ACKNOWLEDGEMENTS

Community Advisory Committee (CAC)

Jim Bjerke, Medical Office Plaza Representative
Hugh Conroy, Sunnyland Neighborhood Association
Barney Goltz, Cornwall Park Neighborhood Association
John McGarrity, Cornwall Park Neighborhood Association
Patrick McKee, Sunnyland Neighborhood Association
Tonja Myers, St. Francis Extended Health Care
Jeanie Schneider, Northwest Medical Center
Jim Stevens, Community member

City of Bellingham

Chris Comeau
Brian Smart, Project Liaison
Clark Williams

Washington State Department of Transportation

Tim Hostetler

St. Joseph Hospital Administration

Nancy Bitting, Chief Executive Officer
Jack Haupt, Vice President Facilities
Nicci Noteboom, Public Relations

Consultant Team

Adelstein, Sharpe & Serka
   Phil Serka
Robert Bernstein, P.E. Traffic Consultant
Blumen Consulting Group
   Mike Blumen
   Rich Schipanski
David Evans Associates
   Michael DiSpignio

NBBJ
   Kim Selby
   Lynne Shira
   Liz Birkholz
Sue Sharpe, Project Manager, Sue Sharpe Consulting
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I. INTRODUCTION

Founded in 1891, St. Joseph Hospital (SJH) is owned and operated by PeaceHealth as a non-profit, voluntary, private institution and is the second largest employer in Whatcom county. The hospital operates 253 beds on two campuses (Main Campus and South Campus) with a level II trauma center. The South Campus, which is adjacent to the Sehome Neighborhood, houses behavioral health services and rehabilitation services. The Main Campus is devoted to acute care and supporting medical services and is classified as Area 7 in the Cornwall Park Neighborhood Plan. This document focuses exclusively on the Main Campus.

The City of Bellingham requires that large campus type public or quasi-public uses on sites of 50-acres or more be developed under an approved IMP. The first IMP for the SJH Main Medical Campus (Area 7 in the Cornwall Park Neighborhood Plan) was approved in 1983. The comprehensive plan described the buildings and other facilities required to meet projections for long-term health care needs of the SJH service area. The updated IMP has been prepared in order to anticipate and serve future needs.

The above recommendations recognize that Whatcom County is experiencing continued population growth with an expected population increase of approximately 48 percent between 2000 and 2025. Much of that growth will be due to the increasing percentage of the senior population. Therefore thoughtful and planned development at the Main Campus is vital to meeting the future health care needs of the region.

A. St. Joseph Hospital Pre Planning for IMP

The 2003 hospital Regional Planning process concluded the following:

- That the hospital should provide services to meet future health care needs on multiple campuses with the possibility of adding additional sites throughout the county in partnership with other health care partners. This strategy was seen as the most effective way to address future community health care needs and support operational efficiencies.

- That development of the Main Campus should focus on acute episodic care, high technology procedural services. Consolidating the high technology services on the campus supports the transition of the Main Campus to a regional medical center. The Main Campus plan should also include improved public access and internal campus circulation and reorientation of the campus entrance.

- That future development on the South Campus should focus on restorative, rehabilitative and preventive services to complement the Main Campus services.

The above recommendations recognize that Whatcom County is experiencing continued population growth with an expected population increase of approximately 48 percent between 2000 and 2025. Much of that growth will be due to the increasing percentage of the senior population. Therefore thoughtful and planned development at the Main Campus is vital to meeting the future health care needs of the region.
B. Formation of the IMP Community Advisory Committee and Solicitation of Formal Public Input

To assure community input and advice throughout the project the hospital formed the Community Advisory Committee (CAC) in 2005, whose participants are listed in the Acknowledgements section of this document. The CAC includes representatives of other Area 7 landowners and/or tenants, Cornwall Park and Sunnyside neighborhoods, City of Bellingham staff and members of the community at large, who met monthly over the last year to advise the Hospital planning team on the development of the IMP and to assist in the planning for a series of three Public Open Houses.

Three Public Open Houses (September 22nd and December 15th 2005 and April 25th 2006) were conducted at key junctures in the IMP development and provided opportunities for the CAC to inform the community and solicit feedback and input into the process. The community was asked to review and comment on development plans, area transportation issues and environmental concerns.

Institutional Zone property owners and residents within 1000 feet (as opposed to the legally required 500 ft.) of the zone boundary were invited to each event.

Open House #1 held September 22, 2005 included a presentation of the St. Joseph Hospital Regional Institutional Plan, a review of the City of Bellingham Institutional Master Plan process for Cornwall Park Neighborhood Area 7 and highlights of the Transportation Analysis being conducted as part of the plan’s development. Those in attendance were asked to complete feedback forms identifying issues and concerns that they would like to see addressed as part of the transportation analysis and planning process.

At Open House #2 (December 15, 2005) preliminary concepts for access solutions to the campus under consideration as part of the City of Bellingham’s regional traffic plan were presented as well as the scope for the IMP’s proposed Expanded Environmental Checklist. Attendees were asked to provide feedback on the access concepts and on the scope for the environmental checklist.

