

GOVERNMENT  
OF  
THE DISTRICT OF COLUMBIA

+ + + + +

ZONING COMMISSION

+ + + + +

PUBLIC HEARING

+ + + + +

W44444444444444444444444444444447

IN THE MATTER OF: 5  
5

Sibley Memorial Hospital - 5Case No. 05-42

Consolidated Planned Unit 5

Development & Related Zoning5

Map Amendment 5

W44444444444444444444444444444448

Thursday,  
February 1, 2007

Hearing Room 220 South  
441 4<sup>th</sup> Street, N.W.  
Washington, D.C.

The Public Hearing of Case No. 05-42 by the District of Columbia Zoning Commission convened at 6:30 p.m. in the Office of Zoning Hearing Room at 441 4<sup>th</sup> Street, N.W., Washington, D.C., Carol J. Mitten, Chairperson, presiding.

ZONING COMMISSION MEMBERS PRESENT:

- CAROL J. MITTEN Chairperson
- ANTHONY J. HOOD Vice Chairperson
- GREGORY JEFFRIES Commissioner
- MICHAEL G. TURNBULL Commissioner (AOC)

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701



<u>AGENDA ITEM</u>	<u>PAGE</u>
<u>WELCOME:</u>	
Carol Mitten . . . . .	4
<u>ZONING CASE NO. 05-42</u>	
<u>SIBLEY MEMORIAL HOSPITAL:</u> . . . . .	4
<u>WITNESSES:</u>	
Paul Tummonds . . . . .	11
Jerry Price . . . . .	16
Dwight Fincher . . . . .	25
Connie Fan . . . . .	42
Louis Slade . . . . .	47
<u>CROSS EXAM BY ANC:</u> . . . . .	107
<u>CROSS EXAM BY OPPOSING PARTY:</u> . . . . .	127
<u>OFFICE OF PLANNING:</u>	
Karen Thomas . . . . .	163
<u>CROSS EXAM OF OP:</u> . . . . .	169
<u>DDOT:</u>	
Ken Laden . . . . .	179
<u>CROSS EXAM BY ANC:</u> . . . . .	194
<u>CROSS EXAM BY OPPOSING PARTY:</u> . . . . .	211
<u>PERSONS/PARTIES IN SUPPORT:</u>	
Stuart Ross . . . . .	231
Vince Treacy . . . . .	235
Barbara Lang . . . . .	238
Janelle Goetcheus . . . . .	241
John Marlow . . . . .	246
Andrew Diem . . . . .	251
<u>HEARING CONTINUED TO FEBRUARY 21<sup>ST</sup>:</u> . . . . .	254
<u>ADJOURN:</u>	
Carol Mitten . . . . .	254

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1  
2  
3  
4  
5  
6  
7  
8  
9  
10  
11  
12  
13  
14  
15  
16  
17  
18  
19  
20  
21  
22

P-R-O-C-E-E-D-I-N-G-S

6:40 p.m.

CHAIRPERSON MITTEN: Okay. Good evening, ladies and gentlemen. This is a Public Hearing of the Zoning Commission of the District of Columbia for Thursday, February 1, 2007. My name is Carol Mitten and joining me this evening are Vice Chairman Anthony Hood and Commissioners Mike Turnbull and Greg Jeffries.

The subject of this evening's hearing is Zoning Commission Case No. 05-42 and this is a continuation of a hearing that began on October 12, 2006. This is a request by Sibley Hospital for approval of a consolidated Planned Unit Development and related Map Amendment for property that is bounded by Loughboro Road to the south, Macarthur Boulevard to the west, Little Falls Road to the north and Dalecarlia Parkway to the east and it is known as Lot 26 in Square N-1448.

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1                   Notice of today's hearing was  
2 published in the D.C. Register on July 21,  
3 2006 and copies of today's hearing  
4 announcement are available to you and they are  
5 in the wall bin by the door. This hearing  
6 will be conducted in accordance with the  
7 provisions of 11 DCMR section 3022 and the  
8 order of procedure will be as follows:

9                   We will take up any preliminary  
10 matters and then we will have the presentation  
11 of the applicant's case, report by the Office  
12 of Planning, report by the Department of  
13 Transportation and any other Government  
14 agencies that are represented, report by the  
15 affected Advisory Neighborhood Commission, in  
16 this case it's 3D, organizations and persons  
17 in support, then we will have the party in  
18 opposition, which is Sibley Neighbors for  
19 Responsible Growth and then other  
20 organizations and persons in opposition.

21                   The following time constraints  
22 will be maintained in this hearing. The

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 applicant will have 50 minutes. The party  
2 will have up to 50 minutes. Organizations  
3 will have 5 minutes and individuals will have  
4 3 minutes.

5 The Commission intends to adhere  
6 to these time limits as strictly as possible  
7 in order to hear the case in a reasonable  
8 period of time and the Commission reserves the  
9 right to change the time limits for  
10 presentations, if necessary, and notes that no  
11 time shall be ceded.

12 All persons appearing before the  
13 Commission are to fill out two witness cards.  
14 They look like this and they are on the table  
15 by the door. Upon coming forward to speak to  
16 the Commission, please, give both cards to the  
17 reporter, who is sitting to our right.

18 Please, be advised that this  
19 proceeding is being recorded by the Court  
20 Reporter and is also being webcast live.  
21 Accordingly, we ask you to refrain from making  
22 any disruptive noises in the hearing room.

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1       When presenting information to the Commission,  
2       we ask you to take a seat at the table and  
3       then turn on and speak into the microphone,  
4       first stating your name and address. When you  
5       are finished speaking, please, turn the  
6       microphone off, because they tend to pick up  
7       background noise.

8               The decision of the Commission in  
9       this case must be based exclusively on the  
10       public record and to avoid any appearance to  
11       the contrary, the Commission requests that  
12       persons present not engage the Members of the  
13       Commission in conversation during a recess or  
14       at any other time.

15               Mrs. Schellin and Ms. Hanousek  
16       will be available throughout the hearing to  
17       answer any procedural questions that you might  
18       have.

19               Please, turn off all beepers and  
20       cell phones, at this time, so as not to  
21       disrupt the hearing. And I would just say as  
22       the house is filling up a little bit, there

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 are some additional seats next door, right,  
2 which is just immediately outside, if you find  
3 that we are filling up with standing room  
4 only. We still have seats on this side, too,  
5 if you would like to come over to the other  
6 side.

7 All right. Now, anyone who is  
8 planning on testifying this evening, if you  
9 are planning on testifying this evening, I  
10 would ask you to stand now, raise your right  
11 hand and direct your attention to Mrs.  
12 Schellin and she will administer the oath.

13 (Whereupon, the witnesses were  
14 sworn.)

15 MS. SCHELLIN: Thank you.

16 CHAIRPERSON MITTEN: All right.  
17 Thank you. Mrs. Schellin, do you have any  
18 preliminary matters? Mr. Tummonds, any  
19 preliminary matters?

20 MR. TUMMONDS: The only  
21 preliminary -- for the record, Paul Tummonds  
22 on behalf of the applicant. The only

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 preliminary matters we have are the expert  
2 witnesses in this case.

3 CHAIRPERSON MITTEN: Just give me  
4 one minute. You had given us their resumes in  
5 a previous submission. Can we just review to  
6 make sure that --

7 MR. TUMMONDS: Yes.

8 CHAIRPERSON MITTEN: -- we have  
9 Mr. Fincher?

10 MR. TUMMONDS: Mr. Fincher, Ms.  
11 Fan will be our landscape architect, Ms.  
12 Scully will not be here this evening, Mr.  
13 Henning, our acoustical engineer. We are not  
14 going to present Mr. Henning's testimony. His  
15 report has been submitted into the record. If  
16 he needs to answer any questions, he is here  
17 to answer those questions.

18 CHAIRPERSON MITTEN: Okay.

19 MR. TUMMONDS: Mr. Slade and then  
20 one additional proposed expert witness was Mr.  
21 Long, James Long, our civil engineer. That  
22 came in this evening and again, Mr. Long would

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1       similarly be -- he is not going to be  
2       presenting in our case in chief. He is only  
3       here to answer any questions that may arise.

4                   CHAIRPERSON MITTEN:   And did you  
5       submit his resume for us?

6                   MR. TUMMONDS:   Yes, I believe we  
7       did.

8                   CHAIRPERSON MITTEN:   Is that in --

9                   MR. TUMMONDS:   Just this evening,  
10      yes.

11                  CHAIRPERSON MITTEN:   Just give us  
12      a minute.

13                  MR. TUMMONDS:   Sure.

14                  CHAIRPERSON MITTEN:   Is there any  
15      objection to accepting the individuals who  
16      have been proffered as experts in the given  
17      fields? Any objections? Okay. Then without  
18      objection, Mr. Tummonds, your experts are  
19      accepted.

20                  MR. TUMMONDS:   Thank you.

21                  CHAIRPERSON MITTEN:   And I just  
22      want to review.       We have Mr. Spector

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 representing the Sibley Neighbors and then we  
2 have Commissioner Thompson representing the  
3 ANC. Is that right? Okay. And Ms. Gates.

4 MR. SLADE: We will have experts.

5 CHAIRPERSON MITTEN: Well, we'll  
6 get to that when it is your turn. Okay.  
7 Okay. I think we are ready, Mr. Tummonds.

8 MR. TUMMONDS: Thank you. For the  
9 record, my name is Paul Tummonds with the Law  
10 Firm of Pillsbury Winthrop Shaw Pittman. Also  
11 with me here this evening is David Avitabile  
12 of our firm. And we are here representing  
13 Sibley Hospital, the applicant.

14 The PUD project that we will be  
15 presenting this evening is the culmination of  
16 two years of public dialogue. On behalf of  
17 Sibley Hospital, we are pleased to present a  
18 project that has the support of the Office of  
19 Planning, the Department of Transportation,  
20 former Ward 3 Council Member Patterson,  
21 current Ward 3 Council Member Cheh, the Spring  
22 Valley West Homes Corporation, the Palisades

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 Citizens Association and over 75 members of  
2 the neighboring community, who have submitted  
3 letters in support of this case.

4 Many of these supporters are in  
5 the crowd this evening. This support was hard  
6 earned and reflects the quality of the  
7 proposed project and the compromises that  
8 Sibley has been willing to make. Since the  
9 October 12<sup>th</sup> public hearing in this case, the  
10 applicant and its representatives have  
11 undertaken numerous additional analyses and  
12 redesigns of the campus entrance from  
13 Dalecarlia Parkway as well as the redesigned  
14 vehicular intersection of Dalecarlia Parkway  
15 and Loughboro Road.

16 It is through this hard working  
17 compromise that the applicant has addressed  
18 all previous issues raised by OP and DDOT  
19 regarding this application and has now  
20 received their support.

21 As shown on the plans presented to  
22 ANC-3D and the Sibley Neighbors for

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 Responsible Growth on October 12, 2006 and  
2 submitted to the Zoning Commission on October  
3 16, 2006, the applicant has removed a floor of  
4 the medical office building and has sunk a  
5 floor of the parking garage into the ground.  
6 Therefore, the proposed medical office  
7 building now has a building height of 77 feet  
8 4 inches and a mechanical penthouse of,  
9 approximately, 15 feet.

10 The parking garage will continue  
11 to provide, approximately, 750 parking spaces,  
12 but only three levels will be visible above  
13 grade as viewed from Loughboro Road. The PUD  
14 project now has FAR of 2.15.

15 We are proposing an amendment to  
16 the Zoning Map to rezone this property to the  
17 SP-1 Zone District. SP-1 Zone District allows  
18 PUD projects to have a maximum nonresidential  
19 FAR of 3.5, again, our project is only 2.15,  
20 and a maximum building height of 75 feet.  
21 However, pursuant to section 2405.3, the  
22 Zoning Commission is granted the authority to

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 authorize an increase of height of not more  
2 than 5 percent if that increase is necessary  
3 and essential to the successful functioning of  
4 the project and it's consistent with the  
5 purposes of this PUD project.

6 Therefore, we posit that the  
7 approval of the proposed medical office  
8 building with this height of 77 feet 4 inches  
9 is within the SP-1 PUD standards. Our project  
10 architect will testify as to the necessity for  
11 this proposed height.

12 As discussed in detail in our  
13 prehearing statement and as we will show you  
14 tonight in our testimony, the proposed project  
15 satisfies all standards and requirements for  
16 PUD and Zoning Map Amendment approval. The  
17 proposed medical office building and the  
18 services that it will allow Sibley to provide  
19 to the community are public benefits that  
20 protect the public health, safety, welfare and  
21 convenience of the citizens of the District of  
22 Columbia.

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1           In its September 29, 2006 report,  
2           the Office of Planning noted that the proposed  
3           medical office building is due to be a  
4           compatible use to a hospital and also that it  
5           is important to allow medical institutions to  
6           upgrade facilities in order to remain  
7           competitive and up to date.

8           The Office of Planning has also  
9           agreed with our conclusion that the proposed  
10          rezoning of this site to the SP-1 Zone is  
11          truly consistent with the Comprehensive Plan.

12          We will have four witnesses this  
13          evening. Our first witness will be Jerry  
14          Price, Vice President and COO of Sibley  
15          Hospital. Next, our project architect, Dwight  
16          Fincher. He will be followed by Connie Fan,  
17          our landscape architect. And then Lou Slade,  
18          our traffic engineer.

19          As I mentioned, our civil engineer  
20          James Long and our acoustical engineer, Gerald  
21          Henning, are available to answer any questions  
22          that you may have. I would now ask Mr. Price

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 to present his testimony.

2 MR. PRICE: Madam Chair, Members  
3 of the Zoning Commission, good evening. I'm  
4 Jerry Price, the chief operating officer at  
5 Sibley Memorial Hospital. I have worked at  
6 Sibley for the past 21 years. We recognize  
7 that this has the potential to be a long  
8 meeting and it is our intention to provide a  
9 concise presentation of our project and to be  
10 available to answer your questions.

11 Sibley Memorial Hospital is a  
12 mission-driven nonprofit organization. In  
13 2006, we gave over \$10 million of free care to  
14 the community. We are a principal provider of  
15 free care to Catholic Charities. We are a  
16 major provider of free care to the Community  
17 of Hope, the Mary Center and the Spanish  
18 Catholic Center.

19 Our net operating margin, as  
20 reported to the D.C. Hospital Association, was  
21 5.6 in 2004, 3.1 in 2005 and we are projecting  
22 a 3.6 net operating margin for 2006. Compared

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 to other hospitals in D.C., we have done well,  
2 but we have succeeded, because we improve  
3 programs and build new facilities when  
4 required. And we want to continue to be  
5 successful and that is why we feel we must  
6 build this medical office building.

7 In the audience this evening is  
8 Robert Sloan. He is the Chief Executive  
9 Officer of Sibley Memorial Hospital. He will  
10 soon celebrate his 22<sup>nd</sup> anniversary at the  
11 hospital. He often reminds us that part of  
12 our mission statement says that we will  
13 provide quality health services and facilities  
14 for the community.

15 Over the years, we have taken this  
16 charge very seriously and program facilities  
17 to meet community need. We strive to be a  
18 thoughtful and respectful neighbor. We  
19 believe that the size and location of the  
20 proposed medical office building is compatible  
21 with the other buildings on the campus and  
22 will not detract from the existing residential

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 character of the neighborhood.

2 We have purposefully pushed this  
3 building away from Loughboro Road to reduce  
4 visual impacts. We are providing an  
5 appropriate number of parking spaces to  
6 prevent any on-street parking in the  
7 neighborhood. We are also proposing a  
8 Transportation Management Plan to attempt to  
9 reduce the number of vehicles that will come  
10 to our site.

11 Our traffic engineer will discuss  
12 this plan in more detail in his presentation.  
13 However, I will note that a major component of  
14 this Transportation Management Plan is the  
15 creation of a shuttle bus from Friendship  
16 Heights Metro Station to the Sibley campus.

17 Sibley and our physicians need  
18 this building. We have received signed  
19 interest for over 137,000 square feet of  
20 office space from our medical staff. We have  
21 demonstrated that most modern community  
22 hospitals have a medical office building on

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 their campus. We need this medical office  
2 building to combat a number of outside forces  
3 in the community relating to the high cost of  
4 practicing medicine and an unfriendly  
5 malpractice climate in the District of  
6 Columbia.

7 The specific reasons the hospital  
8 needs this project are to provide convenience  
9 and accessibility for our patients, provide  
10 convenience and an opportunity to improve  
11 productivity for physicians, to bond  
12 physicians to the hospital and to improve  
13 access to services, to provide a non-  
14 insurance-based revenue strain to the hospital  
15 and to provide a hedge for the medical  
16 community in the event that upscale  
17 development in Friendship Heights forces the  
18 closure of another medical office building.

19 We began a dialogue with our  
20 neighbors about this project in February 2005.  
21 Originally, our PUD and Zoning Map Amendment  
22 application included the entire campus and

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 addressed future development projects on the  
2 campus. Early in the process, the ANC asked  
3 us to limit the project to the medical office  
4 building and parking garage. We agreed with  
5 this request.

6 After many meetings and  
7 presentations, the community organizations  
8 agreed that we have demonstrated the need for  
9 a medical office building on our campus.  
10 After three presentations and significant  
11 discussion, the Palisades Citizens Association  
12 voted 35 to 18 to approve the building as  
13 originally presented. Tonight a  
14 representative of the Palisades Community  
15 Association leadership will testify in support  
16 of this application.

17 The Spring Valley West  
18 Association, which represents 155 homes, voted  
19 to support the building and their leadership  
20 will testify. Over 75 letters have been sent  
21 to the Zoning Commission to recommend approval  
22 of our project. Our supporters include people

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 who live on Loughboro Road across from the  
2 hospital and you will hear from one of them  
3 tonight.

4 We are also proud to notice Paul  
5 said that our former and current D.C. Council  
6 Members have submitted letters of support and  
7 we are very grateful to Mary Cheh for her  
8 support. We had several meetings with the  
9 working group from ANC-3D and we met seven  
10 times with the ANC at their monthly meeting.

11 The ANC voted to approve the  
12 construction of a medical office building with  
13 conditions. This is important, because the  
14 ANC voted in favor of the use. One of their  
15 conditions was that we reduce the building to  
16 65 feet in height and to reduce the parking by  
17 one floor, which would have comprised a  
18 reduction of 225 spaces.

19 I would like to respond to this  
20 request to reduce the size of our medical  
21 office building. We sized the proposed  
22 medical office building in accordance with the

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 well-thought out analysis of community need,  
2 physician demand and return on investment  
3 analysis. But we have reexamined our return  
4 on investment and we believe that we can  
5 reduce the building by one floor, which is,  
6 approximately, 20 percent of the net rentable  
7 area and still achieve our goals.

8 Additional costs have been added  
9 to this project since we began the PUD and  
10 Zoning Map Amendment process. These costs  
11 include additional community amenities,  
12 reconstructing the intersection and other  
13 conditions, which I will review in a minute.  
14 The architect has indicated that he can lower  
15 the mechanical penthouse by, approximately,  
16 3.5 feet.

17 With the removal of one floor,  
18 this gives the building a total height of 77  
19 feet 4 inches. This building will be set back  
20 from Loughboro Road by over 100 yards. With  
21 these concessions, the medical office building  
22 will be smaller in scale than the hospital and

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 Hayes' Hall Building. I note that the Office  
2 of Planning has concluded that the height and  
3 density of the proposed medical office  
4 building is appropriate for our campus.

5 In response to the ANC, we propose  
6 to reduce the height of the parking garage by  
7 going into the ground another level, but we  
8 want to maintain the parking count as  
9 originally proposed to be certain that we are  
10 always able to satisfy the demand on the  
11 Sibley campus. If the size of the building  
12 were to be reduced by two floors as requested  
13 by the ANC, it will not be financially viable.

14 We further believe that the  
15 project we are presenting this evening  
16 represents a fair compromise with the  
17 community. It allows you to provide great  
18 weight to the recommendation of the ANC to  
19 downscale the building and to provide an  
20 effective compromise for the hospital to  
21 continue with its plans.

22 With regard to the other

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 conditions and amenities, we have agreed to  
2 establish a shuttle bus to run from Friendship  
3 Heights Metro to Sibley on a continuous loop  
4 Monday through Friday, 6:00 a.m. to 5:00 p.m.  
5 The shuttle bus will run free of charge for  
6 employees, visitors, staff and neighbors.

7 We have agreed to the construction  
8 of the intersection of Little Falls Road and  
9 Dalecarlia Parkway. We have agreed to pay all  
10 costs associated with the redesign and  
11 construction of a new intersection at  
12 Dalecarlia Parkway and Loughboro Road. We  
13 have agreed to construct a new Metro Bus stop  
14 and layover area on the east end of the  
15 campus.

16 We have agreed to build a new park  
17 in public space. We have agreed to donate  
18 \$140,000 to a transportation initiative as  
19 proposed by Iona Senior Services. We have  
20 agreed to darken the new parking garage by  
21 9:00 p.m. We have agreed to abide by a  
22 construction and development plan. And we

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 have agreed to allow neighborhood  
2 organizations, such as ANC-3D to use our  
3 auditorium for community meetings.

4 In conclusion, I would just like  
5 to reiterate that this project has received  
6 significant support from the community and has  
7 been reduced in size and appearance to address  
8 the comments and concerns raised by ANC-3D.  
9 We believe that the PUD process has been  
10 successful in creating a project that meets  
11 our needs as well as addresses issues raised  
12 by the community.

13 We will appreciate your favorable  
14 consideration of our project and the  
15 recognition of the major concessions that we  
16 have made in an effort to work cooperatively  
17 with the community. Thank you.

18 MR. TUMMONDS: Donna, could you  
19 get the lights? Perfect. Thank you. Mr.  
20 Fincher?

21 MR. FINCHER: Madam Chair,  
22 Commissioners, my name is Dwight Fincher. I'm

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 a principal with Wilmot/Sanz Architects in  
2 Gaithersburg, Maryland. We are the design  
3 architectural consultants for the hospital for  
4 this project. I am pleased to walk you  
5 through the development plans for the project  
6 to date and discuss and highlight the issues  
7 that Mr. Price has just gone over in a graphic  
8 format.

9 CHAIRPERSON MITTEN: Would you  
10 pull the mike a little bit closer? I'm having  
11 a little bit of trouble hearing you.

12 MR. FINCHER: The first slide you  
13 will see is, in an effort to orient you to the  
14 site, the full Sibley Memorial Hospital  
15 campus. It is bordered by Little Falls Road  
16 on the north, Macarthur Boulevard on the west  
17 and Loughboro Road on the south and Dalecarlia  
18 Parkway to the east. What this slide  
19 indicates is the relative scale of the two  
20 different developments in terms of zoning.

21 The existing R-5-A, approximately,  
22 20.5 acres and the area we're looking for

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 rezoning approval on is 2.86 acres for the  
2 medical office. Early on, we developed our  
3 medical office building development goals.  
4 Quickly to walk through this, one was to de-  
5 emphasize the Loughboro entry, the existing  
6 main entry and redirect traffic to a new entry  
7 off Dalecarlia.

8 Two, a very important factor is to  
9 maintain the existing development buffer  
10 between existing Loughboro residences, the  
11 neighbors across the street to the south.  
12 Three, again, as I mentioned, redirect traffic  
13 to a new entry off of Dalecarlia. Take some  
14 of that traffic load off Loughboro.

15 Four, use the development  
16 potential utilizing the back of the site. In  
17 other words, using the core site, the very  
18 back site of the campus for this development.  
19 And five, to improve Little Falls Road to be  
20 able to redirect traffic through the back of  
21 the site and make that an actual traffic  
22 avenue for not just staff and not service

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 traffic, but public traffic.

2 This slide shows the existing  
3 buildings on the eastern part of the site in  
4 question. The existing cancer center, Hayes'  
5 Hall auditorium, main hospital and skilled  
6 nursing facility. The two buildings that will  
7 be demolished for this proposed medical office  
8 building will be the community health building  
9 in the bottom right and the auditorium which  
10 will be replaced as a part of this  
11 development.

12 What this next slide shows is the  
13 existing hardscape on the site and this will  
14 be relevant as we get to issues of impervious  
15 -- site impervious paving. And the transition  
16 or the difference between what is proposed and  
17 what is existing. This again is the existing  
18 hospital with the proposed medical office  
19 building and garage in the upper right corner  
20 and their location.

21 This is a dimensional plan showing  
22 the same building and gives approximate

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 dimensions for the locations and size of the  
2 buildings. I think the critical dimension to  
3 be aware of here that I make note of is the  
4 one encircled in red, is the 345 feet from the  
5 face of the proposed medical office building  
6 to the property line. Essentially, a football  
7 field distance, 100 yards.

8 This slide shows the same  
9 dimension in a site section and gives you  
10 another concept or another view of what that  
11 scale implies. This also shows the existing  
12 heights of the two main buildings on the  
13 campus, existing Hayes' Hall to the left of  
14 the proposed medical office building is now at  
15 this point top of penthouse roof. It's 324  
16 feet. The existing patient tower is at 329  
17 feet. The proposed medical office building  
18 after removing the floor is 321 feet.

19 Quickly to run through the program  
20 for the medical office building, two levels of  
21 the hospital or two levels of the medical  
22 office building will be dedicated to hospital

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 program and function. The lower level will be  
2 the clinical, the procedural level, including  
3 operating suites of four OR surgery suites and  
4 imaging and the dedicated support, recovery  
5 and prep spaces required for those services.

6 At this point, let me point out  
7 that these services are being relocated from  
8 the existing Hayes' Hall and hospital and  
9 these are not new services to the campus.

10 The next level up, the first floor  
11 is the entry level. This level will house the  
12 new auditorium. It will also house central  
13 registration to support the imaging and  
14 surgery center, some retail pharmacy to  
15 support the medical office building and shared  
16 support space for the hospital functions in  
17 this building.

18 We will also have a small cafe and  
19 the intent is that the medical office portion  
20 can be locked down at night and the auditorium  
21 area can remain open for civic functions.  
22 They can have access to the cafe and vending

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 areas.

2 I moved to the top floor. This is  
3 the sixth floor showing the dedicated  
4 administrative and the classroom function area  
5 on the top floor. This is a little smaller in  
6 footprint and from the hospital portion to the  
7 sixth floor in between is the medical office  
8 lease space. This would be dedicated to  
9 administrative spaces and classroom functions  
10 that already exist in Hayes' Hall.

11 Above that would be the mechanical  
12 penthouse. That is the area in blue. The  
13 dimensions indicate, obviously, it is setback  
14 from the edge, the parapet edge of the  
15 building and vertical circulation is  
16 highlighted in brown. So those are stair  
17 towers and elevators.

18 A little tabulation. We have gone  
19 through this in an effort to describe what the  
20 parking count is for the medical office  
21 building with the net add of the parking  
22 garage and factoring in displaced parking

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 spaces by construction. The net add, as I  
2 said, is 421 cars for the hospital. With that  
3 an under-utilized existing inventory of 360  
4 gives 781 cars available -- parking spaces  
5 available for the MOB, which gives us a ratio  
6 of 6.9 per thousand square feet, which we feel  
7 would be a practical number. It has been our  
8 experience that that has been essential to  
9 keep people from parking in the neighborhoods  
10 ratio.

11 This describes the building  
12 elevations, north and south. The dashed line  
13 indicates the location of the previous floors  
14 for both the garage and the medical office  
15 building. That is a 12.8 foot difference  
16 between what was originally proposed and what  
17 is now proposed. The original proposal at 90  
18 feet, as was mentioned earlier, is now 77 feet  
19 4 inches.

20 In terms of the architecture of  
21 the proposed medical office and garage, our  
22 intent is to be -- to work within the context

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 of the existing campus, to be sympathetic to  
2 the existing materials, borrow from the  
3 vocabulary of the existing hospital site, in  
4 terms of materials and fenestration  
5 organization, but develop a building that is  
6 contemporary in nature and look.

