

## II. PROJECT DESCRIPTION

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### INTRODUCTION

The purpose of the Project Description is to describe the proposed Project in a way that will be meaningful to the public, reviewing agencies, and decision-makers. This Project Description focuses on project-level details pertaining to the Barlow Hospital Replacement and Master Plan Project. As described in Section 15124 of the California Environmental Quality Act (CEQA) Guidelines, the Project Description in an EIR is required to contain the following information: (1) the location of the proposed Project, (2) a statement of Project objectives, (3) a general description of the Project's technical, economic, and environmental characteristics, and (4) a statement briefly describing the intended uses of the EIR. The State CEQA Guidelines state that a Project Description need not be exhaustive, but should provide the level of detail needed for the evaluation and review of potential environmental impacts.

The Project Description is the starting point for all environmental analysis required by the State CEQA Guidelines. Section 15146 of the State CEQA Guidelines states that "the degree of specificity required in an EIR will correspond to the degree of specificity involved in the underlying activity which is described in the EIR." In this case, the proposed Project consists of the replacement of the existing Barlow Respiratory Hospital (also, Barlow Hospital) and redevelopment of the remainder of the Project site with residential, commercial, and community uses. This Project Description serves as the basis for the environmental analysis contained in this project-level Draft EIR.

### 1. STATEMENT OF PROJECT OBJECTIVES

As the underlying purpose of the proposed Project, Barlow Respiratory Hospital (Barlow Hospital) seeks to replace the existing 49-bed long-term acute care hospital facility on its main campus (the Project site) with a new 56-bed acute care hospital, administration and support facility, and skilled nursing facility, and proposes redevelopment of the remainder of the property with land uses that would complement the proposed replacement hospital, be compatible with surrounding land uses, and serve as a mechanism for generating the funds for hospital construction in a timely manner.

Barlow Hospital's main hospital building suffered moderate structural damage in the 1994 Northridge earthquake and is required to demonstrate compliance with SB 1953, the Hospital Facilities Seismic Safety Act, which directs hospitals to evaluate and upgrade their general acute care hospital buildings for seismic resistance in accordance with standards developed by the California Office of Statewide Health Planning and Development to measure a building's ability to

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withstand a major earthquake.<sup>1</sup> An evaluation of the existing hospital facility led to the determination that the building was deficient with respect to seismic safety as well as functionally obsolete and unable to meet current required standards of patient care. Seismic retrofitting has been deemed technically infeasible because of missing or inadequate seismic reinforcement in the 1927 portion of the building; inadequate separation between the 1927 building and 1974 additions; utilities, hallway widths, patient room dimensions, and disabled access that do not meet current hospital building code requirements; and the fact that hospital operations would be severely disrupted or need to cease during such construction. For these reasons, Barlow Hospital has elected to construct a replacement facility on the Project site.

Project Objectives are as follows:

### **a. Replacement Hospital Objectives**

- Allow Barlow Hospital to continue fulfilling its core mission of treating critically ill or high acuity patients in an intensive way, using individualized treatment programs and medical expertise geared towards the patient's illness and requirements, with the goal of medical recovery.
- Position Barlow Hospital to serve current and future chronically ill patient populations through a variety of programs and levels of care in the future, such as prevention services, outpatient and home care, and skilled nursing and other sub-acute care.
- Replace existing functionally obsolete, substandard hospital facilities with safe, new state-of-the-art hospital, associated administration and support facility, and a skilled nursing facility that accommodate the provision of disaster relief and emergency care services.
- Provide the standard of care required for general long-term acute care hospitals to meet infection control and other safety requirements, such as one bed per hospital room, adequate hospital room size to accommodate equipment, hallways and public spaces that support emergency response and evacuation, and infrastructure to support communications and other technological requirements.

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<sup>1</sup> Office of Statewide Health Planning & Development, *California's Hospital Seismic Safety Law: Its History, Implementation and Progress*, <http://www.oshpd.ca.gov/FDD/SB1953/SeismicReport.PDF>. 2005.

- Maintain and expand teaching and research affiliations, transfer agreement, and other protocols between Barlow Hospital and its affiliate hospitals.
- Contribute to the alleviation of the shortage of hospital beds in Southern California and acute care facilities in Los Angeles County.

**b. Residential Community Objectives**

- Contribute to meeting long-term demand for for-sale housing in the Silver Lake-Echo Park-Elysian Heights Community Plan Area and in Los Angeles, close to jobs in the downtown area.
- Preserve as much of the historical significance of the Project site as possible, without compromising patient care services or the development of a residential community.
- Incorporate sustainable design and energy conservation features into the development of the proposed replacement hospital building, associated administration and support facility, skilled nursing facility, and residential community.
- Incorporate a range of educational and recreational amenities and activities with multi-generational appeal to youth, families, and senior citizens into the proposed Project.

**c. Community Support, Service, and Enhancement Objectives**

- Allow Barlow Hospital to continue to provide low-cost and charitable health care services to the Silver Lake-Echo Park-Elysian Heights communities, including but not limited to health fairs, classes, seminars, free health screenings, flu shots, and the use of hospital campus facilities for community meetings.
- Ensure land use and architectural compatibility between the developed Project site and surrounding land uses, especially Elysian Park and the Echo Park community.
- Incorporate landscaping and open space into the proposed Project in a manner complementary of the existing aesthetic character of the area as defined by Elysian Park and the Echo Park neighborhood.
- Enhance the visual appearance of the Project site along Stadium Way through the implementation of aesthetic improvements consistent with the City's recommendations for designated Scenic Highways.

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- Provide for safe Project site access and internal circulation access for multiple modes of transportation, including private vehicle, public transit, bicycle, and pedestrian use, while minimizing potential vehicular conflicts on Stadium Way.
- Direct and calm traffic approaching and entering/exiting the Project site, to improve vehicular and pedestrian circulation on the Project site, on Stadium Way, and in Elysian Park.

### 2. PROJECT LOCATION

Barlow Hospital is located at 2000 Stadium Way in the Echo Park community of the City of Los Angeles. Echo Park is located approximately two miles north of Downtown Los Angeles and generally extends from Riverside Drive and the Golden State Freeway (Interstate 5) on the north to Temple Street just south of the Hollywood Freeway (U.S. Route 101) on the south, and from the Arroyo Seco Parkway (SR 110) on the east to Glendale Boulevard/Allesandro Street/Waterloo Street on the west. Surrounding communities include Elysian Valley and Cypress Park to the north and northeast, Los Angeles's Chinatown neighborhood to the south, Northeast Los Angeles to the east, and Silver Lake to the west. The Project area and Project site, respectively, are shown in **Figures II-1, Regional Location Map, and II-2, Project Vicinity Map.**

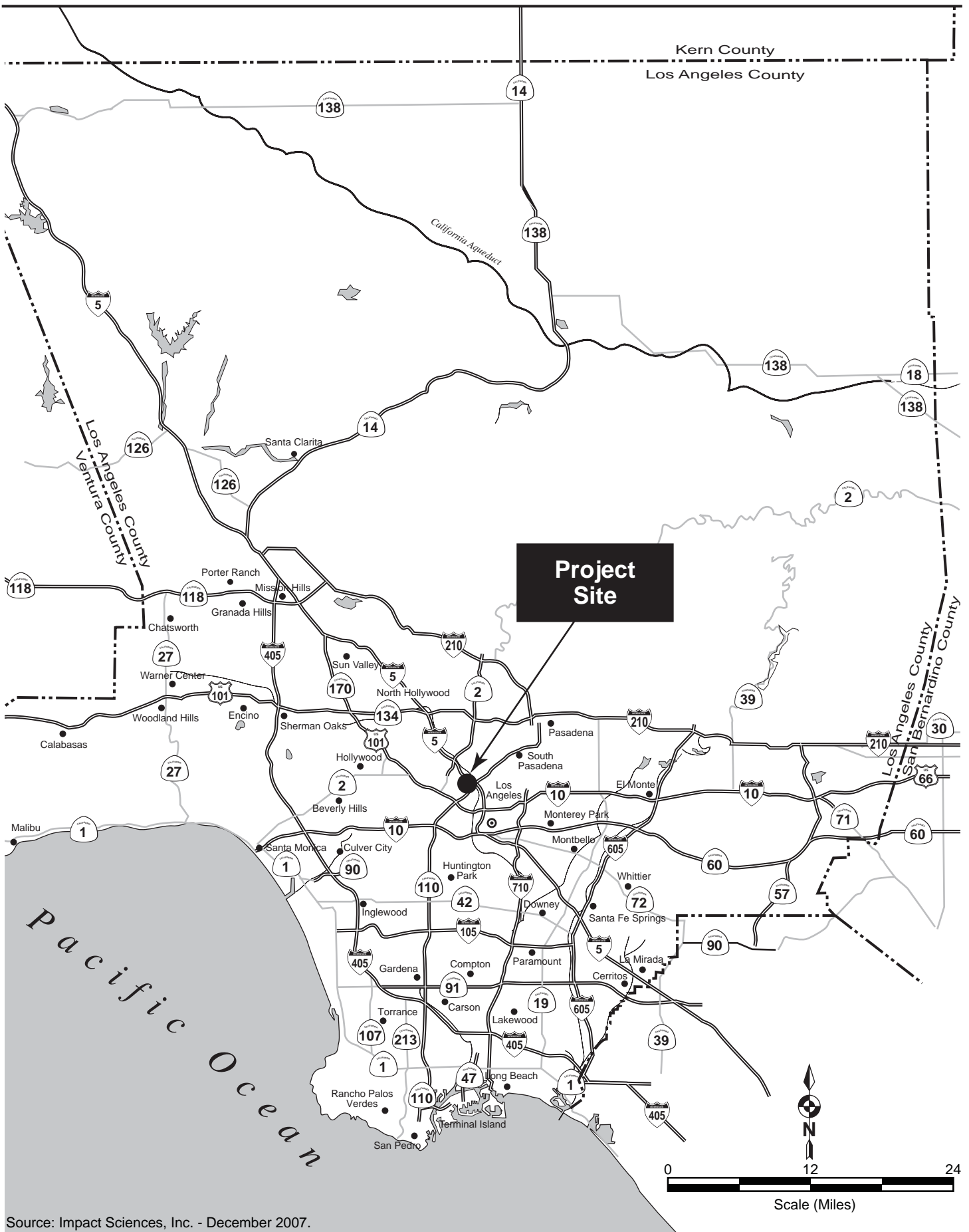
Regional access to the Project site is provided by the Golden State Freeway, Arroyo Seco Parkway, and Hollywood Freeway. Local access to the Project site is provided by Stadium Way, which extends from the Golden State Freeway on the north to the Arroyo Seco Parkway on the south and is designated as a Secondary Highway on the Silver Lake-Echo Park-Elysian Park Community Plan Land Use Map.<sup>2</sup>

