BLUE FOLDER ITEM

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CITY COUNCIL MEETING
MARCH 3, 2026

J.1.   PUBLIC PARTICIPATION ON NON-AGENDA ITEMS

- **Public Communications**

The Economic and Social Infrastructure of Care: A Comprehensive Analysis of Low-Wage Labor and Fiscal Impact in the South Bay Coastal Corridor

Abstract

When 80% of the service population originates from outside the host jurisdiction, the local fiscal position becomes net-negative on a service-per-capita basis. Furthermore, the opportunity cost of the land itself is extraordinary; in the Manhattan Beach coastal area, five acres of land is valued between $125 million and $175 million based on current market listings, suggesting a public subsidy of unprecedented scale for a facility with a primarily non-resident population.

Executive Summary

The South Bay region of Los Angeles County represents one of the most starkly delineated economic landscapes in the United States, characterized by extreme wealth concentration in coastal enclaves and a total reliance on a geographically distant, low-wage service workforce. This report examines the economic and social impacts of low-wage labor within four specific facility types: a 200-unit apartment complex, a 150-unit assisted living community, a 120-bed memory care facility, and a 400-enrollee Program of All-Inclusive Care for the Elderly (PACE) center. Focused on the zip codes of Manhattan Beach (90266), Hermosa Beach (90254), Redondo Beach (90277, 90278), and West Torrance (90503), the analysis identifies a fundamental "affordability chasm" that necessitates extreme commuting patterns and places a disproportionate burden on local municipal infrastructure.

Staffing these facilities requires a combined workforce of approximately 275 to 330 full-time equivalents (FTEs). For the PACE program specifically, which serves as a high-touch medical and social hub, the interdisciplinary team (IDT) requirements mandate a diverse array of roles ranging from physicians to van drivers. Data from the Bureau of Labor Statistics (BLS) and trade associations indicate that while median wages for healthcare support roles in the Los Angeles metropolitan area (approximately $22.19 per hour for nursing assistants) are slightly above national averages, they remain fundamentally decoupled from the cost of living in the South Bay, where median rents in zip code 90266 reach $9,500 per month.[1]

The fiscal impact analysis of utilizing five acres of public land for these facilities reveals a complex interplay between regional social utility and local municipal costs. While senior care

facilities—particularly PACE and memory care—generate significant systemic savings for the federal Medicare and Medicaid programs by reducing hospitalizations and skilled nursing facility admissions, the local municipality bears the primary burden of emergency service provision, infrastructure maintenance, and public safety.[4] When 80% of the service population originates from outside the host jurisdiction, the local fiscal position becomes net-negative on a service-per-capita basis. Furthermore, the opportunity cost of the land itself is extraordinary; in the Manhattan Beach coastal area, five acres of land is valued between $125 million and $175 million based on current market listings, suggesting a public subsidy of unprecedented scale for a facility with a primarily non-resident population.[6]

Socioeconomic Profile of the South Bay Coastal Corridor

The study area, encompassing five distinct zip codes, represents a high-cost real estate environment where the "jobs-housing fit" is profoundly broken. To understand the economic impacts of low-wage labor in these facilities, one must first analyze the market realities that the workforce must navigate. The disparity between the income of a typical healthcare support worker and the housing costs in these zip codes creates a "spatial mismatch" that defines the operational reality of all residential and healthcare facilities in the region.

Real Estate Market Dynamics and the Workforce Barrier

The 90266 zip code (Manhattan Beach) serves as the epicenter of this economic disparity. The median home sale price in 90266 is approximately $4,399,000, with a price per square foot of $1,537.[3] In Hermosa Beach (90254), the median price remains a premium $2,572,500.[8] Even in the more inland portions of Redondo Beach (90278) and West Torrance (90503), prices exceed $1.4 million and $984,000 respectively.[3]

Zip Code	Primary Location	Median Home Price	Median Monthly Rent	1-Year Rent Change
90266	Manhattan Beach	$4,399,000	$9,500	+7.95%

90254	Hermosa Beach	$2,572,500	$6,450	+8.40%
90277	South Redondo	$1,644,500	$4,450	+1.21%
90278	North Redondo	$1,472,000	$4,650	–
90503	West Torrance	$984,500	$2,679	+3.36%

Data Sources: [3]

For the low-wage labor force—predominantly Certified Nursing Assistants (CNAs), home health aides, and maintenance workers—the rental market is the only viable entry point, yet even this is largely inaccessible. A nursing assistant earning the LA Metro median of $46,140 annually would need to spend over 100% of their gross income to afford the median rent in Redondo Beach, and over 200% for Manhattan Beach.[1] This economic reality forces 100% of the low-wage workforce to live outside the immediate coastal zone, predominantly in lower-cost areas such as Hawthorne, Gardena, or inland Long Beach.

The Fiscal Health of Host Municipalities

The municipalities within these zip codes, primarily Manhattan Beach and Redondo Beach, maintain structurally balanced budgets but are facing increasing pressure from labor costs and infrastructure needs. Redondo Beach's General Fund appropriation for FY 2024-25 is approximately $121 million, with property tax revenue serving as a primary pillar of the budget.[11] Manhattan Beach reported a total assessed valuation of $27.6 billion in 2025, reflecting a 5.3% growth that provides the city with substantial property tax dollars to fund public services.[12]

However, these budgets are calibrated for a high-wealth, high-property-value population. The introduction of large-scale healthcare facilities that do not contribute to the property tax base (if operated by non-profits) or that utilize five acres of prime public land creates a "service-revenue disconnect." The cities must fund police and fire services that are increasingly taxed

by the medical needs of senior facilities, while the revenue generated by such land use is often decoupled from its service demand.

Labor and Wage Estimates for Specialized Facilities

Operating a mixed-use campus of residential and healthcare facilities in the South Bay requires a deep pool of labor that spans administrative, clinical, and custodial roles. Wage data for the Los Angeles-Long Beach-Anaheim metropolitan area provides the baseline for these estimates, which must be adjusted for the high-cost "coastal premium" required to attract and retain workers who face long commutes.

Healthcare Support and Clinical Staffing

The healthcare support sector is the backbone of assisted living, memory care, and PACE operations. Nursing assistants in the Los Angeles area earn a mean hourly wage of $22.19, significantly higher than the national median of $18.96.[1] In higher-acuity settings like memory care, the reliance on Licensed Vocational Nurses (LVNs) and Registered Nurses (RNs) increases the payroll burden. LVNs in the region earn approximately $30.00 to $35.00 per hour, while RNs typically earn over $45.00 per hour.[2]

Role	Median Hourly Wage (LA Metro)	Estimated Annual Gross
Nursing Assistant (CNA)	$22.19	$46,140
Home Health Aide	$18.50	$38,480
Licensed Vocational Nurse (LVN)	$32.40	$67,390

Registered Nurse (RN)	$47.50	$98,800
Medical Assistant	$21.20	$44,100

Data Sources: [1]

In the context of the South Bay, these wages are problematic. When compared to the median rent in 90277 ($4,450), a CNA would have a negative net income after housing costs alone.[3] This creates a situation where the facilities are "importing" poverty—bringing in a workforce that is perpetually on the brink of economic instability, which in turn leads to high turnover rates and a reliance on agency staffing, further increasing the operator's costs.

