

1 CITY OF ELK GROVE PLANNING COMMISSION MEETING

2 SACRAMENTO COUNTY

3 GEORGE MURPHEY, VICE CHAIR

4 **CERTIFIED COPY**

5  
6 In the Matter of Application for )  
7 CNU Hospital in Elk Grove, )  
8 on behalf of THOMAS LAW GROUP, )  
9 Applicant. )  
10 \_\_\_\_\_ )

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13 ELK GROVE CITY COUNCIL PLANNING COMMISSION MEETING

14 TRANSCRIPT OF PROCEEDINGS

15 Thursday, February 18, 2021

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19 ATKINSON-BAKER, A VERITEXT COMPANY

20 COURT REPORTERS

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24 REPORTED BY: SKYY CHUNG, HEARING REPORTER

25 File No.: AF010A3

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CITY OF ELK GROVE  
PLANNING COMMISSION MEETING  
GEORGE MURPHEY, VICE CHAIR  
  
In the Matter of Application for )  
CNU Hospital in Elk Grove )  
on behalf of THOMAS LAW GROUP, ) Case No.:  
 ) AF010A3  
 )  
Applicant. )  
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TRANSCRIPT OF PROCEEDINGS, taken via  
videoconference, commencing at 6:04 p.m.  
on Thursday, February 18, 2021, heard  
before GEORGE MURPHEY, Commissioner,  
MACKENZIE WIESER, Commissioner,  
SERGIO ROBLES, Commissioner, and  
reported by SKYY CHUNG, Hearing Reporter.

1 APPEARANCES :

2 FOR THE CITY OF ELK GROVE : GEORGE MURPHEY  
3 MACKENZIE WIESER  
4 SERGIO ROBLES  
5 SANDY KYLES  
6 NICOLE  
7 DARREN WILSON  
8 JENNIFER ALVES

9 FOR CNU : AMY HAGIRA  
10 ALLEN WARD  
11 SARAH KIRCHGESSNER  
12 PATRICK ANGEL

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REPORTED BY :  
SKYY CHUNG  
HEARING REPORTER

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FOR THE RESPONDENT:	IDENTIFIED
(None)	(None)

CITY OF ELK GROVE PLANNING COMMISSION MEETING

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(MEETING COMMENCES AT 6:04 P.M.)

COMMISSIONER GEORGE MURPHEY: Good evening, everybody. Welcome to the Elk Grove Planning Commission regular meeting for February 18, 2021. I'll call the meeting to order at 6:04. Sandy, would you please read our customary read?

SECRETARY SANDY KYLES: Yes. Good evening. Consistent with executive orders issued by the governor of the State of California, this meeting will be conducted by teleconference only. The Elk Grove planning commission welcomes, appreciates, and encourages participation in the meetings. The planning commission reserves the right to reasonably limit the total time for public comment on any particular notice agenda item as it may be necessary. During the meeting, members of the public may provide comments on a particular matter using the "raised hand" feature. For those of you viewing, additional instructions are displayed before you. The raised hand lets the meeting secretary know that you have a comment.

COMMISSIONER GEORGE MURPHEY: Okay. Yes. Everybody, please make note of the planning commission for instructions here on the screen before you. And Sandy, with that being said, would you please call roll?

1 SECRETARY SANDY KYLES: Commissioner Sergio Robles.

2 COMMISSIONER SERGIO ROBLES: Present.

3 SECRETARY SANDY KYLES: Mackenzie. I think we can  
4 see her. Can we count her as present? Mackenzie, can  
5 you hear us? Vice Chair, George Murphey.

6 COMMISSIONER GEORGE MURPHEY: Here. I'll have --

7 SECRETARY SANDY KYLES: Chair Andrew Shuck  
8 (phonetic) is absent, and Commissioner Tony Linn  
9 (phonetic) is absent.

10 COMMISSIONER GEORGE MURPHEY: Thank you again,  
11 Sandy. I'll lead us in the pledge. If you would please  
12 mute your mics if they're on, and I'll lead the pledge.  
13 In fact, if you have a flag in front of you, place your  
14 hand over your heart. I pledge allegiance to the flag  
15 of the United State of America. And to the Republic for  
16 which it stands, one nation, under God, indivisible,  
17 with liberty and justice for all. Okay. We will move  
18 onto approval of tonight's agenda. Do I have a motion?

19 COMMISSIONER SERGIO ROBLES: Commissioner Robles  
20 here. I put the motion to move onto tonight's agenda.

21 COMMISSIONER GEORGE MURPHEY: I don't think  
22 Mackenzie has any audio one way or the other. I'll see  
23 if I can contact her.

24 MR. DARREN WILSON: Chair Murphey, we should  
25 probably get her audio, and -- I don't know if she has

1 sound. We should probably get that fixed before we  
2 continue.

3 MR. DARREN WILSON: Mackenzie, can you hear us?

4 COMMISSIONER MACKENZIE WIESER: I can't hear  
5 anything.

6 COMMISSIONER SERGIO ROBLES: All right. You can't  
7 hear what I'm saying?

8 MS. NICOLE: Mackenzie, we can't hear you either,  
9 but I think where you went -- if you can hear me from  
10 where you went and changed your speaker before, if you  
11 could change it back to the computer -- let's see if  
12 that fixes it.

13 SECRETARY SANDY KYLES: We might want to remind our  
14 participants to wait to raise their hand until the items  
15 are called that they wish to speak on.

16 COMMISSIONER MACKENZIE WIESER: Can you hear me  
17 now? Can you hear me?

18 COMMISSIONER GEORGE MURPHEY: I can hear you.

19 MS. NICOLE: Yes. Can you hear us?

20 COMMISSIONER MACKENZIE WIESER: Sorry. I'm here.

21 COMMISSIONER GEORGE MURPHEY: We're going to let  
22 you catch up. I just asked for a motion to approve the  
23 agenda. Sergio made the motion. Need a second.

24 COMMISSIONER MACKENZIE WIESER: Second the motion.

25 COMMISSIONER GEORGE MURPHEY: I have a motion, and



1 second on the agenda, tonight's agenda: All in favor,  
2 say "I"?

3 COMMISSIONER MACKENZIE WIESER: I.

4 COMMISSIONER SERGIO ROBLES: I.

5 COMMISSIONER GEORGE MURPHEY: Sandy, you want to  
6 call roll at least?

7 SECRETARY SANDY KYLES: Yes, I'll call roll.  
8 Commissioner Robles.

9 COMMISSIONER SERGIO ROBLES: Present.

10 SECRETARY SANDY KYLES: This would be for approval  
11 of the agenda.

12 COMMISSIONER SERGIO ROBLES: I.

13 SECRETARY SANDY KYLES: Okay. Commissioner Wieser.

14 COMMISSIONER MACKENZIE WIESER: I.

15 SECRETARY SANDY KYLES: And Chair Murphy?

16 COMMISSIONER GEORGE MURPHEY: I.

17 SECRETARY SANDY KYLES: Thank you.

18 COMMISSIONER GEORGE MURPHEY: Somehow I just lost  
19 my screen too. I can see everybody, but I can't  
20 see -- but I lost my screen somewhere.

21 MS. NICOLE: George, did you turn your video off by  
22 chance?

23 COMMISSIONER GEORGE MURPHEY: I can't find the  
24 video now, Nicole.

25 MS. NICOLE: If you hover your mouse down towards

1 the bottom of the screen, the Zoom screen, at the bottom  
2 of your computer where the icons are, is there one that  
3 looks like a blue rectangle with the little camera icon  
4 on it?

5 COMMISSIONER GEORGE MURPHEY: No, it's not coming  
6 up, Nicole. It's not coming up at all. Something  
7 popped up on the screen. I don't see a way to get out  
8 of it. I'm to try something, and bear with me. I hope  
9 I don't lose you or you lose me. Some kind of a  
10 download pop-up request, and I can't get out of it.

11 MS. NICOLE: Is there a little "X" at the top of  
12 the box that you can close?

13 COMMISSIONER GEORGE MURPHEY: There's nothing.  
14 There's absolutely nothing.

15 MS. NICOLE: Is it running right now?

16 COMMISSIONER GEORGE MURPHEY: I just got some kind  
17 of a download that wants me to make scheduling easy, and  
18 it's like a Google or Microsoft add-ons, and it's not  
19 letting me do anything. Let me try something here.

20 MS. NICOLE: Okay.

21 COMMISSIONER GEORGE MURPHEY: No, even with moving  
22 the video around, I can't get anywhere.

23 MS. NICOLE: George, are you able to log out of the  
24 meeting and log back in?

25 COMMISSIONER GEORGE MURPHEY: Let me try the back

1 button. Maybe I can get back on that way.

2 COMMISSIONER MACKENZIE WIESER: It's usually -- can  
3 you hear me, George?

4 COMMISSIONER GEORGE MURPHEY: Hang on a minute.  
5 I'm going to try to launch my meeting.

6 MS. NICOLE: You're still in the meeting, because  
7 we can hear you.

8 COMMISSIONER GEORGE MURPHEY: You can hear me, but  
9 I have no video of anything.

10 MS. NICOLE: George, up at the very top of your  
11 screen, do you have a view option? You might be in full  
12 screen mode. Like if you hover at the very top of your  
13 monitor in the middle, does a little drop-down come down  
14 that says "exit full screen"?

15 COMMISSIONER GEORGE MURPHEY: Sandy, did we  
16 complete the approval of the agenda?

17 SECRETARY SANDY KYLES: Yes, we did. We're ready  
18 to move to public comment when you are.

19 COMMISSIONER GEORGE MURPHEY: Okay. There we go.  
20 Hang on a minute here. Okay. We'll move to Item 3,  
21 public comment. This is for items that aren't on the  
22 agenda and are not related to tonight's hearing item,  
23 the CNU project. If there's anybody that speaks, Sandy,  
24 would you please raise your hand so Sandy can call on  
25 you?

1 SECRETARY SANDY KYLES: Nicole, do we have any  
2 hands raised?

3 MS. NICOLE: We do. I'm going to start here.  
4 Sandy, can you please put the timer up, please? Gary  
5 Sidner (phonetic), you'll be the first person that I ask  
6 to allow to unmute, so just sit tight here, and we will  
7 get you going.

8 MR. DARREN WILSON: And just to clarify for  
9 everyone, this is for items not on the agenda.

10 COMMISSIONER GEORGE MURPHEY: Do we have speakers?

11 MS. NICOLE: We do. We have two folks. We're just  
12 getting the timer up so that they know how much time  
13 they have.

14 COMMISSIONER GEORGE MURPHEY: Oh, oh, okay. Okay.  
15 Great. Thank you.

16 MS. NICOLE: Sandy, would you like me to run a  
17 clock on my end?

18 SECRETARY SANDY KYLES: I'm unable to -- yeah. I'm  
19 unable to share the screen at the moment.

20 Okay. It looks like we are down to just one  
21 caller. So, Virginia Newbern, I have allowed you to  
22 unmute your mic. If you'd like to unmute and begin, you  
23 may go ahead.

24 GUEST VIRGINIA NEWBERN: Good afternoon. My name  
25 is Virginia Newbern. I live in the Stone Lake

1 residences, and I'm interested in the hospital that has  
2 been proposed. I understand that it's a teaching  
3 hospital and not a full-fledged hospital, and that it  
4 has been designed by Zuckerberg complex. He has done  
5 several hospitals throughout the state, and I understand  
6 that this is just further investment of his. I don't  
7 think it's very appropriate, also, being an  
8 environmentally sound person to have a hospital of this  
9 nature that's this tall and a bird sanctuary area. This  
10 is -- Stone Lake is a bird sanctuary. I know that we  
11 have residences here, apartment complex, but we are also  
12 maintaining kind of a balance with nature here with the  
13 Stone Lake Preserve, and we really would like to  
14 maintain that balance. I don't feel that the complex,  
15 the noise, the added traffic to the area, as well as the  
16 heights of the proposed complex, would actually be a  
17 detriment to our neighborhood as well. Also to the  
18 people that are in residence not too far from that that  
19 are in or around our neighborhood. And so I disagree  
20 with the movement to move forward with this proposed  
21 hospital or teaching hospital. Thank you for the  
22 opportunity to speak.

23 COMMISSIONER GEORGE MURPHEY: Thank you,  
24 Ms. Newbern. I want to -- do we have anymore speakers  
25 for open for public comment not on the agenda?

1 MS. NICOLE: We do. There's about seven more hands  
2 that have been raised.

3 COMMISSIONER GEORGE MURPHEY: Let me remind folks.  
4 If your intention is to speak to the item before us  
5 tonight, Item 5.1, the CNU University Medical Center  
6 Project, please hold your comments until we open that  
7 item up for public comment. So with that being said, I  
8 hope that everybody understands that we have certain  
9 protocols to follow, and this particular segment is for  
10 items not on the agenda tonight. Go ahead and call the  
11 next speaker, please.

12 MS. NICOLE: Alan Chase, you may now unmute  
13 yourself, and you have three minutes.

14 GUEST ALAN CHASE: Is this appropriate to talk  
15 about the university project or do you want to wait  
16 until it's an agenda item addressed?

17 COMMISSIONER GEORGE MURPHEY: Mr. Chase, if you  
18 want to speak on the university project, the hospital  
19 project, why don't you hold it over until we open that  
20 for public comment?

21 GUEST ALAN CHASE: Thank you.

22 COMMISSIONER GEORGE MURPHEY: You're welcome.  
23 Thank you, sir. Go ahead and call the next speaker,  
24 please.

25 MS. NICOLE: Alan, you may unmute your line, and

1 you have three minutes.

2 GUEST ALAN: Hi. Good evening. Actually, I have  
3 the same -- it's actually on the subject of the CNU, so  
4 I think I need to hold until the topic is -- when it's  
5 ready.

6 MS. NICOLE: That is correct.

7 COMMISSIONER GEORGE MURPHEY: Yeah, that's correct.  
8 Thank you so much. We'll call you when we open up for  
9 public comment.

10 MS. NICOLE: Barry Broome, you may unmute your  
11 line.

12 GUEST BARRY BROOME: Yes, I have -- I'm only going  
13 to comment on the teaching hospital, so I will hold as  
14 well.

15 COMMISSIONER GEORGE MURPHEY: Thank you.

16 MS. NICOLE: Vice Chair Murphy, we do have one  
17 person who's called in on the phone, so I'm just going  
18 to check in with them really quick to see if they wanted  
19 to speak on a non-agenda item. So hang tight for just  
20 one moment.

21 COMMISSIONER GEORGE MURPHEY: Perfect. Thank you.

22 THE WITNESS: Caller your number ends in 4159. If  
23 you'd like to unmute and speak on a non-agendized item,  
24 you're welcome to go ahead. Caller, you may go ahead.  
25 We are not able to hear you if you're speaking. Vice

1 Chair Murphy, it looks like they've muted their line, so  
2 we can check again when we get to item 5.1.

3 COMMISSIONER GEORGE MURPHEY: Okay. Thank you,  
4 Nicole. If we have no other speakers, I'll close the  
5 public comment opportunity and ask the secretary: Do we  
6 have any comments to be made into the record?

7 SECRETARY SANDY KYLES: Mr. Chair, are you talking  
8 about for the public comment?

9 COMMISSIONER GEORGE MURPHEY: Yes. We did not  
10 receive any comments to be read. There were zero  
11 comments, zero audio comments. And Nicole had already  
12 tried to get their hands raised, unless we have more.

13 MS. NICOLE: I don't see anymore hands raised at  
14 this time.

15 COMMISSIONER GEORGE MURPHEY: Then I'll doubly  
16 close the public comment period on the items not on the  
17 agenda, and we'll move to Item 4. We have no consent  
18 calendar items tonight, so we'll move to the public  
19 hearing items. Sandy, will you call the item, please?

20 SECRETARY SANDY KYLES: Item 5.1 is the California  
21 North State University Medical Center, project number  
22 PLNG 18-110. The staff report will be presented by  
23 Sarah Kirchgessner.

24 MR. DARREN WILSON: Chair Murphy, before we get  
25 started, the applicant would like to make a request.



1 COMMISSIONER GEORGE MURPHEY: All right. Are they  
2 going to make it personally or are they going to go  
3 through staff?

4 MR. DARREN WILSON: They're going to make it  
5 personally.

6 COMMISSIONER GEORGE MURPHEY: Okay.

7 MS. NICOLE: Darren, if you could just give me a  
8 moment to patch them into the meeting. Charlie, you  
9 should be able to go ahead and unmute now.

10 MR. ALAN WARREN: Hello, distinguished planning  
11 commission and Vice Chair. My name is Alan Warren, and  
12 I'm part of the development team. We have a number of  
13 our professionals on the team on the call, and we'd like  
14 to ask our attorney that has a short statement too, in a  
15 request for you right now.

16 MS. NICOLE: So would you please unmute Amy, or  
17 Amy, would you please raise your hand?

18 MR. ALAN WARREN: Amy Hagira (phonetic).

19 MS. NICOLE: Amy, you should be able to be patched  
20 in here momentarily and unmute your microphone.

21 MS. AMY HAGIRA: Can you hear me?

22 MS. NICOLE: We can.

23 MS. AMY HAGIRA: Okay. Good evening,  
24 commissioners. I'm Amy Hagira from Thomas Law Group.  
25 I'm here on behalf of the CNU applicant team, and we're

1 looking forward to presenting the project to you. We  
2 understand though, that there have been some requests  
3 from the community for additional time to review all of  
4 the materials related to the project. And so, to be  
5 responsive to those requests, we're asking for a brief  
6 two-week continuance of this item.

7 COMMISSIONER GEORGE MURPHEY: Okay. Thank you,  
8 Amy. Before we -- I ask the rest of the commissioners,  
9 I would like to remind everybody that we can conduct  
10 business with great commissioners. And during that  
11 two-week period, there is a very good  
12 possibility -- there's a potential for having new  
13 commissioners appointed to the planning commission. So  
14 with those two items in mind, I would like to hear from  
15 both my fellow commissioners, starting with Sergio, on  
16 your thoughts are on continuing this moving forward  
17 tonight. Sergio, go ahead.

18 COMMISSIONER SERGIO ROBLES: Thank you,  
19 Commissioner Murphey, sir. I think this is a lot that  
20 we're going to be dealing with currently. I know that  
21 we went down from four commissioners to three  
22 commissioners. This is going to be a big project,  
23 obviously, and I think that given the severity and  
24 everything that's going on, I think we should consider  
25 pushing it out two weeks. I know that there are several

1 constituents that are -- one to call in, and I also know  
2 that there's just a lot going on. So I think that I  
3 agree with the applicant.

4 COMMISSIONER GEORGE MURPHEY: Thank you, Sergio.  
5 Commissioner Wieser, would you like to make some  
6 comments, please?

7 COMMISSIONER MACKENZIE WIESER: Can you hear me, is  
8 the first step. No, you can't hear me. Go figure.

9 MS. NICOLE: We can hear you.

10 COMMISSIONER GEORGE MURPHEY: We can hear.

11 COMMISSIONER MACKENZIE WIESER: Oh, you can hear  
12 me. Thank you. Actually, we've got 215 attendees here  
13 on this meeting here right now that are ready to share  
14 their opinions with us. We have had people rearrange  
15 their days. We've known about this meeting now for more  
16 than two weeks. I'm ready to hear this item tonight and  
17 move forward with the information that we have. I do  
18 realize that it is a lot of information to digest, but I  
19 have spent well more than 80 hours digesting  
20 information, talking with constituents, talking with the  
21 applicant, and I'm ready to move forward with this  
22 meeting tonight if at all possible.

23 COMMISSIONER GEORGE MURPHEY: Thank you, Mackenzie  
24 I'm with Mackenzie's corner on this. I would like to  
25 continue with tonight's agenda and move it forward.

1 Like Mackenzie, I think, you know, we've all spent a lot  
2 of time on this. People have spent a lot of time on  
3 this. And I think any information would not be new  
4 information. It would maybe confuse the issue somewhat.  
5 So I'm going to be on the side of no continuance and  
6 moving forward tonight. I will ask staff if we need to  
7 make any kind of a motion on that.

8 MR. DARREN WILSON: Who would defer to our city  
9 attorney on that?

10 MS. JENNIFER ALVES: Good evening, esteemed  
11 planning commissioners. Jennifer Alves, assistant city  
12 attorney. So you can just go forward and proceed if you  
13 like, but if you'd also like to make a motion, that  
14 would be fine as well. We also need to read into the  
15 record a couple recusals. So George, would you prefer  
16 to make it a motion so it's for clarity?

17 COMMISSIONER GEORGE MURPHEY: I think that might be  
18 more of a permanent part of the record, so I will ask  
19 for a motion on a continuance.

20 COMMISSIONER MACKENZIE WIESER: Commissioner Wieser  
21 here. I would like to make a motion that we continue to  
22 move forward with the meeting this evening, and I will  
23 look for a second.

24 COMMISSIONER GEORGE MURPHEY: Is there a second?

25 MS. JENNIFER ALVES: Chair Murphey, you can second

1 it.

2 COMMISSIONER GEORGE MURPHEY: I'm going to. I  
3 didn't hear what -- I will second it. I want to give  
4 Sergio a chance to chime in. Okay. So we have a  
5 motion, a second, not to continue this item. All those  
6 in favor? Outstanding. Please call the roll.

7 SECRETARY SANDY KYLES: Commissioner --

8 COMMISSIONER SERGIO ROBLES: Can you repeat that  
9 one more time? I'm sorry. So that's going to be to  
10 continue or to not continue this?

11 MS. JENNIFER ALVES: To not continue.

12 COMMISSIONER SERGIO ROBLES: Okay.

13 COMMISSIONER GEORGE MURPHEY: Sandy, would you  
14 please call the roll?

15 SECRETARY SANDY KYLES: Yes, Mr. Chair.  
16 Commissioner Robles?

17 COMMISSIONER SERGIO ROBLES: I.

18 SECRETARY SANDY KYLES: Commissioner Wieser?

19 COMMISSIONER MACKENZIE WIESER: I.

20 SECRETARY SANDY KYLES: And Chair Murphy?

21 COMMISSIONER GEORGE MURPHEY: I.

22 SECRETARY SANDY KYLES: That's a three-count vote  
23 to continue the hearing.

24 MS. JENNIFER ALVES: Yes. The request for a  
25 continuance has been denied. If you could, Madam

1 Chair -- or, I'm sorry, Madam Secretary. Ms. Kyles,  
2 could you read into the record two recusal statements  
3 before we move forward?

4 SECRETARY SANDY KYLES: Yes. Planning Commission  
5 Chair Andrew Shuck will not be in attendance in this  
6 evening's meeting. To consider the California North  
7 State University Project, Commission Shuck recuses  
8 himself from the matter and has asked staff to note his  
9 recusal into the record. He has close family members  
10 who live in Stone Lake near the proposed project who  
11 would be affected by the project. While Commissioner  
12 Shuck does not appear to have a financial conflict of  
13 interest, to avoid an appearance of bias and to ensure  
14 neutrality in the review of the project, Commissioner  
15 Shuck is recusing himself under the common law conflict  
16 of interest rule. Planning Commissioner Tony Linn will  
17 not be in attendance at this meeting to consider the  
18 California North State University Project.

19 Commissioner Linn is recusing himself of the  
20 matter and has asked staff to note his recusal into the  
21 record. Commissioner Linn is a volunteer and supporter  
22 of an organization called APAPA, which stands for Asian  
23 Pacific Islander American Public Affairs. California  
24 State University has been a significant financial  
25 supporter of APAPA. While Commissioner Linn does not

1 appear to have financial conflict of interest, to avoid  
2 an appearance of bias and to ensure neutrality in the  
3 review of the project, Commissioner Linn is recusing  
4 himself under the common law conflict of interest rule.

5 COMMISSIONER GEORGE MURPHEY: Thank you, Sandy.  
6 Now would you call the item, please?

7 SECRETARY SANDY KYLES: I believe we call the item,  
8 but we can do it again. Item 5.1 is the California  
9 North State University Medical Center, Project No. PLNG  
10 18-110. Again, Sarah Kirchgessner will be providing the  
11 presentation.

12 MS. SARAH KIRCHGESSNER: Good evening,  
13 commissioners. Sarah Kirkgessner, planning. The  
14 California North State University Medical Center is  
15 proposing to expand its facilities and services to  
16 provide emergency and other medical-related services  
17 through reuse of several intel CNU-owned parcels  
18 adjacent to the existing CNU School of Medicine. The  
19 applicant is requesting approval of the following  
20 entitlements, permits, and approvals in order to  
21 construct and operate the project as proposed. This  
22 includes a general plan amendment text and map, the  
23 zoning amendment text and map, and amendment to the  
24 city's bicycle, pedestrian, and trails master plan to  
25 modify the location of a proposed Class 1, multi-purpose

1 trail.

2 District development plan design review,  
3 including overall site approvals and establishment of  
4 development elements, including, but not limited to:  
5 parking, landscaping, pedestrian improvements, general  
6 building size and location, and other features that are  
7 common across the site; major design review for the  
8 architecture of the proposed Phase 1 buildings: the  
9 hospital and central plant building; the conditional use  
10 permit for a hospital helistop and expansion of the  
11 existing medical school uniform sign program; finding a  
12 consistency with a general plan for the city abandonment  
13 of West Taron Port (phonetic) and city execution of an  
14 agreement for police services.

15 The project site is located along the Western  
16 boundary of the city just east of Interstate 5. The  
17 approximately 24-acre project site consists of 12  
18 partials owned by CNU. The site is bordered by Elk  
19 Grove Boulevard to the North, I-5 to the West, West  
20 Taron Drive to the East, and the Laguna Stone Lake  
21 subdivision to the East and South. Adjacent land uses  
22 include commercial uses, single-family residential uses,  
23 and a church. The project site is located within the  
24 200-year floodplain. To accommodate the proposed land  
25 uses, the applicant requests that the general plan land



1 use designation for six partials on the project site be  
2 changed from community commercial to employment center,  
3 and for three parcels to be changed from light  
4 industrial to employment center.

5 Since the project site is located in the 200-year  
6 floodplain, the project includes the following text  
7 proposed revisions to general plan policy, ER 2-3, which  
8 would allow construction of an essential healthcare  
9 facility. And the flood plain -- these text changes  
10 would align the policy with existing state law and would  
11 apply citywide.

12 Similar to the general plan amendment, a rezone  
13 is also necessary to accommodate the use. The project  
14 proposes a rezone of nine parcels on the project site,  
15 from MP Industrial Office Park and General Commercial,  
16 to BP, which is business professional. To be consistent  
17 with the proposed general plan amendment, the following  
18 revisions to the Elk Grove Municipal Code, Title 23  
19 Zoning, are also proposed, and would apply citywide: The  
20 project has been designed to meet an urban level of  
21 flood protection consistent with state law, and the  
22 proposed changes to the general planning municipal code.

23 In other words, even with the changes to the  
24 general plan zoning code, the project will meet a level  
25 of flood protection that is necessary to withstand

1 flooding. It has a 1 in 200 chance of occurring  
2 consistent with the criteria developed by the California  
3 Department of Water Resources. Development of the  
4 project would be guided by its district development  
5 plan, known as the DDP, which would provide for overall  
6 site plan approvals and establish development elements,  
7 including, but not limited to: pedestrian improvements,  
8 parking, lighting, setbacks, and other features common  
9 across the site.

10 Each phase of the project would also require a  
11 design review permit. This is the master site plan  
12 illustrating total build-out of the project. The  
13 project would be built in three phases: retaining the  
14 existing pharmacy and medical college and at a hospital  
15 with a helicopter-landing site, an outpatient medical  
16 clinic, medical office building, two parking structures  
17 with accessory retail, dormitory, one student parking  
18 structure with rooftop sports facilities, a central  
19 plant and mechanical yard, public gathering spaces and  
20 surface parking. The project's dormitory would include  
21 150 units to house up to 300 students. This table shows  
22 the proposed buildings along with the associated phases  
23 of construction.

24 Phase 1 includes construction of an approximately  
25 700,000 -- 733,290 square foot, approximately

1 250-patient bed hospital in the Northwest corner of the  
2 project site. The hospital will include a nine-story  
3 central tower in a single seven-story patient wing atop  
4 a four-story main hospital podium. Phase 1 also  
5 includes the construction of the structural shell of the  
6 Eastern patient tower concurrently with the construction  
7 of the hospital. A helicopter-landing site would be  
8 constructed on the roof of the Eastern patient bed  
9 tower.

10 The project also -- excuse me, Phase 1 of the  
11 project also includes the construction of the central  
12 plant building and mechanical yard. The central plant  
13 would provide power and heating to the entire project  
14 site. The main access proposed off of West Taron would  
15 be modified to provide a traffic circle dropoff area at  
16 the hospital and consist of three lanes. Phase 2 would  
17 include interior improvements for the second patient bed  
18 wing, which would be constructed in Phase 1, an  
19 outpatient clinic, a medical office building, and the  
20 first of two general use parking structures serving the  
21 project site.

22 The addition of the interior improvements to the  
23 patient bed tower would increase the patient beds to  
24 approximately 400 beds total. Phase 3 would include the  
25 construction of a second general use parking structure

1 to serve the site, a dormitory, and a third parking  
2 structure for medical students with sports facilities on  
3 the roof. With completion of Phase 3, the project would  
4 include a total of 3,404 parking spaces for the students  
5 on the site.

6 The zoning height limit in the BP zone is 60  
7 feet; however, as part of the design review process, the  
8 designated improvement authority may allow the maximum  
9 height to be increased provided that the intent of the  
10 development is consistent with the general plan.

11 Additionally, on-site improvements, including but not  
12 limited to architectural articulation, quality materials  
13 and landscaping, shall be provided to ensure  
14 compatibility with the surrounding context and character  
15 of the project site as determined by the proven  
16 authority. The project's intensity of development as  
17 measured by the floor area ratio is 1.69, which is less  
18 than the maximum floor area ratio of 2.0 allowed in the  
19 employment center land use designation in the BP Zoning  
20 district. The project's architecture materials and  
21 landscaping are compatible with the character of the  
22 project site and the adjacent development.

23 Additionally, the hospital building and  
24 associated helistop are supposed to be located in the  
25 Western-most portion of the project site adjacent to

1 I-5. The hospital building and helistop have  
2 substantial setbacks from the residential properties in  
3 the vicinity of the project site. In addition, the  
4 medical office building outpatient clinic and parking  
5 structures located on the south and east of the hospital  
6 will provide additional buffers to the adjacent land  
7 uses.

8 The project is required to demonstrate  
9 consistency with roadway performance targets under the  
10 general plan policies. The project has been conditioned  
11 to construct the following improvements based on the  
12 traffic operations analysis completed for the project.  
13 Offsite improvements also include the construction of a  
14 new left-turn pocket on Elk Grove Boulevard for  
15 emergency vehicle use. The proposed new left-turn  
16 pocket is located on the Northern boundary of the  
17 project site adjacent to the existing slip ramp and west  
18 of the intersection with West Taron. Other  
19 infrastructure improvements include drainage and water  
20 quality improvements, waste water service, recycled  
21 water service, electric service, and electrical vehicle  
22 charging stations.

23 The project includes major design review for the  
24 Phase 1 buildings, which include the hospital and  
25 central plant buildings. Phase 2 and 3 buildings must

1 be consistent with the approved DDP, but would be  
2 considered for major design review at a later date. The  
3 main entrance to the hospital incorporates a large entry  
4 feature to define the entrance and provide shelter from  
5 the elements.

6 Building facades will be traded with a variety of  
7 materials, including gray aluminum composite paneling,  
8 gray-perforated sun shades, dark gray and metallic  
9 aluminum curtain walls, earth-tone glass fiber  
10 reinforced concrete panels, and Earth-tone concrete  
11 panels. Colors include a mix of light gray, dark gray,  
12 and earth tones. Landscape planners are proposed along  
13 the building's exterior to help break up the mass of the  
14 wall on all sides of the buildings. Project's  
15 architecture materials and landscaping are compatible  
16 with the character of the project site and adjacent  
17 development.

18 Here is the view from the main entry drive. Here  
19 is the view from the service access road adjacent to  
20 I-5, and here are the proposed colors and materials.  
21 The project recludes (sic.) the request for a condition  
22 to use permit in order to allow for a hospital in the BP  
23 Zone to establish a helistop associated with the  
24 hospital and allow for the expansion of the existing  
25 medical school. The hospital buildings proposed to be

1 located in the Northburn (phonetic) portion of the  
2 project site adjacent to I-5. The hospital would be  
3 designed and equipped to operate as a Level 2 trauma  
4 center to accommodate a future designation by the  
5 Sacramento County.

6 The hospital building has substantial setbacks  
7 from the residential property in the vicinity of the  
8 project site. A helicopter landing site, the helistop,  
9 would be constructed on the roof of the Eastern patient  
10 bed tower. It would serve only to transfer patients and  
11 medical staff from one site to another. It would not  
12 serve as a permanent base for air ambulance vehicles,  
13 and no fueling service long-term parking or storage of  
14 helicopters or related equipment would occur at the  
15 project site. It is anticipated that at full build-out,  
16 the project would include 1.5 helicopter trips per week  
17 and 78 helicopter trips per year. The designation of  
18 the helistop and the flight path would be regulated by  
19 the FAA.

20 Here is the proposed flight path. The flight  
21 path was revised during the environmental review process  
22 to avoid portion of the Stone Lake Wildlife Refuge, west  
23 of I-5, in response to several comments on the DEIR that  
24 expressed concern about the impacts. The project  
25 applicant has agreed to a new helicopter flight path

1 that is reflected in the final EIR. This new flight  
2 path would take the helicopter east up I-5 flying over  
3 Laguna West Lakeside Community to the northeast when  
4 departing two points north of the hospital. The updated  
5 helicopter analysis contours indicate that the contours  
6 would not extend as far as any residential land uses,  
7 similar to that of the draft EIR impact conclusion.  
8 Therefore, it's anticipated that the helistop would have  
9 a minimal impact on surrounding land uses.

10 Phase 3 of the hospital includes the construction  
11 of a five-story dormitory directly adjacent to the  
12 existing School of Medicine building that would include  
13 150 units capable of housing approximately 300 students,  
14 as well as office space for administration support  
15 services. The first floor of the dormitory building  
16 would be physically connected to the existing school of  
17 medicine. Staff believe that the PROSE Project is  
18 compatible with surrounding land uses, including the  
19 adjacent commercial development and single family  
20 residential to the south and east.

21 As mentioned previously, the hospital building  
22 and helistop are supposed to be located on the  
23 Western-most portion of the project site adjacent to  
24 I-5. The draft conditions of approval, as well as the  
25 mitigation measures identified in the EIR would reduce



1 any potential noise impacts to a less than significant  
2 level. As such, the project will not be detrimental to  
3 the health, safety, peace, morals, comfort, or general  
4 welfare for persons residing or working in the area, or  
5 the general welfare of the city.

6 The project proposes an amendment to the city's  
7 bicycle trails and pedestrian master plan to modify the  
8 Class 1 multipurpose trail alignment. This is the  
9 current alignment shown in the plan, which shows a trail  
10 along the Western boundary of the site with an at-grade  
11 crossing at the on-ramp to I-5. Due to the location of  
12 the proposed emergency access driveway from Elk Grove  
13 Boulevard at the north of the site, as well as the  
14 existing slip ramp, the applicant determined that a  
15 multipurpose trail would not be feasible at that  
16 location. The project will instead construct a Class 1  
17 multipurpose trail along the Eastern border of the  
18 project site, from the southwest corner of Elk Grove  
19 Boulevard and West Taron, to the southwest corner of the  
20 project site during phases 2 and 3.

