

## **EXECUTIVE SUMMARY**

### **A. Introduction**

The Hospital for Special Surgery (HSS) is proposing a major renovation and expansion for modernization of its existing facility located between East 70<sup>th</sup> Street, East 72<sup>nd</sup> Street, York Avenue, and the Franklin Delano Roosevelt (FDR) Drive in Community District 8 of Manhattan, New York. The proposed project is a Type I Action.

### **B. Description of the Proposed Actions**

HSS seeks discretionary approvals, which require environmental review under the City's Environmental Quality Review (CEQR) procedures. The proposed project would require the following New York City Planning Commission (CPC) Uniform Land Use Review Procedure (ULURP) actions:

- Special Permit for new construction in the air space over the FDR Drive for the new River Building pursuant to Zoning Resolution (ZR) §74-682 and to allow for modifications for loading requirements;
- Modification of the existing Special Permit (C910485ZSM, approved February 24, 1992) for the East Wing of the Main Hospital pursuant to Zoning Resolution §74-682;
- Zoning Text Amendment to ZR section 74-682 (Developments Over Streets) to modify off-street loading requirements and to allow loading berths to be located anywhere within the HSS campus without regard for zoning lot lines for zoning lots adjacent to air space that has been closed, demapped and conveyed by the City to non-profit institutions in R9 or R10 districts, pursuant to State enabling legislation enacted in 1971; and
- City Map Amendment to eliminate, discontinue and close portions of the FDR Drive right-of-way and the disposition of real property related thereto, to allow for the placement of columns and footings associated with construction of the proposed River Building on the sidewalk at the west edge of the FDR Drive and east of the roadway of the FDR Drive, in the East River Esplanade.

In 1971, enabling legislation was passed by the State of New York authorizing the City to close and discontinue in whole or in part the space over the FDR Drive in an area generally located between East 62<sup>nd</sup> and East 72<sup>nd</sup> streets, and portions of East 63<sup>rd</sup>, East 70<sup>th</sup> and East 71<sup>st</sup> streets between York Avenue and the FDR Drive. The property was then to be disposed of to three (3) non-profit institutions, The Society of New York Hospital, The New York Society for the relief of the Ruptured and Crippled maintaining The Hospital for Special Surgery, and The Rockefeller University. As a result of the legislation, the three (3) institutions and the City of New York entered into an Agreement in 1973 (the 'Agreement'). As part of the Agreement, the property rights described in the State legislation were apportioned to each of the institutions as well as the obligations assumed by each institution to provide specified public improvements to create a walkway and ramps along the East River. The Agreement also specified the process by which the City was to act to implement the Agreement, as well as other approvals required from the

City Planning Commission and the Director of the Department of City Planning. On April 2, 1973, the City passed two (2) resolutions which accepted the Agreement, authorized the City to release its interest in volumes above the streets, and changed the City Map to reflect the State legislation and the Agreement. The Agreement was amended in 1993 (the “1993 Amendment”).

In addition to the actions described above, the proposed project would require the following CPC actions:

- Approval by the CPC for building over the FDR Drive under the Article 15 of the Agreement;
- Approval by the City Planning Commission under Article 13 of the Agreement, as amended in 1993, for placement of support structures on the East River Esplanade; and
- Waterfront Revitalization Program consistency determination from the City Coastal Commission, which is the New York City Planning Commission;

The proposed project would require the following City Planning Director of the New York City Department of City Planning action:

- Under the 1973 Agreement, Article 12B, as amended, approval by the Director of the New York City Department of City Planning for construction plans relating to construction phases, the EIS, landscape plan, lighting plan, security plan, ventilation plan, noise quality plan, and plans for closing the FDR Drive, East River Esplanade and public pedestrian bridge at East 71<sup>st</sup> Street over the FDR Drive during construction;

The proposed project would require approval by several other New York City agencies, including:

- Approval from the New York City Department of Transportation (NYCDOT) of any construction plans as they related to closures of streets, highways or individual lanes and diversions or rerouting of traffic; and
- Approval from the New York City Art Commission for construction over a City highway (the FDR Drive).

The proposed project would require the following New York State actions:

- Certificate of Need (CON) from the New York State Department of Health (NYSDOH). The CON application was approved in November 2004 (not subject to SEQRA/CEQR);
- Health facilities approval from the New York State Department of Health - Office of Health Systems Management (not subject to SEQRA/CEQR); and
- Issuance of bonds by the Dormitory Authority of the State of New York (DASNY), a discretionary action subject to SEQRA/CEQR review.

The proposed project would require the following Federal actions:

- Federal construction loan insurance guarantee is needed from the Federal Housing Administration (FHA). HSS' application for loan guarantees with respect to the project is not currently under consideration. Accordingly, FHA has not made a commitment to provide loan guarantees to the proposed project, and accordingly, FHA's obligation under NEPA, if any, has not been triggered. However, the project will undergo NEPA and additional Federal reviewed as needed.

The project site is located in an R-9 zoning district, which is a general residence district allowing residential use and community facility use. The maximum floor area ratio (FAR) for an R9 district is 10.0 for community facility use and 7.52 for residential use. The maximum floor area can be increased to 12 FAR for the provision of a publicly accessible plaza.

### **C. Renovation & Expansion Plan**

The HSS plans a renovation and expansion of existing facilities that would be completed in 2010. All of the expansion is allowed under the terms of the Agreement, as amended (in 1983 and 1993). The expansion plan will require modification of an existing Special Permit (C910485ZSM), approved February 24, 1992, as well as a new Special Permit, pursuant to ZR section 74-682. As part of the proposed action, ZR Section 74-682 would be amended to allow for the modification of loading controls for an institution occupying more than one zoning lot whose expansion was authorized under the 1971 legislation.

With discretionary approval of the proposed actions, HSS proposes the new construction of 137,869 SF of zoning floor area of new space in two locations: 50,998 SF of zoning floor area on the East/West Wing (the elevators servicing the East Wing would be constructed in the West Wing) to add the 9<sup>th</sup> through 11<sup>th</sup> floors with a roof-top mechanical equipment room in the East Wing and 86,869 SF of zoning floor area for a new 12-story River Building with a roof-top mechanical equipment room to be constructed on a platform within the air space over the FDR Drive along the north side of East 71<sup>st</sup> Street. Access to the River Building would be provided by walking through the second floor of the adjacent Caspary Building. There would also be a new pedestrian bridge constructed at the third floor level connecting the East Wing of the existing Main Hospital to the new River Building. The East Wing of the existing Main Hospital was constructed on a platform within the air space over the FDR Drive along the south side of East 71<sup>st</sup> Street in 1995, pursuant to a Special permit granted in 1992 by the City Planning Commission (C 910485 ZSM).

#### *Expansion Allowed Under the 1973 Agreement, and Subsequent Development*

In 2007, HSS added 41,531 SF of zoning floor area to the West Wing of the main hospital building, completing the 5<sup>th</sup> through 8<sup>th</sup> floors, and added a 9<sup>th</sup> floor, and a mechanical room on the 10<sup>th</sup> floor roof. HSS also added 9,644 SF of zoning floor area to complete the previously approved 8<sup>th</sup> floor of the East Wing of the main building. In conjunction with the expansion, HSS renovated 74,955 SF in the East Wing and West Wing of its existing Main Hospital Building at 535 East 70<sup>th</sup> Street (Block 1482, Lot 20), Caspary Building at 541 East 71<sup>st</sup> Street (Block 1483, Lot 23), and Belaire Building at 525 East 71<sup>st</sup> Street, floors 1-14 (Block 1483, Lot 33). ] The As-of-Right construction of the addition to the West Wing, the 8<sup>th</sup> floor of the East

Wing, and renovation of the existing Main Hospital Building, Caspary Building, and Belaire Building are not included in the proposed project since they were completed in 2007. This construction was accounted for in the build year background data of the EIS and is not part of the proposed project.

