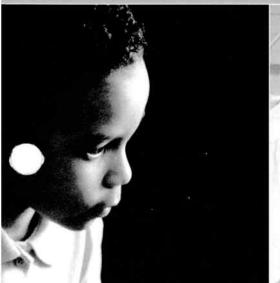


SWEDISH MEDICAL CENTER FIRST HILL CAMPUS

FINAL MAJOR INSTITUTION MASTER PLAN 14 MARCH 2005



City of Seattle Department of Planning and Development









FINAL

MAJOR INSTITUTION MASTER PLAN (FINAL MIMP)

14 MARCH 2005

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1. Introduction

A. Background/Purpose/Process

The current Swedish master plan was adopted by Ordinance 111993 in November 1984, with subsequent amendments. Most contemplated development has been completed. All hospital and clinical/medical office space of the development program has been developed which prevents Swedish from replacing aging facilities, and meeting building and programatic needs. Research space remains, but that was originally intended for the Fred Hutchinson Cancer Research Center (FHCRC) who relocated from the First Hill campus to South Lake Union. The renewed MIMP is intended to replace the current master plan. The focus is to update the development program component to further the Swedish mission and the First Hill campus vision. The development standards and transportation management program will be reviewed as well during the process.

Swedish Medical Center is proceeding with a new major institution master plan (MIMP) for the First Hill campus, consistent with all applicable City of Seattle requirements. The purpose of the master planning entitlement work is to fulfill all City of Seattle requirements in an efficient, collaborative process with stakeholder input that shapes the most appropriate Swedish First Hill campus development and mitigates identified impacts. This Final MIMP is issued with an accompanying Final Environmental Impact Statement (Final EIS).

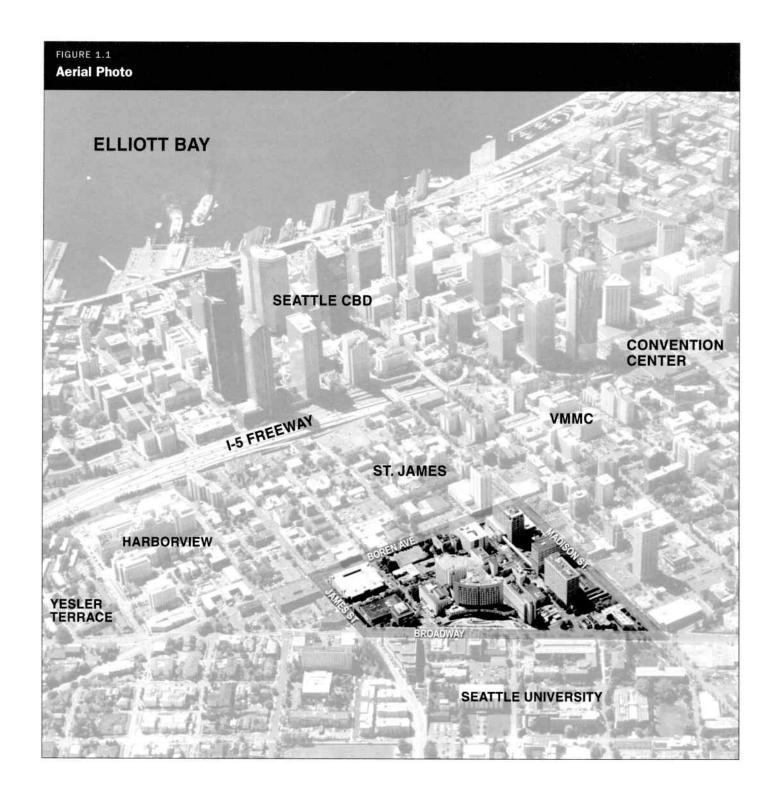
Key milestones in the process to date include:

- A 'Notice of Intent' to prepare a new master plan was submitted by Swedish to the City of Seattle Department of Planning and Development (DPD) on December 10, 2003.
- The MIMP Application concept plan was submitted to DPD on March 26, 2004. Swedish also worked with the Department of Neighborhoods (DON) to assist with the formation of a new Citizen Advisory Committee (CAC).
- DON advised CAC candidates of the recommended appointments on May 13, 2004. The recommended membership of the CAC was forwarded to the City Council by DON.
- The environmental review process was initiated with DPD publishing the Determination of Significance (DS) Threshold Determination on May 6, 2004.
- The first CAC meeting was held on May 24, 2004 for orientation, to review the MIMP Application concept plan and to provide input to the environmental analysis scoping.
- Public Scoping of the environmental impact statement (EIS) occurred during May and June including a public scoping meeting held on May 26, 2004.
- Additional CAC meetings on June 16, 2004 and July 14, 2004 were held to further discuss the Swedish proposal and neighborhood implications.

- A preliminary version of the Draft MIMP and Draft EIS were reviewed by the CAC in August and September 2004 and resulted in changes to the Master Plan proposal and the documents.
- A "proof copy" of the Revised Draft MIMP and Revised Draft EIS was reviewed and discussed by the CAC in October 2004 and resulted in further changes.
- The Draft MIMP and Draft EIS were issued to the public on November 15, 2004.
- A public hearing was held on December 15, 2004.
- The CAC held additional meetings on November 10, 2004 and December 8, 2004 to review and comment on the Draft MIMP and Draft EIS.
- DPD reviewed comments received and determined the appropriate format and content of the Final MIMP and Final EIS in January 2005.
- A preliminary copy of the Final MIMP and Final EIS was prepared and submitted to DPD and the CAC on January 31, 2005.
- Additional CAC meetings were held on January 12, 2005, February 9, 2005, and March 9, 2005. (March meeting may be postponed).
- Review comments resulted in modifications to the documents and preparation of a revised set for DPD approval.
- The current milestone of the process is the public issuance of the Final MIMP and Final EIS on March 14, 2005.

Also see Appendix B: Process Milestones for a complete listing of events and dates associated with the MIMP and EIS process.

Figure 1.1 is an aerial photo of the Swedish Medical Center First Hill campus and its First Hill and downtown context. The master plan concerns the Swedish Campus area bounded by Boren-Madison-Broadway-James which corresponds with the Major Institution Overlay (MIO) District.



B. Swedish Mission

The mission of Swedish Medical Center is to improve the health and well-being of each person served. The nearly century old Swedish tradition of medical excellence spans the entire continuum of healthcare and extends far beyond hospital services. Swedish provides state-of-the-art care to patients of every age and stage of life for virtually every healthcare need. Swedish is recognized not only for the scope of its services, but for the caliber of its physicians and its highly skilled nurses, professional, and other staff. Year after year, Swedish has been recognized as the most trusted name in healthcare. In independent surveys conducted by the National Research Corporation, King County residents consistently rank Swedish Medical Center as the area's most preferred hospital, with the best overall quality, most personalized care, the best doctors and nurses, and the best care in a variety of specialty areas.

As a private, nonprofit organization, Swedish has the opportunity and responsibility to make significant contributions to the health of its community. Swedish upholds this responsibility by reinvesting profits back into the community and ensuring that healthcare needs are met through means such as charity care, education, and community health programs. Swedish is committed to making quality healthcare available to all members in our communities, regardless of their ability to pay. In 2003, Swedish donated over \$33 million in charity care and community benefits.

In order to continue to provide the highest quality and most comprehensive care to the community, Swedish must replace facilities included in the proposed new MIMP.

C. Healthcare Needs & Master Plan Goals/Objectives

Building Needs

An assessment of the existing medical center at the First Hill Campus reveals a number of buildings that are nearing the end of their useful life with structural, mechanical and functional limitations. Necessary improvements include floor-plates sized and structured to create unobstructed areas necessary for long term functionality; adequate floor-to-floor heights; replacement of aging mechanical and electrical systems; and improved infection control capabilities to reflect escalating isolation and emergency preparedness needs.

Programmatic Needs

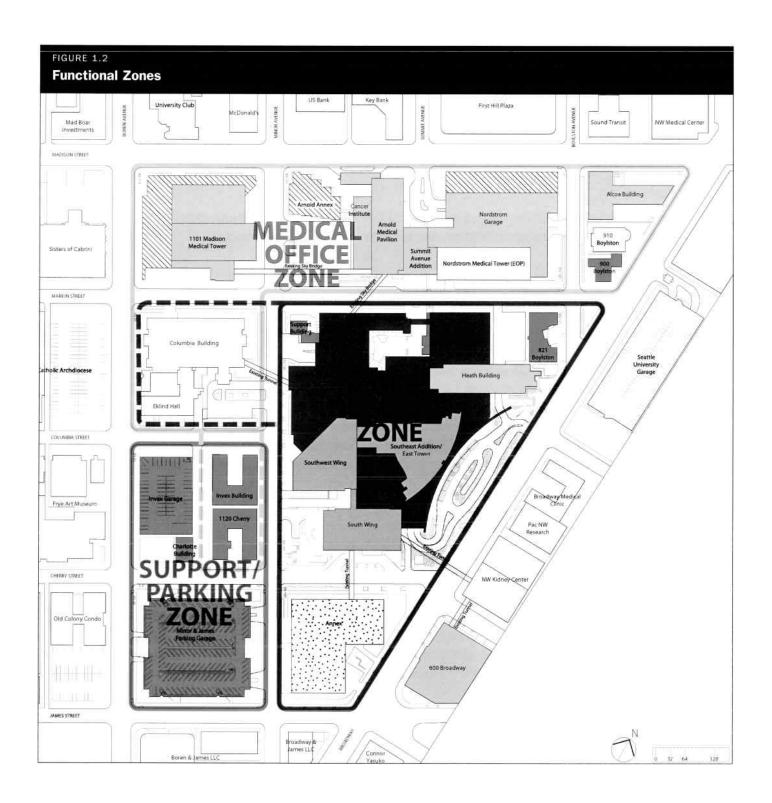
Healthcare, including state-of-the-art healthcare technology, is rapidly advancing from year to year. Significant new discoveries in biomedical science and healthcare services are occurring faster now than at any time in our history. The projects included in this master plan are vitally necessary for Swedish to stay at the leading edge of these advances and continue to provide the highest level of healthcare services to the community. The need to respond to evolving community healthcare needs, new medical technologies, changes in clinical practice, and demographic and population swings drive optimum flexibility in the facility construction. Current facilities need to be replaced by new buildings capable of accommodating contemporary and future medical services. The proposed MIMP includes the replacement and accommodation of several existing buildings that have been identified as limited in their usability, as well as considers possible future programmatic uses for these areas.

Patient-Centered Campus Organization

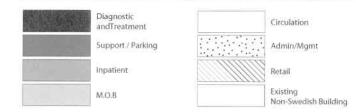
Swedish Medical Center, First Hill Campus, is generally organized into zones in which one type of function (such as medical office buildings, acute-care hospital facilities, service or support, and parking) predominates. The benefits of further consolidating like or related functions in close proximity to one another would improve quality of care and patient safety. Zoning would also enhance clarity and ease of patient flow, ability to share supporting functions, and efficiency for staff providing materials, support or services to functional areas. The MIMP is meant as a tool for envisioning improved functional zoning and circulation and defining a coherent organizational structure to improve healthcare delivery. Figure 1.2 depicts the functional zones of the First Hill Campus.

Community-Campus Linkages

Beyond providing state-of-the-art facilities and technologies to ensure high-quality care, Swedish strives to create a physical environment that connects with the community. Through the proposed new MIMP, Swedish will provide a place that is welcoming and appealing to patients, employees, and other community partners. The vision of the campus proposes the concept of many "faces" to the community. This design would promote openness to the community; create entrances from all sides; and create a sense of campus coherency. The proposed MIMP also includes new campus open spaces: places intended to collect people and sunlight; connect spaces to edges; and symbolically represent a place for healing.



KEY TO FIGURE 1.2



Medical Office Zone

Primary Services:

- · Physician office suites
- · Ambulatory care services
- · Outpatient parking
- Outpatient and neighborhood retail amenities
- · Research

Core Hospital Zone

Primary Services:

- · Inpatient care nursing units
- Hospital-based diagnostic and treatment services
- Hospital-based / patient care - related support functions

Support / Parking Zone

Primary Services:

- · Central plant services
- Central materials management services
- · Parking

Note: 1101 Madison, 600 Broadway, Arnold - 9th floor and above, and retail recently sold to Health Care Property Investors, Inc. (HCPI).

D. First Hill Campus Vision

Swedish is renewing the First Hill campus development vision to reflect what Swedish seeks to accomplish over the next 15 years and beyond. Swedish assessed existing facilities and functions, quantified space needs, tested growth scenarios, and has defined planned and potential projects.

The development objectives for the Swedish First Hill campus are:

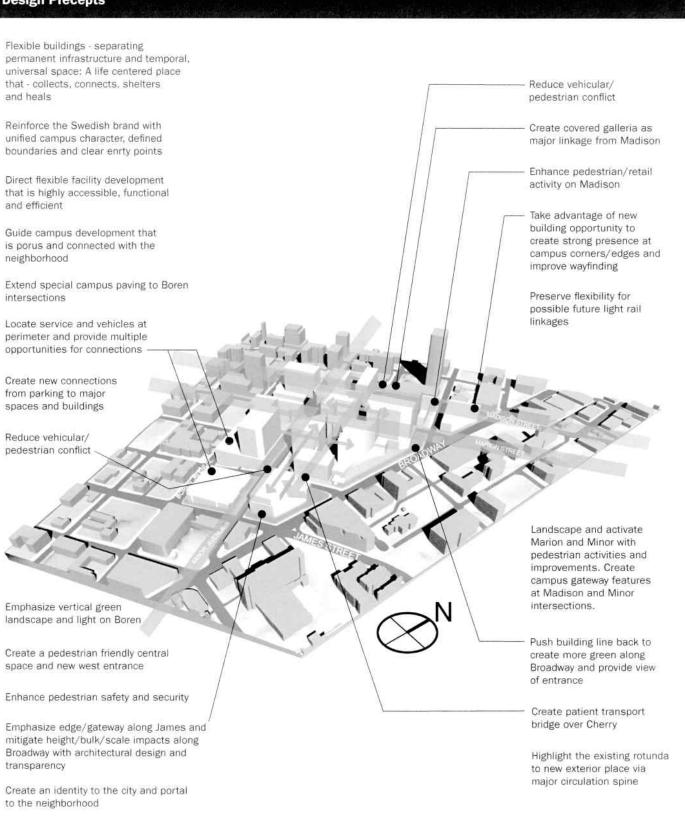
- · Replace aging facilities that are increasing in obsolescence.
- Direct facility development that is highly accessible, with optimum function, efficient and extremely flexible to meet changing community healthcare needs.
- Reinforce the Swedish brand in an improved patient-centered campus that functions appropriately, relates to its location, and creates a physical environment that connects with the community.
- Mitigate growth impacts and achieve compatibility with the First Hill neighborhood and downtown urban center.
- Secure City of Seattle MIMP regulatory entitlements and community support to permit the phased improvements.

In addition to the aggressive waste stream management and reduce/reuse/recycle programs at Swedish, sustainability initiatives are desired for creating high performance healing environments. The Swedish First Hill campus vision includes a commitment to the intent of evolving LEED and similar guidelines for sustainable healthcare facilities. Specifically, master plan projects will consider the "Green Guidelines for Healthcare Construction," December 2003 Version 1.0 PC, published by the American Society for Healthcare Engineering (ASHE). Note that Version 2.0 Pilot was released in November 2004.

Figure 1.3 depicts the Swedish campus vision and lists a number of design principles or 'precepts.' The overall vision is an urban medical campus connected with the community it serves. Most development intensity is concentrated at the core, with transitions toward the campus edges. The campus is intended to be highly accessible and 'permeable' with improved pedestrian connections along Marion and Minor. The Madison Street commercial pedestrian corridor is to be reinforced. Landscaped open spaces will improve the Broadway, James and Boren frontages. Integral campus way-finding will be simplified and strengthened. The design precepts are the key ingredients of a proposed campus wayfinding plan, intended to improve both internal and external movement and orientation. Swedish proposes that the design precepts be implemented and applied to each building project as it is implemented through the Master Use Permit process. Specifically, each project would implement its block frontages portion of the campus improvement. A Wayfinding Plan with Design Guidelines will also be prepared by Swedish that would improve campus functions.

FIGURE 1.3

Design Precepts



2. Development Program

A. First Hill Campus

Neighborhood Context/Other Major Institutions

Swedish is located within the urban, medium density First Hill Neighborhood of Seattle's city center with a mixture of residential, retail/commercial, and institutional activities. The location is adjacent to the downtown Seattle core and is an employment and residential center (designated as the First Hill/Capitol Hill Urban Center in the Seattle Comprehensive Plan). The neighborhood is the home of four of Seattle's major institutions; Virginia Mason Medical Center, Seattle University, and Harborview Medical Center, are all located within a 2-block radius from Swedish Medical Center. Figure 2.1 shows the vicinity and nearby major institutions.

The wide diversity of existing land uses includes: retail and commercial particularly along the Madison Street corridor, multi-family residential (senior/nursing/low-income/high-income/subsidized/market-rate housing), an art museum, a high school and religious facilities. The character of development is also varied ranging from old apartments, historic landmarks, high-rise residential towers, low-rise apartments, and major institutions. Parking lots are near the freeway and serve commuters to downtown and First Hill.

