



Figure 2. Looking south inside fence parallel to Camino Amado, from end of Camino Teresa

Condition 3

Condition 3 of Resolution 2006-83 limits the use of the hospital-owned R-2 lot on W. Lupita Rd. For several years, until the Application was being prepared, the lot was used for parking, without the required landscaped setback. On p. 12 of the Application, the Hospital asks to preserve the right to use it for parking. Once any pending development is approved, it is not likely that the hospital will once again enforce parking restrictions in this area. Therefore, the neighborhood associations expect the City to require that the Hospital provide the 20-foot landscaped setback on the R-2 lot before the City even considers the Application.

Condition 4

The amended master plan of Resolution 2006-83 shows the south entrance from Hospital Drive as “RIGHT TURN IN ACCESS ONLY.” The entrance from St. Michaels is designated “ENHANCED PRIMARY ENTRY.” Condition 4 required prompt implementation of the change to the south entrance from Hospital Drive, in order to mitigate traffic on Hospital Drive. Unlike the traffic mitigation measures mentioned in Conditions 5 and 6, this requirement was not conditional on the approval of the City nor assessment of off-site traffic conditions. However, this requirement was ignored for the intervening nine years.

On p. 12 of the Application, the Hospital cites a reduction in traffic along Hospital Drive and proposes to defer this change still further until consultation with city staff. In fact, p. IV-2 of the submitted Traffic Impact Analysis does note that measured traffic has decreased significantly since the beginning of the recession. However, in its projections for future traffic, that analysis only includes an increase of 1% a year, with no adjustment for recovery from the recession. There is also no adjustment for an increase in the currently low occupancy of the Physicians Plaza building.

The Application also cites the recent changes to the intersection at the St. Michaels entrance as an excuse for not changing the Hospital Drive entrance. The newly modified St. Michael’s exit is like a Restricted Crossing U-Turn (RCUT) Intersection. The RCUT is characterized by the prohibition of left-turn and through movements from side street approaches as permitted in conventional designs. Instead, the RCUT intersection accommodates these movements by requiring drivers to turn right onto the main road and then make a U-turn maneuver. A fully implemented RCUT would accommodate U-turns with a one-way median opening 400 to 1,000 ft after the intersection. The following is from the Federal Highway Administration publication no. FHWA-HRT-09-059 on RCUTs:

The RCUT intersection appears to offer substantial safety advantages over conventional intersections. For example, for the RCUT intersections on the U.S. Route 23/74 corridor in North Carolina, there was a 17-percent decrease in total crashes, a 31-percent decrease in total crash rate, a 41-percent decrease in fatal/injury crashes, and a 51-percent decrease in fatal/injury crash rate. Higher reductions were observed for the three unsignalized RCUTs that replaced conventional intersections on the Eastern Shore of Maryland. For the U.S. Route 17 corridor in North Carolina, total crash rates were found to be lower than the 10-year

average for 25 signalized conventional intersections in Charlotte, NC, with comparable annual average daily traffic.

This safety improvement to the St. Michaels exit has no bearing on the south entrance on Hospital Drive.

The neighborhood associations expect the City to require that the Hospital implement the specified changes to the south entrance from Hospital Drive before the City even considers the Application.

Condition 6

Condition 6 of Resolution 2006-83 states, “For all phases subsequent to the Emergency Room Expansion, the developer will be required to assess certain off-site traffic operations and provide mitigation where needed,” and cites an Engineering Division traffic memo. That memo recommends that, “upon completion of the proposed Emergency room addition and before any other expansion, the applicant install traffic calming measures on Hospital Drive.” It also says, “Traffic calming ... should be compatible with whatever plan is developed by the city staff and neighbors.”

The Hospital performed neither the required assessment nor any traffic calming measures before developing the Outpatient Services Addition. No traffic calming measures for Hospital Drive have ever been discussed with SMASH. As noted in the submitted Traffic Impact Analysis, there is not even a speed limit posted on Hospital Drive.

Page 13 of the Proposal once again cites the recent traffic measurements, which are reduced temporarily because of the recession. The neighborhood associations expect the City to require that the Hospital install traffic calming measures on Hospital Drive, to be approved by the City and SMASH, before the City even considers the Application. We feel that the City should post a speed limit of about 20 mph because most of the cars using Hospital Drive are entering or leaving the offices along Hospital Drive or entering Lupita Road.

Condition 7

Condition 7 of Resolution 2006-83 specifies, “For all phases subsequent to the Emergency Room Expansion, close and/or modify driveway entrances at Hospital Drive

and St. Michaels Drive as shown on the amended master plan, including modifications to turn lanes on St. Michaels Drive.” The Hospital failed to complete these activities before developing the Outpatient Services Addition.

As noted above, the amended master plan of Resolution 2006-83 shows the southernmost entrance from Hospital Drive as “RIGHT TURN IN ACCESS ONLY.” The entrance from St. Michael’s is designated “ENHANCED PRIMARY ENTRY.”

Figure 3 shows one side of the sign at the intersection of Hospital Drive and St. Michaels Drive; the other side contains the same information. This sign does not direct visitors to the primary entry. Figure 4 is a photograph of the sign at the entrance from St. Michaels Drive. This sign does not indicate that it is the primary entry. In fact, it directs elsewhere for the “upper-level entrance,” and does not indicate a visitors’ entrance, only mentioning Specialty Services. Figure 5 is a photograph of the sign at the south entrance from Hospital Drive, which suggests that it is the primary entry for both upper-level and lower-level entrances to the Hospital.

The Hospital having failed to comply with Condition 7 for nine years, now uses as an excuse the recent traffic measurements, which are admitted to be temporarily reduced by the recession. The neighborhood associations expect the City to require that the Hospital close and/or modify these entrances as shown on the 2006 amended master plan before the City even considers the Application.



Figure 3. Sign at intersection of St. Michaels Dr. and Hospital Dr.



Figure 4. Sign at St. Michaels Dr. entrance



Figure 5. Sign at southernmost Hospital Dr. entrance

Condition 14

Condition 14 of Resolution 2006-83 covers pedestrian and wheel chair access from Camino Teresa and Encina Road. It specifies, “A minimum of two gates must be for pedestrian, wheel chair and bicycle access.” It also requires that the applicant address creating access across the campus to the bus stop, to St. Michaels Drive and to Hospital Drive.

The requirement for wheel chair access was requested by Santa Fe Trails. That organization needs to be consulted before committing to construction of a special wheel chair path across the northern edge of the campus. The transfer point for Santa Fe Trails is currently in front of the Hospital main entrance (lower-level). The bus stops on

Hospital Drive are only used by the #6 route. It is true that the most southern of the Hospital Drive stops are also used by the RailRunner shuttle and the El Dorado shuttle, but those shuttles are scheduled to accommodate employees; they are not used by the neighbors.

Pedestrian access from Camino Teresa has been provided at the prodding of SMASH, years after it was required. SMASH would consider it satisfactory to have another opening in the fence at the end of Encina Road and at each access to provide a smooth surface, not necessarily paved, from the property line to a paved parking area.

The neighborhood associations expect the City to require that the Hospital provide smooth accesses both from Camino Teresa and Encina Road before the City even considers the Application.

Diesel Generators

It is critically important for hospital facilities to have emergency backup power and to test that capability at regular intervals. This hospital campus is using diesel generators, which were included neither in the original master plan nor in the 2006 amended master plan. They are not even shown on the Proposed Master Plan in the Application.

Two diesel generators were installed near the residential property lines. Figure 6 is a photograph taken from the residential property at 1554 Camino Amado. The green diesel generator can be seen sticking up behind the wooden enclosure. The fencing barely visible on the far right side of the picture is on the residential property; there is no fence on this portion of the commercial property. The portable restroom on the left is typical of unsightly construction materials near residences. Figure 7 is a blowup with an arrow pointing to the upper left-hand corner of the generator.

During a test at 5:40 pm on 6 May 2015, the noise level on this residential lot was measured at a steady 75 dB, in violation of the Article 10-2.5 limit of 55 dBA. This noise level continued for at least thirty minutes. In 1999, the World Health Organization concluded that the available evidence suggested a weak correlation between long-term noise exposure above 67-70 dB(A) and hypertension [Berglund, B; Lindvall T; Schwela

D; Goh KT (1999). "World Health Organization: Guidelines for Community Noise". World Health Organization]. These generators also emit noxious diesel exhaust.

The neighborhood associations expect that, before even considering the Application, the City will require the Hospital to replace the diesel generators with better technology, to move them, or otherwise to mitigate their effects to the satisfaction of SMASH.



Figure 6. Diesel generator enclosure from 1554 Camino Amado

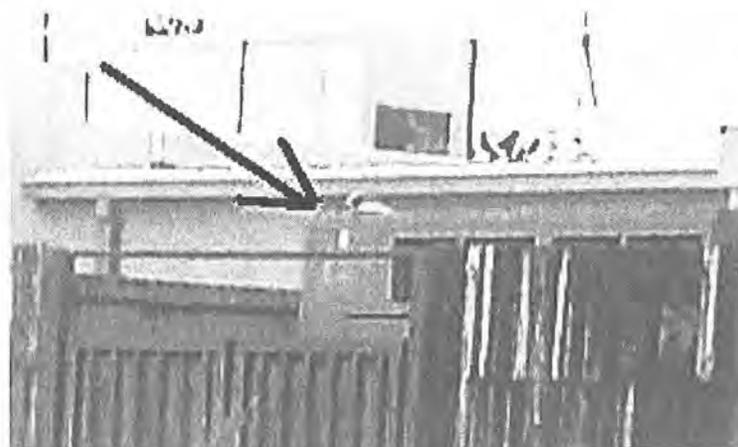


Figure 7. Blowup of diesel generator enclosure (arrow points to generator)

Truncated Fence

The 1985 master plan provided a fence “for the northern and eastern portions of the property boundary which adjoin the residential neighborhood ... to provide the needed privacy and security.” A fence was installed along the portions of the boundary which are adjacent to residences with Lupita Drive and Camino Teresa addresses. However, the fence did not extend to the residences with Camino Amado addresses, as shown for example in Figure 6.

The neighborhood associations expect the City to require that the Hospital extend the fence until it borders the three adjacent residential properties with Camino Amado addresses, before the City even considers the Application.

3. No Special Use Permit for New Inpatient Wing

This section becomes relevant when the City decides it is time to consider the Application. This section presents the following objections to the Special Use Permit (SUP), any one of which is sufficient reason to deny the SUP:

- The current use is already inappropriate for the site.
- The application for the SUP is incomplete.
- Granting the intensification requested by the SUP would adversely affect the public interest.
- The proposed use and associated buildings are not compatible with the quiet use of the neighboring residential properties.

The rest of this section discusses these objections in further detail.

The current use is already inappropriate for the site.

The intense commercial use is already a taking, in that it has deprived homeowners of the enjoyment of their property. Even if the Hospital tried to comply with its requirements and made an effort to be a good neighbor, the use would be too intense for a site adjacent to an established residential neighborhood.

As mentioned above, the hospital campus has become one of the most intense commercial activities in Santa Fe. Helicopter flights, originally rare, have become more and more frequent, up to four or more in a day. Heavy trucks deliver materials to staging areas adjacent to the residential properties. Dumpsters near the residential properties are noisily filled and emptied. Diesel generators produce noise on residential property that exceeds legal limits by up to 20 dB, not to mention noxious fumes.

Many of the homes that were here before the hospital and were designed to make use of high-desert “Santa Fe air conditioning.” Windows were left open during the cool summer nights and then closed to keep out the heat of the day. After being awakened too many times by helicopters, some homeowners have felt it necessary to suffer the expense

and artificiality of refrigerated air conditioning, so that windows could be kept closed at night.

Traffic along Galisteo Street and West San Mateo Road has increased because of the presence of the Hospital and the failure to take planned mitigating actions. The presence of the Hospital also makes some traffic calming measures inappropriate because the Fire Department has designated them as emergency routes.

The intense use has reduced the market value of neighboring homes. For the older families in this neighborhood, the equity in their homes represents most of their personal wealth, accumulated over a lifetime of labor.

Rather than make additional investments at this location, it is time for the Hospital and the City to begin planning a move to a more appropriate site, such as the Physicians Medical Center on Rodeo Park Dr. E, purchased by SVH Support for \$14.8 million in 2011.

The application for the SUP is incomplete.

The request for the SUP is contained in Section II of the Application. In Article 14-3.6 of the City Code, subsection (C) specifies the procedures for an application and subsection (D) specifies the criteria for approval.

Article 14-3.6(C)(1) states:

Special use *permits* shall include approval of a site plan and other site *development* drawings necessary to document that the type and extent of *development* proposed can be accomplished in conformance with applicable *development* standards.

In fact, the development is not in conformance with applicable development standards, but requires variances. As will be shown in Section 7, the requested variances are inconsistent with the law and should not be granted

Article 14-3.6(C)(2) states:

The *application* shall indicate the section of Chapter 14 under which the special use *permit* is sought and state the grounds on which it is requested

The application fails to indicate the section of Chapter 14 under which the SUP is sought.

The Hospital is applying for the SUP without providing any indication of its expected future needs. The Application needs to provide a background to assist the City in judging the appropriate use of the present site.

The Application does not state specifically the special use for which the Hospital is applying. The Application confuses the SUP with the Project.

The Application implies that the special use is merely the elimination of semi-private rooms. However, the scope of the Project greatly exceeds that use.

The Application does not provide the data needed to support the number of new patient rooms. How many actual beds are in the Hospital? How many semi-private rooms?

The use for the first floor is not stated, but it does not seem to include additional patient rooms. If the SUP is intended to cover the Project, it does not specify all of the special uses.

Granting the intensification requested by the SUP would adversely affect the public interest.

Article 14-3.6(D)(1)(b) states that to grant a SUP, the board must make the following finding:

(b) that granting the special use *permit* does not adversely affect the public interest, and

The Application submits one public-interest justification for the SUP; namely, that patients in private rooms heal faster. However, this is one of many findings in a 2005 literature review [*The Use of Single Patient Rooms versus Multiple Occupancy Rooms in Acute Care Environments*, Coalition for Health Environments Research]. This report is available online at

https://www.healthdesign.org/sites/default/files/use_of_single_patient_rooms_v_multiple_occ_rooms-acute_care.pdf

That report includes many other findings, including:

- Isolation in private rooms with proper ventilation systems stops infection from spreading. In an informal meeting the Hospital discussed upgrading ventilation systems in the existing hospital, but that topic is not discussed in the Application.
- Multi-occupancy rooms may be more appropriate for patients who are more likely to fall.
- Some researchers discovered that patients in private rooms were more likely to use narcotics.
- Mixed results were obtained in studies and surveys of patients' preferences for room design, although the majority of patients prefer single room.
- Patient stress can be reduced if preoperative patients are assigned to rooms with postoperative or non-surgical patients.

From these findings, it appears that a mix of private and semi-private rooms is desirable, with the allocation of a particular patient being based on the judgment of the physician and the preference of the patient. It appears that the current mix of rooms in the Hospital, mostly private with a few semi-private, is already optimal. Therefore, there is no public-interest justification for the SUP.

Rather, the allocation of resources to the Project would be contrary to the public interest. It would divert resources from other needs, such as increasing nursing staff, providing on-site availability of critical-care ground transport, and reducing city-wide exposure to helicopter noise by moving the Hospital to a more suitable location. Therefore, the SUP would adversely affect the public interest.

The proposed use and associated buildings are not compatible with the quiet use of the neighboring residential properties.

Article 14-3.6(D)(1)(b) states that to grant a SUP, the City must make the following finding:

(c) that the use and any associated *buildings* are compatible with and adaptable to *buildings, structures* and uses of the abutting *property* and other *properties* in the vicinity of the *premises* under consideration.

Article 14-4.3(A) states that the C-1 district “serves as a transitional buffer between more intense commercial use districts and *residential* districts.” As described above, the hospital campus has developed into one of the most intense commercial uses in the city. The worst problem is noise, but the presence of the Hospital also has limited the options for traffic calming. The Santa Fe Fire Department has opposed traffic-calming measures on the adjacent streets to assure emergency access. The residential neighbors are also impacted by noxious fumes and inappropriate lighting.

Intensification of the use of this site is contrary to the purpose of the C-1 district. Rather, there should be a reduction in the intensity of use. Because modern hospitals are no longer quiet zones, some are being moved away from residential neighborhoods. For example, the University of Colorado Hospital in Denver moved away from a residential neighborhood to a site on a former military base

Further development of new patient rooms should be at a more appropriate location. Patients requiring neither emergency services nor surgical services should be accommodated at another site, such as the Physicians Medical Center on Rodeo Park Dr. E, purchased by SVH Support for \$14.8 million in 2011. Plans should also include eventual relocation of emergency services, to reduce the traffic of emergency air ambulances.

4. Conditions on Approval of a 2015 Special Use Permit

This section becomes relevant when the City decides that a proposed SUP can be granted. This section lists the conditions of approval expected by the neighborhood associations. Designated by letters here to avoid confusion with the numbered conditions on the 2005 master plan amendment, these mitigating conditions are, with authorizing provision of the City Code in brackets:

- Condition A [intensity, 14-3.6(D)(2)(k)]: The number of beds in the Hospital shall not exceed 200 without modification of this Special Use Permit.
- Condition B [intensity, 14-3.6(D)(2)(k)]: The number of parking spaces on the Hospital campus shall not exceed 1,492 without modification of this Special Use Permit.
- Condition C [screening, 14-3.6(D)(2)(b)]: Before applying for a building permit for the Inpatient Bed Expansion Project, the Hospital shall restore a 25-foot drought-tolerant landscape buffer along all residential property lines.
- Condition D [screening, 14-3.6(D)(2)(b)]: Before applying for a building permit for the Inpatient Bed Expansion Project, the Hospital shall provide, on the R-2 zoned portion of the hospital property, a 20-foot landscaped setback from all property lines.
- Condition E [vehicular circulation, 14-3.6(D)(2)(c)]: Before applying for a building permit for the Inpatient Bed Expansion Project, the Hospital shall make the south entrance from Hospital Drive an entrance only.
- Condition F [street improvements, 14-3.6(D)(2)(d)]: Before applying for a building permit for the Inpatient Bed Expansion Project, the Hospital shall make the following improvements, as may be required by the City Engineering Division in consultation with the San Mateo Area Society of Homeowners:
 - improvements to the intersection of Hospital Drive and Galisteo Road
 - traffic mitigation at the intersection of San Mateo and Galisteo
 - traffic improvements/mitigation on Hospital Drive

- Condition G [pedestrian circulation, 14-3.6(D)(2)(c)]: Before applying for a building permit for the Inpatient Bed Expansion Project, the Hospital shall provide smooth pedestrian accesses from Camino Teresa and Encina Road with minimal grades consistent with the topography.
- Condition H [vehicular circulation, 14-3.6(D)(2)(c)]: Before applying for a building permit for the Inpatient Bed Expansion Project, the Hospital shall close and/or modify driveway entrances at Hospital Drive and St. Michaels Drive as shown on the 2005 amended master plan, including modifications to turn lanes on St. Michaels Drive and modification of signs facing outward to clarify that the primary entrance is on St. Michaels Drive.
- Condition I [noise attenuation, 14-3.6(D)(2)(e)]: Before applying for a building permit for the Inpatient Bed Expansion Project, the Hospital shall replace the diesel generators with better technology, move them, or otherwise mitigate their effects to the satisfaction of the San Mateo Area Society of Homeowners.
- Condition J [screening, 14-3.6(D)(2)(b)]: Before applying for a building permit for the Inpatient Bed Expansion Project, the Hospital shall establish and communicate a campus-wide policy of turning off unnecessary lights and modifying those that must be on to eliminate lighting that is visible in residences in spite of screening.
- Condition K [noise attenuation, 14-3.6(D)(2)(e)]: Before applying for a building permit for the Inpatient Bed Expansion Project, the Hospital shall establish a policy of requiring informed consent for air transport, including a form that has a place for estimated charges and includes a statement of risks with a list of accidents and fatalities involving services based in this region.
- Condition L [noise attenuation, 14-3.6(D)(2)(e)]: Before applying for a building permit for the Inpatient Bed Expansion Project and once per year thereafter, the Hospital shall provide a diagram of recommended flight paths to all services that have used the heliport within the past year, with copies to the City and to the two neighborhood associations.

- Condition M [noise attenuation, 14-3.6(D)(2)(e)]: Before applying for a building permit for the Inpatient Bed Expansion Project, the Hospital shall provide a smoking area for employees that is isolated from the residential neighborhood.
- Condition N [unusual site conditions (SCHC), 14-3.6(D)(2)(j)]: No building constructed under this Special Use Permit shall be specified to have a foundation or structure intended to support more than two stories.
- Condition O [noise attenuation, 14-3.6(D)(2)(e)]: Before applying for a building permit for the Inpatient Bed Expansion Project, the Hospital shall move all dumpsters on the campus to at least 300 feet from residential property lines.
- Condition P [fence regulations, 14-8.5(C)(2)]: The Hospital shall erect a solid masonry wall not less than six feet in height along the edges of each parking lot that is within 50 feet of a residential property line. The wall shall be between the parking lot and the perimeter fence.
- Condition Q [noise attenuation, 14-3.6(D)(2)(e)]: Construction activities, including delivery of construction materials and removal of construction waste, shall be limited to the time between 7 a.m. and 7 p.m.
- Condition R [open space, 14-3.6(D)(2)(a)]: Within 60 days, the Hospital shall cease outdoor storage in the North area of the campus.
- Condition S [screening, 14-3.6(D)(2)(b)]: Before applying for a building permit for the Inpatient Bed Expansion Project, the Hospital shall make repairs to the existing border fence as approved by the Land Use Director.
- Condition T [periodic review, 14-3.6(D)(2)(o)]: Hospital compliance with the master plan, the Special Use Permit, and these conditions shall be reviewed annually in a public meeting at 6 p.m. on the second Thursday of October, commencing in the year 2016.

5. Amendments to the 2006 Master Plan

This section becomes relevant when the City decides that a proposed SUP can be granted. This section presents objections to certain proposed amendments to the master plan. It also proposes additional amendments that the City should require the Hospital to include in the Application, for the benefit of the residents of Santa Fe as well as the adjacent neighborhoods.

The Application includes proposed amendments to the 2006 master plan that are not related to the proposed development. These are acceptable to the adjacent neighborhoods. In particular:

- The deletion of all of the proposed but unbuilt buildings eliminates a threat of further traffic, parking, noise and pollution.
- The proposed storage building should help the Hospital to cease outdoor storage in the open space of the North area of the campus.

Also, the proposed adjustments of area boundaries appear to be minimal.

The two remaining amendments proposed in the Application are:

1. Hospital Drive Access Restriction
2. Removal of the Ring Road

This section discusses those proposed amendments as well as two additional amendments to the master plan that the City should require the Hospital to include in the Application :

1. Facilities for Emergency Backup Power
2. Facility for 24/7 Availability of Critical-Care Ground Ambulance

Hospital Drive Access Restriction

One amendment proposed in the Application is labeled, "Revision of access restriction on Hospital Drive due to recent median changes and removal of left out from Entrance/Exit at St. Michael's Drive," but is not supported by further specific discussion. The changes at St. Michael's Drive are irrelevant to this issue. For convenience, we repeat here the discussion in Section 2.

The newly modified St. Michael's exit is like a Restricted Crossing U-Turn (RCUT) Intersection. The RCUT is characterized by the prohibition of left-turn and

through movements from side street approaches as permitted in conventional designs. Instead, the RCUT intersection accommodates these movements by requiring drivers to turn right onto the main road and then make a U-turn maneuver. A fully implemented RCUT would accommodate U-turns with a one-way median opening 400 to 1,000 ft after the intersection. The following is from the Federal Highway Administration publication no. FHWA-HRT-09-059 on RCUTs:

The RCUT intersection appears to offer substantial safety advantages over conventional intersections. For example, for the RCUT intersections on the U.S. Route 23/74 corridor in North Carolina, there was a 17-percent decrease in total crashes, a 31-percent decrease in total crash rate, a 41-percent decrease in fatal/injury crashes, and a 51-percent decrease in fatal/injury crash rate. Higher reductions were observed for the three unsignalized RCUTs that replaced conventional intersections on the Eastern Shore of Maryland. For the U.S. Route 17 corridor in North Carolina, total crash rates were found to be lower than the 10-year average for 25 signalized conventional intersections in Charlotte, NC, with comparable annual average daily traffic.

This safety improvement to the St. Michaels exit has no bearing on the south entrance on Hospital Drive.

The restriction to the south entrance from Hospital Drive were developed to reduce the intensity and impact of traffic on Hospital Drive. Having failed to implement this requirement for nine years, the Hospital chooses to give weak excuses rather than cooperate with he neighborhood.

This amendment should not be approved.

Removal of the Ring Road

The 1985 master plan did not include a ring road. In discussing the internal traffic circulation, p. 14 of the 1984 Master Plan Report made the following observation [original usage of commas retained]:

It appears, that the original traffic circulation pattern for the hospital and immediate environs may have been designed as a loop system with access roads from the loop to entrances and parking lots. The truncation of the loop eliminates a continuous flow of traffic around the hospital, resulting in discontinuous roads and access routes terminating in parking lots.

Nevertheless completion of the loop road was discarded for two reasons. The first was that the constant flow of traffic in front of the Psychiatric Treatment Center would

have an adverse impact on the treatment of patients. This objection is no longer valid because that facility does not exist.

The second objection was that the modifications required were projected as a major expense. Nevertheless, the ring road was restored in the 2006 amendment.

In the Application the Hospital wants again to remove the ring road, giving two reasons. The first relates to the restriction of left turns from the St. Michaels exit. As noted above, the change to an RCUT intersection is a safety improvement, not a restriction. It has no bearing on the benefit of the ring road.

The second reason given is that residents along the edge of the hospital would like the ring road to be eliminated, based on input at an informal meeting. However, restoration of the 25-foot landscape buffer and completion of the barrier fence will reduce impact from the ring road. Of greater interest to the neighborhood at large is the elimination of the exit at the south end of Hospital Drive. If the internal circulation can be made adequate without that exit and without the ring road, then elimination of the ring road is acceptable.

Facilities for Emergency Backup Power

As noted above, it is critically important for hospital facilities to have emergency backup power and to test that capability at regular intervals. A master plan that excludes provision for such capability is deficient.

The proposed master plan still does not include the existing facilities for emergency backup power. The existing diesel generators, which were installed without appropriate review and approval, have unacceptable noise and pollution impacts on the adjacent neighborhoods.

The City should require the Hospital to include in the Application amendments to the master plan that specify the location of emergency backup power. These amendments should, for each building on the campus that requires emergency backup power, provide for that capability in a manner acceptable to the San Mateo Area Society of Homeowners.

Facility for 24/7 Availability of Critical-Care Ground Ambulance

The City should require the Hospital to include in the Application an amendment to the master plan that provides a facility for availability of a critical-care ground ambulance. Prompt availability of appropriate ground transport should reduce the frequency of helicopter flights, thereby mitigating the impact on the residential neighborhoods under the flight paths. It would also benefit Santa Fe patients by providing emergency transport at much lower cost, with less risk, and with less stress.

Helicopter transport is both expensive and risky. A law that deregulated the airline industry in the 1970s has prevented states from capping the amount that air ambulances can charge. Patients in New Mexico have complained to the Department of Health after receiving bills for up to \$50,000. Some patients have been transported to Christus St. Vincent only to be transported again to a higher level of care.

There have been at least two crashes involving air ambulances based in Santa Fe with three fatalities. The company based at the Santa Fe airport, Tristate Careflight, has had other fatalities.

The Federal Aviation Agency (FAA) permits little local control over helicopter flights. Previous hospital management has used its influence to at least encourage pilots to follow preferred flights paths. Current management declines to do that, advising residents to call the FAA.

The new master plan should include a facility for a critical-care ground ambulance and its crew. An on-site team can deliver patients to Albuquerque promptly in an environment that is less stressful than that of a helicopter. This would reduce the financial impact on patients and reduce the noise impact on residences near the hospital and on residences under flight paths.

The facility could be an adaptation of a portion of the emergency room or a separate building. The ambulance and crew could be provided by the hospital, but might be better managed through an arrangement with an existing service, such as the Santa Fe Fire Department or a private provider.

The New Mexico Public Regulations Commission is accepting applications for critical-care transport tariffs. The tariff can be and should be sufficient to recover all costs and an appropriate portion of administrative expense.

6. Development Plan for New Inpatient Bed Wing

This section becomes relevant when the City decides that a proposed SUP can be granted. This section describes deficiencies in the development plan that make it inconsistent with the City's goals for the South Central Highway Corridor.

In an informal meeting with neighbors, the architects for the proposed building stated that a variance request would only be requested for a two-story building, but that the foundation and structure would be designed to support later expansion to four stories. At the Neighborhood Notification Meeting, the architects stated that the plan for an eventual four-story building had been abandoned. As proposed above as Condition O, the City should obtain assurance that the foundation and structure are not specified to support more than two stories.

The neighborhood associations have identified the following deficiencies in the development plan, each of which is discussed further below:

- The architectural style of the Project is not compatible with the existing hospital.
- The development plan has no provision for water harvesting.

The architectural style of the Project is not compatible

One of the standards on Pg. 33 of the 1985 Master Plan is, "The architectural style for additions or buildings in Area 1 shall be compatible with the architectural style of St. Vincent Hospital." The development plan fails to meet that standard in two respects:

1. The stone accent walls are inconsistent with the plain walls of the existing hospital.
2. The rectangular box design is different from the stepped massing that characterizes the existing hospital.

The development plan has no provision for water harvesting

When it comes to water conservation, Santa Fe is a leader in the Southwest. The Hospital, with its 40 acres, should be setting an example in water management. The

Project should be an opportunity to develop a comprehensive plan for water management over the entire campus.

However, the Project includes no plan for harvesting water. For example,

- There is no reference to the Landscape Irrigation Design Standards available from the City.
- There is no plan to recover rain falling on the new addition or on any of the existing buildings. The Hospital is currently engaged in an extensive roof modification, without any apparent plan for capturing water.
- There is no provision for cisterns other than one used for irrigation along St. Michaels Drive. The only other plan for capturing rain falling on parking or open space is to have tree wells depressed from the local parking areas. It is not clear how this will be managed because the boles of the existing trees do not extend below the level of the paving. Also, there is no mention of swales, check dams, French drains, or Santa Fe drains, as described in *Harvest the Rain*, by our neighbor Nate Downey.

7. Variances

This section becomes relevant when the City decides that a proposed SUP can be granted. This section explains why the requested variances are inconsistent with the law and should not be granted

Variances are intended to afford relief from the strict letter of an ordinance to protect against individual hardships related to the unique circumstances of a particular property. Gould v. Santa Fe County, 131 N.M. 405, 408, 37 P.3d 122, 125 (Ct. App. 2001). That same citation includes the following:

The purpose of variances is not to effect amendments to what are perceived to be flaws in the zoning ordinance, of to effect re-zonings, nor to alleviate the personal problems or inconveniences for property owners.

If special or exceptional circumstances do not exist, the variance cannot be granted, and the applicant must seek a change in the underlying zoning restrictions. Downtown Neighbors Association, 783 P.2d at 967.

Variances are extraordinary exceptions to the system of planned zoning adopted by municipalities and counties. This system is designed to promote and protect the public health, safety and welfare. Variances are intended to permit a property owner to make a reasonable return on his or her property where the physical characteristics of the land would not otherwise allow the owner to make use of it. However, variances are to be granted sparingly and based upon objective standards. Variances are not designed to allow application of zoning standards on only a case-by-case basis, thereby undermining existing zoning ordinances.

The Hospital is seeking variances from regulations that are intended to provide a feeling of low impact and ample open space along the South Central Highway Corridor. It is also seeking variances that are intended to limit the intensity of use in a C-1 district.

In the Application height variances are necessary only because the building design contains an extra floor for which no use is specified. This is not justification for a variance.

The requested sign variance is also unnecessary. We call attention to four items:

1. The Application notes that, “The purpose of the sign is to guide patients and visitors to the hospital.” However, it is not wall signs that patients and visitors need, but signs at the intersection and at the entrances.
2. The Application also argues that, “Taking a loved one to the hospital in an emergency situation, makes people drive faster than they should at the same time they are less able to process all the visual clues.” However, the proposed signs are not at the emergency entrance and may serve only to misdirect in an emergency.
3. The wall signs serve only to promote the presence of the Hospital, not to direct traffic. Therefore they are not a necessary variance.
4. Although the existing signs were grandfathered at one time, the Project is an opportunity to bring the Hospital into compliance with this regulation for a C-1 district.

APPENDIX

Petition

**October 28, 2015
Governing Body**

**Case #2015-47
455 ST. MICHAELS DRIVE CHRISTUS
ST. VINCENT REGIONAL MEDICAL
CENTER**

EXHIBIT F

2006 Governing Body Minutes

Ms. McCormick said staff has been very careful in how to structure this because it is a loan fund with an interest rate. She said staff will evaluate proposals and assign a rate which works, noting that every project is different.

Councilor Heldmeyer said 35% of the land sales from Tierra Contenta for this, and asked where the other 65% goes. Ms. McCormick said that goes to the Economic Development Fund.

Ms. McCormick clarified that the land repayment from Tierra Contenta is one part. Monte Sereno cut its own deal with the City. These are two separate deals.

The motion was passed on a Roll Call vote as follows:

For: Councilor Bushee, Councilor Calvert, Councilor Chavez, Councilor Heldmeyer, Councilor Ortiz, Councilor Trujillo, and Councilor Wurzbarger.

Against: None

- 3) **CONSIDERATION OF BILL NO. 2006-38 – ADOPTION OF ORDINANCE NO. 2006-____. (Councilor Heldmeyer and Councilor Chavez). An Ordinance Creating a New Section 14-8.8(F) SFCC 1987, Requiring an Economic Impact Study for New Retail Establishments 100,000 Gross Square Feet and Larger. (Jeanne Price)**

This item was postponed to the Council meeting of July 26, 2006.

- 8) **CONSIDERATION OF RESOLUTION NO. 2006-83. Case #M 2004-47. St. Vincent Hospital Campus Master Plan. The Design Group, Agent for St. Vincent Hospital, Requests Consideration of a Master Plan for the St. Vincent Hospital Campus Located at 455 St. Michaels Drive. The Plan Would Serve as a General Guide to Future Development of the Hospital Campus. The Property is Zoned C-1 (Office and Related Commercial). The Site Encompasses a Total of approximately 47.8 Acres and is Located at the Northeast Corner of St. Michael's Drive and Hospital Drive. (Andrew Harnden)**

Memorandum prepared June 30, 2006 for July 12, 2006 City Council Meeting, with attachments, to City Council, from Andrew Harnden, Planner Supervisor, Permit & Development Review Division, is incorporated herewith to these minutes as Exhibit "7"

A copy of "Additional Materials Submitted by St. Vincent Regional Medical Center," in this case, for the St. Vincent Hospital Campus Master Plan, dated July 12, 2006, is incorporated herewith to these minutes as Exhibit "8"

The Staff Report was presented by Greg Smith which is contained in Exhibit "8." Mr. Smith said the matter before the Council tonight is the amendment of the master plan recommended for approval by staff and the Planning Commission with conditions noted in the staff report. The applicant has proposed some changes to the Resolution which will implement

the Council's decision, and in general the staff is not opposed to these changes, but is looking for direction from the Council in these matters.

STAFF RECOMMENDATION: Staff recommends approval of the request for Master Plan Amendment with the ten staff conditions included in the Planning Commission May 4, 2006 recommendation for approval as well as three new staff conditions:

Staff Conditions of Approval for May 4, 2006 Planning Commission

1. New development shall comply with the standards of Section 14-5.5(A)(3), South Central Highway Corridor Overlay District, including 25-foot landscape buffer with 50-foot building setback from residential property lines.
2. "Area 3 Overlay" height limit from original master plan shall continue to apply (maximum building height of 18 feet within 120 feet of northerly residential property line).
3. R-2 zoned portion of the hospital property shall be limited to single-family residential use, parking lot use, with minimum 20-foot landscaped setback from all property lines, open space or detention ponding with a depth of three feet or less and side slopes not steeper than 4:1.
4. Make south entrance from Hospital Drive an entrance only. Staff design recommendations may require a triangular bulb-out to prevent right-turn exit and a street island on Hospital Drive to prevent left-turn exit.
5. For all phases subsequent to the Emergency Room Expansion, provide pro-rata participation in traffic calming measures and off-site traffic mitigation measures to the approval of the Public Works Department and the Planning Commission.
6. For all phases subsequent to the emergency room expansion, the developer will be required to assess certain off-site traffic operations and provide mitigation measures where needed. These improvements are listed in an Engineering Division traffic memo which was handed out as additional correspondence at the May 4, 2006 Planning Commission meeting and may include:
 - a. improvements to the intersection of Hospital Drive and Galisteo Road.
 - b. traffic mitigation at the intersection of San Mateo and Galisteo.
 - c. all existing and proposed access points to the development.
 - d. traffic improvements/mitigation on Hospital Drive.
 - e. examine possibilities for shifting the main entrance on St. Michaels Drive further east.
 - f. any other traffic concerns related to the implementation of the development.
7. For all phases subsequent to the Emergency Room Expansion, close and/or modify driveway entrances at Hospital Drive and St. Michaels Drive as shown on the amended master plan, including modifications to turn lanes on St. Michael's Drive.
8. Provide internal directional signage to guide visitors to exits and to various buildings/hospital services.
9. Helipad facility shall not be relocated without approval of a special exception or master plan amendment.
10. These conditions of approval shall be noted on the master plan, which shall be filed for record with the County Clerk, and which shall replace and supercede the provisions of the original master plan. Except as specified by these conditions, development of the property shall be subject to all other applicable procedures and development standards of City codes.

Added Staff Conditions for July 12 Council Hearing:

11. On-site circulation and signage: For all phases subsequent to the emergency room expansion, modify internal circulation as shown on the amended master plan to include a ring road. For all phases subsequent to the emergency room expansion, provide internal directional signage to guide visitors to exits and to various buildings/hospital services. On-site circulation and signage should be addressed after the hospital meets with staff to address off-site traffic concerns (above).
12. Also, a 20' wide non-motorized trail easement should be granted to the City along the south and east property lines to accommodate a 10 ft. wide paved trail. Exact location should be verified in the field with the City trails and open space coordinator.
13. Address pedestrian and wheel chair access with staff from Camino Teresa and Encino Road on the north side of the campus and from other possible locations along the east side of the campus. The applicant must also address creating access from these locations across the campus to the bus stop, to St. Michael's Drive and to Hospital Drive

Public Hearing

Presentation by the Applicant

Doug Magusky, 13201 Manitoba, Albuquerque, was sworn. Mr. Magusky said they are the architects representing the hospital for the master plan and for the emergency room expansion project. They have been working for a number of years on the master plan, and the goal with the hospital is to provide a flexible plan to all to accommodate their future needs and changes in technology which happen in the health care industry. He said the master plan has been evolving over time. The hospital has worked quite hard with the neighborhood and with City staff to mitigate and improve the master plan to ensure it addresses the neighborhood and hospital needs. He said some of the fruits of these discussions have been proposing a bus stop toward the north end of the property, and integrate walking paths and trails through and around the campus for the public.

Mr. Magusky said the emergency room is a big need for the community, and the hope is to get the master plan and then move forward with the emergency plan project almost immediately. One of the big, overriding planning principles with the master plan, was to provide on the campus ease of movement for patient, staff and visitors, so they have created a loop road around the whole hospital and to minimize the amount of exits and entry points on Hospital Drive and focus traffic more on St. Michael's Drive.

Rick Crabtree, Vice President, St. Vincent's Hospital. He said the master plan has been in development over the past year. The hospital has met with neighborhood associations, City staff and spent thousands of dollars in traffic and engineering studies. The master plan incorporates the community's health care needs, addresses the neighborhood concerns and plans for the technological advances which is required in this community. The appropriate approval of the master plan is necessary to construct the much needed emergency room renovation. The Emergency Room treats more than 60,000 patients every year, and is the second busiest ER in New Mexico. The original design was to treat about ½ that number of patients.

Mr. Crabtree said the renovation will include additional square footage for the trauma, pediatric intensive care in the E.R., womens services, biohazard and advance technology. It is important to expedite the approval. The funding for the E.R. is: 1/3 from community donations, 1/3 from governmental funding and 1/3 from debt financing. The conditions of the financing plan require the construction to begin in September.

Frank Herdman, Attorney for applicant was sworn. Mr. Herdman thanked City staff, noting there have been extensive meetings over the past several months with the City Attorney, Frank Katz, Anne Lovely, Diane Quarles, Greg Smith, Andrew Harnden and others and those meetings have been very productive in addressing the issues he would like to address this evening. Mr. Herdman handed out additional materials, and asked these be made a part of the record [Exhibit 8.]

Mr. Herdman said he would like to address the form of Resolution proposed by staff and the applicant's proposed changes, and then to address some minor changes to staff's proposed conditions because these have some important long and short term implications to the hospital, including the ability of the emergency room to proceed expeditiously to construction.

Mr. Herdman noted the proposed amendments to the Resolution are on page 2 of the handout [Exhibit "8" as follows:

~~"WHEREAS, the applicant must submit for ENN and development plan approval for each phase or sub-phase per Section 14-3.1(F) and 14-3.8(A) SFGC 2001."~~

WHEREAS, future development on the property encompassed within the amended master plan shall require early neighborhood notice meetings and approve by the Planning Commission only if required by Chapter 14 of the City Code.

WHEREAS, the proposed emergency room addition does not require early neighborhood notice meetings or Planning Commission approval.

NOW, THEREFORE, BE IT RESOLVED BY THE GOVERNING BODY OF THE CITY OF SANTA FE that the Master Plan for Tracts A-1, A-2, B-1, B-2-A, B-2-B, C and D within Section 36, T 17N, R9E, N.M.P.M. is amended as shown in "Exhibit "B" attached hereto. This Resolution supercedes Resolution 1985-36 in its entirety."

Mr. Herdman said the Hospital will be starting construction in the very near future. The form of Resolution they are requesting, is intended to clarify when development on the property needs to go back to the Planning Commission. He said the applicant and staff are in agreement as to when this occurs. He said this is a suggestion as to how to state this a bit more clearly. Mr. Herdman said they were concerned that staff's proposed language had ambiguity in the terms "phase" and especially sub phase." He is proposing a clarification in a new Whereas clause. He said they are proposing that future development would need to go back to the Planning Commission for review and approval and ENN as required by Chapter 14. He said they are proposing to adopt what is stated in the City Code, and he believes this was the intent of staff

language, but there was a lack of clarity. Mr. Herdman said the applicant would like his language adopted in lieu of that.

Mr. Herdman said the second Whereas clause is added to address an issue raised by the Planning Commission which is whether or not the emergency room expansion would have to go back to the Planning Commission and the ENN process. He said this particular provision is on pages 5 of the handout.

Mr. Herdman said the current version of the Code explains that new construction of individual buildings or additions shall receive Planning Commission approval of a development plan if the new construction meets any of the criteria set forth in subsections A and B on page 5 of the handout. Subsection A provides that you go back to the Planning Commission if your new construction of individual buildings or additions had a floor area of 30,000 sq. ft. or more. He noted the emergency room as stated on the master plan has approximately 21,000 sq. ft. Therefore, Subsection A wouldn't apply. Subsection B provides that if the new construction of the individual building or addition has a gross floor area of 10,000 sq. ft. or more, and the new construction is within 200 ft. of any of the designated residential zoning districts. On page 8, it is indicated that the proposed ER addition is at least three times that distance from any of the nearest residential zoning districts. As a result, it would not be subject to the ENN process or the Planning Commission development plan approval process.

Mr. Herdman stressed that they aren't trying to escape scrutiny of the ER addition, noting it is a part of the amended master plan. He said three ENN meetings were held associated with the master plan. The traffic impact analysis which went with the master plan incorporated the impacts associated with the ER expansion. So it has been through the equivalent of the ENN process and the traffic impacts associated with the anticipated development has been incorporated into staff's recommendations. He believes it is important for the Council to give the clarity and resolve any doubt as to whether the ER addition needs to go back to the Planning Commission, and the second Whereas clause states clearly that the proposed ER addition does not require ENN meetings or Planning Commission Approval.

Mr. Herdman said the third requested revision to the Resolution is found at the end of text and states "This Resolution supercedes Resolution 1985-36 in its entirety." This is the prior Resolution which adopted the old master plan. He is requesting for clarity that this resolution supercede the previous one.

Mr. Herdman reviewed the proposed amendments to Staff's Proposed Conditions of approval which are as follows:

3. R-2 zoned portion of the hospital property shall be limited to single-family residential use, parking lot use, with minimum 20-foot landscaped setback from all property lines, open space or detention ponding with a depth of three feet or less and side slopes not steeper than 4:1. Other uses, if any, permitted for R-2 zoned property under Chapter 14 shall also be allowed
4. For all phases subsequent to the Emergency Room Expansion,
mMake south entrance from Hospital Drive an entrance only. Staff

design recommendations may require a triangular bulb-out to prevent right-turn exit and a street island on Hospital Drive to prevent left-turn exit.

6. For all phases subsequent to the emergency room expansion, the developer will be required to assess certain off-site traffic operations and provide mitigation measures where needed. These improvements are listed in an Engineering Division traffic memo which was handed out as additional correspondence at the May 4, 2006 Planning Commission meeting and may include:
 - a. improvements to the intersection of Hospital Drive and Galisteo Road.
 - b. traffic mitigation at the intersection of San Mateo and Galisteo.
 - c. all existing and proposed access points to the development.
 - d. traffic improvements/mitigation on Hospital Drive.
 - e. examine possibilities for shifting the main entrance on St. Michaels Drive further east.
 - f. ~~any other traffic concerns related to the implementation of the development.~~

8. For all phases subsequent to the Emergency Room Expansion,
Provide internal directional signage to guide visitors to exits and to various buildings/hospital services.”

Mr. Herdman explained the reasons for these proposed revisions:

Condition No. 3. There is one small lot in the master plan that is zoned R-2. There are a myriad of permitted uses for property zoned R-2. He said in the interest of not committing a downzoning of that property that we add a sentence stating that other uses, if any, permitted for R-2 zoned property under Chapter 14 would also be allowed.

Conditions No. 4 and 8. Mr. Herdman said this is for a clarification that the two traffic mitigation measures referred to in these items will occur after the emergency room expansion. He said this is consistent with a Memorandum from Public Works which is on page 9 of the handout, which explains that the “emergency room expansion is not expected to significantly increase traffic because the proposed expansion is intended to accommodate the existing patient load...” It goes on to explain that as a result of that the developer is not expected to carry out major traffic mitigation improvements at this time, and those can wait until after the ER expansion.

Mr. Herdman said, consistent with staff’s recommendation, the applicant would like Conditions No. 4 and 9 to state clearly that these measures can await subsequent phases after the ER expansion.

Mr. Herdman said the applicant requests that the Council adopt the Resolution with the particular changes requested.

Those Speaking to this Case

Bob Walsh, 1553 Camino Lado, was sworn. Mr. Walsh said he lives behind the hospital and he is speaking on behalf of the San Mateo Neighborhood Association, noting he is a member of that Board. He said there is a letter in the packet stating that the Association recommends approval of the master plan, subject to the staff's recommended conditions, and subject to one additional condition which is that, "the use of the helipad be restricted to medical emergencies."

Mr. Walsh proposed a change to the staff recommended conditions of approval. One of the issues which arose before the Planning Commission was whether or not developments between 10,000 and 30,000 sq. ft., had to go through Planning Commission approval. He said the Association doesn't wish to delay the emergency and are in favor of the project. However, they agree with the staff opinion at the time that any development of 10,000 ft. or larger should go through the ENN process, traffic considerations and such. The staff had included that in the conditions to clarify something which seemed to be ambiguous.

Mr. Walsh said the other issue is the helicopter traffic, which once again is becoming an increasing problem and more of the flights are buzzing the neighborhood homes. The only control that local government has over air traffic is through land use regulations, so the only control is for the City to impose restrictions on the use of the helipad. Mr. Walsh said in the medical literature, currently there is a controversy as to whether helicopter transport in emergencies is actually beneficial. They are willing to let that slide, and hope it is resolved in the future. He said current management asserts that all current flights are medical emergencies. The Association wants protection against a change in management, to ensure there is no inappropriate use of the helipad in the future, such as transporting visiting dignitaries to some big meeting at the hospital.

Josena Campos. Ms. Campos supports the master plan for the hospital and the emergency room services are needed. However, the City Council, the new Mayors and especially the City Manager, need to look at more expertise with regard to public works and what they're looking at and what they're not looking at. She said to be "put back on the recycled back burner" is a detriment to the neighborhood, a detriment to the elderly, our ambulances our law enforcement and the fire trucks. She said she lives in a neighborhood of hazards. She asked the City Council to give Public Works staff expertise, which is a task force of their neighborhood who have the expertise and to sit with them to see what they pursue to put on the street. She is asking that we go back to looking at PDR and planning. We need two planners to look at the overall developments in her area, and to see the growth, and traffic off Old Pecos Trail and St. Michaels Drive has impeded the safety of ambulances and fire trucks. She is asking for expertise of Mike Gomez or Highway Department.

Mr. Crabtree said, with regard to the proposal to restrict hospital flights to and from the hospital, there are existing protocols. He said they do follow the state's emergency medical services protocol for air ambulance flights. He has reviewed the flights over the past fourteen months, all of which were for medical emergencies. He met with their Risk Manager, Case Management Services and Security, to review and tighten policies and procedures which clearly

state that air ambulance services will be used only for emergency, critical or by direction of the emergency physicians for patient transportation. He said they intend to stand by those and adhere to those policies.

Public Hearing was closed

Councilor Heldmeyer said there was a traffic meeting of the neighborhood last night, and it was cordial. However, the discussion was that the traffic relief for this neighborhood is long overdue. She said the corner of Galisteo and San Mateo is a terrible corner with terrible traffic, which spills out on all the other surrounding streets. Unfortunately we haven't, as a City, been as diligent in dealing with these traffic problems as we should have been. She said the Hospital talked about the traffic at the meeting last things, with regard to things it will do to mitigate the problems. She said some of these things are things Mr. Herdman is suggesting that they don't do for a while, and that wasn't mentioned at the traffic meeting, as part of the redesign. She said the neighborhood has consistently said it doesn't want to hold up the City with these traffic problems. It behooves the City to do something about it because it is absolutely terrible.

Motion Heldmeyer moved, seconded by Councilor Calvert, for approval of the master plan with staff conditions as written which are on pages 1 through 3 of the packet with two additional conditions: that the helipad is used for emergency medical flights only and that two pedestrian/bicycle gates be provided in the back northwest corner of this plan somewhere, so that people in the surrounding neighborhood can cut through this property and get to St. Michaels and other areas.

Councilor Ortiz said, for the record, that the disclosure Councilor Chavez made regarding his wife's employer, and the fact that she works at St. Vincent, it was this example which led to changes in the Ethics Ordinance. When he was talking to Councilor Heldmeyer about Councilor Chavez's disclosure, he remembered that we specifically changed the definition of conflict of interest. Unlike the position he took in 2004, because there is an ordinance change, he believes that the disclosure by Councilor Chavez's is all that is necessary, and he is in compliance with the Ethics Ordinance. He said he supports the motion as presented by Councilor Heldmeyer.

Councilor Wurzbarger asked Councilor Heldmeyer if her motion accepts the suggested revisions made by the Applicant.

Councilor Heldmeyer said she is not.

Councilor Wurzbarger understands these revisions were accepted by staff who had no problems with them.

Councilor Heldmeyer said she didn't hear that. Mr. Herdman felt he was clarifying what staff had said.

Councilor Wurzbarger asked for clarification, with regard to the suggestions made on Page 2 specifically.

Mr. Smith said staff's report said that staff did not have major objections to them, and would take policy direction from the Council with regard to those issues. He said for the most

part, the language makes it abundantly clear that the litigation measures are to be tied to improvements which occur subject to the emergency room, and not with the emergency room in Condition #6, as recommended by staff. He is unsure whether there will be a significant fact one way or the other by the applicant's deletion of any other traffic concerns related to implementation of the development, and doesn't think it precludes other impacts from being considered by the Council in the future.

Mr. Smith said, with regard to Condition #3, "Other uses, if any, permitted for R-2 zoned property under Chapter 14 shall all be allowed, he is concerned that may be a little broad, noting that "other uses" could potentially involve churches or institutional issues related to the Hospital which might or might not meet with the approval of the Neighborhood Association. He said it is conceivable that 9,999 sq. ft. addition could occur on that corner of the property which would be prohibited under the language recommended by staff and the Commission. It would not be prohibited under the language recommended by the Applicant.

Mr. Smith said with these reservations, staff is awaiting policy direction from the Council on those points.

Councilor Wurzbarger said her concern that if we did not change the language on page 2, her understanding is that if is not done, there is no clarity of whether or not the emergency room addition needs to go back to the ENN. She is hearing from both the neighbors and applicant that it is very important to move forward with this, and she understands this isn't acceptable to Councilor Heldmeyer's motion.

Councilor Heldmeyer said this is a very special case, a huge master plan. She said what staff has recommended is that each phase or sub phase be subject to ENN, and Mr. Herdman has changed it to only if required by Chapter 14. She said he will then argue that a lot of this stuff isn't required by the City Code. She doesn't think this was staff's intent, and it is not her intent. That isn't her motion, but Councilor Wurzbarger can make another motion if she wants.

Councilor Bushee moved, seconded by Councilor Wurzbarger, to amend the motion to accept the language proposed in the Resolution as follows, "WHEREAS, future development on the property encompassed within the amended master plan shall require early neighborhood notice meetings and approval by the Planning Commission only if required by Chapter 14 of the City code; and WHEREAS, the proposed emergency room addition does not require early neighborhood notice meetings or Planning Commission approval; and This Resolution supercedes Resolution 1985-36 in its entirety."

Friendly amendment to the motion to amend: Mayor suggested on the first WHEREAS, change as follows: "...only if as required by Chapter 14. **The amendment was friendly to the maker and second.**

Mr. Herdman asked if this amendment also adopts the requested changes to the staff's conditions of approval.

Councilor Bushee said she is just coming to that. Mr. Herdman said Mr. Crabtree asked that he express on behalf of the hospital, restrictions to medical emergencies for the helicopter.

EXPLAINING HER MOTION: Councilor Heldmeyer said her motion was to approve the master plan with staff conditions as written and with two additional conditions: (1) that the helipad be used only for medical emergencies, and (2) that two gates be provided at the back of the property

Friendly amendment: Councilor Bushee proposed the following amendment to the conditions of approval by staff, to add a new sentence at the end of Condition #3, "...Other uses, if any, permitted for R-2 zoned property under Chapter 14 shall also be allowed; Item #4, add additional language at the beginning of the sentence, "For all phases subject to the Emergency Room Expansion, make south..." ; Under #6 delete language, "any other traffic concerns related to the implementation of this development"; and #8, add additional language at the beginning of the sentence, "For all phases subsequent to the Emergency Room Expansion, provide..." **The amendment was friendly to the second.**

Discussion on the Friendly Amendment: Councilor Heldmeyer said there was a traffic meeting on this last night. The Hospital presented its traffic plan last night. Nothing was said about delaying the traffic changes until after the emergency room is done. The problem is that the traffic changes which are proposed are integral to making this plan at least not moving the traffic pattern "from and F to a Z," and they are very important. She is sure the Hospital would like to delay them until it is most convenient for them. However, this isn't what was presented last night. And if that isn't what is intended, the representatives of the Hospital were not exactly forthcoming about it.

Councilor Wurzbarger said perhaps this is a timing issue. She is sympathetic to the issue raised by Councilor Heldmeyer – we are moving sub phases and other things – it is a question of when this is going to happen. As she interpreted this, she assumed it would be done at the end of building this, and there was some reason they didn't want to do it during construction, but it's not a matter of doing it one year or six years from now. She asked the intention of the Hospital.

Mr. Crabtree said the intent is that once the City has its plan together "we will fold right into it. We don't know what they're going to do at this point. And so when we say, well jeez we could improve the entrance of St. Michaels Drive, and the City said well, but we want you to move it 30 ft. to the east, we would be doing double work. Once the plan is complete, and we have been participating in that, the neighbors have been participating in it, when it's finalized, we will pay our pro rata share and compliment that plan."

Councilor Wurzbarger said this seems rational to her.

Amendment to the proposed Friendly Amendment: Councilor Bushee said on page 2, she would like to strike the language, "~~WHEREAS, the applicant must submit for ENN and development plan approval for each phase or sub-phase per Section 14-3.1(F) and 14-3.8(A) SFGC-2004~~" **The amendment was friendly to the second.**

Discussion: Councilor Bushee said we need this, and she has not seen the hospital to be resistant to any suggestion of changes to traffic. She said we have to work it out, and it is the City which hasn't been up to speed in dealing with the traffic issues. She said Councilor Heldmeyer or others need to clarify the City ordinance, because she thinks the Hospital and our City Attorney is interpreting the ordinance correctly. The intention may have been one thing, but

what was written, approved and codified is another. She said she doesn't see a transparency issue with the Hospital, and the Hospital is following our Code, and we need to change our Code to be more clear. This is the reason she is willing to accept this language.

Councilor Calvert said if certain traffic improvements can be made which everybody agrees need to be made on Hospital Drive, he would like to see language which provides they don't have to be completed by the time the Emergency Room is completed, but they don't have to wait until the next phase to do these, and that they be done as soon after completion as soon as possible.

Mr. Smith said staff shares some of the concerns discussed by the various Councilors with regard to an implementation method and planning. Staff is working at two difficulties in resolving the problem. The first difficulty is that some of the specific mitigation measures referenced in the conditions of approval, most notably improvements to the intersection of San Mateo and Galisteo, would require pro rata participation by the Hospital in improvements, but there is no way to implement that because it hasn't been designed or chosen yet.

Councilor Calvert understands, but he is asking if there those which aren't going to change, and if there are, they don't have to be done in conjunction with the emergency room, but as soon as the emergency room is done they have to be done, and they don't have to wait for another phase.

