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January 24, 2002

Jerrily R. Kress, Director
Office of Zoning
441 4th Street, N.W., Suite 210
Washington, D.C. 20001

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Re: BZA Appeal # 16791

Dear Ms. Kress:

As requested by the Board at the hearing on this matter held on December 4, 2001, Appellant Southeast Citizens for Smart Development, Inc. hereby provides outlines of the testimony of witnesses that Appellant anticipates presenting at the continuation hearing scheduled for February 5, 2002. As previously noted, Appellants' witnesses are as follows:

1. Wilbert Hill, Chairman, Southeast Citizens for Smart Development, Inc., outline previously submitted - 5 minutes
2. Kirk White, Zoning Expert, outline attached - 10 minutes
3. Patricia Harden, Licensed Social Worker, outline attached - 20 minutes
4. Rob Nevitt, Capitol Hill Restoration Society, outline previously submitted - 5 minutes.
5. Brian Furness, Planning Expert, outline attached - 5 minutes.
6. Ellen Opper-Weiner, Vice-Chair, Southeast Citizens for Smart Development, Inc., outline attached - 5 minutes

Please feel free to contact me, at (202) 974-5142, if you have any questions or need any additional information.

Sincerely,

Andrea C. Ferster

Enc.

cc: Phil T. Feola, Esq.
Kenan Jarboe, Chair, ANC 6B
Marie-Claire Brown, Esq.

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BZA
Case No. 16791
Exhibit No. 38

Board of Zoning Adjustment
District of Columbia
CASE NO.16791
EXHIBIT NO.38

Outline Testimony of J. Kirkwood White
Case No. 16791

I am Kirk White. I live at 935 O Street, N.W. in Washington D.C. 20001.

I am appearing in this matter as an expert in D.C. Zoning law.
My credentials include a 1963 law degree from the University of Pennsylvania, with a concentration in city planning law.

From 1971 to 1978, I served as a planning and zoning expert in the D.C. Government - first with the City Council and then with the Office of Planning. From 1974 to 1978, I served as Chief of the Zoning Staff and helped draft the Home Rule Charter.

During the mid 70's, I prepared the staff report on the rezoning of the subject property from R-4 to C-2-B. Later, I served on the team that prepared the staff report on the first D.C. CBRF zoning regulation.

In the 1970's, 80's and 90's, I worked on the land use and economic development elements of the D.C. Comprehensive Plan.

From 1978 to 1998, I was an active DC zoning and planning attorney and practiced in D.C. zoning and planning law with private firms. I handled several BZA cases and Zoning Commission map and text changes, PUDs, as well as Comprehensive Plan modifications. From 1996 to date, I served as a consultant on zoning matters. I am currently serving as a Trustee of the Committee of 100 on the Federal City.

This case is an appeal by a community group, Southeast Citizens for Smart Development, Inc., from a decision by the Zoning Administrator. The appeal is regarding a Boy's Town proposal to house 24 children in four structures each with six children , plus two staff persons, all in Square 10 45 on Potomac Avenue, S.E. Two additional buildings are shown on the site plan.

The Zoning Administrator's apparent refusal to look outside of the owner's very limited and self-serving characterization of the project on the building permit application has resulted in a situation where there is disjunct between the Zoning Administrator's decision, which treats the facility as four separate facilities, and the owner's own characterization of the project as a single "campus".

Had the Zoning Administrator considered even the material in DCRA's own files where Boy's Town describes the project in the environmental screening process, it would have been clear that this is a single CBRF for 24 persons, and therefore, under the plain language of the zoning regulations, Section 732.1(a), may only be permitted by special exception.

The apparent view of Zoning Administrator (and the owner) that zoning decisions do not look beyond the lot lines under any circumstances is one that lacks support in the zoning regulations or in any principle of zoning and planning. Many uses that require a special exception under our

zoning regulations are capable of being spread out over more than one lot of record. Several lots often exist within such zoning entities a Campus Plans, PUDs and clustered developments using tax lots.