On April 25, 2006 the third and final open house was held to present the initial draft of the IMP including all of the required elements and the preliminary findings of the Expanded Environmental Checklist. There was an opportunity for additional questions and input before the final IMP was prepared for City of Bellingham submission.

For copies of the Open House Agendas and Summary Notes please see Appendix A.
II. OVERVIEW OF AREA 7 INSTITUTIONAL MASTER PLAN

Area 7 of the Cornwall Park Neighborhood plan is a 74.5-acre institutional zone (exclusive of public rights-of-way) owned by multiple landowners, including St. Joseph Hospital which owns approximately eighty per cent of the designated area. Area 7 has been defined as an Institutional Zone by the City. An Institutional Master Plan is required to guide future site, building and infrastructure development.

A. Scope of the Institutional Master Plan

In accordance with the requirements listed in the City of Bellingham Municipal Code 20.40.050, the IMP defines the appropriate land uses; identifies planned circulation and utility improvements; and sets development standards for building heights, setbacks, landscape, parking and signage for Area 7. The Phased Development Projects identified in this IMP are expected to be achieved in a number of phases over an approximate twenty year time period.

The purpose of the IMP is to outline a planned development process for the Institutional Zone that will guide the review and approval of specific building project permit applications over the next twenty years (through 2025). It lays out the intent of the property owners to develop the Institutional Zone in a coordinated and phased approach anticipating infrastructure needs such as traffic access and circulation, utilities, open space requirements and environmental implications. Once approved it provides a general framework for future development but each proposed project will require its own permitting process which will address the specific requirements and mitigations for the building project being proposed at the time.
III. ELEMENTS

Figure 1 on page 9 illustrates the twenty-one facilities and several vacant parcels that exist within the Institutional Zone as of 2006. The Existing Facilities are here defined in terms of their land area (acres), building gross square footage (GSF) and number of off-street parking stalls.

<table>
<thead>
<tr>
<th>Existing Facilities</th>
<th>Land Acreage</th>
<th>Building GSF</th>
<th>Parking Stalls</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. St. Joseph Hospital campus</td>
<td>42.4</td>
<td>585,800</td>
<td>868</td>
</tr>
<tr>
<td>2. Medical Office Plaza</td>
<td>3.4</td>
<td>65,100</td>
<td>266</td>
</tr>
<tr>
<td>3. Willows Retirement Home</td>
<td>2.9</td>
<td>98,600</td>
<td>88</td>
</tr>
<tr>
<td>4. Medical Arts Building</td>
<td>2.7</td>
<td>41,200</td>
<td>15</td>
</tr>
<tr>
<td>5. St. Francis Extended Health Care</td>
<td>4.5</td>
<td>38,800</td>
<td>153</td>
</tr>
<tr>
<td>6. Community Cancer Center</td>
<td>0.7</td>
<td>8,500</td>
<td>12</td>
</tr>
<tr>
<td>7. St. Luke’s Health Education Center</td>
<td>6.4</td>
<td>37,600</td>
<td>195</td>
</tr>
<tr>
<td>8. Parkway Dental Clinic</td>
<td>2.3</td>
<td>12,900</td>
<td>58</td>
</tr>
<tr>
<td>9. Dental Clinic</td>
<td>0.8</td>
<td>7,200</td>
<td>44</td>
</tr>
<tr>
<td>[Five vacant parcels]</td>
<td>1.3</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>10. Medical Clinic</td>
<td>0.3</td>
<td>3,400</td>
<td>17</td>
</tr>
<tr>
<td>11. Squalicum Medical Office Building</td>
<td>0.4</td>
<td>4,900</td>
<td>20</td>
</tr>
<tr>
<td>12. Medical Clinic</td>
<td>0.4</td>
<td>3,400</td>
<td>17</td>
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<tr>
<td>13. Northwest Medical Center Parking</td>
<td>0.8</td>
<td>0</td>
<td>87</td>
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<tr>
<td>14. Bellingham Dental Health Center, Northwest Surgical Association, Vascular Lab &amp; Vein Center</td>
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<td>11,000</td>
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<td>15. Bellingham Foot &amp; Ankle, Back &amp; Neck Clinics</td>
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<td>16. 3130 Ellis Outpatient Clinic</td>
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<td>8,500</td>
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<td>17. Bellingham Day Surgery</td>
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<tr>
<td>18. Wynn Building</td>
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<td>19. Parkway Medical</td>
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<td>41</td>
</tr>
<tr>
<td>20. Mt. Baker Imaging</td>
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<td>20,000</td>
<td>47</td>
</tr>
<tr>
<td>21. Northwest Medical Center</td>
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<td>96</td>
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<tr>
<td>22. Bellingham Childcare &amp; Learning Center</td>
<td>2.0</td>
<td>8,200</td>
<td>13</td>
</tr>
</tbody>
</table>

Total: 74.5 1,055,600 2,275
A. Land Use

The Institutional Zone is subdivided into three primary zones as illustrated in Figure 2 on page 11. The general purpose of each zone is outlined below and further detailed in the Standards Section.

