

**Special West Chelsea District Rezoning and High Line Open Space EIS**  
**CHAPTER 4: COMMUNITY FACILITIES AND SERVICES**

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**A. INTRODUCTION**

The proposed action would result in significant adverse impacts on elementary schools in Region 3 of Community School District 2 (CSD 2) and in CSD 2 as a whole, on intermediate schools in CSD 2, and publicly funded day care. It would not result in significant adverse impacts on intermediate schools in Region 3, libraries, outpatient health care facilities, fire and police services.

The *CEQR Technical Manual* defines community facilities as public or publicly funded facilities including schools, hospitals, libraries, day care centers, and fire and police protection services. This chapter examines the potential effects of the development of the projected development sites by 2013 under the proposed action, as described in Chapter 1, “Project Description,” on the capacity and provision of services by those community facilities. Direct effects may occur when a particular action physically alters or displaces a community facility. Indirect effects result from increases in population which create additional demand on service delivery. As there would be no direct effects to existing community facilities resulting from the proposed action, this analysis concentrates on the potential for indirect effects.

The analysis of community facilities has been conducted in accordance with the guidelines established in the *CEQR Technical Manual*. CEQR methodology calls for detailed assessments in areas where a project may have an impact on the provision of public or publicly funded services available to the community. Analyses were conducted to identify the potential effect that the projected developments induced by the proposed action could have on community facilities and the provision of services to the surrounding community. In general, size, income characteristics, and the age distribution of a new population are factors that could affect the delivery of services. The *CEQR Technical Manual* provides guidelines or thresholds that can be used to make an initial determination of whether a detailed study is necessary to determine potential impacts. In the areas of public schools, libraries, day care centers, and health care facilities, development of the projected development sites by 2013 under the proposed action exceeds the *CEQR Technical Manual* thresholds, and detailed analyses of these services follow.

For police and fire protection services, the *CEQR Technical Manual* suggests that a detailed assessment of service delivery be conducted if a proposed action would affect the physical operations of, or access to and from, a fire station or police precinct house. The proposed action would not result in such direct effects, given the scale of projected development in the RWCDs. As the proposed action would not directly affect existing facilities, a detailed assessment is not warranted. A brief discussion of police and fire services is provided for informational purposes.

This chapter uses the reasonable worst-case development scenario (RWCDs), as discussed in Chapter 1, “Project Description,” as the basis for assessing the impacts of the proposed action on

community facilities. The reasonable worst case development scenario specifies that by 2013 it is expected that under With-Action conditions there would be 4,809 dwelling units (DUs) on the projected development sites, an increase from the 101 DUs expected under No-Action conditions. As a result, the proposed action would result in a net increase of 4,708 DUs. In terms of the income mix of residential units, it is further expected that the proposed action, consistent with current development patterns in the area, would result in a net increase of 657 affordable housing DUs to be occupied by low- and moderate-income households and 4,051 market rate DUs to be occupied by higher income households. In addition, the proposed action is projected to result in a net increase of non-residential development including ~~292,676~~ 195,215 sf of retail space and 198,726 sf of museum space (defined as “community facility” use for zoning purposes), and net decreases of ~~816,847~~ 796,947 sf of office, 131,100 sf of hotel, ~~40,809~~ 74,818 sf storage/manufacturing, ~~318,580~~ 225,940 sf of parking/auto related uses, and ~~25,064~~ 4,080 sf of vacant space on the 25 projected development sites. The proposed action also includes the site selection and acquisition of the High Line to create a publicly accessible ~~6.7~~ 5.9-acre open space. The analyses of the proposed action is performed using a 2013 analysis year.

The creation of the High Line open space, which extends south of the rezoning area boundary to Gansevoort Street and also includes the post office spur extending east of Tenth Avenue at W. 30th Street, would have no notable effects on community facilities. This open space would not generate any additional residents and therefore would not generate any significant new demand for community facilities and services.

The analysis presented herein concludes that no significant adverse impacts on public high schools, libraries, police services, fire services, and health care would occur as a result of the proposed action. Significant adverse impacts could occur on elementary schools in Region 3 of Community School District 2 (CSD 2) and CSD 2 as a whole and intermediate schools in CSD 2. Significant adverse impacts could occur on public day care within an approximately 1-mile radius of the proposed action area. Mitigation for these impacts is discussed in Chapter 22, “Mitigation.”

## **B. PUBLIC SCHOOLS**

The *CEQR Technical Manual* directs that if a proposed action would generate more than 50 public elementary and intermediate school students or more than 150 high school students, further analysis of the impact of the proposed action on the neighborhood public schools is warranted. The proposed action is expected to introduce more than 50 school age children (elementary and intermediate grades) and more than 150 high school students, thus requiring a detailed analysis of public schools.

The proposed action’s net increase of 4,708 DUs by 2013, including the 657 low- and moderate-income units, would generate a school age population estimated at: 484 elementary school children and 101 intermediate school children, for a total of 585 elementary and middle school students. In addition, the proposed action is expected to generate 155 high school students. These estimates are based on rates provided in the *CEQR Technical Manual* Table 3C-2 for low-moderate income units and high (market rate) units in Manhattan.

Impacts are identified if the proposed action would result in a 5 percent or more increase in a deficiency of available seats over the future without the proposed action.

## **Existing Conditions**

Elementary and intermediate schools are located in geographically defined school districts. The projected development sites in the proposed action area are located within the boundaries of Community School District (CSD 2). Besides West Chelsea, CSD 2 covers neighborhoods in Midtown, the Upper East Side, and Lower Manhattan, apart from the Lower East Side. More specifically, the projected development sites are within Region 3 of CSD 2, which is bounded by W. 59th Street on the north, Broadway on the east, E./ W. 14th Street on the south, and the Hudson River on the west. Under the recent reorganization of the NYC Department of Education (DOE), CSDs 1, 2, 4, and 7 have been placed into Instructional Region 9 (along with public high schools that fall within Instructional Region 9's boundaries).

The *CEQR Technical Manual* (Sec. 310) suggests that a half-mile radius may be drawn for the purposes of showing the distance between the site of the proposed action and the community's public schools. In accordance with CEQR guidelines, the focus of the elementary and intermediate school analysis is on CSD 2's Region 3 and CSD 2 as a whole, as students could also attend schools within their district but outside their immediate neighborhood. Refer to Figure 4-1, showing the boundary of Region 3 and the location of elementary and intermediate schools within it and their location relative to a half-mile radius of the proposed action area.

While a portion of the area lying within a half-mile radius of the rezoning area is located south of Region 3 (as shown in Figure 4-1), there are no public schools located within this area.

New York City public high school students have the option of attending a public high school anywhere in the city, since there are no public high school zones set by DOE. School enrollment is based on seating availability and admissions criteria. Accordingly, high schools are considered on a borough-wide basis.

Private and parochial schools are not included in schools analysis.

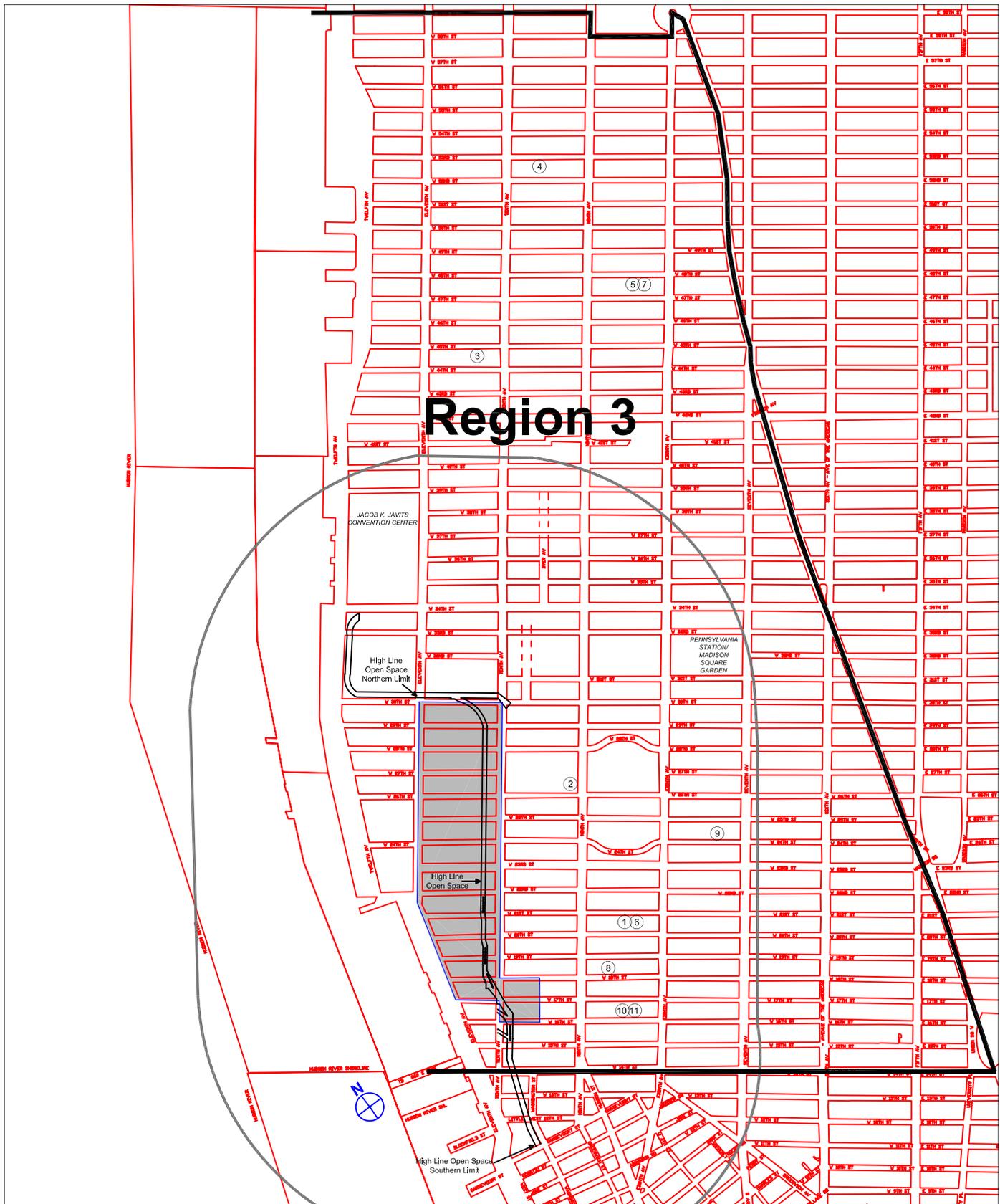
### *Elementary and Intermediate Schools*

While there are no public schools in the proposed action area, there are several within a half-mile radius. This includes two elementary schools, one intermediate school, and one joint intermediate/high school. In addition, Region 3 includes three other elementary schools and one middle school beyond a half-mile radius. The Region 3 schools include:

#### CSD 2, Region 3 Elementary Schools

- ▶ PS 11, William T. Harris School; 320 W. 21st Street (within half-mile radius)
- ▶ PS/IS 33, Chelsea School; 281 Ninth Avenue (within half-mile radius)
- ▶ PS 51, Elias Howe School; 520 W. 45th Street

Figure 4-1  
Public Schools in CSD 2's Region 3



	Area to be Rezoned		Region 3 Public School (refer to Tables 4-1 and 4-2 for key)	Scale: 1"= 1500'
	Proposed High Line Open Space		Region 3 of CSD 2 Boundary	
			1/2-mile Radius	

- ▶ PS/IS 111, Adolph S. Ochs School; 440 W. 53rd Street
- ▶ PS 212, Midtown West School; 328 W. 48th Street

CSD 2, Region 3 Intermediate Schools

- ▶ MS 260, Clinton School for Writers and Artists; 320 W. 21st Street (within half-mile radius)
- ▶ JHS 17, La Salle School; 328 W. 48th Street
- ▶ NYC Lab School for Collaborative Studies (IS 312/HS 412); 333 W. 17th Street (within half-mile radius)

PS/IS 33 and PS/IS 111, listed above under elementary schools, are combined elementary/intermediate school serving students in kindergarten through eighth grade. NYC Lab School for Collaborative Studies, designated as IS 312 and HS 412, is a joint intermediate and high selective school serving grades 6 to 12.

In addition, Manhattan High School/P35M, for students ages 14 through 21 who have severe disabilities and require a full-time special education placement, is located 317 W. 52nd Street. Although geographically located within the confines of CSD 2, Region 3, administratively it is part of District 75, which oversees special education programs citywide. Capacity and enrollment information for elementary and intermediate schools is provided in Table 4-1.

