MINUTES

Regular Meeting

Ukiah Civic Center, 300 Seminary Avenue

1. CALL TO ORDER: Acting Chair Menton called the Design Review Board called the meeting to order at 3:00 p.m.

2. ROLL CALL
   Present: Tom Liden, Alan Nicholson, Nick Thayer
   Estok Menton
   Absent: Tom Hise, Richard Moser, Chair
   Staff Present: Kim Jordan, Senior Planner
   Jennifer Faso, Associate Planner
   Cathy Elawady, Recording Secretary
   Others present: Howie Hawkes
   Freedom Smith, UVMC
   Keith Dobbs, UVMC
   Kate Frey, Kate Frey Landscape Design
   Mark Schuette, HBE Corporation
   Mitch Miller, HBE Corporation
   Tim Rohan, UVMC

3. CORRESPONDENCE: None

4. APPROVAL OF MINUTES: The minutes from the June 1, 2011 meeting will be available for review and approval at the next meeting.

5. AUDIENCE COMMENTS ON NON-AGENDA ITEMS: None

6. RIGHT TO APPEAL: There are no appealable items on this agenda.

7. UNFINISHED BUSINESS

7A. Ukiah Valley Medical center Preliminary Review: 11-05-PRE-PC. Conduct a preliminary review for an expansion to the Ukiah Valley Medical Center at 275 Hospital Drive, APN 002-193-23 and 002-160-08.

   Senior Planner Jordan:
   • Welcomed UVMC staff, project consultants and architects and thanked the applicant for agreeing the DRB review the project on a preliminary basis in order to receive architectural, site and landscaping feedback on the project.
   • Prior to preparing formal plans and an application, the applicant is specifically requesting direction concerning adequacy of the proposed landscaping due to the constraints of the site and adequacy of the proposed screening for the rooftop units and emergency generator.
   • The proposed project is an addition to an existing building and includes revisions to the ambulance entry and drives aisles, one new emergency generator and transformer east of the new ambulance entry, relocation of the helipad to the roof of the addition, modification of the park and landscaping areas and planting of additional trees.

Mark Schuette, HBE Corporation

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• Explained the project must be approved by the Office of Statewide Health Planning and Development (OSHPD) and this agency reviews all buildings for hospitals, surgery centers and schools that has to do with health licensing requirements.
• Preliminary plans outlining what the project is about in terms of the shape, size, height, exit/entry locations, paths, color scheme/materials and other series of relevant plan details for the addition were sent to OSHPD for the Ukiah project and the plans are now in the second phase of review with this agency. The process for just approval of the preliminary plans is sensitive. Once approved for construction OSHPD will be making all the inspections to make certain the project complies with state regulations.
• Emphasized that since OSHPD is the state agency that reviews projects for hospitals, any revisions that require changes to the structural design of the structure will impact the construction schedule of the hospital.
• Commented on the project with regard to the emergency department improvements, storage of HVAC equipment, new helipad, revisions to the drives and parking, ambulance entry canopy and walk-in entry that will be painted to match the adjacent Outpatient Pavilion, location of emergency generator and transformer location and the plan for screening these facilities from view.
• Understands the Planning Commission had concerns the buildings on the UVMC campus have a cohesive composition and supports architecturally ‘tying-in’ the proposed project buildings with that of the UVMC Outpatient Pavilion building and possibly make some architectural modifications to the existing buildings to create that uniformity.
• The exterior colors are coordinated such that the base and head of the exterior walls and main entrance are conducive with the composition of the existing patient pavilion.
• Elaborated on the color schemes for the new addition. (Refer to attachment #2 of the staff report).
• Would like guidance for appropriate landscaping within the available areas.