21 The project concludes a finding of consistency  
22 with the city's general plan for the abandonment of West  
23 Taron Court by the city. Staff finds that the proposed  
24 abandonment is consistent with the goals and policies of  
25 the city's general plan. West Taron Court is a public

1 street that does not have a land use designation  
2 identified in the general plan. The abandonment of West  
3 Taron Court will allow for the development of the  
4 project as proposed. The proposed abandonment is  
5 consistent with general plan policy ED 2-2, which  
6 encourages the city to maximize the use of  
7 non-residential land for employment generating uses and  
8 revenue generating uses, as well as Policy ED 1-5 to  
9 support existing and prospective businesses that  
10 contribute to meeting Elk Grove's strategic economic  
11 goals and facilitate their relocation and expansion as  
12 appropriate.

13 The city and CNU proposed to enter into an  
14 agreement for funding of dedicated city law enforcement  
15 services for the project that would include police  
16 presence and on-site patrol to augment CNU security  
17 staff. The governor certified the project as an  
18 eligible project under AB 900 under December 30 of 2019.  
19 CNU has made commitments to reduce the potential  
20 environmental effects of the proposed project. They  
21 were made in support of its certification as an  
22 environmental leadership development project. Because  
23 the project wasn't approved by the city prior to January  
24 1st, 2021, the project's AB 900 certification has  
25 expired; however, the city continues to comply with the

1 requirements in case the leadership act is reenacted by  
2 the legislature.

3 The planning department with the CEQA consultant  
4 prepared an environmental impact report for the project  
5 to identify whether or not any significant environmental  
6 impacts may result from the proposed project. The EIR  
7 is composed of a draft EIR and a final EIR. Pat Angel  
8 from Ascent Environmental will now present the  
9 environmental analysis for the project.

10 MR. PATRICK ANGEL: Hey. Good evening. Let me  
11 share my stream and get my presentation going. Once  
12 again, my name is Pat Angel. I am the project manager  
13 from Ascent Environmental. I have a brief overview of  
14 the environmental review process for the project.

15 So very quickly, a brief overview of what CEQA  
16 is: It's an acronym for the California Environmental  
17 Quality Act. It's a public disclosure process in  
18 regards to disclosing the environmental impacts of a  
19 proposed action and identifying whether or not those  
20 impacts can be mitigated or avoided. Part of the points  
21 here to remember what an EIR does and what an EIR does  
22 not do in regards to the environmental review process.  
23 As I mentioned, it does disclose the environmental  
24 effects of a project, identifies mitigation measures, as  
25 well as feasible alternatives to be considered.

1           EIRs are not required to mitigate preexisting  
2     environmental conditions. They're not documents that  
3     advocate for projects under evaluation. They also don't  
4     require projects be denied because of significant  
5     environmental effects. An agency does have the ability  
6     to approve a project should it want to that has  
7     significant environmental effects, as long as it makes  
8     appropriate findings. EIRs also don't address economic  
9     issues, such as property values and other economic  
10    considerations, as well as social issues.

11           This is an overview of the environmental issues  
12    that are evaluated in the draft EIR. There are 15  
13    technical -- or, actually, 17 technical areas. Through  
14    the environmental review process, there are several  
15    mitigation measures -- several impacts that are  
16    identified as less than significant. There were several  
17    that were identified as mitigated with the application  
18    (inaudible) mitigation measures. And then there are a  
19    series of impacts that are identified as significant,  
20    unavoidable, even with the application mitigation  
21    measures.

22           I will highlight these that are shown on the  
23    screen, but they involve significant impacts to the  
24    change in the visual character of a project area,  
25    introduction of substantial light sources, net increase

1 and operational air quality emissions,  
2 construction-generated noise, ambulance siren-related  
3 noise. Environmental impacts from expansion of existing  
4 infrastructure -- this involves the project -- would  
5 require extension of offsite improvements for electrical  
6 and waste water. And then there are a series  
7 of -- cumulative impacts are also identified as  
8 significant in regards to visual character, light and  
9 glare, air quality, ground water, construction noise,  
10 water supply, and waste water service.

11       There are three alternatives to the EIR  
12 evaluated. One was referred to as the No Project, No  
13 Development Alternative, where the proposed project  
14 would not move forward. The existing land use  
15 designations and zoning would remain on the site, which  
16 would continue to allow a mix of commercial office and  
17 light industrial uses on the sites. Alternative 2 would  
18 reduce the project by eight stories, 165 feet, which  
19 would allow for 280 beds. There allowed be no  
20 helicopter pad with this alternative. Alternative 3  
21 would relocate the project as proposed to the Lent Ranch  
22 Marketplace site, adjacent to the planned casino.

23       At the end of the comment period on the draft  
24 EIR, we received several comment letters from agencies,  
25 interested parties, and the public, and this is the

1 summary of the key environmental issue areas that were  
2 identified in comments on the draft EIR and were  
3 responded in the final EIR. This involved alternatives  
4 to the project: structural operation noise,  
5 transportation concerns, biological resources,  
6 assumptions on how the helicopter noise and ambulance  
7 analyses were done, shadow impacts from the building,  
8 flooding of hospital operations, baseline conditions for  
9 the EIR, and hazardous material usage.

10 In review of these comments, we provided  
11 responses and determined that none of the material that  
12 was provided in comments and associated responses  
13 requires recirculation of the draft EIR. There were no  
14 new impacts identified or exasperation of existing  
15 impacts there were identified. Finally, EIR does  
16 contain some minor text clarifications to strengthen the  
17 document, but does not change the conclusions. Also  
18 noted in the final EIR were some project modifications  
19 proposed by CIU. As already mentioned by Sarah, they  
20 proposed to modify the originally proposed helicopter  
21 flight paths to avoid impacts to the wildlife refuge.  
22 They also proposed modifications to the landscaping plan  
23 to remove an invasive species based on public comments.

24 And then, up into today's meeting, we did receive  
25 several comment letters from U.S. Fish and Wildlife,

1 environmental interest groups, and residents providing  
2 further concerns about these items. They were reviewed  
3 by staff and ourselves. We identified they did not  
4 raise any new environmental issues that haven't been  
5 already addressed in the draft and the final EIR. With  
6 that, I thank you and will be available to answer  
7 questions later.

8 COMMISSIONER GEORGE MURPHEY: Okay. Thank you, Mr.  
9 Angel. Let me get myself squared away. There you go.  
10 Thank you, Mr. Angel. Sarah, were you done with your  
11 presentation?

12 MS. SARAH KIRCHGESSNER: I was not. I was just  
13 going to finish up real quick.

14 COMMISSIONER GEORGE MURPHEY: Okay. No problem.  
15 Thank you.

16 MS. SARAH KIRCHGESSNER: Okay. One second. Let me  
17 see if I can share my screen again. Here we go. So  
18 based on that project, staff does recommend that the  
19 planning commission adopt a resolution certifying the  
20 environmental impact report for the project, making a  
21 finding of fact and adopting a statement of overriding  
22 considerations and mitigation monitoring and reporting  
23 program, and approve a general plan amendment, zoning  
24 amendment, amendment to the bicycle, pedestrian, and  
25 trails master plan, district development plan, major

1 design review, conditional use permit, finding of  
2 consistency with the general plan for the abandonment of  
3 West Taron court, uniform sign program, and execution of  
4 an agreement for the police services for the California  
5 North State University Medical Center project, subject  
6 to the findings and conditions of approval included in  
7 the proposed resolution, and as amended in the green  
8 sheets.

9           There were three green sheets provided to the  
10 commission related to the revision of a condition of  
11 Approval No. 25, as well as a color exhibit and  
12 materials information, and a revision to a mitigation  
13 measure as identified in the green sheet for -- based on  
14 the comments for the wildlife preserve. This concludes  
15 my presentation. I'm available for questions. The  
16 applicant is also here tonight with the presentation and  
17 is available to answer any questions.

18           COMMISSIONER GEORGE MURPHEY: Thank you, Sarah.  
19 Before I ask for the commissioners to question for  
20 staff, is there anything -- can you share any of the  
21 information, or would you share the information on the  
22 green sheet that we can get on the screen, or be  
23 explained before we consider questions?

24           MS. SARAH KIRCHGESSNER: Let's see. Can you see  
25 the green sheet?



1 COMMISSIONER GEORGE MURPHEY: Yes.

2 MS. SARAH KIRCHGESSNER: All right. This is the  
3 green sheet related to mitigation measure 3.3-2B. And  
4 it has some additional language shown in -- striked  
5 through and underlined to show some additional language  
6 included in that mitigation measure. So that is for  
7 Green Sheet No. 3. I don't have on my desktop Green  
8 Sheets 1 and 2, but I can explain that Green Sheet No. 2  
9 specifically added additional language to condition of  
10 Approval 25, specifically adding language based on a  
11 comment letter from Caltrans, which requested an  
12 intersection control evaluation as part of the  
13 requirement and condition to install the traffic signal  
14 at the onramp at I-5 and Elk Grove Boulevard. And Green  
15 Sheet 1 were an attachment of colors and materials for  
16 the project consistent with the plans included in the  
17 resolution.

18 COMMISSIONER GEORGE MURPHEY: Okay. Thank you. If  
19 that concludes your presentation, Sarah, I'll move to  
20 the commission's questions for staff. And Sergio, would  
21 you like to begin for tonight?

22 COMMISSIONER SERGIO ROBLES: Actually, I would like  
23 to hear a little bit more of what my fellow  
24 commissioners all would like to ask for staff. Because  
25 right now, I'm still kind of going through a little bit

1 of the questions that I have.

2 COMMISSIONER GEORGE MURPHEY: Okay. Thank you.  
3 Mackenzie?

4 COMMISSIONER MACKENZIE WIESER: Yeah, I  
5 actually -- I don't have a ton of questions for staff.  
6 I did spend several hours briefing over with staff on  
7 several days with several questions, and you guys did a  
8 great job answering my questions. I did want to mostly  
9 hear from the applicant, and then -- well, I'm certain  
10 I'll have questions after that.

11 COMMISSIONER GEORGE MURPHEY: Okay. Thank you.

12 COMMISSIONER MACKENZIE WIESER: And I did want to  
13 thank Patrick Angel for his presentation tonight on the  
14 clarifications of what an EIR does and what an EIR does  
15 not do. I think that was very helpful for all of these  
16 folks who are interested and who have had a hard time  
17 wading through the hundreds of pages of that document.  
18 So, thank you so much.

19 COMMISSIONER GEORGE MURPHEY: Okay. And as for  
20 myself, I do have a few questions for staff. Under the  
21 reduced development alternative, I was curious as to  
22 where the lower bed count number came from, and also the  
23 reduced building height. How was that determined?

24 MR. PATRICK ANGEL: Sir, I'm assuming you want me  
25 to answer this question.

1 COMMISSIONER GEORGE MURPHEY: Okay. Thank you.

2 MR. PATRICK ANGEL: I'm sorry, Pat Angel again from  
3 Ascent Environmental. The reduced bed count was based  
4 on, and associated height reduction was based on looking  
5 at the design of the hospital as it stands, and how many  
6 beds they were getting per floor, and you did an  
7 adjustment based on if you reduced it by so many beds,  
8 how much lower could you get the building. Does that  
9 answer your question?

10 COMMISSIONER GEORGE MURPHEY: I think it does.  
11 What you're telling -- I think what you're saying is  
12 that you increased -- they reduced the floor  
13 space -- allowed the floor space per bed, in order to  
14 gain more beds per floor.

15 MR. PATRICK ANGEL: Basically, we took the template  
16 of the patient wings that had the patient beds on there,  
17 and basically eliminated those floors and used that as  
18 kind of a basemark on how many floors we could eliminate  
19 if we got down to that many beds -- how much lower we  
20 could get.

21 COMMISSIONER GEORGE MURPHEY: All right. Thank  
22 you. I'm just curious as to where those numbers came  
23 from. That's interesting. Thank you. And this may be  
24 more for staff too: Along those same lines, how was the  
25 Lent Ranch site chosen, versus a more general sighting

1 within this Sea Good (phonetic) area? That would be for  
2 Sarah.

3 MS. SARAH KIRCHGESSNER: Sorry. Sorry, I was  
4 muted. Pat, do you want to answer that as well?

5 MR. PATRICK ANGEL: Sure. So we looked at  
6 available sites that had good highway access, that had a  
7 good roadway system, and also basically avoided what  
8 were identified -- significant impacts and issues with  
9 the site as proposed. And so, that's how we ended up  
10 with the Ranch Mall site.

11 COMMISSIONER GEORGE MURPHEY: So there we --  
12 Mackenzie, you want to follow up before I finish? Go  
13 ahead.

14 COMMISSIONER MACKENZIE WIESER: No, you go ahead  
15 with yours, but I just wanted you to know that I'm  
16 raising my hand, but I don't think you can see it, so I  
17 will just use my old-fashioned hand.

18 COMMISSIONER GEORGE MURPHEY: I can see your hand  
19 on the small screen.

20 COMMISSIONER MACKENZIE WIESER: Okay. Then I'll  
21 use the old-fashioned hand. But you go ahead -- but I  
22 do want to piggy back on this.

23 COMMISSIONER GEORGE MURPHEY: Okay. Okay. Great.  
24 Kind of lost where I was at. Thank you.

25 COMMISSIONER MACKENZIE WIESER: Well, maybe I can

1 bring you back. My -- I -- George, you have a great  
2 question. And on the alternatives, I was going to kind  
3 of circle back on that once the applicant spoke. I'm  
4 unsure if the alternatives listed in the EIR are even  
5 alternatives that are on the table. And so, maybe that  
6 is a good question for staff --

7 MR. PATRICK ANGEL: For purposes of --

8 COMMISSIONER MACKENZIE WIESER: -- or were these  
9 just for purposes of certifying an EIR? I'm not sure  
10 where -- what the alternatives are. They seemed kind of  
11 like a way to mitigate concerns, but I wasn't sure if  
12 the applicant actually was amenable to these  
13 alternatives.

14 COMMISSIONER GEORGE MURPHEY: That's not even where  
15 I'm headed right now, but I do want to let Pat finish up  
16 with his explanation.

17 MR. PATRICK ANGEL: And please excuse me for  
18 interrupting, commissioner. I didn't realize you  
19 weren't -- I can't speak to your comment on what's on  
20 the table. The purposes of an alternatives analysis  
21 under SEQA for an EIR is you're looking for alternative  
22 methods of implementing the project that substantially  
23 reduce or avoid environmental impacts seen within the  
24 (inaudible) Poirier (phonetic) Project. So that's the  
25 lens we look at, and we have to look at alternatives

1 that can be technically feasible. Both of these  
2 alternatives are technically feasible. Are they  
3 ultimately something the CD (phonetic) wants to do? I  
4 can't speak to that point. They would have to speak to  
5 that point.

6 COMMISSIONER GEORGE MURPHEY: And I agree with you  
7 there. I just want to kind of get staff's point of  
8 view, not realizing maybe that was an alternative that  
9 you found. Thank you.

10 MS. JENNIFER ALVES: Chair Murphy, Jennifer Alves.  
11 Could I interject really quick on that point? If you  
12 could, Pat, you did get feedback from CNU in generating  
13 the eight-story alternative too; correct?

14 MR. PATRICK ANGEL: Yes, that is correct. Part of  
15 their objectives for the project is to be a teaching  
16 school, so there's a certain number of beds that they've  
17 identified through their needs, as well as their  
18 supported by publications on what sort of size hospital  
19 you need. So, for example, if you asked the question,  
20 "Why didn't you look at a 100-bed hospital instead of  
21 280," well, there was a reason in regards to that. It  
22 was something that would match the objectives and be a  
23 reasonable alternative to implement.

24 MS. JENNIFER ALVES: Yeah, just to be really clear.  
25 These are realistic and feasible options. It's not a

1 strawman city staff created. This had, you know, input  
2 from the applicant. I just want to be clear about that,  
3 that this wasn't, you know, orchestrated without the  
4 applicant's feedback, and so, it is realistic.

5 COMMISSIONER GEORGE MURPHEY: I will let the  
6 applicant piggyback onto that question if they would  
7 like to, but it was just kind of interesting to me how  
8 the numbers were generated. That's all. But let me go  
9 to my next question. Pat, this might be for you.

10 There's been a lot of concern and express regarding  
11 relative proximity to the Stone Lake's Preserve and the  
12 flyway in general. The guidance that you have comes  
13 from the Department of Fishing Game and the Department  
14 of Wildlife, both state and federal, as far as  
15 mitigation measures. Is there any guidance as to  
16 locating such structures within close proximity to a  
17 reserve like this, or a flyway concerning the fact that  
18 the whole West Coast is a flyway?

19 MR. PATRICK ANGEL: Yes. Thank you, commissioner.  
20 For starters, you're correct. The Pacific Flyway is a  
21 rather large geographic area with a lot of, you know,  
22 appropriate (sic.) environment for bird stops, as well  
23 as quite a bit of development: city of Sacramento, city  
24 of San Francisco, Seattle, et cetera.

25 In regards to guidance, what we look at in the

1 EIR was the fact that: one, the site is not physically  
2 encouraging into the preserve. That is true. This is  
3 an indelible site that is being revitalized. But it is  
4 putting up a large building. It is changing uses on the  
5 site, so the question that we had to address was whether  
6 that building, given its size and its mass, could have  
7 an impact on bird movement. And so that was addressed  
8 in the EIR, and we got comments, and we refined the  
9 mitigation to further address that issue.

10 Now, depending on the bird species you're  
11 talkings about, they have varied sensitivities in regards  
12 to putting a large structure within proximity to  
13 something like the wildlife refuge. Some birds have  
14 excellent visual acuity, such as the Swainson's Hawk,  
15 because they're usually flying and looking for rodents,  
16 and others do not have such great visual acuity, such as  
17 hummingbirds that can -- it can crash into and hit a  
18 building and it can die from that experience.

19 We -- in the EIR include, both in the draft and  
20 refined and the final series of mitigation measures on  
21 the building that address that issue in regards to  
22 designing it to be more bird deterrent. And I can have  
23 my biologist get on and get into a lot of detail on  
24 this, but the series of measures that you can design a  
25 building -- where it becomes much more visible to the



1 birds that have maybe not have great visual acuity, such  
2 as the Swainson's Hawks -- so to see the building, they  
3 avoid the building and not run into it. And they've  
4 done several studies and shown anywhere from 70 to over  
5 90 percent effectiveness on these bird deterrent  
6 measures. So that's how we address the issue, and  
7 that's how we mitigated that issue --

8 COMMISSIONER GEORGE MURPHEY: Okay. So --

9 MR. PATRICK ANGEL: -- in addition to other  
10 features. I mean, we can get into a lot of detail here,  
11 if you wish, on various aspects of the project.

12 COMMISSIONER GEORGE MURPHEY: I don't need to do  
13 that right now. Thank you.

14 MR. PATRICK ANGEL: Okay.

15 COMMISSIONER GEORGE MURPHEY: But bottom line is,  
16 whether it's a hummingbird or a sparrow or one of the  
17 protected endangered species, there's a certain  
18 realization, I guess you could say, that is going to be  
19 some bird strikes.

20 MR. PATRICK ANGEL: Yes, certain birds are prone to  
21 striking buildings than others, yes.

22 COMMISSIONER GEORGE MURPHEY: All right. I guess  
23 this is one for staff. I even this will be my last one,  
24 I think. I want to kind of make it clear to folks. I'm  
25 referring to page 7 of the staff report, where the

1 proposed general plan text amendments is to allow  
2 essential healthcare facilities to be located in the  
3 floodplain. And it's stated it would bring our general  
4 plan and aligns with the state law. That state law, it  
5 does not mandate that we adopt the change. It just  
6 allows us to make it if we feel it is necessary. Am I  
7 correct in that?

8 MS. SARAH KIRCHGESSNER: Yes, that's correct. Our  
9 current language is more stringent than state law, which  
10 we are permitted to have our regulations more stringent.  
11 So yes, there is no requirement that we be consistent  
12 with the state law, in that we're more stringent.

13 COMMISSIONER GEORGE MURPHEY: Okay. Great. Thank  
14 you so much, Sarah. And with that, I am through with my  
15 questions. So we're going to move onto the -- and  
16 that's another question from commissioners. Sergio, do  
17 you have anything?

18 COMMISSIONER SERGIO ROBLES: Nothing. Thank you.

19 COMMISSIONER GEORGE MURPHEY: All right. Thank  
20 you.

21 COMMISSIONER SERGIO ROBLES: They're pretty much  
22 answered with the questions that you asked, so.

23 COMMISSIONER GEORGE MURPHEY: Mackenzie? I saw you  
24 shaking your head.

25 COMMISSIONER MACKENZIE WIESER: No additional

1 questions at this time.

2 COMMISSIONER GEORGE MURPHEY: Okay. Thank you.  
3 Excuse me. We're going to move onto the public hearing,  
4 but before I declare the public hearing open, I want to  
5 make a brief statement about how we're going to conduct  
6 this. So before -- as you might imagine, last look, we  
7 have about 12 hours of speakers lined up tonight.  
8 That's a large number. So to that point, everyone's  
9 going to be held strictly to their three-minute time  
10 limit. And in the interest of time, I would like to ask  
11 that if you are in agreement with the prior speaker's  
12 comments and with this issue, just to get up and say  
13 "I agree (inaudible)," or to say "I approve or  
14 disapprove of the project." Doing so will be sufficient  
15 to register your position on this project.

16 And please, please don't enter my comment as an  
17 attempt to disallow or limit anyone's right to having  
18 their three minutes to speak on this item. If you have  
19 a question, well, we have staff taking notes. Answers  
20 to questions that have already been answered relating to  
21 the final EIR are available online within that document.  
22 Other questions pertaining to this project will be  
23 answered at the end of public comment, if so directed by  
24 commissioner, and a recording of this meeting will be  
25 posted and made available on the city website the

1 following day.

2 I also will plan to take some breaks about every  
3 two hours to give everybody a chance to get their  
4 coffee, or whatever keeps them awake. And it won't be  
5 right at two hours. It will be somewhere where can find  
6 a reasonable break time. And, with that said, if there  
7 are no comments from any of my colleagues or staff, I'll  
8 ask Nicole to explain how the Zoom meeting will be  
9 conducted before opening the public comment period.  
10 Nicole?

11 MS. NICOLE: Thank you, George. As was mentioned  
12 on the slide, we will be asking you to raise your hand  
13 if you intend to give public comment. I will state your  
14 name and allow you to un-mute your line, and then a  
15 timer will display with the three minutes. And once the  
16 three minutes are done, we will thank you for your  
17 comment and move onto the next caller and/or next  
18 speaker. And for those, we do have a couple of folks  
19 that have signed into the meeting by calling in on their  
20 phone. And we will check in with them throughout the  
21 meeting. We will check in with each of them once to see  
22 if they have a public comment if they don't necessarily  
23 have the "raise your hand" feature. So, with that, I  
24 think we've covered everything, and I think you're ready  
25 to go, George.

1 COMMISSIONER GEORGE MURPHEY: Okay. Thanks again,  
2 Nicole. Okay. I will now open the public comment  
3 period for this item. And as is customary, I will ask  
4 the applicant to please come forward and present their  
5 project and answer questions from the commissioner.

6 MR. ALAN WARREN: Hello, can you all hear me? This  
7 is Alan.

8 COMMISSIONER GEORGE MURPHEY: Loud and clear.

9 MR. ALAN WARREN: Thank you very much. Well, thank  
10 you Mr. Vice Chair and planning commissioners. First,  
11 I'd like to just also say thank you for the  
12 consideration of the continuance as we had stated  
13 before. We will prepare to go forward. We had asked  
14 for a two-week continuance because of the nature of the  
15 project, and also some of the requests that we had  
16 gotten from constituents there from the city of Elk  
17 Grove. However, we are very happy to make our  
18 presentation this evening. I am joined by a host of  
19 experts in the field of engineering, construction,  
20 development, soil, sound and a whole host of other  
21 experts on the call, including Ms. Charlie Tijuana, who  
22 is here with me, with our firm. So again, thank you  
23 very much for allowing us to present tonight.

24 My name is Alan Warren, and I am one of the  
25 consultants on this project. And very happy to have an

1 opportunity to share with you information about the  
2 project, as well as answer questions.

3 And so, with that, I also want to thank Sarah,  
4 the entire team from the city of Elk Grove, and staff.  
5 We believe they've done an excellent job in their  
6 analysis. We appreciate the recommendation, and it was  
7 a pleasure to work with them. And so, I want to make it  
8 clear, as big as this project is, and the number of  
9 questions, comments, and concerns is some indication of  
10 the size, but it's also, I think, a strong indication of  
11 the importance of this issue. This is a very, very  
12 difficult time period we're in, in the country, in the  
13 region, in the city of Elk Grove, and seeing you and my  
14 involvement with them goes back over a year. And I have  
15 come to understand their commitment to Elk Grove and to  
16 the region over the time period in which I've known  
17 them.

18 CNU, obviously, as all of you know, has already  
19 made substantial investments in the city of Elk Grove:  
20 millions of dollars in their school of pharmacy, as well  
21 as their school of medicine. They also have a school of  
22 biological sciences, an undergraduate school. And so,  
23 CNU's commitment in this project's intent is to heal and  
24 to help. Medicine and medical providers are charged  
25 with the very delicate balance, one in which they

1 provide a critical public service, a very necessary  
2 public service, but their chief objectives are to heal  
3 and help, and this project is along those lines. The  
4 project team will be here to answer questions that,  
5 again, will help clarify some of the either  
6 misconceptions or, in some cases, questions that haven't  
7 been adequately answered, and I want to make sure that  
8 we state the obvious.

9         The project has had some challenges. Early on,  
10 there were challenges with some of the ways in which the  
11 intentions of the hospital were presented to the  
12 community. Sometimes it wasn't available to -- and not  
13 because it was intentional, but just because the idea,  
14 the concept, the ability to provide this major  
15 opportunity of a teaching hospital in the city of Elk  
16 Grove was so exciting and daunting at the same time,  
17 that there were things that needed to be corrected along  
18 the process, and so we've attempted to do that.

19         We've heard from the community. There have been  
20 a lot of questions submitted. And I want to touch on  
21 four major topics before I ask Paolo Diaz, the lead  
22 architect designer and project manager for the architect  
23 firm, to speak about the project. But the four main  
24 topics that we continually heard as it relates to this  
25 project are, how is this project going to be designed;

1 and why would it take the shape that it would take; and  
2 who's going on to design it? We're going to talk about  
3 that. Who's going to build the hospital? The CNU have  
4 the technical capabilities to oversee the construction  
5 of a facility like this and we're going to talk about  
6 that. The CNU have the ability to finance the hospital.  
7 The industry of Elk Grove has stressed over and over and  
8 over that they don't want to see what has been termed as  
9 a ghost mall on this particular site and for this  
10 project, and we completely agree with that. We don't  
11 want to see that either. And then last, the question  
12 about how this new hospital would be managed: How would  
13 it be operated, and who would be chiefly responsible for  
14 operating this hospital? And those were the four things  
15 that I would just like to touch on briefly and then ask  
16 Paola to add.

17 In terms of finance, this project has received a  
18 lot of attention from a lot of financial experts. Also,  
19 CNU had requested and was granted permission by the city  
20 council of Elk Grove to allow this project to be  
21 financed by bond finance. So, ultimately, that is the  
22 intention of the hospital; however, there are a lot of  
23 financial professionals involved in the early process  
24 and ultimately in the bond financing.

25 Currently, the project is led by a gentleman by



1 the name of Joe Pollack. He's the managing director of  
2 a financial institution called Caine Brothers, and Caine  
3 brothers is an arm of Key Bank. This information will  
4 be made public, and we have received already financial  
5 letters of intent to provide the financing, the in-room  
6 financing for the hospital, from several financial  
7 sources of approximately \$1 billion. The letters of  
8 intent that we have received are for approximately  
9 \$1 billion to finance the hospital. CNU is committed to  
10 making sure that all of the financing needed to complete  
11 the project is in place require prior to construction  
12 starting. And so we want to make sure that the  
13 community understands the commitment. And what that  
14 represents, is it's another mega substantial investment  
15 in the community.

16 There has been question about the economic  
17 impact, the jobs that it would create, both short-term  
18 and long-term jobs or permanent jobs. We've provided a  
19 study. Others are disputing that study. We are  
20 prepared to stand by that study, and we will  
21 subsequently back that up with some additional  
22 information at the appropriate time.

23 In terms of the construction team, we have been  
24 in negotiations with five of the leading construction  
25 companies in the healthcare industry. Five of them that

1 have demonstrated capabilities to deliver a high-quality  
2 modern facility, like what's being proposed tonight. We  
3 are in discussions right now and in hopes of finalizing  
4 the contract very soon with one of those construction  
5 firms. But what I'm stating tonight is that all five  
6 have a demonstrated track record in the ability to  
7 deliver this project that we are proposing.

8 In terms of operations, a lot of the questions  
9 we've gotten have been concerning how this hospital,  
10 once built, would be operated, and if CNU have the  
11 capabilities of operation of this type of new facility  
12 that's being proposed. There are -- and I'm very proud  
13 to say there are people who are born and raised in this  
14 community, in the region, who are part of the executive  
15 team of CNU.

16 One of the gentlemen that you may hear from  
17 tonight, if the questions are posed, is the gentleman by  
18 the name of Dr. Michael Wong. And just briefly, he is a  
19 UC Berkeley double major, but one of the majors is  
20 biophysics. He also has his MD from Tufts University,  
21 which is one of the preeminent medical schools in the  
22 country. And then in terms of operation, in operating  
23 the facility, he also has an MBA from Wharton School of  
24 Business. And so, what I'm doing is trying to lay out  
25 and answer some of the questions that have been posed to

1 us.

2 Now the EIR, I thought, did a good job in  
3 answering a lot of the other questions, like traffic,  
4 noise, environmental impacts. And those kind of things  
5 will be further analyzed, and at some point, no doubt,  
6 be challenged. We're prepared for that, and we welcome  
7 it, because we want to respond to all legitimate  
8 questions and issues.

9 And so, with that, the other -- the fourth leg  
10 that I had mentioned was design and the physical  
11 structure of the building. And the gentleman who I'm  
12 introducing now, Mr. Paolo Diaz, is a -- one of the  
13 executives at one of the preeminent architecture firms  
14 for designing and implementing extraordinary medical  
15 facilities throughout the State of California. Mr. Diaz  
16 can explain to you some of that, but they have a history  
17 of delivering extraordinary buildings for this purpose.  
18 And he is going to now explain the design, why the  
19 building is designed the way it is, and the intended  
20 functions. So, with that, I'd like to ask Mr. Paolo  
21 Diaz to now be given the opportunity to speak, please.  
22 So I'm not certain. Can -- do --

23 MS. NICOLE: Mr. Diaz, you should be able to unmute  
24 your mic now.

25 MR. PAOLO DIAZ: Okay. Thank you. So, thank you,

1 commissioners and members of the Elk Grove public. My  
2 name is Paola Diaz, and as Alan has mentioned, I am the  
3 project manager for FCA, which is the architectural  
4 design firm working on this project. I've been working  
5 on this since the beginning for over two years now. And  
6 I have also been presenting this through many of the  
7 town halls, so I've met many of the public, and heard  
8 some of the questions associated with this project. And  
9 you know, prior to this, I was the project manager for  
10 Zuckerberg San Francisco General Hospital, which is a  
11 public project, and again, in San Francisco. And also,  
12 I was the campus project manager for Washington Hospital  
13 in Fremont. So, as far as the experience in bringing  
14 these sort of projects, in terms of hospitals to  
15 completion, it's pretty much all I've done for most of  
16 my professional life.

17 I'm here to answer questions, you know, to  
18 address anything that hasn't been already been brought  
19 up by the -- you know, through the staff report or in  
20 our EIR report. And we have a team of people who can  
21 specifically address any questions that might come up  
22 from the general public, or from the planning  
23 commissioners. As has been noted, you know, this  
24 project, the first phase, at least, is a teaching  
25 hospital. That is going to be part of an academic

1 medical center. It is being driven by the fact that  
2 CNU, after its inception, has grown and been very  
3 successful in its development as a hospital, as a  
4 college of medicine, and they would like to take the  
5 next step in their development by having an associated  
6 teaching hospital with their facility. They also see  
7 the need for medical care in the region, and also, the  
8 need to include a lot of the more modern, you know,  
9 departments and care and best practices, you know,  
10 within the area.

11           You know, a teaching hospital is something that  
12 is designated, and a lot of the premiere hospitals in  
13 the country and in the world are teaching hospitals. UC  
14 Davis is a teaching hospital; Stanford is a teaching  
15 hospital. And what determines that partly, is there's a  
16 broad range of departments and programs that are  
17 associated with that, and there's an associated number  
18 of patient beds to support those programs, and that is  
19 one of the things that is driving the size and the  
20 number of beds. Pretty much, 400 beds would be  
21 considered on the lower end and the minimum for an  
22 academic medical center. It is well-documented, I  
23 think, in a lot of literature, that the care at teaching  
24 hospitals is as good, if not better, and a lot of times  
25 is better, than what would be normally provided in

1 another facility.

2 As noted by Alan, Dr. Michael Wong is available  
3 as well to answer some of those questions that come up.  
4 If there's additional queries about, you know, the  
5 teaching hospital or the operations of the upcoming  
6 medical center.

7 Over the past, you know, two years, we've worked  
8 closely with the city to address a lot of the EIR  
9 concerns. A lot -- some of them have been touched upon.  
10 We have made the project -- the Leave Gold (phonetic)  
11 Project -- and we are also meeting the requirements for  
12 reduced greenhouse gas emissions, as well as some other  
13 environmental impacts to reduce the environment  
14 footprint of the building. We have shifted the  
15 helicopter flight path, and we have followed the  
16 American bird conservancy's requirement for reducing  
17 bird strikes, as defined in Leed Pilot Credit 55, to  
18 really aggressively try to reduce the amount of bird  
19 strikes which are raised in between the EIR process.

20 We have also met with emergency response  
21 departments, both in the city of Elk Grove, and with the  
22 California -- Central California Intelligence Center, to  
23 address emergency response and security issues  
24 regarding -- that's related to the building. Amy  
25 Higera, who spoke earlier, is also available to answer

1 additional questions that come up regarding the EIR. So  
2 finally, we've been working on this, and some of this  
3 has been delayed by the pandemic, but one advantage that  
4 we've had with this is that we've been able to work  
5 closely with OSHPD, which is the Office of Statewide  
6 Health Planning and Development, and CDPH, which is the  
7 California Department of Public Health, to really try to  
8 implement a lot of the new guidelines and best practices  
9 to address the pandemic design into the hospital.

10 Although it's been long, I think by the end of the  
11 process, we'll have a hospital that will be designed and  
12 probably one of the first ones in the country, if not of  
13 the world, that will be able to function during a  
14 pandemic, and as well as managing infection control for  
15 all of the issues that would come up from it.

16 As I said, we have other consultant: noise  
17 consultants, waste management, civil engineering, LEED  
18 consultants, landscape architects. You know, we might  
19 try to have everybody who might need to address some of  
20 the questions that we've seen come up. So if requested,  
21 we can provide some subject matter experts on those  
22 issues. So with -- well, and just -- I can start to  
23 address some of the design issues, you know, if  
24 requested, but I think I will pass it onto back to Alan,  
25 and address it if these become questions that the

1 planning commissioners would like me to go through.

2           Very good. Thank you very much, Paolo. And so,  
3 as noted, there are about 20 or so other professionals  
4 and experts on the call who will be able to answer a  
5 variety of questions as they might come up. But before  
6 I hand the mic back to the chair, I'd just like to  
7 say a couple of things: one is that, you know, a lot of  
8 questions that have been coming up over and  
9 over -- we've tried to address all of them, obviously.  
10 We haven't addressed every question or concern, but  
11 we've tried to do what we could to address them in a  
12 very professional manner, and with a substantive backup  
13 for the questions that are being posed.

