

April 19th & 20th, 2004

& The SmithGroup

## **WORKSHOP**

April 19th & 20th, 2004

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**FOLLOW-UP** 

the Office of the Architect & The SmithGroup

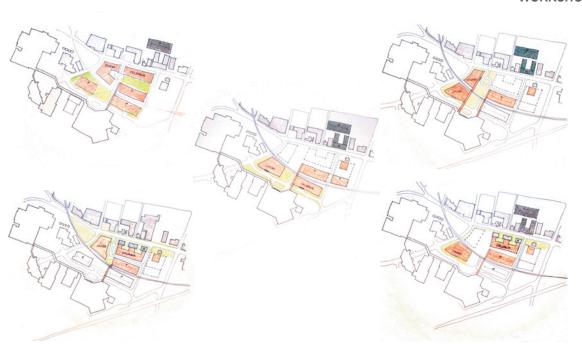
Revised Phasing of Area Plan

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# WORKSHOP SUMMARY REPORT

April 19th & 20th, 2004





# **SUMMARY REPORT**

Held April 19th & 20th, 2004

#### PARTICIPANTS:

#### Stakeholders:

Warren Boeschenstein, Professor, School of Architecture

Nick Carter, Chief of Health System Relations

Maurice Cox, Mayor, City of Charlottesville

Bob Dillman, Chief Facilities Officer, Facilities Management Department

Mark Doherty, Chief Housing Officer, Facilities Management Department

Dave Gipson, Director, Facilities Services, Medical Center

Cheryl Gomez, Utilities Director, Facilities Management Department

Sack Johannesmeyer, Director, FP&C

Judy Maretta, Hospital Director of Space Management

Gary O'Connell, City Manager, City of Charlottesville

Mary Joy Scala, Neighborhood Planner, City of Charlottesville

Jay Scott, School of Medicine, Finance

George Southwell, Health System Manager, Facilities Management Department

Jim Tolbert, Director of Neighborhood Development Services, City of Charlottesville

Becca White, Director, Department of Parking and Transportation

Ida Lee Wootten, Director Of Community Relations

#### **Specific Project Consultants:**

Carl Tewksbury, Kimley-Horn Associates -- South Connector

David White, Kimley-Horn Associates -- South Connector

Betsy Beaman, Stanley, Beaman & Sears -- Children's Medical Center

Veronica Pryor, Stanley, Beaman & Sears -- Children's Medical Center

Kimberly Stanley, Stanley, Beaman & Sears -- Children's Medical Center

#### **Working Group:**

William Rawn, William Rawn Associates Architects -- West Main Street Plan (1992)

Cliff Gayley, William Rawn Associates Architects -- West Main Street Plan (1992)

David King, SmithGroup -- Health System Area Plan Update

Phil Tobey, SmithGroup -- Health System Area Plan Update

Ignacio Bunster-Ossa, WRT -- West Main Street Plan (2004)

David Neuman, Architect for the University of Virginia

Mary Hughes, Landscape Architect for the University of Virginia

Connie Warnock, Assistant University Architect

Helen Wilson, Landscape Architect, Office of the Architect

Ryan Madson, Student Intern, Office of the Architect

#### **Senior Management Group:**

John Casteen, University President

Leonard Sandridge, Executive Vice President and Chief Operating Officer

Gene Block, Vice President and Provost

Tim Garson. Vice President and Dean. Medical School

Ed Howell, Vice President and CEO of Medical Center

Colette Sheehy, Vice President for Management and Budget

Yoke San Reynolds, Vice President for Finance



# **SUMMARY REPORT**

Held April 19th & 20th, 2004

## **WORKSHOP AGENDA:**

Activity	Facilitator/Participant  David Neuman			
Introduction				
Stakeholders' Objectives				
Hospital	Ed Howell, CEO			
City of Charlottesville	Maurice Cox, Mayor, City of Charlottesville			
West Main Study	Ignacio Bunster, WRT			
HSC Master Plan	Phil Tobey, Smith Group			
Children's Medical Center	Kimberly Stanley, SBS			
Cancer Center	Dave Gipson			
Medical Education	Jay Scott			
Traffic	Carl Tewksbury, Kimley-Horn			
Rawn West Main Study	Bill Rawn, William Rawn Associates			
Housing	Mark Doherty			
Parking	Becca White			
Utilities Infrastructure	Bob Dillman			
Discussion	David Neuman			
Work Session	Working Group			

Tuesday, April 20						
Activity	Facilitator/Participant					
Presentation Preparations & Set-up	Working Group					
Summary Report	Working Group & Stakeholders					
Senior Management Report	David Neuman & Senior Management Group					

Held April 19th & 20th, 2004

### **INTRODUCTION:**

### **Workshop Objectives**

presented by David Neuman, Architect for the University

Expansion of the hospital in coming years will involve properties within the medical precinct as well as those on West Main Street that are currently not part of the hospital. Foremost among the expansion projects is an outpatient cancer treatment center and a children's medical center consisting of three components or phases.

