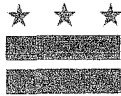


GOVERNMENT OF THE DISTRICT OF COLUMBIA  
OFFICE OF PLANNING



Office of the Director

RECEIVED  
D.C. OFFICE OF ZONING  
2006 AUG 28 PM 3:10

**FURTHER INFORMATION**

TO: District of Columbia Zoning Commission

FROM: *JS for*  
Ellen McCarthy, Director

DATE: August 28, 2006

SUBJECT: Zoning Commission – **88-34A**  
**Final Report** - PUD Modification Request  
Children's National Medical Center (Children's Hospital)

**ZONING COMMISSION**  
District of Columbia

CASE NO. 88-34A

EXHIBIT NO. 23

**RECOMMENDATION**

The Office of Planning supports the modification request for Children's National Medical Center (CNMC), including:

- Financial contribution to signalization improvements at Michigan Avenue and Hospital Center Drive as stipulated by DDOT.
- Transportation demand strategies outlined in the applicant's traffic study and supported by DDOT.

**BACKGROUND**

Children's National Medical Center is requesting the modification of a previously approved PUD to accommodate current expansion of the medical center, which includes:

- The 5<sup>th</sup> and 6<sup>th</sup> Floors of the East Tower
- North additions of Post-OP unit, floors 2, 3, 4 and 5.5 as stated by the applicant.

Subsequent to the first modification order issued by the Zoning Commission in 1989, the hospital proceeded with further additions without additional PUD modifications. The additions were approved by issued building permits and believed to be matter-of-right based on comments made by the Commission at the hearing held on April 13, 1989, whereby the Commission questioned whether further expansion warranted modification approval to the Commission. At that time the Commission noted that there was approximately 150,000 square feet left for build-out for the eastern side expansion and that if there were changes to the design and additional expansion beyond the building's

**ZONING COMMISSION**  
District of Columbia  
CASE NO. 88-34A  
EXHIBIT NO. 23

footprint as approved, further modification would not be necessary.

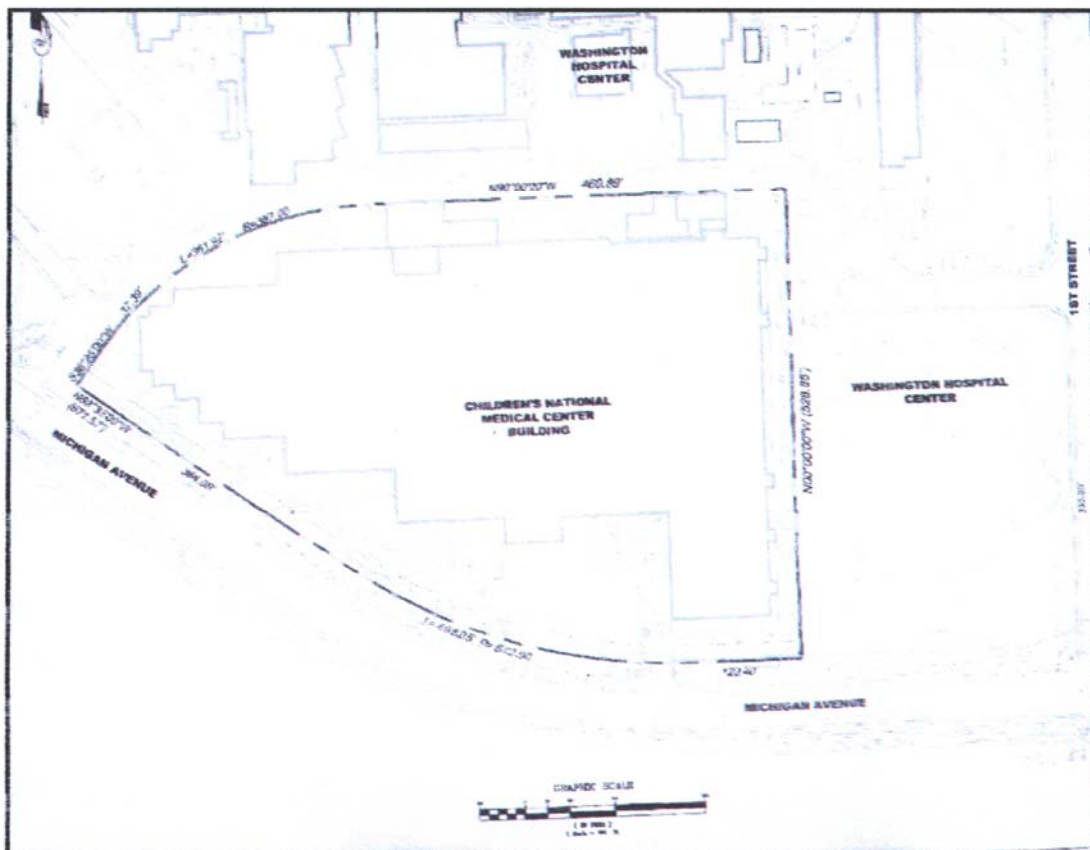
*(Appendix A - Transcript of Proceedings. (pgs 45-49). Prehearing Submission Supplemental, August 18, 2006).*