7 We also carried that over to the  
8 garage where we do provide a brick veneer for  
9 the face of the garage on all sides. And in  
10 more detail, we will look at some of the  
11 architectural detailing.

12 The west elevation of the medical  
13 office building you can see and then you see  
14 the auditorium below and then the east  
15 elevation shows the garage and the back side  
16 entry to the garage. The parking garage can  
17 be entered on two levels. It can be entered  
18 on the ground level, on the first floor level  
19 at the front of the site, and on the ground or  
20 basement level on the back of the site.

21 This gives an indication of the  
22 building section. As discussed, the dashed

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 line, as mentioned earlier, indicates the  
2 previous location. It is now 12 feet 8 inches  
3 lower. And it shows the garage being sunk  
4 down an additional level into the grade. So  
5 what you have are three parking levels above  
6 grade and two below.

7 To get into a little more detail  
8 in terms of the fenestration materials, I  
9 indicate two different colors of brick here,  
10 to borrow again from existing brick colors on  
11 campus. We will use precast elements in terms  
12 of banding to accentuate and borrow from some  
13 of the fenestration patterns and detail  
14 bending patterns on the existing hospital.

15 The aluminum curtain wall sections  
16 will be painted aluminum and the glazing will  
17 be high-performance, low e-glazing and they  
18 will be a combination of spandrel and grey  
19 glass.

20 On the upper level as an amenity  
21 to the administrative conference area, we  
22 propose a coupla or not a coupla, but a

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 trellis pergola. The intent being that there  
2 is breakout space and a terrace on that upper  
3 level for hospital functions.

4 Part of the garage in an effort to  
5 soften the edge of the garage, we propose a  
6 trellis, lattice trellis system and to  
7 landscape the wall facing the Loughboro  
8 neighborhood, the south elevation, with this  
9 trellis component. And what we basically do  
10 is set this up and have planters at the front  
11 face and encourage the growth on the vines or  
12 encourage the growth of the vines up the  
13 trellis. And again, that's an effort to  
14 soften the look of the garage. And if you  
15 look in this elevation, it continues the  
16 greenscape up the vertical wall.

17 Another effort here, we had  
18 mentioned controlled lighting operationally to  
19 have the lights cut off at 9:00. And in  
20 addition to that, the lighting is low-profile.  
21 It is obscured, would be obscured behind the  
22 trellis planting also, but is roughly 8 foot

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 6 inches off the grade or off the deck. And  
2 the additional trellis light, since it will be  
3 darker in the winter time, darker around 5:00  
4 or 5:30, this will also aid into the blocking  
5 of the lighting into the neighborhoods or the  
6 view to the parking deck from the  
7 neighborhood.

8 Now, we talked a little bit about  
9 the impervious area coverage. This diagram  
10 shows in blue the existing impervious coverage  
11 and the rose color is the proposed. When they  
12 are laid on top of each other, the critical  
13 number here is that it is less than 1 percent  
14 increase in the impervious coverage on the  
15 site.

16 There are several sustainability  
17 initiatives that will be a part of this  
18 project. In the development of the garage and  
19 the medical office building, we are proposing  
20 a rainwater harvesting system, a cistern  
21 collection system, and that water can be used  
22 to reduce the load going into the bioretention

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 areas as well as the sand filters. It can  
2 also be used to irrigate the existing  
3 landscaping, any non-potable water needs by  
4 the hospital and even AC makeup water for the  
5 -- makeup for the chiller system.

6 Also a part of that is the  
7 bioretention or rain garden development. And  
8 those areas you see in green. Those are the  
9 areas we have identified to develop this  
10 natural filtering process and utilize the  
11 natural process to remove pollutants from the  
12 parking decks and from the sheet parking areas  
13 and filter them and then take, as a part of  
14 that, into a sand filter system, also you see  
15 in the bottom left. That will be a part of  
16 this storm water management development.

17 The interesting thing about this  
18 part of the site is right now there is no  
19 structured system for storm water management  
20 up at this corner, but this will actually be  
21 an enhancement of the existing storm water  
22 management system.

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1           Some of the other important items  
2           in terms of sustainability is how we will  
3           treat the roofs. We're proposing a cool roof  
4           installation. This is something we have done  
5           several times before, that's what you see in  
6           the lower left hand column. It is basically  
7           a reflective membrane fully adhered roof  
8           system that minimal reflectivity for  
9           EnergyStar rating is .65, but this will  
10          actually be LEEDs-approved. It will exceed  
11          .76 in reflectivity.

12           We will also use that same  
13          technology in terms of reflective concrete on  
14          the parking deck achieving a minimum  
15          reflectivity of .3, .29 or .3.

16           And other initiatives that are a  
17          part of the project, high-performance glazing,  
18          of course, will be something that we will  
19          utilize in all the glass on all sides of the  
20          building. Best management practices in  
21          construction. Some of those can simply be use  
22          of recycled materials. The use of fly-ash in

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 the concrete.

2 We have been very successful with  
3 that in addition or as opposed to the use of  
4 Portland cement. It is a recycled product, a  
5 byproduct of coal manufacturing, so it's --  
6 and like I said, we have been very successful  
7 in using that on other jobs. It actually  
8 increases the strength of the concrete.

9 This is in terms of the  
10 bioretention, this is a slide depicting the  
11 development of bioretention swale in a parking  
12 system from initial grading to mature  
13 vegetation. This is what we have proposed in  
14 the front lot. We have a bioretention swale  
15 that runs north to south and is a part of a  
16 paving pedestrian walkway system also from the  
17 Loughboro -- from the sidewalk on the  
18 Loughboro side to the front door of the  
19 medical office building.

20 I'm going to turn the floor over  
21 now to Connie Fan, principal.

22 MR. TUMMONDS: Mr. Fincher, before

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 we have Connie, if I could just ask a couple  
2 of quick follow-up questions.

3 MR. FINCHER: Sure.

4 MR. TUMMONDS: First, in your  
5 discussion of the building heights, I think  
6 you were referring to 324 feet. It's obvious  
7 we don't have a 324 feet tall building in the  
8 District. That was probably the elevation  
9 heights of the building.

10 MR. FINCHER: Yes, that was the  
11 floor elevations.

12 MR. TUMMONDS: Okay. Great.  
13 Second, the sustainability measures that you  
14 noted, are they typical for a proposed medical  
15 office building and parking garage?

16 MR. FINCHER: No, I wouldn't call  
17 them typical. Part of the unique quality of  
18 this project is not a speculative office  
19 building that is owned by the hospital. So  
20 for the most part, there is a level of quality  
21 that we don't often see in the development of  
22 medical office buildings and garages. This

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 gives us the opportunity to go this extra  
2 level in terms of incorporating these  
3 initiatives.

4 MR. TUMMONDS: Okay. And also,  
5 with regards to the additional height, the 77  
6 feet 4 inches of height that we are  
7 requesting, could you discuss why it is  
8 important to have that additional 2 feet 4  
9 inches above the 75 foot height?

10 MR. FINCHER: Well, I think  
11 relative to the floor to floor heights,  
12 medical office buildings are a little more --  
13 well, they are extremely more systems-driven  
14 than typical office buildings. We have  
15 tremendous plumbing loads and depending on the  
16 medical practices within the facility, the  
17 HVAC requirements and ventilation requirements  
18 are much more stringent, that does require  
19 more duct work and more plumbing, no doubt  
20 more waste.

21 It is really a requirement. This  
22 is still at 12.8 in our practice a little

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 shallower than we would like. We can make  
2 this work, but it's really driven by the  
3 systems that are required for medical office  
4 and the uses.

5 MR. TUMMONDS: Great. Okay.  
6 Thank you. Thank you very much. I think  
7 we're ready for Ms. Fan.

8 MS. FAN: Good evening. My name  
9 is Connie Fan. I'm a principal at the firm of  
10 Lewis Scully Gionet located in Vienna,  
11 Virginia. And I'm a LEED-certified  
12 professional and I've been practicing in this  
13 area for over 10 years in medical office  
14 buildings, medical office campus and  
15 continuing care facilities as part of my focus  
16 as landscape architecture of the firm.

17 Let me start with this. It's  
18 honestly an honor to be invited to work on  
19 this campus. I have worked on many hospital  
20 campuses before. This is one of the few  
21 campuses that provides the quality of space  
22 outside and also pay as much attention to the

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 neighborhood's needs and also in terms of  
2 preservation and saving of natural resources.  
3 I have never seen a hospital that has done as  
4 much.

5 Part of our design of any campus  
6 is we usually start with an inventory of the  
7 existing spaces available that has been  
8 designed before and try to find a vocabulary  
9 that we're going to carry along for the next  
10 phase. So we went ahead and took some  
11 pictures of the existing campuses. As you can  
12 tell, the kind of quality of the individual  
13 spaces that the hospital offers to its  
14 patients, visitors and the neighborhood is  
15 quite outstanding.

16 The next slide, please. The other  
17 thing that we noted is that the hospital had  
18 paid tremendous amount of attention to its  
19 frontage, like the upper left hand corner  
20 slide which shows the main entry into the  
21 campus which is very nice and very  
22 outstanding, very nicely designed.

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1           As you move to the right, upper  
2 right hand corner, the slide will demonstrate  
3 that the hospital is very sensitive to the  
4 neighbors across Loughboro Street. It  
5 established evergreen, very healthy evergreen  
6 buffers to buffer the surface parking lot.

7           On the lower left hand corner, you  
8 can tell, even on the back side where it's  
9 facing the sort of naturalized area, the  
10 hospital had installed a massive amount of  
11 landscaping to beautify an otherwise blocky  
12 garage.

13           On the slide on the lower right  
14 hand corner is a tree that the hospital had  
15 went out of its way to transplant, build a  
16 retaining wall to make sure it lived, not only  
17 lives, but lives well.

18           This is a proposed site plan that  
19 our firm prepared. Part of our design, I'm  
20 just going to go through the points that I  
21 brought up before. In terms of the quality of  
22 space, what we are proposing to do is here

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 next to the proposed MOB building between sort  
2 of next to the garage. We are proposing to  
3 provide an outdoor seating area for people to  
4 enjoy in a good sunny day.

5 And the other thing that we are  
6 proposing to do is to -- I'm sorry, I lost my  
7 -- could I? Okay. I'm sorry. The other  
8 thing that we are proposing to do is giving  
9 back to the community a linear park on the  
10 lower right hand corner. The other thing I  
11 brought up before was sensitivity to the  
12 neighborhood across the Loughboro Street.

13 In addition to preserving this  
14 evergreen buffer, we are preparing to extend  
15 further along this edge such that it will  
16 block the view towards the surface parking  
17 lot. Here, we are -- you're going to see in  
18 the next slide that we are going to do an  
19 entry sidewalk with -- along with evergreen  
20 backdrop. The same notion. We are going to  
21 use the same material, repeat the same  
22 material on the garage. In the meantime,

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 we're extending an evergreen buffer that's  
2 being already established well before.

3           Could you go back to that one,  
4 please? Yes. The other point I brought up  
5 before was the hospital's commitment to  
6 preserving natural resources. First saying,  
7 what we are going to do is collecting all of  
8 the runoff, roof runoff and collect it in  
9 cistern, such that we will be able to reuse  
10 the gray water, in this case, for irrigation  
11 purpose. Our desire is to reduce the use of  
12 portable water as much as possible by reusing  
13 the gray water and the water from the HVAC  
14 system.

15           The other thing that we are going  
16 to do is -- can you go back to that slide?  
17 The rain garden. We are -- could you go back?  
18 Okay. On the south side of the garage, we're  
19 proposing to do a rain garden, again to treat  
20 the surface runoff. Okay.

21           On the side that's facing the  
22 existing parkland, we're going to do a gabion

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 wall to, one, retain the elevation that we  
2 needed for a driveway. In the meantime, the  
3 gabion wall will be vegetated with native  
4 materials that will disappear in the natural  
5 environment.

6 Again, as a landscape architect,  
7 this is a campus that I feel very good about  
8 and I'm here to support this campus. Thank  
9 you.

10 MR. SLADE: Good evening,  
11 Commissioners. My name is Louis Slade. I'm  
12 going to present the findings of the  
13 transportation, traffic and parking analysis  
14 that we did on behalf of Sibley Hospital for  
15 this project.

16 A quick summary and this is the  
17 presentation I was going to make back in  
18 October and then we'll tack on at the end the  
19 new information that we developed working  
20 directly with DDOT. Peak traffic conditions  
21 in this neighborhood today are pretty good  
22 compared to other sections of the city that

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 are highly congested. I'm going to review  
2 some levels of service with you, which I know  
3 you love to hear from me about.

4 During the morning and evening  
5 peak hours, we have levels of service D  
6 everywhere except one location and I'll  
7 highlight that for you a little bit later.  
8 The hospital shift times, however, take place  
9 outside of those peak hours. The peak hour in  
10 the morning is from 8:00 to 9:00. The  
11 hospital shift change is at 7:00 a.m. So for  
12 those employees who work 24 hour shifts at the  
13 hospital, there is a shift change at 7:00  
14 a.m., then, of course, 11:00 a.m., when there  
15 is not any of the other commuter traffic  
16 taking place and then at 3:00 p.m.

17 So most of the existing movement  
18 to and from the hospital by employees takes  
19 place outside of the commuter peak periods.  
20 Also, we looked at where people live who work  
21 at the hospital and where people lived who  
22 were patients of the hospital on a regular

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 basis from the records of the hospital. About  
2 20 percent of the people would approach and  
3 leave from the hospital on Macarthur Boulevard  
4 to and from the south, that's through the  
5 Palisades neighborhood.

6 And about 10 percent to and from  
7 the east on Loughboro Road. So about 38  
8 percent within the community that we're  
9 adjacent to. And the balance, 62 percent come  
10 to and from the north on Macarthur, which is  
11 not a residential area and to and from the  
12 east on Dalecarlia, which also abuts a  
13 residential area, but it's quite buffered from  
14 that residential area. Most of our impacts  
15 are to and from the south and it's less than  
16 40 percent of the traffic of the hospital that  
17 uses those roads.

18 This medical office building will  
19 generate traffic that's, approximately, 6  
20 percent or less than the traffic that is on  
21 the adjacent roadways today. So it's a fairly  
22 small percentage of increase in traffic and

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 I'll cover that in a little bit more detail in  
2 a minute.

3 The medical office building will  
4 generate new trips, but, of course, people  
5 don't get sick just because there is a medical  
6 office building. These are trips that are  
7 currently being made close in Maryland and in  
8 this portion of the city to other medical  
9 office buildings where doctors have their  
10 offices. This simply consolidates those trips  
11 to one location.

12 And as Jerry pointed out, makes  
13 life more efficient for doctors who can do  
14 their rounds and treat their patients in their  
15 office without having to drive separately to  
16 an office building. And likewise for patients  
17 who need tests, they will be able to get their  
18 tests done right after their appointment with  
19 their doctor, rather than getting in a car and  
20 have to drive to the hospital for certain  
21 tests.

22 So it really does make life easier

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 for doctors and patients more efficient by  
2 bringing all these uses to one location. And  
3 that's why hospitals across the country have  
4 done this for the last 25 years.

5 Back to existing conditions for a  
6 moment. The existing intersection, if you are  
7 familiar with it or you notice the slides that  
8 Dwight was going through showing existing  
9 conditions, where Dalecarlia Road tees into  
10 Loughboro Road, there is a very flat right  
11 turn that would allow you to make that turn at  
12 a very high speed. There is a stop sign  
13 there, so you are not supposed to do it at a  
14 high speed, but it is a temptation and you  
15 must look at an oblique angle over your -- an  
16 acute angle over your left shoulder to make  
17 sure you are not going to have an accident.

18 That's a safety issue that has  
19 existed for decades and is one of the things  
20 that we are addressing with this plan. You  
21 will see that improved intersection that we  
22 have designed in a few moments.

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1           The other thing I want to point  
2 out is that when you go to the hospital today,  
3 if you are following signs that direct you to  
4 the hospital, they direct you to the front of  
5 the hospital on Loughboro Road. We have a  
6 signing plan that we will go over that shows  
7 how we're going to direct people to that rear  
8 side of the hospital where all the parking is  
9 to further reduce the impacts on Loughboro  
10 Road.

11           The two places where we have  
12 highlighted here, this summarizes our level of  
13 service analysis of existing conditions.  
14 Southbound on Macarthur, which is that north/  
15 south road on the west, on the left side of  
16 the picture, we have two levels of service D.  
17 One in the a.m. and one in the p.m. That's  
18 acceptable today.

19           The other problem area is  
20 Dalecarlia at the right side of the picture.  
21 There is a level of service F in the morning.  
22 F in the morning and C in the afternoon.

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 There is a very heavy left turn movement  
2 there. It has nothing to do with the  
3 hospital. It is a commuter pattern, we  
4 believe, to Arizona to get to Chain Bridge and  
5 I'll talk about that when we talk about  
6 mitigating the impacts.

7 The next slide. This just shows  
8 the traffic generated by the medical office  
9 building that we estimated using standard  
10 procedures. This is with the floor removed  
11 that the hospital has proffered to do. The  
12 trips would be reduced by about 14 percent  
13 from what we were talking about when we were  
14 here back in October.

15 And the next slide gives you a  
16 picture of the impact of additional traffic  
17 from the medical office building to sort of to  
18 scale here hour by hour through a typical week  
19 day. The blue color is existing traffic,  
20 eastbound and westbound on Loughboro Road in  
21 front of the hospital and the red addition on  
22 that is the order of magnitude of the traffic

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 that the medical office building would add  
2 there. So it's a very small amount of  
3 additional traffic.

4 I think this is a slide that has  
5 some activation to it or something. There we  
6 go. These are patterns of traffic to the back  
7 of the hospital to the medical office building  
8 and you can see that by using signing, we can  
9 direct most of the traffic, employees, doctors  
10 and visitors, to the back of the hospital.  
11 There will continue to be some visitor parking  
12 in front and they will continue to use the  
13 existing front entrance.

14 Next slide. And this is just a  
15 combination of all that. Go ahead. Here is  
16 the signing plan. You can't read those, but  
17 we have laid out a signing plan that will  
18 direct everyone from every direction to go to  
19 the rear of the hospital with the exception of  
20 emergencies, which, of course, will go  
21 directly -- as directly as possible to the  
22 emergency room.

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1           Here is the future capacity  
2 analysis. The additional traffic would make  
3 the Macarthur and Loughboro intersection in  
4 the lower left hand corner of the property  
5 where we have an E and D, go from a D level of  
6 service in the morning to an E. However, we  
7 worked with DDOT on the concept of changing  
8 the phasing and timing of that signal where it  
9 can be improved to level of service C, both in  
10 the morning and the evening, which is better  
11 than it is today.

12           The left turn at Dalecarlia to  
13 Loughboro, in the lower right hand corner of  
14 the site, that F level of service in the  
15 morning that would continue to be an F. We  
16 looked at signaling the intersection or  
17 making an all way stop sign there and neither  
18 of those things are warranted for what is a  
19 relatively small problem, so we're going to  
20 leave that unmitigated. I'm going to talk  
21 about that intersection though a little bit  
22 more in a moment.

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1                   Go ahead, Dwight. These are the  
2 mitigation measures that we're providing. I  
3 mentioned the shift times. For at least two  
4 of those shift times, it's very difficult for  
5 hospital employees to use public  
6 transportation. So the traffic mitigation  
7 plan that the hospital uses has to cover those  
8 shift workers and provide them with plenty of  
9 free parking, so they don't park in the  
10 neighborhood, but they must drive, because  
11 they don't have a choice to use public  
12 transportation.

13                   But we are also trying to promote  
14 as much use of public transportation as  
15 possible. So abundant parking is the first  
16 part of the plan.

17                   The second part of the plan is to  
18 relocate and design that intersection to  
19 improve safety conditions, which I mentioned.  
20 And as well as the Dalecarlia and Loughboro  
21 intersection. These are safety improvements.  
22 The directional signs are to relieve traffic

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 on Loughboro Road, I already mentioned that,  
2 and to provide ride sharing information for  
3 employees who can use public transportation  
4 and to encourage car pooling.

5 And then the most effective  
6 element of all of this is the provision of the  
7 shuttle bus. This shuttle bus will run from  
8 the Friendship Heights Metro Rail Station.  
9 People have said no one goes to the medical  
10 appointments without driving, but this will  
11 enable people who have a medical appointment  
12 at Sibley to take Metro to Friendship Heights  
13 and hop on a free shuttle bus to the hospital  
14 and I think that's going to be very effective  
15 for a lot of office workers during the  
16 daytime, who have appointments during the  
17 daytime.

18 Since October when we were first  
19 here, we have worked extensively with DDOT on  
20 all of these measures and I'm just going to  
21 give you a quick summary of what they are. We  
22 looked at pedestrian level of service

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 analysis. This is something new that you  
2 probably haven't heard testimony on and  
3 suffice it to say that the pedestrian levels  
4 of service are very good here and will  
5 continue to be so.

6 We made some pedestrian safety  
7 improvements to the area to make sure that  
8 crossings at Loughboro Road will be safer.  
9 DDOT and we measured speeds on Dalecarlia to  
10 make sure we are designing those changes to  
11 that intersection well. We looked at signal  
12 warrants and stop sign warrants at that  
13 intersection where we had that little level of  
14 service F problem. No changes should be made.  
15 It works well as is.

16 We added four more intersections  
17 to our studies and found levels of service  
18 were fine at all those other intersections.  
19 And we did additional analysis around the  
20 hospital at all of the intersections looking  
21 at worst case analysis. I'm going to spend  
22 the last minute here talking about the design

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 of the intersection.

2 And I'm going to try to shoot this  
3 laser without hitting anybody. Today there is  
4 a very high speed right turn right here. You  
5 come to a stop sign right at this location.  
6 It is two lanes. It is very confusing. You  
7 must look hard over your left shoulder to see  
8 if there is traffic coming toward you from  
9 this direction on Loughboro.

10 That has to be removed and has  
11 always been part of this plan. And this is  
12 the give back to the community in terms of  
13 landscape that Connie Fan spoke about. We  
14 will bring all those right turns to a stop  
15 sign at this location. They can safely look  
16 left and right and then make their turn out.  
17 This is the new Little Falls which takes you  
18 around the north side of the hospital. And  
19 this is the new sort of main roadway along the  
20 front side of the garage. So there is access  
21 to the garage here and here.

22 This is the bus feature. Today

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 the bus feature is in this location and buses  
2 come out Loughboro and make a left turn and go  
3 into there and they dwell here to get back on  
4 schedule and then they pull forward and stop.  
5 They will be able to do that here, wait here  
6 and then go back as they do today.

7 There has been some discussion  
8 between the community, the Transit Authority  
9 and DDOT about buses that today come up the  
10 hill on Loughboro and make this turn and wait  
11 here. Could they go around the back side of  
12 the hospital and do it this way. So we have  
13 designed this that if that comes to pass, the  
14 buses can use it in that other circulating  
15 pattern.

16 This is the design that we didn't  
17 have back in October. We think it solves all  
18 the problems here and we're very pleased to  
19 have it and that's the end of my testimony.  
20 Thank you.

21 MR. FINCHER: Let me just follow-  
22 up with the image that we'll leave you with on

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 the long end. This is a photo simulation of  
2 the proposed medical office building revised  
3 height taken from across the street, Loughboro  
4 Road. It shows the existing screening. This  
5 is with the existing plant screening in front.

6 So this will give you a relative  
7 idea of the actual height of the building  
8 relative to the existing buildings on campus.  
9 And again, as I said, the view from across  
10 Loughboro.

11 MR. TUMMONDS: Thank you very  
12 much. That concludes our presentation.

13 CHAIRPERSON MITTEN: Thank you,  
14 Mr. Tummonds. I think we can have the lights  
15 up. Thank you. Questions from the Commission  
16 for the applicant?

17 COMMISSIONER JEFFRIES: I'll  
18 start.

19 CHAIRPERSON MITTEN: Commissioner  
20 Jeffries?

21 COMMISSIONER JEFFRIES: Good  
22 evening. Mr. Price, I have a question for you

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 and, please, bear with me. My first question  
2 is a lead to a second question. But why are  
3 you building this medical office building?

4 MR. PRICE: Well, we have -- we  
5 sent out surveys to our physicians and we  
6 received back cards indicating interest for  
7 about 140,000 square feet. And this will be  
8 a -- this will net out at about 70,000 square  
9 feet. So we think that the demand is there.  
10 We also want to provide convenience to our  
11 patients. Most of the residents in our  
12 neighborhood support this building and they  
13 want this building. It will be convenient to  
14 them.

15 One of the things that has  
16 happened over in that area, some of you may  
17 remember the Washington Clinic. At one time,  
18 Sibley Hospital received 17 percent of its  
19 admissions from the Washington Clinic, that's  
20 over in that Friendship Heights area. Well,  
21 that building has been torn down and those  
22 doctors were dispersed in the community.

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1           And there is a lot of very high  
2           scale development going on on Wisconsin Avenue  
3           right now and there are two of our really main  
4           medical office buildings that are there that,  
5           frankly, some of the tenants think those  
6           buildings might be converted. So the doctors  
7           are concerned and this is one of the reasons  
8           why.

9           Also, doctors are leaving the  
10          District of Columbia because of the  
11          unfavorable malpractice climate. If they take  
12          their practice to Maryland, they get a lower  
13          malpractice rate. So we're hoping that we can  
14          bring them to Sibley, bond them to the  
15          hospital, give them some convenience, give  
16          them a tradeoff for that malpractice and keep  
17          them in the District of Columbia.

18          Those of you who live in the  
19          District of Columbia a long time, I bet you  
20          could go back and you could probably count six  
21          hospitals that no longer exist in the District  
22          of Columbia. If you go all the way back to

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 the Doctors Eye Hospital that closed in, I  
2 think, the late '70s, Capitol Hill Hospital,  
3 Columbia Hospital and those that haven't,  
4 those hospitals that haven't closed, think of  
5 the ones that have been sold and that are in  
6 financial difficulty.

7 GW was sold. It's a for-profit  
8 hospital. Greater Southeast Hospital by all  
9 accounts has difficulty. Georgetown  
10 University Hospital was sold to MedStar. So  
11 I started my comments out by saying we have  
12 been successful, but we have been successful  
13 because we anticipate and we look to the next  
14 project that will need to be successful.

15 So in a nutshell, those are some  
16 of the reasons.

17 COMMISSIONER JEFFRIES: So you  
18 have -- you currently -- you said you have  
19 done a survey in about what 70,000 square feet  
20 of the space is somewhat spoken for? Is that  
21 what you said? Did I miss that?

22 MR. PRICE: No, I said that there

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 -- when this building is available with the  
2 reduced size that we have agreed to, it will  
3 have 70,000 net rentable square feet roughly.  
4 We have received interest for 140,000, twice.

5 COMMISSIONER JEFFRIES: Okay.

6 MR. PRICE: Now, we didn't get  
7 deposits. You know, once this is approved and  
8 we move forward, we'll go back. We are very  
9 confident that we can fill this building up.

10 COMMISSIONER JEFFRIES: Now, so  
11 the Foxhall Square Mall Building, how far is  
12 that from this location?

13 MR. PRICE: I'm not exactly sure  
14 in terms of mileage, but I would guess a mile  
15 or two. It's close.

16 COMMISSIONER JEFFRIES: And is  
17 that significant? I mean, do you know much  
18 about how leased up it is?

19 MR. PRICE: I don't know anything  
20 about how leased up it is, but the one thing  
21 that I hear about that building from the  
22 doctors and the patients that go there is the

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 parking there is almost impossible. There is  
2 a lot of bleed over traffic onto the -- into  
3 the neighborhood. And to be honest with you,  
4 there are a lot of physicians in that building  
5 who have expressed interest in moving into our  
6 medical office building.