The purposes of the workshop were to:

- Engage the City of Charlottesville and their vision for redevelopment along the West Main Street corridor.
- Set the stage to evaluate the current draft area plan update and update it with additional consideration and relaxation of constraints.
- Set the stage to incorporate landscape design into the land use planning process.
- Set the stage for further internal evaluation and decision making.
- · Set the state to continue dialogue with the City.







# **SUMMARY REPORT**

Held April 19th & 20th, 2004

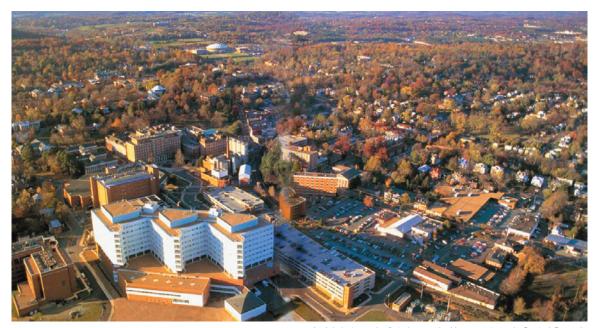
#### STAKEHOLDER ISSUES:

#### Hospitals

presented by Ed Howell, Vice President and CEO:

- An ever increasing demand for primary care has strained limited resources and facilities.
- Following a nationwide crisis in training programs and facilities, more physicians and specialists are needed, with corresponding spaces to house them.
- Surgery facilities are in intense demand; operating rooms are 95.5% utilized. Operating room and laboratory support capacity needs to increase.
- Hospitals are transforming from a mechanical organizational model, based around organs and organ systems, to a molecular model, focused on microbiology, at the cellular and sub-cellular levels.
- Cancer research and treatment is at the frontier of molecular medicine.
- Aging "baby boomers" are requiring more cancer treatment.
- The Medical Center's policy not to turn people away when beds are full, in combination with the aging "baby boomer" population, will one day overwhelm the system.
- Some functions can be moved out of the hospital building to make room for more beds.
- Planning for new facilities must consider connectivity with existing facilities.
- Adjacencies between research and treatment are desirable to strengthen the link between laboratory and bedside.

- As time is a scarce commodity, connectivity is essential for specialists at the Children's Medical Center, who need direct links to existing facilities.
- The Hospital is committed to appropriate and sensitive expansion on West Main Street.
- Current master plan addresses 12-15 years into future.
- Challenge to reconcile conflict between need for patient privacy and commercial interests on Main Street corridor.
- Success of Children's Medical Center relies on family support and family-centered treatment, including dining, convenient parking, and respite areas.



Aerial photograph of study area, looking west towards Central Grounds



# **SUMMARY REPORT**

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#### STAKEHOLDER ISSUES:

#### City of Charlottesville

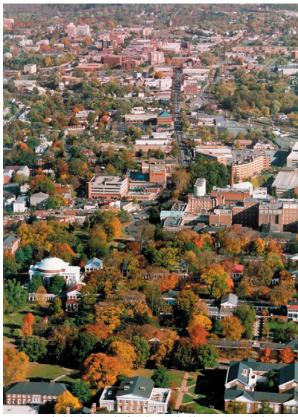
presented by Maurice Cox, Mayor, City of Charlottesville:

- Key issues on West Main Street are housing, transportation, mixed-use development, and protecting the tax base.
- The City's West Main Street vision incorporates mixeduse development to create a vibrant, borderless district between town and gown.
- Urban design on West Main Street is critical to its success, including the creation of a pedestrian friendly environment, protection of historic resources, and a variety of destinations in close proximity.
- The most recent zoning ordinance allows building at higher densities. (64 units/acre on south side of Main, 43 units/acre on north side)
- Loss of property tax revenues is a primary concern (City lost approximately \$2 million last year due to Health System growth). The City must address the continuation of erosion of the tax base.
- One solution to tax revenue loss is to allow street level business that generate revenue; this solution will enhance the mixed use character of West Main Street.
- Ground floor services should cater to health care workers, patients and families.