Keith Dobbs, UVMC
• UVMC is built when there were three hospitals in town and now it is the only one in town.
• The goal is to create a design that provides for uniform appearance and the look is that of the Outpatient Pavilion that is currently on the hospital campus.
• The medical offices across the street having Mediterranean architecture were built by another architectural firm and not with the hospital architecture in mind to provide for that architectural uniformity. The rural medical offices across the street are not owned by UVMC.
• The plan is to make modifications to the older hospital building so that it too will complement the Outpatient Pavilion to the degree that is economically feasible.
• The president of UVMC supports having a uniform-looking hospital campus.
• The proposed expansion is very costly.
• Provided the Board with photographs of sister hospitals that have or are using HBE Corporation for new construction.

DRB:
• Looked at overall site plans from HBE Corporation.
• Likes the exterior and interior design of the Outpatient Pavilion.
• In addition to the proposed stucco exterior discussed other design themes including signage and building form that would be important to the hospital system.

Tim Rohan, UVMC:
• The intent is for additions to architecturally complement what is existing whereas historically this was not so much of importance and cited other hospitals in Willits and Lake County that are making improvements to these hospital campuses keeping in mind that uniformity with regard to buildings is important. Understands when the rural medical offices were constructed across the street, the hospital missed out on this opportunity of maintaining uniformity.
• The intent for older designed buildings is to try and incorporate that look with the rest of the campus.
• Addressed the new helipad that will be on the roof of the new building that will replace the existing pad on grade and the associated benefits that will allow for more space on the campus. Also, HBE Corporation has designed a helipad that can accommodate other aircraft that come to the area. For instance, the National Guard can bring in their Blackhawk helicopters and the U S Coast can land their dolphins and other important aircraft/trauma/rescue aircraft that may need to use the facility.

DRB:
• Supports that hospitals are designed with a patient focus wherein the look and feel is not that traditional indifferent/sterile type of building.
• Supports architecture where the rooflines and roofing materials are consistent and complementary with other buildings.
• Emphasized the importance of providing for consistency no matter the design.

Freedom Smith
• There are future plans to make improvements to the obstetric wing to resemble the new addition.

DRB:
• Supports that HVAC equipment and/or other mechanical equipment is well-screened.

There was discussion concerning the ‘penthouse’ and how the screening for the HVAC equipment and mechanical equipment will be achieved behind stucco finished screening materials on the roof.

DRB:
• Concerned ambulance and walk-in entry to new building are clearly identified.

It was noted signage will be provided to effectively identify departments and accessibility.

Staff:
• In terms of providing landscaping at the front of the hospital on Hospital Drive, normally street trees must be provided one every 30 feet, but with the addition this is not possible. New parking areas would be required to comply with the landscaping requirement unless granted relief by the Planning Commission based upon the size, scale, intensity and location of the development project. The parking requirement is one tree placed between every four parking stalls within a continuous linear planting strip. The applicant is requesting relief from the landscaping requirements and would like suggestions regarding creative ways to address landscaping.
• Asked the Board to make suggestions about the proposed building and landscaping.
• In terms of landscaping, it makes sense that trees may not be appropriate in certain areas.

DRB:
• Understands the hospital campus is constrained for space in order to provide for extensive landscaping, but would like to look at options.
• Supports if OSHPD regulations allow, providing for landscaping to soften the western fascia and screen from the hot sun where feasible.
• Understands with regard to tree species there are height restrictions since the hospital is located in the B-2 Infill Zone that allows the expansion of existing hospital facilities provided the buildings are single story and the use does not exceed an intensity of 60 persons per acre.
• Because the project is subject to state regulations, these regulations will ‘trump’ City regulations.

Staff: While the State has that option, there is flexibility and the Planning Commission can make certain modifications during the discretionary review process. Of importance is to make a recommendation regarding landscaping that is subject to possible modification. Encouraged the DRB to do what they always do and that is to make design recommendations even though the design recommendations may not work with OSHPD.

