

To the Seattle City Council:

2015 SEP 24 PM 2: 53

I am writing to appeal the recommendation of Examiner Tanner in regards to the Swedish Cherry Hill MIMP approval. As a former CAC member and an urban planning professional, I strongly oppose this plan as failing to adequately balance the needs of the community against the needs of the institution. The proposed development is unprecedented in Seattle for the of type neighborhood where Swedish Cherry Hill is sited and would have a detrimental impact on community.

The Swedish MIMP is an attempt by Swedish Medical Center and its private development partner to extend the high-intensity development of First Hill into a residential area. In every other situation where a master plan has been located next to a residential area, much stricter demands have been placed on the institution to ensure the continued livability of the neighborhood. In other recent plans, the height, bulk, and scale of the project –as well as setbacks- were scaled in a way that exhibited more concern for the surrounding neighborhood and the people who lived there. This is likely a result of differing approaches to the planning process. A review of the concepts explored by Seattle Children's show more variation and potential solutions than the dogmatic and narrow range of options presented by Swedish. In addition, the stories heard from former participants in those processes, such as being willing to think innovatively to solve problems or be responsive to members of the CAC and public, sound very foreign when compared to my experience on the Swedish CAC. During the process, Swedish was slow to update their website, did not provide documents in a timely manner to members of the public of CAC, and failed to deliver materials for review when explicitly requested by CAC members (email exchange available upon request). As of writing, the cherryhill.swedishmimp.org website has not posted any of the most recent documents related to the MIMP. This type of inaction was typical during the public process, which impacted the ability of the CAC to effectively deliberate on the plans and the ability of the public to obtain documents related to the plan.

As a student of planning theory, I do not recognize this planning process as one marked by empowered public participation or influence. The plan before you today is virtually the same as the initial plans presented. All concessions that Swedish is providing of significance are due to City mandates that Swedish is required to accept as means to obtaining approval for this plan. Their recent work in areas where they have been deficient for decades is laudable, but the only reason that it has occurred is because they are seeking this MIMP. In the future, the City of Seattle and its citizens should expect to receive a) what remains profitable for Sabey and Swedish and b) *exactly* the concessions that are required by Swedish to begin construction or inhabit a building. It is unfortunate, but Swedish has a history of failing to live up to its requirements. Insofar as the recommendation by Examiner Tanner is based on the premise that Swedish will deliver on mitigation or benefits, skepticism is warranted due to past behavior and a pattern of meeting the bare minimum of requirements put on the institution from outside regulations. Do not expect Swedish to offer improvements above what is required.

I believe that Examiner Tanner has erred in recommending that this plan be approved. The findings that she has presented contain errors. **In particular:**

- Conclusion 5: “Swedish Cherry Hill’s assessment of its need for growth is credible...”
 - This statement for needs does not take into account for-profit rental space that Sabey provides to outside companies that could be repurposed explicitly for the hospital. Nor does it demonstrate how much of that projected need is required to be located at the Cherry Hill Campus, as opposed to the better connected and large First Hill Campus or other Swedish sites. The CAC asked for an analysis of decentralization options that could mitigate the heavy impact of the proposed intensity of development, but was not provided with this analysis.
 - This statement also does not consider the economic incentive that Sabey has to overdevelop the site regardless of actual hospital demand, and the subsequent need to justify the maximum development allowed. The needs assessment provided as part of the MIMP states that 385 beds are needed. Swedish is licensed for *exactly* 385 beds. A perfect match of supply and demand is evidence in itself of a flawed analysis. In the context that one development partner would significantly benefit financially from a maximally built facility (either directly or indirectly by renting facilities to outside companies), this type of unnatural conclusion should be viewed with suspicion. This type of perfection often occurs when a problem is being fit to a predetermined answer.
 - As has been previously concluded by Examiner Tanner in the Seattle Children’s judgement, **“The Code does not dictate what [the balance should be between institutional growth and the livability of the neighborhoods it is located in]. Therefore, even if Children’s could demonstrate that it should absorb the entire statewide need for specialty pediatric care, it is not necessarily entitled to this intensity of development, in this place, at this time.”** The exact same argument applies to this Swedish Cherry Hill. Regardless of their need, they are not entitled to an intensity of development which is detrimental to the livability of the surrounding neighborhood. Please see my response to Conclusion 21 for illustration.
- Conclusion 6: “A decentralization alternative for the MIMP was not a viable option, as the type and level of care provided at Swedish Cherry Hill ... requires the co-location of an extensive system of support services”
 - It would be difficult for Examiner Tanner to conclude that a decentralization option is not a viable option when no decentralization plan is contained in the MIMP.
 - Examiner Tanner states in Finding 37 that “SMC 23.69.030.E requires that the development program component of the master plan include a “discussion of the Major Institution’s facility decentralization plans and/or options including leasing space or otherwise locating uses off-campus”.

