



## Executive Director's Recommendation

Commission Meeting: March 7, 2019

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<b>PROJECT</b> <b>Washington DC VA Medical Center Oncology and Cancer Center - Renovations and Addition</b> 50 Irving Street, NW Washington, DC	<b>NCPC FILE NUMBER</b> 8038
<b>SUBMITTED BY</b> US Department of Veterans Affairs Veterans Health Administration	<b>NCPC MAP FILE NUMBER</b> 12.20(38.00)44866
<b>REVIEW AUTHORITY</b> Federal Projects in the District per 40 U.S.C. § 8722(b)(1) and (d)	<b>APPLICANT'S REQUEST</b> Approval of comments on concept plans
	<b>PROPOSED ACTION</b> Approve comments on concept plans as requested
	<b>ACTION ITEM TYPE</b> Consent Calendar

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### PROJECT SUMMARY

The U.S. Department of Veterans Affairs has submitted for Commission review site and building plans for an Oncology and Cancer Center (OCC) at the Washington DC Veterans Affairs Medical Center (VAMC) in Northwest Washington, DC. The project includes the renovation of 10,250 square feet of interior space, along with a 6,822 square foot addition, to create a new 17,072 square foot OCC clinic. The new clinic will replace the existing oncology clinics for the VAMC that are currently located on both the second and fourth floors of the main hospital building. The applicant has indicated that the existing locations of the clinics and their configurations are not convenient for patients or staff, who must navigate between floors to exam and treatment locations. Many of the patients are elderly and have weakened immune systems and traveling through other spaces increases chances of exposure to other illnesses. The applicant has also indicated that the existing treatment rooms are outdated, lack privacy, and do not provide adequate family support spaces.

The new OCC space will relocate these facilities to a vacated section of the first floor at the north end of the main hospital building, directly adjacent to the main hospital entrance and emergency drop off. It will have a dedicated drop off and entrance for OCC patients, creating better patient access to the clinic and between treatment areas. The OCC will take its scale and height cues from the main hospital to which it is attached, and will use similar materials, patterns, and colors to the adjacent existing facades. The original VAMC building has an early 1960s design aesthetic, which has been carried into the design of the addition, including a horizontal ribbon window and other architectural features and details. A canopy is also proposed for the addition, which will be styled to match the horizontal line and construction of the adjacent existing canopy. The addition is proposed on an existing small open space area with an adjacent street and sidewalks that will require various modifications, including tree removal and replacement, stormwater management, streetscape improvements, and wayfinding signage.

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## KEY INFORMATION

- The OCC project at the DC VAMC includes the renovation of 10,250 square feet of interior space and a 6,822 square foot addition, to create a new 17,072 square foot facility.
- The project will improve the function and support capabilities of the existing OCC, which would be consolidated from two separate floors to one floor with a dedicated patient drop off.
- The building would be compatible with the architectural style of the main hospital building, and the proposed canopy would relate to the existing canopy at the adjacent main entrance.
- The renovation and addition would not result in any changes in hospital population—just a shift in physical access locations and a modified patient flow.
- Landscape modifications include the removal of eight trees, which would be replaced with seven new trees.
- Bioretention areas are proposed to treat stormwater on site, which would include stormwater plantings. The applicant has indicated that a vegetated green roof is included as an option for the building addition.

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## RECOMMENDATION

The Commission:

**Comments favorably** on the proposal to renovate and expand outdated facilities at the Washington DC Veterans Affairs Medical Center (DC VAMC) to better meet the treatment and support needs of patients and families at the Oncology and Cancer Center.

**Notes** that the project is not included in the 2010 master plan for the DC VAMC; however, there is an effort underway to update master plans across the system of Veterans Health Administration hospitals. The DC VAMC has requested to be included in the first round of master plan updates.

**Notes** that the project proposes the removal of eight trees, including two large, mature trees, and six smaller trees across the project area, and that seven new trees would be planted.

**Requires** that the applicant prevent a net loss of tree canopy for the project in accordance with the policies related to Tree Canopy and Vegetation in the Comprehensive Plan for the National Capital, which generally state that the caliper of trees lost as a result of a project must be replaced in-kind. This could be accomplished through the planting of additional trees, the planting of larger trees, or a combination of both.

**Requests** that the applicant considers low-impact development features or green infrastructure to retain and treat stormwater, such as bioswales or rain gardens with native stormwater plantings and a vegetated rooftop on the proposed building addition.

**Notes** that a landscape and stormwater management plan that describes details, such as the proposed type and variety of trees and plantings, is required with the final submission, per NCPC Submission Guidelines.

