EXHIBIT D

Evaluation of Comprehensive Plan Consistency

Pursuant to 11-Z DCMR § 302.10(m), as part of its review the Commission must find the proposed IRC medical campus plan to be not inconsistent with the Comprehensive Plan ("**Comp Plan**").[1] As stated in the Framework Element, in deciding as to Comp Plan consistency, "the [Commission] must consider the many competing, and sometimes conflicting, policies of the [Comp Plan], along with the various uses, development standards and requirements of the zone districts. It is the responsibility of the [Commission] to consider and balance those policies relevant and material to the individual case...and clearly explain its decision-making rationale." 10-A DCMR § 224.8. This standard is reinforced by the Framework Element's guidance specific to interpreting the FLUM and GPM land use categories, which similarly directs that the Commission "considers and balances the competing and sometimes conflicting aspects of the Comprehensive Plan, including the policies and text; the intent of the Future Land Use Map land use category; and the Future Land Use Map and Generalized Policy Map." 10-A DCMR § 227.2. To approve the IRC medical campus plan, the Commission must consider and balance potential Comp Plan consistencies and inconsistencies to make an overall determination as to whether the IRC medical campus plan is "not inconsistent" with the Comp Plan when read as a whole.

Equity, and particularly racial equity, is a primary focus of the Comp Plan, especially in the context of zoning where certain priorities stand out, including affordable housing, avoiding displacement of existing residents, and creating / increasing access to opportunity. The Framework Element states that equity is both an outcome and a process. 10-A DCMR § 213.6. The Comp Plan emphasizes that considerations of equity must be part of a District agency's evaluation and implementation of Comp Plan policies and actions. The Implementation Element requires the Commission to evaluate all proposed zoning actions " through a racial equity lens" as part of its Comp Plan consistency analysis. 10-A DCMR § 2501.8.

To assist the Commission in applying a racial equity lens to its Comp Plan determinations, the Commission developed a Racial Equity Tool (published on February 3, 2023) that applicants are expected to utilize throughout the process of a proposed zoning action. The Racial Equity Tool emphasizes community outreach, and is intended to facilitate proactive and meaningful engagement with the community most likely to be affected by the proposed zoning action in order to: (i) gain insight on negative conditions that may exist in the community, particularly those that are a result of past and present discrimination, (ii) develop an understanding of community priorities, and (iii) solicit input on potential positive and negative outcomes of the proposed zoning action. Preparation of the following Comp Plan evaluation was guided by the Commission's Racial Equity Tool.

Per **Part I (Racial Equity Analysis Submissions – Guidance Regarding the Comprehensive Plan)** of the Racial Equity Tool, the Applicant has conducted a thorough evaluation of the IRC medical campus plan's consistency with Comp Plan policy guidance. In conducting this evaluation, the Applicant has thoroughly considered the goals and policies of each Comp Plan element. For those Citywide Elements that are more directly applicable to the IRC medical campus plan, a narrative is provided explaining the basis for the Applicant's determination

[1] D.C. Law L23-0217 (Comprehensive Plan Amendment Act of 2017) and D.C. Law 24-0020 (Comprehensive Plan Amendment Act of 2020), including the Generalized Policy Map ("**GPM**") and Future Land Use Map ("**FLUM**") (D.C. Resolution R24-0292).

that the IRC medical campus plan is not inconsistent with that element. In addition, the Applicant's evaluation also includes a specific assessment of potential Comp Plan inconsistencies. In particular, the Applicant finds that the proposed IRC medical campus plan will advance several policies within the Rock Creek West, Land Use, Housing, Transportation, Environmental Protection, Urban Design, and Community Services and Facilities Elements related to senior housing, institutional land uses, neighborhood compatibility, and the provision of continuing care retirement community services. At the same time, the Applicant's evaluation also identified certain policies within the Land Use, Environmental Protection, Urban Design, and the Rock Creek West Area Elements that may be viewed as being in potential tension with the proposed independent living building's height, scale, and siting. As detailed in the Potential Comp Plan Inconsistencies section below, the Applicant does not believe any of these potential tensions rise to the level of a policy inconsistency that would preclude approval, and, to the extent any are ultimately viewed as inconsistencies, the Applicant finds that they are substantially outweighed by the numerous competing Comp Plan policies advanced by the IRC medical campus plan. Accordingly, the Applicant finds that the IRC medical campus plan is not inconsistent with the Comp Plan when read as a whole.

GENERALIZED POLICY MAP (GPM)



Figure 1: Excerpt of GPM showing the IRC campus split-designated as Institutional (western portion) and Neighborhood Conservation Area (eastern portion).

As shown in **Figure 1**, the GPM depicts the IRC campus with a split designation: the western portion of the campus is designated as Institutional, while the eastern portion—including the location of the proposed independent living building on the south end of the campus—is designated as a Neighborhood Conservation Area. The Framework Element states that while Institutional sites are not designated as Conservation, Enhancement, or Land Use Change Areas, this "does not mean they are exempt from the Comprehensive Plan or that their land uses will remain static." 10-A DCMR § 225.22. The Framework Element further recognizes that institutional sites "likewise may see new buildings or facilities added" and that "[p]olicies in the Land Use and the Educational Facilities Elements address the compatibility of such uses with surrounding neighborhoods." 10-A DCMR § 225.22. With respect to the Neighborhood Conservation Area designation, the Framework Element states that Neighborhood Conservation Areas "have little vacant or underutilized land" and "[m]aintenance of existing land uses and community character is anticipated." 10-A DCMR § 225.4. Where change occurs in Neighborhood Conservation Areas, "it will typically be modest in scale and will consist primarily of infill housing, public facilities, and institutional uses." 10-A-DCMR § 225.4. Importantly, the

Framework Element states that the "guiding philosophy in Neighborhood Conservation Areas is to conserve and enhance established neighborhoods, but not preclude development, particularly to address city-wide housing needs." 10-A DCMR § 225.5.