OP believes that all additions subsequent to the approved modifications specified by ZC Order 619 (1989) should be brought into conformance as a modification of the original plan through this current request.

At its June 12, 2006 ZC Meeting, the Zoning Commission set this application down for a Public Hearing. The applicant was asked to clarify:

- Prior additions and a detailed roof plan;
- The site's change to the SP-2 Zone;
- The roadway improvements conditioned as part of the Washington Hospital Center's expansion outlined in Order # 02-43 (February 24, 2003).

## AREA DESCRIPTION



Existing Site Layout of the Children's National Medical Center

The Children's Hospital subject site is a 7.3 acres (leased) portion of a forty-six (46.32) acre site at 110 Irving Street, N.W. The hospital is located in Square 3129 which contains numerous medical facilities including the Washington Hospital Center, the National

Rehabilitation Hospital, the Veterans Administration Hospital, the Physicians Office Building, the Nurses Home and the Hyman Building. Directly to the north and south of Square 3129 are federal facilities, including the United States' Soldier's Home to the north, and the McMillan Reservoir to the south. Adjacent to the McMillan Reservoir is the District of Columbia Filtration Station. The square is a mix of SP-1 and SP-2 zoning. The Children's Hospital site, located on a portion of Record Lot 2 is shown as zoned SP-2, which was part of the rezoning of the entire Washington Hospital Center campus governed by ZC Orders 969 and 02-43.

### COMMISSION CONCERNS

At the setdown meeting on June 12, 2006, the Commission requested the applicant provide information on the prior additions, clarification on the site's current zoning and WHC's amenities including road improvements outlined in WHC's Order 02-43 issued in 2003.

- A. The following table provides an outline of the site's development based on previously issued ZC orders:

Table 1 : (Based on information provided by the applicant and existing ZC orders).

| Status/Approvals                                              | Structure                                                                                                                 | Stories        | Height   | FAR                                             | Lot Occupancy | # Parking Spaces                                                   | Year Completed |
|---------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------|----------------|----------|-------------------------------------------------|---------------|--------------------------------------------------------------------|----------------|
| <b>Phase I<sup>1</sup></b><br>(Approved by BZA Order # 10369) | a) Main Building<br>b) Underground parking facility                                                                       | 4              | 91.5 ft. | 1.53                                            | 40.8%         | 1000 approved<br>881 built                                         | 1972           |
| <b>Phase II</b><br>Order 619 (1989)                           | a) Building (MOB-Modified Phase II)<br>b) Helipad to roof of 4 story structure<br>c) 4-level Below grade Parking Facility | 7<br>105,000sf | 127.5 ft | 2.45 approved for entire site<br><br>1.89 built | 59.4%         | 1,930 spaces currently on site.<br>(Pursuant to Phase II approval) | 1990's         |

As outlined in the Table 1 above, the hospital's construction began in 1972 as Phase I and the main facility was opened in 1974. This consists of a five-story structure with interstitial floors for mechanical equipment, which services the floors beneath. Phase II of the project was initiated after 1989 and included a medical office building, parking facility, and a helipad.

<sup>1</sup> Order #14 (1970) - Approved the hospital in two phases. In addition, the site was recognized by the Commission as rezoned from R-5-A to SP-2 in the subsequent modification, Order 619 (July 10, 1989).

