



City of Seattle  
 Seattle Department of Neighborhoods  
 Bernie Matsuno, Director

**SWEDISH MEDICAL CENTER CHERRY HILL CAMPUS MAJOR INSTITUTIONS  
 MASTER PLAN CITIZEN'S ADVISORY COMMITTEE**

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MAJOR INSTITUTIONS  
MASTER PLAN CITIZEN'S  
ADVISORY COMMITTEE

**Committee Members**

Katie Porter, Chair  
 Ashleigh Kilcup  
 Leon Garnett  
 Dylan Glosecki  
 Maja Hadlock  
 Raleigh Watts  
 J. Elliot Smith  
 Laurel Spelman  
 Linda Carrol  
*Swedish Medical  
 Center Non-  
 management  
 Representative*

Patrick Angus  
 David Letrondo

**Committee Alternates**

James Schell  
 Dean Patton

**Ex-officio Members**

Steve Sheppard  
*Department of  
 Neighborhoods*

Stephanie Haines  
*Department of  
 Planning and  
 Development*

Andy Cosentino  
*Swedish Medical  
 Center Management*

Cristina Van Valkenburgh  
*Seattle Department of  
 Transportation*

**DRAFT Meeting Notes**  
**Meeting #30**  
**March 12, 2015,**  
 Swedish Medical Center  
 Swedish Cherry Hill Campus  
 Cherry Hill Auditorium

**Members and Alternates Present**

Katie Porter	Dylan Glosecki	Ashleigh Kilcup
James Schell	Patrick Angus	David Letrondo
J Elliot Smith	Raleigh Watts	Dean Patton

**Members and Alternates Absent**

Maja Hadlock	Laurel Spellman	Linda Carrol
Leon Garnett		

**Ex-Officio Members Present**

Steve Sheppard, DON	Stephanie Haines, DPD
Andy Cosentino, SMC	Christina VanValkenburgh

*(See sign-in sheet)*

**I. Housekeeping**

The meeting was opened by Katie Porter. Brief Introductions followed. Steve Sheppard reminded members to review the minutes. He noted that with weekly meetings they are a couple of meeting behind.

Mr. Sheppard noted that the Committee has been reconsidering former votes. He asked that when doing so, members identify their rationale for proposing changes and what information has changed their minds on the issue. This will allow him to better summarize the positions in the Committee's final report. stated that

**II. Discussion of Transportation Issues**

Swedish Medical Center consultants were introduced to discuss issues related to transportation issues raised at previous meetings. The focus of the presentation is an overview of development levels, timing and its impacts on traffic generation.

Trip generation is based on the campus population and not on the amount of square footage generated. Different uses in buildings generate different populations

For disclosure, the EIS and other documents identify the worst case. There are numbers to mid-term and 2040. Implementation of most mitigation is actually tied to each master use permit. DPD would evaluate the situation and determine what mitigation was appropriately tied to that project. The impacts are measured against the SOV goals in place at that time. As a result earlier phases would be measured against a high goal and latter against the lowered goals. The goals ramp down from the current 58% towards the long-term target of 38%. It takes time to change culture and that is the reason that the goals ramp down over time.

Some improvements are tied to the first project, including curb-bulbs, the traffic signal at 16<sup>th</sup> and Cherry, the neighborhood greenway, and a dock management plan. The timing of other mitigation items will be determined based upon when projects come in and if the institution has met the SOV Goals. The ongoing Integrated Transportation Board is a very important part of Swedish Medical Center's Transportation Management plans.

One of the key questions raised previously dealt with the establishment of the long-term SOV Person Trip rates. Staff presented the following table showing the effects of reductions in trips related to the reduction in SOV rates.