The IRC medical campus plan is not inconsistent with the GPM. Although the proposed independent living building is located within the portion of the campus designated as a Neighborhood Conservation Area, this does not give rise to a policy inconsistency for the following five (5) reasons:

1. The boundaries of the GPM are to be interpreted in concert with the Comp Plan text, the FLUM, and other Comp Plan maps, as well as the context of each location. 10-A DCMR § 225.2. The GPM does not follow parcel boundaries and is not intended to serve as a site-specific zoning overlay;
2. The guiding philosophy in Neighborhood Conservation Areas is to "conserve and enhance established neighborhoods, but not preclude development, particularly to address city-wide housing needs." 10A DCMR § 225.5. The District's population of older adults (persons 60 years of age and older) is expected to be the fastest growing segment of the District's population during the next 15 to 20 years. Census data shows that approximately 13% of the District' population is aged 65 or older. In contrast, the Rock Creek West planning area has approximately 20% of its residents age 65 and older, while Wards 3 and 4 have approximately 19% and 15%, respectively. The increased percentages within these defined geographic areas compared to the District as a whole underscore the acute need for senior housing in the primary area served by IRC;
3. The Neighborhood Conservation Area designation expressly permits change, including "infill housing, public facilities, and institutional uses." 10-A DCMR § 225.4. The proposed independent living building is both a housing use and an institutional use—which depending on market demand for various unit sizes will provide approximately 59 – 66 new independent living units, including 1 - 2 units in the existing Manor House. Additionally, one other independent living unit will be provided in the replacement structure on the north side of the IRC campus at 3024 Military Road, all within an established continuing care retirement community that has operated on this campus since the 1960s;
4. IRC has operated on this campus since the 1960s—well before the first Comp Plan maps were created in the 1980s, and the current split designation on the GPM has been in place since the GPM was first introduced in 2006. The designation of the eastern portion of the campus as a Neighborhood Conservation Area likely reflects the D.C. Council's intent that this portion of the campus, which is characterized by the wooded ravine and proximity to single-family homes, should remain protected from larger-scale development. The proposed medical campus plan is consistent with this intent because the building will be sited on the south end of the campus, significantly separated from the single-family homes to the east by the substantial wooded ravine, which is protected from any development until at least 2035 pursuant to previous agreements. As shown on the context map in **Figure 2**, the proposed building site is surrounded by institutional, embassy, and parkland uses rather than the lower-scale single-family residential uses that the Neighborhood Conservation Area designation is primarily intended to protect; and

5. The establishment of an overarching medical campus plan for the IRC campus will ensure that any future development on the campus is subject to the Zoning Commission's comprehensive public review process, providing an additional layer of protection for the surrounding neighborhood that did not exist prior to the medical campus plan regulations. This is reinforced by the Framework Element's own recognition that institutional land uses are not static: "[m]uch of the land identified as institutional on the map represents colleges and universities; change and infill can be expected on each campus consistent with campus plans. Other institutional sites, including hospitals and religious orders, likewise may see new buildings or facilities added." 10-A DCMR § 225.22. Although the proposed independent living building is sited on the portion of the campus designated as a Neighborhood Conservation Area rather than Institutional, this policy confirms that the Framework Element contemplates campus-wide change occurring "consistent with campus plans"—precisely the review mechanism the Applicant is pursuing here—and it is appropriate to consider the IRC campus as a whole, rather than each land use designation in isolation, consistent with the Framework Element's recognition that it is appropriate to consider the context of an entire site, such as aggregating density on one portion so as to increase open space on another, in evaluating overall Comp Plan consistency. 10-A DCMR § 224.7. Viewed as a whole, the IRC campus will continue to devote the vast majority of its Neighborhood Conservation Area acreage, including the wooded ravine, to open space and low-intensity uses, while concentrating new institutional development on the portion of the campus most proximate to the Institutional designation and most removed from single-family homes.



Figure 2: Map of IRC campus and surrounding context with location of proposed independent living building at southern end of campus marked by the red "X"

FUTURE LAND USE MAP (FLUM)



Figure 3: Excerpt of FLUM showing the IRC campus split-designated as Institutional (western portion) and Low Density Residential (eastern portion).

The FLUM shows the general character and distribution of recommended and planned uses across the city. 10-A DCMR §§ 200.5. The land use category descriptions on the FLUM describe the general character of development in each area. Critically, the FLUM "is not a zoning map" and is "intended to be interpreted broadly." 10-A DCMR § 228.1(a). The D.C. Court of Appeals has recognized this principle, holding that the FLUM is not a parcel-specific map and that its categories do not specify allowable uses or development standards. As shown in **Figure 3**, the FLUM depicts the IRC campus with a split designation: the western portion is designated as Institutional and the eastern portion—including the location of the proposed independent living building on the south end of the campus—is designated as Low Density Residential. The Framework Element defines the Institutional designation as including "land and facilities occupied and used by colleges and universities, large private schools, hospitals, religious organizations, and similar institutions." 10-A DCMR § 227.18. The Framework Element defines the Low-Density Residential designation as areas "generally, but not exclusively, suited for single family detached and semi-detached housing units with front, back, and side yards." 10-A DCMR § 227.5. Importantly, the Framework Element states that "[i]nstitutional uses are also permitted in other land use categories," including Low Density Residential. 10-A DCMR § 227.18. The Framework Element further states that the FLUM "does not show density or intensity on institutional and local public sites." 10A DCMR § 228.1(h).

The IRC medical campus plan is not inconsistent with the FLUM. Although the proposed independent living building is located within the portion of the campus designated as Low Density Residential, the Applicant does not believe this gives rise to a policy inconsistency for many of the same reasons that are provided above regarding the proposal consistency with the GPM. Namely, (i) the FLUM is a "soft-edged" map that is "not a zoning map" and is "intended to be interpreted broadly." (10-A DCMR § 228.1(a)), (ii) the proposed independent living units will provide housing—a residential use—which is the principal use contemplated by the Low Density Residential FLUM designation, and (iii) while the building's scale may differ from what is typically associated with the Low Density Residential land use category, the Framework Element expressly states that the Low Density Residential designation applies to areas "generally, but not

exclusively," suited for single-family housing (10-A DCMR § 227.5), and there are numerous institutional campuses located in low density residential areas that have similarly scaled buildings.

