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MEMORANDUM

TO: Mayor and Boise City Council

FROM: Hal Simmons, Planning Director
Boise City Planning and Development Services

DATE: April 7 and 14, 2015

RE: CPA14-00004 /St. Luke's Health System/Master Plan

The following application is scheduled for public hearing on April 7 and April 14, 2015. City staff, applicant and neighborhood association presentations only will be heard on the 7th and all general public testimony followed by City Council deliberation will occur on the 14th.

CPA14-00004: St. Luke's Health system is requesting adoption of an updated Master Plan for their Boise facility. The Master Plan is proposed to be adopted by reference in the Comprehensive Plan; therefore, the application is for a Comprehensive Plan text amendment.

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Attachment 2 - [Written Public Correspondence](#) Received Since February 10, 2015
Attachment 3 - [PDS Presentation Materials from Council Update](#) on Fort Boise and St. Luke's Master Plan dated November 4, 2014

Staff Analysis Update

P&Z Action Summary

The Planning and Zoning Commission held a public hearing on CPA14-00004 of February 9, 2015. At that time, the Commission recommended denial of the master plan and amendment to the City Council. Their reasons for denial were that the proposed plan, including the vacation of Jefferson Street, placed an undue burden on the transportation system, particularly for bicycles and pedestrians. They found that the plan did not demonstrate consistency with Comprehensive Plan policies for street connectivity, protection of the downtown grid and provision of bicycle and pedestrian facilities, and that the proposed mitigation measures in the plan were insufficient to offset negative impacts. They also stated that the alternatives analysis did not sufficiently prove that there were no feasible options for hospital expansion that would preclude development over Jefferson Street.

Public testimony at the hearing was overwhelmingly against the master plan proposal and in favor of keeping Jefferson Street open. The PDS staff recommendation was in support of St. Luke's general expansion concepts in consistency with broad Comprehensive Plan goals to support health care facility planning and improvements in the city. However, PDS also found serious shortcomings related to compliance with goals regarding protection and enhancement of street connectivity. In order to find consistency with connectivity policies, PDS had three primary recommendations:

1. St. Luke's proposed cycle track on the west side of Avenue B south of Jefferson should be extended from Jefferson Street to the north onto State Street and should be connected to Idaho and Main Streets to the south via new pathways on Avenue A.
2. The previously closed segment of Bannock Street should be redesigned and reconstructed to serve an east-west transportation function. This could be done as an improved bike path, or even as a multi-modal/pedestrian-friendly lane similar to 8th Street in downtown. This was also an approach that the City Council had clearly articulated at a previous Council work session on the application.
3. St. Luke's should enter into a three party agreement with the City of Boise and ACHD to expedite improvements of the larger road network around the St. Luke's facility, including roundabout designs and road extensions into the Fort Boise area.

The Commission chose not to add such conditions to approval of the plan and instead has recommended denial to the City Council.

St. Luke's Supplemental Information/Project Modifications

St. Luke's has prepared supplemental information for the City Council hearing that responds to a number of concerns raised at the P&Z Commission hearing and that also proposes some

modifications to the bicycle and pedestrian improvements in their master plan. The supplemental information is contained in two documents attached to this Council memo: A Supplemental Narrative and a set of Appendices. The supplemental narrative focuses on their own legal review of how their master plan was prepared and how it complies with the various applicable goals and policies of the Boise Comprehensive Plan. It also contains a Frequently Asked Questions section that addresses comments and concerns that were aired at the previous hearing.

Attached to the supplemental narrative are five appendices; A through E. Appendix A provides a table of all the public meetings and presentations that St. Luke's has conducted or participated in during plan preparation. Appendix B provides a more detailed explanation of the alternative expansion analysis that was done prior to submittal of the master plan, as suggested by the P&Z Commission at their hearing. Appendix C contains the results of a Bannock Street Design Workshop that St. Luke's held on March 6, 2015 in response to the City's recommendations to the P&Z commission. This includes modifications to the cycle track concept as well. Appendix D contains a set of renderings depicting best practices for how the proposed new bike facilities, street sections and intersections could be designed to accommodate bicycles, pedestrians, transit and cars. Appendix E is the latest annual report from St. Luke's to Ada County describing their 2014 efforts related to maintenance of their non-profit status.