#### **D. Need for the Proposed Project**

The Hospital for Special Surgery maintains that it is an integrated specialty service campus dedicated to orthopedic surgeries, research, teaching, and clinical practices. The Hospital stated that it has a pressing need for additional modern and efficient space for patients and physicians to accommodate current and expected increased utilization rates and volume increases in surgeries. The proposed addition to the HSS Campus would allow HSS to expand operating room capacity, inpatient beds, ambulatory surgery, diagnostic imaging services, sports medicine rehabilitation, and physician offices to meet these increases in the number of surgeries performed and to continue its role as a leading teaching and research facility specializing in orthopedics.

HSS has confirmed that in order to meet its needs efficiently and it must continue to provide sufficient services, by continuing to operate as an integrated facility whose functions are co-located in one campus. This is so for several reasons. HSS states that they are a specialty hospital, which unlike a general tertiary care facility, does not have a large number of departments that could operate efficiently in a variety of locations because they deal with entirely different fields of medical treatment and results. Second, clinical research and patient care at HSS are joint undertakings; i.e., the same physicians who do clinical research are also treating patients. HSS believes that by separating those two (2) functions by expanding their patient care facilities at a location other than the existing campus and leaving research facilities at the campus would reduce the efficiency and the ability of their researchers and clinicians to interact. Separating the function could adversely affect the quality of their patient care and the ability to continue recruiting highly qualified staff.

HSS maintains that its operations are also closely integrated with the neighboring hospitals. HSS' physicians provide orthopedic staff for the Emergency Department at New York Presbyterian and Cornell Medical Center which are connected via a pedestrian bridge on the second floor and on the cellar level.

Furthermore, a portion of the air spaces over the FDR Drive were allocated to the hospital in accordance with the Agreement, as amended. The parcels assigned to the Hospital for Special Surgery are 3A, 3B and 3C of Block 1482, Lot 9020 these parcels include the subject property. Previously, the City demapped, eliminated and discontinued the remaining portion of East 70th Street below parcel 3B and allocated this portion of the street to the New York Presbyterian Hospital. The current proposal would allow for property identified in 1973 as appropriate for hospital purposes to be used in this manner. HSS asserts that the location of the proposed new River Building is a viable and perfectly fit location for the expansion project, given its proximity to the remainder of the HSS campus, the ability to share resources, and connect to operating and other HSS services above grade to provide comprehensive treatment from diagnosis to surgery to rehabilitation.

## **E. The Proposed Project**

The proposed project includes 137,869 SF of zoning floor area of new construction described above including the 50,998 SF of zoning floor area proposed to be constructed for the 9<sup>th</sup> through 11<sup>th</sup> floors of the East/West Wing and the 86,869 SF of zoning floor area new River Building proposed to be constructed on a platform over the FDR Drive. The build year for the proposed project is 2010.

The proposed project would provide the Hospital for Special Surgery with the additional space needed for modernization of the facility by expanding operating room capacity, inpatient beds, ambulatory surgery, diagnostic imaging services, sports medicine rehabilitation, and physician offices in a close proximity to the existing Buildings in order to maximize their operational capabilities. Expansion and modernization would allow the facility to accommodate high utilization and volume increases in surgeries and patients.

HSS asserts that the proposed River Building represents the last opportunity for the Hospital for Special Surgery to expand on its constrained campus, and is essential to the Hospital that it has the continued ability to serve the needs of its patients in a comprehensive manner. The twelve-story building contains only 86,869 square feet of zoning floor area, with floor plates ranging from approximately 9,400 SF on the lower four floors and 7,600 SF on floors five through twelve, in order to minimize visual impacts and reduce the bulk of the design. The small floor plate sizes limit the Hospital's ability to expand in an efficient manner, but in the Hospital's view reflect a balance between the Hospital's space needs today, the need to create flexibility within the building for changes in use, equipment, and technologies over time, and a desire to avoid undue conflicts with neighboring buildings.

The first four floors of the River Building have the largest floor plates, allowing for some flexibility in programming, now and in the future. As presently envisioned by the Hospital, the second floor (the first occupiable floor), will house lobby and reception areas (approximately 3,800 SF); a radiology unit for the Sports Medicine practice (approximately 4,600 SF), and vertical circulation and support space (approximately 1,000 SF). The next three floors, each 9,400 square feet, will house eight doctors' offices in the Sports Medicine practice, with the offices and administrative areas along the perimeter of the building. Circulation and building core space will occupy about 20% of the floor plate, and approximately ten to eleven examining rooms will be located in the interior. These floors provide a reasonable layout for medical suites and examining rooms, and are also the only floors in the building that would be able to accommodate a larger use in the future.

As stated by the Hospital, the programs on the smaller, upper floors of the Building will be more constrained. The 6<sup>th</sup> and 7<sup>th</sup> Floors are anticipated to house sports rehabilitation facilities serving the Sports Medicine practice in the lower floors of the River Building and the Hospital as a whole. The 8<sup>th</sup> Floor will be occupied by a radiology department for the Arthroplasty department. These uses include larger open spaces and work better in the 7,600 square foot floor plate than individual doctor's offices and examining rooms because circulation requirements are less. However, HSS stated that even for these floors circulation and vertical support areas will generally reduce the usable space to approximately 6,000 square feet.

The 9<sup>th</sup> through 12<sup>th</sup> Floors will house doctor’s offices and examining rooms (anticipated for Arthroplasty Department) similar to Floors 3 to 5. However, HSS affirmed that due to the smaller floor plate, the number of offices is reduced to five or six per floor (rather than eight) and the doctor’s offices are smaller in size than those on the lower floors, reducing flexibility. The smaller floor plates on the upper floors were created in order to minimize visual impacts and reduce the bulk of the design. In addition HSS has stated that, the number of examining rooms per floor is reduced to six or seven (rather than ten or eleven). Circulation and building support occupies a substantial portion of each of these floors, reducing the portion of the floor available for program to approximately 5,000 – 5,200 square feet.

Overall, the proposed reduction in floor plate size, as determined by HSS, from 9,600 to 7,600 square feet already included in the program translates into 30 to 40% reduction in program per floor. The River Building as proposed by HSS utilizes almost all of the floor area available on the zoning lot, and accordingly any reduction in floor plate size will inevitably result in a smaller program for the River Building. This is an unacceptable result for a Hospital committed to responding to its patient’s needs for years to come.

It should be noted that as designed, the River Building will share a common side lot line with the adjoining Edgewater building for a width of only approximately 5 feet, and for only the first four stories of the River Building (overlapping with approximately 5 stories of the Edgewater building). The minimal overlap has been designed to avoid conflict with windows in the adjoining Edgewater residential building, though the wall will be adjacent to four balconies located on the southeast corner of the building. This design reflects a practice established with the Caspary Research Building to the River Building’s west, where the Hospital voluntarily set part of its building back from the common lot line to allow the Edgewater residential building to locate windows along a side lot line, a condition that typically does not exist in Manhattan. HSS declares that both the configuration of the Building and its design will allow them to continue to further its core mission of serving its patients, and to do so in a manner that minimizes its effect in the surrounding neighborhood.

