
CEDAR HILL

REGIONAL MEDICAL CENTER

GW HEALTH | WASHINGTON, DC

ST. ELIZABETHS EAST

NATIONAL CAPITAL PLANNING COMMISSION
FINAL DESIGN SUBMISSION
PROJECT BOOKLET

APRIL 01, 2022



TABLE OF CONTENTS

INTRODUCTION

- PROJECT SCOPE
- FINAL DESIGN REFINEMENT SUMMARY

SITE CONDITIONS

- EXISTING SITE FEATURES & CONDITIONS
- SITE TOPOGRAPHY PLAN & CONTEXT
- LANDSCAPE PLAN
- SITE CIRCULATION & COMMUNITY CONNECTION

PROGRAM ORGANIZATION

- BLOCK & STACK DIAGRAM
- FLOOR PLANS - HOSPITAL, ACC, GARAGE

BUILDING INFORMATION

- ZONING & SCALE
- MATERIAL PALETTE
- MASSING & RENDERINGS

LANDSCAPE & SITE INFORMATION

- LANDSCAPE DESIGN & PLANTING SELECTION
- LANDSCAPE RENDERINGS

SIGNAGE & WAY-FINDING

- BUILDING & SITE SIGNAGE DESIGN

APPENDIX

- **A** - CFA FINAL PRESENTATION SLIDES
- **B** - PROJECT SCHEDULE & BUDGET
- **C** - LEED CHECKLIST
- **D** - APPROVALS - HPRB, ZONING, FAA, NCPC, ANC, CFA
- **E** - PERMITS - ROUGH GRADING & FOUNDATION TO GRADE APPLICATION
- **F** - SIGNAGE DESIGN PACKAGE
- **G** - FINAL DESIGN CONTRACT DOCUMENT SET & SPECIFICATIONS

INTRODUCTION

The District of Columbia and Universal Health Services (UHS) are developing a new Health Hospital and Ambulatory Pavilion at St. Elizabeths East in Ward 8, near the Congress Heights Metro. This new hospital and its supporting services will improve access to high quality, integrated care for all District residents and help address disparities in health outcomes.¹ The Cedar Hill Regional Medical Center GW Health, design by the team of HOK/McKissack & McKissack, will be operated and maintained by UHS.

The new hospital, in affiliation with GW Health, will provide a wide array of critical health and specialty services to the community to include trauma care, newborn deliveries and maternal health, general surgery, mental health services and other medical care. The planning and design of the new hospital strives to:

- **Utilize** the existing architectural language of the historic St. Elizabeth’s Campus through the use of compatible materials, color palette, building massing and site planning thoughtfully organized to instill patient confidence in a healthcare facility;
- **Create** a compact hospital with a traditional podium / bed tower design that has been appropriately scaled to respond to the existing site conditions;
- **Enhance** the existing site features by preserving some of the existing Heritage Trees, extending the green zone along Martin Luther King Jr. Avenue SE and creating new pedestrian connections to adjacent development;
- **Implement** architectural strategies to offer patients views to the significant views to the MLK Avenue SE green zone(west) and the wooded ravine (east);
- **Connect** to the surrounding community by placing the building to allow for great visibility when approached from Martin Luther King Jr. Avenue SE and Pecan Street SE.

PROJECT SCOPE

This program is for a 136-Bed Hospital with expanded podium to accept 48 additional patient beds in the future. The final program area has been finalized at 363,441 building gross square feet.

FINAL DESIGN REFINEMENTS

On September 15, 2021 the Commission of Fine Arts reviewed the revised concept submission for the Cedar Hill Regional Medical Center | GW Health is planned for Parcel 2 on the St. Elizabeth’s East

Campus. As indicated in the Commission’s letter dated September 22, 2021, the Commission members expressed support for the massing of the proposed hospital design and they commended the humane emphasis on the patient experience in the design of the building.

The Commission approved the initial concept design and material palette for the project, and requested in the final review to add interest to the open space, including enhancement of the landscape and added interest to the site elements, revision in the landscape to consider continued connection between the hospital and south campus masterplan. Additional meetings with the CFA staff over the past 6 months yielded additional feedback on materiality of the building and minor green screen treatment updates to the parking garage.

This CFA Final Design Submission package includes the following refinements to specifically address the Commission’s comments:

- Minor exterior building façade refinements to the composition, coloring and penthouse material changes. This includes added window placements, and refinements to the entry canopy and dining terrace enhancements.
- A more developed landscape package to demonstrate the total site development as a public space offering landscaped areas of respite for patients; the formation of continuous green zone along the edges of the St. Elizabeths Campus, including areas facing the Men’s Shelter to the north and Martin Luther King Jr. Avenue to the west and screening of the building’s utilitarian areas.
- Updated Site and Building signage considerations with refinements and naming of the “Cedar Hill Regional Medical Center | GW Health” that occurred by Mayor Bowser at the February 18, 2022 groundbreaking ceremony.



¹ Government of the District of Columbia, *Building a Healthier, More Equitable DC.*

EXISTING SITE FEATURES

St. Elizabeth's was established by Congress in 1855 as the Government Mental Health Hospital and provided support and facilities for the army, navy, the district of Columbia as well as a historic hospital during the civil war.

The site is located in the Anacostia Community in Southeast Washington overlooking the Anacostia River, with panoramic views of Washington, DC and Virginia.

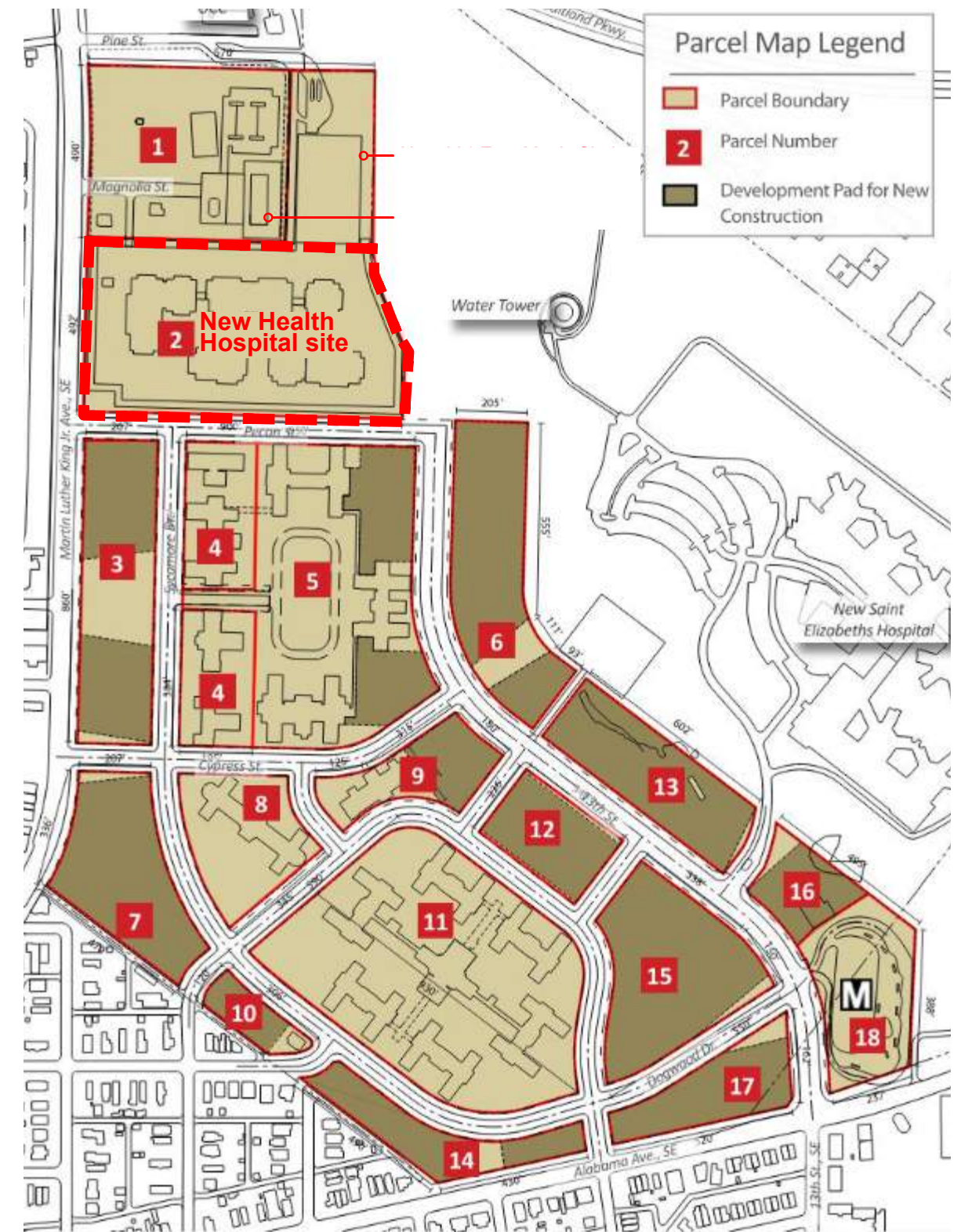
The campus itself is divided into the East Campus, owned by the district of Columbia, and the West campus, owned by the federal government and the GSA.

ST ELIZABETHS EAST CAMPUS - PARCEL 2

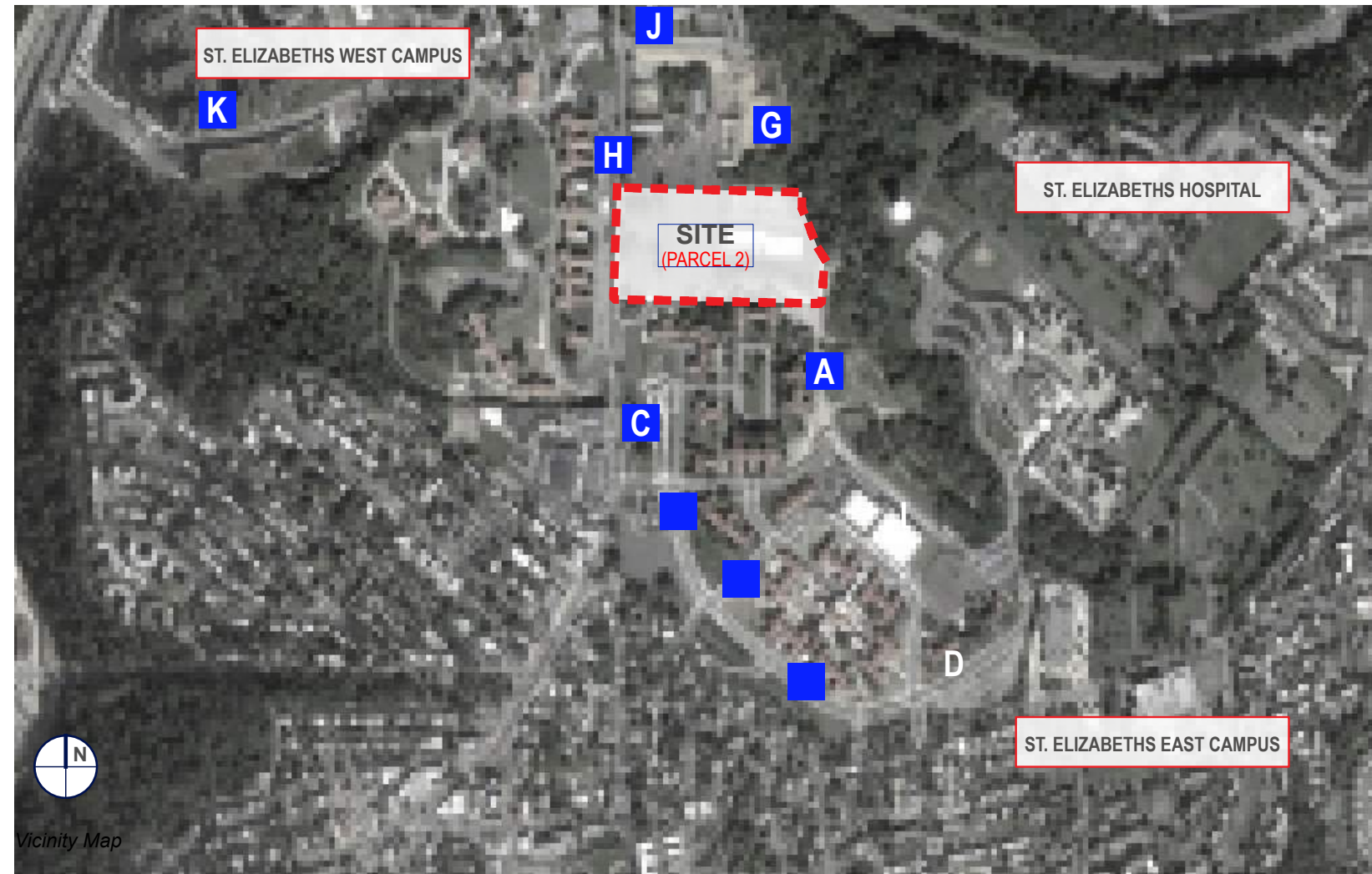
This project will be located on Parcel 2 of the East Campus of the St Elizabeths East Campus. Parcel 2 is bordered by Martin Luther King Jr. (MLK) Avenue SE on the west, Pecan Street SE to the South.

Notable structures directly adjacent to the site include the Historic Horse Barn on Parcel 1 to the north and the new 801 East Men's Shelter in land located on the northwest section of Parcel 2. Views and relationships to these two buildings are key drivers that have informed the planning of the new Health Hospital.

On Parcel 2, there are several existing Heritage Trees (trees that are greater the 100 inches in circumference) that are planned to remain in the new work.



East Campus Parcel Diagram courtesy of the St. Elizabeths Master Plan and Design Guidelines



Vicinity Map

Vicinity Map

See Exhibits on next page for additional context information.



A The Maple Quad



B The Residences



F RISE Demonstration Center



C Gateway DC Pavilion



D The Residences



E The Residences



G Future Men's Shelter



H Historic Campus Stone Wall



I Sports Complex



J UCC Building

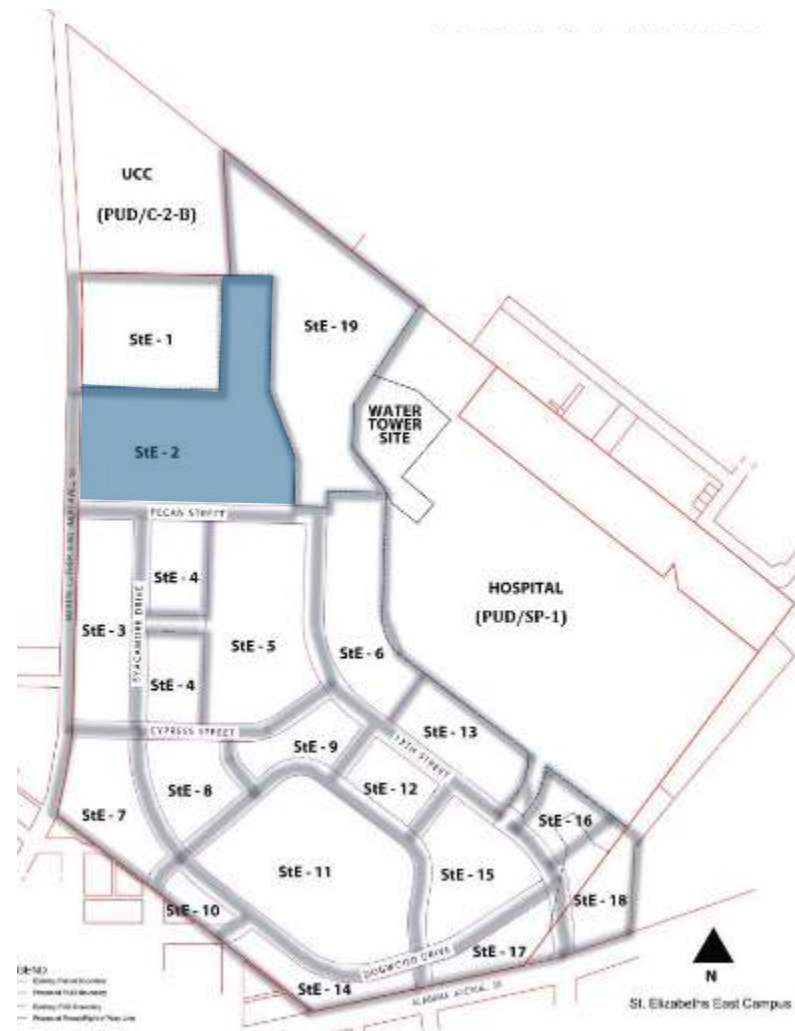


K US Coast Guard HQ

EXISTING SITE CONDITIONS

The site topography has a significant slope moving from west to east. The west edge of Parcel 2 is at, or slightly below, the elevation of Martin Luther King Jr. Avenue. Moving to the east, the grade drops by approximately 25'-0" at the mid-point of the parcel where it then remains relatively flat for the remainder of the property. Further east, beyond the limits of the project, the site continues to drop into a wooded ravine.

Parcel 2 is zoned STE-2 as part of the St Elizabeths Campus development with a maximum height limitation of 40'-0" on approximately one-third of the site closest to Martin Luther King Jr. Avenue SE; an 80'-0" height limit on the middle-third of the site; and a 90'-0" height limit on the eastern-most third of the site.



St. Elizabeths East (StE) Zoning District Map



Parcel 2 (Existing Condition) Looking North to Historic Horse Barn



Parcel 2 (Existing Condition) Looking East to Water Tower



Parcel 2 (Existing Condition) Looking South to Pecan Street SE



Parcel 2 (Existing Condition) Looking West to MLK Avenue SE with Heritage Trees shown in foreground

COMMUNITY ENGAGEMENT

Building on the Community Engagement strategy as performed by the District of Columbia during the initial project scoping phases, the Design Team had a joint meeting with ward 7&8 ANCs (refer to Section 4A – Entitlements) and, expanding on the strategies for public engagement, the District of Columbia issued put forth a Design Engagement message to District Residents outlining opportunities for public input outlined as follows:

The New Hospital at St. Elizabeths East is designed to meet the health needs of the District and specifically the communities of Wards 7 and 8. The community will be engaged and informed of the hospital design and construction progress, and will be engaged to assist with referring individuals for job opportunities and businesses for contracting opportunities. We will work collaboratively with individuals and community organizations to learn about the project and when available, training, job and apprenticeship opportunities.

UHS and DC Government know that what this new state-of-the-art hospital and its supporting services will mean to our residents – it represents hope and the promise of better care and health outcomes,” said Mayor Bowser. “When completed in late 2024, mothers will again be able to deliver their babies near their homes, patients will receive critical medical treatment in their communities.” Residents who wish to pursue a career in health care will have additional training and job opportunities to pursue their dreams.

Construction of the \$375 million hospital is currently underway with the site preparation expected to begin in Spring 2022. The hospital is expected to open in December 2024. The project is subject to a Project Labor Agreement and has First Source and CBE requirements and targets.

The Turner / MCN Joint Venture has engaged with and provided work opportunities in the St Elizabeth and neighboring Congress Heights communities – as well as with residents throughout Wards 7 and 8 and the District.

A Community Engagement Committee has been organized for the project, and there are planned outreach events for Q1 and Q2 of 2022. DC is still engaged with the neighborhood ANCs and the Wards 7 & 8 Health Councils, and the design team continues to coordinate as well with the relevant ANCs. The project team also met with DGS, DHS and other agencies to review the proposed helipad flight path and there were no major concerns brought to attention in this meeting.

SITE PRESERVATION & SUSTAINABILITY

From the viewpoint of sustainability, redevelopment of a previously developed site, with connection to an existing transportation network and infrastructure, is environmentally preferable to the development of a greenfield site whose natural ecosystem would be disrupted by new development. The site is entirely previously developed land, primarily paved surface parking lot, with some legacy trees in the landscaped islands of the lot. The design also preserves the legacy trees on site and will achieve LEED Silver.

High Priority Site -

Economically Disadvantaged Community Location: Project is located on a census tract where average household income is at or below 80% AMI, OR at least 20% of population is at or below poverty rate of state, provincial, or other regional jurisdiction, OR unemployment is at least 150% of the state, provincial, or other regional jurisdiction;

Amenities and Density -

Access to diverse amenities and services within short distance or walking distance of the new facility can help reduce vehicle miles traveled per person per day. This density and diversity can enable staff, patients, and visitors to run errands on their way to or from the facility, as well as on breaks.

Cedar Hill Regional Medical Center GW Health’s location in Southeast Washington DC on Martin Luther King, Jr. Ave at the juncture of Congress Heights, Douglass, Barry Farm, and Anacostia neighborhoods.

The neighborhood is primarily residential, with some light commercial on Martin Luther King, Jr. Ave, and a DHS campus immediately across Martin Luther King, Jr. Ave. A high school and elementary school are located just to the south of the new hospital site. LEED for Healthcare awards this credit with a Walkscore of 50 or higher. This site achieves a Walkscore of 50.

THE CEDAR HILL NAMESAKE

On February 17th, 2022 DC Mayor Muriel Bowser announced the new name of the new health hospital at St. Elizabeths at the historic groundbreaking ceremony and public engagement event.

Wayne Turnage, D.C. deputy mayor for health and human services, called the start of construction of Cedar Hill Regional Medical Center GW Health “a seminal watershed moment in health care for the residents of Wards 7 and 8.”

“There can be no more appropriate name for this hospital than one that embraces not just the life of Frederick Douglass but the struggle poor Black people have had since we were dragged through the streets in chains,” he said in an interview to the Washington Post.

Douglass descendant Kenneth B. Morris Jr. spoke at the event and thanked Bowser for honoring the iconic abolitionist and the women who helped preserve Cedar Hill.¹



¹ <https://uhs.com/about-uhs/newsroom/news-coverage-cedar-hill-regional-medical-center-in-dc/>
Image copyright: Washington Post Article - February 17, 2022

SITE PLANNING

Working with existing topography, the site planning of the Cedar Hill Regional Medical Center GW Health takes advantage of the natural grade change by placing the new, free-standing Parking Garage at the lower portion of the site.

This strategy of placing the four-story parking structure on the lower grade results in an exterior massing that, when viewed from Pecan Street SE, is only two stories above grade and results in an almost hidden garage from MLK Ave.

The site planning provides a new pedestrian connection through the site to connect the historic St. Elizabeths Campus at south to the Historic Horse Barn and the new 801 East Men's Shelter to the north. The site plan creates a green buffer zone along Martin Luther King Jr. Avenue, SE and retains the existing heritage trees on the site.

Accessibility and transportation to the site was also a key consideration in the planning as much of the patient population will arrive on public transportation. The site plan allows an opportunity for access from the Congress Heights WMATA station on the south corner of the site which is within a 10-12-minute comfortable walking distance for patients and visitors.

