V. ALTERNATIVES

A. OVERVIEW OF ALTERNATIVES ANALYSIS

1. GUIDANCE AND SETTING FOR ANALYSIS

a. Regulatory Requirements for Identifying and Analyzing Project Alternatives

The identification and analysis of alternatives is a fundamental concept of the environmental review process under CEQA. CEQA Guidelines Section 15126.6 addresses the required discussion of alternatives to proposed projects in an EIR and the intended use of such information. Section 15126.6(a) states:

An EIR shall describe a range of reasonable alternatives to the project, or to the location of the project, which would feasibly attain most of the basic objectives of the project, but would avoid or substantially lessen any of the significant effects of the project, and evaluate the comparative merits of the alternatives. An EIR need not consider every conceivable alternative to a project. Rather it must consider a reasonable range of potentially feasible alternatives that will foster informed decision-making and public participation. An EIR is not required to consider alternatives which are infeasible.

The CEQA Guidelines further clarify in Section 15126.6(b):

Because the EIR must identify ways to mitigate or avoid the significant effects that a project may have on the environment (Public Resources Code Section 21002.1), the discussion of alternatives shall focus on alternatives to the project or its location which are capable of avoiding or substantially lessening any significant effects of the project, even if these alternatives would impede to some degree the attainment of the project objectives, or would be more costly.

Thus, an EIR for any project that is subject to CEQA review must consider a reasonable range of alternatives to the project which: 1) substantially lessen the project's significant environmental impacts; and 2) that are feasible and may substantially accomplish the proposed project goals.

The CEQA Guidelines Section 15126.6(f)(1) provides additional factors that may be taken into account when addressing the feasibility of alternatives. These factors include:

[S]ite suitability, economic viability, availability of infrastructure, general plan consistency, other plans or regulatory limitations, jurisdictional boundaries. . . and whether the proponent can reasonably acquire, control or otherwise have access to the alternative site. . .

The range of alternatives required within an EIR is governed by the "rule of reason." Specifically, CEQA Guidelines Section 15126.6(c) provides that:

The range of potential alternatives to the proposed project shall include those that could feasibly accomplish most of the basic objectives of the project and could avoid or substantially lessen one or more of the significant effects. The EIR should briefly describe the rationale for selecting the alternatives to be discussed. The EIR should also identify any alternatives that were considered by the Lead Agency but were rejected as infeasible during the scoping process and briefly explain the reasons underlying the Lead Agency's determination. Additional information explaining the choice of alternatives may be included in the administrative record. Among the factors that may be used to eliminate alternatives from detailed consideration in an EIR are: (i) failure to meet most of the basic project objectives, (ii) infeasibility, or (iii) inability to avoid significant environmental impacts.

The CEQA Guidelines also require the analysis of a "No Project" alternative in addition to any other feasible alternatives identified. CEQA Guidelines Section 15126.6(e). The "No Project" alternative discusses the existing conditions at the time the Notice of Preparation ("NOP") is published, as well as what would be reasonably expected to occur in the foreseeable future if the project were not approved. CEQA Guidelines Section 15126.6(e)(2).

The impact analysis, as detailed in *Section IV: Environmental Impact Analysis* of this Draft SEIR, concludes that the proposed Project will not cause significant unavoidable impacts after the implementation of the standard conditions and requirements, project design features, previously adopted mitigation measures and recommended new mitigation measures, with the exception of significant (temporary) air quality and noise impacts during the construction phase of the Project.

The Applicant requests approval of a Zone Change and Height District Change to revise the conditions of the current [T][Q]C2-2D-O zoning designation and an amendment to the existing Master Plan and Development Agreement to permit an additional 100 new inpatient beds and ancillary medical services (equivalent of 200,000 square feet of floor area), and parking on the CSMC Campus. This Project is intended to serve the growing demand for medical services as the area's population increases, as well as to accommodate updated medical technologies and increase efficiency within the CSMC Campus. The objectives of the Project are stated as follows:

- To continue to provide high quality medical services and advanced research capabilities at the CSMC Campus;
- To accomplish better utilization of limited CSMC Campus space;
- To provide an additional 100 inpatient beds in the Southern California region, which has been consistently losing beds and other inpatient medical services over the last decade;
- To provide a public benefit and fulfill a healthcare need for the community and region;
- To facilitate a balanced distribution of healthcare, emergency room and trauma services throughout the Los Angeles region;

- To support improved medical technologies that will enhance CSMC's ability to provide high quality medical care to the community;
- To provide needed inpatient diagnostic and treatment facilities, research facilities, medical suites, and administrative space to support customer and community demand for these services;
- To remain committed to fulfilling the intent of the Master Plan and demonstrating consistency with the City of Los Angeles comprehensive planning programs;
- To provide development that is thoughtfully designed, that reflects a refined cohesive image of the CSMC Campus as an integrated complex of buildings and functions, and that balances with the surrounding community;
- To provide adequate and convenient parking for each CSMC Campus component, including the Project; and
- To provide improvements to the pedestrian and vehicular circulation patterns within the CSMC Campus that will maintain and improve accessibility, safety, efficiency and convenience for patients, visitors, and staff.

b. Alternatives Analysis Format and Methodology

CEQA Guidelines Section 15126.6(d) provides that the degree of analysis required for each alternative need not be exhaustive, but rather should be at a level of detail that is reasonably feasible and shall include "sufficient information about each alternative to allow meaningful evaluation, analysis, and comparison with the proposed project." Under CEQA Guidelines Section 15151, the EIR must contain "a sufficient degree of analysis to provide decision-makers with information which enables them to make a decision which intelligently takes account of environmental consequences." Hence, the analysis of environmental effects of the Project alternatives need not be as thorough or detailed as the analysis of the Project itself.

The level of analysis in the following sections is sufficient to determine whether the overall environmental impacts would be less, similar or greater than the corresponding impacts of the proposed Project. In addition, each alternative is evaluated to determine whether the Project objectives, identified above and in *Section II: Project Description*, would be substantially attained by the alternative.

It should be noted that since the proposed Project consists of an amendment to the Master Plan to include a net additional 100 inpatient beds (equivalent to 200,000 square feet of floor area for medical uses) on the CSMC Campus, each alternative will analyze the net incremental impacts of the Project alternative beyond those determined in the Original EIR for build-out of the Master Plan, as well as changes to the new West Tower to be constructed at the Project Site. Similarly, as implemented throughout this Draft SEIR, the level of significance determination for

each alternative will be based on the net incremental impact for each environmental issue beyond the impacts determined in the Original EIR for build-out of the Master Plan.

The evaluation of each alternative also considers the anticipated net environmental impacts after implementation of feasible mitigation measures. The net impacts of the alternatives for each environmental issue area are classified as either having no impact, a less than significant impact or a significant and unavoidable impact. These impacts are then compared to the corresponding impact for the Project in each environmental issue area. To facilitate the comparison, the analysis identifies whether the net incremental impact would clearly be less, similar, or greater than that identified for the Project. Finally, the evaluation provides a comparative analysis of the alternative and its ability to attain the basic Project objectives.

2. ALTERNATIVES SELECTION

a. Potential Project Alternatives Considered but Rejected

(1) Alternative Sites

Section 15126.6(a) of the CEQA Guidelines suggests that an alternate location should be included in the range of reasonable alternatives to a project evaluated in an EIR, when feasible. However, in this case there is no feasible alternative site that could reasonably fulfill the basic objectives of the Project.

The Original EIR identified outstanding unmitigatable impacts related to operational phase (long-term) air quality (due to mobile emissions and toxic air contaminants), operational phase (long-term) fire protection and police services, operational phase (long-term) water supply and sewer services, and operational phase (long-term) solid and hazardous waste disposal. The selection of alternatives for the Project focused primarily on reducing overall construction (short-term) impacts, with particular focus on air quality and noise, as well as reducing operational (long-term) traffic impacts to less than significant levels without required mitigation implementation, as currently required under the proposed Project. The General Plan, Community Plan and zoning designations applicable to the Project Site were key considerations and established limitations on reasonable alternative land uses. The achievement of Project objectives was also emphasized in designing and selecting alternatives.

The Original EIR evaluated a range of alternative sites to accommodate the entire 700,000 square-foot Master Plan development. Due to the nature of the services provided under the Master Plan, it was assumed that the proposed facilities would need to be associated with existing hospitals and that relocation on vacant land not associated with an existing hospital was infeasible. The two most suitable locations within a 5-mile service area of the CSMC Campus with available land for development, included: the University of California at Los Angeles Medical Center and the Midway Hospital (now known as Olympia Medical Center). The Original EIR concluded that neither of these alternative sites resulted in the potential to significantly reduce the Master Plan project impacts, including significant impacts to short-term (construction phase) air quality and noise, and long-term (operational) traffic, while still attaining the Master Plan objectives. There is no appreciable change in the conclusions about those

alternative sites with regard to the current Project, and it is unrealistic to expect that these location options would help further the objectives of the Project.

An alternative site within the CSMC Campus boundary is another potential option. However, due to the nature of the inpatient uses associated with the proposed Project and the building square footage required for those uses, relocation within the CSMC Campus would require full or partial demolition of an existing facility or parking structure. Options for demolition would include the Thalians Building, the North Patient Tower, the South Patient Tower, Parking Structure No. 8 or the planned Advanced Health Sciences Pavilion (beginning construction in the first quarter of 2009). As these facilities provide a number of important services for CSMC that are not present within the Existing Building at the Project Site, there would be a substantial adverse impact to the operation of CSMC. Further, relocation at these CSMC Campus alternative sites would not result in the potential to significantly reduce short-term (construction phase) air quality and noise and long-term (operational) traffic, while still attaining the Project objectives.

A more reasonable alternative site may be found at the location of another nearby off-site CSMC facility. In this case, the uses proposed for the Project would be incorporated into existing CSMC structures. One such option is the Mark Goodson Building ("the Goodson Building"), located several blocks to the south at 444 S. San Vicente Boulevard, between Colgate and Drexel Streets.

The Goodson Building, built in 1982 and comprised of approximately 101,300 square feet, is managed by CSMC and houses several state-of-the-art specialty facilities including the Institute for Spinal Disorders, the Orthopaedic Center and the Gamma Knife Center. However, the Goodson Building only contains approximately 50% of the 200,000 square feet needed for the proposed Project. Accommodating the Project (i.e., an increase of 100 inpatient beds to be contained within 200,000 square feet) at the Goodson Building location would require a reduction in size of the Project by approximately 100,000 square feet in order to fit the 100 inpatient beds within the existing available building space. Presumably, the remainder of the medical uses associated with the Project (i.e., the 170,650 remaining entitlement from the Master Plan) would be accommodated as infill in another location within the CSMC Campus and the 90,000 square-foot Existing Building would remain as-is.

The establishment of the Project's medical uses at this alternative site would also require the relocation of the Goodson Building's currently existing state-of-the-art specialty facilities. Given limitations on the availability of adequate modern medical office facilities in the Project area, relocation of the 100 new inpatient beds to the Goodson Building would require the relocation of these specialty facilities to an area further away from the CSMC Campus. If the approximately 101,300 square feet of specialty medical uses currently in the Goodson Building were relocated outside of the Project area and the Project were reduced by approximately 100,000 square feet to fit within the building area of the Goodson Building, the result would be an approximate 200,000 square-foot net loss of medical uses within property operated, leased and/or managed by CSMC. This loss of square feet is contrary to the Project's objectives of providing expanded medical services within a more efficiently-designed and consolidated campus, and to retaining state-of-the-art medical facility components that advance medical technology and range of services at the CSMC Campus. Furthermore, the Goodson Building is currently not approved by the Office of Statewide Health Planning and Development ("OSHPD"). With implementation of inpatient

uses, the building would need to be retrofitted to comply with seismic resistance regulations of Senate Bill 1953,¹ as well as other applicable OSHPD requirements.

Another option in lieu of reducing the Project by 50% to fit within the existing Goodson Building and relocating the specialty services currently in the facility is to demolish the Goodson Building and construct an approximately 301,300 square-foot building with associated parking on the site. This new building would incorporate the 200,000 square feet of inpatient uses of the Project and the 101,300 square feet of specialty medical uses already existing in the building. However, since this site is located outside of the CSMC Campus in a residential area, the associated impacts of the new building at this site are anticipated to be greater than those associated with construction at the current Project Site. This option at the Goodson Building site would not fulfill the Project objectives to provide high quality medical services at the CSMC Campus or provide development that reflects a refined cohesive image of the CSMC Campus as an integrated complex of buildings and functions.

Additionally, implementation of the Project's new inpatient services on other off-site property owned by CSMC would require the creation of new administration space and/or duplicate lab space, diagnostic space, admitting space and food service space at that off-site property. Thus, the Goodson Building alternative may involve an expansion of medical uses beyond the defined Beverly Center-Cedars Sinai Regional Commercial Center area and, therefore, would be in conflict with Objective 2-2 of Goal No. 2 of the Community Plan, which promotes distinctive commercial districts and pedestrian-oriented areas. By locating these inpatient services outside of the CSMC Campus and the boundaries of the Regional Commercial Center, CSMC inpatient uses would be fragmented and would require transportation between the Campus and these offsite inpatient uses via additional CSMC shuttle buses for patients and staff, thus conflicting with the creation of a distinctive commercial district centered around the CSMC Campus and the Beverly Center, and the promotion of a pedestrian-oriented area.

