

Section 6.0  
**ALTERNATIVES TO THE  
PROPOSED PROJECT**

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## 6.0 ALTERNATIVES TO THE PROPOSED PROJECT

In accordance with *CEQA Guidelines* Section 15126.6, the following section describes a range of reasonable alternatives to the proposed project, which could feasibly attain most of the basic objectives of the proposed project but would avoid or substantially lessen any of the significant effects of the proposed project. The evaluation considers the comparative merits of each alternative. The analysis focuses on alternatives capable of avoiding significant environmental effects or reducing them to less than significant levels, even if these alternatives would impede, to some degree, the attainment of the proposed project objectives.

The alternatives to the proposed project under consideration within this Draft EIR consist of:

- ◆ No Project/No Development Alternative;
- ◆ Alternative One (Inpatient Building Only and Supporting Facilities);
- ◆ Alternative Two (MOBs 1 and 2, Inpatient Building and Supporting Facilities); and
- ◆ Alternative Three (MOBs 1-3, Reduced Height Inpatient Building and Supporting Facilities).

A comparison of the development potential of the proposed project with the alternatives is provided in *Table 6-1, Comparison of Development of Proposed Project and Alternatives*.

Throughout the following analysis, impacts of alternatives are examined for each of the issue areas examined in Section 5.0 of this EIR. In this manner, each alternative can be compared to the proposed project on an issue-by-issue basis. *Table 6-2, Comparison of Impacts of Proposed Project and Alternatives*, at the end of this section, provides a summary of the alternatives analyzed and a comparison of each alternative's impact in relation to the proposed project along with each alternative's ability to meet the Project Objectives identified in Section 3.0 Project Description of this EIR. At the conclusion of the alternative analysis is the selection of the "environmentally superior" alternative, which is required by *CEQA*.

Section 5.0 of this EIR found that the proposed project would result in significant and unavoidable impacts in four environmental issue areas:

- ◆ Traffic – Long-Term (2030) Cumulative Impacts at two intersections: 1) McBean Parkway at Valencia Boulevard; and 2) McBean Parkway at Orchard Village Road
- ◆ Air Quality – Short-Term Construction-Related Impacts for PM<sub>10</sub> and PM<sub>2.5</sub> emissions – Project and Cumulative
- ◆ Noise – Short-Term Construction-Related Impacts – Project
- ◆ Solid Waste – Long-Term Operational Impacts – Project and Cumulative



**Table 6-1  
Comparison of Development of the Proposed Project and Alternatives**

Use	Area (Square Feet) & # Hospital Beds				
	Proposed Project	No Project/ No Development Alternative	Alt One – Inpatient Building Only	Alt Two – MOB 1 & 2, Inpatient Building	Alt Three – MOB 1, 2 & 3, Reduced Height Inpatient Building
Main Hospital <sup>1</sup>	146,000 SF 121 Existing Beds 18 New Beds	146,000 SF 121 Existing Beds	146,000 SF 121 Existing Beds 18 New Beds	146,000 SF 121 Existing Beds 18 New Beds	146,000 SF 121 Existing Beds 18 New Beds
Main Hospital Basement	5,286 SF	5,286 SF	5,286 SF	5,286 SF	5,286 SF
Hospital Pavilion Building	63,800 SF 100 Existing Beds 9 New Beds	63,800 SF 100 Existing Beds	63,800 SF 100 Existing Beds 9 New Beds	63,800 SF 100 Existing Beds 9 New Beds	63,800 SF 100 Existing Beds 9 New Beds
Inpatient Building	125,363 SF 120 New Beds	---	125,363 SF 120 New Beds	125,363 SF 120 New Beds	138,171 SF 120 New Beds
<b>Subtotal Hospital &amp; Related Uses</b>	<b>340,449 SF 368 Beds</b>	<b>215,086 SF 221 Beds</b>	<b>340,449 SF 368 Beds</b>	<b>340,449 SF 368 Beds</b>	<b>353,257 SF 368 Beds</b>
Hospital Bridge (Covered Walkway)	9,122 SF	9,122 SF	9,122 SF	9,122 SF	9,122 SF
Mechanical Plant	8,585 SF	8,585 SF	8,585 SF	8,585 SF	8,585 SF
Facilities Building (Warehouse)	2,384 SF	2,384 SF	2,384 SF	2,384 SF	2,384 SF
Facilities Building (Office)	734 SF	734 SF	734 SF	734 SF	734 SF
Central Plant	10,000 SF	---	10,000 SF	10,000 SF	10,000 SF
Helipads	2 locations	---	1 location	2 locations	2 locations
<b>Subtotal Support Facilities Uses</b>	<b>30,825 SF</b>	<b>20,825 SF</b>	<b>30,825 SF</b>	<b>30,825 SF</b>	<b>30,825 SF</b>
MOB A	5,302 SF	5,302 SF	5,302 SF	5,302 SF	5,302 SF
MOB B	5,302 SF	5,302 SF	5,302 SF	5,302 SF	5,302 SF
MOB C	5,302 SF	5,302 SF	5,302 SF	5,302 SF	5,302 SF
MOB D	5,302 SF	5,302 SF	5,302 SF	5,302 SF	5,302 SF
MOB E	31,040 SF	31,040 SF	31,040 SF	31,040 SF	31,040 SF
MOB F Sheila R. Veloz Breast Imaging Center	43,912 SF	43,912 SF	43,912 SF	43,912 SF	43,912 SF
Foundation & Administration Office Building	0 SF	8,000 SF	8,000 SF	8,000 SF	0 SF
MOB 1	80,000 SF	---	---	80,000 SF	80,000 SF
MOB 2	60,000 SF	---	---	60,000 SF	60,000 SF
MOB 3	60,000 SF	---	---	---	60,000 SF
<b>Subtotal Medical Office Buildings</b>	<b>296,160 SF</b>	<b>104,160 SF</b>	<b>104,160 SF</b>	<b>244,160 SF</b>	<b>296,160 SF</b>
<b>TOTAL</b>	<b>667,434 SF 368 Beds</b>	<b>340,071 SF 221 Beds</b>	<b>475,434 SF 368 Beds</b>	<b>615,434 SF 368 Beds</b>	<b>680,242 SF 368 Beds</b>
<b>SITE FLOOR AREA RATIO<sup>2</sup></b>	<b>0.50</b>	<b>0.26</b>	<b>0.36</b>	<b>0.47</b>	<b>0.51</b>

MOB = Medical Office Building  
FAR = Floor Area Ratio

- The total square footage for the Main Hospital includes 5,518 square feet for the Emergency Department; and 5,857 square feet for Radiology (existing - 2,952 square feet and in construction - 2,502 square feet).
- Floor Area Ratio is the size of a building divided by the size of its parcel. In this instance, FAR is based on 30.4 acres, or 1,324,224 square feet.



## **PROJECT OBJECTIVES**

The following project objectives identified in Section 3.5, Project Objectives, in Section 3.0, Project Description, are restated below.

1. Help meet the health care needs of Santa Clarita Valley's population growth, expected to increase to 273,092 by 2010 to 313,290 by the year 2020 and to 441,704<sup>1</sup> by the year 2030, and its increasing aging population.
2. Develop a long-term plan for expansion of the existing hospital campus that would help meet the expected growth in demand for health care services and allow the hospital to apply for State-required approvals.
3. Enhance and expand the Henry Mayo Newhall Memorial Hospital and associated medical buildings to provide patients with personalized care, state-of-the-art medical technology, and a professional staff within a single hospital campus environment.
4. Accommodate expansion of a hospital campus master plan that will bring new buildings and services on line over time as needed while ensuring continued operation of existing operations and enabling further expansion of needed facilities.
5. Maintain the viability of the hospital on a site that will continue to be centrally located within the hospital's 680 square-mile service area as the community continues to grow in the future.
6. Design a well-planned hospital master plan campus that is attractive and promotes quality development consistent with the visual character of Valencia.
7. Maintain Santa Clarita Valley's only existing 24-hour Emergency Department. This includes maintaining the Hospital's Los Angeles County designation as a Level II Trauma Center, improving its capability to treat all patients, no matter how critically ill or injured, and having the capacity to allow for patient admissions on an emergency basis.
8. Re-establish and maintain the helipad for emergency and disaster preparedness.
9. Expand and encourage combined inpatient and outpatient services on the HMNMH medical campus and partnerships between project sponsors where medical practices, specialty medical centers, and other healthcare services are integrated with the operations of the hospital.
10. Establish a campus that will attract and retain physician specialists, and establish Centers of Excellence, which are defined as highly specialized health care services via physician or hospital-authorized providers or hospital collaboration around a disease category.
11. Develop a medical campus designed with patients in mind by linking inpatient services and medical buildings in a single setting, providing safe access and transit opportunities.
12. Minimize visual impacts of the hospital campus through the use of enhanced building design and landscaping, and focusing more intensive development near the center of the site.

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<sup>1</sup> Source: Table 2.2-9, page 2-41, *Santa Clarita Valley General Plan Technical Background Report*, February 2004.



13. Apply land use buffering techniques between the hospital campus and adjacent residential uses through use of building setbacks and enhanced landscaping.
14. Continue to modernize and upgrade the medical campus and other on-site supportive mechanical facilities to ensure the long-term viability of existing and new buildings.
15. Implement an efficient vehicular and pedestrian circulation system that ensures ease of movement throughout the site.
16. Ensure that future development of the medical campus is served by adequate on-site parking facilities to accommodate patients, visitors, and medical staff.

## **6.1 ALTERNATIVE CONSIDERED BUT REJECTED FROM ANALYSIS**

Alternatives to the proposed project that were considered but rejected included 1) relocation of the existing hospital campus to a new location elsewhere in the Santa Clarita Valley, plus construction of the proposed Master Plan; 2) constructing a second hospital campus with medical office buildings at another location within the community; and 3) fewer beds in the Inpatient Building. Relocation of the existing hospital facility and development of the proposed Master Plan and construction of a new hospital and medical office buildings elsewhere in the Santa Clarita Valley were determined not to be feasible because the Henry Mayo Newhall Memorial Hospital (HMNMH). HMNMH's underlying fundamental purpose is to expand its existing hospital campus to provide expanded services to the growing population of the region. Although it is recognized that healthcare service needs exist elsewhere in the community, particularly on the east side of the Santa Clarita Valley, HMNMH has significant investment in its current location and therefore seeks to fully utilize the capacity of its existing site and infrastructure systems, which are centrally located within the Santa Clarita Valley. The site is well suited to serve area residents within the hospital's 680 square-mile service area and is accessible from a major freeway and arterial streets that access various points throughout the community. This would not preclude another hospital from being constructed elsewhere in the Santa Clarita Valley.

