

# **Final Environmental Impact Statement**

## **Children's Hospital of Buffalo**

### **Buffalo Niagara Medical Campus**

Lead Agency:

### **City of Buffalo Planning Board**

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*City of Buffalo Planning Board***1.0 INTRODUCTION****1.1 Purpose and Intent of FEIS**

This Final Environmental Impact Statement ("FEIS") has been prepared pursuant to the State Environmental Quality Review Act ("SEQRA"), Article 8 of the New York State Environmental Conservation Law and its implementing regulations (6 NYCRR Part 617) for Kaleida Health's proposed construction of a New Women and Children's Hospital of Buffalo ("New WCHOB") to be located at 818 Ellicott Street in the City of Buffalo ("Project"). This FEIS was prepared by the City of Buffalo Planning Board ("Planning Board") acting as Lead Agency pursuant to SEQRA. The purpose of this FEIS is to present revisions to the Draft Environmental Impact Statement ("DEIS"); to present substantive public and agency comments on the DEIS received during the public/agency comment period; and to present the Lead Agency's responses to those comments. Completion of the FEIS will allow the Planning Board to make its final determinations regarding the potential environmental impacts of the Project.

Section 2 of this FEIS presents a summary description of the Project and of the DEIS including the discussions of impacts, mitigations and alternatives. The general purpose of the DEIS was to:

- identify and evaluate the potential impacts that may result from developing the Project;
- to propose reasonable mitigation measures to reduce the effects of significant adverse impact; and
- to evaluate alternatives to the Project.

Section 2 will also describe whether substantial changes to the Projects have been introduced since the DEIS was accepted on January 31, 2012.

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Section 3 of this FEIS presents any changes to the original text and figures. These changes would include Project changes.

Section 4 is the summary of all comments received by the Lead Agency during the public comment period and the Planning Board responses.

**1.2 SEQR Review Process**

On October 11, 2011, the Project Sponsor, Kaleida Health (“Kaleida”), submitted a subdivision application and Full Environmental Assessment Form to the City of Buffalo Planning Board. The subdivision of the existing parcels on the block is the first action that will need to be approved for the construction of the Project. The Planning Board determined that the construction of Children’s Hospital had the potential for significant adverse environmental impacts and, serving as Lead Agency, required the Project Sponsor to prepare a Draft Environmental Impact Statement (“DEIS”). On November 22, 2011, the Planning Board accepted the Scope for the DEIS.

Kaleida Health prepared a DEIS and on January 11, 2012 submitted it to the City of Buffalo Planning Board for review for consistency with the DEIS Scope. The City of Buffalo approved the DEIS for public review and comments on January 31, 2012.

The public comment period began on February 15, 2012 and was open until March 23, 2012. A public hearing was subsequently held on February 28, 2012.

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*City of Buffalo Planning Board***2.0 PROJECT SUMMARY AS REVISED****2.1 Purpose and Need**

The current Women and Children's Hospital of Buffalo ("Current WCHOB") is located on Bryant Street in the City of Buffalo. The surrounding area is predominately residential with supporting neighborhood commercial uses. The Current WCHOB occupies a number of connected buildings of varying ages including structures from 1917 to 2005. There are also some offices located in residential structures surrounding the main building. The facility is also supported by parking lots located on West Utica Streets and a parking ramp with entrances on Bryant Street and Elmwood Avenue.

The Current WCHOB provides a valuable service to the Western New York Area. As a standalone hospital focusing on children, it provides for necessary care in an environment designed to be comfortable and non-threatening. Maintaining a separate building focused on the care of children is an important goal for Kaleida and the physicians at the Current WCHOB.

The age of the mechanical infrastructure and the layout, across multiple buildings that have been connected over time, make the Existing WCHOB difficult for visitors and doctors to use. There are multiple points of entry and some instances of confusing internal circulation. The layout also makes staff interaction difficult. Specifically, the *Women and Children's Hospital of Buffalo Advisory Council* and the *Women and Children's Hospital of Buffalo Physician Strategic Planning Committee* have endorsed construction of a new facility to allow them to better care for patients and recruit and retain generalists and specialist in pediatric care.

Additionally, the current facility is essentially land-locked. There are limited opportunities for additional expansion of the current campus. Any expansion would either not be physically connected to the main structure or it would further complicate the

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internal circulation of the facility. The age of the structures is also beginning to be of a concern. The need to maintain the facility to the highest modern standards would require significant upgrades to the hospital complex and associated mechanical infrastructure.

The location of a hospital facility in a residential neighborhood is also a concern. The interaction of a 24-hour facility that has constant noise and lighting is not consistent with a residential area. The hospital is accessed by helicopters, ambulances and people 24-hours a day. This activity occurs within 150 feet of residential homes.

The BNMC is currently home to many of the largest medical facilities in the City of Buffalo General Medical Center ("BGMC"), Roswell Park Cancer Institute, the Gates Vascular Institute ("GVI"), and numerous research institutions. The BNMC has been designed and programmed to be the physical center for medical care and research in the region. The physical location of these research facilities and centers for care has allowed for the BNMC to become one of the growth areas for economic development within the Buffalo region.

The consolidation of medical service and research facilities into the BNMC creates additional synergy in the research and biomedical service sector that is vital the economic growth of the City of Buffalo and Western New York.

The need for this project is to continue the long tradition of acute pediatric medical care for the region. This will occur by replacing an aging and physically inadequate facility with a new state of the art stand-alone Children's Hospital. The purpose of the Project is to provide the new facility with better access to the regional world class medical hub, the Buffalo Niagara Medical Campus.

*City of Buffalo Planning Board***2.2 Project Changes since DEIS**

There have been no substantive project changes to the building size or use since the publishing of the DEIS on January 31, 2012. However, two changes to the building connectivity have occurred since the original project was evaluated in the DEIS.

The first change related to building connectivity is the addition of a multi-level “link” structure between the Medical Office Building (“MOB”) and New WCHOB. The structure would be a full floor-plate connection of the two buildings over multiple floor levels which may house a portion of the MOB Ambulatory Service Care facility. This structure will begin on either the second or third floor above street level (depending on final architectural design) and extend vertically two or three floors.

Additionally, the project will include the addition of a service tunnel below Ellicott Street. This tunnel will be located below the depth of public utilities and will connect the New WCHOB to the mechanical and operational support services located within BGMC. A list of those shared services is presented in Section 2.4.

**2.3 Project Description**

Kaleida Health will construct and operate New WCHOB (referred to as the Children’s Hospital of Buffalo – “CHOB” in the DEIS) at 818 Ellicott Street, Buffalo, New York (Figure 1- Project Location). The building will be located on approximately 2.3 acres of the approximately 3.7 acre block surrounded by Ellicott, High, Main, and Goodrich Streets.

The area of the block that is not occupied by New WCHOB will be used for the Medical Office Building (“MOB”) previously proposed by Ciminelli Development. See Figure 2 Site Plan. The MOB was reviewed in the 2009 Buffalo Niagara Medical Campus – North End Developments Generic Environmental Impact Statement and subsequently reviewed

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in a Supplemental Generic Environmental Impact Statement in 2011. The two projects together will occupy the entire block bounded by Ellicott, High, Main, and Goodrich Streets.

Building Envelope

The building will be 10 to 11 stories with varying sized floor plates of up to 40,000 square feet for a total of up to 400,000 square feet. One floor below grade will be used to house mechanical support equipment and services.

Current studies for operational size indicate that a facility of approximately 365,000 square feet dedicated to hospital operations may be sufficient based on current population and population projections. The EIS has evaluated up to a 400,000 square foot facility to allow for of linking structures as well as unforeseen operational needs that may ultimately raise the building size above 365,000 square feet.

Access

The main entrance to New WCHOB will be either along Ellicott Street or on High Street, with an address of 818 Ellicott Street. To ease the flow of staff there will also be overhead pedestrian connections to BGMC across Ellicott Street, and to the MOB, The use of overhead connectors will facilitate interaction between BGMC, the MOB, and New WCHOB.

**2.4 Summary of Alternative Analysis**

Several alternatives were reviewed and were compared with their ability to meet the needs of the Project. The scenarios were: Proposed Project, No Build and Construction of a Smaller Facility.

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*City of Buffalo Planning Board*Proposed Project

The proposed Project will allow for the construction of a state-of-the-art stand-alone Children's Hospital that will be designed to meet the current and future physical needs of acute pediatric care. The current project will provide direct physical connection to other major acute care facilities at the BNMC. Designed to be approximately 11 stories tall, the new hospital will still be a major acute care facility with direct access to the GVI and BGMC as well as to other research institutes co-located within the GVI. Additionally, locating the New WCHOB adjacent to the GVI and BGMC will allow for shared mechanical and operational services currently located at the BGMC such as:

- Power plant, oxygen tank, and generators;
- IT center – BGMC;
- Clinical engineering repair;
- Central Equipment Sterilization;
- Medical waste storage;
- Patient food preparation;
- Mailroom; and
- Associated specialized shipping.

By sharing these services with BGMC, the New WCHOB will be able to function more efficiently and with reduced operational costs.

This will require the Current WCHOB to be vacated for future redevelopment. The period between hospital relocation and the redevelopment of the Current WCHOB may present an adverse impact to the immediate neighborhood.

While the potential for adverse impacts are not completely avoided, this alternative fully meets the needs and purpose of the Project and provides the most benefit to the region as a whole.

*City of Buffalo Planning Board*No Build

The No Build Alternative would mean that Kaleida would not build a new hospital facility. The operations would continue to be located at the current facilities at Bryant Street. The No Build Alternative would eliminate any adverse impacts associated with the construction of the new hospital or potential neighborhood impacts with vacating the complex.

This alternative would maintain a standalone pediatric acute care facility. However, the Current WCHOB would still be located in an outdated facility which is not adequate for the current and future needs of the community. Ultimately, the No Build scenario would put the future of the hospital at risk as it would be difficult to recruit and retain pediatric specialists and fail to sustain the state of the art medical care and equipment required for these types of facilities.

Relocating will remove the risk of potential impacts from vacating the hospital complex, but does address the incompatible use of a major medical facility in a residential neighborhood.

Therefore, the No Build Alternative would not meet the purpose and need of the Project Sponsor and therefore, is not the preferred alternative.

Construction of a Smaller Facility

The Current WCHOB facility is approximately 580,000 sq ft. The proposed facility would be approximately 365,000 sq ft, up to a maximum of 400,000 sq ft. Some of the facilities currently housed at the Current WCHOB will be relocated to the proposed Medical Office Building; this will decrease the required size of the New WCHOB.