**Additions subsequent to PUD modification approvals**

Subsequent to the Phase II build-outs, construction proceeded with building permits issued from 1992 up to May 4, 2006 without further modification approval. The following table provided by the applicant outlines additional development permitted by building permits only. The permits were issued as alteration, repair and renovation permits.

Table 2

| Item | Status/Approvals                         | Structure                                                                                              | GFA                                                                                                  | Total FAR | Year Completed            |
|------|------------------------------------------|--------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|-----------|---------------------------|
|      | PUD Mod Approval (1989)                  | (See Table 1)                                                                                          |                                                                                                      | 1.89      | 1990's                    |
| 1    | Building Permit without PUD Modification | Miscellaneous In-Fill:<br>ENT<br>Pulmonary<br>Cafeteria                                                | 3,600 sf<br>1,800 sf<br>2,700 sf                                                                     | 1.92      | 1991                      |
| 2    | Building Permit without PUD Modification | Construction of 5 <sup>th</sup> and 6 <sup>th</sup> Floor Research Shell Space (New shell and fit-out) | 77,947 sf                                                                                            | 2.16      | 12/11/94                  |
| 3    | Building Permit without PUD Modification | MRI Fit-Up, 2 <sup>nd</sup> Floor East Addition (New shell and fit-out)                                | 13,100 sf                                                                                            | 2.20      | 1995                      |
| 4    | Building Permit without PUD Modification | Emergency Room Renovation & Expansion and Waiting Room                                                 | 26,150 sf                                                                                            | 2.29      | 2/2001                    |
| 5    | Building Permit without PUD Modification | Cardiac Cath Lab (New shell and fit-out)                                                               | 9,786 sf                                                                                             | 2.32      | <i>Date not available</i> |
| 6    | Building Permit without PUD Modification | Perioperative (New shell and fit-out)                                                                  | 13,234 sf                                                                                            | 2.36      | 12/2005                   |
| 7    | Building Permit without PUD Modification | 6 <sup>th</sup> Floor Research Core & Shell                                                            | 49,242 sf                                                                                            | 2.5       | 8/31/06                   |
| 8    | Building Permit without PUD Modification | East Addition (4 Story) Steel, Core and Shell                                                          | 2 <sup>nd</sup> 11,880 sf<br>3 <sup>rd</sup> 48,000 sf<br>3.5 48,000 sf<br>4 <sup>th</sup> 48,000 sf | 3.0       | 2006                      |
| 9    | Building Permit without PUD Modification | East Addition Fit-Out                                                                                  | <i>See above</i>                                                                                     | 3.0       | <i>In progress</i>        |
| 10   | Building Permit without PUD Modification | Chiller Plant                                                                                          | 4,500 sf                                                                                             | 3.0       | <i>In progress</i>        |
| 11   | Case No. 88-34A (Pending ZC approval)    | East Addition – 5 <sup>th</sup> and 6 <sup>th</sup> Floors                                             | 5 <sup>th</sup> 48,000 sf<br>6 <sup>th</sup> 48,000 sf                                               | 3.3       | <i>n/a</i>                |
| 12   | Case No. 88-34A                          | North Post-Up Floors 2, 3, 4 and 5 <sup>2</sup>                                                        | 72,000 sf<br>(18,000 sf /fl)                                                                         | 3.55      | <i>n/a</i>                |

<sup>2</sup> Issues regarding the exact configuration of the 5<sup>th</sup> Floor of the Post-Up are still being resolved. Accordingly, the 5<sup>th</sup> Floor is not shown on the architectural plans and drawings. If it is constructed, the

Additions currently requested by the applicant as part of the current modification application:

- Item 11: A 96,000 square feet addition to the East Wing of the hospital, configured as two additional floors to the East Wing Tower, which is the space currently under construction. This is an integral aspect of the Neonatal Intensive Care Unit's current expansion, and according to the applicant it must occur prior to the expansion of the Operating Rooms' (OR) Post OP expansion.
- Item 12: A 72,000 square feet addition (on the north elevation) to permit temporary transfer of operating rooms prior to the delivery of the eleven operating rooms anticipated by the OR renovation. The complete OR renovation would accommodate 19 operating rooms with additional area for future expansion as necessary, additional staff rooms, office space and reception areas.