High Schools

While the assessment of high schools considers facilities on a borough-wide basis, the public high schools near the proposed action area are of particular note. There are four high schools within a half-mile radius of the proposed action area which are listed in Table 4-2. These include:

- ▶ Humanities (Bayard Rustin) High School, 351 W. 18th Street
- ▶ Fashion Industries Center and Technical Education High School, 225 W. 24th Street
- ▶ NYC Lab School of Collaborative Studies, 333 W. 17th Street
- ▶ NYC Museum School, 333 W. 17th Street

Elementary School Utilization

According to the latest available data from the DOE, the public elementary schools serving the neighborhoods within and near the proposed action area generally operate below capacity, with the exception of PS 11 which is operating at near capacity with enrollment only 1 student below capacity (refer to Table 4-1). As shown in Table 4-1, in the most recent school year for which data is available (2002-2003), for the two elementary schools within a half-mile radius of the proposed action area the utilization rate was 87 percent, with seats available for 146 additional students. For all elementary schools in Region 3 of CSD 2, the utilization rate was 89 percent, with seats available for 276 additional students.

On a broader geographic level, for all CSD 2 elementary schools, the utilization was somewhat higher than for the areas closest to the proposed action area, at 92 percent. The district's capacity was 15,185 and its enrollment was 14,022, with a surplus of 1,163 seats.

**Table 4-1, Public Elementary and Intermediate School Utilization, Capacity, and Enrollment: Half-mile Radius Study Area, Region 3 of CSD 2, and CSD 2 (Instructional Region 9) (Years 2002-2003)**

***Elementary Schools***

<b>Map No.</b>	<b>School</b>	<b>Grades Served</b>	<b>Enrollment</b>	<b>Capacity</b>	<b>Seats Available</b>	<b>Percent Utilization (Enrol./Capacity)</b>
1.	PS 11	K-5	526	527	1	99%
2.	PS/IS 33	K-8	435	580	145	75%
<i>Total for public elementary schools within half-mile of proposed action area</i>			<i>961</i>	<i>1,107</i>	<i>146</i>	<i>87%</i>
3.	PS 51	K-5	313	320	7	98%
4.	PS/IS 111	K-8	686	792	106	87%
5.	PS 212	K-5	336	353	17	95%
<i>Total for public elementary schools in Region 3 of CSD 2</i>			<i>2,296</i>	<i>2,572</i>	<i>276</i>	<i>89%</i>
<i>Total for public elementary schools in CSD 2</i>			<i>14,022</i>	<i>15,185</i>	<i>1,163</i>	<i>92%</i>

***Intermediate Schools***

<b>Map No.</b>	<b>School</b>	<b>Grades Served</b>	<b>Enrollment</b>	<b>Capacity</b>	<b>Seats Available</b>	<b>Percent Utilization (Enrol./Capacity)</b>
6.	MS 260	6-8	211	273	62	77%
<i>Total for public intermediate schools within half-mile of proposed action area (1)</i>			<i>211</i>	<i>273</i>	<i>62</i>	<i>77%</i>
7.	JHS 17	6-8	373	538	165	69%
<i>Total for public intermediate schools in Region 3 of CSD 2</i>			<i>584</i>	<i>811</i>	<i>227</i>	<i>72%</i>
<i>Total for public intermediate schools in CSD 2</i>			<i>7,231</i>	<i>6,659</i>	<i>-572</i>	<i>109%</i>

Sources: Enrollment and capacity for individual schools and Region 3 of CSD 2: DOE, *Utilization Profiles: Enrollment/Capacity/Utilization 2002-2003*. These numbers include Pre-K enrollment in these buildings. Enrollment for CSD 2: DCP, “Enrollment Projections for CSD 2 (actual 2002, projected 2003 to 2012)”. DCP’s actual enrollment does not include Pre-K enrollment. Capacity for CSD 2: DOE, *Utilization Profiles: Enrollment/Capacity/Utilization, 2002-2003*.

(1) NYC Lab School for Collaborative Studies, grades 6 to 12, listed in Table 4-2 with high schools.

**Table 4-2, Manhattan Public High School Utilization, Capacity, and Enrollment (Years 2002-2003)**

Map No.	School	Grades Served	Enrollment	Capacity	Seats Available	Percent Utilization (Enrol./Capacity)
8.	Humanities (Bayard Rustin) (1)	9-12	2,484	2,056	-428	121%
9.	Fashion Industries	9-12	1,826	1,949	123	94%
<i>Total for public high schools within half-mile of proposed action area</i>			4,310	4,005	-305	108%
10.	NYC Lab School for Col. Studies	6-12	729	1,082	353	67%
11.	NYC Museum School	6-12 (2)	403	542	139	74%
<i>Total for public intermediate/high schools within half-mile of proposed action area</i>			1,132	1,624	492	70%
<i>Total for public high schools in Manhattan</i>			60,952	55,129	-5,823	111%

Source: Enrollment and capacity for individual schools: DOE, *Utilization Profiles: Enrollment/Capacity/Utilization 2002-2003*.

Enrollment for Manhattan: DCP, “Enrollment Projections for Manhattan High Schools (actual 2002, projected 2003 to 2012)”. Capacity for Manhattan: DOE, *Utilization Profiles: Enrollment/Capacity/Utilization, 2002-2003*.

(1) Includes two programs, Humanities and Humanities Preparatory Academy.

(2) NYC Museum School, a joint intermediate/high school in 2002-2003, is expected to phase out intermediate school program.

It should be noted that some NYC public elementary schools provide pre-kindergarten (Pre-K) programs; however, as these programs are discretionary and not compulsory, they are not considered in CEQR analysis. However, the individual school enrollment data provided in Table 4-1 includes Pre-K enrollment, as enrollment data excluding Pre-K is not available. Data for all of CSD 2, however, do not include Pre-K enrollment.

### Intermediate School Utilization

The one intermediate school within a half-mile radius of the proposed action area, MS 260, had a utilization rate of 77 percent, with 62 available seats. For all of the Region 3 of CSD 2, which includes one additional middle school, the utilization rate was 72 percent, with 227 available seats. For all CSD 2 intermediate schools, enrollment exceeded capacity, with a utilization rate of 109 percent. The district’s capacity was 6,659 and its enrollment was 7,231, with a deficit of 572 seats.

Enrollment data for PS/IS 33 and PS/IS 51 are not disaggregated between elementary and middle school populations. As such, it is not possible to accurately analyze the elementary and middle school populations at these facilities discretely. They are grouped with the elementary schools for analysis purposes, although they are K-8 facilities.

## High Schools

Combined, Humanities (Bayard Rustin) High School and Fashion Industries High School had enrollments exceeding capacity, with a utilization rate of 108 percent. The NYC Lab School for Collaborative Studies and NYC Museum School, two joint intermediate/high school located in the same building, conversely, had substantial available capacity. Combined they had a utilization rate of 70 percent, with 492 seats available. For the entire borough of Manhattan, enrollment exceeded capacity, with a utilization rate of 111 percent. There was a shortfall of 5,823 seats.

## **Future Without the Proposed Action**

The 2013 future without the proposed action utilization rate for school facilities is calculated by adding the estimated enrollment from known future proposed residential development to the projected enrollment from DCP or DOE and then comparing that number to projected capacity.

## Capacity Changes

DOE's *Children First Ten Year Needs Assessment and 2005 - 2009 Five Year Capital Plan* includes three new schools, each 630 seats, for CSD 2, to be completed in time for the 2008-2009 school year. However, since sites for these schools have not yet been identified and to be conservative for analysis purposes, these additional seats are not included in the calculation of utilization under No-Action and With-Action conditions by 2013. In addition to the 1,890 seats for CSD 2 in the *Adopted Five Year Capital Plan*, the *2005 - 2009 Five Year Capital Plan's Proposed 2005 Amendment* (November 2004) includes an additional 630-seat school for a site near 10th Avenue and West 37th Street and a 110-seat addition for PS/IS 51.

The NYC Museum School is expected to phase out its intermediate school program in the future without the proposed action and operate with grades 9 to 12 only. Enrollment in the high school grades may increase as a result while, for analysis purposes, the overall capacity of the school is not expected to change from existing conditions.

## Enrollment Changes

In the future without the proposed action by 2013, new residential development is anticipated in the vicinity of the proposed action area. As described in Chapter 2, "Land Use, Zoning, and Public Policy," there are several new residential developments expected within a half-mile radius of the proposed action area. However, in accordance with CEQR guidelines, the study areas for schools covers an area larger than the half-mile radius encompassing the land use secondary study area. Therefore, the schools study area is expected to include additional development beyond that described in Chapter 2. The schools study areas include projects related to the Hudson Yards development program, projected development from the Ladies' Mile rezoning, approved in August 2004, as well as other development. Residential developments included in the study areas for schools and other community facilities are listed in Table 4-3.

**Table 4-3, No-Action Residential Development in the Community Facilities Study Areas**

	<b>Market Rate DUs</b>	<b>Low- &amp; Mod.-income DUs</b>	<b>Total DUs</b>	<b>Market Rate Residents</b>	<b>Low- &amp; Mod.-income Residents</b>	<b>Total Residents</b>
Hudson Yards (1)	3,814	843	4,657	6,217	2,108	8,325
Ladies' Mile (2)	869	62	931	1,486	106	1,592
Other Development (3)	<u>401</u>	0	<u>401</u>	<u>658</u>	0	<u>658</u>
<b>Total, No-Action Dev.</b>	<u>5,084</u>	905	<u>5,989</u>	<u>8,361</u>	2,214	<u>10,575</u>

(1) Includes the entire Hudson Yards development area. 4,719 units expected by 2013; as there are 62 existing units, expected to result in 4,657 DUs incremental increase over existing conditions. As per the Hudson Yards FGEIS, expected to have 1.63 residents per market rate unit and 2.50 residents per low-moderate income unit.

(2) As per Ladies' Mile EAS, all housing units expected to have 1.71 residents per unit.

(3) Refer to Tables 3-12 and 3-13 (non-Hudson Yards DUs only).

The entire Hudson Yards program, including sites beyond a half-mile radius of the proposed action area, consists of a total of 4,719 DUs by 2013, however as there are 62 existing units on Hudson Yards development sites the Hudson Yards program is expected to result in a net increase of 4,657 DUs, consisting of 3,814 market rate units and 843 low- and moderate-income units. Ladies' Mile projected development by 2013 includes a total of 931 DUs, consisting of 869 market rate units and 62 low- and moderate-income units. Other No-Action development by 2013 are expected to have ~~399~~ 401 DUs, all market rate. Therefore, as shown in Table 4-3 in total, the public school study area would add approximately ~~5,082~~ 5,084 market rate DUs and 905 low- and moderate-income DUs, for a total of ~~5,987~~ 5,989.

The schools most likely to be affected by the Hudson Yards rezoning include PS 11, MS 260, and PS/IS 33. The Region 3 schools closest to the Ladies' Mile development sites are PS 11, MS 260, and PS/IS 33.

It should be noted that a Fashion Institute of Technology residence hall is also expected under No-Action conditions. While this development is expected to add residents to the study area, it is not included in the schools analysis as it would not generate any demand for elementary, intermediate, or high school seats.

The *CEQR Technical Manual*, Table 3C-2 summarizes pupil generation rates, based on DOE's analysis of income mix and location (borough) of new residential units. Table 4-4 shows the number of new public school students expected to be generated by the No-Action developments identified in Chapter 2. The No-Action developments are expected to generate 617, 129, and ~~197~~ 198 elementary, middle, and high school students, respectively, by 2013.

**Table 4-4,  
Study Area Estimated Number of Students Generated by New Housing Units Under No-Action by 2013**

	<b>Housing Units</b>	<b>Elementary School</b>	<b>Intermediate School</b>	<b>High School</b>	<b>Total</b>
Market Rate	<u>5,084</u>	508	102	<u>153</u>	<u>763</u>
Low-Moderate Income	905	109	27	45	181
<b>Total</b>	<b><u>5,989</u></b>	<b>617</b>	<b>129</b>	<b><u>198</u></b>	<b><u>944</u></b>

Source: Student generation rates *CEQR Technical Manual* Table 3C-2: “Projected Public School Pupil Ratios in New Housing Units of All Sizes.”

DCP and DOE’s Division of School Facilities project changes in elementary/intermediate school enrollment by school district, and in high school enrollment by borough, up to 10 years into the future using cohort survival methodology based on number of births, actual enrollment, and grade-retention ratios. Some differences in methodology account for variations between the DOE and DCP enrollment projections. The *CEQR Technical Manual* suggests that both DCP’s and DOE’s enrollment projections could be considered in evaluating possible impacts, although the more conservative (higher) projections should be used for calculating numerical impacts. The DCP’s enrollment projections (actual 2002, projected 2003-2012), which were higher than DOE’s, were used for this analysis. As the analysis year is 2013, the DCP 2012 projections were held constant to 2013.

