HOSPITAL REPLACEMENT TASK FORCE
Focus Group #2

Meeting of January 21, 2004

PRESENT: Robert Kamei, Elizabeth Robbins, JoAnne Saxe, Pamela DenBesten, Peggy Weintrub, Chris Barton

GUESTS: Mark Wietecha and Amy Knight, Consultants, Kurt Salmon and Associates

Background – Boundary Conditions
• To maintain research preeminence.
• To keep the communities thriving by maintaining a clinical environment.
• There is not enough acreage to allow a complete move to Mission Bay.
• Parnassus must remain viable.
• It is important to realize Parnassus cannot increase in size. Even if the funding was available, there simply isn’t any space for expansion. Therefore, Mission Bay must be built with future expansion in mind because there is the possibility of buying up land at Mission Bay.

New/Possible Developments
• A women and children’s hospital at Mission Bay. This is an enhanced option if SFGH moves to Mission Bay, too.
• An “Adult Short-Stay Facility” which would not have critical care or ED.
• TQR: A tertiary-quaternary Referral Hospital which would also be adults only with no ED.

Open Discussion
• Unless you have a lot to do at each place, working at multiple sites can be very disruptive.
• Mobile faculty must have functional places at all sites (landing pads).
• From a pediatric standpoint, spreading a program around is inefficient. Many times, there are five different instructors teaching the same things at five different locations.
• Also from a pediatric standpoint, while UCSF’s research enterprise makes it competitive with the great pediatric programs in the nation, UCSF’s pediatric program ascend to a higher level without a children’s hospital.
• Will people really want to travel all the way to Mission Bay for care? They might as well go to Oakland or Stanford.
• If the hospital is nice, people will travel to it for care.
• If a hospital is built at Mission Bay, there needs to be a research tower. UCSF deals with its shortage of staff by the efficient movement of people between teaching, research, and practice. Without this ability, we are not able to maintain our world-class reputation.
• In the rush to protect the clinical enterprise, we must not forget teaching. Splintering teaching will defeat the entire idea of UCSF.
• At SFGH, they share a rotation with Stanford. The students drive from Palo Alto and love it. UCSF tries to work with the Stanford schedules and for the most part, it works.

• Those based at SFGH do feel very isolated from the Parnassus campus because it is hard to collaborate on research. The idea of a research tower might alleviate some of that.

• This would be the time to act ambitiously at Mission Bay because there is no real “neighborhood” to interfere.

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