One can envision all sorts of mischief that would result if the zoning inquiry did not go beyond building lots lines, particularly in the case of uses in which the zoning regulations impose occupancy limits. The subdivision of lots or intentional spreading out of the uses among several adjoining lots could then be used as way to circumvent these occupancy limits.

For example, under Section 350.4(g) of the Zoning Regulations, a child development center is considered matter of right in the R-5 zone, provided that the center is limited to 25 children. If a child development center proposes to care for more than 24 children in a single building, it can only do so with BZA approval. However, under the Zoning Administrator's apparent view, the child development center could operate a facility for 48 children without securing BZA review simply by locating 24 children in a building on one lot of record, and locating 24 children on an adjoining lot, while managing the center as a single operation. The impacts on the neighborhood in terms of noise, traffic, and operations are far greater in the case of a center with 48 children, notwithstanding the fact that the children are divided between two adjoining lots, yet this facility would not be subject to BZA review, while a special exception would be required for the center with 25 children.

A blind focus on what occurs solely on a single lot, without regard to activities by the same owner on adjoining lots will hand landowners a neat way to avoid the occupancy limits imposed by the zoning regulations as a condition of matter of right use: just buy separate, adjoining lots and double your occupancy. Or better yet, buy a single large lot and subdivide it. This would sanction an evasion of the zone plan, and should not be condoned. Instead, the zoning administrator must determine whether a facility is operated as a single facility notwithstanding its location on more than one adjoining lot of record, in order to assure that due consideration is given to the special concerns embodied in the Zoning Regulations about the land use impacts of facilities that exceed the number of occupants or residents specified in the Zoning Regulations.

The Zoning Administrator's ruling that 24 children can be cared for by the same provider within an enclosed campus with a total of 24 residents, with perhaps many more in the future, without an over-concentration check, simply because the living units are spread out on separate but adjoining and closely clustered lots of record, is clearly in error and contrary to the intent of the Zoning regulations. Zoning determination by the BZA as to size of CBRFs and the impact of the concentration (or dispersal) of CBRFs must occur without tripping over the meaning of the matter of right status of such facilities.

The principle that zoning pertains to property and cannot be made personal only to the owners of property, cited by Boy's Town in its opposition, is not implicated here. That principle is not violated by treating a single institution as a single institution, even though the institution is spread over several lots of record. Instead, that principle addresses a wholly separate concern, that bars the zoning board from making zoning decisions that do not run with the land, but pertain to a particular property owner. That concern is not implicated here, since we would expect BZA

oversight whether the operator is Boys Town Homes, Inc., or any other service provider operating the CBRF as a single facility.

The question of the concentration or dispersal of CBRFs in predominantly residential and mixed use areas has been one of the most significant zoning issues in the city over the last 25 years. Many civic groups objected to the over concentration of CBRFs in their neighborhoods.

Most everyone agrees that CBRFs serve important social needs in the city. They allow social agencies to remove persons needing care from large institutions to smaller residential homes in the community. By and large this change has worked well for all concerned if such facilities are not concentrated in certain neighborhoods. The Zoning Commission's regulation of CBRFs has been a well balanced approach to meeting social needs while addressing community concerns that the over concentration of such homes will harm neighborhoods. However, the requirement for BZA review when the number of residents exceed the specified occupancy limit or in the case of over-concentration still remains a legitimate, non-discriminatory aspect of CBRFs land use regulations.

In sum, Section 732.1(a) of the zoning regulations require BZA review of youth residential care homes housing more than 16 residents, which the Boy's Town facility clearly is. The required BZA oversight of the CBRF should therefore take place in order to ensure that the siting and operation of this facility does not undermine the zone plan or result in negative impacts on the surrounding neighborhood and land uses.