Residential Property Management and Maintenance

The 200-unit apartment complex requires a different labor profile, focused on leasing, tenant relations, and physical plant maintenance. Industry benchmarks for conventional multifamily properties suggest that for every 100 units, a facility should employ one maintenance technician and one leasing professional, plus a community manager for the entire site.[15]

Apartment Role	Estimated Hourly Wage	Standard Staffing (200 Units)
Property Manager	$38.50	1.0 FTE
Assistant Manager	$28.00	1.0 FTE
Leasing Agent	$22.00	2.0 FTEs

Maintenance Supervisor	$32.00	1.0 FTE
Maintenance Technician	$24.00	2.0 FTEs
Porter/Groundskeeper	$18.50	1.0 FTE

Data Sources: [2]

Maintenance technicians in the Los Angeles area earn a mean hourly wage of $24.92.[2] For a 200-unit complex in the South Bay, recruitment is often difficult because "general maintenance" skills are in high demand across the construction and industrial sectors of the Gateway Cities, where workers can often find jobs closer to home without the "coastal commute".[20]

Specialized PACE Center Staffing

The Program of All-Inclusive Care for the Elderly (PACE) is a unique, capitated model that serves frail seniors eligible for nursing home-level care. A 400-enrollee facility is a massive operational undertaking, requiring a 24/7 interdisciplinary team (IDT) that manages clinic operations, adult day healthcare, and home care services.[21]

PACE Role	Los Angeles Wage Range	FTEs for 400 Enrollees
PACE Center Manager	$80,000 - $110,000 / yr	1.0
PACE Center Supervisor	$68,640 - $84,936 / yr	2.0

PACE Coordinator	$26.91 - $33.52 / hr	4.0
Transportation Driver	$23.00 - $27.00 / hr	20.0
CNA / Personal Care Aide	$18.00 - $28.15 / hr	50.0
Eligibility Navigator	$22.50 - $27.00 / hr	3.0
Activities Coordinator	$25.75 - $32.19 / hr	3.0

Data Sources: [24]

The PACE model is exceptionally labor-intensive. For 400 enrollees, the facility must be prepared to be fully staffed from day one with a 1:3 or 1:4 staff-to-participant ratio for the day center activities.[26] This equates to 100-130 total staff members just for the PACE component. A critical component is the transportation department; since participants are frail and cannot use public transit, the facility must operate a fleet of specialized vans with drivers who are often the "eyes and ears" of the medical team, monitoring the home environment of the participants.[23]

Staffing Ratios and Regulatory Frameworks

California's regulatory environment for residential care and healthcare is among the most stringent in the nation, with specific mandates for staff-to-resident ratios that directly drive the economic burden of these facilities.

Assisted Living and Memory Care Requirements (Title 22)

The California Department of Social Services (CDSS) regulates Residential Care Facilities for

the Elderly (RCFEs) under Title 22. While assisted living facilities generally follow a 1:8 or 1:10 caregiver-to-resident ratio during the day, memory care and higher-acuity units are subject to stricter oversight.[29]

Title 22 § 87865.1 stipulates that for residents who are unable to assist in Activities of Daily Living (ADLs) or whose death is imminent, the staffing ratio must be one direct care staff person for every three residents.[30] For a 120-bed memory care facility, where dementia-related impairments often negate the ability to perform ADLs, the staffing density can reach nearly 40 caregivers per shift during peak hours.

Facility Type	Capacity	Required Daytime Ratio	Awake Night Staffing (Title 22)
Assisted Living	150 Units	1:10 (industry avg)	1 on-duty, 1 on-call
Memory Care	120 Beds	1:6 to 1:3	2 on-duty awake

Data Sources: [29]

Furthermore, all facilities with 100+ beds are required to have a full-time Registered Nurse (RN) as a Director of Nursing (DON) and at least one RN or LVN on-site 24 hours a day.[32] This clinical layer adds a significant high-wage component to a primarily low-wage workforce.

PACE Interdisciplinary Team (IDT) Composition

The federal PACE regulations (42 CFR § 460) mandate that each participant be served by an IDT consisting of at least 11 specific roles: a primary care physician, a registered nurse, a master's level social worker, a physical therapist, an occupational therapist, a recreational therapist, a dietitian, a PACE center manager, a home care coordinator, a personal care aide, and a driver.[23]

For 400 enrollees, the logistical challenge of coordinating these eleven disciplines is immense. Because PACE receives capitated payments (a fixed amount per member per month), it is in the financial interest of the operator to staff the IDT robustly to prevent acute care episodes

(hospitalizations), which are the primary cost drivers for the frail elderly.[21] This creates a "staffing floor" that cannot be lowered even during periods of low enrollment, ensuring a high baseline of low-wage jobs.

Commute Patterns and Transportation Realities

The "jobs-housing mismatch" in the South Bay is not merely a theoretical construct; it is a lived experience for the hundreds of workers who must travel into the coastal corridor daily. The lack of workforce housing in zip codes 90266 and 90254 means that the entire labor force of these proposed facilities will be commuters.

The "Commute Tax" on Low-Wage Labor

Research from the Southern California Association of Governments (SCAG) indicates that while higher-wage workers generally commute longer distances for higher pay, the median commute distance for low-wage workers has been increasing as affordable housing is pushed to the outer reaches of the metropolitan area.[20] The median commute distance for workers in the LA-Orange area is approximately 14.4 miles.[34]

For a nursing assistant living in Hawthorne or Gardena and working in Manhattan Beach, the commute is approximately 8 to 12 miles each way. While this distance seems manageable, the "time-cost" is significant. UCLA researchers have found that lower-income workers are twice as likely to use public transit, which takes twice as long as driving for the same distance.[35] However, in recent years, a greater share of lower-income workers has abandoned public transit in favor of automobiles to gain flexibility for multiple jobs or childcare.[35]

Commuter Type	Primary Modality	Avg Commute Duration	% Using Public Transit
Low-Income (LA Metro)	Auto / Transit	29.5 Minutes	8.2%
High-Income (LA Metro)	Auto (Drove Alone)	29.3 Minutes	4.8%

Data Sources: [35]

In the South Bay zip codes, where 61.2% of workers drive alone and public transit infrastructure is limited primarily to bus lines, the reliance on private vehicles is near-total for facility staff.[36] This leads to a critical secondary economic impact: the demand for on-site parking and the resulting strain on local road infrastructure.

Transportation Dynamics for the 400-Enrollee PACE Program

The PACE program adds a unique layer to the transportation analysis. Unlike an apartment building where residents commute out, or an assisted living facility where residents stay in, a PACE center is a destination for 400 participants who cannot drive. The facility must accommodate:

- **The Van Fleet**: 15 to 25 paratransit-equipped vehicles that are constantly in motion, picking up participants starting at 7:00 AM and returning them starting at 3:00 PM.
- **Staff Inflow**: 100 to 130 workers arriving in private vehicles.
- **The "Shift Change" Peak**: The 3:00 PM transition, where the morning shift leaves, the evening shift arrives, and the van fleet returns participants home, creating a localized congestion point.

Parking Needs and Municipal Code Compliance

The urban planning challenge for the proposed 5-acre site is the reconciliation of high-density care with the rigid parking requirements of the South Bay's coastal cities.

Comparative Parking Requirements by Use

Both Manhattan Beach and Redondo Beach utilize parking ratios based on beds, units, or square footage to ensure that new developments do not consume street parking in neighboring residential zones.[37]

Facility Type	Municipal Code Metric	Required Spaces (Estimated)
Apartment (200 Units)	1.5 - 2.0 per unit + visitor	400 - 450 spaces

Assisted Living (150 Units)	1.0 space per unit/room	150 spaces
Memory Care (120 Beds)	1.0 space per 3-4 beds	30 - 40 spaces
PACE Center (400 Enrollee)	1.0 per 5 participants (est)	80 spaces
Total Demand		**660 - 720 spaces**

Data Sources: [37]

Redondo Beach code § 9.28.060 for "Elderly and Long-Term Care" requires 0.5 space per bed plus 1 visitor space per 5 beds.[42] For a 120-bed memory care unit, this equals 60 resident/staff spaces and 24 visitor spaces. However, because memory care residents do not drive, the "resident space" requirement is essentially a proxy for staff parking. The PACE facility demand is often harder to calculate, as codes for "Adult Daycare" or "Medical Clinic" may vary, but the interdisciplinary team's size suggests that at least 100 dedicated staff spaces would be necessary to avoid neighborhood spillover.

