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HOLY CROSS MEDICAL CAMPUS MASTER PLAN

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HOLY CROSS MEDICAL CAMPUS MASTER PLAN

Introduction and Background

The Holy Cross Hospital Medical Campus bordered by South Temple and 100 South Streets, and 1000 and 1100 East Streets is in need of renovation and expansion in order to meet the changing health care needs of the community. Additional space is anticipated for ambulatory care, physician office space closely related to the hospital functions, and parking for both patients and employees.

Early in 1993, Holy Cross Hospital administrators approached the Salt Lake City Planning Commission with their preliminary needs assessment. The Salt Lake City Planning Commission established a Task Force to manage a master planning process and assure that the neighborhood and other interested citizens and groups are included in the process. The Task Force was headed by a member of the Planning Commission, and was also represented by other members of the Planning Commission, representatives from the East Central Community Council and the Avenues Community Council, as well as representatives from Salt Lake City Planning, Historic Landmark Committee and Holy Cross Hospital administration. The appointed members of the Task Force were supported by traffic and transportation, planning, and architectural consultants responsible for analyzing specific areas of concern and reporting regularly to the Task Force and the public through public meetings with the neighborhood residents.

The Task Force met regularly as a group and also conducted two Neighborhood Meetings. Task Force meetings were structured to receive comment on the expansion plans, to discuss and evaluate alternative development plans, to review and comment on a proposed recommended plan, and to have input into the Recommended Plan elements. In addition to the Task Force meetings, two Neighborhood Meetings were held. One to receive comment on the proposed expansion plans, and another to review alternative off-site locations for additional parking. The comments received are summarized in the Summary of Public Issues and Concerns.

Goals of the Plan

Through the public process, several Goals of the Plan emerged. These are used to evaluate alternatives developed during the planning process, and to guide development of the Plan Recommendations. The Goals are as follows:

- Maintain a health care facility at the current Holy Cross Hospital Campus that continues to deliver a high quality service to the community and which meets the needs of the changing health care market.

- Maintain, preserve and enhance residential neighborhood character, housing stock and residential zoning within the area surrounding the medical campus.
• Resolve conflicts between residential and other land uses, and between transportation, traffic, parking, and service requirements of the hospital and the neighborhood.

Summary of Public Issues and Concerns

Neighborhood issues and concerns were identified during meetings of the Task Force and during public meetings with the neighborhood. Several areas of concern for neighborhood residents relate to traffic, transportation, and parking; others relate to land use and historic district changes. Following is a summary of the issues and concerns.

Transportation and Traffic

Parking: Neighborhood representatives and nearby residents feel that parking should be accommodated on the exiting medical campus if at all possible, and should only expand beyond the campus without impact to residential uses. Permit parking is currently in place in the neighborhood which assures residents that hospital patrons do not use residential parking spaces. They feel that the actual quantity of parking spaces required to meet the needs of the hospital medical facilities must be determined rather than conform to existing zoning ordinance requirements. Rather than restrict parking, they feel other means of reducing the need for automobile access to the campus should be found.

Transportation Demand Management: Participants in the public process feel that alternative ways of getting people to and from the medical campus should be investigated. The University of Utah and others are involved in a Utah Transit Authority (UTA) incentive program in which the employer purchases bus passes for employees to encourage them to ride the bus rather than drive the car which requires development of parking lots. They feel the success of these kinds of programs should be investigated and the results presented. The important issue is to determine how to get the maximum number of people to the campus with the least impact. Other people feel that there is a need to address how ill people from the shelters get to the facility.

Traffic: Some people feel that traffic impacts from through traffic (people traveling to Primary Children's Medical Center, University of Utah, downtown Salt Lake City and other high use destinations) need to be evaluated. Neighborhood residents are concerned about the amount of north/south traffic, means of mitigating or eliminating the impacts to neighborhoods, the number of patient trips to Holy Cross and where they are traveling from. There is also concern about traffic diverted from the Avenues which impacts the area. People feel a traffic plan needs to be completed for the project which address all of the proposed requirements of the hospital for parking, access, and traffic and it should also look at traffic increases that may result from the change of use of the medical offices. Salt Lake City representatives mentioned that they will soon begin an overall transportation plan for the city which would include this area.