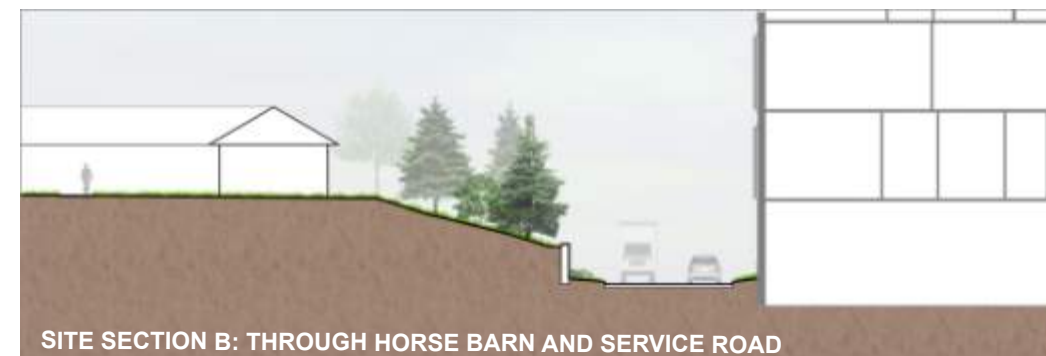
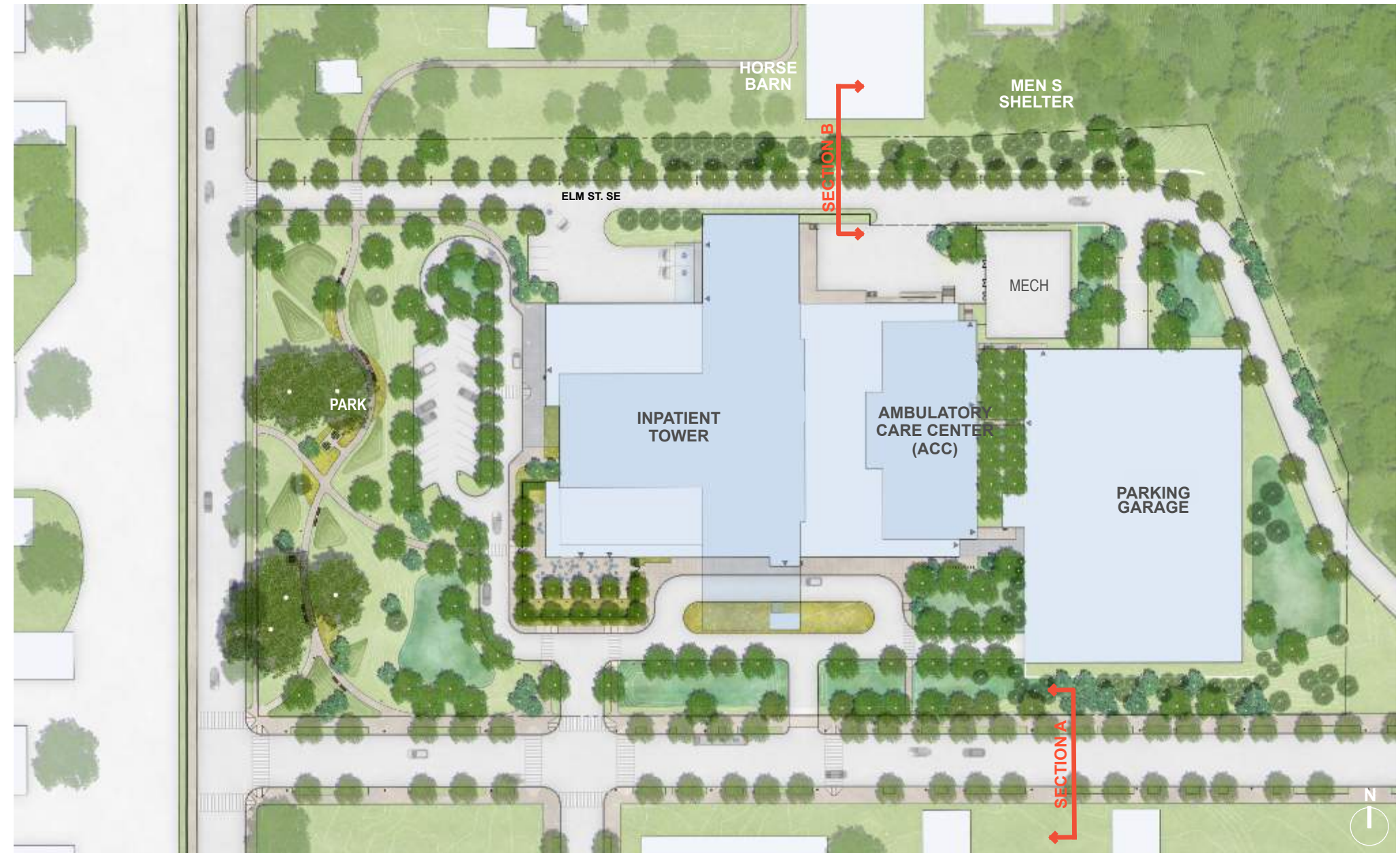
Current plans being executed by others to expand both MLK Avenue SE and to straighten Pecan Street SE have been incorporated into the site design.

SITE CIRCULATION

The primary visitor and patient access for hospital and outpatient arrivals is from Pecan Road along the south side of the site. The hospital drop off is accessed from a centralized point with visibility to and from the main hospital lobby.

The roadway includes a drop-off lane and bypass lane under the overhang of the patient unit floors to provide protection from the elements as patients and visitors arrive.

The loop road circles around the hospital on the north and is envisioned for ambulance, deliveries, and staff only. Public / Patient traffic will remain on the south and west side of the hospital to avoid dangerous cross traffic.



SITE SECTION B: THROUGH HORSE BARN AND SERVICE ROAD



SITE SECTION A: PECAN ST.

PECAN STREET - OPENING CONDITION

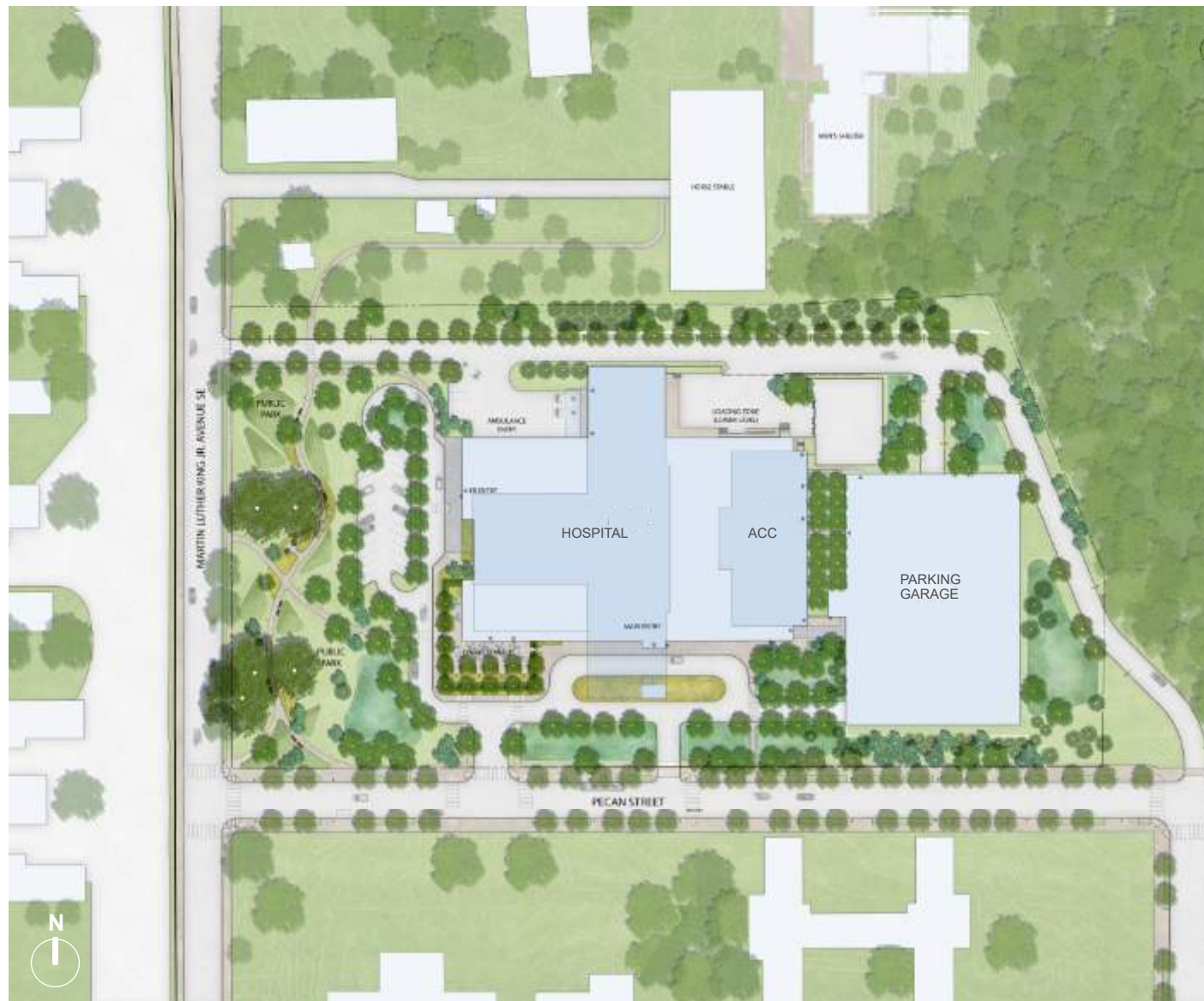
As part of the St Elizabeths Campus development the opening condition expected for the hospital includes a straightened Pecan Street conditions with three curb cut locations north to access the site.

These curbs, as well as the cross walk locations are predetermined and coincide with the future plans to add Sycamore Drive. The future condition along Pecan is also illustrated below for reference.

An additional (3) curb cuts are planned along Pecan Road, SE, which will be constructed prior to the hospital's opening to connect Martin Luther King, Jr. Avenue SE with the new 13th Street SE extension project to link Pecan Road, SE with the Congress heights metro station, enabling a public transit corridor to be established between the hospital site and the metro. One of the proposed access points off of Pecan Road will be adjusted to provide safe vehicle maneuvering and sight lines and the second location will remain as designed in the Pecan Road SE construction

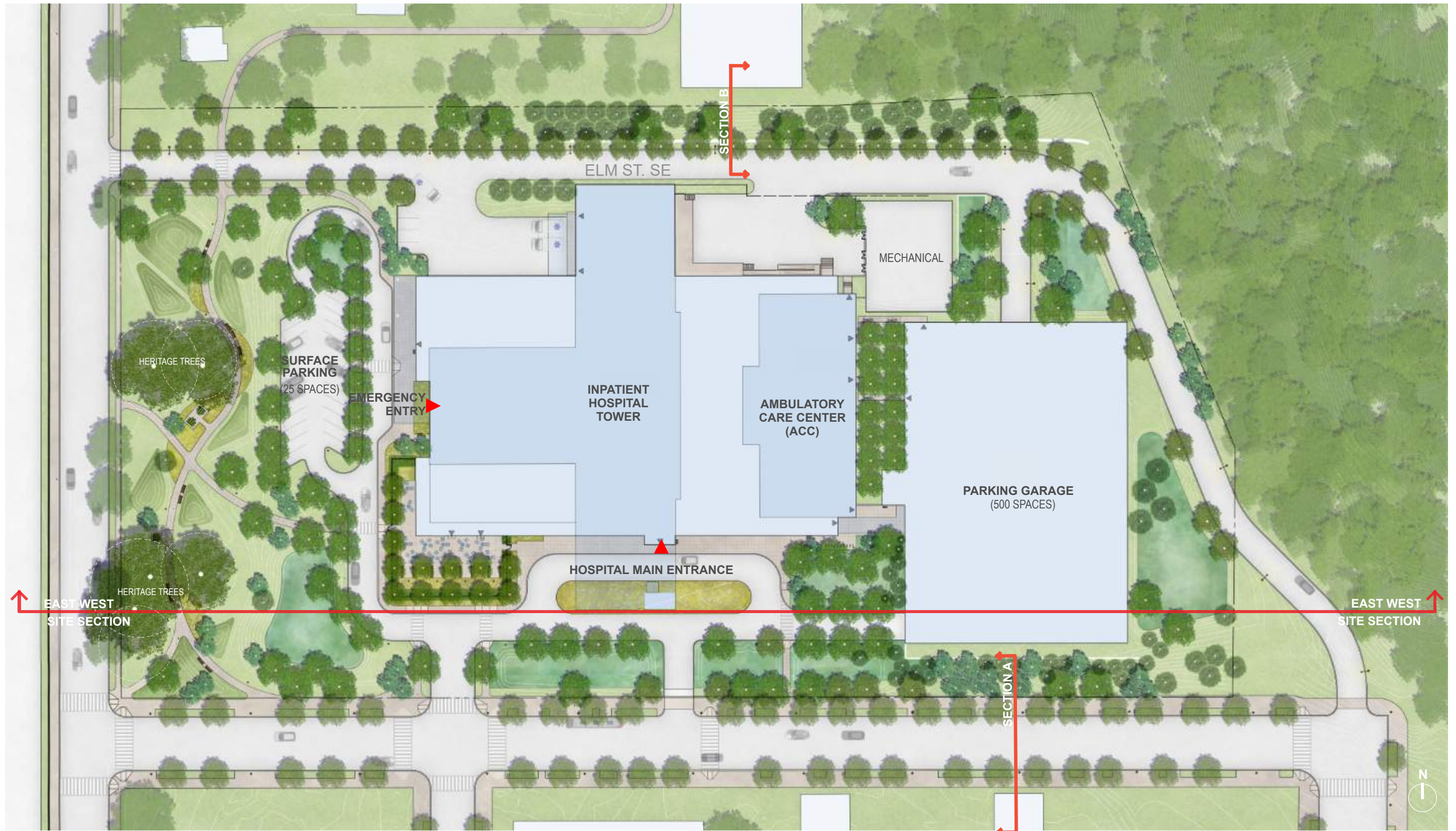
PECAN STREET - FUTURE CONDITION

The design of the Cedar Hill Regional Medical Center GW Health and the civil and landscape considerations allows for the eventual adaptation of the Sycamore Street Curb cut and relocation of Building 88. The hospital, as juxtaposed on top of the 2012 master plan, will ultimately provide easier connections to the southern quad of the overall campus and better provide a link to the parks and men's shelter.



CEDAR HILL REGIONAL MEDICAL CENTER GW HEALTH - OPENING CONDITION

CEDAR HILL REGIONAL MEDICAL CENTER GW HEALTH - FUTURE CONDITION



UPDATED LANDSCAPE PLAN

Refer to Landscape Section & Appendix for further information

BUILDING INFORMATION - MASSING

The baseline design for the Cedar Hill Regional Medical Center GW Health is organized as a two-story podium with a three-story hospital bed tower and a two-story ambulatory care center above.

The building massing is a direct response to two key factors; the operational layout of the hospital, and, the massing approach to the overall form as dictated by the surrounding buildings in the area.

The three-story hospital bed tower has been located to the east of the 80'-0" zoning height line which allows the two-story podium to slide under the tower thereby maximizing the green zone to the west side of the parcel for a total build that is five stories high.

The location of the three-story tower in the center of the parcel not only responds to the zoning height limitation, but also provides a direct, visible connection to the community when viewed from Martin Luther King Jr. Avenue, SE.

Locating the two-story podium within the 40'-0" height limit serves to enhance the "green zone" along Martin Luther King Jr. Avenue SE. with the addition of a pedestrian path through the retained heritage trees.

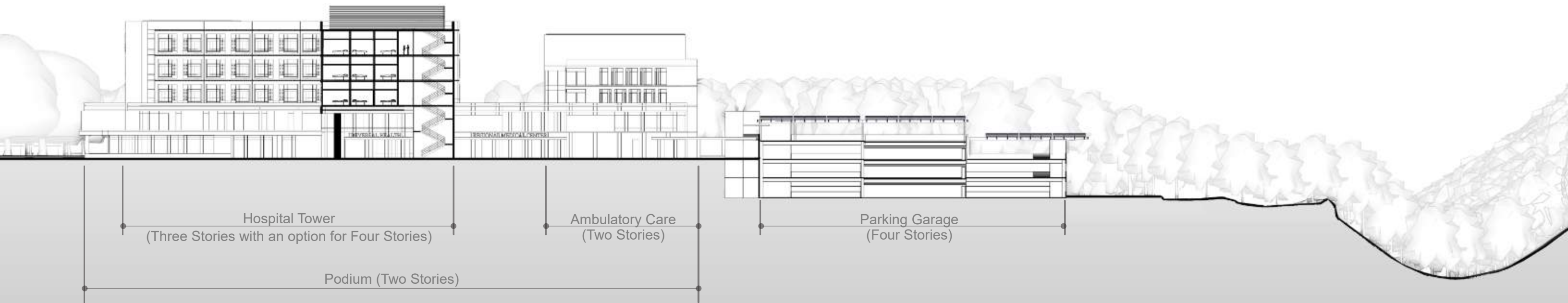
The two-story of Ambulatory Care Center, located above the two-story podium is separate from the hospital tower, thereby maintaining its own identity within the community. The Ambulatory Care Center is located on the east side of the parcel and includes a direct pedestrian connection to the adjacent Parking Garage

BUILDING ACCESS

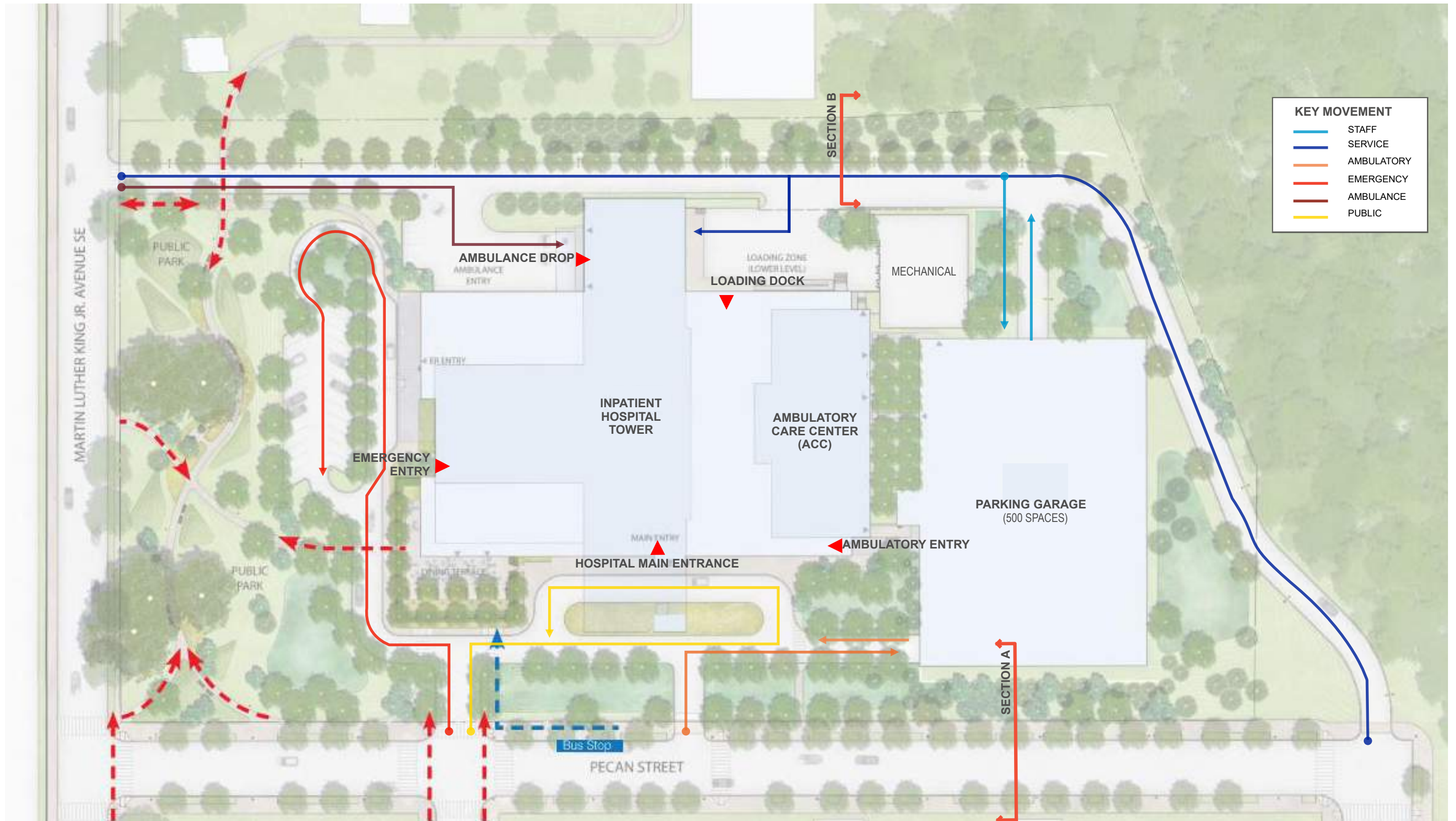
Emergency walk-in arrivals occur on the west side, facing Martin Luther King Jr. Avenue SE. For vehicular and pedestrian safety this is a one-way loop road with a dedicated covered drop-off lane, bypass lane and dedicated parking.

Ambulance arrivals will occur from Martin Luther King Jr. Avenue SE to the north side of the building. The ambulance arrival area includes a covered arrival area with a separate decontamination entrance and additional decontamination capacity underneath the overhang.

Additional parking for emergency vehicles is located along the west edge of the ambulance area. The loop road on the north and east sides accesses the loading dock, utility yard and staff entrance to the parking garage. The loading docks are located at the basement level and a dedicated staff entrance connects the lower level of the parking garage to the basement.