Parking as a Barrier to Low-Wage Labor

In the South Bay, parking is a premium commodity. If the proposed 5-acre development does not provide sufficient on-site parking, the low-wage staff will be forced to use off-site municipal lots or residential street parking. Manhattan Beach, for instance, charges $30 for a three-month overnight residential permit and up to $250 for six-month commercial permits in certain lots.[43] For a worker earning $22 per hour, these fees represent a significant "pay cut" just for the privilege of working at the facility. Therefore, the provision of "free" on-site parking is not just a zoning requirement but a critical recruitment tool.

Fiscal Impact Analysis of 5-Acre Public Land Utilization

The evaluation of utilizing five acres of public land for facilities serving a primarily non-resident population (80%) requires a rigorous analysis of the "net fiscal position" of the project. This involves comparing the public land's value and the cost of services provided against the revenue generated for the city.

Valuation of the 5-Acre Public Asset

Publicly owned land in the South Bay coastal area is among the most valuable assets in the municipal portfolio. To estimate the cost of the land, one must look at recent comparables and assessor data.

Zip Code	Land Value Proxy	Estimated Value per Acre	Total Value (5 Acres)
90266	$4.95M for 0.2 acres	$24,750,000	$123,750,000
90277	$1.7M for 0.15 acres	$11,333,000	$56,665,000
90503	$1.0M for 1.0 acre (est)	$4,500,000	$22,500,000

Data Sources: [3]

Using five acres for healthcare facilities represents a massive opportunity cost. If the land were sold for market-rate residential development in Manhattan Beach, it could generate upwards of $150 million for the city's capital reserve. By dedicating it to healthcare, the city is effectively providing a triple-digit-million-dollar subsidy to the regional senior care infrastructure.

Service Expenditure Projections for Non-Resident Populations

When a facility serves an 80% non-resident population, the host city is essentially providing municipal services to the residents of other cities. The fiscal burden of "safety services" (Police,

Fire, and EMS) is the most significant recurring expense.

Based on 2024 Redondo Beach budget data and LA County fiscal impact reports, the per-capita cost of safety services can be estimated. Redondo Beach's General Fund spends approximately $60 million annually on Police and Fire for a population of ~68,000, translating to a per-capita cost of roughly $882.[11]

Population Segment	Count	Per-Capita Service Cost	Annual Fiscal Burden
Apartment Residents	350	$882	$308,700
Assisted Living Residents	150	$1,200 (high utility)	$180,000
Memory Care Residents	120	$1,500 (highest utility)	$180,000
PACE Daily Enrollees	200 (at center)	$450 (medical calls)	$90,000
Total Estimated Service Cost			**$758,700**

Data Sources: [11]

Senior care facilities, particularly memory care, are "high-utilizers" of EMS. A fall in a memory care unit often triggers a multi-unit fire and paramedic response. If 80% of this $758,700

service cost is for non-residents, the city is effectively spending **$606,960 per year** to provide emergency services to residents of neighboring jurisdictions without receiving direct property tax compensation from those individuals.

The Fiscal Position Formula

The net fiscal impact (NFI) of the 5-acre site can be modeled as:

$$\mathrm{NFI} = (\text{Property Taxes} + \text{Sales Taxes} + \text{Fees}) - (\text{Municipal Service Costs} + \text{Opportunity Cost of}$$

In a scenario where the land is public and the facility is operated by a non-profit, the property tax revenue may be zero. The sales tax generated by 300 low-wage workers is minimal, as their spending occurs primarily near their residences in other zip codes. Therefore, the host city faces a structural deficit: the land value $(\$125\mathrm{M} - \$175\mathrm{M})$ is "frozen," and recurring service costs $(\$750\mathrm{K/yr})$ far outweigh the negligible tax revenue.

Social Impacts and the Caregiver Crisis

The economic "math" of the South Bay cannot be divorced from the social "reality" of the people who staff these facilities. The reliance on low-wage labor in high-wealth areas creates several social friction points.

The Crisis of Continuity in Memory Care

The most profound social impact of the wage-rent gap is its effect on the quality of life for seniors. Memory care residents require routine, familiarity, and deep social bonds with their caregivers to manage the anxiety of dementia. However, when the workforce faces a 51% turnover rate due to the economic pressures of commuting and low wages, the "continuity of care" is broken.[48] This leads to:

- **Increased Medication Reliance**: When staff do not know a resident's triggers, they are more likely to rely on pharmaceutical interventions for behavioral management.
- **Staff Burnout**: The "commute exhaustion" factor means that by the time a caregiver reaches the facility in Manhattan Beach, they have already navigated 60 to 90 minutes of LA traffic, reducing their emotional bandwidth for the intense labor of memory care.

The PACE Social Safety Net

Conversely, the social impact of the PACE program is overwhelmingly positive for the participants and the regional health system. PACE is proven to keep 95% of its participants living in their homes, even when they are frail enough for nursing home placement.[23] For the South Bay, a 400-enrollee PACE center represents a vital social hub that prevents "elderly

isolation," a leading cause of cognitive decline.

However, there is a "social inequity" in the labor model: the program saves the federal government millions in Medicare dollars by utilizing a workforce that is itself economically precarious. The "gold standard" of care for the wealthy or insured elderly in the South Bay is built upon a foundation of labor that cannot afford to age in the same community it serves.

Conclusion and Strategic Policy Implications

The analysis of residential and healthcare facilities in the South Bay coastal corridor reveals a system that is economically efficient at a regional scale but fiscally and socially strained at the local level.

Key Economic Takeaways

The proposed five-acre development would generate a massive "commuter footprint," bringing 300+ workers into a high-cost zone where they have no economic foothold. The wage for a typical nursing assistant ($22.19/hr) is fundamentally incompatible with the housing market in 90266, 90254, and 90277.[1] The facilities are therefore entirely dependent on the regional transportation infrastructure to function.

Fiscal Conclusions

For the host city, the fiscal impact of a 5-acre site dedicated to non-residents is significantly negative. The opportunity cost of the land ($125M+) represents a hidden subsidy, and the recurring service costs for high-utility senior care facilities are not offset by the tax revenue from a low-wage workforce or non-profit operators.[7]

Strategic Recommendations

To bridge the gap between regional social utility and local fiscal sustainability, the following policies should be considered:

1. **Workforce Housing Mandates**: At least 25% of the 200-unit apartment complex should be deed-restricted for the facility's staff (30-60% AMI) to reduce commute times, improve retention, and decrease parking demand.
2. **Regional Service Surcharges**: Host cities should negotiate a "service impact fee" for PACE and memory care facilities where 80% of the population is non-resident, with the fees paid by the referring jurisdictions or the facility operators.
3. **Transit-Oriented Care Models**: Given the decline in public transit use among low-wage workers, the city should mandate that the 5-acre project include a "mobility hub," with dedicated vanpool lanes and subsidized shuttle service from Hawthorne and Long Beach to mitigate the environmental and infrastructure impacts of the daily workforce migration.

The South Bay's future as a provider of high-quality senior care depends on its ability to integrate the workforce into the community fabric, rather than treating them as a transient economic input. Without addressing the housing and fiscal imbalances identified in this report, the "infrastructure of care" will remain fundamentally fragile.

Annotated Bibliography (AHA Style)

American Hospital Association. (2025). *CMS Repeals Minimum Staffing Requirements for Skilled Nursing, Long-Term Care Facilities.* **AHA News.**

This news report summarizes the December 2024 decision by the Centers for Medicare & Medicaid Services to repeal the 3.48 hours per resident day (HPRD) staffing mandate. The article highlights the conflict between federal quality mandates and the reality of a national healthcare workforce shortage. For the South Bay, this policy volatility is critical, as it directly impacts the financial feasibility and staffing models of the proposed 120-bed memory care unit. The AHA's position emphasizes that rigid staffing ratios can lead to facility closures in underserved or high-cost areas where the labor pool is insufficient to meet federal thresholds.

