July 1991. *General Plan Maps and Descriptions of Land Use Districts*. Prepared by: City of Long Beach, Department of Planning and Building, City Hall, 333 West Ocean Boulevard, Long Beach, CA 90802.

medical office complexes, convalescent hospitals, parking, schools, social service office of nonprofit organizations, and special group residences), Planning Development (PD; flexible development plans to benefit from the special land use), Regional Highway (CHW; commercial use district for mixed-scale commercial uses), and Community Automobile-Oriented (CCA; retail and service uses) Districts.⁶ There are no Williamson Act contracts in or adjacent to the proposed project site. Therefore, no further analysis is warranted.

- (c) *Would the proposed project involve other changes in the existing environment that, due to their location or nature, could result in conversion of Farmland, to nonagricultural use?*

Implementation of the proposed project would not result in significant impacts that would convert Farmland into nonagricultural uses. Neither the proposed project site nor surrounding areas include Farmland. The proposed project would not result in the conversion of Farmland on site or in any adjacent area to nonagricultural use. Therefore, no further analysis is warranted.

⁶ City of Long Beach, 1982. City of Long Beach Municipal Code (Ord. C-5831 § 1, 1982), Chapter 21. Available at: <http://www.longbeach.gov/apps/cityclerk/lbmc/title-21/frame.htm>

3.03 AIR QUALITY

This analysis is undertaken by the City of Long Beach to determine if the proposed Long Beach Memorial Medical Center Expansion (proposed project) may have a significant impact on air quality in accordance with Section 15063 of the State of California Environmental Quality Act (CEQA) Guidelines (California Code of Regulations, Title 14, Division 6, Chapter 3, Sections 15000–15387, Appendix G). The assessment of air quality considers all phases of project planning, construction, and operation. The conclusions reflect guidelines established by the South Coast Air Quality Management District (SCAQMD) CEQA Air Quality Handbook.¹

Data on existing air quality in the South Coast Air Basin, in which the proposed project site is located, is monitored by a network of air monitoring stations operated by the California Environmental Protection Agency (CalEPA), California Air Resources Board (CARB), and the SCAQMD. Information obtained from these sources was used in the assessment for answering questions related to air quality in Section 2.0, Environmental Checklist, of this Initial Study. Technical input to this section of the Initial Study was completed by SCS Engineers.

- (a) *Would the proposed project conflict with or obstruct implementation of the applicable air quality plan?*

The most recent update to the SCAQMD Air Quality Management Plan (AQMP) was adopted in 2003 by the SCAQMD Board and the CARB. The CARB submitted the AQMP to the EPA for approval in January 2004. When approved by the EPA, the 2003 AQMP will replace the 1999 AQMP as the State Implementation Plan (SIP) for the South Coast Air Basin. The AQMP sets forth strategies for attaining the federal PM₁₀ standard by 2006 and the federal one-hour ozone standard by 2010, as well as meeting state standards at the earliest practicable date. This plan is updated every three years. The proposed project would be consistent with the City of Long Beach General Plan land use designations for the area. The proposed project seeks to reorganize uses within the existing Long Beach Memorial Medical Center campus (Campus) area. The proposed project would not result in a change to the population growth assumptions used in the AQMP for attainment planning, but it would provide services to meet the anticipated needs of the expected population. Therefore, no long-term air quality impacts are expected to occur that would cause conflicts with, or obstruct implementation of, the AQMP, and no further analysis is warranted.

- (b) *Would the proposed project violate any air quality standard or contribute substantially to an existing or projected air quality violation?*

Implementation of the proposed project has the potential to produce significant, short-term air quality impacts during construction and would require consideration of the SCAQMD standard list of mitigation measures. Construction impacts may result from combustion emissions from mobile equipment and fugitive dust emissions from grading and site preparation activities. These short-term impacts may contribute to an exceedance of air quality standards. Operational phase impacts may occur from vehicle emissions as a result of increased trip generation to and from the new facilities. The proposed project would reorganize and intensify existing land uses at the site. The existing approximately 1,000,000 square feet of development would be increased by approximately 500,000 square feet over an anticipated 10-year period

¹ South Coast Air Quality Management District, 1993. *Air Quality Analysis Guidance Handbook*. Contact: South Coast Air Quality Management District 21865 Copley Drive, Diamond Bar, CA 91765.

of construction. The anticipated trip generation would be evaluated to determine the extent of the potential impacts; however, it is unlikely that operation of the proposed project would be sufficient to cause a new air quality violation or measurably increase existing violations. Further analysis of the potential for the proposed project to violate any air quality standard or contribute substantially to an existing or projected air quality violation is warranted.

- (c) *Would the proposed project result in a cumulatively considerable net increase of any criteria pollutant for which the proposed project region is in nonattainment under an applicable federal or state ambient air quality standard (including releasing emissions that exceed quantitative thresholds for ozone precursors)?*

The South Coast Air Basin, where the proposed project is located, is in nonattainment with the state and federal ozone and PM₁₀ standards. Proposed project-related construction phase emissions would include ozone precursor emissions and particulate matter. Air impacts associated with the operation of the proposed project would occur almost entirely as ozone precursor emissions from vehicles. These emissions, and emissions from other projects in the vicinity of the proposed project site, would have the potential for cumulatively significant impacts. Further analysis of the potential for the proposed project to result in a cumulatively considerable net increase of any criteria pollutant is warranted.

- (d) *Would the proposed project expose sensitive receptors to substantial pollutant concentrations?*

Construction of the proposed project would occur within the existing footprint of the Campus, near existing and operating medical facilities. Sensitive receptors may be exposed to construction emissions such as fugitive dust and combustion emissions, including the toxic air contaminant, diesel particulate matter. In addition, the excavation of petroleum-impacted soils from the three elements of the Miller Children's Hospital (pediatric inpatient tower, utility trench, and central plant building; pediatric outpatient building; and link building) would have the potential to emit volatile organic compounds into ambient air. Consideration of the SCAQMD standard list of mitigation measures would be required to reduce these potential exposures. Further analysis of the potential for the proposed project to result in exposure of sensitive receptors to substantial pollutant concentrations is warranted.

- (e) *Would the proposed project create objectionable odors affecting a substantial number of people?*

Construction of the proposed project would require the use of diesel powered equipment and the excavation of petroleum-impacted soils. Odors associated with emissions from diesel equipment and petroleum-impacted soils may be unpleasant to some people; however, the impact would be expected to be below the level of significance. Consideration of the SCAQMD standard list of mitigation measures would be required to reduce these potential exposures. Operation of the proposed project would not result in creation of objectionable odors. Further analysis of the potential for the proposed project to create objectionable odors affecting a substantial number of people is warranted.

3.04 BIOLOGICAL RESOURCES

This analysis is undertaken by the City of Long Beach to determine if the proposed Long Beach Memorial Medical Center Expansion (proposed project) may have a significant impact on biological resources in accordance with Section 15063 of the State of California Environmental Quality Act (CEQA) Guidelines (California Code of Regulations, Title 14, Division 6, Chapter 3, Sections 15000–15387, Appendix G). The assessment of biological resources considers all phases of project planning, implementation, and operation in addressing the environmental checklist form recommended in the State CEQA Guidelines. Biological resources at the proposed project site were evaluated through a search of the California Natural Diversity Database (CNDDDB) for the U.S. Geological Survey (USGS) 7.5-minute series Long Beach topographic quadrangle and all adjacent quadrangles (Inglewood, Los Alamitos, San Pedro, Seal Beach, South Gate, Torrance, and Whittier). In addition, a review of published literature and consultation with persons knowledgeable about the biology of the area was conducted during the preparation of this Initial Study to evaluate the biological resources present at the proposed project site.

Table 3.04-1, *Listed Species with Potential to Occur in the Greater Long Beach Area*, includes five plant species and nine wildlife species listed as endangered, threatened, or rare pursuant to the state and federal Endangered Species Acts that have been known to be present within the greater Long Beach area. Table 3.04-2, *Sensitive Species with Potential to Occur in the Greater Long Beach Area*, includes 17 sensitive plant species and eight sensitive wildlife species. Sensitive plant species are those not listed pursuant to the state and federal Endangered Species Acts, but identified by the California Native Plant Society as a species that should be considered in assessing the potential effects of projects. Sensitive wildlife species are those not listed pursuant to the state and federal Endangered Species Acts, but listed as Federal Species of Concern, proposed for listing, or identified by the California Department of Fish and Game (CDFG) as California Species of Special Concern.

**TABLE 3.04-1
LISTED SPECIES WITH POTENTIAL TO OCCUR IN THE
GREATER LONG BEACH AREA**

SPECIES	STATUS	HABITAT REQUIREMENTS
Plants		
Ventura Marsh milk-vetch (<i>Astragalus pycnostachyus</i> var. <i>lanosissimus</i>)	FE, SE	Coastal salt marsh
Coastal dunes milk-vetch (<i>Astragalus tener</i> var. <i>titi</i>)	FE, SE	Coastal bluff scrub, coastal dunes
Lyon's pentachaeta (<i>Pentachaeta lyonii</i>)	FE, SE	Chaparral, valley/foothill grassland
Mexican flannelbush (<i>Fremontodendron mexicanum</i>)	FE	Closed cone coniferous forest, chaparral, cismontane woodland
Spreading navarretia (<i>Navarretia fossalis</i>)	FT	Vernal pools, chenopod scrub, marshes, swamps, and playas
Wildlife		
Mohave tui chub (<i>Gila bicolor mohavensis</i>)	FE, SE	Mohave River Basin, adapted to alkaline mineralized waters
Light-footed clapper rail (<i>Rallus longirostris levipes</i>)	FE, SE	Salt marshes, tidal sloughs
California least tern (<i>Sterna antillarum brownii</i>)	FE, SE	Coastal bare or sparsely vegetated flat substrates
Palos Verdes blue butterfly (<i>Glaucopsyche lygdamus palosverdesensis</i>)	FE	Restricted to seaward side of Palos Verdes Hills
Pacific pocket mouse (<i>Perognathus longimembris pacificus</i>)	FE	Inhabits the narrow coastal plains
Coastal California gnatcatcher (<i>Polioptila californica californica</i>)	FT	Coastal sage scrub below 2,500 feet in elevation
Western snowy plover (<i>Charadrius alexandrinus nivosus</i>)	FT, CSC	Sandy beaches, salt pond levees, and shores of large alkali lakes
Western yellow-billed cuckoo (<i>Coccyzus americanus occidentalis</i>)	PE, SE	Riparian forest, lower flood bottoms of large river systems
Belding's savannah sparrow (<i>Passerculus sandwichensis beldingi</i>)	SE	Coastal salt marshes

NOTES:

FE = Listed as Endangered under the federal Endangered Species Act

FT = Listed as Threatened under the federal Endangered Species Act

SE = Listed as Endangered by the State of California

PE = Proposed to be listed as endangered under the federal Endangered Species Act

**TABLE 3.04-2
SENSITIVE SPECIES WITH POTENTIAL TO OCCUR IN THE
GREATER LONG BEACH AREA**

SPECIES	STATUS	HABITAT REQUIREMENTS
Plants		
Santa Barbara morning-glory (<i>Calystegia sepium</i> ssp. <i>binghamiae</i>)	CNPS1A	Coastal marshes
Aphanisma (<i>Aphanisma blitoides</i>)	CNPS1B	Coastal bluff scrub, coastal dunes, coastal scrub
South Coast saltscale (<i>Atriplex pacifica</i>)	CNPS1B	Coastal scrub, coastal bluff scrub, playas, chenopod scrub
Parish's brittle-scale (<i>Atriplex parishii</i>)	CNPS1B	Alkali meadows, vernal pools
Davidson's saltscale (<i>Atriplex serenana</i> var. <i>davidsonii</i>)	CNPS1B	Coastal bluff scrub, coastal scrub
Southern tarplant (<i>Centromadia parryi</i> ssp. <i>australis</i>)	CNPS1B	Marshes and swamps (margins), grassland, vernal pools
Salt marsh bird's-beak (<i>Cordylanthus maritimus</i> ssp. <i>maritimus</i>)	CNPS1B	Coastal salt marsh, coastal dunes
Island green dudleya (<i>Dudleya virens</i> ssp. <i>insularis</i>)	CNPS1B	Coastal bluff scrub, coastal bluff
Coulter's goldfields (<i>Lasthenia glabrata</i> ssp. <i>coulteri</i>)	CNPS1B	Coastal marshes, playas, grassland, vernal pools,
Prostrate navarretia (<i>Navarretia prostrata</i>)	CNPS1B	Coastal scrub, valley and foothill grassland, vernal pools
Coast woolly-heads (<i>Nemacaulis denudata</i> var. <i>denudata</i>)	CNPS1B	Coastal dunes
California Orcutt grass (<i>Orcuttia californica</i>)	CNPS1B	Vernal pools
Brand's phacelia (<i>Phacelia stellaris</i>)	CNPS1B	Coastal dunes and coastal scrub
Sanford's arrowhead (<i>Sagittaria sanfordii</i>)	CNPS1B	Marshes and swamps
Estuary seablite (<i>Suaeda esteroa</i>)	CNPS1B	Marshes and swamps
Mud nama (<i>Nama stenocarpum</i>)	CNPS2	Marshes and swamps
Salt Spring checkerbloom (<i>Sidalcea neomexicana</i>)	CNPS2	Alkali playas, brackish marshes, chaparral, coastal scrub
Wildlife		
Sandy beach tiger beetle (<i>Cicindela hirticollis gravida</i>)	FSC	Areas adjacent to non-brackish water
Southwestern pond turtle (<i>Clemmys marmorata pallida</i>)	FSC, CSC	Permanent or nearly permanent bodies of water below 6,000 feet in elevation

**TABLE 3.04-2
SENSITIVE SPECIES WITH POTENTIAL TO OCCUR IN THE
GREATER LONG BEACH AREA, Continued**

SPECIES	STATUS	HABITAT REQUIREMENTS
Tricolored blackbird (<i>Agelaius tricolor</i>)	CSC	Open water with protected nesting substrates
Burrowing owl (<i>Athene cunicularia</i>)	CSC	Open, dry annual or perennial grasslands, deserts, and scrublands
San Diego desert woodrat (<i>Neotoma lepida intermedia</i>)	CSC	Coastal canopies, rock outcrops, and rocky cliffs and slopes
Coast (San Diego) horned lizard (<i>Phrynosoma coronatum blainvillei</i>)	CSC	Coastal sage scrub and chaparral, in arid and semi-arid climates
Black skimmer (<i>Rynchops niger</i>)	CSC	Gravel bars, low islets, and sandy beaches, in unvegetated sites
Western spadefoot (<i>Scaphiopus hammondi</i>)	CSC	Grassland habitats and valley-foothill Hardwood woodlands

NOTES:

FSC = Federal Species of Concern as designated by the U. S. Fish and Wildlife Service Regional and Field Offices

CSC = California Special Concern Species as designated by the Department of Fish and Game due to declining population levels, limited ranges, and/or continuing threats that have made the species vulnerable to extinction

CNPS2 = California Native Plant Society listings from its January 2000 edition of *Inventory of Rare and Endangered Vascular Plants of California*. List 2 (CNPS2) indicates that plants are rare, threatened, or endangered in California, but are common elsewhere (Skinner and Pavlik, 1994).

CNPS1A = Plant presumed extinct in California by the California Native Plant Society

CNPS1B = Plants considered rare, threatened, or endangered in California and elsewhere by the California Native Plant Society

The State CEQA Guidelines recommend the consideration of six questions when assessing the potential for significant impacts on biological resources. This section briefly describes the supporting documentation for the answers to the questions related to biological resources in Section 2.0, Environmental Checklist, of this Initial Study.

- a) *Would the proposed project have a substantial adverse effect, either directly or through habitat modifications, on any species identified as a candidate, sensitive, or special status species in local or regional plans, policies, or regulations, or by the California Department of Fish and Game or U.S. Fish and Wildlife Service?*

Implementation of the proposed project is not expected to result in potentially significant impacts on any species identified as candidate, sensitive, or special status species as defined by the CDFG and the U.S. Fish and Wildlife Service (USFWS). The proposed project site, consisting of 54-acres, is completely developed and contains multiple buildings—two licensed hospitals and related facilities and infrastructure including parking lots. A query of the CNDDDB identified five listed plant species, nine listed wildlife species, 17 sensitive plant species, and eight sensitive wildlife species that have a potential to occur in the surrounding area of the proposed project. However, none of the habitat requirements (sandy beaches, coastal salt marsh, coastal sage scrub, wetland or upland habitats) of the listed and sensitive species with the potential to occur are found within the proposed project site. Further analysis is not warranted.

- b) *Would the proposed project have a substantial adverse effect on any riparian habitat or other sensitive natural community identified in local or regional plans, policies, regulations or by the California Department of Fish and Game or US Fish and Wildlife Service?*

Implementation of the proposed project is not expected to result in potentially significant impacts to riparian habitat and sensitive natural communities identified by the CDFG and the USFWS. The CNDDDB search identified four potential sensitive plant communities that may occur within the Greater Long Beach area: Southern Coastal Bluff Scrub, Southern Coastal Salt Marsh, Southern Dune Scrub, and Southern Foredunes. The USGS 7.5-minute series Long Beach topographic quadrangle as well as an aerial photo of the site (provided by Taylor and Associates) was reviewed to assess the potential presence of riparian or sensitive natural communities. The results of the map analysis were confirmed via photos from site visits. The proposed project site contains no such features and or sensitive plant communities as the site is completely developed. No further analysis is warranted.

- c) *Would the proposed project have a substantial adverse effect on federally protected wetlands as defined by Section 404 of the Clean Water Act (including, but not limited to, marsh, vernal pool, coastal, etc.) through direct removal, filling, hydrological interruption, or other means?*

Implementation of the proposed project is not expected to result in potentially significant adverse effects on federally protected wetlands. The USGS 7.5-minute series Long Beach topographic quadrangle, an aerial photo of the site (provided by Taylor and Associates), and the USFWS National Wetlands Inventory for Long Beach were reviewed to assess the presence or the potential presence of federally protected wetlands. No federally protected wetlands are present within the proposed project site. No further analysis is warranted.

- d) *Would the proposed project interfere substantially with the movement of any native resident or migratory fish or wildlife species or with established native resident or migratory wildlife corridors, or impede the use of native wildlife nursery sites?*

Implementation of the proposed project is not expected to result in significant impacts on the movement of native migratory fish and wildlife species that are using established native migratory wildlife corridors or native wildlife nursery sites. The proposed project site consists of two licensed hospitals and related development and is bordered to the north, east, south, and west by development, including buildings, parking lots, streets, and oil extraction activities. Based on an evaluation of aerial photos and photos from site visits, there are no open spaces, water bodies, or stream courses on the site or immediately adjacent to the site that would facilitate movement of migratory fish or wildlife. No further analysis is warranted.

- e) *Would the proposed project conflict with any local policies or ordinances protecting biological resources, such as a tree preservation policy or ordinance?*

The proposed project is located on land within the incorporated City of Long Beach. Mature oak trees are afforded some level of consideration and protection pursuant to the County of Los Angeles Oak Tree Ordinance; however, the ordinance only pertains to unincorporated lands of the County of Los Angeles. Currently, the City of Long Beach does not have any tree preservation policy or ordinance in place, other than ordinances affecting trees along public

streets and right-of-ways and trees that may be within historic districts.¹ The proposed project site is not within a historic area. Therefore, implementation of the proposed project is not expected to result in potentially significant impacts on any of the City of Long Beach Municipal Codes. No further analysis is warranted.

- f) *Would the proposed project conflict with the provisions of an adopted Habitat Conservation Plan, Natural Community Conservation Plan, or other approved local, regional, or state habitat conservation plan?*

Implementation of the proposed project would not conflict with any Habitat Conservation Plan (HCP) or Natural Community Conservation Plan (NCCP). Based on coordination undertaken with the Carlsbad Field Office of the USFWS on July 6, 2004, there are no adopted or proposed HCP that include or are adjacent to the proposed project site.² Neither the County of Los Angeles nor the City of Long Beach are currently enrolled or have future plans to be enrolled in an NCCP program.³ Therefore, implementation of the proposed project would not result in potentially significant impacts on any HCP or NCCP. No further analysis is warranted.

¹ City of Long Beach. Long Beach Municipal Code. Available at: <http://cms.longbeach.gov/cityclerk/lbmc/lbmcintro.htm>. (Last accessed 12 July 2004).

² Mike Bianchi, *Personal Communication*, 6 July 2004. U.S. Fish and Wildlife Service – Carlsbad Office.

³ Charles Raysbrook, *Personal Communication*, 7 July 2004. California Department of Fish and Game – San Diego Office.

3.05 CULTURAL RESOURCES

This analysis is undertaken by the City of Long Beach to determine if the proposed Long Beach Memorial Medical Center Expansion (proposed project) may have a significant impact on cultural resources in accordance with Section 15063 of the State of California Environmental Quality Act (CEQA) Guidelines (California Code of Regulations, Title 14, Division 6, Chapter 3, Sections 15000–15387, Appendix G). Cultural resources at the proposed project site were evaluated based on a records search undertaken at the South Central Coastal Information Center, the Natural History Museum of Los Angeles County, and the Native American Heritage Commission for the U.S. Geological Survey (USGS) 7.5-minute series topographic Long Beach quadrangle (township 4 south, no range shown).¹ Both published and unpublished literature was reviewed.

The State CEQA Guidelines recommend the consideration of four questions when addressing the potential for significant impacts to cultural resources. This section briefly describes the rationale for the answers to the questions related to cultural resources in Section 2.0, Environmental Checklist, of this Initial Study.

- (a) *Would the proposed project directly or indirectly destroy a unique paleontological resource or unique geologic feature?*

The proposed project would not be expected to result in impacts to cultural resources related directly or indirectly to the destruction of a unique paleontological resource or unique geologic feature. A USGS geologic map for the City of Long Beach was reviewed to assess the presence of paleontological resources within the vicinity of the proposed project site.² In addition, a paleontological records search was conducted for the proposed project site by the Natural History Museum of Los Angeles County.³ Results of this review indicated that bedrock under the proposed project site is made up of Quaternary (recent) Alluvium and Quaternary (Pleistocene) nonmarine terrace deposits. Beneath the soil and thin veneer of Quaternary Alluvium, the entire proposed project area contains surficial deposits of older Quaternary terrace deposits, which is primarily terrestrial but also containing some marine components. Although vertebrate fossils have not previously been identified within the boundary of the proposed project site, fossil vertebrate localities have been identified near the proposed project site, which were extracted from the same sedimentary deposits that occur in the proposed project area. The closest vertebrate fossil locality from these deposits is identified as LACM 1022, which was identified directly east of the northern boundary of the proposed project area near the intersection of Spring Street and Orange Avenue. LACM-1022 produced fossil specimens belonging to avian species.

Additional fossil localities, LACM-1021 and LACM-3245, were identified east of the proposed project site along Spring Street at the intersection of Cherry Avenue. LACM-1021 produced a fossil specimen of mammoth (*Mammuthus*); LACM-3245 was recovered from a depth of 37 feet and produced an extensive fossil fish fauna that was published in scientific literature by J.E. Fitch and R.D. Reimer in 1967.

¹ U.S. Geological Survey, Photorevised 1981. *Long Beach Quadrangle, Los Angeles County, California*. (7.5-minute series topographic map.) Contact: USGS National Center, 12201 Sunrise Valley Drive, Reston, VA 20192.

² U.S. Geological Survey, Photorevised 1992. *Geologic Map of California, Olaf P. Jenkins Edition: Long Beach Sheet*. Capitol Heights, MD: Williams & Heintz Map Corporation.

³ Samuel McLeod, PhD, *Personal Communication*, 8 July 2004. Natural History Museum of Los Angeles County, 900 Exposition Boulevard, Los Angeles, CA 90007.

The maximum depths of excavation for the proposed project are associated with excavation that would be undertaken during Phase I of the Miller Children's Hospital pediatric inpatient tower. Surface grades at this location are approximately 44 feet above mean sea level. There is an existing parking structure at this location with a lower surface elevation of 32 feet above mean sea level. It is anticipated that an additional 27 feet of excavation, to a depth of 5 feet above mean sea level, would be undertaken for the proposed project.