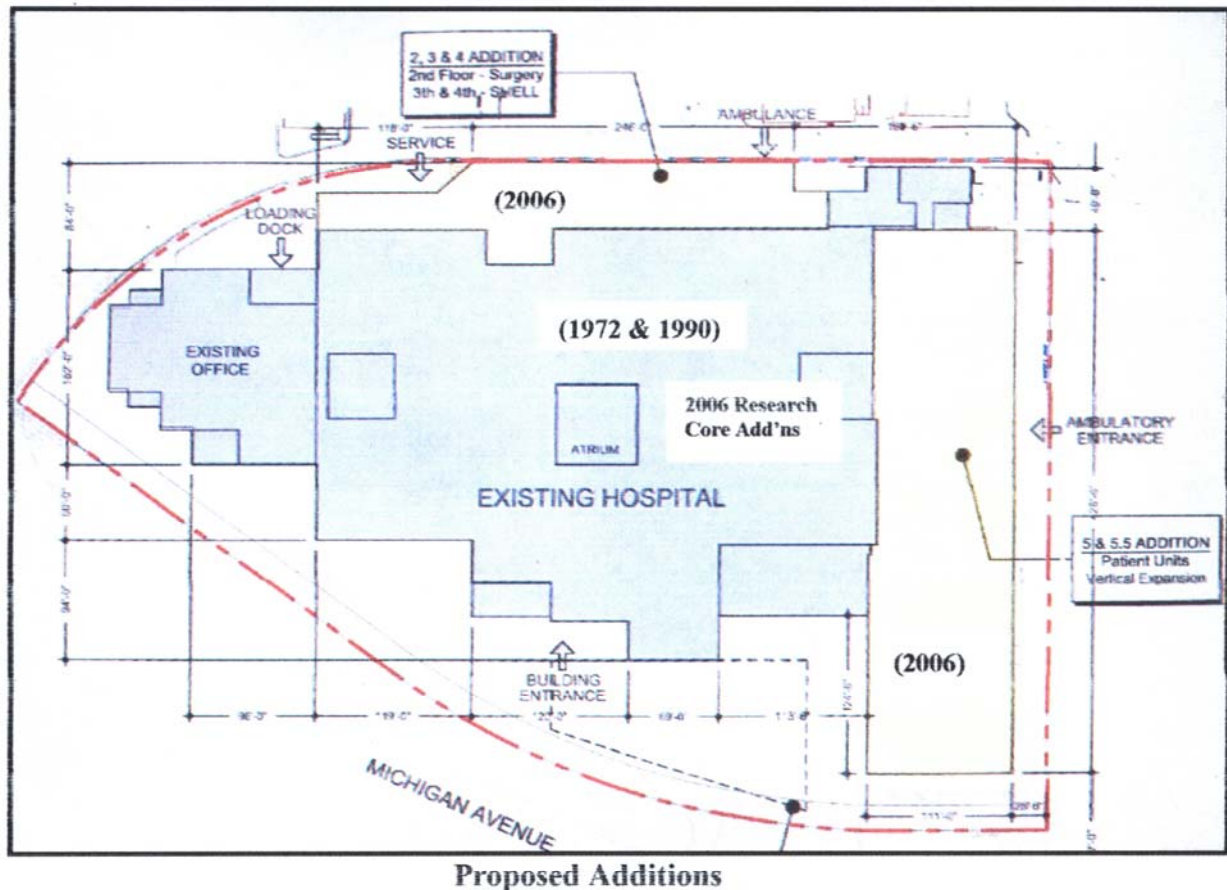
The expansion to date representing items 1 through 12, total ~~525,939~~ square feet. The applicant's submission mentions a further 150,000 square foot addition to the front of the hospital building (not listed in the above table) which would be part of a future application.

The applicant has submitted portions of the Transcript of Proceedings for #88-34M/70-3 to support the recent additions as matter-of-right subsequent to the last modification order. However, OP believes that all additions subsequent to the approved modifications specified by ZC Order 619 (1989) including the additions listed in items 1 through 12 in Table 2 should be brought into conformance as a modification of the original plan through this current request.

