

Riverside Community Hospital Specific Plan



FEBRUARY 2014

PREPARED FOR:

City of Riverside
Community Development Department
Planning Division
3900 Main Street, Third Floor
Riverside, CA 92522

PREPARED BY:
DUDEK
605 Third Street
Encinitas, CA 92024

DRAFT

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Prepared for:

City of Riverside

Community Development Department 3900 Main Street Riverside, California 92522

Contact: Steve Hayes, City Planner

Prepared by:

DUDEK

605 Third Street Encinitas, California 92024 Contact: Asha Bleier, AICP

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Mayor and City Council

William "Rusty" Bailey III Mayor Mike Gardner Ward I Ward 2 Andy Melendrez Ward 3 Mike Soubirous Ward 4 Paul Davis Ward 5 Chris MacArthur Jim Perry Ward 6 Steve Adams Ward 7

City Planning Commission

Robert T. Wade Chairberson Thomas Riggle Vice-Chair Secretary Joseph Tavaglione Robert Kain Sergeant at Arms Christopher Manning Commissioner Kerry Parker Commissioner Maartin Roussow Commissioner Robert Stockton Commissioner Stan Stosel Commissioner Omar M. Zaki Commissioner

City Staff

Scott C. Barber
Belinda Graham
Deanna Lorson
Gregory P. Priamos
Kristi Smith

City Manager
Assistant City Manager
City Attorney
Supervising Deputy City

Kristi Smith Supervising Deputy City Attorney
Tom Boyd Public Works Director/City Engineer
Rob Van Zanten Principal Engineer

Steve Libring Traffic Engineer

Community Development Department

Al Zelinka, FAICP, CMSM Community Development Director

Emilio Ramirez Deputy Community Development Director

Steve Hayes, AICP
Gabriel Perez
Patricia Brenes
Brian Norton
City Planner
Principal Planner
Senior Planner
Associate Planner

Erin Gettis, Associate AIA Historic Preservation Officer

Teri Delcamp Historic Preservation Planner Sandy Gosselin Senior Graphics Technician

Riverside Community Hospital Management Team

Patrick Brilliant, President and CEO
Dan Bowers, Chief Operating Officer
Jose Torres, Director, Facilities Management

Specific Plan Consultants

Dudek

3685 Main Street, Suite 250 Riverside, California 92501

Asha Bleier, AICP, LEED AP BD+C Heather Martinelli, AICP Alexandra Coniglio Stephanie Standerfer Stephanie Tang

Perkins+Will

10100 N. Central Expressway, Suite 300 Dallas, Texas 75231

Matt Byrum, AIA, LEED AP

Kimley-Horn and Associates, Inc.

765 The City Drive, Suite 200 Orange, California 92868

Nikki Kerry, P.E. Adam Schmid, P.E

Wilkman Historical Services

P.O. Box 362 Riverside, California 92502-0362

Bill Wilkman, MA

Best Best & Krieger

3390 University Avenue, 5th Floor Riverside, California 92501

> Michelle Ouellette Charity B. Schiller



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1.0 INTRODUCTION

1.1 PURPOSE

The Riverside Community Hospital (RCH) Specific Plan provides a roadmap to guide future development over a 30-year period and identify design and development standards for the expansion of medical and medical support uses in a manner that is compatible with existing uses and future needs. The RCH Specific Plan includes both short- and long-range planning goals.

The California Government Code (Section 65450–65457) and Chapter 19.820 of the City of Riverside Zoning Code permit the use of specific plans to regulate site development, including permitted uses, density, building size, and building placement. Specific plans also govern the type and extent of open space, landscaping, roadway configuration, and the provision of infrastructure and utilities.

1.2 PROJECT OVERVIEW

The RCH Specific Plan includes a two-phase master-planned expansion of the existing hospital campus. The primary focus of Phase I is to construct a new hospital bed tower to alleviate seismic concerns associated with existing buildings and to meet seismic retrofit requirements as required by Senate Bill (SB) 1953. Phase II also addresses seismic concerns and includes future and possible long-range development broken down into Phase IIa, Phase IIb, and Phase IIc. Below is a summary of Phases I and II. Additional details on the phasing are provided in Chapter 4.0, Land Use, of this Specific Plan.

Phase I – 2014 to 2017

Phase I includes a new, 251,500-square-foot, 7-story hospital bed tower addition that will initially house up to 105 new licensed beds with 35 intensive care patient rooms and 70 medical and surgical patient rooms. In addition, the laboratory and food service operations will also be relocated to the new hospital tower. This would bring the total licensed bed count within the RCH Specific Plan to approximately 478. Phase I also includes shell space for an additional 84 beds, which would be built out in Phase II. Total capacity for this tower is 189 beds.

Phase II – 2017 to 2043

During Phase II, it is anticipated that several new structures would be constructed within the RCH Specific Plan over a 30-year period. Phase II would be divided into Phase IIa, Phase IIb, and Phase IIc.



Phase IIa - 2017 to 2024

Phase IIa is intended to occur between 2017 and 2024 and would consist of the demolition of Building A since it is not in compliance with SB 1953 and can no longer house acute care services. An approximately 100,000-square-foot mixed-use building would be proposed on the Building A site. Also, the build out of the shell space (84 additional licensed beds) in the Phase I tower would most likely occur during this phase (or earlier if necessary). When the tower has been fully built out, the maximum bed capacity within the RCH Specific Plan would be 562 licensed beds. Additional need for surface or structure parking is also anticipated in this phase to support the new space.

Phase IIb - 2024 to 2029

Phase IIb is projected to occur between 2024 and 2029 and would consist of a second new, estimated 9-story, more than 600,000-square-foot replacement bed tower, totaling 339 licensed beds (273 beds relocated from Building B and 66 beds relocated from Building D to the proposed replacement bed tower after the seismic upgrades are complete under Phase I). The relocation of 339 licensed beds would keep the number of licensed beds within the RCH Specific Plan at 562. Phase IIb focuses on relocating beds and acute care services out of Building B and Building D to the new second tower, as those buildings will no longer be in compliance with SB 1953. Once the beds are relocated to the new second hospital bed tower, Building B and Building D will be used for outpatient, skilled nursing, support, and education (e.g., University of California, Riverside). Phase IIb includes the existing parking structures (identified as I and J on Figure 2-3, Existing Site Plan) to be demolished prior to the construction of the Phase IIb replacement bed tower. Some additional convenience parking could be included during this phase.

Phase IIc - 2030 to 2043

Phase IIc is intended to occur between 2030 and 2043 and is expected to include the following:

- Addition of 38 licensed beds, for a total of 600 licensed beds. (This could occur in Phase IIb if need is demonstrated prior to 2030.)
- Construction of ancillary services as necessary.
- Construction of surface or structured parking as needed to support growth.



1.3 SPECIFIC PLAN REQUIREMENTS

According to the City of Riverside Zoning Code Section 19.820.040, at a minimum, a specific plan must include a statement of its relationship to the General Plan (Section 65451(b)) and text and diagram(s) specifying all of the following in detail:

- The distribution, location, and extent of the uses of land, including open space, within the area covered by the plan.
- The proposed distribution, location, extent, and intensity of major components of public and private transportation, sewage, water, drainage, solid waste, disposal, energy, and other essential facilities proposed to be located within the area covered by the plan and needed to support the land uses described in the plan.
- Standards and criteria by which development will proceed and standards for the conservation, development, and utilization of natural resources, where applicable.
- A program of implementation measures, including regulations, programs, public works projects, and financing measures necessary to carry out the provisions of the preceding three paragraphs (Section 65451(a)).
- Any other subjects that, in the judgment of the planning agency, are necessary or desirable for the General Plan implementation (Section 65452). (Ord. 6966 Section 1, 2007).

1.4 GENERAL PROVISIONS

Authority and Scope

The adoption of this Specific Plan by the City of Riverside (City) is authorized by Section 65450 et seq. of the California Government Code. The Government Code authorizes cities to prepare, adopt, and administer specific plans for portions of their jurisdictions, as a means of implementing a city's general plan. All specific plans must comply with Sections 65450–65457 of the Government Code. The RCH Specific Plan complies with all requirements mandated by state law. The RCH Specific Plan also complies with Chapter 19.820, Specific Plan/Specific Plan Amendments, of the City of Riverside Zoning Code.

Applicability

The provisions of this chapter shall apply to all properties included in the Riverside Community Hospital (RCH) Specific Plan Area; see Figure 2-2, Vicinity Map. No construction, addition, placement, or installation of any structure shall occur, nor shall any new use commence within the Specific Plan Area, on or after the effective date of this Specific Plan, except in conformity with the provisions of this Specific Plan. The regulations, development standards, and design



guidelines as contained in the RCH Specific Plan shall apply in their entirety in the review of development proposals, site plans, and building permits within its boundaries.

Administration

The City of Riverside shall administer the provisions of this Specific Plan in accordance with the State of California Government Code, Subdivision Map Act, City of Riverside General Plan 2025, and the City of Riverside Municipal Code, in particular Title 19 (Zoning Code).

Adoption

This Specific Plan shall be adopted by resolution in accordance with the City of Riverside Municipal Code. The Specific Plan shall serve as the zoning for the subject property.

Enforcement

This Specific Plan serves as the implementation tool for the General Plan and zoning for the Specific Plan Area. This Specific Plan addresses permitted land uses, circulation, public utilities and services, development standards, and design guidelines. The City shall enforce the provisions of this Specific Plan in the same manner that the City enforces the provisions of the Zoning Code (Chapter 19.070).

Interpretation

The Development Standards (Chapter 7.0) contained in this Specific Plan shall replace and supplement the standards contained in the Zoning Code. Whenever the provisions contained in the Specific Plan conflict with the Zoning Code, the provisions of this Specific Plan shall prevail. If ambiguity arises concerning the content or applicability of any of provision of the Specific Plan, the Community Development Director or his/her designee shall have the responsibility to review pertinent facts, to determine the intent of the provision, and to issue an interpretation as provided for in Chapter 19.060 – Interpretation of Code, of the Zoning Code. Alternatively, the matter may be referred to the Planning Commission, if not specifically covered in the City of Riverside's existing regulations. Such interpretations shall take into account the stated goals and intent of this Specific Plan.

"Should" versus "Shall"

To assist in understanding the full intent and/or requirement of the various provisions found in the Specific Plan document, users should be informed as to the meaning and context of the words "should" and "shall," as well as "encouraged" and "discouraged," as used in the document.



These words will be used consistently throughout the document to describe the intent of each objective, policy, standard, and guideline.

The use of the word "should" is intended to express the spirit and intent of the Specific Plan, meant to be applied with some flexibility. It indicates that the document is open to proposals that are equal to, or better than, that stated—as long as the intent is satisfied. The applicant assumes the burden of proof to demonstrate how a proposed project meets this test, and determinations will be made by the Community Development Director or his/her designee per Chapter 19.710 of the Zoning Code – Administrative Design Review.

The use of the word "shall" constitutes a specific requirement by the document. These are absolutely mandatory and offer relatively little flexibility unless choices are provided within the statement itself. "Shall" expresses the intent for something to take place in the future. All proposals must include these elements as described. Regardless of which term is used, each objective, policy, standard, and guideline as it pertains to each individual proposal must be addressed by an applicant.

The use of the words "encouraged" or "discouraged" are intended to express a more or less desirable solution. While, they are not direct requirements, these allow for considerable flexibility and interpretation whose intent must be upheld. Applicants will be expected to prove how proposals implement a particular objective, policy, standard, and guideline as deemed applicable by the Community Development Director or his/her designee.

Severability

If any section, sentence, clause, phrase, word, portion, or provision of this Specific Plan and its regulations are declared to be invalid, unconstitutional, or unenforceable, in whole or in part, by a court of competent jurisdiction, such holding shall not affect, impair, or invalidate any other section, sentence, clause, phrase, word, portion, or provision of this Specific Plan that can be given effect without the invalid portion. In adopting this Specific Plan, the City Council affirmatively declares that it would have approved an adopted the Specific Plan even without any portion that may be held invalid or unenforceable.

1.5 GENERAL PLAN CONSISTENCY

To ensure consistency between the RCH Specific Plan and the City's General Plan 2025, the General Plan 2025 will be amended concurrently with the adoption of this Specific Plan to incorporate and recognize that the RCH Specific Plan land use designation replaces the Downtown Specific Plan designation for that area. The existing General Plan 2025 land use designations are shown on Figure 2-4, and the RCH Specific Plan land use designations are shown on Figure 4-3.



1.6 ZONING CODE CONSISTENCY

To ensure consistency between the RCH Specific Plan and the City of Riverside Municipal Code, Title 19 (Zoning Code), the Zoning Map will be amended concurrent with the adoption of this plan to include a RCH Specific Plan Zone to replace the zoning for that area; refer to Chapter 3.4, Land Use, for further details. The existing zoning designations are shown on Figure 2-5, and the RCH Specific Plan zoning designations are shown on Figure 4-4.

Where land use regulations and/or design standards of the City of Riverside Zoning Code are inconsistent with this Specific Plan, the standards and regulations of the RCH Specific Plan shall prevail. Any issue not specifically covered in the RCH Specific Plan shall be subject to the City of Riverside Zoning Code. Interpretations may be made by the Community Development Director or referred to the Planning Commission if not specifically covered in the City's existing regulations.

1.7 DOWNTOWN SPECIFIC PLAN CONSISTENCY

The RCH Specific Plan Area is currently included in the Downtown Specific Plan – Health Care District and is subject to the provisions laid out in Chapter 10 of the Downtown Specific Plan. Under state law, specific plans provide detailed land use and infrastructure plans and policies for a certain geographic area, and must be consistent with a community's general plan. With adoption of the RCH Specific Plan, the portions of the Downtown Specific Plan – Health Care District that encompass the hospital campus will be rescinded to accommodate the boundaries of the RCH Specific Plan Area. This will result in two specific plan areas that will be effectively implemented and avoid conflict between policies, standards, and regulations of both specific plans. Therefore, there will be no inconsistencies between the RCH Specific Plan and Downtown Specific Plan.

1.8 CULTURAL RESOURCES CODE CONSISTENCY

All proposals that affect a designated cultural resource or an eligible cultural resource shall be subject to the Certificate of Appropriateness process set forth under Title 20 of the Riverside Municipal Code.

1.9 DOCUMENT ORGANIZATION

The RCH Specific Plan consists of the following chapters:

Chapter 1: Introduction – This Introduction provides the general overview and intent of the Specific Plan, and includes a project summary as well as the Specific Plan goals, requirements, and provisions.



- **Chapter 2: Existing Conditions** The Existing Conditions chapter defines existing facilities and surrounding uses, the location of the RCH Specific Plan Area, the existing General Plan land use designations and zoning, and the existing regional and local circulation network.
- **Chapter 3: Vision, Goals, and Policies** The Vision, Goals, and Policies chapter defines the overall vision of the Specific Plan and provides the framework for realizing the overall vision of the Specific Plan through goals and policies.
- **Chapter 4: Land Use** The Land Use chapter lays out the phased development plan for the project and discusses details of the land use program, including the General Plan amendment and rezone. This chapter also establishes the RCH Specific Plan as a General Plan land use designation and zoning district.
- **Chapter 5: Circulation** The Circulation chapter discusses the regional and local circulation, as well as parking improvements to accommodate proposed land uses.
- **Chapter 6: Public Utilities and Services** The Public Utilities and Services chapter identifies the water, sewer, and storm drain services for the RCH Specific Plan Area, as well as public services and dry utility providers.
- **Chapter 7: Development Standards** The Development Standards chapter provides the development standards of the RCH Specific Plan zoning district, such as height, setbacks, and floor area ratio in order to establish the relationship between building mass and scale.
- **Chapter 8: Design Guidelines** The Design Guidelines chapter provides direction for the design and appearance of buildings by incorporating examples and references for architectural theme, landscape plant palette, lighting, signage, and façade elements.
- **Chapter 9: Implementation** The Implementation chapter identifies administrative review, approval, and amendment procedures. This chapter identifies who may review future development projects that come forward under the RCH Specific Plan and what steps project proponents will need to complete.
- **Appendix** The appendix includes an analysis of how the RCH Specific Plan is in conformance with relevant goals and policies of the City of Riverside General Plan. The Appendix also includes the Ordinances and Resolutions adopting the Specific Plan as well as the Mitigation Monitoring and Reporting Plan.





2.0 EXISTING CONDITIONS

This chapter of the Riverside Community Hospital (RCH) Specific Plan provides a brief overview of the setting and history of RCH followed by an overview of the existing land use, circulation, demographics, and cultural setting of the RCH Specific Plan Area.

2.1 LOCATION AND CITY CONTEXT

The RCH Specific Plan Area is approximately 0.42 mile west of State Route (SR-) 91 and approximately 1.60 miles south of SR-60. More specifically, the area is situated on an approximately 22.5-acre campus located at 4445 Magnolia Avenue. The RCH Specific Plan Area is bounded by 14th Street to the north, Brockton Avenue to the west, Magnolia Avenue to the east, and Tequesquite Avenue to the south. The regional and local setting is illustrated in Figure 2-1, Regional Location Map, and Figure 2-2, Vicinity Map.

The RCH Specific Plan Area is currently located in the Health Care District of the Downtown Specific Plan on the southerly edge of downtown Riverside. Downtown Riverside consists of a variety of artistic, natural, historic, and judicial facilities, and has historically been the focal point of the Inland Empire as a cultural and judicial center. The downtown area is rich in historic resources that include both residential and commercial properties and represent a wide variety of architectural styles and themes. The Almond Street District and Justice District are directly to the north of the Health Care District. The Almond Street District is characterized by primarily residential uses and its historic single-family residential buildings. The Justice District is the legal and office epicenter of the surrounding region. The Superior Court Building, Hall of Justice, Family Law Court, California Court of Appeal, and U.S. District Court can all be found within the Justice District.

2.2 EXISTING DEVELOPMENT AND LAND USE

2.2.1 Existing Facilities

Since RCH opened in 1925, it has been a prominent provider of healthcare in the Riverside community and the Inland Empire region, providing comprehensive healthcare and highly specialized services. The RCH Specific Plan Area has a number of different buildings with varying styles which were constructed throughout the twentieth century to accommodate the City of Riverside's (City's) growing



population. There are contemporary wings with elements dating to the 1960s, a Spanish-style hospital wing, a contemporary building called Raincross Medical Group, and a variety of low-



rise medical office buildings and hospital-related facilities. In addition to the eclectic mix of buildings, the RCH Specific Plan Area has a number of small open spaces and is lined with mature trees throughout.

2.2.2 Previous Approvals

RCH currently operates under a Conditional Use Permit that dates back to the 1960s and is consistent with the Downtown Specific Plan – Health Care District. Existing and previously approved RCH buildings, including years constructed, are listed in Table 3-1 and are depicted on Figure 2-3, Existing Site Plan.

Currently, RCH consists of medical office buildings, a patient care tower, health education center, women's services building, storage building, four parking structures, HeartCare Institute, and emergency and surgical services (see Figure 2-3, Existing Site Plan). RCH is currently equipped with 373 beds and has approximately 1,960 employees, including over 500 highly trained physicians representing over 200 specialties. Emergency services include 50 treatment areas, a Level II Trauma Center, a Paramedic Base Station, and Emergency Helistop. In addition, RCH also provides Cardiology Services, a Cyberknife Center, Neurology and Neurosurgery Services,



and Stroke Treatment. Existing and previously approved RCH buildings, including years constructed, are listed in Table 2-1 and depicted on Figure 2-3, Existing Site Plan.

Table 2-1
RCH Specific Plan Uses – Existing/Previously Approved

ID on Figure 2-3	Building/ Structure	Use	Square Footage	Number of Beds	Year Constructed
A	Building A	Hospital – lab, dietary, administration services	58,705	N/A	1925
В	Building B	Hospital	176,040	273	1965
С	Building C	Hospital – ICU and med/surg	111,450	34	1987
D	Building D	Hospital	41,431	66	1958
Е	Building E	Hospital	3,565	N/A	1954
F	Building F	Hospital	1,077	N/A	1996
G	Parking structure	Parking	59,500	N/A	2002
Н	Health education center	Meeting rooms	12,543	N/A	1979
I	Parking structure	Parking	96,084	N/A	1982

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Table 2-1
RCH Specific Plan Uses – Existing/Previously Approved

ID on Figure 2-3	Building/ Structure	Use	Square Footage	Number of Beds	Year Constructed	
J	Parking structure	Parking	101,049	N/A	1986	
K	Medical office building 2	Cancer center	65,503	N/A	1986	
L	Brockton Storage Building	Storage	4,450	N/A	1958	
М	Women's services building	Community outreach, lactation services	1,900	N/A	1981	
N	Medical office building 1	Medical offices	61,135	N/A	1975	
0	Parking structure	Parking – 1,060 spaces	385,500	N/A	Construction anticipated to be completed 2014	
Р	Medical office building	Medical offices	61,000	N/A	Construction anticipated to be completed 2014	
Q	Raincross Medical Office Building	Medical offices	57,754	N/A	1996	
	Total Square Footage 1,298,686					

N/A = not applicable; ICU = intensive care unit; med/surg = medical/surgical

2.2.3 Surrounding Uses

The RCH Specific Plan Area is surrounded by residential uses to the northwest; Grant Elementary School and a gas station to the north; muffler services to the northeast; Newman Park and Community Medical Group of Riverside to the east; Riverside Community College to the southeast; Calvary Presbyterian Church, Evans Sports Complex, and residential uses to the south; and commercial and industrial uses to the west.