Excavations within all areas of the project site are anticipated to encounter significant terrestrial vertebrate fossils as well as marine vertebrates. Therefore excavation in the proposed project area would require close monitoring to quickly and professionally recover any fossil remains discovered, while not impeding development. Since fossil specimens from the marine deposits in this area are usually small in size, it is recommended that samples be collected and processed to determine the small fossil potential in the proposed project area. Any fossils collected should be placed in an accredited scientific institution for the benefit of current and future generations.

- (b) *Would the proposed project cause a substantial adverse change in the significance of an archaeological resource pursuant to §15064.5 of the State CEQA Guidelines?*

The proposed project would not be expected to result in impacts to cultural resources related to a substantial adverse change in the significance of an archaeological resource. A literature review was undertaken at the South Central Coastal Information Center for the proposed project site on July 7, 2004, by Sapphos Environmental, Inc. One known archaeological site was recorded within a 0.25-mile radius of the proposed project site.⁴ However, an update of this archaeological site indicated that the site had been destroyed. The proposed project site has not been surveyed for historic or prehistoric resources. Therefore, due to the unknown presence of native soils on the proposed project site, an assessment of the proposed project area's exposed soils would need to be conducted after removal of existing facilities to determine the presence of cultural resources on the proposed project site. This would facilitate the determination needed to assess the potential for archaeological resources that may exist below the existing facilities. The unknown potential for archaeological resources to be present in native soils warrants the consideration of mitigation measures.

- (c) *Would the proposed project cause a substantial adverse change in the significance of a historical resource as defined in §15064.5 of the State CEQA Guidelines?*

Long Beach Memorial Medical Center's roots lay in the founding of a beachside first-aid station in 1922. Today, Long Beach Memorial Medical Center is a 203-bed community teaching hospital, as well as a 200-bed sub-acute and skilled nursing facility.

The proposed project site and the buildings and structures within the proposed project site are not listed on the National Register of Historic Places, California Register of Historical Resources, California State Landmarks, or Local Landmarks. Several properties within a 0.25-mile radius of the proposed project site were surveyed as historic structures. These structures have an original construction date ranging between 1901 and 1933 and are entirely located outside the property and not owned by the Long Beach Memorial Medical

⁴ G. Fenenga, 1971. *Archaeological Site Survey Record: LAN-839*. Contact: South Central Coastal Information Center, 800 North State College Boulevard, Fullerton, CA 92834-6846.

Center. All work for the proposed project would be completed within the footprint of properties owned by the Long Beach Memorial Medical Center. At a minimum, the Long Beach Memorial Medical Center campus is separated from private properties by a four-lane roadway: Spring Street to the north, Atlantic Avenue to the east, Willow Street to the south, and Long Beach Boulevard to the west. Therefore, neither these structures nor their setting would be adversely affected as a result of the proposed project.

- (d) *Would the proposed project disturb any human remains, including those interred outside of formal cemeteries?*

The proposed project would not be expected to disturb any human remains, including those interred outside of formal cemeteries. The Native American Heritage Commission has been contacted and a sacred sites records check was conducted to ascertain the potential impact of the proposed project on Native American human remains. The search failed to result in the known presence of Native American human remains.⁵ A review of the Long Beach USGS 7.5-minute series topographic quadrangle was performed, which indicated the presence of two formal cemeteries located within a 0.25-mile radius of the proposed project site.⁶ These cemeteries are identified as Forest Lawn / Sunnyside Cemetery and Veterans Memorial Park. These cemeteries are not located within or adjacent to the proposed project site; therefore, there would be no anticipated impacts to human remains, including those interred outside of formal cemeteries.

In the unanticipated event that human remains would be encountered during subsurface excavations, all work in the area would be required to cease until the Los Angeles County Coroner is contacted. It is the responsibility of the County Coroner to determine whether the remains are Native American in origin. If the remains are found to be of Native American origin, the Native American Heritage Commission and most likely descendents shall be contacted and recommendations for recovery would be required to be developed. If the remains are found not to be of Native American origin, or the deceased is of recent demise, the remains shall be taken into the possession of the Los Angeles County Coroner for further examination. The unanticipated potential to encounter human remains warrants the consideration of mitigation measures.

⁵ Rob Wood, *Personal Communication*, 7 July 2004. Native American Heritage Commission, 915 Capitol Mall, Room 364, Sacramento, CA 95814.

⁶ U.S. Geological Survey, Photorevised 1981. *Long Beach Quadrangle, Los Angeles County, California*. (7.5-minute series topographic map.) Contact: USGS National Center, 12201 Sunrise Valley Drive, Reston, VA 20192.

3.06 GEOLOGY AND SOILS

This analysis is undertaken by the City of Long Beach to determine if the proposed Long Beach Memorial Medical Center Expansion (proposed project) may have a significant impact from geology and soils in accordance with Section 15063 of the State of California Environmental Quality Act (CEQA) Guidelines (California Code of Regulations, Title 14, Division 6, Chapter 3, Sections 15000–15387, Appendix G). The assessment of geology and soils considers all phases of the project planning, implementation, and operation in addressing the environmental checklist form. The conclusions rely on expert opinion supported by facts, published maps,^{1,2,3} technical studies, and the County of Los Angeles General Plan Safety element.⁴ Information obtained from these sources address whether the proposed project would result in potential environmental impacts for the technical areas discussed below. Technical analysis for this section of the Initial Study was completed by SCS Engineers.

This section briefly describes the supporting documentation for the answers to the questions related to geology and soils in Section 2.0, Environmental Checklist, of this Initial Study.

- (a) *Would the proposed project expose people or structures to potential, substantial adverse effects, including the risk of loss, injury, or death involving:*
- (i) *Rupture of a known earthquake fault, as delineated on the most recent Alquist-Priolo Earthquake Fault Zoning (APEFZ) Map issued by the State Geologist for the area or based on other substantial evidence of a known fault?*

The proposed project area is not crossed by any known APEFZ faults. No active faults are known to cross the proposed project area. No potentially active faults are known to cross the proposed project area. Although the Cherry-Hill segment of the Newport-Inglewood fault is located within approximately 1,000 feet of portions of the proposed project site, it appears that the surface expression of the fault is at a sufficient distance so that ground rupture is not significantly likely. Potential impacts associated with surface rupture are not anticipated at the proposed project site. Therefore, implementation of the proposed project should have no potentially adverse effect related to a rupture of a known or suspected earthquake fault. Further detailed analysis is not warranted.

- (ii) *Strong seismic ground shaking?*

The proposed project is located in an area that is susceptible to strong ground shaking from severe earthquakes. Earthquakes on faults, such as the nearby Newport-Inglewood fault (capable of 7.1 magnitude), can generate seismic shaking. There are also a number of other active and potentially active faults within 60 miles

¹ California Geological Survey, Revised 1999. "Fault-Rupture Hazard Zones in California." *Special Publication 42*. Contact: Office of the State Geologist, 801 K Street, MS 12-30, Sacramento, CA 95814.

² California Geological Survey, 1999. *Seismic Shaking Hazard Maps of California*. Map Sheet 48. Contact: Office of the State Geologist, 801 K Street, MS 12-30, Sacramento, CA 95814.

³ U.S. Geological Survey, 1989. *Map Showing Late Quaternary Faults and 1978–84 Seismicity of the Los Angeles Region, California*. Contact: USGS National Center, 12201 Sunrise Valley Drive, Reston, VA 20192.

⁴ County of Los Angeles, Department of Regional Planning, 1990. *General Plan, Safety Element*. Contact: Department of Regional Planning, Hall of Records, 13th Floor, 320 West Temple Street, Los Angeles, CA 90012.

of the site, any of which could cause significant ground shaking at the site. The faults present a risk of very strong ground shaking that must be considered for facilities where public safety and post-earthquake function are necessary. Implementation of the proposed project could expose people and structures to strong seismic ground shaking, which represent a potentially significant adverse impact unless mitigation is incorporated. Further analysis is warranted.

(iii) *Seismic-related ground failure, including liquefaction?*

Approximately 10 to 15 percent of the proposed project site overlies an area potentially susceptible to liquefaction, as indicated on the California State Seismic Hazard Maps. A portion of the site, extending from near the intersection of Columbia Street and Atlantic Avenue in the northeast to the intersection of Patterson Avenue and Long Beach Boulevard on the west, is susceptible to liquefaction. This area is the former location of a ravine crossing the area that was filled with unclassified fill soil prior to construction of the present hospital buildings. Much of this unsuitable material has subsequently been removed and replaced with compacted engineered fill, and all the unclassified fill that underlies buildings that are to be constructed as part of the proposed project would also be removed and replaced. Most common effects of liquefaction are ground settlement and cracking, sinking and/or tilting of heavy surface structures, buoyancy of some buried structures (e.g., pipelines, tanks), and shallow lateral spread landslides near drainages with exposed "free faces" (e.g., flood control channels, stream banks). Where liquefaction does not occur, soils may be subject to seismic settlement from densification during severe shaking. Notwithstanding the proposed mitigation measures, further analysis is warranted.

(iv) *Landslides?*

Due to the absence of steep slopes at the proposed project site, the County of Los Angeles Safety element indicates that no nearby areas are subject to landslides. No areas susceptible to seismic-induced landsliding are shown in the proposed project vicinity of the California Geological Survey map. Landslides are not considered to be a potential hazard at the site and, therefore, would not affect any proposed project components. Further analysis is not warranted.

(b) *Would the proposed project cause substantial soil erosion or the loss of topsoil?*

The materials most susceptible to erosion are artificial fill, natural soil, and younger alluvium, all of which exist at the surface of the site. Most susceptible areas are typically steeper slopes and along drainage courses. Due to the relatively flat nature of the proposed project area, major site erosion is not anticipated. The largest threat from erosion is uncontrolled drainage, especially during construction. Proposed project components could be susceptible to promoting erosion during site grading, earth moving, and construction activities. Each proposed project component and the overall site must be addressed for drainage and erosion, in accordance with building code requirements and storm water best management practices, relative to potential on-site and off-site effects. These impacts should be less than significant provided that the codes and storm water practices are incorporated into the proposed project's design and construction. Therefore,

implementation of the proposed project should not have an adverse effect on soil erosion. Further analysis is not warranted.

- (c) *Would the proposed project be located on a geologic unit or soil that is unstable, or that would become unstable as a result of the proposed project, and potentially result in on- or off-site landslide, lateral spreading, subsidence, liquefaction or collapse?*

Liquefaction is discussed in question a-iii above. Subsidence hazard is found in areas with active groundwater or petroleum production. No water production well fields large enough to overdraft aquifers are known to exist in the vicinity of the site. Petroleum activity is present in the area northeast of the proposed project site, but current production volumes in this old field area are relatively small, and the fluids removed are replaced by injected water, thereby greatly reducing the likelihood of subsidence. Collapsible soils, including organic-rich peat deposits may exist, but are not mapped on a regional basis. The other hazards listed are discussed in earlier subsections. In accordance with building code requirements, geotechnical studies must be conducted for each proposed project component to evaluate potentially unstable soils relative to on-site and off-site effects. Therefore, implementation of the proposed project should not cause a potentially adverse effect provided that applicable building code requirements are incorporated into proposed project design and construction. Further analysis is not warranted.

- (d) *Would the proposed project be located on expansive soil, as defined in Table 18-1-B of the Uniform Building Code of 1994, creating substantial risks to life or property?*

Expansive soils have relatively high clay mineral content and are usually found in areas where underlying formations contain an abundance of clay minerals or where coarse-grained materials are weathered and break down into clay-rich materials. Although there is some clay in the natural soils in the proposed project area, the soil is primarily silt and silty sand. The Leroy Crandall and Associates report⁵ indicates that the clay soils are somewhat expansive. A number of other geotechnical studies have been conducted in the proposed project area over the past 30 years. The large volume of soils data gathered has produced a wealth of knowledge that will be used in the foundation design. Additional geotechnical studies will be conducted if they are needed for certain proposed project components. All expansive soil that could potentially negatively affect buildings or other proposed project components would be removed and replaced with properly engineered fill soil. For these reasons, further analysis is not warranted.

- (e) *Are the soils at the proposed project site incapable of adequately supporting the use of septic tanks or alternative waste water disposal systems where sewers are not available for the disposal of waste water?*

Sewers are available for wastewater disposal from proposed project components. The proposed project will not use septic tanks or alternative wastewater disposal systems. Therefore, no impacts related to this issue are associated with the proposed project. Further analysis is not warranted.

⁵ Leroy Crandall and Associates, 10 April 1969. *Report of Foundation Investigation, Proposed Hospital Addition and Parking Structure.*

3.07 HAZARDS AND HAZARDOUS MATERIALS

This analysis is undertaken by the City of Long Beach to determine if the proposed Long Beach Memorial Medical Center Expansion (proposed project) may have a significant impact on hazards or hazardous materials in accordance with Section 15063 of the State of California Environmental Quality Act (CEQA) Guidelines (California Code of Regulations, Title 14, Division 6, Chapter 3, Sections 15000–15387, Appendix G). The assessment of hazards and hazardous materials considers all phases of the project planning, implementation, and operation in addressing the environmental checklist form recommended in the State CEQA Guidelines. The conclusions rely on expert opinion supported by facts, technical studies,^{1,2} site reconnaissance, and additional on-site investigations. Collectively, these materials were used as the basis for evaluating whether the proposed project exposes people or property to risks from hazards or hazardous materials.

This section briefly describes the supporting documentation for the answers to the questions related to hazards and hazardous materials in Section 2.0, Environmental Checklist, of this Initial Study.

- (a) *Would the proposed project create a significant hazard to the public or the environment through the routine transport, use, or disposal of hazardous materials?*

Due to the medical uses of buildings in the proposed project, hazardous, biomedical, and radiological wastes would be produced and disposed in off-site disposal facilities. Medical wastes would include, but not be limited to, soiled or blood-soaked bandages, culture dishes and other glassware, discarded surgical gloves, discarded surgical instruments (scalpels, needles), cultures, stocks, swabs, removed body organs (tonsils, appendices, limbs, etc.), and lancets. The wastes produced by hospital facilities are subject to both federal and state waste hauling regulations, and as such, the use and disposal of these materials is proposed to have a less than significant impact with appropriate mitigation measures on the environment. Further analysis is warranted.

In addition, the proposed project would involve the excavation and disposal of contaminated soils and possible building materials (asbestos and lead-based paint). An asbestos and lead sampling survey would be conducted prior to demolition activities at the site, and the material would be disposed accordingly. In addition, the excavation of contaminated soils associated with both the Miller Children's Hospital (MCH) and the Todd Cancer Institute (TCI) projects would result in the off-site disposal of contaminated soils and possibly groundwater impacted by petroleum hydrocarbons. However, with appropriate mitigation measures, the petroleum-impacted soils and water disposed off site from the proposed project are not anticipated to result in the release of significant hazards to the public or environment. Further analysis is warranted to determine the extent of the potential impact and the necessary mitigation measures.

¹ Signal Geoscience, 24 March 2001. Phase I Environmental Site Assessment Report, 300 East Spring Street, Long Beach, California. Prepared for: Long Beach Memorial Medical Center, 2801 Atlantic Avenue, Long Beach, California. Prepared by: Signal Geoscience, 3125 South Maddock Street, Santa Ana, CA 92704.

² SCS Engineers, May 2004. Environmental Summary Report, Long Beach Memorial Medical Center Expansion Area, Long Beach, California. Prepared for: Long Beach Memorial Medical Center, 2801 Atlantic Avenue, Long Beach, CA 90801. Prepared by: SCS Engineers, 3711 Long Beach Boulevard, Ninth Floor, Long Beach, CA 90807.

- (b) *Would the proposed project create a significant hazard to the public or the environment through reasonably foreseeable upset and accident conditions involving the release of hazardous materials into the environment?*

Construction and operation of the proposed project is not anticipated to result in the release of hazardous materials into the environment. However, hazardous materials may be disposed off site on a frequent basis during normal operations of both the MCH and TCI facilities. The nature of off-site disposal of hazardous, biomedical, and possibly radiological wastes involves the potential for accidental releases. However, with appropriate mitigation measures, the amount and nature of wastes disposed off site from the proposed project are not anticipated to result in the release of significant hazards to the public or environment. Further analysis is warranted.

- (c) *Would the proposed project emit hazardous emissions or handle hazardous or acutely hazardous materials, substances, or waste within 0.25 mile of an existing or proposed school?*

No schools are located within 0.25 mile of the proposed project. However, the off-site transport and disposal routes for biomedical, radiological, hazardous, and nonhazardous wastes have not been determined. Therefore, the potential for handling (i.e., transporting) hazardous materials within 0.25 mile of a school is not currently known. Further analysis is warranted.

- (d) *Would the proposed project be located on a site that is included on a list of hazardous materials sites compiled pursuant to Government Code Section 65962.5 and, as a result, would it create a significant hazard to the public or the environment?*

According to a recent Phase I Site Assessment Report,³ a portion of the proposed project is located on land formerly occupied by underground storage tanks (USTs) as indicated on the Regional Water Quality Control Board Leaking Underground Storage Tank (LUST) listing. In addition, both the MCH and TCI buildings are located above former oil wells as identified by the California Department of Conservation, Division of Oil, Gas, and Geothermal Resources. Incorporation of appropriate mitigation measures during excavation of soils associated with the proposed project would be necessary to avoid hazards to the public or the environment. Further analysis is warranted.

- (e) *For a proposed project located within an airport land use plan or, where such a plan has not been adopted, within 2 miles of a public airport or public use airport, would the proposed project result in a safety hazard for people residing or working in the proposed project area?*

The proposed project is not located within an adopted airport land use plan, although it is located approximately 1 mile west of the Long Beach Airport. Because the proposed project involves the construction of an 84-foot-high building, the construction of the proposed project may involve the use of cranes associated with building construction. The height of these construction cranes may affect the flight path and altitude of air traffic in the vicinity of the Long Beach Airport. Therefore, further analysis is warranted.

³ Signal Geoscience, 24 March 2001. Phase I Environmental Site Assessment Report, 300 East Spring Street, Long Beach, California. Prepared for: Long Beach Memorial Medical Center, 2801 Atlantic Avenue, Long Beach, California. Prepared by: Signal Geoscience, 3125 South Maddock Street, Santa Ana, CA 92704.

- (f) *For a proposed project within the vicinity of a private airstrip, would the proposed project result in a safety hazard for people residing or working in the project area?*

The proposed project is not located in the vicinity of a private airstrip. The nearest private airport is the Los Altos Airport, located approximately 5 miles east of the proposed project. Therefore, the proposed project would not expose people working in the proposed project area to a safety hazard. Further analysis is not warranted.

- (g) *Would the proposed project impair implementation of, or physically interfere with, an adopted emergency response plan or emergency evacuation plan?*

The proposed project includes the demolition of the parking structure located adjacent to the MCH facility. Currently, a short-term emergency water supply is located in this parking structure. The construction of the MCH expansion facility would also affect existing evacuation routes for personnel from the southern and eastern wings of the current MCH facility.

In addition, the roadway realignment associated the proposed project would temporarily affect emergency response vehicle routing as well as the evacuation routes from the main hospital facility and MCH. Therefore, the proposed project would impact emergency response or emergency evacuation plans; however, mitigation measures such as a revision of the current plans could reduce the impact to a less than significant level. Further analysis is warranted to demonstrate that the implementation of the proposed project can be accommodated with revisions to emergency response and evacuation plans.

- (h) *Would the proposed project expose people or structures to a significant risk of loss, injury, or death involving wildland fires, including where wildlands are adjacent to urbanized areas or where residences are intermixed with wildlands?*

The proposed project is located entirely in a developed urban area. Therefore, the proposed project would not expose people or property to wildland fire hazards. Further analysis is not warranted.

3.08 HYDROLOGY AND WATER QUALITY

This analysis is undertaken by the City of Long Beach to determine if the proposed Long Beach Memorial Medical Center Expansion (proposed project) may have a significant impact on hydrology and water quality in accordance with Section 15063 of the State of California Environmental Quality Act (CEQA) Guidelines (California Code of Regulations, Title 14, Division 6, Chapter 3, Sections 15000–15387, Appendix G). The conclusions rely on information contained in the CEQA Statute and State CEQA Guidelines, the County of Los Angeles Department of Public Works Hydrology Manual,¹ the National Pollutant Discharge Elimination System (NPDES) municipal permit requirements as regulated by the Los Angeles Regional Section of the State Water Resources Control Board (SWRCB), the California Storm Water Best Management Practice Handbook for Construction Activity,² the City of Long Beach Storm Water Management Plan,³ and the Environmental Summary Report for the Long Beach Memorial Medical Center Expansion Area.⁴

The State CEQA Guidelines recommend the consideration of 10 questions when addressing the potential for significant impacts to hydrology and water quality. This section briefly describes the rationale for the answers to the questions related to hydrology and water quality in Section 2.0, Environmental Checklist, of this Initial Study.

- (a) *Would the proposed project violate any water quality standards or waste discharge requirements?*

Implementation of the proposed project would not pose significant impacts to water quality standards or waste discharge requirements requiring the considerations of mitigation measures.

The municipal storm water NPDES permit issued to the County of Los Angeles by the California Regional Water Quality Control Board (RWQCB), Los Angeles Region, in 1996 requires the development and implementation of a program addressing storm water pollution issues in development planning for private projects. As part of the NPDES permit, the Storm Water Management Program in the City of Long Beach requires new developments to meet the permit requirements through best management practices (BMPs) to reduce or eliminate nonstorm discharges to the storm water system. These requirements meet the water quality standards as set forth by the responsible agencies and address storm runoff quantity and flow rate, suspended solids (primarily from erosion), and contaminants such as phosphorus (primarily from landscaping) and hydrocarbons (primarily from automobiles).

The proposed project would not be anticipated to have an adverse effect on storm water runoff after incorporation of BMPs. The proposed structures and surrounding area feature a nearly 100-percent impervious surface, thereby increasing (or maintaining) the current

¹ County of Los Angeles, Department of Public Works, 1991. *Hydrology Manual*. Available at: <http://ladpw.org/wrd/publication/engineering/online/Contents/hydman.pdf>

² California Stormwater Quality Association, 1993. *California Storm Water Best Management Practice Handbook*. Available at: <http://www.cabmphandbooks.com>

³ City of Long Beach, 2004. *Long Beach Stormwater Management Plan*. Available at: <http://www.lbstormwater.org/plan>

⁴ SCS Engineers, May 2004. *Environmental Summary Report, Long Beach Memorial Medical Center Expansion Area, Long Beach, California*. Prepared for: Long Beach Memorial Medical Center, 2801 Atlantic Avenue, Long Beach, CA 90801. Prepared by: SCS Engineers, 3711 Long Beach Boulevard, Ninth Floor, Long Beach, CA 90807.

infiltration rate of storm water and attenuating the peak discharge rate of the site to the surrounding environment. In addition, through the proper design of landscape features and site grading, as well as implementation of structural BMPs, the site would have the potential to effectively treat the runoff to a higher quality than that currently discharged. Further analysis of the proposed structural and mechanical BMPs as they relate to the impact on storm water runoff in both volume and quality as the proposed project moves forward in the design phase is warranted.

- (b) *Would the proposed project substantially deplete groundwater supplies or interfere substantially with groundwater recharge such that there would be a net deficit in aquifer volume or a lowering of the local groundwater table level (e.g., the production rate of preexisting nearby wells would drop to a level that would not support existing land uses or planned uses for which permits have been granted)?*

The proposed project site is located within the area regulated by Los Angeles Region (4) of the California RWQCB.⁵ Potable water supplies would be provided by the City of Long Beach. No wells are proposed for groundwater extraction. Irrigation of landscape areas required to treat proposed project elements would fully utilize existing available supplies of reclaimed water. Therefore, the proposed project would not be expected to result in significant impacts to groundwater supplies and no future analysis of groundwater supplies is warranted.

