October 4, 2019

Ms. Malaina Bowker
Associate Director, Facilities Master Planning
Brigham and Women’s Faulkner Hospital
1153 Centre Street
Boston, MA 02130

Re: Scoping Determination for the proposed Brigham and Women’s Faulkner Hospital Institutional Master Plan and Proposed Inpatient Addition, East Parking Garage Addition, and Replacement West Garage Projects

Dear Ms. Bowker:

Please find enclosed the Scoping Determination for the proposed Brigham and Women’s Faulkner Hospital ("Faulkner") Institutional Master Plan and Proposed Inpatient Addition, East Parking Garage Addition, and Replacement West Garage Projects. The Scoping Determination describes information required by the Boston Planning & Development Agency in response to the Institutional Master Plan Notification Form/Project Notification Form ("IMPNF/PNF"), which was submitted under Article 80D and Article 80B of the Boston Zoning Code on July 26, 2019 by Faulkner. Additional information may be required during the course of the review of the proposals.

If you have any questions regarding the Scoping Determination or the review process, please contact me at (617) 918-4422.

Sincerely,

Edward Carmody
Project Assistant

CC: Jonathan Greeley, BPDA
        Jerome Smith, Mayor’s Office of Neighborhood Services
PREAMBLE

On July 26, 2019, Brigham and Women’s Faulkner Hospital (“Faulkner”) submitted to the Boston Planning & Development Agency (“BPDA”) an Institutional Master Plan Notification Form/ Project Notification Form (“IMPNF/PNF”) seeking approval of a Faulkner Hospital Institutional Master Plan (“IMP”) and detailing the proposed Inpatient Addition, East Parking Garage Addition, and Replacement West Garage for its Campus at 1153 Centre Street in Jamaica Plain, a site bounded by Centre Street, Whitcomb Avenue, residential properties along Malcolm Road, and Allandale Street. The Campus seeking IMP review also includes a site at 1245 Centre Street in West Roxbury. The Inpatient Addition is proposed to be located on the southern side of the Main Building; the East Parking Garage Addition is proposed to include three additional levels on top of the existing East Parking Garage; and the Replacement West Garage, including a driveway connection to Allandale Street, is proposed to be located on the site of an existing 131-space surface parking lot, while the existing West Parking Garage is proposed to be demolished and replaced with an approximately 91-space surface parking lot (“Proposed Projects”).

The BPDA will review the proposed IMP and Draft Project Impact Report (“DPIR”) pursuant to Sections 80D and 80B of the Boston Zoning Code (“Code”). As part of the BPDA’s Article 80 review, Faulkner is required to prepare and submit to the BPDA a proposed IMP pursuant to Section 80D and a proposed DPIR pursuant to Section 80B. The documents must set forth in sufficient detail the planning framework of the institution and the cumulative impacts of the Proposed Projects included in the IMP to allow the BPDA to make a determination about the merits of the proposed IMP and Proposed Projects. The proposed IMP and DPIR shall contain the information necessary to meet the specifications of Article 80 as well as any additional information requested below.
Copies of the IMPNF/PNF were made available to the public in both electric and hard copy format. A Task Force Meeting was held on August 1, 2019, and a Public Meeting was held on August 14, 2019 at which the Proposed Projects were presented, and a Scoping Session was held on August 20, 2019 with public agencies. The comment deadline for the IMPNF/PNF was September 20, 2019.

Based on review of the IMPNF/PNF, related comments, as well as a Scoping Session and Public Meeting, the BPDA hereby issues its written Scoping Determination ("Scope") pursuant to Section 80D and Section 80B of the Code. Faulkner is requested to respond to the specific elements outlined in this Scope. Written comments constitute an integral part of the Scoping Determination and should be responded to in the IMP, DPIR or in another appropriate manner over the course of the review process. At other points during the public review of the IMP and DPIR, the BPDA and other City agencies may require additional information to assist in the review of the Proposed IMP and DPIR.

To facilitate the preparation and review of the two documents referenced above, the Scope contains two discrete sections, one setting forth the submission requirements for the IMP, and another setting forth the submission requirements for the DPIR. When appropriate, information requested in one section may be provided in the submission that responds to the other section.

In addition to the specific submission requirements outlined in the sections below, the following general issues should be noted:

- All development projects have construction impacts. As with any urban development there needs to be a balance of construction related inconveniences with the daily activities that will continue to occur adjacent to the project site. Specifically, impacts on rodent populations and noise impacts will be more deeply felt by many of the older residents in the area. A detailed approach to the construction management must be included in the DPIR.

- Throughout this initial phase of review, the Proponent has taken steps to meet with local residents, elected officials, abutters, and City and State agencies. These conversations must continue, ensuring that what is presented in the DPIR is beneficial to the adjacent neighborhoods and the City of Boston as a whole.

- To this point, a designated community liaison at Faulkner is advisable for this project and continuing through future campus planning endeavors as well as ongoing neighborhood communications and partnership work. This would go a long way toward building trust with the adjacent residential community.
The BPDA encourages the Proponent to continue to work closely with City agencies, including the Boston Transportation Department (“BTD”). In particular, collaboration with the Transportation Demand Management (TDM) program and coordinator is strongly encouraged to enhance Faulkner’s current transit, parking management, and other TDM measures.

Staff and community concern has surrounded justification for the amount of parking proposed. The DPIR should provide a breakdown of the proposed parking and its impacts on existing shuttle and remote parking locations. A full understanding of existing parking utilization must be provided.

Considerable concern has been raised regarding the existing traffic conditions on Allandale Street, particularly at the intersection with Springhouse given sightlines along the bend in Allandale and dangerous driver behavior. Please consider how the proposed driveway could be used as a way to mitigate these concerns.

The widespread concerns regarding existing conditions on Allandale Street have brought to light the need for a comprehensive study of campus circulation and a more detailed explanation of the proposed driveway’s impacts on circulation. Alternative means to achieve the goals of improved campus vehicular circulation should also be explored and made explicit.

Following the above, a detailed signage and wayfinding plan should be developed as part of the strategy for improving vehicular as well as pedestrian circulation issues and improving patient and visitor wayfinding.

Accessible pedestrian access – particularly vital at a healthcare facility of this size and in a community with many older residents – needs to be contemplated further at several points throughout and adjacent to campus. This includes staff and community desire for a sidewalk along the campus’s Allandale Street edge and improved access from Centre Street and the MBTA bus stop. Please see the comment letter from the Mayor’s Commission for Persons with Disabilities.

An Institutional Master Plan should include long-term campus planning goals and outline any preliminary thinking on future projects that may be contemplated over the next ten years. Nearby residents have expressed significant concern over the 1245 Centre Street site, specifically regarding its sensitive location abutting the Allandale Woods and Urban Wilds. This ecological system is an asset to the community and Boston at large. Any information on future potential uses on this site as well as the main campus should be referenced in the IMP.
- Abutters have expressed significant concern over the loss of mature trees on the main campus at the site of the proposed West Garage. These trees are not only a critical landscape buffer between the Faulkner campus and residential properties, but they provide inherent environmental benefits for nearby residents and hospital visitors. A detailed study of existing trees that would be lost and a plan for replacement and rehabilitation of the mature canopy on campus should be included in the DPIR.
SUBMISSION REQUIREMENTS

FOR THE

BRIGHAM AND WOMEN’S FAULKNER HOSPITAL IMP

The Scope requests information required by the BPDA for its review of the proposed IMP in connection with the following:

1. Approval of the Faulkner IMP pursuant to Article 80D and other applicable sections of the Code.

2. Recommendation to the Zoning Commission for approval of the Faulkner IMP.

The Faulkner IMP should be documented in a report of appropriate dimensions and in presentation materials which support the review and discussion of the IMP at public meetings. Ten (10) hard copies of the full report should be submitted to the BPDA, in addition to an electronic version in .pdf format. Hard copies of the document should also be available for distribution to the Faulkner Task Force, community groups, and other interested parties in support of the public review process. The IMP should include a copy of this Scoping Determination. The IMP should include the following elements:

MISSION AND OBJECTIVES

- **Organizational Mission and Objectives.** Define Faulkner’s institutional mission and objectives, and describe how the development contemplated or proposed in the IMP advances the stated mission and objectives.

- **Major Programs and Initiatives.** Update any major programs or initiatives that will drive physical planning in the future. Included in the description should be current and future trends that are impacting Faulkner and shaping program objectives, employment numbers, number of beds, etc. Provide any updates to Faulkner’s current employee population, disaggregated by faculty/staff, full-time/part-time, Boston residents/non-residents, as well as projected employment over the term of the new IMP.

EXISTING PROPERTY AND USES

The IMP should present applicable updated maps, tables, narratives, and site plans clearly providing the following information:

- **Owned and Leased Properties.** Provide an updated inventory of land, buildings, and other structures in the City of Boston owned or leased by Faulkner as of the date of submission of the IMP, with the following information for each property.
• Illustrative site plans showing the footprints of each building and structure, together with roads, sidewalks, parking, and other significant improvements.
• Land and building uses.
• Building gross square footage and, when appropriate, number of dormitory beds or parking spaces.
• Building height in stories and, approximately, in feet, including mechanical penthouses.
• Tenure (owned or leased by Faulkner).

PROPOSED FUTURE PROJECTS

Article 80D Requirements. Pursuant to Article 80D, the IMP should provide the following information for the Proposed Projects:

• Site location and approximate building footprint.
• Uses (specifying the principal sub-uses of each land area, building, or structure, such as classroom, laboratory, parking facility).
• Square feet of gross floor area.
• Square feet of gross floor area eliminated from existing buildings through demolition of existing facilities.
• Floor area ratio.
• Building height in stories and feet, including mechanical penthouses.
• Parking areas or facilities to be provided in connection with Proposed Projects;
• Any applicable urban renewal plans, land disposition agreements, or the like.
• Current zoning of site.
• Total project cost estimates.
• Estimated development impact payments.
• Approximate timetable for development of proposed institutional projects, with the estimated month and year of construction start and construction completion for each.

Rationale for Proposed Project. Discuss the rationale for the program and location of proposed buildings in light of discussions on mission, facilities needs, and campus planning objectives. Discuss the rationale for the scale of the proposed buildings.

PLANNING FRAMEWORK

This section should discuss, at a minimum, the following:
- **Existing Context.** Describe Faulkner’s place in the broader context of adjacent land uses, and the surrounding neighborhoods. Reference any City policies or plans that shape the planning context for the area and for Faulkner.
- **Factors Driving Facilities Needs.** Provide any update of current facilities utilization rates and Faulkner’s ability to accommodate patient number growth with existing facilities, by type of facility.
- **Campus Vision and Identity.** Describe any updates to Faulkner’s vision of its desired physical identity and, in general terms, strategies for achieving that identity.
- **Overview of Urban Design Guidelines and Objectives.** Discuss any current or new urban design guidelines and objectives that have emerged and strategies for implementing them in conjunction with the Proposed Projects or in the future.
- **Public Realm.** Discuss any updates to the existing public realm conditions (i.e. parks, plazas, streetscapes) in the vicinity of Faulkner facilities, regardless of ownership. Discuss key urban design and public realm goals and objectives proposed by Faulkner for the campus, with a focus on creating a high-quality interface between the campus and the surrounding neighborhoods and transit stations.
- **Pedestrian Circulation Goals and Guidelines.** Provide a statement of goals and guidelines for pedestrian circulation both within and through Faulkner’s campus and in relation to the Proposed Projects.

**TRANSPORTATION AND PARKING MANAGEMENT / MITIGATION PLAN**

The following submission requirements relate to the proposed IMP; the DPIR will be required to present more specific information on the transportation impacts of the Proposed Projects. In addition to the submissions detailed in this Scope, Faulkner should continue to work closely with the Boston Transportation Department (“BTD”) to outline an appropriate scope for studying and mitigating any transportation impact of the Proposed Projects.

- **Existing Conditions.** Provide any updates to Faulkner’s existing transportation and parking characteristics, including data on mode share for employees, parking spaces owned and operated by Faulkner, and policies regarding patient, visitor and employee parking, transportation demand management measures in place, etc.
- **Impact of New Project.** Discuss the impact of the Proposed Projects on parking demand and supply.

**ECONOMIC DEVELOPMENT**

The IMP should address the following topics:

- **Employment and Workforce Development.** Provide any updates to existing and proposed programs to train and hire Boston residents for Faulkner jobs.
COMMUNITY BENEFITS PLAN

The IMP should describe Faulkner’s Community Benefits Plan in general and in relation to the Proposed Projects.

ENVIRONMENTAL SUSTAINABILITY

The City of Boston expects a high level of commitment to principles of sustainable development from all developers and institutions. Faulkner’s Proposed Projects provide exciting opportunities for innovation and excellence. Faulkner will be expected to work with the BPDA, the City of Boston Environment Department, and others to set and meet ambitious environmental sustainability goals in the design of the Proposed Projects. The IMP should present as much information as possible on the topics below, with the understanding that not all of them may be relevant at this current time. Additional topics related to sustainability are included in the DPIR Scope for the Proposed Projects.

- **Existing Sustainability Measures.** Update if applicable Faulkner’s existing sustainability measures at the building and campus-wide level, including but not limited to energy, stormwater, solid waste, transportation, and infrastructure and utilities. Explain the administrative structure for making decisions about and promoting innovation in the area of building a sustainable campus. Describe any formal goals or principles that Faulkner has adopted in the area of sustainability.

- **Green Building.** New campus buildings should achieve a superior level of performance in the areas of materials and resources (recycled content, construction waste management, local/regional materials), energy (energy performance, renewable energy), water management (water efficiency, stormwater management, graywater and stormwater recycling, etc.), indoor environmental quality, and other standard performance areas of high-performance or “green” buildings. Whenever possible, buildings should achieve a high level of certification through LEED or another appropriate system.

- **Energy Use.** Future campus development should consider the impact of new buildings on the existing heating and cooling infrastructure. Reducing the current energy use of existing buildings should be addressed prior to expanding or building new power plants. Planning should consider the possible benefits of localized heating and cooling systems within a section of the campus or within an individual building, allowing for alternative energy sources to be easily explored.

- **Water Use.** Future campus development should incorporate water use, conservation, and rainwater harvesting strategies at a campus level. New construction allows opportunities for storage systems to be installed for use by the new and adjacent buildings. Collected water can be used for flushing, HVAC make-up water, and irrigation.

- **Stormwater Retention/Treatment/Reuse and Groundwater Recharge.** Faulkner’s development should go beyond the minimum requirements related to stormwater runoff. In particular, the new developments proposed as part of this IMP should set a
goal of reducing stormwater discharge from the sites into the storm sewers, not simply avoiding any additional runoff. This goal should be considered in conjunction with strategies for reuse of retained stormwater and strategies for groundwater recharge. Individual building design, site design, and street-level interventions should all maximize the opportunities for stormwater retention, treatment, and reuse, as well as groundwater recharge, through innovative approaches. To the extent possible, the systems put in place should strive to work with the natural hydrology of the area.

- **Solid Waste.** Campus master planning should set the goal of reducing the level of solid waste generation in both the construction and operation of buildings.

**OTHER**

- **Public Notice.** Faulkner will be responsible for preparing and publishing in one or more newspapers of general circulation in the city of Boston a Public Notice of the submission of the IMP to the BPDA as required by Section 80A-2. This Notice shall be published within five (5) days after the receipt of the IMP by the BPDA. In accordance with Article 80, public comments on the IMP shall be transmitted to the BPDA within sixty (60) days of the publication of this notice. A sample form of the Public Notice is attached as Appendix 3. Following publication of the Public Notice, Faulkner shall submit to the BPDA a copy of the published Notice together with the date of publication.
SUBMISSION REQUIREMENTS

FOR

BRIGHAM AND WOMEN’S FAULKNER HOSPITAL

INPATIENT ADDITION, EAST PARKING GARAGE ADDITION, AND REPLACEMENT WEST
GARAGE PROJECTS

DRAFT PROJECT IMPACT REPORT

The Scope requests information required by the BPDA for its review of the Proposed Projects in connection with the following:

1. Certification of Compliance and approval of the Proposed Projects pursuant to Article 80, Section 80B of the Code.

2. Certification of Consistency with the Faulkner Hospital Institutional Master Plan pursuant to Article 80, Section 80D-10 of the Code.

The requirements below apply to the Draft Project Impact Reports (DPIRs) for the Proposed Projects.

Subsequent to the end of the forty-five (45) day public comment period on the DPIR, the BPDA will issue a Preliminary Adequacy Determination (“PAD”) that indicates the additional steps necessary for FAULKNER to satisfy the requirements of the Scoping Determination and all applicable sections of Article 80 of the Code. If the BPDA finds that the DPIR adequately describes the Proposed Projects’ impacts and, if appropriate, propose satisfactory measures to mitigate, limit or minimize such impacts, the PAD will announce such a determination and that the requirements for the filing and review of a Final Project Impact Report (“FPIR”) are waived pursuant to Section 80B-5.4(c)(iv) of the Code. Before reaching said findings, the BPDA shall hold a public hearing pursuant to Article 80 of the Code. Sections 80B-6 and 80D-10 require the Director of the BPDA to issue a Certification of Compliance and a Certification of Consistency, respectively, before the Commissioner of Inspectional Services can issue any building permit for the Proposed Projects.

The DPIR may be consolidated with the IMP. In addition to full-size scale drawings, ten (10) hard copies of the full bound report should be submitted to the BPDA, in addition to an electronic version in .pdf format. Hard copies of the document should be available for distribution to the Faulkner Task Force, community groups, and other interested parties in support of the public review process. The report should contain all submission materials reduced to size 8-1/2”x11”, except where otherwise specified, and should be printed on both sides of the page. A copy of this Scoping Determination must be included in the report submitted for review.
The DPIR should include the following elements.

1. **GENERAL INFORMATION**

   - **Applicant/Proponent Information.** Pursuant to Article 80B, the DPIR should provide the following information:
     - **Development Team**
       - Names of developer(s), including description of development entity(ies), attorney, project consultants and architects.
       - Business address, telephone number, fax number and e-mail, where available, for each.
       - Designated contact for each.
     - **Legal Information**
       - Legal judgments or actions pending concerning the Proposed Projects.
       - History of tax arrears on property owned in Boston by Applicant.
       - Evidence of site control over project area, including current ownership and purchase options of all parcels in the Proposed Projects, all restrictive covenants and contractual restrictions affecting the Proponent’s right or ability to accomplish the Proposed Projects, and the nature of the agreements for securing parcels not owned by the Applicant.
       - Nature and extent of any and all public easements into, through, or surrounding the site.

   - **Disclosure of Beneficial Interests.** Disclosure of Beneficial Interests in the Proposed Projects must be provided pursuant to Section 80B-8 of the Boston Zoning Code.

   - **Regulatory Controls and Permits.** The DPIR shall include an up-to-date listing of all anticipated permits or approvals required from other municipal, state or federal agencies, including a proposed application schedule. A statement on the applicability of the Massachusetts Environmental Policy Act (“MEPA”) should be provided. If the Proposed Projects are subject to MEPA, all required documentation should be provided to the BPDA, including but not limited to, copies of the Environmental Notification Form, decisions of the Secretary of Environmental Affairs, and the proposed schedule for coordination with BPDA procedure.
2. PROJECT DESCRIPTION

- **Project Site.** The DPIR shall include a complete description of the Project Site including, at minimum, square footage of the sites, a map indicating the boundaries, a legal description including metes and bounds, existing site conditions, and the surrounding development context, i.e. a description of the surrounding environment including the height, other dimensions, use, and other relevant characteristics of existing nearby buildings, as well as an inventory of surrounding proposed projects. Only projects that have completed or are currently undergoing Article 80 review should be included and should be included as proposed in their filings at the Boston Planning & Development Agency. The Project Site, as defined in the DPIR, must be utilized for each Project Description and for any calculations or comparisons.

- **Project Description.** The DPIR shall contain a full description of the Proposed Projects and any alternative(s) and their elements, including size, physical characteristics, FAR (utilizing the definition for calculation as provided for in the Boston Zoning Code), and proposed uses, including any uses planned or considered for all elements of the project during the summer months.