The University of California at Riverside (UCR) is located to the east of the RCH Specific Plan Area just over SR-91. UCR owns and operates the UCR California Museum of Photography, which provides a unique educational tie to downtown. West of downtown and northwest of RCH is the Santa Ana River, Mount Rubidoux Park, Fairmont Park, and Lake Evans. In addition, south of downtown and southwest of RCH is the Ryan Bonaminio Park at the Tequesquite Arroyo.

2.3 EXISTING GENERAL PLAN LAND USE DESIGNATIONS AND ZONING

The City of Riverside General Plan 2025 land use designation for the RCH Specific Plan Area is Downtown Specific Plan (DSP); see Figure 2-4, Existing General Plan Land Use. The Specific Plan Area is zoned Downtown Specific Plan – Health Care District (DSP-HC); see Figure 2-5,

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Existing Zoning. The DSP Zone allows for a broad range of residential, office, service, commercial, educational, and institutional uses. The Health Care District (HC) is intended to encourage the expansion of the existing hospital and medical-related uses and establishment of new medical and medical support uses, and to create an attractive entry into downtown from the south (Riverside Municipal Code Section 19.147.010). Proposed General Plan land use designations and zoning are discussed in Chapter 4.0, Land Use, of this Specific Plan.

2.4 EXISTING CULTURAL SETTING

Title 20 of the City of Riverside's Municipal Code establishes procedures for preserving, protecting, and designating significant cultural resources. The City of Riverside takes great pride in the preservation of their historical and cultural facilities and monuments. The eight potentially significant historical structures on or adjacent to the RCH Specific Plan Area are described below.

J. Harrison Wright Palm Grove

The J. Harrison Wright Palm Grove at the southwest corner of Magnolia Avenue and 14th Street qualifies for City of Riverside Cultural Heritage Landmark status as a cultural landscape. The palms in the grove were donated to the hospital by renowned palm tree authority and Riverside resident J. Harrison Wright. The palms were clustered at the corner to balance with the historic palm grove in Newman Park across Magnolia Avenue. Building A, while



not a historic resource, provides an important sense of setting for the palm grove.

Building B

Building B is situated in the northeast portion of the RCH Specific Plan Area near Magnolia Avenue, and it currently serves as the hospital's main bed tower. It has been determined that this building is eligible for listing in the California Register of Historical Resources. Building B is an excellent example of midcentury modern architecture by a renowned local architect, Herman O. Ruhnau. Building B is a prominent six-story, reinforced concrete building. The flat roofed building's footprint assumes a



"V" shape, oriented toward a parking and receiving area in the southerly portion of the RCH Specific Plan Area. The building assumes a horizontal stance created by its prominent use of



bands of windows, concrete awnings, and concrete spandrels. To bring Building B into compliance with current seismic standards, alterations will be necessary.

Riverside Community Players

The Riverside Community Players, situated at 4026 14th Street, toward the northwest corner of the RCH Specific Plan Area, qualifies for local designation as a Structure of Merit. While the architectural integrity of the existing building on the site has been compromised by later additions, the Riverside Community Players is among the longest continuous operating theater groups in the USA.



Calvary Presbyterian Church

Located along Magnolia Avenue south of the RCH Specific Plan Area, the Calvary Presbyterian Church qualifies for listing on the National Register of Historic Places, and it is a designated City of Riverside Structure of Merit. Its significance relates mainly to its Gothic Revival architecture, which rivals any other example in Riverside. Calvary Presbyterian Church is a complex campus built over several decades. All but the Christian Education Building are



designed in the Gothic Revival style more commonly found in East Coast cities, in England, and in Europe. The Fellowship Hall, shown in the picture, was among the central elements of the first three buildings constructed on the site. It originally served as the church's sanctuary.

Grant School

Located at the northeast corner of Brockton Avenue and 14th Street, Grant School is a City of Riverside Cultural Heritage Landmark and is eligible for listing in the National Register of Historic Places. Its significance relates to its architecture and its association with prominent architect G. Stanley Wilson. The present building is located on the site of one of Riverside's early schools, an 1889 three-story brick Victorian-style building known during its first years as the 14th Street School. In



those years, the first and second stories of the 14th Street School accommodated elementary grades, while the third story housed Riverside's first high school.



Chinatown

The Chinatown site is approximately 2.5 acres, located across Brockton Avenue from the hospital at the northwest corner of Brockton Avenue and Tequesquite Avenue. The Chinatown site is the eastern portion of a larger property where a village of Chinese immigrants existed from 1885 until the 1930s. Chinese immigrants performed important tasks that helped in the establishment of Riverside. These included working on railroads and laboring in Riverside's major economic engine, the citrus industry. Chinese immigrants also performed many other services in the City. In 1990, the Chinatown site was nominated for inclusion in the National Register of Historic Places.

Newman Park

Situated at the southeast corner of Magnolia Avenue and 14th Street, Newman Park is a City of Riverside Cultural Heritage Landmark. The park's significance derives from its palm grove, donated by renowned palm authority and Riverside resident J. Harrison Wright and its art deco-style monument of Juan Bautista de Anza. The Newman Park palm grove also is significant in its relationship to and balance with the J.



Harrison Wright palm grove within the RCH Specific Plan Area.

Old Magnolia Avenue Trolley Line and Refuse Dump

Located in the vicinity of Magnolia Avenue and 14th Street, the Old Magnolia Avenue Trolley Line and Refuse Dump qualifies for historic resource status for its archaeological potential. Test explorations of the site have uncovered many artifacts from Riverside's early history, deposited when the area was a local town dump.

2.5 REGIONAL AND LOCAL CIRCULATION

2.5.1 Existing Regional Circulation Network

Highways

Regional access to the RCH Specific Plan Area is near the crossroads of three major freeway systems: SR-91, SR-60, and Interstate 215(I-215). East of RCH is SR-91, a primary connection between Riverside and Orange/Los Angeles counties. North of RCH is SR-60, which connects Riverside in the east to downtown Los Angeles in the west and numerous communities in between. Also to the north is I-215, which stretches from Murrieta in the south to northern San Bernardino in the north. The SR-91/SR-60/I-215 Freeway Interchange is north of the RCH Specific Plan Area.



Railways

The Metrolink and Amtrack stations are located 0.7 mile east of the RCH Specific Plan Area and provide multi-modal regional access to surrounding cities. Four rail lines traverse the City of Riverside: the "Inland Empire-Orange County Line" runs from San Bernardino and Oceanside; the "Orange County Line" runs from Los Angeles to Oceanside; the "91 Line" runs from Riverside to downtown Los Angeles via Fullerton and Orange County; and the "Riverside Line" runs from Riverside to Los Angeles via Ontario and Pomona.

Bus Routes

Transit service to the RCH Specific Plan Area is provided by the Riverside Transit Agency (RTA). The following is a brief description of the bus routes that provide transit service on the street system surrounding the RCH Specific Plan Area.

- Route 1 operates between the University of California at Riverside (UCR) in the City of Riverside and the West Corona Metrolink Station in the City of Corona. The route provides access RCH via Magnolia Avenue. Route 1 operates on weekdays from 4:00 a.m. to 10:30 p.m. with 30-minute headways (the time between bus arrivals) and on the weekends from 5:30 a.m. to 9:30 p.m. with 30-minute headways.
- Route 13 operates in the City of Riverside via Magnolia Avenue in a northeast—southwest direction. Route 13 provides service on weekdays from 4:30 a.m. to 8:30 p.m. with 45-minute headways and on the weekends from 7:00 a.m. to 6:30 p.m. with 60-minute headways.
- Route 14 operates between the City of Riverside and the City of Loma Linda. Route 14 provides service to the cities of Riverside, Grand Terrace, Loma Linda, and Colton. Route 14 operates on weekdays from 5:15 a.m. to 8:40 p.m. with 90-minute headways and on the weekends from 7:00 a.m. to 7:45 p.m. with 90-minute headways.
- Route 15 operates between the City of Riverside and the La Sierra area of the City. Route 15 starts at the Riverside Downtown Terminal and ends at the intersection of Pierce and Sterling. The route provides access to RCH via Magnolia Avenue. Route 15 operates on weekdays from 5:40 a.m. to 9:40 p.m. with 45-minute headways and on the weekends from 7:00 a.m. to 7:45 p.m. with 60-minute headways.
- Route 50 is known as the "Jury Trolley" which operates between the Riverside County Courthouse and the intersection of Magnolia Avenue and Terracina Drive. This route provides access to RCH via Magnolia Avenue. Route 50 operates Monday through Thursday only, from 7:20 a.m. to 9:00 a.m. with 13-minute headways and from 9:01 a.m. to 5:40 p.m. with 27-minute headways.



2.5.2 Existing Local Circulation Network

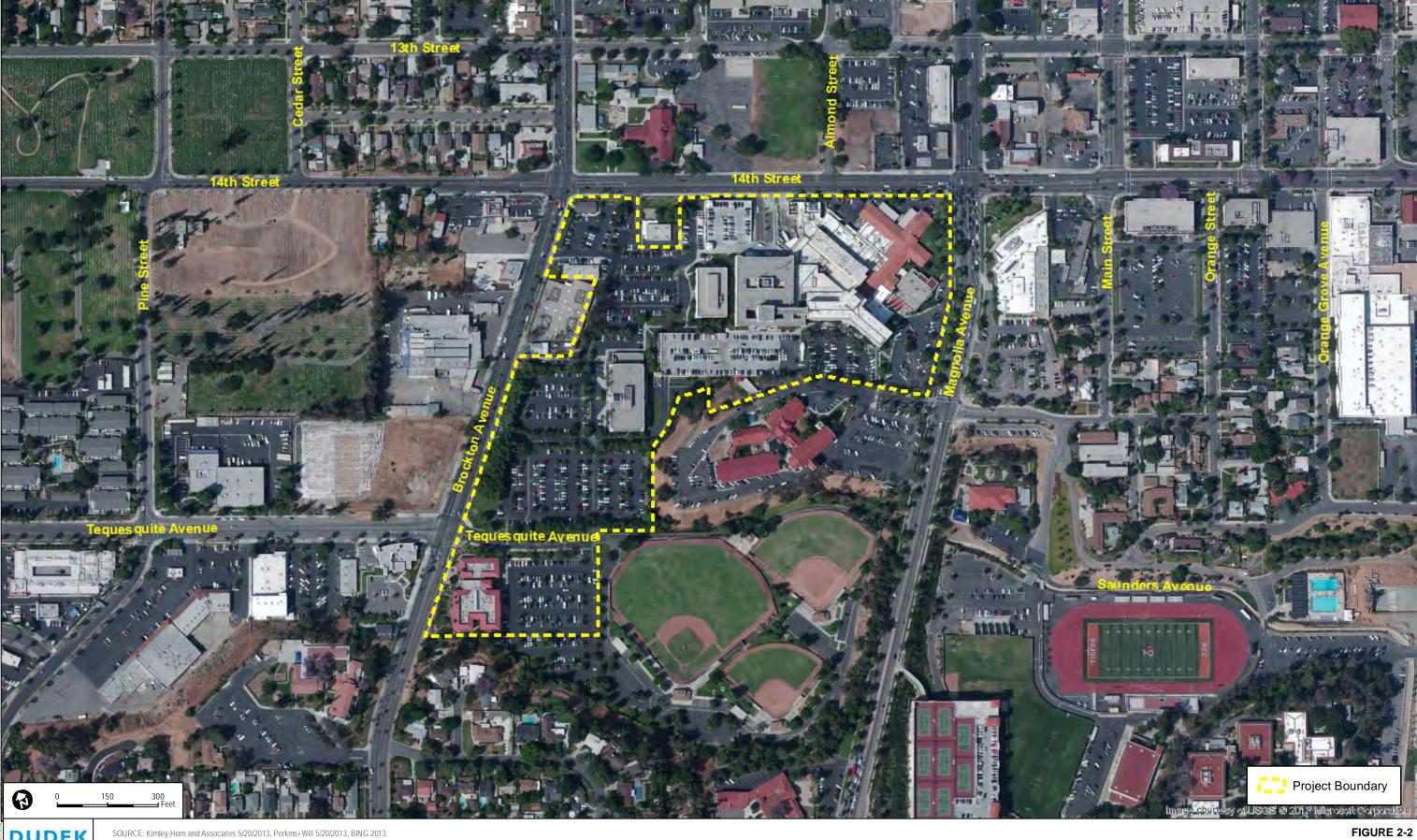
The primary north—south, four-lane arterials that provide access to the RCH Specific Plan Area are Magnolia Avenue and Brockton Avenue. From SR-60, the Market Street exit, also a four-lane arterial, would be the closest exit and most direct route; Market Street transitions into Magnolia Avenue at the northeast corner of the RCH Specific Plan Area. Magnolia Avenue runs along the east side of the RCH Specific Plan Area and has one entrance. Brockton Avenue can be reached by way of 14th Street and the 14th Street exit off SR-91. Brockton Avenue runs along the west side of the RCH Specific Plan Area and has three entrances into the campus, including one with limited access just south of the Brockton Avenue and 14th Street intersection.

The primary east—west arterial providing access to the RCH Specific Plan Area is 14th Street. SR-91 has off-ramps at 14th Street for northbound and southbound traffic. 14th Street is a four-lane arterial that runs along the north side of the RCH Specific Plan Area. There are two entrances on 14th Street, one of which is an Emergency Medical Services entrance. The east—west arterial that runs along the south side of the RCH Specific Plan Area is Tequesquite Avenue, a two-lane roadway. Tequesquite Avenue, not a through street, can be reached by way of Brockton Avenue, and has one entrance into the RCH Specific Plan Area.

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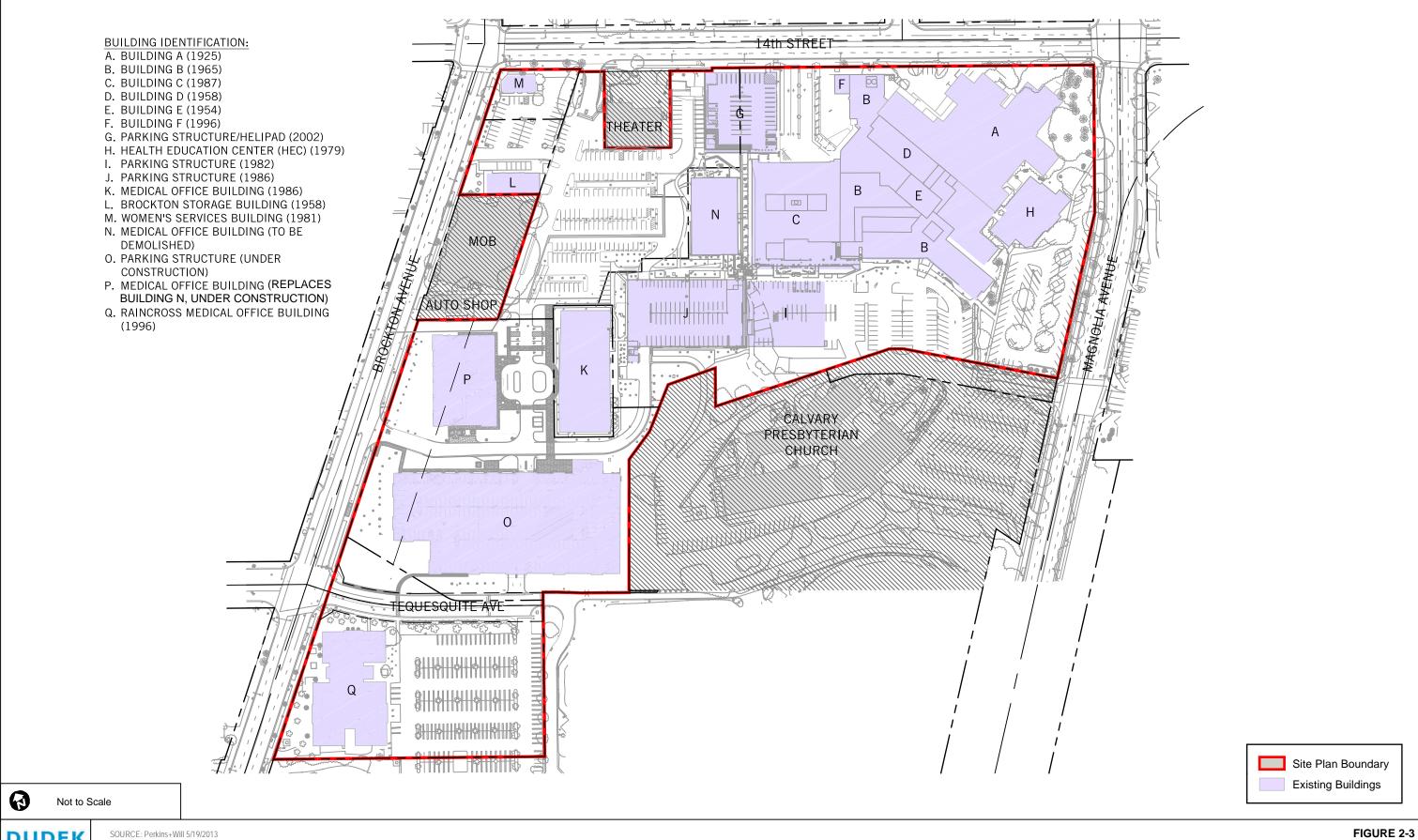
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Vicinity Map



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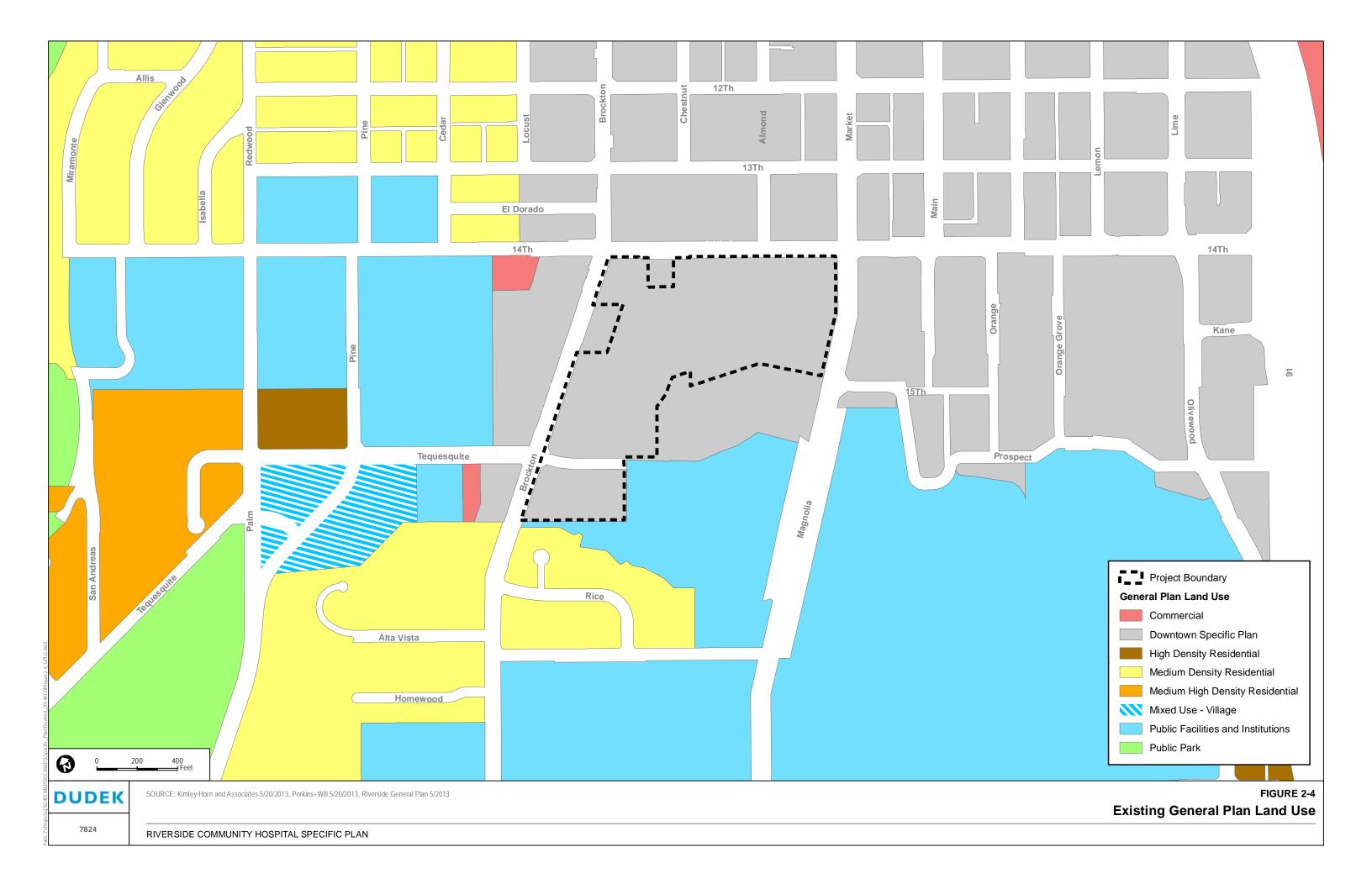