The remainder of this Council memo will focus on briefly describing the Bannock Street and cycle track modifications that St. Luke's has proposed in their supplemental documents and will conclude with a recommendation.

Roadway/Bicycle Improvements

The St. Luke's team retained the services of an outside architect and scheduled a design workshop at the hospital to explore options for improving the transportation function of Bannock Street through the hospital facility. They invited PDS and ACHD staff, selected East End neighbors, several bicycle advocates and some hospital staff. The design workshop was held on the morning of Friday, March 6, 2015. The architect led the discussion, with background information provided by St. Luke's and CH2M staff as well as a brief walking tour of Bannock Street. There were approximately 20 participants at the workshop.

While the intent of the workshop was to improve bicycle connectivity through St. Luke's on Bannock Street, the general consensus of the bicycle advocates and affected neighbors was that Bannock Street was too congested with hospital-related pedestrians for it to be redesigned to expedite bicycle transportation. At the end of the workshop, their advice to St. Luke's and the architect was to not modify the closed street for bicycle travel, but to instead focus on expanding the cycle track on Avenue B to better convey bicycle traffic around the facility to State Street and Idaho/Main Streets. While in the past these groups have suggested that State, Idaho and Main Streets are too busy and congested to serve as acceptable bicycle routes, they stated now that if buffered bike lanes can be provided, these routes would be preferable to

Bannock Street. There also seemed to be less resistance to the idea of going out of direction on the cycle track for a block or two before diverting back to Jefferson or Bannock Street on either side of the hospital closure.

St. Luke's staff maintained that Bannock Street is not congested with pedestrians on weekend days and that it could still be redesigned to provide a better transportation function on those days, if not during weekdays. Some of their hospital employees who commute to work on bikes also continued to feel that Bannock could be redesigned to better meet their daily needs in getting to and through the campus on their bikes. They also felt that bicycle parking locations could be improved for convenience and security.

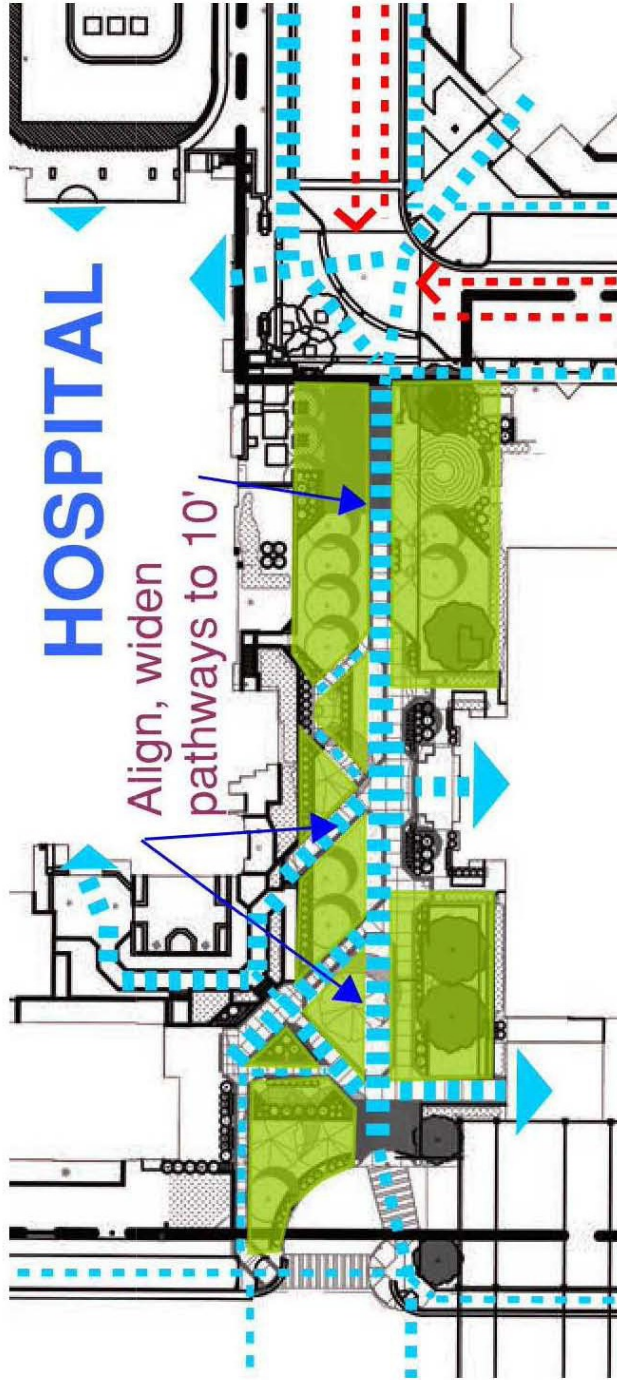
Despite the conflicting information heard at the design workshop, the St. Luke's team has developed a design recommendation for Bannock that will modestly increase bicycle access through the corridor. They have also developed a proposed cycle track expansion plan as suggested by the participants. This report will briefly describe each of those proposals.