Significantly, the Zoning Regulations reinforce the compatibility of a CCRC within the Low Density Residential FLUM designation by allowing a CCRC use by special exception, subject to meeting specified criteria. Pursuant to the Zoning Act of 1938, zoning in the District shall not be inconsistent with the Comp Plan. The IRC campus is zoned R-1A with a small portion adjacent to Military Road zoned R-1B, which is consistent with the Low Density Residential FLUM designation. Under 11-U DCMR § 203.1(g) of the Zoning Regulations, a continuing care retirement community ("CCRC")—which is exactly what IRC is—is permitted by special exception in all residential zones, including the R-1A and R-1B zones. Uses that are permitted by special exception are presumed to be compatible with the zone in which they are located, provided they satisfy the applicable criteria. The special exception criteria for a CCRC are specifically designed to ensure Comp Plan consistency by addressing the concerns that the Low Density Residential FLUM designation (and the Neighborhood Conservation Area GPM designation) are intended to protect. Specifically, the special exception criteria for a CCRC require, among other things, that the use include dwelling units for independent living, assisted living facilities, or a licensed skilled nursing care facility (11-U DCMR § 203.1(g)(1)); that the use provide sufficient off-street parking (11-U DCMR § 203.1(g)(4)); and that the use and related facilities be located and designed so that they are not likely to become objectionable to neighboring properties because of noise, traffic, or other objectionable conditions (11-U DCMR § 203.1(g)(5)). The independent living building that is proposed as part of the IRC medical campus plan will satisfy all of these criteria:

- It will contain dwelling units for independent living within a CCRC that also includes assisted living and skilled nursing facilities;
- The building will contain approximately 145 structured parking spaces; and
- The outdoor areas are separated and buffered from nearby single-family residential uses by embassy residences, other institutional uses, federal parkland, and the protected wooded ravine that is on the IRC campus.

The proposed independent living building is fully aligned with the Comp Plan – Zoning Regulations – special exception review criteria progression that is mandated by the 1938 Zoning Act and thus is not inconsistent with the FLUM. This conclusion is further reinforced by the Framework Element's explicit guidance on future development at institutional sites depicted on the FLUM: while the Map "does not show density or intensity on institutional and local public sites," if a change in use occurs on such sites in the future, "the new designations should be generally comparable in density or intensity to those in the vicinity, unless otherwise stated in the Comprehensive Plan Area Elements or an approved Campus Plan." 10-A DCMR § 228.1(h) (emphasis added). This provision confirms that the Framework Element expressly contemplates an approved campus plan—precisely the review vehicle the Applicant is pursuing here—as an appropriate and anticipated basis for permitting density or intensity that might otherwise need to be strictly comparable to the surrounding vicinity. Further, embedded within the Zoning Commission's review of the overall IRC medical campus plan, and all future modifications, is an evaluation of compliance with the general special exception criteria of 11-U DCMR § 203.1(g),

providing a comprehensive evaluation of the CCRC use's compatibility with the R-1A and R-1B zones and, by extension, the Low Density Residential FLUM designation.

ROCK CREEK WEST AREA ELEMENT

The IRC medical campus plan is not inconsistent with the policies set forth in the Rock Creek West Area Element ("**RCW Element"**). The IRC Campus is located within the Rock Creek West Planning Area, a predominantly low-density residential area in upper northwest Washington, DC characterized by single-family homes, mature tree canopy, and established institutional uses. IRC has operated as a CCRC on this site for over six decades, serving as a quiet and considerate neighbor that has maintained substantial open space, landscaped grounds, and a park-like setting that complements the surrounding residential character. The proposed IRC medical campus plan will formalize the campus under the Zoning Commission's medical campus plan regulations and will facilitate the construction of approximately 59 – 66 new independent living units, including 1 - 2 units in the existing Manor House. Additionally, one other independent living unit will be provided in the replacement structure on the north side of the IRC campus at 3024 Military Road. As shown in Figure 2 above, the site of the proposed building is surrounded primarily by institutional, embassy, and parkland uses rather than single-family residential properties. This surrounding context demonstrates that the proposed independent living building will be well-buffered from the lower-density single-family residential areas in the neighborhood. The RCW Element supports the conservation and enhancement of established neighborhoods and the retention of institutional uses that contribute to the area's character and serve community needs. The proposed development is consistent with these objectives because it will continue the campus's longstanding institutional use, address the critical and growing need for senior housing in the District, and maintain the character of the site.

The IRC medical campus plan also advances the RCW Element's policies related to preserving neighborhood character and supporting institutional uses that benefit the community. IRC provides a continuum of care for its residents, including independent living, assisted living, memory care, and skilled nursing, and has historically contributed to the community through community partnerships and employment. The proposal will enable IRC to continue meeting the growing demand for senior living options, particularly independent living arrangements, while maintaining the campus' quiet operations, low traffic generation, and park-like setting. As shown in the concept plans for the proposed independent living building, it has been designed to be sensitive to the surrounding neighborhood through careful massing, setbacks, and landscaping. The building will include an active outdoor plaza and green terrace connecting it to the existing Manor House, enhancing the campus amenities for residents. Construction traffic for the project is anticipated to enter the IRC campus from the south along Broad Branch Road, minimizing impacts on Military Road and the residential areas to the north. As has successfully been done for past IRC projects, the Applicant intends to work closely with the Carnegie Institution of Washington to ensure that construction does not negatively impact Carnegie operations and programming.