## PROJECT REVIEW TIMELINE

<b>Previous actions</b>	None
<b>Remaining actions (anticipated)</b>	– Preliminary and final review of site and building plans

## PROJECT ANALYSIS

### Executive Summary

Staff has evaluated the submitted concept plans and supports the effort to improve the Oncology and Cancer Center (OCC) facilities at the Washington DC Veterans Affairs Medical Center (DC VAMC) to better meet the needs of patients and families. The addition is sited near similar uses to largely avoid transportation conflicts, and proposed wayfinding and streetscape improvements should help ensure relatively easy pedestrian connectivity. The one-story addition is small enough in scale to avoid any major impacts to important viewsheds in the area, and the proposed architectural style will ensure it is compatible with the rest of the main hospital complex. While there are certain concerns associated with the landscaping proposal, which is described in the analysis below, staff finds that the project is generally not inconsistent with NCPC plans and policies. Accordingly, staff recommends that the Commission **comments favorably on the proposal to renovate and expand outdated facilities at the DC VAMC to better meet the treatment and support needs of patients and families at the OCC.**

### Analysis

The OCC project at the DC VAMC consists of the renovation 10,250 square feet of the main hospital building and a 6,822 square foot addition that will consolidate the existing oncology clinics that are currently housed on the second and fourth floors of the building. The current facilities require that patients start their visit on one floor for their exam and then relocate to another floor for infusions and treatment, which is both inconvenient for patients and poses a health risk for patients with compromised immune systems. The new 17,072 square foot OCC will allow these functions to occur on one floor and will include a dedicated patient drop off to provide more direct patient access. The applicant has indicated that patients and families often have long clinic stays, so the project also includes family support spaces and areas for patient advocacy programs.

Plans for the OCC do not indicate any planned exterior changes associated with the renovation project, so they will not be analyzed in detail. The one-story expansion, however, will be a visual addition to the building exterior, and will include disturbance of 20,000 gross square feet of open space, new landscaping, and a canopy for patient drop off. The submission indicates that the addition would be visually compatible with the existing hospital building, which reflects a 1960s institutional architectural style. Certain design features on the main building will be carried through to the OCC, including reveals at the top of the parapet lines and window heads and sills. The new brick will also match the color and texture of the brick used on the main structure. The proposed canopy at the OCC patient drop off will similarly maintain a visual relationship with the existing canopy at the main entrance, with a matching horizontal line and construction. There is an existing pullout from the access roadway that will be slightly modified to serve the new entrance.

While staff supports the project overall, the proposed landscape modifications appear to have the greatest impact, particularly related to the removal of on-site trees. The landscape plan includes the removal of eight trees to accommodate the building addition, including two large, mature trees, and six smaller trees across the project area, which they plan to replace with seven new trees. Because of the need for a dedicated drop off at the OCC, it would be difficult to reorganize the project plan to avoid these impacts. There are several areas of potential transportation conflict in close proximity that limit alternative options, including a loading zone and the main building drop off. Given these constraints, staff supports the proposal, but believes it is critically important to consider impacts to the urban tree canopy. Accordingly, staff recommends that the Commission **requires that the applicant prevent a net loss of tree canopy for the project in accordance with the policies related to Tree Canopy and Vegetation in the *Comprehensive Plan for the National Capital*, which generally state that the caliper of trees lost as a result of a project must be replaced in-kind. This could be accomplished through the planting of additional trees, the planting of larger trees, or a combination of both.**

Other notable landscape considerations include the plan for stormwater management. The DC VAMC has indicated that they will meet both federal and local stormwater requirements, in accordance with stormwater management policies articulated in the Comprehensive Plan, which they plan to accomplish with two bioretention areas. They have further noted that there is an option to construct a green roof on the proposed addition. Staff generally supports the proposed approach to stormwater management but encourages the applicant to think creatively about stormwater management strategies that have a minimal visual impact on the landscape. Accordingly, staff recommends that the Commission **requests that the applicant consider low-impact development features or green infrastructure to retain and treat stormwater, such as bioswales or rain gardens with native stormwater plantings and a vegetated rooftop on the proposed building addition.** To inform future reviews, staff further recommends that the Commission **requests a more detail regarding proposed landscape treatments and stormwater management features, including a planting plan that outlines type and variety of trees and plantings.**

It is important to note in this analysis that the Commission reviewed and approved a comprehensive master plan for the DC VAMC in March 2010, as well as an amendment in March

2011 to reflect a change in programming for the construction of a parking garage. Staff observes that the OCC is not included as a planned project in the master plan, through the project does not greatly modify the contemplated physical form of this section of the hospital complex. The DC VAMC has stated that the Veterans Benefits Administration is beginning a process to update master plans for all Veterans Affairs Medical Centers across the system, and that a master plan update for the DC VAMC will be a part of that effort. Recognizing the pressing need for an updated master plan, the applicant is working the Veterans Benefits Administration to prioritize the DC VAMC in the first round of updates.

