

ORDINANCE NO. _____

**AN ORDINANCE APPROVING AMENDMENTS TO PLANNED DEVELOPMENT #19,
AMENDING THE BOUNDARY THEREOF, PERMITTING ITS
REZONING AND PERMITTING THE CONSTRUCTION
OF AN ADDITION TO THE EXISTING INTENSIVE CARE UNIT**

WHEREAS, the Village Council has previously adopted Ordinance No. 2241 on September 11, 1978, designating the property described therein as Planned Development #19; and,

WHEREAS, the Village Council has, from time to time, approved various amendments to Planned Development #19; and,

WHEREAS, the Owners have filed with the Director, a written petition conforming to the requirements of the Comprehensive Zoning Ordinance and requesting amendment of Planned Development #19 to rezone 3801 Highland Avenue from R-1, Single Family Residential to R-4, Single Family Residential; to amend the boundary of Planned Development #19 to include 3801 Highland Avenue; and to construct a 92,000 square foot Intensive Care Unit addition; and,

WHEREAS, such request was referred to the Plan Commission of the Village of Downers Grove, and the Plan Commission has given the required public notice, conducted a public hearing respecting the petition on October 7, 2003, and has made its findings and recommendations, all in accordance with the statutes of the State of Illinois and the ordinances of the Village of Downers Grove; and,

WHEREAS, the Plan Commission had recommended approval of the requested petition, subject to certain conditions; and,

WHEREAS, the Village Council has considered the record before the Plan Commission, as well as the recommendations of Plan Commission.

NOW, THEREFORE, BE IT ORDAINED by the Council of the Village of Downers Grove, DuPage County, Illinois, as follows:

SECTION 1. That the provisions of the preamble are incorporated into and made a part of this ordinance as if fully set forth herein.

SECTION 2. The Comprehensive Zoning Ordinance of the Village of Downers Grove, Illinois, codified as Chapter 28 of the Downers Grove Municipal Code (which ordinance as heretofore amended, is hereinafter referred to as the "Zoning Ordinance"), is hereby further amended by changing to "R-4, Single Family Residence District" the zoning classification of the following described real estate, to wit:

3801 Highland Avenue Parcel:

That part of the East Half of the Southwest Quarter of Section 32, Township 39 North, Range 11 East of the Third Principal Meridian described as follows: Beginning at a point on the west line of the East Half of the Southwest Quarter of said Section 32, a distance of 885.95 feet north (measured on said west line) of the southwest corner of said East Half; thence east on a line which forms an interior angle of 89 degrees 07 minutes with said west line for a distance of 350 feet; thence north parallel with said west line, 250 feet, thence west parallel with the first described course; 350 feet to said west line; thence south on said west line 250 feet, to the point of beginning, except that part thereof dedicated for public highway by dedication deed recorded July 14, 1933 as Document No. 337791, in DuPage County, Illinois, commonly known as 3801 Highland Avenue, Downers Grove, Illinois (PIN No. 06-32-306-003)

SECTION 3. That the current boundary of Planned Development #19 is legally described as follows:

Parcel 1:

Lot A of Evangelical Hospital Association Assessment Plat No. 2 of part of the Southwest Quarter of Section 32, Township 39 North, Range 11 East of the Third Principal Meridian according to the plat thereof recorded November 23, 1977 as Document No. R77-108464 in DuPage County, Illinois, excepting therefrom that part recorded as Lot 1 of Village of Downers Grove Water Utility Assessment Plat according to the plat thereof recorded March 1, 1989 as Document No. R89-022988, in DuPage County, Illinois. (PIN 06-32-306-029, 06-32-306-020, 06-32-306-028); and

Parcel 2:

That part of Section 32, Township 39 North, Range 11, East of the Third Principal Meridian, being a part of Tract One in Lyman Woods an Owners Assessment Plat recorded February 19, 1937 as Document 377346 described as follows: Beginning at the southwest corner of Tract One of said Lyman Woods, being a point where the west line of Tract One of said Lyman Woods intersects the south line of said Section 32; thence northerly along the westerly line of Tract One of said Lyman Woods, 1349.7 feet to a point of intersection with the southerly line extended westerly of Rose Plat of Survey recorded as Document 653255; thence easterly, 25.27 feet along said extended line to a point on a line 25 feet east of and parallel with the west line of said Tract One; thence southerly along said parallel line, 1349.7 feet to a point on the south line of said Section 32; thence westerly along said south line, 25.27 feet to the point of beginning, excepting therefrom the south 33 feet, measured at right angles to the south line of said Section 32, according to the dedication of right of way recorded July 17, 1962 as Document No. R62-23515, in DuPage County, Illinois (PIN 06-32-306-025); and

Parcel 3:

The north 630 feet of the south 1330 feet, as measured along the east line, of Tract One of Lyman Woods an Owners Assessment Plat recorded February 19, 1937 as Document 377346, excepting therefrom the west 25 feet as measured at right angles to the west line of said Tract One, in DuPage County, Illinois (PIN 06-32-306-014);

Parcel 4:

That part of Section 32, Township 39 North, Range 11, East of the Third Principal Meridian described as follows: Beginning at the southwest corner of the Southeast Quarter of the Northwest Quarter of said Section 32; thence northerly along the west line of the east half of the Northwest Quarter of said Section 32, 296 feet; thence east along a line parallel with the south line of the Northwest Quarter of said Section 32, 1197.53 feet; thence south along a line parallel with the west line of the East Half of the Northwest Quarter of said Section 32, 296 feet to a point on the south line of the Northwest Quarter of said Section 32; thence west along the south line of the Northwest Quarter of said Section 32, 1197.53 feet to the point of beginning, excepting therefrom the west 50.00 feet, measured at right angles to the west line thereof, in DuPage County, Illinois (PIN 06-32-107-002); and

Water Tower Parcel:

Lot 1 in Village of Downers Grove Water Utility Assessment Plat according to the plat thereof recorded March 1, 1989 as Document No. R89-022988, in DuPage County, Illinois, (PIN 06-32-306-022).

SECTION 4. That the boundary of Planned Development #19 is hereby amended by adding 3801 Highland Avenue Parcel, legally described as follows:

3801 Highland Avenue Parcel:

That part of the East Half of the Southwest Quarter of Section 32, Township 39 North, Range 11 East of the Third Principal Meridian described as follows: Beginning at a point on the west line of the East Half of the Southwest Quarter of said Section 32, a distance of 885.95 feet north (measured on said west line) of the southwest corner of said East Half; thence east on a line which forms an interior angle of 89

degrees 07 minutes with said west line for a distance of 350 feet; thence north parallel with said west line, 250 feet, thence west parallel with the first described course; 350 feet to said west line; thence south on said west line 250 feet, to the point of beginning, except that part thereof dedicated for public highway by dedication deed recorded July 14, 1933 as Document No. 337791, in DuPage County, Illinois, commonly known as 3801 Highland Avenue, Downers Grove, Illinois (PIN No. 06-32-306-003); and

SECTION 5. That Planned Development #19 is hereby amended to permit construction of a 92,000 square foot Intensive Care Unit addition.

SECTION 4. That approval set forth in Section 5 of this ordinance is subject to the findings and recommendations of the Downers Grove Plan Commission regarding File No. 2003 as set forth in the minutes of their October 7, 2003 meeting, a copy of which is attached hereto and incorporated herein by reference as Exhibit A.

SECTION 5. The approval set forth in Section 5 of this ordinance is subject to the following conditions:

1. When permit plans are submitted, increases or substantial modifications to approved floor areas, bed counts or parking spaces as part of an approved petition may require reevaluation of the Planned Development parking requirement by the Village;
2. Compliance with all Public Works/Engineering requirements outlined in their memorandum dated October 1, 2003 prior to issuance of building and stormwater permits, including recommended turn-guidance signage for vehicles accessing Highland Avenue;
3. Compliance with all applicable Federal, State, and Village laws, ordinances, regulations and policies.
4. Substantial compliance with the plans submitted to the Plan Commission, reduced copies of which are attached hereto and incorporated herein by reference as Group Exhibit B.
5. Substantial compliance with the staff report dated October 3, 2003, a copy of which is attached hereto and incorporated herein by reference as Exhibit C.

SECTION 6. That the Intensive Care facility is consistent with and complimentary to the overall planned development site plan and with the requirements of the R-4, Single Family Residence zoning district.

SECTION 7. That the Mayor and Village Clerk are authorized to sign the above described plans.

SECTION 8. That all ordinances or parts of ordinances in conflict with the provisions of this ordinance are hereby repealed.

SECTION 8. That this ordinance shall be in full force and effect from and after its passage and publication in pamphlet form as provided by law.

Mayor

Passed:

Published:

Attest: _____

Village Clerk

PLANNING & COMMUNITY DEVELOPMENT / STAFF DEVELOPMENT TEAM REPORT

To: Plan Commission
Prepared By: Amanda G. Browne, Planner, Planning and Community Development
 Joseph Skach, AIA, AICP, NCARB, Director, Planning and Community Development
Meeting Date: October 7, 2003
Date Prepared: October 3, 2003

Project Title: Good Samaritan Hospital; Rezoning and Planned Development Amendment
Petitioner: Robert Bearlund for Advocate Health and Hospital Corporation
Petitioner Address: 2025 Windsor Drive, Oakbrook, IL 60523

BACKGROUND INFORMATION

Property Address: 3801 and 3815 Highland Avenue, Downers Grove
Existing Zoning: R-1, Single Family Residence and R-4, Single Family Residence

Requested Action

1. Approval of proposed rezoning of 3801 Highland from R-1, Single Family Residence to R-4, Single Family Residence District per Chapter 28, Section 28-1701, *Amendment to Zoning Classification*.
2. Approval of proposed Amendment to Planned Development No. 19 to amend the boundary of the Planned Development to include 3801 Highland Avenue, and to construct an approximately 92,000 square foot addition to the Intensive Care Unit per Chapter 28, Section 28-1605, *Amendments*.

BACKGROUND

Good Samaritan Hospital is located on approximately 67.4 acres of land located northeast of the intersection of Highland Avenue and 39th Street, and has been operating under Planned Development Number 19 since its initial approval in September of 1978, subject to the site master plan which was revised in 1988. Since the original Planned Development approval, 16 amendments to the Planned Development have been reviewed and approved by the Village, the most recent being the approval of the Cancer Care Center in October of 2000, all of which have been determined to be consistent with the Hospital's master plan. The current proposed amendment to the Planned Development is consistent with the revised site master plan that will be summarized by the petitioner at the Plan Commission hearing.

In addition to rezoning and including additional property into the boundary of the Planned Development, the project consists of adding a 92,000 square foot, 44-bed Intensive Care Unit (ICU) addition on the west side of the existing main hospital building.

The Hospital has successfully concluded its State required public hearing process and has received State authorization for its Certificate of Need (CON). Public hearings were held at the Village Hall on May 19, 2003, and the authorization was granted on August 19, 2003. Also, the petitioner has invited the local community to view a model and to obtain information regarding the current project prior to the Plan Commission hearing.

ANALYSIS**General Description**

The subject of the proposed rezoning is a 1.72 acre parcel of land (250 feet wide by 300 feet deep) located on the east side of Highland Avenue opposite the terminus of Black Oak Drive, entirely encompassed by the hospital property. The property was previously occupied by a single family residential structure, which has been demolished. This property is proposed to be rezoned to R-4, Single Family, and is also proposed to be included within the boundary of the Planned Development, bringing the total area of the Planned Development to 69.12 acres.

The proposed Intensive Care Unit addition is proposed to be approximately 92,000 square feet of floor area and is intended to accommodate 44 ICU beds. The former 36 bed ICU within the main hospital building would be converted to private patient rooms with 18 beds anticipated. The existing parking lot to the immediate west of the main hospital building is proposed to be demolished and reconfigured to the north of the proposed ICU addition.

Zoning and Future Land Use Plan

Proposed rezoning

The entire subject site is zoned R-4, Single Family Residence with the exception of the 3801 Highland property which is proposed to be rezoned from R-1, Single Family to R-4, Single Family. The proposed rezoning is consistent with the zoning designation of the remainder of the existing facility and is also consistent with Future Land Use Plan designation of Residential at 0-6 dwelling units per acre. The proposed addition is also consistent with the zoning district.

Surrounding Land Uses and Zoning:

Direction	Existing Zoning	Existing Use	Future Land Use Plan
North	R-1, Single Family	Lyman Woods Forest Preserve	Open Space
South	R-4, Single Family	Day Care Center; St. Luke's Church; Highland School; Single Family Residences	Residential at 0-6 d.u. per acre
East	R-1 and R-4; Unincorporated	Lyman Woods; Single Family Residences	Open Space and Residential at 0-6 d.u. per acre
West	R-2 and R-3	Park; Medical Building (pursuant to court order); Single Family Residences	Residential at 0-6 d.u. per acre

Site

Land Area

The current gross land area of the Planned Development is 67.40 acres, and it should be noted that the petitioner has recently prepared a new survey of the property. With the addition of the 1.72 acre parcel of land at 3801 Highland Avenue, the total acreage of the subject property would increase to 69.12 acres.

