

Appendix L
Vehicle Miles Traveled Analysis
(July 21, 2020)

MEMORANDUM

To: Scott Barker, City of Chula Vista
Paul Oberbauer, City of Chula Vista

From: Sabita Tewani, AICP, Transportation Planner
Dennis Pascua, Transportation Services Manager

Subject: Encompass Health Vehicle Miles Traveled (VMT) Analysis

Date: July 21, 2020

cc: Dawna Marshall, Project Manager

Attachment(s): Figures 1-3
Trip Generation Memorandum

Encompass Health Chula Vista (proposed project) consists of an 80-bed rehabilitation hospital in the City of Chula Vista (City). This analysis was conducted to determine if the proposed project would have a significant transportation impact under recently adopted California Environmental Quality Act (CEQA) guidelines for which compliance with Senate Bill (SB) 743, requiring vehicle miles traveled (VMT) analysis, will be required beginning July 1, 2020. This VMT/SB 743 analysis has been prepared consistent with the Office of Planning and Research (OPR) December 2018 Technical Advisory (OPR Technical Advisory) (OPR 2018), the Draft Guidelines for Transportation Impact Studies in the San Diego Region, May 2019, prepared by Institute of Transportation Engineers, San Diego Section, Transportation Capacity and Mobility Task Force, SB 743 Subcommittee (ITE 2019) and City of Chula Vista's Draft Transportation Study Guidelines, May 2020.

1 Project Description

The proposed project consists of an 80-bed rehabilitation hospital on a vacant parcel located on at the western terminus of Shinohara Lane in the City of Chula Vista. The project site is located in east of Interstate 805, north of Main Street and west of Brandywine Avenue. Primary vehicular site access would be provided via entrance/exit from Shinohara Lane via the Brandywine Avenue and Shinohara Lane intersection. Figure 1, Project Location, shows the project location.

The proposed project is an inpatient rehabilitation center that would provide recovery from medical issues such as amputation, multiple trauma, arthritis, neurological disorders, brain injuries, burns, stroke, or spinal cord injury. As such, the center would include specialized rehabilitation and evaluation rooms in addition to patient rooms. Patients are assumed to be transported to the facility via a non-emergency ambulance and stay at the center until their release. Considering the type of care to be provided, the 80-bed facility is expected to have approximately 210 daily employees.

2 Senate Bill 743 Background

A change to transportation analysis in CEQA environmental review occurred when Governor Jerry Brown signed Senate Bill (SB) 743 into a law that required an update in the metric of transportation impact from Level of Service (LOS) and automobile delay to one that promotes the reduction of GHG emissions, the development of multimodal transportation networks, and a diversity of land uses for transit priority areas. SB 743 required the Governor's Office of Planning and Research (OPR) to amend the CEQA Guidelines to provide an alternative to LOS for evaluating transportation impacts. Under the new transportation guidelines, LOS, or vehicle delay, will no longer be considered an environmental impact under CEQA.

The updates to the CEQA Guidelines required under SB 743 were approved on December 28, 2018. Under the new guidelines, VMT has been adopted as the most appropriate measure of transportation impacts under CEQA. The OPR's regulatory text indicates that a public agency may immediately commence implementation of the new transportation impact guidelines, and that the guidelines must be implemented statewide by July 1, 2020. The City of Chula Vista has not yet adopted VMT metric or guidelines and significance criteria for transportation impact analysis. However, the City of Chula Vista, along with other cities in the San Diego Region, participated in the San Diego's local ITE SB 743 Subcommittee that has prepared an update to the SANTEC/ITE 2000 guidelines, consistent with CEQA VMT requirements. The section below summarizes both the statewide and San Diego region guidelines utilized for the project's VMT analysis.

3 Vehicle Miles Traveled Guidelines, Methodology and Thresholds of Significance

3.1 VMT Guidelines

Statewide Guidelines

OPR has approved the addition of new Section 15064.3, "Determining the Significance of Transportation Impacts" to the state's CEQA Guidelines, compliance with which will be required beginning July 1, 2020. The Updated CEQA Guidelines state that "generally, vehicle miles traveled (VMT) is the most appropriate measure of transportation impacts" and define VMT as "the amount and distance of automobile travel attributable to a project." Section 15064.3 (b)(1) Criteria for Analyzing Transportation Impacts includes presumptions that certain projects (including residential, retail, office, and mixed-use projects) proposed within one-half mile of an existing major transit stop or along a high-quality transit corridor will have a less-than-significant impact on VMT.

If the specified presumption does not apply, VMT should be analyzed through a qualitative or quantitative analysis. The Updated CEQA Guidelines are accompanied by the Technical Advisory, which includes specifications for how to estimate and forecast VMT. Section 15064.3 (b)(3) Qualitative Analysis mentions if existing models or methods are not available to estimate the vehicle miles traveled for the particular project being considered, a lead agency may analyze the project's vehicle miles qualitatively. Such qualitative analysis would evaluate factors such as the availability of transit, proximity to other destinations, etc.