## **CONFORMANCE TO EXISTING PLANS, POLICIES AND RELATED GUIDANCE**

### **Comprehensive Plan for the National Capital**

As noted in the analysis above, NCPC staff has reviewed this proposal for compliance with relevant guidance and has determined that it is not inconsistent with the policies established in the Federal Elements of the *Comprehensive Plan for the National Capital*. In particular, the project is supported by policies in the Federal Workplace and Urban Design Elements.

### **National Historic Preservation Act**

The DC VAMC initiated consultation with the DC State Historic Preservation Office (SHPO) under Section 106 of the National Historic Preservation Act (NHPA) in November 2018. Because of the age of the main hospital building, the SHPO requested that the DC VAMC prepare a determination of eligibility (DOE) form for listing on the National Register of Historic Places, which would help inform the rest of the consultation process. The applicant has indicated that it plans to begin the DOE process in March 2018 and will continue the consultation process when a determination has been made. Any changes to submission as a result of the DOE and consultation process will be reflected in future submissions. NCPC is designating the Veterans Health Administration the lead agency for compliance with the NHPA.

### **National Environmental Policy Act**

The DC VAMC is applying a categorical exclusion to meet its requirements under the National Environmental Policy Act (NEPA), which allows for the exclusion of certain construction or renovation projects. The applicant submitted a letter from its environmental compliance officer confirming that the project would pose no significant impacts to the environment. To meet its own requirement, NCPC will apply the categorical exclusion listed in 1 CFR § 601.12(a)(6), which allows for the categorical exclusion of federal and District government agency proposals for new construction, building expansion, or improvements to existing facilities. The project meets stipulations of that provision that require the project complies with applicable local, state, or federal requirements; is consistent with nearby buildings; will not substantially increase the number of motor vehicles in the vicinity; and does not have any unresolved resource conflicts or environmental issues.

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## **CONSULTATION**

### **Coordinating Committee**

Without objection, the Committee forwarded the proposed comments on concept plans to the Commission with the statement that the proposal has been coordinated with all participating agencies. The DC SHPO is coordinating on the project but has requested a DOE form since the building recently reached 50 years of age. If the building is determined eligible, the SHPO has indicated that the new addition may result in an “adverse effect” and require a memorandum of agreement. When discussed at previous coordination meetings with the applicant, the District Department of Energy and Environment understood the project area was fewer than 5,000 square feet. If it is now intended to be greater than 5,000 square feet, the project should apply for erosion and sediment control and stormwater management permitting. The District Department of Transportation noted that the project proposed the removal of several trees and requested that NCPC consider relevant local tree replacement requirements in its review, including heritage tree standards.

### **U.S. Commission of Fine Arts**

The DC VAMC Oncology and Cancer Center project received concept approval as a consent calendar item at the July 2019 meeting of the U.S. Commission of Fine Arts.

## **ONLINE REFERENCE**

The following supporting documents for this project are available online at [www.ncpc.gov](http://www.ncpc.gov):