14           One of the things that, you know -- when I became  
15 involved with the project, we had some dates that were  
16 projected for opening the hospital. And that date was  
17 November of 2022, and obviously we're not going to make  
18 that date. But what I will say, is that we're doing  
19 everything we can to become as efficient as possible.  
20 And know that until we get approval, the clock really  
21 doesn't start for our grand opening. It's going to  
22 take, from approval -- if approval were to happen  
23 tonight and this was the ultimate approval, which we  
24 know is not the case. So -- and I'm just making an  
25 assumption, so I don't want people to read into this,



1 and I'm not attempting to be presumptuous -- but if we  
2 were to get formal and final approval today, it's going  
3 to take us approximately 30 months to have the hospital  
4 completed from the time we get approval. And what we  
5 know now is that the construction documents are a lot  
6 further along, we've been engaging with contractors, and  
7 so, we've gotten schedules from contractors, and that is  
8 our best estimate as of today.

9 In addition to that, there have been a  
10 significant amount of community engagement, and, you  
11 know, and we've received comments that some people are  
12 still -- they do not know what's going on or they  
13 haven't heard about the project, or they heard something  
14 that may or may not be correct, and we've attempted to  
15 address that information. We have a variety of folks  
16 that are from Elk Grove and the region that have been  
17 involved. Some of you will know them because you've  
18 interacted with them, but Gary Davis is someone who has  
19 been working with the community. Joshua Woods, as well  
20 as Brian Hollaway. We've done things like going door to  
21 door. We've done mailers. We're doing social media to  
22 help people understand what it is we're proposing, and  
23 to get feedback, and to address their requests.

24 And lastly, before I close, I want to say there's  
25 a gentleman who I've known for over 25 years, and I've

1 done business with him for about that long. He's 81  
2 years old. He is a -- a -- an announcer at one of the  
3 high schools for the football team, for the football  
4 program at one of the high schools in Elk Grove. And he  
5 called me this morning when he heard about the hearing  
6 and that we are going to planning commission tonight.  
7 And he said, "Alan, let me tell you something. At every  
8 high school football game we have -- and we have" -- I  
9 think he said about 11 high schools or approximately 11  
10 in Elk Grove. He said, "We have ambulances at all of  
11 our football games, and undoubtedly almost every game,  
12 somebody gets hurt. And guess what? We've got to drive  
13 them to Sacramento." He said, "We need a hospital in  
14 Elk Grove, and I'm hopeful that this is going to  
15 happen."

16 And I just made that statement, because, you  
17 know, I'm a former athlete as well, and I didn't think  
18 about it from that perspective. But healthcare and how  
19 quickly you can get it makes a difference. It makes a  
20 difference when you have strokes, heart attacks, and  
21 things of that nature. And so -- I mean, there's a lot  
22 of information to support more medical providers,  
23 hospital beds in the city of Elk Grove and in the  
24 region, and in fact, in the state. It is public  
25 knowledge that we are under supply and have a shortage.

1 And so, we believe that we have and can serve as part of  
2 the solution to that. I'm not saying that ultimately  
3 we're going to solve all the problems, but we believe  
4 that we can play a critical role in that process. And  
5 so, with that, I'll turn the mic back over to the -- to  
6 Mr. Vice Chair, and we stand ready to answer questions.

7 COMMISSIONER GEORGE MURPHEY: Okay. Thank you all  
8 on your team for the presentation. I'm just kind of  
9 checking the time right now. I don't want to get too  
10 far in, and I think we have time to go through  
11 commissioner comment before we open, and we can maybe  
12 take a break here shortly. Commissioner Wieser, I'm  
13 going to start with you.

14 Okay. No problem. Thank you, Alan Warren, for  
15 your presentation, and thank you, Paolo, for your  
16 presentation about the architecture and the design  
17 concept of the building. I wanted to thank you also for  
18 amending your schedules to be available to me this week.  
19 It was very helpful to have several conversations with  
20 your team. And as I warned you, I will be repeating  
21 several of my questions in order to create some level of  
22 transparency for those folks who are on this call.  
23 Knowing that I don't want to run too late, Commissioner  
24 Murphey, I do just have a couple of questions that arise  
25 specifically from this presentation, which sounded to

1 address some of the concerns that we have received via  
2 public comment over the last couple weeks. And so, I  
3 will dive in.

4 One, thank you for addressing the timeline  
5 concern that the public has raised with many of your  
6 marketing materials and the materials that were sent out  
7 to folks in the mail. You have listed a date of 2022,  
8 so I appreciate you letting us know that that is not a  
9 realistic date; however, tonight, you did state that in  
10 order to avoid having another ghost mall situation, you  
11 will commit to ensuring that no construction begins  
12 before financing and all of the financing has been  
13 received. So I heard that the clock starts based upon  
14 our decision tonight, or when you do get through  
15 commission, and I heard a date of 30 -- a time frame of  
16 around 30 months. Of course, that's all systems go and  
17 no issues. But is it feasible to assume that you will  
18 have the financing ready to go? Right away?

19 MR. ALAN WARREN: Can you hear me?

20 COMMISSIONER MACKENZIE WIESER: I can hear you.

21 MR. ALAN WARREN: Okay. Very good. So, so our  
22 financing would be -- and this is not untypical for most  
23 real estate development projects, be it hospital,  
24 housing, commercial shopping centers. The approval is  
25 needed in order to get the firm commitment of the

1 financing. And so what I mean by that is that once  
2 assuming -- again, I don't want to be presumptuous, but  
3 assuming your body approves us, and then ultimately the  
4 city council approves us, we would then have a -- we  
5 would sign and commit to a deal with the financial  
6 institution.

7 Well, one of the things -- because I've thought  
8 about this, you know. Because nobody wants another  
9 ghost mall or a situation that's half baked. That's  
10 going to be very expensive. CNU would lose a lot of  
11 money, and it would be completely unsightly for Elk  
12 Grove. But if that was a concern, that could be a  
13 condition of approval, you know. You can add a concern  
14 saying you don't want construction to start until  
15 financing is secured for the entire project or the  
16 entire phase.

17 You know, so you get -- this project is in three  
18 phases. So we're going to start with one phase. You  
19 may condition it and say financing is available for the  
20 first phase, then you build it. If you have financing  
21 for the second phase, you build it. But I do just want  
22 to comment, though -- because I think your question is a  
23 fantastic question. Because some people have also  
24 suggested that somehow the location for the hospital of  
25 the shopping center, is, you know, thriving -- kind of a

1 business concern right now. And that's not the case.  
2 It's effectively -- I don't want to say a ghost mall,  
3 but it is along those lines, and it did not start just  
4 now. The shopping center was basically on life support,  
5 even before CNU bought it. And I've looked at the books  
6 in the records, and some of the situations with the  
7 tenants. I've tried to help and have helped negotiate  
8 with tenants there. And so the location and the use, in  
9 my opinion, is an appropriate location for the use. And  
10 it then supports additional economic vitality in the  
11 region, in the city of Elk Grove, to support the  
12 businesses that will remain or come about because of the  
13 hospital. But the financial question is a legitimate  
14 question, and it's one that we would have no issue with  
15 that being a condition of approval.

16 COMMISSIONER MACKENZIE WIESER: Thank you. And  
17 while you bring up the economics of this topic, I see  
18 that there's a hand up in our group, so I --

19 MR. PAOLO DIAZ: I'm sorry, that was me. Yeah, I  
20 just wanted to clarify quickly about the approvals. You  
21 know, there were several layers of approvals.  
22 Obviously, your commission is one. The city council  
23 would be another. And then, you know, OSHPD and meeting  
24 the conditions of approval is another layer that would  
25 have to happen. And then only after all of those sort

1 of gauntlets are passed, then we could start the  
2 construction. And then that's where we're talking about  
3 the 30 month time frame that we were looking at would  
4 begin.

5 COMMISSIONER MACKENZIE WIESER: Commissioner  
6 Murphey, I feel as if I could go down many different  
7 roads and routes on this one. But let's go back to the  
8 financing piece. I appreciate applicant being willing  
9 to potentially look at a condition with regard to  
10 financing. But what I did want to touch on, is you made  
11 a comment, Mr. Alan, about the land use, and that this  
12 would be a good use of the land, because the current  
13 strip mall seemed or was or has been, quote, "a ghost  
14 mall."

15 MR. ALAN WARREN: Yes.

16 COMMISSIONER MACKENZIE WIESER: I think nobody in  
17 the community would deny the fact that the mall has been  
18 plunging and needed help for quite sometime. I do  
19 believe that the insertion of several businesses as of  
20 late have really been bringing life to that mall. And  
21 some of the concerns that are going to follow a  
22 potential project in this location is that this location  
23 has 180 degrees wildlife customers. So there are no  
24 customers in 180 degrees back facing this project, and  
25 so, anybody with retail experience or business knowledge

1 will tell you that it's very hard to run a very  
2 thriving, successful space, when half of your geography  
3 does not produce any customer. And so, I don't know  
4 that I can support where you're coming from with regards  
5 to the use being a great use here. And that's just  
6 where I'm at with that.

7 My next question is to the applicant: The 30  
8 year, 30 months -- would that -- when you say the  
9 hospital would be up and functioning in 30 months, is  
10 that the building as erect and that they're -- we've got  
11 a development? But at what -- how long does it take to  
12 get through all of the processes with regards to  
13 California state hospitals and the CDPH certifications  
14 and ensuring that you have all the proper documentation  
15 you need to run a hospital of this magnitude?

16 MR. PAOLO DIAZ: I would just jump in and answer  
17 that question. So the 30 months that we're talking  
18 about would be for the completion of construction. And  
19 then after that, you would go through a -- a -- a  
20 staffing and license period, as you've noted. And you  
21 know, some of that, they're -- we're -- they're trying  
22 to do in parallel as much as possible, but generally,  
23 that would take, probably, you know, approximately six  
24 months or so to be able to get through that -- through  
25 that process before. It would be operational.



1 COMMISSIONER MACKENZIE WIESER: Okay. So there  
2 would be -- there's a big, significant, financial burden  
3 for a building of this size to then not have it be able  
4 to generate revenue or income for about six months after  
5 having the building completed. And then, you know, we  
6 have had this conversation, and this should come as no  
7 surprise. It's been hard to read through the materials  
8 and know whether CNU is proposed to be a for-profit  
9 business or a nonprofit business. And so, when we talk  
10 about economics and reviewing an economic report  
11 that says that the city of Elk Grove is going to be  
12 receiving massive amount of benefits due to tax revenues  
13 and to sales tax and things like this, I'm wondering how  
14 much we can even make that justification when we do not  
15 know what type of business we are going to be  
16 facilitating within the hospital.

17 MR. ALAN WARREN: This is Alan. I think the city  
18 staff has done some additional work in regard to  
19 for-profit and nonprofit work. They may wish to share  
20 some of that, but what we've wanted to do as well, was  
21 to do some listening and help make that decision as we  
22 go through this process. And ultimately, there's the  
23 two options. If this is a bond finance deal, which is  
24 proposed to be ultimately -- if they're taxable bonds,  
25 it's for-profit. If they're nontaxable bonds, that

1 would mean it's not for-profit. But in terms of the  
2 economic impact, the economic people that are on our  
3 team can speak to the economics of it. But also, I  
4 think your city staff may have some information as well  
5 to share.

6 COMMISSIONER MACKENZIE WIESER: Maybe --

7 MR. SHAY NARAYAN: I'm sorry for interrupting. I'm  
8 acting interim director of finance. And so I had a  
9 couple of discussions with internal staff regarding the  
10 exemption eligibility for nonprofit versus for-profit  
11 hospital -- either operation, basically. And, you know,  
12 when it comes to the impact fees, such as roadway fee,  
13 fire fee, all of that -- after looking at the Nexus  
14 documents, whether profit or for nonprofit, either way,  
15 privately operated hospital is not exempt from those  
16 type of impact fees.

17 Also, given where the hospital is going to be  
18 located in the Stone Lake area, that would be under our  
19 CFD 2003-1. That would be our maintenance services --  
20 I'm sorry, 2006-1 maintenance services district. They  
21 would not be exempt under that levy or exemption. And  
22 then, also, our strong water drainage fee, in Zone 2,  
23 they would not be exempt in that sense as well. And  
24 then in our ad below our property tax for the county,  
25 there would be no exemption either. So we don't find

1 really any significant exemptions in taxes or fees that  
2 would be due to the city.

3 COMMISSIONER MACKENZIE WIESER: And you touched on  
4 sales tax and business tax -- or we wouldn't know, based  
5 upon an understanding, that the county receives far more  
6 of sales tax or property tax than the city itself -- but  
7 just to clarify for our residents what that implication  
8 looks like.

9 MR. SHAY NARAYAN: The implication in property tax  
10 or in the levies for special taxes?

11 COMMISSIONER MACKENZIE WIESER: I mean, you hit on  
12 the levies for special taxes, that it would not be  
13 exempt either way, so you've answered the fact that a  
14 project like this, be it profit or nonprofit, they would  
15 pay into road maintenance repairs, storm drains -- I get  
16 that. I guess there's been some talk back and forth  
17 around the fact that if the business operated as a  
18 nonprofit, the city could potentially see \$0 in terms of  
19 sales tax or property tax revenue. And I just want  
20 people to understand that, even me as a homeowner paying  
21 property taxes, my property taxes are paid to Sacramento  
22 County, and Elk Grove receives only a small fraction of  
23 that. But I just wanted you to, from where you sit,  
24 explain what that impact would be.

25 MR. SHAY NARAYAN: Yes, absolutely. So you are

1 correct. Whether for-profit or nonprofit, whether  
2 commercial office or a residential entity, ad-borne  
3 (phonetic) property tax, 1 percent assessment value,  
4 which would still be paid to the county. The city of  
5 Elk Grove receives a very small fraction of every  
6 property tax dollar that comes out of the city to the  
7 county. There's other public agencies that deliver  
8 services, where in the city, they get larger percentages  
9 of every dollar. We're in a revenue trial agreement  
10 with the county currently that expires in 2026. So our  
11 percentage does increase a little bit each year. We'll  
12 ultimately land around 6 percent at the end of that  
13 agreement. But yes, you are correct. We only receive a  
14 small fraction.

15 COMMISSIONER MACKENZIE WIESER: But if I --  
16 if -- and correct me if I'm wrong, but as a nonprofit, I  
17 would be exempt from paying these property taxes?

18 MR. SHAY NARAYAN: You would not be exempt from  
19 paying any property taxes.

20 COMMISSIONER MACKENZIE WIESER: Okay. Thank you  
21 for that clarification. Okay. I'm sure I'm going to  
22 have many, many more questions, but I think at this  
23 point, seeing that it's 7:59, I would love to pass it  
24 over to Sergio, and then we'll go from there.

25 COMMISSIONER GEORGE MURPHEY: Thank you, Mackenzie.

1 Sergio, would you like to ask any questions?

2 COMMISSIONER SERGIO ROBLES: Thank you, Mackenzie,  
3 for asking some questions. A lot of my concerns were  
4 also some of the questions you had regarding taxing for  
5 profit and nonprofit. I wanted to ask the architect,  
6 Mr. Paolo: I know that your architect -- or the  
7 architect firm has constructed hospital in different  
8 areas. Doing a quick little review on where these  
9 hospitals have gone, I can tell that none of these have  
10 actually been on wetlands. And also, none of these have  
11 been, I guess, I would say near a residential area. How  
12 difficult would it be to create a hospital in this  
13 specific location? Or what are the implications that  
14 would be there?

15 MR. PAOLO DIAZ: Well, every project, obviously,  
16 has its own -- has its own challenges. You know, the  
17 San Francisco General is built directly in the middle of  
18 the neighborhood. It's right in the middle of the city.  
19 So there was a lot of resident concerns, and then same  
20 with Washington Hospital and Fremont. It's very similar  
21 in the sort of the impacts with the surrounding  
22 neighborhood.

23 As far as the wetlands, you know, again, I think  
24 the major issue that we sort of have to address is to  
25 raise the building out of the flood zone, and sort of to

1 make sure that there are no critical elements that are  
2 within the area. Normally, in a hospital, you would  
3 have a lot of mechanical, electrical storage areas in  
4 the basement. For our project, we have what is  
5 basically a sacrificial parking garage, because of the  
6 prospect for flooding at different times. And then, as  
7 far as the soil and the basic, you know, structural  
8 components of that, that is really dependent on the  
9 geotechnical report. And we've had that, and that's  
10 been reviewed and approved, and we've been moving along  
11 with the structural design of the building.

12 Not to get too technical or into the weeds here  
13 because in the interest of time, one thing that has  
14 worked out with the structural engineers has noted that  
15 the excavation of the parking garage, basically, and the  
16 raising of the building almost equals the weight of the  
17 building on the site. So there's, you know, in the end  
18 of it has sort of a neutral impact on the soil weight.  
19 So that was sort of a serendipitous design issue that  
20 came out. I hope that answers some of your questions.

21 COMMISSIONER SERGIO ROBLES: Yes, thank you.

22 MR. ALAN WARREN: Sergio, I may just add. This is  
23 Alan. You know, currently, this shopping center exists  
24 in the flood zone now. And the new facility is going to  
25 be elevated out of the flood zone. So the operation of

1 the hospital and the new businesses in our plan -- there  
2 is a combination that we hope -- and we've offered to  
3 some of the existing businesses to relocate in our  
4 facility. So it would take them out of the flood danger  
5 that currently exists, if you will. And in addition to  
6 that, the hospital is also designed to add additional  
7 health and safety measures in the event of a 200-year  
8 flood.

9 And I know a number of people might ask for  
10 details. All the details are not worked out, because it  
11 is in collaboration with emergency services and other,  
12 you know, state agencies that will determine how we do  
13 it. But we are making plans and preparations to provide  
14 additional assistance and support in the event that  
15 there is a major 200-year flood in our building.

16 COMMISSIONER GEORGE MURPHEY: Okay. I see your  
17 hand up. Sergio, when you -- when Sergio's done.

18 COMMISSIONER MACKENZIE WIESER: Mine was really to  
19 piggyback off of Sergio's question about the building in  
20 the residential area, but I can wait.

21 COMMISSIONER GEORGE MURPHEY: Okay. Sergio?

22 COMMISSIONER SERGIO ROBLES: Yeah, thank you. In  
23 addition to building the residential area, I guess my  
24 concern is with the 400 beds, I know that -- and Alan, I  
25 know that you mentioned that because it's a teaching

1 hospital, it would be needed. Where -- I mean, the  
2 formula for the 400 beds, we're looking at different  
3 hospitals within the region as well. We see that there  
4 is a lower number of beds that were being constructed or  
5 implemented. Why are the 400 beds needed? I know that  
6 the argument was made that because, you know, it's  
7 COVID, but we also have to start looking at after COVID.  
8 And I know the argument was made it would be the biggest  
9 in the nation. But we also have to start looking that  
10 it's our region and in the city of Elk Grove. I just  
11 kind of wanted to know why the 400 beds, if there's  
12 anything. Or even if there was an alternative, I guess,  
13 design that was made just as the No. 2 with the 280 beds  
14 that was presented during the report.

15 MR. PAOLO DIAZ: Well, let me touch base a little  
16 bit on this, and maybe Dr. Wong can talk a little more  
17 about, you know, the teaching hospitals. You know, like  
18 I had mentioned, again, a teaching hospital is sort of  
19 defined by sort of the number of some of the department  
20 and services that they provide, and also they do  
21 research, as well as teaching, obviously, with  
22 associated medical school. So the foreigner beds is  
23 actually, like I said, more on the minimum side of what  
24 would be required for a teaching hospital. A lot of  
25 teaching hospitals get up to the 800, 2,000 bed size,



1 and then sort of a smaller teaching hospital would be,  
2 you know, the sort of the 400 to 500 bed size. So that  
3 is either sort of the driver as far as how the number of  
4 beds were done.

5 The initial, you know, Phase 1 would be  
6 approximately 250 beds, and then part of that is getting  
7 to sort of build out this -- that portion of the  
8 hospital and get it running. And then Phase 2 would  
9 bring it up to approximately 400 beds.

10 COMMISSIONER SERGIO ROBLES: I guess, what if, in  
11 the initial phase of Phase 1, the 250 beds, you find out  
12 that people are not, you know, there's not that many  
13 patients that are occupying the beds? Would you still  
14 continue building up to the 400 beds?

15 MR. PAOLO DIAZ: Well, I mean, I'll answer somewhat  
16 instead. You know, it would still function as a  
17 hospital. It may not meet all the requirements that CNU  
18 would like, you know, again, as far as having a teaching  
19 hospital and an academic medical center. But, I  
20 think -- and maybe we can talk about this later -- that  
21 all the indications are that there is a need for medical  
22 beds, ICU beds, within the region and specifically  
23 within Elk Grove. And then there's part of the economic  
24 model for the viability of the project.

25 COMMISSIONER SERGIO ROBLES: You're -- as the CNU

1 model also -- has it included -- because the new thing  
2 with what's going on, obviously that COVID is  
3 spreading -- and I knew that beforehand -- that  
4 healthcare professions or the professions in healthcare  
5 were moving towards tele-health. How would this change  
6 that specific model if we continue to go towards  
7 tele-health within the region? I know that this is a  
8 teaching hospital, but is this hospital also prepared to  
9 teach students how to do tele-health, I guess, is the  
10 question I'm asking.

11 MR. PAOLO DIAZ: Is Dr. Wong available to answer  
12 some of this? I mean, but -- so, again, we have the  
13 provisions for tele-health. But again, a lot of what's  
14 required from a teaching hospital standpoint is, again,  
15 sort of the clinical, you know, operations, for  
16 students. So, that would be required. But we have the  
17 infrastructure to be able to be to have consultations  
18 and sort of remote presentations of different cases.

19 Dr. Wong, I see you're on, so if you want to add  
20 onto that.

21 DR. MICHAEL WONG: Yes, absolutely. Can you guys  
22 hear me?

23 COMMISSIONER GEORGE MURPHEY: Yes, we can, Dr.  
24 Wong.

25 DR. MICHAEL WONG: Fantastic, everybody. Good

1 evening, everybody. Thank you so much for taking the  
2 time to allow us to share. Thank you, commissioners,  
3 and thank you to the citizens of Elk Grove for taking  
4 the time to participate in this forum.

5 Again, I'm Dr. Michael Wong. I'm a proud  
6 fourth-generation Sacramentan and proud to be part of  
7 the part of this project. I graduated from Kennedy High  
8 School and have many friends and family that live in the  
9 Elk Grove area. I completed my training in general  
10 surgery at UC Davis Eastbay, and I completed my plastic  
11 surgery training at Duke. I've been in academic  
12 medicine for 18 years, and thus, have really been  
13 involved in seeing teaching hospitals.

14 And I want to respond to a couple things: one  
15 about teaching hospitals -- teaching hospitals not being  
16 full-fledged hospitals, and that's far from the case.  
17 Because, as been brought up, I want to emphasize  
18 teaching hospitals bring together medical education,  
19 research, patient care in a particularly unique  
20 environment where the next generation of nurse,  
21 physicians, and healthcare providers are trained. Most  
22 of the top hospitals in the country are teaching  
23 hospitals.

24 So, really important. Question, Sergio: You  
25 asked about why not a smaller number of beds? It's

1 being proposed to have a 200-bed hospital in Elk Grove  
2 built by Dignity. Well, this isn't just a community  
3 hospital. Again, it is a teaching hospital, which will  
4 be a full-service provider of all specialties in  
5 medicine, with comprehensive care touching on medicine,  
6 surgery, pediatrics, family medicine, obstetrics and  
7 gynecology, with ultimate aspirations to provide  
8 trauma-level services in the area, a stroke center as  
9 well, and a transplant center.

10 So these are not just offerings that are  
11 available to a community hospital and cannot be done in  
12 a smaller hospital, such as a 280-bed as proposed in the  
13 alternatives. A 400-bed would be the minimum that would  
14 be required to have such a hospital. I mean, clearly,  
15 teaching hospitals have numerous benefits, but perhaps  
16 one of the most important metrics to the citizens of Elk  
17 Grove is really patient survival.

18 If you look at a study in the Journal of American  
19 Medical Association, patients that are treated at a  
20 major treating hospital have up to a 20 percent higher  
21 odds of survival compared to those treated at  
22 non-teaching hospitals. So I see this project as a true  
23 win-win situation. It will allow our students to  
24 receive top training at a centralized location --  
25 currently, they're scattered throughout the region --

1 and for the community, it will provide improved ease of  
2 access to topnotch health care, as well as add  
3 significant economic value to the region. So I hope  
4 that helps answer some of your questions. Thank you.

5 COMMISSIONER SERGIO ROBLES: It does. Thank you.  
6 I do have a question regarding the market share that  
7 will be done within the region. I mean if another  
8 hospital does come, that is going to change a lot of,  
9 I'm assuming the formulas, that is occurring within the  
10 cost of healthcare in the Sacramento region. And I  
11 don't want to get too in the weeds with that. I know  
12 that it's a complex issue, and I know that, you  
13 know -- but I would like to hear a little bit about how,  
14 when having the hospital, how will, I guess, will you be  
15 paying the bills if some of these beds aren't being met.

16 MR. ALAN WARREN: I am -- this is Alan, Sergio.  
17 And let me just say that, you know, you know, in basic  
18 economics, it's about supply and demand. You know, if  
19 you have more supply than demand, then pricing should go  
20 down and quality should go up, because the competition  
21 is more fierce. And so, to the extent that Elk Grove is  
22 one of the communities that has been oversupply in  
23 medical professionals and healthcare, beds, and  
24 opportunities -- what that should equate to is that  
25 better care, easier access, and better prices for the

1 constituents of Elk Grove.

2           Now, the business could be a different  
3 issue -- you know, the market share of one hospital  
4 versus another one. But I think the public stands to be  
5 the benefactor. And so, I think, you know, looking  
6 at -- as Dr. Wong said, the hospital that's being  
7 proposed tonight will offer much different services than  
8 some of the other hospitals. Some of the other  
9 hospitals will not offer certain things that Dr. Wong  
10 just mentioned, and they don't offer it now. and  
11 without going into details, because I think -- you know,  
12 I would love to see a scenario where Elk Grove is  
13 oversupply in medical professionals in places to be seen  
14 and treated.

15           And the one thing that, maybe, if it goes  
16 further, one of the medical professionals can mention is  
17 that, you know, time is essential in treating certain  
18 types of issues relative to healthcare. If you have a  
19 stroke, being able to get to treatment quickly can be  
20 the difference between having paralysis or having a  
21 normal functioning kind of remainder of your life. Same  
22 thing with heart attacks and, you know, strokes and  
23 other types of issues. And so, I'm not a medical  
24 expert, but in my tenure on this project and in the  
25 research that I've done, I've discovered that, you know,

1 the opportunities and the what ifs are unlimited; right?  
2 So, you know, there has been discussion about other  
3 medical institutions coming to Elk Grove. Maybe they  
4 come, maybe they don't. We don't know. But what we do  
5 know is that there is a project right now that has a  
6 very strong team and the capabilities to execute, and  
7 they are prepared to make a substantial commitment to  
8 the people of Elk Grove. And, you know, and we're here  
9 to hopefully win your support for this project.

10 MR. PAOLO DIAZ: I just wanted to just touch base  
11 really quickly, just to reiterate what he was saying  
12 before, that, you know, this is not just a hospital.  
13 That it's just their business model is just a hospital.  
14 Part of this is because it's associated with CNU as a  
15 medical school, you know, part of the need is to really  
16 have an associated hospital to be able to get to that  
17 next level as an institution. So it provides some  
18 synergy, and also, there has other reasons, from a  
19 financial and academic standpoint, that they would like  
20 to do this hospital.

21 COMMISSIONER SERGIO ROBLES: Thank you for that,  
22 Paolo. And I'm understanding -- I mean, I'm  
23 understanding, but I just think that healthcare -- I  
24 know that with supply and demand, I just can't see that  
25 it relates, because I think with what we've been seeing

1 now with the pandemic, and what we've been seeing now  
2 within the healthcare system is that we're trying to  
3 prevent people from actually getting sick; right? A lot  
4 of it has been now, you know, with food, with physical,  
5 with being fit. And I'm just trying to comprehend or  
6 even just, you know, understand the 400 beds, and then,  
7 how are we preventing people from actually getting sick  
8 in the first place? And I understand completely that  
9 this is a teaching hospital, and that's what it's meant  
10 to be. I just think that for supply and demand, maybe  
11 perhaps because of covid, which has sped up a lot of  
12 tele-health (inaudible) -- it's actually sped up a lot  
13 of preventive healthcare -- preventative care. I mean,  
14 do you think -- or is that going to be an impact on CNU,  
15 or even how CNU will actually be able to be providing  
16 healthcare for the citizens of Elk Grove?

17 MR. ALAN WARREN: So, I'm sorry. So, you know, I  
18 think the debate about what is best relative to how, you  
19 know, medicine will be practiced in the future is  
20 probably a much more challenging discussion with people  
21 who are much smarter than me trying to answer. And  
22 maybe more time is required, but you know, we have,  
23 again, Dr. Wong. There are a number of medical  
24 professionals that can speak it on it. I think the  
25 idea, though, is for this project to have flexibility.



1 The hospital is proposed for teaching purposes. It's  
2 proposed for, you know, academia. They're going to be  
3 high-level medical professionals at the institution, and  
4 it is -- this project has an eye towards the unknown.  
5 You know, undoubtedly, there are going to be other  
6 medical challenges, pandemics, and things that we were  
7 completely unprepared for now. And so, we are  
8 attempting to take lessons learned and incorporate them  
9 into this project. And to the extent that, Sergio,  
10 additional things like what you've been bringing up so  
11 astutely, can be identified -- could also potentially  
12 find a place in this institution.

13 And so the idea, as I mentioned before, is to  
14 help and heal, you know. And we want to, you know,  
15 encourage people from not getting sick. Like you  
16 mentioned, I think that's -- you're absolutely right.  
17 But that's, you know, a lot of things: It's diet; it's  
18 health; it's exercise; it's awareness. But ultimately,  
19 it's about having resources when you need them -- having  
20 beds when you need them. And right now, our city, your  
21 city, our region, our region -- we don't have them. We  
22 don't have the necessary medical facilities to deal with  
23 demand.

24 MR. PAOLO DIAZ: And maybe Dr. Wong has more data,  
25 but in a recent New York Times article, they noted that

1 California's medical model, you know, has, like, gone  
2 away from having hospital beds. And it has actually  
3 been exacerbated during the pandemic. I think their  
4 number is about 1.8 beds per thousand, and we're at the  
5 lower quarter of beds in the country, and overall much  
6 lower than a lot of the other -- sort of, other, you  
7 know -- sort of developed world. So there is a lot of  
8 need for beds, you know, in addition to the fact about  
9 the teaching hospital aspect.

10 COMMISSIONER SERGIO ROBLES: Thank you for that.  
11 And I have another question. And I think I asked Mr. --

12 MS. NICOLE: Dr. Wong has his hand raised. I think  
13 he wanted to ask a question.

14 COMMISSIONER SERGIO ROBLES: Oh, yes. Okay.

15 DR. MICHAEL WONG: Is that okay? I just wanted to  
16 add to what Paolo said. Clearly, you're talking about  
17 supply and demand. Clearly, there's no doubt that  
18 there's currently a bed shortage in this area. It's not  
19 unusual you go to the hospital, and there's 125 to 130  
20 percent occupancy of these hospital beds in the region.  
21 So what that means is that some patients come into the  
22 hospital, they are seen in the emergency room and they  
23 cannot get a bed, so they spend a night in the hallway.  
24 So, clearly there's a need. They need for hospital beds  
25 in Elk Grove was recognized over a decade ago, even

1 before the population of Elk Grove doubled, you know.  
2 As Paolo pointed out, when you're looking at number of  
3 hospital beds, it's typically rated per 100 or 1,000  
4 population.

5 So the average in the United States is  
6 approximately 2.5 hospital beds per thousand. If you go  
7 to the Northeast, a little higher -- maybe 3.8 and above  
8 beds per thousand. California is on the lower end --  
9 1.8 per thousand. If you look at the nine-county  
10 region, it's even less. It's like 1.67 per thousand.  
11 And unfortunately, Elk Grove is zero. So clearly,  
12 there's an issue there.

13 So, in terms of demand, you know, hospitals and  
14 healthcare -- this is an anti-cyclical business. You  
15 know, there's always going to be a need for healthcare,  
16 and it's been exacerbated by the pandemic. There's not  
17 going to be, unfortunately, ever a decline in the need  
18 for healthcare. So I'm not so concerned about the  
19 demand.

20 MS. CHARLIE TIWNA: Hi, Nicole. This is Charlie  
21 Tiwna. Dr. Reginald Low would like to add to that  
22 comment?

23 MS. NICOLE: Okay. Just give me one second. Dr.

24 MS. CHARLIE TIWNA: Thank you.

25 MS. NICOLE: Dr. Low, you should be able to unmute

1 yourself now.

2 DR. REGINALD LOW: Okay. Thank you. I really  
3 appreciate the opportunity to speak on behalf of the  
4 school. My name is Reginald Low. I am an  
5 interventional cardiologist. I've been in practice in  
6 Sacramento for 40 years. I'm on the active medical  
7 staff of Sutter Dignity, and I spent most of my career  
8 at UC Davis, where I was chief of cardiology for over 19  
9 years. I've dedicated my life to patient care and to  
10 teaching and training other doctors, and I've trained  
11 personally over 100 cardiologists.

12 I can tell you that on any given day, even before  
13 the pandemic, it was very difficult to get patients into  
14 any hospital in the Sacramento area. There would  
15 frequently be 50 patients or more waiting for admission  
16 in the emergency room and the recovery room at UC Davis,  
17 and the same holds true for the Sutter and Dignity  
18 hospital systems. So I don't think there's ever going  
19 to be an excess of hospital beds in Sacramento area.

20 In terms of tele-health, tele-health is an  
21 outpatient procedure that takes the case of outpatient  
22 visits and really doesn't apply to the occupancy of  
23 hospital beds. I'm available to answer any other  
24 questions. Thank you.

25 COMMISSIONER SERGIO ROBLES: Thank you, Mr. Low. I

1 did have a question followup regarding -- and I don't  
2 want to go into, again -- you can go down the road. But  
3 OSHPD -- you did bring that up. And now, I know that  
4 that's a different agency, so I just want to keep it  
5 very brief, but given that we're working, or given  
6 that -- obviously presenting in front of us with the  
7 application, what's -- can you share a little bit with  
8 us on the status of that, or what's occurring in order  
9 to kind of get approval from OSHPD?

10 MR. PAOLO DIAZ: Well, like you said, it can.  
11 be -- we can get into a lot of detail here, but I will  
12 try to give you sort of the broad brush. Actually, like  
13 we had talked about before, you know, this project has  
14 been pretty aggressive about trying to get this project  
15 done as quickly as possible. One of the things that is  
16 related to that is a lot of projects will wait until  
17 they get city approval, planning approval, before they  
18 get, you know, too far with, in terms of the schematic  
19 design development drawings for that. CNU has made the  
20 commitment and the investment to push the drawings and  
21 get that started so that there will be more of an  
22 overlap in terms of the approval process.

23 We've been, you know, discussing -- right now, a  
24 lot of the issues with the structural systems with  
25 OSHPD. We're actually submitting, you know, the revised

1 structural design through OSHPD within the next week or  
2 so. And so, you know, there -- that will be part of the  
3 approval process. We have also done sort of a  
4 collaborative, integrative project review with OSHPD,  
5 which means that we will be able to get a lot more back and  
6 forth and integrated work with OSHPD to get better  
7 comments and better approvals for that.

8 With that said, there's a lot of -- OSHPD has to  
9 do a lot of oversight. They make sure that there's  
10 nothing that is not built that doesn't meet the code or  
11 the, sort of the guidelines. So, therefore, we're, you  
12 know -- we still have ways to go, but we're much  
13 further along the process from any other hospital that  
14 I've been involved with.