- Housing availability in the area is expanding, with 225 rental units coming online in 2005, south of the railroad station.
- Transportation is a critical issue, especially congestion and accessibility. The challenge is to decongest traffic without evicting automobiles, and to create dynamic places to walk.
- The City's goal for West Main Street development is that street life after 5PM will be as vibrant as during daytime business hours.



Housing south of the railroad station



Aerial photograph of study area, looking east towards downtown

# **SUMMARY REPORT**

Held April 19th & 20th, 2004

#### STAKEHOLDER ISSUES:

#### **Student Housing**

presented by Mark Doherty, Chief Housing Officer:

- There is a need for more undergraduate housing; however, graduate, faculty and staff housing is preferable along West Main Street.
- Large blocks of undergraduate student housing are impractical for West Main Street, because they are empty for the summer. Graduate and faculty housing can activate the area year-round.
- Housing on West Main Street has the opportunity to connect the street with adjacent neighborhoods.

### **Facilities Management**

presented by Bob Dillman, Chief Facilities Officer, Facilities Management Dept.:

- A new chilled water facility will be needed at Health Services.
- Heat supply and environmental compliance require cooperation with City and Virginia Dept. of Environmental Quality.
- Water and electric connections are in close proximity to proposed development on West Main Street.
- Sanitary sewerage will require careful planning and cooperation with City, due to tie-in with older, smaller city lines.
- Stormwater and sewage capacity must be addressed before proceeding with site planning.
- Stormwater compliance will be more difficult because the University does not own many of the properties in Moore's Creek drainage basin, which is downstream from the development area.



Parking garage on Lee Street

#### Transportation and Parking

presented by Becca White, Director, Department of Parking and Transportation:

- Current patient parking (approx. 1,000 spaces) is inadequate.
- There is a need for increased open space near entrances to accommodate emergency vehicle access and decontamination tents.
- There is also a need for wider (disabled) parking spaces, increased queuing space and on-street parking.
- A strategy is needed to shift the flow of workers leaving and arriving.
- Parking is a recruitment issue for the hospital.
- 70% of health system users park in the precinct.
- One inexpensive, near-term parking alternative would be more shuttle buses from Scott Stadium.
- Heightened coordination between the University and City is required to overcome this parking dilemma, (e.g. ridership programs for workers)



Parking is at a premium in the study area

# **SUMMARY REPORT**

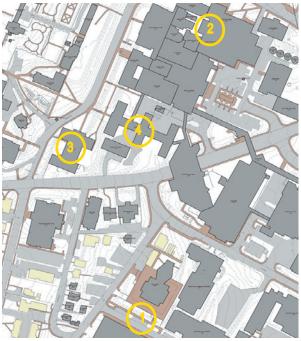
Held April 19th & 20th, 2004

#### STAKEHOLDER ISSUES:

#### **School of Medicine**

presented by Jay Scott, School of Medicine, Finance:

- · Sites for the Medical Education Building include:
  - 1. between Nursing and south garage
  - 2. in a renovated old medical school
  - 3. in Cobb Hall
  - 4. on the McKim site after it is demolished
- The Medical Education Building could be a 60–100,000 sq-ft education facility.
- · There is a critical need for high-tech classrooms.
- A \$12.5 million challenge gift has been given toward a new education building of approximately \$25 million cost.



Possible sites for Medical Education Building



Connectivity is key to any development in the area

#### **Cancer Center**

presented by Dave Gipson, Director, Facilities Services, Medical Center:

- The center will combine wellness and screening programs, chemotherapy and radiation treatments, and clinical trials.
   There is an inherent design challenge in addressing this spectrum of visitors for these functions.
- If located on West Main, maintaining a vital street life, through ground floor retail, will help create an environment of normalcy and calm anxieties of arriving visitors. Upper floors can be dedicated to clinical functions that provide intense levels of treatment.
- A retail component on the ground level would present a welcome front to the public, and could tie into a patient education facility.
- Dramatic changes in the cancer research field necessitate a flexible facility, to keep treatments current.
- The center needs an all-weather connection with the main hospital for patients, physicians and staff.