7 COMMISSIONER JEFFRIES: Okay. So  
8 I just want to be clear. In terms of where  
9 are all these doctors coming from that are  
10 going to be, you know, drawn to your building?

11 MR. PRICE: Okay. So to  
12 summarize, we will -- I'll review the three  
13 buildings that I talked about. 3301 New  
14 Mexico Avenue, which is Foxhall Square, okay.  
15 On Wisconsin Avenue there are two large  
16 medical office buildings. One is referred to  
17 as the Barlow Building, one is the Chevy Chase  
18 Building. One is at 5531 and one is at, I  
19 think, 5454. And those are full of Sibley  
20 physicians.

21 There are some smaller buildings  
22 on Friendship Boulevard and on Mass Avenue,

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 4900, 4910 Mass Avenue that have doctors in  
2 them as well. But from all of those buildings  
3 we expect to gather physicians.

4 And if I could just make one more  
5 point and it has been referred to here, but  
6 virtually all hospitals, and we have submitted  
7 for the record those hospitals in the  
8 Washington area and in D.C., modern hospitals  
9 have medical office buildings on their campus.  
10 It's just required for viability in the modern  
11 practice of medicine.

12 COMMISSIONER JEFFRIES: Okay.  
13 Well, you know, I mean, I know the first  
14 question why are you building it. I mean,  
15 there is some office buildings that are  
16 constructed that are somewhat of a speculative  
17 basis, you know, you don't have -- all the  
18 square footage is not accounted for. So I  
19 just, you know, wanted to make certain. A lot  
20 of times, you know, you might find yourself 50  
21 or 60 percent leased and you're sitting there  
22 with a building that is, you know, somewhat

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 vacant and, you know, and then we're  
2 discussing all of this FAR for much of  
3 anything.

4 But I understand. I mean, you are  
5 sort of trying to prepare yourself for the  
6 future. I have two other questions. I'm  
7 going to try to be brief, because we have a  
8 lot of people to go here. I wanted to  
9 understand the locations again. How many  
10 exterior courtyards? Is there just one  
11 exterior courtyard that is going to be part of  
12 the campus?

13 MS. FAN: Yes.

14 CHAIRPERSON MITTEN: I need you to  
15 turn on your mike.

16 MS. FAN: For the proposed site  
17 plan, yes, we are planning on having one  
18 courtyard between -- situated between the new  
19 MOB and the parking garage.

20 COMMISSIONER JEFFRIES: Does the  
21 existing Sibley find a lot of guests roaming  
22 about the campus and so forth, I mean?

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 MS. FAN: This facility is mainly  
2 for visitors who is going to take their  
3 relatives or friends there for treatment and  
4 then in the meantime they will be able to find  
5 a place to sit and not so much jammed in the  
6 medical facility.

7 COMMISSIONER JEFFRIES: Let me  
8 just -- I have been a patient at Sibley. I'm  
9 sort of familiar with it. So I mean, my  
10 question is I was just trying to get a sense  
11 of whether the courtyard that you are  
12 proposing here can accommodate. I mean, do  
13 you find that a lot of visitors, you know, do  
14 the meander out and do you find them spilling  
15 out?

16 MR. PRICE: Yes, sir.

17 COMMISSIONER JEFFRIES: Or  
18 perhaps, Mr. Price, you should be answering.

19 MR. PRICE: I would like to answer  
20 that.

21 COMMISSIONER JEFFRIES: Yes.

22 MR. PRICE: I would say that there

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 are sort of three constituencies that use  
2 these really lovely areas that you saw. One  
3 is certainly the employees. They enjoy  
4 getting a break and walking through the  
5 gardens that we have. We have some really  
6 nice and we kind of refer to them as wandering  
7 gardens that have great water features.

8 We also have some really nice  
9 gardens like this that are associated with our  
10 oncology buildings and most of that is  
11 outpatient and those folks enjoy those, not  
12 only in terms of walking through them or  
13 having a lunch or taking a break or  
14 meditating, they can see those, the way we  
15 have designed some of those facilities, from  
16 the inside too. So they get to appreciate it  
17 from both sides.

18 As well, some of those pictures  
19 that we saw, you know, we have the Grand Oaks  
20 Assisted Living facility on the campus and  
21 there are sort of two components to that. One  
22 is the dementia facility that we have that has

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 a very lovely outdoor kind of wandering garden  
2 area.

3 COMMISSIONER JEFFRIES: I wasn't  
4 at the dementia facility, let me just put that  
5 on the record, but go on.

6 MR. PRICE: Yes. And the other is  
7 in the assisted living facility where those  
8 residents have the ability to wander outside  
9 and some really nice gardens with paved paths.  
10 So we find that they get used.

11 COMMISSIONER JEFFRIES: Okay.  
12 Okay. And the other question is about the  
13 auditorium. I just wanted to get a sense of  
14 the breakdown between community usage and  
15 hospital usage.

16 MR. PRICE: Okay. Well, the ANC-  
17 3D meets there every month and we certainly  
18 welcome them and will continue to in the  
19 future. The Palisades Community Association  
20 are going to be sponsoring a couple of forums  
21 with the new Mayor here in just a few days and  
22 they will be using our auditorium.

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1           Our auditorium is used mostly  
2           though for patient education.

3           COMMISSIONER JEFFRIES:   Okay.

4           MR. PRICE:   Interestingly enough  
5           for our own meetings, but we have a very  
6           robust calendar of community education,  
7           anything from child birth preparation, smoking  
8           cessation. We also have quarterly symposias  
9           on various topics related to oncology and  
10          those are held there as well. So it's really  
11          kind of a community education forum.

12          COMMISSIONER JEFFRIES:   Okay. And  
13          then my last comment really is just about the  
14          architecture. I'm very interested in getting  
15          comments from some of you in the audience  
16          around the architecture. Just curious. So if  
17          testimony comes up, I would be interested if  
18          some of you want to comment on that. Thank  
19          you.

20          CHAIRPERSON MITTEN:   Thank you,  
21          Mr. Jeffries. Commissioner Turnbull?

22          COMMISSIONER TURNBULL:   Thank you,

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 Madam Chair. I guess I wanted to go back and  
2 understand the garage is the same footprint as  
3 it was last fall?

4 MR. FINCHER: That is correct.

5 COMMISSIONER TURNBULL: But you  
6 are sinking it another floor? You're sinking  
7 it, you are dropping it?

8 MR. FINCHER: Dropping it a level.

9 COMMISSIONER TURNBULL: So I guess  
10 the number of cars is the same?

11 MR. FINCHER: Yes. The proposed  
12 number of cars is 750, still is 750. The fact  
13 that we drop it below grade pushes us into  
14 some conditions that warrant mechanical  
15 ventilation that will require a space on the  
16 lower level that will eliminate some spaces.

17 COMMISSIONER TURNBULL: Well, I  
18 guess I was confused by what Mr. Slade said  
19 when he said that there was a 14 percent  
20 reduction from the fall. And it sounds like  
21 it is still the same.

22 MR. SLADE: My referenced 14

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 percent was in the calculated amount of  
2 traffic that will be generated by the  
3 building, notwithstanding the amount of  
4 parking. If there was a shortage of parking,  
5 that possibly could restrict the amount of  
6 traffic, but ignoring parking for a moment,  
7 the way we do the calculations based on the  
8 building size and the amount of activity that  
9 would be anticipated in the building.

10 COMMISSIONER TURNBULL: Okay. It  
11 just sounded -- it was the implication, at  
12 least as I took it, that sounded like there  
13 was a reduction of 14 percent of the garage.

14 MR. SLADE: No.

15 COMMISSIONER TURNBULL: But maybe  
16 that was just my interpretation on it. On the  
17 garage, the water from the garage is going to  
18 be collected?

19 MR. FINCHER: That's correct.

20 COMMISSIONER TURNBULL: Is the  
21 water from the parking lot also collected?

22 MS. FAN: At this point, part of

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 the -- about 50 percent of the parking,  
2 surface parking area that water will be  
3 collected by the bioretention swale in the  
4 middle of the parking lot and the rest of the  
5 surface parking water from the surface parking  
6 will be treated with an underground facility.

7 COMMISSIONER TURNBULL: Okay.  
8 Thank you. You talked about sustainable  
9 features of the building, which this  
10 Commission and this Commissioner, in  
11 particular, likes. Are you going -- I take it  
12 you're not going for LEED-certification  
13 though?

14 MR. FINCHER: At this time, that  
15 was not our intent.

16 COMMISSIONER TURNBULL: But are  
17 you trying to achieve a certain LEED-point  
18 level or have you set up? I mean, is there a  
19 goal that you are trying to achieve?

20 MR. FINCHER: We haven't set up a  
21 numerical level in terms of any kind of LEED-  
22 accreditation. I would say it's more best

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 management practices incorporating to the  
2 extent we can any state of the art treatments  
3 for again recycling water, heat island  
4 mitigation. I mean, those are certainly  
5 components of any kind of LEEDs-initiative.  
6 But we weren't actively trying to get any  
7 formal certification.

8 COMMISSIONER TURNBULL: Okay. I  
9 guess that leads to my next. One of the  
10 things that we would like to see on more  
11 projects are green roofs rather than cool  
12 roofs, but although cool roofs are a fine  
13 solution. Did you look at any possible green  
14 features on the roof of the building or on the  
15 garage?

16 MR. FINCHER: We didn't look on  
17 the garage. We thought in terms of the garage  
18 we thought that would be a sacrifice of  
19 parking that we couldn't handle. The upper,  
20 the main medical office building just due to  
21 the footprint and the setbacks for the  
22 administrative conference area, I don't think

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 that allowed us any area to get any  
2 substantial green roof initiative up there or  
3 any planting issue.

4 COMMISSIONER TURNBULL: I guess my  
5 one thought is that the garage is such a big  
6 footprint that some type of green measures may  
7 or might be a benefit to the community.

8 MR. FINCHER: Um-hum.

9 COMMISSIONER TURNBULL: And I was  
10 looking to the OP report and I don't -- we  
11 will have to ask them, it says "OP supports  
12 the provision of the mitigation." They talk  
13 about green elements on the parking structure  
14 to reduce runoff and heat island effect. And  
15 the only thing I have heard is your cool roof.  
16 So I'll have to quiz OP what they were  
17 referring to.

18 MR. FINCHER: Okay. There was a  
19 discussion internally about the use of trees  
20 on top of the garage deck and we -- I guess we  
21 would refer to our landscape architect to kind  
22 of further that discussion, but it has been

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 her experience. Well, I'll let you.

2 MS. FAN: I would like to speak to  
3 that. Our firm has been involved with many,  
4 many projects in the Fairfax County. As part  
5 of the requirement for other counties is  
6 putting trees on top of the roof and it has  
7 been our experience that trees put on top of  
8 the roof most of the time doesn't survive as  
9 well.

10 And we would rather recommend  
11 something more like a trellis system that is  
12 going to help mitigate the feel of an  
13 otherwise blocky parking garage and in the  
14 meantime allow the roots to survive to start  
15 from the ground level where you have ample  
16 moisture and protection and dress up the  
17 surface with that.

18 Most of the time putting trees in  
19 the little confined 4 x 4, 8 x 8 boxes doesn't  
20 survive as well. You can see that as you  
21 drive along.

22 COMMISSIONER TURNBULL: But you

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 don't have to put trees. You don't have to  
2 necessarily put trees per say.

3 MS. FAN: Part of the green  
4 element are providing shade for the surface  
5 parking is you are counting on the canopy, in  
6 this case. I would like to speak to the green  
7 roof measure as well. Green roof itself it's  
8 -- you are talking about a shallow system,  
9 mainly about 4 to 9 inches of soil. And the  
10 thought of it will provide the cooling effect  
11 to the roofing, like you said before.

12 The other thing is it slows down  
13 the runoff. Every water that hits the roof  
14 will be collected with a little cell system on  
15 the bottom of the green roof and later on  
16 slowly discharge into the downspout system.

17 What we are proposing here is to  
18 do a reflective roof. Basically, we are  
19 trying to bounce the heat off the roof  
20 membrane itself. The other thing we're doing  
21 here is collecting all of the runoff from the  
22 roof. Instead of discharging into the storm

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 system, we are proposing to reuse everyone of  
2 -- every bit of the raindrop that hits that  
3 roof.

4 So I think we are attacking from  
5 two fronts for the same purpose, reducing the  
6 heat island effect and mitigate the storm  
7 water runoff.

8 COMMISSIONER TURNBULL: Okay. Let  
9 me ask a question about the lights on the  
10 garage. I understood that they are going to  
11 be going off at 9:00?

12 MR. FINCHER: 9:00, that's  
13 correct.

14 COMMISSIONER TURNBULL: Is the  
15 garage then still open at 9:00?

16 MR. FINCHER: No, the use of the  
17 garage for the medical office building, of  
18 course, the medical office building will be  
19 closed, so there will be no use for that  
20 garage at that point.

21 COMMISSIONER TURNBULL: So there  
22 is no possibility of somebody going for a car

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 after 9:00?

2 MR. FINCHER: Well, there will be  
3 controlled access. I mean, you will be able  
4 to exit.

5 COMMISSIONER TURNBULL: I was just  
6 curious how you find your car if there is no  
7 lights on.

8 MR. FINCHER: Well, operationally,  
9 that is a commitment that the hospital has  
10 made to the neighbors.

11 COMMISSIONER TURNBULL: So the  
12 last people out get a little flashlight?

13 MR. TUMMONDS: I think they will  
14 probably make that mistake once and then they  
15 would know that if they were going to be after  
16 9:00, as we said, there is surface parking in  
17 the front there. I think they would probably  
18 recognize that they should park in front.

19 COMMISSIONER TURNBULL: So if  
20 Martha is leaving Ethel in the hospital, she  
21 says it's 8:50, I've got to go. Okay.

22 MR. TUMMONDS: I'll be right back.

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1                   COMMISSIONER TURNBULL:    I guess  
2                   from Ms. Fan, just one question.  You used the  
3                   term linear park.

4                   MS. FAN:        Linear park, that's  
5                   right.

6                   COMMISSIONER TURNBULL:    And a  
7                   linear park is to be, I'm just curious, do I  
8                   have to walk in a straight line or is there --

9                   MS. FAN:        Linear park as opposed  
10                  to a plaza situation.  In this case, we  
11                  identified a location as more of a park for  
12                  the community to walk and pause a little bit,  
13                  not so much a gathering space.

14                  COMMISSIONER TURNBULL:  Right.

15                  MS. FAN:        First of all, from that  
16                  I understand traffic-wise, we want to  
17                  discourage people from crossing at that  
18                  particular intersection.  So a linear park is  
19                  mainly for someone to walk along the pathway,  
20                  have a little place to pause a little bit and  
21                  move on with their journey.

22                  COMMISSIONER TURNBULL:  Okay.  So

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 I don't have to go, I really don't have to be  
2 linear. I can be non-linear as I go through  
3 it.

4 MR. FINCHER: Yes.

5 MS. FAN: Could be a curvy linear.

6 COMMISSIONER TURNBULL: Okay.

7 Thank you. All right. Those are my  
8 questions, Madam Chair.

9 CHAIRPERSON MITTEN: Thank you.  
10 Mr. Hood?

11 VICE CHAIR HOOD: Yes, thank you.  
12 Thank you, Madam Chair. Mr. Slade, you  
13 mentioned that -- I'm glad that you really  
14 expanded on the level of service that really  
15 cut down on one or two of my questions. But  
16 I do want to ask you you mentioned  
17 intersection level of service F. I didn't see  
18 it in the report. It may have been there.  
19 But what intersection was that?

20 MR. SLADE: It's where Dalecarlia  
21 Parkway reaches and ends in a T intersection  
22 with Loughboro Road.

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1                   VICE CHAIR HOOD: Do you have a  
2 pointer you can show me?

3                   MR. SLADE: I do. I do.

4                   VICE CHAIR HOOD: That will save  
5 me from having to look for this slide over  
6 here.

7                   MR. SLADE: Let me use your's.  
8 Mine is not working too well. You see this F  
9 and C.

10                  VICE CHAIR HOOD: Okay. Okay.

11                  MR. SLADE: F is the morning  
12 condition and C is the evening condition. And  
13 what is happening here, Commissioner Hood, is  
14 traffic is coming in this direction and  
15 turning left to pass through the area. It's  
16 not hospital traffic. It's commuter traffic  
17 in the morning. And one of your routes over  
18 in Virginia is to go east on Loughboro to  
19 Arizona and south to Arizona to the Chain  
20 Bridge. And that's the pattern that we think  
21 it is.

22                  We don't increase that traffic

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 significantly and it's not -- there is a stop  
2 sign that they have to wait at while traffic  
3 moves freely on Loughboro. So Loughboro  
4 traffic does not stop. So they are waiting at  
5 a stop sign and they are delayed during the  
6 morning peak period fairly long.

7 VICE CHAIR HOOD: Um-hum.

8 MR. SLADE: DDOT said well, maybe  
9 we need a signal there or maybe we need to  
10 stop all three approaches there. We looked at  
11 the federal warrants for all way stops, where  
12 everyone has to stop and we looked at whether  
13 a signal would be warranted. And neither were  
14 justified based on the delays that that  
15 particular movement encounters.

16 It's not a lot of cars, but it's  
17 enough that they back up and they simply have  
18 to wait to make that left turn. If you put a  
19 stop sign on the Loughboro approach, you would  
20 be stopping so much more traffic that the  
21 little bit of gain you gave to the difficult  
22 movement now, would be counterbalanced.

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 VICE CHAIR HOOD: Okay.

2 MR. SLADE: To a great extent.

3 VICE CHAIR HOOD: Okay. Thank  
4 you. And going in line with Commissioner  
5 Jeffries, I want to talk about the medical  
6 building in relationship to doctors that  
7 practice in the hospital. Now, as you said,  
8 Mr. Price, when they leave, they have to go to  
9 three other different sites. And you said, I  
10 think, one of them was the -- was one of them  
11 Foxhall?

12 MR. PRICE: Yes, sir.

13 VICE CHAIR HOOD: Okay. One of  
14 them was Foxhall. Okay. And looking at your  
15 class that you are trying to -- you know, the  
16 positions you are trying to service, we have  
17 in the record about three -- I would say they  
18 are standard letters from doctors who are  
19 basically against it and will be. Why would  
20 that be? Because I know the hospital that I  
21 attend and I'm just curious.

22 Is that the normal practice around

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 the country that the medical building is right  
2 there, number one, for convenience and number  
3 two, if you have a 9:00 appointment and your  
4 doctor had rounds to make and if he had to  
5 come from seven or eight blocks away,  
6 eventually if you are in that situation, you  
7 start getting impatient. You have a problem.  
8 And when he comes, your pressure is even  
9 elevated.

10 MR. PRICE: Yes.

11 VICE CHAIR HOOD: So is that the  
12 normal practice though for the doctors to have  
13 that convenience? And I'm just curious,  
14 because in the record here we have physicians  
15 who are against it. And I was just wondering  
16 why would they be. I know you can't speak for  
17 them, but --

18 MR. PRICE: Yes, I'm really not  
19 sure who they are. And I would say there are  
20 probably in the record some physicians who  
21 have and there are -- certainly we have one  
22 physician that will testify for us this

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 evening and there are other physicians in the  
2 audience this evening that you are absolutely  
3 right. That convenience factor is very  
4 important.

5 It's really important to a couple  
6 of groups of physicians that you can think of.  
7 They tend to be the physicians who are  
8 hospital-based like the obstetrician  
9 gynecologist who, you know, delivering their  
10 babies and it makes it very efficient for them  
11 if their offices are right next door, rather  
12 than running back and forth to a remote  
13 office.

14 And then the same is true of  
15 general surgeons. We call Sibley a surgical  
16 hospital. We do a lot of surgery at Sibley.  
17 There will be a lot of surgeons in this  
18 building, very convenient for them to do their  
19 surgery and then walk, you know, a few feet to  
20 their office. So you're absolutely right.

21 VICE CHAIR HOOD: Okay. Let's  
22 talk a little bit about the -- on page 23 of

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 your October 12<sup>th</sup> submission revised date on  
2 your architecture. Let's talk about your  
3 aluminum trellis. I don't usually go down  
4 these lines, but I'm going to do it.

5 MR. FINCHER: Okay.

6 VICE CHAIR HOOD: Tell me what is  
7 happening here. What's going on?

8 MR. FINCHER: Well, actually, the  
9 trellis that you see --

10 VICE CHAIR HOOD: You might want  
11 to turn your microphone on.

12 MR. FINCHER: The trellis that you  
13 see indicated at the administrative conference  
14 level is really an amenity for a breakout  
15 space for their use. The idea was that that  
16 could be a deck that people could spill out  
17 onto if they have events or even breakout of  
18 the classroom areas.

19 The illustration there indicates  
20 that one possibly as planted. That's  
21 certainly not the intent on the upper one.  
22 And essentially, it's a sun screen. Almost a

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 landscape amenity on top of the landscaped  
2 roof. And when I say landscaped, I mean a  
3 roof that is designed with a paver system and  
4 a breakout in gathering space.

5 VICE CHAIR HOOD: So it's an  
6 outdoor area?

7 MR. FINCHER: It is.

8 VICE CHAIR HOOD: There's probably  
9 going to be tables and chairs and you can go  
10 out and have your lunch or finish your  
11 seminar?

12 MR. FINCHER: Yes. I mean, it  
13 certainly would have seating as a component of  
14 it. But I wouldn't expect to see necessarily  
15 dining tables or cafe umbrellas.

16 VICE CHAIR HOOD: Okay.

17 MR. TUMMONDS: Mr. Fincher, is  
18 there a design rational as to why you chose  
19 aluminum rather than the brick, which is the  
20 majority of the facade?

21 MR. FINCHER: Actually, that was a  
22 conscious choice. Obviously, we looked at a

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 couple of alternatives in terms of how to  
2 sheath the upper level as well as the  
3 mechanical penthouse. One of the ideas was  
4 the use of brick all the way up tended to make  
5 it more massive in terms of the building, the  
6 use of a metal finish, we thought, actually  
7 added to an effect of that space or those  
8 walls disappearing against the skyline.

9 So really it was an effort to  
10 mitigate the visual upper floors by not using  
11 a heavy masonry material.

12 VICE CHAIR HOOD: Okay. And it's  
13 not going to hang over? It's right in line  
14 with the side of the building, right?

15 DR. FISHER: Actually, it sets  
16 back.

17 VICE CHAIR HOOD: Oh, it sets  
18 back?

19 MR. FINCHER: Yes.

20 VICE CHAIR HOOD: Okay. Okay.  
21 All right. Thank you. The only other  
22 question that I have, maybe Mr. Slade or Mr.

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 Price, is there zone parking surrounding the  
2 hospital? Do you have like 2 hour zones, I  
3 guess?

4 MR. PRICE: 2 hour zones.

5 VICE CHAIR HOOD: Okay.

6 MR. PRICE: Yes.

7 VICE CHAIR HOOD: You do have 2  
8 hour zones?

9 MR. PRICE: Across on Loughboro.

10 VICE CHAIR HOOD: Loughboro.  
11 Okay. I mean, is it kind of pretty much in a  
12 general area around the whole hospital?

13 MR. PRICE: No, because Dalecarlia  
14 Parkway is on one side. Yes, there is some on  
15 Macarthur, but you get very little hospital  
16 parking down there, because it's so far away.  
17 It's on Loughboro Road directly across the  
18 street from, you know, our entire lot. It  
19 runs all the way from assisted living clear up  
20 to this little building they were talking  
21 about, the community services building.

22 VICE CHAIR HOOD: Do patrons, do

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 they have to pay for parking, like patients,  
2 like Commissioner Jeffries, did he have to pay  
3 for parking?

4 MR. PRICE: Yes, sir, he does.

5 VICE CHAIR HOOD: Good.

6 MR. PRICE: But we like to think  
7 it's the best rate in town. It's the best  
8 deal going.

9 VICE CHAIR HOOD: Okay. So you  
10 have a good parking rate?

11 MR. PRICE: We think so.

12 VICE CHAIR HOOD: Okay. All  
13 right. Thank you. Thank you, Madam Chair.

14 CHAIRPERSON MITTEN: Thank you,  
15 Mr. Hood. Just a follow-up on the questions  
16 that Commissioner Jeffries was asking. Do you  
17 intend to prelease the office building before  
18 you start construction?

19 MR. PRICE: We would like to. And  
20 we would like to prelease as much as we can,  
21 but we will start -- we would like to start  
22 the construction. We would start the

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 construction before it was completely leased.  
2 I might say that my boss and I, Bob Sloan,  
3 developed an office building like this many  
4 years ago on 2440 M Street and our experience  
5 there was is that we tried to prelease it as  
6 much as possible. We didn't achieve that, but  
7 we got close to it. So I wouldn't commit to  
8 completely preleasing it, but that's what  
9 we're going to try to do.

10 CHAIRPERSON MITTEN: Would you  
11 commit to a certain percentage? Because, you  
12 know, some of the issues that are being raised  
13 is that this is -- you know, that you are not  
14 going to be able to attract the physicians and  
15 then there will be this, you know, white  
16 elephant, if you will.

17 MR. PRICE: Well, one of the  
18 things that we have looked at, when we got  
19 these interest cards back from the folks is we  
20 asked them to tell us when their lease would  
21 expire. And probably about 80 percent of the  
22 physicians who are interested in this building

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 have their leases expiring within a year  
2 window of when we would like to finish this  
3 building.

4 So, you know, I'll be honest with  
5 you, we're very confident that this building  
6 will fill up. We were confident that the  
7 building would fill up with the additional  
8 floor, but now that we have cut it back, you  
9 know, we have got four floors here with 70,000  
10 net runable square feet and, you know, there  
11 are some large internal medicine groups that  
12 could take almost a whole floor. So it's  
13 really not very much.

14 CHAIRPERSON MITTEN: Well, it's  
15 just something for you to consider.

16 MR. PRICE: Okay.

17 CHAIRPERSON MITTEN: As the case  
18 progresses. To follow-up on the questions  
19 that Commissioner Turnbull was asking. First,  
20 is the storm water management, the storm water  
21 management facilities that you are proposing,  
22 do they exceed the minimum requirements to

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 meet building code?

2 MR. PRICE: Jim, please.

3 Introduce yourself for the record.

4 MR. LONG: Yes, my name is Jim  
5 Long from the Delon Hampton and Associates.

6 CHAIRPERSON MITTEN: Try that one  
7 more time with the mike on.

8 MR. LONG: Jim Long from Delon  
9 Hampton and Associates.

10 CHAIRPERSON MITTEN: Thank you.

11 MR. LONG: Yes, we exceed the  
12 minimum. What we have actually suggested to  
13 Mr. Price is that we do these, the sand filter  
14 in the lower lot, because there is no existing  
15 storm water management facility right there.  
16 And really that's a lot reconstruction. So  
17 it's something additional that we did. So  
18 since the lot drains from right to left, we  
19 got the swale in the center of the lot and the  
20 sand filter pretty much gets the rest of the  
21 front area of the Sibley parking covered as  
22 well as we had the building areas covered.

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1                   So, yes, it will actually exceed  
2 the DOH requirements or DOE requirements.

3                   CHAIRPERSON MITTEN: So is it to  
4 the extent that it deals with something  
5 besides the construction project itself? Is  
6 that the extent to which it exceeds the  
7 requirements?

8                   MR. LONG: Yes. Technically under  
9 the DOH requirements, we're responsible for  
10 managing our storm water for our project plus  
11 any net increase and impervious. So we're  
12 actually managing more than our net increase  
13 and impervious areas.

14                   CHAIRPERSON MITTEN: Okay. Do we  
15 have an exhibit in the record that outlines  
16 the sustainable design elements that were  
17 discussed here tonight?