The hospital's current location is situated on land that was dedicated for the existing hospital facility more than 30 years ago. As such, the relocation of the hospital to a new location would require the abandonment of 30 years of investment in the existing hospital campus, and would require a substantial new investment in land and infrastructure for a new site. Given the prohibitive costs associated with relocating the hospital or purchasing land and constructing a second hospital campus in another location, these options were not considered feasible alternatives. As a result of previous public hearings on this project, the project has reduced the number of beds from that originally proposed under a second inpatient building. Elimination of these hospital beds has reduced the ability of the hospital campus to help meet the needs of the Santa Clarita Valley as the community continues to grow. Therefore, a reduced number of beds Alternative was not considered as it would further reduce HMNMH's ability to help meet future medical needs based on the projected population increase.



## **6.2 NO PROJECT/NO DEVELOPMENT ALTERNATIVE**

### **6.2.1 DESCRIPTION OF ALTERNATIVE**

The No Project/No Development Alternative assumes the HMNMH Master Plan would not be implemented and the proposed land uses and other improvements would not be constructed. The project site would be unaltered and it is anticipated that the existing hospital and medical office facilities would continue to operate within its current capacity. It should be noted that the hospital currently is licensed for 230 beds. Currently, 121 beds are located in the Main Hospital with 100 beds are in the Nursing Pavilion; therefore, the nine additional beds planned for the Nursing Pavilion could be utilized in the future.

### **6.2.2 IMPACT COMPARISON TO THE PROPOSED PROJECT**

#### **LAND USE**

The No Project/No Development Alternative does not involve any development proposals that would affect land use plans or policies of the City of Santa Clarita or other local and regional agencies. The project site would retain its existing City *General Plan* land use and zoning designations for residential uses, and the existing Conditional Use Permit (CUP) for the facility would continue to allow hospital and medical office uses within the residential zone. This Alternative would result in potential inconsistencies with City's *General Plan* Land Use Element Goals 1 and 4 in that it would hinder the integrity and overall positive community character of the City of Santa Clarita by not developing adequate healthcare facilities and services, including restoration of emergency helipad operations at the existing hospital campus, needed to serve the community. Without the helipads, the hospital could not maintain its Level II Trauma Care status. Although land use impacts associated with the proposed project are less than significant, development of the proposed project would ensure better healthcare services for the community. Therefore, for this reason, land use impacts associated with the No Project/No Development Alternative would increase in comparison to the proposed project. Therefore, the No Project/No Development Alternative would be considered environmentally inferior to the proposed project in this regard.

#### **POPULATION AND EMPLOYMENT**

The No Project/No Development Alternative would not result in development of an additional 200,000 square feet of medical office uses and 125,363 square feet of hospital uses on the project site. No increase in development would result in no increase in employment and population. This Alternative would not provide the 571 additional employment opportunities projected for the project, resulting in fewer employment opportunities for area residents. The Santa Clarita Valley is currently experiencing an employment deficiency in its jobs/housing balance. Therefore, the No Project/No Development Alternative would be considered environmentally inferior to the proposed project in that 571 potential new jobs would not be realized.



### **AESTHETICS, LIGHT, AND GLARE**

The No Project/No Development Alternative would maintain the current views across the project site from off-site vantage points. The No Project/No Development Alternative would not further obstruct views from McBean Parkway across the project site with development of proposed uses over what currently exists today and enhanced landscaping along the perimeter of the project as additional buffering between the hospital campus and the adjacent residential uses would not occur. Under the No Project/No Development Alternative no new light sources would be created. The No Project/No Development Alternative would be considered environmentally superior to the proposed project.

### **TRAFFIC**

Existing morning and evening peak hour operating conditions were evaluated. The results of the analysis indicate that all of the study intersections are operating at an acceptable Level of Service (LOS). It is anticipated that this existing condition would continue with the No Project/No Development Alternative. The projected increase in average daily traffic (ADT) that is expected to occur with buildout of the proposed project (7,571 ADT) would not occur with this Alternative, nor would the significant unavoidable cumulative traffic impacts. Since the significant unavoidable traffic impacts would not occur, the No Project/No Development Alternative would be considered environmentally superior to the proposed project in this regard.

### **PARKING**

Under this No Project/No Development Alternative, the need for additional parking associated with development of new hospital and medical office building facilities would not occur. The existing HMNMH campus provides for a total of 972 marked surface parking spaces, not including unmarked parallel parking along the ring road. According to the project Parking Study, peak hour parking demand exceeds this number. Recently, the hospital began implementing valet and attendant-assisted parking service as a short-term solution to existing parking conditions at the campus until such time as additional parking facilities can be constructed. Since no additional parking would be constructed under the No Project/No Development Alternative, parking conditions would remain unchanged. However, if demand for healthcare services at the existing hospital campus increases due to the projected increase in population, this Alternative would be considered environmentally inferior to the proposed project since no additional parking would be provided to accommodate increased healthcare in the future.

### **AIR QUALITY**

Grading and construction activities associated with the proposed project would not occur with this Alternative. Emissions associated with construction equipment, which have been concluded to exceed SCAQMD thresholds for PM<sub>10</sub> and PM<sub>2.5</sub>, would not occur. Operational emissions associated with the proposed Master Plan are considered less than significant; however, without development of the Master Plan, additional operational emissions would also not occur. Implementation of the No Project/No Development Alternative, as does the proposed project, would be consistent with the regional air quality plan, as it would not increase the intensity of land use at the project site beyond that anticipated in the City's *General Plan*. Therefore, the No



Project/No Development Alternative would be considered environmentally superior to the proposed project since no construction or additional operational air emissions would occur.

### **NOISE**

Under the No Project/No Development Alternative, no additional inpatient or medical office buildings or parking structures would be developed within the project site. Nearby sensitive receptors (single-family homes) would not be subjected to noise associated with project-related construction activities, additional project-generated vehicular activity, or restoration of emergency helipad operations. New stationary and mobile noise sources would not occur and ambient noise levels would not increase. Thus, the No Project/No Development Alternative would be considered environmentally superior to the proposed project in this regard.

### **GEOLOGY, SOILS, AND SEISMICITY**

Implementation of the No Project/No Development Alternative would not expose additional people and structures to potential adverse effects associated with seismic activity, adverse soils or geologic conditions. As this Alternative would not involve any construction activities, potential soil erosion impacts would not occur. The No Project/No Development Alternative would be considered environmentally superior to the proposed project in this regard.

### **HAZARDS AND HAZARDOUS MATERIALS**

The No Project/No Development Alternative would not increase the risks to on-site personnel and patients associated with hazardous materials use, handling, transport, or disposal, and would not include helipads. The current hazardous materials practices and programs implemented to minimize associated risks would not be modified, and the volume of associated materials and wastes would not notably change. The hazardous materials conditions at the hospital under the proposed project would be essentially the same as under current conditions, based on cost trends and ever-improving programs intended to minimize the amount of hazardous materials and wastes produced on-site. However, without construction of the hospital and medical office buildings, this Alternative would result in less hazardous materials risk compared to the proposed project. Furthermore, the helipad has not been in operation since September 2005. The permanent relocation of helipads would not occur under this Alternative, which would keep helipad-related hazards the same as existing conditions. As such, the No Project/No Development Alternative would be considered environmentally superior to the proposed project with regard to hazards and hazardous materials.

### **HYDROLOGY AND WATER QUALITY**

The No Project/No Development Alternative would not result in impacts to water quality associated with demolition, grading, excavation, construction activities, or project operation since development of the proposed additional hospital and medical office uses would not occur. The existing quality and quantity of stormwater and urban runoff would not change. Although hydrology and water quality impacts of the project are considered less than significant on the environment, the No Project/No Development Alternative would be considered environmentally superior to the proposed project since the project site would not be altered from its current condition.





## **PUBLIC SERVICES AND UTILITIES**

An increased demand for public services and utilities would not occur with the No Project/No Development Alternative, as no additional land uses would be developed within the project site. The significant impact from the creation of additional solid waste under the proposed project would not occur with this Alternative. The No Project/No Development Alternative would be considered environmentally superior to the proposed project in this regard.

## **ABILITY TO MEET PROJECT OBJECTIVES**

This Alternative's ability to meet each of the proposed project's objectives is summarized below. The discussion cites the objective, which is shown in italicized text, and if the Alternative meets the intent of the objective.

1. *Help meet the health care needs of Santa Clarita Valley's population growth, expected to increase to 273,092 by 2010 to 313,290 by the year 2020 and to 441,704<sup>2</sup> by the year 2030, and its increasing aging population.*

This Alternative fails to satisfy this project objective because no additional project health care facilities, including restoration of emergency helipad operations, would be constructed on-site. Without construction of the new Inpatient Building or the three new medical office buildings, the ability to help meet the expected growth in demand for health care services in the Santa Clarita Valley and to attract and maintain physician specialists would be reduced and there would be fewer opportunities to provide patients with personalized care, state-of-the-art medical technology and establish Centers of Excellence within the existing hospital campus. Therefore, this Alternative would not meet this project objective.

2. *Develop a long-term plan for expansion of the existing hospital campus that would help meet the expected growth in demand for health care services and allow the hospital to apply for State-required approvals.*

This Alternative fails to satisfy this project objective, as no long-term plan for expansion of the existing hospital campus would be prepared or adopted that would help meet expected growth in demand for health care services.

3. *Enhance and expand the Henry Mayo Newhall Memorial Hospital and associated medical buildings to provide patients with personalized care, state-of-the-art medical technology, and a professional staff within a single hospital campus environment.*

This Alternative fails to satisfy this project objective because no additional health care facilities would be constructed on-site to allow for the expansion of the hospital or medical office buildings or the provision of additional patient services.

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<sup>2</sup> Source: Table 2.2-9, page 2-41, *Santa Clarita Valley General Plan Technical Background Report*, February 2004.



4. *Accommodate expansion of a hospital campus master plan that will bring new buildings and services on line over time as needed while ensuring continued operation of existing operations and enabling further expansion of needed facilities.*

This Alternative fails to satisfy this project objective, as no further expansion of the hospital campus would occur; no new buildings would be constructed and no new or expanded services would be provided.

5. *Maintain the viability of the hospital on a site that will continue to be centrally located within the hospital's 680 square-mile service area as the community continues to grow in the future.*

This Alternative would maintain the operation of the existing Henry Mayo Newhall Memorial Hospital and associated medical office buildings at present levels; however, without construction of the Inpatient Building and the three new medical office buildings, the ability to help meet the expected growth in demand for health care services in the Santa Clarita Valley and to attract and maintain physician specialists would be reduced. Without construction of the additional medical facilities, there would be fewer opportunities to provide patients with personalized care, state-of-the-art medical technology and establish Centers of Excellence. Therefore, this Alternative would not meet this project objective.

6. *Design a well-planned hospital master plan campus that is attractive and promotes quality development consistent with the visual character of Valencia.*

This Alternative fails to satisfy this project objective as no master plan would be prepared or approved.