Mr. Smith reiterated that staff shares these concerns, but neither the Public Works staff nor the PDR staff has a specific plan for on-site improvements or driveway locations we can break out and say these are the specific things which have been resolved. Neither the staff nor the Commission have specific recommendations with regard to those minor improvements at this point.

Councilor Wurzbarger asked Mr. Romero for a quick overview on what's wrong here.

Mr. Romero said staff is looking at three big things: (1) a possible new traffic signal on St. Michael's further to the east; (2) right in/right out at the intersection closest to St. Michaels; and (3) a new intersection further to the south. He they want the new intersection at St. Michaels to the east as far away from the existing intersection as possible, and that hasn't been figured out. He said if we just do the right in/right out now, it could really affect traffic and could trigger needing the traffic signal now. They all need to be done at the same time as they do their new inter road system.

Mr. Walsh said the neighbors would like to point out that the move of the main entrance to St. Michaels and the creation of [inaudible] Road is in the 1989 master plan.

Councilor Heldmeyer pointed out that all of the things which are said can't be done are because things might change from the City. All of the things that Robert mentioned are in Condition #6 which isn't being changed.

Responding to Councilor Heldmeyer, Mr. Romero said right now the south entrance of Hospital Drive is the exit for people, and we would move the exit point most likely to St. Michael's which could trigger needing a signal at that location, and we would have to evaluate whether that would warrant a signal. If it does, the signal would have to be installed. The

problem is that we don't know exactly in the future where that entrance is going to be.

Councilor Heldmeyer said this was discussed last night, because the neighbors would like the signal in the middle of the arroyo and it can't be put there. She said the question is how long people have to wait for changes to the traffic plan.

John Romero said the currently proposed entrance has been reviewed by the current City staff two months ago. He said there are other proposed access points further to the east. He said staff needs to look at how it affects progression on St. Michael's Drive. Until this is done, staff can't make a definite decision. The comment was provided to the developer.

At 11:50 p.m., Councilor Bushee moved, seconded by Councilor Chavez to suspend the rules. The motion was passed unanimously on a voice vote with Councilors Bushee, Calvert, Chavez, Heldmeyer, Ortiz, Trujillo and Wurzburger voting for the motion and none against.

Councilor Heldmeyer asked when people will see the traffic changes, which everybody agrees are good traffic changes.

Mr. Herdman said Mr. Crabtree did answer that with his statement about waiting for completion of the larger traffic study.

Councilor Heldmeyer said this isn't the issue. She said the neighbors are getting different answers. Last night we heard the traffic study was pretty much done and we know more or less what is going to happen. She said on Galisteo/San Mateo there is still a lot of unanswered questions, but that isn't part of this master plan. The question is when, in these many phases which the Hospital is putting forward will the Hospital really be addressing the traffic issues on this campus.

Mr. Herdman said he understands there is a larger comprehensive study which the City is performing. The message they get from the City is that these changes need to be assessed in the overall context of that, or we will be faced with the situation of doing them again.

Councilor Heldmeyer asked the timeline.

Mr. Romero said doing the emergency room expansion won't increase traffic right now, noting that right now people are in the hallways. As the Hospital starts expanding its campus and doing the ring road, staff thinks that is the appropriate time for all the improvements. He said staff can look at eliminating the left turn to look at the impacts. However, all of the others need to be tied to when the ring road will be built in terms of the rest of the development, and he is unsure when the Hospital plans to do that.

Councilor Heldmeyer asked the Hospital if they plan to build the ring road after you build the emergency room and before you building anything else.

Mr. Crabtree said yes. He said the ring road going in doesn't help the traffic, doesn't help the entrance on St. Michael's Drive, and they are simply waiting. They have become frustrated because they waited for the closure of Hospital drive, limited access, for almost a

year, and they are continually waiting on that traffic plan. Until that is done, they will spend a lot of money on something which will have to be redone.

Councilor Heldmeyer understands their frustration, but they need to understand the frustration of the neighborhood who have been waiting even longer. She asked staff what can be included that makes it clear that these traffic improvements are an integral part of what is going on here. She asked when this is going to happen. Mr. Romero said once the location of the entrance east of Galisteo, all of the improvements can go in.

Councilor Heldmeyer said before voting on the amendments she will be adding another BE IT RESOLVED that within one year of this date that the Hospital and the City come forward with a traffic plan for this development, and a timeline of when it is going to be built, and nothing else gets built there until this is achieved.

Friendly amendment. Councilor Ortiz said he does not believe the 1985 master plan Resolution needs to be scrapped. He said in 1985, people weren't calling the Council neighborhood-friendly, and they wanted to ensure that all phases of development go through a Planning Commission process. He said it isn't appropriate to the scrap master plan. He can't support that amendment and would like to delete the language as follows, This Resolution supercedes Resolution 1985-36 in its entirety. **The amendment was friendly to the maker and second.**

Mr. Herdman asked if the proposed amendment also exclude the restriction on Hospital helicopter flights. He said there is a deep, deep concern that restricting them to medical emergencies could be interpreted by doctors to limit their discretion as to when these flights are necessary.

The motion to amend as amended was passed on the following roll call vote:

For: Councilor Bushee, Councilor Calvert, Councilor Chavez, Councilor Ortiz, Councilor Trujillo and Councilor Wurzbarger.

Against: Councilor Heldmeyer

EXPLAINING HIS VOTE: Councilor Ortiz said he will vote in favor of the motion with the language that the Hospital still has to comply with the 1985 Resolution.

Mr. Smith said the 1985 Resolution contains language which requires approval by the Planning Commission of a "master development plan" for all phases. Staff is unsure how the Council intends staff to interpret the old language about Planning Commission approval for all phases versus the new language stating that the emergency room is not subject to further Commission approval.

Councilor Ortiz said this means that every phase except the emergency room addition must go through the Planning Commission. Mr. Smith said staff can proceed with that clarification.

Mr. Herdman said he has been asked to communicate that the way it works now that there is discretion by the physicians to direct flights. If there is a condition imposed for medical

emergencies it could be misinterpreted and construed as limiting that discretion. He noted his wife works in the emergency room and he knows what those flights mean and they mean life and limb, and he would strongly, strongly discourage any constraints on physician discretion on how those flights are use.

Councilor Heldmeyer asked if they would be more comfortable with the word "necessity." Mr. Herdman said established medical protocols are in place. Councilor Heldmeyer said she will change "emergency" to "necessity."

Mr. Herdman respectfully requested the Council not to venture into this area without a complete and full understanding, saying he believes there may be unintended consequences. He said the Hospital follows up on all complaints which are made. He noted these are not hospital helicopters and the Hospital does not have control over them. The Hospital remains very committed to follow up in response to those complaints. He said there are established flight patterns, protocols, and it is an area into which we shouldn't enter lightly.

Councilor Wurzbarger said it seems the issue is protocol, and suggested changing the language to say that it is consistent to medical protocol.

Mr. Welsh said he thinks we are getting some admission from the hospital that, in fact, some of these flights are questionable, noting there has been a great increase in the number of flights, and there isn't that much of an increase in the number of emergencies. He said the data from studies indicate that in cases of trauma, there is only a very small percentage of patients who benefit from the flights, that the helicopter is much over utilized.

Friendly amendment: Councilor Wurzbarger is uncomfortable telling the hospital who is going to get in which helicopter when, but she is sympathetic to the neighborhood with regard to transporting. Mr. Crabtree suggested using the same language which is in the Hospital's policy which is "emergent, critical or at the direction of a physician." **The amendment was friendly to the maker and second.**

The Main Motion as amended, with the substitute language as provided by the Hospital, was passed on the following roll call vote:

For: Councilor Bushee, Councilor Calvert, Councilor Chavez, Councilor Ortiz, Councilor Heldmeyer, Councilor Trujillo and Councilor Wurzbarger.

Against: None.

- 4) **CONSIDERATION OF BILL NO. 2006-39 – ADOPTION OF ORDINANCE NO. 2006-34. (Councilor Heldmeyer). An Ordinance Adopting the New Mexico Uniform Traffic Ordinance 2004 Compilation Containing All Revisions Through July 2005, as Amended by the City of Santa Fe (Exhibit 1); Repealing All Ordinances or Parts of Ordinances in Conflict Thereof; Adopting a Traffic Violation Penalty Assessment Schedule (Exhibit B) and Adopting a Parking Violation Fines Schedule (Exhibit C). (Deputy Chief Byford and Jeanne Price)**

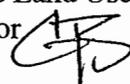
City of Santa Fe, New Mexico

memo

DATE: June 30 for July 12, 2006 City Council Meeting

TO: City Council

VIA:


Asenath Kepler, City Manager
Diane Quarles, Director, Planning & Land Use *WB for DR*
Greg Smith, Acting Division Director 

FROM: Andrew Harnden, Planner Supervisor, Permit & Development Review *AH*
Division

ITEM AND ISSUE:

Case #M 2004-47 St. Vincent Hospital Campus Master Plan. The Design Group, agent for St. Vincent Hospital, requests consideration of a master plan for the St. Vincent Hospital Campus located at 455 St. Michaels Drive. The plan would serve as a general guide to future development of the hospital campus. The property is zoned C-1 (Office and Related Commercial). The site encompasses a total of approximately 47.8 acres and is located at the northeast corner of St. Michael's Drive and Hospital Drive.

RECOMMENDATION

Staff recommends approval of the request for Master Plan Amendment with the ten staff conditions included in the Planning Commission May 4, 2006 recommendation for approval as well as three new staff conditions:

Staff conditions of approval for May 4, 2006 Planning Commission:

1. New development shall comply with the standards of Section 14-5.5(A)(3), South Central Highway Corridor Overlay District, including 25-foot landscape buffer within 50-foot building setback from residential property lines.

5/11/2 470

2. "Area 3 Overlay" height limit from original master plan shall continue to apply (maximum building height of 18 feet within 120 feet of northerly residential property line).
3. R-2-zoned portion of the hospital property shall be limited to single-family residential use, parking lot use with minimum 20-foot landscaped setback from all property lines, open space or detention ponding with a depth of three feet or less and side slopes not steeper than 4:1.
4. Make south entrance from Hospital Drive an entrance only. Staff design recommendations may require a triangular bulb-out to prevent right-turn exit and a street island on Hospital Drive to prevent left-turn exit.
5. For all phases subsequent to the Emergency Room Expansion, provide pro-rata participation in traffic calming measures and off-site traffic mitigation measures to the approval of the Public Works Department and the Planning Commission.
6. For all phases subsequent to the emergency room expansion, the developer will be required to assess certain off-site traffic operations and provide mitigation measures where needed. These improvements are listed in an Engineering Division traffic memo which was handed out as additional correspondence at the May 4, 2006 Planning Commission meeting and may include:
 - a. improvements to the intersection of Hospital Drive and Galisteo Road
 - b. traffic mitigation at the intersection of San Mateo and Galisteo
 - c. all existing and proposed access points to the development
 - d. traffic improvements/mitigation on Hospital Drive
 - e. examine possibilities for shifting the main entrance on St. Michael's Drive further east
 - f. any other traffic concerns related to the implementation of the development
7. For all phases subsequent to the Emergency Room Expansion, close and/or modify driveway entrances at Hospital Drive and St. Michaels Drive as shown on the amended master plan, including modifications to turn lanes on St. Michaels Drive.
8. Provide internal directional signage to guide visitors to exits and to various buildings/hospital services.
9. Helipad facility shall not be relocated without approval of a special exception or master plan amendment.
10. These conditions of approval shall be noted on the master plan, which shall be filed for record with the County Clerk, and which shall replace and supersede the provisions of the original master plan. Except as specified by these conditions, development of the property shall be subject to all other applicable procedures and development standards of City codes.

Added Staff Conditions for July 12 Council Hearing:

11. On-site circulation and signage: For all phases subsequent to the emergency room expansion,

modify internal circulation as shown on the amended master plan to include a ring road. For all phases subsequent to the emergency room expansion, provide internal directional signage to guide visitors to exits and to various buildings/hospital services. On-site circulation and signage should be addressed after the hospital meets with staff to address off-site traffic concerns (above).

12. Also, a 20' wide non-motorized trail easement should be granted to the City along the south and east property lines to accommodate a 10 ft wide paved trail. Exact location should be verified in the field with the City trails and open space coordinator.
13. Address pedestrian and wheel chair access with staff from Camino Teresa and Encino Road on the north side of the campus and from other possible locations along the east side of the campus. The applicant must also address creating access from these locations across the campus to the bus stop, to St. Michael's Drive and to Hospital Drive.

SUMMARY

The Planning Commission voted unanimously at their May 4, 2006 meeting to recommend to the Council that the request for master plan amendment, Case #M 2004-47 be approved. The Commission's recommendation included staff conditions of approval and the condition that the applicant ensure that the neighbors have pedestrian access to the hospital campus. A friendly amendment was added to suggest to the Council that they help resolve with proper notice the issue as to whether applications of this type need a development plan. The Commission determined that the amended master plan would allow the hospital to move forward with an application for expansion of the emergency room which is needed by the community; next, to meet with staff to address mitigation of on-site and off-site traffic issues; and finally, to expand and construct other buildings per the amended master plan.

Staff recommends that that the Council approve the master plan amendment and that hospital be allowed to submit next for development plan for expansion of the emergency room. Upon approval of the development plan, the hospital shall meet with staff to address on-site and off-site traffic circulation, signage and traffic mitigation needs. Applications for other new buildings and additions can not be submitted before the hospital meets with staff to address these on-site and off-site issues. Construction of new buildings and additions of 10,000 sf or more floor area will require a development plan and must be consistent with the new amended master plan.

The original master plan for St. Vincent Hospital was approved in 1985, when the property was rezoned to C-1. Among other provisions of the rezoning approval, was a requirement that a master plan for each phase of development be approved by the Planning Commission. On February 11, 2004, the City Council approved a development plan for a new office building near the northwest corner of the site, with frontage on Hospital Drive (Physician's Plaza of Santa Fe, Cases Nos. M 2003-34 and A 2003-10). The Council was acting on an appeal of the Planning Commission's technical denial of the project on November 6, 2003. (The Commission had attempted to postpone action on the application pending provision of additional information. Because of procedural rules,

the Commission's failure to approve the project resulted in denial. Minutes of the Commission and Council actions are attached.)

In approving the new office building, the Council found that it was consistent with the 1985 master plan. They also directed the hospital to submit for Council consideration by January, 2005, a revised master plan that addressed traffic congestion in the neighborhood. The current application was submitted October 8, 2004, which met the normal deadline for Commission consideration in December and Council action in January. The hearing process was delayed several times while the applicant attempted to schedule additional meetings with neighbors and the City Traffic Engineer. On May 4, 2006 the application was heard by the Planning Commission and approved unanimously with staff conditions.

Among other changes to the 1985 Master Plan, the applicant requests that the specific requirement for each phase to be reviewed by the Planning Commission, be replaced with the standard ENN and development plan provisions of the current code. In other words, construction within 200 feet of residential districts, and over 10,000 square feet of floor area, would be reviewed by the Planning Commission. Construction over 30,000 square feet and located anywhere on the site would be subject to Planning Commission review. A letter from the applicant is attached, outlining specific changes to the conditions of approval as recommended by the Commission and staff.

The applicant has expressed concerns that the review process will affect the financing and construction timeline for a proposed 22,000-square-foot addition to the emergency room. Since the addition is more than 200 feet from property lines, the applicant argues that no development plan or ENN is required, except by the 1985 Master Plan language. As noted above, the applicant requests to eliminate that language.

The October 2004 plans included a barrier at the north end of Hospital Drive that would have blocked access by any traffic except emergency vehicles. That measure was supported by neighbors, but was and is still strongly opposed by the Fire Marshal, Police Chief and Public Works and has been removed from the plans submitted for the Planning Commission and Council hearings. The hospital is preparing for construction of an emergency addition to accommodate the existing volume of emergency service visits. The hospital requests that traffic calming and other traffic mitigation measures be associated with any expansion phase subsequent to the ER addition. The existing emergency room can not handle the current and predicted future patient volume. Expansion of the emergency room, when completed, is not expected to significantly increase traffic although the construction process will create some traffic.

Although the original hospital master plan pre-dates the adoption of the South Central Highway Corridor overlay district, new development will be subject to the corridor standards for setbacks, open space and landscape buffers at residential property lines. Applicability of the corridor standards provides similar protections to those in the original master plan, but in a format that is more easily administered by staff.

The applicant states that the submitted master plan shows all anticipated development over the next 15 years. Detailed analysis of master plan issues is included in the attached 11/06/03 staff report to the Commission.

The master plan proposes an extension of the south entrance on Hospital Drive east to a new turn-around for drop-off at the south side of the proposed emergency room addition. The entrance from St. Michaels would extend north to a new turn-around for drop-off at the south end of the main hospital building. Also proposed is a new driveway drop-off for the existing medical dental building. The ring road is expected to improve circulation throughout the site.

The development of the property will be subject to the Water Allocation and/or Water Offset Retrofit provisions of Ordinance No. 2002-29 and Resolution 2002-55 at the time of permit application or water hook-up request

Attachments:

- Exhibit 1 Draft Master Plan Amendment Resolution written July 7, 2006
- Exhibit 2 Staff Report for Planning Commission with additional correspondence and attachments – May 4, 2006*
 - Exhibit A – Section 14-5.5(A)(3), South Central Highway Corridor Overlay District
 - Exhibit B – City Council Minutes 2/11/04
 - Exhibit C – Staff report 2/11/04, including 11/06/03PC minutes and staff report
 - Exhibit D – ENN report
 - Exhibit E – Original and Revised Master Plans, Traffic Study excerpts*
- Exhibit 3 Draft Planning Commission Minutes – May 4, 2006
- Exhibit 4 Letter from applicant’s attorney and edits to staff’s draft Resolution and conditions

*File copies available for public review at Permit and Development Review offices, First Floor, City Hall

CITY OF SANTA FE, NEW MEXICO

RESOLUTION NO. 2006-___

INTRODUCED BY:

A RESOLUTION

AMENDING THE MASTER PLAN FOR A PARCEL KNOWN AS TRACT A-1, TRACT A-2, TRACT B-1, TRACT B-2-A, TRACT B-2-B, TRACT C AND TRACT D, WITHIN SECTION 36, T 17 N, R 9 E, N.M.P.M., COMPRISING AN AREA OF +/- 47.8 ACRES, LOCATED AT THE NORTHEAST CORNER OF HOSPITAL DRIVE AND ST. MICHAEL'S DRIVE (CASE NO. M 2004-47, ST. VINCENT'S HOSPITAL MASTER PLAN AMENDMENT).

WHEREAS, the agent for the owner of the subject property has submitted an application to amend the St. Vincent's Hospital Master Plan; and

WHEREAS, the Master Plan amendment criteria in the following adopted ordinances and resolutions have been met: 1) Resolution 1985-36 for Adoption of a Master Plan for St. Vincent's Hospital; 2) Ordinance 1985-15 for Rezoning to C-1

WHEREAS, the hospital is expected to address and mitigate various on and off-site traffic issues per the conditions recommended by staff and Council after approval is granted for construction of the emergency room addition and before expanding and constructing any other

1 buildings which are shown on the master plan which are listed in the attached conditions of
2 approval as shown in "Exhibit A" attached hereto.

3 WHEREAS, the applicant must submit for ENN and development plan approval for each
4 phase or sub-phase per Section 14-3.1 (F) and 14-3.8 (A) SFCC 2001.

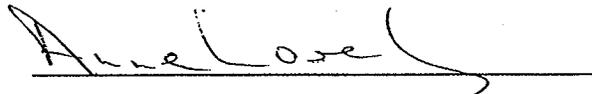
5 NOW, THEREFORE, BE IT RESOLVED BY THE GOVERNING BODY OF THE
6 CITY OF SANTA FE that the Master Plan for Tracts A-1, A-2, B-1, B-2-A, B-2-B, C and D
7 within Section 36, T 17 N, R 9 E, N.M.P.M. is amended as shown in "Exhibit B" attached
8 hereto.

9 PASSED, APPROVED and ADOPTED this ___ day of _____, 2006.

10
11 _____
12 DAVID COSS, MAYOR

13 ATTEST:

14
15 _____
16 YOLANDA VIGIL, CITY CLERK

17
18 APPROVED AS TO FORM:
19
20 
21 FRANK D. KATZ, CITY ATTORNEY

**ST. VINCENT'S HOSPITAL CAMPUS MASTER
PLAN AMENDMENT CONDITIONS OF APPROVAL:**

At their regular meeting of May 4, 2006 the Planning Commission of the City of Santa Fe voted to recommend approval to the City Council of the above referenced request including the following staff conditions of approval:

Staff conditions of approval:

1. New development shall comply with the standards of Section 14-5.5(A)(3), South Central Highway Corridor Overlay District, including 25-foot landscape buffer within 50-foot building setback from residential property lines.
2. "Area 3 Overlay" height limit from original master plan shall continue to apply (maximum building height of 18 feet within 120 feet of northerly residential property line).
3. R-2-zoned portion of the hospital property shall be limited to single-family residential use, parking lot use with minimum 20-foot landscaped setback from all property lines, open space or detention ponding with a depth of three feet or less and side slopes not steeper than 4:1.
4. Make south entrance from Hospital Drive an entrance only. Staff design recommendations may require a triangular bulb-out to prevent right-turn exit and a street island on Hospital Drive to prevent left-turn exit.
5. For all phases subsequent to the Emergency Room Expansion, provide pro-rata participation in traffic calming measures and off-site traffic mitigation measures to the approval of the Public Works Department and the Planning Commission.
6. For all phases subsequent to the emergency room expansion, the developer will be required to assess certain off-site traffic operations and provide mitigation measures where needed. These improvements are listed in an Engineering Division traffic memo which was handed out as additional correspondence at the May 4, 2006 Planning Commission meeting and may include:
 - improvements to the intersection of Hospital Drive and Galisteo Road
 - traffic mitigation at the intersection of San Mateo and Galisteo
 - all existing and proposed access points to the development
 - traffic improvements/mitigation on Hospital Drive
 - examine possibilities for shifting the main entrance on St. Michael's Drive further east
 - any other traffic concerns related to the implementation of the development
7. For all phases subsequent to the Emergency Room Expansion, close and/or modify driveway entrances at Hospital Drive and St. Michaels Drive as shown on the amended master plan, including modifications to turn lanes on St. Michaels Drive.

8. Provide internal directional signage to guide visitors to exits and to various buildings/hospital services.
9. Helipad facility shall not be relocated without approval of a special exception or master plan amendment.
10. These conditions of approval shall be noted on the master plan, which shall be filed for record with the County Clerk, and which shall replace and supersede the provisions of the original master plan. Except as specified by these conditions, development of the property shall be subject to all other applicable procedures and development standards of City codes.

City of Santa Fe, New Mexico

memo

DATE: Prepared April 26 for May 4, 2006 meeting

TO: Planning Commission members

VIA: Jim Montman, Acting Director, Planning and Land Use / *JS*
Jim Salazar, Director, Permit & Development Review
Greg Smith, Supervising Planner, Permit & Development Review *JS*

FROM: Andrew Harnden, Planner Supervisor, Permit & Development Review *AH*

ITEM AND ISSUES

Case #M 2004-47 St. Vincent Hospital Campus Master Plan. The Design Group, agent for St. Vincent Hospital, requests consideration of a master plan for the St. Vincent Hospital Campus located at 455 St. Michaels Drive. The plan would serve as a general guide to future development of the hospital campus. The property is zoned C-1 (Office and Related Commercial). The site encompasses a total of approximately 47.8 acres and is located at the northeast corner of St. Michael's Drive and Hospital Drive.

RECOMMENDATION

The Commission should recommend that the Council approve the amended master plan, subject to the following conditions:

1. New development shall comply with the standards of Section 14-5.5(A)(3), South Central Highway Corridor Overlay District, including 25-foot landscape buffer within 50-foot building setback from residential property lines.
2. "Area 3 Overlay" height limit from original master plan shall continue to apply (maximum building height of 18 feet within 120 feet of northerly residential property line).
3. R-2-zoned portion of the hospital property shall be limited to single-family residential use, parking lot use with minimum 20-foot landscaped setback from all property lines, open space or detention ponding with a depth of three feet or less and side slopes not steeper than 4:1.
4. Make south entrance from Hospital Drive an entrance only. Staff design recommendations may require a triangular bulb-out to prevent right-turn exit and a street island on Hospital Drive to prevent left-turn exit.

5. For all phases subsequent to the Emergency Room Expansion, provide pro-rata participation in traffic calming measures and off-site traffic mitigation measures to the approval of the Public Works Department and the Planning Commission.
6. For all phases subsequent to the Emergency Room Expansion, modify internal circulation as shown on the amended master plan.
7. For all phases subsequent to the Emergency Room Expansion, close and/or modify driveway entrances at Hospital Drive and St. Michaels Drive as shown on the amended master plan, including modifications to turn lanes on St. Michaels Drive.
8. Provide internal directional signage to guide visitors to exits and to various buildings/hospital services.
9. Helipad facility shall not be relocated without approval of a special exception or master plan amendment.
10. These conditions of approval shall be noted on the master plan, which shall be filed for record with the County Clerk, and which shall replace and supersede the provisions of the original master plan. Except as specified by these conditions, development of the property shall be subject to all other applicable procedures and development standards of City codes.

SUMMARY AND EVALUATION

BACKGROUND

The original master plan for St. Vincent Hospital was approved in 1985, when the property was rezoned to C-1. Among other provisions of the rezoning approval, was a requirement that a master plan for each phase of development be approved by the Planning Commission.

On February 11, 2004, the City Council approved a development plan for a new office building near the northwest corner of the site, with frontage on Hospital Drive (Physician's Plaza of Santa Fe, Cases Nos. M2003-34 and A 2003-10). The Council was acting on an appeal of the Planning Commission's technical denial of the project on November 6, 2003. (The Commission had attempted to postpone action on the application pending provision of additional information. Because of procedural rules, the Commission's failure to approve the project resulted in denial. Minutes of the Commission and Council actions are attached.)

In approving the new office building, the Council found that it was consistent with the 1985 master plan. They also directed the hospital to submit for Council consideration by January, 2005, a revised master plan that addressed traffic congestion in the neighborhood. The current application was submitted October 8, 2004, which met the normal deadline for Commission consideration in December and Council action in January. The hearing process was delayed several times while the applicant attempted to schedule additional meetings with neighbors and the City Traffic Engineer.

The October 2004 plans included a barrier at the north end of Hospital Drive that would have blocked access by any traffic except emergency vehicles. That measure was supported by neighbors, but was and is still strongly opposed by the Fire Marshal, Police Chief and City Traffic Engineer, and has been removed from the plans submitted for the Commission hearing. The

hospital is preparing for construction of an emergency addition to accommodate the existing volume of emergency service visits. The hospital requests that traffic calming and other traffic mitigation measures be associated with any expansion phase subsequent to the ER addition.

Although the original hospital master plan pre-dates the adoption of the South Central Highway Corridor overlay district, new development will be subject to the corridor standards for setbacks, open space and landscape buffers at residential property lines. Applicability of the corridor standards provides similar protections to those in the original master plan, but in a format that is more easily administered by staff.

Detailed analysis of master plan issues is included in the attached 11/06/03 staff report to the Commission.

MASTER PLAN SUBMITTED FOR MAY 4, 2006 PLANNING COMMISSION HEARING

The applicant states that the submitted master plan shows all anticipated development over the next 15 years.

Traffic Circulation:

The applicant's proposed master plan for this Commission hearing satisfies the main staff concerns re. traffic circulation in the immediate vicinity and within the hospital property. The applicant has agreed with staff to make the south entrance from Hospital Drive an entrance only. Staff design recommendations may include a triangular bulb-out to prevent right-turn exit and a street island on Hospital Drive to prevent left-turn exit. This entrance will extend east to a new turn-a-round for drop-off at the south side of the proposed emergency room addition. The entrance from St. Michaels will extend north to a new turn-a-round for drop-off at the south end of the main hospital building. Also proposed is a new driveway drop-off for the existing medical dental building. The ring road is expected to improve circulation around throughout the site.

Signage:

The proposed masterplan includes new signage and landscaping at existing entrances on St. Michael's Drive and Hospital Drive. Staff has advised that improvements to the St. Michael's Drive entrance should be intended to direct a large portion of traffic to that entrance. Internal signage will be placed to direct visitors to exists and to various hospital buildings and services.

Traffic Calming:

The emergency room expansion is not expected to significantly increase traffic. The existing emergency room can not handle the current and predicted future patient volume. Staff recommends (see above) that upon completion of the proposed Emergency room addition and before any other expansion, the applicant install traffic calming measures on Hospital Drive and potentially at Hospital Drive and Galisteo. The applicant should meet with staff after approval of the masterplan

to determine whether a traffic circle is feasible at Hospital Drive and Galisteo. A financial contribution to a traffic circle at Galisteo and San Mateo may also be required if the neighborhood and City decide that it be constructed. Staff may also require a raised or street-level pedestrian crosswalk across Hospital Drive north of Harkle Road. The applicant is expected to meet with City staff after approval of the master plan in order to determine appropriate traffic calming measures. Traffic Calming measures are to be to the approval of City Engineering, based on a revised final TIA.

The traffic calming process is underway with traffic engineering and neighbors on San Mateo and Don Gaspar Streets to bring excessive speeds down to the speed limit. No specific plan has been adopted to date for these streets. Traffic calming proposed for the hospital master plan should be compatible with whatever plan is developed by the city staff and neighbors for these streets.

Attached: Exhibit A – Section 14-5.5(A)(3), South Central Highway Corridor Overlay District
Exhibit B – City Council Minutes 2/11/04
Exhibit C – Staff report 2/11/04, including 11/06/03PC minutes and staff report
Exhibit D – ENN report
Exhibit E – Original and Revised Master Plans, Traffic Study excerpts*

*Enclosed in Commissioners' agenda packets. File copies available for public review at Permit and Development Review offices, First Floor, City Hall

City of Santa Fe, New Mexico

memo

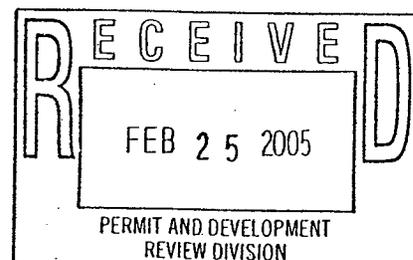
Date: February 18, 2005

To: Greg Smith

From: David J. Webb, Crime Prevention Officer
Santa Fe Police Department *DJW*

Subject: Case # M 2004-47

- In review of master plan, suggestions are to make sure roadways are wide enough for Fire, Ambulance and Police to have enough access to travel through roadways without difficulty with vehicles that would be parked curbside.
- Lighting should be installed to light any and all doors to the building and window areas, as well as parking lot areas. This of course would have to be in accordance with city code for light pollution.
- Landscape: any trees and shrubs should be placed in areas where lines of visibility are not obstructed from both inside to outside and outside to inside. Such landscape should not offer concealment of any kind for possible crime to occur.
- Any design and color of walls and building should be that of soft or earth tone colors. Bright colors would invite uneasy behavior and would invite crime. Areas where courtyards would be placed should have limited access and gates should be designed to where passerbys could see in. (Invite natural surveillance.)
- Buildings should be marked with addresses and building letters or numbers, easy for emergency personnel to find and determine building locations.



City of Santa Fe, New Mexico

memo

Date: January 3, 2005

To: Andrew Harnden

From: Officer David Webb *DW*
Santa Fe Police Crime Prevention

Subject: Case #M 2004-47

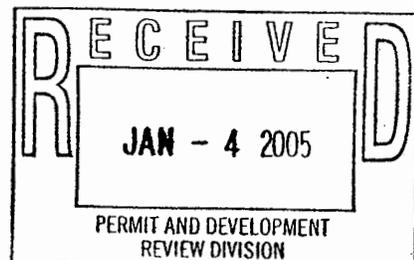
In review of the request, all comments from Crime Prevention Unit are the following:

Make sure all driveways and roadways are wide enough for emergency vehicles, i.e. Fire Trucks, Police Vehicles, and Ambulances.

Addresses are clearly visible;

A Security Survey should be done so that suggestions could be given as far as where to place security lighting and landscaping.

Colors of buildings should be that of earth tone calming colors and landscape or outside decorations be designed so that it attracts passer by's for that natural surveillance.



City of Santa Fe, New Mexico

memo

Date: April 19, 2006

To: Andrew Harnden, Senior Planner

From: Randall Thompson, Senior Planner 

Subject: Case #M 2004-47. St. Vincent Hospital Campus Master Plan. The Design Group, agent for St. Vincent Hospital, requests consideration of a master plan for the St. Vincent Hospital Campus located at 455 St. Michaels Drive. The plan would serve as a general guide to future development of the hospital campus. The property is zoned C-1 (Office and Related Commercial). The site encompasses a total of approximately 47.8 acres and is located at the northeast corner of St. Michael's Drive and Hospital Drive.

The City's adopted Trails Master Plan shows a corridor for an urban trail along the arroyo located on the east side of St. Vincent's Hospital. Proposed revisions to the Trails Master Plan show the trail south of St. Michael's Drive being realigned away from the arroyo at Bultolph Road and running along the north side of St. Michael's Drive and tying back into the arroyo on the hospital property.

Therefore, as a condition of approval staff requests that a 20' wide non-motorized trail easement be granted to the City of Santa Fe along the south and east property lines of St. Vincent Hospital property. An exact alignment can be marked in the field to the mutual satisfaction of the City's Trail & Open Space Coordinator and a Hospital representative, prior to filing the Campus Master Plan.

City of Santa Fe, New Mexico

memo

DATE: May 1, 2006

TO: Andrew Harnden, Senior Planner
Permit and Development Review Section

FROM: John Romero, Public Works Department/Engineering Division *JR*

SUBJECT: Case #M-2004-47, St. Vincent Hospital Campus Master Plan

ISSUE

Request for consideration of a master plan for the St. Vincent Hospital Campus located at 455 St. Michaels Drive. The plan would serve as a general guide to future development of the hospital campus. The property is zoned C-1 (Office and Related Commercial). The site encompasses a total of approximately 47.8 acres and is located at the northeast corner of St. Michael's Drive and Hospital Drive.

RECOMMENDED ACTION:

Review comments are based on submittals received on April 27, 2006. The comments below should be considered as Conditions of Approval to be addressed in a satisfactory manner prior to final signoff unless otherwise indicated below:

1. The emergency room expansion is not expected to significantly increase traffic being that the proposed expansion is intended to accommodate the existing patient load. Because of this, the Public Works Department does not feel that the developer is responsible for making major improvements to City streets at this time. The developer will be required, during development of subsequent phases, to assess all off-site traffic operations and provide mitigation measures where needed. These improvements may include improvements to the intersection of Hospital Drive and Galisteo Road, all existing and proposed access points to the development, traffic calming on Hospital Drive, and any other traffic concerns related to the implementation of the development.
2. The proposed master plan designates the development's southern entrance onto Hospital Drive as an entrance only. The intent of this is to direct the majority of traffic exiting the hospital towards a primary access point onto St Michael's Drive. Because of the amount of traffic this would direct towards this access point, the Public Works Department would like the developer to evaluate moving this primary access further towards the east of where it is shown on the proposed master plan. This would provide for better access spacing on St Michael's Drive.

If you have any questions or need any more information, feel free to contact me at 955-6638.
Thank you.

M:\Traffic\TRAFFIC IMPACTS\DR1\2005\St. Vincents Hospital MP\St Vincent 05-01-06.doc

- (1) If 75 percent or more of the gross floor area of a building is devoted to nonresidential permitted uses in this district, not more than 3,000 square feet shall be used for such nonresidential purposes;
- (2) If less than 75 percent of the gross floor area of a building is devoted to nonresidential permitted uses in this district, not more than 1,500 square feet shall be used for such nonresidential purposes; and
- (3) Structures used for residential purposes shall conform to the same density requirements as the underlying zoning district.

(Ord. No. 2001-38 § 2)

14-5.5 HIGHWAY CORRIDOR PROTECTION DISTRICTS

(A) South Central Highway Corridor Protection District

(1) Intent

Because openness, quiet, and continuity adjoining the highway corridors in the south central section of the city is considered a special asset that should be retained as the area develops, it is the intent of the South Central Highway Corridor ordinance to:

- (a) Establish a clear sense of visual openness and continuity of development, as seen from major highway entrances to Santa Fe;
- (b) Protect the openness and continuity of the existing landscape by retaining and planting native and other drought-tolerant trees, shrubs, and groundcovers, encourage the use of architectural style and scale that is representative of Santa Fe, and preserve clean air and a sense of quiet; and
- (c) Specifically insure that landscaping provides an appropriate and attractive visual buffer, compatibility with neighborhood landscaping character, conservation of water by use of storm water collection and drip irrigation or other systems, plants which require low maintenance, screening of transformers and loading areas or outdoor storage, and the reduction of the potential negative impacts of noise, air pollution, lights, movement of cars, activities on site or other nuisances on adjoining properties.

(2) Boundaries

- (a) The South Central Highway Corridor Protection district encompasses the lands within 600 feet of the edge of the right-of-way of both sides of the following streets designated as special

review districts in the General Plan in the south central section of the City: St. Michael's Drive, Old Pecos Trail, St. Francis Drive, Rodeo Road, and Interstate 25 and its frontage roads. In cases where the rear lot line depth exceeds the 600 feet boundary a property owner shall have the right to petition the Governing Body at any time for inclusion of his or her property in the Highway Corridor Protection district as a rezoning application. A map of the South Central Highway Corridor Protection district is provided as Exhibit "G" at the end of this chapter, and is shown in the General Plan.

- (b) Persons with property divided by the South Central Highway Corridor Protection district boundary are required to comply with the district standards only for that segment of the property within the boundary or as adjusted as described above.

(3) General Standards

Any development on a previously vacant lot, or any complete redevelopment of a previously developed lot, shall comply with these standards and landscape standards per paragraph (4) below. For purposes of this section "complete redevelopment" shall be removal of all existing buildings on a lot prior to the construction of any new buildings.

- (a) The minimum building setback from the edge of the right-of-way from the street shall be 50 feet;
- (b) The maximum building height shall be 25 feet, not including a parapet;
- (c) The maximum density for residential development shall be 21 units per acre;
- (d) For any nonresidential permitted use, a minimum of 35 percent of the lot and for any residential permitted use a minimum of 50 percent of the lot shall be open space, which shall meet all the requirements set forth in §14-8.4(H).
- (e) The maximum floor area ratio for office, and for professional, and medical office uses allowed in the district are:

*Editor's Note: Exhibit "G", referred to herein may be found in the Appendix at the end of this chapter.

TABLE 14-5-5-1: Maximum Floor Area Ratio		
Building Use	Building Size	Maximum Ratio
Office	One story	0.25
	Two story	0.35
Medical Office	One story	0.20
	Two story	0.30

- (f) For educational, hospital, institutional, and other uses allowed in the district, the open space, setback, and landscaping standards set forth in this section shall apply;
- (g) The uses permitted in this district are those consistent with the policies set forth in the General Plan;
- (h) Loading areas shall be screened and located on side or rear yards;
- (i) Outdoor storage shall not be allowed in the district;
- (j) Access to the property shall be approved by the City Engineer and as shown on the development plan;
- (k) The off-site impact of site-generated traffic shall be based on a study performed by the developer utilizing the latest edition of the Highway Capacity Manual. The results of the corresponding impacts shall be evaluated relative to the computed levels of service at various time frames and durations as defined by the manual. A plan for mitigating any adverse impacts shall be proposed by the developer and approved by the City Traffic Engineer prior to the issuance of any building permits. The Traffic Mitigation Plan shall be based on the results of the traffic impact study and shall include proposed improvements, a cost estimate, a construction schedule and the extent of participation by the proposed development;
- (l) New half or partial streets shall be prohibited in new developments. When a tract to be developed borders an existing street having a right-of-way width insufficient to conform to the minimum width standards required by these regulations, such additional right-of-way shall be platted and dedicated in such a way as would make the resulting street conform;
- (m) When nonresidential uses abut R-1 through R-7 residential densities, the following standards shall apply:

- (i) All of the structures for the nonresidential uses shall be set back 50 feet from the residential property line and a 25-foot landscape buffer meeting the standards set forth in paragraph (4) below shall be located between the residential and nonresidential uses; or
 - (ii) All of the structures for the nonresidential uses shall have a 25-foot landscape buffer meeting the standards set forth in paragraph (4) below and masonry wall or a fence as approved by City staff, located between the residential and nonresidential uses.
- (n) While it is not the purpose and intent of this section to require that existing, nonconforming buildings and parking lots be modified or altered, it is the purpose and intent of this section that additions to existing buildings and expansions to existing parking lots in no way increase, or in any way intensify, a nonconforming situation.
- (4) Landscaping Standards
- (a) To the greatest extent possible existing natural landscaping shall not be disturbed within 25 feet of the property line that adjoins the street right-of-way. This area shall be labeled as open space setback. No structures, fences, walls or parking are allowed in this setback;
 - (b) Plant material shall be provided in the open space setback where that area has been disturbed and shall be provided for surrounding buildings and parking areas at a minimum width of five feet. The intensity of landscaping shall be 2 plants per 30 square feet of required landscaped area. One-half of the vegetation shall be at least five-gallon size and one-half shall be at least one-gallon size at the time of planting. Trees shall be minimum one and one-half-inch caliper at time of planting and be a minimum of 10 percent of the total planting. If parking is provided in the front setback it shall be effectively screened by earth berms or landscaping which shall be at least four feet above parking lot grade; and
 - (c) In order to preserve natural landscaping on the banks of the arroyos, an undisturbed setback of 10 feet shall be retained next to the major arroyos where one hundred-year flood plains have been recorded. Terrain management regulation as set forth in this chapter are applicable to any development in the South Central Highway Corridor Protection district.

(5) Architectural Standards

All structures in the South Central Highway Corridor District, other than those set forth in §14-3.10(C)(1)(b), shall meet the Architectural Design Review regulations as set forth in §14-8.7 of this chapter. (Ord. No. 2002-37 § 33)

(6) Required Information

In the South Central Highway Corridor Protection district, applicants for any new development on a previously vacant lot, or any complete redevelopment of a previously developed lot shall submit, in addition to the requirements set forth in this chapter, the following information:

- (a) A development plan drawn to scale showing drainage; significant natural features; access including access to major arterials; arrangement, uses, and dimensions of buildings; parking and loading; landscaping, walls and fences; floor area ratio; open space; setbacks; and existing adjacent land uses of abutting property; and
- (b) Developers requesting approval of residential projects with 50 units or more, or commercial projects with over 10,000 square feet, within the South Central Highway Corridor Protection Zone shall submit, as part of the application for development plan approval, a traffic impact statement for the proposed development. The statement shall provide data on the traffic generated by the proposed development. Using the existing traffic counts generated by the city and other sources, and the methods set forth in the highway resource board's special report 87, highway capacity manual, the statement shall also show the traffic impact on the city's relevant traffic network. The relevant traffic network includes all the subcollectors and collectors from the point of the origin at the proposed development up to and including intersections with secondary or major arterials. The statement must show the impact of the proposed development on the level of service of the relevant streets in the traffic network. Level of service refers to the categories A through F set forth by the highway capacity manual.

(B) Cerrillos Road Highway Corridor Protection District

(1) Purpose and Intent

- (a) Cerrillos Road is one of Santa Fe's busiest thoroughfares, one of the City's primary entranceways, and one of the community's major commercial strips. For this reason, it is the purpose and

CITY COUNCIL
MINUTES

2.11.04

Councilor Heldmeyer noted that Type A affordable housing is only 70% affordable. She asked Mr. Smith if, because the Council cannot require it to be a Type A development at this point in the process, the developer could conceivably come back later and request something else.

Mr. Smith responded that the affordability requirements would have to be imposed at the time of annexation and rezoning, and agreed with Councilor Heldmeyer that the Council could deny the request at that point if it didn't like the project.

Councilor Wurzbarger commented, "Just because I need to perhaps beat this to death — I mean, I hope you're hearing that it's 'if, if, if.' Again, this was brought back to us because of the water availability issue. I just want it to be really clear. I mean, unless you're coming in tomorrow afternoon — and even then we don't know that we have water for this project — it's almost like a buyer beware situation if one were in a different kind of market."

Councilor Coss moved for approval. Councilor Wurzbarger seconded the motion, which passed on the following Roll Call vote:

For: Councilor Heldmeyer; Councilor Lopez; Councilor Ortiz; Councilor Pfeffer; Councilor Wurzbarger; Councilor Bushee; Councilor Chavez; Councilor Coss.

Against: None.

Case #A 2003-10 – APPEAL. Physicians Plaza of Santa Fe. The Governing Body of the City of Santa Fe will Consider an Appeal by Gary Frank, M.D., Individually and as a Representative of St. Vincent Hospital, of the Decision Made by the Planning Commission at Their Meeting on November 6, 2003, to Deny Case #M 2003-34 — Physicians Plaza of Santa Fe Development Plan. The Property is Located Adjacent to the St. Vincent Hospital, Bounded on the West by Hospital Drive. The Property is Zoned C-1 (Office and Related Commercial).

City Planner Derrick Archuleta reported as follows: "Dr. Gary Frank and St. Vincent Hospital are requesting that the Governing Body reverse the decision of the Planning Commission and approve the development plan, subject to conditions of approval as recommended by staff and agreed to by the applicant.

"Physicians Plaza is proposed to consist of a two-story 52,000 gross square-foot medical office building on two tracts of land adjacent to St. Vincent Hospital. The project proposes to include an ambulatory surgery center, surgeons offices and allied outpatient services. The site is also part of the St. Vincent Hospital

campus master plan adopted in 1985. The master plan encompasses 40.3 acres and was designed to provide for the current and long-range needs of the hospital campus, serving as a guide for future development.

“Development activities within the master plan are subject to locational criteria and standards for uses, which are set forth and defined in the plan. The site is also designed as Public Institutional on the Future Land Use Map of the 1999 General Plan.

“At the November 6, 2003, Planning Commission public hearing, a motion to approve the development plan failed five to three. A second motion was made to postpone the request until a revised master plan of the St. Vincent Hospital campus master plan was completed that included parking and considering a beltway within the site, which begins and ends at St. Michael's Drive, as a method to alleviate traffic from adjacent neighborhoods. This motion passed eight to zero.

“At the November 20, 2003, Planning Commission public hearing, subsequent motions were made regarding the request. The Planning Commission felt the need to revisit the case because it had been suggested that Robert's Rules of Order were not followed on November 6. On November 20, the Planning Commission postponed the request to the May 6, 2004, public hearing with a friendly amendment that allowed the request to be considered earlier if the master plan was updated. This motion passed unanimously.

“As per the interpretation of the City Attorney, the November 6 vote to defeat the motion to approve has the effect of denying the application and should be considered final action. Under that interpretation, the action taken on November 20 would not be in order.

“In terms of the appeal issues, the appellant states that compliance with the current Santa Fe City Code and the St. Vincent Hospital campus master plan have been achieved and did not warrant denial on November 6. The Planning Commission's subsequent actions on November 20 have also been included as a basis for appeal, since this did not include notification to the applicant that the case would be discussed, nor did it appear on the Planning Commission agenda.

“In terms of community impacts, the proposed development will provide outpatient services with daytime operation only. Site selection and location for this project is an effort by the developer to remain in close proximity to St. Vincent Hospital. There were two ENNs held for this project, one on June 25 and the other on August 5, 2003. Neighborhood concerns at the June meeting specific to this project revolved around height, views, screening, noise, lighting, architecture and traffic. In an effort to address neighborhood concerns, the applicant held a second meeting in August to present an amended project, which the applicant will cover in detail as to how those changes are reflected in the current application. The applicant has also participated in City-sponsored traffic

meetings and is willing to work with the City and St. Vincent Hospital in a proportionate share of the responsibility.

“There still remain neighborhood concerns over the St. Vincent campus master plan specific to traffic flows internally and externally, in addition to enhancing the St. Michael’s access. The hospital states that they are in the initial stages of updating the plan with the intention of addressing those issues as part of the update, but contend that this request should not be held up until the update is completed.

“In terms of site planning and site development plan review, the project complies with the density, zoning and land uses established by the underlying zone and the master plan. No variances are being requested to the zoning or the master plan.

“A traffic impact study was prepared for this request and was amended in September. The development will add traffic to adjacent streets of Hospital Drive and St. Michael’s Drive. As a method of alleviating the impact from development, the applicant has been involved with several meetings that include traffic circles, intersection improvements, pedestrian crosswalks and traffic calming devices. All parking will be provided on site with any use of existing hospital parking. Total parking will include 224 spaces. There will be no designated parking along Hospital Drive. There are no major grading and drainage issues. The project is served by a complete range of urban services.”

Responding to questioning from Councilor Ortiz on a procedural matter, City Attorney Bruce Thompson stated that, after denying the development plan, the Planning Commission went back and voted to postpone the matter until May, but it was his opinion that the Planning Commission’s denial was the final action of the Planning Commission. He stated that, although they went back at a later point and attempted to undo what they had done, the appeal intervened and stopped their attempt to reconsider their denial of the request. He said it was his opinion that the Council was here on the denial of the request by the hospital.

Disclosure issue.

Councilor Chavez disclosed that he met with St. Vincent Hospital representatives and board members, and also stated that his wife is an employee of St. Vincent Hospital, and asked the City Attorney and Councilors whether in their opinion that constituted a conflict of interest.

Mr. Thompson responded that Councilor Chavez should disqualify himself if he made any representation with respect to his position while meeting with hospital representatives and the hospital board.

Mr. Thompson stated that, if there has been pressure brought to bear, or Councilor Chavez feels he has a financial advantage because of his wife's situation, he should probably disqualify himself.

Mr. Thompson stated, "If you feel that you can be fair, that you have formed no opinion, and the fact that your wife works for the hospital doesn't influence your position, then I believe there is no problem with your participation."

Councilor Chavez said he thought he could be fair and impartial. He stated that, in his meetings with the St. Vincent Hospital staff and their board of directors, he did not offer any opinion and just listened to what they had to offer.

Addressing the financial issue, Councilor Chavez said he did not feel that there was a conflict. He said his wife is a salaried employee at St. Vincent Hospital, and neither of them has entered into any contractual agreement to provide services for St. Vincent Hospital.

Councilor Ortiz stated that the Ethics Ordinance states that a conflict of interest exists "where there is the appearance or an actual financial or contractual relationship." He said, "If Councilor Chavez's wife is a salaried employee of St. Vincent Hospital, the appellant tonight, and Councilor Chavez's wife reports, if not directly, at least through the chain of command, to Dr. Lucas, another appellant in this case, I believe, based upon that information and based upon the City Attorney's opinion to us last year, which is different from what I heard now, I believe he's got a conflict of interest."

Councilor Ortiz moved to recuse Councilor Chavez. Councilor Wurzburger seconded the motion.

Councilor Wurzburger said she had seconded the motion because she was confused about the difference between the case the Council heard last year, when Councilor Chavez did recuse himself because his wife worked for the hospital, and this case. She said she saw no difference.

Councilor Lopez spoke against the motion. She said she did not think Councilor Chavez had a direct financial interest and therefore should not recuse himself. She pointed out that he has indicated he feels he can be fair and impartial, and she would take him at his word.

Councilor Bushee said she assumed Councilor Ortiz no longer had a contractual obligation or commitment with any part of St. Vincent Hospital, then, and Councilor Ortiz said that was correct.

The motion was defeated on the following Roll Call vote:

For: Councilor Ortiz; Councilor Pfeffer; Councilor Wurzburger.

**Against: Councilor Lopez; Councilor Bushee; Councilor Chavez;
Councilor Coss; Councilor Heldmeyer.**

In casting his vote, Councilor Ortiz said, "To have your wife work for the appellant that's in front of you, including your wife's boss, is an actual conflict — it's not even an appearance of conflict."

Other disclosures.

Mayor Delgado said he met with the "people from St. Vincent Hospital" and listened to the information they provided, "and I gave them no direction in any way." He said he could be "very fair" in voting.

Councilor Wurzburger disclosed that she met for about 20 minutes with members of St. Vincent Hospital, and asked no questions and made no comments other than to impose a time limit on the meeting and to have a secretary take minutes. She said the minutes would reflect that she offered no opinion.

Councilor Heldmeyer disclosed that she met with a group of St. Vincent Hospital people along with Councilor Wurzburger and Councilor Ortiz, and it was not within the seven-day period when one is not supposed to meet with people who are bringing an appeal. She said she expressed no opinions at the meeting.

Councilor Pfeffer said he didn't meet with anyone.

Councilor Lopez stated that she met with members of the hospital board, including Gene Valdez, in December. She said, "I gave no indications. I did ask questions, including on the status of the employees. I feel that leaves me fair and impartial."

Councilor Bushee asked Mr. Thompson to comment on the need to disclose these meetings if they did not fall within the seven day period prior to the appeal.

Mr. Thompson responded that a seven-day rule was adopted at one time, "but I don't know the basis for it. I think that any time there's *ex parte* communication with a member of the Council, it needs to be disclosed whether it's within the seven day period or outside the seven day period."

Councilor Bushee disclosed that she met with a small group of individuals, but no commitments were made and she offered no opinion.

Councilor Coss disclosed that he met with the board and some of the doctors, and had asked that Assistant City Attorney Anne Lovely sit in on the meeting. He said he also received phone calls and even a visit from various members of the board, none within the seven-day period, and he made no representations or promises.

Councilor Ortiz disclosed that he participated in the meeting with Councilor Heldmeyer and Councilor Wurzbarger and did not offer an opinion.

Councilor Bushee stated that she received emails from people who said they lived in the neighboring area, and she printed them out and had them with her tonight.

This concluded disclosure comments.

Mark Basham, attorney representing the appellants, was sworn.

Mr. Basham said St. Vincent Hospital is the landowner for what will be called Physicians Plaza of Santa Fe, a physician-owned medical office building located on land leased from the hospital on the St. Vincent campus. He said Physicians Plaza would consist of numerous physician group users, one use of which will be a state-of-the art ambulatory surgical center, of which St. Vincent will have a minority interest. He stated that St. Vincent would have no other ownership interest in any of the other uses in the building or in the building itself.

Mr. Basham continued, "This project has been in the planning stages for over two years. The project has proceeded through the required steps of the City's development plan approval and ENN processes since June 2003, culminating in a unanimous recommendation for project approval to the Planning Commission by the following City departments: Planning and Land Use; Public Works, which includes the Traffic Division, Special Projects Administrator, Landscaping, Wastewater, Solid Waste, the Fire Marshal and the Neighborhood Assistance Facilitator. In the report, staff cited complete compliance of the proposed project with the underlying zoning and the master plan requirements for the area. In fact, there are numerous examples of where the project has gone well beyond the stated requirements to more than comply with all such restrictions so as to be more than fully compliant.

"Despite the application's compliance with all requirements, at the Planning Commission hearing on November 6, 2003, the Planning Commission, contrary to staff's recommendations, voted five to three to deny the development plan application for Physician's Plaza of Santa Fe.

"In supplemental attempts that night, and again at the November 20, 2003 Planning Commission meeting, the Commission took steps to try to delay any further action on the project until St. Vincent Hospital revised its master plan. Despite such actions, the City has determined that there was a final decision by

the Planning Commission denying the application, which permitted the filing of this appeal.

“Based on the above facts, we have appealed to this Council to reverse the arbitrary and unfounded denial of the application by the Planning Commission. We feel that your favorable vote on this matter tonight is justified for the following legal and practical reasons.

“First, the project as proposed is fully compliant with the zoning for the site.

“Two, the project not only meets, but exceeds, the requirements of the approved master plan governing the site.

“Three, there is no statutory or code requirement that St. Vincent Hospital amend its master plan relative to the approval of this project as the project already complies with the plan and the plan remains valid. As stated in Judge Hall’s recent ruling in a similar land use case, quote, the existence of a review and approval procedure alone cannot grant unlimited authority to deny or condition approval of activities permitted under the applicable ordinances. The review and approval requirement must be viewed as the ability to review applications to determine their compliance with existing requirements, not the opportunity to add new requirements.

“Now, although Judge Hall’s ruling is not binding precedent, his reasoning is sound and is backed by New Mexico Appellate Court precedent. In Eldorado v. Board of County Commissioners, the New Mexico Court of Appeals dealt with a situation where a developer came in for a subdivision approval after it was determined that he complied with all the requisite statutory and county code provisions. The board approved half of his subdivision, requiring him to come back for additional approval once he had sold half of his lots. This requirement was not contained in State Statute or County Code. The developer bit his tongue and complied.

“After selling half the lots, the developer came back for approval for the second half of his subdivision. Once again, the board only approved a certain percentage, telling the developer to come back when that percentage was sold. This time, rather than biting his tongue, the developer sued the County in district court and initially obtained a writ of mandamus, which is a court order directing — and in that case, the County — to approve the subdivision plat. After a state district court hearing on the writ of mandamus, wherein the County argued that it is under no clear legal duty to do the act commanded, as such acts were discretionary and semi-judicial, the district court judge quashed the writ.... The developer appealed the quashing of the writ. The New Mexico Court of Appeals reversed the district court, stating, quote, we conclude that under these statutes, nothing remained for the board to do that the ministerial act of endorsing their approval on the plat, which had complied with all the statutory requirements. Clearly, mandamus was a proper remedy when it refused to do so. Close quote.

"My point here is, quite simply, any attempt to require the applicant to amend its master plan for this development is impermissible and unlawful. As such, there is no legal or practical basis for denial by the Planning Commission. The Commission's denial was motivated by non-land use issues and by unrelated audience comments about the helicopter service to the hospital campus, all of which have absolutely nothing to do with this development plan application.

"This project is not seeking any variances, special exceptions, or any other modifications to its underlying zoning, or any other ordinances or codes governing the site. The project has been thoroughly reviewed and adjusted by City departments to meet with their requirements in all respects, including traffic mitigation measures. In the words of Monica Montoya, quote, it is staff's opinion that the communication process among the applicant, immediate neighborhood, and the applicable neighborhood association, was thorough and more than complied with the intent of ENN ordinances. Close quote. The project made numerous changes to more than accommodate the concerns of the neighbors."