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Existing Site Plan

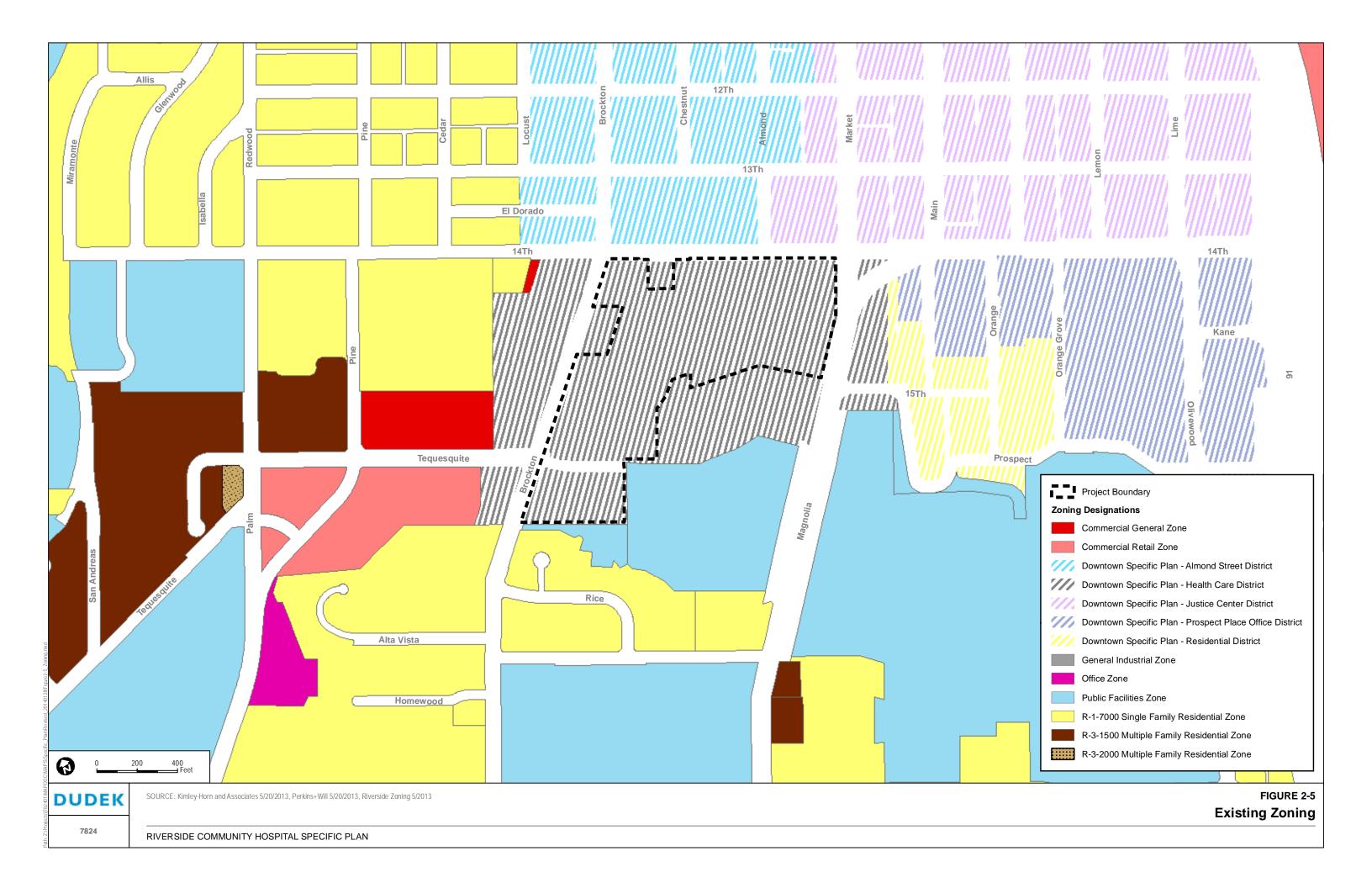


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3.0 VISION, GOALS, AND POLICIES

The overall vision of the Riverside Community Hospital (RCH) Specific Plan is a comprehensively planned, integrated medical campus within the existing hospital campus boundaries that includes approximately 600 licensed beds, acute care services, medical offices, and ancillary services for the community, as well as new employment opportunities in downtown Riverside. The Specific Plan identifies design and development requirements for the medical service facilities and supporting uses on the hospital campus to facilitate a cohesive and efficient orientation for the public, employees, and customers of RCH. The goals and policies set forth in this chapter provide the framework for realizing the overall vision of the RCH Specific Plan, while providing guidelines for decision making and direction for future expansion.

Goal 1: Facilitate the expansion of medical-related uses within the RCH Specific Plan Area.

Policy 1.1: Consider including space for research and medical education facilities during future development in coordination with the Medical School at University of California, Riverside.

Policy 1.2: Consider providing a variety of services, such as cancer care, emergency room (ER)/trauma, imaging, neurology and neurosurgery, surgical weight loss, transplant programs, labs, and medical offices.

Policy 1.3: Accommodate anticipated growth with additional faculty and staff.

Goal 2: Ensure that future expansion maintains a high standard of design and protects and enhances the character of its surroundings.

Policy 2.1: Design future development to be attractive; complement the form, scale, and architectural style of adjacent buildings; and promote harmony in the visual relationships and transitions between new and older buildings so that it appears a part of evolutionary development of downtown Riverside.

Policy 2.2: Encourage buildings to be designed with contemporary architectural styles to honor and expand the tradition of diverse, high-quality architecture found throughout the City of Riverside.

Policy 2.3: Encourage future development to strive to unify and harmonize the RCH Specific Plan aesthetic as it relates to architecture and landscape typology.



- **Policy 2.4:** Design future development to follow the design guidelines and recommendations necessary to maintain a cohesive character and community compatibility.
- **Policy 2.5:** Implement standards for the orderly development of the RCH Specific Plan Area consistent with existing and planned character of the surrounding environment and community.
- Goal 3: Protect, enhance, and perpetuate the historic character and cultural heritage of the RCH Specific Plan Area and adjacent properties.
 - **Policy 3.1:** Encourage future development to adaptively reuse properties of historic, cultural, and architectural significance, whenever feasible.
 - **Policy 3.2:** Continue ongoing seismic retrofitting of older structures that do not satisfy the mandated requirements of Senate Bill (SB) 1953, the Alfred E. Alquist Seismic Act, to replace applicable hospital facilities by the year 2030.
 - **Policy 3.3:** Design future development to maintain the character and important features of designated historic buildings.
 - **Policy 3.4:** Design future development occurring adjacent to a historic resource in a manner that is sensitive to the design, scale, and identity of the historic context.
 - **Policy 3.5:** Preserve and protect the J. Harrison Wright Palm Grove, and respect the relationship between building and landscaping in that area.
 - **Policy 3.6:** Maintain the architectural integrity of Building B and preserve its character-defining features.
 - **Policy 3.7:** Protect the historically significant Calvary Presbyterian Church from adverse effects of future development.
- Goal 4: Maintain a therapeutic internal environment within the RCH Specific Plan buildings.
 - **Policy 4.1:** Strive to make the hospital stay as unthreatening, comfortable, and stress-free as possible.



- **Policy 4.2:** Strive to provide ample natural light whenever feasible and use color-corrected lighting in interior spaces, which closely approximates natural daylight.
- **Policy 4.3:** Provide views of the outdoors from every patient bed and elsewhere whenever possible.
- **Policy 4.4:** Consider patient vulnerability to stress, from noise, lack of privacy, poor lighting, and other causes, in facility planning and design.
- Goal 5: Provide for safe and enjoyable pedestrian travel throughout the RCH Specific Plan Area.
 - **Policy 5.1:** Require new development to provide pleasant walkways and pedestrian corridors that are accessible to everyone.
 - **Policy 5.2:** Improve walkways and interior streets with enhanced sidewalks, street trees, benches, trash and recycle receptacles, and other amenities to encourage pedestrian activity for patients, visitors, and employees.
 - **Policy 5.3:** Provide for the safe movement of vehicles and pedestrians upon the premises and facilitate an orderly flow of vehicular and pedestrian traffic, minimizing the opportunity for accidents.
 - **Policy 5.4:** Comply with the minimum requirements of the Americans with Disability Act (ADA) Accessibility Standards.
- Goal 6: Ensure sufficient parking is provided within the RCH Specific Plan.
 - **Policy 6.1:** Efficiently manage the supply and demand of parking to ensure there is sufficient supply at all times.
 - **Policy 6.2:** Continue to provide strategically located parking lots and/or structures as demand arises.
 - **Policy 6.3:** Improve the RCH Specific Plan Area with new parking facilities that meet the parking needs of patients, visitors, and employees.
 - **Policy 6.4:** Before ground is broken for the new Hospital Tower, RCH will provide parking for Riverside Community Players theater patrons in accordance with the agreement between the RCH and Riverside Community Players.



Goal 7: Ensure that adequate fire protection and police protection services are provided concurrent with need.

- **Policy 7.1:** Incorporate efficient, cost-effective passive and automatic fire protection systems in future development. These systems are effective in detecting, containing, and controlling and/or extinguishing a fire event in the early stages.
- **Policy 7.2:** Fire protection engineers will be involved in all aspects of the design in order to ensure a reasonable degree of protection of human life from fire and the products of combustion as well as to reduce the potential loss from fire.
- **Policy 7.3:** Integrate performance requirements associated with fire department access, suppression, and separation distances and site/building security in future development.
- **Policy 7.4:** Encourage the design of buildings to include uncomplicated layouts that enable firefighters to locate an area quickly.
- **Policy 7.5:** Provide rapid access to various features such as fire department connections, house valves, elevators and stairs, annunciators, key boxes, etc.
- **Policy 7.6:** Accommodate the access of fire apparatus into and around the building site.
- **Policy 7.7:** Comply with the regulations of local authorities having jurisdiction to accommodate the access of fire apparatus into and around the building site and to coordinate access control point layout.

Goal 8: Encourage sustainable development and operational practices that reduces **RCH's environmental footprint.**

- **Policy 8.1:** Future development will enhance compatibility and compliance with the City of Riverside's Green Riverside Action Plan (City of Riverside 2007).
- **Policy 8.2:** Future development will complement and support the City of Riverside's Green Action Plan (City of Riverside 2007).
- Policy 8.3: Future development will incorporate stormwater runoff protection measures.
- Policy 8.4: Future development will utilize low impact development techniques to improve the quality of stormwater runoff and to minimize impacts on downstream drainage systems.

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- **Policy 8.5:** Future expansion will improve energy and lifecycle performance of building systems to achieve higher energy efficiency and reduce long-term operating expenses.
- **Policy 8.6:** Buildings and landscapes will be designed with sustainable features to minimize the use of water, energy, and natural resources.
- **Policy 8.7:** Future development will consider the use of high-performance building envelopes and select walls, roofs, and other assemblies based on long-term insulation air barrier performance and durability requirements.
- **Policy 8.8:** Future development will consider the use of passive solar design where feasible.
- **Policy 8.9:** Future development will consider sustainable design features including day-lighting, energy and water conservation, nontoxic materials and finishes, and sustainable operations and maintenance.
- **Policy 8.10:** The RCH energy and water conservation standards will meet the requirements of the Environmental Protection Agency (EPA) Energy Policy Act of 2005 and Executive Order 13423.
- **Policy 8.11:** Outflow of trash, recyclables, and soiled materials will be separated from the movement of food and cleaning supplies, and both will be separated from routes of patients and visitors.





4.0 LAND USE

This chapter identifies purpose and need for the Riverside Community Hospital (RCH) Specific Plan, and describes the overall land use program.

4.1 PURPOSE AND NEED

RCH has been operating since March 1925 and has been modified several times. RCH is currently equipped with 373 licensed beds and has approximately 1,960 employees, including over 500 highly trained physicians representing over 200 specialties. RCH houses the largest Emergency Room and Trauma Center in the Inland Empire, at 50 treatment bays. RCH is one of Riverside County's few ST-elevation myocardial infarction (STEMI; severe heart attack) receiving centers and is a fully accredited Chest Pain Center. Centers of Excellence include the HeartCare Institute, offering invasive and non-invasive cardiac procedures, the Transplant Program, and a Level II Neonatal Intensive Care Unit (ICU).

The primary reason for the proposed expansion of RCH is to build new facilities to alleviate seismic concerns associated with existing hospital buildings and meet seismic retrofit requirements as required by Senate Bill (SB) 1953. As it exists today, Building A will not be allowed to house acute care services beyond January 1, 2020. Those services will need to be relocated into the proposed Phase I tower. Per SB 1953, Buildings B and D will not be allowed to house acute care services beyond January 1, 2030. In addition to meeting the requirements of SB 1953, the overall hospital expansion is needed to improve access to healthcare for a growing population as well as to modernize hospital facilities. In the event of a disaster, RCH would be the primary hospital that would serve the community of Riverside.

4.2 LAND USE PLAN

RCH is a vital medical facility for the community and the region. The vision for RCH is to be a cohesive and well-designed medical facility where patients can receive critical and beneficial medical care. The land uses within the RCH Specific Plan include the construction of medical office buildings and hospital-related facilities in two phases, described as follows.

Phase I – 2014 to 2017

Phase I consists of a new, 251,500-square-foot, 7-story hospital bed tower addition that will house up to 105 new licensed beds with 35 intensive care patient rooms and 70 medical and surgical patient rooms. In addition, the laboratory and food service operations will also be relocated to the new hospital tower. This would bring the total bed count within the RCH Specific Plan to approximately 478. Phase I also includes shell space for an additional 84 beds, which would be built out in Phase II. Total capacity for this tower is 189 beds. The hospital



bed tower would accommodate the relocation of acute care services such as dietary and laboratory services currently housed in Building A, which is not compliant with SB 1953. During this phase, Building A would be used for hospital administrative support.

Construction of the new hospital bed tower for Phase I would eliminate 69 parking spaces (see also Figure 4-1, Land Use Plan - Phase I). The existing Building N medical office building would be demolished under Phase I to accommodate the new hospital bed tower. Building N would already be vacant prior to demolition as the physicians/staff would be relocated to the new Building P (which will be completed in March 2014 under the baseline/existing conditions). Also included in Phase I, Building B is proposed for a full seismic upgrade, including new windows as a result of the retrofit. Table 4-1 lists the existing and previously approved RCH buildings/structures with the addition of Phase I (see also Figure 4-1, Land Use Plan - Phase I).

Table 4-1 RCH Specific Plan Uses – Existing + Phase I

ID on Figure	Building/		Square	Number of Licensed	Year	
4 -1	Structure	Use	Footage	beds	Constructed	Action
A	Building A	Hospital – lab, dietary, administration services	58,705	N/A	1925	Dietary/lab to move to the Phase I bed tower; Building A used for hospital administrative support
В	Building B	Hospital	176,040	273	1965	No change in footprint, but seismic upgrades needed
С	Building C	Hospital – ICU and med/surg	111,450	34	1987	No change
D	Building D	Hospital	41,431	66	1958	No change in footprint, but seismic upgrades needed
Е	Building E	Hospital	3,565	N/A	1954	No change
F	Building F	Hospital	1,077	N/A	1996	No change
G	Parking structure	Parking	59,500	N/A	2002	No change
Н	Health education center	Meeting rooms	12,543	N/A	1979	No change
1	Parking structure	Parking	96,084	N/A	1982	No change
J	Parking structure	Parking	101,049	N/A	1986	No change
K	Medical office building 2	Cancer center	65,503	N/A	1986	No change
L	Brockton Storage Building	Storage	4,450	N/A	1958	No change



Table 4-1 RCH Specific Plan Uses – Existing + Phase I

ID on Figure 4-1	Building/ Structure	Use	Square Footage	Number of Licensed beds	Year Constructed	Action
M	Women's services building	Community outreach, lactation services	1,900	N/A	1981	No change
N	Medical office building 1	Medical offices	61,135	N/A	1975	To be demolished as part of Phase I of the project
0	Parking structure	Parking – 1,060 spaces	385,500	N/A	Construction anticipated to be completed 2014	Part of baseline conditions
Р	Medical office building	Medical offices	61,000	N/A	Construction anticipated to be completed 2014	Part of baseline conditions
Q	Raincross Medical Office Building	Medical offices	57,754	N/A	1996	No change
	New Phase I hospital bed tower	Hospital	251,500	189	Construction anticipated to be completed by 2017	Phase I of the project
	Т	1,489,051				

N/A = not applicable; ICU = intensive care unit; med/surg = medical/surgical

Note: *Building N is not calculated in the total square footage as it is being demolished as part of Phase I of the project

Shaded rows represent changes from baseline conditions.

Phase II - 2017 to 2043

During Phase II, it is anticipated that several new structures would be constructed within the RCH Specific Plan over a 30-year period. Phase II would be divided into Phase IIa, Phase IIb, and Phase IIc.

Phase IIa - 2017 to 2024

Phase IIa is intended to occur between 2017 and 2024 and would consist of the demolition of Building A since it is not in compliance with SB 1953 and can no longer house acute care services. An approximately 100,000-square-foot mixed-use building would be proposed on the Building A site. Also the buildout of the shell space (84 additional licensed beds) in the Phase I tower would most likely occur during this phase (or earlier if necessary). When the Phase I tower has been fully built out, the maximum bed capacity

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within the RCH Specific Plan would be 562 licensed beds. Additional need for surface or structure parking is also anticipated in this phase to support the new space.

Phase IIb - 2024 to 2029

Phase IIb is projected to occur between 2024 and 2029 and would consist of a second new, estimated 9-story, more than 600,000-square-foot replacement bed tower, totaling 339 licensed beds (273 beds relocated from Building B and 66 beds relocated from Building D to the proposed replacement bed tower after the seismic upgrades are complete under Phase I). The relocation of 339 licensed beds would keep the number of licensed beds within the RCH Specific Plan at 562. Phase IIb focuses on relocating beds and acute care services out of Building B and Building D to the new second tower, as those buildings would no longer be in compliance with SB 1953. Once the beds are relocated to the new second hospital bed tower, Building B and Building D will be used for outpatient services, skilled nursing, support, and education (e.g., University of California, Riverside). Phase IIb includes the existing parking structures (identified as I and J on Figure 2-3, Site Plan) to be demolished prior to the construction of the Phase IIb replacement bed tower. Some additional convenience parking could be included during this phase.

Phase IIc - 2030 to 2043

Phase IIc is intended to occur between 2030 and 2043 and is expected to include the following:

- Addition of 38 licensed beds, for a total of 600 licensed beds. (This could occur in Phase IIb if need is demonstrated prior to 2030.)
- Construction of ancillary services as necessary.
- Construction of surface or structured parking as needed to support growth.

Long-range development as part of Phase IIc could include future acute care expansions, parking structures, or other ancillary uses, including, but not limited to, the following:

- Acute care services
- Central utility plants
- Medical office buildings and clinics
- Outpatient service buildings
- Education centers
- Dental clinics
- Imaging centers



- Pharmacies
- Wellness centers
- Physical therapy or rehabilitation centers
- Community centers
- Optometry services
- Medical retail (medical supplies)
- Off-site street parking, parking structures, or surface parking lots
- Hotel facilities (requires Minor CUP).