7. *Maintain Santa Clarita Valley's only existing 24-hour Emergency Department. This includes maintaining the Hospital's Los Angeles County designation as a Level II Trauma Center, improving its capability to treat all patients, no matter how critically ill or injured, and having the capacity to allow for patient admissions on an emergency basis.*

This Alternative would maintain the 24-hour Emergency Department; however, without construction of a helipad, the hospital would lose its designation as a Level II Trauma Center. Without construction of the proposed Master Plan facilities, the hospital would not be able to improve its capability to treat all patients as the community continues to grow. Therefore, this Alternative fails to meet this project objective.

8. *Re-establish and maintain the helipad for emergency and disaster preparedness.*

Helipad operations ceased in September 2005 due to on-site construction activities. This Alternative fails to satisfy this project objective, as the installation of helipads and restoration of operations for emergencies and, such as medical emergencies or disasters within the community would not occur under this Alternative.



9. *Expand and encourage combined inpatient and outpatient services on the HMNMH medical campus and partnerships between project sponsors where medical practices, specialty medical centers, and other healthcare services are integrated with the operations of the hospital.*

This Alternative fails to satisfy this project objective, as there would be no expansion of inpatient and outpatient services or increase in partnerships between project sponsors and hospital operations on the HMNMH medical campus.

10. *Establish a campus that will attract and retain physician specialists, and establish Centers of Excellence, which are defined as highly specialized health care services via physician or hospital-authorized providers or hospital collaboration around a disease category.*

This Alternative fails to satisfy this project objective, as no Centers of Excellence would be established on the HMNMH medical campus which would help attract and retain highly specialized physicians to serve the medical needs of residents in the community.

11. *Develop a medical campus designed with patients in mind by linking inpatient services and medical buildings in a single setting, providing safe access and transit opportunities.*

The existing medical campus currently links inpatient services and medical office buildings in a single setting, as well as provides safe access and transit opportunities; however, off-site healthcare facilities would still be needed to accommodate healthcare needs as a result of growth in the community if the proposed Master Plan were not developed. Therefore, this Alternative would not meet this project objective.

12. *Minimize visual impacts of the hospital campus through the use of enhanced building design and landscaping, and focusing more intensive development near the center of the site.*

No new inpatient building, medical office buildings or parking structures would be constructed under this Alternative. However, enhanced landscaping would not be planted along the perimeter of the project adjacent to existing residential homes. Thus, views of the hospital campus from residential areas to the north, northwest and west would not be minimized by project landscaping. Therefore, this Alternative fails to meet this project objective.

13. *Apply land use buffering techniques between the hospital campus and adjacent residential uses through use of building setbacks and enhanced landscaping.*

No new inpatient or medical office buildings or parking structures would be constructed under this Alternative, thus building setbacks would remain unchanged. Enhanced landscaping would not be planted along the perimeter of the project adjacent to existing residential homes, therefore, additional landscaping as a land use buffering technique between the existing hospital campus and adjacent single-family homes would not be provided. Therefore, this Alternative fails to meet this project objective.



14. *Continue to modernize and upgrade the medical campus and other on-site supportive mechanical facilities to ensure the long-term viability of existing and new buildings.*

This Alternative fails to satisfy this project objective, as the existing on-site buildings would not undergo modernization or upgrades as proposed under this Master Plan. In addition, no new inpatient or medical office buildings would be constructed under this Alternative.

15. *Implement an efficient vehicular and pedestrian circulation system that ensures ease of movement throughout the site.*

The Master Plan site plan has been determined to provide an efficient vehicular and pedestrian circulation system. The existing on-site vehicular and pedestrian circulation system would remain unchanged and therefore would not benefit from proposed improvements. This Alternative fails to meet this project objective to implement a system that would ensure ease of movement throughout the site for pedestrians and motorists.

16. *Ensure that future development of the medical campus is served by adequate on-site parking facilities to accommodate patients, visitors, and medical staff.*

The existing on-site parking facilities would remain unchanged. During afternoon peak times, parking demand at times exceeds parking supply. Under this Alternative, this existing deficiency would not be corrected. Therefore, the Alternative fails to meet this project objective.

As detailed above, under the No Project/No Development Alternative, the proposed Inpatient Building, three medical office buildings and four parking structures would not be developed. Therefore, none of the project objectives identified in [Section 3.5, Project Objectives](#), would be met under the No Project/No Development Alternative.

## **6.3 ALTERNATIVE ONE (INPATIENT BUILDING AND SUPPORTING FACILITIES ONLY)**

### **6.3.1 DESCRIPTION OF ALTERNATIVE**

Under Alternative One (Inpatient Building Only with Support Facilities), the only components of the proposed project that would be constructed would be the Inpatient Building and the Central Plant. None of the medical office buildings would be constructed. There would still be an increase of 18 ICU beds in the existing Main Hospital and nine beds in the Nursing Pavilion. The only supporting infrastructure (e.g., parking and utilities) to be included would be that necessary for Inpatient Building and the additional beds in the existing facilities. The Foundation and Administration Office Building under this Alternative would remain.



The square footage, number of hospital beds, structure height, design characteristics, and site layout of Inpatient Building would be the same as the proposed project. Consequently, this Alternative would result in net increase of 125,363 square feet of hospital uses, yielding 120 new beds. The proposed 10,000 square-foot Central Plant would also be constructed. This Alternative would reduce medical office building uses by 200,000 square feet relative to the proposed project, which is an approximately 59 percent reduction in project development, and would result in a floor-area ratio (FAR) of 0.36 on-site.

Parking associated with this Alternative would also be reduced, due to a reduction in demand from the reduced site density. PS1 would be slightly reduced in size, while PS2, PS3, and PS4 would be eliminated. The need for parking structures would be further reduced by the additional availability for surface parking where the medical office buildings were proposed. PS1 would be relocated more centrally within the site, in closer proximity to the existing and proposed hospital structures. Under this alternative, a helipad would still be located atop the Inpatient Building.

## **6.3.2 IMPACT COMPARISON TO THE PROPOSED PROJECT**

### **LAND USE**

Alternative One would only involve hospital uses (Inpatient Building) and supportive facilities. No medical office buildings would be constructed. This Alternative would require a Conditional Use Permit or Master Plan for expansion of hospital uses within a residential zone, as well as for building height in excess of 35 feet, earthmoving activities and the helipad locations. Given the 59 percent reduction in development, this Alternative would still be consistent with many of the goals and policies of the City's *General Plan* and *Unified Development Code*, similar to the proposed project. However, similar to the No Project Alternative, potential inconsistencies with General Plan Land Use Element Goals 1 and 4 would occur in that this Alternative would not include construction of additional needed medical office space, impacting the provision of needed healthcare services, including Centers of Excellence, and hindering the integrity of the hospital campus as well as the overall positive community character of the City of Santa Clarita by not providing adequate healthcare facilities. This Alternative does not adequately support the principles of sustainable development in that it does not include development of additional medical office buildings that could provide needed healthcare services, including Centers of Excellence, as a part of the established medical campus. This Alternative does not improve the City's jobs/housing balance as well as the proposed project. In terms of land use and planning impacts, Alternative One would be considered neither environmentally superior nor inferior to the proposed project.

### **POPULATION AND EMPLOYMENT**

Alternative One would result in the addition of a total of 125,363 square feet of hospital use. Development of this Alternative would result in an increase of 81 employees.<sup>3</sup> The City is able to support an increase in population and employment opportunities consistent with projections under the adopted General Plan. This Alternative would reduce the proposed project's beneficial impact relative to employment. Thus, Alternative One would be considered environmentally inferior to the proposed project in this regard.

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<sup>3</sup> Assumes one employee per 1,552 square feet of hospital space.



### **AESTHETICS, LIGHT, AND GLARE**

Alternative One would result in decreased impacts in regards to aesthetic and visual resources relative to the proposed project, since the only structures that would be constructed would be the Inpatient Building, the Central Plant, and PS1. This Alternative would allow for greater retention of views of and across the project site. The short-term impacts associated with construction activities would be reduced under this Alternative, as it would result in less intensity of construction activities and associated equipment, and possibly a reduced construction schedule. Architectural design, landscaping, and other visual relief features of the proposed project would still be provided, as required by City standards. While the proposed project does not result in significant unavoidable aesthetics, light, or glare impacts, this Alternative would reduce the change in visual character on the site. Therefore, Alternative One would be considered environmentally superior to the proposed project in this regard.

### **TRAFFIC**

Development of Alternative One would result in 200,000 fewer square feet of medical office building uses relative to the proposed project. As such, Alternative One would result in approximately 5,050 fewer vehicle trips than the proposed project, and would eliminate the significant unavoidable cumulative impacts. However, mitigation measures would still be required to reduce impacts to the extent feasible, as with the proposed project. Impacts to the public transit system would also be reduced under this Alternative, due to the lower intensity of development on-site. Thus, Alternative One would be considered environmentally superior to the proposed project in this regard.

### **PARKING**

With the elimination of medical office building uses under this Alternative, the demand for parking would decrease. This Alternative would require 1,254 parking spaces to accommodate both existing on-site uses and the Inpatient Building. For purposes of analysis under this Alternative, it is assumed that PS2, PS3, and PS4 would no longer be necessary and surface parking would be provided in its place. PS1 would likely be reduced in size due to the lack of MOB1. Under this Alternative, the helipad would still be located atop the Inpatient Building.

Alternative One would be considered neither environmentally superior nor inferior to the proposed project since on-site parking would be required to accommodate both existing and proposed uses in accordance with the City's *Unified Development Code*.

### **AIR QUALITY**

Short-term construction impacts would be reduced under this Alternative with the elimination of the medical office buildings, PS2, PS3, and PS4. However, PM<sub>10</sub> and PM<sub>2.5</sub> emissions would still exceed SCAQMD daily emissions thresholds during construction activities, resulting in significant short-term air quality impacts. Operational mobile-source (vehicular) emissions would be substantially reduced under this Alternative relative to the proposed project, and impacts would be less than significant. As with the proposed project, this Alternative would result in less than significant impacts in regards to CO "hot spot" impacts. However, this Alternative, similar to the proposed



project, would result in significant construction-related cumulative air quality impacts. Although significant and unavoidable air quality impacts would occur under this Alternative, Alternative One would be considered environmentally superior to the proposed project in this regard, due to the reduced construction and operational emissions.

### **NOISE**

Development of this Alternative would result in a reduction of the length of the construction period due to the elimination of the medical office buildings, PS2, PS3, and PS4. Mitigation measures would still be required to reduce construction noise impacts, however, these impacts would be significant and unavoidable. Similarly, although this Alternative would result in a reduction of operational mobile-source noise levels compared to the proposed project, mitigation measures would be required to reduce these impacts to less than significant. Helipad-related noise impacts would be less than significant and similar to those of the proposed project. As with the proposed project, stationary noise impacts would be considered less than significant. Construction-related noise impacts would be significant; however, overall noise impacts would be reduced; therefore, Alternative One would be considered environmentally superior to the proposed project.

