

UC Davis Health Policy and Procedures for Space Allocation and Utilization

May 2021

I. Vision and Purpose

UC Davis Health (UCDH) strives to deliver exceptional patient care, foster innovation via world-class research, and promote the best work in all of its employees. Among the many resources required to accomplish this mission, space has shown itself to be one of the most critical. As such, the assignment and use of space is an ongoing evaluative process which supports UCDH's priorities. The planning and management of space requires that all UCDH leaders, faculty, students, and staff be mindful and flexible, adjusting quickly to both internal needs and external paradigm shifts.

The following policies and procedures guide the allocation and use of space within *all* UCDH facilities. They include a discussion of the criteria, guidelines, and procedures that will be used to evaluate and allocate space to all departments within UCDH.

II. Guiding Principles

Among the many resources needed to accomplish UCDH's mission, space is vital. It is universally understood that space is limited, and that the creation of new space is a deliberate and costly process. Therefore, decisions regarding space need to be made within the context of utilizing existing resources in the most effective and efficient manner possible. The assignment and reallocation of space is to be accomplished *thoughtfully and inclusively* in accordance with policies and criteria that meet the needs of UCDH's current and future mission, patient care programs, and growth strategies.

III. Policy

- A. Space within all buildings owned, leased, or otherwise controlled by UC Davis Health is an allocable resource subject to continual evaluation in order to achieve the optimal use of resources. *Everyone* is responsible for ensuring their assigned spaces are being properly utilized.
- B. Space is delegated from the Regents of the University of California to the chancellor of UC Davis (chancellor), and from the chancellor to the vice chancellor and chief executive officer (VC-CEO) of UC Davis Health.
- C. The Facilities Planning Department is the assigned agent for the VC-CEO to oversee space planning and help leaders monitor the utilization of assigned spaces. The VC-CEO's agent (Facilities Planning Department) assigns space to division leaders and deans. These leaders are to ensure that their departments are managing their assigned space appropriately. No other department is authorized to engage in spatial planning,

leasing, or decision-making without engaging and seeking permission to engage in planning from the Facilities Planning Department. The director of facilities planning is charged with communicating formal assignment decisions on behalf of the VC-CEO via an assignment letter. Temporary or informal assignments for short term operational needs may be communicated via email.

- D. Space and facilities utilization evaluations by facilities planning may be conducted at any time and without prior notice to ensure appropriate distribution of space among departments and to assist UCDH leaders in fulfilling their responsibilities regarding the assignment and effective utilization of allocated space. Facilities planning staff, acting as agent of the VC-CEO, has the right to enter any space at any time and without prior notice to conduct a space audit. Such audits will be conducted in a manner that limits disruptions.
- E. Misuse of space should be reported to facilities planning for investigation and may be reported by any member of the UCDH community at any time. Facilities planning reserves the right to keep its findings confidential.
- F. Requests for additional space ***must be endorsed*** by the appropriate dean and divisional leader (i.e., Hospital COO, CIO, CFO, CMO, CNO etc.).
- G. An appeal of a spatial decision may be requested of the VC-CEO who may elect to review or decline the appeal. Or, the VC-CEO may form an ad hoc committee for advisement and delegate the decision to such committee. If the VC-CEO declines to review the appeal or form a committee to review the appeal, the decision is automatically delegated to the Facilities Planning and Development Division executive director, whose decision will stand as final.
- H. Department chairs, center directors, department managers and other UCDH leaders (known collectively as department heads) are responsible for ensuring that assigned space is allocated appropriately and used efficiently. These leaders are strongly encouraged to consult with facilities planning before submitting a request for additional space to informally discuss their needs and potential solutions.
- I. Space is assigned to a department to conduct official UC Davis Health business. Department heads have the responsibility and discretion to assign their space as they deem appropriate to maximize the department's effectiveness in meeting UCDH's mission of teaching, research, patient care, and public service.
- J. Allocation and adherence to spatial policy is the responsibility of a department head once space is assigned. Such department heads should ensure that spaces are being used in the most efficient manner, in accordance with how the space was designed, and distributed in an equitable manner.
- K. Requests for space will be reviewed based on the principles outlined in this policy, the space guidelines summarized in **Attachment A**, and the allocation guidelines in **Attachment C** (if space allows). Requests for clinical, hospital, and research space may require further information such as patient volumes, grant information, or a Business/Academic Plan (**Attachment D**).
- L. In general, space requests should be for larger-scale decisions and expansion. Minor spatial needs are expected to be managed within a Division or School's internal portfolio.
Ex: A single office request does not constitute a space need and would be handled by

the department head utilizing their current space allocation. Improper utilization and assignment of assigned space may result in a spatial audit and ensuing reallocation of the space.

