

STAFF RECOMMENDATION



C. Hart
NCPC File No. MP028

VETERANS AFFAIRS MEDICAL CENTER CAMPUS - DISTRICT OF COLUMBIA MASTER PLAN

50 Irving Street, NW
Washington, DC

Submitted by the Department of Veterans Affairs

April 29, 2009

Abstract

The Department of Veterans Affairs has submitted a master plan for the Veterans Affairs Medical Center (VA Medical Center) Campus located at the intersection of North Capitol Street and Michigan Avenue in Northwest Washington, D.C. This master plan is a framework for campus development over the next 20 years as it seeks to modernize its 900,000 gross square foot facility with the goal of improving medical care for veterans located in the national capital region and becoming the flagship Veterans Affairs medical center. The proposed development for the 35-acre site includes 818,000 gross square feet of additional space that will increase inpatient and outpatient areas, add new long-term living facility space, consolidate administrative functions, add medical research space, and improve site utilities. In addition, surface parking will be replaced with structured parking and new landscaping will be added.

Commission Action Requested by Applicant

Approval of the master plan for the District of Columbia Veterans Affairs Medical Center Campus, pursuant to 40 U.S.C. § 8722 (b)(1) and (d).

Executive Director's Recommendation

The Commission:

Approves the master plan for the Veterans Affairs Medical Center Campus as shown on NCPC File No. 12.20(05.14)43011 and commends the Department of Veterans Affairs for providing a comprehensive framework that: addresses the urban context in this part of the District; reduces

impervious surfaces on campus; improves the quantity and quality of open space on campus; and proposes transit improvements that facilitate access to this part of the city.

Requires the Department of Veterans Affairs, as it seeks to implement this master plan, to:

- Continue working with Washington Metropolitan Area Transit Authority and District government stakeholders on the proposed transit center along 1st Street, NW that will help improve transit access to this part of the city.
- Minimize views to the proposed Domiciliary by adding in trees along North Capitol Street as screening for this building.
- Monitor the use of the proposed north parking garage once built and use this information as the basis for more accurately understanding the number of parking spaces needed at the proposed south parking garage.

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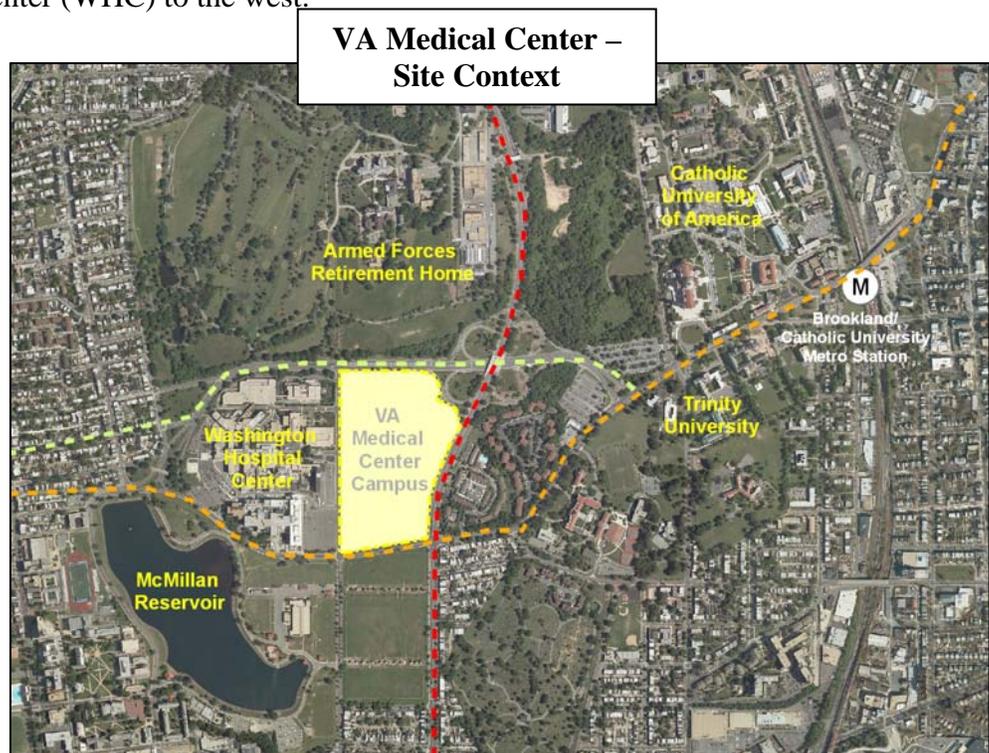
PROJECT DESCRIPTION

Site

The Veterans Affairs Medical Center Campus is located in Northwest Washington, D.C. and bounded by North Capitol Street on the east, Irving Street, NW on the north, 1st Street, NW on the west and Michigan Avenue, NW on the south. The surrounding community consists of the Armed Forces Retirement Home to the north, Catholic University of America and Trinity University to the east, the McMillan Reservoir and Sand Filtration site to the south and the Washington Hospital Center (WHC) to the west.

There are several nearby sites that are expected to be redevelopment within the 20 year lifespan of the VA Medical Center master plan. These sites are the Armed Forces Retirement Home, the McMillan Sand Filtration Site, land owned by Catholic University, and several privately owned sites.

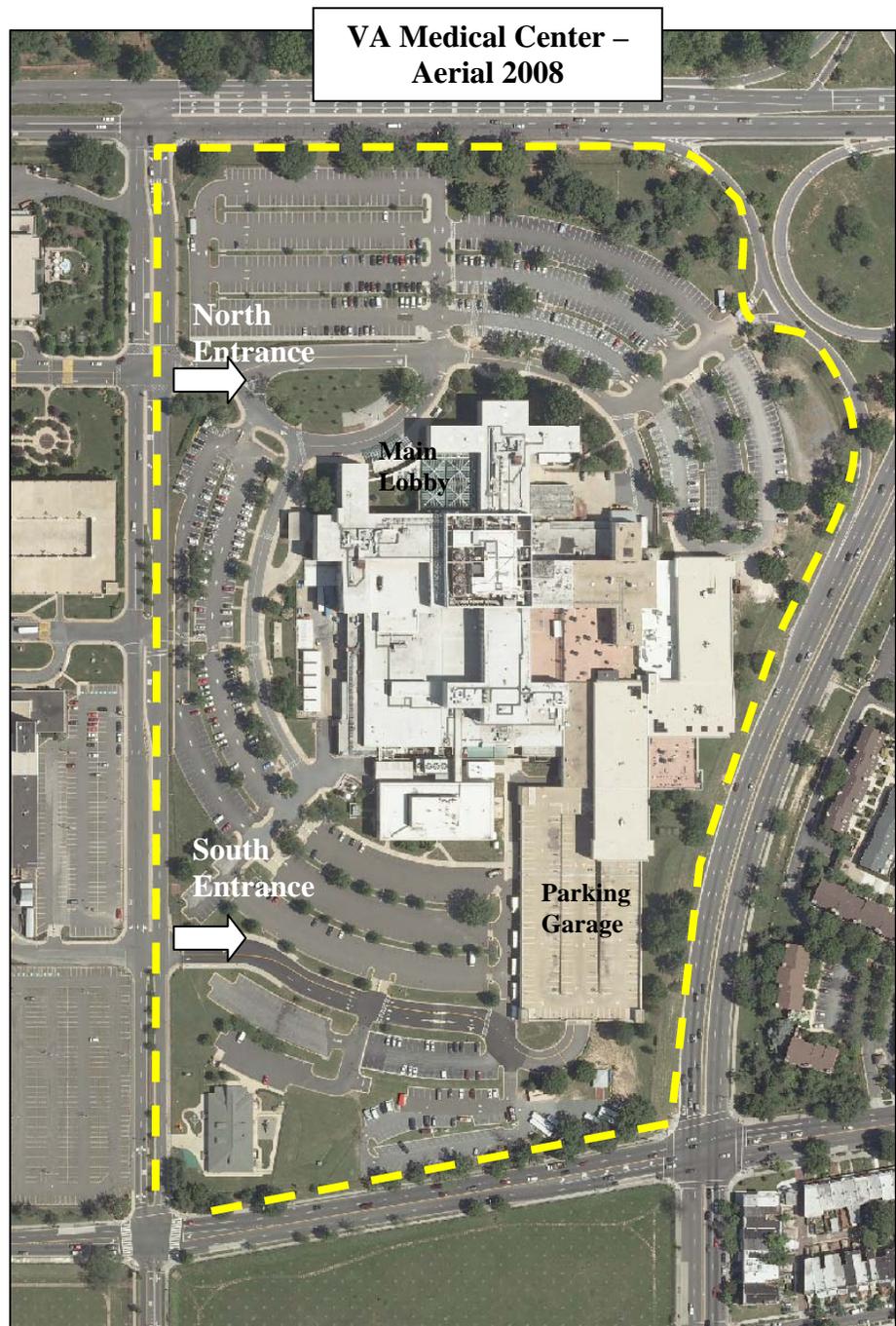
Within 2 miles are the WMATA Brookland/Catholic University of America Metro Station



and the Columbia Heights Metro Station. Three bus lines connect the site to each station.