1. Zone 1: Medical Support – Purpose

Zone 1 consists of Medical Support uses south of Squalicum Parkway. This zone benefits from immediate proximity to the hospital while minimizing impact on the adjacent residential neighbors.

2. Zone 2: Hospital/Medical – Purpose

The developed area of the St. Joseph Hospital campus comprises Zone 2, most of which lies more than 200’ from adjacent residential areas to the south. The primary health care services associated with the hospital are located in this zone, including acute care, in-patient and long-term care clinics, outpatient diagnostic and treatment services as well as medical support uses.

3. Zone 3: Open Space – Purpose

The Open Space Zone is to be reserved for natural area between the hospital campus and Bug Lake. A perpetual easement was granted by St. Joseph Hospital to the City of Bellingham in 2002 to permit conservation, public access and enhancement of the open space. The easement grants the City the rights to preserve, enhance and manage vegetation, water and fishery resources.

Land uses surrounding the Institutional Master Plan area are primarily residential, public or industrial as shown in Figure 3 on page 12. “Sunset Square” and other commercial activities are located east of the site and Interstate-5. A separate and distinct “institutional” zone has been designated to the northwest of Area 7 for the purposes of multi-family residential development. This zone, Area 4 of the Cornwall Park Neighborhood Plan, is not included within the scope of this Institutional Master Plan.

B. Vehicular Circulation

Results of an analysis of the projected traffic from the projects described herein determined that the existing circulation system was sufficient to handle increased traffic generated by the development of St. Joseph Hospital through 2025. (See Section F for description of Phased Development projects.) Each project in the phased development schedule will require a transportation concurrency evaluation to determine if arterial street capacity is available to accommodate traffic impacts associated with the specific project at the time.

However, in order to improve campus circulation, St. Joseph Hospital will be constructing significant improvements to the Campus’ internal circulation system as part of the first phase of Hospital expansion. The circulation improvements will address the following: provide clear, direct access between the public street system [Squalicum Parkway] and all Campus parking areas and pick-up/drop-off locations; reduce the need to use public streets for internal hospital campus circulation; reduce traffic congestion and confusion on and adjacent to the Campus; and promote more efficient, less disruptive use of the public street system. The Campus internal circulation element of the IMP includes improved facilities for general vehicular traffic, emergency vehicles and transit, as well as pedestri-
Figure 2. Land Use Zones within the IMP Area
Figure 3. Land Use Zones Adjacent to IMP Area
The internal circulation road will be built to provide clear vehicular connections between all Campus locations. Conceptual plans are illustrated in Figure 4 below. The internal circulation road will be a private street and will include one travel lane in each direction, turn lanes as necessary, striped bicycle lanes and sidewalks. The final road alignment and cross-section, specific side road and driveway connection locations, traffic control, crosswalk location and design, sidewalks and other roadway features will be determined when the road is designed.

The internal circulation road will connect to Squalicum Parkway at three points: (1) at the existing northwest driveway across from the Bellingham Childcare & Learning Center, (2) at the existing southeast driveway adjacent to the St. Francis Convalescent Home and (3) at a new intersection west of the existing main parking lot driveway. (The proposed new intersection with Squalicum Parkway does not include vehicular access to Coolidge Drive.) Construction of the internal circulation road may entail minor modifications to existing entry driveways off of Squalicum Parkway. Any proposed modifications involving public rights-of-way would be included in development plans and subject to approval by the City’s Public Works Department.

The existing West entry and drop-off area will be maintained with access from Squalicum Parkway via the existing driveway (which also provides secondary ambulance access). A new East entry and drop-off area will be constructed as part of Hospital expansion projects to the east. The new East entry and drop-off area will be accessed directly to/from the internal circulation road.

The internal circulation road will be located to provide maximum flexibility for Hospital development. In addition, planning of the internal circulation road (for vehicles and bikes) and planning of pedestrian routes will be coordinated to minimize the number of vehicle and pedestrian intersections and maximize safety where roadways and pedes-

Figure 4. Conceptual Section of the Internal Circulation Road
2. Ambulance

Current emergency vehicle access to the Hospital will be retained. The primary ambulance entry is located at Ellis Street and Squalicum Parkway with secondary ambulance access at the existing driveway to the west. Short-term surface parking stalls for direct patient access to the Emergency Department will be retained.

As illustrated in Figure 5 on page 15, a potential emergency/transit-only lane will be considered. Patients arriving/departing via the helipad, currently located on the ground, west of the existing parking structure, are transported to the helipad by ambulance. The emergency/transit-only lane would provide a direct ambulance connection to expedite this process.

3. Transit

Transit service to the Institutional Master Plan area is provided by Whatcom Transit Authority (WTA). WTA provides fixed-route and demand-responsive service, with stops on Squalicum Parkway and on-Campus at the main Hospital building, St. Francis and the Willows. Transit buses and paratransit vehicles would use the internal circulation road to provide service more efficiently and conveniently than is possible with the existing circulation system. Design of the internal circulation road will be coordinated with WTA staff to identify and incorporate transit-supportive features and facilities (bus stops, layover space, etc.).