Bannock Street Redesign

Figure 1 in this report depicts St. Luke's preferred Bannock Street alternative; Site Concept 3. This design proposes a 10-foot wide bicycle and pedestrian pathway through Bannock Street between Avenue A and 1st Street in place of the narrower pathway that exists in the corridor today. This design also includes a separated bike path on the south side of Bannock between Avenue A and Avenue B, leading to a pedestrian activated signal on Avenue B. Bicyclists continuing through the hospital facility on Bannock will need to travel very slowly and be prepared to yield to pedestrians at designated crossings and points of conflict. The St. Luke's plan does not include any reprogramming of uses to minimize pedestrian conflicts on the corridor. St. Luke's has agreed to provide a formal public easement for assured access through this area. Vehicles will not be accommodated through the corridor.

Cycle Track Expansion

Figure 2 depicts St. Luke's proposed expanded cycle track facility. Based on neighborhood comments, they have designed a two-way detached cycle track that extends around the entire perimeter of the facility on Avenue B, State Street, 2nd Street and Idaho Street. The intent is that this expanded cycle track will give cyclists off-street routes around the campus from which they can access any streets or pathways that exist in the surrounding network. The expectation is that east-west cyclists will be able to use the cycle track to divert to and from the quieter segments of Jefferson and Bannock Streets on either side of the campus if they are uncomfortable using State, Idaho or Main Streets. It will be important to provide a carefully designed network of intersection markings, pedestrian activated signals and clear connections to and from the cycle track to the surrounding roadway network. Some of these concepts are illustrated in Appendix C of the St. Luke's Supplemental Narrative dated March 30, 2015.