Outline of Testimony of Pat Harden, MSW, LCV
Case No. 16791

1. I am a social worker and psychotherapist licensed in the District of Columbia and Maryland. In my capacity as a social worker, I have worked with a number of group homes for troubled children and developmentally impaired adults in the District of Columbia and elsewhere, and am familiar with the different models on which group homes can be operated.

2. In my experience, group homes where children who have been removed from their homes by social service agencies are typically placed tend to be operated in a relatively standard fashion or fit within a few models. Basically, there are four different long-term placements options for children who cannot be returned to their homes: (1) family members or foster homes, (2) institutional settings, such as a psychiatric facility, (3) and group homes.

3. Boys Town's materials indicate that it intends to operate a group home for children who have been removed from their families. The question here is whether the Boys Town facility is a simply a serious of small independent group homes that coincidentally happen to be located side by side, or whether or it is a single group home, with all the operational characteristics of a single larger home.

4. Based on my experience with group homes, I believe that the following operational characteristics are indicative of a single group home, regardless of whether residents reside in separate structures or living units

Evidence of central administration of the facility.

- Living units for the children may or may not be in separate or adjoining structures, but facility has the appearance of a campus or compound, often fenced, with common areas for recreation, meeting, classrooms, and offices, with all or most activities centrally managed.

- The facility is administratively centralized: For example, the operator has a single contract with DC Child & Family Services Administration (CFSA) or other source for the program, rather than separate contracts for each living unit.

- Intake would be done centrally by the facility, and children again assigned by the facility to the specific living unit, rather than each living unit contracting separately with CFSA.

- Staff for all living units is centrally hired, trained, and supervised and on the same payroll.

- One set of back-up in-home resident supervisors who will serve all living units interchangeably as needed, rather than requiring each living unit to find their own

substitutes for vacation or other leave time

- One set of standards or rules for behavior and for handling children in each of the living units.

- Food service is centrally ordered, and delivered, and often even prepared in accordance with an assigned menu plan, so that all living units basically eat the same food.

- A commonly owned set of vehicles used for transporting the children. Maintenance of the living units is arranged for and managed centrally usually from a single source or maintenance staff servicing the entire facility.

Evidence of centralized programmatic operations.

- Typically, there is a team of outside professionals (psychologists, social workers, educationists, mental health specialized, therapist) working with all the children, rather than a separate person for each living unit. These professionals often work with the children in a central location, such as an administrative office.

- Typically, there will a tutoring program for after school available to all children in the facility. Recreation programs or activities are also often done as a group involving all children.

- After school activities, such as support groups, tutoring, picnics, even trips to the doctor or dentist for regular check-ups, are done as a group.

5. For purposes of contrast, a small, stand-alone group home for six children would be managed and operated much differently:

- Day to day living expenses are handled by the home and not coordinated with a central facility; for example, each home would make its own arrangements for transportation, do their own shopping, home maintenance, etc.

- All day-to-day activities are arranged by the home and not necessarily in conjunction with any other group home or service provider, i.e., they shop for food as any family would, have outings, after-school activities, arrange for therapeutic services, without any particular coordination with any other home or provider.

6. A centrally managed facility for 24 children who reside in clustered living units has the advantages from the operator's perspective of economies of scale and operational efficiencies. However, in my view, operating a group home for more than six children is less desirable from a therapeutic standpoint, even where small clustered living units are utilized, because it is operated on a scale that is not sufficiently personalized and

surrounds already troubled children with too many negative influences and not enough positive role models. For that reason, it would be very unlikely for four separate operators of group homes for troubled children who did not envision any sharing of facilities, staff, or services, to decide to locate immediately adjacent to each other.

7. I have reviewed the layout of the Boys' Town proposed Capitol Hill facility, as gleaned from the site plan in Appellants' Exhibit 8, showing four residential structures, an administration building, parking and recreation areas, and a short-stay facility, clustered on a single area accessed by a single driveway and surrounded by an eight foot high fence, and some of Boys Towns' publicly distributed materials describing its plans with respect to the proposed Boys Town "Capitol Hill campus."