The Goodson Building site offers no appreciable benefit in reducing environmental impacts, is in conflict with the Project objectives, and is not consistent with the Community Plan. Other potential alternative sites within the CSMC Campus offer no appreciable difference from the proposed Project (which is also located within the Campus). Therefore, given the conclusion regarding alternative sites in the Original EIR and the above conclusion regarding the Goodson Building site, development of the Project in an alternative site location is considered infeasible and is not analyzed further in this Draft SEIR.

(2) Alternative Land Uses

As an alternative to the Project, a development could include a mix of land uses other than, or in addition to, typical medical center facilities. The Project Site is currently developed with medical uses and is zoned [T][Q] C2-2D-O. The Property is designated Regional Commercial by the Community Plan, which permits a range of commercial (CR, C2 and C4) and mixed-use

¹ Senate Bill 1953 or SB 1953, The Hospital Facilities Seismic Safety Act, requires all general acute-care inpatient buildings in the state to be seismically retrofitted by 2030 to be able to maintain operations following a major earthquake.

zones (RAS3 and RAS4). More specifically, the Community Plan identifies the Project area as the Beverly Center-Cedars Sinai Regional Commercial Center.

Given the existing uses, a reasonable alternative could include the addition of office, hotel or residential uses that would complement the existing medical center. However, the Original EIR evaluated a range of alternate uses, including office, hotel and retail center, and concluded that none of these options resulted in the potential to significantly reduce the Master Plan impacts while still attaining the Master Plan objectives. With regards to the Project, a reduced version of each of those options could be considered as an alternative use at the Project Site. However, there would be no appreciable change in the conclusions about these uses, and these alternative uses would not further the objectives of the Project. For the reasons noted above, a departure from medical uses and the development of an alternative land use project is considered infeasible and not analyzed further in this Draft SEIR.

Nonetheless, alternative medical center uses may be both reasonable and feasible. For example, the proposed 200,000 square feet could contain outpatient services instead of 100 new inpatient bed uses. This type of change-in-use alternative is evaluated as a feasible option and is discussed below.

b. Project Alternatives Selected for Evaluation

The selection of alternatives for the Project focused primarily on reducing overall short-term construction impacts, with particular focus on air quality and noise, which were found to be significant and unavoidable under the proposed Project, as well as reducing long-term operational traffic impacts to less than significant levels without implementation of the mitigation measures that are required under the proposed Project. Three alternatives (including the "No Project" alternative) are evaluated in this Draft SEIR that would avoid or substantially lessen some or all of the Project's significant impacts. Since alternatives involving an alternate site have been rejected, and one of the objectives of the Project is to implement the previously approved and vested Master Plan, the range of alternatives considered for evaluation are focused on different site-specific, medical-use options. Alternatives selected for evaluation include the following:

- Alternative A: No Project Build-out of Master Plan
- Alternative B: Reduced Project Net Increase of 150,000 SF
- Alternative C: Change in Use Project Outpatient Uses

These three alternatives are described below and summarized in *Table 35: Summary of Alternatives.* The following sections provide an analysis of each alternative, including an assessment of the anticipated development impacts, as shown in *Table 36: Summary of Alternative Net Incremental Impacts*; a comparison of each alternative's impacts relative to the Project, as shown in *Table 37: Alternatives Comparison to the Project*; and a determination of each alternative's ability to meet the Project objectives.

PROJECT DESCRIPTION	PROPOSED	ALT A NO	<u>ALT B</u> REDUCED	<u>ALT C</u> CHANGE IN USE PROJECT		
COMPONENT	IKUJECI	PROJECT	PROJECT			
Alternative Title	West Tower Project	Master Plan Build-	150,000 SF (75	200,000 SF		
	west rower rojeet	out	inpatient beds)	Outpatient Services		
	Amend Master Plan	N	Delass (lessons for	Maintain floor area,		
Onumian	to add 200K SI Of	No additional floor	Reduce floor area for	but convert inpatient		
Overview	inpatient space and	area beyond build-out	inpatient services by	services to outpatient		
	CSMC Campus	of Master Plan	2370	services		
Total Floor Area	Conte Campus					
of Construction at	Construction at 460.650 SF		410 650 SF	460 650 SF		
Project Site	oject Site		410,050 51	100,000 51		
Total Associated	Associated		625-700 space			
Parking Provided	700 space structure	structure	structure	>700 space structure		
at Project Site	ect Site					
Total "Net" New	• • • • • • • • • • • •	0.05		• • • • • • • • • • • •		
Floor Area Above	200,000 SF	0 SF	150,000 SF	200,000 SF		
Master Plan						
Total "Net" New						
Project Parking 250 spaces		0 spaces	188 spaces	1000 spaces		
Required	luired					
	30,000 Research	0 Research ³	30,000 SF Research	30,000 SF Research		
Proposed Uses (SF)	312,750 Inpatient ¹	82,750 Inpatient	262,750 Inpatient	112,750 Inpatient		
TTOPOSCU USCS (SF)	117,900 Outpatient ²	87,900 Outpatient	117,900 Outpatient	317,900 Outpatient		
	(100 Inpatient Beds)	(52 Inpatient Beds) ⁴	(75 Inpatient Beds)	(0 Inpatient Beds)		
Building Stories /	11 stories/	10 stories/	10 stories/	11 stories/		
Height	185 feet	175 feet	175 feet	185 feet		
- ·						

TABLE 35				
SUMMARY OF ALTERNATIVES				

¹ "Inpatient" uses include Administrative, Rehabilitation, Diagnostic/ER and Support space.

² Outpatient uses include Medical Suites.

³ The "No Project" Alternative would only include full build-out of the remaining 170,650 sf of the Master Plan without incorporation of the 90,000 sf Existing Building uses into the new facility.

⁴ Remaining number of inpatient beds allowed for the 170,650 sf of residual Master Plan development, as analyzed in the Original EIR.

B. ALTERNATIVE A: NO PROJECT – BUILD-OUT OF MASTER PLAN

1. ALTERNATIVE DESCRIPTION

The Original EIR evaluated a "No Project" alternative under which the Master Plan would not have been implemented, essentially representing a "no new development" scenario. Although the "No Project" alternative evaluated in the Original EIR was determined to be environmentally superior to the Master Plan project, it would not have provided for attainment of the Master Plan project objectives. In 1993, the Master Plan was approved and has been partially implemented on the CSMC Campus.

For the current Project, the "No Project" Alternative assumes that the entire 700,000 square feet of the approved Master Plan plus approved parking would be developed, but that no additional medical center uses beyond the 700,000 square feet evaluated in the Original EIR would occur.

Under this No Project Alternative, the Existing Building would not be demolished and up to 170,650 square feet of remaining entitled uses would be constructed on a building footprint limited to the Existing Parking Lot located at the Project Site. On the Project Site, the new construction scale and design would be essentially equivalent to that described for the "Site 2" Rehabilitation Center (the "Rehab Center") in the Master Plan, which consisted of a 10-story, 175-foot high building with a four-level, subterranean 650-space parking structure underneath. Additionally, the new building could contain a total of 52 inpatient beds, which represents the remaining entitlement for inpatient beds associated with development of the Rehab Center² and the remainder of the Master Plan. Under the No Project Alternative, the resultant physical and operational conditions described in the Original EIR for the approved Master Plan are anticipated. This Alternative satisfies a direct requirement in CEQA Guidelines Section 15126.6(e) for a "No Project" alternative comparison.

2. ENVIRONMENTAL IMPACTS OF ALTERNATIVE

a. Aesthetics

Under the No Project Alternative scenario, development of the 170,650 square feet of remaining entitlement under the Master Plan within a new building at the Project Site would result in no visual change beyond that determined in the Original EIR.

(1) Visual Character

A future building at the Project Site would change the visual character from the Existing Parking Lot to a 10-story structure. The design of the building would be architecturally consistent with the existing buildings on the CSMC Campus and would appear similar in massing, size and

² After construction of the Advanced Health Sciences Pavilion, approximately 33,000 square feet or 26% of the 127,500 square foot Rehab Center approved under the Master Plan will remain for development at the Project Site to be incorporated into the new 170,650 square foot facility. The potential 52 inpatient beds to be included in the new facility thus represents the remaining approximately 26% of the 200 inpatient beds approved for the Rehab Center under the Master Plan and analyzed in the Original EIR.

height to that conceptualized for the proposed Project. As the Existing Building at the Project Site would not be demolished under the No Project scenario, there would be lesser aesthetic construction-related impacts at the Project Site and any landscaping associated with the Existing Building would be retained. However, similar to the Rehab Center described in the Master Plan, the new building would stack the parking structure underneath the proposed uses of the facility, utilizing the ground floor of the new facility as a parking garage entrance. Under the proposed Project, the parking garage would be a separate, adjoining structure behind the West Tower, thus allowing a more pedestrian-oriented utilization of the West Tower ground floor as a lobby with large windows. Therefore, the No Project Alternative may result in a street level entrance that is not consistent with the goals of the Community Plan to orient building street frontages to pedestrians through utilization of windows or visually interesting design elements at street level.

Despite minor differences between the new buildings to be constructed under the proposed Project and the No Project Alternative, both would have similar impacts to visual character due to the similar construction characteristics and similar massing and height of the buildings, as well as the similar architecture planned under both scenarios. In both cases, the urban visual character of the Project Site, the CSMC Campus and the Project area would not be significantly impacted. Both the No Project Alternative and the proposed Project would result in a less than significant impact to visual character during both the construction and operational phases. Further, in comparing the incremental impact of the No Project Alternative to the incremental impact of the proposed Project beyond the impacts determined in the Original EIR for build-out of the Master Plan, both the No Project Alternative and the proposed Project would result in less than significant visual character impacts, as both would be incorporated into new buildings that are similar in height and massing. Therefore, the impacts associated with the No Project Alternative would be similar and comparable to those of the proposed Project.

(2) Alteration of Views

Under the No Project Alternative, a new building at the Project Site would result in a change of views similar to those anticipated for the Master Plan Rehab Center described in the Original EIR. The visual analysis for the proposed Project, included in *Section IV.A: Aesthetics*, indicates that due to the urban nature and building heights existing in the Project area and on the CSMC Campus, views would not be greatly affected by the proposed Project and would not result in a significant impact. Both the proposed Project and the No Project Alternative would result in a less than significant impact on views in the area during the construction and operational phases. Further, in comparing the incremental impact of the No Project Alternative to the incremental impact of the proposed Project beyond the impacts determined in the Original EIR for build-out of the Master Plan, the No Project Alternative would result in a less than significant impact to viewsheds, which is similar and comparable to the proposed Project due to the similar height and massing of the new buildings under both scenarios.

(3) Lighting and Glare

A new building at the Project Site would be subject to the Los Angeles Building Code and Municipal Code requirements regarding lighting and glare. Nighttime illumination from security lighting and interior lighting is expected under the No Project scenario, but similar to the proposed Project, these impacts can be mitigated through window tinting, shielding and other regulatory requirements. Glare from windows and reflective surfaces may also be mitigated through Code and regulatory requirements. Both the proposed Project and the No Project Alternative would take similar steps to mitigate impacts from lighting and glare to less than significant levels. Further, in comparing the incremental impact of the No Project Alternative to the incremental impact of the proposed Project beyond the impacts determined in the Original EIR for build-out of the Master Plan, the No Project Alternative would result in a less than significant incremental impact to lighting and glare, which is similar and comparable to the proposed Project due to the similar height, massing and window coverage of the new buildings under both scenarios.

b. Air Quality³

(1) Construction Phase

Construction activity assumptions for the proposed Project and the No Project Alternative were based on the size of the Project Site and the type of development being proposed. As such, similar general construction assumptions were made for both scenarios, including seven pieces of construction equipment operating simultaneously for eight hours during each day of construction, a maximum of two acres per day graded and/or excavated, the generation of 100 delivery/haul truck trips per day, 100 workers per day, and the application of architectural coating over a six-month time period. Construction emissions are primarily based on the type and amount of equipment required on a peak daily basis at the Project Site.

Unlike the proposed Project, the No Project Alternative would only anticipate the demolition of the Existing Parking Lot, not the Existing Building. Furthermore, the No Project Alternative, under the Master Plan, included excavation activities for four subterranean parking levels at the Project Site; whereas, the proposed Project contains three levels of subterranean parking. While the No Project Alternative would reduce demolition and increase excavation activities at the Project Site, construction activity assumptions (i.e., daily number of pieces of construction equipment, workers, haul trucks, maximum grading per day, etc.) would continue to be similar under both scenarios, as both new buildings are similar in massing and height and would require the same types and amount of equipment during the construction process on a daily basis. The primary difference in construction emissions resulting from both scenarios would result from a reduced construction time span (i.e., number of days) for the No Project Alternative. However, this construction time difference would neither be substantial nor discernable with regards to a determination in levels of significance. As such, daily regional and localized construction emissions associated with the No Project Alternative would be slightly reduced due to less construction time (number of days) needed for development, but are considered substantially similar to the proposed Project. Therefore, as determined for the proposed Project, the daily construction emissions for the No Project Alternative would be significant and unavoidable for NO_X emissions (regional) and PM_{2.5} and PM₁₀ emissions (localized).

³ Air quality analyses for Alternatives A, B and C were generated by Terry A. Hayes Associates, *Air Quality and Noise Analysis for the Proposed Cedars-Sinai Medical Center West Tower Project Alternatives* memorandum to Planning Associates, Inc., August 7, 2008.