San Diego Region Guidelines and City of Chula Vista Draft Transportation Guidelines

Given the need to prepare VMT-based CEQA transportation impact analyses to satisfy the requirements of SB 743 as well as the need to evaluate the performance of the roadway system based on delay and level of service, the Draft Guidelines for Transportation Impact Studies in the San Diego Region were released in May 2019 (Draft Guidelines, May 2019). The methodology for VMT analysis for individual land development project is based on daily project trips and consistency with General Plan or Community Plan. The basic process is to compare a project's estimated VMT/capita or VMT/employee to average values on a regional, city-wide, or community basis. The target is to achieve a project VMT/employee or VMT/capita that is 85% or less of the appropriate average based on suggestions in these guidelines.

The City of Chula Vista has recently drafted Transportation Study Guidelines (TSG) which includes methodology, screening criteria, and analysis procedures for conducting a CEQA VMT analysis for projects located within the City.

3.2 Methodology

As mentioned above, the City has not adopted methodologies for performing VMT analysis per SB 743. However, the OPR and San Diego region have guidelines that have been used in the screening and analysis of the proposed project. The following will be the primary method of this VMT analysis:

1. Determine if the project can be screened out from requiring detailed VMT analysis and presumed as less than significant by comparing the project features to screening criteria presented in the City's TSG.
2. Determine the VMT/Employee (for employment-based projects) using the VMT Screening Tool published by the City.
3. Compare the project results to the applicable or most appropriate threshold. For the proposed project, the project's VMT/Employee is compared to the SANDAG regional average to determine if the project would have a potentially significant impact.
4. Additionally, using more location-specific information regarding similar rehabilitation health care facilities in the region provided by the applicant, proposed project's travel-efficient location was also examined.

3.3 Thresholds of Significance

The updated CEQA Guidelines themselves do not establish a significance threshold, the OPR's Technical Advisory and the Draft Guidelines, May 2019 recommends a threshold of significance for residential, office and other land uses. The recommended threshold for per capita or per employee for residential or office projects, respectively, is 15% below that of existing development per OPR or 85% of the existing development per the Draft Guidelines, May 2019. Consistent with OPR and San Diego Regional guidelines, The City's TSG has also adopted the 15% below regional average VMT/capita as significance threshold for transportation impact. Therefore, for proposed project, a potentially significant impact would be identified if the project's VMT/Employee is greater than 85% of the San Diego's regional average.

4 Vehicle Miles Traveled Screening and Analysis

4.1 VMT Screening for Land Use Projects

The OPR's Technical Advisory suggests that agencies may screen out VMT impacts using project size, maps, transit availability, and provision of affordable housing. The guidance recommended by OPR has been modified by the Draft Guidelines, May 2019 and City of Chula Vista's Draft Transportation Study Guidelines, May 2020 to be better suited to local conditions.

Minimum Project Size:

The determination of minimum project size for VMT analysis described below differs from the statewide guidance provided by OPR. It is based on regional standards for transportation analyses that were documented in the Guidelines for Traffic Impact Studies in the San Diego Region (SANTEC/ITE 2000) and have been in use for over 18 years. The level of VMT analysis in Table 1 is recommended based on project size (expressed in terms of Average Daily Trips generated by the project) and zoning. It should be noted that the City's Draft Transportation Study Guidelines recommend that any projects generating 200 or less average daily trips may be presumed to have a less than significant impact absent substantial evidence to the contrary. This small project screening would apply to all projects within the City, regardless of consistency with the General Plan.

Table 1. Level of VMT analysis

Projects Inconsistent with General Plan or Community Plan	
Average Daily Trips	Level of Analysis
0-500	VMT analysis Not Needed/VMT Impacts Presumed Insignificant
500 and greater	VMT Analysis Recommended
Projects consistent with General Plan or Community Plan	
Average Daily Trips	Level of Analysis
0-1,000	VMT analysis Not Needed/VMT Impacts Presumed Insignificant
1,000 and greater	VMT Analysis Recommended

Source: ITE 2019.

Projects Located Near Transit Stations

OPR's technical advisory contains the following guidance regarding projects located near transit stations:

- Proposed CEQA Guideline Section 15064.3, subdivision (b)(1), states that lead agencies generally should presume that certain projects (including residential, retail, and office projects, as well as projects that are a mix of these uses) proposed within ½ mile of an existing major transit stop or an existing stop along a high quality transit corridor will have a less-than-significant impact on VMT. This presumption would not apply, however, if project-specific or location-specific information indicates that the project will still generate significant levels of VMT.

An existing major transit stop is defined as “a site containing an existing rail transit station, a ferry terminal served by either a bus or rail transit service, or the intersection of two or more major bus routes with a frequency of service interval of 15 minutes or less during the morning and afternoon peak commute periods.” For the purposes of San Diego guidelines, the distance between the project site and the transit station is typically based on walking distance. Under normal circumstances, a major transit stop would be considered to be applicable for this purpose if the transit stop were assumed to be in place in SANDAG’s Regional Transportation Improvement (RTIP) scenario.