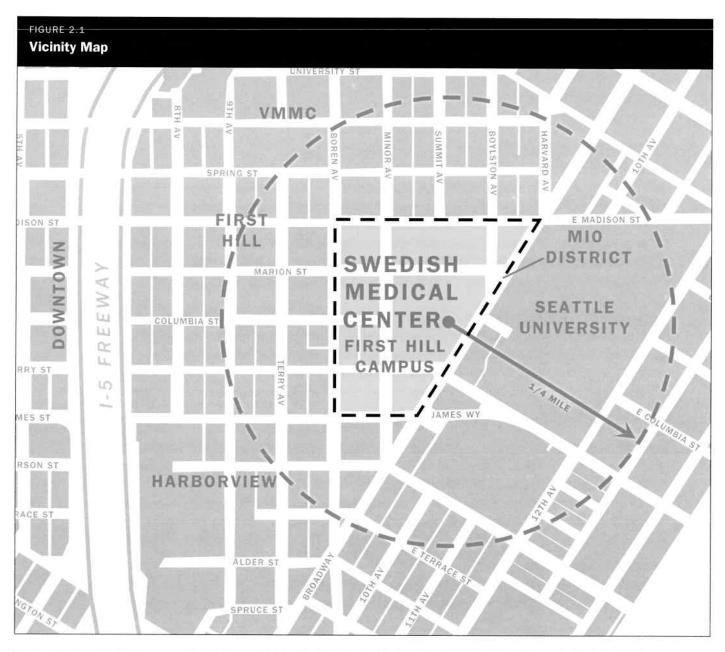
Swedish is located at the crest of First Hill which slopes down to the west to downtown, down to the east to the Madison valley, down to the south toward the Yesler Terrace, and down to the north to the Broadway/Capitol Hill district. The interstate freeway (I-5) provides direct access via James Street and Madison Street to Swedish and also separates First Hill from downtown. Boren Avenue and Broadway are arterials bordering Swedish that provide north-south access.

Swedish Property Ownership

Swedish owns some eleven city blocks of property that comprise its First Hill campus within the trapezoidal area bounded by Boren-Madison-Broadway-James. Swedish owns all the property except for:

- The block bounded by Marion-Minor-Columbia-Boren (Seattle Life Sciences Center),
- · 910 Boylston (small medical office),
- The Nordstrom Medical Office Tower (building is condominium ownership), and
- · Public right-of-ways.

Swedish owns a parcel east of Broadway outside the MIO District (600 Broadway) that is medical office. Swedish owns the property at 600 Broadway but sold the building and garage. Swedish owns property at the Providence Campus (500 17th Ave). Swedish recently leased about 60,000 SF of space at the Metropolitan Park office in downtown for administrative functions (human resources and finance divisions). Swedish leases a clinic space downtown (1001 4th Ave) with about 12,600 SF for the Swedish Physician division. Swedish owns or leases no other property or facilities within 2,500 feet of its First Hill campus. (Also see property map in Appendix). Swedish recently sold and may continue to sell buildings, including support buildings/parking,



91		
7		
/\ 0	240'	600'

research buildings, clinical and medical office buildings, so that Swedish can concentrate on its core competency of hospital services. The recent sale included 1101 Madison, retail space and the parking garage along Madison, the Arnold Pavilion (9th floor and above), and the 600 Broadway medical office building and garage. The uses in these buildings will continue to be functionally integrated with or substantively related to the major institution and/or they will primarily serve the users of the major institution. Swedish will continue to own the land of the First Hill campus and will ground lease land to the building owners. Ground leases and sales agreements will include restrictions imposed upon the non-Swedish owners to comply with certain major institution provisions, such as transportation management.

The property legal description and parcel data are given in the Appendix A.

The MIO District bounded by James-Boren-Madison-Broadway includes a land area of about 648,876 SF (14.92 acres) excluding public right-of-ways (see Appendix A for details).

Existing/Approved Development

Existing development is depicted in Figure 2.2. The age and building areas are noted. The master plan seeks to replace the aging facilities.

The development program of the existing approved major institution master plan includes building space for hospital, research use, outpatient and patient family housing, medical office space, subsequent office development and commercial space. Two phases of development were included; an initial phase from 1983 to 1988 and a 2003 conceptual phase.

The total hospital expansion above the level existing in 1983 was limited to 256,000 sf. This development has been completed.

The approved research space was limited to a maximum of 494,000 sf plus parking for 610 spaces. This development did not occur, primarily because it was intended for expansion of FHCRC who moved off the Swedish campus.

The approved outpatient and patient family housing amounted to a maximum of 150 units outside the MIO campus boundary but within one mile, and no limit to such housing beyond the one mile. This development did not occur.

Approved medical office space totaled 450,000 sf plus sufficient parking per code requirements. The development was proposed in two phases and has all been completed.

Commercial development was required at street level along parking garages that fronted Madison, Boren and Broadway. This commercial development has been mostly completed except at the Broadway/Madison and Broadway/James corners of the campus where garage development has not occurred.

Swedish is licensed for 697 beds for the First Hill campus and this bed number will not be affected by the master plan. Currently there are 566 set-up beds.

The following Tables 2.1 and 2.2 summarize the existing Swedish First Hill campus building development and parking (garages and surface lots). It provides a new baseline for the master plan.



KEY TO FIGURE 2.2

1920 - 1950

Non-Swedish Building

1950 - 1970

- 1970

Note: 9th floor and above of Arnold Building not owned by Swedish

1970 - 1990

1990 - 2000's

Hospital

East Tower Age: 1999

Area: 441.067 sf

Main Surgery Age: 1963 Area: 62,302 sf

North/Northwest Wing Age: 1926, 1933, 1945

Area: 61,703 sf

Old East Wing

Age: 1936, 1941, 1947

Area: 118,448 sf

Old Tumor Institute Age: 1930's - 1953 Area: 12,541 sf

South Wing Age: 1979 Area: 157,967 sf

Southwest Wing Age: 1972 Area: 285,070 sf

West Wing

Age: 1955, 1963, 1967 Area: 140,255 sf Medical Office Buildings

1101 Madison* Age: 1994 Area: 306,266 sf

600 Broadway* Age: 1990 Area: 166,211 sf

Arnold* Age: 1987 Area: 197,201 sf

Arnold Annex Age: 1974 Area: 9,794 sf

<u>Heath</u> Age: 1969 Area: 118,297 sf Other Buildings

1120 Cherry Age: 1950's Area: 25,205 sf

819 Boylston Age: 1947 Area: 11,094 sf

900 Boylston Age: 1946 Area: 8,124 sf

Alcoa Building Age: 1963 Area: 39,634 sf

<u>Annex</u> Age: 1959 Area: 75,165 sf

Charlotte Building Age: 1970's Area: 7,826 sf

Invex Building Age: 1950's Area: 21,284 sf

Retail* Age: 1987 Area: 8,608 sf

^{*} Recently sold to Health Care Property Investors, Inc (HCPI). (Portion of Arnold Building sold to HCPI: 9th floor and above.

Existing Swedish First Hill Campus Building Area

Building Area (GSF)

Hospital		
East Tower	441,067	
Main Surgery	62,302	
North/Northeast Wing	61,703	
Old East Wing	118,448	
Old Tumor Institute	12,541	
South Building	157,967	
Southwest Wing	285,070	
West Wing	140,255	
Total Hospital Area	1,279,353	
Medical Office Buildings		
1101 Madison**	306,266	
600 Broadway***	166,211	
Arnold**	197,201	
Arnold Annex	9,794	
Heath	118,297	
Nordstrom Garage Retail**	8,608	
Total MOB Area	806,377	
Other Buildings		
1120 Cherry	25,205	
819 Boylston	11,094	
900 Boylston	8,124	
910 Boylston	9,332	
Alcoa	39,634	
Annex	75,165	
Charlotte Building	7,826	
Invex	21,284	
Old Incinerator Building	NA	
Total Other Building Area	197,664	
Total First Hill Campus	2,283,394	

Nordstrom MOB space of 186,700 GSF not included because not owned by Swedish
 Included but recently sold to HCIP
 Located outside MIO boundary

TABLE 2.2

Existing Swedish First Hill Campus Off-Street Parking Supply

	Facility	Building Area (GSF)	Spaces
	Parking Garages		
1	Marion & Minor Garage	376,164	1,025
2	Madison/Nordstrom Garage**	153,078	597
4	Doctor's Garage	70,162	115
6	Invex Garage	56,912	190
8	Broadway Garage	261,095	540
9	Minor & James Garage	307,207	1,043
	Total Parking Garages	1,224,618	3,510
	Surface Parking Lots		
3	Alcoa Building		50
5	Heath Lot		12
7	Invex Alley		20
10	Annex Lot		53
11	Arnold Valet Parking		14
12	Main Lobby Valet Parking		19
13	Arnold Retail Lot***		37
14	910 Boylston		16
15	East Entrance Lot N/NE		5
16	Columbia Lot****		7
	Total Surface Parking Lots		233
	Total First Hill Campus Parl	king	3743

Note: The reference numbers in the left column are keyed to the Parking Analysis in the Final EIS document.

Local Circulation/Access

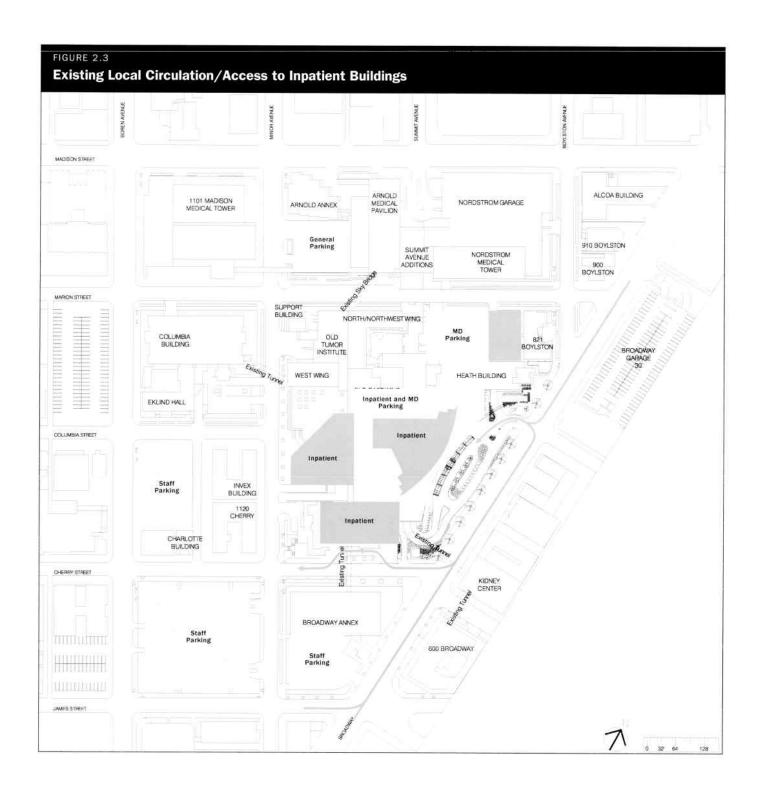
Local First Hill campus circulation and access of different Swedish functions is depicted in the following series of graphics (Figures 2.3 - 2.10 for existing and future conditions respectively. The concept is to limit vehicular access along block frontages along Boren-Madison-James-Broadway and park cars at dispersed campus edge locations near functions served. Inpatient, outpatient, emergency, and service circulation corresponds with the campus functional zones. Parking will continue to be dispersed in the future. Some changes are proposed to emergency and service traffic flows.

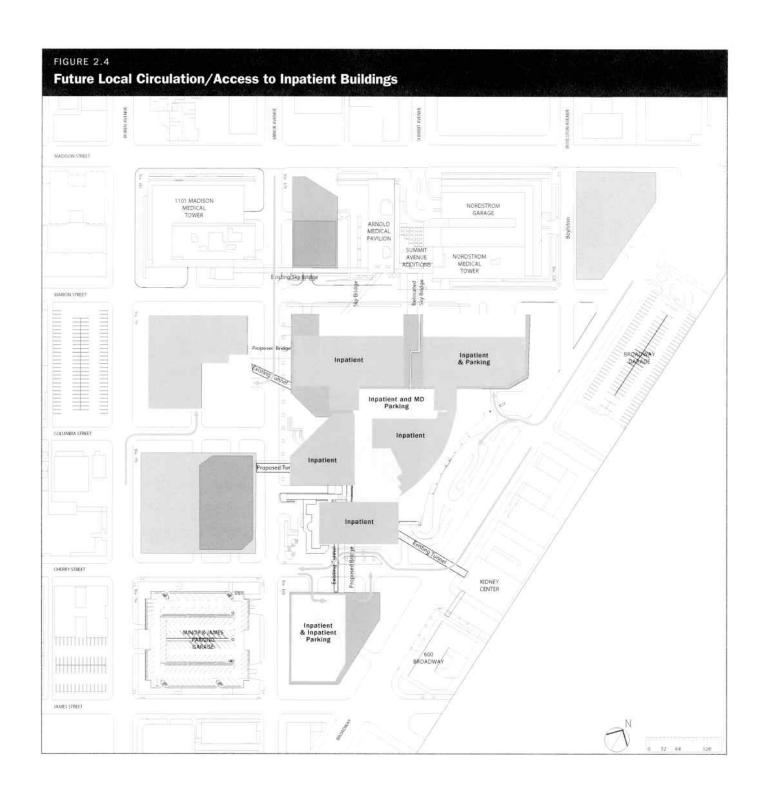
^{*} The 600 Broadway Garage (123,205 GSF, 355 spaces) is located outside the MIO boundary so it is not included.

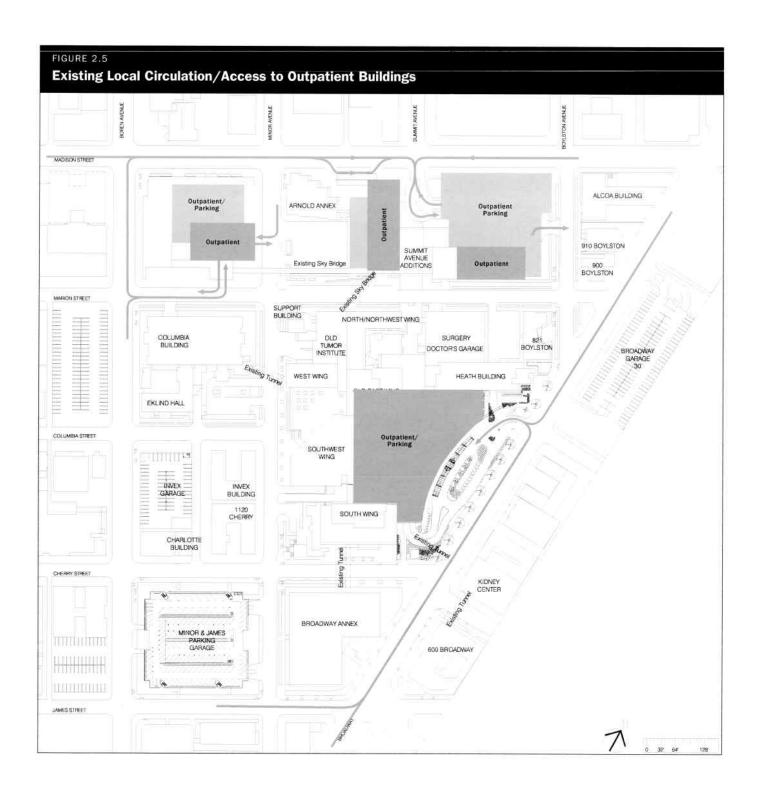
[&]quot; Included but recently sold to HCPI and subject to Swedish TMP.

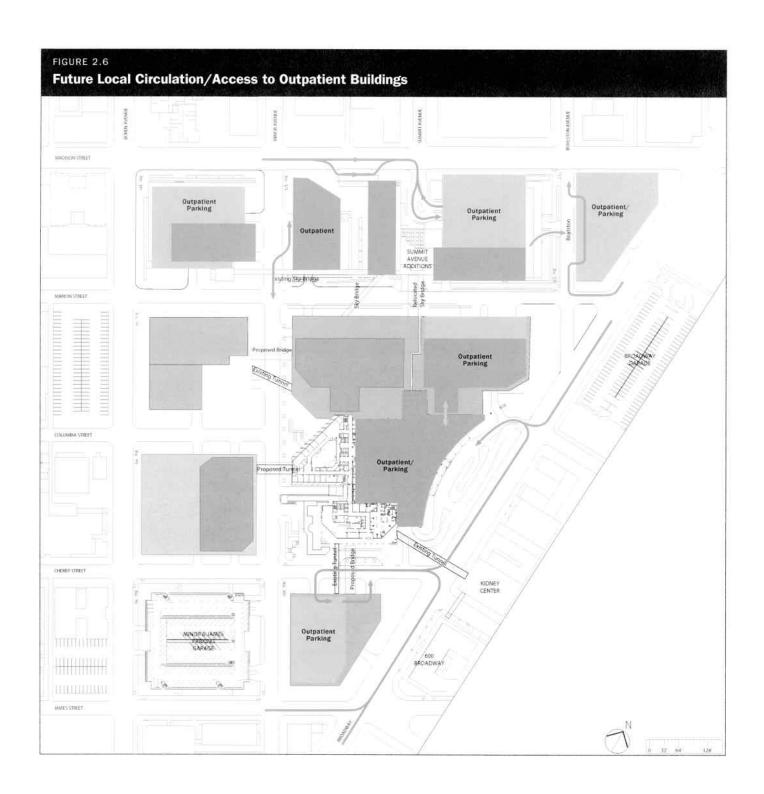
^{*** 37} spaces controlled by lease to bank.