Bulk Characteristics

As noted, the addition is 92,000 square feet in area. It is proposed at two stories tall (above grade) and ranges in height from 31 feet-7inches on the east end (at the existing hospital building) to 28 feet-2 inches on the west end (Highland Avenue). The site slopes gently downward from west (highest) to east (lowest) toward the detention areas along Highland Avenue. The building mass/bulk is low-lying and substantially lower in height than the adjacent 5-story, 380,000 square foot hospital building. Photographs of a context model are attached, and the petitioner will present a more detailed model at the Plan Commission Hearing. The maximum Floor Area Ratio for non-residential uses in residential zoning districts is 0.60. The existing FAR is at 0.45. The proposed ICU addition increases this figure to 0.48, 20% below the maximum.

Greenspace

With respect to required greenspace, Residential zoning districts do not require a minimum greenspace percentage; however, Planned Developments in Residential zoning districts must provide a minimum 30% permanent common openspace (greenspace). The current total greenspace percentage within the Planned Development is 69.6%. Including the proposed ICU addition, the reconfigured parking areas as well as the land area of the 3801 Highland Avenue property, the proposed greenspace percentage is 68.9%.

Consideration should be given to providing landscaped parking islands at the end spaces of parking banks. Also, consideration should be given to additional trees/vertical landscaping along/around the detention areas for additional screening and to make the detention areas a positive visual amenity in addition to a functional utility.

	Required / Maximum	Current	Proposed
Land Area	NA	67.4 acres	69.12 acres
Floor Area (Non-Res)	NA	808,729 sq.ft.	900,685 sq.ft.
FAR	0.60	0.45	0.48
Greenspace	30%	69.6%	68.9%

Yards and Setbacks

All yards and setbacks of the proposed ICU addition would exceed minimum code requirements.

Parking

Per code, required parking for hospital facilities is calculated at 1.2 spaces per bed. There are currently 36 beds in the existing ICU component in the main hospital building. The new ICU addition will contain 44 beds. The former ICU will now accommodate 18 general beds. The result is a net increase of 26 beds and consequently an additional 32 required parking spaces per code. Per the previously approved Planned Development amendment (File 1050, approved October 3, 2000), for the Cancer Care Center, 1,672 spaces were required on the campus, and 2,350 spaces were provided on the hospital campus resulting in a surplus of 678 spaces at that time. This surplus would be reduced by 32 spaces to 646 spaces if the ICU addition is approved.

	<u>Required</u>	<u>Provided</u>	<u>Surplus/Deficit</u>
Last PD Amend/Current	1,672	2,350	678
With ICU Addition	1,704	2,350	646

The petitioner has submitted a Traffic Planning Report as part of the petition which has been reviewed by the Village's Traffic Engineer and is discussed below.

Buildings and Design

The proposed ICU addition is proposed to project westward from the northwest corner of the existing main hospital building. The exterior design of the addition is proposed to complement the existing modernist-based architecture; however, using materials such as brick masonry and stone detailing, architectural concrete and glass curtain wall with overall architectural detailing hearkening a prairie-school influence further breaking down the already low-lying building form. In addition, the building mass is articulated in plan, further helping to integrate its mass with the site and also creating outdoor spaces in the facility.

Consideration should be given to additional architectural detailing on any larger expanses of materials. Architecturally compatible rooftop screening of large heating and ventilating equipment should be provided. Building/site lighting should be employed that visually enhances the architecture but that ensures safety and does not pose negative effects on the surrounding environment.

The addition, if approved, will be constructed to accommodate a possible future vertical expansion; however, approval of additional floors is not being requested at this time but would be subject to Planned Development amendment consideration by the Village.

Public Works / Engineering*Engineering and Stormwater Management*

Public Works Staff and the Village's engineering consultant have reviewed the proposed plans and detail their conclusions in the attached memorandum dated October 1, 2003. The project proposes the construction improvement of an existing detention basin and the construction of one new detention basin, both located to the west of the proposed ICU addition and the reconfigured parking lot, adjacent to Highland Avenue. The Downers Grove Sanitary District has approved the civil engineering plans regarding the proposed sanitary improvements, per the attached correspondence dated September 29, 2003.

There are no outstanding issues affecting the currently proposed petition. Certain procedural requirements will be required prior to issuance of a stormwater permit. In addition, an easement/access agreement for on-site stormwater management utilities will be required to be finalized prior to the issuance of a stormwater permit. Public Works Engineering Staff will be present at the Plan Commission hearing.

Traffic

The Traffic Division has reviewed the petitioner's Traffic Planning Report by Gewalt Hamilton Associates, and concurs with its conclusions and key recommendation to provide turn-guidance signage for vehicles accessing Highland Avenue.

Landscape Plan

The DuPage County Forest Preserve District reviewed the originally proposed landscape plan, and suggested that certain species be removed and substituted due to their invasive and/or non-native characteristics. As indicated in the attached correspondence dated September 30, 2003 from the Lannert Group, the Landscape Architects for the petition, the landscape plan has been modified; however, a final plant substitution needs to be coordinated with the Forest Preserve District.

The revised landscape plan has also been reviewed by the Village Forester who has indicated that the plant materials are acceptable and should be limited to the list of acceptable species provided by the Forest Preserve District due to the proximity of Lyman Woods. Landscaping should also be evaluated on site to minimize potential headlight glare into residential areas.

Other

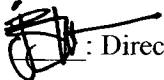
The Illinois Department of Natural Resources has prepared a Consultation Agency Action Report dated April 10, 2003, and has noted that although the site is near the Lyman Woods Illinois Natural Areas Inventory site, no adverse effects are anticipated.

The Illinois Historic Preservation Agency has reviewed the proposed project, and has indicated in the attached correspondence dated April 10, 2003 that as no historic properties are affected, they have no objection to the proposal.

RECOMMENDATION:

The Staff Development Team has reviewed the petitioner's request and concurs to recommend that the Plan Commission consider forwarding a positive recommendation to the Village Council for the proposal to: 1) Rezone 3801 Highland Avenue from R-1, Single Family Residence to R-4, Single Family Residence; 2) Amend the Planned Development by amending its boundary; and 3) Construct an approximately 92,000 square foot, 44 bed Intensive Care Unit addition consistent with the current site master plan, subject to the following:

1. Coordination and concurrence of petitioner suggested plant substitution based on Forest Preserve District recommendations, prior to Village Council consideration;
2. When permit plans are submitted, increases or substantial modifications to approved floor areas, bed counts or parking spaces as part of an approved petition may require reevaluation of the Planned Development parking requirement by the Village;
3. Compliance with all Public Works/Engineering requirements outlined in their memorandum dated October 1, 2003 prior to issuance of building and stormwater permits, including recommended turn-guidance signage for vehicles accessing Highland Avenue;
4. Compliance with all applicable Federal, State, and Village laws, ordinances, regulations and policies.



: Director, Planning and Community Development

- c: Rick Ginex, Village Manager
 David Van Vooren, Deputy Village Manager (Acting Director of Public Works)
 Joseph Skach, Director, Planning and Community Development
 Michael Millette, Assistant Director, Public Works, Engineering
 Jonathan Hall, Development Engineering Manager
 Don Rosenthal, Director, Code Services
 File

INTEROFFICE CORRESPONDENCE DEPARTMENT OF PUBLIC WORKS

TO: Joseph P. Skach, AIA, AICP, Director of Planning and Community Development
FROM: David Van Vooren, Acting Director of Public Works
BY: Michael D. Millette, P.E., Asst. Director of Public Works – Engineering *MM*
Jonathan C. Hall, P.E., Development Engineering Manager II *JH*
DATE: October 1, 2003
RE: Planning / Zoning Petition for Planned Development
Advocate Good Samaritan Hospital – ICU Addition
Public Works Department Review

Documents Reviewed:

- Stormwater Management Report revised 6/27/03
- Engineering Improvement Plans revised 6/27/03

Attachments:

- Christopher B. Burke Engineering, Ltd. (CBBEL) review letter 7/23/03
- CBBEL wetland review letter dated 9/9/03
- IDNR Agency Action Report (endangered / threatened species) dated 4/10/03
- IHPA letter dated 4/10/03
- Review memo from Village Traffic Manager dated 9/26/03

Public Works Review Summary:

Division	Representative	Date	Recommendation	Comments included
Engineering	M. Millette	10/1/03	Approval	X
Stormwater	J. Hall	10/1/03	Approval as noted	X
Water	D. Conley	6/1/03	Approval	
Traffic	D. Fera	9/26/03	Approval (see attached)	X
Forestry	K. von der Heide	10/1/03	Approval as noted	X
Pavement	N/A	N/A	No comments	

Recommendation:

The Public Works Department recommends **approval** of the subject petition. All comments shall be addressed prior to building and stormwater permit issuance.

Public Works Department Review:

Engineering Review Comments:

The Engineering Division recommends approval of the proposed Planned Development amendment. The water main reconfiguration meets our standards.

Stormwater Review Comments:

The Stormwater Division recommends approval of the proposed Planned Development amendment. Staff review included confirmation of the following:

- ✓ No wetlands will be impacted by the development.
- ✓ No flood plain will be impacted by the development.
- ✓ No Localized Poor Drainage Areas will be impacted by the development.
- ✓ Stormwater detention will be provided in accordance with Village and County requirements.
- ✓ The final site grading will not impede flow from off site.
- ✓ IDNR confirmed that no impact will occur to threatened or endangered species.
- ✓ IHPA confirmed that no historic properties will be affected.

The above referenced site engineering plans are also acceptable for future issuance of the stormwater permit.

Outstanding issues include the following:

- Per normal procedures, the actual stormwater permit will typically be issued simultaneously with the building permit, requiring receipt of distribution plan copies, fees, and performance securities.
- Stormwater easement agreement for on-site storm sewers, detention basins, and major overland conveyance routes.
- Payment of stormwater permit fees and securities.

The development will include the improvement of an existing detention basin and the construction of one additional detention basin. The basin floors will be planted with native wetland vegetation, which will provide water quality filtering benefits. The revised outlet control structure design should reduce frequency of the current clogging problem.

Traffic Review Comments:

See attached review memo.

Forestry Review Comments:

Landscape plantings should be limited to the list of acceptable species provided by the Forest Preserve District, due to proximity to Lyman Woods.

c. PW Division Managers
Director of Code Services
Stormwater Management Engineer
C. Chalberg, Administrative Technician



CHRISTOPHER B. BURKE ENGINEERING, LTD.

9575 West Higgins Road • Suite 600 • Rosemont, Illinois 60018-4920 • TEL (847) 823-0500 • FAX (847) 823-0520

September 9, 2003

Village of Downers Grove
Public Works Department
5105 Walnut Avenue
Downers Grove, Illinois 60515

Attention: Jonathan Hall, PE
Development Engineering Manager

Subject: Wetland and Riparian Area Review for the Proposed Good Samaritan
Hospital ICU Expansion
(CBBEL Project No. 01-528B199)

Dear Mr. Hall:

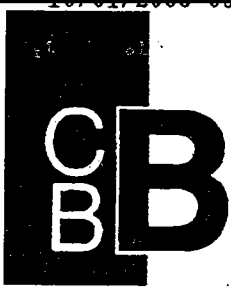
As requested, we have reviewed the proposed project plans for compliance with the wetland and riparian area provisions of the Village of Downers Grove Stormwater and Floodplain Ordinance.

As designed, the project will not directly or indirectly impact wetland or riparian area. Neither special management area is found within the construction area, nor will the development impact off-site areas because there is no substantive change in hydrology caused by this project.

If you have any questions or concerns, please do not hesitate to call.

Sincerely,

Jedd M. Anderson
Head, Environmental Resources Department
KC-WRS #W-007
LC-CWS #012



CHRISTOPHER B. BURKE ENGINEERING, LTD.

9575 West Higgins Road • Suite 600 • Rosemont, Illinois 60018-4920 • TEL (847) 823-0500 • FAX (847) 823-0520

July 23, 2003

Village of Downers Grove
Public Works Department – Engineering
5101 Walnut Ave.
Downers Grove, IL 60515

Attention: Jon Hall, PE

Subject: 2nd Stormwater Management Review for Good Samaritan Hospital, ICU
Addition
(CBBEL Project No. 01-528B199)

Dear Mr. Hall:

Christopher B. Burke Engineering, Ltd. (CBBEL) has reviewed the following documents:

1. Stormwater Management Report for Good Samaritan ICU, prepared by Cowhey Gudmundson Leder, Ltd., dated May 22, 2003, revised June 27, 2003.
2. Engineering Improvement Plans for Good Samaritan Hospital ICU Addition, prepared by Cowhey Gudmundson Leder, Ltd., dated May 22, 2003, revised June 27, 2003.
3. Grading and Drainage Plan for Good Samaritan Hospital prepared by Wight & Company, dated January 1995.
4. Two Diskettes with Hydrologic Modeling prepared by Cowhey Gudmundson Leder, Ltd., dated June 27, 2003.

Project Description

The project consists of developing an ICU addition and additional parking within the Good Samaritan Hospital campus. The project will redevelop one detention pond of the existing development and develop one new pond. The total disturbed area is 3.56 acres.

CBBEL has reviewed the revised plans and stormwater analysis and finds the project is in conformance with the Downers Grove Stormwater and Flood Plain Ordinance (Ordinance #4271).