The Hospital for Special Surgery has a certified capacity of 162 patient beds and an estimated 1,773 employees. The new construction permitted under the Agreement, as amended, and the subsequent City approvals, would result in a net gain of twenty-six (26) new patient beds and an estimated 464 employees by 2010.

**Table ES-1. Proposed Development.**

<b>Proposed Project</b>	<b>Zoning Square Footage of the Proposed Project Requiring Discretionary Actions</b>
East/West Wing (9 <sup>th</sup> – 11 <sup>th</sup> Floors)	50,998 SF of zoning floor area
New River Building	86,869 SF of zoning floor area
<b>TOTAL</b>	<b>137,869 SF of zoning floor area</b>

## **F. Environmental Impacts of the Proposed Project**

### ***Land Use, Zoning, & Public Policy***

***The proposed project would not have a significant adverse impact on land use, zoning, or public policy.***

#### ***Land Use***

A portion of the project site is currently used as a community facility by the Hospital for Special Surgery, and the remainder of the project site is located in air space over the FDR Drive, as well as a portion of the East River Esplanade where the columns to the new River Building platform would be placed. The predominant land uses within the ¼-mile radius study area are community facility uses, residential uses, recreational uses, and some commercial uses. A significant number of the community facility uses are medical and research institutions to the south and west of the project site, including all of the facilities located over the FDR Drive to the south of the Site. The East River Esplanade along the waterfront is located to the east of the project site.

The proposed project is an expansion of an existing medical/community facility, and would not conflict with existing land uses. It is expected that the existing community facility, residential and recreational uses in the study area described above would remain largely unchanged. The proposed project would not have significant adverse land use, zoning or public policy impacts.

#### ***Zoning***

The project site is located in an R-9 zoning district, allowing residential use and community facility use. The maximum floor area ratio (FAR) for an R9 district is 10.0 for community facility use and 7.52 for residential use, with the ability to increase the maximum FAR of 12.0 through a plaza bonus. Certain planes of air spaces over the public streets in the area were demapped and allocated to various non-profit medical institutions in accordance with the Agreement, as amended.

The proposed project would not require a change of zoning. It would require a Special Permit to construct the new River Building in air space over the FDR Drive and to modify loading requirements as well as a modification to ZR Section 74-682 to allow for modification of loading requirements, and another Special Permit for the modification of the previously approved Special Permit (C910485 ZSM) approved February 24, 1992 which allowed three (3) additional stories on the East Wing in the air space over the FDR Drive. The proposed project is consistent with underlying zoning and its location is contemplated by existing zoning and would not result in any significant adverse impact to zoning. The floor area associated with the enlargement and new addition is 137,869 SF of zoning floor area.

#### ***Public Policy***

The expansion and modernization of the hospital would be consistent with existing land uses and implement public policy by conforming to the City of New York's plan for medical and research institutions in the surrounding area as indicated by the Agreement, as amended.

#### ***Socioeconomic Conditions***

***The proposed project would not have a significant adverse impact on socioeconomic conditions.***

The proposed project would not result in the displacement of residences or businesses or result in a new development substantially different from existing uses. The proposed project would not result in impacts to socioeconomic conditions. Therefore, an analysis of Socioeconomic conditions is not required. The proposed project would create a significant new patient care facility and improve existing patient care to those needing specialized orthopedic surgery, would generate significant beneficial employment, and fiscal benefits for New York City and State.

### **Community Facilities and Services**

***The proposed project would not have a significant adverse impact on community facilities and services.***

The proposed project would not have a significant adverse impact on community facilities and services. The proposed non-residential project would not trigger the thresholds to require analysis for public schools, libraries, outpatient health care facilities, or publicly funded daycare facilities. Direct effects on police and fire protection services were examined for this EIS, and no significant adverse impacts to police or fire protection services are expected.

The role of the Police Department in providing effective, efficient service is not expected to be adversely affected by the proposed project. Therefore, no adverse impacts to police protection services are anticipated to result from the proposed project. Fire protection services are expected to remain adequate to meet the demands of the HSS additions and surrounding neighborhoods. Similarly, the project is for a hospital and is in an area well served by a number of hospital facilities and emergency response times and services would not be significantly adversely affected. Therefore, no adverse impacts to hospital services are anticipated to result from the proposed project.

### ***Benefits to Community Facilities & Services***

The proposed project would benefit community facilities and services because it would allow HSS to maintain state-of-the-art research and treatment facilities and continue providing the nation's leading orthopedic and musculoskeletal treatments.

### **Open Space**

***The proposed project would not have a significant adverse impact on open space resources due to indirect or direct impacts.***

The study area contains ten (10) publicly accessible open spaces, totaling approximately 6.196 acres, of which 2.57 acres are for active pursuits and 3.626 acres are for passive recreation (see Table 5-2 and Figure 5-1). Seven (7) of the ten (10) open spaces are plazas and residential plazas, some of which provide sitting areas, landscaped plantings, artwork, fountains, pools, and bicycle racks. The seven (7) plazas range in size from 0.06 to 0.25 acres and comprise 26% of the passive open space in the study area. The remaining three (3) of the ten (10) open spaces are parks or esplanades. An open space survey was conducted in July 2008 to determine the open spaces utilization rates, cleanliness, and user age groups.



There are effects on open space resources as a result of the proposed project; however the effects do not result in significant adverse impacts. The quantitative analysis indicated a decrease (1.8%) in the ratio of passive open space for daytime workers, and therefore, per the CEQR Technical Manual, a qualitative analysis of the open space resources within the study area was conducted. The results of the qualitative analysis of open space resources in the study area concluded that the increased demand on open space would be reduced by a number of factors, including the proximity of other open spaces located within a reasonable walking distance of the project site, but outside the study area. The East River Esplanade also provides an expansive open space because the park extends north and south beyond the study area for a considerable distance. These additional resources serve to reduce the overall demand for open space resources for the area.

A portion of the southeastern view of the East River and Queensboro Bridge from the East 72<sup>nd</sup> Street Overlook Park would be partially obstructed by the new River Building (see Chapter 8 “Urban Design and Visual Resources”). However, this would not be significant, as all additional views to the north, east, and west would not be affected, and views to the south would be preserved from other publicly accessible locations in the immediate vicinity, such as the East 71<sup>st</sup> Street pedestrian bridge/ramp and the East River Esplanade.

Four (4) V-shaped foundation columns would be placed in the Esplanade in between the ramps of the E. 71<sup>st</sup> Street switchback ramp of the pedestrian bridge which would cause the ramp to be unusable during construction. No permanent physical loss in open space would occur as a result of the proposed project since the support columns would be placed between the existing space between the two (2) portions of the switchback ramp of the pedestrian bridge and would not change the usable width of the Esplanade.