OP has no information regarding the square footage of the interstitial floors used for mechanical purposes. Zoning Commission Order #14, condition (g) states that "the nine-foot service space between the use floors will not be counted in the F.A.R. to the extent that space is used for utilities and services. Otherwise the service space shall count in the FAR. Within this enlarged service space and the common clear space will be located specialized hospital utility services such as laminar air flow devices and electronic sensors and controls..."

---

5<sup>th</sup> Floor would not include more than 18,000 square feet and would not modify the proposed footprint of the Post-Up. (As stated by the applicant).

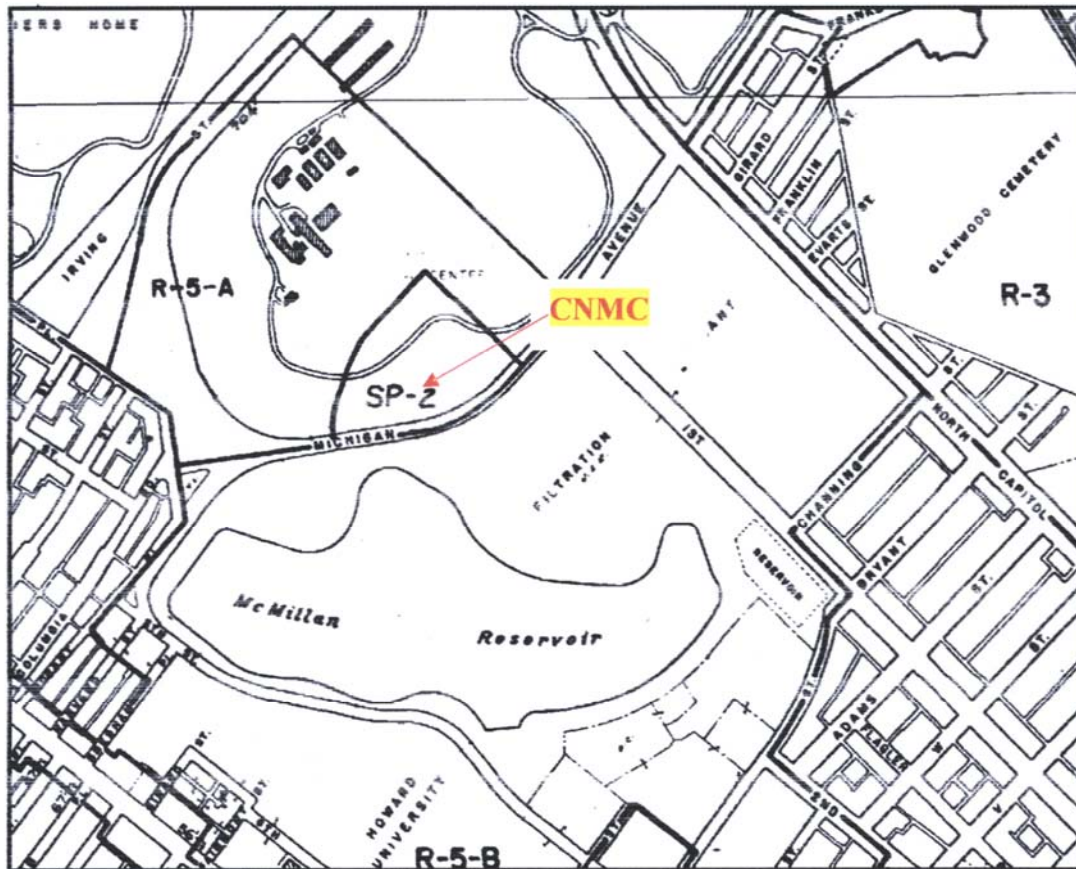


## B. Current Zoning

In 1978, the Zoning Commission adopted amendments to the Zoning Regulations which included the revision of the SP District to "redesignate all that property designated "SP" on the Zoning Map to "SP-2" (Applicant's submission Exhibit #4).