Any further significant reduction of the size of the New WCHOB would require the relocation of services or reduction of treatment facilities necessary to provide

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quality care. Also, a reduction in the size of the New WCHOB would avoid few of the adverse impacts already associated its construction. A smaller facility would still increase traffic (particularly during construction,) noise, and introduce a new visual element to the area.

A smaller building would do little to further mitigate any adverse impacts, while negatively impacting the long-term ability of Kaleida to deliver quality healthcare focused on children. Therefore, the Construction of a Smaller Facility is not the preferred alternative.

## **2.5 Summary of Adverse Impacts and Mitigations**

### Land Use and Zoning

The construction of the New WCHOB within the BNMC is consistent with local land uses, zoning and local planning. This location of the New WCHOB is also consistent with the *UB 2020* plan, which proposes to locate its medical school into the BNMC to maximize its interaction with the major medical facilities in the region.

No adverse impacts are anticipated and therefore, no mitigation is required.

### Utilities

Water pumps will be required to service the upper floors of the New WCHOB to provide adequate water pressure for fire protection. The operation of the New WCHOB will increase the storm water and sanitary burden on combined sewers. Additional gas service may be needed to adequately meet the needs of the New WCHOB.

Kaleida will install water pumps to ensure adequate protection for the highest floors. To reduce runoff to the sanitary sewers, separate storm and sanitary sewer laterals will be

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used for the Project. Kaleida will ensure that there is adequate electric service to the site Project.

Visual and Aesthetic Resources

The New WCHOB will be visible from various locations along Main Street, some intersections in Allentown and from locations on the BNMC. However, the building will improve the visual environment by replacing a surface parking lot with a new structure.

No adverse impacts are anticipated and therefore, no mitigation is required.

Historical Archeological and Cultural Resources

The addition of the New WCHOB to the BNMC may be visible from the Allentown Historic District (a "National Register" District recently expanded to the western side of Main Street). It may also be visible from several National Register of Historic Places buildings including: Trico Building, Fosdick Masten Park high School as well as the M. Wile and Company Factory.

To mitigate potential impacts, the style and design of the New WCHOB will complement the modern design of the BNMC while maintaining the historic significance of the surrounding historic structures.

Noise

The New WCHOB will have a helipad on the roof and will bring additional ambulances to the area. This will introduce additional noise to the BNMC.

Kaleida will ensure that the flights to the New WCHOB use the same flight approach as the flights that land at BGMC to reduce impact to neighbors. Additionally, the number of

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flights to the two helipads, one at the New WCHOB and the existing helipad at the BGMC, will not exceed the permitted two flights per day allowed for the BGMC helipad.

Topography, geology and soil

The soil at the Project Site is characterized as urban fill, therefore, no impacts are anticipated from the construction. The soil will require shoring on all sides during excavation.

A portion of the Project site is known to have petroleum contamination from a former gas station on an adjoining parcel. This contamination will be addressed through the NYSDEC's Brownfield Cleanup and Spills Programs during the construction of the MOB and will not limit construction of the New WCHOB on this site.

To mitigate any potential impacts, best management practices will be implemented during construction to ensure proper regulation of storm water and contaminated materials. If any unknown contamination is encountered, the NYSDEC will be notified.

Socioeconomics

Although the Project is located in an area with an Environmental Justice ("EJ") population, no adverse impacts are anticipated to the EJ population.

No impacts are anticipated and therefore, no mitigation is required.

Parking and Transportation

The operation of the New WCHOB would add to the other recently constructed and proposed buildings on the BNMC [including the adjacent MOB, a skilled nursing facility, the adjacent GVI and the Multi Modal Transportation Structure ("MMTS")]. The demand from the New WCHOB, when evaluated through standard parking models with

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the existing and proposed buildings and parking supply, would create a parking demand that would exceed supply by 660 spaces.

However, since the publishing of the DEIS, the GVI and the MMTS (a mid-rise parking structure) have opened. Actual data has shown the model has overestimated the initial parking demand. According to data provided by the BNMC, in the last month since the opening of the GVI and MMTS facilities, there has been remaining capacity in the adjacent city-owned parking ramp as well as the new MMTS.

Additionally, the BNMC-led Total Demand Management Program, of which Kaleida is a participant, is implementing programs with the goal of reducing in vehicle trips by 5% by 2013, further mitigating the potential parking issue.

Solid/Medical Waste

The construction and operation of the New WCHOB will create waste. The excavation of the site will remove soil that will need to be disposed; construction will produce some debris, as will demolition of the existing parking lots. Operation of the New WCHOB will create a continual stream of solid, medical and hazardous waste.

All waste will be disposed of in accordance with all applicable New York State and Federal disposal regulations.

Public Services

No adverse impacts are anticipated to public services from the construction and operation of the New WCHOB, therefore, no mitigation is required.

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The construction of the New WCHOB will introduce additional traffic into the area and could produce dust and noise.

To mitigate potential adverse impacts, Kaleida will prepare a construction access and parking plan through its Site Logistics management program. It will ensure that construction traffic to the site is kept to the minimum practicable, traffic routes avoid residential streets whenever possible and that construction parking is kept off residential streets.

Best management practices will be used to mitigate noise and dust during construction.

Cumulative Impacts

The construction of the New WCHOB on the BNMC will leave the Current WCHOB facility vacant. The impact on the Current WCHOB properties and neighborhood are, therefore, a related cumulative impact of the Project.

The Current WCHOB is located on Bryant Street in the City of Buffalo. The surrounding area is predominately residential with supporting neighborhood commercial uses. The Current WCHOB occupies approximately 580,000 square feet in a number of connected buildings of varying ages, including structures built from 1917 to 2005.

Adverse impacts would only occur to the surrounding area if Kaleida fails to maintain and/or redevelop the property that is currently used for the Current WCHOB. To ensure that the construction of the New WCHOB does not adversely impact the neighborhood surrounding the Current WCHOB, Kaleida will engage the community in collaborative process to develop reuse or redevelopment plans for the buildings. The process will generally have the following components:

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- Community Advisory Panel;
- Facility Assessment;
- Potential Reuse Plan;
- Requests for Proposals; and
- Selection of Development Proposal.

This process may be redefined as it moves forward, but the goal will not change. Kaleida will work with the local community to ensure that the facilities at the Current WCHOB are reused or redeveloped in an appropriate manner and in a reasonable timeframe.

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**3.0 REVISIONS****3.1 Revision to Text**

There are two revisions to the text of the DEIS. These are detailed below:

## Revision #1:

From Section 1.2-Project Description regarding the development of the proposed New WCHOB and the adjacent proposed MOB: *“The two projects together will occupy the entire block bounded by Ellicott, High, Main, and Goodrich Streets. The site plans show a setback between the two buildings, to allow for external circulation and light.”*

The revised text should read:

*“The New WCHOB will be physically connected to the MOB by an elevated “link” structure. The full floor-plate structure would physically connect both buildings over multiple floor levels and will begin on either the second or third floor above street level (depending on final architectural design) and extend for two or three floor above.”*

## Revision #2:

From Section 4.1.1 (Land Use) Characterization regarding the development of the proposed New WCHOB and the adjacent proposed MOB: *“Land use on the north side of West Utica Street generally consists of office spaces and parking lots. To the east are a mix of residences and apartments; the Hellenic Eastern Orthodox Church is located at the corner of West Utica Street and Delaware Avenue. To the south, land use predominately consists of residence.”*

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The revised text should read:

*“Land use on the **south** side of West Utica Street generally consists of office spaces and parking lots. To the east are a mix of residences and apartments; the Hellenic Eastern Orthodox Church is located at the corner of West Utica Street and Delaware Avenue. To the **north**, land use predominately consists of residences.”*

### **3.2 Revisions to Figures**

No revisions to the figures is required

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*City of Buffalo Planning Board***4.0 SUMMARY OF COMMENTS AND RESPONSES**

Below is a summary of comments provided both during the public hearing and in writing. Comments were obtained from written submission during the open public comment period as well as orally during the February 28, 2012 public hearing. In addition, comments on the Project themselves were received from the City of Buffalo's Common Council meeting on March 13, 2012. Where appropriate, comments have been summarized. When more than one commenter addressed the same issue, the comment was summarized once and each commenter is noted. Full text of the comments is available in Appendix A. Comments submitted in writing are noted with (W) and comments submitted during the public hear are noted with (O).

**4.1 Proposed New WCHOB Facility**

Comment 1: City of Buffalo Planning Board (O), City of Buffalo Common Council (O)

*Will there be some kind of connection between the existing city ramp and the hospital?*

Response:

The Project Sponsor has indicated that it has assessed the ability to connect the New WCHOB to the adjacent city ramp located across Goodrich Street. Potential connectivity issues exist due to grade differences between the floors of the existing ramp and the proposed New WCHOB and, therefore, the Project Sponsor has not formally committed to an overhead pedestrian crossing. However, the Project Sponsor is continuing to evaluate the potential for incorporating a crossing as its moves through the formal architectural design of the New WCHOB. If final design allows, the Project Sponsor would strongly consider adding an overhead walkway between the two structures.

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*City of Buffalo Planning Board*Comment 2: David Baker (O)

*Concern with helicopter traffic within the area, coordination should be taken to prevent helicopter collisions.*

Response:

While the final approval of the location and operation of the New WCHOB helipad will happen at a later date, through the City of Buffalo Common Council, the Lead Agency has evaluated the impact from an additional helipad. The current permit for the Buffalo General Medical Center ("BGMC") helipad is for an average of two landings per day. BGMC is currently averaging 1 landing per week. In addition, the existing Women and Children's Hospital on Bryant Street is averaging approximately 1 landing per day. Combined, both facilities will still average less than 2 landings per day, and the likelihood of concurrent landings with that volume is extremely low. While the final approval of a New WCHOB helipad is through the City Common Council, the Lead Agency does not anticipate additional adverse impacts from the addition of the second pad.

Comment 3: NYS Office of Parks, Recreation and Historic Preservation (W)

*The OPRHP also has concerns about the scale of the proposed project, especially in relation to the nearby National Register-listed Allentown Historic District (as recently expanded). We recommend providing the OPRHP with schematic plans as soon as they are available so we may provide comments about the potential impacts on the district. We also suggest the architect provide a Construction Protection Plan which calls for monitoring of vibration and other potential negative impacts during the construction of the new building.*

Response:

The Lead Agency understands that the Project Sponsor is undertaking an independent cultural resources review with OPRHP as part of its application for

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financing through the Department of Housing and Urban Development. The Lead Agency also notes that the newly expanded Allentown Historic District (HD) was officially amended on February 14, 2012, after the publishing of the DEIS for this project. For the purposes of this EIS process, the Lead Agency has reviewed the potential impact to cultural resources from the Project for both impacts to archeological resources as well as visual impacts related to historic districts. The long urban history of the site has resulted in numerous stages of property reuse, including most recently, the demolition and excavation of sub-grade basements associated with a former medical office tower at that site. Archeological impacts are not likely to result from the construction of the New WCHOB. Additionally, the New WCHOB is located approximately 325 feet east from the new Allentown HD boundaries, in an area that has seen significant new construction in the last four years. The proposed New WCHOB is consistent with that construction and will return an asphalt parking lot back into high density urban use, consistent with the history of the area. While the Lead Agency acknowledges the final building design could impact the periphery of the Allentown HD, the location of the building would not create any more significant impact than the other surrounding mid-rise modern structures currently present in that area of the campus.