Mr. Basham stated that denying this project would "result in a chain reaction of the loss of surgeons to Santa Fe; a deterioration of the quality and availability of health care in the community, and a significant loss of health care related jobs."

Mr. Basham stated that an anonymous letter was delivered to each member of the Governing Body yesterday, opposing this appeal. He asked that Governing Body members disregard it in their deliberations tonight, because otherwise it could provide a basis for a claim by the applicant that its due process rights were violated.

Andrew Scheer [spelling unknown], Development Solutions Group, representing the physician owners of the project, was duly sworn. He clarified that the project is a physician-owned private medical office building and it is not owned by the hospital. He said 18 local physicians would own the facility, not the land, which will be leased by the hospital to the partnership on a 60-year land lease. He said the hospital would retain ownership of the land and building at the end of 60 years, although the hospital could ask the owner at that time to demolish the building.

Mr. Scheer reviewed a site plan. He stated that there would be calming and constriction of Hospital Drive northbound to discourage traffic from moving through the neighborhoods. Referring to a graphic of the project, he said they have exceeded all requirements: "The building is shorter, set back further, less dense, and has fifty percent more open space than is required under the master plan." He described their responsiveness to neighborhood input, where they made substantial revisions to the project and then took it back to the neighbors for additional input. He said the architect, Paul Flehmer, walked the property with all of the immediately adjacent neighbors to the north: "He met with them, walked

in their backyards, looked at views individually, revised the landscaping plan to move individual trees to preserve views of the mountains. And we've stepped back the building to accommodate some of those views."

Mr. Scheer stated that the physicians present in the audience tonight and the 100 physicians who signed letters submitted to the Governing Body "represent about four jobs each, including their staff. They also represent six to ten additional jobs in the healthcare community if you think of referrals to the hospital, trade suppliers, and so forth."

Dr. Gary Frank, appellant, was duly sworn. He said he has been practicing in Santa Fe for 19 years and has been chief medical officer at St. Vincent Hospital for eight years. He pointed out that the development proposal "is completely and entirely in compliance with every code and regulation that we were asked to meet.... If this appeal is not approved, I'd like you to understand that your hospital and medical staff will lose its ability to provide many critical services, and you need to understand that this is not just a development project. We will lose physicians. We will not be able to cover the emergency department many nights. We will have cut programs that are supported by our surgery services. These needed healthcare services and jobs will leave Santa Fe."

Dr. Frank also stated that St. Vincent Hospital has listened to the concerns of the neighborhood about the helicopter, "and we are upset and concerned that this issue has clouded approval of this project. This proposal has nothing to do with the helicopter."

Dr. Frank invited Governing Body members to an open meeting with the neighborhood on February 26 to discuss the helicopter and to hear public comments.

Dr. Frank stated that the St. Vincent Hospital board has passed a formal resolution guaranteeing every current surgery center employee "continued employment at St. Vincent Hospital at the same pay and benefits after the center closes. In addition, there will be a bonus for every same-day surgery employee who stays until the closing."

Mayor Delgado stated that he would allow a 20-minute presentation for opponents to the appeal, as he had for the appellants. There was no response.

Mayor Delgado then asked for public comment against the appeal, and imposed a three-minute limit on speakers, and there was no objection.

David Barker was duly sworn and asked the Council to uphold the Planning Commission's decision, which he thought was well thought out. He agreed that this is a needed facility, "but that is not the debate, because I don't believe this facility has to be built and developed at the expense of the neighborhood, and if it were approached in more of a win-win situation, and there was more input from

the neighborhood, and they worked more with the neighborhood, that we have a better project." He said St. Vincent Hospital "has largely ignored the primary concern that has been voiced to them by the neighborhood: it's all about traffic." He said most of the hospital traffic historically came from St. Michael's Drive, but today that has shifted to Hospital Drive, meaning that vehicles use San Mateo Street and Galisteo Street. He said the developers of this project should work on reversing this trend and consider the Planning Commission's recommendation for some kind of interior roadway to take the traffic back out onto St. Michael's Drive.

Bob Walsh came forward and was sworn. He stated that he lived behind the hospital. He pointed out that a new master plan is required, since the plan states that "it is to serve as a guide for future development through the year 2000." He also pointed out that the City Council resolution adopting the plan "states that master plans for each phase of development be submitted to the Planning Commission for their review and approval."

Mr. Walsh also stated, "Hospital management, and we agree, has asserted that the Governing Body needs to go beyond issues of compliance with code and consider community interest in deciding about the development of medical facilities. The hospital has embarked on a new development already. It's characterized by their phrase, regional medical center. They are moving facilities out of the hospital that are already there in order to put new facilities in, and these new facilities, they feel, need to be marketed by the availability of helicopter transport. Consequently, this entire development, which has not been approved, is already affecting the neighborhood and violating a requirement that development maintain the low density residential character of the area, as it says in City Code."

Mr. Walsh submitted, for the record, a letter to the City Council from Neighbors of St. Vincent Hospital signed by 21 individuals. *[Exhibit "B" to these minutes.]*

Mr. Walsh also submitted the following: letter to "emergency medical professionals serving Northern New Mexico" from Neighbors of St. Vincent Hospital regarding "health and safety consequences of inter-hospital helicopter transfers of adults." The submittal included four articles: "Effectiveness of helicopter versus ground ambulance services for interfacility transport"; a JAMA article entitled, "Thrombolytic Therapy vs. Primary Percutaneous Coronary Intervention for Myocardial Infarction in Patients Presenting to Hospitals Without On-site Cardiac Surgery"; "Helicopter Accidents in the U.S. in 2003 – <http://www.flightweb.com>," a Web site for air medical professionals; and "Increased prevalence of hypertension in a population exposed to aircraft noise." *[Exhibit "B.1" to these minutes.]*

Mr. Walsh stated that he opposes expansion into a "regional medical center" without Planning Commission review and approval.

Nancy Reese was sworn and read two letters opposing the appeal from Barbara Gay, 231 W. San Mateo and Claiborne Booker, director of the San Mateo Neighborhood Association.

Ms. Gay's letter asked the Council to uphold the Planning Commission's denial until St. Vincent Hospital and the San Mateo Neighborhood Association have had an opportunity to resolve issues, in particular, increased traffic. The letter also expressed concern about a lack of responsiveness to the neighborhood's concerns. *[Exhibit "B.1" to these minutes.]*

Mr. Booker's letter expressed concern about the lack of dialogue between the neighborhood and the hospital regarding the expected increase of traffic, and asked the Council to uphold the denial until there has been ample time to resolve several issues of concern. *[Exhibit "B.2" to these minutes.]*

This concluded comments against the appeal.

Mayor Delgado asked for comments in favor of the appeal, and imposed a three-minute time limit on speakers.

Dr. Tom Pascuzzi was sworn. He said he was president of the Santa Fe County Medical Society, which has over 200 physician members, and was a practicing emergency physician with the emergency group. He said he supported this appeal because it would enhance the ability to recruit and retain physicians in this community, including the county. He said the helicopter issue was separate from this, which would allow the medical community to develop and expand its services.

Dr. Paul Fullerton, an anesthesiologist at St. Vincent Hospital and a practicing pain physician, was sworn, and said he has been practicing medicine in Santa Fe for 15 years and has worked with most of the surgeons on staff. He stated that a number of surgeons have left the community over the years.

Dr. Fullerton said he has been involved in the development of the surgery center, which will occupy about 17,000 square feet of the facility. He stated, "I've been encouraged by the ability of this project to bring together surgeons from various specialties to participate, to make a common vision of improving healthcare in Santa Fe, if possible. This is a unique entity and we should take advantage of this."

Dr. Phillip Shields, a neurosurgeon and chief of surgery at St. Vincent Hospital, was sworn. He stated that the helicopter issue has nothing to do with this project, and pointed out that helicopters will not bring patients in for elective surgery in the outpatient center. He said he has been very involved in trying to recruit physicians to this area, noting that Santa Fe has three neurosurgeons, where Albuquerque greatly suffers because they do not have enough to serve

that area. Dr. Shields stated that the proposed facility, which will be state of the art, would allow him and other surgeons to operate using highly technical skills. He said the facility would also allow throughput, more access by patients, and will decompress the main operating room, which is tied up for long periods with long and arduous surgeries.

Dr. John Lehman, a physician in Santa Fe and one of two interventional radiologists in Northern New Mexico, was sworn. He said he was not an investor in the Physicians Medical Center. He stated the proposed surgical center and office building "is an effort by the physicians of Santa Fe, who in turn support St. Vincent Hospital, to improve upon the facilities that already exist in order to bring about the best care to our community... This center is for everyone. These are the physicians that are taking care of the 25 percent uninsured in our community." Dr. Lehman stated that, without this facility, "we can watch the continued outsourcing of specialty care leave the hospital... and be prepared for an already-struggling St. Vincent Hospital to suffer the consequences."

Dr. Raphael Shapiro, a general surgeon, was sworn. He said he has seen many surgeons come and go for various reasons, "and I see an aging physician population in Santa Fe with a difficult time recruiting new docs. We do need state of the art. The few new docs that we've had come to town are people that grew up in Santa Fe and want to come to Santa Fe. It's a tough place to practice. We need to be up to date. We need to retain our physicians and have an ability to recruit new ones. I think this project is essential in that goal."

Dr. Eric Anderson, a Santa Fe urologist, was sworn. He said he and his wife grew up in Santa Fe and they feel very fortunate to be able to come back and serve this community, "but just in the two years I've been here, the turnover of surgeons has been alarming. It is a tough place to practice. I think this new facility will provide new state-of-the-art abilities for surgeons and also allow retention of surgeons." He said two friends he attended high school with, one a general surgeon and the other an orthopedic surgeon, "just won't move back here because there aren't facilities that they feel are adequate enough for them to practice with. I think this would provide that for them."

Dr. Brad Stamm, a cardiologist in Santa Fe, was sworn. He said he has no financial interest in the new complex, nor will he occupy it, but strongly supports the project. He said it would allow St. Vincent Hospital to enhance critical cardiac services. He pointed out that cardiac disease is the number one killer in the U.S. "and almost half the people in this room will die of a cardiovascular disease." He spoke to the "remarkable success and safety record" of the hospital's coronary angioplasty program, adding, "A very serious hole in our service remains cardiac surgery. In fact, the major inter-facility transport, where we use the helicopter to Albuquerque, is in fact people going to Albuquerque for heart surgery."

Dr. Stamm said, "We've been working on a cardiovascular surgical program for over two years. We have a very time-dependent opportunity to in fact recruit

the very most experienced cardiac surgeon in the entire state of New Mexico, who wants to relocate from Albuquerque to Santa Fe if we can get the project through. We've worked with designers, with consultants, to build the facility that we need. A de novo building adjacent to St. Vincent as part of the hospital would probably cost around twenty to twenty five million dollars, clearly beyond the capability of the hospital to afford it. If, however, we can go into the same-day surgery center that would be vacated with approval of this new building, then the project becomes much more feasible, the timeline is much shorter, and we can provide the necessary cardiac surgery service that the community, the county and all of Northern New Mexico so desperately needs."

Dr. Carey Weiss, an anesthesiologist at St. Vincent Hospital and vice chairman of surgery, was sworn. He stated that, prior to coming to Santa Fe, he was at Washington University in St. Louis, where he ran a number of their high tech sections for 15 years, and so was accustomed to providing "high tech quality complicated care to the patients that present to us." He said, "I'm aware of how important it is for all of us to be able to receive the care that we need, because not only are we physicians, but we are also members of this community as you are.... I don't think anyone here can dispute how important it is for high quality healthcare to be part of Santa Fe as an underpinning of what it takes to really maintain this city as a viable community." He said St. Vincent Hospital "is an aging facility — great when it was designed, but really doesn't meet the demands of what we need to provide to our patients."

Dr. Cleve Pardue, an OB-GYN physician, and a member of the Santa Fe County Health Planning and Policy Commission, was sworn. He stated that, over the last three years, the Commission has developed a comprehensive "Call to Action" plan, and one of the subunits of it is titled, "The Retention and the Recruitment of Physicians in Santa Fe." He stated that, in his particular specialty of delivering babies and performing gynecologic services, "we are by two or perhaps three doctors short, we're trying to recruit somebody, and we're having a devil of a time." He said people in this community might have to go elsewhere to have their babies if they can't recruit more OB-GYN physicians to Santa Fe. He said the new facility would allow them to recruit and retain physicians here.

Gail Rapoport was sworn. She said she has lived behind the hospital for 23 of the 35 years she has been in Santa Fe, and lives in one of the two houses closest to the project. She stated, "I'm here to speak in favor of it. I attended all of the meetings. I was adequately notified of all of the meetings. I worked with the developers, and they met with us a number of times, came by my house, because it's going to impact me more than most people in the neighborhood. And they tried as hard as they could. And when you buy a house behind a hospital, I don't know what you think is going to be there, but I think when they own all the land, it's certainly going to be hospital-related buildings."

Ms. Rapoport said City traffic director John Nitzel "met with us about the traffic a number of times. He's turned Lupita Road, where I live, into a one-way

street. I don't see why we have to come to Santa Fe and close the doors behind us.... I'd like to see state of the art healthcare in this city. I don't think we should have to go other places."

Gene Valdez, a member of the St. Vincent Hospital board of directors, was sworn. He stated that, as a board member, "it is my responsibility to ensure that the community and its healthcare needs are served by the hospital. I urge your support of the proposal for six important reasons." He listed them as follows: 1) the proposed facility will help Santa Fe to recruit and retain physicians; 2) the space freed up in the present same day surgery center will improve services and bring new healthcare resources to people, including cardiac surgery which is currently not possible in Santa Fe without this space; 3) there will be more jobs created; 4) current employees of the same day surgery center have been guaranteed other jobs in the hospital with no loss in pay, training if necessary, and a \$1,000 bonus if they stay on through the closing of the current center; 5) the facility will see indigent patients in the same proportion as the hospital; and 6) the proposed arrangements will help ensure the viability of the hospital itself as a freestanding nonaffiliated nonprofit community institution.

Dr. Mello, an emergency physician, was sworn. He said he had no financial interest in this facility. He said, "The bottom line for me is that, if this proposal does not go forward, I see a very large danger that our ability to care for patients seeking emergency care in Santa Fe will be compromised. We currently see 65,000 patients."

Bernadette Pogue was sworn. She said she has lived in Santa Fe for 12 years and is an RN at the hospital on the per diem staff. She stated that she has been working at the same day surgery center for the past 18 months, specifically in the pain clinic, and said the new facility will offer greater opportunities for people in Santa Fe and Northern New Mexico because they will not have to travel further when their condition is severe.

Paul Flehmer, planner for the proposed project, was sworn. He disagreed with speaker David Barker's statement "that somehow, over the years, the hospital has redirected traffic through the neighborhood.... the fact is, that in reviewing the original traffic study for the project, the curb cuts on Hospital Drive and St. Michael's Drive are the same as they were in the original traffic study; and in fact, with this project, we will be relocating an access drive back to one of the historic curb cuts."

Mr. Flehmer stated that a neighbor, Elaine Sedillo, gave him a letter asking why the project couldn't be relocated to the east side of the campus because there is vacant ground there. He said this question was raised at the first ENN meeting by the neighbors, as well. He stated, "We spent a great deal of time looking at that site and ruled it out for a number of reasons... It had a lot to do with cost and access and it not being the appropriate location for the project." He said he would be glad to provide more detail if asked following the public hearing.

Andy Montgomery was sworn. He said he supported this project. He spoke to the dedication of doctors and nurses and staff at St. Vincent Hospital, which is always open to people who need services. He urged Councilors to support this appeal.

Dr. William Brown, an obstetrician-gynecologist in Santa Fe, was sworn. He said he and his wife have been patients at the hospital and his daughter was born there. He stated that he moved to Santa Fe in 1984 and was one of the 11 obstetrician-gynecologists delivering babies at that time: "Here, twenty years later, we have four who are delivering babies fulltime. I see this project as an effort to try to recruit physicians, and I would implore you to support it."

Crystal Von Wickerman, director of clinical recruitment and retention at St. Vincent Hospital, was sworn. She stated that recruiting physicians to Santa Fe is very difficult for many reasons, "and one of the questions that always comes up during the recruitment process is about what types of facilities are available, what types of tools are available? Physicians want to have progressive care, so they can provide progressive services. We need to have this approved so that we can recruit and retain our physicians in the community."

Ms. Von Wickerman said she has met with a few Councilors in the past who have told her, "Whatever I can do to help with recruitment of nurses and physicians in the community, please let me know." She commented, "I'm letting you know now: what you need to do is approve the ambulatory surgery center."

Bill Springer, a respiratory therapy manager at St. Vincent Hospital, was sworn. He said he lives in Las Vegas and has a home in Santa Fe. He stated, "The perception of Santa Fe is very important to all of Northern New Mexico. I worked in Northeastern Regional Hospital in Las Vegas as respiratory therapist there. We spent a lot of time sending our patients to Santa Fe in ambulances, and we really need the cardiovascular intervention program and neurological programs to continue. When I was working there, we really needed to be able to get to these people quickly." He said people in Northern New Mexico should not have to drive two hours to Albuquerque to get care.

Dr. Steve Lucero was sworn. He said he was not an investor in this project, but was an investor in Physicians Medical Center, and appeared before the Council last year to say how it was important to have a choice, and how competition spurs improvement. He said it would therefore be hypocritical for him to speak against this project. He commented, "If these physicians are willing to risk their money and time and effort, I think they should be allowed to do this because I think it will only make things better and improve healthcare throughout the city and region."

Alex Valdez, general counsel at St. Vincent Hospital, was sworn. He submitted a letter from Lee Brown, a landowner in the vicinity of the project and a

majority owner of the vacant acreage bound by St. Michael's, Galisteo, St. Francis and San Mateo. Mr. Brown stated in his letter that "the development plan I have in mind for my property is in no way negatively impacted by St. Vincent's well-planned project." [Exhibit "B.4" to these minutes.]

Mr. Valdez stated that the proposed facility would allow St. Vincent to retain the physicians in the community who desire a state-of-the-art facility. He said, "It will result in a net growth in jobs, in healthcare in this community. And as we know, healthcare jobs are well-paying jobs."

This concluded public comment.

[The remainder of this agenda item is transcribed verbatim.]

MAYOR LARRY DELGADO: That concludes the public hearing portion of this agenda item. Councilor Lopez?

COUNCILOR CAROL ROBERTSON LOPEZ: Yes, thank you, Mayor. After hearing all the testimony tonight, I really appreciate Mrs. Rapoport coming down, and I know that Gail's deeply involved in our community in a whole lot of different areas, and it's really a pleasure to hear a neighbor speaking in favor of something. I'm also very concerned about the neighbors that do continue to have problems with the project, and I'm hoping that the public notice meeting that we had tonight about a meeting on the emergency air transport is going to help resolve all those issues.

This project is in compliance with all our rules and requirements. It's not asking for variances. I think Mark Basham did present to us a court case in which we are not allowed to require that the master plan be redone in terms of this project. I did have the opportunity to vote on this master plan years ago and it was probably one of the first complete master plans that we did in this community for any kind of a facility, and it was long-debated and long thought-out.

I would also like to continue, prior to making a motion for approval, that the findings that appear in your packet on page six that include six findings of fact, that I would like to read into the record. I believe it is required for us to do that.

The first is that this is a request for a development plan review for 50,000 [sic] plus or minus gross square foot medical office building on two tracts of land adjacent to St. Vincent's.

Two, the property is zoned C-1 and is designated Institutional on the Future Land Use Map of the 1999 General Plan.

Three, the site is part of the St. Vincent Hospital Campus Master Plan and falls within the Northern Campus as defined in the Plan.

Four, the request is consistent with density, zoning and land use policies and criteria of the Santa Fe City Code and General Plan.

Five, the development is in compliance with the development standards for Area 3 and siting criteria for Area 1 as established by the St. Vincent Hospital Campus Master Plan.

And six, this request is consistent with the health, safety, and general welfare of the residents of the City.

Those are six findings I'd like to enter into the record with my motion; as well as, with the motion, we have conditions of approval. I would like all those conditions to be in place.

And in addition, it is my understanding that the hospital has agreed to, following the actions this Council makes on this particular project, to then proceed with a master plan update that would probably take several months if not almost a year. It'll take a while. But then we go ahead and proceed with that, not as a condition of approval of this case.

So with that, I think that is the motion for approval.

COUNCILOR DAVID PFEFFER: Mayor, I'll second—

COUNCILOR PATTI J. BUSHEE: You're going to make the motion to uphold the appeal, is that correct?

COUNCILOR LOPEZ: Yes.

COUNCILOR PFEFFER: I'll second for purposes of discussion.

MAYOR DELGADO: Okay, we have a motion to, uh—

COUNCILOR PFEFFER: —May I address it?

MAYOR DELGADO: Excuse me, Councilor, let me finish. I'll give you a chance.

COUNCILOR PFEFFER: I'm sorry.

MAYOR DELGADO: All right. Okay, we have a motion in favor of the appeal by Councilor Lopez and a second. Councilor Bushee, were you the second?

COUNCILOR BUSHEE: He was, but I had my hand up to ask questions—

MAYOR DELGADO: —Councilor Pfeffer, you were the second?

COUNCILOR BUSHEE: That's right. Mayor? I don't know who you want to go next, but I have some questions.

MAYOR DELGADO: Councilor Pfeffer, Councilor Bushee.

COUNCILOR PFEFFER: Thank you, Mayor. Sorry for the interruption, Mayor. First of all, I'm seconding for the purpose of discussion. I have a couple of questions.

Just, of the maker of the motion, the conditions of approval are those on page two of our packet?

COUNCILOR LOPEZ: Yes.

COUNCILOR PFEFFER: Okay. Then the second question — I guess, Bruce, there was mention of the master plan expiring in the year 2000. First of all, A, is that the case, and if so, does — when this happens, does a master plan that has expired remain in effect until a new one comes in or revised or what? Is there a history on this? What do we do?

CITY ATTORNEY BRUCE THOMPSON: What history I know of this I've gotten in the last few minutes from staff. There was a resolution that was passed in 1985. One of the whereas clauses, not a final provision with respect to the resolution, stated that there's a forty point oh three acre tract of land and St. Vincent is desirous of developing the vacant land for medical and related uses over a period of ten to thirty years. It's not a final determination, but that was at least what the Council was thinking about was happening.

It adopted then a master plan report, and in the master plan report it states the purpose of the master plan, and states that the master plan has been designed to provide for the current and long-range needs of the hospital campus, serving as guide for future development through the year 2000. Now, whether or not it was intended to expire in the year 2000, I assume that's the reading that some people have put on this. I'm not sure I would. I've never, up until a few minutes ago, I'd not seen this language. I find it a stretch to say that the master plan would expire. It looks to me more like this is the intent, was to have this property fully developed by the year 2000, but I think it's really up to the Council. If the Council believes that this master plan expired in the year 2000, you could probably find that. What I hear from staff is they've never heard of a master plan ever expiring, and so to try to tell you what happens when a master plan expires, I would not begin to try to guess at what would happen if one did expire. I mean, it doesn't make a lot of sense to have a master plan expire.

COUNCILOR PFEFFER: Greg or Derrick, do you care to add anything to that, or is that sufficient?

CITY SENIOR PLANNER GREG SMITH: Mayor and Councilor, we'd concur with the attorney's interpretation. We'd also note that master plans routinely, if they provide for phases, once they begin into the first phase and proceed in a timely fashion through the future phases, they're not considered to expire.

COUNCILOR PFEFFER: Okay. Mayor, I'd just like to comment, having heard all the testimony and having read through this entire packet, which is quite thick. The way I see this, I'm going to speak in favor of the motion, it seems to me that, for approval of this project, the applicant was required to submit a master plan and did so eighteen years ago. Any project on the St. Vincent property would have to comply with the master plan. Staff advised the Planning Commission in detail that this proposal in fact complied and exceeded the requirements of the master plan. The Planning Commission voted to deny approval, and then subsequent to that, said not only that, but we want you to change the master plan and come back to us. Which to me sounds like the Planning Commission was taking it upon itself to void what the Council had approved previously as the master plan; and that left the applicant with not much of a choice about where to go, because if it did not comply with the master plan originally, it would have had to ask for variances from it. So it complied with the master plan and then got turned down. So it seems to me that the Planning Commission erred in its determination in terms of denying the applicant. So I'll leave it at that. Thank you.

MAYOR DELGADO: Councilor Bushee.

COUNCILOR BUSHEE: Thank you, Mayor. Bruce, and maybe this is not your determination since you're not an expert in land uses; however, would you consider the master plan, would you consider this proposal in keeping with the master plan?

MR. THOMPSON: You're right, I'm not an expert on zoning issues. I really would defer to—

COUNCILOR BUSHEE: —I knew you'd—

MR. THOMPSON: —to staff, because I think that they're the ones that really interpret whether or not, what the terms are that are contained.

COUNCILOR BUSHEE: Then, for the record, could the appropriate staff person—

MAYOR DELGADO: Greg.

COUNCILOR BUSHEE: —indicate?

MR. SMITH: Mayor and Councilors, we stated in our staff report to the Planning Commission that staff concludes that the current project is consistent with the master plan.

COUNCILOR BUSHEE: Okay. Then I wanted to ask John Nitzel a couple of questions on traffic. I did receive some communications at the last minute about concerns with traffic. Now, I understand that many neighbors have met with the developers and they have brought those concerns forward and some have spoken to the fact that they feel like they've been met, but the concerns that came through to me at the end were about additional traffic onto Hospital Drive and whether or not there were ways to either redirect that traffic to enter through St. Michael's only, and/or, I guess any other kind of traffic calming or amelioration. If you could just speak to what this project's going to be required to do to cover both of those points.

CITY TRAFFIC ENGINEER JOHN NITZEL: Yes, Councilor, Mayor, Councilors, I'd be happy to give you some [inaudible] of where we are on that. We did have a meeting at E.J. Martinez last meeting, a neighborhood meeting, and talked about some of these issues, but of course we've been reviewing these over times as they've submitted, and they do provide mitigation measures to address the traffic capacity problems. We've talked a great deal about traffic using Hospital Drive north, which of course is the neighborhood, and the neighborhood participated and there were concerns about that. Just a little background, the traffic now on Hospital Drive at Lupita is about eighty-seven hundred cars a day, and they'll direct possibly up to eight hundred or so. We have traffic — they offered to do traffic calming on Hospital Drive itself. The City in its traffic calming program has proposed projects, if this next cycle gets funded, to provide traffic calming on San Mateo, Galisteo and Don Gaspar in this area. So we're not doing this just for this effort but because historically they've had heavy traffic, so, but this would help mitigate those issues.

The last thing I want to mention, and we did note this in staff memos, was the master plan issues, and we have asked the hospital in their future master plan efforts to make every effort they can to redirect traffic from Hospital Drive to St. Michael's Drive. And they did respond to us in the letters that's contained in your packet on page fifty two, and they addressed that and said that, while the traffic from the proposed Physicians Plaza facility must use Hospital Drive, St. Vincent's recognizes that the overall campus planning will consider increasing the utilization of the St. Michael's Drive intersection. And what we've talked about on that, just a brief detail, was that St. Michael's was a four lane major arterial, so we deal with different kinds of arterials than doctors do. [Laughter from audience.] I couldn't resist that.

COUNCILOR BUSHEE: We've been privileged to have some of John's engineering jokes in the last few weeks.

MR. NITZEL: It's a New Year's Resolution, and uh—

MAYOR DELGADO: John, you're going to have to stick to traffic.

MR. NITZEL: I'll do that with great happiness. I don't want to get into that. But what we're trying to do is get more traffic to use the St. Michael's Drive access, hopefully, and we've asked them, they've offered to do that. Specifically, we think that it might be possible to signalize that existing access onto St. Michael's and make it, as they indicated in their letter, [reading:] campus traffic flows, internal and external building campus wayfinding, and parking will be reviewed and enhanced to support the services identified in the master plan submittal. [Continuing to read:] As development continues on St. Michael's Drive, St. Vincent Hospital will discuss with the City planners ways to enhance the St. Michael's Drive access.

With a signal, we could give them better access, encourage that, and actually it'd help the property on the other side, the Fox property, so I think this is a good answer on their part.

COUNCILOR BUSHEE: John, would that be an appropriate condition to apply to this as an approval?

MR. NITZEL: Uh, that's up to you.

COUNCILOR BUSHEE: Well, I guess I'm asking—

MR. NITZEL: —You brought it up. And it was in our memo, but [inaudible]—

COUNCILOR BUSHEE: —I'm asking maybe if both the appellants and staff if that's a good recommendation. Maybe they could speak to the acceptance of that.

ATTORNEY MARK BASHAM: Mayor, Councilor Bushee, are you asking if we're willing to accept this condition that we build or put in the light at St. Michael's at this point in time? Could you please clarify?

COUNCILOR BUSHEE: No. I was really speaking to just making sure the traffic is in any way directed toward that entrance.

MR. NITZEL: Councilor, I don't know if it's addressed or not entirely as a condition. In our memo, we do state we received a memo from St. Vincent's Hospital, what I just read, and that this should be, we say in our memo, this issue should be strongly considered as strategies to reduce traffic on Hospital Drive no later than the master plan submittal by the hospital. That's in our memo. Our memo is adopted as a condition of approval, but we don't have that attached to our memo.

COUNCILOR BUSHEE: It's really just trying to make sure we can make any attempts to limit the traffic and keep the access mostly directed to the St. Michael's. I would say in terms of cost of a signalization, I think we have some impact fee monies that could be applied toward that. Is that not right?

MR. NITZEL: Councilor, they will pay impact fees.

COUNCILOR BUSHEE: But we might have some as well in that area if there's a need for a new signal.

The other question is just back to this master plan, because, really, I didn't find, and I'm really looking through the minutes, but I didn't find very many good land use reasons to reject this development, so I mean, there were questions brought up about helicopters, but that really doesn't apply here from what I could tell. I also can't see that the master plan has expired or that it isn't an appropriate fit, so really the thing that I find that I expect the neighborhood to have the most concern over is the traffic, which is really what everybody's concerned about when development increases in their neighborhood. So I would ask you, John, if in reviewing the master plan and any of the other traffic issues that were there from the beginning, if this would have a significant impact detrimentally or otherwise on the earlier approvals?

MR. NITZEL: Councilor, Mayor, yes, I actually just this evening looked at the original, we have a copy of the original study for the master plan. It identifies Tract D, which is this tract, and it indicates in the original traffic master plan that there were eighty thousand square feet planned; this is a fifty-two thousand, so if we say, if we look at that issue for this tract, it's in compliance with the master plan.

COUNCILOR BUSHEE: Okay, thank you. The other, just quick question, a similar group of people that called about traffic concerns, and I'm going to guess that this is probably not likely to happen, or maybe even what we want, but the suggestion was to make Hospital Drive a one-way. Now, they of course didn't indicate which direction they wanted, but I assume it's, you know. I'm just wanting you to respond to that. Yeah. Away, is what I'm assuming.

MR. NITZEL: Councilor, I wouldn't, we'd really not, we'd have to study that in great depth. If it's an emergency response route, we'd have to very careful about that—

COUNCILOR BUSHEE: —I told them I'd ask the question. I would guess that you would not want to limit the traffic coming into your hospital, particularly.

All right, I want to just say that I think that, you know, it's interesting. I was sitting here listening, and I think it's an absolutely worthy project. I think recruitment and retention of physicians and healthcare in this community, and offering the best and most diverse array of options to our community is absolutely where we need to go. And I was also thinking that I wished that we'd have this conversation some time about our educators and the facilities that they use in the recruitment and retention in this community. And maybe we'll get that opportunity. It's not something that we really cover here, but I see really no land

use reasons to deny this facility from coming to fruition, and I absolutely need to support the motion to uphold the appeal.

MAYOR DELGADO: Councilor Lopez, and along Councilor Bushee's questions.

COUNCILOR LOPEZ: Yes, I just wanted to amend my motion. And in my motion I did request that the hospital further proceed to update its master plan. In light of what Councilor Bushee brought up, in terms of the letter on page fifty two, I would like to add to that motion that planning goals that improve traffic circulation encourage greater use of St. Michael's Drive as entry/exit, and points one, two, and three be addressed.

Point one being that the St. Michael Drive entry will be enhanced to provide access to the services located at that section of the campus. Point two, that campus traffic flows, internal and external building and campus wayfinding, and parking will be reviewed and enhanced to support the services identified in the revised master plan submittal. And three, as development continues on St. Michael's Drive, St. Vincent's Hospital will discuss with the city planners ways to enhance St. Michael's Drive access.

[September 30, 2003 letter from Doug Majewski, Hartman & Majeswki Design Group, containing above language, submitted as Exhibit "B.5" to these minutes.]

I include that as the specific goals that we will work towards resolution.

COUNCILOR PFEFFER: And that's fine with the seconder.

COUNCILOR LOPEZ: Thank you.

MAYOR DELGADO: Councilor Heldmeyer.

COUNCILOR KAREN HELDMEYER: I've got some technical questions for staff. It was mentioned that, in the resolution that approved the master plan, it talked about a master plan for each phase of the development. Do you want to address that?

MR. SMITH: Mayor and Councilor Heldmeyer, we looked at that language in the master plan. We looked at the new code requirement adopted in 1999 that required a development plan for a project with this number of square feet, and we concluded that the applicant's application for approval of a master plan would meet both the code requirement—I'm sorry; the application for a development plan would meet both the requirement from the 1985 resolution and also the current code requirement.

COUNCILOR HELDMEYER: Okay. And this property is zoned C-1. Which C-1 use are you saying that this development meets?

MR. SMITH: Mayor and Councilor, the C-1 district allows hospitals, it allows medical office clinics, it allows medical offices. The proposed use falls within those categories.

COUNCILOR HELDMEYER: I mean, as I read the code, it allows hospitals as a special exception, so I'm assuming you're calling this one of those other things.

MR. SMITH: I would have to review our analysis to give you a definitive answer on that, Councilor.

COUNCILOR HELDMEYER: What do we do when someone violates a master plan? If somebody puts something in that isn't in the master plan and then they come in to do something else with the property? I mean, do we make them take it out, do we, you know, what's the procedure there?

MR. SMITH: Mayor and Councilors, I'm not sure that there's a general answer to that question. There are a variety of remedies available, depending on the specific circumstances. In reviewing the master plan and reviewing the actions that have been, the buildings that have been built by the hospital without specific review by the Commission, the staff has not found any significant deviation from the master plan in those buildings that have occurred.

COUNCILOR HELDMEYER: Including the second helipad?

MR. SMITH: The issue as to whether there is a relocated helipad or multiple helipads, I think is something that our review of that, although not directly related to this application, concluded that it was likely that the second helipad was located in a, placed in a location that was more beneficial to the neighbors than the original approved location was. Certainly had we been aware of the master plan at the point that the Council began their review of the helipad over a year ago, we would have brought that to your attention, but we did not discover the plan had provisions for that until recently.

COUNCILOR HELDMEYER: 'Cause, I mean, a year ago, when we started talking about the helipad, essentially we were told that, because the one helipad was in the plan, that the City did not really have very much control over an intensification of use, but of the same use. So it seems that, you know, then we can't just flip it around and say, well, but there's a second helipad and maybe people might like it better, 'cause the second helipad is an auxiliary one, but it exists and it was put in without amending the master plan. Is that correct?

MR. SMITH: That is correct, Councilor, and if your question is specifically what remedy should the Council consider available, that issue I would encourage you to direct that to the attorney for further study.

COUNCILOR HELDMEYER: Okay. This, I guess is a question for Gene, because Gene's the one who brought it up. You mentioned that this will take the same percentage of indigent patients, and while that's not necessarily a land use issue, the hospital is the one that brought it up. What mechanisms are they putting in place to ensure that this is the case?

GENE VALDEZ: Well, as I understand it, it's a contractual issue, but someone, Mark?

MAYOR DELGADO: Mr. Valdez?

COUNCILOR HELDMEYER: Whoever wants to come up and answer it.

ALEX VALDEZ: [From his seat in audience:] Mayor, Councilwoman—

MAYOR DELGADO: —Mr. Valdez, I would like you to come up to the podium, please.

ALEX VALDEZ: Mayor, Councilwoman Heldmeyer, in the Surgery Center of Santa Fe, LLC operating agreement, on page nine, there is specific language which addresses the responsibility of the Surgery Center, and I'll paraphrase or read it—

COUNCILOR HELDMEYER: —No, I'm not asking that question. I'm asking the question, who is going to monitor compliance? And how is that going to be monitored?

ALEX VALDEZ: The compliance of the activities that occur in the Surgery Center will occur through the organizational structure that is developed through the operating agreement, so that they are able to obtain information from St. Vincent Hospital in terms of the percentage of indigent care that is being provided to the hospital, and then having the organization of the operating agreement of the Surgery Center comply with that same percentage that is being done through the hospital.

COUNCILOR HELDMEYER: Okay. So I want to ask Councilor Lopez, as maker of the motion, a couple of questions, friendly amendments.

One, that the secondary heliport be closed down at such time as the master plan be amended to include that.

COUNCILOR LOPEZ: I really — no. I really don't want to combine that particular issue with this project, so I can't accept that as friendly.

COUNCILOR HELDMEYER: Okay. This is a master plan issue, you know? And we're, you know, on the one hand we're agreeing to all these, you know, we have to do it 'cause it's in the master plan, but if we want to do something that's

not in the master plan, well, then, we can do that too. I mean, it strikes me as, you know, we have to be consistent.

COUNCILOR LOPEZ: If I could respond to that. It's simply that I don't believe the debate tonight is about the helicopter pad, and I certainly think that it would be in your purview, if you would like to bring something forward and have it debated by this body regarding that second helicopter pad, that it would then be allowed the same kind of due process for the public to speak to. The public has not had an opportunity to speak to that issue tonight because it was not part of this item, so in fairness I think it would be improper to pursue it.

COUNCILOR HELDMEYER: Well, that's an interesting point of view. We're talking about the master plan, we're talking about what we have to do because of what the master plan says; however, we're also giving them a pass on what they want to do that isn't in the master plan. I mean, you've got, you know, this is a master plan issue. You can't have it both ways.

Okay, so second question is, can we do anything more strongly with access from St. Mike's rather than saying that they'll think about it, because that's basically what that letter says that you included.

COUNCILOR LOPEZ: I think it was very specific. If it would be helpful for you, for us, to put a timeline on that, to say within twelve months that there be a response to that, I'd be glad to put a timeline on it so that you could have some assurances—

COUNCILOR HELDMEYER: —Six months.

COUNCILOR LOPEZ: Six months? I'm not sure if six months, I guess I would need some help from John Nitzel because what worries me about six months is, by the time our engineers work on it, the time we go through ENN, by the time then we come before the Planning Commission, all the different bodies, I don't think we can do anything in six months. John?

MR. NITZEL: The response I could give you, Councilor and Mayor and Councilors, is that they do say in their letter of September 30 of 2003, we anticipate that the master plan will be completed in early 2004. So maybe they could elaborate on that, but we did get some timeline in the letter. So.

COUNCILOR LOPEZ: If we were to make it at the end of this year, Councilor, if you don't mind, could I ask the hospital planners if they thought they could, this is February; do you think by the end of this calendar year that process could be, uh—

MR. BASHAM: Mayor, Councilor Lopez, we would prefer twelve months, the full twelve months, so not to the end of this year, but until February of 2005.

COUNCILOR HELDMEYER: Well, let me ask them a question. So when are you planning on breaking ground?

MR. BASHAM: I don't know that.

MR. SCHEER: I just wanted to clarify the issue you're raising. I believe Councilor Lopez' motion was de-linking the submittal of the master plan from the commencement of the project.

COUNCILOR HELDMEYER: I understand that. What I'm asking is, when are you planning on breaking ground?

MR. SCHEER: It would be the, following the due process of completing drawings, submitting them for approval for building permitting and so forth. I imagine it's going to be approximately six months out from now. Something like that.

MAYOR DELGADO: Good luck. [Laughter.]

MR. SCHEER: Your staff's actually been great to work with so far.

COUNCILOR HELDMEYER: And the reason, Councilor Lopez, is because as, you know, as construction on this increases, that construction is also going to generate traffic. And if there are no other options [inaudible] so it seems that they're, you know, if they are planning on building and starting construction on this building, that it ought to be tied to that.

COUNCILOR BUSHEE: Mayor? Could I just offer that—

MAYOR DELGADO: —Excuse me; Councilor Lopez, they asked you a question. I'll get to you, Councilor.

COUNCILOR LOPEZ: Okay, I just think that, just knowing how long that the whole process takes, I don't want to tie them completely that way.

I am willing to back up and have it be January of 2005 if not sooner, that it be approved by this body.

And the only reason why that is that in November we only have one meeting and in December we only have one meeting, so I'm concerned about being able to get it done in that time.

COUNCILOR HELDMEYER: Thank you.

MAYOR DELGADO: Councilor Bushee. On the same subject.

COUNCILOR BUSHEE: Well, Mayor, I think that language that was accepted by Councilor Lopez early on is going to take care of the general concerns about trying to direct traffic to St. Michael's at the entrance there, but if there is a concern on the part of Councilor Heldmeyer with regard to construction traffic,

I would suggest a friendly amendment that's limiting all construction traffic to the entrance at St. Michael's.

COUNCILOR LOPEZ: I'm willing to accept that as a friendly amendment if my seconder will. I think it's quite possible that the construction traffic can come by St. Michael's Drive and not cut through the neighborhood, and that's kind of a standard condition that we give to protect the neighborhoods during construction.

Thank you, Councilor Bushee.

COUNCILOR PFEFFER: That's friendly to me as the seconder as long as it's understood that that would also have to entail Hospital Drive to physically get to the site, but my understanding is you don't want it coming through the other areas of the neighborhood.

MAYOR DELGADO: Anything else. Councilor Heldmeyer?

COUNCILOR HELDMEYER: No, I'm done.

MAYOR DELGADO: Councilor Chavez.

COUNCILOR MIGUEL CHAVEZ: Well, thank you, Mayor. The concerns I had also had to do with traffic and how much of that traffic would be directed and when, and I think that the general discussion has gone in that direction, so I'm more comfortable with what's taking place. But I had another question, and I guess this is either for staff or for legal, because the Planning Commission in fact denied this application, but we also have findings of fact. So my question is, who formulated these findings of fact?

MR. THOMPSON: My understanding is that the findings were proposed by the Planning staff. They were not drafted by our office.

MAYOR DELGADO: Somebody from Planning staff? Derrick?

COUNCILOR LOPEZ: Admit it. [Laughter.] Fess up.

SENIOR PLANNER DERRICK ARCHULETA: Mr. Mayor, Councilor Chavez, guilty as charged. I prepared the findings of fact.

COUNCILOR CHAVEZ: Okay, I just wanted that to be noted for the record, because, just for clarification and just so that we know where they're coming

from, basically, because there's no mention of that in our packet. Thank you, Mayor.

MAYOR DELGADO: Councilor Wurzburger.

COUNCILOR REBECCA WURZBURGER: Okay, several points. First of all, Councilor Chavez, thank you for that question, because as far as I was concerned, there was certainly no finding of fact by the Planning Commission with respect to this project. I couldn't find any, even though I read every single word of the minutes. So I am most supportive of the motion as it stands.

My one concern remains, and John, I'd like you to come forward. I rarely say I get calls all the time as other Councilors do, but I do get calls every other day, as you know, on Garcia [*sic*] Street. And I take them very seriously in terms of the traffic that is around the school in particular. And what I'm concerned about is I know we have the traffic calming plan for that intersection, and you've stated that the hospital; or rather, the proponents of this project will help pay for that, but that was a plan that was in place before the projections were done with respect to the impact of this particular building, so I'm concerned as to whether there's anything else that we need to do to reduce what must be more traffic that could come down Garcia Street, and have you thought about that? I mean Galisteo. [Responding to remarks from other Councilors:] I said Galisteo. First I said Garcia, and I said excuse me, Galisteo. So that is my concern because you're presenting it as though the plan that's in place now, yes, they're going to help pay for that, and my concern is, A, what analysis have we done to show that it might possibly increase traffic going north on Galisteo, and B, if so, have you looked at any remediation with respect to that potential problem? Or will you?

MR. NITZEL: Councilor, we did. Yes. And Mayor, and Councilors, we did get a fairly good estimate of that and we've looked at that, we've incorporated it somewhat in our future traffic calming project, and then we had the neighborhood meeting at EJ Martinez and we talked, the main concern at that meeting was the crossing guards for the kids, in their crossing situation, I should say, and we really plan to pay a great deal of attention to that, assuming that the roundabout goes ahead. We do have to take right of way for that, which we didn't know at the time of the neighborhood meeting, but we'll work on that, I think, and so we've looked at the school crossing issue, we've added the traffic in, and I think, on a long-term basis, if the hospital modifies their master plan, the circulation, to emphasize traffic going to St. Michael's, that will divert some of that traffic, hopefully, off of Galisteo/Hospital Drive in the process. So sometimes you have to look a little down the road, and I think that would present, since they can get out easier onto St. Michael's, that might help them a lot. So.

COUNCILOR WURZBURGER: Okay, John. Thank you for that answer. Thank you, Mayor.

MAYOR DELGADO: Councilor Coss.

COUNCILOR DAVID COSS: Thank you, Mayor. I learn a lot listening to these, and I heard tonight that master plans don't expire, and I also heard that the hospital might update their master plan, or is looking at updating their master plan, and I'm thinking that, you know, this Governing Body is not omniscient when they approve a master plan. Are there no circumstances where the City can initiate a master plan update, and say this doesn't work anymore, or this needs modification?

MR. THOMPSON: Let me make one correction that was pointed out to me by one of the opponents to the appeal, a master plan that hasn't begun to be developed. Someone applies for a master plan, they wait for a number of years, they can expire at that point. If there's any development on the master plan, then they do not expire.

As far as updating, I mean, the City instituting something, I have no idea whether or not that's possible.

COUNCILOR COSS: Greg?

MR. SMITH: Mayor and Councilors, again, from a theoretical point of view there are two circumstances. First, the Council may at any time initiate rezoning of property of any parcel in the city, assuming that they can do so in compliance with the General Plan and protection of the health, safety and welfare. There are not specific references in the code with regard to master plans and so forth on the issue of who can initiate changes to them. The only place that the language shows up is with regard to annexations, where there is a mutual agreement between the applicant and the Council as to the terms of the master plan. Since this particular master plan was adopted by resolution and there's not a clear reference in the code for that procedure, I don't think there is a general answer to that question that we could apply in this case.

COUNCILOR COSS: Not necessarily for this case, but I just think it's just an interesting point and I would agree that the time to raise it is not when the developer comes in and asks for approval.

MR. SMITH: Thank you, Councilors, and that is on the agenda of the Planning Commission and the staff, to work on the Chapter 14 update to clarify those procedural questions.

COUNCILOR COSS: And my second area has been touched on a lot, is the traffic issue, and I, you know, I appreciate all the discussion on healthcare and meeting healthcare needs, which, you know, we don't have much of a band-aid or a staff to evaluate, but the thing that stuck out was, you know, we'd be the jewel of healthcare facilities in the Southwest. And I would just think that the hospital would want to help solve these traffic problems and put that circulator in or whatever they need to do to get that traffic out to St. Mike's instead of into the

neighborhoods. I think probably the City has some responsibility for, you know, and I'm sure John could look at this, you know, who's generating that traffic that's cutting through that Galisteo San Mateo Lupita neighborhood, but some of it has got to be the hospital.

And so I'm a little uncomfortable with the, I know there's been more discussion [inaudible] with the condition that says, discuss possible additional traffic calming measures. I'm just wondering if we can't be a little stronger and require the hospital to participate in traffic calming at the same proportion that our traffic engineer identifies that they are generating the traffic that's going into that neighborhood. You know, I just want to, I guess I want to ask John that. If you could identify the percent of the traffic that is, you know, not generated by the neighborhood, but that's driving through the neighborhood, that comes from the hospital, and then can we require that they participate in projects on the same percentage basis? Other than just discuss it, can we require it?

MR. NITZEL: Well, we can, first we can identify that fairly close. We have existing counts, we have their traffic study which identifies the additional traffic, and so we could just conceptually apportion that as cost, you know, on those streets to [inaudible] traffic safety, but I'll just hypothetically say they had five percent traffic, which, you know, may be a little more than that on Hospital Drive, but let's say five percent, then. Are you thinking something like five percent of the cost of the traffic calming, or what's your—?

COUNCILOR COSS: Yeah, I'm thinking five percent of the cost of traffic—you know, if their generation is five percent of it, then that would be, instead of just discussing it, and I guess I would ask the maker of the motion if that would be a friendly amendment, to say it's required, it's not just discussed. It's required.

COUNCILOR LOPEZ: Councilor, I need a clarification before I can. And that clarification is, somewhere I read that they were going to pay, this project was going to pay for fifty percent of the traffic calming at a particular intersection. And John's kind of shaking his head on that, so my concern would be that if five percent were less than that fifty percent, I don't think your deal is as good for us.

COUNCILOR COSS: I would fully agree, but I just read the condition as discuss rather than participate.

COUNCILOR LOPEZ: I'd be glad to change that from discuss to participate in additional traffic calming measures, and go with the fact that they've already agreed to pay for the fifty percent of that one intersection and see what could be done. In terms of mandating an actual percentage, I think I would prefer to leave that to staff to work.

COUNCILOR COSS: Oh, yeah, I don't want to mandate the percentage tonight.

COUNCILOR LOPEZ: So I would just simply say participate in additional traffic calming. Which, by additional, I do mean that fifty percent is part of that additional, to participate in traffic calming.

COUNCILOR PFEFFER: That's friendly to the second.

COUNCILOR COSS: Thank you. And I just have one other observation of having been Public Works director, and you know, it's good to put on a condition that says construction traffic can't go through the neighborhood. It's more often honored in the breach but never honored, you know, the Public Works director or the Traffic Engineer will get lots and lots of calls about construction traffic going through the neighborhood, and they will make lots and lots of calls to the developer, and he will promise on a stack of Bibles to tell the construction workers not to drive through the neighborhoods, and they will continue to drive through the neighborhoods until the project is done. And that's just based on experience.

MAYOR DELGADO: The only one who hasn't spoken is Councilor Ortiz.

COUNCILOR MATTHEW ORTIZ: Thank you, Mayor. How many parking spaces are being proposed, how many additional parking spaces are being proposed for this new building?

MAYOR DELGADO: Excuse me, if you would come up here, please. Yeah.

PROJECT PLANNER PAUL FLEHMER: I don't have the exact number, but I believe it's about, it's over two hundred and twenty, and all of the parking required for this project will be on the site.

COUNCILOR ORTIZ: And how many curb cuts are anticipated on Hospital Drive for this particular development?

MR. FLEHMER: We're just, there's, we're just moving one. We're not adding any.

COUNCILOR ORTIZ: So you're moving the one that's on the south, on the south side of the—

MR. FLEHMER: —Moving the northernmost one. There was a curb cut right there, which was handy, 'cause it was right in front of the building, but in an effort to move traffic further south, encourage people to head towards St. Michael [*sic*] Drive, we went back to the historic location. There was actually a curb cut there originally, so we're going back to that. It was changed in a previous plan to further north. But we're not adding any new curb cuts and that's the only change.

COUNCILOR ORTIZ: Okay. As I understand the discussion that's gone on regarding this particular master plan, I'd like to have the appellant actually state their position in terms of, is it your position that you do not have to comply with the resolution that was adopted in 1985? And in particular, I'll, it's paragraph two. [Reads:] The development master plans for each phase of development shall be submitted to the Planning Commission for their review and approval.

MR. BASHAM: Mayor, Councilor Ortiz, in response to your first question, no, that is not our position. Our position is that we fully comply with the resolution, the master plan and the underlying zoning. And with the respect to the language you're talking about, if I'm correct, I believe that Greg Smith addressed that earlier. That's where it says that development master plans for each phase of development shall be submitted to the Planning Commission? Well, in my humble opinion, that's exactly what we're doing.

COUNCILOR ORTIZ: Okay. So I guess I'd have a question, then, for the maker of the motion, 'cause as I understand it, we're moving for approval of this development; that is, once we give this approval, they're going to be able to break ground, and yet we're putting a condition on this that they have to continue a master plan process, and so, again, is it your intention as the maker of the motion that you are giving them approval to break ground, and then after they break ground, they've got to amend their master plan to conform with this new structure?

COUNCILOR LOPEZ: No, the way I see it is that, when we uphold this appeal, that the project is approved. But in the meantime, once this project is approved, there is a recognition that it might be time to look at the master plan again, in particular in the spirit of the three items that I added into my motion. One does not depend on the other. One is granting the appeal tonight, and that secondly is a condition that I believe is being agreed to tonight by the hospital, to proceed then with looking at how the master plan might be changed to deal with the traffic situations, to put more traffic onto St. Michael's Drive.

COUNCILOR ORTIZ: So as I understand the motion, then, Councilor Lopez, it's at the hospital's discretion to come up with amendments to the master plan in light of only the specific concerns that were mentioned, particularly traffic and circulation?

COUNCILOR LOPEZ: No. I think it's to look at the entire master plan, but tonight I've specifically identified those three particular areas that our staff, as represented by John Nitzel tonight, has indicated in preliminary talks with the hospital, that everyone's in agreement that there is progress and solutions to these issues. So therefore, I'm really kind of supporting what staff has believed to be possible and operated on the good faith in the public that that will continue. I have faith that John will keep after them, in terms of also with the traffic calming process will force the hospital to continue with this.

COUNCILOR ORTIZ: A question, then, for staff. In terms of the parking that has been put forward by the appellants, is the concern that was stated in the earlier October 2003 memo, then, satisfied regarding the concerns on parking on this particular site? I'm looking at page twenty nine, a staff memo that was prepared from John to Derrick. It's item, it's paragraph D. [Reads:] Existing offices in the area currently have inadequate parking and there are numerous cars parked on Hospital Drive, which creates potential safety problems; I do not know if the architect has responded to this.

MR. NITZEL: Councilor. Mayor. I could answer that. I think they have. We've restricted parking on, along this site on Hospital Drive. We've discussed with them about overflow parking. If they needed it, where it might occur. And from every indication we've gotten, there's additional parking on the St. Vincent site to accommodate that, so, but what we've tried to do is keep additional parking from encroaching on Hospital Drive, so, and I think they've addressed that as much as they can. That doesn't mean there aren't other sites down the street that are issues that we have to deal with as staff, so.

COUNCILOR ORTIZ: Do you anticipate an aggravation of that, of, cars park on Hospital Drive. They may not come from the hospital, but cars park on Hospital Drive. Do you anticipate an aggravation of that problem with the installation of traffic calming devices on Hospital Drive?

MR. NITZEL: Not necess—well, the existing parking would, there may have to be a few relocations of them, but we've also observed, and this is not related to them, there is parking on some of these sites in the rear, and so we may have to sit down with some of the businesses with parking operations or transportation operations, and resolve some of those. I mean, we do this in other parts of town, so, but we didn't want this exacerbated situation by their additional development, so, we got that dealt with, I think, in this situation.

COUNCILOR ORTIZ: That's all I have, Mayor.

MAYOR DELGADO: Councilor Bushee, Councilor Pfeffer.

COUNCILOR BUSHEE: Mayor, I just wanted to ask a little bit about the traffic calming. You know, there's sort of an irony there, because cars parked on Hospital Drive could serve as traffic calming, but I would like to find out, is the requirement that you're going to ask, all right, first, emergency vehicles, where will they enter from? Only St. Michael's? 'Cause I'm concerned about traffic calming on Hospital Drive if there's an emergency vehicle consideration.

MR. NITZEL: Councilor, Mayor, we would discuss that, and we've evolved traffic calming and we'll do that to address emergency vehicle issues, because they do come down Hospital Drive/Galisteo, and so the new traffic calming program procedures talk about that, and we go away more from tables to other things. So they can do what they have to do, so [inaudible]—

COUNCILOR BUSHEE: Okay, so you will accommodate that. Because as ideally, you know, to direct traffic onto St. Michael's entrance is ideal, but there are times when it's backed up on Old Pecos Trail and other areas, and obviously we don't want to limit emergency access.

MR. NITZEL: That's right.

COUNCILOR BUSHEE: Or make it more difficult.

MR. NITZEL: We don't want that loss, so you're right.

COUNCILOR BUSHEE: Okay, thank you.

MAYOR DELGADO: Good point, Councilor. Councilor Pfeffer.

COUNCILOR PFEFFER: Thank you, Mayor. I just would like to add briefly to Councilor Lopez' response to Councilor Ortiz' question concerning seemingly asking for a master plan to be updated to take care of this project later on, kind of after groundbreaking. I see it as this project already complies with the master plan that's in place, so it's not an issue about a new or revised master plan being made to, you know, to take care of this project. This project's already in compliance. But rather that that's something that's timely and necessary for the campus as a whole. Thank you, Mayor.

MAYOR DELGADO: You're welcome. Anybody else? Before I ask for the vote, as you know, as Mayor, I only get to vote in the case of ties. But if this decision and this appeal is upheld, I think we're going to do a tremendous benefit for the people of Santa Fe who live here, the residents of this city, and also of the northern New Mexico, because I know that I've been at St. Vincent's Hospital, and I meet families that are from all the way up to the Colorado line and even further north, that come to this hospital here. It's amazing. Sometimes you don't really think about how good is your hospital 'til you have to come there, or a loved one has to come there, then you think, I want the best. And as Mayor, I think we are taking a giant step to being the best. And with that, Yolanda, roll call, please.

CITY CLERK YOLANDA VIGIL: Councilor Ortiz.

COUNCILOR ORTIZ: Pass.

MS. VIGIL: Councilor Pfeffer.

COUNCILOR PFEFFER: Yes.

MS. VIGIL: Councilor Wurzbarger.

COUNCILOR WURZBURGER: Yes.

MS. VIGIL: Councilor Bushee.