The proposed project would not deplete groundwater supplies or interfere substantially with groundwater recharge. The proposed project is not located on, or adjacent to, an existing recharge facility for a groundwater basin.^{6,7} The proposed project would not include the construction of groundwater extraction wells, and it would not alter the amount or extent of existing impervious surfaces. The current site is nearly impervious to rainfall entering the groundwater aquifer. Proposed site improvements would neither change the pervious areas nor affect the infiltration to the groundwater aquifer. Therefore, there would be no anticipated impact on groundwater supplies due to interference with groundwater recharge. Further analysis of groundwater supplies or groundwater recharge is not warranted.

- (c) *Would the proposed project substantially alter the existing drainage pattern of the site or area, including through the alteration of the course of a stream or river, in a manner that would result in substantial erosion or siltation on or off site?*

It is anticipated that the proposed project would be engineered in a manner that would avoid substantial alterations to the existing drainage pattern of the Long Beach Memorial Medical Center campus (Campus) and would incorporate BMPs consistent with the requirements of the City of Long Beach Storm Water Management Plan. The proposed

⁵ California Regional Water Quality Control Board, Los Angeles Region, 1994. *Water Quality Control Plan, Los Angeles Region, Basin Plan for the Coastal Watersheds of Los Angeles and Ventura Counties*. Contact: California Regional Water Quality Control Board, Los Angeles Region, 101 Centre Plaza Drive, Monterey Park, CA 91754.

⁶ Metropolitan Water District of Southern California, 1990. *The Regional Urban Water Management Plan for the Metropolitan Water District of Southern California*. Contact: Metropolitan Water District of Southern California, 700 North Alameda Street, Los Angeles, CA 90012.

⁷ Metropolitan Water District of Southern California, 2000. *The Regional Urban Water Management Plan for the Metropolitan Water District of Southern California*. Contact: Metropolitan Water District of Southern California, 700 North Alameda Street, Los Angeles, CA 90012.

project involves grading activities, including cut and fill to approximately 16 acres within the 54-acre Campus. The effects of the proposed grading would need to be documented in a conceptual grading plan and drainage concept study and be evaluated by the County of Los Angeles Department of Public Works and the City of Long Beach Department of Public Works.

Currently, site drainage is directed to adjacent streets following the natural topography of the existing land. Street flow is directed to existing storm drains. The proposed project would be designed to maintain a similar pattern of drainage, thereby providing a less than significant change in the existing storm runoff. Grading for the proposed project would occur on site, but proposed improvements would inhibit or eliminate any effects or erosion of off-site surfaces. The drainage would continue to follow a similar pattern, with similar velocities and sediment transport potential, thereby making the proposed project's effect on off-site sedimentation and erosion less than significant. During construction and normal operation, the proposed project would be required to incorporate BMPs consistent with the guidelines provided in the California Storm Water Best Management Practices Handbook for Construction Activities and in the City of Long Beach Storm Water Management Plan for substantiated erosion or siltation. Further analysis is warranted.

A review of the USGS 7.5-minute series Long Beach, California, topographic quadrangle reveals that there are no extent streams or rivers located within the Campus.⁸ Therefore, the grading required for the proposed project elements would not alter the course of any stream or river.

- (d) *Would the proposed project substantially alter the existing drainage pattern of the site or area, including through the alteration of the course of a stream or river, or substantially increasing the rate or amount of surface runoff in a manner that would result in flooding on or off site?*

It is anticipated that the proposed project would be engineered in a manner that would avoid substantial alterations to the existing drainage pattern of the Campus. The proposed project involves grading activities, including cut and fill activities to approximately 16 acres within the 54-acre Campus. The effects of the proposed grading would need to be documented in a conceptual grading plan and drainage concept study and evaluated by the County of Los Angeles Department of Public Works and the City of Long Beach Department of Public Works. Implementation of the proposed project would not have a significant impact on the existing drainage pattern for the proposed project site or area, if engineered in a manner that maintains a similar pattern of drainage as the existing conditions. The hydrology of the proposed project site would not be altered to the point that an impact would occur on the time of concentration for storm water runoff; therefore, the peak flow rate of runoff would not deviate from existing conditions in a significant amount. In addition, the imperviousness of the surface would remain relatively the same, ensuring that infiltration would remain at current levels and that the overall volume of flow accumulating on or off site would not change from existing conditions. Further analysis is warranted to demonstrate that the existing drainage pattern can be engineered into the proposed project design.

⁸ U.S. Geological Survey, Photorevised 1981. *Long Beach Quadrangle, Los Angeles County, California*. (7.5-minute series topographic map.) Contact: USGS National Center, 12201 Sunrise Valley Drive, Reston, VA 20192.

- (e) *Would the proposed project create or contribute runoff water that would exceed the capacity of existing or planned storm water drainage systems or provide substantial additional sources of polluted runoff?*

Implementation of the proposed project would not have a significant impact on the capacity or pollution of existing drainage systems for the surrounding area. The regional storm drain system is sized in a manner to handle the storm water flows from surrounding areas, accounting for numerous acres of land area that feed into the local storm drain system. The proposed improvements do not carry a component that would otherwise increase storm water runoff beyond normal rainfall amounts, as it is in the existing condition. Further analysis of storm water facilities is not warranted.

- (f) *Would the proposed project otherwise substantially degrading water quality?*

Implementation of the proposed project would not have a significant impact on the water quality of the area. The site usage of medical facilities and parking lots does not deviate from the existing pattern of land uses. As stated above, incorporation of new BMPs would be capable of reducing the amount of polluted runoff from parking lots and landscaped areas, therefore making the runoff from the site less polluted than the existing condition. Further analysis identifying appropriate BMPs and demonstrating their effectiveness is warranted.

- (g) *Would the proposed project place housing within a 100-year flood hazard area as mapped on a federal Flood Hazard Boundary or Flood Insurance Rate Map or other flood hazard delineation map?*

Implementation of the proposed project would not result in significant impacts related to hazards from the placement of housing within the 100-year flood hazard area. The proposed project does not include the development of any housing, and it does not redirect flood flows to a residential area. Further analysis of flood hazards to residential areas is not warranted.

- (h) *Would the proposed project place within a 100-year flood hazard area structures that would impede or redirect flood flows?*

Implementation of the proposed project would not result in significant impacts related to hazards from impeding or redirecting flood flows because the proposed project area is not located within a flood zone.^{9,10} Further analysis is not warranted.

⁹ Federal Emergency Management Agency, 1996. "Compliant Metadata for Q3 Flood Data Coverage for Los Angeles, California." Contact: Federal Emergency Management Agency, 500 C Street, SW Washington, DC 20472.

¹⁰ City of Long Beach, Department of Planning and Building, July 1991. "Flood Hazards Areas Map" in *Land Use Element of the Long Beach General Plan*. Prepared by: City of Long Beach, Department of Planning and Building, City Hall, 333 West Ocean Boulevard, Long Beach, CA 90802.

- (i) *Would the proposed project expose people or structures to a significant risk of loss, injury, or death involving flooding, including flooding as a result of the failure of a levee or dam?*

The proposed project site is not located within the potential flood zone of any levees or dams. A review of the USGS 7.5-minute series Long Beach, California, topographic quadrangle indicates that the Los Angeles River, located approximately 1 mile west of the site, is the nearest flood control facility.¹¹ The Los Angeles River provides a 100-year level of protection to adjacent land use from a 100-year flood event. Therefore, the proposed project would not result in significant impacts from the exposure of people or structures to a risk of loss, injury, or death involving flooding. Further analysis is not warranted.

- (j) *Would the proposed project cause inundation by seiche, tsunami, or mudflow?*

Seiches and tsunamis are large water waves that result from ground shaking within a large body of water. Although ground shaking (earthquakes) are a possibility around the proposed project site, the site is located approximately 3.5 miles from the nearest large body of water, the Port of Long Beach. In addition, the topography of the proposed project site is relatively flat and not subject to mudflows, or large movements of soil and sediment during flooding. Therefore, implementation of the proposed project would not cause exposure to impacts from seiches, tsunamis, or mudflows. Further analysis of seiche, tsunami, and mudflow is not warranted.

¹¹ U.S. Geological Survey, Photorevised 1981. Long Beach Quadrangle, Los Angeles County, California. (7.5-minute series topographic map.) Contact: USGS National Center, 12201 Sunrise Valley Drive, Reston, VA 20192.

3.09 LAND USE AND PLANNING

This analysis is undertaken by the City of Long Beach to determine if the proposed Long Beach Memorial Medical Center Expansion (proposed project) may have a significant impact to land use and planning in accordance with Section 15063 of the State of California Environmental Quality Act (CEQA) Guidelines (California Code of Regulations, Title 14, Division 6, Chapter 3, Sections 15000–15387, Appendix G). Land use and planning at the proposed project site were evaluated in light of the published maps, adopted plans, goals, and policies of the City of Long Beach. Additional coordination was undertaken with the U.S. Fish and Wildlife Service and the California Department of Fish and Game with regard to the applicable proposed or adopted land use plans and regulations related to natural resources conservation.

The State CEQA Guidelines recommend the consideration of three questions when addressing the potential for significant impact to land use and planning:

- (a) *Would the proposed project physically divide an established community?*

The proposed project is not expected to result in impacts to land use and planning through the physical division of an established community. The proposed project is completely within the City of Long Beach Memorial Hospital Medical Center Activity Node as designated in its General Plan Land Use element.¹ The proposed project would be implemented within the existing 54-acre Long Beach Memorial Medical Center campus (Campus), and construction and demolition would solely involve developed parcels already owned or leased by the Long Beach Memorial Medical Center (LBMMC). Thus, the proposed project would be situated in a manner that is compatible with the existing community, and there are no expected impacts to land use and planning resulting in a physical division of an established community. Therefore, no further analysis is warranted.

- (b) *Would the proposed project conflict with any applicable land use plan, policy, or regulation of an agency with jurisdiction over the proposed project (including, but not limited to, the General Plan, Specific Plan, local coastal program, or zoning ordinance) adopted for the purpose of avoiding or mitigating an environmental effect?*

The proposed project is expected to result in less than significant impacts to land use and planning in relation to a conflict with adopted or proposed land use plans, policies, or regulations because the proposed project would entail a change to the existing zoning designations for the site, however, further analysis is recommended in the Environmental Impact Report (EIR). The proposed project site is owned by the LBMMC and falls within the primary land use jurisdiction of the City of Long Beach General Plan. The proposed project area is designated as Land Use Designation (LUD) No. 7 Mixed-Use District in the Land Use element of the City of Long Beach General Plan.² This district is intended for use in large, vital activity centers, such as medical facilities, which by their nature involve mixed uses. The present Campus is the heart of the General Plan Land Use element's Memorial Hospital

¹ City of Long Beach, Department of Planning and Building, July 1991. *Land Use Element of the Long Beach General Plan*. Prepared by: City of Long Beach, Department of Planning and Building, City Hall, 333 West Ocean Boulevard, Long Beach, CA 90802.

² City of Long Beach, Department of Planning and Building, July 1991. *General Plan Maps and Descriptions of Land Use Districts*. Prepared by: City of Long Beach, Department of Planning and Building, City Hall, 333 West Ocean Boulevard, Long Beach, CA 90802.

Medical Center Activity Node, and the newly proposed project structures would also be consistent with its prescription.

The proposed rezoning would not raise any conflicts with the purpose and intent or the objectives of LUD No. 7. According to the General Plan, the policy objectives of LUD No. 7 are as follows:

- Centers are now or will be regulated by areawide planned development plans and ordinances.
- Land use controls and design and development standards for these areas shall be contained in the planned development plans and ordinances for each area.
- Land is intended for use in large, vital activity centers, not in strips along major arterials.
- Combinations of land uses intended by this district are, for example, employment centers such as retail, offices, medical facilities, higher density residences, visitor-serving facilities, personal and professional services, or recreational facilities.
- Land is not intended for uses that may have a detrimental effect on the ambiance, environment, or social well-being of the area, such as industrial and manufacturing uses, warehousing activities, and outside storage.
- Residential densities will vary and be specified in the planned development ordinances for each district.

The Land Use element of the General Plan states, "Tall buildings in this center would be very appropriate from the urban design perspective, helping to enhance the importance of the area, and providing identification from the street and freeway networks."³

Approximately one-third of the Campus encompassing the proposed project site, located between 29th Street and 27th Street, is zoned Institutional (I) by the City of Long Beach. The principal permitted use of the Institutional designation is that of a public or institutional nature, including hospitals, medical centers, medical office complexes, convalescent hospitals, parking, schools, social service office of nonprofit organizations, and special group residences. The portions of the campus between 29th Street and Spring Street are zoned as Planning Development (PD) and Regional Highway (CHW) Districts. The PD District was established to allow flexible development plans to be prepared for areas of the City of Long Beach that may benefit from the formal recognition of unique or special land uses and the definitions of special design policies and standards not otherwise possible under conventional zoning district regulations. The CHW District is a commercial use district for mixed-scale commercial uses along major arterial streets and regional traffic corridors. The portions of the Campus between 27th Street and Willow Street are zoned as CHW and Community Automobile-Oriented (CCA)

³ City of Long Beach, Department of Planning and Building, July 1991. *Land Use Element of the Long Beach General Plan*. Prepared by: City of Long Beach, Department of Planning and Building, City Hall, 333 West Ocean Boulevard, Long Beach, CA 90802.

Districts.⁴ The CCA District permits retail and service uses for an entire community, including convenience and comparison shopping goods and associated services.

Within the wider Campus, the proposed project consists of a Master Plan of Land Uses that provides a conceptual framework for reorganization of the six existing land uses to accommodate the proposed project and anticipated future community needs for expansion of medical service facilities within the campus boundary: (1) inpatient medical facilities, (2) outpatient medical facilities, (3) mixed-use facilities (nonresidential), (4) utilities, (5) circulation, and (6) parking (Figure 1.09-1, *Proposed Master Plan of Land Uses*). The proposed land uses are all consistent with the existing LUD No. 7 Mixed-Use District in the General Plan land use designation, and would also be consistent with the Institutional zoning designation:

- The proposed project would be regulated by an areawide Master Plan and ordinances.
- Land use controls and design and development standards would be contained in the Master Plan and ordinances.
- The proposed project would expand on the existing large, vital activity center, which is laid out as a campus and not along Long Beach Boulevard or Atlantic Avenue as strip development.
- The proposed medical facilities are included in the list of combined land uses intended for this district.
- The proposed project would not introduce uses that may have a detrimental effect on the ambiance, environment, or social well-being of the area.
- Residential uses are not proposed at this time, and potential future densities could be specified in future Master Plan revisions and ordinances for the district.

It is anticipated that land owned by the LBMMC between 29th Street and Spring Street with the PD and CHW land use zoning designations would be rezoned to Institutional. Similarly, the land owned by the LBMMC between 27th Street and Willow Street with the CHW and CCA designations would also be rezoned to Institutional. These changes are not anticipated to cause any significant conflict with the General Plan's land use plans, policies, or regulations because they allow for the same uses as currently specified in LUD No. 7 and they anticipate the likely increased future demand for expansions in the capacity of the region's medical service facilities. Retention of the LUD No. 7 designation would provide some flexibility for future land uses that may further promote and contribute to a vital mixed-use complex centered on the medical facilities. Such future mixed uses could include a small hotel that serves visitors, on-site residential uses, and hospital-related indoor and outdoor food service facilities and cafes.

⁴ City of Long Beach, 1982. City of Long Beach Municipal Code (Ord. C-5831 § 1, 1982), Chapter 21. Available at: <http://www.longbeach.gov/apps/cityclerk/lbmc/title-21/frame.htm>

The proposed project could be accommodated through a General Plan amendment to LUD No. 10, Institutional and School District:

The land uses in the I District are characterized by the permanence of the built use, or the intentions for such use, once the location has been established for the proper citywide or subregional distribution of public services: City Civic Center, County and State regional office buildings, academic research institutes and headquarters, colleges, universities, major hospitals, cemeteries, public schools, and the like. Institutional uses serve basic public needs over a long period of time, enduring through changes in the surrounding socio-economic environment.⁵

With respect to the proposed project, the primary difference between LUD No. 7 Mixed-Use District and LUD No. 10 Institutional and School District is the permanence of the intended specific land use of the designated area. LUD No. 7 is intended to specify a vital core activity center whose specific land uses may vary over time, so long as they contribute to and do not detract from the social well-being of the mixed-use planned development. LUD No. 10 is intended to permanently designate an essential core public service that would endure over time, as opposed to a possible complete change in land uses over time within the LUD No. 7 designation.

The proposed project can be accommodated within the LUD No. 10 designation as it is clear that the medical facilities would remain over the long term to serve the vital medical needs of the community. Ancillary medical facility related uses, including small, food service courts; temporary housing for patients; and other hospital-related mixed uses could also be accommodated under this designation.

The proposed project site is also within the Central Long Beach Redevelopment Area, but it is not within the boundaries of its two critical redevelopment areas subsections. The proposed project is not subject to a redevelopment agency agreement, and a redevelopment agency site plan review is not required.^{6,7}

The City of Signal Hill, Atlantic and Spring neighborhood, borders the proposed project site along the east side of Atlantic Avenue, and the Land Use element of its General Plan is also consistent with the medical center expansion activities of the proposed project.⁸ The proposed project is in a State Enterprise Zone, which indicates that it is recognized as a socioeconomically challenged area and that the State of California offers economic incentives to businesses that locate within the zone; however, this does not affect land use at the proposed project site.

⁵ City of Long Beach, Department of Planning and Building, July 1991. *Land Use Element of the Long Beach General Plan*. Prepared by: City of Long Beach, Department of Planning and Building, City Hall, 333 West Ocean Boulevard, Long Beach, CA 90802.

⁶ City of Long Beach Redevelopment Agency. June 2003. *Redevelopment Agency Design Review*. 333 West Ocean Boulevard, 3rd Floor, Long Beach, CA 90802.

⁷ Angela Reynolds, *Personal Communication*, 25 June 2004. City of Long Beach, Department of Planning and Building, 333 West Ocean Boulevard, 3rd Floor, Long Beach, CA 90802.

⁸ City of Signal Hill, Community Development Department, 3 July 2001. *Land Use Element of the Signal Hill General Plan*. Contact: City of Signal Hill, Community Development Department, 2175 Cherry Avenue, Signal Hill, CA 90755. Available at: http://www.signal-hill.ca.us/community_development/general_plan.php

The proposed project is not located within the California Coastal Commission Coastal Zone and, therefore, does not fall under the jurisdiction of the California Coastal Commission or the local coastal plan. A review of a City of Long Beach geographic information system (GIS) aerial map of the site indicates that it is not subject to special restrictions, is not within a historical district, is not within a parking-impacted area, and is not subject to special fence-height restrictions. No zoning overlays exist for the site, and the only prescription indicated is a special setback requirement of 10 feet.⁹ The proposed project is consistent with the goals and policies of the City of Long Beach General Plan and only proposes a minor adjustment to the zoning classifications at the site; therefore, it is consistent with the goals and policies of the General Plan to develop the area for medical services and related uses.

Given the importance of the General Plan designation for the project area and the need to ensure vertical consistency between the General Plan designation and the proposed rezoning, the compatibility of the proposed zoning district with the existing project general plan land use designation LUD No. 7 Mixed-Use should be carried forward for further detailed analysis in the EIR.

- (c) *Would the proposed project conflict with any applicable Habitat Conservation Plan or Natural Community Conservation Plan?*

The proposed project is not expected to result in impacts to land use and planning in relation to a conflict with any applicable Habitat Conservation Plan (HCP) or Natural Community Conservation Plan (NCCP). The proposed project area is entirely urbanized and is not located in an area proposed or adopted as part of an HCP.¹⁰ The proposed project area is not located in an area proposed or adopted as part of an NCCP.¹¹ The proposed project area does not contain endangered or threatened species or sensitive or rare habitat, and it has not been designated as a wildlife corridor or migration route. Therefore, there are no expected impacts to land use and planning related to a conflict with any adopted HCP or NCCP and no further analysis is warranted.

⁹ City of Long Beach, Department of Planning and Building, 26 May 2004. *Map of 2801 Atlantic Avenue, AIN No. 7207010041*. (Geographic Information System.) Contact: City of Long Beach, Department of Planning and Building, 333 West Ocean Boulevard, Long Beach, CA 90802.

¹⁰ Christine Medak, *Personal Communication*, 30 June 2004. U.S. Fish and Wildlife Service, Ecological Services Office, 2730 Loker Avenue West, Carlsbad, CA.

¹¹ Donald Chadwick, *Personal Communication*, 30 June 2004. California Department of Fish and Game, South Coast Region Office, 4949 Viewridge Avenue, San Diego, CA 92123.

3.10 MINERAL RESOURCES

This analysis is undertaken by the City of Long Beach to determine if the proposed Long Beach Memorial Medical Center Expansion (proposed project) may have a significant impact on mineral resources in accordance with Section 15063 of the State of California Environmental Quality Act (CEQA) Guidelines (California Code of Regulations, Title 14, Division 6, Chapter 3, Sections 15000–15387, Appendix G). The assessment of mineral resources considers the Master Plan of Land Uses (providing a conceptual framework for reorganization of the six existing land uses) and project planning, implementation, and operation of the six identified project elements. The conclusions rely on expert opinion supported by facts, technical studies, and the existing available information contained in the Conservation element of the Long Beach General Plan;¹ Special Management Area Map of the County of Los Angeles General Plan;² Mining Districts of California, Table of the Minerals of California;³ and Mines and Minerals Producers Active in California (1988–1989), Map of the Mines and Minerals Producers Active in California (1988–1989).⁴ Mineral resources at the proposed project site were evaluated with regard to these documents.

This section briefly describes the supporting documentation for answers to the questions related to mineral resources in Section 2.0, Environmental Checklist, of this Initial Study:

- (a) *Would the proposed project result in the loss of availability of a known mineral resource that would be of value to the region and the residents of the state?*

The proposed project would not be expected to result in the loss of availability of any known mineral resources that would be of future value to the region and/or residents of the State of California. The “Mineral Resources” section of the Conservation element of the City of Long Beach General Plan acknowledges the major concentration of oil confined in a large subterranean pool known as the Wilmington Field. According to the Special Management Area Map of the County of Los Angeles General Plan,⁵ there are no designated mineral resource areas on property located within the proposed project area. Oil extraction activities that occurred historically within the City of Long Beach were properly abandoned at the time of closure.⁶ There are active oil wells on the adjacent property. According to the map, there are also no designated special management areas within the proposed project boundaries.

¹ City of Long Beach, Department of Planning and Building, 30 April 1973. “Mineral Resources” in *Long Beach General Plan Program: Conservation Element*. Prepared by: City of Long Beach, Department of Planning and Building, City Hall, 333 West Ocean Boulevard, Long Beach, CA 90802.

² County of Los Angeles, Department of Regional Planning, Revised April 1991. *County of Los Angeles General Plan: General Development Policy; Urban/Non-Urban*. (Map.) Contact: Department of Regional Planning, Hall of Records, 13th Floor, 320 West Temple Street, Los Angeles, CA 90012.

³ California Geological Survey, 1966. *Minerals of California Centennial Volume (1866–1966)*. Bulletin 189. Contact: Office of the State Geologist, 801 K Street, MS 12-30, Sacramento, CA 95814.

⁴ California Geological Survey, 1990. *Mines and Minerals Producers Active in California (1988–1989)*. Contact: Office of the State Geologist, 801 K Street, MS 12-30, Sacramento, CA 95814.

⁵ County of Los Angeles, Department of Regional Planning, Revised April 1991. *County of Los Angeles General Plan: General Development Policy; Urban/Non-Urban*. (Map.) Contact: Department of Regional Planning, Hall of Records, 13th Floor, 320 West Temple Street, Los Angeles, CA 90012.

⁶ SCS Engineers, May 2004. *Environmental Summary Report, Long Beach Memorial Medical Center Expansion Area, Long Beach, California*. Prepared for: Long Beach Memorial Medical Center, 2801 Atlantic Avenue, Long Beach, CA 90801. Prepared by: SCS Engineers, 3711 Long Beach Boulevard, Ninth Floor, Long Beach, CA 90807.