### **GEOLOGY, SOILS, AND SEISMICITY**

Implementation of Alternative One would not expose people and/or structures to subsurface fault rupture as no known active or potentially active faults exists within, or project onto, the project site and would expose fewer people and structures to seismic ground shaking. Development of this Alternative would also reduce risks on-site with respect to ground failure, expansive soils, and corrosive soils but would still require mitigation measures to reduce impacts to less than significant. All other geology and soils impacts would be less than significant under Alternative One. Thus, Alternative One would be considered environmentally superior to the proposed project in this regard.

### **HAZARDS AND HAZARDOUS MATERIALS**

Alternative One would reduce risks to personnel and patients associated with hazardous materials use, handling, transport, or disposal without construction of the three medical office buildings. The current hazardous materials practices and programs implemented to minimize associated risks would not be modified under this Alternative, and the volume of associated materials and wastes would be reduced due to the reduction in proposed development. The hazardous materials conditions at the hospital under the Alternative would be essentially the same as the proposed project. As such, this Alternative would not result in fewer risks associated with hazardous materials compared to the proposed project. Furthermore, the construction of a helipad would also occur under this Alternative, which would result in comparable helipad-related hazards as the proposed project. As such, Alternative One would be considered neither environmentally superior nor inferior to the proposed project with regard to hazards and hazardous materials.

### **HYDROLOGY AND WATER QUALITY**

Despite the reduced development under this Alternative, impacts regarding drainage, hydrology, floodplain, and water quality would be only slightly reduced, if at all, compared to the proposed



project. As with the proposed project, hydrology and drainage impacts would be less than significant, but mitigation measures would still be required to reduce water quality impacts to a less than significant level. As such, given the similarity in impervious surface area and required water quality control measures, Alternative One would be considered neither environmentally superior nor inferior to the proposed project.

## **PUBLIC SERVICES AND UTILITIES**

This Alternative would result in an incremental reduction in demand for water, fire protection and sheriff services, school facilities, electricity and natural gas, and would reduce the amount of solid waste requiring disposal at local and regional landfills. Impacts related to electricity and natural gas would be reduced under Alternative One, and would be less than significant, similar to the proposed project. As is the case with the proposed project, impacts related to water supply, fire protection and sheriff services, and schools would be less than significant with implementation of applicable mitigation measures, including payment of fees to affected agencies, although the impacts would be reduced given the overall reduction in development. Impacts to solid waste facilities under this Alternative would remain significant and unavoidable with implementation of mitigation measures, like the proposed project, although the reduction in development intensity would result in an incremental reduction in solid waste generation. Given that this Alternative would create fewer demands for public services and utilities, it would be considered environmentally superior to the proposed project.

### **6.3.3 ABILITY TO MEET PROJECT OBJECTIVES**

This Alternative's ability to meet each of the proposed project's objectives is summarized below. The discussion cites the objective, which is shown in italicized text, and if the Alternative meets the intent of the objective.

1. *Help meet the health care needs of Santa Clarita Valley's population growth, expected to increase to 273,092 by 2010 to 313,290 by the year 2020 and to 441,704<sup>4</sup> by the year 2030, and its increasing aging population..*

This Alternative would result in the construction of the Inpatient Building, but no additional medical office buildings. Thus, this Alternative does not fully meet this project objective as compared to the proposed project.

2. *Develop a long-term plan for expansion of the existing hospital campus that would help meet the expected growth in demand for health care services and allow the hospital to apply for State-required approvals.*

This Alternative would permit the construction of the Inpatient Building, but would not develop a long-term plan for expansion of the existing hospital campus needed to help meet the region's expected growth. Thus, this Alternative does not fully meet this project objective as compared to the proposed project.

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<sup>4</sup> Source: Table 2.2-9, page 2-41, *Santa Clarita Valley General Plan Technical Background Report*, February 2004.





- 3. Enhance and expand the Henry Mayo Newhall Memorial Hospital and associated medical buildings to provide patients with personalized care, state-of-the-art medical technology, and a professional staff within a single hospital campus environment.*

This Alternative would permit the construction of the Inpatient Building, but fails to construct on-site medical office buildings necessary for the expansion of patient services and medical technology. Thus, this Alternative does not fully meet this project objective as compared to the proposed project.

- 4. Accommodate expansion of a hospital campus master plan that will bring new buildings and services on line over time as needed while ensuring continued operation of existing operations and enabling further expansion of needed facilities.*

Limited expansion of the hospital campus would occur under this Alternative with only the construction of the Inpatient Building. However, no additional medical office buildings would be constructed, and thus limits the ability to bring new services to patients or expand needed facilities. This Alternative does not fully meet this project objective as compared to the proposed project.

- 5. Maintain the viability of the hospital on a site that will continue to be centrally located within the hospital's 680-square-mile service area as the community continues to grow in the future.*

This Alternative would maintain the existing Henry Mayo Newhall Memorial Hospital and associated medical office buildings in its present location, as well as allow the construction of the Inpatient Building. However, without construction of the medical office buildings, the ability to help meet the expected growth in demand for health care services in the Santa Clarita Valley and to attract and maintain physician specialists would be reduced and there would be fewer opportunities to provide patients with personalized care, state-of-the-art medical technology and establish Centers of Excellence. Therefore, this Alternative would not meet this project objective.

- 6. Design a well-planned hospital master plan campus that is attractive and promotes quality development consistent with the visual character of Valencia.*

This Alternative would permit the construction of the Inpatient Building, but would not develop a long-term master plan for the hospital campus. Thus, this Alternative does not meet this project objective.

- 7. Maintain Santa Clarita Valley's only existing 24-hour Emergency Department. This includes maintaining the Hospital's Los Angeles County designation as a Level II Trauma Center, improving its capability to treat all patients, no matter how critically ill or injured, and having the capacity to allow for patient admissions on an emergency basis.*

This Alternative would maintain the 24-hour Emergency Department and the designation as a Level II Trauma Center; however, without construction of the medical office buildings, the ability to help meet the expected growth in demand for health care services in the Santa Clarita Valley and to attract and maintain physician specialists would be



reduced and there would be fewer opportunities to provide patients with personalized care, state-of-the-art medical technology and establish Centers of Excellence. Therefore, this Alternative would not fully meet this project objective.

8. *Re-establish and maintain the helipad for emergency and disaster preparedness.*

A helipad would be constructed on the rooftop of the Inpatient Building. Thus, this Alternative meets this project objective.

9. *Expand and encourage combined inpatient and outpatient services on the HMNMH medical campus and partnerships between project sponsors where medical practices, specialty medical centers, and other healthcare services are integrated with the operations of the hospital.*

This Alternative would allow the construction of the Inpatient Building, but would not allow the construction of medical office buildings that are necessary for the provision of specialty medical centers or other healthcare services. Thus, this Alternative does not meet this project objective.

10. *Establish a campus that will attract and retain physician specialists, and establish Centers of Excellence, which are defined as highly specialized health care services via physician or hospital-authorized providers or hospital collaboration around a disease category.*

This Alternative fails to satisfy this project objective, as no additional medical buildings would be constructed to attract and retain physician specialists and establish Centers of Excellence within the HMNMH medical campus.

11. *Develop a medical campus designed with patients in mind by linking inpatient services and medical buildings in a single setting, providing safe access and transit opportunities.*

This Alternative would not link inpatient services and medical office buildings in a single setting since off-site healthcare facilities would still be needed to accommodate healthcare needs of the region. Therefore, this Alternative fails to meet this project objective.

12. *Minimize visual impacts of the hospital campus through the use of enhanced building design and landscaping, and focusing more intensive development near the center of the site.*

The Inpatient Building would be constructed north of the existing Hospital building in the interior portion of the project site, along with the construction of PS1, meeting the City's Architectural Design Guidelines and *Unified Development Code* requirements for landscaping. This Alternative meets this project objective.

13. *Apply land use buffering techniques between the hospital campus and adjacent residential uses through use of building setbacks and enhanced landscaping.*

The Inpatient Building and PS1 would be set back up to 240 feet from residential uses located to the northwest and north, while PS1 would be set back more than 100 feet from residential uses located to the northeast, east, and southeast. Landscaping would be



installed in compliance with *Unified Development Code* requirements. This Alternative meets this project objective.

14. *Continue to modernize and upgrade the medical campus and other on-site supportive mechanical facilities to ensure the long-term viability of existing and new buildings.*

This Alternative allows for the construction of the Inpatient Building, but no medical office buildings, which would provide additional on-site supportive medical facilities. Thus, this Alternative fails to fully satisfy this project objective as compared to the proposed project.

15. *Implement an efficient vehicular and pedestrian circulation system that ensures ease of movement throughout the site.*

The existing on-site vehicular and pedestrian circulation system would be modified to accommodate the Inpatient Building and PS1, subject to review and approval of the City. Thus, this Alternative meets this project objective.

16. *Ensure that future development of the medical campus is served by adequate on-site parking facilities to accommodate patients, visitors, and medical staff.*

This Alternative would provide sufficient on-site parking to comply with the requirements of the Unified Development Code, subject to review and approval of the City. Thus, this Alternative meets this objective.

Alternative One only provides for the construction of the Inpatient Building and supporting parking and ancillary facilities, but does not allow for the construction of medical office buildings that would provide additional opportunities to expand both medical services and facilities on the campus and link inpatient and outpatient services. As detailed above, Alternative One meets objectives 8, 12, 13, 15, and 16; partially meets objectives 1, 2, 4, 7, and 14, and does not meet objectives 3, 5, 6, 9, 10, and 11. Alternative One partially meets the objectives of the proposed project by increasing hospital capacity to meet the increasing needs of its 680 square-mile service area. However, several of the primary objectives of the project include the development of a hospital campus master plan that provides closely linked inpatient and outpatient care. This would only be accomplished through the provision of both new hospital and medical office building facilities.

## **6.4 ALTERNATIVE TWO (MOBs 1 & 2, INPATIENT BUILDING AND SUPPORTING FACILITIES)**

### **6.4.1 DESCRIPTION OF ALTERNATIVE**

Alternative Two (MOBs 1 and 2 and Inpatient Building) would include only MOBs 1 and 2, the Inpatient Building, and the Central Plant and supporting infrastructure (i.e., parking and utilities).



MOB3 would not be implemented. The Foundation and Administration Office Building would remain.

The square footage, number of hospital beds, structure height, design characteristics, and site layout of MOBs 1 and 2, Inpatient Building, and Central Plant would be the same as the proposed project. Consequently, this Alternative would result in a net increase of 125,363 square feet of hospital uses (yielding 120 new beds), 140,000 square feet of MOB uses, and a 10,000 square-foot Central Plant. This Alternative would reduce medical office building uses by 60,000 square feet relative to the proposed project, which is a 15 percent reduction in project development, and would result in a FAR of 0.47 on-site.