8. Based on this material, it is my opinion that Boys Town intends to operate its Capitol Hill campus as a single integrated facility rather than as four separate group homes.

PATRICIA M. HARDEN, MSW, LCSW-C, LICSW

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1426 H Street, N.W., Suite 410
Washington, D.C. 20005
(202) 783-3737

EDUCATION:

Smith College, Northampton, Massachusetts
Master of Social Work, 1982
Bachelor of Arts in Education and Child Study, 1973.

EMPLOYMENT:

Private Practitioner

I have maintained a private psychotherapy practice working with adults, children, adolescents, couples and families since 1988.

Associate Clinical Professor
Smith College School for Social Work
Northampton, Ma.

In this position I provide academic advising and coordination of field placements for masters level students placed full time in the Washington Metropolitan area.

Associate Clinical Professor
of Psychiatry & Behavioral Sciences
The George Washington University
School of Medicine and Health Sciences
Washington, D.C.

Fieldwork Coordinator
Smith College School for Social Work
Northampton, Ma.

Responsible for the administration of the Smith College School for Social Work Field Program in the Mid-Atlantic Region. In this position I am responsible for hiring, supervising, supporting and evaluating Faculty Field Advisors within the region. I am responsible for helping the field office maintain a roster of field placement options within the Mid-Atlantic Region. This includes opening new agencies and units, closing existing agencies that no longer are suitable placements and working with existing agencies to improve the quality of field education. I am responsible for the students placed at the agencies, this includes support, information giving, problem solving, conducting consultations, and when necessary calling for reviews. I participate in the assignment of students to agencies, and in the planning of the Annual Supervisor's Conference.

Director of Admissions
Burgundy Farm Country Day School
Alexandria, Va.

In this capacity I conduct admission interviews and administor the admission process for an independent elementary school in Alexandria, Va.

PAST EMPLOYMENT

June 1991- September 1993 **Counselor**
St. Peter's Interparish School
Washington, D.C.

In this position I provided individual and group counseling with students, ongoing advisory consultations to faculty regarding troubled students, psycho educational group workshops for parents and supervise social work interns. In addition I provided special interest training and program development for staff in areas such as emotional development of students, family and divorce situations, stress management and conflict resolution, staff counseling regarding personnel concerns, complaints and conflicts. The work also includes input to the Principal on personnel issues such as staff adjustment to change, and managing different personality types in the workplace.

August 1991- August 1992 **Clinical Social Worker**
Georgetown University Hospital
Department of Pediatrics
Washington, D.C.

In this part time position I provided services to children hospitalized on the general pediatrics unit and their families. Services include assessments, counseling, and psychotherapy for children and their families. The goal is to help each child and family achieve the optimum emotional adjustment to the illness and hospitalization and utilize the resources available to facilitate after care. This role necessitates close collaborations with attending physicians, residents, other mental health professionals, nurses and outside agencies and supervision of social work students.

August 1988- August 1991 **Coordinator of Social Work Services**
Ivymount School
Rockville, Maryland

In this position I coordinated all social work services provided to the 150 students enrolled. In addition, I had clinical responsibility for 5 classrooms with 40 children, supervised 5 clinical social workers and social work interns. The students enrolled have learning disabilities and or emotional problems. Services include individual psychotherapy, group work, parent guidance, and family work and consultation to teaching staff. The approach is strongly multi-disciplinary with an integration of psychodynamic, systems and behavioral approaches. I left this position because I had a baby and wanted to take several months to be with her. In addition I only wanted to return to work part time.

October 1985- August 1988 **Clinical Social Worker**
Lombardi Cancer Center
Division of Pediatric Hematology/Oncology
Georgetown University Hospital, Washington, D.C.