The highest point on the campus is located at the northeastern corner and the lowest point on the campus is along the southern edge of the site. The campus is located next to the only cloverleaf roadway interchange in the District. The cloverleaf, a leftover of an unrealized inner loop highway system, is northeast of the site and has an indirect influence on the campus. Because Irving Street, NW crosses underneath North Capitol Street, grading is needed to allow for specific clearances and space for the off and on ramps. This interchange creates some steep slopes on the northern and eastern edges of the campus. The eastern portion of the campus also serves as a visual terminus of the North Capitol Street viewshed as the North Capitol Street curves east as it continues to Maryland.

The existing 35-acre site includes a 900,000-square-foot, main medical center building and a daycare facility. There are two vehicular entrances to the site and they are both located on 1st Street, NW. The north entrance is for visitors, patients and employees and the south entrance is limited for employee access. The main visitor/patient lobby of the medical center is on the northwestern portion of the building. Large surface parking lots surround the medical center with limited amount of landscaping dispersed throughout the site. There is also a 3-story parking garage on the southernmost part of the main medical center building, which is used only by employees.



Background

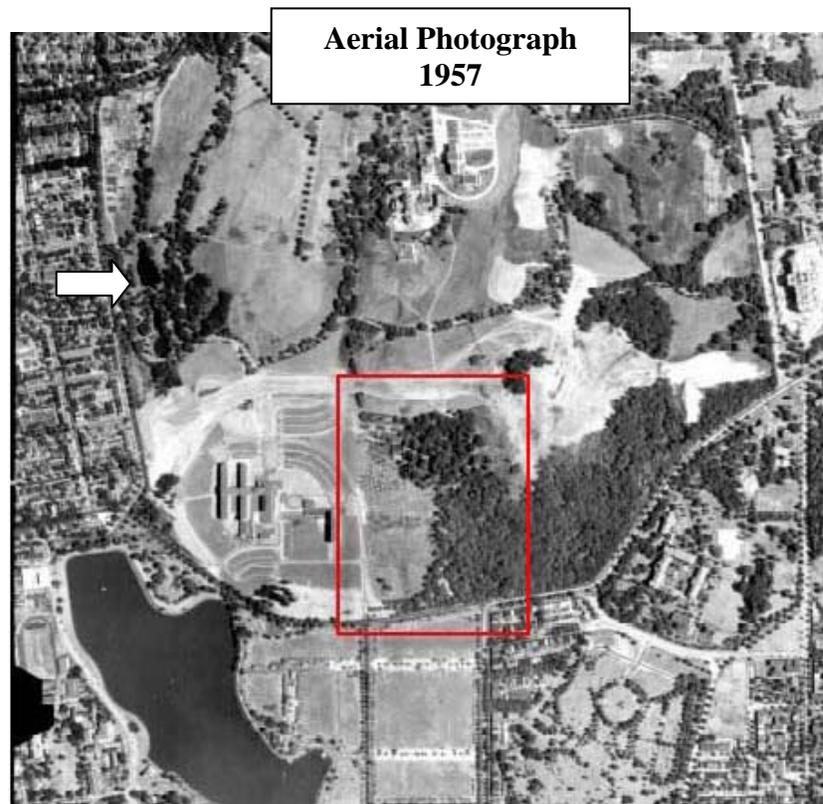
The VA Medical Center property was part of the Riggs Estate and remained in private ownership until 1851 when the Armed Forces Retirement Home Board of Commissioners purchased the estate. One hundred years later, in 1951, the Board of Commissioners transferred the parcel to federal ownership for the purpose of building hospital facilities. The VA Medical Center opened approximately ten years later in 1962. Over the next four decades, several additions were added to the main building and a new building was introduced onto the campus:

Year	VA Medical Center Campus Project
1967	Research Development, Mental Health
1977	Linear Accelerator
1978	Ambulatory Care Addition
1982	Nursing Home Care Unit, Parking Garage
1993	Daycare Center
2001	Clinic Infill
2004	Main Entry Atrium

NCPC has taken action on several projects at the VA Medical Center including the Nursing Home Care Unit and parking garage which were approved in 1982 and the daycare center which was approved in 1993.

At its July 2009 meeting, the Commission approved the site location for the Fisher House at the VA Medical Center and commented favorably on its concept design. The Commission recommended that in the continued development of the site and building designs, the applicant reevaluate the layout of sidewalks, further refine the proposed parking areas, include crosswalks, and

develop a landscape plan that would create a buffer between the parking areas and the Fisher House. The Commission also required the Department of Veterans Affairs to develop a master plan and a Transportation Management Plan for the VA Medical Center prior to submitting any other future projects.



The VA provided the Commission with a draft master plan for review in December 2009. Within its review, the Commission provided a number of comments on the draft plan which are summarized below:

- Require the VA to address recent planning for the area
- Explore the north south connection between the Armed Forces Retirement home and the McMillan Sand Filtration Site.
- Include parking phasing into the plan
- Define the nature of the transit center
- Study visual impact of proposed development along North Capitol
- Refine perimeter security
- Encourage participation in District shuttle study
- Update the Commission on the progress of archeological study.

In December 2009, the Commission also approved preliminary and final design for several projects on the campus that are included in the master plan. These projects were the Fisher House, the Operating Room/Emergency Department/Decontamination Center Expansion, and the 4C Wing Expansion.

Existing Conditions

The existing 35-acre VA Medical Center provides many different services for veterans within the national capital region. The 900,000-square-foot main building contains inpatient rooms and outpatient services, an emergency department, long term nursing home, operating rooms, and a research center including 303 inpatient beds and 120 long term beds and approximately 600,000 gross square feet of outpatient services.

Urban Design and Architecture

The building characteristics of the VA Medical Center campus consists of one main building structure with varying height and width additions. The VA Medical Center is a building complex surrounded by surface parking and set back from the surrounding streets. The main building itself is a mixture of styles as additions have been built over the last 48 years. The white-glazed brick and concrete building measures approximately 1,000 feet in the north-south direction and approximately 700 feet in the east-west direction. The height of the building varies from one-story to the equivalent of a six-story building (approximately 60 feet). The four- to six-story portions of the building are to the north of the campus. Along the eastern



portion of the building, in the North Capitol Street viewshed, is a two-story structure that houses the Community Living Center function, which used to be known as the nursing home. This precast concrete addition of the building has ribbon windows and a flat roof.

A small one-story Day Care Center is approximately 10,400 square feet and has a hipped roof. It is located away from the main building in the southwest corner of the campus. The exterior of this building is red brick with white vinyl siding.

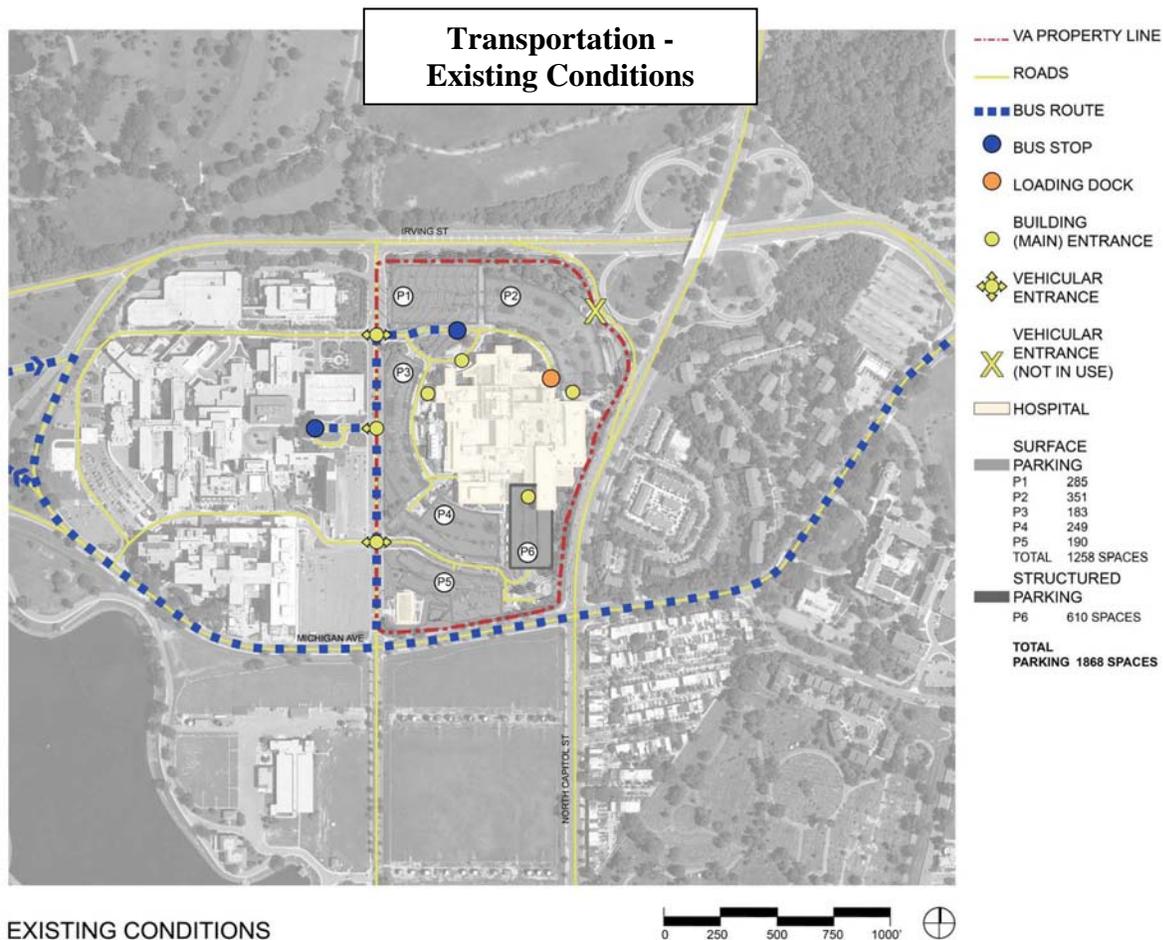
Mixed use developments are planned for the Armed Forces Retirement Home and the McMillan Sand Filtration, which are directly north and south, respectively, of the VA Medical Center campus. Between these two developments is the VA Medical Center and 1st Street, NW provides a likely connection for them.