Parking associated with this Alternative would also be reduced, due to a reduction in demand from the reduced site density. Under this Alternative, PS1, PS2, and PS4 would be constructed, while PS3 would be eliminated from the Master Plan. The need for parking structures would be further reduced by the additional availability for surface parking where MOB3 was proposed. Under this Alternative, helipads would still be located atop both PS1 and the Inpatient Building.

## 6.4.2 IMPACT COMPARISON TO THE PROPOSED PROJECT

### LAND USE

Under Alternative Two, the project would still require approval of a Conditional Use Permit or Master Plan for hospital and medical office uses within a residential zone, as well as for building heights in excess of 35 feet. This Alternative would result in the same type of land use at the site as the proposed project, except that MOB3 and PS3 (located along the western boundary of the site) would not be developed.

Given the similar site design and type of development on-site, it is anticipated that this Alternative would result in similar land use impacts compared to the proposed project and would be consistent with most goals and policies of the City's *General Plan* and *Unified Development Code*; however, the reduction in medical office space, similar to the No Project Alternative and Alternative 1, would negatively impact the provision of healthcare services needed to serve the community in the future, including the ability to establish Centers of Excellence, thereby hindering the integrity of the hospital campus as well as the overall positive community character of the City of Santa Clarita by not fully utilizing the existing hospital campus as compared to the proposed project.

While this Alternative does encourage compact development that is regional in scope and supportive to the walkability of the hospital campus for patrons, employees and public transportation opportunities, it does not sufficiently support other principles of sustainable development as effectively as the proposed project in that additional medical office space would still be needed elsewhere in the community to accommodate residents' healthcare needs. The additional needed facilities would, therefore, be located at some location other than the HMNMH campus, which would result in increased vehicle trips and air quality impacts within the Santa Clarita Valley. This Alternative does not improve the City's jobs/housing balance as well as the proposed project in that it would provide approximately 135 fewer new jobs.



Because land use impacts on the environment would be similar under this Alternative, Alternative Two would be considered neither environmentally superior nor inferior to the proposed project in this regard.

### **POPULATION AND EMPLOYMENT**

Alternative Two would result in the development of an additional 125,363 square feet of hospital uses (yielding 120 new beds), 140,000 square feet of medical office building uses, and a 10,000 square-foot Central Plant on the project site. Development of these hospital and medical office building uses would result in the need for 81 hospital employees and 353 MOB staff, for a total of 434 employees.<sup>5</sup> This Alternative would have decreased employment impacts compared to the proposed project as fewer medical office-related employment opportunities would be provided. The City and region are able to support an increase in population and employment opportunities, as this level of growth would be accommodated under the City's *General Plan*. Therefore, Alternative Two would be considered neither environmentally superior nor inferior to the proposed project in this regard.

### **AESTHETICS, LIGHT, AND GLARE**

Under Alternative Two, MOB3 and PS3 (located along the western boundary of the site) would not be constructed. The square footage, structure height, design characteristics, and site layout of MOB1 and 2, Inpatient Building, the Central Plant, and PS1, PS2, and PS4 would be the same as the proposed project.

The short-term impacts associated with construction activities would be reduced relative to the proposed project under this Alternative, as it would result in less overall intensity and duration of development. Although this Alternative would eliminate structures along the western site boundary, aesthetic impacts would only be slightly reduced since other structures are proposed nearby. Architectural design, landscaping, and other visual relief features of the project would still be provided, as required by City standards. While the proposed project does not result in significant unavoidable aesthetics, light, or glare impacts, this Alternative would reduce the change in visual character on the site. Therefore, Alternative Two would be considered environmentally superior to the proposed project in this regard.

### **TRAFFIC**

Development of an additional 125,363 square feet of hospital uses and 140,000 square feet of medical office building uses under this Alternative would result in a total of approximately 1,510 fewer trips than the proposed project, and would eliminate the significant unavoidable cumulative impacts. This represents an approximately 20 percent reduction in overall trip generation from the project's projected 7,571 trips. However, mitigation measures would still be required to reduce impacts to less than significant, as with the proposed project. Impacts to the public transit system would also be reduced under this Alternative, due to the lower intensity of development on-site.

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<sup>5</sup> Assumes one employee per 1,552 square feet of hospital space. MOB employee generation is calculated assuming 20 percent of total MOB uses are dedicated to diagnostic and treatment support services, leaving 112,000 square feet for provider offices. At 1,796 square feet per provider office, 62 offices would be constructed. 4.7 staff is assumed per provider office, in addition to one practitioner per office.



Thus, Alternative Two would be considered environmentally superior to the proposed project due to a decrease in project-generated traffic.

### **PARKING**

With the elimination of MOB3 under this Alternative, the demand for parking would decrease. However, this Alternative would require 1,932 parking spaces to accommodate existing on-site uses and the Inpatient Building, MOB1, and MOB2. For purposes of analysis under this Alternative, it is assumed that PS3 would no longer be necessary and that surface parking would be provided in its place. Alternative Two would be considered neither environmentally superior nor inferior to the proposed project since on-site parking would be required to accommodate both existing and proposed uses in accordance with the City's *Unified Development Code*.

### **AIR QUALITY**

Short-term construction impacts would be reduced under this Alternative with the elimination of MOB3 and PS3. However, PM<sub>10</sub> and PM<sub>2.5</sub> emissions would still exceed SCAQMD daily emissions thresholds during construction activities, resulting in significant short-term construction-related air quality impacts. Operational mobile-source (vehicular) emissions would be reduced under this Alternative relative to the proposed project, and impacts would be less than significant. As with the proposed project, this Alternative would result in less than significant impacts in regards to CO "hot spot" impacts. SCAQMD recommends that a project's cumulative impacts be assessed using the same significance criteria as those for project-specific impacts, therefore, this Alternative, similar to the proposed project, would result in significant cumulative construction-related air quality impacts. Although significant and unavoidable air quality impacts would occur under this Alternative, Alternative Two would be considered environmentally superior to the proposed project in this regard, due to the reduced construction and operational emissions.

### **NOISE**

Development of this Alternative would result in a reduced level of development intensity and length of construction period compared to the proposed project. Mitigation measures would still be required to reduce construction noise impacts, however, construction-related noise impacts would be significant and unavoidable. This Alternative would result in a reduced level of traffic-related mobile-source noise levels compared to the proposed project, though mitigation measures would still be required that would reduce mobile-source noise impacts to less than significant. Helipad-related noise would be less than significant, as is the case with the proposed project. Stationary-source noise impacts would also be less than significant under this Alternative. Overall, this Alternative would result in reduced noise impacts when compared to the proposed project, and therefore Alternative Two would be considered environmentally superior to the proposed project in this regard.

### **GEOLOGY, SOILS, AND SEISMICITY**

Implementation of Alternative Two would not expose people and/or structures to subsurface fault rupture as no known active or potentially active faults exists within, or project onto, the project site and would expose fewer people to seismic ground shaking. Development of this Alternative would



also present incrementally lower risks to on-site employees and patients (given the reduced development and associated numbers of employees and patients on-site at any given time) with respect to ground failure, expansive soils, and corrosive soils, but would still require mitigation measures to reduce impacts to less than significant. All other geology and soils impacts would be less than significant under Alternative Two. Thus, Alternative Two would be considered environmentally superior to the proposed project in this regard.

### **HAZARDS AND HAZARDOUS MATERIALS**

Alternative Two would reduce risks to personnel and patients associated with hazardous materials use, handling, transport, or disposal without construction of a third medical office building. The current hazardous materials practices and programs implemented to minimize associated risks would not be modified under this Alternative, similar to the proposed project, and the volume of associated materials and wastes would be reduced, based on the type and intensity of proposed development. The hazardous materials conditions at the hospital under the Alternative would be essentially the same as the project. As such, this Alternative would result in fewer risks associated with hazardous materials compared to the proposed project. Furthermore, helipad improvements would still occur under this Alternative, which would result in similar helipad-related hazards than the proposed project. As such, Alternative Two would be considered neither environmentally superior nor inferior to the proposed project with regard to hazards and hazardous materials.

### **HYDROLOGY AND WATER QUALITY**

Despite the exclusion of MOB3 and PS3, this Alternative would not result in substantial reduction in impervious surface area on-site. As such, impacts regarding drainage, hydrology, floodplains, and water quality are anticipated to be comparable to the proposed project. Therefore, hydrology and drainage impacts would remain less than significant, as under the proposed project, while mitigation measures would still be required to reduce water quality impacts to a less than significant level, in compliance with NPDES permit requirements. Thus, Alternative Two would be considered neither environmentally superior nor inferior to the proposed project in this regard.

### **PUBLIC SERVICES AND UTILITIES**

Relative to the proposed project, this Alternative would result in an incrementally reduced demand for water, fire protection and sheriff services, school facilities, electricity and natural gas, and the amount of solid waste requiring disposal at local and regional landfills. Impacts related to electricity and natural gas would also be reduced compared to those for the proposed project, and would also be less than significant. As is the case with the proposed project, impacts related to water supply, fire protection and sheriff services, and schools would be less than significant with implementation of applicable mitigation measures, including payment of fees to affected agencies. Impacts to solid waste facilities under this Alternative would be significant and unavoidable with implementation of mitigation measures, like the proposed project. However, given that this Alternative would create lower demands for public services and utilities, it would be considered environmentally superior to the proposed project in this regard.



## **ABILITY TO MEET PROJECT OBJECTIVES**

This Alternative's ability to meet each of the proposed project's objectives is summarized below. The discussion cites the objective, which is shown in italicized text, and if the Alternative meets the intent of the objective.

1. *Help meet the health care needs of Santa Clarita Valley's population growth, expected to increase to 273,092 by 2010 to 313,290 by the year 2020 and to 441,704<sup>6</sup> by the year 2030, and its increasing aging population.*

This Alternative would result in the construction of the Inpatient Building, MOB1, and MOB2. Without MOB3, a reduction in the type and/or quantity of healthcare services to serve the community would be reduced; therefore, this Alternative would not fully meet the projected on-site medical office service demand as compared to the proposed project, based on projected regional growth trends.

2. *Develop a long-term plan for expansion of the existing hospital campus that would help meet the expected growth in demand for health care services and allow the hospital to apply for State-required approvals.*

This Alternative includes a Master Plan that plans for the long-term expansion of the existing hospital campus that would help meet the forecasted demand for health care services; however, without MOB3, a reduction in the type and/or quantity of healthcare services to serve the community would be reduced; therefore, this Alternative would not fully meet the projected on-site medical office service demands, based on projected regional growth trends as fully as the proposed project.