4.1.1 Minimum Project Sized Based Screening

To determine if the proposed project would meet the Minimum Project Size criteria, proposed project trip generation Dudek reviewed the trip generation rates for Health Care related uses in the City of San Diego’s Trip Generation Manual (2001), SANDAG’s Brief Guide of Vehicular Trip Generation Rates for the San Diego Region (2002), and the Institute of Transportation Engineers (ITE) Trip Generation Manual, 10th Edition (2017). Trip generation estimates for the proposed project are based on Trip Generation Analysis Memorandum for the project submitted to the City in May 2019, which is also included as Attachment A.

As shown in the trip generation analysis, since the proposed project is a rehabilitation hospital, it would not generate as much traffic as a general hospital use. Patients are expected to stay at the facility for an average of 14 days to recover and receive rehabilitation services. The proposed facility is anticipated to have similar characteristics as a convalescent/nursing care facility. Further, the project does not propose any outpatient services. Therefore, based on the project description, specifically, the employee work-shift times which make a majority of the 210 daily employees commute to the project site outside of the AM and PM peak hours, Dudek recommended doubling of the SANDAG “Hospital: Convalescent/Nursing” rates to represent the trip rates for the proposed rehabilitation hospital. Trip generation rates and resulting trip generation estimates for the project are summarized in Table 2.

Table 2. Project Trip Generation

Trip Generation Rates									
Land Use	Size/Unit	Daily	AM Peak Hour			PM Peak Hour			
			% In	% Out	Total	% In	% Out	Total	
Hospital: Convalescent/Nursing ¹	per bed	3.00	60%	40%	7%	40%	60%	7%	
Hospital: Convalescent/Nursing (modified) ²	per bed	6.00	60%	40%	7%	40%	60%	7%	
Trip Generation									
Standard SANDAG Trip Rate ¹									
Hospital: Convalescent/Nursing ¹	80	beds	240	10	7	17	7	10	17
Modified Trip Rate ² (Used for the Project)									
Hospital: Convalescent/Nursing (modified) ²	80	beds	480	20	14	34	14	20	34

Notes:

- ¹ Trip Generation rates are the “Hospital: Convalescent/Nursing” rates from SANDAG *Brief Guide of Vehicular Trip Generation Rates for the San Diego Region*, April 2002.

² Trip Generation rates are the “Hospital: Convalescent/Nursing” rates X 2 (doubled) from SANDAG *Brief Guide of Vehicular Trip Generation Rates for the San Diego Region*, April 2002.

As shown in the Table 2, using the modified SANDAG trip rates for “Hospital: Convalescent/Nursing” (doubled), the proposed project would generate approximately 480 daily trips, 34 AM peak hour trips (20 inbound and 14 outbound), and 34 PM peak hour trips (14 inbound and 20 outbound).

The project is not proposing a General Plan Amendment. Per City of Chula Vista General Plan, the project site is zoned Limited Industrial – Precise Plan Modifying District (ILP). The proposed inpatient rehabilitation center is an Unclassified Use pursuant to Section 19.54.020 (h) of the Chula Vista Municipal Code. As such, the proposed use would be permitted in this zone subject to approval of a Conditional Use Permit approved by the Planning Commission.

Hence, the proposed project is not considered inconsistent with the General Plan and however it generates more than 200 daily trips. Per San Diego ITE guidelines, the proposed project does not warrant a VMT analysis and impacts can be presumed to be less than significant. However, since the project generates more than City’s threshold of 200 daily trips, additional analysis was conducted to validate the findings of a less than significant impact.

4.1.2 VMT Map Based Screening

As mentioned above, the proposed project would have 210 employees and therefore is likely to have commute characteristics similar to an office development. Therefore, the average VMT/employee at the census tract level was utilized for comparing the VMT thresholds for SB 743 analysis. The VMT Screening Tool published by the City were used to determine the VMT/Employee in the census tract in which the proposed project is located. The City Screening Tool VMT map is available on following link.

- <https://cvgis.maps.arcgis.com/apps/webappviewer/index.html?id=d80a3cddc1964f8c88dafef234147e98>

Figure 2, Project Location VMT/Employee Map, illustrates the VMT/employee map that was utilized in screening the project. As shown in Figure 2, the project is located in Census Tract 133.12. The VMT per employee of this census tract is 21.40 miles per employee which is 78.70% of the regional. Since the project VMT per employee is less than 85% of the regional VMT per employee, the proposed project is screened out from a detailed VMT analysis. The proposed project is located in a VMT-efficient area and can be presumed to have a less than significant impact.

4.1.3 Locational Analysis

For some projects, OPR allows for the estimating the change in total VMT based on whether the project is likely to divert existing trips. Additionally, Section 15064.3 (b)(3) allows for a qualitative analysis if existing models or methods are not available to estimate the vehicle miles traveled for the particular project being considered, and the lead agency may analyze the project’s vehicle miles qualitatively.