18                   MR. TUMMONDS: We have the  
19 PowerPoint presentation will go into the  
20 record.

21                   CHAIRPERSON MITTEN: Okay.

22                   MR. TUMMONDS: But we can also

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 supplement the record with additional.

2 CHAIRPERSON MITTEN: That would be  
3 great. You know, just to the extent that  
4 these are things that you intend to proffer,  
5 I think that would be helpful.

6 MR. TUMMONDS: Okay.

7 CHAIRPERSON MITTEN: For the  
8 project itself, you will be building where  
9 there is existing parking. Is that right?

10 MR. TUMMONDS: That's correct.

11 CHAIRPERSON MITTEN: And the  
12 interim plan for parking would be what?

13 MR. TUMMONDS: I think that's a  
14 question for Jerry.

15 MR. PRICE: Well, one of the  
16 things that was noted is that we have excess  
17 inventory right now and a parking garage. We  
18 also have had a history when we have done  
19 projects. Immediately to the north is the  
20 Army Corps of Engineers, their property. And  
21 towards the west end of that is a big open  
22 area that when we were building our parking

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 garage a couple of years ago, we had a lease  
2 with the Federal Government where we could use  
3 that surface lot.

4 In the intervening couple of  
5 years, that's where the D.C. Leaf trucks  
6 parked all fall, so that still exists. So if  
7 we needed it, we would go back to that. But  
8 we also have capacity in our parking garage  
9 and could even get more cars by double  
10 parking, doing attendant parking. So we think  
11 we have a good plan for that.

12 CHAIRPERSON MITTEN: I think if  
13 you could submit your interim parking plan for  
14 the record, that would be helpful.

15 MR. PRICE: Okay.

16 CHAIRPERSON MITTEN: Do you agree  
17 to the quarterly reporting request by DDOT to  
18 report on the various -- the successes of the  
19 various --

20 MR. PRICE: Absolutely.

21 CHAIRPERSON MITTEN: Okay. Does  
22 the contribution to Iona, do you anticipate

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 that it will affect the number of vehicle  
2 trips to the site?

3 MR. PRICE: To our site?

4 CHAIRPERSON MITTEN: Yes.

5 MR. PRICE: No. It's for them.

6 CHAIRPERSON MITTEN: So it's

7 strictly --

8 MR. PRICE: It's strictly for  
9 Iona.

10 CHAIRPERSON MITTEN: -- an  
11 amenity?

12 MR. PRICE: Yes.

13 CHAIRPERSON MITTEN: Off-site  
14 amenity?

15 MR. PRICE: Yes, ma'am.

16 CHAIRPERSON MITTEN: Okay. And I  
17 would think that in order to have the shuttle  
18 be maximally effective, it would require that  
19 the doctors who are in the medical office  
20 building, since I guess patients to the  
21 hospital are less likely to come on the Metro,  
22 that they communicate. So what is your --

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 what do you intend to do in order to have this  
2 information sort of filter down through the  
3 doctors and have them communicate with their  
4 patients?

5 MR. PRICE: Okay. Well, first of  
6 all, on this card that I talked about that we  
7 got the 140,000 square foot of interest, we  
8 mentioned it on there. We got a lot of  
9 positive feedback about that. Especially from  
10 these physicians who are right across the  
11 street from Friendship Heights and the Metro  
12 stop there. They view that as very positive.  
13 And so we would intend to have some kind of a  
14 written documentation brochure that we would  
15 use to communicate that.

16 CHAIRPERSON MITTEN: Could you  
17 just translate that into --

18 MR. TUMMONDS: Sure. In fact, we  
19 have in our September 21<sup>st</sup> submission, Exhibit  
20 H, is our Sibley Hospital Transportation  
21 Management Plan. Sibley will provide ride  
22 sharing information to employees by creating

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 a database and matching service to link  
2 existing car pools.

3 In addition, with regards to the  
4 shuttle bus service, information will be  
5 presented to employees at employee meetings.  
6 We think that those are some of the steps we  
7 can take to publicize and, you know, make this  
8 an effective tool.

9 CHAIRPERSON MITTEN: I guess I'm  
10 focusing on more so than employees, although  
11 that's important too, is the actual individual  
12 patients that will be coming and the conduit  
13 for that, seems to me, has to be the doctors.

14 MR. PRICE: Right. I think you're  
15 right. We can -- would you like us to mock  
16 something up in terms of what we would like to  
17 use?

18 CHAIRPERSON MITTEN: I just want  
19 to nail down what the proffer is to see how  
20 effective we think it's going to be.

21 MR. PRICE: Right.

22 CHAIRPERSON MITTEN: Mr. Tummonds

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 understands.

2 MR. TUMMONDS: Yes, I do.

3 MR. PRICE: Good.

4 CHAIRPERSON MITTEN: Okay. And  
5 then lastly, the Office of Planning's report  
6 from the 22<sup>nd</sup> of January, they voice a concern  
7 that there is space in the existing hospital,  
8 in the hospital that exists now that houses  
9 mechanical equipment that will be now moved  
10 into the new facility. And I guess there  
11 hasn't been or it hasn't been communicated  
12 what you intend to do in terms of back-filling  
13 that space.

14 MR. PRICE: Okay. There are two  
15 places that are actually going to transfer in  
16 the medical office building. The Hayes' Hall  
17 Building, which is the old nursing dormitory,  
18 has a surgery center in it and it has a data  
19 center in it. Our campus master plan involves  
20 taking Hayes' Hall down. Those two pieces of  
21 space will go in to the medical office  
22 building and there will be no back-fill there.

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 We commit to no back-fill for the surgery  
2 center and the data center.

3 CHAIRPERSON MITTEN: Okay.

4 MR. PRICE: Now, the medical  
5 office building will also have some diagnostic  
6 equipment in it. What we intend to do is  
7 rather than have three CAT scanners, two in  
8 the hospital, one in the medical office  
9 building, we'll move one from the hospital and  
10 put it in the medical office building.  
11 Probably some ultrasound, some sort of general  
12 diagnostic kinds of stuff. That space in the  
13 radiology department that's freed up, say by  
14 getting rid of a CAT scanner, which is  
15 probably a room of 250 square feet, we'll just  
16 use to decompress some stuff in the  
17 department.

18 I mean, it's an older area and we  
19 just -- some things that are already there  
20 just need more space. So we don't anticipate  
21 new services for those spaces.

22 CHAIRPERSON MITTEN: Okay. I know

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 that you were asked at some point in the past  
2 not to present an entire campus plan, but to  
3 narrow this down. But you just said something  
4 which is that you intend to tear down two  
5 smaller buildings because they will go into  
6 the medical office building and not be back-  
7 filled.

8 So I would ask you to consider  
9 just again to ease everyone's mind whether or  
10 not as part of this plan you would proffer  
11 that within, you know, x months of the  
12 completion of the medical office building that  
13 those buildings would be torn down or that you  
14 would at least seek a raze permit. So I'm  
15 just asking that and you can address it now or  
16 do it in a written submission.

17 MR. PRICE: Okay. Fine.

18 CHAIRPERSON MITTEN: Okay. What  
19 else? Mr. Turnbull?

20 COMMISSIONER TURNBULL: Madam  
21 Chair, I just had one last question which I  
22 meant to ask. In the garage, you have shown

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 a screen trellis system in the garage, but  
2 it's only on one elevation.

3 MR. FINCHER: That's correct.

4 COMMISSIONER TURNBULL: Did you  
5 look at the possibility of putting it on other  
6 elevations? The only reason I'm asking is  
7 that you showed some wonderful pictures of the  
8 landscaping of the existing facility and how  
9 it tries to soften the edges going down the  
10 hills and everything. And I'm just wondering  
11 you are softening it on one side, one  
12 elevation only and I was just wondering if you  
13 had thought about trying to do the same on  
14 other elevations?

15 MR. FINCHER: Well, I think the  
16 original intent was done to screen potential  
17 light from the parking areas to the neighbors  
18 across Loughboro, so that was not a  
19 consideration typically to create a trellis  
20 system all the way around.

21 COMMISSIONER TURNBULL: We can  
22 take a look at that issue.

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 MR. TUMMONDS: We could.

2 MR. FINCHER: I mean, we can  
3 certainly take a look at it.

4 COMMISSIONER TURNBULL: Yes.

5 MR. FINCHER: But just to answer  
6 your question.

7 COMMISSIONER TURNBULL: Good. All  
8 right. Thank you.

9 CHAIRPERSON MITTEN: All right.  
10 Now, we are ready for cross examination of the  
11 applicant. And will there be any cross  
12 examination by the ANC? Okay. Commissioner  
13 Thompson? Oh, we have a space next to Mr.  
14 Slade. Yes, he doesn't bite, usually.

15 MS. RACHEL THOMPSON: I'm Rachel  
16 Thompson and I do have a number of questions,  
17 but I'll try and make up for that by keeping  
18 others short. Mr. Price, I just wanted to  
19 ask. I mean, Sibley's mission is as a  
20 nonprofit, right, so we shouldn't expect the  
21 same operating margins from Sibley that we  
22 might for a for-profit hospital, for instance.

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1                   MR. PRICE: Generally, that would  
2 be true.

3                   MS. RACHEL THOMPSON: Is there a  
4 number that you could say about what in  
5 general for a hospital, a community hospital,  
6 such as Sibley, would an operating margin be  
7 for a generally healthy institution?

8                   MR. PRICE: You would like to see  
9 it in the neighborhood of 6 or 7 percent.

10                  MS. RACHEL THOMPSON: Is that the  
11 norm across the country or for a facility of  
12 this kind?

13                  MR. PRICE: Well, I don't know  
14 about the norm. I know you can't really look  
15 at the country in terms of comparing Sibley.  
16 Sibley has some things that are unique about  
17 it. But we have had times when we had an  
18 operating margin there and that's -- you asked  
19 me the question what I considered healthy and  
20 that's what I would consider healthy.

21                  MS. RACHEL THOMPSON: Um-hum,  
22 okay. How many doctors are on Sibley's staff

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 today?

2 MR. PRICE: There are probably  
3 about 900 physicians on the staff. Only about  
4 180 of those would comprise 80 percent of the  
5 work load. Many of the physicians that have  
6 privileges at Sibley keep them as a provision  
7 or as an occasional use. But 180 physicians  
8 would be the physicians that we would see on  
9 a regular basis.

10 MS. RACHEL THOMPSON: Okay. When  
11 I say staff, I'm thinking that you pay them  
12 benefits and they get a pay check that comes  
13 from Sibley Hospital. Is that the correct  
14 number then, 180?

15 MR. PRICE: Oh, no, huh-uh. When  
16 you say staff, our medical staff, most of our  
17 medical staff is voluntary medical staff.  
18 They are independent practitioners that have  
19 their own businesses. The university teaching  
20 model employs their physicians, but we only  
21 employ, I would say, I might characterize it  
22 as a handful of physicians.

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 MS. RACHEL THOMPSON: Um-hum.

2 MR. PRICE: That we employ.

3 MS. RACHEL THOMPSON: So that  
4 distinguishes you from, for instance, GW or  
5 Georgetown where most of their physicians are  
6 on staff, because they are teaching hospitals?

7 MR. PRICE: Correct.

8 MS. RACHEL THOMPSON: Okay. Do  
9 you currently lease office space to any  
10 doctors anywhere on your campus?

11 MR. PRICE: Well, we provide  
12 office space to our hospital-based physicians,  
13 like our emergency physicians and our  
14 pathologists, our anesthesiologists, our  
15 radiologists and we have a small office that  
16 we rotate, that people take turns in, so to  
17 speak, and it's mostly used by obstetricians  
18 who are delivering their babies and they can  
19 have their patients cancel at our office and  
20 have their patients come over and so they can  
21 see their patients while they are delivering  
22 babies.

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 MS. RACHEL THOMPSON: So you  
2 provide office space to some of those doctors.  
3 Do any of them pay you in the form of a lease?

4 MR. PRICE: Yes.

5 MS. RACHEL THOMPSON: Okay.  
6 Roughly how many?

7 MR. PRICE: Oh, I would say seven  
8 or eight.

9 MS. RACHEL THOMPSON: Okay. Will  
10 any of the new doctors that will occupy office  
11 space in the new medical office building be  
12 staff doctors as we were talking about it  
13 before where their pay check would come from  
14 Sibley?

15 MR. PRICE: No.

16 MS. RACHEL THOMPSON: So and as a  
17 nonprofit, you don't ordinarily pay property  
18 tax on your activities, but in this lease  
19 arrangement, would you need to pay property  
20 taxes on the revenue from these offices?

21 MR. PRICE: I'm not sure the  
22 relevance of this to our proceeding this

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 evening.

2 CHAIRPERSON MITTEN: Right. I  
3 agree. Can you tell us what the relevance is?

4 MS. RACHEL THOMPSON: Um-hum,  
5 sure. I guess what I'm trying to understand  
6 is when they make an offer to doctors that are  
7 in commercially-owned buildings, are they able  
8 to do it on more favorable terms financially?  
9 How will it compare in the financial terms?

10 CHAIRPERSON MITTEN: Okay.

11 MS. RACHEL THOMPSON: So it goes  
12 to the viability of the space and your  
13 questions.

14 MR. PRICE: Okay. I can answer  
15 that. The hospital is absolutely prohibited  
16 through the Stark Laws for any kind of  
17 innovative physicians. We will have to charge  
18 a market rate to these physicians.

19 MS. RACHEL THOMPSON: And will you  
20 pay their malpractice rates? Their  
21 malpractice fees?

22 MR. PRICE: No.

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 MS. RACHEL THOMPSON: Okay.  
2 Sorry, I'm switching sort of gears just a  
3 little bit to Mr. Fincher. The drawings that  
4 you show on the site show a site that is flat.  
5 Is the site that we're looking at a flat site?

6 MR. FINCHER: No, it's not  
7 absolutely flat. The campus, you mean in  
8 terms of the campus?

9 MS. RACHEL THOMPSON: Correct.

10 MR. FINCHER: No, the site is  
11 higher at the northeast end where the proposed  
12 project is and then falls away towards the  
13 east or the west of the campus.

14 MS. RACHEL THOMPSON: So would it  
15 be fair to say that the proposed MOB is  
16 located at basically the highest most point of  
17 the site, in your measurements?

18 MR. FINCHER: Yes. I mean, in  
19 terms of the whole site it is.

20 MS. RACHEL THOMPSON: Okay. I  
21 just raised that, because I think it does  
22 affect how the site may look certainly to

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 neighbors. I'm sorry, just to jump back to  
2 Mr. Tummonds, I guess, for a minute. You  
3 talked about the groups that have endorsed  
4 this project and I just wanted to ask about  
5 one, Spring Valley West Corporation. Is that  
6 a membership organization?

7 MR. TUMMONDS: You can ask Mr.  
8 Treacy. Yes, that's right.

9 CHAIRPERSON MITTEN: Sir, please,  
10 sit down.

11 MR. TUMMONDS: Mr. Treacy on  
12 behalf of the Spring Valley West Corporation  
13 is here and I'm sure he can answer all the  
14 questions you have about that organization.

15 MS. RACHEL THOMPSON: Okay. Do  
16 you have any testimony from doctors at  
17 Friendship Heights or any of the other area  
18 medical office buildings, anybody who is going  
19 to come forward and testify that they believe  
20 there are significant reasons why any of those  
21 buildings might potentially close?

22 MR. PRICE: No, nothing like that

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1           tonight.

2                           MS. RACHEL THOMPSON:   Okay.   You  
3           indicated that the one floor reduction that  
4           you have offered in your revised proposal  
5           represents 20 percent of the office space, the  
6           net rentable area, I think you called it.  But  
7           we also know that you will generate revenue  
8           through the diagnostic and outpatient surgery  
9           and so forth, I think extensive activities on  
10          the ground floor.

11                           Is it possible for you to  
12          characterize in terms of revenue what it would  
13          mean to lose the -- a floor of office space?  
14          In other words, what is the percentage of the  
15          revenue generated by the office space versus--

16                           CHAIRPERSON MITTEN:   Why don't we  
17          cut to the chase here?  Do you really want to  
18          know what's underlying his representation that  
19          producing --

20                           MS. RACHEL THOMPSON:   Yes.

21                           CHAIRPERSON MITTEN:   Okay.

22                           MS. RACHEL THOMPSON:   Yes.

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1                   CHAIRPERSON MITTEN:    Just answer  
2                   that question.    What is it?    You testified  
3                   that to make the additional reduction of  
4                   another floor as requested by the ANC would  
5                   not be financially feasible.    Can you explain  
6                   that testimony?

7                   MR. PRICE:    Only to say that I  
8                   didn't bring the numbers with me this evening,  
9                   but when we ran the numbers, we ran it with  
10                  another floor out and in terms of the rates  
11                  that we would charge, we can't make it pay for  
12                  itself.    It just won't pay.    So I mean, I  
13                  don't have the numbers with me.    I didn't  
14                  anticipate that.

15                  CHAIRPERSON MITTEN:    Well, let me  
16                  press on that on your behalf.    You can  
17                  potentially reduce the size of the parking  
18                  garage and you reduce the size of the facility  
19                  and presumably the income generating potential  
20                  of a given square foot is more or less the  
21                  same.    I mean, there is a core that it would  
22                  have to be spread over and all of that.

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1                   But can you without giving us the  
2                   specific numbers, what is it that makes it  
3                   infeasible? Is it that by maintaining a  
4                   parking garage of this size and this is  
5                   somehow subsidizing the parking garage or what  
6                   is it?

7                   MR. PRICE: Well, basically, it's  
8                   the income that you would get from that  
9                   additional floor.

10                  CHAIRPERSON MITTEN: I know. But  
11                  you are not building it. You wouldn't build  
12                  it and you wouldn't get the revenue.

13                  MR. PRICE: Yes, but there is a  
14                  profit on it. I mean, yes, there's not the  
15                  expenses associated with it, but there is a  
16                  profit on it and that's what I'm talking  
17                  about.

18                  CHAIRPERSON MITTEN: So at the  
19                  margin, you need that additional --

20                  MR. PRICE: Right.

21                  CHAIRPERSON       MITTEN:        --  
22                  incremental floor --

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 MR. PRICE: Right.

2 CHAIRPERSON MITTEN: -- to cover  
3 the --

4 MR. PRICE: You know, if you want  
5 to go into a lot of detail, let me just say  
6 one thing about the surgery center that's  
7 going to be in this building. This is a  
8 surgery center that will move from Hayes'  
9 Hall, as we have said, into this building and  
10 most of what is done in this surgery center,  
11 in fact, all of what is done in this surgery  
12 center are outpatient procedures. A great  
13 many of them are cosmetic procedures and it  
14 would surprise you to know that this surgery  
15 center is barely a break even operation for  
16 us. So this is not -- the surgery center is  
17 not a big money maker for us.

18 CHAIRPERSON MITTEN: So in part,  
19 if I understand what you are saying, there is  
20 sort of this core function, if you will,  
21 that's a hospital function, which is the  
22 surgery center, and then so in part the

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 medical office portion is subsidizing your  
2 ability to replace that facility?

3 MR. PRICE: Yes, that's sort of  
4 it. Also, what you have to look at as well,  
5 we would like to have the doctors in the  
6 building, so that they will bring patients to  
7 the hospital. So that figures into the  
8 equation as well.

9 CHAIRPERSON MITTEN: I see. Okay.  
10 Okay. Thank you. Back to you.

11 MS. RACHEL THOMPSON: Thanks. I  
12 have maybe three or four more questions. To  
13 Mr. Fincher again, I think you said it was  
14 your experience that 6.9 parking spaces per  
15 thousand square feet was a good ratio of  
16 parking spaces to ensure that there is no on-  
17 street parking. And I absolutely agree. It  
18 was very much something that we were pleased  
19 to be able to agree on that neither Sibley nor  
20 the neighbors want people parking on the  
21 street.

22 So I appreciate a generous ratio

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 that we initially worked out of 6 spaces per  
2 thousand square feet. And in your December  
3 22, 2005 initial application, the offer was  
4 made to provide 233 new parking spaces and we  
5 discussed that in our working groups and we  
6 had an expert who suggested six was more  
7 workable.

8 CHAIRPERSON MITTEN: It's a very  
9 long question. Could you get to it?

10 MS. RACHEL THOMPSON: So my  
11 question is why, I guess, if you are reducing  
12 the building by, approximately, 20,000 square  
13 feet, wouldn't you reduce the size of the  
14 parking garage and thereby get some more  
15 pervious surface and reduce your costs and so  
16 forth?

17 MR. FINCHER: Well, again, in our  
18 practice right now, typically over the years  
19 for medical office we tried the best we could  
20 to park them at 5 per thousand square feet.  
21 When we were -- when we actually did that  
22 parking ratio, we found we had problems with

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 people circling and driving and waiting for  
2 parking spaces. That didn't service,  
3 especially in medical office buildings that  
4 are a part of other campuses.

5 I think we have experienced that  
6 on a couple of projects in Montgomery County.  
7 I think anything we can do to push that ratio  
8 up to relieve that burden for on-site parking  
9 and not force any potential user to drive, to  
10 circle, to wait for parking is an advantage to  
11 the patient and the hospital.

12 I would say there is really no  
13 hard numbers saying that 6 or 6.9 is the  
14 correct number. It is based on experience and  
15 what we have seen in other facilities. The  
16 zoning minimums are impractical. We pushed  
17 that up on a practical basis as required by  
18 the facility or as suggested by the facility  
19 operationally.

20 And again, I think it has been our  
21 position that 5 and 6 is still short.  
22 Facilities around the area in Maryland,

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 northern Maryland, Baltimore are pushing to 6,  
2 6.5 for new medical office space.

3 MS. RACHEL THOMPSON: Um-hum,  
4 okay. My last question concerns the comment  
5 that a medical office building generates  
6 tremendous plumbing loads. I want to  
7 concentrate not on the storm water, but on the  
8 plumbing for the building. You know, there is  
9 a lot of blood tests and toilet flushes and so  
10 forth.

11 Who is going to pay for the WASA  
12 improvements necessary for this? What will  
13 you need to do in terms of grading the entire  
14 areas waste water capacity? And will there be  
15 construction on neighborhood streets in order  
16 to prepare for this facility?

17 MR. FINCHER: I don't feel like I  
18 can actually speak to the capacity of the  
19 system.

20 CHAIRPERSON MITTEN: Let's take it  
21 one step at a time, because there is an  
22 underlying question. There is an underlying

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 premise to the series of questions, which is  
2 that there will need to be upgrade, WASA-  
3 related upgrades in order to accommodate this  
4 building. Is that, in fact, true?

5 DR. FISHER: I don't know that to  
6 be the case.

7 CHAIRPERSON MITTEN: Mr. Long, do  
8 you know the answer?

9 MR. LONG: Again, Jim Long from  
10 Delon Hampton and Associates. There will be  
11 some additional loads from this building, but  
12 I don't think it is anywhere where we're going  
13 to exceed WASA's capacity. There are measures  
14 of doing flow reduction and water reducing  
15 measures in buildings to limit the loads,  
16 hence, whatever water usage there is reduces  
17 the sewage usage.

18 So I don't -- we routinely work  
19 with WASA on projects of this size and much  
20 larger, so I don't see this as anything out of  
21 the ordinary that their existing capacity  
22 couldn't handle.

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 CHAIRPERSON MITTEN: Okay.

2 MR. LONG: And if there are some  
3 off-site improvements, because there are some,  
4 you know, a bottleneck or two in the pipe  
5 system belt, they will let us know as part of  
6 the review process.

7 CHAIRPERSON MITTEN: Okay. To get  
8 a further answer, that's something that you're  
9 going to have to proffer that that's, in fact  
10 -- that there will be WASA improvements in  
11 order to get a response, because of the  
12 representation from the applicant.

13 MS. RACHEL THOMPSON: Yes, they  
14 are not necessary.

15 CHAIRPERSON MITTEN: Okay.

16 MS. RACHEL THOMPSON: And finally,  
17 why does it seem to be there are sort of  
18 either two conference or classroom areas?  
19 There is the new conference center that is  
20 being built and then there is also discussion  
21 of classrooms and activities that seem to  
22 relate to conference activities on the top

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 floor of the building. Can you distinguish  
2 the uses of those spaces?

3 MR. FINCHER: I think on the lower  
4 level the uses again are mainly for patient  
5 education and civic uses also. The upper  
6 floor is dedicated primarily to administrative  
7 functions.

8 MR. PRICE: Also, I can add to  
9 that. We're anticipating taking out the  
10 hospital's boardroom when we tear down Hayes'  
11 Hall and so the conference facility on the  
12 roof is partially for that.

13 MS. RACHEL THOMPSON: Thank you.

14 CHAIRPERSON MITTEN: Thank you.  
15 Mr. Spector? I know, you're going to have  
16 different people do different witnesses, as we  
17 agreed on October 12<sup>th</sup>. Let's do them one at  
18 a time and just let me know who is going to  
19 ask questions of whom. Subject matter.

20 MR. HAGEN: Good evening and,  
21 Madam Chairperson, it's a privilege to be  
22 here. My experience before this body is

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 limited to the six minutes the last time we  
2 addressed this topic, so if I drift a little  
3 bit, please, point me in the right direction.

4 CHAIRPERSON MITTEN: We would be  
5 pleased to know your name.

6 MR. HAGEN: Sure. It's Paul  
7 Hagen, representing the opponents, Sibley  
8 Neighbors for Responsible Growth, and I want  
9 to again cross some of the presentations that  
10 have been made.

11 CHAIRPERSON MITTEN: What subjects  
12 are you going to be dealing with?

13 MR. HAGEN: I would like to  
14 address the business case and representations  
15 that were made by the applicant to try to  
16 understand the need a little bit further and  
17 touch briefly on the landscaping and  
18 sustainability elements that were proffered  
19 and then turn it over to my colleague, Mr.  
20 Spencer, to address some of the traffic  
21 impacts.

22 CHAIRPERSON MITTEN: Okay. I just

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 want to be clear, because we did set ground  
2 rules. It's that you will be directing  
3 questions, not necessarily -- the subject  
4 matter runs to the individual.

5 MR. HAGEN: Correct.

6 CHAIRPERSON MITTEN: So you will  
7 be questioning Mr. Price and Mr. Fincher, yes?  
8 No, Ms. Fan.

9 MR. HAGEN: Yes, and the  
10 architect. And mostly, I have very little for  
11 her.

12 CHAIRPERSON MITTEN: And Mr.  
13 Spector is going to take on Mr. Slade, yes?

14 MR. HAGEN: Correct.

15 CHAIRPERSON MITTEN: Okay.

16 MR. HAGEN: Correct. I wanted to  
17 first try to get a better understanding of the  
18 current profile from Mr. Price of who is  
19 currently using the hospital and will that  
20 change in terms of D.C. residents, VA  
21 residents, Maryland residents.

22 MR. PRICE: I have some market

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 share data that I brought with me that I can  
2 use to answer that. Christine is going to  
3 hand it to me.

4 CHAIRPERSON MITTEN: And remember,  
5 the thrust of the question is will it change.

6 MR. PRICE: Okay. No, it won't  
7 change. Right. Thank you.

8 MR. HAGEN: And so I understand a  
9 majority of the folks currently working and  
10 using the hospital are not D.C. residents. Is  
11 that correct?

12 MR. PRICE: Well, let me just give  
13 it here. This is the breakdown. This is  
14 based on 2005 inpatient cases and outpatient  
15 visits. 44.2 percent from Maryland, 39.1  
16 percent from D.C. and 13.7 percent from  
17 Virginia and 2.9 percent other. And we do not  
18 anticipate that that will change.

19 MR. HAGEN: All right. And I'm  
20 just making the obvious point that Sibley  
21 provides a regional service. We see those --

22 CHAIRPERSON MITTEN: Now, is the

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 time for asking questions, not making points.