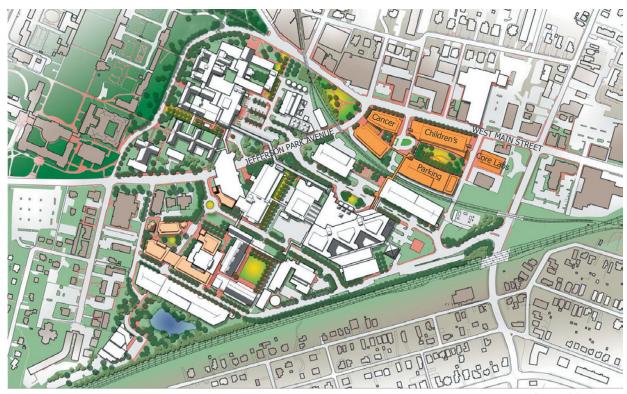
Held April 19th & 20th, 2004

#### PRECINCT PROJECTS REVIEW:

HSC Master Plan, 2004

presented by Phil Tobey, SmithGroup:

- Existing context of health system has limited green space and usable open space.
- The precinct is bounded by West Main Street on the north, 9th/10th Streets on the east, and the railroad tracks on the south; however, it lacks a defined boundary on the west side.
- Internal green and open space would focus on connectivity with West Main Street and as an amenity within the complex. These open spaces would provide opportunity for pick-up and drop-off locations.
- Realignment of JPA with West Main Street would create a more pedestrian friendly intersection and help define the site on the SE corner.
- A 1,000 car parking garage is needed to serve future development. Parking should be accessible without having to access from West Main Street.
- Chilled water facilities are needed for expansion in the area.
- The core-lab facility can be relocated to valuable new swing-space and allow for the hospital's expansion.



Proposed development

Held April 19th & 20th, 2004

#### PRECINCT PROJECTS REVIEW:

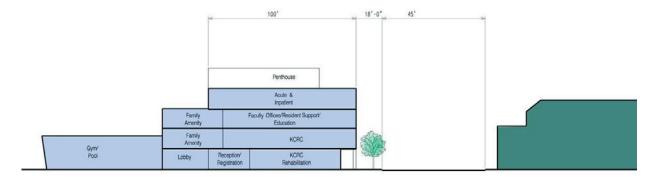
#### **Children's Medical Center**

presented by Kimberly Stanley, Stanley, Beaman & Sears:

- Image and access are key components of the Center's design to create the desired image of innovation.
- Facilities currently dispersed should be consolidated into the Children's Medical Center, with direct access to services at the main hospital.
- Space is required for both multi-disciplinary care and highly specialized research departments, serving children going to see specialists, and children with developmental problems.
- Space is required for children's outpatient care.
- The center will serve patients from the Kluge Children's Rehabilitation Center. Rehabilitation facilities include private outdoor spaces, and a swimming pool and gym.
- Public spaces and family amenities could relate to the retail and mixed-use goals of the extended precinct.
- Family needs would include café/dining with internet access, post office, toy store, and drug store. These amenities could be housed on the ground floor, along with rehab facilities, to avoid using the elevators.
- "Green" building design, with a focus on land, would create a nurturing atmosphere. Outdoor spaces could be used for play and therapy.
- · This facility must exceed ADA requirements to

- accommodate children with developmental problems who require wheelchairs and other assistance devices.
- Privacy/dignity issues must be considered when addressing entrances and access to facilities. A distinct entrance for staff is desirable.
- Should provide access for specialized transport on-site or nearby to accommodate families who arrive with wheelchair accessible vehicles. Designated drop-off and pick-up areas are desirable.
- Space requirements are: 172,000+/- sq ft; four to five floor building; 100' wide minimum dimensions, with 30 -32,000 sq ft per floor.





Proposed street section

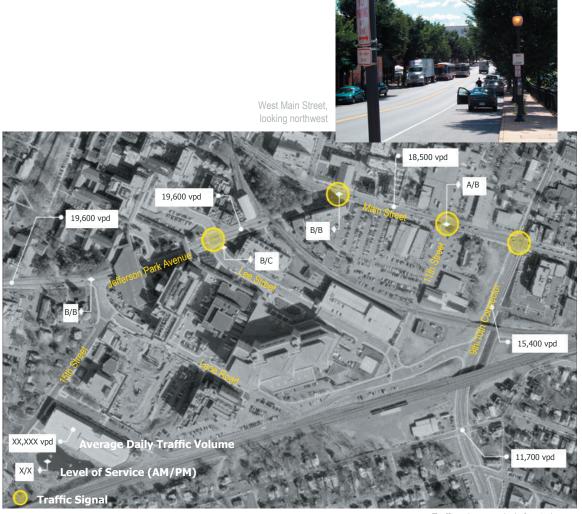


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#### PRECINCT PROJECTS REVIEW:

Traffic Studies, South Parking Garage Expansion & South Connector presented by Carl Tewksbury
Kimley-Horn Associates:

- A comprehensive traffic study of the entire area has not been done.
- JPA is reaching maximum congestion limits; the Maywood Connector is becoming more and more necessary to provide an alternate connection between JPA and Crispell Drive.
- The South Garage expansion (320 existing spaces + 100 new spaces) could be accompanied by intersection improvements at JPA and Lane Road, including installation of a traffic light.
- A traffic signal will eventually be needed at 9th/10th connector and Crispell Drive.
- West Main Street has multiple traffic impediments, including bikes and buses.
- A coordinated signal system would help congestion on JPA and West Man Street.
- Wayfinding along JPA and West Main Street needs to be addressed; there are 19,000 visitors per day on JPA alone.
- It is critical to build and maintain a multi-modal transportation system to accommodate pedestrians, bikes, buses and emergency access; perhaps in the new parking structure.
- It is important to understand the various user-groups of the transportation system, and their departures and destinations.







# **SUMMARY REPORT**

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#### PRECINCT PROJECTS REVIEW:

### West Main Street Study, 2003

presented by Ignacio Bunster-Ossa, WRT

- The length of area studied is one mile, approximately twice the length of the downtown mall.
- The study proposed a 25 foot expansion of the sidewalk area on the south side of the street, which would create a promenade and allow dining and services to engage the sidewalk.
- An infill of mixed-use buildings would increase density and help define an edge to Main Street.
- The study sought to create a new scale to enhance pedestrian activity and optimize the proportional relationship between street width and building height. The building height on the downtown mall was used as a model.
- A 110' height limit on select sites would allow an uninterrupted view from Monticello to the Rotunda. Building heights could increase towards the hospital.
- It was proposed that 10th Street, and other side streets, should be used to take traffic pressure off of Main Street.
- New parking structures, that have access from side streets, would fill the need for off-site parking.
- Several small parking structures would be preferable to one large structure, to help decongest West Main Street.
- A dedicated single track trolley along Main St. has long term appeal, while buses and auto trolleys are most practical in the near term.







# **SUMMARY REPORT**

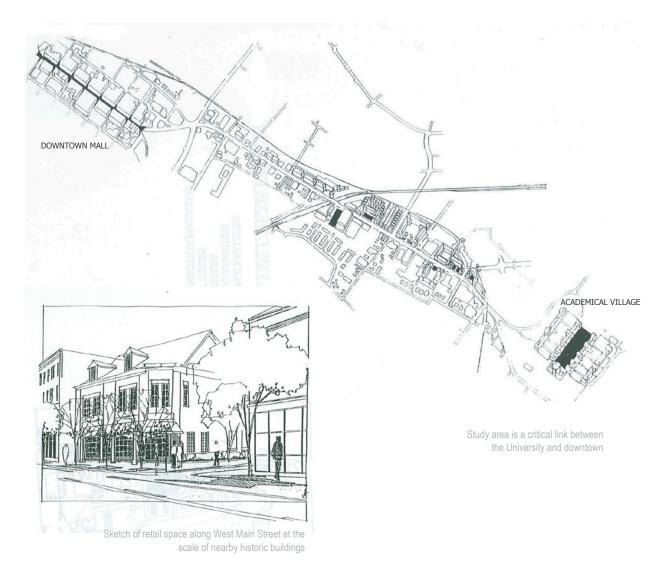
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#### PRECINCT PROJECTS REVIEW:

### West Main Street Study, 1993

presented by Bill Rawn, William Rawn Associates Architects:

- West Main Street is the "common ground" between the University, downtown, and neighborhoods to the north and south.
- It is desirable to create a scale and density along Main Street that does not overwhelm the historic quality of existing buildings.
- It is important not to exceed a building height of four stories, along the street.
- Mixed-use design, including retail, housing, and usable open spaces, is preferred. Open spaces should be integrated with the buildings, both along the street, and internal to the complex.
- Retail on ground floor is critical. Above retail, space can be designated for housing, offices, or hospital uses.
- A strong pedestrian and retail presence will help to make the district safe 24 hours a day.
- There may be a need for more hotel space to accommodate a new Children's Medical Center.