The Lead Agency notes that the final site plan review and approval by the City of Buffalo Planning Board, including the associated exterior building design, will occur after the EIS Findings. The site plan review process will also allow for additional public and agency comment on the final design of the building. However, the Findings will set the general parameters of the building design. As stated in the DEIS, the proposed New WCHOB design will be respectful of the nearby historic context while achieving a design required to meet the uses of a modern acute care facility.

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With regards to vibration concerns, the building and foundation design for the New WCHOB will be presented during Site Plan review and approval, and at this date the Project Sponsor has not finalized the foundation design and construction methods. Construction of the foundation may require the use of pile driven beams or, alternately, the excavation of building footers and supporting sub-grade slab. Pile driven beams may present a vibration concern to nearby structures during construction. If the final design of the building requires pile driven beams, the Project Sponsor will implement the following program it used during newly constructed GVI (located across Ellicott):

- Conduct a baseline vibration and building condition survey of potential receptor buildings;
- Provide continuous monitoring of vibration at receptor locations during pile installation; and
- If monitoring deems it necessary, provide mitigation to alleviate vibratory impacts at receptors during construction.

**Comment 4: Atlantic-West Utica Block Club (W)**

*The Draft is ambiguous about the number of flights that will be allowed at the helipads. Sec. 2.5.2 reads: "Kaleida Health currently has a permit that allows for an average of two flights per day to the helipad at the top of BGMC." In Sec. 2.5.3 immediately following, however, the Draft states that an additional helipad (on top of the proposed CHOB) "will not increase flight to the area because flights will remain under the permitted number of two flights per day already established .... " This is a puzzling statement and perhaps does not read as intended. The number of flights will surely increase with a second helipad; the question is whether the restriction can be adhered to and how it's to be calculated. Based on our experience with the current helipad at WCHOB, it seems reasonable under the first interpretation (that the combined number of flights must average no more than two per day) that it can be met. On the other hand, if the limit is intended to be an absolute number (no more than two flights into the Medical*

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*Campus on any one day), the restriction is neither realistic nor prudent. This should be clarified.*

Response:

The Lead agency agrees with the commenter that the DEIS text was confusing. The current permit for the BGMC is for an average of two (2) landings per day. BGMC is currently averaging one (1) landing per week. In addition, the existing Women and Children's Hospital on Bryant Street is averaging approximately one (1) landing per day. Combined, both facilities will still average less than two (2) landings per day.

#### **4.2 Parking**

Comment 1: Niagara Frontier Transportation Authority (W)

*In your response to the Draft Environmental Impact Statement I would strongly suggest, from a public transportation standpoint, that if additional parking is being considered to help alleviate the parking deficit on the campus, that the parking facilities be considered at the two terminuses of our rail line- University Station & LaSalle Station and along the South Park Corridor. Parking facilities at these locations will allow for individuals to park and be encouraged to use the rail line to access the BNMC.*

Response:

The Project Sponsor is not proposing additional parking related directly to this Project. In general, Kaleida is working jointly with the other BNMC members to evaluate future parking needs and institute parking reduction programs such as the BNMC's Transportation Demand Management ("TDM") Program, which is focusing on, among other options, promoting the use of public transportation and car pooling. The Lead Agency agrees with the commenter that park and ride-type

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facilities such as the metro rail stations should be evaluated if the BNMC is looking to add parking facilities in the future.

Comment 2: Atlantic-West Utica Block Club (W)

*To mitigate an expected parking deficit of about 660 slots for CHB on the Medical Campus, Kaleida is proposing to accommodate these vehicles at the Gates Circle Parking Ramp on Linwood Avenue (Sec. 2.8.3, p. 26; and Traffic Impact Study, pp. IV-V). The Ramp is owned by the City and can accommodate 760 vehicles. Adequate space in the Ramp should become available shortly when Millard Fillmore Hospital is closed. However, the future of that Hospital campus is still unresolved, with no contractor or plan yet secured. Does Kaleida have a commitment from the City allowing it to continue as the primary tenant of the Ramp in the future, regardless of what happens with adjacent redevelopment? If not, what alternatives have been explored? Is this considered a long-term solution to a CHB parking deficit or a temporary expedient? In 2008 the status of the City-owned Gallagher Parking Ramp on Hodge became a flashpoint between Kaleida and the City during planning for the WCHOB. Ambulatory Clinic there; hopefully history is not about to repeat itself.*

Response:

The DEIS model for the New WCHOB, including the impacts related to the GVI and the HighPointe on Michigan Skilled Nursing facility, estimated a deficit 660 parking spaces. Since publishing the DEIS, the GVI and the Multi Modal Transportation Structure (“MMTS”) parking facility have opened. Actual data has shown the model has overestimated the initial parking demand. According to data provided by the BNMC, in the last month since the opening of the GVI and MMTS, there has been excess capacity in the adjacent city-owned parking ramp as well as the new MMTS.

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There are several reasons to account for this. The first is economic, as rising gas prices and paid parking has encouraged car pooling and alternate transportation. Additionally, the standard industry parking models do not completely mimic parking demand and behavior with large scale, 24-hour medical facilities, which often requires more off-peak parking and less peak time parking than traditional models can accommodate. Lastly, the BNMC-led TDM Program, of which Kaleida Health is a participant, is implementing programs with the goal of expected 5% reduction in vehicle trips by 2013 appears to be having an effect on parking habits in the area..

Because of the current real-world demand, the use of the Gates ramp and a park and shuttle system by Kaleida Health is not anticipated at this time.

**4.3 Relocation from Current Campus**Comment 1: Atlantic-West Utica Block Club (W)

*First and foremost, we are encouraged by the significant commitment Kaleida is making to oversight during the early stages of redevelopment planning at its current campus (Sec. 4.1.3). We applaud their intention to seek broad community involvement in the process. Their interest in an aggressive timetable for this effort should help to allay the reasonable and understandable concerns of neighborhood residents. The appointment of a "point person" to deal with neighborhood issues as they arise is also welcome (Sec. 4.3.3). Over the past year, officers from Kaleida and the WCHOB have already provided an avenue for outreach and comment on the transition, and the Draft is consistent with representations made at those meetings. Kaleida is to be congratulated for the proposed operational framework in the Draft, and we look forward to seeing it realized.*

---

**City of Buffalo Planning Board**Response:

Comment noted. The Lead Agency encourages all Project Sponsors to work closely with the project neighbors.

Comment 2: Atlantic-West Utica Block Club (W)

*Among the Kaleida-owned properties in our Block Club neighborhood on West Utica Street (Table 6, p. 36 and Map attachment), there are one vacant lot and four residences currently empty. They were purchased in 2007-08 for expansion of West Utica surface parking as part of the proposed Ambulatory Clinic project on Hodge Street, since canceled. Although not addressed in the Draft, our understanding is that these parcels will be sold off as circumstances allow. This has already happened (October 2011) with similar residential properties previously owned by Kaleida on Hodge. The devolution of the West Utica properties to responsible new owners is an important priority for our neighborhood. The current situation has an adverse impact on surrounding property values, street appearance, and security. We consider it an initiative that should be undertaken as quickly as possible.*

Response:

The Project Sponsor has stated that since the Current WCHOB is planning to be relocated to the BNMC, there is no current need for the use of the offsite parcels owned by Kaleida along West Utica Street. Kaleida is actively moving to sell these properties. The intention of Kaleida is to return these properties to private residential ownership and, as noted in the comment, has already successfully sold several parcels. This process is expected to continue until all of Kaleida's West Utica properties are sold.

Comment 3: Atlantic-West Utica Block Club (W)

*We presume the fate of the Kaleida Parking Lot at 188 West Utica (Table 6, p. 36) will be addressed by the proposed Community Advisory Panel (Sec. 4.1.3). It's not unlikely this*

**City of Buffalo Planning Board**

*question may be influenced by the future of the larger parking lot at 204 West Utica (the former "Eckerd Lot"), controlled by the Flaum family of Rochester and on which Kaleida currently holds a long-term lease. Kaleida obviously is not responsible for redevelopment of the Flaum property, but the two large parcels are contiguous and similarly impacted by the WCHOB departure.*

*Section 4.1.1 of the Draft EIS correctly notes that the current zoning for these lots is C1, but also that the City is rewriting its codes (Buffalo's Future Land Use Plan, or "Green Code"). The Draft Green Code calls for both lots to be re-designated "urban center restricted" (N-2R), in common with the surrounding residential space on both sides of the street. [The Draft EIS statement (p. 36) that "land use on the north side of West Utica Street generally consists of office spaces and parking lots" is a complete mischaracterization of the block; see Map].*

*At the October 2011 forum called by the City to discuss its Draft Green Code, we suggested the proposed future status of the Kaleida and Flaum parcels be relaxed from N-2R to N2-0(pen), which would permit mixed residential and commercial in-fill. This would be consistent with the past history of the block and would likely enhance developer interest. The finalized Code will not be available for some time yet, but it's very unlikely the new Code (or the current Elmwood Village Design Standards, which are also applicable) would permit redevelopment of the properties in any way that does not seriously address the deadening impact three acres of surface parking currently have on the neighborhood.*

**Response:**

There is no current proposal in front of the City of Buffalo Planning Board ("Planning Board") for the Flaum property, so future re-use options are unknown. As noted in the comment, the Lead Agency cannot require a Project Sponsor to take action on a property that is not owned by the sponsor. It is the hope of the

**City of Buffalo Planning Board**

Planning Board that the mitigation measures requiring the Project Sponsor to develop a future re-use plan for the Current WCHOB campus and the sale of current Kaleida Health properties along West Utica Street will promote additional development opportunities for the Flaum parcel.

While the Project Sponsor is not responsible for the revisions for the city's new proposed "Green Code" regulations, the Planning Board notes the helpful suggestion on potential re-zoning options along West Utica Street and encourages the commenting organization to continue to work with the City of Buffalo Office of Strategic Planning in providing public input as the newly proposed "Green Code" is developed.

