



## **LMA STRATEGIC PLANNING SUMMARY OF ADVISOR COMMENTS**

### **JAMES JENNINGS (Community Planning)**

#### Planning framework goals

- Leverage potential & actual resources
- Balance neighborhood & LMA needs
- Maintain city competitiveness
- Discourage focus on individual institutional needs

#### General observations/suggestions

- Explore regional approach to economic development  
Explore workforce & housing,
- Link LMA development planning with housing, education & workforce needs
- Clarify needs and characteristics of hospital, medical school, and biotech sectors to LMA future.

#### Next Steps

- Update/revise Interim Guidelines
- Develop mechanism for greater community participation to advance City/LMA relationship

### **JANE GARVEY (Transportation)**

#### General

- Continue dialogue with community & their representatives; very beneficial
- Gather community input for revision of Interim Guidelines
- Encourage all LMA institutions to understand each other's needs.
- In the end, all of this is hugely dependent on relationships....with the community, the institutions and the "T" to name a few. It demands a great commitment on the part of a few individuals from the City or the BRA to invest in those relationships. It's very time-consuming but in the end the benefits are worth it.

#### Balancing Transportation Capacity & Demand

- Involve MBTA regarding increasing T capacity
- Tie growth with incentives as part of a holistic approach to furthering housing & workforce needs

#### Short, Medium & Long Term Implementation & Funding Strategies

##### Short-Term

- Multi-pronged transportation management & improvement strategy; small projects can have an impact. Give LMA a tune-up
- Ratchet up short-term traffic demand management strategies

##### Medium-Term

- Take inventory of project impacts and benefits *in order to...*

#### Long-Term

- Engage LMA in Urban Ring planning & design phases

#### Next Steps

- Develop enhanced Transportation Demand Management (*TDM*) strategies
- Create institution & community coalition to champion Urban Ring
- Talk with MBTA about Urban Ring phasing options

### **NICK RETSINAS (Community Planning/Housing)**

#### Housing

- Encourage a stronger line of communication between LMA & surrounding community
- Multiple & conflicting agendas
- Need to develop common vocabulary, shared acceptance of facts, & continue the dialogue
- BRA should broker, seek compromise not consensus
- Need workforce & community demographics
- Allow LMA housing only with substantial affordable housing component
- Encourage institution/community joint ventures of housing, including elsewhere

#### Next Steps

- Create forum for conversations between LMA & community on achieving shared goals
- Identify and map potential housing sites in area for discussion with the community and institutions

### **BOB ATLAS (Medical and Healthcare Industry)**

#### Healthcare Industry Issues

- Need additional data to determine if LMA is at capacity
- Transportation & parking constraints will worsen with growth & potentially encourage some patients to go elsewhere
- Added costs for equipment due to specialized health care becoming more high-tech
- Explore locating some functions elsewhere, recommend close proximity & densification
- Institutions should provide basic healthcare services to community
- Hospitals must avoid anti-trust violation
- Unlike typical hospitals, LMA ones appear to benefit very substantially from NIH grants; some more vulnerable than others though

#### Institutional Master Planning (IMP)

- Suggest change to IMP for LMA to require reporting more often to BRA on, a lower threshold
- The IMP process should be structured using criteria tied to community impacts.

#### Next Steps

- BRA collaborate with DPH to gain more control over the regulation of "new technology" & "innovative services" stemming from the required "Determination of Need"
- Include health insurers in discussions to keep health costs down by avoiding over-development

### **MEREDITH SPEAR (Medical and Healthcare Industry)**

#### Healthcare Industry Perspective

- Emphasize medical care function (patients and their families) - patient comfort & convenience above all other planning objectives
- Patients need to drive or be driven to LMA; other cities require 1.5 to 3.0 spaces/1,000 SF
  - Simple traffic patterns & clear signage within buildings
  - Shorter internal and external walking distances
- Education & research flourish due to clinical destination

#### Growth

- LMA not at capacity now; really about tolerating more buildings, traffic, workers, patients
- Institutions seeking more efficient, robust buildings
- Advocate for economically sound development that enhances both utilization of key real estate and quality of building stock (more "green" facilities), and ensures continued vitality

#### Interim Guidelines

- More performance based rather than metrics based. For example;
- Distinction between planning and design review; planning guidelines and review should focus more on what institutions want to do and less on how they're physically going to do it
- City should know early on whether a project is *conceptually problematic* rather than architecturally problematic; otherwise, tacit acceptance is implied
- LMA "threat" businesses and functions that do not share or directly serve the core mission of LMA institutions
- BRA should challenge institutions to offer up a shared vision for 2020 at least in terms of uses for their real estate

#### Next Steps

- Need better data set with realistic growth projections
- Need to know how many "replacement" structures without growth, and development necessary to accommodate realistic growth projections

### **ALEX KRIEGER (Urban Design)**

- Pedestrian bridges might serve institutional collaboration and sharing of facilities, reduce auto/pedestrian conflicts
- High density housing on or near campus should be encouraged as well as convenience retail and transit improvements
- Streetscape improvements to provide comfort
- More vest pocket parks
- Grant first right of refusal to existing institutions to avoid Merck-like deals
- As-of-right zoning might have been more beneficial than project by project approval through negotiation and special permit
- City should leverage the combined strength of LMA institutions with BU, Harvard, MIT, Boston Medical Center, etc. by bringing their CEOs to lobby the Governor and Congress; use tiny percentage of endowments as collateral for the Urban Ring

#### Next Steps

- Need to assess LMA historic growth versus that of other large institutions over similar periods of time
- Need data to assess changes in housing stock, number of residents, acreage, open space, etc.

## **STEVE GUNDERSON (Workforce)**

### Next Steps

- Workforce goals and priorities from community
- Breakdown of assumptions for 36% employment growth MASCO estimate
- What present and projected skill sets are desired for workforce
- National and regional employee recruitment projections
- Impact of projected annual incomes on local housing market
- Existing inventory of technical and career education available today
- Resources available to finance career/technical education initiative

## **ROY BUDD (Workforce)**

### Next Steps

- Status of MASCO workforce survey
- List of workforce partnerships
- Job profiles of most sought after job position in demand by LMA
- Outreach efforts of MASCO to traditional and non-traditional community groups