

Sections 15126 and 15130 of the CEQA Guidelines require that all aspects of a project be considered when evaluating its impact on the environment, including planning, acquisition, development and operation. As part of this analysis, the EIR must identify the following components:

- Growth-inducing impacts of the proposed project;
- Significant irreversible environmental effects that would be involved in the proposed project should it be implemented;
- Significant environmental effects that cannot be avoided if the proposed project is implemented.

This section also provides an analysis of the project’s potential to result in secondary environmental impacts related to an economic effect on other area hospitals, which is included in **Appendix O** in the Technical Appendices, Vol. 2 of this document.

Cumulative impacts are analyzed within each impact discussion in the environmental impacts section (Section 3.0). Cumulative impacts from greenhouse gas emissions are discussed in Section 3.4 Air Quality.

5.1 GROWTH INDUCEMENT

CEQA requires that an EIR discuss ways in which a proposed project could foster population growth or the construction of additional housing, either directly or indirectly, in the vicinity of the project and how that growth would then affect the surrounding environment (CEQA Guidelines 15126.2(d)). Growth can be induced in a number of ways, by eliminating obstacles to growth, or by stimulating economic activity within the region.

The project will replace Sutter’s existing medical facility on Chanate Road. In doing so, the project essentially relocates existing direct and support medical services, with limited potential for creating new jobs. Medical support businesses, as well as retail, and other goods and services that support the employees may also relocate to the project vicinity. These would have the potential to induce some growth through the jobs they create; however, any such growth would be limited by the Sonoma County General Plan 2020 and zoning, and thus would be consistent with General Plan growth predictions.

The proposed project includes two new wells owned and operated by Sutter Medical Center to serve the project only. These improvements would not serve the surrounding area beyond the boundaries of the project site, and therefore, not remove an obstacle to providing water and wastewater service to future development. The impact of the project on Growth Inducement would be less than significant.

5.2 IRREVERSIBLE IMPACTS

5.2.1 Significant Irreversible Changes to the Environment

CEQA requires that significant irreversible environmental changes caused by a plan must be addressed in an EIR. Specifically, the EIR must consider whether “uses of non-renewable

resources during the initial and continued phases of the project may be irreversible since a large commitment of such resources makes removal or non-use thereafter unlikely.” Nonrenewable resources, in this discussion, refer to the physical features of the natural environment, such as land, air, and waterways.

Construction and implementation of the proposed project would commit the proposed project site to the uses detailed in the project description, thereby limiting the range of other uses that could be implemented on that site in the foreseeable future.

Various natural resources, in the form of construction materials and energy resources, would be used in the construction of the project, but their use is not expected to result in significant long-term shortfalls in the availability of these resources. No new generation facilities would be required. Energy consumed by the project is not likely to contribute to intermittent statewide energy shortfalls.

The project is not expected to result in any activities likely to result in accidents that could lead to irreversible environmental damage.

5.2.2 Significant and Unavoidable Impacts

This section identifies project impacts that could not be eliminated or reduced to a less-than-significant level by mitigation measures that are part of the proposed project. The following significant and unavoidable impacts are described in detail in Chapter 3.0 Environmental Impacts Analysis:

- Temporary increase in criteria pollutants (NO_x and PM₁₀) from haul trucks bringing fill to the project site, resulting in exceedances of daily emissions thresholds (AIR-1 and cumulative)
- Long-term increase in criteria pollutant (NO_x) from annual testing of hospital emergency generator one day of the year, resulting in exceedance of daily emissions threshold (AIR-5 and cumulative)
- Increase in greenhouse gas emissions, contributing to the global inventory of greenhouse gas emissions and climate change (AIR-7)
- Temporary increase in noise levels at nearby sensitive receptors from construction (both with or without pile driving) (NOI-1a, NOI-1b)
- Exposure of sensitive off-site receptors to intermittent noise from helicopter operations (NOI-5)
- Cumulative noise impacts from project operations when added to other existing noise in the project vicinity (NOI-8)
- Worsening of unacceptable levels of service at some intersections in the vicinity of the project due to the addition of project traffic, both in the near-term (2014) and long-term (2035) (TR-1, TR-6, TR-16)
- Unsignalized River Road/Barnes Road intersection would experience a significant impact in 2014 and 2035 based upon peak hour signal warrant evaluation (TR-2, TR-7, TR-17)