- M. No operational initiation, expansion, hiring of FTE, or commitment of space should commence without space or an approved space plan.
- N. Except for student governments, formal space allocations are not made to student organizations. Deans and department chairs may authorize incidental use of facilities by staff and student organizations if they believe that use of space contributes to the goals of UC Davis Health.
- O. University space standards do not recognize emeriti professors, postdoctoral or visiting scholars in non-pay status, or graduate students in non-pay status for the purposes of providing University facilities. Any accommodation(s) should only be in shared spaces and the individual(s) should be actively involved in official activities of UC Davis Health.
 - 1. Space requests for these individuals will not be given recognition in facilities utilization evaluations conducted by UCDH or in proposed capital improvement projects.
 - 2. Department heads may, at their discretion, elect to recognize the important contributions of these individuals through the assignment of temporary office space *only as allocated space permits*.
- P. Telework (sometimes referred to as Remote Work), in all forms (full remote or hybrid) is a tool to manage space and **must be considered** to reduce spatial need. Any request for new space must: 1) show how telework has been implemented to date; 2) explain how telework goals have been met or are being implemented; and/or 3) detail why telework is not an appropriate solution to meet the spatial need being requested. Remote and hybrid workers will be assigned to their department's neighborhood and will be expected to use an available office or workstation designated for their use when on site, as per telework standards (please engage facilities planning for such standards).
- Q. To ensure equity and reduce spatial misuse, no FTE shall have more than one formally assigned workspace. For such FTE who telework, it is assumed that their remote work location is their primary assigned workspace.

IV. Evaluation of Space

- A. Space evaluations are based on UCDH large-scale program plans and other factors deemed relevant by the VC-CEO. Requests are evaluated based on the following criteria:
 - 1. Workload factors, including present and projected numbers of students, faculty, staff, and patients. FTE and headcount are considered.
 - 2. Program requirements, including special program requirements, uniqueness of program, need for improvement of program quality, and stage of program development.
 - 3. Adequacy of existing area, including type, quality, and quantity of space in terms of efficiency and safety of existing facilities.
 - 4. Technological improvements, including changed space requirements for fixed or moveable equipment, for changed instructional methodology, or for new fields of research.

5. Environmental and geographic considerations, including location requirements based on program needs, adjacency to related programs, and access to students, faculty, staff, and patients.
6. Telework potential as applicable to the job functions, duties, and operational impact to UCDH.
7. Financial impacts to UCDH.
8. Compliance and safety.
- D. Only when possible, each department shall be housed in one location to promote interaction among faculty, students, and staff, and to maximize efficiency of operations.
- E. Research space needs will be evaluated in accordance with the procedures included in the Research Space Allocation Guidelines **(see Attachment B)**.
- F. Storage space is limited and therefore should be utilized only for equipment and other material that must be retained and used frequently or regularly. Items shall not be stored in space that is designated as office, research, conference room or other non-storage use. Building corridors are not assignable space and shall not be used for storage.
- G. Leased space may be assigned to support program activities that cannot feasibly be conducted in on-campus locations or in situations where no functionally adequate space can be provided on campus.
 1. The chief financial officer will decide if central resources will be allocated for lease and improvement costs.
 2. If central resources are not allocated, the chief financial officer may grant permission to use departmental or center resources.
- H. Department heads are responsible for ensuring accurate reporting of their space inventory.
 1. Space inventory information assists UCDH leadership with space management, space needs evaluation, and future space planning.
 2. Space inventory information may be used to determine responsibility for funding building operations and maintenance.
 3. Space inventory information may be used to calculate indirect costs associated with research activities and to establish the indirect cost rate to be applied to contract and grant activities.