EAST - WEST SITE SECTION

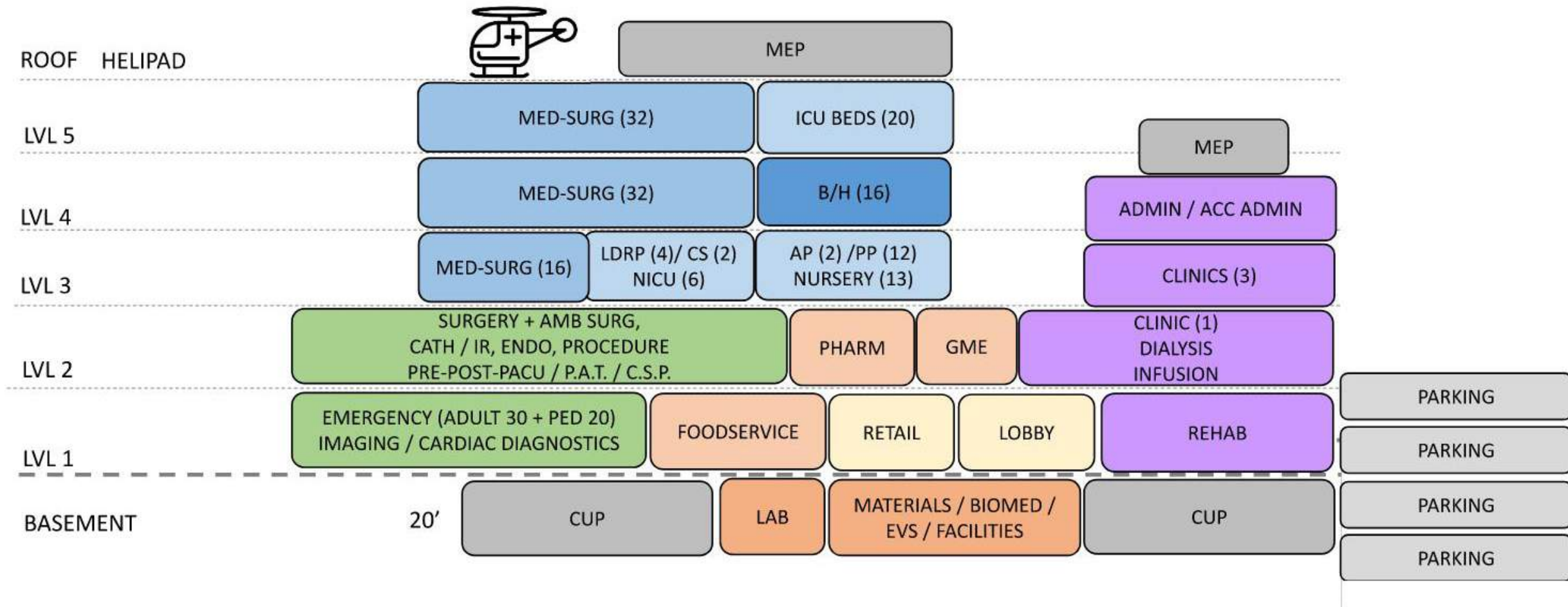


UPDATED SITE CIRCULATION

PROGRAM ORGANIZATION

The existing sloped topography creates an opportunity to develop a basement level for services and loading docks. This concept block and stack illustrates the department placement and key vertical and horizontal adjacency of Cedar Hill Regional Medical Center GW Health.

Primary public and emergency entrances are located appropriately at the main grade level, connecting to the parking garage. The limitations on the width and depth of the site necessitated located additional diagnostic and treatment areas and clinics on level two. The base design includes inpatient units that are stacked on levels three, four, and five, respecting the zoning height limits. The outpatient clinics and administration areas are stacked in a separate volume above the common podium levels.



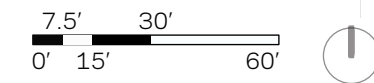
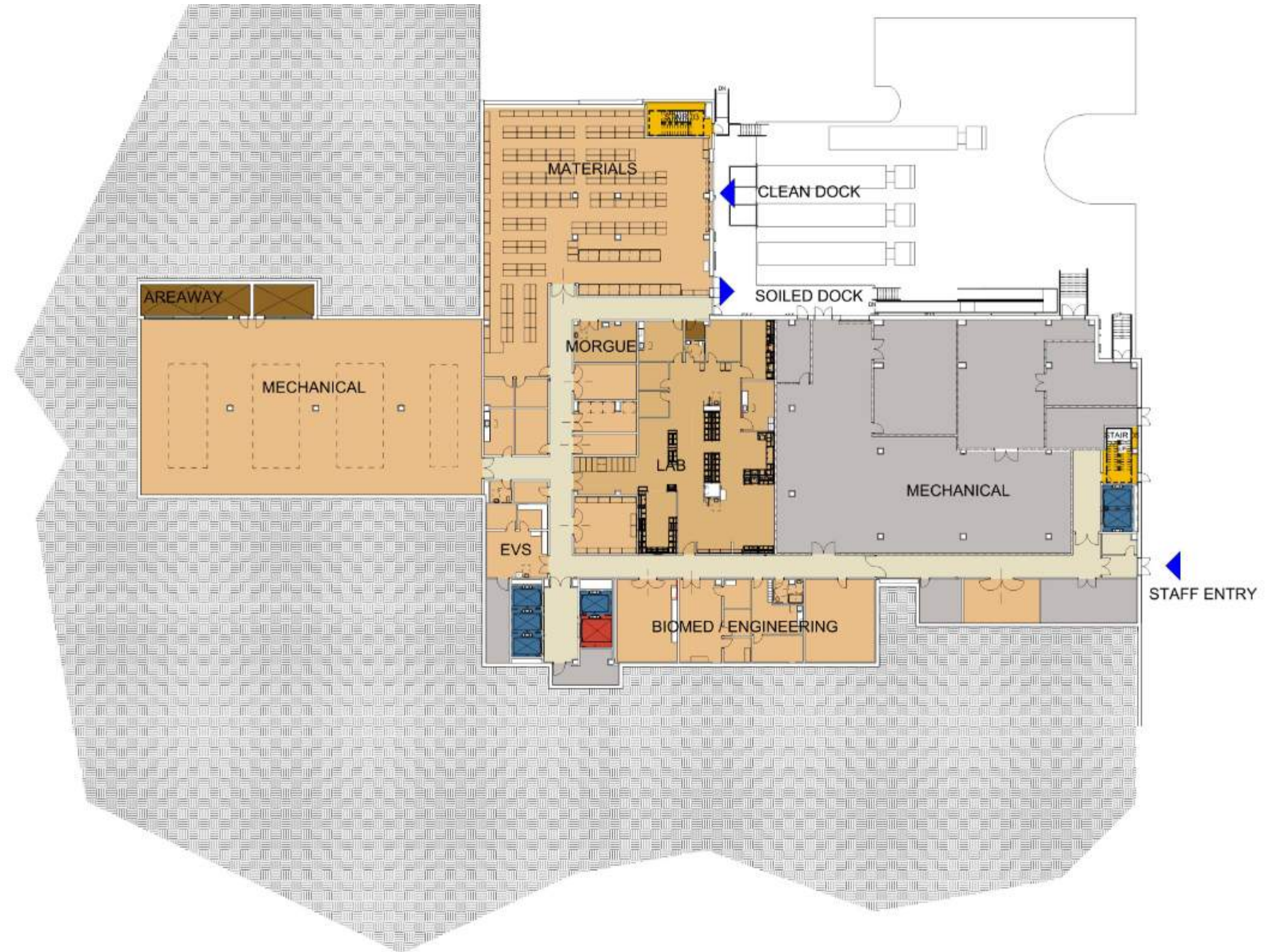
BLOCK & STACK PLAN

BASEMENT FLOOR PLAN

Building services, materials management, hospital lab and the main central energy plant are located on the basement level. This level is below grade on the south and west sides but opens at grade on the north and east sides.

Loading docks for clean supply and soiled discharge are located on the north of the footprint. Materials supply areas connect the loading docks with the main elevator core. Service elevators connect from the basement level through all levels. There is one larger elevator for emergency patient transport from the roof top helipad to all treatment floors, and this continues to the basement for service access. One additional support elevator connects to the roof for equipment movement to the roof and redundancy for the emergency elevator.

There is a staff entrance from the parking garage on the west side, providing connections to the staff elevators for both the ambulatory and hospital floors.



FIRST FLOOR PLAN (PODIUM LEVEL 1)

Hospital and ambulatory program areas share the First Floor, joined by a shared reception, registration, and admissions office area. The public lobby is centrally located, connecting the inpatient and ambulatory entrances with the two groups of public elevators.

Hospital and outpatient Imaging Services are consolidated in the north and center of this floor, providing separate access for outpatients and for emergency access through separate travel paths. Outpatient Rehabilitation Therapy is located on the east side of this floor, with immediate access to both the main entrance and the entrance closest to the parking garage.

BUILDING ACCESS

The main entrance to the new Health Hospital is located on the south side of the building, accessible from Pecan Street, SE. This location on the south side allows for a unified entrance to the both the Hospital and Ambulatory Center, creating a clear “front door” visible from Pecan Street, SE. By combining the main entry and ambulatory entry along one main lobby with two identities, the site entry approach becomes very simple and intuitive, allowing for a single point of access with information in a central location.

The *public* Emergency Room entrance is located on the west elevation, separate from the main hospital entrance (good hospital practice) providing good visibility from Martin Luther King Jr. Avenue.

The *ambulance* Emergency Room entrance is located on the north elevation, separate from the main entry and public ER entry (good hospital practice). The north elevation has been planned as the service / staff zone of the hospital, allowing for proper separation from all public circulation to the south and east of the building. This planning strategy represents good safety practice as it is undesirable to mix public movement with materials and ambulance movement.

The service entrance (loading dock) is located on the north elevation. The north service entrance is served by a new service loop road on the north side of the site that is separate from general public access and is planned for use by ambulances, staff and material movement only.

The separate Parking Garage structure is located to the east of the Hospital and, with the ambulatory program in the eastern portion of the hospital, the pedestrian public connection directly from the parking to the main lobby and to the outpatient programs is very efficient, and will serve to reduce excessive foot traffic through the main building



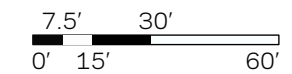
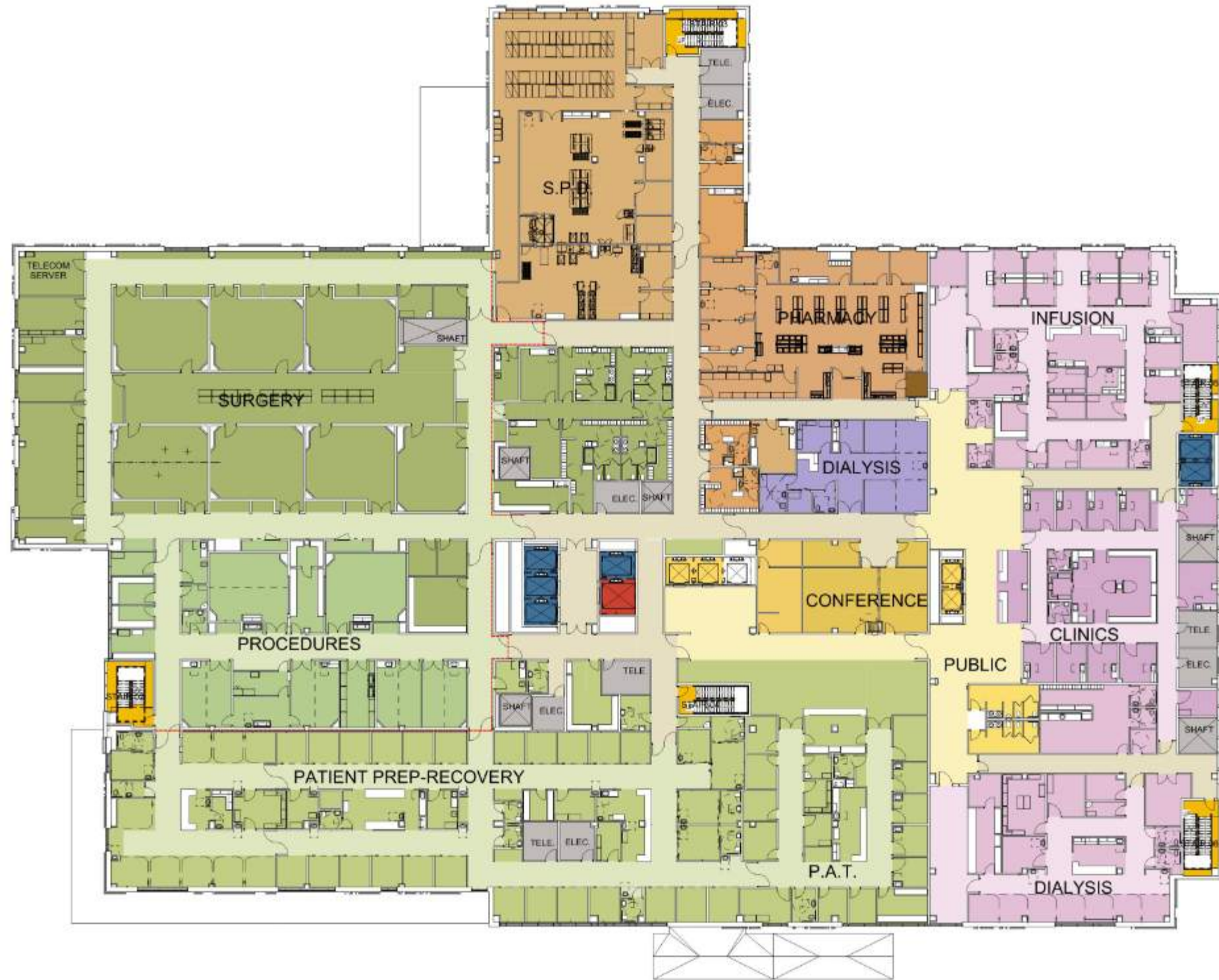
SECOND FLOOR PLAN (PODIUM LEVEL 2)

Hospital and ambulatory program areas share the Second Floor podium space.

The shared public space is centrally located, connecting the inpatient and ambulatory public elevators, providing access to the patient treatment areas as well as the chapel and conference rooms.

Pre-Admission Testing, Inpatient and Ambulatory Surgical areas including Operating Rooms, Minor Procedure Room, Endoscopy, Cardiac Cath, International Radiology, TEE, and the associated pre and post-procedure patient care areas are located on the west half of the floor. Outpatient services for Infusion Therapy, Dialysis and one Specialty Clinic are located on the east half of the floor. Support areas for Pharmacy, Central Sterile Processing and Resident spaces area also located on this floor.

The emergency patient movement elevator opens adjacent to the surgery and procedure areas, and both groups of service elevators provide support and staff access, separated from the public access.



THIRD FLOOR PLAN

At this level, the hospital and ambulatory floors are separated.

HOSPITAL TOWER

The Women’s Health programs including Triage, two Antepartum inpatient rooms, fourteen Postpartum inpatient rooms, four LDR rooms, two C-Section rooms, six NICU bays and a Well Baby Nursery for six newborn bassinets are consolidated on the hospital Third Floor.

A sixteen bed Medical surgical unit occupies the south wing of this floor. While family and visitor access is from the shared lobby on the east face, the Women’s Unit is secured and accessed separately from the medical surgical unit, so an additional exit stair is provided to allow code compliant exiting from the areas outside of the Women’s Unit areas without requiring travel through the Women’s Unit areas.

The C-Section suite connects directly to the emergency patient transport elevator for patient moment to and from the emergency department and surgery operating rooms when needed.

AMBULATORY CARE

Three outpatient clinic modules are located on this floor of the ambulatory footprint. These are oriented with the public access toward the west to provide views of the green roof from the waiting areas.

The clinic modules are based on the UHS standard model, which has standard exam and treatment rooms sizes organized in repeating groups allowing for flexibility in assigning based on scheduling. These space groups are centrally located on the floor without major services interrupting the flow of treatment and support space. The service / staff elevators and support spaces are located along the east face.



FOURTH FLOOR PLAN

At this level, the hospital and ambulatory floors are separated.

HOSPITAL TOWER

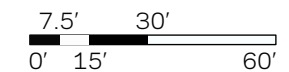
The sixteen bed Behavior Health inpatient unit and a 36 bed Medical-Surgical inpatient unit are located on the Fourth Floor.

Physical Therapy, Occupational therapy, and Speech Therapy workspace is located on this floor. Family and visitor access is from the shared lobby on the east face.

The Behavior Health unit will have dedicated visitor, patient and staff entrances though security sallyports. This unit is organized with the common day use space on the south end, and two groups of eight beds each for male and female residents on the north end of the unit.

AMBULATORY CARE (CONNECTED HEALTH)

The hospital administration areas included in the Connected Health space program and the Ambulatory Administration space program areas will be located on the Fourth Floor of the ambulatory footprint. This floor is accessed by both the public and service / staff elevators. Areas for the residents was also incorporated towards the south of the plan, to gather and meet for academic and educational programming.



FIFTH FLOOR PLAN

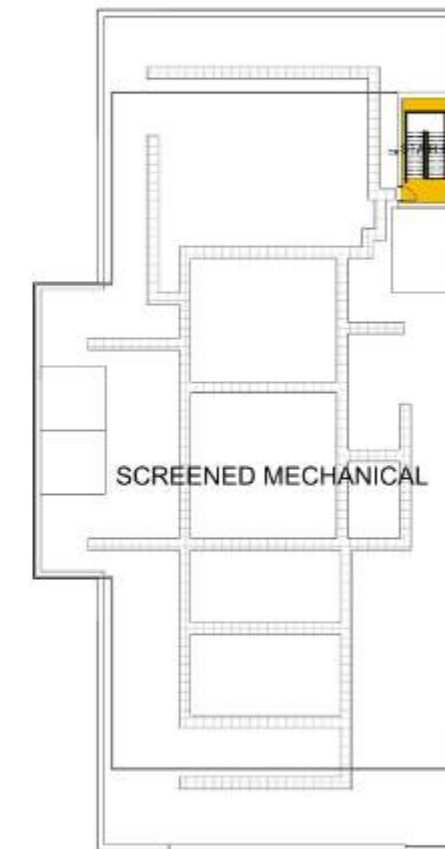
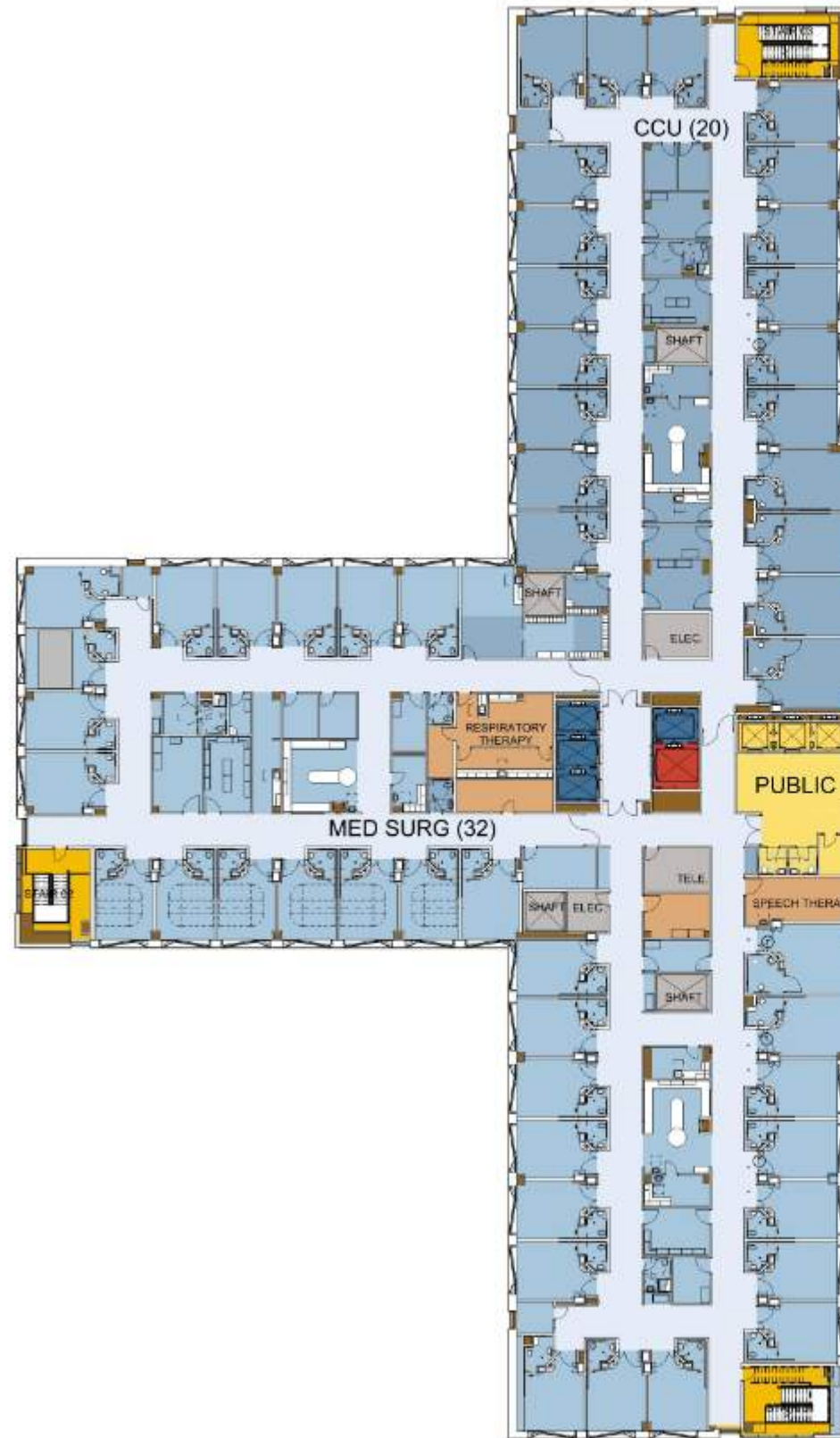
At this level, the hospital and ambulatory floors are separated.

HOSPITAL TOWER

The twenty bed Intensive Care Unit and a 36 bed Medical-Surgical inpatient unit are located on the Fifth Floor. Telemetry monitoring space is positioned between the two units. Respiratory Therapy work space is located on this floor for access to the ICU. Family and visitor access is from the shared lobby on the east face.

AMBULATORY CARE

This level of the ambulatory footprint is the roof level, which will have mechanical equipment enclosed by screening walls. One service elevator and one stair provide access to this roof level.



ROOF PLAN

Roof access is provided via two stairs at the north and south ends, from the larger emergency patient movement elevator, and the additional service elevator. A helipad is located on the west wing of the tower.

Mechanical equipment enclosed by screening walls occupies the north and south wings of the roof. Screened mechanical units with walking pads for the ACC is also located on the roofdeck of the ambulatory care facility.