DRB building design and landscaping comments/questions:
• Would not be able to provide a lot of shade trees along the western front because of possible interference with the flight path. Energy conservation is important and there may be possible ways to address this element on the building itself such as with build-in overhangs that do not interfere with flight path of helicopters.
• There could be vegetative screening in the front planter bed of the addition in terms of addressing energy conservation and shading the western front from the hot summer sun.
• While the color scheme will effectively break up the ‘boxy-feel’ of the building, vegetation will help.
• Another way to mitigate the western sun would be to install recessed windows or provide for some type of projection and architectural element to tie these features into the overall design concept. This should not alter the function and/or layout of the building.

Mitchell L. Miller, HBE Corporation
• Architectural changes could conflict with OSHPD regulations, particularly on the north end of the building because there are minimum requirements for ICU rooms.
• Concerned about possible reduction of square footage with changing the design of windows for the offices located on the southwest elevation.

DRB building design and landscaping comments/questions:
• Change in design of the windows and/or other changes to the exterior of the building for screening purposes would not change the square footage of the building or function if the concern is to conserve as much office space as possible.
• The intent is to articulate the building in such a manner to limit the amount of light coming in, particularly during the summer months and this can be accomplished by possibly constructing a trellis having deciduous vines that can provide shade and this should not affect the function of the building.
• Understands that changing any portion of the design could possibly jeopardize the funding for the project and/or cause the process to have to start over. Likes the design concept of the covered entryway to the walk-in emergency and possibly extending this feature, which would likely affect the parking availability in this area. This would allow for pedestrian access from the street.
• It is important every effort is made to make the entrance architecturally presentable such that there is that connection from the street to the hospital waiting room. Depending on the reason for going to the hospital a person could walk from the street through the entrance if it were extended or drive to the entrance. Noted, the emergency room has a separate entry for ambulance.

Mitchell L. Miller:
• A trellis would impact the structure even if it is not attached to the building because there are safety issues associated with the chance vegetation could combust during certain times of the year. Trellises also block fight fighting ability. Trellises may be acceptable provided that are constructed at least 10 feet away from the building.

DRB building design and landscaping comments/questions:
• Does OSHPD also review the landscaping and parking for the project?
Mitchell L. Miller:
• OSHPD does review landscaping and parking for the project from the perspective of ensuring compliance with requirements.

DRB building design and landscaping comments/questions:
• Would the installation of skylights be a consideration in the waiting area for the new building similar to the skylights in the Outpatient pavilion? The skylights are what 'really make' the waiting area aesthetically pleasing for the Pavilion.
• Natural light from skylights can be soothing and comforting.

It was noted the waiting area may be too close to the helipad to have skylights.

DRB building design and landscaping comments/questions:
• Asked about the paving that would be done on the south side of the addition and whether some of this paving is existing?

Mitchell L. Miller:
• There is currently parking at the edge where the helicopter pad is located and in front of the Pavilion and demonstrated on the site plans the location of existing parking accommodations and where new parking is proposed.
• The intent is to compensate for the addition of more trees.
• Noted the walk-in area shown on the site plans is not the main entrance to the hospital and this is the entrance that would be used for patient admission purposes.

DRB building design and landscaping comments:
• Does support extending the entrance for the addition.
• Access to the building appears to be confusing. As designed, no one would be walking to the building from the street. If there is a pedestrian entrance, people would have to walk north or south to the entrance from the street or parking area.
• Important to utilize space for entrances efficiently, noting there is a philosophy/connection as to how entrances are identified.

Freedom Smith:
• The entrance as shown on the site plan is the main entrance to the emergency room so anyone coming to the hospital aside from a patient would enter at this point.

Staff: There may be a way to make the entrance 'more pronounced' without affecting the building by somehow highlighting it for use by pedestrians.

Mitchell L. Miller: OSHPD requires a covered drive-up area for drop-off of patients that has specific limitations for size and slope and no pedestrian access is allowed through this required drop-off zone.

Keith Dobbs: It may be pedestrian access will be improved on Hospital Drive as City Council approved the construction of a new and major crosswalk that does change the structure of the street.