V. Guidelines for Space Allocation

- A. To achieve the most effective utilization of space and other resources, departments should share spaces and facilities whenever it is functionally possible (e.g., conference rooms, class laboratories, duplicating equipment).
- B. ***No department may temporarily assign space to another department without consultation with facilities planning.*** Any agreements which have been entered to without the knowledge or facilities planning or without a formal agreement in place (which has been acknowledged by facilities planning) will not be used for future space programming.
- C. Employees are permitted to personalize their **assigned** workspaces within the following parameters:

1. Personalization does not damage University property.
2. Personalization does not violate University policies (see Sections 400-20, 400-15, 390-30).
3. Personalization does not present safety hazards or interfere with the orderly functioning of the workplace (see Sections 360-30 and 390-40).
4. Shared workspaces designated for the use of teleworkers (remote or hybrid) are not allowed to be personalized.

D. Academic departments and centers

1. The Facilities Planning Department assists with the evaluation of space requirements for academic departments and centers according to the priorities established by the deans and VC-CEO.
2. Deans and department heads have discretion to allocate assigned space as they deem appropriate for program support within the guidelines set forth in **Attachment A** and **Attachment B**.
3. Non-office space (e.g., laboratories, studio space) should be assigned by the department head after appropriate consultation with their respective dean, chair, program faculty, and staff.

E. Administrative and clinical departments

1. Space requirements are evaluated based on operational requirements and the responsibilities of staff personnel assigned to each department. Assignments of staff workspace will be based on function and the guidelines in **Attachment C**.
2. When possible, administrative, and clinical departments shall be housed in locations that accommodate the needs of their patients and visitors.
3. The respective chief operating officers are responsible for the allocation of clinical spaces once assigned.

VI. Procedures and Process

A. Requests for Additional Space

1. A request for additional space can be made by submitting a Facilities Service Request (FSR) for space via the current mandated intake system (COMPASS) and during open intake periods. All space requests must be approved by a division leader (C-level approver) or dean. Prior to making a spatial request the following internal process should be considered:

Step 1: Conduct a self-assessment of your existing space. Think critically about your space needs and how functions can be accommodated. Questions to ask yourself and colleagues could include:

- Is there a solution that can be achieved through telework, technology, infrastructure, or furniture? Consider work practice innovations so that new systems, equipment, or procedures can enable a more efficient use of space.
- Can space be arranged as multifunctional, within your department or with partners to achieve the needs or goals?
- What, if any, current departmental spaces are underutilized?
- How can existing space be repurposed to meet these needs?

If a potential solution exists within your department's existing space but requires some level of redesign or renovation a Facilities Service Request via COMPASS for furniture or a small project should be considered.

Step 2: If the new space need cannot be met within existing departmental space, engage your dean or divisional leadership to identify existing space within your division's space portfolio that could meet this need. It is suggested that prior to this, you document your needs and deficiencies of existing space in your self-assessment.

Step 3: If your needs can be met with the allocation of an existing space outside of your division's allocation, work with your leadership to engage the leadership that manages that space, working in consultation with facilities planning. Some agreements may be documented with a Memorandum of Understanding (MOU) which is to be administered by facilities planning. Facilities planning can assist in the communication and negotiation for a permanent or temporary reallocation of spaces.

Step 4: If no existing space is available and suitable for your space needs, complete a Facilities Service Request in COMPASS. Be sure to detail all the efforts taken to date to resolve your needs up until the point of submittal.

Step 5: Upon submitting a request, staff from facilities planning will reach out. Collaborate with the space planners as they examine and vet your space needs to identify possible solutions.

2. The Facilities Planning Department will assign such spatial requests for investigation.
 3. An assessment of the request and potential solution(s) will be presented to the requesting department and (if necessary) to divisional leadership as required.
- B. Assessment of Need and Options
1. Facilities planning will seek alternatives within existing University-owned space adhering to this policy.
 2. Space needs specific to the Sacramento Campus (in addition to the academic practices above) may include or be driven by:
 - a. Healthcare codes
 - b. Life safety issues
 - c. Technical embellishments to improve infrastructure
 - d. Alterations necessary to support capital equipment installations
 - e. Alterations necessary to support institutional objectives
 - f. Alterations necessary to support department objectives
 3. If space is not available to support a program, facilities planning may seek alternatives in leased space. The facilities planning analysis will include proximity, patient access, and parking, and define responsibility for lease costs, tenant improvements, and operating costs.