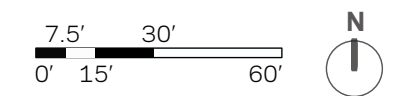
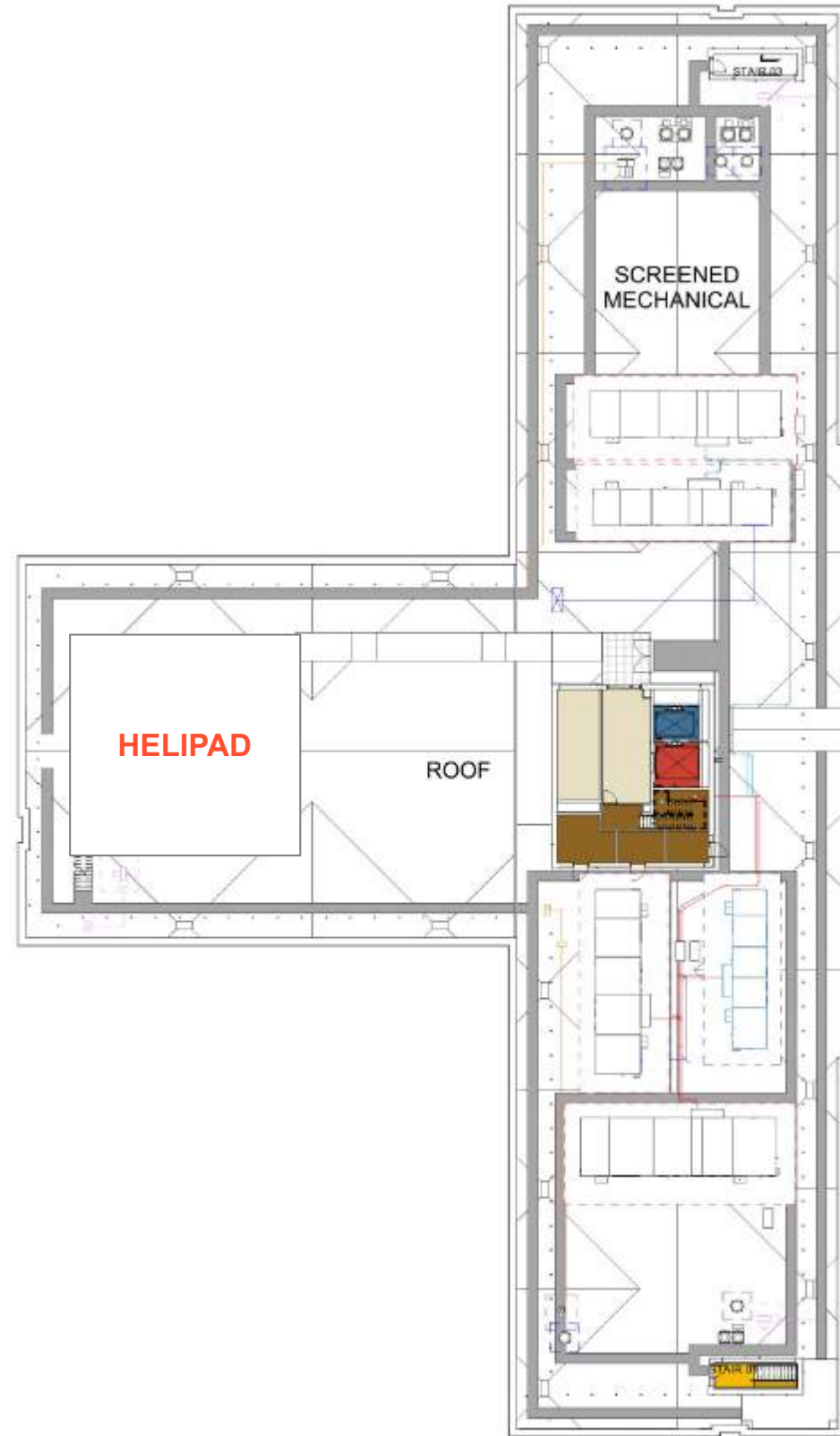
HELIPAD

A helipad is located on the west wing of the tower.

The project will have a rooftop helistop to service the emergency department. The Federal Aviation Administration (FAA) will have oversight and final approval for permits related to flight paths and the configuration of the helistop. The flight path for the hospital helistop is adjacent to Joint Base Bolling as well as Roland Reagan Washington National Airport, and the flight path for aviation to Joint Base Andrews.

The helistop will be located on the highest roof of the hospital campus, free of ground obstructions. Flight approach to the helistop will be from the south, over the Congress Heights neighborhood and the St. Elizabeths East campus. Departure will be to the north.

In September 2021, DGS, DHS and FAA to review the flight path exhibit and no significant issues were raised in the meeting. The proposed flight path to the hospital has been filed and approved by the FAA. See appendix for approved flight path approach and departure information.



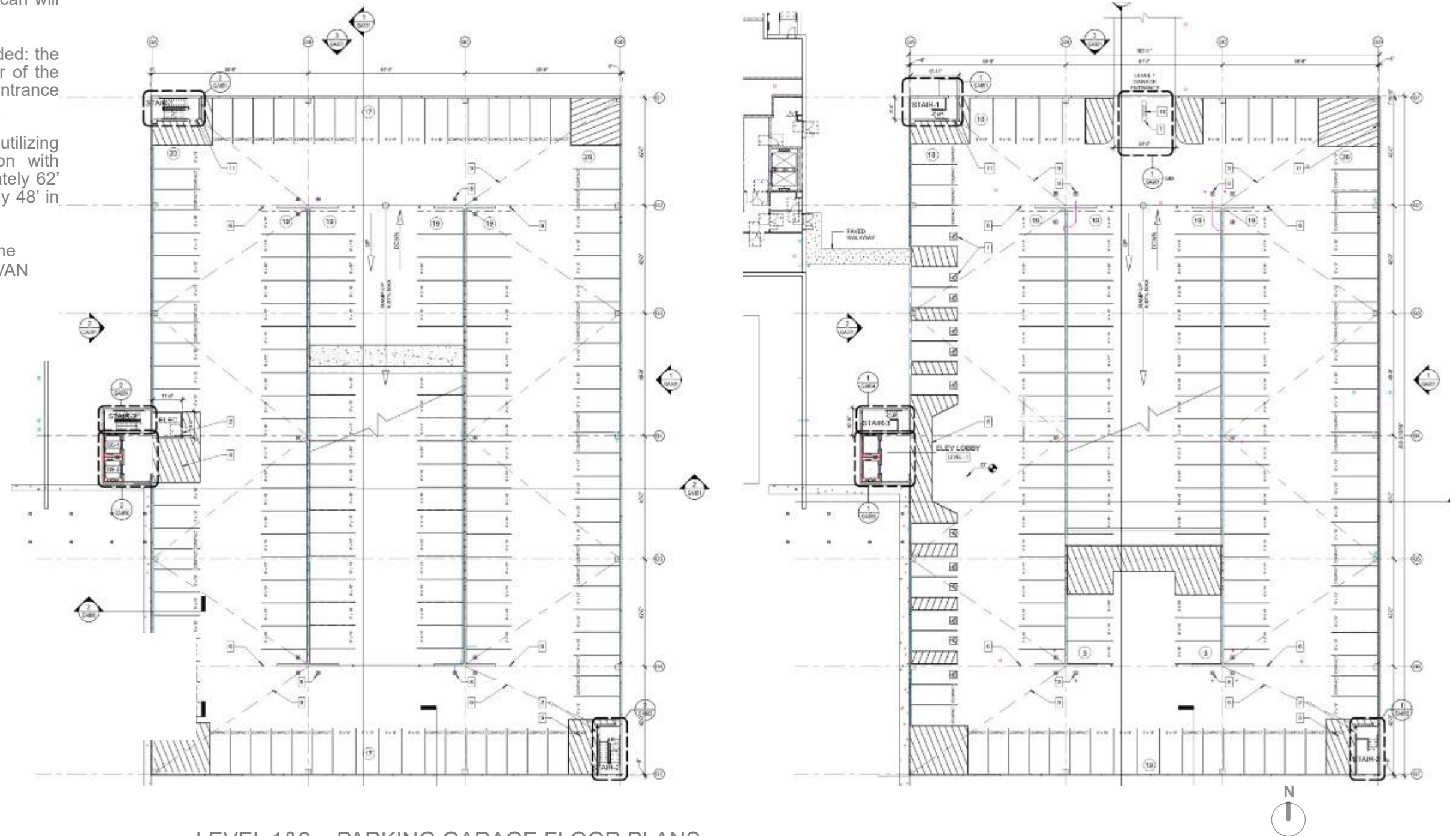
PARKING GARAGE

The Parking Garage, planned to accommodate 500 vehicles, is a separate pre-cast, three-bay garage structure located on the east side of the parcel, accessed from Pecan Street SE. Two Green walls to the west entry and the south wall along Pecan will provide a green buffer and natural barrier.

Two vehicular entry/exit points will be provided: the main entry will be at the south west corner of the structure on the third level with the second entrance located at the north end on the ground level.

The parking structure is a 3-bay structure utilizing long-span precast double tee construction with center-to-center bay spacings of approximately 62' in the long-span direction and approximately 48' in the short direction.

Typical floor to floor heights are 11'-6" with the ground floor having a taller floor to floor for VAN Accessible parking spaces



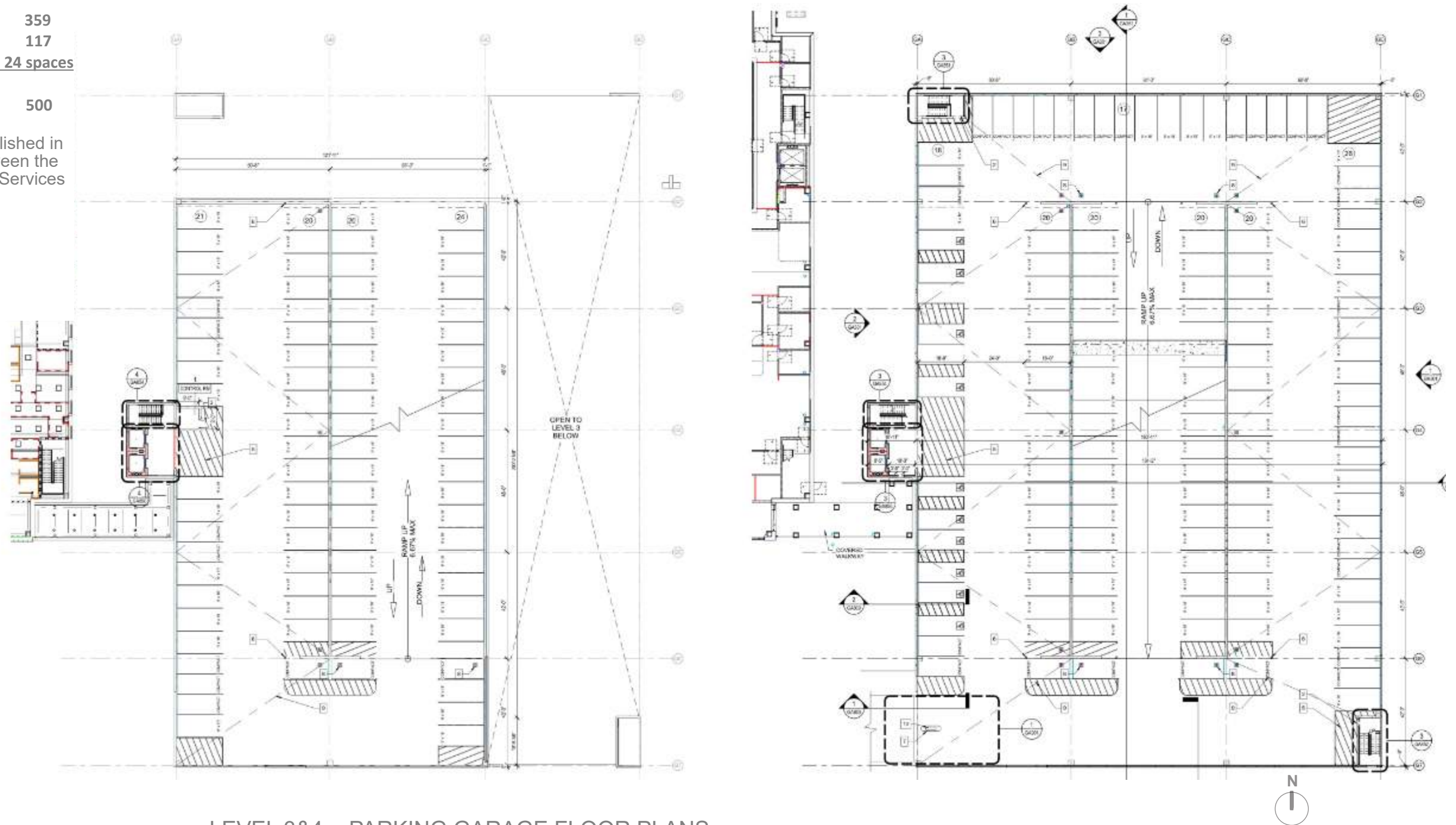
LEVEL 1&2 - PARKING GARAGE FLOOR PLANS

PARKING GARAGE

Through the use of color admixtures, the exterior pre-cast concrete spandrel panels will match the design aesthetic established for the rest of the hospital campus. General color descriptions are provided on the exterior renderings and elevations.

Standard Parking:	359
Compact Parking:	117
Accessible Parking: (8 van accessible)	24 spaces
Total Parking Spaces:	500

Note: the 500-car requirement is as established in the project Development Agreement between the District of Columbia and Universal Health Services (UHS).



LEVEL 3&4 - PARKING GARAGE FLOOR PLANS

AGENCY REVIEW & ENTITLEMENTS

OVERVIEW

The Cedar Hill Regional Medical Center GW Health at St. Elizabeth's East will be constructed Pecan Road, SE in the heart of the St. Elizabeth's Historic District. The new hospital campus is situated within the St. Elizabeths East Campus Master Plan development, in the Congress Heights neighborhood of the District of Columbia in Ward 8. Given the site's location and financing through public funds in the District of Columbia, the following list the authorities having jurisdiction over the site and project development, along with any entitlements that are present on the site:

CAMPUS AND FACILITY DESIGN

The following agencies and AHJs will have jurisdiction over the design of the campus facilities:

State Health Planning & Development Authority (SHPDA), Certificate of Need (CON)

As specified in the *Development Agreement*, the State Health Planning and Development Authority (SHPDA) will have oversight and approval for a mandatory submission of a Certificate of Need (CON) to demonstrate a public need for the new health facility and services it will provide. The District of Columbia, with support from UHS and the design team, will file the CON for approval. The CON was approved as required to submit the building permit by ShpdA on December 27, 2021.

Commission of Fine Arts (CFA)

The US Commission of Fine Arts was established by Congress in 1910 as a permanent body to advise the federal government on matters pertaining to the arts and national symbols, and to guide the architectural development of Washington, D.C. Approval of the project by the CFA is required for the submission of building permits.

In the SD, DD and now CD phase, the design team met with CFA staff prior to the submission to the Commission through out the design process.

In the meeting with the public hearing on September 15, 2021, the design team was approved to move forward with the approved design concept.

This document serves as a final design submission, with the submitted construction documentation set. The design team looks forward to reviewing the final design submission with the CFA Commission on April 21, 2022.

The National Capital Planning Commission (NCPC)

NCPC was established by Congress in 1924 and is the federal government's central planning agency for the National Capital Region. The Commission provides overall planning guidance for federal land and buildings in the region by reviewing the design of federal and certain local projects, overseeing long-range planning for future development, and monitoring capital investment by federal agencies. NCPC will be offered a courtesy review of this project through the CFA submittal process.

This document will also serve as a final design submission to the NCPC following their preliminary approval in the Fall of 2021.

The Historic Preservation Review Board (HPRB)

The government body that designates historic property and advises the Mayor on historic preservation matters in the District of Columbia. As the State Review Board, the HPRB also helps to implement federal historic preservation programs in the District. As the site is located within the St. Elizabeths Historic District, review of the project design and approval is required by the HBRB.

St. Elizabeths East Master Plan & Design Guidelines: The St. Elizabeths Hospital Historic District was listed on the National Register in 1979 and designated as a National Historic Landmark in 1990. While not a governing body or AHJ, the 2012 master plan set specific design guidelines for any development that occurs within the boundaries of the historic district.

As the new hospital campus falls within this district, AHJs such as CFA and HPRB will look to ensure that the design guidelines established in the 2021 master plan are incorporated into the design of the campus facilities. The project received HPRB approval on September 23, 2021.

The District of Columbia, Department of Consumer and Regulatory Affairs (DCRA)

Protects the health, safety, economic interests, and quality of life of residents, businesses, and visitors in the District of Columbia by ensuring code compliance and regulating business. All building permit submissions will be made to DCRA for construction. To date, two permit packages have been submitted to DCRA. The rough grading permit was submitted in October of 2021, and the permit received from DCRA on January 25, 2022. The Foundation to Grade Permit was accepted by DCRA on March 16, 2022 and is currently under review. The full building permit is anticipated to be submitted to DCRA by end of May, 2022.

The District of Columbia Department of Health

Will review all construction permit applications as part of the permit submission through DCRA.

The District of Columbia, Office of the Fire Marshal, Fire Prevention Division (DC Fire)

The goal of the Office of the Fire Marshal, Fire Prevention Division, is the prevention of fire, and the safety of the citizens and persons who live and work in, or visit Washington, DC. As part of the permit submission through DCRA, the construction permit will be reviewed for fire safety and requirements. A meeting to review the campus and building design was held with DC FEMS on March 15, 2022.

Advisory Neighborhood Commissions (ANC)

Advisory Neighborhood Commission (ANC) are non-partisan, neighborhood body made up of locally elected representatives called ANC commissioners. The ANC's purpose is to be their neighborhood's official vote in advising the District government (and Federal agencies) on matters that affect their

neighborhoods, and District agencies are required to give the ANC's recommendations "great weight." A Letter of Support for the project was received from ANC 8C on May 11, 2021.

The District of Columbia Office of Zoning

The District of Columbia Office of Zoning's mission is to provide administrative, professional, and technical assistance to the Zoning Commission (ZC) and the Board of Zoning Adjustment (BZA) in support of their oversight and adjudication of zoning matters in the District of Columbia. The project is sited in zone STE-2, which apart from other requirements, has set the height limits on the site.

A height limit of 40' extends from MLK Jr. Ave, SE 230' into the site to the east. From a distance of 230' to 560', an 80' height limit exists, and from 560' to the eastern property boundary a 90' height limit has been established.

The validation phase concept design has set the hospital with the 80' height limit. As discussed with UHS and the District of Columbia, alteration to the site height limit by 18' within the 80' height zone has been sought to enable construction of a future bed floor to raise the hospital capacity to 184 beds. In addition, a variance will be sought to provide relief from the 1:1 setback requirement for the rooftop mechanical yard screen walls.*

The project received approval from the District of Columbia Zoning Commission to raise the site building height limit to 98' on November 29, 2021. The project received variance approval for relief of the setback requirement from the District of Columbia Board of Zoning Adjustment on December 22, 2022.

The United States Green Building Council (USGBC) and Green Business Certification Institute (GBCI)

The USGBC / GBCI drives implementation of the LEED green building program. Per DC law, the project will need to achieve a minimum certification of LEED Silver rating, under LEED for Healthcare version 4.1. The GBCI will be responsible for reviewing project documentation and determining award of credits to meet certification requirements.

BUILDING INFORMATION - ZONING & SCALE

The baseline design for the Cedar Hill Regional Medical Center GW Health is organized as a two-story podium with a three-story hospital bed tower and a two-story ambulatory care center above.

The building massing is a direct response to two key factors; the operational layout of the hospital, and, the massing approach to the overall form as dictated by the surrounding buildings in the area.

The three-story hospital bed tower has been located to the east of the 80'-0" zoning height line which allows the two-story podium to slide under the tower thereby maximizing the green zone to the west side of the parcel for a total build that is five stories high

The location of the three-story tower in the center of the parcel not only responds to the zoning height limitation, but also provides a direct, visible connection to the community when viewed from Martin Luther King Jr. Avenue, SE.

Locating the two-story podium within the 40'-0" height limit serves to enhance the "green zone" along Martin Luther King Jr. Avenue SE. with the addition of a pedestrian path through the retained heritage trees.

The two-story of Ambulatory Care Center, located above the two-story podium is separate from the hospital tower, thereby maintaining its own identity within the community.

The Ambulatory Care Center is located on the east side of the parcel and includes a direct pedestrian connection to the adjacent Parking Garage.

The Parking Garage massing makes use the lower level of the site (east) using the natural grade to hide the garage as much as possible from the Pecan Street SE view.

As an option, an four-story tower (six -story building) has been studied and is included in this submission for consideration in the event that budget, schedule and a zoning variance approval for the increased height permit the option to move forward.

The project will have a rooftop helistop to service the emergency department. The Federal Aviation Administration (FAA) will have oversight and final approval for permits related to flight paths and the configuration of the helistop. The flight path for the hospital helistop is adjacent to Joint Base Bolling as well as Roland Reagan Washington National Airport, and the flight path for aviation to Joint Base Andrews.

The project scope includes the filing of the proposed flight path to the hospital for approval by the FAA.

The helistop will be located on the highest roof of the hospital campus, free of ground obstructions and the

flight approach to the helistop will be from the south, over the Congress Heights neighborhood and the St. Elizabeths East campus with departures to the north. The planned design, approval and implementation process is anticipated as follows

- Development of Heliport Layout Plan (HLP) and Approach/Departure Plan (During the Design Development Phase);
- FAA Airspace Approval (Approval timeline is approximately 6 months following the HLP Approach/Departure Plan);
- Receipt of favorable FAA determination
- Airport Master Record (Timeline approximately 3 – 6 months following the completion of construction of the heliport);
- Heliport is charted and receives a location identification and FAA site number.



MLK AVENUE SE, WEST ELEVATION / SECTION (BASE LINE)



MLK AVENUE SE, WEST ELEVATION / SECTION (OPTION FOR ADDITIONAL STORY ON HOSPITAL TOWER)

MATERIAL PALETTE

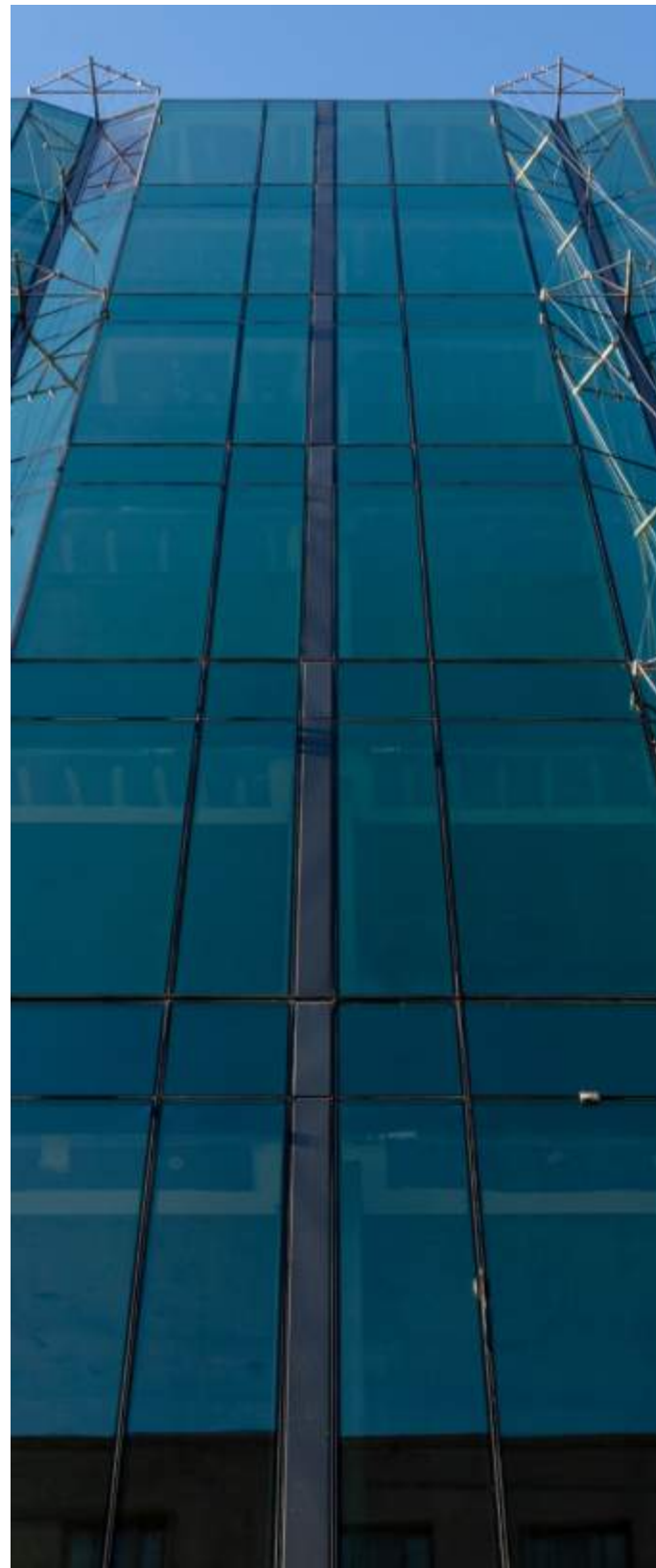
To conform to the surrounding context, this Cedar Hill Regional Medical center GW Health will use a mixture of pre-cast panels with thin brick, and, pre-cast panels with color/texture changes between terracotta and grey.