The project would provide in-patient rehabilitation services to the residential neighborhoods in the City of Chula Vista and adjoining communities in the City of San Diego. Per project applicant, currently, patients travel to other

existing rehabilitation facilities in the San Diego region that are further from the proposed project. Table 3 provides the details of existing rehabilitation facilities and Figure 3, Other Rehabilitation Facilities in the San Diego Region, illustrates the location of other rehabilitation facilities in the San Diego Region.

Table 3. Location of Rehabilitation Facilities in the San Diego Region

Rehabilitation Facility	Distance from the Project Site	Address
1. Paradise Valley Hospital	Approx. 8 miles	2400 East Fourth Street National City, CA 91950
2. Sharp Memorial Hospital	Approx. 18 miles	7901 Frost Street, CA 92123 San Diego, CA 92123
3. Alvarado Hospital	Approx. 20 miles	6655 Alvarado Road, San Diego, CA 92120 San Diego, CA 92120
4. Sharp Grossmont Hospital	Approx. 17 miles	5555 Grossmont Center Drive La Mesa, CA 91942

The location of the proposed project is strategic for a facility of this nature as it is located close to Interstate 805 within the City of Chula Vista. As shown in Figure 3, the proposed project would divert patient trips that are destined to other hospital facilities further away from the City of Chula Vista and this diversion would reduce the VMT generated by those patients and likely from visitors.

5 Conclusions

Based on the VMT screening and analysis above for the proposed Encompass Health Facility, the following conclusions are made:

- The proposed project consists of an 80-bed rehabilitation hospital on a vacant parcel located on at the western terminus of Shinohara Lane in the City of Chula Vista. The proposed project is an inpatient rehabilitation center and is expected to have approximately 210 daily employees.
- Traffic Impact Study for the proposed project (Dudek 2020) and Trip Generation Memorandum (Attachment A), indicates that the proposed project would generate approximately 480 daily trips, 34 AM peak hour net trips (20 inbound and 14 outbound), and 34 PM peak hour trips (14 inbound and 20 outbound).
- Based on the City of Chula Vista's VMT Screening Tool and location of other rehabilitation facilities in the San Diego region, the proposed project can be presumed to have a less than significant VMT impact.

6 References

City of San Diego. 2001. *Trip Generation Manual*.

City of Chula Vista. 2020. Draft Transportation Study Guidelines, City of Chula Vista, May 21, 2020

Dudek. 2020. *Focused Traffic Impact Analysis Encompass Health, City of Chula Vista*.

ITE (Institute of Transportation Engineers). 2017. *Trip Generation Manual*. 10th ed.

ITE. 2019. *Guidelines for Transportation Impact Studies in the San Diego Region*. Draft. May 2019.

OPR (California Governor's Office of Planning and Research). 2018. Technical Advisory on Evaluating Transportation Impacts in CEQA. December 2018. Accessed March 2020. http://opr.ca.gov/docs/20190122-743_Technical_Advisory.pdf.