An early residential suburb of the City of Los Angeles, Echo Park is now characterized by a mix of land uses. Dodger Stadium lies at the eastern edge of the community, while the 765-acre Elysian Park, the City's oldest and second -largest park, occupies the northeastern portion. The community contains a number of distinct residential neighborhoods, including Angelino Heights, Colton Hill, Edendale, Sunset Heights, Temple-Beaudry, and Elysian Heights, as well as Echo Park and Echo Park Lake. Commercial uses are generally concentrated along Sunset Boulevard, Temple Street, and Alvarado Street.

The 25-acre Barlow Hospital Replacement and Master Plan Project site occupies two parcels flanking Stadium Way at its lowest point within a narrow valley defined by the surrounding Elysian

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<sup>2</sup> City of Los Angeles General Plan, Silver Lake-Echo Park-Elysian Valley Community Plan, General Plan Land Use Map, June 2007.

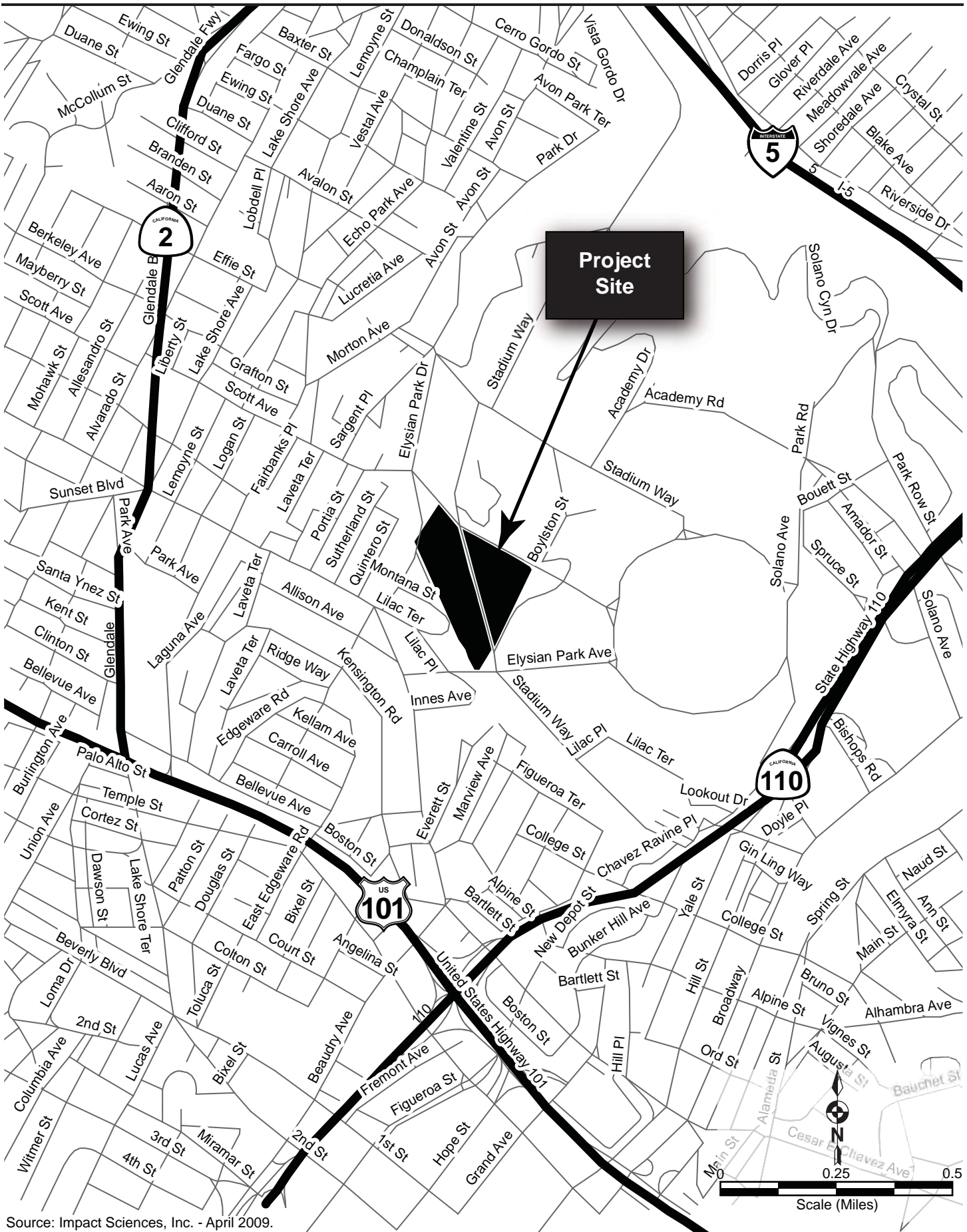


Source: Impact Sciences, Inc. - December 2007.



Figure II-1  
Regional Location Map

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Source: Impact Sciences, Inc. - April 2009.



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Figure II-2  
Project Vicinity Map

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Park Hills. The eastern Project site is bounded by Scott Avenue on the northeast and Boylston Street on the southeast. It is relatively flat where it has been previously graded and developed along Stadium Way, with an elevation differential of approximately 20 feet from north to south and approximately 85 feet between Stadium Way and the highest point on the eastern edge of the property. The western Project site is bounded by Elysian Park Drive on the west and is characterized by steep slopes rising approximately 140 feet above Stadium Way.

Adjacent land uses include Elysian Park to the north; the Los Angeles Police Academy to the north across Academy Way; single-family residences on Boylston Street to the northeast; Dodger Stadium and surface parking to the east and south; and to the west, a neighborhood of single-family and multi-family residences and Victory Memorial Grove and Overlook, which are Elysian Park facilities, on Elysian Park Drive.

The Project site and adjacent land uses are shown in **Figure II-3**, *Aerial Photograph of Project Vicinity*, and **Figure II-4**, *Aerial Photograph of Project Site*.

### **3. PROJECT BACKGROUND**

#### **a. Barlow Respiratory Hospital**

Barlow Hospital was founded in 1902, as Barlow Sanatorium, for the treatment of tuberculosis patients. It is currently developed with a total of 39 buildings originally constructed between 1915 and 1972. The main hospital building was built in phases beginning in 1927 and was most recently expanded in the 1980s.

The Barlow Hospital property was determined eligible for listing in the National Register of Historic Places as an Historic District in 1992, and is therefore listed on the California Register of Historical Resources. The property also was designated Los Angeles Historic-Cultural Monument No. 504 in 1991 by the City of Los Angeles. The period of historical significance for the Project site extends from 1902, when the Project site was purchased, to 1952, when the Sanatorium began to expand its mission to encompass a range of pulmonary diseases. Thirty-two of the existing 39 buildings on the Project site date to the period of significance, with the remaining seven existing buildings considered noncontributors either because they were constructed after the period of historic significance or as the result of alterations leading to a loss of historic integrity.<sup>3</sup>

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<sup>3</sup> Historic Resources Group, *Historical Resources Technical Report, Barlow Hospital Replacement and Master Plan Project*, (2010). Provided in **Appendix IV.D**.

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The history of the Project site is discussed in detail in **Section IV.D, Cultural Resources: Historical Resources**, of this Draft EIR.

Barlow Hospital today is a long-term acute care hospital that treats patients with complex respiratory and related medical conditions who require extended hospital stays and specialized care. In addition to inpatient services, it provides outpatient pulmonary rehabilitation services and other patient and family support services, and conducts research into the study of potential clinical applications of the treatments and technologies related to ventilator dependency, respiratory failure, and other diseases of the respiratory and medically complex patient. Barlow Hospital operates 49 licensed long-term acute care beds on the Project site, including six intensive care unit (ICU) beds, and treats nearly 800 patients annually. The hospital currently employs approximately 344 full-time and part-time staff, including 250 clinical staff and 94 administrative and service support staff, and operates 24 hours per day, 7 days per week.

