December 21, 2009

Amanda Burden, Chair
City Planning Commission
22 Reade Street
New York, New York 10007

Dear Chairperson Burden:

At its Full Board meeting on December 17, 2009, Community Board #2, Manhattan (CB#2, Man.) adopted the following resolution:

Resolution on CB2 Comments on the Draft Scope of Work issued by the Department of City Planning (DCP) for the Saint Vincent’s Hospital and Residential Development Project.

Whereas, Community Board No. 2, Manhattan (CB 2), held a public hearing on the Draft Scope of Work for the Environmental Impact Statement issued by the Department of City Planning (DCP) in connection with the ULURP application for the Saint Vincent’s Hospital – New Acute Care Hospital and Emergency Department and Residential Development Project on December 1, 2009; and

Whereas, CB 2’s comments are based on information received at this meeting, and address points in each of the impact areas for environmental review under the Rules of Procedure for Environmental Review (CEQR).

THEREFORE BE IT RESOLVED that Community Board No. 2, Manhattan submits the following comments on the Draft Scope of Work:

I. Land Use, Zoning, and Public Policy

- *Study Entirety of FAR Being Requested* - St. Vincent’s is seeking a rezoning on the proposed new hospital site that would increase the allowable Floor Area Ratio (FAR) from 6.5 to 10. However, the plans presented to the community show a proposed new hospital that uses only 9.26 FAR. CB 2 urges that the Scope of Work examine alternative development scenarios that utilize the entirety of the FAR requested (for example, “big box” retail).

- *Expand Study Area Boundaries* – The impact of this project, the largest to be proposed in the history of the Greenwich Village Historic District, extends far beyond the ¼ mile perimeter for the Land Use, Socioeconomic, Historic Resources/Urban Design study areas and the ½ mile perimeter for the Schools and Open Space study area. We request that DCP expand the study area boundary to cover all or most of the Greenwich Village Historic District.
• **Concern about Completion Date** - According to St. Vincent’s, the entire project will not be completed for at least a decade (the replacement hospital would be constructed from 2011 – 2015; the residential portion of the project would be constructed from 2016 – 2019). CB 2 is concerned that many of the conditions being examined in the Scope of Work have the potential to change significantly during this ten-year period and requests that DCP take this into consideration.

• **Concern about Future Projects in the Area** – NYC Transit has proposed the construction of an emergency ventilation fan plant in the Mulry Square area (Greenwich Avenue and Seventh Avenue South) where the Seventh and Eighth Avenue subway lines intersect. This project could result in several years of construction, including street closings. The impact of this project alone on local residents, small businesses, traffic and the environment will be tremendous. CB 2 requests that DCP examine this project in connection with the new hospital and residential complex and consider ways that their combined impacts on the community could be mitigated.

**II. Socioeconomic Conditions**

• **Lack of Affordable Housing** - CB 2 is concerned about the impact of the addition of up to 450 – 658 units of luxury (market rate) housing to the area. Already, there is a severe shortage of affordable housing in the CB 2 area, and the addition of a substantial number of market rate units will continue to put more pressure on this limited affordable housing stock, which we think has the potential to result in residential displacement.

**III. Community Facilities and Services**

• **Increase Estimate of School Students** - The Draft Scope of Work projects the introduction of approximately 80 elementary, 27 middle, and 40 high school students for 450 units of housing. CB 2 thinks this projection is far too low, notwithstanding the student generation ratios provided in the CEQR Technical Manual. As we believe this housing will be marketed primarily to families, it seems likely that more than 25% of the units will have residents with school-aged children. In addition, CB 2 requests that DCP examine the impact of the housing project on pre-school and day-care seats (public and private) given the current critical shortage in the area, in addition to the impact on elementary, middle and high school seats, and look at the impact on schools in the immediate study area as well as the broader District 2. It is important to note that the NYC Department of Education has proposed relocating the Greenwich Village Middle School downtown to 26 Broadway. Such a move would leave no middle school in CB 2. Middle schools North and South of CB 2 are already overcrowded, so the impact on 11-14 year olds is particularly intense. One way to project the number of elementary seats required for the neighborhood is to compare the number of 5th graders to the number of kindergartners in PS 41 this year, which suggests an exploding need for schools for young children in the near future. The BOE statistics, and the formulas used, are recognized as severely inadequate by every political leader in Manhattan. An early childhood center in the St. Vincent’s complex would be filled immediately with neighborhood children.

• **Relocation of Physicians’ Offices** – CB 2 is concerned about the impact to the local community of the relocation of the ambulatory care facilities and physicians’ offices that are currently located in the O’Toole Building.

• **Impact on Police and Fire Facilities** – CB 2 requests an assessment of the impact on fire and police facilities. The addition of 450 – 658 units of housing will create a greater need for fire and police services in the community, as will the lengthy period of construction.

• **Impact on Libraries** – CB 2 is concerned about the potential impact on public libraries, even though the applicant has stated that the CEQR threshold for such examination has not been triggered. Only one library serves the central Greenwich Village neighborhood and the close
proximity of the proposed residential complex to this library suggests that it will be utilized to a great degree.