As the Social Worker with this service I developed a psychosocial program and coordinated the psychosocial team that delivers services to families. The team included a psychologist, an art therapist and social work interns. In this capacity I did initial assessments, provided on-going counseling and psychotherapy to families, couples and children and assisted families in utilizing appropriate resources within and outside of the hospital. This role necessitated close collaborative work with other members of the psychosocial team as well as the physicians and nurses providing care. In addition I was

involved in the training program for pediatric residents and worked with child life workers around socialization and academic issues for the hospitalized child. Most of the children seen on this service had cancer, a smaller percentage had other hematologic disorders

May 1984 - May 1988 **Social Work Consultant**
Bright Path Center
C Street Community Center and Behavioral Health Systems

Intermediate Care Facilities for the mentally retarded. As a consultant to these facilities I was involved in conducting annual social work assessments for residents as well as participating in the development of Individual Rehabilitation Plans for each resident. Additionally I served as a liaison for the families of the residents and conducted in-service training for staff around the social and emotional needs of the clients.

September 1982- October 1985 **Psychiatric Social Worker**
Georgetown University Hospital
Division of Child & Adolescent Psychiatry

As a social worker with this service, I was involved in individual and couples therapy with parents, individual and group therapy with children and adolescents, family therapy and guidance work. I also participated in the training program for child psychiatry fellows and residents as well as collaborated with fellows and residents on treatment cases. The population seen on this service was varied, coming from a wide range of socio-economic and racial backgrounds with a range of presenting problems and degree of pathology.

October 1983- February 1984 **Clinical Social Worker**
Georgetown University Hospital,
University Affiliated Program for Child Development

On a part time basis for this period I worked on a Head Start Training Program on Child Abuse and conducted Social Work Assessments for the Bureau of Community Services. Most of these assessments involved mentally retarded citizens who were wards of the state and needed annual evaluation.

September 1981- May 1982 **Social Work Intern**
Georgetown University Hospital
Division of Child Psychiatry

As a full time intern, I participated in a full range of social work activities including parent guidance, individual and couples therapy with parents, play therapy with children and family therapy. I attended various therapy and didactic seminars with child psychiatry fellows and residents covering child development both normal and pathological, psychological testing as well as other areas specific to the problems of children and parents.

September 1980- May 1981	**Social Work Intern** Jacobi Hospital of the Bronx Municipal Hospital Center Department of Obstetrics and Gynecology Bronx, New York.

As a full time intern on this service, I worked with women attending the Obstetrics and Gynecology Clinic, women hospitalized for delivery, women being seen and hospitalized by gynecology as well as following cases admitted to Pediatric Intensive Care after birth. This was a high risk population with varied needs. Work included parent education and guidance, discharge planning, individual counseling, and patient advocacy.

1979-80	**Researcher** Howard University Institute for Urban Affairs and Research Washington, D.C.
1977-79	**Director of Training** Child Development Associates Consortium Washington, D.C.
1976-77	**Coordinator** Handicapped Children Program Parent Child Center Washington, D.C.
1973-76	**Coordinator** Florence Mwangi Cultural Center Smith College Northampton, Ma.

MEMBERSHIPS, PROFESSIONAL AWARDS, APPOINTMENTS AND PRESENTATIONS

D.C. Coalition of Social Work Health Care Providers, 1983-1986

Treasurer, Alumni Association Smith College School for Social Work, 1983-1986

Certificate of Appreciation, D. C. Government, for Work Toward Licensure for Social Workers in the District of Columbia, 1986

Participated in Panel Presentation on group work with Parents at Academy of Child Psychiatry. National meeting, California, 1986

Stephenson, S. H., Jolly, J., and Harden, P. M., Sports Psychology: How it can help the Adolescent Athlete. Seminars in Adolescents Medicine: September 1987.

Attended on going training through Georgetown University Department of Child and Adolescent Psychiatry in areas such, as advanced family therapy, working with anxious patients; the depressed patient, etc. Participated in conducting Pediatric Grand Rounds presentation on the Psychosocial aspects of pediatric oncology.

Have conducted various workshops, seminars on working with parents for Head Start and other agencies.