3. *Enhance and expand the Henry Mayo Newhall Memorial Hospital and associated medical buildings to provide patients with personalized care, state-of-the-art medical technology, and a professional staff within a single hospital campus environment.*

Under this Alternative, the hospital and medical office buildings would be expanded which would help meet this objective; however, without construction of MOB3, a reduction in the type and/or quantity of healthcare services to serve the community would be reduced as there would be fewer opportunities to provide patients with personalized care and state-of-the-art medical technology. Therefore, this Alternative would not fully meet this objective as compared to the proposed project.

4. *Accommodate expansion of a hospital campus master plan that will bring new buildings and services on line over time as needed while ensuring continued operation of existing operations and enabling further expansion of needed facilities.*

This Alternative includes a Master Plan that accommodates the expansion of buildings and services on-site over time. This Alternative helps meet this project objective; however, without construction of MOB3, healthcare services to help meet the needs of the community would be reduced; therefore, this Alternative would not fully meet the

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<sup>6</sup> Source: Table 2.2-9, page 2-41, *Santa Clarita Valley General Plan Technical Background Report*, February 2004.





projected on-site medical office building-related demands as fully as the proposed project, based on projected regional growth trends.

5. *Maintain the viability of the hospital on a site that will continue to be centrally located within the hospital's 680 square-mile service area as the community continues to grow in the future.*

This Alternative includes a Master Plan that maintains the Henry Mayo Newhall Memorial Hospital and associated medical office buildings in its present location, as well as allows for the construction of a new inpatient hospital and two medical office buildings. Without construction of MOB 3, the ability to help meet the expected growth in demand for health care services in the Santa Clarita Valley and to attract and maintain physician specialists would be reduced and there would be fewer opportunities to provide patients with personalized care, state-of-the-art medical technology and establish Centers of Excellence. Therefore, this Alternative would not fully meet this project objective as compared to the proposed project.

6. *Design a well-planned hospital master plan campus that is attractive and promotes quality development consistent with the visual character of Valencia.*

The Master Plan would ensure that the campus is well-planned, and that future development is attractive and promotes quality development consistent with the visual character of the community. This Alternative meets this project objective.

7. *Maintain Santa Clarita Valley's only existing 24-hour Emergency Department. This includes maintaining the Hospital's Los Angeles County designation as a Level II Trauma Center, improving its capability to treat all patients, no matter how critically ill or injured, and having the capacity to allow for patient admissions on an emergency basis.*

This Alternative would maintain the 24-hour Emergency Department and the designation as a Level II Trauma Center. Thus, this Alternative meets this project objective.

8. *Re-establish and maintain the helipad for emergency and disaster preparedness.*

Helipads would be constructed on the rooftop of the Inpatient Building and PS1, as would the proposed project. Thus, this Alternative meets this project objective.

9. *Expand and encourage combined inpatient and outpatient services on the HMNMH medical campus and partnerships between project sponsors where medical practices, specialty medical centers, and other healthcare services are integrated with the operations of the hospital.*

This Alternative allows the construction of the Inpatient Building, MOB1 and MOB2, which would allow expansion of inpatient and outpatient services on the hospital campus, along with the development of specialty medical centers. Thus, this Alternative meets this project objective.



10. *Establish a campus that will attract and retain physician specialists, and establish Centers of Excellence, which are defined as highly specialized health care services via physician or hospital-authorized providers or hospital collaboration around a disease category.*

This Alternative allows the construction of the Inpatient Building, MOB1, and MOB2, which would attract physician specialists and allow for the establishment of Centers of Excellence; however, without construction of MOB3, this Alternative would not fully meet this project objective as compared to the proposed project.

11. *Develop a medical campus designed with patients in mind by linking inpatient services and medical buildings in a single setting, providing safe access and transit opportunities.*

The medical campus would link inpatient services and medical office buildings in a single setting, as well as provide access to transit opportunities. However, without construction of MOB3, an increase in off-site healthcare facilities would be needed elsewhere in the community to help accommodate healthcare needs as a result of growth in the community; the ability to attract and maintain physician specialists would be reduced; and there would be fewer opportunities to provide patients with personalized care, state-of-the-art medical technology and establish Centers of Excellence. Therefore, this Alternative would not fully meet this project objective as compared to the proposed project.

12. *Minimize visual impacts of the hospital campus through the use of enhanced building design and landscaping, and focusing more intensive development near the center of the site.*

The Master Plan calls for the use of enhanced building and architectural design and landscaping. Under the Master Plan, the five-story Inpatient Building is located near the center of the site, backing onto a long, high slope. Medical office buildings consisting of up to no more than three-stories in height are located along the western boundary and along McBean Parkway. PS1, the highest parking structure at 47 feet in height, is located along McBean Parkway adjacent to MOB1. This Alternative meets this project objective.

13. *Apply land use buffering techniques between the hospital campus and adjacent residential uses through use of building setbacks and enhanced landscaping.*

The Inpatient Building would be set back more than 240 feet from residential uses located to the northwest and north; MOB1 and PS1 would be set back more than 150 feet from residential uses located to the northeast, east, and southeast; and MOB2 and PS2 would be set back more than 75 feet from residential uses to the west. Enhanced landscaping would be installed in compliance with the project Conditions of Approval, which require additional landscape buffering along the perimeter of the project adjacent to existing residential uses. This Alternative meets this project objective.



14. *Continue to modernize and upgrade the medical campus and other on-site supportive mechanical facilities to ensure the long-term viability of existing and new buildings.*

This Alternative allows for the construction of a modern, upgraded medical campus consisting of the Inpatient Building, MOB1, and MOB2 and would provide additional on-site supportive mechanical facilities. Thus, this Alternative meets this project objective.

15. *Implement an efficient vehicular and pedestrian circulation system that ensures ease of movement throughout the site.*

The existing on-site vehicular and pedestrian circulation system would be modified to accommodate the Inpatient Building, MOB1, MOB2, PS1, PS2, and PS4. It is anticipated that a modified site plan could be developed that would link pedestrian and vehicular accessibility that is safe and efficient. Therefore, this Alternative would meet this project objective.

16. *Ensure that future development of the medical campus is served by adequate on-site parking facilities to accommodate patients, visitors, and medical staff.*

Without the construction of MOB3, 290 fewer parking spaces would be needed to accommodate development. Without construction of PS3, 278 fewer parking spaces would be constructed. It is anticipated that a site plan could be developed that could accommodate sufficient on-site parking to comply with the requirements of the *Unified Development Code*, subject to review and approval by the City. It is therefore anticipated that this Alternative would meet this project objective.

Alternative Two provides for the construction of the Inpatient Building, MOB1, MOB2 and supporting facilities, which would expand both medical services and facilities on the existing HMNMH campus that would link inpatient and outpatient services. As detailed above, Alternative Two meets project objectives 6, 7, 8, 9, 12, 13, 14, 15, and 16 and partially meets objectives 1, 2, 3, 4, 5, 10, and 11. Alternative Two would implement the overall objective of the proposed project, which is to provide adequate hospital and medical office facilities to meet projected future demands within the Santa Clarita Valley and the remainder of the hospital's 680-square-mile service area. However, under this Alternative, medical office building uses would be developed with less available floor area for physician offices and other medical services than under the proposed project. As such, while the development under Alternative Two would contribute to projected long-term hospital-related demand for the Santa Clarita Valley based on projected regional growth trends, it would not fully meet projected medical office building related service demand as compared to the proposed project.



## 6.5 ALTERNATIVE THREE (MOBs 1-3, REDUCED HEIGHT INPATIENT BUILDING AND SUPPORTING FACILITIES)

### 6.4.1 DESCRIPTION OF ALTERNATIVE

Alternative Three (MOBs 1-3 and Reduced Height Inpatient Building) would include the same facilities and site layout as the proposed project. One change to the project description would be a reduction in the overall height of the Inpatient Building from 85 feet to 70 feet; however under this Alternative the bed count of 120 new beds would be maintained. As with the proposed project, the Foundation and Administration Office Building would be demolished under this Alternative.

To account for the decreased height of the Inpatient Building, the footprint of the structure would be increased, and square footage would increase from 125,363 to 138,171 (an increase of 12,808 square feet) to ensure compliance with the California Office of Statewide Health Planning and Development (OSPHD) requirements for design and construction. This would result in an approximately four percent increase in project development, and an FAR of 0.51. Building setbacks would remain unchanged.

However, it is expected that parking facilities under the proposed project would accommodate the additional demand. Under this Alternative, helipads would still be located atop both PS1 and the Inpatient Building.

### 6.4.2 IMPACT COMPARISON TO THE PROPOSED PROJECT

#### LAND USE

Under Alternative Three, the project would still require a Conditional Use Permit or Master Plan for expansion of hospital and medical office uses within a residential zone, as well as for building heights in excess of 35 feet, earth movement activities and the helipads. This Alternative would result in the same type of development at the site as the proposed project. Configuration of facilities on-site would not change with the exception of the Inpatient Building.

Given the similar site design and type of development on-site, it is anticipated that this Alternative would be consistent with applicable goals and policies of the City's *General Plan* and *Unified Development Code*. Implementation of this Alternative would result in similar land use and planning impacts compared to the proposed project, since the Conditional Use Permit or Master Plan would still be required for hospital and medical office uses and building heights.

This Alternative supports the principles of sustainable development in that it promotes compact infill development in proximity to the people served, as well as encourages compact development that is regional in scope and supported by available public transportation. The Alternative maximizes the use of the existing hospital campus and utilizes existing infrastructure systems, locates employment opportunities and community services within easy walking distance of a range of housing types, thereby having beneficial employment, air quality and regional traffic impacts.



Because land use impacts would be similar under this Alternative, Alternative Three would be considered neither environmentally superior nor inferior to the proposed project in this regard.

### **POPULATION AND EMPLOYMENT**

Alternative Three would result in the development of 138,171 square feet of hospital uses (yielding 120 new beds), 200,000 square feet of new medical office building uses, 27 new beds in existing facilities, and a 10,000 square-foot Central Plant on the project site, as does the proposed project. Development of these hospital and medical office building uses would result in the same number of population and job increase as the proposed project, which has been projected at 571 additional jobs. The City and region are able to support this level of employment increase and population increase associated with the project, as this level of new growth would be accommodated within the growth projections under the adopted City *General Plan*. Therefore, Alternative Three would be considered neither environmentally superior nor inferior to the proposed project in this regard.

### **AESTHETICS, LIGHT, AND GLARE**

Under Alternative Three, site configuration of proposed facilities would be similar to that of the proposed project, with the exception of the Inpatient Building, which would be reduced in height by approximately 15 feet. To allow for the reduction in height, the structure would require a larger footprint and an increase to 138,171 square feet (12,808 more square feet than the proposed project). The building setback for the Inpatient Building under this Alternative would be reduced to 197 feet, approximately the same as the proposed project.