- Project Synopsis
- Submission Materials

Prepared by John Gerbich  
02/06/2019

## **POWERPOINT (ATTACHED)**

# Washington DC VA Medical Center Oncology and Cancer Center - Renovations and Addition

50 Irving Street, NW

Washington, DC

Approval of Comments on Concept Plans

U.S. Department of Veterans Affairs

Veterans Health Administration

# Project Summary

**Commission Meeting Date:** February 4, 2019

**NCPC Review Authority:** 40 U.S.C. § 8722(b)(1) and (d)

**Applicant Request:** Approval of Comments on Concept Plans

**Session:** Consent Calendar

**NCPC Review Officer:** John Gerbich

**NCPC File Number:** 8038

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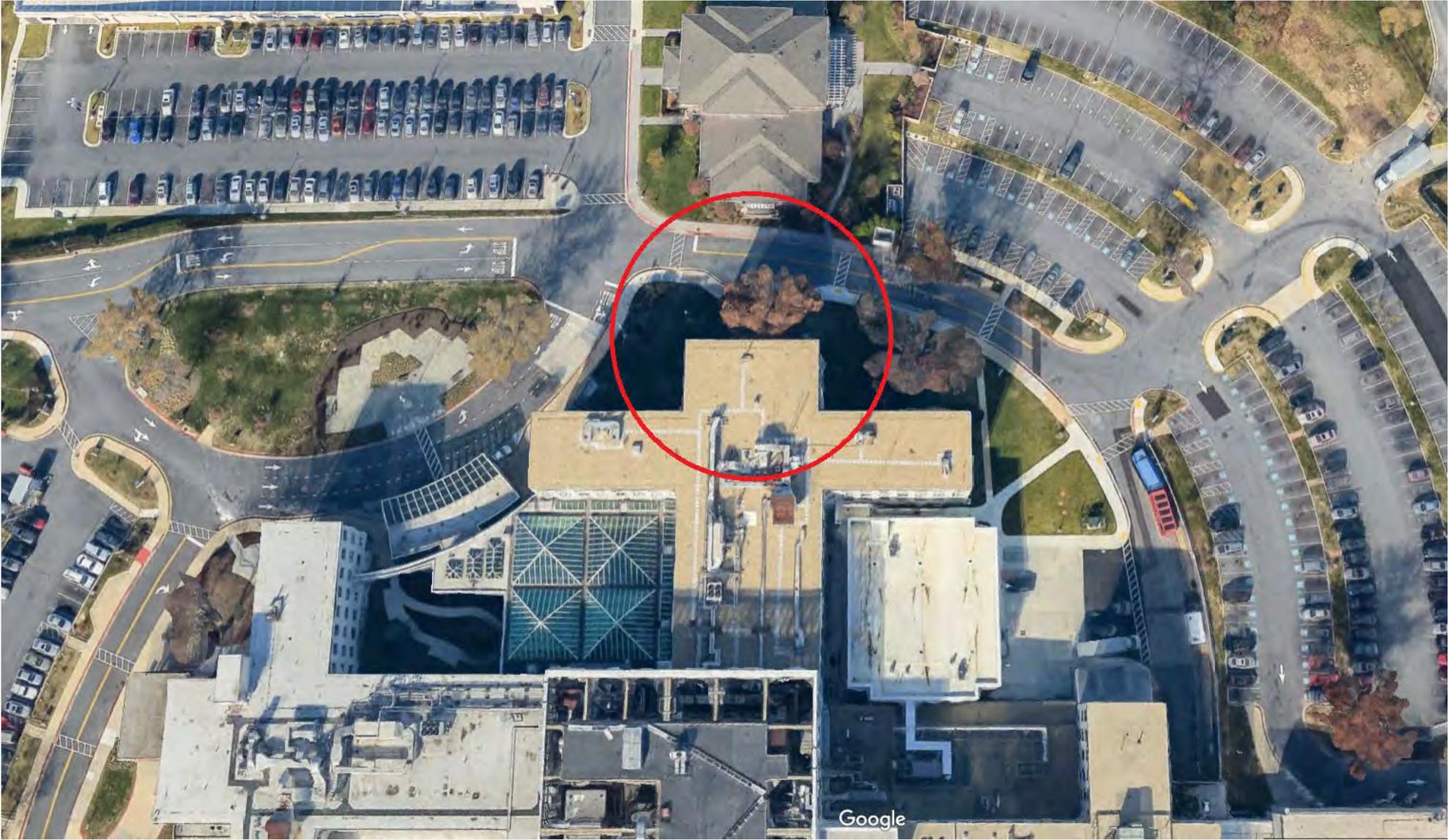
The new OCC space will relocate these facilities to a vacated section of the first floor at the north end of the main hospital building, directly adjacent to the main hospital entrance and emergency drop off. It will have a dedicated drop off and entrance for OCC patients with a safer patient flow to the clinic, with an improved internal flow that allows better connectivity between treatment areas. The OCC will take its scale and height cues from the main hospital to which it is attached, and will use similar materials, patterns, and colors to the adjacent existing facades. The original VAMC building has an early 1960s design aesthetic, which has been carried into the design of the addition, including a horizontal ribbon window and other architectural features and details. A canopy is also proposed for the addition, which will be styled to match the horizontal line and construction of the adjacent existing canopy. The addition is proposed on an existing small open space area with an adjacent street and sidewalks that will require various modifications, including tree removal and replacement, stormwater management, streetscape improvements, and wayfinding signage.