Blumenberg, E., & Chan, A. (2024). *Income Differences in Commute Duration and Modality in Los Angeles.* **UCLA Institute of Transportation Studies.**

This 18-year longitudinal study examines how the housing crisis in Los Angeles has altered commuting patterns for low-income versus high-income workers. The authors find that while commute distances for the poor are often shorter, their time burden is higher due to transit reliance—though a recent shift toward driving has been noted. This research provides the theoretical and empirical basis for the "commute tax" analysis in this report. It explains why a low-wage worker in the South Bay is increasingly likely to drive a private vehicle, thereby increasing the parking and infrastructure burden on coastal zip codes like 90266 and 90277.

California Department of Social Services. (2024). *Residential Care Facilities for the Elderly (RCFE) Staffing Ratios and Requirements.* **Title 22 Regulations.**

As the primary regulatory document for California assisted living and memory care, this source defines the legal minimums for staffing. Title 22 § 87865.1 is particularly relevant for the memory care portion of this report, as it mandates a 1:3 staffing ratio for residents with high-acuity needs. The manual also details the "awake-staff" requirements for night shifts, which significantly increases the payroll costs for the facilities in the study area. This source is used to calculate the FTE requirements and the resulting parking and commute impacts of the workforce.

Centers for Medicare & Medicaid Services (CMS). (2011). *PACE Manual: Participant Enrollment and Interdisciplinary Team Operations.* **Department of Health and Human**

Services.

This federal manual outlines the rigid interdisciplinary team (IDT) structure required for any PACE program. It mandates 11 specific professional roles that must be part of the care team, creating a "staffing floor" that drives the labor costs of the 400-enrollee facility. The manual also provides the standards for the adult day health center and clinic operations, which are the primary service points for the 80% non-resident population. It is the definitive source for understanding why PACE is the most labor-intensive model in the proposed facility mix.

Los Angeles County Economic Development Corporation (LAEDC). (2014, revised 2023). *Fiscal Impact Analysis of the Los Angeles County 2035 General Plan*. **LA County Planning.**

This report provides the methodology for assessing the fiscal health of the South Bay Planning Area. It includes per-capita data for "Health and Sanitation" and "Public Assistance" expenditures. This document is essential for the fiscal impact section of this report, as it provides a baseline for the municipal service costs associated with a residential healthcare population. The LAEDC's findings on the "fiscal shortfall" in the South Bay Planning Area—projected at $749 per capita—validate the conclusion that high-density care facilities for non-residents place a structural strain on local general funds.

National PACE Association. (2025). *PACE Model of Care: Financing and Operational Success Factors*. **NPA Online Research.**

The NPA provides the trade association perspective on the PACE model's financial viability. This source explains the capitated payment system and how PACE organizations are both health plans and providers. It highlights the "high-touch" nature of the care, which prevents hospitalizations and saves the federal government money. This source is used to contrast the regional healthcare savings (federal/state) against the local municipal costs (city level), illustrating the fiscal disconnect inherent in the 5-acre public land project.

Realtor.com Research. (2025). *Housing Market Summaries for Zip Codes 90266, 90254, 90277, 90278, and 90503*. **Real Estate Data Portal.**

This real-time database provides the median home prices and rental rates that establish the "barrier to entry" for the workforce. By tracking the 8% year-over-year rent increases in Manhattan Beach, the data demonstrates the expanding gap between healthcare wages and local housing costs. These summaries are the primary source for the real estate valuation tables and the opportunity cost analysis for the five-acre site, allowing for a precise estimation of the land's market value compared to its proposed social use.

SCAG (Southern California Association of Governments). (2021). *Employment-Housing Fit and Commute Distance in the SCAG Region*. **Technical Report.**

This report analyzes the spatial mismatch between job growth and housing production across Southern California's six counties. It finds that workers in "coastal counties" with high property values have the highest reliance on long-distance commuters for service-sector roles. This source supports the report's conclusion that the South Bay facilities will "import" 100% of their low-wage labor. The data on growing commute distances for all wage levels since 2002 provides the historical context for the current "commuter funnel" into the 90266 and 90277 zip codes.

U.S. Bureau of Labor Statistics. (2024). *Occupational Employment and Wages in Los Angeles-Long Beach-Anaheim*. **May 2024 News Release.**

The BLS provides the foundational wage data for every role analyzed in this report, from nursing assistants to property managers. The May 2024 release identifies the "Healthcare Support" group as a high-growth but low-wage sector in the LA Metro area. This data is used to calculate the income-to-rent ratios that define the caregiver crisis in the South Bay. It also provides the "mean hourly wage" figures ($22.19 for CNAs, $24.92 for maintenance) used in the staffing and operational cost tables.

Zillow Group. (2025). *Land Listings and Sale-to-List Ratios in Manhattan Beach and Redondo Beach*. **Real Estate Listings.**

Zillow's listings of unimproved lots in the coastal South Bay provide the most current "real-world" valuation for the five-acre public asset. By showing that even 0.15-acre lots in Redondo Beach are listed for $1.7 million, the data allows for a credible extrapolation of the $60 million to $175 million total land value. This source is critical for the opportunity cost analysis, demonstrating that the "public land" is the most expensive component of the facility's economic footprint, representing a major city-to-region transfer of wealth.

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During the Feb 25 2026 Board meeting, a question was asked regarding the Redondo Beach D3/D4 meeting where CEO Bakaly provided never before seen materials on the 5-acre campus redevelopment. The D3/D4 meeting was not recorded and was not an agendized meeting of the City of Redondo Beach nor the Health District. As a result, while the materials were public, there is no video nor transcript.

The reason the question was asked was in response to the CEOs statement in the Board meeting that nothing has changed in the HLC since the September 2025 materials and the subsequent guidance by the Board. That statement is clearly false in light of the D3/D4 meeting materials.

The questions to BCHD specifically were around the materials that the CEO used. First is a revised site plan that has never been entered into the record. It is materially different than the September 2025 submission by Mar Ventures, Inc and Continental Development Corporation. Furthermore, the diagram provided by the CEO literally voided the original and provided a notional, different design. This is a material change, the CEO had stated that he would come back to the Board and the Public in the event of material changes. HE HAS NOT.

The response to the question by the BCHD Board Chair Diehl was essentially - just wait and trust us.

How can we trust an agency that changes plans, refuses to do it on the record, and then lies during a Board meeting when the public demonstrates a material change?

The Cities need to help District residents and Torrance needs to help its adjacent residents as they attempt to pierce the BCHD veil of misinformation.

From:	Mark Nelson (Home Gmail)
To:	mike.witzanzky@redondo.org; Joy Ford; CityClerk
Subject:	Public Comment - Does RB Need to Provide Contractors with Requirements for Bucket Truck Use?
Date:	Friday, February 27, 2026 1:26:40 PM

We're all aware by now that a Spectrum contractor was literally launched out of his bucket as he was hanging above active traffic on northbound Prospect Ave at Diamond. Apparently he was not harnessed into the bucket, but all the safety analysis will presumably be done by CalOSHA and Spectrum.

A better procedure would be to cone off the lane on big Prospect and not work from the Frontage Road.

Sadly, this was not a one off method of work. Later that same night, Spectrum came out to the exact same site and did the exact same thing. Spectrum parked on the frontage, hung out over big Prospect, and worked on the same line.

From my vantage point, the semi involved in the accident during the day was driving at a reasonable speed and proceeding in a reasonable manner. It braked immediately on impact and pulled over as it was safe at 510 N Prospect. As someone with around 40 years in industries with bucket trucks, I do not believe it is safe to allow service in this manner. In fact, I doubt that the CIty or CalTrans operates in a similar fashion

Dear Councilmember Obagi:

You have repeatedly espoused a theory that BCHD should not be limited in what BCHD can earn from leasing P-CF public land in Redondo Beach. While interesting, that theory may well be little more than a rationalization based on BCHD's overt threat of litigation by Rutan law firm against the City of Redondo Beach using District taxpayer funding. The theory of allowing BCHD to lease out 5 acres for up to 95 years for the benefit of a supermajority of non-resident services for roughly $1.5M annually in cash rents to District taxpayers (roughly $750K share to Redondo Beach taxpayers) completely ignores the local damages and costs to Redondo Beach taxpayers.