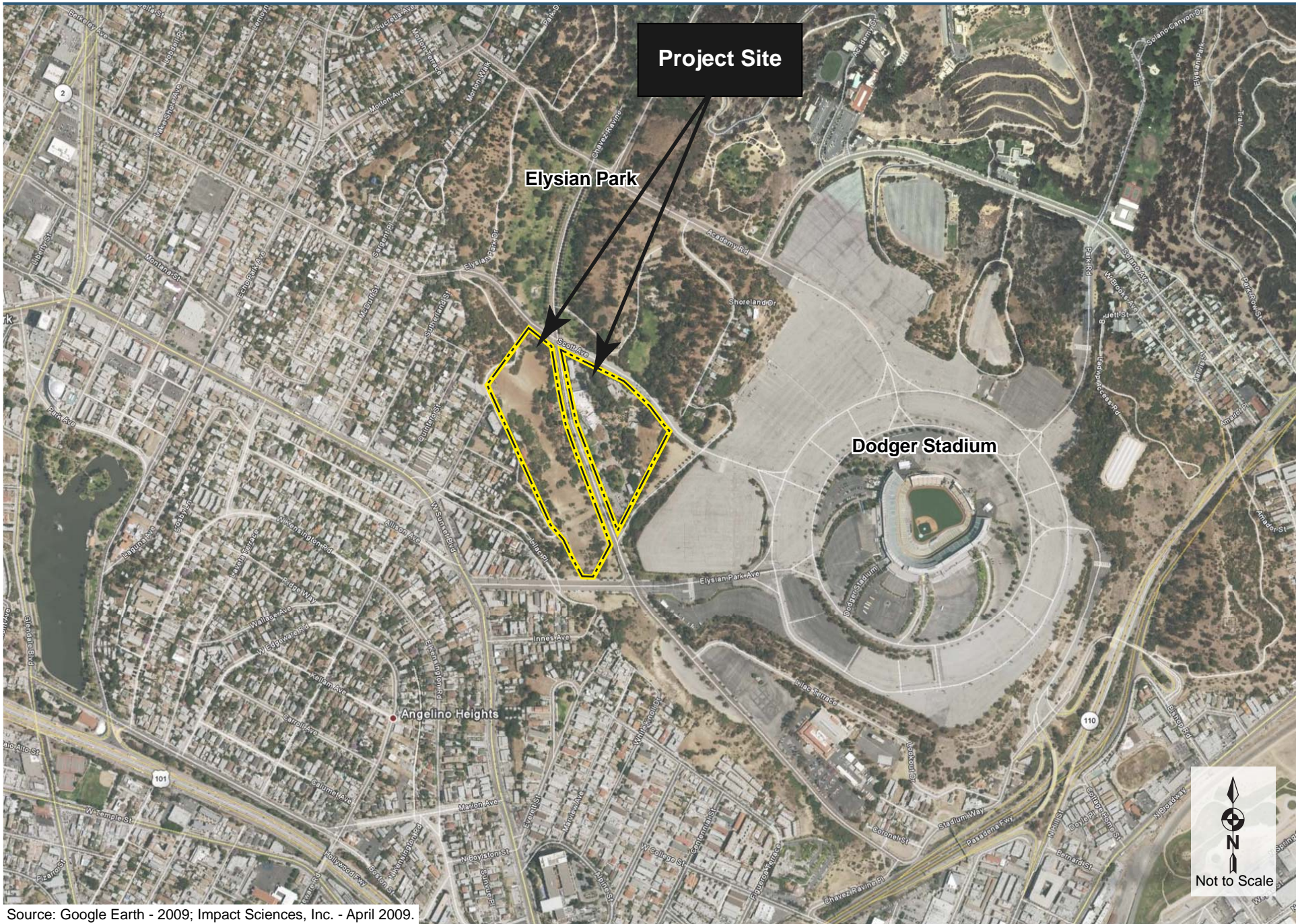
The average Barlow Hospital patient stay in 2011, the most recent period for which data is available, was 31.9 days, for an annual patient-day treatment of 25,254 days.<sup>4</sup> Eighty-five percent of all Barlow Hospital's admissions are respiratory, compared to 46 percent for all long-term acute care facilities in Los Angeles County, and patients often transfer from emergency rooms or intensive care facilities in general acute care hospitals. The majority of hospitals in Los Angeles County are general acute care hospitals, where the average stay is four to six days; fewer than 10 provide long-term care. The ability of a long-term acute care hospital to admit a patient for a long-term stay therefore allows increased turnover in area general acute care hospitals.

In addition to the Project site, which constitutes the main campus, Barlow Hospital operates beds under its license at two other facilities: Presbyterian Intercommunity Hospital in Whittier and Valley Presbyterian Hospital in Van Nuys. The proposed Project encompasses only the Project site; beds operated under Barlow Hospital's license at other facilities are not affected by or part of the proposed Project.

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<sup>4</sup> A hospital's annual "patient days", or the number of days of contracted care provided to patients by a hospital, are defined as the length of a patient's hospital stay in days, as measured between admittance and discharge, multiplied by the number of annual patient admissions for single episodes of care. The number of patient days is a performance indicator for a given hospital and is determined by its size (number of beds), the type of services offered, and other variables. Barlow Hospital admitted 791 patients in FY 2011 to the main hospital facility and two satellite facilities, for an average stay of approximately 31.9 days apiece and a total of approximately 25,254 patient days for that year.





Source: Google Earth - 2009; Impact Sciences, Inc. - April 2009.



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Source: Google Earth - 2009; Impact Sciences, Inc. - April 2009.



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Figure II-4  
Aerial Photograph of Project Site



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b. The Northridge Earthquake and SB 1953, SB 1661

The 1994 Northridge Earthquake caused extensive damage to hospitals throughout the Los Angeles region, necessitating the immediate closure of 11 facilities and increasing the patient care burden for still-operational hospitals. As a result of the earthquake, the State signed SB 1953, the Hospital Facilities Seismic Safety Act, into law in September 1994, directing hospitals in California to comply with seismic building code safety requirements by specific deadlines.<sup>5</sup>

Barlow's main hospital building on the Project site, which houses current hospital operations, suffered structural damage in the Northridge earthquake. A structural assessment of all of the buildings on the Project site, including the hospital building, was conducted in 1998 and characterized the earthquake damage to the 1926 hospital building and 1916 cafeteria addition as significant, with underlying structural deficiencies.<sup>6</sup> Needed structural repairs are described as affecting all portions of the hospital building and likely to exceed 50 percent of the cost of building replacement, as well as resulting in major disruption or cessation of hospital operations and a likely permanent reduction in bed count as the result of ADA compliance.

A report prepared in 1999 evaluated the 1972 hospital building additions and noted serious seismic deficiencies, weakening resulting from the Northridge earthquake, and the potential for significant future earthquake damage.<sup>7</sup>

The most recent survey of the hospital building evaluated its structural strength in accordance with FEMA's HAZARDS U.S. (HAZUS) Assessment Program, a seismic evaluation program for hospitals developed to implement the seismic safety requirements of SB 1953 and determine the probability of collapse. Under the HAZUS Program, hospital buildings fall into one of five structural performance categories (SPC), with SPC 1 buildings representing those most at most risk and SPC 5 buildings fully in compliance with SB 1953 structural safety requirements. Barlow Hospital was confirmed to be an SPC 1 building, with an estimated 5.75 percent risk of collapse following major ground shaking. SB 1953 requires SPC 1 hospitals to demonstrate compliance with seismic code by January 1, 2013; the subsequently enacted SB 1661 allows hospitals that are planning replacement facilities to operate until January 1, 2015 under certain circumstances.

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<sup>5</sup> SB 1953, Hospital Facilities Seismic Safety Act, Chapter 740, Statutes of 1994.

<sup>6</sup> Dasse Design Inc., Structural Engineers, *Engineering Study of Earthquake Damage*, January 22, 1998. Provided in **Appendix II**.

<sup>7</sup> RISHA Engineering Group, Inc., Civil, Structural & Construction Consultants, *Additional Findings and Report: Earthquake Damage Assessment of the 1972 Additions for Barlow Hospital*, June 1999. Provided in **Appendix II**.

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Therefore, Barlow Hospital is only permitted to continue operations in its current, unretrofitted facility until January 1, 2013. In accordance with SB 1953, Barlow Hospital submitted an application to OSHPD to construct a replacement facility that meets current seismic code requirements for hospitals; approval of schematic design/structural framing was granted in 2009.<sup>8</sup> The 2009 approval allows Barlow to continue operations until January 1, 2013 while finalizing hospital plans, developing a construction schedule, and identifying contractors. Under SB 1661, Barlow may apply for an extension to continue operations in its current facility until January 1, 2015, but in order to qualify for the extension, it must have completed environmental review and secured the necessary entitlements for the replacement hospital, be under construction at the time of the extension request, and be able to demonstrate reasonable progress toward meeting the deadline of occupying a replacement facility on or before January 1, 2015.

### c. Project Overview

The applicant seeks to construct a replacement hospital, administration and support facility, and skilled nursing facility on a portion of the Project site. The applicant also seeks redevelopment of the remainder of the Project site with a collection of residential communities to augment and help fund the proposed replacement hospital. The residential communities are intended to be compatible with surrounding land uses, including Elysian Park and the Echo Park neighborhood. Eleven of the 39 existing buildings on the Project site would be retained as part of the Project and adapted by Barlow Hospital for a range of uses for the benefit of Project residents and the larger Echo Park community. The remaining 28 buildings on the Project site would be demolished.

To initiate the CEQA compliance process for implementation of the proposed Master Plan Project, the Notice of Preparation and Initial Study for the Barlow Hospital Replacement and Master Plan Project were published in August 2009. The 30-day public comment period began on August 25, 2009 and ended on September 23, 2009. During the public comment period, comments from state, regional, and local public agencies and organizations, as well as from individuals and community members, were received.

Copies of the Notice of Preparation, Initial Study, and the correspondence received during the public comment period are included in **Appendix I**.