With regards to the description of the existing property use on West Utica Street, the Lead Agency agrees with your comment. Your comment is consistent with the land use as depicted in Figure 8, "Current WCHOB Surrounding Land Use" presented in the DEIS, however the text in the DEIS is not consistent with the map. While some of the residences are also owner occupied businesses, it is more correct to characterize north side of West Utica as being predominantly residential in use. A clarification is presented in this FEIS report in Section 3.1 – Revisions to Text.

**Comment 4: Fran French (W)**

*No-no-no! Do not move Children's Hospital. We need a "free standing" pediatric Hospital with pedestrians and pediatric instruments on site for the various health care children need. Don't water down it down on North St. There is already enough congestion around BH. I am almost sure Elmwood Village would OK the expansion so – NO! Keep Children's right where it is.*

---

*City of Buffalo Planning Board*Response:

The comment on the general opposition to the hospital relocation is noted. For clarification, please note that the proposed Project is for a free-standing Children's Hospital facility within the BNMC boundaries.

Comment 5: Michael Ferdman (W)

*Facts: The land is large and diverse. It involves large parts of Elmwood, Bryant, Hodge and Utica. It consists of: a) large parcels of only surface parking bordering the northeast corner of Elmwood and Bryant and also bordering the south side of Utica, east of Elmwood; b) an aging City-owned parking ramp; c) the hospital buildings. There is little doubt that, given its location, if all the land (other than the parking ramp) were cleared and remediated, the land would be an attractive site for development appropriate to the neighborhood.*

*Solution: Include the money to clear and remediate the land at the old site in the ask for the funding to construct the new Hospital.*

Response:

Note that the proposed Project under review is in-fact the new subdivision of the block between Main and Ellicott Streets, in order to ultimately prepare for the construction of a new free-standing children's hospital facility. However, the Lead Agency also acknowledges the associated cumulative impact of vacating the current facility. The potential effects of vacating the current facility are well documented in the DEIS. Additionally, the DEIS lays out a process in which Kaleida will work with the neighborhood to re-develop the Kaleida-owned campus. Kaleida has stated, and the Lead Agency agrees, that full scale demolition of the existing campus is financially unfeasible, and that given the different building ages and types, adaptive reuse of some of the buildings would be a better alternative.

---

*City of Buffalo Planning Board*

It is unreasonable to assume that financial institutions will fund the demolition of a major former health complex without an identified revenue source to pay the loan back. The scale of the campus redevelopment will be established in part by the final recommendations of the community-driven reuse plan and the issuance of a "Request for Proposal" for redevelopment. Ultimately, the final demolition alternatives of the campus would be driven by the needs of the community and economic market forces.

Comment 6: Michael Ferdman (W)

*Facts: The northeast corner of Elmwood and Bryant and the land bordering Utica are not encumbered by buildings and would be attractive development targets in their own right. Once the plan for the whole site is created and approved by the stakeholders, the Elmwood/Bryant and Utica parcels could begin development while the Hospital still operates. Yes, this would cause parking disruptions, but parking could still be accommodated. The doctors who park at the corner of Elmwood and Bryant could instead park in the public Bryant Street lot that contains many spaces leased by Kaleida from the City. The Utica parking area is very large and only the portion of it that actually abuts Utica could be developed while the balance remains as parking. It may also be possible to lease additional space from Flaum, the Rochester company that owns the land on Utica contiguous to the Kaleida land.*

*Solution: Once the overall plan is approved by the stakeholders, make the Elmwood and Utica parcels available for development with a timeline that would have them completed before the Hospital closes.*

Response:

As previously noted, the proposed Project under review is the new subdivision of the block between Main and Ellicott Streets to prepare for the construction of a

**City of Buffalo Planning Board**

new free-standing children's hospital facility. However, the associated cumulative impact of vacating the existing facility has been considered by the Lead Agency. The mitigation of these cumulative impacts through a redevelopment plan will occur prior to the hospital relocation. However, the timeline of the actual development of the property will ultimately be determined by market forces and available re-use options. Kaleida has begun to divest properties it does not need for the operation of the current facility for third party development and will continue to do so prior to the hospital relocation.

Comment 7: Michael Ferdman (W)

*Fact: Too often developers are "designated" by a municipality for a period of time, tying up the property with no consequences to the developer upon failure to proceed with the development. The closer in time to Hospital closure that the new development actually is completed the lesser the potential negative impact the closure would have on shops and restaurants on Elmwood. Because people don't want to live near a big street that has many empty storefronts, property values in the neighborhoods near Elmwood could decline, starting an unfortunate downward cycle. This must and can be avoided.*

*Solution:*

- a) Begin the process now with the stakeholders to complete the plan for the whole site. The plan should be approved in time for RFPs to go out and developers to respond at least 2 years before the Hospital closes. This would give the developers time to arrange financing, prepare architectural plans and vet the specifics of their projects with the stakeholders so that construction can begin as soon as the land is cleared and remediated.*
- b) A committee of stakeholders review and decide on the proposals, with public input.*
- c) The designated developers sign contracts with Kaleida containing start and end dates and significant monetary penalties for failure to meet the dates.*

**City of Buffalo Planning Board**

*d) The work by the municipalities/Kaleida to clear and remediate the land starts immediately upon the Hospital's closure.*

**Response:**

The Lead Agency clarifies that the commenter is not recognizing that the future development would occur on private property, not on a municipally controlled parcel. The Current WCHOB campus is owned by Kaleida, a private entity who would therefore need to enter into a sales contract with private development partner(s). The Lead Agency cannot impose contractual requirements between two private parties relative to sale of a privately owned parcel. Kaleida's process for identifying a reuse option for the existing hospital site has been clearly identified in the DEIS and in responses to comments in this FEIS and appropriately provides a adequate level of mitigation for the identified cumulative and secondary impacts from the proposed Project. It should also be noted that future re-development of the existing facility would require additional review by the lead agency at that time, and would involve public comment.

**4.4 Miscellaneous****Comment 1: NYS Department of Environmental Conservation (W)**

*This Draft Environmental Impact Statement (DEIS) was well done and appears to adequately cover foreseeable issues and impacts which may occur.*

**Response:**

Comment noted.

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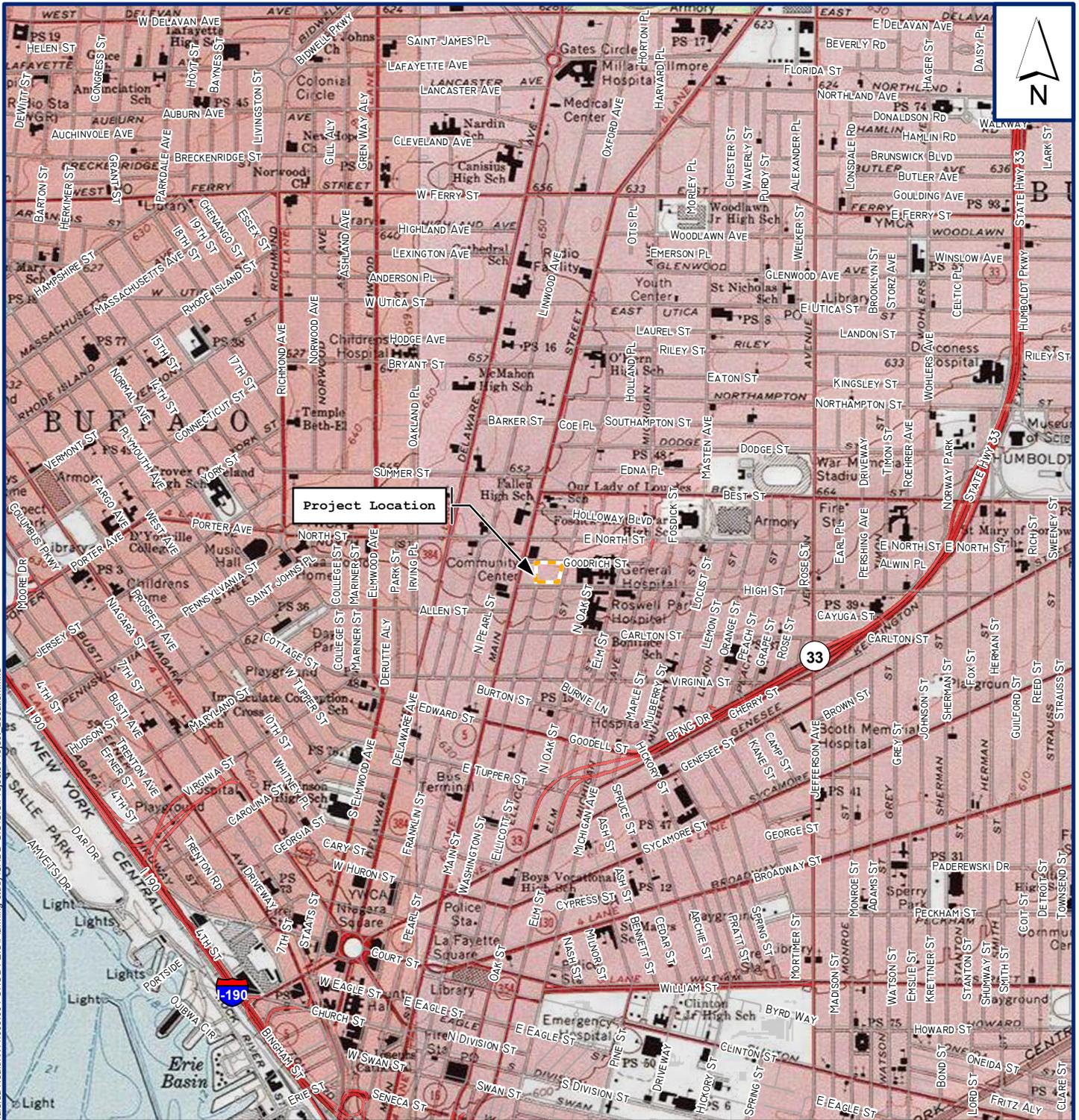
**City of Buffalo Planning Board**Comment 2: NYS Department of Environmental Conservation (W)

*Also, please note that this area is the site of an old spill from a gas station. The City should coordinate with this Department's Division of Environmental Remediation to address any issues that may cause concern at this site.*

Response:

For clarification, the Spill is sourced on the adjacent parcel. However, the adjacent parcel is entering the Brownfield Cleanup Program and will undergo remediation as part of the development of the Medical Office Building. Contamination that may remain outside of the BCP boundaries will be addressed prior to development under the NYSDEC Spills program. The Lead Agency is aware that Kaleida has been actively working with the NYSDEC during this planning process to ensure NYSDEC requirements are met.