15 COMMISSIONER SERGIO ROBLES: Perfect. Thank you  
16 for answering that. And then, Mr. Warren, I know  
17 that -- I mean, obviously, we've been in contact, and I  
18 just wanted to ask a little bit. I know that you  
19 addressed for us in the beginning, sort of, the  
20 misconception prior to you arriving or working for CNU  
21 on the project. A lot of what we heard, or a lot of  
22 what the community heard, and a lot of what we've been  
23 seeing has been, you know, the process of trying to  
24 become a Level 2 trauma center.

25 Now, I don't want to get ahead of myself. Again,

1 that's another thing that can go in the weeds. Could  
2 you touch a little bit about that, being that already  
3 there is another hospital that has an application and  
4 that is certified as a Level 2 trauma center?

5 MR. ALAN WARREN: Sure. Let me -- Sergio, thank  
6 you for that question. And there were a couple of, I  
7 think, really big issues that I had heard early on in  
8 the process that were -- one was, I think, either a  
9 misstatement or a misunderstanding or just  
10 misinformation. And that was that somehow CNU was going  
11 to be the development a wet lab. That was one of the  
12 big issues that, you know, I was really concerned with  
13 understanding that. And I wanted to make sure that  
14 people understood that's not absolutely not the case.  
15 The issue that you just raised about the Level 2 trauma  
16 center is the aspiration of CNU and the intention. And  
17 there has a process for that, though. And one of the --  
18 maybe either Dr. Low or Dr. Wong can address it more  
19 directly. But as I understand it, it is an aspiration  
20 of the hospital to provide that level of care to the  
21 people of Elk Grove. And that would be one of the, you  
22 know, significant health measures that will be part of  
23 the menu of services offered. And so, Dr. Wong or  
24 Dr. Low, would you like to add to my comment?

25 DR. MICHAEL WONG: So a trauma center requires it

1 to be certified by a body such as the American Colleges  
2 of Surgeons. And so, if you meet certain parameters,  
3 you can be given various levels of status. The highest  
4 would be Level 1 trauma status. We're looking for a  
5 Level 2 status, as there's already a Level 1 trauma  
6 service in the region. But we would be expanding trauma  
7 services farther west and south of that area, so we feel  
8 that there would not be any conflict with the  
9 neighboring hospitals.

10 But this is, as Alan has pointed out, is  
11 something that we're certainly aspiring to, and it would  
12 have to be only after the hospitals been in successful  
13 operation for a number of years with a proven track  
14 record, and that there is the demand and the need for  
15 that. But we anticipate that that there certainly will  
16 be.

17 COMMISSIONER SERGIO ROBLES: Thank you for  
18 answering that. I -- you know, there's a lot more  
19 questions right now, but I will yield my time right now  
20 to fellow commissioners to see if they have any  
21 questions.

22 COMMISSIONER GEORGE MURPHEY: Mackenzie, are you  
23 still with us?

24 COMMISSIONER MACKENZIE WIESER: I'm still here.

25 COMMISSIONER GEORGE MURPHEY: You -- go ahead with



1 your followup questions, if you remember them.

2 COMMISSIONER MACKENZIE WIESER: No, I've got so  
3 many notes. It's just, I'm like, okay. Thanks for  
4 going down that hole. Good one. No, Sergio, great job.  
5 Wonderful questions. You really hit on many of the  
6 things that I wanted to talk about and to ask the  
7 applicant. I think, at this point, I'm going to yield  
8 to you, Commissioner Murphey, and then get to public  
9 comment. And then I'm certain to talk your ear off.

10 COMMISSIONER GEORGE MURPHEY: Okay. We can do  
11 both. Good job, both of you, because you -- that's the  
12 good thing about going last. All the questions pretty  
13 much get answered. So I'm to make this really quick. I  
14 do want to go back to the cost of having an abundance of  
15 oversupply for beds versus what's actually needed.  
16 There seems to be some disagreement with how that  
17 operates, depending on who you talk to. And that is if  
18 you have an oversupply of beds, it actually drives up  
19 the cost, due to the fact that you're not filling beds,  
20 and you have to make up for the space not being used.  
21 And I'll liken that to maybe the contractor who has two  
22 back hoes he uses, and he's certainly not going to buy  
23 two more in case he needs it. He's probably going to  
24 rent the back hoe. So there's a bit of a conflict there  
25 in philosophy, it sounds like. But if you would like to

1 address that once again, I will be more than happy to  
2 hear what you have to say. Because it -- it kind of  
3 makes sense to me that if you over -- if you have an  
4 abundance of oversupply of beds, you're going to  
5 have -- you have to make up for that non-usage somehow.

6 MR. ALAN WARREN: Why don't we have one of our  
7 medical experts, either Dr. Wong or Dr. Low address your  
8 question, sir.

9 COMMISSIONER GEORGE MURPHEY: Thank you.

10 DR. MICHAEL WONG: Well, it's Dr. Michael Wong. I  
11 kind of take the opposite approach, because I don't  
12 really -- the premise of your question is that there's  
13 going to be an oversupply, which I don't think is going  
14 to be the case; however, as we talked about, we're  
15 building a hospital in stages. So we're starting off  
16 with 25, and then should we be running at full capacity  
17 at 250, that would then warrant an expansion to the 400.  
18 So that would be one stock-up (phonetic) measure that  
19 would address your concern about the potential for  
20 oversupply of beds. Certainly, if we got to the  
21 400-point bed limit and weren't able to fill it,  
22 certainly portions of the hospital could be cordoned  
23 off. But I honestly don't think that that's ever going  
24 to be -- (inaudible) we look around in our EDs  
25 currently, and they're 125, 130 percent occupancy. As

1 Dr. Low said, 50 patients a night are just waiting  
2 around for beds and can't get them in. So I don't see  
3 how that's even a possibility. With the continuing  
4 growth of the Elk Grove population and the surrounding  
5 areas, there's going to be even a good need for hospital  
6 beds.

7 COMMISSIONER GEORGE MURPHEY: Okay. I guess --

8 DR. MICHAEL WONG: I don't know if Dr. Low would  
9 like to add anything more to that.

10 COMMISSIONER GEORGE MURPHEY: I guess there just  
11 seems to be a difference of opinion and philosophy on  
12 that.

13 MS. NICOLE: Chair Murphey, Dr. Low his hands  
14 raised up.

15 COMMISSIONER GEORGE MURPHEY: Oh, yes. That's  
16 fine.

17 MS. NICOLE: Dr. Low, you can go ahead. You're  
18 still on mute, Dr. Low.

19 DR. REGINALD LOW: As I mentioned earlier, I've  
20 been in practice for over 40 years in Sacramento. And  
21 during this time, there has never, ever been an excess  
22 of hospital beds. Secondly, university hospitals are  
23 specialized facilities that have tertiary care services  
24 that other hospitals don't have. So it turns out the  
25 patient mix for most teaching hospitals is that

1 one-third come from outside the local region, because  
2 they supply -- they have these expertise services that  
3 aren't available at regular community hospitals.  
4 One-third will come from the primary care network, and  
5 the other third come through the emergency room and from  
6 referrals throughout the local region. So I can assure  
7 you that there will never be an excess of hospital beds.  
8 Even with this hospital, and even if Dignity goes ahead  
9 with their hospital, I am 100 percent confident that  
10 there will not be an excess number of beds.

11 COMMISSIONER SERGIO ROBLES: Great. Thank you.  
12 Like I say, most of the things I have -- I had written  
13 down, have been answered. I have crossed some things  
14 off as both Sergio and Mackenzie were asking questions.  
15 So I will just ask once more, if they have any followup  
16 questions that they'd like to ask. And then, Mackenzie,  
17 we will ask you again.

18 COMMISSIONER MACKENZIE WIESER: Great. I just  
19 wanted to piggyback on that. The two of your comments.  
20 And the supply versus demand comment and the woefully  
21 under-hospitalized comment. I agree with Sergio and the  
22 fact that in speaking with many other hospitals as well  
23 as knowing that length of stay in a hospital is  
24 extremely expensive to begin with, so a lot of surgeries  
25 and ambulatory things are being pushed, you know, to

1 outpatient care, such as, you know, orthopedic surgery.  
2 These types of things are moving towards outpatient  
3 surgeries, and I'm not sure if CNU plans to use some of  
4 of this bed count for outpatient services, or what that  
5 looks like. But I agree. I'm just going to echo again  
6 with the other commissioners. I agree that an  
7 oversupply of beds would actually drive the cost of care  
8 up, because if there were two hospitals and two  
9 hospitals were over-bedded, that would be two hospitals  
10 needing to charge more for their services, which would  
11 cost our residents more.

12 COMMISSIONER GEORGE MURPHEY: Thank you, and --

13 MR. PAOLO DIAZ: If I could just add in just  
14 quickly, looking at the hospitals, Elk Grove, 2019 had  
15 like a population of 177,000 and had zero med surgery  
16 license beds. Looking at comparable cities, Roseville,  
17 Fremont, and Santa Rosa, approximately about the same  
18 amount. Each of those had -- Roseville had 246 beds for  
19 100,000 beds, Fremont had 139 per 100,000, and Santa  
20 Rosa had 221. Elk Grove has zero at this point. So, I  
21 think that, again, the point that the doctors are  
22 making -- and then also, just like, as far as all the  
23 studies, is that, you know, there is already a need to  
24 expand the number of licensed beds within the region.  
25 And those are just the numbers. whether or not they're

1 utilized, that's obviously something that is subject to  
2 to opinion.

3 COMMISSIONER MACKENZIE WIESER: Sorry. Can I just  
4 piggyback on that? You know, I would love to see the  
5 data on this, and I would recommend CNU release data  
6 showing this severe need and being woefully  
7 under-hospitalized, because other organizations have not  
8 shown that to be the case. And, in fact, with the  
9 Dignity Health Hospital moving to Elk Grove, they  
10 examine meeting the needs of bringing beds to Elk Grove.  
11 I get what you're saying that this different because  
12 it's a teaching hospital, and that you will provide  
13 different services from that hospital as well. I'm just  
14 thankful to hear that it's a phased approach and not 400  
15 beds out the gate.

16 MR. PAOLO DIAZ: We can definitely provide, you  
17 know -- so one of the things that OSHPD does is they're  
18 mandated by the state to track all of the different  
19 types of beds and medical use for all hospitals  
20 throughout the area and throughout different medical  
21 service districts. We're in the Golden Empire District  
22 2 area, so, you know, they have giant spread sheets that  
23 you can spend hours digging into the numbers and make  
24 comparisons with all sorts of different regions, cities,  
25 or areas.

1 MS. NICOLE: Commissioner Wieser, Dr. Low has his  
2 hands raised to speak as well.

3 DR. REGINALD LOW: So I appreciate the  
4 commissioner's concerns about excess hospital beds, but  
5 I can assure you that, under oath, not a single hospital  
6 administrator in any -- in this region will tell you  
7 that there are too many hospital beds, or that the  
8 addition of this medical center would result in too many  
9 hospital beds.

10 As I said earlier, I've been here for over 40  
11 years practicing interventional cardiology. And I can  
12 assure you that during this entire 40-year period, there  
13 has never been an excess number of hospital beds. I can  
14 tell you that as we refer patients for cardiac surgery,  
15 many of these are delayed because of lack of available  
16 beds at the present time, even before the pandemic. So  
17 this is a non-issue.

18 In terms of cost, cost is advertised by law on  
19 the Internet. And as you know, the payers being the  
20 insurance companies, they negotiate prices with the  
21 insurance system. So if you have any type of medical  
22 health insurance, I can assure you that the insurance  
23 companies will tell you that additional beds will only  
24 improve the cost of healthcare, not raise the cost of of  
25 healthcare.

1 COMMISSIONER GEORGE MURPHEY: Okay, Mr. --

2 COMMISSIONER SERGIO ROBLES: I have a question,  
3 actually and wanted to follow up on that. You touched  
4 on the insuranciers. Is there currently right now an  
5 application that CNU has with these insuranciers within  
6 the region?

7 DR. REGINALD LOW: There won't be until the  
8 hospital's in place and practicing medicine. At that  
9 time, they will negotiate contracts. And hospital plans  
10 have contracted hospitals or preferred hospitals, and  
11 this will be the case as well. So I can assure you that  
12 the cost will not increase, and the insurance companies  
13 will not let it increase. In fact, if you call them, I  
14 am confident that they will tell you that the prices  
15 will improve.

16 COMMISSIONER SERGIO ROBLES: Thank you for  
17 answering that.

18 COMMISSIONER GEORGE MURPHEY: Sergio, did you have  
19 another question?

20 COMMISSIONER SERGIO ROBLES: Good for -- well, one  
21 of the questions I think that everybody -- a lot of the  
22 constituents that are all still on the line are going to  
23 be asking -- and I'm going to have to ask, just because  
24 I did hear it a lot, was the traffic concern. I know  
25 that we've been going a little bit through the overviews



1 of cost, of finances, and all that, but the traffic  
2 concern is one of the concerns that a lot of the  
3 residents do have.

4 Paolo, I know that you've been talking a little  
5 bit about this. Is there something that you feel or  
6 that you would like to allow to say, so that the  
7 residents can kind of understand what's going on there?

8 MR. ALAN WARREN: You know, Sergio, this is Alan.  
9 I think it might be better answered by the traffic  
10 consultant -- the third-party, independent, you know,  
11 traffic people who the analysis and can -- or even city  
12 staff also can, I think, can address this issue.

13 MR. PAOLO DIAZ: You can come back to me if there's  
14 anything else from a design standpoint after they answer  
15 his question.

16 COMMISSIONER SERGIO ROBLES: Thank you.

17 COMMISSIONER GEORGE MURPHEY: Sergio, did you want  
18 us to answer that, or do you want to wait for a few  
19 minutes? I'm about ready to wrap -- if it's okay with  
20 both you and Mackenzie, I will go ahead and wrap up this  
21 section for the time being, and we'll maybe take a  
22 ten-minute break before we actually open it up to the  
23 general public. I know people have been on the phone  
24 for a long time -- and I see that you agree with me. So  
25 we can kind of follow up with that with staff when we

1 come back. I do want to apologize for going a little  
2 long but I wanted to maintain continuity of our  
3 questions. So why don't we take a break. Take a  
4 ten-minute break, and we'll come back at five minutes to  
5 9:00. We'll take a ten-minute break.

6 COMMISSIONER SERGIO ROBLES: Thank you.

7 COMMISSIONER MACKENZIE WIESER: Thank you.

8 (MEETING ADJOURNS AT 8:45 P.M.)

9 (MEETING COMMENCES AT 9:45 P.M.)

10 COMMISSIONER GEORGE MURPHEY: Yes. We're back.  
11 Okay. I think left to mention that I have had a chance  
12 to reach out to the applicant, and several of the  
13 community organizations that were representing the  
14 community of Stone Lake. So I want to make that clear  
15 before we continue. As I would always like to do and  
16 intend to do, I just kind of try to manage. This got to  
17 slip my mind, so anybody else that wants to make any  
18 statements, now would be a good time to do that.

19 COMMISSIONER MACKENZIE WIESER: I think alluded and  
20 stated that I met with the applicant twice, and I have  
21 had several briefings with city staff as well, and I  
22 have had some meetings with other constituents as well.  
23 So yep, thank you.

24 COMMISSIONER GEORGE MURPHEY: Thank you, Mackenzie.

25 COMMISSIONER SERGIO ROBLES: Hey folks, I just want

1 to say thank you to everyone. Thank you to city staff.  
2 Thank you to the applicant. Thank you even to the  
3 constituents. Obviously, what's before us is a  
4 hard -- it's a hard project. But this is what democracy  
5 is, and I thank the commissioners that are here as well.

6 You know, as we move to the public comment,  
7 obviously, we welcome anything that is from the public.  
8 This is exactly what we've been appointed for and this  
9 is why we're here. And we're here as planning  
10 commissioners as well. And thank you to everyone.  
11 Thank you to the applicant. Thank you to the city  
12 staff, so --

13 COMMISSIONER GEORGE MURPHEY: Okay. Thank you  
14 both. Nicole, why don't we go ahead and start with  
15 the -- I'll open the public comment period. And let's  
16 go ahead and call the first caller. it looks like we  
17 don't have quite as many in queue as I thought we would  
18 have, so we can -- let's begin.

19 MS. NICOLE: Thank you, Vice Chair Murphey. Our  
20 first comment is actually a video that was submitted in  
21 advance of the 24-hour requirement, so we're going to  
22 play that first.

23 COMMISSIONER GEORGE MURPHEY: Okay. Thank you.

24 (VIDEO SUBMITTED BY STACI ANDERSON IS PLAYED.)

25 COMMISSIONER GEORGE MURPHEY: Is there supposed to

1 be any sound? Nicole, I don't have any sound.

2 MS. NICOLE: I believe so. Sandy, the sound isn't  
3 playing with the video, if you want to restart it.

4 VIDEO AUDIO: A lot of people don't realize what  
5 the West Side of Elk Grove is like and how the CNU  
6 proposal would negatively affect the community  
7 surrounding it. This is the West Side of Elk Grove.  
8 It's beautiful, quiet, safe, and people have invested  
9 their hard-earned money to buy homes, raise families,  
10 and make a life here. It's got beautiful parks and very  
11 low crime rates, excellent schools, very close to the  
12 Stone Lake's National Wildlife Refuge.

13 Behind this school, you'll see Nottoli Park, and  
14 this is one of the access points to the levee trail  
15 where you can see the wildlife from the refuge. Looking  
16 north, you can see the Stone Lake community. Just a  
17 hop, skip, and jump away, you'll find the other side of  
18 the wildlife refuge, where you get to see lots of birds  
19 and other wildlife that you wouldn't normally have an  
20 opportunity to experience. Looking back across the  
21 freeway, you will see where CNU currently has their  
22 college in the old AAA building.

23 The height doesn't stand out too much next to the  
24 1 and 2-story homes that surround it, but when you put  
25 perspective, you will see that the 13-story hospital

1 that they want to build will dwarf the community.

2 Looking down Elk Grove Boulevard eastward, there are no  
3 highrises, there are no building over four stories tall,  
4 as we're lucky enough to have plenty of land to spread  
5 out instead of building to the sky.

6 Stone Lake Landing is a collection of valuable  
7 services to the community. It went through hard times  
8 during the recession, but as it started to bounce back  
9 vacant spaces were beginning to be filled. And the  
10 surrounding neighborhoods were thrilled to be able to  
11 access commercial and recreational services within  
12 walking distance. These business owners brought value  
13 and amenities to the area and also gave back to the  
14 community. A prime example is Streaming Dog Brewery,  
15 who have held countless fundraisers and donated to  
16 various charities. And sadly, their business, which you  
17 can see in the center of this photo is right where CNU  
18 intends to build their hospital. You see the one and  
19 two-story homes that are on the edge of the entire  
20 property, but you'd never know it by looking at their  
21 promotional materials. Because, not surprisingly, CNU  
22 left out the surrounding community in its graphics. And  
23 if it still doesn't resonate, here's an example of the  
24 proposed height of the hospital to some famous  
25 landmarks. Like the Statue of Liberty, the Washington

1 Monument, or more familiar to us, the state capital.  
2 And when you compare it to the size of the adjacent  
3 homes, you will see how this project would absolutely  
4 tower over the residence, casting a shadow on  
5 master-planned communities.

6       There have been other projects that have come  
7 before the planning commission, where commissioners have  
8 made decisions based on how well a project fit in with  
9 the character of the area. More recently, the planning  
10 commission considered a request to change the general  
11 plan which would allow a developer to create a private  
12 gated community in rural Elk Grove. And the planning  
13 commission denied the request, primarily because the  
14 project will not comply with the general plan and the  
15 character of the rural community. While the  
16 neighborhoods in the West Side of the city value  
17 character too, the character of our small business  
18 neighbors, the characters of the surrounding wildlife,  
19 the character of our community, CNU in its proposed  
20 hospital in no way fit in with the character of any of  
21 those things. Please vote not to recommend this  
22 proposal to city council.

23       MS. NICOLE: And that concludes the first public  
24 comment. We'll be taking the video down.  
25 We also have a small power point presentation that was

1 requested 24 hours in advance by our next speaker, who  
2 will be Robert Burness. And I will be unmuting you  
3 here, Robert, and we'll get your first slide up, and  
4 then your three minutes will start. And just as a  
5 reminder, when your three minutes have ended, we will  
6 say thank you for your comment. You will go back to  
7 mute, and then we'll move onto the next person.

8 Mr. Burness, you may unmute your mic, and you may go  
9 ahead and speak. You're still on mute.

10 CALLER ROBERT BURNES: There. I'm sorry. Figure  
11 2, please? My name is Robert Burness. I'm speaking on  
12 behalf of the friends of Stone Lake's National Wildlife  
13 Refuge, the Environmental Council of Sacramento 2020,  
14 Sierra Club Sac Group, Sac Audubon, Zabar (phonetic)  
15 Sandhill Cranes, and Friends of Swainson's Hawk.

16 Our organizations do not support a hospital at  
17 this location. There are seven reasons: It would be  
18 poorly located to serve regional health needs; it is in  
19 a floodplain; it would violate general plan policy, and  
20 changing the policy to allow a hospital is unjustified;  
21 it would be the tallest building for miles and right  
22 next to a national wildlife refuge serving the heavily  
23 traveled Pacific Highway; it would cause bird strikes  
24 dangerous to both humans and birds; it would lead to the  
25 death of some sandhill cranes and white-tailed

1 kites -- both are fully protected by law. That means no  
2 take. We challenge the EIR determination, that the  
3 proposed mitigation measures reduce the biological  
4 impact to less than significant. And finally, it would  
5 promote harmful growth in reducing impacts on nearby  
6 agricultural lands.

7 I would like to focus on just one of these  
8 issues: flooding. This map from the graphed EIR shows  
9 the 200-year flood event with levee failure. It is  
10 based on a future sea-level increase of one foot, not  
11 the more likely future increase of three to 5 feet. It  
12 shows Elk Grove Boulevard under three to 5 feet of  
13 water. The approach to the hospital is under five to  
14 10 feet of water. While the hospital itself would be  
15 above the floodplain, something that the applicants  
16 advocate, no one would be able to get to it except by  
17 helicopter or boat. The whole reason for the policy and  
18 the general plan is to avoid this sort of situation. It  
19 was born out of the Katrina hurricane disaster in New  
20 Orleans.

21 In order to approve this project, you're also  
22 being asked to change the policy and the ordinance that  
23 implements it. Change would add the words, to the  
24 extent, feasible. A time-honored way of making a  
25 foolish policy ineffective to the point of



1    meaninglessness. And it adds wording the focuses of  
2    policy on protecting the building from flooding, not on  
3    protecting the ability to get to leave the building.  
4    Note that this change would also relax the standards for  
5    locating facilities in the 100-year floodplain as well.  
6    For a Trauma 2 hospital, that is just not acceptable.  
7    Desire of one land owner to expand on land they have  
8    purchased, knowing that it had some degree of flood  
9    risk, should not justify significantly weakening the  
10   policy that was justifiable policy adopted by the  
11   county.

12           This by itself is sufficient to deny the project.  
13   We have submitted a letter identifying in detail our  
14   issues with this project. We hope you will heed our  
15   concerns. There will be other speakers in our group  
16   addressing some of these.

17           MS. NICOLE: Thank you, your time is up. Sean  
18   Wirth, you may now unmute your mic. You're next up, and  
19   you have three minutes.

20           CALLER SEAN WIRTH: Could you pull up the third  
21   slide in that grouping that Rob provided? My name Sean  
22   Wirth, I'm the conservation chair for the Mother Lode  
23   Chapter of the Sierra Club, which comprises 24 Northern  
24   California Counties in 11 groups. I want to start off  
25   by explaining to you all what a California

1 fully-protected species is, because most people are not  
2 that familiar with it.

3 Most people are aware of the California  
4 Endangered Species Act, which was formed in 1970. But  
5 prior to that, certain animals were done  
6 (inaudible) -- and they were given this special status.  
7 They're not to be harmed or killed. And I want to  
8 contrast how this project is dealing with two  
9 fully-protected species: the Greater Sandhill Crane and  
10 the white-tailed kite. With the project that you will  
11 all be familiar with, which is to the west, which is the  
12 Delta Tunnel Project.

13 The Delta Tunnel Project is going to be putting  
14 in transmission lines to be able to run the boring  
15 equipment, as well as to do the work at the intakes.  
16 And they are fully aware they're not allowed to kill or  
17 harm the species. So as a result, they're going to be  
18 undermining all their transmission lines to the tune of  
19 \$100 million or more. This projects plan to deal with  
20 the tape of fully-protected species, which you're not  
21 allowed to do in California law, is to state that they  
22 will be killed, but that it will not be a significant  
23 impact in their population, which is far less than  
24 satisfactory.

25 Could you please pull up the fifth slide? I want

1 to shift to helicopter strikes, because this is one of  
2 the ways that the birds will likely be killed. And  
3 there was a new flight path that was suggested, that,  
4 rather than flying over the refuge, they would fly from  
5 the south over the urban area to the hospital, and this  
6 was supposed to minimize the bird strikes. And I want to  
7 talk a little bit kettling and what kettling is. Birds  
8 kettle when they are going to travel to a farther  
9 distance they normally do. And what they do is they'll  
10 fly up in the air and look for thermals. Now, thermals  
11 allow them to gain altitude. These birds will be  
12 starting off in the refuge. The best kettling  
13 opportunities happen to be over the urban area, because  
14 kettling requires thermals, and thermals are created by  
15 a differential in temperatures. The ground heats up  
16 that causes heat to rise. The temperature differential  
17 between an asphalt roof and an asphalt ground and  
18 concrete is going to be significantly greater than that  
19 provided by grass or trees. So these birds will quite  
20 likely be kettling right over the flight path for this  
21 plane.

22 If you remember the Slide No. 3, close to  
23 28 million birds are going to be migrating through the  
24 this area in the fall. Close to 15 million are going to  
25 be migrating through this area in the spring. Not on

1 the flyway; in this specific area. So there are birds  
2 essentially everywhere. They will be kettling over the  
3 city. The Master Response No. 4 brought up the fact  
4 that helicopters have greater (inaudible) than an  
5 airplane. This is likely true. They fly much lower.  
6 They have more open glass to see things. But unlike a  
7 helicopter, unlike an airplane, helicopters do not have  
8 a radar, so they're not going to be able to -- (audio  
9 abruptly cuts out).

10 COMMISSIONER GEORGE MURPHEY: Nicole, did we lose  
11 the microphone, or is the three minutes up?

12 CALLER BARBARA LEARY: Hello? Hi, this is Barbara  
13 Leary, and I'm speaking on behalf of the Sacramento  
14 Group of the Sierra Club. And I'm expanding on the  
15 grave environmental and health concerns that have no  
16 evidence in the staff report of a need for this facility  
17 at this location, and we appose this project. The staff  
18 report notes a number of unacceptable overriding  
19 considerations, which cannot be mitigated and  
20 erroneously notes mitigation measures that are neither  
21 compliant with stat for the Protected Species Law or are  
22 feasible.

23 Health risks for our Elk Grove residents are  
24 inherent in this project as well. If you can show Slide  
25 1, it shows there are 1200 beds in the Sacramento area.

1 100 of those are approved for construction within five  
2 miles of this site for Dignity Hospital, which maintains  
3 the option to expand that facility to 330 beds. I want  
4 to note that the current pandemic has seen a need for  
5 more beds than are usually occupied. The Sacramento  
6 area did not significantly exceed the existing capacity,  
7 leaving an alternative care site essentially unused.  
8 Projections for future residential growth suggesting a  
9 need for a hospital on this site are not substantiated  
10 by facts. As noted on the map, the Stone Lake's  
11 Preserve to the west precludes development, and the  
12 Consumnes River Preserve precludes development there.  
13 If future beds are needed in the region, that does not  
14 justify the poor placement of this facility.

15 Environmental and health concerns include one of  
16 the overriding considerations notes that carbon  
17 emissions will exceed Sacramento Metro air quality  
18 district standards. There is no future proposed public  
19 transit for this area to mitigate that. Healthcare  
20 facilities should be supporting high-quality air  
21 standards, promoting health, not risking health. As  
22 noted, the site is impassable in a 2,000-year flood;  
23 emergent patient access would be dangerous, delaying  
24 critical care for some, or causing harm to those who  
25 decide to proceed through a flooded area. Evacuation

1 would be impossible.

2           Finally, Stone Lake's Wildlife Refuge is a  
3 critical piece of the international land feature. The  
4 Pacific Flyway, which is already constricted in this  
5 area for the use of 27 million birds. There is no  
6 mitigation for the killing of this species. Altered  
7 flight paths do not take into consideration that birds  
8 do not adhere to human-engineered flight paths and will  
9 likely enter the flight path of the helicopter, killing  
10 the birds as well as endangering the passengers or  
11 patients being transported.

12           Finally, this is an unacceptable project, and I  
13 am asking you to vote no on this project. Thank you for  
14 your time.

15           MS. NICOLE: Thank you for your comments. Alyssa  
16 Lem, your line has been unmuted. You may begin your  
17 three minutes.

18           CALLER ALYSSA LEM: Hi, can you hear me?

19           MS. NICOLE: We can.

20           CALLER ALYSSA LEM: Awesome. Hi, my name is Alyssa  
21 Lem, and I'm the co-president of Franklin High School's  
22 Sustainability Club in Elk Grove Unified School  
23 District. Upon reviewing this project's EIR, I can't  
24 ignore the impacts that this will have on the  
25 environment. On behalf of the members of our club, I

1 would like to express my support for the arguments made  
2 against the hospital's current site, especially by the  
3 Friends of Stone Lake, and ask that you please  
4 reconsider the hospital's location.

5         Although I'm all for having more hospitals, jobs,  
6 and access to healthcare, the hospital's current  
7 proposed location is too damaging to local wildlife,  
8 especially the wildlife in Stone Lake Refuge. As a  
9 refuge, Stone Lake is supposed to be a sanctuary in a  
10 place where protection for wildlife, which the  
11 hospital's proposed location will jeopardize that,  
12 putting their health and livelihoods at risk as  
13 acknowledged in the project's EIR.

14         Growing up in Elk Grove all my life, I've seen  
15 our city become more and more disconnected with nature,  
16 and more wildlife has been replaced by human  
17 development. As Stone Lake is one of the few wildlife  
18 refuges in Sacramento region, it is important that we  
19 are more considerate of the few spaces that are  
20 designated to them. Overall, the impacts this hospital  
21 will have on our local environment are too significant,  
22 and I fear the consequences that will also burden my  
23 generation and our future generations because of the  
24 choices that you made today. Please reconsider the  
25 location of CNU's hospital project, for the benefit of

1 our present populations, and the future ones as well.

2 Thank you for your time.

3 MS. NICOLE: Thank you for your comments. Sandy,  
4 if you can go ahead and pull up the timer for the next  
5 one, so we can get that on screen for everyone. And  
6 Jake Rambo, I will be unmuting your line, and you may go  
7 ahead and speak.

8 CALLER JAKE RAMBO: Thank you. My name is Jake  
9 Rambo. I am the president of the Stone Lake Homeowners  
10 Association. I want to thank each of you commissioners,  
11 but more importantly, neighbors here in the community  
12 for the time you're putting in to study and act on this  
13 project. You know, one of my favorite quotes from Maya  
14 Angelou was the statement: "When someone tells you who  
15 they are, believe them."

16 Tonight, CNU has admitted what they've been  
17 accused of for a long time, and that is they're a  
18 dishonest and not a trustworthy organization. I wish  
19 you would have turned my camera on, because I'd like to  
20 show you a mailer that I'm holding up right now. CNU  
21 put in every post office box in this town on  
22 February 5th, just 13 days ago, in which they claimed  
23 they would open their hospital in 2022. Or, you can go  
24 to their CNU website. Go to [www.CNUhealth.com](http://www.CNUhealth.com), where  
25 they continue to claim that their hospital will break



1 ground in 202 and open in 2022.

2 When they have been called out repeatedly on that  
3 dishonesty, they've attacked. They've called the home  
4 owners dishonest. They've called us NIMBYs. They have  
5 said atrocious things about us, and tonight they finally  
6 admitted that that was dishonest. They told us who they  
7 are, and now we need to believe them. Tonight, you've  
8 heard nothing but a lot of speeches, a lot of "trust  
9 us." Well, they haven't earned that trust.

10 Over and over again, we've heard school needs  
11 drove the decision. You've heard Mr. Warren say that  
12 repeatedly -- not community needs. Not neighborhood  
13 needs. They said they did outreach. Mr. Warren told  
14 you four questions. I'm not sure how they came up with  
15 those questions, because CNU didn't conduct a listening  
16 tour. CNU didn't meet with the community. They went  
17 out and told the community what they were doing: Take it  
18 or leave it.

19 For over a year, there's been a standing  
20 invitation from the Stone Lake Homeowners Association to  
21 CNU's closest neighbor to meet with us to discuss  
22 mitigation and options for improving this project. To  
23 date, CNU has never met with our association. Instead,  
24 they have offered to have a press officer come and give  
25 us a presentation that will explain why our concerns are

1 not valid. Mr. Warren has said a lot of things tonight  
2 that are concerning, and frankly, three minutes wouldn't  
3 begin to start it. He says, in response to other health  
4 plans, "Maybe they'll come." Mr. Warren, Dignity has  
5 already broken ground. They'll be the first hospital in  
6 Elk Grove, contrary to your claims on February 5th and  
7 on your website tonight.

8           You mentioned that your hospital is going to be  
9 administered by a Wharton graduate. I wish Dr. Wong  
10 would have corrected that that record. Dr. Wong is not  
11 a Wharton graduate. According to his LinkedIn, he will  
12 graduate sometime next year.

13           MS. NICOLE: Your three minutes has ended.

14           CALLER JAKE RAMBO: Details matter.

15           MS. NICOLE: Give us just a moment here. We need  
16 to fix the clock. And then, Barbara Patterson, you'll  
17 be up next. Barbara, you may unmute your line and go  
18 ahead.

19           CALLER BARBARA PATTERSON: Good evening. As an  
20 11-year Elk Grove resident, I can say there's a lot not  
21 to like about the CNU project and even less to like in  
22 how CNU has conducted itself, without all the political  
23 pressures, campaign contributions, and finagling by our  
24 former mayor, this uncooked project would never have  
25 gotten this far. It's frustrating and disappointing.

1           Tonight, we'll be focusing on many things:  
2   financing, helicopter heights, amending the general plan  
3   and many other things within the plans of the city of  
4   Elk Grove. And just how many birds is it really okay to  
5   kill? But most important question is, why? Why would  
6   we have to wind ourselves up deciding in which ways our  
7   community would most acquiesce to squeeze this  
8   monstrosity into this small space. This whole mess  
9   comes down to one man -- just one man, Alvin Chung, who  
10   would prefer his students be able to walk across a  
11   parking lot, rather than take a shuttle down the road.  
12   Much of what makes this project intolerable aside from  
13   CNU's ongoing disrespect and deceit is tied to this  
14   special location. CNU is trying to shoehorn this huge  
15   project into a ridiculously inappropriate space, because  
16   one man has been stubbornly unwilling to look at any  
17   other site. Is this behavior of someone putting our  
18   community first? We don't need another hospital. The  
19   brand new totally modern Elk Grove Dignity Health  
20   hospital will be online shortly and serve us very well,  
21   as Dignity has done for over 100 years.

22           CNU has promised us economic gains based on a  
23   poorly written report coauthored by HBNU board member  
24   and now debunked. There are locations outside of a  
25   flood zone away from the flight path of endangered birds

1 better served by public transportation and without being  
2 landlocked by neighborhoods and wildlife preserves.

3 This site literally has zero benefits, except that it  
4 shares a parking lot with the CNU school. Let's not  
5 accept being so bullied. As per codes, this project  
6 makes absolutely no sense. It's not good for Elk Grove.