In determining traffic impacts for this area and others, people felt that local standards should be used rather than national standards which may not be entirely appropriate to this situation. People also acknowledged that Holy Cross currently has good UTA bus service and that more effort needs to be made in encouraging increased bus use.
Air Traffic: Residents expressed concern about helicopter traffic at the hospital. Holy Cross does not own a helicopter and has no intent to purchase one, so routing and the amount of air traffic is the concern.

Land Use

Residential: Participants in the process feel that there should not be an impact to residential uses in the neighborhood, particularly the removal of housing. The net loss of residential homes or residentially zoned property in the East Central Neighborhood is contrary to master plan policy in the area. The highest priority should be placed on residential uses and converting existing nonconforming residentially zoned property to a residential use.

Medical: The trend in medicine is for doctors to move from solo practice to larger group practice settings. In the East Central Neighborhood, this means that there is the potential for many of the existing medical office buildings to become vacant. Residents express concern that there may not be a suitable reuse of the building that is compatible with the residential character of the area. With this trend in medicine, doctors may tend to move closer to hospital facilities anyway, regardless of Holy Cross Hospital's needs to change in view of changing medical care needs. Neighborhood residents feel that Salt Lake City originally created the problem by allowing medical offices into the neighborhood, and consequently bears some responsibility for mitigating any new impacts.

According to existing city zoning ordinances, the only reuse of the medical office buildings allowed is residential and that may be anything from single family to apartment buildings. Residents feel that the new zoning ordinance should maintain this zoning. Residents also suggested that non-conforming uses should be revisited on a periodic basis (perhaps every five years), and should revert back to residential use if the non-conforming use has been abandoned.

Planning: Past planning decisions have had an impact on this plan as well. Originally, the parking structure on South Temple was not allowed to exceed its current height because of policy from the Historic Landmark Committee. The Task Force feels that it may be possible to go higher along South Temple and still conform to the historic district requirement. Residents suggested that the feasibility of that needs to be analyzed. They feel that even though the hospital is in a historic district that does not mean that there can be no development or expansion, only that it fit with the historic fabric of the area.

Future planning in the area and on the campus should address the ratio of existing hospital space to the proposed space and how changes in use may affect other considerations such as traffic. Previously the Moreau Building was not considered for demolition; in the future it should be looked at again and reanalyzed.

Noise Levels: Residents across the street on 1000 East mentioned that they could hear the mechanical equipment from Holy Cross Hospital and were awakened from sleep. They are concerned that noise levels may increase with the expansion plans.
Holy Cross Chapel

Many residents of the area expressed concern that the Chapel may be demolished and a new, more modern facility, constructed in its place within the new structure. They consider the Chapel a religious and historic focal point of the medical campus; while others feel that the location of the existing Chapel inhibits circulation and could be improved if it were relocated and updated. In addition to its poor location, there are also seismic and structural considerations, and it does not meet Vatican II standards. According to the Historic Planner, the Chapel is a part of a historic district and does not necessarily need to meet all seismic codes. Any modifications to the Chapel would require a public process and review through the Historic Landmark Committee.

Analysis of Existing Conditions

Land Use and Planning

The Holy Cross Hospital Medical Campus occupies one city block between South Temple and 100 South Streets and between 1000 East and 1100 East Streets. It is currently zoned H (Hospital) and is surrounded by several residential zones with nonconforming medical offices interspersed with the residential uses. The South Temple Street frontage is included in the South Temple Historic District, and the campus is adjacent to the University Historic District. Both of these Historic Districts fall under the review and approval jurisdiction of the Historic Landmark Committee.

Most of the residential use in the immediate area is either single family or duplex housing, although there are a few multi-family apartment buildings. Generally, housing is in good condition and is well maintained as a stable residential neighborhood. The medical office uses are partially occupied -- currently only one medical office building is completely vacant and boarded-up.

Holy Cross Hospital owns the entire block on which the main medical campus is located. In addition to this property, the hospital also owns residential property on the east side of 1100 East Street toward the corner of 1100 East Street and 100 South Street; and a narrow parcel across 1000 East Street toward the center of the block and connecting to LDS Church property. The parcel on the corner of 1100 East and 100 South Streets and the parcel on 1000 East Street are vacant. The other parcels are residential dwellings that have been converted to office use by Holy Cross Hospital. One serves the Holy Cross Foundation and the other the Holy Cross Grief Center.