# FIGURES



Filename Path: F:\Project\K11-Kaleida Health\K11.003.001.CHOB.FEIS\Planning-study\CADD-GIS\GIS\Projects\Project\_Location.mxd

**Legend**

 Project

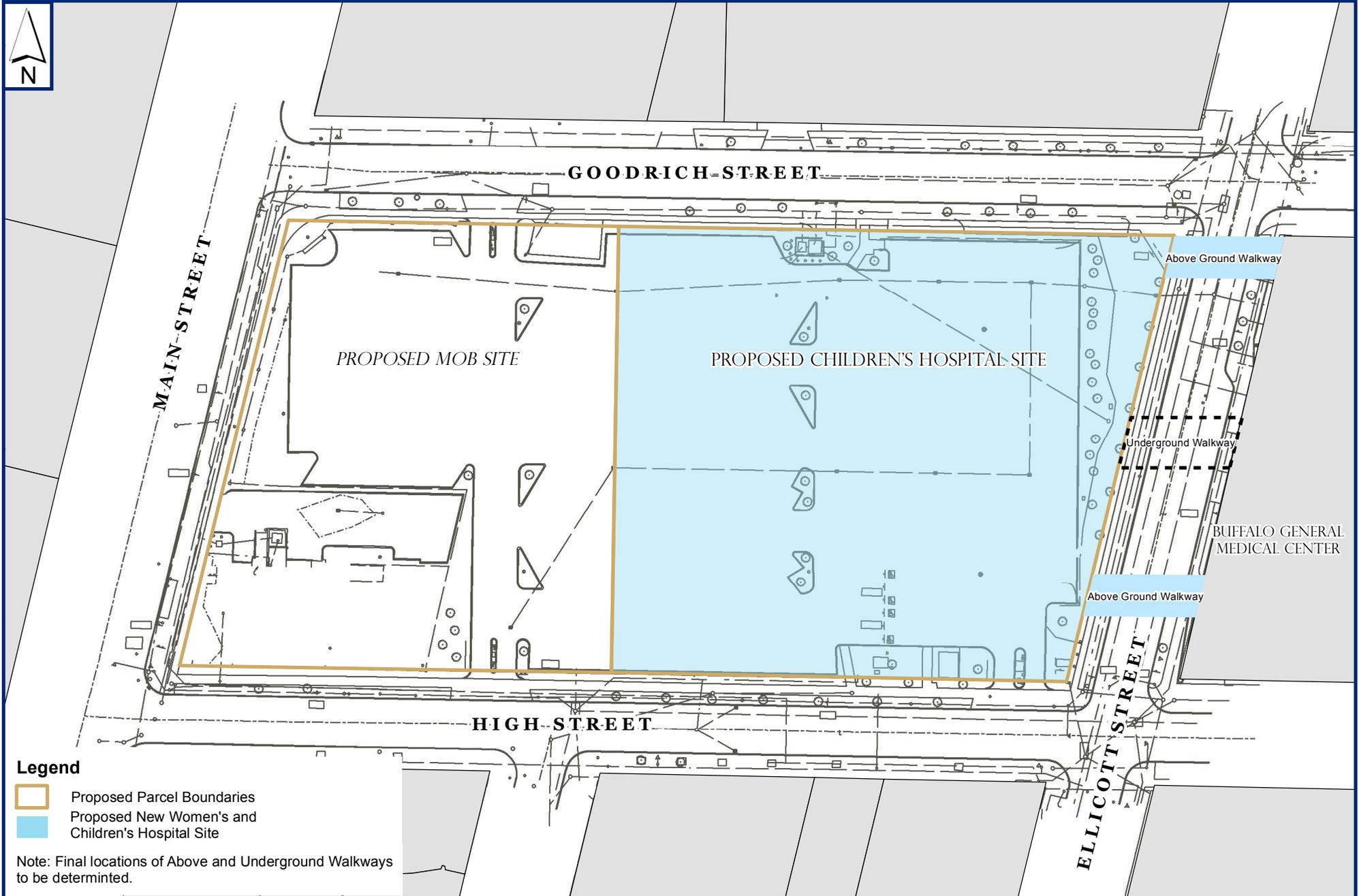


**NEW WOMEN'S AND CHILDREN'S HOSPITAL RELOCATION  
FINAL ENVIRONMENTAL IMPACT STATEMENT**

**PROJECT LOCATION  
FIGURE 1**



Path: F:\Project\K11--Kaleida Health\K11\_003.001 CHOB FEIS\Planning-study\CADD-GIS\GIS\Projects\Site\_Plan.mxd



**Legend**

-  Proposed Parcel Boundaries
-  Proposed New Women's and Children's Hospital Site

Note: Final locations of Above and Underground Walkways to be determined.



**NEW WOMEN'S AND CHILDREN'S HOSPITAL RELOCATION  
FINAL ENVIRONMENTAL IMPACT STATEMENT**

**SITE PLAN  
FIGURE 2**



# **APPENDIX A**

## **Written Public Comments**



## ATLANTIC-WEST UTICA BLOCK CLUB

16 Atlantic Avenue  
Buffalo, NY 14222  
14 March 2012

Planning Board  
City of Buffalo  
City Hall, Room 901  
Buffalo, NY 14202

Attn: Martin Grunweig

Re: Children's Hospital of Buffalo  
Draft Environmental Impact Statement (Draft EIS)  
11 January 2012

To the Board:

Our organization has the following comments regarding the subject Draft EIS. With the exception of the last two points, these address the impact of hospital migration from the neighborhood surrounding the current Women and Children's Hospital facility (WCHOB), as covered in Section 4 of the Draft.

### 1. Re-Purposing the WCHOB Campus

First and foremost, we are encouraged by the significant commitment Kaleida is making to oversight during the early stages of redevelopment planning at its current campus (Sec. 4.1.3). We applaud their intention to seek broad community involvement in the process. Their interest in an aggressive timetable for this effort should help to allay the reasonable and understandable concerns of neighborhood residents. The appointment of a "point person" to deal with neighborhood issues as they arise is also welcome (Sec. 4.3.3). Over the past year, officers from Kaleida and WCHOB have already provided an avenue for outreach and comment on the transition, and the Draft is consistent with representations made at those meetings. Kaleida is to be congratulated for the proposed operational framework in the Draft, and we look forward to seeing it realized.

### 2. Kaleida-Owned Residential Properties on West Utica Street

Among the Kaleida-owned properties in our Block Club neighborhood on West Utica Street (Table 6, p. 36 and Map attachment), there are one vacant lot and four residences currently

empty. They were purchased in 2007-08 for expansion of West Utica surface parking as part of the proposed Ambulatory Clinic project on Hodge Street, since canceled. Although not addressed in the Draft, our understanding is that these parcels will be sold off as circumstances allow. This has already happened (October 2011) with similar residential properties previously owned by Kaleida on Hodge. The devolution of the West Utica properties to responsible new owners is an important priority for our neighborhood. The current situation has an adverse impact on surrounding property values, street appearance, and security. We consider it an initiative that should be undertaken as quickly as possible.

### 3. The Kaleida Parking Lot on West Utica Street

We presume the fate of the Kaleida Parking Lot at 188 West Utica (Table 6, p. 36) will be addressed by the proposed Community Advisory Panel (Sec. 4.1.3). It's not unlikely this question may be influenced by the future of the larger parking lot at 204 West Utica (the former "Eckerd Lot"), controlled by the Flaum family of Rochester and on which Kaleida currently holds a long-term lease. Kaleida obviously is not responsible for redevelopment of the Flaum property, but the two large parcels are contiguous and similarly impacted by the WCHOB departure.

Section 4.1.1 of the Draft EIS correctly notes that the current zoning for these lots is C1, but also that the City is rewriting its codes (Buffalo's Future Land Use Plan, or "Green Code"). The Draft Green Code calls for both lots to be re-designated "urban center restricted" (N-2R), in common with the surrounding residential space on both sides of the street. [The Draft EIS statement (p. 36) that "land use on the north side of West Utica Street generally consists of office spaces and parking lots" is a complete mischaracterization of the block; see Map].

At the October 2011 forum called by the City to discuss its Draft Green Code, we suggested the proposed future status of the Kaleida and Flaum parcels be relaxed from N-2R to N2-O(pen), which would permit mixed residential/commercial in-fill. This would be consistent with the past history of the block and would likely enhance developer interest. The finalized Code will not be available for some time yet, but it's very unlikely the new Code (or the current Elmwood Village Design Standards, which are also applicable) would permit redevelopment of the properties in any way that does not seriously address the deadening impact three acres of surface parking currently have on the neighborhood.

### 4. Proposed CHB Overflow Parking at the Gates Circle Ramp

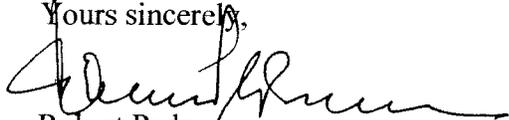
To mitigate an expected parking deficit of about 660 slots for CHB on the Medical Campus, Kaleida is proposing to accommodate these vehicles at the Gates Circle Parking Ramp on Linwood Avenue (Sec. 2.8.3, p. 26; and Traffic Impact Study, pp. IV-V). The Ramp is owned by the City and can accommodate 760 vehicles. Adequate space in the Ramp should

become available shortly when Millard Fillmore Hospital is closed. However, the future of that Hospital campus is still unresolved, with no contractor or plan yet secured. Does Kaleida have a commitment from the City allowing it to continue as the primary tenant of the Ramp in the future, regardless of what happens with adjacent redevelopment? If not, what alternatives have been explored? Is this considered a long-term solution to a CHB parking deficit or a temporary expedient? In 2008 the status of the City-owned Gallagher Parking Ramp on Hodge became a flashpoint between Kaleida and the City during planning for the WCHOB Ambulatory Clinic there; hopefully history is not about to repeat itself.

#### 5. The BGMC and CHB Helipads

The Draft is ambiguous about the number of flights that will be allowed at the helipads. Sec. 2.5.2 reads: "Kaleida Health currently has a permit that allows for an *average* of two flights per day to the helipad at the top of BGMC." In Sec. 2.5.3 immediately following, however, the Draft states that an additional helipad (on top of the proposed CHB) "will not increase flight to the area because flights will remain under the *permitted number of two flights per day* already established . . . ." This is a puzzling statement and perhaps does not read as intended. The number of flights will surely increase with a second helipad; the question is whether the restriction can be adhered to and how it's to be calculated. Based on our experience with the current helipad at WCHOB, it seems reasonable under the first interpretation (that the combined number of flights must *average* no more than two per day) that it can be met. On the other hand, if the limit is intended to be an absolute number (no more than two flights into the Medical Campus on any one day), the restriction is neither realistic nor prudent. This should be clarified.