During installation of the columns and while the footings are being excavated, the Esplanade would be closed between approximately E. 70<sup>th</sup> Street to just past the midblock between E. 71<sup>st</sup> Street and E. 72<sup>nd</sup> Street. HSS would make every effort to limit the closure to four (4) to six (6) months and the Esplanade would remain open on weekends when construction activities and safety would permit. Fencing and temporary protection during construction activities would ensure safety to users of the Esplanade. Restoration of the Esplanade would commence as early as possible after construction of the River Building and would include plantings, lighting, benches, and paving. Since the switchback ramp would be unusable during construction access to the E. 71<sup>st</sup> pedestrian bridge would be re-routed to a temporary ramp during construction in order to preserve access along the Esplanade south of E. 71<sup>st</sup> Street. Detour signage would be installed at the last entrance/exit to the Esplanade north of the blocked area (E.78<sup>th</sup> Street) to alert Esplanade users that there is no exit south of this point and that there is a “dead-end” ahead and to direct pedestrians to the temporary ramp.

The proposed action would result in a short term (approximately six month) closure of a portion of the East River Esplanade, during construction. This would be considered temporary or of short or intermittent duration and would not be a significant adverse impact. Unforeseen and uncontrollable events are always possible in construction, such as a worker strike. HSS will continue to make every effort to limit closure of the esplanade to between four (4) and six (6) months. As mitigation, if the Esplanade remains closed for more than six months, HSS would

allocate financial resources to the City for maintenance of the Esplanade, in the amount of \$10,000 per each additional month the Esplanade remains closed.

No significant shadow impacts are expected as a result of the proposed project since only incremental shadows would fall on the East River Esplanade, Belaire Plaza, and the 72<sup>nd</sup> Street Overlook Park for limited periods of time. See Chapter 7 (Shadows).

## **Shadows**

*The proposed project would not result in a significant adverse shadow impact.*

The proposed project would result in minor incremental shadows over portions of the East 72<sup>nd</sup> Street Overlook Park at limited times throughout the year, principally near the spring and vernal equinox. At other times of the year, shadows from the proposed project do not reach the East 72<sup>nd</sup> Street Overlook Park, or the East 72<sup>nd</sup> Street Overlook Park is already experiencing shadows from existing buildings. The incremental shadows occurring in the spring and autumn would occur for a limited period in the afternoon, would travel across the East 72<sup>nd</sup> Street Overlook Park so that shadows would not occur for extended periods over any one spot, would for most of this time cover only a portion of the East 72<sup>nd</sup> Street Overlook Park, and would not be of such a duration as to result in a significant adverse impact.

No incremental shadows would occur on the Belaire Plaza above those cast by existing buildings, and therefore no significant adverse impacts to this resource would occur.

Incremental shadows do occur on the East River Esplanade. However these additional shadows cover only a portion of this resource, are of limited duration, and for the most part are cast on areas used for active recreation without sun sensitive features. The shadows cast are also typical of the types of shadows experienced up and down the Esplanade, when the tall buildings of the Upper East Side cast shadows on this resource. The Esplanade is in full sunlight from sunrise to mid-afternoon in all analysis periods, and the incremental afternoon shadows occurring as a result of the project would not significantly adversely impact this resource.

## **Historic Resources**

*The proposed project would not have a significant adverse impact on historic resources.*

The Landmarks Preservation Commission has determined there would be no significant adverse impacts to historic resources (archaeological or architectural) from the proposed project. No archeological resource would be affected by the proposed project. In addition, the architectural resources identified within the 800-foot study area are not in the immediate vicinity of the project site. The proposed project would not cast shadows on these resources, and construction in connection with the proposed project would not have the potential to affect these resources. Also, because there would be no blasting for the new River Building and demolition involved is atop the East Wing, the historic sites in the primary study area would not be adversely impacted. According to the New York State Office of Parks, Recreation and Historic Preservation (See Appendix D), the proposed project would have no impact upon cultural resources in or eligible for inclusion into the State and National Registers of Historic Places.

## **Urban Design and Visual Resources**

***The proposed project would not result in a significant adverse urban design or visual resources impact.***

### ***Urban Design***

The existing facility at the Hospital for Special Surgery consists of the 8-story and 4-story West Wing of the Main Hospital, the 7-story East Wing of the Main Hospital, constructed on a platform in the air space over the FDR Drive between East 70<sup>th</sup> and 71<sup>st</sup> Streets; the 8-story Caspary Research Building; and the 39-story Belaire Building. An existing public pedestrian bridge over the FDR Drive on the north side of East 71<sup>st</sup> Street provides access to East River Esplanade along the waterfront area. With the proposed actions, the East Wing building would be 10-stories and the new River Building would be 12-stories including four (4) approximately 9,600 SF and eight (8) 7,600 SF floor plates. These forms and envelopes are consistent with development throughout the area including development on the platform to the south of HSS.

The proposed project would result in new construction of a building that is compatible with others in the surrounding area in terms of height, bulk, form, setbacks, size, and arrangement. No changes would be made to alter the existing grid pattern and large superblocks of the study area. The proposed project would change block form by constructing a platform in the air space that would be elevated 21 feet over the FDR Drive. This change in block form is consistent with the blocks to the south, where platforms over the FDR Drive have created similar blocks. This is the form contemplated and authorize by the 1971 legislation and Agreement. The proposed project would require street eliminations, discontinuances, closings and conveyances from the City of New York to erect columns and footings on the East River Esplanade. The placement of the support columns for the proposed River Building would meet the requirements of the Agreement, in that their placement would not interfere with pedestrian use and enjoyment of the Esplanade, restrict light and air to the esplanade, detract from the visual quality of the waterfront area, or impede vehicular use of the FDR Drive, E. 70<sup>th</sup> Street or E. 71<sup>st</sup> Street. The proposed project would not affect street hierarchy, the street wall or other streetscape elements and would not introduce any new curb cuts. In addition, the proposed building would be similar in design aspects, such as platform placement, height, arrangement, and column placement, to the other developments located to the south of the site above the FDR Drive. However, the new River Building, would include an additional sense of openness along the East River Esplanade, due to the design of the support columns and integration of them into the existing Pedestrian Bridge that connects East 71<sup>st</sup> Street to the East River Esplanade. Based on the above, the proposed project would not result in significant adverse impacts to urban design.

### ***Visual Resources***

The waterfront area along the East River Esplanade is a visual resource is within the study. The support columns for the River building's platform would partially block views of the East River waterfront from various perspectives on the East River Esplanade when standing to the west of the public pedestrian bridge ramp. However, the V-shaped design of the columns would ensure visibility, light and air, and accessibility to and of the East River Esplanade as required by Agreement. The incrementally blocked views of the East River would be minimal and would not be significant.

Additionally, visual access to the waterfront would be incrementally blocked looking north from atop the public pedestrian bridge as it crosses the FDR Drive and when looking south from the East 72<sup>nd</sup> Street Overlook. The views to the east, west, and north would not be affected. Views of the waterfront and the Queensboro Bridge from the East 72<sup>nd</sup> Street Overlook looking southeasterly are already partially blocked by the East Wing of the existing hospital building and the public pedestrian bridge from East 71<sup>st</sup> Street over the FDR Drive. The incremental reduction of visual access from this location would not be significant, because views in this direction from other public locations in the immediate vicinity would be preserved.

The addition of a pedestrian bridge from the proposed River Building to the East Wing of the existing main hospital building would additionally partially block views when looking east from East 71<sup>st</sup> Street. However, it would not additionally block the views of the water and would not result in significant impacts. The public pedestrian bridge from East 71<sup>st</sup> Street over the FDR Drive would continue to provide access to the East River Esplanade would provide additional pedestrian views of the East River and attract the public to the waterfront.