3. PROJECT ALTERNATIVES

The analyses as provided for in the Transportation Component, Environmental Protection Component, and Urban Design Component sections of this Scoping Determination, as well as any additional analysis specified by the BPDA, shall be required for the following alternatives:

- **Alternative 1.** No build as a means of measuring the baseline.
- **Alternative 2.** The Proposed Projects as set forth in PNF or as modified via formal notification to the BRA in advance of submission of the DPIR.
- **Alternative 3.** Any additional alternative or alternatives defined by the BPDA. The BPDA reserves the right to extend the requirement of any and all elements of the analysis described herein to an additional alternative.

4. TRANSPORTATION COMPONENT

The DPIR shall include a detailed traffic and transportation analysis that examines the Proposed Projects' impact on the transportation network and proposes measures intended to mitigate, limit, or minimize any adverse impact reasonably attributable to the Proposed Projects. The scope of the analysis must utilize as its framework the Transportation Access Plan guidelines to be further defined in consultation with the Boston Transportation Department (“BTD”). Pursuant to Section 80B-3.1 of the Boston Zoning Code, this section of the DPIR should contain, at a minimum, the following elements. Additional questions and required submissions have been added to the baseline requirements of Article 80 based on concerns specific to the project and on comment letters. Not all items will apply to the
Proposed Projects. Please reach out to the Boston Transportation Department to discuss attached comment letter.

- **Traffic Management Element.** Faulkner shall work with BTD to identify applicable items of study:
  - Identify the Proposed Projects’ impact on the transportation network from expected travel volumes, vehicle trip generation, and directional distribution; the location of loading and unloading activities, including service and delivery; the Proposed Projects’ impact on the vehicular and circulation systems within the impact area, including the number and type of vehicles, pedestrians, and bicyclists, vehicle occupancy rates (VOR), and the Proposed Projects’ impact on road corridors and intersection capacities, including Levels of Service and intersection delays from 6:00 a.m. to 8:00 p.m. and for any other times of day that significant activity is anticipated in the Proposed Projects.
  - Inventory, map, and discuss on- and off-street loading, provide estimates of the level of loading and delivery activity, and describe in detail any special loading policies and procedures to be implemented.
  - Identify mitigation procedures that are intended to mitigate, limit, or minimize the number of vehicle trips generated by the development, and the Proposed Projects’ interference with the safe and orderly operation of the transportation network; such measures may include an on-site traffic circulation plan, flexible employee work hours, dissemination of transit information, changes in traffic patterns, and full or partial subsidies for public mass transit.
  - The DPIR shall describe Transportation Demand Management ("TDM") measures that are being considered for the Proposed Projects.
  - Review provisions for service and emergency vehicle access to the proposed dormitory building.

- **Parking Management Element.** Faulkner shall work with BTD to:
  - Identify the location of proposed drop-off/pick-up, short-term parking, loading, and queuing for both autos and trucks. If no queuing area is available for trucks, identify steps to be taken to avoid negative impacts, referencing the projected frequency of delivery activity and any operational procedures to ensure that deliveries are adequately timed and spaced out.
  - Identify the demand created by the Proposed Projects for tenant, commuter, and short- and long-term visitor parking; non-tenant and other parking needs within the Impact Area; and evening and weekend parking needs.
  - Include operational policies and strategies for the Proposed Projects that address the location, cost, and number of public, private, high-occupancy vehicle, and special-needs parking demand; short-term and long-term space availability; pricing structure.
of parking rates; location and type of off-site parking; and methods of transporting people to the site from off-site parking;

- Document parking impacts of the Proposed Projects. Describe alternative off-street parking locations for displaced parkers as necessary.

- **Article 80 Construction Management Element.** The Construction Management Element shall, at a minimum:
  
  - Identify the impact from the timing and routes of truck movement and construction deliveries for the Proposed Projects; proposed street closings; and the need for employee parking.
  - Identify, and provide a plan for implementing, mitigation measures that are intended to mitigate, limit, or minimize, to the extent economically feasible, the construction impact of the Proposed Projects by limiting the number of construction vehicle trips generated by the Proposed Projects, the demand for construction-related parking (both on-site and off-site), and the interference of building construction with the safe and orderly operation of the Transportation Network, such measures to include the use of alternative modes of transport for employees and materials to and from the site; appropriate construction equipment, including use of a climbing crane; staggered hours for vehicular movement; traffic controllers to facilitate equipment and trucks entering and exiting the site; covered pedestrian walkways; alternative construction networks and construction planning; and restrictions of vehicular movement
  - Designate a liaison between the Proposed Projects, public agencies, and the surrounding residential and business communities.

- **Pedestrian Analysis.** Address the adequacy of sidewalks and other pedestrian infrastructure in the area of the Proposed Projects and potential safety issues at pedestrian crossings. Propose improvements to facilitate pedestrian circulation to and around the Proposed Projects and ways that development can improve the overall pedestrian circulation system of the campus.

- **Mitigation.** Identify measures to mitigate any transportation impacts identified in the preceding sections.

5. **ENVIRONMENTAL PROTECTION COMPONENT**

The DPIR shall contain an Environmental Protection Component as outlined below. Opportunities for sustainable design, as well as other issues, are described in the written comments from public agencies. These comments are included in Appendix 2 and are incorporated herein by reference and made a part hereof. The analyses as provided for in the Environmental Protection Component section of this Scoping Determination shall be required for each of the alternatives.
**Wind.** A quantitative wind tunnel analysis of the potential pedestrian level wind impacts shall be required for the DPIR. This analysis shall determine potential pedestrian level winds adjacent to and in the vicinity of the project site and shall identify the projected annual wind speeds for each season at each location. Expected wind levels should be reported using the amended Melbourne scale. The DPIR shall identify any areas where wind velocities are expected to exceed acceptable levels, including the BRA's guideline of an effective gust velocity of 31 mph not to be exceeded more than 1% of the time.

Particular attention shall be given to areas of pedestrian use, including, but not limited to, the entrances to the proposed buildings and existing buildings in the vicinity of the Proposed Projects, the sidewalks and walkways within and adjacent to the Proposed Projects' development and in the vicinity of the proposed development. Specific locations to be evaluated shall be determined in consultation with the BRA and the City of Boston Environment Department.

For areas where wind speeds are projected to exceed acceptable levels, measures to reduce wind speeds and to mitigate potential adverse impact shall be identified and tested in the wind tunnel to quantify the expected benefit. Should the qualitative analysis indicate the possibility of excessive or unacceptable pedestrian level wind speeds, additional study may be required.

The wind tunnel testing shall be conducted in accordance with the following guidelines and criteria:

- Data shall be presented for both the existing (no-build) and for the future build scenario(s) (see above).
- The analysis shall include the mean velocity exceeded 1% of the time and the effective gust velocity exceeded 1% of the time. The effective gust velocity shall be computed as the hourly average velocity plus 1.5 x root mean square variation about the average. An alternative velocity analysis (e.g., equivalent average) may be presented with the approval of the Authority.
- Wind direction shall include the sixteen compass points. Data shall include the percent or probability of occurrence from each direction on seasonal and annual bases.
- Results of the wind tunnel testing shall be presented in miles per hour (mph).
- Velocities shall be measured at a scale equivalent to an average height of 4.5-5 feet.
- The model scale shall be such that it matches the simulated earth's boundary and shall include all buildings within at least 1,600 feet of the project site. All buildings taller than 25 stories and within 2,400 feet of the project site should be placed at the appropriate location upstream of the project site during the test. The model shall include all buildings recently completed, under construction, and planned within 1,500-2,000 feet of the project site. Prior to testing, the model shall be reviewed by the Authority. Photographs of the area model shall be included in the written report.
The written report shall include an analysis which compares mean and effective gust velocities on annual and seasonal bases, for no-build and build conditions, and shall provide a descriptive analysis of the wind environment and impacts for each sensor point, including such items as the source of the winds, direction, seasonal variations, etc., as applicable. The report shall also include an analysis of the suitability of the locations for various activities (e.g., walking, sitting, standing, driving etc.) as appropriate, in accordance with Melbourne comfort categories.

The report also shall include a description of the testing methodology and the model, and a description of the procedure used to calculate the wind velocities (including data reduction and wind climate data). Detailed technical information and data may be included in a technical appendix but should be summarized in the main report.

The pedestrian level wind impact analysis report shall include, at a minimum, the following maps and tables:

- Maps indicating the location of the wind impact sensors, for the existing (no-build) condition and future build scenario(s).
- Maps indicating mean and effective gust wind speeds at each sensor location, for the existing (no-build) condition and each future build scenario, on an annual basis and seasonally. Dangerous and unacceptable locations shall be highlighted.
- Maps indicating the suitability of each sensor location for various pedestrian-related activities (comfort categories), for the existing (no-build) condition and each future build scenario, on an annual basis and seasonally. To facilitate comparison, comfort categories may be distinguished through color coding or other appropriate means. In any case, dangerous and unacceptable conditions shall be highlighted.
- Tables indicating mean and effective gust wind speeds and the comfort category at each sensor location, for the existing (no build) condition and for each future build scenario, on an annual basis and seasonally.
- Tables indicating the percentage of wind from each of the sixteen compass points at each sensor location, for the existing (no-build) condition and for each future build scenario, on an annual basis and seasonally.
- All maps should include a north arrow and be oriented and of the same scale as shadow diagrams.

**Shadow.** A shadow analysis shall be required for existing and build conditions for the hours 9:00 a.m., 12:00 noon, and 3:00 p.m. for the vernal equinox, summer solstice, autumnal equinox, and winter solstice and for 6:00 p.m. during the summer and autumn. This analysis should use the same metrics as applied by Mass. DEP for Chapter 91 shadow analyses and include documentation of net new shadows lasting more than one hour. It should be noted that due to time differences (daylight savings vs. standard), the autumnal equinox shadows would not be the same as the vernal equinox shadows and therefore separate shadow studies are required for the vernal and autumnal equinoxes.
Shadows shall be determined using the Boston Altitude and Azimuth data (Sun Altitude/Azimuth Table, Boston, Massachusetts).

The shadow impact analysis must include net new shadow as well as existing shadow. Diagrams must clearly show the incremental impact of the proposed new buildings. For purposes of clarity, new shadow should be shown in a dark, contrasting tone distinguishable from existing shadow. The shadow impact study area shall include, at a minimum, the entire area to be encompassed by the maximum shadow expected to be produced by the Proposed Project (i.e., at the winter solstice). The build condition shall include all buildings under construction and any proposed buildings anticipated to be completed prior to completion of the Proposed Project. Shadow from all existing buildings within the shadow impact study area shall be shown. A North arrow shall be provided on all figures and street names, doorways, bus stops, open space and areas where pedestrians are likely to congregate (in front of historic resources or other tourist destinations, for example) should be identified.

Particular attention shall be given to areas of pedestrian use, including, but not limited to, the entrances to the project buildings and existing buildings in the vicinity of the Proposed Project, the sidewalks and walkways within and adjacent to the Proposed Project development.

The DPIR should propose mitigation measures to minimize or avoid any adverse shadow impact.

- **Combined Wind and Shadow Impacts.** Figures depicting no-build and build wind monitoring locations should be of an orientation and scale consistent with that used for shadow diagrams so that the cumulative effect of wind and shadow can be determined.

- **Daylight.** A daylight analysis for both build and no-build conditions shall be conducted by measuring the percentage of skydome that is obstructed by the Proposed Project and evaluating the net change in obstruction. The study should treat two elements as controls for data comparisons: existing conditions and context examples. Daylight analyses should be taken for each major building facade fronting these essentially public ways or open spaces. The midpoint of each public accessway or roadway should be taken as the study point. The BRADA program must be used for this analysis.

- **Solar Glare.** Please refer to the BRA’s Environmental Review comment letter.

- **Air Quality.** Please refer to the BRA’s Environmental Review Comment letter.

- **Solid and Hazardous Wastes.** The presence of any contaminated soil or groundwater and any underground storage tanks at the project site shall be evaluated and remediation measures to ensure their safe removal and disposal shall be described. Any assessment of site conditions pursuant to the requirements of M.G.L. Chapter 21E that has been or will be prepared for the site shall be included in the DPIR (reports may be included in an appendix but shall be summarized in detail, with appropriate tables and
figures, within the main text). Materials in the building to be demolished should be characterized and measures to mitigate impacts during demolition should be identified.

The DPIR shall quantify and describe the generation, storage, and disposal of all solid wastes from the construction and operation of the Proposed Projects. The DPIR shall identify the specific nature of any hazardous wastes that may be generated and their quantities and shall describe the management and disposal of these wastes. In addition, measures to promote the reduction of waste generation and recycling, particularly for paper, glass, plastics, metals, and other recyclable products, and compliance with the City's recycling program, shall be described in the DPIR.

- **Noise.** The DPIR shall establish the existing noise levels at the project site and vicinity based upon a noise-monitoring program and shall calculate future noise levels after project completion based on appropriate modeling and shall demonstrate compliance with the Design Noise Levels established by the U.S. Department of Housing and Urban Development for residential and other sensitive receptors and with all other applicable Federal, State, and City of Boston noise criteria and regulations. Any required mitigation measures to minimize adverse noise impacts shall be described.

An analysis of the potential noise impacts from the project's mechanical and exhaust systems, including emergency generators, and compliance with applicable regulations of the City of Boston shall be required. A description of the project's mechanical and exhaust systems and their location shall be included. Measures to minimize and eliminate adverse noise impacts on nearby sensitive receptors, including the project itself, from mechanical systems and traffic shall be described.

The DPIR should identify the potential for adverse noise impacts stemming from building activities and occupants, referencing any noise impacts from FAULKNER's other buildings and any relevant similarities or differences between those facilities and the Proposed Projects, e.g. operable windows.

- **Nighttime Lighting.** The DPIR should explain, in text or graphics as appropriate:
  - The type of exterior lighting to be used on each façade or other portion of the building and the elements of the design that mitigate nighttime lighting impacts of the building on surrounding areas.
  - The DPIR should specify the type of interior lighting (i.e. fluorescent vs. incandescent, recessed or not) to be used in each portion of the building and, in the case of the common areas and non-residential portions of the program, the hours that the lighting will be on. The DPIR should also discuss the measures being taken to minimize the impact of interior lighting on the surrounding areas.
- **Stormwater Management/Water Quality.** Stormwater management requirements and suggestions are included in the section on environmental sustainability below.

- **Flood Hazards/Wetlands.** Describe any affected flood hazard zones or wetlands and proposed actions.

- **Tidelands/Chapter 91.** Demonstrate that the Projects are in compliance with Massachusetts’ Chapter 91 Tidelands Program.

- **Geotechnical Impact/Groundwater.** A description and evaluation analysis of existing sub-soil conditions at the project site, groundwater levels, potential for ground movement and settlement during excavation and foundation construction, and potential impact on adjacent buildings, utility lines, and the roadways shall be required. This analysis shall also include a description of the foundation construction methodology, the amount and method of excavation, and measures to prevent any adverse effects on adjacent buildings, utility lines, and roadways. Measures to ensure that groundwater levels will be maintained and will not be lowered during or after construction also shall be described. In addition, the geotechnical analysis shall evaluate the earthquake potential in the project area and shall describe measures to be implemented to mitigate any adverse impacts from an earthquake event.

- **Construction Impacts.** A construction impact analysis shall include a description and evaluation of the following:
  - Measures to protect the public safety.
  - Potential dust and pollutant emissions and mitigation measures to control these emissions.
  - Potential noise generation and mitigation measures to minimize increase in noise levels.
  - Location of construction staging areas and construction worker parking; measures to encourage carpooling and/or public transportation use by construction workers.
  - Construction schedule, including hours of construction activity.
  - Access routes for construction trucks and anticipated volume of construction truck traffic.
  - Construction methodology (including foundation construction), amount and method of excavation required, disposal of the excavate, description of foundation support, maintenance of groundwater levels, and measures to prevent any adverse effects or damage to adjacent structures and infrastructure.
  - Method of demolition of the existing building on the project site and disposal of the demolition debris.
  - Potential for the recycling of construction and demolition debris, including asphalt from the existing parking lots.
  - Measures to make construction fencing as attractive as possible to ensure the visual character of the streetscape.
  - Identification of best management practices to control erosion and to prevent the discharge of sediments and contaminated groundwater or stormwater runoff into the City’s drainage system during the construction period.
• Impact of project construction on rodent populations and description of the proposed rodent control program, including frequency of application and compliance with applicable City and State regulatory requirements.

6. URBAN DESIGN COMPONENT

Faulkner will be expected to undertake design review on the Proposed Projects in accordance with standard BPDA procedure. In addition to the BPDA's Urban Design Department, the Boston Civic Design Commission (BCDC) will review the Proposed Projects. The DPIR should also respond to the following elements.

• **Signage and Lighting.** Faulkner will be required to perform design review with the BPDA Urban Design Department on any current and future plans for signage and lighting.

• **Views.** The DPIR shall present views of the Proposed Projects from locations to be determined through consultation with the BPDA's Urban Design Department.

• **Relationship to Surrounding Context.** The DPIR should describe the design of the Proposed Projects in relationship to the surrounding urban context, including adjacent buildings, streets, and plazas.

• **Design Submission Requirements.** The following urban design materials for each Proposed Project schematic design must be submitted for the DPIR. Materials must be at the required scale and in a printed form that is reproducible, as well as in electronic file form:

  • A written description of program elements and space allocation for each element.
  • Black and white 8"x10" photographs of the site and neighborhood.
  • Plans and sections for the area surrounding the project at an appropriate scale (1"=100' or larger) showing relationships of the Proposed Project to the surrounding area and district regarding massing, building height, open space, major topographic features, pedestrian and vehicular circulation, and land use.
  • Sketches and diagrams of alternative proposals to clarify design issues and massing options.
  • Eye-level perspectives showing the proposal in the context of the surrounding area; views should display a particular emphasis, on important viewing areas such as key intersections, accessways, or public parks/attractions. Long-ranged (distanced) views of the Proposed Project must also be studied to assess the impact on the skyline or other view lines. At least one bird's-eye perspective should also be included. All perspectives should show (in separate comparative sketches) both the build and no-build conditions. The BPDA must approve the view locations before analysis is begun. View studies should be cognizant of light and shadow, massing and bulk.
  • Aerial views of the project in perspective or isometric form.
  • A site plan at 1"= 16’ or larger showing:
    • Relationships of proposed and existing adjacent buildings and open spaces.
o Open spaces defined by buildings on adjacent parcels and across streets.
o Location of pedestrian ways, driveways, parking, service areas, streets, and major landscape features.
o Accessible pedestrian, vehicular, and service access and flow through the parcel and to adjacent areas.
o Phasing possibilities clearly indicating the scheme for completing the improvements.
o Construction limits.

- Site sections at 1"=16' or larger showing relationships to adjacent buildings and spaces.
- A massing model at 1"=40' showing all buildings in the area and a study model at 1"=16' showing facade design.
- Drawings at an appropriate scale (e.g., 1"=8') describing architectural massing, facade design, and proposed materials including:
  o Site plans before and after construction.
  o Elevations in the context of the surrounding area.
  o Sections showing organization of functions and spaces.
  o Building plans showing ground floor and typical upper floor.

- A site survey at 1"=40' showing nearby structures, utilities and bench marks.
- A written and/or graphic description of the building materials and its texture, color, and general fenestration patterns is required for the proposed development.
- Electronic files describing the site and Proposed Project at Representation Levels one and two ("Streetscape" and "Massing") as described in the document Boston "Smart Model": CAD & 3D Model Standard Guidelines.
- The schedule for submittal of Design Development materials.

7. ENVIRONMENTAL SUSTAINABILITY

In addition to the overall campus-wide approach to sustainability discussion in the IMP, new development of the size and complexity of the Proposed Projects present opportunities for sustainable design and construction to prevent damage to the environment, consistent with the goals of Executive Order 385 and recent initiatives of the Mayor and the BPDA. Opportunities for sustainable design are described below and are incorporated herein by reference and made a part hereof. Not all the topics below need be addressed in the DPIR; rather, some of them constitute suggestions that can be discussed through the design process in conjunction with the BPDA and the Environment Department.

- **Building Orientation, Envelope, and Façade Design.** Reduce thermal loads entering the building as much as possible. Consider the building orientation, envelope, and design
carefully, including glazing selection, window and door shading, wall construction, roof color, and building shape. Make use of thermal mass to absorb heat and shift peak heating to off-peak hours. Building massing and façade treatment should respond to microclimate conditions and enhance appropriate solar control. The DPIR should describe any simulation designed to quantify the effects of these design choices.