# Site Location



Location Map

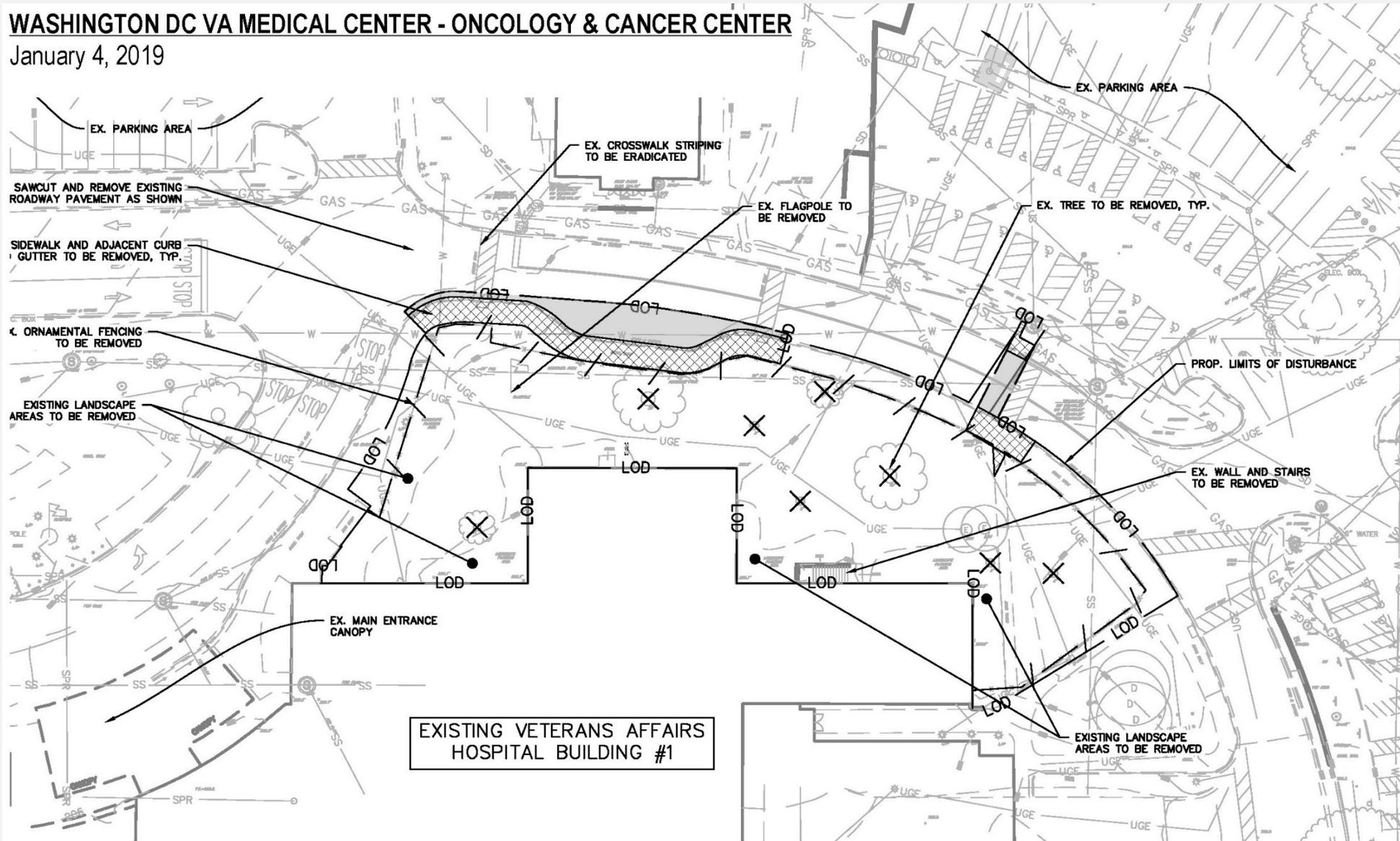
# Site Detail



# Existing Site Plan

## WASHINGTON DC VA MEDICAL CENTER - ONCOLOGY & CANCER