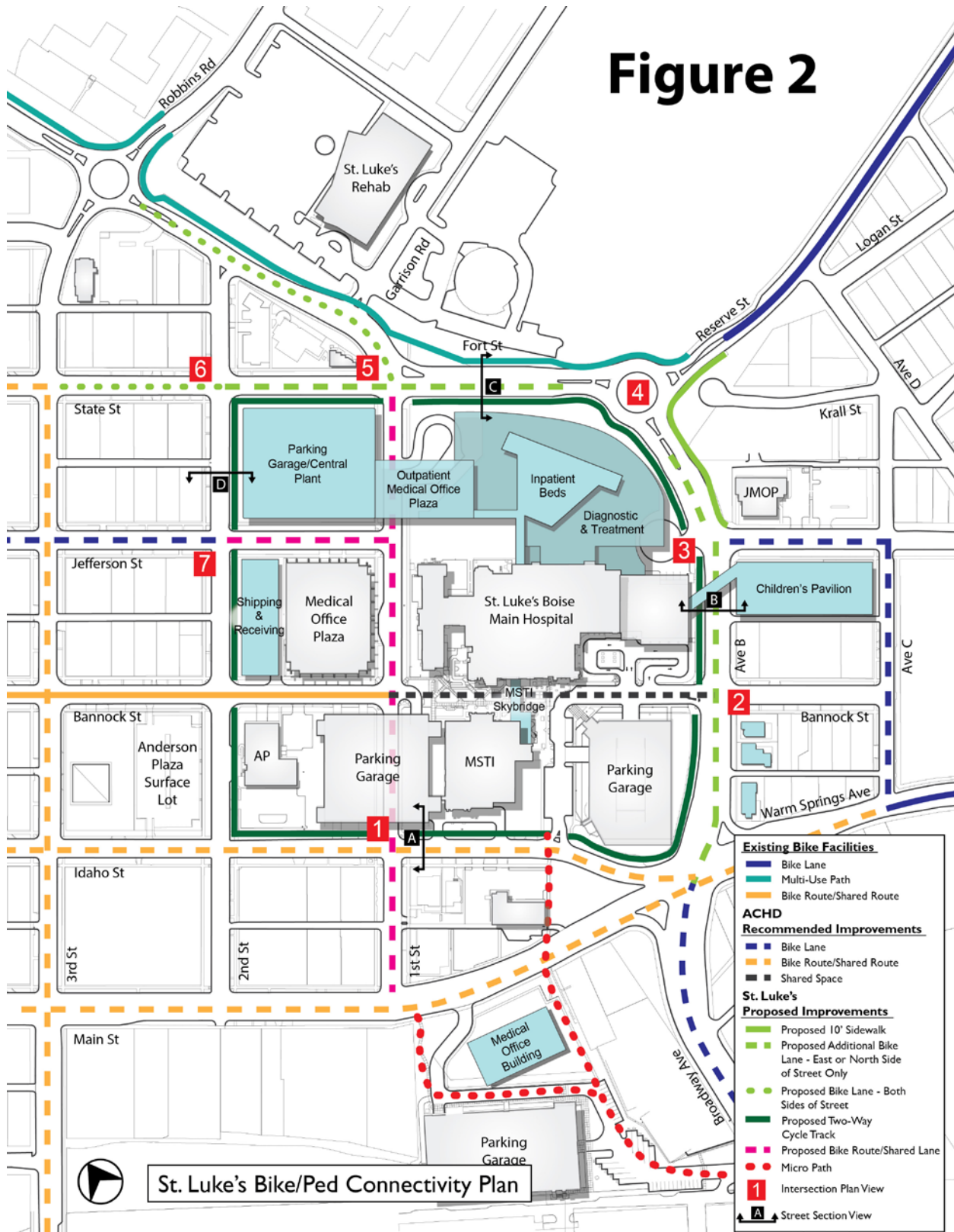


Site Concept 3

- Reconfigure the ped path in Bannock Green Space for simplified cross-routing between destinations, improved path width.
- Do not provide a separate bike facility in the Bannock Green Space or Bannock entry Drive.
- Allow casual/non-commuter use by bicyclists.

Figure 1

Figure 2



Recommendation

PDS staff would have preferred to see a more complete transportation function restored to Bannock Street than has been proposed. The scope of the proposed hospital expansion seems to provide opportunity to rethink more dramatically how the Bannock Street area is used and to reprogram conflicting uses into other areas of the larger facility. However, the new design of Bannock does improve connectivity for cyclists through the facility and the proposed expansion of the cycle track will clearly improve safe access around the hospital. These improvements have not done anything to address automobile access around or through the hospital facility. But the previously proposed intersection and lane improvements around the hospital were found by the Traffic Impact Study to mitigate the vehicular traffic issue.

While PDS supports the cycle track proposal, we believe that it must occur in conjunction with creation of buffered bike lanes running the length of Idaho and Main Street between Avenue B and downtown. Prior testimony has indicated that due to traffic volumes and speeds, those streets are currently not considered comfortable by many bicycle riders. The Downtown Boise Implementation Plan still assumes that Jefferson is the main east-west bike corridor in the downtown. A shift to Main and Idaho will require a renewed effort to gain public acceptance and ACHD approval of a buffered bike lane design on the two streets.