Landscaping

Most of the trees on site are located in planting strips in the parking lots and in some areas along the property boundary. Some trees are original trees that were planted when the medical center opened in 1952, but many are in poor condition.

Security

A chain-link fence, eightfeet in height encloses the perimeter of this campus and one guardhouse is located at the main vehicular entrance to the site.



Transportation

The VA Medical Center currently serves 50,000 veterans and 500,000 visits annually. There are 2,494 patients and visitors using the site daily. In addition, there are 2,510 employees and students that work at the hospital in three shifts. These shifts overlap by several hours to allow for patient continuity of care. The 35-acre campus has 1,868 parking spaces, an on-site bus stop, shuttle service and newly installed bicycle lockers for visitors and employees to use.

Pedestrian and Bicycle Facilities

There are sidewalks around only a portion of this campus and there are no bike lanes on any of the streets adjacent to the campus. On campus, pedestrian signage is present within the VA Medical Center, but not outside of the medical facility. While few bicycle facilities currently existing at the VA Medical Center, bike lockers were recently installed on the campus to help encourage bike commuting.

Bus and Shuttle Facilities:

This site is accessible by several buses and shuttles which transport patients, employees and visitors to other parts of Washington, D.C., including nearby metro stations, and the Baltimore VA Medical Center.

The site is currently served by three (3) WMATA bus transit routes; Metrobus routes D8 and H2, 4 provide direct access into the VA Medical Center, while 80 provides indirect access at North Capitol Street/Michigan Avenue. A summary of this service is as follows:

- Route 80 makes connections to several Metro Stations. Buses arrive every 15-30 minutes throughout the day.
- Route D8 connects VAMC with Union Station and Rhode Island Avenue/Brentwood Station. Buses arrive every 15- 20 minutes throughout the day.
- Route H2 makes connections to several Metro Stations Service. Buses arrive every 15-20 minutes throughout the day.

Furthermore, the VA Medical Center has contracted for shuttle service to VA Medical Center including:

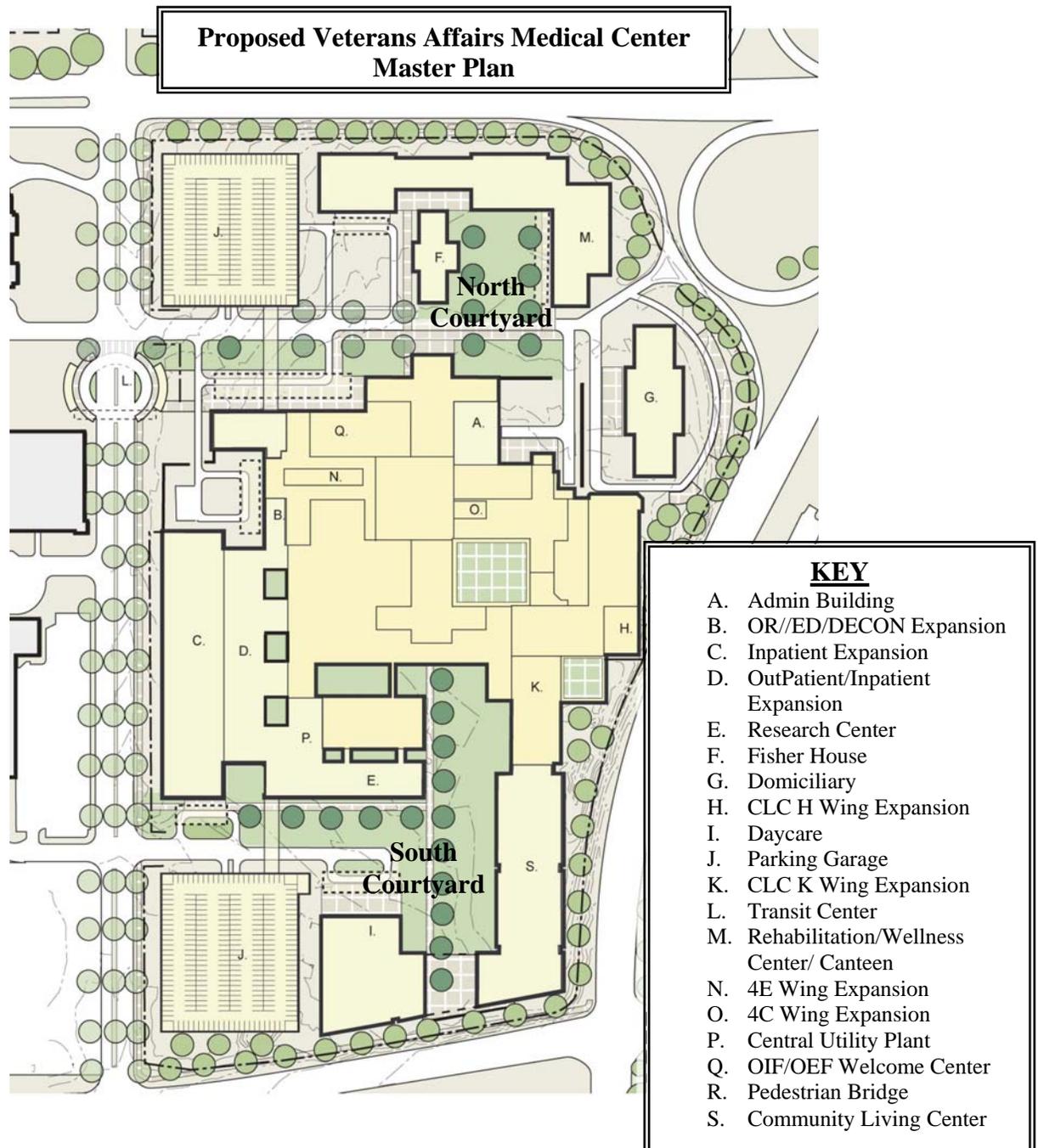
- Shuttle service to VA Medical Center from Brookland/CUA Metro station
- Shuttle service to VA Medical Center from Columbia Heights Metro station
- Shuttle service between DC VA Medical Center and Baltimore VA Medical Center
- Shuttle service for the Armed Forces Retirement Home
- Battle's Transportation Inc. Shuttle service
- VA Medical Center shuttle service to McPherson Square (VACO)

Parking

Surface parking lots and a three-level parking garage currently serve the 2,494 visitors/patients and 2,510 employees that come to this site daily. A total of 1,868 parking spaces are currently available to all VA Medical Center users, of which 1,025 parking spaces are available for employees. An existing parking garage on the southern portion of the site serves hospital and administrative staff with a total of 634 parking spaces. The current parking ratio is 1 parking space for every 2.44 employees.

PROPOSAL

The VA has submitted this master plan as a framework for campus development as it seeks to modernize their 900,000 gross square foot facility with the goal of improving medical care for veterans located in the national capital region and becoming the flagship Veterans Affairs medical center. The proposal includes 818,000 square feet of construction to be completed in four phases over the next 20 years that has been designed to better respond to the site’s complex setting: addressing the urban context, responding to the North Capitol Street viewshed, minimizing the transportation conflict points, and allowing for future developments.



PROPOSED PROJECTS IN MASTER PLAN

The following are short descriptions of the projects included in this master plan for the VA Medical Center. These projects are intended to consolidate similar functions by better utilization of existing space, expand existing functions and programs, allow the medical center to be self sufficient, and most importantly improve services for veterans and their families in the region. The master plan is expected to be completed in four phases over a 20-year period with the majority of the expansion occurring in the fourth phase.