According to the Mining Districts of California, Table of the Minerals of California,⁷ the City of Long Beach is not a designated mining district. The City of Long Beach contains active sand and gravel, clay, stone, dimension stone, tungsten, and decorative rock mines and mineral producers. However, according to the Mines and Minerals Producers Active in California (1988–1989), Map of the Mines and Minerals Producers Active in California (1988–1989),⁸ the proposed project area within the City of Long Beach contains no active mines and mineral producers. Therefore, no further analysis of state and regional mineral resources is warranted.

- (b) *Would the proposed project result in the loss of availability of a locally important mineral resource recovery site delineated on a local General Plan, Specific Plan, or other land use plan?*

The proposed project would not be expected to result in the loss of availability of any locally important mineral resource recovery site delineated on any land use plan. According to the Special Management Area Map of the County of Los Angeles General Plan,⁹ there are no designated mineral resource areas on property located in the proposed project area. All oil production activities that were historically present within the proposed project areas have been abandoned.¹⁰ According to the map, there are also no designated special management areas within the proposed project boundaries. Therefore, no further analysis of local mineral resources is warranted.

⁷ California Geological Survey, 1966. *Minerals of California Centennial Volume (1866–1966)*. Bulletin 189. Contact: Office of the State Geologist, 801 K Street, MS 12-30, Sacramento, CA 95814.

⁸ California Geological Survey, 1990. *Mines and Minerals Producers Active in California (1988–1989)*. Contact: Office of the State Geologist, 801 K Street, MS 12-30, Sacramento, CA 95814.

⁹ County of Los Angeles, Department of Regional Planning, Revised April 1991. *County of Los Angeles General Plan: General Development Policy; Urban/Non-Urban*. (Map.) Contact: Department of Regional Planning, Hall of Records, 13th Floor, 320 West Temple Street, Los Angeles, CA 90012.

¹⁰ SCS Engineers, May 2004. *Environmental Summary Report, Long Beach Memorial Medical Center Expansion Area, Long Beach, California*. Prepared for: Long Beach Memorial Medical Center, 2801 Atlantic Avenue, Long Beach, CA 90801. Prepared by: SCS Engineers, 3711 Long Beach Boulevard, Ninth Floor, Long Beach, CA 90807.

3.11 NATIONAL POLLUTION DISCHARGE ELIMINATION SYSTEM

This analysis is undertaken by the City of Long Beach to determine if the proposed Long Beach Memorial Medical Center Expansion (proposed project) may have a significant impact on the National Pollution Discharge Elimination System (NPDES) in accordance with Section 15063 of the State of California Environmental Quality Act (CEQA) Guidelines (California Code of Regulations, Title 14, Division 6, Chapter 3, Sections 15000–15387, Appendix G). The conclusions rely on information contained in the CEQA Statute and State CEQA Guidelines, the County of Los Angeles Department of Public Works Hydrology Manual,¹ the NPDES municipal permit requirements as regulated by the Los Angeles Regional Section of the State Water Resources Control Board (SWRCB), the California Storm Water Best Management Practice Handbook for Construction Activity,² the City of Long Beach Storm Water Management Plan,³ and the Environmental Summary Report for the Long Beach Memorial Medical Center Expansion Area.⁴

The State CEQA Guidelines recommend the consideration of three questions when addressing the potential for significant impacts to the NPDES. This section briefly describes the rationale for the answers to the questions related to the NPDES in Section 2.0, Environmental Checklist, of this Initial Study.

(a) *Would the proposed project result in a significant loss of pervious surface?*

The proposed project would result in a less than significant loss of pervious surfaces. The current site is nearly impervious to rainfall entering the groundwater aquifer. Proposed site improvements would neither change the pervious areas nor affect the infiltration to the groundwater aquifer.

The proposed structures and surrounding area feature a nearly 100-percent impervious surface, and the imperviousness of the surface would remain relatively the same as the existing condition, ensuring that infiltration would remain at current levels and that the overall volume of flow accumulating on or off site would not change from existing conditions. Therefore, further analysis is not warranted.

(b) *Would the proposed project create a significant discharge of pollutants into the storm drain or water way?*

The proposed project would not be anticipated to create a significant discharge of pollutants into the storm drain or water way after incorporation of best management practices (BMPs).

¹ County of Los Angeles, Department of Public Works, 1991. *Hydrology Manual*. Available at: <http://ladpw.org/wrd/publication/engineering/online/Contents/hydman.pdf>

² California Stormwater Quality Association, 1993. *California Storm Water Best Management Practice Handbook*. Available at: <http://www.cabmphandbooks.com>

³ City of Long Beach, 2004. *Long Beach Stormwater Management Plan*. Available at: <http://www.lbstormwater.org/plan>

⁴ SCS Engineers, May 2004. *Environmental Summary Report, Long Beach Memorial Medical Center Expansion Area, Long Beach, California*. Prepared for: Long Beach Memorial Medical Center, 2801 Atlantic Avenue, Long Beach, CA 90801. Prepared by: SCS Engineers, 3711 Long Beach Boulevard, Ninth Floor, Long Beach, CA 90807.

The municipal storm water NPDES permit issued to the County of Los Angeles by the California Regional Water Quality Control Board (RWQCB), Los Angeles Region, in 1996 requires the development and implementation of a program addressing storm water pollution issues in development planning for private projects. As part of the NPDES permit, the Storm Water Management Program in the City of Long Beach requires new developments to meet the permit requirements through BMPs to reduce or eliminate nonstorm discharges to the storm water system. These requirements meet the water quality standards as set forth by the responsible agencies and address storm runoff quantity and flow rate, suspended solids (primarily from erosion), and contaminants such as phosphorus (primarily from landscaping) and hydrocarbons (primarily from automobiles).

The proposed structures and surrounding area feature a nearly 100-percent impervious surface, thereby increasing (or maintaining) the current infiltration rate of storm water and attenuating the peak discharge rate of the site to the surrounding environment. In addition, through the proper design of landscape features and site grading, as well as implementation of structural BMPs, the site would have the potential to effectively treat the runoff to a higher quality than that currently discharged. Therefore, further analysis of the proposed BMPs as they relate to the discharge of pollutants into the storm drain or water way is warranted.

- (c) *Would the proposed project violate any best management practices of the National Pollution Discharge Elimination System permit?*

The proposed project would not violate any BMPs of the NPDES. The municipal storm water NPDES permit issued to the County of Los Angeles by the California RWQCB, Los Angeles Region, in 1996 requires the development and implementation of a program addressing storm water pollution issues in development planning for private projects. As part of the NPDES permit, the Storm Water Management Program in the City of Long Beach requires new developments to meet the permit requirements through best management practices (BMPs) to reduce or eliminate nonstorm discharges to the storm water system. These requirements meet the water quality standards as set forth by the responsible agencies and address storm runoff quantity and flow rate, suspended solids (primarily from erosion), and contaminants such as phosphorus (primarily from landscaping) and hydrocarbons (primarily from automobiles). Therefore, no further analysis is required.

3.12 NOISE

This analysis is undertaken by the City of Long Beach to determine if the proposed Long Beach Memorial Medical Center Expansion (proposed project) may have a significant impact on noise in accordance with Section 15063 of the State of California Environmental Quality Act (CEQA) Guidelines (California Code of Regulations, Title 14, Division 6, Chapter 3, Sections 15000–15387, Appendix G). The assessment of noise considers all phases of project planning, construction, and operation in addressing the environmental checklist form recommended in the State CEQA Guidelines. The conclusions rely on expert opinion supported by facts, technical studies, the Noise element of the City of Long Beach General Plan,¹ and the City of Long Beach Community Noise Ordinance.²

This section describes the supporting documentation for the answers to questions related to noise in Section 2.0, Environmental Checklist, of this Initial Study. Technical analysis for this section of the Initial Study was completed by VSA n Associates, Inc.

- (a) *Would the proposed project expose people to or generate noise levels in excess of standards established in the local General Plan or noise ordinance, or applicable standards of other agencies?*

Implementation of the proposed project would potentially have an adverse affect on noise levels, resulting in the generation of noise levels in excess of standards established in the Noise element of the City of Long Beach General Plan, and the City of Long Beach Noise Ordinance. The Noise element of the City of Long Beach General Plan outlines the City's approach to controlling noise. It includes a definition of the nature of sound, a description of existing noise levels in the City of Long Beach, and a proposed noise environment for the City of Long Beach. The Long Beach Noise Ordinance addresses loud noises that may affect residents, businesses, and visitors. It provides standards that may not be exceeded. These are enforced by the Noise Control Office of the City of Long Beach Department of Health and Human Services. The proposed project would involve construction activities with heavy equipment over a 10-year construction scenario. The U.S. Environmental Protection Agency estimates that noise levels on construction sites normally reach 90 decibels at a distance of 50 feet from the construction site.³ The proposed project would be expected to result in significant impacts from the exposure of sensitive receptors to noise levels in excess of adopted standards, thus requiring the consideration of mitigation measures. Further analysis of the potential for construction to result in exposure of sensitive receptors to excessive noise levels is warranted.

- (b) *Would the proposed project expose people to or generate excessive ground-borne vibration or ground-borne noise levels?*

Implementation of the proposed project would likely generate excessive ground-borne vibration or ground-borne noise levels, resulting in potentially significant impacts requiring the

¹ City of Long Beach, Department of Planning and Building, 25 March 1975. *Noise Element of the General Plan*. Prepared by: City of Long Beach, Department of Planning and Building, City Hall, 333 West Ocean Boulevard, Long Beach, CA 90802.

² City of Long Beach. Community Noise Ordinance, Section 8.80.010. Contact: City of Long Beach, 333 West Ocean Boulevard, Long Beach, CA 90802.

³ U.S. Environmental Protection Agency, March 1974. *Information on Levels of Environmental Noise Requisite to Protect Public Health and Welfare with an Adequate Margin of Safety*. (EPA 550/9-74-004.) Contact: U.S. Environmental Protection Agency, Office of Noise Abatement and Control, Washington, DC.

consideration of mitigation measures. Any ground-borne vibration or ground-borne noise levels anticipated would originate from earth movement in the construction stage; such noise levels are expected to be reduced to below the level of significance. Operation of the proposed project elements would not require continued use of heavy equipment or earth moving activities and, therefore, would not be expected to generate impacts related to ground-borne vibration or ground-borne noise levels. Further analysis of the impacts of construction activities, ground-borne vibration, and noise levels is warranted.

- (c) *Would there be a substantial permanent increase in ambient noise levels in the proposed project's vicinity above levels existing without the proposed project?*

Implementation of the proposed project would permanently increase the ambient noise levels in the proposed project's vicinity above existing baseline conditions. These increases would occur due to such factors as increased traffic levels (the proposed project would result in an increase from 1,213,945 square feet of facilities to 1,500,000 square feet; this would result in thousands of additional traffic trips per day). In addition, increased numbers of emergency response vehicles would lead to an increase in ambient noise levels. The increase in ambient noise levels has the potential to result in significant impacts unless mitigation measures are incorporated. Further analysis of the potential for significant impacts to ambient noise levels is warranted.

- (d) *Would there be a substantial temporary or periodic increase in ambient noise levels in the proposed project's vicinity above levels existing without the proposed project?*

Implementation of the proposed project would potentially generate high noise levels during construction that would, for the period of construction, increase ambient noise levels in the proposed project's vicinity to greater than those that existed at the time when baseline conditions were established. These impacts, however, would be expected to be reduced to less than significant levels through the consideration of mitigation measures.

The proposed project would also be expected to generate high noise levels during testing of equipment (such as emergency generators) that would periodically increase ambient noise levels in the proposed project area to greater than those that existed at the time when baseline conditions were established. These impacts also would be expected to be reduced to less than significant levels through the use of mitigation measures. Further analysis of the potential for substantial temporary and periodic increases in ambient noise levels is warranted.

- (e) *For a proposed project located within an airport land use plan or, where such a plan has not been adopted, within 2 miles of a public airport or public use airport, would the proposed project expose people residing or working in the proposed project area to excessive noise levels?*

Implementation of the proposed project, which is located approximately 1 mile west of the Long Beach Municipal Airport, may expose building occupants to noise levels in excess of standards, resulting in significant impacts unless mitigation measures are incorporated. Further analysis of the mitigation measures required to protect employees, patients, and visitors from aircraft noise is warranted.

- (f) *For a proposed project within the vicinity of a private airstrip, would the proposed project expose people residing or working in the proposed project area to excessive noise levels?*

Implementation of the proposed project is not expected to result in significant impacts on people residing and working in the proposed project area, due to excessive noise near an airstrip. The proposed project is not located in the vicinity of a private airstrip for airplanes. The nearest private airstrip is the Compton Airport, which is approximately 6.5 miles northwest of the proposed project site. Any noise impacts related to the Long Beach Memorial Medical Center helipad would be analyzed as a part of operation of the proposed project and would be addressed in questions (a) through (d) above. Therefore, further evaluation of noise related to impacts from private airstrips is not warranted.

3.13 POPULATION AND HOUSING

This analysis is undertaken by the City of Long Beach to determine if the proposed Long Beach Memorial Medical Center Expansion (proposed project) may have a significant impact on population and housing in accordance with Section 15063 of the State of California Environmental Quality Act (CEQA) Guidelines (California Code of Regulations, Title 14, Division 6, Chapter 3, Sections 15000–15387, Appendix G). Population and housing at the proposed project site and vicinity were evaluated with regard to state, regional, and local data, and forecasts for population and housing; the City of Long Beach Housing element; as well as the proximity of the proposed project to existing and planned utility infrastructure.

The State CEQA Guidelines recommend the consideration of three questions when addressing the potential for significant impacts to population and housing. This section briefly describes the rationale for the answers to the questions related to population and housing in Section 2.0, Environmental Checklist, of this Initial Study and enumerated as questions (a) to (c) below. In addition, The City of Long Beach has established local thresholds of significance for housing and population growth pursuant to the State CEQA Guidelines, Section 15064.7. The relationship of the effects of the proposed project to these local significance thresholds are also provided under question (a) below.

- (a) *Would the proposed project induce substantial population growth in an area, either directly (for example, by proposing new homes and businesses) or indirectly (for example, through extension of roads or other infrastructure)?*

The proposed project would not be expected to result in significant impacts to population and housing through the inducement of substantial direct or indirect population growth in the area. The proposed project would provide new employment consistent with adopted City of Long Beach goals, plans and policies. It would be implemented in a dense, urban community supported by developed road and utility infrastructure. The proposed project does not propose the development of any new homes or businesses although some nearby support medical services may be anticipated indirectly. Such medical related offices would also be consistent with existing plans and policies. The proposed project would expand medical service capacity within the existing Long Beach Memorial Medical Center campus (Campus) by developing a 16-acre subpart of the 54-acre site, adding approximately 500,000 square feet of capacity to the approximately 1,213,945 square feet of the existing Campus over an estimated 10-year period.

The City of Long Beach has established local thresholds of significance for housing and population growth pursuant to the State CEQA Guidelines, Section 15064.7 (Table 3.13-1, *Long Beach Housing and Population Thresholds for Growth*). The effects of the proposed project in relation to these local thresholds are summarized in Table 3.13-1 and further analyzed below.

**TABLE 3.13-1
LONG BEACH HOUSING AND POPULATION THRESHOLDS FOR GROWTH**

The effects of a project on population, housing, and employment are considered to be significant if the proposed project would:	
1. Induce substantial growth or concentration of population beyond City and regional projections	The Southern California Association of Governments (SCAG) and the City of Long Beach Housing element forecast a 6 to 9 percent growth rate to year 2020, adding approximately 65,000 people to the City of Long Beach. The proposed project would create a maximum of 630 new employment opportunities to year 2020, which is consistent with regional growth forecasts. This growth is included in the General Plans for the City of Long Beach.
2. Alter the location, distribution, density, or growth rate of the human population of an area substantially beyond that projected in the City of Long Beach General Plan Housing element	The immediate proposed project area is both planned and zoned for residential growth to accommodate the development of institutional uses on the proposed project site. Thus the proposed project would be consistent with these growth projections, plans, and policies.
3. Result in a substantial increase in demand for additional housing	The proposed project will generate 630 new jobs on the Campus and may generate housing demand for special needs (seniors, disabled) housing. Related housing would not be substantial and may be accommodated within the immediate proposed project vicinity or at a reasonable commuting distance.
4. Create development that significantly reduces the ability of the City to meet housing objectives set forth in the City of Long Beach General Plan Housing element	The proposed project would not affect sites designated for affordable housing and special needs housing.

SOURCE:

Craig Chalfant, *Personal Communication*, 3 August 2004. City of Long Beach Department of Planning and Building.

The proposed project would not induce substantial growth or concentration of population beyond City of Long Beach and regional projections. The total number of existing jobs provided by the Long Beach Memorial Medical Center (LBMMC) is 6,358, exclusive of physicians. The maximum number of new employment opportunities associated with the proposed project is 630, inclusive of physicians (Table 3.13-2, *Projected New Employment*). This employment number also includes 122 Todd Cancer Institute (TCI) employees who are already working at dispersed locations within the Campus. Therefore, at an 8 percent increase in potential employment, the proposed project would be expected to be consistent with regional forecasts for growth in employment.¹

¹ Suzanne Davies, *Personal Communication*, 9 August 2004. Long Beach Memorial Medical Center, 2801 Atlantic Avenue, Long Beach, CA 90806-1737.

**TABLE 3.13-2
PROJECTED NEW EMPLOYMENT**

Building	Number of Employees Expected
Todd Cancer Institute Phase I = 122 Phase II = 60	182
Miller Children's Hospital Pediatric Inpatient Tower = 310 Pediatric Outpatient Building = 138	448
Total	630

Approximately one-third of the Campus, located between 29th Street and 27th Street, is zoned as Institutional (I) by the City of Long Beach. The principal permitted use of the Institutional designation is that of a public or institutional nature, including hospitals, medical centers, medical office complexes, convalescent hospitals, parking, schools, social service, office of nonprofit organizations, and special group residences. The portions of the Campus between 29th Street and Spring Street are zoned as Planning Development (PD) and Regional Highway (CHW) Districts. The PD District was established to allow flexible development plans to be prepared for areas of the city that may benefit from the formal recognition of unique or special land use and the definition of special design policies and standards not otherwise possible under conventional zoning district regulations. The CHW District is a commercial use district for mixed-scale commercial uses along major arterial streets and regional traffic corridors.

PD District 29 (PD-29) extends north-south along Long Beach Boulevard to the west of the proposed project site and is designed to "promote the economic and aesthetic revitalization of southern Long Beach Boulevard, a distressed corridor."² The district is designed to encourage "quality commercial, residential, institutional and light industrial projects, and promotes uses and levels of intensity that take advantage of the light rail service," including higher density residential uses and special needs housing. Thus, the proposed project would be consistent with prescriptions for PD-29.

According to SCAG, the City of Long Beach will experience a population growth rate of 6 percent during 2000 to 2010 and an increase to 9 percent during 2010 to 2020, representing "an annual growth rate of less than 1 percent per year over the next two decades." This represents an increase in total population of approximately 28,278 by 2010 and 45,263 by 2015.³

There are no businesses operating on the proposed project site that would be displaced. All medical center functions that currently take place on the proposed project site would be reabsorbed into the new structures as proposed.

² City of Long Beach, Department of Planning and Building, April 2001. *Housing Element (2000–2005) of the Long Beach General Plan*. Prepared by: Cotton, Bridges & Associates for the City of Long Beach, City of Long Beach, City Hall, 333 West Ocean Boulevard, Long Beach, CA 90802.

³ City of Long Beach, Department of Planning and Building, April 2001. *Housing Element (2000–2005) of the Long Beach General Plan*. Prepared by: Cotton, Bridges & Associates for the City of Long Beach, City of Long Beach, City Hall, 333 West Ocean Boulevard, Long Beach, CA 90802.

The proposed infrastructure improvements are limited to those required to serve the proposed project: the Miller's Children Hospital pediatric inpatient tower, utility trench, and central plant building, and the roadway realignment (Figure 1.04-3, *Long Beach Memorial Medical Center Location*; Figure 1.09.6-1, *Central Plant, Utility Trench, and Roadway Realignment*). The proposed roadway realignment would facilitate improved circulation and traffic within and around the Campus in order to enhance community access. The proposed project would include the development of an on-site central plant to provide emergency energy generation as required by the Alfred E. Alquist Hospital Seismic Safety Act of 1983, Senate Bill 1953, so that the hospital would be capable of continued operations in the case of an earthquake. However, this utility infrastructure would not involve extension into the surrounding community and would not alter existing off-site utility services. Thus, the proposed project does not exceed thresholds for displacement of businesses and development of new infrastructure. No further analysis is warranted.

The proposed project would not be expected to alter the location, distribution, density, or growth of the human population of an area substantially beyond that projected in the City of Long Beach General Plan Housing element.

The proposed project site is adjacent to areas designated PD-29, which is designed to accommodate housing, including special needs housing that may be developed related to the proposed project. The City of Long Beach has identified three sites within the vicinity of the proposed project that are to be developed for future residential units—providing an estimated 231 new residential units at Long Beach Boulevard and Del Amo Boulevard (105 units), Long Beach Boulevard and 31st Street (91 units), and Long Beach Boulevard and Burnett Street (35 units).⁴ Thus, the proposed project would be consistent with prescriptions for PD-29 and its housing plans for the neighboring community. Further analysis is not warranted.

The proposed project would not result in a substantial increase in demand for additional housing.

The proposed project would employ 630 new staff. In addition to the planned housing in the immediate vicinity of the proposed project described above, these new employees would be expected to commute from other nearby areas in the Los Angeles basin. Thus, the housing demand from the proposed project would not be substantial and could be accommodated within the growth projections for the region. No further analysis is warranted.

The proposed project would not be expected to create development that significantly reduces the ability of the City of Long Beach to meet housing objectives set forth in the Housing element.

⁴ City of Long Beach, Department of Planning and Building, April 2001. *Housing Element (2000–2005) of the Long Beach General Plan*. Prepared by: Cotton, Bridges & Associates for the City of Long Beach, City of Long Beach, City Hall, 333 West Ocean Boulevard, Long Beach, CA 90802.

The Housing element objectives are organized under Housing Programs. The relationship of the effects of the proposed project to two relevant Housing element objectives are discussed below:

- Provide for sufficient sites to accommodate housing that is affordable to 411 very-low-income households, 251 low-income households, 296 moderate-income households, and 506 upper-income households
- Continue to provide sites for special needs housing.

The proposed project would not affect any of the designated sites in the project vicinity. These include Site 4, Long Beach and Del Amo Boulevard, 105-unit capacity; Site 5, Long Beach and 31st Street, 91-unit capacity; and Site 8, Long Beach and Burnett Street, 35-unit capacity.

The above-named sites are in the vicinity of the proposed project and would remain available for the potential development of special needs housing.

Therefore, there are no expected impacts to population and housing related to inducing substantial direct or indirect population growth, and no further analysis is warranted.

(b) *Would the proposed project displace substantial amounts of existing housing, necessitating the construction of replacement housing elsewhere?*

The proposed project would not be expected to result in impacts to population and housing in relation to the displacement of substantial amounts of existing housing, necessitating the construction of replacement housing elsewhere. There are currently 13 residential structures on the site, including 6 single-family dwellings and 7 multiunit dwellings; all of these structures are occupied by renters.

Table 3.13-3, *Residences in Proposed Project Area*, provides a description of the 52 housing units on the proposed project site.