COUNCILOR BUSHEE: Yes.

MS. VIGIL: Councilor Chavez.

COUNCILOR CHAVEZ: Yes.

MS. VIGIL: Councilor Coss.

COUNCILOR COSS: Yes.

MS. VIGIL: Councilor Heldmeyer.

COUNCILOR HELDMEYER: Explaining my vote. I really wanted to vote for this. I think you're right about attracting physicians. I think you're right about, you know, what this will do in terms of improving medical care. But if this really is the same as a phase of a master plan, which is what we're being told by staff, then it has to cover traffic and it has to cover some problems with, that, of things the hospital's [inaudible] that are not in concurrence with the current master plan, and I think, you know, you've come to us several times, Mark, and said we're the community hospital, support us, we're the community hospital. But there has to be some give-back to the community as well. And those were fairly minor things, that there was no movement on.

So I'm going to have to cast a very reluctant no.

MS. VIGIL: Councilor Lopez.

COUNCILOR LOPEZ: I'm casting a very enthused yes.

MS. VIGIL: Councilor Ortiz.

COUNCILOR ORTIZ: As I considered this particular case, I was struck by a couple of calls I received from constituents, constituents who are long-time employees of same day surgery. And those employees, that are not here because they're afraid for their jobs, told me that what is happening here is nothing more than what the hospital last year opposed, opposed vehemently in a community campaign, which is a campaign that takes away resources from nonprofit and community uses and puts it to for-profit uses. I wasn't convinced from any of the evidence and all of the letters of support that were provided, that all doctors could buy into this. I wasn't convinced that the hospital, in looking after the entire community, was looking after its own employees. I have a copy of a resolution that was adopted by the board of directors that does not give

protections to the people who are actually serving the patients after the doctors seek their care.

Because of that concern, because of the concern I've got with the vote here, in which there is an actual conflict of interest that's being cast by a Governing Body member, I believe that this vote is flawed, and I vote no.

MS. VIGIL: The motion has been approved.

[Break.]

Case #H-03-151 – APPEAL. An Appeal Filed by the New Mexico Association of Counties Regarding the Historic Design Review Board's October 28, 2003, Denial of a Request to Build an Addition That Exceeds 50% of the Historic Footprint of a Significant Building (14-5.2(D)2(d)) Located at 613 Old Santa Fe Trail in the Downtown and Eastside Historic District.

City Historic Preservation planner David Rasch reported as follows: "At their October 28, 2004 meeting, the Historic Design Review Board voted to deny the applicant's request for an exception to Section 14-5.2(D)2(d), which prohibits additions to Significant historic buildings that exceed 50% of the historic footprint.

"The historic footprint of the circa 1912 Antonio Valdez House is 2,066 square feet. During the period between 1982 and 1984, approximately 2,200 square feet, or 94 percent of the historic footprint, was added. At the time these additions were constructed, there were no provisions in the code restricting the amount of footprint that could be added to a Significant building.

"In 1998, the New Mexico Association of Counties applied to add 2,400 square feet (or another 116%) to the previously constructed addition to give a total additional footprint of 210% of the historic building. When the Historic Design Review Board reviewed this project on May 26, 1998 (Case #98-104), the 50% rule applied to Section 14-73.73B(4), which is now Section 14-5.2(D)2(d). This standard states that "additions are not permitted to Significant buildings if they exceed 50% of the existing historic footprint. The applicant requested an exception to this standard and stated that they would 'forge' further development on the property. The Board's decision was to approve the 2,400 square foot addition. As required, this exception was reviewed and approved by City Council in September 1998.

"On October 28, 2003, the Association of Counties applied for another exception to build additions comprising 750 square feet to the north and east elevations of the building. With these proposed additions, the total square footage of non-historic construction added to the Significant building would be 5,435 square feet, or 269% of the historic footprint. The Board's denial of the

City of Santa Fe, New Mexico

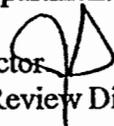
memo

DATE: Prepared February 3 for February 11, 2004 meeting

TO: Mayor and City Council

VIA: Jim Romero, City Manager 

Sandra Aguilar, Director 
Planning and Land Use Department

Jim Salazar, Division Director 
Permit and Development Review Division

Greg Smith, Planning Supervisor 

FROM: Derrick Archuleta, Senior Planner 

ITEM AND ISSUES

Case #A 2003-10. Appeal, Physician's Plaza of Santa Fe. The Governing Body of the City of Santa Fe will consider an appeal by Gary Frank M.D. individually and as a representative of St. Vincent Hospital of the decision made by the Planning Commission at their meeting on November 06, 2003 to deny Case # M-2003-34-Physicians Plaza of Santa Fe Development Plan. The property is located adjacent to the St. Vincent Hospital, bounded on the west by Hospital Drive. The property is zoned C-1 (Office and Related Commercial).

RECOMMENDATION

The City Council may uphold, conditionally uphold, or deny the appeal of the Planning Commission's decision to deny the development plan application.

- If the appeal is denied by the City Council and the action of the Planning Commission upheld, the development plan would be tentatively considered at the May 6, 2004 Planning Commission meeting subject to updating the St. Vincent Hospital Campus Master Plan (Exhibit 4).
- If the appeal is upheld, the appellant requests the City Council to reverse the decision of the Planning Commission and approve the development plan subject to Conditions of Approval

Exhibit 
3/2/04 PC

as recommended by staff. The applicant also supports Conditions of Approval as listed below:

CONDITIONS OF APPROVAL

Permit and Development Review Division

1. Comply with St. Vincent Hospital Campus Master Plan.
2. A note shall be placed on the Development Plan that the development of the property will be subject to the Water Allocation and/or Water Offset Retrofit provisions of Ordinance No. 2002-29 and Resolution 2002-55 at the time of permit application or water hookup request.
3. Comply with memo from Subdivision Engineer (Exhibit B of Staff Report)

Public Works-Traffic

4. Address redline comments on submitted plans dated 10/10/03 (Exhibit C of Staff Report).
5. Discuss possible additional traffic calming measures with City traffic-calming supervisor Carrie LaCrosse.
6. Provide street light location details on plan.
7. Provide permanent pavement marking and signing details on plan.

Landscape Review

8. Comply with comments from the Special Projects Administrator regarding landscape (Exhibit D of Staff Report)

Wastewater Division

9. Comply with memo from Wastewater Division (Exhibit E of Staff Report).

Solid Waste Division

10. Comply with comments from the Solid Waste Division Engineer (Exhibit F of Staff Report)

Fire Marshall's Office

11. Comply with memo from the Fire Inspector (Exhibit G of Staff Report)

EXECUTIVE SUMMARY

At the November 6, 2003 public hearing, the Planning Commission voted to recommend to the City Council denial of the request for a medical office building on two separate tracts of land adjacent to St. Vincent Hospital. The motion to approve the development plan failed 5-3. A second motion was made to postpone the request until a revised master plan of the St. Vincent Hospital Campus Master Plan was completed that addressed parking and to include a beltway within the site which

begins and ends on St. Michael's Drive as a method to alleviate traffic from the neighborhoods. This motion passed 8-0.

The request seeks development plan review and approval of a two story 52,000± gross square foot building. The project is proposed to be located in the northwest corner of the St. Vincent Hospital Campus with a total area of approximately 4.564± acres.

St. Vincent Hospital and Dr. Gary Frank, M.D., St. Vincent's Chief Medical Officer have appealed the Planning Commission's decisions and actions taken on Physician's Plaza of Santa Fe. The bases for appeal revolve around the development plans' compliance with the Santa Fe City Code and the requirement that St. Vincent Hospital update its master plan prior to proceeding with this project.

BACKGROUND

The proposed development will consist of a two story 52,000± gross square foot medical office building on two separate tracts of land adjacent to St. Vincent Hospital. The project is proposed to include an ambulatory surgery center, surgeon's offices and allied outpatient services.

The medical office building will provide outpatient services with daytime operation only. The 52,000± square foot building is proposed to be two stories. The ground floor includes 27,168 gross square feet with the upper level at 24,832 gross square feet.

A. APPEAL ISSUES

The site is part of the St. Vincent Hospital Campus Master Plan which was adopted in 1985. The master plan and rezone for 40.3 acres on the northeast corner of Hospital Drive and St. Michael's Drive was approved by City Council under Resolution 1985-36 and Ordinance 1985-15. The master plan was designed to provide for the current and long range needs of the hospital campus, serving as a guide for future development. Locational criteria and standards for uses are set forth in the master plan establishing guidelines for development activities on the property.

The appellant states that compliance with the current Santa Fe City Code and St. Vincent Hospital Campus Master plan has been achieved and did not warrant a denial by the Planning Commission on November 6, 2003. In addition, the requirement that St. Vincent Hospital amend its master plan prior to considering the Physician's Plaza development plan was "without authority and contrary to law" according to the appellant.

At the November 6, 2003 meeting, the Planning Commission voted 5-3 to defeat a motion to approve the request. The Commission then took a second vote to adopt a motion to postpone the case. They felt an updated St. Vincent Campus Master Plan would impact this project, especially the parking and internal circulation. In the update they also wanted to see a proposal for an on campus beltway which begins and ends on St. Michael's Drive as a method to alleviate traffic from the neighborhood. This motion passed 8-0 (Exhibit 3).

The Planning Commission's subsequent motions at the November 20, 2003 meeting regarding the request have also provided a basis for appeal. The request was not listed on the Planning Commission's agenda for November 20, which did not include notification to the applicant that the

case would be discussed. The appellant feels this is a violation of the New Mexico Open Meetings Act. The Commission felt the need to revisit the case on November 20 because it had been suggested that they didn't follow Robert's Rules of Order on November 6.

At the November 20, 2003 meeting, the Planning Commission postponed the request to the May 6, 2004 public hearing with a friendly amendment (Exhibit 4). The friendly amendment was included and approved which allows the application to be considered earlier than May 6, if the St. Vincent Hospital Campus Master Plan is updated (Exhibit 5). It is not clear whether there is a Resolution and Ordinance that gives the Planning Commission the authority to require retroactive master plan amendments when considering development.

As per the interpretation of the City Attorney, the November 6 vote to defeat the motion to approve has the effect of denying the application and should be considered final action. Under that interpretation, the motion to postpone and subsequent action taken at the November 20, 2003 Planning Commission meeting would not be in order.

B. ST. VINCENT HOSPITAL CAMPUS MASTER PLAN

The development is subject to compliance with the density, zoning and land use established by the St. Vincent's Hospital Campus Master Plan adopted in 1985. No variances are being requested to the zoning regulations or the master plan. The master plan sets forth development standards and siting criteria to serve as a basis for physical implementation of the plan.

Development standards address issues such as height, floor area ratio, setbacks and open space. The campus is divided into four Areas, the Physician's Plaza site falls within Area 3 (Northern Campus) as defined in the master plan (Exhibit 2).

The following table reflects Area 3 Standards and what Physician's Plaza proposes:

Area 3 Standards	Master Plan	Physician's Plaza
Permitted Height	36 feet	31 feet
<ul style="list-style-type: none"> within 120 foot overlay zone 	18 feet	18 feet
Floor Area Ratio	0.65	0.26
Building Setbacks		
<ul style="list-style-type: none"> Hospital Drive 	20 feet	28 feet
<ul style="list-style-type: none"> northern boundary 	50 feet	100 feet
<ul style="list-style-type: none"> multi story buildings from northern boundary 	120 feet	130 feet
<ul style="list-style-type: none"> parking from a public right-of-way 	10 feet	15 feet
<ul style="list-style-type: none"> parking from northern boundary 	15 feet	25 feet
Open Space	20%	35%

Siting or locational criteria in the 1985 master plan were developed for medical and related services within the developing (vacant) area. The criteria proposed a method for rationally determining the

optimum siting of medical and related services within the "Developing Area" of the campus. The four locational criteria included and incorporated the following: access, visibility, terrain and noise. On a conceptual level, four areas evolved from the locational criteria. The Physician's Plaza site falls primarily within Area 1 and a very small portion in Area 2 as defined in the master plan (Exhibit 2).

The Area recommendations for the Physician's Plaza site include the entire spectrum of medical and related uses envisioned for the campus. Proposed uses for the project are supported and recommended for Areas 1 and 2.

The City has reviewed and approved several minor additions to the St. Vincent Hospital campus which did not require a public hearing. Neighborhood and Planning Commission concerns revolved around the increased traffic along Hospital Drive and the continued dependence on this roadway as the major access to the St. Vincent Hospital campus rather than St. Michael's Drive. St. Vincent Hospital agreed and as part of updating the master plan, those issues would be addressed by improving internal circulation and encouraging greater use of St. Michael's Drive. The applicant has also participated in addressing the impacts of traffic specific to their project.

Attached: Exhibit 1 – Petition of Appeal
Exhibit 2 - Staff Report to Planning Commission 11/06/03
Exhibit 3 – Planning Commission Minutes 11/06/03*
Exhibit 4 - Planning Commission Minutes 11/20/03*
Exhibit 5 – Planning Commission Notice of Decision letter 12/15/03
Exhibit 6 – Planning Commission Amended Notice of Decision letter 12/22/03
Exhibit 7 - Preliminary Development Plan and Supporting Documents**

* To be provided to Council prior to meeting, when available.

**Enclosed in Council packets. Copies on file for public review at Permit and Development Review office at City Hall.

FINDINGS

1. This request is for development plan review for a 52,000± gross square foot medical office building on two tracts of land adjacent to St. Vincent Hospital.
2. The property is zoned C-1 (Office and Related Commercial) and is designated Institutional on the Future Land Use Map of the 1999 General Plan.
3. The site is part of the St. Vincent Hospital Campus Master Plan and falls within the Northern Campus as defined in the Plan.
4. The request is consistent with density, zoning and land use policies and criteria of the Santa Fe City Code and the General Plan.
5. The development is in compliance with the Development Standards for Area 3 and Siting Criteria for Area 1 as established by the St. Vincent Hospital Campus Master Plan.
6. This request is consistent with the health, safety, and general welfare of the residents of the City.

EXHIBIT 1

MISCELLANEOUS APPLICATION

APPLICANT ST. VINCENT HOSPITAL
ADDRESS 455 St. Michaels Drive
CITY/STATE Santa Fe, NM ZIP CODE 87505 TELEPHONE 983-3361
OWNER ST. VINCENT HOSPITAL

(Owner's signature is required if owner is not applicant.)

ADDRESS (same as above)
CITY/STATE _____ ZIP CODE _____ TELEPHONE _____

Type of Request Appeal of Planning Commission Decision

Name of Project Physician's Plaza of Santa Fe

Project Location Tract B-1 and B2-A, St. Vincent Hospital, projected section 36, T. 17N., R.9E, N.M.P.M., City of Santa Fe, County of Santa Fe, NM
If within existing subdivision:

Subdivision n/a Lot n/a Block n/a

Total Acreage 4.5639

FOR OFFICIAL USE ONLY

Grid _____

Census No. _____

Date of Pre-Application Conference _____

Staff Liaison _____

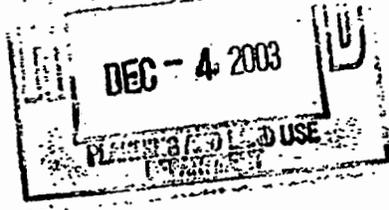
Committee Meeting Date _____

Case No. _____

Application Received by _____ Date _____

Proper Submittals Yes No

Filing Fee Paid: Check No. _____ Amount _____ Receipt No. _____



VERIFIED PETITION FOR AN APPEAL

I, Gary Frank M.D. (St. Vincent's Chief Medical Officer and practicing physician), individually and as a representative of St. Vincent Hospital being individually sworn on my oath deposes and states the following:

Procedural History

Case #M 2003-34 was heard by the City of Santa Fe's Planning Commission on November 6, 2003. The Planning Commission was asked to approve a development plan for a two story medical office building on the St. Vincent Campus, otherwise known as Physicians Plaza of Santa Fe. After the public hearing closed, a motion was made to approve the application. The motion to approve failed. A second motion was made that the application be postponed until a new hospital master plan is presented to the Commission for review and approval. This motion passed unanimously.

Upon hearing that the applicant intended to appeal the Commission's denial of its application to the City Council, at the conclusion of the Commission's November 20, 2003 meeting, the Commission made numerous motions in an attempt to prevent the applicant from appealing this matter to the City Council. The sum of these motions is that the Commission attempted to erase the November 6, 2003 denial of the application and require St. Vincent to amend its master plan.

This appeal is brought forward in accordance with SFCC Section 14-3.17(A).

Bases for Appeal

November 6, 2003 Planning Commission Meeting:

The applicant appeals the November 6, 2003 Planning Commission's denial of its application. Planning and Land Use staff recommended approval of the application. On page 4 of its MEMO to the Planning Commission staff states:

"The development is in compliance with the density, zoning, and land use established by the St. Vincent's Hospital Campus Master Plan. No variances are being requested to the zoning regulations or the master plan." Notwithstanding the fact that the application met all SFCC requirements, the Planning Commission denied the application by redirecting attention away from the application's Code compliance. Commissioner Lujan focused on whether employees from St. Vincent Same Day Surgery will be "guaranteed jobs in the new facility." See, Planning Commission Meeting minutes, November 6, 2003, page 8, paragraph 7. Commissioner Lujan also stated (incorrectly) that "St. Vincent Hospital is now a for-profit operation ... it is selling off its land [and that he] has a very serious problem with this project." See, Planning Commission Meeting minutes, November 6, 2003, page 9, paragraphs 1 and 4. Moreover, the November 6, 2003 minutes are replete with testimony and discussion regarding helicopter noise and amending the master plan, both of which are totally unrelated to this application. See, e.g., Planning Commission Meeting minutes, page 6, paragraphs 3 and 4; page 7, paragraphs 4 and 7; and, page 8, paragraphs 3 and 5. Ultimately, the Planning Commission voted to postpone this application until St. Vincent comes forward with an amended master plan. This motion was in and of itself out of order as the Planning Commission had already denied the application. Nonetheless, the requirement that St. Vincent amend its master plan is an *ultra vires* act (i.e. without authority) and contrary to law. Until the SFCC is amended to grant the Planning

Commission authority to require a master plan amendment for this application, the city of Santa Fe has no power to impose that requirement. As Judge Hall recently opined in a county of Santa Fe case: *"The existence of a review and approval procedure alone cannot grant unlimited authority to deny or condition approval of activities permitted under the applicable ordinances. The review and approval requirement must be viewed as the ability to review applications to determine their compliance with existing requirements, not the opportunity to add new requirements."* Coppola v. EZA of Santa Fe County, D0101CV00099-03055.

For the above reasons, the applicant respectfully requests that the City Council reverse the decision of the Planning Commission and approve Case # M 2003-34.

November 20, 2003 Planning Commission Meeting:

The Planning Commission's subsequent motions at its November 20, 2003 meeting regarding this application also provide a basis for an appeal to the City Council. Those motions were contrary to law. They were unlawful in that they violated the New Mexico Open Meetings Act. The St. Vincent application was not listed on the Planning Commission's November 20, 2003 agenda. The applicant was not notified that its application would be discussed. In sum, the right to "attend and listen" (which is the foundation for the New Mexico Open Meetings Act) was denied to the applicant by the Planning Commission.

After dissecting the Planning Commission's November 20, 2003 actions and motions regarding this application, it becomes abundantly clear that the Commission is

unlawfully requiring that the applicant amend its master plan. For all the reasons stated above, this Council should reverse the Planning Commission, discard the amendment to the master plan requirement, and approve Case # M 2003-34.

VERIFICATION

STATE OF NEW MEXICO }

}ss.

COUNTY OF SANTA FE }

Gary Frank, M.D., being duly sworn, deposes and states that I have read the foregoing petition for an appeal and know the contents thereof and state that the same are true to his knowledge.

Gary Frank, M.D.

Subscribed and sworn to me before this 4th day of December 2003.

Nancy C. Spei

Notary Public

My Commission Expires:

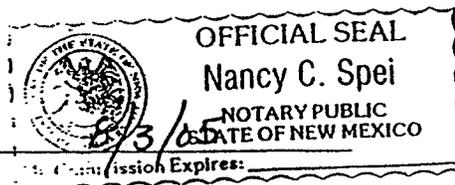


EXHIBIT 3

Staff report was given by Marian Shirin, which is contained in Exhibit "1."

Ms. Shirin said the Public Works Committee heard the ordinance at its last meeting, and recommended approval subject to the Committee amendment which is in the Committee packet [Exhibit "1"]. The Capital Improvement Advisory Committee recommends approval as well.

Staff recommends that the Commission recommend the adoption of the proposed ordinance amendments to the Governing Body.

Public Hearing

Those Speaking to the Request

There was no one speaking to the request.

The public testimony portion of the public hearing was closed.

Questions and Comments from the Commission

MOTION: It was moved by Commissioner Abeyta, seconded by Commissioner Lovato, with regard to Case #CA-2003-10, that the Planning Commission recommend adoption of the proposed ordinance amendments to the Governing Body as recommended by staff.

VOTE: There being no dissenting or abstaining votes, the motion carried unanimously.

2. **Case #M-2003-34. Physicians Plaza of Santa Fe Development Plan.** Paul Flehmer-Marshall Erdman & Associates, agent for St. Vincent Hospital, requests development plan approval for a two story medical office building of approximately 50,000 gross square feet on two tracts of land with a total area of approximately 4.564 acres. The property is zoned C-1 (Office and Related Commercial) and is located adjacent to the St. Vincent Hospital, bounded on the west by Hospital Drive. (Derrick Archuleta)

Memorandum prepared October 24 for November 6, 2003 meeting, with attachments, and additional Attachment #2, to the Planning Commission, from Derrick Archuleta, Senior Planner, is incorporated herewith to these minutes as Exhibit "2."

A copy of "Preliminary Findings of Neighborhood Helicopter Task Force," by Bob Walsh, introduced into the record by Claiborne Booker, is incorporated herewith to these minutes as Exhibit "2(A)."

A copy of "New Mexico Life Rescue Summary of Operations," compiled by Claiborne Booker, San Mateo Neighborhood Association, is incorporated herewith to these minutes as Exhibit "2(B)."

Staff report was given by Derrick Archuleta, is contained in Exhibit "2." Staff recommends approval subject to the following conditions based on consistency with the approved St. Vincent Hospital Campus Master Plan:

1. Permit Development Review Conditions

1. Comply with St. Vincent Hospital Campus Master Plan.
2. A note shall be placed on the Development Plan that the development of the property will be subject to the Water Allocation and/or Water Offset Retrofit provisions of Ordinance No. 2002-29 and Resolution 2002-55 at the time of permit application or water hookup request.
3. Comply with memo from Subdivision Engineer (Exhibit B)

Public Works-Traffic

4. Address redline comments on submitted plans dated 10/10/03 (Exhibit C).
5. Discuss possible additional traffic calming measures with City traffic-calming supervisor Carrie LaCrosse.
6. Provide street light location details on plan.
7. Provide permanent pavement marking and signing details on plan.

Landscape Review

8. Comply with comments from the Special Projects Administrator regarding landscape (Exhibit D)

Wastewater Division

9. Comply with memo from Wastewater Division (Exhibit E).

Solid Waste Division

10. Comply with comments from the Solid Waste Division Engineer (Exhibit F)

Fire Marshal's Office

11. Comply with memo from the Fire Inspector (Exhibit G).

Public Hearing

Paul Flehmer, 350 Interlocking Parkway, Broomfield, Colorado, representing the applicant was sworn. Mr. Flehmer introduced Drew Scherer, a development consultant who has worked with the physicians to create the ownership entity which will own the building, and who will be assisting him in his presentation.

Mr. Flehmer said this project was initiated by Santa Fe Physicians over a year ago, with goals to improve ambulatory surgery care, to expand services, to remain close to St. Vincent's Hospital, and to retain and recruit physicians with these improved medical facilities. This would maintain Santa Fe as a viable, regional health care center.

Mr. Flehmer said the office facility proposed is state of the art, developed exclusively for health care. The facility exceeds all criteria set forth in the 1984 Hospital Campus Master Plan, and nothing proposed by this facility to cause the hospital campus to go out of compliance with that Master Plan. The Hospital will be reviewing and updating its current Master Plan.

Mr. Flehmer said neighborhood and individual meetings were held with neighbors of the site. The developer addressed issues of location, including on which side of the Hospital Campus this facility will be built. Other issues were addressed as well.

Mr. Flehmer described the proposed facility using large drawings. The building is a two-story which terraces to one story. The original plan was for a three-story building with mechanical on the roof. It is now a two-story building, and the mechanical has been moved inside the building. The landscape buffer has been increased along the north side to include parking lot lighting and improved fencing to address neighborhood concerns about security. A curb cut was closed, and traffic access and egress was moved to the southernmost portion of the property to encourage more access and egress from St. Michael's Drive. Traffic calming devices were incorporated into a pedestrian crosswalk which would allow patients and staff to move between the facility and the Imaging Center.

Mr. Flehmer said all parking is on site, with a zone for patient parking and drop-off. There will be an opportunity for patients to exit the surgery center without having to go back through the Hospital lobby, which he demonstrated with enlarged drawings.

Mr. Flehmer said traffic mitigation efforts include participation in the proposed roundabout at San Mateo/Galisteo, in the traffic calming devices and in the work on the intersection at Hospital Drive and St. Michael's, all of which are more than required for the volume of traffic impact.

Those Speaking in favor of the Request.

There was no one speaking in favor of the application.

Those Speaking Against the Request

Claiborne Booker, a member of the Board of San Mateo Neighborhood Association, 320 Cadiz Road, was sworn. Mr. Booker said 4½ years ago the Planning Commission approved a change to the Hospital Zone requirements which relaxed the rules requiring medical use only around the campus of St. Vincent Hospital. As a result, over time number of non-medical uses have moved into this area originally designated for medical uses. This project is essentially "a work around the fact that there was other land available, and other buildings available earlier on, but now those buildings are occupied by other non-medical services, and

now we are being asked to take on a 50,000 sq. ft. medical office building in the middle of a residential neighborhood.”

Mr. Booker said, with regard to the interaction with the neighborhood, Mr. Flehmer is correct in many ways in describing his interaction with the neighbors and their concerns about lighting and traffic patterns and the like, although not as felicitously as described by Mr. Flehmer. Many of the neighbors are still very concerned about the aspects of light pollution, adherence with “dark sky” ordinances. He said the Commission needs to be mindful of those concerns, none of which have been fully addressed, although admitting that this is early in the process.

Mr. Booker said there is something which neither Mr. Archuleta nor Mr. Flehmer discussed, which sits as “the elephant in the corner” that no one seems to want to talk about, which is the conversation and letter that he wrote on behalf of the San Mateo Neighborhood Association on June 30, 2003, which was reiterated in his letter of September 8, 2003 which is in the Committee packet. He noted that the neighborhood was going to link, inextricably, the issues of this building project to the larger issues of traffic and noise in the neighborhood. Although there has been talk about a traffic management plan, there has been no discussion about a noise abatement plan. Most of the concerns about noise are about the helicopter service at the airport, noting that there will be a second heliport at the site.

Mr. Booker distributed copies of “New Mexico Life Rescue Summary of Operations,” which he compiled. [See Exhibit “2(B).”] Mr. Booker said his interpretation of this data indicates that in the last 165 days there have been 278 total helicopter missions, which is about 1.7 missions a day – 3 takeoffs and landings per day. The noise levels for each of the takeoffs and landings are consistently in excess of 78-85 decibels at the time of takeoff, admittedly lasting only a minute, but that one minute interrupts the daily activities of the neighborhood [noise measured 150-300 ft. from the helipad]. The Hospital, despite neighborhood entreaties, has not engaged in a forthright dialogue on the issue of noise abatement, and until that time the Planning Commission should and must reject this project.

David Barker, 1805 Arroyo Chamiso, was sworn. Mr. Barker has been one of the spokespersons for the proposed development for the past three years, and he is hugely concerned about the impact of this facility. He endorses and encourages St. Vincent’s building such a facility because it will be beneficial and helpful to Santa Fe and the medical community. However, he strongly urges the Commission to deny this application because traffic issues have not been addressed. He acknowledged the applicant has addressed the easier issues, such as building height, lighting, building profile and such, but has been “essentially silent and dodged the issue of traffic.” Medical use is hugely intensive, and is hugely invasive in the San Mateo and Galisteo neighborhoods. The Hospital’s original access was designed and built off St. Michael’s and through the years that traffic has come more and more onto Hospital Drive which encourages travel through the neighborhood instead of the major arterials such as St. Francis, St. Michael’s and Old Pecos Trail. This needs to be changed. The applicant’s participation in

traffic calming is not enough. The applicant's statement that they will look at the master plan to see what they can do, are not enough.

Mr. Barker suggested as a condition of approval, the applicant be required to work with the neighborhood and with the City to come up with a very specific plan for encouraging the traffic flow to and from St. Michael's Drive and the major arterials and out of the neighborhoods.

Bob Walsh, 1553 Camino Amado, was sworn. Mr. Walsh has been working with a neighborhood helicopter task force. Mr. Walsh distributed copies of a report which he prepared, "Preliminary Findings of Neighborhood Helicopter Task Force," to members of the Commission. [See Exhibit "2(A)."]

Mr. Walsh said they want to maintain a regional health care center, noting the location of the Hospital was approved for a community hospital, and not for a regional health care center which is a major industrial activity as evidenced by the enormous amount of noise being experienced by their old, low density neighborhood. The development is not adjacent to the hospital as represented by the applicant, but adjacent to homes on ½ acre lots. The plan available this evening describes a 3-story building, and not two story as represented by the applicant. Mr. Walsh said in addition to the noise described by Mr. Booker, there is the warm up time for the helicopter which is longer in cold weather.

Chair Werner asked Mr. Walsh if he was going to tie the current helicopter situation to the proposed development. Mr. Walsh said this is part of a long term plan which "they are trying to bring in piece by piece" which is turning this into an industrial neighborhood and the neighbors object to "their bringing things in one at a time." He said because of the publicity, it is necessary to point out that helicopters are not saving lives. "Every medical helicopter service previously started in New Mexico has had at least one fatal accident. Even neglecting accidents, helicopter patients have a lower survival rate than patients transported by ground." It could be argued that this is because they have more acute health problems. He said, however, "published medical studies have looked into this...and found no benefit for helicopter transports." The transports are expensive, divert financial resources from other helpful medical procedures, and don't take into consideration the effect on public health. He said, "Noise is detrimental to public health."

Chair Werner told Mr. Walsh the Commission understands the piece-by-piece objections, and said it is not necessary to read his statement to the Commission.

Mr. Walsh said the additional helicopter base was prohibited by the master plan. The master plan provides that development must respect the residential character of the neighborhood. He said noise reduces property values. He said the neighborhood is consulting its lawyers and holds both the Hospital and the City responsible.

The public testimony portion of the public hearing was closed.

Questions and Comments from the Commission

Commissioner Abeyta said Mr. Archuleta's staff report, on page 5, under Traffic/ Transportation, Roads, states that, "St. Vincent's Hospital is in the initial stages of updating its master plan." He asked Mr. Archuleta the purpose of the update in the master plan, and when that will be completed.

Mr. Archuleta said that statement is based on a letter from the Hospital which is in the packet, stating that the Hospital is in the process of, and evaluating the needs to, update the master plan.

Commissioner Abeyta asked if the Hospital has submitted an application for the master plan amendment. Mr. Archuleta said it has not submitted an application as of this time.

Commissioner Abeyta asked how much vacant land is available within the master plan area. Mr. Archuleta said this is one of the first parcels in the master plan campus which is being development, and there is still quite a bit of property left to be developed.

Commissioner Abeyta asked if the primary access to the master plan area is off Hospital Drive. Mr. Archuleta asked if he is speaking to access to the campus or to this development. Commissioner Abeyta said he is speaking about the campus. He is concerned because the traffic is already pretty bad in this area. He noted the Commission has approved other developments on the opposite side of St. Michael's Drive, and along Galisteo Drive across from the school. He understands the neighborhood concerns about traffic, and since there will be increased traffic from this project, he wants to see the big picture prior to considering this proposal, since it is to be done piece-by-piece, especially if there is to be a master plan amendment.

Commissioner Lujan asked if the Same Day Surgery Center is being closed to open this facility. Mr. Flehmer said the one currently operating in the Hospital will be closed.

Commissioner Lujan asked if all the employees who are losing their jobs with the closing of the center, will be guaranteed jobs in the new facility. Mr. Flehmer said the staffing requirements will be quite the same as in the current center, and with a more successful center might have more employees. Commissioner Lujan said, but they're not guaranteed a job. Mr. Flehmer said no, but they wouldn't necessarily lose their jobs and might be reassigned to other positions in the hospital. The in-hospital surgeries might increase as a result of the additional space. He stressed that he doesn't know the Hospital's business plan.

Commissioner Lujan said St. Vincent's Hospital is now a for-profit operation. Mr. Flehmer said it is supporting the physicians to do their own surgery center who will be given only a ground lease.

Commissioner Lujan said about a year ago, St. Vincent's Hospital strongly opposed other physicians building a new 20 bed hospital, and now it is coming before the Commission to support other physicians which will be building a facility on the hospital property.

Mr. Flehmer said these are a large number of physicians which currently have practices in Santa Fe and feel this facility is an important part of being able to retain physicians and recruit new physicians to Santa Fe. He doesn't know that much about the other project referenced, but he said it is important to look at the number and mix of physicians behind the project, as opposed to private developers, which would give a good sense of the character of this project versus that project. That project was for a hospital, and this proposal is for improved day surgery. The physicians spoke with their colleagues around the country and realized this community is under served in terms of the quality of out-patient surgery that patients could have in Santa Fe.

Commissioner Lujan understands and totally in favor of improved health care in Santa Fe, and said St. Vincent's Hospital is the best medical facility in Northern New Mexico. His problem is St. Vincent's Hospital's previous opposition, which is now supporting its physicians' building of this facility. St. Vincent's is for-profit, and yet it is selling off its land. He has a very serious problem with this project.

Commissioner Martinez asked when the new, amended Hospital Master Plan will be ready. Mr. Flehmer said probably in late Spring 2004. He said it is important to understand that this isn't something which needs to be done, but is part of a relationship with the City whereby St. Vincent's has agreed to look at some of these things since the old master plan is from 1984. Nothing that the new study would involve would change anything about how a building on this site would access Hospital Drive or traffic patterns. He reiterated the applicant has done quite a bit to deal with traffic issues, contrary to Mr. Barker's remarks. He said the applicant has met "muster" with City Engineer John Nitzel, who is one of the best and most thorough traffic engineers with whom he's dealt.

Gary Frank, Chief Medical Officer at St. Vincent's Hospital, was sworn.

Rick Crabtree, Vice-President of Facilities, St. Vincent's Hospital was sworn. Mr. Crabtree said the Hospital has contracted with an architectural firm on the master plan, it is in progress, and he anticipates a draft will be ready for review in late Spring 2004.

Commissioner Martinez asked Mr. Crabtree if there is an indication in the new draft of how St. Vincent's proposes to change the traffic pattern. Mr. Crabtree said there is no indication at this point.

Commissioner Ingram asked if the construction of this facility is expected to increase the number of helicopter flights. Mr. Flehmer said it is not, and this is totally unrelated. Mr. Flehmer, responding to Commissioner Ingram, demonstrated the location of the new facility in relationship to the Hospital on the enlarged drawings.

Commissioner Ingram asked if the applicant would agree to a condition of approval which would add language to Condition #5, as follows: "Discuss possible additional traffic calming measures with the City traffic-calming supervisor Carrie La Crosse including discussing ways to encourage rerouting of traffic to St. Michael's Drive."

Mr. Flehmer said yes, although this issue has been addressed to the extent possible on their property, which are the turn lane and improvements to St. Michael's and Hospital Drive. He said the roundabout was not initiated by the applicant, but participation by the applicant in the costs will mitigate some of the traffic volume issues going North. He wants to respond affirmatively to the condition, but he is at a loss as to how to do that, because "as far as our project goes, we've really done that."

Commissioner Lujan asked if a traffic study is included in the revised master plan which will address Commissioner Ingram's concerns. Mr. Flehmer said absolutely. A traffic impact analysis must be done in order to go through a master plan update with the City. He said approval of this project doesn't change this Commission's ability to give input to the Campus master plan at the appropriate time. This is a separate issue.

MOTION: It was moved by Commissioner Lovato, seconded by Commissioner Shanahan, that Case #M-2003-34 be approved with conditions as recommended by staff.

ROLL CALL VOTE:	Commissioner Martinez	No
	Commissioner Abeyta	No
	Commissioner Gonzales	No
	Commissioner Lujan	No
	Commissioner Starr	No
	Commissioner Ingram	Yes
	Commissioner Lovato	Yes
	Commissioner Shanahan	Yes

The motion was defeated by a majority of all those voting in the negative.

MOTION: It was moved by Commissioner Martinez, seconded by Commissioner Lujan, that Case #M-2003-34 be postponed because the new Hospital master plan will impact this project, especially the parking, and when the master plan comes before the Commission, he would like to see a proposal for a beltway in the master plan which begins on St. Michaels and ends on St. Michaels which will alleviate all traffic from the neighborhood.

ROLL CALL VOTE:	Commissioner Martinez	Yes
	Commissioner Abeyta	Yes
	Commissioner Gonzales	Yes
	Commissioner Ingram	Yes
	Commissioner Lovato	Yes
	Commissioner Lujan	Yes
	Commissioner Shanahan	Yes
	Commissioner Starr	Yes

The motion was passed unanimously by all those voting in the affirmative.

3. ~~**Case #M-2003-42. Thornburg Office Campus. Richard Gorman agent for Thornburg Companies, requests preliminary and final development plan approval for an office campus with a total of approximately 100,581 square feet of building floor area. The property is zoned PRC for SC-1 (Planned Residential Community for Shopping Center-1) and is located on 7.022 acres of land at the western boundaries of Tract 9A of the Santa Fe Estates Subdivision. The proposed development includes requests for approval of alternate methods of compliance to parking standards and landscaping. The property is located at the south side of North Ridgetop Road midway between the 599 bypass and Avenida Rincon. (Ron Quarles)**~~

~~Memorandum prepared October 24, for November 6, 2003 Planning Commission meeting, with attachments, and additional Attachments #3(A-1), #3(A-2) and #3(A-3), to the Planning Commission, from Ron Quarles, Permit & Development Review Senior Planner, is incorporated herewith to these minutes as Exhibit "3."~~

~~Information on the Project from the Thornburg Companies, introduced by Richard Gorman, is incorporated herewith to these minutes as Exhibit "3(A)."~~

~~Letter dated November 4, 2003, from the Concerned Residents of Santa Fe North, Inc., to the Planning Commission and City Attorney Bruce Thompson, is incorporated herewith to these minutes as Exhibit "3(D)."~~

~~Letter dated November 4, 2003, from Richard Keeffe, President of the Tano Road Association, to the Planning Commission and Mr. Quarles, is incorporated herewith to these minutes as Exhibit "3(E)."~~

~~Letter dated October 7, 2003, from Jay Winter, President, Blue Chip Insurance, to Ms. Monica Montoya, is incorporated herewith to these minutes as Exhibit "3(F)."~~

Commissioner Ingram asked if the version before the Commission the one which will go to the City Council, or if it will be further refined before going to the Council. Ms. Price said the version resting at the Public Utilities Committee.

Chair Werner said there could be a proposed amendment by a City Councilor, so there is no way of knowing what would go before the Council on December 10th.

CLARIFICATION OF MOTION: Commissioner Ingram said then a "yes" vote is to recommend that the City Council not pass this ordinance as it sits before the Commission. Chair Werner said this is correct.

VOTE: There being no dissenting or abstaining votes, the motion carried unanimously.

G. BUSINESS FROM THE FLOOR

There was no business from the floor.

H. STAFF COMMUNICATIONS

Memorandum dated November 6, 2003, to the Planning Commission, from Permit and Development Review, regarding additional correspondence, is incorporated herewith to these minutes as Exhibit "5."

Memorandum dated November 10, 2003, for November 20, 2003 meeting, to the Planning Commission, from Jim L. Salazar, Permit & Development Review Director, is incorporated herewith to these minutes as Exhibit "6."

L. MATTERS FROM THE COMMISSION

Commissioner Gonzales

Commissioner Gonzales asked how to reconsider action taken at the previous meeting on the Physician's Plaza under Robert's Rules of Order.

Chair Werner said it has been suggested that the Commission didn't follow Robert's Rules of Order in acting on Case #M-2003-34, Physicians Plaza of Santa Fe at the November 6th meeting. At the November 6, 2003 meeting the Commission voted on a 5-3 votes, to defeat a motion to approve this case. The Commission then voted by an 8-0 vote, to adopt a motion to postpone the case. It has been suggested that the vote to defeat the motion to approve had the effect of adopting a motion to deny the application and was a final action on the application, and therefore a motion to postpone would not be in order.

Chair Werner said he is not sure that this characterization of the Commission's action under Robert's Rules is correct. Nevertheless some Commissioners have expressed a desire to reconsider the motions and make the Commission's actions clear.

Chair Werner said the reason for the postponement was that staff had stated that St. Vincent's hospital is in the initial stages of updating its master plan, and that traffic planning goals include improving internal traffic circulation and encouraging greater use of St. Michael's Drive as an entry/exit to the St. Vincent's campus. Revisions to the master plan would be subject to the City approval process. Some Commissioners expressed their resolve to review these master plan amendments before consideration of the Physician's Plaza application to see if some of the new traffic generated by the Physician's Plaza project could utilize possible new, internal traffic circulation for entry and exit on St. Michael's Drive rather than on Hospital Drive, as shown on the current application, thus addressing long standing concerns of the neighbors of St. Vincent's.

Chair Werner said if the Commission wishes to address this procedural uncertainty, a motion to reconsider the two motions passed at the November 6th meeting would be in order.

Commissioner Lujan said under Robert's Rules, someone voting in the minority would have to be the person who proposes the action we take.

Chair Werner clarified that Robert's Rules provides that, regarding a motion to reconsider, the motion must be made by someone who was on the prevailing side of the vote, the majority.

Commissioner Lujan asked if this would be based on the second motion or the original motion.

Chair Werner said if the desire of the Commission is to make the record reflect what some Commissioners seem to believe is what we intended to do, the cleanest way to do it would be to reconsider both motions, and reconsider the motion to postpone first.

Commissioner Lujan asked what happens if that vote passes. [There was no response to this question before Commissioner Lovato was recognized to speak.]

Commissioner Lovato said he agrees with the intent, but he doesn't agree with the Chair's stipulation of how we are to go about that.

Chair Werner said he was just stating a way of doing clearly what some of the Commissioners would like to do so it would be clear that no final action was taken on the application and it is the Commission's desire to go through the procedural steps to adopt a motion that would postpone the case to a future Commission meeting without any action having been taken.

Chair Werner said taking action on both motions would remove any question as to the two motions. Commissioner Lovato disagreed saying this is a major/minor action.

Commissioner Abeyta asked what type of notice has to be given [to the public] since this item isn't on the Agenda.

Chair Werner said a motion for reconsideration can be made anytime during the same session or in the next regular session of the Commission, and no notice of any kind is required either in the same session or in the next meeting.

Commissioner Shanahan asked if we should take action right now.

Chair Werner said we can only vote to reconsider right now, because once this meeting is adjourned there is no further possibility of reconsideration.

Commissioner Shanahan asked if the applicant thinks they have been postponed or believes it's request has been denied.

Chair Werner said the applicant believes that the motion to approve that did not pass was a final ruling, and that they can now appeal our decision to the City Council and it's out of our hands. The City Attorney has given an indication that he agrees with that interpretation. That means if the applicant files an appeal, this case is not going to be coming back to the Planning Commission.

Commissioner Abeyta asked if this is because the case was not postponed to a date certain. He said then this means we either approve or deny things and we have no authority to postpone cases.

Chair Werner said, although he doesn't particularly agree, the City Attorney said defeating the motion to approve was a final action, and the motion to postpone should have been made before the motion to approve was made, or even during the debate on the motion to approve before the vote was taken. A motion to postpone this case to a definite date would accomplish what some Commissioners were trying to do.

Commissioner Lovato said he doesn't think we needed a date definite, the issue is procedural. If want to reconsider right away then Commissioner Martinez or someone who voted in the majority could make a motion.

Chair Werner said Ms. Lovely advised that the motion would have to be a motion to postpone to a certain date, and that a motion to postpone indefinitely is also tantamount to a final order and makes it an appealable action.

Ms. Lovely agreed, saying a motion to postpone that is indefinite is tantamount to a final action.

Commissioner Shanahan said then we did two final actions.

Commissioner Lovato asked the difference between "table" and "postpone."

Ms. Lovely said there is "laying it on the table" which we aren't speaking about this evening. To use "table" and "postpone" interchangeably is incorrect according to Robert's Rules, and we should be saying "postponement."

Commissioner Lovato asked what would have been the difference if a motion had been made to table this issue. Ms. Lovely said there is no difference.

Commissioner Ingram said she can't make the motion to reconsider because she voted to approve the project. However, it seems that the Commission did like the idea of having this project come back to it with the master plan because the Commission voted unanimously to postpone. She would appreciate very much if someone who voted in the majority would make a motion to reconsider.

Commissioner Lovato said we have to lift the postponement motion and then go to the denial motion.

Commissioner Shanahan said he hasn't received the minutes and doesn't remember the language of the second motion. However, if something is postponed to an event as opposed to a date, isn't that the same as a date.

Ms. Lovely said if the event is something which is definable. Commissioner Shanahan said, for example, until they come back with a master plan. Ms. Lovely said that is totally ambiguous. Commissioner Shanahan said the Commission presumed that would happen on a date. Ms. Lovely believes this could be argued the other way.

Chair Werner said this is why he wants this action to be clear, because if there is an appeal, regardless of what we do, the City Attorney as arbiter will say, "Well it feels good. It can be heard by the City Council."

Chair Werner reminded the Commission that the City Council can decide to review anything done by the Commission, but there is no particular reason to think that could happen in this situation.

MOTION: Commissioner Lovato, having voted in the majority at the November 6, 2003, meeting of the Planning Commission to postpone Case #M-2003-34, moved to reconsider the action of the Commission to postpone Case #M-2003-34 at its November 6th meeting until the new master plan was completed. The motion was seconded by Commissioner Shanahan.

VOTE: There being no dissenting or abstaining votes, the motion carried unanimously on a voice vote by the Commissioners.

CLARIFICATION OF ACTION: Chair Werner said we are wiping out the motion to postpone.

ACTION BEFORE THE COMMISSION: Chair Werner said the motion to postpone Case #M-2003-34, passed at the November 6, 2003, is now before the Commission for reconsideration. We voted to reconsider the postponement motion, and we are now voting on whether to postpone the case. To do what everyone appears to want to do, we should vote not to postpone the case.

Commissioner Lovato said it would be simpler if the maker and second of the motion withdrew their motion and second.

WITHDRAWAL OF THE MOTION AND SECOND: Commissioner Martinez withdrew his motion to postpone, and Commissioner Abeyta withdrew his second.

MOTION: Commissioner Lujan, having voted in the majority to defeat the motion to approve Case #M-2003-34 at the Planning Commission meeting on November 6, 2003, moved to reconsider the action taken at the November 6, 2003, meeting. The motion was seconded by Commissioner Gonzales.

VOTE: There being no dissenting or abstaining votes, the motion carried unanimously by voice vote of the Commissioners.

ACTION BEFORE THE CONSIDERATION: Chair Werner said the motion to approve Case #M-2003-34 is now before the Commission upon reconsideration.

CLARIFICATION OF ACTION NEEDED: Chair Werner said a motion to postpone to a certain date is now needed. The other possibility would be to postpone the case to a specific event which would leave another question hanging. Chair Werner said a motion to postpone should be made to a specific date such as the February 2004 meeting of the Commission. Ms. Lovely, responding to Commissioner Lovato, said although there is nothing in Robert's Rules, the postponed to date must be reasonable, and must be postponed to a specific Commission meeting date.

MOTION: It was moved by Commissioner Abeyta, seconded by Commissioner Ingram, that consideration of Case #M-2003-34 be postponed to the meeting of May 6, 2004.

FRIENDLY AMENDMENT: Commissioner Martinez would like the motion to postpone to include a provision that would permit Case #M-2003-34 to be brought before the Commission by the applicant sooner than May 6, 2004, if the master plan is completed before that time and the applicant would like to bring the application back to the Commission earlier than the May 6, 2004, date. The amendment was friendly to the maker and second.

VOTE: There being no dissenting or abstaining votes, the motion carried unanimously by voice vote of the Commissioners.

Commissioner Shanahan

Commissioner Shanahan asked who will advise the applicant of the action taken this evening. Mr. Quarles will advise the case manager, Derrick Archuleta, tomorrow morning of the action and he can pass this on to the applicant.

Commissioner Shanahan asked if the applicant can appeal the postponement to the City Council. Someone responded that it can. Commissioner Shanahan said then theoretically the applicant could take this to the Council as fast as it can.

Chair Werner doesn't believe they can. Ms. Lovely doesn't believe that they can. Chair Werner said, however, there are still other things which can happen which will take this out of our hands. Mr. Lovely said the Council can pull this case up.

Chair Werner said there has been no appeal as of this time. Ms. Lovely said it has not been placed on the Council Agenda, nor has the Council pulled this case up.

Commissioner Martinez asked if City Attorney Bruce Thompson will go ahead and allow an appeal. Ms. Lovely doesn't believe that an appeal to a motion to postpone to a time certain is appealable.

Commissioner Lovato said he disagreed with the way the action was taken on the Thornburg case. Chair Werner responded that the only action taken on that case was to approve the case subject to staff conditions, which is the action usually taken by the Commission -- to deny approval of a case, or to approve a case with or without staff conditions and any additional conditions imposed by the Commission.

Commissioner Lovato

Commissioner Lovato said it has been six months since he requested something in writing with regard to planning procedures, in bullet form. He has not yet received anything, and he requested that staff respond to this request at the next meeting.

City of Santa Fe, New Mexico**memo**

DATE: Prepared October 24 for November 6, 2003 meeting

TO: Planning Commission

VIA: Sandra Aguilar, Planning and Land Use Department Director 
Jim Salazar, Division Director 
Greg Smith, Supervising Planner 

FROM: Derrick Archuleta, Senior Planner 

PHYSICIAN'S PLAZA OF SANTA FE DEVELOPMENT PLAN**REQUEST:**

Case # M 2003-34. Physicians Plaza of Santa Fe Development Plan. Paul Flehmer-Marshall Erdman & Associates, agent for St. Vincent Hospital, requests development plan approval for a two story medical office building of approximately 50,000 gross square feet on two tracts of land with a total area of approximately 4.564 acres. The property is zoned C-1 (Office and Related Commercial) and is located adjacent to the St. Vincent Hospital, bounded on the west by Hospital Drive

RECOMMENDATION

Staff recommends approval subject to the following conditions based on consistency with the approved St. Vincent Hospital Campus Master Plan:

Permit and Development Review Division

1. Comply with St. Vincent Hospital Campus Master Plan.
2. A note shall be placed on the Development Plan that the development of the property will be subject to the Water Allocation and/or Water Offset Retrofit provisions of Ordinance

No. 2002-29 and Resolution 2002-55 at the time of permit application or water hookup request.

3. Comply with memo from Subdivision Engineer (Exhibit B)

Public Works-Traffic

4. Address redline comments on submitted plans dated 10/10/03 (Exhibit C).
5. Discuss possible additional traffic calming measures with City traffic-calming supervisor Carrie LaCrosse.
6. Provide street light location details on plan.
7. Provide permanent pavement marking and signing details on plan.

Landscape Review

8. Comply with comments from the Special Projects Administrator regarding landscape (Exhibit D)

Wastewater Division

9. Comply with memo from Wastewater Division (Exhibit E).

Solid Waste Division

10. Comply with comments from the Solid Waste Division Engineer (Exhibit F)

Fire Marshall's Office

11. Comply with memo from the Fire Inspector (Exhibit G)

ANALYSIS:

I. EXECUTIVE SUMMARY

The proposed development will consist of a two story 50,000± gross square foot medical office building on two separate tracts of land adjacent to St. Vincent Hospital. The project is proposed to include an ambulatory surgery center, surgeon's offices and allied out patient's services.

The site is part of the St. Vincent Hospital Campus Master Plan which was adopted in 1985. The master plan and rezone for 40.3 acres on the northeast corner of Hospital Drive and St. Michael's Drive was approved by City Council under Resolution 1985-36 and Ordinance 1985-15. The master plan was designed to provide for the current and long range needs of the hospital campus, serving as a guide for future development. Locational criteria and standards for uses are set forth in the master plan establishing guidelines for development activities on the property.

II. COMMUNITY IMPACT EVALUATION

A. Physical Impact.

The medical office building will provide outpatient services with daytime operation only. The 52,000± square foot building is proposed to be two stories. The ground floor includes 27,168 gross square feet with the upper level at 24,832 gross square feet. The building includes space to be rented for surgeon's offices and allied out-patient services.

Site selection and location for this project is an effort to remain in close proximity to St. Vincent Hospital as a regional health care center facility. Initiated by Santa Fe area physicians the intent is to improve surgical care and the ability to expand services.

The applicant states that this is the type of healthcare facility that younger physicians look for when choosing to locate. As a physician owned project, it will also play a role in the retention and recruitment of medical personnel.

B. Economic Impact

No economic impact study has been submitted nor required where zoning is already in place. The facility will create new jobs for individuals in the medical field.

C. Social Impact

No broad social impacts are anticipated.

D. Neighborhood Impact

The project falls within the boundaries of the San Mateo Neighborhood Association.

Pursuant to Section 14-9.12(B), the applicant conducted the required Early Neighborhood Notification Meeting on June 23, 2003 and chose to hold a second meeting on August 5, 2003 (Exhibit J). There have also been other meetings related to this project.

Neighborhood concerns at the June meeting revolved around height, views, screening, noise, lighting, architecture and traffic. In an effort to address neighborhood concerns the applicant incorporated and amended the project and held a second ENN meeting in August.

The applicant has addressed neighborhood concerns in the following manner:

- Height: Two stories instead of three stories; mechanical equipment inside building and not on top of the roof.
- Views: Preservation of sight lines; eliminate some shade trees and reduced height of building.
- Screening: Increased setbacks; provide improved fencing.
- Noise: Mechanical equipment inside of building.

- Lighting: Lower lighting poles; building night timers.
- Architecture: Two story concept; improved access; ramp; separate surgery exit/staff entry.
- Traffic: Participation in traffic calming efforts.

The applicant has also participated in City sponsored traffic meetings and is willing to work with the City and St. Vincent Hospital in a proportionate share of responsibility.

III. SITE PLANNING AND SITE DEVELOPMENT PLAN EVALUATION

A. Density, Lot Coverage, Setbacks and Building Height

The development is in compliance with the density, zoning and land use established by the St. Vincent's Hospital Campus Master Plan. No variances are being requested to the zoning regulations or the master plan. The master plan sets forth development standards and siting criteria to serve as a basis for physical implementation of the plan.

Development standards address issues such as height, floor area ratio, setbacks and open space. The campus is divided into four Areas, the Physician's Plaza site falls within Area 3 (Northern Campus) as defined in the master plan (Exhibit H).

The following table reflects Area 3 Standards and what Physician's Plaza proposes:

Area 3 Standards	Master Plan	Physician's Plaza
Permitted Height	36 feet	31 feet
• within 120 foot overlay zone	18 feet	18 feet
Floor Area Ratio	0.65	0.26
Building Setbacks		
• Hospital Drive	20 feet	28 feet
• northern boundary	50 feet	100 feet
• multi story buildings from northern boundary	120 feet	130 feet
• parking from a public right-of-way	10 feet	15 feet
• parking from northern boundary	15 feet	25 feet
Open Space	20%	35%

Siting or locational criteria in the 1985 master plan were developed for medical and related services within the developing (vacant) area. The criteria proposed a method for rationally determining the optimum siting of medical and related services within the "Developing Area" of the campus. The four locational criteria included and incorporated the following: access, visibility, terrain and noise. On a

conceptual level, four areas evolved from the locational criteria. The Physician's Plaza site falls primarily within Area 1 and a very small portion in Area 2 as defined in the master plan (Exhibit I).

The Area recommendations for the Physician's Plaza site include the entire spectrum of medical and related uses envisioned for the campus. Proposed uses for the project are supported and recommended for Areas 1 and 2.

B. Traffic/Transportation, Roads

The development will add traffic to adjacent streets: Hospital Drive and St. Michael's Drive. A complete traffic study was completed in July and amended in September. The applicant has worked with City staff, St. Vincent Hospital and the neighborhood to address the impacts of this development on the San Mateo/Galisteo community.

Methods of addressing impacts include a proposed traffic circle at San Mateo and Galisteo to improve the intersection and accommodate increased traffic from this and other approved projects. A pedestrian cross-walk and traffic calming device is also proposed at Hospital Drive from the Physician's Plaza site to an existing radiology building to the west. Hospital Drive will also be widened in order to provide a right turn onto St. Michael's Drive.

St. Vincent's Hospital is in the initial stages of updating its master plan. Traffic planning goals include improving internal traffic circulation and encouraging greater use of St. Michael's Drive as an entry/exit to the campus. Revisions would be subject to City approval processes.

All parking will be provided on site without any use of existing hospital parking. Total parking provided will include 224 spaces in addition to 25 bicycle spaces. There will be no designated parking along Hospital Drive for this facility.

C. Grading and Drainage

Stormwater erosion control measures will be taken during construction activities. Stone construction entrances will be installed at the access point in an effort to reduce the transport of sediment off site. A permanent stormwater management plan attempts to infiltrate runoff. A landscaped retention area will promote infiltration and capture water from the site impervious areas.

D. Infrastructure and Utilities

The area is already served by a complete range of urban services.