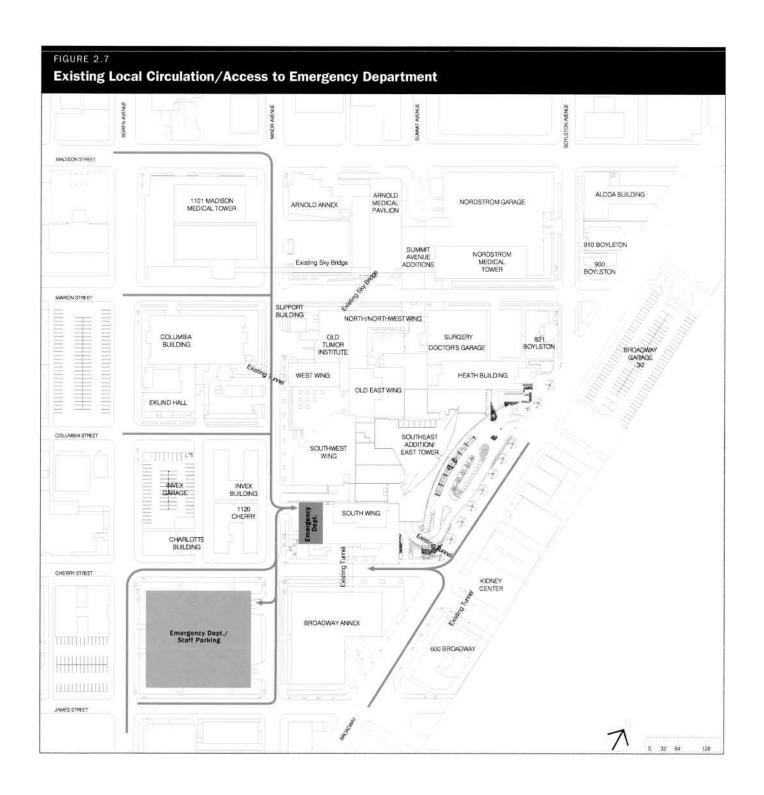
^{****} Not owned or controlled by Swedish, but located within the MIO boundary.

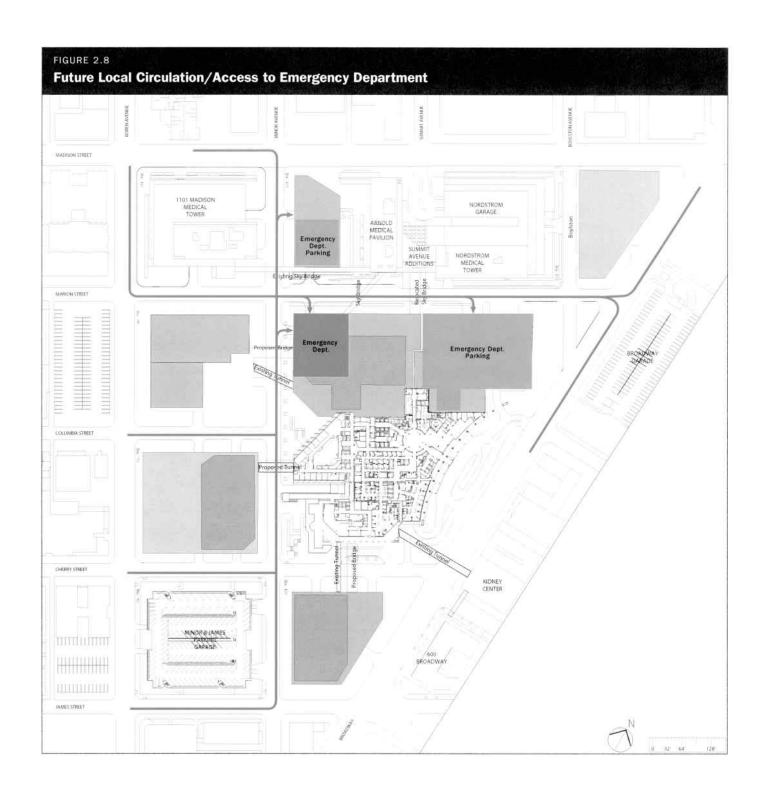


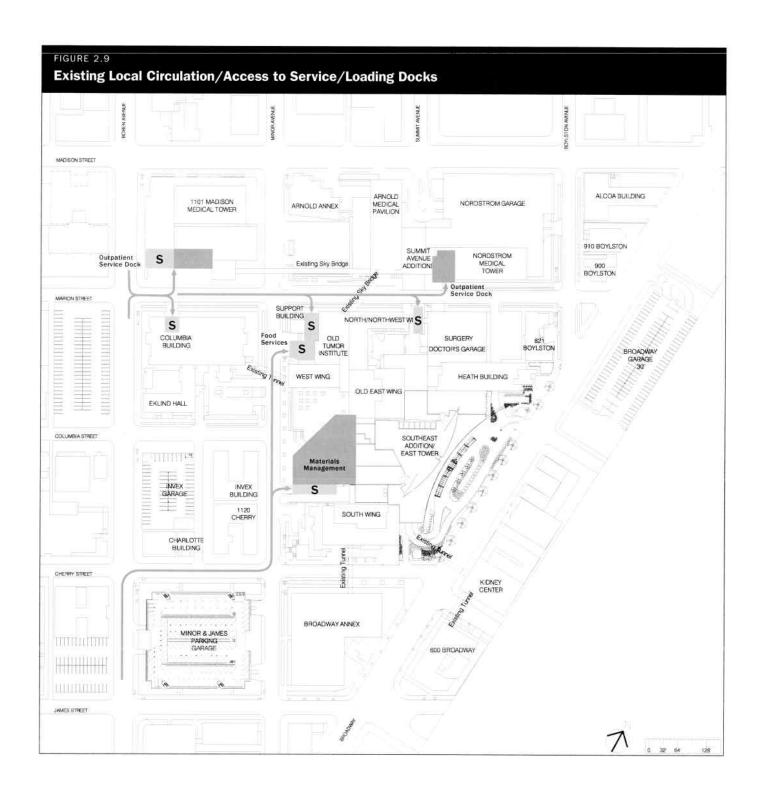


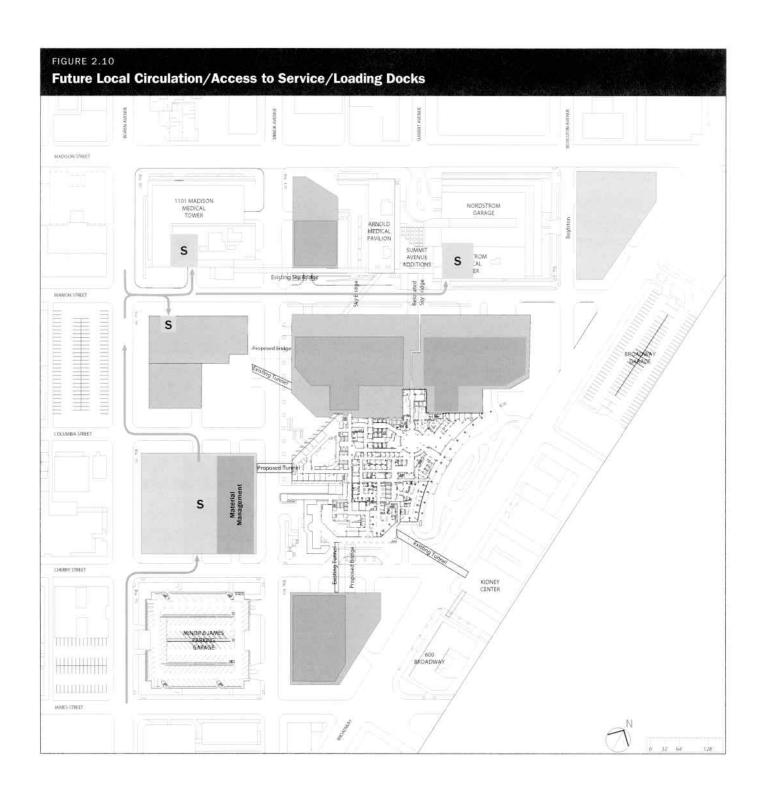












Pedestrian Circulation

Figure 2.11 depicts a plan for both internal and external pedestrian circulation at the Swedish First Hill campus. The pedestrian system for the urban campus consists of the street grid sidewalk network with an emphasis on Marion and Minor streetscapes as cross-campus routes with pedestrian amenities and the Madison retail/commercial corridor. Distinguishable campus edges would be defined but the intent is to not separate the campus from the neighborhood. Rather, the pedestrian circulation connects the context and passes through the porous campus.

Simple internal building wayfinding is established by clearly distinguishable and direct routes. Linkages between hospital buildings are provided by skybridges. A service tunnel under Minor connects the centralized physical plant/materials management facility with the main hospital.

The pedestrian improvements for wayfinding would be implemented in phases with each building development project. Streetscapes along the project blocks would be implemented with the master plan project.

Wayfinding

Based on a review of campus wayfinding features and conditions, and comments from the Swedish Citizens Advisory Committee, DPD, and DON, Swedish has elected to incorporate plans to develop a Wayfinding Program in this MIMP. A Wayfinding Plan containing Design Guidelines will be developed to address campus orientation, distinguishing places, ease of pedestrian movement and traffic management. The intent is to improve the pedestrian and vehicular wayfinding environment, safety and amenities. There is the opportunity for a broad range of place-making and streetscape improvements including, but not limited to signage.

Phased implementation of campus wayfinding elements would occur with each Planned and Potential development project and specifically along the project's block street frontages. There should be particular emphasis to the continuity of streetscape amenities along Minor Avenue and Marion Street and to the reinforcement of the retail/commercial Madison Street corridor as noted in the pedestrian circulation graphic (Figure 2.11).

A Wayfinding Plan with detailed designs or prescriptive standards cannot be defined at this conceptual master planning stage. Swedish will develop the Wayfinding Plan and Design Guidelines with CAC and public input. A standing CAC and DPD would review future building designs to assure that the Wayfinding Plan and Design Guidelines are appropriately considered and reinforce wayfinding in the First Hill context.

Development Purpose and Public Benefits

The purpose of the proposed development is to allow Swedish to continue to provide the highest quality and most comprehensive healthcare to the community by replacing facilities of increasing obsolescence on the First Hill campus. The hospital development program of the current master plan has been fully built out so a renewed master plan is required for needed improvements.





Swedish has provided medical excellence in the community for nearly a century. In 2003, Swedish donated over \$33 million in charity care and community benefits. As a charitable nonprofit organization, Swedish invests its resources in programs and services that improve the health of the community and region. Examples of continuing programs provided in coordination with other organizations are: Youth at Risk, Healthcare Services for Youth, Support for Patients and Families, Family Violence Program, Clinical Services for Low-Income Seniors, Swedish Mobile Mammography Van, Developmentally Disabled Students, Health Adventures for Middle School Students and Bereavement Support Groups. Swedish partners and provides an array of community health programs targeting the underserved and those affected by violence and substance abuse. For example, Swedish joins with Seattle & King County Public Health and Seattle Public Schools to provide comprehensive medical, counseling and preventative health services at the Ballard Teen Health Center.

Swedish provides extensive health information resources and classes to improve well-being. Programs include an online health library, 'ask Dr Auer', health classes, education centers, a Health Watch newsletter, and even heart-healthy recipes. Swedish outreach serves those who may not otherwise receive needed services, such as programs for newly arrived immigrants, homeless teenagers, low-income seniors, pregnant women with addictions, and charity care.

Consistency with Comprehensive Plan and Policies

Major Institution Policies

The relationship of the Comprehensive Plan goals and policies related to major institutions is described in the following Table, 2.3.

TABLE 2.3

Relationship of the Seattle Comprehensive Plan Major Institution Goals and Policies with the Swedish Master Plan

Major Institution Goals and Policies

Consistency with Swedish Master Plan

Purpose and Intent (23.69.002)

 A. Permit appropriate institutional growth within boundaries while minimizing the adverse impacts associated with development and geographic expansion; Consistent with Swedish Master Plan. Proposed growth is all within existing campus boundaries. No geographic expansion is proposed.

B. Balance a Major Institution's ability to change and the public benefit derived from change with the need to protect the livability and vitality of adjacent neighborhoods; and The purpose of the proposed Swedish development is to allow continued provision of the highest quality and most comprehensive healthcare to the community by replacing facilities of increasing obsolescence. The local land use patterns and separations by the major arterials at campus boundaries protect neighborhood livability.

C. Encourage the concentration of Major Institution development on existing campuses, or alternatively, the decentralization of such uses to locations more than 2,500 feet from campus boundaries.

The master plan proposes increased development concentration at the First Hill campus and decentralization at other locations (Providence, Ballard, Issaquah, etc.), consistent with the purpose/intent.

Application of Regulations (23.69.006)

A. All land located within the Major Institution Overlay District shall be subject to the regulations and requirements of the underlying zone unless specifically modified by this chapter or an adopted master plan. In the event of irreconcilable differences between the provisions of this chapter and the underlying zoning regulations, the provisions of this chapter shall apply.

The master plan proposes to replace underlying zoning regulations with the MIMP development standards. A detailed comparison of the zoning standards is included in Appendix D.

Goals

LG79

Maximize the public benefits of major institutions, including healthcare and educational services, while minimizing the adverse impacts associated with development and geographic expansion.

The goal is shared with the Swedish master plan. No geographic expansion of the MIO boundary is proposed.

LG80

Recognize the significant economic benefits of major institutions in the city and the region and their contributions to employment growth.

The Swedish 2003 Annual Report notes over \$462 million in employee salaries and benefits, \$33 million in community benefit contributions, and almost \$43 million taxes paid.

LG81

Balance each major institution's ability to change and the public benefit derived from change with the need to protect the livability and vitality of adjacent neighborhoods. Common goal.

LG82

Promote the integration of institutional development in the overall planning for urban centers.

The MIMP process publicly discloses Swedish future plans that can be integrated with overall planning.

Policies

L262

Provide for the coordinated growth of major institutions through major institutional master plans and the establishment of major institutions overlay zones.

Consistent with Swedish master plan.

L263

Allow modifications to the underlying zone provisions in order to allow major institutions to thrive while ensuring that impacts of development on the surrounding neighborhood are satisfactorily mitigated.

No boundary changes are proposed but changed height limits at two locations are proposed. One makes the MIO and underlying zoning height limits the same.

L264

Discourage the expansion of established major institution boundaries.

Consistent; no boundary expansion is proposed.

L265

Encourage significant community involvement in the development, monitoring, implementation and amendment of major institution master plans, including the establishment of citizen's advisory committees containing community and major institution representatives. A new CAC has been formed with coordination of DON, DPD and Swedish, and will fulfill these responsibilities.

L266

Encourage Advisory Committee participation throughout the process of revision, amendment and refinement of the master plan proposal.

Consistent with Swedish master plan.

L267

Require preparation of either a master plan or a revision to the appropriate existing master plan when a major development is proposed that is part of a major institution, and does not conform with the underlying zoning and is not included in an existing master plan.

A new master plan is being prepared.

L268

Provide procedures for considering the establishment of new major institutions.

Not applicable.

L269

New institutions shall be located in areas where such activities are compatible with the surrounding land uses and where the impacts associated with existing and future development can be appropriately mitigated.

Not applicable.

Overlay District

L270

Establish a Major Institution Overlay (MIO) to permit appropriate institutional development within boundaries while minimizing the adverse impacts associated with development and geographic expansion. A further purpose is to balance the public benefits of growth and change for major institutions with the need to maintain the livability and vitality of adjacent neighborhoods. When appropriate, the establishment of MIO boundaries may contribute to the transition of physical development to ensure compatibility between major institution areas and less intensive zone.

A MIO is already established for the Swedish First Hill campus.

L271

Allow all functionally integrated major institution uses within each overlay district, provided the development standards of the underlying zone are met. Permit development standards specifically tailored for the major institution and its surrounding area within the overlay district through a master plan process.

Consistent with Swedish master plan. Swedish and non-Swedish owned uses include medical offices, clinics, research, support retail/commercial, and other uses that are functionally integrated with the major institution. Development standards are tailored to Swedish.

L272

Allow modification of use restrictions and parking requirements of the underlying zoning by the overlay to accommodate the changing needs of major institutions, provide flexibility for development and encourage a high quality environment. Allow modification of the development standards and other requirements of the underlying zoning by an adopted master plan.

Consistent with Swedish master plan.

Uses

L273

Define all uses that are functionally integrated with, or substantially related to, the central mission of the major institution or that primarily and directly serve the users of the institution. The major institution uses and permit these uses in the Major Institution Overlay district, subject to the provisions of this policy, and in accordance with the development standards of the underlying zoning classifications or adopted master plan.

Consistent with Swedish master plan.

Development Standards

L274

Apply the development standards of the underlying zoning classifications for height, density, bulk, setbacks, coverage, and landscaping for institutions to all major institution development, except for specific standards altered by a master plan.