2 MR. HAGEN: Understood. Well,  
3 then hopefully they will be obvious. Going to  
4 the commercial space that will be at the  
5 facility, could you elaborate on the types of  
6 operations that would be there other than the  
7 doctor offices?

8 MR. PRICE: Yes. Mainly on the  
9 first floor of the building, there would be a  
10 pharmacy and a durable medical equipment  
11 capability, maybe that would be combined.  
12 There is going to be -- we have seen a cafe  
13 that we really like over at the NOVA Heart  
14 Center, it's called the Heart Healthy Cafe,  
15 something, an alternative dining option, we  
16 would like to put in there.

17 We also do a lot of rehab at the  
18 hospital and recently we have had discussions  
19 about providing rehab supplies and things for  
20 our patients out of there, sort of along the  
21 lines of the durable medical equipment, but it  
22 would be hospital and physician-related kinds

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 of things. We could have a pharmacy. We  
2 would like to find an operator to, you know,  
3 lease the space and run a pharmacy for us.  
4 But those are the kinds of things we're  
5 talking about.

6 MR. HAGEN: And as part of the  
7 overall comprehensive plan or area plan, is  
8 that type of commercial development  
9 contemplated or related close by to the  
10 hospital at the current time?

11 MR. PRICE: This is incidental to  
12 the use of the hospital and I'm really not  
13 sure, to be honest with you.

14 MR. HAGEN: Okay. Well, we will  
15 be speaking to that a little bit later. Let  
16 me turn to some of the points that  
17 Commissioner Jeffries was pursuing. You  
18 mentioned that there were other area hospitals  
19 that had office towers. And I think you  
20 mentioned Georgetown and GW as both having  
21 medical office buildings. Can you offer your  
22 thoughts on why they are in financial trouble

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 and Sibley continues to thrive having truly a  
2 remarkable profit margin?

3 MR. PRICE: No, I really couldn't.  
4 I'm really not familiar with the details of  
5 those hospitals. What I know is Sibley. What  
6 I also know is that hospitals like Sibley have  
7 medical office buildings, community hospitals.  
8 Holy Cross just finished a brand new medical  
9 office building. Arlington just finished a  
10 second one. Montgomery General has one. Fair  
11 Oaks, I think, is working on a second one.  
12 Those are community hospitals. Community  
13 hospitals increasingly need to have medical  
14 office buildings.

15 MR. HAGEN: And can you, of those  
16 that you listed, let us know which of those  
17 are in strictly residential low density  
18 neighborhoods?

19 MR. PRICE: Well, Arlington  
20 Hospital would be very similar. I think Holy  
21 Cross would be similar. I know Fair Oaks is  
22 similar. Montgomery General is probably

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 pretty much the same as well.

2 MR. HAGEN: Okay. Well, we will  
3 want to circle back to those as well. So is  
4 it -- and I guess one of the questions I had  
5 is do you -- because we haven't seen a pro  
6 forma or a business case for the commercially  
7 leased space, whether it is to a CVS or to a  
8 doctor's office that would provide the type of  
9 financial benefit you have indicated. And  
10 because we haven't see it, I'm just trying to  
11 understand better why other hospitals, which  
12 are in much more of an urban setting, have  
13 taken that move, but continue to suffer  
14 financially.

15 In other words, are we going to  
16 take a hit and not see the public benefit?

17 MR. PRICE: You know, I think each  
18 hospital is kind of unique. If you look at  
19 Greater Southeast Community Hospital, it is  
20 probably a challenge of where they are  
21 located. If you looked at Georgetown  
22 Hospital, there were different challenges,

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 probably associated with being a university  
2 teaching hospital, but I think that they are  
3 beginning to overcome. So I don't think you  
4 could generalize about this.

5 MR. HAGEN: Well, then more  
6 specifically, given Sibley's reserves,  
7 investments, I mean, is this something that is  
8 critical to the financial health of the  
9 hospital or is it again somewhat speculative,  
10 because we haven't seen an indication that the  
11 other numerous medical office buildings that  
12 are very close by are about to leave. That  
13 seems somewhat speculative.

14 MR. PRICE: Well, there --

15 MR. HAGEN: And we haven't seen a  
16 case that there is a financial strain on the  
17 hospital. So I'm just trying to understand  
18 how this piece fits in.

19 CHAIRPERSON MITTEN: Can I just  
20 interject something here that might help,  
21 which is while the applicant has suggested  
22 that their motivation for the medical office

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 building is a financial one, the case from a  
2 land use perspective doesn't turn on their  
3 financial viability. You know, on the  
4 numbers. So I don't want to get too deep into  
5 this, because, you know, they are requesting  
6 a PUD-related Map Amendment to SP that would  
7 allow the use. And, you know, we do want to  
8 stay focused on the fact that this is a land  
9 use proceeding.

10 MR. HAGEN: That's a fair point.

11 CHAIRPERSON MITTEN: Thanks.

12 MR. HAGEN: I don't know if you  
13 have anything to add or --

14 MR. TUMMONDS: No.

15 MR. PRICE: No.

16 MR. HAGEN: Okay.

17 CHAIRPERSON MITTEN: That's why he  
18 is the guy in charge.

19 MR. HAGEN: I'm glad to know  
20 Sibley is not facing financial troubles. I  
21 wanted to also circle back to Mr. Price's  
22 mention of the master plan for the campus.

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 And I was wondering if this body had seen that  
2 and is that part of the information being  
3 proffered, so that we can assess this proposal  
4 in the context of a broader plan? It was  
5 suggested and I'll just -- I'm not familiar  
6 with it. I'm wondering if it is something  
7 that we can hear more about?

8 MR. PRICE: I would like to say  
9 something about that. For years we had a very  
10 interesting ANC Commissioner by the name of  
11 John Finney who said we want to see a campus  
12 master plan. So we said okay. We put  
13 together a campus master plan. The first ANC  
14 meeting we went to was we don't want to see  
15 your campus master plan. Let's just talk  
16 about you medical office building and your  
17 parking garage. So that's why that's all you  
18 see now.

19 MR. HAGEN: Okay. Is that a no?

20 CHAIRPERSON MITTEN: Well, there  
21 is nothing in the record about their campus  
22 plan, other than the references that have been

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 made about it tonight.

2 MR. HAGEN: Understood. It would  
3 be nice to understand that better. Let me --  
4 before we move to the traffic questions, I had  
5 a couple of brief questions on the  
6 sustainability developments. I guess there  
7 was a lot of talk about the rain gardens. I  
8 guess my first question is can you let us know  
9 how much impermeable surface? You know, what  
10 is the footprint now? Are we gaining  
11 impermeable surfaces as part of a  
12 sustainability plan?

13 I'm trying to understand the  
14 overall impact. Obviously, there is going to  
15 be air pollution impact and other things. But  
16 particularly on the rain gardens, it seemed  
17 that we would be creating more impervious  
18 surface and that's just hard to sell from a  
19 sustainability standpoint. I just want to  
20 understand a little bit more on that.

21 MR. FINCHER: Yes, in terms of the  
22 overall increase in impervious surface in the

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 presentation we showed that we had increased  
2 by .51 percent, less than 1 percent impervious  
3 increase in the overall site.

4 CHAIRPERSON MITTEN: That's in the  
5 aggregate, yes?

6 MR. FINCHER: Yes, that's in the  
7 aggregate. The location for the proposed  
8 building and garage is, for the most part, on  
9 paved site right now without a structured  
10 storm water system serving this portion of the  
11 site. So in our opinion, everything we would  
12 propose here would be part of an enhancement  
13 of the storm water system and have very, very  
14 minimal increase in the overall impervious  
15 nature of the site.

16 MR. HAGEN: I think that's going  
17 to conclude some of the cross that I had and  
18 I would like to turn it over to -- well,  
19 actually, I do have one other additional set  
20 of questions. Is it fair to say that the  
21 financial success of medical office building  
22 is linked to the amount of traffic in terms of

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 patient traffic you can get through the  
2 offices and get through the outpatient  
3 services?

4 Is that sort of the basic business  
5 model and how does that compare to an average  
6 visit to say the maternity ward or to Grand  
7 Oaks? I mean, it seems like a radical  
8 departure in terms of the business model. I  
9 would like to understand the timing of that.

10 CHAIRPERSON MITTEN: Could you ask  
11 him more discrete questions?

12 MR. HAGEN: Sure. What are the  
13 estimates for office visit times that you used  
14 in developing the traffic impacts?

15 MR. TUMMONDS: Is that a question?

16 MR. PRICE: Lou, do you have that?

17 CHAIRPERSON MITTEN: Well, now,  
18 you have violated the --

19 MR. HAGEN: Oh, I see, that's  
20 right. I might be crossing over. Okay.

21 CHAIRPERSON MITTEN: Mr. Tummonds  
22 was really -- you know, a lot of times we

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 don't have multiple folks.

2 MR. HAGEN: I understand. I  
3 understand. Let me close there and turn it  
4 over to Sandy for some traffic questions.  
5 Thank you.

6 MR. SPECTOR: All right. Thank  
7 you. I'm Leonard Spector. I am with the  
8 Sibley Neighbors for Responsible Growth. I  
9 would like to pursue the traffic issues from  
10 two different dimensions. One is to highlight  
11 just the scale of impact on the community,  
12 which I know will be relevant to the  
13 proceeding, but also to demonstrate the  
14 intensity of activity.

15 CHAIRPERSON MITTEN: Just out of--

16 MR. TUMMONDS: These are  
17 questions.

18 CHAIRPERSON MITTEN: Right.

19 MR. TUMMONDS: The opportunity to  
20 present your case later.

21 CHAIRPERSON MITTEN: Just dive  
22 right in.

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 MR. SPECTOR: I thought I had to  
2 make a proffer of relevance.

3 CHAIRPERSON MITTEN: You don't.

4 MR. SPECTOR: Thank you.

5 CHAIRPERSON MITTEN: We don't have  
6 that degree of formality here. It's not like  
7 court.

8 MR. SPECTOR: Thank you. I'm  
9 looking at your traffic study that accompanied  
10 the reduced scale of the building. This is in  
11 Exhibit D of the filing on January 22<sup>nd</sup>. And  
12 I see that the total traffic that will be  
13 generated by the building each day, let me  
14 make sure I have that, each day if I'm reading  
15 this correctly, will be 4,000 vehicle trips  
16 per day?

17 MR. SLADE: Right. Yes, that is  
18 an estimate of the total daily vehicle trips  
19 that would be -- and a trip is entering or  
20 leaving. Entering or leaving, so one entry  
21 and one leaving. That's two trips.

22 MR. SPECTOR: And that's also

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 recognized in the diminution, not only of the  
2 scale of the building, but also of the fact  
3 that some trips that will go to the office  
4 building were already going to the hospital  
5 for the same diagnostic equipment that is just  
6 being moved. You have already taken credit  
7 for that and there are still 4,000 daily  
8 trips. Is that right?

9 MR. SLADE: Correct.

10 MR. SPECTOR: Okay. Does that  
11 average out to about 400 per hour? If you  
12 have a 10 day work day at the office building?

13 MR. SLADE: A 10 hour work day,  
14 correct.

15 MR. SPECTOR: Is there -- let's  
16 look at other parts of the hospital and see  
17 how their generation of traffic compares to  
18 this building. Is there anything comparable  
19 in terms of generation of traffic at the  
20 Renaissance Center, the skilled nursing home?

21 MR. SLADE: We didn't separately  
22 study that. But in order of magnitude, I

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 think that the medical office building would  
2 be higher, given the nature of patients coming  
3 to -- for patient visits with their doctors.

4 CHAIRPERSON MITTEN: Could I ask--

5 MR. SPECTOR: I asked --

6 CHAIRPERSON MITTEN: Yes.

7 MR. SPECTOR: You have to speak  
8 up.

9 CHAIRPERSON MITTEN: You are both  
10 fading out a little bit.

11 MR. SLADE: Sorry.

12 CHAIRPERSON MITTEN: Could you  
13 just speak a little bit more aggressively?

14 MR. SPECTOR: I asked isn't it  
15 true that this building would generate much  
16 more traffic than another part of the  
17 hospital, specifically the Renaissance Nursing  
18 Home?

19 MR. SLADE: Without having  
20 specifically studied the Renaissance, I would  
21 only go on a judgment and the answer is yes,  
22 it would generate more traffic than the

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 Renaissance.

2 MR. SPECTOR: Because people don't  
3 go in and out of the nursing home on 15 minute  
4 appointments?

5 MR. SLADE: Correct.

6 MR. SPECTOR: Thank you. Does it  
7 generate much more activity than the Assisted  
8 Living Center?

9 MR. SLADE: Yes.

10 MR. SPECTOR: Where again you have  
11 permanent residents.

12 MR. SLADE: Yes.

13 MR. SPECTOR: Does it generate  
14 more traffic than the Cancer Center?

15 MR. SLADE: Probably.

16 MR. SPECTOR: Emergency room?

17 MR. SLADE: Probably.

18 MR. SPECTOR: It's one bed per  
19 patient in the inpatient facility. Is that  
20 right? Excuse me, one -- of course it's one  
21 bed per patient. What I meant to say was it's  
22 one parking spot per patient?

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 MR. SLADE: Yes.

2 MR. SPECTOR: Is that correct?

3 MR. SLADE: Yes.

4 MR. SPECTOR: But how many parking  
5 spots, if you will, per doctor's office? I  
6 mean, the intensity of parking needs for the  
7 office building outweighs even the core  
8 activity at the hospital. Is that right?

9 MR. SLADE: The ratio here is,  
10 approximately, 6 to 7 spaces per doctor,  
11 depending on how many square feet each doctor  
12 takes.

13 MR. SPECTOR: And how does that  
14 compare to the number of parking spaces  
15 required for a classic commercial office  
16 building?

17 MR. SLADE: Slightly higher.

18 MR. SPECTOR: Double?

19 MR. SLADE: In that range,  
20 correct.

21 MR. SPECTOR: Double?

22 MR. SLADE: Yes.

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1                   MR. SPECTOR:    So this is double  
2                   the parking intensity -- excuse me, the  
3                   intensity of activity necessitating associated  
4                   parking of a commercial office building and  
5                   there's nothing else like it on the site at  
6                   this time.  Is that right?

7                   MR. SLADE:    Nothing I'm aware of.

8                   MR. SPECTOR:    Thank you.  Now, if  
9                   we looked at the slide that you had which  
10                  showed -- it showed the added and the  
11                  diminution in parking, because you are taking  
12                  advantage of some existing parking and so  
13                  forth.  Could we put that slide up, please?  
14                  Now, the net add is 421, that's going to be  
15                  the increment as a result of this activity of  
16                  the building?

17                  MR. SLADE:    Should that go to  
18                  Dwight?

19                  MR. SPECTOR:    Sorry, you're the  
20                  traffic person.  This is the traffic plan.

21                  MR. SLADE:    I didn't count it.

22                  MR. FINCHER:    Well, the current

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 inventory is balanced against the inventory  
2 displaced by construction.

3 MR. SPECTOR: Fine. But it's one-  
4 third increase. Is that what I'm seeing? It  
5 used to be 1400, that's the current inventory,  
6 and you're going to add, basically, a third on  
7 top of it from this building?

8 MR. FINCHER: I don't see.

9 MR. SPECTOR: That's 14. 421 is  
10 the net gain or the existing is 1400.

11 MR. FINCHER: Okay. All right.

12 MR. SPECTOR: So it's a little bit  
13 less than a third. But it's more than a  
14 quarter. I mean, this is a very substantial  
15 increment in parking, if I understand  
16 correctly. Is that right? And it reflects  
17 the increment in activity.

18 Now, there is a study by the  
19 Palisades Citizens Association of the traffic  
20 impacts of this. Are you familiar with that  
21 study?

22 MR. SLADE: I'm not familiar with

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 it.

2 MR. SPECTOR: It asserts based  
3 on --

4 MR. TUMMONDS: Again, he said he  
5 is not familiar with that study.

6 CHAIRPERSON MITTEN: Right.

7 MR. TUMMONDS: That's again  
8 information for your case in chief.

9 CHAIRPERSON MITTEN: Although, are  
10 you going to ask a question about which an --

11 MR. SPECTOR: I am specifically.

12 CHAIRPERSON MITTEN: -- expert is  
13 entitled to.

14 MR. SPECTOR: And I have asked  
15 this question of Mr. Slade previously at an  
16 ANC meeting and he gave an answer.

17 CHAIRPERSON MITTEN: Okay. Just  
18 go for it.

19 MR. SPECTOR: I assume he will  
20 give tonight. Which is that this represents  
21 the 4,000 trips per day, 400 trips per hour,  
22 which I assume will bring about 3,000 people

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 per day new to the campus every day, because  
2 most cars will have more than one person, that  
3 this is the equivalent of a 12 year increase  
4 in traffic around the area from this one  
5 activity, because the usual increase is 5 --  
6 is half a percent and this is going to be a 12  
7 percent increase?

8 MR. SLADE: I remember the  
9 question that we discussed in the past, Mr.  
10 Spector, and I remember that I agreed with you  
11 at the time without going through the math  
12 right now.

13 MR. SPECTOR: All right. Anyhow,  
14 let me just restate the math.

15 CHAIRPERSON MITTEN: No, it's  
16 okay.

17 MR. SPECTOR: All right. Thank  
18 you.

19 CHAIRPERSON MITTEN: Mr. Slade  
20 agrees with your representation. You will  
21 make your representation in your case in chief  
22 through the --

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 MR. SPECTOR: That's fine.

2 CHAIRPERSON MITTEN: -- Palisades  
3 traffic study presumably.

4 MR. SPECTOR: Thank you. The  
5 traffic study also said that this was the  
6 equivalent of two Safeway --

7 MR. SLADE: Again --

8 CHAIRPERSON MITTEN: Are you  
9 asking a question?

10 MR. SPECTOR: Correct. Would this  
11 be the equivalent of two typical Safeways, say  
12 the Macarthur Boulevard Safeway or some other  
13 one?

14 MR. SLADE: I can't answer that  
15 one off the top of my head.

16 MR. SPECTOR: All right. Thank  
17 you. Let me now ask --

18 COMMISSIONER JEFFRIES: Excuse me.  
19 Mr. Spector, I'm not getting all your words.  
20 I don't know if you could put that mike closer  
21 to you?

22 MR. SPECTOR: Excuse me. I was --

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1                   COMMISSIONER JEFFRIES:   And, Mr.  
2                   Slade, if you could put your mike --

3                   MR.   SPECTOR:       Thank you.       I  
4                   apologize and I will try to sit closer to the  
5                   mike.

6                   COMMISSIONER JEFFRIES:  Yes, thank  
7                   you.

8                   MR.   SPECTOR:       I  just  inquired  
9                   whether this was equivalent to the activity of  
10                  two Safeways, in terms of parking and trips,  
11                  and Mr. Slade, I believe, said he was not able  
12                  to comment.

13                  One of the major concerns of the  
14                  community is that with the increase in  
15                  traffic, we will see more cut through traffic  
16                  on the small residential streets such as  
17                  Watson Place and some others and perhaps if we  
18                  could have the -- there is a map, I believe,  
19                  you had up there that shows some of this.  We  
20                  will go into this in our case in chief.  I  
21                  just want to ask whether Sibley examined this  
22                  question which is one of the significant

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 neighborhood impacts, were there any traffic  
2 studies done on this topic, cut through  
3 traffic through Spring Valley and through Kent  
4 and the Palisades?

5 MR. SLADE: We did not study that  
6 as part of our work for Sibley.

7 MR. SPECTOR: Okay. Now, if I  
8 may, there is a specific question about the  
9 traffic routing through the hospital. If we  
10 could have one of those maps that show the  
11 traffic coming down from Maryland and going  
12 into the hospital on Little Falls Road.

13 Okay. Now, Members of the  
14 Commission, I'm looking coming down the map  
15 from Maryland to the intersection that has a  
16 DD and a DC next to it. That's the  
17 intersection at Macarthur Boulevard and at  
18 Loughboro Road. And by the way, I'm -- well,  
19 I'll save that for later.

20 At Loughboro Road the applicant  
21 made inconsistent statements, because on the  
22 one hand it said --

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 CHAIRPERSON MITTEN: Okay. You're  
2 asking questions, right?

3 MR. SPECTOR: Excuse me. Is it  
4 true that most of the traffic will be routed  
5 as it comes out into Little Falls Road? Is  
6 that right?

7 MR. SLADE: Our intention is to  
8 suggest to people coming to the hospital that  
9 they turn there to go to parking, yes.

10 MR. SPECTOR: Good. We think  
11 that's a very good dimension of their plan.

12 CHAIRPERSON MITTEN: That's great.  
13 And save those comments for later.

14 MR. SPECTOR: I'm sorry. Okay.  
15 Now, why is it then that there is going to be  
16 an increase in traffic at the subsequent  
17 intersection? If all the traffic is diverted,  
18 why will there be a problem down below or is  
19 it true that all the traffic won't be  
20 diverted?

21 MR. SLADE: No, it's because we  
22 took that half a percent and ambient growth in

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 traffic into account in our forecast. So that  
2 was a result of traffic that is not associated  
3 with the hospital.

4 MR. SPECTOR: I see. Okay. Now,  
5 let me just go again to there is an  
6 illustration of the hospital campus seen from  
7 above, so we can see Little Falls Road.

8 CHAIRPERSON MITTEN: So you are  
9 looking for an aerial photograph?

10 MR. SPECTOR: No, there is -- they  
11 have an illustration. This is -- it was  
12 earlier in their -- it's the illustrated site  
13 plan. That's fine. Now, it doesn't show the  
14 particular item I want it to show, which is  
15 the helipad. If we could see that?

16 CHAIRPERSON MITTEN: There we go.

17 MR. SPECTOR: Okay. There it is.  
18 You can see the helipad in the middle of the  
19 traffic.

20 CHAIRPERSON MITTEN: Mr. Slade is  
21 going to point at it with his laser pointer.

22 MR. SPECTOR: Oh, excuse me.

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 Thank you. There it is. So I just want to be  
2 clear whether as you increase -- I mean, all  
3 of the -- this road is going to have 4,000  
4 vehicle trips a day on it. Is it your intent  
5 to keep the helipad sitting there?

6 MR. SLADE: Okay.

7 CHAIRPERSON MITTEN: What's the  
8 intention about the helipad?

9 MR. PRICE: I don't think you  
10 testified, Mr. Slade, that it was going to  
11 have 4,000 trips a day on it. Did you?

12 MR. SLADE: I did.

13 MR. PRICE: Okay. But the helipad  
14 stays there for the time being, yes.

15 MR. SPECTOR: All right. Madam  
16 Chair, let me just wrap up with a few other  
17 points. So in terms of intensity -- well,  
18 excuse me, let me just -- yes, we have also  
19 had a problem I'll just note with off-street  
20 parking on the --

21 CHAIRPERSON MITTEN: Is it a  
22 question?

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1                   MR. SPECTOR:       Have you done  
2 studies of off-street parking not on Loughboro  
3 Road but in the surrounding areas of Kent and  
4 I guess that area in particular? Has that  
5 been examined?

6                   MR. SLADE:    Go ahead.

7                   MR. PRICE:    Yes, as a matter of  
8 fact, we had complaints from a resident who  
9 lives on Palisade Lane that they were getting  
10 a lot of overflow parking in their -- on their  
11 streets. And it's speculated --

12                  CHAIRPERSON    MITTEN:        Could  
13 somebody show us, approximately, where  
14 Palisade Lane is?

15                  MR. PRICE:    Is Palisade Lane on  
16 any of these?

17                  MR. SPECTOR:   It's where sort of  
18 the S sits on campus site, the second S.

19                  CHAIRPERSON MITTEN:   Okay. So you  
20 get at it from Dalecarlia Parkway?

21                  MR. SLADE:    It's a jog at least.

22                  MR. PRICE:    Yes.

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 CHAIRPERSON MITTEN: Okay.

2 MR. PRICE: In the June 9<sup>th</sup>  
3 submission on page 39, you will see a bunch of  
4 Polaroids 39 through 40, Exhibit H. You will  
5 see a bunch of pictures. And we have never  
6 heard of anything like this. We thought we  
7 had always provided enough parking for our  
8 visitors and our patients and we thought this  
9 was very strange.

10 So we went up and we took Polaroid  
11 photos of that street every day at about 1:00  
12 for several weeks actually and you will see  
13 some of the days in here. And we are hard  
14 pressed to see any on-street parking other  
15 than the cars that belong to the neighbors  
16 there that generally park there.

17 CHAIRPERSON MITTEN: So, Mr.  
18 Price, no, to the broader question as opposed  
19 to the narrow question, was a study done of  
20 the parking?

21 MR. PRICE: Only to this extent  
22 with these pictures.

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 CHAIRPERSON MITTEN: Okay. Okay.

2 MR. SPECTOR: Let's see, the last  
3 question I guess would be what is it that  
4 generates the traffic in the building? Is it  
5 the doctors' offices, the commercial space  
6 down below, the diagnostic facilities that  
7 were already there?

8 MR. SLADE: Well, I think it's all  
9 of the above. People come to this facility  
10 primarily because they have appointments with  
11 their doctors. Most of the trips to those  
12 other facilities within the building are those  
13 same people, although I think if you had a  
14 doctor elsewhere and he sent you to Sibley  
15 because they had a particular piece of  
16 equipment, you would come here to use that  
17 piece of equipment. So it's primarily to  
18 visit the doctors, of course.

19 MR. SPECTOR: Right. So if we  
20 reduce the physical scale of the building by  
21 eliminating the --

22 CHAIRPERSON MITTEN: Okay. Is

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1           there a question? You may ask a question.

2                       MR. SPECTOR:        A duplicative  
3           aspects other than the doctors' offices and  
4           reduce just the footprint of the scale of the  
5           building that would not have an impact on  
6           traffic to speak of, because a lot of those  
7           are preexisting activities.

8                       MR. SLADE:    A lot of those exist.  
9           When you say preexisting, they are already on  
10          the campus and they are being consolidated  
11          into this building.

12                      MR. SPECTOR:    Correct.

13                      MR. SLADE:    That's correct.

14                      MR. SPECTOR:    All right. Thank  
15          you. I guess I would ask just one more  
16          question on the helipad. How will that affect  
17          traffic? How long will traffic be delayed  
18          each time there is a helicopter landing? Is  
19          there a safety issue for traffic?

20                      MR. PRICE:    This heliport is used  
21          about two or three times a month and so I  
22          don't think it is going to have any more

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 affect on it than it does right now, which is  
2 fairly minimal.

3 CHAIRPERSON MITTEN: Mr. Slade, do  
4 you agree with that as the expert?

5 MR. SLADE: Yes.

6 CHAIRPERSON MITTEN: Thanks. All  
7 right. Okay. That's it for the applicant's  
8 case and cross examination. We're going to  
9 take just a five minute break here before we  
10 proceed with the presentation by the Office of  
11 Planning. So we're off the record for five  
12 minutes.

13 (Whereupon, at 8:57 p.m. a recess  
14 until 9:08 p.m.)

15 CHAIRPERSON MITTEN: Thank you.  
16 We're back on the record. And I just want to  
17 take a couple minutes right now to work out,  
18 we clearly are going to need another session,  
19 and to work out when that might be, so that  
20 some folks who probably we won't get to  
21 tonight could -- you know, you don't have to  
22 hang in there for the entire evening with us.

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1                   So the first night that we have is  
2                   Wednesday?

3                   MS. SCHELLIN:   February 21<sup>st</sup>.

4                   CHAIRPERSON MITTEN:    The 21<sup>st</sup>.  
5                   Wednesday, February 21<sup>st</sup>.    So I need the  
6                   applicant and the ANC and the party in  
7                   opposition to check their calendars.