The hospital patient tower is envisioned as primarily thin brick, with the podium and ambulatory building being pre-cast panels. With the overall glass allocation planned for is estimated to be around 30% and the building will be primarily a punched architecture, which is in kind with the surrounding architecture and very energy efficient.



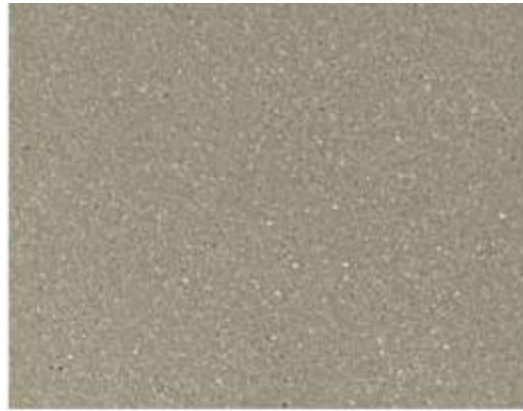
St. Elizabeths East Existing Context photo





SELECTED MATERIALS PALETTE

**Refer to drawings for pre-cast and window details for more information*



PC-01 - ARCHITECTURAL PRECAST CONCRETE W/ GREY PIGMENT



PC-02 - ARCHITECTURAL PRECAST CONCRETE W/ DARK GREY PIGMENT



PC-03 - ARCHITECTURAL PRECAST CONCRETE W/ TERRACOTTA PIGMENT



PC-06 - ARCHITECTURAL PRECAST CONCRETE W/ LIGHT GREY PIGMENT

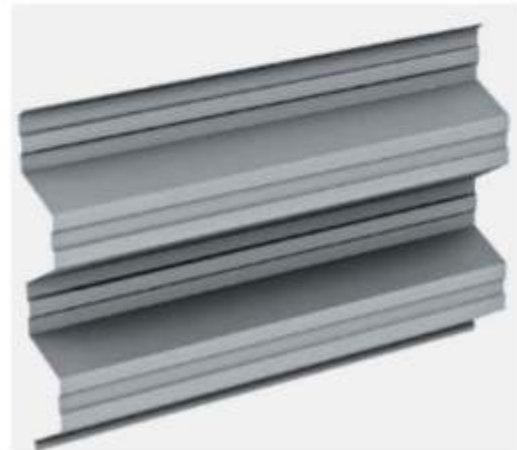


MTL-01 - UNITIZED ALUMINUM CURTAIN WALL SYSTEM W/ INSULATED GLASS

MTL-02 - ALUMINUM FRAME WINDOW W/ INSULATED GLASS



INSULATED VISION GLASS PANELS:
- LAMINATED GLASS FOR REGULAR PATIENT ROOMS
- LAMINATED GLASS SOUND PATIENT ROOMS
- LAMINATED GLASS WITH WARM GRAY SPANDREL



MTP-02 - PREFINISHED PLATE



PC-04 - ARCHITECTURAL PRE-CAST CONCRETE PANEL SYSTEM W/ THIN BRICK CLADDING & RAKED MORTAR JOINTS

PC-05 - ARCHITECTURAL PRECAST CONCRETE PANEL

SELECTED MATERIALS PALETTE

**Refer to drawings for pre-cast and window details for more information*

BUILDING EXTERIOR

To conform to the surrounding context, this building will use a mixture of pre-cast panels with thin brick, and, pre-cast panels with color/texture changes. The hospital patient tower is envisioned as primarily thin brick, with the podium and ambulatory building being pre-cast panels comprising of three different colors.

The materials were selected to be impactful and with cost and efficiency in mind and reflect similar treatments to the UHS standards and to the UHS Northern Nevada Sierra Medical Center example. The material palette was also refined in the Design Development Phase to reflect the approval and comments from CFA. The material palette selection is consistent with the St. Elizabeths Masterplan.

The design strives to continue the cohesive historic feel of the campus in a building with a unified D&T language, and the in-patient & out-patient towers to maintain distinction with a unique yet complimentary design language. The block and stack plans, site orientation, views and functional program further drove the materiality articulation and design language development.

Metal trim and shading elements will be part of the exterior canopy structures and located appropriately for maximum effectiveness. This include the exterior areas near each entry vestibule, as well as patient drop off locations along the front entry points. Parapet walls will be extensions of adjacent cladding materials, with heights required by code.

Mechanical screens will be set back from the parapet with appropriate heights to conceal roof top equipment. See drawings, material legends and renderings for further representation and information.

CLADDING & FACADE

i. The cladding system is Precast Architectural Concrete with mineral wool insulation and continuous air barrier system. Wall performance shall comply with ASHRAE 90.1 and Energy Conservation Code for relative R-Value.

iii. Precast at the Patient Tower incorporates a grade “TBX” thin-brick cladding, complying with Precast Concrete Institute (PCI) standards.

iii. Precast at Podium and ACC building has integral color face mixes in up to three different colors to articulate patterns and bandings indicated on the façade. Precast shall have an acid-etched or light sand-blast finish.

EXTERIOR OPENINGS, GLAZING & FOUNDATION

Typical Exterior Doors shall be hollow metal doors and fully welded frames, except where located in window wall systems.

Below grade foundation walls include a cast-in-place concrete that is waterproofed with fluid-applied or sheet membrane waterproofing to resist water infiltration under hydro-static pressure.

The exterior openings and their locations were similarly derived from the functional program placement. The bed tower exterior will have glazed openings as required for the individual patient rooms. Additional glazing is located along the exterior ends of patient hallways to allow for the staff and interior work areas to receive natural daylighting.

The podium openings also express the interior program and function behind it but largely due to the. The functions of the podium require fewer glazed openings but will be maximized where appropriate to promote natural daylight and wellness.

The ground level, especially at building entries, will be as transparent as possible to promote pedestrian circulation and wayfinding. The heavier glazing components are focused on the public areas, such as the main building lobby and waiting, as well as the ED lobby and entrance.

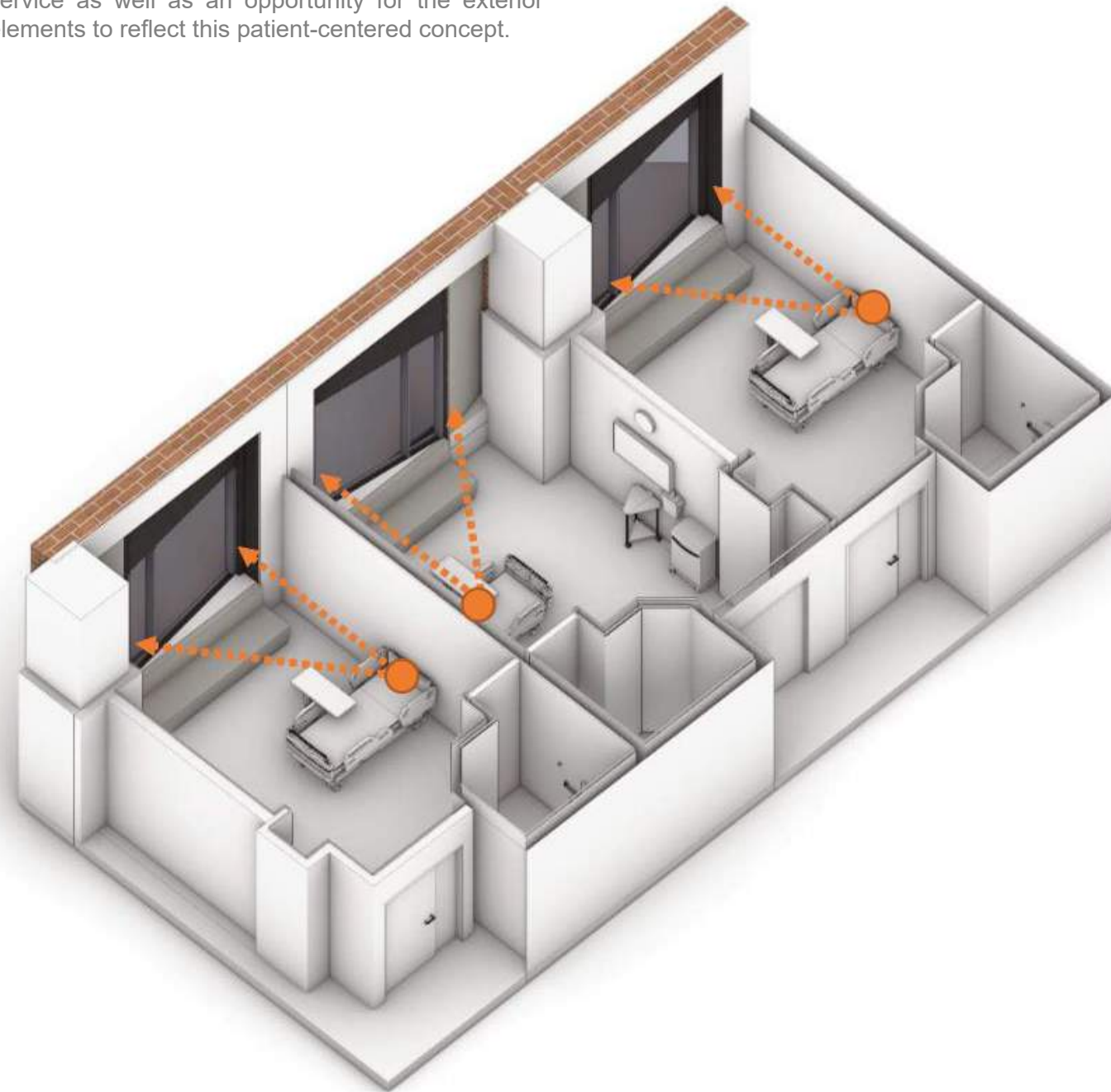
The other main focal point for glazing that promotes a welcoming experience for guests and for wayfinding occurs along the SW corner for the dining hall and kitchen areas. UHS agreed on and suggested the use of glazing for two main staircases on the West and South elevations at each drop off, to help give identity and branding to the major facades of the hospital.



VIEW OF FRONT ENTRY

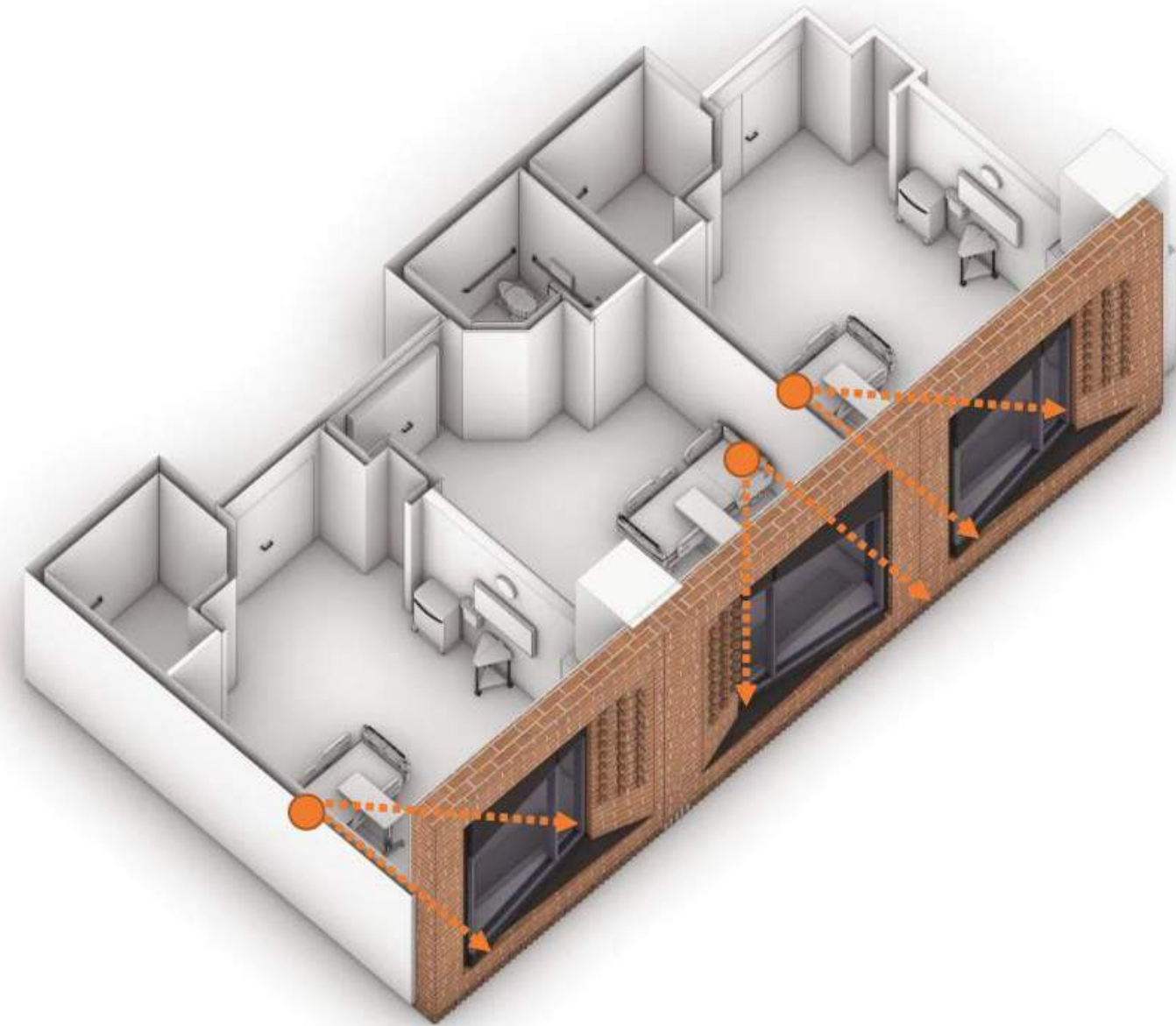
UNIVERSAL TYPICAL PATIENT ROOM

The exterior of the patient towers is defined primarily by the rhythm and function of the patient room units. These standard UHS rooms are universal; adaptable in size and function to fit Med-Surg, ICU and Labor & Delivery capabilities. This flexibility is key to providing streamlined, safe and efficient service as well as an opportunity for the exterior elements to reflect this patient-centered concept.



CANTED WINDOW DESIGN

Each patient window is mirrored for operational efficiency to mimic the room layouts. The windows are inset, and canted to provide a better view to the exterior for the patient as well work with the interior furnishings to establish the 'family zone' for visitors. The exterior expression of this element is pre-cast with a brick elements to allow for a unique rhythm and shadows along the facade.



**Refer to drawings for pre-cast and window details for more information*



SOUTH ELEVATION - PECAN STREET SE



SOUTH ELEVATION - PECAN STREET SE (OPTION FOR ADDITIONAL STORY ON HOSPITAL TOWER)

Future addition of floor on tower currently pending budget

NCPC - FINAL DESIGN SUBMISSION



WEST ELEVATION - MARTIN LUTHER KING JR. AVENUE SE



WEST ELEVATION - MARTIN LUTHER KING JR. AVENUE SE (OPTION FOR ADDITIONAL STORY ON HOSPITAL TOWER)

Future addition of floor on tower currently pending budget

NCPC - FINAL DESIGN SUBMISSION



NORTH-EAST VIEW FROM MEN'S SHELTER



NORTH-EAST VIEW FROM MEN'S SHELTER



VIEW OF LOADING DOCK AND STAFF PARKING ENTRY NORTH LOOP ROAD



NORTH ELEVATION



VIEW FROM MEN'S SHELTER DROP-OFF (NORTH ELEVATION)

PARKING GARAGE & LANDSCAPE UPDATES

Design of the parking structure is substantially in alignment with aesthetics established for the overall hospital campus. Exterior color and texture matches the adjacent Ambulatory Care Facility. The garage is located in the natural site depression which serves to reduce the height when viewed from Pecan Street, SE. At the lower site level, the garage takes advantage of the grade change, with the four-stories on the north and east sides open to promote natural ventilation. The public will access the garage directly from a dedicated on-site entrance accessible from Pecan Street SE.

Along the walkway from Pecan Street, two green screened areas will be provided along the garage facade to help the opening day and early landscape condition achieve the desired shade and living wall aesthetic. Overtime, the plantings and tree-scape once matured will be a natural buffer for the PV panels and the parking from the South campus views.

PV PANELS & SUSTAINABLE DESIGN

Photo-voltaic panels are intended to be implemented via a partnership with third party developer and in conjunction with the District in a CREF program over the top of the garage will be incorporated. The garage will also take advantage of the site to be naturally ventilated. The public will access the garage from an on-site turn in, to prevent customers from the need to access the property for drop-off or pick-up, and then access Pecan Street to move to the garage. Infrastructure (below slab conduits and space for electrical equipment) to allow the future installation of electrical vehicle charging stations.

Renewable energy production feasibility was assessed through NREL's PV Watts calculator. Assuming approximately 50,000 sf of canopy over the garage, a 856,084 kWh array would be feasible. For LEED purposes, because the solar array is *outside the meter*, the solar renewable energy certificates (SRECs) are retained by the third-party solar developer, and the energy itself is fed into the grid, while the credit for the power is allocated to local low-income families



EARLY LANDSCAPE



MATURE LANDSCAPE

PARKING GARAGE ENTRANCE - AS VIEWED FROM PECAN STREET



VIEW FROM SOUTH-EAST



PARKING GARAGE ENTRANCE - AS VIEWED FROM PECAN STREET SIDEWALK



PARKING GARAGE ENTRANCE

SUSTAINABILITY

Commissioning Contract:

Per LEED v4 Commissioning Prerequisite, the Commissioning Authority (CxA) must be contracted by the end of DD Phase. Both MEP and Enclosure Commissioning are required by the 2017 DC Energy Code. Under the targeted compliance path for enclosure commissioning, peer reviews began in the Design Development Phase.

Solar Canopy for the Parking Garage:

The District has a vehicle to finance a solar canopy for the parking garage. The solar PV can be financed through the Sustainable Energy Utility (SEU) under a Community Renewable Energy Facility (CREF) agreement. The steel canopy and any costs to augment the garage structural or electrical design can be supported via MOU with DGS. If the canopy can support additional storm water diversion, there may be additional resources available from DOEE. It is necessary to develop concept design for the canopy that can be included in the next presentation to the CFA, develop concept pricing for the District to hold in its budget, identify potential solar developers, draft RFP language, and issue a bid package.

Energy Model:

While a simple box model is being conducted in SD, due to the complexity of the project, the energy intensity of the project typology, the weighting of LEED credit points for energy (and associated CO2 impacts), the focus of the District on energy use reduction, and the operational cost impacts of energy performance, it is important that a whole building energy model be developed in early DD based on the 100% SD design conditions. This model can then be used by the design team during DD phase to validate design decisions relative to envelope and equipment for improved energy performance.

LEED Registration:

The project was registered with GBCI by early DD phase. LEED is an evolving process, with new restrictions and clarifications added as issues are brought to USGBC's attention. The project is LEED-Healthcare v4, Silver, as required by the DC Green Building Act. Our current modeled site EUI is ~149 kBtu/sf/yr (the local median is 356 kBtu/sf/yr).

Occupancy:

Occupancy counts are the basis of some LEED credit requirements and can also inform occupant loads for the energy model. The Full Time Equivalent (FTE) occupants and anticipated daily average and peak visitors must be determined. This exercise should be completed and confirmed at the Design Credits submission.

LEED HEALTHCARE-SPECIFIC CREDIT HIGHLIGHTS

Integrative Project Planning & Design:

Prepare OPR; develop health mission statement and incorporate into OPR; address triple bottom line values.

Environmental Site Assessment:

Conduct ASTM Phase I and Phase II site assessment; re-remediate any contamination as required by local, state, or national entity. These assessments have been completed.

Integrative Process, Exemplary Performance, Health & Well being:

Beginning in pre-design and continuing throughout the design phases, Cedar Hill uses the following steps to inform the design and construction documents 1. Establish health goals, 2. Prioritize design strategies that address health goals, 3. Anticipate outcomes such as impacts on population health behaviors.

PBT Source Reduction:

Healthcare facilities have a special duty not to employ materials that do harm to human health, both in the immediate care environment or in downstream communities that may be grappling with waste from product manufacturing, building construction or operations, medical care activities within, or decommissioning of the facility at the end of its useful life. Lighting will primarily, if not solely, rely on LED technology.

Design for Flexibility:

Cedar Hill employs the strategies of: 1. Programmed soft space, 2. Shell space, 3. Vertical expansion capacity,

Specify furniture & medical furnishings with 1. Minimal chemical content (urea-formaldehyde, heavy metals, hexavalent chromium,EU RoHs, perfluorinated compounds/PFCs, perfluorooctanic acid/PFOA, antimicrobial treatments.)



VIEW OF ENTRY CANOPY AND MAIN DROP-OFF

¹ See Appendix for the LEED Checklist.

LANDSCAPE DESIGN STRATEGY

The landscape design incorporates spaces to promote health and wellness for the hospital patients, staff, and surrounding community. Contact with nature either through outdoor activity or through window views promotes physical, psychological, and cognitive health. Patient outcomes improve, the healing process is accelerated, and emotional and psychological stress is alleviated. It is equally important for hospital staff and patient visitors, who must cope with the emotional and psychological strain of providing care. These healing spaces include a park circuit walk through existing, mature oak trees. This will encourage physical exercise in a landscape setting as way to relieve stress. An outdoor dining terrace is also provided that will create a place to relax and socialize in a garden setting. To celebrate the site's ecological habitat and create low maintenance landscape throughout the site, native and adaptive species will be used that can tolerate no irrigation beyond the establishment period.