Swedish development standards replace the underlying zoning standards.

L275

The need or appropriate transition shall be a primary consideration in determining setbacks.

Consistent with Swedish master plan.

Parking Standards

L276

Establish minimum parking requirements in MIO Districts to meet the needs of the major institution and minimize parking demand in the adjacent areas. Include maximum parking limits to avoid unnecessary traffic in the surrounding areas to limit the use of single occupancy vehicles (SOV).

Consistent with Swedish master plan.

L277

Allow short-term or long-term parking space provisions to be modified as part of a Transportation Management Program (TMP).

Consistent with Swedish master plan.

L278

Allow an increase to the number of permitted spaces only when it 1) is necessary to reduce parking demand on streets in surrounding areas and 2) is compatible with the goals to minimize traffic congestion in the area.

Parking demand and traffic impact analysis are conducted as part of the environmental review.

L279

Use the TMP to reduce the number of vehicle trips to the major institution, minimize the adverse impacts of traffic on the streets surrounding the institution, minimize demand for parking on nearby streets, especially residential streets, and minimize the adverse impacts of institution-related parking on nearby streets. To meet theses objectives seek to reduce the number of SOV's used by employees and students at peak time and destined for the campus.

Consistent with Swedish master plan.

Residential Structures

L280

Encourage the preservation of housing within major institution overlay districts and the surrounding areas. Discourage conversion or demolition of housing within a major institution campus, and allow such action only when necessary for expansion of the institution.

No housing exists on the Swedish First Hill campus or would be directly impacted by proposed expansion.

L281

Prohibit demolition of structures with noninstitutional residential uses for the development of any parking lot or parking structure which could provide non-required parking or be used to reduce a deficit of required parking spaces. Consistent with Swedish master plan.

L282

Prohibit development by a major institution within 2,500 feet of the MIO District boundaries when it would result in the demolition of structures with residential uses or change of these structures to non-residential uses.

Consistent with Swedish master plan.

Master Plan

L283

Require a master plan for each Major Institution proposing development which could affect the livability of the adjacent neighborhoods or has the potential for significant adverse impacts on the surrounding areas. Use the master plan to facilitate a comprehensive review of benefits and impacts of the Major Institution development.

Consistent with Swedish master plan.

L284

Use the master plan to:

- Give clear guidelines and development standards on which the major institutions can rely for long-term planning and development;
- Provide the neighborhood the advance notice of the development plans of the major institution;
- Allow the City to anticipate and plan for the public capital or programmatic actions that will be needed to accommodate development; and
- Provide the basis for determining appropriate mitigating actions to avoid or reduce adverse impacts from major institution growth.

Consistent with Swedish master plan.

L285

The master plan should establish or modify boundaries; provide physical development standards for the overlay district; define the development program for the specified time period; and describe a transportation management program.

Consistent with Swedish master plan. No boundary modification is proposed.

L286

Require City Council review and adoption of the master plan following a cooperative planning process to develop the master plan by the major Institution, the surrounding community and the city.

Consistent with Swedish master plan. This process is anticipated and Swedish intends to fulfill requirements.

L287

Encourage the preservation, restoration and reuse of designated historic buildings.

No designated historic buildings.

L288

In considering rezones, the objective shall be to achieve a better relationship between residential or commercial uses and the Major Institution uses, and to reduce or eliminate major land use conflicts in the area.

The proposed MIO height limit changes require a rezone. Land use compatibility is an objective of Swedish.

Comprehensive Plan Land Use

The Seattle Comprehensive Plan Future Land Use Map designates the Swedish First Hill campus as "Major Institutions" (bounded by Boren/Madison/Broadway/James). The proposed uses and development of the Swedish master plan are consistent with this designation.

The Seattle University area east of Broadway is similarly designated "Major Institutions." The remainder of the Broadway frontage, the James frontage, and the Madison frontage are designated "Commercial/Mixed Use Areas Inside Urban Centers/Villages." The area west of Boren is designated "Multi-Family Residential Areas."

The entire area is located within the First Hill/Capitol Hill Urban Center, one of five such centers of the Comprehensive Plan. The goal of the Urban Centers (G20) is to "Identify and reinforce concentrations of employment and housing in locations that would support and have direct access to the regional high capacity transit system." The further intensification of the Swedish Master plan is consistent with the goal. Note that one alignment of the proposed light-rail transit system passes under First Hill/Capitol Hill with a potential station at Madison between Summit and Boylston.

Comprehensive Plan Health/Human Development Policies

The Seattle Comprehensive Plan Human Development Element includes goals and policies related to health that apply to the Swedish MIMP. The relationship of the relevant Comprehensive Plan aspects is described in the following table.

TABLE 2.4

Relationship of Seattle Comprehensive Plan Health Goals/Policies with the Swedish Master Plan

Human Development Element

Consistency with Swedish Master Plan

Vision Statement

The City of Seattle invests in people so that all families and individuals can meet their basic needs, share in economic prosperity, and participate in building a safe, healthy, educated, just, and caring community.

The mission of Swedish is to improve the health and well-being of each person served. The master plan is consistent with the Plan Element vision statement.

Healthcare to be as Physically and Mentally Fit as Possible

Goal HDG6

Create a healthy environment where community members are able to practice healthy living, are well nourished, and have good access to affordable healthcare. Swedish has provided medical excellence in the community for nearly a century. In 2003, Swedish donated over \$33 million in charity care and community benefits.

Policy HD21

Encourage Seattle residents to adopt healthy and active lifestyles to improve their general health and well-being. Provide opportunities for people to participate in fitness and recreational activities and to enjoy available open space.

Swedish provides extensive health information resources and classes to improve well-being. Programs include an online health library, 'ask Dr Auer,' health classes, education centers, a HealthWatch newsletter, and even heart-healthy recipes. The master plan proposes enhancement of the Broadway open space and the Marion and Minor streetscapes.

Policy HD 22

Work toward the reduction of health risks and behaviors leading to chronic and infectious diseases and infant mortality, with particular emphasis on populations disproportionately affected by these conditions. Swedish outreach serves those who may not otherwise receive needed services, such as programs for newly arrived immigrants, homeless teenagers, low-income seniors, pregnant women with addictions, and charity care.

Policy HD 23

Work to reduce environmental threats and hazards to health.

- a. Make use of the City's building and fire codes, food licensing, and permit processes, and hazardous materials and smoking regulations for fire and life safety protection.
- b. Collaborate through joint efforts among City agencies, such as fire, police, and construction and land use to address the health and safety issues in a more efficient manner.

Swedish complies with all applicable federal, state and local requirements related to environmental and health hazards. Swedish was selected by the nonprofit Patient Safety Institute to serve as one of two national demonstration sites for innovative communications programs intended to reduce costs and improve patient safety. Swedish works regularly with City agencies and collaborates to assure efficient heath and safety compliance, including the major institutions process for this master plan.

Policy HD 24

Swedish seeks to improve the quality of, and access to healthcare, including: physical and mental health, emergency medical and additional services.

- a. Collaborate with community organizations and health providers to advocate for quality healthcare and broader accessibility to services.
- b. Pursue co-location of programs and services, particularly in under-served areas and in urban village areas.

As a charitable nonprofit organization, Swedish invests its resources in programs and services that improve the health of the community and region. Examples of continuing programs provided in coordination with other organizations are: Youth at Risk, Healthcare Services for Youth, Support for Patients and Families, Family Violence Program, Clinical Services for Low-Income Seniors, Swedish Mobile Mammography Van, Developmentally Disabled Students, Health Adventures for Middle School Students and Bereavement Support Groups.

Policy HD 25

Work with other jurisdictions, institutions and community organizations to develop a strong continuum of community-based long-term care services.

Swedish Medical Center has a Home Healthcare Division that provides services in the home setting. This fully licensed Medicare/Medicaid-certified program works closely with physicians and other departments at Swedish to ensure continuity of care and ease a patient's transition from hospital to home. In 2002, over 6,200 patients were served in over 118,000 visits.

Swedish's goal is to promote the highest level of independence for the patient. Patients and their family members are very involved in the plan of care. In addition to the broad range of services

available to patients, support services are also available for families and caregivers.

Swedish Home Care Services offers the following services: home healthcare, home infusion treatments, hospice care, home helpers, bereavement support, nurse telephone access, and Swedish LifeNet (emergency response system and medication management).

Coordination and Joint Planning of Services

Goal HDG11

Develop a more flexible, comprehensive, coordinated and efficient system of services that addresses whole needs of people, families, and communities. Swedish provides state-of-the-art care to patients of every age and stage of life for virtually every healthcare need (see programs above).

Policy HD 44

Encourage cooperative planning, decision-making, and funding for health and a human service delivery throughout the region. Join with other public and private institutions in the region to strive for a stable and adequate funding base for services that supports safe and healthy communities.

Swedish partners and provides an array of community health programs targeting the underserved and those affected by violence and substance abuse. For example, Swedish joins with Seattle & King County Public Health and Seattle Public Schools to provide comprehensive medical, counseling and preventative health services at the Ballard Teen Health Center.

Policy HD45

Promote effective, efficient community-based and community-delivered services using a combination of public, private, community and personal resources.

(See preceding response to HD 44). In 2003, friends of Swedish donated almost \$2.6 million to support the steadfast commitment to highest quality healthcare.

Policy HD 46

Strive to provide better and more coordinated information to people about the availability of services in the community and make use of available and new technologies to improve access to services and information.

Swedish is a leader in technology based access to services and information (see response to HD 21). The noted programs are all available on-line.

Policy HD 47

Encourage customer-focused services with feedback from those who use them and involvement of consumers in identifying needs and planning for service delivery.

King County residents consistently rank
Swedish as the area's best hospital, with the
best quality, personalized care and providers
(from independent survey by National Research
Corporation).

Policy HD 48

Encourage connections between services that coordinate, link and integrate public, private and community-based services. Facilitate collaboration of programs through the use of City funding.

Long-term affiliations have been established with area hospitals to provide outpatient and radiation oncology services closer to home.

Neonatal intensive care services are linked with the Swedish Pediatric Intensive Care Transport Coach.

Policy HD 49

Encourage consideration of issues like transportation and the need for dependent care in planning for health, human services, employment and recreation programs.

Multiple Swedish programs, such as the Support for Patients and Families, offer special assistance beyond primary healthcare.

Decentralization Plans

Swedish Medical Center is a system of three campuses, affiliations with suburban community hospitals and physicians groups, and a home-care services program. Swedish also has 11 primary-care clinics throughout the greater Seattle area and multiple specialty clinics.

The Swedish Heart and Cancer Institutes have longstanding alliances with community hospitals. Strong partnerships exist with Stevens Hospital, Valley Medical Center, Northwest Hospital, and Highline Hospital. Swedish also formed a joint regional pediatric heart-surgery program with Mary Bridge Children's Hospital in Tacoma in early 2004.

Swedish provides acute care services at all of its campuses, but has concentrated some services to only one campus. Addiction recovery is located only at the Ballard campus, while inpatient rehabilitation, sleep medicine, and behavioral services are all localized at the Providence Campus. Swedish is also making great strides toward the vision of a world-class Heart and Vascular Institute on its Providence Campus.

Swedish leases space outside of its institutional boundaries and has moved many of its services off of its First Hill Campus. For example, Home Health Services is located in leased space in the Design Center in South Seattle, and the administrative services for its Physician Division are in Downtown Seattle. There will also be much interim and permanent relocation of services expected during construction of replacement facilities on the First Hill Campus.

Swedish is also pursuing many initiatives off of the First Hill Campus, in order to meet healthcare need and bring services out to the community. The hospital system is currently planning for a phased expansion into Issaquah. A freestanding emergency-room (ER) complex opened in early 2005, with intentions to build a state-of-the-art nonprofit community hospital in the next several years.

Master Plan Timeframe

The master plan's development program will remain in effect until all proposed development is constructed or until the time that a new master plan is adopted by the City Council. The master plan development standards and Transportation Management Program will remain in effect until amended. No master plan term is established. For purposes of environmental impact analysis, time estimates are made but actual master plan implementation may differ.

Alternatives

Three master plan alternatives, in addition to the Proposal Action, are described that seek to approximate development objectives and satisfy environmental requirements. The alternatives are:

- · Changes to Planned and Potential Projects
- · No Alley Vacation
- · No Action

1) Changes to Planned and Potential Projects

The proposed master plan projects seek to maximize allowable development envelopes but there is the possibility the changes would be made to specific project uses involving: location, building form, heights, development sequencing/timing and site specific density. Changes may include redevelopment of other portions of the hospital. Additional or different street or alley vacations and skybridges/tunnels may be proposed. Such change is expected in a master plan and flexibility to allow such change must be included in the MIMP. Any change to the Planned and Potential Projects is included in this alternative as long as the change is consistent with the development standards, within the total maximum building area of the development program and the project is located within the MIO boundary. The alternative shifts/re-configures proposed development within the MIO District.

The eventual replacement of somewhat newer core hospital facilities located in the South and Southwest Wings is included in this alternative. In addition, the two blocks west of Minor, between Marion and Cherry, and the one block south of Cherry, between Broadway and Minor, would be developed with mixed uses including offices, research, clinics, support, parking and other related Swedish uses. The segment of Columbia Street Between Boren and Minor may be vacated as envisioned in the existing master plan.

2) No Alley Vacation

The City requires this alternative for comparison with the proposed street and alley vacations. The one proposed vacation would be eliminated in this alternative.

The alley on the block bounded by Boren-Minor-Columbia-Cherry would remain and the proposed central support building, parking and upper level medical office and research would have to be re-designed to function on two city half-blocks. Proposed off-street service functions (inside buildings) for loading docks, service, and materials transfer and storage may be relocated along streets and the alley in order to function. Below grade development would be separated on the two half-blocks. Upper level development would be oriented to fit on the two half blocks.

3) No Action

This alternative is required as a baseline for comparing impacts (WAC197-11-440 5.b.ii and SMC 25.05.440.D.2.b). No new development would occur. The distribution and location of existing uses may change and involve renovations but no net increase in space would be developed. User populations may increase demand for services but facilities would not expand to accommodate the change. There would be no expanded physical development.

B. Planned Projects

The Proposed Action includes Planned Projects and Potential Projects. The master plan projects are depicted in Figure 2.12.

Uses and Areas

The total existing Swedish First Hill campus chargeable development totals to about 2.3 million square feet. Parking is additional and amounts to about 1.3 million square feet or about 3800 spaces.

The proposed Planned Projects amount to about 950,000 square feet net new of chargeable space (about 1.47 million square feet of new construction less demolition of about 520,000 square feet). Proposed parking adds from 1400 to 1500 net new spaces.

Proposed uses that comprise the space include replacement of hospital and hospital related functions including clinics, medical offices, research, support facilities (physical plant, materials management, etc.).

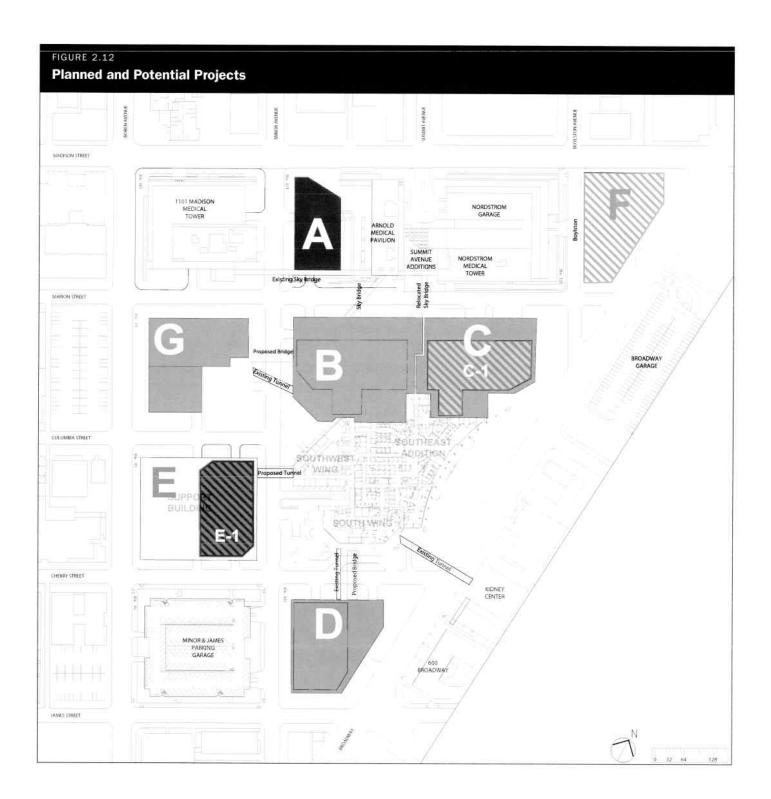
The required master plan building areas for Swedish respond to the healthcare needs for increased functional space. The change to single patient rooms (from double bedrooms), accommodations for family members, higher patient acuity, additional space for diagnostic and treatment equipment, increased technology use, and overall 'up-sizing' to meet current and future hospital space standards require more building area. However, Swedish does not anticipate significant service and population increases. Space needs for all bed types, from medical surgical units to intensive care units, continue to grow dramatically.

Swedish has 697 licensed beds for the First Hill campus. The proposed master plan projects will not change this number. The current number of 566 set-up beds may be increased to the licensed bed limit.