8                   MR. TUMMONDS:   That's --

9                   PARTICIPANT:    What day was that  
10                  on?

11                  CHAIRPERSON MITTEN:    Wednesday,  
12                  February 21<sup>st</sup>, 6:30 p.m.

13                  MR. TUMMONDS:    The 21<sup>st</sup> works for  
14                  the applicant.

15                  CHAIRPERSON MITTEN:    Okay.  
16                  Commissioner Thompson and I'm getting a head  
17                  nod, yes, from the ANC.  Mr. Spector?

18                  MS. SCHELLIN:    Yes.

19                  CHAIRPERSON MITTEN:    Yes.  All  
20                  right.  Okay.  Folks, that's great.  Otherwise  
21                  it was going to be March.  Okay.  So February  
22                  21<sup>st</sup>, this will -- Ash Wednesday, yes, it's

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 Ash Wednesday. 6:30 p.m. on Ash Wednesday.

2 COMMISSIONER JEFFRIES: She said  
3 there's services. She said there is Ash --

4 CHAIRPERSON MITTEN: What's the  
5 question regarding Ash Wednesday?

6 MR. SPECTOR: Well, I --

7 PARTICIPANT: You've got to be on  
8 the mike.

9 CHAIRPERSON MITTEN: Mr. Spector,  
10 would you come forward and sit on a mike?

11 MR. SPECTOR: Thank you. I think  
12 the issue and I'm not sure that I want to  
13 raise it formally, I'll just mention it, which  
14 is that with individuals that are going to a  
15 service or to church after work --

16 CHAIRPERSON MITTEN: Yes?

17 MR. SPECTOR: -- might have  
18 difficulty coming here. So if perhaps the  
19 hearing begins as planned, but those  
20 individuals who might be, you know, the  
21 neighbors who might want to speak on this  
22 matter, got a little flexibility in terms of

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 the time of their arrival or when those  
2 presentations were made.

3 CHAIRPERSON MITTEN: Sure. I  
4 mean, we're not going to -- everybody is not  
5 going to be able to speak right at 6:30. I  
6 promise there will be plenty of time.

7 MR. SPECTOR: Thank you.

8 CHAIRPERSON MITTEN: Okay. And I  
9 say that we can use Ash Wednesday as a  
10 Catholic, you know, so don't feel like I'm  
11 violating any, you know, religious thing.  
12 Okay. So let me just say that also in terms  
13 of -- I can say with confidence that we will  
14 not get to opposition testimony tonight. So  
15 that if -- so we won't get to the party and we  
16 won't get to organizations and persons.

17 So if anyone wants to -- I mean,  
18 you are welcome to stay, but you will  
19 definitely not get your opportunity tonight,  
20 because of the order of procedure. And we'll  
21 just go and see how far we get tonight.

22 MR. TUMMONDS: I think that works.

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 I think, you know, we have some folks here.  
2 We only have six people here to testify.

3 CHAIRPERSON MITTEN: Okay.

4 MR. TUMMONDS: As party or  
5 persons, so that would work.

6 CHAIRPERSON MITTEN: Okay. So  
7 we'll just go on forward, but I do like to  
8 take a little time to clue people in mid-  
9 hearing just to see if anybody needs to or  
10 would like to leave.

11 Okay. So now we're ready for the  
12 report by the Office of Planning. Ms. Thomas,  
13 welcome.

14 MS. THOMAS: Good evening, Madam  
15 Chair, Members of the Commission. Public  
16 dialogue about Sibley's future plans began,  
17 approximately, two years ago and this request  
18 for an MOB was set down in April of 2006 and,  
19 at that time, OP recommended that the  
20 application be considered as an SP-2 PUD-  
21 related Map Amendment to accommodate the  
22 height requested at 90 feet.

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1           Because we were concerned about  
2 using the matter-of-right provision of section  
3 400.11 to permit the height as it is not  
4 included as a PUD provision. Our final report  
5 of September 29, 2006 reflected the ANC's  
6 express concerns about the density and the  
7 related trip generation identified by the  
8 traffic study as a result of a 90 foot tall  
9 building that could be granted under SP-2.

10           And we then asked the applicant to  
11 revisit the SP-1 PUD designation with two  
12 floors removed. We would also like to  
13 recognize the ANC submission with respect to  
14 that condition also in support of the  
15 application if the design were lowered by the  
16 removal of two floors with accommodations for  
17 60 doctors, a reduction in the garage space  
18 from 750 spaces to 525 spaces.

19           Subsequent to these reports, the  
20 applicant removed one floor with  
21 accommodations for up to 75 doctors and sunk  
22 one level of the garage below grade still at

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 750 parking spaces. The revision now stands  
2 at 2.15 FAR down from 2.7 FAR. And the new  
3 design reflects a 2 foot 4 inch height  
4 difference from the SP-1 PUD height  
5 requirement of 75 feet.

6 We also determined that DDOT  
7 should review the traffic-related impacts if  
8 the applicant remained within this  
9 designation. The applicant met with DDOT  
10 several times regarding the pedestrian  
11 improvements, the quality of life issues  
12 expressed by DDOT in its earlier submission  
13 and the redesign of the Dalecarlia/Loughboro  
14 intersections.

15 The applicant previously submitted  
16 the amenity package and we are satisfied that  
17 an effort was made to address the traffic  
18 impacts with respect to the redesign and  
19 construction of the Dalecarlia intersection,  
20 subject to DDOT's input. This would be paid  
21 for entirely by the applicant, as OP  
22 understands it.

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1           In addition, the applicant will  
2           contribute to a well-known senior center up in  
3           northwest in support of their transportation  
4           needs. We support the applicant's effort to  
5           include sustainability and green aspects on  
6           the parking structures design, including storm  
7           water capture and reuse on-site and that  
8           consideration will be given to the material  
9           used on the upper level deck to reduce the  
10          heat effect of such a large surface.

11           The redesign landscaping is much  
12          more comprehensive throughout the site and we  
13          are satisfied that more attention was paid to  
14          the visual aspects of the garage structure and  
15          a new entrance to the hospital. As indicated  
16          in DDOT's response to the Commission, the  
17          applicant has provided pedestrian safety  
18          improvements of the intersections, but I will  
19          let DDOT speak to those recommendations.

20           Therefore, we recommended approval  
21          of the MOB proposal within the SP-1 PUD  
22          limitations as proposed by the applicant and

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 as conditioned by DDOT's recommendations and  
2 requirements, including the provision of  
3 quarterly reports to the ANC and to DDOT as  
4 outlined in their report.

5 Thank you. I would like to  
6 recognize Mr. Ken Laden from DDOT,  
7 Transportation and Policy Administration.  
8 Thank you.

9 CHAIRPERSON MITTEN: What we're  
10 going to do is we're going to have questions  
11 to the Office of Planning and then we'll do  
12 Mr. Laden separate.

13 MS. THOMAS: Okay.

14 CHAIRPERSON MITTEN: Okay?

15 MS. THOMAS: Okay.

16 CHAIRPERSON MITTEN: Great. Thank  
17 you. So you're done? Okay. Great.  
18 Questions from the Commission for Ms. Thomas?  
19 Any questions from the Commission?

20 COMMISSIONER JEFFRIES: Yes. I  
21 guess my start off questions to Mr. Price were  
22 really around just trying to get my arms

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 around the intensity of the medical office use  
2 in this residential area. So you initially  
3 started off, they started off with a 90 foot  
4 building. You asked for them to shave off two  
5 floors. They came back with shaved one floor  
6 and you are generally comfortable that, with  
7 just that one floor reduction, that the  
8 general, you know, intensity of the medical  
9 office use in this area would be sufficient?

10 MS. THOMAS: Well, we predicated  
11 that waiting on DDOT's response. If DDOT had  
12 come back and said well, that wasn't  
13 sufficient and that didn't really address the  
14 impacts, we would have insisted on the  
15 additional floor. But since DDOT's report, we  
16 feel comfortable, at this time, that those  
17 impacts may have -- may be addressed.

18 COMMISSIONER JEFFRIES: Okay.  
19 I'll ask the same question of Mr. Laden.  
20 Okay. Thank you.

21 CHAIRPERSON MITTEN: Anyone else?  
22 Mr. Tummonds, any questions for the Office of

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 Planning?

2 MR. TUMMONDS: No questions.

3 CHAIRPERSON MITTEN: Commissioner  
4 Thompson, any questions or Commissioner Gates,  
5 ANC, any cross examination?

6 PARTICIPANT: Thank you. I just  
7 have one question for Ms. Thomas. Are there  
8 any other sites in Ward 3 that you are aware  
9 of that are zoned for SP-1 or SP-2?

10 MS. THOMAS: No, I'm not aware of  
11 any off the top of my head right now.

12 PARTICIPANT: Okay. Are there any  
13 other sites within, and this may be a little  
14 tougher, the ANC-3D boundaries that are PUDs?

15 CHAIRPERSON MITTEN: This is  
16 actually going a bit beyond the scope of what  
17 she testified to. What is the relevance of  
18 that?

19 PARTICIPANT: I guess I'm just  
20 trying to understand the -- I mean, I'm just--  
21 I don't know. I guess I was just trying to  
22 answer a question that I don't know. I mean,

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 my next question would be is there anything  
2 like -- I mean, we have talked about SP-2 for  
3 Washington Hospital Center, but was there  
4 anything else? And I'm trying to find any  
5 comparable.

6 CHAIRPERSON MITTEN: Okay. She's  
7 just trying to find comparable situations to  
8 this situation.

9 MS. THOMAS: Yes.

10 CHAIRPERSON MITTEN: In a  
11 residential area.

12 PARTICIPANT: Yes.

13 MS. STEINGASSER: Well, the  
14 Washington Hospital Center is the most  
15 comparable. It has got an R-5-A arrangement.  
16 It has also got some single-family row houses  
17 surrounding that neighborhood and then it has  
18 got the SP-2. I mean, the SP PUD element for  
19 the hospital that would be the most.

20 PARTICIPANT: Okay. Thank you.

21 CHAIRPERSON MITTEN: Um-hum. Mr.  
22 Spector or Mr. Hagen?

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1                   MR. HAGEN:     Mr. Hagen is back.  
2                   Thank you.    Just a couple of quick questions.  
3                   You testified in supporting the SP Zone, which  
4                   under paragraph 502 says that "The major  
5                   purpose of the SP District is to act as a  
6                   buffer between adjoining commercial and  
7                   residential areas."    I was wondering if you  
8                   could speak to the buffer that exists here and  
9                   how that will operate as a result of a new,  
10                  more intensive use?

11                  MS.    STEINGASSER:        Well,    the  
12                  hospital itself separates the medical office  
13                  building from the residential area and that's  
14                  Zoned R-5-A.    That is a residential zone.    The  
15                  SP allows for this particular use to be in  
16                  that boundary area.    The SP itself doesn't --  
17                  it doesn't create like an undeveloped land  
18                  buffer.    It creates a buffer of uses and that  
19                  buffer is defined by the uses within Chapter  
20                  5 of the Zoning Regs of compatible uses.

21                  MR. HAGEN:    Right.    Right.    And I  
22                  guess I'm just trying to understand what is

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 being buffered from what, because if the  
2 purpose is to buffer the commercial uses from  
3 residential, I'm struggling with understanding  
4 your testimony, which is the more intense use,  
5 as a matter-of-fact, the most intensive use on  
6 the property is intended to be a new buffer  
7 between commercial and residential.

8 Which is the buffer and which is  
9 the uses that are being buffered from? In  
10 other words, we've got the residential and we  
11 have a modest use with this.

12 MS. STEINGASSER: Well, that's why  
13 I think you are focusing on the word buffer.  
14 The buffer is not perceived to be an  
15 undeveloped area.

16 MR. HAGEN: I understand that.

17 MS. STEINGASSER: It's perceived  
18 to be a transitional area of use. The buffer  
19 is the uses that are permitted through Chapter  
20 5 that are seen as compatible uses in that  
21 separation between commercial and residential  
22 areas.

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1                   CHAIRPERSON MITTEN: Maybe to help  
2 clarify. In this particular situation, are  
3 there commercial uses which the SP Zone will  
4 buffer from residential uses in this context?

5                   MS. STEINGASSER: No. It would be  
6 the institutional uses of the hospital.

7                   CHAIRPERSON MITTEN: Okay.

8                   MR. HAGEN: So the existing -- so  
9 but that's an issue. So the existing use of  
10 the hospital is being used as a buffer from a  
11 more intensive use. But we're not rezoning  
12 the hospital property.

13                  MS. STEINGASSER: No, we're not.

14                  MR. HAGEN: We're rezoning the  
15 office tower. I'll move on, but I'll just  
16 call that to the Commission's attention. I  
17 guess the other part of your findings that I  
18 just wanted to ask you to elaborate on would  
19 be again under paragraph 500.1 where it states  
20 that the SP District, "The Special Purpose  
21 District is designed to stabilize those  
22 areas." And I was wondering if you could

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 elaborate on how the new, more intensive use  
2 in a low density neighborhood is going to  
3 further that mandate to stabilize?

4 MS. STEINGASSER: Well, I think  
5 you need to read through the end of that  
6 sentence. "Those areas adjacent to C-3-C and  
7 C-4 and other appropriate areas that contain  
8 existing apartments, offices, institutions."

9 MR. HAGEN: So --

10 MS. STEINGASSER: And we see this  
11 as one of those appropriate areas that contain  
12 both apartments with the nursing center would  
13 act as a similar residential equivalent and  
14 institutions.

15 MR. HAGEN: So it's your testimony  
16 that a more intensive use serves the purpose  
17 of stabilizing --

18 MS. STEINGASSER: No, sir, that's  
19 your testimony.

20 MR. HAGEN: Okay. So but we're  
21 going to the zoning that you have endorsed  
22 which is designed to stabilize. And I'm just

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1       trying to understand how it is a more -- how  
2       you are stabilizing those potentially  
3       incompatible uses with a new SP Zone.

4                   MS. STEINGASSER: It goes to the  
5       uses that are permitted within the SP Zone.  
6       It's not as if this is an at-risk neighborhood  
7       that we are trying to stabilize from some  
8       particular use. The uses are those permitted  
9       in the SP Zone. And those uses are considered  
10      to be those which can be stable within the  
11      buffers between commercial and residential and  
12      institution uses.

13                  MS. THOMAS: Can I just say in  
14      addition that the SP Zone, the use of the  
15      medical office building is not an incompatible  
16      use. It is considered as an accessory use.  
17      And accessory uses under 502.1 of the hospital  
18      is also included. The SP also supports  
19      institutional uses. The accessory -- the MOB  
20      is considered an accessory or incidental use  
21      to the hospital.

22                  MR. HAGEN: I guess I'm just still

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 struggling with the basis of the justification  
2 for the rezone from R-5-A to the SP. I mean,  
3 is there some additional elaboration on the  
4 justification for how we -- we seem to be  
5 assuming that the SP is already there.

6 MS. STEINGASSER: If you are  
7 asking if the question is why did OP recommend  
8 SP-1, then I'll be happy to answer that  
9 question. And we chose that category because  
10 we looked at the different Zone Districts that  
11 are available to allow for the medical office  
12 building. We found a similar situation in the  
13 Washington Hospital Center, a very, very  
14 similar situation with the same zoning  
15 patterns.

16 We looked at the purpose of the SP  
17 District, which we found to be -- you are  
18 focusing on stabilizing, but to be more of a  
19 transitional use between these two zones and  
20 we felt that that was an appropriate use.  
21 More appropriate than a commercial use or an  
22 Industrial Zone or a Commercial Zone or an

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 Industrial Zone or even the CR-Mixed Use Zone.  
2 These are the zones we work with, so that's  
3 why we chose that one.

4 MR. HAGEN: Well, it seems you are  
5 assuming that you have to grant the request as  
6 opposed to the applicant's burden, but I'll  
7 move on to make good use of our time. To  
8 compare the other situations, which I'm not as  
9 familiar with, are you aware of the type of  
10 residential housing in the vicinity of Sibley  
11 Hospital? Have you gone up there to look at  
12 that?

13 MS. STEINGASSER: Yes, I am.

14 MR. HAGEN: And how would you  
15 describe that?

16 MS. STEINGASSER: Single-family  
17 detached.

18 MR. HAGEN: And were these other  
19 places predominantly or exclusively single-  
20 family detached housing?

21 MS. STEINGASSER: No, they were  
22 not.

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1                   MR. HAGEN:   Okay.   So that would  
2                   be a difference between the two?

3                   MS. STEINGASSER:   Yes.

4                   MR. HAGEN:   Okay.   I guess my  
5                   other question, were there other values that  
6                   you took account of given the master plan for  
7                   the area?   Are there other differences in  
8                   terms of the protections for this part of the  
9                   Palisades compared to those other situations  
10                  that you had described?   In other words, are  
11                  there -- is there anything that says we should  
12                  be careful not to allow new commercial or  
13                  intensive uses?

14                  MS. STEINGASSER:   We did not  
15                  classify this as a commercial use.

16                  MR. HAGEN:   Would you classify it  
17                  as a much more intensive use?

18                  MS. STEINGASSER:   At a 2.7 FAR and  
19                  a tract this size, I would -- I do not think  
20                  it's an inappropriate institutional use.

21                  MR. HAGEN:   And would that extend  
22                  to the -- what was the testimony 4,000 car

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 trips a day?

2 MS. STEINGASSER: I did not  
3 testify to any traffic.

4 MR. HAGEN: Oh, no, you didn't  
5 testify to it. No, no. It's obviously a much  
6 more intensive use. Well, I'll leave it  
7 there. We're still struggling with the  
8 housing.

9 CHAIRPERSON MITTEN: If there is  
10 no question, then, please, don't comment.  
11 Okay?

12 MR. HAGEN: Thank you.

13 CHAIRPERSON MITTEN: Thanks.  
14 Okay.

15 MR. HAGEN: No further questions.

16 CHAIRPERSON MITTEN: Okay. Thank  
17 you. Now, we're ready for Mr. Laden. Oh, who  
18 went away? But he is really still here. Let  
19 me just give you some positive reinforcement  
20 and say how pleased we are to see you here  
21 tonight, Mr. Laden.

22 MR. LADEN: Thank you very much.

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 It's a pleasure to be here, I hope. For the  
2 record, my name is Ken Laden. I'm the  
3 Associate Director for Transportation, Policy  
4 and Planning in the D.C. Department of  
5 Transportation.

6 With me this evening is Mr.  
7 Jeffrey Jennings, who is my Ward 3  
8 Transportation Planner, who has been working  
9 with the community and working with the  
10 applicant trying to hammer out a series of  
11 agreements to make the pedestrian program and  
12 the traffic program for this hospital project  
13 work, I think, in the best interest of both  
14 the hospital and the adjacent community.

15 We have filed several different  
16 memoranda related to this particular case.  
17 I'll just pull out some of the highlights. We  
18 think we have had a good opportunity again to  
19 work with the applicant and work with the  
20 surrounding community to come up with a series  
21 of proposals that we think will work well.

22 There is a proposal for a new

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 intersection at Dalecarlia and Loughboro,  
2 which we think will have significant safety  
3 improvements. The realignment of that  
4 intersection provides better sight lines. We  
5 think the recommended pedestrian crossing  
6 improvements will also provide greater safety.

7 It is not going to solve all of  
8 the congestion issues during the peak hours,  
9 but we do think it makes it a safer  
10 intersection. At our request, the consultants  
11 for the applicant did do some additional  
12 investigations to see whether other traffic  
13 control measures might be effective at that  
14 location and I think we found in the analyses  
15 that were prepared and that we reviewed that  
16 in some cases the proposed cure was less, was  
17 worse than the current situation. So we  
18 tended to agree with the applicant that  
19 additional signalization or traffic control  
20 signage there would just exacerbate other  
21 congestion issues in trying to solve this one  
22 that existed at that location.

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1           We have also been spending a lot  
2 of time talking about the bus stop and where  
3 that should be located and where the bus layby  
4 should be.     Here again, we think the  
5 applicant's proposal to put the bus stop near  
6 the new entrance there is perhaps the best  
7 location.

8           I know that there is a lot of  
9 opinion in the neighborhood, in particular,  
10 that the bus stop should be moved in back of  
11 the hospital off of Little Falls Road. I  
12 would have a preference for keeping it near  
13 Loughboro and Dalecarlia, because then I think  
14 it has greater access to the neighborhood.  
15 Whereas if it's back behind the hospital, it  
16 really becomes almost a private hospital bus  
17 stop.     And again, we think public  
18 transportation should be available to the  
19 largest possible group of persons that we can  
20 make it.

21           We also agree with the  
22 recommendation to add a shuttle bus service

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 between the hospital and the Friendship  
2 Heights station. We think that's a good  
3 amenity. We would also suggest that they  
4 might consider pairing that with a Metrochek  
5 Program that would provide benefits to  
6 employees that would choose to use a  
7 combination of Metro and shuttle bus to get to  
8 their work site.

9 We have also been working with the  
10 applicant to discuss ways of lowering speeds  
11 on the -- or lowering speeding traffic on  
12 Dalecarlia and Loughboro. And again, I think  
13 there is a series of recommendations the  
14 application has put forward in terms of speed  
15 control signage and other techniques that will  
16 hopefully help reduce the traffic speeds.

17 And again, at our request, the  
18 consultants did make a rather detailed  
19 investigation of existing speeds along those  
20 roadways and again our traffic experts took a  
21 look at that and basically, you know, agreed  
22 with their findings and recommendations.

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1           Finally, I guess we would like to  
2           again support the notion that the hospital  
3           provide us with periodic reports on the  
4           performance of their transportation plan. How  
5           many people are taking advantage of the  
6           transit service that they are providing and  
7           just the overall operations of their program.

8           One thing I did want to mention  
9           and overlooked was the parking garage. Here  
10          again, we are usually very concerned about the  
11          amount of parking spaces provided and whether  
12          or not it encourages commuters to choose  
13          driving rather than transit. We would like to  
14          encourage transit as much as possible in most  
15          land use.

16          But again, I think, a hospital is  
17          kind of a unique situation. A lot of the  
18          traffic, I think, generated by staff and  
19          certainly by the patients is sometimes not  
20          subject to the same sort of routine that would  
21          exist with normal employment. In other words,  
22          the physicians are not arriving during peak

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 travel times. Their schedules, I think,  
2 require them to drive more frequently.

3 Often again, patients will want to  
4 arrive by automobile if they can, just for  
5 convenience sake. So we think, in this case,  
6 providing adequate parking is a necessity and  
7 we think they have done a good job of right-  
8 sizing the parking facility.

9 So again, overall, I think, we  
10 have attempted to work with the community and  
11 with the hospital to come up with the best  
12 transportation program and we're in general  
13 agreement with the project as it is currently  
14 being proposed. Thank you very much.

15 CHAIRPERSON MITTEN: Thank you.  
16 Questions for Mr. Laden? Mr. Hood?

17 VICE CHAIR HOOD: Yes, Madam  
18 Chair. Thank you, also, Mr. Laden, for  
19 coming. The reporting measures, how does that  
20 work? I know you're talking about reporting  
21 for the Metrocheks. Now, will that be for  
22 like maybe a year or two or are you asking for

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 the -- in terms of forever? You're asking for  
2 reports.

3 MR. LADEN: I don't think it needs  
4 to be for eternity. Again, it's my suggestion  
5 and it would be up to the Commission to  
6 determine how long, you know, you felt it was  
7 necessary. But I would suggest for a year or  
8 two. Operations should have stabilized, a  
9 pattern should be developed and we would hope  
10 to see the level of service along the adjacent  
11 roads and the amount of transit usage and just  
12 overall operations of that transportation  
13 system around the hospital.

14 Now, it doesn't mean we would like  
15 the hospital then to slack off and terminate  
16 these programs. But I would think a year or  
17 two would give us enough information to know  
18 whether or not there were issues. And again,  
19 I think, this is a very active and involved  
20 neighborhood and they would let the District  
21 know if there were major changes in policy  
22 that were causing transportation concerns.

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1                   VICE CHAIR HOOD:       In those  
2 reports, are you getting reports now of other  
3 PUDs? I know we don't like to talk about  
4 other cases, but are you getting any reports  
5 of any other PUDs?

6                   MR. LADEN:    We have been asking  
7 for them in certain cases where we think there  
8 have been a need to address community  
9 concerns. The one case that we have been  
10 receiving reports and it has been very  
11 encouraging is the St. Patrick School. They  
12 have been providing us with reports on their  
13 carpooling operations and we hear from other  
14 notorious school cases primarily as to how  
15 their student drop-off and pick-up programs  
16 are operating.

17                   We have not had that in large  
18 development cases, although, we did recently  
19 request that as part of the decision package  
20 in the Old Georgetown Hospital PUD. I'm  
21 sorry, Old George Washington University  
22 Hospital site PUD. So again, this is an

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 attempt to at least gather some data.

2 VICE CHAIR HOOD: And this is my  
3 last question. When you get that report, even  
4 if the case is over, you can tweak, you still  
5 make mitigation adjustments to traffic.  
6 That's basically what that's all about, right?  
7 I'm just trying to see if this report --  
8 unfortunately, sometimes around here, things  
9 die for lack of attention.

10 MR. LADEN: Sure.

11 VICE CHAIR HOOD: I just want to  
12 see just how serious and how usable this  
13 report could be for this particular situation.  
14 Will you make changes if it shows that there  
15 needs to be a change made? Even after the  
16 case is over.

17 MR. LADEN: Certainly. And again,  
18 I think most businesses and certainly most --  
19 I'm sure the hospital would be willing to work  
20 with us to correct problems that were causing  
21 safety concerns. I think that would be our  
22 number one issue is is the striping of the

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 crosswalk being proposed at Loughboro and  
2 Dalecarlia a safe facility or does that need  
3 to be adjusted to improve safety.

4 And so yes, we would be using that  
5 information generated by those reports to make  
6 adjustments with the applicant and I'm sure  
7 the applicants would be willing to work with  
8 us, because they periodically need to come  
9 back to the District Government for various  
10 kinds of approvals.

11 VICE CHAIR HOOD: Okay. Good.  
12 Thank you. Thank you, Madam Chair.

13 CHAIRPERSON MITTEN: Commissioner  
14 Turnbull?

15 COMMISSIONER TURNBULL: Thank you,  
16 Madam Chair. Mr. Laden, I just had a question  
17 on the bus lane area. I want to try to  
18 understand how that works. There is a little  
19 bit of a dip in the road and the buses will  
20 just pull in along side there and wait. There  
21 is -- it's a bus stop there?

22 MR. LADEN: Yes, I believe it is

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 intended to be both a bus stop for picking up  
2 and discharging passengers as well as a layby,  
3 so that the buses can stay on their appointed  
4 schedule. If they get to the end of the line  
5 early, they would wait until it's time to  
6 depart.

7 COMMISSIONER TURNBULL: I guess  
8 what I'm trying to ask, I should have asked  
9 the applicant, I guess. Is the road that goes  
10 along there only for the buses or can cars go?  
11 Do cars go along that same way, too, then?

12 MR. LADEN: I'm being told it's  
13 only for the buses. I was looking at it and  
14 assuming a driver could use it as well.

15 COMMISSIONER TURNBULL: That's why  
16 I'm just --

17 MR. LADEN: But it looks as though  
18 the way it is designed, it would be for bus  
19 layby only. If a car wandered through there,  
20 they, you know, would survive probably.

21 COMMISSIONER TURNBULL: I was just  
22 concerned. I guess my one concern in seeing

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 the buy layby is whether if cars were  
2 accessing, too, that you would have a conflict  
3 with people cutting across and a car coming  
4 out in front of around the bus.

5 MR. LADEN: Well, again, the buses  
6 would only be there for a short period of  
7 time.

8 COMMISSIONER TURNBULL: Short  
9 period.

10 MR. LADEN: When they are awaiting  
11 to -- and again, if a bus is there, it's more  
12 likely that a car would avoid that bus lane  
13 and take the access road, which is a little  
14 bit further to the east.