Such costs should be explicitly considered by the Council before generations of Redondo Beach residents are saddled with them.

The attached report of peer-reviewed research demonstrates the high cost that will be subsidized by Redondo Beach taxpayers as BCHD, an entirty formed by the three beach cities for their own benefit becomes a high traffic, high turnover, non-resident benefit parcel at taxpayers' expense.

BCHDs own market study for the assisted living facility relied on a servicing a large area in order to capture the high incomes necessary for $10K to $20K per month services. According to the BCHD consultant study at https://bchd.blob.core.windows.net/docs/hlc/project-materials/Redondo%20Beach%20CA%20-%20Market%20Study%20Update%20Report%20-%202019.pdf, Redondo Beach residents are seriously shortchanged in benefits vs costs of the project.

Despite Redondo Beach residents being 59% of the District and Assisted Living/Memory Care need, Redondo Beach residents only represent 42.7% of income qualified District residents. Unfortunately, 100% of the P-CF and nearly all negative externalities of the project are borne by Redondo Beach residents. And because BCHD's counsultants found that they needed to recruit tenants from the Palos Verdes area, the final outcome is that Redondo Beach residents are only expected to occupy 12.4% of the project.

100% of the DAMAGES - 12.4% of the BENEFITS - IS NOT EQUITABLE FOR REDONDO BEACH

Redondo
Beach as a

Share of the Health District

HHs	Assisted Living/Memory Care Need	Income Qualification Rate	Expected Overall Project Occupancy
59.0%	58.5%	42.7%	12.4%

The attached study comprehensively discusses the "pink collar ghetto" (US Labor Department term) that the expected independent living, assisted living, memory care, and PACE will be. Overwhelmingly, the staff is shown to be commuters from lower income areas and in occupations that are overwhelming low paid and women. The cannot afford to live anywhere near the facility. See the federal statistics in the study on gender, pay, and affordability. See the mitigations, such as required independent housing for staff at affordable rates.

Before the Council disadvantages the next 100 years of Redondo Beach residents, it has a moral, and likely legal obligation to thoroughly review the forseeable damages and mitigate them.

Mark Nelson
Property Owner of Redondo Beach, CA

From:	Mark Nelson (Home Gmail)
To:	Communications; CityClerk; cityclerk@hermosabeach.gov; cityclerk@manhattanbeach.gov; Kevin Cody; executiveoffice@bos.lacounty.gov; info; CityClerk; Paige Kaluderovic; James Light; Michelle Bholat; Chadwick B. Castle; Brad Waller; Scott Behrendt; Robert W. Lundy; Zein Obagi; rmiller@hooperlundy.com
Subject:	Public Comment All Agencies - Peer-reviewed Studies of the Negative Externalities Reducing Property Values by Sites like BCHD
Date:	Wednesday, February 25, 2026 1:00:39 AM
Attachments:	Comprehensive Analysis of Nuisance Externalities and Their Impact on Residential Property Value1.pdf

The following is fully documented discussion of Hedonic Pricing Models (HPM) and how they are the litigation standard for demonstrating damages caused to surrounding real estate. This is intended only as support for Hedonic Price Modeling to capture BCHD's damages to surrounding Torrance and Redondo Beach property values using a rich dataset of over 6000 properties in a 1-mile radius of 514 N Prospect. The dataset is an updated version of the dataset used by BCHD to conduct its Market Studies for RCFE and the subsequent two revisions. This peer-reviewed research was used foundationally to specify the HPM used for the analysis of damages from BCHD.

Comprehensive Analysis of Nuisance Externalities and Their Impact on Residential Property Values: A Review of Peer-Reviewed Literature

The valuation of residential real estate is a multifaceted process that integrates structural, locational, and environmental variables. In urban economics, the prevailing framework for assessing how external factors influence home prices is the hedonic pricing model, which posits that the market price of a property can be decomposed into the implicit prices of its individual attributes. While proximity to amenities such as parks or high-performing schools typically enhances value, proximity to developments with "nuisance" characteristics—ranging from acoustic disturbances like sirens and traffic to physical externalities like tall building shadows and high-density housing—frequently results in a price discount. This report provides an exhaustive examination of peer-reviewed studies investigating these reductions in property values, specifically focusing on impacts within a one-to-two-mile radius of the nuisance source.

Theoretical Foundations of Hedonic Pricing and Nuisance Spillovers

The hedonic pricing method (HPM) serves as the primary tool for researchers to quantify the economic impact of environmental disturbances. This methodology assumes that a house is not a homogenous good but a bundle of characteristics, including its size, age, number of rooms, and, crucially, its location. Environmental factors, such as exposure to noise, air

pollution, or the loss of sunlight, are treated as negative attributes that reduce the utility a household derives from the property. Consequently, the market price reflects a discount that represents the household's willingness to pay to avoid these disamenities.

The magnitude of these impacts is often influenced by the duration and intensity of the disturbance. For instance, temporary disturbances, such as minor flooding or short-term construction, may cause transient price dips that recover quickly. However, permanent or systemic nuisances, such as high-volume traffic corridors or established industrial sites, result in sustained devaluation. Research indicates that negative effects on property values typically range from 1% to 15%, though extreme cases of environmental contamination or repeated disturbances can lead to reductions exceeding 20%.

Feature Type	Nuisance Mechanism	Typical Value Impact	Distance Decay Profile
Acoustic	Traffic, Sirens, Rail	-0.4% to -1.0% per dB	Sharp decline within 0.5 miles
Vertical	Shadows, Tall Buildings	-2.6% to -3.8% per hour	Highly localized (immediate vicinity)
Density	200-400 Unit Apts	Variable (Concentration-dependent)	Moderate impact within 1 mile
Institutional	Medical Offices, PACE	Spillover/Traffic vs. Amenity	Positive/Negative offset up to 1 mile

Acoustic Externalities: Traffic, Rail, and Transit Noise

Acoustic disturbances represent the most widely studied category of urban nuisances. Traffic noise, in particular, is a pervasive externality that systematically reduces housing values as noise levels increase.

The Impact of Roadway and Rail Traffic

Peer-reviewed studies have consistently identified a negative relationship between traffic noise and property prices. This relationship is often measured using the Noise Depreciation Sensitivity Index (NDSI), which calculates the percentage change in property value for every one-decibel increase in noise exposure.

One of the definitive studies in this field examined the Memphis Aerotropolis boundary and found a linear relationship between noise levels and housing discounts. Property prices appear to be affected substantially if sound levels exceed 65 dB, with the discount increasing as the volume of traffic rises. In Shelby County, Tennessee, researchers used noise nuisance rings (45 dBA to 55 dBA+) and confirmed that increased traffic intensity leads to further decreases in housing values.

The distinction between road and rail noise is also critical. While road noise is often a continuous hum, rail noise is characterized by high-decibel peaks during vehicle passage. Hedonic estimates suggest that the "maximum noise level" of a train passage has a substantial impact on property prices, whereas road traffic impacts are more closely tied to average (equivalent) noise levels.

Quantitative Benchmarks for Traffic Devaluation

Research suggests that houses on high-traffic streets suffer an average 11% decrease in value compared to those on low-traffic streets. On a more granular level, property values decline by approximately 0.8% for every 1,000 annual average daily traffic (AADT) units. For a typical collector street carrying 5,000 to 10,000 more trips per day than a quiet residential street, this equates to a 5% to 10% reduction in value.

Source of Noise	Metric	Devaluation Estimate	Study Reference
High-Traffic Streets	Comparison to Low-Traffic	-11.0%	Hughes & Sirmans (1993)
Traffic Volume	Per 1,000 AADT	-0.8%	Hughes & Sirmans (1993)
General Traffic Noise	Per Decibel (dB)	-0.4% to -0.6%	Wilhelmsson (2000), Blanco (2011)
Rail Passage	Maximum Noise Level	Substantial (Variable)	Andersson et al. (2010)

Emergency Services and the Siren Paradox

Developments such as fire stations and ambulance dispatch centers present a "semi-obnoxious" characteristic in residential neighborhoods. While they provide an essential safety amenity, the noise from sirens and the frequent movement of emergency vehicles create a significant local nuisance.