LAND USE ELEMENT

Overall, the IRC medical campus plan is not inconsistent with the policies set forth in the Land Use Element. The Land Use Element recognizes the importance of institutional uses to the

economy, character, history, livability, and future of Washington, DC and its residents, and states that when such uses are permitted in residential neighborhoods, their design and operation should be sensitive to neighborhood issues and neighbors' quality of life (LU-2.3.5). The proposed IRC medical campus plan and proposed independent living building directly advance this policy by formalizing the IRC campus under an approved medical campus plan that will ensure the ongoing compatibility of IRC's operations with the surrounding low-density residential neighborhood, and providing approximately 60 - 67 new independent living units (59 – 66 within the new independent living building and existing manor house, and one (1) in the replacement structure at 3024 Military Road) within a long-established institutional setting without causing any displacement of existing residents or businesses.

The Land Use Element also supports ongoing efforts by institutions to mitigate their traffic and parking impacts through transportation demand management measures (LU-3.3.1), which the Applicant will address through the provision of adequate on-site parking and the medical campus plan process. Additionally, the Land Use Element encourages continued corporate citizenship among large institutions, including a commitment to high-quality architecture and design, expanded use of green building methods and low-impact development, and adaptive reuse and preservation of historic buildings (LU-3.3.2). The IRC medical campus plan advances this policy through its investment in new, high-quality senior living facilities that will be designed to complement the existing campus architecture and the surrounding neighborhood character.

The Land Use Element further provides that large nonprofits, service organizations, and other institutional uses that occupy large sites within residential areas should be planned, designed, and managed in a way that minimizes objectionable impacts on adjacent communities, and that expansion of these areas should not be permitted if the quality of life in adjacent residential areas is significantly adversely impacted (LU-3.3.3). The IRC medical campus plan is consistent with this policy because the proposed independent living building will occur entirely within the existing campus boundaries, will be substantially separated from surrounding single family residential developments, and will maintain substantial open space and landscaping on the IRC campus, including the heavily wooded ravine. The IRC campus will also become subject to comprehensive review by the Zoning Commission under the medical campus plan standards. The development standards for a medical campus are those of the zone in which the campus is located. However, through the medical campus plan review process, which provides opportunities for public engagement and participation, the Zoning Commission may allow for the comprehensive allocation of FAR, shared parking and loading, and other deviations from zoning requirements that result in an efficient use of land and delivery of services within the campus while avoiding undue impacts to adjacent properties and remaining in harmony with the surrounding neighborhood (11-X DCMR §§ 103.7 and 103.10).

TRANSPORTATION ELEMENT

The IRC medical campus plan is not inconsistent with the policies set forth in the Transportation Element. The IRC campus is located on Military Road, NW, with access from both Military Road and Broad Branch Road. IRC has historically operated with minimal traffic impact on the surrounding neighborhood due to the nature of a continuing care retirement community. The campus is served by the C81 and C87 Metrobus routes, which stop in front of the main campus entrance on Military Road. Additionally, the Friendship Heights Metrorail station is located

approximately 1.3 miles from the IRC campus, which residents and employees can access by using an IRC-provided shuttle service. The proposed IRC medical campus plan will add approximately 60 - 67 new independent living units (59 – 66 within the new independent living building and existing manor house, and one (1) in the replacement structure at 3024 Military Road) and approximately 145 structured parking spaces, which will be primarily accessed via an existing curb cut along Borad Branch Road. Construction traffic for the proposed independent living building is anticipated to enter the campus from the south along Broad Branch Road, which will minimize construction-related traffic impacts on Military Road and the residential neighborhoods to the north. The Transportation Element emphasizes multimodal transportation, transportation impact assessment, and context-sensitive transportation design (T-1.1.1, T-1.1.2, T-1.1.3). Consistent with these policies, the Applicant will prepare a comprehensive transportation study as part of the medical campus plan application to evaluate the transportation impacts of the proposed development. The IRC medical campus plan advances the Transportation Element's policies regarding equitable transportation access (T-1.1.7) by ensuring that the campus's transportation facilities serve the needs of residents, staff, and visitors without adversely impacting the surrounding neighborhood.

HOUSING ELEMENT

The IRC medical campus plan is not inconsistent with the policies of the Housing Element. District residents represent a wide spectrum, including a growing population of older adults who may seek to remain in their existing homes or downsize, while others may want or need retirement communities, assisted living, or congregate care facilities (H-1.3). The District's population of older adults (persons 60 years of age and older) is expected to continue to grow at a steady rate and to be the fastest growing segment of the District's population during the next 15 to 20 years. The Rock Creek West Planning Area, the planning area within which the IRC campus is located, has among the largest percentages of older adults in the District, many of whom are homeowners caring for their properties on a fixed income. As such, IRC serves a critical need by providing a supportive environment for seniors who either can no longer or prefer not to maintain independent homes but wish to remain in their community. The Housing Element recognizes this dynamic by emphasizing the importance of developing and maintaining a diverse housing stock of all sizes and types that can fit the needs of the variety of households. In fact, the element specifically promotes the development of neighborhood-based assisted living, adult day services with dementia care, and skilled nursing facilities, and states that zoning and health regulations should be designed to promote an increase in supply, security, and affordability of housing for older adults (H-1.3.3). The proposed IRC medical campus plan directly advances these policies and objectives by expanding the supply of independent living units through the construction of approximately 60 - 67 new independent living units (59 – 66 within the new independent living building and existing manor house, and one (1) in the replacement structure at 3024 Military Road) within the IRC CCRC, which also provides a full continuum of care, including assisted living, memory care, and skilled nursing.