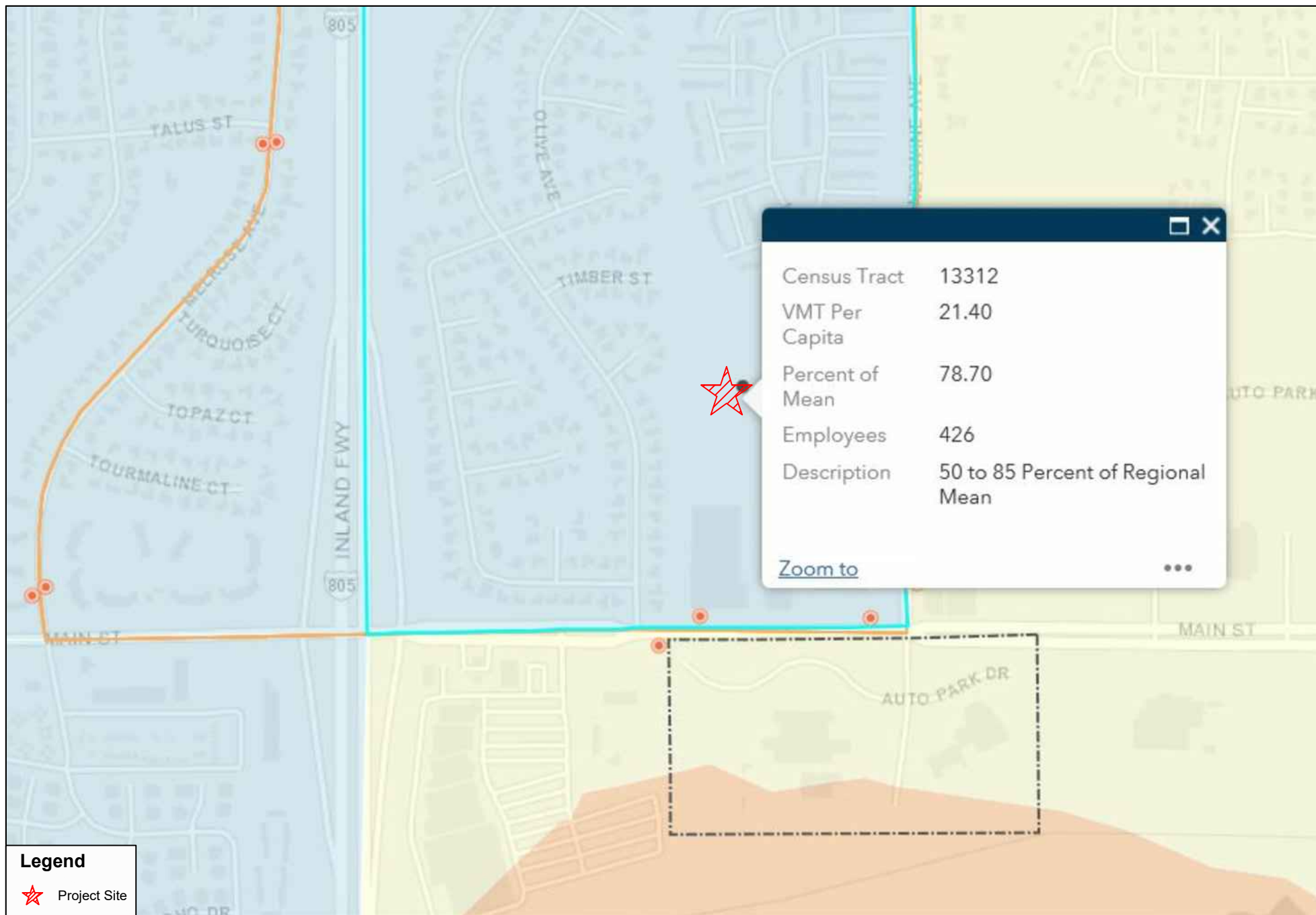
SANDAG (San Diego Association of Governments). 2002. *Brief Guide of Vehicular Trip Generation Rates for the San Diego Region*. April 2002.

SANTEC (San Diego Traffic Engineers Council)/ITE (Institute of Transportation Engineers). 2000. *Guidelines for Traffic Impact Studies in the San Diego Region*. Final. March 2, 2000.