Provided training in social-emotional development of children to various organizations including most recently, Family Friends Project of Montgomery County.

Member, Smith College Board of Councilors, Committee on Resident Life 1987-present.

Member, National Association of Social Workers

Member, Junior League of Washington

Trustee, Burgundy Farm Country Day School, 1989-1995

Licensed in Maryland and the District of Columbia.

Testimony
of
Brian R. Furness
Before the Board of Zoning Adjustment

BZA Case No. 16791
Appeal of Zoning Administrator's Decision Allowing the Location of
Father Flanagan's Boys Town Phase I

December 4, 2001

PLANNING CONSIDERATIONS

I. Introduction

A. Personal identification
1. I am Brian Furness, resident at 1367 Massachusetts Avenue, SE
2. Chair of the Community Development Committee of the Capitol Hill Restoration Society, and as such, representative of the Society to the SCSD
3. Immediate Past President of the CHRS, which has since 1955 played an important role in the development of Capitol Hill, and in the development of the Comprehensive Plan

B. Summary
1. Why is planning process relevant
   a. Expression of community development preferences
   b. Official guidance on development directions
   c. Legal standing
2. Legal standing of the Comprehensive Plan
   a. Elements of the Comprehensive Plan relevant to the Boys Town project
3. The Neighborhood Action Plan
4. Conclusions
   a. Relevancy to the case under consideration

II. Importance of the Comprehensive Plan and the Neighborhood Action Plans
A. Legal standing
1. Approved by City Council to guide land use and development
   a. District of Columbia Comprehensive Plan; District of Columbia Comprehensive

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Plan Act of 1984, DC Law 5-76, DC Code Section 1-245, as amended by the Comprehensive Plan Amendment Act of 1998, D.C. Law 12-275

2. Intended to be binding on regulatory bodies

B. Expression of community concerns, interests & desires

1. Comprehensive Plan and Neighborhood Action Plans reflect substantial community input (public meetings, submissions, testimony, hearings – even apart from the formal legislative process)

C. Professional guidance of the development process

1. Not arbitrary, or unreasonable, but a considered response to the questions of how best to spur the creation of a viable, liveable city, attractive to both residents and economic stakeholders.

III. The Comprehensive Plan

A. Organization

1. (To remind) The Comprehensive Plan is organized hierarchically:
   a. General areas (e.g., "Human Services," "Land Use,").
   b. Objectives (e.g., "Ward 6 Objectives for Human Services").
   c. Specific policies or actions in support of the objectives (e.g., "Ward 6 Policies in Support of Human Services Objectives")
2. Upshot
   a. Level is important. Specific recommendations for action or policies are most sharply focused at the "Policies" level, most deserving of respect.

B. Plan elements bearing on the Boys Town Development

(Note 1: Two dimensions: those bearing directly on CBRFs, and those providing an alternative vision – e.g. economic development)

(Note 2: Refer to SCSD's "Pre-Hearing Statement," especially Exhibit 3)

1. Provisions dealing specifically with CBRF's

"[p]revent further concentration of community-based residential facilities (CBRFs) in Ward 6 neighborhoods and require future development of the CBRFs to be in accordance with the District-wide CBRF plan." (Ward 6 Plan, "Ward 6 Policies in Support of Human Services Objectives," Sec. 1731.1(d); also Exhibit 3, 7) (But note proviso that "further concentration shall not violate the Fair Housing Act...")

a. As expression of policy and interpretation, takes precedence over the general statement of the issues:

"CBRF's are an important element of the human services delivery system. They provide housing for a number of individuals and families in need of various types of public assistance." ((Ward 6 Plan, Ward 6 Human Services, Sec. 1728.5; contained in Exhibit 3, 17-29)

b. and takes precedence over the general statement of an objective:

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"to continue to provide a comprehensive network of public and private health, social and economic services to meet the need of the residents of Ward 6." (Ward 6 Plan, "Ward 6 Objectives in Support of Human Services," Sec. 1729.1(c))

Note further in this context the specific conditioning of the Objective "to meet the need of the residents of Ward Six" – the applicant has not provided any assurances that the facility will provide services exclusively, or even predominantly, targeted at the residents of Ward 6.