Attachments

Exhibit A – Applicants letter and site plan*

Exhibit B – Memo from Subdivision Engineer

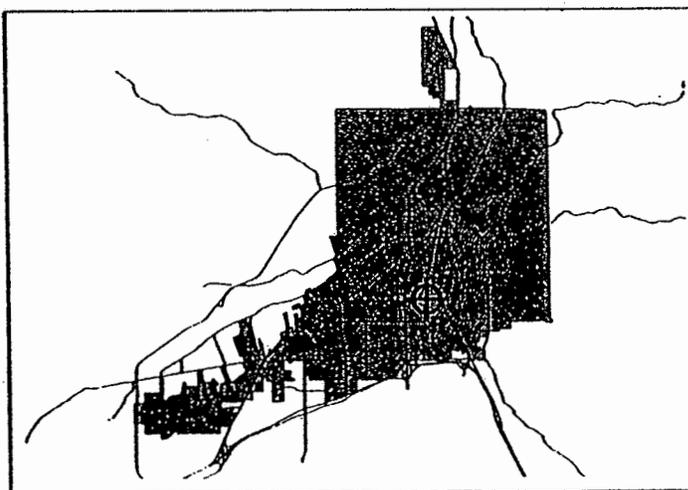
Exhibit C – Memo from Traffic Engineer

Exhibit D – Memo from Special Projects Administrator (Landscape Review)

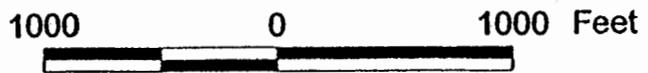
Exhibit E – Memo from Wastewater Division

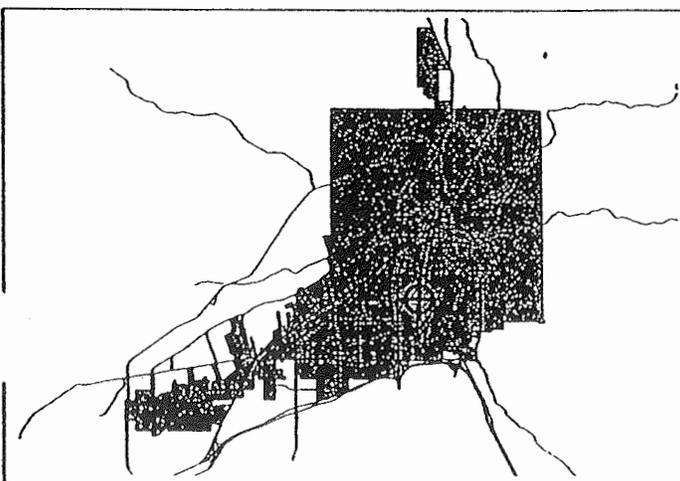
- Exhibit F – Memo from Solid Waste Engineer
- Exhibit G – Memo from Fire Marshall's Office
- Exhibit H – Development Standards (St. Vincent Hospital Campus Master Plan)
- Exhibit I – Siting Criteria (St. Vincent Hospital Campus Master Plan)
- Exhibit J – ENN Memo

*Included in Commissioners' agenda packets, copies available for public review at Permit and Development Review Division office, First Floor, City Hall



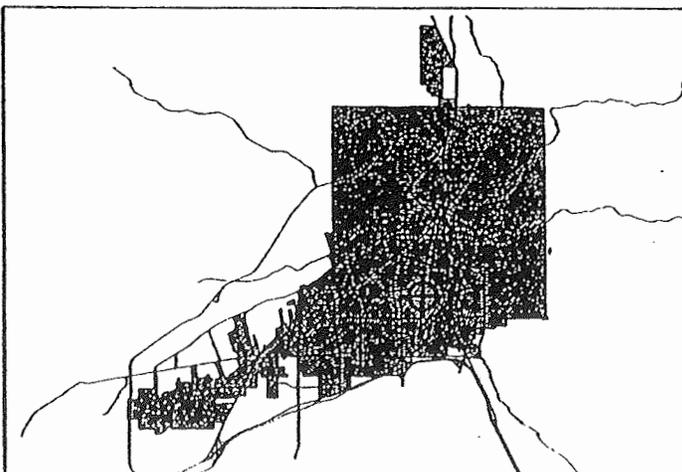
M 2003 - 34 VICINITY MAP





M 2003 - 34 ZONING MAP





M 2003 - 34 LAND USE MAP



EXHIBIT B

City of Santa Fe

Planning and Land Use Department

Permit and Development Review Division

REVIEW MEMORANDUM

Application Name: **Physicians Plaza of SF.**

Current Zoning: _____ Developed Zoning: _____
Zone Atlas Page No.: _____
Street Atlas Page No.: **18**
FIRM Panel No.: **350070 0018 B**
Flood Zone: **C**

Case/Permit No.: **M 03-34**

Applicant Requested Action: **Final Development, Construction Plan, and Plat approval**

Submittal Date: **07-21-03 / 08-08-03**

Review Date: **07-30-03 / 08-19-03**

- Reviewed Documents:
1. 13 sheet Plan set bearing Engineer's Stamp No. 15851, sealed 07-17-03.
 2. Site narrative and Drainage Study bearing Engineer's Stamp No. 15851, sealed 07-17-03.

Reviewed Documents of 08-08-03: Sheet No.'s A3, A4, & C.1

Reviewed By: Ellery Blathrow *[Signature]*
Engineering Supervisor

Recommended Action: **Approved subject to following comments. Documents of 08-08-03 do not address following comments.**

Comments/attachments provided to:
P&DR Case Manager; Derrick Archuleta
File: M2003-34

Attachment(s): **Exhibit A, Redline General Comments, Rev. 07-24-03.**
Exhibit B, General Construction Notes, Rev. 07-15-03.

07-30-03

Findings:

Sheet No. C-0 [Cover]

1. See Redline General comments, Exhibit A, especially 1.a, 1.b, & 1.d.
2. Provide standard Development Plan approval signature blocks, including County recorder's filing data block.

Sheet No. C-1:

1. See Redline General comments, Exhibit A, especially 1.a, 1.b, 1.d, 2.b, 2.c, and 2.d.
2. Provide elevations based on USGS datum.
3. Provide slope analysis.

Sheet No. C-2:

1. See Redline General comments, Exhibit A, especially 1.a, 1.b, 1.d, 2.b, and 2.c.
2. City datum?

Sheet No. C-3:

1. See Redline General comments, Exhibit A, especially 1.a, 1.d, 1.g, 2.b, and 2.c.

Sheet No. C-4:

1. See Redline General comments, Exhibit A, especially 1.a, 1.b, 1.g, 2.b, and 2.c.
2. Wrap ends of silt fence around corners for a minimum distance of 20' where encountering property lines.
3. Define detail numbers when referencing other sheets.

Sheet No. C-5:

1. See Redline General comments, Exhibit A, especially 1.a, 1.b, 1.g, 2.b, 2.c, 2.e, and 2.f.
2. Provide for emptying of runoff ponds within 24 hours as per SFCC, i.e. use detention ponds.
3. Provide runoff calculations.
4. Define proposed pond volumes.
5. Provide valley gutter at Hospital Drive.
6. Provide for SF General Construction Notes, Exhibit B.

Sheet No.'s C-6 / 12:

1. See Redline General comments, Exhibit A, especially 1.a, 1.b, 1.d, 1.g, 2.b, and 2.c

- End of Document -

Exhibit A

Redline General Comments

1. Provide the following formatting features on each plan sheet:
 - a. Line border that provides for a minimum of 0.5" clear space between the border line and edge of mylar, excepting the left margin which shall be a minimum of 1.5 inches..
 - b. Provide a minimum type point size of 9 for regular type and 12 point for bold type lettering with no "overtyping" or placement on patterned graphic to avoid too small print that is unreadable from microfilm copy;
 - c. The use of "sticky backs" or similar overlays to present data may result in a dense background that does not legibly reproduce upon microfilming or the overlay data may be dislodged with time, thus such overlays are not acceptable;
 - d. Add City Planning and Land Use Department's Permit and Development Review (P&DR) Case number(s) to every sheet of the plan set in the lower right hand corner;
 - e. Ensure that each sheet is numbered and that the index listing is consistent with the sheet numbering system;
 - f. Ensure that all graphic symbols, lines, etc. are defined in Legend; and
 - g. Provide North indicator, both stated (1" = x') and graphic (bar) scale on each sheet having a horizontal and/or vertical data drawn to scale. If data is not drawn to scale, so state.

2. Provide the following presentation features on each applicable sheet:
 - a. Word spelling(s) need correction;
 - b. Professional drawing(s) [Architect, Engineer, Landscape Architect, and similar professions] shall carry the registrant's seal impression and either be sealed or marked "preliminary", "draft", or equal on each applicable sheet;
 - c. Improvement drawing(s) shall provide city department approval block, listing Wastewater, Water, Streets, Traffic, Fire, Landscape, & Subdivision Review sign off lines with adjacent date column on each improvement plan sheet. Arrange in order listed;
 - d. Cut and fill slopes shall be labeled as to horizontal to vertical ratio or note to that effect;
 - e. Cut and fill volumes shall be shown, including site preparation cut and fill volumes as required by geotechnical report; and
 - f. Provide applicable filing data for all existing easements and/or dedicated right-of-way.

3. Not used.

- End of Document -

Exhibit B

(Project Name)

GENERAL CONSTRUCTION NOTES

1. All construction shall conform to the requirements of City of Santa Fe Standard Drawings and Specifications as applicable.
2. Utility construction shall conform to applicable sections of the APWA's "New Mexico Standard Specifications for Public Works Construction, 1987 edition including latest published amendments.
3. Infrastructure construction shall conform to applicable sections of the New Mexico Department of Transportation's "Standard Specifications for Highway and Bridge Construction, 2000 Edition (SSHBC).
4. The order of precedence shall be, listed in order of highest precedence, shall be project specifications, plans, City of Santa Fe Standard Drawings, APWASS, and SSHBC.
5. In the case of conflicts between plans and specifications resolution shall be by using the more restrictive requirement as determined by the project engineer and approved by City Planning and Land Use Department's Permit and Development Review Division Technical Review staff (P&DR).
6. The project plans shall be approved for construction by the P&DR's Engineering Supervisor prior to any construction activity and scheduling a pre-construction meeting. The Engineering Supervisor may, by written authorization, designate others to administer duties described herein.
7. The construction Project Engineer shall be a New Mexico licensed Professional Engineer in the appropriate category for the type of work represented by the project plans. The Project Engineer shall arrange for a pre-construction meeting prior to the start of construction or mobilization of equipment on-site. At the pre-construction meeting, the Project Engineer shall submit a letter providing the name(s) of specific individuals who will be performing what type of inspections and respective telephone contact number(s); this includes preparation of the record drawings. . Call 505-955-6585 to schedule the pre-construction meeting a minimum of 10 calendar days in advance of the meeting date.
8. Attendance at the pre-construction meeting is mandatory for the Project Engineer (who shall conduct the meeting, Contractor, P&DR Technical Review staff, and applicable staff from City street, water, and wastewater management Divisions. The Owner and sub-contractors are encouraged to attend. At this meeting, a specific P&DR staff member will be assigned as the point of contact with the Contractor.
9. If an EPA Notice of Intent (NOI) is applicable, a copy of the mailed permit application shall be presented at the pre-construction meeting along with a written statement giving the mailing date.
10. The Contractor shall be responsible for maintaining the integrity of all underground utilities during the course of work regardless of any location shown on the plans or other field evidence, or lack thereof. Notification to New Mexico One Call at 1-800-321-2537 for utility locates a minimum of 48 hours in advance of any excavation is required. Maintenance of utility locates shall be continued throughout the project life.
11. The Owner shall be responsible for all changes in construction deemed necessary for any reason and shall have appropriate plans and/or specifications, including applicable design criteria, prepared by a New Mexico Professional Engineer and submitted to the City

Engineering Supervisor for approval. Upon approval, said changes may be incorporated into the project.

12. Final Record Drawings, reflecting substantial changes to the original design drawings, shall be submitted by the Owner's Engineer for approval to the Engineering Supervisor for permanent filing in the City Planning Department. Said plans shall be approved by applicable City Divisions prior to final acceptance of project work for maintenance responsibility and the beginning of the warranty period. Under no circumstances will partial acceptance and/or warranty commencement begin for any component of project scope be provided.
13. Curb cuts shown in the original, approved construction drawings will require a "Curb Cut Permit" issued by the City Traffic Engineer prior to construction. Curb cuts found to be necessary that were not included in the original, approved construction drawings will require a change order that includes a "Curb Cut Permit" from the City Traffic Engineer. Call 505-955-6619 for information.
14. Parallel water and sanitary sewer (SAS) utilities shall have a minimum horizontal spacing of 10 feet and vertical spacing of 3 feet wherein the water line is above the SAS line. Installation will be in separate trenches. Should encountered field conditions exist that prevent maintaining these separation distances and relationship, a change order shall be initiated that provides for alternative protective measures and submitted for approval to the Engineering Supervisor via the City Water and Wastewater Management Divisions.
15. Sanitary Sewer lateral construction must be constructed under separate permit (secondary) for SAS hookup. The Contractor shall obtain the permit(s) prior to any construction and must be obtained at the Permit Desk at City Hall; providing street address for each hookup. Upon payment of fee(s) the permit form will be immediately generated which shall be kept on-site. Call 505-955-6948 for permit information and 505-955-6646 for inspection of each visible, connected lateral.
16. All Contractor work activity shall be confined to the construction limits of the project. There shall be no encroachment onto adjacent properties, either construction or marshalling yard(s) unless legal easements(s)/agreement(s) is/are executed and approved by the Engineering Supervisor.
17. Grading shall be completed under the authority of a Building Permit, the application of which shall show the type of work as "Other" with the notation of Grading, Landscaping, and infrastructure shown thereon. Call 505-955-6948 for permit information.
18. All cut and fill slopes, including setback requirements, shall conform to the requirements of:
 - a. Santa Fe City Code's Article 14-8 (Development and Design Standards);
 - b. Chapter 33 of the Uniform Building Code, 1997 edition unless otherwise noted on the approved construction plans; and
 - c. In the case of conflict between these two specifications, City Code shall prevail.
19. The Contractor is responsible for any damage caused by construction activities to public or private property, including utilities.
20. Material quality testing shall be completed by the Owner, through a recognized testing laboratory. The laboratory shall be under the auspices of a New Mexico Professional Engineer.
21. All material quality test reports shall be provided directly to the City Planning Department, attention Permits and Development Review Division at P. O. Box 909, Santa Fe, New Mexico 87504-0909 within seven (7) calendar days after laboratory material testing is complete. Field test reports shall be provided directly to the P&DR staff at the time of field testing. In the case of P&DR staff absence, the reports shall be Fax'ed to 505-955-6829. In each case, all test reports and other communication shall carry the applicable project number which will be provided at the pre-construction meeting.

22. Portland cement concrete (Pcc) proposed to be used for the project shall conform to a mix design prepared by a New Mexico Professional Engineer. The design shall be provided to P&DR staff for approval a minimum of 14 calendar days prior to scheduling the initial paving operation and shall have the following minimum properties:
 - a. Compressive strength of 3,000 psi in 28 calendar days
 - b. Seven (7.0) bags of cementitious material per cubic yard of concrete
 - c. Twenty (20.0) percent or less of flyash material substitution for cement
 - d. Maximum aggregate size of ¾"
 - e. Air entrainment content ranging between 4.0 and 7.0 percent at the point of concrete delivery into forms
23. Concrete sample set shall consist of a minimum of three (3) cylinders. One sample set shall be obtained for each 500 linear feet cast, 50 cast cubic yards, or one (1) set per calendar day, whichever is greatest. Cylinders shall be tested at 7, 28, and 56 day intervals; the 56 day interval need not be tested if any previous test result exceeds the design value.
24. Traffic control devices, as per approved plan, shall be installed, maintained, and removed by the Contractor. Said devices shall conform to the latest published edition of the Manual of Uniform Traffic Control Devices and to written direction from the City Traffic Engineer who may be reached at 505-955-6619.
25. Site erosion and/or sediment control, as per approved plan, shall be installed, maintained, and removed by the Contractor. The Contractor's attention is directed to the SSHBC's Section 603 for other requirements relating to dust abatement and similar issues.
26. Utility lines must be bored under all existing street Pcc street appurtenances. A minimum of 12" separation must be maintained between utility lines. Any curb, gutter, or other damage must be repaired before final inspection will be given.
27. Each City utility division shall provide a letter of completed installation, not necessarily accepted for warranty, at the Contractor's request. Said letters shall be provided to the P&DR staff and received written staff acceptance prior to scheduling either TV inspection of SAS and Storm Sewer lines or placement of roadway pavement material.
28. ASTM, ASSHTO, or independent laboratory certificates of material compliance are to be provided to P&DR staff prior to bringing applicable material on site.
29. Aggregate base course material shall conform to the SSHBC's Section 304 using Gradation I.
30. Plant Mix Bituminous Pavement (PMBP) proposed to be used for the project shall conform to a mix design prepared by a New Mexico Professional Engineer conforming to SSHBC's Section 420 using Aggregate Classification B. The design shall be provided to P&DR staff for approval a minimum of 14 calendar days prior to scheduling the initial paving operation.
31. Compaction testing of subgrade, aggregate base course, and each lift of PMBP material shall be completed for every 100 linear feet of roadway length excepting for PMBP material in which case provide one (1) test for every 100 linear feet of laydown machine pass.
32. PMBP material quality test samples (wet) shall be obtained and tested for every 500 tons or fraction thereof or one (1) sample per day.
33. Utility appurtenance such as telephone pedestals, electrical transformers, gas, and cable TV pedestals shall be placed outside the public right-of-way and within utility easements. The Owner is responsible for relocating mis-placed utility structures prior to requesting a pre-final inspection. Water meter boxes and fire hydrants may be placed between the sidewalk and curb. Water valve and meter boxes are not to be placed within maintenance areas of semi-improved (gravel or equal) roads.
34. Construction debris and/or excess material shall be stored in an on-site area and appropriately contained. Said debris shall not be a nuisance to the surround neighborhood. Disposal of debris shall be either within the city limits or at the County landfill. The Contractor shall

provide written notice as to proposed debris disposal site location(s). All debris and/or excess material shall be removed from the site prior to scheduling a pre-final inspection with P&DR staff.

35. The Contractor shall make written request for a pre-final inspection of terrain management and infrastructure works a minimum of 14 calendar days in advance with P&DR staff. At this inspection, applicable city division staff will review the final work product. Any deficiencies will be noted in a "punchlist" and provided to the Contractor for correction. When all punchlist items are completed the Contractor shall file a written statement to that effect and a final inspection will be held by P&DR staff. Upon acceptance, an acceptance letter will be provided wherein all work will be accepted for maintenance by the City and the commencement of the warranty period initiated.

- End of Document -

City of Santa Fe, New Mexico

memo

DATE: October 10, 2003

TO: Derrick Archuleta, Senior Planner
Permit & Development Review Division

FROM: John Nitzel, City Traffic Engineer *JN*

ISSUE

Physicians Plaza of Santa Fe. Development Plan, Case #M 2003-34. Development Plan for a medical office building with a total of 52,000 square feet of building area. The property is zoned C-1 (office and related commercial) on approximately 4.564 acres. The property is on Hospital Drive adjacent to St. Vincent's Hospital.

REQUESTED ACTION

This review is based on plans received October 8, 2003 and on a revised Traffic Impact Study received September 12, 2003. A meeting was held with the consultant on September 18, 2003 and verbal comments were provided to the consultant. If no other updates are received, and the project remains on the Planning Commission agenda, the following items are Conditions of Approval which must be addressed to our satisfaction prior to issuance of any permits. If the Conditions of Approval are not acceptable to the consultant, we would recommend denial of the traffic study and Development Plan to the Commission.

BACKGROUND

The following items need to be addressed as discussed above.

- A. Plans for the development were received on October 8, 2003. Prior submittals were received on July 23, 2003 and August 14, 2003. Our comments are based on these submittals and are described in detail on the plans. The comments below are in summary form.
1. Address redline comments on submitted plans dated October 10, 2003. It is assumed that all prior redline comments have been addressed.
 2. Details of the design of access drive were provided. Minor comments are shown on the redline plan set. We still believe a painted left-turn lane from Hospital Drive may be necessary but are still reviewing the need for this and will discuss this with the consultant in more detail.
 3. Details on traffic calming were provided at one location. We will need additional traffic calming measures in the form of horizontal devices at approximate 250

intervals along Hospital Drive to the north. We suggest the developer discuss with the City traffic-calming supervisor, Carrie LaCrosse.

4. We did not see street light locations. Please provide details.
 5. Provide permanent pavement marking and signing details.
- B. A Traffic Impact Study was prepared in September 2003 for the site and submitted to the city on July 12, 2003. Below are general comments. They are based on a recent neighborhood meeting held regarding the intersection of San Mateo and Galisteo, and on plans recently received.
1. At this time we are recommending and investigating the potential of a roundabout at the intersection of San Mateo and Galisteo Street. The adequacy of right of way is a significant issue but it appears that sufficient right of way may be available. Traffic from the proposed Physicians Medical Center significantly impacts this intersection and the resolution of the traffic control for this intersection which currently falls from a traffic perspective was a key issue in the review of this development. We are awaiting a preliminary capacity analysis of the proposed roundabout which would include development related traffic. At this time we believe the proposed roundabout appears to be a viable solution to mitigate traffic and safety concerns for this intersection. Based on this we recommend that Physicians Medical Center be responsible for 50% of the cost of the proposed roundabout including landscaping.
 2. We have review comments regarding the modifications to signalized intersection of St. Michaels Drive and Hospital Drive. Please see redline comments. It will be necessary to provide adequate storage for lanes and if a change in signal timing is needed then a progression analysis for the St. Michaels Drive signal system will be necessary.
 3. At this time we are still reviewing the details of the most recently submitted study but we believe the above comments address major concerns. Our key criteria will be the proviso of adequate level of service for all traffic movements.
- C. We did receive a response from St. Vincent's Hospital regarding as to whether the main entrance can be moved to St. Michaels Drive. I believe it was also received by you. This issue should be strongly considered are strategies to reduce traffic on Hospital Drive no later than the Master Plan submittal by the hospital.
- D. Parking was an issue raised at the neighborhood meeting. Is there a plan to accommodate this? Existing offices in the area currently have inadequate parking and there are numerous cars parked on Hospital Drive which creates potential safety problems. I do not know if the architect has responded to this.

- E. Future uses proposed for the site are now part of the existing St. Vincent's hospital according to information we have been presented. I believe the hospital has addressed this issue.
- F. The developer will be responsible for offsite improvements and as stipulated above for the intersection of San Mateo and Galisteo Street.

Please advise if you have any questions or comments.

cc: Jim Salazar
Greg Smith
Robert Romero

f/n: m:DRT2003\Physicians Medical \Memo Oct 10 2003

Case #Z 2003-06 Studio One Rezoning RM-1 to C-4. (Site Plan Review Sheet L-1).

Add the following notes to Streetscape and Development Plan (Sheet 3 and Sheet 5 L-1):

- “Any changes and/or modifications to the approved landscape plan shall be approved by the COSF Planning & Land Use Department”.
- “Comply with the current COSF Water Conservation Stage”

Water budget for landscaping shall be provided on the landscape plan.

Provide calculation of non-residential open space required on Landscape Plan (Sheet L-1)

The applicant shall provide a plan indicating significant vegetation that will be preserved or relocated per Section 14-8.4 (F)(5) Existing Vegetation.

Provide details and specifications for landscape and irrigation installation per Section 14-8.4 (E)(F).

Case #M 2002-37 & Case #M 2003-38 Nava Ade Master Plan Amendments.

Landscape and Site Design compliance is required at the time of development plan, subdivision plat and permit submittals (Section 14-8.4).

Case #M 2003-34 Physicians Plaza of Santa Fe Development Plan

A revised landscape plan was not included with the new site plan layout.

The PDR Planner Supervisor shall determine of the proposed landscape plan shall comply with the previously city council approved master landscape plan.

Add the following notes to Streetscape and Development Plan (Sheet C.12):

- “Any changes and/or modifications to the approved landscape plan shall be approved by the COSF Planning & Land Use Department”.
- “Comply with the current COSF Water Conservation Stage”

Water budget for landscaping shall be provided on the landscape plan.

City of Santa Fe



New Mexico

MEMO**Wastewater Management Division
DEVELOPMENT REVIEW COMMENTS**

Date: August 4, 2003

To: Greg Smith, Planner Supervisor
Planning and Land UseFrom: Joe B. Barela, PE *JB. 8/4/03*
Wastewater Management DivisionSubject: DRT comments for Case #M 2003-34 Physicians Plaza of Santa Fe for September 11,
2003 Planning Commission Meeting

Applicant to address the following comment(s):

1. Provide industrial pretreatment sampling point (IPSP).
2. Requires 4" service connection to public main.

Please contact me at 955-4637 if you have any questions.

cc: File



EXHIBIT F

*Development Review Team
Transmittal Form*

Case # M 2003-34 Physicians Plaza of Santa Fe Development Plan. Paul Flehmer-Marshall Erdman & Associates, agent for St. Vincent Hospital, requests development plan approval for a three story medical office building of approximately 52,000 square feet on two tracts of land with a total area of approximately 4.564 acres. The property is zoned C-1 (Office and Related Commercial) and is located adjacent to the St. Vincent Hospital, bounded on the west by Hospital Drive. _____, Case Manager.

Name: Paul Flehmer# 1-800-321-3536 x 22
Submittal date July 21, 2001
Resubmittal date July 31, 2003
DRT final Comments by August 18, 2003

Agent/ Owner fax # 303-466-5156
e-mail pflehmer@erdman.com
Planning Commission date Sept. 11, 2003

- PDR Case File/Case Manager
- Fire Inspector(s)
- Traffic Division Engineer
- Waste Water Division Engineer
- PW/ Engineering Division
- Landscaping

- Water Division Engineer
- Subdivision Engineer
- Community Services
- Solid Waste Division Engineer
- Trails & Open Space

COMMENTS: *Enclosure minimum 12'x12' w/ 12' enclosure entrance. Entrance should face in a more SW angle for assured turning & backing radii.*

Case Manager: _____

Ron L. Quarles x 6654 rlquarles@ci.santa-fe.nm.us Ellery Biathrow x 6583 cabiathrow@ci.santa-fe.nm.us
Derrick Archuleta x 6127 dmarchuleta@ci.santa-fe.nm.us Greg Smith x 6957 gtsmith@ci.santa-fe.nm.us
Monica Montoya x 6822 mamontoya@ci.santa-fe.nm.us

City of Santa Fe, New Mexico

memo

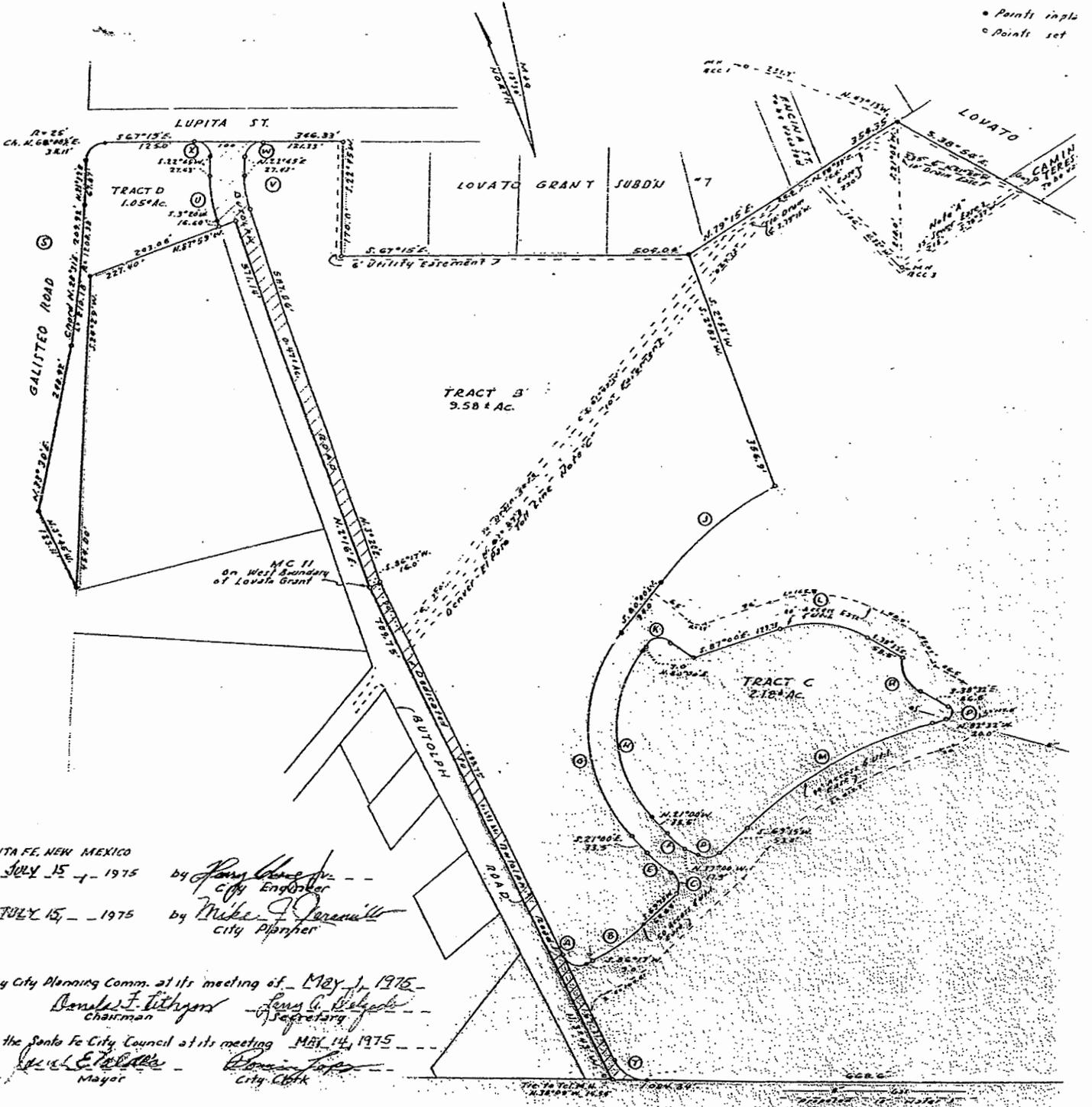
DATE: August 18, 2003
TO: Derrick Archuleta, Permit and Development Review
FROM: Daniel Archuleta, Fire Inspector *DA*
VIA: J.T. Bolleter, Fire Marshal *JB*
RE: DRT Case's # M 2003-34

I have reviewed all of the following DRT case(s), and the following code requirements shall be met.

Shall comply with NFPA 1 Fire Prevention Code 2000 edition.

RECEIVED
AUG 21 2003
88001.P145

• Points in place
 ○ Points set



CITY OF SANTA FE, NEW MEXICO
 Approved JULY 15 - 1975 by *Harry R. Rando* City Engineer
 Approved JULY 15, - 1975 by *Mike J. Doreau* City Planner
 Approved by City Planning Comm. at its meeting of - MAY 1, 1975 -
Donald F. Litzgors Chairman *Louis G. Belyard* Secretary
 Accepted by the Santa Fe City Council at its meeting - MAY 14, 1975 -
David E. Phillips Mayor *Robert J. ...* City Clerk

UTILITY COMPANIES
 MOUNTAIN BELL by *Harry R. Rando* 5/12/75
 PUBLIC SERVICE CO. OF N.M. by *Charles ...*
 SOUTHERN UNION GAS CO. by *Cliff ...* 5/12/75

I certify that this plat was made by me accepting the exterior survey by *Martinez Survey*, interior tracts were made by me and are true and correct to the best of my knowledge and belief.

12 Mar 1975

J. ...

- Notes
- A. Lower line easement from Murray M. Friedman & Wife. to G. 23 July 1956. Recorded Min. Book 228, page 360. Santa Fe Co.
 - B. Telephone Power easement from Santa Fe Holding Co. to Mount. and Public Service Co. of N.M. 12 Feb 1958. Recorded Santa Fe County Clerk.
 - C. Telephone Power easement from Santa Fe Holding Co. to Mount. and Public Service Co. of N.M. 12 Feb 1959. Recorded Santa Fe County Clerk. (Denver, El Paso Toll Line).
 - D. Easement under Notes B & C are also covered by filed 2 Jan 1945.
 - E. Gas/Water service to Tract C to be off St. Michael's. via 30" 6" 40" Access Utility easements as shown via proposed 10" sewer as shown.
 - F. Portion of tract dedicated to BUTOLAN ROAD. show pavement width to be 48' back to back of

SEAL

EXHIBIT H

PROPOSED AREA STANDARDS

Area 1 (Hospital & Environs)

Maximum Building Height: 65 feet

Overlay Zone: 45 feet

Floor Area Ratio: 1.8

Overlay Zone: 1.5

Basements and below grade parking areas shall not count toward the allowable floor area.

Building Setbacks: From boundary perimeter, none

Open Space: Ten percent of the area within the perimeter boundary shall be retained as permanent open space.

Area 2 (St. Michaels Drive)

Maximum Building Height: 22 feet measured at the building setback line from St. Francis Drive

Floor Area Ratio: .5

Basements and below grade parking areas shall not count toward the allowable floor area.

Building Setbacks: 50 feet from St. Michaels Drive
20 feet from Hospital Drive
10 feet from all other perimeter boundaries and interior roads.

Open Space: 20 percent of the area to remain as permanent open space. Parking areas are not included within the definition of open space.

Parking: Parking areas shall be setback from all public rights-of-way and private interior roads a minimum of 10 feet, except for St. Michael's Dr. where a 25 foot setback is required.

Landscaped Area: 25 feet from St. Michaels Drive to remain undisturbed, or for landscaping only.

Area 3 (Northern Campus)

Maximum Building Height: 36 feet

Overlay Zone: 18 feet or one story within 120 feet of northern property boundary.

Floor Area Ratio: .65

Basements and below grade parking areas shall not count toward the allowable floor area.

Building Setbacks: 20 feet from Hospital Drive
Except for overlay zone, 10 feet from perimeter boundaries and interior roads.

Overlay Zone: 50 feet from northern property boundary.

Open Space: 20 percent of area to remain as permanent open space. Parking areas are not included within the definition of open space.

Parking: Parking areas shall be setback from all public rights-of-way a minimum of 10 feet.

Overlay Zone: Parking areas shall be setback from the northern property boundary a minimum of 15 feet.

Lighting Within Overlay Zone: Exterior lighting of parking areas shall not exceed 10 feet in height, nor shall the lumination be directed toward the adjacent residential properties.

Area 4 (Lupita Street)

Maximum Building Height: 24 feet

Floor Area Ratio: .30

Building Setback: 20 feet from Lupita
20 feet from Hospital Drive
10 feet from Galisteo Street
10 feet from all other perimeter boundaries

Open Space: 20 percent of the area to remain as permanent open space. Parking areas are not included within the definition of open space.

Area 4a

Maximum Building Height: 18 feet

Floor Area Ratio: .3

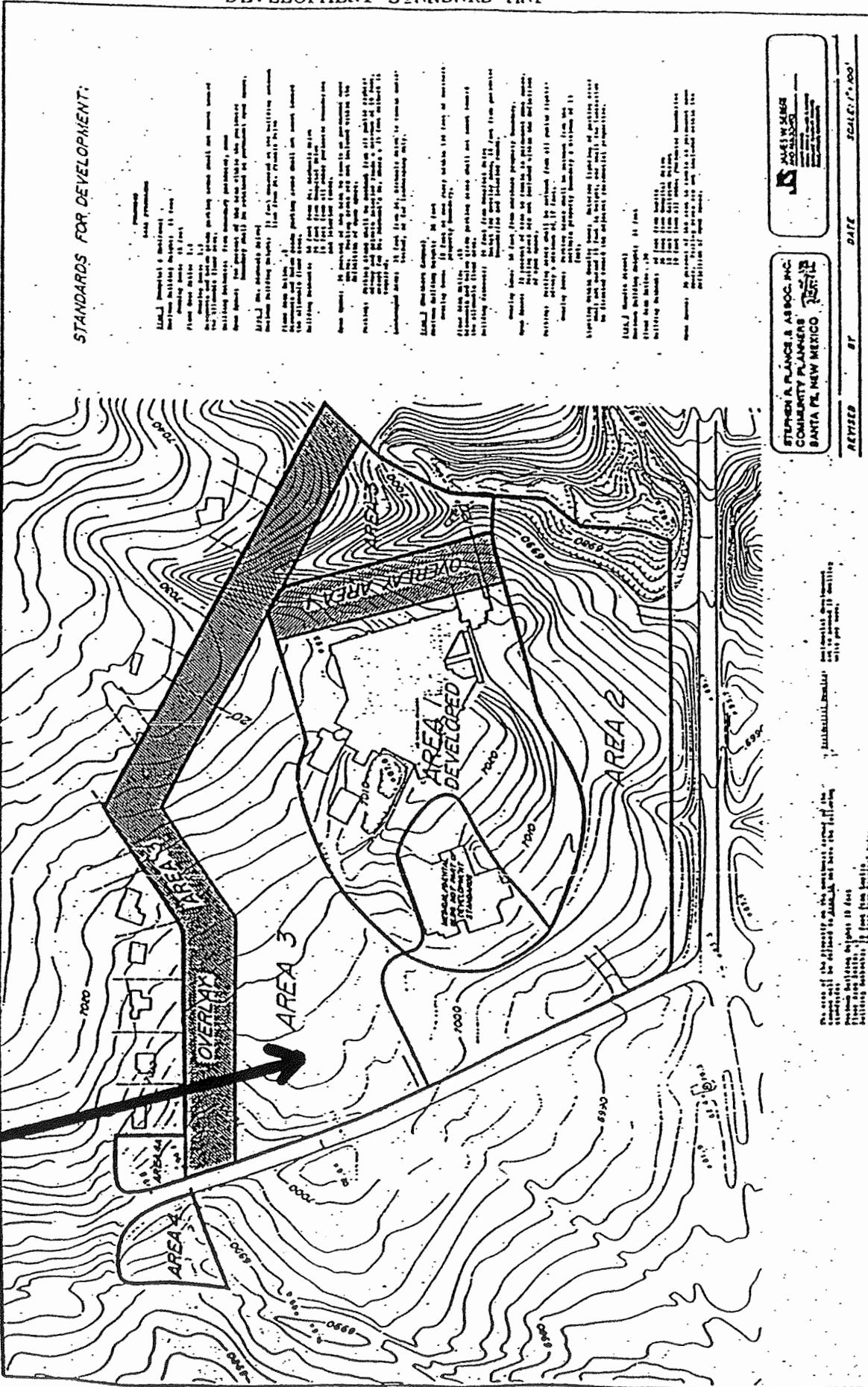
Building Setback: 20 feet from Lupita
10 feet from Hospital Drive
20 feet from east boundary
10 feet from all perimeter boundaries

Open Space: 20 percent of the area to remain as permanent open space. Parking areas are not included within the definition of open space.

Residential Development

Maximum density for residential development will not exceed 12 dwellings per acre.

MAP 7
DEVELOPMENT STANDARD MAP



STANDARDS FOR DEVELOPMENT:

- 1. All buildings shall be constructed on a minimum 10-foot wide lot.
- 2. All buildings shall be constructed on a minimum 10-foot wide lot.
- 3. All buildings shall be constructed on a minimum 10-foot wide lot.
- 4. All buildings shall be constructed on a minimum 10-foot wide lot.
- 5. All buildings shall be constructed on a minimum 10-foot wide lot.
- 6. All buildings shall be constructed on a minimum 10-foot wide lot.
- 7. All buildings shall be constructed on a minimum 10-foot wide lot.
- 8. All buildings shall be constructed on a minimum 10-foot wide lot.
- 9. All buildings shall be constructed on a minimum 10-foot wide lot.
- 10. All buildings shall be constructed on a minimum 10-foot wide lot.
- 11. All buildings shall be constructed on a minimum 10-foot wide lot.
- 12. All buildings shall be constructed on a minimum 10-foot wide lot.
- 13. All buildings shall be constructed on a minimum 10-foot wide lot.
- 14. All buildings shall be constructed on a minimum 10-foot wide lot.
- 15. All buildings shall be constructed on a minimum 10-foot wide lot.
- 16. All buildings shall be constructed on a minimum 10-foot wide lot.
- 17. All buildings shall be constructed on a minimum 10-foot wide lot.
- 18. All buildings shall be constructed on a minimum 10-foot wide lot.
- 19. All buildings shall be constructed on a minimum 10-foot wide lot.
- 20. All buildings shall be constructed on a minimum 10-foot wide lot.
- 21. All buildings shall be constructed on a minimum 10-foot wide lot.
- 22. All buildings shall be constructed on a minimum 10-foot wide lot.
- 23. All buildings shall be constructed on a minimum 10-foot wide lot.
- 24. All buildings shall be constructed on a minimum 10-foot wide lot.
- 25. All buildings shall be constructed on a minimum 10-foot wide lot.
- 26. All buildings shall be constructed on a minimum 10-foot wide lot.
- 27. All buildings shall be constructed on a minimum 10-foot wide lot.
- 28. All buildings shall be constructed on a minimum 10-foot wide lot.
- 29. All buildings shall be constructed on a minimum 10-foot wide lot.
- 30. All buildings shall be constructed on a minimum 10-foot wide lot.
- 31. All buildings shall be constructed on a minimum 10-foot wide lot.
- 32. All buildings shall be constructed on a minimum 10-foot wide lot.
- 33. All buildings shall be constructed on a minimum 10-foot wide lot.
- 34. All buildings shall be constructed on a minimum 10-foot wide lot.
- 35. All buildings shall be constructed on a minimum 10-foot wide lot.
- 36. All buildings shall be constructed on a minimum 10-foot wide lot.
- 37. All buildings shall be constructed on a minimum 10-foot wide lot.
- 38. All buildings shall be constructed on a minimum 10-foot wide lot.
- 39. All buildings shall be constructed on a minimum 10-foot wide lot.
- 40. All buildings shall be constructed on a minimum 10-foot wide lot.
- 41. All buildings shall be constructed on a minimum 10-foot wide lot.
- 42. All buildings shall be constructed on a minimum 10-foot wide lot.
- 43. All buildings shall be constructed on a minimum 10-foot wide lot.
- 44. All buildings shall be constructed on a minimum 10-foot wide lot.
- 45. All buildings shall be constructed on a minimum 10-foot wide lot.
- 46. All buildings shall be constructed on a minimum 10-foot wide lot.
- 47. All buildings shall be constructed on a minimum 10-foot wide lot.
- 48. All buildings shall be constructed on a minimum 10-foot wide lot.
- 49. All buildings shall be constructed on a minimum 10-foot wide lot.
- 50. All buildings shall be constructed on a minimum 10-foot wide lot.

STEPHEN A. PLANCE & ASSOC., INC.
COMMUNITY PLANNERS
SANTA FE, NEW MEXICO

DATE: _____
SCALE: 1" = 100'

ST. VINCENT HOSPITAL MASTER PLAN
DEVELOPMENT STANDARDS
SHEET 8 OF 11

Please refer to the site plan for the location of the
OVERLAP AREA. The OVERLAP AREA is the area
where the two lots meet. The OVERLAP AREA is
the area where the two lots meet. The OVERLAP
AREA is the area where the two lots meet. The
OVERLAP AREA is the area where the two lots
meet. The OVERLAP AREA is the area where
the two lots meet. The OVERLAP AREA is the
area where the two lots meet. The OVERLAP
AREA is the area where the two lots meet.

PHYSICIAN'S PLAZA
SITE

EXHIBIT I

TABLE A

Relationship of Siting Criteria to Medical Services

	Access		Visibility		Terrain			Noise	
	Important	Less Important	Important	Less Important	Slopes	Minimum Constraint	Steeper Slopes	Noise Sensitive	Less Noise Sensitive
Medical & Related Services									
Respiratory Therapy		X			X		X		X
Cardiac Rehabilitation		X			X		X		X
Physical Therapy		X		X			X		X
Occupational Therapy		X			X		X		X
Specialty Clinics		X		X			X		X
Urgent Care	X			X			X		X
Birthing Center	X			X			X		X
Skilled Nursing Care		X		X			X		X
Private Medical Offices	X			X			X		X
Wellness/Diagnostic Center		X			X		X		X
Day Care		X			X		X		X
Business Services		X			X		X		X
Purchasing/Warehouse		X			X		X		X
Grounds & Property		X			X		X		X
Housing (Staff & Families of Patients)		X			X		X		X

Based on the level of importance or relevance from Table A, the medical and related services were assigned to generalized locations shown on Map 6. While these locations are considered optimum at this point in time, a periodic reevaluation will have to be conducted to determine if there have been changes in the original assumptions. Since there are a greater number of uses for Area 2, which is smaller in size than Area 1, it is anticipated that Area 2 will reach saturation of development more rapidly than Area 1. Certain services in Area 2 could also be located off campus. In some cases, a medical service or related use may be equally appropriate for two areas.

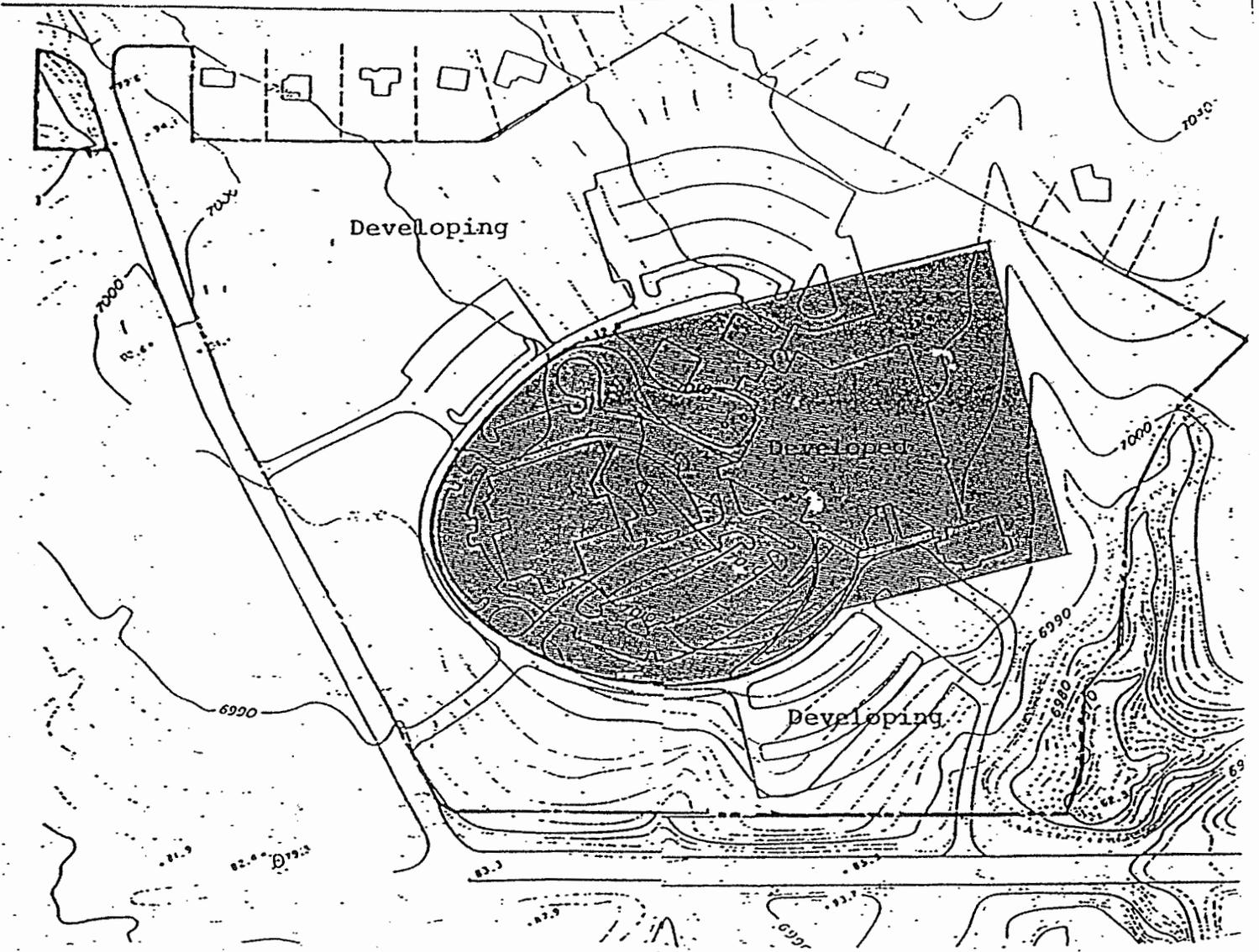
The area recommendations for each of the medical and related uses is set forth below.

<u>Type of Service</u>	<u>Area Designation</u>
Respiratory Therapy	2
Cardiac Rehabilitation	2
Physical Therapy	1 & 2
Occupational Therapy	1 & 4
Specialty Clinics	1 & 4
Urgent Care	1
Birthing Center	1
Skilled Nursing Care	1 & 2
Private Medical Offices	1 & 4
Wellness Center	2 & 4
Day Care	2 & 3
Business Services	2
Purchasing/Warehouse	2
Grounds/Property	2
Housing (staff and families of patients)*	2 & 3

*See definition of housing on Page 28.

MAP 5

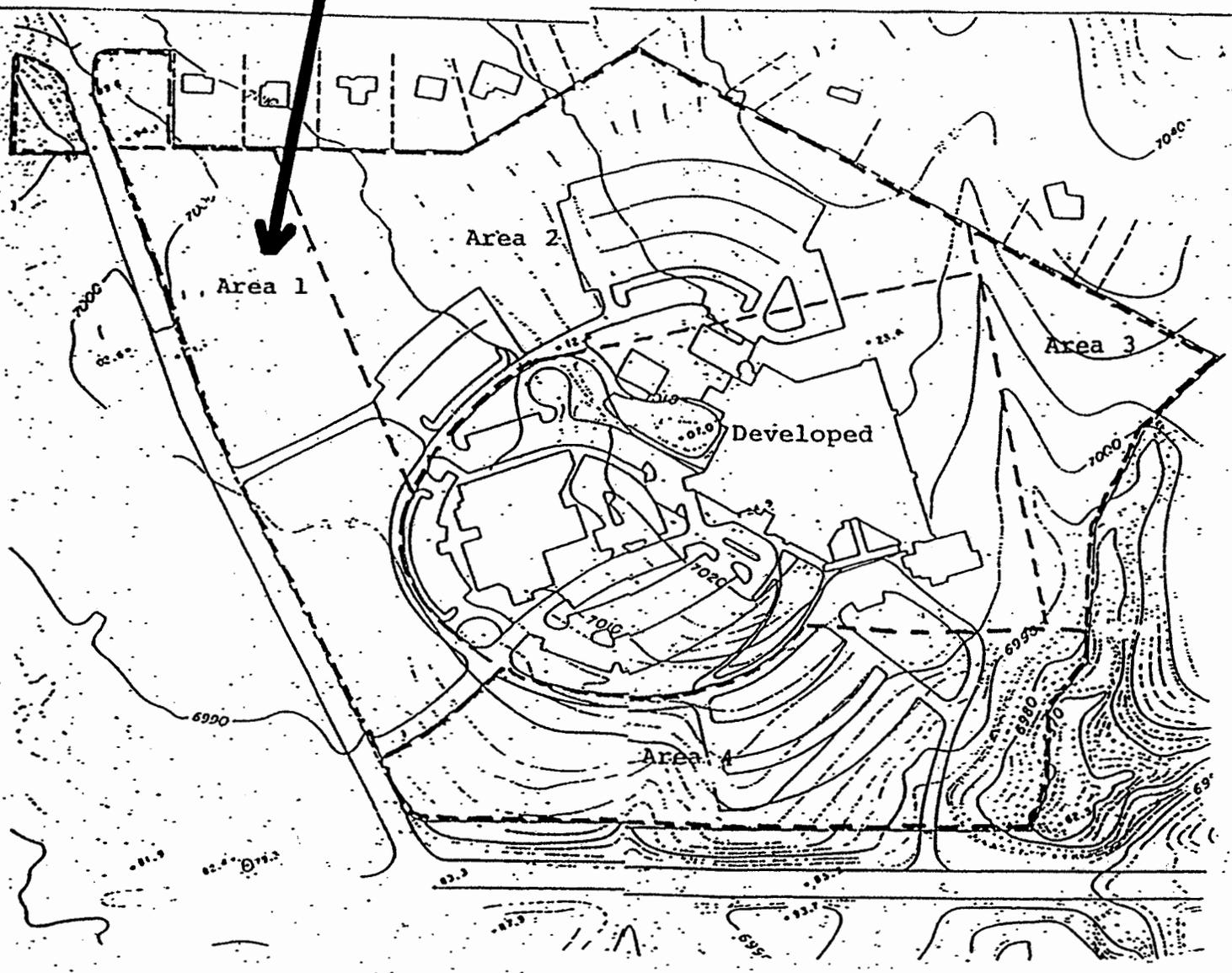
DEVELOPED & DEVELOPING
AREAS OF CAMPUS



**PHYSICIAN'S PLAZA
SITE**

MAP 6
SITING CRITERIA

Area 4.



City of Santa Fe, New Mexico

memo

DATE: Prepared for the November 6, 2003 Planning Commission Meeting

TO: Derrick Archuleta, Senior Planner
Greg Smith, Supervising Planner

FROM: Monica Montoya, Neighborhood Assistance Facilitator *mm*

SUBJ: Early Neighborhood Notification Report

Case # M 2003-34. Physicians Plaza of Santa Fe Development Plan. Paul Flehmer-Marshall Erdman & Associates, agent for St. Vincent Hospital, requests development plan approval for a two story medical office building of approximately 50,000 gross square feet on two tracts of land with a total area of approximately 4.564 acres. The property is zoned C-1 (Office and Related Commercial) and is located adjacent to the St. Vincent Hospital, bounded on the west by Hospital Drive.

BACKGROUND AND SUMMARY

The requirements of Section 14-3.1 SFCC 1987 regarding Early Neighborhood Notification, (ENN) have been satisfied in this case.

In accordance with the requirements of the ENN ordinances, 14-3.1(F) (3) SFCC 1987, the applicant discussed the proposed projects with property owners, tenants and registered neighborhood associations at two ENN meetings.

City staff was present at both meetings to acquaint the applicant and community with provisions of City ordinances, applicable requirements of City codes, development review process and to participate in the discussion process.

DISCUSSION:

It is staff's opinion that that the communication process among the applicant, immediate neighborhood and applicable neighborhood association was thorough and more than complied with the intent of the ENN ordinances. This can be shown through attached correspondence from immediate neighbors as well as the San Mateo Neighborhood Association.

The initial meeting held on June 23, 2003 uncovered many neighborhood concerns including the height of the proposed building, screening from adjacent property owners, noise from mechanical equipment, increased traffic, architectural style, site lighting and compliance with the St. Vincent Master Plan.

In response to these concerns, the applicant made revisions to the plan to include an increase of setback from neighbors property lines, relocation of the mechanical equipment to the basement, reduction the overall height of the building, evidence to show that views of the mountains to the south will not be blocked, revision to the landscaping to protect neighbors view of the mountains, revision of the access design to encourage traffic to use St. Michaels Drive, redesign of the building entrance, and timers on site lighting.

Revisions were presented to the neighborhood on August 5, 2003 at which time many neighbors applauded the applicant for responding positively to concerns raised at their previous meeting.

Several neighbors continued to be concerned with the additional traffic which will be generated in the neighborhood, specifically at the intersection of Galisteo Street and Hospital Drive.

*Correspondence received by staff is attached for Planning Commission review.

Physicians Plaza of Santa Fe

City of Santa Fe
Early Notification Guidelines

1. Effect on character and appearance of the surrounding neighborhoods.

The Proposed Physicians Plaza of Santa Fe satisfies the architectural design review standards set by the City of Santa Fe. The proposed building is placed on the site facing Hospital Dr. with parking spaces located to the rear or south side. The north side yard separating the proposed building from residential homes is landscaped open space. We have met individually with the homeowners adjoining this development and have worked to increase the landscape setbacks and improve the fencing to their satisfaction.

The proposed height of this 2-story building is less than the maximum allowed by zoning and has been approved by the City of Santa Fe. The roof is flat and no major mechanical equipment will be located on the roof. The exterior material will be stucco/adobe of pastel earth tone hues.

2. Effect on protection of the physical environment.

The proposed building satisfies the landscaping and site planning review standards set by the City of Santa Fe. The proposed parking lots are separated by landscaping and have interior planting areas with canopy trees and low growing shrubs. Perimeter planting strips of a minimum 25 ft in width with trees and shrubs are provided between parking lots and property lines. All ground equipment and service areas will be screened from view. Ground and pole mounted artificial lighting sconces are shielded from public view. The building was reduced from 3 to 2 stories and mechanical equipment removed from the roof to preserve views. Existing drainage ways have been preserved.

3. Impacts on any prehistoric, historic, archaeological or cultural sites or structures, including acequias and the historic downtown.

Not Applicable.

4. Relationship to existing density and land use within the surrounding area and with the land uses and densities proposed by the City General Plan.

The existing zoning does permit medical office buildings and there are several similar medical facilities on Hospital Drive. This project meets or exceeds all of the criteria outlined in the 1984 Campus Master Plan for St. Vincent Hospital. The project does not require any variances and meets the City planning and zoning requirements.

Physicians Plaza of Santa Fe

5. **Effects upon parking, traffic patterns, congestion, pedestrian safety, impacts of the project on the flow of pedestrian or vehicular traffic and provision of access for the disabled, children, low-income and elderly to services.**

All parking for this building is provided on site without any use of existing Hospital parking or on street parking. The building features a patient drop-off area in front of the building. A separate exit is provided for pick-up of post surgery patients. Traffic is a concern in this area. A complete traffic study was completed in July and amended in September. The proposed traffic circle at San Mateo and Galisteo will improve that intersection and more than accommodate traffic from this and other proposed projects. A pedestrian cross-walk and traffic calming device is proposed at Hospital Drive from the Physicians Plaza to the Radiology building to the west. Hospital Drive will be widened in order to provide a right turn lane onto St. Michael Drive.