- A. Administration Building:** This 40,000-square-foot building will consolidate administrative functions currently dispersed throughout the existing medical center. Several administrative functions including Business Office, Human Resources, Fiscal/Payroll and Acquisitions & Materials Management Service are proposed to move into this proposed Administration Building. Construction of this building would also allow for vacated space to be renovated and reused to expand the Primary Care and Mental Health Clinics.
- B. Operating Room/Emergency Department/Decontamination Room:** This 8,000–square-foot project is to construct a two-story expansion of the OR/ED and Decontamination Center and renovate 10,000 square feet of existing space for a total of 18,000 square feet. This project has been approved by the Commission at the December 2009 meeting.
- C. Inpatient Expansion:** This 70,000 gross square foot project is to improve medical inpatient care for overnight stays. Inpatient VA care for veterans has evolved from a ward system for seriously ill patients to a private-room, patient-care system. Due to biological infection and physical security concerns of the VA, a private inpatient system has been established. Therefore the existing square footage dedicated to inpatient care would be expanded by to meet future needs.
- D. Outpatient/Inpatient Expansion:** The VA Medical Center is proposing a 350,000-gross-square-foot outpatient clinic expansion to better serve and modernize both outpatient- and inpatient- oriented medical services.
- E. Research Center:** The VA Medical Center has made a major commitment to rebuilding and growing the Medical Center's existing research program over the past four years with a goal of becoming a research flagship. This designation would be achieved through a 16,000 gross square foot expansion of the existing research center to create a state-of-the-art center dedicated to the translation of the latest research findings to direct care for U.S. military veterans. VA Medical Center researchers are currently among the leaders in several areas and will focus on specific programs and research areas including: genome medicine, mental illness, and rehabilitation research (spinal cord injury and limb-loss).
- F. Fisher House:** This proposal consists of a 16,000-square-foot, 20-suite, brick-clad building. This two-story building will have a front entry porch and hipped roofs. The entire site will be landscaped and this landscaping includes trees, shrub and a rear patio. This project has been approved by the Commission at the December 2009 meeting.

- G. Domiciliary:** This is a 38,000 square foot facility to provide coordinated, integrated rehabilitative and restorative clinical care in a bed-based program, with the goal of helping eligible veterans achieve and maintain the highest level of functioning and independence possible. A Veterans Affairs initiative recommended transferring 77 domiciliary care beds from the Martinsburg VA Medical Center to the District. To provide a continuum of care, VA Medical Center proposes to co-locate the Compensation Work Therapy (CWT) program within the domiciliary facility to improve access for the residents of the homeless vocational counseling within the confines of their living area. This program would occupy the first floor with domiciliary support functions operating on the upper levels.
- H. Community Living Center (CLC) “H” Wing Expansion:** This CLC expansion is for community living space. This project is the visual terminus of North Capitol Street.
- I. Daycare –** This is an independently-owned daycare which is currently on the campus and would be incorporated into the first floor of the new CLC because the south parking garage will be built on its current location.
- J. Parking Garage:** The applicant proposes to construct structured parking garages to replace the existing surface parking areas. These parking garages are to be located along 1st Street, NW, include 3,921 parking spaces and will be available for all users, with staff parking limited to 736 spaces; the equivalent of 1 parking space for every 4 employees.
- K. Community Living Center (CLC) “K” Wing Expansion:** This proposal is for a 10,000-gross-square-foot expansion of the existing CLC facility focused on the specific needs of Operation Iraqi Freedom/Operation Enduring Freedom (OIF/OEF) veterans. The CLC provides a transitional rehabilitation of ambulatory, low vision, comprehensive nursing and rehabilitation care as a transitional residential treatment program.
- L. Transit Center:** The existing VA Medical Center’s main vehicular entrance and associated drop-off area is presently used for multi-vehicle access. The existing drop-off area serves multiple functions as a pedestrian entrance, a mass transit bus stop and a private vehicle access point. The purpose of the proposed transit center would be to relocate the mass transit buses and other large vehicles, separating them from private vehicles. The VA anticipates that this approach would reduce congestion, improve transit service and improve the safety of pedestrians entering the VA Medical Center.
- M. Rehabilitation/Wellness Centers/ Canteen:** The purpose of the 60,000-square-foot, rehabilitation/wellness center is to provide a separation of physical rehabilitation away from the ill patient care. The wellness activities relate to follow-up educational programs that occur after surgical procedures are performed when lifestyle changes are required to promote healing. The purpose of the canteen facility is to support the rehabilitation center and wellness center activities with eating and cooking facilities. This will help the demonstration of healthy eating habits and provide a socialization activity space.
- N. 4E Wing Expansion -** The proposal is a 1,800 square foot new patient/family waiting area space that would offer patients a comfortable lounge area and employees a new meeting space

- O. 4C Wing Expansion** – This proposal is a new 1,800 square foot new patient/family waiting area space that would offer patients a comfortable lounge area and employees a new meeting space. This project has been approved by the Commission at its December 2009 meeting.
- P. Central Utility Plant:** A new 18,000 gross square foot utility plant is being proposed to allow the VA Medical Center to provide steam for its own use. The VA Medical Center is currently purchasing steam from the WHC and has calculated that it will substantially reduce its operating expenses with an on-site utility plant. In addition, the construction of this plant will enhance the DC medical complex's (WHC and VA Medical Center) ability to be a self-sufficient medical campus in a time of emergency.
- Q. OIF/OEF Welcome Center:** A Welcome Center is proposed at the VA Medical Center to provide a central location easily accessible and identifiable to Veterans, their friends and families. Located to the side of the proposed main entrance, the Welcome Center would be adjacent to the primary care clinics of the VA Medical Center. While this center would be accessible to all veterans, it is intended to provide focused care issues specifically related to the Operation Iraqi Freedom (OIF) and Operation Enduring Freedom (OEF) veterans.
- R. Pedestrian Bridge** – This would provide a safe, pedestrian connection to the bus stops which is part of the transit center on either side of 1st Street.
- S. 120-Bed Community Living Center (CLC):** The need for an extended stay nursing type care expansion within the existing Community Living Center is required to address the needs of all veterans in the region. The need for the CLC expansion is described above under CLC Third Floor K Wing Expansion. This project would add 120 beds to the existing facility.

PROPOSED CAMPUS WIDE IMPROVEMENTS

Proposed Urban Design and Architecture

The proposed master plan is in response to the urban character of the surrounding community and recently proposed nearby developments. The applicant states that the viewshed along North Capitol Street will be enhanced through the planting of street trees and low shrubbery. The VA further states that this approach would allow for visual buffers of the medical buildings massing from the viewshed of North Capitol Street, while still allowing the medical facilities to view of the Capitol building and monuments to the south.



Existing View of North Capitol from Irving Street Intersection south



Proposed View of North Capitol from Irving Street Intersection south

The height and massing included in the Master Plan development is similar to the adjoining development of the WHC and will not exceed the existing top elevation of the VA Medical Center, which is 60 feet or 6 floors. The building with the greatest height is the proposed Community Living Center (CLC) expansion on the southeastern portion of the campus. The structure at the southeast property corner would reach five stories due to the existing ground elevation at the lowest surface floor. Building massing of the CLC along Michigan Avenue would be buffered by green space areas varying in width from 50 feet behind the street curb at North Capitol Street. The massing of new structures along 1st Street, NW is anticipated to be similar in character to the existing west side of 1st Street, NW at the WHC. The area along 1st Street, NW would be landscaped with sidewalk hardscape, street trees and other streetscape amenities to create a park-like atmosphere.

Proposed View of North Capitol Street looking north from Michigan Ave Intersection



