

MAJOR INSTITUTION MASTER PLAN ANNUAL STATUS REPORT

I. Introduction

- A. Harborview Medical Center
- B. May 1, 2009 through February 28, 2011
- C.
 - 1. **Name and Title**
Elise Chayet, Associate Administrator
Clinical Support Services and Planning
 - 2. **Mailing Address**
Clinical Support Services and Planning, Box 359952
Harborview Medical Center
325 - 9th Avenue
Seattle, WA 98104
 - 3. **Phone Number**
(206) 221-1656
 - 4. **Facsimile Number**
(206) 221-1788
 - 5. **E-mail Address**
echayet@u.washington.edu
- D. Master Plan Adoption Date and Any Subsequent Amendments
Master Plan was adopted in 2000, a minor amendment pertaining to housing replacement was approved in April 2004.

II. Progress in Meeting Master Plan Conditions

The City Council placed 16 conditions on the proposed Master Plan and directed 63 SEPA conditions. They have all been incorporated into the design of the project. For the term of this May 1, 2009 – February 28, 2011 report, the following activities have occurred in relation to the conditions noted below:

City Council Condition #9: Seattle Design Commission shall be given a full opportunity to review and make recommendations on any proposed street vacations associated with the Master Plan projects as part of the street vacation process.

The Seattle Design Commission unanimously recommended conceptual approval of the aerial vacation of 9th and alley vacation between 9th and Terry on April 19, 2001. The public benefits were reviewed by the Seattle Design Commission on July 3rd, 2003, and again in January 2004. In June 2004, the Seattle Design Commission approved the public benefits noted in the design as consistent with the aerial vacation conditions. The parties are currently reviewing the City of Seattle's appraisal for both the street and aerial vacation.

SEPA 10: Harborview shall improve the quality of landscaped open space in the proposed open spaces. Building exterior and proposed streetscapes and public benefits were approved by the Seattle Design Commission in June 2004 and have been installed. Harborview Hall is slated for demolition by end of 2011 and a public open plaza will be constructed in its place.

III. Major Development Activity Initiated or Under Construction Within the MIO Boundary During the Reporting Period.

A. List and Describe Development Activity Initiated or Under Construction

Ninth & Jefferson Building (NJB) substantial completion on January 2009; internal remodels continued through end of 2009. As of February 2011 a request for qualifications is underway for a design/build contractor for the Harborview Hall demolition and a public open plaza.

B. Major Institution Leasing Activity to Non-Major Institution Uses
Not Applicable

IV. Major Institution Development Activity Outside but within 2,500 Feet of the MIO District Boundary

A. Land and Building Acquisition During the Reporting Period:
Not Applicable

V. Progress in Meeting Transportation Management Program (TMP) Goals and Objectives

- A. Harborview Medical Center supports the goals and objectives of the TMP through an aggressive program of incentives to discourage use of single occupant vehicles.
- B. These include: subsidizing vanpool and carpool programs; pre-tax income program for purchasing transit (U-Pass); free carpool and vanpool parking; free covered and uncovered bike racks; support for METRO for the First Hill Express Bus service; and support of the University Health Sciences Bus service which serves the University, Harborview and South Lake Union.
- C. Harborview Medical Center meets each goal and objective. In meeting the goals set forth in Harborview's Transportation Management Plan, Harborview Medical Center: 1) Provides a mix of on-site parking which promotes the use of high occupancy use vehicles; 2) To encourage staff to take the bus to work, the UW and Harborview provide a subsidized U-PASS to each permanent employee. It allows a rider to take Metro Transit, Community Transit, Pierce Transit, Kitsap Transit, Everett Transit, Sound Transit, Sounder Commuter Train, and Light Link Rail. 3) A U-PASS will also subsidize a vanpool; 4) Harborview has reduced the number of commuter trips in employee Single Occupancy Vehicles.

Major Institution May 2009 – February 2011 Reporting Period

Development Activity Within the Major Institution Overlay Boundary

Non – Leased Activity

May 2009 – February 2011 Reporting Period

Name of Building and Address (or Other Means of Locating the Property or Site)	Proposed Uses(s)	Size – Gross Square Footage
Ninth and Jefferson Bldg. (NJB) 908 Jefferson	Medical Office Building and 650 Parking	440,000

Development Activity Within the Major Institution Overlay Boundary

Leasing Activity to Non-Major Institution Uses

May 2009 – February 2011 Reporting Period

Name of Building and Address (or Other Means of Locating the Property or Site)	Previous Use(s) and Proposed Use(s)	Size – Gross or Rentable Square Footage of Leased Area
325 Ninth Avenue – KC Clinics and Services	Public Health Services and Clinics	9,208 USF
Ninth and Jefferson Bldg (NJB) 908 Jefferson – KC Clinics and Services	Public Health Services and Clinics	13,197 RSF
Ninth and Jefferson Bldg (NJB) 908 Jefferson KC Clinics and Services	King County Medical Examiners Office	34,147 RSF
Ninth and Jefferson Bldg (NJB) 908 Jefferson KC Services	ITA Court	7,991 RSF
Ninth and Jefferson Bldg (NJB) 908 Jefferson KC Retail	Refit	3,888 RSF
Ninth and Jefferson Bldg (NJB) 908 Jefferson KC Retail	Diva Espresso	1,145 RSF