Attachment A

Trip Generation Memorandum



Source: SANDAG SB 743 Concept Map

Legend

★ Project Site

DUDEK



NOT TO SCALE

FIGURE 2
Project Location VMT/Employee Map

Encompass Health Chula Vista

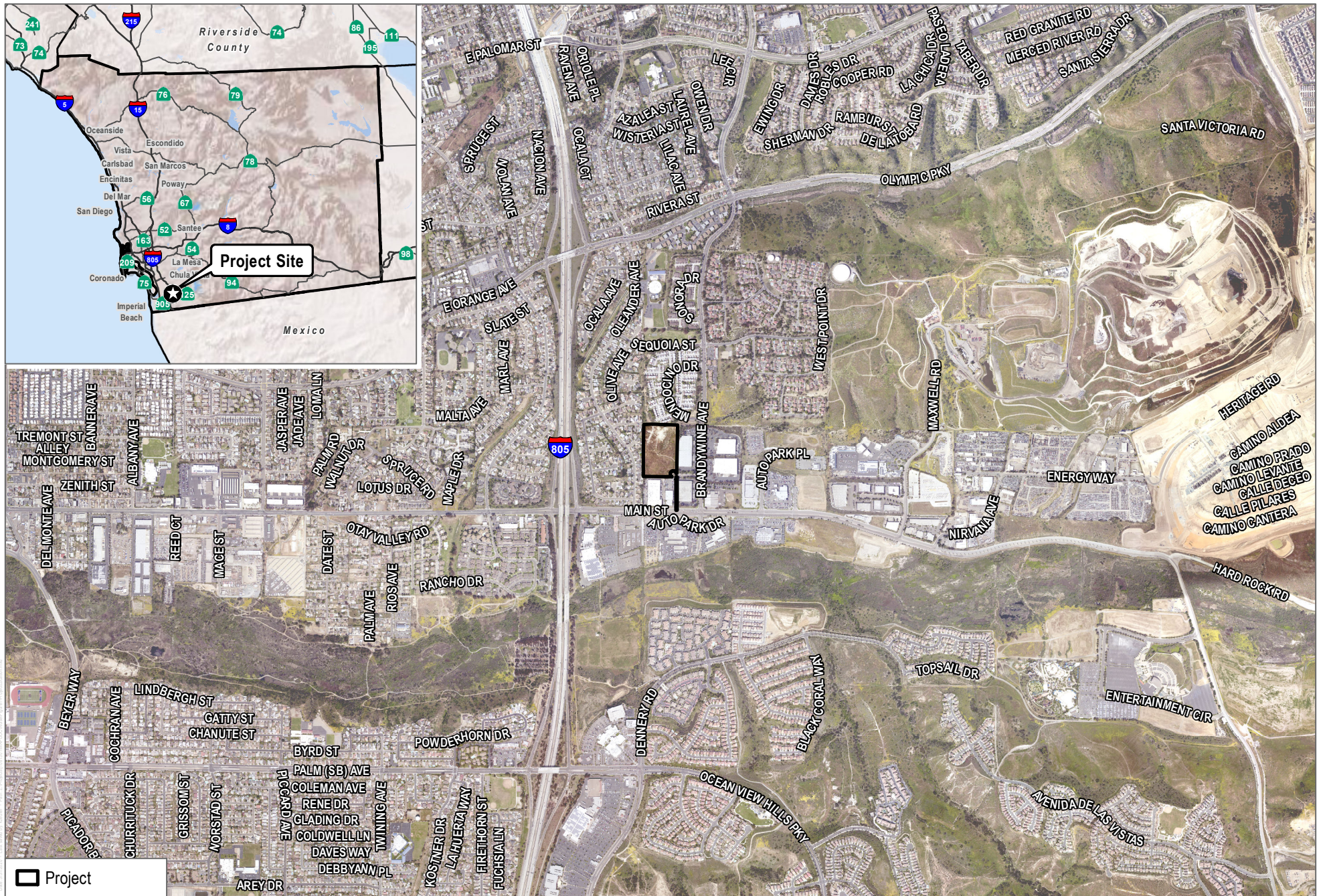


FIGURE 1

Project Location

Encompass Health Chula Vista

MEMORANDUM

To: Scott Barker, City of Chula Vista
Eddie Flores, City of Chula Vista

From: Dennis Pascua, Transportation Services Manager
Sabita Tewani, AICP, Transportation Planner

Subject: Encompass Health Chula Vista, Revised Trip Generation Analysis

Date: May 15, 2019

cc: Dawna Marshall, Project Manager

Attachment: Figure 1 – Proposed Study Area (revised)

The following memorandum has been prepared to substantiate the revised trip generation estimates for the proposed Encompass Health (formerly known as HealthSouth) project, an 80-bed rehabilitation hospital (proposed project). This memorandum is intended to supplement the *Scope of Work for Encompass Health TIS* memorandum that was submitted to the City of Chula Vista on March 5, 2019. Based on our scoping discussion with City staff, and further discussions with the applicant, it was determined that our original trip generation estimates in the March 2019 TIA scope of work did not accurately reflect the operations of the proposed project. The following memorandum provides our revised project trip generation estimates, and our revised (proposed) study area.

Project Description

The project site is a vacant 9.7 acre parcel located at the western terminus of Shinohara Lane in the City of Chula Vista. Figure 1 (attached) illustrates the project site location (and proposed revised study area and trip distribution).

The proposed project would develop a new 80-bed rehabilitation hospital (i.e., long-term hospital care) with 210 employees on a vacant parcel in Chula Vista. Patients are expected to stay at the facility for an average of 14 days to recover and receive rehabilitation services. Consistent with Encompass Health's other existing facilities, there would be two employee work-shifts, with the day shift starting at 7:00 a.m. and ending at 7:00 p.m.; and, the night shift starting at 7:00 p.m. and ending at 7:00 a.m. The day shift would have 170 employees, and the night shift would have 40 employees, for a total of 210 daily employees on site. Based on these work-shift timings, most of the employees would travel during non-peak hours to the project site before the start of their shift, and also, leave at the end of the shift during non-peak hours. Also, consistent with other existing Encompass Health facilities, there will be no outpatient services offered or proposed (in the future) at this facility.

Primary vehicular access to the project site is proposed at the western terminus of Shinohara Lane, with its intersection with Brandywine Avenue. A secondary, emergency-only vehicle access is also proposed (but yet, still to be determined as the site plan is currently under development).

Trip Generation (revised)

As part of the March 2019 TIA scope of work memorandum, trip generation rates for Health Care related uses were reviewed in the City of San Diego's *Trip Generation Manual* (2001), SANDAG's *Brief Guide of Vehicular Trip Generation Rates for the San Diego Region* (2002), and the Institute of Transportation Engineers (ITE) *Trip Generation Manual, 10th Edition* (2017). Based on review of trip rates, Dudek originally proposed to utilize the ITE Hospital trip rates (ITE Code 610) based on the number of employees (120 employees proposed, originally). Applying those rates to 210 employees (recently revised from 120 employees), the proposed project would generate approximately 796 daily trips, 58 AM peak hour trips, and 59 PM peak hour trips.