- Examiner Tanner states in Finding 38 that “the MIMP discusses decentralization in terms of existing decentralization within the Swedish healthcare system”.
- However, the section of the MIMP contains only a description of the current Swedish Medical System, as regional multi-site system. Stating a system has decentralization elements in it is not the same as exploring decentralization options to a particular campus. It does not amount to the required discussion of the decentralization of *this* facility or a serious investigation of decentralization options for the Cherry Hill campus covered under *this* plan, as required by law.
- **As a result, the MIMP does not conform to the letter of the law, as there is no discussion of decentralization options as it applies to the Swedish Cherry Hill campus and choices made in the MIMP.**
- Swedish also does not substantiate why co-location is important for just Cherry Hill, nor how this provides the best service to patients. Consider:
 1. Swedish argues that quality of care is linked to co-location of services.
 2. Swedish argues that Sabey rented officers create this co-location and results in better served patients, and presumably better patient outcomes.
 3. Swedish argues that relocating these would be detrimental to patient outcomes and should not be done in the Cherry Hill case.
 4. Patient volume is linked to the number of patient outcomes.
 5. Locating these support services on a low-volume campus leads to a low number of high quality patient outcomes
 6. Locating these support services on a high-volume campus leads to a high number of high quality patient outcomes.
 7. Swedish Cherry Hill is a comparatively low-volume campus.
 8. Swedish First Hill is a comparatively high-volume campus.
 9. Both campuses perform life-saving and vital surgeries.
 10. Therefore, choosing to locate these services at the low-volume Cherry Hill campus leads to fewer high quality patient outcomes than locating at the high-volume First Hill campus.
 11. Therefore, the current plan is to the *disbenefit* of the patients that Swedish serves.
 12. Therefore, Swedish is not providing the best care possible at its main facility on First Hill.
 13. **Alternatively**, First Hill provides adequate care without the type of extensive private co-location that Swedish states is needed for Cherry Hill.
 14. If this is true, then premises of the argument against the viability of decentralization are false.
 15. If these premises are false, then Examiner Tanner’s conclusion that an unrepresented decentralization option is not viable is not supported.

- Conclusion 19: “The CAC majority’s recommendation on requiring compliance with the SOV rate prior to issuance of a building permit would duplicate the Departments’ existing authority under the Code to enforce the SOV rate, and therefore is not necessary”
 - Swedish has consistently shown an inability to meet its SOV goal and issues related to TMP compliance are generally treated with leniency. The Department, unfortunately, has been unable to enforce this aspect of the Code due to either priority or resource constraints. This recommendation by the CAC, which I also support as a former member, is meant to ensure compliance prior to issuing a building permit. This assurance does not exist in the current situation.
 - This recommendation by the CAC did not seek to establish a new power for the Department, but to ensure that mitigation promised and undelivered *for 30 years* is achieved before Swedish is allowed to increase the impacts on the neighborhood.
- Conclusion 20: “Because the potential neighborhood greenway on 18th Avenue will not be planned until 2016, and there are other appropriate locations for a greenway in the neighborhood, it is neither desirable nor practical to address the greenway in conjunction with the MIMP.”
 - The greenway is a public amenity that would serve a much larger part of the neighborhood than other Swedish designed “benefits”¹. Their lack of action is notable when Seattle Children’s, nationally known as being a leader in transportation, committed to funding part of the greenway in proximity to their campus before design work had started on the implementation of that greenway.
 - If there is *any* expectation that Swedish should invest in walkable, active transportation choices in the neighborhood as part of the mitigation of this plan for use by patients, employees, and residents, then a commitment should be made in writing in the MIMP. Do not expect more than what is required by law from Swedish. If a mitigation measure is not specified, do not expect to see it funded or implemented at SMC’s initiative.
 - Examiner Tanner has erred in assuming that SMC’s interest ought to be contingent on the greenway being located on 18th Avenue.
 - Examiner Tanner has also erred by assuming that the 18th Avenue Greenway planning is outside of SMC’s control. A sponsor for a project can greatly improve the speed in which it is implemented.