4. Parking

St. Joseph Hospital will continue to provide parking in a combination of surface lots and parking structures/decks, both stand alone and incorporated into the Hospital building. Potential locations for new parking structures are illustrated in Figure 5 on page 15. At least two, possibly three new structures are anticipated in order to meet the parking demand for the Hospital campus through 2025. (See Subsection F for further description of planned parking structures.)

Existing surface parking areas will be reconfigured as necessary to accommodate the internal circulation road alignment. The completion of the IMP projects will limit surface parking areas to the existing (and/or reconfigured) lots to the southeast, adjacent to St. Francis and at the western end of the campus.

Structured parking will be provided in stand-alone structures and incorporated into the Hospital building complex. Garages will be accessed from the internal circulation road and/or Squalicum Parkway. Pedestrian connection from the stand-alone garages to the Hospital will be provided via sidewalks.

C. Pedestrian/Bicycle Connectivity

Pedestrian and bicycle amenities will be built into the Campus circulation improvements described above. In addition, sidewalks on Squalicum Parkway are not continuous and some improvements are necessary in order to create a safe walking environment along Squalicum Parkway within the IMP area. Figure 6 on page 16 illustrates the conceptual plans for pedestrian and bicycle improvements. The following overview describes the pedestrian and bicycle amenities planned for Campus development.
Figure 5. Vehicular Circulation
Figure 6. Pedestrian/Bicycle Connectivity

Existing Road
Proposed Road
Pedestrians
Bicycles
1. Pedestrian Amenities

Design and construction of the internal circulation road will include sidewalks to promote easy and safe pedestrian movement around the Campus, particularly to/from the hospital to parking areas. Crossing opportunities will be carefully located and designed to concentrate crosswalk locations in key locations to promote safe walking and vehicular conditions along the internal circulation road. Design features such as raised crosswalks, reflectors and/or signage will be considered to maximize the safety and visibility of pedestrians.

Landscaped areas around Campus buildings, entry points and transit stops will provide passive recreation opportunities. Benches and street furniture will be included to foster a comfortable walking environment.

Off-campus pedestrian connectivity will be promoted by adding limited amenities on or along Squalicum Parkway. Existing sidewalks along the southbound side of the Parkway will be extended to provide a continuous setback sidewalk between Ellis Street and the trailhead at Coolidge Drive. This connection shall be installed by the Hospital prior to completion of the First Phase of Hospital development.

There shall be no vehicular access between Coolidge Drive and Squalicum Parkway. Between Coolidge Drive and the northern entry for St. Joseph Hospital (within the IMP boundaries), the street standard can be reduced to curb/gutter, a five foot bike lane and 11 foot travel lane (as shown in ST-132). This standard will be continued on the eastern side to the end of the IMP boundary point. On the western side abutting the Daycare, the frontage shall be improved with curb/gutter, five foot bike lane and 11 foot travel lane. An enhanced pedestrian crossing will be required at this location.

2. Bicycle Amenities

Design and construction of the internal circulation road will include designated bicycle lanes. Squalicum Parkway shall be improved to secondary arterial standards and be constructed in the following manner:

There shall be no vehicular access between Coolidge Drive and Squalicum Parkway. Between Coolidge Drive and the northern entry for St. Joseph Hospital (within the IMP boundaries), the street standard can be reduced to curb/gutter, a five foot bike lane and 11 foot travel lane (as shown in ST-132). This standard will be continued on the eastern side of the end of the IMP boundary point. On the western side abutting the Daycare, the frontage shall be improved with curb/gutter, sidewalk, five foot bike lane and 11 foot travel lane. An enhanced pedestrian crossing will be required at this location.

These improvements shall be installed by the hospital prior to completion of the First Phase of hospital development.

Bicycle storage areas are currently located throughout the Campus near multiple building entries. As the Hospital expands, new or relocated areas will be provided near new entries to promote easy access for cyclists. A central bicycle storage area in the stand-alone parking structures should also be considered to provide staff covered and secure bicycle parking options.
D. Helicopter Circulation

Emergency access to/from the hospital via helicopter will continue according to existing approvals. Should relocation of the existing helipad prove necessary and/or desirable to improve Hospital operations, the proposed site would be within the Hospital/Medical Zone 2. Any change of the existing location may require environmental analysis and planned development approval from the City of Bellingham.

E. Utilities

The planned development outlined in Subsection F, Phased Development Schedule, will require campus expansion of the existing utilities to service the proposed buildings. The following is a brief description of the the impacts that IMP projects proposed for St. Joseph Hospital have on major utility systems (see Figure 7 on page 18 and Figure 9 on page 20). Each project will require City of Bellingham planned development approval which includes a “Certificate of Concurrency for Transportation Facilities”.

1. Water

The existing Hospital campus has an extensive water system that combines both potable water and fire protection water supply in a looped system throughout the site. The looped water mains enable both potable and fire protection water delivery to the buildings through alternate routes, adding redundancy and increased flow efficiency to the system. Proposed facilities outlined in the IMP will utilize the existing infrastructure with minimal additions of new water mains to the existing Campus system.