As with the proposed Project, the No Project Alternative would comply with SCAQMD Rule 403 as well as the mitigation measures that were adopted in connection with the approval of the Master Plan. The construction mitigation measures recommended for the proposed Project (see *Section IV.B: Air Quality* of this Draft SEIR) would also apply to the No Project Alternative. As noted above, like the proposed Project, construction of the new Rehab Building at the Project Site would result in a significant and unavoidable regional NO_X impact and localized PM_{2.5} and PM₁₀ impacts after implementation of mitigation measures. Further, in comparing the incremental impact of the No Project Alternative to the incremental impact of the proposed Project beyond the impacts determined in the Original EIR for build-out of the Master Plan, the No Project Alternative would result in an incrementally less impact to construction emissions. This is due to the fact that the Original EIR anticipated completion of build-out for the Master Plan by 2005. Since construction of the remaining entitlement would start after this date, additional emission regulations will incrementally reduce emissions from vehicles and construction equipment from those anticipated in the Original EIR.

The No Project Alternative would not involve demolition of the Existing Building at the Project Site, which was built in 1947 and has the potential to contain asbestos-containing materials ("ACMs") and lead-based paint. As such, there would be no release of ACMs and lead-based paint into the atmosphere. Thus, as with the proposed Project, the new building proposed under the No Project Alternative would result in a less than significant impact associated with carcinogenic air toxics. However, in comparing the incremental impact of the No Project Alternative to the incremental impact of the proposed Project beyond the impacts determined in the Original EIR for build-out of the Master Plan, the No Project Alternative would result in no incremental impact associated with carcinogenic air toxics, which is less than the proposed Project. This is due to the fact that both the Original EIR and the No Project Alternative will not involve demolition of the Existing Building.

Finally, as with the proposed Project, potential sources that may emit odors during construction of the No Project Alternative would include equipment exhaust and architectural coatings. Odors from these sources would be localized and generally confined to the Project Site. Similar to the proposed Project, the No Project Alternative would utilize typical construction techniques, and the odors would be temporary and typical of most construction sites. In addition, the No Project Alternative would be required to comply with regulations contained in SCAQMD Rule 402. Thus, as with the proposed Project, the construction odor impacts from the No Project Alternative would be less than significant. Further, in comparing the incremental impact of the No Project Alternative to the incremental impact of the Master Plan, the No Project Alternative would result in no incremental impact associated with construction odors, which is similar and comparable to the proposed Project. Because the No Project Alternative and the proposed Project would require the same types and amount of equipment during the construction process on a daily basis as determined in the Original EIR, there would be comparable and similar impacts.

(2) *Operational Phase*

Regional operational emissions from area and mobile sources associated with the No Project Alternative would not exceed SCAQMD significance thresholds. Since the regional operational emissions for the Project would be less than significant, the regional operational emissions for the 170,650 square-foot No Project Alternative, which is smaller than the 200,000 square-foot proposed Project, would be less than the proposed Project and also less than significant. Even so, and like the proposed Project, the No Project Alternative would be required to comply with the mitigation measures adopted in connection with the approval of the Master Plan, which includes implementing a Transportation Demand Management program for the CSMC Campus. Therefore, as with the proposed Project, the No Project Alternative would result in a less than significant operational emissions impact. Further, in comparing the incremental impact of the No Project Alternative to the incremental impact of the Master Plan, the No Project Alternative would result in no incremental impact associated with operational emissions, which is less than the proposed Project.

In the build-out year of 2023, CO concentrations associated with the No Project Alternative would result in a one-hour concentration of 2 ppm and an eight-hour concentration in a range between 1.2 ppm and 1.7 ppm.⁴ As with the proposed Project, the one- and eight-hour CO concentrations would not exceed the State standards and would result in a less than significant CO concentrations impact. However, in comparing the incremental impact of the No Project Alternative to the incremental impact of the proposed Project over the impacts determined in the Original EIR for build-out of the Master Plan, the No Project Alternative would result in no incremental impact associated with CO concentrations, which is less than the proposed Project.

Like the Project, the No Project Alternative would not include any substantial potential sources of acutely and chronically hazardous toxic air contaminants ("TACs"). The Project may increase the amount of medical waste incinerated on the CSMC Campus. The Original EIR, which included mitigation measures to reduce reliance on hazardous materials, discussed regulations and impacts associated with medical waste incineration (e.g., dioxin emissions). However, CSMC has replaced the incinerator with two steam sterilizers. The steam sterilizers dispose of medical waste on the CSMC Campus resulting from the Project would not produce dioxin emissions. Therefore, both the No Project Alternative and the proposed Project would not release substantial amounts of TACs and would result in less than significant impacts on human health. Further, in comparing the incremental impact of the No Project Alternative to the incremental impact of the proposed Project over the impacts determined in the Original EIR for build-out of the Master Plan, the No Project Alternative would result in less than significant incremental impact associated with TACs, which is similar and comparable to the proposed Project.

The No Project Alternative would develop the Project Site with hospital-related uses, which are not land uses that are typically associated with odor complaints, such as agricultural uses, wastewater treatment plants, food processing plants, chemical plants, composting, refineries, landfills, dairies and fiberglass molding. Similar to the proposed Project, on-site trash receptacles would have the potential to create adverse odors; however, as trash receptacles would be located

⁴ Terry A. Hayes Associates, *Air Quality and Noise Analysis for the Proposed Cedars-Sinai Medical Center West Tower Project Alternatives* memorandum to Planning Associates, Inc., August 7, 2008.

⁵ Health Care Without Harm, *Toolkit 7, Alternatives to Medical Waste Incineration: Stopping the Toxic Threat*, 2002.

and maintained in a manner that promotes odor control, no adverse odor impacts would result. Like the Project, odors associated with food preparation in a kitchen are not anticipated to be substantial under the No Project Alternative and would be controlled by the ventilation system of the new building to be constructed. Additionally, both the No Project Alternative and the proposed Project would be required to comply with SCAQMD Rule 402 and thus both would result in a less than significant impact associated with operational odors. However, in comparing the incremental impact of the No Project Alternative to the incremental impact of the proposed Project over the impacts determined in the Original EIR for build-out of the Master Plan, the No Project Alternative would result in a less than significant impact associated with operational odors, which is similar and comparable to the proposed Project.

Like the Project, the No Project Alternative would not increase population or housing in the Los Angeles subregion since this alternative does not include a residential component. The new building proposed under the Master Plan for the No Project Alternative is expected to incrementally increase employment by approximately 238 persons⁶, which is less than half for the proposed Project. This increase would represent less than one percent of the 278,264 new employment growth projected by SCAG between 2007 and 2023 for the Los Angeles subregion.⁷ As with the proposed Project, operations of the No Project Alternative would not exceed the Southern California Association of Governments ("SCAG") growth forecasts and would be considered to be consistent with growth assumptions included in the Air Quality Management Plan ("AQMP").⁸ Therefore, neither the No Project Alternative nor the proposed Project would cause or contribute to new air quality violations and both would be consistent with the AQMP, resulting in less than significant impacts. Further, in comparing the incremental impact of the No Project Alternative to the incremental impact of the proposed Project over the impacts determined in the Original EIR for build-out of the Master Plan, the No Project Alternative would result in a less than significant incremental impact associated with AQMP consistency, which is similar and comparable to the proposed Project.

Finally, the No Project Alternative would not embody features that are not typical of an urban environment or generate a disproportionate amount of vehicle miles traveled. This alternative would not have unique or disproportionately high fuel consumption characteristics and would be located in an urban area that is already planned for medical uses. Further, the No Project Alternative would be required to comply with any applicable mitigation measures adopted in connection with the approval of the Master Plan and all Assembly Bill ("AB") 32 related regulations, as well as those mitigation measures recommended for the proposed Project (see *Section IV.B: Air Quality*). As such, like the proposed Project, the No Project Alternative would have a negligible and less than significant impact on any increase in regional and national greenhouse gas ("GHG") emissions. However, in comparing the incremental impact of the No Project Alternative to the incremental impact of the Master Plan, the No Project Alternative would result in no incremental impact associated with global climate change, which is similar and comparable to the proposed Project.

⁶ Southern California Association of Governments, *Employment Density Study Summary Report*, October 31, 2001.

⁷ Terry A. Hayes Associates, *Air Quality and Noise Analysis for the Proposed Cedars-Sinai Medical Center West Tower Project Alternatives* memorandum to Planning Associates, Inc., August 7, 2008.

⁸ Ibid.

c. Noise⁹

(1) Construction Phase

Construction of the No Project Alternative would involve similar types of grading/excavation and building construction activities as the proposed Project. As such, construction noise levels associated with the No Project Alternative would be similar to the proposed Project. As with the proposed Project, construction-related noise levels would exceed the 5-dBA significance threshold at various sensitive receptors, resulting in a significant noise impact.¹⁰ With consideration of the nearest Related Project, both the Project and the No Project Alternative would result in a significant cumulative noise impact as well. Similarly, should pile driving be required for this alternative, vibration levels would have the potential to exceed the significance threshold of 0.5 inches per second peak particle velocity ("PPV").¹¹ With implementation of proper mitigation measures (see Section IV.C: Noise), including those that were adopted in connection with the approval of the Master Plan and certification of the Original EIR, the No Project Alternative would be reduced to a less than significant short-term vibration impact; however, even with mitigation measures, both scenarios would result in a temporary significant and unavoidable construction noise impact (including cumulatively). Further, in comparing the incremental impact of the No Project Alternative to the incremental impact of the proposed Project over the impacts determined in the Original EIR for build-out of the Master Plan, the No Project Alternative would result in no incremental impact associated with construction noise and vibration, which is less than the proposed Project.

(2) *Operational Phase*

Noise from the operation of existing uses is generated primarily by vehicular traffic coming to and from the Project Site. These levels would increase with any intensification of uses at the Project Site. The No Project Alternative would generate a total of approximately 5,324 daily vehicle trips associated with full build-out of the 170,650 square feet of remaining entitlement in the Master Plan, which is lower than the daily trips generated by the West Tower at the Project site.¹² Noise levels for the No Project Alternative would range from 66.5 to 74.6 dBA Community Noise Equivalent Level ("CNEL"), which would be lower than noise levels associated with the proposed Project.¹³ Therefore, the vehicular noise impacts from both the No Project Alternative and the proposed Project Alternative to the incremental impact of the proposed Project over the impacts determined in the Original EIR for build-out of the Master

⁹ Noise analyses for Alternatives A, B and C were generated by Terry A. Hayes Associates, *Air Quality and Noise Analysis for the Proposed Cedars-Sinai Medical Center West Tower Project Alternatives* memorandum to Planning Associates, Inc., August 7, 2008.

¹⁰ Terry A. Hayes Associates, Air Quality and Noise Analysis for the Proposed Cedars-Sinai Medical Center West Tower Project Alternatives memorandum to Planning Associates, Inc., August 7, 2008.

¹¹ Ibid.

¹² Linscott, Law and Greenspan Engineers, *Traffic Impact Study, Cedars-Sinai Medical Center Project*, June 23, 2008.

¹³ Terry A. Hayes Associates, *Air Quality and Noise Analysis for the Proposed Cedars-Sinai Medical Center West Tower Project Alternatives* memorandum to Planning Associates, Inc., August 7, 2008.

Plan, the No Project Alternative would result in no incremental impact associated with operational vehicular noise, which is less than the proposed Project.

As with the proposed Project, the No Project Alternative would also generate noise levels from mechanical equipment. However, the No Project Alternative would be required to implement the mitigation measures recommended for the proposed Project and those that were adopted in connection with the approval of the Master Plan and certification of the Original EIR (i.e., the installation of sound attenuating devices on exhaust fans, enclosing mechanical equipment and providing sound absorbing and shielding provisions into the design of these equipment). Similar to the proposed Project, the mitigation measures would ensure that the mechanical equipment would not incrementally increase ambient noise levels by 5 dBA or more, thus resulting in a less than significant impact for both scenarios.¹⁴ Further, in comparing the incremental impact of the No Project Alternative to the incremental impact of the Master Plan, the No Project Alternative would result in no incremental impact associated with stationary noise, which is similar and comparable to the proposed Project.

The No Project Alternative would develop a similar sized parking structure on the Project Site to the proposed Project; however, the multi-level parking structure would occupy the subterranean and bottom floors of the new building, as opposed to the adjacent and adjoining parking structure planned under the proposed Project. Regardless of the configuration of the parking structure, as with the proposed Project, there would be an increase in the noise level at the adjacent medical office building to the south by 0.1 dBA over the existing noise level to 65.9 dBA.¹⁵ Other medical buildings on the CSMC Campus are located farther away from the Project Site; thus, noise levels generated by the parking structure would be decreased at these buildings. As the parking structure activity would not incrementally increase ambient noise levels by 5 dBA or more, parking noise under both the No Project Alternative and the proposed Project over the impacts determined in the Original EIR for build-out of the Master Plan, the No Project Alternative would result in a less than significant incremental impact associated with parking noise, which is less than the proposed Project.