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<sup>8</sup> Barlow Respiratory Hospital, *Replacement Hospital Project: First Phased Plan Review Submittal: OSHPD SB1661 Submittal*, December 23, 2008.



#### 4. EXISTING CONDITIONS

##### a. Project Site Overview

Development on the eastern and western Project sites includes a collection of 39 buildings and structures built between 1915 and 1972; surface parking; internal roadways; common outdoor areas; ornamental landscaping and gardens; and undeveloped hillside slopes supporting a mix of ornamental, ruderal, and native vegetation.

The eastern Project site contains 28 buildings, including the main hospital complex, which houses present operations; patient service and administrative facilities; a library; and ten former residences (“cottages”) set into the slope that forms the eastern edge of the site. The western Project site contains eight residential cottages along Stadium Way and two currently occupied staff residences, the Medical Director’s Residence and the Doctor’s Cottage, at the top of the slope on Elysian Park Drive.

On-site development is summarized in **Table II-1, Summary of Existing Facilities**, and, as shown therein, totals approximately 138,380 square feet. Of the 39 existing on-site buildings, 32 are considered contributors to the Barlow Hospital Historic District, as indicated in the “Building No.” column in **Table II-1**. Some pedestrian circulation and landscape features are also contributing elements to the Historic District. The remaining seven buildings on the Project site were either constructed after the period of significance or have been heavily altered and no longer retain historic integrity, and are not considered contributors to the Historic District.

Existing development is shown in **Figure II-3, Aerial Photo of Vicinity**, and **Figure II-4, Aerial Photo of Project Site**, previously referenced, and in **Figure II-5, Project Site – Existing Development**.

The Project site is designated as OS, Open Space, in the Silver Lake–Echo Park–Elysian Valley Community Plan. This designation denotes land that supports one or more of the following uses: recreational and educational opportunities; scenic, cultural, and historical values; public health and safety; preservation of community identity; preservation of natural resources; and preservation of physical or scenic resources, including topographic features and ridge protection. The designation does not necessarily connote publicly accessible lands; the Project site has been privately owned and operated as a hospital since 1903 and does not contain public lands or parklands.

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**Table II-1  
Summary of Existing Facilities**

Building No. <sup>a</sup>	Building Name	Building Function	Date of Construction	Square Footage (approx. Gross Square Feet)
<b>Administration</b>				
1	Administration	Administrative Offices	1961	2,560
2	Hospital	Infirmery/Hospital	1927/1972/1978	69,250
2A <sup>b</sup>	Cafeteria	Administrative Offices	1902/1919	14,200
<b>Patient Services</b>				
3 <sup>b</sup>	Williams Hall	Recreation	1909	2,300
4 <sup>b</sup>	Library	Patient Education	1921	1,390
28 <sup>b</sup>	Warehouse	Patient Workshop and Storage	1912	800
<b>Professional and Worker Housing</b>				
5 <sup>b</sup>	Help Building (Guild House)	Worker Housing	1920	4,560
7 <sup>b</sup>	Birge Hall	Staff Housing	1919	7,455
8 <sup>b</sup>	Physician's Residence	Staff Housing	1908/1913/1941	1,505
9 <sup>b</sup>	Bosworth Hall	Nurses' Housing	1949	8,320
37 <sup>b</sup>	Doctor's Cottage	Staff Housing	1940	2,030
38 <sup>b</sup>	Medical Director's Residence	Staff Housing	1936	4,130
<b>Maintenance</b>				
6 <sup>b</sup>	Laundry Building	Laundry Services	1910	2,410
10	Central Supply II	Storage	1924/1970	575
21	Carpenter's Shop	Animal Breeding	1940	960
22	Shed	Maintenance	1954 or later	90
23 <sup>b</sup>	Garden Shed	Workers' Cottage	1907/1908	310
24	Garden Shed	Maintenance	No Date	280
25 <sup>b</sup>	Paint Locker	Workers' Cottage	1906/1907	340
26 <sup>b</sup>	Maintenance Shop/El Baño	Bath/Maintenance	1916	685
27	Garage	Staff Garage	1920/1923	775
<b>Patient Housing</b>				
11 <sup>b</sup>	Elizabeth G. Bonfilio Memorial Cottage	Patient Cottage	1914	425
12 <sup>b</sup>	St. Bernardine Cottage	Patient Cottage	1927	810
13 <sup>b</sup>	Lyon's Memorial Cottage	Patient Cottage	1924	760
14 <sup>b</sup>	Beeman Memorial Cottage	Patient Cottage	1922	650
15 <sup>b</sup>	Slauson & McNeill Memorial Cottage	Patient Cottage	1919	650
16 <sup>b</sup>	Milbank Cottage	Patient Cottage	1926	785
17 <sup>b</sup>	Red Cross II Cottage	Patient Cottage	1919	650
18 <sup>b</sup>	Red Cross I Cottage	Patient Cottage	1919	645
19 <sup>b</sup>	Red Cross III Cottage	Patient Cottage	1919	640
20 <sup>b</sup>	Red Cross VI Cottage	Patient Cottage	1919	645
29 <sup>b</sup>	Big Red Cross Cottage	Patient Cottage	1919	2,165
30 <sup>b</sup>	Stevens Cottage	Patient Cottage	1919	650
31 <sup>b</sup>	HCR	Patient Cottage	1918	685

**Table II-1  
Summary of Existing Facilities**

<b>Building No.<sup>a</sup></b>	<b>Building Name</b>	<b>Building Function</b>	<b>Date of Construction</b>	<b>Square Footage (approx. Gross Square Feet)</b>
32 <sup>b</sup>	Allen Cottage	Patient Cottage	1918	665
33 <sup>b</sup>	Thorne Cottage	Patient Cottage	1917	650
34 <sup>b</sup>	Shrine Cottage	Patient Cottage	1918	650
35 <sup>b</sup>	Morrison Cottage	Patient Cottage	1921	680
36 <sup>b</sup>	Eshman Cottage	Patient Cottage	1927	650
<b>Total</b>				<b>138,380</b>

<sup>a</sup> Building numbering corresponds to the mapped buildings shown in Figure II-5, Project Site – Existing Development, in Section II, Project Description, of this Draft EIR. As shown therein, Building 2, the main hospital facility, and Building 2A, the hospital cafeteria, are two distinct buildings, but are adjacent and connected. Thus, there are 39 buildings extant on the Project site, numbered as Buildings 1 through 38, plus 2A.

<sup>b</sup> Buildings determined to be contributors to the Historic District.

Source: HRG, March 2012

The zoning designation for the Project site is A1-1VL, Agriculture – “Very Limited” Height District 1, which allows for single-family dwellings, parks, community centers, golf courses, and agricultural uses.<sup>9</sup> The permitted FAR on the Project site is 3:1 and building heights are limited to three stories and 45 feet.<sup>10</sup>

### **b. Vehicular Circulation**

The eastern Project site is accessible via two driveways off Stadium Way, one off Scott Avenue, and one off Boylston Street, which provide access to on-site parking. Several roadways traverse the eastern Project site, providing access to buildings on the Project site. Driveways are stop sign-controlled and site ingress and egress are unrestricted.

The portion of the Project site west of Stadium Way is accessible via a driveway off Stadium Way that leads to parking for the eight residential cottages along the street. At the top of the slope, two staff residences are served by driveways accessible from Elysian Park Drive.

<sup>9</sup> Los Angeles Municipal Code, Sec. 12.05.

<sup>10</sup> Los Angeles Municipal Code, Section 12.21.1.A.1.

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### **c. Parking**

The majority of the existing parking supply for Barlow Hospital is located on the eastern Project site in several surface parking lots, scattered groupings of parking spaces adjacent to certain buildings, and some spaces on internal Project site roadways.

The primary lot for hospital employees, patients and visitors, with 74 spaces, occupies the southern tip of the site and is accessed from Stadium Way just north of Boylston Street.

A second, smaller surface lot serving hospital employees and patients, with approximately 39 spaces, is located north of the main hospital building (Building No. 2) and behind Birge Hall (Building No. 7) at the northern tip of the site, and is accessed from two driveways, one on Stadium Way south of Scott Street and one on Scott Street just west of the intersection with Stadium Way.

Small surface parking lots are located at the northeastern edge of the eastern Project site, accessed from Boylston Street, and east of the Laundry Building (Building No. 6).

The cottages on the western Project site are accessible via a driveway off Stadium Way, opposite the main hospital building, that provides parking for several vehicles. The two residential buildings at the top of the slope along Elysian Park Way are also served by driveways and parking for several cars.

On-site parking totals approximately 146 spaces. On-street parking is permitted by the City on Stadium Way, Scott Avenue, and Boylston Street.

