PARK CITY PLANNING COMMISSION WORK SESSION MINUTES JUNE 12, 2013

PRESENT: Nann Worel, Brooke Hontz, Stewart Gross, Adam Strachan, Jack Thomas, Charlie Wintzer, Thomas Eddington, Francisco Astorga, Polly Samuels McLean

Commissioners Savage was excused.

WORK SESSION ITEMS

Chair Worel disclosed that she works with the People Health Clinic, which is one of the buildings in the original agreement plan with Intermountain Healthcare; however it would not affect her ability to discuss the requested Amendment to the MPD for the Intermountain Healthcare Hospital scheduled for work session this evening.

Commissioner Wintzer disclosed that his daughter works at the Hospital but it would not affect his ability to discuss the work session item.

<u>900 Round Valley Drive, Intermountain Healthcare Hospital – Amendment to Master Planned</u> Development (Application PL-13-01392)

Morgan Bush, the Operations Officer for Intermountain Healthcare Rural Regional, stated that he was also the project manager for the initial development of the hospital. Since he had worked with the City Council and the Planning Commission throughout the annexation agreement, the CT zone and the initial MPD, he was asked to work with the hospital administration to try to figure out the options the Hospital has now and to make sure they are consistent with the Annexation Agreement and the original MPD.

Mr. Bush stated that as part of the MPD process in 2007 they made a commitment that before they expanded the hospital they would bring their ideas or concepts back to the Planning Commission for input before the Hospital would make its decision on what they would recommended to Intermountain Healthcare. Mr. Bush remarked that Intermountain Healthcare was starting its budgeting process; therefore, the Hospital would have to submit a recommendation within the next few weeks. They applied for the MPD amendment process in an effort to have the conversation with the Planning Commission.

Mr. Bush reported that the Hospital Administration was considering three potential options. He would try to explain the implications with the CT zone and work with Staff and the Planning Commission to have a good understanding of what they need to do if they elect to pursue any of the three options proposed. Mr. Bush clarified that the purpose of the work session was to present the options and hear feedback on the design concepts. They were not requesting any approvals.

Mr. Bush stated that the hospital has been more successful in the first five years than originally forecast. The areas of greater growth are in surgery, the emergency department, imaging, and physical therapy, and the in-patient nursing floor. It all includes all of the physician office space in the Annexation Agreement, which includes the Hospital's attached MOB as well as the Physician Holding Building. That space is all used with the exception of one 1100 square foot shelf space in the Physician Holding Building. The Administration currently has requests from eight different

physicians asking for space on the Campus. Mr. Bush noted that this was one of the drivers that caused the Hospital Administration to relook at the phasing and propose adding additional office space and other support space to the Hospital.

Mr. Bush commented on three options being considered. Kennard Kingston, the project Architect, reviewed a site plan included in the Staff report to orient the Commissioners to the area of the proposed addition. Commissioner Hontz asked if the identified area was currently parking. Mr. Bush replied that it was the parking lot for the Physician Offices. The new building would be built in that parking lot and new parking would be built to the east.

Mr. Bush stated that Option A has two components. One is a three-story, 82,000 square foot addition that would be built next to the existing MOB. All three options include building out over the top of the existing physical therapy and filling in a shell area on top of physical therapy for a procedure center. Mr. Bush explained that there are two procedure rooms in the current OR. If they can move the minor cases into this area, they would be able to create an additional OR without having to expand the hospital without having to do the main surgery addition that was contemplated in Phase 2 of the phasing plan.

Mr. Bush remarked that the ground floor has two components, which would be a 15,000 square foot education center, along with a Live-Well Health Promotion and Wellness clinic and center. He noted that the wellness and the education center were not part of the original phasing plan. However, with health care reform and the need to move more towards health promotion, wellness and prevention of illnesses, the hospital needs to provide facilities and resources that were not envisioned as part of the original phasing plan. Therefore, the Hospital proposes to take some of the medical support density that was conditioned for future medical offices, and use it for these functions at this time.

Commissioner Strachan wanted to know what type of facility was needed for wellness. Mr. Bush replied that it is a physician clinic to allow health promotion and wellness testing, stress testing, body fat assessments, respiratory assessments, etc. Part of it would be like a physician office but oriented towards testing as opposed to treating sick people. Another part is an education component for people to take classes, and a gym where people are taught to do exercises properly. These were the types of services envisioned as part of Live-Well. They believed the Hospital needs to be more pro-active in providing these services, particularly in this community. Commissioner Thomas asked if this would be similar to the facility in the USAA building where they

test athletes. Mr. Bush replied that it was a similar concept but more for the general public. He noted that there is a small Live-Well center in the current MOB, but it is not adequate for future needs.