Finally, neither the No Project Alternative nor the proposed Project would include significant stationary sources of operational ground-borne vibration, such as heavy equipment operations. Operational ground-borne vibration in the Project vicinity would be generated by vehicles and delivery trucks on the local roadways and would not be perceptible by sensitive receptors. Thus, operational vibration for both the No Project Alternative and the proposed Project would result in a less than significant impact. Further, in comparing the incremental impact of the No Project Alternative to the incremental impact of the proposed Project over the impacts determined in the Original EIR for build-out of the Master Plan, the No Project Alternative would result in a less than significant impact associated with operational phase vibration, which is similar and comparable to the proposed Project.

¹⁴ *Ibid*.

¹⁵ *Ibid*.

d. Transportation and Circulation

(1) Traffic and LOS^{16}

Under the No Project Alternative, a net increase of 365 vehicle trips during the weekday A.M. peak hour and 488 vehicle trips during the weekday P.M. peak hour are anticipated under the Future With Project Conditions (Build-out Year of 2023) for a total of 5,324 daily vehicle trips¹⁷. Unlike the proposed Project, which will be contained within the West Tower, constructed at the Project Site, the No Project Alternative building would only include the remaining entitlement under the Master Plan. Thus, the anticipated daily vehicle trips associated with the No Project Alternative will be less than the proposed Project. The impacts determined in the Original EIR for build-out of the Master Plan would apply to this scenario and the adopted mitigation measures would carry forward. Applicable mitigation measures recommended for the proposed Project would also apply. Therefore, with implementation of the mitigation measures approved in connection with the Master Plan (many of which have already been implemented at intersections in the Project area) and those associated with the Project, the No Project Alternative would be consistent with the Original EIR findings of impact. However, in comparing the incremental impact of the No Project Alternative to the incremental impact of the proposed Project over the impacts determined in the Original EIR for build-out of the Master Plan, the No Project Alternative would result in no incremental impact associated with traffic and levels of service, which is less than the proposed Project.

(2) Access and Transit

Under the No Project Alternative, improvements to internal CSMC Campus circulation, pedestrian safety and access enhancements would be implemented in a manner consistent with the proposed Project and the Master Plan. The changes in driveway and pedestrian access points at the Project Site would be similar under both scenarios. As the proposed Project would generate more employees and would service more patients than the No Project Alternative, this alternative would result in impacts to public transit that are less than the proposed Project. The proposed Project would result in the addition of less than one Project-related transit rider per bus in the Project area during the A.M. and P.M. peak hours;¹⁸ therefore, the No Project Alternative is reasonably anticipated to result in the addition of less than one Project-related transit rider per bus during the A.M. and P.M. peak hours. Thus, both the No Project Alternative and the proposed Project would result in a less than significant Project access and public transit impact. Overall, the No Project Alternative impacts to access and transit would be less than the proposed Project impacts. In comparing the incremental impact of the No Project Alternative to the incremental impact of the proposed Project over the impacts determined in the Original EIR for build-out of the Master Plan, the No Project Alternative would result in no incremental impact associated with access or transit, which is less than the proposed Project impact.

¹⁶ Analysis based on findings from Linscott, Law and Greenspan Engineers, *Traffic Impact Study, Cedars-Sinai Medical Center Project*, June 23, 2008.

¹⁷ See Related Project No. LA39B of Table 7-2, Related Projects Trip Generation of *Appendix E: Traffic Impact Study* in this Draft SEIR.

¹⁸ Linscott, Law and Greenspan Engineers, *Traffic Impact Study, Cedars-Sinai Medical Center Project*, June 23, 2008.

(3) Parking

Similar to the 700-space parking structure of the proposed Project, the No Project Alternative would include the construction of a 650-space parking structure at the Project Site, requiring the demolition of the Existing Parking Lot that contains 217 parking spaces. With implementation of the No Project Alternative, the City of Los Angeles parking requirement for the CSMC Campus would be the amount of parking required under the Master Plan as analyzed in the Original EIR, which is a total of 7,053 parking spaces. This is compared to the total 7,669 parking spaces required under the proposed Project (per parking ratios determined in Ordinance No. 168,847). Under existing conditions (considering the Advanced Health Sciences Pavilion as built), the CSMC Campus already provides 7,275 spaces, which exceeds the Master Plan parking requirement by 222 spaces. The No Project scenario (i.e., build-out of the Master Plan) would provide a 650-space parking structure, as originally proposed for the Rehab Center under the Master Plan. After demolition of the Existing Parking Lot, the No Project Alternative would be providing a net 433 parking spaces for the CSMC Campus. With the addition of the net 433 spaces, the CSMC Campus would contain a total of 7,708 parking spaces under the No Project Alternative. Thus, under the No Project Alternative, the planned CSMC Campus parking supply of 7,708 spaces would exceed the City parking requirement of 7,053 spaces (per the Original EIR) by a total of 655 spaces. In contrast, the 700 parking spaces proposed as part of the Project would contribute to a total of 7,758 spaces at the CSMC Campus, representing a surplus of 89 spaces over the 7,669-space requirement. In comparing the parking on the CSMC Campus under both scenarios, both the Project and the No Project Alternative would result in excess Campus parking supply, and thus less than significant impacts. However, the parking impact of the new facility under the No Project Alternative would be less than the proposed Project due to the larger amount of excess parking provided. In comparing the incremental impact of the No Project Alternative to the incremental impact of the proposed Project over the impacts determined in the Original EIR for build-out of the Master Plan, however, the No Project Alternative would result in a less than significant impact associated with parking, which is similar and comparable to the proposed Project.

e. Growth Inducing

The No Project Alternative would not result in an increased potential for new growth over the potential for new growth determined for build-out of the Master Plan in the Original EIR. As with the proposed Project, the No Project Alternative (i.e., medical uses on an existing medical campus) would not contain a residential or commercial component and would not be expected to incrementally induce substantial residential, commercial or population growth in the Project area. The net growth-inducing effect of the No Project scenario (i.e., build-out of the Master Plan) would be less than significant and comparable to the impact determined in the Original EIR. Further, because there would be no change to the Master Plan, the No Project Alternative would result in no incremental impact to incremental growth inducing impacts, and therefore are anticipated to be less than the impacts for the proposed Project.

f. Cumulative Impacts

Other Related Projects, similar to those anticipated with the proposed Project, would be expected to be developed and impacts corresponding to those developments are anticipated to occur. However, as the No Project Alternative would not contribute any change to the cumulative conditions beyond build-out of the Master Plan (as analyzed in the Original EIR), this alternative would have no significant incremental cumulative impacts.

g. Relationship of Alternative to Project Objectives

The No Project Alternative would avoid all of the net incremental impacts to the environment associated with the proposed Project (including those that would be less than significant and those that would be beneficial). However, the environmental impacts determined in the Original EIR for build-out of the Master Plan would still apply to the No Project Alternative and the adopted mitigation measures would still be required (if not already implemented). The No Project Alternative would not satisfy the Project objective to provide an additional 100 inpatient beds in the Southern California region and would not satisfy the Project objectives to support improved medical technologies and provide needed inpatient diagnostic and treatment facilities to the extent possible under the proposed Project. In summary, the No Project Alternative would not attain three Project objectives to the extent established for the proposed Project. For these reasons, and although some of the incremental impacts of the net Project would be avoided or minimized to some extent, the No Project Alternative is not considered a feasible alternative to the proposed Project.

h. Comparison of Alternative's Project Impacts

Table 36: Summary of Alternative Net Incremental Impacts and Table 37: Alternatives Comparison to the Project (below) provide a summary of the net incremental impacts by environmental issue for each of the proposed alternatives and a comparison of the net incremental impacts of each alternative relative to the level of impact anticipated with the proposed Project, respectively. As illustrated in Table 36: Summary of Alternative Net Incremental Impacts, the proposed Project would result in significant and unavoidable impacts to air quality and noise during the short-term construction phase. A significant impact to traffic during the long-term operational phase would be reduced to a less than significant level after mitigation implementation. For those issues addressed, the new building to be constructed under the No Project scenario would result in similar or reduced impacts; however, in terms of the incremental impacts over the impacts determined in the Original EIR for build-out of the Master Plan, the No Project Alternative would not result in any new or increased significant environmental impacts.

Implementation of the No Project Alternative would not result in new or incremental environmental impacts over those found in the Original EIR. Most of the significant and unavoidable impacts associated with the proposed Project would be avoided under the No Project Alternative, except for the significant and unavoidable impacts to air quality and noise during the construction (short-term) phase. However, none the potential benefits of the 200,000 additional square feet of inpatient uses and 100 inpatient beds would be implemented and the Project objectives would not be met.

V. ALTERNATIVES

C. ALTERNATIVE B: REDUCED PROJECT – NET INCREASE OF 150,000 SF

1. ALTERNATIVE DESCRIPTION

The "Reduced Project" Alternative would consist of build-out of the 700,000 square feet approved and vested under the Master Plan and an additional 150,000 square feet (or the equivalent to 75 inpatient beds) of new medical center uses. The Reduced Project Alternative represents a 25% reduction of the Project, with no reduction in the approved Master Plan. Under the Reduced Project Alternative, the Existing Building would be demolished and the Project Site would be redeveloped with approximately 410,650 square feet of medical center uses (90,000 square feet from the Existing Building, 170,650 square feet of development rights remaining under the Master Plan, and 150,000 square feet of new development rights) in a 10-story building. The associated parking structure to be developed on the Project Site would reflect a reduction of approximately 75 spaces, but it is assumed that the overall scale and configuration of the project, even though the footprint may be slightly reduced.

The Reduced Project Alternative would require entitlements similar to those requested for the Project, except that the overall increases in intensity would be reduced proportionately. The Reduced Project Alternative would require the following:

- Zone Change to amend the conditions of the [T][Q]C2-2D-O zoning designation and to approve an additional 75 inpatient beds or 150,000 square feet of development entitlement for the CSMC Campus;
- Height District Change to increase the Campus-wide permitted floor area ratio (FAR).
- Amendment to the existing Development Agreement and Master Plan to permit the addition of 150,000 square feet of medical uses (or up to 75 inpatient beds) and related parking;
- Haul Route Permit;
- B-Permit for necessary street, sewer, storm drain, and lighting improvements;
- Grading Permits;
- Demolition Permits;
- Building Permits; and
- Any other necessary discretionary or ministerial permits and approvals required for the construction or operation of the Project.

The Reduced Project Alternative was selected because it provides for full implementation of the Master Plan and has the potential to accomplish many of the Project objectives by increasing the medical center intensity at the Project Site. Further, the Reduced Project Alternative has the potential to result in reduced impacts for those significant impacts identified with the Project, including those related to construction (including air quality and noise), as well as an overall reduction in related trip generation and traffic. Additionally, the Reduced Project Alternative has the potential to reduce aesthetic impacts, although these have already been determined to be less than significant for the Project, through a reduced building envelope.

2. ENVIRONMENTAL IMPACTS OF ALTERNATIVE

a. Aesthetics

Under the Reduced Project Alternative, the 150,000 square feet of inpatient uses would be incorporated into an approximately 410,650 square-foot building, thus, the visual changes to the Project Site would be similar to those identified for the proposed Project with slightly reduced building massing and height. The parking structure envelope may also be slightly reduced if the parking structure is reduced in size, but the change in appearance would not be discernable as compared to the proposed Project.

(1) Visual Character

Similar to the proposed Project, implementation of the Reduced Project Alternative on the Project Site would change the visual character from a 2-story, architecturally non-descript Existing Building and adjacent surface parking lot to a 10-story, approximately 175 foot tall modern-style medical tower and a 7-level parking structure (3 levels subterranean, 1 level at grade, 3 levels above grade). The Reduced Project Alternative would be similar in size and mass to the existing North and South Towers on the CSMC Campus. The architectural design and landscaping associated with the new building would also be consistent with the existing design theme of the CSMC Campus.

Overall, the Reduced Project Alternative would have a similar net impact to visual character as that identified for the proposed Project as both scenarios would provide for a more intensive Project Site with larger structures than currently exist. In the context of the existing urban character of the Project vicinity and CSMC Campus, neither the proposed Project nor the Reduced Project Alternative would substantially alter the valued visual character or image of the area from current conditions or from what was previously entitled for the Project Site under the Master Plan. Thus, both the Reduced Project Alternative and the proposed Project would have a less than significant impact on visual character. Both scenarios would also have a less than significant incremental visual character impact beyond the impacts determined in the Original EIR for build-out of the Master Plan and, therefore, would be comparable and similar.

(2) Alteration of Views

Implementation of the Reduced Project Alternative would increase visibility of development at the Project Site. The 2-story Existing Building and adjacent surface parking lot, which are

relatively obscured from view by the surrounding urban development, would be replaced by a 10-story tower structure and adjoining parking structure that would be taller than some of the surrounding development. However, the viewshed impacts of the Reduced Project scenario would be comparable to the impacts of the proposed Project as well as the Master Plan Rehab Center as described in the Original EIR. Both the Reduced Project Alternative and the proposed Project would be visually consistent with the surrounding CSMC structures and would thus result in less than significant impacts to existing views in the area. Both scenarios would also have a less than significant incremental viewshed impact beyond the impacts determined in the Original EIR for build-out of the Master Plan and, therefore, would be comparable and similar.