C. Programming of Space and Guidelines

1. Programming, based on function and appointments and space guidelines, is the primary method for spatial allocation. **Attachments A, B and C** provide the general guidelines used to develop a space program. The actual allocation of space may be constrained by resource availability and/or the configuration of existing facilities. Henceforth, it may not be feasible for the guidelines to be met.

D. Replacement Space and Reallocation

1. When new space is provided or developed, the space from which a department is moved becomes an institutional asset and will be reassigned to an approved use. This means that the old space reverts to the institution for reassignment or re-purposing ***the moment the decision is made for relocation***. It further means that the department head should not plan or reallocate such space and should consult with - and direct all planning or inquiries to - facilities planning.

E. Space Inventory

1. The space inventory is managed by facilities planning. Changes to space assignments must be reported by the department to facilities planning on a timely basis to ensure that the space database remains accurate. Departments have the responsibility to review and update space inventory information at least annually. The Facilities Planning Department is responsible for reporting the inventory to the main campus, finance and other departments who require summary or department specific information.

VII. Financial Responsibilities

The high cost of developing and maintaining space requires that all UC Davis Health departments efficiently and effectively utilize the space and facilities they occupy. Accordingly, all space requests will be scrutinized by facilities planning and UC Davis Health leadership. Departments may be asked to work with facilities planning and others to prepare a Business/Academic Plan that includes (1) detailed summary of how existing space is used and allocated; (2) the underlying rationale and justification for the space request; and (3) the alternatives that were considered. **Attachment D** provides an outline of the key questions that departments should be prepared to address when asking leadership for a significant commitment of space and resources. For new or remodeled space, departments within the Schools of Health may be required to pay for all or part of the facility improvements, equipment, furnishings, IT infrastructure, and other start-up expenses in non-clinical spaces. School funding requests must be approved in writing by the appropriate dean in consultation with the chief financial officer. Funding requests from UC Davis Medical Departments must be approved by the appropriate C-level divisional leader with consultation and endorsement of the chief financial officer. Decisions may be formalized in a letter of agreement. Initiatives in support of the UCDH or a School of Health strategic plan will generally be given funding priority. UCDH may also establish financial incentives and metrics to help ensure that all clinical, research and office space is efficiently and effectively utilized. To the extent feasible, faculty- and staff-related cost of space and facilities should be directly or indirectly charged to extramural grants.

ATTACHMENT A

Space Assignment Principles

I. Chairs and Faculty

- A. Deans and department chairs shall have the responsibility and authority (with accountability to the VC-CEO and, as appropriate, facilities planning) to effectively manage space assigned to their department, optimizing the use of limited resources to support the vision and goals of the department and UCDH as a whole. Space allocations by the department head should be consistent with the guidelines presented in **Attachment C**.
- B. Department chairs, center directors, vice chairs, deans, residency program directors, and fellowship program directors are to have private office assignments when possible - and if feasible - within current allocated space.
- C. Full-time faculty: Full-time faculty members should have access to space for confidential, sensitive, mentoring, and personal interactions. While a private office provides such, for those faculty whose responsibilities are largely not office based, alternatives for access to confidential space may be provided, such as a designated space for private conversations and phone calls. Department heads shall have the discretion to require faculty to share office space if/when: (1) space is not available to support the assignment of an individual private office to faculty; and/or (2) the duties and responsibilities assigned to a faculty member would mean that they would have a limited need for an office.
- D. Part-time faculty: Part-time faculty will typically be required to share a space with one or more part-time faculty. Such space may be a workspace.
- E. Emeritus faculty should only be assigned shared office space and may only be assigned space if available.
- F. Postdocs, junior specialists, project scientists, and other academic appointments should generally have shared space.
- G. Teleworking is a new tool that should be considered to manage spatial expectations for all academic positions. Deans and department leaders should consult Human Resources if considering teleworking as a tool to meet workspace needs.

II. Trainees:

- A. Residents and fellows should be in shared space.
- B. Chief residents may require different shared space with scheduling consideration to allow private office time.

III. Clinical Staff in the Academic Office Space:

- A. Staff physicians who are assigned primarily clinical responsibilities may be assigned shared space in the academic setting and should be paired with a similar staff physician when feasible. Schedules should be constructed to ensure access to private office time. Alternatively, office space may be provided in the clinical arena but is not be guaranteed.
- B. If the position is primarily for research or clinical trials, job functions and responsibilities should dictate the appropriate office space assignment.