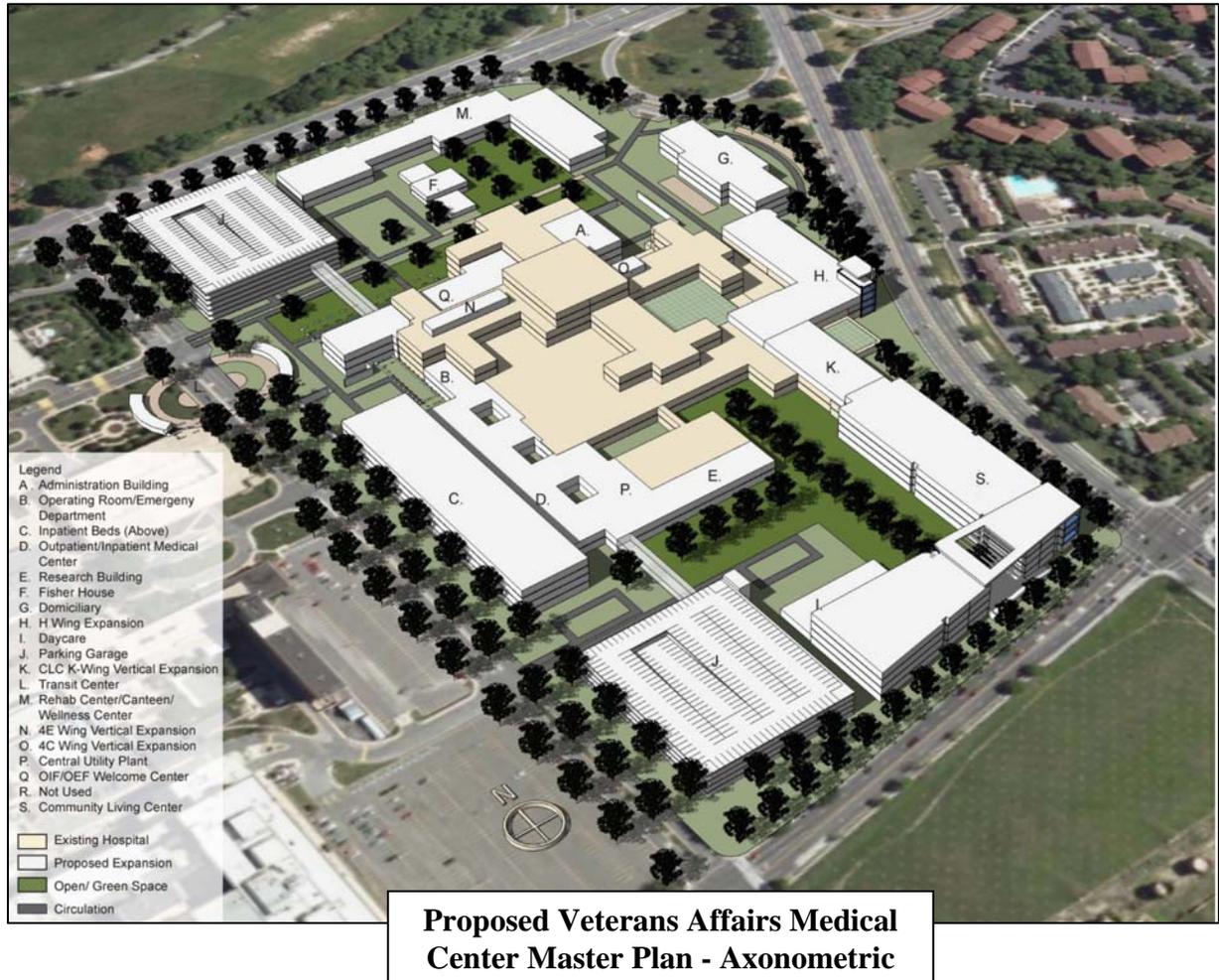
Alternative A – without tower element



Alternative B – with tower element

The proposed master plan also includes building massing similar to the character of the concept development as portrayed in the North Capitol Street Cloverleaf Feasibility Study prepared for the D.C. Office of Planning, NCPC and DDOT. The south side of Irving Street, NW would also be developed with similar two- and three-story multiuse structures along the north side of Irving Street, NW under the Armed Forces Retirement Home Master Plan that the Commission

approved in 2008. The space between the off-site gateway development and VA Medical Center property would be established as open space with an access drive to the northeast portion of the property.



The applicant intends to follow sustainable strategies established by the United States Green Building Council's Leadership in Energy and Environmental Design (LEED) rating system as well as the Green Guide to Healthcare for all new and expansion buildings on this campus.

Specific architectural strategies that the VA will use at the VA Medical Center are:

- Provide building materials will be local and durable.
- Encourage Day lighting within the facility through the use of courtyards and light wells.
- Utilize large expansions of glazing on northern and southern facades with proper shading coefficients and architectural shading devices (overhangs, deep recesses, or sun screening.)
- Limit large expansion of glazing on the eastern and western facades.
- Encourage green roofs to reduce heat island effects.

- Encourage the use of green surfaces and lightly colored paving surfaces to reduce heat gain.

The applicant proposes the following materials for the facades: glazed brick, stone, and architectural reconstituted stone and stucco. It also proposes that glazing will tend toward a clear appearance; highly tinted or reflective glass will be avoided, if possible. Large glass openings are anticipated as accents at appropriate points within the facades to express public spaces such as major entrances, lobbies, large waiting areas or public gathering spaces.

In addition, outdoor spaces are proposed to be human scale to reinforce the pedestrian emphasis of the campus. Building design will avoid monolithic façade treatment and vertical changes are encouraged as well as the use of horizontal lines to give expression to ground level and upper floors. The applicant proposes the inclusion of an arcade in the design to provide covered pathways and resting areas for all of site visitors, especially the elderly and disabled veteran patients and their families.

Open Space Plan

The proposed perimeter of the medical center will be a green space buffer with street trees, sidewalks along with street curbs and street furniture. The VA proposes to increase open space on the VA Medical Center through the removal of paved surface parking areas and the construction of two multi-story parking structures. These parking structures will consolidate all of the parking on the campus. The main goal of the open space plan is to make the campus more pedestrian friendly and to act as a buffer for the buildings on their surroundings. Generally, the proposed plan includes two new large interior courtyards, and improvements to the perimeter landscape buffers. A large plaza is also located at the southernmost end of the south courtyard that will have views to the McMillan Sand Filtration site.

All of the proposed green spaces are anticipated to be landscaped with new trees and used for informal recreational activities. The VA proposes these open spaces to form building landscape buffers and to be used as security setbacks from abutting uses. Pervious surfaces generally on campus are anticipated to increase from its existing amount of 18.8 percent to 33.8 percent of the property with the removal of the existing surface paved parking.

The courtyards are the main elements around which the new buildings/additions are organized. Together with limiting the number of cars circulating within the center zone, the VA anticipates that these courtyards will support a pedestrian friendly environment. There are two main courtyards, one on the south end of the campus around which the CLC, daycare and hospital are organized and one on the north end of the campus between the parking structure, Fisher House, Rehab Center, and Canteen.

Each of the courtyards offers a different type of experience:

The VA envisions the north courtyard as a highly active exterior space with opportunities for outdoor dining and informal recreational activities. The close proximity of this courtyard to the hospital's main entrance allows it to be a signature and identity defining space for the campus, as it will be the first major exterior space seen and utilized by the first time visitor. In addition, the VA states that the courtyard will be designed with the

ability to host formal and visitor-oriented program elements such as dedication of flags, memorials and artwork.

For the south courtyard, the VA envisions a series of more quiet and contemplative spaces with lawn areas, trees, and other landscaping. A walking path along its north-south axis could include a series of smaller, intimate settings. This axis runs adjacent to the CLC as an arcaded space. Access to this space is provided from the south edge of the main hospital block at the end of the major public spine within the building.

Proposed Security

In conformance with Department of Veterans Affairs requirements, the VA is proposing a 50' stand-off zone between all campus buildings and the vehicular access road and surrounding streets. This requirement puts a constraint on where roads may be located on the campus. The VA submitted a Security Plan that includes the following elements: a new perimeter fence, new surveillance cameras, and new site signage. The VA also states that the new perimeter fence will have a positive impact on the site boundary. The current chain-link, fence topped with barbed-wire will be replaced with a more architectural "estate fence" and ornamental bollards, where needed.

Guardhouses are also part of the security enhancements and there are three proposed on campus for each of the three entrances to the site.

Proposed Transportation Plan

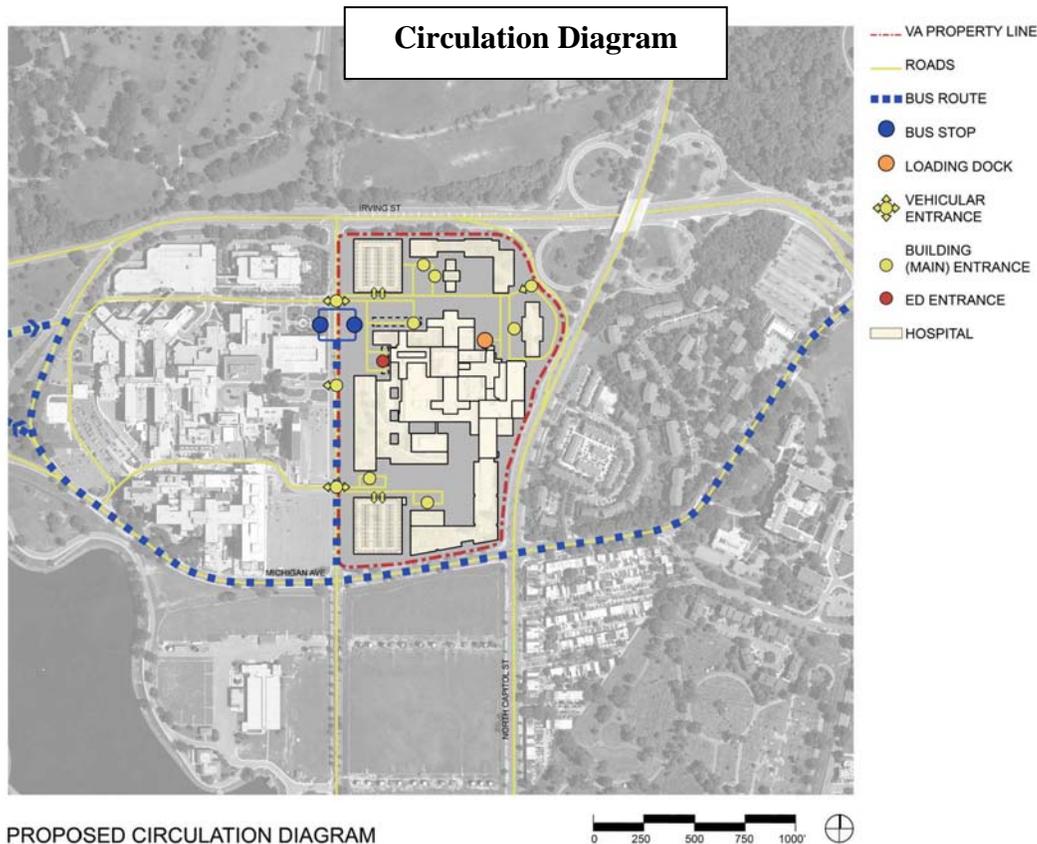
The VA estimates that there will be 6,635 patients and visitors coming to the site daily as well as 2,945 employees if all phases of the proposed development in the master plan are implemented. Two new parking garages are proposed along 1st Street, NW which would consolidate the current surface parking lots. The existing parking garage would be demolished in order to construct the CLC expansion.