Area 7, the IMP Area, is at a higher elevation with respect to the City’s water pressure zone that supplies the Hospital and other IMP buildings. Water pressure to the Campus is at the low end of the acceptable range. Buildings over two to three stories in height typically require booster pumps to meet the water pressure demands of the upper floors. The larger, existing Hospital buildings include sprinkler systems with booster pumps due to this circumstance. Future buildings and/or expansion of existing structures should continue this practice.

2. Sanitary Sewer

Sanitary sewer discharges from the Campus are routed south to the City-owned sewer main that runs along Squalicum Parkway. The main size varies from eight-inch diameter at the east end and increases in diameter to 12 inches at the west end of the zone. The present main appears to be adequately sized to convey the existing discharges and the additional flows associated with IMP improvements.

3. Stormwater

The City of Bellingham and the Washington State Department of Ecology regulate stormwater runoff associated with new development. These regulations address both water quality and quantity stormwater discharges from the developed areas with the main focus on impervious area. Stormwater treatment and detention issues on Campus will continue to be addressed individually for each new project.

The regulatory agencies have different requirements for re-development and new projects. Building expansions over existing impervious areas, such
Figure 7. Utility Plan

LEGEND
Water
Sanitary Sewer
Stormwater
Natural Gas

Existing line measurements are shown here; potential lines will be sized during design.
as asphalt parking areas or buildings to be demolished, will need to be reviewed on a case by case basis based on the agency regulations in place at the time the improvements will be made.

New structures to be constructed over existing vegetated or pervious areas will require more extensive stormwater improvements. The proposed parking structures will require their own water quality and detention facilities, to be sized according to the specifics of the final building design and locational topographic conditions.

4. Natural Gas

Natural gas service is provided to the site by Cascade Natural Gas. Main lines, at 60 psi pressure, are located in Squalicum Parkway and Ellis Street. The campus buildings to the east of Ellis Street are serviced by a two inch diameter line that crosses under I-5 and continues west along Squalicum Parkway to the Medical Arts Building. The hospital complex is serviced from the north and the south. A two inch diameter main enters the site from the south on Ellis Street. The main crosses Squalicum Parkway, continues north about 150', and stops just east of Building #21 Northwest Medical Center. (The main used to continue north but that portion was retired with the last hospital expansion.)

A four inch diameter main enters the site from the north on Squalicum Parkway, across from the Bellingham Childcare & Learning Center. The four inch main continues east approximately 250 feet where it is reduced to two inch diameter. The two inch line continues east along the service road north of the main buildings and turns south along the east side of the hospital.

Based on discussions with Cascade personnel, there is sufficient capacity in the existing system to handle the anticipated future growth. Meter sizes and their location on future buildings will need to be addressed during each building’s final design and permit review. The Cascade system, which ends at each meter, does not have an automatic shut off valve that will close in the event of a catastrophic failure (such as an earthquake). The hospital can get an earthquake valve, located behind the Cascade meter, if this is a concern.

5. Electrical

The proposed development is consistent with Puget Sound Energy’s system (see Figure 8 on page 19). Puget Sound Energy has plans to continually expand its substation system and the IMP proposed plan fits with its proposed improvements. The hospital is primarily fed through the Plymouth substation, located south of the hospital, which also supplies Bellingham Cold Storage. The James Street substation is scheduled for expansion around the same time as the East Tower Expansion in 2008 which will help take some of the load off of the Plymouth Station. Squalicum Parkway is fed through underground power lines.

F. Phased Development Schedule

Several development projects are anticipated to continue to meet the regional healthcare needs. The following project descriptions provide an approximate chronological overview of the significant major development (building and/or circulation) projects conceptually identified for St. Joseph Hospital. In addition, development of the vacant parcels in Zone 1 is likely and smaller,
unforeseen renovation projects may prove necessary to respond to Hospital needs. Figure 9 on page 22 illustrates the anticipated expansion of the Hospital Campus.

1. **East Tower Addition (First Phase)**

   A two-story vertical expansion of the East Tower Building is planned, with each floor totaling approximately 25,000 square feet (SF). Construction may start as early as January 2008 although only one floor of the 50,000 SF addition would be finished initially (i.e., interior improvements) to accommodate between 36 and 40 patient beds. The second floor of the Addition would be finished in the future.

2. **Internal Circulation System Improvements**

   A new internal road will be built as part of the first phase of Hospital expansion to provide clear vehicular connections between all Campus locations. See Section B. for further discussion.

3. **New Parking Structure**

   A second stand alone parking structure is planned and would be accessible per the Americans with Disabilities Act (ADA). Construction is expected to begin in 2009.

4. **Finish Shelled Floor of East Tower**

   The shelled (i.e., unimproved) floor of the East Tower would be completed to accommodate between 36 and 40 patient beds. Construction may start as early as 2014.