Staff/Population (Existing FEIS)<sup>1</sup> 2,980  
 Staff/Population (Short-Term)<sup>1</sup> 4,405  
 Staff/Population (Full Build)<sup>1</sup> 5,820

Year		SOV Reduced 1.5% Every 2 Years	SOV Person Trips	SOV Reduced 3% Every 2 Years	SOV Person Trips	Notes
Existing/FEIS	2014	58.0%	1,729			Slightly more than calculating 58% of 2990 due to rounding (matches FEIS).
	2015	50.0%	1,490	50.0%	1,490	
	2016	50.0%	1,490	50.0%	1,490	Implementation of Short-Term 2023 Project (Staff = 4,405) / Slight higher than 50% of 4,405 due to rounding (matches FEIS). This does not reflect phasing of the 2023 short-term development, which could as early as 2017 with the 18th Avenue building.
	2017	50.0%	2,204	48.0%	2,116	
	2018	48.5%	2,138	48.0%	2,116	
	2019	48.5%	2,137	46.0%	2,028	
	2020	47.0%	2,071	46.0%	2,028	
	2021	47.0%	2,071	44.0%	1,940	
	2022	45.5%	2,005	44.0%	1,940	
	2023	45.5%	2,005	42.0%	1,852	
	2024	44.0%	1,939	42.0%	1,852	
	2025	44.0%	2,561	40.0%	2,328	
	2026	42.5%	2,474	40.0%	2,328	
	2027	42.5%	2,474	Target: 38%	2,212	
	2028	41.0%	2,386	Target: 38%	2,212	
	2029	41.0%	2,386	36.0%	2,095	Full Build - 2025 date chosen for comparison only. No plans provided by Swedish for phasing related to population between 2023 and 2040.
	2030	39.5%	2,299	36.0%	2,095	
	2031	39.5%	2,299	34.0%	1,979	
	2032	Target: 38%	2,212	34.0%	1,979	
	2033	Target: 38%	2,212	32.0%	1,862	
	2034	37.5%	2,183	32.0%	1,862	
	2035	37.5%	2,183			
	2036	36.0%	2,095			
	2037	36.0%	2,095			
	2038	34.5%	2,008			
	2039	34.5%	2,008			
	2040	33.0%	1,921			
	2041	33.0%	1,921			

1. Includes hospital, clinics/research, education, long-term, and other support staff; does not include hotel staff.

The figures are based upon anticipated population and mode split.

Katie Porter asked what the effect a reduction in space related to the reduce height might be on the trip generation figures. The transportation consultant stated that it would depend the uses displaced. Andy Cosentino added that the height reduction would likely result in loss of about 96 beds and a possible decision to forgo expansion of critical care functions.

In response to questions from members, the transportation consultant stated that the amount of parking provided does affect the total traffic generated. There are short and long-term impacts related to when parking is made available. Again the amount of parking provided is tied to each specific project review. Parking is expensive and overbuilding parking is unlikely.

There was brief discussion of the differences between the CTR figures and other evaluations.

Katie Porter asked DPD and SDOT to discuss their reasons for establishing a target of 38% rather than some lower figure. She noted that the Committee has suggested 32% goal. Cristina VanValkenburgh stated that this came from an analysis in the EIS. I was determined that this would be rigorous but achievable. It is not production to have an unachievable goal. Ms. Porter responded that this seemed to be an abrogation of the role of the City to push lower SOV use. She noted that this is a 25 year target and that a more aggressive target would be desirable. Stephanie Hines reiterated that goals should be achievable.

Patrick Angus noted that traffic is increasing throughout the area related to ongoing land-use changes. Many neighborhoods no longer have off-street parking because they have converted garage space to rental units. The City has allowed accessory units and the replacement of single family homes with townhouses. There is obviously a conflict between providing parking and thus encouraging employees to drive to the hospital and TMP SOV reduction goals. Staff noted that the analysis take into account the increasing background traffic.

Raleigh Watts noted that levels of service at many of the intersections in the area are problematic and that the situation is not anticipated to improve with the mitigation provided. Staff responded that there may be other routes that are more favorable in the future.