IV. Open Space
• Impact on Residential Open Space – CB 2 is concerned about the impact on the residential user population, but as noted above, believes the study area should be extended, especially given the lack of open space in the Greenwich Village area. In addition, while the applicant states that the proposed project would result in a net reduction of workers coming to the project site (and therefore an assessment on the worker population is not called for), CB 2 believes the proposed St. Vincent’s triangle open space will serve as an amenity to employees of St. Vincent’s given its proximity next to the hospital, and therefore requires examination.

• Playgrounds and Athletic Fields – CB 2 requests that DCP include an analysis of current usage of existing open spaces, particularly children’s playgrounds and athletic fields, together with the impacts of any incremental increases in use/demand resulting from the new residential impact. This should include toddler facilities and after-school programs.

V. Shadows
• Concern about Study Area for Shadows – As mentioned above, CB 2 is concerned that the study area will not encompass all of the portions of the local area impacted by shadows cast by the proposed new hospital and residential buildings, including the potential for loss of sunlight and/or shadows on all the affected buildings on 11th Street, 12th Street, 13th Street and 7th Avenue.

• Methodology of Shadow Study – Shadow studies at a minimum should be run for the existing condition and the proposed condition showing shadows on an hour-by-hour basis for the winter and summer solstices and equinoxes. Depending on the results of these studies, monthly studies may be necessary.

VI. Historic Resources
• Impact on Historic Structures – CB 2 urges DCP to take into consideration the number of old houses that are part of the Greenwich Village Historic District that will be affected by this project. These impacts are not only “visual and contextual,” but include potential structural risks flowing from the demolition/construction process. The subsurface conditions at both the O’Toole Building and the East Campus need to be examined to evaluate the impact of excavation, as well as the underground environment for the new facilities.

• State Office of Historic Preservation (SHPO) – The EIS should include SHPO’s views on historic resources in the neighborhood, including its views of the project’s impacts on the Greenwich Village Historic District.

VII. Urban Design and Visual Resources
• Modeling of View Corridors – CB 2 endorses the idea that the existing and proposed building bulk should be modeled from every view corridor, and at a minimum, with viewing locations starting at the project edge and moving away at a distance of 100 feet, half a block, and then one block intervals, until neither the existing or proposed buildings are visible. Each pair of views (existing and proposed) should extend sufficiently vertically to show some sky above the taller of the conditions.

VIII. Neighborhood Character
• Examine Impact on Side Streets – CB 2 believes the impacts of the project on neighborhood character are particularly important. Obviously, the impact of building two oversized buildings will need to be analyzed. Among the impacts that also need to be considered, however, is that the residential project will change the character of a street – 12th Street -- that now has the feel of a typical village residential block and add visual retail and a fourth parking garage (materially closer to the center of the block than the other garages). This
will create a block with a significantly greater commercial feel. In addition, by adopting an out-of-context design for the building to replace Reiss the proposed plan also negatively affects the character of the block.

IX. Natural Resources
- **Subsurface Conditions** – CB 2 endorses the idea that the EIS should identify any subsurface conditions (including diverted watercourses) that might be affected by construction of the projects.

X. Hazardous Materials
- **Include Asbestos Abatement** – An analysis of the presence of asbestos is important since it will require special precautions in connection with any demolition. The EIS should identify how buildings will be decontaminated in a safe manner prior to any demolition.
- **Materials Handling Building** – CB 2 requests that the EIS address any dangers of oxygen storage in the Materials Handling Building (and its piping to the new tower) and the fuel tanks for generators.
- **EPA Enforcement** - The Draft Scope of Work should explain how St. Vincent’s will comply with the EPA’s new compliance/enforcement initiative.

XII. Infrastructure
- **Sewer Infrastructure** – CB 2 urges DCP to address the impacts the project will have on the Hudson River and any other receiving body of sanitary sewage/wastewater, particularly during rainstorms that cause backups and overflow. The EIS should identify the likely frequency of such discharges and the incremental discharges that will be caused by the project, as well as the impact of the proposed hospital’s “green” building status on preventing such discharges.

XIII. Solid Waste and Sanitation Services
- **Waste Disposal** – The EIS should address the impacts of disposing of medical waste and the quantity of demolition of solid waste that will be created by the demolition of the O’Toole Building and part of the East Campus.

XIV. Energy
- **Assess Overall Energy Implications** - The overall energy implications of the project should be assessed, including the energy required for demolition, hauling of debris, mining, manufacture and transportation of building materials, and construction of two new structures.