- **Energy.** Energy conservation strategies should be explored at an early stage in the design and should include such approaches as taking advantage of natural day lighting, passive solar gain, passive cooling and ventilation which tie into HVAC systems, use of alternative energy strategies (including making the building design adaptable for the future inclusion of innovative energy and environmental technologies as they develop over time), in addition to properly sized efficient heating and ventilating systems, with heat recovery and other conservation strategies. Siting, orientation and massing of building should optimize passive strategies for light and energy management and design for natural and displacement ventilation. Building design should specify energy efficient HVAC and lighting systems, appliances, and other equipment, and solar preheating of makeup air. Early quantification and cost-benefit analysis through iterative energy simulation is helpful and would provide feedback on size of systems and envelope design early enough to impact those decisions.

- **Water Management.** Sustainable water management practices should be considered early in the site and building design process, and the process should explore integrated approaches to stormwater retention, treatment, and reuse, building and landscape water needs, and groundwater recharge. To the extent possible, the systems put in place should strive to work with the natural hydrology of the area, and the building should incorporate additional opportunities to conserve water beyond water-saving technologies required by law.

Possibilities for using graywater for functions that are conventionally served by potable water should be explored. Stormwater captured from impervious areas or from roofs and hardscapes can be used for non-potable water uses.

The DPIR shall contain an evaluation of the project site's existing and future stormwater drainage and stormwater management practices. The DPIR shall illustrate existing and future drainage patterns from the project site and shall describe and quantify existing and future stormwater runoff from the site and the Proposed Project's impacts on site drainage. The Proposed Project's stormwater management system, including best management practices to be implemented, measures proposed to control and treat stormwater runoff and to maximize on-site retention of stormwater, measures to prevent groundwater contamination, and compliance with the Commonwealth's Stormwater Management Policies, also shall be described. The DPIR shall describe the project area's stormwater drainage system to which the project will connect, including the location of stormwater drainage facilities and ultimate points of discharge.
The DPIR shall respond to the comments from the Boston Water and Sewer Commission, which are contained in Appendix 2 and incorporated herein by reference.

8. **HISTORIC RESOURCES COMPONENT**

The DPIR should summarize any historic resources that will be affected by the Proposed Projects, the position of public agencies on those resources (including any necessary regulatory process), and present a plan to minimize the adverse impact of the Proposed Projects.

9. **INFRASTRUCTURE SYSTEMS COMPONENT**

The DPIR must include an infrastructure impact analysis.

The discussion of the Proposed Projects’ impacts on infrastructure systems should be organized system-by-system as suggested below. The DPIR must include an evaluation of the Proposed Projects' impact on the capacity and adequacy of existing water, sewerage, energy (including gas and steam), and electrical communications (including telephone, fire alarm, computer, cable, etc.) utility systems, and the need reasonably attributable to the Proposed Projects for additional systems or facilities. Thorough consultation with the planners and engineers of the utilities will be required, and should be referenced in the Infrastructure Component section.

Any system upgrading or connection requiring a significant public or utility investment, creating a significant disruption in vehicular or pedestrian circulation, or affecting any public or neighborhood park or streetscape improvements, constitutes an impact which must be mitigated.

- **Water and Sewer.** Provide the following information on the Proposed Projects’ impacts on water and sewer infrastructure and on water quality. As appropriate, this information can be integrated with the sustainability sections of the IMP and the DPIR.
  - Estimated water consumption and sewage generation from the Proposed Projects and the basis for each estimate. Include separate calculations for air conditioning system make-up water.
  - Description of the capacity and adequacy of water, sewer, and storm drain systems and an evaluation of the impacts of the Proposed Projects on those systems.
  - Description of the Proposed Projects’ impacts on the water quality of Boston Harbor or other water bodies that could be affected by the projects, if applicable.
  - Description of mitigation measures to reduce or eliminate impacts on water quality.
- Description of impact of on-site storm drainage on water quality; if this is described more fully in another section, reference that analysis here.
- Detail methods of protection proposed for infrastructure conduits and other artifacts, including BSWC sewer lines and water mains, during construction.
- Detail the energy source of the interior space heating; how obtained, and, if applicable, plans for reuse of condensate.
- Identification of measures to conserve resources, including any provisions for water recycling.

**Energy Systems.** The DIPR should discuss the Proposed Projects’ approach to energy systems and conservation. As appropriate, this information can be integrated with the sustainability sections of the IMP Amendment and the DIPR. The discussion should include at a minimum the following:

- Description of all energy (heat, electrical, cooling, etc.) requirements of the project and evaluation of the Proposed Projects’ impacts on resources and supply.
- Description of measures to conserve energy usage and consideration of the feasibility of including solar energy provisions or other on-site energy provisions.

**Other Systems.** The DIPR should also discuss emergency systems, gas, steam, optic fiber, cable, and any other systems impacted by the Proposed Projects. The location of transformer and other vaults required for electrical distribution or ventilation must be chosen to minimize disruption to pedestrian paths and public improvements both when operating normally and when being serviced, and must be described.

**OTHER**

**Public Notice.** Faulkner will be responsible for preparing and publishing in one or more newspapers of general circulation in the city of Boston a Public Notice of the submission of the DIPR to the BRA as required by Section 80A-2. This Notice shall be published within five (5) days after the receipt of the DIPR by the BRA. In accordance with Article 80, public comments on the DIPR shall be transmitted to the BRA within forty-five (45) days of the publication of this notice. A sample form of the Public Notice is attached as Appendix 3. Following publication of the Public Notice, Faulkner shall submit to the BRA a copy of the published Notice together with the date of publication.
SCOPING DETERMINATION

Brigham and Women's Faulkner Hospital (BWFH) proposes its first Institutional Master Plan (IMP) along with a series of projects including an Inpatient Addition with 78 new single inpatient beds, clinical support, and ambulatory space; the removal and replacement of a free-standing parking garage at the west side of campus, an addition to an existing smaller east parking structure, and a new driveway from Allandale Street. The IMPNF and PNF were filed on July 26, 2019.

BPDA staff appreciate the meetings we have had to this point with the proponent and look forward to continuing this dialogue as the projects develop. Comments are offered on the IMP and on the proposed projects.

First Institutional Master Plan

BPDA staff appreciate the introduction of an IMP at BWFH. An IMP is a useful vehicle for understanding an institution's long term goals and aspirations. It is also an opportunity to address issues that may benefit from longer term thinking and from outside input. Two topics that have come up in this context are the future of the Faulkner sites other than the main campus and where the clinical functions might grow in the future.

Parking Increase

- A significant increase in onsite parking is proposed without the data and backup to support such a large increase.
- Submit data with greater clarity on parking utilization today (by user, time of day capacities, duration, turnover, etc.)
- How does this increased supply result in changes to shuttle operations?
• Will the three existing park and ride locations be retained as part of the proposal, and, if so, why? Justify and clarify shuttle operations.
• How can more robust TDM measures (specified below) reduce the number of parking spaces needed (and subsequent traffic impacts)?
• Does the hospital have access to any employee origin information that can help to determine targeted TDM improvements?

There is additional concern for the location of the east parking garage additions as they may impede future development. Is it possible for the garage to be designed in a way that would allow for future retrofit should the location become desirable for development? In any location, the parking garage must not be exposed on primary elevations.

**Vehicular access**
• Location of entry and exit points which would keep circulation and stacking on their site as much as possible. Provide supporting traffic analysis and diagraming.
• In addition to traditional LOS synchro outputs, a thorough queue analysis (50th%/95th%) should be presented for all intersections/site access drives.
• There is concern for impact of 500 more parking spaces on local street intersections. All future build conditions should include the future DCR signalization of the Centre Street and Walter Street intersection.
• DCR and the City will need to work together with the proponent to determine potential mitigation efforts to improve operations of the Centre/Allendale intersection.
• Geographic scope of intersections for traffic study:
  ○ Centre/Allendale
  ○ Centre/Walter
  ○ Centre/VFW Parkway
  ○ Allendale/Grove

**Multimodal access**
• Transportation Demand Management strategies
- Real time digital messaging board in the lobby indicating transit arrival times (#38, #51, Orange Line, etc.). Does the shuttle system have this capacity?
- Bus and bike improved accommodations on Centre Street
- Blue Bikes station
- Blue Bikes passes for employees
- Increase in transit pass subsidy for employees
- Wayfinding for pedestrians, cyclists, and transit users
- Improvements to the shuttle network including additional service to MBTA connections (Forest Hills)

- Transit Analysis
  - Determine available capacities and efficiencies on all MBTA services and the ability to meet the Hospital's needs
  - Pair with available employee origin information
  - Consider subsidizing additional transit services (i.e. #38 bus)

- Pedestrian access
  - Sidewalks on Allendale and accessibility improvements
  - Improved accessible access to facility from Centre Street

- Demonstrate short term and long term bike parking on site

- Bicycle access
  - Improved bicycle accommodations on Centre St to facilitate a safe connection from the Arboretum

**Urban Design**

Much of the Urban Design conversation is driven by the lack of clarity on parking needs. More understanding of how the parking can be correctly sized to meet the actual needs of the hospital will help with the design of the parking garages and access routes. Diagrams of the existing circulation networks (vehicular, pedestrian, accessible, and bicycle) should be provided. Concern remains about the East Garage potentially taking up a future clinical site. Diagram how clinical function might be expanded in the future; understanding that it is not currently contemplated.
Architecture issues involve the base of the clinical wing, which reads a bit starkly from the campus entrance, the need to screen the proposed West Garage, and the design of the East Garage, which has not been discussed up to this point. Looking at shaping the proposed solar array at the West Garage could also be useful. Provide renderings of the site from the residential neighborhood, at a minimum from Malcolm Road and Whitcomb Avenue.

We reserve the right to add additional comments and concerns during the course of the process of combined BPDA and BCDC review, which may affect the responses detailed in DPIR. The following urban design materials for the Proposed Project’s schematic design must be submitted for the DPIR:

- Written description of program elements and space allocation for each element including space allocation in the monastery.
- Detailed site plan with topography, circulation both pedestrian and vehicular, existing and proposed buildings, and all open space.
- Detailed landscape plan, illustrating existing and proposed trees, (including planned tree removals), and topography.
- Elevations, sections and 3D views illustrating the relationships of the proposed structures to the neighborhood on all sides.
- Eye-level perspectives showing the proposal from outside the campus
- Project phasing diagram.

**Site design**
Provide additional information on the site plan, as noted below. This should include accessible routes onto campus. Look at the landscape along Centre Street and whether there are opportunities to expand the naturalistic landscape proposed by the West Garage into that area of the campus. There may be useful maintenance reductions in addition to creating a more holistic campus. Wherever possible use landscape to buffer the residential neighborhood. Is there anywhere on campus that could be used as an outdoor space for patients?

Understanding that the current division of the campus parking layout, which encourages visitors to go to the east side of campus while staff go to the west, is providing functional benefits, are there other ways to arrange the campus that
might work? Is it possible to develop a loop on the campus or to separate the vehicular entrance and exit?

Provide documentation of existing trees to remain on campus and to be removed. Include tree species, size, and condition.

Excerpt from Boston Civic Design Commission Meeting Minutes, September 3, 2019

David Hacin: We need to see a model of this project to understand the project in context. I’m guessing that the presented schemes for garage screening are in response to abutters. What are the issues with this garage? Is the large uninterrupted solar away visible to anyone except hospital patients?

William Rawn: I think it would be helpful for us to understand what the next phase of growth for this hospital will be. I ask this in context of the garage locations on the site, which seem to preclude future growth of facilities on campus.

Andrea Leers: Why not make the new garage big enough so that you don’t have to touch the East Garage and preclude options for future development in this location on the site?

David Hacin: Will the large solar array you’ve proposed be visible to the surrounding neighborhood? The garage and solar array as proposed feel large and relentless. Can you use landscape design or a different massing strategy to better buffer these elements from the surrounding neighborhood?

Andrea Leers: The new wing feels comfortable and natural where you’ve placed it.

Linda Eastley: What strikes me is how many different areas of parking there are on this site for such a small campus. You need to walk us through some of the other options you’ve looked at. The building is surrounded by parking options on all sides and I imagine that could create confusion for patients.

Louise Johnson, abutter: I’ve lived here for 25 years. The campus has parking everywhere. People are confused when they enter the campus. I’m concerned about the solar glare that will be created by the solar panels. I’ve listened to garage construction improvements for years. Some of the plans to reconstruct are good. I am concerned about the length of time this construction will take to complete and
how this relates to future expansion and transportation networks. The T is one mile away (Forest Hills) and there is no way for the public to connect to this hospital. Frank O’Brien, Allendale Coalition: Don’t take as a given the reliance on private vehicles to access the hospital. There should be alternatives to passenger vehicles to access the site.

Sarah Freeman: 78 beds + 500 parking spaces?? How often are spaces turning over? What will be the congestion implications on surrounding streets? We value the hospital and the services, but how can we achieve those goals with a more sensitive proposal regarding sustainability and vehicles?
MEMORANDUM

TO: Edward Carmody, Project Manager
FROM: John (Tad) Read, Senior Deputy Director for Transportation & Infrastructure Planning
        Manuel Esquivel, Senior Infrastructure & Energy Planning Fellow
        Ryan Walker, Smart Utilities Program - Associate

DATE: September 17, 2019
SUBJECT: Faulkner Hospital Inpatient Addition and Campus Improvements - Smart Utilities Comments - PNF

 Comments and request for additional information:
Thank you for your Smart Utilities Checklist submission. Below are our comments and requests for additional information. Please update the Checklist using the edit link and/or send any diagrams to manuel.esquivel@boston.gov.

- Please provide a diagram indicating where existing and proposed utility infrastructure laterals are located, showing how utilities will be extended into the building from the right of way. This includes: water, sewer, electric, gas and telecom. (see Checklist Part 7).
- Please provide a diagram indicating where the proposed Green Infrastructure will be installed. (see Checklist Part 4)
- Please provide a Smart Street Lights diagram (see Checklist Parts 6 and 7) that indicates the following:
  - The main electricity loop that will power the lights and where the connection between this loop and the electricity in the right of way will occur.
  - "Shadow" conduits running next to the main electricity loop, with capacity for the additional electricity and fiber to comply with Smart Streetlight capability; and hand holes for access to these conduits.
  - Where these conduits would connect in the future to electricity and fiber in the right of way.

If you have any questions regarding these comments or would like to arrange a meeting to discuss the policy please feel free to contact Manuel Esquivel.

Context:
On June 14, 2018 the BPDA Board adopted the Smart Utilities Policy for Article 80 Development Review. The policy (attached) calls for the incorporation of five (5) Smart Utility Technologies (SUTs) into new Article 80 developments. Table 1 describes these five (5) SUTs. Table 2 summarizes the key provisions and requirements of the policy, including the development project size thresholds that would trigger the incorporation of each SUT.

In general, conversations about and review of the incorporation of the applicable SUTs into new Article 80 developments will be carried out by the BPDA and City staff during every stage (as applicable) of the review and permitting process, including a) prefile stage; b) initial filing; c) Article 80 development review prior to BPDA Board approval; d) prior to filing an application for a Building Permit; and e) prior to filing an application for a Certificate of Occupancy.
In conjunction with the SUTs contemplated in the Smart Utilities Policy, the BPDA and City staff will review the installation of SUTs and related infrastructure in right-of-ways in accordance with the Smart Utility Standards ("SUS"). The SUS set forth guidelines for planning and integration of SUTs with existing utility infrastructure in existing or new streets, including cross-section, lateral, and intersection diagrams. The Smart Utility Standards are intended to serve as guidelines for developers, architects, engineers, and utility providers for planning, designing, and locating utilities.

In order to facilitate the review of integration of the SUTs and the SUS, the BPDA and the Smart Utilities Steering Committee has put together a Smart Utilities Checklist that can be filled out and updated during the review process. Please fill out the parts of the Checklist that apply to your project. Make sure to review this template first, before submitting the Smart Utilities Checklist.

After submission, you will receive:

1. A confirmation email with a PDF of your completed checklist. Please include a copy of this document with your next filing with the BPDA.

2. A separate email with a link to update your initial submission. Please use ONLY this link for updating the Checklist associated with a specific project.

Note: Any documents submitted via email to Manuel.Esquivel@Boston.gov will not be attached to the PDF form generated after submission, but are available upon request.

The Smart Utilities Policy for Article 80 Development Review, the Smart Utility Standards, the Smart Utilities Checklist, and further information regarding the Boston Smart Utilities Vision project are available on the project’s website: http://www.bostonplans.org/smart-utilities.

Manuel Esquivel, BPDA Senior Infrastructure and Energy Planning Fellow, will soon follow up to schedule a meeting with the proponent to discuss the Smart Utilities Policy. For any questions, you can contact Manuel Esquivel at manuel.esquivel@boston.gov or 617.918.4382.

Table 1 - Summary description of 5 Smart Utility Technologies (SUTs) included in the Smart Utilities Policy for Article 80 Development Review

<table>
<thead>
<tr>
<th>Smart Utility Technology (SUTs)</th>
<th>Summary Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>District Energy Microgrid</td>
<td>Energy system for clusters of buildings. Produces electricity on development site and uses excess “heat” to serve heating/cooling needs. By combining these two energy loads, the energy efficiency of fuel consumed is increased. The system normally operates connected to main electric utility grid, but can</td>
</tr>
</tbody>
</table>
disconnect ("island") during power outages and continue providing electric/heating/cooling needs to end-users.

<table>
<thead>
<tr>
<th>Green Infrastructure</th>
<th>Infrastructure that allows rainwater to percolate into the ground. Can prevent storm runoff and excessive diversion of stormwater into the water and sewer system.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adaptive Signal Technology</td>
<td>Smart traffic signals and sensors that communicate with each other to make multimodal travel safer and more efficient.</td>
</tr>
<tr>
<td>Smart Street Lights</td>
<td>Traditional light poles that are equipped with smart sensors, wifi, cameras, etc. for health, equity, safety, traffic management, and other benefits.</td>
</tr>
<tr>
<td>Telecom Utilidor</td>
<td>An underground duct bank used to consolidate the wires and fiber optics installed for cable, internet, and other telecom services. Access to the duct bank is available through manholes. Significantly reduces the need for street openings to install telecom services.</td>
</tr>
</tbody>
</table>

### Table 2 - Summary of size threshold and other specifications for the 5 SUTs advanced in the *Smart Utilities Policy for Article 80 Development Review* (Note: This table is only for informational purposes. Please refer to the complete *Smart Utilities Policy for Article 80 Development Review* to review the details.)

<table>
<thead>
<tr>
<th>Article 80 Size Threshold</th>
<th>Other specifications</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>District Energy Microgrid</strong></td>
<td>&gt;1.5 million SF</td>
</tr>
<tr>
<td><strong>Green Infrastructure</strong></td>
<td>&gt;100,000 SF</td>
</tr>
<tr>
<td><strong>Adaptive Signal Technology</strong></td>
<td>All projects requiring signal installation or improvements</td>
</tr>
<tr>
<td><strong>Smart Street Lights</strong></td>
<td>All Projects requiring street light installation or improvements</td>
</tr>
<tr>
<td><strong>Telecom Utilidor</strong></td>
<td>&gt;1.5 million SF of development, or &gt;0.5 miles of roadway</td>
</tr>
</tbody>
</table>
To: Edward Carmody, BPDA
From: Zachary Wassmouth, PWD
Date: September 6, 2019
Subject: Faulkner Hospital IMPNF/PNF - Boston Public Works Department Comments

Included here are Boston Public Works Department comments for the Faulkner Hospital IMPNF/PNF.

Site Plan:
The developer must provide an engineer’s site plan at an appropriate engineering scale that shows curb functionality on both sides of all streets that abut the property.

Agency Coordination:
Please note that Centre Street is under the care, control, and custody of the Massachusetts Department of Conservation and Recreation (DCR). The developer should coordinate with the DCR for any and all work within Centre Street associated with this project.

Construction Within The Public Right-of-Way (ROW):
All proposed design and construction within the Public ROW shall conform to Boston Public Works Department (PWD) Design Standards (www.boston.gov/departments/public-works/public-works-design-standards). Any non-standard materials (i.e. pavers, landscaping, bike racks, etc.) proposed within the Public ROW will require approval through the Public Improvement Commission (PIC) process and a fully executed License, Maintenance and Indemnification (LM&I) Agreement with the PIC.