The VA states that there will be three vehicular entrances to the hospital, two along Irving Street, NW and one along North Capitol Street. Along Irving Street, the north entrance would be reserved for patients and visitors, while the south entrance would be primarily for employees and the child daycare center.



Access to public transit and shuttles that serve VA Medical Center campus in the new master plan will be transferred from the existing drop-off area at the existing medical center’s main entrance to a new transit center. The transit center is proposed to be along 1st Street, NW immediately south of the northern vehicular entrance in an effort to separate bus/shuttle traffic from the vehicular traffic within the site. This location is also being proposed to allow easy access for hospital staff and visitors to the hospital’s main entrance. The intention is that the proposed transit center will be utilized not only by the VA Medical Center population but the Washington Hospital Center as well.

The master plan includes a proposed transit center that has been discussed with the Washington Hospital Center, the District Department of Transportation (DDOT) and Washington Metropolitan Area Transit Authority (WMATA). This project would provide for a bus turn around and would require the signalization of the intersection at the Washington Hospital Center and VA medical Central main entrance. This signalization would include a cycle dedicated for bus turn around movements. Options for pedestrian crossing 1st Street, NW include a pedestrian bridge or enhanced crosswalk to facilitate movement from one campus to the other.



In addition the master plan includes several transportation improvements including adding a separate westbound lane from Irving to 1st Street, adding a dedicated right turn lane on westbound Michigan Avenue at 1st Street, and adding a left turn eastbound on Michigan Avenue at North Capitol Street. These improvements will facilitate patient, visitor and employee access to the campus.

Proposed Parking

The proposed master plan anticipates that there will be 2,945 employees and students that include all three shifts, working at the VA Medical Center, if all of the proposed development occurs. Using this employee count, staff calculates that the maximum number of employee parking spaces allowed, using the Comprehensive Plan parking ratio of 1:4 and a total 2,945 employees, would be 736 spaces. This parking would be phased in as shown below:

Proposed Master Plan Phasing Summary

	Current	Phase I	Phase II	Phase III	Phase IV
Total Sq. Ft.	922,000	956,000	1,026,100	1,084,340	1,718,140
Total Parking	1,868	2,003	2,083	2,952	3,921
Staff Parking	1,025	983	946	891	736
Parking Ratio	1:2.4	1:2.6	1:2.8	1:3.125	1:4

PROJECT ANALYSIS

Executive Summary

Staff finds that the proposed draft master plan is the culmination of numerous consultations with the applicant over the past year and will allow the VA Medical Center to better address its urban context better than its current configuration. Allowing buildings to define the street wall, reducing the number of surface parking lots and improving the interior courtyards allow the campus to achieve a more urban character. Staff also notes that the proposed master plan has incorporated changes recommended by the Commission at the draft phase.

Staff recommends that the Commission **approve the master plan for the Veterans Affairs Medical Center Campus and commends the Department of Veterans Affairs for providing a comprehensive framework that: addresses the urban context in this part of the District; reduces impervious surfaces on campus; improves the quantity and quality of open space on campus; and proposes transit improvements that facilitate access to this part of the city.**

Staff has also identified a few issues that should be addressed as projects are submitted at this campus in the future. These issues are transit center coordination, North Capitol Street buffers, and parking garage monitoring. These will be included in the discussion of the VA response to Commission comments below.

Proposed Master Plan Changes

At its December 2010 meeting, the Commission provided the following comments to the VA on the draft master plan:

- *Irving Street Retail* - Requires the applicant to modify the master plan to reflect recent planning work for the Armed Forces Retirement Home Master Plan and the North

Capitol Street Cloverleaf Feasibility Study for active ground floor uses and build-to lines along Irving Street, NW.

The VA has added several

- *1st Street Connection* - Requires the applicant to explore further the design of 1st Street, NW, as a pedestrian and bicycle connection for the VA Medical Center and between the Armed Forces Retirement Home site and the McMillan Sand Filtration site.
- *Parking Phasing* - Requires the applicant to provide more detail in the final master plan concerning the parking phasing to demonstrate that its parking ratio meets the 1:4 ratio stipulated in the Comprehensive Plan for the National Capital: Federal Elements as the master plan is realized and to submit additional justification for the increase in visitor parking.
- *Transit Center* - Notes that the applicant should explore an agreement with DDOT and WMATA to better define the proposed transit center on the VA Medical Center campus. While this discussion has been initiated, it is not clear whether the transit center includes a reconfiguration of the roadway, rerouting buses, a pedestrian bridge over 1st Street, NW or some other option.
- *Viewshed Analysis* - Requires the applicant to explore alternatives in the final master plan to address potential visual impacts of the Domiciliary and the Community Living Center on the North Capitol Street corridor and the Armed Forces Retirement Home viewshed. Alternatives for minimizing the impact include shifting these components, reducing their scale or adding landscape screening and need to be included in the final master plan.
- *Controlled access* - Requires the applicant to refine the perimeter security proposal in the final master plan to balance security needs and future planning objectives within an urban context.
- *Shuttle Study* - Encourages the VA to participate in the shuttle service study being conducted jointly by the D.C. Office of Planning and the Metropolitan Washington Council of Governments in an effort to make shuttle service that utilizes Brookland/CUA Metro Station safer, more reliable and more efficient.
- *Archeological Survey* - Notes that since the applicant began its archeological survey as stipulated by the DC State Historic Preservation Office an update on this progress needs to be included in the final master plan. The applicant should also submit plans and designs for individual buildings facing the McMillan Sand Filtration site and the Armed Forces Retirement Home to the D.C. State Historic Preservation Office.

Irving Street Retail

This campus is part of a larger group of institutional and federal uses in this area that, because of their auto-oriented design, tend to act as a barrier for pedestrians - separating east from west. In addition, the nearby cloverleaf amplifies the auto-oriented environment and negatively impacts the pedestrian experience.

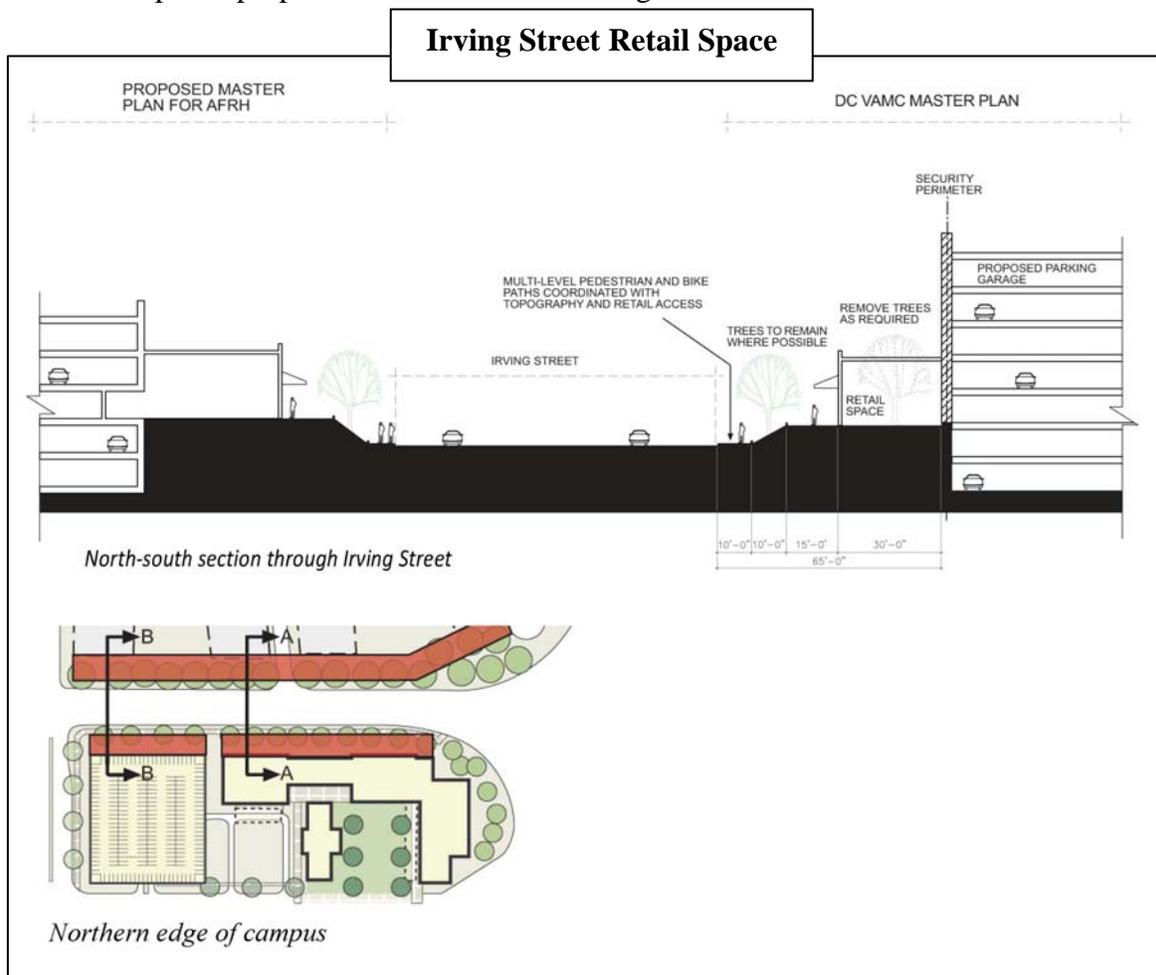
In the *Comprehensive Plan for the National Capital: Federal Elements*, NCPC has included Federal Government Workplace Element policies that state the federal government should:

- Consider combined public and private mixed uses at federal workplaces where security requirements will not be compromised.