Table 4-2 lists the existing and previously approved RCH buildings/structures as well as Phase I and Phase II (also see Figure 4-2, Land Use Plan - Phase II).

Table 4-2 RCH Specific Plan Uses – Existing + Phase I and Phase II

ID on Figure 3-2	Building/ Structure	Use	Square Footage	Number of Licensed beds	Year Constructed	Action
A	Building A	Hospital – lab, dietary, administration services	58,705	N/A	1925	To be demolished as part of Phase IIa of the project
В	Building B	Hospital	176,040	273	1965	Part of Phase IIb of the project: 273 licensed beds will be moved to the new Phase IIb replacement bed tower; Building B will be used for outpatient, skilled nursing, support, and education.
С	Building C	Hospital – ICU and med/surg	111,450	34	1987	No change
D	Building D	Hospital	41,431	66	1958	Part of Phase IIb of the project: 66 licensed beds will be moved to the new Phase IIb replacement bed tower; Building D will be used for outpatient, skilled nursing, support, and education.
Е	Building E	Hospital	3,565	N/A	1954	No change
F	Building F	Hospital	1,077	N/A	1997	No change
G	Parking structure	Parking	59,500	N/A	2002	No change

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Table 4-2 RCH Specific Plan Uses – Existing + Phase I and Phase II

ID on Figure 3-2	Building/ Structure	Use	Square Footage	Number of Licensed beds	Year Constructed	Action			
Н	Health education center	Meeting rooms	12,543	N/A	1979	No change			
I	Parking structure	Parking	96,084	N/A	1983	To be demolished as part of Phase IIb of the project			
J	Parking structure	Parking	101,049	N/A	1983	To be demolished as part of Phase IIb of the project			
K	Medical office building 2	Cancer center	65,503	N/A	1986	No change			
L	Brockton Storage Building	Storage	4,450	N/A	1958	No change			
M	Women's services building	Community outreach, lactation services	1,900	N/A	1981	No change			
N	Medical office building 1	Medical offices	61,135	N/A	1975	To be demolished as part of Phase I of the project			
0	Parking structure	Parking – 1,060 spaces	385,500	N/A	Construction anticipated to be completed 2014	Part of baseline conditions			
Р	Medical office building	Medical offices	60,897	N/A	Construction anticipated to be completed 2014	Part of baseline conditions			
Q	Raincross Medical Office Building	Medical offices	57,754	N/A	1996	No change			
	New Phase I hospital bed tower	Hospital	251,500	189		Part of Phase I of the project			
	New Phase II replacement bed tower	Hospital	600,000 (+/-)			Part of Phase IIb of the project			
	Mixed-use building in location of Building A	Medical offices	100,000 (+/-)	N/A		Phase IIb of the project			
	Total Square Footage*			1,994,245					

N/A = not applicable; ICU = intensive care unit; med/surg = medical/surgical

Note: *Buildings A, I, J, and N are not calculated in the total square footage as they are proposed for demolition as part of Phase I or Phase II of the project

Shaded rows represent changes from baseline conditions and Phase II of the project.



4.3 PROPOSED GENERAL PLAN LAND USE DESIGNATIONS AND ZONING

As indicated in Chapter 2.0, Existing Conditions, the existing General Plan 2025 land use designation for the RCH Specific Plan Area is Downtown Specific Plan (DSP); see Figure 2-4, Existing General Plan Land Use. The existing zoning is Downtown Specific Plan – Health Care District (DSP-HC); see Figure 2-5, Existing Zoning.

The RCH Specific Plan Area is proposed to be designated RCH Specific Plan in the General Plan 2025 and Zoning Map; see Figure 4-3, Proposed General Plan Land Use, and Figure 4-4, Proposed Zoning.

4.4 LAND USE REGULATIONS

Application of the Land Use Plan described herein and the following land use regulations is intended to provide for the orderly development of the site and effective fulfillment of the project objectives, while protecting the health, safety, and welfare of the employees and users, as well as those of the surrounding community.

4.4.1 Applicability

Upon adoption by Ordinance, this Specific Plan will constitute the zoning for the RCH Specific Plan Area. Subsequent development plans or agreements, tract or parcel maps, site plans, or any other action requiring ministerial or discretionary approval relative to the Specific Plan Area must be consistent with the development regulations contained within this chapter.

Where the regulations contained in this Specific Plan differ from the regulations of the City of Riverside Zoning Code, the regulations of the Specific Plan shall take precedence.

4.4.2 Determination of Unlisted Uses

Any land use not specifically covered in this Specific Plan shall be subject to the City of Riverside Zoning Code. Interpretations may be made by the Community Development Director or referred to the Planning Commission if not specifically covered in the City of Riverside's existing regulations.

4.4.3 Interpretation

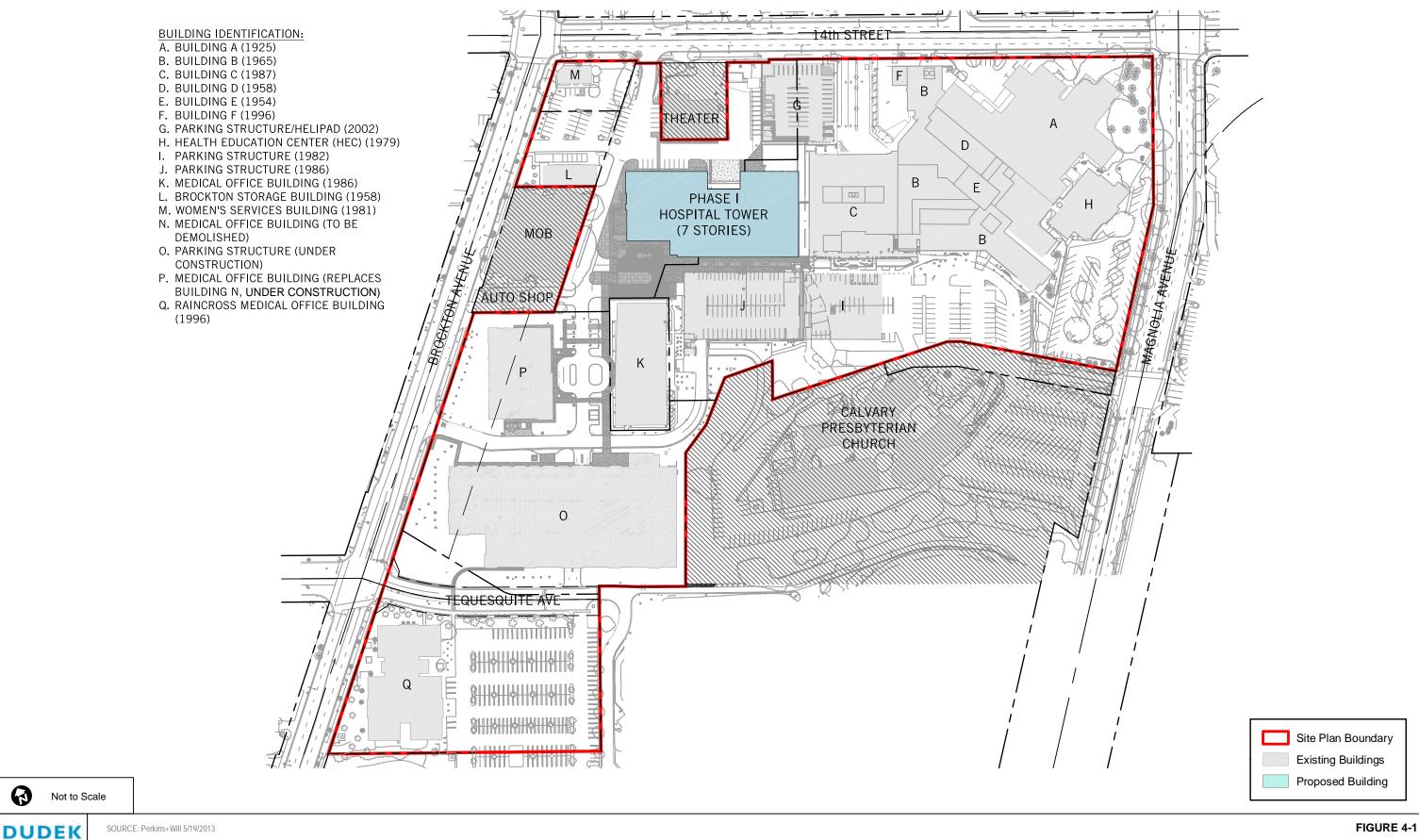
Any ambiguities related to meaning or applicability of any provision of this Specific Plan shall be resolved by the Community Development Director or his/her designee or referred to the Planning Commission. Such interpretations shall take into account the stated goals and intent of



this Specific Plan. Any interpretation made by the Community Development Director or the Planning Commission may be appealed to the City Council.

4.4.4 Existing Uses

Existing Uses within this Specific Plan Area shall be deemed to be consistent with the Specific Plan provisions. If an existing building is demolished for seismic or any other reason, any new structure shall be permitted per the development standards as to use, setbacks, height, and intensity; refer to Chapter 7.0, Development Standards. Replacement of a structure with a new structure in compliance with the provisions of the Specific Plan shall not require an amendment to the Specific Plan, but shall require approval of an Administrative Design Review, or Certificate of Appropriateness, as deemed appropriate. Refer to Chapter 19.710 – Design Review of the Zoning Code and Title 20 – Cultural Resources, as applicable.

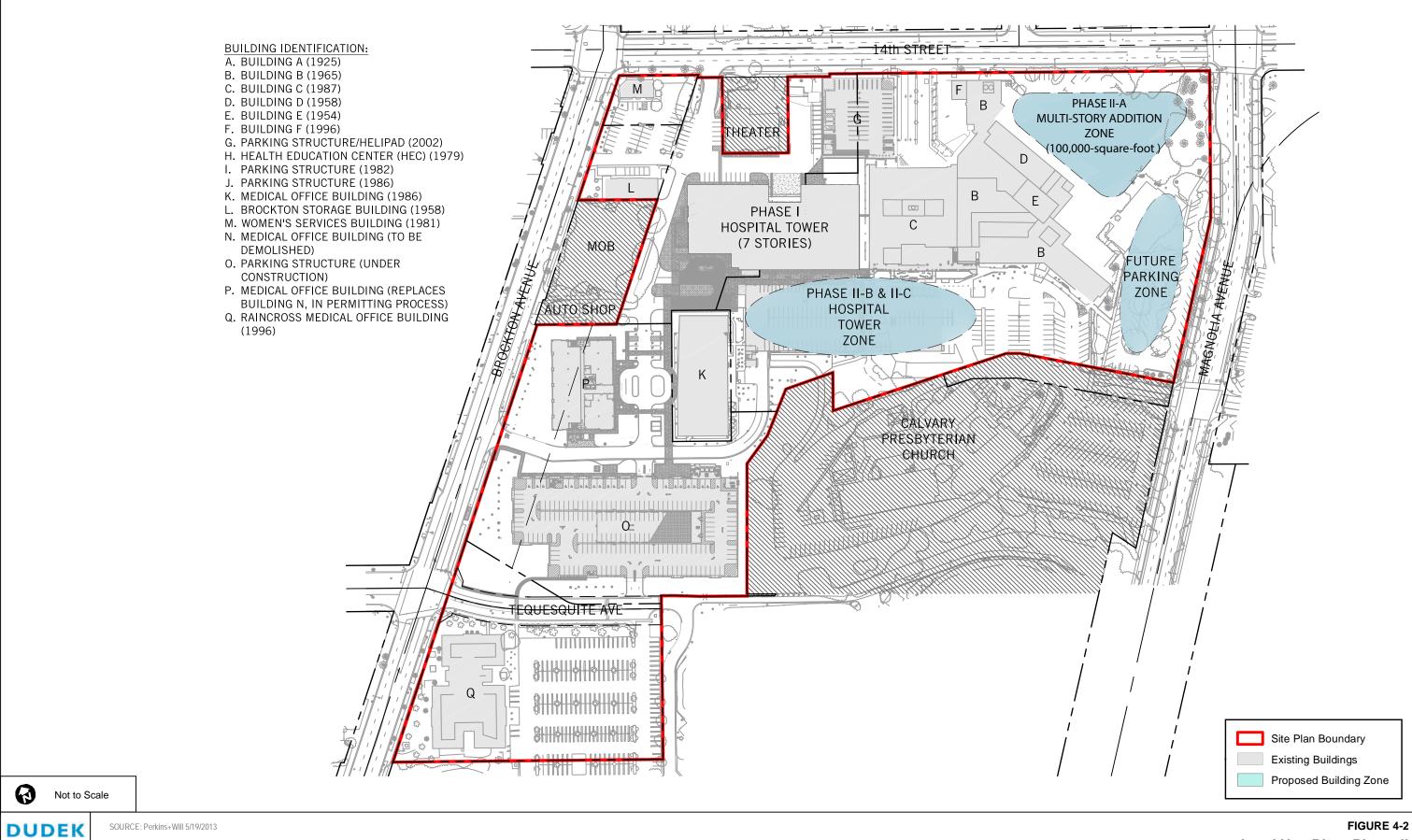


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Land Use Plan- Phase I



Riverside Community Hospital Specific Plan

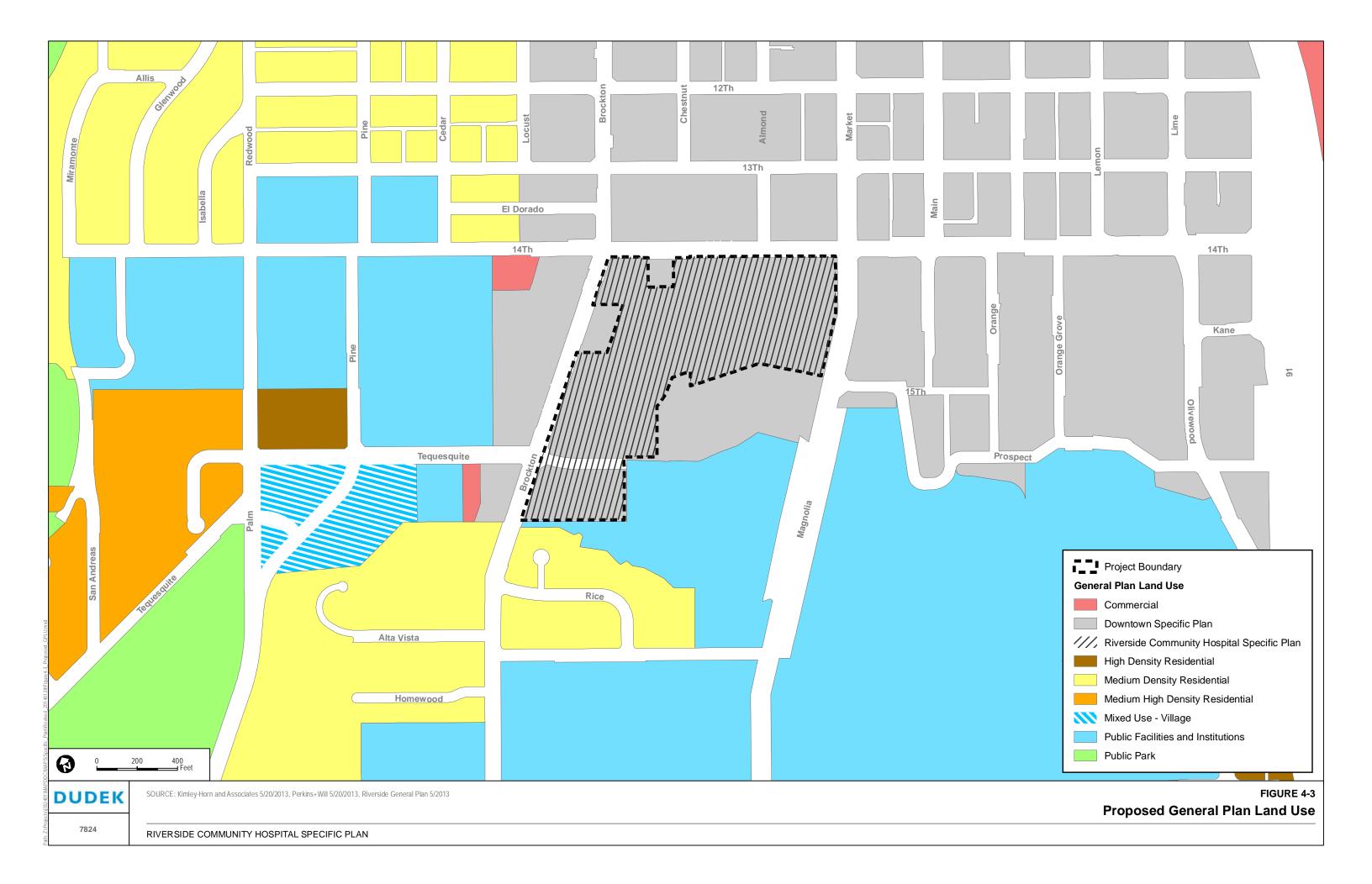


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Land Use Plan- Phase II

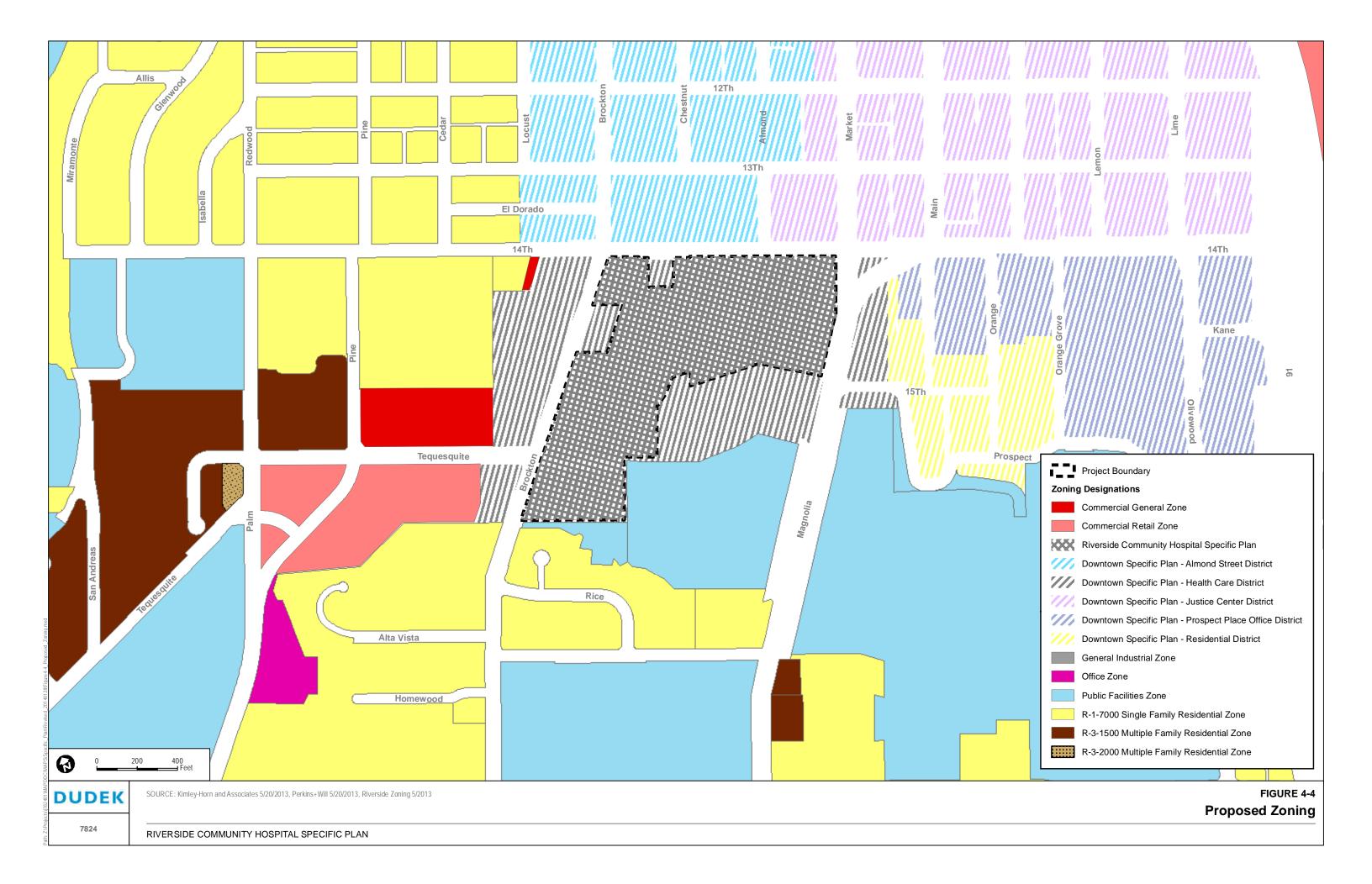


Riverside Community Hospital Specific Plan





Riverside Community Hospital Specific Plan





Riverside Community Hospital Specific Plan



5.0 CIRCULATION

This chapter provides the circulation framework for the Riverside Community Hospital (RCH) Specific Plan Area to help implement a multi-modal transportation network that prioritizes pedestrians, bicyclists, automobiles, and emergency service vehicles. The topics discussed in this chapter include vehicular circulation, bicycle and pedestrian networks, transit systems, and parking strategies.