15 COMMISSIONER TURNBULL: Yes, okay.  
16 Thank you.

17 CHAIRPERSON MITTEN: Any  
18 questions? Mr. Slade told us about a plan to  
19 put signs up and to direct people to use  
20 Little Falls Parkway?

21 MR. LADEN: Correct.

22 CHAIRPERSON MITTEN: Is the

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 signage plan something that DDOT has approved?

2 MR. LADEN: I think we have taken  
3 a look at it and perhaps agreed to a signage  
4 plan in concept, but I would want our Traffic  
5 Services Administration to take a look at the  
6 signage plan and approve it in specificity.  
7 That goes for, you know, all of the design  
8 plans. What we have here are sort of diagrams  
9 indicating intent and we would want to make  
10 sure that their intersection design plans or  
11 crosswalk design plans, also their signage  
12 plans meet our local standards.

13 CHAIRPERSON MITTEN: So you are  
14 committed to support their intent and some of  
15 the details just have to be worked out?

16 MR. LADEN: Exactly.

17 CHAIRPERSON MITTEN: For the  
18 actual design.

19 MR. LADEN: Exactly.

20 CHAIRPERSON MITTEN: Okay. And we  
21 heard a question that the applicant hadn't  
22 addressed to the extent there is an issue.

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 Does DDOT have any concerns about the lack of  
2 availability of on-street parking in the  
3 immediate neighborhood of the Sibley Hospital?

4 MR. LADEN: Does the Department  
5 have any concerns about the --

6 CHAIRPERSON MITTEN: Are people  
7 complaining about not having enough parking?

8 MR. LADEN: I have not heard any  
9 complaints about people not having enough  
10 parking in this specific neighborhood. There  
11 are other portions of the, you know, Palisades  
12 area where there are parking concerns around  
13 schools, in particular, but in this area I  
14 haven't heard any complaints yet.

15 CHAIRPERSON MITTEN: Okay.

16 MR. LADEN: But don't plant any  
17 ideas.

18 CHAIRPERSON MITTEN: I'll try not  
19 to. Mr. Tummonds, any questions?

20 MR. TUMMONDS: No questions.

21 CHAIRPERSON MITTEN: Questions  
22 from the ANC? Commissioner Gates? I just

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 want to caution you that it has to be within  
2 the scope. The exhibit that you are showing  
3 us has to be within the scope of Mr. Laden's  
4 testimony.

5 MS. GATES: Thank you, Madam  
6 Chairman, I believe it is.

7 CHAIRPERSON MITTEN: Okay.

8 MS. GATES: Mr. Laden, DDOT looks  
9 at impacts of traffic growth in the context of  
10 street peak hours or those hours when traffic  
11 volumes are at their highest, correct?

12 MR. LADEN: That is correct.

13 MS. GATES: And if the increase in  
14 traffic volume during the day does not exceed  
15 the peak hour volume, does DDOT consider there  
16 to be no impact?

17 MR. LADEN: Again, I think we  
18 would look at that on a case-by-case basis.  
19 In this particular instance, I think we are  
20 very much aware and working with the applicant  
21 and working with the community that peak  
22 travel for this particular hospital facility

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 will be somewhat out of sync with the normal  
2 commuting pattern.

3           Again, we would take note of it,  
4 but and also I think we would be concerned  
5 about an extension of the peak hour. For  
6 instance, if the peak hour now is let's say  
7 from 8:30 to 9:00 or let's say from 8:00 to  
8 9:00 and this is going to extent it from 8:00  
9 to 10:00 or 8:00 to 11:00, you know, we would  
10 take that into consideration. We would want  
11 to try to deal with that issue.

12           MS. GATES: Well, does that mean  
13 that volumes can approach peak hour? Well, at  
14 what point would DDOT say there is an impact?  
15 I mean, we're talking about 4,000 more vehicle  
16 trips a day. So at what point is DDOT going  
17 to say there is an impact?

18           MR. LADEN: No, I would  
19 definitely, you know, say that creating a new  
20 facility of this size will have an additional  
21 impact on traffic in the neighborhood. It  
22 will be, we think, primarily directed towards

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 the major arterials in the neighborhood, not  
2 impacting the neighborhood streets quite as  
3 much.

4 And again, I think, working with  
5 the hospital and working with the  
6 neighborhood, we have attempted to come up  
7 with mitigation measures which would try to  
8 ensure that that increased growth in traffic  
9 would be managed safely and would be able to  
10 be managed effectively by the existing roadway  
11 system and the new roadway system that they  
12 are proposing to build within the project  
13 area.

14 MS. GATES: You just mentioned  
15 that you have been working with the  
16 neighborhood. Would you flesh that out a  
17 little bit?

18 MR. LADEN: Yes, I believe my  
19 staff has been meeting with representatives of  
20 the community to discuss their concerns and I  
21 believe I have attended a couple of meetings  
22 with community representatives discussing

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 their concerns about this project.

2 MS. GATES: I'm not aware of  
3 those, but I know there are some coming up.  
4 So have you spent time out here recently?

5 MR. LADEN: I'm trying to remember  
6 the last time I was out here. It might have  
7 been last fall.

8 MS. GATES: Um-hum. In your  
9 October 11<sup>th</sup> report or memorandum, you said  
10 DDOT is concerned that this proposed  
11 intersection redesign may pose additional  
12 hazards than the existing intersection  
13 conditions. What has changed in the design  
14 since October 11<sup>th</sup> to mitigate that concern?

15 MR. LADEN: Yes, I'm just looking  
16 at the intersection and the handout that you  
17 just provided versus the one that is in the  
18 applicant's proposal that was distributed  
19 today and I notice that the intersection  
20 appears to be, at Dalecarlia and Loughboro,  
21 squared off a little more. It's more of at a  
22 90 degree angle, whereas the earlier one was

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 still a little more curved as it approached,  
2 as Dalecarlia approached Loughboro.

3 And again, I think I'm not sure  
4 whether the pedestrian markings were in the  
5 earlier version of the intersection. The  
6 current version currently has that.

7 MS. GATES: I don't think that  
8 this, just for the record, reflects the new  
9 design, the piece that I handed out. I handed  
10 this out for a very different reason.

11 CHAIRPERSON MITTEN: Okay. That's  
12 fine.

13 MS. GATES: The ANC met with the  
14 applicant. I don't think anyone from DDOT was  
15 there. Our concern was traffic leaving Little  
16 Falls.

17 CHAIRPERSON MITTEN: Is there a  
18 question coming?

19 MS. GATES: It's coming. Our  
20 concern was traffic trying to cross over  
21 Dalecarlia Parkway. How has this redesign  
22 improved that condition, because -- well, no.

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 I'll leave it there.

2 MR. LADEN: Well, again, I'm not--  
3 I don't recollect what the earlier design  
4 plans were or at what point in time they were  
5 changed. I'm looking at the design plans that  
6 are in front of me now and again, after our  
7 traffic services specialist took a look at it  
8 and my ward transportation planner took a look  
9 at it and as I'm looking at it, it appears to  
10 be an improved intersection, you know,  
11 connecting Little Falls Road with that portion  
12 of Dalecarlia Parkway.

13 It allows for a separation between  
14 traffic entering Little Falls and traffic  
15 exiting. There is a brief or a short median  
16 there. And again, also that intersection  
17 appears to have good sight distance both to  
18 the right and to the left, so that you can  
19 gauge traffic coming either down Dalecarlia or  
20 up from Loughboro north on Dalecarlia.

21 MS. GATES: Well, hasn't the  
22 intersection been moved south by about 100

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 feet?

2 MR. LADEN: Again, I wasn't --

3 MS. GATES: In this new plan.

4 MR. LADEN: I wasn't involved in  
5 the review of the previous plan. I was  
6 relying upon my staff and the Traffic Services  
7 Administration staff to evaluate the locations  
8 of the intersection. And again, I'm going on  
9 their judgment that this particular layout is  
10 one that meets their safety requirements.

11 MS. GATES: One, has anybody  
12 discussed with you the fact that there is  
13 going to be additional traffic generated by  
14 the Army Corps of Engineers de-watering  
15 facility also located on Little Falls Road?

16 MR. LADEN: Yes, I'm aware of  
17 that.

18 MS. GATES: And is there any  
19 concern about 20 ton dump trucks trying to  
20 cross Dalecarlia Parkway when the intersection  
21 has been moved south by 100 feet, which means  
22 any car entering Dalecarlia from Loughboro has

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 had 100 extra feet to gain speed?

2 MR. LADEN: Well, again, I think,  
3 you know, we have expressed our comments on  
4 the de-watering facility and the number of  
5 trucks that would be resulting from that  
6 process. And yes, I think we are going to  
7 have to take a look at how that routing system  
8 is going to work.

9 I know the proposal was to try to  
10 keep the truck traffic as far away from the  
11 residential community as possible. So we by  
12 default sort of supported them using Little  
13 Falls Road to Dalecarlia and then going north.  
14 If I remember correctly, we're looking at,  
15 approximately, 8 to 12 trucks per day using  
16 that route to take the material from the waste  
17 -- from the water treatment facility.

18 So again, given all of the  
19 alternatives in front of us, we think this one  
20 could work, but again, we would want to  
21 monitor how that truck traffic is working out  
22 as it is using Little Falls Road and

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 Dalecarlia to exit the facility.

2 MS. GATES: But so there are  
3 safety concerns about the truck traffic?

4 MR. LADEN: Well, again, I think,  
5 there is always concerns when you have truck  
6 traffic and uncontrolled intersections, but  
7 again, I think the number of vehicles we are  
8 talking about, my recollection is 8 to 12  
9 trucks a day, we also encourage that that  
10 truck traffic not occur during peak travel  
11 hours.

12 So if they can perform that  
13 function either, you know, at off peak hours  
14 or at times when it is not going to conflict  
15 with the hospital traffic, we think that that  
16 operation can be carried out successfully and  
17 safely.

18 MS. GATES: But we don't expect  
19 the 4,000 vehicles that will be generated  
20 really to all be coming and going during the  
21 peak hours either.

22 MR. LADEN: Correct.

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 MS. GATES: So another concern of  
2 the ANC had ongoing with the applicant was the  
3 impact of cut-through traffic on neighborhood  
4 streets. And we were surprised that in your  
5 report or in their report that streets like  
6 Watson, Manning and Macomb were not  
7 considered, because those are the streets --

8 CHAIRPERSON MITTEN: Okay. Are  
9 you going to ask a question now?

10 MS. GATES: Aren't those the  
11 streets that are seeking a meeting with you?  
12 Those very streets, residents of those  
13 streets.

14 MR. LADEN: Well, again, I know  
15 that there is a meeting scheduled with my  
16 staff to talk about the general transportation  
17 concerns, I guess, related to the hospital,  
18 but I'm not familiar with what the specific  
19 streets have been requesting that meeting.

20 As far as the travel patterns  
21 from, you know, people coming to the hospital,  
22 again, I would agree with the consultants for

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 the applicant that most of the staff and  
2 physicians and most of the patients would be  
3 arriving on the main arterials adjacent to the  
4 property. They would not be coming through  
5 neighborhood streets to go to work or to  
6 attend a physician's office.

7 MS. GATES: Mr. Laden, in the St.  
8 Patricks' case, didn't you say that people  
9 will follow the path of least resistance?

10 MR. LADEN: I probably did.

11 MS. GATES: Okay. Thank you.  
12 Now, I'm going to refer to this.

13 CHAIRPERSON MITTEN: Okay.

14 MS. GATES: And I would like to  
15 point out if you look up at Little Falls Road,  
16 the helipad is not there. It is in a parking  
17 lot.

18 CHAIRPERSON MITTEN: Okay. We see  
19 that.

20 MS. GATES: Okay. Now, in terms  
21 of working with the community, Mr. Laden,  
22 hasn't the rerouting of buses onto Little

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 Falls Road been an ongoing request from the  
2 Sibley community?

3 MR. LADEN: That is correct.

4 MS. GATES: Okay. But hasn't the  
5 existence of the helipad been one reason not  
6 to reroute the buses?

7 MR. LADEN: That is one reason,  
8 correct.

9 MS. GATES: Okay. And you can see  
10 on this -- can you see on this that this  
11 handout from Sibley clearly shows the helipad  
12 located in a parking lot?

13 MR. LADEN: Yes, that handout does  
14 show that.

15 MS. GATES: And so we could, using  
16 this model, remove the helipad from Little  
17 Falls Road?

18 MR. LADEN: Correct.

19 MS. GATES: Okay. Would DDOT  
20 support the rerouting of buses onto Little  
21 Falls Road provided there was a drop-off  
22 behind the hospital for staff that would no

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 longer require them to cross Loughboro Road  
2 and then have the buses return to the proposed  
3 layover at the front of the hospital on Little  
4 Falls Road?

5 MR. LADEN: I wouldn't have any  
6 objection to a bus stop behind the hospital on  
7 Little Falls, provided there was some bus stop  
8 opportunity near, you know, Dalecarlia and  
9 Loughboro or somewhere along that section,  
10 because I think that there needs to be bus  
11 service not just for the hospital, but also  
12 for the residents in the neighborhood.

13 And there were other issues as  
14 well with respect to use of Little Falls as a  
15 bus route. That's a local street. It's not  
16 a District street. And it is -- at least some  
17 of the diagrams that I'm looking at here, show  
18 back-in parking, which again can become a  
19 little bit complicated if there is bus traffic  
20 going through there. It is not impossible.  
21 It happens throughout the city.

22 But again, my desire is to have

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 the bus stop located where it will serve the  
2 most number of people. And ultimately that  
3 decision rests with WMATA. We would just  
4 provide them with our comments and suggestions  
5 with respect to bus stop locations.

6 MS. GATES: Isn't there a bus stop  
7 currently on the hospital side in front of the  
8 hospital that would fulfill that need?

9 MR. LADEN: Yes.

10 MS. GATES: Okay. Thank you.  
11 Also, don't buses and cars -- no. I'll  
12 rephrase this. Currently, isn't back-in  
13 parking on Columbia Road also a bus route?

14 MR. LADEN: That is correct.

15 MS. GATES: Thanks.

16 MR. LADEN: And there are other  
17 examples, too, where there are bus routes  
18 along streets that have both angled parking  
19 and back-in parking.

20 MS. GATES: In your latest  
21 memorandum you also request that Sibley  
22 provide, and I believe the Commission did talk

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 about this, quarterly reports to DDOT and the  
2 ANC. And what enforcement action does the ANC  
3 have or does DDOT have?

4 MR. LADEN: Well, the ANC would  
5 not have enforcement action. They could  
6 merely bring issues to the table. They could  
7 ask the representatives of the hospital to  
8 come to the ANC and discuss concerns. The  
9 Department of Transportation doesn't have a  
10 whole lot of ability to implement zoning  
11 orders. We do have certain responsibilities  
12 within, you know, public space permitting, but  
13 we would rely upon other elements of the  
14 District Government to enforce zoning  
15 requirements.

16 But again, we found that in  
17 working with property owners, working with  
18 major institutions in the city, they are  
19 generally cooperative in trying to address  
20 safety problems.

21 MS. GATES: Also in your report,  
22 you say DDOT is aware the community

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 stakeholders are concerned with the height of  
2 the building, the number of floors and the  
3 number of doctors and associated staff. DDOT  
4 has mentioned this concerns as they relate to  
5 traffic to the applicant. Would you like to  
6 expand on that a little bit?

7 I mean, what is DDOT's relation to  
8 the -- what is the height of the building?  
9 How does DDOT look at that, other than looking  
10 at the ITE report?

11 MR. LADEN: Yes, the height of the  
12 building would not be an issue that we would  
13 focus on. I think perhaps the portion of the  
14 testimony is referring to the number of staff,  
15 which would be the only real consideration  
16 that we would have. Again, our understanding  
17 is that in working with the community, we have  
18 been, you know, the hospital or the applicant  
19 has been, trying to address a number of  
20 issues, including massing of the building and  
21 the transportation issues.

22 I think we were just acknowledging

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 that the District Government was trying to  
2 address those community concerns. But if they  
3 don't have impact on the traffic generation or  
4 the parking requirements, they typically  
5 wouldn't be of concern to us in our testimony.

6 MS. GATES: Thank you. I have no  
7 more questions.

8 CHAIRPERSON MITTEN: Thank you.  
9 Before we go to the party in opposition, Mr.  
10 Laden you said something in response to one of  
11 Ms. Gates' questions. You said that Little  
12 Falls Road was a local road, not a District  
13 street.

14 MR. LADEN: Correct.

15 CHAIRPERSON MITTEN: What does  
16 that mean exactly?

17 MR. LADEN: We, several years ago,  
18 conducted a traffic analysis on Little Falls  
19 Road to see whether or not it could  
20 accommodate bus traffic and I was stunned to  
21 see that one of the findings was that Little  
22 Falls Road was a private street, that it was

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 originally, I believe, controlled by the U.S.  
2 Army Corps of Engineers and it was now part of  
3 the property of the Sibley Hospital.

4 CHAIRPERSON MITTEN: So your  
5 understanding is that Sibley owns Little Falls  
6 Road?

7 MR. LADEN: Correct.

8 CHAIRPERSON MITTEN: Okay. If  
9 they don't want the trucks from the Army Corps  
10 to drive on Little Falls Road, can they say  
11 no?

12 MR. LADEN: That's an interesting  
13 question. I think you might need to ask the  
14 hospital that question.

15 CHAIRPERSON MITTEN: Okay. I will  
16 do that.

17 MR. LADEN: But my understanding  
18 is that the hospital and the Army Corps of  
19 Engineers have been working in partnership to  
20 address those issues.

21 CHAIRPERSON MITTEN: Okay. Okay.  
22 Thank you. Mr. Spector, your turn.

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1                   MR. SPECTOR:    Thank you, Madam  
2                   Chair.

3                   CHAIRPERSON MITTEN:   Turn on the  
4                   microphone, please.

5                   MR. SPECTOR:    Thank you.  I would  
6                   like to continue examining the bus issue and  
7                   I'll be using illustrations from the  
8                   applicant's presentation tonight, page 5 and  
9                   6, so it's the current version and I'm just  
10                  using them really to -- so we can understand  
11                  what we are speaking about.

12                  First, are you aware that the  
13                  community and I and one of the affected  
14                  individuals has agreed to retain the downhill  
15                  bus stop on Loughboro Road, which is indicated  
16                  here, as part of an arrangement where the  
17                  uphill traffic, so to speak, goes behind the  
18                  hospital and the downhill traffic goes in  
19                  front?

20                  That is to say the buses would go  
21                  behind the hospital, sort of up the hill, and  
22                  actually could serve the medical office

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 building and then would go to the turnaround  
2 and pause, but for the return trip, they would  
3 come down the hill picking up passengers from  
4 the locality. So they would -- it would --

5 CHAIRPERSON MITTEN: So the  
6 question is is Mr. Laden aware of that plan?

7 MR. SPECTOR: Aware of that.  
8 That's correct. That the neighbors have --

9 CHAIRPERSON MITTEN: Are you aware  
10 of that plan?

11 MR. SPECTOR: -- agreed to that.

12 MR. LADEN: No, I'm not, but if  
13 the -- you know, our Department staff and if  
14 the WMATA staff are in agreement with that  
15 circulation route, I wouldn't have any  
16 problems with it.

17 MR. SPECTOR: Good. Thank you.  
18 Does the current arrangement for the buses and  
19 again just looking at the map, how will  
20 affected individuals who are taking the bus to  
21 use the office building access the office  
22 building? Isn't this a very inconvenient

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 current arrangement for this important new  
2 activity? I'll leave out the adjectives.

3 In other words, the buses  
4 currently stop here and you have to cross, you  
5 know, the campus to get to the office  
6 building.

7 CHAIRPERSON MITTEN: Okay. You're  
8 not testifying. You're asking Mr. Laden a  
9 question, right?

10 MR. SPECTOR: Correct. I'm asking  
11 wouldn't the arrangement with the buses in  
12 back provide better service to the office  
13 building?

14 MR. LADEN: Again, it appears as  
15 though both access points would require the  
16 persons using that medical office building to  
17 have to walk across a portion of a parking  
18 area. But it seems like they both provide  
19 reasonable access.

20 MR. SPECTOR: There were several--  
21 are you aware that there were several problems  
22 as to why it was difficult to route the buses

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 behind the hospital, one of which was the  
2 presence of the helipad, which has been  
3 discussed, a second of which was the quality  
4 of the road.

5 CHAIRPERSON MITTEN: Okay. You  
6 know --

7 MR. LADEN: Yes.

8 CHAIRPERSON MITTEN: Okay.

9 MR. SPECTOR: I just want to --

10 CHAIRPERSON MITTEN: I don't want  
11 to lose patience, but to basically wrap  
12 testimony up in a question for Mr. Laden is --  
13 that's not what we're here for.

14 MR. SPECTOR: All right.

15 CHAIRPERSON MITTEN: Okay.

16 MR. SPECTOR: Let me ask, is the  
17 quality of the road an issue any longer on the  
18 use of that road for buses?

19 MR. LADEN: Well, again, the  
20 current quality of the road would be an issue,  
21 but if there were development plans to  
22 redevelop the road and it could accommodate

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 bus traffic, then that would alleviate that  
2 concern.

3 MR. SPECTOR: Okay. And is there  
4 any other outstanding issue that you are aware  
5 of that sort of makes this as a show stopper,  
6 if we will, if we can use that term, as to  
7 this option?

8 MR. LADEN: No. Again, I think,  
9 my concern was threefold. One was the  
10 potential conflict with the helipad, the  
11 quality of the existing road that would need  
12 to be upgraded and then finally that there was  
13 also bus stop service provided, not just  
14 privately to the hospital, but serving the  
15 larger community.

16 MR. SPECTOR: And --

17 MR. LADEN: And if those three  
18 issues were addressed, I would not have any  
19 concerns.

20 MR. SPECTOR: Thank you. Let me  
21 ask just on the helipad itself. With the new  
22 traffic that this road is going to be assuming

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 because of the medical office building, does  
2 the helipad represent an impediment that you  
3 studied?

4 MR. LADEN: Well, again, that's  
5 one concern that I had.

6 MR. SPECTOR: Not for the buses,  
7 excuse me. Just for the regular traffic going  
8 to the office building.

9 MR. LADEN: Yes, any time you have  
10 an emergency helicopter facility in the middle  
11 of a roadway, I think that's -- even if it's  
12 a local serving driveway for a parking, that  
13 would, you know, be something that we would be  
14 concerned about.

15 MR. SPECTOR: And if it was a road  
16 that was to get increased traffic, you would  
17 be more concerned?

18 MR. LADEN: Correct.

19 MR. SPECTOR: Can you cite other  
20 examples of a helipad in the middle of a  
21 heavily used road?

22 MR. LADEN: No, I can't.

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1                   MR. SPECTOR:    Thank you.    If I  
2 understand your standards for judging traffic  
3 impacts, you look at the slowing down of  
4 traffic, not necessarily the impact of speeded  
5 up traffic and just the general numbers of  
6 cars that may go past a certain location?

7                   MR. LADEN:    Well, I think there is  
8 a number of factors that we would look at and  
9 we do rely upon our Traffic Services  
10 Administration which has our traffic  
11 engineering section.    There is a lot of  
12 issues.    There is questions of speed.    There  
13 is questions of volume.    There is questions of  
14 sight distances.    A number of turning  
15 movements.    There is a whole host of issues  
16 that we take a look at when looking at urban  
17 traffic conditions.

18                   MR. SPECTOR:    But the mere  
19 increase, let us assume that traffic just  
20 flowed gently, but there was more and more and  
21 more of it, is that an impact that might reach  
22 a certain stage where you would say this is

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 turning into a highway. It is affecting a  
2 neighborhood area and it really is something  
3 we could not approve?

4 MR. LADEN: Well, again, it  
5 depends on the numbers that we're looking at  
6 and the ability of the roadway to handle it.  
7 If traffic is moving at, you know, a steady  
8 rate of, you know, level of service B or C and  
9 there were no problems on the crossing  
10 streets, we wouldn't have a particular concern  
11 with it.

12 But certainly if we have got  
13 safety problems or if we have got speeding  
14 problems or if we have got unusual congestion  
15 problems, we try to solve them.

16 MR. SPECTOR: But the mere -- just  
17 the mere overall increase in traffic is not a  
18 burden that is identified and could reach a  
19 stage where you would step in and say just the  
20 raw numbers, the noise, the rest, that's not  
21 a factor that you could weigh to that extent  
22 of stopping a project?

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1                   MR. LADEN: Well, again, it's a  
2 question of it's hard to judge from that  
3 statement at what level the Department would  
4 have concerns about the level of traffic and  
5 if it was affecting the quality of life in a  
6 particular community. If a roadway is going  
7 from several thousand cars a day through a  
8 residential neighborhood and it were to  
9 increase to a significant volume, we would  
10 want to take a look at it to make sure that  
11 the roadway was able to accommodate it and  
12 handle it safely.

13                   If it could, we would be in  
14 agreement with that level of traffic increase.  
15 If it was causing problems, then we would try  
16 to find some way to mitigate it. So it's a  
17 question of what are the outcomes of that  
18 traffic, not just the numbers.

19                   MR. SPECTOR: Thank you. Is there  
20 an intersection rating lower than F?

21                   MR. LADEN: No, but I think we  
22 have some operating at that level. No, there

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 is not.

2 MR. SPECTOR: But we know you  
3 could have sort of secret Fs or secret lower  
4 than F.

5 MR. LADEN: In a couple of  
6 instances, I have referred to F prime or F  
7 plus.

8 MR. SPECTOR: All right.

9 MR. LADEN: Yes.

10 MR. SPECTOR: So we have an  
11 intersection now at Loughboro and Dalecarlia  
12 which is already an F and which is projected,  
13 I believe, in the morning rush and it's  
14 projected to get rather worse, correct?

15 MR. LADEN: Well, again, it may be  
16 worse or it may have more traffic moving  
17 through it, but if the intersection is  
18 redesigned so that it operates more safely, we  
19 might find that overall the situation was  
20 improved, even though the number of cars  
21 moving through that intersection may still be  
22 high at certain times of the day.

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1           MR. SPECTOR:    But the applicant  
2 projected, as you saw, F. This was going to  
3 stay the case, even with its new plan.

4           MR. LADEN:    Correct. And we did  
5 as a result of that ask them to analyze  
6 whether or not signalization or adding stop  
7 signs to that intersection would help  
8 alleviate the situation and I think we found  
9 that, number one, it didn't meet warrants,  
10 which means it doesn't technically quality for  
11 a traffic signal. Plus, I think it was  
12 causing unwanted congestion on other roadways  
13 that in effect the cure was worse than the  
14 problem.

15          MR. SPECTOR:   All right. Well, I  
16 think when you frame it in those terms, the  
17 cure is worse than the problem, you suggest  
18 that it was a preexisting orientation or it  
19 was their preexisting orientation that led you  
20 to say I must find a solution for this,  
21 because I'm going to see this building  
22 approved and we have to make the best of what

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 we have got.

2 MR. LADEN: No, I don't think we  
3 approached it in that frame of mind. I think  
4 we take a look at projects and determine  
5 whether or not they can be accommodated with  
6 the existing infrastructure or whether they  
7 need new transportation infrastructure to make  
8 them work. And in some instances we have  
9 indicated that we don't think that the traffic  
10 impacts are acceptable.

11 MR. SPECTOR: But in this case,  
12 we're prepared to tolerate something from F to  
13 worse than F in the sense that there will be  
14 more vehicles using this particular  
15 intersection.

16 MR. LADEN: I think that we are  
17 willing to accept the situation provided that  
18 the intersection is redesigned and made a  
19 safer intersection than what it is now, we  
20 believe.