Katie Porter noted that the key issue that was before the committee was whether to decrease the SOV goal at a rate of 1.5% every two years or 2% every two years. Staff noted that this pushes up the date for achieving the 38% target from 2032 to 2027. It was noted that the chart indicated the effect of expansion on campus during the first phase at 2017. That is why the total trips increase in year three. A similar situation occurs with anticipated whole build out in 2025. Katie Porter noted that the Committee's goal is a SOV rate of 32%. Under the 1.5% reduction rate that goal is not reached anytime in the foreseeable future. With a 2% reduction rate it is reached in 2032. Dylan Glosecki stated that a rigorous goal is very important.

Stephanie Haines noted that there are important differences between the proposed transportation management plan and past practice. One of the major differences is the change of the Transportation Management Plan to cover all uses on campus and the incorporation of new monitoring techniques. She and Cristina VanValkenburgh noted future City-wide efforts to affect mode split and encourage residents to use other forms of travel.

There was brief follow-on discussion during which most members expressed support for both a more aggressive goal and a more rapid deduction over time.

Patrick Angus moved:

That the SOV use goal for the Swedish Cherry Hill Campus should be 32% and that it should be reduced from the 50% goal for year one and two by 2% every two years.

The motion was seconded by Dean Patton.

The question was called and the Committee polled. The votes were as follows:

Ashleigh Kilcup	Yes
James Schell	Yes
Dean Patton	Yes
Elliot Smith -	Yes
Raleigh Watts -	Yes
Dave Letrondo -	No
Dylan Glosecki -	Yes
Patrick Angus	Yes
Katie Porter -	Yes

The vote was 8 in favor, 1 opposed. A quorum being present and a majority of those present having voted in the affirmative the motion passed.

### III. Public Comment

**Comments of Murray Anderson** - Mr. Anderson stated that parking is peripheral to traffic. He asked for clarification concerning who did and did not qualify for parking and what the pricing structure would be. He noted that it is the gross number of trips and not the percentage. You need to establish goals that actually reduce the number of trips. Seattle manages traffic by creating congestion. Streets are being reduced in lanes. This is not being proposed for 23<sup>rd</sup> Avenue. Where will this traffic go to? He noted that he sees signs all over campus and that they are credited to Sabey not Swedish Medical Center.

### IV. Continued Discussion on Setbacks

Raleigh Watts stated that he was concerned that various major employers and institutions received support from the taxpayer without providing sufficient contributions. He proposed the following as a possible Committee recommendation in its final report.

#### Regarding Transit Capacity

As part of the review of master plan projects, the transit analysis shall include an analysis of the impact to public transit ridership on Metro routes that travel within ½ mile of the institutions. If the master Plan project is expected to contribute to ridership such that capacity is exceeded on any route, the institution will be asked to contribute a proportion of the cost of adding the necessary capacity. This provisions shall only be required of the institution if, at the time of the review, it is consistent with City policy for requiring comparable major institutions to contribute to public transit capacity.

Dylan Glosecki added that the proposed specific requirements as an augmentation to the above. His recommended wording was:

### **Travel Time Review and Mitigation**

A three plus minute increase in PM travel time on James Street from Broadway to 6<sup>th</sup> is expected in 2040 if development occurs on campus per alternative 12 (Table 3.17-13 and 3.7045 of the EIS). Considering this significant increase in travel time, the institution should work with Metro and SDOT to mitigate this impact on bus routes and other transit that serve the campus and surrounding neighborhood. Mitigations could include funding to SDOT and Metro to study plan and implement upgrades to transit infrastructure to decrease the time required for buses and other transit to get downtown from the Swedish Cherry Hill Campus.

Katie Porter asked Christina VanValkenburgh whether the latter was consistent with City policy. Ms. VanValkenburgh responded that the City does not normally require that institutions purchase service or provide funds for service. Capital investments have been required. This would set new precedent. Assessing the impact on travel time is not a problem. However, it would be better to defer a determination of proper mitigation for increased travel times until the point at which the actual impact is identified and it can be attached as a requirement to a specific project. She noted that she had discussed this with the City's transportation planners who did not feel it was appropriate.