Sidewalks:
The developer is responsible for the reconstruction of the sidewalks abutting the project and, wherever possible, to extend the limits to the nearest intersection to encourage and compliment pedestrian improvements and travel along all sidewalks within the ROW within and beyond the project limits. The reconstruction effort also must meet current American’s with Disabilities Act (ADA)/ Massachusetts Architectural Access Board (AAB) guidelines, including the installation of new or reconstruction of existing pedestrian ramps at all corners of all intersections abutting the project site if not already constructed to ADA/AAB compliance. Plans showing the extents of the proposed sidewalk improvements associated with this project must be submitted to the Public Works Department (PWD) Engineering Division for review and approval. Changes to any curb geometry will need to be reviewed and approved through the PIC.

The developer is encouraged to contact the City’s Disabilities Commission to confirm compliant accessibility within the Public ROW.

Specific Scope Considerations:
The developer should consider the following to be included in the scope for this project:

- The developer should consider the installation of a concrete sidewalk along the north side of Allandale Street from the existing hospital driveway entrance on Allandale Street to where the existing asphalt sidewalk currently begins at #99 Allandale Street. This should include an accessible pedestrian crossing across the hospital driveway entrance on Allandale Street to connect Allandale Street to Centre Street for pedestrians.
• The developer should coordinate with the DCR with regards the intersection of Allandale Street and Centre Street to determine if modifications to the existing traffic signal (timing, equipment, etc.) can be implemented associated with this project to improve traffic operations at this location. Pedestrian ramps at this location should be brought to full ADA/AAB compliance.

• The developer shall coordinate with the Boston Transportation Department (BTD) in regards to the proposed driveway entrance to evaluate and approve the location for safety and traffic operations.

**Driveway Curb Cuts:**
Any proposed driveway curb cuts within the Public ROW will need to be reviewed and approved by the PIC. All existing curb cuts that will no longer be utilized shall be closed.

**Discontinuances:**
Any and all discontinuances (sub-surface, surface or above surface) within the Public ROW must be processed through the PIC.

**Easements:**
Any and all easements within the Public ROW associated with this project must be processed through the PIC.

**Landscaping:**
The developer must seek approval from the Chief Landscape Architect with the Parks and Recreation Department for all landscape elements within the Public ROW. Program must accompany a LM&I with the PIC.

**Street Lighting:**
The current street lighting in the vicinity appears to be wired overhead. This project shall include installing appropriate underground conduit systems for all street lights adjacent to the project site.

The developer must seek approval from the PWD Street Lighting Division, where needed, for all proposed street lighting to be installed by the developer, and must be consistent with the area lighting to provide a consistent urban design. The developer should coordinate with the PWD Street Lighting Division for an assessment of any additional street lighting upgrades that are to be considered in conjunction with this project. All existing metal street light pull box covers within the limits of sidewalk construction to remain shall be replaced with new composite covers per PWD Street Lighting standards. Metal covers should remain for pull box covers in the roadway.

**Roadway:**
Based on the extent of construction activity, including utility connections and taps, the developer will be responsible for the full restoration of the roadway sections that immediately abut the property and, in some cases, to extend the limits of roadway restoration to the nearest intersection. A plan showing the extents and methods for roadway restoration shall be submitted to the PWD Engineering Division for review and approval.

**Project Coordination:**
All projects must be entered into the City of Boston Utility Coordination Software (COBUCS) to review for any conflicts with other proposed projects within the Public ROW. The Developer must coordinate with any existing projects within the same limits and receive clearance from PWD before commencing work.
Green Infrastructure:
The Developer shall work with PWD and the Boston Water and Sewer Commission (BWSC) to determine appropriate methods of green infrastructure and/or stormwater management systems within the Public ROW. The ongoing maintenance of such systems shall require an LM&I Agreement with the PIC.

Please note that these are the general standard and somewhat specific PWD requirements. More detailed comments may follow and will be addressed during the PIC review process. If you have any questions, please feel free to contact me at zachary.wassmouth@boston.gov or at 617-635-4953.

Sincerely,

Zachary Wassmouth
Chief Design Engineer
Boston Public Works Department
Engineering Division

CC: Para Jayasinghe, PWD
September 20, 2019

Ms. Teresa Polhemus
Boston Planning and Development Agency
One City Hall Square
Boston, MA 02201

RE: Faulkner Hospital Combined Institutional Master Plan Notification Form and Project Notification Form for Inpatient Addition and Campus Improvements

Dear Ms. Polhemus:

The Boston Parks and Recreation Department (BPRD) has reviewed the Faulkner Hospital Combined Institutional Master Plan Notification Form and Project Notification Form for Inpatient Addition and Campus Improvements (IMP) at 1153 Centre Street in Jamaica Plain. The site is in the immediate vicinity of the Arnold Arboretum; the Allendale Woods Urban Wild; the Centre Street Greenbelt Overlay Protection District (GPOD); and the Allendale Street GPOD.

The IMP also includes the former Spaulding Hospital site at 1245-1251 Centre Street in West Roxbury which is two parcels, with approximately 3.46 acres at 1245 Centre Street and .3 acres at 1251 Centre Street. The site is entirely within the “Bakalar/Allendale Woods Conservation Protection Subdistrict” of the West Roxbury Neighborhood Zoning District Article 56.

The property is surrounded by Allendale Woods Urban Wild which is over 90 acres of permanently protected open space with ponds, streams, wetlands and forested uplands. The wetlands along the eastern property line of 1245 Centre Street are under the jurisdiction of the Boston Conservation Commission. Development within the wetland buffer is subject to the approval of the Conservation Commission under the Massachusetts Wetlands Protection Act, M.G.L. Chapter 131. Development on this property is also subject to the approval of the Boston Parks and Recreation Commission under Municipal Code Section 7-4.11.
The site is in proximity to the Weld Hill Tract of the Arnold Arboretum. This property sits at the entrance to the VFW Parkway which is a GPOD on the National Register of Historic Places and is under the jurisdiction of the Department of Conservation and Recreation (DCR).

**Use for 1245-1251 Centre Street** The IMP included 1245-1251 Centre Street on the plans, but provided no information beyond a reference to use the existing building for offices, storage and parking. The future use of this site has the potential to impact the protected open space and wetlands at Allandale Woods. Greater detail should be included as part of the IMP.

**Existing Easements at 1245 Centre Street** The property at 1245 Centre Street includes easements which would need to be considered in future redevelopment plans. Historic plans and deeds include a 60’ wide easement at the entrance and a 30’ wide easement which runs through the entirety of the parcel, giving access rights to the adjacent parcel which is owned by the City.

**Status of 1251 Centre Street** The parking lot is contained on the larger lot at 1245 Centre Street and does not encroach on the smaller lot at 1251 Centre Street. Given the number of restrictions and easements in the immediate vicinity, research dating back to the original transfers of property should be conducted to confirm whether the parcel at 1251 Centre Street is protected.

**Mature Trees** Mature trees at both campus locations should be protected as feasible, in support of the significant local protected ecosystem at Arnold Arboretum and Allandale Woods.

**Willow Path Childcare** The Willow Path Childcare is temporarily located in former Boston Public Schools modular structures at 19 VFW Parkway. The removal of these structures will allow the open space to be restored. The daycare may be an appropriate use to consider for incorporation in the building program at Faulkner Hospital at 1153 or 1241-1245 Center Street.

**Conservation Restrictions** Impact mitigation of the entire master plan should consider the permanent protection of open space at the main campus site at 1153 Centre Street and also at 1245-1251 Centre Street adjacent to Allandale Woods. This is in keeping with the properties in the immediate vicinity which have provided conservation restrictions for Allandale Woods.

Sincerely

Carrie Marsh Dixon, Executive Secretary
Boston Parks and Recreation Commission

CC: Ryan Woods, Commissioner, BPRD
Liza Meyer, Chief Landscape Architect, BPRD
Paul Sutton, Urban Wilds Manager, BPRD
Amelia Croteau, Executive Secretary, Conservation Commission
Jon Greeley, Director of Development Review, BPDA
Edward Carmody, Project Manager, BPDA
Eddie-

The scope of the traffic study should include Centre Street at:

- Allendale Street
- Arborway
- Walter Street
- VFW Parkway
- Whitcomb Avenue
- Hospital crosswalk
- Hillcroft Road

Jeff

Jeffrey R. Parenti, PE, PTOE, PTP, ENV SP
Deputy Chief Engineer
Division of Planning and Engineering
Department of Conservation and Recreation
251 Causeway Street - Suite 700
Boston, MA 02114
P: 617.626.1499
MAYOR’S COMMISSION FOR PERSONS WITH DISABILITIES

Martin J. Walsh, Mayor

September 1, 2019

RE: 1153 Centre Street (Brigham and Women’s Faulkner Hospital), Jamaica Plain, MA 02130
Institutional Master Plan/Project Notification Form
Boston Planning and Development Agency

The Disability Commission has reviewed the Institutional Master Plan/Project Notification Form that was submitted for 1153 Centre Street (Brigham and Women's Faulkner Hospital), in Jamaica Plain, MA. Since the proposed project is planned to be a vibrant destination area for local and regional medical services and employment, I would like to encourage a scheme that allows full and equal participation of persons with disabilities through ideal design which meets as well as exceeds compliance with accessibility building code requirements. It is crucial that the site layout, buildings, open spaces, parking, and circulation routes be developed with access in mind.

Therefore, in order for my Commission to give its full support to this project, I would like to ask that the following accessibility issues be considered and/or explained:

- **ACCESSIBLE BUILDING AMENITIES:**
  - Although it was determined that this addition project would not trigger full 521 CMR compliance, the Commission would like to encourage the project team to include minor accessibility upgrades in the parts of the facility not being renovated, where readily achievable.
  - The Commission encourages the Proponent to work with Brigham and Women’s to incorporate Universal Design principles in the tenant-fit-out design, as well as in hospital operations.
    - We would support the inclusion of a single stall accessible family/companion bathroom in the lobby of the building, even if not required by 248 CMR Section 10.00: Uniform State Plumbing Code.
    - We would support universal design principles be incorporated to the design and layout of service counters. For example, when multiple accessible service counters are provided, the tenant is able avoid operational issues in the future.
  - Please consider the use of automatic or power-assist doors at entrances, if not already present, to ensure that entering and exiting the building will be accessible and straightforward to all users.
  - Please consider using a variety of seating and table options in all common and outdoor patio spaces.
    - Per 521 CMR Section 35: Tables and Seating, we support the inclusion of wheelchair accessible furniture.
**ACCESSIBLE PARKING AND VECHICULAR TRANSPORTATION:**
- Please provide the updated number of parking spaces in the garages and outdoor areas, as well as the number of proposed accessible parking spaces, the location(s) and accessible route(s) to vertical circulation.
  - The Commission would like to call specific attention to 521 CMR Section 23.3.4: Parking and Passenger Loading Zones – Specialized Medical Facilities, to confirm that correct amount of accessible parking spaces (for visitors, patients and employees) are being provided.
- We would support all new proposed driveway curb cuts to be flush with the adjacent sidewalks, to provide a safe and enjoyable pedestrian experience across the entire length of the site.

**ACCESSIBLE ROUTE AND SIDEWALKS:**
- We support pedestrian improvements to and from the bus stop, to incentivize the use of the public transportation accommodations and provide safe and accessible access for pedestrians around the site, including but not limited to:
  - On Allandale Road, we would support the continuation of the sidewalk to support pedestrians with a safe and accessible route.
  - At the intersection of Centre Street and Allandale Road, we would support the reconstruction or redesign of the pedestrian ramps/intersection crossings.
  - A study and execution of an accessible route from the Centre Street bus stop to the main building facilities, where there are currently stairs.
  - An evaluation of the accessible routes through the outdoor parking lot.
- We support the use of cast-in-place concrete, in pedestrian areas, to ensure that the surface texture is smooth and continuous (minimize joints) and for the ease of maintenance.
- Updated plans should reflect bringing all reciprocal pedestrian ramps into City of Boston reconstruction standards.
- We would support ensuring that building setbacks allow for the installation of sidewalks that meet or exceed the design standards put forth by Boston Complete Streets Design Guidelines as well as other desired sidewalk uses (retail space, bus shelters or sidewalk cafes), so the site is accessible and functional for residents as well as visitors.
  - Should the Proponent have an interest in sponsoring a BlueBikes Station, please ensure that proposed locations are taken into consideration when determining streetscape dimensions. For sidewalk-level bike share locations, typically a minimum of 7ft of clear path of travel is recommended to minimize bike and pedestrian conflicts.
  - We support the granting of a pedestrian easement where required to bring the proposed sidewalk into compliance with Boston Complete Streets Design Guidelines.

**COMMUNITY BENEFITS**
- Have you considered providing funding for accessibility improvements to bus stops adjacent to the project?
- Accessibility extends past compliance through building code requirements. For example, by providing employment and other opportunities for persons with disabilities, the development becomes an asset to the surrounding community. What opportunities (ex. employment, community support, social) will the development provide for persons with disabilities?
• WAYFINDING
  o Do you have a Wayfinding Package to better understand wayfinding strategies within the scope of the proposed project?

• VARIANCES
  o Do you anticipate filing for any variances with the Massachusetts Architectural Access Board? If so, please identify and explain.

• CONSTRUCTION
  o Should any City of Boston on-street HP-DV parking spaces be relocated due to construction activities, relocated areas will require approval from the Commissioner. Additionally, the Commission shall be notified two weeks before construction starts.
  o Modifications to public transit infrastructure including but not limited to, bus shelter locations and operations during and post-construction should be considered and coordinated with the MBTA, before implementation.

COMMISSION’S GENERAL STATEMENT ON ACCESS:

The Mayor’s Commission for Persons with Disabilities supports ideal design for accessibility and inclusion, which meets as well as exceeds compliance with local, state, and federal building codes, including the Boston Complete Streets Guidelines, Massachusetts Architectural Access Board 521 CMR, and the Americans with Disabilities Act.

Our priorities for accessibility other than building design and construction include: maintenance of accessible features; signage for way-finding; utilizing compliant barricades throughout construction; designating appropriate location and amount of accessible parking spaces; and removing barriers in existing buildings wherever “readily achievable” (“easily accomplishable and able to be carried out without much difficulty or expense”).

The Commission is available for technical assistance and design review to help ensure that all buildings, sidewalks, parks, and open spaces are usable and welcoming to all of Boston’s diverse residents, including those with physical, sensory, intellectual, and communication disabilities.

Thank You.

Kristen McCosh, Commissioner
Mayor’s Commission for Persons with Disabilities
kristen.mccosh@boston.gov

REVIEWED BY:
Patricia Mendez AIA Architectural Access Specialist
patricia.mendez@boston.gov
Sarah Leung Architectural Access Project Coordinator
sarah.leung@boston.gov
617-635-2529 617-635-3746
September 18, 2019

Mr. Edward Carmody, Project Manager
Boston Planning & Development Agency (BPDA)
One City Hall Square, 9th Floor
Boston, MA 02201

SENT VIA EMAIL AND FIRST CLASS MAIL

Dear Mr. Carmody:

Springhouse, Inc., as neighbors of the Brigham and Women’s Faulkner Hospital, want to begin by saying we sincerely value this hospital and all it does for our residents and the entire nearby community. We look forward to working with the hospital as it develops plans for the new wing expansion and addition of parking garage space on the campus. Please add this letter to all the other comments you are receiving from the community at large regarding the Brigham and Women’s Faulkner Hospital Institutional Master Plan.

It is our sincere hope that the development team investigates all possible alternative plans including potentially adding a new Centre Street entrance, widening the current Allandale Street entrance and/or adding a Whitcomb Street opening for the entrance/exit currently proposed to be built into the hill exactly opposite of the entrance to the Springhouse Senior Living Community. If after careful consideration and only if there is no possible alternative, we request a major traffic calming system be developed by the City of Boston to allow for a safe entry and exit to Springhouse.

Springhouse currently has 129 elderly residents with at least 2 new residents planning to move here before the end of September. In addition to these residents and all their family members who visit, we have approximately 120 employees, plus or minus 40 private care givers, numerous delivery trucks, vendors, visiting medical professionals, guests and emergency vehicles coming and going from our only possible entrance/exit on Allandale Street. We have a very busy community and have always had concerns about anyone exiting Springhouse and attempting to turn left on Allandale Street due to the on-coming traffic coming around the blind bend on our side of this busy street.

We can’t begin to imagine how our residents, staff and guests will be able to maneuver from our side of Allandale Street without a traffic light or 4 way stop sign if the new driveway is built where it is currently proposed. We sincerely request that this important concern is taken under serious consideration. We also would like to have access to the traffic study that has been promised prior to the inception of any development.

In addition, we’d like to raise concern about the limited access to the MBTA in this area of Jamaica Plain. The 38 bus line schedule is attached. Please note that it does not run on Sundays and has limited runs in the evening time when the dietary staff members from both the Faulkner Hospital and Springhouse are completing their shifts.
We also want to mention that we have concerns about how this planned expansion might impact the wetlands and mature trees on and near the site. If these trees are going to be removed, we request that the hospital replants similar trees as well as take some of its land and install sidewalks for pedestrians. We also would like to view a geological study that proves there will be no impact on the wetlands.

Finally, our residents have raised concerns about the potential noise and rodent remediation during the construction period. We need assurances that every possible measure will be taken to prevent Springhouse from being infested with rodents once construction begins and that the hours of construction be limited to 8 hours per day with ample notification provided automatically to us whenever any type of loud drilling or blasting may need to take place so we can notify our elderly residents and calm those in our memory care neighborhood who will not be able to understand such noise nearby.

We sincerely hope our concerns are addressed as we would like to be able to completely support our good neighbor, the Brigham and Women’s Faulkner Hospital and all its wonderful programs and services that are available to all of us in this community.

Respectfully,

Kathy Foley
Executive Director and Appointed Task Force Member

Attachment

CC: Springhouse Residents
   Board of Trustees
   Walter Ramos, President, Rogerson Communities, Springhouse’s Management Partner
   Task Force Members
## Route 38

**Wren Street-Forest Hills Station**

### Weekday

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### No service on $S$

**NOTE:** Saturday trips operate via Route 38 between Forest Hills Station and West Roxbury Parkway. The bus then travels via Route 37 between West Roxbury Parkway and Baker & Vermont Streets. No service to Anawan Avenue, Park or Wren Streets at these times. Bus leaves Forest Hills Station at both #2.

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All buses are accessible to persons with disabilities.

### Route 38

**Wren Street-Forest Hills Station**

### Fare

- **CharlieCard** $1.70
- **Cash-on-Board** $2.00
- **Senior/TAP** $0.85
- **Student/Youth** $0.85

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**Fall 2019 & Winter 2020 schedule**

9:20 PM to Sunday 10:15 PM

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**Notes:**

- **Fall 2019 & Winter 2020 schedule**
- **TAP** valid until 10:15 PM on the same day.
- **Senior/Youth** valid only on the same day.
- **TAP** valid only on the same day.
- **TAP** valid only on the same day.
September 19, 2019

Mr. Edward Carmody, Project Manager
Boston Planning & Development Agency (BPDA)
One City Hall Square, 9th Floor
Boston, MA 02201

SENT VIA EMAIL AND FIRST CLASS MAIL

Dear Mr. Carmody:

I am writing to provide feedback on the Institutional Master Plan for the proposed Faulkner Hospital Development. I provide these comments as a representative of Sophia Snow Place, a senior living community located just down the street from Faulkner, as a neighborhood resident and consumer, and as a Task Force Member.

Brigham & Women’s Faulkner Hospital provides essential and life-saving services to our neighborhood. A majority of residents at Sophia Snow are regular consumers. My family and I are consumers. Faulkner’s track record of outreach to the community to provide preventive and supportive services is excellent. We laud the plan’s vision for providing increased capacity to meet increasing need. We laud the plan’s vision to accommodate new technologies and its sensitivity to the visual impact on its neighbors. We love the attention to environmental concerns and the LEED certifications.