Note: See the following Development Standards section for the proposed maximum campus development density (floor area ratio-FAR) of the MIO District.

Height/Bulk/Scale

Each project is intended to maximize the allowable building volume including maximum height allowed by the MIO District. The buildings are proposed to the height limits as well as all other maximum building volume defining parameters, such as lot coverage, setbacks and open space. The overall campus massing concept is to locate the most intense activities and concentrated building massing in the center of the campus. There is a height/bulk/scale transition with lower heights toward the campus edges along the four campus-defining arterials. The organization is intended to minimize any compatibility impacts with the immediate neighborhood.



KEY TO FIGURE 2.12



Planned Support Projects

Planned Projects

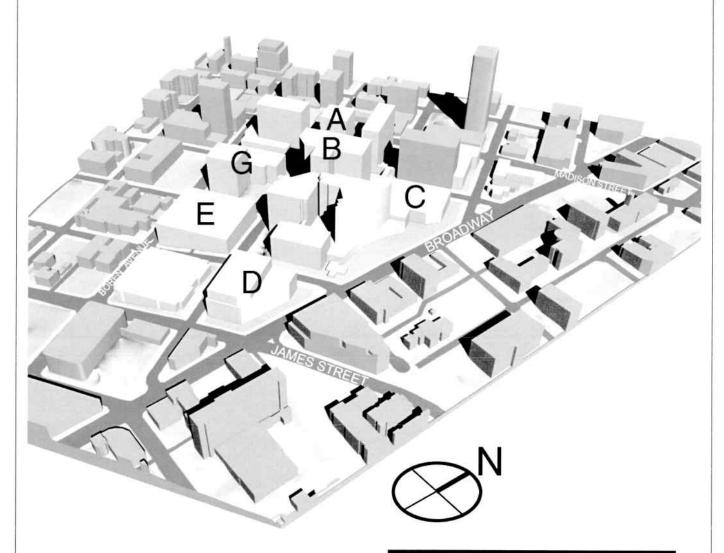
- A. Medical Office Building
- B. Hospital Replacement: Building B
- C. Hospital Replacement: Building C
- D. Hospital Replacement: Building D
- E. Central Support Facility w/ Medical Office Tower
- G. Hospital Replacement: Building G

Potential Projects

- F. Medical Office Building
- C-1. Hospital Replacement: Building C - Future Tower Addition
- E-1. Central Support Facility w/Medical Office Tower and Research



Planned Projects 3-Dimensional View



KEY

Planned Projects

- A. Medical Office Building
- B. Hospital Replacement: Building B
- C. Hospital Replacement: Building C
- D. Hospital Replacement: Building D
- E. Central Support Facility w/Medical Office Tower
- G. Hospital Replacement: Building G

The maximum height/bulk/scale impacts are assessed for the 'worst case' impact. Future actual project building designs may be less than allowed. Flexibility in the future building massing design is required given uncontrollable and unpredictable changes to healthcare conditions. A 3-dimensional view of the Planned Projects is shown in Figure 2.13.

Street and Alley Vacations

No street vacations are proposed. One alley vacation is proposed. The alley on the block bounded by Boren-Columbia-Minor-Cherry (Block 95) would be vacated to allow development of Project E, Central Support Facility. This project includes materials management and central plant. All truck access/loading/maneuvering would be located off-street/off-alley and within the proposed building. Wider curb cuts (60 to 90 feet) along Columbia and Cherry may be required, Long-term public benefits are proposed and would include landscaped open space, pedestrian improvements and other amenities.

This vacation was also included in the currently approved Swedish master plan but was never implemented.

The proposed vacation and skybridges and tunnels are depicted on Figure 2.14. The skybridges are required linkages to allow movement of non-ambulatory patients. The projects with skybridges are all inpatient hospital uses. The tunnel is required to link the consolidated materials management/physical plant with the hospital.

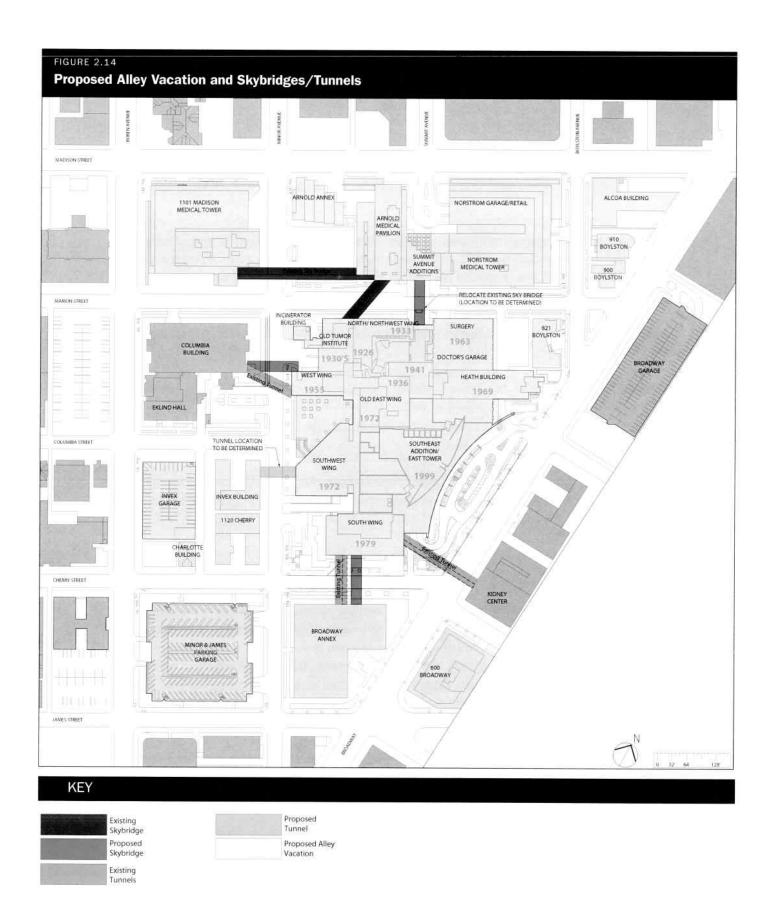
Skybridge and tunnel connections across public right-of-ways are proposed but permits will be sought rather than aerial and/or below-grade vacations. All existing skybridges and tunnels on the Swedish campus are allowed by permit.

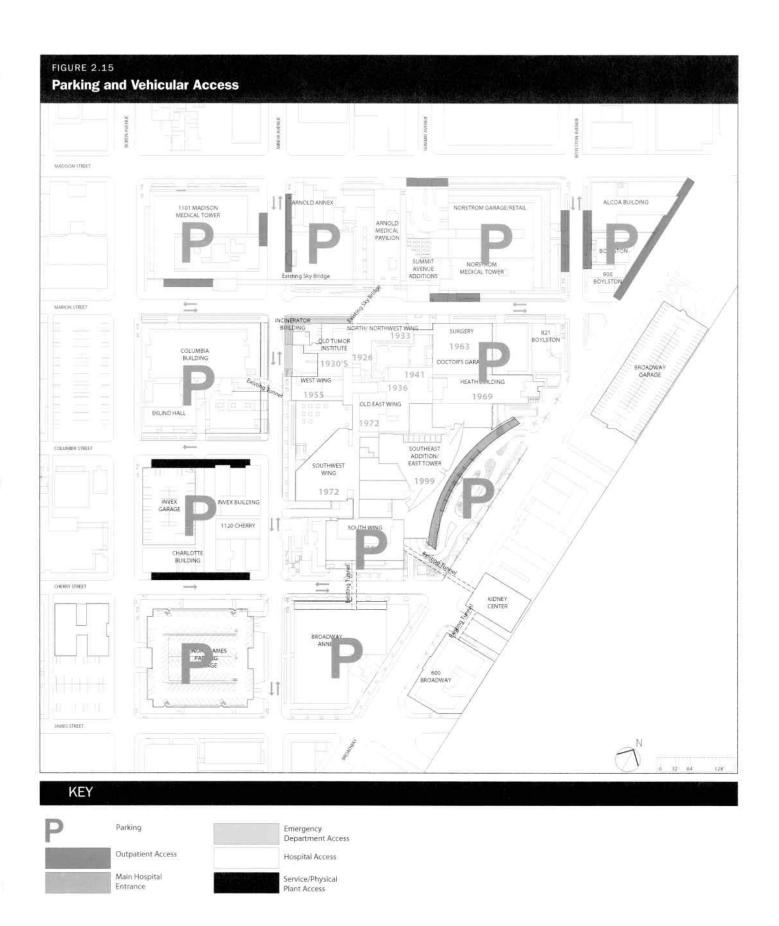
Circulation & Parking

Generally the existing land platting and street layout on the campus will be maintained. One proposed alley vacation would alter the local block service pattern. No change is proposed to the existing street layout system unless warranted to improve traffic operations and safety. Traffic flows are proposed to be improved within the campus area by eliminating some on-street parking to achieve adequate lane widths. No right-of-way dedications are required or expected in the future except along Boren, between Cherry and Columbia Streets. Some exceptions to city requirements related to curb cut widths, number of driveways and other design details may be required.

Parking and vehicular access is proposed to be improved within the campus area. Parking locations and site access points are shown in Figure 2.15. New drop-off/pick-up areas will be designed to minimize traffic impacts and operate efficiently.

The maximum number of off-street parking spaces for the MIO District is 6000 spaces (See Development Standards section for calculation). This number does not include temporary loading/drop-off spaces, service parking, or on-street parking. Parking is distributed throughout the campus and located to conveniently serve the nearest uses. Access avoids conflicts with major arterials and pedestrian activity to the extent possible.





Note: Also see previous Local Circulation/Access graphics for comparison of existing and future conditions in First Hill campus section.

Open Space

Open space includes landscaped open areas and paved plazas and streetscapes. The Broadway campus frontage is proposed to be enhanced by more landscaped open space. (Also see following development standards for open space and landscaping.)

Open spaces on the First Hill campus are shown in Figure 2.16. The existing open space entry drive along Broadway at the main hospital entrance is proposed to be designated as permanent open space. Portions may be landscaped or paved. The minimum designated open space at the Broadway main hospital entrance location is 0.5 acres.

The urban plazas, landscaped areas and improved streetscapes are intended to contribute to the limited open space amenities of First Hill. The improvements will reinforce the local campus cohesiveness and also assure a "porous" campus that encourages cross-pedestrian movement.

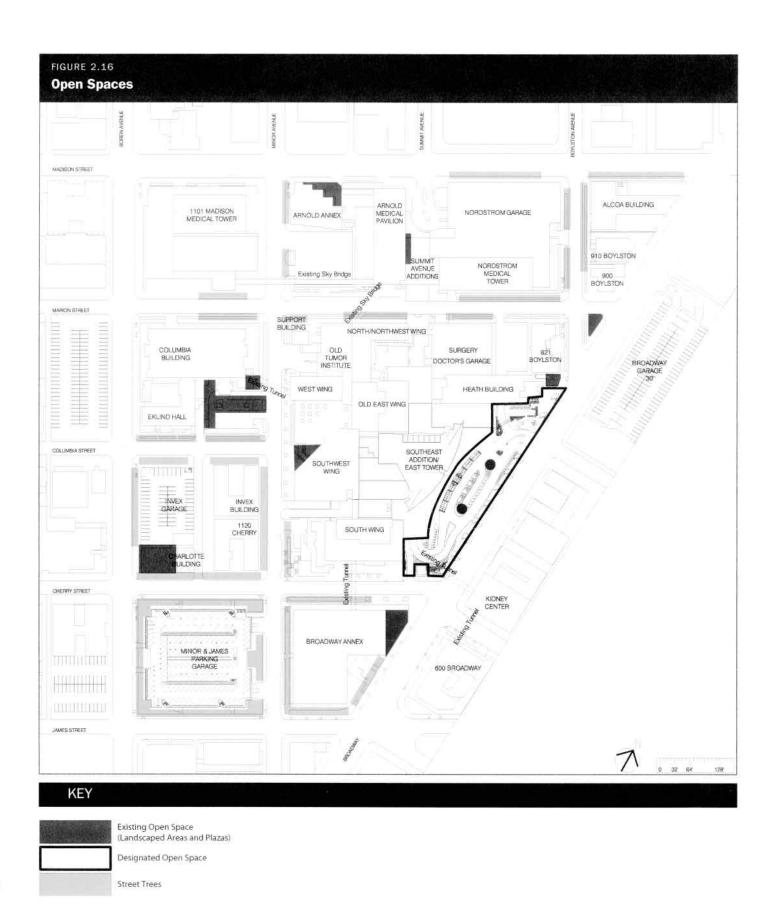
The Seattle Parks and Recreation Department is in the process of identifying a site on First Hill for a new park funded by the voter passed Pro Parks levy. Swedish will coordinate its planning of open space with this on-going effort.

Utility Infrastructure

See EIS Energy and Utilities sections. Utility systems are sufficient to service Swedish. A physical plant (Project E) is proposed as part of the master plan.

Phasing

The phasing of specific projects is uncertain. The primary need is hospital replacement so the sequencing of projects would occur to this end and must enable current hospital operations and minimize disruption. Certain existing functions must be replaced before they are displaced. One phasing example is replacement of support functions at the Project B location so existing buildings could be demolished. Replacement may be developed at Project E. Once Project E is completed, then the hospital proposal Project B could be developed. Project D may be an early project because the hospital development would be less disruptive to other existing hospital functions. However, existing offices would have to be relocated. Project A may also be an early project. Project phasing is to be determined.



C. Potential Projects

Potential Projects add approximately 270,000 square feet net new of chargeable space (about 305,000 square feet new construction less demolition of about 35,000 square feet). Proposed parking adds about 50 to 100 net new spaces.

The total of 697 licensed beds for the First Hill campus is not changed by the Potential Projects. The number of set-up beds may increase to the licensed bed limit. A 3-dimensional view of the Potential Projects is shown in Figure 2.17. (Also see prior graphic Planned and Potential Projects for plan view).

FIGURE 2.17 **Potential Projects 3-Dimensional View** KEY **Potential Projects** F. Medical Office Building C-1. Hospital E-1. Central Support Replacement: Facility w/Medical Building C Office Tower and - Future Tower Research Addition

3. Development Standards

The master plan replaces all underlying zoning standards with the following development standards that are tailored to Swedish Medical Center First Hill campus. Proposed master plan projects are described to fully fill maximum allowable building envelopes defined by the development standards. Actual projects may be reduced in volume when designed in the future but in no case would exceed the maximum limits. No development conditions are proposed, but impact mitigation is identified in the EIS. Conditions will likely be developed during the review/ approval process following issuance of the Final MIMP and Final EIS.

A. Zoning District

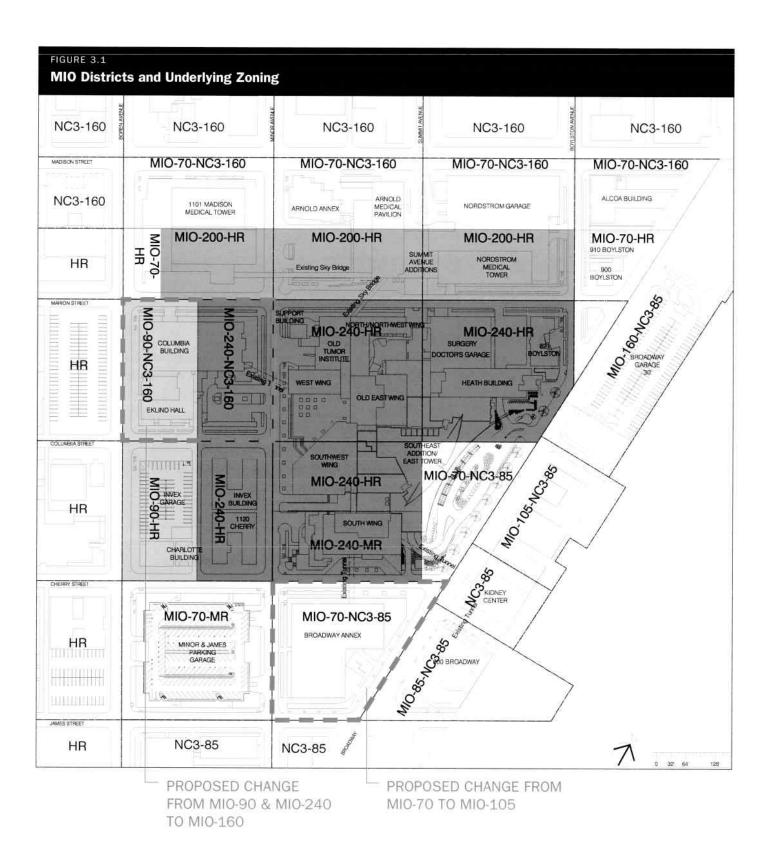
Major Institution Overlay (MIO) District and Underlying Zoning

The existing and proposed major institution overlay (MIO) district boundary and height districts are shown in Figure 3.1, along with the underlying zoning districts. The zoning of the immediate context is also shown. No changes are proposed to the MIO District boundary. It defines the Swedish First Hill campus, bounded by Boren-Madison-Broadway-James. Two changes (rezones) are proposed to the MIO height districts within this area:

- 1. The block bound by James-Cherry-Minor-Broadway would be changed from MIO-70' to MIO-105'. The underlying zoning would remain unchanged as NC3-85'.
- 2. The block bound by Marion-Minor-Columbia-Boren would be changed from MIO-90 and MIO-240' to MIO-160' to be consistent with the recent re-zone of the underlying zoning. The underlying zoning was changed from Highrise (HR) multi-family residential to Neighborhood Commercial (NC3-160'). Swedish does not own the block and the zoning was changed by the current property owner. However, Swedish proposes that the same MIO height district apply to the entire block and that the height be the same as the current underlying zoning.