2. The Comprehensive Plan recognizes the impact that CBRFs can have on Ward 6 neighborhoods, and calls for the elaboration of a plan for their dispersal:

"...the District government needs to plan for the equitable disbursement of its CBRFs so that there is minimal impact on residential neighborhoods, not only of Ward 6, but throughout the District, except that the disbursement shall not violate the Fair Housing Amendments Act, approved March 12, 1989 ..." (Ward 6 Plan, "Ward 6 Public Facilities"; Sec. 1716.2, also Exhibit 3, 7)

B. Other Comprehensive Plan provisions

a. Generally address the issues judged relevant to the community

"[f]rom 9th Street on Pennsylvania Avenue, S.E. to Barney Circle, there is an opportunity through careful planning and special streetscape to convert this portion of historic Pennsylvania Avenue into an attractive area which will attract compatible development that will encourage neighborhood revitalization. Unfortunately, much of the land use is not devoted to service stations and fast food restaurants." (Ward 6 Plan, "Ward 6 Land Use," Sec. 1732.6; also Exhibit 3, 9)

b. And established a specific process for determining how development is to be planned for by designating the Potomac Avenue Metro station area as a Special Treatment Area

"to emphasize economic development potential in balance with predominantly residential character of area." (Ward 6 Plan, "Ward 6 Actions to Implement the Plan: Land Use;" Sec. 1735.1(j), also Exhibit 3, 10)

"Designate area around Potomac Avenue Metro Station as a Special Treatment Area," (Ward 6 Objectives for Economic Development, 1703.1(c)

c. Community interest is reinforced very specifically in the provisions on

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Transportation Policy:

"to ensure that development adjacent to the Ward 6 Metrorail stations enhances ridership." (Ward 6 Plan, "Policies in Support of Transportation Objectives," Sec. 1714.1(b); also Exhibit 3, 10)

C. Strategic Neighborhood Plans

1. Process

a. Important Mayoral initiative, conducted by the Office of Planning, to consult with neighborhoods and residents to identify goals, assess neighborhood needs and priorities.

b. Cluster 26 encompassed the proposed Boys Town site. Subject of numerous public meetings, participation and intervention by individual citizens and community organizations.

c. Not legally-binding and recommendations will not have force of law
(1). But extent of participation, official emphasis should mean that effort, and results, should be considered seriously by this body

2. Key results
a. Strengthening the land use review process
(1) Cluster 26 participants noted "need to institute appropriate hearing process," "institute neighborhood based planning," "require neighborhood early notification of any mid to large size projects," "impose a moratorium on new development on Pennsylvania Avenue," "eliminate abnormalities in existing zoning," "create land use plans at Potomac Avenue Metro," and "review zoning to strengthen residential neighborhood uses." (DC Strategic Plan and Budget for 2000-01 (Draft), , see Exhibit 3, 13.

IV. Conclusions
A. The Comprehensive Plan is important
1. As law
2. As an expression of the will of public officials–mayor and city council–of the District of Columbia
3. As an indication of the hopes, desires, aspirations, and determination of the residents of Ward 6, who had much to do with its preparation
B. The Strategic Neighborhood Action Plan is also important
1. Indicative of the determination and participation of the residents
C. Conclusions to be drawn from a review of the Comprehensive Plan couldn't be clearer:
1. Support need for a review of all aspects of the Boys Town application

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2. Oppose on the merits of the case
3. and on the process

D.

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Ellen Opper-Weiner, Vice-Chair
Southeast Citizens for Smart Development, Inc.

Ms. Opper-Weiner will provide a brief statement summarizing the Appellants' position in this appeal, and the need for review by the Board of Zoning Adjustment.