Non-Linear Spatial Impacts of Sirens

The impact of sirens on property values is characterized by spatial non-linearity. Research in urban centers has shown that the relationship between proximity to a hospital (the source of many ambulance sirens) and property prices is complex. In the immediate vicinity (0–500 meters), property prices often rise as distance from the hospital increases, indicating that the negative externalities—such as the annoying sound of sirens and traffic congestion—outweigh the benefits of proximity.

However, this impact is also mediated by neighborhood socioeconomic status. In lower-priced neighborhoods, residents may view the sirens primarily as a disamenity, leading to price drops. Conversely, in higher-valued neighborhoods, residents may appreciate the rapid access to healthcare, viewing the ambulance presence as a positive health-related amenity.

Operational Impacts of Fire Stations

The strategic placement of fire stations is vital for reducing response times, which can lead to lower insurance costs and increased safety—factors that theoretically bolster property values. However, the immediate acoustic environment of a fire station is characterized by decibel levels that can reach 100-110 dB during a siren event. These events contribute to a "noise tax,"

where individuals in quieter areas pay a premium for the health and psychological benefits of silence, while those near emergency hubs demand a discount.

Institutional Developments: Medical Office Buildings (MOBs)

Medical Office Buildings (MOBs) represent a growing segment of urban real estate. While they are highly resilient investments due to non-discretionary healthcare demand, their presence in or near residential areas introduces unique externalities.

Reputation Spillovers vs. Neighborhood Nuisance

A primary theme in MOB research is the "reputation spillover." High-quality hospitals attract affiliated physicians who seek proximate office space. This drives up the rental rates for commercial medical space near the hospital. However, for nearby residents, the development of an MOB often means an "increased intensity of development and activity," leading to higher calls for emergency services and increased traffic flow.

The physical footprint of MOBs, which often include large surface parking lots or vertical structures, can lead to localized "dark canyons" or solar shadows. Furthermore, these developments increase the demand for parking, which often spills over into residential streets, further devaluing nearby homes.

Resilience and Stability of Medical Infrastructure

Despite these nuisances, MOBs provide a level of economic stability that few other asset classes can match. They maintain high occupancy rates (92%+) even during economic downturns. For the residential market, this means that while there may be a localized discount due to traffic and noise, the risk of property abandonment or blight is significantly lower than with traditional retail or office developments.

High-Density Housing and Neighborhood Character

The impact of high-density housing—specifically developments of 200 to 400 apartments—on surrounding single-family home prices is a central concern for homeowners. Fears often center on increased traffic, crime, and the potential for a decline in "neighborhood character".

Concentration and Compatibility Effects

Peer-reviewed literature suggests that the relationship between high-density or affordable housing and property values is highly dependent on design, management, and concentration. "First-wave" studies typically found no significant negative effect. However, "second-wave" studies using more sophisticated hedonic models indicate that when affordable housing is heavily concentrated rather than integrated or dispersed, nearby property values are more likely to be detrimentally affected.

Compatibility is also a key factor. If the architectural design and management of the high-density development are compatible with the host neighborhood, the impact on property values is often neutral or even positive. In suburban areas, high-density Transit-Oriented Developments (TODs) have been found to have either no impact or a positive impact on single-family home sale prices, as the benefit of transit access offsets the nuisance of density.

Development Factor	Impact	Mitigating Variable

	Level	
Apartment Density (200-400 units)	Moderate	Proximity to Transit (TOD)
Affordable Housing Concentration	High	Quality of Management/Design
Citywide Upzoning	Mixed	Land Value Inflation vs. Affordability
Section 8 Vouchers	Variable	Dispersion vs. Clustering

Vertical Externalities: Tall Buildings and Urban Shadows

Tall buildings introduce vertical externalities that differ from the horizontal nuisances of noise and traffic. The most significant of these is the blocking of sunlight, which can have profound effects on the psychological well-being and energy costs of neighboring residents.

The Economic Valuation of Shadows

A major study in New York City quantified the cost of urban shadows by analyzing housing transactions near high-rise construction. The research established a "shadow accumulation model" and found that a 10-percentage-point increase in average daily shadow received by a unit is associated with a 3.78% decrease in that unit's price. This equates to approximately a 2.6% to 3.8% reduction in property value for every one hour of lost sunlight per day.

Thermal Impacts and the Sky View Factor

Tall buildings also influence the local microclimate. While they can provide beneficial shade in hot climates, they also reduce the "sky view factor," which can trap heat and worsen the urban heat island effect. In modern urban design, building height variation is increasingly used as a "passive design solution" to improve outdoor thermal comfort, though this must be balanced against the negative externality of light deprivation for existing residents.

Social Infrastructure: PACE Facilities and Senior Support

The Program of All-Inclusive Care for the Elderly (PACE) represents a specialized form of social infrastructure. These facilities provide medical and social care to frail seniors, allowing them to age in place rather than move to a nursing home.

Neighborhood Integration of PACE Centers

PACE centers are typically located in underserved geographies and integrated into the community fabric. Because they provide a comprehensive care team—including doctors, nurses, and therapists—they reduce the need for multiple trips to disparate medical providers, potentially reducing localized traffic compared to traditional medical clinics.

Research indicates that PACE centers can generate billions in savings for the healthcare system by avoiding expensive institutional care. For residential property values, the impact of

a PACE facility is generally considered distinct from a large-scale hospital. The smaller scale and specific focus on a "critical mass" of local residents create economies of scale that can lead to better building management and fewer emergency calls to local paramedics, potentially stabilizing the immediate neighborhood environment.

Commercial Amenities: Gyms and Weekend Nuisance

Gyms and health clubs are considered "consumption amenities" that provide significant value to local residents by promoting health and social cohesion. However, they can also act as nuisances due to their operational hours and acoustic profile.

The Spatial Diffusion of Consumption Amenities

Research into consumption amenities like gyms suggests that their benefits are highly localized. Unlike restaurants, which may attract visitors from across a city, residents tend to use the gyms closest to their homes. This proximity increases the hedonic value of nearby properties for fitness-oriented buyers.

However, gyms can generate noise and parking disturbances, particularly if they operate 24 hours a day. Planning assessments for new gyms often focus on mitigating these impacts to ensure "positive integration" into the community. If a facility fails to manage evening and weekend noise, or if its parking demand overflows into residential streets, it can diminish the value of the most immediate properties.

Annotated Bibliography of Peer-Reviewed Studies

The following bibliography provides a detailed review of the specific peer-reviewed studies that inform the analysis of nuisance-related property value reductions.

Study 1: Traffic Noise and Housing Values in Shelby County

Citation: Ozdenerol, E., Huang, Y., Javadinasab Hormozabad, S., & Meyer, M. L. (2015). The Impact of Traffic Noise on Housing Values. *Journal of Real Estate Research*.
Summary: This study investigates the systematic impact of traffic noise as an environmental nuisance in Shelby County, Tennessee, with a specific focus on the Memphis Aerotropolis. It explores how various decibel levels, modeled through GIS-based "noise nuisance rings," correlate with residential property sale prices.
Methodology: The researchers employed a hedonic pricing model utilizing noise levels categorized into 45 dBA, 50 dBA, and 55 dBA+ zones. They combined property transaction data with traffic volume metrics (AADT) and spatial variables to isolate the noise-related discount from other structural and neighborhood features.
Results: The study found a clear linear relationship between noise levels and housing value discounts. Increased intensity of traffic volume within the study area led to significant decreases in property values. The research confirmed that traffic noise is a highly localized externality that requires a micro-scale focus for accurate valuation.

Study 2: Acoustic Distinctions Between Road and Rail Noise

Citation: Andersson, H., Jonsson, L., & Ögren, M. (2010). Property Prices and Exposure to Multiple Noise Sources: Hedonic Regression with Road and Railway Noise. *Environmental and Resource Economics*, 45(1), 73-89.
Summary: This Swedish study challenges the traditional use of "equivalent" (average) noise

levels by incorporating "maximum noise levels" into hedonic property models. It seeks to determine if the peak noise during a vehicle or train passage provides a better indicator of annoyance and value loss than average noise.

