

Date: August 14, 2018
To: Faculty and Staff of the Department
From: Laura Roberts, M.D., Chair *LR*
Victor Carrion, M.D, Vice Chair *VC*
Brian Donnellan, M.B.A., Associate Chair for Finance and Operations *BD*
RE: Space Allocation

Dear Colleagues:

The growth of the School of Medicine and our two on-campus affiliated academic hospitals has been phenomenal – it is exciting to see the expansion and increasing impact of Stanford Medicine. Our own portfolio has grown dramatically, too. The Department now has laboratories, clinics, offices, and dedicated activities in more than 40 locations in the Bay Area. This distribution, and our anticipated further expansion, creates new opportunities to consider the strategic location, co-location, growth, and allocation of our faculty and the Department’s mission-based programs.

The School of Medicine engaged in a substantive space master planning process and distributed formal space guidelines in FY15 (https://lbre.stanford.edu/cap_plan/documents/workspace-size-standards). The guidelines attempted to accomplish several objectives: more equitable distribution of space, greater capacity to respond quickly (“contingent space”) to new opportunities, promotion of the academic culture, and optimal design and utility of space. In addition, the School created new guidelines allowing for more remote work/telecommuting possibilities, which may be adopted for certain professional activities.

As part of this vision, in FY15 the School’s master planning committee built a more formal review process for space allocation. This review is conducted annually with each department. The review is, in essence, an annual defense and renegotiation of departmental space. This review relies heavily on formal metrics as described below. It may be helpful to remember that the School requires that each department pay for research space through reductions in its central operating budget amount each year. Clinical space in academic buildings, such as 401 Quarry, is handled differently, with support provided from the two hospitals.

We are a large department with clearly demonstrable excellence across our missions. We use our space very efficiently overall, and we have made many efforts to live within our “footprint” – even with our remarkable growth in the past few years. Overall, we do very well on the measures used by the School in evaluating space utilization. One metric is a ratio of research revenues in relation to total research square feet (specifically, (MTDC\$ + ICDR\$)/Research NASF). The second is a ratio of our number of faculty, staff, and trainees in relation to our Department’s total square feet (specifically, Total Department Headcount/100 NASF Total Department Space). In our discussions with the Dean’s Office, we have been able to emphasize the fact that most of our clinical activities occur in our academic offices (unlike all other clinical departments) and that our part-time faculty share offices – further indications of our dedicated efforts to use our space judiciously.

So, the “good news” is that we should be able to defend our space allocation (including space committed to us that we have not yet deployed). In recent discussions with the Dean’s Office and the hospitals, we have asked for a considerable expansion of our current space. We will keep you posted on the status of this request.

With the ever-increasing demand for our clinical services, our new education programs, and the wonderful success of our investigators, the Department has worked steadily on how best to respond to the space constraints that we face. One solution has been to view in a positive way our “cozy quarters” that foster close collaboration and dynamic inter-professional work. Another solution has been to place our faculty in many different locations beyond our main building at 401 Quarry Road. Wide geographic distribution sometimes makes it difficult for our Department to have a unified identity and a cohesive academic culture, but this distribution also allows for greater impact, better access to needed scientific resources, and broader participation across the Stanford community. It is important that we continue to think about how our space constraints shape our work and to try to engage with space allocation/geographic distribution strategically rather than passively.

You will recall that in 2011, a departmental workgroup was convened to develop recommendations for the allocation of space within the Department of Psychiatry and Behavioral Sciences. The workgroup’s recommendations were reviewed by the chair and associate chairs, the Clinical Executive Committee, and the senior staff leadership of the Department. These recommendations were distributed to the faculty for discussion in 2012, and revised then, and more recently, in light of suggestions and comments.

The Departmental guidelines for space allocation are carefully reasoned and are, we would say, very predictable. The core principles include: part-time faculty office sharing; faculty priority for windowed offices; space aligns with faculty rank and role to the extent possible; the protection of space for new faculty recruitments. Retired and retiring faculty members will need to share, lessen and/or relinquish their space. Mentored students or faculty must live within the space envelope of their mentors or sponsors (which may include Division Chiefs). Consideration of space assignments will be made in relation to where faculty, trainees, and staff spend the majority of their time. More space will be allocated to programs with additional funding and expanding research commitments; less space will be allocated to programs with reductions in funding or narrowing research commitments. Certain education and group-based activities of the Department may be moved to alternative locations, such as the new academic and research corridor being developed by Stanford Medicine on Page Mill Road/Porter Drive and the new Stanford Redwood City Campus. Finally, space that can be used for clinical, research, or education purposes must not be utilized for paper file storage. Investigators should explore and embrace electronic data capture and to the extent possible phase out paper data collection. Existing paper files should be reviewed for relevance and moved off site, digitized, or destroyed.¹

Strategically, in the long term, we are also trying to co-locate offices in relation to programmatic logic and adjacencies to help advance the work of the Department. For this reason, we may begin discussions with faculty regarding the relocation of their existing space allocations. In keeping with the master plan

¹ Record retention policies vary by funding source. Please see Stanford University Policy on record retention at <https://doresearch.stanford.edu/research-administration/record-retention#-record-retention-reference-guide> and <https://doresearch.stanford.edu/policies/research-policy-handbook/conduct-research/retention-and-access-research-data>. Please also check the terms and conditions of any signed agreement with the sponsor for additional details.

for Stanford Medicine, office renovations and cubicle reconfigurations may be undertaken so that we can get more offices and cubicles in our existing space.

Please note that ALL space requests *effective immediately* will require formal review and will no longer be handled through individual negotiations with the DFA, members of the senior staff team, or through informal negotiations with fellow faculty members.

The purpose of these guidelines is to advance the academic achievement and contributions of our faculty, to fulfill the academic program commitments of the Department and its divisions, and to strengthen the academic culture of our Department overall. The aim is to be fair and to have no surprises. In adopting this approach, the Department aims to ensure our ability, now and in the future, to fulfill our five interdependent academic missions of advancing science, clinical innovation and service, educational excellence, community commitment and engagement, and leadership and professionalism and to assure administrative and financial excellence in the conduct of the Department.

Over the coming months, we will welcome many new faculty, new staff, and new trainees, so a small number of office moves will occur immediately. We have asked for an updated analysis according to the metrics noted above and for a careful audit of the utilization of space in 401 Quarry Road and 1520 Page Mill Road because we must accommodate new recruits. We would like to see community-based programs shift to sites that are more accessible to the community, and we will begin discussions with new and established programs regarding eligibility for off-campus locations. We are working on ways to incentivize this off-site growth and we are interested in talking with you about these ideas.

Brian Donnellan and members of the senior staff team, along with your division chiefs or other leaders, as appropriate, will be talking with you about the sequence of moves that we envision over the next many months. In addition to these conversations, please let us know if you have any questions – and thank you in advance for your forbearance as the move plan is implemented.

Again, thank you for your citizenship in relation to the use of the resources in the Department.