However, since the proposed project is a rehabilitation hospital, it would not generate as much traffic as a general hospital use, as originally assumed. Patients are expected to stay at the facility for an average of 14 days to recover and receive rehabilitation services. The proposed facility is anticipated to have similar characteristics as a convalescent/nursing care facility. A similar Encompass facility proposed in the City of Murrieta was approved utilizing the ITE *Trip Generation, 9th Edition* rates for a Nursing Home (ITE Code 620). A copy of *HealthSouth Murrieta Rehab Hospital – Trip Generation Estimates*, prepared by Kimley-Horn, September 13, 2016, is attached for reference. That study concluded that the peak hour trip generation for that similar 80-bed facility would generate 17.6 (18) peak hour trips.

Table 1 below, shows the revised trip generation analysis using the SANDAG "Hospital: Convalescent/Nursing" per bed rates, and the ITE "Nursing Home" (ITE Code 620) per bed trip rates. Both sets of rates yield similar trip generation estimates.

Table 1 – Trip Generation Rates and Estimates

Trip Generation Rates								
Land Use	Size/Unit	Daily	AM Peak Hour			PM Peak Hour		
			In	Out	Total	In	Out	Total
Trip Rates								
Hospital: Convalescent/Nursing (SANDAG) ¹	per bed	3.00	60%	40%	7%	40%	60%	7%
Nursing Home (ITE 620) ²	per bed	2.74	--	--	0.17	33%	67%	0.22
Trip Generation								
Hospital: Convalescent/Nursing (SANDAG)	80 beds	240	10	7	17	7	10	17
Nursing Home (ITE 620)	80 beds	220	--	--	14	6	12	18

Notes:

¹ Trip Generation rates are from SANDAG *Brief Guide of Vehicular Trip Generation Rates for the San Diego Region*, April 2002.

² Trip Generation rates are from ITE, *Trip Generation, 9th Edition*, 2012, and are consistent with *HealthSouth Murrieta Rehab Hospital – Trip Generation Estimates*, Kimley-Horn, September 13, 2016.

Using the SANDAG trip rates, the proposed project would generate approximately 240 daily trips, 17 AM peak hour trips (10 inbound and 7 outbound), and 17 PM peak hour trips (7 inbound and 10 outbound).

As previously discussed, similar to other existing Encompass Health facilities, the proposed Chula Vista facility would have two employee shifts. The day shift would operate from 7:00 a.m. to 7:00 p.m. with 170 employees; and, the night shift would operate from 7:00 p.m. to 7:00 a.m. with 40 employees. Based on the work-shift times, most of the employees would travel during non-peak hours to the project site before the start of their work-shift, and

leave the site at the end of their work-shift, also during the non-peak hours. Therefore, the 17 AM peak hour trips, and 17 PM peak hour trips generated by the proposed project would likely be from the small number of administrative staff and visitors of patients.

However, the minimum daily trips generated by the project would be, at least, 420 daily trips generated by the 210 employees (one inbound trip, and one outbound trip per employee). If you doubled the 240 daily trip generation estimate (using the SANDAG rate) to 480 daily trips, those 480 trips could comprise the 420 daily trips generated by employees, and the remaining 60 daily trips could be generated by administrative staff and visitors of patients.

Therefore, based on the project description, specifically, the employee work-shift times which make a majority of the 210 daily employees commute to the project site outside of the AM and PM peak hours, Dudek is recommending doubling of the SANDAG "Hospital: Convalescent/Nursing" rates to represent the trip rates for the proposed rehabilitation hospital. Table 2 presents the (revised) trip generation rates and estimates for the proposed project.

Table 2 – Revised Project Trip Generation Rates and Estimates

Trip Generation Rates								
Land Use	Size/Unit	Daily	AM Peak Hour			PM Peak Hour		
			In	Out	Total	In	Out	Total
Trip Rates								
Hospital: Convalescent/Nursing (modified) ¹	per bed	6.00	60%	40%	7%	40%	60%	7%
Trip Generation								
Hospital: Convalescent/Nursing (modified)	80 beds	480	20	14	34	14	20	34

Notes:

¹ Trip Generation rates are the "Hospital: Convalescent/Nursing" rates X 2 (doubled) from SANDAG *Brief Guide of Vehicular Trip Generation Rates for the San Diego Region*, April 2002.

Using the modified SANDAG trip rates for "Hospital: Convalescent/Nursing" (doubled), the proposed project would generate approximately 480 daily trips, 34 AM peak hour trips (20 inbound and 14 outbound), and 34 PM peak hour trips (14 inbound and 20 outbound).

Study Area (revised)

Since the project generates less than 500 average daily trips, a traffic impact study is not warranted per SANTEC/ITE *Guidelines for Traffic Impact Studies in the San Diego Region*. However, it would generate more than 20 peak hour trips, and therefore, a Local Transportation Analysis (LTA) is proposed to assess project's potential impacts to local roadway facilities in its vicinity.

Based on the proposed project's reduced trip generation estimates (from the original March 2019 trip generation estimates), the proposed study area has been revised. Figure 1 illustrates the project's proposed (revised) study area roadway segments and intersections.

Roadway Segments (revised)

Roadway segments will be counted primarily for disclosure of existing daily volumes, and for use by Dudek's Noise technicians for their noise analysis. City's criteria for long-term planning analysis of roadway segments will be utilized to assess if any of the roadway segments listed below need to be included in the traffic analysis.