**TABLE 3.13-3
RESIDENCES IN PROPOSED PROJECT AREA**

Unit Number	Address	Type	Number of Units
1	2609 Pasadena Avenue	Apartments	10
2	2615 Pasadena Avenue	Apartments	4
3, 4	2617 Pasadena Avenue, A and B	Single family	2
5	2624 Pasadena Avenue	Single family	1
6	2630 Pasadena Avenue	Single family	1
7	2613 Linden Avenue	Apartments	9
8, 9	2633–2635 Linden Avenue	Single family	2
10	2620 Linden Avenue	Apartments	5
11	2622 Linden Avenue	Apartments	3
12	2630 Linden Avenue	Apartments	9
13	2638 Linden Avenue	Apartments	6
Total Units			52

The proposed project includes demolition of these structures and included residential units. These structures would be demolished and converted to parking uses to support the proposed project (Figure 1.09.7-1, *On-Site Parking Opportunities*). The proposed parking areas would be located within the portion of the Campus between 27th Street and Willow Street, which is zoned as a CHW District and a Community Automobile-Oriented (CCA) District.⁵ The CCA District permits retail and service uses for an entire community, including convenience and comparison shopping goods and associated services. The structures' current nonresidential uses and those proposed in the proposed project—for Campus parking provision—are consistent with these zoning prescriptions. Because the property is owned by the LBMMC⁶ and is not located within the California Coastal Commission Coastal Zone,^{7,8} no relocation assistance or replacement of the units is required by existing plans, policies and ordinances. Over the period 1990–1999, the City of Long Beach added 2,524 new housing units. Therefore, there would be no expected significant impacts to population and housing related to the displacement of substantial amounts of existing housing.

- (c) *Would the proposed project displace substantial numbers of people, necessitating the construction of replacement housing elsewhere?*

The proposed project would not be expected to displace substantial numbers of people, necessitating the construction of replacement housing elsewhere. The residents of the existing housing units on the proposed project site, which would be demolished as described above, would be displaced. These people could be accommodated within existing housing in the proposed project area as discussed above. Therefore, no further analysis is warranted.

⁵ City of Long Beach, 1982. City of Long Beach Municipal Code (Ord. C-5831 § 1, 1982), Chapter 21. Available at: <http://www.longbeach.gov/apps/cityclerk/lbmc/title-21/frame.htm>

⁶ David White, *Personal Communication*, 9 July 2004. Long Beach Redevelopment Agency, 333 West Ocean Boulevard, 3rd Floor, Long Beach, CA 90802.

⁷ The 2000–2005 Housing element of the Long Beach General Plan specifies the following: “State law stipulates that the conversion or demolition of homes occupied by lower- or moderate-income households in the coastal zone requires the replacement of such units.”

⁸ City of Long Beach, Department of Planning and Building, April 2001. *Housing Element (2000–2005) of the Long Beach General Plan*. Prepared by: Cotton, Bridges & Associates for the City of Long Beach, City of Long Beach, City Hall, 333 West Ocean Boulevard, Long Beach, CA 90802.

3.14 PUBLIC SERVICES

This analysis is undertaken by the City of Long Beach to determine if the proposed Long Beach Memorial Medical Center Expansion (proposed project) may have a significant impact on public services in accordance with Section 15063 of the State of California Environmental Quality Act (CEQA) Guidelines (California Code of Regulations, Title 14, Division 6, Chapter 3, Sections 15000–15387, Appendix G). The assessment of public services considers the Master Plan of Land Uses (providing a conceptual framework for reorganization of the six existing land uses) and project planning, construction, and operation of the six identified proposed project elements. The conclusions rely on expert opinion, supported by facts, technical studies, and the available information from the City of Long Beach.¹

This section briefly describes the supporting documentation for the answers to the questions related to public services in Section 2.0, Environmental Checklist, of this Initial Study.

Specifically, would elements of the proposed project result in substantial adverse physical impacts associated with the provision of new or physically altered governmental facilities, or need for new or physically altered governmental facilities, the construction of which could cause significant environmental impacts, in order to maintain acceptable service ratios, response times, or other performance objectives for any of the five primary public services.

(a) *Fire protection?*

Implementation of the proposed project would be expected to result in potentially significant impacts to fire protection. It is anticipated that impacts would be reduced to below the level of significance with the incorporation of mitigation measures. Fire protection services for the proposed project are provided by the City of Long Beach. Development of new facilities as part of the proposed project would potentially place an additional burden on the existing primary and secondary emergency response units. Three existing fire stations have responsibility for the Long Beach Memorial Medical Center campus (Campus) (Figure 1.04-2, *Topographic Map*): Fire Station No. 9, Fire Station No. 7, and Fire Station No. 16.

The primary fire response units and their locations are described in Table 3.14-1, *Fire Stations in the Proposed Project Vicinity*. Fire Station No. 9 is located on Long Beach Boulevard, across the street from the Campus, and it would continue to be the primary emergency responder for the Campus. Fire Station No. 7 also serves the proposed project area and is located 0.2 miles from the site and would continue to be the secondary emergency responder for the Campus. Fire Station No. 16 is located approximately 0.35 miles from the Campus. The fire stations operated by the City of Long Beach Fire Department currently maintain an average emergency response time of 3 minutes.²

¹ City of Long Beach Web Site, last viewed 9 July 2004. Available at: <http://www.ci.long-beach.ca.us/depts./default.asp>

² Allan Patalano, *Personal Communication*, 8 July 2004. City of Long Beach, Fire Department, 3917 Long Beach Boulevard, Long Beach, CA 90807.

**TABLE 3.14-1
FIRE STATIONS IN THE PROPOSED PROJECT VICINITY**

Station	Location	Personnel and Equipment	Distance to Site
No. 9	3917 Long Beach Boulevard, Long Beach, CA 90807	11 personnel, task force truck and engine company, paramedic rescue ambulance— EMT	0.1 mile
No. 7	2295 Elm Avenue, Long Beach, CA 90806	12 personnel, task force truck and engine company, paramedic rescue ambulance— battalion headquarters	0.2 mile
No. 16	2890 East Wardlow Road, Long Beach, CA 90807	16 personnel, task force truck and engine company, paramedic rescue ambulance— EMT rescue ambulance—division headquarters	0.35 mile

The proposed project would expand medical service capacity within the existing Campus by developing a 16-acre subpart of the 54-acre site, adding approximately 500,000 square feet of capacity to the approximately 1,213,945 square feet of the existing Campus over the next 10 years.

The proposed project would not place an additional burden on the existing primary and secondary emergency response units. The portions of Atlantic Avenue and Patterson Street would be realigned and would provide better access to the site for emergency response personnel and equipment. The proposed project design suggests realignment of these roads to comply with the requirements for such facilities.

The proposed project would provide expanded services to the existing community. The added facilities would not increase or expedite the anticipated level of population growth within the region. It is anticipated that adequate staffing to serve the proposed project site could be accommodated within the three existing fire station. Thus, there would be no need to expand the existing primary and secondary response stations or construct a new fire station. Therefore, further evaluation of fire protection is not warranted.

(b) Police protection?

Implementation of the proposed project would not be expected to result in less than significant impact on police protection services, requiring the construction of new buildings. Police protection services in the proposed project area are provided by the City of Long Beach Police Department (LBPD), South Division, located at 100 Long Beach Boulevard (Figure 1.04-2). The LBPD Office of Operations and Planning estimates a need for two sworn officers per 1,025 persons to provide adequate police protection. The proposed project consists of expanded facilities to serve the community and would not be expected to induce growth. Therefore, the proposed project would not be expected to result in a significant, permanent increase in population through provision of housing or employment. It is anticipated that the South Division could be adequately staffed to support the proposed project within the existing facility. Thus, the proposed project would not require the services of additional sworn officers and would not be expected to result in the need to expand the South Division or the need for the construction of new facilities. Further evaluation of the need to construct additional police protection facilities is not warranted.

(c) *Schools?*

Implementation of the proposed project would not be expected to result in impacts to schools in the surrounding areas of the City of Long Beach. The proposed project consists of expanded facilities to serve the existing community and would not be expected to induce growth. Therefore, the proposed project would not be expected to affect the population of school age children in the City of Long Beach. The proposed project would continue to serve as an extended health care facility for area residents. Jane Adams Elementary School, located at Pine Street and 27th Street, is about 0.25 mile southwest of the proposed project. Further analysis of the need to expand existing schools or construct new schools is not warranted.

(d) *Parks?*

Implementation of the proposed project would not be expected to result in significant impacts to existing neighborhood and regional parks or other recreational facilities. The proposed project is located within the existing Campus. Parks located within an approximate 1-mile radius of the proposed project include Martin Luther King Jr. Park, Los Cerritos Park, Reservoir Park, and Veterans Memorial Park. The proposed project consists of expanded facilities to serve the existing community and would not be expected to induce growth. Therefore, the proposed project would not be increasing the level of demand on existing park facilities in the City of Long Beach. Further analysis of the need for new park facilities is not warranted.

(e) *Other public facilities?*

The proposed project would not be expected to result in impacts to other public facilities. The proposed project is located in the Central Long Beach Redevelopment Area. This area is well-served by public facilities, including post offices and public libraries. Although City of Long Beach residents and visitors who use elements of the proposed project may also use other public facilities, the proposed project does not include residential development that would be expected to result in a net increase in local population. Therefore, the need to construct new public facilities would not be anticipated in association with the proposed project. Further analysis of the need to construct other public facilities is not warranted.

3.15 RECREATION

This analysis has been undertaken by the City of Long Beach to determine if the proposed Long Beach Memorial Medical Center Expansion (proposed project) may have a significant impact on recreation in accordance with Section 15063 of the State of California Environmental Quality Act (CEQA) Guidelines (California Code of Regulations, Title 14, Division 6, Chapter 3, Sections 15000–15387, Appendix G). The assessment of recreation considers the Master Plan of Land Uses (providing a conceptual framework for reorganization of the six existing land uses) and project planning, implementation, and operation of the six identified proposed project elements. The conclusions rely primarily on information contained in the City of Long Beach Municipal Code,¹ City of Long Beach General Plan Open Space element,² expert opinions, and the consideration of the potential for growth-inducing impacts evaluated in Section 3.13, Population and Housing.

This section briefly describes the supporting documentation for the answers to the questions related to recreation in Section 2.0, Environmental Checklist, of this Initial Study.

- (a) *Would the proposed project increase the use of existing neighborhood and regional parks or other recreational facilities such that substantial physical deterioration of the facility would occur or be accelerated?*

Implementation of the proposed project would not be expected to result in impacts to recreation in relation to increasing the use of existing neighborhood and regional parks and other recreational facilities. As discussed in Section 3.13, Population and Housing, the growth levels associated with the proposed project are consistent with the City of Long Beach and Southern California Association of Governments projections. Growth related to employment opportunities related to the proposed project would be expected to be distributed throughout the City of Long Beach and surrounding communities. Therefore, no individual park or recreation facilities will be expected to experience physical deterioration. There are four existing parks within an approximately 1 mile radius of the proposed project site: Reservoir Park to the northeast, Veteran's Memorial Park to the west, Martin King Luther Jr. Park to the southeast, and Los Cerritos Park to the northwest (Figure 1.04-2, *Topographic Map*). These parks serve the recreational needs of the surrounding communities. Long Beach Memorial Medical Center is a private hospital that provides service to the existing community through two licensed hospitals and related outpatient services within the Campus.

Programming of the proposed project would be directed toward community residents and visitors. The proposed project would be designed to serve anticipated demand within the community. The proposed project would include development of open space and landscaped areas within the Campus that is consistent with the landscaping requirements of the City of Long Beach. This landscaping would serve the purposes of the open space requirement for the additional medical facilities. Therefore, the proposed project would not be expected to increase use of existing neighborhood or regional parks. Further analysis is not warranted.

¹ City of Long Beach, 1982. City of Long Beach Municipal Code (Ord. C-5831 § 1, 1982), Chapter 21. Available at: <http://www.longbeach.gov/apps/cityclerk/lbmc/title-21/frame.htm>

² City of Long Beach, Department of Planning and Building, 30 April 1973. *Open Space Element of the General Plan*. Prepared by: City of Long Beach, Department of Planning and Building, City Hall, 333 West Ocean Boulevard, Long Beach, CA 90802.

- (b) *Does the proposed project include recreational facilities or require the construction or expansion of recreational facilities that might have an adverse physical effect on the environment?*

Implementation of the proposed project would not result in impacts on the environment through the construction and expansion of recreational facilities. The proposed project would consist of expanded medical facilities for immediate needs and anticipated long-term needs of the community. The proposed project does not include recreational facilities or require the construction or expansion of recreational facilities in the area. As discussed in Section 3.13, Population and Housing, the project would not be expected to result in new population growth that would result in the construction or expansion of recreation facilities. Therefore, the proposed project would not result in impacts on the environment related to the construction of recreation facilities. Further analysis is not warranted.

3.16 TRANSPORTATION AND TRAFFIC

This analysis is undertaken by the City of Long Beach to determine if the proposed Long Beach Memorial Medical Center Expansion (proposed project) may have a significant impact on transportation and traffic in accordance with Section 15063 of the State of California Environmental Quality Act (CEQA) Guidelines (California Code of Regulations, Title 14, Division 6, Chapter 3, Sections 15000–15387, Appendix G). The proposed project is bound on the north by East Spring Street, on the south by Willow Street, on the east by Atlantic Avenue, and on the west by Long Beach Boulevard. The assessment of transportation and traffic considers all phases of project planning, construction, and operation in addressing the environmental checklist form. The conclusions rely on expert opinion supported by facts, technical studies, the Transportation element of the City of Long Beach General Plan,¹ the County of Los Angeles Congestion Management Program (CMP),² and the traffic significance criteria of the Cities of Long Beach and Signal Hill.

This section briefly describes the supporting documentation for the issues related to transportation and traffic in Section 2.0, Environmental Checklist, of this Initial Study. Technical analysis for this section of the Initial Study was supported by input from Linscott, Law & Greenspan Engineers.

- (a) *Would the proposed project cause an increase in traffic that is substantial in relation to the existing traffic load and capacity of the street system (i.e., result in a substantial increase in either the number of vehicle trips, the volume-to-capacity ratio on roads, or congestion at intersections)?*

Implementation of the proposed project would be expected to have significant impacts, related to an increase in traffic, which would require the consideration of mitigation measures. It is anticipated that impacts would be reduced to below the level of significance through conformance to level of service (LOS) standards employed by the City of Long Beach, the City of Signal Hill, and the County of Los Angeles CMP.

The significance criteria of the Cities of Long Beach and Signal Hill are based on the projected increase in intersection volume-to-capacity (V/C) ratios due to the proposed project and the future intersection LOS, which includes traffic due to the proposed project as well as other related development projects. Since the proposed project site is surrounded by City of Long Beach and City of Signal Hill arterials, both Long Beach and Signal Hill criteria would be considered in the evaluation of the potential for significant impacts.

The proposed project would be centrally located for alternative routes of travel, including Long Beach Transit (LBT) (bus) and the Metro Blue Line (light rail rapid transit system). Others would be expected to travel to the site via car. Access to the site is provided via East Spring Street from the north, Atlantic Avenue from the east, Willow Street and 27th Street from the south, and Long Beach Boulevard from the west. The proposed project would improve and redesign Patterson Street/Memorial Medical Drive within the Long Beach Memorial Medical Center campus (Campus). The proposed project would increase the existing approximate 1,213,945 square feet of facilities devoted to inpatient and outpatient services and appurtenant facilities

¹ City of Long Beach, Department of Planning and Building, December 1991. *Transportation Element of the General Plan*. Prepared by: City of Long Beach, Department of Planning and Building, City Hall, 333 West Ocean Boulevard, Long Beach, CA 90802.

² County of Los Angeles, Metropolitan Transit Authority, 1998. *Congestion Management Program*. Contact: METRO Headquarters, Gateway Plaza, Plaza Level, Los Angeles, CA 90012.

by approximately 500,000 square feet over an anticipated build-out period of 10 years. The proposed project would have the potential to increase trips generated by the Campus by as much as 50 percent. Construction and operation of the proposed project elements would have the potential to substantially increase traffic in relation to the existing traffic load and capacity of the street system. It is anticipated that the application of standard mitigation measures specified in the CMP would be capable of reducing impacts to below the level of significance. Further analysis of traffic in relation to the capacity of the street system is warranted.

- (b) *Would the proposed project exceed, either individually or cumulatively, an LOS standard established by the County Congestion Management Agency for designated roads or highways?*

Implementation of the proposed project would be expected to have significant impacts on the LOS of surrounding roads, requiring the consideration of mitigation measures to meet the LOS standards employed by the City of Long Beach, City of Signal Hill, and County of Los Angeles CMP. The City of Long Beach and City of Signal Hill consider LOS D to be the minimum acceptable condition that should be maintained during the peak commute hours for roads and highways in the vicinity of the proposed project site. The County's CMP standard is LOS E or better for roads and highways in the vicinity of the proposed project site. The significance criteria of the cities are based on the projected increase in intersection V/C ratios due to the proposed project and the future intersection LOS, which includes traffic due to the proposed project as well as other related development projects. The application of standard mitigation measures specified in the CMP would be capable of reducing impacts to below the level of significance. Further analysis of traffic in relation to LOS standards is warranted.

- (c) *Would the proposed project result in change to air traffic patterns, including either an increase in traffic levels or a change in location that results in substantial safety risk?*

Implementation of the proposed project would not be expected to result in significant impacts to air traffic patterns. The proposed project is located approximately 1 mile west of the Long Beach Airport (Figure 1.04-2, *Topographic Map*). The proposed project would be completely developed within the existing footprint of the Campus. There would be no change in land use patterns in relation to existing air traffic patterns. Therefore, the proposed project would not result in changes to air traffic patterns; similarly, there would be no anticipated impacts related to safety in that the proposed project elements are consistent with authorized land uses for this area. Further analysis in relation to air traffic patterns is not warranted.

- (d) *Would the proposed project substantially increase hazards due to a design feature (e.g., sharp curves or dangerous intersections) or incompatible uses (e.g., farm equipment)?*

Implementation of the proposed project would be expected to result in design modifications to roadway features. However, there would be no expected increase in hazards (e.g., sharp curves or dangerous intersections). The proposed project would likely require minor modifications to the adjacent external street system and the improvements to the internal circulation system. The result of any modifications would be designed to improve overall traffic flow and circulation patterns in the immediate vicinity of the site, as well as improve site access and internal circulation. Further analysis is warranted to demonstrate the safety of proposed traffic improvements. The traffic analysis would be undertaken consistent with the requirements and specifications of the City of Long Beach and City of Signal Hill traffic and transportation sections.

- (e) *Would the proposed project result in inadequate emergency access?*

Implementation of the proposed project would have the potential to result in significant impacts to emergency access, requiring the consideration of mitigation measures. Construction trips would be expected to use emergency access routes to the Campus during the anticipated 10-year build-out of the proposed project, thus requiring the development of a Traffic Safety Plan for each phase of construction to ensure the provision of adequate emergency access throughout construction of the proposed project. Similarly, operation of the proposed project improvements would be expected to increase the trips generated by the Campus by as much as 50 percent at build-out, thus requiring the identification of mitigation measures that ensure that emergency access is not compromised. Further analysis of emergency access throughout construction and operation of the proposed project is warranted.

- (f) *Would the proposed project result in inadequate parking capacity?*

Implementation of the proposed project would be expected to result in significant impacts on parking capacity requiring the consideration of mitigation measures. The proposed project would result in the displacement of existing parking during each phase of construction (Table 3.16-1, *Additional Parking Spaces Required during Construction*). There are five elements of the proposed project that require the removal of parking or that generate demand for new parking: (1) Todd Cancer Institute (two phases); (2) Miller Children's Hospital–Pediatric Inpatient Tower (two phases), Utility Trench, and Central Plant; (3) Miller Children's Hospital–Pediatric Outpatient Building; (4) Miller Children's Hospital–Link Building; and (5) Roadway Realignment. Because there is essentially no existing excess parking available within the Campus, the ability to initiate construction activities will require that new parking be in place to compensate for parking that will be lost from demolition of existing parking spaces and for construction staging activities that will result in temporary loss of existing parking spaces. A minimum of 860 additional parking spaces will be required to be in place to facilitate the initiation of the first three proposed project elements: (1) Todd Cancer Institute (Phase I); (2) Miller Children's Hospital–Pediatric Inpatient Tower (Phase I), Utility Trench, and Central Plant; and (3) Roadway Realignment (Table 3.16-1). Operation of these same facilities would require 1,037 parking spaces (Table 3.16-2, *Additional Parking Spaces Required to Operate Facilities*). At full build-out of the five proposed project elements, a total of 2,187 parking spaces would be required.

**TABLE 3.16-1
ADDITIONAL PARKING SPACES REQUIRED DURING CONSTRUCTION**

Proposed Project Element	Construction Schedule	Parking Spaces Removed	Temporary Construction Impacts to Parking Spaces	Additional Parking Spaces Required During Construction
Construction parking requirements July 2005 to December 2007				
Todd Cancer Institute, Phase I	Jul 2005 to Sep 2006	171	329	500
Miller Children's Hospital–Pediatric Inpatient Tower, Phase I; Utility Trench; and Central Plant	Oct 2005 to May 2008	100	65	165
Roadway Realignment	Jul 2005 to Oct 2005	195	–	195
Total additional parking required during construction July 2005 to December 2007				860
Construction parking requirements January 2006 to June 2007				
Miller Children's Hospital–Pediatric Outpatient Building	Jan 2006 to Jun 2007	43	–	43
Total additional parking required during construction January 2006 to June 2007				903
Construction parking requirements January 2010 to June 2011				
Todd Cancer Institute, Phase II	Jul 2010 to Jun 2011	68	207	275
Miller Children's Hospital–Link Building	Jul 2010 to Jun 2011	–	–	–
Total additional parking required during construction July 2010 to June 2011				275
Construction parking requirements January 2012 to June 2013				
Miller Children's Hospital–Pediatric Inpatient Tower, Phase II	Jan 2012 to Jun 2013	–	20	20
Total additional parking required during construction July 2010 to June 2011				20

**TABLE 3.16-2
ADDITIONAL PARKING SPACES REQUIRED TO OPERATE FACILITIES**

Proposed Project Element	Occupancy Schedule	Parking Spaces Removed	Parking Demand Generated	Total Additional Parking Spaces Required for Occupancy
Parking requirements January 2008				
Todd Cancer Institute, Phase I	Jan 2008	171	419	590
Miller Children's Hospital– Pediatric Inpatient Tower, Phase I; Utility Trench; and Central Plant	Jan 2008	100	152	252
Roadway Realignment	Jul 2007	195	–	195
Parking required January 2008				1,037
Construction parking requirements January 2006 to June 2007				
Miller Children's Hospital– Pediatric Outpatient Building	Jul 2007	43	600	643
Parking required July 2007				643
Parking requirements July 2012				
Todd Cancer Institute, Phase II	Jul 2012	68	227	295
Miller Children's Hospital– Link Building	Jul 2012	–	20	20
Parking required July 2012				315
Parking requirements July 2013				
Miller Children's Hospital– Pediatric Inpatient Tower, Phase II	Jan 2012 to Jun 2013	–	192	192
Parking required July 2013				192
Total parking spaces required				2,187

A preliminary evaluation has been made of the ability of two adjacent off-site properties to accommodate additional surface parking (Table 3.16-3, *Parking Opportunities*).³ In addition, opportunities to develop additional surface parking lots within the Campus have been evaluated.⁴ There are a maximum of 945 parking spaces that could be provided through the development of off-site and on-site surface parking opportunities. This analysis demonstrates that the 515 spaces that could be accommodated through a leased off-site parking area would be insufficient by 345 parking spaces to accommodate the need for parking during construction. The 945 parking spaces that could be provided through the development of all known off-site and on-site surface parking opportunities is insufficient by 92 parking spaces to support operation of the first three priority proposed project components. The ultimate build-out of the proposed facilities would be short by 1,242 parking spaces.

³ Linscott, Law & Greenspan Engineers, March 2004. *Parking Study: Derivation of Empirical Ratios, Long Beach Memorial Medical Center Master Plan*. Contact: Linscott, Law & Greenspan Engineers, 1580 Corporate Drive, Suite 122, Costa Mesa, CA 92626.

⁴ Linscott, Law & Greenspan Engineers, March 2004. *Parking Study: Derivation of Empirical Ratios, Long Beach Memorial Medical Center Master Plan*. Contact: Linscott, Law & Greenspan Engineers, 1580 Corporate Drive, Suite 122, Costa Mesa, CA 92626.