St. Luke's is already committed to participating with the City and ACHD in a three party agreement for expedited development of nearby roadway improvements. PDS believes that the agreement should be expanded to describe St. Luke's role in advocating and participating in funding for design and construction of buffered bike lanes on Main and Idaho. Along with the other roadway improvements in the agreement, an acceptable bike lane strategy should be implemented and in effect before Jefferson Street is physically closed to through traffic.

In regard to the proposed three-party agreement, PDS believes that this must occur in order to find that the overall master plan is consistent with the various transportation and connectivity policies of the Comprehensive Plan. The Council was briefed on this potential agreement in November of 2014 (see attachment 3 to this report) and except for the addition of buffered bike lanes to the improvement list, the concept has not changed.

Boise PDS recommends approval of CPA14-00004 with the cycle track and Bannock Street modifications as described in this report and with the condition that construction of buffered bike lanes on Idaho and Main Streets be added to the items to be covered in the proposed development agreement between St. Luke's, ACHD and the City of Boise. Physical closure of Jefferson Street shall not occur until all improvements covered in the agreement are in place or in progress as per the timing to be stipulated in the agreement.

Findings for Approval

The Comprehensive Plan (Blueprint Boise) is amended by the adoption of the St. Luke's Master Plan by reference as requested by St. Luke's and with the modifications recommended and approved by the City of Boise and based on findings of consistency with the following criteria:

a) The amendment is required for the public convenience or necessity, or for the general welfare of the community.

***Finding:** St. Luke's has completed the work proposed in their existing master plan, have identified expansion needs related to projected population growth and medical trends, and have proposed a new master plan to guide future growth as needed to provide for the health needs and welfare of the community and in consideration of infrastructure needs and other mitigation to minimize impact on the community.*

b) The amendment is necessary to address changes in conditions within the community that have occurred since the Boise Comprehensive Plan was adopted or is necessary to correct one or more goal, objective or policy that exist in the plan.

***Finding:** The medical needs of the community are changing as the community continues to grow and the transportation system around the St. Luke's facility has continued to deteriorate as the result of community-wide development. The new master plan addresses the changes that have occurred in the community and also proposes appropriate mitigation for existing and projected transportation deficiencies in the larger area.*

c) The amendment is in compliance with and will further the goals, objectives and policies of the Boise City Comprehensive Plan.

***Finding:** The City's analysis of the St. Luke's Master Plan has determined that, with specific changes related to connectivity (Bannock Street improvements and cycle track expansion) as proposed in the Supplemental Narrative provided by St. Luke's dated March 30, 2015, the elements of the plan are consistent with and will further the goals, objectives and policies of the Boise Comprehensive Plan. The changes to the plan proposed in the supplement will adequately mitigate for loss of street connectivity on Jefferson Street by providing alternative connectivity enhancements on Bannock Street, an expanded cycle track around all sides of the facility, and through a cooperative agreement with St. Luke's and ACHD will create transportation, cyclist and pedestrian improvements in the area that go beyond what St. Luke's would normally be required to provide both in terms of accelerated schedule and actual scope.*

d) The amendment will not create inconsistencies between the goals, objects and policies within or between any chapter of the Boise City Comprehensive Plan.

***Finding:** The various elements of the St. Luke's Master Plan have been carefully reviewed for consistency with all chapters and subsections of the Boise City Comprehensive Plan and no*

conflicts have been identified, provided that the City-recommended additions to connectivity are addressed in the plan.

e) The amendment will not place an undue burden on transportation or other public facilities in the planning area, and does not adversely impact the delivery of services by any political subdivision providing services.

Finding: *The St. Luke's Master Plan is accompanied by a Transportation Impact Study that has carefully assessed impacts and proposed mitigation that goes beyond the minimum required ACHD staff has reviewed and accepted the Traffic Impact Study. No political subdivision has indicated adverse impact from any aspect of the plan.*

Applicable Goals and Policies from Blueprint Boise

Blueprint Boise is the City's adopted Comprehensive Plan. The following are goals and policies from the plan that are considered relevant to the review of the St. Luke's Master Plan and the required findings of consistency.