Elementary Schools

In 2013, DCP’s CSD 2 projections indicate that elementary school enrollments are expected to increase by 1,880, rising from 14,022 in 2002-2003 to 15,902 students, an increase of approximately 13 percent. With the additional 617 elementary school students generated by No-Action developments (refer to Table 4-4), there is expected to be a total of 16,519 elementary school students under No-Action conditions in CSD 2 in 2013. With capacity remaining at 15,185 seats, 2013 No-Action enrollment would exceed capacity by 1,334 seats in CSD 2, resulting in a utilization rate of 109 percent. This data is presented in Table 4-5.

Applying the 13 percent growth rate in DCP projected enrollment for CSD 2 elementary schools to the elementary schools nearest the proposed action area results in a projection of 307 additional elementary school students in Region 3 of CSD 2 in 2013. Together with the 617 elementary students generated by No-Action developments (refer to Table 4-4), there is expected to be a total of 924 additional elementary school students. Accordingly, as also shown in Table 4-5, the number of elementary school students in Region 3 of CSD 2 would increase from 2,297 under existing conditions to 3,221 under 2013 No-Action conditions. With capacity remaining at 2,572 seats, 2013 No-Action enrollment would exceed capacity by 649 seats in Region 3 of CSD 2, resulting in a utilization rate of 125 percent.

**Table 4-5, 2013 Future Without the Proposed Action: Estimated Public Elementary/Intermediate School Enrollment Capacity and Utilization**

Region/ District	Projected Enrollment 2013	Students Generated from New Development	Total No-Action Enrollment	Capacity	Available Seats in Program	Percent Utilization
<b>Elementary Schools</b>						
Region 3	2,604	617	3,221	2,572	-649	125%
CSD 2	15,902	617	16,519	15,185	-1,334	109%
<b>Intermediate Schools</b>						
Region 3	621	129	750	811	61	93%
CSD 2	7,694	129	7,823	6,659	-1,164	117%

Source: Totals for CSD 2 projected enrollment: “DCP Enrollment Projection (actual 2002, projected 2003 to 2012) for CSD 2.” 2012 enrollment held constant for 2013. DCP enrollment projections do not include Pre-K enrollment. Capacity from Table 4-1.

Projected enrollment for Region 3 of CSD 2 derived by assuming this area would grow at the same rates as in CSD 2.

Therefore, both Region 3 of CSD 2 and CSD 2 as a whole are expected to have a deficit of elementary school seats under 2013 No-Action conditions.

Intermediate Schools

As also shown in Table 4-5, in 2013, DCP projections indicate that the intermediate schools in CSD 2 are expected to have an enrollment of 7,694, an increase of approximately 6.4 percent from existing enrollment. It should be noted that these projections forecast a surge after 2010, when enrollment is projected at 7,145 which is 86 students less than the existing level, with a rise to 7,357 in 2011 and then 7,694 in 2012. In addition, 129 intermediate school students are expected to be generated by No-Action developments in the study area. As a result, there is expected to be a total of 7,823 intermediate school students under No-Action conditions in CSD 2 in 2013. With capacity remaining at 6,659 seats, 2013 No-Action enrollment is expected to exceed capacity by 1,164 seats in CSD 2, resulting in a utilization rate of 117 percent.

Applying the 6.4 percent growth rate in DCP projected enrollment for CSD 2 intermediate schools to the schools nearest the proposed action area results in a projection of 37 additional intermediate school students in Region 3 of CSD 2 in 2013. Together with the 129 intermediate students generated by No-Action developments (refer to Table 4-4), there is expected to be a total of 166 additional intermediate school students. Accordingly, the number of intermediate school students in Region 3 of CSD 2 would increase from 584 under existing conditions to 750 under 2013 No-Action conditions. With capacity remaining at 811 seats, there is expected to be a surplus of 61 seats in Region 3 of CSD 2, resulting in a utilization rate of 93 percent.

However, while there is expected to be a surplus of seats within Region 3 of CSD 2 under 2013 No-Action conditions, in CSD 2 as a whole, there would be a deficit of intermediate school seats.

### Elementary/Intermediate Seats in CSD 2

It is worth noting potential changes in combined elementary/intermediate utilization in CSD 2 as a whole in view of Department of Education current policy which favors establishment of a variety of grade organizations within schools, including K-8, and its adopted Five-Year Capital Plan which includes increased capacity of 1,890 elementary/intermediate seats district-wide. Grade levels have not yet been specified and sites have not yet been identified for the planned new schools. With those additional seats in place by 2013, total elementary/intermediate capacity would increase to 23,734 seats, lessening the district-wide deficit to 608 seats. If the *2005 - 2009 Five Year Capital Plan's Proposed 2005 Amendment* (November 2004) is adopted in June 2005, the additional 740 seats would further increase the total elementary/intermediate capacity to 24,474, eliminating the projected district-wide deficit and creating a 132-seat surplus in the No-Action condition.

### High Schools

DCP projects a borough-wide decrease in high school enrollment in 2012 and this analysis holds that forecast constant for 2013. As shown in Table 4-6, the DCP enrollment projected for 2013 anticipates a total of 56,856 high school students. This is a decrease of 4,096 students, an approximately 7 percent reduction from existing conditions. It should be noted that the DCP projections anticipate annual increases in Manhattan high school enrollment until 2006, after which enrollments are expected to decrease. While a general decrease in enrollment is projected, the No-Action developments in the study area are expected to generate ~~197~~ 198 additional high school students (as shown in Table 4-4). Accordingly, the 2013 No-Action Manhattan high school enrollment is estimated to be ~~57,053~~ 57,054. With capacity assumed to remain at 55,129 seats since no additional high schools are included for Manhattan in the Five -Year Capital Plan, enrollment is expected to exceed capacity by ~~1,924~~ 1,925 seats, a utilization rate of 103 percent.

**Table 4-6, 2013 Future Without the Proposed Action: Estimated Manhattan Public High School Enrollment, Capacity, and Utilization**

Region/ District	Projected Enrollment 2013	Students Generated from New Development	Total No-Action Enrollment	Capacity	Available Seats in Program	Percent Utilization
<b>High Schools</b>						
Manhattan	56,856	<u>198</u>	<u>57,054</u>	55,129	<u>-1,925</u>	103%

Source: Total for Manhattan projected enrollment: “DCP Enrollment Projection (actual 2002, projected 2003 to 2012) for Manhattan High School.” 2012 enrollment held constant for 2013. Capacity from Table 4-2.

**Future With the Proposed Action**

As discussed in Chapter 1, “Project Description,” the RWCDS for the proposed action shows that as a result of proposed action, a net increase of 4,708 DUs on the projected development sites would occur by 2013. Of these, 657 would be affordable housing units for low- and moderate-income households and 4,051 would be market rate units.

The proposed action would not directly affect any educational facilities and, similar to the No-Action condition, potential changes in school capacity are acknowledged but not included in the school utilization calculations for the Future With the Proposed Action condition.

The analysis of potential impacts of students generated by the proposed action on the New York City school system is presented below.

*Elementary Schools*

Using the formulae set forth in the *CEQR Technical Manual* for high- and low-moderate income units, an estimated 484 elementary school students would be generated by the proposed action by 2013 (see Table 4-7).

**Table 4-7, 2013 Future With the Proposed Action: Projected New Housing Units and Estimated Number of Student Generated by the New Housing Units**

	Housing Units	Elementary School	Intermediate School	High School	Total
<b>Projected Development Sites</b>					
Market Rate	4,051	405	81	122	608
Low-Moderate Income	657	79	20	33	132
<b>Total</b>	<b>4,708</b>	<b>484</b>	<b>101</b>	<b>155</b>	<b>740</b>

Source: Student generation rates, *CEQR Technical Manual* Table 3C-2: “Projected Public School Pupil Ratios in New Housing Units of All Sizes.” High Income rate used for market rate units.

As shown in Table 4-8, with the addition of 484 elementary school students under With-Action conditions, a shortfall of 1,133 seats, with utilization at 144 percent of capacity, would be created at the public elementary schools in Region 3 of CSD 2. For CSD 2 as a whole, there would be a shortfall of 1,818 seats, with utilization at 112 percent of capacity. For both Region 3 and CSD 2, the proposed action is expected to result in a greater than 5 percent increase in the deficiency of available elementary school seats over No-Action conditions (75 percent and 36 percent, respectively). Therefore, a significant adverse impact on public elementary schools in Region 3 and CSD 2 as a whole is expected. Mitigation for this impact is discussed in Chapter 22, “Mitigation.”

**Table 4-8, 2013 Future With the Proposed Action: Estimated Public Elementary/Intermediate School Enrollment Capacity and Utilization**

Region/ District	No-Action Enrollment 2013	Net Students Generated by Action	Total With- Action Enrollment	Capacity	Available Seats in Program	Percent Utilization	Deficit Percent Increase
<b>Elementary Schools</b>							
Region 3	3,221	484	3,705	2,572	-1,133	144%	75%
CSD 2	16,519	484	17,003	15,185	-1,818	112%	36%
<b>Intermediate Schools</b>							
Region 3	750	101	851	811	-40	105%	NA
CSD 2	7,823	101	7,924	6,659	-1,265	119%	9%

No-Action enrollment from Table 4-5.

### Intermediate Schools

In the future with the proposed action, 101 new intermediate school students would be introduced into the proposed action area. Under With-Action conditions in 2013, intermediate schools in Region 3 are expected to operate at 105 percent of capacity with a deficit of 40 seats (see Table 4-8). As there is not expected to be a deficit under No-Action conditions, a percentage increase in deficiency cannot be calculated. However, the deficit in seats at elementary schools in Region 3 under With-Action conditions in 2013 would be relatively small in absolute terms and as a percentage of total capacity. Therefore, the proposed action would not have a significant adverse impact on intermediate schools in Region 3.

As a result of the proposed action, CSD 2 as a whole would operate over capacity, with a utilization rate of 119 percent reflecting a shortfall of 1,265. For CSD 2, the proposed action is expected to result in more than a 5 percent increase in the deficiency of intermediate school seats as compared to No-Action conditions, with a 9 percent increase. Therefore, a significant adverse impact to intermediate schools in CSD 2 is expected to occur as a result of the proposed action. Mitigation for this impact is discussed in Chapter 22, "Mitigation."

### Elementary/Intermediate School Seats in CSD 2

When elementary and intermediate school enrollments are considered together district-wide, and the combined school capacity is increased by the 1,890 planned new seats in DOE's Five-Year Capital Plan, the projected utilization rate would be 105 percent, resulting in a shortfall of 1,193 seats, or 585 more than under No-Action conditions. If the *2005 - 2009 Five Year Capital Plan's Proposed 2005 Amendment* (November 2004) is adopted in June 2005, and the combined school capacity is increased by an additional 740 seats, the projected utilization rate would be 102 percent, resulting in a shortfall of 453 seats, as compared to a surplus of 132 seat surplus under No-Action conditions.

### High Schools

By 2013, with the addition of 155 new high school students generated by the proposed action within the proposed action area, there would be a shortfall of ~~2,079~~ 2,080 seats in Manhattan high schools, with a utilization rate of 104 percent (refer to Table 4-9). This would result in an 8 percent increase in deficiency of high school seats as compared to No-Action conditions; technically more than the 5 percent increase that could indicate a significant impact. However, since students may choose from high schools throughout the city, and would be expected to be accommodated without constraining overall capacity, no significant adverse impact to high schools in Manhattan is expected to occur as a result of the proposed action.

**Table 4-9, 2013 Future With the Proposed Action: Estimated Manhattan Public High School Enrollment, Capacity, and Utilization**

Region/ District	No-Action Enrollment 2013	Net Students Generated by Action	Total With- Action Enrollment	Capacity	Available Seats in Program	Percent Utilization	Deficit Percent Increase
<b>High Schools</b>							
Manhattan	<u>57,054</u>	155	<u>57,209</u>	55,129	<u>-2,080</u>	104%	8%

No-Action enrollment from Table 4-6.

### C. LIBRARIES

Although the proposed action is projected to introduce a large residential population to the surrounding area, it is not expected to have any adverse impacts on library services within the study area.

Potential impacts on libraries may result from an increased user population. A noticeable change in service delivery is likely to occur if a project introduces a large residential population (i.e. greater than a five percent increase in housing units served). According to the *CEQR Technical Manual*, if a proposed action would increase the average number of residential units served by local library branches in Manhattan by more than 5 percent (901 dwelling units), the proposed project may cause significant impacts on library services and further analysis of the impact of the proposed action is warranted.

The proposed action would result in new residential development. As discussed in the Introduction section above, it would generate a net increase of 4,708 DUs. These units are expected to generate an estimated 8,287 new residents to the study area by 2013 following the adoption of the proposed action. This estimate of new residents is calculated by multiplying the number of market rate units by 1.64 persons, which is the average household size for Manhattan Community District 4. For low-moderate income units, the number of units is multiplied by 2.50 persons, as the average household size for Manhattan community districts that have higher proportions of low-income residents in 2000 range between 2.28 and 2.90.<sup>1</sup> The action-generated residences are expected to include 4,051 market rate units and 657 low- and moderate-income affordable housing units.