In conclusion, we again commend Kaleida on its professed commitment to see our shared neighborhood fairly treated during their migration to the Medical Campus. For many of us long-time residents, it's a bittersweet moment. WCHOB has been an integral, significant, and valued part of the Elmwood Village. But at the same time its departure opens up some exciting new possibilities for the neighborhood. We appreciate the professed determination by Kaleida to help facilitate this transition in a way that can benefit everyone.

Yours sincerely,  
  
Robert Pedersen,  
Chairman

Attachment: West Utica Property Map

TIMON TOWERS

DELAWARE AVENUE

DELAWARE HEIGHTS  
NURSING HOME

CHURCH AGENCY

PARKING

CADET STORAGE

ATLANTIC AVENUE

Lane	16 WE/RP	12 Scali	WOL CHURCH
			Ziolkowski 183
			Misegades 187
			Nikolsky 191
			Devonshire/Sylves 193
			Hollands - Parking
			Vallone 201
			Gillen 203
			Stitt 207
			Balcolm 211 Ziolo - 213
			Trifilo 215
			Zambito/Sick 217
			Zambito/Sick 221
			Zambito/Sick 225
			Murphy 229
			Zernickei 233
			Patterson/Wise 235
			Shaw 237
			Greenleaf 241
			Zigmant 245
			Horizon Apts 247
			Werder 253
			Horizon 255
			Horizon 257
			Horizon 261

HSBC

HELLENIC  
ORTHODOX  
CHURCH

CHURCH PARKING LOT

Kooshoian 170

James 174

Kirlew 176 176A

Kaleida 180

Kaleida 184

KALEIDA  
PARKING LOT

FLAUM  
PARKING LOT  
(KALEIDA TENANCY)

Kaleida 230

Kaleida (V. Lot) 234

Kaleida 236

Dopazo 238

GALLAGHER  
PARKING  
RAMP

WEST UTICA STREET

Utica Garden

Barker 246

Zioikowski 248

Jackson 250

Harrington 254

Piselli 256

APT PARKING

SHOPS / ELMWOOD SQ APTS

ELMWOOD AVENUE



**VIA CERTIFIED MAIL**

March 16, 2012

Mr. Martin Grunzweig  
Mayor's Office of Strategic Planning  
City of Buffalo  
901 City Hall, Buffalo, New York 14202

Re: SEQR- Project Location: 830 Ellicott Street and 40 High Street

Dear Mr Grunzweig:

In your response to the Draft Environmental Impact Statement I would strongly suggest, from a public transportation standpoint, that if additional parking is being considered to help alleviate the parking deficit on the campus, that the parking facilities be considered at the two terminuses of our rail line – University Station & LaSalle Station and along the South Park Corridor. Parking facilities at these locations will allow for individuals to park and be encouraged to use the rail line to access the BNMC.

If you have any questions please don't hesitate to call. Thank you.

Sincerely,

A handwritten signature in cursive script, appearing to read "Christine D'Aloise".

Christine D'Aloise  
Director, Risk Management & Special Projects

m:\CABD\Adminext\Grunzweig1.docx

cc: K. Minkel / NFTA  
T. George / NFTA  
J. Morrell / NFTA



**New York State Office of Parks,  
Recreation and Historic Preservation**

Historic Preservation Field Services • Peebles Island, PO Box 189, Waterford, New York 12188-0189

518-237-8643

www.nysparks.com

**Andrew M. Cuomo**  
Governor

**Rose Harvey**  
Commissioner

March 19, 2012

Mr. Marty Grunzweig  
Land Use Controls Coordinator  
City of Buffalo Planning Board  
901 City Hall  
Buffalo, NY 14202

Re: SEQRA - DGEIS  
New Facility – Women’s & Children’s  
Hospital  
Buffalo, Erie County  
12PR00539 (also 11PR06864)

Dear Mr. Grunzweig;

Thank you for requesting the comments of the New York State Office of Parks, Recreation and Historic Preservation (OPRHP) for the proposed construction of a Women’s & Children’s Hospital at the Buffalo Niagara Medical Campus under the New York State Environmental Quality Review Act (SEQRA). As you know the role of this office in the SEQRA process is to provide the Lead Agency with our comments on historic preservation matters as part of its “hard look” at potential environmental impacts that may be associated with local discretionary reviews. We have reviewed the proposed project in accordance with the review in accordance with Section 106 of the National Historic Preservation Act of 1966 as we understand HUD will be involved in the financing of the project with Kaleida Health.

The OPRHP also has concerns about the scale of the proposed project, especially in relation to the nearby National Register-listed Allentown Historic District (as recently expanded). We recommend providing the OPRHP with schematic plans as soon as they are available so we may provide comments about the potential impacts on the district. We also suggest the architect provide a Construction Protection Plan which calls for monitoring of vibration and other potential negative impacts during the construction of the new building.

We appreciate the opportunity to comment under the SEQRA review process as an interested agency. As noted above, further consultation with the OPRHP/SHPO will be necessary as the project moves forward owing to the involvement of state and federal agencies in the project. Involvement of a federal or state agency triggers a more formal review with our office under the

National Historic Preservation Act of 1966 and Section 14.09 of the New York State Parks, Recreation and Historic Preservation Law, respectively.

We support the intention to provide high-quality healthcare to the Buffalo public; however, protection of historic and cultural resources must be part of the thoughtful approach. If you have any questions, please feel free to contact me at 518-237-8643 extension 3287, or via email at [elizabeth.martin@parks.ny.gov](mailto:elizabeth.martin@parks.ny.gov). Please refer to the OPRHP Project Review (PR) number in any future correspondences regarding this project.

Sincerely,

A handwritten signature in black ink that reads "Elizabeth Martin". The signature is written in a cursive style with a long, sweeping underline.

Elizabeth Martin  
Historic Site Restoration Coordinator

Via email only

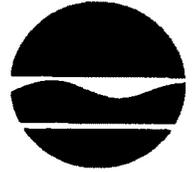
**New York State Department of Environmental Conservation**

**Division of Environmental Permits, Region 9**

270 Michigan Avenue, Buffalo, New York 14203-2915

Phone: (716) 851-7165 Fax: (716) 851-7168

Website: [www.dec.ny.gov](http://www.dec.ny.gov)



Joe Martens  
Commissioner

March 19, 2012

Mr. Martin A. Grunzweig  
Land Use Controls Coordinator  
City of Buffalo Planning Board  
Room 901 City Hall  
Buffalo, New York 14202

Dear Mr. Grunzweig:

**Women's and Children's Hospital of Buffalo  
Draft Environmental Impact Statement (DEIS)  
Proposed Location at Ellicott Street  
Between Goodrich and High Streets  
City of Buffalo, Erie County**

This office has reviewed the Draft Supplemental Environmental Impact Statement (DEIS) for the proposed relocation of Women's and Children's Hospital relocation. We offer the following comments:

This Draft Environmental Impact Statement (DEIS) was well done and appears to adequately cover foreseeable issues and impacts which may occur.

Also, please note that since this area is the site of an old spill from a gas station, the City should coordinate with this Department's Division of Environmental Remediation to address any issues that may cause concern at this site. Please contact Mr. Martin Doster at 716/851-7220.

If you have any questions with regard to the above, please don't hesitate to contact Ms. Lynne Judd or me at 716/851-7165.

Sincerely,

David S. Denk  
Regional Permit Administrator

LEJ:ldg

cc: Mr. James A. Morrell, City of Buffalo Planning  
Mr. Marc Romanowski, Harter Secrest & Emery LLP ✓

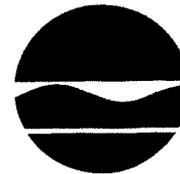
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Joe Martens  
Commissioner

March 19, 2012

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Land Use Controls Coordinator  
City of Buffalo Planning Board  
Room 901 City Hall  
Buffalo, New York 14202

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Sincerely,

David S. Denk  
Regional Permit Administrator

LEJ:ldg

cc: Mr. James A. Morrell, City of Buffalo Planning  
Mr. Marc Romanowski, Harter Secrest & Emery LLP

295 Bryant St #3  
Buffalo, NY 14222  
March 8, 2012

Dr. MR. GRUNZWEIG,

NO - NO - NO! Do not move  
Children's Hospital. Do not  
we need a "Free Standing" pediatric  
Hospital with pediatricians +  
pediatric instruments on site for  
the various health care children  
need. Don't water it down on North St.

There is already enough  
congestion around BAH.

I am almost sure Elmwood  
Village would OK the expansion.  
So — NO! Keep Children's right  
where it is.

Sincerely,  
Fran Srencl

Mr. Martin Grunzweig  
City of Buffalo Planning Board  
901 City Hall  
Buffalo, NY 14202

Re: WOMEN AND CHILDREN'S HOSPITAL PUBLIC COMMENT

Dear Mr Grunzweig:

The purpose of this comment is to address the resolution, especially timing, of the land (not only the buildings) currently occupied by W&C Hospital in the Elmwood Village. I have been discussing this matter with Kaleida officials who have encouraged me to submit my comments to you.

If the money, plans, contracts and stakeholder (including neighborhood, Kaleida, municipalities) support are all in place **before** the Hospital moves, the impact of the closure on the Elmwood Village could be a positive one. But if there is no immediate implementation of the use of the lands now occupied by the Hospital, there could heavy damage inflicted on the Elmwood Village. Given the importance of a vibrant Elmwood Village to the success/renaissance of Buffalo and the region, the stakes are high.

Western New York has too often experienced the reality that when an entity leaves a site it had been operating, there is a very long – often many years – period in which there is no activity. Because substantial public dollars are required to enable the Hospital to move to the medical campus, the municipalities that have a say in funding and managing the project, such as New York State and the City of Buffalo, have the opportunity, along with Kaleida, to assure that the phenomenon of an extended period of no activity is avoided.

### **HOW TO ACCOMPLISH AN IMMEDIATE TRANSITION**

#### **1. Getting the land in developable condition**

**Facts:** The land is large and diverse. It involves large parts of Elmwood, Bryant, Hodge and Utica. It consists of: a) large parcels of only surface parking bordering the northeast corner of Elmwood and Bryant and also bordering the south side of Utica, east of Elmwood; b) an aging City-owned parking ramp; c) the hospital buildings.

There is little doubt that, given its location, if all the land (other than the parking ramp) were cleared and remediated, the land would be an attractive site for development appropriate to the neighborhood.

**Solution:** Include the money to clear and remediate the land at the old site in the ask for the funding to construct the new Hospital.