PLANTING

- a. Preliminary site plan assumes 159,725 SF of Seed, 19,000 SF of Garden Planting, and 28,000 SF of Bio-retention Planting.
- b. Garden Planting and Bio-retention Planting shall include a mix of tall grasses, perennials, and shrubs. Proposed Garden planting shown on L0900.
- c. Cafeteria Terrace shall be screened with privacy hedge as shown on plans.
- d. Assume approximately 132 Canopy Trees and 84 Under-story Trees on site.
- e. Site plan includes 5 existing large trees to be preserved. The area within the critical root zone of existing trees shall be protected – approximately 40' from the center of each tree. Refer to plans for CRZ of each tree.

SOIL

- a. In proposed planting areas, soil amendments shall be incorporated as shown on sheet L0410
- b. Landscape design shall include minor earthworks (2'-0" min., 4'-0" max.) at lawn along Martin Luther King Jr. Avenue. These mounds will utilize excavated soil from the site and in the process to reduce the cost of hauling off site.

FURNISHINGS

- a. Park furnishings include park benches and picnic tables to provide a variety of seating as requested by CFA. See the CD Drawings for further info.
- b. Dining terrace furnishings include benches, dining tables, and trash and recycling receptacles. Dining tables shall be a mix of 3 seat and 4 seat tables to allow wheelchair access as needed.

LIGHTING

- a. Site lighting shown on L0601 is for design intent purposes only. Final lighting locations will be determined following photo-metrics calculations completed by others.
- b. Foundations and electrical requirements shall be completed by others.

FENCING

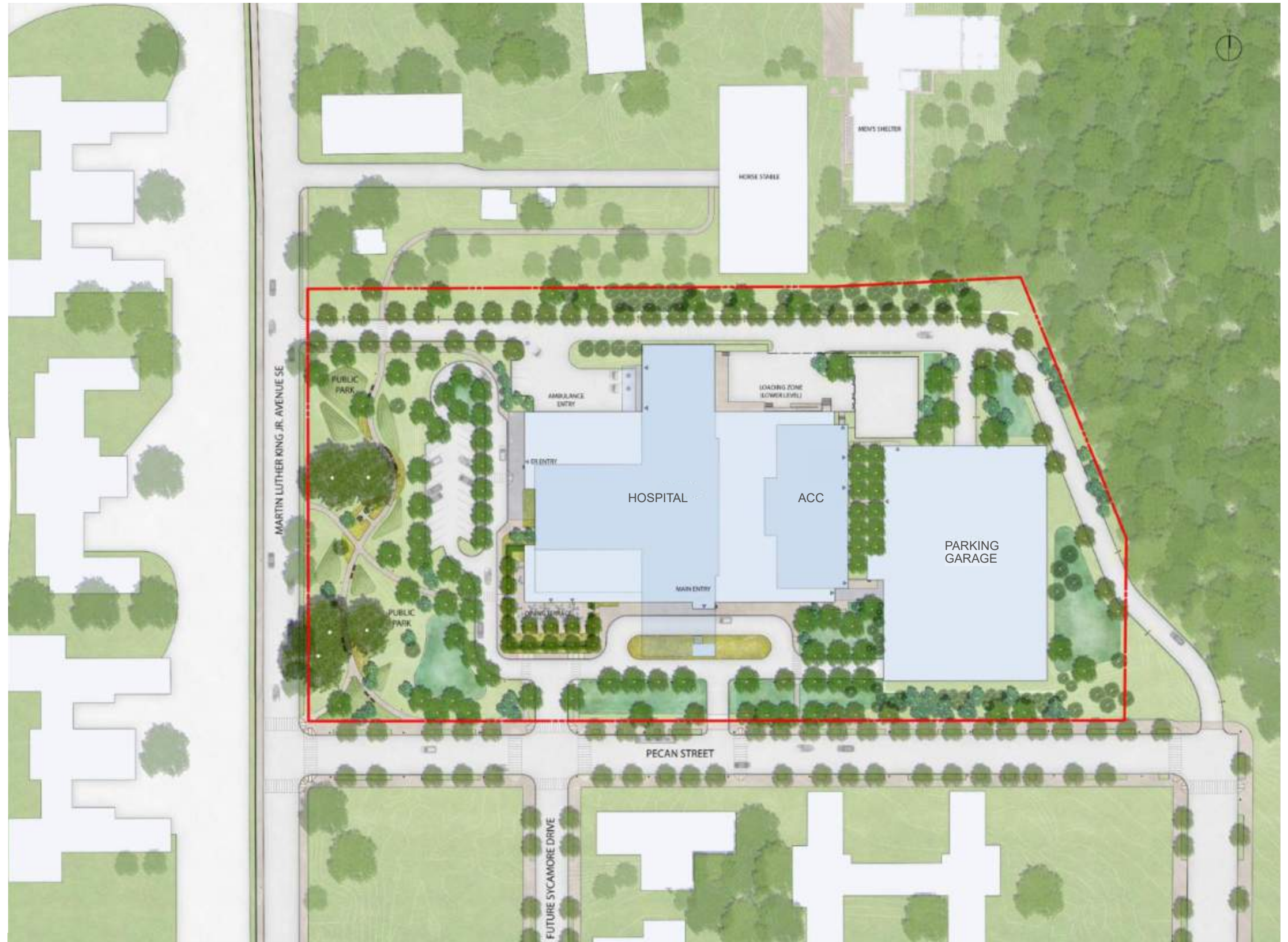
- a. The Café terrace fence is 6' with two egress gates. The final product shall be chosen following review with client.
- b. Loading dock fence shall be 12' with vehicular gate. Fence shown along loop road to enclose external mechanical yard. See drawings.



OVERALL VIEW OF LANDSCAPE

KEY LANDSCAPE DESIGN CONSIDERATIONS

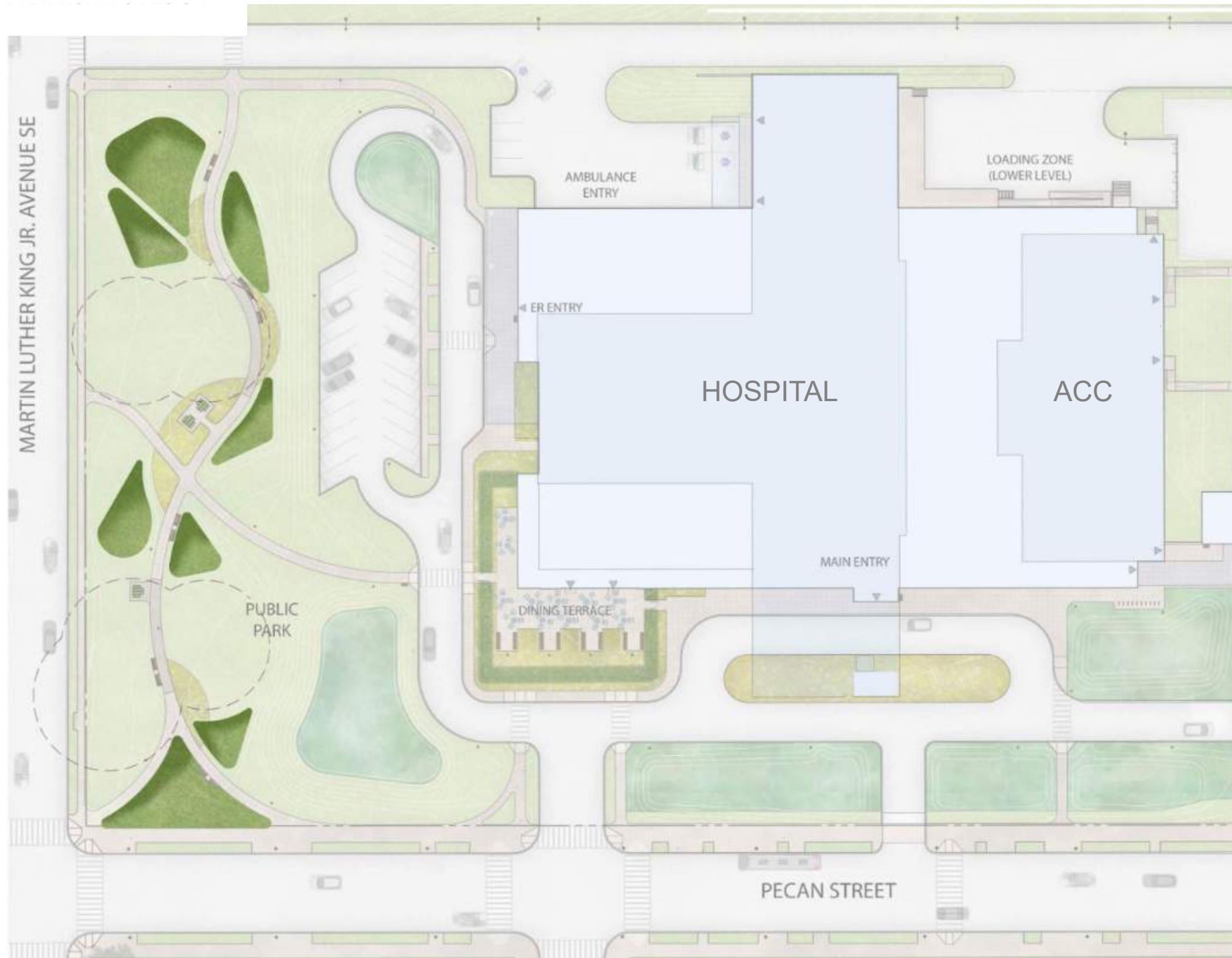
- Support Hospital Functions
- Be a Good Neighbor'
- Aesthetic Quality
- Environmental Responsibility
- Public Safety
- Management & Maintenance
- North-South Pedestrian Connection



LANDSCAPE ZONES

- Hospital Main Entry
- Park
- Emergency Room
- Cafeteria Dining Terrace
- Back-of-House
- Green Buffer





Park: Sculpted Earthworks



Park: Section



Picnic Tables
Manufacturer: Landscape Forms
Type: Take-Out Triple
Finish: Steel Powdercoat Grass Green



Park Bench
Manufacturer: Landscape Forms
Type: Plainwell Bench, 72" w/ Center Arms
Finish: Wood Slats, Aluminum Powdercoat Black

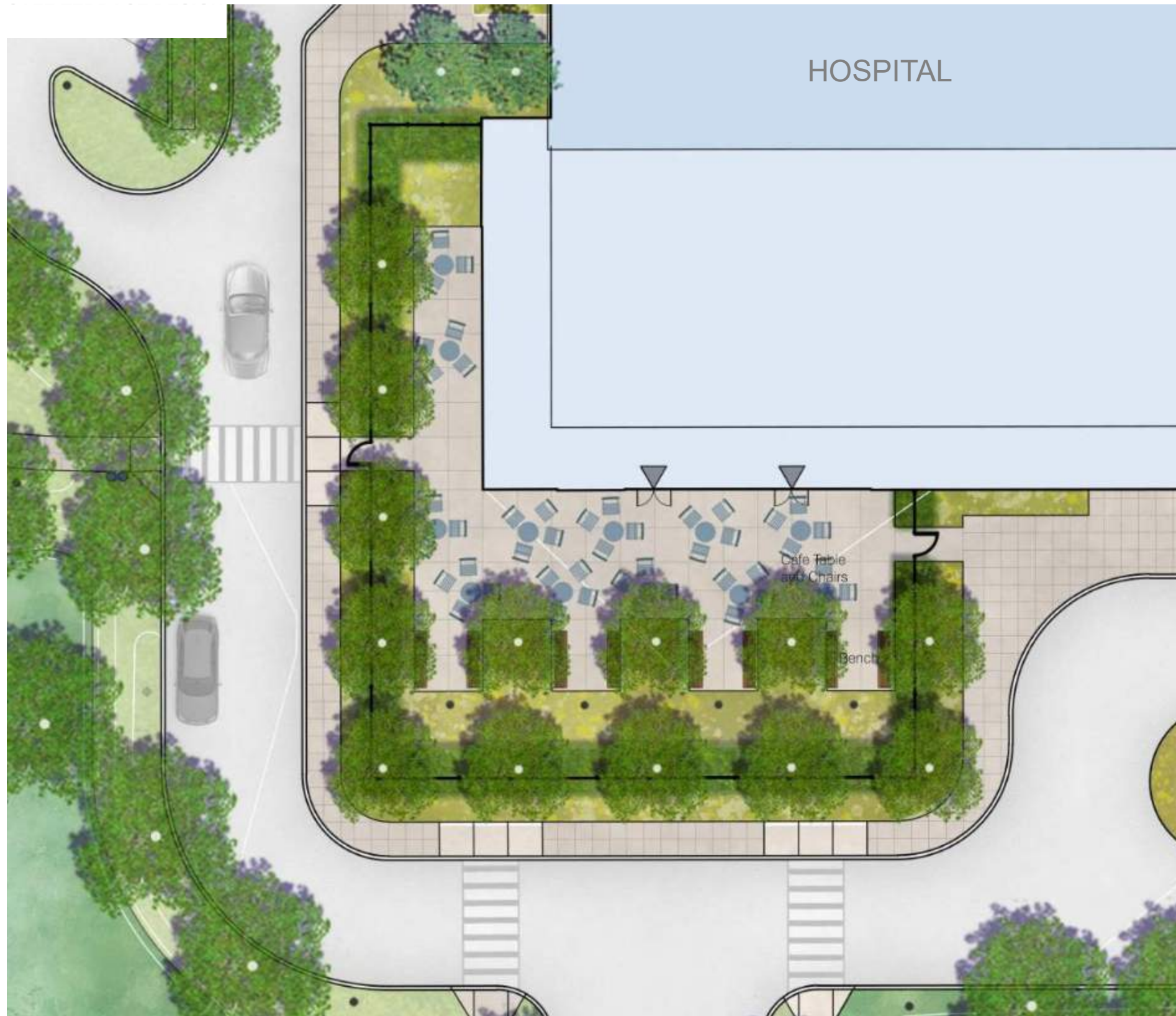


Bike Racks
Manufacturer: Landscape Forms
Type: Bola Bike Rack
Finish: Stainless Steel, Embedded



Trash & Recycling Receptacles
Manufacturer: Forms + Surfaces
Type: Universal Litter & Recycling Receptacle, 24 gal., Standard Side Opening, Round Side Opening
Finish: Stainless Steel, Satin, Recycling Graphic

Park: Furnishings



Dining Table
Manufacturer: Landscape Forms
Type: Catena Base Marneaux 36" square Table
Finish: Base - Silver Powercoat, Top - Celery



Dining Chair
Manufacturer: Landscape Forms
Type: Verona Chair w/ metal grid
Finish: Silver Powercoat



Terrace Bench
Manufacturer: Landscape Forms
Type: Neolviano Bench, 118", armed and backed
Finish: Thermally Modified Ash, Aluminum

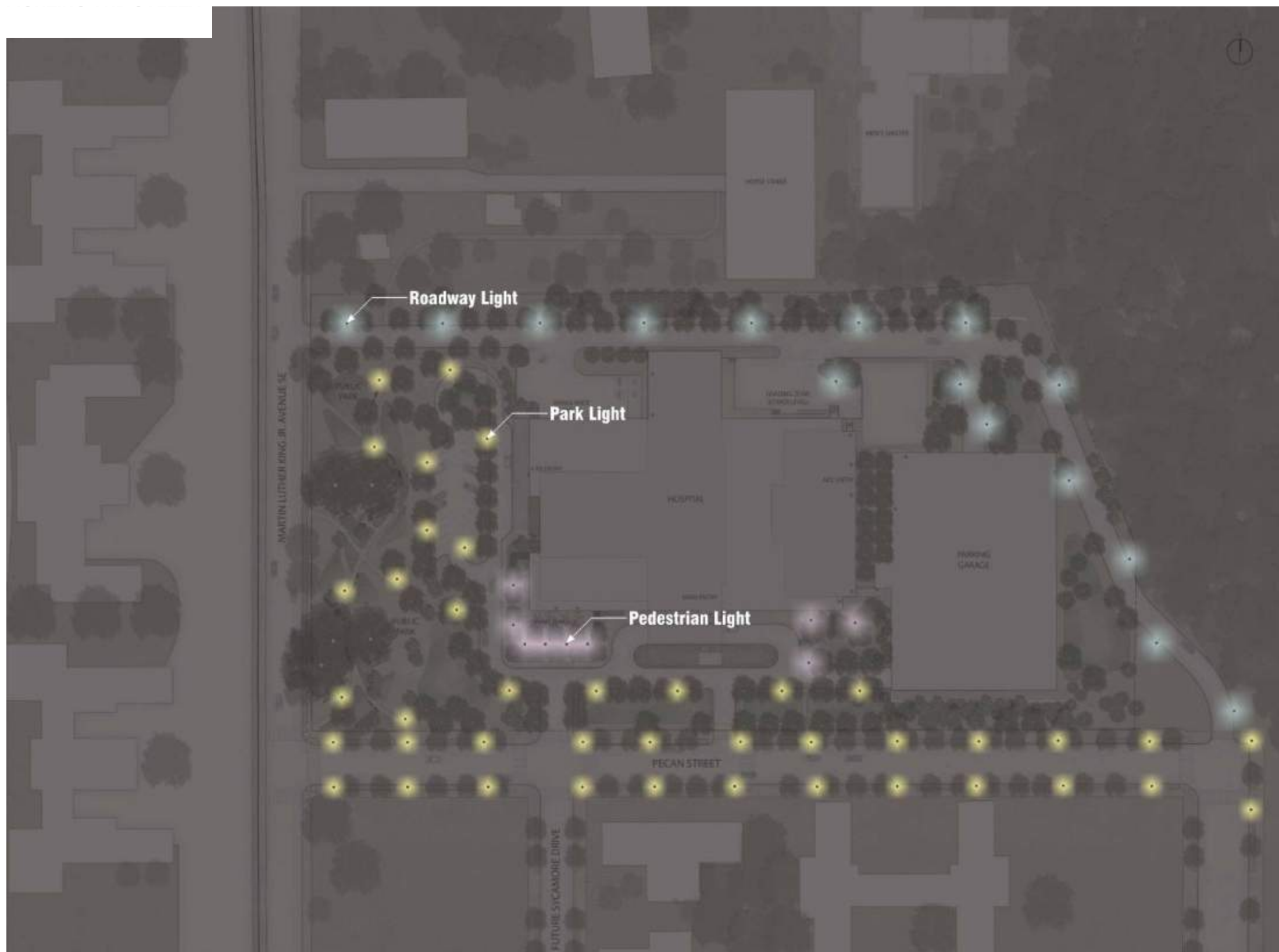


Trash & Recycling Receptacles
Manufacturer: Forms + Surfaces
Type: Universal Litter & Recycling Receptacle, 24 gal., Standard Side Opening, Round Side Opening (Recycling)
Finish: Stainless Steel, Satin, Recycling Graphic



Café Fence and Gate
Manufacturer: Omega Fence Systems
Type: Elite Double Wire 4' fence and single swing gate
Finish: Signal Black

Dining Terrace Furnishings



Park Light
Manufacturer: N/A
Type: DC Standard Washington Globe # 16
Finish: Match adjacent Pecan Street Lighting



Pedestrian Light
Manufacturer: Ligman Lighting
Type: Vancouver Column
Finish: Black



Roadway Light
Manufacturer: Ligman Lighting
Type: Steamer Streetlight & Area Light, square, 18' pole
Finish: Black

Lighting

PLANTING PLAN



TREE COVERINGS

Evergreen Trees



Holly



White Pine



Sweetbay
Magnolia

Canopy Trees



Red Maples



Oaks



Sweet Gum



London Plane Tree



Kentucky Coffeetree

Mid-story Trees



Black Gum



Honey Locust



Bald Cypress



Yellowwood



Ginkgo

Understory Trees



Serviceberry



Hop Hornbeam



Redbud

GARDEN PLANTINGS

Shrubs



Dwarf Fothergilla



Inkberry Holly



'Frau Dagmar Hastrup' Rose



Ornamental Grasses



Blue Green Sedge



Prairie Dropseed



Cherokee Sedge

Perennials



Blue Star



False Indigo



Blue False Indigo



Purple Coneflower



Green Jewel Coneflower



Foam Flower

BIOFILTRATION GARDENS

Shrubs



Bottlebrush Buckeye



Winterberry



Arrowwood Viburnum



Ornamental Grasses



Karl Foerster Reed Grass



Tufted Hair Grass



Switchgrass



Little Bluestem



Prairie Dropseed

Perennials



Joe Pye Weed



Black Eyed Susan



LANDSCAPE AERIAL VIEW FROM SOUTH



SIDEWALK VIEW AT BUS STOP



AERIAL VIEW OF OUTDOOR DINING TERRACE



VIEW FROM DINING TERRACE TO PARK



VIEW OF CAMPUS CONNECTIONS



VIEW OF CAMPUS CONNECTIONS

EXTERIOR SIGNAGE STRATEGY

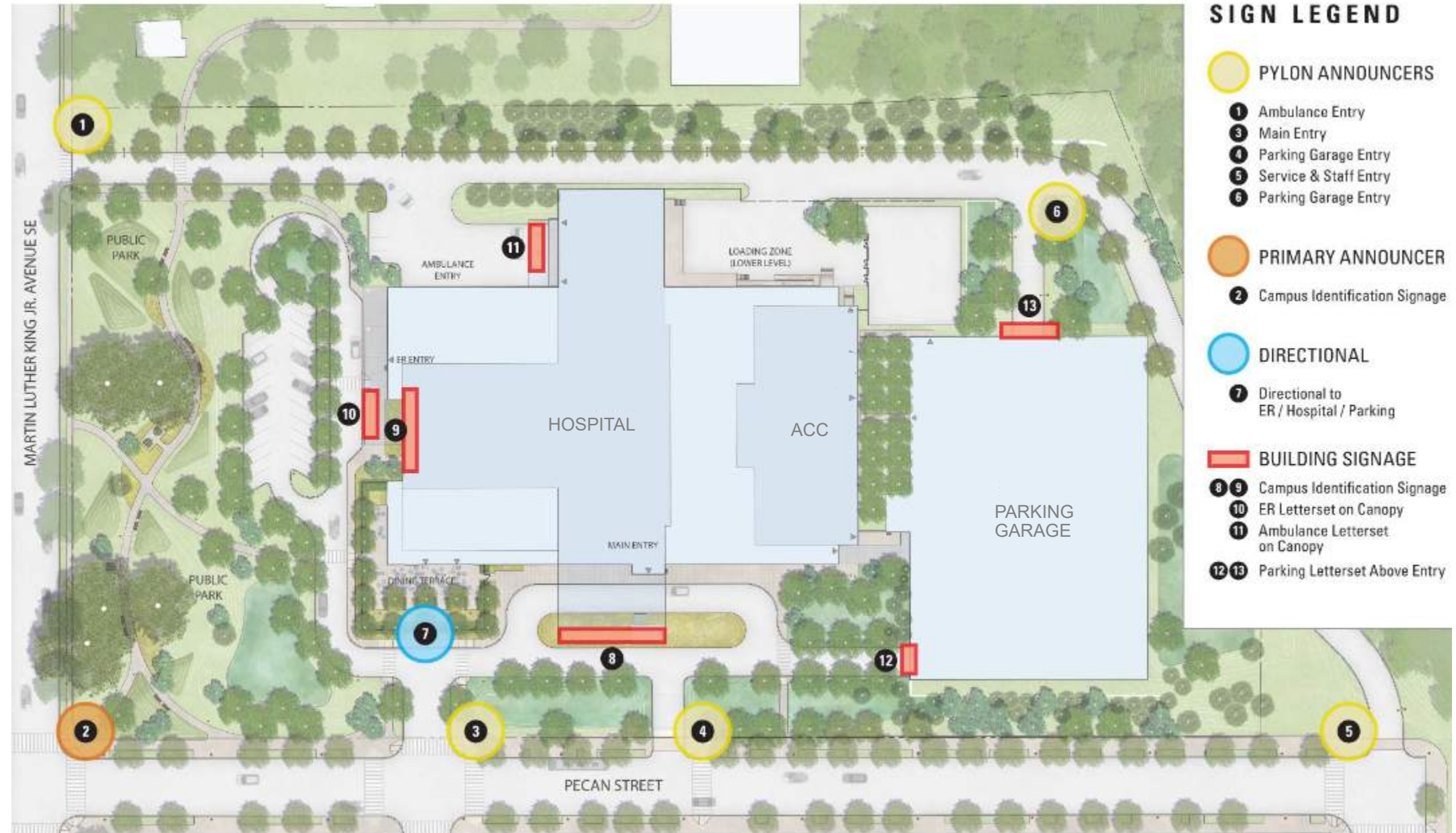
Way-finding and ease of navigability will improve the patient and public experience at Cedar Hill Regional Medical Center GW Health as well as provide awareness and branding to the overall hospital and surrounding environment. The overall signage strategy for the Cedar Hill Regional Medical Center GW Health is to provide signs at key decision points.