Faulkner Hospital and Sophia Snow Place are fortunate to be located in a beautiful area adjacent to conservation land. Although we are still in the preliminary stages, I would like to emphasize in my comments a concern for the nearby very delicate natural areas. I know there will be geological studies, as outlined in the plan. I trust they will thoroughly investigate the possible impact on the wetlands. I look forward to learning more about these studies as part of the Task Force. I am also concerned about the replacement of any mature trees that must be removed. Boston Natural Areas Network and the Friends of Allendale Woods may be consulted on the stewardship of these precious resources that are located so near to the proposed development.

Transportation is another area of concern for people at Sophia Snow Place. I believe the proposed development provides an opportunity to approach the MBTA regarding the extremely limited public transportation options for this section of Centre Street. The #38 bus runs on a far from robust schedule six days/week with very limited evening service and does not run at all on Sundays. It is the only MBTA service that runs past Faulkner or Sophia Snow Place. In this
small section of Centre Street (and right behind on Allandale) we have Faulkner Hospital, Hebrew Senior Life, Springhouse Senior Living and Sophia Snow Place all with shift workers (7 days/week) that rely on public transportation. With an increase in staff, could the development team approach the MBTA and request that they revisit the #38 schedule? Is Faulkner willing to make their shuttle available to other facilities in the area? I hope that transportation will be a point of focus and that solutions broader than those outlined in the plan will be sought.

We also support the concerns of the residents of Springhouse regarding the placement of a second driveway directly opposite the entrance to Springhouse on Allandale. At Sophia Snow Place, our residents, staff and visitors know all too well about a difficult driveway location. We are looking forward to next year when we are promised DCR will install a signaled intersection at Walter and Centre. If a second driveway is installed opposite the Springhouse driveway, it will increase the danger of an already dangerous driveway for the residents, staff and visitors to Springhouse. Attention must be paid to traffic calming or signaling, or alternatives should be sought.

Rodents are another concern. Recent construction in the area has brought rodents to Springhouse, Snow Place, and many homes in the immediate area. The plan states that the developers will maintain compliance with city requirements for monitoring and treatment, but I wonder if there is anything more proactive that might be done. Minimal compliance has not stopped our existing issues.

Thank you for your careful consideration of these concerns. We are confident that solutions can be found and that this exciting and much needed development may be made even better with the input of the community. I look forward to my continued participation on the Task Force.

Sincerely,

[Signature]

Judy Jose-Roddy

Executive Director and Appointed Task Force Member

CC: Patty Roggeveen, President/CEO, Sophia Snow Place
    Board of Directors, RHAW/SSH
    Sophia Snow Place Residents
    Faulkner Task Force Members
    Walter Ramos, President, Rogerson Communities, Sophia Snow Place’s Management Partner
Hi Ed,

Thank you for all the updates and communication. I put Matt O’Malley on this email, hope that is OK with you.

I have shared the plans and links to BRA site with several neighbors, emailed maybe 40 people, many of whom said they forwarded it. People did know about it, partly because of the JHA emails and meeting. Many of my neighbors said they use the Faulkner, like the service component, the proximity, have a good overall impression, so perhaps are positively predisposed, with is my case precisely. Frankly, since I have been on Lila Road, 18 years now, the hospital has been a pretty good neighbor.

My perception of the project is that it is a necessary move for the Brigham with the growth and changes in their industry. Accommodation of a business’s growth does not make for a project’s acceptance and merit, but what they are proposing seems to be filling in some "air spaces" or notches in front that should work. The details, of course, like facade design and materials will be important for me and most people, but since they are not really expanding the footprint of the building, it seems reasonable. Most people I have spoken to feel that way, but want to see final plans, elevations and facade.

I, as do most people, favor relocating (and expanding) the garage to the other side of the property. It moves it away from the neighborhood and Whitcomb Road (which gets a lot of traffic even without a public entrance due to deliveries), but visually the garage really appears to be shrinking from the neighbors perspective, while actually expanding to make it easier to access the hospital.

The entry on Allandale I know is very problematic for many people, and I have looked at it. I imagine it could be done right, maybe adding a walk light, a crosswalk and some traffic calming, but that location can be a blind spot from the farm end and traffic going toward Newton Street is crazy as it is. I still like the idea of a new entry, of lessening the main entrance volume by having new entry employee only, but again, the details and proposal as it is now does not address the concerns. I am sure that is what they are working on, so we will see I guess, with the next iteration.

That’s my two cents, fairly positive, but want to see next steps. I was away last week for the JHA meeting, and have not heard yet how that went.

Bob Shortsleeve
Good afternoon Eddie,

I would like to raise what I consider an important issue for the proposed addition to the Faulkner campus. The driveways and internal flow of traffic are critical to the acceptance of the project. A driveway across the Springhouse needs to be carefully studied. A suggestion at the meeting was a traffic light. An important study will be the flow of traffic on Allandale St. when there is a high traffic volume; probably 5:00 am to 10:00 am and 3:00 pm to 7:00 pm. Next, the internal flow of traffic needs to be better studied. Why not make a circular flow so the autos can exit from either point of access. The speed limit on Allandale is 30mph but very few abide by the law. There has to be an extensive study of the bend in the road at 64 Allandale. In order to slow the traffic going east at that bend it maybe necessary to connect the lights with a flashing sign before one gets to the bend in the road.

Sincerely yours,
Elizabeth Bowen Donovan

Sent from my iPad
[Quoted text hidden]
Take the Long View of Centre Street Corridor

Before the city approves expansion at Brigham & Women's Faulkner Hospital complex, it should step back and engage residents to consider the future of the Centre Street corridor from a wider perspective – starting from the Arborway in Jamaica Plain all the way to Weld Street in West Roxbury/Roslindale.

With institutional expansion creeping here and there, pretty soon Centre Street will become the next Longwood Medical Area, without adequate transportation to support it. Look at the congested Seaport District to see how quickly that can happen when the city greenlights too many buildings without an adequate transportation plan to serve them.

Or just look at Centre Street at the multi-story Sophia Snow complex, which the city permitted a few years ago without any requirement to correct the hazardous, free-for-all intersection out front, where Walter Street meets Centre Street. Frequent (and preventable) accidents at this poorly configured roadway drive up insurance rates for every policyholder in the 02131 zip code, even when the drivers at fault live far away. I've seen vehicles leave Sophia Snow's parking lot going the wrong way up Centre Street to cross the intersection illegally. The intersection fails state safety standards. City officials should wait for state agencies to rebuild the intersection before inviting any additional traffic to another large parking garage at the Faulkner.

City planners have performed comprehensive master plans for neighborhoods (including a really good one for Roslindale, adopted in 2007), but this stretch of Centre Street straddles West Roxbury, Roslindale and Jamaica Plain. When impacts of proposed development straddle jurisdictional boundaries, growth tends to get permitted in a piecemeal fashion, without a comprehensive long-term vision of the whole. What is the city's vision and master plan for this stretch of Centre St? The city's institutional master plan process does not adequately answer that question, because it is too much about the buildings and not enough about transportation capacity and impacts.
The city has demonstrated a pattern of forgetting about institutions after permits are issued, leaving neighborhoods stuck with impacts after expansion. Several years ago, when Harvard’s Arnold Arboretum sought to install a new institutional complex at Centre and Weld Streets (on land that was not zoned for institutional uses), Harvard and the city pledged to extend the park-like effect of the Arborway down Centre Street by planting oak trees along Centre Street sidewalks from Arborway to Weld Street. Harvard got the zoning waivers it wanted, but neighbors have yet to see the trees. Who at City Hall is responsible for making sure Harvard and the city’s Parks Department keep the bargain?

Similarly, nobody at City Hall was watching when the Hebrew Rehab Center installed offices for countless Harvard employees at its facility on Centre Street, in violation of a deed restriction that limits the premises to a home for senior citizens only. (Little known fact: this deed restriction was put in place by the state legislature when Jerome Rappaport took public green space at Centre Street’s Joyce Kilmer Park for the complex in 1957, transforming Joyce Kilmer Park into Joyce Kilmer Parking Lot.) City agencies have a terrible track record of monitoring developer compliance with public commitments after development is built. Whose responsibility at BPDA is that?

Neighbors have reasons to be mistrustful of official neglect of this corridor and deserve a comprehensive plan for Centre Street from the city before any expansion plans for Faulkner Hospital are approved. Hope you can help here.

Sincerely,

Carter Wilkie

Past President, Longfellow Area Neighborhood Association

Roslindale
Edward Carmody  
Boston Planning and Development Agency  
One City Hall, Ninth Floor  
Boston, MA 02201  

Dear Mr. Carmody,  

September 16, 2019  

I am writing in support of the Institutional Master Plan and Project Notification Forms submitted by Brigham and Women's Faulkner Hospital and currently being reviewed by Boston Planning and Development Agency.  

I believe that there is compelling evidence in the submitted forms of the critical need for the proposed inpatient addition, the East Parking Garage addition, and the demolition of the existing West Parking Garage and the construction of its replacement. Such belief was reinforced in the public meeting that I attended this past week at the Weld Hill Research Building in Jamaica Plain.  

During the meeting, I found the proponent's representatives forthright and concise about what the proposed project will accomplish as well as what it likely cannot accomplish, particularly relative to any substantial improvement of the flow of vehicular traffic on Allandale Road and Centre Street during commuter hours.  

I believe that the proposed inpatient addition is well conceived and I am particularly impressed with its architectural massing because I think the structure, despite its overall volume, will have a minimal visual impact when perceived from Allandale Road and especially Centre Street. The East Parking Garage addition is in keeping with the proponent's mission of containing its own vehicular impacts within its campus, and the addition is something that we in the neighborhood have expected since the existing East Garage was constructed. I am also impressed with, and support, the West Parking Garage demolition and the construction of its replacement because it appears that significant resources will be extended to minimize the replacement garage's visual impact by including 2 subterranean levels.  

I appreciate the thoughtfulness, competency, and caring for our community that the administration of Brigham and Women's Faulkner Hospital have brought forward relative to the proposed work. I trust that any community concerns that are within the organization's control will be respectively and thoughtfully addressed. And, while I am not looking forward to the construction phase, I am confident that its impacts will be sensitively managed by the hospital and its contractors.  

Sincerely,  

[Signature]

David Foley
August 19, 2019

Mr. Brian Golden  
Director, Boston Planning & Redevelopment Agency  
Boston City Hall – 9th Floor  
Boston MA, 02201  
via email: edward.carmody@boston.gov

Ref: Scoping Determination, Brigham and Women’s Faulkner Hospital Institutional Master Plan: Campus Expansion Project

Dear Director Golden:

Please find below recommendations by Friends of Allandale for the City’s Scoping Determination as part of Faulkner Hospital’s proposed expansion project.

At this stage of project review, our comments express neither opposition nor support for the proposed Faulkner expansion, but list priority issues to be evaluated during the Scoping process, Request for Supplemental Information (if any) and the Draft Project Impact Report.

These priority issues are:

1. Traffic, roadway congestion, parking and circulation at the Faulkner campus, within the Centre St. corridor, along Allandale St., at Brownson Terrace, Malcolm Rd, Whitcomb Ave. and other nearby residential streets in the Jamaica Hills community.

2. Sustainable transit plan, as measured by Mode Share for current and with-project; project consistency with Mayor Walsh’s Climate Ready and related sustainable development programs.

3. Adverse impacts on the existing Allandale Street greenway, on natural resources within the Faulkner properties, such as mature trees at the proposed Allandale Road exit/entrance, and on resources at immediately bordering sites, such as the vernal pool, woods and wetland ecosystem adjacent to 1245 Centre Street.

4. Future use of 1245 Centre Street.

Additionally, we have recommendations regarding BPDA process, specifically the standard of review by which the proponent’s final project proposal will be evaluated. For example, will applicant be required as conditions of approval to:

A. Include measures that measurably reduce existing traffic congestion levels;

B. Achieve City Mode Share, Carbon Free and other Climate Ready targets.

Thank you for the BPDA’s work with Faulkner Hospital, individual residents and area organizations on this hospital expansion proposal.

Very Truly,  
Friends of Allandale  
Friends of Allandale
Summary of Recommendation:

The City of Boston should request that the applicant address the following issues in its Draft Project Impact Report:

1. Traffic, roadway congestion, parking, circulation and transit demand.
2. Sustainable transit plan.
3. Impacts on existing natural resources and the Allandale Street greenway.
4. Future use of 1245 Centre Street.

1.0 Traffic and Related Issues:

The Draft Project Impact Report (DPIR) should include a Traffic Study addressing roadway congestion, parking, circulation and transit demand at Faulkner, within the Centre Street corridor, along Allandale Street, at Brownson Terrace, Malcolm Rd., Whitcomb Ave and other nearby residential streets in the Jamaica Hills community.

The DPIR Traffic Study area should align with the October 2015 DCR “Centre Street Corridor Study”.

The DPIR Traffic Study to include:

1.1 An accurate and comprehensive analysis of existing baseline conditions of traffic, roadway congestion, parking, circulation and transit demand;

1.2 Traffic Study area of analysis to include both on-site Faulkner campus and immediately adjacent roadways and intersections and the Centre Street corridor from Murray Circle to the West Roxbury Parkway (DCR Study Area);

1.3 Traffic Study to evaluate in quantitative and narrative terms how applicant current operations contribute to existing traffic, congestion, parking, circulation and transit demand;

1.4 Current conditions analysis to include comprehensive description of applicant policies regarding existing private vehicle and transit use, with accurate quantification of current actual mode share use (i.e. private vehicle, public transit, ambulance, private transit (shuttle), Transportation Network Companies, other) broken out by user category (i.e. emergency department, out-patient clinic, in-patient visitor, nurse, doctor, administration, staff, other visitors);

1.5 Traffic Study to evaluate in quantitative and narrative terms individual and cumulative area institution-generated traffic, parking and related issues; specifically, assess contribution to traffic, parking and related from Faulkner sites together with Springhouse (40 Allandale), Hebrew SeniorLife (1220 Centre), Sophia Snow Place (1205 Centre) and Arnold Arboretum (1300 Centre).
2.0 Sustainable Transit Plan:

The Draft Project Impact Report (DPIR) should include a Sustainable Transit Plan, addressing all significant issues and impacts identified in the Traffic Study.

The Sustainable Transit Plan should be based on a project need determination.

It is not clear from the IMP Notification Form how many of the new parking spaces proposed are required to serve the 78-bed expansion plan and how many are intended to address existing but unmet demand for on-site parking.

The DPIR project need determination should indicate by narrative and quantitative analysis how the existing facility uses, satellite parking and projected new mode share, together with the proposed 78-bed expansion unit, generates daily travel demand proportional to the new parking spaces proposed.

The Sustainable Transit Plan should include comprehensive analysis of at least 5 project alternatives, in order to accurately assess project options that achieve basic objectives at lowest level of adverse impact.

Alternative 1: Project as proposed in the July 26, 2019 IMP Notification Form.

Alternative 2: Project as proposed, but with main entrance and exit on Centre Street, a circular internal road and no new entrance/exit on Allandale St.; this option could retain the existing Allandale St. entrance/exit for emergency vehicles.

Alternative 3: Project as proposed, with new 78-bed expansion, an increase in on-site parking of not more than 25%, with facility access provided not by private vehicle parking on site but via a combination of sustainable transit modes.

Alternative 4: Provision of 78-bed in-patient unit at Longwood Medical Area, which has superior sustainable transit options than Faulkner Center Street site.

Alternative 5: The no-project option.

The Sustainable Transit plan should:

2.1 Compare each project alternative, with narrative description and quantitative measures such as Level of Service, private Vehicle Miles Travelled, percentages of Mode Share for each facility user category (i.e. emergency department, out-patient clinic, in-patient visitor, nurse, doctor, administration, staff, other visitors), net cost and benefit for shifting Mode Share to achieve City of Boston targets.

2.2 The DPIR should not rely on Institute of Transportation Engineers (ITE) Trip Generation Manual for project planning, other than as a cross-check on the empirically-based and site-specific data generated by site analysis and Transportation Demand Management records research.
Ref: Scoping Determination, Brigham and Women’s Faulkner Hospital Institutional Master Plan: Campus Expansion Project Friends of Allandale Woods Recommendations

2.0 Sustainable Transit Plan: cont:

2.3 The analysis of current and future trip generation and alternative sustainable transit options should be based on data collected from actual field analysis, hospital records especially participation in Faulkner’s Transportation Demand Management program and credible, statistically-significant surveys among users.

2.4 The DPIR should contain most recent annual and quarterly reports of the Faulkner’s Transportation Demand Management program and discussion as to how the Sustainable Transit Plan will continue and improve TDM results reporting.

2.5 The DPIR should include comprehensive discussion of Mode Share options, including expanding programs such as 100% T pass subsidies; pro-rating parking fee for staff based on percent of income rather than fixed price; providing financial and professional recognition incentives for employees using sustainable transit modes; expansion of private shuttle services; subsidize T Bus #38 for more frequent service including weekends.

3.0 Allandale Street Greenway; Natural Resources On-Site and at Bordering Properties

The IMP Notification form states the following with respect to natural resources:

At 3.10 (page 3-17): “The site does not contain wetlands”.

The DPIR should clarify that 1245 Centre Street is within the 100 ft. buffer zone of delineated wetlands and that a vernal pool is located immediately adjacent to the property.

Additionally, 1245 Centre Street directly borders Allandale Woods Conservation area.

These natural resources provide the basis for 1245 Centre’s “Conservation Protection Subdistrict” zoning designation.

At 3.13 (page 3-19): “The Project Component sites are within a fully developed hospital campus and, as such, the project will not impact wildlife habitats.”

This statement is incorrect.

Many mature trees and greenspaces exist on the 1153 Centre St. campus. These natural features have intrinsic value and serve as habitat areas. Additionally, several smaller hospital-owned parcels along Allandale St. and on Malcolm Rd serve as green buffer areas between area homes and the main campus.
Ref: Scoping Determination, Brigham and Women’s Faulkner Hospital Institutional Master Plan: Campus Expansion Project Friends of Allandale Woods Recommendations

The DPIR and its evaluation of alternatives should include the following with respect to the Allandale Street Greenway, on-site and bordering natural resources and the smaller buffer parcels on Allandale St. and Malcolm Rd.

3.1 The Draft Project Impact Report (DPIR) should include a complete and accurate narrative with exhibits describing baseline natural resource conditions of existing on-site and at immediately bordering properties for both the 1153 Centre St. main campus and the 1245 Centre St. site.

3.2 The DPIR discussion of natural resources should include a complete inventory with exhibit map and documenting photographs of on-site existing mature trees, indicating species, size, health condition and estimated age.

3.3 DPIR should indicate, for each project alternative, which if any of existing mature trees will be removed; tree loss should be minimized; a tree replacement plan should be provided to mitigate impact of any tree loss.

3.4 DPIR should calculate existing greenspace square footage and calculate how much of existing greenspace will be lost and / or created by proposed project alternatives.

3.5 The DPIR should discuss in narrative and quantitative terms the existing Allandale Street greenway, describe in detail the Greenbelt Protection Overlay District and indicate how the proposed project will protect and improve Allandale Street’s greenway features.

3.6 For 1153 Centre St., the DPIR should provide accurate maps and description including current zoning of the several hospital owned parcels along Allandale Road and on Malcolm Road; the hospital should evaluate placing these smaller parcels into a permanent protected greenspace and buffer designation via a Conservation Restriction.

3.7 For 1245 Centre St, the DPIR should discuss the current Conservation Protection Subdistrict zoning and how it guides development on the site; the DPIR should describe the proposed IMP zoning change and indicate how that would affect the CPR zoning; the DPIR should describe how CPR protections will be maintained under a proposed IMP rezoning.

3.8 For 1245 Centre St., the DPIR should discuss existing and proposed site features, including ornamental landscaping, hardscape, stormwater measures, especially with respect to mitigating any adverse impacts on the wetlands and vernal pool on bordering conservation land.

3.9 For 1245 Centre St., the DPIR should evaluate how existing parking area extends into the rear section of the property, the interface with the Allandale Woods at this location, how illegal dumping of debris harms the Woods may occur here, how 1245 Centre St. security lighting is directed into the Woods, creating significant light trespass, and evaluate alternative measures to mitigate these adverse impacts.
Ref: Scoping Determination, Brigham and Women’s Faulkner Hospital Institutional Master Plan: Campus Expansion Project
Friends of Allandale Woods Recommendations

4. **Future Use of 1245 Centre Street.**

4.1 The DPIR should include a detailed discussion of alternative future uses of the 1245 Centre Street site.

1245 Centre (prior Spaulding Rehab site) is currently an underutilized property.

Land use authorizations under the proposed Institutional Master Plan may not suitable for instances where future uses are not sufficiently detailed.