5. **New Medical Office Building**

   A new five-story Medical Office Building would be built to allow for future demolition of the Medical Office Plaza Building. The building is anticipated as an 81,000 SF addition to the hospital, adjacent to the east side of the “East Tower” and would provide internal connections to the main hospital building. Parking and pedestrian entries to the East Tower would either be relocated or incorporated into the new Medical Office Building. An additional 200 parking stalls would be provided in below grade parking under the new Medical Office Building, in approximately three to four floors. Construction may start as early as January 2015.

6. **New East Entry Building**

   As hospital growth continues east, a new East Entry Building will be added. Approximately 50,000 SF of administrative, lobby, hospital office and registration uses would be accommodated in three floors. This expansion would provide the new east entry to the hospital and extend the building’s major circulation systems. Construction may start as early as January 2015.

7. **Central Plant Expansion**

   The utility system will be extended and the Central Plant expanded to accommodate the larger hospital facility and its future growth. Plans identify an expansion of 10,000 SF with construction starting in 2017.

8. **Demolish Medical Office Plaza Building**

   Medical offices from the Medical Office Plaza Building would be relocated to the New Medical Office Building upon completion. Once vacated, the Medical Office Plaza Building would be demolished, which may occur as early as 2018 to allow for construction of the New Northeast Tower Building.
9. **New Northeast Tower Building**

The Northeast Tower is anticipated to be approximately 78,000 SF of “base” structure, housing support and/or diagnostic and treatment functions in two floors plus an additional three bed floors. The total project encompasses approximately 150,000 SF in five stories. Each bed floor is planned to provide between 34 and 38 beds; a total of 108 beds would be included in the Northeast Tower Building. Construction of the new Northeast Tower Building may occur as early as January 2019.

10. **New Central Tower Building**

The Central Tower is anticipated to be approximately 78,000 SF of “base” structure, housing support and/or diagnostic and treatment functions in two floors plus an additional three bed floors. The total project encompasses approximately 150,000 SF in five stories. Each bed floor is planned to provide between 34 and 38 beds; a total of 108 beds would be included in the Central Tower Building. Construction of the new Central Tower Building may occur as early as January 2019.

11. **New Parking Structure**

A third stand alone parking structure is optional and would be ADA accessible. If needed, construction may begin as early as January 2021.

12. **Additions/Modifications of Existing Building**

The interior remodel of existing buildings or the addition of up to ten percent (10%) of overall existing square footage to an existing building do not require planned development approval but said construction shall be required to comply with all other applicable building and fire code requirements.

G. **Open Space**

The majority of the Institutional Zone is currently developed in built facilities and/or associated parking however open space for active or passive use is provided immediately around most existing facilities, in the eastern portions of Zone 2 and to the north, in Zone 3. The open space preserved in Zone 3 comprises the majority of the Hospital’s required open space provision. St. Joseph Hospital granted a perpetual easement (AF#2020400010) to the City of Bellingham allowing for conservation, enhancement and public access to Zone 3. Figure 10 on page 25 illustrates the open space areas within the IMP area.

1. **Open Space Requirements**

At least 20% of the Institutional Master Plan area must be maintained as open space. The open space areas shall include, but not be limited to, land left in the natural state, landscaping, landscaping associated with streets and sidewalks, gardens, parks and outdoor exercise facilities. All non-hospital applicants shall be required to set aside 20% on-site as part of the required development plans unless the City administratively approves a lesser amount in accordance with their adopted policies. St. Joseph Hospital’s open space requirements for further development are satisfied by the open space preserved in Area 3.
Figure 10. Open Space Plan
IV. STANDARDS

A. Permitted Uses

Area 7 is easily subdivided into three primary zones of (existing) land use and intent, as illustrated previously in Figure 2 on page 11. Zone 1 consists of Medical Support uses that benefit from immediate proximity to the Hospital while having minimal impact on the adjacent residential neighbors. The Hospital campus and related medical uses comprise Zone 2, most of which lies more than 200’ from adjacent residential areas. Zone 3 consists of natural open space area between the Campus and Bug Lake that was made open to the public via a perpetual easement granted to the City of Bellingham in 2002.

The uses specified are intended to encompass health care needs within the Bellingham and greater Whatcom County communities and be regarded as flexible in their interpretation to adapt to new medical/dental technologies and practices as they are developed. Ancillary uses such as health care related retail, educational facilities and associated parking are intended to support the primary, medical/dental uses of the Institutional Zone. Permitted Uses within each zone are defined in the following text.

1. Zone 1: Medical Support – Principal Uses
   a. Medical clinics, offices
   b. Dental clinics, offices
   c. Health care related retail, including food and beverage service as an ancillary use
   d. Any permitted and/or conditional uses allowed in a Residential Single Zone.