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<sup>1</sup> The rate of 2.50 persons per low-moderate income household was identified and used in the *No. 7 Subway Extension - Hudson Yards Rezoning and Development Program FGEIS* (November 2004) [CEQR #03DCP031M].

## **Existing Conditions**

The West Chelsea proposed action area is located in the southwestern portion of Manhattan Community District 4 (CD4). According to 2000 US Census Bureau data, CD4 has a total population of approximately 87,479, an increase of approximately 5,000 residents (6.5 percent) since 1980. CD4 is also comprised of the eastern sections of Chelsea and Clinton (Hells Kitchen) to the north. The proposed action area is home to about 525 residents.

### ***Library facilities***

According to the *CEQR Technical Manual*, neighborhood library branches serve areas based on the distance that residents would travel to use library services, which is typically not more than three-quarters of a mile (referred to as the library's catchment area).

The New York Public Library (NYPL) system includes 85 neighborhood branches and four research libraries located in Manhattan, the Bronx, and on Staten Island, housing approximately 53 million volumes. (Queens and Brooklyn have separate library systems.) Libraries provide books, information services, written documents, audio visual references, and educational services to their surrounding communities.

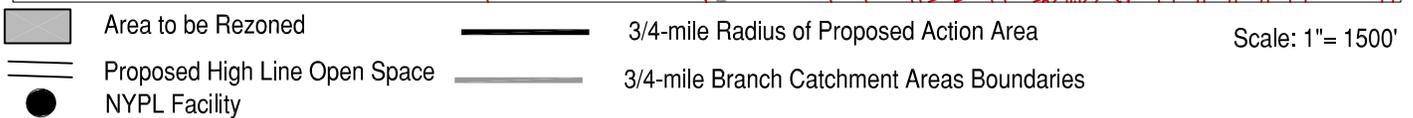
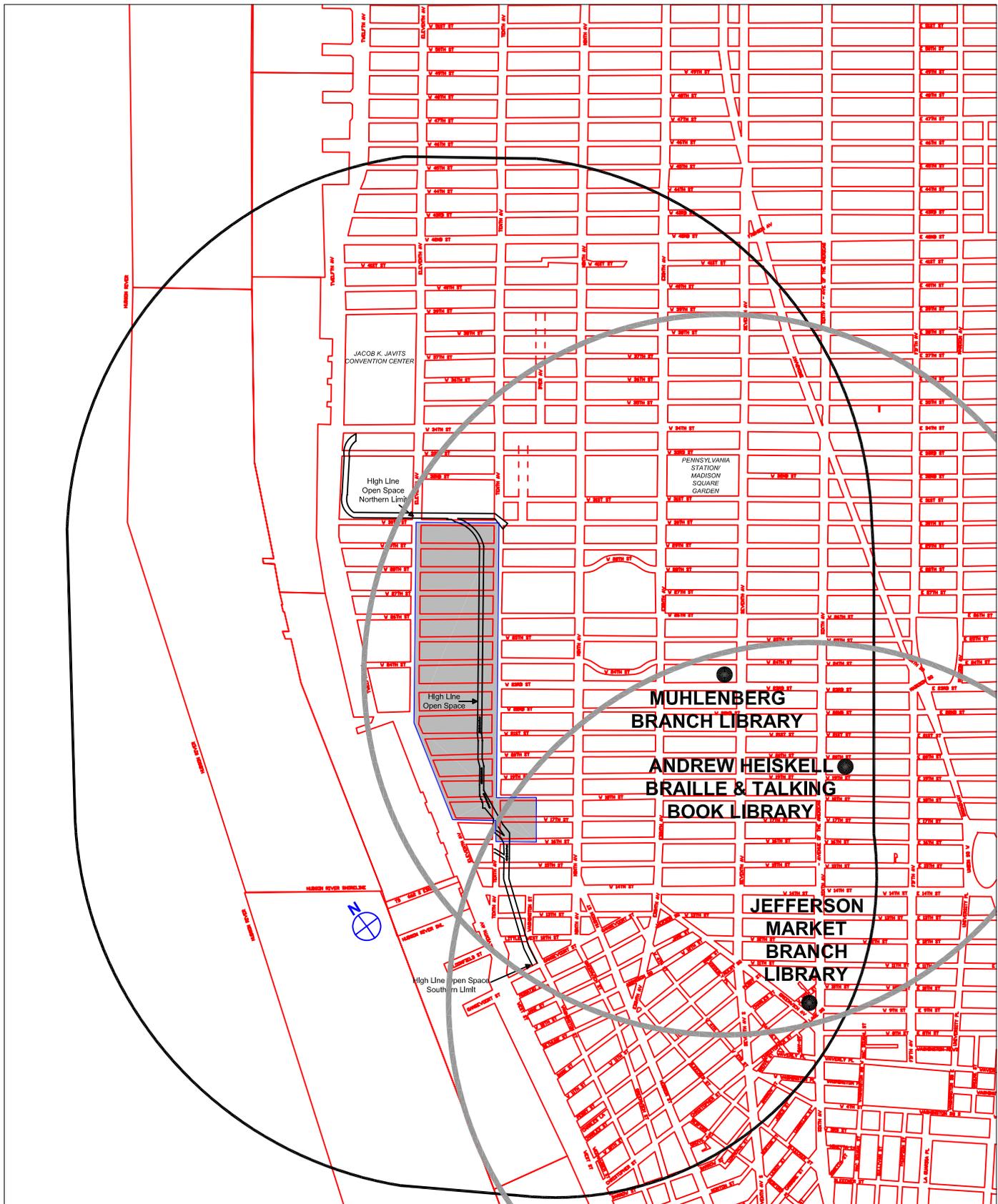
There are two NYPL neighborhood branches located within three-quarters of a mile of the proposed action area (refer to Figure 4-2). The entire project study area is currently in the catchment area of the Muhlenberg Branch of the New York Public Library. In addition, the Jefferson Market regional branch is within the catchment area of the projected developments sites at the southeastern edge of the proposed action area. Besides these two branch libraries, the Andrew Heiskell Braille and Talking Book Library, at 40 W. 20th Street, is located just outside the three-quarter mile radius of the proposed action area. It is a full service central library serving the needs of the visually impaired. In addition, it should be noted that residents could go to any NYPL branch and order books from any of the other branches.

### **Muhlenberg**

The Muhlenberg branch serves a catchment area of approximately 142,745 residents and has an annual circulation of 108,260. It is located in Chelsea at 209 W. 23rd Street (just west of Seventh Avenue), approximately three avenue blocks east of the proposed action area. It has circulating books, books on tape, audiocassette, and videocassette collections for children, young adults, and adults, reference collections, including a Chelsea history file and Internet access.

It offers special programs and services to residents, including public education, health information services, job information centers, and Internet workshops. Other activities include films, concerts, and lectures for all ages, exhibits by local visual artists, and children's events such as story time programs and crafts programs. In addition, it participates in project CLASP, Connecting Libraries and Schools Project; a library-school partnership that links schools serving students in kindergarten

Figure 4-2  
Study Area Library Facilities



through 12th grade. It is open five days per week (currently closed Fridays and Sundays), with evenings hours one night per week (currently open on Thursdays until 8 PM).

It opened in 1906, built with funds given to the City by Andrew Carnegie. In 2000, the branch was renovated through the Library's Adopt-A-Branch program; care was taken to preserve the historic character of the building. The refurbished branch has an adult and young adult area on the main floor; a children's room with a story hour space on the second floor; and, on the third floor, a community room for public programs and meetings. The branch is now fully accessible to wheelchairs.

Given its location, it is expected that the Muhlenberg Library Branch would be the primary library facility serving residents generated by the proposed action and therefore the assessment of the action's library effects are focused primarily on this facility.

### Jefferson Market

The Jefferson Market Library at 425 Sixth Avenue (near Greenwich Avenue) is a regional library branch that serves the entire Greenwich Village community. As such, it serves an area generally encompassing Manhattan Community District 2 which has a population of 93,119 and overlapping the catchment of area some neighborhood branches including Muhlenberg. It is located almost three-quarters of a mile from the southeastern edge of the rezoning area on the block generally bounded by Greenwich Avenue, West 10th Street, and Sixth Avenue in a notable historic building. This library branch has approximately 68,339 volumes, with a total annual circulation of 341,956.

Unlike Muhlenberg, the Jefferson Market Library is open six days a week (currently Monday through Saturday). It offers a variety of programs for children and adults including film, story hours, and reading-aloud programs for children. The library also has free public Internet access and assistive technology (including Closed-circuit Television Enlarger [CCTV]) and computer screen magnification software.

In total, the Jefferson Market Library Branch occupies four levels of the locally and nationally recognized Jefferson Market Courthouse building. The building is in generally good condition, accessible to the handicapped, and received a Landmarks Preservation Commission approved roof replacement in the mid-1990s.

This facility is expected to serve as a secondary facility for most residents generated by the proposed action, as most residents would live further than three-quarters of a mile and would be closer to Muhlenberg. Therefore, the assessment of the proposed action's demand for library services does not focus on the Jefferson Market Branch Library.

### **Future Without the Proposed Action**

In the future without the proposed action through 2013, no major renovations are expected to occur at the Muhlenberg Branch Library. Currently, there is capital funding in place for limited interior

renovations to the Jefferson Market Branch Library including improved ADA access, a public restroom, upgraded passenger and staff elevators, and some reorganization and upgrading of public and staff spaces.

New residential development expected to occur by 2013 would change the population in the catchment area served by the Muhlenberg Library Branch. This would include the No-Action developments summarized in Table 4-3. These consist of new developments associated with the planned Hudson Yards development plan and rezoning, projected development associated with the recently approved Ladies' Mile rezoning, as well as other expected projects. As noted above in the schools analysis, these developments would result in ~~5,987~~ 5,989 new dwelling units, in addition to which a new 1,100-student Fashion Institute of Technology (FIT) dormitory would also add to the area's population. As a result of these No-Action developments, the residential population in the study area is expected to increase by approximately ~~11,671~~ 11,675, including 8,325 Hudson Yards residents, 1,592 Ladies' Mile residents, ~~654~~ 658 residents from other projects, and 1,100 student residents in the FIT dormitory. These residents would be located within the Muhlenberg catchment area, although some Hudson Yards residents also may be within the catchment area of the Columbus Library Branch located at 742 Tenth Avenue, at the corner of W. 50th Street. These new residents would represent an increase in population of approximately 8.2 percent over the existing population in the Muhlenberg catchment area. This change in population would be relatively small and is not expected to overburden library services at the branch.

### **Future With the Proposed Action**

As discussed above in the introduction to the Libraries section of this chapter, by 2013 a net increase of approximately 8,287 residents housed in 4,708 DUs would be added to the proposed action area as a consequence of the proposed action. This would represent a population increase in the Muhlenberg catchment area of 5.4 percent over No-Action conditions. According to the *CEQR Technical Manual*, if a proposed action would increase the study area population by 5 percent or more over No-Action levels, a significant impact could occur if this increase would impair the delivery of library services. Significant impacts would warrant consideration of mitigation. However, as stated in the *No. 7 Subway Extension - Hudson Yards Rezoning and Development Program FGEIS* (November 2004) [CEQR No. 03DCP031M], NYPL has indicated that projected increases in local library population attributed to the Hudson Yards project (through complete build-out in 2025), the West Chelsea rezoning, and other developments in the area could be accommodated by the library system's existing resources. In addition, the proximity of the Jefferson Market Branch Library as well as Midtown Manhattan's Central Libraries, with their extensive resources, to the West Chelsea proposed action area would help to absorb demand on library resources in the proposed action area. Therefore, no significant adverse impact to public libraries is expected to occur.

## D. HEALTH CARE FACILITIES

Health care facilities include public, proprietary, and non-profit facilities that accept public funds (usually in the form of Medicare and Medicaid reimbursements) and that are available to any member of the community. The types of facilities include hospitals, nursing homes, clinics and other facilities providing outpatient health services. According to the *CEQR Technical Manual*, the CEQR assessment of health care focuses on emergency and outpatient ambulatory services that could be affected by the introduction of a large low-income residential population which may rely heavily on nearby hospital emergency rooms and other public outpatient ambulatory services.

The *CEQR Technical Manual* indicates that project-induced impacts on inpatient hospital and nursing home services are unlikely because insured patients have access to such services citywide and, with substantial declines in the need for acute care hospital beds in New York City and the nation, the potential for overutilization of inpatient beds is rarely an issue. A detailed analysis of impacts on hospital and nursing home inpatient services is therefore generally limited to actions that would have a direct effect on the facility itself. As the proposed action would not result in any direct effects on health care facilities, an assessment of hospital and nursing home inpatient services is not warranted.