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### **RECOMMENDATIONS:**

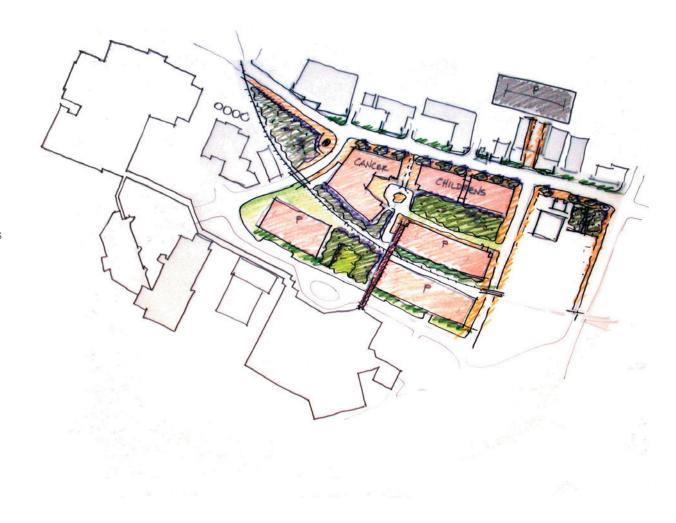
### Option 1:

**Current Health System Area Plan Update Version** 

## Opportunities:

- · Least amount of new parking required.
- Central green space can be built for children's activities.
- Prominent image sites for Clinical Cancer Center and Children's Medical Center.

- Requires major infrastructure link with initial project.
- Requires demolition of Blake Center and demolition of 1222 JPA, and possible phasing of Cancer Center.
- Children's Medical Center on West Main Street generates scale challenges.
- Requires significant private property acquisition.
- Less 24-hour activity on West Main Street.
- · Large institutional building block faces West Main Street.



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### **RECOMMENDATIONS:**

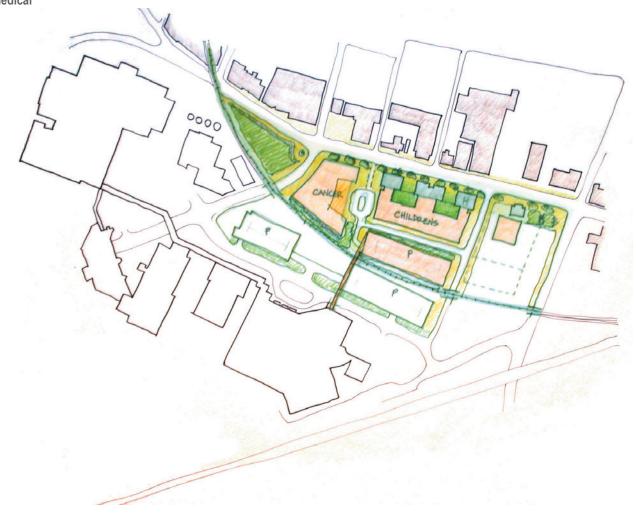
### Option 1A:

Integrates mixed use component in front of Children's Medical Center along West Main Street.

## Opportunities:

- · Least amount of new parking required.
- Housing provides 24-hour presence and activity on West Main Street.
- Small scale elements can be incorporated on West Main Street

- Commercial / housing / Children's Medical Center / access and parking are in close proximity; creates significant planning and functional challenges.
- · Major infrastructure development required.
- Requires significant property acquisition.
- Requires demolition of 1222 JPA and Blake Center.





# **SUMMARY REPORT**

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## **RECOMMENDATIONS:**

## Option 2:

Remove existing West Parking Structure; replace 330 space in new structure; and site Clinical Cancer Center on the existing parking structure site.

### Opportunities:

- Clinical Cancer Center is adjacent to University Hospital and south of tracks to promote connectivity
- Eliminates major infrastructure link in Cancer Center phase.
- No additional private land acquisition required.

- Removes West Parking Structure, and requires replacing 330 parking spaces.
- Requires demolition of 1222 JPA and Blake Center.



Held April 19th & 20th, 2004

### **RECOMMENDATIONS:**

#### Option 3:

Both Clinical Cancer Center and Children's Medical Center located south of tracks adjacent to University Hospital; new parking structure expanded to replace loss of two existing structures.