## **5. PROJECT CHARACTERISTICS**

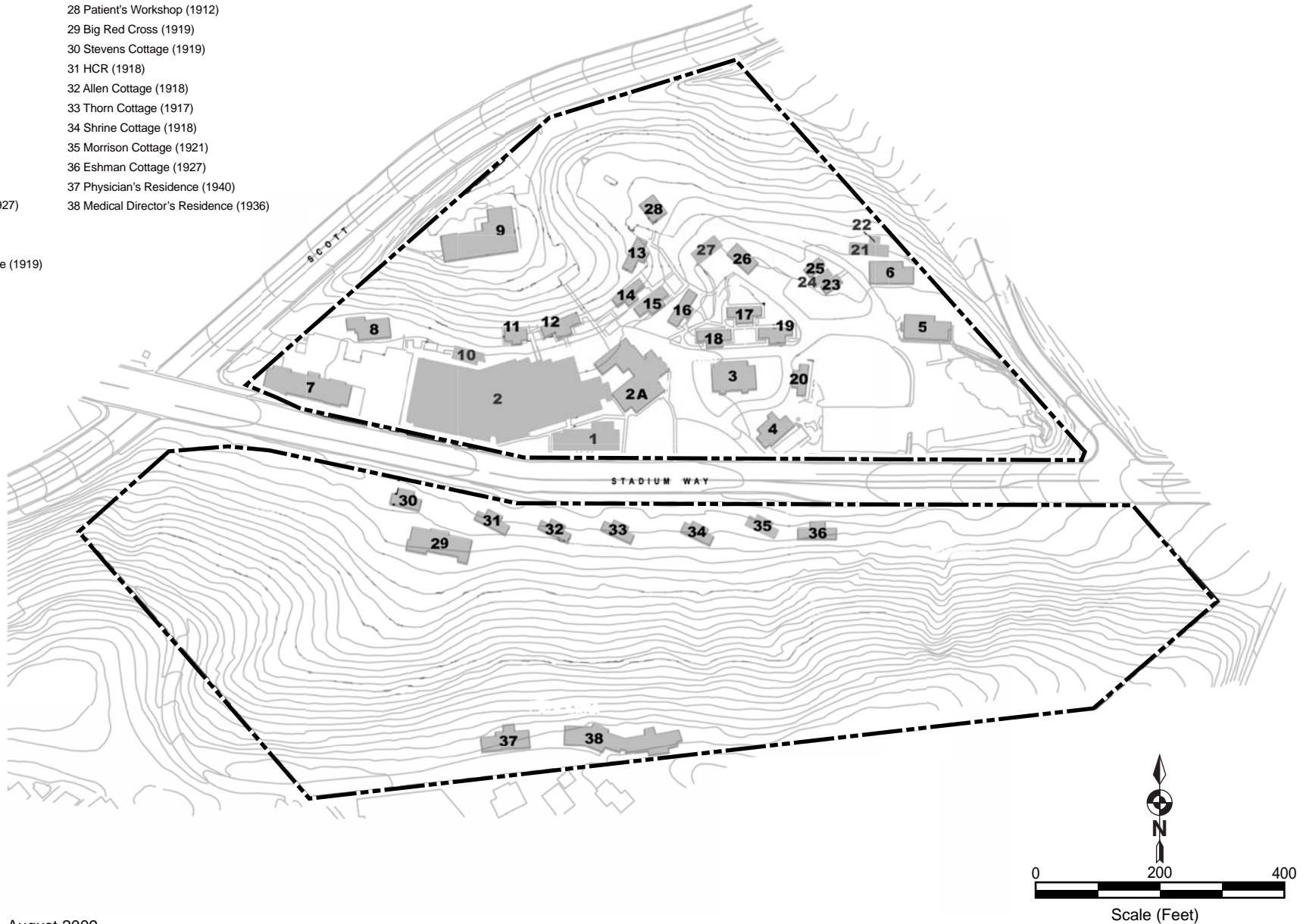
### **a. Project Overview**

The proposed Project would construct a replacement hospital, associated administration and support facility, and skilled nursing facility, plus required parking, on a parcel occupying a portion of the eastern Project site. Nine buildings determined to contribute to the Barlow Hospital Historic District would be retained and located on a single proposed parcel adjacent to the replacement hospital, and an additional two contributing buildings would be retained on the western Project site.

The remainder of the Project site would be subdivided and developed with up to 888 multi-family dwelling units, including condominiums and townhomes, and approximately 15,000 square feet of

## LEGEND

- |                                     |  |
|-------------------------------------|--|
| 1 Administration (1961)             | 26 El Bano (1916)                      |
| 2 Hospital (1927/1972/1978)         | 27 Garage (1921)                       |
| 2A Kitchen/Cafeteria (1902)         | 28 Patient's Workshop (1912)           |
| 3 Williams Hall (1909)              | 29 Big Red Cross (1919)                |
| 4 Library (1921)                    | 30 Stevens Cottage (1919)              |
| 5 Guild House (1920)                | 31 HCR (1918)                          |
| 6 Laundry Building (1910)           | 32 Allen Cottage (1918)                |
| 7 Birge Hall (1919)                 | 33 Thorn Cottage (1917)                |
| 8 Physician's Cottage (1908)        | 34 Shrine Cottage (1918)               |
| 9 Bosworth Hall (1949)              | 35 Morrison Cottage (1921)             |
| 10 Central Supply II (1924)         | 36 Eshman Cottage (1927)               |
| 11 Bonfilio Cottage (1914)          | 37 Physician's Residence (1940)        |
| 12 St. Bernardine Cottage (1927)    | 38 Medical Director's Residence (1936) |
| 13 Lyons Cottage (1924)             |  |
| 14 Beeman Cottage (1922)            |  |
| 15 Slauson & MacNeil Cottage (1919) |  |
| 16 Milbank Cottage (1926)           |  |
| 17 Red Cross II (1919)              |  |
| 18 Red Cross I (1919)               |  |
| 19 Red Cross III (1919)             |  |
| 20 Red Cross IV (1919)              |  |
| 21 Carpenter's Shop (c.1940)        |  |
| 22 Shed (post-1954)                 |  |
| 23 Gardening Shed (1908)            |  |
| 24 Gardening Shed (various)         |  |
| 25 Paint Locker (1907)              |  |



Source: Arcelab, Inc. - August 2009.



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Figure II-5  
Project Site - Existing Development

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neighborhood-serving commercial uses. The residential portion of the proposed Project would comprise a collection of small residential communities.

The residential component of the Project is intended to complement the proposed replacement hospital and acknowledge the historical use of the site. This would be achieved through incorporation of sustainable design and energy conservation features into building design, construction, and landscaping; the provision of approximately 8.8 acres of open space including 1,8 acres of recreational amenities; and the provision of community rooms and multigenerational programs for use by residents of the Project site's residential community and the larger Echo Park community. Amenities proposed on the Project site include the following:

- Publicly accessible community space and community-serving programs in adaptively reused historic buildings on the hospital property (totaling approximately 1,500 square feet);
- Public use of hospital meeting rooms for community meetings;
- Hospital meals delivered to senior homeowners;
- Central swimming pool and two Jacuzzis/spas;
- Two playgrounds with play equipment for children totaling 0.50 acres;
- Sports facilities, including basketball, handball, and tennis courts;
- Fitness rooms in each residential building;
- Walking trails;
- Hillside stairs similar to those found throughout Echo Park;
- Community gardens totaling 0.75 acres;
- Bicycle paths and parking; and
- Sitewide disabled access.

As shown in **Figure II-6, Proposed Site Plan**, the applicant proposes to subdivide the Project site into 15 parcels and seek General Plan Amendments and Zone Changes consistent with proposed redevelopment. One proposed parcel would encompass the replacement hospital, administration

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and support facility, and skilled nursing facility (Hospital Parcel). An adjacent proposed parcel would encompass nine historically significant buildings and landscaping (Historical Parcel). Twelve parcels would be developed with residential uses (proposed Parcels 1–6 and 8–13) and one parcel would be developed with residential plus neighborhood-serving commercial uses (proposed Parcel 7). The residential uses on proposed Parcels 1-12 would be condominiums; those on proposed Parcel 13 would be townhomes.

General Plan Amendments are sought to change the land use designation from Open Space to Neighborhood Commercial for the proposed Hospital and Historical Parcels; High Medium Residential for proposed Parcels 1-12; and Low Density Residential for proposed Parcel 13. Zone Changes are proposed from A1 to [Q]C1, Limited Commercial, for the Hospital and Historical Parcels; [Q]RAS4, Residential/Accessory Services, for proposed Parcels 1 through 12; and RD1.5, Restricted Density Multiple Dwelling, for proposed Parcel 13. Major Project components are described below and illustrated in renderings shown in **Figures II-7 through II-10**.

### **i. Replacement Hospital, Administration and Support Facility, and Skilled Nursing Facility (“Hospital Parcel”)**

The proposed replacement hospital, administration and support facility, and skilled nursing facility would be sited together within a proposed 3.25-acre Hospital Parcel at the corner of Stadium Way and Boylston Street, at the southern tip of the eastern Project site. Each of the three facilities on this parcel is described below.