The premise of a Draft PIR is that it fully documents project impacts, benefits and mitigation measures for evaluation by the public and to inform decision-makers.

Where future uses are not specified, DPIR assessment of project impacts, benefits and mitigation measures will be speculative and substantially incomplete.

The IMP Notification Form contained minimal information on anticipated future use of the 1245 Centre St. property, stating only that the IMP zoning will authorize the continued use and occupancy for the 1245 Centre Street Site for Hospital Use, in connection with BWFH use of the BWFH campus. (2.5.3 and 3.1.1.10)

This summary statement is an inadequate fact basis to reasonably assess project impacts, benefits and proportional mitigation measures.

Longstanding neighborhood interest exists in appropriate use of the 1245 Centre Street property. This interest arises from its proximity to important local natural resources, its history as a health and wellness caregiving facility, and the value of uses compatible with nearby residential uses at Sophia Snow Place and Springhouse Senior Living Community.

The IMP contains insufficient commitment by owner Brigham and Womens’ Faulkner Hospital, Inc. for appropriate future use of the site.

Concern exists that the Hospital may be land banking the property, without any definite plan for immediate or medium-term (3-5 year) use.

4.2 Absent a detailed future use plan, the City and hospital should exclude the 1245 Centre site from the main campus IMP.

4.3 The hospital should consider use of the site for a residential use model successfully used at Sophia Snow Place and Springhouse Senior Living Community.
5. Additional Comments on the IMP Notification Form

The following additional comments support and extend the priority issue comments above.

5.1 The IMP Form assumes approval of the project as proposed. Approval is a discretionary act by City of Boston. IMP and future project documents would benefit from a clear statement that the project may be modified during review and that ultimate project approval is not certain.

For example, at 2.2.2 Schedule, the IMP Notification Form contains only project construction start information, without any clarification that construction start would only occur “should the project be approved.”

5.2 Project context requires substantially more information on Massachusetts Department of Public Health “Determination of Need”; when this determination is made within the overall Table 2-2 List of Permits and Approvals should be clearly stated; additionally, the elements of DPH’s determination should be indicated.

How the proposed expansion project is empirically linked to health and wellness needs within the Faulkner’s catchment area should be described in detail, with citation to data sources.

5.3 Table 1.1 “BWFH Owned Buildings and Uses” should be clarified and expanded to create a complete chronological list of all Faulkner buildings and expansion projects, including both additions and demolitions, by year.

For example, Table 1.1 does not list the original building or differentiate between the 1976 Main Building or the 1995 Addition when listing approximate square feet.

5.4 Employment. Aligning the place of employee residence with commuting requirements would be useful data. This could be measured by distance, by proximity to public transit options.

5.5 Public Benefits. BWFH statement of community benefit mission suggests that the hospital catchment area is Boston neighborhoods of West Roxbury, Roslindale, Hyde Park and Jamaica Plain.

The actual emergency department, out-patient and in-patient neighborhood distribution should be stated in the DPIR.

Of note, Mattapan not considered part of the Faulkner catchment area.

5.6 Public Benefits. Key Accomplishments. If Faulkner intends to include these commendable accomplishments as offsets to current and proposed project impacts, these accomplishments should be more clearly documented.
Ref: Scoping Determination, Brigham and Women’s Faulkner Hospital Institutional Master Plan: Campus Expansion Project Friends of Allandale Woods Recommendations

5.7 Plans for Future Programs. Social Determinants of Health. Adverse health and environmental impacts arise from existing and proposed project impacts: increased traffic, congestion and reliance on private vehicles and loss of mature trees and greenspace: air pollution, stress, accelerating climate change.

The DPIR should apply a Social Determinants of Health lens to evaluation of project alternatives and to the Sustainable Transportation Plan.

5.8 Payment in Lieu of Taxes. BWFH is among the few City non-profit institutions which pays its voluntary PILOT amounts essentially in full. This is laudable and appears indicative of the hospital’s sense of civic responsibility.

5.9 Table 2-1, “Proposed Project Program”. This table should be clarified to clearly indicate number of existing parking spaces by location, spaces to be eliminated, spaces to be added and net number of spaces post-project, by location and total.

A Supplementary Table should indicate the same parking space information as above, with detail of number of spaces by parking patron: i.e. category (i.e. emergency department, out-patient clinic, in-patient visitor, nurse, doctor, administration, staff, other visitors).

5.10 Section 2.5.1 Existing Zoning for the BWFH Campus. The Draft PIR should include a Table and corresponding map clearly showing the separate parcels owned by the hospital that collectively make up the main campus.

The DPIR should include an exhibit map which overlays the proposed project and alternatives on the campus parcel map.

5.11 Table 2-2, “Preliminary List of Anticipated Permits and Approvals.

Table 2-2 should be accompanied by a narrative and approval “road map”, listing the chronological sequence in which permits and approvals will be sought.

Table 2-2 should include the Boston Conservation Commission.

5.12 Figure 2-16. This exhibit is fiction. For any proposed new Allandale St. entrance and exit, an accurate scale perspective and detailed series of renderings must be included in the DPIR.

5.13 3.1.1.1 “Pedestrian Facilities” and 3.1.1.3 “Transit”. These sections list MBTA bus routes 35 and 37 as serving the BWFH campus. This seems implausible, given the distance from these routes to 1153 Centre St. The DPIR should include further discussion of MBTA bus access to 1152 Centre St. For many years, Wren St. is the only bus route that has served Faulkner.
Figure 3-3. “Existing MBTA Transit Routes and BWFH Shuttle Stops”. In the DPIR, this transit exhibit should include bus route 51 and distance circles centered on the 1153 Centre St. campus, measured in miles and average walking time.

Transit improvement measures considered in the DPIR should include real-time location information in the hospital lobby for the 38 Bus and bad weather improvements to the northbound bus shelter.

Bicycle Accommodations. DPIR discussion of bicycle accommodations should include assessment of existing bike lanes on Centre St. and Allandale St. and whether these lanes should be improved.

3.1.1.8 Parking. The DPIR should include a parking demand analysis chart indicating hourly entrance and exit rates for 24 hour periods and day of week. If there are significant seasonal variations, these should be noted. A key project metric is the capacity level to which the proposed parking is being built. That is, does the hospital seek to provide maximum capacity to meet peak demand at all hours?

Table 3-1 “Parking”. The DPIR should evaluate whether the off-campus parking may be considered “permanent” or whether a contingency plan is needed in the event that these sites are no longer available.

3.1.1.9 Transportation Demand Management. “... most new employees are assigned off-site parking if they require parking.”

The DPIR should provide much greater detail on how employees are assigned parking spaces. For example, does proximity of parking spaces align with hierarchical position within the hospital or are parking assignments strictly by tenure of employment?

Do price / cost differences exist between on-site and off-site parking for employees.

3.1.3. And Table 3-2 Existing BWFH Traffic. This data should be broken out into Trips by User Type: i.e. Employee, Patient, Visitor and so on. This detail is important as it contributes to understanding what transit and parking options may be feasible.

The Table should also indicate Mode Share for all hospital visitors as a baseline analysis.

Table 3-5. “BTD Zone 19 Mode Share for All Purpose Trips”. This generic BTD Zone Mode Share approach is not appropriate for the proposed project.

The project should use a target 50% Mode Share non-private vehicle.
5.22 3.14 Sustainability. The Draft Project Impact Report should indicate in detail project compliance with City of Boston Climate Ready and all related sustainability metrics, including Carbon Free Boston.

The project impact analysis should include a program to bring the entire campus into compliance with the Carbon Free Boston targets.

6.0 Standard of City of Boston project Review

We recommend that the BPDA and other City agencies and departments clearly indicate the standard of review by which final project proposal recommendations may be made.

Specifically, the City should confirm whether the applicant will be required to make measurable reduction in existing traffic congestion levels and achieve City Mode Share and other Climate Ready targets as conditions of approval.

7.0 Conclusion; Basis for Recommendations:

Recommendations above are based upon the July 26 2019 “Institutional Master Plan Notification Form; Project Notification Form” and the August 14, 2019 community meeting for the project.

These recommendations are intended to help provide the public and decision-makers information needed to make informed evaluation of the proposed project.

Additionally, they seek to support the hospital’s commitment to community wellness by addressing social determinants of health elements, as expressed in measures that preserve greenspace, reduce traffic congestion and private car dependence and encourage alternative, low impact transit options.

The recommendations are informed by Friends of Allandale’s participation in the BPDA review of the 18 luxury, private-car dependent townhome units at 64 Allandale approved despite 50+ zoning violations in a single-family residential district.

This BPDA project review process at 64 Allandale was the pro-forma approval of a decision already made rather than objective assessment of project impacts and compliance with City planning rules and sustainability goals.

We note with that the Faulkner was respectful of residents concerns and served an appropriate role as interested abutter during 64 Allandale project review.

Residents also rely on traffic data in the Department of Conservation and Recreation’s “Centre Street Corridor Study” of October 2015.

This study indicates that several intersections at and near Faulkner Hospital operate at peak-hour “F” Level of Service, the most severe congestion grade obtainable.
Ref: Scoping Determination, Brigham and Women’s Faulkner Hospital Institutional Master Plan: Campus Expansion Project
Friends of Allandale Woods Recommendations

Friends of Allandale:

Friends of Allandale is an all-volunteer neighborhood-based non-profit organization with a focus on protection and improvement of Allandale Woods conservation area and the historic, natural and greenway features of the Allandale Street area in Boston.

Additionally, as reflected in our comments, we have interest in sustainable, equitable development and City of Boston project review that is transparent, comprehensive, fact-based and substantively responsive to community concerns.

- - -
Dear Mr. Carmody,

The comments below re: Brigham & Women's Faulkner Hospital's (BWFH) proposed expansion are submitted on behalf of the Arborway Coalition. We are a collaboration of JP residents & other interested parties working with City & State agencies & local neighborhood associations to preserve the Arborway as a green multi-use parkway connecting 3 Emerald Necklace parks designed by Frederick Law Olmsted: Jamaica Pond Park, Arnold Arboretum and Franklin Park. Our goal is to improve access to these parks for all users and to keep the parkway clean & green. Since 1996, our activities have included:

PUBLIC SAFETY: Access for pedestrians, bicyclists, motorists & residents.
PUBLIC HEALTH: Promotion of physical activity: completion of the Emerald Necklace bicycle path & improved pedestrian conditions.
HISTORIC LANDSCAPE PRESERVATION: Tree planting & stewardship, woodlands management on the hillside, clean-ups, restoration of the historic stone wall across from Jamaica Pond, replacement of the deteriorating fence at the Arboretum crosswalk & working to preserve Hellenic Hill.

Project Description:
Brigham & Women's Faulkner Hospital (BWFH) is proposing a 5-story, approximately 98,000-square-foot Inpatient Addition adjacent to and south of the hospital's main entrance, which will include 78 new inpatient beds as well as clinical support and ambulatory space. The Proposed Project also includes adding three levels onto the existing East Parking Garage (171 new spaces) and replacing the existing West Parking Garage with a new garage on an existing surface parking lot (adding 332 net new spaces) to support the Inpatient Addition. The plans include a new driveway into the replacement garage from Allandale Street to improve vehicular circulation.

Our concerns pertain to:
1. Traffic impacts from the 503 proposed additional parking spaces & new driveway on Allandale St.
2. Environmental impacts of tree loss & paving of green space for the new driveway on Allandale St.
3. Construction impacts

We recognize the value of BWFH to the community. However, we seriously question whether the hospital should function as an urban hospital in the City of Boston in a neighborhood whose population is rapidly expanding vs. the suburban car-centric model demonstrated in this proposal.
1. **Traffic impacts:** The expansion of the parking garages to include 503 new parking spaces would result in more than 1500 round trips daily. These vehicles would be using Allandale St., Centre St. & adjacent DCR parkways (VFW Parkway & the Arborway) which are already congested several hours per day and are high crash areas, as well as South St., Bussey St. & Walter St.

There have been strong objections to the number of new parking spaces. At the JPNC zoning committee, the BWFH team was asked several questions that remain to be answered. They are listed below, along with a couple of additional suggestions. We ask that BWFH pursue the most environmentally-friendly solution that is possible.

- Would they increase the shuttle service by the same % as they were planning to increase parking?
- Would they create programs similar to MASCO's CommuteWorks & CommuteFit to encourage employees to commute via active transportation & in ways other than single-occupancy motor vehicles? (Please see links below & attached photos.)
- Would they work with the MBTA to improve the frequency of the #38 bus?
- Would they work with DCR on the safety & multi-modal access improvements that the community has been striving to achieve for many years? The DCR parkways are already strained & there are ongoing efforts to increase multi-modal access & safety for all users. Can BWHF be asked to help with DCR's safety & multi-modal access improvement efforts (e.g. Walter St./Centre St. intersection & Arborway between Kelley Circle & Forest Hills)?
- Re: local streets: If there are negative traffic impacts on local streets, can BWHF be asked to help via "Neighborhood Slow Streets" treatments?
- Could they be asked to help Boston meet it's carbon reduction/climate resiliency goals. One example: "StreetsblogMASS roundup: a new multi-state climate policy could be a huge deal for transit (8/19/19)"

MASCO Commuteworks & Commutefit links:

https://www.masco.org/directions/commuteworks

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**CommuteWorks | MASCO**

CommuteWorks is a free benefit for employees of MASCO member institutions that aims to make commutes as stress free and efficient as possible. As the Transportation Management Association for the Longwood Medical and Academic Area (LMA),

www.masco.org
2. Environmental impacts of tree loss & paving of green space for the new driveway on Allandale St.:

- If BWFH creates a new driveway on Allandale St., how many trees would be lost? Mature urban trees have great value & are not easily replaced. Tree loss should be minimized. What are the tree replacement plans? Have they studied hydrology impacts on the lands downhill from the Hospital?
- We understand that BWFH is in a greenbelt designated area & should follow all relevant procedures.
- Apparently the traffic studies have not been completed. Concerns have been expressed re: sight lines for the proposed driveway as well as the previously described concerns.

3. Construction impacts
Abutters are legitimately concerned about:

- Foundation - blasting remediation for their foundations
- Rodent control
- Noise
- Landscaping
- Opportunity to see the plans to address these problems before the project is started

we support those requests.

Would you please add me to the notification list for updates on this project?

Thank you for considering these comments.

Sarah Freeman on behalf of the Arborway Coalition
22 Arborway
Jamaica Plain, MA 02130

4 attachments

20190919_234550_resized.jpg
1018K

20190919_234531_resized.jpg
957K

20190919_234509_resized.jpg
876K

20190919_234458_resized.jpg
932K
Hello Edward Carmody,

I am a resident of Springhouse. I want Faulkner Hospital to be successful because I use its services.

But I am concerned about the proposed additional entrance to the hospital grounds. It would be located directly across Allandale Street from the existing entrance to Springhouse, a retirement community.

It is presently dangerous -- particularly for us older drivers and particularly if we are trying to turn left -- to turn onto Allandale from Springhouse. The view to the left is encumbered by trees and a turn in the road prevents us from seeing oncoming traffic to the left until it is upon us. The driveway of our neighboring house is also just to the left. In order to avoid making this dangerous turn, some of us instead turn right onto Allandale, then turn left into Hospital grounds, and exit to the right.

Presently, all traffic going to the Hospital uses the one entrance on Allandale. If there were two entrances on Allandale, that would increase the time vehicles using that new entrance spend on Allandale (rather than on the Hospital grounds) -- and some of them would be turning left in front of the Springhouse entrance (a new danger). I can't see why this doesn't make a bad situation worse -- unless a traffic light or stop signs are installed and that would slow traffic that already backs up on Allandale at busy times during the day.

I don't pretend to have the best plan for traffic management at the expanded Hospital, but I did feel, at the presentation I attended, that the Hospital needs to give more consideration to how it can creatively use:

-- the former Spaulding site about a block from the Hospital on the same side of Centre Street

-- the present Hospital site which has extensive wooded grounds, four surrounding public roads, and an extensive system of internal roads.

Surely the best solution is NOT making the dangerous situation at the Springhouse entrance onto Allandale even more dangerous.

Respectfully,
Robert Pulster
To: edward.carmody@boston.gov

Dear Edward,

Thank you for extending the comment period. I am a resident at 76 Whitcomb Avenue and my property abuts the hospital behind the parking garage that is slated to be demolished. At the community meeting there was very little information provided about the plan to demolish the existing garage and replace it with surface parking. As an abutter I am concerned about:

1. The timeline, schedule, and duration of this particular part of the project;
2. How will the demolition be done and how will the resulting debris be handled on-site and during removal;
3. What are the anticipated sound and noise impacts to the surrounding environment near the site;
4. Why was there not a rendering of the proposed surface parking site as it is a significant piece of property and as such it would be helpful to see an architectural view of the plan as well;
5. Will the existing trees barrier at the rear of the property be maintained or changed to provide a buffer to the adjoining properties;
6. What are the owner's concerns in relation to the proposed surface parking area?

2. Are there plans to use the proposed additional parking (500 spaces) as a lot for employers or visitors to use as part of a shuttle service that will transport people from Faulkner garage?

3. Why did Brigham and Women/Partners — as a leading and large corporation in the City — not consider a more environmentally friendly and green expansion plan that does not adapt to a plan to be more forward-thinking in light of serious concerns of warming climates, impacts of high-stress travel for health considerations, and other health-related and environmental implications?

4. What are you offering to the neighborhood in services, resources, or other community benefits that will help to mitigate major community resistance? As a nonprofit that does not pay to municipal revenues is minimal relative to your corporate footprint.

5. Will you have a dedicated person that will be available to coordinate and respond appropriately to community concerns, questions, and possibly urgent matters related to this project?

Finally, as a matter of community process in building a good faith effort with neighbors and ensuring a fruitful relationship, it would have been respectful and appreciated — particularly to inform and initially discuss what you were planning and proposing.

I look forward to continuing to be in dialogue and learning more from the property owner their responses to these and the anticipated, many other concerns.

Thank you.
Truly yours,
Robert Pulster

On Wed, Aug 21, 2019 at 2:29 PM Edward Carmody <edward.carmody@boston.gov> wrote:

Dear Faulkner Hospital neighbors and community members:

Thank you for attending the Faulkner Hospital Public Meeting last week and voicing your concerns and ideas about the proposed projects. We have decided to extend the initial comment period so your interested neighbors, colleagues, and friends know that comments are due to me (via email, the project page of the website, or regular mail) by the end of the day on September 23, 2019.

Thank you for your assistance and engagement in the review process, and I look forward to receiving your comments.

Eddie

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Edward Carmody
Project Assistant
617.918.4422

Boston Planning & Development Agency (BPDA)
One City Hall Square, Boston, MA 02201
bostonplans.org

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Faulkner Hospital Comment Period Extended

Shari Lyons
To: "edward.carmody@boston.gov" <edward.carmody@boston.gov>
Cc: Shari Lyons

Thu, Sep 19, 2019 at 7:44 PM

Hi there. Thanks for reaching out, and thanks for extending the deadline for comments.

There are a few things that I hope would be considered in reviewing the project.

First and foremost, I strongly suggest that the traffic flow both entering and exiting the hospital as a whole be redesigned as part of this process. The current entrance as is off of Allandale is too short; it doesn’t leave the public enough space to pull in and determine where they need to go when they enter, thereby causing a logjam at the entrance. The second logjam occurs when one continues up to the main entrance and tried to determine if they are going to the right to the parking lot, straight into the garage, left to emergency, left to valet or left to drop off. There is quite a large area with which to work if one were to look at the big picture of the lower lot from the front entrance toward center street as well as the current entrance toward the lower garage near emergency, and the area that makes the hairpin turn back around to the current valet area. So, as the new parking garage and entrances are being designed, please design a more thoughtful traffic flow as well.