5.1 CIRCULATION PLAN

5.1.1 Regional Access

Highways and Interstates

Regional access to the RCH Specific Plan Area is near the crossroads of three major freeway systems: State Route (SR-) 91, SR-60, and Interstate (I-) 215. East of RCH is SR-91, a primary connection between Riverside and Orange/Los Angeles counties. North of RCH is SR-60, which connects Riverside in the east to downtown Los Angeles in the west and numerous communities in between. Also to the north is I-215, which stretches from Murrieta in the south to northern San Bernardino in the north. The SR-91/SR-60/I-215 freeway interchange is north of RCH.

Metrolink Station

The Riverside-Downtown Metrolink Station is located 0.7 mile east of the RCH Specific Plan Area and provides multi-modal regional access to surrounding cities. Four rail lines traverse the City of Riverside and provide access to San Bernardino, Orange, San Diego, and Los Angeles counties:

- 1. **Inland Empire–Orange County (IEOC) Line:** This commuter rail line runs from San Bernardino through Orange County to Oceanside. The IEOC line runs on weekdays and on weekends.
- Orange County Line: This commuter rail runs from Los Angeles through Orange County to Oceanside. The Orange County Line carries passengers to the primary Metrolink hub at Union Station in downtown Los Angeles and serves 14 stations during weekday service and 1 additional station on weekends.
- 3. **91 Line:** This commuter rail line runs from Los Angeles to Riverside, paralleling SR-91. This line has eight stations, and they are all shared by the Orange County Line and the IEOC Line. The 91 Line runs on weekdays only.
- 4. **Riverside Line:** This commuter rail runs from Las Angeles Union Station to Riverside. The Riverside Line serves seven stations and only runs on weekdays during peak commuter hours.



5.1.2 Local Access

Public Bus Service

Public bus service is provided by the Riverside Transit Agency (RTA). All fixed bus routes are accessible to persons with disabilities and buses are equipped with wheelchair ramps and wheelchair lifts. The following is a brief description of the bus routes that service the street system surrounding RCH.

- **Route 1:** Provides access to RCH via Magnolia Avenue. Route 1 operates on weekdays from 4:00 a.m. to 10:30 p.m. with 30-minute headways (time between bus arrivals) and on the weekends from 5:30 a.m. to 9:30 p.m. with 30-minute headways.
- **Route 13:** Travels in a northeast–southwest direction via Magnolia Avenue. Route 13 operates on weekdays from 4:00 a.m. to 8:30 p.m. with 45-minute headways and on the weekends from 7:00 a.m. to 6:30 p.m. with 30-minute headways.
- **Route 14:** Provides service to the cities of Riverside, Grand Terrace, Loma Linda, and Colton. Route 14 operates on weekdays from 5:15 a.m. to 8:40 p.m. with 90-minute headways and on the weekends from 7:00 a.m. to 7:45 p.m. with 90-minute headways.
- **Route 15:** Provides access to RCH via Magnolia Avenue. Route 15 operates on weekdays from 5:40 a.m. to 9:40 p.m. with 45-minute headways and on the weekends from 7:00 a.m. to 7:45 p.m. with 60-minute headways.
- **Route 50:** Provides access to RCH via Magnolia Avenue and is known as the "Jury Trolley" because it operates between the Riverside County Courthouse and the intersection of Magnolia Avenue and Terracina Drive. Route 50 operates on weekdays from 4:00 a.m. to 8:30 p.m. with 45-minute headways and on the weekends from 7:00 a.m. to 6:30 p.m. with 30-minute headways.

Perimeter Roads

RCH is bordered by Magnolia Avenue to the east, Brockton Avenue to the west, 14th Street to the north, and Tequesquite Avenue to the south.

- Magnolia Avenue/Market Street: This is a north–south, four-lane arterial providing access to RCH. Market Street transitions into Magnolia Avenue at the northeast corner of RCH. Magnolia Avenue runs along the east side of RCH and has one entrance. The City of Riverside Master Plan of Roadways designates Magnolia Avenue/Market Street as a 120-foot arterial (six lanes).
- **Brockton Avenue:** This is a north–south, four-lane arterial providing access to RCH. Brockton Avenue can be reached by way of 14th Street and the 14th Street exit off



SR-91. Brockton Avenue runs along the west side of RCH and has three entrances into the RCH Specific Plan Area, including one with limited access just south of the Brockton Avenue and 14th Street intersection. The City of Riverside Master Plan of Roadways designates Brockton Avenue as an 88-foot arterial (four lanes). The City of Riverside has proposed the Brockton Avenue Restriping Project, which would restripe Brockton Avenue between Mission Inn Avenue and Beatty Drive to convert Brockton Avenue to a three-lane roadway with one through lane in each direction and a center two-way left-turn lane, excluding the segment of Brockton Avenue between 14th Street and Tequesquite Avenue which will remain in its current configuration.

- 14th Street: This is an east—west arterial providing access to RCH. SR-91 has offramps at 14th Street for northbound and southbound traffic. 14th Street is a four-lane arterial that runs along the north side of the RCH Specific Plan Area. There are two entrances on 14th Street into RCH, one of which is an Emergency Medical Services entrance and will remain as such. The City of Riverside Master Plan of Roadways designates 14th Street as a 100-foot arterial (four lanes).
- **Tequesquite Avenue:** This is an east—west arterial that partially runs along the south side of the RCH Specific Plan Area. Tequesquite Avenue is a two-lane roadway and not a through street as it terminates at Brockton Avenue. Tequesquite Avenue can be reached by way of Brockton Avenue and has one entrance into the RCH Specific Plan Area. Tequesquite Avenue is not depicted on the City of Riverside Master Plan of Roadways.

Other Local Access Roads

- **15th Street:** This is an east—west, two-lane undivided roadway with one travel lane in each direction. This road terminates at the eastern hospital entrance. The eastern end of the roadway extends into residential development and also provides access to the Riverside City College campus. 15th Street is a local roadway.
- **University Avenue:** This is an east—west, four-lane divided roadway with two travel lanes in each direction and a two-way left-turn lane divider.
- **Terracina Drive:** This is an east—west, two-lane undivided roadway with one travel lane in each direction. Terracina Drive terminates in a T-intersection at Brockton Avenue and continues east past Magnolia Avenue on the east to provide access to the Riverside City College campus. Terracina Drive is a local roadway.
- Ramona Drive: This is an east—west three-lane undivided roadway with one eastbound lane and two westbound lanes. On the City of Riverside Master Plan of Roadways, Ramona Drive is designated as an 88-foot arterial (four lanes).



Internal Driveways

Access to the RCH Specific Plan Area is provided via a number of driveways located on each of the perimeter streets; see Figure 5-1, Circulation Plan - Phase I. Main access to RCH is located on Magnolia Avenue across from 15th Street.

Bicycle Facilities

Bicycle facilities within the City of Riverside are broken down into a two-tier classification system.

- Class I: Provides a completely separated right-ofway designated for the exclusive use of bicycles and pedestrians
- Class II: Provides a restricted right-of-way on a roadway's shoulder designated for the exclusive or semi-exclusive use of bicycles.

The RCH Specific Plan Area is bordered by Class II bicycle facilities on all sides.



Separation of pedestrians from vehicular and bicycle traffic will be accomplished through several elements on site, such as the installation of sidewalks, separation of pedestrian and bike paths, and incorporation of pedestrian walking paths within landscape buffers. See Figure 5-2, Pedestrian Pathway Plan. Pedestrian circulation within the RCH Specific Plan Area consists of a network of internal pathways. These pathways create a network that allows patients, visitors, and



employees the ability to quickly and efficiently travel on foot to any destination on the RCH Specific Plan Area; see Figure 5-2.. Planting adjacent to walkways will be maintained at a reasonable height to ensure safety and security of pedestrians. Sidewalks and walkways will range in widths between 6 feet and 10 feet. Pedestrian level lighting will be provided on all walkways to eliminate poorly lit areas.





5.1.3 Parking

For parking requirements, refer to Section 7.5.3, Parking, of this Specific Plan.

In order to reserve a sufficient number of parking spaces, RCH has assigned parking and permit parking. The hospital currently has three existing parking structures (Buildings G, I, and J) and one approved parking structure under



construction and anticipated to be completed by 2014 (Building O) that will add 1,060 parking spaces. Existing I parking structures are shown below in Table 5-1.

Table 5-1
RCH Specific Plan Parking Uses – Existing

ID on Figure 2-3	Building/ Structure	Use	Square Footage	Year Constructed	Action
G	Parking structure	Parking	59,500	2002	No change
	Parking structure	Parking	96,084	1982	No change
J	Parking structure	Parking	101,049	1986	No change
0	Parking structure	Parking – 1,060 spaces	385,500	2014	Under Construction anticipated to be completed 2014

Phase IIb includes the existing parking structures (identified as I and J on Figure 2-3, Site Plan) to be demolished prior to the construction of the Phase IIb replacement bed tower. Some additional convenience parking could be included during this phase. Existing and Phase II parking structures are shown below in Table 5-2.

Table 5-2 RCH Specific Plan Parking Uses – Existing + Phase II

ID on Figure 2-3	Building/ Structure	Use	Square Footage	Year Constructed	Action
G	Parking structure	Parking	59,500	2002	No change
I	Parking structure	Parking	96,084	1982	To be demolished as part of Phase IIb of the project
J	Parking structure	Parking	101,049	1986	To be demolished as part of Phase IIb of the project
0	Parking structure	Parking – 1,060 spaces	385,500	2014	No change

A future parking zone is designated along Magnolia Avenue in Phase II. The future parking structure or parking lot would be designed to meet the requirements and standard safety guidelines set forth herein.

Riverside Community Hospital Specific Plan



5.1.4 Emergency Room Access

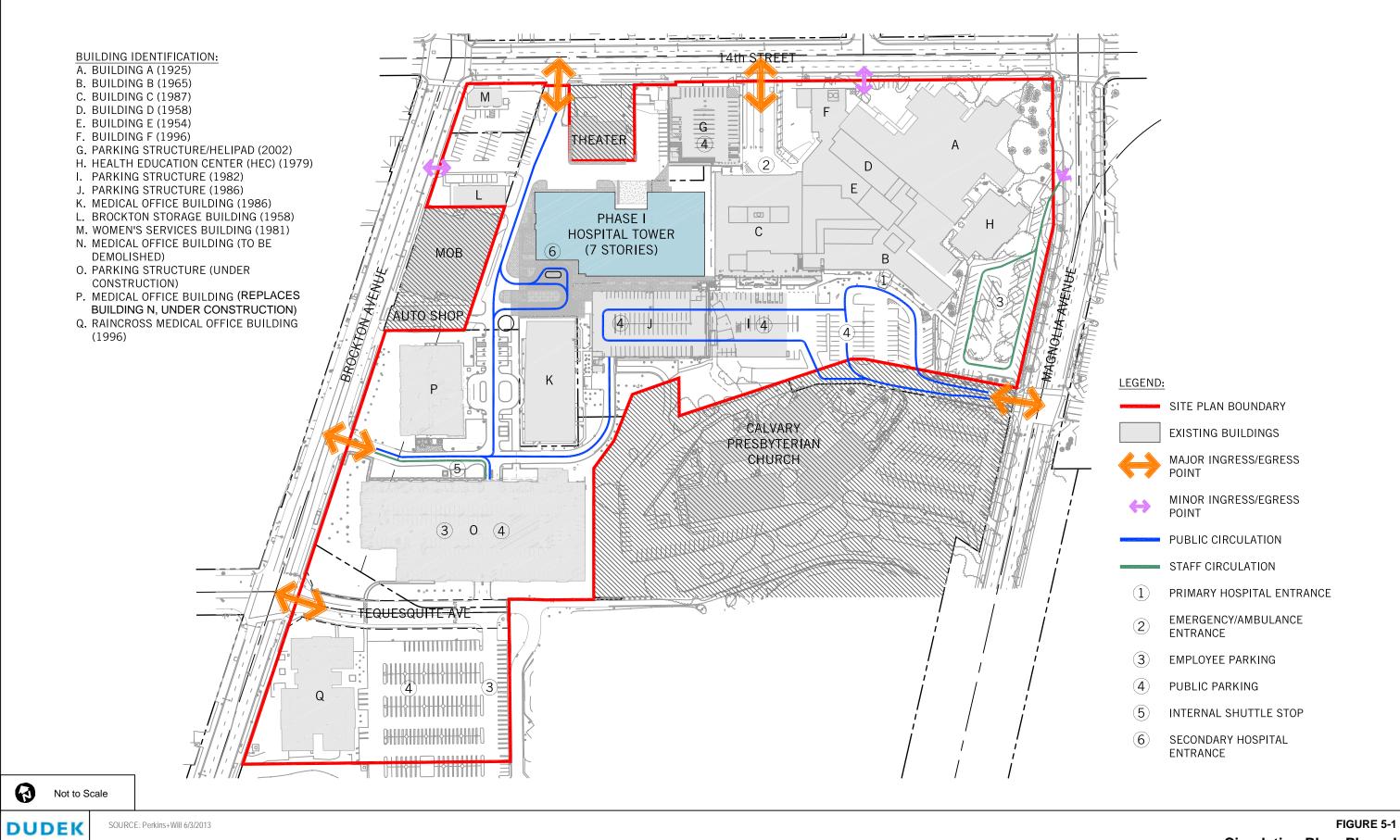
Office of State Health Planning and Development (OSHPD) and good design principles dictate that emergency vehicle/ambulance access be separated from walk-in patient access to the emergency room. An emergency/ambulance entrance is provided from 14th Street; see Figure 5-1, Circulation Plan. Walk-in patient access to the emergency room is provided from Parking Structure G. Parking spaces fronting the emergency room are also available for emergency room parking.



5.1.5 Transportation Demand Management

Transportation Demand Management (TDM) is a strategy design to reduce single occupancy vehicle trips during peak hours. TDM seeks to shift commuters to transportation modes other than cars, and encourage ride-sharing and carpooling programs. The RCH Specific Plan incorporates the following TDM measures:

- RCH will continue to implement two ride-sharing rewards programs in coordination with Inland Empire Transit. Both programs are promoted through informational flyers and at new hire orientation. A TDM coordinator is available to facilitate the distribution of information and make sure it remains current.
 - O (1) 2 Dollars/Day Program: Participants log their modes of commuting for 3 months and are awarded points for using alternative modes of transportation, such as the Metrolink, bus, bike routes, and carpooling. The program enables employees to connect for carpools. At the end of the 3-month period, participants are awarded gift cards based on the points accrued.
 - o (2) Ride-Share Plus Program: Participants are provided with tools for carpooling, bicycling, and other alternative modes of transportation. Participants in this program have usually completed the 2 Dollars/Day Program and continue to log hours to accumulate rewards, such as a coupon book (valued at \$1,000). The coupon book offers savings at local businesses as well as the ability to register the coupon book online to access discounts at more than 135,000 merchants nationwide.
- Preferential parking for carpool vehicles
- Bicycle parking and shower facilities for employees
- Local transportation management and roadway improvements
- On-site amenities such as cafeterias, restaurants, automated teller machines and other services that would eliminate the need for additional trips.

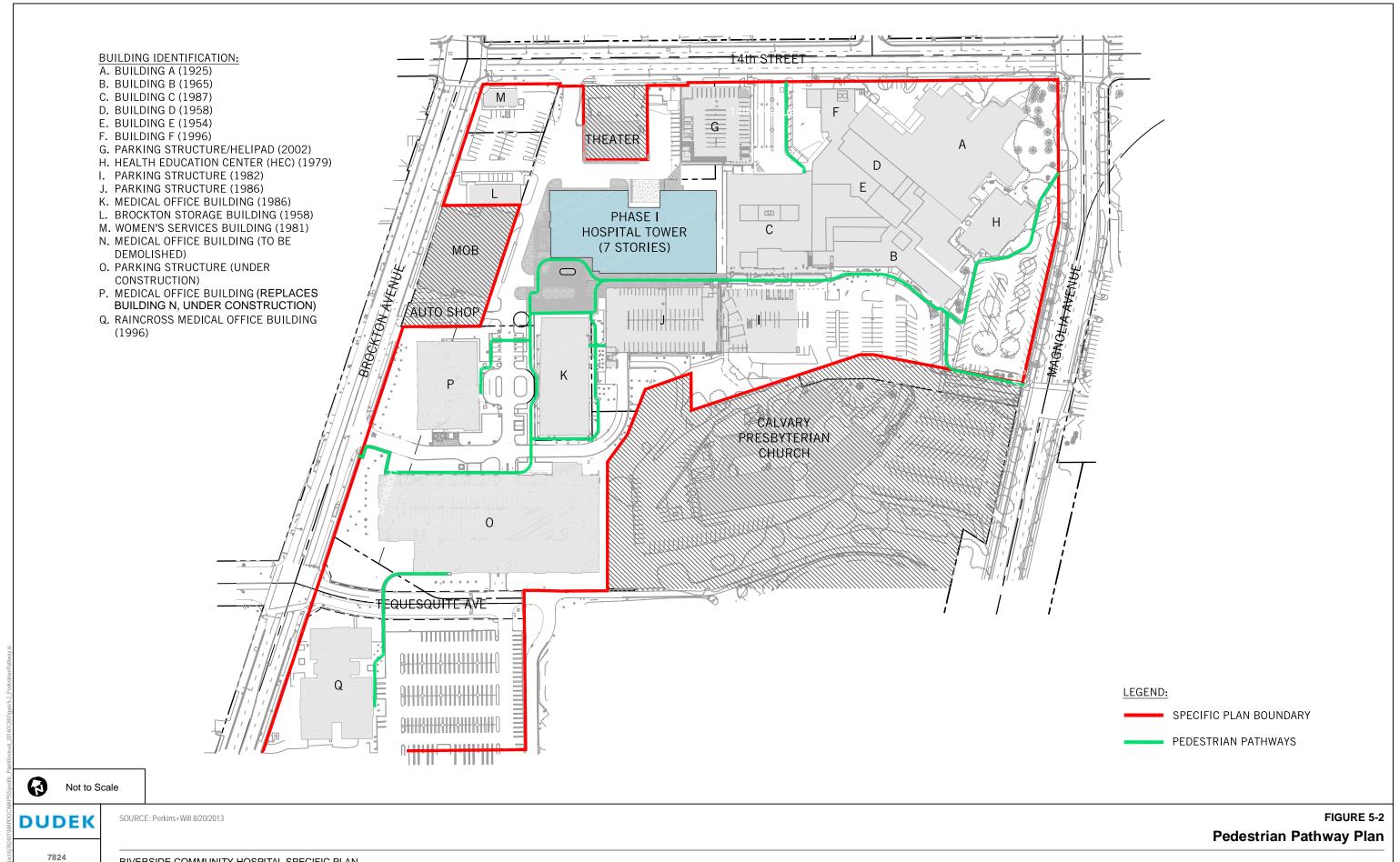


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Circulation Plan- Phase I



Riverside Community Hospital Specific Plan





Riverside Community Hospital Specific Plan

6.0-1



6.0 PUBLIC UTILITIES AND SERVICES

This chapter identifies the public utilities and services for the Riverside Community Hospital (RCH) Specific Plan Area, including water, sewer, storm drain services, dry utility providers and other public service providers.

6.1 UTILITIES PLAN

6.1.1 Water Service

Water service to the RCH Specific Plan Area is provided by the City of Riverside Public Utilities Department. RCH currently ties into existing pipes in adjacent streets for the required potable and fire protection water supply. Existing connection points are located along Magnolia Avenue and Brockton Avenue; see Figure 6-1, Utilities Plan. Proposed new buildings will tie into these connection points and will be serviced through existing water lines. Existing easements will be retained, and new easements, as needed, will be dedicated to meet department requirements.