ENVIRONMENTAL PROTECTION ELEMENT

The IRC medical campus plan is not inconsistent with the policies of the Environmental Protection Element. The IRC campus encompasses approximately 14 acres in a wooded setting

with substantial mature tree canopy, landscaped grounds, and open space. The Environmental Protection Element promotes tree retention and planting when new development occurs (E-2.1.2) and encourages the use of sustainable landscaping practices to beautify the District, enhance public spaces, reduce stormwater runoff, and create a stronger sense of character and identity (E-2.1.3). While the construction of the addition to the Manor House will result in the removal of approximately 240 trees, overall the proposed IRC medical campus plan will advance these policies by retaining substantial open space and mature trees on the campus while incorporating new landscaping as part of the proposed construction of the independent living building. The proposed development will also incorporate stormwater management best practices consistent with the Environmental Protection Element's policies promoting green infrastructure, including the use of landscaping and green roofs to reduce runoff (E-4.1.2). The existing tree canopy throughout the IRC campus, but particularly within the ravine area, is a significant environmental asset in the Rock Creek West area. IRC, as an important institutional landowner, will continue to maintain and enhance its substantial tree canopy and landscaped grounds as part of the IRC medical campus plan, which will ensure that this asset is retained through maximizing tree preservation consistent with the District's goal of achieving 40 percent tree canopy cover by 2032, while minimizing tree removal when necessary to accommodate IRC's programmatic needs (E-2.1.6).

URBAN DESIGN ELEMENT

The IRC medical campus plan is not inconsistent with the policies set forth in the Urban Design Element. The Urban Design Element emphasizes strengthening the visual qualities of Washington, DC's neighborhoods as infill development and building renovations occur by encouraging the use of high-quality and high-performance architectural designs and materials (UD-2.2.1). The proposed independent living building will be designed to complement the existing campus architecture. The Urban Design Element also states that new development, additions, and renovations within areas of strong architectural character should be complementary (UD-2.2.2), and that infill development should respond to and complement the defining visual and spatial qualities of the surrounding neighborhood, particularly regarding building roof lines, setbacks, and landscaping (UD-2.2.5). The IRC medical campus plan advances these policies as the proposed independent living building will be carefully massed and designed to take advantage of the sloping topography on the south end of the campus.

The IRC medical campus plan is not inconsistent with the Urban Design Element's policies related to transitions in building intensity (UD-2.2.4) and preservation of neighborhood open space (UD-2.2.7). The proposed independent living building will employ context-specific design strategies, including utilizing the natural slope of the campus. The campus's substantial open space, mature tree canopy, and landscaped grounds serve as a natural buffer between the institutional use and the nearby single family residential areas. The wooded ravine comprising the east side of the campus, which is protected from any development until 2035 pursuant to a prior agreement, provides substantial buffering between the campus and single-family homes to the east. The IRC medical campus plan will preserve and enhance the campus's open space to ensure that the development does not diminish the park-like character that both IRC residents and area neighbors enjoy. The Urban Design Element also states that urban design plans for large sites should consider not only the site itself but also the context of surrounding neighborhoods (UD-2.2.8), and that large sites should be planned to minimize the risk of flooding and implement

stormwater management best practices (UD-2.2.9). The IRC medical campus plan will address these policies through the comprehensive site planning required by the medical campus plan review process.

COMMUNITY SERVICES AND FACILITIES ELEMENT

The IRC medical campus plan is not inconsistent with the policies set forth in the Community Services and Facilities Element. The Community Services and Facilities Element promotes expansion of the supply of facilities that provide assisted living services in Washington, DC, including assisted living residences and community residential facilities, as well as adult daycare facilities (CSF-2.3.8). The IRC medical campus plan advances this policy by expanding the capacity of an existing continuing care retirement community to serve the District's growing senior population. The Community Services and Facilities Element also encourages the development of neighborhood-based, interdisciplinary, holistic models of care that promote community living and independence (CSF-2.4.2). IRC provides exactly this type of comprehensive care model, offering a full continuum of services ranging from independent living to assisted living, memory care, and skilled nursing, all within a single campus setting. The proposed IRC medical campus plan will enable IRC to expand its independent living program, allowing more seniors to age in place within a supportive community environment.

The Community Services and Facilities Element further supports the advancement of built environment strategies that support lifelong health and security for residents of all ages (CSF-2.4.4). IRC's campus includes amenities such as dining facilities, fitness and wellness areas, and common spaces that support the health and well-being of its residents, and the proposed independent living building will expand these amenities to serve the additional independent living residents. The Element also supports the development of hospices and other long-term care facilities for persons with advanced illnesses (CSF-2.3.7). IRC provides skilled nursing and memory care services that serve residents with complex and chronic conditions, and the IRC medical campus plan will ensure the continued operation and potential enhancement of these facilities. The IRC medical campus plan thus advances the Community Services and Facilities Element's overarching goal of ensuring that Washington, DC's health care and senior care facilities are adequate to serve the District's growing and aging population.

EVALUATION OF POTENTIAL COMP PLAN INCONSISTENCIES

The foregoing Comp Plan analysis thoroughly demonstrates the numerous ways in which the IRC medical campus plan aligns with the policies and goals of the Comp Plan, including the FLUM and GPM. However, as explained in multiple decisions by the D.C. Court of Appeals ("**Court**"), it is not sufficient to simply identify the policies that would be advanced when evaluating a proposal for consistency with the Comp Plan. Rather, because there is intentional overlap within and between the Comp Plan elements, a Comp Plan evaluation must recognize potential inconsistencies and explain why the inconsistencies are outweighed by other Comp Plan policies and/or competing considerations. The Court has provided the following specific guidance:

> The Comp Plan is a broad framework intended to guide the future land use planning decisions for the District. Thus, even if a proposal conflicts with one or

> more individual policies associated with the [Comp] Plan, this does not, in and of itself, preclude the Commission from concluding that the action would be consistent with the [Comp] Plan as a whole. The Comp Plan reflects numerous occasionally competing policies and goals, and, except where specifically provided, the [Comp] Plan is not binding. Thus, the Commission may balance competing priorities in determining whether a proposal would be inconsistent with the Comp Plan as a whole. If the Commission approves a [proposal] that is inconsistent with one or more policies reflected in the [Comp] Plan, the Commission must recognize these policies and explain [why] they are outweighed by other, competing considerations." *Friends of McMillan Park v. District of Columbia Zoning Comm'n*, 149 A.3d 1027, 1035 (D.C. 2016) ("*McMillan*") (internal citations and quotations omitted).