The Swedish First Hill campus now includes four different MIO height districts: MIO-70', -90', -200' and -240'. A fifth district, MIO-105' is proposed. The greatest heights are centered at the core of the campus and reduced heights transition to the campus edges. A re-zone is requested as part of the master plan for the MIO District changes. Underlying zoning would not be changed. The underlying zoning includes both residential and commercial districts. It is largely Highrise (HR) multi-family residential, except for the one block noted that was re-zoned and the half-block deep frontage along Madison that is zoned NC3-160'. Underlying zoning along Broadway is NC3-85'. The parking garage block at Boren and James has underlying zoning of MR, Mid-rise multi-family residential. There is a P1 Pedestrian Overlay district along Madison Street. Swedish is located within the First Hill Urban Village as defined by the Seattle Comprehensive Plan.

The MIO District east of Broadway (MIO-85, 105', 160') is associated with Seattle University. The MIO District south of James (MIO-240') is associated with Harborview Medical Center.



KEY TO FIGURE 3.1



HR Highrise Multi-Family Residential MR Midrise Multi-Family Residential NC3 Neighborhood Commercial 3 MIO Major Institution Overlay District

*Building heights are approximate and vary by measurement location due to grade differences

MIO-240

East Tower Height: 182' Area: 441.067 sf

Main Surgery Height: 31' Area: 62,302 sf

821 Boylston Height: 21' Area: 61,703 sf

Heath Building Height: 121' Area: 118,297 sf

North/Northwest Wing

Height: 77' Area: 61,703 sf

Old Tumor Institute

Height: 26' Area: 12,541 sf

West Wing Height: 125' Area: 140,255 sf

Old East Wing Height: 160'/168'-6" Area: 118,448 sf

Southwest Wing Height: 164' Area: 285,070 sf

South Wing Height: 87' Area: 157,967 sf

Columbia Building Height: 103' Area: 285,070 sf

MIO-200

Nordstrom Medical Tower

MIO-70

Height: 174' Area: 201,764 sf

1101 Madison Medical Tower

Height: Base 60' Tower 120' Area: 306,266 sf

Arnold Height: 179' Area: 197,201 sf

MIO-90

Columbia Building Height: 103' Area: 285,070 sf

Eklind Hall Height: 63' Area: 18,000 sf

Invex Garage Height: 14' Area: 21,284 sf

Charlotte Building Height: 47' Area: 7,826 sf

MIO-70

Alcoa Building Height: 30' Area: 39,634 sf

900 Boylston Height: 16' Area: 8,124 sf

910 Boylston Height: 21' Area: 9,332 sf

Nordstrom Garage Height: 59' Area: 153,078 sf

Arnold Medical Pavillion

Height: 179' Area: 197,201 sq

Arnold Annex Height: 26' Area: 21,284 sf

1101 Madison Medical Tower

Height: 60' Area: 306,266 sf

Minor & James Parking Garage

Height: 40' Area: 307,207 sf

Broadway Annex Height: 51' Area: 75,165 sf

B. Basic Standards

MIO District Density

Density of development is proposed to include the entire First Hill MIO District and the net chargeable floor area that is less than the total gross building area. The customary exclusions for calculating floor area ratio (FAR) apply to the Swedish development standards. The floor area and parking calculations are detailed in Table 3.1

The density standard (FAR) applies to the entire MIO District and not to specific sites. There are no applicable sub-areas within the MIO District (23.69.030E2). Proposed master plan projects fill the maximum allowable building envelope per other development standards but are not quantified (or limited) in terms of individual project density. Massing diagrams and the impact analysis do consider this maximum development condition.

New construction is chargeable building area/functional space. Total gross building area will increase this net space numbers.

The maximum chargeable building area standard for MIO District density is proposed to be 3,500,000 chargeable square feet. The standard is higher than estimated numbers (3,471,083) due to uncertainty and the conceptual level of design definition of projects. The number does not include mechanical floors, interstitial space, below grade space, parking or circulation areas.

The density limit may be expressed in terms of a FAR linking chargeable building area to existing land area (land from the proposed alley vacation is not included). Assuming a Swedish First Hill campus MIO District land area of 649,876 SF (based on Assessor's records and not including public right-of-ways) and a chargeable building area of 3,500,000 SF (not including mechanical, below grade, parking and circulation spaces), then the calculated FAR is 5.386.

The Swedish First Hill campus density standard is a maximum FAR 5.5. The higher number expresses the uncertainty/accuracy of the numbers and the need for master plan project flexibility. The density limit would be applied to the total campus and total development and not to individual sites and projects. The maximum off-street parking supply standard is 6,000 spaces within the MIO District.

Note: Appendix D is a comparison of zoning development standards. The standards of underlying and adjacent zones are included.

TABLE 3.1
Floor Area and Parking Calculation

	Existing MIO District Swedish Building Area	Planned Additional Development	Potential Additional Development	Future MIO District Swedish Building Area
Hospital	1,279,353 SF	1,024,000 SF	135,000 SF	2,438,353 SF
МОВ	806,377 SF	156,000 SF	70,000 SF	1,032,377 SF
Other	197,664 SF	254,000 SF	100,000 SF	551,664 SF
New Construction Building Total	<u>u</u>	1,434,000 SF	305,000 SF	4,022,394 SF
Demolition	_	(515,833 SF)	(35,478 SF)	(551,311 SF)
Net New Building*	=	918,167 SF	269,522 SF	1,187,689 SF
Total First Hill Campus Building	2,283,394 SF	-	-	3,471,083 SF
Parking Garages**	1,224,618 SF 3,510 spaces	676,000 SF 1,835	40,000SF 100	1,940,618 SF
Displaced Parking	-	(432)	(66)	
Surface Parking	233 spaces	=:	-	
Net New Parking	=	1,403	34	1437
Total First Hill Campus Parking	3,743 spaces		_	5,180 spaces

^{*}New construction is chargeable building area/functional space and does not include interstitial areas, mechanical floors, and below-grade space. Total gross building area will increase the space numbers. The maximum chargeable building area standard is proposed to be 3,500,000 chargeable square feet. The standard is higher than estimated numbers due to uncertainty and the conceptual level of design definition of projects.

Total Swedish First Hill campus land area is assumed to be 649,876 SF and corresponds with the MIO District (not including right-of-ways). See property ownership details in Appendix A.

^{**}Proposed parking areas and number of spaces are order of magnitude approximation and actual number is dependent upon project design. Surface parking may be developed as interim use but quantity is not included. Maximum off-street parking supply standard is proposed to be 6,000 spaces and includes a 15% factor for design uncertainty.

Height Limits

Five height districts apply to the Swedish First Hill campus as previously described under the Zoning District section. The maximum height limits are: 240 FT, 200 FT, 105 FT, 90 FT and 70 FT.

The greatest heights are located toward the center of the First Hill campus. The heights are reduced toward the campus edges and approximate the allowable heights of adjacent zoning. This step-back occurs midblock from the Madison frontage (70 feet along Madison and 200 feet along Marion). The transition supports the pedestrian activities along the Madison corridor.

Because of the high-rise urban scale of the Swedish First Hill development and the topographic characteristics at the hill crest, the downtown zoning measurement technique applies (23.86.006E). Customary exceptions for rooftop height exceptions apply unique to medical facilities. Rooftop mechanical space may extend up to 25 FT above the height limit and cover up to 90% of the roof top.

Structure Setbacks

Setbacks are most important for the Swedish campus edges that border major arterials: Boren, Madison, Broadway and James. The setback standards are as follows (also see Figure 3.2):

- A minimum, heavily landscaped setback of 10 feet is established along the Boren and James frontages. The intent is to create a 'softened' landscape screen between the buildings and the high traffic volume arterials. The existing landscaping along Minor Avenue between James and Cherry is an example of the character of the landscaped setback desired. Note that right-of-way dedications at the time of future development may be required by the city along the Boren frontage. Setbacks are proposed from existing property lines.
- A minimum structure setback of 10 feet is established along the Madison Street frontage
 to enable widened sidewalks with street trees or other pedestrian amenities. The current
 sidewalk widths and improvements along the Madison frontage of the 1101 Madison Medical
 Tower is an example of the streetscape improvements desired.
- Structures along the Broadway frontage will have a minimum setback of 5 feet in combination with pocket park clusters of landscaping. The larger landscaped areas are to be located along Broadway at Madison, at Marion, and at Cherry. The distributed pattern will set a rhythm of landscaped spaces in conjunction with the main Swedish entrance drive.

Generally, no structure setbacks are required along interior campus property lines along streets or adjacent to other lots. New structure setbacks are to be no greater that existing structure setbacks. Setbacks may be provided with project designs to provide façade relief or open space/plazas but are not required. The intent is to blend new development with the existing to complete the urban campus composition. Continuity of the building street edge should be reinforced, particularly along the pedestrian oriented Madison Street corridor.

The Swedish setback development standards supersede the underlying zoning (23.45.096) and the major institution provisions of 23.69.030C3a. An Administrative Conditional Use Permit (ACUP) or other relief may be required and is included with the MIMP proposal. Structures or other improvements that are 100% below-grade are permitted within the setback areas. Incidental





No Setback

structures (such as fences, screen walls, architectural features, vents, gratings, etc.) customarily allowed in setback areas are permitted. The setback area may be covered by decorative pavings and/or landscaping.

Lot Coverage

The maximum structure lot coverage standard of the entire MIO District (not individual project sites) is 80%.

The existing campus-wide amount of lot coverage by existing structures is approximately 66%. The Planned and Potential Projects would result in approximately 73% coverage. The calculations are estimated based upon plan drawings and aerial photos. The standard is proposed to be somewhat greater than estimated for the proposed development because project details are unknown at this time.

Open Space & Landscaping

Multiple landscaped open spaces and paved plazas are currently located throughout the Swedish First Hill campus and amount to about 6% of the total campus land area. This does not include entry driveways, drop-off areas and paved parking. In addition, there are numerous street trees located within the public right-of ways within the campus area.

The urban nature of the Swedish campus with small, dispersed open spaces is proposed to be maintained in the master plan. The development standard for open space and landscaping is a minimum 5% of the total campus land area. The areas may be landscaped planted areas, or paved plazas or building setbacks. The areas may be at grade or above grade as long as they are accessible to the public. The standard applies to the entire MIO District and not to individual projects.

Small pockets of landscaping would be developed with projects along Broadway frontage. The angled street grid creates triangular pockets that are suitable for improved landscaping.

The existing open space at the hospital main entrance along Broadway is identified as "designated open space" and amounts to a minimum area of 0.5 acres (also see open space discussion with Planned Projects). Additional landscaping would be provided along Broadway at the northern end of the main entrance with re-development (Project C).

The dispersed pattern of open space on the Swedish campus is similar to the multiple small parks of First Hill. Swedish is coordinating its planning with the Seattle Parks and Recreation Department.

Height and Scale Transitions

No standards are provided for this element because compatibility of height and scale is effectively addressed by the location of the MIO Districts, with the greatest development intensity located in the central campus and reduced heights at the campus edges. The four major arterials around the campus also establish an adequate land use and development transition.

A design guideline is provided to reduce height/bulk/scale impacts at campus edges, particularly for proposed projects at James/Broadway, Madison/Broadway, Madison/Marion and Boren/Columbia: Scale reducing architectural measures, such as facade detailing, materials, transparency and modulation should reduce apparent building massing along campus edges. Appropriate project review by DPD and the standing CAC will occur during the project permitting process.

Width and Depth Limits

No width and depth limit standards are proposed in the master plan. The combination of other standards is sufficient to regulate building volumes. Height/bulk/scale impact mitigation is proposed for Project D at Broadway and James. Impacts from heights and facade locations would be mitigated by consideration of:

- · Modified ground-level building configuration
- Facade alignments
- Massing
- Architectural detailing
- Landscape pockets

Historic Preservation

There are no documented historically significant buildings or any designated landmarks on the Swedish First Hill campus. As part of the campus signage and wayfinding, Swedish may include plaques or signs with historical information about former buildings, sites or events.

Historical assessment research was completed by BOLA Architecture + Planning and is described in Section 3 of the EIS and in Appendix 7 of the EIS.

View Corridors

There are no designated view corridors in the area. The location and setting on First Hill establishes no significant view corridors. No view corridor standards are proposed.

Pedestrian Circulation

The provisions of the P1 Pedestrian Overlay District along the Madison Street frontage apply (affects Projects A and F). The overlay extends around the corner to mid block on Broadway. Swedish would comply with the use and development standards required in the overlay zone.

Streetscape and pedestrian amenity improvements are proposed along both Marion Street and Minor Avenue but no specific standards are provided.

Pedestrian circulation improvements will be consistent with the conceptual Pedestrian Circulation Plan. (see page 27, Figure 2.11).

C. Other Standards

Loading Berths

Relief from loading berth requirements and space standards (23.54.035) is included in the master plan. Specifically, the number of loading berths for the 'high demand' hospital use may be waived by DPD during project review. The proposed materials management and central plant project would allow internal 24-hour operation so the number of berths may not apply. Other exceptions for width, length and clearance of loading berths may be required because of the unique medical facility operations and the types of vehicles providing service.

Signs

In order to achieve the campus cohesive, design vision, exceptions may be required from strict application of signage standards (23.55). Strict adherence to sign standards is not required by this development standard. Specifically, the number, size, location of signs may be varied as long as DPD determines that public safety is protected. The off-premise sign provisions (23.55.014) do not apply to campus identity signage. Discretionary review by DPD will occur during project permit reviews. The more detailed signage design would support the campus wayfinding plan concept of the Design Precepts.

Lighting

A variation to standard SDOT street lighting and other City standards is allowed as long as public safety is not compromised, as determined by DPD during project reviews. For example, pedestrian scale lighting for safety, campus signage lighting for identity and art lighting may vary from strict code requirements by this development standard.

Landscaping/Open Space

Strict compliance with underling zoning landscaping and open space requirements is superseded by the master plan open space and landscape development standards. Exceptions to standards contained within the Seattle Street Improvement Manual may also be sought. DPD may allow the exceptions during project reviews.

Curb Cuts/Driveways

Relief from city requirements, and specifically the Seattle Street Improvement Manual Standards related to the size, location, number and clearances is included in the master plan. The proposed physical plant may require wide and/or multiple curb cuts to allow vehicular and service access/egress. The need for this and other facilities (parking, emergency department, etc.) requires flexibility to the strict application of city standards, particularly along streets internal to the First Hill campus. DPD, in consultation with SDOT, may allow project exceptions, through the MUP process.

Emergency Department Access

The proposed relocation of the Swedish emergency department includes access from local streets (Minor and Marion). This supersedes the requirements in the underlying zone which requires emergency department access to be located on an arterial.

4. Transportation Management Program

A. Intent

The intent of the Transportation Management Program (TMP) is to reduce impacts to the environment, such as air quality degradation and traffic congestion associated with traffic demands and parking generated by Swedish Medical Center (SMC). The TMP is the programmatic arm of the Transportation and Parking Element of the Master Plan. The TMP identifies strategies and actions that are intended to reduce parking and traffic demands associated with projected growth at the Swedish Medical Center campus. The TMP elements provide SMC staff and employees with incentives and disincentives to reduce or eliminate commuter trips in Single Occupant Vehicles (SOV).

B. Project Location

The Swedish Campus is located in the First Hill area of Seattle. The campus consists of several buildings in an area roughly bounded by Boren Avenue to the West, Madison Street to the North, Broadway to the East and James Street to the South.

C. Authority

This program is established as a requirement of the Major Institution Master Plan, Seattle Municipal Code 23.69.0030, and the State Environmental Policy Act (SEPA). The TMP shall be consistent with DCLU Director's Rule 14-2002, which establishes procedures for Transportation Management Programs. Director's Rule 14-2002 supersedes DCLU Director's Rule 2-94 and SED Director's Rule 94-3. This program requirement shall be a covenant running with the land as well as a condition of occupancy.

Swedish Hospital is also defined as a Major Employer by the requirements of Washington State's Commute Trip Reduction (CTR) Law which defines goals, reporting requirements and mandatory and optional program elements. The State required CTR program is different from the City of Seattle requirements for a TMP though the goal to reduce impacts of site generated vehicle trips is similar. Swedish will be subject to on-going review of it's CTR program in order to meet State mandated CTR requirements however the TMP does not specifically address CTR program requirements.

^{*} Description of the major institution's impact on traffic and parking is provided in the EIS

This document responds to the TMP requirements from DPD and SDOT. No additional TMP will be required for any use or development which has been approved in the Master Plan. If the Master Plan is amended to add new uses or development that would independently require the development of a TMP those uses or development may be subject to the requirement for preparation of a new or supplemental TMP for the use or development.