IV. Administrative & Support Staff:

- A. Staff assignments to office or workstation space should be based on position requirements. In general, and when feasible, those who formally oversee full-time equivalent staff of at least five or more would be provided enclosed office space over those who oversee less staff or no staff at all -- regardless of title. In general, those who do not formally oversee staff should be assigned a workstation. A shared resource for private conversations and corrective action should be made available when enclosed office space is in short supply. Such rooms would include focus, huddle, phone, or conference spaces.
- B. Division heads who oversee staff should be assigned private office space when feasible and as space allocations allow.
- C. Access to designated areas such as focus rooms and huddle rooms for private conversations and phone calls should alleviate the need for private offices for staff that have an infrequent but necessary need for privacy in certain job functions.
- D. On-site workers should have an assigned workstation or office in their department neighborhood. Hybrid and remote employees will be assigned to the same neighborhood and are encouraged to use the workstations and offices designated for their use in that area when on site.
- E. UCDH full time equivalent staff shall be provided space priority over part-time and contract staff as operational requirements allow.

ATTACHMENT B

Research Space Allocation Guidelines

The respective deans for UC Davis' Schools of Health allocate research space to departments or centers (units) within the School of Medicine (SOM) and School of Nursing (SON) using a simple objective formula. The sub-allocation of space to individual faculty, or for shared use, is at the discretion of the department chair or center director (unit heads).

The Basic Formula

Total unit research space (in assignable square feet) = (# of eligible individuals) X (the applicable building and activity-based unit per individual).

Definition of an Eligible Individual (a.k.a., program funded individual, or PFI)

PFI's are the full-time equivalents of research personnel requiring SOM or SON space. Their salary or stipend support must be traceable to a multi-year research program fund source (extramural). They include: (1) all regular and in-residence series faculty without qualification (counted as 1.0 PFI regardless of percentage of research effort); (2) clinical X and visiting series faculty with extramural or department-sponsored research programs in proportion to their percent research effort; and (3) adjunct and professional research series faculty; technical research staff; graduate students; postdoctoral fellows, clinical research fellows, research nurses, and clinical research coordinators. (Those with 50% or less appointments are counted as fractional PFI; those with greater than 50% appointments are counted as full PFI.) Unit heads may request a limited number of PFI's (three per 10 principal investigators) for self-funded or partially funded trainees as long as they are registered graduate students, and their faculty mentors are members of a graduate group. Undergraduate students will be counted as 0.20 PFI, provided they work more than eight hours per week on a faculty sponsored research project.

Definitions of Research Activities Influencing Allocation Units per Individual

Different types of activity require different amounts of space. For simplicity, two main types of research activity accrue different quantities of space per PFI:

- Procedure or laboratory-based research, where space is required to perform experimental procedures to gather data, in either a clinical or basic research setting. The allocation unit per PFI depends on the type of floor plan provided by the building utilized. (See below).
- Office-based research, where the primary data consists of patient charts, field reports or other records that are gathered elsewhere and brought to a dedicated research office for review, analysis and storage. The allocation unit is 60 asf per PFI. This assumes 2 PFI's share a standard 90-100 asf office and have access to additional shared storage/support space.

Definitions of Floor Plan Types Influencing Lab-Based Allocation Units per Individual

- Conventional Labs where lab modules are individual rooms approximately 350-450 asf and accommodate 3-4 individuals per room. The allocation unit is 160 asf per PFI. This includes lab space and a portion of shared support space per PFI.
- Clinical or behavioral research space where patients are interviewed or examined in order to gather data may be individual exam, interview or observation rooms. The allocation unit is 90 asf per PFI, but may vary depending upon function.
- Open-bay labs where multiple open bench bays accommodate three to four individuals per bay (e.g., Research-3 and the Genome and Biomedical Science Facility). The allocation unit is 120 asf per PFI. This includes a bench bay allocation and a portion of shared lab support space.

Basic Principles of the Policy

The basic metric of research activity that drives the quantity of space allocated by the dean/vice chancellor to units is the number of funded personnel within each unit who are engaged in research and require the use of SOM or SON research facilities.