This review did not include utility connections to the proposed development. There is no wetland, floodplain, or localized poor drainage area (LPDA) located on the site.

In compliance with the Illinois Environmental Protection Agency (IEPA), any construction site over one acre must submit a Notice of Intent (NOI) to the IEPA. Attached with this

review letter is a copy of the NOI form and instructions for completion. Please copy Jon Hall at the Village on your application to IEPA.

CBBEL recommends approval of the stormwater analysis for Good Samaritan Hospital ICU Addition to the Village of Downers Grove. Our review does not include review of easement requirements for storm sewer. Please address these issues with the Village.

If you have any questions, please feel free to call.

Sincerely,



Thomas T. Burke, Ph.D., P.E.
Head, Water Resources Section III

Cc: Bob Gudmundson – Cowhey Gudmundson Leder, Ltd.
Kara Jackson – Cowhey Gudmundson Leder, Ltd.
Robert Bearlund – Advocate Healthcare
Alicia Hightower – Village of Downers Grove, Public Works
Jack Bajor – Village of Downers Grove, Public Works
June Gornik - Village of Downers Grove, Code Services

LTS C:\projects\01528\B199\L01528B199.072303.doc

VILLAGE OF DOWNERS GROVE
INTEROFFICE MEMORANDUM

TO: Joe Skach, Director of Planning & Community Development
Amanda Browne, Village Planner

FROM: Dorin Fera, Manager Traffic Division

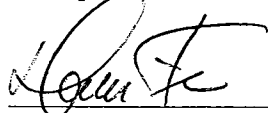
DATE: September 26, 2003

RE: **Traffic Review**
Good Samaritan Hospital Expansion (ICU Facility)
Washington Street at 39th Street

The Good Samaritan Hospital Complex is proposing to add a 44-Bed Intensive Care Unit (ICU) on its site. A review was made of the Traffic Planning Report, prepared by Gewalt Hamilton Associates (dated May 22, 2003). The Traffic Division's comments are:

- The Traffic Planning Report is adequately summarized. The Discussion, Analysis, and Evaluation sections accurately portray current and anticipated future traffic patterns for the site. There are no associated roadway or intersection improvements or changes to existing traffic patterns.
- I would require a pre-construction meeting to discuss construction staging, and truck routing to/from the site.

Based on the above review, the Traffic Division finds the Traffic Planning Report to be an accurate representation of the impacts of the proposed ICU Facility. I have no other comments or requirements.



Dorin Fera, AICP
Traffic Division Manager

Board of Trustees
Donald E. Eckmann
President
Wallace D. Van Buren
Vice President
David J. Morrill
Clerk

Downers Grove Sanitary District

2710 Curtiss Street
P.O. Box 1412
Downers Grove, IL 60515-0703
Phone: 630-969-0664
Fax: 630-969-0827

P. 02/02
Staff *Z/124.11-*
Lawrence C. Cox
General Manager
Ralph E. Smith, Jr.
Operations Director
Sheila K. Henschel
Administrative Services
Director
Legal Counsel
Michael C. Wiedel

Providing a Better Environment for South Central DuPage County

FAX COVER SHEET

DATE: September 29, 2003
TO: Randy Andersen
COMPANY: Cowhey Gudmundson Leder, Ltd.
FAX #: 630-250-9644
FROM: Ted Cherwak
DOWNERS GROVE SANITARY DISTRICT

Number of Pages (including this sheet): 1

Please notify the person this FAX message is directed to immediately upon receipt. If all pages are not received, please call (630) 969-0664. Our fax number is (630) 969-0827.

REFERENCE: Good Samaritan Hospital - Downers Grove - ICU Addition

* The Sanitary District has approved the civil drawings for the subject project with a revision date of August 13, 2003, in regards to the sanitary improvements.

If you have any questions, please call (630.969.6753 x109).



September 30, 2003

VIA FACSIMILE

Amanda Brown
Village of Downers Grove
801 Burlington
Downers Grove, IL 60515

RE: GOOD SAMARITAN HOSPITAL-PLANTS SUBSTITUTION (0312)

Dear Amanda:

As a follow up to the letter from the Forest Preserve District of DuPage County dated May 22, 2003 in which substitution of three plants was recommended, the substitution is as follows:

Panicum virgatum var. for *Miscanthus sinensis* 'Gracillimus'
Viburnum lentago for *Acer glabrum*
Weigela florida 'Midnight Wine' for *Berberis thunbergii* 'Royal Purple'

In regard to substituting *Berberis* for *Vaccinium angustifolium*, in our original meeting with the Forest Preserve it was communicated that the *Berberis* plant was not recommended. Needless to say, the plant would be acceptable because of the sufficient distance between this project and Lyman Woods. However, in a subsequent letter, they proceeded to ask for a substitution. I did not use their recommended plant due to its few similar characteristics to the *Berberis*. Instead, I used *Weigela florida* 'Midnight Wine' because it has similar height and color, but it will neither become invasive nor be a host for disease.

Should you have any questions please give me a call.

Sincerely,

A handwritten signature in black ink, appearing to read "Brent Lewis", written over a vertical line that extends from the word "Sincerely,".

Brent Lewis
Associate

BL/cm

cc: Tracy Kasson - Rathje, Woodward, Dyer & Burt



Forest Preserve District of DuPage County

3 S. 580 Naperville Road • Wheaton, IL 60187-8761 • 630.933.7200 • Fax 630.933.7204 • TTY 800.526.0857

May 22, 2003

Mr. Brent C. Lewis
Associate
Lannert Group
215 Fulton Street
Geneva, IL 60134

RE: Project No. Z-420-001
Landscape Plan Review
Good Samaritan Hospital ICU

Dear Mr. Lewis:

The Forest Preserve District of DuPage County has reviewed and approves the above-mentioned plan with a few minor changes. Because of the invasive nature of three of the proposed plants, the District is recommending the following substitutions:

Panicum virgatum var. for (Miscanthus sinensis 'Gracillimus')
Viburnum lentago for (Acer ginnala)
Vaccinium angustifolium var. for (Berberis thunbergi 'Royal Purple')

Invasive plants often degrade natural systems by out competing native plants and are often difficult and costly to eradicate. The District appreciates the effort that was made to incorporate native plants into the plan and would like to thank you for your consideration in this matter. If you have any questions or concerns, please feel free to contact me at 630-933-7243.

Sincerely,

Andrea Hoyt, ASLA
Manger of Project Development

cc: Ross Hill, P.E., Project Engineer
Mary Ellen Weller, Project Development Supervisor
Kevin Horsfall, ASLA, Project Planner
Scott Kobal, Plant Ecologist

0342049ALH/cmg

1.11/201



Illinois Department of Natural Resources

One Natural Resources Way • Springfield, Illinois 62702-1271

Dept. of Natural Resources
RECEIVED
MAR - 3 2003
OFFICE of the State of Illinois
Resource Review & Coord.
George H. Ryan, Governor
Brent Manning, Director

CONSULTATION AGENCY ACTION REPORT (Illinois Administrative Code Title 17 Part 1075) Division of Resource Review and Coordination Stephen K. Davis, P.G., Chief

Date Submitted: 2/26/03
If this is a resubmittal, include previous IDNR response if available.

FOR DEPARTMENT USE ONLY
PROJCODE: 0203819 DUE DATE: 4/3/03

Applicant: Cowhey & Associates Phone: 630-438-6233
Contact Person: Valerie Jakobi Fax: 630-250-9644
Applicant Address: 300 Park Blvd, Suite 205 Email: valerie.jakobi@cgl-ltd.com
Itasca, IL 60143

LOCATION OF PROPOSED ACTION
A MAP SHOWING LOCATION OF PROPOSED ACTION IS REQUIRED
Project Name: Heckel Property County: DuPage
Project Address (if available): 3801 Highland Ave.
City, State, Zip: Downers Grove, IL 60515
Township/Range/Section (e.g. T45N, R9E, S2): T39N-R11E, SE 1/4 of SW 1/4 Section 32
Brief Description of Proposed Action: Parking, detention and building for hospital

Projected Start Date and End Date of Proposed Action: Summer 2003 - Fall 2006

Will state funds or technical assistance support this action? [~~YES~~ No] If Yes, the Interagency Wetland Policy Act may apply. Contact funding agency or this Division for details.

Local/State Agency with Project Jurisdiction: Downers Grove
Contact: Ken Rathje Phone: 630-434-5500
Address: 801 Burlington Ave. Fax: 630-434-5571

FOR DEPARTMENT USE ONLY

Are endangered/threatened species or Natural Areas present in the vicinity of the action? [Yes ~~No~~]
Could the proposed action adversely affect the endangered/threatened species or Natural Area? [Yes ~~No~~]
Is consultation terminated? [Yes ~~No~~]
Comments: Site is near Lyman Woods (NA), but is disjoint; private dwelling to be demolished; no known listed plants. No adverse effect to Lyman Woods (NA) anticipated.
Evaluated by: Keith M Shank Date: 4-10-03
Division of Resource Review & Coordination (217)785-5500



Illinois Historic Preservation Agency

1 Old State Capitol Plaza • Springfield, Illinois 62701-1507 • Teletypewriter Only (217) 524-7128

APR 21 2003

CULTURAL RESOURCES DIVISION

Voice (217) 782-4836

Teletypewriter Only (217) 524-7128

Page County

Downers Grove

Heckel Property, Demolition and New Construction
3801 Highland Ave., Downers Grove
IHPA Log #011030303

April 10, 2003

Shirley Jakobi

Whalley Gudmundson Leder, Ltd.

10 Park Blvd.

Downers Grove, IL 60143

Dear Ms. Jakobi:

I have reviewed the documentation submitted for the referenced project(s) in accordance with 36 CFR Part 800.4. Based upon the information provided, no historic properties are affected. We, therefore, have no objection to the undertaking proceeding as planned.

Please retain this letter in your files as evidence of compliance with section 106 of the National Historic Preservation Act of 1966, as amended. This clearance remains in effect for two years from date of issuance. It does not pertain to any discovery during construction, nor is it a clearance for purposes of the Illinois Human Skeletal Remains Protection Act (20 ILCS 3440).

If you have any further questions, please contact Cody Wright, Cultural Resources Manager, Illinois Historic Preservation Agency, 1 Old State Capitol Plaza, Springfield, IL 62701, 217/785-3977.

Sincerely,

Anne E. Haaker
Deputy State Historic Preservation Officer

**GOOD SAMARITAN HOSPITAL
INTENSIVE CARE UNIT
PROJECT DESCRIPTION**

The intensive care unit will be housed in a newly constructed wing located on the Good Samaritan Hospital campus, attached just west of the main Hospital.

The proposed building is a one-story structure with a full basement. The building foundation system has been designed to accommodate future vertical expansion should the need ever arise in the future. The basement consists of 44,605 square feet. The basement level will connect to the existing ground floor lobby of the Hospital for visitor access. The parking lot on the north side of the building will have access via elevators to the basement connector corridor. The first floor consists of 34,088 square feet, fully dedicated to the ICU. A mechanical interstitial floor will be located above a portion of the new ICU and will total 15,672 square feet.

Good Samaritan's Intensive Care project includes the following components:

- The first floor of the unit will house 44 intensive care beds
- The ICU will be state of the art providing the latest technology available for the care of the critically ill patient as well as providing a caring, supportive environment for family members of the patient.
- The basement will provide space for a large family waiting area that has been designed with the critically ill patient's family in mind. Space for 120 family members has been designed in divided seating areas to allow for as much privacy as possible. Additionally the waiting area will house a kitchenette vending area, private consulting areas, washrooms with showers for overnight visitors and a resource area for internet access.
- Exterior plans include use of existing campus materials of brick, stone, and glass. The building has been specifically designed to take advantage of the documented therapeutic value of natural light.
- The ICU rooms have been designed to incorporate views of the roof gardens located outside each room.

Certificate of Need

The Illinois Health Facilities planning board approved an application for permit on August 19, 2003 for the Intensive Care unit. This approval was granted by a unanimous vote and was based on the findings of a favorable state agency report and a public hearing that was held on May 19, 2003.

Good Samaritan Hospital
3815 Highland Avenue
Downers Grove, Illinois 60515-1590
Telephone 630.275.5900



September 23, 2003

Dear neighbor of Advocate Good Samaritan Hospital

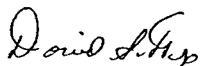
Advocate Good Samaritan Hospital received a Certificate of Need permit on August 19, 2003 from the Illinois Health Facilities Planning Board to construct a new building that will be connected to the front of the main hospital facility to house a new Intensive Care Unit and Surgical Heart Unit (ICU/SHU). The State Planning Board unanimously approved the new construction and expansion of the ICU/SHU from 36 to 44 beds.

Construction of this facility is scheduled to begin this fall with an expected completion in late 2005. ***Before we break ground on this much-needed ICU/SHU expansion project, we would like to invite you, our neighbors, to join us for an ICU/SHU Expansion Reception in the Atrium of Good Samaritan Hospital on Wednesday, October 1 at 6:30 to 7:30 p.m.*** We will share an overview of the expansion with you and answer any questions you may have about the new facility.

