

Stanford School of Medicine Space Master Plan Principles and Policies 1/17/2018

VISION

Provide flexible, adaptable, and affordable facilities to accommodate the changing science and medicine goals in support of our mission: to be a premier research-intensive medical school that improves health through leadership, diversity, and a collaborative approach to discovery and innovation in patient care, education, and research.

	<p>PRINCIPLE = DRIVER We want to....</p>	<p>POLICY = ENABLER How we get there....</p>
<p>Equitable Space Allocation</p>	<p>1. Promote collaboration, enhance productivity, and increase the effective activity level within spaces. 2. Encourage cooperative use of space. 3. Facilitate interaction among School of Medicine and University communities. 4. Provide a transparent, flexible, efficient and equitable space allocation system. 5. Consider economic efficiency in the allocation of space. 6. Promote optimal use of space/resources to allow for growth of meritorious programs.</p>	<p>A. Implement the Master Plan using the faculty space model, funding metrics, headcount and space guidelines. Apply space guidelines and the faculty space model to the use and renovation of existing buildings and the programming and design of new buildings. (See chart of spaces type guidelines). B. Optimize availability of shared and scheduled work spaces, equipment rooms, and meeting rooms. C. Purge obsolete assets, equipment, and samples to optimize space. Move to electronic filing to minimize storage of paper, freeing space for people and their mission-related activities. D. Organization units shall establish a space policy that meets the needs of the unit and the School of Medicine. Allocation of space by organizational units will be initially evaluated by two utilization metrics: (MTDC \$ + IDCR \$)/Research NASF; and Total Department Headcount/100 NASF Total Department Space. Provide 4 years for new faculty to meet space utilization expectations. Re-allocate underutilized or underfunded space. E. Space Committee shall review organizational unit space allocations annually to evaluate utilization, funding, vacancy and potential reassignment to organizational units or the School of Medicine. This will include an annual review of the organizational units in the quartile with the lowest utilization rates, and request for organizational unit action plans within 90 days to improve space utilization. Consideration will be given to space constructed with funding from organizational units.</p>
<p>Contingent Space</p>	<p>7. Facilitate recruitment of outstanding scientists and the development of exceptional early career scientists, and new programs. 8. Make a fair and equitable distribution of benefits and burdens associated with space/resource responsibilities of the School.</p>	<p>F. Based on D and E above, organizational units may retain underutilized space for 2-3 years, and shall not exceed 5% of the organizational unit's total space. Underutilized space held outside this timeline or above this amount shall be subject to return to the School's central pool for re-allocation. Organizational units can appeal to the Space Committee to review space decisions. G. Based on D and E above, organizational units can retain space based on an approved plan and demonstrated progress. H. The School of Medicine shall maintain a pool of vacant space available in a central pool for re-allocation. When organizational units are relocated to new spaces, the vacated spaces revert back to the Dean for re-allocation. I. Office of Facilities Planning and Management shall be informed of and track all interdepartmental loans, and report periodically on these loans to the Space Committee. Interdepartmental loaned space should be returned upon agreed time frame if space is needed for recruits or programs, and the loaning organizational unit is utilizing their space based on D and E above.</p>
<p>Community</p>	<p>9. Maximize the amount of research and education space on the main campus. 10. For off-campus locations, ensure critical mass, a scholarly community, and include strong links to main campus. 11. Provide clinical faculty academic work space near their clinical activities. 12. Accelerate highly innovative science and a successful academic culture.</p>	<p>J. For off-campus space, consider administration groups, new program incubators, science requiring large specialized equipment, and cores and service centers as appropriate. K. The School of Medicine and the hospitals will annually review the anticipated workspace needs for clinical faculty.</p>
<p>Space Design & Planning</p>	<p>13. Design spaces to integrate across missions as appropriate. 14. Create an environment that supports the needs and productivity of the occupants.</p>	<p>L. The School of Medicine will design buildings for flexibility to accommodate the trend of integrated work. M. The School of Medicine will plan space adjacency for groups based on compatibility and affinity as appropriate and feasible. N. The School of Medicine will provide amenities as a part of site development, including wellness and lifestyle spaces, daycare, and food services as appropriate and feasible.</p>