Views of the New York City skyline from Roosevelt Island, or as would be observed by water transportation passengers in the East River, would not be altered significantly by the proposed project (see Figure 8.2 - Rendering, Northeast Elevation).



1 BUILDING RENDERING LOOKING SOUTHWEST  
SCALE: 1/8"

**Figure ES-1. HSS Building Rendering Looking Southwest.**

### **Neighborhood Character**

***The proposed project would not have a significant adverse impact on neighborhood character.***

The immediate neighborhood of the proposed project is developed with a mix of residential, residential with commercial ground-level space, transportation, commercial, manufacturing and institutional, primarily hospitals, buildings. In general, the surrounding neighborhood is developed with a mix of attached institutional and residential apartment buildings with ground-level commercial space. The following institutions are present in the secondary study area: Rockefeller University, New York Presbyterian Hospital, Weill Cornell Medical College, Memorial Sloan-Kettering Cancer Center, and Hospital for Special Surgery. The FDR Drive and East River Esplanade are located to the east of the project site.

The proposed project would support the existing neighborhood character by supporting the major land use of the area, medical facilities. The creation of the new River Building over the FDR Drive would complement the existing HSS Main Hospital-East Wing and NYPH-CMC structures over the FDR Drive. The socioeconomic conditions of the area would be benefited by

the increased employment from the proposed project. The additional traffic, transit, and pedestrian trips in the study area would be limited and would not result in significant adverse impacts. The new River Building would block southeastern views of the East River from the 72<sup>nd</sup> Street Overlook Park which is already partly obstructed by the Main Hospital-East Wing and the public pedestrian bridge from E. 71<sup>st</sup> Street over the FDR Drive. The resulting minor reduction in the available views of the East River, overall, would not constitute a substantial direct change to a visual feature and would not result in any significant adverse impacts. No historic resources are located within 90' of the proposed project and no potential for construction related impacts is expected.

Overall, rather than changing the character of the area, the proposed project will reinforce existing uses and will allow the Hospital for Special Surgery's campus to remain concentrated along the eastern part of East 71<sup>st</sup> Street. The creation of the new River Building over the FDR Drive would complement the existing HSS Main Hospital-East Wing and NYPH-CMC structures over the FDR Drive. Therefore, the proposed project would be similar to existing development patterns and complement existing uses that characterize the area.

### **Natural Resources**

*The proposed project would not have a significant adverse impact on natural resources.*

The project site is urban land covered with paving and structures. The project site is located near the East River. There are trees and a few landscaped unpaved areas. The proposed project would not deprive any species of plant or animal access to natural resources. The site activities would not disrupt surface or subsurface conditions that may effect nearby natural resources.

### **Hazardous Materials**

*The proposed project would not have a significant adverse impact with respect to hazardous materials.*

A site history review of Sanborn maps indicated that there may be potential hazardous materials issues related to the Garbage Dump that existed in 1892 in the location of the pilings for the proposed new River building and the Auto Sales and Service that existed in 1951 in the location of the existing Caspary Research building.

A review of federal and state environmental databases indicates that the Hospital for Special Surgery has an active registered aboveground storage tank (AST). A site inspection confirmed that the AST is present in the basement of the West Wing, is used for the storage of diesel fuel for the emergency generator, and is in good condition with no evidence of leaks. The review of federal and state environmental databases indicates that HSS is registered as a small quantity hazardous waste generator facility and has generated spent non-halogenated solvents. Also, the Hospital for Special Surgery received one (1) violation and achieved regulatory compliance on the same date that the violation was issued. The violation is no longer of concern.

The future with the proposed project involves new construction and the installation of four (4) support columns in the East River Esplanade in the area surrounded by the 71<sup>st</sup> Street pedestrian

bridge and five (5) support columns located parallel with the existing Caspary Building along the west sidewalk of the FDR drive. New York City Department of Environmental Protection's (DEP) review of the Phase I made recommendations for the conduct of a Phase II Environmental Site Assessment in a letter dated August 22, 2007 (see Appendix D), which was conducted on June 29, 2008. The Phase II testing revealed the presence of semi-volatile organic compounds and heavy metals in exceedence of the NYSDEC standards, HSS identified measures necessary to avoid any potential for significant adverse impacts with respect to hazardous materials and public health in a Remedial Action Plan and Construction Health and Safety Plan, submitted to DEP for its review and approval. The Remedial Action Plan (RAP) outlines the following remedies for the contamination:

- The RAP will include the mobilization of excavation equipment to the site, the excavation of impacted soil; air monitoring, the collection of soil samples for field screening and laboratory analysis if deemed necessary; the proper transport and disposal of contaminated soil.
- Excavation for the support columns will be completed to a depth of approximately 35 feet, which is well into bedrock. The soil from the proposed excavation will be loaded into trucks and removed from the site. Should screened soil be stockpiled prior to removal from the site, it will be covered by heavy layers of polyethylene sheeting. The stockpiles will be covered by layers of polyethylene sheeting or appropriate impervious cover that will be secured so as to prevent exposure of the soil to the elements and to allow for the collection of runoff. Any runoff liquid generated during the remedial activities will be containerized, analyzed and properly disposed of. If use of in-place and stockpiled soil is planned, permission will be obtained from NYC DOHMH in accordance with NYCRR 360-1.15. Prior to excavating the site, a full waste characterization for the disposal facilities will be conducted in order for the soil to be accepted at an appropriate disposal facility.
- If any petroleum impacted soils are encountered during the excavation/grading activities, the impacted soils will be removed and properly disposed of in accordance with all federal, state and local regulations.
- If de-watering into NYC storm/sewer drains will occur during the proposed construction project, an NYCDEP Sewer Discharge Permit will be obtained prior to the start of any de-watering activities at the site. For the proposed project, groundwater sampling for NYCDEP Sewer Discharge Criteria will be completed in any areas where de-watering is expected. NYSDEC will be notified of any groundwater contamination. Any further requirements from the NYSDEC will be met.
- Air monitoring will be conducted in accordance with the approved CHASP using dust monitors and a photoionization detector (PID), and will take place in accordance with the New York State Department of Health guidance values. Monitoring for background levels will take place at the start of each work day. The monitors will then be moved to the downwind side of any ongoing work to monitor for excessive levels of dust or flammable gasses. Dust suppression activities will be implemented if conditions indicate

that dust may become problematic. The PID will be used to monitor for volatile vapors. The data collected from the air monitoring events will be included in the P.E. certified Closure Report.