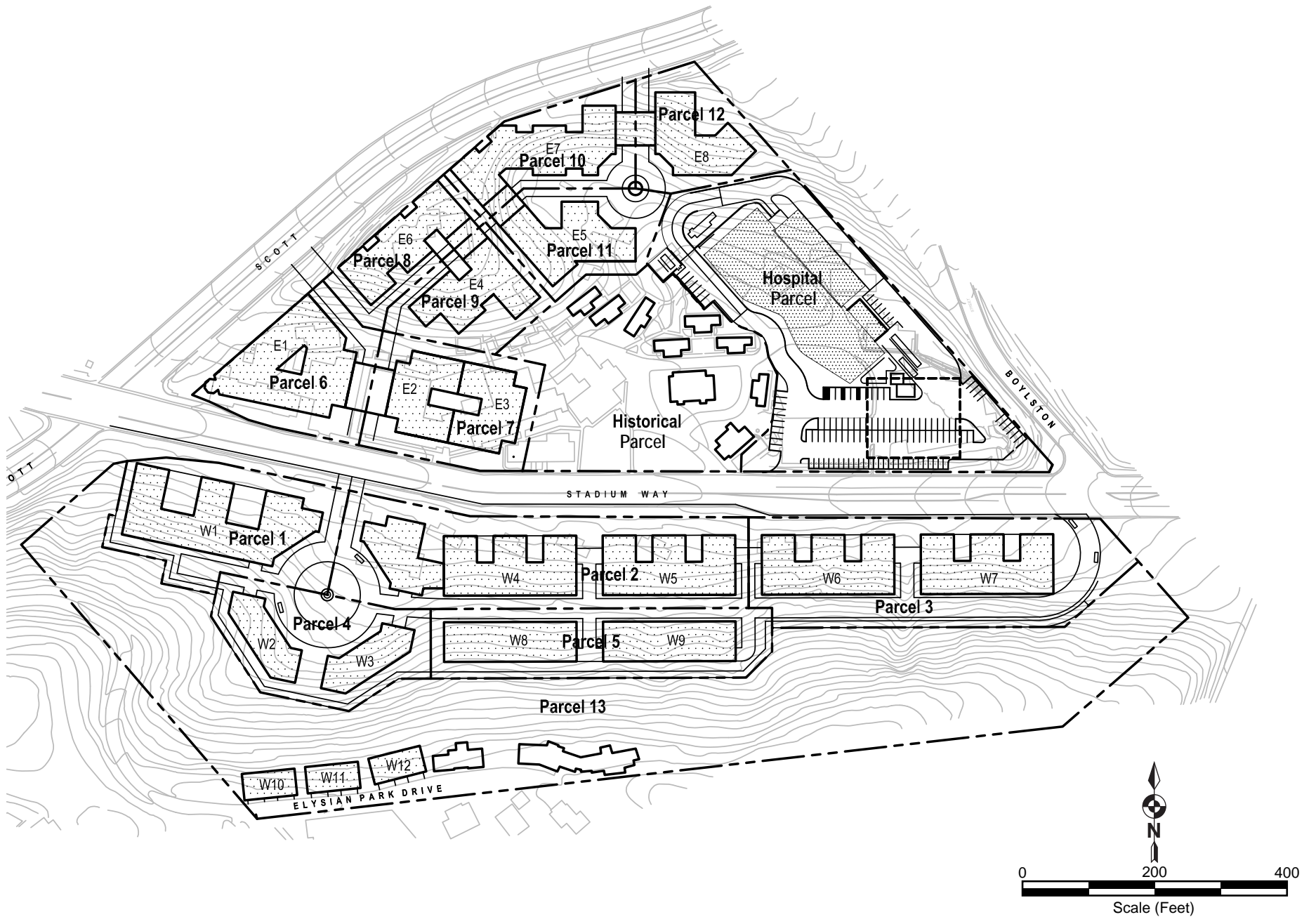
#### ***Long-Term Acute Care Respiratory Hospital***

The proposed replacement hospital would be located south of the current hospital. It would be approximately 83,000 square feet and would house 56 beds, an increase of 13,750 square feet and seven beds (including two additional ICU beds) compared to the existing hospital. The replacement hospital would be four stories (51 feet) in height above adjacent grade and constructed in a modern architectural style.<sup>11</sup> The replacement hospital would continue to provide all services presently offered by Barlow Hospital and would include eight acute respiratory care (ICU) beds and 48 general acute care beds; surgery; radiology; a lab and pharmacy; acute care nursing; a nursing support unit; diagnostic and treatment services; and administrative and general support services. Project implementation would also include a comprehensive upgrade of equipment and

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<sup>11</sup> Building heights are measured to the top of building roof decks, exclusive of rooftop mechanical equipment or other structures.





Source: Arcelab, Inc. - August 2009.



**ARROYO**  
ENVIRONMENTAL, LLC

Figure II-6  
Proposed Site Plan

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*Note: Renderings are conceptual only and are intended to communicate approximate proposed building location, massing, and height. Renderings are not intended to convey or guarantee finished building design or appearance.*

Source: Arcelab, Inc. - August 2009.



**ARROYO**  
ENVIRONMENTAL, LLC

Figure II-7  
Proposed Development:  
View North Along Stadium Way

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*Note: Renderings are conceptual only and are intended to communicate approximate proposed building location, massing, and height. Renderings are not intended to convey or guarantee finished building design or appearance.*

Source: Arcelab, Inc. - August 2009.



**ARROYO**  
ENVIRONMENTAL, LLC

Figure II-8  
Proposed Development:  
View Northwest From Above N. Boylson Street

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*Note: Renderings are conceptual only and are intended to communicate approximate proposed building location, massing, and height. Renderings are not intended to convey or guarantee finished building design or appearance.*

Source: Arcelab, Inc. - August 2009.



**ARROYO**  
ENVIRONMENTAL, LLC

Figure II-9  
Proposed Development:  
View South Along Stadium Way

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*Note: Renderings are conceptual only and are intended to communicate approximate proposed building location, massing, and height. Renderings are not intended to convey or guarantee finished building design or appearance.*

Source: Arcelab, Inc. - August 2009.



**ARROYO**  
ENVIRONMENTAL, LLC

Figure II-10  
Proposed Development:  
View Southwest From Above Scott Avenue

## **II. Project Description**

infrastructure to support the needs of a modern hospital. Hospital hours of operation would remain unchanged from current hospital hours of operation at 24 hours per day, 7 days per week.

The replacement hospital and administration and support facility would employ approximately 369 full-time and part-time employees, an increase of 25 employees over the number currently employed by the hospital.

***Administration and Support Facility***

An administration and support facility is proposed adjoining the proposed replacement hospital. This facility would be approximately 31,000 square feet and four stories (66 feet) in height above adjacent grade, and would be accessible, but structurally and functionally separate, from the hospital. It would house non-acute care hospital components, some of which are currently housed in the existing hospital, including a pharmacy, administrative staff offices, meeting rooms, staff lounge, kitchen, and other related uses.

***Skilled Nursing Facility***

The proposed 24-bed subacute care skilled nursing facility would be sited south of the proposed replacement hospital, near the southernmost tip of the Project site. It would be approximately 17,000 square feet and would occupy the second story above a single-level, at-grade parking structure (or podium), for a height of 35 feet above adjacent grade. The skilled nursing facility would offer rehabilitative or long-term skilled medical care for patients recovering from respiratory illnesses. Amenities would include a nursing station, medication room, utility rooms, a dining room, common areas, and administrative offices. The skilled nursing facility would operate 24 hours per day, 7 days per week, and would employ an estimated 96 employees, or 4 employees per bed.

This facility is planned as the final phase of construction and would be constructed on the site of proposed surface parking for the replacement hospital, above structured parking. (See **Section 6**, *Project Construction* for a detailed discussion of phasing).

**ii. Ancillary Hospital Parcel Containing Historic Buildings (“Historical Parcel”)**

The proposed Project would retain nine existing buildings and some of the existing hardscape and landscape within a proposed 2.13-acre parcel north of the proposed Hospital Parcel. All buildings proposed for retention are contributors to the Barlow Hospital Historic District, and some of the hardscape and landscape, and most would remain in their current (original) locations. The

## **II. Project Description**

buildings would remain under the ownership of the hospital and would be adapted to house offices, cultural, recreational, and other programs and facilities for use by the hospital community, Project residents, and the Echo Park community. Buildings to be retained in this proposed parcel would total approximately 8,335 square feet.

### **iii. Residential/Commercial Parcels 1-13**

Proposed Parcels 1-6 and 8-13 would vary in size from 0.54 acres to 6.64 acres and would contain the proposed Project's residential uses. The proposed residential development consists of several small, interconnected communities of for-sale condominiums. Proposed Parcels 1-6 and 8-12 would contain between 46 and 120 dwelling units apiece; proposed Parcel 13 would house three buildings containing 18 townhomes. A total of up to 888 new dwelling units would be developed site-wide, including 444 one-bedroom units, 426 two-bedroom units, and 18 three-bedroom units.

Proposed Parcel 7, on the eastern Project site, would be approximately one acre in size and would be developed with 78 residential units and approximately 15,000 square feet of neighborhood commercial uses to serve Project residents. These would include such uses as a coffee shop, dry cleaning, and similar establishments.

The residential buildings on proposed Parcels 1-12 would be a maximum of four stories, or 75 feet, in height above adjacent grade, including partially subterranean parking podiums. The townhome buildings on proposed Parcel 13 would be three stories, or 35 feet, in height above adjacent grade. Residential buildings would be constructed in a variety of architectural styles that reflect and are compatible with the existing historically significant buildings on the Project site as well as the Echo Park and Silver Lake communities, and could include Craftsman, Spanish Colonial Revival, and Midcentury Modern styles. The buildings would be connected by walkways, or "paseos", and staircases to provide hillside access in the manner of existing outdoor staircases throughout Echo Park.