D. Existing Transportation Management Program

SMC has an existing TMP Memorandum of Agreement, which was entered into with SED and DCLU in 1993. Although this TMP along with CTR program requirements and review, has been very effective in reducing SOV travel demand, enhancements and additions to the TMP are proposed as part of this Master Plan to address the potential transportation impacts that could result from the proposed development included in this Master Plan. These are intended to achieve additional reductions in SOV travel and to reduce impacts associated with parking and traffic demands that would be associated with new development under the Master Plan.

The existing TMP is documented in a Memorandum of Agreement between SMC, the Seattle Engineering Department (SED), the Department of Construction and Land Use (DCLU), and the Municipality of Metropolitan Seattle (METRO). The Memorandum of Agreement identified program goals and elements as described below.

Program Goal

The goal of the TMP program on file with the City is to reduce the number of commuter trips in employee SOV to Swedish Medical Center to fifty percent (50%) or less of the total number of weekday, day shift commuter trips excluding employees whose work requires the use of a private automobile during working hours.

Program Elements

The elements of the Swedish Medical Center Transportation Management Program are described below:

Standard Required Elements for all TMPs include:

- 1. Provision of a Transportation Coordinator
- 2. Periodic Promotional Events
- 3. Provision of a Commuter Information Center
- 4. Tenant Participation in the program
- 5. Ridematch Opportunities
- 6. Annual Program Performance Reports
- Site and Access Improvements as required by Land Use Code or environmental impact mitigation

In addition to the Standard Required Elements for all TMPs additional elements may be required of specific projects. For Swedish Medical Center, the following additional elements are currently required:

- Provide and make available priority parking for carpools and vanpools to all campus employees.
- 2. Sell transit passes to employees at a reduced rate.
- Require tenants in the tower and Nordstrom Medical Office Building, such as the Medical Office Buildings on campus, to provide transit pass subsidies.
- 4. Establish reciprocal agreement with other major institutions on First Hill for carpool and vanpool programs.
- Offer a 25% discounted parking rate to carpools and eliminate parking charge for vanpools.
- 6. File quarterly reports with Seattle Commuter Services.
- 7. Establish a part-time carpool program aimed at regularly scheduled part-time employees.

E. Proposed Transportation Management Program

The TMP shall be consistent with the City's Director's Rules regarding TMP's (DCLU Director's Rule 14-2002). As specified in the Director's Rule, the TMP will consist of the following:

- TMP Goal
- · Required Elements

Program Goal

The goal of the new TMP will be to continue the existing program goal to reduce the number of SMC commuter trips in employee SOV to fifty percent (50%) of the total number of weekday, day shift commuter trips excluding employees whose work requires the use of a private automobile during working hours. Program participants will include all SMC employees meeting the following criteria:

- · arrive on weekdays between 6:00 am and 8:00 am
- leave on weekdays between 4:00 p.m. and 6:00 p.m.
- · do not require private vehicle to conduct their work assignments

Required Elements

Director's Rule 14-2002 includes a list of 29 required elements to be included in the TMP unless specifically waived by the Director in the approved TMP document. These required elements are listed below along with a brief description of how each will be incorporated in the proposed TMP. Those elements that are not applicable or are not included in the proposed TMP and are proposed to be waived are identified as such.

- Transportation Coordinator. A transportation coordinator (TC) will be appointed to
 implement the TMP. The TC will be available to employees and tenants during regular
 business hours to promote the TMP and stock the Commuter Information Center(s). The TC
 will receive training from the City.
- 2. Biannual Promotional Events. At least twice per year, the TC will organize and staff events to promote the TMP elements. The TC will be supported by King County Metro and the City. Information on the TMP will be provided to new employees.
- Commuter Information Centers. Commuter information centers (CIC), including ridesharing and transit information, will be located in convenient locations for employees. Bicycle and pedestrian information also will be included in the CICs.
- Tenant Participation in TMP. Tenant participation in the transit pass subsidy program shall be required.
- Ridematch Programs. The TC will promote and administer a ridematching service for employees.
- 6. Site and Access Improvements. The site and access improvements identified in Items 7, 8, 9, and 10 below will be implemented to assist in achieving the TMP goals.
- Height Clearance and Turning Radii for Vanpools. Design criteria for accommodating vanpool vehicles will be incorporated in the design for new garages in which vanpool parking will be provided.
- Secure Preferential Parking for Carpools and Vanpools. Preferential Parking will be designated for carpools and vanpools in secure locations.
- Secure Bicycle Parking. Covered bicycle racks will be provided in weather protected areas convenient to potential users including employees and visitors.
- 10. Shower / Locker Rooms. Showers and lockers will be made available for employees.
- 11. Pedestrian and Bicycle Links. Not applicable. The area's street grid system runs through the SMC campus. As a result, there is direct access from the campus facilities to any pedestrian and bicycle facilities on the public street grid system without the need for additional links.
- 12. Transportation Management Associations. SMC will continue to participate in the First Hill Transportation Network Group.
- 13. Parking Fees. Fees at SMC parking garages and lots will be reviewed annually in order to establish peak and off-peak rates to encourage non-SOV use.
- 14. Non-SOV Incentives/Subsidies. A discounted parking fee of at least 80% will be offered by SMC to each participating carpool member and vanpool parking will be free. SMC will

- provide a fully subsidized transit pass for any SMC employee commuting to work at SMC by transit. SMC will also provide a fully subsidized ferry pass for employees as walk on passenger.
- 15. Unbundling of Parking Charges from Tenant Leases. The price of parking spaces in SMC garages will not be included in tenant leases, but shall be priced separately from the cost of building space.
- 16. Alternative/Flexible Schedules. SMC will permit flexible hours or vary shift times to the extent possible to accommodate use of high occupancy vehicles to and from work.
- 17. Subscription Bus Services. SMC will continue to provide access to the First Hill Express service for its employees assuming that other participants in the service continue their participation.
- 18. Shuttle Services. No shuttle service is proposed to meet TMP goals.
- Telecommuting. Some departments will allow telecommuting if possible to reduce commute trips.
- 20. Reduced SOV Parking Supply. The total proposed parking supply of 5,180 stalls is 600 stalls less than the maximum allowed by code. HOV parking that will be provided for carpools and vanpools will to meet demand will replace SOV parking stalls.
- 21. Fleetpools. None is proposed to meet TMP goals. It is anticipated that the readily accessible regional and local transit service, in combination with carpools and vanpools, will be the primary means used to meet TMP goals.
- 22. Car-Sharing Programs. None is proposed to meet TMP goals.
- Guaranteed Ride Home. SMC will offer a guaranteed ride home for registered program participants.
- 24. Multifamily Building Requirements. Not applicable.
- 25. Additional Site and Access Improvements. See Items 7, 8, 9, and 10.
- 26. Off-Site Mitigation. None are proposed to meet TMP goals.
- 27. Residential Parking Zones. None are proposed to meet TMP goals.
- 28. Annual Program Reports. The TC will prepare and submit annual reports documenting the TMP programs and compliance with goals.
- 29. Biennial Surveys. Employee surveys will be conducted every two years to be used in measuring compliance with the SOV goals.

Table 4.1 summarizes the proposed changes to the TMP:

TABLE 4.1

Swedish Medical Center Transportation Management Program

Program Element	Current TMP Requirement	Proposed TMP	
Transportation Coordinator	Required	Same	
Promotions	One annually plus new employee orientation	Increase to two events annually plus new employee orientation	
Commuter Information Center	Required	Same	
Tenant Participation	Required	Same	
Ridematch program	Required	Same	
Site and Access Improvements	Required	Same	
Height and Turning Clearances for Vanpools	Not Included	New garages to accommodate vanpool access to designated vanpool parking	
Carpool/Vanpool Parking	Required but no specific number	To meet demand for registered carpools and vanpools	
Bicycle Parking	Required	Same	
Shower/Lockers	kers Not Included Provid		
Pedestrian/Bicycle Links	Not Applicable	Same - Not Applicable	
Transportation Management Associations	Not Included	Participate in First Hill Transportation Network	
Parking Fees	Not specific	Review annually to establish rate that encourages non SOV modes	
Non-SOV Subsidy	Requires unspecified subsidy of transit pass and 25% of vanpool and carpool parking	Fully subsidized transit passes, walk-on ferry passes, and vanpool parking, as well as discount of at least 80% per person for monthly pass for participating carpools	
Unbundling of Parking Charges	Not Included	Parking costs in SMC garages to be identified separately from cost of building in leases	
Flexible Work Schedule	Not Included	Accommodates where applicable	
Subscription Bus Service	Not Included	Participate in First Hill Express service	
Shuttle Service	Not Included	Same - Not Included	

Program Element	Current TMP Requirement	Proposed TMP
Telecommuting	Not Included	Accommodates where applicable
Reduced SOV Parking	Not Included	Parking supply will be less than code allowable. HOV stalls provided to meet HOV demand will replace SOV stalls
Fleetpools	Not Included	Same - Not Included
Car-Sharing Programs	Not Included	Same - Not Included
Guaranteed Ride Home (GRH)	Not required	Provides GRH benefit
Multi-Family Requirements	Not Applicable	Same - Not Applicable
Additional Improvements	Not Included	Same - Not Included
Off-Site Mitigation	Not Included	Same - Not Included
Residential Parking Zones	Not Included	Same - Not Included
Annual Program Reports	Required	Same
Biennual Surveys	Not Included	Survey to be conducted every two years

5. Appendix

A. Property Legal Description

Legal Description Of Swedish Health Services - Seattle First Hill Campus (Includes all property within City's Major Institution boundaries as of 1/22/2004)

Parcel 1 (East Wing/North And Northeast Wings/Old Tumor Institute/West Wing/southwest Wing):

Lots 1 through 8, inclusive, Block 120, A. A. Denny's Broadway Addition to the City of Seattle, according to the plat thereof recorded in Volume 6 of Plats, page 40, in King County, Washington;

TOGETHER WITH vacated alley in said Block 120, as described and vacated under Ordinance Number 53208 of the City of Seattle;

AND TOGETHER WITH the southwesterly half of vacated Summit Avenue adjacent to said block, lying southeasterly of the southeast line of Marion Street and northwesterly of the northwest line of Columbia Street, as described and vacated under Ordinance Number 89570 of the City of Seattle:

AND

That portion of Columbia Street and of Summit Avenue as vacated under Ordinance Number 101585 of the City of Seattle, and described as follows:

Beginning at the most southerly corner of Lot 8, Block 131, A. A. Denny's Broadway Addition, according to the plat thereof recorded in Volume 6 of Plats, page 40, in King County, Washington; thence south 59°22'43" west along the northwesterly line of Columbia Street to the most southerly corner of Lot 8, Block 120, said addition; thence south 30°35'29" east along the production of the southwesterly line of said lot, 66 feet to the most westerly corner of Block 101, Terry's Second Addition, according to the plat thereof recorded in Volume 1 of Plats, page 87, in King County, Washington; thence north 59°22'43" east along the northwesterly line of said block to the most northerly corner thereof; thence north 30°37'02" west along the production of the northeasterly line of said block, 0.012 feet to a point of curvature; thence northwesterly, northerly, and northeasterly along a curve to the right, having a radius of 66 feet, a distance of 103.66 feet to a point of tangency on the northwesterly line of Columbia Street, said point being the beginning;

AND

Lots 1, 2, 3 and 4, Block 101, Terry's Second Addition to the Town of Seattle, according to the plat thereof recorded in Volume 1 of Plats, page 87, in King County, Washington;

TOGETHER WITH vacated alley lying between said lots in Block 101, as described and vacated under Ordinance Number 5956 of the City of Seattle; EXCEPT that portion of said Lots 3 and 4 and vacated alley conveyed to the City of Seattle by deed recorded under Recording Number 7211170618;

TOGETHER WITH the northwesterly half of vacated public walkway in said Block 101, as described and vacated under Ordinance Number 110712 of the City of Seattle.

Parcel 2 (Surgery/heath Building/821 Boylsen/1317 Marion):

Lots 1 through 8, inclusive, Block 131, A. A. Denny's Broadway Addition to the City of Seattle, according to the plat thereof recorded in Volume 6 of Plats, page 40, in King County, Washington:

TOGETHER WITH vacated alley in said Block 131, as described and vacated under Ordinance Number 1941 of the City of Seattle;

AND TOGETHER WITH the northeasterly half of vacated Summit Avenue adjacent to said block, lying southeasterly of the southeast line of Marion Street and northwesterly of the northwest line of Columbia Street, as described and vacated under Ordinance Number 89570 of the City of Seattle.

Parcel 3 (Arnold Building):

Lots 2, 3, 6 and 7, Block 121, A. A. Denny's Broadway Addition to the City of Seattle, according to the plat thereof recorded in Volume 6 of Plats, page 40, in King County, Washington:

Parcel 4 (Bank And Shops):

Lots 1, 4, 5 and 8, Block 121, A. A. Denny's Broadway Addition to the City of Seattle, according to the plat thereof recorded in Volume 6 of Plats, page 40, in King County, Washington;

TOGETHER WITH all of the vacated alley in said Block 121, as described and vacated under Ordinance Number 103180 of the City of Seattle.

Parcel 5 (South Wing):

Lots 5, 6, 7 and 8, Block 101, Terry's Second Addition to the Town of Seattle, according to the plat thereof recorded in Volume 1 of Plats, page 87, in King County, Washington:

TOGETHER WITH vacated alley lying between said lots in Block 101, as described and vacated under Ordinance Number 5956 of the City of Seattle;

AND TOGETHER WITH the southeasterly half of public walkway in said Block 101, as described and vacated under Ordinance Number 110712 of the City of Seattle.

Parcel 6 (Cherry Street Garage):

Lots 1 through 8, inclusive, Block 96, Terry's Second Addition to the Town of Seattle, according to the plat thereof recorded in Volume 1 of Plats, page 87, in King County, Washington;

TOGETHER WITH vacated alley in Block 96, as described and vacated under Ordinance Number 106393 of the City of Seattle;

EXCEPT that portion of said Lots 7 and 8 and vacated alley conveyed to the City of Seattle for street purposes by deed recorded under Recording Number 9203131065.

Parcel 7 (Main Entrance):

Lots 1 through 4, inclusive, Block 132, A. A. Denny's Broadway Addition to the City of Seattle, according to the plat thereof recorded in Volume 6 of Plats, page 40, in King County, Washington.

Parcel 8 (Madison Street Garage/Madison Medical Office Building/ Summit Avenue Additions):

Lots 1 through 8, inclusive, Block 130, A. A. Denny's Broadway Addition to the City of Seattle, according to the plat thereof recorded in Volume 6 of Plats, page 40, in King County, Washington;

TOGETHER WITH vacated alley in said Block 130, as described and vacated under Ordinance Number 2776 of the City of Seattle;

AND TOGETHER WITH all of vacated Summit Avenue, as described and vacated under Ordinance Number 112631 of the City of Seattle;

EXCEPT the airspace lying above a horizontal plane at an elevation of 383.0 feet, City of Seattle Datum, over said lots and vacated alley:

AND EXCEPT the airspace lying above a horizontal plane at an elevation of 383.0 feet, City of Seattle Datum, over that portion of said vacated Summit Avenue described as follows:

Beginning at the intersection of the northerly margin of Marion Street and the easterly margin of said Summit Avenue; thence northerly along the easterly line of said Summit Avenue 77.00 feet; thence westerly, at right angles to Summit Avenue, 2.00 feet; thence southerly, parallel with the easterly margin of Summit Avenue 77.00 feet to the northerly margin of Marion Street; thence easterly along said margin 2.00 feet to the point of beginning.

Parcel 9 (601 Broadway):

Lots 1 through 8, inclusive, Block 100, Terry's Second Addition to the Town of Seattle, according to the plat thereof recorded in Volume 1 of Plats, page 87, in King County, Washington;

TOGETHER WITH vacated alley in said Block 100, as described and vacated under Ordinance Number 5956 of the City of Seattle.

Parcel 10 (Shmc Eye Institute):

Lots 1, 2, 3 and 5 in Block 134 of A. A. Denny's Broadway Addition to the City of Seattle, according to the plat recorded in Volume 6 of Plats, page 40, in King County, Washington.

Parcel 11 (Northwest Garage And Mob):

Lots 1 through 8, inclusive, Block 119, together with vacated alley adjoining said lots, A. A. Denny's Broadway Addition to the City of Seattle, according to the plat thereof recorded in Volume 6 of Plats, page 40, records of King County, Washington.

Parcel 12 (Invex Building/invex Garage):

Lots 1 through 5, inclusive, Block 95, Terry's Second Addition to the Town of Seattle, according to the plat thereof recorded in Volume 1 of Plats, page 87, records of King County, Washington.

Parcel 13 (Cherry Building):

Lots 6 and 7, Block 95, Terry's Second Addition to the Town of Seattle, according to the plat thereof recorded in Volume 1 of Plats, page 87, in King County, Washington.

Parcel 14:

Lot 8, Block 95, Terry's Second Addition to the Town of Seattle, according to the plat thereof recorded in Volume 1 of Plats, page 87, in King County, Washington.

The following parcels, which are owned by entities other than Swedish Medical Center, are located within Swedish's major institution boundaries as established by the City of Seattle pursuant to the Major Institution Land Use Code (Ch. 23.69 SMC):

Parcel 15 (Eklind Hall):

Lots 1 through 8, inclusive, Block 94, Terry's Second Addition to the Town of Seattle, according to the plat thereof recorded in Volume 1 of Plats, page 87, in King County, Washington;

TOGETHER WITH vacated alley in Block 94, as described and vacated under Ordinance Number 73797 of the City of Seattle.