2. Zone 2: Hospital/Medical – Principal Uses
   a. Hospital and all primary health care (acute in-patient, long-term clients, outpatient diagnostic and treatment services)
   b. Medical and dental clinics, offices
   c. Health care related retail
   d. Day care facilities
   e. Health care related residential uses
   f. Service care, day treatment and child placing agencies
   g. Public utilities, exclusive of storage yards
   h. Public buildings and uses
   i. Food and beverage service as an ancillary use
   j. Private clubs and lodges
   k. Neighborhood clubs and activity centers
   l. Branch post office and banking facilities (excluding drive through service) within medical care facilities
   m. Personal service facilities within medical care facilities
   n. Laundry and dry cleaning establishments within medical care facilities
   o. Florist shops within medical care facilities
   p. Health, fitness and recreational clubs
   q. Educational/Seminar facilities
   r. Parking facilities
   s. Helicopter pad and accessory uses
   t. Wireless communication facilities
   u. All other uses allowed in the Residential Single Zone.
3. Zone 3: Open Space – Principal
   a. Natural and/or landscaped open space.

   Similar uses as listed in Zones 1 through Zones 3 may be permitted upon Planning Director approval.

B. Building Height Limitations
   1. No structure shall exceed 35’ under definition (1) when within 200’ of the site plan boundary, which lies adjacent to a Residential Single general use type.
   2. Except for the limitation above, there is no expressed general height standard in the Institutional Zone.

C. Site Coverage Limitation
   1. There is an 80% coverage limitation for planned projects within the Institutional Zone.

D. Open Space Requirements
   At least 20% of the Institutional Master Plan area must be maintained as open space. The open space areas shall include, but not be limited to, land left in the natural state, landscaping, landscaping associated with streets and sidewalks, gardens, parks and outdoor exercise facilities. All applicants shall be required to set aside 20% on-site as part of the required development plans unless the City administratively approves a lesser amount in accordance with their adopted policies.

E. Setback Requirements
   1. Front Yard Setback
      a. None required unless vision clearance is necessary for traffic safety.
   2. Side Yard Setback
      a. A side yard setback of 10’ is required for sites abutting a flanking street. The setback is to be measured from the adjacent right-of-way to the structure’s foundation.
   b. Except for the condition above, a side yard setback of 5’ from the property line to the foundation of the structure is required.

3. Rear Yard Setback
   a. A rear yard setback of 25’ is required for properties within Zone 1. The setback is to be measured from the structure’s foundation to the adjacent property line. Eaves may penetrate over the yard area, however no projection may extend more than 5’ into the yard.
   b. Except for the condition above, a rear yard setback of 10’ is required.

4. Internal Setback
   a. The internal setback between buildings located within Zone 2 may be less than 5’ upon administrative approval where the two properties are in common ownership. A setback less than 5’ may require structural modifications in order to achieve compliance with Uniform Fire and Building Code requirements.

5. Wetland Buffer
   a. Wetland and Shoreline buffers and building setbacks will be in accordance with City of Bellingham regulations and determined for each new project.

F. Landscape Requirements
      a. This section provides the landscaping requirements for all uses permitted within the Institutional zone district.
      b. Prior to issuance of a building permit, a scaled landscape site plan shall be submitted and approved by the Planning Department consistent with the provisions herein. Said plan shall specify species name, size and location.
      c. Landscaping pursuant to the approved site plan shall either be installed or bonded for (in an amount no less than 150% of cost of material and installation) prior to issuance of a certificate of occupancy or, if no certificate is required, prior to final inspection approval.
d. A maintenance contract with a reputable landscape firm shall be required. The contract shall also be for 2 years and be filed with the City Clerk.

e. Those existing trees that will be saved, if they meet the minimum specification herein specified, shall count toward meeting the requirements herein, provided they are of an acceptable species.

2. Requirements

a. Street Trees

One street tree shall be required for every 25 feet of street frontage abutting the property. Said trees shall be installed adjacent to the right-of-way within the property lines or within the right-of-way subject to the approval of the Public Works and Parks Department.

b. Freeway Trees

One tree for every 25 feet of freeway frontage shall be installed along that frontage. This provision applies only where trees do not already exist on property adjacent to the freeway. It also applies only adjacent to new development which is occurring adjacent to the freeway.

c. Parking

(i) For every 5 surface parking spaces, 1 tree shall be planted around the facility perimeter. These trees may be grouped or spread linearly.

(ii) Parking space separation areas as required shall be landscaped.

(iii) Areas between the parking facility and adjacent property shall be landscaped if the adjacent property is of the same general use type. If the adjacent property is of a Residential General use type, said area shall be screened.

d. Yards

(i) Yards adjacent to Residential Single use areas shall be landscaped with a screen and a 6 foot high landscaped berm or fence, wall of trees, or a similarly effective buffer as approved by the Planning Director.

2. Standards

a. Street/Freeway Frontage Trees

(i) Species: Street or freeway frontage trees shall be of a species recommended in the Bellingham Street Tree Plan and approved by the Parks Department.

(ii) Size: Street or freeway frontage trees shall be no less than 10’ in height at time of installation with a minimum caliper size of 2 ½” measured 1’ above grade.

(iii) Spacing and Location: Street or freeway frontage trees shall be spaced and installed as recommended in the Bellingham Street Tree Plan subject to approval of Public Works and Parks Department.

b. Other Required Trees

(i) Species: Other required trees shall be native to the area or recognized as being easily adaptable to the climate.