Chapter 2 – Citywide Vision and Policies

Principle #1 – Environmental Stewardship

ES9.5: Reuse of Buildings - Promote the adaptive reuse of historic buildings rather than demolition to promote energy conservation, conservation of imbedded energy and the reuse of building materials.

Principle #3 - A Community of Stable Neighborhoods and Vibrant Mixed Use Activity Centers

Goal NAC14: Protect, enhance, and preserve Boise's designated historic landmarks and districts.

NAC14.3: Protective Measures - Recommend, as appropriate, actions such as acquisition of historic easements or facade easements; historic preservation and rehabilitation through tax incentives; and, in emergency situations, lease or purchase of threatened or deteriorated property having significant historic or aesthetic merit.

NAC14.4: Privately Sponsored Programs - Encourage privately sponsored programs for historic preservation and rehabilitation when consistent with the public interest and to fulfill the purpose of the Historic Preservation Plan.

Principle # 4: A Connected Community

Goal CC2: Create an interconnected network of complete streets that serve all modes of transportation.

CC2.1: Connectivity

(a) Develop a street network that interconnects and distributes vehicle, bicycle, and pedestrian traffic to multiple streets.

(c) Explore opportunities to improve connectivity in existing neighborhoods without widening existing streets.

(b) Consider all travel modes in the design of streets. While vehicular traffic flow should be carefully considered, reasonable reduction in vehicular traffic capacities and level of service should be allowed at intersections and crossings with high pedestrian and bicycle activity to safely accommodate their crossing.

CC3.1: Network Development

(a) Work with ACHD and VRT to preserve right-of-way necessary for future public transit when planning or upgrading corridors.

(b) Promote development patterns with high- intensity activity centers or nodes consistent with the regional long-range transportation plan, Communities in Motion, and the Blueprint for Good Growth.

CC3.2: Transit Facilities

(a) Identify appropriate sites for future transit development or expansion.

(b) Integrate transit stops and stations into new and redeveloped sites and/or improve access to existing transit facilities.

(c) Prioritize improvements of pedestrian and bicycle facilities in areas served by transit.

(d) Follow best practices for pedestrian safety at intersection and crossing locations near transit stops.

Goal CC7: Enhance pedestrian connectivity and comfort.

CC7.1: Pedestrian System

(a) Connect destinations with pedestrian facilities and encourage walking for a wide variety of trips by adding sidewalk connections, restoring damaged sidewalks, and requiring sidewalks as part of development approvals.

CC7.2: Design for Pedestrian Comfort

(b) Minimize pedestrian conflict with vehicles by providing buffers between the sidewalk and automobile traffic and by combining adjacent property driveways to limit curb-cuts.

(c) To protect the most vulnerable street users, maximize pedestrian safety and comfort in the design of pedestrian crossings

(d) Design pedestrian pathways to be well-lit, secure, and with convenient connections between destinations. Avoid meandering pathways except where necessary to protect trees or avoid obstructions.

Principle #6 - A Strong Diverse Economy

EC3.4: Foster Expansion of Existing Medical Clusters - Work with existing medical facilities to ensure that their future space needs can be accommodated within adjacent established neighborhoods.

Goal SHCC15: Locate medical, mental health, and social services to maximize access to Boise residents.

SHCC14.1: Coordination of Resources - Coordinate with existing health care and social service providers and other cities and counties in the region to fully optimize available resources and efforts and to identify and fill potential gaps in service.

SHCC14.2: Transit Access - Work with VRT to ensure health care and social service facilities are accessible to residents, especially to the elderly and disabled.

SHCC14.3: Facility Siting and Expansion - Work with health care and social service providers on upgrades to and expansion of existing facilities as well as the siting of new facilities through the implementation of the St. Luke's and St. Alphonsus master plans.

Chapter 4 – Planning Area Policies

DT Downtown Policies

DT-CCN Centers, Corridors, and Neighborhoods

DT-CCN 1.1: Downtown Area Plans

- (a) Use adopted master plans and development guidelines for Downtown to guide development.
- (b) Update these plans and consolidate them into one document.

DT-CCN 1.2: Mix of Uses -Develop a vibrant mix of uses in Downtown which encourage

- (a) 24-hour activity,
- (b) Office; retail and service businesses;
- (c) Residential; hotel, convention and medical facilities; and
- (d) Civic, cultural, educational and entertainment uses.