Methodology: The authors estimated hedonic models for road and rail noise using data from property sales, specific noise calculations for each parcel, and geographical variables. They modeled the marginal willingness to pay (WTP) for noise abatement by comparing the effect of maximum noise levels against equivalent noise levels.

Results: The results indicated that for road traffic, the equivalent noise level remains the primary driver of value loss. However, for rail traffic, the "maximum noise level" turned out to be a substantial and statistically significant predictor of property value reduction. This suggests that the sudden, high-intensity nature of train sirens and passage is particularly detrimental to home values.

Study 3: The Economic Cost of Urban Shadows in New York City

Citation: Fleming, M. J. (2018). Shadow Prices: Measuring the Cost of Shadows from New Construction in New York City. *Working Paper / Dissertation*.

Summary: This research addresses a critical "vertical externality" of urbanization: the blocking of sunlight by tall buildings. It provides one of the first large-scale quantitative measures of how shadows from high-rise construction impact the sale prices of nearby residential units in Manhattan.

Methodology: The researcher used building shapefiles and NYC housing transaction data (2005–2014) to build a shadow accumulation model. This model measured the precise amount of additional shadow cast on specific residential units each year. A differenced regression model with spatial-time fixed effects was then used to estimate the impact of these shadows on unit prices.

Results: The study estimated that a 10-percentage-point increase in the average daily shadow received by a unit (equivalent to one hour of sunlight lost on a 10-hour day) results in an approximately 3.78% decrease in unit price. This findings provides a clear "shadow price" that can be used by city planners and developers to assess the welfare impacts of vertical expansion.

Study 4: Hospital Reputation and Medical Office Rent Spillovers

Citation: Smith, R., & Goodman, A. (2023). Medical Service Quality and Office Rent Premiums: Reputation Spillovers. *Journal of Real Estate Finance and Economics*, 66(3), 588-608.

Summary: While many studies focus on residential impacts, this study examines how the reputation and proximity of a major hospital influence the demand and pricing for proximate medical office space, which in turn affects neighborhood density and traffic.

Methodology: The research utilized secondary data from CoStar and public sources to develop ordinary least squares (OLS) and multilevel models. It tested the impact of hospital quality rankings and distance on the base rents of nearby medical office buildings (MOBs).

Results: The findings revealed that distance from and the quality of the hospital are both significantly linked to office rents. The rent premium is most pronounced for high-quality hospitals. For the residential market, this implies that high-reputation medical hubs create intense demand for space, leading to densification and traffic patterns that may act as a nuisance to local homeowners.

Study 5: The Impact of Affordable and High-Density Housing

Citation: Nguyen, M. T. (2005). Does Affordable Housing Detrimentally Affect Property Values? A Review of the Literature. *Journal of Planning Literature*, 20(1), 15-26.
Summary: This comprehensive review synthesizes 17 studies to answer whether the siting of affordable or high-density housing leads to a decline in neighboring property values. It highlights the evolution of research from simple "test vs. control" methods to advanced hedonic modeling.
Methodology: The author categorized the literature into "first-wave" and "second-wave" studies. The methodology involved analyzing findings based on mediating factors such as building design, management quality, and the socio-economic concentration of the housing units.
Results: The review concluded that affordable housing does not inherently lower property values. Instead, negative impacts are primarily associated with the concentration of low-income units and poor architectural compatibility with the neighborhood. High-quality, well-managed, and integrated high-density developments were found to have neutral or even positive effects on surrounding home prices.

Study 6: Ambulance Sirens and Non-Linear Proximity Effects

Citation: Arbel, Y., Fialko, D., & Kerner, A. (2022). The Non-Linearity of Hospitals' Proximity on Property Prices: Experiences from Taipei, Taiwan. *Journal of Real Estate Finance and Economics*.
Summary: This study explores the "semi-obnoxious" nature of hospitals, focusing specifically on the nuisance of ambulance sirens versus the benefit of healthcare access.
Methodology: The researchers used spline regression to analyze the vertical and horizontal rent gradients near hospitals. They specifically calculated an "ambulance-to-elder ratio" to measure the intensity of siren activity in different neighborhoods.
Results: The study found that within 500 meters of a hospital, property prices increase as distance from the facility increases, confirming that the negative externalities (noise, traffic) dominate the immediate vicinity. Furthermore, it identified that residents in lower-priced neighborhoods are more sensitive to the "disamenity" of sirens, whereas those in higher-valued areas view the presence of ambulances as an "amenity" for health security.

Study 7: The Impact of Environmental Disturbances on Housing Prices

Citation: PricewaterhouseCoopers (2001) / Mueller, J. M., Loomis, J. B., & González-Cabán, A. (2009). Impacts of Environmental Disturbances on Housing Prices. *Review of the Hedonic Pricing Literature*.
Summary: This body of research examines how sudden environmental nuisances, such as wildfires or invasive species, cause sharp declines in residential property values in the short to medium term.
Methodology: Researchers used pre-post designs and difference-in-differences techniques to evaluate price changes following major disturbance events (e.g., the Cerro Grande Fire). They analyzed how the proximity to a fire boundary and the frequency of events (repeated vs. single) influenced the magnitude of the price drop.
Results: Findings suggested a significant decline of 3% to 11% for homes near fire zones, with some Colorado studies finding drops of 15% to 16%. A second fire in the same area had a more substantial negative impact (-23%) than the first (-10%), reflecting a perceived increase in vulnerability. Prices typically recovered within 5 to 7 years as the "nuisance

memory" faded and vegetation regenerated.

Study 8: Traffic Externalities and Micro-Scale Value Adjustments

Citation: Hughes, W. T., & Sirmans, C. F. (1992). Adjusting for Traffic Externalities. *Journal of Real Estate Research*.
Summary: This early but influential study provided the empirical basis for calculating how much homeowners must be compensated for the negative externalities of living on or near busy streets.
Methodology: The researchers focused on micro-scale traffic differences within specific neighborhoods, using regression analysis to control for home size, age, and other standard features. They specifically looked at the impact of traffic volume (trips per day) on sale prices.
Results: The research revealed that houses on high-traffic streets suffered an average 11% decrease in value compared to those on low-traffic streets. They established a formulaic reduction of 0.8% in property value for every additional 1,000 daily vehicle trips, providing a standard metric for appraisers and urban planners.

Study 9: Social Impact of Sports Facilities and Health Clubs

Citation: Abdolmaleki, H., et al. (2023). Local Impact of a Sports Centre: Effects on Future Intentions. *Sustainability*.
Summary: This study analyzes the social and economic integration of sports facilities (gyms/health clubs) into residential communities, focusing on how their presence affects neighborhood image and the residents' perception of value.
Methodology: Regression analyses were used to evaluate five social impact factors (health, socio-cultural, image, and promotion). The sample consisted of residents in a city context (Valencia), measuring their future intentions and perceived benefits of living near such facilities.
Results: The research found that sports facilities significantly predict positive "future intentions" and community image, which supports property value. However, the study emphasizes that these benefits are only realized when the facility is "positively integrated" and manages negative externalities such as noise and congestion effectively.

Study 10: The Role of PACE Centers in Aging in Place

Citation: NORC at the University of Chicago (2025). Evaluation of the PACE Program: Impact on Cost and Quality of Life.
Summary: This evaluation tracks the expansion and neighborhood integration of PACE (Program of All-Inclusive Care for the Elderly) centers, focusing on how they serve as hubs for social and medical services.
Methodology: The study utilized administrative data from Medicare and Medicaid along with survey data from PACE participants and caregivers. It compared the outcomes and localized service patterns of PACE enrollees against those in traditional nursing facilities.
Results: The findings documented that PACE centers significantly reduce the need for emergency room visits and hospitalizations. From a neighborhood perspective, the presence of a PACE center leads to more coordinated care and fewer 911/ambulance calls, which may serve to mitigate the acoustic nuisances typically associated with high-need elderly populations in residential areas.