7 As our representatives and neighbors, we ask you to put  
8 the responsibility for fixing this mess back on CNU  
9 where it belongs. Put our residents and the city needs  
10 first. Planning commissioners, please vote no. Thank  
11 you for your time.

12 MS. NICOLE: Renee Roberts, you may now unmute your  
13 line and speak. Renee, your line is still muted, if  
14 you're trying to talk. Renee, I will come back to you  
15 again in a moment, and we'll see if we can get you  
16 working.

17 Christopher Nelson, you may unmute your line and  
18 begin speaking.

19 CALLER CHRISTOPHER NELSON: Good evening, planning  
20 commissioners. My name is Chris Nelson. I'm a  
21 journeyman with the sheet metal worker's local union,  
22 the one in Elk Grove. And I also live in Elk Grove, and  
23 my kids go to school here. One of the challenges I face  
24 every day is being able to, as construction worker in  
25 Elk Grove, is to have to travel far and find sustainable

1 work. That means time away from my family and long  
2 hours on the road.

3 Well, supporting for you tonight is not just an  
4 important project for the long-term sustainability of  
5 our community. But while this project is under  
6 construction, it will be built with local labor force  
7 that is highly skilled and qualified. The construction  
8 workers on this project will make area-standing wages  
9 and benefits, and the contractors will utilize the State  
10 of California apprenticeship programs for the  
11 recruitment of the next generation of Elk Grove  
12 residents into the construction trades. I'm asking you  
13 tonight to please support this project that's in front  
14 of you for a vote. I want to see even more Elk Grove  
15 residents take the park of the union trades, so they may  
16 have the ability to thrive in Elk Grove like myself.  
17 Thank you for your time and support. That's all I have.

18 MS. NICOLE: Thank you for your comments. Carter  
19 Nelson, you may now speak.

20 CALLER CARTER NELSON: Hi, can you hear me?

21 MS. NICOLE: We can. Go ahead.

22 CALLER CARTER NELSON: Good evening, commissioners.  
23 My name is Carter Nelson, and I'm speaking tonight on  
24 behalf of the Sacramento Association of Realtors and  
25 our 7,000-some members. SAR is in support of the CNU

1 Medical Center, which we believe will provide long-term  
2 stimulus to the regional economy and contribute to  
3 higher home values. It will create lasting professional  
4 jobs to the area and intern many of those employed by  
5 the hospital will settle in Elk Grove for the long-term.  
6 This will help support strong neighborhoods and  
7 strengthen the local economy. This CNUMC will also be  
8 Elk Grove's first full-service hospital, and we feel  
9 that having that accessibility for the people of Elk  
10 Grove is of the utmost importance. Thank you for your  
11 consideration.

12 MS. NICOLE: Thank you for your comment. Ian  
13 Davidson, you may unmute and begin speaking.

14 CALLER IAN DAVIDSON: Okay. Thank you,  
15 commissioners, for your time. So I have lived in Stone  
16 Lake,<sup>2</sup> a residential community for the last ten years.  
17 And I hope to live in a residential community for  
18 another ten years, not an industrial zone. In this time  
19 where elected officials and appointed officials lack the  
20 courage to make the decisions that they should make, I  
21 hope that you have the courage to make the decisions  
22 that benefit your constituents and not the industry.

23 I want to draw your attention to several issues  
24 that relate to this environmental impact study, from  
25 somebody who lives in the area for over a decade. It

1 seems to be that the environmental study is very  
2 shallow, and its investigation of how a 14-story glass  
3 building with the helicopter pad is to be in the  
4 200-year flood zone near a national wildlife sanctuary.  
5 The experts in the Sierra club have pointed out some of  
6 the flaws with building this hospital near a national  
7 wildlife zone.

8 But as a resident, I can tell you an obvious  
9 flaw: In your plan, the mitigation study produced talked  
10 about a new helicopter path. Well, that helicopter path  
11 flies directly above my house. And guess what else  
12 flies directly above my house? Lots and lots of birds.  
13 So these mitigation strategies that have been suggested  
14 are just not correct.

15 The other problem with the environmental impact  
16 study, that it severely understudies the issue of how  
17 this will impact our neighborhood. These roads were  
18 built were residential traffic. I know this because  
19 every morning, prior to the pandemic, I would spend 15  
20 to 20 minutes on the on-ramp trying to get onto I-5, and  
21 another 15 to 20 minutes trying to get off the on-ramp  
22 to I-5 in the afternoon. Building a hospital, which  
23 will increase the traffic, will only exacerbate these  
24 problems.

25 Other aspects on the impact of the neighborhood

1 have been totally ignored. The amount of light  
2 pollution that a 14-story building will provide on the  
3 neighboring houses is astronomical. How will children  
4 sleep? How will dogs behave in a 24-hour constant glow?

5 Finally, and most importantly, I visit the UC  
6 Davis Medical Center in downtown Sacramento on a weekly  
7 basis for the last decade. I hope the commissioners  
8 walk that neighborhood and understand the impact that it  
9 has had. I regularly park on the streets because I  
10 can't get parking. The local businesses are typically  
11 for the hospital and not for the residents. Building a  
12 hospital here will have the same impact that it had  
13 there. It turned a residential area into a default  
14 industrial zone. Say no and have the courage to say no  
15 to this project.

16 MS. NICOLE: Thank you for your comments. Tim  
17 Murphy, you may unmute your mic and go ahead.

18 CALLER TIM MURPHY: Thank you. I am CEO for the  
19 Sacramento Regional Builder's Exchange, a commercial  
20 construction association representing more than 900  
21 construction companies in the greater Sacramento region.  
22 I am here to express our organization's support for the  
23 CNU Medical Center Project. In addition to the project  
24 2400-hospital-related jobs per year this project will  
25 bring to Elk Grove, there are also hundreds of



1 well-paying construction jobs that will take place  
2 during the duration of project construction, adding to  
3 the more than four billion dollars of projected economic  
4 output with the construction of this facility.

5 On another note, I recently learned the  
6 standardized medical testing performance at CNU  
7 students, compared to students nationally, places them  
8 above medical students from John Hopkins, UC San  
9 Francisco, UC Davis, UCLA, and the University of  
10 Michigan. Not only will CNU bring a much-needed  
11 hospital to Elk Grove, but a teaching hospital that the  
12 best and brightest will seek out due to its reputation.  
13 As will ancillary research and medical development  
14 interests who invariably wish to partner with CNU and  
15 locate in Elk Grove. In short, the economic potential  
16 of this facility to Elk Grove is tremendous. I strongly  
17 recommend the planning commission support CNU's  
18 application and approve this project. Thank you.

19 MS. NICOLE: Thank you for your comments. Scott  
20 Finley, you may unmute your mic.

21 CALLER SCOTT FINLEY: Yes, thank you. Scott  
22 Finley. I'm first in the Stone Lake's National Wildlife  
23 Refuge. We're a citizen group who's formed to promote  
24 and courage people to use the wildlife refuge. It has a  
25 great benefit to the citizens of Elk Grove.

1           I just  
2   have -- I don't want to waste time. Our letter's in the  
3   in the record, and Rob Burness and Sean Wirth have  
4   already spoken to some technical issues, but I just want  
5   to leave people with this thought: There are good  
6   projects in good areas, there are bad projects in bad  
7   areas, and there are good projects in bad areas. This  
8   is a good project. It's just in a bad area. I don't  
9   believe that there is another building that is 13  
10   stories tall, between Stockton and downtown Sacramento  
11   along the Highway 5 corridor. And this building will be  
12   directly adjacent to the Stone Lake's National Wildlife  
13   Refuge.

14           The Stone Lake Refuge was, of course, created in  
15   the 1994, in order to preserve some of the open space  
16   and some place for the birds and the other wildlife to  
17   thrive as the Sacramento area urbanizes. It provides a  
18   refuge for the birds, and it also provides a refuge for  
19   the people of Elk Grove. This project, while having  
20   benefits to the citizens of Elk Grove, has significant  
21   detriments, which have been detailed in our letters. I  
22   would simply ask the planning commission to put all  
23   considerations in play here and realize that even though  
24   there are benefits to this project, there are other  
25   places where this project probably would make much more

1 sense. Just not here.

2 And finally, I think it is somewhat ironic for  
3 the city of Elk Grove to change its floodplaine  
4 regulations to cite a hospital instead of citing this  
5 sort of important public facility outside the  
6 floodplain. So, on behalf of the Friends of Elk Grove,  
7 we would simply ask you to deny this project and support  
8 the citizens of the Elk Grove, who wish to deny. Thank  
9 you.

10 MS. NICOLE: Thank you for your comments. Lisa  
11 Nichols, you may unmute your line and begin. Lisa, your  
12 line is still muted, if you're trying to speak. Lisa,  
13 your line is unmuted now, if you want to go ahead with  
14 your three minutes. We're not hearing you. All right.  
15 Lisa, we will try coming back to you later on.

16 MP, you may now unmute your line and begin to  
17 talk.

18 CALLER MP: Yes, hi. Can you hear me?

19 MS. NICOLE: Yes. Go ahead.

20 CALLER MP: I want to say this project is a  
21 disgrace. And I'm going to outline seven reasons why I  
22 believe that: Number one, we have veteran-owned and  
23 minority small business owners in the Stone Lake Landing  
24 Shopping Center. The mayor has outlined a commission  
25 for small businesses, and we're going to force these

1 small business owners out that have invested large sums  
2 of money for their businesses for this project. It's  
3 been stated many times. This isn't the right space for  
4 this project.

5 Second, we have talked a lot about the wildlife  
6 refuge. We're going to see bird strikes, and we're  
7 going to destroy a wildlife refuge adjacent to the  
8 project.

9 Third, it's in a 200-year floodplain. Why would  
10 we amend the code when we're not supposed to have  
11 hospitals in a floodplain because of what happened  
12 during Katrina. That was a disaster. We don't want to  
13 relive that.

14 Fourth, this isn't a hospital only for Elk Grove.  
15 Nobody's stating the fact that we're on the far west  
16 side of Elk Grove. What if somebody is in the Calvine  
17 area, or on the far east side of Elk Grove? They're not  
18 going to come to CNU. They are being honest once again.  
19 This is not for Elk Grove. It's for I-5 corridor. So  
20 they claim it's Elk Grove's first hospital. That is  
21 incorrect. They're building this for the I-5 corridor.

22 Fifth, their financing. They talk about their  
23 financing, but what I did not hear tonight is, how are  
24 they going to pay the bills? I haven't heard about a  
25 study. I haven't heard about any pro forma -- nothing.

1 They're not stating how they're actually going to pay  
2 their bills for a billion-dollar hospital.

3 Fifth, the traffic. Think about the traffic  
4 concerns that are going to be generated for this  
5 project. This is going to be right next to a  
6 residential neighborhood, West Taron Court, which isn't  
7 built or designed for a project of this size.

8 Sixth, the fact that they are trying to buy  
9 influence. They gave significant campaign contributions  
10 to our former mayor, as well as Darren Suen (phonetic).  
11 They bought a property not zoned for the project that  
12 they want to build on; therefore, they're trying to buy  
13 influence and influence our city council members by  
14 campaign contributions. Dirty, dishonest. That's what  
15 they are. I encourage you to vote no. We don't want a  
16 bad neighbor. Thank you.

17 MS. NICOLE: Thank you for your comments. Onassis  
18 McFarland, you may unmute your mic and begin.

19 CALLER ONASSIS MCFARLAND: Hi, can you hear me?

20 MS. NICOLE: We can.

21 CALLER ONASSIS MCFARLAND: All right. I'm  
22 originally in Elk Grove and also carpenter by trade.  
23 It's obvious that we need to create continuous pathways  
24 for the success for the younger construction workers in  
25 Elk Grove. That being said, my question to CNU is, are

1 they going to mandate that all apprentices on this  
2 project are going to be state certified?

3 And also, being a medical facility, healthcare is  
4 and should be one of CNU's core values. Are they going  
5 to make sure that every construction worker on this  
6 project is provided with health benefits (inaudible),  
7 especially with the introduction of new pandemics, like  
8 COVID-19. Thanks for my -- for giving me the  
9 opportunity to speak, and I hope my questions are  
10 addressed accordingly by CNU representatives. Thanks.

11 MS. NICOLE: Thank you for your comments. Mike  
12 Savino, you may unmute your mic and begin.

13 CALLER MIKE SAVINO: Can you hear me now?

14 MS. NICOLE: We can.

15 CALLER MIKE SAVINO: Okay. I think what we need to  
16 do now is to take a deep breath, stand back, and look at  
17 the big picture. Let's say that the planning commission  
18 did not have this proposal before them. But instead,  
19 the county health department came and said we did a  
20 study and found there's a need for a general care  
21 hospital in Elk Grove. Then what would the planning  
22 commission do? They don't have a proposal in front of  
23 them. They just have this report saying there needs to  
24 be a hospital.

25 Well, the first thing they do is they ask

1 questions. Well, how big should it be? How many beds?  
2 What services? Should it have cardiovascular surgery?  
3 Should it have intensive care for newborns? After they  
4 answered all those questions of what the hospital should  
5 look like, its size and shape and its services, then, of  
6 course, the next question should be, well, where would  
7 we put it?

8           So imagine the hospital is a dot. Where would  
9 you put that dot in the map of Elk Grove? You go to  
10 your staff, and you'd ask the planning staff to study  
11 Elk Grove and find the best place to put that dot. Now,  
12 let's say that dot is the center of a circle. The  
13 circle is the service area. The diameter of that circle  
14 could be half a mile, a mile, three miles. We  
15 determined that. So you would want, within that circle,  
16 the maximum number of potential customers or patients or  
17 clients -- whatever you want to call them -- in every  
18 direction. So, you -- I'm sure the planning staff could  
19 come up with a lot of places to put that circle in the  
20 total map of Elk Grove.

21           But one place you wouldn't want to put that  
22 circle would be -- and the dot -- well, the hospital  
23 is -- or the service you would want to provide -- you  
24 wouldn't want to put that dot at the extreme Westin edge  
25 of the city limits, such that on that circle -- let's

1 say it was a clock face, from 12:00 o'clock through 3:00  
2 o'clock to 6:00 o'clock is in the city, and from  
3 6:00 o'clock to 9:00 o'clock to 12:00 o'clock is a  
4 national wildlife refuge, where all your customers are  
5 geese and ducks and cranes and coyotes. it just doesn't  
6 seem to make sense. It's like they put the cart before  
7 the horse. It's like, first they had the location, and  
8 then they tried and determined, how could we maximize  
9 the use of this location, rather than first find out  
10 what they need and then find the location, so --

11 MS. NICOLE: Thank you for your comment. Your time  
12 is up.

13 CALLER MIKE SAVINO: Thank you.

14 MS. NICOLE: Randy Bekker, you may unmute your line  
15 and begin.

16 CALLER RANDY BEKKER: Thank you. Commissioner  
17 Murphey, Robles, and Wieser, and fellow citizens. What  
18 we have heard is a rendition of similar things that  
19 happened clear back in the 1850s: somebody being able to  
20 afford hired guns to force a town to do what they want  
21 done. This is exactly why we became a city. History.  
22 As a 46-year resident of the city and town of Elk Grove,  
23 I want to remind you that this CNU proposal would have  
24 been rubber-stamped by the country, four to one,  
25 guaranteed; however, we became a city to stop things



1 like this. CNU purchased a community shopping center.  
2 That's what they purchased. And then they drove  
3 businesses out to get to where they are today.

4 Now, I live two houses south of a community  
5 shopping center. It houses east of a different  
6 community shopping center, and about an eighth of a mile  
7 from two others. Fast forward if you approved this  
8 change of a shopping center. Make no mistake, there  
9 will be future developments come before the planning  
10 commission and the city council and city staff to change  
11 these shopping centers. I could look out my front door  
12 to the west and vision a Hilton resort. Two ten-story  
13 towers. Next to it, a water park and a Scandia, right  
14 next to a senior mobile home park. Once the bleeding  
15 starts, you will not stop it.

16 I'm not opposed to a hospital. I'm opposed to  
17 the project in this shopping center, and we need to  
18 maintain the planned community as it was envisioned and  
19 protect the west side residents, no more different than  
20 Old Town residents where I live. Because if we don't  
21 protect what we have, it will be gone. Guaranteed. No  
22 more different. They're going back to the county in  
23 prior to 2,000. Thank you very much. I hope the  
24 commission disapproves of the CNU project. It needs to  
25 be proved to a different area. Thank you very much.

1 MS. NICOLE: Thank you for your comments. Amar  
2 Sherhill, you may unmute your line and begin.

3 CALLER AMAR SHERHILL: Great, can you hear me okay?

4 MS. NICOLE: We can.

5 CALLER AMAR SHERHILL: Thank you. And I want to  
6 thank all of my community members who've come out with  
7 very astute comments and show that they have spent the  
8 time and gone through the report and understand the  
9 complexities of this project and brought them forward.  
10 And I also want to thank the commissioners, who have  
11 clearly put in a lot of time on what is a very important  
12 project. But there is one issue that is difficult to  
13 discuss, and maybe because of that, folks aren't  
14 bringing it up as much. And that is, even if we were to  
15 somehow find mitigation for some of the issues that are  
16 raised, we have to believe that we have a partner in  
17 this project that is capable of working with the city  
18 and with the community to bring those plans to fruition.

19 And, it's just been the unfortunate truth with  
20 this project from the beginning that, the evidence shows  
21 that we just don't have that partner. And that's not  
22 true when we talk about CNU as an educational  
23 institution. I think for a number of years they've been  
24 doing good work, but with this project, from day one,  
25 they didn't reach out to the community. They went first

1 to try to influence with money our local politicians.  
2 They had a big press conference without involving the  
3 folks that lived here. They hired folks like Gary  
4 Davis, who attacked residents on Facebook for having  
5 objections and then withdrew his comments. And we had a  
6 lot of lack of transparency with facts that were just  
7 being put out there, which were just obviously false.  
8 And committing to early construction dates in 2022, and  
9 we heard Mr. Warren say today that that's just never  
10 going to happen. It's going to take at least three  
11 years after approval, and we aren't even close to  
12 approval. Yet, this was the line that was being knocked  
13 out there for so long by the managers of this project.

14 And we can go through a number of these. I know  
15 the planning commissioner is aware of it. And it's not  
16 staff's job to go through these political issues. It is  
17 the planning commission's job, and you have to evaluate  
18 the project but also evaluate the folks that are  
19 bringing the project forward. And we in the community  
20 have done our due diligence, and the folks that are in  
21 charge of this project are not worthy partners for us.  
22 They're not worthy partners for the city. And if they  
23 will go through all the mistakes and lack of  
24 transparency that they've done so far, they will do it  
25 again, and they will not get this project done the way

1 that they commit to doing so, even if the city gave them  
2 very specific instructions. So I ask you all, please,  
3 to ensure that you vote against this project. Thank  
4 you.

5 MS. NICOLE: Thank you for your comments. Dan  
6 Buntten, you may unmute your line and begin.

7 CALLER DAN BUNTEN: Thank you. I would like to say  
8 that I agree with my fellow neighbors with regard to  
9 birds versus helicopters and tall buildings versus  
10 helicopters. Without saying anything more about that,  
11 I'd like to address, also, noise issues for the  
12 neighborhoods -- helicopter noise, and the fact that we  
13 already have a lot of sirens on Elk Grove Boulevard.  
14 These are local concerns. I think to add to the  
15 wildlife consideration would be afternoon sun reflection  
16 that was going to bounce off to the west towards the  
17 wildlife reserve area will also just have bird activity  
18 and bird migration.

19 With regard to financing, I disagree with phased  
20 financing. I don't think that's ideal. I think that we  
21 would want a guaranteed financing, from start to finish,  
22 to include overruns. Because any failure to complete  
23 the project through loss of funding -- that type of  
24 situation will create another ghost mall or a big hulk  
25 of a building that nobody can deal with.

1           Finally I would like to take issue with the  
2 people considering this a university hospital. And to  
3 cite the teaching hospitals at Stanford and UC Davis in  
4 comparison, because this is a standalone Project. It's  
5 a -- it's a small medical college or medical school. It  
6 does not have the supporting academics that a large  
7 research institution or university would add to that.  
8 So I take issue with that. I encourage the board to  
9 vote no. Thank you.

10           MS. NICOLE: Thank you for your comments. Jan  
11 Smuty Jones, you may unmute your line and begin.

12           CALLER JAN SMUTNY: Great. Thank you very much,  
13 commissioners. I'm Jam Smutny Jones, a -- it will be 20  
14 years in November, a resident of Stone Lake. And I'm  
15 here today to talk a little bit about some of the  
16 flooding issues. I'm not going to repeat what Mr.  
17 Burness indicated, because I think he did a great job  
18 sort of laying out the problem. And that is the basic  
19 standard is that no essential health facility is to be  
20 located in the 200-year floodplain. And I want to go  
21 back to, oh, about two hours ago, when asked directly,  
22 staff -- Sarah of this staff stated very directly to  
23 Commissioner Murphey's question, with respect to the  
24 existing general plan restriction, is completely  
25 compliant with existing California law. So there is

1 absolutely no reason that we need to change it.

2 And what is being requested here of the city is  
3 something that is a little unusual. CNU knew, or should  
4 have known, when they bought the Stone Lake Shopping  
5 Center, that that city ordinance was in place. It was  
6 adopted in August of 2016 to be consistent with SB-5,  
7 which is a flood hazard controls that were put into  
8 place post-Katrina, so they knew, or should have known  
9 that was a bad place for the hospital, but here we are.  
10 They are proposing a much broader statement -- a new  
11 rule that would allow, when feasible -- whatever that  
12 means -- for healthcare facilities to be built in the  
13 200-year floodplain. And that would open up the entire  
14 city to some additional development. And that's kind of  
15 a crazy way to going about doing those two things.

16 So there's two other problems. One is,  
17 apparently, their plan is to basically do a full null-up  
18 (phonetic), meaning that in the event that there is a  
19 flood, they're going to house 5,000 people for an  
20 indeterminate amount of time in the hospital facility.  
21 I really don't think they have a plan for that. Nor do  
22 I think they can do that. The other problem is just  
23 evacuating the communities on the west side in the event  
24 of a breach of the levees on the east side of the  
25 Sacramento River. Our community will flood. There's

1 5,000 people in Stone Lakea that need to out, and  
2 probably times two when you add Lakeside and Laguna  
3 West. So this isn't a happy time. We need to figure  
4 out this flood issue on a broader scale, but it is  
5 certainly not the time to add to that flood hazard by  
6 putting a hospital where the developer knew that it  
7 could not be build. And so, we would encourage you to  
8 reject this application. And I will point out that over  
9 1,000 citizens here in Elk Grove here have asked you to  
10 sign a petition asking you to reject the bill. So thank  
11 you very much.

12 MS. NICOLE: Thank you for your comments. I'm  
13 going to check in -- we have three callers on the line,  
14 and they're not able to raise our hands. So I'm going  
15 to check in with our first caller whose number ends in  
16 1056. I have he did not tell button to allow you to  
17 talk, and if you would like to make a public comment,  
18 could you just let us know so that we could start the  
19 timer? I'm just checking to see if you could hear us.  
20 I've asked to unmute your line, if you would like to  
21 speak. Again, this is caller whose number ends in 1056.  
22 All right. We will move onto the next public comment.

23 COMMISSIONER GEORGE MURPHEY: Nicole?

24 MS. NICOLE: Yes?

25 COMMISSIONER GEORGE MURPHEY: Before you call the

1 next caller, are we near the end of the public comment  
2 regarding people signed up for Zoom, and we only have  
3 the three callers?

4 MS. NICOLE: No, we still have 26 people with their  
5 hands raised at this time.

6 COMMISSIONER GEORGE MURPHEY: Okay. We're going to  
7 take -- we'll take a couple of callers, and we need to  
8 make some -- Mackenzie needs to make some arrangements  
9 for her video feed. So we'll take another break at  
10 10:00 o'clock for about 15 minutes, Mackenzie.

11 COMMISSIONER MACKENZIE WIESER: That is fine.

12 COMMISSIONER GEORGE MURPHEY: Well, we'll figure  
13 15. When you come back on, I'll open it back up. But  
14 we will take a break at about 10:00 o'clock.

15 COMMISSIONER MACKENZIE WIESER: Sounds great.

16 COMMISSIONER GEORGE MURPHEY: Thank you, Nicole.  
17 Go ahead and have a speaker. Zak Noonan, you may unmute  
18 your line and go ahead.

19 CALLER ZAK NOONAN: Good evening. I wanted to  
20 share. I'm a 20-year resident of Elk Strong, and I want  
21 to share my strong support for the CNU Medical Center  
22 and request that you approve the application. The  
23 proposed teaching hospital will serve the Elk Grove  
24 community, while training future generations of  
25 physicians, delivering state-of-the-art medical care by



1 utilizing a collaborative approach to healthcare and  
2 education. The teaching hospital will optimize patient  
3 care and improve health outcomes by adding over 400  
4 hospital beds in a build-out for the Elk Grove  
5 Community.

6 After witnessing the pandemic in the shortage of  
7 hospital beds, I think that anyone who wants to get into  
8 healthcare, we should support those people and give them  
9 the avenue to learn. And that's all I have. Thank you.  
10 I will let somebody else talk.

11 MS. NICOLE: Thank you for your comments. Daisy  
12 Hughes, you may unmute your line and go ahead.

13 CALLER DAISY HUGHES: Hello, can you hear me?

14 MS. NICOLE: We can.

15 CALLER DAISY HUGHES: Thank you. Good evening,  
16 planning commissioners. My name is Daisy Hughes, and  
17 I'm a member of NEXT (phonetic). Yesterday, which was  
18 Wednesday, I E-mailed all of you with the names and  
19 addresses of Elk Grove residents over 18 years old  
20 existing or potential voters who had signed a petition  
21 to stop the CNU hospital project. 1,023 Elk Grove  
22 residents had signed this petition. These are  
23 individuals willing to come forward, disclosing their  
24 full names and addresses to you. These signatures, in  
25 large part, were collected during a pandemic, when

1 people have had many other competing priorities and  
2 issues.

3         These 1,000 plus people are making a difference  
4 in this city or will make difference. Studies show that  
5 people who sign a petition are more likely to get  
6 politically involved, such as by donating, protesting,  
7 and voting. Furthermore, I believe that studies have  
8 also shown that a non-voter who signed a petition is  
9 more likely to vote. The residents who signed a  
10 petition lived throughout Elk Grove, representing all  
11 three Elk Grove zip codes, showing that this hospital is  
12 viewed negatively all throughout Elk Grove. Many people  
13 feel that this is a slippery slope, and if it can happen  
14 to Stone Lake Landing, it can happen anywhere. Think of  
15 the precedent it will set that an entity with unknown  
16 funding sources, unclear status as a for-profit or  
17 nonprofit organization, no prior experience building or  
18 operating a major project of its kind, can come to Elk  
19 Grove, buy our land, demolish what has been built, and  
20 fundamentally alter the nature of the surrounding  
21 community.

22         As stated in this petition, the Lakeside, Laguna  
23 west, and Stone Lake communities were built with an  
24 emphasis on nature and small business, and a CNU  
25 hospital project will completely change the entire west

1 side. This petition urges you, our city leaders, to  
2 smart planning. It is not smart planning to change a  
3 general plan and long-established municipal code to  
4 build a hospital in a floodplain. It isn't smart  
5 planning to allow the demolition of a center that  
6 contains small businesses that serve the community. It's  
7 not smart planning to immediately go from zero hospitals  
8 in the city to two hospitals on the same street  
9 three-and-a-half miles apart. By this, we are referring  
10 to Dignity Health's already approved hospital on vacant  
11 ground in Elk Grove Boulevard. It's not smart planning  
12 to build a medical city adjacent to a national wildlife  
13 refuge and residential communities. By medical city,  
14 the petition refers to a Level 2 trauma center hospital  
15 12 stories high, now 13 stories. Helipads, student  
16 dorms, and three multi-story parking garages with over  
17 3,000 parking spots, now more like 5,000 parking spots.

18 Members of NEXT and other signatories for the  
19 petition to stop the CNU hospital are concerned citizens  
20 asking you to deny the land use zoning changes and  
21 conditional use permit sought by CNU. The number of  
22 signatures on this petition continues to grow. We will  
23 to express our opposition to CNU's plans, as long as  
24 necessary. Others listening tonight who have not yet  
25 signed are still welcome to do so online at

1 stonelakeneighbors.com. Thank you.

2 COMMISSIONER GEORGE MURPHEY: Nicole, we will ahead  
3 and start our break now, and we will return at 10:15 or  
4 until I see Mackenzie's face on the screen. Okay?

5 MS. NICOLE: Great. That you.

6 COMMISSIONER GEORGE MURPHEY: Callers, hang in  
7 there, please.

8 (MEETING ADJOURNS AT 9:57 P.M.)

9 (MEETING COMMENCES AT 10:15 P.M.)

10 COMMISSIONER GEORGE MURPHEY: Do we have any staff  
11 back yet?

12 MS. NICOLE: I'm here, Vice Chair Murphey.

13 UNKNOWN SPEAKER: I'm here.

14 COMMISSIONER GEORGE MURPHEY: Darren -- Darren back  
15 yet? I didn't mention -- I hadn't heard him.

16 MS. SARAH KIRCHGESSNER: Sarah Kirchgessner is  
17 back.

18 MR. DARREN WILSON: Darren Wilson is back.

19 COMMISSIONER GEORGE MURPHEY: I think we can  
20 continue. Nicole, do you want to -- first of all, let  
21 me thank everybody for the indulgence. We had to make a  
22 move there. Sorry to make you wait so long, but Nicole,  
23 would you go ahead and call the next caller, please?

24 MS. NICOLE: Yup. All right. Stephen Hodge, you  
25 may unmute your mic and go ahead and start.

1           CALLER STEPHEN HODGE: Thank you. Can you hear me  
2 okay?

3           MS. NICOLE: We can.

4           CALLER STEPHEN HODGE: Great. So I'm also a Stone  
5 Lake resident and a member of the board of directors on  
6 the HOA here. And I'm strongly opposed to this project.  
7 In fact, you've heard it so many times tonight. But let  
8 me reiterate: There could not be a worse place in Elk  
9 Grove to put this hospital. It's simply inappropriate  
10 for the area, and you've heard it time and time again.  
11 It's near protected wetlands, it's on the far western  
12 edge of Elk Grove, where it can't serve as many people  
13 effectively. It's in a 200-year floodplain. It's next  
14 to residential homes. It's out of scale with the  
15 community. There's just so many things wrong with this  
16 project. It's just not the right place.

17           In addition to that, CNU has not been a good  
18 partner. You've heard it from others tonight. They  
19 haven't tried to do any legitimate outreach to the  
20 community to address our needs. And they put out  
21 information which I think is misleading, particularly on  
22 their financial information. You know, if the city  
23 thinks it's going to obtain a significant financial  
24 windfall by having the hospital built here, it's not  
25 going to happen. Property taxes are the largest sources

1 of revenue for the city. CNU, however, is seeking to  
2 finance its construction with tax-exempt bonds. That's  
3 going to require them to have a nonprofit status. And  
4 as a nonprofit, they will be except from paying any  
5 property taxes. There are also problems with their  
6 sales tax numbers. It will not generate nearly the  
7 numbers or any of the numbers that they project.

8 Finally, the job's projections are just wildly  
9 inaccurate. They projected 24,000 jobs to be gained  
10 over a ten-year year period. This is simply untrue.  
11 And it lacks any common sense whatsoever that this kind  
12 of project would have that kind of job growth for such a  
13 sustained period of time. In reality, what they're  
14 equating 24,000 jobs with is 2,400 jobs per year for ten  
15 years, or 24,000 job years. So its a much, much smaller  
16 economic impact. And so, that financial carrot that's  
17 been dangled in front of the city is simply not going to  
18 be there.

19 We have an opportunity to do some good, smart  
20 planning. This project is not a bad project. It's just  
21 in the wrong place. It needs to be in a different  
22 location. Ask yourself: Do you want to live next to  
23 that monstrosity that they want to build? I certainly  
24 don't, and I don't think it's right for Elk Grove.  
25 Thank you your time.

1 MS. NICOLE: Thank you for your comments. Gary  
2 Sidner, you may unmute your mic and go ahead.

3 CALLER GARY SIDNER: Thank you. Can you hear me?

4 MS. NICOLE: There's a little bit of feedback  
5 there. Go ahead.

6 CALLER GARY SIDNER: Can you hear me now.

7 MS. NICOLE: Yeah.

8 CALLER GARY SIDNER: Can you hear me.

9 MS. NICOLE: Yes, we can. Can you please just stop  
10 for a second. Sandy, can you please restart the timer?  
11 Okay. Go ahead, sir.

12 CALLER GARY SIDNER: Can you hear me?

13 MS. NICOLE: We can. Go ahead. It looks like you  
14 keep muting your mic after you ask.

15 CALLER GARY SIDNER: Can you hear me?

16 MS. NICOLE: Yes, we can.

17 CALLER GARY SIDNER: Can you hear me?

18 MS. NICOLE: Yes, we can.

19 CALLER GARY SIDNER: I'm sorry I had to turn my  
20 speaker up.

21 MS. NICOLE: There we go.

22 CALLER GARY SIDNER: Thank you. Sorry for the  
23 confusion. Okay. My comments tonight are specific to  
24 the 2018 economic impact report done by Varshney &  
25 Associates, and used in part by planning commission

1 staff to recommend approval. His executive summary  
2 states that the project will produce 24,129 new jobs in  
3 the greater Sacramento area and 18,216 new jobs in the  
4 Elk Grove area. It also includes other claimed economic  
5 benefits. For two years, the proponents have been using  
6 conclusions of their report within their promotional  
7 materials to gain support for the project, including  
8 their continued touting of 24,000 jobs.

9 At the February 2019 community meeting hosted by  
10 Councilmember Suen (phonetic), the question of 24,000  
11 jobs came up. It was either Gary Davis or Dr. Chung  
12 himself who said it was more like 2400 jobs. Yet, CNU  
13 continues to advertise 24,000. They continue to mislead  
14 us.

15 In his January 2021 review of the Varshney  
16 (phonetic) Report, Dr. Jeffrey Michael of UOP disputes  
17 athis and states, quote, "The years of employment,  
18 sometimes called job years, are misleading --  
19 misleadingly labeled jobs." End quote. That's not new  
20 jobs. He also disputes other conclusions of the report.  
21 In the Sacramento Bee article published today,  
22 Dr. Varshney states that Dr. Michael agrees with his  
23 overall results. That is not true. Dr. Michael states,  
24 quote, "The city and the citizens of Elk Grove should  
25 not reply on the executive summary with the CNU



1 promotion materials in their consideration of the  
2 economic benefits that could result from the proposed  
3 CNU Medical Center."

4 One important problem that Dr. Michael states in  
5 his report is that the coauthor was a member of the  
6 CNU's Board of Trustees at the time that the report was  
7 written, and it was not disclosed. This is a serious  
8 omission of someone who may have a stake in the project  
9 and calls into doubt the neutrality of the report. This  
10 is not the first time an economic report analysis  
11 prepared by Varshney & Associates is called into  
12 question. In 2010, his report on Assembly Bill 32 was  
13 report -- was reviewed by the California Legislative  
14 Analyst's Office, who state both of the two studies you  
15 have asked us to review have major problems both involve  
16 data, methodology, and analysis. As a result of the  
17 shortcomings, we believe the principle findings are  
18 unreliable, end quote. So we have a report that has  
19 been disputed by an expert, an undisclosed affiliation  
20 with CNU by a coauthor, a history of unreliable  
21 analyses, and CNU's continued misrepresentation of the  
22 so-called "economic benefits."

23 There are approximately nine significant and  
24 unavoidable impacts of the project in the EIR, and your  
25 staff continues to use the economic benefits, in part,

1 to outweigh these impacts in their recommendation for  
2 approval. Please disregard this reporting in your  
3 deliberations as unreliable and potentially tainted.  
4 Thank you.