The new facility will include all private rooms for ICU & Surgical Heart patients as well as comfortable waiting areas for family members. Needed support space for our physicians, nurses and other caregivers will also be included. In combination with a new, advanced electronic ICU (eICU) patient monitoring capability, these state-of-the-art facilities will ensure Good Samaritan Hospital's continuing ability to provide the best care and facilities for the people we serve. The increase in the number of critical care beds will also improve bedflow congestion in Good Samaritan's Level I Trauma Center, which will result in shorter wait times in the Emergency Department and more streamlined patient-flow throughout the hospital.

We look forward to the opportunity to share our plans about the new critical care facility. ***Please let us know if you will be able to join us by Monday, September 29, by calling 630.275.1123, and thank you for your continued support of Good Samaritan Hospital as we grow with our community.***

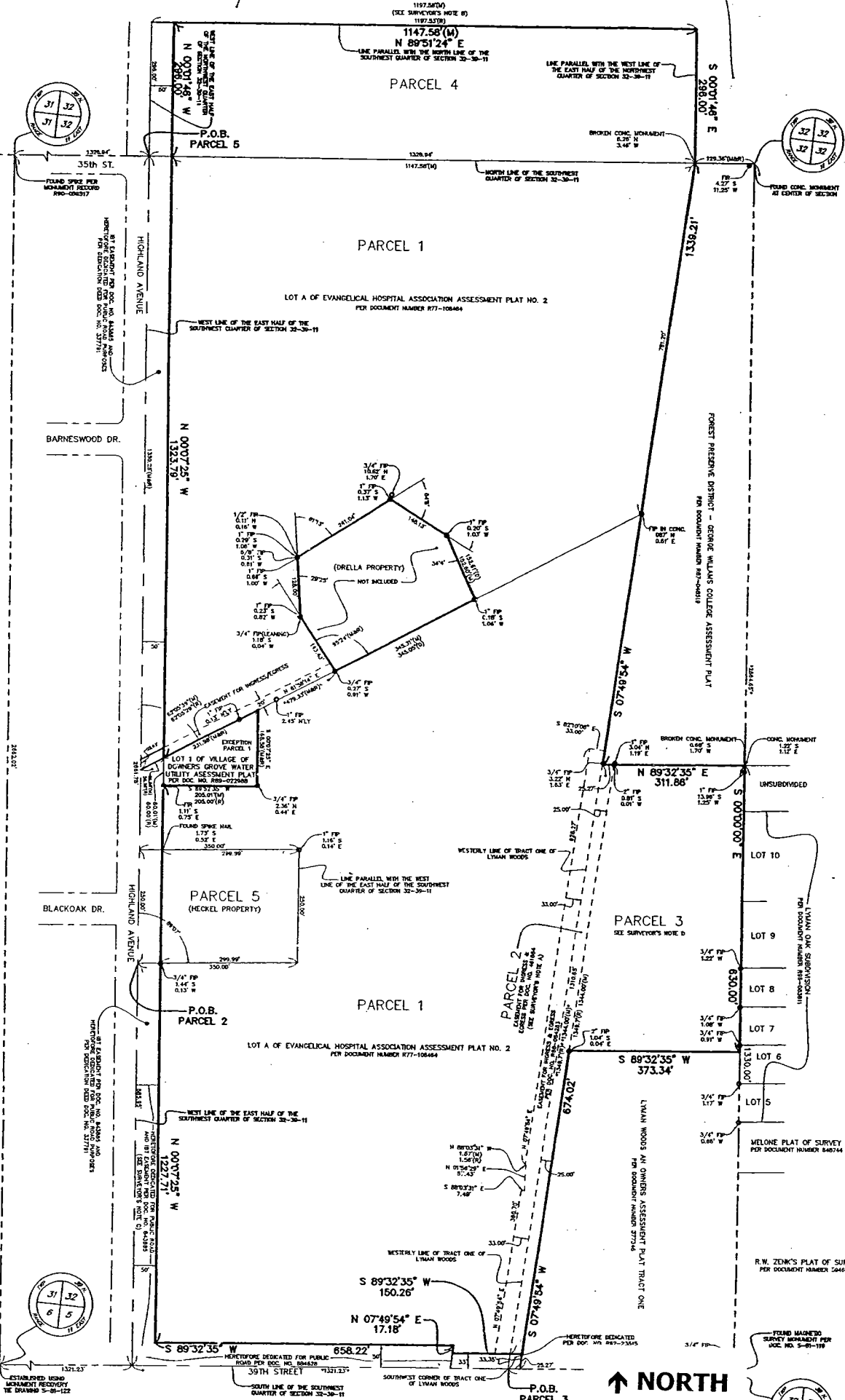
Sincerely,



David S. Fox
Chief Executive
Advocate Good Samaritan Hospital

THE SURVEYOR ACKNOWLEDGES CONTRADICTIONS IN LEGAL DESCRIPTIONS AND RECORDED PLATS IN THE PLACEMENT OF THIS LINE. AS SUCH, THIS SURVEY IS BASED ON THE SURVEYOR'S BELIEF AS TO THE INTENT OF THE PARTIES PROVIDING TO THE SURVEYOR TO HAVE A COMMON NORTH BOUNDARY AS PARCEL 3. ADDITIONAL SURVEYOR'S NOTES THAT CONVEY THE PROPERTY SHOWN RECORDED AS DOCUMENT NO. R67-14246 (NOTE D) WITHIN THIS DOCUMENT A 75 FOOT EASEMENT FOR INGRESS TO THE WEST LINE OF SAID TRACT 1 (PARCEL 2) HAS BEEN DEPICTED IN THIS WAY.

TO A POINT ON THE SOUTH LINE OF THE NORTHWEST QUARTER OF SAID SECTION 32, THENCE WEST ALONG THE SOUTH LINE OF THE NORTHWEST QUARTER OF SAID SECTION 32 TO THE WEST 50.00 FEET, MEASURED AT RIGHT ANGLES TO THE WEST LINE THEREOF, IN DUPAGE COUNTY, ILLINOIS.



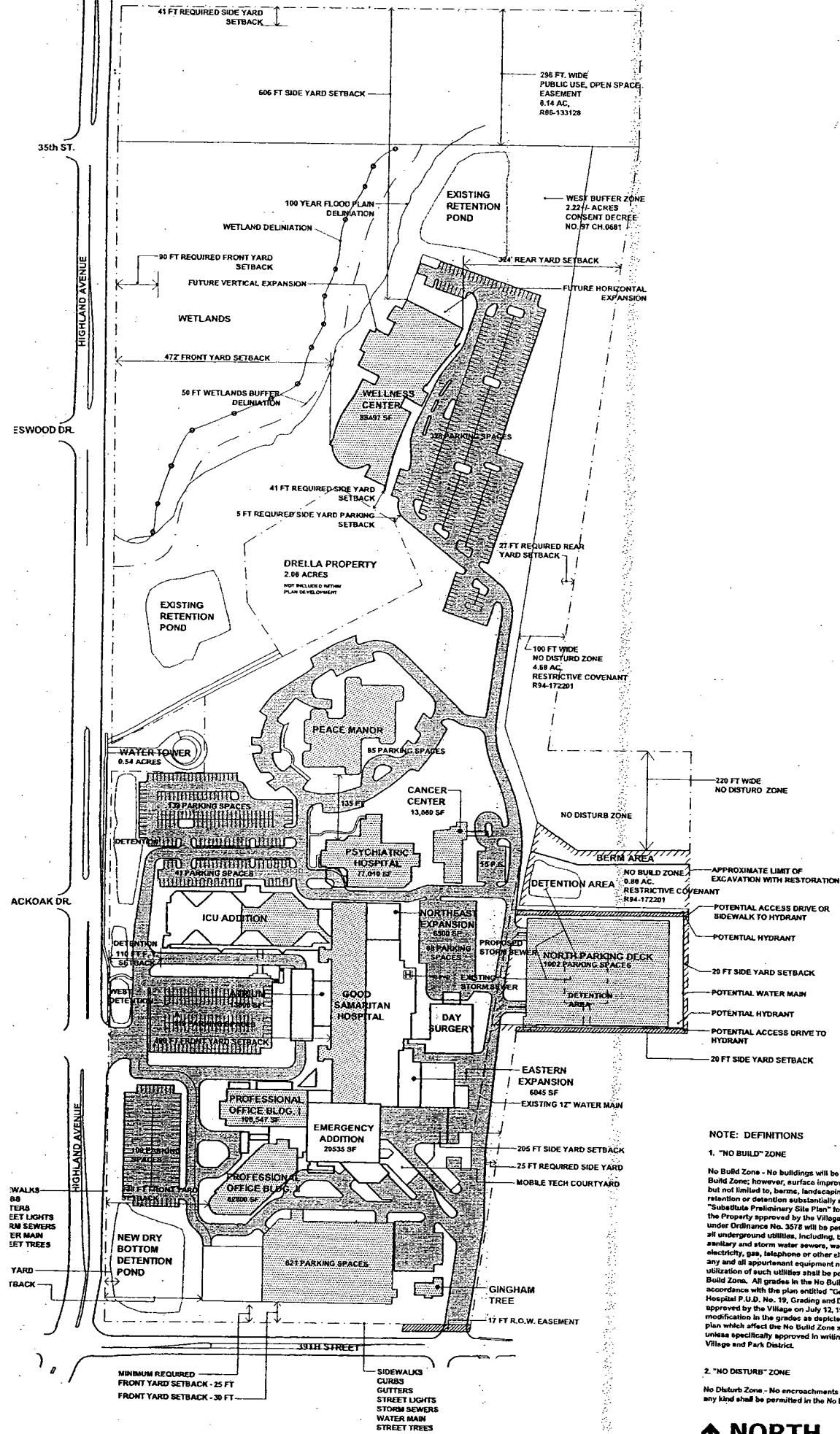
DATE OF SURVEY	02/25/20
DATE OF PLOTTING	03/02/20
DATE OF RECORDING	03/02/20
DATE OF REVIEW	03/02/20
DATE OF APPROVAL	03/02/20

PSA
 PROFESSIONAL SURVEYING & ASSESSMENT
 1000 N. WILSON ST.
 CHICAGO, IL 60642
 (773) 327-1100
 www.psa-survey.com

GOOD SAMARITAN HOSPITAL
 P.U. DEVELOPMENT
 OWNERS GROVE, ILLINOIS

DATE	02/25/20
BY	DAVID J. BROWN
FOR	PSA
PROJECT	BOUNDARY SURVEY
DESCRIPTION	BOUNDARY SURVEY
APPROVED BY	DAVID J. BROWN
DATE	02/25/20

C102



NOTE: DEFINITIONS

1. "NO BUILD" ZONE
 No Build Zone - No buildings will be permitted in the No Build Zone; however, surface improvements, including, but not limited to, berms, landscaping, and water retention or detention substantially as depicted on the "Substitute Preliminary Site Plan" for the Campus and the Property approved by the Village on July 19, 1993, under Ordinance No. 3578 will be permitted. In addition, all underground utilities, including, but not limited to, sanitary and storm water sewers, water and steam pipes, electricity, gas, telephone or other electronic cable, and any and all appurtenant equipment necessary for utilization of such utilities shall be permitted in the No Build Zone. All grades in the No Build Zone shall be in accordance with the plan entitled "Good Samaritan Hospital P.U.D. No. 19, Grading and Drainage Plan" approved by the Village on July 12, 1989. Any modification in the grades as depicted on the grading plan which affect the No Build Zone shall not be made unless specifically approved in writing by the District, Village and Park District.

2. "NO DISTURB" ZONE
 No Disturb Zone - No encroachments or improvements of any kind shall be permitted in the No Disturb Zone.