(3) Lighting and Glare

The Reduced Project Alternative would be subject to the Los Angeles Building Code and Municipal Code requirements regarding lighting and glare. Nighttime illumination from security lighting and interior lighting is expected under the Reduced Project scenario, but similar to the proposed Project, these impacts can be mitigated through window tinting, shielding and other regulatory requirements. Glare from windows and reflective surfaces may also be mitigated through Code and regulatory requirements. Both the proposed Project and the Reduced Project Alternative would take similar steps to mitigate impacts from lighting and glare to less than significant levels. Both scenarios would also have a less than significant incremental lighting and glare impact beyond the impacts determined in the Original EIR for build-out of the Master Plan and, therefore, would be comparable and similar.

b. Air Quality

(1) Construction Phase

Based upon construction assumptions for the peak amount of workers, haul trucks, construction equipment, construction hours and acreage per day on the Project Site, the Reduced Project Alternative would require substantially similar construction activity as assumed for the proposed Project. Similarly, as with the proposed Project, the Reduced Project Alternative would require the demolition of the Existing Building, grading/excavation and building construction. As such, daily regional and localized construction emissions associated with the Reduced Project Alternative would be similar to the proposed Project.¹⁹

As with the proposed Project, the Reduced Project Alternative would comply with SCAQMD Rule 403, as well as the mitigation measures that were adopted in connection with the approval of the Master Plan. The construction mitigation measures recommended for the proposed Project (see *Section IV.B: Air Quality* of this Draft SEIR) would also be recommended for the Reduced Project Alternative. As with the proposed Project, a significant and unavoidable regional NO_X impact and localized PM_{2.5} and PM₁₀ impacts are anticipated after implementation of mitigation measures.²⁰ Both scenarios would also have a significant and unavoidable incremental

¹⁹ Terry A. Hayes Associates, *Air Quality and Noise Analysis for the Proposed Cedars-Sinai Medical Center West Tower Project Alternatives* memorandum to Planning Associates, Inc., August 7, 2008.

²⁰ Terry A. Hayes Associates, *Cedars-Sinai Medical Center West Tower Project Air Quality & Noise Impact Report,* August 7, 2008.

construction emissions impact beyond the impacts determined in the Original EIR for build-out of the Master Plan and, therefore, would be comparable and similar.²¹

As with the proposed Project, the Reduced Project Alternative would demolish the Existing Building at the Project Site, which was built in 1947, and has the potential to contain ACMs and lead-based paint. Demolition of the Existing Building has the potential to result in accidental release of ACMs and lead into the atmosphere. However, with implementation of the mitigation measures contained in *Section IV.B: Air Quality* for the proposed Project, the Reduced Project Alternative would result in a less than significant impact associated with carcinogenic air toxics. Both scenarios could also be mitigated to a less than significant incremental air toxics impact beyond the impacts determined in the Original EIR for build-out of the Master Plan, and therefore would be comparable and similar.

Finally, as with the proposed Project, potential sources that may emit odors during construction of the Reduced Project Alternative would include equipment exhaust and architectural coatings. Odors from these sources would be localized and generally confined to the Project Site. Similar to the proposed Project, the Reduced Project Alternative would utilize typical construction techniques, and the odors would be temporary and typical of most construction sites. In addition, the Reduced Project Alternative would be required to comply with regulations contained in SCAQMD Rule 402. Therefore, the construction odor impacts from both the Reduced Project Alternative and the proposed Project would be less than significant. Both scenarios would also have a less than significant incremental construction odor impact beyond the impacts determined in the Original EIR for build-out of the Master Plan and, therefore, would be comparable and similar.

(2) *Operational Phase*

Regional operational emissions from area and mobile sources associated with the Reduced Project Alternative would not exceed SCAQMD significance thresholds. Regional operational emissions for the Reduced Project Alternative would be slightly less than the proposed Project due to the reduction in size.²² However, both the Reduced Project Alternative and the proposed Project would result in a less than significant operational emissions impact. Both scenarios would also have a less than significant incremental operational emissions impact beyond the impacts determined in the Original EIR for build-out of the Master Plan, and therefore would be comparable and similar.

In the build-out year of 2023, CO concentrations associated with the Reduced Project Alternative would result in a one-hour concentration of 2 ppm and an eight-hour concentration in a range between 1.2 ppm and 1.7 ppm. As with the proposed Project, the one- and eight-hour CO concentrations would not exceed the State standards and would result in a less than significant CO concentrations impact.²³ Both scenarios would also have a less than significant incremental

 ²¹ Terry A. Hayes Associates, Air Quality and Noise Analysis for the Proposed Cedars-Sinai Medical Center West Tower Project Alternatives memorandum to Planning Associates, Inc., August 7, 2008.
 ²² Ibid.

²³ Terry A. Hayes Associates, Air Quality and Noise Analysis for the Proposed Cedars-Sinai Medical Center West Tower Project Alternatives memorandum to Planning Associates, Inc., August 7, 2008.

CO concentrations impact beyond the impacts determined in the Original EIR for build-out of the Master Plan and, therefore, would be comparable and similar.

The Reduced Project Alternative would not include any substantial potential sources of acutely and chronically hazardous TACs. The Project may increase the amount of medical waste incinerated on the CSMC Campus. The Original EIR, which included mitigation measures to reduce reliance on hazardous materials, discussed regulations and impacts associated with medical waste incineration (e.g., dioxin emissions). However, CSMC has replaced the incinerator with two steam sterilizers. The steam sterilizers dispose of medical waste on the CSMC Campus resulting from the Project would not produce dioxin emissions. Therefore, neither the Reduced Project Alternative nor the proposed Project would release substantial amounts of TACs and both would result in less than significant impacts on human health. Both scenarios would also have a less than significant incremental TAC impact beyond the impacts determined in the Original EIR for build-out of the Master Plan and, therefore, would be comparable and similar.

The Reduced Project Alternative would develop the Project Site with hospital-related uses, which are not land uses that are typically associated with odor complaints. Similar to the proposed Project, on-site trash receptacles would have the potential to create adverse odors; however, as trash receptacles would be located and maintained in a manner that promotes odor control, no adverse odor impacts would result. Like the Project, odors associated with food preparation in a kitchen are not anticipated to be substantial under the No Project Alternative and would be controlled by the ventilation system of the new building to be constructed. Additionally, both the Reduced Project Alternative and the proposed Project would be required to comply with SCAQMD Rule 402 and thus both would result in a less than significant impact associated with operational odors. Both scenarios would also have a less than significant incremental operational odor impact beyond the impacts determined in the Original EIR for build-out of the Master Plan and, therefore, would be comparable and similar.

The Reduced Project Alternative would not increase population or housing in the Los Angeles subregion since this alternative does not include a residential component. The Reduced Project Alternative is expected to incrementally increase employment over existing conditions by approximately 543 persons²⁵, which is less than the proposed Project. This increase would represent less than one percent of the 278,264 new employment growth projected by SCAG between 2007 and 2023 for the Los Angeles subregion. As with the proposed Project, operations of the Reduced Project Alternative would not exceed SCAG growth forecasts and would be considered to be consistent with growth assumptions included in the AQMP. Therefore, neither the Reduced Project Alternative nor the proposed Project would cause or contribute to new air quality violations and both would be consistent with the AQMP, resulting in less than significant impacts. Both scenarios would also have a less than significant incremental AQMP consistency impact beyond the impacts determined in the Original EIR for build-out of the Master Plan and, therefore, would be comparable and similar.

²⁴ Health Care Without Harm, *Toolkit 7, Alternatives to Medical Waste Incineration: Stopping the Toxic Threat*, 2002.

²⁵ Southern California Association of Governments, *Employment Density Study Summary Report*, October 31, 2001.

Finally, the Reduced Project Alternative would not embody features that are not typical of an urban environment nor generate a disproportionate amount of vehicle miles traveled. This alternative would not have unique or disproportionately high fuel consumption characteristics and would be located in an urban area that is already planned for medical uses. Further, the Reduced Project Alternative would be required to comply with any applicable mitigation measures adopted in connection with the approval of the Master Plan and all AB-32 related regulations, as well as those mitigation measures recommended for the proposed Project (see *Section IV.B: Air Quality*). As such, both the Reduced Project Alternative and the proposed Project would have a negligible and less than significant effect on any increase in regional and national GHG emissions. Both scenarios would also have a less than significant incremental global climate change impact beyond the impacts determined in the Original EIR for build-out of the Master Plan and, therefore, would be comparable and similar.

c. Noise

(1) Construction Phase

Construction of the Reduced Project Alternative would involve similar types of demolition, grading/excavation and building construction activities as the proposed Project. As such, construction noise levels associated with the Reduced Project Alternative would be similar to the proposed Project. As with the proposed Project, construction-related noise levels would exceed the 5-dBA significance threshold at various sensitive receptors, such as the adjacent medical office building, resulting in a significant noise impact. With consideration of the nearest Related Project, both the Project and Reduced Project Alternative would result in a significant cumulative noise impact as well. Similarly, should pile driving be required for this alternative, vibration levels would have the potential to exceed the significance threshold of 0.5 inches per second PPV. With implementation of proper mitigation measures (see Section IV.C: Noise), including those that were adopted in connection with the approval of the Master Plan and Original EIR, the Reduced Project Alternative would be reduced to a less than significant shortterm vibration impact. However, even with mitigation measures, both scenarios would result in a temporary significant and unavoidable construction noise impact (including cumulatively). Both scenarios would also have a significant and unavoidable incremental construction noise impact beyond the impacts determined in the Original EIR for build-out of the Master Plan and, therefore, would be comparable and similar.

(2) *Operational Phase*

Noise from the operation of existing uses is generated primarily by vehicular traffic coming to and from the Project Site. These levels would increase with any intensification of uses at the Project Site. The Reduced Project Alternative would generate a total of approximately 886 daily vehicle trips from the 75 inpatient beds associated with the Reduced Project scenario, which is less than the amount of traffic generated by the proposed Project.²⁶ The new 410,650 square-foot facility to be constructed at the Project Site would generate a total of approximately 9,675 daily

²⁶ Terry A. Hayes Associates, *Air Quality and Noise Analysis for the Proposed Cedars-Sinai Medical Center West Tower Project Alternatives* memorandum to Planning Associates, Inc., May 5, 2008.

vehicle trips, which is less than the West Tower to be constructed under the proposed Project. Noise levels for the Reduced Project Alternative would range from 67.1 to 74.6 dBA CNEL, which would be similar to or less than noise levels associated with the proposed Project. The greatest Project-related noise increase resulting from this alternative would be 0.3 dBA CNEL and would occur along Alden Drive-Gracie Allen Drive between Robertson Boulevard and George Burns Road. Thus, roadway noise levels attributed to both the Reduced Project Alternative and the proposed Project would increase by less than three dBA CNEL at all analyzed road segments, resulting in a less than significant impact. Both scenarios would also have a less than significant incremental operational vehicular noise impact beyond the impacts determined in the Original EIR for build-out of the Master Plan and, therefore, would be comparable and similar.

As with the proposed Project, the Reduced Project Alternative would also generate noise levels from mechanical equipment. However, the Reduced Project Alternative would be required to implement the mitigation measures recommended for the proposed Project and those that were adopted in connection with the approval of the Master Plan (i.e., the installation of sound attenuating devices on exhaust fans, enclosing mechanical equipment and providing sound absorbing and shielding provisions into the design of these equipment). Similar to the proposed Project, the mitigation measures would ensure that the mechanical equipment would not incrementally increase ambient noise levels by 5 dBA or more, thus resulting in a less than significant impact for both scenarios. Both scenarios would also have a less than significant incremental stationary noise impact beyond the impacts determined in the Original EIR for build-out of the Master Plan and, therefore, would be comparable and similar.

The Reduced Project Alternative would develop a similar seven-story, adjoining parking structure on the Project Site as the proposed Project, which would increase the noise level at the adjacent medical office building to the south by 0.1 dBA over the existing noise level to 65.9 dBA.²⁷ The other medical buildings (including the hospital) surrounding the Project Site would be farther away from the proposed parking structure and thus, incremental increases in noise levels at these buildings would be less than the adjacent medical office building. As the parking structure activity would not incrementally increase ambient noise levels by 5 dBA or more, parking noise under both the Reduced Project Alternative and the proposed Project would result in a less than significant impact. Both scenarios would also have a less than significant incremental parking noise impact beyond the impacts determined in the Original EIR for build-out of the Master Plan and, therefore, would be comparable and similar.

Finally, neither the Reduced Project Alternative nor the proposed Project would include significant stationary sources of ground-borne vibration, such as heavy equipment operations. Operational ground-borne vibration in the Project vicinity would be generated by vehicles and delivery trucks on the local roadways and would not be perceptible by sensitive receptors. Thus, operational vibration for both the Reduced Project Alternative and the proposed Project would result in a less than significant impact. Both scenarios would also have a less than significant incremental operational phase vibration impact beyond the impacts determined in the Original EIR for build-out of the Master Plan and, therefore, would be comparable and similar.

²⁷ Terry A. Hayes Associates, *Air Quality and Noise Analysis for the Proposed Cedars-Sinai Medical Center West Tower Project Alternatives* memorandum to Planning Associates, Inc., August 7, 2008.

Transportation and Circulation d.