Patrick Angus noted that Children's does contribute to transit service. Staff noted that this is voluntary. Ms. VanValkenburgh noted that Swedish and others already participate in the funding of certain routes. They provide 1/3 of the cost of this service. However it is voluntary. Dylan Glosecki responded that the institution is asking a great deal from the neighborhood and that he is trying to identify what the institution could give back. Stephanie Haines suggested minor changes to the statements above.

The transit capacity analysis statement (part one above) was moved and seconded. The Committee was polled by show of hands. The vote was 9 in favor, none opposed. The motion passed.

Mr. Glosecki withdrew the Travel time Review and Mitigation proposal. He stated that he would consider bring back a revised version at a future meeting.

Mr. Watts introduced a second suggested recommendation as follows:

#### **Regarding Cut-Through Traffic Mitigation**

As part of the review of master plan projects, the transportation analysis shall include an analysis of the existing cut-through traffic impact on non-arterial streets related to employee, delivery, and visitor vehicles. This analysis will cover at least 16<sup>th</sup> Avenue and 18<sup>th</sup> Avenue between Jefferson and Dearborn streets and other streets prioritized by the Squire Park Neighborhood council and other adjacent councils. If cut-through impacts are identified that could worsen as a result of the proposed project, the institution will be required to support mitigations proportionate to the institution's impact. Mitigations could include providing funding to neighborhood councils to identify, plan and

implement the appropriate traffic calming or diversion strategies in coordination with DPD and DON.

Members suggested minor changes. Katie Porter asked that pedestrian and bicycle safety be included. Dylan Glosecki suggested a slight broadening to area. After slight further discussion of minor changes Cut through Traffic Mitigation statement was moved as follows:

#### **Cut-Through Traffic Mitigation**

In order to maintain and improve pedestrian and bicycle safety and reduce the impact of cut-through traffic on nearby residents, as part of the review of master plan projects, the transportation analysis shall include an analysis of the existing cut-through traffic impact on non-arterial streets related to employee, delivery, and visitor vehicles. This analysis will cover at least 15<sup>th</sup> Avenue and 20<sup>th</sup> Avenue between Jefferson and Jackson streets and other streets prioritized by the Squire Park Neighborhood council and other adjacent councils. If cut-through impacts are identified that could worsen as a result of the proposed project, the institution will be required to support mitigations proportionate to the institution's impact. Mitigations could include providing funding to neighborhood councils to identify, plan and implement the appropriate traffic calming or diversion strategies in coordination with DPD, DON and SDOT.

The cut through traffic mitigation statement was moved and seconded. The Committee was polled by show of hands. The vote was 9 in favor, none opposed. The motion passed.

Dylan Glosecki was asked to summarize possible re-wording for his previous statement. After brief discussion it was suggested that the following statement be added to the end of the Transit Capacity recommendation as follows;

Additional mitigation shall be determined at time of each master use permit application with the goal of increasing transit capacity and use.

The added wording above was moved and seconded. The Committee was polled by show of hands. The vote was 9 in favor, none opposed. The motion passed.

#### **V. Possible Information that would be Helpful in confirming final Setback Recommendations**

Katie Porter asked members to identify information that would be requested from the Institution. The following was requested:

- 1) Illustrations that show the height sections in relationship to adjacent development heights across from the Campus.

Mr. Jex responded that he had anticipated this request and provided the above to members for their review prior to the next meeting. He briefly went over the sections.

#### **V. Next Meeting Date and Adjournment**

Mr. Sheppard noted that next week's meeting has been moved from Thursday to Wednesday due to lack of room. He also noted that you would have the Final Report of the Director of

the Department of Planning and Development at that point. He noted that the Hope would be to wrap up all decisions by March 26. There may be an April 2 meeting just to wrap up. No further business being before the Committee the meeting was adjourned.