The Implementation Element reflects similar guidance: "[r]ecognize the overlapping nature of the [Comp Plan] elements as they are interpreted and applied. An element may be tempered by one or more of the other elements." 10-A DCMR § 2504.6.

Consistent with the guidance provided in the Implementation Element and by the Court, the Applicant conducted a thorough Comp Plan evaluation using a racial equity lens. As detailed throughout this statement, the IRC medical campus plan advances numerous Comp Plan policies and overall is not inconsistent with the Comp Plan when read as a whole. At the same time, in conducting its evaluation, the Applicant identified certain Comp Plan policies that may be viewed as being in potential tension with the proposed independent living building due to its height and scale relative to the surroundings, its location within a portion of the campus designated as a Neighborhood Conservation Area on the GPM and Low Density Residential on the FLUM, and its location on a steeply sloping portion of the IRC campus. As discussed below, these potential inconsistencies do not in the Applicant's view warrant a determination that the IRC medical campus plan is inconsistent with the Comp Plan when read as a whole or a denial of the application. Rather, consistent with *McMillan* and the Implementation Element's recognition that Comp Plan elements may be "tempered by one or more of the other elements," 10-A DCMR § 2504.6, the Applicant identifies these potential tensions below and explains why each is outweighed or otherwise adequately addressed by competing Comp Plan policies and the design and site planning of the proposed independent living building.

The most notable potential Comp Plan inconsistencies relate to the height and scale of the proposed independent living building relative to the character of the broader neighborhood, together with the fact that the building will be located on the portion of the IRC campus that is designated as a Neighborhood Conservation Area on the GPM and as Low Density Residential on the FLUM. The size and siting of the proposed independent living building implicate a limited number of policies in the Land Use, Environmental Protection, Urban Design, and Rock Creek West Elements to some degree. Generally, these policies encourage infill development that complements established neighborhood character and avoids sharp changes in the physical development pattern (LU-1.5.1, LU-2.1.5), discourage development on steep slopes (E-2.4.1), encourage context-sensitive transitions between larger and smaller-scale buildings (UD-2.2.4, UD-2.2.5), and support institutional land uses that are harmonious with surrounding uses and minimization of adverse effects on neighboring properties when institutions expand (RCW-1.1.8).

The Applicant finds that these considerations are substantially addressed and outweighed for several reasons. The location of the independent living building is the least impactful to the IRC campuses' larger system of open spaces, and balances IRC's programmatic and operational needs with the Applicant's desire to protect the ravine and minimize impacts on the most sensitive residential areas that surround the IRC campus. The campus's substantial open space, mature tree canopy, and wooded ravine provide the type of significant buffering that has historically allowed larger- and smaller-scale buildings to coexist successfully in the Rock Creek West Planning Area, and the independent living building will be sited outside the ravine itself with appropriate slope stabilization measures, consistent with the Environmental Protection Element's policies on managing uplands along stream valleys and protecting open space adjacent to ravines (E-2.4.2, E-2.4.3). The proposed independent living building is also substantially removed from the single-family residential fabric that these policies are designed to protect, being surrounded instead by embassy, institutional, and park uses. Notably, as demonstrated in the evaluations of specific Comp Plan elements above, the Applicant finds that these potential inconsistencies are balanced by other Comp Plan policies favoring housing production in established neighborhoods, including support for modest increases in density in low density residential areas, and recognition for a diversity of housing types (LU-2.1.8). As noted above, the District's population of older adults is expected to be the fastest-growing segment of the District's population over the next 15 to 20 years, and that Rock Creek West, Ward 3, and Ward 4 each have a larger share of residents age 65 and older compared to the overall District. This underscores the acute and growing need for senior housing of exactly the kind the proposed independent living building will provide, consistent with the Housing Element's policy supporting neighborhood-based assisted living and skilled nursing facilities (H-1.3.3) and the Community Services Element's policies supporting the expansion of senior care facilities (CSF-2.3.8, CSF-2.4.2).

Taking all of these considerations together, the Applicant finds that any potential tension between the proposed IRC medical campus plan and the Land Use (LU-1.5.1, LU-2.1.5), Environmental Protection (E-2.4.1), Urban Design (UD-2.2.4, UD-2.2.5), and Rock Creek West Area Element (RCW-1.1.8) policies discussed above, is sufficiently outweighed by the numerous Comp Plan policies that the IRC medical campus plan advances, including LU-2.1.8, E-2.4.2, E-2.4.3, H-1.3.3, CSF-2.3.8, and CSF-2.4.2, and does not rise to the level of an inconsistency that would preclude a finding that the IRC medical campus plan is not inconsistent with the Comp Plan when read as a whole.

I. Community Outreach and Engagement

The Framework Element states that racial equity is a process, and that as the District grows and changes, it must do so in a way that builds the capacity of vulnerable, marginalized, and low-income communities to fully and substantively participate in decision-making processes. 10-A DCMR § 213.7. As a process, a racial equity lens is employed when those most impacted by structural racism are meaningfully involved in the creation and implementation of the policies and practices that impact their lives. The Commission's Racial Equity Tool emphasizes community outreach and engagement, which are expected to begin at the inception of any proposed zoning action. All submissions to the Commission shall be accompanied by a discussion of efforts made by applicants to engage the community early in the zoning process. The information contained in table below addresses the questions set forth in **Part II (Community Outreach and**

Engagement) of the Racial Equity Tool. As demonstrated below, the Applicant has engaged with the community, and it will continue to do so during the design review process.