### **iv. Development Summary**

Proposed new development on the Project site plus buildings to be retained is summarized in **Table II-2, Proposed Development Plus Existing Buildings to be Retained**. As shown therein, the proposed floor area ratio (FAR) for the developed Project site as a whole would be 1.12 (1,211,115 / 1,080,288), although development densities would vary in different proposed parcels. Proposed Parcels 1 through 5 on the western Project site would contain between 51 and 63 dwelling units

**Table II-2  
Proposed Development Plus Existing Buildings to be Retained**

Proposed Parcel	Building No.	Proposed Use	No. of Floors	No. of Units	Building Square Feet	Acreage & FAR or Dwelling Units per Acre	Parking Requirement <sup>a</sup>
<b>Eastern Project Site</b>							
Hospital Parcel [Q]C1, Limited Commercial	Replacement Hospital	Hospital	3	--	83,000	3.254 acres 0.92 FAR	112
	Administration Facility	Administration	4	--	31,000		48
	Skilled Nursing Facility	Nursing	2	--	17,000		
6 (RAS4-1L)	E1	Residential	4	82	98,400	0.90 acres 91.10 du/acre FAR 2.51	123
7 (RAS4-1L)	E2, E3	Residential Commercial	4	78	93,600	1.004 acres 77.68 du/acre FAR 2.14	117 60
8 (RAS4-1L)	E6	Residential	4	46	55,200	0.544 acres 84.56 du/acre FAR 2.33	69
9 (RAS4-1L)	E4	Residential	4	52	62,400	0.652 acres 79.75 du/acre FAR 2.20	78
10 (RAS4-1L)	E7	Residential	4	62	74,400	0.795 acres 77.99 du/acre FAR 2.15	93
11 (RAS4-1L)	E5	Residential	4	58	69,600	0.709 acres 81.81 du/acre FAR 2.25	87
12 (RAS4-1L)	E8	Residential	4	52	62,400	0.690 acres 75.36 du/acre FAR 2.08	78
<b>Subtotal: Proposed New Development on the Eastern Project Site</b>				<b>430</b>	<b>647,000</b>		<b>865</b>
<b>Existing Buildings to be Retained on the Eastern Project Site</b>							
Historical Parcel [Q]C1, Limited Commercial	3 (Williams Hall)	Administration & Support	1	--	Varies	2.129 acres .090 FAR	
	4 (Library)	Administration & Support	1	--			
	14 (Residence)	Administration & Support	1	--			
	15 (Residence)	Administration & Support	1	--			
	16 (Residence)	Administration & Support	1	--			
	17 (Residence)	Administration & Support	1	--			
	18 (Residence)	Administration & Support	1	--			

II. Project Description

**Table II-2  
Proposed Development Plus Existing Buildings to be Retained**

Proposed Parcel	Building No.	Proposed Use	No. of Floors	No. of Units	Building Square Feet	Acreage & FAR or Dwelling Units per Acre	Parking Requirement <sup>a</sup>
	19 (Residence)	Administration & Support	1	--			
	20 (Residence)	Administration & Support	1	--			
<b>Subtotal: Existing Buildings to be Retained on the Eastern Project Site</b>					<b>8,355</b>		<b>0</b>
<b>Proposed New Development on the Western Project Site</b>							
1 (RAS4-1L)	W1	Residential	4	78	93,600	1.296 acres 60.19 du/acre FAR 1.66	117
2 (RAS4-1L)	W4	Residential	4	120	144,000	2.042 acres 58.00 du/acre FAR 1.62	180
	W5	Residential	4				
3 (RAS4-1L)	W6	Residential	4	110	132,000	2.028 acres 54.24 du/acre FAR 1.49	165
	W7	Residential	4				
4 (RAS4-1L)	W2	Residential	4	54	64,800	1.062 acres 50.85 du/acre FAR 1.40	81
	W3	Residential	4				
5 (RAS4-1L)	W8	Residential	4	78	93,600	1.224 acres 63.73 du/acre FAR 1.76	117
	W9	Residential	4				
13 (RD1.5)	W10, 11, 12	Residential	3	18	21,600	6.644 acres 3.0 du/acre. FAR .70	27
<b>Subtotal: Proposed New Development on the Western Project Site</b>				<b>458</b>	<b>549,600</b>		<b>687</b>
<b>Existing Buildings to be Retained on the Western Project Site</b>							
13 (RD1.5)	37 (Residence)	Residential	1	1	2,030	.644 acres 3.0 du/acre FAR .075	--
13 (RD1.5)	38 (Residence)	Residential	1	1	4,130	.644 acres 3.0 du/acre FAR .070	--
<b>Subtotal: Existing Buildings to be Retained on the Western Project Site</b>					<b>6,160</b>		<b>0</b>
<b>Grand Total: Proposed New Development Plus Existing Development to be Retained (Entire Project Site)</b>				<b>888</b>	<b>1,211,115</b>	<b>24.98 acres 1.12 FAR</b>	<b>1,552</b>

<sup>a</sup> The parking requirement assumes 1.5 spaces/residential unit, 4 spaces/1,000 commercial square feet, and 2 spaces per bed for hospital uses and the skilled nursing facility.

Source: Arcelab Inc., April 2009

per acre (du/acre). Proposed Parcels 6 through 12 on the eastern Project site would contain between 75 and 91 du/per acre. Proposed Parcel 13 would contain 2.7 du/acre.

Of the 39 existing buildings on the Project site, totaling approximately 138,380 square feet, 28 buildings totaling approximately 123,865 square feet would be demolished. Buildings to be demolished include 21 of the 32 contributors to the Historic District plus seven noncontributing buildings. Most of the existing hardscape and landscape features, including contributing features to the Historic District, would also be demolished.

The Barlow Hospital Replacement and Master Plan Project is expected to require approximately 10 years for full implementation following Project approval by the City of Los Angeles, with Project approval expected in 2012.

**b. Vehicular Access, Circulation and Parking**

**Access and Circulation.** Loading docks and service yards for the proposed replacement hospital, administration and support facility, and skilled nursing facility would be accessed from Boylston Street. Employee and visitor ingress and egress to the site would be provided on Stadium Way. Access to the proposed residential communities and associated commercial uses on the eastern Project site would be provided by driveways on Stadium Way and Scott Avenue. The western Project site would be accessed by two driveways on Stadium Way, including one near Boylston Street and one to the north, closer to Academy Road. Both the eastern and western Project sites would be bisected by internal roadways that would provide access to subterranean parking for the residential buildings. The internal roadways would be approximately 40 feet in width to accommodate fire lanes, pedestrian sidewalks, and landscaped parkways.

**Parking.** Project parking demand is summarized in Table II-2, previously referenced. As shown therein, Project parking would be provided in accordance with LAMC requirements. A total of 112 employee and visitor parking spaces, or 2.0 spaces per bed, is proposed for the 56-bed replacement hospital and administration and support facility. These spaces would initially be provided in a surface lot adjacent to the proposed replacement hospital. When the proposed 24-bed skilled nursing facility is constructed, an additional 48 parking spaces, or 2.0 spaces per bed, would be provided. At that time, parking for the hospital and nursing facility would be provided in an at-grade podium structure with the nursing facility occupying the second story.

Parking for the residential and commercial uses in proposed Parcels 1-12 would be provided in partially subterranean podium parking structures and would be distributed in a balanced fashion

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across the Project site. Parking for the proposed townhomes on proposed Parcel 13 would be provided in attached garages. Parking for the proposed replacement hospital and administration and support facilities would be provided in a surface lot south of these buildings, and would be replaced with structured parking at the time the skilled nursing facility is constructed; structured parking would then accommodate the proposed replacement hospital, administration and support facilities, and skilled nursing facility.

The Project incorporates the mandatory affordable housing reduced parking incentive provided by LAMC Section 12.22.A.25(d)(1), which allows a reduction in the residential parking requirement if the Project proposes at least a 10 percent set-aside for low-income households. The Project proposes 444 one-bedroom units, 426 two-bedroom units, and 18 three-bedroom units. Under Parking Option 1 of the density bonus ordinance, the required parking ratio for all residential units in a project, inclusive of handicapped and guest parking, may be reduced to one space per one-bedroom unit and two spaces for each two- and three-bedroom unit. Based on this ratio, the parking requirement for the residential component of the Project totals 1,332 spaces. The LAMC parking requirement for the Project's commercial component (i.e., Specialty Retail uses) is 60 spaces.

The proposed Project would therefore provide a total of 1,552 on-site parking spaces. This is compliant with LAMC and is expected to meet all Project parking demand.<sup>12</sup> See **Section IV.L, Transportation**, of this Draft EIR for further discussion of parking demand and supply.

### c. Landscaping

The configuration of open space and proposed landscape program for the Project site are intended to build upon the historical use of the property while complementing the proposed community comprising the residential and hospital uses, and respecting the park-like character and setting of the Project site. Guiding principles for the landscape program are as follows:

- Expand the park-like feel of the Project site;
- Provide landscape screening of undesirable views and adjacent heavy traffic areas such as Dodger Stadium;

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<sup>12</sup> Crain & Associates, *Traffic Analysis for the Barlow Respiratory Hospital Mixed-Use Development, City of Los Angeles*, (2011).



- Maintain and enhance pedestrian access and connections to adjacent parkland and neighborhoods via walkways, paths, trails, stairs and ramps; and
- Create welcoming and usable outdoor spaces.

Within the proposed Hospital and Historical Parcels, landscape plantings would be used to highlight driveway and building points of entry, complement existing and new buildings, and (in the proposed Hospital Parcel) soften building massing and hardscape areas (i.e., roadways, surface parking, and/or parking structures).

Portions of the historical landscape, including trees and plantings, open areas, gardens, and pedestrian walkways, would be retained within the proposed Historical Parcel (See **Section IV.D, Historical Resources**, of this Draft EIR for further discussion). This area would serve as a major open space feature at the center of the eastern Project site, preserving the existing views from Stadium Way and providing a buffer between the replacement hospital and associated facilities and activities to the south and residential uses

Specific design guidelines and plant palettes would be implemented within the proposed Historical Parcel, Hospital Parcel, and residential parcels on the Project site, and along internal street frontages and streets surrounding the Project site.

Plantings along the street frontages of parcels would vary. Stadium Way would be lined with five-foot landscaped pedestrian parkways along both sides of the street. Where required, retaining walls would be low, clad with unobtrusive materials, and vegetated. Street trees along Stadium would not mimic or compete with the palms lining Stadium Way north of Academy Road (Avenue of the Palms), but would reflect the naturally-occurring tree species on the Project site, such as sycamores.