¹ Swedish is planning on including a health walk around the campus, which would ask residents to cross numerous busy institution driveways and spend their leisure and health time walking along busy arterials, with heightened noise and pollution. Swedish believes that residents will use this feature instead of the tree lined, low traffic volume residential streets that surround Swedish Cherry Hill and that lead to popular destinations such as local businesses, parks, and transit service. It is nonsensical that this is being proposed as a public amenity, since it has no apparent user base and no demand for such a facility. It is akin to offering someone a gift certificate to a bad restaurant when you are free to choose what restaurant to pick.

- Conclusion 21: “That City’s SEPA policy on transportation provides that for projects outside of downtown that result in adverse impacts, the decision-maker may reduce the size and/or scale of the project only if it is determined that other traffic improvement measures would be inadequate to effectively mitigate the adverse impacts of the project. SMC 25.05.675 R. ***That is the case here*** (emphasis added), and if this were a project application, a reduction in the size and/or scale of the project could be appropriate.”
 - **Examiner Tanner affirms in this passage the single most important argument presented by the CAC minority reports, members of the community, and appellants of this MIMP approval: The height, bulk, and scale of this planned campus exceeds what this neighborhood context can accommodate and therefore should not be approved.**
- Conclusion 21 (continued): “However, the MIMP is a long-term conceptual plan covering at least 25 years. One of the purposes of a master plan is to “allow the city to anticipate and plan for public capital or programmatic actions that will be needed to accommodate development”. SMC 23.69.002.L”
 - Examiner Tanner errs in this conclusion by assuming that there are possible solutions that could potentially mitigate the impact of a development of this size. As a professional transportation planner, this site has severely limited options for mitigation by the City through either capital investment or programmatic actions.
 1. Expanding road capacity through additional lanes is fully infeasible due to cost and right of way acquisition challenges. The City cannot build capacity here through expansion.
 2. Additional capacity could be gained through reconfiguring the roadway to a four-lane road. However, this would require the removal of the planned curb bulb-outs along Cherry and/or Jefferson, which recommended by the DPD Director’s report as a mitigation to the threat that increased traffic caused by the MIMP will increase to pedestrians.
 3. 14th Avenue could also be modified to a four or two plus turning lane road, but this conversion would be unlikely to serve as a realistic alternative for access: Southbound traffic must turn at Yesler, which does not connect to the freeway (and is extremely unlikely to in the future) and Northbound traffic has no easy link to the freeway and potential drivers are likely to use 23rd for access instead.
 4. 14th Avenue is an unlikely choice for transit service. 12th Avenue is slightly more likely, but unlikely to supplant the Metro Routes 3 or 4 for access to the campus.
 5. High capacity transit in the corridor is extremely unlikely.
 6. Additional transit service to the campus is less likely outside of direct investment by Swedish, which is not mandated as part of the MIMP or requirements for permits is unlikely. However, since Swedish is targeting a

comparatively high SOV rate, it is unlikely that they will provide the type of institutional programs needed to make a significant impact on traffic.

- In this light, it should be read that Examiner Tanner is arguing that the MIMP should be approved because an *unknown city* action could mitigate the *known directly caused* impacts of development at Swedish Cherry Hill. However, there is no reasonably foreseeable technology, public investment, or programmatic action that could feasibly mitigate the impact. Therefore, she has erred in this judgement.
- The facts above point to the MIMP being inconsistent with the area it is located in with too much height, bulk, and scale for this neighborhood to reasonably accommodate. Examiner Tanner affirms this in her statement above, which should be grounds for rejecting this MIMP as an incompatible plan for this campus.
- Her defense on why this is *not* grounds for rejecting the MIMP is based on an assumption that there are realistic actions that the City could take to mitigate the impact caused by the institution, but this premise is false.
- Conclusion 21 (continued): "Further, with each project application under the MIMP, a new analysis of traffic conditions and impacts will be prepared. If it is shown that a reduction in size or scale is necessary, that is the point at which it should be required."
 - Examiner Tanner has already concluded that if this was presented as a single unified project, traffic cannot be mitigated and that a reduction in the scale "may be appropriate".
 - Examiner Tanner defends this on the basis that the City of Seattle could do something to fix the traffic problems with each project, but as shown there are no options that the City can reasonably be expected to take to mitigate this net impact.
 - This will result in decades of unrest and conflict in the neighborhood by forcing residents and other parties to mount a vigorous review of each and every project. Citizens that are involved in this process are not paid for their advocacy and must engage in the process during their free time. **This is a significant burden for residents to bear when this protection is supposed to be afforded to them by virtue of a well created master plan than balances their needs for a livable and vibrant neighborhood against the needs of the institution to grow.**
 - A master plan is meant to resolve foreseeable issues to the largest extent possible, thus preventing conflict and providing both developer and neighbor with reasonable expectations of outcomes. This is the purpose of the public process and it has failed here.
 - This is partially embodied by 23.69.002.L, which states that the master plan is supposed to give "advance notice of the development plans of the major institution". By stating that each and every project will be open for review and that each must be guarded against the predictable overdevelopment that