**TABLE 3.16-3
PARKING OPPORTUNITIES**

Proposed Parking Site	Potential Surface Parking
Off-Site Lease Opportunities	
Site A	249
Site B	181
Capacity of Off-Site Lease Opportunities	430
On-Site Conversion to Surface Parking	
Site C	121
Site D	68
Site E	71
Site F	96
Site G	72
Site H	92
Capacity of On-Site Conversion to Surface Parking	515
Total Available Parking Opportunities	945
Anticipated Parking Shortfall	1,242

A parking shortfall of this magnitude would be expected to impact traffic flow in the surrounding intersections as emergency response vehicles, employees, patrons, and visitors circle in search of access and parking. Such a situation would likely affect the quality of care through delay times to access the emergency room. Delay would affect logistics due to the inability of staff and clients to arrive in a timely manner. This would in turn be expected to affect customer and employee satisfaction.

A detailed parking analysis as well as a phased parking program would be provided as part of the traffic analysis to be conducted under the review of the traffic and transportation section of the City of Long Beach. The proposed project would require the development of additional on-site parking facilities. Further analysis of the effects of the proposed project on parking capacity is warranted.

- (g) *Would the proposed project conflict with adopted policies, plans, or programs supporting alternative transportation (e.g., bus turnouts, bicycle racks)?*

Implementation of the proposed project would be expected to result in a less than significant impact on adopted policies, plans, or programs supporting alternative modes of transportation. The proposed project would be developed in concert with these policies, plans, and programs. Operations of the proposed project would continue to utilize existing public transportation programs. Emphasis would be given, throughout the design process, on maximizing the number of patron arrivals and departures via public transportation. Currently, LBT and the Metro Blue Line serve the area.

LBT

LBT Route No. 5 travels north and south on Long Beach Boulevard adjacent to the proposed project site, with a bus stop at the intersection of Long Beach Boulevard and Willow Street. LBT Route Nos. 45, 46, 61, 66, 81, 101, 102, 103, 131, 171, 172, 173, 174, 191, and 192 all provide direct access to LBT Route No. 5.

LBT Route Nos. 61 and 62 travel north and south on Atlantic Avenue east of the proposed project site, with a bus stop at the intersection of Atlantic Avenue and Willow Street. LBT Route Nos. 5, 7, 45, 46, 81, 101, 102, 103, 131, 171, 172, 173, 174, 191, and 192 all provide direct access to LBT Route Nos. 61 and 62.

Metro Blue Line

Given that bus service via LBT is provided between Willow Station and the proposed project site, patrons would be able to utilize the existing Metro Blue Line via the Willow Station. In addition, the Willow Station is located immediately south of the proposed project site, allowing patrons to walk to the proposed project site.

The proposed project's construction-related traffic would not be expected to interfere with regular operation of these services. Further analysis is not warranted.

3.17 UTILITIES AND SERVICE SYSTEMS

This analysis is undertaken by the City of Long Beach to determine if the proposed Long Beach Memorial Medical Center Expansion (proposed project) may have a significant impact on utilities and service systems in accordance with Section 15063 of the State of California Environmental Quality Act (CEQA) Guidelines (California Code of Regulations, Title 14, Division 6, Chapter 3, Sections 15000–15387, Appendix G). Utilities and service systems at the proposed project site were evaluated with regard to water, wastewater, solid waste, and sewage systems, their current capacities, and the projected future demand for these services. Conclusions rely primarily on consultation with utility and service system providers. The Waste Facilities section of the Land Use element and Open Space element of the City of Long Beach General Plan^{1,2} and applicable municipal code were also consulted.³ Other referenced documents include the National Pollutant Discharge Elimination System (NPDES) municipal permit requirements as regulated by the Los Angeles Regional Section of the State Water Resources Control Board (SWRCB).

The State CEQA Guidelines recommend the consideration of seven questions when addressing the potential for significant impact to utilities and service systems. This section briefly describes the rationale for the answers to the questions related to utilities and service systems in Section 2.0, Environmental Checklist, of this Initial Study.

- (a) *Would the proposed project exceed wastewater treatment requirements of the applicable Regional Water Quality Control Board?*

The impact to utilities and service systems, related to exceeding wastewater treatment requirements of the Los Angeles Regional Water Quality Control Board from the proposed project, would be expected to be reduced to below the level of significance with the incorporation of mitigation measures. The proposed project would include an approximate 50-percent increase in the capacity and a commensurate increase in wastewater treatment requirements. Coordination was undertaken with the City of Long Beach Water Department, and it was determined that the ability of existing wastewater treatment facilities to accommodate the proposed project requires further evaluation by the City of Long Beach Water Department.^{4,5} Therefore, the issue of wastewater treatment will be carried forward for detailed analysis in the environmental document. The City of Long Beach has a sewer easement at the proposed project site, and the system that transfers wastewater (City sewage trunk lines) from the site connects with County Sanitation Districts of Los Angeles trunk lines, which then transfers the wastewater to wastewater treatment plants. At a minimum, it is expected that the City of Long Beach would require a sewerage connection fee to accommodate the additional wastewater capacity. Sewerage line replacement or upgrade is

¹ City of Long Beach, Department of Planning and Building, July 1991. *Land Use Element of the Long Beach General Plan*. Prepared by: City of Long Beach, Department of Planning and Building, City Hall, 333 West Ocean Boulevard, Long Beach, CA 90802.

² City of Long Beach, Department of Planning and Building, 30 April 1973. *Open Space Element of the General Plan*. Prepared by: City of Long Beach, Department of Planning and Building, City Hall, 333 West Ocean Boulevard, Long Beach, CA 90802.

³ City of Long Beach, 1982. City of Long Beach Municipal Code (Ord. C-5831 § 1, 1982), Chapter 21. Available at: <http://www.longbeach.gov/apps/cityclerk/lbmc/title-21/frame.htm>

⁴ Larry Oaks, *Personal Communication*, 7 July 2004. City of Long Beach Water Department, 1800 East Wardlow Road, Long Beach, CA 90807.

⁵ Robert Villanueva, *Personal Communication*, 9 July 2004. City of Long Beach Water Department, 1800 East Wardlow Road, Long Beach, CA 90807.

also a possibility. Best management practices (BMPs), such as the installation of low-flush toilets, would serve to reduce the volume of wastewater discharge to the maximum extent practicable. Therefore, impacts to utilities and service systems in relation to exceeding wastewater treatment requirements of the Los Angeles Regional Water Quality Control Board would be expected to be reduced to below the level of significance by the incorporation of the mitigation measures; however, further analysis is required to identify the BMPs and facility improvements to be required in conjunction with the proposed project.

- (b) *Would the proposed project require or result in the construction of new water or wastewater treatment facilities or expansion of existing facilities, the construction of which could cause significant environmental effects?*

The impact to utilities and service systems, related to the potential for construction of new water or wastewater treatment facilities or expansion of new facilities in support of the proposed project, would be expected to be reduced to below the level of significance with the incorporation of mitigation measures. Coordination with the City of Long Beach Water Department⁶ and the County Sanitation Districts of Los Angeles⁷ indicated that, based on a worst-case scenario of the Long Beach Memorial Medical Center campus (Campus) increasing sewage effluent by 50 percent, regional wastewater treatment facilities would still be adequately sized to accommodate the additional discharge. However, the proposed expansion would likely require improved sewage connections and sewer lines. Specifically, sewer lines within Columbia Street may have insufficient capacity to accommodate the Miller Children's Hospital pediatric inpatient tower, Miller Children's Hospital link building, Miller Children's Hospital outpatient building, and the Todd Cancer Institute. The project proponent would be required to submit engineering calculations to the City of Long Beach demonstrating the anticipated maximum peak discharge for each proposed project element and cumulative peak discharge at build-out of the proposed project elements. The City of Long Beach would need to authorize the proposed increase in maximum sewer discharge. The proposed project would require a Waste Discharge Permit and a Sewer Connection Permit. The analysis contained in the environmental document would serve as the basis for permit review.

Improved sewer connections and sewer lines would likely need to be constructed within existing developed areas of the Campus, which would require the consideration of construction staging techniques and work safety plans to protect other existing land uses within the Campus. It is anticipated that the impacts to utilities and service systems in relation to the upgrade or replacement of existing sewer lines would be reduced to below the level of significance through mitigation measures, including the development of traffic control and work safety programs to protect existing land uses within the Campus. Further analysis of waste discharge requirements and related water and wastewater treatment facilities to cause significant environmental effects is warranted and requires coordination with the City of Long Beach Water Department and the County Sanitation Districts of Los Angeles.

⁶ Robert Villanueva, *Personal Communication*, 9 July 2004. City of Long Beach Water Department, 1800 East Wardlow Road, Long Beach, CA 90807.

⁷ Tom Glasner, *Personal Communication*, 9 July 2004. County Sanitation Districts of Los Angeles, 1955 Workman Mill Road, Whittier, CA 90601.

- (c) *Would the proposed project require or result in the construction of new storm water drainage facilities or expansion of existing facilities, the construction of which could cause significant environmental impacts?*

The proposed project would not be expected to result in significant impacts to the City of Long Beach storm water management infrastructure in relation to the construction of new storm water drainage facilities or expansion of existing facilities, which could cause significant environmental impacts. As part of the National Pollutant Discharge Elimination System (NPDES) permit issued to the County of Los Angeles by the Regional Water Quality Control Board, the Storm Water Management Program in the City of Long Beach enforces new developments to meet the permit requirements through BMPs to reduce or eliminate nonstorm discharges to the storm water system. These requirements meet the water quality standards as set forth by the presiding agencies and address storm runoff quantity and flow rate, suspended solids (primarily from erosion), and contaminants such as phosphorus (primarily from landscaping) and hydrocarbons (primarily from automobiles).

The proposed project would not be expected to have an adverse effect on the volume of storm water runoff. The proposed structures and surrounding features would be located within a developed Campus that is currently characterized by a surface that is nearly 100-percent impervious to water. Therefore, the proposed development would not be expected to increase the rate of storm water runoff or exacerbate the peak discharge rate from the Campus. With the proper design of landscape features and site grading, as well as implementation of structural BMPs, the site would have the potential to improve the quality of storm water runoff from the Campus.

Implementation of the proposed project would not be expected to have a significant impact on the capacity of existing drainage systems for the surrounding area or the quality of storm water discharged to the drainage system. The regional storm drain system is sized in a manner to handle the storm water flows from surrounding areas, accounting for numerous acres of land area that feed into the local storm drain system. The proposed improvements do not carry a component that would otherwise increase storm water runoff beyond normal rainfall amounts, as it is in the existing condition. Further analysis would be required of the proposed structures and surrounding features as they relate to the impact on storm water runoff in both volume and quality as the proposed project moves forward in the design phase.

- (d) *Would the proposed project have sufficient water supplies available to serve the proposed project from existing entitlements and resources, or are new or expanded entitlements needed?*

Implementation of the proposed project would utilize existing potable water supplies; it is expected that there are sufficient supplies to serve the proposed project from existing entitlements and resources. Potable water would be supplied by the City of Long Beach Water Department. According to the 2002 Water Quality Report of the Long Beach Water Department, approximately 46 percent of the water serving the City of Long Beach is supplied by groundwater, and the remaining 54 percent is provided through purchased, imported surface water. The sources of drinking water (for both tap and bottled water) include rivers, lakes, streams, ponds, reservoirs, springs, and wells. The City of Long Beach Water Department purchases treated surface water from the Metropolitan Water District of Southern California and treats groundwater pumped from 29 wells around the Long Beach area at its groundwater treatment plant. The water is solely drawn from MWD during the winter months, while groundwater is primarily used during the summer months.

The City of Long Beach Water Department requires projects involving development of more than 100,000 square feet of office space to provide engineering calculations to demonstrate the peak water demand for each element of the proposed project and cumulative peak water demand for the proposed project at build-out.⁸ The proposed project involves approximately 500,000 square feet of new development; therefore, additional analysis of details of water supply availability would be required by the State CEQA Guidelines. Consistent with Section 15083.5 of the State CEQA Guidelines, the City of Long Beach shall send a copy of the Notice of Preparation to the City of Long Beach Water Department and specifically request an assessment as to whether the projected water demand associated with the proposed project was included in its last urban water management plan and

“assess whether its total projected water supplies available during normal, single-dry, and multiple-dry water years as included in the 20-year projection contained in its urban water management plan will meet the projected water demand associated with the proposed project, in addition to the system’s existing and planned future uses.”

Further analysis would be required to assess the consistency of the proposed project elements with the adopted urban water management plan and the availability of sufficient water supplies to support the proposed improvements.

- (e) *Would the proposed project result in a determination by the wastewater treatment provider that serves or may serve the proposed project that it has adequate capacity to serve the proposed project’s projected demand in addition to the provider’s existing commitments?*

The proposed project would be expected to be accommodated by the wastewater treatment provider. Additional consultation with the City of Long Beach Water Department would be required to ascertain if the City of Long Beach sewer trunk lines could handle the additional capacity of the proposed project. The City of Long Beach Water Department operates and maintains nearly 765 miles of sanitary sewer line and delivers more than 40 million gallons per day to County of Los Angeles sanitation facilities located on the north and south sides of the City of Long Beach. These facilities treat sewage and deliver it for use in three ways: (1) to irrigate parks, golf courses, cemeteries, and athletic fields; (2) to recharge the City of Long Beach’s groundwater basin; and (3) to be pumped into the Pacific Ocean.

The City of Long Beach’s sanitary sewer system carries water from toilets, showers, sinks, and dish and clothes washers into the sanitary sewer system, and a majority of this wastewater is sent for treatment to the Joint Water Pollution Control Plant (JWPCP) of the County Sanitation District of Los Angeles. The remaining portion of the City’s wastewater is delivered to the Long Beach Water Reclamation Plant (also of the County Sanitation District of Los Angeles). The Long Beach Water Reclamation Plant provides primary, secondary, and tertiary treatment for 25 million gallons of wastewater per day. The plant serves a population of approximately 250,000 people, including a portion of the 460,000 residents of the City of Long Beach, with nearly 5 million gallons per day of the treated water directed for reuse at more than 40 sites.

The City of Long Beach Water Department would consult its 1993 Sewer Master Plan Study, which established sewer capacity levels, to determine if the proposed project wastewater flows

⁸ Robert Villanueva, *Personal Communication*, 9 July 2004. City of Long Beach Water Department, 1800 East Wardlow Road, Long Beach, CA 90807.

could feasibly be accommodated by the City of Long Beach lines. Consultation with the County Sanitation Districts of Los Angeles indicated that the projected expansion in capacity of the proposed project likely would be accommodated by the County's sewer trunk lines and treatment facilities; however, the use of the County's capacity by the proposed project is subject to approval by the City of Long Beach.⁹ Further analysis would be warranted to articulate wastewater minimization, reclamation, and reuse strategies.

- (f) *Would the proposed project be served by a landfill with sufficient permitted capacity to accommodate the proposed project's solid waste disposal needs?*

The proposed project would be expected to be served by a landfill with sufficient capacity to accommodate the proposed project's solid waste disposal needs. However, given the regional constraints on landfill capacity, the proposed project would be expected to incorporate construction waste reduction and recycling programs for proposed project operations to minimize waste stream consistent with the requirements of the California Integrated Waste Management Board. Currently, Campus waste is collected under private contract to a certified waste hauler, which takes the waste to the following permitted landfills in Los Angeles and Orange Counties: Sunshine Canyon, Puente Hills, Brea Canyon, and Prima Desheca. The waste hauler anticipates that the proposed project's approximately 50 percent expansion in capacity could be accommodated by these existing permitted landfills.¹⁰ Only one of these landfills is certified to receive "red bag" hazardous medical waste—Puente Hills. The cost of accepting red bag waste at the landfill is approximately 50 percent more per ton; therefore, implementation of a waste disposal separation program would reduce the costs of disposal and allow use of the other permitted landfills on a continuing basis. Consultation with the Long Beach/Signal Hill Joint Powers Agency—authorized to enforce medical waste management as a Certified Unified Program Agency (CUPA)—is expected to reveal additional mitigation measures that would ensure the proposed project's reduction of solid waste (including hazardous waste) impacts. Thus, the impacts to utilities and service systems in relation to being served by a landfill with sufficient permitted capacity to accommodate the proposed project's solid waste disposal needs are expected to be reduced to below the level of significance by the incorporation of mitigation measures. Further analysis would be warranted to define measures to minimize the waste stream from construction and operation of the proposed project elements to the maximum extent practicable.

- (g) *Would the proposed project comply with federal, state, and local statutes and regulations related to solid waste?*

The proposed project would be expected to comply with federal, state, and local statutes and regulations pertaining to solid waste with the incorporation of mitigation measures. Both the construction and operational phases of the proposed project would be expected to generate wastes requiring disposal in accordance with local and state laws, including recycling requirements. Because construction of the proposed project would result in outpatient cancer services encompassing approximately 125,930 gross square feet of new space as well as approximately 200,000 gross square feet in the Miller Children's Hospital, additional medical waste would be generated at the site. Medical waste is considered hazardous waste and is

⁹ Tom Glasner, *Personal Communication*, 9 July 2004. County Sanitation Districts of Los Angeles, 1955 Workman Mill Road, Whittier, CA 90601.

¹⁰ Gerald Perissi, *Personal Communication*, 7 July 2004. General Manager, BFI, Inc., Gardena Division, 14905 South San Pedro, Gardena, CA 90247.

governed by the State of California Medical Waste Management Act (MWMA), which is enforced by the City of Long Beach as its own local enforcement agency (LEA) in a CUPA agreement with the City of Signal Hill. The Long Beach/Signal Hill Joint Powers Agency has now been in effect since 1997. This unified program combines both Fire Department and Health Department programs related to hazardous materials management into one agency function that encompassing the two cities. The CUPA enforces medical waste management via the Hazardous Waste Generator Inspection Program. The CUPA would be consulted in identifying waste management practices for the proposed project in order to supplement the detailed analysis carried forward in the environmental document. The proposed project would result in deposition of all solid waste at permitted solid waste (including hazardous waste) facilities and in compliance with both construction and operation prescriptions of the NPDES and Standard Urban Storm Water Mitigation Plan (SUSMP) requirements as outlined in City of Long Beach Municipal Code, Chapter 18.95.¹¹

Therefore, it is expected that impacts to utilities and service systems in relation to compliance with federal, state, and local statutes and regulations regarding solid waste would be reduced to below the level of significance by the incorporation of the mitigation measures developed in conjunction with the CUPA, the City of Long Beach Department of Public Works Environmental Services Bureau, the City of Long Beach Water Department, and the California Integrated Waste Management Board requirements. Further analysis would be warranted to develop construction and operations measures to ensure compliance with applicable federal, state, and local laws related to solid waste.

¹¹ This municipal code provides regulations and gives legal effect to certain requirements of the NPDES permit issued to the City of Long Beach, and the subsequent requirements of the SUSMP, mandated by the State Regional Water Quality Control Board, Los Angeles region (RWQCB), (Ord. C-7712 § 2, 2000; Ord. C-7703 § 1, 2000).

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SECTION 5.0
REPORT PREPARATION PERSONNEL

The following individuals contributed to the preparation of this document.

Contributor: *Title or Affiliation:* *Area of Responsibility:*

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Anita Garcia	Planner	Project Manager
Craig Chalfant	Planner	Assistant Project Manager

5.2 LONG BEACH MEMORIAL MEDICAL CENTER

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Richard DeCarlo	Senior Vice President, Operations Miller Children's Hospital	Project Manager, Miller Children's Hospital
Cathy Kopy	Executive Director Todd Cancer Institute	Project Manager, Todd Cancer Institute

5.3 ADAMS PROJECT MANAGEMENT CONSULTING, LLC

Jerry Oksner	Vice President	Lead Agent/Project Manager for Long Beach Memorial Medical Center
John King	Senior Project Manager	Senior Project Manager for Long Beach Memorial Medical Center

5.4 SAPPHOS ENVIRONMENTAL, INC.

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Kyle McClure	Sapphos Environmental, Inc.	Air Quality Noise Transportation and Traffic
Laurie Solis	Sapphos Environmental, Inc.	Cultural Resources
Nuna Tersibashian	Sapphos Environmental, Inc.	Geology and Soils Hazards and Hazardous Materials Hydrology and Water Quality

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Richard Barretto Trissa Allen Daniel Kloos	Linscott, Law & Greenspan Engineers	Transportation and Traffic
Jim Faul George Johnson Gee Lim	Moffat & Nichol	Hydrology and Water Quality
Ray Huff Michael Leonard Lenard Long Pat Sullivan	SCS Engineers	Geology and Soils Hazards and Hazardous Materials
Dr. Mahabir Atwal	VSA n Associates	Noise Assessment

Appendix B

Notice of Preparation



CITY OF LONG BEACH

DEPARTMENT OF PLANNING AND BUILDING

333 West Ocean Boulevard, 5th Floor

Long Beach, CA 90802

FAX (562) 570-6753

\$25.00 FILING FEE

NOTICE OF PREPARATION

To: Office of the County Clerk
Environmental Filings
12400 East Imperial Highway, #1101
Norwalk, CA 90650

From: Community & Environmental Planning Division
Department of Planning and Building
333 West Ocean Boulevard, 5th Floor
Long Beach, CA 90802

Date Mailed: August 20, 2004

In conformance with Section 15082 of the State of California Environmental Quality Act (CEQA) Guidelines, the City of Long Beach Planning Commission will be the Lead Agency and will prepare an Environmental Impact Report (EIR) for the Long Beach Memorial Medical Center Expansion project. The City of Long Beach is seeking input from regulatory agencies and other interested parties regarding the scope and content of the environmental information to be included in the EIR. Scoping has been helpful to agencies in identifying the range of actions, alternatives, mitigation measures, and significant effects to be analyzed in depth in an EIR and in eliminating detailed studies of issues found not to be important. Responsible and trustee agencies will need to use the EIR prepared by the City of Long Beach when considering permitting or other approval for the project.

The project description, location, and probable environmental effects are described in the Initial Study (Attachment 1).

1. Scoping Period:

Starting Date: August 23, 2004

Ending Date: September 21, 2004

Due to the time limits mandated by state law, the response must be sent at the earliest possible date **but not later than 30 days** after receipt of this notice.

Please send letters of comment on the Notice of Preparation to:

ANITA GARCIA
DEPARTMENT OF PLANNING AND BUILDING
CITY OF LONG BEACH
CITY HALL, 5TH FLOOR
333 WEST OCEAN BOULEVARD
LONG BEACH, CALIFORNIA 90802

2. Project Location:

The Long Beach Memorial Medical Center Expansion project addresses proposed master planning for land uses and the development of specific project elements within the approximately 54 acre project site in the City of Long Beach, County of Los Angeles, California. The project is located on the U.S. Geological Survey 7.5-minute series Long Beach, California, topographic quadrangle (within the southwestern portion of the Los Cerritos Land Grant Boundary). The elevation of the project site ranges from 19 feet above mean sea level to approximately 67 above mean sea level. The Campus is located less than a mile south of U.S. Interstate 405 (San Diego Freeway), approximately 1 mile east of U.S. Interstate 710 (Long Beach Freeway), and approximately 1 mile north of State Route 1 (Pacific Coast

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3. Project Title:

Long Beach Memorial Medical Center Expansion

4. Project Description:

The proposed project consists of a Master Plan of Land Uses that provides a conceptual framework for reorganization of the six existing land uses: (1) inpatient medical facilities, (2) outpatient medical facilities, (3) mixed-use facilities (nonresidential), (4) utilities, (5) circulation, and (6) parking. Within this conceptual framework, six project elements could be constructed within the next 5 to 10 years: (i) Todd Cancer Institute (TCI); (ii) Miller Children's Hospital (MCH)—Pediatric Inpatient Tower, Utility Trench, and Central Plant Building; (iii) Miller Children's Hospital—Pediatric Outpatient Building; (iv) Miller Children's Hospital—Link Building; (v) Roadway Realignment; and (vi) Parking Program.

The TCI would facilitate expansion of LBMMC by relocating cancer treatment programs currently located within the licensed hospital facility and other diverse locations to a single building dedicated to cancer treatment programs. The comprehensive expansion of the MCH would ultimately consist of three new buildings: the pediatric inpatient tower, the pediatric outpatient building, and the link building supporting mixed uses that would connect the inpatient tower and the outpatient building. Vehicular and pedestrian circulation patterns would be improved through realignment of selected internal roadways and a signage and wayfinding program. A phased parking program would be designed to offset the 1,394 parking stalls displaced by the project and accommodate the additional demand for 1,592 parking stalls resulting from the expansion project components. It is anticipated that the phased parking program would consider the use of surface parking areas on property owned by the Campus, nearby off-site surface parking areas that could be leased by the Campus, and possible future construction of one or more parking structures when justified by total demand.