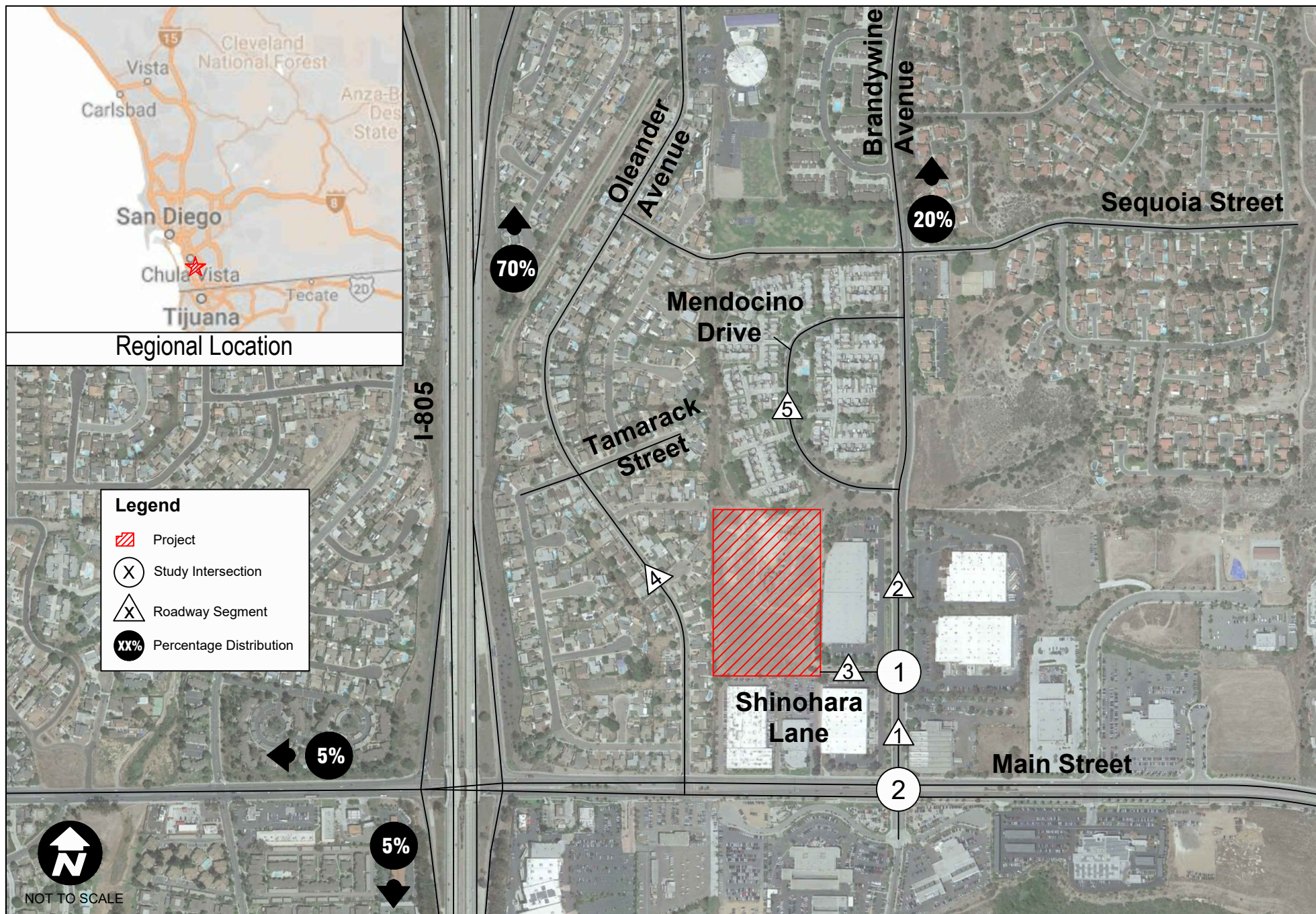
1. Brandywine Avenue, between Shinohara Lane and Main Street (for traffic and noise analyses)
2. Brandywine Avenue, between Shinohara Lane and Mendocino Drive (for noise analysis)
3. Shinohara Lane, west of Brandywine Avenue (for traffic and noise analyses)
4. Oleander Avenue, south of Tamarack Street (for noise analysis)
5. Mendocino Drive, west of Brandywine Avenue (for noise analysis)

Intersections (revised)

AM and PM peak hour traffic counts (including pedestrian and bicycle users) will be collected at the study area intersections. The following intersections would be analyzed in the TIS per City's recently updated Traffic Impact Threshold Standards:

1. Brandywine Avenue/Main Street
2. Brandywine Avenue/Shinohara Lane

All other TIS components scoped in the March 5, 2019 *Scope of Work for Encompass Health TIS* memorandum would remain in-place.



Source: Google Maps 2018