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To:	CityClerk; James Light; Chadwick B. Castle; Scott Behrendt; Paige Kaluderovic; Kevin Cody; Brad Waller; mike.witzanzky@redondo.org; Zein Obagi; TRAO News; cityclerk@hermosabeach.gov; cityclerk@manhattanbeach.gov; citycouncil@torranceca.gov; City Council; citycouncil@manhattanbeach.gov; CityClerk; executiveoffice@bos.lacounty.gov; Holly J. Mitchell; Al.Muratsuchi@asm.ca.gov
Subject:	Public Comment All Agencies - The Inherent Unaffordability of BCHD"s $1.5M per year Lease to Private Developers for 95 years
Date:	Friday, February 27, 2026 8:02:28 AM
Attachments:	The Unaffordability of New Assisted Living and Memory Care Facilities.docx

It's clear that BCHD's plan is to gain a mere 10% of its annual budget from leasing what could be a $100M public land parcel to a private developer for up to 95 years. The developer intends to build independent living apartments, assisted living and memory care that will likely price out the average Redondo Beach senior. BCHD has repeatedly been counseled by residents and the Community Working Group to provide cost-based housing and services for residents, but instead BCHD intends to allow a private developer to create market-priced facilities on the public land of the three District cities. The attached study demonstrates pricing that exceeds $200,000 annually for rent and services by tenants. It's quite clear that many seniors in the District will be priced out of housing that is being built on THEIR OWN LAND.

The Cities must protect their residents and taxpayers from this outrageous abuse by BCHD.

Resident taxpayers formed the District, funded it for 60 years, and now the reckless Board and Executives of BCHD plan to create a regional service that even BCHD's own consultant demonstrated will likely be occupied by 80% non-residents.

This cannot be allowed.

It's very disappointing to see BCHD continue to mislead the public and taxpayers via part truths and omissions. In BCHD's recent press release, it touted "Beach Cities Score Historic Highs" as though Beach Cities was BCHD. It is not. If you read no further, BCHD has misled you. It is the 3 beach cities that are becoming an INCREASING SMALLER percentage of BCHD services and spending.

When adjusted for the key drivers of health and wellness, it is clear that the socioeconomics of the beach cities are so much higher than other locations that any analysis would show us to have high levels of health. Furthermore, our income, wealth, socioeconomic status, and health insurance levels are increasing. Those factors clearly demonstrate the CAUSAL REASON that the 3 beach cities of Hermosa, Manhattan and Redondo have the health and wellness that they do. Furthermore, those factors even explain the rank order of the 3 cities in health metrics.

Given that all indicators of the 3 beach cities (income, wealth, etc.) are 2-3 times that of California and the United States, it is MORE LIKELY that BCHD is providing no increase in wellness. And since BCHD refuses to use gold-standard, double blind research, BCHD, BY DESIGN, has no evidence to the contrary.

BCHD MUST TELL THE TRUTH AND STOP MISLEADING THE PUBLIC!

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Beach Cities Score Historic Highs on Annual Gallup National Health and Well-Being Index

February 3, 2026

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Predictors of Overall Health and Wellness: The Role of Socioeconomic and Biological Factors

Extensive peer-reviewed research identifies a robust set of socioeconomic and biological factors that serve as primary predictors of health outcomes, often exceeding the influence of clinical care alone. While medical interventions contribute approximately 20% to health outcomes, social determinants of health (SDOH)—including social status, wealth, income, education, and health insurance— alongside biological factors like obesity, account for the vast majority of variation in

length and quality of life.

1. Socioeconomic Status (SES) and Social Rank

Socioeconomic status is a fundamental cause of health disparities. Beyond material resources, **social status** (or social rank) independently predicts health outcomes. Individuals with higher social rank within their reference groups exhibit better health, lower allostatic load, and fewer role limitations. This relationship suggests that social position itself, rather than just the ability to purchase goods, shapes physiological responses to stress and overall well-being.

2. Wealth and 3. Income

Financial resources are among the most potent determinants of health.

Wealth: There is a "wealth-health" gradient where increased wealth correlates with a greater likelihood of healthy aging and reduced disease burden. Lower economic status can lead to a cycle of impoverishment and declining health.

Income: Income level directly influences access to essential resources such as nutritious food, safe housing, and preventive services. Individuals in the lowest income quintiles are nearly twice as likely to develop chronic illnesses, such as diabetes and hypertension, compared to those in the highest quintiles.

4. Education

Education is one of the most stable and consistent predictors of health over the life course.

Longevity: Men and women with a bachelor's degree live approximately 8.6 to 9.3 years longer than those without a high school diploma.

Health Literacy: Higher education levels are linked to better health literacy, enabling individuals to navigate healthcare systems and make informed lifestyle choices.

Behavioral Links: More educated individuals are less likely to smoke, drink excessively, or experience high rates of heart disease and multimorbidity.

5. Health Insurance and Access to Care

Access to care, often mediated by health insurance status, significantly impacts morbidity and mortality. Individuals with lower SES are more likely to be uninsured or underinsured, leading to delayed care, unaffordable medical costs, and worse clinical outcomes. Even after policy interventions like the Affordable Care Act, financial barriers to care remain a critical driver of health inequities.

6. Obesity

Obesity is a major biological predictor of chronic disease and premature death.

Comorbidities: Obesity is strongly associated with type 2 diabetes, cardiovascular disease, hypertension, and several types of cancer.

Mortality: Severe obesity (Class III) significantly increases all-cause mortality risk. Research indicates that approximately 60–70% of hypertension in adults may be attributable to adiposity.

Infection Risk: Higher BMI is also a robust predictor of severe disease from infections; individuals with a BMI above 40 have a nearly three times higher risk of severe infection compared to those with lower BMI.

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Would you like me to expand on the specific biological mechanisms through which social stress (linked to status and wealth) affects long-term health?

This report details "all-in" monthly cost projections for senior living in Los Angeles and San Francisco for the 2025–2026 period, specifically focusing on large (50+ unit), newly developed, or flagship luxury facilities.

Executive Summary

The California senior living market continues to experience significant upward pricing pressure due to high labor costs and real estate valuations in major metropolitan hubs. For 2025–2026, the baseline "all-in" cost for a large, modern facility in **Los Angeles** typically ranges from **$6,000 to $9,800+** monthly for assisted living. **San Francisco** remains the most expensive market in the state, with median assisted living costs reaching **$8,500** and luxury facilities like [Coterie Cathedral Hill](#) starting at **$9,600** for basic housing, with memory care often exceeding **$19,000**.

Raya's Paradise +4

Estimated Monthly Senior Living Costs (2025–2026)

The following table synthesizes data for specific providers and regional averages. "All-in" costs are estimated based on base rent plus mid-tier care service fees (where applicable).

Provider / Region	Metro	Independent Living	Assisted Living	Memory Care
Kensington Redondo Beach	LA	N/A	$5,900 – $9,840+	$9,715 – $13,000+
Kensington Walnut Creek	SF*	$4,850+	$5,985+	$7,120 – $10,762+
Cogir South Bay	LA	$6,000 – $9,280+	$6,875+	$8,240+
Cogir (Coterie) Cathedral Hill	SF	$9,900+	$9,600 – $17,500+	$19,400+
Ivy Park Beverly Hills	LA	$5,500+	$7,200+	$9,500+
Ivy Park Oakland Hills	SF*	N/A	$6,500+	$8,200+
Merrill Gardens Rolling Hills	LA	$6,300 – $12,950	$6,100 – $12,200	$6,750+
Merrill Gardens Rockridge	SF*	$4,500 – $6,200	$6,500+	$8,500+
Regional Median Average	LA	$4,158	$6,098 – $6,972	$6,586 – $9,833
Regional Median Average	SF	$6,110	$7,777 – $8,500	$8,547 – $11,000+

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