DATA

1	CURRENT GROSS P.U.D. ACREAGE	67.4056	ACRES	2,936,187	SF
	LESS PEACE MANOR	25.8300	ACRES	1,125,155	SF
	LESS WATER TOWER SITE	0.5379	ACRES	23,431	SF
	NET ACREAGE	41.0377	ACRES	1,811,032	SF
	NEW PROPERTY ACQUISITION	1.7215	ACRES	74,990	SF
	PROPOSED GROSS P.U.D. ACREAGE	69.1271		3,011,177	SF
	PROPOSED NET ACREAGE	42.7592			
	PROPOSED NET SQUARE FEET			1,886,022	SF

2 SQUARE FEET OF EXISTING STRUCTURES

STRUCTURES	PRELIMINARY APPROVED AREA	FINAL APPROVED AND BUILT AREA	NUMBER OF STORIES			
			PRELIM.		APPROV.	
			ABOVE GRADE	BELOW GRADE	ABOVE GRADE	BELOW GRADE
A. HOSPITAL		379,640			5	1
B. PRO-OFFICE BUILDING 1		106,547			5	1
C. DAY SURGERY		15,414			1	1
D. GINGHAM TREE		5,781			1	1
E. NORTH PAVILION	90,000	77,010	5	1	3	1
F. IMAGING CENTER	5,000	6,045	1	0	1	0
G. ATRIUM	13,000	13,000	1	1	1	1
H. NORTH PARKING DECK	992 SPACES	1,002 SPACES	4 LEVEL	DECK	4 LEVEL	DECK
I. PRO-OFFICE BUILDING 2	96,450	82,600	5	1	4	1
J. EMERGENCY ADDITION	90,000	20,535	5	1	1	0
K. SOUTH PARKING DECK	795 SPACES	460 SPACES	3 LEVEL	DECK	3 LEVEL	DECK
L. WELLNESS CENTER	55,000	88,497	3	0	2	1
M. CANCER CARE CENTER		13,660	1	1	1	1
TOTAL ALL BUILDINGS		809,729				

3 CURRENT FLOOR AREA RATIO

MAXIMUM F.A.R. 0.60 0.4466

EXISTING SITE COVERAGE:

BUILDING FOOTPRINTS	278,232	SF
HARDSCAPE (ROADS, SIDEWALKS, ETC.)	472,516	SF
PARKING GARAGE FOOTPRINTS	141,938	SF
TOTAL COVERAGE	892,686	SF

4 EXISTING % OF GREEN SPACE

69.60%

5 PARKING SPACES REQUIRED

A. REQUIRED	1875	SPACES
B. ACTUAL	2350	SPACES

6 SQUARE FEET AND HEIGHT OF PROPOSED STRUCTURES

91,956 SF 42,735 SF FOOT PRINT
32 FEET - 2 FLOORS ABOVE GRADE - ONE FLOOR BELOW GRADE

7 TOTAL EXISTING AND PROPOSED BUILDING SF

900,685 SF

8 PROPOSED FLOOR AREA RATIO

MAXIMUM F.A.R. 0.60 0.4776

PROPOSED SITE COVERAGE

BUILDING FOOTPRINTS	320,967	SF
HARDSCAPE (ROADS, SIDEWALKS, ETC.)	474,899	SF
PARKING GARAGE FOOTPRINTS	141,938	SF
TOTAL COVERAGE	937,804	SF

9 PROPOSED PERCENTAGE OF GREEN SPACE

68.86%

10 SQUARE FEET AND HEIGHT OF PREVIOUSLY PRESENTED FUTURE STRUCTURES

STRUCTURE	PRELIMINARY APPROVED AREA	FINAL APPROVED AND BUILT AREA	NUMBER OF STORIES				PRELIMINARY APPROVED BUILDING HEIGHT	PROPOSED BUILDING HEIGHT
			PRELIM.		APPROV.			
			ABOVE GRADE	BELOW GRADE	ABOVE GRADE	BELOW GRADE		
A. NORTHEAST EXPANSION	6,500		1	1			15 FT	
B. WELLNESS CENTER HORIZ. EXP.	4,077		1	0			16 FT	
C. WELLNESS CENTER VERT. EXP.	13,933		3	0			68 FT	
D. S. PARKING DECK EXPANSION	111 SPACES		3 LEVEL	DECK			26.5 FT	
STRUCTURE								

11 TOTAL EXISTING, PROPOSED, AND FUTURE BUILDING SF

925,195

12 FUTURE FLOOR AREA RATIO

0.4906

FUTURE SITE COVERAGE

BUILDING FOOTPRINTS	331,544	SF
HARDSCAPE (ROADS, SIDEWALKS, ETC.)	474,899	SF
PARKING GARAGE FOOTPRINTS	157,870	SF
TOTAL COVERAGE	964,313	SF

13 FUTURE PERCENTAGE OF GREEN SPACE

67.98%

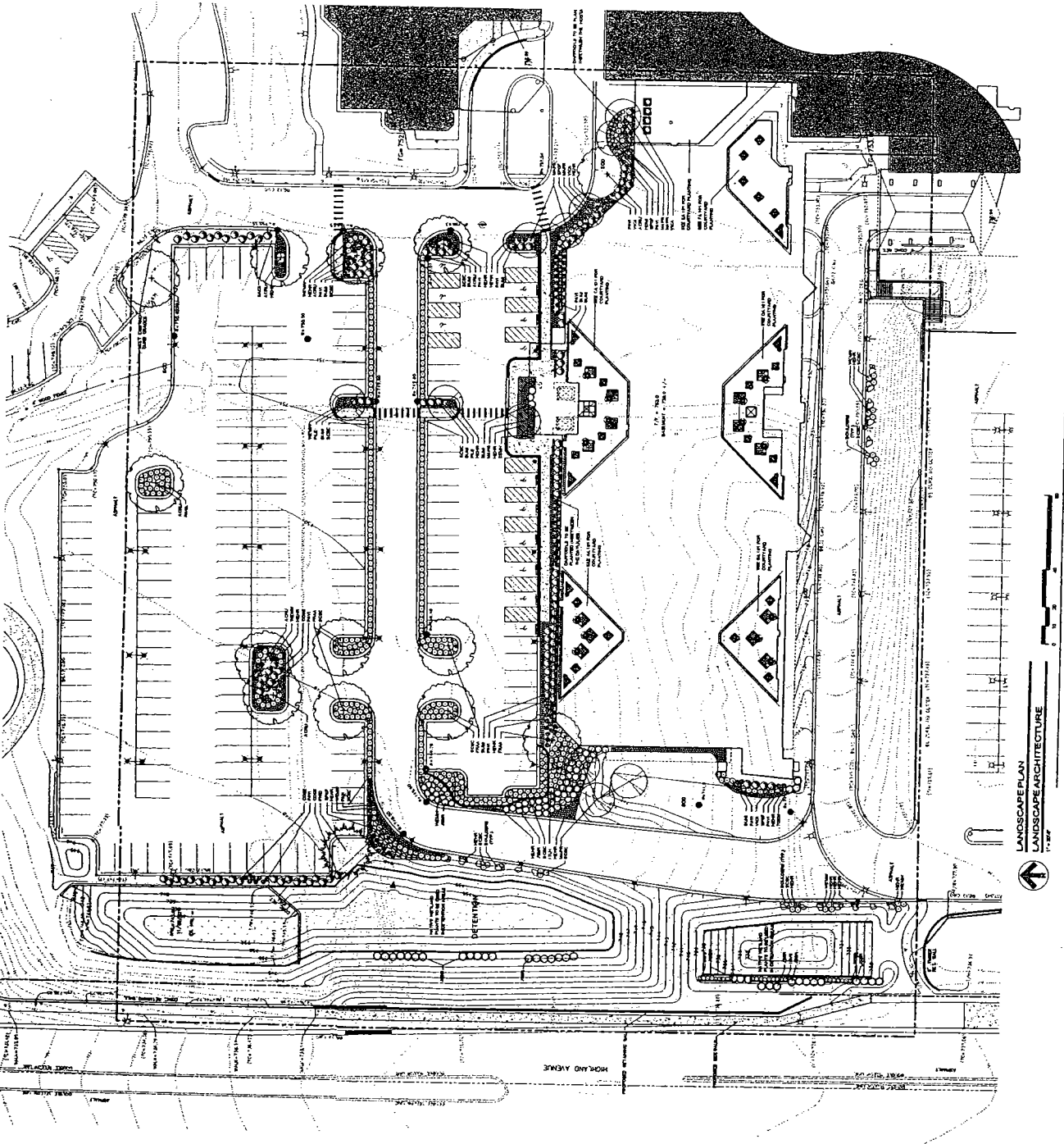
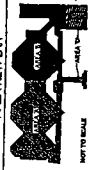
<p>PROJECT</p> <p>GOOD SAMARITAN HOSPITAL NEW RESIDENTIAL CARE UNIT EXPANSION</p>	<p>DATE</p> <p>10/15/2010</p>
<p>CLIENT</p> <p>GOOD SAMARITAN HOSPITAL 1000 W. 10TH AVENUE DENVER, CO 80202</p>	<p>SCALE</p> <p>AS SHOWN</p>
<p>DESIGNER</p> <p>LANDSCAPE ARCHITECTURE 1000 W. 10TH AVENUE DENVER, CO 80202</p>	<p>PROJECT NO.</p> <p>1000</p>
<p>DATE</p> <p>10/15/2010</p>	<p>PROJECT NO.</p> <p>1000</p>

↑ NORTH

GOOD SAMARITAN HOSPITAL
NEW RESIDENTIAL CARE UNIT EXPANSION

PSA
1000

AREA KEY PLAN



LANDSCAPE PLAN
LANDSCAPE ARCHITECTURE



1" = 20'