CENTER

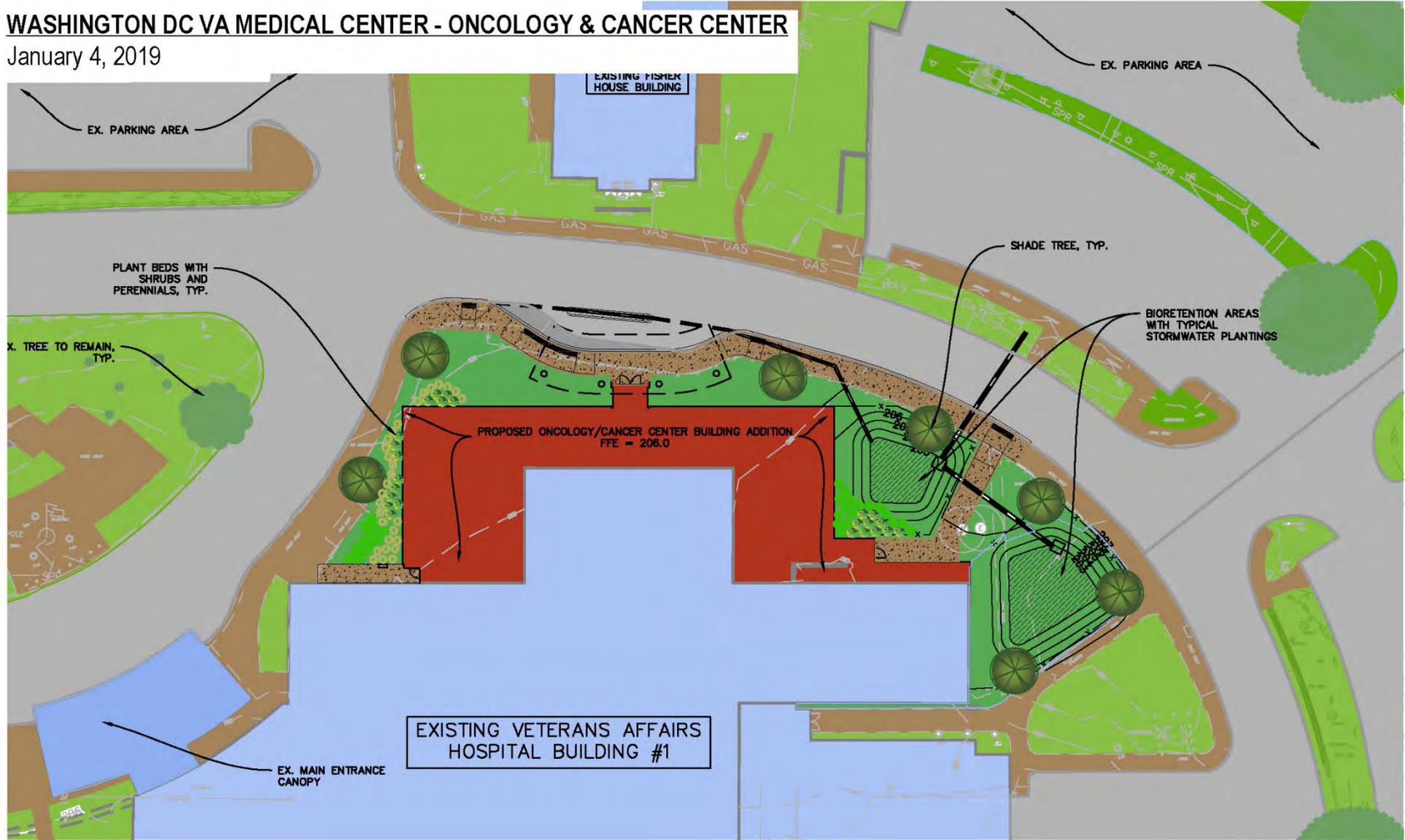
January 4, 2019



# Proposed Site Plan

## WASHINGTON DC VA MEDICAL CENTER - ONCOLOGY & CANCER CENTER

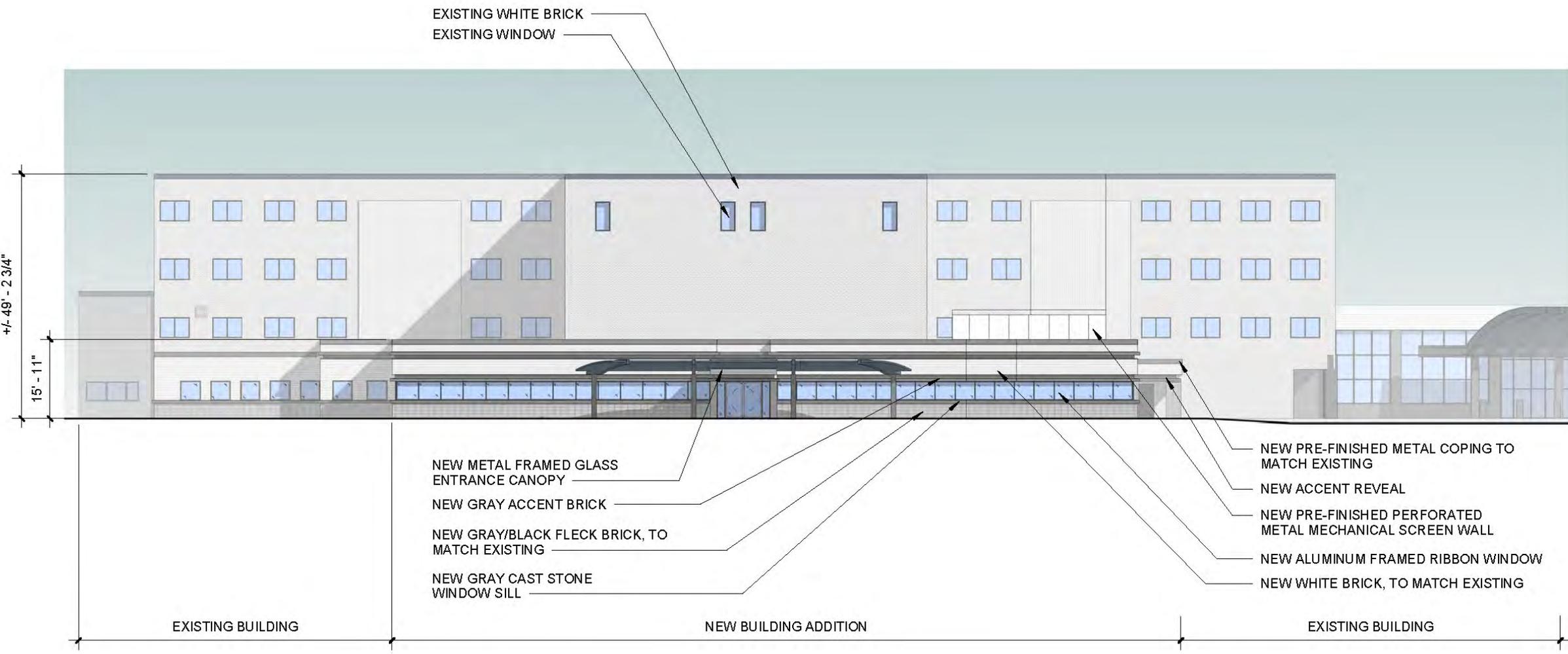