The Figure 1 Map attached, shows existing land uses, current zoning, and historic district boundaries.

Hospital Needs and Functions

The Master Plan Update prepared by Kaplan/McLaughlin/Diaz (KMD) for Holy Cross Hospital outlines the Hospitals' current needs, goals and objectives, and defines a set of long range facility development goals which will direct future construction and remodeling project needs. The
extent of the Master Plan Update reevaluates and updates strategic and facility master planning completed previously. It incorporates the elements of the strategic plan prepared by Ernst and Young and the programmatic and facility master planning by Medical Planning Associates.

In order to further the mission of Holy Cross Hospital, several facility construction projects were identified as necessary. These include the following actions taken directly from the KMD Report:

- Build three new floors above the 1988 West Wing and a new elevator core connecting through to the Emergency Room and the Radiology and Surgery below. The total area of new construction is approximately 55,000 gross square feet.
- Remodel the spaces vacated by moving the inpatient care units into the new addition in order to modernize the beds remaining in the Center Wing.
- Build an Ambulatory Care Center of two floors in the area now occupied by the East Wing, at approximately 50,000 gross square feet.
- Build four floors of physician office space above the Ambulatory Care Center, at approximately 70,000 gross square feet.
- In the future, build a second new building for physicians on the site not occupied by the parking structure to the east of the hospital, at approximately 100,000 gross square feet.
- With the proposed demolition of the East Wing (50,000 gross square feet), the approximately total new building space to be constructed may reach 225,000 gross square feet.
- Build sufficient parking to accommodate the requirements of the existing buildings as well as the two proposed new medical practice facilities. KMD studies to date indicate that all of the parking cannot be located within the present hospital site block.

Holy Cross Hospital anticipates that this expansion will occur in two phases. Phase One includes the additional floors above the existing West Wing, remodeling of the inpatient care area, construction of the Ambulatory Care Center and the Physician Office Space above, and construction of approximately 350 parking spaces. Phase Two includes the second physician office building on the site of the parking structure on the corner of 1100 East and 100 South, and an additional 250 parking spaces.

**Parking and Traffic Analysis**

Traffic Analysis: A Parking and Traffic Study conducted by Eckoff, Watson and Preator Engineering (EWP), states that "the potential future construction that is planned for the hospital and the apparent parking shortage that now affects the existing hospital complex (including the Moreau and Mediplex Office Buildings) has created the need to address how much additional parking would be needed for future construction."
EWP conducted a survey of employees designed to understand how hospital complex employees arrive at work, i.e. bus, private auto, car pool, walk, bicycle, or drop off, and how often they use public transit. The purpose of the survey was to assess the probable success of Transportation Demand Management (TDM) strategies. The results suggest that the TDM strategies will very reduce likely automobile use by the employees of Holy Cross. More detailed information is contained in the EWP Report; however, to summarize:

- 95% of the surveyed employees arrived to the hospital campus by automobile,
- of those arriving by automobile, 5% were traveling in a car pool,
- 4% arrived by UTA bus, and
- 1% walked to the campus.

South Temple Street and 100 South Street receive the greatest amount of traffic. The average daily traffic (ADT) estimates used were based on Salt Lake City Department of Transportation's latest counts which occurred between 1983 and 1988. These were updated and project to 1993 volumes based on a three percent growth factor. The projected current traffic on 100 South is estimated at approximately 16,000 vehicles. The estimated two way ADT along South Temple is approximately 19,000 vehicles. Information on other streets in the area has not been collected for several years and probably is not reflective of current use or suitable for making projections, consequently, they included in the analysis.

According to EWP's report, of the total current traffic on South Temple and 100 South Streets, the percent of traffic generated by Holy Cross Hospital Medical Campus is not expected to change dramatically in the future. At this time, it is estimated to represent approximately 13% of total traffic. At the time of complete build-out which is estimated to occur approximately 10 years in the future, Holy Cross Hospital Medical Campus would generate about 14% of the total traffic.