(1) Traffic and LOS

Under the Reduced Project Alternative, a net increase of 85 vehicle trips during the weekday A.M. peak hour and 98 vehicle trips during the weekday P.M. peak hour are anticipated under the Future With Project Conditions (Build-out Year of 2023) for a total of 886 daily vehicle trips²⁸. As a whole, the new 410,650 square-foot facility to be constructed at the Project Site would generate a total of approximately 9,675 daily vehicle trips, which is less than the new facility to be constructed under the proposed Project. The same intersections, Int. No. 2: Robertson Blvd./Alden Dr.-Gracie Allen Dr. and Int. No. 6: George Burns Rd./Beverly Blvd., would be impacted by the Reduced Project Alternative, however, the impacts are slightly reduced. At these two intersections, the Reduced Project Alternative would not result in a significant impact during the A.M. peak hour at both, but would result in a significant impact during the P.M. peak hour at both without mitigation measures.²⁹ In comparison, the proposed Project would result in significant impacts during the A.M. and P.M. peak hours at both intersections. Further, although LOS levels are substantially similar at all intersections, under both the Reduced Project Alternative and the proposed Project, the V/C values are slightly reduced under this alternative. Overall, however, both the Reduced Project Alternative and the proposed Project would result in significant impacts at the two intersections, which could be reduced to less than significant levels with implementation of proper mitigation measures (see Section IV.D Transportation and Circulation of this Draft SEIR). Both scenarios would also have a less than significant incremental traffic impact with mitigation implementation beyond the impacts determined in the Original EIR for build-out of the Master Plan and, therefore, would be comparable and similar.

(2)Access and Transit

Under the Reduced Project Alternative, improvements to internal Campus circulation, pedestrian safety and access enhancements would be implemented in a manner consistent with the proposed Project. The changes in driveway and pedestrian access points at the Project Site would be similar under both scenarios. Impacts to public transit in the Project area would be slightly less than the proposed Project due to the decrease in beds and the reduction in anticipated employees for the Reduced Project Alternative. Both scenarios would result in the addition of less than one Project-related transit rider per bus in the Project area during the A.M. and P.M. peak hours. Both the Reduced Project Alternative and the proposed Project would result in less than significant Project access and public transit impacts. Both scenarios would also have less than significant incremental access and transit impacts beyond the impacts determined in the Original EIR for build-out of the Master Plan and, therefore, would be comparable and similar.

²⁸ Linscott, Law & Greenspan Engineers, CSMC Project Alternatives Analyses email to Planning Associates Inc., August 5, 2008. ²⁹ *Ibid*.

(3) Parking

Similar to the proposed Project, the Reduced Project Alternative would include the construction of the adjacent seven-level parking structure on the Project Site. However, due to the reduced City parking requirement for this alternative, the parking structure would contain extra parking spaces for CSMC Campus use. The City parking requirement for the CSMC Campus with implementation of the Reduced Project Alternative would total 7,607 parking spaces compared to the 7,669 spaces required with the proposed Project.³⁰ Both scenarios would provide a CSMC Campus total of 7,758 parking spaces. Thus, under the Reduced Project Alternative, the planned CSMC Campus parking supply of 7,758 spaces would exceed the City parking requirement of 7,607 spaces by a total of 151 spaces. Therefore, the parking impact of both the Reduced Project Alternative and the proposed Project would be less than significant. Both scenarios would also have a less than significant incremental parking impact beyond the impacts determined in the Original EIR for build-out of the Master Plan, and therefore would be comparable and similar. It should be noted that there would continue to be an adverse impact to businesses on Robertson Boulevard and Beverly Boulevard due to the loss of on-street parking spaces as a result of recommended traffic mitigation measures at Intersection Nos. 2 and 6 (above) under both the Reduced Project Alternative and the proposed Project.

e. Growth Inducing

The Reduced Project Alternative would not result in a measurable increased potential for new growth. As with the proposed Project, the net growth-inducing effect of the Reduced Project scenario would be less than significant and may be slightly less than any potential associated with the proposed Project (see *Section VI.D: Growth-Inducing Impacts*).

f. Cumulative Impacts

Other Related Projects, similar to those anticipated with the proposed Project, would be expected to be developed and impacts corresponding to those developments are anticipated to occur. The Reduced Project Alternative would result in a contribution to cumulative impacts that is similar to, but slightly less than, that described for the proposed Project. With the implementation of mitigation measures similar to those recommended for the proposed Project, the alternative's contribution toward cumulative impacts would be less than significant, like the Project's.

g. Relationship of Alternative to Project Objectives

The Reduced Project Alternative would result in similar or slightly lower impacts for most of the environmental impacts associated with the proposed Project (including those that would already be less than significant). However, the level of significance determination of each environmental issue for both scenarios is comparable and similar. The Reduced Project Alternative would satisfy some of the Project objectives to the extent possible with the proposed Project, with a few notable exceptions. Specifically, the Reduced Project Alternative would only provide an additional 75% of the 100 inpatient beds desired in the Southern California region, which is not as many as the proposed Project. Further, due to the reduced floor area for inpatient services for

³⁰ Per parking requirements set forth in City of Los Angeles Ordinance No. 168,847.

this alternative, the Reduced Project scenario may not provide and support the needed inpatient diagnostic and treatment facilities or improved medical technologies to the extent possible and desired under the proposed Project. Therefore, the Reduced Project Alternative would not attain three of the Project objectives to the extent established and possible under the proposed Project.

h. Comparison of Alternative's Project Impacts

Table 36: Summary of Alternative Net Incremental Impacts and Table 37: Alternatives Comparison to the Project provide a summary of the proposed alternatives, the net incremental impacts by environmental issue for each of the proposed alternatives and a comparison of the net incremental impacts of each alternative relative to the level of impact anticipated with the proposed Project, respectively. As illustrated in *Table 36: Summary of Alternative Net Incremental Impacts*, the proposed Project would result in significant and unavoidable impacts to air quality and noise during the short-term construction phase. A significant impact to traffic during the long-term operational phase would be reduced to a less than significant level after mitigation implementation. The Reduced Project alternative would not avoid, but could slightly reduce, the temporary significant air quality and noise impacts; however, the level of significance determinations would be the same under both scenarios.

Implementation of the Reduced Project Alternative would result in similar or reduced environmental impacts for all issue areas compared to the proposed Project. While some of the impacts under this alternative may have somewhat lesser impacts relative to the proposed Project, none of the impacts would be totally avoided. Overall, the Reduced Project Alternative would result in a slightly reduced level of impact when compared to the proposed Project, but would retain similar and comparable level of significance determinations.

V. ALTERNATIVES

D. ALTERNATIVE C: CHANGE IN USE – OUTPATIENT SERVICES

1. ALTERNATIVE DESCRIPTION

The "Change in Use" Alternative would consist of build-out of the Master Plan plus the addition of 200,000 square feet of new medical center uses dedicated for outpatient services. The Change in Use Alternative would entail the addition of outpatient uses with no substantial change in the uses already entitled by the approved Master Plan. The 200,000 square feet of outpatient services would replace the 200,000 square feet for 100 inpatient beds requested by the Project. It should be noted that up to 52 residual inpatient beds could still be incorporated on the CSMC Campus per the previous entitlement. Under the Change in Use Alternative, the 90,000 square foot Existing Building would be demolished and the Project Site would be redeveloped with approximately 460,650 square feet of medical center uses and a seven-level (or more) parking structure. The exterior building massing and design for the Change in Use Alternative is assumed to be essentially identical to that for the Project, although modifications may be necessary to address additional required parking, appropriate access and security for the outpatient services.

The Change in Use Alternative would require entitlements that are similar to those requested for the Project, except that the increases in intensity would be tied specifically to square footage increases for the purpose of outpatient services. The Change in Use Alternative would require the following:

- Zone Change to amend the conditions of the [T][Q]C2-2D-O zoning designation and to approve an additional 200,000 square feet of development entitlement for outpatient services;
- Height District Change to increase the permitted floor area ratio (FAR) on the CSMC Campus;
- Amendment to the Development Agreement and the Master Plan to permit an addition of 200,000 square feet of medical uses (for outpatient services) and related parking;
- Haul Route Permit;
- B-Permit for necessary street, sewer, storm drain, and lighting improvements;
- Grading Permits;
- Demolition Permits;

- Building Permits; and
- Any other necessary discretionary or ministerial permits and approvals required for the construction or operation of the Project.

The Change in Use Alternative was selected because it allows full implementation of the Master Plan and has the potential to accomplish many of the Project objectives by increasing the medical center intensity at the Project Site. As discussed earlier and determined in the Original EIR, the only feasible option for a change in use alternative at the Project Site is within the medical/hospital land use category. Since the proposed Project is currently made up of inpatient uses, the only option for an alternative is outpatient services. Further, changing the proposed uses from inpatient to outpatient uses has the potential to result in reduced impacts relative to those impacts identified with the Project. Although the overall construction related impacts would not change, the operational characteristics could change due to the shift from inpatient to outpatient services. The change in use may result in different vehicle trip characteristics and different visual and noise characteristics associated with the operation of this alternative.

2. ENVIRONMENTAL IMPACTS OF ALTERNATIVE

a. Aesthetics

Under the Change In Use Alternative, the visual changes to the Project Site would be substantially similar to those identified for the proposed Project. Building massing, height and design of the Change In Use Alternative would be identical to the proposed Project; however, the parking structure may need to be increased in massing, envelope or height to accommodate additional parking spaces that will be required for the CSMC Campus as a result of the change in use.

(1) Visual Character

Similar to the proposed Project, implementation of the Change In Use Alternative on the Project Site would change the visual character from a 2-story, architecturally non-descript Existing Building and adjacent surface parking lot to an 11-story, approximately 185 foot tall modern-style medical tower and a 7-level (or potentially larger) parking structure. The Change In Use Project Alternative would be similar in size and mass to the proposed Project as well as the existing North and South Towers on the CSMC Campus. The architectural design and landscaping associated with the new building would also be consistent with the existing design theme of the CSMC Campus.

The parking requirement for the outpatient services will be higher than the requirement for the inpatient services of the proposed Project (see Transportation and Circulation discussion below), thus the parking structure may need to be increased in size to accommodate additional parking. Although there will be an excess of parking created by a 700-space parking structure at the Project Site (as proposed for the Project), there would still be a shortfall in overall required parking on the CSMC Campus under this alternative. Potential infill parking development may also be required across the CSMC Campus. However, due to the size of the new medical

building and the urban character of the area, a heightened or larger parking structure on the Project Site beyond the seven levels of the proposed Project would not substantially affect the visual character of the area. The potential infill parking development at the CSMC Campus could require visual changes to existing parking structures, but these changes would be minor and would be consistent with the urban visual character of the CSMC Campus.

Overall, the Change In Use Project Alternative would have a similar impact to visual character as that identified for the proposed Project as both scenarios would provide for a more intensive Project Site with larger structures than currently exist. However, in the context of the existing urban character of the Project vicinity and CSMC Campus, neither the proposed Project nor the Change In Use Project Alternative would substantially alter the visual character or image of the area from current conditions or from what was previously entitled under the Master Plan. Therefore, both the Change In Use Project Alternative and the proposed Project would have a less than significant impact to visual character. Both scenarios would also have a less than significant incremental visual character impact beyond the impacts determined in the Original EIR for build-out of the Master Plan and, therefore, would be comparable and similar.

(2) Alteration of Views

Implementation of the Change In Use Project Alternative would increase visibility of development at the Project Site from existing conditions, which currently include the Existing Parking Lot and the Existing Building. The 2-story Existing Building and adjacent surface parking lot, which are relatively obscured from view by the surrounding urban development, would be replaced by an 11-story tower structure and adjoining parking structure that would be taller than some of the surrounding development. However, the viewshed impacts of the Change In Use Project scenario would be comparable to impacts of the proposed Project. Both the Change In Use Project Alternative and the proposed Project would be visually consistent with the surrounding CSMC structures and would result in less than significant impacts to existing views in the area. Both scenarios would also have a less than significant incremental viewshed impact beyond the impacts determined in the Original EIR for build-out of the Master Plan and, therefore, would be comparable and similar.

(3) Lighting and Glare

The Change In Use Project Alternative would be subject to the Los Angeles Building Code and Municipal Code requirements regarding lighting and glare. Unlike inpatient services, the proposed outpatient services are expected to operate during daytime business hours, thus nighttime illumination may be slightly reduced from interior lighting. However, nighttime illumination from security lighting is expected to remain the same under the Change In Use Project scenario. The impacts of nighttime illumination from both the Change In Use Project Alternative and the proposed Project can be mitigated through window tinting, shielding and other regulatory requirements. Glare from windows and reflective surfaces may also be mitigated through Code and regulatory requirements. Both the proposed Project and the Change In Use Project Alternative would take similar steps to mitigate impacts from lighting and glare to less than significant levels. Both scenarios would also have a less than significant incremental lighting and glare impact beyond the impacts determined in the Original EIR for build-out of the Master Plan and, therefore, would be comparable and similar.

b. Air Quality

(1) Construction Phase

Based upon construction assumptions for the peak amount of workers, haul trucks, construction equipment, construction hours and acreage per day on the Project Site, the Change In Use Project Alternative would require similar construction activity as assumed for the proposed Project. Similarly, as with the proposed Project, the Change In Use Project Alternative would require the demolition of the Existing Building, grading/excavation and building construction. As such, daily regional and localized construction emissions associated with the Change In Use Project Alternative would be similar to the proposed Project.

As with the proposed Project, the Change In Use Project Alternative would comply with SCAQMD Rule 403 as well as the mitigation measures that were adopted in connection with the approval of the Master Plan. The construction mitigation measures recommended for the proposed Project (see *Section IV.B: Air Quality* of this Draft SEIR) would also be recommended for the Change In Use Project Alternative.³¹ As with the proposed Project, a significant and unavoidable regional NO_X impact and localized PM_{2.5} and PM₁₀ impacts are anticipated after implementation of mitigation measures. Both scenarios would also have a significant and unavoidable incremental construction emissions impact beyond the impacts determined in the Original EIR for build-out of the Master Plan and, therefore, would be comparable and similar.