Examine Tanner has identified as leading to a net unacceptable traffic impact, the current plan does not deliver on a predictable future for residents – or the institution.

- In other words, Examiner Tanner acknowledges that the plan is too large, but argues that we can't know when the campus will become too large until we review each project.
- **It is unlikely that any one project will result in a traffic situation that cannot at least be partially mitigated.**
- **After each project, the traffic condition will deteriorate. This creates a new status quo that the next project will be evaluated against.**
- **We should not defer addressing this known cumulative impact. This is a "slow boil" of impacts that should be addressed now by rejecting the MIMP. This is precisely the reason that environmental impact statements are required to account for foreseeable cumulative impacts in the first place. .**
- **Examiner Tanner states that if considered as a project, the impacts of traffic may warrant a reduction in size. Since it is less likely that a project by project review will prevent the unacceptable outcome and that preventing this will be unfairly left primarily to the citizenry to complete in their free time, the current MIMP should be rejected and scaled down.**

In making her recommendation for approval of the Swedish Cherry Hill MIMP, Examiner Tanner sidesteps flaws of the plan that she admits would warrant modification in other circumstances. She argues that although traffic impacts are unacceptable overall, the MIMP will provide the City with the foresight needed to implement mitigation and therefore does not need to be altered. Unfortunately, there are no realistic mitigation measures available for the city to implement to mitigate traffic and some options² are directly incompatible with safety improvements required to mitigate the impact on pedestrian safety that would be caused by the MIMP. The predictable result of a plan too large for its neighborhood context is decades of unrest as citizens seek to prevent the outcome the Examiner has already stated would be unacceptable. Examiner Tanner incorrectly concludes that the MIMP is sufficient when there is a lack of a required decentralization option that discusses the decentralization of *Cherry Hill Campus*. A description of a regional network of hospitals is not an investigation of how decentralization can be applied to *Cherry Hill* to reduce impacts of development.

The MIMP as presented should be rejected. At the core, the question is whether this is an appropriate development in height, bulk, and scale for this context. As has been argued above, Examiner Tanner has erred in her judgement. In her decision to reject the initial Seattle Children's MIMP, Examiner Tanner stated that *regardless of need* Seattle Children's was not entitled to the requested intensity of development. This rejection, by both Examiner Tanner and the surrounding community, was instrumental in causing Seattle Children's to innovate and

² Such as reverting Cherry Street to a four lane road to prioritize vehicle traffic over pedestrian safety.

present a new alternative. Now that the first phases have been built, her wise decision in this case yielded a better plan that better balanced the needs of the community with the needs of the institution. Swedish has presented a similar argument as Children's: They need to build *exactly* 385 of the 385 beds allowed in order to absorb the specialty care needs of our community, therefore they need a development that is out of context and out of scale for this neighborhood. Examiner Tanner's recommendation for approving the Swedish Cherry Hill MIMP is inconsistent with her 2009 recommendation *against* approving the Seattle Children's MIMP, which featured a lower overall impact on the surrounding neighborhood.

Rejecting this MIMP will not result in Swedish abandoning the Cherry Hill Campus or refusing to provide care in Seattle. It will represent consistency in application of the law between different communities in Seattle and spur Swedish to come back with a plan that ultimately better serves the citizens of Seattle (both those who call Squire Park home and those that seek it out for care). The current MIMP contains a paucity of public benefits to balance the immense impacts on this neighborhood that will result. The MIMP does not balance the needs of the community with the needs of the institution. Although Swedish provides care to our region, **it is not entitled to this intensity of development, in this place, at this time.**

Thank you for your consideration.

Sincerely,

Nicholas Richter

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