6. **Impact upon the economic base of Santa Fe.**

This facility is a physician owned project and drive by the need to retain physicians and recruit new physicians to Santa Fe. Medical care is one of the core community services and communities throughout the United States are in competitions for physicians. This facility is very important to the physicians, as it will enable them to provide new services in a more efficient and patient friendly environment. This is the type of healthcare facility that younger physicians look for when choosing where to locate. The proposed Physicians Plaza of Santa Fe will create a positive economic impact for St. Vincent Hospital.

7. **Effect upon availability of affordable housing and availability of housing choices for all Santa Fe residents.**

Not Applicable.

8. **Effect upon public services such as fire, police protection, school services and other public services or infrastructure elements such as water, power, sewer, communication, buy systems, commuter or other services or facilities.**

The proposed facility will provide an increased tax base to support public services such as schools, fire and police protection.

9. **Impacts upon water supply, availability and conservation methods.**

Landscaping areas will utilize surface water for a portion of the irrigation. All storm water run-off will be retained on site. The owners will provide the required water saving toilets offsets required by City code. This facility will not make any demands on the existing utilities that exceed current capacity.

Physicians Plaza of Santa Fe

10. Effect on opportunities for community integration and social balance through mixed land use, pedestrian oriented design and linkages among neighborhoods and recreational activity and employment centers.

The existing Commercial City Zoning Ordinances have been met including pedestrian sidewalks connecting to the public sidewalks at the street.

11. Effect upon Santa Fe's urban form.

The design has fulfilled the requirements of the architectural design standards and the landscaping, site planning standards set by the City of Santa Fe. Well beyond that, the proposed Physicians Plaza will be a "state of the art" and patient friendly healthcare facility. This will improve Santa Fe's ability to maintain a regional health care presence. It will reduce the need for patients to travel beyond Santa Fe for the type of medical care experience that is provided in other regional centers.

Marshall Erdman and Associates

MEMORANDUM

To: Monica Montoya
City of Santa Fe Development Review Division

From: Paul Flehmer, AIA

RE: Response to neighbors concerns

Date: July 23, 2003

The following issues and responses are based on comments from the June 23rd neighborhood meeting and meetings with each homeowner that abuts the property on July 8th.

- **Screening** – increase setback from 15' to 25' and will improve the existing fence. Samson's, Rapport's and Segura's indicated strong support for the project.
- **Height and view screening** – we are working to remove mechanical equipment from the roof and hope to be able to present that at the meeting. This will reduce the overall height of the project the building will meet the 36' height limit. Neighbor Kibler was concerned about the project blocking his view of the mountains to the south. We will show him the building corner and should be able to demonstrate the building will not block the prime views. We will further work on the landscaping to remove shade trees that could block his views in the future.
- **Noise abatement** – by locating the mechanical in the basement of the building noise abatement will be achieved.
- **Traffic** – in order to encourage more traffic to go toward St. Michael Drive the curb cut from the parking lot to Hospital drive has been eliminated. This moves cars 240' further south. The drive alignment with Harkle Road gives drives to easy options to travel south to St. Michael. Improvements to Hospital Drive and St. Michael Drive intersection will allow for easier traffic movement by providing a right turn lane onto St. Michael. To reduce traffic movement north and also provide traffic calming, a traffic table will be proposed across Hospital drive. This will be located between the west entrance to the building and the Radiology Center.
- **Architecture** – revisions based on comments regarding west entry, roof screen and general building design.
- **Location** – present further information on the constraints of alternate site and difficulties of access to hospital. Current site meets or exceeds development criteria. Other site requires variances.
- **Lighting** – site lighting will be 20' to 25' high and can be on timers. Three of the four neighbors like the lighting and the security it provides.
- **Hospital Master Plan Compliance** – meets or exceeds criteria, see the attached letter.

GAIL & ELLIOT RAPOPORT

216 West Lupita Road Santa Fe, NM 87505 Telephone: 505.982.8143

August 17, 2003

Ms. Monica Montoya
Neighborhood Assistance Facilitator, Permit & Development Review
P.O. Box 909
200 Lincoln Avenue
Santa Fe, NM 87504-0909

Dear Ms. Montoya,

I attended the recent August 5, 2003, second neighborhood, meeting regarding the proposed Medical Office Building to be built on Hospital Drive. I was at the previous meeting and was very impressed with this second presentation by Paul Flehmer and the changes he had made to the building between the two meetings. He has tried to accommodate all the concerns we as neighbors had raised regarding the proposed building. As one of the closest neighbors to the project, I live at the second house off Hospital Drive on Lupita Road, I felt Mr. Flehmer was trying as hard as possible to be a good neighbor. From the lowered height of the building, to the orientation of the entrance, to the set-backs and buffer border between our homes and the new building: he proposed all the changes we requested on the building project.

I want to thank him and especially thank you for working as hard as possible to resolve issues with the neighborhood and address our concerns. The other problems of traffic and density are not solvable with this project; but I understand they are trying very hard on this project to be good neighbors, and your most professional office is continuing to pay attention to our input.

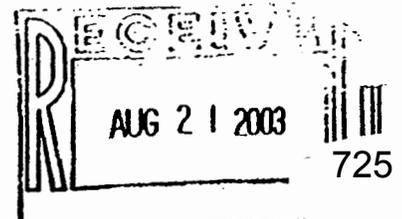
Thank you again.

Sincerely,



Gail Rapoport

cc:pfehmer



RECEIVED
AUG 21 2003

GAIL & ELLIOT RAPOPORT

216 West Lupita Road Santa Fe, NM 87505 Telephone: 303.982.8143

DENVER

August 17, 2003

Ms. Monica Montoya
Neighborhood Assistance Facilitator, Permit & Development Review
P.O. Box 909
200 Lincoln Avenue
Santa Fe, NM 87504-0909

Dear Ms. Montoya,

I attended the recent August 5, 2003, second neighborhood meeting regarding the proposed Medical Office Building to be built on Hospital Drive. I was at the previous meeting and was very impressed with this second presentation by Paul Flehmer and the changes he had made to the building between the two meetings. He has tried to accommodate all the concerns we as neighbors had raised regarding the proposed building. As one of the closest neighbors to the project, I live at the second house off Hospital Drive on Lupita Road, I felt Mr. Flehmer was trying as hard as possible to be a good neighbor. From the lowered height of the building, to the orientation of the entrance, to the set-backs and buffer border between our homes and the new building; he proposed all the changes we requested on the building project.

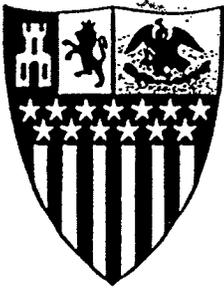
I want to thank him and especially thank you for working as hard as possible to resolve issues with the neighborhood and address our concerns. The other problems of traffic and density are not solvable with this project; but I understand they are trying very hard on this project to be good neighbors, and your most professional office is continuing to pay attention to our input.

Thank you again,

Sincerely,

Gail Rapoport

Paul Flehmer



City of Santa Fe, New Mexico

200 Lincoln Avenue, P.O. Box 909, Santa Fe, N.M. 87504-0909

Larry A. Delgado, *Mayor*
Jim Romero, *City Manager*

Councilor

Carol Robertson-Lopez, Mayor Pro Tem, Dist. .
Patti J. Bushee, Dist. 1
David Pfeffer, Dist. 1
Karen Heldmeyer, Dist. 2
Rebecca Wurzbarger, Dist. 2
Miguel M. Chavez, Dist. 3
David Coss, Dist. 3
Matthew E. Ortiz, Dist. 4

July 10, 2003

Claiborne Booker
320 Cadiz Road
Santa Fe, New Mexico 87505-4615

Dear Ms. Booker:

This letter responds to your letter of June 30th regarding the Early Neighborhood notification procedure and a request for a new meeting for the Physicians Plaza of Santa Fe.

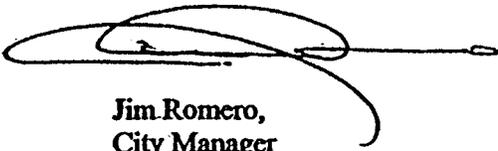
As I understand from your letter, you would like an additional neighborhood meeting to allow members of the San Mateo Neighborhood Association to attend and participate in the discussion regarding the upcoming application for the Physicians Plaza of Santa Fe, an outpatient surgery facility which proposes to be located at the northwestern most portion of the St. Vincent Property.

The representatives for the Physicians Plaza of Santa Fe have agreed to hold an additional neighborhood meeting. Notice of this meeting will be sent to the San Mateo Neighborhood Association as registered with the City.

The meeting will occur prior to the Planning Commission taking action on the application.

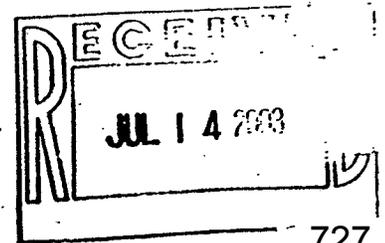
If you have any questions, please contact Monica Montoya, Neighborhood Assistance Facilitator at 955-6822.

Sincerely,



Jim Romero,
City Manager

xc: Karen Heldmeyer, Councilor District 2
Rebecca Wurzbarger, Councilor District 2
Jim Salazar, Permit & Development Review Division Director
Greg Smith, Supervising Planner
~~Monica Montoya, Neighborhood Assistance Facilitator~~
Andy Sandoval, Plans Examiner



727

MATEO NEIGHBORHOOD ASSOCIATION
Cordova Road to St. Michael's Drive
Old Pecos Trail to St. Francis Drive

8 September 2003

Dr. John Lucas, CEO
Dr. Gary Frank, CMO
St. Vincent Hospital
455 St. Michael's Drive
Santa Fe, New Mexico 87505-7601

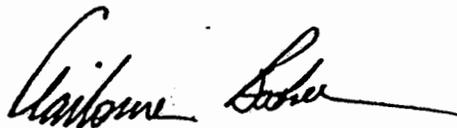
OUTPATIENT SURGERY PROPOSED DEVELOPMENT

Dear Dr. Lucas and Dr. Frank:

On 5 August 2003, St. Vincent Hospital sponsored an Early Neighborhood Notification meeting to discuss a proposed 40-50,000 ft² outpatient surgery building on the Hospital's property as a replacement for the non-ENN-complying meeting on 23 June 2003. At that meeting, there were a number of concerns raised about the increase in traffic to the neighborhood in general and Galisteo Street/Hospital Drive in particular. Several of us discussed this with John Nitzel, the City of Santa Fe's Traffic Division Director. Enclosed is a summary from David Barker, who with others is developing a 21-acre parcel very close to the proposed building site. We ask that you add this to the official record of the documentation to be presented to the City of Santa Fe Planning Commission for its public hearing on this matter.

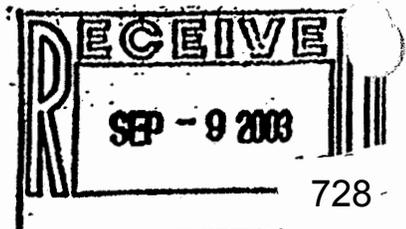
Once again, we note that any discussion of development by the hospital will be linked by neighbors to the current issues surrounding noise and traffic in the neighborhood. We encourage an open and forthright dialogue on all of these items.

Yours respectfully,
SAN MATEO NEIGHBORHOOD ASSOCIATION



Claiborne Booker
Director
320 Cadiz Road
Santa Fe, New Mexico 87505-4615

Copy to: Paul Flehmer, Marshall Erdman & Associates
Greg Smith, City of Santa Fe Department of Planning and Land Use
John Nitzel, City of Santa Fe Traffic Division
The Honorable Karen Heldmeyer
The Honorable Rebecca Wurzbarger





September 30, 2003

Derrick Archuleta, Planner
City of Santa Fe
200 Lincoln Ave
PO Box 909
Santa Fe, NM 87504-0909

Re: Physicians Plaza of Santa Fe

Dear Derrick,

The above referenced project meets or exceeds all of the criteria outlined in the 1984 Campus Master Plan for St. Vincent Hospital. The project does not require any variances and meets the City planning and zoning requirements. A Santa Fe physician on the Hospital's medical staff initiated this project, therefore it supports St. Vincent's business and strategic goals i.e.: to recruit and retain physicians to the community. The original Master Plan report dated September 27, 1984 stated; "Due to the extended time frame of the Master Plan the plan must be sufficiently flexible to accommodate a broad range of uses and medical technologies that are evolving and changing at an ever increasing rate." This project is located on a portion of the campus that we anticipated would be used to accommodate a facility with just such uses and technologies.

St Vincent's is currently in the initial stages of up-dating the 1984 Campus Master Plan. Relative to the Physicians Plaza development, St. Vincent Hospital reviewed a master planning guide with city planning officials in 1999 that is consistent with the 1984 master plan as well as the current Physicians Plaza submittal now before you. While traffic from the proposed Physicians Plaza facility must use Hospital Drive, St. Vincent's recognizes that the overall campus planning will consider increasing the utilization of the St. Michael Drive entrance. The following are some of our campus planning goals that should improve traffic circulation and encourage greater use of St. Michael Drive as an entry/exit.

1. The St. Michael Drive entry will be enhanced to provide access to the services located at the section of the campus.
2. Campus traffic flows, internal and external building and campus wayfinding, and parking will be reviewed and enhanced to support the services identified in the revised master plan submittal.
3. As development continues on St. Michael Drive, St. Vincent Hospital will discuss with the city planners ways to enhance St. Michael Drive access.

We anticipate that the Master Plan will be completed in early 2004.

Sincerely,

The Design Group

Doug Majewski, AIA
Principal

CC: Richard Crabtree
Paul Flehmer

P:15003_mobelleC2_AgencyAgent01da.doc



October 10, 2003

Mr. Derrick Archuleta
City of Santa Fe
Division of Community Development
200 Lincoln Avenue
Santa Fe, NM 87504-0909

Dear Mr. Archuleta,

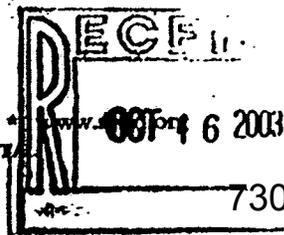
St. Vincent Hospital, in conjunction with leading physicians in our community, would like to build a new surgery center and office building on our campus. I would like to highlight the following community benefits that will come with your approval of the development proposal.

1. It would greatly enhance the ability for us to recruit physicians to our community. This has been a problem, which can result in inadequate emergency coverage or poor access to timely care.
2. It allows St. Vincent Hospital to utilize existing space for other needed services (i.e. expanded service line services, emergency services, diagnostic services).
3. It is an opportunity to partner with physicians, which also helps with recruitment and retention.

In conclusion, with your approval, the City of Santa Fe could be proud for assisting with the improvement of health care delivery for its people. Thank you for considering this issue.

Sincerely,

Gary D. Frank, M.D. M.M.M.
Chief Medical Officer





CITY OF SANTA FE

EARLY NEIGHBORHOOD NOTIFICATION MEETING SIGN-IN SHEET

Development Name: Plum Village Place
 Meeting Date: 8/5/03 Time: 5:30 Meeting Location: St Vincent's Hosp

Name _____ Address _____ Phone #/E-mail _____

T Bolleter Santa Fe Fire Dept 955-3120 JTBolleter@ci.santa-fe.nm

CLAIBRNE BOOKER 320 CADIZ ROAD 87505 992-0137 / QEF@AOL.COM

GARY FRANK St Vincent Hospital

Paul Wykewit 217 W. Lupita Rd 983-1033

JEAN McINTOSH 156 CAKE OPE FELIZ 983-8976

Mrs Don Bernero 410 W San Mateo 988-1328

Barbara Gay 231 W. San Mateo 988-1183 barbaragay@yahoo

Gail Rapoport 216 W. Lupita 982-8143

LEONARD HELMAN 1566 CARMINO AM VDR 992-4414 LEONARD@HARL.COM

FOR CITY USE: I hereby certify that the ENN meeting for the above named development took place at the time and place indicated.

Name: Menina Martinez Date: 8/5/03



CITY OF SANTA FE

EARLY NEIGHBORHOOD NOTIFICATION MEETING SIGN-IN SHEET

Development Name	<u>Chupicuadra Plaza</u>
Meeting Date	<u>8/5/03</u>
Time	<u>5:30</u>
Meeting Location	<u>St. Vincent's Hospital</u>

Phone #/E-mail

Name

Address

If Applicant's Representative

- NANCY HEWITT 1409 SEVILLE RD SF 87505 989-4119/hpi 2000 see thank me
- Rosie Brown 207 W. Lupita Rd 87505 670-5082
- David Barker 1805 Arroyo Chambi 87505 9829836
- Elex Bishaw 200 Lincoln SF 955-6583
- Laine Renfro Sedillo 221 W. Lupita 87505 984-2221
- Carol Schwendimann 1465 Seville Rd 87505 982-9256
-
-
-
-
-

FOR CITY USE: I hereby certify that the ENN meeting for the above named development took place at the time and place indicated.

Monica Montoya 18/5/03
 Name Date



CITY OF SANTA FE

EARLY NEIGHBORHOOD NOTIFICATION MEETING SIGN-IN SHEET

Development Name	<u>Phyllis Lane Plaza</u>
Meeting Date	<u>8/5/03</u>
Time	<u>5:30</u>
Meeting Location	<u>St. Vincent's Hospital</u>

Phone #/E-mail

Name

If Applicant's Representative

Riette Mogleston 141 E. Lupita Rd. 983-1268 riette.m@aol.com

FOR CITY USE: I hereby certify that the ENN meeting for the above named development took place at the time and place indicated.

Menica Montoya 8/5/03
Name Date



CITY OF SANTA FE - EARLY NEIGHBORHOOD NOTIFICATION PROCESS

PRE-APPLICATION MEETING SIGN-IN SHEET

Development Name: Physicians Plaza
 Meeting Date: Jan 25, 2005
 Meeting Location: _____

ATTENDEES:

Name	Address	Phone #/E-mail
Paul Wykest	217 W. Lupita Rd.	
Jim Kehler	212 W. Lupita Rd.	984-8186
PETER QUINTANA	225 W. Lupita Rd.	982-9619
Mary H. Don Bondand	215 W. Lupita Rd.	983-7879
JOHN HAYS	530 B. Abelle Rd.	989-1434
CLAIBORNE BOOKER	320 CADIZ ROAD 87505-4645	992-0137 / QEF@ADL
Bob Dvorak / Beta Beck	1561 Camino Amado 87505	988-7531
Vesta Webster	1609-B Don Gaspar 87505	982 9312
Nancy K Ruiz	1553 Camino Amado 87505	988-5495
& Bob Walsh	" nkrui2@cybermesa.com	
JOHN STAER	1567 CAMINO AMADO	983-3725
VERA STACK	1567 CAMINO AMADO	983-3725
Mary Stiermer	410 W San Mateo Rd	988-1328
Barbara Gay	231 W. San Mateo	988-1183 / barbarag
Cheri Long	231 W. San Mateo Rd	988-1183 ja
MARY DYKTON	1824 Arroyo Chamiso Rd	986-8742
JOHN McINTOSH	156 CALLE OJO FELIZ	983-8976
ANDY LEADERMAN	SOURAVAZ	992-6265
Gail Rapoport	216 West Lupita Rd.	982.8143

I certify that the pre-application meeting for the above named development took place at the time and place indicated.

Name: _____

ROBT. J. WESSER 1109B DON GASPAR AVE 982-9312
 David Barker 1805 Arroyo Chamiso 982 9836
 DOUG MALEWSKI 10421 NITA PL 332-9676

City of Santa Fe, New Mexico

memo

DATE: Prepared for the March 8, 2005 Planning Commission Meeting

TO: Greg Smith, Supervising Planner

FROM: Monica Montoya, Zoning Section Manager *MM*

SUBJ: Early Neighborhood Notification Report

Case #M 2004-47 St. Vincent Hospital Campus Master Plan. The Design Group, agent for St. Vincent Hospital, requests consideration of a master plan for the St. Vincent Hospital Campus located at 455 St. Michaels Drive. The plan would serve as a general guide to future development of the hospital campus. The property is zoned C-1 (Office and Related Commercial). The site encompasses a total of approximately 47.8 acres and is located at the northeast corner of St. Michael's Drive and Hospital Drive.

BACKGROUND AND SUMMARY

The requirements of Section 14-3.1 SFCC 1987 regarding Early Neighborhood Notification, (ENN) have been satisfied in this case.

In accordance with the requirements of the ENN ordinances, 14-3.1(F) (3) SFCC 1987, the applicant invited property owners, tenants and registered neighborhood associations to an ENN meeting to discuss the proposed project. The meeting was held on January 31, 2005 at 5:30 PM and was well attended.

City staff was present to acquaint the applicant and community with provisions of City ordinances, applicable requirements of City codes, development review process and to participate in the discussion process.

NEIGHBORHOOD RESPONSE

The plans submitted for Planning Commission review are consistent with those presented at the neighborhood meeting.

There were three major issues of issue of concern to the neighbors as follows:

Exhibit *D*
3/8/05 PC

Traffic impact: It was expressed that traffic has increased significantly in the general area of Hospital Drive, Galisteo and surrounding streets as a result of recent development in the area. The concern was that traffic congestion will continue to increase as development continues. Neighbors have called for meetings with the City Traffic Division to discuss traffic calming.

Lighting: The hospital will use appropriate lighting in compliance with the City's lighting ordinance.

Parking: The number of parking spaces will comply with the City's parking ordinance.

ENN GUIDELINES

The applicant prepared the attached responses to the eleven ENN guidelines. These responses were used to discuss the project.

Xc: Gary Park, Senior Planner

Attachments

EARLY NOTIFICATION QUESTIONNAIRE

1. Effect on character and appearance of the surrounding neighborhoods.

The St. Vincent Hospital Master Plan will effectively enhance the character and appearance of the neighborhood by maintaining and enhancing the architecture, landscape, parking areas and signage through out the hospital campus. The scale, texture and colors proposed will coincide with those already found on the campus. A proposed landscape buffer similar to the one recently approved for the proposed physicians plaza project will be incorporated along the Northern edge of the property.

Orientation to the campus will shift emphasis to access from St. Michaels' drive and deemphasize access form hospital drive. Through traffic on hospital drive from the North will be deemphasized by the incorporation of traffic calming measures. In addition, a proposed closure of an existing access drive from hospital drive will improve circulation on that street.

2. Effect on protection of the physical environment.

The proposed master plan will satisfy the landscaping and site planning review standards set by the City of Santa Fe. The proposed parking lots are separated by landscaping and have interior planting areas with canopy trees and low growing shrubs. Perimeter planting trips of a minimum 25 feet in width with trees and shrubs are provided between parking lots and property lines. Ground and pole mounted artificial lighting sources will be shielded from public view. Existing drainage ways have been preserved.

3. Impacts on any prehistoric, historic, archaeological or cultural sites or structures, including acequias and the historic downtown.

There are no known prehistoric, historic, archaeological or cultural sites or structures included within the St. Vincent Hospital Master Plan.

4. Relationship to existing density and land use within the surrounding area and with the land uses and densities proposed by the City General Plan.

The St. Vincent Hospital Master Plan complies with the existing density and land use proposed by the City General Plan. This master plan will meet and/or exceed all of the criteria outlined in the previously approved 1984 Campus Master Plan for St. Vincent Hospital. This master plan will not require and variances and will meet the City of Santa Fe planning and zoning requirements.

5. Effects upon parking, traffic patterns, congestion, pedestrian safety, impacts of the project on the flow of pedestrian or vehicular traffic and provision of access for the disabled, children, low-income and elderly to services.

One of the primary goals of this master plan is to improve patient, staff and visitor vehicular and pedestrian access both to the campus and internally on the campus. The St. Vincent Hospital Master Plan dramatically improves parking, traffic patterns and eases congestion by providing improved signage and site circulation roads. The closing of the hospital entrance on Hospital Dr. nearest to St. Michael's will encourage vehicular access at the main entry on St. Michael's, reduce overall congestion, and improve pedestrian safety on Hospital Drive. The Master Plan provides for better pedestrian access by decreasing the parking area site slope and providing accessible sidewalks and crossings. An internal campus ring road is added to improve wayfinding for vehicles once they have entered the campus. The ring road will provide access to all destinations on the campus. It will provide access to parking areas that support the functions located within the campus. A new patient drop off area and canopy is proposed.

6. Impact upon the economic base of Santa Fe.

Access to healthcare is one of the important issues facing most communities today. Providing access to healthcare can have a positive economic impact and support economic growth, sustainability, and stability. The St. Vincent Hospital Master Plan...

7. Effect upon availability of affordable housing and availability of housing choices for all Santa Fe residents.

This Master Plan will not affect the availability of affordable housing choices for Santa Fe residents.

8. Effect upon public services such as fire, police protection, school services and other public services or infrastructure elements such as water, power, sewer, communications, bus systems, commuter or other services or facilities.

The St. Vincent Master Plan will enhance public services by providing better fire and police access to the site as well as on-site public bus service and bike parking. Upgrades to communications systems will provide the public with enhanced services. A new central plant will provide for improved power management and conservation.

9. Impacts upon water supply, availability and conservation methods.

The Master Plan will maintain the use of a private well for water supply and will improve conservation by providing low water use planting and permeable ground area. Maintaining on-site water detention also will improve irrigation conservation. The Master Plan implementation will not make any demands on the existing utilities that exceed current capacity.

10. Effect on opportunities for community integration and social balance through mixed land use, pedestrian oriented design, and linkages among neighborhoods and recreational activity and employment centers.

The Master Plan complies with the existing Commercial City Zoning Ordinances by making provisions for enhanced pedestrian sidewalks connecting to the public sidewalks at the street. Enhanced traffic flow patterns will improve overall neighborhood integration.

11. Effect upon Santa Fe's Urban form.

The Master Plan fulfills the requirements of the architectural design standards and the landscaping, site planning standards set by the City of Santa Fe. The goals of the Master Plan are to enhance the existing and planned expansion of services provided by St. Vincent Hospital in a way that makes the patient a priority. The implementation of the Master Plan over the coming years will ensure a regional health care presence that provides a patient friendly facility and services.

UPC / Map#	Physical Address	Assessed Property Owner	Property Owner / Tenant Mailing Address	Tenant/Occupant, if known
A 1-054-077-506-232	465 St. Michael's Dr. 117 Santa Fe, NM 87501	vacant		
Continued	465 St. Michael's Dr. 118 Santa Fe, NM 87501	Dermatology, Diseases of the Skin, Skin Cancer and Skin Surgery, Laser Surgery		
in book	465 St. Michael's Dr. 201 Santa Fe, NM 87501	St. Vincent Hospital Auditorium Classes		
of	465 St. Michael's Dr. 202 Santa Fe, NM 87501	Dr. Pardue, Obstetrics, Gynecology, Certified Menopause Clinician, Women's Health Colposcopist		
	465 St. Michael's Dr. 203 Santa Fe, NM 87501	Allergy, Asthma & Internal Medicine, Ltd.		
	465 St. Michael's Dr. 204 Santa Fe, NM 87501	Dr. Migdalski, General Dentistry		
	465 St. Michael's Dr. 205-206 Santa Fe, NM 87501	Dr. Seligson, Ophthalmologist		
	465 St. Michael's Dr. 207 Santa Fe, NM 87501	Dr. Peck, Dental Care for Children & Adolescents		
	465 St. Michael's Dr. 208 Santa Fe, NM 87501	Dr. Gavron, Endodontics & Dr. Mills, General Dentistry		
	465 St. Michael's Dr. 209 Santa Fe, NM 87501	St. Vincent Central Billing Office		
	465 St. Michael's Dr. 210 Santa Fe, NM 87501	Dr. Tafoya, Family Dentistry		
	465 St. Michael's Dr. 211 Santa Fe, NM 87501	Dr. McCormick, MD		
	465 St. Michael's Dr. 212 Santa Fe, NM 87501	Anesthesia Consultants		
B 1-054-077-518-284	Physician's Plaza of Santa Fe	Alan R. Main, Development Solutions Group, LLC	1055 Auraria Parkway, Suite 300 Denver, CO 80204	
Neighborhood Association: San Mateo Neighborhood Association Cordova Road to St. Michael's Drive Old Pecos Trail to St. Francis Drive Address: Claiborne Booker, Secretary/Treasurer 320 Cadiz Rd., Santa Fe, NM 87505-4615				
Neighborhood Association: Arroyo Chamisa/Sol y Lomas Neighborhood Association Address: Michael Steedle PO Box 22297, Santa Fe, NM 87502-2297				
Project Name: St. Vincent Hospital Campus Master Plan				

Mailing Log

UPC / Map#	Physical Address	Assessed Property Owner	Property Owner / Tenant Mailing Address	Tenant/Occupant, if known
1-054-097-057-129 / 1	450 St. Michael's Dr. Santa Fe, NM, 87505	Sangre De Cristo Girl Scout.	450 St. Michael's Dr. Santa Fe, NM, 87505	
1-054-097-082-118 / 2	444 St. Michael's Dr. Santa Fe, NM 87505	Chamisa Hills Association, Inc.	PO Box 1245, Northbrook, IL 60065	
1-054-097-120-104 / 3	440 St. Michael's Dr. Santa Fe, NM 87505	Lovelace Medical Center, Inc.	Attn: Leslie Hall, 5400 Gibson Blvd. SE, Albuquerque, NM, 87108	
1-054-097-141-144 / 4	435 St. Michael's Dr. Santa Fe, NM 87505	Berkelo, Robert or Sharon	St. Michael's Medical Park 706 Joachin Ln. Santa Fe, NM 87501	
" / "	"	"	435 St. Michael's Dr. A 101 Santa Fe, NM 87505	Novacare (tenant)
" / "	"	"	435 St. Michael's Dr. A 201 Santa Fe, NM 87505	Elizabeth Barkey, M.D., Inc. (tenant)
" / "	"	"	435 St. Michael's Dr. A 202 Santa Fe, NM 87505	Hanger Prosthetics Plus (tenant)
" / "	"	"	435 St. Michael's Dr. B 101 Santa Fe, NM 87505	Warren Hoffman, DDS, Erik Smith, RDH, and Janin Estes, RDH (tenants)
" / "	"	"	435 St. Michael's Dr. B 104 Santa Fe, NM 87505	Diane Freidman, MD, and Laurie Holmes, CNM -- Unity Medical Clinic
" / "	"	"	435 St. Michael's Dr. B 201 Santa Fe, NM 87505	Rocky Mountain Spine Institute (tenant)
" / "	"	"	435 St. Michael's Dr. A 203 Santa Fe, NM 87505	Frances Chavez, MD (tenant)
" / "	"	"	435 St. Michael's Dr. A 204 Santa Fe, NM 87505	Thomas W. Kravitz, MD, Vito Hemphill, DC and Joyce Durling-Jones, CH API (tenant)
1-054-097-133-228 / 5	1613 Don Gaspar Ave. Santa Fe, NM 87501	Gonzales, David M. & Many Ann	1613 Don Gaspar Ave. Santa Fe, NM 87505	
1-054-097-119-252 / 6	1566 Camino Amado Santa Fe, Nm 87501	Helman, Leonard A.	PO Box 182 Santa Fe, NM 87504	
1-054-097-096-276 / 7	1554 Camino Amado Santa Fe, NM 87501	Pfeiffer, Craig A. & Jeanne S. Niholland	1554 Camino Amado Santa Fe, NM 87501	
1-054-097-122-276 / 8	1561 Amado St. Santa Fe, NM 87501	Dvorak, Robert F., Republic Mortgage Co.	5101 Wheelis Dr. Ste 308 Memphis, TN 38117	
1-054-097-086-287 / 9	126 Camino Teresa Santa Fe, NM 87501	Fones, Bill N., Trustee	Bill Fones Trust 126 Camino Teresa Santa Fe, NM 87505	

31
32

PS

UPC / Map#	Physical Address	Assessed Property Owner	Property Owner / Tenant Mailing Address	Tenant/Occupant, if known
1-054-097-083-306 / 10	123 Camino Teresa Santa Fe, NM 87501	Williams, Francis B.	12 Millwood Ct. San Rafael, CA 94901	
1-054-097-070-305 / 11	129 Camino Teresa Santa Fe, NM 87501	Urquhart, Mary Lesley	129 Camino Teresa Santa Fe, NM 87501	
1-054-097-079-321 / 12	118 W. Lupita Rd. Santa Fe, NM 87501	Hart, Albert E.	118 Lupita Rd. Santa Fe, NM 87505	
1-054-097-067-319 / 13	124 W. Lupita Rd. Santa Fe, NM 87501	Hays, Howard Lewis	124 W. Lupita Rd. Santa Fe, NM 87501	
1-054-097-055-339 / 14	125 W. Lupita Rd. Santa Fe, NM 87501	Beers, Donald P. & Geraldine O.	c/o of mack E. With 100 La Salle Cir. Ste. A Santa Fe, NM 87505	
1-054-097-070-341 / 15	119 W. Lupita Rd. Santa Fe, NM 875042251	Reese, Jack P	119 W. Lupita Rd. Santa Fe, NM 87505	
1-054-097-030-334 / 16	205 W. Lupita Rd. Santa Fe, NM 87501	Lechner, Thomas E. & Theora L.	24 Vista de la Luna Santa Fe, NM 87505	
1-054-097-033-313 / 17	202 W. Lupita Rd. Santa Fe, NM 87505	Blount, Brian	202 W. Lupita Rd. Santa Fe, NM 87505	
1-054-097-021-313 / 18	204 W. Lupita Rd. Santa Fe, NM 87505	Segura, Tommy & Lucy	c/o Neighborhood Housing Service 1570 Pacheco St. Ste. A-1 Santa Fe, NM 87505	
1-054-097-009-317 / 19	212 W. Lupita Rd. Santa Fe, NM 87501	Kibler, Jim	PO Box 28451 Santa Fe, NM 87592	
1-054-097-014-339 / 20	215 W. Lupita Rd. Santa Fe, NM 87505	Davies, Mary	215 W. Lupita Rd. Santa Fe, NM 87505	
1-053-097-525-321 / 21	216 W. Lupita Rd. Santa Fe, NM 87501	Rapport, Elliot & Gail	216 W. Lupita Rd. Santa Fe, NM 87501	
1-053-097-512-325 / 22	222 W. Lupita Santa Fe, NM 87505	Samson, John G. & Victoria B.	222 W. Lupita Santa Fe, NM 87505	
1-053-097-517-346 / 23	221 W. Lupita Rd. Santa Fe, NM 87501	Renfro, Laine	221 W. Lupita Rd. Santa Fe, NM 87505	
1-053-097-466-281 / 24	1650 Hospital Dr. Santa Fe, NM 87505	Medical Specialty Associates	c/o Dr. Pinkerton 1650 Hospital Dr. Santa Fe, NM 87505	
" / "	"	"	1650 Hospital Dr. 200 Santa Fe, NM 87505	Paul T. Kovnat, MD, PC, FACP, Allan M. Lenetsky, MD, PC, Mark Seradowych, MD, PC, Alfred W. Pinkerton, MD, PA, FACP, FAGG, Robert Koffmann, MD, PC, FACP and Joshua Brown, MD, PC
" / "	"	"	1650 Hospital Dr. 300 Santa Fe, NM 87505	Stephen P. Lucero

UPC / Map#	Physical Address	Assessed Property Owner	Property Owner / Tenant Mailing Address	Tenant/Occupant, if known
" / "	"	"	1650 Hospital Dr. 400 Santa Fe, NM 87505	Adult Medicine Specialists of Santa Fe
" / "	"	"	1650 Hospital Dr. 500 Santa Fe, NM 87505	Paul M. DeStephano MD
" / "	"	"	1650 Hospital Dr. 600 Santa Fe, NM 87505	Karen M. Van De Velde, MD, PC
" / "	"	"	1650 Hospital Dr. 900 Santa Fe, NM 87505	The Endoscopy Center of Santa Fe
1-053-097-467-330 / 25	1620 Hospital Dr. Santa Fe, NM 87501	T, D, P & G Limited PTN	SW Ear, Nose & Throat 1620 Hospital Dr. Santa Fe, NM 87505	
1-053-097-466-315 / 26	1630 Hospital Dr. Santa Fe, NM 87501	Surgical Ventures, LLC	1630 Hospital Dr. Santa Fe, NM 87505	
" / "	"	"	1630 Hospital Dr. A Santa Fe, NM 87505	Santa Fe Orthopaedic Association
" / "	"	"	1630 Hospital Dr. A Santa Fe, NM 87505	Theresa Elliot, MD, PC
" / "	"	"	1630 Hospital Dr. A Santa Fe, NM 87505	Michael D. Milroy, MD, PC
" / "	"	"	1630 Hospital Dr. A Santa Fe, NM 87505	Steven C. Robeson and Eric W. Anderson, MD
" / "	"	"	1630 Hospital Dr. A Santa Fe, NM 87505	Gerald J. Littlefield MD, PC and Mark S. Bradley, MD
1-053-097-466-308 / 27	1640 Hospital Dr. Santa Fe, NM 87501	1640 Hospital Dr. LLC	51 W. Wild Flower Santa Fe, NM 87506	
" / "	"	"	1640 Hospital Dr. Santa Fe, NM 87501	Santa Fe Imaging, LLC
1-053-097-480-228 / 28	Hospital Dr. Santa Fe, NM 87501	Dennis Branch	421 St. Michael's Dr. Santa Fe, NM 87505	
1-053-097-472-215 / 29	1692 Hospital Dr. Santa Fe, NM 87501	Vigil, Debbie A. Obstetrics & Gynecology	1692 Hospital Dr. Santa Fe, NM 87505	
1-053-097-488-203 / 30	1700 Hospital Dr. Santa Fe, NM 87501	Urige, Edward J. & Deborah C.	1700 Hospital Dr. Santa Fe, NM 87505	
1-054-097-082-118 / 31	444 St. Michael's Dr. Santa Fe, NM 87505	Chamisa Hills Association, Inc.	PO Box 1245, Northbrook, IL 60065	
1-054-097-082-118 / 32	440 St. Michael's Dr. Santa Fe, NM 87505	Lovelace Medical Center, Inc.	Attr: Leslie Hall, 5400 Gibson Blvd. SE, Albuquerque, NM, 87108	
1-054-097-135-070 / 33	1804 Arroyo Chamiso Rd. Santa Fe, NM 87501	United Church of Santa Fe	1804 Arroyo Chamiso Rd. Santa Fe, NM 87505	
1-054-097-162-166 / 34	435 St. Michael's Dr. Santa Fe, NM 87505	Santa Fe Development Co.	812 Perdido St. New Orleans, LA 70112	

UPC / Map#	Physical Address	Assessed Property Owner	Property Owner / Tenant Mailing Address	Tenant/Occupant, if known
" / "	"	"	435 St. Michael's Dr. D Santa Fe, NM 87505	Division of Vocational Rehabilitation
1-054-007-105-100 / 30	435 St. Michael's Dr. Santa Fe, NM 87505	Berkull Enterprises, LLC	435 St. Michael's Dr. Santa Fe, NM 87505	
1-054-007-104-104 / 29	435 St. Michael's Dr. Santa Fe, NM 87505	Susan	435 St. Michael's Dr. Santa Fe, NM 87505	
1-054-097-166-182 / 37	3 Calle Medico Santa Fe, NM 87505	Pitcher, Kingsbury & Charity J.	PO Box 2287 Santa Fe, NM 87504-2287	
" / "	"	"	3 Calle Medico Santa Fe, NM 87505	The Argosy Co.
1-054-097-155-195 / 38	4 Calle Medico Santa Fe, NM 87505	Germanas Holding Limited Partnership	PO Box 178 Tesuque, NM 87574	
1-054-097-142-210 / 39	5 Calle Medico Santa Fe, NM 87505	RPM & Associates	6 Calle Medico Santa Fe, NM 87505	
" / "	"	"	5 Calle Medico A Santa Fe, NM 87505	Phillip B. Edgerton, DMD
" / "	"	"	5 Calle Medico B Santa Fe, NM 87505	Ron Trujillo, DDS
" / "	"	"	5 Calle Medico C Santa Fe, NM 87505	David Canzone, DOM, LMP
" / "	"	"	5 Calle Medico D Santa Fe, NM 87505	Michael Gallegos, DPS
" / "	"	"	5 Calle Medico E Santa Fe, NM 87505	William V. Cox, MD
1-054-097-149-218 / 40	6 Calle Medico Santa Fe, NM 87501	Rivera, Philip O. & Etal	6 Calle Medico Santa Fe, NM 87505	
" / "	"	"	6 Calle Medico 1 Santa Fe, NM 87501	J. Woodman Bobb, DMP
" / "	"	"	6 Calle Medico 2 Santa Fe, NM 87501	Philip O. Rivera, DDS
" / "	"	"	6 Calle Medico 4 Santa Fe, NM 87501	Robert J. Rivera, CPA
" / "	"	"	6 Calle Medico 5 Santa Fe, NM 87501	Brian Tracey, CDT
" / "	"	"	6 Calle Medico 6 Santa Fe, NM 87501	Robyn Benson, DOM, LMT
1-054-097-115-265 / 41	1560 Camino Amado Santa Fe, NM 87501	Velasquez, John A & Neil G. L. McMinn	c/o Bank of America 6053 Fashionsquare Dr. Ste. 200 Salt Lake City, Ut. 84107	
1-053-097-479-240 / 42	1672 Hospital Dr. Santa Fe, NM 87501	Dennis Branch	421 St. Michael's Dr. Santa Fe, NM 87505	

UPC / Map#	Physical Address	Assessed Property Owner	Property Owner / Tenant Mailing Address	Tenant/Occupant, if known
1-053-097-457-223 / 43	534 Harkle Rd. Santa Fe, NM 87505	Sena, Maria Dolores, Maria Christina & Diego Sena J.	534 Harkle Santa Fe, NM 87505	
1-053-097-474-245 / 44	530 Harkle Rd. B Santa Fe, NM 87505	Bisti Boys LLC	530 Harkle Santa Fe, NM 87505	
"/	"	"	530 Harkle Rd. B Santa Fe, NM 87505	Cassutt, Hays & Friedman, P.A.
"/	"	"	530 Harkle Rd. B Santa Fe, NM 87505	Joseph D. Joiner, Atty.
"/	"	"	530 Harkle Rd. B Santa Fe, NM 87505	Tracy E. Conner, Atty.
1-053-097-465-233 / 45	Harkle Rd. Santa Fe, NM 87505	El Paseo de Galisteo, Inc	PO Box 2265 Santa Fe, NM	
1-053-097-462-240 / 46	530 Harkle Rd. A Santa Fe, NM 87505	530 A Harkle Road LLC	PO Box 803 Santa Fe, NM 87574	
"/	"	"	530 Harkle Rd. A Santa Fe, NM 87505	Alan Rogers, M.D.P.C., S. Karen Evans, M.D. and Janeen Maas, M.D.
1-053-097-513-117 / 47	2009 Botulph Rd. Santa Fe, NM 87505	FTF Limited Partnership	PO Box 1769 Santa Fe, NM 87504	
1-053-097-447-146 / 48	2006 Botulph Rd. Santa Fe, NM 87501	Santa Fe Ring, The	PO Box 788 Santa Fe, NM 87504	
"/	"	"	2006 Botulph Rd. Santa Fe, NM 87501	Catron, Catron & Puttow
"/	"	"	2006 Botulph Rd. Santa Fe, NM 87501	Peggy L. Feldt, CPA
"/	"	"	2006 Botulph Rd. Santa Fe, NM 87501	Buiman Law, P.C.
"/	"	"	2006 Botulph Rd. Santa Fe, NM 87501	Cullen Law Firm, P.C.
"/	"	"	2006 Botulph Rd. Santa Fe, NM 87501	Mary K. Silver, CPA, P.C.
"/	"	"	2006 Botulph Rd. Santa Fe, NM 87501	Fallingstad / Grassham, CPA
"/	"	"	2006 Botulph Rd. Santa Fe, NM 87501	Heritage Home Healthcare
1-053-097-465-183 / 49	460 St. Michael's Dr. 100 A Santa Fe, NM 87501	Agua Fria Properties, LLC	460 St. Michael's Dr. 300 Santa Fe, NM 87505	
"/	"	"	460 St. Michael's Dr. 100 Santa Fe, NM 87501	Beckman Capital Management, Ltd.
"/	"	"	460 St. Michael's Dr. 101 Santa Fe, NM 87501	The Panagakos Law Firm

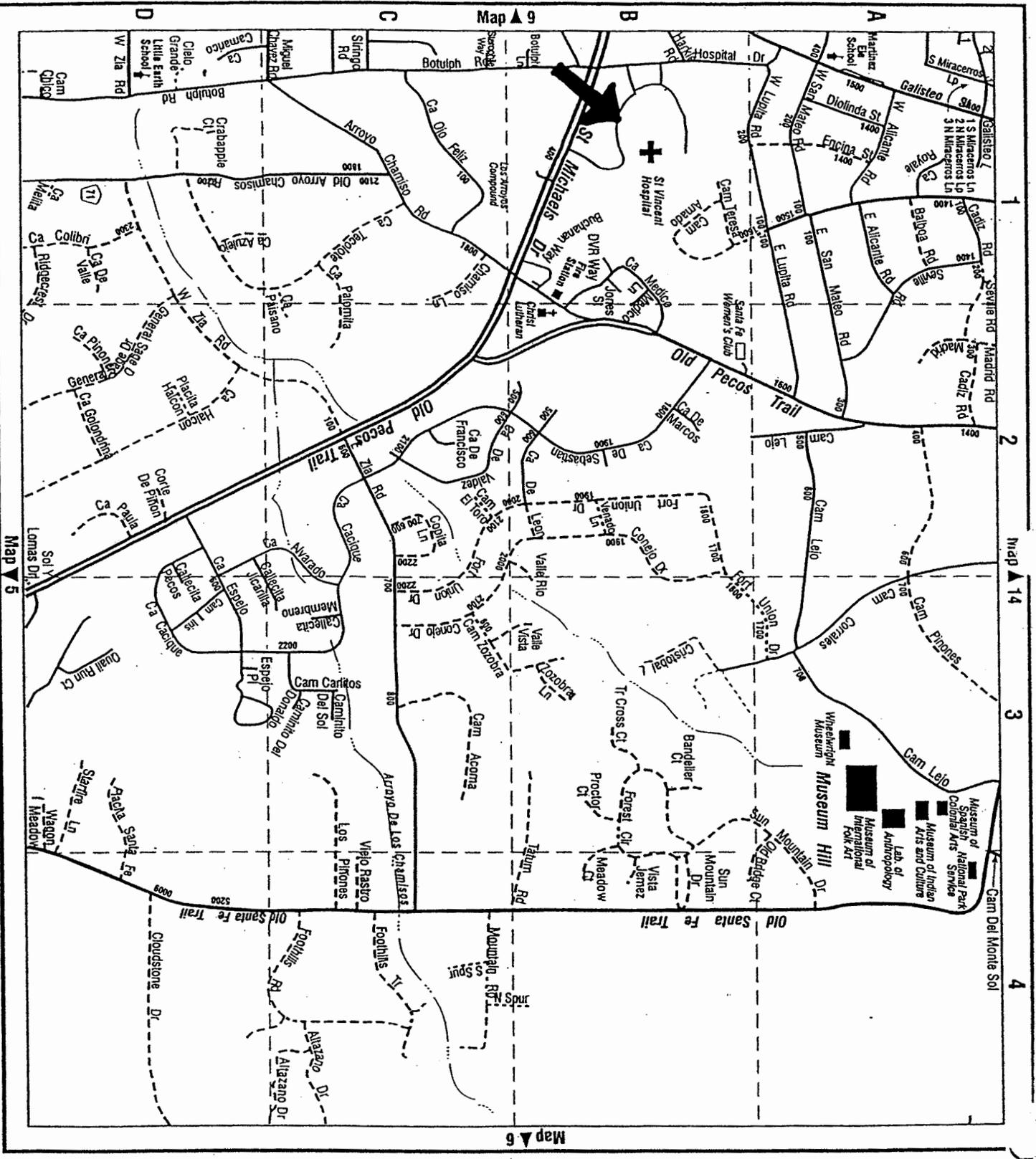
UPC / Map#	Physical Address	Assessed Property Owner	Property Owner / Tenant Mailing Address	Tenant/Occupant, if known
" / "	"	"	460 St. Michael's Dr. 104 Santa Fe, NM 87501	Jane Terry, Financial Assoc. & Raymond James Financial Services
" / "	"	"	460 St. Michael's Dr. 200 Santa Fe, NM 87501	NM Health Insurance Alliance
" / "	"	"	460 St. Michael's Dr. 300 Santa Fe, NM 87501	Gallegos Law Firm, P.C.
" / "	"	"	460 St. Michael's Dr. 300 Santa Fe, NM 87501	Pro NM Energy, Inc.
" / "	"	"	460 St. Michael's Dr. 401 Santa Fe, NM 87501	M.P. Gross & Assoc., P.C.
" / "	"	"	460 St. Michael's Dr. 401 Santa Fe, NM 87501	Callahan & Hamam, P.C.
" / "	"	"	460 St. Michael's Dr. 401 Santa Fe, NM 87501	Patricia Matthews, P.C.
" / "	"	"	460 St. Michael's Dr. 402 Santa Fe, NM 87501	Eric Treisman, Atty.
" / "	"	"	460 St. Michael's Dr. 501 Santa Fe, NM 87501	Brown Thomason & Assoc.
" / "	"	"	460 St. Michael's Dr. 504 Santa Fe, NM 87501	Spencer Stuart
" / "	"	"	460 St. Michael's Dr. 601 Santa Fe, NM 87501	Jay Goodman, Atty
" / "	"	"	460 St. Michael's Dr. 603 Santa Fe, NM 87501	Stein & Brockman, P.A.
" / "	"	"	460 St. Michael's Dr. 605 Santa Fe, NM 87501	Gannett Fleming West, Inc.
" / "	"	"	460 St. Michael's Dr. 701 Santa Fe, NM 87501	C&Co.
" / "	"	"	460 St. Michael's Dr. 703 Santa Fe, NM 87501	Merit Bennett, P.C.
" / "	"	"	460 St. Michael's Dr. 801 Santa Fe, NM 87501	Alston C. Lundgren, M.D. & S.F. Med Accupuncture
" / "	"	"	460 St. Michael's Dr. 804 Santa Fe, NM 87501	HLH Assoc.
" / "	"	"	460 St. Michael's Dr. 901 Santa Fe, NM 87501	Millenium Medical Tech., Inc.
" / "	"	"	460 St. Michael's Dr. 902 Santa Fe, NM 87501	Lisa De Lao / Allstate Agency
" / "	"	"	460 St. Michael's Dr. 903 Santa Fe, NM 87501	NM Land Conservation Collaborative

UPC / Map#	Physical Address	Assessed Property Owner	Property Owner / Tenant Mailing Address	Tenant/Occupant, if known
" / "	"	"	460 St. Michael's Dr. 904 Santa Fe, NM 87501	Jean-Nikole Wells
" / "	"	"	460 St. Michael's Dr. 1000 Santa Fe, NM 87501	Technology Funding
" / "	"	"	460 St. Michael's Dr. 1100 Santa Fe, NM 87501	Legacy Boots
" / "	"	"	460 St. Michael's Dr. 1202 Santa Fe, NM 87501	Ares Corp.
" / "	"	"	460 St. Michael's Dr. 1205 Santa Fe, NM 87501	Christ Church Santa Fe, P.C.A.
1-053-097-454-185 / 50	460 St. Michael's Dr. 500 C Santa Fe, NM 87501	Office Court Development, Ltd.	4001 Office Court Rd. Ste. 307 Santa Fe, NM 87507	
1-053-097-459-169 / 51	460 St. Michael's Dr. 300 B Santa Fe, NM 87501	Agua Fria Properties, LLC	460 St. Michael's Dr. 300 Santa Fe, NM 87505	
1-053-097-460-176 / 52	St. Michael's Dr. Santa Fe, NM 87501	Office Court Development, Ltd.	4001 Office Court Rd. Ste. 307 Santa Fe, NM 87507	
1-053-097-449-186 / 53	460 St. Michael's Dr. 500 B Santa Fe, NM 87501	Office Court Development, Ltd.	4001 Office Court Rd. Ste. 307 Santa Fe, NM 87507	
1-053-097-446-182 / 54	460 St. Michael's Dr. 500 A Santa Fe, NM 87501	Office Court Development, Ltd.	4001 Office Court Rd. Ste. 307 Santa Fe, NM 87507	
1-053-097-450-170 / 55	460 St. Michael's Dr. 400 Santa Fe, NM 87501	Superior Properties, LLC	460 St. Michael's Dr. 400 Santa Fe, NM 87505	
1-053-097-454-262 / 56	531 Harkle Rd. B Santa Fe, NM 87502	Strong John P. & Margaret W.	3801 Lands End Fort Worth, TX 76109	
1-054-097-112-290 / 57	1553 Camino Amado Santa Fe, NM 87501	Ruiz, Nancy K. & Bob Walsh	1553 Camino Amado Santa Fe, NM 87501	
1-054-097-559-265 / 58	102 W. San Mateo Rd. Santa Fe, NM 87501	Anaya, Richard	102 W. San Mateo Rd. Santa Fe, NM 87501	
1-054-097-523-362 / 59	234 W. San Mateo Rd. Santa Fe, NM 87501	Krebs, James N. & Margie M.	234 W. San Mateo Rd. Santa Fe, NM 87501	
1-054-097-022-124 / 60	unassigned	FFT Partnership	PO Box 1769 Santa Fe, NM 87504	00 St. Michael's Dr.
1-053-097-490-359 / 61	225 W. Lupita Rd. Santa Fe, NM 87505	Quintana, Peter	PO Box 4372 Santa Fe, NM 87501	
1-053-097-497-373 / 62	242 W. San Mateo Rd. Santa Fe, NM 87501	Chabad Jewish Center	242 W. San Mateo Rd. Santa Fe, NM 87505	
1-053-097-504-352 / 63	223 W. Lupita Rd. Santa Fe, NM 87501	Small, Estelle E.	27426 Family Circle Sun City, CA 92586	
1-053-097-511-367 / 64	238 W. San Mateo Rd. Santa Fe, NM 87501	Rael, Silvano J.	238 W. San Mateo Rd. Santa Fe, NM 87505	
1-054-097-119-252 / 65	1566 Camino Amado Santa Fe, Nm 87501	Helman, Leonard A.	PO Box 182 Santa Fe, NM 87504	also #6

UPC / Map#	Physical Address	Assessed Property Owner	Property Owner / Tenant Mailing Address	Tenant/Occupant, if known
1-054-097-097-093 / 66	153 Calle Ojo Feliz Santa Fe, NM 87501	Los Arroyos Compound	153 Calle Ojo Feliz Santa Fe, NM 87501	
1-054-097-001-344 / 67	217 W. Lupita Rd. Santa Fe, NM 87505	Wykert, Paul	217 W. Lupita Rd. Santa Fe, NM 87505	20. The of # 3 st. Michael's
1-054-097-134-266 / 68	1567 Camino Amado Santa Fe, NM 87501	Stack, Francis E. & Vera C.	1567 Camino Amado Santa Fe, NM 87501	
1-054-097-455-499 / 69	499 St. Michaels Dr. Santa Fe, NM 87501	Waisky, Paul	499 St. Michaels Dr. Santa Fe, NM 87501	
1-054-097-133-189 / 70	433 St. Michaels Dr. Santa Fe, NM 87501	Varela, Susan	433 St. Michaels Dr. Santa Fe, NM 87501	
1-054-097-445-499 / 71	433 St. Michaels Dr. Santa Fe, NM 87501	Waisky, Paul	433 St. Michaels Dr. Santa Fe, NM 87501	
1-054-097-445-499 / 72	433 St. Michaels Dr. Santa Fe, NM 87501	Varela, Susan	433 St. Michaels Dr. Santa Fe, NM 87501	
1-054-097-445-499 / 73	433 St. Michaels Dr. Santa Fe, NM 87501	Waisky, Paul	433 St. Michaels Dr. Santa Fe, NM 87501	
1-053-097-452-257 / 74	531 Harkle Rd. A Santa Fe, NM 87501	Waisky, Paul	531 Harkle Rd. A Santa Fe, NM 87501	
1-053-097-451-264 / 75	531 Harkle Rd. C Santa Fe, NM 87501	Baten, Michael & Caroline L. Crosby	531 Harkle Rd. C Santa Fe, NM 87501	
1-053-097-445-263 / 76	531 Harkle Rd. D Santa Fe, NM 87501	Marchand, Erich & Merly	531 Harkle Rd. D Santa Fe, NM 87501	
1-053-097-447-261 / 77	531 Harkle Rd. E Santa Fe, NM 87501	Marchand, Erich & Merly	531 Harkle Rd. D Santa Fe, NM 87501	
1-053-097-446-256 / 78	Common Area	Church of Christ	c/o SF Neurological Surgery 531 Harkle Rd. Santa Fe, NM 87501	
1-054-097-170-222 / 79	1751 Calle Medico Santa Fe, NM 87501	Pecos Trail Assoc. B-3, LLC	4001 Office Court Rd. Ste. 307 Santa Fe, NM 87507	
" / "	"	"	1751 Calle Medico A Santa Fe, NM 87501	Sisneros, Norris & Duffy, P.C.
" / "	"	"	1751 Calle Medico H Santa Fe, NM 87501	Richard S. Sees, P.A.
" / "	"	"	1751 Calle Medico I Santa Fe, NM 87501	American Mortgage Team, Inc.
" / "	"	"	1751 Calle Medico K Santa Fe, NM 87501	The Uptime Institute
" / "	"	"	1751 Calle Medico K Santa Fe, NM 87501	Computersite Engineering
" / "	"	"	1751 Calle Medico M Santa Fe, NM 87501	Hand Dance Massage Therapy

UPC / Map#	Physical Address	Assessed Property Owner	Property Owner / Tenant Mailing Address	Tenant/Occupant, if known
" / "	"	"	1751 Calle Medico N Santa Fe, NM 87501	Hand Rehab
" / "	"	"	1751 Calle Medico O Santa Fe, NM 87501	WR Starky Mortgage
" / "	"	"	1751 Calle Medico P Santa Fe, NM 87501	Kelly Home Care Services
1-054-097-143-242 / 80	1611 Don Gaspar Ave. Santa Fe, NM 87501 ⁸	Ribble, Judith G	1611 Don Gaspar Ave. Santa Fe, NM 87501	
454-166 81				SEE #49 18447 8100
292 1054097506332	465 St. Michael's Dr. Santa Fe, NM 87501	Phase I Realty	Attn. Jim Methany 333 Montezuma PO Box 22865 Santa Fe, NM 87502	
	465 St. Michael's Dr. 101 Santa Fe, NM 87501	Arnie Leshin, Building Administrator	465 St. Michael's 101 Dr. Santa Fe, NM 87501	
	465 St. Michael's Dr. 102 Santa Fe, NM 87501	vacant		
	465 St. Michael's Dr. 104 Santa Fe, NM 87501	Dr. Riley		
	465 St. Michael's Dr. 105 Santa Fe, NM 87501	Dr. Suhre		
	465 St. Michael's Dr. 106 Santa Fe, NM 87501	Dr. Cies		
	465 St. Michael's Dr. 107 Santa Fe, NM 87501	Dr. Green		
	465 St. Michael's Dr. 108 Santa Fe, NM 87501	St. Vincent Marketing & Communications		
	465 St. Michael's Dr. 110 Santa Fe, NM 87501	St. Vincent Surgical Group		
	465 St. Michael's Dr. 111 Santa Fe, NM 87501	Quest Diagnostics, Inc. Laboratory		
	465 St. Michael's Dr. 112 Santa Fe, NM 87501	Tom Lovett, Medical Center Pharmacy		
	465 St. Michael's Dr. 113 Santa Fe, NM 87501	X-Ray Imaging		
	465 St. Michael's Dr. 114 Santa Fe, NM 87501	Internal Medicine/Geriatrics		
	465 St. Michael's Dr. 115 Santa Fe, NM 87501	Pathology Services		
	465 St. Michael's Dr. 116 Santa Fe, NM 87501	TriCore Reference Laboratories		

4 cont'd
1/25
1/28



Map 5

Map 9

Map 6

Map 14

NOTICE OF EARLY NEIGHBORHOOD NOTIFICATION MEETING

14 January 2005

St. Vincents Hospital
455 St. Michaels Drive
Santa Fe, NM 87505

RE: EARLY NEIGHBORHOOD NOTIFICATION MEETING

Dear

In accordance with the requirements of the City of Santa Fe's Early Neighborhood Notification ordinance, this is to inform you that a meeting is scheduled for **Monday, January 31st, 2005 at 5:30 p.m., St. Vincent Hospital, Medical Dental Building Auditorium**, to discuss **St. Vincent Hospital Campus Master Plan**.