January 4, 2019



# Existing North Elevation



# Proposed North Elevation



# Existing East Elevation



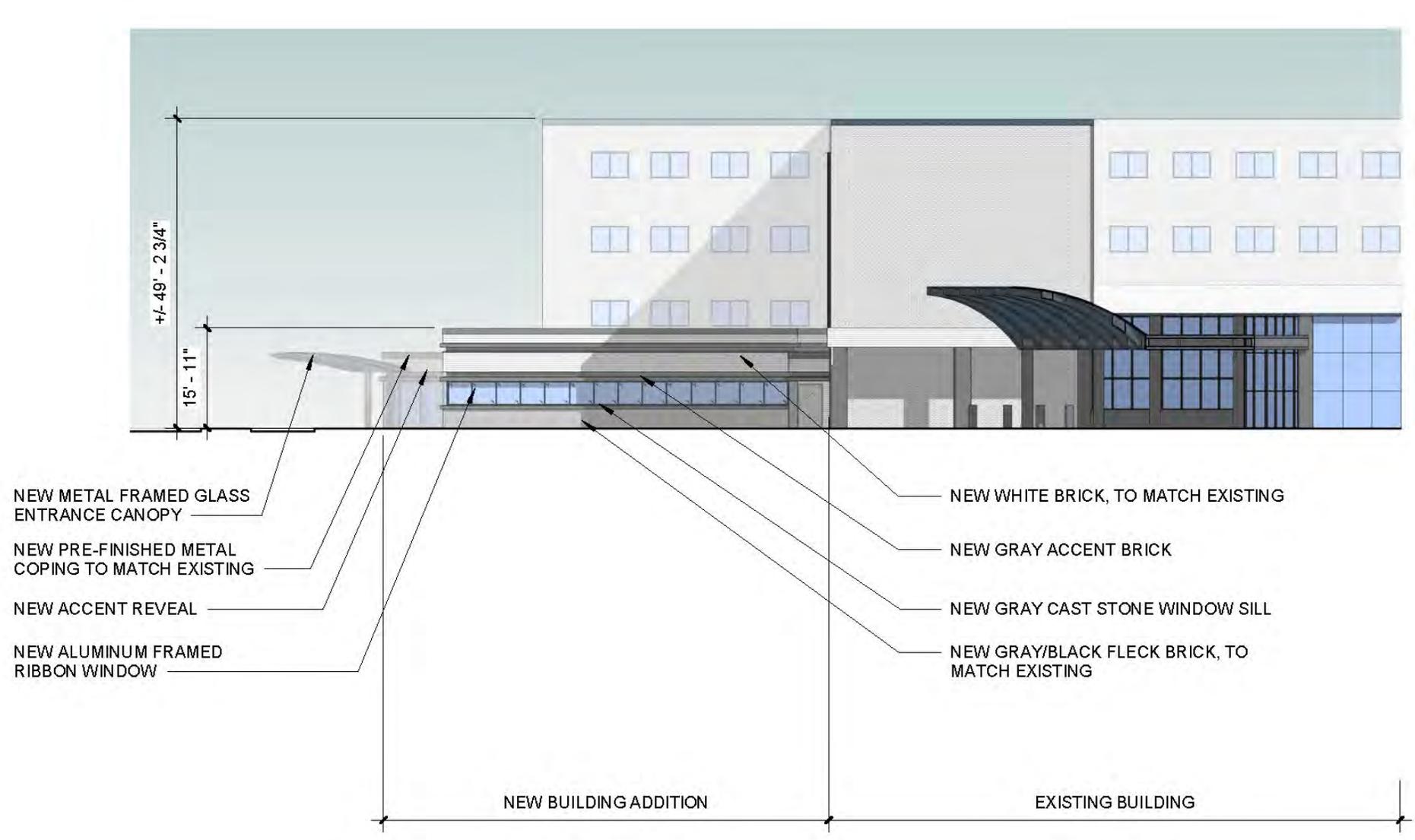