Mr. Bush stated that the second story of the new addition allows for an expansion of the current orthopedic clinic located in the hospital. They are interested in bringing in additional partners as their practice continues to grow. The concept also provides clinic space for some of the new physicians who have an expressed interest in locating on campus but there is currently no space.

Mr. Bush remarked that the third floor of the proposed new addition allows for the expansion of the Intermountain Medical Group Clinic as they bring on additional physicians to expand their practice, as well as to provide some additional future medical office space. The Hospital Administration area

would also be relocated from the third floor of the existing hospital over to the new space. The current Administration area would be remodeled and converted into patient beds for the hospital.

Mr. Bush stated that Option A would add 82,000 square feet of medical support. Currently, the Physician Holding building is basically 25,000 square feet and is built out. The People's Health and Summit Public Health Building is built out at 25,000. In the existing hospital, 18,000 of the total square footage is medical support. Mr. Bush pointed out that they were approved to build out up to 50,000 square feet for medical support attached to the hospital. The current proposal would take the additional 50,000 square feet of density that was originally scheduled for Lot 6 and 8 on the campus, and shift it to the hospital as part of this project. Mr. Bush understood that the density shift was the component that required an amendment to Annexation Agreement and the MPD.

Planner Astorga replied that Mr. Bush was correct. The MPD would need to be amended because the original MPD only allowed up to 50,000 square feet at the hospital site, and this proposal would add additional density at the hospital. Currently, the Hospital Administration does not foresee using all the density. Mr. Bush clarified that the Hospital would come back at some point in the future with a proposal to use that density as the hospital continues to grow. He noted that originally the initial development was proposed in three phases to reach full build-out. They still envision reaching full build-out, but they were proposing to change the phasing plan to build more of the medical support now as part of the first addition, and postpone most of the hospital addition until they actually need that space.

Planner Astorga noted that the proposal would definitely require a change to the MPD with either option. However, the Staff needed to consult with the Legal Department on whether or not it would require amending the Annexation Agreement.

Commissioner Strachan understood that they would only be changing the designation of use. The 150,000 square feet allocated as hospital space would remain the same, but a portion would be transferred and used for medical offices. Planner Astorga reviewed the breakdown of the square footage between the hospital, medical support and off-site facilities.

Mr. Bush clarified that Option A proposes to change the location of the density in the subdivision. They were not proposing a change in the total square footage. Commissioner Wintzer understood that Mr. Bush was talking about transferring density from the campus to the Hospital. He also understood that there were two remaining building pads of 25,000 square feet each. Mr. Bush replied that this was correct. He explained that Option A proposes to take that density from those two lots, move it off of the campus for this project and leave the two lots as open space.

Commissioner Gross asked Mr. Bush if Option A was the priority option. Mr. Bush stated that Option A is the most expensive option and the Hospital Administration does not know if Intermountain Healthcare is willing to fund it. They will want to know the implications of all the options. Mr. Bush noted that once an option is chosen, they would come back with a full proposal and go through the formal approval process.

Commissioner Thomas stated that from a massing point of view, the visual impact of Option A would be greater as they remove the two small pads, create the open space and make a bigger footprint on the hospital building, which will continue to grow. Mr. Kingston stated that his firm was the

architect on the original project and even though it is a 150,000 square foot building on the campus, it does not read that way. He pointed out that a new lower level steps down from the building, and the same thing would occur as it expands to the south. Mr. Kingston stated that the intent over time is to maintain the feeling that this is a rural hospital and not a large urban medical center. The idea is to make the additions work step and work with the same rules regarding building height, setbacks and offsets. He believed it was achievable.

Commissioner Hontz encouraged the Commissioner to pull out pages 133, 137 and 141 and look at the site plan and the parking plan and the size and location of the proposed addition. She stated that Option A would move the two building pads to the east location and keeps them as open space. She asked if that would occur with Options B and C. Mr. Bush stated that Option B would move the density from one of those pads, but it would leave 25,000 square feet unbuilt, and in a future phase the Hospital could build one additional building. One of the lots would be designated as open space. Option C would be building the density on the hospital campus and building the education center on one of the lots. Option C would stay closer to the original MPD in terms of the allocation of square footages.

Commissioner Hontz asked about the parking shown in each option. Mr. Bush stated that the model was adding three parking spaces per 1,000 square feet. When they originally modeled the hospital, the parking was reduced from what was originally proposed based on the concern of too much surface parking. Commissioner Hontz believed there was always surplus parking. Mr. Bush agreed that there is always parking. Therefore, they were proposing the minimum amount. Commissioner Hontz understood that Option A also included adding on to the parking garage. Mr. Bush remarked that Option A adds additional surface parking pushing out to the north. It would also have the biggest impact in terms of building on to the future location of the structured parking that is part of the MPD in Phase 2 of the phasing plan.