Analyses of health care facilities are generally conducted for projects that introduce a sizeable number of new low- or moderate-income residents who may rely on nearby emergency and other outpatient clinic services. Low-income populations are more likely to make more emergency room visits than higher-income populations.<sup>2</sup> If the action would generate greater than 600 low- to moderate-income units, there may be increased demand on local public health care facilities which may warrant further analysis. As noted above, the RWCDs for the proposed action includes 657 affordable housing DUs for low- and moderate-income households.

There typically is no specific study area for the analysis of hospitals or other health care facilities, because the catchment areas for these facilities can vary substantially. The *CEQR Technical Manual* suggests that such facilities be mapped within a “mile-or-so” radius from the proposed action area. In accordance with CEQR guidelines, hospital emergency room services and outpatient ambulatory care facilities (regulated by the NYS Department of Health and Office of Mental Health) within approximately one mile of the proposed action area boundary have been identified and are discussed below. Impacts are identified if the proposed action would result in an increase of 5 percent or more in the demand for services over the No-Action condition, or that would result in a facility exceeding its capacity. Private doctors’ offices and other similar resources are not identified within the study area.

The insurance characteristics of the existing and future low-income population within the study area are not known. For purposes of this analysis, the national emergency room visit rate of 65.4

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<sup>2</sup> *National Healthcare Disparities Report*, [www.qualitytools.ahrq.gov/qualityreport](http://www.qualitytools.ahrq.gov/qualityreport)

Medicaid patient visits per 100 persons insured by Medicaid was utilized to determine the number of emergency room visits to study area hospitals.<sup>3</sup> The national visit rate for Medicaid patients is being utilized for conservative analysis purposes as this particular rate was the highest out of all other payment sources (e.g. Medicare, no insurance, and private insurance) in addition to the fact that Medicaid is only available to low-income individuals and families.

## **Existing Conditions**

There are 97 outpatient health care facilities located in the study area for health care resources, offering general medical care, alcohol and substance abuse services, mental health services, and mental retardation and developmental disabilities services. This also includes two hospital emergency room facilities processing outpatient ambulatory care visits.

### ***Hospitals and Emergency Rooms***

As shown in Figure 4-3 and Table 4-10, within one mile of the proposed action area, there is one hospital, with an emergency room, available to residents, workers, and others in the study area. This is St. Vincent's Hospital Manhattan, located at the corner of W. 12th Street and Seventh Avenue. It is the closest hospital to most of the projected development sites and is part of the St. Vincent's Medical Center. It had approximately 121,031 outpatient ambulatory visits and 55,867 emergency room visits in 2001. There is one additional hospital located approximately one block outside a mile radius of the proposed action area and given its proximity it is included in the health care study area. This is St. Clare's Hospital and Health Center, which is the closest hospital for the projected development sites at the northern end of the proposed action area. In 2003 this facility became the St. Vincent's Midtown Division of St. Vincent's Hospital Manhattan. This hospital had approximately 96,889 outpatient ambulatory visits and 26,787 emergency room visits in 2001. Combined, these two hospitals had approximately 217,920 outpatient ambulatory visits and 82,654 emergency room visits.

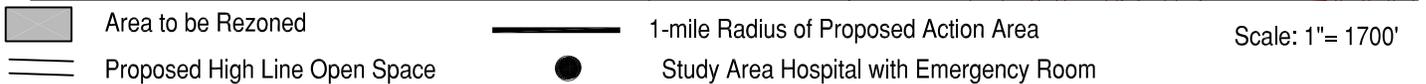
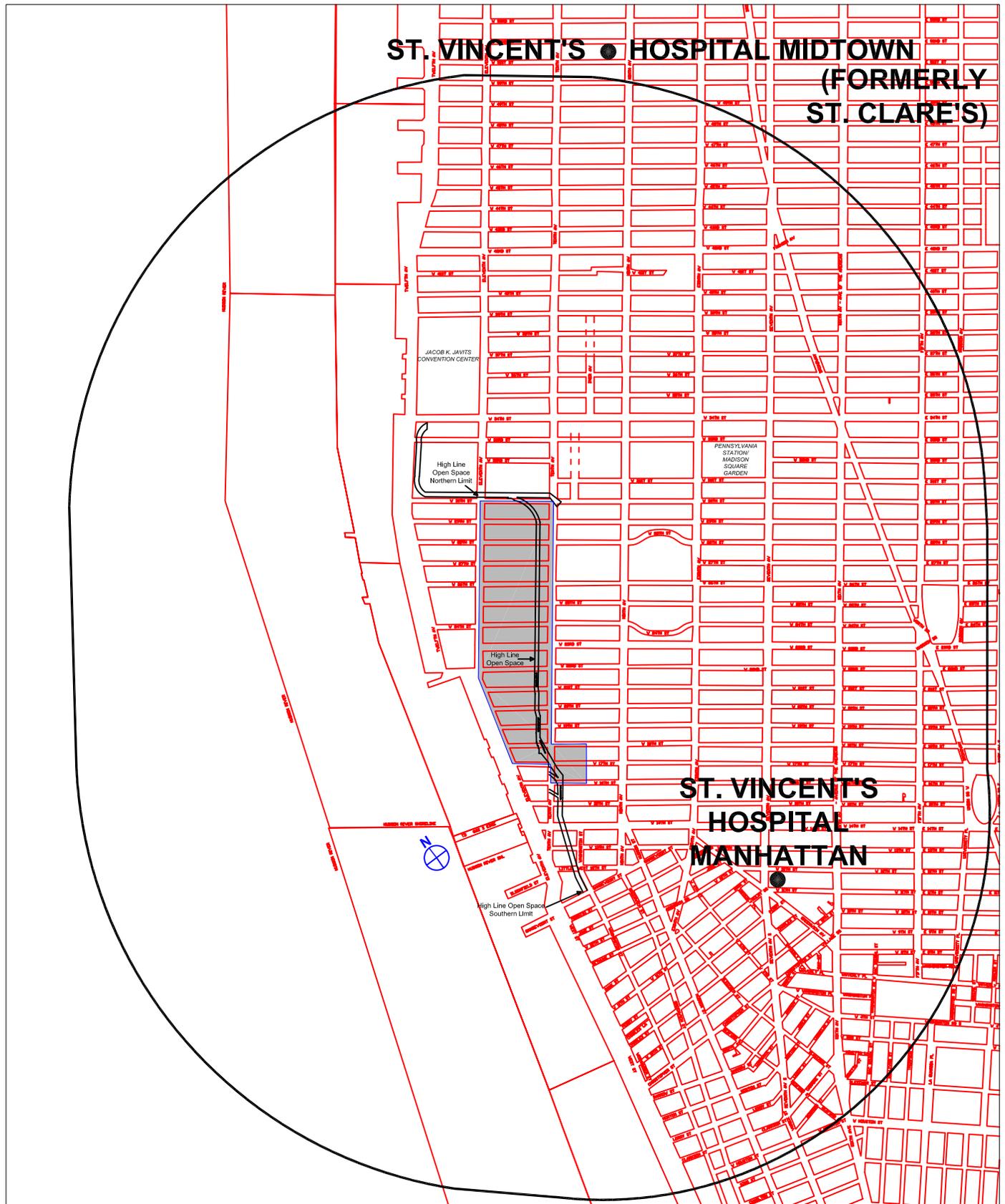
### ***Other Outpatient Services***

There are 95 outpatient health care service facilities, besides hospitals, within the West Chelsea health care study area (as inventoried in the DCP *Selected Facilities and Program Sites in New York City, 2003 Edition*). They are dispersed throughout the area and provide a full range of ambulatory care services. These are listed, with community district and address, in Table 4-11.

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<sup>3</sup>See Centers for Disease Control and Prevention's *Advance Data From Vital and Health Statistics: National Hospital Ambulatory Medical Care Survey: 2002 Emergency Department Summary*, March 18, 2004, No. 340, p. 4.

Figure 4-3  
Study Area E.R. Hospitals



**Table, 4-10, Hospitals and Emergency Rooms in West Chelsea Health Care Study Area**

Map No.	Hospital	Address	Outpatient Dept. Visits	Emergency Room Visits
<b>Within 1-mile Radius</b>				
1	St. Vincent's Hospital Manhattan	170 W. 12th St.	121,031	55,867
<b>Just Outside 1-mile Radius</b>				
2	St. Clare's Hospital (1)	415 W. 51st St.	96,889	26,787
<b>TOTAL</b>			217,920	82,654

Source: *United Hospital Fund Health Care Annual Update, 2004* (2001 data)

(1) Since 2003, this facility is now St. Vincent's Midtown Division of St. Vincent's Hospital Manhattan.

### **Future Without the Proposed Action**

In the future without the proposed action, it is expected that demand for public and publicly assisted outpatient health care services in the West Chelsea health care study area is expected to increase as a result of new residents. While the low- and moderate-income population is expected to increase, there are no known plans for new hospital-based or other outpatient service facilities in the study area.

In the future without the proposed action, the low- to moderate-income residential population is estimated to increase by 2,214 residents in the health care study area by 2013 (refer to Table 4-3). This consists of residents in affordable housing units created in the Hudson Yards project area and in the Ladies' Mile rezoning area. In Hudson Yards approximately 18.1 percent of the 4,657 DUs projected in that area by 2013 are expected to use voluntary mechanisms such as the 80/20 program and the Inclusionary Housing bonus to provide units affordable to and earmarked for low- or moderate-income residential units. This results in approximately 843 low- and moderate-income households, with an estimated average household size of 2.50. In the Ladies' Mile, by 2013, 62 units of affordable to low- and moderate-income households are expected to be developed, with an estimated average household size of 1.71. Other No-Action developments in the proposed action area and surrounding areas are assumed to not create any affordable housing units.

The increase in the No-Action population is not expected to affect overall provision of health care services, based on the extensive array of existing facilities serving the area. Assuming the national emergency room visit rate of 65.4 Medicaid patient visits per 100 persons insured by Medicaid annually, the 2,214 additional low-moderate income residents could add a total of about 1,448 annual visits, which is equal to 1.8 percent of all existing study area emergency room visits. The incremental change in visits would be small in comparison to the thousands of overall visits accommodated by the existing health care facilities in the study area. Information on No-Action emergency room visits are summarized in Table 4-12.

**Table 4-11, Summary of Outpatient Health Care Facilities in the West Chelsea Health Care Study Area**

CD	Facility Name	Address	Type
2	Lower West Side Children's Center	219 Sullivan St.	Free Standing Health Center
2	VIP Medical Associates	72 5th Ave.	Free Standing Health Center
2	Elizabeth Seton Childbearing Center	222 W. 14th St.	Free Standing Health Center
2	Housing Works Lower Manhattan ADHCP	320 W. 13th St.	Free Standing Health Center
2	Guttman Diagnostic Center	55 5th Ave.	Hospital Affiliated Health Center
2	O'Toole Outpatient Services	36 7th Ave.	Hospital Affiliated Health Center
2	Southern Manhattan Dialysis Center	330 W. 13th St.	Dialysis Center
2	Greenwich House, Inc. Med. Sup. Op-Sa	55 & 80 5th Ave.	Med. Supervised Outp. Svc - Alcohol/Sub abuse
2	St. Vincent's Alcoholism Center	203 W. 12th St.	Med. Supervised Outp. Svc - Alcohol/Sub abuse
2	Beth Israel NMTP Clinic	201 W. 13th St.	Methadone Treatment Clinic - Sub Abuse
2	NY Society F/T Deaf Mental Health Program	817 Broadway	Mental Health Clinic/Day Treatment
2	5th Ave. Ctr. F/Counseling & Psychotherapy	10 W. 10th St.	Mental Health Clinic/Day Treatment
2	Greenwich House Sr. Citizen Health Cons Ctr	27 Barrow St.	Mental Health Clinic/Day Treatment
2	St. Vincent's Child & Adolescent Clinic	144 W. 12th St.	Mental Health Clinic/Day Treatment
2	St. Vincent's Continuing Day Treatment	203 W. 12th St.	Mental Health Clinic/Day Treatment
2	Manhattan Counseling & Psychotherapy Assoc.	61 W. 9th St.	Day Training/Workshop-Mental Health
2	Assn. F/Help of Retarded Children	200 Varick St.	Clinic/Day Treatment -MR/DD
2	Young Adult Institute	320 W. 13th St.	Clinic/Day Treatment -MR/DD
2	Assn. F/Help of Retarded Children	320 W. 13th St.	Clinic/Day Treatment -MR/DD
2	Federation Employment & Guidance Svc.	62 W. 14th St.	Day Training - MR/DD
2	Assn. F/Help of Retarded Children	200 Varick St.	Day Rehabilitation - MR/DD
2	Assn. F/Help of Retarded Children	200 Varick St.	Day Training/Workshop - MR/DD
4	Flemister House	527-31 W. 22nd St.	Free Standing Health Center
4	Premier Healthcare D & T Ctr.	460 W. 34th St.	Free Standing Health Center
4	Michael Callen-Audre Comm. Health Ctr.	356 W. 18th St.	Free Standing Health Center
4	Frost'd Primary Care, Inc.	369 8th Ave.	Free Standing Health Center
4	United Cerebral Palsy of NY State	330 W. 34th St.	Free Standing Health Center
4	West Midtown Medical Group	311 W. 35th St.	Free Standing Health Center
4	Union Health Center - ILGWU	275 7th Ave.	Free Standing Health Center
4	New York Diagnostic Center	330 W. 42nd St.	Free Standing Health Center
4	H S Systems Inc.	321 W. 44th St.	Free Standing Health Center
4	Covenant House	460 W. 41st St.	Free Standing Health Center
4	Ryan Chelsea-Clinton Health Center	651 10th Ave.	Free Standing Health Center