## **2. Get projects started before the Hospital closes.**

**Facts:** The northeast corner of Elmwood and Bryant and the land bordering Utica are not encumbered by buildings and would be attractive development targets in their own right. Once the plan for the whole site is created and approved by the stakeholders, the Elmwood/Bryant and Utica parcels could begin development **while the Hospital still operates**.

Yes, this would cause parking disruptions, but parking could still be accommodated. The doctors who park at the corner of Elmwood and Bryant could instead park in the public Bryant Street lot that contains many spaces leased by Kaleida from the City. The Utica parking area is very large and only the portion of it that actually abuts Utica could be developed while the balance remains as parking. It may also be possible to lease additional space from Flaum, the Rochester company that owns the land on Utica contiguous to the Kaleida land.

**Solution:** Once the overall plan is approved by the stakeholders, make the Elmwood and Utica parcels available for development with a timeline that would have them completed before the Hospital closes.

## **3. Require developers to sign contracts with penalties for failure to start and complete the development within stated timeframes.**

**Fact:** Too often developers are “designated” by a municipality for a period of time, tying up the property with no consequences to the developer upon failure to proceed with the development. The closer in time to Hospital closure that the new development actually is completed the lesser the potential negative impact the closure would have on shops and restaurants on Elmwood. Because people don’t want to live near a big street that has many empty storefronts, property values in the neighborhoods near Elmwood could decline, starting an unfortunate downward cycle. This must and can be avoided.

**Solution:** a) Begin the process now with the stakeholders to complete the plan for the whole site. The plan should be approved in time for RFPs to go out and developers to respond at least 2 years before the Hospital closes. This would give the developers time to arrange financing, prepare architectural plans and vet the specifics of their projects with the stakeholders so that construction can begin as soon as the land is cleared and remediated.

b) A committee of stakeholders review and decide on the proposals, with public input.

c) The designated developers sign contracts with Kaleida containing start and end dates and significant monetary penalties for failure to meet the dates.

d) The work by the municipalities/Kaleida to clear and remediate the land starts immediately upon the Hospital’s closure.

The above program: a) would involve a collaboration among stakeholders and developers, it would result in completed development before the Hospital closes to strengthen the Elmwood Village so that it can successfully weather the closure, it would encourage the highest and best use of this large area of land by clearing and remediating it, it would ensure that the full re-use of the land occurs immediately upon Hospital closure.

If the above program is implemented it could strengthen the Elmwood Village for years to come, bringing new permanent residents by perhaps constructing new houses, town houses, a new cross street between Hodge and Utica to make those blocks more walk-able, and new mixed use development at the northeast corner of Elmwood and Bryant.



Michael E. Ferdman

Former President of Forever Elmwood

Partner in 3 new construction apartment projects within 4 blocks of the Hospital

CC: Marc Romanowski, Esq  
Attorney for Kaleida

# **APPENDIX B**

## **Transcript of DEIS Hearing**

**TRANSCRIPT**  
**CITY OF BUFFALO PLANNING BOARD PUBLIC HEARING**  
**ON**  
**THE DRAFT ENVIRONMENTAL IMPACT STATEMENT FOR THE**  
**PROPOSED NEW CHILDREN'S HOSPITAL, 818 ELLICOTT STREET,**  
**BUFFALO NEW YORK**  
**FEBRUARY 28, 2012**

City Planning Board Meeting to order February 28, 2012. Take the roll call please.

Present: Mr. Morrell, Mr. Lyons, Ms. Schwartz, Mr. Doyle. We have a quorum. Expected is Mr. Manual, Ms. Lamporelli.

*Public Hearings*  
*Women & Children's Hospital of Buffalo*

Chairman Morrell (CPB):

This public hearing notice of which was duly published in the Buffalo News on Saturday, February 18, 2012 is being conducted by the City Planning Board. The purpose of this public hearing is to permit the City Planning Board to solicit comments on the draft environmental impact statement completed on the proposed Women and Children's Hospital Project and to determine whether the statement is in conformance with the provisions pursuant to Part 617 of the planning regulations pertaining to Article 78 of the State Environmental Quality Review Act of the Environmental Conservation Law. The City's Planning Board has more authority of matters other than those matters than those stated in Part 617 of the implementing regulations pertaining to Article 8, therefore, any other matters will not be entertained at this hearing. Location is Ellicott and High Street. Please state your name and bring us into the Project.

Marc Romanowski (Representing Applicant)

Good Morning, Marc Romanowski from Harter Secrest & Emery. I am here on behalf of Kaleida Health with respect to the public hearing on the proposed relocation of Women & Children's Hospital. We have been before this Board on a series of developments on the Buffalo Niagara Medical Campus, and we are glad to be here in front on the Board on this Project and in particular to bring a new institution to the campus. What we are here to talk about this morning in particular is the environmental impact statement that has been prepared. It has been made available to the public through a variety of sources for review. This is part of the environmental impact statement in SEQRA review process which requires public comment. The public comment period on this began with the notice of completion which was issued at the end of January and concludes with the close of the comment period on March 23. As the chairman correctly pointed out, its proposed location for the Project is Ellicott Street, 818-830. Ellicott Street is the addresses we have been using. That is between High and Goodrich. It is currently across from, in part, Buffalo General Hospital and the Gates Vascular Institute. The facility itself is a proposed approximately 400,000 square foot, 10-story structure, which will house the

Children's Hospital of Buffalo facilities that are currently located over on Bryant Street in the City. We anticipate that the facility will include emergency and trauma units, associated helipad, inpatient services, family lodging and ambulatory services as well. Anticipated construction timeline, quite frankly if we are able to get the financing we need, is approximately 2013 to start with a completion date of approximately 2015. Now I am going to turn to Mark to discuss some of the impacts we identified in a little more bit detail, but kind of the key impacts we found were similar to what we found with the other project on the Buffalo and Niagara Medical Campus, namely parking and transportation. How do we deal with the addition of this institution to that area. Noise; as we addressed with the helipad for Buffalo General Hospital. This is going to be a very close proximity to it; literally across the street and we are going to look at the noise issue and then last, but certainly not least, the cumulative impacts of moving the facility from its existing site on Bryant over to the Medical Campus. Mark's going to first talk about the impacts that we are talking about to the new campus and then I'll speak a little bit about what we looked at as far as the existing campus.

Mark Colmerauer (Representing Applicant)

Hi. I'm Mark Colmerauer. I managed the EIS process to date for the Project. As Marc had stated, we did a full EIS review of the hospital area and really some of the key issues that we had to look at were really the noise issue most relative to the helipad that's being proposed. One of the things that's important to note that the current helipad that was just approved recently is approved for two landings a day. They are currently doing about one a week, and the current load of landings and trips in and out for Children's Hospital are currently at about one a day. Roughly a block away, a half a block away, there would be no cumulative or additional impacts from the helicopter landings as currently proposed. The other issue that was really the most important was concurrent with all the development that's been going on in the area, of course, is parking and traffic. Really, the big driver of traffic often is where people are going to go to – not only to the facility for drop-offs, but where will they park. So when you look at the issues, you have to look at the parking demand. The result of this study shows that with the addition of the new parking ramp and new parking that would be going on through current underground in the adjacent parcel, we would still be at a deficit of around 660 spaces. That's not unusual and has been pretty consistent with the deficits we've been seeing for the projects we've had. We've been adding additional flooring to the parking garage as you know, which has alleviated some of that demand. The parking impacts, however, you really can't look at them on their own. You have to look at what is going on with all the other developments that happen. So when we looked at the parking or when we looked at the traffic impacts, we looked at it relative to what would additional impacts be from when you include both the GVI, the proposed medical office building, the skilled nursing facility and the new parking garage that is going in. What we found was that there really was no net impact from the addition to traffic from the addition of this facility. All of the impacts that were found to require mitigation from the initial studies that we did for both the north end development then revised for the medical office building, really they're the same mitigations. There are no additional ones. Those mitigations, which are now starting to be implemented, really are timing and traffic signals for the main routes in and out of the campus area. There is a whole list of them, but to sum it up, there really is no additional requirements other than what has already been decided and is being implemented from the past projects that were out there. I think that covers mine.

Marc Romanowski (Representing Applicant)

Just to tie in Mark's point on the parking and traffic and in particular the traffic, is that the mitigation measures that we did for the entire north end, we found to be sufficient in dealing with the increased traffic that's going to be associated with this facility. The signal timings. There's also some lane modifications. They're going to add some additional turning lanes along the Michigan Avenue to accommodate traffic there because that was the area that was probably most significantly impacted. Primarily, actually by the multi-modal transportation structure, when you place parking in different locations, that becomes a hotbed of traffic and the location of the MMTS on Michigan is something – the traffic impacts – we had to address as part of that process. This facility, we expect most of the users will either park within the MMTS or not in the MMTS, in the adjacent City lot, City ramp, or there is also some private surface ramps or lots nearby as well. That's our anticipated plan for dealing with parking. Relative to the code itself, there is actually an excess of what we need under the zoning code. Under the zoning code we had excess capacity at the multi-modal transportation structure and even with the addition of Children's, we still have excess according to code. We need code requirements relative to providing off-street parking.

Now, of course, the other critical elements that we addressed in the EIS was the existing campus and the cumulative impacts associated with moving from the existing campus. With the EIS process, you're required to look at the impact that a project has and the known steps that might follow. At this point in time, the plan again is to relocate in about 2015. What we did in the EIS was to look at what is the impact of leaving that campus. We don't have any current plans for the facility, so we don't have any plans to evaluate any potential impacts of what might come here. We don't know yet. What we're proposing to do is engage in the same process we did with Gates, just a little bit sooner on. Namely, we're going to bring an outside consultant to help us identify potential reuse for the campus and engage in a public process to really evaluate what makes sense at that location. We had a couple of neighborhood meetings as part of the roll out of this project before the EIS and the SEQRA review process began and what we heard from residents in particular around the existing campus was that they just wanted to make sure that that wasn't going to be vacant – that there was a plan in place and steps would be followed. Kaleida Health is going to begin that process in the next couple of months and begin developing a solution for this.

Now critical to redevelopment of the campus are a couple of different factors. First is control and this map hear gives a better idea of the properties involved with the existing campus and who controls what. Here between Bryant and Hodge, that's the main campus that is controlled almost exclusively by Kaleida. There are some additional, and they show here some additional residential properties that are controlled by Kaleida, but they are either sold or in the process of being sold to private individuals for reuse. That also applies to a couple of residential structures that are along Hodge and West Utica. Those parcels they are going to sell off rather than making them part of some development project. They don't make sense. They are residential structures. They fit in with the fabric and are not something to mess with. The other large parcel is here and what's labeled as 188. Yeah. It's 188 West Utica. That is a surface parking lot. It is controlled by Kaleida Health as well and there are a couple of, again, residential parcels on there that we may or may not sell off. The last is the large parking lot at 204 West Utica. This property is actually controlled by another private entity and Kaleida Health has it under a long-term lease.