HOMER AVENUE

LANDSCAPE ARCHITECTURE & DESIGN, INC. 1000 W. 10TH AVENUE, DENVER, CO 80202

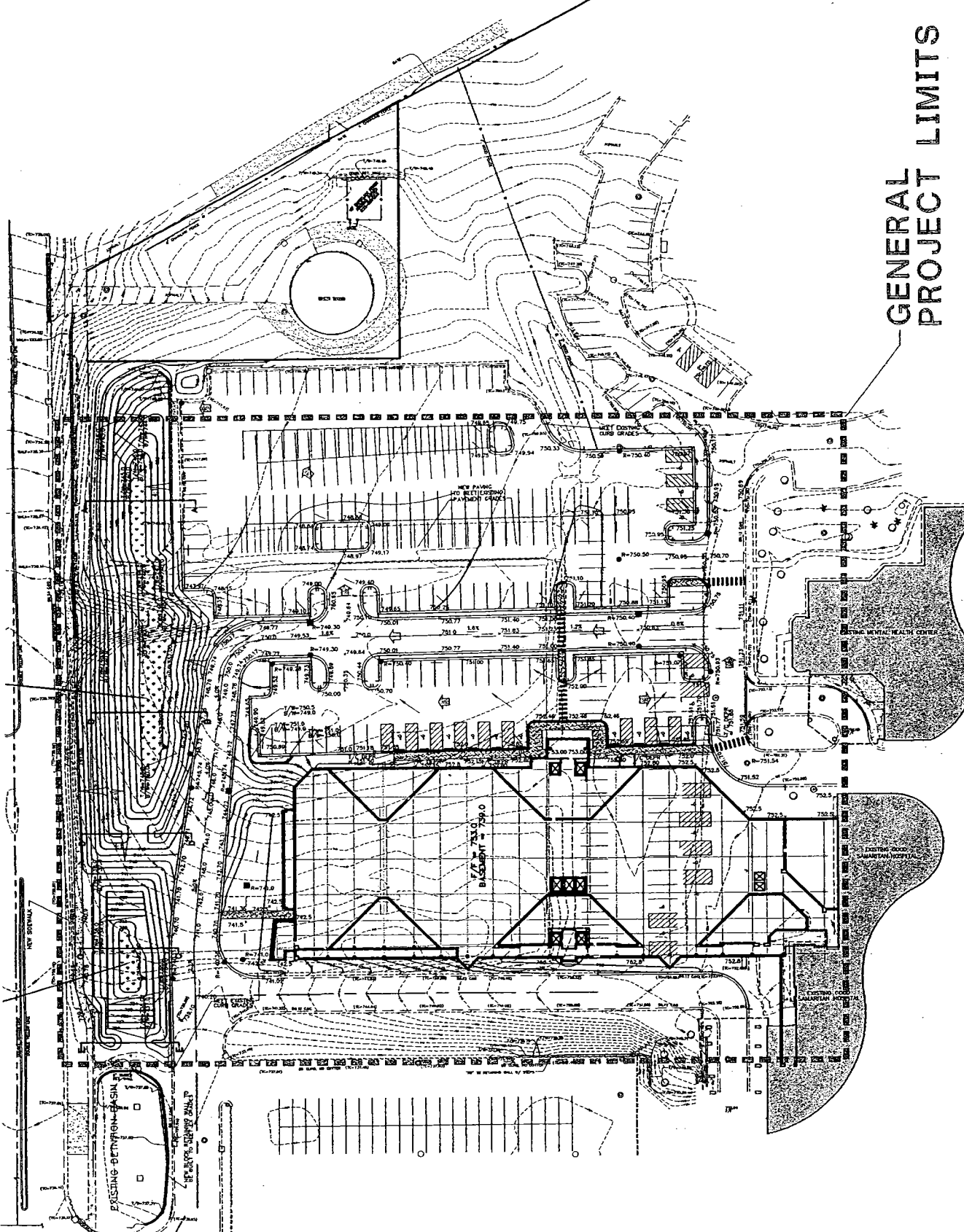
NORTH BASIN SECTION

SOUTH BASIN SECTION

8E

8E

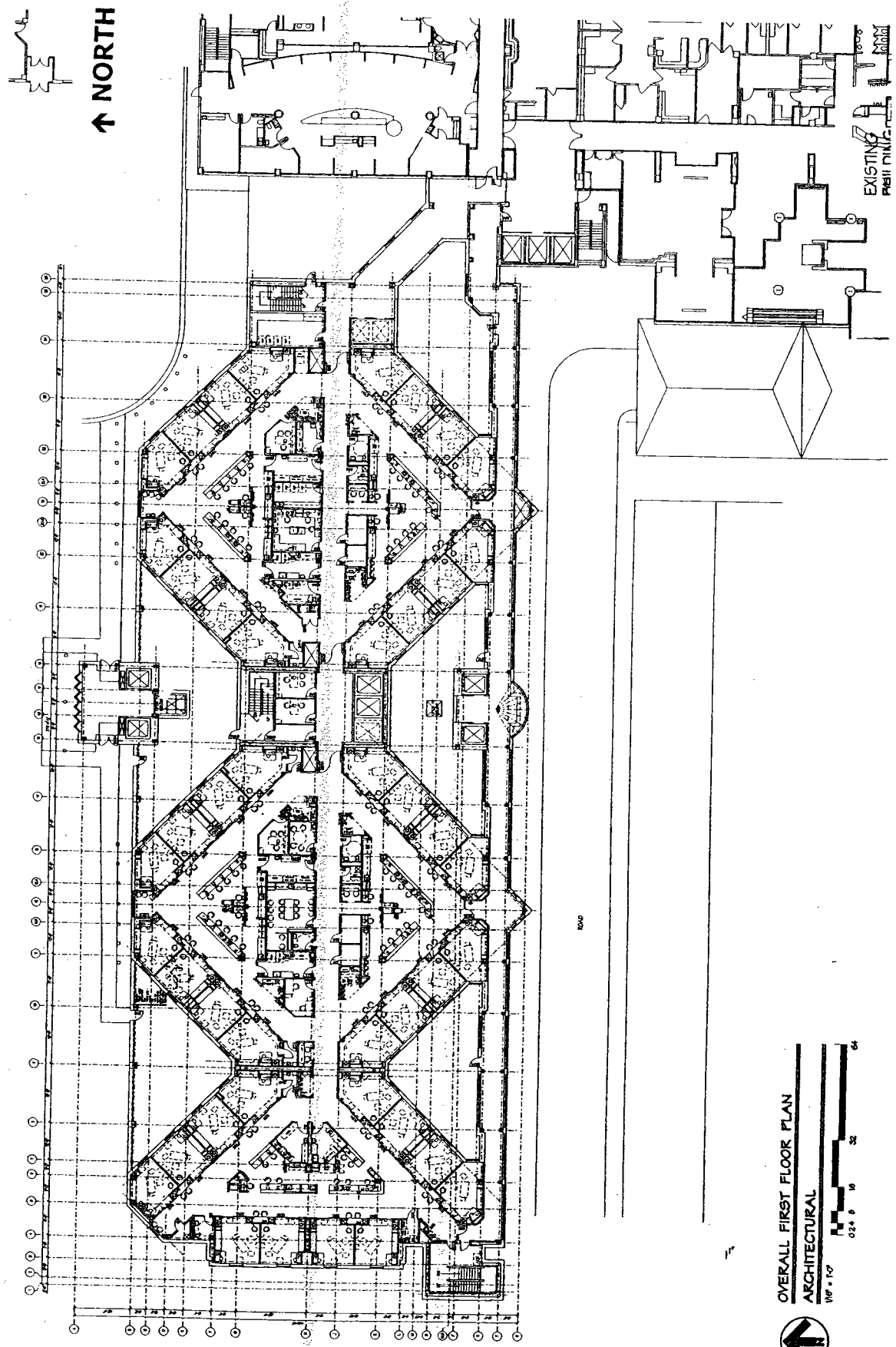
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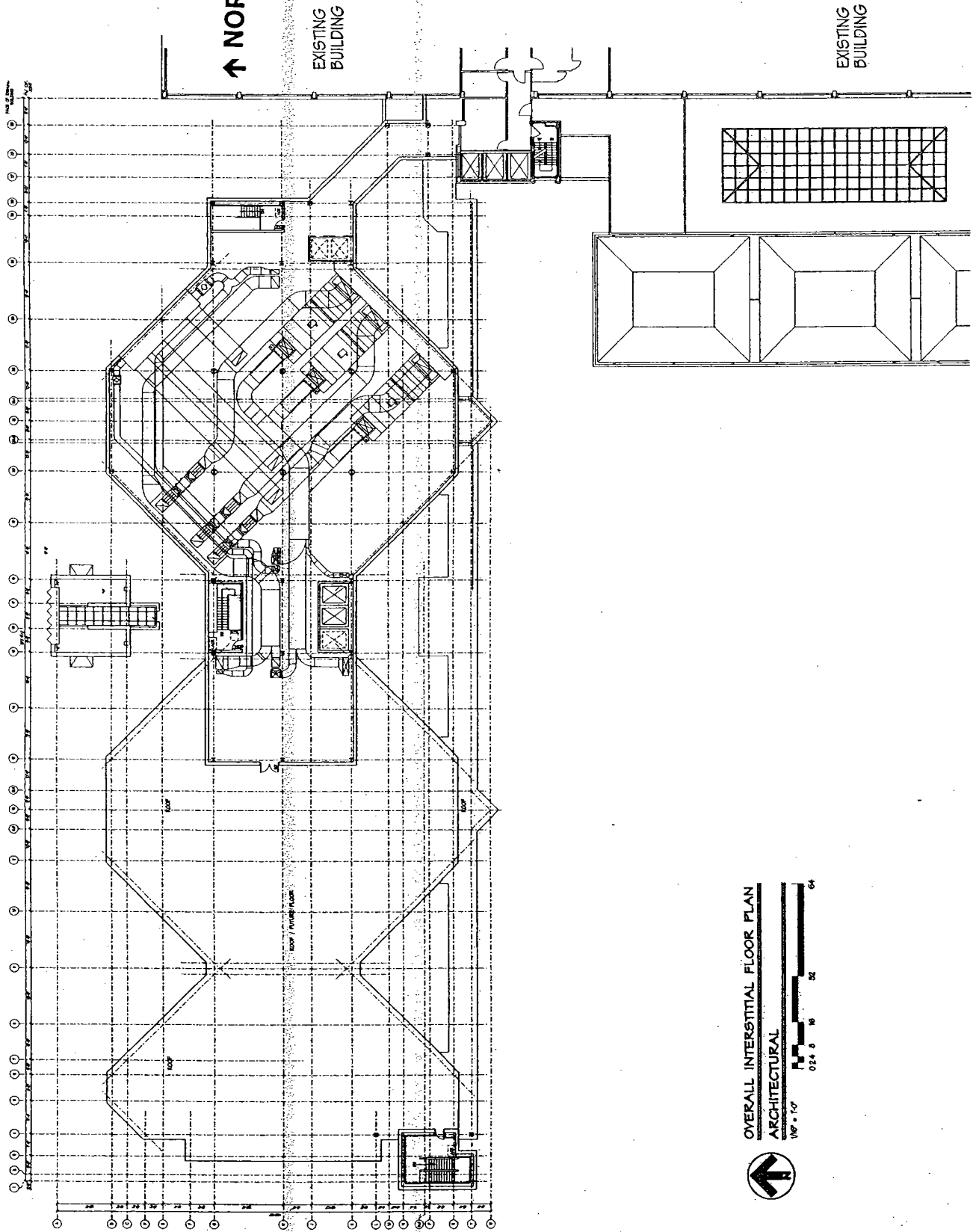
GENERAL PROJECT LIMITS

↑ NORTH

PREPARED BY: [Name] CHECKED BY: [Name] DATE: [Date]	PSA PROFESSIONAL SEAL AND SIGNATURE	COUNTY OF [Name] ENGINEER'S SEAL AND SIGNATURE	GOOD SAMARITAN HOSPITAL P.U.D. DEVELOPMENT DOWNERS GROVE, ILLINOIS	GRADING PLAN SHEET NO. [Number] TOTAL SHEETS [Number]	C400




GOOD SAMARITAN HOSPITAL
 NEW WATKINS CARE UNIT EXPANSION
 PROJECT NO. 1000
 SHEET NO. A030
 DATE: 10/15/00
 DRAWN BY: [Name]
 CHECKED BY: [Name]
 PROJECT MANAGER: [Name]




OVERALL INTERSTITIAL FLOOR PLAN
ARCHITECTURAL
 1/8" = 1'-0"
 0 2 4 8 16 32 64



TRAFFIC PLANNING REPORT

To: **Robert Bearlund**
Advocate Health Care

From: Bonnie Flock 

Date: May 22, 2003

Subject: **Proposed 44-Bed ICU**
Good Samaritan Hospital
Downers Grove, Illinois

Consulting Engineers
and Surveyors

Civil, Municipal, & Traffic

850 Forest Edge Drive
Vernon Hills, Illinois 60061
tel 847 478 9700 fax 847 478 9701

PART 1. PROJECT CONTEXT AND SUMMARY STATEMENT

GEWALT HAMILTON ASSOCIATES, INC. (GHA) has evaluated the traffic planning characteristics of the above captioned project. Good Samaritan Hospital is proposing to expand the hospital to include a 44-Bed Intensive Care Unit (ICU) to be located generally in the central portion of the campus. *(Note that this study does not consider future campus development impacts (e.g. new POB buildings) other than the ICU expansion since Advocate Health Care does not have any conceptual plans at this time. The impacts of future campus development impacts should be evaluated once expansion plans are known).*

The following summarizes our findings and provides various recommendations for your consideration. The *Exhibits* referenced in the text are centrally located in the Technical Addendum. Briefly, we believe that project traffic can be accommodated on the adjacent streets. Implementing the recommended access design features will help promote safe and efficient operations.

PART 2. BACKGROUND INFORMATION

Campus Access Facilities

Good Samaritan Hospital is served by two access points: one main signalized driveway from Highland Avenue north of 39th Street and one unsignalized driveway from 39th Street just opposite Washington Street. Highland Avenue in the immediate hospital area is under the jurisdiction of DuPage County and 39th Street as well as Washington Street are local roadways. Separate left-turn lanes, two through lanes and a separate northbound right-turn lane is provided along Highland Avenue at the Hospital's entrance and a separate eastbound left-turn lane and one through travel lane in each direction is provided on 39th Street at the Hospital's entrance. Both driveways have two inbound and two outbound lanes. Traffic control at the entrance from 39th Street consists of stop sign control on all four approaches.

Existing Traffic

GHA conducted traffic counts along Highland Avenue and 39th Street at the Hospital's entrances during three peak periods; weekday morning, the Hospital's afternoon shift

change, and weekday evening. The counts were conducted in December 2001 and again in March 2003. No delays occurred during the counts, such as inclement weather, road construction, or emergency vehicle activity that would affect the traffic volumes or travel patterns. *Exhibit 1* illustrates the peak hour volumes at the campus access drives.

Hospital Travel Patterns

Good Samaritan Hospital has an extensive historical data base available, beginning in 1986, when a comprehensive traffic and parking study was completed for the campus. The results of that study and subsequent updates in 1989, 1993 and 1996 helped establish the campus traffic planning requirements.

The 2001 and 2003 traffic counts also yielded travel characteristics associated with Good Samaritan Hospital. A comparison between the most recent study, which was in 1996 when the Hospital expanded for the Wellness Center inclusive of Professional Office Building (POB) space at the Hospital, revealed the following...

1. Campus activity during the morning and evening peak hours has not increased substantially since 1996 (i.e. 100 to 135 additional peak hour trips or a 14% to 18% increase). This can be attributed in part to more services being offered throughout the day, rather than being concentrated during a few hours.
2. The midday peak hour generations have also not increased significantly since 1996 yielding a difference in peak hour trips of an additional 50 trips with the updated counts. This can be attributed, in part, to the campus staffing patterns during the Hospital's afternoon shift change remaining fairly the same as in the past.
3. The trip distribution has varied somewhat from the 1996 traffic counts. The percentage of trips approaching and departing from the east on 39th Street has increased from 18% in 1996 to about 30% based on the recent traffic counts. The convenient access to the Wellness Center from this driveway and possible change in demographics of the patrons and employees at the Hospital may be contributing to the change in distribution. Also, the percentage of through trips to and from Washington Street has decreased from 7% in 1996 to only 1 to 2 % under existing conditions. The signage and striping which is currently at the 39th Street driveway restricting this through cross movement and driver awareness may contribute to this decrease in cross movement.

PART 3. EVALUATION

Project Traffic Characteristics

Traffic Generations. *Exhibit 2 – Part A* lists the peak hour and daily traffic generations, which are based on rate information published by the Institute of Transportation Engineers (ITE). We believe we have ensured that the maximum development traffic impacts were tested because of the following...

- 1) ITE does not provide trip generation rates for ICU beds. However, the rates used in the analysis were for hospitals, which will generate more trips than an ICU due to the many different services a hospital performs, including ICU services.
- 2) The project involves constructing 44-ICU beds. However, not all of the 44 beds are new since the ICU is being relocated from within the hospital. There is expected only a slight expansion and this analysis assumed *all* new trips from a new ICU facility.

Trip Distribution. The distribution of site trips on the adjacent roads will be generally based on the current campus travel patterns (see *Exhibit 2 – Part B*). The ICU will have a similar patron trade area as Good Samaritan Hospital serves.

Traffic Assignment

The evaluation focused on three separate weekday peak hours; morning, afternoon shift change, and evening. These time periods were chosen to ensure that the various peaking characteristics of the Hospital campus and the adjacent roadways were tested. *Exhibit 1* presents the traffic assignments, which are based on the project traffic characteristics and the existing campus access drives on Highland and 39th Street.

Key Finding. The limited traffic volume in/out of the Hospital driveways as a result of the ICU facility represent about 1% of the traffic at the access drive intersections. Thus, no roadway improvements are required to specifically accommodate site traffic. The addition of the low right turn volumes at the 39th Street driveway (i.e. less than 15 peak hour trips) do not "trigger" the need for a separate westbound right turn lane.