Parcel 16:

Lot 4, Block 134, A. A. Denny's Broadway Addition to the City of Seattle, according to the plat recorded in Volume 6 of Plats, page 40, in King County, Washington.

Situate in the County of King, State of Washington.

TABLE 5.1

Swedish First Hill Campus Property Ownership

Map Ref.	Assessor Parcel Number	Description	Address	Owner	Land Area	Existing Use/ Year Built/ Construction Type
A*	197820 -0625	Denny's AA Broadway Addition Block 119 Lots 1-8	1101 Madison St.	Swedish Health Services	61,440 SF 1.41 acres	Medical Office and Parking 1992 Reinforced Concrete
В	197820 -0670	Denny's AA Broadway Addition Block 121 Lots 1 & 4 & vacated alley portion	1223 Madison St.	Swedish Health Services	14,400 0.33 acres	Bank and Retail 1976 Concrete Reinforced
С	197820 -0691	Denny's AA Broadway Addition Block 121 Lots 5 & 8 & vacated alley portion	900 Minor Ave.	Swedish Health Services	11,520 SF 0.26 acres	Surface Parking
D.	197820 -0675	Denny's AA Broadway Addition Block 121 Lots 2.3.6.7 & vacated Summit portion	1221 Madison St.	Swedish Health Services	28,800 SF 0.66 acres	Arnold Medical Pavilion 1976 Structural Steel
E*	197820 -1015	Denny's AA Broadway Addition Block 130 Lots 1-8 & vacated Summit portion	1229 Madison St.	Swedish Health Services (garage) Office is condo ownership	37,951 SF 0.87 acres	Nordstrom Medical Tower and Garage 1985 Reinforced Concrete

^{*} Building sold to Health Care Property Investors, Inc. (Arnold 9th floor and above). Swedish owns the property.

Map Ref.	Assessor Parcel Number	Description	Address	Owner	Land Area	Existing Use/ Year Built/ Construction Type
F	197820 -1116	Denny's AA Broadway Addition Block 134 Lots 1,2,3	1401 Madison St.	Swedish Health Services	20,040 SF 0.46 acres	Alcoa Office Building 1962 Reinforced Concrete
G**	197820 -1130	Denny's AA Broadway Addition Block 134 Lot 4	906-910 Boylston Ave.	Fredrick & Rochelle Casserd	6,720 SF 0.15 acres	Clinic 1966 Wood Frame
н	197820 -1135	Denny's AA Broadway Addition Block 134 Lot 5	900 Boylston Ave.	Swedish Health Services	4,500 SF 0.10 acres	Offices 1946 Masonry
·-	859090 -0646	Terry's 2nd Addition Block 94 Lots 1-8	1100 Columbia St.	Alexandria Real Estate	61,440 SF 1.41 acres	Lab - 1945 Structural Steel Research Bldg. 1975 Structural Steel Lab - 1982 Reinforced Concrete
J	197820 -0665	Denny's AA Broadway Addition Block 120 Lots 1-8 & vacated alley portion	805 Summit Ave.	Swedish Health Services	78,897 SF 1.81 acres	Hospital 1912 Reinforced Concrete
К	197820 -1055	Denny's AA Broadway Addition Block 131 Lots 1,4-8 & vacated street & alley portion	801 Broadway	Swedish Health Services	50,482 SF 1.16 acres	Surgery Garage Heath Medical Office 1970 Reinforced Concrete

^{**} Not owned by Swedish

Map Ref.	Assessor Parcel Number	Description	Address	Owner	Land Area	Existing Use/ Year Built/ Construction Type
L	197820 -1060	Denny's AA Broadway Addition Block 131 Lots 2 & 3 & vacated alley portion	819 Boylston Ave.	Swedish Health Services	15,360 SF 0.35 acres	Offices 1946 Masonry
М	859090 -0685	Terry's 2nd Addition Block 95 Lots 1,4,5	722 Boren Ave.	Swedish Health Services	21,600 SF 0.50 acres	Invex Garage 1974 Reinforced Concret
N	859090 -0690	Terry's 2nd Addition Block 95 Lot 2 & 3	1115 Columbia St.	Swedish Health Services	14,400 SF 0.33 acres	Invex Office 1956 Masonry
0	859090 -0721	Terry's 2nd Addition Block 95 Lot 8	702 Boren Ave.	Swedish Health Services	4,500 SF 0.10 acres	Vacant Building Open Space
Р	859090 -0710	Terry's 2nd Addition Block 95 Lots 6 & 7	1120 Cherry St.	Swedish Health Services	14,400 SF 0.33 acres	Medical Offices 1959 Masonry
Q	859090 -0951	Terry's 2nd Addition Block 101 Lots 1 &4 & vacated street portion	747 Broadway	Swedish Health Services	14,157 SF 0.33 acres	Hospital SW Wing 1975 Reinforced Concrete
R	859090 -0950	Terry's 2nd Addition Block 101 Lots 1,2,3,4 & vacated alley portion	747 Broadway	Swedish Health Services	13,781 SF 0.32 acres	Hospital SW Wing 1975 Reinforced Concrete

Map Ref.	Assessor Parcel Number	Description	Address	Owner	Land Area	Existing Use/ Year Built/ Construction Type
S	197820 -1096	Denny's AA Broadway Addition Block 132 Lots 1,2,3,4 & vacated street portion	747 Broadway	Swedish Health Services	28,573 SF 0.66 acres	SE Addition Hospital Garage - 1994 Reinforced Concrete
T	859090 -0970	Terry's 2nd Addition Block 101 Lots 5,6,7,8 & vacated alley portion	747 Broadway	Swedish Health Services	36,125 SF 0.83 acres	Hospital Tower 1999 Structural Steel
U	859090 -0725	Terry's 2nd Addition Block 96 Lots 1-8 & vacated alley portion	612 Boren Ave.	Swedish Health Services	60,885 SF 1.4 acres	Minor & James Garage 1979 Reinforced Concrete
v	859090 -0860	Terry's 2nd Addition Block 100 Lots 1-8 & vacated alley portion	601 Broadway	Swedish Health Services	49,740 SF 1.14 acres	Annex Offices 1959 Reinforced Concrete
w	197820 -1115	Denny's AA Broadway Addition Block 133	702 Broadway	City of Seattle Parks Dept.	165 SF	Median Open Space

Total Swedish First Hill Campus Land Area (Total MIO District that includes non-Swedish owned property and excludes public ROW's) 649,876 SF 14.92 acres



NOTE: Parcels with map reference 'G' and 'I' are not owned by Swedish.

Other owned/leased space within 2,500 feet of the First Hill campus is limited to 1) 600 Broadway property - building and garage sold, 2) the Providence campus (500 17th Ave), 3) a leased clinic downtown (1001 4th Ave, Suite 420), and 4) leased administrative office space at the Metropolitan Park building downtown.

B. Process Milestones

1. Application/Scoping

December 10, 2003	File Notice of Intent to prepare master plan (Swedish)
January 2003	Initiate establishment of Citizen Advisory Committee (DON/DPD/Swedish)
February 9, 2004	Conduct Pre-Application Conference with DPD leadership
March 22, 2004	Conduct Pre-Application Conference with DPD staff
March 26, 2004	Submit Concept Plan Application for master plan (Swedish)
May 2003	Define DPD/DON/Swedish acceptable schedule
May 13, 2004	Recommend CAC membership to City Council (DON)
May 24, 2004	Conduct CAC Meeting #1 (Orientation, Concept Plan review, EIS scoping)
May 6, 2004	Issue SEPA Threshold Determination of Significance (DS) and Initiate EIS Scoping
May 26, 2004	Conduct Public Scoping meeting
June 4, 2004	Complete public EIS scoping comment period
June 10, 2004	Determine EIS scope (DPD)
June, 16 2004	Conduct CAC Meeting #2
July, 2004	Confirm CAC membership (City Council)
July 14, 2004	Conduct CAC Meeting #3

2. Draft MIMP/Draft EIS

August 12, 2004	Prepare & submit preliminary Draft Master Plan (within 70 days of finalization of EIS scope)
August 12, 2004	Prepare & submit preliminary Draft EIS (within 70 days of finalization of EIS scope or EIS consultant contract)
August 18, 2004	Conduct CAC Meeting #4
September 8, 2004	Conduct CAC Meeting #5
September 13, 2004	Review/Comment on Draft Master Plan and Draft EIS (CAC, SDOT, DPD due within 3 weeks of document receipt)
September 16, 2004	Submit compiled list of all comments (DPD to Swedish, within 10 days of receipt of all comments)
September-October, 2004	Review comments & revise Draft EIS (within 3 weeks of receipt of compiled comments)
October 11, 2004	Submit revised Draft Master Plan and revised Draft EIS (Proof copies)
October 13, 2004	Conduct CAC Meeting #6
October 2004	Review/Comment on revised Draft Master Plan and revised Draft EIS (within 3 weeks of receipt of revised drafts)
November 2004	Complete final revisions of Draft Master Plan and Draft EIS & prepare for publication (3 additional weeks to revise/publish)
November 10, 2004	Conduct CAC Meeting #7
November 15, 2004	Issue Draft Master Plan and Draft EIS to public, with notices
December 8, 2004	Conduct CAC Meeting #8
December 15, 2004	Conduct public review and hearing (required 30 days and may be extended to 45 days)
December 20, 2004	Review and comment due on Draft Master Plan and Draft EIS (CAC, SDOT, DPD, comments within 6 weeks of documents issuance)

3. Final MIMP/Final EIS

January 12, 2005	Conduct CAC Meeting #9
January 31, 2005	Prepare & submit preliminary Final Master Plan (within 13 weeks of receipt of comments)
January 31, 2005	Prepare & submit preliminary Final EIS (within 6 weeks of receipt of comments)
February 9, 2005	Conduct CAC Meeting #10
February 28, 2005	Complete review/comment on preliminary documents (CAC, SDOT, DPD)
March 9, 2005	Conduct CAC Meeting #11 (May be postponed until after Final MIMP/EIS issuance).
March 14, 2005	Revise and issue Final Master Plan (within 7 weeks after preparation of the preliminary Final Master Plan)
March 14, 2005	Revise and issue Final EIS (within 7 weeks after preparation of the preliminary Final EIS)

4. Decisions and Actions

NOTE: FOLLOWING DATES ARE SCHEDULED, NOT YET COMPLETED, AND SUBJECT TO CHANGE. NOTE: CAC MEETINGS TO BE DETERMINED.

April 18, 2005	Prepare/Issue Draft DPD Director's Report (within 5 weeks of publication of Final Master Plan and Final EIS)
April 18, 2005	Prepare/Issue Draft CAC Report (at same time as Draft Director's Report)
May 2, 2005	Review and comment by CAC of Draft Director' Report (within 3 weeks of receipt of draft)
May 16, 2005	Prepare/Issue Final DPD Director's Report/recommendations and submit to CAC (within 2 weeks of receipt of CAC comments)
May 30, 2005	Prepare/Issue Final CAC Report/recommendations (within 2 weeks of receipt of Final Director's Report)

June 6, 2005	Submit DPD Director's recommendations and CAC report to Hearing Examiner/Notice of Hearing
June-July 2005	Review by Hearing Examiner of record and conduct public hearing
July-August 2005	Prepare/Issue Hearing Examiner's Report/Recommendations and submit to Council (within 30 days of hearing)
July-August 2005	Possible request for further consideration to Council
August-November 2005	Review and action (ordinance) by City Council (goal of 3 months after receiving Hearing Examiner's Report/recommendations)
November 2005	Possible appeal/challenge to King County Superior Court
November-Dec 2005	Prepare and submit draft Compiled Plan (within 30 days of master plan adoption)
December 2005	Review and comment by DPD Director (within 30 days of receipt of draft)

Process completed (total elapsed time approximately two years)

Complete and Issue approved final Compiled Plan

January 2006

C. Swedish Citizen Advisory Committee (CAC)

(Confirmed by Seattle City Council in July 2004)

Beverly Baker

Nurse/Swedish Medical Center

James Rothwell

Resident/Architect—CAC Chairperson

Greg Harris

Resident/Attorney/SU CAC

Jeff Myrter

Manager Nordstrom Medical Tower

Jerry O'Leary

Resident/Attorney

Eric Bultemeier

Resident/Civil Engineer

Robert W. Fenn

Seattle University Facilities Director

Deborah M. Gibby

Resident, Chair First Hill Community Council—CAC Vice Chairperson

Kristi Drebick Brown

Alexandria Real Estate/Seattle Life Sciences Center

Dr. Stephen Jones

Pastor Seattle First Baptist Church

Betsy Mickel

Northwest Kidney Center

Bill Clancy

Resident/Banker

Alternates:

Anne Parry

Resident

Hal Steiner

Resident / Baroness Hotel Manager

Donald A. Moody

Resident

D. C	omparison	of Zoning	Develo	pment S	tandards
				200	

	Highrise (HR)	Midrise (MR)	NC-3 85	NC-3 160	P-1 Ped. Overlay	Current Swedish Master Plan Standards (Ordinance #111993)	Proposed Swedish Master Plan Standards
Maximum Height	160 feet; 240 feet w/ public benefits	60 feet	85 feet	160 feet	NA	70 feet; 90 feet; 200 feet; 240 feet	70 feet; 90 feet; 105 feet; 200 feet; 240 feet
Setbacks	Front: Average of structs. on adjoining lots; but not to exceed 20 feet	Front: Average of structs. on adjoining lots; but not to exceed 20 feet	15 feet triangular setback where NC lot abuts side/front lot line of res. zone;	15 feet triangular setback where NC lot abuts side/front lot line of of res. zone;	NA	Based on façade height and zone across street, lot or alley; None on Madison, James and Broadway; 0-20 feet along Boren; 0-20 feet along internal streets	10 feet along Boren, Madison, James; 5 feet along Broadway; none along internal campus streets
	Rear: 20 feet Side: 5 feet, except 10 feet min. side street or abut res. zone; 14 feet setback for struct. 91-120' height; 16 feet setback for struct. >120' height; additional side setbacks on sliding scale if >65' depth	or abut res. zone;	Rear & Side: req. if NC zone lot abuts res. zone; 0 feet setback where <13' ht, 10 feet setback 10'-65' ht, 1 foot setback for every 10'> 65' ht;	Rear & Side: req. if NC zone lot abuts res. zone; 0 feet setback where <13' ht, 10 feet setback 10'-65' ht, 1 foot setback for every 10'> 65' ht;		Exceptions: Block 95: 12 feet for garage; No setbacks for Blocks 119, 121, 130, or 134 for Marion Garage step-backs 10 feet/story along Madison, James, Broadway, and Boren	
Maximum density (FAR)	None	None	FAR 6 mixed use; FAR 4.5 single use	FAR 7 mixed use; FAR 5 single use	NA	None	FAR 5.5 for total campus
Maximum Lot Coverage	None but open space controls; effective 50-75%	None but open space controls; effective 60-90%	None;	None;	NA	None	80% for total campus

	Highrise (HR)	Midrise (MR)	NC-3 85	NC-3 160	P-1 Ped. Overlay	Current Swedish Master Plan Standards (Ordinance #111993)	Proposed Swedish Master Plan Standards
Open Space	50% lot area; may be reduced to 25% at grade	25% to 40% of lot area; minimum 10% at grade	None	None	NA	Street trees along Madison and Boren and other perimeter streets; per landscape plan (Exhibit G)	Minimum 5% of total campus 0.5 acre designated open space along Broadway
Modu- lations & Width/ Depth Limits	Max. 90 feet width for facades < 37' height w/o modulation; Max. 100' width for facades > 3 w/o modulation. No max. width and mod. only for first 60' of facade for facades > 37' height w/ modulation. Maximum depth = 65%	7' n		None	Maximum 30 foot blank façade length	None	None
Street Level Uses	NA	NA	NA	NA	Retail/ comm- ercial along Madison and corner at Broadway Restricts parking and curbcuts	Retail/commercial along Madison	Retail/commercial along Madison
Other							
Location of ED Access	Only on an arterial	Only on an arterial	٠	2	2	Any new ER entrance need not be on arterial	Any new ER entrance need not be on arterial
Light/ Glare	Standards apply	Standards apply	Standards apply	Standards apply	NA	Per code: No glare analysis required if materials used <20% reflectance	As proposed in MIMP

Parking Access and Location	Standards apply	Standards apply	Standards apply	Standards apply	Standards apply	No entrances or exits for new parking garages on James, Boren Broadway & Madison	As proposed in MIMP
Odor	Standards apply	Standards apply	Standards apply	Standards apply	NA	NA	Code provisions apply
Noise	Standards apply	Standards apply	Standards apply	Standards apply	NA	Per code	Code provisions apply
Loading	Standards apply	Standards apply	Standards apply	Standards apply	Standards apply	Based on actual utilization as determined by SED	As proposed in MIMP
Signage	Standards apply	Standards apply	Standards apply	Standards apply	NA	NA	As proposed in MIMP
Land- scaping	Standards apply	Standards apply	5% at grade for new construction on vacant lots	5% at grade for new construction on vacant lot	NA s	Per MIMP Landscaping Plan (Exhibit G)	As proposed in MIMP