DT-CCN 1.6: Relationship to Nearby Neighborhoods

- (b) Recognize that the neighborhoods surrounding Downtown contribute to the workforce and customer base for Downtown businesses and provide a reservoir of housing for Downtown workers. Maintain close ties between Downtown and these neighborhoods through walking and bicycling routes, transit, range of available shopping, services, dining, culture and entertainment, and through community events.
- (c) Keep residents in these neighborhoods informed about Downtown issues, plans, regulations and development projects, and invite the neighborhood associations to participate in reviewing and commenting on these items.

DT-C Connectivity

DT-C 1.5: Bicycle Network

- (a) Create a network of designated bicycle lanes and routes in Downtown, and expand bicycle facilities and amenities to encourage the use of bicycles for transportation and recreation.
- (b) Implement the improvements to the bicycle network identified in the Downtown Boise Mobility Study – Implementation Program as resources allow.
- (d) Work with developers to add bicycle lanes and route markings along development frontages if they are on the bicycle network.

DT-C 1.6: Pedestrian Network

(a) Create a network of safe, attractive pedestrian routes in Downtown to encourage walking as a transportation mode and as an enjoyable part of the Downtown experience.

(d) Promote installation and evaluation of enhanced pedestrian countdown signals, crosswalk markings, leading pedestrian intervals, expanded audible pedestrian signal program, installing new accessible pedestrian pushbuttons, increasing pedestrian walking times to cross signalized intersections, and implementing and evaluating pedestrian scramble phases which enable pedestrians to cross at a signalized intersection in all directions at the same time while drivers are stopped.

Goal DT-C 2: Continue to develop a framework of streets, paths and open spaces that builds upon existing networks and strengthen connections to the Boise River and Downtown subdistricts.

DT-C 2.1: Block Pattern

(a) Retain a high level of connectivity in Downtown by maintaining the traditional street grid and block pattern (260 feet by 300 feet).

(b) Where superblocks exist, work with property owners and developers when redevelopment is proposed to re-establish the street grid and create blocks that approximate the traditional block size. If it is not feasible to re-establish streets, obtain public pedestrian ways protected by easements in place of the street grid so development areas approximate the traditional block size.

(c) Avoid development of mega-structures on superblocks that create either real or perceived barriers to connectivity.

DT-C 2.2: Completion of Street Grid - Where gaps exist in the street grid, work with property owners and developers to establish missing street segments when property is proposed for development or redevelopment consistent with the Downtown Boise Mobility Study.

DT-C 2.6: Connections to Major Activity Centers - Enhance connections between the Downtown core and the St. Luke's Regional Medical Center and BSU campus.

North End/East End Policies

NE-CCN Centers, Corridors, and Neighborhoods

NE-CCN 2.2: St. Luke's Regional Medical Center

(a) Develop the St. Luke's Regional Medical Center area in accordance with the St. Luke's Campus Master Plan.

(b) Require an amendment to the Land Use Map for expansion outside of the designated Public/Institutional use area, In order for the city and St. Luke's to mitigate the impact on adjoining neighborhoods.

NE-CCN 2.3: Medical Office/Support Services - Permit private medical offices and support services between Avenues B and C and East Jefferson that are comparable to the bulk and scale of existing structures. Limit scale and bulk of new structures north of East Jefferson to scale and bulk comparable to the adjacent, existing residential neighborhood.

NE-CCN 3.0: Fort Boise Area - Create an area plan, including the Armory site and other public property on the west and north side of Fort Boise Community Center, from Reserve Street to 4th Street on the north side of Fort Street which will identify opportunities for mixed-use development of neighborhood commercial, office and residential uses, workforce housing and public open space.

NE-C Connectivity

Goal NE-C2: Ensure future roadway improvements enhance rather than detract from the North/East End's character.

NE-C 2.1: Street Design - Ensure street improvements and the construction of new roadways occurs in compliance with citywide street policies contained in Chapter 2 of this Comprehensive Plan.