5 MS. NICOLE: Thank you. Thank you for your  
6 comments. Tino Fortino, you may unmute your mic and go  
7 ahead.

8 CALLER TINO FORTINO: Thank you. So I'm the B aid  
9 (phonetic) with the insulator's union, and I'm talking  
10 on behalf of our members from our local -- this  
11 hospital, this bill will save lives in more than one  
12 way. Peace of mind is in line with health. And when  
13 you have a good paid job and you provide mortgage and  
14 good meals on your table, taking care of your family  
15 will improve health. So this will save lives in more  
16 than one way, so I encourage you and ask you to move  
17 forward with this bill. Thank you.

18 MS. NICOLE: Thank you for your comments. J. Lee,  
19 you may unmute your line and begin.

20 CALLER J. LEE: Can you hear me?

21 MS. NICOLE: We can.

22 CALLER J. LEE: Thank you. Good evening, chair and  
23 commission members. Thank you for allowing me to speak.  
24 But to the moderator first, may I recommend you announce  
25 speaker's names preferably before it turns in advance?

1 It would give people a heads up that they're next and  
2 can look for the unmute button. My name is Jerome Lee,  
3 and I'm a 19-year resident in the Stone Lake community.  
4 I find it -- I found it very comical that in one of the  
5 beginning presentations, one of their points and  
6 conclusions was that, and I quote, "Project will not be  
7 detrimental to the health, safety, peace, morale,  
8 comfort, or general welfare of persons residing or  
9 working in the area or the general welfare of the city."  
10 But a number of Stone Lake and Lakeside residents  
11 against this project, it seems obvious not many of us  
12 residents, especially those 1300-plus in Stone Lake  
13 asked about our health, safety, peace, morale, comfort  
14 or general welfare in regards to this project.

15 As it stands, with CNU just being a school  
16 now -- excuse me -- it has encouraged many  
17 residents -- I'm so sorry. It has encouraged many real  
18 estate buyers to buy homes in Stone Lake and rent out  
19 individual rooms to CNU students. This is currently  
20 against HOA guidelines. I'm fighting to see my house,  
21 where the house behind me, next to me, and across from  
22 me are such types of rentals. Each house has an average  
23 of five cars in front of them. And it's gotten to the  
24 point where myself and neighbors cannot even park in  
25 front of our own homes. And often not -- and I'm not

1 the only Stone Lake resident with this issue.

2 But with the passage of this teaching hospital,  
3 the situation will get exponentially worse. The only  
4 way you could potentially alleviate this is for CNU to  
5 mandate all of their students to live on campus during  
6 their time at CNU. Is this something CNU is willing to  
7 mandate? I find it disturbing that even CNU's own "we  
8 care" core values, there is no play and no place that  
9 they refer to caring about the patients that they will  
10 look after, or caring about the community they serve.  
11 They do, however, refer to caring about themselves seven  
12 times -- seven times in a six-point dive statement.

13 The aesthetics of this building is astronomical.  
14 There is no building within a three-to-four-mile radius  
15 that is more than 70 feet tall. This building, main  
16 building, will be almost four to five times taller than  
17 this and will be almost ten times taller than any built  
18 house in the community in which it serves. The state of  
19 the main building will stick out like a sore thumb is a  
20 massive understatement. Chair and committee members, I  
21 encourage you to cash the vote against certifying this  
22 project. Thank you very much.

23 MS. NICOLE: Thank you for your comments. May  
24 Yang, you may unmute your line and go ahead.

25 CALLER MAY YANG: Hi, my name is May Yang. Thank

1 you for allowing me to speak tonight. I am an Elk Grove  
2 homeowner, a taxpayer, and a CNU employee. In spite of  
3 all the issues that have been raised tonight, the most  
4 compelling issue is the human issue. This is "the time  
5 to care" argument provided by Dr. Michael Wong. I have  
6 established my home here, where I'm raising my  
7 three-year-old daughter and my two-year-old son. I have  
8 a multigenerational home with elderly parents, and their  
9 collective health is my utmost concern and priority  
10 above all else. Also, as a higher education  
11 administrator, CNU has given me a job that has allowed  
12 me to stay in my city close to my family.

13 As with all small towns, rain drain is always a  
14 concern, and I feel this is absolutely true for Elk  
15 Grove, as the next generation of young highly educated  
16 people, such as myself, would have to take our skills  
17 elsewhere if we lose this hospital.

18 Finally, I've witnessed firsthand what the school  
19 has been able to do in the face of the pandemic, by  
20 opening its doors to provide PPE and a Covid vaccine  
21 clinic to the public. I have seen students fall in love  
22 with this region, only to have to move away after they  
23 graduate for better jobs.

24 In closing, I ask you to fulfill your duty and  
25 vote yes for middle class families like mine, who are

1 just trying to make ends meet and give us a more secure  
2 future. Thank you.

3 MS. NICOLE: Thank you for your comments. Patrick  
4 Foy, you may unmute your line and begin.

5 CALLER PATRICK FOY: Commissioner, sound check?

6 MS. NICOLE: You're good.

7 Great, thank you. Hello, I'm Patrick Foy. I am  
8 a 30-year resident of Elk Grove, 20 of those years in  
9 Laguna West, and I own a home in Lakeside, so I'm very  
10 well vested in this community. I support CNU's plan for  
11 a teaching hospital in this location, and I acknowledge  
12 that the EIR changed the helicopter flight plan and will  
13 put those helicopters right up the top of my house, and  
14 I will listen to sirens going up and down Harbor Point  
15 Drive. I am good with that.

16 This is the right thing for this community. I'll  
17 make three points. Number one, please, commissioners,  
18 don't let a small number of activists in my neighborhood  
19 convince you there's overwhelming opposition within the  
20 Laguna West or Lakeside communities for which I can talk  
21 about, because I'm a part of those communities. I  
22 support the project in the proposed location, as do most  
23 of my neighbors. The vocal minority is so intense that  
24 many of my neighbors are even afraid to speak up in  
25 support. They are afraid of backlash. I mean, I'm not

1     afraid, but some are.

2             Number two, no one argues that we need a hospital  
3     in Elk Grove. The question really isn't do you need it,  
4     it's where to build it. Dignity and CNU have similar  
5     but different missions, and there's room for both. A  
6     teaching hospital with a trauma center is the most  
7     prestigious project a city of our size could hope for,  
8     and it will provide much needed hospital care for Elk  
9     Grove.

10            Number three, Mayor Singh-Allen has made good on  
11     a campaign promise to initiate a Covid economic response  
12     plan for Elk Grove starting with creating a task force,  
13     for which I applaud her. Councilmember Suen, who  
14     represents me and my neighbors, is on that task force.  
15     What could possibly contribute to Elk Grove's economic  
16     recovery from Covid than hundreds of very high-paying  
17     jobs from doctors, nurses, other hospital staff, who  
18     will live in Laguna West, Lakeside, and Stone Lake.  
19     They will buy cars at our auto mall, they will eat in  
20     our restaurants, they will shop at our stores,  
21     contributing to Elk Grove's much needed sales tax base.

22            I close with a very public thank you to  
23     California North State for renting the Covid vaccination  
24     clinic, where my elderly mother-in-law, who is battling  
25     cancer, reserved her vaccination, as did hundreds of Elk

1 Grove residents from within Stone Lakes, Laguna West,  
2 and Lakeside. I urge your support. Thank you.

3 MS. NICOLE: Thank you for your comments. Sean  
4 Atha, you may unmute your line and begin.

5 CALLER SEAN ATHA: Hi, this is Sean Atha. Thank  
6 you for letting me speak. I'm actually a resident of  
7 Stone Lake. I have lived in Elk Grove for all of 25  
8 years, and prior to that, I was just in the South  
9 Sacramento pocket area. I, by profession, have worked  
10 in healthcare services for well over 25 years, and I  
11 focus on creating healthcare service systems up and down  
12 the state, where I have the privilege of right now being  
13 held accountable for roughly 300,000 lives of low-income  
14 populations in Sacramento County.

15 The folks at CNU are the doctors that have served  
16 my population for years. The doctors and the leaders of  
17 CNU are being sort of portrayed as people you can't  
18 potentially trust, but the reality is that a good number  
19 of them are the physicians that have been leaders at  
20 Dignity, at Sutter, at Kaiser, at UC Davis, that have  
21 helped build their institutions of excellence over the  
22 years, and they're wanting to leave a legacy for their  
23 community, in building CNU and putting this program  
24 together in our own community.

25 I mean, just recently, just Tuesday, they



1 vaccinated over 400 teachers from Elk Grove School  
2 District to help get our kids back to school. This is a  
3 program that, as an Elk Grove resident, as a Stone Lake  
4 resident, I support. I support the fact that my parents  
5 live in south Sacramento. Myself and others, if we need  
6 an emergency or need a hospital nearby, I'll be  
7 grateful. I think we should all be grateful that CNU  
8 would be so close to us that it's accessible and  
9 actually help save lives just based on sheer proximity.

10 I've worked with all the major insurance  
11 companies that cover most of this in this community, and  
12 many of them have said that this will be a fantastic  
13 contribution to the community. Due to the independence  
14 of CNU, they're actually able to operate at much lower  
15 operating costs than the larger systems that were  
16 existing. Sacramento County happens to be one of the  
17 most expensive for healthcare services, given the large  
18 systems, and CNU can actually help lower the overall  
19 cost of services for health insurance, therefore  
20 lowering the cost of healthcare services for most of our  
21 employers who have to pay for insurance. So, there are  
22 a number of benefits.

23 In terms of -- actually, the arguments that come  
24 up in terms of floodplain, I would just like to point  
25 out, if we look at pictures of the floodplain for

1 Sacramento, actually, all the hospitals in Sacramento  
2 County actually exist in the floodplain. So I'm not  
3 entirely sure of the uniqueness of this argument. But  
4 I'd just like to point out that as you move forward with  
5 this decision, with looking at this, that this is an  
6 opportunity for Elk Grove to have an amazing partner  
7 with the health sciences institution that can partner  
8 with our school districts, they can help educate our  
9 kids, they can partner with the community services  
10 district to bring in new programs. So there are many,  
11 many opportunities throughout the entire community that  
12 we can have, and the independence of this university can  
13 help make happen here in Elk Grove, so I urge your  
14 support of this program. Thank you.

15 MS. NICOLE: Thank you for your comments. Amrit  
16 Sandhu, you may go ahead.

17 CALLER AMRIT SANDHU: Good evening. Thank you for  
18 your time this evening, commissioners. It's been a long  
19 evening and a long day. I've been reflecting as I've  
20 been listening to the presentations. I'm a Stone Lake  
21 board member, a resident, and a healthcare provider in  
22 the community. I have a doctorate in nursing practice,  
23 which trained me to look at healthcare access across the  
24 continuum and provide healthcare equity.

25 I'm appalled that the COVID-19 pandemic is being

1 used as an excuse to build a hospital in my  
2 neighborhood. My colleagues and I have been on the  
3 front lines in providing care for bugs (sic.). The  
4 local hospitals have flexed their capacities and have  
5 met the need of the pandemic. Yes, there were times  
6 that we were at capacity; however, we have Argorina  
7 (phonetic) as a holding facility for overflow, and since  
8 March, there has been less than 50 patients treated  
9 there, because your local hospitals have been able to  
10 provide the capacity to take care of our patients. I  
11 want to bring you back to December 2018, when CNU  
12 announced their plan for a 450-bed hospital. They took  
13 our city council by surprise, who they invited over for  
14 the event and didn't tell them what was happening. And  
15 they did not mention to it to anybody that was in the  
16 west side that would be affected.

17 In February 19 of 2019, there was a healthcare  
18 form between UC Davis, Sutter, and Dignity. And in that  
19 form, which Dr. Alvin Chung was also there to represent  
20 CNU, the talk was that you need to move from hospitals  
21 to outpatient care. There was no need for more  
22 inpatient beds in the Sacramento area. Now, just two  
23 weeks ago -- actually, 11 days ago, there was another  
24 healthcare form UC Davis, Kaiser, and Dignity were a  
25 part of. And in this, they said that they would be

1 replacing existing hospitals. Methodist, which is part  
2 of the Dignity Group, would be moving to Elk Grove.  
3 They will be having 100 beds. Morse, Kaiser Morse,  
4 would be relocating downtown at the rail yard. Again,  
5 not adding beds to the Sacramento region, but replacing  
6 beds from other hospitals for seismic concerns.

7 In addition to this, UC Davis said they have no  
8 interest in increasing their bad capacity. All three  
9 organizations stated they want to invest in preventive  
10 care. Keep our patients out of the hospital in the  
11 first place. You go to the hospital because you're very  
12 ill. We need to work on keeping our patients healthy.  
13 I'm not against hospitals. Hospitals work and  
14 healthcare facilities -- I've been doing this for 15  
15 years; it's my livelihood. We need to consider where  
16 our patients need care, how we can meet those needs, and  
17 still meet the needs of Elk Grove.

18 MS. NICOLE: Thank you for your comments. Your  
19 time is up. Jill Meyer, you may unmute your line and go  
20 ahead.

21 CALLER JILL MEYER: Hi, my name is Jill Meyer, and  
22 I've been almost a 20-year resident of Elk Grove. And  
23 when my husband and I, when we were looking to move to  
24 buy our first home, we liked the mini communities We  
25 looked at Rancho Murietta. We looked at West

1 Sacramento. We looked at Elk Grove. We looked at the  
2 99 side of Elk Grove and the I-5 side of Elk Grove. And  
3 we decided that we would pick Stone Lake, and we picked  
4 Stone Lake because it was a master planned community.  
5 We knew exactly how it would be built out. We didn't  
6 have to worry about a big project, or so we thought.  
7 Fast forward 18 years, and now we have this huge project  
8 similar in skill to the UC Davis Medical Center but  
9 condensed to a very small area. I'm not opposed to a  
10 hospital being built. I'm just opposed to putting  
11 something of the skill in this area.

12 You know, I take my seven-year-old son around  
13 Stone Lake. We walk the neighborhood, he rides his  
14 bike, it's quiet. On the weekends, you can actually  
15 hear the birds. But if we have a 24-hour facility, I'm  
16 not worried about the noise from ambulances. I'm  
17 worried about the constant hum of having a 24-hour  
18 hospital -- the bobcats that are in reverse, the beep  
19 beep beep. You know, just the hum of a hospital. It's  
20 just not right for this area. You know, I'm okay with  
21 it being near the casino. Perfect, that's a perfect  
22 location. That's not near a neighborhood. Sorry. I'm  
23 just opposed to the hospital in its proposed location.  
24 That's all I have to say.

25 MS. NICOLE: Thank you for your comments. Matt

1 Weaver, you may unmute your line and go ahead.

2 CALLER MATT WEAVER: Hello, and thank you for  
3 allowing me to share my comments with the planning  
4 commission. My name is Matt Weaver. I am a former  
5 business owner in the Stone Lake Shopping Center, and  
6 I've been speaking about this project ever since we were  
7 surprised with the introduction of the concept in 2018.  
8 We owned what we'd call a heart attack prevention center  
9 with results transformation center that did business in  
10 the Stone Lake Landing Shopping Center for over  
11 five-and-a-half years. We were bullied out by local,  
12 former politicians, many of them who have checkered  
13 pasts and struggled with their own public persona.

14 We received many false representations of the  
15 outreach at the Stone Lake -- excuse me, the CNU  
16 leadership would have with those of us who did business  
17 in the shopping center. And many of us were ultimately  
18 double whammied when you combine the unwillingness,  
19 arrogance, and bullying of the CNU leadership team as  
20 they tried to chase out the prosperous merchants in the  
21 center, along with COVID-19. And so, much of the  
22 ballyhoo job creation is simply job replacement. And  
23 when you calculate the number of months, years, and  
24 weeks that jobs have been eliminated in my company at  
25 that location -- for example, eight, with the number of

1 projected years until the hospital is built, you can see  
2 the negative job engine that the CNU team has already  
3 put into place. They will stop at nothing. Their goal  
4 doesn't seem to authentically build a hospital, because  
5 the funding has not been identified. The goal seems to  
6 use their political connections and their lobbyists to  
7 influence those who make decisions in Elk Grove to give  
8 them the entitlements, and perhaps to sell those  
9 entitlements, somebody in the future, who would  
10 potentially develop this center.

11 I think this will be a ghost shopping center for  
12 many years. I don't think a hospital will be built.  
13 And I think Elk Grove has a very distrustful potential  
14 partner here, and I urge you to strongly consider  
15 rejecting this application. Again, this is Matt Weaver.

16 MS. NICOLE: Thank you for your comments. Vice  
17 Chair Murphey, we have a couple callers, so I'm going to  
18 check in with one of them now. If your number ends in  
19 9654 and you're called in and you'd like to make a  
20 public comment, if you could please let me know and go  
21 ahead.

22 CALLER 9654: Sound check?

23 MS. NICOLE: Yup. You're good. Did you want to  
24 make a public comment?

25 CALLER 9654: Please.

1 MS. NICOLE: Okay. We'll start the clock. Go  
2 ahead.

3 CALLER 9654: Thank you. In the last two years  
4 alone, the planning commission has rejected projects  
5 that had similar impacts, but on a much smaller scale,  
6 to the significant impact that CNU's hospital project  
7 would have on the west side of Elk Grove. For example,  
8 in 2019, the planning commission denied a plan to let  
9 Buddhist monastery rule northeast Elk Grove. The size  
10 of that proposed project, as well as effects on traffic,  
11 noise level -- I mean, it all sounds similar;  
12 right? -- nearby the residential neighborhoods were  
13 miniscule in comparison to the proposed CNU Project.

14 However, the following comments were offered by  
15 planning commissioners at the time when justifying the  
16 denial of the project. "The project would add too much  
17 to the road, too much to the quarter." Commissioner  
18 Murphey said that, saying it would be shoehorning a  
19 particular use into the residential area. Conditional  
20 use has to comport with the character of the area, and  
21 I'm afraid this one does not. I should be using  
22 quote/unquote. Sorry. Former commissioner made a --

23 Anyway in 2020, the planning commission denied  
24 its CUP for a three-story sales storage facility,  
25 primarily because of its size and visibility. Two



1 residential neighborhoods ordered the property, which  
2 was another point of contention. Former commissioner  
3 made it. I'm going to be -- I'm not going to be able to  
4 support the project. I had issues with the CUP  
5 considering the nature of the area juxtaposed to the  
6 properties particular to the north that show a lot of  
7 care, articulation, private ownership. I see a tall  
8 building butted up against theses residences. So I have  
9 a problem with the use, and I have a problem with the  
10 design.

11 Commissioner Murphey, I did have a little bit of  
12 heartache regarding the height of the building in that  
13 neighborhood. It would not be a good fit for that  
14 neighborhood. And Commissioner Shuck, this, for me,  
15 truly falls on its location.

16 And most recently, there was a 5-0 vote against  
17 the requested change to the general plan, which would  
18 allow a developer to create a private gated community in  
19 rural Elk Grove that was brought up a little earlier.  
20 The request was rejected primarily because the project  
21 would not comply with the general plan and the character  
22 of the rural community. The general plan is something  
23 that is meant to be altered for the benefit of CNU.  
24 It's meant to preserve the safety and the well-being of  
25 the citizens. And if the precedent is set in this

1 situation, like mentioned earlier especially when Randy  
2 spoke, the same thing can happen anywhere else in the  
3 city, and any semblance of proper and thoughtful  
4 planning goes straight out the window.

5 I think you know where I'm going. Like  
6 yourselves, the west side values character, everybody.  
7 The character of our small business owners that were sad  
8 here en masse, the character of the surrounding  
9 wildlife, and the character of our community. CNU, in  
10 its proposed hospital, in no way fits in with the  
11 character of any of those things.

12 This is just one of thing many reasons I hope you  
13 will not recommend the project to the council. Thank  
14 you very much, everybody.

15 MS. NICOLE: Thank you for your comments. I have  
16 Charles and Darlene Dangerfield up next. You may unmute  
17 your line and go ahead.

18 CALLER CHARLES AND DARLENE DANGERFIELD: Good  
19 evening, everyone. I just wanted to say that I've been  
20 a member of this community for a very long time, my  
21 husband and I. And we're hoping that the committee will  
22 reject this project. We bought into this community to  
23 have a family and quiet life and the wildlife -- being  
24 able to just walk the trails and look at the wildlife  
25 and just enjoy it with our grandchildren. The hospital

1 will negatively the affect the livelihood and the  
2 quality of life for everyone already living here, and no  
3 one is concerned about the community. Please take a  
4 look at that, and thank you for your time.

5 MS. NICOLE: Thank you for your comments. Jason  
6 Stelling, you may unmute your line and go ahead.

7 CALLER JASON STELLING: Thanks for your listening  
8 and consideration. This hospital location is bad  
9 planning. So far, they've been a bad neighbor. It's a  
10 terrible location. City can't manage graffiti on its  
11 own sound walls. On the I-5, they can't match the  
12 colors to cover up the graffiti. How are they going to  
13 make sure that this project goes off the way that it  
14 should? Please vote no on this project. Thanks for  
15 listening to our concerns. Have a good night.

16 MS. NICOLE: Thank you for your comments. Herminio  
17 Torres, you may unmute your line and go ahead.

18 CALLER HERMINIO TORRES: Hello, can you hear me?

19 MS. NICOLE: We can.

20 CALLER HERMINIO TORRES: Thank you for your time.  
21 Hello. My name is Herminio Torres. I'm not the  
22 president of anything. I don't represent anyone but  
23 myself. I don't usually participate in these types of  
24 discussions. I'm not a very political person, nor am I  
25 usually outspoken, but this issue has motivated me to

1 speak up.

2 I moved to Elk Grove three years ago from  
3 Sacramento area in order to start a family. I live in  
4 Stone Lake, and I feel the need for my voice to be heard  
5 regarding this issue. I'm one of the over 1,000  
6 residents that has signed the petition against CNU.  
7 Like many of my neighbors, I was attracted by this  
8 community, because it's a very family-friendly place.  
9 I'm very concerned about the noise and traffic this  
10 project would create, and how this may impact my  
11 neighborhood. I'm not an expert or consultant in any of  
12 the fields for this project, but in my work experience,  
13 I learned that data can easily be manipulated to show  
14 any desired outcome. So I don't believe that CNU is  
15 being transparent. Nor do I believe that they have the  
16 best interest of the people of Elk Grove, and they  
17 especially do not seem to consider the beautiful  
18 wildlife that lives around our community.

19 I ask that you please vote no on this project.  
20 This isn't the right project for our community, nor for  
21 our families, especially when a better location could be  
22 established elsewhere in the middle of the city that can  
23 serve all of Elk Grove. I think that CNU needs to find  
24 a better location in a not residential area.

25 My name is Herminio Torres, and I agree with all

1 of the statements made tonight by those people who have  
2 opposed the CNU hospital projects. Please vote no on  
3 this project. Thank you for your time.

4 MS. NICOLE: Thank you for your comments. Melinda  
5 Robinson, you may unmute your line and go ahead.

6 CALLER MELINDA ROBINSON: Thank you. Can you hear  
7 me?

8 MS. NICOLE: We can.

9 CALLER MELINDA ROBINSON: I just wanted to address  
10 really quick, a couple of the items people brought up  
11 tonight. The Stone Lake Landing Shopping Center's  
12 decline was specifically noted to begin once CNU  
13 purchased the property. They refused to renew leases,  
14 they refused to expand businesses during construction.  
15 They have lied to each and every tenant.

16 With regards to the union and construction folks  
17 that are calling in and are asking for approval of this  
18 project for jobs, If this project is approved in another  
19 location, you will still have your job. We will no  
20 longer have our community. And if you're going to  
21 praise CNU for being able to dole out vaccines, you need  
22 to extend that praise to other institutions that have  
23 done the same. I feel that they're just capitalizing  
24 for public approval and for good PR.

25 I've been a homeowner in the Lakeside community

1 for 15 years. And with permission, I want to quote a  
2 comment from a fellow Lakeside homeowner: "if they want  
3 a 12-story hospital, build it where such projects are  
4 favored or sought." It's kind of like saying I want to  
5 convert my house into a Burger King, because my  
6 neighborhood needs more options than just McDonald's. I  
7 don't care if I bought this house knowing I couldn't  
8 build a Burger King. It's my property, and I'll do what  
9 I want with it.

10 Your vote is going to be to set a precedent that  
11 will either continue to protect this city or open the  
12 door for anyone to come in to Elk Grove, knowing they  
13 can build whatever they want wherever they want. Who  
14 will want to come here knowing that what they invested  
15 into, whether it's their home or their business, can be  
16 jeopardized and taken from them. What protection and  
17 security are you providing for your businesses and  
18 homeowners?

19 The greatest security is to protect your  
20 citizens, and placing this hospital into a floodplain is  
21 literally placing your citizens into harm's way. This  
22 hospital doesn't belong in this location, and no one has  
23 found one reason that this hospital must go in this  
24 location other than the fact that CNU bought the  
25 property. Their lack of due diligence does not entitle

1    them to destroy our community, our wildlife, our  
2    neighborhoods, or our local businesses. They have tried  
3    to bait this community with lies, and a lot of what they  
4    have said tonight has been self-serving and veiled  
5    responses. And it is your duty to see through those  
6    lies and do what is best for this community and this  
7    city.

8           If, after all you've heard tonight, you are still  
9    swayed into believing CNU belongs in Elk Grove, then at  
10   the very least, recommended it be build where it will be  
11   beneficial, and it will not destroy neighborhoods and  
12   businesses. There's a severe lack of emergency medical  
13   services in east Elk Grove, east of Highway 99, and  
14   south of Elk Grove Boulevard. There is substantial  
15   space for CNU to carry out this project without the  
16   negative impacts the current proposed location creates.  
17   An alternative location is the only possibly chance for  
18   a win-win for all of those involved. Thank you for your  
19   time, and please vote no on this project.

20           MS. NICOLE: Thank you for your comments. We're  
21   going to try Lisa Nicolls again. She had trouble  
22   earlier. Lisa, your line has been unmuted, if you want  
23   to try and go ahead and start.

24           CALLER LISA NICHOLS: Can you hear me?

25           MS. NICOLE: We can. Go right ahead.

1           CALLER LISA NICHOLS: Yay. Okay. Perfect. Yes,  
2 my name is Lisa Nichols. I'm president of Region  
3 Business. We're an organization comprised of numerous  
4 local businesses, and our mission is advancing regional  
5 economic development, especially in Elk Grove. Since  
6 it's already late, I'm not going to repeat a lot of  
7 what was said earlier, but I'd like to echo the comments  
8 made by Tim Murphy and Carter Nelson. Region Business  
9 strongly believes that the benefits of this project that  
10 they will provide the city and the greater Sacramento  
11 region cannot be overstated. The high-paying jobs and  
12 state-of-the-art medical care that this will provide to  
13 Elk Grove will be a benefit for years to come, and we  
14 strongly support this project and ask that the  
15 commission approve it. Thank you.

16           MS. NICOLE: Thank you for your comments. I'm  
17 going to go to a caller again. If your number ends in  
18 7521, I've unmuted your line. And just check in with us  
19 if you have a public comment for tonight. All right.  
20 I'm not seeing that they're --

21           CALLER 7521: Hello?

22           MS. NICOLE: Yes. Hi, we can hear you. Did you  
23 want to make a comment?

24           CALLER 7521: Yes, please.

25           MS. NICOLE: All right. Go right ahead. Your time



1 is starting.

2 CALLER 7521: Hello. My name is Thomas Small, and  
3 I live in Elk Grove. I need to tell you that Elk Grove  
4 is not prepared for the looming homeless crisis that the  
5 CNU Project will spawn if allowed to proceed. I speak  
6 with the benefit of professional medical experience.  
7 I've been a registered nurse for over 20 years,  
8 primarily in the field of psychiatry and emergency  
9 services. I've both worked for and near hospitals very  
10 similar to the proposed project.

11 Wherever hospitals appear with empty adjacent  
12 land, so do homeless camps. Elk Grove is neither  
13 prepared nor equipped to deal with the number of  
14 homeless who will camp next to the freeway if CNU opens.  
15 The attraction is two-fold: Hospitals are an instant  
16 source of water, toilets, food, and other resources; and  
17 additionally, hospitals are dropoff points for law  
18 enforcement pickups of disturbed individuals across the  
19 entire region.

20 As an example, in Southern California, Inland  
21 Valley Medical Center is a small, Level 3 trauma center  
22 next to Interstate 15. It is near to Murrieta, a suburb  
23 that's very similar to Elk Grove -- similar population,  
24 very close. After that hospital opened, a homeless camp  
25 spawned in the wooded area between the freeway and the

1 hospital. Twenty-four hours a day the inhabitants would  
2 come into the hospital, bathe in the public restroom  
3 sinks, fill containers of water, and try to procure  
4 food. Meal trays were stolen from patient rooms, cars  
5 were burglarized and had components, such as catalytic  
6 converters stolen. Businesses and residents in the area  
7 complained about the influx of crime. Additional  
8 resources were spent by the municipality on specialized  
9 police units with only minor effect.

10           Additionally, when police in the region are  
11 faced with a disturbed individual, one of their most  
12 frequently used tools is a 5150. It's part of  
13 California's law dealing with the mentally ill. Allows  
14 an individual to be held up to 72 hours for psychiatric  
15 evaluation. Police like it because it's just a simple  
16 form, and if they have somebody who's a danger to  
17 others, they just need to complete that, and they  
18 don't -- it's much less paperwork than arresting them.

19           The problem is that the hospitals can't refuse  
20 these patients. They're left by police in the emergency  
21 room until released by the hospital. In  
22 practical -- the practical problem is that most  
23 hospitals are neither equipped or staffed to deal with  
24 these individuals, especially the ones that are violent  
25 or difficult to discharge. Individuals simply walk out

1 or release without any discharge plan. Commonly, they  
2 joined the ranks of the nearest homeless encampment or  
3 engage in activities necessitating a police response,  
4 and the cycle keeps repeating.

5 A for-profit healthcare organization attends to  
6 the best needs of its shareholders only. That's their  
7 legal and ethical obligation. The CNU Project is not a  
8 benefit for the residents of Elk Grove, or the  
9 businesses which offer right here. The CNU Project is a  
10 lodestone that the area businesses, residents, and  
11 eventually the entire city will have to carry.

12 I urge you to stop the project as it currently  
13 stands. Thank you for your time.

14 MS. NICOLE: Thank you for your comments. Steven  
15 Washburn, you may unmute your mic and go ahead.

16 CALLER STEVEN WASHBURN: Hello. This is actually  
17 Lindsay Washburn, his wife. I was born and raised in  
18 Elk Grove, and I am a 12-year homeowner in Stone Lake.  
19 I am also a mom of three young children, and one of the  
20 things about the hospital that they keep saying is that  
21 time is of the utmost importance when it comes to  
22 medical care, but the majority of Elk Grove will  
23 actually be closer to the Dignity Health Project, or  
24 even to the existing South Sacramento hospitals than it  
25 would be to this hospital. Access to the public, to

1 this hospital, will be off of West Taron, which is our  
2 neighborhood street. The only access from Elk Grove  
3 Boulevard will be emergency vehicles only. So  
4 the -- all of the people from the public going into the  
5 hospital will have to be coming onto our very small  
6 residential street.

7 I'm also concerned about the safety of our  
8 neighborhood, as the previous caller was talking about,  
9 homeless or mentally disturbed individuals that are  
10 released from the hospital and have nowhere to go could  
11 end up just wandering into our neighborhood. As a mom  
12 of three young kids, that makes me very concerned about  
13 them being able to play outside, even with my  
14 supervision. The CNU representatives mentioned that  
15 they would have staff looking for bird carcasses,  
16 because of the air strikes or the -- from the  
17 helicopters. And my question is, will they extend that  
18 into searching our neighborhood for bird carcasses or am  
19 I going to have to be concerned about finding those for  
20 myself or my children or my dog?

21 Repeatedly throughout the CNU presentation, they  
22 were saying, "I can assure you that." I don't really  
23 find a whole lot of trustworthiness in when they say  
24 that they can assure me. Their stories have changed  
25 throughout the two years that we have been hearing about

1 their hospital. The number of jobs that they say  
2 they're creating, versus what their own study has shown  
3 are different. They've gone from profit to nonprofit to  
4 get funding. They've claimed to work with the small  
5 businesses in the shopping center they purchased, when  
6 they have not. They have questionable campaign  
7 contributions and support from politicians because of  
8 it. Their state agencies issuing citations and fines  
9 for offering shortcut degree programs that were not  
10 legitimate. But, of course, we should trust them when  
11 they assure us. Please vote no on this project.

12 MS. NICOLE: Thank you for your comments. Dwight  
13 Zuck, you may unmute your line and go ahead.

14 CALLER DWIGHT ZUCK: Yes, thank you very much.  
15 Glad I got in here before the fifth hour here. I've  
16 been a 20-year resident of Stone Lake. My wife and I  
17 looked all over the area when we had toddlers, and, you  
18 know, we didn't want to be near an airport. Similar  
19 builders up there in -- by the airport, we looked down  
20 Roseville. We ended up here, because it was on the edge  
21 of society, on the edge of the hustle and bustle. A  
22 getaway from the routine -- you know, city activity  
23 activity and everything.

24 And I have a brochure that I had from when we  
25 moved here, and the brochure just talked about "at home

1 with nature." It's got birds all over the front of it.  
2 It says -- open it up, and it says, "a more natural  
3 alternative." Third page, it says, "designed by  
4 nature." Look at all these pictures. And we enjoyed  
5 that. We take these walks daily out here. To all the  
6 people that spoke up and said for construction  
7 jobs -- and this point was made by Joe Meyer and Melinda  
8 Robinson -- yes, you can still work at the hospital  
9 building over at the Lent Place. You're adding like  
10 two miles on the commute. It's on the other side of  
11 Gall -- or, excuse me. It's on the other side of  
12 Franklin here.

13 We're not saying don't build a hospital. Just  
14 don't build it here. All the people that need jobs that  
15 want to work, you can work locally in Elk Grove. You  
16 don't have to travel a long way to still work there. So  
17 proceed. And all the realtor people -- they shouldn't  
18 impose. They should want a good project. The point the  
19 gentleman made about being very well vested in this  
20 town, or in the west side, or in the Lakeside -- excuse  
21 me, Laguna West or Lakeside. You know, you just don't  
22 feel the pain that we do here in Stone Lake, because  
23 this is in our community. You're protected by a road  
24 that runs in between.

25 So anyways, if you put yourselves in our

1 shoes -- and we've been here for a while -- and all of a  
2 sudden, on the main -- one of the three main  
3 thoroughfares into our neighborhood -- they decide to  
4 put up a hospital that has 33 -- 3,300 parking lots.  
5 Can you imagine if parking -- and they're constantly  
6 used -- the traffic that's going to come in on those.  
7 And there's going to be heavy-duty 18 wheelers  
8 delivering oxygen, delivering big payloads. And they  
9 have to go right into the neighborhood behind the  
10 neighbors on Nature Trail and those on Ruddy Duck. And  
11 this is all hours of the day. I don't even know if the  
12 road is qualified to handle those 18 wheelers at that  
13 point below Riparian Drive.

14 So I've looked over all the drawings. I've  
15 submitted a bunch of information. In three hours, I've  
16 found a bunch of errors and drawings that this so-called  
17 world-class Pablo's company -- Paolo's company -- has  
18 put together. Whether they're typos, they're still  
19 errors, and the drawings are not worth the paper that  
20 they're printed on. Vote no.