**Table 4-11 (continued)**

<b>CD</b>	<b>Facility Name</b>	<b>Address</b>	<b>Type</b>
4	NY Cornell Sports Med. Ctr., Chelsea Piers	Pier 60	Hospital Affiliated Health Center
4	Chelsea Internal Medicine & Senior Health	275 8th Ave.	Hospital Affiliated Health Center
4	Senior Health at Penn South	275 8th Ave.	Hospital Affiliated Health Center
4	Chelsea Pediatrics	365 W. 25th St.	Hospital Affiliated Health Center
4	Penn South Geriatric Clinic	305 W. 28th St.	Hospital Affiliated Health Center
4	PS 51 (SBHC)	520 W. 45th St.	HHC School Based Health Clinic
4	Lower Manhattan District Health Center	303 9th Ave.	HHC Oral Health Clinic
4	W MidtownMgt. Grp-Alcoholism Clinic	311 W. 35th St.	Med. Supervised Outp. Svc.-Alcohol Sub Abuse
4	W. Midtown Mgt. - Med Sup. Op-Sa	505 8th Ave.	Med. Supervised Outp. Svc.-Alcohol Sub Abuse
4	First Steps to Recovery-Med Sup. Op-SA	310-12 W. 47th St.	Med. Supervised Outp. Svc.-Alcohol Sub Abuse
4	NRI Group LLC Med Sup. Op-Sa	455 W. 50th St.	Med. Supervised Outp. Svc.-Alcohol Sub Abuse
4	W. Midtown Med Corp.-MMTP Clinics 1 & 2	311 W. 35th St.	Methadone Treatment Clinic- Sub Abuse
4	Beth Israel Medical Ctr. MMTP Clinic	721 9th Ave.	Methadone Treatment Clinic- Sub Abuse
4	Hudson Guild Counseling Service	441 W. 26th St.	Mental Health Clinic/Day Treatment
4	Safe Space West A	300 W. 43rd St.	Mental Health Clinic/Day Treatment
4	Puerto Rican Family Adolescent Day Treatment	145 W. 15th St.	Mental Health Clinic/Day Treatment
4	Postgraduate West Rehabilitation Ctr. CDT	344 W. 36th St.	Intensive Psychiatric Rehab
4	Greenwich House	303 9th Ave.	Mental Health Clinic/Day Treatment
4	Fountain House, Inc.	425 W. 47th St.	Vocational/Social Training- Mental Health
4	UCP of New York City, Inc.	309 W. 23rd St.	Clinic/Day Treatment MR/DD
4	Assn. F/Help of Retarded Children	601 W. 50th St.	Clinic/Day Treatment MR/DD
4	Young Adult Institute	460 W. 34th St.	Day Rehabilitation- MR/DD
4	Assn. F/Help of Retard Children	601 W. 50th St.	Day Rehabilitation- MR/DD
4	United Cerebral Palsy of NY State	330 W. 34th St.	Supported/Transitional Employment- MR/DD
5	Community Family Planning Council	184 5th Ave.	Free Standing Health Center
5	League for the Hard of Hearing	71 W. 23rd St.	Free Standing Health Center
5	United Wire Metal & Machine Med Ctr	10 E. 15th St.	Free Standing Health Center
5	Sidney Hillman Family Practice	16 E. 16th St.	Free Standing Health Center
5	AHRC Healthcare Inc.	200 Park Ave. So.	Free Standing Health Center
5	The Chelsea Health Services	241 W. 30th St.	Hospital Affiliate Health Center
5	Phillips Family Practice	16 E. 16th St.	Hospital Affiliate Health Center
5	Philips Ambulatory Care Center	10 Union Sq. E	Hospital Affiliate Health Center
5	Daytop Village- Med. Sup. Op-Sa	500 8th Ave.	Med. Supervised Outp. Svc.-Alcohol Sub Abuse

**Table 4-11 (continued)**

<b>CD</b>	<b>Facility Name</b>	<b>Address</b>	<b>Type</b>
5	Exponents Inc.- Med. Sup. Op-Sa	151 W. 26th St.	Med. Supervised Outp. Svc.-Alcohol Sub Abuse
5	Women in Need, Inc.- Med. Sup. Op-Sa	115 W. 31st St.	Med. Supervised Outp. Svc.-Alcohol Sub Abuse
5	TRI Center, Inc.- Med. Sup. Op-Sa	1369 Broadway	Med. Supervised Outp. Svc.-Alcohol Sub Abuse
5	Center Comm./Alternatives Med Sup Op-Sa	39 W. 19th St.	Med. Supervised Outp. Svc.-Alcohol Sub Abuse
5	Realization Center, Inc.- Med Sup Op-Sa	19 Union Sq. W	Med. Supervised Outp. Svc.-Alcohol Sub Abuse
5	NYS Assoc./Retarded Children-Alcsm Clinic	200 Park Ave. So.	Med. Supervised Outp. Svc.-Alcohol Sub Abuse
5	Bliss-Poston/2nd Wind Drug Abs Clinic	152 Madison Ave.	Med. Supervised Outp. Svc.-Alcohol Sub Abuse
5	Areba/Casriel Inst.- Drug Abuse & Alcsm Clinics	145 W. 45th St.	Med. Supervised Outp. Svc.-Alcohol Sub Abuse
5	Areba/Casriel Inst.- M.S. With/Op	145 W. 45th St.	Med. Supervised Crisis Svc.-Alcohol Sub Abuse
5	Daytop Village- D.F Outpatient	500 8th Ave.	Non-Med. Sprvsd Outp. Svc. Alcohol/Sub Abuse
5	Fortune Society-Outpt. Drug Clinic	39 W. 19th St.	Non-Med. Sprvsd Outp. Svc. Alcohol/Sub Abuse
5	Greenwich House- Methadone Keep	24 W. 20th St.	Outpatient Methadone Treatment- Sub Abuse
5	Greenwich House- MMTP Clinic	24 W. 20th St.	Methadone Treatment Clinic- Sub Abuse
5	Employment Pgm. for Recovered Alcoholics	225 W. 34th St.	Vocational Rehab- Alcoholism/Sub Abuse
5	Greenwich House AIDS Mental Health Project	122 W. 27th St.	Mental Health Clinic/Day Treatment
5	McMurray Clinic	115 W. 31st St.	Mental Health Clinic/Day Treatment
5	League for the Hard of Hearing	71 W. 23rd St.	Mental Health Clinic/Day Treatment
5	Blanton-Peale Counseling Center	3 W. 29th St.	Mental Health Clinic/Day Treatment
5	The Children's House	25 W. 17th St.	Mental Health Clinic/Day Treatment
5	Fedcap Rehabilitation Service	212 W. 35th St.	Vocational/Social Training- Mental Health
5	Lifespire, Inc.	27 W. 23rd St.	Clinic/Day Treatment- MR/DD
5	Assoc. in Manhattan for Autistic	25 W. 17th St.	Day Training-MR/DD
5	Young Adult Institute and Workshop, Inc.	22 E. 28th St.	Day Training-MR/DD
5	Assn. F/Help of Retarded Children	200 Park Ave. So.	Clinic/Day Treatment- MR/DD
5	Assn. F/Help of Retarded Children	252-54 W. 29th St.	Day Rehabilitation- MR/DD
5	Assoc. in Manhattan for Autistic	25 W. 17th St.	Day Rehabilitation- MR/DD
5	Lifespire, Inc.	27 W. 23rd St.	Day Rehabilitation- MR/DD
5	Lifespire, Inc.	27 W. 23rd St.	Day Training/Workshop- MR/DD
5	Job Path, Inc.	22 W. 38th St.	Supported/Transitional Employment- MR/DD

Source: *Selected Facilities and Program Sites in New York City: Manhattan, 2003 Edition*

**Table 4-12, West Chelsea Health Care Study Area, Annual Emergency Room Visits**

<b>Analysis Period</b>	<b>Annual ER Visits</b>	<b>% change</b>
Existing Conditions (from Table 4-10)	82,654	--
2013 No-Action Conditions	84,102	1.8% (1)
2013 Incremental Increase due to Proposed Action	1,075	--
2013 With-Action Conditions	85,177	1.3% (2)

(1) Change from Existing to No-Action conditions.

(2) Change from No-Action to With-Action conditions.

### **Future With the Proposed Action**

By 2013 in the future with the proposed action, it is expected that there would be a 657-unit increase in the number of low- and moderate-income units as compared to No-Action conditions. Based on an assumed average household size of 2.50 persons, these units would be occupied by 1,643 residents. Based on the Medicaid emergency room rate cited above, the addition of 1,643 low- and moderate-income residents to the study area would add 1,075 annual visits to study area emergency rooms. As shown in Table 4-12, this represents a 1.3 percent increase over No-Action conditions. Based on this small incremental change in the number of annual emergency room visits, and the availability of many other ambulatory care facilities, no significant increases in utilization of publicly funded outpatient facilities are expected in 2013. Accordingly, the action-generated increase, which is less than the 5 percent threshold for significance, is not expected to overburden health care facilities in the study area, and no significant adverse impacts on health care services are expected as a result of the proposed action.

### **E. DAY CARE CENTERS (PUBLICLY FUNDED)**

The *CEQR Technical Manual* requires a detailed analysis of publicly funded day care centers when the proposed action would produce substantial numbers of subsidized, low-to moderate-income family housing units, that may generate a sufficient number of eligible children to affect the availability of slots at public day care centers. Private day care facilities are discussed but not considered in the quantitative analysis of action-generated effects.

Typically, proposed actions that generate 50 or more eligible children require further analysis. Table 3C-4 of the *CEQR Technical Manual* calculates by borough the estimated number of low- to moderate-income housing units that could yield at least 50 children eligible for government subsidized child care. According to the table, for Manhattan, 357 low-income units or 417 low-to moderate-income units would yield more than 50 children eligible for public day care. Impacts are identified if the proposed action would result in demand for slots in publicly funded day care centers greater than remaining capacity and the increase in demand would be five percent or more over the collective capacity of the publicly funded day care centers in the study area.

The NYC Administration for Children’s Services (ACS) provides subsidized child care for children ages two months through 12 years through several types of service providers: publicly funded day care centers, institutional-based private group day care, home-based group and family child care, informal child care, and Head Start. ACS does not directly operate child care programs. It contracts with hundreds of private, non-profit providers that operate child care programs across the City. It also issues vouchers to eligible families that may be used by parents to purchase care from any legal childcare provider in the City.

These subsidized services are provided by ACS for children of income-eligible households and include the use of federally funded early childhood education and family support programs. In order for a family to receive subsidized child care services, the family must meet specific financial and social eligibility criteria that are determined by federal, state, and local regulations. Gross income must fall below a level set between 225 percent and 275 percent of national poverty thresholds depending on family size, and the family must have an approved “reason for care,” such as involvement in a child welfare case or parental participation in a “welfare-to-work” program. In order to determine whether a family is eligible for subsidized child care, the parent must appear at an eligibility interview at an ACS child care office.

Publicly funded day care centers, under the auspices of the City’s Agency for Child Development (ACD) within ACS, provide care for the children of income-eligible households. Space for one child in such day care centers is termed a "slot." These services are available for income-eligible children up to the age of 12, but are used predominately by children 5 years old and younger. The name, location, and enrollment information for publicly funded day care centers in the study area are provided below under “Existing Conditions.”

While some children are enrolled in these publicly funded day care centers, most children are served, as noted above, through contracts with hundreds of private and non-profit organizations. Group family child care is provided for 7 to 12 children in a home with a provider and an assistant, and licensed by the NYC Department of Health and Mental Hygiene. Family child care for 3 to 7 children is offered by a licensed provider in his/her home. The majority of family and group child care providers in New York City are registered with a child care network, which provides access to training and support services.

Informal child care is usually provided by a relative or neighbor for no more than two children. Head Start is a federally funded child care program that has, since its inception, provided parents with part-day child care services.