Prior to the buildout of Phase II, subsurface water storage tanks will be constructed within the RCH Specific Plan to allow for 72-hour emergency water supply for continued hospital operation in the event of temporary water service interruption due to a seismic event. This is a seismic retrofit requirement as required by Senate Bill (SB) 1953 Nonstructural Performance Category 5 that must be implemented for all hospital buildings by the year 2030. If the milestone is not met, the subsurface tanks shall continue to be allowed with a ministerial permit under the RCH Specific Plan to meet state code requirements.

6.1.2 Wastewater Service

Wastewater from RCH will continue to be treated at the City of Riverside Wastewater Treatment Plant located at the Regional Water Quality Control Plant. RCH currently ties into existing sewer lines in adjacent streets. Existing connection points are located along Magnolia Avenue and Brockton Avenue; see Figure 6-1, Utilities Plan. Proposed new buildings will tie into these connection points and will be serviced through existing sewer lines. Existing easements will be retained and new easements, as needed, will be dedicated to meet requirements.

Prior to the buildout of Phase II, subsurface storage tanks will be constructed within the RCH Specific Plan to allow for 72-hour emergency wastewater holding capacity for continued hospital operation in the event of temporary wastewater service interruption due to a seismic event. This is a seismic retrofit requirement as required by Senate Bill (SB) 1953 Nonstructural Performance Category 5 that must be implemented for all hospital buildings by the year 2030. If the milestone is not met, the subsurface tanks will continue to be allowed with a ministerial permit under the RCH Specific Plan to meet state code requirements.

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6.1.3 Storm Drainage and Water Quality

Storm drainage and flood control is maintained by the City of Riverside and County of Riverside Flood Control and Water Conservation District. Currently, the City of Riverside operates a storm drain system within the 14th Street and Magnolia Avenue rights-of-way, and the Riverside County Flood Control District maintains a 96-inch storm drain beneath Brockton Avenue and a 12-foot x 7-foot box storm drain beneath Tequesquite Avenue. RCH connects to the existing stormwater drainage facilities; see Figure 6-1, Utilities Plan.

The RCH Specific Plan Area is not located within a flood zone. The RCH Specific Plan Area is highly developed and consists of mostly impervious surfaces with limited amounts of pervious landscape areas within planting beds or along the site perimeter. Surface runoff from the RCH Specific Plan Area will drain to the existing stormwater system through one of the five existing stormwater outfalls currently collecting stormwater from the site. Drainage on the northeast portion of the RCH Specific Plan Area flows toward the street and then continues west in the gutter along the south side of 14th Street. A curb inlet located near the westernmost driveway to the RCH Specific Plan Area along 14th Street collects surface runoff and coveys it to the public storm drain system. The southeast portion of the site drains to an inlet at the southeast corner of the RCH Specific Plan Area and connects to the Cityowned storm drain system within Magnolia Avenue.

The RCH Specific Plan Area includes an existing infiltration system located north of Tequesquite Avenue and east of Brockton Avenue that collects, treats, and slowly releases the water collected on site prior to draining into the stormwater drainage system. The infiltration system, which has a total water storage capacity of approximately 13,200 cubic feet in its pipe, was designed with excess capacity in anticipation of Phase I, Phase IIb, and Phase IIc.

The RCH Specific Plan Area will include a new second infiltration system, as part of Phase IIa, that would be built in the northern portion of the site and would collect and treat runoff prior to draining into the municipal storm drain system. Though the location and design of this second infiltration system is not known at this time, the City and the Santa Ana Regional Water Quality Control Board (RWQCB) will have final approval of the Revised Project-Specific or Phase-Specific Water Quality Management Plan (WQMP) prior to construction of Phase IIa and installation of the infiltration system. The second infiltration system is expected to be constructed of materials similar to the existing on-site infiltration system, be of the appropriate size to collect and treat surface flows, and be located close to where this infiltration system would connect to the stormwater drainage system. Per the Project-Specific WQMP, the new infiltration system would have a high (equal or greater than 80%) removal efficiency percentage and would address pollutants such as sediments, nutrients, trash, metals, bacteria, oil and grease, and organics.



Changes to the existing drainage patterns as a result of RCH buildout are not expected to be significant because impervious surfaces already cover a majority of the RCH Specific Plan Area. In addition, RCH will implement the following best management practices (BMPs) to improve overall site permeability and reduce off-site drainage flow:

- Stormwater drainage from paved surfaces will be collected in curbs, gutters, and storm drain systems and conveyed to infiltration basins in accordance with the Riverside County Stormwater MS4 Permit. If site soil conditions do not allow for infiltration, the hierarchy of the current MS4 permit will be followed which includes store and reuse or biofilters.
- Parking lots will be designed to comply with minimum required pavement width, according to City guidelines.
- Infiltration basins will be used to the maximum extent possible to achieve filtration and natural treatment of the stormwater runoff from rooftops.
- Stormwater drainage from loading dock areas will be collected and treated prior to discharge off site.
- On-site soils within landscaped areas will be scarified.
- The City of Riverside Landscape Regulations (Chapter 19.570) will be adhered to for landscaped areas. Landscaping will meet the City of Riverside-approved landscape materials list.
- Rain shutoff devices to prevent irrigation during and after precipitation will be included in the design. The irrigation system will include control mechanisms to allow staff to adjust water supplies to areas based on need.
- Stormwater conveyance system inlets will include language indicating that water flows to the local water resource.
- Trash receptacles will be provided on site with signage.
- A fire sprinkler will be designed to discharge into the sanitary sewer.
- Infiltration basins, parking lots, and trash pickup will be maintained as part of the ongoing landscaping maintenance costs.

Water Quality Management Plan

A WQMP for RCH has been prepared by Kimley–Horn and Associates Inc. The WQMP is required to demonstrate compliance with the 2010 Santa Ana Region National Pollutant Discharge Elimination System Municipal Separate Storm Sewer System (MS4) permit. The WQMP identifies pollutant sources associated with the addition of business operations that may affect the quality of



discharges of stormwater from the site. The WQMP also includes the BMPs listed above, which would be refined for each phase via a Final WQMP as part of site plan review.

Hydrology Report

The site is located within the Santa Ana Region (Region 8) of the California RWQCB, located within the RWQCB Middle Santa Ana River Watershed Management Area and in the Santa Ana Hydrologic Unit (Santa Ana RWQCB 2011). The Santa Ana River is located approximately 1 mile to the northwest of the project site. Surface flows from the project site are collected by the municipal stormwater system and ultimately flow into Reach 3 of the Santa Ana River. The Santa Ana River is the receiving water for over 2,700 square miles that include portions of San Bernardino, Riverside, and Orange counties. The Santa Ana River flows for over 100 miles from the San Bernardino Mountains to the Pacific Ocean.

Stormwater Pollution Prevention

A Stormwater Pollution Prevention Plan will be prepared for each phase to address construction activities, and incorporate project-specific BMPs to control pollutant discharges.

6.1.4 Public Services

Public services will be provided to RCH by the following providers and sustainable design features will be implemented where feasible.

Fire Service

Fire service is provided by the City of Riverside Fire Department, Station 1 (Downtown) located approximately 0.57 mile northeast of the RCH Specific Plan Area. Fire engine vehicles currently enter and exit the RCH Specific Plan Area via the access driveway on 14th Street, which will remain as the primary emergency access.

Police Service

Police service is provided by the City of Riverside North Policing Center. The nearest station, Orange Police Station, is located at 4102 Orange Street. In addition to safety concerns of all buildings, hospitals in general have several particular security concerns including the protection of property and assets, medical equipment, drugs etc.; protection of patients, including incapacitated patients; and safe control of violent or unstable patients. The City of Riverside and RCH are committed to protecting the patients, visitors, and employees of RCH. All appropriate measures will be taken now and in the future to ensure the safety and wellness of those within the RCH Specific Plan.

6.0-5



Solid and Hazardous Waste Disposal Service

Solid waste (trash) disposal service is provided by the Waste Management. For Hazard Waste Disposal Services, RCH will continue to use Waste Stream Solutions.

Electricity

Electricity for the RCH Specific Plan Area is provided by Riverside Public Utilities through connections to existing lines on surrounding streets. In an effort to become a more sustainable hospital campus, RCH will take into consideration the use of high-performance building envelopes, the use of passive solar design where feasible, and other sustainable design features including day-lighting, energy and water conservation, nontoxic materials and finishes, and sustainable operations and maintenance. The RCH energy and water conservation standards will meet the Environmental Protection Agency (EPA) Energy Policy Act of 2005 and Executive Order 13423 (Strengthening Federal Environmental, Energy, and Transportation Management) requirements.

Cable and Internet Service

Cable service is provided by Direct TV, and internet is provided by AT&T through connections to existing lines.

Telephone Service

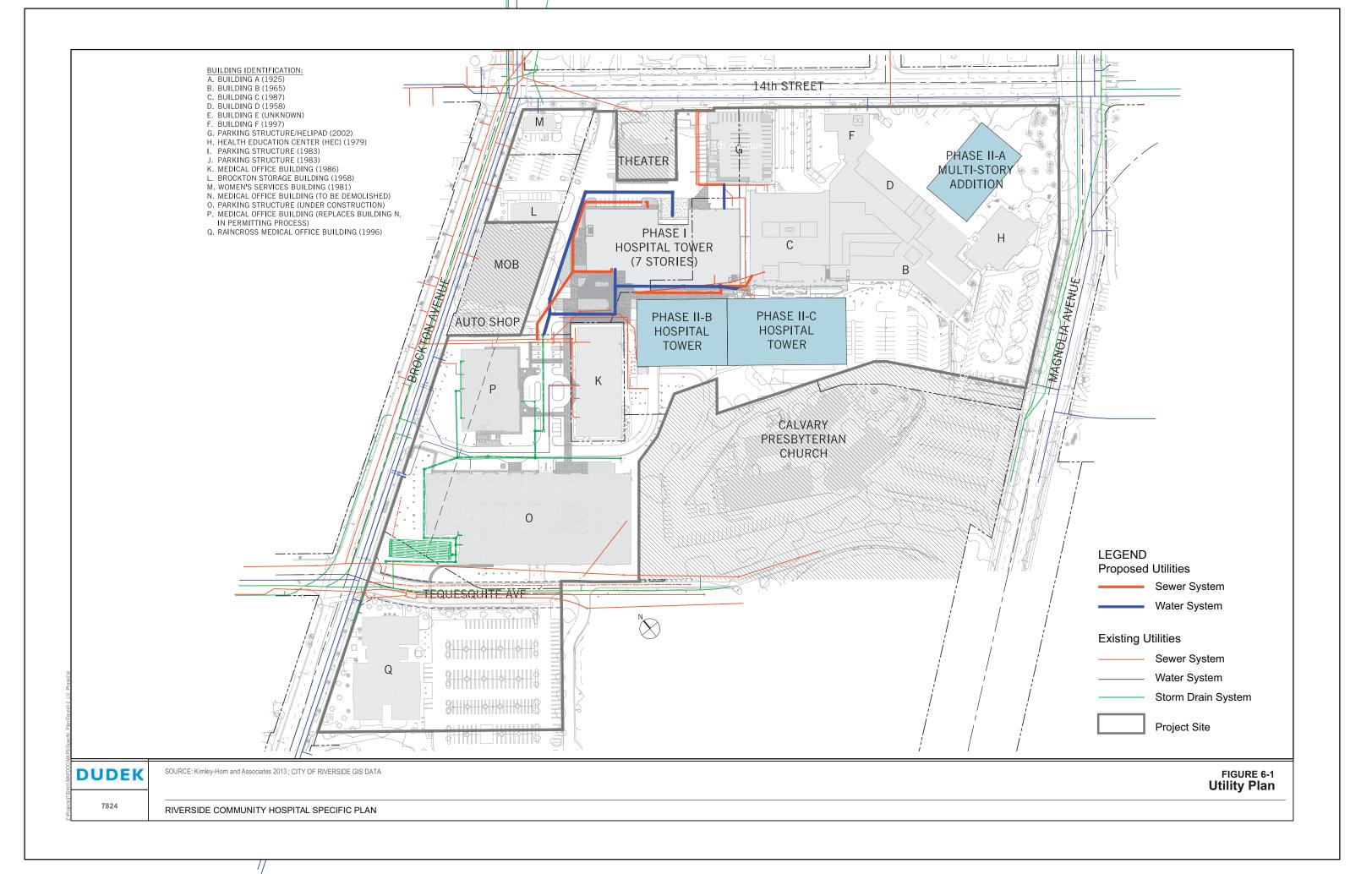
Telephone service is provided by AT&T through connections to existing lines.

Natural Gas

Natural Gas service is provided by Southern California Gas Company through existing connections.

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Riverside Community Hospital Specific Plan



7.0 DEVELOPMENT STANDARDS

This chapter provides the development standards for the Riverside Community Hospital (RCH) Specific Plan zoning district, such as height, setbacks, and floor area ratio in order to establish the relationship between building mass and scale. This chapter has been prepared in accordance with Government Code Section 65456 et seq. and the City of Riverside Municipal Code, Title 19, Zoning Code. In cases where development standards set forth in this Specific Plan are in consistent with the Zoning Code, the standards in this Specific Plan shall prevail.

7.1 PERMITTED USES

This Specific Plan provides for the development of several uses within the RCH Specific Plan Area. Those uses expressly allowed are as follows:

- Acute care services
- Administrative services
- Central utility plants
- Community centers
- Dental clinics
- Education centers
- Imaging centers
- Medical office buildings and clinics
- Medical retail (medical supplies)
- Outpatient service buildings
- Pharmacies
- Physical therapy or rehabilitation centers

- Wellness centers
- Women's services
- Off-site street parking, parking structures, or parking lots
- Optometry services
- Parking Structures (associated with a permitted use)
- Offices
- Other uses not listed herein, which are determined by the Community Development Director or his/her designee to be similar to those listed.



7.2 CONDITIONALLY PERMITTED USES

The following use is permitted in the RCH Specific Plan Area with a Minor Conditional Use Permit:

- Hotel facilities
- Stealth Wireless Telecommunication Facility, pursuant to the requirements of the Zoning Code.

The following use is permitted in the RCH Specific Plan Area with a Conditional Use Permit:

• Wireless Telecommunication Facility, pursuant to the requirements of the Zoning Code.

7.3 PROHIBITED USES

The following uses are prohibited in the RCH Specific Plan Area:

- Car wash
- Drive-thru establishments
- Service stations (gas station and minor repairs)
- Vehicle repair shops and parts stores
- Vehicle sales and rentals
- Any use not specifically authorized.

7.4 **DEFINITIONS**

Definitions within the RCH Specific Plan shall be the same as in Chapter 19.910 of the City of Riverside Municipal Code.

7.5 SITE DEVELOPMENT STANDARDS

7.5.1 General Development Standards

The following development standards listed in Table 7-1 and Table 7-2 shall apply throughout the RCH Specific Plan Area. In order to create development standards that are sensitive to adjacent uses, the RCH Specific Plan contains variable setbacks and stepped building height standards. Figure 7-1, Building Height Stepped Design Setbacks and Diagrams 7-1 through Diagram 7-6 illustrate setbacks and stepped building heights along the perimeter of the RCH Specific Plan Area. As indicated in the City's Zoning Code, a setback is defined as the distance from a defined point or line governing the placement of buildings, structures, parking or uses



on a lot. For purposes of this Specific Plan, the building height stepped design setback is defined as the point or line at which the building height may increase in order to achieve a stepped design.

Table 7-1 General Development Standards

Standards	Interior Parcels	Parcels Along 14th Street	Parcels Along Magnolia Avenue	Parcels Along Brockton Avenue	Parcels Along Tequesquite Avenue
Floor Area Ratio	4.0	4.0	4.0	4.0	3.0
Maximum Building Height	190 feet	45 feet -190 feet1	45 feet -190 feet ²	45 feet - 100 feet3	100 feet
Building Height Stepped Design Setback	N/A	55 feet - 80 feet ¹	80 feet ²	100 feet ³	N/A
Front Yard Setback4	15 feet	15 feet - 40 feet ¹	40 feet ²	15 feet ³	15 feet
Rear Yard Setback	15 feet	15 feet	15 feet	15 feet	15 feet
Interior Side Yard Setback	15 feet	15 feet	15 feet	15 feet	15 feet

Notes:

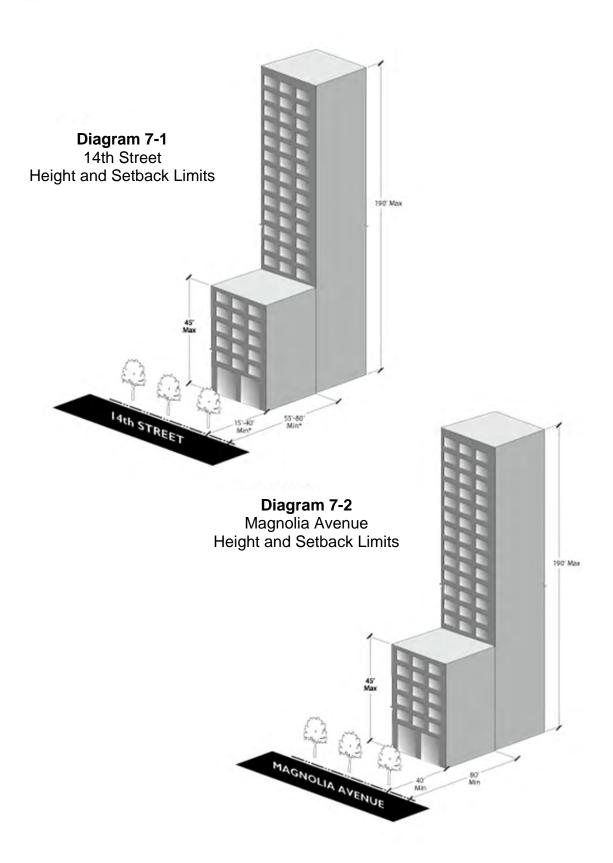
- Parcels with frontage on 14th Street- The maximum building height is 45 feet at the front yard setback (ranging from 15 feet to 40 feet) and 190 feet at the building height stepped design setback (ranging from 55 feet to 80 feet); see Figure 7-1, Building Height Stepped Design Setbacks for a plan view and Diagram 7-1, 14th Street Height and Setback Limits for details.
- Parcels with frontage on Magnolia Avenue- The maximum building height is 45 feet at the front yard setback (40 feet) and 190 feet at the building height stepped design setback (80 feet); see Figure 7-1, Building Height Stepped Design Setbacks for a plan view and Diagram 7-2, Magnolia Avenue Height and Setback Limits for details.
- Parcels with frontage on Brockton Avenue- The maximum building height is 45 feet at the front yard setback (15 feet) and 100 feet at the building height stepped design setback (100 feet); see Figure 7-1, Building Height Stepped Design Setbacks for a plan view and Diagram 7-3, Brockton Avenue Height and Setback Limits for details.
- The front yard setback area shall be landscaped or improved pursuant to the design standards set forth in Table 7-2 and Chapter 8.0 of this Specific Plan. If the future building at the corner of Magnolia Avenue and Fourteenth Street has a direct frontage on the palm grove landscape setback indicated in Table 7-2, then the building will be designed to step down to one story at the edge of the palm grove.

Table 7-2
Exceptions to General Development Standards

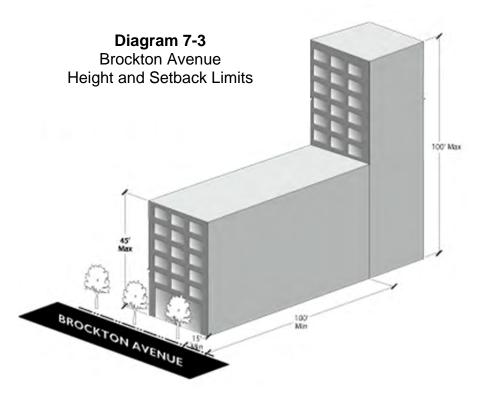
Exceptions	
Community Players Theatre	For development adjacent to the Community Players Theatre, the maximum building height is 45 feet at the front yard setback (ranging from 15 feet to 50 feet) and 100 feet at the building stepped design setback (ranging from 55 feet to 85 feet); see Figure 7-1, Building Height Stepped Design Setbacks for a plan view and Diagram 7-4, Community Players Theatre Height and Setback Limits for details.
Calvary Presbyterian Church	For development adjacent to the Community Players Theatre, the maximum building height is 45 feet at the front yard setback (15 feet) and 190 feet at the building stepped design setback (ranging from 15 feet to 55 feet); see Figure 7-1, Building Height Stepped Design Setbacks for a plan view and Diagram 7-5, Calvary Presbyterian Church Height and Setback Limits for details.
J. Harrison Wright Palm Grove	Development adjacent to the J. Harrison Wright Palm Grove shall provide a minimum landscape setback of 14 feet from the property line to preserve the palm grove to the largest extent possible; see Diagram 7-6, J. Harrison Wright Palm Grove Height and Setback Limits. If necessary for the efficiency of the design of the building that replaces Building A, a small number of palms may be relocated within the defined setback area.