Intersection Capacity Analyses

Capacity analyses were conducted at the key intersections. The analysis parameters are listed in *Exhibit 3, Part I*, as published in the Transportation Research Board's (TRB) 2000 Highway Capacity Manual (HCM). At signalized and unsignalized intersections, Level of Service (LOS) "reports" operations using the letter designations "A" (best) through "F" (worst) and measures the average "control delay" per vehicle in seconds. Usually, LOS C is referred to as providing "design" operations and LOS D is the lower threshold of "acceptable" operations. LOS E and F are usually considered "unacceptable". The current access configurations and traffic signal timings were tested.

Exhibit 3, Part II summarizes the results of the capacity analyses. As can be seen, intersection operations will remain at or better than the "design" LOS C. The existing drives serving the Hospital will continue to function efficiently. Exploring improvements to site access is not necessary to accommodate new traffic generated by the 44-Bed ICU. In addition, no roadway improvements along Highland and 39th Street would be specifically attributable to the ICU use.

Traffic Signal Warrants

A signal warrant evaluation was conducted for the existing Hospital's driveway at 39th Street and the Hospital access drive with Washington Street in order to determine if the existing traffic volumes as well as future total traffic from the addition of the ICU meet the peak hour warrant set forth for the installation of a traffic signal. Warrant #11 - Peak Hour Volumes, as published in the Manual on Uniform Traffic Control Devices (MUTCD), can be readily tested from the data within this report. In Warrant #11, the volume required on the major route (39th Street) decreases as site activity increases.

Exhibit 4 lists the results. The following observations can be made...

- Existing traffic volumes do not meet the peak hour warrant. The updated traffic counts with the Wellness Center and POB in place determined that signals are not warranted.
- The results of the addition of the ICU beds does not "trigger" warrants at this location.
- The 4-way stop as currently exists maintains an adequate LOS for all movements under existing and future conditions (see *Exhibit 3*).

Traffic Operations Plan

As can be seen based on the above discussion, no roadway improvements are needed at this time along either Highland or 39th Street. If/when traffic signals are provided at the access intersection on 39th Street, a separate westbound left-turn lane to Washington should be provided.

On-Site Circulation

The proposed ICU facility is planned to be located just east of Highland Avenue and northwest of the "Atrium" (within the "Heckel Property"). The north-south circulation road east of Highland Avenue, which currently runs north and then east past the Atrium, will terminate at the Atrium under the new plan and allow for one-way westbound movements only exiting the Atrium. The new plan also calls for extending the north-south circulation road further north (instead of bending toward the Atrium) and then bend east through a

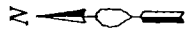
main drive aisle adjacent to the ICU parking lot. It is not expected that the new circulation road will significantly change the existing on-site travel patterns relative to more or less hospital patrons using the Highland or 39th Street access. Furthermore, the extension of the north-south circulation road further north as indicated in the new plan will provide more vehicle storage for outbound movements than what currently exists today along the circulation road.

Key Recommendation. At present, the north-south circulation road just east of the Highland Avenue access consists of two southbound lanes striped for a separate right-turn lane and a shared through and right-turn lane. To minimize driver confusion and vehicle conflicts as vehicles try to exit onto Highland Avenue, signage should be placed at this internal intersection with a southbound right-turn arrow indicating "Northbound Highland Avenue Traffic Use This Lane".

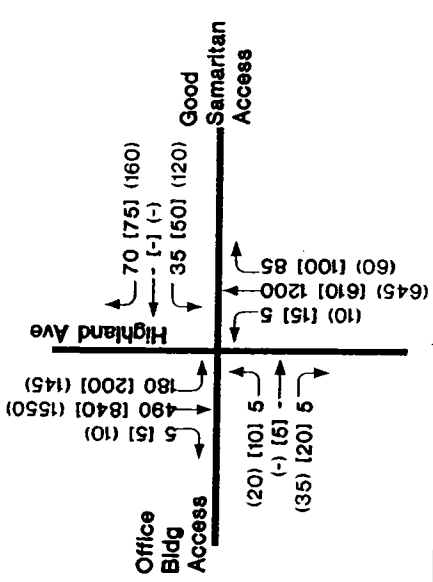
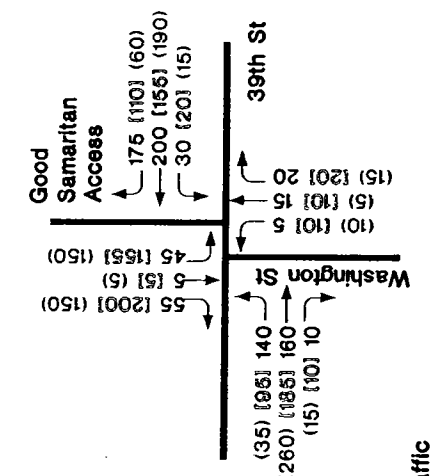
PART 4. TECHNICAL ADDENDUM

The following *Exhibits* were referenced in the text. They provide support documentation for our findings and recommendations.

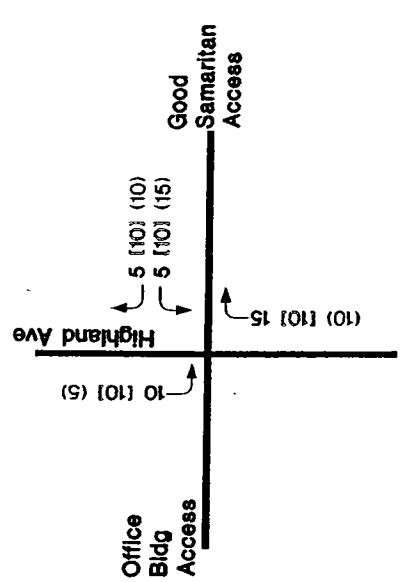
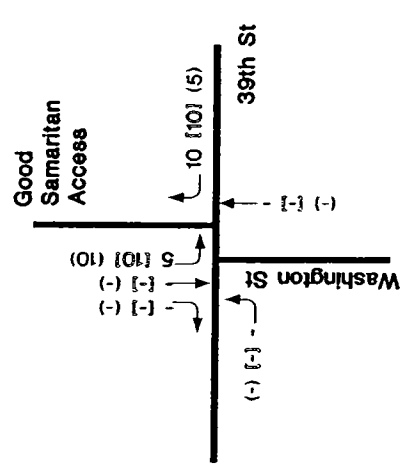
- Exhibit 1.* Peak Hour Traffic Volumes
- Exhibit 2.* Project Traffic Characteristics
- Exhibit 3.* Intersection Capacity Analyses
- Exhibit 4.* Traffic Signal Warrant Analyses



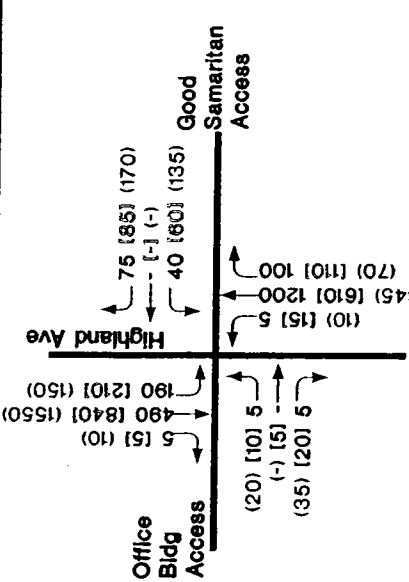
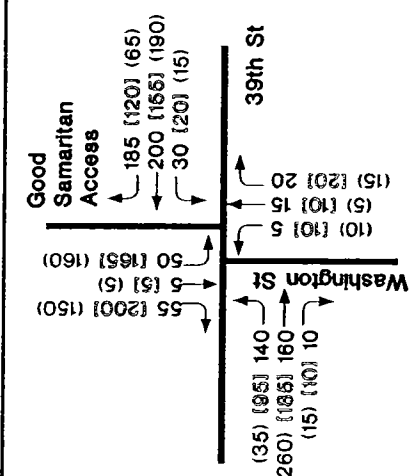
Legend:
 xx Morning Peak Hour
 Roadway: 7:15 - 8:15 AM
 (xx) Afternoon Peak Hour
 Hospital: 2:45-3:45 PM
 (xx) Evening Peak Hour
 Roadway: 4:30-5:30 PM
 - Less than 5 vehicles



Existing Traffic



Site Traffic



Total Traffic

Exhibit 2
Project Traffic Characteristics

Part A. Traffic Generation Calculations - Vehicle Trips

ITE Code (a)	Peak Hour					
	Weekday Morning		Weekday Midday		Weekday Evening	
	In	Out	In	Out	In	Out
#610	35	15	30	30	20	35
	Sum 50		Sum 60		Sum 55	

ICU - 44 Beds

NOTE:

(a) — Source: *Institute of Transportation Engineers (ITE) Trip Generation Manual; 6th Edition*

Part B. Trip Distribution

Route	Direction	Percent Use
Highland Avenue	North	30%
	South	35%
39th Street	East	30%
	West	3%
Washington Street	South	2%
	Totals =	

Exhibit 3 Intersection Capacity Analyses

Proposed 44-Bed ICU, Good Samaritan Hospital; Downers Grove, IL.
Part I. Parameters - Type of Traffic Control (Source: 2000 Highway Capacity Manual)

A. Traffic Signals

LOS	Delay (sec / veh)	Description
A	≤ 10	All signal phases clear waiting vehicles without delay
B	>10 and ≤ 20	Minimal delay experienced on select signal phases
C	>20 and ≤ 35	Some delay experienced on several phases; often used as design criteria
D	>35 and ≤ 55	Usually considered as the acceptable delay standard
E	>55 and ≤ 80	Very long delays experienced during the peak hours
F	>80	Unacceptable delays experienced throughout the peak hours

B. Stop Sign

LOS	Delay (sec / veh)
A	≤ 10
B	>10 and ≤ 15
C	>15 and ≤ 25
D	>25 and ≤ 35
E	>35 and ≤ 50
F	>50

Part II. Results

(See Exhibit 1 for Traffic Volumes)

Roadway Conditions	LOS Per Movement By Approach												Intersection / Approach				
	Eastbound			Westbound			Northbound			Southbound			Delay (sec / veh)	LOS			
	LT	TH	RT	LT	TH	RT	LT	TH	RT	LT	TH	RT					
1. Highland Ave @ Hospital Access																	
Existing AM Traffic	>	C	C	<	C	C	<	B	C	B	<	B	B	<	23.4	C	
Existing Midday Traffic	>	C	C	<	C	C	<	B	C	C	<	B	B	<	18.7	B	
Existing PM Traffic	>	C	C	<	C	C	<	B	C	B	<	B	C	<	28.1	C	
Future Total AM Traffic	>	C	C	<	C	C	<	B	C	B	<	C	B	<	23.5	C	
Future Total Midday Traffic	>	C	C	<	C	C	<	B	C	C	<	B	B	<	18.8	B	
Future Total PM Traffic	>	C	C	<	C	C	<	B	C	C	<	B	C	<	28.1	C	
2. 39th St @ Hospital Access																	
Existing AM Traffic	B	A	<	>	B	<	>	A	<	>	A	<	B	A	<	12.0	B
Existing Midday Traffic	B	B	<	>	B	<	>	A	<	>	A	<	B	B	<	11.9	B
Existing PM Traffic	A	B	<	>	B	<	>	A	<	>	A	<	B	A	<	12.0	B
Future Total AM Traffic	B	A	<	>	B	<	>	A	<	>	A	<	B	A	<	12.3	B
Future Total Midday Traffic	B	B	<	>	B	<	>	A	<	>	A	<	B	B	<	12.2	B
Future Total PM Traffic	A	B	<	>	B	<	>	A	<	>	A	<	B	A	<	12.2	B

**Exhibit 4
Traffic Signal Warrant Analyses**

Proposed 44-Bed ICU, Good Samaritan Hospital; Downers Grove, IL.

Neither Washington or 39th Street are SRA routes. Thus, Warrant #11 - Peak Hour Warrant is available.
Minimum minor approach volume = 150 vehicles; Minimum major approach volume = 1,200 vehicles

Warrant Met?

1. Existing Traffic	
AM Peak Hour	
Minor Approach (Hospital) needed = 150 vehicles; counted 105 vehicles	No
Major Route needed = 1,450 vehicles; counted = 715 vehicles	
Midday Peak Hour	
Minor Approach (Hospital) needed = 150 vehicles; counted 360 vehicles	Yes
Major Route needed = 825 vehicles; counted = 575 vehicles	No
Evening Peak Hour	
Minor Approach (Hospital) needed = 150 vehicles; counted 305 vehicles	Yes
Major Route needed = 925 vehicles; counted = 575 vehicles	No
2. Total Traffic	
AM Peak Hour	
Minor Approach (Hospital) needed = 150 vehicles; counted 110 vehicles	No
Major Route needed = 1,450 vehicles; counted = 725 vehicles	No
Midday Peak Hour	
Minor Approach (Hospital) needed = 150 vehicles; counted 370 vehicles	Yes
Major Route needed = 790 vehicles; counted = 585 vehicles	No
Evening Peak Hour	
Minor Approach (Hospital) needed = 150 vehicles; counted 315 vehicles	Yes
Major Route needed = 910 vehicles; counted = 580 vehicles	No
3. Summary	

Existing traffic does *not* warrant traffic signals.