Notwithstanding the recent building permits which classified the site as R-5-A, the Zoning Commission recognized the site as SP-2 zoned in Zoning Commission Order # 619 (July 10, 1989) in its Findings of Fact (No. 1) where it specifically states that "...The site is currently zoned SP-2 today." Thereafter, approval was granted for the modification requested in that order based on the provisions of the SP-2 zone district (Findings of Fact No. 9 and No. 11).

In addition, the District of Columbia Zoning Map (corrected to April 1, 1996) depicts the Children's Hospital site as SP-2 and the Washington Hospital Center site as R-5-A. OP discussed the zoning query with the Office of Zoning and requested the applicant obtain a certification letter from the Office of Zoning confirming the current SP-2 zone designation.



**Zoning Map (1996)**

The SP-2 District permits matter-of-right medium/high density development including all kinds of residential uses, with limited offices for non-profit organizations, trade associations and professionals permitted as a special exception. A maximum height of ninety feet, a maximum floor area ratio (FAR) of 6.0 for residential and 3.5 for other permitted uses, (4.5 with a PUD) and a maximum lot occupancy of eighty percent for residential uses are permitted. Current development data as provided by the applicant is shown below:

|                          | <b>SP PUD<br/>Guidelines<br/>(1970)</b>                                    | <b>SP-2 PUD<br/>Guidelines<br/>(2006)</b>                                  | <b>Order No. 619<br/>Approval</b>  | <b>Proposed<br/>Addition</b>                                       |
|--------------------------|----------------------------------------------------------------------------|----------------------------------------------------------------------------|------------------------------------|--------------------------------------------------------------------|
| Minimum Area/Lot<br>Area | 3 acres for<br>R-5-A<br>1 acre for SP                                      | 15,000 sf                                                                  | 7.3 acres (317,995<br>square feet) | 7.3 acres (317,995<br>square feet)                                 |
| Gross Floor Area         | 1,907,970 sf                                                               | 1,430,977.5 sf                                                             | appx 779,088 sf                    | 1,204,291 sf                                                       |
| TOTAL FAR                | 6.0                                                                        | 4.5                                                                        | <b>2.45</b>                        | <b>3.55</b>                                                        |
| Height                   | 130 feet                                                                   | 90 feet                                                                    | 127.5 feet                         | 127.5 feet                                                         |
| Lot Occupancy            | 75%                                                                        | 80%                                                                        | 59.4%                              | 61.8%                                                              |
| Parking                  | 1 per hospital bed<br>plus 1 for each<br>1,800 sf in excess<br>of 2,000 sf | 1 per hospital bed<br>plus 1 for each<br>1,800 sf in excess<br>of 2,000 sf | Minimum of<br>1,540 spaces         | 1,930 spaces<br>(existing on-site,<br>no addition is<br>requested) |

The above table indicates that the current FAR represents an increase beyond that approved by Order # 619. However, the FAR remains within the permitted maximum range of 4.5 for an SP-2 PUD.

OP has no objection to this increase since the improvements were necessary to the hospital’s efficiency in its service delivery, including the hospital’s requirement in meeting the federally mandated Emergency Preparedness Plan for medical facilities by 2007. In this case, granting the increase in the FAR would result in the continuation of high quality and necessary pediatric services for the District.

### **C. Washington Hospital Center’s Roadway Improvements**

The Washington Hospital’s Center Master Plan 2000 was submitted to the Zoning Commission record on April 6, 2001(ZC 02-43). Approval issued in February 2003, by decision of Order 02-43 (Pg. 10) conditioned the second-stage PUD and related map amendment (from R-5-A to SP-1 and SP-2 zone districts) with transportation-related commitments, including roadway and traffic signalization improvements in the vicinity of Square 3129, at Michigan Avenue, First Street, Irving Street and North Capitol Street. The roadway improvements required by the Order were to be constructed prior to the issuance of a Certificate of Occupancy for any structure that causes the total development on the property to be increased by 300,000 square feet of net building space (including underground parking or parking facilities).

To date, out of the six roadway improvements conditioned in the Order, two have been completed. Outstanding improvements to be made include:

- Irving Street and Hobart Place at-grade access
- Irving Street at-grade right turn in and right turn out access to Parking Pavilion I
- Michigan Avenue and Hospital Center Drive signalization and signage.
- Michigan Avenue and First Street *signalization and geometric improvements.*

Notwithstanding the on-going expansion of Children’s Hospital, OP believes (after consultation with DDOT) that the traffic impacts arising from the increased density on the CNMC’s site should be mitigated by some of the transportation-related improvements outlined above for the larger WHC’s campus, including the signalization improvements outlined in WHC’s Order.