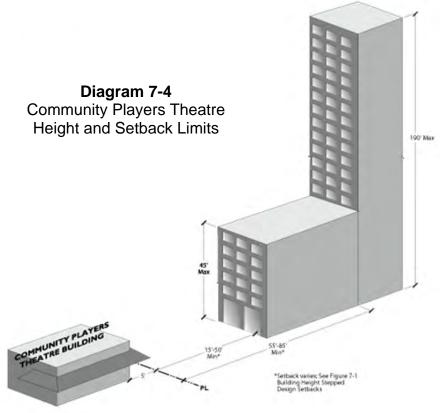
Riverside Community Hospital Specific Plan



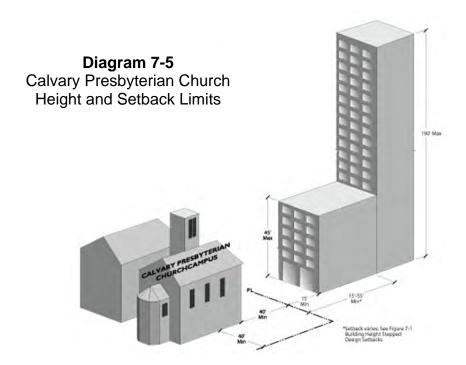


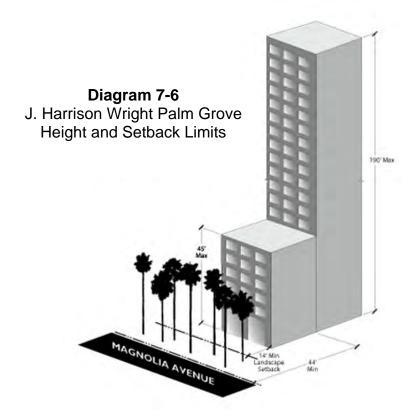














7.5.2 Fences and Walls

- a. Any and all fencing and walls shall conform to the requirements of Chapter 19.550 of the City of Riverside Municipal Code.
- b. Equipment enclosures and/or landscaping shall be used to screen views of ground mounted utility boxes and mechanical equipment. To the maximum extent feasible, utility and mechanical equipment should be located to the rear of buildings rather than along public sidewalks.
- c. Any area used for storage or equipment shall be visually screened and buffered in accordance with Chapter 19.555 of the City of Riverside Municipal Code, which require solid masonry walls or similar permanent structures to screen from view on all sides.
- d. All trash/recyclable collection enclosure areas shall comply with the development standards set forth in the City of Riverside Trash Enclosure Policies, in accordance with Chapter 19.554 of the City of Riverside Municipal Code, which requires at a minimum that the collection area to be enclosed on 3 sides by a minimum 6-foot-tall decorative masonry wall. Screening shall be architecturally compatible with other on-site development in color, material, and style.

7.5.3 Parking

a. Parking for the RCH Specific Plan shall be provided in accordance with the following requirements as outlined in Table 7-3:

Table 7-3
Parking Requirements for RCH Specific Plan

Land Use	Parking Requirements	
Medical Office Building	1 space per 180 square feet of floor area	
Hospital	1 space per bed	
Clinical	1 space per 250 square feet	

- b. Please refer to the Zoning Code for parking requirements for any other uses not specifically listed in Table 7-3.
- c. The future parking structure or parking lot along Magnolia Avenue shall be designed to meet the following requirements and standard safety guidelines.
 - i. Parking requirements for future expansion of the RCH Specific Plan shall be based on an actual parking demand prepared by RCH.



- ii. Should future expansion include a parking structure, a parking structure with a two-way traffic flow is recommended.
- iii. Parking structure parking ramp slope shall be 5% or less.
- iv. Parking structures shall have vehicle entrances that are visible and easily identifiable.
- v. Parking structure entrances and exits shall have clear lines of sight.
- vi. Gates shall be located far enough away from the street to allow at least one vehicle behind the vehicle in the service position (at a ticket dispenser, card reader, or cashier booth) without blocking the sidewalk.
- vii. Entry and exit areas that have parking control equipment shall have a maximum 3% slope.
- viii. The appropriate number of entry and exit lanes shall be provided to meet projected peak traffic volumes.
 - ix. In accordance with the Americans with Disabilities Act (ADA), parking for disabled persons shall be provided.
 - x. In accordance with Title 24 of the California Building Code, handicapped parking spaces shall be provided and located as close to the buildings as is feasible.
 - xi. All parking spaces shall be 9 feet wide by 18 feet long. A minimum width of 24 feet shall be provided for two-way drive aisles of parking areas.





7.5.4 Signage

The following signage standards are intended to ensure design consistency and maintain a high quality of design and aesthetics with respect to signage. In cases where there is a conflict between the signage standards of the Zoning Code and those of the Specific Plan,



the standards in the Specific Plan shall prevail. Refer to the Zoning Code for signs not specified in the Specific Plan.

Building Signs

- a. For each occupancy or use, one building sign per building frontage shall be located on and directly parallel to a building wall, canopy fascia, or roof directly abutting the use of occupancy being identified and directly facing a parking lot/structure, street, driveway, or pedestrian pathway. The total of such signs shall not be greater than 1 square foot of sign per lineal foot of frontage of lease space or building, and shall not exceed a total of 200 square feet.
- b. Building signs shall not be mounted above the main roof line of the building. Roof-mounted signs are prohibited.
- c. Building-mounted primary branding signs shall be allowed on the primary hospital tower. For buildings seven to ten stories in height, building-mounted primary branding signs shall be situated at or above the top floor of the tower. The total are of such signs shall not be greater than 1 square foot of sign per lineal foot of frontage of lease space or building, and shall not exceed a total of 200 square feet.
- d. Building-mounted street address signs shall be allowed as necessary to direct persons to specific functions with separate exterior entrances. Such signs shall not exceed 12 square feet in area and shall be situated directly above or to the side of the entrance being identified.
- e. Building-mounted entrance signs shall be allowed as necessary to direct persons to specific functions with separate exterior entrances. Such signs shall not exceed 12 square feet in area and shall be situated directly above or to the side of the entrance being identified.



Building-Mounted Primary Branding Sign 4505

Building-Mounted Street
Address Sign



Building-Mounted Entrance Sign



Monument Signs

a. Monument signs along the perimeter of the RCH Specific Plan Area shall adhere to the requirements in Table 7-4:

Table 7-4
Monument Signage Requirements for RCH Specific Plan

Street	Maximum No. of Signs	Minimum Spacing Between Signs
Magnolia Street	2	100 feet
14th Street	2	100 feet
Brockton Street	3	100 feet

- b. All monument signs shall be located so as to be directed toward a parking lot/structure, street, driveway, or pedestrian pathway.
- c. Primary entrance/directional signs, not exceeding 75 square feet in area per display face without LED board, 100 square feet in area per display face with LED board, and 12 feet in overall height, shall be permitted at main entries into the RCH Specific Plan Area. These signs shall be 2-sided and shall not exceed 8 lines of directional copy per display face; see images below.
- d. Secondary entrance/directional signs, not exceeding 60 square feet in area per display face and 9 feet in overall height, shall be permitted at each entrance to or exit from buildings and parking areas. These shall be 2-sided and shall not exceed 5 lines of directional copy per display face; see images below.
- e. Tertiary entrance/directional signs, not exceeding 30 square feet in area per display face and 6 feet in overall height, shall be permitted in interior areas of the RCH Specific Plan Area. These signs shall be 2-sided and shall not exceed 4 lines of directional copy per display face; see images below.



Primary
Entrance/Directional Sign
without LED Board*



Primary Entrance/Directional Sign with LED Board*



Secondary Entrance/Directional Sign*



Tertiary Entrance/Directional Sign*

^{*} These images are for illustrative purposes only.



Fire and Safety Signage

a. Proper notification systems, lighting, and signage shall be provided to facilitate safe and speedy evacuations during an emergency. This can be accomplished with proper fire alarm wiring, pull stations, strobes, annunciators, and exit signage.

7.5.5 Grading

Grading for the new facilities will be minor and will consist of some demolition, precise grading of the site of planned structures (which will be detailed at the site plan level of plan review once final architecture has been designed), and placement of foundations for proposed new structures.

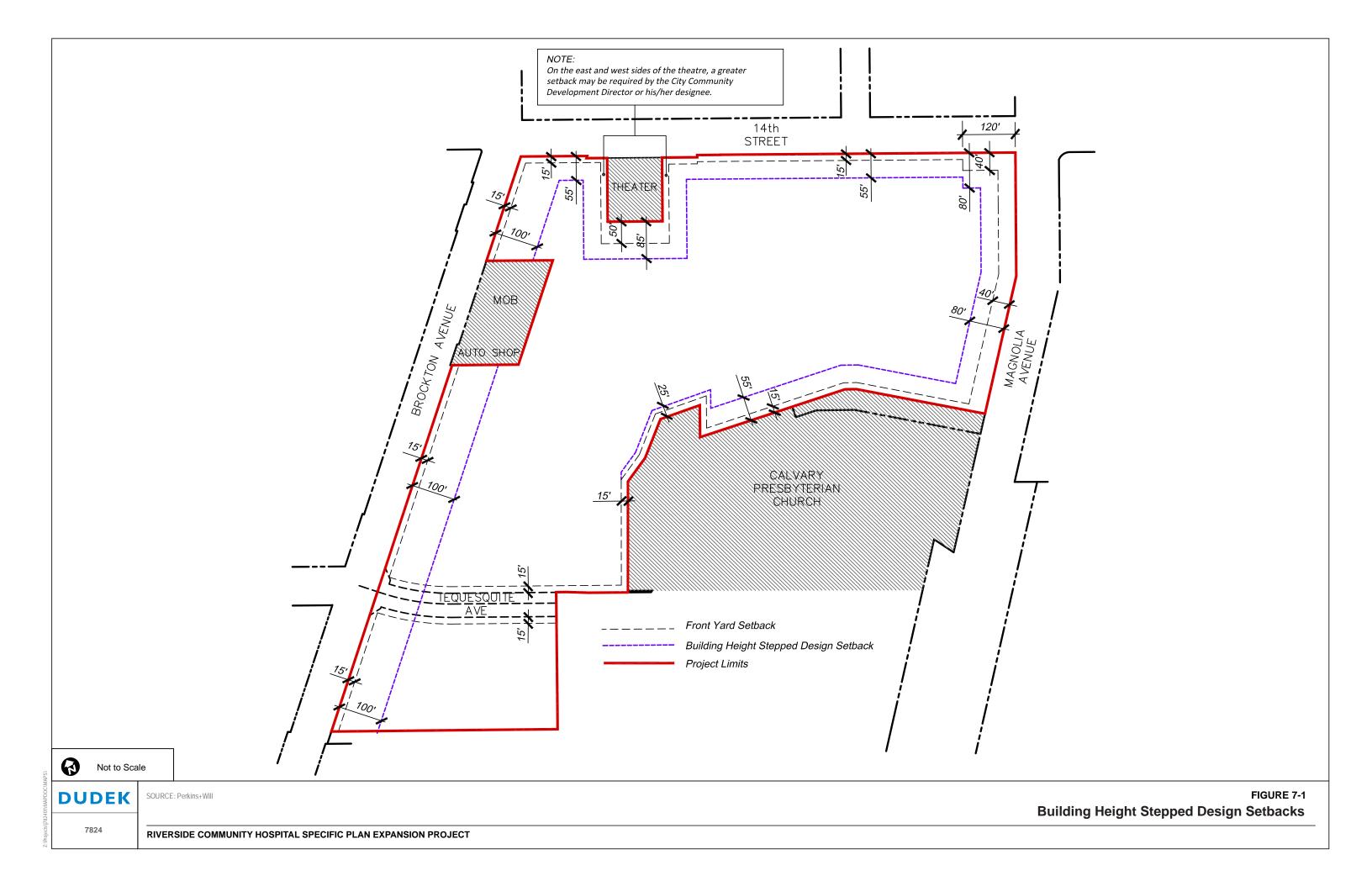
- a. Areas both inside and out should have grades that are flat enough to allow easy movement and sidewalks and corridors shall be wide enough to allow two wheelchairs to pass easily.
- b. Prior to issuance of a building permit for any of the proposed structures, an Administrative Design Review approval shall be required per Zoning Code Chapter 19.710, including a precise grading plan.

7.6 MODIFICATIONS TO THE DEVELOPMENT STANDARDS

A significant deviation in the development standards may be allowed only by action of the City Community Development Director or his/her designee. Modifications may be granted only if the following findings can be made:

- The modification(s) is/are necessary to properly implement a physically and economically viable project; and
- The modification(s) would comply with the goals of the RCH Specific Plan.







Riverside Community Hospital Specific Plan



8.0 DESIGN GUIDELINES

This chapter provides the general design criteria for the development of the Riverside Community Hospital (RCH) Specific Plan. The design guidelines are intended to establish the overall vision of the RCH Specific Plan, encourage the highest level of design quality, and assure compatibility between adjacent uses. This chapter establishes architectural and landscape design guidelines to be used by developers, builders, engineers, architects, and landscape architects in their preparation of plans for the development and implementation of the RCH Specific Plan.

8.1 SITE PLANNING

- a. New buildings and parking areas should be sited in a manner compatible with surrounding development and should relate to the surrounding built environment.
- b. Buildings, parking areas, and circulation should enhance appropriate linkages between internal project buildings, as well as between the project and the surrounding development, including pedestrian walkways and plaza areas.
- c. Buildings should be arranged to create opportunities for open space amenities (e.g., plazas, courtyards, outdoor eating areas), consistent with the existing hospital configuration.
- d. Loading, emergency vehicle access, delivery service areas, outdoor storage and standalone mechanical facilities should be located and designed to minimize their visibility, circulation conflicts, and adverse noise impacts. Sound attenuation and screening walls should be used as necessary where required by the City of Riverside Municipal Code or the project's Environmental Impact Report.
- e. The mass and scale of new buildings should be compatible with the existing, adjacent structures. This can be accomplished by transitioning from the height of adjacent buildings to the tallest elements of the new building, stepping back the upper portions of taller buildings, and incorporating human scale elements, such as pedestrian-scale doors, windows, and building materials on the ground floor.
- f. Parking lot design shall be consistent with the standards established in Chapter 19.580 of the City's Zoning Code and Citywide Design Guidelines and Sign Guidelines.

8.2 ACCESS AND PARKING

- a. Entry driveways should be clearly demarcated, visible, and accessible from the street and/or pedestrian corridors (e.g., enhanced paving, prominent landscape features, low-level decorative walls, and well-designed monument type signs).
- b. Service and loading areas should take access from shared access points.
- c. Parking structures adjacent to and visible from public streets should be appropriately screened to minimize undesirable visual impacts.

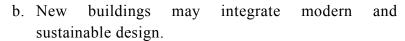


- d. Surface parking areas should be divided through the use of canopy trees and landscape improvements located throughout to reduce the heat island effect.
- e. Parking lot design shall include water quality stormwater facilities consistent with City of Riverside standards and the Final Water Quality Management Plan prepared for each phase.
- f. Parking lots and structures should accommodate elderly and disabled drivers and passengers.

8.3 ARCHITECTURE

8.3.1 Architectural Style

- a. The architectural style of new buildings should consider compatibility with the existing buildings and the surrounding environment. The RCH Specific Plan Area currently has a number of different buildings with varying styles which were constructed throughout the twentieth century, such as contemporary wings dating to
 - the 1960s, a Spanish-style hospital wing, a contemporary building called Raincross Medical Group, and a variety of low-rise medical office buildings and hospital-related facilities.



- c. New buildings, replacing Building A, at the corner of Magnolia Avenue and 14th Street shall incorporate a building edge or building-like edge adjacent to the palm grove. A building-like edge could consist of an arcade type structure similar in concept to that used along the Market Street frontage, between 3rd and 4th Streets.
- d. Facades should be "divided" by vertical and horizontal variations in wall planes, building projections, door and window bays, and similar elements. Building articulation should be present on the side and rear walls of the building.



Phase I Hospital Bed Tower Rendering



Medical Office Building Rendering



Parking Structure Rendering

e. Unique architectural elements, where provided, should be positioned to be included in key views of newly constructed buildings and structures, including parking structures, signage, and outdoor furniture and seating areas.



8.3.2 Orientation

- a. The orientation of the newly constructed buildings should facilitate and encourage pedestrian activity and convey a visual link to the internal road system.
- b. Building orientation should take into consideration the site's characteristics, surrounding adjacent uses, and the location of major access points.

8.3.3 Height, Mass, and Scale

- a. The massing and scale of the buildings should respect the visual and physical relationship of adjacent buildings.
- b. Distinct architectural elements should divide and articulate all newly constructed building facades, in order to soften the scale and mass of buildings.
- c. Changes in height, horizontal plane, materials, patterns, and colors should be used to reduce building scale and mass.
- d. All visible building elevations, whether front, side, or rear, should provide 360-degree architecture.
- e. Primary building entries should be easily identified through the use of prominent architectural elements; signage, landscaping, lighting, canopies, roof form, and hardscape; architectural projections, columns, vertical elements; and other design features that help emphasize a building's entry.

8.3.4 Roofing

- a. Roofs should be designed as an integral component of building form, mass, and facade. Building form should be enhanced by varying and offset roof planes, eave heights, and rooflines.
- b. Cool roofing materials (e.g., reflective low-heat retention tiles and light-colored membranes and coatings) are encouraged to reduce heat buildup.

8.3.5 Color and Materials

- a. Colors, exterior materials, and architectural details should be consistent and complementary throughout the RCH Specific Plan Area.
- b. Building exterior materials should be durable and resistant to damage, defacing, and general wear and tear.



- c. Acceptable building materials may include natural and cast stone, metal, stucco (or exterior insulation finishing system), glass, masonry, concrete and/or other contemporary composites; see Figures 8-1 through 8-4, Acceptable Building Exterior Materials and Finishes.
- d. Unacceptable building materials are depicted in Figure 8-5, Unacceptable Building Exterior Materials and Finishes.
- e. Building materials should generally support wellness. Use of sustainable materials and local resources (e.g., locally available, high recycled-content, reused, obtained from renewable sources, containing low volatile organic compound (VOC) levels, and high performance glazing units with low emissivity coatings) is highly encouraged.

8.3.6 Window Treatments

- a. Louvers, sun shades and canopies are allowed on the ground floor and upper floors of all building types; see Figure 8-3, Acceptable Building Exterior Materials and Finishes.
- b. Both horizontal and vertical sunshades are encouraged to reduce internal temperatures during hot summer months.
- c. Louvers, sun shades and canopies may extend over sidewalks, pedestrian plazas, and public spaces.

8.3.7 Screening and Mechanical Equipment

- a. All screening devices should be compatible with the architecture, materials, and colors of the building.
- b. Plant facilities, loading, and service areas should be screened from public view from all on-site and off-site vantage points, visibly separated from all public entrances and parking areas.
- c. Utility and mechanical equipment should be screened from view of public streets and nearby buildings with landscaping and/or architectural elements.
- d. Rooftop-mounted equipment visible from the surrounding area or adjacent buildings must be completely screened. Refer to Chapter 19.555 of the Zoning Code. Where rooftop equipment is visible from higher buildings, it should be painted to match the roof color.



8.3.8 Parking Structures

- a. Parking garages should be designed to help reduce the mass and scale of the garage and to ensure their compatibility with surrounding uses.
- b. View of vehicles in the garage should be concealed through a combination of screen walls and plantings while providing adequate visibility for security purposes.
- c. The garage's exterior elevations should be designed to avoid a monolithic appearance. This can be accomplished through a menu of options as follows:
 - i. Minimize horizontal and vertical banding by balancing both horizontal and vertical elements.
 - ii. Use simple, clean geometric forms, and coordinated massing.
 - iii. Size openings in the parking garage to resemble large windows as in an office building.
 - iv. Use masonry materials that are predominantly light in color, but avoid unpainted concrete masonry units.
 - v. Avoid a sloping ramp appearance by providing level and uniform spandrels.
 - vi. Visually define and differentiate between pedestrian and vehicular entrances through appropriate architectural detailing.