Since there are no locational requirements for enrollment in day care centers, and some parent/guardians choose a day care center close to their employment or schooling rather than their residence, the service areas of these facilities can be quite large and not subject to strict delineation to identify a study area. Nevertheless, the center(s) closest to the project site are more likely to be subject to increased demand. According to the *CEQR Technical Manual*, the locations of publicly funded group day care centers within a mile or so of the project site should be shown.

## Existing Conditions

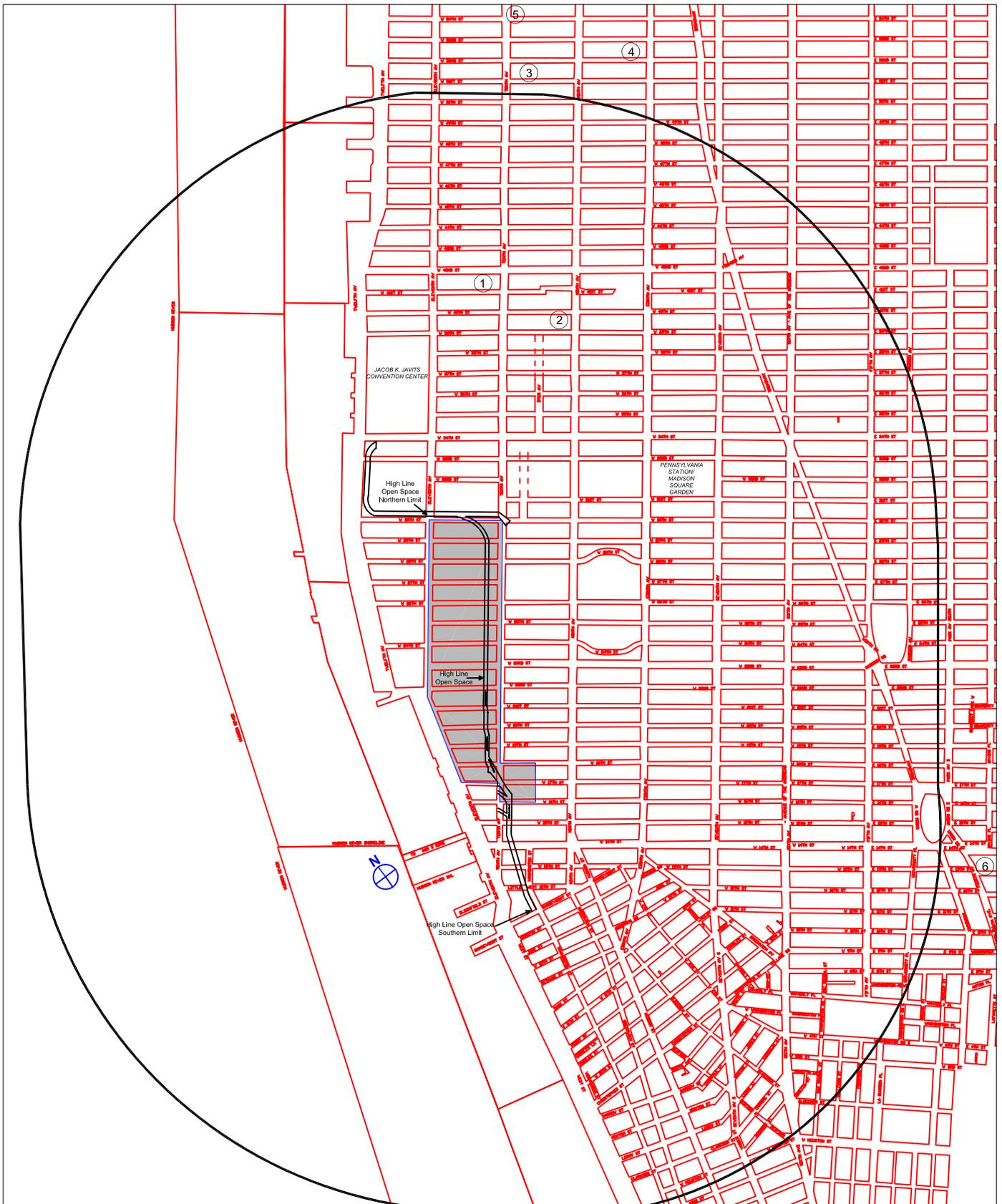
Figure 4-4 shows publicly funded day care facilities within an approximate one-mile radius of the proposed action area, and Table 4-13 indicates the capacity and enrollment for each facility, as well as the length of waiting lists where applicable. As shown in Table 4-13 and Figure 4-4, there are presently 6 public day care facilities within or just outside a one-mile radius of the proposed action area. None of these day care facilities are located within the proposed action area, and four of the six study area facilities are located just outside the one-mile radius. These facilities are well utilized, with a total capacity of approximately 237 slots, a current enrollment of 211, and a waiting list of up to 38 children, resulting in a net unmet demand of 12 slots.

**Table 4-13, Publicly Funded Day Care Centers in Study Area**

Map No.	Name	Address	Capacity	Enrollment	Waiting List
<i>Within 1-mile Radius of the Proposed Action Area</i>					
1	American Red Cross Emergency	515 W. 41st St.	37	28	7
2	Children's Day Care	410 W. 40th St.	64	54	10-15
<i>Just Outside 1-mile Radius of the Proposed Action of the Proposed Action Area</i>					
3	Children's Day Care Center	457 W. 51st St.	60	63	16
4	LYFE Manhattan High School	317 W. 52nd St.	8	6	0
5	LYFE West Manhattan Outreach	850 10th Ave.	8	5	0
6	Bank Street	113 E. 13th St.	60	55	NA
<b>Total</b>			237	211	38
<b>Net Unmet Demand</b>			--	--	12

In addition to these public group day care facilities, privately-operated, group day care facilities and home-based family child care providers which accept publicly subsidized enrollees are also available to meet study area demand. However, these facilities are not included in the quantitative analysis. There are a number of privately-operated group day care facilities in the study area, including Hudson Guild Children's Center facility at 459 W. 26th Street, less than a half-block from the proposed action area. In addition, there are approximately 2,083 public day care slots throughout Manhattan administered by 13 network providers through home-based group and family day care facilities. According to ACS, these home-based facilities tend to absorb unmet demand at day care facilities and the home-based system adds more capacity, or host households, as demand increases. Information on these network is presented in Table 4-14.

As discussed above, parents/guardians also have the option of using ACS vouchers to purchase day care from public and private providers both within and outside the study area, potentially in



neighborhoods close to parents' workplaces or schools. The portability of ACS vouchers indicates that services beyond the study area can be and are used by parents of eligible children.

**Table 4-14, Manhattan Family Child Care Networks**

<b>Name</b>	<b>Address</b>	<b>Estimated Network Spaces</b>
Borough of Manhattan Community College Child Care Network	199 Chambers St.	36
Chama Child Development Center	218 W. 147th St.	65
Community Life Family Day Care	15 Mt. Morris Park	232
East Harlem Council FDC	2253 3rd Ave.	138
Emmanuel Family Day Care	737 E. 6th St.	61
Graham Windham Family Day Care Network	33 Irving Pl.	540
Hamilton Madison Family Child Care Network	10 Catherine St.	150
Hartley House Family Day Care	413 W. 46th St.	150
Neighborhood Children's Family Day Care	1833 Lexington Ave.	90
RENA Family Day Care	639 Edgecombe Ave.	250
Salem Family Day Care	211 W. 129th St.	62
Sheltering Arms Family Day Care	2493 7th Ave.	65
University Settlement Family Day Care	184 Eldridge St.	244
<b>Total Child Care Services</b>		<b>2,083</b>

Source: Child Care Inc., 2003. Note: Residence-based day care located throughout Manhattan.

### **Future Without the Proposed Action**

No new publicly funded day care centers are expected in the study area by 2013.

In terms of increased demand, as noted above in the discussion of health care facilities are shown in Table 4-3, there are expected to be an additional 905 low- and moderate-income DUs in the study area by 2013. Based on *CEQR Technical Manual* Table 3C-4, this results in the addition of 109 children under the age of 12 who would potentially be eligible for publicly funded day care (a rate of 0.12 per unit for low-moderate income units in Manhattan). This No-Action increment could increase the net unmet demand from 12 slots to 121 slots, suggesting a significant shortfall. Utilization of institution-based private day care also may be at capacity. However, as noted by ACS, demand in excess of available day care spots is typically absorbed by the available network of home-based care. Also, some parents choose to take their children to other day care centers outside the study area (e.g., closer to work). The full No-Action increment also would be somewhat reduced

by the day care focus of publicly funded facilities on children age 5 and under, even though children up to age 12 are eligible.

**Future With the Proposed Action**

The proposed action does not include the provision of any additional publicly funded day care slots. In terms of demand, with 657 low- and moderate-income units projected to occur as a result of the proposed action by 2013, up to 79 children under age 12 would be eligible for publicly funded day care. As a result, the net unmet demand in the study area would increase from 121 to 200 slots. According to *CEQR Technical Manual* guidelines, a significant adverse impact could result if the proposed action results in: “(1) a demand for slots greater than remaining capacity of day care center(s), and (2) that demand constitutes an increase of 5 percent or more of the collective capacity of the day care centers serving the area of the proposed action.” As shown in Table 4-15, demand for slots is greater than remaining capacity under Existing conditions and is expected to worsen under No-Action and even further under With-Action conditions. With-Action conditions would increase demand by 33 percent as a percentage of capacity. As the proposed action would result in an increase of five percent or more over capacity, a significant adverse impact to publicly funded day care service in the study area could occur in 2013.

**Table 4-15, Increased Demand for Publicly Funded Day Care Slots: 2013**

	Capacity	Cumulative Demand Over Capacity	Net Increase in Demand as % of Capacity
Existing	237	12	--
2013 Future Without the Proposed Action (No-Action)	237	121	46%
2013 Future With the Proposed Action (With-Action)	237	200	33%

Note: The 905 No-Action low-moderate income DUs expected to generate demand for 109 day care slots; the 657 With-Action low-moderate income DUs expected to generate demand for 79 day care slots.

However, this With-Action increase in demand would be offset by limiting factors noted previously: namely that some parents use day care facilities outside their residential community, publicly funded day care is focused on children age 5 and under, and, as noted by ACS, demand in excess of available day care slots is typically absorbed by the available network of home-based care. Nonetheless, the potential increase is considered a significant adverse impact, and available mitigation is discussed in Chapter 22, “Mitigation.”

## **F. POLICE AND FIRE SERVICES**

### **Police Services**

The proposed action area is in the service area of NYPD's 10th Police Precinct. This precinct is located at 230 W. 20th Street, approximately a half-mile from the proposed action area boundary. The precinct serves an area of approximately 0.93 square miles which is bounded by W. 43rd Street on the north, Ninth Avenue from W. 43rd to W. 29th streets and Seventh Avenue from W. 29th to W. 14th streets on the east, W. 14th Street on the south, and the Hudson River shoreline on the west. The precinct location and service area boundary are shown in Figure 4-5. Approximately 150 uniformed staff members are assigned to the 10th Precinct.

Other NYPD facilities serving the proposed action area include the Manhattan Traffic Task Force, Housing Bureau Police Service Area 4, and Manhattan Transit District 2. Manhattan Traffic Task Force provides additional traffic-related protection and services, primarily south of 59th Street. Housing Bureau police units are responsible for providing safety and security for the City's public housing developments. Police Service Area 4 patrols approximately 428 buildings with nearly 40,000 residents across 5 precincts, including the 10th. Manhattan Transit District 2 is one of four in the borough which provide police service for the stations and lines of the NYC Transit system. Stations it serves include those closest to the proposed action area: IND Eighth Avenue 23rd Street (C, E) and 14th Street (A, C, E, L) stations, IRT Seventh Avenue 28th Street (1, 9), 23rd Street (1, 9), 18th Street (1, 9), and 14th (1, 2, 3, 9) Street stations, and IND Sixth Avenue 23rd Street (F, V) and 14th Street (F, V, L) stations.