### **PUD EVALUATION STANDARDS**

The purpose and standards for Planned Unit Developments are outlined in 11 DCMR, Chapter 24. Section 2400.1 states that a PUD is “designed to encourage high quality development that provide public benefits.”

The proposed and ongoing development is an effort to meet federal guidelines and to upgrade existing facilities to contemporary standards. The additions are designed to

improve service delivery including post-operative care and operating room expansions to accommodate the hospital's patients and families.

### Public Benefits and Amenities

OP believes that the benefits to the community from the proposed project compensate for the increase in the requested FAR beyond the previously approved. Section 2403.9 outlines ways in which benefits and amenities may be exhibited.

- (a) Urban design, architecture, landscaping, or creation or preservation of open spaces;*
- (b) Site planning, and efficient and economical land utilization;*

The design and architecture of the building is multifaceted as it is intended to accommodate a comprehensive and innovative medical care facility for younger patients and their families. In addition, the federally mandated decontamination facility was designed to accommodate children and families in emergency situations.

The additions increase the lot occupancy by 2.4% hence the open space on the site has not been substantially reduced by the additional development. The existing landscaping has not been impacted by the site's expansion, since the majority of the expansion is to the rear and east of the site, whereas the landscaping is focused on the Michigan Avenue Street frontage. Overall the design remains within the architectural character of the previously approved building.

The site planning and land utilization remains within the parameters of the original approval and the expansions to date are within the design framework of the site's original planning and design. The majority of the addition involves the vertical expansion of the existing buildings, including the main building and the east tower.

- (c) Effective and safe vehicular and pedestrian access, transportation management measures, connections to public transit service, and other measures to mitigate adverse traffic impacts;*

With respect to parking, the site's expansion would not have an adverse impact on parking at the facility, since the number of spaces provided (1930) remains above the minimum required (1540) by the Zone Regulations. The site is well served by a number of Metrobus routes. The applicant has produced a traffic study, including measures for traffic mitigation for evaluation by the District Department of Transportation (DDOT). DDOT has agreed to the applicant's commitment to mitigate some of the traffic impacts based on the Washington Hospital Center's campus expansion previously approved in ZC Order # 969, including the signalization improvements at Michigan Avenue and Hospital Center Drive.

The applicant's traffic projection study targeted the completion of the proposed additions by the year 2007 and their study determined that only the approved Washington Hospital

Center Master Plan development would have some impact on the local area road network.<sup>3</sup>

The applicant's study recommends mitigation measures classified as physical/operational and transportation demand management measures (page 22). The latter has been outlined in the traffic study. However, the physical/operational measures that have been offered by CNMC include a contribution of \$35,000 toward the \$100,000 stipulated by the Commission for signalization improvements at Michigan Avenue and Hospital Center Drive. DDOT has requested the applicant to provide no less than 1/3 of the cost of signalization, which has increased to approximately \$250,000 as an appropriate benefit and mitigation to balance the requested flexibility for additional FAR.

### **DDOT's COMMENTS**

The applicant submitted its assessment of the potential impact on the existing traffic and circulation to DDOT for comments. In preliminary comments to OP, while DDOT supports the contribution to the signalization improvements, the amount of \$35,000 was deemed inadequate to address the required improvement at this intersection, since the cost of signalization has increased beyond the \$100,000 as stated in the WHC's Order.

DDOT concurs with the analysis presented and finds no significant impacts against the applicant. DDOT has requested a meeting with all hospitals within the campus, including Washington Hospital Center, National Rehab Hospital, the Veterans Hospital and CNMC in an effort to coordinate future campus plans and scheduling for items approved in past PUD applications.