Of the parcels, this is the one that is going to require the involvement of other parties to decide on what the future reuse is. There is a couple of vacant structures on it right now as well as a parking lot. That's the one we need to work through with the current owners as well. So the plan as we did with Gates, again, a little bit earlier in the process here, is to begin this public discourse in bringing in consultants and local developers and local residences to decide, all right, where do we go from here. Again, further limitation on redevelopment of this site that we already anticipate is related to the nature of the structures that are there. The facility had additions since the early 1900s and really in its current format, it doesn't lend itself particularly well to redevelopment, nor reuse. Kaleida is, in fact, shrinking in size. They are going from 580,000 total square feet down to 400,000 square feet, but that is possible because the new facility is so much more efficient at handling patients than the existing facility just because of the varied nature of its construction. That will be kind of a critical piece – to decide what can be reused, what can't be reused, and how they will go about deciding that and facilitating the redevelopment of it. That process, like we said, we will engage in shortly and bring the public in on it.

So that is really the thrust of the major impacts that we identified in the Environmental Impact Statement that we discussed. We are here to answer any questions of the Board. I know this is a public hearing and we are going to hear comments from the public as well. After those public comments, if the Board has any further questions of us, we would be glad to entertain them as well.

Chairman Morrell (CPB):

Okay Marc, after we hear from the public, could you just go through the process. What happens after this?

Marc Romanowski (Representing Applicant)

Sure. Or I can do it right now.

Chairman Morrell (CPB):

Speaker: Why don't you do that right now.

Marc Romanowski (Representing Applicant)

Sure.

Chairman Morrell (CPB):

Speaker: That may answer some of the questions from the public.

Marc Romanowski (Representing Applicant)

Absolutely. As part of the EIS process, again, this is the public comment period. You are allowed to make a world of comments today. That is the purpose of the hearing. There is also an opportunity to make written comments, which are submitted to Marty up until the 23<sup>rd</sup> of March. That is the close of the public comment period. So you have some time if you have some comments you want to think about which were heard this morning and make those comments, you may do so in writing as well as today. After that is completed, a final Environmental Impact Statement is to be prepared. What that does is it takes the public comments that were received during this process and provides responses to them and an analysis

of those. That's the purpose of the final Environmental Impact Statement. After that, then we start getting into site-specific issues as we have done with the other buildings. That comes along with the after site plan application and that will have more in the way of design-specifics for the new facility and there will be additional opportunities there for a public hearing and comments on that new facility. We expect that to happen probably sometime in the summer would be my anticipated time of plan based on where we are right now in development. Then ultimately you will have a findings statement as issued by the Planning Board relative to the potential impact from the project and that will be for the Board to decide.

Chairman Morrell (CPB):

It is further on to the site?

Marc Romanowski (Representing Applicant):

That would be after the site plan has been submitted.

Chairman Morrell (CPB):

Speaker: After the site?

Marc Romanowski (Representing Applicant):

Yeah. Because you won't know what impacts they analyze until you've got really that building and stone in front of you so to speak, so here we're giving you the parameters of what we think the building is going to be and we don't expect it to change, but really we'd rather that you have those things in front of you when you make the final determinations under SEQRA.

Ms. Schwartz (CPB):

The end put that you discussed regarding the group coming in from the outside, that is going to be outside of this effort?

Marc Romanowski (Representing Applicant):

Yes. The comments from any public discourse on the redevelopment and of the existing campus will really be geared towards the next phase of the existing campus, which will go through its own environmental review when it is time to move forward with whatever development comes out of that. The reason we put it in as part of this review is that it is a natural extension of what we are doing. We have to look at, okay, what happens by the move? We don't know what's going there, but we have to at least analyze what is going to happen as part of the move. So that is what we did in addressing the cumulative impacts and why we have engaged in the public discourse already.

Chairman Morrell (CPB):

I just wanted to make it clear that it is inclusive on what's happening here with the move the medical campus, but there is a disconnect. After the Environmental Impact Statement is done and it takes over, the market-forces comes in to what happens.

Marc Romanowski (Representing Applicant):

Yeah. Absolutely. As much as we have done with Gates, it is going to be a similar process. What we did learn from Gates is that we want to start a little earlier and get that process rolling at

an earlier stage so that we have more time as we are still in the facility to line up the next phase for the area.

Chairman Morrell (CPB):

Is there any questions for Marc before we open it up to the public, just to be clear from our prospective? Okay. Are you finished with your presentation?

Marc Romanowski (Representing Applicant):

I am finished with my presentation.

Chairman Morrell (CPB):

Is there anyone else to be heard on this item? Please step forward and state your name.

David Baler (Public):

My name is David Baker and I am a Buffalo resident. Just one quick item. You have a unique situation with the heliports a block apart. Just make sure you keep track of air traffic control because I can see at 2:00 in the morning a couple of helicopters coming in and so you got to make sure you coordinate that. I don't want to see three or years from now two guys, two helicopters crashing. Just keep that in mind it's a close situation of air traffic control.

Chairman Morrell (CPB):

Thank you. Is there anyone else to be heard on this item? Hearing on motion to close. All in favor?

Mr. Morrell, Mr. Lyons, Ms. Schwartz, Mr. Doyle; Ms. Lamporelli (CPB):

Aye.

Chairman Morrell (CPB):

Okay.

--- END OF PUBLIC HEARING, RETURN TO REGULAR BOARD MEETING OF THE DITY OF BUFFALO PLANNING BOARD --

Ms. Schwartz (CPB):

Marc, I have one question. It may have been in the document and I missed it. Is there any discussion at all about some level of connection between the existing City ramp and the hospital. I ask that only because I watch now as young families with toddlers in tow and in strollers move from the existing ramp that services Children's, and it's not an easy slog for parents. I just wondered, is there any connection talked about?

Marc Romanowski (Representing Applicant):

Yeah. Absolutely. There is several different links that we are contemplating. One might be directly to that parking ramp. Certainly, the Medical Office Building will have underground parking available there. That will have a direct connection. Whether it is directly from the hospital to the ramp or through some other connection through the other buildings, the idea is to physically connect all those facilities. We have got to look at feasibility issues. That existing

ramp, unfortunately, is rather low. It sunk into the ground actually a floor and a half I believe. It is subgrade. It is only about two to three tops above grade, and it makes it somewhat difficult to link. We show a link here actually visually on ... it's tough to see on this, but we show a link there. We would like to do it. We'll have to work that out. That is going to be something we talk about as part of the Site Plan review process.

Chairman Morrell (CPB):

As we know, parking, public access, public transit amenities, that whole area has been discussed on a number of projects that have come through the medical campus and I think that Kaleida and Buffalo Niagara Medical Campus, along with the entities that are within the Buffalo and Niagara Medical Campus are totally aware of the parking and all the issues that are related to that, and I think they have a good handle on that. I think that Kaleida and Buffalo Niagara Medical Campus are working with the City as well as the NFTA to work out some efforts to move forward to make that not so big of a problem. It's going to be a problem. It's going to be a problem for individuals that live in the Fruit Belt area as well as individuals that live in the Allentown area. That is something we have to deal with and I believe that the individuals that are responsible for making this happen, will make sure that it happens properly. It is an issue and we just have to deal with it.

Having that said, is there any other discussions related to moving the Draft Environmental Impact?

Marc Romanowski (Representing Applicant):

Yeah, at this point we are looking to close the public hearing which again we still have public comment period open for approximately another three weeks. Once that is complete, then we can look at those comments we receive and move towards the Final Environmental Impact.

Ms. Schwartz (CPB):

I think I may have commented the last time, the land use plot maps in the document...

Mark Colmerauer (Representing Applicant):

We changed those...

Ms. Schwartz (CPB):

Are currently out of date.

Marc Romanowski (Representing Applicant):

We updated them in response to your comments, Cynthia, and everything that's public we have updated maps.

Chairman Morrell (CPB):

Marc, and I purposefully ask Marc to explain the process after he went through his presentation, so this Board and the public is totally aware of what happens after this. That after the March 23 comment period ends, this Board will issue a Final?

Marc Romanowski (Representing Applicant):

A Final Environmental Impact Statement after reviewing all the comments we receive.

Chairman Morrell (CPB):

And then it will then go into Site Plan review process. So the public, as well as individuals that are, that have a vested interest in that campus, will have another opportunity to weigh in on what that building will look like and how it fits within.

Marc Romanowski (Representing Applicant):

Yes. The Site Plan review process will be much more focused on the new building. This is really the opportunity to discuss the existing campus and any potential impacts there might be there by the move. Once we move the Site Plan, that is going to be focused on what the new building will look like, how will it function, and how does it work on the Buffalo Niagara Medical Campus.

Chairman Morrell (CPB):

We don't really take action today, do we?

Marc Romanowski (Representing Applicant):

No.

Ms. Schwartz (CPB):

It might be worth describing where you are with architectural services?

Marc Romanowski (Representing Applicant):

Sure.

Ms. Schwartz (CPB):

Because what you have now is a conceptual.

Marc Romanowski (Representing Applicant):

Yeah. We just retained...I think it was announced in the paper last week...Shepley Bullfinch, a specialist firm out of Boston that's going to help Kaleida go through the design process. We are already rolling on that process now. We are also bringing in Cannon once again on the engineering side. They helped us with the Gates Vascular Institute and also the long-term care facility. They are going to be involved in it as well. They can help speed us along as we go through this process.

Ms. Schwartz (CPB):

I think it is important to point out that what you are showing on your map is a conceptual idea of massing, that it is not the design.

Marc Romanowski (Representing Applicant):

Absolutely. That is correct. Thanks Cynthia. That's right. That is just a massing diagram. We don't have any designs yet ready to show. Again, the whole purpose of the site plan review process is to get it to that stage where we are ready to talk about. And it is perfectly appropriate to talk about esthetics and circulation and things of that nature as we go through the site plan

review process. Here we should just look at, okay, what are the major concerns we have about putting it there. Once we get past that, then we can move to the specifics.

Chairman Morrell (CPB):

Okay. Motion to close the hearing?

Mr. Lyons, Ms. Schwartz, Mr. Doyle, Ms. Lamporelli (CPB):

We already did.

Chairman Morrell (CPB):

So.

Marc Romanowski (Representing Applicant):

We'll see you in a few weeks. We'll give you an update and as we get closer to the FEIS.

--- END OF PUBLIC BOARD DISCUSSION ON THE PROPOSED CHILDREN'S HOSPITAL PROJECT--