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On Wednesday, September 8, 2004, the City of Long Beach and the Long Beach Memorial Medical Center will host a public scoping meeting to review the various project elements and solicit information on the scope of the EIR in relation to CEQA. The meeting will be held at 6:00 p.m. at the Houssels Forum (Basement), Long Beach Memorial Medical Center, 2801 Atlantic Avenue, City of Long Beach, California 90806-1737. Please direct any questions regarding this meeting to Ms. Anita Garcia.

For additional information, contact:

Ms. Anita Garcia
Project Manager
Department of Planning and Building
City of Long Beach
City Hall, 5th Floor
333 West Ocean Boulevard
Long Beach, CA 90802
Phone: (562) 570-6193
Fax: (562) 570-6068



CITY OF LONG BEACH

DEPARTMENT OF PLANNING AND BUILDING

333 West Ocean Boulevard, 5th Floor

Long Beach, CA 90802

FAX (562) 570-6753

\$25.00 FILING FEE

NOTICE OF PREPARATION

To: Distribution List

From: Community & Environmental Planning Division
Department of Planning and Building
333 West Ocean Boulevard, 5th Floor
Long Beach, CA 90802

Date Mailed: August 20, 2004

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333 WEST OCEAN BOULEVARD
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Ms. Anita Garcia
Project Manager
Department of Planning and Building
City of Long Beach
City Hall, 5th Floor
333 West Ocean Boulevard
Long Beach, CA 90802
Phone: (562) 570-6193
Fax: (562) 570-6068



CITY OF LONG BEACH

DEPARTMENT OF PLANNING AND BUILDING

333 West Ocean Boulevard, 5th Floor

Long Beach, CA 90802

FAX (562) 570-6753

\$25.00 FILING FEE

NOTICE OF PREPARATION

To: Office of Planning and Research
State Clearinghouse
Attn: Ms. Terry Roberts
1400 Tenth Street, Room 121
Sacramento, CA 95814

From: Community & Environmental Planning Division
Department of Planning and Building
333 West Ocean Boulevard, 5th Floor
Long Beach, CA 90802

Date Mailed: August 19, 2004

In conformance with Section 15082 of the State of California Environmental Quality Act (CEQA) Guidelines, the City of Long Beach Planning Commission will be the Lead Agency and will prepare an Environmental Impact Report (EIR) for the Long Beach Memorial Medical Center Expansion project. The City of Long Beach is seeking input from regulatory agencies and other interested parties regarding the scope and content of the environmental information to be included in the EIR. Scoping has been helpful to agencies in identifying the range of actions, alternatives, mitigation measures, and significant effects to be analyzed in depth in an EIR and in eliminating detailed studies of issues found to be unimportant. Responsible and trustee agencies will need to use the EIR prepared by the City of Long Beach when considering permitting or other approval for the project.

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Project Manager
Department of Planning and Building
City of Long Beach
City Hall, 5th Floor
333 West Ocean Boulevard
Long Beach, CA 90802
Phone: (562) 570-6193
Fax: (562) 570-6068

Appendix B

Comment Letters



Date: August 17, 2004
To: Lynette Ferenczy, Planner, Zoning Administration
From: Steven L. Ditmars, Lieutenant, Information Technology Division
Subject: 2801 Atlantic Ave. (Case No. 0406-20)

After reviewing the plans, the Long Beach Police Department has made the following recommendations for public safety and crime prevention.

- Entire site should be well lit
 - Avoid sodium lighting to limit yellowness, which casts shadows and distorts colors.
 - Lighting should exceed minimum requirements (recommend a *minimum* of 5 foot candle).
 - Ensure lighting is located under any eyebrows, canopies and awnings.
 - Landscaping (trees and shrubs) should not be planted near lighting fixtures to block the light.
- A video surveillance system should be in place, monitoring and recording activity throughout the premise.
- On site security should monitor premise 24 hours a day.
- If any fencing is placed around the premise, parking lot etc., it should be transparent. Wrought iron fencing is encouraged.
- No signs, advertisements, or furniture should block the windows and eliminate any visibility into/out of offices.
- No exterior payphones.
- No exterior roof access.
- Landscaping should not exceed 2' from the ground or 6' overhang. Landscaping should not block the view of any windows.
- Address clearly marked on front of structure and rooftop for air support identification.
- Alarm installation for theft and burglary protection.
- Interior office doors and exterior delivery doors should have viewers to screen person attempting to gain entry.
- No ceiling or roof access to areas where medications are stored. All doors leading to drug storage should be solid core construction.
- There should be no alcove type areas around the perimeter if the building, which could create a "hiding place" or other criminal activity.
- All trash receptacles should be enclosed.

A lighting plan should be presented, prior to approval.

If you have any questions or need further information, please feel free to contact Mike Weber at (562) 570-5805.

October 27, 2004
Page 2

SLD:mjw



Date: September 29, 2004
To: Anita Garcia, Project Manager, Department of Planning and Building
From:  Hank Teran, Deputy Fire Marshal, Fire Department
Subject: Preliminary Comments For Memorial Medical Center Expansion

In follow up to our phone conversation, I have provided you with the following preliminary comments for the Long Beach Memorial Medical Center Expansion project.

In order to provide adequate service for the project full time, a fire inspector will be requested for the duration of construction. The inspector would be dedicated solely to the Memorial Medical expansion and will be available to perform required inspections at an accelerated rate.

The Fire Inspector will also be tasked with coordinating construction issues with local fire stations to assure proper access to the emergency room and the fire protection issues that arise during construction.

Please call me at extension 82584 if you have any questions or require any further information.

cc: Scott Giles, Deputy Chief, Fire Marshal

/s/

2



FROM THE DESK OF ...

Jack Hazelrigg, Ph.D.
Greater Los Angeles County
Vector Control District
562-944-9656
jhazelrigg@glacvcd.org

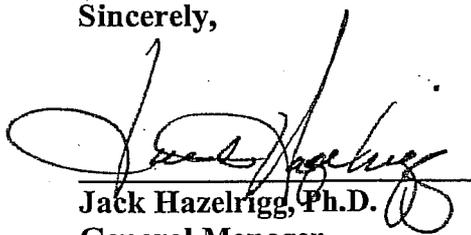
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Planning and Building Dept.
Community Planning

Anita Garcia
Department of Planning and Building
City of Long Beach, City Hall 5th Floor
333 West Ocean Blvd.
Long Beach, CA 90802

Dear Ms. Garcia:

This is to inform you, regarding the recent NOP pertaining to the Long Beach Memorial Medical Center Expansion project we recently received, that the project lies outside the jurisdictional boundaries of the District, and that the Long Beach City Health Department is the responsible agency for vector control in that area and should receive notification.

Sincerely,


Jack Hazelrigg, Ph.D.
General Manager



South Coast Air Quality Management District

21865 Copley Drive, Diamond Bar, CA 91765-4178
(909) 396-2000 • www.aqmd.gov

August 26, 2004

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Planning and Building Dept.
Community Planning

Ms. Anita Garcia
Department of Planning and Building
City of Long Beach
City Hall, 5th Floor
333 West Ocean Blvd.
Long Beach, CA 90802

Dear Ms. Garcia:

Notice of Preparation of a Draft Environmental Impact Report for Long Beach Memorial Medical Center Expansion Project

The South Coast Air Quality Management District (SCAQMD) appreciates the opportunity to comment on the above-mentioned document. The SCAQMD's comments are recommendations regarding the analysis of potential air quality impacts from the proposed project that should be included in the Draft Environmental Impact Report (EIR). Please send the SCAQMD a copy of the Draft EIR upon its completion.

Air Quality Analysis

The SCAQMD adopted its California Environmental Quality Act (CEQA) Air Quality Handbook in 1993 to assist other public agencies with the preparation of air quality analyses. The SCAQMD recommends that the Lead Agency use this Handbook as guidance when preparing its air quality analysis. Copies of the Handbook are available from the SCAQMD's Subscription Services Department by calling (909) 396-3720. Alternatively, lead agency may wish to consider using the California Air Resources Board (CARB) approved URBEMIS 2002 Model. This model is available on the CARB Website at: www.arb.ca.gov.

The Lead Agency should identify any potential adverse air quality impacts that could occur from all phases of the project and all air pollutant sources related to the project. Air quality impacts from both construction and operations should be calculated. Construction-related air quality impacts typically include, but are not limited to, emissions from the use of heavy-duty equipment from grading, earth-loading/unloading, paving, architectural coatings, off-road mobile sources (e.g., heavy-duty construction equipment) and on-road mobile sources (e.g., construction worker vehicle trips, material transport trips). Operation-related air quality impacts may include, but are not limited to, emissions from stationary sources (e.g., boilers), area sources (e.g., solvents and coatings), and vehicular trips (e.g., on- and off-road tailpipe emissions and entrained dust). Air

quality impacts from indirect sources, that is, sources that generate or attract vehicular trips should be included in the analysis. An analysis of all toxic air contaminant impacts due to the decommissioning or use of equipment potentially generating such air pollutants should also be included.

Mitigation Measures

In the event that the project generates significant adverse air quality impacts, CEQA requires that all feasible mitigation measures be utilized during project construction and operation to minimize or eliminate significant adverse air quality impacts. To assist the Lead Agency with identifying possible mitigation measures for the project, please refer to Chapter 11 of the SCAQMD CEQA Air Quality Handbook for sample air quality mitigation measures. Additionally, SCAQMD's Rule 403 – Fugitive Dust, and the Implementation Handbook contain numerous measures for controlling construction-related emissions that should be considered for use as CEQA mitigation if not otherwise required. Pursuant to state CEQA Guidelines §15126.4 (a)(1)(D), any impacts resulting from mitigation measures must also be discussed.

Data Sources

SCAQMD rules and relevant air quality reports and data are available by calling the SCAQMD's Public Information Center at (909) 396-2039. Much of the information available through the Public Information Center is also available via the SCAQMD's World Wide Web Homepage (<http://www.aqmd.gov>).

The SCAQMD is willing to work with the Lead Agency to ensure that project-related emissions are accurately identified, categorized, and evaluated. Please call Charles Blankson, Ph.D., Air Quality Specialist, CEQA Section, at (909) 396-3304 if you have any questions regarding this letter.

Sincerely,



Steve Smith, Ph.D.
Program Supervisor, CEQA Section
Planning, Rule Development and Area Sources

SS:CB:li

LAC040824-03LI
Control Number



STATE OF CALIFORNIA

Governor's Office of Planning and Research
State Clearinghouse and Planning Unit

①



Jan Boel
Acting Director

Notice of Preparation

August 20, 2004

To: Reviewing Agencies

Re: Long Beach Memorial Medical Center Expansion
SCH# 2004081142

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AUG 26 2004
Planning and Building Dept.
Community Planning

Attached for your review and comment is the Notice of Preparation (NOP) for the Long Beach Memorial Medical Center Expansion draft Environmental Impact Report (EIR).

Responsible agencies must transmit their comments on the scope and content of the NOP, focusing on specific information related to their own statutory responsibility, within 30 days of receipt of the NOP from the Lead Agency. This is a courtesy notice provided by the State Clearinghouse with a reminder for you to comment in a timely manner. We encourage other agencies to also respond to this notice and express their concerns early in the environmental review process.

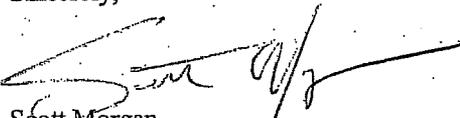
Please direct your comments to:

Anita Garcia
Long Beach City
City Hall, 5th Floor
333 West Ocean Boulevard
Long Beach, CA 90802

with a copy to the State Clearinghouse in the Office of Planning and Research. Please refer to the SCH number noted above in all correspondence concerning this project.

If you have any questions about the environmental document review process, please call the State Clearinghouse at (916) 445-0613.

Sincerely,


Scott Morgan
Project Analyst, State Clearinghouse

Attachments
cc: Lead Agency

**Document Details Report
State Clearinghouse Data Base**

SCH# 2004081142
Project Title Long Beach Memorial Medical Center Expansion
Lead Agency Long Beach, City of

Type NOP Notice of Preparation
Description The proposed project consists of a Master Plan of Land Uses that provides a conceptual framework for the reorganization of the six existing land uses: (1) inpatient medical facilities, (2) outpatient medical facilities, (3) mixed-use facilities (nonresidential), (4) utilities, (5) circulation, and (6) parking. Within this conceptual framework, six project elements should be constructed within the next 5 to 10 years: (i) Todd Cancer Institute (TCI); (ii) Miller Children's Hospital (MCH)-Pediatric Impatient Tower, Utility Trench, and Central Plant Building; (iii) Miller Children's Hospital-Pediatric Outpatient Building; (iv) Miller Children's Hospital-Link Building; (v) Roadway Realignment; and (vi) Parking Program.

Lead Agency Contact

Name Anita Garcia
Agency Long Beach City
Phone 562 570 6193
email
Address City Hall, 5th Floor
333 West Ocean Boulevard
City Long Beach
State CA **Zip** 90802
Fax

Project Location

County Los Angeles
City Long Beach
Region
Cross Streets Atlantic Avenue, Willow Street, Long Beach Boulevard
Parcel No.
Township **Range** **Section** **Base**

Proximity to:

Highways I-405, I-710, SR-1
Airports Long Beach Airport
Railways
Waterways Los Angeles River
Schools
Land Use LUD No. 7 Mixed-Use

Project Issues Air Quality; Traffic/Circulation

Reviewing Agencies Resources Agency; Department of Conservation; Department of Parks and Recreation; Department of Water Resources; Department of Fish and Game, Region 5; Department of Health Services; Native American Heritage Commission; Caltrans, District 7; Department of Toxic Substances Control; Regional Water Quality Control Board, Region 4

Date Received 08/20/2004 **Start of Review** 08/20/2004 **End of Review** 09/20/2004

Resources Agency	Public Utilities Commi	State Lands Commission	Tahoe Regional Planning Agency (TRPA)	Business, Trans & Housing	Caltrans - Division of Aeronautics	Caltrans - Planning	California Highway Patrol	Housing & Community Development	Housing Policy Division	Dept. of Transportation	Dept. of Transportation 1	Dept. of Transportation 2	Dept. of Transportation 3	Dept. of Transportation 4	Dept. of Transportation 5	Dept. of Transportation 6	Dept. of Transportation 7	Dept. of Fish & Game 3	Dept. of Fish & Game 4	Dept. of Fish & Game 5	Dept. of Fish & Game 6	Dept. of Fish & Game 6 I/II	Dept. of Fish & Game M	Other Departments	Food & Agriculture	Dept. of General Services	Dept. of Health Services	Independent Commissions/Boards	Delta Protection Commission	Office of Emergency Services	Governor's Office of Planning & Research	Native American Heritage Comm.	Resources Agency	Dept. of Boating & Waterways	California Coastal Commission	Colorado River Board	Dept. of Conservation	California Energy Commission	Dept. of Forestry & Fire Protection	Office of Historic Preservation	Dept. of Parks & Recreation	Environmental Stewardship Section	Reclamation Board	Santa Monica Mountains Conservancy	S.F. Bay Conservation & Dev't. Comm.	Dept. of Water Resources	Fish and Game	Dept. of Fish & Game	Dept. of Fish & Game 1	Dept. of Fish & Game 2	Regional Water Quality Control Board (RWQCB)															
Robert Floerke Region 3	Ken Lewis	Jean Saffino	Chery Jacques	Caltrans - Division of Aeronautics Sandy Hesnard	John Olejnik Office of Special Projects	Lisa Nichols Housing Policy Division	John Olejnik Office of Special Projects	Lisa Nichols Housing Policy Division	John Olejnik Office of Special Projects	Mike Eagan District 1	Don Anderson District 2	Jeff Pulverman District 3	Tim Sable District 4	David Murray District 5	Marc Birnbaum District 6	Cheryl J. Powell District 7	William Laudermilk Region 4	Don Chadwick Region 5, Habitat Conservation Program	Gabrina Gatchel Region 6, Habitat Conservation Program	Tammy Allen Region 6, Inyo/Mono, Habitat Conservation Program	George Isaac Marine Region	Steve Shaffer Dept. of Food and Agriculture	Robert Sleppy Environmental Services Section	Wayne Hubbard Dept. of Health/Drinking Water	Deby Eddy	Dennis Castrillo	State Clearinghouse	Debbie Treadway	Nadell Gayou	David Johnson	Elizabeth A. Fuchs	Gerald R. Zimmerman	Roseanne Taylor	Wayne Donaldson	B. Noah Tlghman	DeeDee Jones	Paul Edelman	Steve McAdam	Nadell Gayou	Scott Flint Environmental Services Division	Donald Koch Region 1	Banky Curtis	John Pagano District 8	Gayle Rosender District 9	Tom Dumas District 10	Mario Orso District 11	Bob Joseph District 12	Jim Hockenberry Division of Financial Assistance	Sue O'Leary	Jim Hockenberry Division of Financial Assistance	Steven Herrera Division of Water Rights	CEQA Tracking Center	Cathleen Hudson North Coast Region (1)	Environmental Document Coordinator San Francisco Bay Region (2)	Central Coast Region (3)	Jonathan Bishop Los Angeles Region (4)	Central Valley Region (5)	Central Valley Region (5) Fresno Branch Office	Central Valley Region (5) Redding Branch Office	Lahontan Region (6)	Lahontan Region (6) Victorville Branch Office	Colorado River Basin Region (7)	Santa Ana Region (8)	San Diego Region (9)	Other	Last Updated on 7/29/04

1910-002



COUNTY SANITATION DISTRICTS OF LOS ANGELES COUNTY

55 Workman Mill Road, Whittier, CA 90601-1400
Mailing Address: P.O. Box 4998, Whittier, CA 90607-4998
Telephone: (562) 699-7411, FAX: (562) 699-5422
www.lacsd.org

JAMES F. STAHL
Chief Engineer and General Manager

August 26, 2004

File No: 03-00.04-00

Ms. Anita Garcia, Project Manager
Department of Planning and Building
City of Long Beach
333 West Ocean Boulevard, 5th Floor
Long Beach, CA 90802

RECEIVED
SEP 09 2004
Planning and Building Dept.
Community Planning

Dear Ms. Garcia:

Long Beach Memorial Medical Center Expansion Project

The County Sanitation Districts of Los Angeles County (Districts) received a Notice of Preparation of a Draft Environmental Impact Report and an Initial Study for the subject project on August 23, 2004. The proposed development is located within the jurisdictional boundaries of District No. 3. We offer the following comments regarding sewerage service:

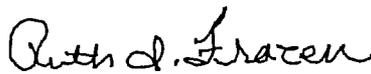
1. The wastewater flow originating from the proposed project will discharge to local sewer lines, which are not maintained by the Districts, for conveyance to the Districts' Joint Outfall "C" Unit 3F Trunk Sewer, located in 27th Street, Patterson Street, and in a right of way between these two streets east of Long Beach Boulevard. This 18-inch diameter trunk sewer has a design capacity of 2.3 million gallons per day (mgd) and conveyed a peak flow of 0.7 mgd at the points of connection when last measured in 2001. Although capacity exists for the proposed project at the local connection points, downstream of these points the Districts' Joint Outfall "C" Unit 1 is at capacity. Relief of this section of trunk sewer is currently in design, however, until the design and subsequent construction of the trunk line are complete, new or increased discharges are allowed only during off-peak hours. Relief sewer construction is anticipated to be completed in 2006, however, design and/or construction issues could cause delays. Completion of the Todd Cancer Institute, Phase I is anticipated to be September 2006. Trunk sewer facilities may not be available at that time to accept unrestricted discharges from the Todd Cancer Institute, Phase I.
2. Discharges from acute care and skilled nursing care hospitals are considered industrial discharges. Therefore, the proposed project will require amendments to the current Districts' permit for Industrial Wastewater Discharge. Project developers should contact the Districts' Industrial Waste Section at extension 2900, and will be required to forward copies of final plans and supporting information for the proposed project to the Districts for review and approval before beginning project construction.
3. Section 3.17(e) states that "use of the County's capacity by the proposed project is subject to approval by the City of Long Beach," while in fact, use of the Districts' sewers must be approved by the Districts.
4. The wastewater generated by the proposed project will be treated at the Joint Water Pollution Control Plant located in the City of Carson, which has a design capacity of 385 mgd and currently processes an average flow of 321.6 mgd.
5. The expected increase in average wastewater flow from the project site at build-out is approximately 150,000 gallons per day.

6. The Districts maintain sewerage facilities within the project area that may be affected by the proposed project. Approval to construct improvements within a Districts' sewer easement and/or over or near a Districts' sewer is required before construction may begin. A copy of the Districts' buildover procedures and requirements is enclosed for your information. For additional information regarding the buildover procedure, please contact Mr. Darrell Hatch at extension 2766.
7. The Districts are empowered by the California Health and Safety Code to charge a fee for the privilege of connecting (directly or indirectly) to the Districts' Sewerage System or increasing the existing strength and/or quantity of wastewater attributable to a particular parcel or operation already connected. This connection fee is required to construct an incremental expansion of the Sewerage System to accommodate the proposed project, which will mitigate the impact of this project on the present Sewerage System. Payment of a connection fee will be required before a permit to connect to the sewer is issued. A copy of the Connection Fee Information Sheet is enclosed for your convenience. For more specific information regarding the connection fee application procedure and fees, please contact the Connection Fee Counter at extension 2727.
8. In order for the Districts to conform to the requirements of the Federal Clean Air Act (CAA), the design capacities of the Districts' wastewater treatment facilities are based on the regional growth forecast adopted by the Southern California Association of Governments (SCAG). Specific policies included in the development of the SCAG regional growth forecast are incorporated into the Air Quality Management Plan, which is prepared by the South Coast Air Quality Management District in order to improve air quality in the South Coast Air Basin as mandated by the CAA. All expansions of Districts' facilities must be sized and service phased in a manner that will be consistent with the SCAG regional growth forecast for the counties of Los Angeles, Orange, San Bernardino, Riverside, Ventura, and Imperial. The available capacity of the Districts' treatment facilities will, therefore, be limited to levels associated with the approved growth identified by SCAG. As such, this letter does not constitute a guarantee of wastewater service, but is to advise you that the Districts intend to provide this service up to the levels that are legally permitted and to inform you of the currently existing capacity and any proposed expansion of the Districts' facilities.

If you have any questions, please contact the undersigned at (562) 699-7411, extension 2717.

Very truly yours,

James F. Stahl



Ruth I. Frazen
Engineering Technician
Planning & Property Management Section

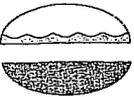
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Enclosures

c: D. Hatch

S. Wienke

394173.1



BUILDOVER PROCEDURES AND REQUIREMENTS

The Districts do not encourage the building of improvements over sewer easements as such encroachments may result in limited access or damage to the underlying sewers. The Districts consider "buildover" proposals on a case-by-case basis. The following explains the Districts' procedure for processing buildover requests.

A developer or property owner (applicant) desiring to construct an improvement over a Districts' sewer easement is required to obtain a "Buildover Agreement" (BOA) from the Districts. Four (4) sets of the following information are required from the developer or property owner in order for Districts' staff to evaluate the proposal:

1. A vicinity map showing the general location of the proposed improvements in relation to the surrounding streets;
2. A grading plan* and site plan showing the location of the sewer easement, sewer line, and manholes in relation to the proposed improvement. Include information regarding the removal and replacement of unsuitable soil along with cut/fill depths;
3. The calculated footing** and/or traffic loadings resulting from the project, project-related activity, and post-construction activity. A list of construction equipment to be used at the site and a soils report for the project are also required; and
4. A foundation plan and a footing detail,** showing the elevations* and locations of the footings for the improvement(s). Also include profile and/or cross section drawings showing the proposed improvement(s) in relation to the sewer line.