## Opportunities:

- Cancer Center and Children's Medical Center are adjacent to University Hospital and south of tracks.
- · Requires no land acquisition along West Main Street.
- · Consolidates clinical functions along Lee Street.
- Retains flexibility for future development on West Main Street (University or private)
- No loss of existing office space at Blake Center and 1222 JPA.

- Requires removal of West Garage (331 parking spaces) and removal of East Garage (803 parking spaces).
- Will require land acquisition for parking east of 11th and /or Stacey Hall site.
- · Limits outdoor area next to Children's Medical Center.



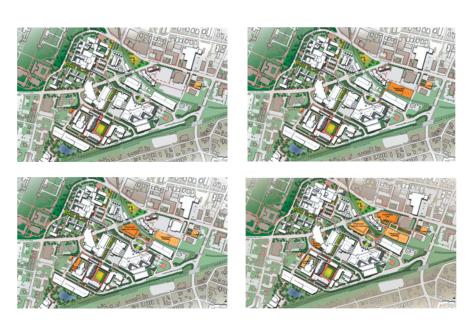
# **SUMMARY REPORT**

Held April 19th & 20th, 2004

## **RECOMMENDATIONS:**

## **Comparison of Options**

	Option	PARKING	LINK / INFRASTRUCTURE	ACQUISITION	DEMOLITION	\$ IMPACT	
3	1	[ Option 1 was not pursued because it fails to fulfill the City's goals for West Main Street. ]					
Par Par	1A	± 975 new spaces	full link	Furniture Store Northern Exposure Art Supply	Blake Center 1222 JPA Northern Exposure Furniture Store Art Supply	3	
67 9	2	± 1300 new spaces	full link	Blake Center	Blake Center 1222 JPA	2	
	3	± 2000 new spaces	2 partial links	10th St. / Post Office	Post Office	1	
		1 1A	1 [Option 1 was  1A ± 975 new spaces  2 ± 1300 new spaces	1 [Option 1 was not pursued because it fail  1A ± 975 new spaces full link  2 ± 1300 new spaces full link	1 [Option 1 was not pursued because it fails to fulfill the City's goals for the company of the	1 [Option 1 was not pursued because it fails to fulfill the City's goals for West Main Street.]  1 [Option 1 was not pursued because it fails to fulfill the City's goals for West Main Street.]  1A ± 975 new spaces full link Furniture Store Northern Exposure Art Supply  2 ± 1300 new spaces full link Blake Center  1222 JPA  Blake Center 1222 JPA	



**FOLLOW-UP** the Office of the Architect & The SmithGroup



# **WORKSHOP FOLLOW-UP**

The Office of the Architect & The SmithGroup

#### FOLLOW-UP RECOMMENDATIONS FOR HEALTH SYSTEM / WEST MAIN STREET AREA STUDY

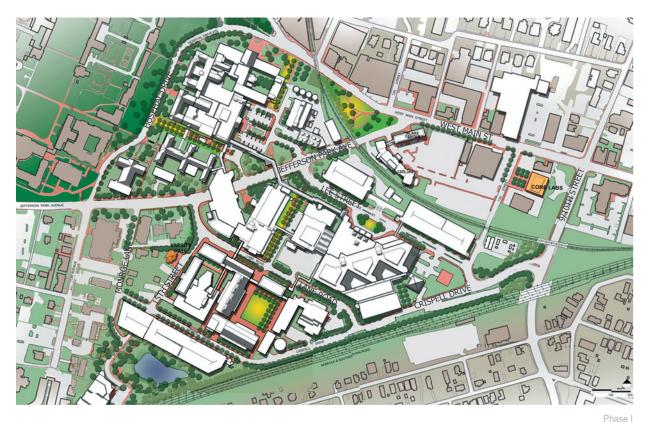
The Office of the Architect and the SmithGroup worked closely to develop a final build-out plan for the Hospital's currently proposed projects that could be achieved in four phases. The elements of the final build-out plan include:

- · Core Lab (swing space) building
- A Northeast parking garage
- Clinical Cancer Center
- · Children's Medical Center

In addition, the Office of the Architect worked with the Deans of Medicine and Nursing to site several structures in the southwest area of the Health System.