As with the proposed Project, the Change In Use Project Alternative would demolish the Existing Building at the Project Site, which was built in 1947, and has the potential to contain ACMs and lead-based paint. Demolition of the Existing Building has the potential to result in accidental release of ACMs and lead into the atmosphere. However, with implementation of the mitigation measures contained in *Section IV.B: Air Quality* for the proposed Project, both the Change In Use Project Alternative and the proposed Project would result in a less than significant impact associated with carcinogenic air toxics. Both scenarios would also have a less than significant incremental air toxics impact beyond the impacts determined in the Original EIR for build-out of the Master Plan and, therefore, would be comparable and similar.

Finally, as with the proposed Project, potential sources that may emit odors during construction of the Change In Use Project Alternative would include equipment exhaust and architectural coatings. Odors from these sources would be localized and generally confined to the Project Site. Similar to the proposed Project, the Change In Use Project Alternative would utilize typical construction techniques, and the odors would be temporary and typical of most construction sites. In addition, the Change In Use Project Alternative would be required to comply with regulations contained in SCAQMD Rule 402. Therefore, the construction odor impact from both the Change In Use Project Alternative and the proposed Project would be less than significant. Both scenarios would also have a less than significant incremental construction odor impact

³¹ Terry A. Hayes Associates, *Air Quality and Noise Analysis for the Proposed Cedars-Sinai Medical Center West Tower Project Alternatives* memorandum to Planning Associates, Inc., August 7, 2008.

beyond the impacts determined in the Original EIR for build-out of the Master Plan and, therefore, would be comparable and similar.

(2) Operational Phase

Regional operational emissions from area and mobile sources associated with the Change In Use Project Alternative would exceed SCAQMD significance thresholds for VOC, NO_X, CO and PM_{10} .³² Regional operational emissions for the Change In Use Project Alternative would be greater than the proposed Project due to the conversion of the Project's inpatient services to outpatient services and the subsequent increase in vehicular traffic associated with these outpatient services (see Transportation and Circulation below). Since operational emissions are primarily generated by motor vehicles, and no feasible mitigation measures are available to reduce emissions from motor vehicles, the Change In Use Project Alternative would result in a significant and unavoidable long-term air quality impact, which is greater than the proposed Project. Therefore, the Change In Use scenario would result in a significant and unavoidable incremental operational emissions impact beyond the impacts determined in the Original EIR for build-out of the Master Plan, and therefore would result in a greater impact than the proposed Project.

In the build-out year of 2023, CO concentrations associated with the Change In Use Project Alternative would result in a one-hour concentration of 2 ppm and an eight-hour concentration in a range between 1.2 ppm and 1.7 ppm.³³ As with the proposed Project, the one- and eight-hour CO concentrations would not exceed the State standards and would result in a less than significant CO concentrations impact. Both scenarios would also have a less than significant incremental CO concentrations impact beyond the impacts determined in the Original EIR for build-out of the Master Plan and, therefore, would be comparable and similar.

The Change In Use Project Alternative would not include any substantial potential sources of acutely and chronically hazardous TACs. The Project may increase the amount of medical waste incinerated on the CSMC Campus. The Original EIR, which included mitigation measures to reduce reliance on hazardous materials, discussed regulations and impacts associated with medical waste incineration (e.g., dioxin emissions). However, CSMC has replaced the incinerator with two steam sterilizers. The steam sterilizers dispose of medical waste on the CSMC Campus resulting from the Project would not produce dioxin emissions. Therefore, neither the Change In Use Project Alternative nor the proposed Project would release substantial amounts of TACs and both would result in less than significant impacts on human health. Both scenarios would also have a less than significant incremental TAC impact beyond the impacts determined in the Original EIR for build-out of the Master Plan and, therefore, would be comparable and similar.

 ³² Terry A. Hayes Associates, Air Quality and Noise Analysis for the Proposed Cedars-Sinai Medical Center West Tower Project Alternatives memorandum to Planning Associates, Inc., August 7, 2008.
 ³³ Ibid.

³⁴ Health Care Without Harm, *Toolkit 7, Alternatives to Medical Waste Incineration: Stopping the Toxic Threat*, 2002.

The Change In Use Project Alternative would develop the Project Site with hospital-related uses, which are not land uses that are typically associated with odor complaints. Similar to the proposed Project, on-site trash receptacles would have the potential to create adverse odors. However, as trash receptacles would be located and maintained in a manner that promotes odor control, no adverse odor impacts would result. Like the Project, odors associated with food preparation in a kitchen are not anticipated to be substantial under the No Project Alternative and would be controlled by the ventilation system of the new building to be constructed. Additionally, both the Change In Use Project Alternative and the proposed Project would be required to comply with SCAQMD Rule 402 and thus both would result in a less than significant impact associated with operational odors. Both scenarios would also have a less than significant incremental operational odor impact beyond the impacts determined in the Original EIR for build-out of the Master Plan and, therefore, would be comparable and similar.

The Change In Use Project Alternative would not increase population or housing in the Los Angeles subregion since this alternative does not include a residential component. The Change In Use Project Alternative is expected to incrementally increase employment by approximately 606 persons³⁵, which is the same as the proposed Project. This increase would represent less than one percent of the 278,264 new employment growth projected by SCAG between 2007 and 2023 for the Los Angeles subregion.³⁶ As with the proposed Project, operations of the Change In Use Project Alternative would not exceed SCAG growth forecasts and would be considered to be consistent with growth assumptions included in the AQMP. Therefore, neither the Change In Use Project Alternative nor the proposed Project would cause or contribute to new air quality violations and both would be consistent with the AQMP, resulting in less than significant impacts. Both scenarios would also have a less than significant incremental AQMP consistency impact beyond the impacts determined in the Original EIR for build-out of the Master Plan and, therefore, would be comparable and similar.

Finally, the Change In Use Project Alternative would not embody features that are not typical of an urban environment or generate a disproportionate amount of vehicle miles traveled. This alternative would not have unique or disproportionately high fuel consumption characteristics and would be located in an urban area that is already planned for medical uses.³⁷ Further, the Change In Use Project Alternative would be required to comply with any applicable mitigation measures adopted in connection with the approval of the Master Plan and Original EIR and all AB-32 related regulations, as well as those mitigation measures recommended for the proposed Project (see *Section IV.B: Air Quality*). As such, both the Change In Use Project Alternative and the proposed Project would have a negligible and less than significant effect on any increase in regional and national GHG emissions. Both scenarios would also have a less than significant incremental global climate change impact beyond the impacts determined in the Original EIR for build-out of the Master Plan and, therefore, would be comparable and similar.

 ³⁵ Southern California Association of Governments, *Employment Density Study Summary Report*, October 31, 2001.
 ³⁶ Terry A. Hayes Associates, *Air Quality and Noise Analysis for the Proposed Cedars-Sinai Medical Center West Tower Project Alternatives* memorandum to Planning Associates, Inc., August 7, 2008.

³⁷ *Ibid*.

c. Noise

(1) Construction Phase

Construction of the Change In Use Project Alternative would involve similar types of demolition, grading/excavation and building construction activities as the proposed Project. As such, construction noise levels associated with the Change In Use Project Alternative would be similar to the proposed Project. As with the proposed Project, construction-related noise levels would exceed the 5-dBA significance threshold at various sensitive receptors, resulting in a significant noise impact.³⁸ With consideration of the nearest Related Project, both the Project and the Change In Use Project Alternative would result in a significant cumulative noise impact as well. Similarly, should pile driving be required for this alternative, vibration levels would have the potential to exceed the significance threshold of 0.5 inches per second PPV. With implementation of proper mitigation measures (see Section IV.C: Noise), including those that were adopted in connection with the approval of the Master Plan and Original EIR, the Change In Use Project Alternative would be reduced to a less than significant short-term vibration impact; however, even with mitigation measures, both scenarios would result in a temporary significant and unavoidable construction noise impact (including cumulatively). Therefore, both scenarios would also have a significant and unavoidable incremental construction noise impact beyond the impacts determined in the Original EIR for build-out of the Master Plan and, therefore, would be comparable and similar.

(2) **Operational Phase**

Noise from the operation of existing uses is generated primarily by vehicular traffic coming to and from the Project Site. These levels would increase with any intensification of uses at the Project Site. The Change In Use Project Alternative would generate a total of approximately 7,963 daily vehicle trips from the 200,000 square feet of outpatient services associated with the Change In Use Project scenario, which is greater than the amount of traffic generated by the 100 inpatient beds (200 square feet) for the proposed Project.³⁹ The new 460,650 square-foot facility to be constructed at the Project Site would generate a total of approximately 16,752 daily vehicle trips, which is greater than the new facility to be constructed under the proposed Project.⁴⁰ Noise levels for the Change In Use Project Alternative would range from 68.0 to 74.8 dBA CNEL, which would be similar to or greater than noise levels associated with the proposed Project.⁴¹ The greatest Project-related noise increase resulting from this alternative would be 1.2 dBA CNEL and would occur along Alden Drive-Gracie Allen Drive between Robertson Boulevard and George Burns Road.⁴² Thus, roadway noise levels attributed to both the Change In Use Project Alternative and the proposed Project would increase by less than 3 dBA CNEL at all analyzed road segments, resulting in a less than significant impact. Both scenarios would also have a less than significant incremental operational vehicular noise impact beyond the impacts

³⁸ Terry A. Hayes Associates, *Air Quality and Noise Analysis for the Proposed Cedars-Sinai Medical Center West Tower Project Alternatives* memorandum to Planning Associates, Inc., August 7, 2008.

³⁹ Ibid.

⁴⁰ Ibid.

 $^{^{41}}$ Ibid.

⁴² Ibid.

determined in the Original EIR for build-out of the Master Plan, and therefore would be comparable and similar. It must be noted that unlike inpatient service facilities, which may operate 24 hours daily, the medical tenants utilizing the outpatient space could be expected to operate under regular business hours and thus may confine traffic noise during the daytime, which may reduce operational noise impacts further.

As with the proposed Project, the Change In Use Project Alternative would also generate noise levels from mechanical equipment. However, the Change In Use Project Alternative would be required to implement the mitigation measures recommended for the proposed Project and those that were adopted in connection with the approval of the Master Plan and Original EIR (i.e., the installation of sound attenuating devices on exhaust fans, enclosing mechanical equipment and providing sound absorbing and shielding provisions into the design of these equipment). Similar to the proposed Project, the mitigation measures would ensure that the mechanical equipment would not incrementally increase ambient noise levels by 5 dBA or more, thus resulting in a less than significant impact for both scenarios. Both scenarios would also have a less than significant incremental stationary noise impact beyond the impacts determined in the Original EIR for build-out of the Master Plan and, therefore, would be comparable and similar.

The Change In Use Project Alternative may develop a similar or larger parking structure in comparison to the 7-level adjoining parking structure of the proposed Project. A similar parking structure would mimic the proposed Project by increasing the noise level at the adjacent medical office building to the south by 0.1 dBA over the existing noise level to 65.9 dBA.⁴³ The other medical buildings (including the hospital) surrounding the Project Site would be farther away from the proposed parking structure and thus, incremental increases in noise levels at these buildings would be less than the adjacent medical office building. A larger parking structure with higher capacity for vehicles may increase the noise level at the adjacent medical office building by a slightly larger dBA. However, in both scenarios, parking structure activity would not incrementally increase ambient noise levels by 5 dBA or more; therefore, parking noise under both the Change In Use Project Alternative and the proposed Project would result in a less than significant impact. Both scenarios would also have a less than significant incremental parking noise impact beyond the impacts determined in the Original EIR for build-out of the Master Plan and, therefore, would be comparable and similar.

Finally, neither the Change In Use Project Alternative nor the proposed Project would include significant stationary sources of ground-borne vibration, such as heavy equipment operations. Operational ground-borne vibration in the Project vicinity would be generated by vehicles and delivery trucks on the local roadways and would not be perceptible by sensitive receptors. Thus, operational vibration for both the Change In Use Project Alternative and the proposed Project would result in a less than significant impact. Both scenarios would also have a less than significant incremental operational phase vibration impact beyond the impacts determined in the Original EIR for build-out of the Master Plan and, therefore, would be comparable and similar.

⁴³ Terry A. Hayes Associates, *Air Quality and Noise Analysis for the Proposed Cedars-Sinai Medical Center West Tower Project Alternatives* memorandum to Planning Associates, Inc., August 7, 2008.

d. Transportation and Circulation

(1) Traffic and LOS

Under the Change in Use Alternative, a net increase of 496 vehicle trips during the weekday A.M. peak hour and 600 vehicle trips during the weekday P.M. peak hour are anticipated under the Future With Project Conditions (Build-out Year of 2023) for a total of 7,963 additional daily vehicle trips.⁴⁴ As a whole, the new 460,650 square-foot facility to be constructed at the Project Site would generate a total of approximately 16,752 daily vehicle trips, which is greater than the new facility to be constructed under the proposed Project.⁴⁵ Contrary to the two intersections impacted by the proposed Project, the Change In Use Project Alternative would result in significant impacts to 17 of the 22 study intersections in the Project area during the A.M. and/or P.M. peak hours. A total of 15 of these 17 intersections would be operating at an LOS E or LOS F under Future With Project Conditions in the A.M. and/or P.M. peak hours. The same intersections would also have operated at an LOS E or LOS F in the A.M. and P.M. peak hours under Future Pre-Project Conditions with Related Projects. The capacity for improvements at some intersections has been reached, so the ability to implement mitigation measures to reduce impacts to less than significant levels may be unavoidable. Thus, the Change In Use Project Alternative may result in a significant and unavoidable long-term traffic impact, which is greater than the traffic impact associated with the proposed Project. Therefore, the Change In Use scenario would result in a significant and unavoidable incremental traffic impact beyond the impacts determined in the Original EIR for build-out of the Master Plan and, therefore, would have a greater impact than the proposed Project.