Traffic generated by the hospital through the residential neighborhoods immediately south of the hospital was also estimated by conducting informal observations and "windshield survey" in the area. It is estimated that 1000 East (in the area between 100 South and 200 South currently carries approximately 80 vehicles during the p.m. peak hour (4:30-5:30 p.m.). Counts show that Holy Cross Hospital generates approximately five percent of the p.m. peak hour traffic. It is estimated that at full build-out, Holy Cross will generate six percent of the p.m. peak hour traffic on 1000 East Street.

On 1100 East Street between 100 South and 200 South, 225 vehicles were counted during the p.m. peak hour. It is estimated that Holy Cross Hospital generated approximately 15 percent of this peak hour traffic (34 vehicles). It is estimated that at full build-out, the hospital complex will generate 18 percent of the future p.m. peak hour traffic.

Parking: The EWP report also looked at existing parking behavior and utilization, and demand for parking spaces. Based on this information, it was determined that additional parking is needed to serve new facilities and to make up an existing deficit in parking. It is also determined that the required parking cannot be accommodated on the existing Medical Campus block. The employee survey conducted by EWP indicates that:
- 74% of employees parked in the terrace on campus,
- 14% parked in the upper east parking lot, and
- 10% parked on the street.

The parking demand study revealed that demand is less than the current and proposed Salt Lake City zoning requirement for parking in a Hospital (H) zone. Salt Lake City's zoning ordinance requires a total of 1074 parking spaces, whereas the demand study indicates a need for 913 spaces. It is anticipated that Holy Cross Hospital will need to receive a variance from the Board of Adjustment for this reduction of required parking. This number assumes that Traffic Demand Management strategies such as UTA Deep Discount programs and incentives to car pool would reduce the actual demand for parking spaces. A summary of the parking demand data follows:

| Existing Parking Deficit   | (124) |
| Total Projected Parking Demand | (1,450) |
| Demand Reduction From TDM | 60 |
| Total Existing Parking Supply | 789 |
| Future Parking Deficit | (601) |

The future parking deficit (601 spaces) is projected to be met by constructing 369 spaces with the construction of the Ambulatory Care Center and the expansion of the existing West Wing. An additional 250 spaces will be needed at a later date when the Physician Office building is constructed. It is anticipated that the Physician Office Building will be constructed in the southeast corner of the block, where 160 spaces now exist. Therefore, approximately 410 new spaces will need to be constructed to gain 250 net additional spaces.

**Analysis of Alternative Parking Locations**

The Consultant Team prepared several alternative parking locations for consideration by the Task Force members. These were evaluated in a meeting with the Task Force members and during a Neighborhood Meeting.

Two proposed alternatives were eliminated by the Consultant Team and Holy Cross:

- The Moreau Medical Building was considered for remodeling; however, the cost of renovation and the amount of space which would be available was too small to justify as a viable alternative. Additionally, new space is desired with immediate connections to hospital facilities, and this cannot be achieved in the Moreau Building.

- The new parking structure on the north of the site and adjacent to South Temple was identified as a place where the relatively new structure could be replaced, or additional structured parking could be built above the existing structure. This proposed alternative was eliminated from consideration because the existing structure was complete in 1988.

Two proposed alternatives were eliminated from further consideration early in the process because they required the removal of between 15 -20 homes in order to make space for parking.
The alternative locations which were eliminated included land on the northwest quadrant of 100 South Street and 1000 South Street; and the southeast quadrant of 100 South and 1000 South Streets in existing residential areas.

The other alternatives received careful consideration by the Salt Lake City Planning Commission Task Force established to guide the Holy Cross Hospital Medical Campus Master Plan. The three alternatives discussed are listed in order of preference expressed by the Task Force members, and briefly described.

**Subsurface Structure Under 1100 East Street:** Develop parking spaces under 1100 East Street using the existing Medical Campus accesses to serve the underground structure which would connect directly to existing Holy Cross Hospital parking. Parking would not be visible from the street. Construction activity would impact the neighborhood and properties along 1100 East. The property is not owned by Holy Cross. Cost per parking space is approximately $12,000 plus the cost of the land. A preliminary meeting of Salt Lake City departments including traffic, engineering, public works, planning, property management, etc. indicates that there are no "fatal flaws" immediately evident with this alternative.