Community Outreach and Engagement
Description of affected community (including defining characteristics).
· Affected Community: The Applicant has engaged with the following entities to gain input on existing conditions within the community and to gain input on the proposed IRC medical campus plan: IRC residents, ANC 3/4G, ANC 3F, Temple Sinai, The Carnegie Institution, and other nearby residential neighbors. The Applicant presented the IRC medical campus plan to ANC 3/4G on July 13, 2026, ANC 3F on July 14, 2026, and has made itself available to discuss the proposed application with all interested groups and individuals. The Applicant has also provided thorough responses in writing to 37 questions submitted by ANC 3/4G on the proposed IRC medical campus plan and independent living building. · Defining Characteristics: The affected community is located in the Rock Creek West Planning Area, spanning portions of Ward 3 and Ward 4 in upper northwest Washington, DC. The area is predominantly a low-density residential neighborhood characterized by single-family detached and semi-detached homes, mature tree canopy, and established institutional uses including places of worship, embassies, and educational institutions. The Rock Creek West area has among the largest percentages of older adults in the District, many of whom are homeowners caring for their properties on a fixed income. IRC has been a part of this community for over 60 years and is known for its quiet presence, well-maintained grounds, and excellent care for its residents in a park-like, wooded setting. The community has a history of engagement with IRC through prior BZA applications and an established Advisory Committee that includes representatives of IRC and area residents.
Characteristics of the affected community that influenced outreach plan / efforts.
· The affected community is well-organized and engaged, with active participation from IRC residents. ANC 3/4G, ANC 3F, and neighborhood associations. Community members have a longstanding familiarity with IRC and its operations, having participated in extensive community dialogue during prior BZA applications for campus development. Neighbors have historically expressed interest in ensuring that any campus expansion minimizes impacts on traffic, noise, tree canopy, and the residential character of the surrounding neighborhood. The community values the open space and park-like setting of the IRC campus and expects that any development will be sensitive to these qualities.
Outreach methods utilized (including specific efforts employed to meet community needs and circumstances).
· IRC has a longstanding history of community engagement spanning multiple decades and prior BZA applications. During the most recent prior BZA application (BZA Application No. 18898), IRC participated in over 17 individual and group meetings with community stakeholders to discuss the design, location, and size of proposed additions, traffic-related issues, environmental concerns, construction activities, and landscaping. For the current IRC medical campus plan application, IRC presented the proposed project to IRC residents in April, May and June 2026, ANC 3/4G on July 13, 2026, ANC 3F on July 14, 2026, and has

made its representatives available to discuss the proposed application with all interested groups and individuals.

Community outreach timeframe / dates of major meetings and points of engagement

April 29, 2026, May 21, 2026, June 30, 2026

- Presented preliminary thoughts and ideas regarding the new addition to the Manor House and the potential medical campus plan application to IRC residents.

July 1, 2026

· Served Notice of Intent (NOI) to file a medical campus plan application on the affected ANC and on the owners of all property within 200 feet of the perimeter of the IRC campus.

July 13, 2026

· Presented the IRC medical campus plan to ANC 3/4G, covering IRC's background and mission, the proposed independent living building and reuse of 3024 Military Road, resident input and feedback received to date, and the anticipated process and timeline for Zoning Commission review.

July 14, 2026

· Presented the IRC medical campus plan to ANC 3F, covering IRC's background and mission, the proposed independent living building and reuse of 3024 Military Road, resident input and feedback received to date, and the anticipated process and timeline for Zoning Commission review.

October 19, 2026

· Presented the IRC medical campus plan at a meeting co-hosted with Chevy Chase Forward.

Ongoing

· IRC and its representatives remain available to discuss the proposed IRC medical campus plan with all interested groups and individuals and will continue to engage with ANC 3/4G, ANC 3F, and neighboring residents throughout the application process. In response to a August 4, 2026, letter from the ANC, IRC agreed to: (1) postpone filing the medical campus plan application until after October 15, 2026, to provide the ANC additional time to comment; (2) provide the ANC with a draft of the application materials prior to filing; (3) provide written responses to the questions raised by the ANC and community stakeholders; (4) provide information on IRC's ultimate campus buildout plan and associated development information; and (5) work with the ANC and community partners to establish a meaningful community-engagement process for this project, consistent with IRC's approach on previous IRC campus development projects. On August 28, 2026, IRC provided detailed responses to thirty-seven (37) questions posed by ANC 3/4G.

Members of the affected community that would potentially benefit from the proposed zoning action.

- Seniors in the District, particularly those in Rock Creek West, Ward 3, and Ward 4, who need independent living, assisted living, memory care, or skilled nursing services within a high-quality continuing care retirement community.
- Residents of the affected community may benefit from employment opportunities at the IRC campus, which currently employs approximately 245 individuals and plans to increase this number to approximately 255 individuals to accommodate the additional residents.
- Nearby residents who benefit from IRC's community services, including hosting meetings for community organizations, providing support programs for area seniors and caregivers, and supporting charitable activities.
- Area neighbors who enjoy the substantial open space, mature tree canopy, and park-like setting of the IRC campus, which will be maintained as part of the IRC medical campus plan.

Members of the affected community that would potentially be burdened by the proposed zoning action.

- Neighboring residents may experience construction-related disruptions, including temporary increases in construction traffic, noise, and dust during the construction period. However, the majority of construction traffic is anticipated to enter the IRC campus from the south along Broad Branch Road, minimizing impacts on Military Road and the residential areas to the north.
- The Carnegie Institution of Washington, located to the west of the campus, conducts sensitive scientific experiments on its site. The Applicant has worked closely with the Carnegie Institution on prior construction management measures for past IRC projects to ensure that construction does not negatively impact Carnegie operations and programming. The Applicant will continue to work closely with the Carnegie Institution on similar construction management strategies and will to formalize them in a construction management agreement, for any projects included in the proposed IRC medical campus plan.

Community input on existing conditions and current challenges that have resulted from past or present discrimination, and current ongoing efforts in the affected community to address these conditions.

- Community outreach is ongoing. The Applicant will update this section as additional input is received from the affected community.

Potential positive outcomes of the proposed zoning action identified by the affected community.

- Community outreach is ongoing. The Applicant will update this section as additional input is received from the affected community.

Potential negative outcomes of the proposed zoning action identified by the affected community.