(2) Access and Transit

Under the Change In Use Project Alternative, improvements to internal Campus circulation, pedestrian safety and access enhancements would be implemented in a manner consistent with the proposed Project. The changes in driveway and pedestrian access points at the Project Site would be the same under both scenarios. In terms of public transit impacts, the Change In Use Project Alternative would generate approximately 24 A.M. peak hour transit trips and 29 P.M. peak hour transit trips. Over a 24-hour period, this alternative would generate demand for 390 daily transit trips. For the 11 transit lines in the Project area, which provide service for an average of 93 buses during the A.M. peak hour and roughly 94 buses during the P.M. peak hour⁴⁶, the Change In Use Project Alternative would add less than one Project-related transit rider per bus during both the A.M. and P.M. peak hours. Whereas the Change In Use Project Alternative would result in a greater number of public transit riders in the Project area over the proposed Project, both would result in a less than significant impact based on the existing capacity of public transit in the area. Overall, both the Change In Use Project Alternative and the proposed Project would result in less than significant Project access and public transit impacts.

⁴⁴ Linscott, Law & Greenspan Engineers, *CSMC Project Alternatives Analyses* email to Planning Associates Inc., August 5, 2008.

⁴⁵ Terry A. Hayes Associates, *Air Quality and Noise Analysis for the Proposed Cedars-Sinai Medical Center West Tower Project Alternatives* memorandum to Planning Associates, Inc., August 7, 2008.

⁴⁶ Linscott, Law & Greenspan Engineers, *Traffic Impact Study Cedars Sinai Medical Center Project*, June 23, 2008 (see *Appendix E: Traffic Impact Study*)

Both scenarios would also have less than significant incremental access and transit impacts beyond the impacts determined in the Original EIR for build-out of the Master Plan and, therefore, would be comparable and similar.

(3) Parking

Similar to the proposed Project, the Change In Use Project Alternative would include the construction of an adjoining parking structure on the Project Site. However, due to the increased City parking requirement for this alternative, the parking structure would need to contain more parking spaces than the parking structure adjoining the proposed Project. The City parking requirement for the CSMC Campus with implementation of the Change In Use Project Alternative would total 8,419 parking spaces compared to the 7,669 spaces required with the proposed Project.⁴⁷ Under the proposed Project, the 7-level parking structure would help provide a CSMC Campus total of 7,758 parking spaces. However, the Change In Use Project Alternative would be required to include an additional approximately 661 spaces to the adjoining parking structure or to the CSMC Campus in order to meet City requirements. Although much of this additional required parking could be included in the proposed parking structure, the parking structure size would be limited by spatial restrictions at the Project Site and height restrictions imposed by the City. Thus, additional spaces would likely be infilled within existing parking structures throughout the CSMC Campus. This would require expansions or construction of a new parking structure, which may require demolition of an existing facility. These changes would potentially result in increased incremental impacts over the impacts determined for buildout of the Master Plan in the Original EIR. Therefore, the parking impact of the Change In Use Project Alternative would be greater than the proposed Project and would result in a significant impact if additional parking were not provided on the CSMC Campus. Assuming the provision of additional parking on the CSMC Campus, both scenarios would have a less than significant incremental parking impact beyond the impacts determined in the Original EIR for build-out of the Master Plan, and therefore would be comparable and similar. It must be noted that there may be additional adverse impacts to businesses on surrounding roadways due to the loss of on-street parking spaces as a result of recommended traffic mitigation measures at various impacted intersections.

e. Growth Inducing

Like the proposed Project, the Change In Use Project Alternative is not anticipated to result in a measurable increased potential for new growth. As with the proposed Project, the net growth-inducing effect of the Change In Use Project scenario would be less than significant and may be slightly less than any potential associated with the proposed Project (see *Section VI.D: Growth-Inducing Impacts*).

f. Cumulative Impacts

The same Related Projects for the proposed Project would be expected to be developed under the Change In Use Project Alternative and the impacts corresponding to those developments are anticipated to occur. The Change In Use Project Alternative would result in a significant

⁴⁷ Per parking requirements established under City of Los Angeles Ordinance No. 168,847.

contribution to cumulative traffic impacts that are greater than the proposed Project. Due to the increase in traffic on the surrounding street network and the LOS impacts at several study intersections, the Change In Use Project Alternative is anticipated to result in significant impacts. Even with the implementation of mitigation measures, certain impacted intersections may have reached mitigation capacity; thus, this alternative's contribution toward cumulative impacts may be significant and unavoidable.

g. Relationship of Alternative to Project Objectives

The Change In Use Project Alternative would result in similar and comparable impacts for most of the environmental impacts associated with the proposed Project (including those that would already be less than significant), but would result in greater impacts and level of significance determinations for long-term operational air quality, traffic, and cumulative effects. The Change In Use Project Alternative would also satisfy most of the Project objectives to the extent possible with the proposed Project, with a few important exceptions. Specifically, the Change In Use Project Alternative would not provide any (0%) additional inpatient beds desired in the Southern California region. Further, due to the conversion of floor area to outpatient services for this alternative, the Change In Use Project scenario will not provide and support the needed inpatient diagnostic and treatment facilities or improved medical technologies to the extent possible and desired under the proposed Project. Therefore, the Change In Use Project Alternative would not attain three of the Project objectives to the extent established and possible under the proposed Project.

h. Comparison of Alternative's Project Impacts

Table 36: Summary of Alternative Net Incremental Impacts and Table 37: Alternatives Comparison to the Project provide a summary of the proposed alternatives, the net incremental impacts by environmental issue for each of the proposed alternatives and a comparison of the net incremental impacts of each alternative relative to the level of impact anticipated with the proposed Project, respectively. As illustrated in *Table 36: Summary of Alternative Net Incremental Impacts*, the proposed Project would result in significant and unavoidable impacts to air quality and noise during the short-term construction phase. A significant impact to traffic during the long-term operational phase would also occur. Due to the mitigation capacity utilization of several intersections impacted by the Change In Use Project Alternative, it is anticipated that this alternative would not be able to mitigate the significant and unavoidable traffic impacts. The Change In Use Project scenario would not avoid the temporary significant air quality and noise impacts, and could potentially create a significant and unavoidable impact to long-term operational air quality and traffic. Significant impacts to parking would also result if additional parking spaces were not provided on the CSMC Campus.

Although conversion of inpatient to outpatient services under the Change In Use Project Alternative was anticipated to reduce certain air quality, noise and traffic impacts (or confine them to certain hours of the day) due to the types of medical equipment (or lack of) and operational hours associated with the outpatient services, these impact reductions would be negligible and substantially similar to, or in some cases greater than, the proposed Project. Implementation of the Change In Use Project Alternative would result in similar or increased environmental impacts for all issue areas compared to the proposed Project. Some of the impacts under this alternative could be somewhat greater impacts relative to the proposed Project and none of the impacts would be completely avoided. Overall, the Change In Use Project Alternative would result in an increased level of impact when compared to the proposed Project.

V. ALTERNATIVES

E. ENVIRONMENTALLY SUPERIOR ALTERNATIVE

Section 15126.6(e)(2) of the CEQA Guidelines requires that an EIR identify the environmentally superior alternative. If the "No Project" alternative is the environmentally superior alternative, then the EIR must identify an environmentally superior alternative among the remaining alternatives.

Based on the analysis of the Draft SEIR, the proposed Project is anticipated to result in significant unavoidable impacts related to:

- Construction (short-term) air quality impacts related to NO_X, PM₁₀ and PM_{2.5}
- Construction (short-term) noise impacts at sensitive receptors

Table 37: Alternatives Comparison to the Project, provides a matrix that compares the impacts of each alternative relative to the level of impact anticipated with the proposed Project. A more detailed description of each alternative and the potential impacts associated with each is provided above.

Of the alternatives analyzed in this Draft SEIR, the No Project Alternative is considered the overall environmentally superior alternative as it would reduce and/or avoid the majority of the impacts (even those that would be less than significant) that would occur with implementation of the proposed Project. However, the No Project Alternative would not substantially satisfy the objectives of the Project.

In accordance with the CEQA Guidelines, a second alternative must be established as environmentally superior when the No Project Alternative is the primary superior alternative. The comparative evaluation indicates that the Reduced Project Alternative would also be environmentally superior. The Reduced Project Alternative would result in the reduction of more Project impacts than the remaining alternative. Primarily, the Reduced Project Alternative would reduce the transportation and circulation impacts associated with the proposed Project due to the reduced size of this alternative. However, the Reduced Project Alternative would not meet the Project objective to provide 100 additional inpatient beds in the region and Project objectives to support improved medical technologies and to provide needed inpatient diagnostic and treatment facilities may not be fulfilled to the extent desired or possible under the proposed Project due to the reduction in inpatient and building space.

	SUMMARI OF ALIERNATIVE NET IMPACTS								
PROJECT PHASE	PROPOSED PROJECT	<u>ALT A</u> NO PROJECT	ALT B REDUCED PROJECT	<u>ALT C</u> CHANGE-IN-USE PROJECT					
AESTHETICS									
Construction (Short-Term)	Less than significant	No impact	Less than significant	Less than significant					
Operation (Long-Term)	Less than significant	No impact	Less than significant	Less than significant					
Cumulative	Less than significant	No impact	Less than significant	Less than significant					
AIR QUALITY									
Construction (Short-Term)	Significant	No impact	Significant	Significant					
Operation (Long-Term)	Less than significant	No impact	Less than significant	Significant					
Cumulative	Less than significant	No impact	Less than significant	Significant					
NOISE									
Construction (Short-Term)	Significant	No impact	Significant	Significant					
Operation (Long-Term)	Less than significant	No impact	Less than significant	Less than significant					
Cumulative	Less than significant	No impact	Less than significant	Less than significant					
TRANSPORTATION AND CIRCULATION									
Construction (Short-Term)	Less than significant	No impact	Less than significant	Less than significant					
Operation (Long-Term)	Less than significant with mitigation	No impact	Less than significant with mitigation	Significant					
Cumulative	Less than significant	No impact	Less than significant	Significant					
CUMULATIVE	EFFECTS								
Construction (Short-Term)	Not applicable	Not applicable	Not applicable	Not applicable					
Operation (Long-Term)	Less than significant	No impact	Less than significant	Significant					
Cumulative	Less than significant	No impact	Less than significant	Significant					
GROWTH INDUCTING IMPACTS									
Construction (Short-Term)	Less than significant	No impact	Less than significant	Less than significant					
Operation (Long-Term)	Less than significant	No impact	Less than significant	Less than significant					
Cumulative	Less than significant	No impact	Less than significant	Less than significant					

<u>TABLE 36</u>					
SUMMARY OF ALTE	RNATIVE NET IMPACTS				

				KOJE				
ALTERNATIVE ID	ALTERNATIVE TITLE	AESTHETICS	AIR QUALITY	NOISE	TRANSPORTATION AND CIRCULATION	CUMULATIVE EFFECTS	GROWTH INDUCING	OTHER IMPACTS
CONST	TRUCTION PHASE (SHORT-TERM)							
А	No Project (Master Plan Build-out)		∞	∞	-	-	N/A	—
В	Reduced Project (150K Additional)	¤			¤	¤	N/A	¤
С	Change in Use (Outpatient Services)	¤	¤	¤	¤	¤	N/A	¤
OPER	ATIONAL PHASE (LONG-TERM)							
А	No Project (Master Plan Build-out)		Ι	-	-	-	-	—
В	Reduced Project (150K Additional)	¤	-	-	-	¤	¤	¤
С	Change in Use (Outpatient Services)						¤	¤
Сими	CUMULATIVE (LONG-TERM/OPERATIONAL)							
А	No Project (Master Plan Build-out)	_	_	-			-	_
В	Reduced Project (150K Additional)	¤		¤	_	¤	Ø	¤
С	Change in Use (Outpatient Services)	¤		¤			Ø	¤
 Key: ¤ = Net incremental impact is equivalent to that identified for the Project ▲ = Net incremental impact is greater than that identified for the Project, but remains less than significant (either with mitigation or not) ▼ = Net incremental impact is greater than that identified for the Project and thus remains a significant impact ▶ = Net incremental impact is greater than that identified for the Project and becomes a significant impact ■ Net incremental impact is less than that identified for the Project and becomes a significant impact ■ Net incremental impact is less than that identified for the Project and thus remains a less than significant impact (either with mitigation or not) √ = Net incremental impact is less than that identified for the Project, but remains a significant impact 								

TABLE 37 ALTERNATIVES COMPARISON TO THE PROJECT

 ∞ = Net incremental impact is less than that identified for the Project, and becomes a less than

significant impact