- Soil characterization will be conducted on site in order to satisfy disposal facilities' requirements for facility acceptance. Once finding a waste facility the soil will be loaded for transport to the disposal site. In the event that certain contaminated soils are saturated and free draining the use of roll-off containers with built-in sumps will be used to collect the liquid and will be utilized to transport the contaminated soils for treatment or disposal to an appropriately permitted facility.
- The final disposition of contaminated materials will be in accordance with all applicable federal state and local statutes and regulations. An appropriate disposal facility will be selected based on the results of laboratory analysis for disposal parameters, distances to facility and cost of disposal. DEP will be notified in writing (five days prior to the removal of any contaminated materials) with the names of the waste transporters and disposal facilities and their respective licenses and permits for review. A waste facility has not been chosen at this time.
- The excavation equipment will be visibly brushed clean upon completing excavation of the contaminated area and handling of contaminated soils to minimize the wash water generated at the site and requiring off-site disposal.
- Dust suppression activities will be implemented if conditions indicate that dust may become problematic during the grading activities at the site. The area excavated for the support columns will be covered by concrete columns and a paving system or concrete at least six inches in thickness.
- Proper capping with concrete will be performed around the support columns. Thus no uncapped areas will result from the proposed excavation activities of the support columns.
- Upon completion of all DEP requested remedial requirements, a P.E. certified Remedial Closure Report will be submitted to DEP. This report will demonstrate that all remedial activities have been implemented. The report will include all transportation manifests, soil disposal/recycling certificates, and air monitoring data logs. Once the P.E. Certified Remedial Closure Report is received NYCDEP will issue a Notice of Satisfaction (NS) letter to the New York City Department of Buildings. Upon receipt of the NS, the applicant is free to apply for a Certificate of Occupancy.

Furthermore, operations of the Hospital in the new building would not generate any new hazardous materials. Although the new River Building would include diagnostic imaging (radiology services), state-of-the-art digital technology would be used as opposed to film technology which uses chemicals to process the film. Waste disposal would occur in accordance with all applicable regulations and consistent with the manner in which the current hospital operates.



Based on the above and HSS' commitments to the City, the proposed actions would not result in significant adverse impacts with respect to hazardous materials.

### **Waterfront Revitalization Program**

***The proposed project would not have a significant adverse Waterfront Revitalization impact.***

There are ten (10) Waterfront Revitalization Program policies relevant to the proposed project. The DCP Waterfront and Open Space Division, as advisors to the State Coastal Management Program along with the City Coastal Commission, is responsible for determining the proposed project's consistency with the Waterfront Revitalization Program policies. The proposed project is consistent with the policies of the Waterfront Revitalization Program and would therefore, not have significant adverse impacts to the waterfront.

### **Infrastructure**

***The proposed project would not have a significant adverse impact on public infrastructure.***

### **Water Supply**

According to the New York City Department of Environmental Protection (DEP), there are currently no problems with the water distribution or pressure in the area. It is anticipated the proposed project would increase the total water usage by 48,600 gpd to a total of 139,796 gpd for HSS. As the subject site is not located in a district where water pressure is low and the proposed project is not of a size that would generate an exceptionally large water demand it is expected that the existing municipal and private services have the capacity to adequately meet the minor increases in demand for water resulting from the proposed project. The increased demand resulting from the proposed project would not affect the New York City water supply and distribution system and will not result in a significant adverse impact.

### **Sanitary Sewage**

The HSS campus is located within the Newtown Creek Wastewater Pollution Control Plant (WPCP), according to DEP, with a rated design capacity of 310 mgd. The 2002 average dry weather flow of the Newtown Creek WPCP is 216 mgd and the average total flow is 229 mgd. It is anticipated the proposed project would increase the total sewage generation by 48,600 gpd to a total of 139,196 gpd for HSS. The proposed project is not of a size that would generate an exceptionally large incremental wastewater flow, it is expected that the existing municipal and private services have the capacity to adequately meet the new increases in wastewater treatment.

### **Stormwater Disposal**

No significant change is expected in the amount of impervious surface area on the subject site as the new platform built for the new River Building will be primarily located over the FDR Drive. In addition, the proposed project does not correspond with the requirements for an assessment of stormwater disposal, according to Section 3L-230 of the CEQR Technical Manual. Therefore, no significant adverse impact on stormwater disposal is expected and no analysis of stormwater was conducted.

## **Solid Waste and Sanitation Services**

***The proposed project would not have a significant adverse impact on public sanitation services.***

### ***General Waste***

All of HSS's general waste is removed by private carting companies. No waste is picked up by the NYC Department of Sanitation. Therefore an analysis of general solid waste was not required, and no significant impact would occur.

### ***Medical Waste***

Currently biohazardous medical wastes are stored in the waste storage area on the first floor of the Main Hospital-West Wing of the existing Hospital for Special Surgery. All of HSS's medical waste is removed by private carting companies. Regulated medical waste is handled and disposed according to the procedures and regulations governed by City and state law. The medical waste generated by the proposed project would not significantly increase the waste generated by HSS and there would be no effect on the City's municipal waste handling system, because private carting companies handle HSS's medical waste.

## **Energy**

***The proposed project would not have any significant adverse energy impact.***

The proposed project would be constructed in compliance with the New York State Energy Conservation Code, which reflects State and City energy policy. The energy supplier (Con Edison) will be notified of the potential increase in energy usage and location of the proposed project to confirm the suitability of the additional load and determine if extensions or upgrading of energy transmission facilities would be necessary. No significant adverse impacts to energy supply are expected from the proposed project; therefore an energy assessment was not required.

## **Traffic and Parking**

***The proposed project would not result in significant adverse impacts with respect to traffic and parking.***

### ***Traffic***

The result of the traffic analysis indicates that hospital activities are significantly lower during the weekends than the weekdays. The project generated vehicular trips and pedestrians would be approximately 30% lower during the weekends than the weekdays. Based on the ATR counts in the study area, the background traffic volumes on Saturday were 78% of those on the weekday and the background traffic volumes on Sunday were 73% of those on the weekday. Therefore, the weekend traffic analysis was not required.

The temporal distribution, modal split, and vehicle occupancy factors for the employees were based on the Memorial Sloan-Kettering Cancer Center Rezoning FEIS, 2001 (see Table 16-3) as were the trip generation rate for outpatients and visitors. The proposed project would generate nine (9) inpatients trips per day and the 510 outpatients trips/visitors trips per day. The total project generated inpatients, outpatients, and visitors would be 519 per day (1,038 person trips

per day). The trip generation analysis is presented in Table 16-4. The project generated person trips would be 280,242 and 352 for the AM, midday and PM peak hours, respectively.

The capacity analysis of the fourteen (14) intersections finds that there would be no significant traffic impacts resulting from the incremental trips from the proposed project and therefore, no mitigation measures are warranted as a result of the proposed action.

### ***Parking***

ECEA conducted a survey of on-street parking regulations and off-street parking capacities and utilization in the study area. The study area is an approximately 1,000 foot radius, which is bounded by East 74<sup>th</sup> Street to the north, Second Avenue to the west, East 67<sup>th</sup> Street to the south and FDR Drive to the east. There are twenty-five (25) public parking garages with a capacity of 2,660 spaces in the study area (see Table 16-7). The average garage utilization for the 2007 Existing condition is approximately 76.8%, 80.6% and 79.7% for the AM, midday and PM peak hours, respectively. The available spaces are 618, 517 and 541 for the AM, midday and PM peak hours, respectively. In 2010 without the proposed project, utilization increase on parking would increase to 0.8% in the midday and less in other hours.

The proposed project would demand approximately 108 spaces. Total parking demand would be 2,283 spaces which are below the capacity of 2,660 spaces. Therefore, no significant parking impact is anticipated from the proposed project.

### **Transit and Pedestrians**

***The proposed project would not result in significant adverse impacts to mass transit or pedestrian traffic.***

#### ***Transit***

The proposed project would generate ninety-one (91) (86 inbound and 5 outbound), twenty-three (23) (15 inbound and 8 outbound) and 107 (25 inbound and 82 outbound) subway riders for the AM, midday and PM peak hours, respectively. These project-generated subway riders would be distributed to the #6 subway line. The maximum project generated subway demand would be 107 riders in the PM peak hour. The project generated subway riders are below the CEQR screening level of 200 riders. The proposed project would not result in a significant adverse impact on subway services. Therefore, a detailed subway analysis is not required.