21 MR. SPECTOR: All right. Let me  
22 ask you about the shuttle buses. How long do

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 you think it will take a shuttle bus to go  
2 from the hospital to Friendship Heights and  
3 then return or not return, but how long will  
4 each trip take, do you imagine?

5 MR. LADEN: That I'm not sure.  
6 You know, it's going to vary depending on the  
7 time of day.

8 MR. SPECTOR: And do you believe  
9 the shuttle buses will be actively used in  
10 lieu of vehicles by various individuals,  
11 notwithstanding what may be a rather lengthy  
12 trip on the shuttle bus?

13 MR. LADEN: I think it could.  
14 Again, I think if it -- it would be more  
15 effective if it were linked with the Metrochek  
16 Program or staff were receiving subsidies for  
17 the Metro portion of that trip. Again, I  
18 think there is a number of shuttle bus loops  
19 that are provided within the Federal  
20 Government with other hospitals, other  
21 universities that are quite effective.  
22 Everything from the, you know, Kennedy Center

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 shuttle buses to shuttle buses serving  
2 Georgetown, Georgetown Law Center, etcetera.  
3 So I think there is a history of them working.

4 MR. SPECTOR: Okay. Let's see,  
5 you indicated that you were not aware of --  
6 and this is not intended to be an accusation,  
7 but you said you personally were not aware of  
8 the fact that cars would not use the -- what  
9 is it, the bus lane?

10 MR. LADEN: Correct.

11 MR. SPECTOR: But you -- was your  
12 staff aware of how this was going to be used  
13 and do they have a complete understanding of  
14 how this intersection would operate?

15 MR. LADEN: I hope so.

16 MR. SPECTOR: Okay. Madam Chair,  
17 I think that will cover us.

18 CHAIRPERSON MITTEN: Thank you. I  
19 just had a follow-up question for Mr. Laden  
20 based on something that Mr. Spector, one of  
21 his questions, brought to mind, which is he  
22 was asking you about the need to upgrade

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 Little Falls Road if it were going to service  
2 a bus route. That there is a road condition  
3 issue.

4 MR. LADEN: Correct.

5 CHAIRPERSON MITTEN: Is there a  
6 road condition issue related to using Little  
7 Falls Road as contemplated by the applicant  
8 for routing traffic related to the medical  
9 office building?

10 MR. LADEN: Well, again, I think  
11 the existing road pretty much serves as a  
12 driveway. At least to me, it appeared to  
13 function as a driveway. And if I remember  
14 correctly, it was not constructed to the same  
15 standards we would a road handling heavier  
16 traffic. So our sense was that if it was  
17 going to handle heavier traffic, such as buses  
18 or dump trucks, it would need to be  
19 reconstructed to have a heavier road base and  
20 be a little bit wider and meet certain other  
21 roadway standards.

22 CHAIRPERSON MITTEN: So not more

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 cars, just heavier, literally, more weighty  
2 vehicles is the nature of the problem?

3 MR. LADEN: Correct. That's  
4 correct.

5 CHAIRPERSON MITTEN: Okay.

6 MR. LADEN: Or if it were, you  
7 know, to become a through street or a  
8 connector street, obviously, it would need to  
9 be widened and designed differently than it is  
10 now.

11 CHAIRPERSON MITTEN: But you don't  
12 see it as being a connector of sorts?

13 MR. LADEN: No.

14 CHAIRPERSON MITTEN: Okay.

15 MR. LADEN: No.

16 MR. SPECTOR: Madam Chair, just a  
17 follow-up question, if I may. Are you aware  
18 that the Corps of Engineers will be upgrading  
19 the road in order to provide for the de-  
20 watering plant?

21 MR. LADEN: Again, I believe, that  
22 was the nature of the discussions that we were

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 involved in as part of the new proposed de-  
2 watering facility at the Washington Aqueduct.  
3 That they were going to participate and help  
4 with the reconstruction of the road. What  
5 actual agreements have been arrived at to  
6 accomplish that, I'm not aware of.

7 MR. SPECTOR: Thank you.

8 CHAIRPERSON MITTEN: Thank you.  
9 Okay. No, we're doing ANC next. We haven't  
10 done the ANC yet. I know you are excited to  
11 get to that, Mr. Tummonds, but we're not there  
12 yet. Okay. We're ready for the ANC report.

13 MR. LADEN: Are we finished?

14 CHAIRPERSON MITTEN: Oh, Mr.  
15 Laden, we're done with you.

16 MR. LADEN: Good.

17 CHAIRPERSON MITTEN: You are  
18 excused.

19 MR. LADEN: Thank you.

20 CHAIRPERSON MITTEN: Thank you.  
21 You'll all be pleased to know that there is no  
22 precipitation outside, so that whole winter

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 storm thing is delayed. Do you need a couple  
2 of minutes? So do you need a couple of  
3 minutes or it's not going to work? Okay.

4 We'll just all stay here, but  
5 we'll go off the record for a couple of  
6 minutes.

7 (Whereupon, at 10:12 p.m. a recess  
8 until 10:15 p.m.)

9 CHAIRPERSON MITTEN: Okay. So  
10 we're back on the record. We have agreed --

11 MS. RACHEL THOMPSON: I'm sorry,  
12 can I just ask, I have just handed everybody  
13 my testimony, which, you know, now that I have  
14 the --

15 CHAIRPERSON MITTEN: We'll keep  
16 it.

17 MS. RACHEL THOMPSON: -- another  
18 couple of weeks, well --

19 CHAIRPERSON MITTEN: Oh, you want  
20 to work on it?

21 MS. RACHEL THOMPSON: I might want  
22 to, yes.

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 CHAIRPERSON MITTEN: Do you want  
2 it back?

3 MS. RACHEL THOMPSON: Do you mind?

4 CHAIRPERSON MITTEN: No.

5 MS. RACHEL THOMPSON: That would  
6 be great, because I actually may want to.

7 CHAIRPERSON MITTEN: Okay. So we  
8 are passing back the ANC testimony.

9 MS. RACHEL THOMPSON: Thank you  
10 very much.

11 CHAIRPERSON MITTEN: And we agreed  
12 that we will begin on our continuation night  
13 with the ANC and now we will go to those who  
14 would like to testify in support.

15 MS. SCHELLIN: I'm sorry, we need  
16 to swear somebody in.

17 CHAIRPERSON MITTEN: Oh, okay.  
18 Well, all we'll get to for the rest of the  
19 evening then is individuals and organizations  
20 in support and anyone who plans on testifying  
21 in that capacity, if you haven't been sworn,  
22 please, stand, raise your right hand and

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 direct your attention to Mrs. Schellin and she  
2 will swear you in.

3 (Whereupon, the witnesses were  
4 sworn.)

5 MS. SCHELLIN: Thank you.

6 CHAIRPERSON MITTEN: We could take  
7 two more at the table. Okay. Let's start  
8 with this gentleman in the purple shirt and  
9 the purple tie and we'll move down the table.

10 MR. ROSS: Okay.

11 CHAIRPERSON MITTEN: No, just have  
12 a seat, please.

13 MR. ROSS: My name is Stuart Ross  
14 and I'm the immediate past president of the  
15 Palisades Citizens Association. And I have  
16 sitting with me another past president of the  
17 Palisades Citizens Association, Penny Pagano.  
18 Carolyn Ortwein, our first vice president, was  
19 going to testify, but she has a very early  
20 plane and asked us if we would stand in for  
21 her, which is why we were not sworn in. So  
22 thank you very much, Madam Chairman and

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 Commissioners, for allowing us to testify.

2 The Palisades Citizens Association  
3 represents, approximately, 1,700 households in  
4 the Palisades. We have a close working  
5 relationship with the Advisory Neighborhood  
6 Council and most of the time we are in  
7 agreement on issues and we work together to  
8 help solve problems in our area.

9 We think we have a very special  
10 area. This is an issue where we have some  
11 differences of opinion and those have been  
12 manifested by the appearance of the proponent,  
13 Sibley Hospital, on three separate occasions  
14 for meetings of the Palisades Citizens  
15 Association, which were noticed in our  
16 newsletter and where they provided us  
17 information about their plans for an office  
18 building.

19 In June of 2006, we had a debate  
20 on a resolution to approve or disapprove  
21 Sibley's petition to build a new office  
22 building on the land that they have, a medical

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 office building on the land that they had. We  
2 had a fulsome debate. We had discussions on  
3 the two previous meetings prior to that. And,  
4 indeed, we had the chairman, chairwoman of our  
5 Traffic Committee present to us the  
6 information that there would be very  
7 substantial increased traffic flow as a result  
8 of this building.

9 And that was considered and Laura  
10 Finney made her views known and she was  
11 actually opposed to our approving the proposal  
12 by Sibley. Nevertheless, after a debate, we  
13 had a vote and it was the vote of the  
14 Palisades -- it was the view of the Palisades  
15 Citizens Association to endorse Sibley's  
16 proposal and that endorsement was given by the  
17 full association.

18 It was also tempered with the  
19 understanding that there were people who live  
20 close to the hospital, many of whom have been  
21 here tonight, who had some special concerns  
22 about what Laura had talked about, the

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 increased flow of traffic in the vicinity, the  
2 immediate vicinity of the hospital.

3 And so our resolution provided  
4 that we acknowledge the building of a parking  
5 garage, which we hoped would accommodate the  
6 increased traffic flow, and it also said as  
7 follows "Provided that Sibley will implement  
8 policies and programs to minimize traffic and  
9 environmental effects to include optimization  
10 of use of the Metro system and bus."

11 And as Sibley has done on many  
12 occasions when there have been issues in the  
13 community, some of which have become  
14 controversial and some of which are not  
15 controversial, Sibley approached this, I  
16 think, honorably and did what they could do to  
17 be sure that part and parcel of their  
18 submission to you all was a provision to have  
19 a shuttle bus which would interconnect with  
20 the Friendship Heights Metro Station.

21 So when we voted as a citizens  
22 association, we were not unmindful of the

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 views of our neighbors and, indeed, some of  
2 the views of friends who serve on the ANC  
3 about this. But we satisfied ourselves that  
4 the resolution that we passed was one which  
5 called upon Sibley to be sure that they met  
6 the concerns of those who were immediately  
7 adjacent and contiguous to those areas.

8 CHAIRPERSON MITTEN: I need you to  
9 wrap up, Mr. Ross, and then if Ms. Pagano  
10 wanted to take her three minutes to follow-up.

11 MR. ROSS: I am finished.

12 CHAIRPERSON MITTEN: Okay. Very  
13 good.

14 MR. ROSS: Thank you.

15 CHAIRPERSON MITTEN: Thank you.

16 MS. PAGANO: And in light of the  
17 hour, I think he summarized the Palisades  
18 Citizens Association position very well.

19 CHAIRPERSON MITTEN: Okay.

20 MS. PAGANO: Thank you.

21 CHAIRPERSON MITTEN: Thank you.

22 Sir, you are next.

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1                   MR. TREACY:    Good evening.    I'm  
2   Vince Treacy.    I'm here to represent Spring  
3   Valley West Homes Corporation speaking as a  
4   community in support of the Sibley Hospital  
5   proposal.

6                   By way of background, we're a  
7   little different than the Palisades.   We're  
8   actually a homeowners corporation that was  
9   established by the developer 20 years ago to  
10  provide for trash collection, snow removal and  
11  maintenance of streets to the 155 homes in our  
12  community.

13                  I first became aware of the Sibley  
14  proposal last year, studied it, attended ANC  
15  meetings and felt that they could use the  
16  input of our association and we sent a  
17  resolution of our board of directors to the  
18  ANC last spring.   We're incorporated under  
19  D.C. law as a nonprofit corporation.   We are  
20  operated by a board of directors and by our  
21  members.

22                  One of our stated corporate

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 purposes is to promote the health, safety and  
2 welfare of residents of Spring Valley. We  
3 have, after that meeting, then composed a  
4 letter that the board of directors sent to the  
5 Zoning Commission last September, approved  
6 unanimately by the board of directors. Our  
7 community, by the way, is located just south  
8 of Massachusetts Avenue at the junction of  
9 49<sup>th</sup> Street, between 49<sup>th</sup> and Dalecarlia.

10 Finally, the concerns were raised  
11 that the board was not representative of the  
12 members, so we brought this letter to the  
13 annual membership meeting of our entire  
14 association last week. And it was approved by  
15 the vote of the members after debate and  
16 discussion of our membership.

17 Now, I have set forth the reasons  
18 for our support in the letter, but because of  
19 the lateness of the hour, I will state that I  
20 feel that the hospital is a great asset to our  
21 area. We feel it is essential that it be  
22 allowed to maintain and grow its economic

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 viability. Having seen the demise of other  
2 hospitals, this is especially important.

3 We feel that these non-hospital,  
4 non-insurance-based revenues are essential if  
5 they are going to continue to provide superior  
6 service. We rely on the transportation  
7 studies that we have seen that the traffic  
8 impact will be reasonable and we support the  
9 Sibley application. Thank you.

10 CHAIRPERSON MITTEN: Thank you,  
11 Mr. Treacy. Ms. Lang?

12 MS. LANG: Good evening, Madam  
13 Chair and other Members of the Commission. I  
14 am Barbara Lang and I am President and Chief  
15 Executive Officer of the District of Columbia  
16 Chamber of Commerce. I also serve as the  
17 chairperson of the D.C. Work Force Investment  
18 Council. But tonight I am also a 20 year  
19 resident of Palisades and I live right on  
20 Macarthur Boulevard right down from Sibley  
21 Hospital, so I'm delighted to be here in all  
22 of those capacities this evening.

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 I'm here this evening to testify  
2 in support of the application of Sibley  
3 Hospital for approval to build a new medical  
4 office building and garage through the Planned  
5 Unit Development process. It is my  
6 understanding that a Zoning Amendment is  
7 required for this development.

8 The location of this new facility  
9 in the District is very important to the  
10 residents and to the patients. Because of the  
11 high cost of medical liability insurance and  
12 the malpractice environment that we have in  
13 the District, more doctors are leaving the  
14 District and relocating to the suburbs. And  
15 quite frankly, in my D.C. Chamber hat, we  
16 cannot afford to have anybody else leave and  
17 we cannot be competitive with the suburban  
18 environment.

19 This exodus is threatening patient  
20 access to quality health care. We need to do  
21 all that we can to encourage doctors to stay  
22 in our great city. It is my understanding

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 that the new Sibley facility will include  
2 space for doctors, a diagnostic imaging  
3 center, a surgery center, a pharmacy and an  
4 auditorium.

5 This project will help to keep  
6 doctors here serving our residents and, of  
7 course, we would like the suburban residents  
8 to come in and spend money in the District of  
9 Columbia. Never let it be said that is always  
10 a goal for me. But we want to keep that tax  
11 base in the District of Columbia.

12 The new facility will help keep  
13 the hospital competitive with a non-insurance-  
14 based dream. It will be a great community  
15 resource. It will provide jobs for District  
16 residents, a convenient place for doctors to  
17 practice and a convenient location for  
18 patients who need office visits and diagnostic  
19 tests in close proximity.

20 Part of my job at the D.C. Chamber  
21 of Commerce is to help promote economic  
22 development and improve the climate for doing

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 business in the District of Columbia. Doctors  
2 run businesses, make no doubt about that, as  
3 well as they provide services to residents.  
4 Helping businesses thrive is essential to  
5 keeping our economy strong.

6 This new medical office building  
7 will provide expanded services for residents  
8 and provide a new venue for more doctors to  
9 practice in the District. With a large number  
10 of retirements among medical staff, we should  
11 not ignore the importance of this opportunity  
12 for business growth.

13 I urge the Commission to approve  
14 Sibley Hospital's application and to allow  
15 this project to move forward. Thank you very  
16 much.

17 CHAIRPERSON MITTEN: Thank you.  
18 Ma'am?

19 MS. GOETCHEUS: Yes, my name is --

20 CHAIRPERSON MITTEN: I need you to  
21 turn that on.

22 MS. GOETCHEUS: My name is Janelle

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 Goetcheus. I'm a physician and have been  
2 practicing here in the District since 1976.  
3 I'm Medical Director of several nonprofit  
4 health services, Columbia Road Health Service,  
5 Christ House and Unity Healthcare, which has  
6 20 some sites around the District.

7 Throughout the years, Sibley has  
8 been a hospital that has been one that has  
9 been very, very intentional in reaching out to  
10 our health services, our nonprofit health  
11 services and asking what we can do to help  
12 you. When we first began Columbia Road Health  
13 Service, we had no place to get laboratory  
14 services. We had folks coming to us that were  
15 uninsured and we needed to get tests for  
16 anemia or for diabetes. We had no way to get  
17 these tests.

18 Sibley now does and has through  
19 the years done all of our laboratory studies  
20 free for any of our uninsured patients. In  
21 addition to these kind of services, they have  
22 also welcomed our admissions for uninsured

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 folks. One of our physicians is actually on  
2 staff at Sibley and works in our community  
3 health centers and brings the possibility of  
4 folks who are uninsured to be able to be  
5 hospitalized at that hospital.

6 Not only is it for inpatient  
7 services, but they have opened up so that we  
8 can get radiology. And I don't mean just  
9 playing films, I mean we get CAT scans, we get  
10 MRIs and these are for folks that are totally  
11 uninsured. We get consults from physicians,  
12 very excellent consults that our folks would  
13 never have access to.

14 We get all sorts of procedures,  
15 whether they be colonoscopies or these cardiac  
16 stress tests that we're able to get, because  
17 of Sibley. When I left to come here this  
18 evening, I was at one of our community health  
19 services, and I mentioned where I was coming,  
20 and you should hear the praise and you would  
21 hear it not just from our health services, but  
22 from all the nonprofit hospitals and health

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 services in terms of how Sibley has reached  
2 out to them.

3 And I could tell you story after  
4 story in terms of folks whose lives have been  
5 affected, folks who have gone in with -- we  
6 have been able to pick up early malignancies  
7 on them, gastric cancers that we picked up  
8 early enough, because we could get the  
9 studies, but we could also get the treatment  
10 for them.

11 Families that would have been --  
12 probably ended up homeless, because they were  
13 uninsured and the father wasn't able to work  
14 and went in to Sibley, I'll give you an  
15 example, with an infection in his leg and had  
16 to have long-term antibiotics, but because of  
17 that was now able to be -- able to sustain his  
18 family and to return to work.

19 It's story after that, one after  
20 another and it's not just us. Like I say, you  
21 can -- today was mentioned, these other health  
22 services, Mary's Center, the Columbia Road,

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 Spanish Catholic Center, a number of the  
2 nonprofit health services that they reach out  
3 to.

4 One of the surgeons on the Spanish  
5 Catholic Center is on the staff at Sibley.  
6 She takes all uninsured patients and this is  
7 for all of us. She will take our uninsured  
8 patients and do surgery for them totally free  
9 at Sibley Hospital. And so we are just  
10 extremely grateful. And as I say, I don't  
11 know of any hospital that has in a very  
12 intentional way reached out to us.

13 Not only that, when they discharge  
14 patients, it is one of the few hospitals that  
15 will provide medications for us until we can  
16 get folks on their various disabilities if we  
17 can. So they don't just send them out the  
18 door. They really make provisions for them.  
19 And I'm grateful and I think it's an untold  
20 story.

21 I don't think people here in the  
22 District know the ways in which Sibley has

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 reached out to the uninsured clinic folks here  
2 in the District. Thanks.

3 CHAIRPERSON MITTEN: Thank you.  
4 And thank you for bringing that story, because  
5 I'm one of the people who didn't know that.  
6 Sir?

7 MR. MARLOW: Madam Chair and  
8 Members of the Commission, I'm a physician who  
9 is here on behalf of Sibley Hospital. And I'm  
10 glad that the conversation is now talking  
11 about people who will use this facility,  
12 people who have heartbeats and away from  
13 traffic and brick and mortar.

14 CHAIRPERSON MITTEN: And your  
15 name?

16 MR. MARLOW: John Marlow, Dr.  
17 Marlow.

18 CHAIRPERSON MITTEN: Thank you.

19 MR. MARLOW: I'm a neighbor to  
20 Sibley. I live -- for the past 30 years I  
21 have lived within a mile and a half of Sibley.  
22 There are days when I drive by that hospital

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 two or three times. I was Director of Chief  
2 of Staff at Columbia Hospital for Women and a  
3 member of the board of trustees for Columbia.  
4 And I have witnessed the hospital who vanished  
5 from the community, which was a sad state,  
6 where Columbia was lost.

7 Part of the -- one of the elements  
8 of that was that physicians left that area.  
9 Partly there were malpractice issues and so  
10 on. But hospitals really depend upon two  
11 things, doctors and patients. And if the  
12 doctors are not there, it's not a hospital.  
13 And if the patients aren't there, it isn't a  
14 hospital.

15 The issue about shuttle traffic, I  
16 lectured up at the Geisinger Clinic in the  
17 middle part of Pennsylvania which has 3  
18 million patients who is in a very small town  
19 in the middle part of Pennsylvania. Those  
20 patients all come in by bus and it certainly  
21 takes longer than from Friendship to Sibley.  
22 They have a very big practice.

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1           So shuttle buses do work. It  
2 encourages people to use subways and buses and  
3 so on and I think that is very useful. My  
4 nurse comes every day by Metro.

5           The leadership at Sibley, I know  
6 them very well. They were administrators at  
7 Columbia before they went to Sibley, so I have  
8 known Mr. Sloan and Mr. Price for at least 30  
9 plus years. They are a very great resource in  
10 the community. Sibley is a very patient  
11 friendly hospital. I have patients who come  
12 to me from Europe and from New York and other  
13 cities to go to Sibley for their surgery.

14           So patients enjoy the care that is  
15 there. Volunteers, the nurses who are there,  
16 the ratio of nurses to patients is excellent.  
17 I have privilege at GW and Georgetown. I'm a  
18 clinical professor at GW and an associate  
19 professor at Georgetown, so I'm very familiar  
20 with the community.

21           I think it's very important. We  
22 all can be patients and perhaps some of you

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 have. My family has been, my two sons were  
2 born at the Columbia Hospital, but they have  
3 had reason to go to the emergency room. And  
4 distance is a problem. If you want to talk  
5 about traffic, just try to get through  
6 Georgetown in the middle of the day.

7 As a surgeon, if I have a case,  
8 getting out of the parking lot is sometimes a  
9 problem. I'm downtown at 24<sup>th</sup> and M and to  
10 try to get out of the parking lot to get  
11 through Georgetown to get to Sibley. So  
12 having an office adjacent to the hospital is  
13 very attractive. They can get their tests.  
14 I don't have to refer them across town to  
15 other doctors.

16 They can have the diagnostic  
17 tests. They can see other consultants. And  
18 all of the major institutions have doctors in  
19 close proximity to the hospital. It's a  
20 benefit to both the patient and to the  
21 physician. And if it were available, I would  
22 move there today. I'm familiar with these

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 other facilities, because I have just recently  
2 looked at other office space. And having  
3 looked at, trying to get in and out of parking  
4 in some of these buildings is a real  
5 nightmare.

6 That is one advantage of the  
7 Sibley Hospital is that there are the capacity  
8 for patients to come either by a shuttle bus,  
9 which I think would be attractive to a number  
10 of my patients, as well as with the parking  
11 that is proportional to the patient and  
12 physician flow. I support this proposal very  
13 strongly. Thank you.

14 CHAIRPERSON MITTEN: Thank you.  
15 Questions from the Commission for the panel?  
16 Any questions? Mr. Tummonds, any questions?  
17 ANC any questions? Commissioner Thompson, any  
18 questions for the panel? Mr. Spector, any  
19 questions for the panel? Okay. Thank you all  
20 for coming down tonight.

21 Anyone else who would like to  
22 testify in support?

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 MR. DIEM: Yes.

2 CHAIRPERSON MITTEN: We have lots  
3 of chairs. Anyone else who wants to testify  
4 in support? Okay.

5 MR. DIEM: Madam Chairman, Members  
6 of the Commission, given the lateness of the  
7 hour, I'm going to try to be very, very brief.  
8 Good evening. My name is Andrew Diem. I live  
9 at 5230 Loughboro Road directly across from  
10 Sibley's main entrance right at the traffic  
11 light entering the hospital.

12 I am an architect. I'm a member  
13 of the Palisades Citizens Association. And I  
14 have lived on Loughboro Road for over 20  
15 years. I have met with Sibley officials  
16 regarding this project and I have attended  
17 many, if not all, of the numerous sometimes  
18 running very late presentations that Sibley  
19 has made to the ANC-3D and the Palisades  
20 Citizens Association regarding the proposed  
21 medical office building and garage.

22 I am here this evening to express

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 my support for the project. As a resident of  
2 Loughboro Road directly across from Sibley, I  
3 am potentially one of the most impacted  
4 neighbors by this project. However, I do not  
5 believe that the introduction of a medical  
6 office building on Sibley's campus will  
7 adversely affect my daily life.

8 I live across the street from a  
9 wonderful community hospital, who I have had  
10 occasion to use on several opportunities. In  
11 my opinion, a medical office building on  
12 Sibley's property is not going to change the  
13 residential character of my neighborhood. The  
14 medical office building is pushed to the rear  
15 of Sibley's campus as far from Loughboro Road  
16 as possible and it has been reduced in height.

17 The building will not cast shadows  
18 on any residential buildings in the area. The  
19 height of the building is entirely consistent  
20 with Sibley's other buildings, specifically  
21 Hayes' Hall. In all the community meetings I  
22 have attended, the question of traffic seems

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 to be the issue that causes people the most  
2 concern.

3 As a resident of Loughboro Road,  
4 this is also an important issue for me.  
5 However, I do not believe that the proposed  
6 medical office building is going to make much,  
7 if any, appreciable impact on the amount of  
8 traffic that I will see in my neighborhood.  
9 Our biggest traffic problems are related to  
10 commuters that cut through our neighborhood  
11 during the morning and afternoon rush hour  
12 periods.

13 The introduction of additional  
14 cars coming to the medical office building is  
15 not going to be terribly perceivable. I  
16 believe the figures were 4 percent. More  
17 importantly, I do not want to see a minimized  
18 or less effective medical office building  
19 constructed on Sibley's campus so that we can  
20 provide a more efficient way for commuter  
21 traffic to cut through our neighborhood.

22 I have read the District

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 Department of Transportation report in this  
2 case and I agree with their expert opinions  
3 that the traffic impact on this project will  
4 not --

5 CHAIRPERSON MITTEN: I need you to  
6 close it out.

7 MR. DIEM: -- adversely impact the  
8 traffic conditions in the neighborhood. Thank  
9 you very much for your patience with me.

10 CHAIRPERSON MITTEN: Thank you,  
11 Mr. Diem. Any questions for Mr. Diem? Mr.  
12 Tummonds? ANC, any questions? Mr. Spector,  
13 any questions for Mr. Diem? Okay. Thank you  
14 very much.

15 MR. DIEM: Thank you very much.

16 CHAIRPERSON MITTEN: Okay. So  
17 just to recap. When we reconvene on  
18 Wednesday, February 21<sup>st</sup>, at 6:30 in this  
19 room, we will begin with the ANC presentation.  
20 Hopefully, with a computer that can read a CD.  
21 And come a little bit early and you can get it  
22 all set up. And then we will take the party

**NEAL R. GROSS**

COURT REPORTERS AND TRANSCRIBERS  
1323 RHODE ISLAND AVE., N.W.  
WASHINGTON, D.C. 20005-3701

1 in opposition and organizations and persons in  
2 opposition. And then the rebuttal and closing  
3 by the applicant.

4 MR. TUMMONDS: Yes.

5 CHAIRPERSON MITTEN: So thank you  
6 all. And we will see you then.

7 MR. TUMMONDS: Thank you.

8 (Whereupon, the Public Hearing was  
9 concluded at 10:41 p.m.)

10

11

12

13

14

15

16

17

18

19

20

21

22