**Development Activity Outside the Major Institution Overlay Boundary but
Within 2,500 Feet**

**Land and Building Acquisition
May 2009 – February 2011 Reporting Period.**

Name of Building and Address (or Other Means of Locating the Property or Site)	Current	Size – Gross Square Footage of Land or Building
NONE		

**Development Activity Outside the Major Institution Overlay Boundary but
Outside 2,500 Feet**

**Leasing Activity
May 2009 - February 2011 Reporting Period**

Name of Building and Address (or Other Means of Locating the Property or Site)	Previous Use(s) and Proposed Use(s)	Size – Gross or Rentable Square Footage of Leased Area
401 Broadway (Pat Steel Building)	Offices, Clinics and Retail	156,800 square feet plus parking
1120 – 112th Ave NE, 1st Fl, Bellevue	Office space for Children’s Response Center	3,821 RSF
501 Eastlake Ave E	Prosthetic and Orthotics Clinic	4,401 RSF
Sandpoint 7501 – 63rd Ave NE, Bldg 5D-Suite D160	Materials Management; eff Oct 2003	6,145 RSF
120 8th Avenue – Yesler Terrace Service Bldg	SHA – Steam Plant	5,040 RSF



City of Seattle
Department of Neighborhoods

Bernie Agor Matsuno, Director Mike McGinn, Mayor



King County



UW Medicine

**Harborview Medical Center Major Institutions Master Plan
 Advisory Committee**

October 11, 2011

Harborview Medical Center
 Major Institutions Master Plan
 Advisory Committee

Members

Kristin O'Donnell
 John Dolan
 Frederick Scheetz
 Anne Fiske Zuniga
 Laurence Brouse (Chairperson)
 E. Anne Newcombe
 Leslie Watson
 Mike Greenen
 Kristine Johnson

Ex-Officio Members

Ted Klainer - Harborview
 Steve Sheppard - City,
 Department of
 Neighborhoods
 Michael Dorcy - City,
 Department of Planning and
 Development

Hon. Dow Constantine, King County Executive
 Hon. Larry Phillips, King County Council
 Members of the Harborview Medical Center Board of Trustees
 Members of the Harborview Bond Oversight Committee
 Mr. Steve Sheppard, Seattle Dept. of Neighborhoods (for various City officials)

RE: Proposed changes to Harborview MIMP

Dear Ladies and Gentlemen,

We are writing this letter in our capacity as the Citizens' Advisory Committee for the Harborview Medical Center Master Plan.

The CAC wishes to express its grave concern at the actions presented to the CAC that the County is considering making a major change to the Plan by foregoing the demolition of Harborview Hall.

We wish to state our opposition to this idea in the strongest possible terms.

First of all, we resent that some vague "King County building preservation community" can appear at the 11th hour and derail a carefully thought out and consensus driven Master Plan which was approved years ago. Bona fide interest groups and individuals were given ample opportunity for input into the MIMP over a decade ago. Who exactly is this "community"?

As you are well aware, HMC, the local community, and many other stakeholders (including the Seattle Landmarks Preservation Authority) have been working on the master plan for almost 12 years. We are astounded that a component representing almost a third of the Master Plan can arbitrarily be changed by executive decision at the County. If such a thing can be done, what is the purpose of requiring a Major Planning process involving all the major stakeholders?

Second, the issues of Harborview Hall and the main Harborview building were carefully and exhaustively examined by the Landmarks Board and the matter of Harborview Hall's non-landmark status was conclusively decided.

Third, an enormous amount of effort and hundreds of thousands of dollars went into the drafting of the Master Plan. Given our current economic state, it seems to be fiscally irresponsible to throw out the product of all that work and pursue a new course.

This is even more egregious in light of the fact that extensive study was given to Harborview Hall and it was conclusively determined that the retrofit needed to bring the building up to hospital seismic standards would be prohibitively expensive, if not structurally unfeasible.

Finally, and to our mind most importantly, the provision of an open campus with green space was one of the major issues raised by the neighborhood from the earliest stages of the Master Plan process. The retention of Harborview Hall eliminates the centerpiece of the open campus and green space, and to our way of thinking, guts the entire design. This is a major alteration and cuts to the heart of the agreed and approved Master Plan. We have attached the Master Plan to this letter and draw your attention to the sketch on page 13 and the narrative on page 55.