(ii) Size: Other required trees shall be no less than 6’ in height at time of installation with a minimum caliper size of 1” measured 1’ above grade.

(iii) Spacing and Location: Other required trees may be installed where desired by applicant within the general constraints of this section.

G. Parking & Loading Requirements


b. Joint use parking may be permitted on a case-by-case basis by the Planning Director.
c. A minimum of one parking space and not less than one additional parking space for every 30 required spaces shall be sized and marked for the handicapped. (Subject to all City of Bellingham standards.)

2. Minimum Number of Parking Spaces Required

The following parking space requirements are minimum standards and apply to all future development projects subsequent to the adoption of the IMP and do not apply to previously approved projects. Current City parking space requirements shall be followed for any land uses not listed below.

- Hospitals: 1 per every 2 patient beds
- Medical Care Centers: 1 for every 4 beds
- Medical/Dental Offices, Associated Labs: 5 per 1,000 gross floor area
- Boarding House, Hotel: 1 for every 2 bedrooms
- General Business, Personal Service: 1 for every 250 assignable square feet of building area (ASF) open to the public
- Private Clubs: 1 for every 150 ASF of assembly area; 1 space for each 125 ASF of eating/drinking facilities
- Neighborhood Club, Activity Center: 1 for every 150 ASF

3. Number of Loading Berths Required

Any building intended to be used for retail, warehouse, freight or hospital uses shall be provided with off-street loading berths according to the following schedule:

- 1 berth for each building containing 10,000 to 25,000 ASF
- 2 berths for each building containing 25,000+ ASF

Buildings containing 20,000 to 50,000 ASF of other uses shall be provided with 1 off-street loading berth.

H. Street Standards

There shall be no vehicular access between Coolidge Drive and Squalicum Parkway. Between Coolidge Drive and the northern entry for St. Joseph Hospital (within the IMP boundaries), the street standard can be reduced to curb/gutter, a five foot bike lane and 11 foot travel lane (as shown in ST-132). This standard will be continued on the eastern side to the end of the IMP boundary point. On the western side abutting the Daycare, the frontage shall be improved with curb/gutter, five foot bike lane and 11 foot travel lane. An enhanced pedestrian crossing will be required at this location.

I. Signage Standards

1. All signage must be an integral coordinated part of a sign design plan for the entire complex.
2. Roof signs are prohibited.
3. No signs shall be visible from Interstate 5.
4. No lighted signs shall be directly visible from Residential Use areas.
5. No signs shall be located in vision clearance triangles.

J. Lighting Standards

Lighting plans must be included in all development applications involving major building and/or circulation improvements and will be approved on a project by project basis. Plans must include the following elements for consideration:

1. A photometric site plan, drawn to scale, showing proposed buildings and/or parking areas, mounting and pole height and including all proposed exterior lighting fixtures and footcandle spread.
2. Design specifications for all proposed lighting fixtures to include photometric data, cutoff fixtures, bulb wattage/type, and other descriptive information.

3. Outside parking lot lighting shall not be less than 0.5 footcandles per IES minimum lighting standards at the property line and shall be designed to minimize glare and spillover into adjacent properties.

4. Wall packs on buildings may be used at entrances to a building to light unsafe areas. Wall packs are not intended to draw attention to the building or provide general building or site lighting. Wall packs must be fully shielded to direct the light downward with maximum bulb wattage limited to 100 watts.

5. Building and aesthetic lighting must be shielded to prevent direct glare and/or light trespass in excess of 0.5 footcandles. The lighting must also be, as much as physically possible, containted to the site area.

K. Handicap Access

In addition to requirements in the Building Code and parking standards for handicapped access, development within the Institutional zone district shall meet the following standards:

1. There shall be paved ramps from parking areas to walkways, easily accessible to handicapped parking and constructed to accommodate wheelchairs.

2. Paths and walkways shall be constructed to widths and with materials which will accommodate the handicapped.

L. Modifications

Building requirements set forth in this plan, except for the 25 foot rear yard setback in Zone 1 (abutting the single family zone) and the 35 foot height limit when within 200 feet of a residential single zone, may be reduced by approval of the Planning Director upon a finding that there are valid reasons to reduce the standard and there is minimal harm to the public.

Several studies were conducted as part of the Expanded Environmental Checklist completed in review of this Institutional Master Plan in accordance with the State Environmental Policy Act.
VI. APPENDICES

Appendix A

Public Open House Agendas and Summaries

Appendix B


Attachments to Appendix B


D. Land Use Discussion, Blumen Consulting Group, 2006.


Cornwall Park Neighborhood
Area 7 Updated Institutional Master Plan
and
Expanded Environmental Checklist

July 7, 2006
APPENDIX A: PUBLIC OPEN HOUSE AGENDAS AND SUMMARIES
APPENDIX A: OPEN HOUSE
AGENDAS AND SUMMARY
NOTES
APPENDIX B: EXPANDED ENVIRONMENTAL CHECKLIST