The proposed project would generate thirty-six (36) (34 inbound and 2 outbound), twenty (20) (13 inbound and 7 outbound) and forty-eight (48) (15 inbound and 33 outbound) bus riders for the AM, midday and PM peak hours, respectively. These project-generated bus riders would be distributed to available bus services: M15, M30, M31, M66 and M72. The M31 bus line is available on York Avenue which is adjacent to the project site. The M15 uptown bus line is available on First Avenue and the M15 downtown on Second Avenue which is located one and two blocks west of the project site, respectively. The M30 and M72 cross-town buses are available on East 71<sup>st</sup> Street which is adjacent to the project site. The M66 cross-town bus is available on East 68<sup>th</sup> Street which is three blocks south of the project site. The maximum project generated bus demand would be forty-eight (48) riders in the PM peak hour, which is well below the CEQR screening level of 200 bus riders identified as requiring a quantitative

analysis to determine the potential for impact. This limited increase would not leave any appreciable effects on bus service and would not result in a significant adverse impact on bus service.

### ***Pedestrians***

A majority of the project generated pedestrians would get to the site through the intersection at York Avenue and East 71<sup>st</sup> Street. Pedestrian analyses for the mid-block walkways, corners and crosswalks at this intersection were conducted in accordance with the methodologies presented in the 2000 Highway Capacity Manual. According to the standards for determining significant adverse pedestrian impacts, no significant adverse impacts for the sidewalks, corners or crosswalks would result from the proposed project.

The proposed action would result in the placement of support columns for the new River Building platform in-between the two parts of the switchback ramp immediately east of the FDR Drive that connects to the pedestrian bridge over the FDR Drive. The installation/construction of the support columns would require the temporary closure of the ramp leading to the pedestrian bridge over the FDR Drive. Access to the E. 71<sup>st</sup> pedestrian bridge via the E. 71<sup>st</sup> Street pedestrian ramp would be re-routed to a temporary ramp during construction in order to preserve access along the Esplanade south of E. 71<sup>st</sup> Street. Detour signage would be installed to direct pedestrians to the temporary ramp, and no significant adverse impact would occur.

### **Air Quality**

***The proposed project would not result in significant adverse impacts to air quality impact from mobile sources or stationary sources.***

#### ***Mobile Sources***

In the Build condition the project generated vehicle trips would be below the CEQR Technical Manual screening level of 100 vehicular trips; therefore, no detailed intersection analysis is required. A refined mobile source air quality analysis was performed between completion of the DEIS and this FEIS for the emission redistribution from traffic induced by the platform over the FDR Drive. The analysis indicated that the highest 1-hour total concentration is 8.9 ppm (the background concentration of 2.2 ppm plus the analysis concentration of 6.7 ppm) at Receptor 39 and the highest 8-hour total concentration is 5.3 ppm (the background concentration of 1.5 ppm plus the analysis concentration of 3.8 ppm) at Receptor 40 from the line source analysis. The one-hour and eight-hour CO levels for the Build Condition are predicted to be below the respective NAAQS standards of 35 ppm and 9 ppm.

In addition to the NAAQS, the City of New York applies a de minimis impact criterion to estimate impacts on air quality from the proposed project. The analysis results indicate that the de minimis criterion would not be exceeded. Therefore, the proposed projects new platform over the FDR Drive would not result in significant air quality impacts.

*Stationary Sources*

The proposed building would use steam for space heating, which is supplied through the New York Hospital by Con Edison. No pollutant emissions would occur from the project site. The proposed new building would not have any laboratory hood exhaust vents. Therefore, no air quality impacts are anticipated from the project site to the adjacent buildings. According to the information provided by the New York City Department of Environmental Protection (NYC DEP), there are no emission sources within the 400-foot study area. No significant adverse air quality impacts are anticipated from sites adjacent to the project building.

**Noise**

***The proposed project would not have a significant adverse noise impact.***

*Stationary Sources*

The proposed project will be built and operated in compliance with the New York City Noise Code. There would be no stationary sources introduced by the proposed project that would generate significant noise, and no significant adverse impacts are anticipated.

Any noise resulting from construction of the proposed project would be temporary and short-term. After erection of the framework and shell, the majority of the buildings would be enclosed and noise levels related to on-site construction activities would be significantly reduced. Therefore, no significant adverse noise impacts are expected from the construction of the proposed project.

*Mobile Sources*

The results of the traffic study indicate that there would be no doubling of passenger car equivalents (PCE's) and therefore there would be no significant increase in mobile source noise from the proposed project.

**Construction Impacts**

***The proposed project would pose the potential for a temporary but significant adverse construction impacts to open space. No other significant adverse impacts due to construction are anticipated.***

Construction of the proposed project would be completed in 2010. The addition to the Main Hospital-East Wing and construction of the River Building would be built in one (1) phase. The construction of the River Building would involve the following components: remediation, foundations, platform construction, building structure and exterior, Esplanade restoration, and new building interior. Construction of the proposed project may be temporarily disruptive to the surrounding area, in particular to access along the East River Esplanade for the first four to six months of construction.

The construction of the proposed project would create significant beneficial employment and fiscal benefits for the city and state. All of the streets affected and FDR Drive would be accessible to emergency vehicles and available for emergency access. Portions of the Esplanade would be temporarily closed during construction. During installation of the columns and while

the footings are being excavated, the Esplanade would be closed between approximately E. 70<sup>th</sup> Street to just past the midblock point between E. 71<sup>st</sup> Street and E. 72<sup>nd</sup> Street. HSS would make every effort to limit the closure to four (4) to six (6) months and would remain open on weekends when construction activities and safety would permit the Esplanade to be open. Approximately four (4) foundation columns would be placed in the Esplanade in between the ramps of the E. 71<sup>st</sup> Street switchback ramp of the pedestrian bridge which would cause the ramp to be unusable during construction. Access to the E. 71<sup>st</sup> pedestrian bridge via the E. 71<sup>st</sup> Street pedestrian ramp would be re-routed to a temporary ramp during construction in order to preserve access along the Esplanade south of E. 71<sup>st</sup> Street. Detour signage would be installed at the last entrance/exit to the Esplanade north of the blocked area (E. 78<sup>th</sup> Street) to alert Esplanade users that there is no exit south of this point and that there is a “dead-end” ahead and to direct pedestrians to the temporary ramp. Fencing and temporary protection during construction activities would ensure safety to users of the Esplanade. Restoration of the Esplanade would commence as early as possible after construction of the River Building and would include plantings, lighting, benches, and paving.

Unforeseen and uncontrollable events are always possible in construction, such as a worker strike. HSS will continue to make every effort to limit closure of the esplanade to between four (4) and six (6) months. In the event that, due to unforeseen circumstances the Esplanade remains closed longer than six (6) months, there would be the potential for significant adverse impacts to the open space. As mitigation if the Esplanade remains closed for more than six months, HSS would allocate financial resources to the City in the amount of \$10,000 per month, for each month the Esplanade remains closed for maintenance of the Esplanade.

No construction impacts are expected on listed or eligible for listing historic resources.