# Proposed East Elevation



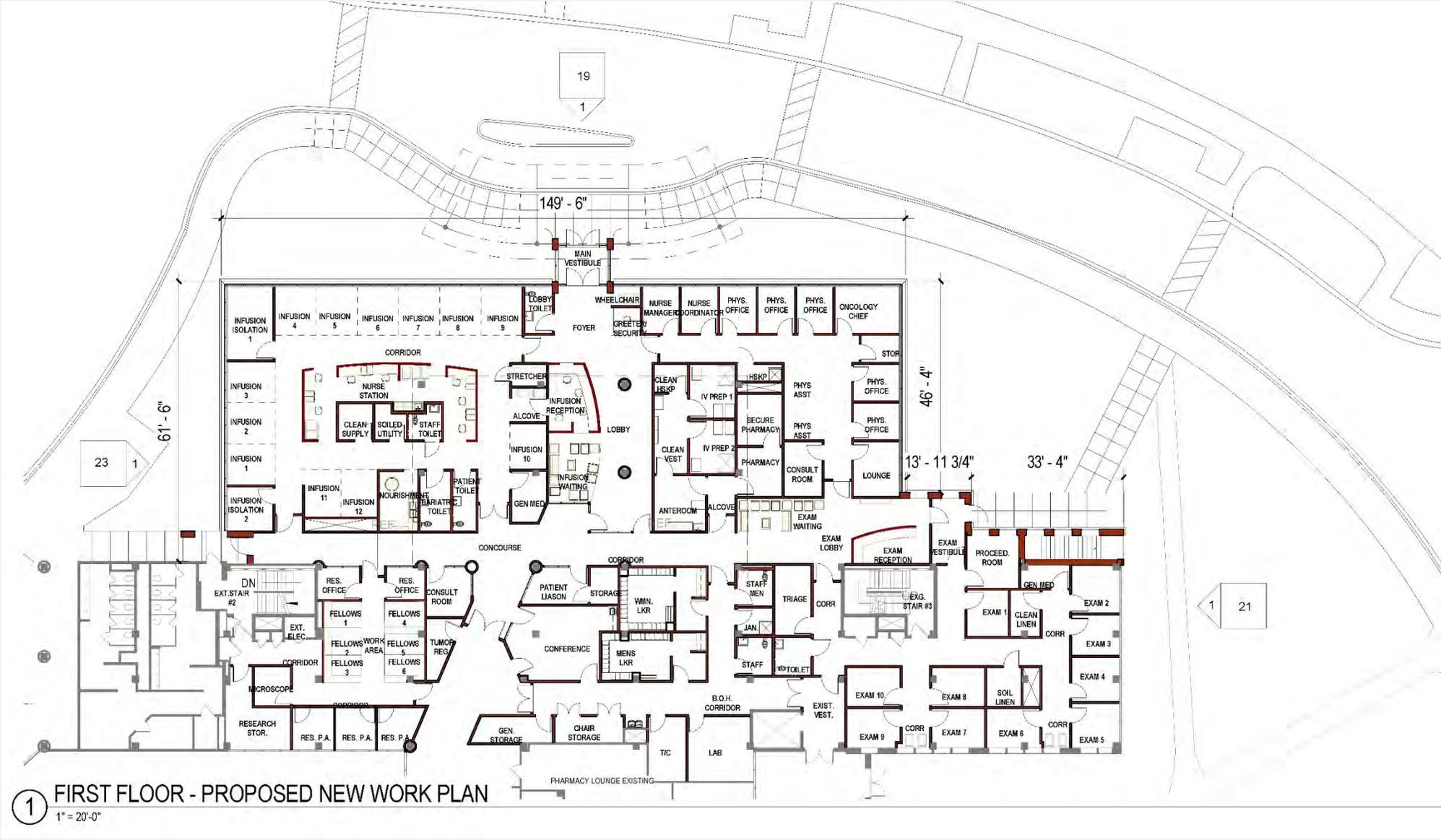
# Existing West Elevation



# Proposed West Elevation



# First Floor Plan



# Roof Plan