Commissioner Wintzer recalled that Phase 2 required structured parking and Phase 1 was to berm around the parking.

Mr. Kingston pointed out that the footprint of the building would be bigger but the perceived density of the campus would be lower with the pads as open space. He remarked that there is an upside and a downside and he believed they could manage the footprint issue. The question was whether the benefit of having a lower perceived density on campus worth the change.

Commissioner Thomas suggested that the Planning Commission visit the site to understand the visual impact. Chair Worel stated that she had walked the site and with all the berming she did not believe the parking would be visual from Highway 40.

Commissioner Strachan asked if all the parking and the expansion would be east of the Silver Quinn's Trail and that the trail would not be disturbed. Mr. Bush replied that all the construction would be contained within the existing loop road at the Hospital. It would not go into any of the open space. Mr. Bush stated that the trails and the open space are part of what makes the hospital work.

Commissioner Hontz remarked that the original project turned out better than what she expected in terms of the massing of the building, how it sits on the site and the location of the parking. However,

she believed they overdid the night lighting and it is still too much. In addition, it is not pedestrian friendly to walk down to the end of the drive stall. Wherever the parking is located, she would encourage a better way to gather people and get them to a safer point instead of walking through the drive aisle.

Commissioner Thomas noted that the Planning Commission had requested the trails diagrams on the initial drawings and he would like to see those put back in the site plan. Commissioner Strachan indicated a trail that makes it easy to bike to a doctor or hospital appointments. It is in the area of the expansion and he suggested that tying a trail from Silver Quinn's down to the hospital would be a great amenity and a good selling point.

Commissioner Hontz understood Commissioner Thomas' concern about how the massing would read on the building. However, she supported the concept of moving the density from the two pads and finding a way to make the massing read better on the building. Commissioner Thomas thought Option A appeared to be the obvious solution and he questioned whether a site visit would be necessary. Commissioner Strachan suggested that the Commissioners do their own individual site visit if they felt it would be helpful.

Commissioner Wintzer assumed the expansion would have the same or similar materials. Mr. Bush answered yes. Commissioner Hontz asked if the expansion of the facility would push it into a different type of operation that no longer classifies it as rural, which could affect individual insurance policies. Mr. Bush clarified that the expansion would not change the number of beds or add new services with the exception of the Wellness and Live-Well, which does not affect the Hospital's licensure category. There would be no change in term of the community's ability to access services at the hospital. Commissioner Hontz felt that was an important issue. Mr. Bush remarked that it is up to the individual insurance companies to decide whether or not they want to contract with the Hospital.

Mr. Bush asked if the Planning Commission had a preferred option. Commissioner Strachan believed the policy direction was that the Planning Commission would support any option that moves the density from the two building pads. Commissioner Wintzer agreed.

Commissioner Wintzer stated that Intermountain Healthcare has been a great neighbor to the community. As both a Planning Commissioner and a Board member of the People's Health Clinic, he believed this was the biggest "get" for the City. They ended up with a free clinic for People's Health and a partnership with the whole community. Commissioner Wintzer remarked that it has been very successful and he wants to makes sure that it stays successful. He noted that Intermountain Healthcare gave the City everything it asked for and when the project was finished, it looked better than the rendering.

Mr. Bush requested discussion on the affordable housing element since it was a major issue with the original approval. He noted that with any of the options proposed, the affordable housing with the new square footage is still under the 45 unit total. Intermountain Healthcare provided a five acre lot and the Burbidge's put up a bond to provide the 45 units that were part of the Park City Heights development. He noted that with any of the options proposed, the affordable housing obligation with the new square footage is still under the original 45 units. Additional affordable housing would be triggered by the next expansion. Mr. Bush asked for direction on the affordable housing component

to make sure he was reading the agreements correctly.

Commissioner Strachan thought affordable housing question would be a Planning Staff and Legal Department determination. Director Eddington stated that the Staff would be working with Intermountain Healthcare on the analysis and the numbers.

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Commissioner Wintzer asked for an update on the affordable housing and asked if the project was still on hold. Director Eddington stated that the project was on hold and the City was trying to work with the developer to see if they could help move it forward. Director Eddington was unsure whether that would be this year or next year.

Director Eddington clarified that the Planning Commission was most comfortable with Option A, incorporating density into the building and preserving the two pads as open space and screening the parking. Commissioner Hontz requested that they also reduce the parking and the lighting as much as possible. Commissioner Gross requested that they keep the connectivity with the trails. The Commissioners concurred.

The Work Session was adjourned.