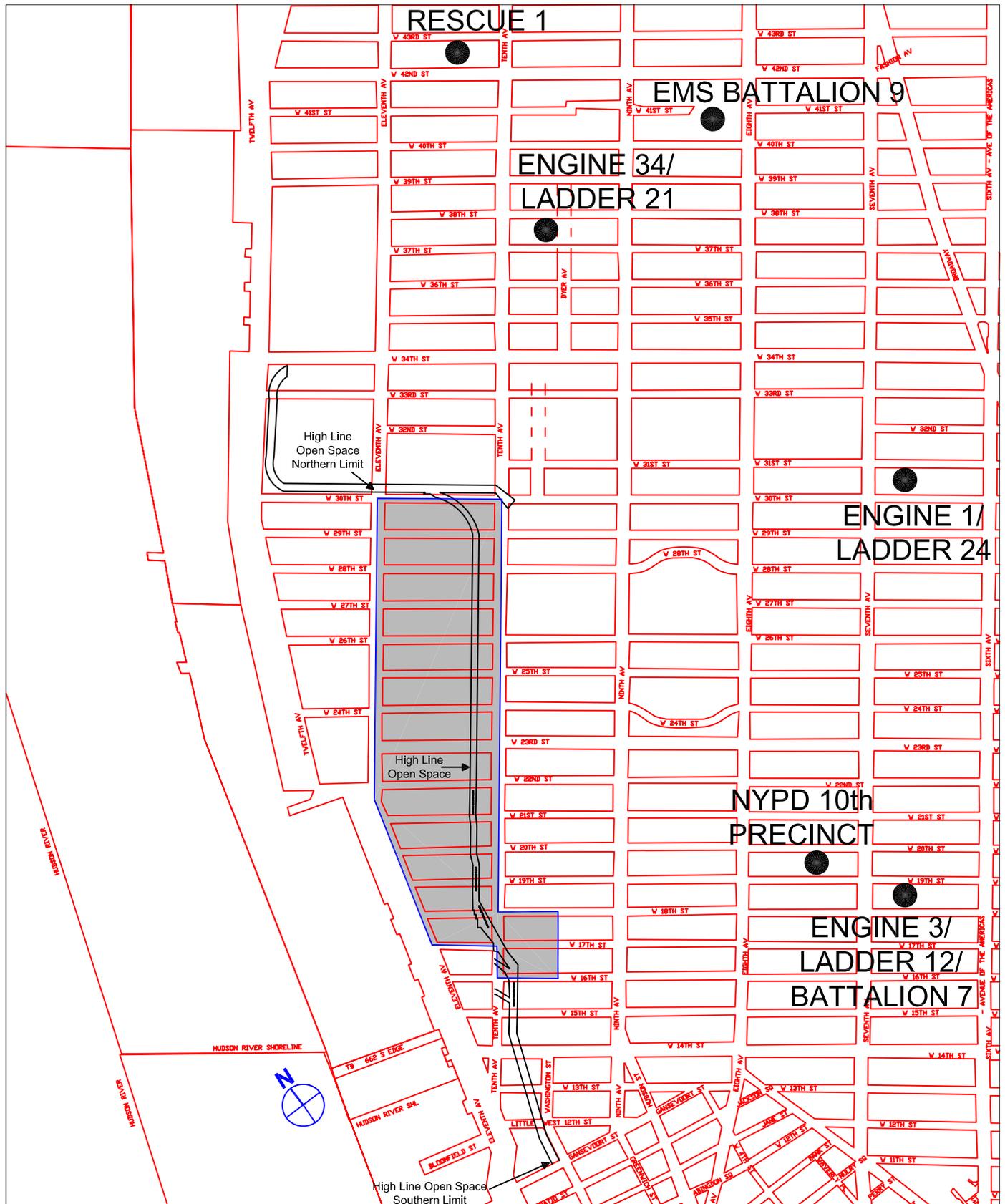
As noted on page 3C-2 of the *CEQR Technical Manual*, the Police Department independently reviews its staffing levels against a precinct's population, area coverage, crime levels, and other local factors when assessing its ability to serve the community or need to redeploy services.

### **Fire Services**

In New York City, FDNY engine companies carry hoses, ladder companies provide search, rescue, and building ventilation functions, and rescue companies specifically respond to fires or emergencies in high-rise buildings. Approximately 25 personnel are staffed in each engine company and ladder company. Therefore, if a firehouse contains one engine and one ladder company a total of 50 personnel are assigned to that facility. Typically, during one shift each engine and ladder company is staffed by five and six firefighters, respectively. Normally, a total of three engine companies and two ladder companies respond to each call, although initial responses to alarms from any given call box location are sometimes determined by the specific needs of the geographic location or use at that station. In addition, the Fire Department operates the City's EMS system.

FDNY facilities closest to the proposed action area include: Engine Company 3/Ladder Company 12/Battalion 7, at 146 W. 19th Street; Engine Company 1/Ladder Company 24, at 142 W. 31st Street; Engine Company 34/Ladder Company 21, at 440 W. 38th Street; Rescue Company 1, at 530 W. 43rd Street; and EMS Battalion #9-Port Authority Outpost, at 641 Eighth Avenue (Port Authority Bus Terminal). The locations of these facilities are shown in Figure 4-5.

Police and Fire Services Serving the Proposed Action Area



Area to be Rezoned  
 Proposed High Line Open Space

Police/Fire Facility Serving Proposed Action Area

Scale: 1" = 1,000'

The Fire Department does not allocate resources based on proposed or projected developments, but continually evaluates the need for changes in personnel, equipment, or location of fire stations and makes any adjustments necessary.

## **G. BASE FAR SCENARIO**

The Base FAR Scenario is expected to result in less residential development than the proposed action, as it would permit lower density development. As discussed in Chapter 1, “Project Description,” the Base FAR Scenario would generate a net increase of 3,041 DUs on the projected development sites, or approximately 1,667 fewer dwelling units than the proposed action. It also is expected to result in fewer low- and moderate-income units. As with the proposed action RWCDs, it is expected that 13.66 percent of the units would be low- or moderate-income units. Accordingly, there would be 2,626 market rate units and 415 low- and moderate-income units. This scenario’s residential development is expected to generate an added residential population of approximately 5,345 residents. The Base FAR Scenario is expected to result in the same amount of projected development for non-residential uses.

As this scenario would generate the same amount of non-residential development and less residential development than the proposed action, it would commensurately generate less demand on community facilities. As community facilities indirect impacts are density-specific, and the proposed action is not expected to result in significant, adverse impacts on public high schools, libraries, police services, fire services, and health care facilities, the Base FAR Scenario does not have the potential for impacts on those facilities and detailed analysis is not warranted.

As the proposed action is expected to result in impacts to public elementary and middle schools and publicly funded day care, assessment is also necessary to determine if significant adverse impacts are also expected under the Base FAR Scenario.

### **Public Schools**

Using the formulae set forth in the *CEQR Technical Manual* for high- and low-moderate income units, by 2013 the Base FAR Scenario RWCDs would generate 313, 65, and 100 elementary, intermediate, and high school students, respectively. Refer to Table 4-16.

**Table 4-16, 2013 Base FAR Scenario: Projected New Housing Units and Estimated Number of Student Generated by the New Housing Units**

	Housing Units	Elementary School	Intermediate School	High School	Total
<b>Projected Development Sites</b>					
Market Rate	2,626	263	53	79	395
Low-Moderate Income	415	50	12	21	83
<b>Total</b>	<b>3,041</b>	<b>313</b>	<b>65</b>	<b>100</b>	<b>478</b>

Elementary Schools

As shown in Table 4-17, with the addition of 313 elementary school students under Base FAR Scenario conditions in 2013, a shortfall of 962 seats, with utilization at 137 percent of capacity, would be created at the public elementary schools in Region 3 of CSD 2. For CSD 2 as a whole, there would be a shortfall of 1,647 seats, with utilization at 111 percent of capacity. While this shortfall in seats would not be as large as for the proposed action, for both Region 3 and CSD 2, the Base FAR Scenario is expected to result in a greater than 5 percent increase in the deficiency of available elementary school seats over No-Action conditions (48 percent and 23 percent, respectively). Therefore, as is the case for the proposed action, a significant adverse impact on public elementary schools in Region 3 and CSD 2 as a whole is expected. Mitigation for this impact is described in Chapter 22, “Mitigation.”

**Table 4-17, 2013 Base FAR Scenario: Estimated Public Elementary/Intermediate School Enrollment Capacity and Utilization**

Region/ District	No-Action Enrollment 2013	Net Students Generated by Base FAR Sc.	Total Base FAR Scen. Enrollment	Capacity	Available Seats in Program	Percent Utilization	Deficit Percent Increase
<b>Elementary Schools</b>							
Region 3	3,221	313	3,534	2,572	-962	137%	48%
CSD 2	16,519	313	16,832	15,185	-1,647	111%	23%
<b>Intermediate Schools</b>							
Region 3	750	65	815	811	-4	101%	N/A
CSD 2	7,823	65	7,888	6,659	-1,229	118%	6%

No-Action enrollment from Table 4-5.

### Intermediate Schools

Under the Base FAR Scenario, 65 new intermediate school students would be introduced into the proposed action area. Under Base FAR Scenario conditions in 2013, intermediate schools in Region 3 would not experience significant adverse impacts, as the utilization rate would be lower than under With-Action conditions, in which the utilization rate would be 105 percent. Under the Base FAR Scenario, enrollment in Region 3 would exceed capacity by 4 seats and the utilization rate would be 101 percent of capacity.

As a result of the Base FAR Scenario, CSD 2 as a whole would operate over capacity, with a utilization rate of 118 percent reflecting a shortfall of 1,229. For CSD 2, the Base FAR Scenario is expected to result in more than a 5 percent increase in the deficiency of intermediate school seats as compared to No-Action conditions, with a 6 percent increase. Although the increase in deficiency is not as large as would occur under With-Action conditions, a significant adverse impact to intermediate schools in CSD 2 would occur as a result of the Base FAR Scenario. Mitigation for this impact is described in Chapter 22, “Mitigation.”

### **Publicly Funded Day Care**

As with the proposed action, the Base FAR Scenario would not include the provision of any additional publicly funded day care slots. In terms of demand, based on 415 low- and moderate-income units projected to occur as a result of the proposed action by 2013, up to 50 children under age 12 would be eligible for publicly funded day care, as compared to 79 generated by the proposed action. As a result, the net unmet demand in the study area would increase from 121 to 171 slots. According to *CEQR Technical Manual* guidelines, a significant adverse impact could result if the proposed action results in: “(1) a demand for slots greater than remaining capacity of day care center(s), and (2) that demand constitutes an increase of 5 percent or more of the collective capacity of the day care centers serving the area of the proposed action.” As shown in Table 4-18, demand for slots is greater than remaining capacity under Existing conditions and is expected to worsen under No-Action and even further under Base FAR Scenario conditions, though not as severe as under With-Action conditions. Base FAR Scenario conditions would increase demand by 21 percent over capacity. As the Base FAR Scenario would result in an increase of five percent or more over capacity, a significant adverse impact to publicly funded day care service in the study area could occur in 2013. Available mitigation is discussed in Chapter 22, “Mitigation.”

<b>Table 4-18, Increased Demand for Publicly Funded Day Care Slots: Base FAR Scenario 2013</b>			
	<b>Capacity</b>	<b>Net Demand Over Capacity</b>	<b>Increase in Demand as % of Capacity</b>
Existing	237	12	--
2013 Future Without the Proposed Action (No-Action)	237	121	46%
2013 Base FAR Scenario	237	171	21%

Note: The 905 No-Action low-moderate income DUs expected to generate demand for 109 day care slots; the 415 Base FAR Scenario low-moderate income DUs expected to generate demand for 50 day care slots.

As noted above, the *CEQR Technical Manual* states that detailed analysis is not necessary for projects resulting in fewer than 417 low- and moderate-income units. As such, projects generating 415 units typically would be assumed to not have the potential to result in significant adverse impacts.

## **H. CONCLUSION**

The proposed action was assessed for the effects of its projected development on community facilities and services. It was found to exceed screening thresholds for public schools, libraries, health care, and day care and therefore detailed analyses of those areas were conducted. The proposed action has the potential to indirectly affect these facilities due to demands placed on them by the action-generated residential population. No direct effects, such as displacing a community facility or impeding access would occur as a result of the proposed action. The non-residential developments and the High Line open space are not expected to create any substantial demand for community facilities and services. As the proposed action would not have direct effects on police and fire services, a detailed analysis is not warranted and not provided.

### **Public Schools**

In 2013, the proposed action could result in a significant adverse impact on elementary schools within Region 3 of CSD 2 and CSD 2 as a whole. In addition, it could also result in a significant adverse impact on intermediate schools in CSD 2 as a whole. Although less severe in magnitude, these impacts are also expected to occur with the Base FAR Scenario. Mitigation for these impacts are discussed in Chapter 22, "Mitigation."

### **Libraries**

It is anticipated that there would be no adverse impacts on library services as a result of the proposed action.

## **Health Care**

It is anticipated that there would be no adverse impacts on health care services as a result of the proposed action.

## **Day Care**

In 2013, the proposed action could result in a significant adverse impact on publicly funded day care facilities within approximately a 1-mile radius of the proposed action. Although less severe in magnitude, this impact could also occur with the Base FAR Scenario. Mitigation for this impact is discussed in Chapter 22, "Mitigation."

## **Police and Fire Services**

It is anticipated that there would be no adverse impacts on police and fire services as a result of the proposed action.