21 MS. NICOLE: Thank you for your comments. Alex  
22 Abdullah, you may unmute your mic and go ahead.

23 CALLER ALEX ABDULLAH: Hi. Thank you, commission,  
24 for hearing our voices here in the community. I've been  
25 here in Stone Lake since 2001. (Inaudible audio.) You

1 know, it was a place where we wanted to be because of  
2 the openness, the nature, the ability to just be able to  
3 walk down the street and walk the community and be able  
4 to enjoy the aesthetics of the community, whether it  
5 just be the fresh air or the birds flying in the air.  
6 It was just something that we decided, well, this is  
7 where we want to be.

8 Finding out that this hospital is going to be  
9 built or planning to be built was something that we  
10 really didn't see at all when we first moved here. This  
11 is a bad location for this hospital. This hospital does  
12 not belong at this location. Not to say that we don't  
13 need a hospital, but we don't need a hospital here in  
14 this part of Elk Grove, where we have just -- where we  
15 have had a report with the businesses that are around  
16 here. The mall, the little mall that we have right now,  
17 with the Awes (phonetic) and the Flaming Grill and the  
18 nail salon and the bed (phonetic) and things like that.  
19 Those are all businesses that have been thriving just in  
20 the last couple of years. Just to be able to walk to  
21 those businesses have been a great thing to do.

22 Just to know that there's going to be a glowing  
23 light 24 hours a day, seven days a week, 365 days a  
24 year, going in our neighborhood is just -- it's just  
25 very, very disappointing, if that's the case. We don't



1 need this building in our community. We do need a  
2 hospital, but not here. Not here in Stone Lake, where  
3 we just don't need that type of building megaplex campus  
4 that's going to be built here. This wasn't the reason  
5 that we came to Elk Grove. This community is very  
6 strong and diverse, and we just love the way it is now,  
7 and for it to change would be a disaster. Please vote  
8 no on this plan.

9 MS. NICOLE: Thank you for your comments. I'm  
10 going to check not in with a caller again. We have two  
11 people left on the phone to check with. If your number  
12 ends in 2472 -- if you can unmute and let us know if  
13 you'd like to make a comment tonight. Again, that's the  
14 person who's number ends in 2472. Caller, are you  
15 there? It looks like you're --

16 CALLER 2472: Yes. No thank you. No thank you.

17 MS. NICOLE: All right. Arnav Wadhawan, you may  
18 unmute your mic and go ahead.

19 CALLER ARNAV WADHAWAN: Hi. Can you hear me?

20 MS. NICOLE: I can.

21 CALLER ARNAV WADHAWAN: Okay. So I just want to  
22 say again that the city of Elk Grove has almost 200,000  
23 residents and no hospital right now, and these residents  
24 have to travel all the way to Sacramento to get urgent  
25 or critical care. And this hospital is especially

1 relevant, like during the pandemic, where a lot of the  
2 hospitals are overwhelmed by patients. And it's just  
3 such a critical thing to have a hospital. As well as  
4 that, it's a training hospital and a teaching hospital  
5 that can be centered for innovation of  
6 health -- of healthcare and future training of health  
7 professionals that will live and work in the area,  
8 increasing the business for local restaurants,  
9 increasing the property values, paying taxes with  
10 high-income jobs, as well as the hospitals would be  
11 paying taxes as well. and I would strongly encourage  
12 you all to support this hospital, as it will bring a lot  
13 of business, health, and innovation to Elk Grove.

14 MS. NICOLE: Thank you for your comments. Mari  
15 Rosales, you may unmute your line and go ahead.

16 CALLER MARI ROSALES: Hi. Good evening. I just  
17 wanted my voice to be heard tonight. I'm a Stone Lake  
18 resident. My family and I, we've lived in Stone Lake  
19 off and on since 2002. And I say off and on, because we  
20 left for a short period of time, and given the  
21 opportunity to live anywhere in Elk Grove, we decided to  
22 come back because that's what a wonderful community it  
23 is. To echo what so many people or me have said, the  
24 hospital could not be in a worse place. It's not that  
25 I'm against the building of the hospital. It's just

1 that being built in Stone Lake does -- it doesn't make  
2 any sense. It brings absolutely no positives to the  
3 residents in Stone Lake or Lakeside.

4 We're a residential community. We're a family  
5 oriented community, and CNU has not been honest with Elk  
6 Grove citizens. Their projection numbers simply do not  
7 make sense. They contradict themselves very often and  
8 refuse to address questions that people have when given  
9 the opportunity and the news media. They'll often  
10 respond saying "no comment," so it just leaves us  
11 wondering what is true and what is not. They send out  
12 mailers and flyers, confusing residents, purposely  
13 misleading our citizens. They phrase their mailers time  
14 and time again, as if their project is a done deal, and  
15 we know that that is not true.

16 What about the businesses that will be displaced?  
17 Don't they matter? Don't we as residents matter? If  
18 this were approved, we would live within walking  
19 distance to a hospital. I don't consider myself or my  
20 neighbors lucky. The helicopter, ambulances, and  
21 excessive traffic would take away the quality of the  
22 community that we worked so hard to achieve. We have an  
23 elementary school that would be just six walking blocks  
24 away from this proposed hospital. What about the safety  
25 of our children? Our children walk and bike home to and

1 from school. Will this still be a safe option for them?

2 The answer would be no. It would not.

3 Everything that the caller -- or maybe five calls  
4 before myself said -- the gentleman that had experienced  
5 regarding all the safety we know now, and it only makes  
6 sense that it is true. It will no longer be safe for  
7 our children to walk to and from school to their home.  
8 I can't stress enough the safety issues that a project  
9 like this brings to our community and families. I'm  
10 sure that many of us have been to Sacramento hospitals,  
11 and we know the feeling walking to and from our car. We  
12 don't feel safe. It's going to change our community.  
13 It's going to impact our safety. It's going to impact  
14 our property values. We weren't told that buying a home  
15 in this community would give us a hospital as a  
16 neighbor, build it in Lent Ranch. Let future  
17 communities have the option to buy a home next door to a  
18 hospital. That option wasn't given to us. So I urge  
19 you to please consider Stone Lake and Lakeside residents  
20 and vote no against this project. Thank you.

21 MS. NICOLE: Thank you for your comments. Mark  
22 Graham, you may unmute your line and go ahead.

23 CALLER MARK GRAHAM: Can you hear me?

24 MS. NICOLE: We can.

25 CALLER MARK GRAHAM: Good evening, planning

1 commissioners and staff. My name is Mark Graham. I  
2 live in Elk Grove. I think that the residents have  
3 given you plenty, plenty of good reasons to deny this  
4 project. I want to talk about the questions from the  
5 commissioners. And I know you're going to have a  
6 discussion when this public comment session is over, and  
7 I look forward to that. And I hope you really get into  
8 the serious questions and details.

9 Now, Commissioner Robles, I heard you ask -- I  
10 don't know how many questions -- how many questions that  
11 you did this, but you would preface your question by  
12 saying, "Well, I don't want to get into the details,  
13 but --" and then you'd ask something. Or, "I don't want  
14 to get into the weeds, but my question is --" and then  
15 you'd ask something. And that created a pattern on  
16 behalf of Mr. Paolo (inaudible audio) hospital. I heard  
17 them say a number of times, "Well, I don't really want  
18 to get into the details, but here's my answer to your  
19 question." So we have a vague, general, nonspecific  
20 question, and you more or less gave them carte blanche  
21 to give you a vague, nonspecific, general answer. That  
22 does not serve the planning commission, and it does not  
23 serve the people of Elk Grove.

24 Please, if you have a question on your mind, ask  
25 it. I'm saying this to all the commissioners. Ask the

1 question that you really want to ask. And don't worry  
2 if it's a long question or a detailed question or you  
3 have to get into the weeds. Now, the chairman tonight,  
4 Commissioner Murphey, is experienced and knowledgeable.  
5 He knows exactly what he's doing, and he has a lot of  
6 experience. I guarantee you, Commissioner Robles, he  
7 will not slap your hand. Don't be apologetic and  
8 worried and concerned that you're asking a question that  
9 is too detailed. I can promise you right now,  
10 Commissioner Murphey, Chair Murphey will not slap your  
11 hand if you ask a question that you really want to ask.  
12 So please, go ahead and ask it. If you continue this  
13 pattern, then this -- you won't really ask the questions  
14 that you want to ask. I guarantee you that you're not  
15 the only person that has that question, that detailed,  
16 specific question. There are lots of people listening  
17 that want to know.

18 And so you will go through the whole hearing with  
19 vague, nonspecific questions, and then at the end, if  
20 somebody, you know -- the proponents of this project  
21 will say to themselves or the newspaper or  
22 anybody, "Well, nobody asked us about that, you know."  
23 And that's going to be their excuse, so don't let it be  
24 true. Ask them the specific stuff.

25 I think that -- anyway, this is the time. There

1 isn't going to be another meeting when this is on the  
2 agenda of the planning commission when you can ask your  
3 specific questions, when you can ask with details, and  
4 when you can get into the weeds. It's not going to  
5 happen again. This is tonight. Tonight is the meeting.  
6 Tonight is the time. It does not matter that it's  
7 11:10. You knew for months that this was going to be a  
8 long meeting and a complicated project. Make the time  
9 tonight to do it right. Don't act like there's another  
10 meeting by the planning commission to consider this.  
11 There isn't. Thank you.

12 MS. NICOLE: Thank you for your comments. Osha  
13 Moserve, you may unmute your line and go ahead.

14 CALLER OSHA MOSERVE: Hello, can you hear me?

15 MS. NICOLE: We can.

16 CALLER OSHA MOSERVE: Thanks. My name is Osha  
17 Moserve. I'm speaking on behalf of the Stone Lake's  
18 Master Association. I'm with the firm of Soluri Meserve  
19 of Sacramento. Along with many other groups and  
20 individuals, my firm has submitted extensive comments  
21 explaining the numerous fatal defects in the analysis  
22 prepared for this very impactful project. In addition  
23 to the legal inadequacies, the letters include expert  
24 reports explaining why the EIR's analysis of air  
25 quality, hydrology, energy, transportation, biological

1 noise, and other impacts does not meet minimum CEQA of  
2 requirements.

3 The applicant representative said it had worked  
4 to address questions of the community, but the questions  
5 we heard about earlier tonight from the applicant are  
6 not the main ones the public has been imposing. CNU  
7 never mentioned a list of the environmental impacts that  
8 the public is so concerned about, including those you  
9 have been hearing about for the past several hours,  
10 instead, promising to provide details in the future  
11 about the financial aspects of the project. As the  
12 planning commission knows, the EIR that meets the  
13 minimum disclosure requirements of CEQA the foundation  
14 upon which the other numerous approvals that are in the  
15 staff report would need to be based.

16 There are far too many flaws in the environmental  
17 review documents to discuss in three minutes. They are  
18 described in the comments and were working on additional  
19 legal and technical comments on the final EIR for  
20 submission prior to the city council consideration to  
21 ensure the record is complete. The applicant's decision  
22 to segment the project into three phases further  
23 complicates meaningful review, as you've seen from the  
24 written comments.

25 Earlier, you saw a sense (sic.) show two slides'



1 worth of significant, unavoidable impacts: visual  
2 character, light and glare, air pollutant, noise,  
3 cumulative ground water impacts, which is a really  
4 important issue, as we try to comply with the  
5 Sustainable Ground Water Management Act. And there's a  
6 bunch more impacts that the letters explain that are  
7 also significant and weren't on those two slides, like  
8 the biological impacts from killing birds in violation  
9 of state law, and shading homes in their solar panels,  
10 and allowing flooding to occur in essential services.  
11 The CEQA findings in your packet do not provide  
12 substantial evidence that these impacts can be  
13 overridden by economic, social or other considerations  
14 as CEQA requires when there are significant, unmitigated  
15 impacts.

16       You have heard how the project only provides a  
17 fraction of the economic impacts promised, and how  
18 Dignity Health teaching hospital is already underway,  
19 and there's not a need for a hospital in this location.  
20 The city lacks the substantial evidence needed to  
21 override these impacts. The planning commission has  
22 heard all it needs to comfortably vote not to recommend  
23 certification of the EIR and numerous other  
24 projects. Please uphold good planning and vote no.

25       MS. NICOLE: Thank you for your comments. Carl

1 Rhodes, you may unmute and go ahead. Carl, I'm not sure  
2 if you're trying to speak, but it looks like you're  
3 still on mute. There we go. Carl, it looks like you're  
4 unmuted now, but we're not hearing you if you're  
5 speaking. I will try coming back to you in a moment.  
6 Linda Rustad, you may unmute your line and go ahead.

7 CALLER LINDA RUSTAD: Yes, thank you. I've been a  
8 Stone Lake member. We've lived here -- we bought in  
9 during the first phase of building. My husband and I  
10 looked for 11 years as to where we were going to build,  
11 where we were going to have our house built and where we  
12 were going to raise our family. We picked this area  
13 because it was three sides protected. We had our small  
14 town of Elk Grove. We have the freeway and the wetlands  
15 behind us. All the farm land, and then we had the bird  
16 reserve to the other side. There was going to be  
17 nowhere that we were going to be in the middle of a  
18 city. And we wanted to be in the outskirts. We wanted  
19 to be in the quiet suburbs. We wanted to be out away  
20 from the hustle and the bustle. My husband has a high  
21 stress job. He wants to come home to a quiet  
22 neighborhood. We don't want to be in the middle of high  
23 traffic, honking, sirens, helicopters. We did not  
24 purchase our house in that area in the business  
25 district. We did not purchase it in the middle of

1 downtown. I suspect that a lot of the people that moved  
2 here moved here for that exact reason. There was  
3 something appealing about the neighborhood the way it  
4 was.

5 And now, people are trying to come in and change  
6 it, and they're using fancy language, or the art of  
7 distraction, or redirecting conversations, or simply  
8 just wasting time talking about things, pretending like  
9 they're answering some of the concerns. But the  
10 concerns that we have here are real. This is our life  
11 investment. We've saved for years and years and years,  
12 and we have put our money into a place that we were  
13 going to take a 20-year loan out, or a 30-year for some  
14 people, or 15, or whatever. And they choose to raise  
15 their families. Do we really want our children in this  
16 little elementary school in our development listening to  
17 sirens and helicopters all day? We bought out here  
18 because we wanted to be out away from all that.

19 I think it's a health hazard with all the waste.  
20 I know that big business come in. They make a lot of  
21 promises, and then years down the road, when the  
22 neighborhoods are all run down and all the waste is  
23 going out into the waterways and into the ground and  
24 leaks, they just pay their fines, but the neighborhood  
25 is the one that suffers. I think the medical hospital

1 is very much needed. I love the idea of a training  
2 center. I think it's a great idea to raise more  
3 doctors. I just think it needs to be in a different  
4 area. It needs to be in an area designated for  
5 business, designated for the hustle and bustle, not for  
6 the residential peaceful home life. That's not what we  
7 bought into. That's not what we were promised.

8 We can't kill the birds. We can't -- we're  
9 under -- in the HOA here, we're only supposed to have  
10 10 percent rentals, yet they're going to bring in all of  
11 this same mentality as people who live in rentals that  
12 don't care about the neighborhood. Let us homeowners  
13 have a bigger voice. It's our investment, our livelihood  
14 that we're paying for here. It's not just to come and  
15 go. Thank you.

16 MS. NICOLE: Thank you for your comments. I'm  
17 going to go to our last caller to check in here with  
18 really quick, to see if they wanted to make a public  
19 comment. If your number ends in 1056, I have unmuted  
20 your line, and if you could just let us know if you'd  
21 like to make a comment tonight or not. Again, this is  
22 the caller whose number ends in 1056. I'm just going to  
23 give him a second here. I know there's a little bit of  
24 a delay with the phone part. All right. It looks like  
25 they're not unmuting, so thank you for letting me check

1 that.

2 And Marc Ledet, you may now up mute your line and  
3 go ahead.

4 CALLER MARC LEDET: Good evening, and thank you for  
5 hearing my comment. You can hear me; right?

6 MS. NICOLE: Yes, we can hear you.

7 CALLER MARC LEDET: Okay. I'd just like to express  
8 my opposition to the CNU Project. I'm a homeowner that  
9 lives just behind the proposed site. I purchased my  
10 home in Stone Lake to raise my family and possibly  
11 retire. Stone Lake is a quiet and peaceful  
12 neighborhood. This project would ruin the whole idea  
13 and my investment. It would diminish the safety of the  
14 neighborhood, and it would bring nonresidents into our  
15 neighborhood to park and to create excessive traffic,  
16 and possibly crime. This would eliminate the peaceful  
17 quiet of the neighborhood that is so important as  
18 residents. It has become less safe just walking by as  
19 the students don't stop as they exit the college.  
20 They're not great neighbors now, and I can only imagine  
21 what it would be like from the time construction begins,  
22 till the light shine, the helicopter flies, the  
23 ambulance and the traffic and the vagrants ruin it.  
24 And I use the phrase peaceful quiet and peaceful  
25 enjoyment, because every -- as a resident, every

1 resident has the right to peaceful quiet, you know, at  
2 our home. And will our new neighbor grant us that  
3 right? If I purchased my home next to a hospital, I  
4 would be aware of that environment when I moved in, and  
5 I wouldn't expect the same level that I expect now. I  
6 seriously oppose this project and the disruption of the  
7 peaceful quiet and the safety of our home, and I'd just  
8 like you to vote no. Thank you.

9 MS. NICOLE: Thank you for your comments. Lawrence  
10 Kinser, you may unmute your mic and go ahead.

11 CALLER LAWRENCE KINSER: Yes, hello. My name is  
12 Lawrence Kinser. I've been a resident of the Elk Grove  
13 and Stone Lake area for 20 years, and I'd just like to  
14 register my opposition to the project, for almost all of  
15 the reasons that previous callers have indicated related  
16 to the environment, the size of the project, and the  
17 location of the project. That's about it. Thank you.

18 MS. NICOLE: Thank you for your comments. Tim  
19 Kahl, you may unmute your mic and go ahead.

20 CALLER TIM KAHL: Yes, hello. Thank you for  
21 allowing me to make a few comments. I've been listening  
22 intently to the discussions and the presentation  
23 earlier. Seems to me that Michael Wong, his main  
24 justification is that we need more beds in Elk Grove,  
25 and many people agree with that concept; however, I

1 wondered in his presentation, he didn't seem to take  
2 into consideration that bordering Elk Grove is Kaiser  
3 South, which is at capacity of 244 beds, and the new  
4 Dignity Project will be 100 with a potential expansion  
5 to 333.

6 Now, he also mentioned, in using his own numbers,  
7 that 2.5 out of 1,000 is the national average. And if  
8 you look at Elk Grove with the population of 177,000  
9 times 2.5, it's roughly 442 beds. If you add the Kaiser  
10 South numbers 244 plus the Dignity numbers of 100, that  
11 gets us to 344. I'm concerned about the possibility of  
12 overcapacity here. And it seems to me that if the own  
13 numbers that are used by CNU hold true, that to meet the  
14 national average, that capacity only really needs to be  
15 another 100 beds.

16 But beyond that, I'm in agreement with many of my  
17 other residents here in Elk Grove, that there are a  
18 number of reasons for this is project should not go  
19 forward, from the environmental to the impact on the  
20 quality of life in this area.

21 The overcapacity seems to be a real problem. In  
22 1981, Oral Robert's University put forward a similar  
23 kind of plan, where they tried to build a 600-bed  
24 facility, and that failed within nine years. We've  
25 tried before with overcapacity with retail, and it

1 didn't work out. We had to go small. We don't need a  
2 ghost hospital. I had to make one more comment, and  
3 that is how do we know that this organization, which  
4 only five years of its track record, is going to be able  
5 to provide the care that they say they will? Oral  
6 Roberts, before they closed shop, had 20 years of  
7 experience and education, and they were only able to  
8 survive for ten years.

9 So I hope the voting planning commission will  
10 vote against this project. And I -- that's all I need  
11 to say right now.

12 MS. NICOLE: Thank you for your comments.  
13 Shubhangi Kalikar, you may unmute your mic and go ahead.

14 CALLER SHUBHANGI KALIKAR: Can you hear me?

15 MS. NICOLE: We can. Go right ahead.

16 CALLER SHUBHANGI KALIKAR: Okay. Good evening,  
17 commissioners, and thank you for the opportunity to talk  
18 tonight. My name is Shubhangi Kalikar, and we are  
19 residents of the Stone Lake community for the last 20  
20 years, and this is the first time ever I'm attending  
21 this planning commission meeting. So that should tell  
22 you -- and I've attending this meeting from  
23 6:00 o'clock. So I've spent five hours listening to  
24 everyone, and that should tell you how important this  
25 matter is to us and many of my neighbors here in the



1 Stone Lake community. So many callers before me have  
2 already presented the evidence and facts about how this  
3 project is not good for our city and for our community.

4 And due to tonight's presentation by the CNU, I  
5 saw these words, like in the proposal, like amendments,  
6 modifications, announcements, things like that, which  
7 tells me they want to change everything around here to  
8 fit themselves in, and that's not a good project. It  
9 should be the opposite. If a project is beneficial to a  
10 community, if it's useful for the community, they should  
11 first talk to the community, listen to them, and not  
12 threaten them. Even during the presentation, I heard  
13 some words like heal and health. And I want to tell  
14 them that healing is far away from what they are doing.  
15 They second they announced this project, they have only  
16 disturbed our lives. People here in the community,  
17 groups like Nest (phonetic) had to put in innumerable  
18 hours to just file this dishonest propaganda. And I'm  
19 surprised how they have even gotten this far with all  
20 these false and dishonest claims.

21 And I would like the commissioners to consider  
22 and listen to what the neighbors have to say and  
23 consider all the facts and make a decision -- the right  
24 decision -- and not allow this project to go ahead.  
25 Please vote no on this project. And we do not -- I say

1 this in all caps -- want this project here. Thank you.

2 MS. NICOLE: Thank you for your comments. Carl  
3 Rhodes, I'm going to try to you again to see if we can  
4 get your microphone working. You've been unmuted.  
5 There we go. You want to try speaking again?

6 CALLER CARL RHODES: Hello?

7 MS. NICOLE: Yes, we can hear you now. Go ahead.

8 CALLER CARL RHODES: Yeah, yeah, yeah. I did it.  
9 Thank you.

10 MS. NICOLE: Yes.

11 CALLER CARL RHODES: Good evening. My name is Carl  
12 Rhodes. My wife and I bought one of the first homes in  
13 the master plan Stone Lake development in 2001, with the  
14 expectation of the quiet neighborhood, with small retail  
15 businesses, and the national wildlife refuge across the  
16 street. This is what Elk Grove's general plan promised  
17 us all in the Laguna West, Stone Lake community. Now  
18 all this is being threatened by a reckless plan to  
19 demolish existing businesses and cram a 13-story  
20 hospital, parking garages, and a biotech district in the  
21 far corner of Elk Grove in a neighborhood that was not  
22 zoned for a hospital.

23 I would think the city could find a more suitable  
24 and sustainable area of Elk Grove for this project, not  
25 where it doesn't fit into the landscape. An area that

1 would actually benefit all of Elk Grove. The Stone Lake  
2 location for this hospital is in a lose-lose location.  
3 How will it benefit east Elk Grove? This project is a  
4 huge gamble: a gamble to the environment, a gamble to  
5 the safety of the local residents, a gamble with the  
6 lives of the people that currently have businesses in  
7 Stone Lake Landing, a gamble with a company that has  
8 never taken on a project of this scale. Sure to lose in  
9 this gamble would be why we all moved to Elk  
10 Grove/Laguna West in the first place. Gone would be the  
11 sense of community, with the hospital and all of its  
12 problems shoved down our throats.

13 Here is the real question. Ask yourself: Do we  
14 need a 400-bed hospital in Elk Grove? Do we need it  
15 tucked away in the corner across the highway from a  
16 nature preserve? Does it benefit all of Elk Grove? No,  
17 it absolutely does not. If this project goes through, I  
18 see years of demolition and construction, noise  
19 pollution, air pollution, light pollution, traffic  
20 congestion. We would never have chosen to live next  
21 door to a hospital. Would you? Please consider to vote  
22 no on this project. Thank you.

23 MS. NICOLE: Thank you for your comments. AJ Sole  
24 you may unmute your line and go ahead. It looks like  
25 your line is still muted, if you're trying to speak.

1 All right. We will try you back in just a minute here.

2 Kathy Engle, you may unmute your light -- sorry,  
3 your mic, and go ahead. Kathy, it looks like you're  
4 still on mute if you're speaking.

5 CALLER KATHY ENGLE: Okay.

6 MS. NICOLE: We can hear you. Yes, go right ahead.

7 CALLER KATHY ENGLE: Okay. So the purpose of  
8 zoning and planning, is my understanding, is to provide  
9 some assurance to residents as to what future  
10 development will look like in their city. Some people  
11 want to live in urban settings. That was not our  
12 choice. We actually moved away from an urban setting,  
13 so we definitely researched this area, like a lot of  
14 other people. And I trusted Elk Grove when I did that.  
15 We looked at the zoning. I know exactly what is  
16 allowed, and I was okay with what could possibly be  
17 built, because some of it was not developed at the time  
18 that we moved here. And we didn't have any problems  
19 with our lifestyle and what could be built, and the  
20 things that have been built.

21 But CNU has some serious ethical issues, and it's  
22 not just the Stone Lake people. In December of 2019,  
23 the Bureau for Private Postsecondary Education cited CNU  
24 after the bureau staff found that the institution was  
25 advertising free programs not approved by the bureau.

1 Brian Holloway, who's a spokesperson, or was at the time  
2 -- I don't know if he's still there for CNU. His  
3 response to KCRA was, "We don't even offer those  
4 programs." Well, the bureau must see deceit somewhere.  
5 I don't think they just made that up and just decided to  
6 go after this school.

7 But rather than admit their mistake, they  
8 deflected. And this is something that they do every  
9 time. They put something out there. They deflect it.  
10 They attack. And it's happened for two years. So are  
11 we really willing to displace the current businesses and  
12 bet everything on the largest property project ever in  
13 Elk Grove? And put all of that in the hands of the  
14 people that proved they do not have Elk Grove's best  
15 interest at the forefront. This is about them making  
16 money. Alvin could have bought land over in Seepa  
17 (phonetic). He could have put it over there. But he  
18 wanted cheap land and then tried to force it into this  
19 area. And we were here first. You know, you don't get  
20 to just come in and then tell somebody, "I'm going to do  
21 this, and if you don't like it, then you can leave."  
22 Well, I was already here, so you don't get to do that.

23 Lastly, if you guys decide you're going to ignore  
24 everything that everybody has said and go ahead with  
25 this, I think it's really important that you make a

1 condition that they provide a surety bond for the  
2 project. It serves two purposes: If it turns into a  
3 ghost hospital, the city has that bond money that  
4 could -- they have to go in and do clean up or  
5 something, because if they tear that down and they won't  
6 have the money, then it's going to be a mess. And if  
7 they have the investors they say they have, they should  
8 be more than willing to guarantee the bond. And so, the  
9 city would get a peek into what they really have  
10 financially.

11 And thank you for listening. I hope you guys do  
12 the right thing. Thanks.

13 MS. NICOLE: Thank you for your comments. Nancy  
14 Xu, you may unmute your mic and go ahead.

15 CALLER NANCY XU: Hi, it's Nancy Xu. I live in  
16 Stone Lake community for 20 years. I've been listening  
17 to the meeting since 6:00, and it's been a long time, a  
18 long evening. But it is important to me. I'm opposed  
19 to the CNU Project. I sent in my comments this  
20 afternoon, but I want my voice to be heard.

21 There isn't enough room for Stone Lake residents  
22 and hospital patient staff to evacuate in the event of  
23 an emergency evacuation. For the next ten years, if the  
24 hospital is being built, there will be noise, dust, to  
25 the neighborhood. Ten years. That's noise. How many

1 ten years do we have? Noise from construction, from the  
2 ambulance, from the helicopter will drive away the  
3 wildlife animals in the wildlife reserve. There are  
4 snow geese every year coming to the Stone Lake area.  
5 They flew over my house when I opened the window. I can  
6 see them fly over the top of the roof. That will go  
7 away.

8           There are two wales (phonetic) in the West Taron  
9 Drive, in Riparian Drive, which is -- can be  
10 contaminated by any chemical the hospital leaks into the  
11 ground. The location of the hospital is not in the  
12 middle of the city, but it is at the one side of the  
13 city, at the end of it. How can the location of the  
14 hospital serve the people in need in a timely manner, if  
15 they have to travel all the day from one end to the  
16 other end, and then the other side is all the wildlife  
17 animal? Is that in a good location? It is not.  
18 There's not enough side distance between the proposed  
19 emergency vehicle turn on Elk Grove Boulevard and the  
20 Highway 5 interchange. It's not safe for the traveling  
21 pathway.

22           There will be more crimes to the Stone Lake  
23 community, because people being dropped off by the  
24 police officer to the emergency room -- they will  
25 wandering around after they are released from the

1 hospital. They are going to be in the community. They  
2 are going to be -- just kind of look and see where they  
3 can get something out from the community.

4 There's not enough room to make a full signal  
5 intersection at West Taron and Riparian Drive. There's  
6 only one flaw: How can you allow cars to come out from  
7 there? They go to work. They come back from work.  
8 There's only one block. It's like, what? 200 feet.  
9 How many cars can fit in there? The traffic generated  
10 by the hospital and the university will put the Stone  
11 Lake residence in an unsafe walking environment. The  
12 noise from the construction, additional traffic --

13 MS. NICOLE: Thank you for your comments. your time  
14 is up.

15 CALLER NANCY XU: Thank you.

16 MS. NICOLE: We're going to go back to AJ Sohi to  
17 see if we can get them on the line, if you want to go  
18 ahead and unmute and try again. AJ, it still looks like  
19 you're on mute, if you're trying to speak. All right.  
20 They've lowered their hand, so we'll go ahead and move  
21 on. This is our last hand that we have raised right  
22 now. If anyone else is planning on speaking tonight,  
23 please raise your hand, as public comment will be  
24 closing shortly. Sashma Daga, you may unmute your line  
25 and go ahead.



1 CALLER SASHMA DAGA: Can you hear me?

2 MS. NICOLE: We can.

3 CALLER SASHMA DAGA: Good afternoon, all the  
4 planning commissioners and the staff. I'm staying in  
5 Stone Lake community from last 16 to 17 years. And this  
6 has been a very quiet community, and we love to walk  
7 around here. And during this pandemic, this whole  
8 community was so helpful and very friendly community.  
9 So we don't want anything which will bring so much of  
10 noise and pollution and all the other stuff, whatever  
11 they had been mentioned by my fellow neighbors and all  
12 the community people that are worried about.

13 The only thing is that crime rate will increase.  
14 We aren't a gated community that we can stop people to  
15 come in and out. And I oppose this project -- CNU  
16 Project -- very strongly. So please do the neatful  
17 (phonetic). Thank you.

18 MS. NICOLE: Thank you for your comments. It looks  
19 like we have another caller who's joined us, so I'm  
20 going to go to them really quickly to see if they are  
21 dialed into make a public comment tonight. If your  
22 number ends in 6202, I've unmuted your line, and if you  
23 could let us know if you were planning on making a  
24 public comment tonight. Again, that's caller ending in  
25 6202, if you want to unmute and let us know if you'd

1 like to make a comment?

2 CALLER 6202: No comment to make. Thank you.

3 MS. NICOLE: Thank you so much. Dr. James Reede,  
4 you may unmute your line and go ahead.

5 CALLER DR. JAMES REEDE: Good evening,  
6 commissioners. My name is Dr. James Reede. I am a  
7 40-year practitioner of the California Environmental  
8 Quality Act. I've been teaching environmental impact  
9 CEQA NEPA at Sac State for the past 18 years. I have  
10 submitted comments that weren't addressed in the FEIR.  
11 The EIR for the proposed California North State  
12 University campus project fails to meet the requirements  
13 outlined in the California Environmental Quality Act in  
14 the area of biological resource analysis.

15 Specifically, the proposed project violates the  
16 requirements of the CEQA guidelines Appendix G,  
17 Subparagraph D, in that it failed to evaluate whether  
18 the project would interfere substantially with the  
19 movement of any native resident or migratory fish or  
20 wildlife species, or with established native residents  
21 or migratory -- emphasize migratory wildlife corridors,  
22 or impede the use of native wildlife nurseries.

23 The EIR showed no credible analysis of the  
24 magnitude of significant impacts on migratory bird  
25 species, because of the footprint and height of the

1 proposed project. The Stone Lake's National Wildlife  
2 Refuge is on three sides, with the Consumnes River  
3 Preserve south of Stone Lake's. Yet, there have been no  
4 biological surveys to establish a baseline as required  
5 by CEQA to quantify how many birds would be impacted by  
6 the 13-story building. CEQA has always required that  
7 quantification be determined prior to and during the  
8 analysis. The analysis in this census would require a  
9 recent fall/winter survey of Southbound migratory birds  
10 and a spring survey of Northbound migratory birds.

11 Consequently, the proposed mitigation for the  
12 significant impacts of bird strikes that relies on a  
13 lack of quantified analysis is deficient and would be  
14 deemed inadequate in a court challenge. The U.S. Fish  
15 and Wildlife Service, Audubon Society, and Ducks  
16 Unlimited website all have bird counts that reveal over  
17 a billion bird species annually travel the Pacific  
18 Flyway, with many stopping for rest, residency, and  
19 breeding during their north to south and south to north  
20 travels in the Sacramento region.

21 The 1918 Migratory Bird Treaty Act is a federal  
22 nexus for the proposed project and requires a formal  
23 biological opinion by the U.S. Fish and Wildlife  
24 Service, which was not done. Please do not approve this  
25 EIR, as it's deficient. Thank you.

1 MS. NICOLE: Sorry, I was on mute there. Leticia  
2 Abdel, I have unmuted you. If you would like to go  
3 ahead and unmute yourself, you can speak.

4 COMMISSIONER GEORGE MURPHEY: Did you say you muted  
5 me?

6 MS. NICOLE: No, I was on mute a moment ago.  
7 Leticia Abdel, you're up next for public comment, so if  
8 you want to unmute your line, you can go ahead. And if  
9 you're speaking, it still looks like you're on mute. It  
10 looks like you're unmuted now. I can't tell if you're  
11 speaking or not. We're not hearing anything. We're  
12 still not hearing any volume, so I'm going to move onto  
13 the next one. I'm come back to you in just a moment, if  
14 you want to work on your microphone.

15 James R., you may go ahead. You are unmuted.  
16 You can unmute your line and start.

17 CALLER JAMES R.: Thank you, commissioners.  
18 Throughout all the night here tonight, I've heard a lot  
19 of comments, and I just wasn't actually going to speak.  
20 But, I think, after listening to them, I'm compelled to  
21 make a couple notes to bring those to your attention.  
22 We heard several comments from either the project  
23 proponents, or what I consider people from outside the  
24 area making cases for things like jobs and the hospital,  
25 and bringing those into the greater Sacramento

1 Region -- whether it's jobs and stuff like that, it  
2 would better the Sacramento region.

3 I didn't hear from any of those people an actual  
4 reason for why the project, as good as it may be to have  
5 a hospital in Elk Grove, needs to happen in this  
6 specific location. On the other hand, I heard a large  
7 number of very well-reasoned, rational residents very  
8 concerned about the future congestion of their  
9 neighborhood, the lot of impacts which have not been  
10 adequately addressed by any response by the applicant  
11 or, in my opinion, by the documents that have been made  
12 available for review.

13 So I would charge you commissioners to do your  
14 duty and represent the citizens of Elk Grove, and  
15 specifically Stone Lake, Lakeside, and Laguna West, and  
16 and recognize that this is -- as good as this project  
17 may be overall for Elk Grove, it's not the right place  
18 to put in this neighborhood. Thank you. Good evening.

19 MS. NICOLE: Thank you for -- all right. Leticia  
20 Abdel, we're going to come back to you, again, to see if  
21 you can get your mic working. Do you want to go ahead  
22 and talk?