An increase in truck traffic, construction workers’ private autos, and construction equipment to and from the site during the construction period is anticipated. Given typical construction hours, worker trips would occur during off-peak hours and would not significantly increase the traffic during peak hours. In addition, the increase in traffic is not anticipated to be significant, due to its temporary nature. Trucks would travel designated truck routes to and from the site, and would get permits for overweight/oversized trucks. Sections of the FDR Drive near the project site would be narrowed during construction. Lanes on the FDR Drive have been similarly narrowed in the past for other projects and during the Phase II activities which were done in accordance with all DOT requirements and stipulations, and had been determined to have modest impact on capacity and level of service.

All construction related air quality effects would be of a relatively short duration, and minimized through usual and customary construction techniques which have been proven to be effective in minimizing any air quality related issues. Air monitoring for dust and volatile vapors will be conducted in accordance with the approved CHASP using dust monitors and a PID, and will take place in accordance with the New York State Department of Health guidance values during excavation work for the proposed support columns. Monitoring for background levels will take place at the start of each work day. The monitors will then be moved to the downwind side of any ongoing work to monitor for excessive levels of dust. Dust suppression activities will be implemented if conditions indicate that dust may become problematic. Therefore, project related

construction impacts on air quality are not expected to be significant. Any noise impacts would be temporary and short-term. After erection of the framework and shell, the majority of the buildings would be enclosed and noise levels related to on-site construction activities would be significantly reduced. Therefore, no significant adverse noise impacts are expected from the construction of the proposed project other than potential significant adverse impacts to open space resources if construction is delayed.

## **Public Health**

*The proposed project would not have significant adverse public health impacts.*

The proposed project does not pose the potential for significant adverse impacts to traffic.

The proposed project would be below the CEQR screening level of 100 vehicular trips. Vehicular traffic related emissions from the Proposed Project would not constitute a significant adverse air quality impact.

There are no known Underground Storage Tanks, historic petroleum spillage, or heavy metal usage at the site. There are no indications of odors infiltrating from impacted soil, groundwater, or spills into the hospital spaces.

Stationary source related emissions from the proposed project are minimal and would not constitute a significant adverse air quality impact.

There would be no significant increase in solid waste that would cause an impact on the public health. There would be no significant increase in operational noise anticipated. No conditions were identified that would be likely to cause the attraction of or increase in vermin/pest populations. No Federal, State or City health standards would be likely to be exceeded by the project. Therefore, no significant adverse impacts to public health are anticipated.

## **Mitigation**

*Where potential significant adverse impacts have been identified, measures that would minimize or avoid them have been considered.*

The proposed project has the potential to have significant adverse impacts on open spaces due to construction. Portions of the Esplanade would be temporarily closed during construction. During installation of the columns and while the footings are being excavated, the Esplanade would be closed between approximately E. 70<sup>th</sup> Street to just past the midblock between E. 71<sup>st</sup> Street and E. 72<sup>nd</sup> Street. It is anticipated that this portion of the Esplanade would be closed for four to six months and the Esplanade would remain open on weekends when possible. Access to the E. 71st pedestrian bridge via the E. 71st Street pedestrian ramp would be re-routed to a temporary ramp during construction in order to preserve access along the Esplanade south of E. 71st Street. Detour signage would be installed at the last entrance/exit to the Esplanade north of the blocked area (E.78th Street) to alert Esplanade users that there is no exit south of this point and that there is a “dead-end” ahead and to direct pedestrians to the temporary ramp. As mitigation if the Esplanade remains closed for more than six months, HSS would allocate

financial resources to the City in the amount of \$10,000 per month, for each month the Esplanade remains closed for maintenance of the Esplanade.

Additionally, during construction, fencing and temporary protection during construction activities would ensure safety to users of the Esplanade. Once the columns are in place and the structure of the deck is in place, north-south movement past this point would be restored. Restoration of the Esplanade would commence as early as possible after construction of the River Building and would include plantings, lighting, benches, and paving.

While the DEIS identified the potential for Air Quality impacts a refined analysis was conducted between the DEIS and this FEIS and determined that no violations of the NAAQS or the City of New York *de minimis* standards were exceeded. Therefore, no significant adverse impacts would occur.

### **Irreversible and Irretrievable Commitments of Resources**

The existing Hospital for Special Surgery has been at its current location since 1955, and the FDR Drive has been in operation since the 1940s, resulting in an irreversible commitment of land to a non-water dependent use. The Hospital would not provide any water dependent uses, and the proposed project would preclude using the site for any future water dependent facilities.

The air space over the FDR Drive, where the proposed project would be constructed, as well as the area on the East River Esplanade required for the support columns, would result in an irreversible commitment of land.

The building materials used in construction (including concrete, wood, aluminum metal and glass), the energy consumed during construction (in the transportation and operation of construction equipment) and the energy consumed by operation of the building (in the form of steam and electricity) would be irreversibly and irretrievably committed as a result of the proposed project.

Despite the commitment of resources identified above, the proposed project would result in a public benefit due to expansion of the specialty services provided to patients by the Hospital for Special Surgery.

### **Alternatives to the Proposed Project**

Alternatives to the proposed project include the No-Action Alternative and Smaller/Lower Density Alternative; however, the alternatives were found to be infeasible as they would not meet the project's goals and objectives set forth by the Hospital.

The No-Action Alternative nor the Smaller/Lower Density Alternative would permit HSS to provide the services necessary for the expansion of their operating room capacity, inpatient beds, ambulatory surgery, diagnostic imaging services, sports medicine rehabilitation, and physician offices in order to maintain the level of first rate medical care for which HSS has been recognized. A smaller build alternative would also not provide sufficient improvement for the investment for the construction of a platform over the FDR Drive to be economical. In addition, in response to comments made during public review of the DEIS, HSS also analyzed an



alternative under which the proposed project would be built at the same density as the proposed action, but with modifications of the design of the proposed new River Building that would provide additional setbacks and even smaller floor plates on the lower floors of the proposed new River Building than the proposed action. (Smaller Floor Plate Alternative). The Smaller Floor Plate Alternative was considered and it was found that it did not meet project goals and objectives.

Based on comments to the DEIS made during the course of public review alternative locations for the needed expansion of HSS facilities were considered and found to be infeasible.

### **Unavoidable Significant Adverse Impacts**

The proposed project poses the potential for significant adverse impacts to open space due to construction, if the Esplanade, between approximately E. 70<sup>th</sup> Street to just past the midblock point between E. 71<sup>st</sup> Street and E. 72<sup>nd</sup> Street, is closed to the public for a period longer than six (6) months due to unexpected circumstances. As mitigation if the Esplanade remains closed for more than six months, HSS would allocate financial resources to the City in the amount of \$10,000 per month, for each month the Esplanade remains closed for maintenance of the Esplanade.

### **Growth-Inducing Aspects of the Proposed Action**

*The proposed project is not anticipated to have “secondary” impacts that trigger further development in the surrounding area.*

The proposed project would not introduce a new land use to the area and it would not involve a change in zoning. Therefore, no significant development is expected to occur in the surrounding area as a result of the proposed project.

The proposed project would generate additional employees, patients and visitors. The expected secondary impacts of this include minor additional utilization of open spaces, mass transit, and public parking facilities in the surrounding area, but would not result in a demand for additional services or amenities. It is expected that retail stores in the area (such as drug stores) would benefit from the additional population but the needs would not be so large as to require additional retail development.