The 2003 Long Range Development Plan (LRDP) for the University of California, Irvine Medical Center (UCIMC) has been established to guide the physical development on the Orange campus through the LRDP horizon year 2003.

The LRDP provides a framework for future development so that academic, research and patient care goals of the institution can be achieved within a campus that is responsive to the needs of the community and is sensitive to the surrounding environment. A primary objective is to obtain community support for the plan.

The 1976 Long Range Redevelopment Master Plan, developed by Pereira and Associates, is the current operational LRDP for the Orange campus. This 2003 LRDP report builds on the 1976 Redevelopment Plan as well as other planning and feasibility studies. This report contains historical perspective, planning background, current conditions, and future plans for the Medical Center.

A program Environmental Impact Report (EIR) has been prepared, in conformance with the California Environmental Quality Act (CEQA), to analyze the effect of the LRDP on traffic, parking, air, water, drainage, soil, etc.
HISTORY of UCI HEALTH SCIENCES

UCI College of Medicine

The UCI College of Medicine was founded in Anaheim, California in 1896 as a college of Osteopathy. Over the next century, many transformations to the organization including name, location, affiliation and accreditation changes, helped to shape the College to what it is today.

By 1920, the College of Osteopathic Physicians and Surgeons, as it was named, was located near Los Angeles County Hospital where it produced about 100 doctors annually. Soon after, in 1922, Osteopathy became legally recognized as a distinct medical profession. Throughout the 1920’s and 1930’s, the College continued to expand its clinical and educational programs and in 1936, a graduate school was established offering both master’s and doctoral degrees.

In 1961, the name was changed to the California College of Medicine (CCM), an accredited medical school affiliated with the Association of American Medical Colleges. In 1962, efforts for unification between the California Osteopathic Association (COA) and the California Medical Association (CMA) that were in progress for several decades, finally resulted in AMA recognition of CCM with accreditation and approval of its four-year program. Later, amendments to the Osteopathic Act placed all M.D.’s in California under one medical board of examiners.

In 1965, the ninth University of California campus opened in Irvine (incorporated in 1970) and California College of Medicine became affiliated with UC as a medical department. Two years later, in 1967, the medical school was relocated to the UCI campus and became administratively responsible to the University of California.
UCI Medical Center

From the beginning, the College sought to build a teaching hospital on campus; however a government-sponsored study indicated a surplus of 2,800 hospital beds in Orange County, and construction of a new hospital was considered politically and financially unwise. In 1968, the University entered into a long-term affiliation to operate Orange County Medical Center, located thirteen miles from the UCI campus in the city of Orange, and eight years later, in 1976, the University of California purchased the medical center.

For the past 25 years, UCIMC has provided invaluable service for the community. Because of its history as a county facility, UCIMC has been the hospital of last resort for the uninsured population, providing more indigent care than any other area hospital. UCIMC has also played an integral role in the development of the CalOptima model, an entity created to move Medi-Cal beneficiaries from fee-for-service Medi-Cal into managed care. Even with the financial issues associated with prevailing patient care for the indigent population, UCIMC has continually provided outstanding service in primary care, specialty care, and diagnosis and treatment of complex medical conditions and injuries.
Louis Gluck, one of the fathers of modern neonatal medicine.

Surgeon Richard Ott performed the first heart transplant in Orange County history at UCI Medical Center.
Figure 3: UCI Medical Center (Circa 1976)
PLANNING BACKGROUND

1976 Long Range Redevelopment Master Plan

The Long Range Redevelopment Master Plan, prepared in 1976 by Pereira and Associates, is the current operational LRDP for the Orange campus.

Key elements of the plan include:

- Distinct land use zones with ambulatory services at the front of the site for convenience and accessibility.
- Creation of a pedestrian spine around a cluster of buildings.
- Improved vehicular circulation with a loop road system.
- Parking outside the loop and near the uses they serve.
- Consolidation of inpatient services to fewer buildings.
- De-intensification of use of the oldest buildings with construction of new, highly flexible building types to house those users requiring the most intensive space.

The plan proposed 800,000 gross square feet (gsf) to be developed in six phases. This represented a net increase of 283,810 gsf over that which existed in 1976. To date, de-intensification has been minimal.
1981 Master Plan Update

L.A. Pesch and Associates performed a planning study in 1981 to address issues such as traffic, circulation, material movement, and phasing. This study proposed to develop a modular building system at the center of the site that would provide incremental development along well-defined circulation spines. This would tie together the zones established by the Redevelopment Master Plan. The Diagnostic Services Center (DSC), Medical Library, and Magnetic Resonance Imaging (MRI) building were built on this concept. This plan, however, was not formally adopted.

Figure 5: UCIMC Aerial Photo (Circa 1982)
Recent Projects

Since 1987, physical planning for the UCI Medical Center has focused on implementing capital projects such as the Pavilions, the Cancer Center, the Neuropsychiatric Center, the Southwest Parking Structure and most recently with the UCI Health Sciences Laboratory Facility. In addition to new facilities, infrastructure improvements and minor capital projects have occurred to improve site conditions and fulfill the goals of the 1976 Long Range Redevelopment Master Plan and its subsequent refinements.

Refer to Section 3 for future concepts and goals of the Long Range Development Plan.