The responsibility for sub-allocating a unit's assigned space to individual faculty or programs rests with the unit head. Unit heads may apply the criteria and formulae of the dean/vice chancellor's policy to guide intradepartmental assignments or they may deviate from the dean's guidelines to address individual needs or special circumstances, as they deem appropriate, within the limits of their unit's total space allocation.

Space allocations by the dean to units are never permanent and may be adjusted (up or down), depending on changes in units' research activity / PFI count. This is intended to provide the dean the flexibility needed to effectively manage existing resources. Similarly, unit heads have the discretion to adjust intradepartmental allocations to meet changing space needs within their unit, even when the total allocation to a unit does not change.

Current data on research personnel (PFI) used to update space allocations may be annually reviewed by the Dean's Office, in accordance with campus-wide policy (UCD P&P 360-21 B.1.). Units that, based on their current PFI and assigned space, occupy significantly more space than is justified by the policy will be notified that they are potentially vulnerable to having their space downsized.

To avoid unnecessary disruptions from space reassignments, the Dean's Office will consider short-term fluctuations in grant or other program support for research personnel. This will be done by evaluating two-year rolling averages of a unit's PFI. Unit heads may provide, at their discretion, additional buffer for faculty whose funding experiences a short-term fluctuation, within the limits of their total unit space allocation. It is recommended that if research space assigned to a PI has been unoccupied by a funded individual (.50 PFI or more) for a period of 6 months and no other suitable space is available, the space may be temporarily used by another PI with an approved new space request. If, after an additional 12 months, the PI to whom the space was originally assigned does not have a funded individual to occupy the space, it may be

reassigned. The policy affects only research and research support space. It does not affect faculty members' primary academic offices or departmental administrative or instructional space.

The policy does not apply to research space that is not administered by UCDH. Faculty who utilize space administered by other university units (e.g. the Primate Center or CCM) or other collaborative partners (e.g., VA, Shriners) are subject to the space policies of those facilities. Faculty whose research needs are fully accommodated in leased facilities do not accrue duplicate space in a university-owned facility.

The Faculty Executive Committee (FEC) established a standing committee, the Research Space Advisory Committee, to monitor, evaluate and make recommendations regarding this policy and its implementation. Furthermore, the FEC established at the same time the Research Space Appeals Committee to hear appeals from individual faculty regarding space allocation decisions. The chairs and members of these committees may be contacted through the SOM Faculty Senate Office, 530-752-4781.

Sample Calculation Using Space Policy

A department has six regular series and two adjunct faculty who are exclusively engaged in bench research (i.e., procedure-based) in Tupper Hall, a facility with a conventional floor plan consisting of 350-450 asf lab modules and smaller lab support/equipment rooms. Each of the faculty have the following support and PFIs (assumed to be 100% appointees unless otherwise indicated):

Faculty A. (Reg series):

grant funded with 1 SRA + 2 grad students + 1 postdoc = 5 PFI

Faculty B. (Reg series):

grants funded with 1 SRA + 1 technician + 3 grad students + 1 associated professional researcher = 7 PFI

Faculty C. (Reg series, new hire):

start-up support with 1 SRA + 1 grad student = 3 PFI

Faculty D. (Reg series, junior level):

Health System grant with 1 SRA + 1 grad student = 3 PFI

Faculty E. (Reg series):

grant funded with one 50% SRA (@ 0.5 PFI) and one 75% SRA (@1.0 PFI) + 2 technicians + 3 grad students + 2 postdocs + 3 undergrads (@0.2 PFI) = 10.1 PFI

Faculty F. (Reg series):

no grants with no supported personnel = 1 PFI

Faculty G. (Adjunct):

independently funded with 1 SRA + 2 grad students = 4 PFI

Faculty H. (Adjunct):

funded at 80% effort on faculty member A's grant and working in A's laboratory = 0.8 PFI

The total PFI in this department is: 33.9

Applying the unit factor for a conventional lab floor plan (e.g., Tupper Hall) of 160 asf / PFI:

This department accrues 33.9×160 asf/PFI or 5,424 asf.

(The formula's target is considered satisfied if the assigned space is within +/- 10% of the calculated amount, according to the limitations and configuration of available facilities.)

The chair has the discretion of sub-assigning this space to individual faculty or shared use.