## Phase I (2004-2005)

The Core Lab (swing space) building is constructed behind the historic Patton Mansion on West Main Street. Its construction is necessitated now due to interior renovations to be underway in the main hospital in 2005. In the future, when the Core Lab is relocated to a permanent Consolidated Lab area, this building will continue as "swing space" for Hospital uses. Varsity Hall, a historic building relocated to 15th Street to make way for the Rouss Hall addition, houses administrative offices for the Health System.



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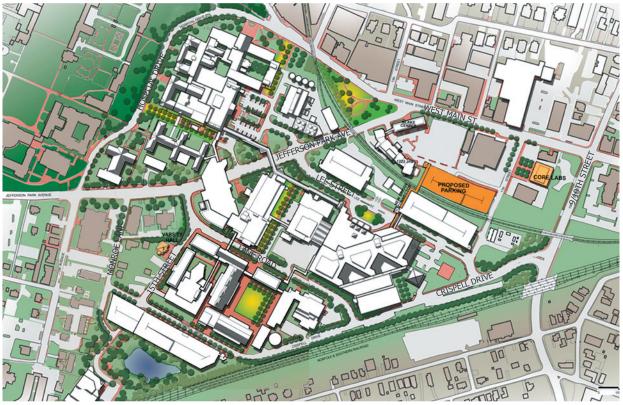
# **WORKSHOP FOLLOW-UP**

The Office of the Architect & The SmithGroup

#### FOLLOW-UP RECOMMENDATIONS FOR HEALTH SYSTEM / WEST MAIN STREET AREA STUDY

## Phase II (2005-2006)

Phase II consists of the construction of a parking garage north of the railroad tracks from the Main Hospital. A link over the tracks connects this garage to an existing one and then to the hospital. This new garage is necessary to replace an existing one that will be demolished to make way for the new Clinical Cancer Center, as well as to provide additional parking needed to replace off-site leased spaces, and to meet the needs of the new Clinical Cancer Center, a 150,000 gsf outpatient serving facility.





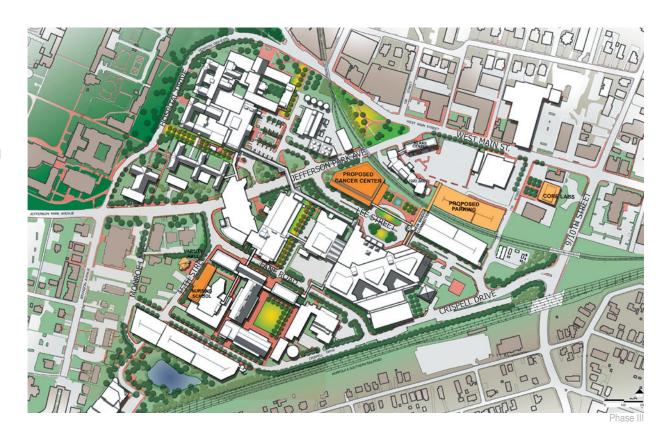
# **WORKSHOP FOLLOW-UP**

The Office of the Architect & The SmithGroup

### FOLLOW-UP RECOMMENDATIONS FOR HEALTH SYSTEM / WEST MAIN STREET AREA STUDY

### Phase III (2006-2008)

Phase III will see the construction of a new Clinical Cancer Center at the corner of Jefferson Park Avenue and Lee Street. This prominent corner is much better suited to a critical component of the hospital rather than to a small, older parking garage. The hospital entrance is expanded and improved as an entrance plaza and a link connects the cancer center to the main hospital. Also, the Nursing School expansion will be constructed as an addition to McLeod Hall along 15th Street.



# **WORKSHOP FOLLOW-UP**

The Office of the Architect & The SmithGroup

#### FOLLOW-UP RECOMMENDATIONS FOR HEALTH SYSTEM / WEST MAIN STREET AREA STUDY

### Phase IV (2008-2010)

In Phase IV, the Children's Medical Center is relocated from its current remote location on 250 West, and scattered other locations within the existing Hospital complex, to the prominent corner of Jefferson Park Avenue and West Main Street. The demolition of the Blake Center will be necessary. However, with the construction of the Children's Medical Center here, there is the opportunity to create a true urban street, which the current site conditions do not promote. The Northeast Parking Garage link is extended to connect the Children's Medical Center back to the main hospital. The internal part of the block is developed into an entrance plaza and drop-off. In addition, the Medical Education Building is constructed as an addition to the west of the MR-5 structure; and an expansion to the current medical library may be built opposite this site on Lane Road.



Phase I\