23 CALLER LETICIA ABDEL: Yes, hi. Can you hear me?

24 MS. NICOLE: We can. Go right ahead.

25 CALLER LETICIA ABDEL: Hi. Thank you. It's been a

1 long evening, so thank you. There are so many things  
2 that I wanted to share, but everybody has done such a  
3 wonderful job -- all my neighbors, in terms of echoing  
4 the real concern here, which is not really the hospital,  
5 but it's really our community and what we call home.

6 I'm a healthcare professional as well in the  
7 not-for-profit setting, so I absolutely am passionate  
8 about the mission to help our community and be there,  
9 especially now during COVID, and I commend NCU for the  
10 development of future healthcare professionals. But  
11 this is a great project, just in the wrong location.

12 20 years ago, when we were looking for our  
13 forever home, we chose Elk Grove. We chose Stone Lake  
14 for the preserve, for the nature that was around us, for  
15 the serenity that was here. And it is ironic that NCU  
16 is stating that they are protecting the morale and the  
17 health of themselves, but really not of myself and my  
18 family and my residents. As I look into retirement for  
19 the future, I was hoping to raise my grandchildren here,  
20 in the same way that we raised our child here. When I  
21 saw that first video, I was in tears, because it brought  
22 back so many memories -- fond memories of the serenity  
23 and the peaceful life that we had led here.

24 I just want to add that the neighbors that we  
25 have had from the school, all the students -- COVID-19

1 has been an unprecedented time, but in all of that  
2 chaos, we actually received back a little bit more  
3 serenity and peacefulness in our neighborhood. As those  
4 students exited for distance learning, there was a  
5 reduction in noise, there was a reduction in busyness,  
6 there was a deduction in the amount of sheer cars that  
7 are generated by all the ventures.

8 I hope that the planning commission thinks about  
9 us, the residents, the people that bought in 20 years  
10 ago into these master planned communities, into this  
11 city, and have poured in our life savings and our future  
12 lives that we want to build in this city. Great plan;  
13 not a good location. This will completely change and  
14 devastate my future here in Stone Lake, as well as my  
15 neighbors. Thank you.

16 MS. NICOLE: Thank you for your comments. It looks  
17 like we have one more person with their hand raised.  
18 Raj Sandhu, if you want to go ahead and unmute your  
19 line, go ahead.

20 CALLER RAJ SANDHU: Hi, yes. I'm also a healthcare  
21 provider. I just got off of work, and I'm surprised  
22 that you guys are still on, and I'm so grateful that you  
23 guys took my call. I want to echo all of my friends and  
24 neighbors. We all feel so strongly and so passionately  
25 about this. Stacy's video was just like, hands down,

1 like, you know -- we're just so much in awe of how much  
2 of a structure change that this is going to make for us,  
3 and how opposed we are to this. So I hope that you guys  
4 will take that into consideration. I just wanted to  
5 echo everyone's sentiments.

6 MS. NICOLE: Thank you for your comments. All  
7 right. I'm going to do one more check. I don't have  
8 anymore hands raised. And we have communicated with all  
9 of the callers on the line, so this is the last chance  
10 for public comment if you haven't spoke. And Vice Chair  
11 Murphey, I don't see any hands raising, so I believe we  
12 are done with allowing everyone to speak for tonight.

13 COMMISSIONER GEORGE MURPHEY: Thank you, Nicole,  
14 for coordinating that force. And before I do close all  
15 public comment, I want to invite applicant up to give a  
16 rebuttal or comments to anything that they might like to  
17 talk about.

18 MS. NICOLE: Sure. If you could just give me a  
19 moment, it's going to take me a second to grab them and  
20 put them back into the meeting, so one moment.

21 COMMISSIONER GEORGE MURPHEY: Okay. Thank you.

22 MR. ALAN WARREN: Okay. This is the applicant.  
23 Can you hear me, sir?

24 COMMISSIONER GEORGE MURPHEY: Yes, we can.

25 MR. ALAN WARREN: Okay. Very good. Thank you very



1 much. You know, we appreciate all the comments that  
2 came in. A lot of questions, and I think some of which,  
3 a number of either city staff and city consultants can  
4 address relative to the EIR and the work that they did  
5 on it, the traffic noise and those sorts of things.  
6 Dr. Wong on our team would like to also address some of  
7 the issues that he's heard, and I would also like to add  
8 further clarity after Dr. Wong. So if you would allow,  
9 we would like for Dr. Wong to have a chance to address  
10 some of the questions that he's heard, and then I will  
11 be brief in my response as well, and then turn the mic  
12 back over to you, sir.

13 COMMISSIONER GEORGE MURPHEY: Of course. Go ahead,  
14 Dr. Wong.

15 DR. MICHAEL WONG: Thank you, again, to the  
16 planning commission and to the citizens of Elk Grove.  
17 I've truly appreciated hearing about your  
18 thoughtfulness, your care, and your concern about your  
19 community.

20 Before I go on to address a couple of the items  
21 that were brought up, I would like to make a direct  
22 apology to Jacob Rambo, the president of the Stone Lake  
23 Homeowners Association, and to the citizens of Elk  
24 Grove. It was clearly never my intention to mislead or  
25 deceive anyone about my Wharton executive MBA

1 credentials. For the record, I will be completing, if  
2 successful, my degree, August 2022.

3 In my attempt to answer our planning  
4 commissioner's very question, I was distracted for  
5 making a correction of fact to what Alan Warren said.  
6 This was clearly not by design. So in response to some  
7 of the other items that were brought up, regarding going  
8 from zero to two hospitals in the Elk Grove area, I just  
9 want to make sure that we all understand that the  
10 Dignity facility is not really adding another hospital,  
11 as pointed out by nurse Sandhu. It is, in fact, being  
12 built to replace an existing hospital that had some  
13 seismic issues, instead of Methodist Hospital.

14 In regards to the proposed site, the location  
15 actually helps to improve coverage for Elk Grove.  
16 Currently there's Kaiser south just to the north of Elk  
17 Grove. The Dignity Hospital is planned to be in the  
18 southeast. So we've got north coverage, we've got  
19 southeast coverage all along the 99 corridor, and then  
20 when you add in CNU at the proposed location, it will  
21 provide better coverage for the citizens of Elk Grove,  
22 because it essentially creates a triangle that will  
23 cover this entire area between the I-5 and 99 corridor.  
24 Fortunately, not everyone needs the highest level of  
25 care that will be offered at CNU that's provided by the

1 by our university hospital. But if the citizens of Elk  
2 Grove need it, it's certainly going to be there for the  
3 citizens.

4 Tim Hall asked about or brought up again the  
5 hospital bed number. And he pointed out that Kaiser  
6 South, you know, can be used by Elk Grove. That's true,  
7 but clearly not all those beds at Kaiser South will be  
8 used exclusively by Elk Grove. Dignity, again, to  
9 remind, is not replacing -- Dignity is replacing -- not  
10 new additional beds. So unfortunately, it still leaves  
11 a deficit of hospital beds in the Elk Grove area. So  
12 CNU will be filling a need that has been recognized by  
13 many of the callers tonight.

14 I also would like to address Jerome Lee's and  
15 other's concerns about the issue of parking. And I want  
16 to reassure Mr. Lee that we do have a commitment to  
17 having our students housed on site. As part of the  
18 plan, you may see that there are dormitories that are  
19 going to be on campus that will then house all our  
20 students. So that is also part of the plan.

21 So again, thank you all for taking the time to  
22 participate in this important meeting and for the clear,  
23 deep concern and care that you have for the city. I  
24 hope that we can work together to make this hospital  
25 something that adds true value to the community, and

1 something that you can all be pleased with and proud of.  
2 Thank you so much for, again, allowing us to share.

3 MR. ALAN WARREN: Thank you, Dr. Wong. This is  
4 Alan Warren again. A couple of additional questions I'd  
5 like to address: One of the callers brought the issue up  
6 about the financial capacity and the ability to perform  
7 and see the hospital through completion and suggested a  
8 surety bond, and that is also something that CNU is  
9 concerned with. And a surety bond, if approved, would  
10 be part of the process. And typically, the way that's  
11 handled is that the financing is secured, the general  
12 contractor is selected, and the general contractor is  
13 sure that he's going to be paid, and the actual surety  
14 bond would be provided, or could be provided by the  
15 general contractor, with a letter of credit or what they  
16 call a set-aside letter. That would be to the benefit  
17 of the general contractor to provide certainty that he  
18 would be paid -- he or she would be paid for their work.  
19 So a surety bond issue, I think, if that is one of the  
20 the big challenges, would be provided as well.

21 In addition, we heard issues relative to the  
22 economic analysis -- our professionals -- Dr. Varshney  
23 is on the line as well, and have additional ability to  
24 address, if need be, some of the economic analyses. I  
25 think the city also is prepared to maybe speak on some

1 of the analyses as well.

2 Relative to traffic and noise, those studies were  
3 commissioned by a third, independent, third-party  
4 consultants and experts, and I think they're prepared to  
5 discuss their work and address the questions that were  
6 raised as it relates to traffic, noise, and other issues  
7 that some of the residents made statements about, which  
8 we have seen. And I think if you read the document, it  
9 is very self-explanatory and is to the contrary of some  
10 of the statements that were made.

11 And then lastly, I'll just say that two issues:  
12 One, one of the last callers talked about a claim that  
13 was made against CNU about false advertising. You  
14 should know that it was -- that this issue was dismissed  
15 with prejudice, meaning they cannot bring it back again,  
16 and that it was identified as a mistake. And so, that  
17 information, you know, is available to those that might  
18 be interested in looking at it further. And so, we can  
19 provide information that will help clarify what the  
20 mistake was and how it was resolved.

21 And then lastly, as it relates to the Stone Lake  
22 retail tenants, the shopping center of where the  
23 proposed new hospital is intended, if approved, has been  
24 struggling. And I think, you know, Commissioner  
25 Mackenzie noted and others, that the shopping center was

1 struggling long before CNU's announcement of a hospital,  
2 and it continues to struggle. And personally, I've seen  
3 some of the financials on it. There are, you know,  
4 tenants there were tens of thousands, if not hundreds of  
5 thousands of dollars behind in rent.

6 And personally, I've witnessed CNU work with the  
7 tenants to forgive rent, and also to help tenants  
8 relocate to new areas including -- it was mentioned -- I  
9 heard one of the callers call in about Flaming Grill.  
10 That is a tenant that I was directly involved with  
11 helping to negotiate, and Flaming Grill decided not only  
12 would Stone Lake not work, the proprietor moved out of  
13 California to Oklahoma, for a variety of reasons. And  
14 in addition to forgiving their back rent, CNU also gave  
15 them additional resources to help them relocate to their  
16 new location. That kind of thing is not happening  
17 across our retail sectors. Businesses are going out of  
18 business without any support. CNU has offered  
19 tremendous support to a variety of the tenants, and some  
20 of which I've been directly involved in.

21 I believe, to date, potentially there is one  
22 tenant with an unresolved issue. We've attempted to  
23 resolve it; however, there is a lot of both written  
24 documentation and firsthand personal eyewitness accounts  
25 of what is taking place there. And CNU continues to

1 stand ready to help even in that situation. But in  
2 terms of offering locations within the shopping center,  
3 other more favorable locations -- but what CNU has not  
4 agreed to is to be extorted. And so, some of the  
5 demands in writing are -- I think if were to be made  
6 public, I think would be clear what is attempted to be  
7 happening with some of the numbers that people suggest  
8 that they get paid for, you know, either relocating, or,  
9 you know, doing something different. Even though they  
10 are, in some cases, well over six figures behind in  
11 rent.

12 And so, I say all that to say those are the facts  
13 and they are -- there is written information as it  
14 relates to that, and I've personally been involved with  
15 four of the tenants. (Inaudible audio.)

16 COMMISSIONER GEORGE MURPHEY: Alan, are you done?

17 COMMISSIONER MACKENZIE WIESER: Yeah, we can't hear  
18 you.

19 MR. ALAN WARREN: Oh, you can't? Oh, sorry.

20 COMMISSIONER GEORGE MURPHEY: I didn't know if you  
21 were done or not.

22 MR. ALAN WARREN: I am done, sir. Were you able to  
23 hear what I was saying?

24 COMMISSIONER GEORGE MURPHEY: Not the final few  
25 minutes -- seconds.

1 MR. ALAN WARREN: Okay. Well, why don't I just  
2 wrap up by saying our team stands ready to answer any  
3 additional questions that commissioners have.

4 COMMISSIONER GEORGE MURPHEY: Great. Thank you.  
5 And with that, I'll give the other commissioners a  
6 chance to ask any final questions of the applicant  
7 before I actually close the public commentary.  
8 Mackenzie?

9 COMMISSIONER MACKENZIE WIESER: I have no further  
10 questions of the applicant at this time.

11 COMMISSIONER GEORGE MURPHEY: And Sergio?

12 COMMISSIONER SERGIO ROBLES: I have no further  
13 questions for the applicant at this time.

14 COMMISSIONER GEORGE MURPHEY: Okay. Thank you. I  
15 will declare the public comment closed, and we'll move  
16 to commission deliberation and action. And as we move  
17 to deliberations, I'm going to exercise private chair  
18 and kick off the deliberations.

19 We heard a lot tonight. We read a lot, and --

20 MS. JENNIFER ALVES: Commissioner Murphey, could  
21 you close public comment first in case I missed that?

22 COMMISSIONER GEORGE MURPHEY: I did. I thought I  
23 did.

24 SECRETARY SANDY KYLES: You closed the public  
25 comment. You didn't close the public hearing.



1 COMMISSIONER GEORGE MURPHEY: Oh, I am sorry.  
2 Okay. I will declare the public hearing closed. Thank  
3 you for reminding me. Okay. We've heard a lot tonight.  
4 And we have a lot to digest tonight. There's a lot that  
5 I think that, knowing myself, that we all can speak on.  
6 But I kind of broke this down to what I consider the  
7 essence of the request, and I think, to me, it's kind of  
8 a simple answer -- a simple question. Do I or we as  
9 decision makers accept the proposition as to whether the  
10 general plan amendment in a rezone should be granted to  
11 allow essential facilities in a flood zone?

12 The original mandate or requirement from the  
13 state, that we shall amend the general plan language to  
14 conform to state law. The city may choose to amend a  
15 general plan, and therefore entertain a reasonable  
16 request, but there is no requirement to do so. If you  
17 choose to amend the general plan language, the rest  
18 of -- if we don't choose to amend a general plan  
19 language, the rest of the applicant's request would also  
20 be denied. It's that simple. We don't even have to  
21 entertain them.

22 If we choose to amend the general plan, then we  
23 have to accept each element of request as presented, or  
24 make changes to the various requests, such as the  
25 conditions of approval, the conditional use permit, the

1 development agreement, the design, et cetera. I don't  
2 accept the changes to the general plan text following  
3 this, allowing essential facilities to be built into a  
4 flood zone. To allow an essential facility to be placed  
5 in a flood zone or any situation where the facility may  
6 be in danger of not being able to perform its mission is  
7 contrary to the purpose of an essential facility. If  
8 there's ever a need to place an essential facility in  
9 the flood zone, the need should be thoroughly vetted to  
10 determine whether that is the only and best place option  
11 to place the facility.

12 I don't see the reasoning and demonstrated need  
13 in this case. I can't admit a general plan because  
14 there's a want and not a need to be in this location.  
15 There are many issues related to this project. I know  
16 this and have thought about it over the past few weeks.  
17 Suffice to say there are too many unavoidable impacts to  
18 live with, and I don't think the city should accept any  
19 project that this size and scale is going to have  
20 long-term impacts. And we shouldn't deny the project  
21 solely based on that criteria. We are -- we have an  
22 obligation to consider end and the context and impacts  
23 to a community.

24 But a smaller project of this nature at this  
25 location may vie out. Not in the flood zone. It's an

1 essential facility -- would be an essential facility.  
2 There are areas in the city with ample land, few  
3 neighborhoods, and location adjacent to what will be a  
4 major thoroughfare, the proposed connector. Like the  
5 folks we heard from tonight, I treasure my neighborhood  
6 as much as they treasure theirs. I live here for a  
7 reason. And to have this project or a similar project  
8 proposed or attempted to be placed in my neighborhood or  
9 my community would be just as concerning, if not more.  
10 So I will not be supporting a change to the general plan  
11 or municipal code. And therefore, I will recommend a  
12 denial of the project and all elements contained in the  
13 request. I believe the current language is sufficient  
14 and gives the city council explicit authority of  
15 approving whether an essential facility should be  
16 located in the flood zone.

17 That's the end of my comments right now. Other  
18 than that, I want to thank everybody involved: the  
19 applicant, all the folks that hung with us on the phone  
20 and calling in, registering. Nicole, you did a great  
21 job tonight. Staff, I know you put a lot of timing in  
22 this. But this was a major hurdle tonight to even get  
23 to hear this, so thank everybody for that. And,  
24 Mackenzie, would you like to continue?

25 COMMISSIONER MACKENZIE WIESER: Absolutely. Can

1 you hear me?

2 COMMISSIONER GEORGE MURPHEY: Yes, we can.

3 COMMISSIONER MACKENZIE WIESER: First and foremost,  
4 I want to thank everybody for being so amazing and  
5 hanging in for this many hours. We do realize how  
6 critically important this project is, and we appreciated  
7 all of the comments, all of the calls, all of the  
8 E-mails, and you taking your time to spend the last six  
9 hours with us to share your opinion on this project.

10 I do want to echo what Commissioner Murphy said,  
11 as I'm currently reading from the general plan revision  
12 statement, to which we amended back in 2019, when we  
13 spent hours and hours in book club going through and  
14 revising the general plan to what we thought would be a  
15 great way to build out the city for the future and for  
16 the next 20 years. And that reads: "Elk Grove is a  
17 great place to make a home; a great place to work; a  
18 great place to play. Our community is diverse, healthy,  
19 safe, and family-oriented, with thriving schools,  
20 plentiful parks, shops, and places to work.  
21 Agriculture, rural homes, and urban life flourish  
22 together. Our natural resources, including water and  
23 open spaces, are protected."

24 I'm just going to end there. You can continue  
25 reading this amazing vision statement if you'd like, but

1 it's very clear that my number one rule here is to  
2 protect the community, the neighborhoods, keep our  
3 communities safe, not full of noise, keep them sound,  
4 and make sure that they're served by services. That's  
5 my number one rule here as a planning commissioner. And  
6 at this time, I must say that this is a poorly located  
7 project to serve Elk Grove proper, being at the  
8 furthest, most southwest corner of our city. It's got  
9 180 degrees of surrounding wildlife refuge and preserve  
10 space, to which these animals count on that space for a  
11 safe haven and a respite. They come here -- 28 million  
12 birds come here to rest and take time annually. And as  
13 a decision-maker who's dedicated to educating youth on  
14 the importance of protecting and serving our natural  
15 environment, I just -- I can't lean in here on this  
16 location for this project.

17 I do want to say that it does not align with our  
18 general plan. And in echo of Commissioner Murphy's  
19 statements, I would like to back that up with -- if  
20 Patrick would pull up his slide. I know it's super late  
21 in the night, and maybe you cannot, but we did see a  
22 slide from Ascent Environmental that had many  
23 unavoidable measures. And I have to tell you, as I did  
24 my ungodly amount of research on this project, I had  
25 read the statement of overriding concerns document three

1 times in total. And in that -- in each of those times,  
2 I went down path after path of finding out that  
3 "unavoidable": It just doesn't sit well with me. To  
4 hear that we would be okay with putting a project here  
5 with this many unavoidable concerns is troubling to me,  
6 to say to a community that I would be okay with the  
7 height and the materials and the light and the traffic.

8 I spent seven years commuting to downtown using  
9 this I-5 on-ramp -- on-ramp and off-ramp to get back  
10 home. There is a massive amount of traffic there,  
11 pre-Covid of course, but it is sometimes often backed up  
12 well past the stop light there at West Taron. So I know  
13 that there's traffic already. I can't imagine what it  
14 would be like later.

15 I've spent the last ten years living on the west  
16 side of Elk Grove. I have run the Fire Poppy to Elk  
17 Grove Boulevard to Harbor Point to Laguna Loop, probably  
18 300 or 400 times in the last ten years. I've run the  
19 levee ways behind the Stone Lake Preserve Community, and  
20 I adore this community. This community has so many  
21 amazing facets to it, and having Foulks Ranch Elementary  
22 School backed up behind a floodplain, where its already  
23 going to be hard to get these students out in an  
24 emergency troubles me.

25 So I will say that in conclusion, I'm not against

1 a highrise. So I do want everybody to know that there  
2 are good places in our community for buildings of this  
3 size, but I will have to say that I agree with many of  
4 the comments that we heard tonight and that this is not  
5 the right place for this project. So I also will not be  
6 accepting a general plan amendment or any facet of this  
7 project at this time.

8 Thank you for putting up the slide, Patrick.  
9 Nicole, you did an amazing job. And staff thank you for  
10 being so patient with me, as I waded through the massive  
11 amount of pages to read.

12 COMMISSIONER GEORGE MURPHEY: Thank you, Mackenzie.  
13 Sergio, before you begin, I have to apologize. You had  
14 a question about traffic, and we can -- I think we have  
15 an opportunity -- Jennifer, if you correct me if I'm  
16 wrong -- to ask staff to kind of clear that up for  
17 Sergio before we move on.

18 MS. JENNIFER ALVES: That would be fine. We have  
19 Dave Robinson here who could address those issues.

20 COMMISSIONER GEORGE MURPHEY: I think it's  
21 important that those that -- we still have 132 people,  
22 it looks like, who are online here listening. So I  
23 think for them to hear -- maybe repeat the question if  
24 you can, and then answer it for Sergio. That would be  
25 appreciated. Thank you.

1 COMMISSIONER SERGIO ROBLES: Ms. Moore, so on the  
2 traffic impact that this project would have, as far as  
3 for residents and trying to leave in case of an  
4 emergency.

5 MR. DAVID ROBINSON: Okay. Dave Robinson with Fair  
6 Impairs (phonetic). We've prepared the transportation  
7 analysis for the proposed project. Our analysis was  
8 guided by the city's transportation analysis guidelines,  
9 and we considered for traffic signals, delay targets,  
10 and for roadway segments, for design targets. With the  
11 recommended improvements, there is sufficient  
12 (inaudible) in the system to accommodate the traffic  
13 associated with the project. And those improvements  
14 include installation of traffic signal, preparing from  
15 West Taron, as well as intersection modifications at Elk  
16 Grove-West Taron to accommodate that increase in  
17 traffic. There's also modification of the Elk  
18 Grove-Franklin intersection and also installation of  
19 traffic signal at I-5 Northbound offramp. So with those  
20 improvements, there would be sufficient fast moving  
21 within the system to accommodate the traffic within the  
22 design targets and delay targets for intersections.

23 Third, I do want to hit on some observations  
24 relative to the hospital operations, and the operations  
25 that people traveling through their residence experience,



1 with the office and with commercial uses. The --  
2 the -- the types of characteristics -- characteristics  
3 of a hospital are different from an office. With  
4 office, there's commercial uses, there's distinct  
5 peaking in the morning and in the evening. We're all  
6 familiar with, you know, the people getting into the  
7 office. Leaving the office -- that happens in a  
8 relatively short duration during those morning and  
9 evening peak hours, and that's what I'm referring to.

10 With the hospital use, the hospital will generate  
11 more traffic than what's out there today. But there's  
12 multiple shifts. So you have three shifts a day, so the  
13 workers, employees, are coming in at different times  
14 periodically through the day. And what you tend to see  
15 is a peaking that occurs within a plateau throughout the  
16 day as the traffic comes to and from the site. The  
17 morning and evening shifts for the hospital don't quite  
18 coincide with the typical morning and evening commute  
19 patterns that we experience. So they're a little bit  
20 earlier. They tend to be outside of those more  
21 traditional peaks.

22 For residents -- residential uses, the  
23 directionality is going to be -- you know, it's  
24 employment based so it's going to be more kind of  
25 opposite direction from what people experience traveling

1 to the project. So the combination of those kind of  
2 travel characteristics, along with the improvement  
3 recommendations, would accommodate the project.

4 COMMISSIONER SERGIO ROBLES: Thank you for  
5 answering that. Thank you.

6 COMMISSIONER GEORGE MURPHEY: Okay. Thank you,  
7 Dave. I appreciate -- sorry to have you wait so long.

8 Okay, Sergio. You want to chime in on those  
9 deliberations here?

10 COMMISSIONER SERGIO ROBLES: Yeah. So I just want  
11 to say, before anything, thank you to everyone. Thank  
12 you to staff. Thank you to the constituents of Stone  
13 Lake. Thank you to the applicant. You know, this is  
14 what democracy looks like right here. This is what it  
15 is. There's a lot that's going, and there's a lot  
16 that's in play. I mean, on one hand, you have a school  
17 that came several years ago, bought a building that was  
18 available, decided to build there, or decided to  
19 construct a university there. And currently, they're  
20 providing students in a lot of our hospitals that are  
21 being utilized right now in the region.

22 You know, you look at this, and there's just a  
23 lot that's going into it, from the academic development  
24 that possibly can come. And then you also look at the  
25 excess of beds. And, you know, you kind of look at from

1 Stockton all the way to Sacramento, you look at I-5 and  
2 you see that there's not a hospital. You see that there  
3 is a need, and then you also see that you're looking at  
4 the environmental impact access of it. You're looking  
5 at the constituents' aspect of it.

6 This isn't an easy, you know, just yes or no,  
7 because you are also equating something to a person's  
8 life; right? You're preventing someone from possibly,  
9 from a life being saved. You're preventing someone from  
10 having that access; however, I do see that, and I do  
11 hear the constituents, how they're referring to the  
12 impacts that's going to have in the neighborhood that  
13 they bought.

14 I think that, you know, this is a bold, bold  
15 vision and dream that obviously CNU wants to accomplish,  
16 but I think that Commissioner Murphey said it best: "the  
17 authority lies within the city council." And I think  
18 that, you know, ultimately what we look at is at the  
19 land use, and we look at how we can be good stewards of  
20 our land. When I was appointed to the commission,  
21 my -- in the speech, I made a commitment, that I wanted  
22 to be good stewards of the land that we had. Not only  
23 that, but I also wanted to bring the values that Elk  
24 Grove has.

25 Now, I've seen CNU, and I've seen that they've

1 been helping out in the community, and I've been seen  
2 that they've been trying to be ingrained in those  
3 values; however, there is a lot that's coming into play  
4 with what's going on. So, I think, you know, in  
5 listening to everything that has been presented, again,  
6 thank you to all the callers that stayed on for six  
7 hours. Thank you to the staff that's still working  
8 hard. But I think we are ready for a vote. And I think  
9 we can call it to a vote now.

10 MS. JENNIFER ALVES: So we would be looking for  
11 someone to make a motion?

12 COMMISSIONER GEORGE MURPHEY: I think I saw  
13 Mackenzie's hand go up.

14 COMMISSIONER MACKENZIE WIESER: I did want  
15 piggyback Commissioner Robles' comment with regard to  
16 how much actually does go into this. And I do  
17 appreciate you for stating that there's a lot to weigh  
18 here. And I think, you know, between the three of us,  
19 we've weighed many of the comments, the constituents.  
20 What I will say is I do agree that this decision sets  
21 precedence. And for that, I would like to make sure  
22 that the applicant is aware that -- I'm not sure based  
23 upon the volume of calls that came in tonight, that the  
24 community outreach and engagement was done in the proper  
25 manner at the beginning, middle, or end of this project.

1 I will also say, that it seems as if -- like  
2 Commissioner Robles said, CNU has a bold and audacious  
3 and aspirational goal that they are trying to achieve,  
4 and I applaud that; however, I think it's very pertinent  
5 that when you're trying to build the trust of the  
6 community and those around you and become a good  
7 neighbor, you can be as transparent as humanly possible.  
8 And I think that we heard many inconsistencies tonight  
9 in the applicant's testimony, as well as testimony from  
10 those in the community, as well as the fact that many of  
11 the materials that you published seemed highly  
12 aspirational and not achievable within the timelines.

13 And so, I just want to make sure that other  
14 applicants know that we do take this role very  
15 seriously. We do, as Commissioner Robles said, take  
16 this role for protecting what land we do have available,  
17 and to making sure that we choose the right project that  
18 fit in the right communities. And so with that, I'll  
19 make a motion. So, Chair?

20 COMMISSIONER GEORGE MURPHEY: Ms. Mackenzie, hang  
21 on just one second.

22 COMMISSIONER MACKENZIE WIESER: Okay.

23 COMMISSIONER GEORGE MURPHEY: I do want to follow  
24 up a little bit more.

25 COMMISSIONER MACKENZIE WIESER: No problem.

1 COMMISSIONER GEORGE MURPHEY: I don't want people  
2 to think that I dismissed all of the elements of what  
3 we're being asked to do here. I did. But I finally  
4 realized that the request for the general plan amendment  
5 was of the most important statement for everything else  
6 to follow behind it. It was kind of a cascading effect.  
7 So I just want to be clear with that.

8 Sergio, you're absolutely right. There's lot in  
9 this thing tonight. And I do want to say too, that good  
10 project, bad location. And that's just kind of my final  
11 thoughts on everything. So, with that being said, I  
12 will entertain the motion.

13 COMMISSIONER MACKENZIE WIESER: Chair, at this  
14 point, at 12:27, I will attempt to throw a motion out,  
15 but I'm going to ask staff to help me out here. But I  
16 believe what I'm hearing is that the planning commission  
17 is recommending disapproval of the general plan  
18 amendment and a revision of the municipal code to allow  
19 emergency facilities or hospitals to be built in a  
20 floodplain and disapproval of the remainder of the items  
21 for this project.

22 COMMISSIONER GEORGE MURPHEY: Jennifer?

23 COMMISSIONER MACKENZIE WIESER: And help me,  
24 Jennifer, if that's lacking.

25 MS. JENNIFER ALVES: Yeah, the recommendation

1 essentially is for denial of the project -- all of  
2 the -- and all of the elements within. And we can write  
3 that up in a recommendation to council, so it's clear  
4 that it's a denial recommendation, and we've heard your  
5 reasoning. And Sarah will include that reasoning within  
6 the staff report to council.

7 COMMISSIONER GEORGE MURPHEY: Thank you, Jennifer.  
8 I have a motion to have a second. I will second the  
9 motion. Can everybody hear me?

10 COMMISSIONER MACKENZIE WIESER: Yeah, we got your  
11 second, George. Thank you.

12 COMMISSIONER GEORGE MURPHEY: Okay. I  
13 didn't -- okay.

14 MS. JENNIFER ALVES: Madam Secretary, could you  
15 call for the vote?

16 THE COURT: Yes. Sandy, would you call the role  
17 for the vote, please?

18 SECRETARY SANDY KYLES: Commissioner Robles.

19 COMMISSIONER SERGIO ROBLES: I wanted to clarify  
20 this is for the disapproval; correct?

21 SECRETARY SANDY KYLES: Correct.

22 MS. JENNIFER ALVES: Yeah, it's a motion for  
23 denial -- a recommendation for denial to the counsel.

24 COMMISSIONER SERGIO ROBLES: I.

25 SECRETARY SANDY KYLES: Commissioner Weiser.

1 COMMISSIONER MACKENZIE WIESER: I.

2 SECRETARY SANDY KYLES: Vice Chair Murphey -- I'm  
3 sorry. Acting Chair Murphey.

4 COMMISSIONER GEORGE MURPHEY: I.

5 SECRETARY SANDY KYLES: Motion passes three to  
6 zero.

7 COMMISSIONER GEORGE MURPHEY: Okay. Thank you,  
8 everybody, again. We'll move -- we have no records into  
9 item, so we will move onto the director's report.

10 MR. DARREN WILSON: Good evening, Acting Chair  
11 Murphey, members of the commission. There is no items  
12 pending for the March 4th meeting. So with your  
13 concurrence, Acting Chair Murphey, I elect to cancel  
14 that meeting.

15 COMMISSIONER GEORGE MURPHEY: You have my  
16 concurrence.

17 MR. DARREN WILSON: All right. And that concludes  
18 my director's report.

19 COMMISSIONER GEORGE MURPHEY: All right. Very  
20 good. Thank you, Darren. And now we'll move onto  
21 planning commission matters, and I will start with  
22 Sergio.

23 COMMISSIONER SERGIO ROBLES: I just want to say  
24 thank you again to everyone for being here still. I see  
25 also that there's still 121 participants. You know,



1 thank you. Again, this is what democracy looks like.  
2 We engage; we have dialogue; we listen to arguments; we  
3 ask tough questions that need to be asked. And this is  
4 why we are here. So thank you. Hope everyone has a  
5 wonderful, well, Friday weekend, you know. Thank you.

6 COMMISSIONER GEORGE MURPHEY: And Commissioner  
7 Weiser?

8 COMMISSIONER MACKENZIE WIESER: Yeah. To piggyback  
9 on the thank you's, I actually hit my four-year  
10 anniversary as planning commissioner just a couple of  
11 days ago. And this is a large project -- one of the  
12 largest ones we have had -- and to have the community  
13 participation just really shows how important this  
14 project was. So thank you all so much for taking time,  
15 for sending letters, voicemails, calls. It's super  
16 appreciated.

17 Again, staff, hands down great job helping us get  
18 over to Zoom from Teams and technological issues.  
19 Nicole, you are amazing routing through all those hands.  
20 And I would be remiss if I didn't thank the Acting Chair  
21 Commissioner Murphey for being just a good, old, awesome  
22 guy keeping this meeting in line virtually. I'm sure it  
23 was not easy. And thank you to your wife for keeping  
24 you fueled and hydrated. Thanks, Bonnie (phonetic), and  
25 thank you for this evening.

1 COMMISSIONER GEORGE MURPHEY: Thank you, Mackenzie.  
2 Yeah, this isn't the kind of birthday present I  
3 expected, but I'll take it. It's over. And don't ask  
4 any questions. But anyway, I don't have anything really  
5 particular to say tonight. So other than that, again --

6 COMMISSIONER MACKENZIE WIESER: Did we miss that  
7 it's your birthday, and we --

8 COMMISSIONER GEORGE MURPHEY: There's 110 still  
9 hanging in there. And I'll just say good night to  
10 everybody. And I will entertain a motion for  
11 adjournment.

12 COMMISSIONER MACKENZIE WIESER: Well --

13 COMMISSIONER SERGIO ROBLES: I have a question.  
14 February 19th is your birthday?

15 COMMISSIONER GEORGE MURPHEY: (Inaudible audio.)

16 COMMISSIONER MACKENZIE WIESER: 18th or 19th?  
17 Which one?

18 COMMISSIONER GEORGE MURPHEY: Two days ago. All  
19 right.

20 COMMISSIONER MACKENZIE WIESER: Oh, okay. Well,  
21 neither here nor there, Chair. How about the good old  
22 Lindsay (phonetic) motion?

23 COMMISSIONER GEORGE MURPHEY: The Lindsay motion is  
24 a customary motion to adjourn a city approval planning  
25 commission meeting, in honor of founding commissioner

1 member Paul Lindsay. It's always in  
2 order -- never needs a second. All in favor of  
3 adjournment, please sit up by saying I.

4 COMMISSIONER MACKENZIE WIESER: I.

5 COMMISSIONER SERGIO ROBLES: I.

6 COMMISSIONER GEORGE MURPHEY: Good night,  
7 everybody.

8 COMMISSIONER MACKENZIE WIESER: Good night. Thank  
9 you so much.

10 (MEETING ADJOURNS AT 12:33 A.M.)

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REPORTER'S CERTIFICATE

STATE OF CALIFORNIA )

) ss

COUNTY OF ORANGE )

I, SKYY CHUNG, hearing reporter in and for the  
State of California, county of Orange, do hereby certify  
that the foregoing transcript is a full, true, and  
correct statement of the proceedings had in said cause.

DATED: FEBRUARY 18, 2021.



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SKYY CHUNG

HEARING REPORTER

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