**Medical Towers Site:** Develop parking spaces on the site of the Medical Towers Building across 100 South. Parking would be structured above and below ground. A tunnel under the street might be possible. Current Medical Office use is a non-conforming use in a residential neighborhood and could be developed as parking under a conditional use in the existing zoning to a height of 35'. This property is currently zoned residential and would represent a loss of residentially zoned property in the neighborhood. This property is not owned by Holy Cross. Cost per parking space is approximately $8,000 plus the cost of the land.

**Holy Cross Owned Property Site:** Develop parking spaces on existing Holy Cross owned property and adjacent properties across 1100 East Street and in the south between South Temple and 100 South Streets. Existing residential uses and office uses occurring in residential structures would be removed to accommodate the combination underground and above ground parking structure. Loss of the housing and housing structures would be mitigated in the neighborhood by either moving structures or trading other nearby Holy Cross property that is currently vacant and could be developed as residential. Cost per parking space is approximately $8,000 per space plus the cost of the housing mitigation.

**Draft Preferred Plan**

Following discussion, the Task Force eliminated from further consideration the alternative which uses Holy Cross owned property because of the impact to the neighborhood. Of the two remaining -- under 1100 East and Medical Towers -- the subsurface lot under 1100 - East Street was identified as the most preferable. The Medical Towers site will only be considered if the 1100 East site becomes entirely infeasible, and will then require reconvening the Task Force in order to determine a new course of action.

Following is a description the Draft Preferred Plan which identifies areas of responsibility and action which must be taken by both Holy Cross Hospital and Salt Lake City.
Holy Cross Hospital

- Pursue expansion plans as identified in the needs memorandum including the following:

  **Phase One**
  Construction of three new floors (55,000 square feet) above the existing West Wing.

  Remodeling the inpatient care area which will "downsize" the facility from 200 beds to approximately 170 beds. This remodeling will provide more private inpatient rooms and is not expected to change inpatient staffing.

  Construction of an Ambulatory Care Center of two floors (50,000 square feet) in the area now occupied by the East Wing and parking.

  Construction of four floors (70,000 square feet) of physician office space above the Ambulatory Care Center and parking.

  Construct approximately 369 parking spaces.

  **Phase Two**
  Construction of a second physician office building of approximately 100,000 square feet that would be located on the site now occupied by the parking structure on the east of the hospital.

  Construct approximately 410 parking spaces.

- Pursue expansion of parking under 1100 East as the first location priority using existing site access points.

- Develop a raised landscaped median as a buffer to the residential and install streetscape improvements along 1100 East as part of the parking structure.

- Complete a detailed traffic and transportation survey among employees and patients of the hospital to determine where people are coming from and which routes they use to access the hospital campus. Provide this information to Salt Lake City for use in its upcoming city wide transportation plan.

- Continue progress to establish a "deep discount" plan with UTA to encourage as much transit use as possible. Identify other Transportation Demand Management (TDM) strategies intended to reduce auto use by employees and patients and make them a part of an overall Transportation Demand Management Plan submitted to Salt Lake City.

- Upgrade the streetscape along. 1000 East Street across from existing residential with additional landscape and sound mitigation.
- Complete a construction mitigation plan which addresses impacts to the neighborhood, and employee and patient access to the health facility.

- Upgrade housing in the neighborhood by either trading Holy Cross owned vacant property to Salt Lake City for the purpose of developing housing in exchange for rights to develop under 1100 East, or by developing housing on these two parcels as residential uses.

- Preserve the Chapel in the current structure.

**Salt Lake City**

- Work with Holy Cross Hospital in securing approval to construct the parking under 1100 East with all Salt Lake City departments, including the street improvements above the structure.

- Work with Holy Cross to trade the two Hospital owned parcels in the neighborhood in exchange for some or all of the rights to develop under 1100 East, and develop housing on these two parcels as a city responsibility.

- Allow permit parking in areas adjacent to the medical campus to assure that residents have close by on-street parking their use.

- Retain residential zoning where existing medical office buildings are currently non-conforming and establish a policy whereby abandoned buildings eventually revert to residential.

- Complete a city wide transportation plan which addresses regional traffic impacts on local neighborhoods, and develop a strategy and policy for mitigating impacts to neighborhoods.