The short-term impacts associated with construction activities would be similar to the proposed project under this Alternative, since the site configuration would largely remain the same. The increase in massing and scale due to the structure's larger footprint and square footage would be offset by the 15-foot reduction in height of the Inpatient Building. Architectural design, landscaping, and other visual relief features of the project would remain unchanged, as required under the project conditions of approval and by City standards.

While the proposed project does not result in significant unavoidable aesthetics, light, or glare impacts, this Alternative would slightly reduce the change in visual character on the site when compared to the proposed project with the reduction in building height for the Inpatient Building; however, it can be anticipated that light and glare impacts under this Alternative would be reduced for residents within proximity to the new Inpatient Building due to the reduced building height. As such, Alternative Three would be considered neither environmentally superior nor inferior to the proposed project with regard to aesthetics, light, and glare.

### **TRAFFIC**

In comparison to the proposed project, this Alternative would introduce an additional 12,808 square feet of hospital use to the Inpatient Building. This may result in a slight increase in vehicle trips generated, depending on the amount of space devoted to additional outpatient services. Additional corridors, storage rooms or non-outpatient services would not generate more vehicle trips. Mitigation measures would still be required to reduce impacts to the extent feasible, as with the proposed project. Significant unavoidable long-term cumulative impacts would still remain under



this Alternative. Impacts to the public transit system would likely remain the same or slightly increase under this Alternative, due to the increase of 12,808 square feet of Inpatient Building area. Thus, Alternative Three would be considered environmentally inferior to the proposed project with regard to traffic and circulation.

### **PARKING**

The number of hospital beds proposed under this Alternative would remain the same as the proposed project and therefore would not generate any additional parking requirement for licensed hospital beds. In comparison to the proposed project, this Alternative may result in the need for additional parking spaces if additional space is devoted to outpatient services, as compared to the proposed project. The proposed project provides for 2,231 parking spaces within four parking structures and surface parking. It is anticipated that parking provided under the proposed project would accommodate this Alternative's increase in demand, if any. Therefore, no additional parking facilities would need to be constructed. Thus, Alternative Three would be considered neither environmentally superior nor inferior to the proposed project since on-site parking would be required to accommodate both existing and proposed uses in accordance with the City's *Unified Development Code*.

### **AIR QUALITY**

Given the slight increase in square footage of the hospital building, short-term construction emissions would incrementally increase under this Alternative as compared to the proposed project. This Alternative, similar to the proposed project, would result in significant construction-related cumulative air quality impacts. Thus, Alternative Three would be considered environmentally inferior to the proposed project with regard to air quality.

### **NOISE**

Development of this Alternative would result in a slightly increased level of development intensity and length of construction period compared to the proposed project. Mitigation measures would still be required to reduce construction noise impacts; however, construction-related impacts would remain significant and unavoidable. This Alternative would result in a slightly increased level of traffic-related mobile-source noise levels based on the additional square footage of the Inpatient Building compared to the proposed project, though mitigation measures would still be required to reduce mobile-source noise impacts to less than significant. Helipad-related noise would be less than significant, as is the case with the proposed project. Stationary-source noise impacts would also remain less than significant under this Alternative. Overall, this Alternative would result in similar noise impacts when compared to the proposed project, and therefore Alternative Three would be considered inferior to the proposed project with regard to noise.

### **GEOLOGY, SOILS, AND SEISMICITY**

Implementation of Alternative Three would not expose people and/or structures to subsurface fault rupture as no known active or potentially active faults exist within, or project onto, the project site. Seismic ground shaking exposure would be the same as the proposed project. Development of this Alternative would present slightly increased risks to on-site employees and patients (given the



increased development and associated numbers of employees and patients on-site at any given time) with respect to ground failure, expansive soils, and corrosive soils; however, mitigation would still be required to reduce impacts to less than significant. All other geology and soils impacts would remain less than significant under Alternative Three. Thus, Alternative Three would be considered environmentally inferior to the proposed project in this regard.

### **HAZARDS AND HAZARDOUS MATERIALS**

Alternative Three would not increase risks to personnel and patients associated with hazardous materials use, handling, transport, or disposal. The current hazardous materials practices and programs implemented to minimize associated risks would not be modified under this Alternative, similar to the proposed project, and the volume of associated materials and wastes would not be notably reduced, based on the same type and intensity of proposed development. The hazardous materials conditions at the hospital under the proposed project would remain essentially the same as under current conditions, based on cost trends and ever-improving programs intended to minimize the amount of hazardous materials and wastes produced on-site. As such, this Alternative would result in comparable risks associated with hazardous materials compared to the proposed project. Furthermore, helipad improvements would still occur under this Alternative, which would result in similar helipad-related hazards than the proposed project. As such, Alternative Three would be considered neither environmentally superior nor inferior to the proposed project with regard to hazards and hazardous materials.

### **HYDROLOGY AND WATER QUALITY**

Despite the slight increase of square footage for the Inpatient Building, this Alternative would not result in substantial increase in impervious surface area on-site. As such, impacts regarding drainage, hydrology, floodplains, and water quality are anticipated to be comparable to the proposed project. Therefore, hydrology and drainage impacts would remain less than significant, as under the proposed project, while mitigation measures would still be required to reduce water quality impacts to a less than significant level, in compliance with NPDES permit requirements. Thus, Alternative Three would be considered neither environmentally superior nor inferior to the proposed project in this regard.

### **PUBLIC SERVICES AND UTILITIES**

Relative to the proposed project, this Alternative would result in an incrementally higher demand for water, fire protection and sheriff services, school facilities, electricity and natural gas, and the amount of solid waste requiring disposal at local and regional landfills. Impacts related to electricity and natural gas would also be increased compared to those for the proposed project. As is the case with the proposed project, impacts related to water supply, fire protection and sheriff services, and schools would be less than significant with implementation of applicable mitigation measures, including payment of fees to affected agencies. Impacts to solid waste facilities under this Alternative would remain significant and unavoidable with implementation of mitigation measures, like the proposed project. However, given that this Alternative would create slightly increased demands for public services and utilities, it would be considered environmentally inferior to the proposed project in this regard.



## **ABILITY TO MEET PROJECT OBJECTIVES**

This Alternative's ability to meet each of the proposed project's objectives is summarized below. The discussion cites the objective, which is shown in italicized text, and if the Alternative meets the intent of the objective.

1. *Help meet the health care needs of Santa Clarita Valley's population growth, expected to increase to 273,092 by 2010 to 313,290 by the year 2020 and to 441,704<sup>7</sup> by the year 2030, and its increasing aging population.*

This Alternative would result in the construction of the Inpatient Building, MOB1, MOB2, and MOB3. This Alternative meets this project objective.

2. *Develop a long-term plan for expansion of the existing hospital campus that would help meet the expected growth in demand for health care services and allow the hospital to apply for State-required approvals.*

This Alternative includes a Master Plan that plans for the long-term expansion of the existing hospital campus to meet the forecasted demand for health care services. This Alternative meets this project objective.

3. *Enhance and expand the Henry Mayo Newhall Memorial Hospital and associated medical buildings to provide patients with personalized care, state-of-the-art medical technology, and a professional staff within a single hospital campus environment.*

Under this Alternative, the Master Plan would provide for the enhancement and expansion of the hospital and medical office buildings to provide patients with an array of services and available technology on a single campus. This Alternative meets this project objective.

4. *Accommodate expansion of a hospital campus master plan that will bring new buildings and services on line over time as needed while ensuring continued operation of existing operations and enabling further expansion of needed facilities.*

This Alternative includes a Master Plan that accommodates the expansion of buildings and services on-site over time. Thus, this Alternative meets this project objective.

5. *Maintain the viability of the hospital on a site that will continue to be centrally located within the hospital's 680-square-mile service area as the community continues to grow in the future.*

This Alternative includes a Master Plan that maintains the Henry Mayo Newhall Memorial Hospital and associated medical office buildings in its present location, as well as allows for the construction of new hospital and medical office buildings. Thus, this Alternative meets this project objective.

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<sup>7</sup> Source: Table 2.2-9, page 2-41, *Santa Clarita Valley General Plan Technical Background Report*, February 2004.





6. *Design a well-planned hospital master plan campus that is attractive and promotes quality development consistent with the visual character of Valencia.*

The Master Plan would ensure that the campus is well-planned, and that future development is attractive and promotes quality development consistent with the visual character of the community. This Alternative meets this project objective.

7. *Maintain Santa Clarita Valley's only existing 24-hour Emergency Department. This includes maintaining the Hospital's Los Angeles County designation as a Level II Trauma Center, improving its capability to treat all patients, no matter how critically ill or injured, and having the capacity to allow for patient admissions on an emergency basis.*

This Alternative would maintain the 24-hour Emergency Department and the designation as a Level II Trauma Center. Thus, this Alternative meets this project objective.

8. *Re-establish and maintain the helipad for emergency and disaster preparedness.*

Helipads would be constructed on the rooftop of the Inpatient Building and PS1. Thus, this Alternative meets this project objective.

9. *Expand and encourage combined inpatient and outpatient services on the HMNMMH medical campus and partnerships between project sponsors where medical practices, specialty medical centers, and other healthcare services are integrated with the operations of the hospital.*

This Alternative allows the construction of the Inpatient Building, MOB1, MOB2, and MOB3, which would allow for both the expansion and encouragement of inpatient and outpatient services on the hospital campus, along with the development of specialty medical centers. Thus, this Alternative meets this project objective.

10. *Establish a campus that will attract and retain physician specialists, and establish Centers of Excellence, which are defined as highly specialized health care services via physician or hospital-authorized providers or hospital collaboration around a disease category.*

This Alternative allows the construction of the Inpatient Building, MOB1, MOB2, and MOB3, which would allow for the establishment of Centers of Excellence. Thus, this Alternative meets this project objective.

11. *Develop a medical campus designed with patients in mind by linking inpatient services and medical buildings in a single setting, providing safe access and transit opportunities.*

The medical campus would link inpatient services and medical office buildings in a single setting, as well as provide access to transit opportunities. Thus, this Alternative meets this project objective.



12. *Minimize visual impacts of the hospital campus through the use of enhanced building design and landscaping, and focusing more intensive development near the center of the site.*

The Master Plan calls for the use of enhanced building design and landscaping. In addition, the Master Plan has focused more intensive development, specifically the Inpatient Building, near the center of the site and focused less intensive development (medical office buildings and parking structures) along the site's western boundaries and along McBean Parkway. This Alternative meets this project objective.

13. *Apply land use buffering techniques between the hospital campus and adjacent residential uses through use of enhanced building setbacks and landscaping.*

The Inpatient Building would be set back more than 240 feet from residential uses located to the northwest and north; PS1 would be set back more than 150 feet from residential uses located to the northeast, east, and southeast; and PS3 would be set back more than 75 feet from residential uses to the west. Landscaping would be installed in compliance with the project conditions of approval and *Unified Development Code* requirements. This Alternative meets this project objective.