ATTACHMENT C

Office Space Guidelines

The following guidelines are for planning purposes only. Space types and assigned square feet (ASF) are not guaranteed. For additional information on space types, programming ratios, and other space planning elements, please consult the Facilities Planning Department for detailed design guidelines.

SPACE TYPE	USAGE	ASSIGNED SQUARE FEET (ASF)
NEIGHBORHOOD SPACES		
Executive Office	Senior Management / Chair / Dean	160
Private Eco-Office	Faculty: Full Time Academic Senate in the Ladder, In Residence and Clinical X Series. Includes independently funded adjunct over 50% time. Department Manager: Includes both academic and clinical department management	84
Shared Eco Office** **paired with similar faculty, consideration given to schedule when possible.	Faculty: Part-Time Academic Senate less than 50% time; independently funded adjunct less than 50% time; Health Sciences Clinical series with 80% clinical time. Includes Chief Residents.	84
Workstation (Open Area) OR Private Eco-Office	Supervisor	64 (Workstation) 84 (Private Eco-Office)
Workstation (Open Area) OR Shared Eco-Office	Fellow / Resident	30 (Workstation) 84 (Shared Eco-Office)
Workstation (Open Area)	Staff	30-64
Shared Workstation (Open Area)	Student	30
Huddle Room	Non-Reservable (Drop In); Capacity 1-4	108
Focus Room	Non-Reservable (Drop In); Capacity 1-2	48

SPACE TYPE	USAGE	ASSIGNED SQUARE FEET (ASF)
Individual Storage	Hybrid Workers: Assigned lateral file unit or equivalent Remote Workers: Unassigned day use locker or equivalent On-Site Workers use storage at their assigned workstation or office (ped or equivalent)	Varies
Open Collaboration Spaces	Non-reservable, soft lounge seating & fixed height ergonomic seating for short term use	Varies
MEETING SPACES		
Large Conference Room	Reservable; Capacity 15+	450-500
Medium Conference Room	Reservable; Capacity 9-14	275-375
Small Conference Room	Reservable; Capacity 5-8	215-250
Team / Project Room	Reservable; Capacity 6-8	250-300
Training Room	Reservable; Capacity 20+	Varies
SUPPORT SPACES		
Waiting Area	Varies	Varies
Wellness Room	Reservable; Capacity 1	80-100
Mother's Room	Reservable; Capacity 1-2	135-150
Copy/Print	Shared	Varies
Coffee Point	Shared	Varies
Storage Room	Shared	90 - Varies
Reception / Welcome	Building entry at minimum	Varies

ATTACHMENT D

Business / Academic Plan

For projects or initiatives involving a substantial commitment of UC Davis Health resources, units may be asked to prepare a concise written summary. Please consult UC Davis Health's Strategy Office for templates. In general, a Business or Academic Plan should include the following major elements:

- I. **Executive Summary:** Provide a concise summary of the problem statement, the program objectives, the alternatives that were considered, the recommended solution and the financial implications of the proposed solution. Explain how you would address these issues if no additional resources are provided.
- II. **Key Drivers:** Describe the program goals and unmet needs that are associated with the request. Define schedule constraints and timing objectives.
- III. **Relationship to Strategic Plan:** Explain how this initiative driving the space request complements the UCD Health Strategic Plan. Explain how this initiative relates to the core mission of the organization and why you think it should be given priority by the leadership.
- IV. **Other Benefits:** Identify and explain other drivers and opportunities associated with this proposal, e.g. potential gifts, new initiatives or areas of inquiry, research grants or contracts, etc. Explain potential cost savings that may be realized, i.e. salary savings, improved patient outcomes, etc.
- V. **Planning Considerations:** Explain the issues that are particularly important in assessing the effectiveness of various alternatives (e.g., constraints and risks, adjacency requirements, environmental, community, etc.). Note that these are essentially the most important criteria from the Alternatives Matrix.
- VI. **Alternatives Considered:** Briefly summarize the alternative solutions that were considered. What strategies were considered? What actions were taken to minimize the need for additional space.
- VII. **Financial Analysis:** Summarize the projected financial and operational impact of the proposed initiative. Clearly define the potential fiscal impact of the initiative and all underlying assumptions regarding projected fund sources, revenues, patient volumes, expenses, staffing assumptions, start-up costs and ongoing operational expenses.