DRB building design and landscaping comments:
• Recommends application of permeable paving where feasible for new parking.
• Add more trees where feasible in the landscape areas and parking lot such that there is no interference with the helipad and in compliance with the C-2 zoning district for parking and landscaping as to landscaping coverage, application of planter strips, pedestrian sidewalks/marked pedestrian facilities separate from parking areas, and for parking lots,
one tree placed between every four parking stalls where possible since the site is constrained in terms of space.

- Be selective in the landscaping species for trees and vegetation that would complement the building and provide for some screening.
- The site plans indicate a large grassy area on the south side of the addition and is this area intended for landscaping.

Staff: It may be the applicant will seek relief from parking and landscaping requirements relative to compliance with FAA regulations for the operation of a helipad on the rooftop of the building.

Mitchell L. Miller:
- This area contains the underground fuel tank whereby trees cannot be planted. This area can accommodate some landscaping.

Staff: A lawn area is shown on the site plans and inquired if this is the intent or is this area a placeholder for something else?

Mitchell L. Miller:
- Is likely a placeholder at this point.

Member Nicholson:
- Is of the opinion, much of the addition looks that a service/factory facility that contain bays/roll-up doors for service trucks/vehicles. Making the building appear clean and flat presents a very pedestrian unfriendly environment.
- Is not the type of building that makes for good neighbors.
- Supports softening of the building design to make it more neighborhood friendly and healing to the community.
- Hospitals are symbolically a place of healing, health, nurturing and well-being. The addition, as presented, does not present a friendly appearance or environment.
- Without trellises, ‘sun-shading’ techniques could be used, such as horizontal or vertical latticing to break up the building mass.
- The design is likely a ‘programmed’ plan.

Mitchell L. Miller: The client has a programmed concept of what fits the needs for the hospital and community whereby the job of HBE Corporation, as a design consultant, is to listen to the hospital needs before designing a project and formulating a floor plan in order for the project to work and meet code requirements. UVMC has a budget to work with and it is HBE’s job to work within those parameters.

The intent of HBE Corporation is to design a floor plan that works within the budget of UVMC, meets the hospital objective in terms of function, complements the existing buildings and is aesthetically pleasing to the neighborhood.

Member Nicholson:
- Not his place to design the building.
- Would be nice to add some features to soften the building’s appearance, in which planting landscaping may be of assistance in this regard.

There was discussion concerning landscaping and providing for a courtyard that has benches and landscaping for people visiting to meet in a calming/stress-free atmosphere as a way to soften the building.

Kate Frey, Kate Frey Landscaping Design:
- Has designed a healing garden on the north end of the building next to the ‘OB’ wing that will have benches and landscaping features.
• This is just the beginning of other similar projects to soften buildings of the UVMC.

Mitchell L. Miller:
• HBE Corporation would be amenable to landscaping and providing other amenities in the area where the underground tanks are located.
• An enclosed courtyard and/or landscaped visual area is planned for the new addition.

DRB building design and landscaping comments:
• When considering buildings for hospitals, OSHPD should think about not only what they need to accomplish in the way of function, but rather how the building looks and feels to the community keeping in mind the application of landscaping, methods to conserve energy, and how to soften the appearance in order to become a welcoming environment for the good of patients, families and visitors.
• There is really no excuse, but to design a building that has a positive effect on people and the environment.
• Hospitals are supposed to be a place where people heal and get better whereby the design help shapes the attitude and this can be done in very subtle ways without change to the overall structure of the building.

UNFINISHED BUSINESS
Discussion of this matter was deferred to next meeting.

9. MATTERS FROM THE BOARD: None

10. MATTERS FROM STAFF:
The City Council on June 15, 2011 will consider DRB Howie Hawkes’ application to serve on the DRB.
Staff asked the Board to think about a date and time once a month when the Board can meet such that a quorum is guaranteed and added there will be times when the Board may need to meet more than once a month to discuss matters of urgency.

11. SET NEXT MEETING/ADJOURNMENT: The next meeting will be June 15, 2011 at 2:30 p.m. The meeting adjourned at 5:06 p.m.

Cathy Elawadly, Recording Secretary