In healthcare facilities, most patients and their families are not frequent visitors (and are often first-time visitors). Additionally, the process of receiving healthcare is often a stressful experience, so reducing those emotions through design is a way to improve overall patient experience and positively influence healthcare outcomes.

A comprehensive exterior signage package has been developed to address these navigability issues and orient visitors; guiding them through key areas, entrances and amenities on the site. Remaining sensitive to the historic campus and in compliance with the DC Historic Preservation Guidelines as well as FGI Guidelines for Healthcare facilities.

Ground pylon signage located at key areas on the campus indicate main entry locations. These annunciators are located in the areas marked in yellow on the plan.

Given the sensitive nature of healthcare work, keeping staff separate from patients is key. These signs will differentiate the public from staff zones and entry points, as well as identify other critical pathways for patients such as to the parking garage or the Emergency Room Drop Off.



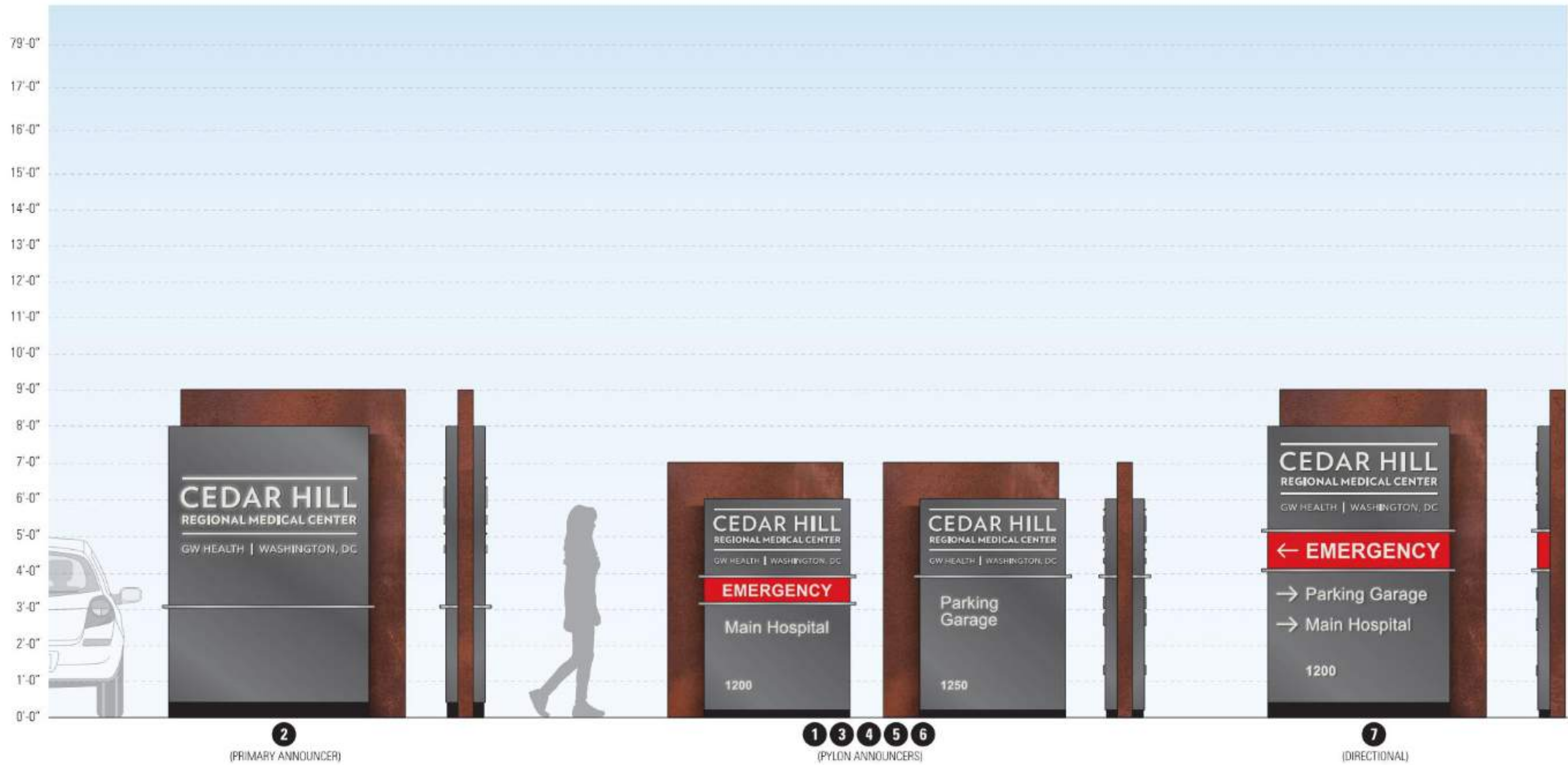
SIGN LEGEND

- PYLON ANNOUNCERS
 - 1 Ambulance Entry
 - 3 Main Entry
 - 4 Parking Garage Entry
 - 5 Service & Staff Entry
 - 6 Parking Garage Entry
- PRIMARY ANNOUNCER
 - 2 Campus Identification Signage
- DIRECTIONAL
 - 7 Directional to ER / Hospital / Parking
- BUILDING SIGNAGE
 - 8 9 Campus Identification Signage
 - 10 ER Letterset on Canopy
 - 11 Ambulance Letterset on Canopy
 - 12 13 Parking Letterset Above Entry

SIGNAGE LOCATION PLAN

Refer to Signage Legend for more information.

SIGN ELEVATION & SCHEDULE



A SCHEDULE OF SIGNS
SCALE: 3/8"=1'0"

Refer to Signage Location Map for more information.

PYLON AND DIRECTIONAL ANNOUNCERS

One primary announcer is located at the corner of the main intersection of Pecan St. & MLK Jr. Avenue SE, as an indication of the main hospital campus. This is the largest ground sign at the base of the park with high visibility from public areas.

Upon entry into the turn-off along Pecan Street, one directional sign to directs traffic towards the emergency drop off and parking or the main entry. These directional signs indicate 'EMERGENCY' with back lit lettering. External front spotlighting will be provided for each sign face with messages.

MATERIALS & ASSEMBLY

The pylon and directional signs will primarily be constructed from aluminum sheets and aluminum tubing to create the main signage cabinet. This cabinet will include internal illumination for push-thru acrylic messages and logo. Messages and logos are edge-lit with the front surface painted an opaque color. Illumination will come from white LEDs inside the cabinet.

An option is shown for the red emergency panel to be fully illuminated using a translucent acrylic sheet and red vinyl film. The main signage cabinet will wrap a secondary cabinet constructed from weathered steel to mimic the brick color of the building. All pylon signs are double-sided except for the directional sign facing Pecan Street labeled as number 5 on the previous pages.

All campus identification signage lettering on the pylons are intended to be a solid, opaque face with edge lighting.

PRIMARY ANNOUNCER

1. OVERALL DIMENSION: 6'-6"W X 9'H
2. ALUMINUM CABINET
3. WEATHERED STEEL CABINET
4. PUSH-THRU ACRYLIC LOGO (EDGE LIT WITH OPAQUE FACE)
5. DOUBLE-SIDED
6. GROUND MOUNTED
7. EXTERNAL FRONT SPOTLIGHT ON BOTH SIDES

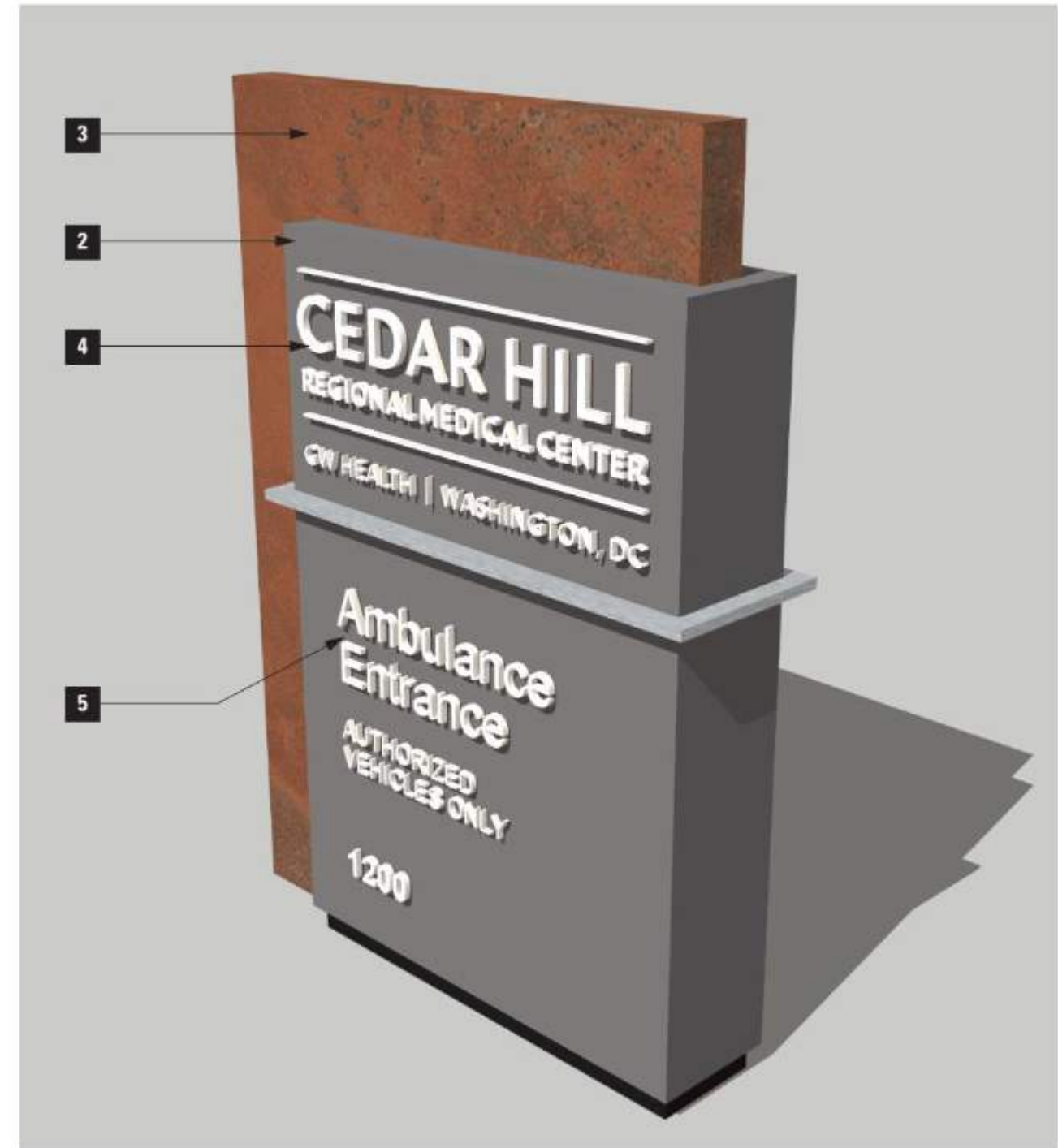


Refer to Signage Design Package in Appendix for more information

SIGN ELEVATION & SCHEDULE

PYLON ANNOUNCER SIGN

- 1. OVERALL DIMENSION: 5'W X 7'H
- 2. ALUMINUM CABINET
- 3. WEATHERED STEEL CABINET
- 4. PUSH-THRU ACRYLIC LOGO (EDGE LIT WITH OPAQUE FACE)
- 5. PUSH-THRU ACRYLIC MESSAGES (EDGE LIT WITH OPAQUE FACE)
- 6. DOUBLE-SIDED
- 7. GROUND MOUNTED
- 8. EXTERNAL FRONT SPOTLIGHT ON BOTH SIDES

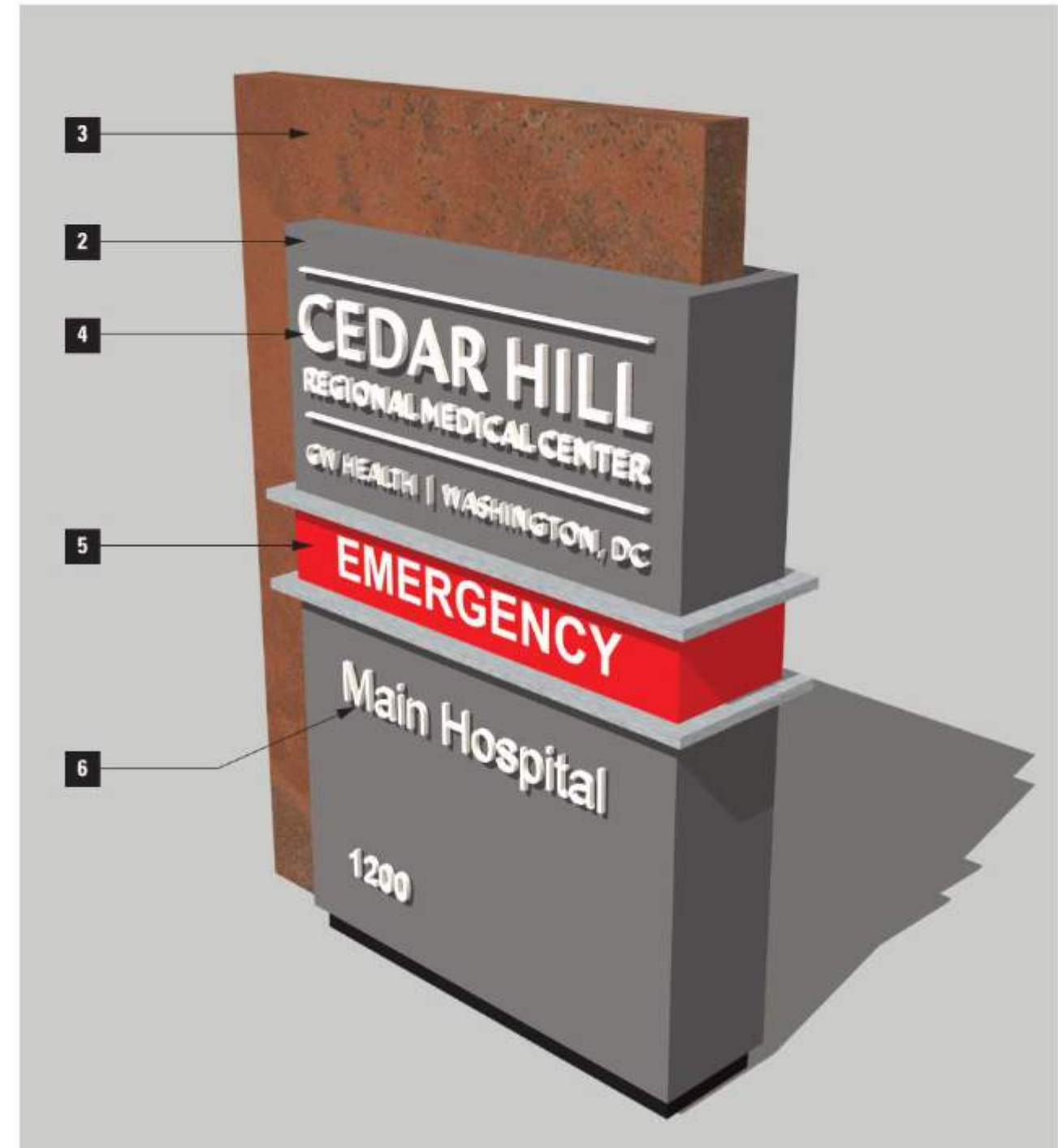


Refer to Signage Location Map for more information.

SIGN ELEVATION & SCHEDULE

DIRECTIONAL SIGN

1. OVERALL DIMENSION: 5'W X 7'H
2. ALUMINUM CABINET
3. WEATHERED STEEL CABINET
4. PUSH-THRU ACRYLIC LOGO (EDGE LIT WITH OPAQUE FACE)
5. EMERGENCY PANEL (FACE LIT PANEL)
6. PUSH-THRU ACRYLIC MESSAGES (EDGE LIT WITH OPAQUE FACE)
7. DOUBLE-SIDED
8. GROUND MOUNTED
9. EXTERNAL FRONT SPOTLIGHT ON BOTH SIDES

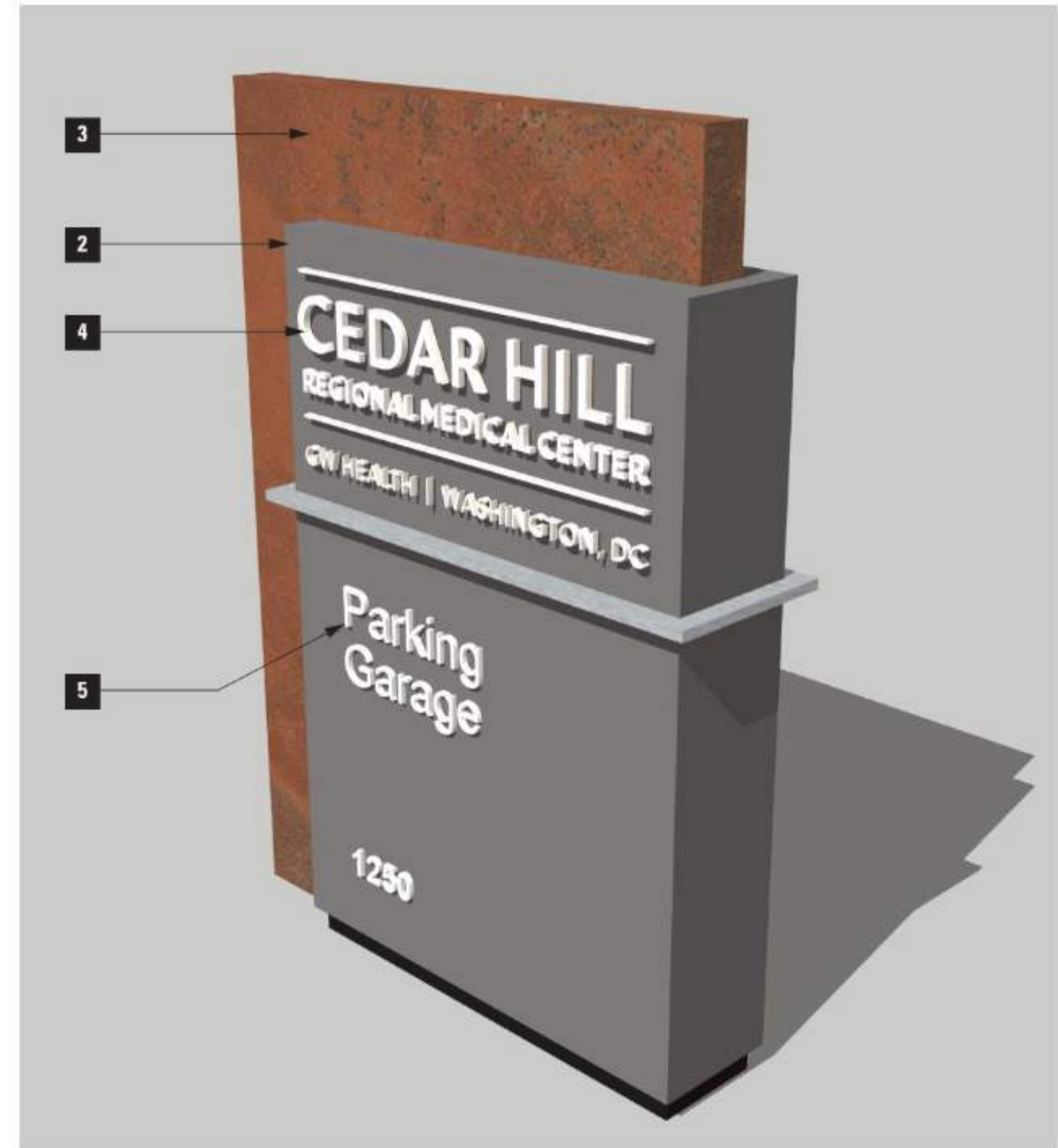


Refer to Signage Location Map for more information.