XV. Traffic and Parking
- **Undertake Traffic and Parking Analysis** - The Draft Scope concludes that detailed traffic and parking analysis are not required. CB 2 strongly urges a detailed analysis, given that the new residential building will add new traffic, including resident trips, deliveries and trips generated by retail and doctors’ offices components. In addition, 12th Street between Sixth and Seventh Avenues already has significant cross-town traffic. Such an analysis plainly needs to examine the combined impacts of the fourth parking garage on 12th Street and the delivery, construction related and other vehicles which will inevitably double park on 12th (and 11th ) Streets as they service 450+ residential units, as well as the effects of a proposed additional 250 residential parking spaces. Also, the effect of adding an auxiliary ambulance entrance on 12th Street needs to be addressed. Finally, the impacts of new traffic circulation patterns also should be considered.
- **Examine potential for alternative transportation options** - In assessing automotive traffic impacts, scenarios should be developed that include transportation alternatives, such as bicycle lanes, racks and other accommodations, that would reduce vehicular impacts. The
effects of a proposed transference of required-by-law indoor bicycle parking to other facilities also needs to be examined.

- **Loss of Employee Parking** – Approximately 200 spaces for hospital employee parking currently under the O’Toole Building. CB 2 requests an examination of the impact of this on the surrounding streets.

- **Ambullete Entrance on W. 13th St.** – CB 2 is concerned about the vehicular traffic, pedestrian, noise impacts and the impact on the character of the affected side street of the proposed ambullete entrance and non-emergency drop-off pickup on W. 13th Street and requests DCP examine these issues.

**XVI. Transit and Pedestrians**

- **Include Side Streets** - It is unclear whether the transit/pedestrian analysis in the Draft Scope of Work factors in the true impact of adding over 1,000 new residents to West 12th and 11th Streets.

**XVII. Air Quality**

- **Include Traffic Congestion** - CB 2 urges that DCP requires the air quality analysis to consider the effects from traffic congestion, double parked delivery vehicles and the like.

- **LEEDS Status** – CB 2 would like to know to what degree, if any, the LEEDS “green” status of the proposed hospital will mitigate HVAC systems’ emissions.

**XVIII. Noise**

- **Vehicle Traffic** – CB 2 believes the Draft Scope of Work’s noise analysis wrongly assumes no increased vehicle traffic.

- **Construction Noise** – CB 2 is concerned about the noise from demolition, construction and cranes and other heavy machinery, especially given the long period of construction.

- **HVAC** – We request an examination of the noise impacts from the HVAC units for the proposed hospital, new residential building and the Materials Handling Building. The EIS should focus on these impacts in a nighttime environment, when background noise is less.

**XIX. Construction**

- **Additional Points of Analysis** – CB 2 has an extensive set of construction protocols for major developments that we wish to see followed by the applicant and should be considered by DCP in its analysis. Points to consider are:
  - How to avoid structural damage to surrounding buildings from the demolition/construction process, especially given the inherent difficulty of excavation down to five stories at the proposed hospital site and the impact from heavy construction trucks operating on side streets;
  - How to prevent street closings – any more than occasional brief (less than a day) closings during a project of this duration is unacceptable;
  - Potential rodent hazards arising from demolition activity;
  - Asbestos cleaning protocols prior to any demolition;
  - An approximate construction schedule that identifies, among other things, duration of demolition, excavation and construction at each site;
  - Limitations on hours and stays of work;
  - Pedestrian accessibility; and
  - Dust control.

**XX. Public Health**
(Please refer to other sections.)

**XXI. Mitigation**

- **Importance of Mitigation** - The enormity of this project and the major impacts on a relatively small and extremely dense area of CB 2 requires that as a general matter DCP
should require the examination of any and all ways to mitigate impacts both during construction and on completion.

- **Height of Hospital Tower** – One mitigation approach that should be considered is reducing the height of the hospital tower. One advocacy group suggested to CB 2 that the elimination of as few as 15 additional beds could allow the tower to be shortened by an entire floor (or 15 feet).

- **NYC Transit Emergency Fan Plant Mitigation** – As noted above, NYC Transit has proposed the construction of an emergency ventilation fan plant in the Mulry Square area. CB 2 requests that DCP examines the feasibility for St. Vincent’s to mitigate the combined impact of its project and the fan plant by relocating the fan plant underneath the St. Vincent's Triangle.

**XXII. Alternatives**

- **Analyze Reasonable Alternatives** - The EIS should include an in-depth evaluation of all reasonable alternatives, including evaluation of a specific alternative that does not involve demolition of the Reiss building.

   Vote: Unanimous, with 35 Board members in favor.

   Please advise us of any decision or action taken in response to this resolution.

   Sincerely,

   Brad Hoylman, Chair
   Community Board #2, Manhattan
   St. Vincent’s Hospital Omnibus Committee
   Community Board #2, Manhattan

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   **cc:**
   Hon. Jerrold Nadler, Congressman
   Hon. Thomas Duane, NY State Senator
   Hon. Deborah Glick, Assembly Member
   Hon. Scott Stringer, Man. Borough President
   Hon. Christine Quinn, Council Speaker
   Hon. Alan Jay Gerson, Council Member
   Hon. Rosie Mendez, Council Member
   Sandy Myers, Community Board Liaison, Man. Borough President
   Lolita Jackson, Manhattan Director, CAU
   Henry Amoroso, CEO/President, St. Vincent Catholic Medical Centers