- Concerns regarding potential construction-related and ongoing traffic impacts on Military Road and Broad Branch Road. Construction traffic is anticipated to enter the site from Broad Branch Road, with some vehicles routed via 31st Street NW to enter the construction site from the north, subject to DDOT approval of a construction entrance. Construction parking will be offsite, with workers shuttled to the site by van, and a washdown rack will be installed onsite to clean trucks before they leave the IRC campus.

Changes / modifications made to the proposed zoning action that incorporate / respond to input received from the affected community.
· Community outreach is ongoing. The Applicant will update this section as additional input is received from the affected community.
Efforts taken to mitigate potential negative outcomes identified by the affected community.
· The Applicant will provide approximately 145 structured parking spaces as part of the proposed addition, including separate resident and staff parking, which will reduce the potential for parking overflow onto residential streets. The parking spaces will be primarily accessed via an existing curb cut along Broad Branch Road. · IRC generates an extremely low volume of vehicular trips due to the nature of a CCRC. Construction traffic is anticipated to enter the campus from the south along Broad Branch Road, with some traffic routed via 31st Street NW to enter from the north, minimizing construction impacts on Military Road and the residential areas to the north. Construction activities will occur within the District's regulated work hours of 7:00 a.m. to 7:00 p.m., Monday through Saturday. The Applicant will prepare a comprehensive transportation study as part of the IRC medical campus plan application to evaluate and mitigate potential traffic impacts.

II. Evaluation of Zoning Action Through a Racial Equity Lens

The Framework Element states that "equity is achieved by targeted actions and investments to meet residents where they are, to create equitable opportunities." 10-A DCMR 213.6. As an outcome, racial equity is achieved when race no longer determines one's socioeconomic outcomes, and when everyone has what they need to thrive no matter where they live or their socioeconomic status. 10-A DCMR § 213.9. The table below correlates the potential outcomes of the IRC medical campus plan with specific themes related to racial equity that are enumerated **Part IV (Criteria to Evaluate a zoning Action through a Racial Equity Lens)** of the Commission's Racial Equity Tool. As demonstrated below, the outcomes of the IRC medical campus plan have the potential to positively advance equitable development, or at minimum have neutral outcomes.

Direct Displacement	The IRC medical campus plan will not result in any direct displacement of existing residents or businesses, but rather will have positive outcomes to housing through the construction of approximately 60 - 67 new independent living units (59 – 66 within the new independent living building and existing manor house, and one (1) in the replacement structure at 3024 Military Road).
Indirect Displacement (Economic and Cultural)	Indirect displacement of tenants or residents is not expected to occur in the area surrounding the IRC campus. The proposed IRC medical campus plan involves the expansion of an existing CCRC within its long-established campus boundaries. The addition of independent living units will serve new residents seeking senior housing and will not displace any existing residents or increase property values in the surrounding single-family neighborhood in a manner that could cause displacement. IRC has operated on this site for over six decades without adverse impacts on the surrounding community.
Housing	The IRC medical campus plan will result in positive outcomes to housing as it will facilitate the construction of approximately 60 - 67 new independent living units (59 – 66 within the new independent living building and existing manor house, and one (1) in the replacement structure at 3024 Military Road)
Physical	The IRC medical campus plan will result in positive outcomes to the physical environment. The proposed independent living building will be located on the south end of the campus, well separated from surrounding lower-scale single-family residential areas. The properties surrounding the proposed building site consist of embassy, institutional, and park uses. The substantial wooded ravine on the east side of the campus provides natural buffering from single-family homes. The campus's substantial open space, mature tree canopy, and landscaped grounds will be maintained and enhanced. The building design will incorporate an active outdoor plaza and green terrace connecting the new addition to the existing Manor House.
Physical (continued)	Environmentally, the IRC medical campus plan is expected to result in positive environmental outcomes through sustainable design features consistent with the District's green building and environmental protection policies.

Access to Opportunity	The IRC medical campus plan will result in positive outcomes to employment and access to opportunity through construction-related jobs and permanent positions in healthcare, senior care, and related services. Construction of the independent living building will require IRC to hire additional staff to account for the additional residents.
Community	From the outreach period, the Applicant has captured the following comments and feedback from community stakeholders: · Community members expressed interest in understanding the potential traffic impacts associated with the proposed Manor House addition, particularly along Military Road and Broad Branch Road. · Residents inquired about the height and scale of the proposed addition to the Manor House and its visibility from surrounding residential properties. · Participants expressed strong interest in the preservation of the campus's mature tree canopy and open space, and encouraged the Applicant to minimize tree removal during construction. The Applicant has identified approximately 240 trees on the site that will need to be removed to accommodate the proposed independent living building, including 38 Special Trees. The Applicant will continue to evaluate opportunities to further minimize tree removal and to provide replacement plantings as part of the IRC medical campus plan.

`Community (continued)	· Questions were raised regarding the management of construction traffic, construction staging, and the adequacy of on-site parking to prevent overflow onto surrounding residential streets. In response, the Applicant has confirmed that construction parking will be offsite, with workers shuttled to the site by van, and that construction materials will be stored offsite or within the project's limit of disturbance to minimize impacts on surrounding streets. · Some residents referenced prior BZA applications for campus development and sought assurance that the community engagement and conditions from those prior approvals would be carried forward into the medical campus plan process. In response, the Applicant has committed to maintaining the Advisory Committee established during prior BZA applications and to continuing the collaborative approach to community engagement used in connection with those prior approvals throughout the medical campus plan process. · Community members expressed interest in enhanced landscaping and screening along the campus perimeter to buffer the proposed addition from neighboring residential properties. · Stakeholders acknowledged the critical need for additional senior housing in the District and the importance of IRC's continuing care model in serving the growing older adult population in the Rock Creek West area. · The Applicant has reaffirmed its commitment to maintaining the Advisory Committee established during prior BZA applications and to continuing to engage with the community throughout the Medical Campus Plan process and during construction.