8.3.9 Security and Lighting

- a. Lighting should be design in accordance with Figure 8-6, Phase I Lighting Plan (Future expansion shall develop a similar, consistent lighting plan.
- b. All lights shall be directed, oriented, and shielded to prevent light from shining onto adjacent properties, onto public rights-of-way, and into driveway areas in a manner that would obstruct drivers' vision, in accordance with Chapter 19.556 of the City of Riverside Municipal Code.
- c. The design of parking structures should minimize possible hiding places and openings that could allow random pedestrian access.
- d. As much openness as possible is provided in the design to improve sight lines, eliminate hiding places, and enhance perceived security.
- e. For security reasons, at least one side of the stair tower should include an opening running vertically the height of the tower.
- f. The use of security cameras is encouraged.



- g. A minimum of 5-foot candles of illumination should be provided inside the parking structure. Higher levels are recommended for remote areas subject to security problems such as stairways, elevators, and other pedestrian access points.
- h. Lighting levels should be equally distributed to provide uniform illumination over all parking areas.
- i. Light sources should be shielded so that the source of the illumination is not seen from outside the structure.
- j. Lighting shall be shielded downward to prevent spillage on to the adjacent uses and public right-of-way.

8.3.10 Signage

The following signage design guidelines should be implemented; refer to Section 7.5.4, Signage, for applicable development standards.

- a. Signage should be located at primary and secondary arrival zones into the RCH Specific Plan and should be used to identify the RCH Specific Plan Area and/or its significant components.
- b. Several major identification opportunities exist along the perimeter of the RCH Specific Plan Area that should be used to elevate the visual presence of the campus.
- c. Contemporary designs that are complementary to the building's architecture should be encouraged.
- d. Signage should be an accent to the building's architecture and may include metal, stone, or other materials used in the building architecture.
- e. Signage should be proportional to the building.



8.4 LANDSCAPE GUIDELINES

A Conceptual Landscape Plan will be required as a part of Administrative Design Review. The following general landscape guidelines should be implemented.

- a. Landscaping should complement the architecture, hardscape features, and existing landscape.
- b. Landscaping should be used to create screens and buffers for parking areas, storage areas, and trash/recyclable collection enclosures, where appropriate. Landscaping may also be used to soften the appearance of buildings and screen undesirable views from the public and surrounding uses.
- c. Landscape should generally incorporate plantings using a three-tiered system consisting of trees, shrubs, and groundcover; refer to Figures 8-7, Landscape Plant Palette–Medical Office Building and Figure 8-8, Landscape Plant Palette–Parking Garage for examples.
- d. Landscaping should be in scale with the adjacent buildings and be appropriate sized at maturity.
- e. Pedestrian scale plantings should prevail in courtyards and walkways. Larger scale plantings should be used along street setbacks and vehicular entrances.
- f. Plantings in courtyards should be at a pedestrian scale, accenting and complementing building architecture.
- g. Landscaping shall be consistent with the City's Water Efficient Landscaping Ordinance. Refer to Chapter 19.570 of the Zoning Code.
- h. Drought-resistant and/or tolerant plants which have an attractive appearance without formal pruning should be selected. Examples of shrub forms include heavenly bamboo (Nandina domestica), Oregon grape (Mahonia aquifolium), lily of the Nile (Agapanthus spp.), and India hawthorn (Rhaphiolepis indica). Examples of trees include western sycamore (Plantanus racemosa), coast live oak (Quercus agrifolia), ginkgo (Ginkgo biloba), and lemon scented eucalyptus (Eucalyptus citriodora).











- i. Bio retention areas can be used to detail run-off in vegetated swales, raised open-bottom planters, or the like.
- j. Paved areas can draw from a broad range of materials, designs, and finishes that are complementary to the building architecture. Pavers and concrete finishes are encouraged in pedestrian areas.
- k. Decorative hardscape is highly encouraged to delineate pedestrian paths of travel and enhance gathering areas.



STONE: NATURAL STONE



STONE: CAST STONE



EIFS / STUCCO



EIFS / STUCCO

DUDEK

SOURCE: Perkins + Will (August 2013)

FIGURE 8-1 Acceptable Building Exterior Materials and Finishes

7824





METAL PANELS

METAL PANELS





GLAZING

DUDEK

SOURCE: Perkins + Will (August 2013)

FIGURE 8-2 Acceptable Building Exterior Materials and Finishes

7824

RIVERSIDE COMMUNITY HOSPITAL SPECIFIC PLAN







LOUVERS/ SUN SHADES/ CANOPIES





MASONRY

DUDEK

SOURCE: Perkins + Will (August 2013)

FIGURE 8-3 Acceptable Building Exterior Materials and Finishes

7824

RIVERSIDE COMMUNITY HOSPITAL SPECIFIC PLAN





CONCRETE - SMOOTH



CAST STONE (SMOOTH)



CONCRETE - TEXTURE/ PRECAST



DUDEK

SOURCE: Perkins + Will (August 2013)

FIGURE 8-4 Acceptable Building Exterior Materials and Finishes

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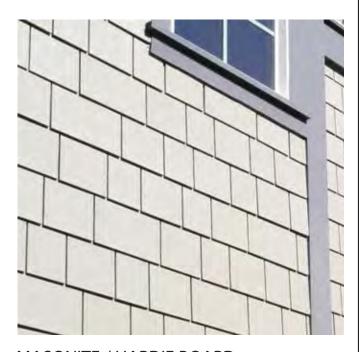
RIVERSIDE COMMUNITY HOSPITAL SPECIFIC PLAN







VINYL SIDING



MASONITE / HARDIE BOARD

DUDEK

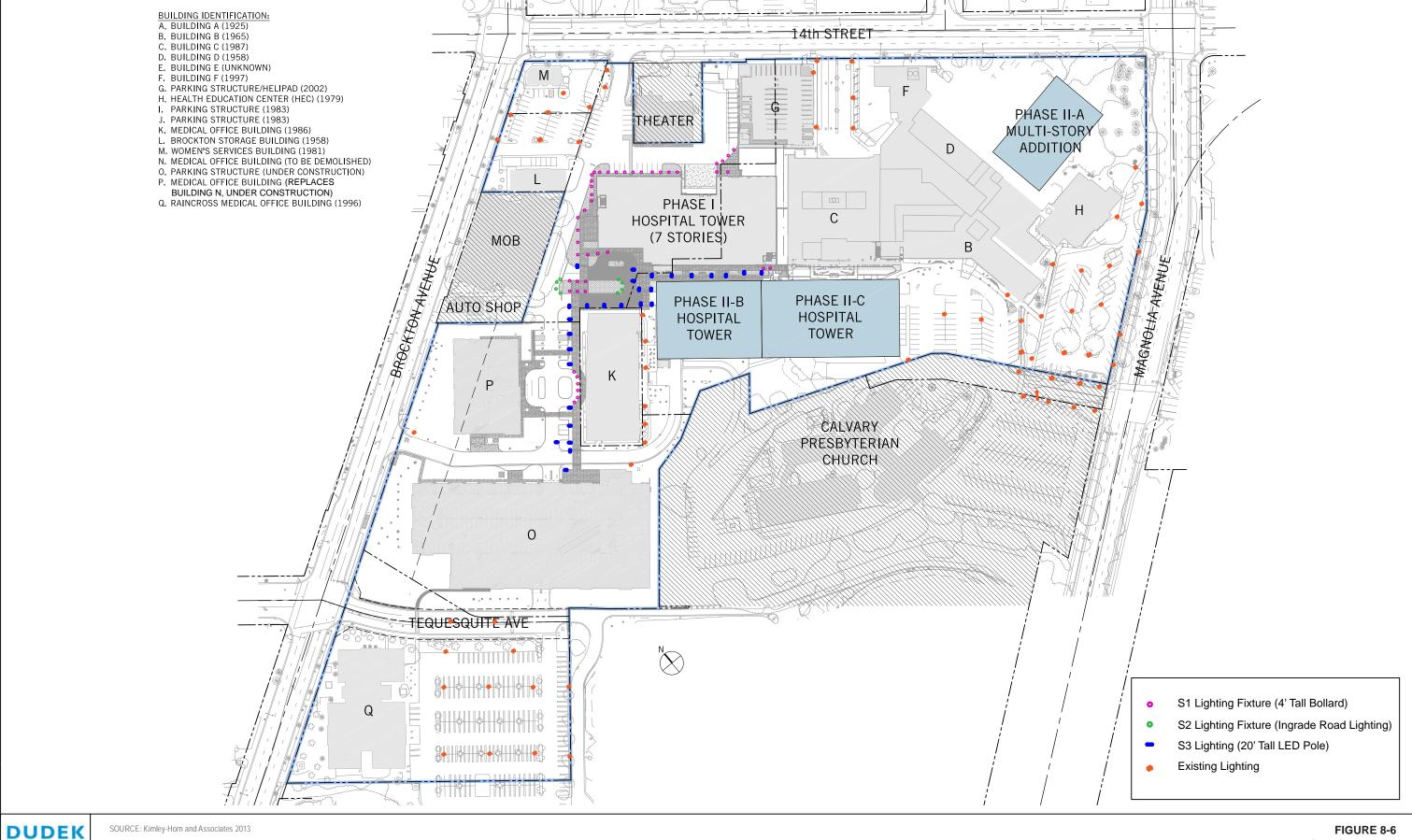
SOURCE: Perkins + Will (August 2013)

FIGURE 8-5 Unacceptable Building Exterior Materials and Finishes

7824

RIVERSIDE COMMUNITY HOSPITAL SPECIFIC PLAN





7824

RIVERSIDE COMMUNITY HOSPITAL SPECIFIC PLAN

FIGURE 8-6 **Lighting Plan**



Riverside Community Hospital Specific Plan

DUDEK

FIGURE 8-7
Landscape Palette- Medical Office Building



Riverside Community Hospital Specific Plan

TREES



GROUNDCOVER



SHRUBS



DUDEK

SOURCE: Perkins+Will 10/31/2012

FIGURE 8-8
Landscape Palette- Parking Garage



Riverside Community Hospital Specific Plan



9.0 IMPLEMENTATION

This section includes mechanisms to implement the objectives and recommendations presented in the RCH Specific Plan

9.1 SPECIFIC PLAN MODIFICATIONS AND AMENDMENTS

Development proposals within this Specific Plan Area shall be deemed consistent if proposals meet the standards within this Specific Plan.

9.1.1 Substantial Conformance and Minor Modifications

Minor modifications to the RCH Specific Plan shall not require a Specific Plan Amendment, and shall be subject to a "substantial conformance" determination, an administrative mechanism by which minor modifications to the Specific Plan which do not result in significant impacts and are consistent with the intent of the Specific Plan shall be permitted without a formal amendment process. The City of Riverside shall make determinations of substantial conformance.

Minor modifications that meet the above "substantial conformance" determination may include, but are not limited to, modifications necessary to comply with final Conditions of Approval or modifications affecting infrastructure, public services and facilities, landscape, and other issues except those affecting project development standards. The following minor modifications to the RCH Specific Plan shall not require a Specific Plan Amendment, and shall be subject to the substantial conformance determination procedure set forth above:

- Change in utility and/or public service provider or location;
- Change in internal driveway alignment, width, or improvements subject to approval by the city engineer;
- A bed count transfer, as long as the number of licensed beds as identified in the land use plan is not exceeded;
- Minor changes to landscape or entry design which are consistent with the design criteria set forth in Chapter 7.0, Development Standards, and Chapter 8.0, Design Guidelines, of this Specific Plan;
- Minor changes to the architectural or landscape design guidelines, which are intended to be conceptual in nature and flexible in implementation;
- Minor site location adjustments to proposed buildings/structures
- Modification of any design element in this Specific Plan that improves circulation, reduces grading, improves drainage, or improves infrastructure; and
- Refinements to Specific Plan language which increase clarity and do not change policy intent.



The Minor Modifications described and listed above are not comprehensive. Any Minor Modification that is deemed by the Community Development Director to be in substantial conformance with the purpose and intent of the Specific Plan shall be permitted.

9.1.2 Amendments

Development proposals that do not meet the above Specific Plan consistency requirements, or that are not found to be in substantial conformance with the Specific Plan, shall require a Specific Plan Amendment. The applicant may request amendments to the Specific Plan at any time pursuant to Section 65453(a) of the Government Code and Chapter 19.820 of the Zoning Code – Specific Plan/Specific Plan Amendments.

An amendment to the Specific Plan will require review and approval by the City of Riverside Planning Commission and City Council using the same procedures under which it was adopted as specified in Chapter 19.820 of the Zoning Code – Specific Plan/Specific Plan Amendments. Such amendments require an application and fee to be submitted to the City Planning Division, stating in detail the reasons for the proposed amendment. The Specific Plan may be amended as often as deemed necessary, in compliance with state law.

In the event the proposed amendment requires supplemental environmental analysis pursuant to the California Environmental Quality Act (CEQA), the applicant(s) will be responsible for associated fees for the preparation of necessary CEQA documentation.

9.2 ENVIRONMENTAL IMPACT REPORT AND MITIGATION MONITORING PROGRAM

The RCH Specific Plan has been prepared in conjunction with an Environmental Impact Report (EIR) (State Clearinghouse No. 2013071102), which identifies potential impacts resulting from the proposed development. The EIR, as well as a Mitigation Monitoring and Reporting Program (MMRP), were considered concurrently with this Specific Plan by the City of Riverside. The MMRP is located in Appendix C of this Specific Plan.

The EIR serves as the environmental clearance document for the RCH Specific Plan and all future development undertaken within the RCH Specific Plan Area. Future development projects that require discretionary review and are in conformance with this plan shall only be reviewed for potential environmental impacts that were not considered as part of the approval of the plan.



9.3 SUBSEQUENT ENTITLEMENTS

9.3.1 Design Review

The land use plans within this Specific Plan identify at a conceptual level the intended location and footprint of the uses proposed within the RCH Specific Plan Area. Prior to issuance of a building permit for any structure or improvement within the RCH Specific Plan Area, a site plan must be submitted for administrative Design Review by the City in accordance with Chapter 19.710 of the Zoning Code except as noted herein. An Administrative Design Review for each phase is required.

The purpose of the Design Review procedure is to enable the Zoning Administrator to check future development projects for conformity with the provisions of the Specific Plan and Zoning Code and to allow the Zoning Administrator to impose conditions on the development projects as necessary to bring it into conformity with the General Plan, surrounding development, and City policies and regulations with respect to on-site and offsite dedications and improvements.

Design Review shall be conducted by comparing the project to applicable Specific Plan development standards, design guidelines, and other applicable City ordinances. A Design Review application shall be submitted in accordance with Chapter 19.710 of the City of Riverside Zoning Code. Typical items associated with the submittal of a Design Review application consist of the following:

- Plot Plan;
- Landscape and Irrigation Plan;
- Grading plans (new construction only);
- Architectural drawings, renderings or sketches; and
- Scale drawings of all signs.

These items may be subject to change and should be confirmed with City of Riverside Planning Staff prior to document preparation and application submittal. Upon submittal of the above-listed items, the Design Review application shall be reviewed and approved, with or without conditions.

9.3.2 Minor Conditional Use Permits

Minor Conditional Use Permits (Minor CUPs) shall be required for uses typically having unusual site development features or operating characteristics requiring special consideration so that they



may be designed, located, and operated compatibly with uses on adjoining properties and in the surrounding area. Minor CUPs shall be required for such uses specified in Chapter 7.0, Development Standards, of this Specific Plan as requiring a Minor CUP and shall be processed as specified under Chapter 19.730 of the Zoning Code – Minor Conditional Use Permit. The conditions attached to Minor CUPs may include such provisions concerning use, height, area, yards, open spaces, setbacks, parking, loading, signs, improvements, general character, appearance, time limits, revocation dates, and other conditions necessary to comply with the findings listed in Chapter 19.730.040 of the Zoning Code – Required Findings, and all applicable site location, operation, and development standards.

9.3.3 State Review

Prior to the construction and operation of a hospital facility, review and approval is required at the state level from the Office of State Health Planning and Development (OSHPD) and Department of Health Services (DHS). This is part of the approval and licensing process for hospitals and is outside of the purview of the City of Riverside. Buildings requiring OSHPD review include the existing hospital building when it is reconfigured and the two planned hospital/patient care buildings.

9.4 APPEALS

An appeal from any determination, decision, or requirement of the City Community Development Director or his/her designee or the Planning Commission shall be made in conformance to the appeal procedures established by the City of Riverside Zoning Code, Chapter 19.680 – Appeals

9.5 REQUIRED DISCRETIONARY APPLICATIONS FOR SPECIFIC PLAN IMPLEMENTATION

Implementation of the RCH Specific Plan will require permits or other forms of approval from public agencies or other entities prior to construction, as follows.

1. City of Riverside

Adoption of General Plan Amendment (P13-0208), Rezone (P13-0209), Site Plan Review (P13-0210), Specific Plan Amendment (P13-0211), and EIR (P13-0207), and other discretionary actions shall be reviewed and/or approved by planning staff, the City Planning Commission, and/or the City Council.



2. Regional Water Quality Control Board (RWQCB)

- National Pollutant Discharge Elimination System general construction permits will be required since the grading activities are larger than 1 acre.
- Approval of the Stormwater Pollution Prevention Plan (SWPPP) for any applicable requirements related to fill materials.
- A report of waste discharge shall be submitted to the RWQCB to obtain either a waste discharge requirement or a waiver for any impacts to waters of the state.

3. South Coast Air Quality Management District (SCAQMD)

- A fugitive dust control plan submitted to the SCAQMD for approval will be required prior to issuance of grading permits pursuant to SCAQMD Rule 403.
- Permits to construct from the SCAQMD for stationary sources, such as those proposed to be installed in the Central Plant (e.g., boilers, emergency generators).

9.6 PHASING

Development within the RCH Specific Plan Area is expected to occur in two phases as outlined below; see also Figure 4-1, Land Use Plan-Phase I and Figure 4-2, Land Use Plan-Phase II. Phase II consists of Phase IIa, IIb, and IIc. Additional subphases may be required for construction sequencing. A construction management plan will be prepared as part of the site plan submittal to outline construction staging, as well as provisions for employee parking and parking management during construction.

Phase I – 2014 to 2017

- Demolish existing Medical Office Building N;
- Eliminate 69 parking spaces; and
- Construct a new 251,500-square-foot, 7-story hospital bed tower addition (105 new licensed beds, 35 intensive care patient rooms, and 70 medical and surgical patient rooms).

Phase II – 2017 to 2043

During Phase II, it is anticipated that several new structures would be constructed within the RCH Specific Plan over a 30-year period. Phase II would be divided into Phase IIa, Phase IIb, and Phase IIc.



Phase IIa - 2017 to 2024

Phase IIa is intended to occur between 2017 and 2024 and would consist of:

- Demolition of existing Building A;
- A new 100,000-square-foot mixed-use building on the Building A site;
- Buildout of the shell space (84 additional licensed beds) in the Phase I tower (if not already completed in Phase I); and
- Installation of new surface of structure parking.

Phase IIb - 2024 to 2029

Phase IIb is projected to occur between 2024 and 2029 and would consist of:

- Demolition of existing parking structures (identified as I and J on Figure 2-3, Existing Site Plan);
- A new 9-story, 600,000-square-foot replacement bed tower, totaling 339 licensed beds (273 beds relocated from Building B and 66 beds relocated from Building D to the proposed replacement bed tower after the seismic upgrades are complete under Phase I);
- Once the beds are relocated to the new second hospital bed tower, Building B and Building D will be used for outpatient, skilled nursing, support, and education (e.g., University of California, Riverside, program space); and
- Additional parking, as needed.

Phase IIc - 2030 to 2043

Phase IIc is intended to occur between 2030 and 2043 and is expected to include the following:

- Addition of 38 licensed beds, for a total of 600 licensed beds. (This could occur in Phase IIb if need is demonstrated prior to 2030.)
- Construction of ancillary services as necessary.
- Construction of surface or structured parking as needed to support growth.



Long-range development as part of Phase IIc could include future acute care expansions, parking structures, or other ancillary uses, including, but not limited to, the following:

- Acute care services
- Central utility plants
- Medical office buildings and clinics
- Outpatient service buildings
- Education centers
- Dental clinics
- Imaging centers
- Pharmacies
- Wellness centers
- Physical therapy or rehabilitation centers
- Community centers
- Optometry services
- Medical retail (medical supplies)
- Off-site street parking, parking structures, or surface parking lots
- Hotel facilities (requires a Minor CUP).

9.7 FINANCING

Improvements identified within this Specific Plan are private in nature and will be financed by the project applicant and/or developers within the boundaries of the RCH Specific Plan Area. No public financing is assumed.