- Plan federal workplaces to be compatible with the character of the surrounding properties and community, and where feasible, to advance local planning objectives such as neighborhood revitalization.

Furthering the need to study pedestrian oriented uses along Irving Street, NW is the District Department of Transportation’s long term goal of bringing light rail, rapid bus transit or streetcar service to this important east west corridor. Recent planning initiatives including the Armed Forces Retirement Home Master Plan and the North Capitol Street Cloverleaf Feasibility Study have included ground floor uses along Irving Street, NW in an effort to enhance an east-west pedestrian connection.

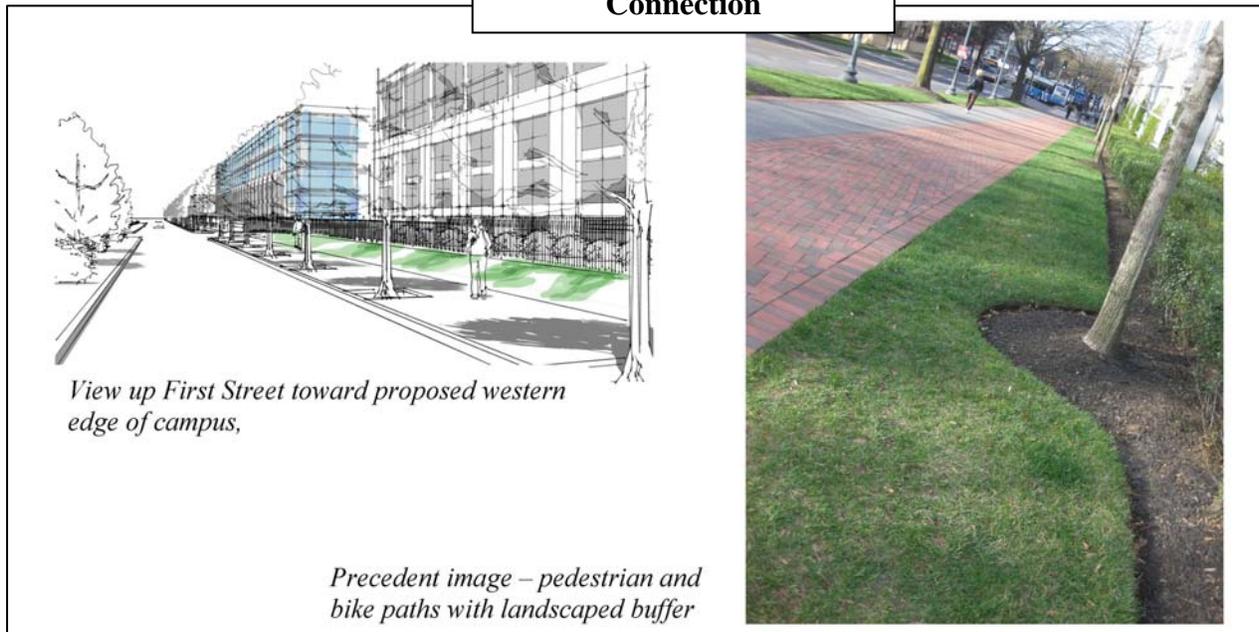
In its review of the draft master plan, the District of Columbia Office of Planning submitted comments that requested the review of the potential for retail on Irving Street, NW. In response, the VA Medical Center Master Plan includes a section discussing the possibility of providing retail along this corridor. The VA states that the main impediment to providing retail is a policy that requires the VA to designate land as “surplus” before allowing retail to be developed. The VA states that its policy is to only allow surplus land, or land that it no longer requires to fulfill its mission, to be developed under an enhanced use lease (EUL). These EULs would allow a private developer to propose and construct a building at this location.



Improving North-South Connections

As development is planned both north and south of the VA Medical Center at the Armed Forces Retirement Home and the McMillan Sand Filtration sites, respectively, it is important that the proposed master plan include an opportunity for creating a north south pedestrian link that connects the Armed Forces Retirement Home and the McMillan Sand Filtration site. The District Elements of the Comprehensive Plan, Rock Creek East Area Element supports this idea as it includes a reference to this linear park “...A linear park connection extending from [the AFRH] south through the Irving Street Hospital Campus and McMillan Sand Filtration Site to LeDroit Park should be pursued.” (2215.9)

1st Street – Pedestrian Connection



The VA Medical Center Master Plan has added a description of additional pedestrian and bicycle amenities along 1st Street, NW. The master plan includes the following description of these amenities “...improvements would include tree lined streets, a bicycle path, and a landscaped zone along the buildings edge which could contain bench seating and other points of interest.” (p.50). In addition, the master plan also identifies that more study will need to be conducted in the future to develop this idea more fully.

Parking Phasing

Staff identified parking as an issue in the draft master plan document reviewed in December 2009 because there was not enough information to understand how the parking would be phased. With the final master plan, the VA includes a phasing schedule as follows:

Proposed Master Plan Phasing Summary

	Current	Phase I	Phase II	Phase III	Phase IV
Total Sq. Ft.	922,000	956,000	1,026,100	1,084,340	1,718,140
Total Parking	1,868	2,003	2,083	2,952	3,921
Staff Parking	1,025	983	946	891	736
Parking Ratio	1:2.4	1:2.6	1:2.8	1:3.125	1:4

This parking phasing allows for an existing employee parking ratio of 1:2.4 initially and results in a parking ratio of 1:4 by the end of the fourth phase.

The VA has included in the master plan a need for increased visitor and patient parking on the campus. The applicant developed parking requirements of 3.5 spaces for every 1000 square feet of outpatient facility, 1 parking space per each inpatient bed and 2 spaces per each long term nursing home and transitional patient bed. By applying these rules to the VA Medical Center, the applicant states it needs a total of 3,921 parking spaces, 736 designated for staff. DDOT has provided some comments related to parking and has suggested that the proposed north parking garage be monitored for parking demand to appropriately size the southern parking garage, which will not be built until Phase IV.

In comparison, the Armed Forces Retirement Home Master Plan includes a medical office component and the amount of patient parking allowed as part of the redevelopment of that site is 2.94 spaces per 1,000 gross square feet of medical office use. Staff calculates that medical office space is approximately 1,328,000 square feet at the VA Medical Center at the completion of the four master plan phases. If the same calculation is used to determine patient parking spaces at the VA Medical Center, then the amount of patient parking allowed would be approximately 3,904 parking spaces. Staff notes that this allowable amount is approximately the same as what the VA has proposed.

Therefore, staff supports this suggestion and recommends that the Commission **require the Department of Veterans Affairs, as it seeks to implement this master plan, to monitor the use of the proposed north parking garage once built and use this information as the basis for more accurately understanding the number of parking spaces needed at the proposed south parking garage.**

Transit Center

The applicant discovered during the master plan process that the Washington Hospital Center was open to discussing transit and shuttle connections to their site and that providing a more central location may be beneficial for both institutions as well as improving bus schedules. As the master plan has progressed, the VA began conceptually exploring alternatives that would improve bus and shuttle movement through the two hospital centers. These alternatives included the introduction of a rotary, the possibility of adding lay-by lanes for the buses, and incorporating a pedestrian bridge.

The VA is currently in consultation with DDOT and WMATA to discuss the design and functionality of this transit center. Staff encourages continued coordination with the District and the other stakeholders to help reduce vehicle trips by improving transit efficiency.

WMATA on this importation transit hub as it will facilitate movement to this part of the District by reducing travel time for the buses. The reduction in travel time would be possible because currently buses and shuttles use the same main vehicular routes as cars which cause delays as patients are loaded and unloaded from each vehicle. The VA state in the master plan that separating these modes is paramount to improving transit alternatives.