While there has been an attempt to rectify the situation of people from the Faulkner parking in our neighborhood behind the hospital by adding resident only parking signs, I have found this to be a hindrance as opposed to a help. It means that those of us who live in the neighborhood cannot have guests for more than 2 hours without them getting a $60 ticket and that INFURIATES me. I purposefully chose to live in a quiet, off-the-beaten-path neighborhood where parking was not an issue, and then this happened. And removing the signs would cause issues for my neighbors. I would like to see those of us in the neighborhood around the Faulkner be able to have guest parking passes that we can put in our visitor's windows so that they can park as long as they are visiting whether it be a day or a week. Honestly — a simple piece of paper that we could put in the window.... that the police would know not to ticket those cars. It didn’t help the problem. People still come for their appointments, park in front of our homes and leave - but now OUR visitors are getting tickets, and those of us who live here are annoyed even more. So instead of one problem we have 2 AND its costing us money. We need you to work with us and the city of Boston to come up with an acceptable exception for our guests to not be ticketed.

It's hard to be a good neighbor, if there is a way to put up some sort of sound proofing/buffer between the houses that surround the Faulkner and the construction you will be doing, I think it will go a long way to help over the many years of construction to come. And I would suggest a focus of screening with the landscaping at the lot line between the houses and the hospital grounds and again at the yard and the edge of the garage, as well as from the street view to the garage.

Shari Lyons

8 Arborview Road

Jamaica Plain
Hello, I would like to have these additional comments and concerns entered into the record for the Faulkner Hospital Expansion proposal.

As a direct abutter on Malcolm Rd I have specific questions about the project and serious concerns. The homes on Whitcomb (at the corner) and the first part of Malcolm will be most impacted by this expansion. We would need to have rodent control, blasting remediation for our foundations, and landscaping remediation. We would want to see the plans to address these problems before the project is started.

Rodent control especially rats is a problem whenever there is a construction project in an urban area. There should be a certified and professional company that addresses this issue on an ongoing manner for the residents.

Blasting can cause harm to the foundations of nearby buildings. We would want a site pre assessment done on all the houses abutting the Faulkner's land and a post assessment by a certified and professional company to insure that there is no harm done to the homes by this project.

Landscaping at the back of the garage will be extremely important to minimize the visual and noise impact of this new building. Right now the land is minimally maintained and filled with invasive plant species that spill into our yards. The fence is falling apart in places. This has acted as a buffer of sorts. The new garage will be much closer to our homes and the solar panel array pretty much at eye level for us. We want to see a landscape design that takes these issues into account. It is necessary for the abutters to have input into the design.

Louise Johnson
20 Malcolm Rd

Sent from my iPad
Faulkner Hospital Comment Period Extended

William DeWitt
To: Edward Carmody <edward.carmody@boston.gov>

Thanks for extending the comment period. I am an abutter to the Faulkner Hospital. I am particularly concerned about their proposal to add 500 parking spots. I believe Partners is the largest employer in MA. As such I am perplexed why they are not taking the lead in developing more innovative, environmentally sound alternatives to adding more spots for cars. While their plan to have electric charging stations and bike sharing is admirable it does not go far enough. Adding more parking spaces will further increase the traffic in an already very congested area. Turing left from Centre Street to Whitcomb Avenue is already a huge challenge. The block the box signs and cross walk lights are currently not paid attention to buy many motorists and not enforced by police. I can imagine that congestion and traffic safely issues will be much more pronounced if more parking spots are added.

In their public presentation in August Partners had no answers as to the impact to the local traffic and why they have not considered expanding their shuttle services and off site lots. They must consider alternatives to adding more parking and must develop transit solutions to target where their employees and patients reside and provide real alternatives to individuals driving alone in single cars to the hospital. This is not a sustainable solution.

Partners did not mention their development plan for 1254 Centre Street. What is the five year plan for this property? What is the five year plan for the new parking lot which will take place of the existing garage at Faulkner? Is the a staging area for further development?

I am confused as to why 78 more beds require 500 more parking places. This needs to be explained.

In their presentation Partners claimed Boston has a shortage of inpatient hospital beds. Information to support this claim is not readily available. Where is the evidence? There is certainly a shortage of inpatient psychiatric beds. I support an increase in inpatient psychiatric beds at Faulkner. Will more psychiatric inpatient beds be created with this expansion? If so what percent of the 78? If not why not?

I am also concerned about disruptions to the area when construction begins. What is the construction time line? What will be the hours? Where will the construction vehicles be parked? What are the mitigation strategies to address possible rodent issues? Who are the contact people from Partners and the city to address neighborhood complaints?

Bill DeWitt
I want it noted in the record that the parking garage expansion that includes 500 new parking spaces will in reality mean up to 1500 more cars daily, because of the 24/7 nature of the institution and the round the clock, 7 days a week, 3 shifts a day employee use of the new garage. This will be completely dumped onto Allendale Rd and Centre St.

Very frightening when you think of the havoc that this will reek on the neighborhood and JP in general. Landscaping is not going to solve this problem!

Louise Johnson

Sent from my iPad
Sarah de Ris
To: edward.carmody@boston.gov
Cc:

Dear Mr. Carmody,

As an elderly resident of Springhouse, I am appalled at the tentative plan to put a new driveway from a new Faulkner parking garage directly across from our one Springhouse entrance. I still drive, and already find coming in and out of the Springhouse entrance hazardous at best. The traffic limit of 25 miles an hour on Allandale St. is not enforced at all, and cars often come barreling around the curve in front of our entrance at 40 miles an hour or more. A traffic light, were one available, would certainly increase congestion in both directions. And give some thought to the trees that would have to be destroyed to bring this about.

I gather the residents of the Whitmore St. (?) neighborhood are strongly against this expansion as well. Faulkner is my hospital and I certainly respect it, but these expansion plans seem, at the best, thoughtless.

sincerely,
Sarah de Ris
opposed to the Faulkner Hospital 500 more cars garage expansion

Louise Johnson
To: Edward.Carmody@boston.gov

This is a car centric proposal with no thought as to the public transportation options. 500 more cars are not going to fix a systemic problem of accessing the hospital. You will be back within a few years asking to build an even bigger garage for more cars! You need to work with the MBTA to create a robust bus route that can function for reliable and continuous service for staff, patients and visitors along with the neighborhood you reside in. We are your neighbors and have to live next to you. What you do on your campus affects us closely and daily. You need to expand your shuttle service and open it up to the larger Jamaica Hills Community.

This is not the era of Robert Moses and building freeways to shuffle people alone in their cars from one point to another. Those days are gone. Try reading Jane Jacobs "The Death and Life of an American City". The planners of this project need to update their play book of how to design a project for an urban campus in the 21st century. A bad choice on the hospital's part that they picked a design company with not a hint of creativity and innovation.

I vehemently oppose this project.

Shame on the city of Boston for even letting this proposal get to the public presentation stage without telling the Faulkner that a public transportation option has to be a part of the package.

One blue bikes station alone is NOT a public transportation program!

Where is the city's due diligence? You should be ahead of the curve not behind it!

Louise Johnson
abutter
20 Malcolm Rd
JP, Ma 02130
Faulkner Hospital Expansion: JPNC Zoning Presentation

Allandale Coalition  
To: Edward Carmody <edward.carmody@boston.gov>  
Cc: Celeste Walker

Attached is the Scoping comments on Faulkner's proposed expansion by Friends of Allandale.

Also attached is the DCR Centre St materials, which shows several Centre St intersections at and near the hospital at "F" ie the highest congestion level measured.

I will likely not be able to make the mtg but our recommendation to the Zoning Committee is:

- In the Draft Project Impact Report, please include the alternatives analysis recommended by Friends of Allandale.

- Specifically, in addition to the proposed project please evaluate the alternatives of:
  a. Centre St entrance and exit
  b. Locating new beds if needed at Longwood Medical Area sites, as this location is served by many alternate transit modes

- In the Draft Project Impact Report, please clearly indicate:
  a. What the existing and post-project Mode Share will be (ie private car %, public transit % etc) and how the project will achieve the City's 50% (act 48%) non-private car Mode Share target.
  b. What the Centre St Level of Service will be post project and what measures will be implemented to improve LOS to C level or better/

Thanks.

Let me know any qs.

Frank OB

3 attachments

- Centre.Street.LOS.2015.png  
  261K

- Faulkner.IMP.FoA.Comments.Scoping-signed.pdf  
  213K

- dcr-centrestreet-20151007(1).pdf  
  1999K
The City must not approve 500 new parking spaces as part of the Faulkner Hospital expansion. Improved public transportation to Faulkner, shuttle buses from Forest Hills, and other traffic mitigation efforts must be part of the plan.

To simply approve this increase in parking at Faulkner runs counter to the city's claim to attempt to reduce traffic congestion in the Center street/Jp-West Rox area.

Kay Sloan
Dear Mr. Carmody,

I am writing to voice my concerns about the proposed Faulkner Hospital project presented at the public meeting held on August 14, 2019. I have lived on Malcolm Road in Jamaica Plain since 1993. The increased clinical activity at Faulkner over the past few years has negatively impacted our neighborhood and the proposed expansion threatens to worsen the situation. I will limit my comments to 3 areas of concern:

1. Parking: Employees and visitors to Faulkner regularly park in the neighborhood and at times have created dangerous conditions due to the narrow streets. Before restricted parking for residents was posted, emergency vehicles often would not have been able to readily access the homes on Green Hill because of the congestion. Restricted parking has helped but not solved this problem. The proposed expansion is very likely to recreate the dangerous conditions we have worked hard to alleviate.

2. Traffic: Traffic along the stretch of Centre Street in front of Faulkner is already treacherous and the gridlock on Allendale Rd near the Faulkner driveway is becoming untenable. A plan that invites 500 (!) additional vehicles into this morass is shortsighted, dangerous, and dismissive of the cares and needs of the residents. Importantly, the plan also disregards critical environmental concerns. As a progressive community we should be promoting more public transportation and fewer cars.

3. Community relations: The day to day functions of the hospital regularly disrupt the quality of life in our neighborhood. Activity at the loading dock on Whitcomb frequently obstructs the road and delivery drivers often do not operate in a safe manner for a residential environment. The Faulkner restricts smoking on the hospital campus. As you can imagine our neighborhood has thus become the de facto smoking lounge for the employees. I realize these are public streets and access cannot be limited to residents only. I use to regard the Faulkner community as a good neighbor when I first moved to the hill. The administration was responsive when neighbors voiced a concern. However, there has been a noticeable degeneration in the hospital's openness and concern for the surrounding residents as Faulkner has become bigger and busier. The lack of communication as this plan has rolled out, especially with the abutting neighbors, is a worrisome sign of the diminishing regard Partners and Faulkner has for their neighbors.

I appreciate your giving voice and representation to our neighborhood's needs and concerns as this project develops. Please do not hesitate to contact me if you have any questions.

Sincerely,
Joan Bengtson
54 Malcolm Rd
Jamaica Plain, MA 02130
Dear Mr. Carmody,

As I will be unable to attend the meeting next Wednesday, I would like to voice my concerns to you about the Partners/Brigham and Women’s Faulkner Hospital expansion plans. Partners has transformed the Faulkner from a community hospital that used to serve the JP community into an income-producing satellite of their tertiary care institutions. Expanding services and increasing the number of bed spaces does not benefit Jamaica Plain.

As a neighbor of the Faulkner, I can attest to some of the negative impacts of the hospital’s presence (traffic, constant noise from ambulance sirens, etc.) and these will only worsen with the proposed expansion.

As we are blessed with an abundance of both urban and suburban sites providing excellent specialty services in the Boston area, I perceive no real need for expanding such services here in this residential neighborhood.

My personal experience of having Partners force my general pediatrics practice to vacate our office space at the Faulkner (after 23 years) attests to their lack of interest in providing needed primary care services to the community. They are, instead, mostly interested in providing highly profitable specialty care services that can already be easily accessed elsewhere.

I would encourage Partners to withdraw their proposal.

Sincerely,

Mitchell Tunick, MD
I have worked in Boston for 20 years. When I recently had to have hand surgery and follow-up treatments, I've been pleased about the care I received and relative convenience - even commuting from the north side of the city - at Faulkner Hospital. We are lucky in the Boston region to have some of the best medical institutions and care in the world. Based on my personal experience, I support and would advocate for this expansion, which would efficiently serve more people and provide broader access to quality healthcare.

<table>
<thead>
<tr>
<th>Comment: 8/3/19</th>
<th>First Name: David</th>
<th>Last Name: Foley</th>
<th>Organization: Neutral</th>
<th>Opinion: Oppose</th>
<th>Comments: I need all the information that you can provide. I will not be available for the 8/14 presentation. I am piqued that the comment period is in August when many of our community members vacation.</th>
</tr>
</thead>
</table>

| Comment: 8/12/19 | First Name: Adele | Last Name: Margulis | Organization: Resident | Opinion: Neutral | Comments: What will be the traffic impact and traffic patterns both during construction and after completion? There is already a great deal of traffic on Center Street and Allandale and it is already challenging to get onto Whitcomb. More cars coming to the neighborhood is a real concern. I am also concerned about the constant tearing up of the street, especially after it has been repaved by the city. What will the hospital do to insure that the street remains in good shape? The Faulkner has allowed residents to park in the garage during snow storms. I would like to see this continue both during construction and post construction. The garages need to be surrounded by greenery. |

| Comment: 8/15/19 | First Name: Mark | Last Name: Hanson | Organization: Neighborhood homeowner | Opinion: Neutral | Comments: In light of MIT Transportation white papers projecting rapid decrease in traffic due to driver-less vehicles adoption, I propose the following: 1. Faulkner - Forest Hills Loop(s): two or more dedicated FREE to ALL shuttles every 10 minutes NONSTOP from the MBTA station to the West entrance of the hospital - Signage to include TRAVEL FREE TO ALL - NON STOP Forest Hills - Faulkner Limited Valet parking ONLY on-site. To address Boston housing and reforestation initiatives: 2. Buy Italian Home for Children including commitment to relocate functions to (retain ownership) of site by 1245 Centre Street. Convert 1125 Centre Street (HCH) property to duplex residential housing neighborhood density equivalent to abutting neighborhoods with maximum of 1 on street parking space per unit. New housing to be below market rate, owner occupied requirement (no rentals) To respond to the abutters' long standing issue with using Whitcome Ave as a non-residential street 3. Remove Whitcomb Ave access to Hospital. Reroute all deliveries through campus. Erect pierced/vine planted wall with safety gate entrance only all along Whitcomb to discourage parking by non - residents. To respond to broad neighborhood concerns with the traffic behavior on Centre Street 4. Fund for 10 years a series of Automatic Camera Traffic Enforcement installations at several points along Centre Street and signage to publicize the focus on Enforcement in both directions along Centre Street To build community support 5. Establish a permanent (funded 10 - year minimum) office of neighborhood relations on-site at the hospital focused on Faulkner Hospital neighborhood area. Mission Service as a Responsible Community Participant. Measures of Success by non - residents To respond to broad neighborhood concerns with the traffic behavior on Centre Street 4. Fund for 10 years a series of Automatic Camera Traffic Enforcement installations at several points along Centre Street and signage to publicize the focus on Enforcement in both directions along Centre Street To build community support 5. Establish a permanent (funded 10 - year minimum) office of neighborhood relations on-site at the hospital focused on Faulkner Hospital neighborhood area. Mission Service as a Responsible Community Participant. Measures of Success based on agreed impact on quality of life project successes A. Operational Transparency B. Environmental Impact C. Traffic Performance D. Community Housing 6. Reforestation - once existing garage is removed - configure resulting surface lot to include a significant number of deciduous trees and use porous surfaces to establish a space that - buffers the margin along Whitcomb Avenue (sound) to benefit the abutters - establishes a space that will NOT be easily converted to additional structural footprints - provide a waiting area of delivery vehicles - not parking for employees or visitors |