Interior streetscapes on the western Project site would complement the tall buildings and narrow right of way, and would include smaller-scale trees, closely spaced to distinguish it from the more formal, large-scaled Stadium Way streetscape.

#### **d. Lighting and Signage**

Ambient nighttime light levels in the Project area vary considerably, influenced by the presence of Dodger Stadium immediately to the east, which is very brightly illuminated when in use; Elysian Park to the north, which exhibits relatively low levels of nighttime lighting; and single- and multi-

## **II. Project Description**

family residential uses to the west along Elysian Park Drive, an area that is moderately brightly illuminated at night but screened from view in the Project vicinity by topography.

Lighting on the Project site would be designed to be appropriate for the different uses proposed. The primary objective of proposed lighting is to illuminate building entrances, common areas, pedestrian walkways, parking structures entrances, and surface parking lots to ensure a safe, adequately lighted nighttime environment on the Project site for hospital patients, employees, and visitors, and for the residents of and visitors to the residential community. Energy-efficient, long-life lighting sources would be used where possible to manage the Project's energy consumption. Control systems for lighting would be used to reduce power usage.

### **i. Hospital Parcel**

Lighting within the proposed Hospital Parcel would focus on illuminating the primary hospital entrance, skilled nursing facility, and parking areas to allow for the safe interaction of patients, visitors, employees and vehicular traffic. Pedestrian walkways would also be lighted. Additional exterior lighting may include the illumination of loading dock and truck bay areas serving the hospital; decorative uplighting of building facades and other architectural features, especially where visible from public rights-of-way such as Stadium Way; illumination of outdoor areas where people are expected to congregate; and landscape uplights. Illuminated monument signage for the hospital and skilled nursing facility and overhead lighting may be implemented at the parking lot entrance off Stadium Way. Exterior lighting would normally be directed downward to illuminate walking or working surfaces and shielded to prevent glare.

### **ii. Historical Parcel**

The proposed Historical Parcel would be illuminated to lower levels than the proposed Hospital Parcel and would serve as a transitional area between the hospital and residential parcels to the north and east. Lighting in this part of the Project site would include illuminated building entrances, pedestrian walkways, and common areas, as well as landscape uplighting.

### **iii. Residential Parcels**

Lighting throughout the residential portions of the Project site would vary with the design of buildings and outdoor amenities and common areas. Generally, lighting would emphasize building entrances, common areas and amenities such as pools, and pedestrian walkways, and is intended to create a safe and attractive nighttime environment conducive to pedestrian activity throughout the Project site. Particular attention would be paid to creating an appropriate lighting environment on

the portions of the Project site closest to residences to the north, on Boylston Street north of Scott Avenue, and to the west on Elysian Park Drive. Internal Project site roadways and entrances to subterranean parking structures would also be illuminated and illuminated monument signage and overhead lighting may be implemented at driveway entrances off Stadium Way. Commercial uses on proposed Parcel 7, fronting on Stadium Way, may be illuminated at night.

**e. Utilities and Infrastructure**

The Project site has been in operation as a hospital since 1903 and is located in an established urbanized area that is served by water supply, wastewater, storm drain, and other utility infrastructure. Project implementation is expected to require new infrastructure on the Project site for stormwater management, water supply (domestic and fire flow), sanitary sewer needs, and electricity and natural gas. Connections to, and possible upgrading of, off-site municipal infrastructure would be necessary. See **Section IV.G** for further discussion of proposed stormwater management and **Sections IV.M.1** through **IV.M.4** of this Draft EIR for further discussion of anticipated utility demand and infrastructure improvements pertaining to water supply, wastewater, and electricity and natural gas, as well as for discussion of Project-related solid waste collection and disposal.

**6. PROJECT CONSTRUCTION**

**a. Project Phasing**

The applicant has developed a strategy for hospital replacement and redevelopment of the remainder of the Project site. The proposed Project would be implemented in 13 phases over an approximately 10-year period, with buildout anticipated for the year 2022. Each construction phase would include site clearance, demolition, grading and excavation, and construction/building finishing activities, and the required mitigation measures for each environmental topic as defined in **Section IV, Impact Analysis**, and summarized in **Section I, Executive Summary**, of this Draft EIR would be implemented during each distinct phase of construction and operation, as applicable. Although the precise sequencing and location of proposed construction phases have not been defined, it is assumed that some overlap between phases may occur, including overlap between the completion of one phase and the start of another, or simultaneous commencement of more than one phase. The anticipated phases of construction are as follows:

1. Hospital Parcel: Hospital, Administration and Support Facility
2. Infrastructure: 25 percent of on-site roadways and utility improvements

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3. Residential Phase I
4. Residential Phase II
5. Residential Phase III
6. Residential and Commercial Phase IV
7. Historical Parcel: Reuse
8. Residential Phase V
9. Residential Phase VI
10. Residential Phase VII
11. Residential Phase VIII
12. Residential Phase IX
13. Skilled Nursing Facility

The first Project phase encompasses construction of the replacement hospital and administration and support facility in order to meet deadlines set by the Office of Statewide Health Planning and Development for demonstrating progress toward the replacement hospital goal. Implementation of this phase would result in construction of the approximately 83,000-square-foot hospital and 31,000-square-foot administration and support facility, as well as surface parking, hardscape installation, and necessary infrastructure improvements.

The development of approximately 25 percent of all required on-site roadways and utility improvements would be undertaken as a standalone phase prior to the construction of residential uses, with subsequent improvements undertaken as part of the respective residential construction phases.

The residential component of the proposed Project (Residential Phases 1 through IX) is proposed to follow hospital construction and the initial infrastructure construction phase, with each residential construction phase expected to require one year (including site clearing, demolition, grading and excavation, and construction) and construct approximately 100 condominium units. Construction of the proposed commercial uses on proposed Parcel 7 and adaptive reuse of buildings to be retained in the proposed Historical Parcel would occur after approximately half of the residential units are constructed, with commercial construction proposed as part of Residential Phase IV.

The skilled nursing facility would be constructed in a single phase, at which time the replacement hospital's surface parking would be replaced with podium (structured at-grade) parking, with the nursing facility occupying the second floor above the podium. The skilled nursing facility is proposed as the final construction phase.

## **7. INTENDED USES OF THE EIR**

This EIR will serve as the primary source of environmental information for the actions and approvals associated with implementation of the Barlow Hospital Replacement and Master Plan Project. In accordance with Section 21002.1 of the Public Resources Code, also known as the CEQA statute, this EIR is intended to provide the City of Los Angeles with information as to the potential environmental effects of the Project, alternatives to the Project, and mitigation measures which may reduce or avoid any significant effects. This EIR will also be used as an information document by other public agencies, identified below, in connection with any approvals or permits necessary for construction and operation of the proposed Project.

The Los Angeles Department of City Planning is acting as Lead Agency as defined by CEQA for the environmental review of this Project. As licensed acute care and subacute care facilities, respectively, the hospital building and skilled nursing facility would be subject to the review and approval of OSHPD. The administration and support facility, which is classified as a "medical office building use" by OSHPD, would be under the plan review and permit jurisdiction of the City of Los Angeles. Other reviewing agencies for the Project may include, but are not necessarily limited to, the following:

- City of Los Angeles Office of Historic Resources
- Caltrans
- Regional Water Quality Control Board (Region 4, Los Angeles)
- South Coast Air Quality Management District

Discretionary approvals requested for the proposed Project would include, but may not be limited to, the following:

### **Entire Project Site**

- Site Plan Review (LAMC § 16.05)
- Development Agreement (Government Code §§ 65864-65969.5)

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- Vesting Tentative Tract Map (LAMC § 17.15)
- Zoning Administrator Approval of retaining walls in excess of the height and number permitted under LAMC 12.21.C.8(a) (Retaining Walls in Hillside Areas).
- Action by the Cultural Heritage Commission regarding demolition of buildings listed on the California Register of Historical Resources, designated as City of Los Angeles Historic-Cultural Monument No. 504, and determined eligible for listing in the National Register of Historic Places as an Historic District.

### **Hospital Parcel and Historical Parcel**

- General Plan amendment to the Silver Lake-Echo Park-Elysian Valley Community Plan from Open Space to Neighborhood Commercial (LAMC § 11.5.6)
- Zone Change from A1 to [Q]C-1 (LAMC § 12.32)
- Height District Change from 1-VL to 1-L (LAMC § 12.32)
- Transitional Height Variance (LAMC § 12.24.X.22)

### **Parcels 1 through 12**

- General Plan amendment to the Silver Lake-Echo Park-Elysian Valley Community Plan from Open Space to High Medium Residential (LAMC § 11.5.6)
- Zone Change from A1 to [Q]RAS4 (LAMC § 12.32)
- Height District Change from 1-VL to 1-L (LAMC § 12.32)
- Density Bonus/Reduced Parking (LAMC § 12.22.A.25(d)(1))

### **Parcel 13**

- General Plan amendment to the Silver Lake-Echo Park-Elysian Valley Community Plan from Open Space to Low Density Residential (LAMC § 11.5.6)
- Zone Change from A1 to RD1.5 (LAMC § 12.32)

Additional approvals, ministerial or otherwise, may be necessary to execute and implement the proposed Project. Such approvals may include, but are not limited to, architectural design; landscaping; lighting; signage; permits for driveways and curb cuts; issuance of permit approvals for building demolition and grading; approval of the haul route for the export of demolition debris and the import or export of soils; approvals for foundations, retaining walls, and structural

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improvements; building permits; vacation of any existing City streets; installation and hookup approvals for public utilities and related permits; and sewer and water hookup permits.