DDOT concludes that:

1. **Michigan Avenue at First Street** will operate at an acceptable level of service and no significant impacts are anticipated to the signal timing or operation at this intersection for existing and projected traffic for 2007.
2. **Michigan Avenue at Hospital Center Drive** – Currently unsignalized and presents significant impacts to the operation of this roadway. As indicated in the PUD for Washington Hospital Center, a signal was proposed for this location. However, it was never installed. Therefore, the recommendation from CNMC is to participate in funding for this signal at what appears to be 1/3 the amount. Their proposed level of participation is based on outdated cost estimate for the construction of a signal. The current cost for signal installation is approximately \$200,000 to \$250,000 including design. Therefore, the level of contribution from \$35,000 needs adjustment and a written commitment in a MOU or a legally binding document is required for their contribution. The signalized driveway presents no significant impacts.

---

<sup>3</sup> Appendix B. Traffic Impact Analysis (CNMC) August 2, 2006, pg. 10.

3. **Michigan Avenue at CNMC Parking Garage Entry**- Currently unsignalized. This shows levels of service improving with a reduction in delays. DDOT agrees and does not believe that negative impacts will be encountered as long as the new signal at the Hospital Center Drive is installed.
4. **Michigan Avenue at CNMC Parking Garage Exit**-Currently signalized. This shows levels of service improving. DDOT agrees and does not believe that negative impacts will be encountered as long as new signal at the Hospital Center Drive is installed.
5. **North Capitol Street at Michigan Avenue**-Currently signalized, with levels of service projected to stay at current levels.

*(d)Employment and training opportunities;*

The applicant has committed to participating in a First Source Agreement with the Department of Employment Services. The development project currently participates in a First Source Agreement with a Memorandum of Understanding.

*(e) Environmental benefits, such as stormwater runoff controls and preservation of open space or trees;*

Due to the nature of the additions, OP does not believe additional storm water controls are necessary and notes that the issue has been evaluated at the building permit review and final permits have been issued for the subject expansion.

*(i) Uses of special value to the neighborhood or the District of Columbia as a whole;*

The expansion including operating theatres, post operative rooms and neo-natal services would provide enhanced delivery of the hospital’s nationally recognized services to the community.

**COMPREHENSIVE PLAN**

In evaluating the requested modification for consistency with the Comprehensive Plan, the Office of Planning considered consistency with its themes, objectives and policies and with the Generalized Land Use Map, as it related to the previously approved PUD.

The Generalized Land Use Map of the Comprehensive Plan designates the site as "institutional" in recognition of the hospital use. Therefore, the Children's Hospital expansion is consistent with the Comprehensive Plan.

The additions seek to improve the efficiency of the services provided by the hospital and represent a modest increase in the previously approved area. OP believes they are consistent with the major elements of the Comprehensive Plan, as established for the original Phase II approved by the Zoning Commission.

The additions further many of the objectives and policies of many of the Comprehensive Plan's major elements, including the Human Services Element (Chapter 10). Section 1000.1 declares as a major policy that the provision of medical and health care, including care for children is part of the range of indispensable services that are critical to the District community. This element also establishes policies in support of its human services delivery system objective of ensuring a broad range of community-based human services for those in need: maintain and improve services for all children and adults in twenty-four hour care facilities (10 DCMR § 1002.2(c)) and place clients of the health care system in settings most appropriate to their needs (10 DCMR § 1002.2(d)).

OP believes that the proposed improvements and related modifications would further these policies and result in the availability of optimum care for the District's children.

#### **COMMUNITY COMMENTS**

The ANC5C unanimously voted to recommend approval of the subject modification at its regularly scheduled meeting on June 28, 2006. No other community comments were received.

#### **RECOMMENDATION**

The Office of Planning believes that the modification request is within the guidelines of the previously approved PUD and the additions do not change the material facts upon which the previous application was decided. OP also supports all additions subsequent to ZC Order 619 (1989) being included in this current request. However, any future addition should be approved by the Zoning Commission through a new modification request.

OP is satisfied that the applicant has included a contribution to traffic mitigation measures and an agreement between CNMC and DDOT should be submitted prior to final action regarding the contribution amount as stipulated by DDOT. Therefore the Office of Planning supports the modification request and prior additions subject to the following conditions:

- A Financial contribution to signalization improvements at Michigan Avenue and Hospital Center Drive as agreed to by DDOT; and the
- Transportation demand strategies outlined in the applicant's traffic study and supported by DDOT.