The Early Neighborhood Notification ordinance provides for an exchange of information between prospective applicants for development projects and the people who will be neighbors to the project. The prospective project is located near or adjacent to property to which you have been identified as a related party or primary owner.

Attached, please find a vicinity map and proposed site plan. If you have any questions or comments, please contact **Hartman & Majewski Design Group, agent for St. Vincent Hospital**.

Sincerely,

APPLICANT

Attachments:
Vicinity map
Site plan

**TRAFFIC IMPACT ANALYSIS
FOR
PHYSICIANS PLAZA OF SANTA FE
ON HOSPITAL DRIVE
SANTA FE, NEW MEXICO**

I. INTRODUCTION

The proposed development is located on two separate parcels of land; Tract B-1 which is 3.18 ± acres; and Tract B-2-A which is 1.384 ± acres; for a total acreage of 4.564 ± acres. The site is located in the City of Santa Fe Grant boundaries, in projected, Section 36 Township 17 North, Range 9 East, N.M.P.M. The site is located within the City of Santa Fe Limits. The site is bounded by Hospital Drive on the west, the St. Vincent's Hospital Complex and the Medical Dental Center on the south, the St. Vincent's Hospital Parking Lot on the east, and private residences to the north. The Vicinity Map is presented in Figure 1, Appendix A.

The proposed development will consist of a three story, 50,000 ± square foot medical office building on two separate tracts of land adjacent to St. Vincents Hospital. 227 parking stalls are provided. All required parking will be on site. Access will be provided by two driveways into the site. One driveway is the existing Same Day Surgery Entrance and will be used mainly for the medical building. It is located immediately south of the proposed building. A new driveway will be constructed approximately across from Harkle Road and it will provide access to Physicians Plaza and the St. Vincents Hospital Complex as well as the Medical Dental Center. The Development Plan is presented in Figure 2, Appendix A.

This analysis also includes traffic from the previously approved, but not constructed St. Michaels Drive Office Park and the mixed use development on West San Mateo Road and Galisteo Street.

The purpose of this report is to examine the existing traffic conditions, to estimate the traffic generated by this development, to determine the impact of the development on the existing roadway infrastructure and to provide recommendations for improvements to meet City of Santa Fe requirements.

EXECUTIVE SUMMARY

The key intersection of St. Michaels Drive / Hospital Drive / Butolph Road is currently operating at marginal levels of service for southbound movements. In order to improve traffic capacity and to reduce the traffic queues on the north leg of the intersection of Hospital Drive, the signal timing should be optimized to allow a left turn phase for northbound and southbound movements. An additional lane should be constructed to provide a southbound right turn lane. A median should be constructed to channelize traffic. This will improve the intersection operation and increase safety. It appears that there may be adequate right of way for this improvement. Improvements to the south side of the intersection are recommended in a report titled "St. Michaels Drive Office Park," dated July 23, 2001, revised August 15, 2001, by Morey Walker Associates Engineers, Inc.

Access will be provided by two proposed driveways into the site. One driveway is the existing Same Day Surgery Entrance and will be used mainly for the medical building. It is located immediately south of the proposed building. The entering and exiting patterns of the existing driveways into the Hospital were reviewed. It was noted that under existing conditions, the driveways closer to Galisteo Street shown more northbound movements. The residents in the area have concerns about "cut through" traffic on San Mateo and Galisteo Streets. They have suggested closing Hospital Drive on the north in the vicinity of Galisteo Street. In discussion with the City of Santa Fe Traffic Engineer, this option is not feasible. It is recommended that traffic calming techniques be used on the north side of Hospital Drive. It is recommended that speed tables and roadway bulb-outs be utilized as appropriate. A traffic calming program is proposed as part of the Mixed Use Development on West San Mateo Road and Galisteo Street, which should provide further incentive for traffic to use St. Michaels Drive. Therefore, in order to do everything possible to reduce traffic to Galisteo Street and San Mateo Road, it is recommended that the existing Same Day Surgery Unit driveway be closed and not utilized for this project to discourage northbound "short cut" traffic through the neighborhood.

The new Same Day Surgery Entrance should be constructed to line up with Harkle Road. The intersection of Hospital Drive / Harkle Road has adequate capacity for the proposed condition.

Detailed engineering drawings, including right of way mapping and traffic control plans should be submitted for review to the City of Santa Fe if the project receives approvals.

VIII. RECOMMENDATIONS AND CONCLUSIONS

The key intersection of St. Michaels Drive / Hospital Drive / Butolph Road is currently operating at marginal levels of service for southbound movements. In order to improve traffic capacity and to reduce the traffic queues on the north leg of the intersection of Hospital Drive, the signal timing should be optimized to allow a left turn phase for northbound and southbound movements. An additional lane should be constructed to provide a southbound right turn lane. A median should be constructed to channelize traffic. This will improve the intersection operation and increase safety. It appears that there may be adequate right of way for this improvement. Improvements to the south side of the intersection are recommended in a report titled "St. Michaels Drive Office Park," dated July 23, 2001, revised August 15, 2001, by Morey Walker Associates Engineers, Inc.

Access will be provided by two proposed driveways into the site. One driveway is the existing Same Day Surgery Entrance and will be used mainly for the medical building. It is located immediately south of the proposed building. The entering and exiting patterns of the existing driveways into the Hospital were reviewed. It was noted that under existing conditions, the driveways closer to Galisteo Street shown more northbound movements. The residents in the area have concerns about "cut through" traffic on San Mateo and Galisteo Streets. They have suggested closing Hospital Drive on the north in the vicinity of Galisteo Street. In discussion with the City of Santa Fe Traffic Engineer, this option is not feasible. It is recommended that traffic calming techniques be used on the north side of Hospital Drive. It is recommended that speed tables and roadway bulb-outs be utilized as appropriate. A traffic calming program is proposed as part of the Mixed Use Development on West San Mateo Road and Galisteo Street, which should provide further incentive for traffic to use St. Michaels Drive. Therefore, in order to do everything possible to reduce traffic to Galisteo Street and San Mateo Road, it is recommended that the existing Same Day Surgery Unit driveway be closed and not utilized for this project to discourage northbound "short cut" traffic through the neighborhood.

The new Same Day Surgery Entrance should be constructed to line up with Harkle Road. The intersection of Hospital Drive / Harkle Road has adequate capacity for the proposed condition.

Detailed engineering drawings, including right of way mapping and traffic control plans should be submitted for review to the City of Santa Fe if the project receives approvals.

DRAFT

INDEX OF
CITY OF SANTA FE
PLANNING COMMISSION

May 4, 2006

<u>ITEM</u>	<u>ACTION TAKEN</u>	<u>PAGE(S)</u>
A. ROLL CALL	Quorum	1
B. PLEDGE OF ALLEGIANCE		1
C. APPROVAL OF AGENDA	Approved	1-2
D. APPROVAL OF MINUTES	None	2
E. OLD BUSINESS		
1. <u>Case #M-2004-47. St. Vincent Hospital Campus Master Plan. The Design Group, agent for St. Vincent Hospital, requests consideration of a master plan for the St. Vincent Hospital Campus located at 455 St. Michaels Drive. The plan would serve as a general guide to future development of the hospital campus. The property is zoned C-1 (Office and Related Commercial). The site encompasses a total of approximately 47.8 acres and is located at the northeast corner of St. Michael's Drive and Hospital Drive.</u>	Approved	2-8
2. <u>Case #A-2005-06. Cohen Lot Split appeal.</u>	Postponed to May 25th	8
3. <u>Case #M-2005-47. Colores Plaza Final Development Plan.</u>	Postponed to June 1st	9
4. <u>Case #S-2005-36. Colores Plaza Final Subdivision Plat.</u>	Postponed to June 1st	9
5. <u>Case #CA-2006-01. Economic Impact Amendment. A bill creating a new Section 14-8.8(F) SFCC 2001 requiring an economic impact study for new buildings over 100,000 square feet and providing for mitigation of economic impacts. The bill is sponsored by Councilors Karen Heldmeyer and Miguel Chavez.</u>	Approval denied	9-12

6. Case #CA-2006-02. Big Box Amendment. A bill creating a new Section 14-8.6 (B)(1)(f) SFCC 2001 regarding supplementary regulations for retail structures 30,000 square feet of roofed area and larger, and making such other changes as are necessary. Approved 12-13

F. NEW BUSINESS

1. Case #M-2006-13. Galisteo del Sur General Plan Amendment.
Postponed to May 25th 13
2. Case #ZA-2006-08. Galisteo del Sur Rezoning.
Postponed to May 25th 13
3. Case #ZA-2006-09. Plaza Bonita Rezoning. Monica Montoya, agent for Carlos Garcia, requests amendment to the Official Zoning Map to change the designation from C-2-PUD (General Commercial, Planned Unit Development) to C-2 (General Commercial) for a 4.1-acre tract of land located on the east side of the Cerrillos Road service road, approximately 300 feet south of Wagon Road. Approved 13-15
4. Case #ZA-2006-07. Feed Bin Rezoning/Time Extension.
Postponed to May 25th 15
5. Case #S-2006-07. Capitol Body Preliminary Subdivision.
Postponed to May 25th 16
6. Case #M-2005-43. Vista Jemez Final Development Plan. Mark A. Hogan, agent for Hi-Point Construction, requests approval of a final development plan for 27 single-family lots on 4.020 acres. The site is located on the west side of Contenta Drive on Tract 54 of Phase 2B of the Tierra Contenta Planned Residential Community (PRC).
Approved 16
7. Case #S-2005-37. Vista Jemez Final Subdivision Plat. Mark A. Hogan, agent for Hi-Point Construction, requests approval of a final plat for 27 single-family lots on 4.020 acres. The site is located on the west side of Contenta Drive on Tract 54 of Phase 2B of the Tierra Contenta Planned Residential Community (PRC) Approved 17

G. BUSINESS FROM THE FLOOR None 17

H. STAFF COMMUNICATIONS 17

I. MATTERS FROM THE COMMISSION 17

J. ADJOURNMENT 17-18

MINUTES OF
CITY OF SANTA FE
PLANNING COMMISSION MEETING

May 4, 2006

A regular meeting of the City of Santa Fe Planning Commission was called to order by Chair Robert Werner at approximately 6:00 p.m. on this date at City Council Chambers, City Hall, Santa Fe, New Mexico.

A. ROLL CALL

Roll call indicated a quorum as follows:

MEMBERS PRESENT:

Robert Werner, Chair
Eric Lujan
Estevan Gonzales
Kim Shanahan
Harriet Heltman
Michael Trujillo
Latricia Gonzales McKosky

MEMBERS ABSENT:

Donald Martinez, Vice-Chair

STAFF PRESENT:

Andrew Harnden, Senior Planner
Anne Lovely, Acting City Attorney
John Romero, Traffic Engineer
Denise Cox, Stenographer

B. PLEDGE OF ALLEGIANCE

Chair Werner asked Commissioner Gonzales to lead the Pledge of Allegiance.

C. APPROVAL OF AGENDA

Mr. Harnden made the following changes from staff:

Minutes not included in the packet

Request postponement of Case #A-2005-06 – Cohen Lot Split appeal to May 25th

Request postponement of Case #M-2006-13 Galisteo del Sur General Plan Amendment
and Case #ZA-2006-08 – Galisteo del Sur Rezoning – to May 25th

Request postponement of Case #ZA-2006-07 – Feed Bin Rezoning/Time Extension – to
May 25th

Request postponement of Case #S-2006-07 – Capitol Body Preliminary Subdivision – to

May 25th

Mr. Naranjo made the following changes from staff:

Request postponement of Case #M-2005-47 – Colores Plaza Final Development Plan and Case #S-2005-36 – Colores Plaza Final Subdivision Plat – to June 1st

Commissioner Trujillo made a motion to approve the agenda as amended by staff. Commissioner Heltman seconded the motion which passed by unanimous voice vote.

D. APPROVAL OF MINUTES

There were no minutes to approve per approval of the agenda.

E. OLD BUSINESS

1. **Case #M-2004-47. St. Vincent Hospital Campus Master Plan. The Design Group, agent for St. Vincent Hospital, requests consideration of a master plan for the St. Vincent Hospital Campus located at 455 St. Michaels Drive. The plan would serve as a general guide to future development of the hospital campus. The property is zoned C-1 (Office and Related Commercial). The site encompasses a total of approximately 47.8 acres and is located at the northeast corner of St. Michael's Drive and Hospital Drive. (Andrew Harnden)**

Memorandum prepared by Andrew Harnden, Planner Supervisor, April 26 for May 4, 2006 Planning Commission meeting is incorporated herewith to these minutes as Exhibit "1."

Additional recommendations for conditions of approval prepared by Andrew Harnden, Planner Supervisor, dated May 1, 2006 is incorporated herewith to these minutes as Exhibit "1(A)."

Additional condition of approval from Randall Thompson, Senior Planner, dated April 19, 2006 is incorporated herewith to these minutes as Exhibit "1(B)."

Letter from Bob Walsh dated May 3, 2006 is incorporated herewith to these minutes as Exhibit "1(C)."

Staff report was presented by Andrew Harnden, Planner Supervisor, included in Exhibit "1."

Staff recommends approval based on the following conditions:

1. New development shall comply with the standards of Section 14-5.5(A)(3), South Central Highway Corridor Overlay District, including 25-foot landscape buffer within 50-foot building setback from residential property lines.
2. "Area 3 Overlay" height limit from original master plan shall continue to apply (maximum building height of 18 feet within 120 feet of northerly residential property line).

3. R-2 zoned portion of the hospital property shall be limited to single-family residential use, parking lot use with minimum 20-foot landscaped setback from all property lines, open space or detention ponding with a depth of three feet or less and side slopes not steeper than 4:1.
4. Make south entrance from Hospital Drive an entrance only. Staff design recommendations may require a triangular bulb-out to prevent right-turn exit and a street island on Hospital Drive to prevent left-turn exit.
5. for all phases subsequent to the Emergency Room Expansion, provide pro-rata participation in traffic calming measures and off-site traffic mitigation measures to the approval of the Public Works Department and the Planning Commission.
6. For all phases subsequent to the Emergency Room Expansion, modify internal circulation as shown on the amended master plan.
7. for all phases subsequent to the Emergency Room Expansion, close and/or modify driveway entrances at Hospital Drive and St. Michaels Drive as shown on the amended master plan, including modifications to turn lanes on St. Michael's Drive.
8. Provide internal directional signage to guide visitors to exits and to various buildings/hospital services.
9. Helipad facility shall not be relocated without approval of a special exception or master plan amendment.
10. These conditions of approval shall be noted on the master plan, which shall be filed for record with the County Clerk, and which shall replace and supersede the provisions of the original master plan. Except as specified by these conditions, development of the property shall be subject to all other applicable procedures and development standards of City Codes.
11. The emergency room expansion is not expected to significantly increase traffic being that the proposed expansion is intended to accommodate the existing patient load. Because of this, the Public Works Department does not feel that the developer is responsible for making major improvements to City streets at this time. The developer will be required, during development of subsequent phases, to assess all off-site traffic operations and provide mitigation measures where needed. These improvements may include improvements to the intersection of Hospital Drive and Galisteo Road, all existing and proposed access points to the development, traffic calming on Hospital Drive, and any other traffic concerns related to the implementation of the development.
12. The proposed master plan designates the development's southern entrance onto Hospital Drive as an entrance only. The intent of this is to direct the majority of traffic exiting the hospital towards a primary access point onto St. Michael's Drive. Because of the amount of traffic this would direct towards this access point, the Public Works Department would like the developer to evaluate moving this primary access further towards the east of where it is shown on the proposed master plan. this would provide for better access spacing on St. Michael's Drive.
13. Staff requests that a 20' wide non-motorized trail easement be granted to the City of Santa Fe along the south and east property lines of St. Vincent Hospital property. An exact alignment can be marked in the field to the mutual satisfaction of the City's Trail & Open Space Coordinator and a Hospital representative, prior to filing the Campus Master Plan.
14. Applicant address the possibility of an access point further east of the current access point on St. Michael's Drive.

Public Hearing

Frank Herdman, 123 East Marcy, was sworn. Mr. Herdman explained that this application is a request to recommend approval of the amended master plan for the Hospital campus. He said this is not a development plan, but has general guidelines for future development of the campus. The development of the master plan began over 2 years ago with three ENN meetings. He said one of the issues is the closure of Hospital Drive as the neighbors requested this be closed. The neighbors wanted it closed to stop the cut through traffic from Galisteo to St. Michael's and the Hospital agreed in order to be a good neighbor and also agreed to pickup some of the considerable cost. The City opposed the closure of Hospital Drive due to fire, police and traffic issues which resulted in the master plan being removed from the agenda. The hospital at this time found itself between the City and the neighborhood. Since then the hospital revisited this issue with the same outcome. The City does not want to close Hospital Drive due to concerns that emergency vehicles could not get through the barrier and the City does not want to create a precedent of closing streets in this way. The amended master plan shows Hospital Drive open per the City. The hospital does not want to get caught up in this dispute

between the neighbors and the City. The expansion of the emergency room needs to get underway to serve the public. The master plan needs to be completed and adopted prior to proceeding with the ER expansion.

Doug Majewski, 13201 Manitoba Drive, Albuquerque, was sworn. He is part of the architectural team for this project. He confirmed the issue regarding closing Hospital Drive. The goals of the master plan are to improve access and circulation both to the campus and then once on the campus within the campus itself. The ENN meetings were very successful and they have attempted to address the comments received from the neighbors. The emergency room area is very limited and the immediate plans are to decompress this space and allow for better functionality and ability to serve patients in the community. He stated agreement with staff conditions.

Mr. Harnden recommended one more condition of approval and he apologized to the applicant as he had told the applicant he would not impose this condition, but it seems that it must be included. The proposed master plan designates a southern entrance onto Hospital Drive as an entrance only; the intent of this is to direct a large portion of the traffic exiting the hospital towards the primary access on St. Michael's Drive. He noted that immediately east of the hospital, the terrain drops off quickly with some 30% slopes. *Additional condition: Applicant address the possibility of an access point further east of the current access point on St. Michael's Drive.* He said staff has no conclusions as to the feasibility of this.

Chair Werner clarified the hospital needs to have their master plan adopted if they proceed with the expansion of the emergency room. He asked if the hospital will have to file a development plan on the emergency room expansion to the Planning Commission.

Mr. Harnden said development review is required for any new construction of 15,000 square feet of floor area or greater on a lot or land adjacent to a residential district. He said this proposed addition is 22,722 square feet.

Mr. Herdman said there has been discussion on this particular issue. It is his position that the current version of the ordinance in regards to ENN and development plan approval, states applicants for "new construction" of individual buildings or additions shall receive Planning Commission approval of the development plan prior to the issuance of a building permit if the "new construction" meets any of the following criteria: has gross feet of 30,000 square feet or more which is not applicable to this expansion or has a gross floor area of 10,000 square feet or more in a residential district or certain commercial districts and is within 200 feet of residential or certain other zoning districts. He said the new construction would be 500-600 feet away as the measurement is not from the boundary of the property on which the "new construction" is occurring. He did not feel this is an issue for consideration this evening and he continues to work on this with staff.

Bob Walsh, 1553 Camino Amada, was sworn. He said he is a member of the San Mateo Neighborhood Association. He said the quality of the neighborhood determines the quality of the City and if this is lost the character as a whole can be lost. He said

there were many assurances from the hospital that they would cooperate with the neighborhood, but as management has changed the nature of the cooperation has changed. He said within the last couple of years the relations have been good between the neighbors and the hospital. The neighbors do not want to see the emergency room expansion held up by the traffic issues. City staff has been the primary obstacle to solving the serious traffic issues and recently staff has not included neighbors in their meetings. He is not sure why the City believes closing Hospital Drive is not acceptable. He said the neighbors will pursue this matter, but do not want to hold up the emergency room expansion. He recommended making public access from the bus stop to the hospital accessible to those in wheelchairs. He said the hospital is a huge barrier to pedestrian access in this area.

Gayle Rapaport, 216 West Lupita, was sworn. She agreed that good medical care is important. She noted that she has been promised a fence along Lupita by July 1st. She said the physical plant is extremely noisy at Physician's Plaza especially in the evening. She said the corner lot at Lupita and Hospital Drive is owned by the hospital and it was greatly disturbed when Physician's Plaza was built. It now serves as an eyesore and catch basin for trash; she recommended paving this. She requested that they be careful where the construction dumpsters are placed. She said the overhead lights are not a problem, but wanted the night sky ordinance complied with as more lighting is added. She pointed out one light on the back of Physician's Plaza which can be a problem as there is no shield on it.

Mr. Herdman said the hospital is not attempting to avoid scrutiny on the emergency room, but the issue is one of timing. They hope to break ground on the ER as early as June so they can continue serving the 19 counties. He added that the project is not the type that warrants development plan approval. The master plan takes into account the traffic impacts of the ER.

The public testimony portion of the public hearing was closed.

Questions and comments from the Commission

Commissioner Lujan disclosed that both his parents are employed by the hospital, but he can provide an unbiased opinion in regards to this case.

Commissioner Trujillo understood the need for the Emergency Room. He asked if additional conditions can be added as Mr. Harnden just did.

Ms. Lovely said it is appropriate, but they do not know if the applicant accepts this condition.

Mr. Herdman said they can consider this, but there are serious concerns with the deep arroyo in this area which might require terrain management variances.

Commissioner Trujillo asked if the master plan has to be approved in order to allow the emergency room to file for a building permit.

Mr. Herdman said there is a disagreement about that, but they are trying to eliminate the disagreement by getting this done as quickly as possible.

Commissioner Trujillo asked Ms. Lovely if they can apply for a building permit without master plan approval.

Ms. Lovely agreed there is no agreement on this issue. Staff believes that the intention of Council was to require master plan approval prior to any further building. She said the hospital has made efforts to come forward with a master plan amendment, but there was no agreement by the City to do what the neighbors wanted. The applicant is trying to get the master plan approved prior to applying for a building permit.

Commissioner Trujillo asked if this affects the Medical/Dental Plaza.

Jeff Branch, PO Box 2328, was sworn. He said there is a portion of the medical/dental building in the previous master plan that they intend on coming forward with, but it will more than likely be under 15,000 square feet. He said otherwise they would come back with an amendment.

Mr. Harnden clarified that the threshold for a development plan would be 10,000 square feet within 200-feet of residential. He said if the addition was less than 10,000 square feet it would not require a development plan.

Mr. Branch said technically their lot is beyond 200-feet from any residential district.

Mr. Harnden said staff interpretation is that if a building is on a lot or part of a larger project with land within 200-feet of residential properties or residentially zoned lands then it would be subject to the threshold rule for development plan.

Chair Werner said this means the emergency room expansion would fall in this same category which Mr. Harnden confirmed.

Mr. Branch did not want to be excluded from the opportunity to be included under the 15,000 square foot threshold.

Chair Werner commented that this was not part of the application, so he does not see how this could be included.

Mr. Branch said they definitely do not want to delay the emergency room addition.

Commissioner Trujillo commented that the emergency room is a nightmare on a daily basis. He did not see any neighborhood opposition and the neighbors said the hospital has worked hard with them to resolve issues.

Commissioner Shanahan noted that the traffic report states that they want to restrict and reduce the number of driveways. He does not see a plan with only one driveway, but there are three existing driveways and the plan shows two driveways.

Mr. Majewski said it is a matter of timing. He said the original traffic report showed a single driveway option and as it evolved with discussions the current master plan was arrived at. He said the change is one access at Hospital Drive as a right turn only. He said the hospital is willing to work on the driveway configuration with City staff and the neighborhoods.

Commissioner Shanahan noted that Mr. Branch's property is a separate island inside this campus and therefore that property is well over 200 feet from any residential neighborhood. He said for this reason it would be subject to the 15,000 square foot rule which is what Mr. Branch was trying to imply.

Mr. Harnden said that staff will have to decide whether this is in fact a separate tract of land and the property can be considered separately.

Commissioner Shanahan said the issue of timing on this is contingent on the resolution of whether or not a development plan is necessary. He asked if they are in the position to decide whether or not a development plan is necessary.

Ms. Lovely said this was advertised as a master plan approval and so this is the only decision that can be made tonight.

Commissioner Shanahan asked if this is approved and then goes to City Council and the development plan issue comes again then can the City Council decide if a development plan is necessary.

Ms. Lovely said if the issue is advertised then it could be decided.

Commissioner Shanahan asked how something that is not an issue can be advertised.

Ms. Lovely said she would have to research this, but feels it would be appropriate to advertise for an answer to the question. She said the other way to deal with this is for staff to make a decision and then they could appeal that to the Planning Commission or Board of Adjustment.

Chair Werner suggested adding this question as part of the recommendation to City Council.

Commissioner Shanahan asked if this could be decided by legal staff without a ruling by the governing body.

Ms. Lovely said that could be a possibility.

Commissioner Shanahan asked if it is just square footage that will be used to make this determination or if it is also distance from residential.

Ms. Lovely said the distance from residential will be the deciding factor.

Commissioner Gonzales commented that it is hard to prepare for a case when information is being delivered the day of the hearing. He agreed that the emergency room is needed desperately so this case needs to be moved forward. He was concerned with the traffic and pedestrian issues so asked for clarification.

Mr. Majewski said they have worked with the neighborhood to address these issues. He said there are some walking paths planned and they will try to integrate them even further.

Mr. Walsh agreed and wanted to make sure the paths are also wheelchair accessible.

Commissioner Lujan asked what type of traffic calming is proposed.

Mr. Majewski said they have looked at raised crosswalks, roundabouts, and narrowing of lanes, but it has been inconclusive in meetings with City staff as to what measures would be appropriate. He said the issues with Hospital Drive need to be resolved first.

Commissioner Lujan commented that it would probably be wise to widen Hospital Drive where it comes into Galisteo. He agreed that traffic calming could deter emergency vehicles from getting to the hospital as quickly as possible. He noted that this facility provides healthcare to the entire area and he feels this is a waste of time. He thought they should fall under the same statutes as State government as they are providing services to the people.

MOTION: Commissioner Trujillo made a motion to recommend approval of Case M-2004-47 to City Council with staff conditions as well as making sure the neighbors have pedestrian access. Commissioner Heltman seconded the motion.

FRIENDLY AMENDMENT: Commissioner Shanahan made a friendly amendment to suggest to the Council they help resolve with proper notice the issue as to whether or not these kinds of applications need a development plan. Commissioner Trujillo and Commissioner Heltman accepted this amendment.

VOTE: There being no abstaining or dissenting votes, the motion passed by unanimous voice vote.

2. Case #A-2005-06. Cohen Lot split appeal.

This item was postponed to May 25th per approval of the agenda.

Rubin Katz Law Firm

A Professional Corporation | ATTORNEYS AT LAW

James B. Alley
Janet Clow
David F. Cunningham
Frank T. Herdman
Leonard S. Katz
Owen C. Rouse III
James S. Rubin

Patrick J. Dolan
Melanie E. MacGillivray
Brenden J. Murphy
Shelby E. Robinson

Donald M. Salazar
(1947-2003)

July 3, 2006

The Honorable Members of the Governing Body
of the City of Santa Fe, New Mexico
200 Lincoln Avenue
Santa Fe, New Mexico 87501

Re: Case # M 2004-47; Resolution No.
St. Vincent Hospital Campus Master Plan Amendment

Dear Councilors and Mayor Coss:

On behalf of the applicant in the above matter, we are requesting that the City Council adopt a revised version of the proposed resolution in the form attached to this letter. The reasons for these changes will be further explained at the hearing before the Council on July 12.

Sincerely,



FRANK T. HERDMAN

FTH/kb

Enclosure

cc: Frank Katz
Andrew Hamden
Rick Crabtree

V:\FTH\4757.10\Council ltr 070306.doc

CITY OF SANTA FE, NEW MEXICO

RESOLUTION NO. 2006-___

INTRODUCED BY:

A RESOLUTION

AMENDING THE MASTER PLAN FOR A PARCEL KNOWN AS TRACT A-1, TRACT A-2, TRACT B-1, TRACT B-2-A, TRACT B-2-B, TRACT C AND TRACT D, WITHIN SECTION 36, T 17 N, R 9 E, N.M.P.M., COMPRISING AN AREA OF +/- 47.8 ACRES, LOCATED AT THE NORTHEAST CORNER OF HOSPITAL DRIVE AND ST. MICHAEL'S DRIVE (CASE NO. M 2004-47, ST. VINCENT'S HOSPITAL MASTER PLAN AMENDMENT) (EXHIBIT A).

WHEREAS, the agent for the owner of the subject property has submitted an application to amend the St. Vincent's Hospital Master Plan; and

WHEREAS, the Master Plan amendment criteria in the following adopted ordinances and resolutions have been met: 1) Resolution 1985-36 for Adoption of a Master Plan for St. Vincent's Hospital; 2) Ordinance 1985-15 for Rezoning to C-1

WHEREAS, the hospital is expected to address and mitigate various on and off-site traffic issues per the conditions recommended by staff and Council before expanding and constructing buildings which are shown on the master plan which are listed in the attached

1 conditions of approval as shown in "Exhibit A" attached hereto and incorporated herein.

2 WHEREAS, future development or construction on the property that is encompassed
3 within the amended master plan shall require early neighborhood notice meetings and review and
4 approval by the Planning Commission only to the extent that ENN meetings and development
5 plan approval is required under Chapter 14 of the City Code.~~the applicant must submit for~~
6 ~~development plan approval for each phase or sub-phase involving new construction of 10,000 sq~~
7 ~~ft or more.~~

8 **NOW, THEREFORE, BE IT RESOLVED BY THE GOVERNING BODY OF THE**
9 **CITY OF SANTA FE** that the Master Plan for Tracts A-1, A-2, B-1, B-2-A, B-2-B, C and D
10 within Section 36, T 17 N, R 9 E, N.M.P.M. is amended to allow for the expansion of the
11 Emergency Room, followed by on-site and off-site traffic mitigation as well as expansion and
12 construction of other buildings as shown in "Exhibit B" attached hereto. This resolution
13 supersedes Resolution 1985-36 in its entirety.

14 **PASSED, APPROVED and ADOPTED this ___ day of _____, 2006.**

15
16
17 _____
18 **DAVID COSS, MAYOR**

19 **ATTEST:**

20
21 _____
22 **YOLANDA VIGIL, CITY CLERK**

23 **APPROVED AS TO FORM:**

24
25
26 _____
27 **FRANK KATZ, CITY ATTORNEY**
28
29
30

31 *\\file-svr-2\home\$\acharnden\Planning Commission and City Council\St Vincent's Hospital Campus Master Plan*

EXHIBIT A

RESOLUTION NO. 2006-_____

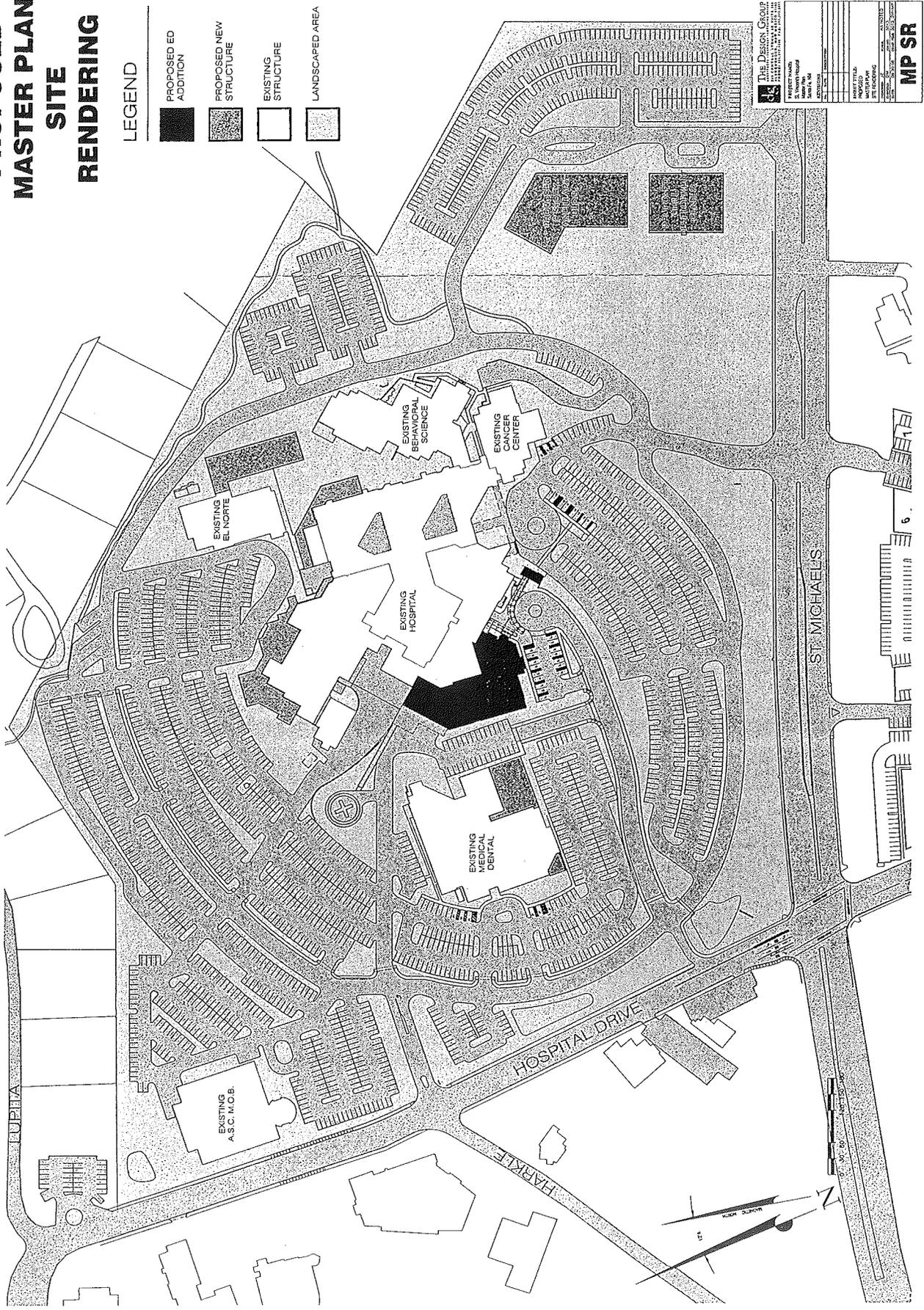
1. For all phases of development subsequent to the Emergency Room Expansion, the developer will be required to assess certain off-site traffic operations and provide mitigation measures where needed. These improvements are ~~listed in a Traffic Engineering memo which was handed out this evening and~~ may include:
 - improvements to the intersection of Hospital Drive and Galisteo Road
 - traffic mitigation at the intersection of San Mateo and Galisteo
 - all existing and proposed access points to the development,
 - traffic improvements/mitigation on Hospital Drive
 - ~~any other traffic concerns related to the implementation of the development~~
2. ~~Although the~~ amended proposed master plan designates the development's southern entrance onto Hospital Drive as entrance only, ~~it is.~~ The intent of the amended master ~~this is to~~ direct the majority of traffic exiting the hospital towards a primary access point onto St. Michael's Drive. Because of the amount of traffic this would direct towards the access point, the Hospital should meet with staff in the near future to evaluate possibilities for moving this primary access further east of where it is shown on the proposed master plan. This could improve access spacing on St. Michael's Drive.
3. On-site circulation and signage: For all phases subsequent to the Emergency Room Expansion, modify internal circulation as shown on the amended master plan to include a ring road. For all phases subsequent to the Emergency Room Expansion, provide internal directional signage to guide visitors to exits and to various buildings/hospital services. On-site circulation and signage should be addressed after the Hospital meets with staff to address off-site traffic concerns (above). Also, a ~~20' wide non-motorised~~ motorized trail easement in a width and location to be determined should be granted to the City along the south and east property lines. Exact location should be verified in the field with the City trails and open space coordinator.
4. Helipad facility shall not be relocated without approval of a special exception or master plan amendment.
5. These conditions of approval shall be noted on the amended master plan, which shall be filed for record with the County Clerk, and which shall replace and supersede the provisions of the original master plan. Except as specified by these conditions, development of the property shall be subject to all other applicable procedures and development standards of City codes.

6. New development shall comply with the standards of Section 14-5.5(A)(3), South Central Highway Corridor Overlay District, including 25-foot landscape buffer within 50-foot building setback from residential property lines.
7. "Area 3 Overlay" height limit from original master plan shall continue to apply (maximum building height of 18 feet within 120 feet of northerly residential property line).
8. R-2-zoned portion of the hospital property shall be limited to single-family residential use, parking lot use with minimum 20-foot landscaped setback from all property lines, open space or detention ponding with a depth of three feet or less and side slopes not steeper than 4:1. Other uses, if any, permitted for R-2 zoned property under Chapter 14 shall also be allowed.
9. Future development, after expansion of the Emergency Department, shall address pedestrian and wheel chair access, including access to bus stops. with staff from Camino Teresa and Encino Road on the north side of the campus and from other possible locations along the east side of the campus. The applicant must also address creating access from these locations across the campus to the bus stop, to St. Michael's Drive and to Hospital Drive.
6. ~~Any phase or sub-phase involving new construction of 10,000 sf or more on the Hospital campus will require a development plan per SFCC 2001. (the Commission directed staff to come up with a determination re. development plan requirements for new construction on the campus).~~
10. Future development or construction on the property that is encompassed within the amended master plan shall require early neighborhood notice meetings and review and approval by the Planning Commission only to the extent that ENN meetings and development plan approval is required under Chapter 14 of the City Code.
11. The proposed expansion of the Emergency Room does not require review and approval by the Planning Commission.

PROPOSED MASTER PLAN SITE RENDERING

LEGEND

- PROPOSED ADDITION
- ▨ PROPOSED NEW STRUCTURE
- EXISTING STRUCTURE
- ░ LANDSCAPED AREA

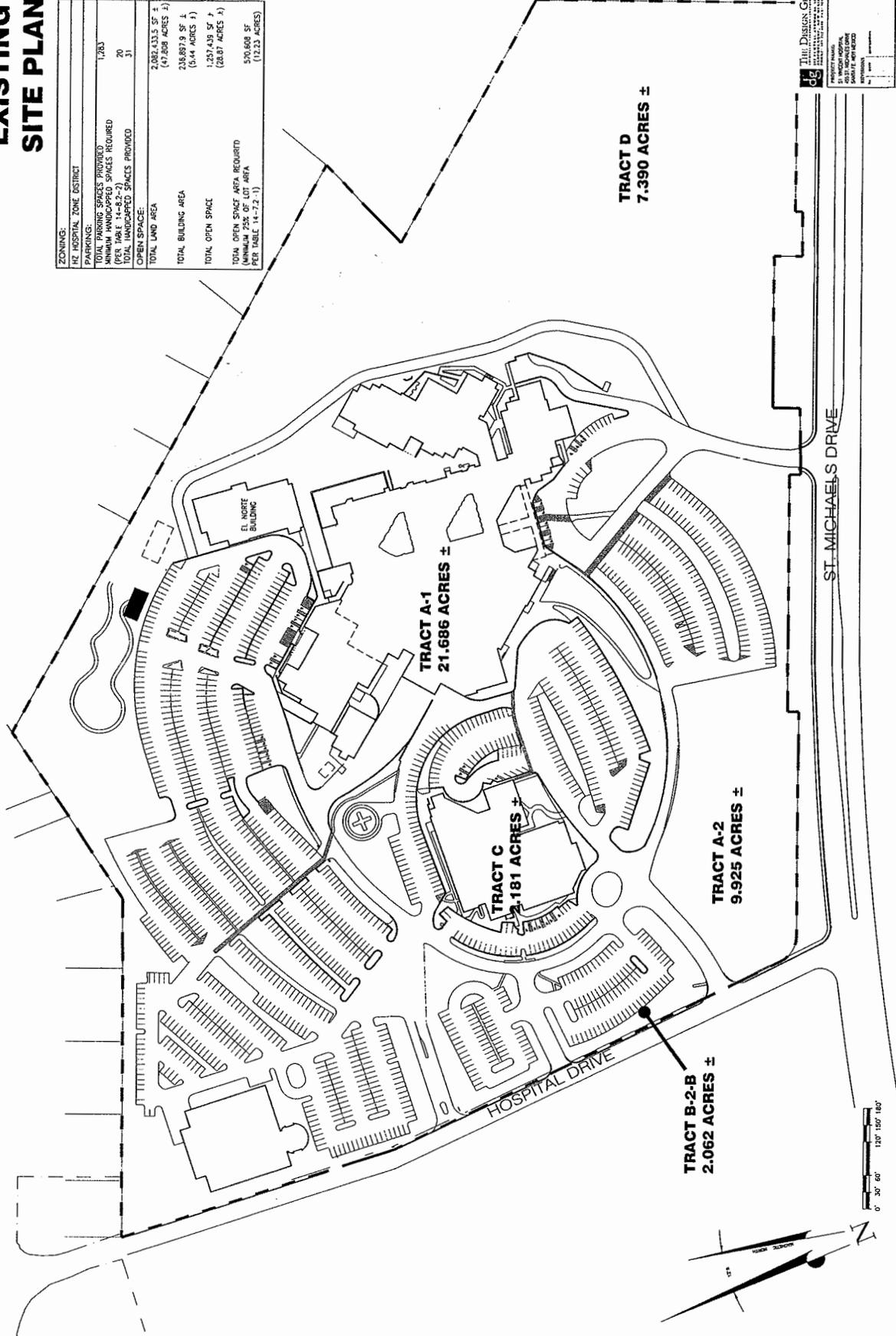


The Design Group
 PROJECT NAME: [REDACTED]
 PROJECT NUMBER: [REDACTED]
 PROJECT LOCATION: [REDACTED]
 PROJECT DATE: [REDACTED]
 PROJECT STATUS: [REDACTED]
 PROJECT TYPE: [REDACTED]
 PROJECT PHASE: [REDACTED]
 PROJECT DESCRIPTION: [REDACTED]
 PROJECT CONTACT: [REDACTED]
 PROJECT ADDRESS: [REDACTED]
 PROJECT PHONE: [REDACTED]
 PROJECT FAX: [REDACTED]
 PROJECT EMAIL: [REDACTED]
 PROJECT WEBSITE: [REDACTED]

MP SR

EXISTING SITE PLAN

ZONING:	HZ HOSPITAL ZONE DISTRICT
PARKINGS:	1,283
TOTAL PARKING SPACES PROVIDED	1,283
MINIMUM HANDICAPPED SPACES REQUIRED (PER TABLE 14-82-2)	20
ADAPTED SPACES PROVIDED	31
OPEN SPACE:	
TOTAL LAND AREA	2,082,433.3 SF ± (47.859 ACRES ±)
TOTAL BUILDING AREA	238,877.9 SF ± (5.44 ACRES ±)
TOTAL OPEN SPACE	1,843,555.4 SF ± (42.41 ACRES ±)
TOTAL OPEN SPACE AREA REQUIRED (MINIMUM 25% OF LOT AREA PER TABLE 14-72-1)	520,608 SF (12.23 ACRES)

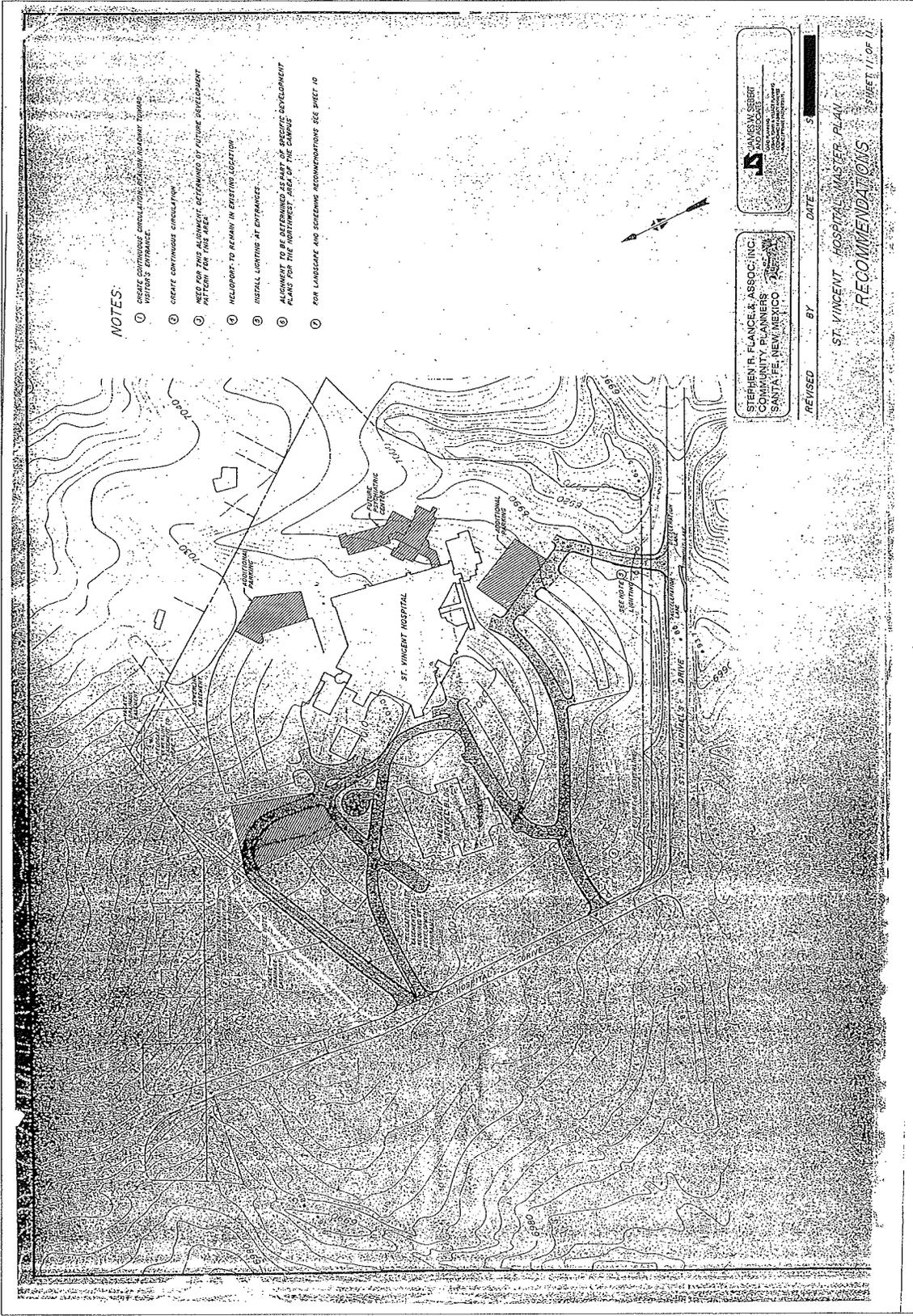


Timi Design Group
 10000 WOODHOPKIN, SUITE 100, WOODHOPKIN, NJ 07076
 TEL: 908.426.1100 FAX: 908.426.1101
 WWW.TIMIDESIGN.COM

PROJECT NAME: [REDACTED]
 DATE: [REDACTED]
 DRAWN BY: [REDACTED]
 CHECKED BY: [REDACTED]
 APPROVED BY: [REDACTED]

ESP

1984 SVH MASTER PLAN



NOTES:

- ① EXISTE CONTIGUOUS CIRCULATION AND LANDSCAPE SCHEMES
- ② HISTORIC ENTRANCE
- ③ CREATE CONTIGUOUS CIRCULATION
- ④ NEED FOR THIS ALIGNMENT DETERMINED BY FUTURE DEVELOPMENT ACTION FOR THIS AREA
- ⑤ RELOCATED TO REMAIN IN EXISTING LOCATION
- ⑥ INSTALL LIGHTING AT ENTRANCES
- ⑦ ALIGNMENT TO BE DETERMINED AS PART OF SPECIFIC DEVELOPMENT PLANS FOR THE NORTHWEST AREA OF THE CAMPUS
- ⑧ FOR LANDSCAPE AND SCREENING RECOMMENDATIONS SEE SHEET 10



STEPHEN R. FLANCE & ASSOC., INC.
COMMUNITY PLANNERS
SANTA FE, NEW MEXICO



REVISED BY DATE

ST. VINCENT HOSPITAL MASTER PLAN
RECOMMENDATIONS SHEET 11 OF 11

The Design Group
ARCHITECTS AND PLANNERS
1000 UNIVERSITY AVENUE, SUITE 100
SANTA FE, NEW MEXICO 87505
TEL: 505/833-1111
FAX: 505/833-1112

PROJECT NO. 1984 SVH
SHEET NO. 11 OF 11
DATE: 1984

1984 MP

ADDITIONAL MATERIALS SUBMITTED BY ST. VINCENT REGIONAL MEDICAL CENTER

CASE #M 2004-47
ST. VINCENT HOSPITAL CAMPUS MASTER PLAN

JULY 12, 2006

<u>Item</u>	<u>Page</u>
Revised Version of Resolution and Conditions of Approval as Requested by Applicant.....	1
Ordinance 2006-1. Standards for ENN and Development Plan Approval.....	5
Distance between Emergency Room Expansion and Nearest Residential Zoning Districts	8
Memo dated May 1, 2006 from Public Works Department.....	9

Exhibit "8"

**REVISED VERSION OF RESOLUTION
AND CONDITIONS OF APPROVAL
AS REQUESTED BY APPLICANT**

CITY OF SANTA FE, NEW MEXICO

RESOLUTION NO. 2006-____

INTRODUCED BY:

A RESOLUTION

AMENDING THE MASTER PLAN FOR A PARCEL KNOWN AS TRACT A-1, TRACT A-2, TRACT B-1, TRACT B-2-1, TRACT B-2-B, TRACT C AND TRACT D, WITHIN SECTION 36, T 17 N, R 9 E, N.M.P.M., COMPRISING AN AREA OF +/- 47.8 ACRES, LOCATED AT THE NORTHEAST CORNER OF HOSPITAL DRIVE AND ST. MICHAEL'S DRIVE (CASE NO. M 2004-47, ST. VINCENT'S HOSPITAL MASTER PLAN AMENDMENT).

WHEREAS, the agent for the owner of the subject project has submitted an application to amend the St. Vincent's Hospital Master Plan; and

WHEREAS, the Master Plan amendment criteria in the following adopted ordinances and resolutions have been met: 1) Resolution 1985-36 for Adoption of a Master Plan for St. Vincent's Hospital; 2) Ordinance 1985-15 for Rezoning to C-1

WHEREAS, the hospital is expected to address and mitigate various on and off-site traffic issues per the conditions recommended by staff and Council after approval is granted for construction of the emergency room addition and before expanding and constructing any other

buildings which are shown on the master plan which are listed in the attached conditions of approval as shown in "Exhibit A" attached hereto.

~~WHEREAS, the applicant must submit for ENN and development plan approval for each phase or sub-phase per Section 14-3.1 (F) and 14-3.8 (A) SFCC-2001.~~

WHEREAS, future development on the property encompassed within the amended master plan shall require early neighborhood notice meetings and approval by the Planning Commission only if required by Chapter 14 of the City Code.

WHEREAS, the proposed emergency room addition does not require early neighborhood notice meetings or Planning Commission approval.

NOW, THEREFORE, BE IT RESOLVED BY THE GOVERNING BODY OF THE CITY OF SANTA FE that the Master Plan for Tracts A-1, A-2, B-1, B-2-A, B-2-B, C and D within Section 36, T 17 N, § 9 E, N.M.P.M. is amended as shown in "Exhibit B" attached hereto.

This Resolution supersedes Resolution 1985-36 in its entirety.

PASSED, APPROVED and ADOPTED this ____ day of _____, 2006.

DAVID COSS, MAYOR

ATTEST:

YOLANDA VIGIL, CITY CLERK

APPROVED AS TO FORM:

FRANK D. KATZ, CITY ATTORNEY

**ST. VINCENT'S HOSPITAL CAMPUS MASTER
PLAN AMENDMENT CONDITIONS OF APPROVAL:**

At their regular meeting of May 4, 2006 the Planning Commission of the City of Santa Fe voted to recommend approval to the City Council of the above referenced request including the following staff conditions of approval:

Staff conditions of approval:

1. New development shall comply with the standards of Section 14-5.5(A)(3), South Central Highway Corridor Overlay District, including 25-foot landscape buffer within 50-foot building setback from residential property lines.
2. "Area 3 Overlay" height limit from original master plan shall continue to apply (maximum building height of 18 feet within 120 feet of northerly residential property line).
3. R-2-zoned portion of the hospital property shall be limited to single-family residential use, parking lot use with minimum 20-foot landscaped setback from all property lines, open space or detention ponding with a depth of three feet or less and side slopes not steeper than 4:1. Other uses, if any, permitted for R-2 zoned property under Chapter 14 shall also be allowed.
4. For all phases subsequent to the Emergency Room Expansion, mMake south entrance from Hospital Drive an entrance only. Staff design recommendations may require a triangular bulb-out to prevent right-turn exit and a street island on Hospital Drive to prevent left-turn exit.
5. For all phases subsequent to the Emergency Room Expansion, provide pro-rata participation in traffic calming measures and off-site traffic mitigation measures to the approval of the Public Works Department and the Planning Commission.
6. For all phases subsequent to the emergency room expansion, the developer will be required to assess certain off-site traffic operations and provide mitigation measures where needed. These improvements are listed in an Engineering Division traffic memo which was handed out as additional correspondence at the May 4, 2006 Planning Commission meeting and may include:
 - improvements to the intersection of Hospital Drive and Galisteo Road
 - traffic mitigation at the intersection of San Mateo and Galisteo
 - all existing and proposed access points to the development
 - traffic improvements/mitigation on Hospital Drive
 - examine possibilities for shifting the main entrance on St. Michael's Drive further east
 - ~~any other traffic concerns related to the implementation of the development~~

7. For all phases subsequent to the Emergency Room Expansion, close and/or modify driveway entrances at Hospital Drive and St. Michaels Drive as shown on the amended master plan, including modifications to turn lanes on St. Michaels Drive.
8. **For all phases subsequent to the Emergency Room Expansion,** provide internal directional signage to guide visitors to exits and to various buildings/hospital services.
9. Helipad facility shall not be relocated without approval of a special exception or master plan amendment.
10. These conditions of approval shall be noted on the master plan, which shall be filed for record with the County Clerk, and which shall replace and supersede the provisions of the original master plan. Except as specified by these conditions, development of the property shall be subject to all other applicable procedures and development standards of City codes.

CITY OF SANTA FE, NEW MEXICO

ORDINANCE NO. 2006-1

AN ORDINANCE

AMENDING SECTIONS 14-3.8(A)(1) AND 14-3.8(A)(5) SFCC 1987 REGARDING
DEVELOPMENT PLAN APPLICABILITY INCLUDING EARLY NEIGHBORHOOD
NOTIFICATION AND PUBLIC HEARINGS.

BE IT ORDAINED BY THE GOVERNING BODY OF THE CITY OF SANTA FE:

Section 1. Section 14-3.8(A)(1) SFCC 1987 (being Ord. #2001-38, §2 as amended) is amended to read:

(1) Notwithstanding any code provisions to the contrary, applicants for new construction of individual buildings or additions shall receive Planning Commission approval of a development plan prior to issuance of a building permit if the new construction meets any of the following criteria. Early neighborhood notification, notice and conduct of public hearings shall be provided pursuant to the general provisions of §§ 14-3.1(F), 14-3.1(H) and (I).