- Worsening of significant 95th percentile queuing impacts at some intersections in the vicinity of the project due to the addition of project traffic, both in the near-term (2014) and long-term (2035) (TR-3, TR-8, TR-18)
- Increase in volume/capacity ratio on some segments of US 101 operating at unacceptable levels of service (TR-5, TR-10, TR-20)

5.3 POTENTIAL SECONDARY ENVIRONMENTAL EFFECTS

As set forth in the Project Description of this EIR, in addition to Sutter's 70-bed hospital, the proposed project includes a 29-bed potential expansion of the hospital and a 28-bed PMC. The Sonoma County Department of Health Services conducted a preliminary evaluation of Sutter's business plan and concluded that: "Sutter's planned construction of the PMC and the possible 29 bed expansion of the 70 bed hospital would likely provide adequate capacity to accommodate Sutter's current market share of patients during the term of the Health Care Access Agreement Absent construction of the PMC and expansion of the Sutter hospital to 99 beds, some patients who have gone to Sutter will likely need to seek care from other area hospitals." (Sonoma County Department of Health Services, *Preliminary Analysis of Sutter's 2008 Revised Business Plan*, at p. 30.) Comments have been raised suggesting that the Sutter project, including the potential redistribution of patients, may have an adverse economic effect on other Sonoma County hospitals.

Even if the PMC and the hospital expansion are not built and the 70-bed hospital lacked future capacity to handle its share of patients such that patients must be redirected to other hospitals, it is unclear that there would be an adverse economic impact on the other hospitals. To the extent these patients are insured and the hospital has capacity to receive them, the effect on the other hospital(s) would likely be beneficial rather than adverse. If the patients were uninsured or underinsured and the economic impact on the other hospital(s) were negative, it remains unclear that there would be a significant secondary environmental impact as a result. Presumably, with the redistribution of patients (whether insured or not) there would be a corresponding shift in traffic from Sutter to one of the five other hospitals in the County, but the extent to which a particular hospital would be affected is uncertain.

CEQA addresses physical changes in the environment, and economic and social effects are not, in themselves, significant effects on the environment (CEQA Guidelines, §§ 15064(e), 15131, 15382; *Friends of Davis v. City of Davis* (2000) 83 Cal.App.4th 1004, 1019). Social and economic effects need only be considered to the extent they are relevant to an adverse physical change in the environment or likely to result in such an adverse physical change. (CEQA Guidelines, § 15064(e); *Friends of Davis, supra*, at p. 1020.) An indirect physical change may be considered only if it is reasonably likely to occur; a change which is speculative or unlikely to occur is not reasonably foreseeable (CEQA Guidelines, § 15064(d)(3); *Friends of Davis, supra*, at p. 1020.).

According to the County's *Preliminary Analysis of Sutter's 2008 Revised Business Plan*, the construction of the full hospital complex would provide adequate capacity to accommodate Sutter's current market share of patients. A potential redistribution of some patients among the five hospitals in the County could occur if Sutter proceeds with only the 70-bed hospital

component of the proposed project; however, any such redistribution would not result in an actual and reasonably foreseeable adverse physical change in the environment.

Sutter prepared an analysis of this issue, which is included in this EIR as Appendix O. In that analysis, Sutter concludes that any potential diversion of patients to other hospitals will be minimal, and that the payer mix of patients (the mix between insured and uninsured patients) is not expected to differ substantially from the current payer mix at other Sonoma County hospitals. Based on the Sutter analysis and the County's *Preliminary Analysis*, there is no reasonably foreseeable adverse physical change in the environment as a result of a potential redistribution of patients among the five hospitals in the County. Thus, no significant secondary environmental impacts resulting from the economic effect of the proposed new hospital on other hospitals are expected to occur.