14. *Continue to modernize and upgrade the medical campus and other on-site supportive mechanical facilities to ensure the long-term viability of existing and new buildings.*

This Alternative allows for the construction of a modern, upgraded medical campus consisting of the Inpatient Building, MOB1, MOB2, and MOB3, which would provide additional on-site supportive mechanical facilities. Thus, this Alternative meets this project objective.

15. *Implement an efficient vehicular and pedestrian circulation system that ensures ease of movement throughout the site.*

The existing on-site vehicular and pedestrian circulation system would be modified to accommodate the Inpatient Building, MOB1, MOB2, MOB 3, PS1, PS2, PS3, and PS4 as a part of a master-planned medical campus that links pedestrian accessibility with a safe, efficient site design. Thus, this Alternative meets this project objective.

16. *Ensure that future development of the medical campus is served by adequate on-site parking facilities to accommodate patients, visitors, and medical staff.*

This Alternative would provide sufficient on-site parking to comply with the requirements of the *Unified Development Code*. Thus, this Alternative meets this project objective.

Alternative Three provides for the construction of the Inpatient Building, MOB1, MOB2, MOB3 and supporting facilities, which would provide additional opportunities to expand both medical services and facilities on the campus and link inpatient and outpatient services. As detailed above, Alternative Three would meet all of the objectives of the proposed project, which is to provide adequate hospital and medical office facilities to meet projected future demands within the Santa Clarita Valley and the remainder of the hospital's 680 square-mile service area.



## 6.6 ENVIRONMENTALLY SUPERIOR ALTERNATIVE

*CEQA Guidelines* Section 15126.6 indicates that if the No Project Alternative is the Environmentally Superior Alternative, then the EIR shall also identify an environmentally superior alternative among the other alternatives.

The context of an environmentally superior alternative for this EIR is based on the consideration of several factors including the project's objectives, as described in [Section 3.5, Project Objectives](#), and the alternative's ability to fulfill the objectives with minimal impacts to the surrounding environment.

### 6.6.1 NO PROJECT/NO DEVELOPMENT ALTERNATIVE

The No Project/No Development Alternative results in fewer impacts to aesthetics, light, and glare; traffic; air quality; noise; geology, soils and seismicity; hazards and hazardous materials; hydrology and water quality, and public services and utilities. Greater impacts would be anticipated for land use; population and employment (fewer employment opportunities); and parking. No significant unavoidable impacts would occur under this Alternative.

The No Project/No Development Alternative would not implement the overall objective of the proposed project, which is to provide adequate hospital and medical office facilities to meet projected future demands within the Santa Clarita Valley and the remainder of the hospital's 680 square-mile service area. Under this Alternative, the proposed hospital and medical office uses would not be developed. Therefore, none of the project objectives identified [Section 3.5, Project Objectives](#), would be met under the No Project/No Development Alternative.

The No Project/No Development Alternative would result in fewer project-related environmental impacts and eliminates significant unavoidable impacts; however, this Alternative does not meet any of the objectives of the project; in particular it would not help meet the healthcare needs of the community.

### 6.6.2 ALTERNATIVE ONE (INPATIENT BUILDING AND SUPPORTING FACILITIES ONLY)

In comparison to the proposed project, Alternative One would result in similar impacts relative to: land use; parking; hazards and hazardous materials; hydrology and water quality; and public services and utilities. This Alternative would result in a reduction of impacts in regards to the provision of health care facilities and services for the community and in employment opportunities. This Alternative would result in fewer impacts to aesthetics, light, and glare; traffic; air quality; noise; geology, and soils and seismicity. Significant and unavoidable impacts would still occur with respect to project construction-related noise, and cumulative air quality emissions, and solid waste.



Alternative One provides for the construction of the Inpatient Building and supporting parking and ancillary facilities, but does not allow for the construction of medical office buildings that would provide additional opportunities to expand both medical services and facilities on the campus and link inpatient and outpatient services. As detailed above, Alternative One meets objectives 8, 12, 13, 15, and 16; partially meets objectives 1, 2, 4, 7, and 14, and does not meet objectives 3, 5, 6, 9, 10, and 11. Alternative One partially meets the objectives of the proposed project by increasing hospital capacity to meet the increasing needs of its 680 square-mile service area. However, several of the primary objectives of the project include the development of a hospital campus master plan that provides closely linked inpatient and outpatient care. This would only be accomplished through the provision of both new hospital and medical office building facilities.

Many project-related environmental impacts would be reduced under this Alternative, such as aesthetics, traffic, air quality, noise, geology and hydrology. The Alternative would be unable to meet most of the project's objectives, in particular, it would not sufficiently help meet the healthcare needs of the Santa Clarita Valley's projected population growth, provide patients with personalized care, state-of-the-art medical technology and professional staff within a single hospital campus environment.

### **6.6.3 ALTERNATIVE TWO (MOBs 1 & 2, INPATIENT BUILDING AND SUPPORTING FACILITIES)**

In comparison to the proposed project, Alternative Two would result in similar impacts in regard to land use; population and employment; parking; hazards and hazardous materials; and hydrology and water quality. This Alternative would result in a reduction of impacts in regard to aesthetics, light, and glare; traffic; air quality; noise; geology, soils and seismicity; and public services and utilities. Significant and unavoidable impacts would still occur with respect to air quality and solid waste, project construction-related noise.

Alternative Two provides for the construction of the Inpatient Building, MOB1, MOB2 and supporting facilities, which would expand both medical services and facilities on the existing HMNMH campus that would link inpatient and outpatient services. As detailed above, Alternative Two meets project objectives 6, 7, 8, 9, 12, 13, 14, 15, and 16 and partially meets objectives 1, 2, 3, 4, 5, 10, and 11.

Although this Alternative lessens project-generated environmental impacts and reduces or eliminates cumulative impacts associated with the project, it would not result in fewer environmental impacts than the No Project/No Development Alternative. Alternative Two would attain most of the basic objectives of the project; in particular, it would help meet health care needs of the Santa Clarita Valley and help maintain the viability of the hospital. This Alternative would help provide patients with opportunities for personalized care, state-of-the-art medical technology, and opportunities for establishment of Centers for Excellence. Alternative Two would help meet the projected future demand within the 680 square-mile service area through the 2030 growth horizon. Because it would result in fewer environmental impacts and meets most of the project objectives, Alternative Two would be the environmental superior project after the No Project/No Development Alternative.



#### **6.6.4 ALTERNATIVE THREE (MOBs 1-3, REDUCED HEIGHT INPATIENT BUILDING AND SUPPORTING FACILITIES)**

Alternative Three would result in similar impacts to the proposed project in regards to land use; population and employment; aesthetics, light, and glare; parking; hazards and hazardous materials; and hydrology and water quality. This Alternative would result in an increased building footprint of the Inpatient Building due to increased building square footage associated with reducing the height of the building by 15 feet. The reduction in building height would reduce the building's visual, light and glare impacts for residential neighborhoods in proximity to the structure. This Alternative would result in an increase in impacts related to traffic; air quality; noise; geology, soils and seismicity; and public services and utilities associated with the increase in building square footage needed in order to reduce the building height. Significant and unavoidable impacts would still occur with respect to traffic, air quality, noise, and solid waste.

Alternative Three would implement the overall objective of the proposed project, which is to provide adequate hospital and medical office facilities to meet projected future demands within the Santa Clarita Valley and the remainder of the hospital's 680 square-mile service area. This Alternative meets all of the stated objectives of the proposed project.

#### **6.6.5 ENVIRONMENTALLY SUPERIOR ALTERNATIVE**

As noted above, the determination of an environmentally superior alternative is based on the consideration of how the alternative fulfills the project objectives and how the alternative either reduces significant, unavoidable impacts or substantially reduces the impacts to the surrounding environment. In consideration of these factors, Alternative Two is selected as the Environmentally Superior Alternative to the proposed project.

Although the No Project/No Development Alternative would result in the fewest environmental impacts and would not contribute to cumulative significant environmental impacts associated with the project, it does not meet any of the objectives of the project and is therefore not considered feasible. Alternative Two would result in the fewest environmental impacts in comparison to the proposed project, eliminates the significant traffic impacts, and would meet most of the basic objectives of the project. Therefore, Alternative Two is the environmentally superior alternative.



**Table 6-2  
Comparison of Alternatives**

Environmental Category	Proposed Project	No Project/No Development	Alternative One Inpatient Bldg. Only	Alternative Two MOBs 1 & 2 and Inpatient Bldg	Alternative Three MOBs 1-3 and Reduced Height Inpatient Bldg
Land Use	Less Than Significant	-	=	=	=
<i>Requires CUP or Master Plan</i>	Yes	No	Yes	Yes	Yes
Population and Employment	Less Than Significant	-	-	=	=
Aesthetics, Light, and Glare	Less Than Significant	+	+	+	=
Traffic	Significant Cumulative	+	+	+	-
<i>Reduces Significant Unavoidable Traffic Impacts</i>		Yes	Yes	Yes	No
<i>Eliminates Significant Unavoidable Traffic Impacts</i>		Yes	Yes	Yes	No
Parking	Less Than Significant	-	=	=	=
Air Quality	Significant Project & Cumulative Construction-Related	+	+	+	-
<i>Reduces Significant Unavoidable Air Quality Impacts</i>		Yes	Yes	Yes	No
<i>Eliminates Significant Unavoidable Air Quality Impacts</i>		Yes	No	No	No
Noise	Significant Project Construction-Related	+	+	+	-
<i>Reduces Significant Unavoidable Noise Impacts</i>		Yes	Yes	Yes	No
<i>Eliminates Significant Unavoidable Noise Impacts</i>		Yes	No	No	No
Geology, Soils, and Seismicity	Less than Significant	+	+	+	-
Hazards and Hazardous Materials	Less Than Significant	+	=	=	=



**Table 6-2 (Continued)**  
**Comparison of Alternatives**

Environmental Category	Proposed Project	No Project/No Development	Alternative One Inpatient Bldg. Only	Alternative Two MOBs 1 & 2 and Inpatient Bldg	Alternative Three MOBs 1-3 and Reduced Height Inpatient Bldg
Hydrology and Water Quality	Less Than Significant	+	=	=	=
Public Services and Utilities	Significant Project & Cumulative Solid Waste Disposal	+	=	+	-
<i>Reduces Significant Unavoidable Solid Waste Impacts</i>		Yes	Yes	Yes	No
<i>Eliminates Significant Unavoidable Solid Waste Impacts</i>		Yes	No	No	No
Ability to Meet Most Project Objectives	Yes	No	No	Yes	Yes
= Indicates an impact that is equal to the proposed project (neither environmentally superior or inferior). - Indicates an impact that is greater than the proposed project (environmentally inferior). + Indicates an impact that is less than the proposed project (environmentally superior).					