(a) Has a gross floor area of 30,000 square feet or more and is located within any zoning district of the City; or

→ (b) Has a gross floor area of 10,000 square feet or more in a residential district or in the C-1 or C-2, C-4, BCD, HZ, I-1, I-2, BIP, PRRC, RS, SC or MU district and is within 200 feet excluding public rights-of-way of R-1 through R-6, R-7, R-7-I,

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25

R-8, R-9, RC-5, RC-8, RM, RAC, AC, PRC, PRRC, and MH districts.

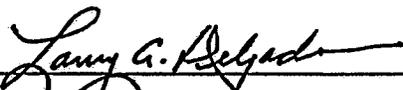
Section 2. Section 14-3.8(A)(5) SFCC 1987 (being Ord. #2001-38, §2 as amended) is amended to read:

(5) The provisions of this section shall not apply to the construction of single-family dwellings, each of which has a gross floor area of 10,000 square feet or less including accessory buildings, on lots created prior to the effective date of this section or on lots within a subdivision that was subject to early neighborhood notification procedures. The provisions of this section shall apply to construction of any single family dwelling which has a gross floor area greater than 10,000 square feet including accessory buildings.

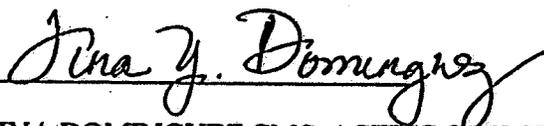
Section 3. This Ordinance shall apply to all projects submitted for review to the city after the adoption of this Ordinance (January 11, 2006).

Editor's Note: Section 3 of this Ordinance shall not be codified.

PASSED, APPROVED and ADOPTED this 11th day of January, 2006.


LARRY A. DELGADO, MAYOR

ATTEST:


TINA DOMINGUEZ CMC, ACTING CITY CLERK

1 APPROVED AS TO FORM:

2
3 

4 ANNE LOVELY, ACTING CITY ATTORNEY

5

6

7

8

9

10

11

12

13

14

15

16

17

18

19

20

21

22

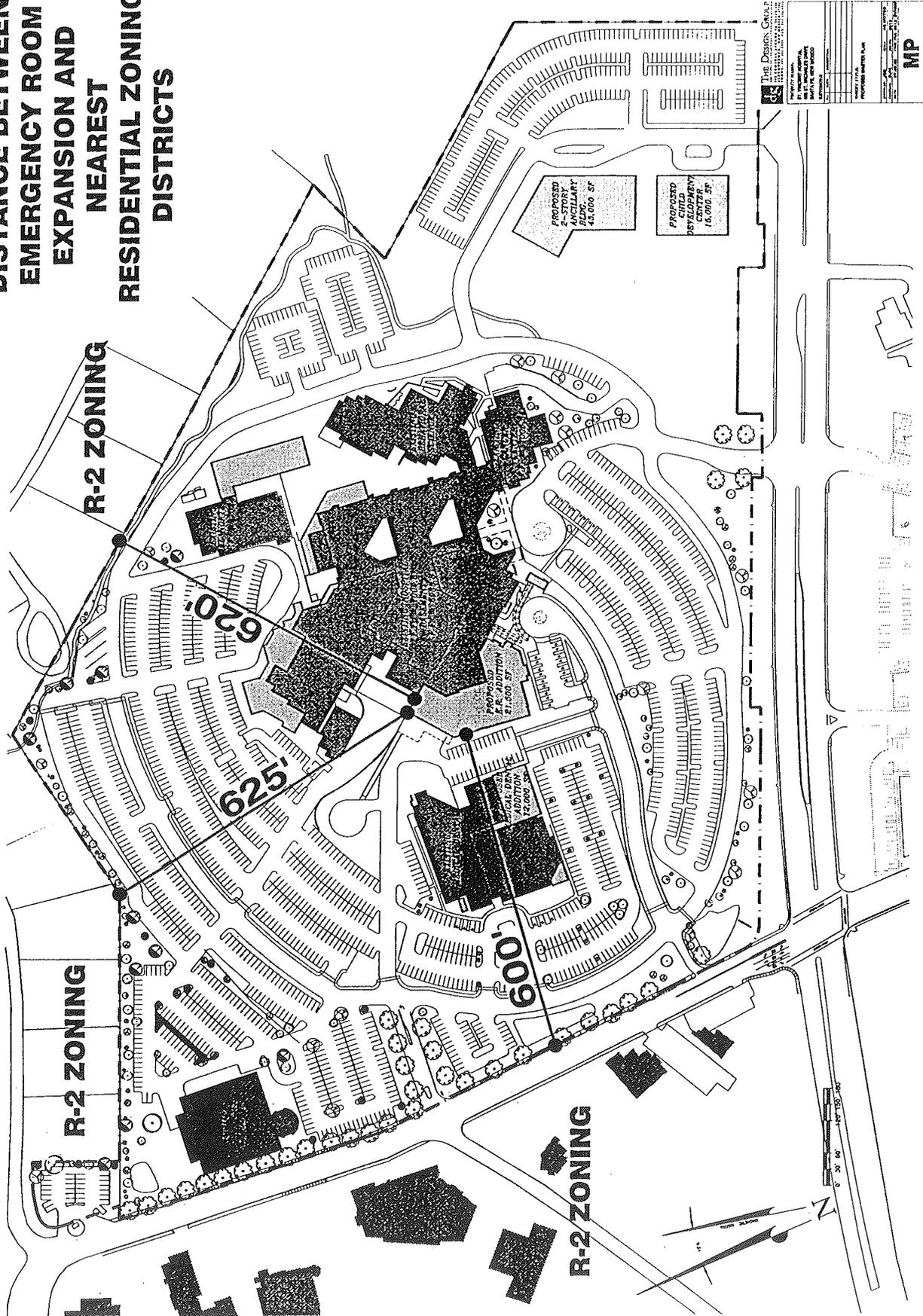
23

24

25

jp/chapter 14/development plan threshold ord

**DISTANCE BETWEEN
EMERGENCY ROOM
EXPANSION AND
NEAREST
RESIDENTIAL ZONING
DISTRICTS**



City of Santa Fe, New Mexico

memo

DATE: May 1, 2006

TO: Andrew Harnden, Senior Planner
Permit and Development Review Section

FROM: John Romero, Public Works Department/Engineering Division *JR*

SUBJECT: Case #M-2004-47, St. Vincent Hospital Campus Master Plan

ISSUE

Request for consideration of a master plan for the St. Vincent Hospital Campus located at 455 St. Michaels Drive. The plan would serve as a general guide to future development of the hospital campus. The property is zoned C-1 (Office and Related Commercial). The site encompasses a total of approximately 47.8 acres and is located at the northeast corner of St. Michael's Drive and Hospital Drive.

RECOMMENDED ACTION:

Review comments are based on submittals received on April 27, 2006. The comments below should be considered as Conditions of Approval to be addressed in a satisfactory manner prior to final signoff unless otherwise indicated below:

1. The emergency room expansion is not expected to significantly increase traffic being that the proposed expansion is intended to accommodate the existing patient load. Because of this, the Public Works Department does not feel that the developer is responsible for making major improvements to City streets at this time. The developer will be required, during development of subsequent phases, to assess all off-site traffic operations and provide mitigation measures where needed. These improvements may include improvements to the intersection of Hospital Drive and Galisteo Road, all existing and proposed access points to the development, traffic calming on Hospital Drive, and any other traffic concerns related to the implementation of the development.
2. The proposed master plan designates the development's southern entrance onto Hospital Drive as an entrance only. The intent of this is to direct the majority of traffic exiting the hospital towards a primary access point onto St Michael's Drive. Because of the amount of traffic this would direct towards this access point, the Public Works Department would like the developer to evaluate moving this primary access further towards the east of where it is shown on the proposed master plan. This would provide for better access spacing on St Michael's Drive.

If you have any questions or need any more information, feel free to contact me at 955-6638.
Thank you.

F1

PROPOSED MASTER PLAN



LOW WATER USAGE PLANTS AND WATER HARVESTING TECHNIQUES WILL BE IMPLEMENTED ACROSS THE SITE (TYPICAL)

PROPOSED OUTPATIENT SERVICES ADDITION - 10,790 SF
REMODELED A.S.C. - 20,000 SF
TOTAL - 30,790 SF

PROPOSED SUPPORT ADDITION 10,000 SF

PROPOSED CRITICAL CARE ADDITION 8,500 SF

SITE CALCULATIONS	
PARKING:	
ZONE A: HOSPITAL COMPLEX	
NET SF OF ADMIN/OFFICE/CLINIC, ETC. - 205,000 SF	
PARKING REQUIRED (1 PER 350 SF) - 584 SPACES	
BED AREAS - HOSPITAL & PSYCH - 267	
PARKING REQUIRED 1 PER 2 BEDS - 134 SPACES	
PARKING PROVIDED - 841 SPACES	
ZONE B: MEDICAL DENTAL COMPLEX	
NET LEASABLE BLDG. SF - 47,150 SF	
PARKING REQUIRED - 1 PER 200 SF = 236 SPACES	
PARKING PROVIDED - 255 SPACES	
ZONE C:	
NET LEASABLE BLDG. SF - 41,500 SF	
PARKING REQUIRED - 1 PER 200 SF = 208 SPACES	
PARKING PROVIDED - 252 SPACES	
ZONE D:	
NET LEASABLE BLDG. SF - 36,000 SF	
PARKING REQUIRED - 1 PER 225 SF = 160 SPACES	
PARKING PROVIDED - 173 SPACES	
ZONE E:	
NET LEASABLE BLDG. SF - 12,000 SF	
PARKING REQUIRED - 1 PER 225 SF = 60 SPACES	
PARKING PROVIDED - 63 SPACES	
TOTAL PARKING:	
TOTAL PARKING SPACES REQUIRED	1,431
TOTAL PARKING SPACES PROVIDED	1,592
MINIMUM HANDICAPPED SPACES REQUIRED (PER TABLE 11-2-2-2)	23
TOTAL HANDICAPPED SPACES PROVIDED	33

ITEM # G-8

THE DESIGN GROUP
ARCHITECTURE - PLANNING - INTERIOR DESIGN
215 CENTRAL AVENUE SE SUITE 300
ALBUQUERQUE, NEW MEXICO 87102
PHONE: 505.263.4444 FAX: 505.263.4444

PROJECT NAME:
ST. VINCENT HOSPITAL
455 ST. MICHAEL'S DRIVE
SANTA FE, NEW MEXICO

REVISIONS

NO.	DATE	DESCRIPTION

SHEET TITLE:
PROPOSED MASTER PLAN

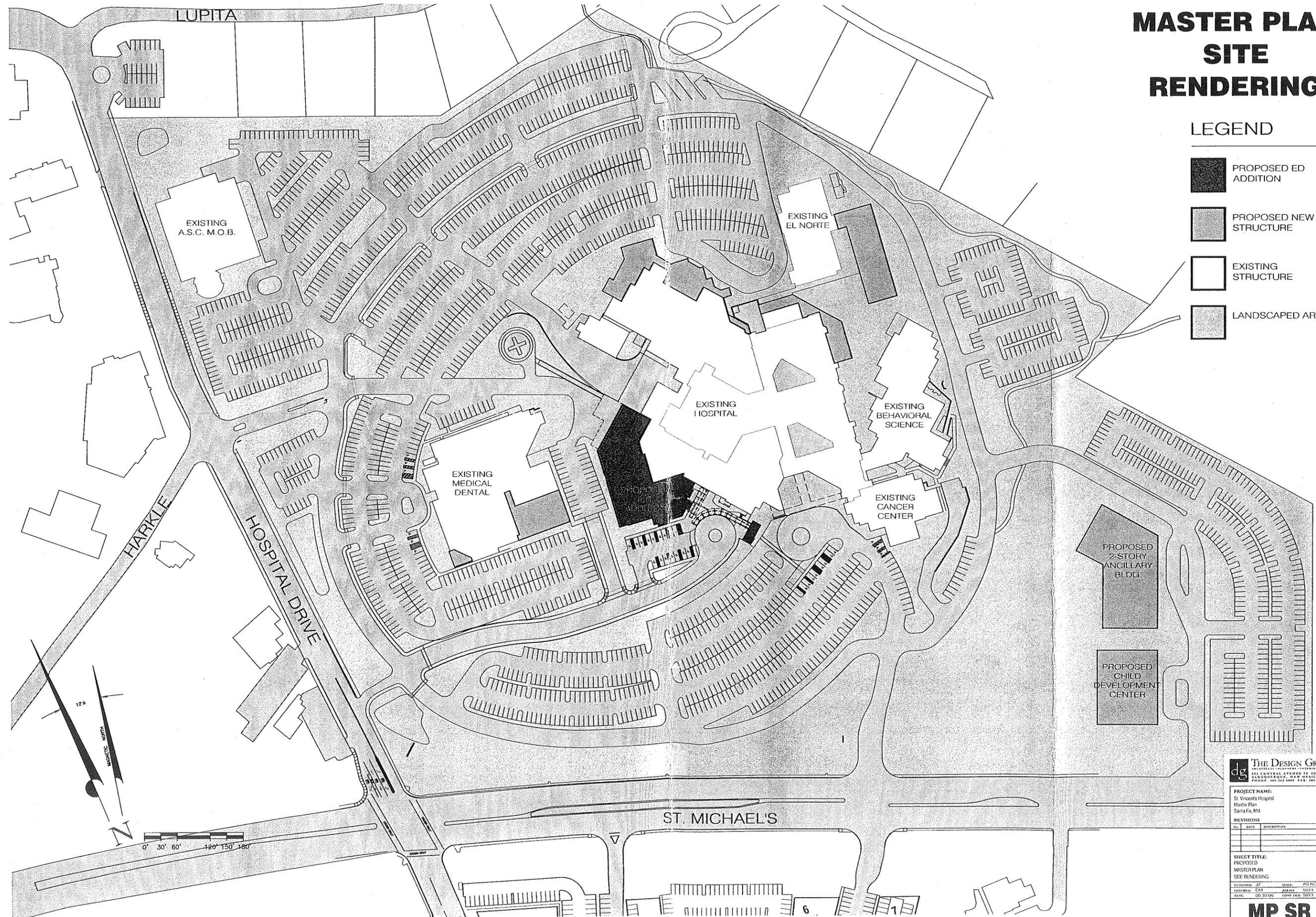
DESIGNED BY: JZJ SCALE: AS NOTED
CHECKED BY: EJM JOB NO: 5013
DATE: 06.30.06 CONP. FILE: 5013_SVP1.PLT

MP

PROPOSED MASTER PLAN SITE RENDERING

LEGEND

-  PROPOSED ED ADDITION
-  PROPOSED NEW STRUCTURE
-  EXISTING STRUCTURE
-  LANDSCAPED AREA



THE DESIGN GROUP
ARCHITECTS - PLANNERS - INTERIOR DESIGN
322 CENTRAL AVENUE DE SUITE 200
ALBUQUERQUE, NM 87102
PHONE: 505.272.2222 FAX: 505.272.2222

PROJECT NAME:
St. Vincent's Hospital
Master Plan
Santa Fe, NM

REVISIONS

NO.	DATE	DESCRIPTION

SHEET TITLE:
PROPOSED
MASTER PLAN
SITE RENDERING

DESIGNER: JZ SCALE: AS NOTED
DRAWN: EGA
DATE: 05.30.05 JOHN DIA. 5013 SVL/IMP

MP SR

EXISTING SITE AERIAL



NOT PICTURED
534 HARKLE ROAD
635 HARKLE ROAD
641 HARKLE ROAD
649 HARKLE ROAD
665 HARKLE ROAD
668 HARKLE ROAD
675 HARKLE ROAD

1630 HOSPITAL DRIVE
SANTA FE ORTHOPADIC ASS.
1640 HOSPITAL DRIVE
SANTA FE IMAGING CENTER
1650 HOSPITAL DRIVE
SANTA FE MEDICAL PLAZA
531 HARKLE DRIVE
NEUROSCIENCE PLAZA
539 HARKLE ROAD
GALISTEO PROFESSIONAL
OFFICES
546 HARKLE ROAD
547 HARKLE ROAD
PUERTA DE LA LUNA
MEDICAL & PROFESSIONAL
BUILDING
1692 HOSPITAL DRIVE
1700 HOSPITAL DRIVE

456 ST MICHAELS DRIVE
MEDICAL DENTAL CENTER

ST. VINCENT
HOSPITAL

NOT PICTURED
421 ST MICHAELS DRIVE
433 ST MICHAELS DRIVE
435 ST MICHAELS DRIVE
460 ST MICHAELS DRIVE

dg THE DESIGN GROUP
ARCHITECTS • ENGINEERS • INTERIOR DESIGN
302 CENTRAL AVENUE SUITE 200
ALBUQUERQUE, NEW MEXICO 87102
PHONE: 505.242.2888 FAX: 505.242.2889

PROJECT NAME:
ST. VINCENT HOSPITAL
455 ST. MICHAELS DRIVE
SANTA FE, NEW MEXICO

REVISIONS

No.	DATE	DESCRIPTION

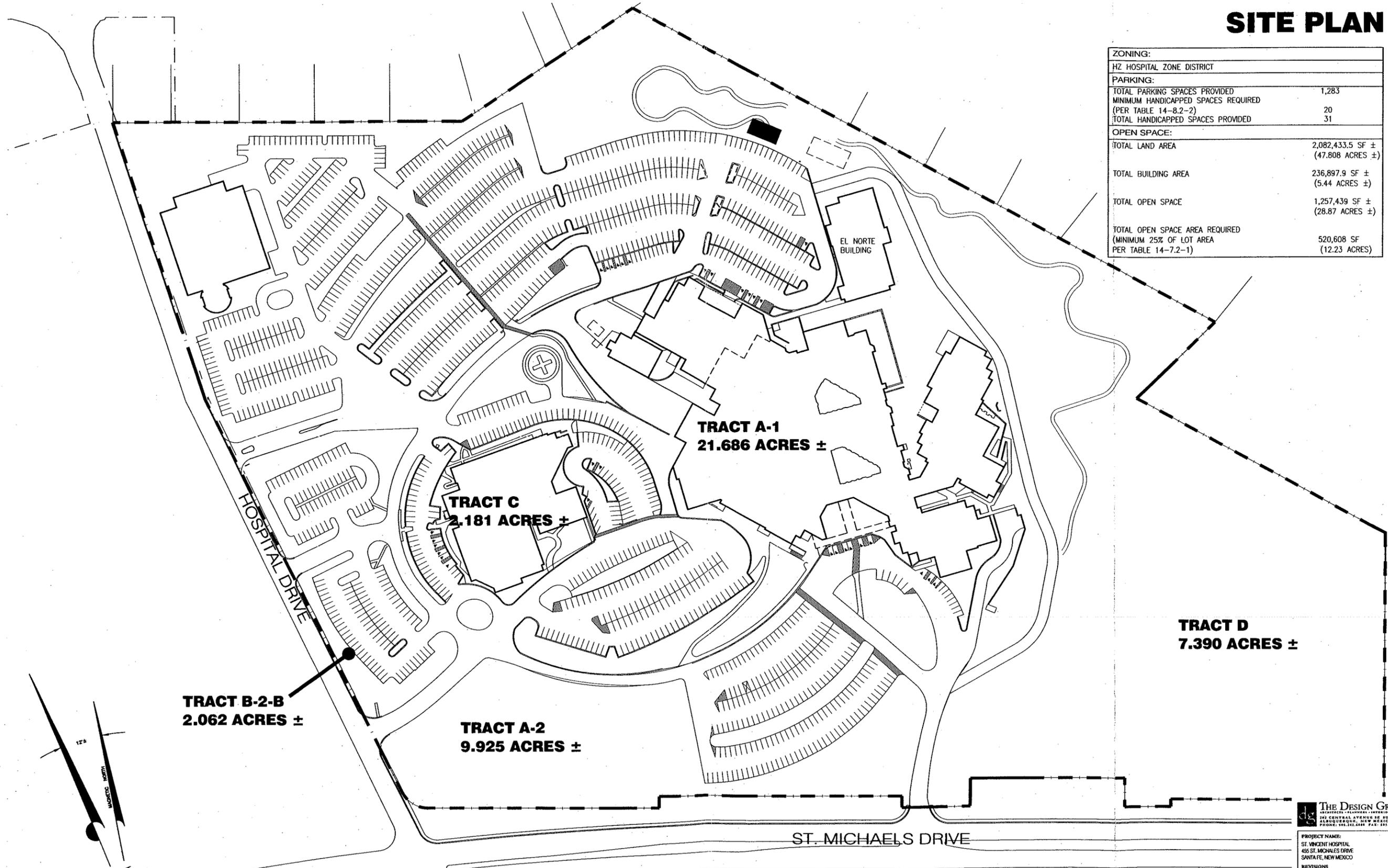
SHEET TITLE:
EXISTING SITE
AERIAL

DESIGNED: L.A. SCALE: NTS
CHECKED: D.J.M. JOB NO: 5013
DATE: 06-30-05 CADD FILE:

AERIAL

EXISTING SITE PLAN

ZONING:	
HZ HOSPITAL ZONE DISTRICT	
PARKING:	
TOTAL PARKING SPACES PROVIDED	1,283
MINIMUM HANDICAPPED SPACES REQUIRED (PER TABLE 14-8.2-2)	20
TOTAL HANDICAPPED SPACES PROVIDED	31
OPEN SPACE:	
TOTAL LAND AREA	2,082,433.5 SF ± (47.808 ACRES ±)
TOTAL BUILDING AREA	236,897.9 SF ± (5.44 ACRES ±)
TOTAL OPEN SPACE	1,257,439 SF ± (28.87 ACRES ±)
TOTAL OPEN SPACE AREA REQUIRED (MINIMUM 25% OF LOT AREA PER TABLE 14-7.2-1)	520,608 SF (12.23 ACRES)



TRACT D
7.390 ACRES ±

TRACT B-2-B
2.062 ACRES ±

TRACT C
2.181 ACRES ±

TRACT A-1
21.686 ACRES ±

TRACT A-2
9.925 ACRES ±

ST. MICHAEL'S DRIVE

HOSPITAL DRIVE

EL NORTE BUILDING

THE DESIGN GROUP
ARCHITECTS • PLANNERS • INTERIOR DESIGN
245 CENTRAL AVENUE DE SUITE 200
ALBUQUERQUE, NEW MEXICO 81102
PHONE: 505.242.4200 FAX: 505.242.4211

PROJECT NAME:
ST. VINCENT HOSPITAL
455 ST. MICHAEL'S DRIVE
SANTA FE, NEW MEXICO

REVISIONS

NO.	DATE	DESCRIPTION

SHORT TITLE:
EXISTING
SITE PLAN

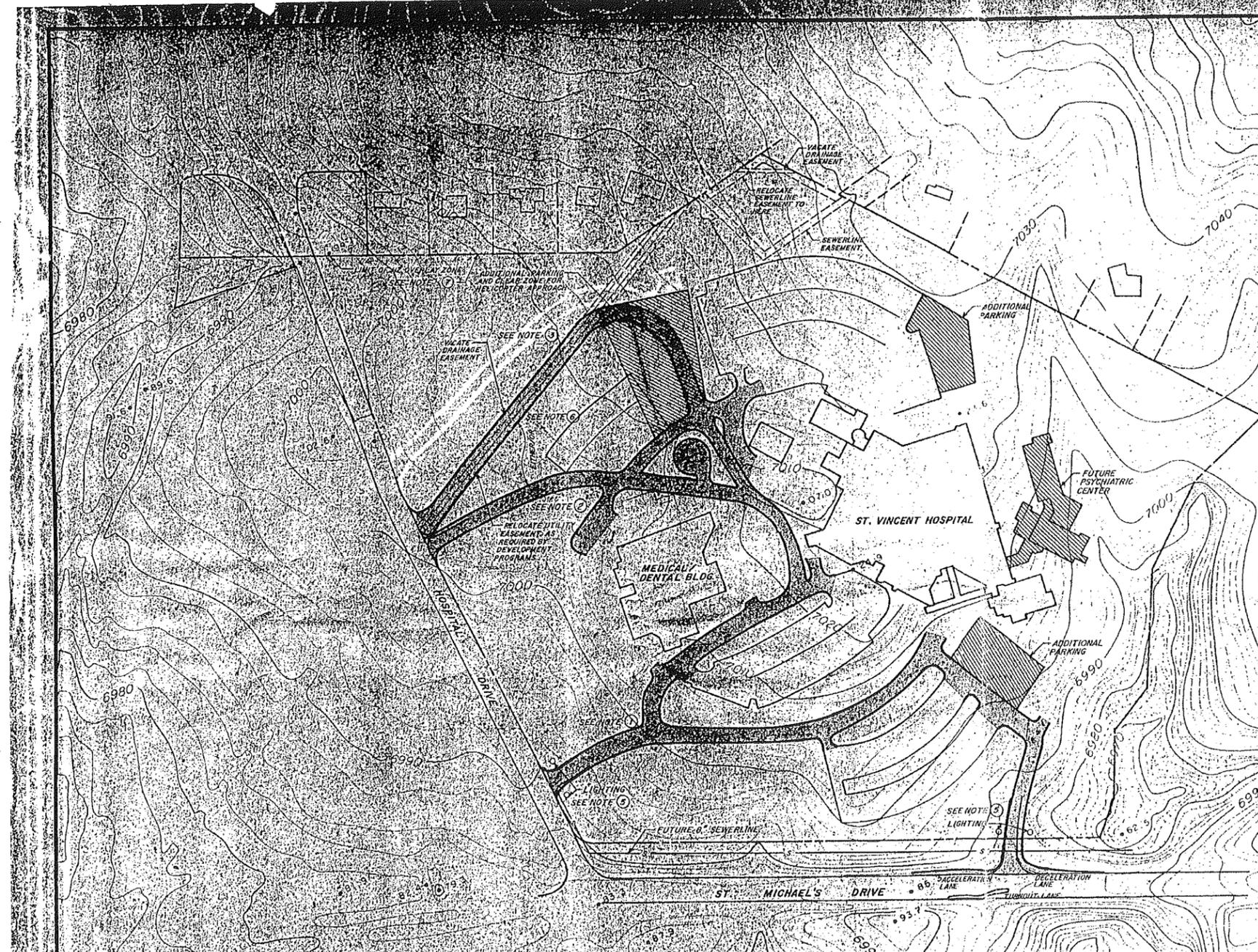
DESIGNED	CHKD	SCALE	AS NOTED

E SP

1984 SVH MASTER PLAN

NOTES:

- ① CREATE CONTINUOUS CIRCULATION; REALIGN ROADWAY TOWARD VISITOR'S ENTRANCE.
- ② CREATE CONTINUOUS CIRCULATION
- ③ NEED FOR THIS ALIGNMENT DETERMINED BY FUTURE DEVELOPMENT PATTERN FOR THIS AREA
- ④ HELIOPORT TO REMAIN IN EXISTING LOCATION
- ⑤ INSTALL LIGHTING AT ENTRANCES
- ⑥ ALIGNMENT TO BE DETERMINED AS PART OF SPECIFIC DEVELOPMENT PLANS FOR THE NORTHWEST AREA OF THE CAMPUS
- ⑦ FOR LANDSCAPE AND SCREENING RECOMMENDATIONS SEE SHEET 10



STEPHEN R. FLANCE & ASSOC. INC.
COMMUNITY PLANNERS
SANTA FE, NEW MEXICO

JAMES W. SIEBERT
AND ASSOCIATES
LAND PLANNING
URBAN, TOWN & VILLAGE PLANNING
LOCAL GOVT. & PRIVATE PRACTICE

REVISED BY DATE

ST. VINCENT HOSPITAL MASTER PLAN
RECOMMENDATIONS SHEET 11 OF 11

The Design Group
ARCHITECTS • PLANNERS • INTERIORS DESIGN
202 CENTRAL AVENUE SE SUITE 202
ALBUQUERQUE, NEW MEXICO 87102
PHONE: 505.242.4440 FAX: 505.242.4441

PROJECT NAME:
ST. VINCENT HOSPITAL
455 ST. MICHAELS DRIVE
SANTA FE, NEW MEXICO

NO.	DATE	DESCRIPTION

SHEET TITLE:
1984 SVH MASTER PLAN

DESIGNED: JSZ SCALE: AS NOTED
CHECKED: DJM FOR NO: 5013
DATE: 06.30.00 COMP. FILE: 5013_SVHM1

1984 MP

**October 28, 2015
Governing Body**

**Case #2015-47
455 ST. MICHAELS DRIVE CHRISTUS
ST. VINCENT REGIONAL MEDICAL
CENTER**

EXHIBIT G

MAPS

CHRISTUS ST. VINCENT REGIONAL MEDICAL CENTER

EXHIBIT A DEVELOPMENT PLAN 9 PAGES RESOLUTION 2015 - _____ PAGE 1 OF 9

WHR ARCHITECTS
Architecture with People in Mind

3131 McKinney Avenue, Suite 340
Dallas, Texas 75204
214.468.8505 phone whrarchitects.com

EXISTING CONDITIONS SITE CALCULATIONS

PARKING:
ZONE A: HOSPITAL COMPLEX
CURRENT CONDITIONS
NET SF OF ADMIN/OFFICE/CLINIC, ETC. - 205,000 SF
PARKING REQUIRED (1 PER 350 SF) - 586 SPACES
BED AREAS - HOSPITAL & PSYCH - 200
PARKING REQUIRED 1 PER 4 BEDS = 50 SPACES
ZONE A TOTAL REQUIRED = 636
ZONE A TOTAL PROVIDED = 1047
ZONE B: MEDICAL DENTAL COMPLEX
NET LEASABLE BLDG. SF - 47,150 SF
PARKING REQUIRED - 1 PER 200 SF = 236 SPACES
PARKING PROVIDED - 244 SPACES
ZONE C: PHYSICIANS PLAZA
NET LEASABLE BLDG. SF - 41,500 SF
PARKING REQUIRED - 1 PER 200 SF = 208 SPACES
PARKING PROVIDED - 214 SPACES

TOTAL PARKING:	
TOTAL PARKING SPACES REQUIRED	1,080
TOTAL PARKING SPACES PROVIDED	1,505
MINIMUM HANDICAPPED SPACES REQUIRED (PER NMBC TABLE 1106.1)	21
TOTAL HANDICAPPED SPACES PROVIDED	43

PROPOSED CONDITIONS SITE CALCULATIONS

PARKING:
ZONE A: HOSPITAL COMPLEX
CURRENT CONDITIONS
NET SF OF ADMIN/OFFICE/CLINIC, ETC. - 205,000 SF
PARKING REQUIRED (1 PER 350 SF) - 586 SPACES
BED AREAS - HOSPITAL & PSYCH - 200
PARKING REQUIRED 1 PER 4 BEDS = 50 SPACES
PROPOSED PHASE I CONSTRUCTION
PROPOSED CONSTRUCTION 65,600 SF
36 (6 NEW) PRIVATE BEDS WITHIN SURGICAL WING
PARKING REQUIRED 1 PER 4 BEDS = 2 SPACES
OFFICE/CLINIC SHELL SPACE 20,150 SF NET LEASABLE
PARKING REQUIRE (1 PER 350 SF) = 58 SPACES
CENTRAL UTILITY PLANT EXPANSIONS 1,800 SF GROSS
PARKING REQUIRE (1 PER 350 SF NET) = 6 SPACES
ZONE A TOTAL REQUIRED = 702
ZONE A TOTAL PROVIDED = 996
ZONE B: MEDICAL DENTAL COMPLEX
NET LEASABLE BLDG. SF - 47,150 SF
PARKING REQUIRED - 1 PER 200 SF = 236 SPACES
PARKING PROVIDED - 244 SPACES
PHASE II CONSTRUCTION
NET SF OF OFFICE/LAB/CLINIC, ETC. - 26,000 SF
PARKING REQUIRED (1 PER 350 SF) - 75 SPACES
ZONE C: PHYSICIANS PLAZA
NET LEASABLE BLDG. SF - 41,500 SF
PARKING REQUIRED - 1 PER 200 SF = 208 SPACES
PARKING PROVIDED - 214 SPACES
ZONE D: FUTURE STORAGE BLDG
NET LEASABLE BLDG. SF - 10,000 SF
PARKING REQUIRED - 1 PER 500 SF = 20 SPACES
PARKING PROVIDED - 20 SPACES

TOTAL PARKING:	
TOTAL PARKING SPACES REQUIRED	1,241
TOTAL PARKING SPACES PROVIDED (INCLUDING 100 CAR GRAVEL OVERFLOW LOT)	1,502
MINIMUM HANDICAPPED SPACES REQUIRED (PER NMBC TABLE 1106.1)	22
TOTAL HANDICAPPED SPACES PROVIDED	43

EXISTING MASTER PLAN CONDITIONS No. 2006-83

- NEW DEVELOPMENT SHALL COMPLY WITH THE STANDARDS OF SECTION 14-5.S(4)(3), SOUTH CENTRAL-HIGHWAY CORRIDOR OVERLAY DISTRICT, INCLUDING 25-FOOT LANDSCAPE BUFFER WITHIN 50-FOOT BUILDINGS SETBACK FROM RESIDENTIAL PROPERTY LINES.
- "AREA 3 OVERLAY" HEIGHT LIMIT FROM ORIGINAL MASTER PLAN SHALL CONTINUE TO APPLY (MAXIMUM BUILDING HEIGHT OF 18 FEET WITHIN 120 FEET OF NORTHERLY RESIDENTIAL PROPERTY LINE).
- R-2 ZONED PORTION OF THE HOSPITAL PROPERTY SHALL BE LIMITED TO SINGLE-FAMILY RESIDENTIAL USE, PARKING LOT USE WITH MINIMUM 20-FOOT LANDSCAPED SETBACK FROM ALL PROPERTY LINES, OPEN SPACE OR DETENTION PONDING WITH A DEPTH OF THREE FEET FOR LESS AND SIDE SLOPES NOT STEEPER THAN 4:1. OTHER USES, IF ANY, PERMITTED FOR R-2 ZONED PROPERTY UNDER CHAPTER 14 SHALL ALSO BE ALLOWED.
- FOR ALL PHASES SUBSEQUENT TO THE EMERGENCY ROOM EXPANSION, MAKE SOUTH ENTRANCE FROM HOSPITAL DRIVE AN ENTRANCE ONLY. STAFF DESIGN RECOMMENDATIONS MAY REQUIRE A TRIANGULAR BULB-OUT TO PREVENT RIGHT-TURN EXIT AND A STREET ISLAND ON HOSPITAL DRIVE TO PREVENT LEFT-TURN EXIT.
MODIFIED PER CONDITIONS 1-5 ON RESOLUTION 2015-____
- FOR ALL PHASES SUBSEQUENT TO THE EMERGENCY ROOM EXPANSION, PROVIDE PRO-RATA PARTICIPATION IN TRAFFIC CALMING MEASURES AND OFF-SITE TRAFFIC MITIGATION MEASURES TO APPROVAL OF THE PUBLIC WORKS DEPARTMENT AND THE PLANNING COMMISSION.
MODIFIED PER CONDITION 3 ON RESOLUTION 2015-____
- FOR ALL PHASES SUBSEQUENT TO THE EMERGENCY ROOM EXPANSION, THE DEVELOPER WILL BE REQUIRED TO ASSESS CERTAIN OFF-SITE TRAFFIC OPERATIONS AND PROVIDE MITIGATION MEASURES WHERE NEEDED. THESE IMPROVEMENTS ARE LISTED IN AN ENGINEERING DIVISION TRAFFIC MEMO WHICH WAS HANDED OUT AS ADDITIONAL CORRESPONDENCE AT THE MAY 4, 2006 PLANNING COMMISSION MEETING AND MAY INCLUDE:
 - IMPROVEMENTS TO THE INTERSECTION OF HOSPITAL DRIVE AND GALISTEO ROAD.
 - TRAFFIC MITIGATION AT THE INTERSECTION OF SAN MATEO AND GALISTEO ROAD.
 - ALL EXISTING AND PROPOSED ACCESS POINTS TO THE DEVELOPMENT.
 - TRAFFIC IMPROVEMENTS / MITIGATION ON HOSPITAL DRIVE.
 - EXAMINE POSSIBILITIES FOR SHIFTING THE MAIN ENTRANCE ON ST. MICHAELS DRIVE FURTHER EAST.**MODIFIED PER CONDITION 1-5 OF RESOLUTION 2015-____**
- FOR ALL PHASES SUBSEQUENT TO THE EMERGENCY ROOM EXPANSION, CLOSE AND/OR MODIFY DRIVEWAY ENTRANCES AT HOSPITAL DRIVE AND ST. MICHAELS DRIVE AS SHOWN ON THE AMENDED MASTER PLAN, INCLUDING MODIFICATIONS TO TURN LANES ON ST. MICHAELS DRIVE.
MODIFIED PER CONDITION 1-5 OF RESOLUTION 2015-____
- FOR ALL PHASES SUBSEQUENT TO THE EMERGENCY ROOM EXPANSION PROVIDE INTERNAL DIRECTIONAL SIGNAGE TO GUIDE VISITORS TO EXITS AND TO VARIOUS BUILDINGS/HOSPITAL SERVICES. **MODIFIED TO BE REVIEWED AS MASTER PLAN SIGN STUDY.**
- HELIPAD FACILITY SHALL NOT BE RELOCATED WITHOUT APPROVAL OF A SPECIAL EXCEPTION OR MASTER PLAN AMENDMENT.
- THE HELIPAD SHALL ONLY BE USED FOR EMERGENCY, CRITICAL MEDICAL FLIGHTS OR AT THE DIRECTION OF A PHYSICIAN.
- THESE CONDITIONS OF APPROVAL SHALL BE NOTED ON THE MASTER PLAN, WHICH SHALL REPLACE AND SUPERSEDE THE PROVISIONS OF THE ORIGINAL MASTER PLAN. EXCEPT AS SPECIFIED BY THESE CONDITIONS, DEVELOPMENT OF THE PROPERTY SHALL BE SUBJECT TO ALL OTHER APPLICABLE PROCEDURES AND DEVELOPMENT STANDARDS OF CITY CODES.
- ON-SITE CIRCULATION AND SIGNAGE: FOR ALL PHASES SUBSEQUENT TO THE EMERGENCY ROOM EXPANSION, MODIFY INTERNAL CIRCULATION AS SHOWN ON THE AMENDED MASTER PLAN TO INCLUDE A RING ROAD. FOR ALL PHASES SUBSEQUENT TO THE EMERGENCY ROOM EXPANSION PROVIDE INTERNAL DIRECTIONAL SIGNAGE TO GUIDE VISITORS TO EXITS AND TO VARIOUS BUILDING/HOSPITAL SERVICES. ON-SITE CIRCULATION AND SIGNAGE SHOULD BE ADDRESSED AFTER THE HOSPITAL MEETS WITH STAFF TO ADDRESS OFF-SITE TRAFFIC CONCERNS (ABOVE).
MODIFIED PER DEVELOPMENT CONDITIONS.
- ALSO A 20'-WIDE NON-MOTORIZED TRAIL EASEMENT SHOULD BE GRANTED TO THE CITY ALONG THE SOUTH AND EAST PROPERTY LINES TO ACCOMMODATE A 10-FT WIDE PAVED TRAIL. EXACT LOCATION SHOULD BE VERIFIED IN THE FIELD WITH THE CITY TRAILS OPEN SPACE COORDINATOR.
MODIFIED PER DEVELOPMENT CONDITIONS.
- ADDRESS PEDESTRIAN AND WHEEL CHAIR ACCESS WITH STAFF, FROM CAMINO TERESA AND ENGINO ROAD ON THE NORTH SIDE OF THE CAMPUS AND FROM OTHER POSSIBLE LOCATIONS ALONG THE EAST SIDE OF THE CAMPUS. A MINIMUM OF TWO GATES MUST BE FOR PEDESTRIAN, WHEEL CHAIR, AND BICYCLE ACCESS. THE APPLICANT MUST ALSO ADDRESS CREATING ACCESS FROM THESE LOCATIONS ACROSS THE CAMPUS TO THE BUS STOP, TO ST. MICHAELS DRIVE AND TO HOSPITAL DRIVE. **MODIFIED PER DEVELOPMENT CONDITIONS**
- EXCEPT AS SPECIFICALLY AMENDED BY THIS RESOLUTION NO. 2006-83, THE MASTER PLAN APPROVED BY RESOLUTION NO. 1985-36 SHALL REMAIN IN EFFECT.

DEVELOPMENT CONDITIONS OF APPROVAL

- NOISE FROM GENERATORS AND OR MECHANICAL EQUIPMENT WITHIN THE HOSPITAL MASTER PLAN CAMPUS AT RESIDENTIAL PROPERTY SHALL NOT EXCEED 50 DBA TWENTY FOUR HOURS A DAY.
- THE CONSTRUCTION HOURS FOR OUTSIDE PROJECT IMPROVEMENTS SHALL BE: MONDAY THROUGH FRIDAY 7 AM TO 7 PM; SATURDAY, 8 AM TO 5 PM WITH NO WORK ON SUNDAY.
- THE APPLICANT SHALL FOLLOW ITS OWN SUSTAINABILITY PLAN AS PROVIDED IN ITS APPLICATION.
- THE APPLICANT SHALL USE TRUE STONE AND NOT STUCCO STONE ON THE OUTSIDE OF THE ADDITION
- THE LAND USE DEPARTMENT SHALL HAVE THE AUTHORITY TO ADMINISTRATIVELY APPROVE SUCH SIGNAGE AS IS CONSISTENT WITH THE GOALS OF THE 1985 MASTER PLAN AND MAY DO SO WITHOUT THE NEED FOR A VARIANCE IF SUCH SIGNAGE EXCEEDS THE STANDARDS IN THE LAND DEVELOPMENT CODE.

PROPOSED MASTER PLAN CONDITIONS No. 2015-____

- BASED ON THE SUBMITTED TIA, THE INTERSECTION OF GALISTEO/SAN MATEO IS PROJECTED TO FAIL DURING THE IMPLANTATION YEAR (2017) OF THE PROPOSED 65,500 SQUARE FOOT DEVELOPMENT. THE PROPOSED 65,500 SQUARE FOOT DEVELOPMENT IS EXPECTED TO CONTRIBUTE 17.52% OF THE TOTAL TRAFFIC AT THIS INTERSECTION. THIS INTERSECTION CAN BE IMPROVED WITH IMPLEMENTING EITHER A ROUNDABOUT OR A TRAFFIC SIGNAL. THE DEVELOPER SHALL CONTRIBUTE FAIR SHARE CONTRIBUTION FOR IMPROVEMENTS TO THIS INTERSECTION BASED ON THE ABOVE MENTIONED PERCENTAGE AND BASED ON A TOTAL COST TO BE DETERMINED BY THE CITY'S PUBLIC WORKS DEPARTMENT. THIS COST WILL BE BASED ON THE MORE EXPENSIVE OF THE TWO IDENTIFIED IMPROVEMENTS.
- THE DEVELOPER SHALL LIMIT ACCESS AT THEIR SOUTHERNMOST ACCESS POINT ONTO HOSPITAL DRIVE TO AN ENTRANCE ONLY, RIGHT-IN LEFT-IN ONLY. THIS SHALL BE ACCOMPLISHED BY SIGNAGE
- THE DEVELOPER SHALL PERFORM INTERSECTION IMPROVEMENT AT THE HOSPITAL'S NORTHERN MOST ACCESS ONTO HOSPITAL DRIVE (ACROSS FROM HARKLE ROAD) SO AS TO IMPROVE PEDESTRIAN CROSSING ACROSS HOSPITAL DRIVE. THE DESIGN SHALL BE REVIEWED AND APPROVED BY THE CITY'S PUBLIC WORKS DEPARTMENT.
- FUNDS EQUAL TO THE DEVELOPER'S CONTRIBUTION WILL BE PLACED AND HELD IN AN ESCROW ACCOUNT TO BE MAINTAINED BY THE CITY. THE DEVELOPER'S CONTRIBUTION SHALL BE USED SOLELY FOR THE COSTS THAT ARE NECESSARILY INCURRED FOR THE DESIGN, CONSTRUCTION OR RIGHT-OF-WAY ACQUISITION, WITH EITHER A TRAFFIC SIGNAL OR A ROUNDABOUT AT THE GALISTEO/SAN MATEO INTERSECTION ("IMPROVEMENTS") AND FOR NO OTHER PURPOSE. ANY REMAINING ESCROW FUNDS NOT USED FOR THE DESIGN, CONSTRUCTION OR RIGHT-OF-WAY ACQUISITION OF THE IMPROVEMENTS WITHIN FIVE YEARS OF THE RECORDATION OF THE DEVELOPMENT PLAN SHALL BE RETURNED TO THE DEVELOPER UPON REQUEST OF THE DEVELOPER.
- THE TIA PROJECTS THAT DURING THIS PHASE OF DEVELOPMENT, THE HOSPITAL'S NORTHERN MOST ACCESS ONTO HOSPITAL DRIVE (ACROSS FROM HARKLE ROAD) WILL FAIL. AT THE TIME OF DEVELOPMENT, THE DEVELOPER SHALL EVALUATE ALL OPTIONS, INCLUDING BUT NOT LIMITED TO IMPLEMENTATION OF A ROUNDABOUT, UNLESS A REVISED TIA WITH RECENT TRAFFIC DATA SHOWS THAT THE ACCESS OPERATES AT ADEQUATE LEVELS OF SERVICE UNDER ITS CURRENT CONFIGURATION
- APPLICANT SHALL PROVIDE PRO RATA PARTICIPATION IN TRAFFIC CALMING ALONG HOSPITAL DRIVE IF AND TO THE EXTENT SUCH TRAFFIC CALMING IS DETERMINED TO BE NECESSARY BY THE PUBLIC WORKS DEPARTMENT.
- APPLICANT SHALL MAKE IMPROVEMENTS TO PROVIDE THAT ST. MICHAEL'S DRIVE IS THE PRIMARY ACCESS POINT TO THE PROPERTY, BASED ON REVIEW BY THE TRANSIT DIVISION AND REVIEW AND APPROVAL OF THE PUBLIC WORKS DEPARTMENT.
- LANDSCAPE IMPROVEMENTS ASSOCIATED WITH SHEET LP-104, LP-105, AND L-106 SHALL BE INSTALLED IN SPRING 2016.
- THE OWNER, WILL AT TIMES, PROPERLY MAINTAIN ALL PLANT MATERIALS SHOWN IN THE MASTER PLAN, INCLUDING BUT NOT LIMITED TO; PROPER PRUNING, SOIL TESTING, FERTILIZING AND WEEDING.
- ALL PLANT MATERIAL SHOWN IN THE MASTER PLAN SHALL BE MAINTAINED AND REPLACED AS NEEDED. ALL QUANTITIES AND SIZES OF PLANT MATERIALS MUST BE MAINTAINED AS SHOWN ON THE MASTER PLAN.
- ANY DEVIATIONS FROM THE MASTER PLAN LANDSCAPING SHALL BE DISCUSSED AND APPROVED BY THE LAND USE DEPARTMENT DIRECTOR OR DESIGNEE.
- STORMWATER PONDING FOR THE FOLLOWING WILL BE CONSTRUCTED UNDER THE BUILDING PERMIT FOR THE PROPOSED NEW INPATIENT BED WING:
 - DENTITION IN THE AMOUNT OF 3831 CF FOR THE NEW BUILDING
 - PONDING FOR BASIN D ON THE EAST SIDE OF THE HOSPITAL, WHICH WAS PREVIOUSLY CONSTRUCTED BUT NO LONGER EXISTS.
 - DETENTION IN THE AMOUNT OF 8520 CF FOR BASIN #8.
- OUTDOOR LIGHTING FOR THE PROPOSED NEW BUILDING WILL MEET THE REQUIREMENTS OF ARTICLE 14-8.9
- OUTDOOR LIGHTING FOR THE ENTIRE CAMPUS WILL BE ADJUSTED, AS PART OF THE PERMIT FOR THE NEW WING ADDITION TO MEET THE REQUIREMENTS OF ARTICLE 14-8.9
- WASTEWATER UTILITY EXPANSION CHARGE (UEC) SHALL BE PAID AT THE TIME OF BUILDING PERMIT APPLICATION FOR THE NEW WING ADDITION.
- ON-SITE SEWER SYSTEM SERVING THE DEVELOPMENT IS PRIVATE.
- ON-SITE SEWER LINES TO BE SHOWN ON UTILITY PLANS.
- OFF-SITE PUBLIC SEWER LINE AND EASEMENT TO BE SHOWN ON THE GRADING PLANS.
- CITY OF SANTA FE SEWER MANHOLE COVERS SHALL NOT BE USED FOR THE ON-SITE SEWER MANHOLES. MANHOLE COVERS ARE TO BE LABELED "PRIVATE SEWER" ON UTILITY PLANS.
- INDUSTRIAL PRE-TREATMENT SAMPLING PORTS (IPSP) ARE REQUIRED AND SHALL BE SHOWN ON THE UTILITY PLANS.
- DISCHARGE POINTS TO BE INDICATED ON DRAINAGE PLANS.
- ALL BACKFLOW PREVENTERS MUST BE EVALUATED AND UPGRADED IF NECESSARY TO MEET CURRENT REQUIREMENTS.
- ALL FIRE DEPARTMENT ACCESS SHALL BE NO GREATER THAN A 10% GRADE THROUGHOUT.
- FIRE DEPARTMENT ACCESS SHALL NOT BE LESS THAN 20 FEET WIDTH AND A MINIMUM WIDTH OF 26 FEET FOR ANY BUILDING OR PORTION OF BUILDING MORE THAN 30 FEET IN HEIGHT.
- 150 FEET DRIVEWAY REQUIREMENT PER IFC OR AN EMERGENCY TURN-AROUND THAT MEETS THE IFC REQUIREMENTS SHALL BE PROVIDED.
- FIRE DEPARTMENT SHALL HAVE 150 FEET DISTANCE TO ANY PORTION OF THE BUILDING ON ANY NEW CONSTRUCTION.
- DEVELOPMENT SHALL HAVE WATER SUPPLY THAT MEETS FIRE FLOW REQUIREMENTS AS PER IFC. AND MAY BE REQUIRED TO INSTALL AN AUTOMATIC SPRINKLER SYSTEM.
- APPLICANT MAY BE REQUIRED TO PROVIDE TWO SEPARATE AND APPROVED FIRE APPARATUS ACCESS ROADS.
- THE APPLICANT SHALL EXPAND ITS INTERNAL SITE TRAFFIC CIRCULATION PLAN TO STUDY AN INTERNAL PEDESTRIAN CIRCULATION PLAN.
- THE APPLICANT SHALL RETURN TO THE PLANNING COMMISSION WITHIN ONE YEAR TO PROVIDE A REVIEW OF PROGRESS AND COMPLIANCE WITH ALL MASTER PLAN CONDITIONS.
- ON-SITE SEWER SYSTEM SERVING THE DEVELOPMENT IS PRIVATE.
- EXCEPT AS SPECIFICALLY AMENDED BY THIS RESOLUTION NO. 2015-____, THE MASTER PLAN APPROVED BY RESOLUTION NO. 2006-83 SHALL REMAIN IN EFFECT.

CITY OF SANTA FE APPROVAL

REVIEWED AND APPROVED BY THE CITY OF SANTA FE GOVERNING BODY OF THE CITY OF SANTA FE AT IT'S MEETING ON _____

AS CASE NUMBER _____

PLANNING COMMISSION CHAIR _____ DATE _____

PLANNING COMMISSION SECRETARY _____ DATE _____

LAND USE ENGINEER _____ DATE _____

CITY PLANNER _____ DATE _____

AREA DEVELOPMENT STANDARDS

- AREA 1 (HOSPITAL & ENVIRONS)**
- MAXIMUM BUILDING HEIGHT: 65 FEET
OVERLAY ZONE: 45 FEET
FLOOR AREA RATIO: 1 : 8
OVERLAY ZONE: 1 : 5
- BASEMENTS AND BELOW GRADE PARKING AREAS SHALL NOT COUNT TOWARD THE ALLOWABLE FLOOR AREA.
- BUILDING SETBACKS: FROM BOUNDARY PERIMETER, NONE
OPEN SPACE: TEN PERCENT OF THE AREA- WITHIN THE PERIMETER BOUNDARY SHALL BE RETAINED AS PERMANENT OPEN SPACE.
- AREA 1A (HOSPITAL & ENVIRONS)**
- MAXIMUM BUILDING HEIGHT: 41 FEET
OVERLAY ZONE: 45 FEET
FLOOR AREA RATIO: 1 : 8
OVERLAY ZONE: 1 : 5
- BASEMENTS AND BELOW GRADE PARKING AREAS SHALL NOT COUNT TOWARD THE ALLOWABLE FLOOR AREA.
- BUILDING SETBACKS: FROM BOUNDARY PERIMETER, NONE
OPEN SPACE: TEN PERCENT OF THE AREA- WITHIN THE PERIMETER BOUNDARY SHALL BE RETAINED AS PERMANENT OPEN SPACE.
- AREA 2 (ST. MICHAELS DRIVE)**
- MAXIMUM BUILDING HEIGHT: 22 FEET MEASURED AT THE BUILDING SETBACK LINE FROM ST. FRANCIS DRIVE
FLOOR AREA RATIO: 1 : 5
- BASEMENTS AND BELOW GRADE PARKING AREAS SHALL NOT COUNT TOWARD THE ALLOWABLE FLOOR AREA.
- BUILDING SETBACKS: 50 FEET FROM ST. MICHAELS DRIVE
20 FEET FROM HOSPITAL DRIVE
10 FEET FROM ALL OTHER PERIMETER BOUNDARIES AND INTERIOR ROADS.
- OPEN SPACE: 20 PERCENT OF THE AREA TO REMAIN AS PERMANENT OPEN SPACE. PARKING AREAS ARE NOT INCLUDED WITHIN THE DEFINITION OF OPEN SPACE.
- PARKING: PARKING AREAS SHALL BE SETBACK FROM ALL PUBLIC RIGHTS-OF-WAY AND PRIVATE INTERIOR ROADS A MINIMUM OF 10 FEET, EXCEPT FOR ST. MICHAEL'S DR. WHERE A 25 FOOT SETBACK IS REQUIRED.
- LANDSCAPE AREA: 25 FEET FROM ST. MICHAELS DRIVE TO REMAIN UNDISTURBED, OR FOR LANDSCAPING ONLY.
- AREA 3 (NORTHERN CAMPUS.)**
- MAXIMUM BUILDING HEIGHT: 36 FEET
OVERLAY ZONE: 18 FEET OR ONE STORY WITHIN 120 FEET OF NORTHERN PROPERTY BOUNDARY.
FLOOR AREA RATIO: . 65
- BASEMENTS AND BELOW GRADE PARKING AREAS SHALL NOT COUNT TOWARD THE ALLOWABLE FLOOR AREA.
- BUILDING SETBACKS: 20 FEET FROM HOSPITAL DRIVE
EXCEPT FOR OVERLAY ZONE, 10 FEET FROM PERIMETER BOUNDARIES AND INTERIOR ROADS.
- ROADS:
OVERLAY ZONE: 50 FEET FROM NORTHERN PROPERTY BOUNDARY.
- OPEN SPACE: 20 PERCENT OF AREA TO REMAIN AS PERMANENT OPEN SPACE. PARKING AREAS ARE NOT INCLUDED WITHIN THE DEFINITION OF OPEN SPACE.
- PARKING: PARKING AREAS SHALL BE SETBACK FROM ALL PUBLIC RIGHTS-OF-WAY A MINIMUM OF 10 FEET.
- OVERLAY ZONE: PARKING AREAS SHALL LE SETBACK FROM THE NORTHERN PROPERTY BOUNDARY A MINIMUM OF 15 FEET.
- LIGHTING WITHIN OVERLAY ZONE: EXTERIOR LIGHTING OF PARKING AREAS SHALL NOT EXCEED 10 FEET IN HEIGHT, NOR SHALL THE LUMINATION BE DIRECTED TOWARD THE ADJACENT RESIDENTIAL PROPERTIES.
- AREA 4 (LUPITA STREET)**
- MAXIMUM BUILDING HEIGHT: 24 FEET
FLOOR AREA RATIO: . 30
- BUILDING SETBACKS: 20 FEET FROM LUPITA
20 FEET FROM HOSPITAL DRIVE
10 FEET FROM GALISTEO STREET
10 FEET FROM ALL OTHER PERIMETER BOUNDARIES
- OPEN SPACE: 20 PERCENT OF THE AREA TO REMAIN AS PERMANENT OPEN SPACE. PARKING AREAS ARE NOT INCLUDED WITHIN THE DEFINITION OF OPEN SPACE.
- AREA 4A**
- MAXIMUM BUILDING HEIGHT: 18 FEET
FLOOR AREA RATIO: . 3
- BUILDING SETBACK: 20 FEET FROM LUPITA
10 FEET FROM HOSPITAL DRIVE
20 FEET FROM EAST BOUNDARY
10 FEET FROM ALL PERIMETER BOUNDARIES
- OPEN SPACE: 20 PERCENT OF THE AREA TO REMAIN AS PERMANENT OPEN SPACE. PARKING AREAS ARE NOT INCLUDED WITHIN THE DEFINITION OF OPEN SPACE.
- RESIDENTIAL DEVELOPMENT
MAXIMUM DENSITY FOR RESIDENTIAL DEVELOPMENT WILL NOT EXCEED 12 DWELLINGS PER ACRE.

Revisions		
No.	Date	Description



CHRISTUS ST. VINCENT REGIONAL MEDICAL CENTER

CHRISTUS ST. VINCENT
Regional Medical Center



CHRISTUS ST. VINCENT REGIONAL MEDICAL CENTER
455 ST. MICHAEL'S DRIVE, SANTA FE, NEW MEXICO 87505

AREA MAP

PHASE CONSTRUCTION DOCUMENTS
DATE 09-30-2015
PROJECT NO 5103
Copyright © 2015 WHR Architects PC