SIGN ELEVATION & SCHEDULE

PYLON ANNOUNCER SIGN

- 1. OVERALL DIMENSION: 5'W X 7'H
- 2. ALUMINUM CABINET
- 3. WEATHERED STEEL CABINET
- 4. PUSH-THRU ACRYLIC LOGO (EDGE LIT WITH OPAQUE FACE)
- 5. PUSH-THRU ACRYLIC MESSAGES (EDGE LIT WITH OPAQUE FACE)
- 6. DOUBLE-SIDED
- 7. GROUND MOUNTED
- 8. EXTERNAL FRONT SPOTLIGHT ON BOTH SIDES

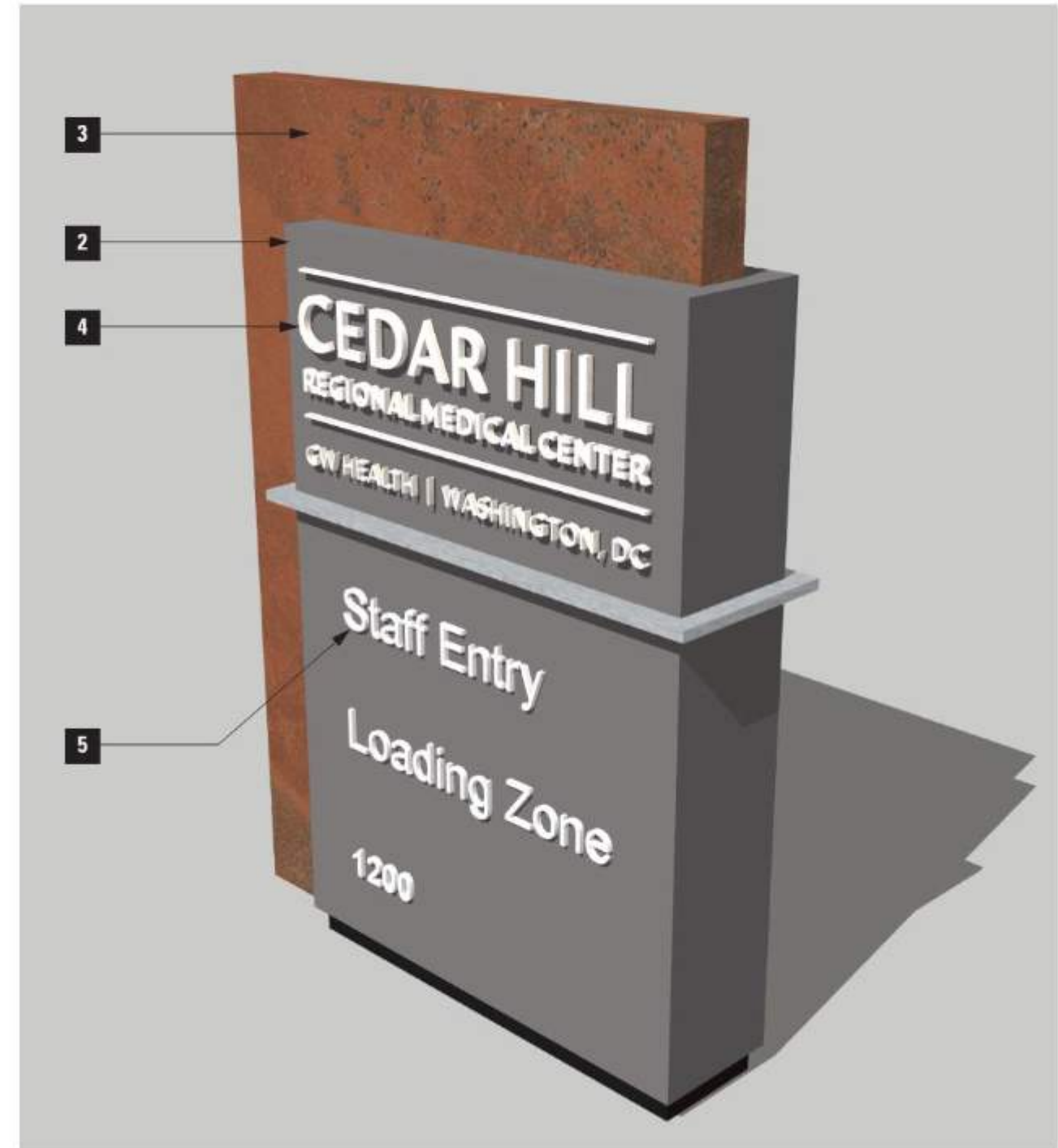


Refer to Signage Location Map for more information.

SIGN ELEVATION & SCHEDULE

PYLON ANNOUNCER SIGN

- 1. OVERALL DIMENSION: 5'W X 7'H
- 2. ALUMINUM CABINET
- 3. WEATHERED STEEL CABINET
- 4. PUSH-THRU ACRYLIC LOGO (EDGE LIT WITH OPAQUE FACE)
- 5. PUSH-THRU ACRYLIC MESSAGES (EDGE LIT WITH OPAQUE FACE)
- 6. DOUBLE-SIDED
- 7. GROUND MOUNTED
- 8. EXTERNAL FRONT SPOTLIGHT ON ONE SIDE

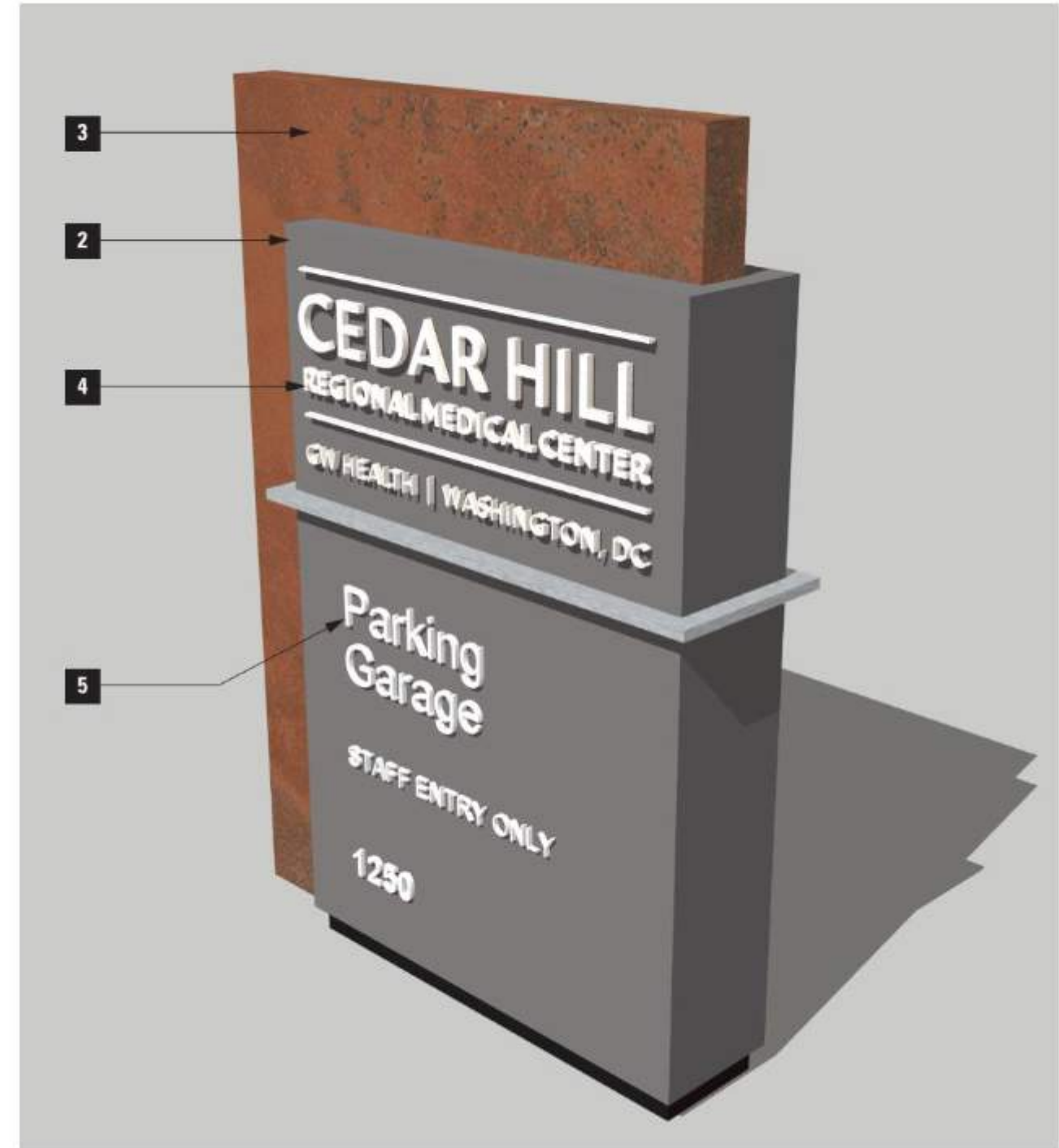


Refer to Signage Location Map for more information.

SIGN ELEVATION & SCHEDULE

PYLON ANNOUNCER SIGN

- 1. OVERALL DIMENSION: 5'W X 7'H
- 2. ALUMINUM CABINET
- 3. WEATHERED STEEL CABINET
- 4. PUSH-THRU ACRYLIC LOGO (EDGE LIT WITH OPAQUE FACE)
- 5. PUSH-THRU ACRYLIC MESSAGES (EDGE LIT WITH OPAQUE FACE)
- 6. DOUBLE-SIDED
- 7. GROUND MOUNTED
- 8. EXTERNAL FRONT SPOTLIGHT ON BOTH SIDES

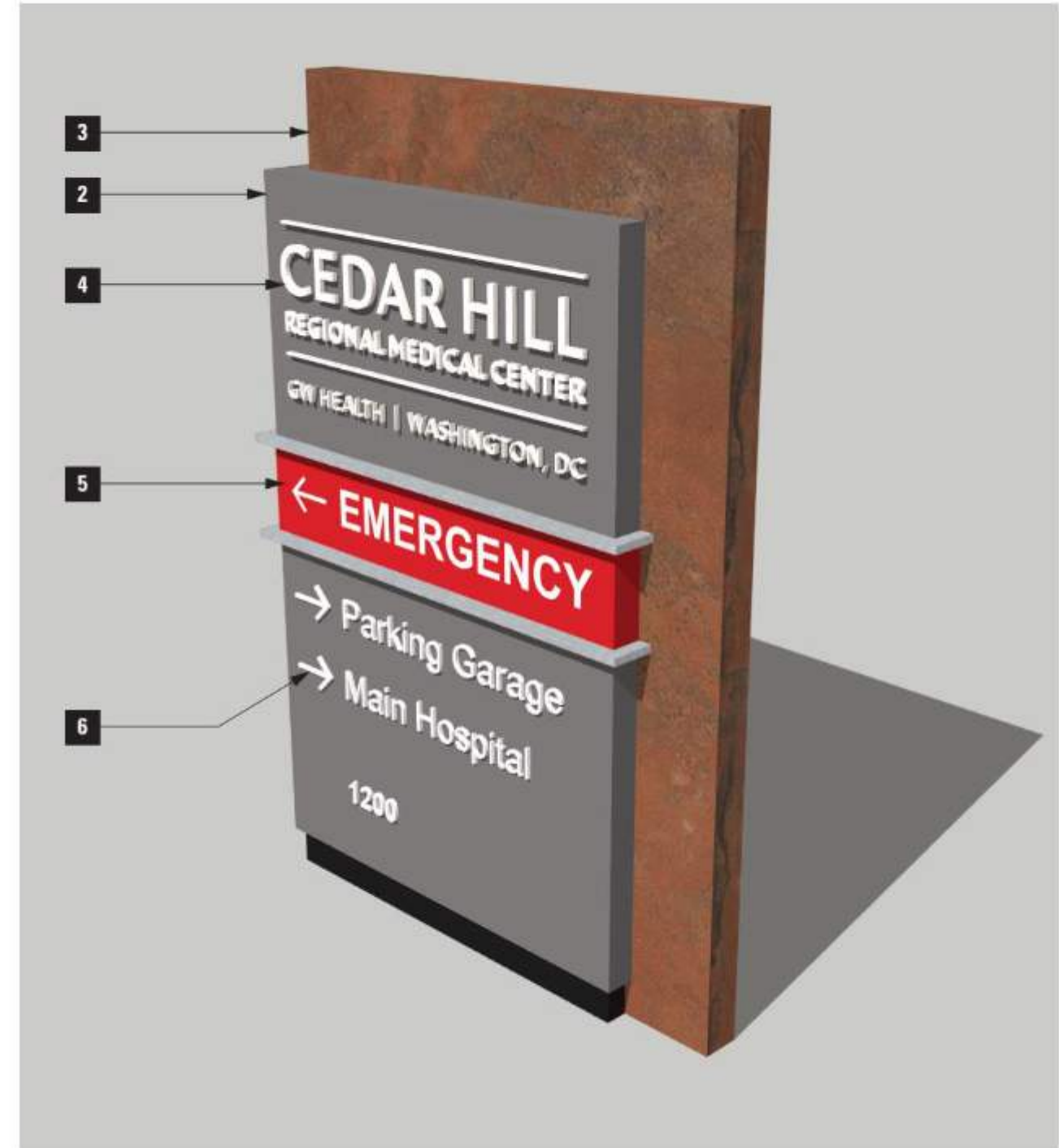
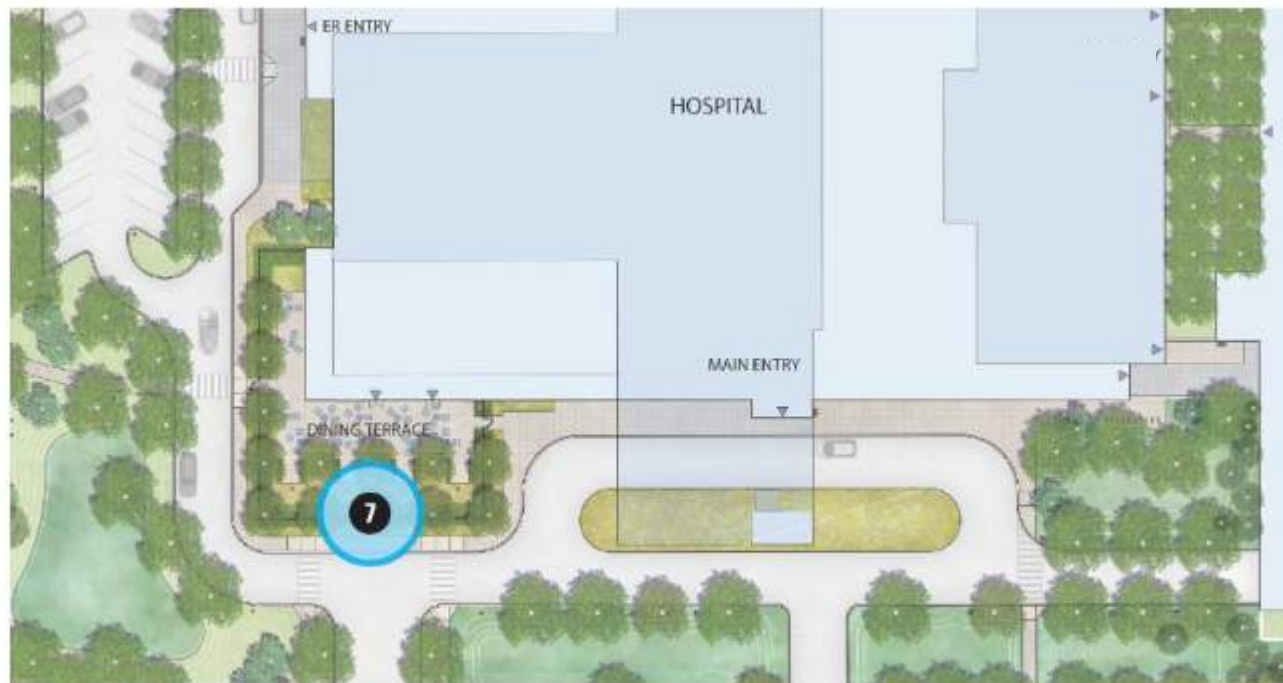


Refer to Signage Location Map for more information.

SIGN ELEVATION & SCHEDULE

DIRECTIONAL SIGN

1. OVERALL DIMENSION: 6'W X 9'H
2. ALUMINUM CABINET
3. WEATHERED STEEL CABINET
4. PUSH-THRU ACRYLIC LOGO (EDGE LIT WITH OPAQUE FACE)
5. EMERGENCY PANEL (FACE LIT PANEL)
6. PUSH-THRU ACRYLIC MESSAGES & ARROWS (EDGE LIT WITH OPAQUE FACE)
7. SINGLE-SIDED
8. GROUND MOUNTED
9. EXTERNAL FRONT SPOTLIGHT ON ONE SIDE



Refer to Signage Location Map for more information.

BUILDING MAIN IDENTITY SIGNAGE

The feature signage indicating the hospital main entry points are located at the highest point of each staircase for maximum visibility. The halo lit lighting treatment of the lettering mimics the similar design aesthetic treatment at the UHS GW hospital in Foggy Bottom. This is in line with the approach discussed with the CFA Staff. Each sign is affixed using a metal plate backing and indicates the hospital name consistent with UHS and GW branding standards.



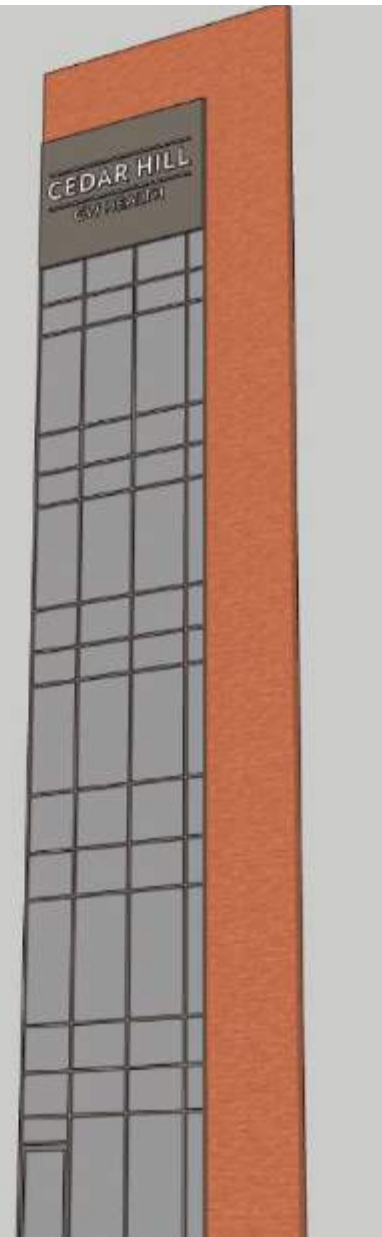
Building Signage above occurs at MLK Emergency Entry as well as Pecan St. Main Entry

UHS BRAND ON GLAZING

- **LOGO BACKER:** 17"W X 11'9"H
- **LOGO LINE 1:** 16'3"W X 1'11"H
- **LOGO LINE 2:** 10"W X 1'2"H
- 5" DEEP PAINTED ALUMINUM CHANNEL LETTERS MOUNTED TO BACKER WITH 1" FLOAT
- 4" DEEP PAINTED ALUMINUM BACKER MOUNTED 3" OFF GLAZING MULLIONS

LIGHTING

1. HALO LIT CHANNEL LETTERS



EMERGENCY SIGNAGE

Lettering for the EMERGENCY sign on the canopy are fabricated aluminum channel letters that are internally illuminated using white LEDs. The faces of each letter are translucent acrylic and red vinyl film allowing for them to be face-lit. These letters are mounted to the canopy's concrete fascia using stainless steel stand-offs. It is important for this signage to stand out so that there is no confusion for where the Emergency entrance is located.



OPTION 1
FACE LIT RED NO BACKER

1. ALUMINUM CHANNEL LETTERS MOUNTED FLUSH TO CANOPY FASCIA
2. TRANSLUCENT ACRYLIC LENS CAP FACE LIT RED



EMERGENCY LETTERSET ON CANOPY

- 13'8"W X 1'6"H
- 3" DEEP ALUMINUM CHANNEL LETTERS
- RED ACRYLIC TRANSLUCENT FACE. FACE LIT
- MOUNTED ON CANOPY FASCIA WITH 3/4" FLOAT



Refer to Signage Design Package in Appendix for more information

AMBULANCE SIGNAGE

Lettering for the AMBULANCE sign will be identical in construction and illumination of the EMERGENCY sign. They are fabricated aluminum channel letters that are internally illuminated using white LEDs. The faces of each letter are translucent acrylic and red vinyl film allowing for them to be face-lit. These letters are mounted to the canopy's metal fascia using stainless steel stand-offs. It is also important for this signage to stand out so that there is no confusion for where the Ambulance entrance is located.



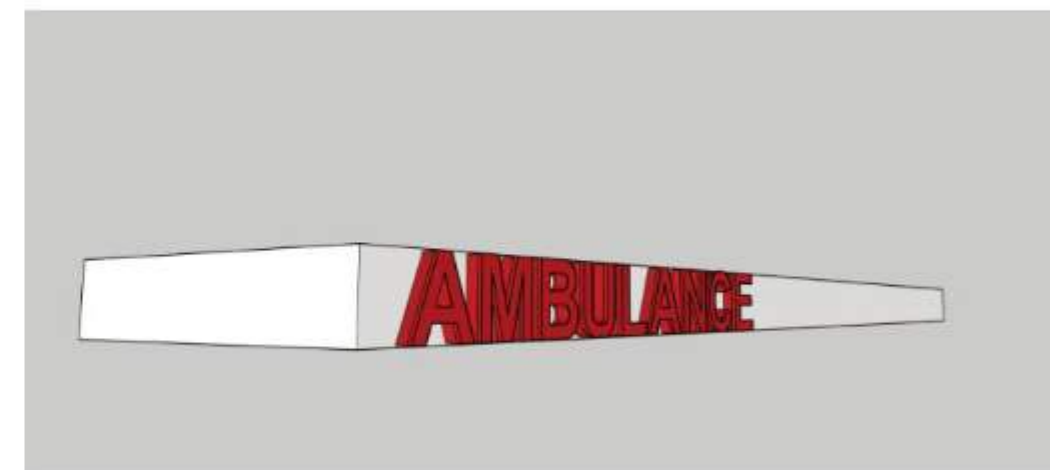
OPTION 1
FACE LIT RED NO BACKER

- 1. ALUMINUM CHANNEL LETTERS MOUNTED FLUSH TO CANOPY FASCIA
- 2. TRANSLUCENT ACRYLIC LENS CAP FACE LIT RED



**AMBULANCE LETTERSET
ON CANOPY**

- 18'3"W X 2'0"H
- ALUMINUM CHANNEL LETTERS
- FACE LIT OR EDGE LIT
- MOUNTED ON CANOPY FASCIA



Refer to Signage Design Package in Appendix for more information

PARKING GARAGE SIGNAGE

Both entrances to the parking garage will feature lettering that say PARKING so that they are visible from a distance. These letters are fabricated aluminum channel construction with halo-illumination using white LEDs. They are mounted to the garage facade above each entrance using stainless steel stand-offs.



Refer to Signage Design Package in Appendix for more information

APPENDIX

- A - CFA FINAL PRESENTATION SLIDES
- B - PROJECT SCHEDULE & BUDGET
- C - LEED CHECKLIST
- D - APPROVALS - HPRB, ZONING, FAA, NCPC, ANC, CFA
- E - PERMITS - ROUGH GRADING & FOUNDATION TO GRADE APPLICATION
- F - SIGNAGE DESIGN PACKAGE
- G - FINAL DESIGN CONTRACT DOCUMENT SET & SPECIFICATIONS

CEDAR HILL

REGIONAL MEDICAL CENTER

GW HEALTH | WASHINGTON, DC

ST. ELIZABETHS EAST

NATIONAL CAPITAL PLANNING COMMISSION

FINAL DESIGN SUBMISSION

APPENDIX ITEMS

APRIL 01, 2022

 GOVERNMENT OF THE
DISTRICT OF COLUMBIA
MURIEL BOWSER, MAYOR

 UHS

 Turner

 MCN
BUILD

 h+k

 McKISSACK
McKISSACK

 OCULUS