Staff recommends that the Commission **require the Department of Veterans Affairs as it seeks to implement this master plan to continue working with Washington Metropolitan Area Transit Authority and District government stakeholders on the proposed transit center along 1st Street, NW that will help improve transit access to this part of the city.**

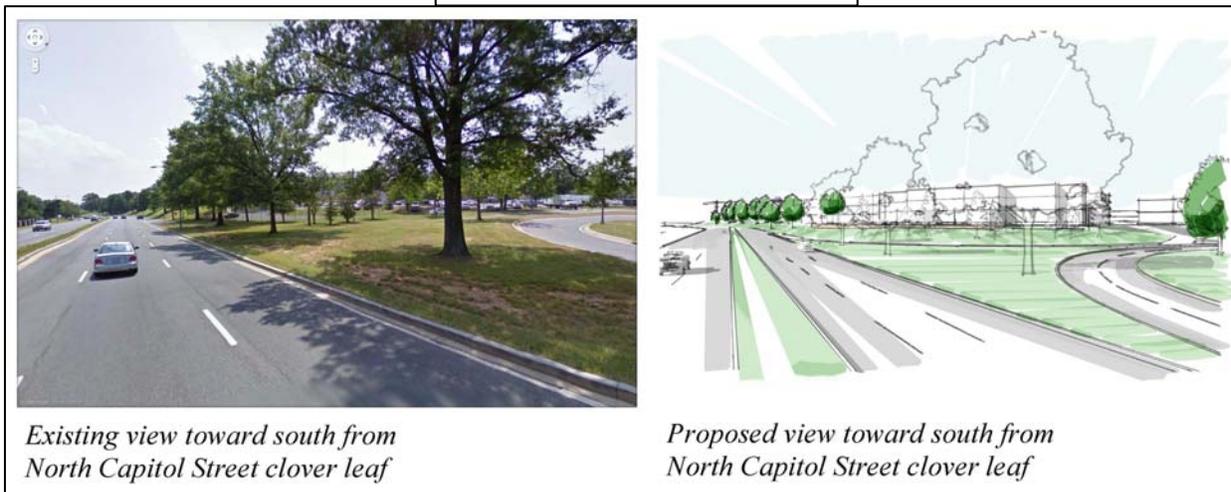
Viewshed Analysis

This campus is not only bordered by North Capitol Street, the eastern portion of the VA Medical Center itself is the visual terminus of North Capitol Street. The medical center is the visual terminus because North Capitol Street curves to the east north of its intersection with Michigan Avenue as it heads north towards Maryland. The master plan describes the importance of this vista and makes an argument that the proposed projects along this corridor, namely the Domiciliary and the Community Living Center (CLC), could be enhanced architecturally to improve this view.

The Comprehensive Plan for the National Capital, Historic Preservation Element describes the need to “*Protect views outward from the L’Enfant City and views inward from vantage points along the rim of the topographic bowl from inappropriate intrusions. Open space should be preserved to allow for public use and enjoyment of these views.*” As the VA Medical Center is in a major viewshed of the L’Enfant City and the AFRH provides an opportunity to view inward, towards the L’Enfant City, designing buildings sensitive to this context is of the upmost importance.

As this is a master plan, detailed drawings of the proposed Domiciliary are not provided, however staff has met with the applicant regarding the Domiciliary and discussed several issues including the need to add retaining walls to address existing site topography. The VA has included an additional drawing showing the view of the Domiciliary from North Capitol Street and notes that this building will not be visible because of existing trees along the street and along the eastern border of the VA Medical Center property. Staff appreciates the inclusion of this drawing and will continue working with the applicant on this design in the future and recommends that the Commission **require the Department of Veterans Affairs, as it seeks to implement this master plan, to minimize views to the proposed Domiciliary by adding in trees along North Capitol Street as screening for this building.**

North Capitol Street



Controlled Access

The VA states that the medical center and the Washington Hospital Center need to have controlled access points in case of an emergency. This plan includes a detail showing a section of a proposed fence which will enclose this campus. The VA is proposing a new architectural “estate fence” as an improvement over the chain link fence that exists on the site today. While staff understands that fencing is not appropriate at every federal facility, developing controlled access points for this medical center campus is important.

Shuttle Study

Over concern about the number of shuttles connecting several nearby Metro stations and various campuses, the Office of Planning in concert with the Metropolitan Washington Council of Governments has proposed a study to determine if shuttle consolidation is possible to reduce the number of shuttle at these Metro stations. The VA will meet with the Office of Planning to determine how it can be a part of this study.

CONFORMANCE

Comprehensive Plan for the National Capital

The proposed VA Medical Center Master Plan is not inconsistent with the Comprehensive Plan for the National Capital. The following are specific policies in the Comprehensive Plan that his project supports:

Federal Environment Workplace Element

- Consider combined public and private mixed uses at federal workplaces where security requirements will not be compromised.
- Plan federal workplaces to be compatible with the character of the surrounding properties and community, and where feasible, to advance local planning objectives such as neighborhood revitalization.

Historic Preservation Element

- Protect views outward from the L'Enfant City and views inward from vantage points along the rim of the topographic bowl from inappropriate intrusions. Open space should be preserved to allow for public use and enjoyment of these views.

Transportation Element

- Outside the Central Employment Area, but within the Historic District of Columbia boundaries, the parking ratio should not exceed one space for every four employees.

District Elements: Rock Creek East Area Elements

- ...“...A linear park connection extending from [the AFRH] south through the Irving Street Hospital Campus and McMillan Sand Filtration Site to LeDroit Park should be pursued.” (2215.9)

National Environmental Policy Act (NEPA)

In accordance with the National Environmental Policy Act (NEPA), the VA has submitted an Environmental Assessment (EA) for the DC VA Medical Center Master Plan. The EA explored two options, a no action alternative and the proposed action. The EA included effects of the proposed action on natural resources, transportation, land use, historic preservation and viewsheds, stormwater management, wetlands, floodplains, air and sound quality and community facilities. The VA issued a finding of no significant impact (FONSI), dated April 13, 2009.

The EA found that there were both long-term beneficial impacts and adverse impacts associated with the proposed action. Beneficial impacts include an increase in the quality of medical care for local veterans, a decrease in the amount of impervious surfaces on campus, an increase in green space, an increase in stormwater management facilities on the campus, an increase in transit usage to the campus, and enhanced views along North Capitol Street. A limited number of minor to moderate adverse impacts to the environment associated with the proposed action are also included. These long-term adverse impacts include the future increase in traffic on the surrounding road network and associated emissions, an increase in building area on campus, and an increase of emissions from the site with the construction of a new central utility plant.

As several developments are likely to be constructed in the vicinity of the campus during the lifespan of the master plan, traffic projections analyzed in the EA include these development in the future background traffic counts. Long-term traffic impacts are expected with the proposed action and are expected to be mitigated.

Long-term traffic impacts will be mitigated through the implementation of a transportation management plan (TMP). The primary goals of the TMP are to provide more efficient transit service to all site users to reduce vehicle trips to and from the site; reduce congestion and delays on nearby roads, provide safe and efficient pedestrian and bicycle resources to the VA Medical Center site, and to manage proposed parking facilities. The EA includes the identification of a TMP coordinator on the VA Medical Center campus as an important step for the TMP to be implemented. This coordinator's responsibility will be to ensure that all traffic demand management strategies are being implemented correctly through the use of employee surveys, traffic and parking counts, and bus and transit monitoring.

The EA also includes a proposal to build a transit center that will make transit service more efficient for the area, including the VA Medical Center. The proposed transit center, located on 1st Street, NW, will improve transit service and reduce traffic and congestion to the campus. The VA is coordinating the transit center design with the District Department of Transportation, the Washington Hospital Center (WHC) and the Washington Metropolitan Area Transit Authority. Continued monitoring of transit center use will be important to understanding its efficiency and effectiveness.

An increase in the quality of medical services for veterans in the national capital area is the primary beneficial impact of the proposed action. As the last major addition to the campus was in 1982, and hospital care has changed over the last 30 years, this proposed action addresses the changes in medical service delivery through additional medical capacity and utilization of new technology.

NCPC staff has reviewed the submitted Environmental Assessment and the Executive Director has issued a FONSI dated **April 30, 2010**.

National Historic Preservation Act (NHPA)

Pursuant to Section 106 of the National Historic Preservation Act (NHPA), the VA submitted the master plan update to the District of Columbia State Historic Preservation Officer (DC SHPO) for review. The VA determined and the DC SHPO concurred that the master plan update will have no adverse effect to known historic properties. NCPC concurs with the VA determination.

The DC SHPO recommends and NCPC staff agrees that a Phase 1A archeological survey be conducted at the VA Medical Center as part of any future development project at the campus. In addition, DC SHPO recommends that any projects that face the McMillan Sand Filtration site or the Armed Forces Retirement Home be submitted for review.

CONSULTATION

Coordinating Committee

The Coordinating Committee reviewed the proposal at its April 14, 2010 meeting and forwarded it to the Commission with the statement that the proposal has been coordinated with all participating agencies. The participating agencies were NCPC; the National Park Service; the General Services Administration; the District of Columbia Office of Planning; the Fire and Emergency Medical Services; and the Washington Metropolitan Area Transit Authority.

Commission of Fine Arts

The Commission of Fine Arts (CFA) approved the final VA Medical Center Master Plan on October 15, 2009 and commended the VA on the improvements incorporated since it reviewed the draft plan in September 2009. CFA recommended that the applicant include a narrative statement in the master plan to address topics such as architectural intent, strategies for energy conservation and sustainability, treatment of parking garage facades, and the character of open spaces. In addition, CFA expressed disappointment that their previous suggestion to include retail along 1st Street, NW could not be accommodated in the master plan. Finally, CFA discussed the need to create a unified design treatment to more clearly identify the arrival experience of this facility, and to further study the transit center options.