NOTE: Your request will not be processed unless the above-specified information is provided.***

This information is simultaneously forwarded to various departments within the Districts for review. Their comments serve as the basis by which the Districts' acceptability of a proposed buildover case is determined.

Subsequent to the Districts' review of the proposed buildover request, the applicant will be advised in writing of the Districts' decision. The applicant is then required to submit six (6) sets of plans that incorporate corrections, as applicable. The submitted plans must include the following note:

No grading, soil removal, soil fill, or construction activity shall be performed within the Districts' easement without on-site approval of the proposed activity by a Districts' inspector. Contractor shall contact Mr. Phil Friess, Sewerage System Manager, at (310) 638-1161, a minimum of two weeks prior to the start of construction to make the necessary arrangements.

Upon receipt of the final plans, the Districts will mail a BOA detailing the conditions under which the proposed improvement is acceptable to the Districts. It shall be the responsibility of the fee owner of the property to sign the BOA (the signature must be notarized) and return it to the Districts. The BOA is subsequently executed by the Districts' Chief Engineer (or designee) and is submitted to the Los Angeles County Recorder's Office for recordation. After the recorded BOA is received from the Recorder's Office, a copy of the document along with one set of final plans is returned to the applicant.

Under normal conditions, approximately six to eight weeks are required for Districts' staff to properly evaluate a buildover proposal. It is recommended that the Districts be contacted as early as possible during planning of the project. If you have any further questions regarding Buildover Procedures and Requirements, please contact Mr. Darrell Hatch at (562) 699-7411, extension 2766, or by e-mail at dhatch@lacsdsd.org.

All elevations must be based on U.S.G.S. datum.

All plans must be prepared by a registered Civil/Structural Engineer in the State of California.

*For proposed minor surface improvements, contact the Districts prior to submittal. Some of the information requirements may be waived.

**INFORMATION SHEET FOR APPLICANTS
PROPOSING TO CONNECT OR INCREASE THEIR DISCHARGE TO
THE COUNTY SANITATION DISTRICTS OF LOS ANGELES COUNTY SEWERAGE SYSTEM**

THE PROGRAM

The County Sanitation Districts of Los Angeles County are empowered by the California Health and Safety Code to charge a fee for the privilege of connecting to a Sanitation District's sewerage system. Your connection to a City or County sewer constitutes a connection to a Sanitation District's sewerage system as these sewers flow into a Sanitation District's system. The County Sanitation Districts of Los Angeles County provide for the conveyance, treatment, and disposal of your wastewater. **PAYMENT OF A CONNECTION FEE TO THE COUNTY SANITATION DISTRICTS OF LOS ANGELES COUNTY WILL BE REQUIRED BEFORE A CITY OR THE COUNTY WILL ISSUE YOU A PERMIT TO CONNECT TO THE SEWER.**

I. WHO IS REQUIRED TO PAY A CONNECTION FEE?

1. Anyone connecting to the sewerage system for the first time for any structure located on a parcel(s) of land within a County Sanitation District of Los Angeles County.
2. Anyone increasing the quantity of wastewater discharged due to the construction of additional dwelling units on or a change in land usage of a parcel already connected to the sewerage system.
3. Anyone increasing the improvement square footage of a commercial or institutional parcel by more than 25 percent.
4. Anyone increasing the quantity and/or strength of wastewater from an industrial parcel.
5. If you qualify for an Ad Valorem Tax or Demolition Credit, connection fee will be adjusted accordingly.

II. HOW ARE THE CONNECTION FEES USED?

The connection fees are used to provide additional conveyance, treatment, and disposal facilities (capital facilities) which are made necessary by new users connecting to a Sanitation District's sewerage system or by existing users who significantly increase the quantity or strength of their wastewater discharge. The Connection Fee Program insures that all users pay their fair share for any necessary expansion of the system.

III. HOW MUCH IS MY CONNECTION FEE?

Your connection fee can be determined from the Connection Fee Schedule specific to the Sanitation District in which your parcel(s) to be connected is located. A Sanitation District boundary map is attached to each corresponding Sanitation District Connection Fee Schedule. Your City or County sewer permitting office has copies of the Connection Fee Schedule(s) and Sanitation District boundary map(s) for your parcel(s). If you require verification of the Sanitation District in which your parcel is located, please call the Sanitation Districts' information number listed under Item IX below.

IV. WHAT FORMS ARE REQUIRED*?

The Connection Fee application package consists of the following:

1. Information Sheet for Applicants (this form)
2. Application for Sewer Connection

DEPARTMENT OF TRANSPORTATION

DISTRICT 7, REGIONAL PLANNING

IGR/CEQA BRANCH

120 S. SPRING STREET

LOS ANGELES, CA 90012

PHONE (213) 897-4429

FAX (213) 897-1337



August 31, 2004

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Planning and Building Dept.
Community Planning

IGR/CEQA cs/040858

NOP

City of Long Beach

Long Beach Memorial Medical

Center Expansion

2801 Atlantic Ave.

Vic. LA-405-5.54

SCH# 2004081142

Ms. Anita Garcia
City of Long Beach
Department of Planning and Building
333 W. Ocean Blvd.
Long Beach, CA 90802

Dear Ms. Garcia:

Thank you for including the California Department of Transportation in the environmental review process for the above-mentioned project. Based on the information received, we have the following comments:

A traffic study will be needed to evaluate the project's overall impact on the State transportation system including the mainline I-405 (San Diego Freeway), I-710 (Long Beach Freeway) and all affected freeway on/off ramps. The traffic study should include, but not be limited to:

- 1) Assumptions used to develop trip generation/distribution percentages and assignments.
- 2) An analysis of ADT, AM and PM peak hour volumes for both the existing and future (year 2025) conditions. This should also include level-of-service calculations using the HCM 2000 methodology. The analysis should include the following:
 - existing traffic volumes
 - project and cumulative traffic volumes
 - future traffic volumes projections for year 2025
 - existing level-of-service (LOS) calculations
 - project and cumulative level-of-service (LOS) calculations
- 3) Any mitigation measures proposed to alleviate traffic impact should include, but not be limited to the following:
 - financing
 - scheduling considerations
 - implementation responsibilities
 - monitoring plan
- 4) The Equitable Share responsibility for traffic mitigation measures will need to be calculated as determined by the percentage increase in projected peak period trips resulting in operational impacts to the mainline I-405 and I-710 freeways and freeway on/off-ramps. The City should refer to Appendix "B" Methodology for Calculating Equitable Mitigation Measures found in our Caltrans Guide for the Preparation of Traffic Impact Studies. The Guide can be found on the internet at:

<http://www.dot.ca.gov/hq/traffops/developserv/operationalsystems/reports/tisguide.pdf>

Ms. Anita Garcia
August 31, 2004
Page Two

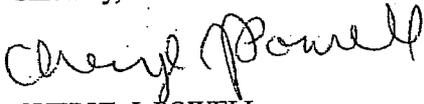
We recommend that construction related truck trips on State highways be limited to off-peak commute periods. Transport of over-size or over-weight vehicles on State highways will need a Caltrans Transportation Permit.

We would appreciate advance copies of the DEIR and traffic study to facilitate internal Departmental review. Copies should be sent to the undersigned:

Cheryl J. Powell, IGR/CEQA Program Manager
California Department of Transportation
District 7, Office of Regional Planning
120 South Spring Street
Los Angeles, CA 90012

If you have any questions regarding our comments, refer to our internal IGR/CEQA Record # cs/040858, and please do not hesitate to contact me at (213) 897-3747.

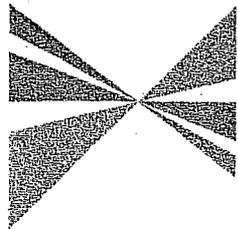
Sincerely,



CHERYL J. POWELL
IGR/CEQA Branch Chief

cc: Mr. Scott Morgan, State Clearinghouse

HERN CALIFORNIA



ASSOCIATION of GOVERNMENTS

Main Office

818 West Seventh Street

12th Floor

Los Angeles, California

90017-3435

t (213) 236-1800

f (213) 236-1825

www.scag.ca.gov

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Orange County: Chris Norby, Orange County • ... lyn Poe, Los Alamitos • Lou Bone, Tustin • Art ... n, Buena Park • Richard Chavez, Anaheim ... die Cook, Huntington Beach • Cathryn ... ung, Laguna Niguel • Richard Dixon, Lake ... st • Alta Duke, La Palma • Bev Perry, Brea • ... Ridgeway, Newport Beach

Riverside County: Marion Ashley, Riverside ... lly • Thomas Buckley, Lake Elsinore • Bonnie ... inger, Moreno Valley • Ron Loveridge, ... side • Greg Pettis, Cathedral City • Ron ... rts, Temecula

Bernardino County: Paul Biane, San ... ardino County • Bill Alexander, Rancho ... monga • Edward Burgnon, Town of Apple ... y • Lawrence Dale, Barstow • Lee Ann Garcia, ... d Terrace • Susan Longville, San Bernardino • ... Ontario • Deborah Robertson, Rialto

San Diego County: Judy Mikels, Ventura County • ... J., Simi Valley • Carl Morehouse, San ... aventura • Toni Young, Port Hueneme

San Joaquin County Transportation Authority: ... es Smith, Orange County

San Joaquin County Transportation Commission: ... t Lowe, Hemet

San Joaquin County Transportation Commission: Bill ... s, Simi Valley

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September 8, 2004

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SEP 15 2004

Ms. Anita Garcia
Department of Planning and Building
City of Long Beach
City Hall, 5th Floor
333 West Ocean Boulevard
Long Beach, CA 90802

Planning and Building Dept.
Community Planning

RE: **Comments on the Notice of Preparation for a Draft Supplemental Environmental Impact Report for the Long Beach Memorial Medical Center Expansion Project – SCAG No. 1 20040557**

Dear Ms. Garcia:

Thank you for submitting the **Notice of Preparation for a Draft Supplemental Environmental Impact Report for the Long Beach Memorial Medical Center Expansion Project** to SCAG for review and comment. As areawide clearinghouse for regionally significant projects, SCAG reviews the consistency of local plans, projects, and programs with regional plans. This activity is based on SCAG's responsibilities as a regional planning organization pursuant to state and federal laws and regulations. Guidance provided by these reviews is intended to assist local agencies and project sponsors to take actions that contribute to the attainment of regional goals and policies.

We have reviewed the **Notice of Preparation**, and have determined that **the proposed Project is regionally significant per California Environmental Quality Act (CEQA) Guidelines (Section 15206)**. The proposed Project considers the construction of a commercial office building encompassing more than 250,000 square feet of floor space. CEQA requires that EIRs discuss any inconsistencies between the proposed project and the applicable general plans and **regional plans (Section 15125 [d])**. If there are inconsistencies, an explanation and rationalization for such inconsistencies should be provided.

Policies of SCAG's Regional Comprehensive Plan and Guide and Regional Transportation Plan, which may be applicable to your project, are outlined in the attachment. **We expect the Draft EIR to specifically cite the appropriate SCAG policies and address the manner in which the Project is consistent with applicable core policies or supportive of applicable ancillary policies. Please use our policy numbers to refer to them in your Draft EIR. Also, we would encourage you to use a side-by-side comparison of SCAG policies with a discussion of the consistency or support of the policy with the Proposed Project.**

Please provide a minimum of 45 days for SCAG to review the Draft EIR when this document is available. If you have any questions regarding the attached comments, please contact me at (213) 236-1867. Thank you.

Sincerely,

JEFFREY M. SMITH, AICP
Senior Regional Planner
Intergovernmental Review

**COMMENTS ON THE PROPOSAL TO DEVELOP A
DRAFT ENVIRONMENTAL IMPACT REPORT
FOR THE
LONG BEACH MEMORIAL MEDICAL CENTER EXPANSION PROJECT
SCAG NO. I 20040557**

PROJECT DESCRIPTION

The proposed Project considers a master plan for land uses and the development of specific project elements within an approximately 54-acre project area within the City of Long Beach. Specifically, the proposed Project is located at 2801 Atlantic Avenue in the City of Long Beach.

CONSISTENCY WITH REGIONAL COMPREHENSIVE PLAN AND GUIDE POLICIES

The **Growth Management Chapter (GMC)** of the Regional Comprehensive Plan and Guide (RCPG) contains the following policies that are particularly applicable and should be addressed in the Draft EIR for the Long Beach Memorial Medical Center Expansion Project.

3.03 The timing, financing, and location of public facilities, utility systems, and transportation systems shall be used by SCAG to implement the region's growth policies.

GMC POLICIES RELATED TO THE RCPG GOAL TO IMPROVE THE REGIONAL STANDARD OF LIVING

The Growth Management goals to develop urban forms that enable individuals to spend less income on housing cost, that minimize public and private development costs, and that enable firms to be more competitive, strengthen the regional strategic goal to stimulate the regional economy. The evaluation of the proposed project in relation to the following policies would be intended to guide efforts toward achievement of such goals and does not infer regional interference with local land use powers.

3.05 Encourage patterns of urban development and land use, which reduce costs on infrastructure construction and make better use of existing facilities.

3.09 Support local jurisdictions' efforts to minimize the cost of infrastructure and public service delivery, and efforts to seek new sources of funding for development and the provision of services.

- 3.10 *Support local jurisdictions' actions to minimize red tape and expedite the permitting process to maintain economic vitality and competitiveness.*

GMC POLICIES RELATED TO THE RCPG GOAL TO IMPROVE THE REGIONAL QUALITY OF LIFE

The Growth Management goals to attain mobility and clean air goals and to develop urban forms that enhance quality of life, that accommodate a diversity of life styles, that preserve open space and natural resources, and that are aesthetically pleasing and preserve the character of communities, enhance the regional strategic goal of maintaining the regional quality of life. The evaluation of the proposed project in relation to the following policies would be intended to provide direction for plan implementation, and does not allude to regional mandates.

- 3.12 *Encourage existing or proposed local jurisdictions' programs aimed at designing land uses which encourage the use of transit and thus reduce the need for roadway expansion, reduce the number of auto trips and vehicle miles traveled, and create opportunities for residents to walk and bike.*
- 3.14 *Support local plans to increase density of future development located at strategic points along the regional commuter rail, transit systems, and activity centers.*
- 3.18 *Encourage planned development in locations least likely to cause environmental impact.*
- 3.21 *Encourage the implementation of measures aimed at the preservation and protection of recorded and unrecorded cultural resources and archaeological sites.*
- 3.22 *Discourage development, or encourage the use of special design requirements, in areas with steep slopes, high fire, flood, and seismic hazards.*
- 3.23 *Encourage mitigation measures that reduce noise in certain locations, measures aimed at preservation of biological and ecological resources, measures that would reduce exposure to seismic hazards, minimize earthquake damage, and to develop emergency response and recovery plans.*

GMC POLICIES RELATED TO THE RCPG GOAL TO PROVIDE SOCIAL, POLITICAL, AND CULTURAL EQUITY

The Growth Management Goal to develop urban forms that avoid economic and social polarization promotes the regional strategic goal of minimizing social and geographic disparities and of reaching equity among all segments of society. The evaluation of the

proposed project in relation to the policy stated below is intended guide direction for the accomplishment of this goal, and does not infer regional mandates and interference with local land use powers.

3.27 Support local jurisdictions and other service providers in their efforts to develop sustainable communities and provide, equally to all members of society, accessible and effective services such as: public education, housing, health care, social services, recreational facilities, law enforcement, and fire protection.

REGIONAL TRANSPORTATION PLAN

The **2004 Regional Transportation Plan (RTP)** also has goals and policies that are pertinent to this proposed project. This RTP links the goal of sustaining mobility with the goals of fostering economic development, enhancing the environment, reducing energy consumption, promoting transportation-friendly development patterns, and encouraging fair and equitable access to residents affected by socio-economic, geographic and commercial limitations. The RTP continues to support all applicable federal and state laws in implementing the proposed project. Among the relevant goals and policies of the RTP are the following:

Regional Transportation Plan Goals

- Maximize mobility and accessibility for all people and goods in the region.
- Ensure travel safety and reliability for all people and goods in the region.
- Preserve and ensure a sustainable regional transportation system.
- Maximize the productivity of our transportation system.
- Protect the environment, improve air quality and promote energy efficiency.
- Encourage land use and growth patterns that complement our transportation investments.

Regional Transportation Plan Policies

- Transportation investments shall be based on SCAG's adopted Regional Performance Indicators.

Performance Indicator	Performance Measures	Definition	Performance Outcome
Mobility	• Average Daily Speed	Speed experienced by travelers regardless of mode.	10% Improvement
	• Average Daily Delay	Delay-excess travel time resulting from the difference between a reference speed and actual speed. Total daily delay and daily delay per capita are indicators used.	40% Improvement
Accessibility	• Percent PM peak work trips within 45		Auto 90% Transit 37%

	<ul style="list-style-type: none"> minutes of home Distribution of work trip travel times 		Auto 8% Improvement Transit 8% Improvement
Reliability	<ul style="list-style-type: none"> Percent variation in travel time 	Day-to-day change in travel times experienced by travelers. Variability results from accidents, weather, road closures, system problems and other non-recurrent conditions.	10% Improvement
Safety	<ul style="list-style-type: none"> Accident Rates 	Measured in accidents per million vehicle miles by mode.	0.3% Improvement
Performance Indicator	Performance Measures	Definition	Performance Outcome
Cost Effectiveness	<ul style="list-style-type: none"> Benefit-to-Cost (B/C) Ratio 	Ratio of benefits of RTP investments to the associated investments costs.	\$3.08
Productivity	<ul style="list-style-type: none"> Percent capability utilized during peak conditions 	Transportation infrastructure capacity and services provided <ul style="list-style-type: none"> Roadway Capacity - vehicles per hour per lane by type of facility. Transit Capacity - seating capacity utilized by mode. 	20% Improvement at known bottlenecks N/A
Sustainability	<ul style="list-style-type: none"> Total cost per capita to sustain current system performance 	Focus is on overall performance, including infrastructure condition. Preservation measure is a sub-set of sustainability.	\$20 per capita, primarily in preservation costs
Preservation	<ul style="list-style-type: none"> Maintenance cost per capita to preserve system at base year conditions 	Focus is on infrastructure condition. Sub-set of sustainability.	Maintain current conditions
Environmental	<ul style="list-style-type: none"> Emissions generated by travel 	Measured/forecast emissions include CO, NOX, PM10, SOX and VOC. CO2 as secondary measure to reflect greenhouse emissions.	Meets conformity requirements
Environmental Justice	<ul style="list-style-type: none"> Expenditures by quintile and ethnicity Benefits/burden by quintiles 	Proportionate share of expenditures in the 2004 RTP by each quintile. Proportionate share of benefits to each quintile/ethnicity. Proportionate share of additional airport noise by ethnic group.	No disproportionate impact to any group or quintile

- Ensuring safety, adequate maintenance, and efficiency of operations on the existing multi-modal transportation system will be RTP priorities and will be balanced against the need for system expansion investments.
- RTP land use and growth strategies that differ from currently expected trends will

require a collaborative implementation program that identifies required actions and policies by all affected agencies and sub-regions.

- HOV gap closures that significantly increase transit and rideshare usage will be supported and encouraged, subject to Policy #1.

AIR QUALITY CHAPTER CORE ACTIONS

The **Air Quality Chapter** core actions related to the proposed project includes:

- 5.07 *Determine specific programs and associated actions needed (e.g., indirect source rules, enhanced use of telecommunications, provision of community based shuttle services, provision of demand management based programs, or vehicle-miles-traveled/emission fees) so that options to command and control regulations can be assessed.*
- 5.11 *Through the environmental document review process, ensure that plans at all levels of government (regional, air basin, county, subregional and local) consider air quality, land use, transportation and economic relationships to ensure consistency and minimize conflicts.*

WATER QUALITY CHAPTER RECOMMENDATIONS AND POLICY OPTIONS

The **Water Quality Chapter** core recommendations and policy options relate to the two water quality goals: to restore and maintain the chemical, physical and biological integrity of the nation's water; and, to achieve and maintain water quality objectives that are necessary to protect all beneficial uses of all waters.

- 11.07 *Encourage water reclamation throughout the region where it is cost-effective, feasible, and appropriate to reduce reliance on imported water and wastewater discharges. Current administrative impediments to increased use of wastewater should be addressed.*

CONCLUSIONS

All feasible measures needed to mitigate any potentially negative regional impacts associated with the proposed project should be implemented and monitored, as required by CEQA.

SOUTHERN CALIFORNIA ASSOCIATION OF GOVERNMENTS

Roles and Authorities

THE SOUTHERN CALIFORNIA ASSOCIATION OF GOVERNMENTS (SCAG) is a *Joint Powers Agency* established under California Government Code Section 6502 et seq. Under federal and state law, SCAG is designated as a Council of Governments (COG), a Regional Transportation Planning Agency (RTPA), and a Metropolitan Planning Organization (MPO). SCAG's mandated roles and responsibilities include the following:

SCAG is designated by the federal government as the Region's *Metropolitan Planning Organization* and mandated to maintain a continuing, cooperative, and comprehensive transportation planning process resulting in a Regional Transportation Plan and a Regional Transportation Improvement Program pursuant to 23 U.S.C. '134, 49 U.S.C. '5301 et seq., 23 C.F.R. '450, and 49 C.F.R. '613. SCAG is also the designated *Regional Transportation Planning Agency*, and as such is responsible for both preparation of the Regional Transportation Plan (RTP) and Regional Transportation Improvement Program (RTIP) under California Government Code Section 65080 and 65082 respectively.

SCAG is responsible for developing the demographic projections and the integrated land use, housing, employment, and transportation programs, measures, and strategies portions of the *South Coast Air Quality Management Plan*, pursuant to California Health and Safety Code Section 40460(b)-(c). SCAG is also designated under 42 U.S.C. '7504(a) as a *Co-Lead Agency* for air quality planning for the Central Coast and Southeast Desert Air Basin District.

SCAG is responsible under the Federal Clean Air Act for determining *Conformity* of Projects, Plans and Programs to the State Implementation Plan, pursuant to 42 U.S.C. '7506.

Pursuant to California Government Code Section 65089.2, SCAG is responsible for *reviewing all Congestion Management Plans (CMPs) for consistency with regional transportation plans* required by Section 65080 of the Government Code. SCAG must also evaluate the consistency and compatibility of such programs within the region.

SCAG is the authorized regional agency for *Inter-Governmental Review* of Programs proposed for federal financial assistance and direct development activities, pursuant to Presidential Executive Order 12,372 (replacing A-95 Review).

SCAG reviews, pursuant to Public Resources Code Sections 21083 and 21087, Environmental Impacts Reports of projects of regional significance for consistency with regional plans [California Environmental Quality Act Guidelines Sections 15206 and 15125(b)].

Pursuant to 33 U.S.C. '1288(a)(2) (Section 208 of the Federal Water Pollution Control Act), SCAG is the authorized *Areawide Waste Treatment Management Planning Agency*.

SCAG is responsible for preparation of the *Regional Housing Needs Assessment*, pursuant to California Government Code Section 65584(a).

SCAG is responsible (with the Association of Bay Area Governments, the Sacramento Area Council of Governments, and the Association of Monterey Bay Area Governments) for preparing the *Southern California Hazardous Waste Management Plan* pursuant to California Health and Safety Code Section 25135.3.

Anita Garcia, Project Manager

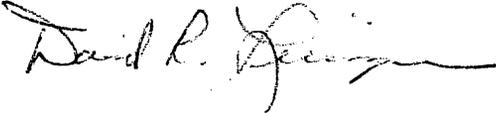
October 27, 2004

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Hazard Severity Zones or Fire Zone 4, archeological and cultural resources, and the County Oak Tree Ordinance. Potential impacts in these areas should be addressed in the final Environmental Impact Report.

If you have any additional questions, please contact this office at (323) 890-4330.

Very truly yours,

A handwritten signature in black ink, appearing to read "David R. Leinger". The signature is fluid and cursive, with a long horizontal stroke at the end.

DAVID R. LEINGER, CHIEF, FORESTRY DIVISION
PREVENTION BUREAU

DRL:sc