<p>| Comment: 8/18/19 | First Name: Stephen | Last Name: Bell | Organization: Oppose | Opinion: Neutral | Comments: There are many problems with the current proposal. 1. There is no justification made for the dramatic increase in parking spaces (~500) relative to the small number of increases in beds (78) and staff (total of 250 positions but ~100 on site at any given time). 500 NEW parking spaces is far too many and will dramatically increase traffic in the area in an unacceptable way. Given the numbers that the Faulkner provided at the public meeting an increase of 180 (one per patient and new staff member) would be more than sufficient (hopefully not all would use a car to arrive on site). A higher number just encourages more cars to arrive on what the Faulkner already indicates is an bad traffic situation both on and off the site. 2. The Faulkner has not made enough effort to encourage visitors and staff to take other means to get to work. For example, although representatives of the Faulkner say that they run a shuttle between the Forest Hills MBTA station, on their web site they only discuss an MBTA bus. 3. The location of a new driveway exiting onto Allandale St is poorly conceived and at a minimum will require a new traffic light at this location. In addition, there was no discussion of widening Allandale St (at the expense of Faulkner property) to create additional lanes on Allandale between Centre St and the existing Faulkner entry/exit rather than creating a new exit. The impact of this change on traffic on Allandale is unacceptable. 4. The current plan does not consider other potential new sites of entry and exit (e.g. from Centre St) nor does it consider how to change traffic flow on campus in ways that eliminate the already bad traffic flow caused by the existing Allandale and Whitcomb entrances (both of which impinge on residential areas as opposed to Centre St which is a four lane road with no nearby residences). 5. The Faulkner failed to consider other sites to place a parking structure. For example, they own the former Spaulding rehabilitation center and this could represent an alternative site for additional parking. |</p>
<table>
<thead>
<tr>
<th>Date</th>
<th>Name</th>
<th>Affiliation</th>
<th>Position</th>
<th>Comment</th>
</tr>
</thead>
<tbody>
<tr>
<td>8/20/2019</td>
<td>Benjamen Wetherill</td>
<td>West Roxbury Bicycle Committee</td>
<td>Neutral</td>
<td>It is very important that this project includes a plan to improve bike lanes along Centre Street in front of Faulkner Hospital. Currently the biking situation on this section of Centre Street is very bad. The street breakdown lanes are marked for bikes, but this is not safe next to two lanes of fast driving cars on a curvy road. Also, the breakdown bike lanes disappear at the intersection of Centre Street and Allendale Road in front of Faulkner Hospital. This is an accident waiting to happen, especially on the northbound side. Centre Street is the only link between West Roxbury and the Emerald Necklace bike path. Most people are afraid to ride on the section of Centre Street between VFW Pkwy in West Roxbury and Arborway in JP, which passes in front of Faulkner Hospital, so this section of Centre Street effectively cuts off West Roxbury Bicyclists from the Emerald Necklace. Please don’t pass up the opportunity to correct this situation as part of the construction.</td>
</tr>
<tr>
<td>8/21/2019</td>
<td>Scott McNey</td>
<td>MIT</td>
<td>Support</td>
<td>I support the growth of healthcare options throughout the city, however, the increase in parking does not seem commensurate with the increase in the # of beds. Will they be using these spaces and bussing employees to their other locations in the area?</td>
</tr>
<tr>
<td>8/21/2019</td>
<td>Charlotte Miller</td>
<td>Oppose</td>
<td></td>
<td>500 parking spots seems very excessive without an explanation for the need for that amount. This plan is focused on seeing Boston as a car centric city. Why is there no focus on alternative modes of transport such as bikes and public transport? This expansion may increase the amount of cars on the road with increasing future focus on cars rather than other people who commute in a different way.</td>
</tr>
<tr>
<td>8/22/2019</td>
<td>Tim Dean</td>
<td>Oppose</td>
<td></td>
<td>I am a long-term Boston and Jamaica Plain resident. This plan needs a public bus route. We do not need 500 more cars in that area you can barely get down the road from 3 o’clock clock on. This is not sustainable. A bike lane and a regular MBTA bus schedule is critical.</td>
</tr>
<tr>
<td>8/22/2019</td>
<td>Eric Johnson</td>
<td>Neutral</td>
<td></td>
<td>I understand that the Faulkner Hospital is working on a long range plan to grow and expand. As someone who both lives and works nearby, I would like to suggest that promoting public transportation be a major component in any plan. This is already a highly congested area. Rather then adding 500 more parking spaces which will obviously add to the congestion, increasing public transportation options would go a long way to making this a viable project. Thank you Eric Johnson</td>
</tr>
<tr>
<td>8/22/2019</td>
<td>Donald Monty</td>
<td>Neill</td>
<td>Oppose</td>
<td>500 new parking spaces is outrageous and should be blocked. Faulkner to spend its money on enhanced public transportation, including quick shuttles from Forest Hills and/or other existing options such as Shattuck.</td>
</tr>
<tr>
<td>8/23/2019</td>
<td>Andee Krasner</td>
<td>Mothers Out Front</td>
<td>Neutral</td>
<td>Dear Mr. Carmody, I am a resident of Jamaica Plain and a volunteer with the Mothers Out Front Jamaica Plain Community Team. Mothers Out Front is an organization working for a livable climate for our children. Our organization is also a member of Boston Clean Energy Coalition, which has been advocating for the adoption of a net-zero carbon buildings with the City for the last couple of years. This past November, Boston University released its Carbon Free Boston summary report commissioned by the City. It found that in order to reach our 2050 greenhouse gas reduction goals, Boston needs to immediately begin building net-zero-carbon, all-electric buildings and develop a plan to retrofit the rest of its building inventory. We are excited to see that the Faulkner Hospital project reflects the ideals of the Carbon Free Boston report and plans to increase on-site clean energy, and to reduce its consumption target of 50% less energy use than comparable hospitals, as well as to design for resiliency. We applaud their efforts to encourage electric vehicles and biking. I was uncertain about how Faulkner Hospital plans to heat and cool the building. The presentation I read did not present the plans for heating and cooling systems. Consistent with the Carbon Free Boston report, Mothers Out Front would like to see the building be all-electric. In line with Faulkner Hospital’s values to improve the health of its patients, all-electric buildings contribute to the reduction of air pollution that results from burning natural gas. They are also safer. Buildings serviced by natural gas can ? and do ?explode, as we saw in Merrimack Valley last year. Lastly, all-electric buildings can run entirely on 100% carbon-free energy the hospital is purchasing and help mitigate the health impacts of climate change. Constructing an all-electric building will also avoid costly retrofits in the near future. We support the expansion of our neighborhood hospital and ask that it be built consistent with the Carbon Free Boston recommendations. We know the Faulkner Hospital shares our goals to ensure a healthy future for our community. Sincerely, Andee Krasner, MPH Volunteer with Mothers Out Front</td>
</tr>
<tr>
<td>8/26/2019</td>
<td>Jesse Littlewood</td>
<td>Mr.</td>
<td>Support</td>
<td>I would also like to see improvements made to the road next to the hospital, including an extended curb for bike traffic (or other protected bike lane).</td>
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<td>8/28/2019</td>
<td>Vickie Henry</td>
<td>Oppose</td>
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<td>I am opposed to adding 500 parking spaces and especially so for only 78 new patient beds. That is 6.45 parking spaces per bed! Centre Street already is over burdened at rush hour. This volume of additional vehicles would be crushing. Why do you need more than 3 spaces per bed (that gives you 234 spaces and downsize the garage accordingly)? Also, having visited patients, you have extra spaces now. Are you just aiming outrageously high so you can offer to cut back and look good? 2. I would be less opposed and perhaps cross over to supportive if you got the MBTA to run the 38 bus or some other bus by the Faulkner on a regular schedule (say every 12 or even 15 minutes) rather than the haphazard schedule that bus currently has. That would allow some of us Moss Hill folks to get out of our cars to reduce congestion and pollution. That bus is so unreliable I got a car. At the least try for a better schedule around your shift changes. 3. I support adding electric car charging stations but ask that you place at least some in an area where parking for 1/2 hour is free so that neighbors could sometimes use them. Then you would be helping the neighborhood. I wish you gave us more options than Oppose/Support/Neutral. I’m open to the expansion and just think the parking is very out of whack. Thank you for the opportunity to comment.</td>
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<td>8/30/2019</td>
<td>Lois TOW</td>
<td>Neutral</td>
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<td>I live two blocks from the Faulkner Hospital. My husband and I see primary care physicians who are based at Faulkner plus we see specialists there. Generally, I support the plan, but I have some concerns about traffic on Allendale St. The short distance between the traffic light at Allendale St and Faulkner driveway currently makes driving difficult in that area. It’s a source of confusion, especially with no traffic light managing the flow of traffic in/out of Faulkner. Under the proposal, Faulkner plans to add a new driveway straight into the new garage. With two driveways into Faulkner, I expect Allendale St traffic will get worse. I’d like to see a single entry into the property - perhaps between the two driveways in the current proposal - and want the flow through that intersection to be managed by a traffic light.</td>
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<td>9/5/2019</td>
<td>Dorothy Farrell</td>
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<td>Oppose</td>
<td>I have lived in JP since 1987. Faulkner is an urban hospital and has been for many many years. This needs much more planning as the increase in traffic, the way the current proposal reads will be dangerous and just plain awful. In addition, to have the exit/entrance to the proposed new garage across from Springhouse is very poor thinking. Elderly residents and visitors are using that area, let's not make it any more difficult for them. Another proposal of townhouses is also in the works over there as well. Why so many new parking spaces for a few more beds? Partners should partner up with the MBTA for more frequent buses and add weekends. TRAFFIC STUDY please (unbiased)</td>
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<tr>
<td>9/12/2019</td>
<td>Virginia Marcotte</td>
<td>Jamaica Hills Association</td>
<td>Support</td>
<td>Hello, I have attended two of Faulkner's presentations and have been impressed with their commitment to making their expansion work for the neighborhood. I understand the need to up-grade the facilities, but haven't heard why more beds are needed. Also, I wondered if some traffic could be syphoned off of the campus by having some vehicles use the Whitcomb Road gate. I do understand drawbacks to that idea, and my suggesting it at the JHA meeting last night got very negative reactions from the neighbors, but wondered if it should be looked at. For instance could the shuttles leave that way, rather than turning around and leaving via Allendale? Sincerely, Virginia Marcotte</td>
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<td>9/12/2019</td>
<td>Caterina Toste</td>
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<td>Neutral</td>
<td>In theory, I have no issue with the Faulkner proposal. However, Centre Street inbound between VFW Parkway and Allandale Road cannot handle additional traffic without major change. I believe before any expansion occur that the City work with DCR to have the intersection of Walter Street and Centre Street be reconfigured BEFORE Faulkner is allowed to make changes that will bring additional traffic to the area... DCR had previously planned to change the intersection to provide better safety for pedestrians and to provide better flow of inbound traffic.</td>
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<td>9/12/2019</td>
<td>Michael Fitzgerald</td>
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<td>Oppose</td>
<td>I have lived on Hewlett Street, about a half mile up Centre Street from the Faulkner since 1986. Since that time, I have seen Centre Street between the Faulkner and the VFW parkway become nearly impassible during morning rush hour, due mainly to the intersection of Centre and Walter Streets and the ever-growing amount of traffic coming up Walter Street, bearing right to merge onto Centre and cut across to take the left at Allendale Road at the Faulkner, almost always completely blocking Centre Street in the process. Absolutely NO further expansion of the Faulkner, Hewbrew Senior Life or any of the other properties along Centre Street from the Faulkner out to the VFW parkway should be allowed unless/until a comprehensive traffic and transportation plan be an absolute requirement of any expansion, including a complete redesign and build-out of a new intersection at Center and Walter Street that has full traffic signals and turns the intersection into a hard T configuration, eliminating the wide opening of Walter Street (which puts pedestrians a high risk) and the on-ramp design that allows traffic to pour out onto Centre street unabated.</td>
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<td>9/12/2019</td>
<td>Linda Burnett</td>
<td>Longfellow Area Nbh Assc</td>
<td>Neutral</td>
<td>The intersection at Walter and Centre is a frightening place, already overwhelmed with vehicular traffic and totally unsafe for pedestrians, cyclists AND motorists. I've been living and working in the immediate area for 25 years and dread going through this intersection. The traffic flow was made worse by the addition of ramps to the parking lot of the Sophia Snow House a few years ago. Please re-design and put lights and signage at this intersection before exacerbating the situation by adding more traffic.</td>
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<td>9/13/2019</td>
<td>SUSAN FORTI LANA</td>
<td></td>
<td>Neutral</td>
<td>The Walter/Centre Street intersection is a disaster. I don't even drive, but I have witnessed so many near and a few actual accidents there. It is also a a nightmare for pedestrians like me. This was supposed to be addressed when Sophia Snow House was built. The Faulkner project will certainly increase traffic in the area. Please make sure that this intersection is improved, hopefully with lights, before they can proceed. Thank you.</td>
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<td>9/13/2019</td>
<td>Mary Flaherty</td>
<td>MF</td>
<td>Oppose</td>
<td>The proposed expansion will add to traffic problems already felt by residents.</td>
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<td>9/14/2019</td>
<td>Joseph DelMat</td>
<td></td>
<td>Oppose</td>
<td>The project should not move forward unless the traffic issues are addressed. Specifically, the intersection of Walter St and Centre St, and publicly transportation. The intersection is quite dangerous, and this project will lead to more traffic, which will make it more dangerous. There have been numerous car accidents at this intersection. If the intersection is redesigned, and better public transportation was available to travel to the site, I would support it.</td>
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<td>9/14/2019</td>
<td>Rachel Young</td>
<td>LANA</td>
<td>Oppose</td>
<td>I'd like to see more done to improve traffic flow along Centre St in the vicinity of the hospital if it is to expand. There are a lot of intersections that are substandard and will be further stressed by increased development.</td>
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<td>9/14/2019</td>
<td>Kara</td>
<td>Resident</td>
<td>Oppose Dear BPDCA, Thank you for the opportunity to comment on the proposed expansion and improvements of the Faulkner Hospital. I have several points I would like you to consider before moving forward with the project as proposed. 1. No reasoning provided for 500 extra parking spots I oppose the addition of 500 extra parking spaces as proposed. While I understand that the additional proposed 78 beds will be associated with additional staff and visitors associated with the increase in patient load, it is not clear how that translates into 500 additional parking spaces. In fact, the August 2019 presentation states that the hospital had an additional 88 beds in the 1970s, which needs were met with the current infrastructure seeing that the garage was built in 1973. This would make it seem that even if the hospital did expand, the parking needs would be met with the current infrastructure. There is also a lack of evidence that the current parking lots have ever been filled to capacity and if they have, how often. There has been no mention of people not using the hospital because they can't find parking or vehicles parking in illegal spots on the campus. In fact, the traffic increasing from those beds will more likely be from shared ride services, who are simply dropping off passengers. Occasional if I need a shared ride service, there is always one nearby as they are typically dropping off a passenger at the Faulkner and this will only increase with additional beds. 2. Lack of connection to existing public transportation? which is already provided to employees I am glad that the Faulkner provides a shuttle from the MBTA Forest Hills and the Highland stop to the hospital for its staff, however this is a great opportunity to expand that service to patients. While it is not mentioned in the presentation, I gather that the majority of patients visiting the Faulkner live in the Boston area and have access to some form of public transportation. Expanding the service would cut down on pollution and could be implemented immediately. I often see the shuttle and it is certainly never full with people. If the patients were allowed to use it, it would be a win for the patients as they wouldn't need to pay for parking and it would decrease the amount of traffic and parking spots associated with vehicular traffic. As I mentioned above, many patients already use shared ride services, from their original destination as well as from public transportation lines and allowing them access to the shuttle would reduce current traffic. The current MBTA bus does not run frequently enough to provide a meaningful option to connect Forest Hills to the Faulkner campus. 3. Solar and Electric Vehicle Charging Stations. I support the addition of solar proposed on the Faulkner campus as well as electric vehicle charging stations. Ideally the charging stations installed should be fast charging stations and the solar could also be used to provide electricity to the charging stations. 4. New driveway unnecessary. I do not support the addition of a second driveway for the campus. While I have driven by the hospital day and night, I have never seen more than a few cars lined up waiting to exist the campus. I do not see the need for this even with the proposed unwaranted 500 spaces. As it is a hospital, cars come and go throughout the day, so there is a constant ebb and flow of traffic. It is unclear how much time a vehicle would save if there is an additional driveway, especially since it would just continue onto Allandale and past the existing driveway. It would be the same traffic flow. 5. Existing garage demolition is unwarranted I am opposed to the design of a new parking garage on the surface lot and a surface lot where there is currently a parking garage. The hospital has spent the past year or so working on the existing parking garage for it only to be torn down and replaced by a surface lot makes no sense. If anything, a smaller garage could be placed on the existing surface lot while maintaining the existing garage. Swapping one for the other is a waste of resources and more hassle than necessary. There is no mention that the existing garage is unsafe or is in need of repair. Considering that this part of the campus is the closest to local residents, this seems an unnecessary burden and a waste of resources. 6. Construction timing I urge no construction be allowed to take place during the weekend. Thank you for taking the time to read and consider my comments.</td>
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<td>9/14/2019</td>
<td>Jonathan</td>
<td>Homeowner</td>
<td>Oppose Thank you for the opportunity to comment. As a homeowner in the neighborhood that immediately abuts the Faulkner Hospital, I have several concerns with the proposed project, particularly as concerns the parking area. I have no quarrel with the desire to add 78 patient beds, but adding 500 new parking is unjustified. It seems to be based on outdated assumptions favoring single passenger driving and ignores alternatives. First, in an era of worsening traffic, the project makes no realistic proposal to mitigate traffic. Two measures are proposed: 1) charging stations for electric cars, and 2) a bike station. As to the first, while laudable, this would do nothing to ameliorate traffic in the area. As to blue bikes, it is unrealistic to expect that a meaningful number of patients or employees to bike to a hospital located on a hill, particularly during the cold seasons. Instead, rather than add 500 new spaces, the Hospital should take a serious look at whether that number could be reduced by adding shutter services to/from the Forest Hills MBTA station. Because of the price of parking and traffic, a significant number of patients/visitors would like to take public transportation if it was offered and advertised. Indeed, the improvements being made to the Orange Line would make taking the T more attractive in the future. Given the lack of a serious public transportation option, the project ignores Mayor Walsh's goals as set forth in the City's Boston in 2030 plan (<a href="https://www.boston.gov/sites/default/files/document-file-03-2017/go_boston_2030_-_4_goals_and_targets_spreads.pdf">https://www.boston.gov/sites/default/files/document-file-03-2017/go_boston_2030_-_4_goals_and_targets_spreads.pdf</a>), in which the City set forth a goal to reduce by half drive-alone car traffic and increase public transportation by up to a third. This project does the opposite -- it aims to add to cars on the street. Unfortunately, this part of the City already suffers from traffic congestion. Traffic regularly backs up on Centre Street outbound from Boston between 2pm and 6:30pm. Inbound traffic already backs up during morning rush hour from West Roxbury and Roslindale heading into Boston. Adding 500 spaces will only make this worse. There is also no certification provided to us that the Hospital needs to tear down the current garage. This construction would be extremely disruptive to the neighborhood as it is the closest to where people live. Most renovations to the existing West Garage and surface lot (coupled with additions to East Lot, if necessary) I would seamlessly provide the Hospital with what it realistically needs. I also don't support the addition of a 2nd driveway. I have lived in this neighborhood for 19.5 years, and have rarely seen a backup leaving or entering the Hospital. I doubt adding 78 beds will change this dynamic. Because the Hospital is embedded in a residential neighborhood, if the project moves forward, I urge that any construction adhere to the City's requirement that construction only take place between 7am and 6pm, Mon-Fri, and that a variance will not be sought for permission to do weekend work.</td>
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<td>9/19/2019</td>
<td>Wayne</td>
<td>Resident</td>
<td>Neutral Traffic on Centre Street is currently a real problem, especially the very dangerous intersection with Walter Street very close to the Faulkner. This proposed large number of additional parking spaces will significantly increase driving and traffic, which will further compromise Centre Street and nearby intersections during rush hour. Also, the infrequency of bus service along this corridor is a disincentive to use for staff and visitors going to the Faulkner and the other expanding institutions along Centre Street. I understand much of Centre Street is a State road, but improvements to traffic flow and safety and to increased public transportation options and access should be a mandatory part of any final City approval of this proposal and should be implemented before or during this project, especially in light of the City's stated climate change and mitigation goals. The nearby neighborhoods have been advocating for more than a decade for safety and traffic flow improvements to Centre Street as the adjacent institutions continue to grow. Please use this large and high-profile project as the leverage the City needs to finally address this long-standing problem.</td>
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<td>9/18/2019</td>
<td>George and Suzanne</td>
<td>Marsh</td>
<td>Friends of Allandale</td>
<td>Neutral</td>
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<tr>
<td>9/20/2019</td>
<td>Robert</td>
<td>Orthman</td>
<td>Neutral</td>
<td>I am very concerned about the substantial net increase in parking being proposed for the Faulkner Hospital under this proposal. Adding hundreds more vehicle trips to Centre Street and surrounding roads will have a substantial impact on congestion and emissions in this area. It is very unclear to me how this can possibly be consistent with the City's green goals for emissions and climate change. I have reviewed the transportation plans in this proposal and find them lacking in terms of creating ways for staff, visitors, and patients to get to the Faulkner by means other than personal vehicles when otherwise able to. There are a number of things that can be done here. The Faulkner can more aggressively push employees to not drive to the hospital or park off site and take shuttles, as they already do with some staff. They could create financial incentives for employees to do this. They can provide free or substantially discounted T passes. The city can push the state to really look at that section of Centre Street between VFW Parkway and the Jamaica Way and put protected bike lanes on the roadway - all that is needed are flex posts since parking is already prohibited on the shoulders. That should be low-hanging fruit. I would note the bike lane briefly dies at the intersection with Allandale St and that needs to be remedied as it creates a dangerous situation for cyclists. Those bicycle improvements would make it more more amenable to people who want to bike to the hospital. The Faulkner could sponsor a Blue Bikes station on site which would be perfect for people to grab a Blue Bike at Forest Hills and head to the Faulkner. I cannot emphasize enough that if this many more vehicle trips are going to be added daily, the intersection of Centre Street and Walter Street must also be substantially overhauled. DCR looked at this a few years ago and found a high number of crashes at this intersection. It is dangerous and damaging to traffic flow. I am not qualified to say whether this addition of hospital beds is needed or not, but hopefully someone at the BPDA can analyze that. But the transportation impacts of this will be substantial and do not seem to get the significant attention they deserve here. I would ask the BPDA to not move forward with approval on this proposal until a much more detailed plan is in place to eliminate or at least mitigate these extra vehicle trips. The hospital is an important local employer and asset for people needing medical care, no question. But this plan deserves significant scrutiny on the transportation end of things. Thank you for your consideration.</td>
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<td>9/20/2019</td>
<td>Adam</td>
<td>Rogoff</td>
<td>Neutral</td>
<td>Expansion of the Faulkner inpatient beds and parking should occur only with significant improvements to the Walter and Centre Street intersection. The expansion will increase the number of trips to the area significantly, and the Walter and Centre intersection remains one of the most dangerous in the city, with routine accidents and absolutely no safe corridors for pedestrians and cyclists. It is only a matter of time before a fatality or major injury befalls someone at that intersection and the risk only increases with the Faulkner’s expansion. The Faulkner and the City must work with the state (DCR) to improve that intersection immediately. Also, as a part of the expansion, The Faulkner ought to increase the frequency of bus trips to Forest Hills and set up incentives for employees and patients to arrive by alternative transportation.</td>
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PUBLIC NOTICE

The Boston Planning & Development Agency (BPDA), acting pursuant to Article 80 of the Boston Zoning Code, hereby gives notice that a Draft Project Impact Report (DPIR) for Large Project Review has been received from ________________________________

(Name of Applicant)

for __________________________________________________________________

(Brief Description of Project)

proposed at __________________________________________.

(Location of Project)

The DPIR may be reviewed or obtained at the Office of the Secretary of the BPDA Boston City Hall, Room 910, between 9:00 A.M. and 5:00 P.M., Monday through Friday, except legal holidays. Public comments on the DPIR, including the comments of public agencies, should be transmitted to Edward Carmody, Project Assistant, Boston Planning & Development Agency, Boston City Hall, Boston, MA 02201, within sixty (60) days of this notice. Approvals are requested of the BPDA pursuant to Article 80 for ________________________________.

The BPDA in the Preliminary Adequacy Determination regarding the DPIR may waive further review requirements pursuant to Section 80B-5.4(c)(iv), if after reviewing public comments, the BPDA finds that the ________________________________ adequately describes the Proposed Project's impacts.

BOSTON REDEVELOPMENT AUTHORITY
Teresa Polhemus, Executive Director/Secretary