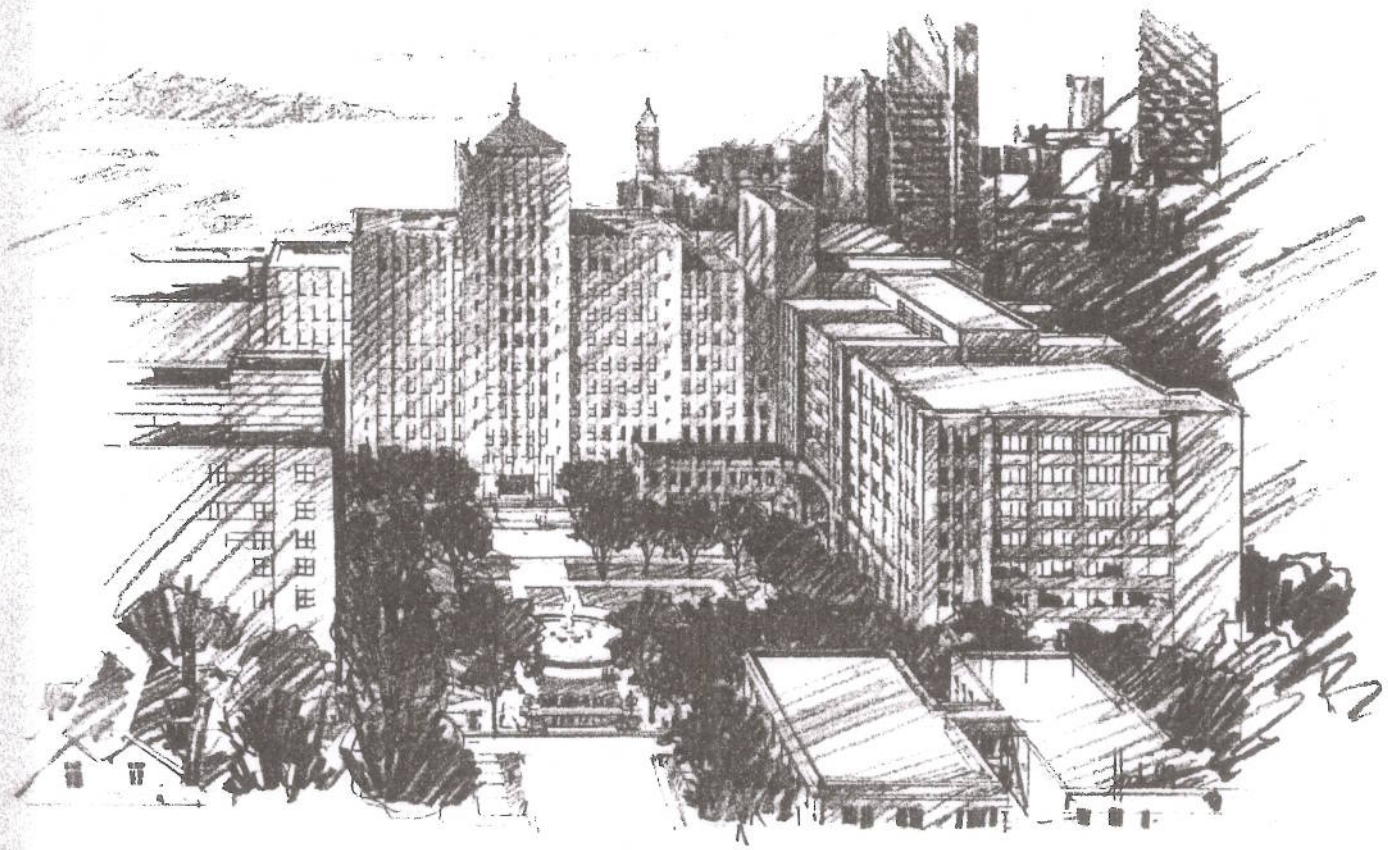
One of the strongest concerns of the neighborhood was that the original proposal from Harborview resulted in a monolithic structure which effectively cut First Hill in two, separating the north and south sides of the Hill. As you can see from the sketch, the design ultimately approved not only eliminates the "Berlin Wall" but also provides much needed campus permeability and way finding from one side of the Hill to the other. It is not only that the area requires open space, but the specific placement of that green space which made the Harborview Hall location the logical and elegant solution. Our concern is not only that the proposal eliminates open space, but worse, eliminates a perfectly sited open space. A less charitable statement would be that the hospital got its two new buildings and now the County wants to cut the amenity promised to the public.

The way the situation has developed so far feels more like "serving notice" than a dialog. If the County intends to unilaterally abrogate the agreements made with the local community in the Master Plan process, we intend to request that the City revoke the Harborview MIMP and require that HMC begin an entirely new Master Planning process before any further work is performed.

Sincerely,



Harborview Medical Center Citizen's Advisory Committee
Lawrence N. Brouse,
Chair



Landscaped Open
Space (Planned
Project Phase)

harborview medical center

FIG. 4