The addition of project traffic does *not* meet the volume requirements; therefore, existing stop control is adequate.

Source: Manual on Uniform Traffic Control Devices (MUTCD)

Analyst: bjf
 Agency: Good Samaritan Hospital
 Date: 3/18/2003
 Period: Existing AM
 Project ID:
 W St: Hospital Driveway

Inter.: Highland Ave / Hospital Drive
 Area Type: All other areas
 Jurisd: Dupage County DOT
 Year :
 N/S St: Highland Avenue

SIGNALIZED INTERSECTION SUMMARY

	Eastbound			Westbound			Northbound			Southbound		
	L	T	R	L	T	R	L	T	R	L	T	R
No. Lanes	0	1	1	1	1	0	1	2	1	1	2	0
GCConfig	LT R			L TR			L T R			L TR		
Volume	5	0	5	35	0	70	5	1200	85	180	490	5
Lane Width	12.0 12.0			12.0 12.0			12.0 12.0 12.0			12.0 12.0		
TOR Vol	0			0			0			0		

Duration 0.25 Area Type: All other areas

Signal Operations

Phase Combination	1	2	3	4	5	6	7	8
EB Left	A				NB Left	A	A	
Thru	A				Thru		A	
Right	A				Right		A	
Peds					Peds			
SB Left	A				SB Left	A	A	A
Thru	A				Thru		A	A
Right	A				Right		A	A
Peds					Peds			
EB Right					EB Right			
WB Right					WB Right			
Green	25.0				5.0	7.5	42.0	
Yellow	4.0				3.0	0.0	4.5	
All Red	2.0				0.0	0.0	2.0	

Cycle Length: 95.0 sec

Intersection Performance Summary

Approach	Lane Group	Adj Sat Flow Rate (s)	Ratios		Lane Group		Approach	
			v/c	g/C	Delay	LOS	Delay	LOS
Eastbound								
T	417	1586	0.01	0.26	25.9	C	25.9	C
	417	1583	0.01	0.26	25.9	C		
Westbound								
R	369	1404	0.11	0.26	26.7	C		
	417	1583	0.19	0.26	27.3	C	27.1	C
Northbound								
	460	1770	0.01	0.49	12.2	B		
	1565	3539	0.85	0.44	28.5	C	27.6	C
	700	1583	0.13	0.44	15.8	B		
Southbound								
R	367	1770	0.54	0.61	19.9	B		
	1841	3533	0.30	0.52	13.0	B	14.8	B

Intersection Delay = 23.4 (sec/veh) Intersection LOS = C

analyst: bjf
 agency: Good Samaritan Hospital
 date: 3/18/2003
 period: Existing Midday
 project ID:
 /W St: Hospital Driveway

Inter.: Highland Ave / Hospital Drive
 Area Type: All other areas
 Jurisd: Dupage County DOT
 Year :
 N/S St: Highland Avenue

SIGNALIZED INTERSECTION SUMMARY

	Eastbound			Westbound			Northbound			Southbound		
	L	T	R	L	T	R	L	T	R	L	T	R
No. Lanes	0	1	1	1	1	0	1	2	1	1	2	0
Signal Config		LT	R	L	TR		L	T	R	L	TR	
Volume	10	5	20	50	0	75	15	610	100	200	840	5
Lane Width		12.0	12.0	12.0	12.0		12.0	12.0	12.0	12.0	12.0	
Control Vol			0			0			0			0

Duration: 0.25 Area Type: All other areas

Signal Operations

Phase Combination	1	2	3	4	5	6	7	8
EB Left	A				NB Left	A	A	
EB Thru	A				NB Thru		A	
EB Right	A				NB Right		A	
EB Peds					NB Peds			
WB Left		A			SB Left	A	A	A
WB Thru		A			SB Thru		A	A
WB Right		A			SB Right		A	A
WB Peds					SB Peds			
EB Right					EB Right			
WB Right					WB Right			
Green	25.0				5.0	14.5	35.0	
Yellow	4.0				3.0	0.0	4.5	
All Red	2.0				0.0	0.0	2.0	

Cycle Length: 95.0 sec

Intersection Performance Summary

Approach	Lane Group	Adj Sat Flow Rate (s)	Ratios		Lane Group		Approach	
			v/c	g/C	Delay	LOS	Delay	LOS

Eastbound								
L	425	1614	0.04	0.26	26.1	C	26.2	C
	417	1583	0.05	0.26	26.2	C		
Westbound								
R	366	1390	0.15	0.26	27.1	C		
	417	1583	0.20	0.26	27.5	C	27.3	C
Northbound								
L	302	1770	0.06	0.42	16.2	B		
	1304	3539	0.52	0.37	23.8	C	23.2	C
	583	1583	0.19	0.37	20.5	C		
Southbound								
R	575	1770	0.39	0.61	10.6	B		
	1842	3536	0.51	0.52	15.1	B	14.2	B

Intersection Delay = 18.7 (sec/veh) Intersection LOS = B

Analyst: bjf
 Agency: Good Samaritan Hospital
 Date: 3/18/2003
 Period: Existing PM
 Project ID:
 W St: Hospital Driveway

Inter.: Highland Ave / Hospital Drive
 Area Type: All other areas
 Jurisd: Dupage County DOT
 Year :
 N/S St: Highland Avenue

SIGNALIZED INTERSECTION SUMMARY

	Eastbound			Westbound			Northbound			Southbound		
	L	T	R	L	T	R	L	T	R	L	T	R
No. Lanes	0	1	1	1	1	0	1	2	1	1	2	0
GConfig		LT	R	L	TR		L	T	R	L	TR	
Volume	20	0	35	120	0	160	10	645	60	145	1550	10
Lane Width		12.0	12.0	12.0	12.0		12.0	12.0	12.0	12.0	12.0	
TOR Vol			0			0			0			0

Duration 0.25 Area Type: All other areas

Signal Operations

Phase Combination	1	2	3	4	5	6	7	8
EB Left	A				NB Left	A	A	
Thru	A				Thru		A	
Right	A				Right		A	
Peds					Peds			
SB Left	A				SB Left	A	A	A
Thru	A				Thru		A	A
Right	A				Right		A	A
Peds					Peds			
EB Right					EB Right			
WB Right					WB Right			
Green	25.0				5.0	14.5	35.0	
Yellow	4.0				3.0	0.0	4.5	
All Red	2.0				0.0	0.0	2.0	

Cycle Length: 95.0 sec

Intersection Performance Summary

Approach	Lane Group	Adj Sat Flow Rate (s)	Ratios		Lane Group		Approach	
			v/c	g/c	Delay	LOS	Delay	LOS
Eastbound								
T	356	1352	0.06	0.26	26.3	C	26.4	C
	417	1583	0.09	0.26	26.5	C		
Westbound								
R	364	1384	0.37	0.26	29.2	C		
	417	1583	0.43	0.26	29.8	C	29.5	C
Northbound								
	171	1770	0.06	0.42	19.0	B		
	1304	3539	0.55	0.37	24.3	C	23.8	C
	583	1583	0.11	0.37	19.9	B		
Southbound								
R	561	1770	0.29	0.61	10.2	B		
	1842	3536	0.94	0.52	31.6	C	29.8	C

Intersection Delay = 28.1 (sec/veh) Intersection LOS = C

Analyst: bjf
 Agency: Good Samaritan Hospital
 Date: 3/18/2003
 Period: Total AM
 Project ID:
 E/W St: Hospital Driveway

Inter.: Highland Ave / Hospital Driv
 Area Type: All other areas
 Jurisd: Dupage County DOT
 Year :
 N/S St: Highland Avenue

SIGNALIZED INTERSECTION SUMMARY

	Eastbound			Westbound			Northbound			Southbound		
	L	T	R	L	T	R	L	T	R	L	T	R
No. Lanes	0	1	1	1	1	0	1	2	1	1	2	0
Signal Config	LT R			L TR			L T R			L TR		
Volume	5	0	5	40	0	75	5	1200	100	190	490	5
Lane Width	12.0		12.0	12.0		12.0	12.0		12.0	12.0		12.0
RTOR Vol	0			0			0			0		

Duration: 0.25 Area Type: All other areas

Signal Operations

Phase Combination	1	2	3	4	5	6	7	8
EB Left	A				NB Left	A	A	
Thru	A				Thru		A	
Right	A				Right		A	
Peds					Peds			
WB Left	A				SB Left	A	A	A
Thru	A				Thru		A	A
Right	A				Right		A	A
Peds					Peds			
EB Right					EB Right			
WB Right					WB Right			
Green	25.0				5.0	7.5	42.0	
Yellow	4.0				3.0	0.0	4.5	
All Red	2.0				0.0	0.0	2.0	

Cycle Length: 95.0 sec

Intersection Performance Summary

Approach	Lane Group	Capacity	Adj Sat Flow Rate (s)	Ratios		Lane Group		Approach	
				v/c	g/C	Delay	LOS	Delay	LOS
Eastbound									
T	417	1583	0.01	0.26	25.9	C	25.9	C	
	417	1583	0.01	0.26	25.9	C			
Westbound									
R	369	1404	0.12	0.26	26.8	C			
	417	1583	0.20	0.26	27.5	C	27.2	C	
Northbound									
	460	1770	0.01	0.49	12.2	B			
	1565	3539	0.85	0.44	28.5	C	27.4	C	
	700	1583	0.16	0.44	16.0	B			
Southbound									
R	367	1770	0.57	0.61	21.5	C			
	1841	3533	0.30	0.52	13.0	B	15.3	B	

Intersection Delay = 23.5 (sec/veh) Intersection LOS = C

Analyst: bjf
 Agency: Good Samaritan Hospital
 Date: 3/18/2003
 Period: Total Midday
 Project ID:
 /W St: Hospital Driveway

Inter.: Highland Ave / Hospital Drive
 Area Type: All other areas
 Jurisd: Dupage County DOT
 Year :
 N/S St: Highland Avenue

SIGNALIZED INTERSECTION SUMMARY

	Eastbound			Westbound			Northbound			Southbound		
	L	T	R	L	T	R	L	T	R	L	T	R
No. Lanes	0	1	1	1	1	0	1	2	1	1	2	0
GC Config	LT R			L TR			L T R			L TR		
Volume	10	5	20	60	0	85	15	610	110	210	840	5
Lane Width	12.0 12.0			12.0 12.0			12.0 12.0 12.0			12.0 12.0		
TOR Vol	0			0			0			0		

Duration: 0.25 Area Type: All other areas

Signal Operations

Phase Combination	1	2	3	4	5	6	7	8
EB Left	A				NB Left	A	A	
EB Thru	A				NB Thru		A	
EB Right	A				NB Right		A	
EB Peds					NB Peds			
WB Left	A				SB Left	A	A	A
WB Thru	A				SB Thru		A	A
WB Right	A				SB Right		A	A
WB Peds					SB Peds			
EB Right					EB Right			
WB Right					WB Right			
Green	25.0				5.0 14.5 35.0			
Yellow	4.0				3.0 0.0 4.5			
All Red	2.0				0.0 0.0 2.0			

Cycle Length: 95.0 sec

Intersection Performance Summary

Oppr/Lane Group	Lane Capacity	Adj Sat Flow Rate (s)	Ratios		Lane Group		Approach	
			v/c	g/C	Delay	LOS	Delay	LOS
Eastbound								
EB	423	1607	0.04	0.26	26.1	C	26.2	C
	417	1583	0.05	0.26	26.2	C		
Westbound								
WB	366	1390	0.18	0.26	27.3	C		
	417	1583	0.23	0.26	27.7	C	27.5	C
Northbound								
NB	302	1770	0.06	0.42	16.2	B		
	1304	3539	0.52	0.37	23.8	C	23.2	C
	583	1583	0.21	0.37	20.7	C		
Southbound								
SB	575	1770	0.41	0.61	10.7	B		
	1842	3536	0.51	0.52	15.1	B	14.2	B

Intersection Delay = 18.8 (sec/veh) Intersection LOS = B

Analyst: bjf
 Agency: Good Samaritan Hospital
 Date: 3/18/2003
 Period: Total PM
 Project ID:
 W St: Hospital Driveway

Inter.: Highland Ave / Hospital Drive
 Area Type: All other areas
 Jurisd: Dupage County DOT
 Year :
 N/S St: Highland Avenue

SIGNALIZED INTERSECTION SUMMARY

	Eastbound			Westbound			Northbound			Southbound		
	L	T	R	L	T	R	L	T	R	L	T	R
No. Lanes	0	1	1	1	1	0	1	2	1	1	2	0
Config		LT	R	L	TR		L	T	R	L	TR	
Volume	20	0	35	135	0	170	10	645	70	150	1550	10
Lane Width		12.0	12.0	12.0	12.0		12.0	12.0	12.0	12.0	12.0	
TOR Vol			0			0			0			0

Duration: 0.25 Area Type: All other areas

Signal Operations

Phase Combination	1	2	3	4	5	6	7	8
EB Left	A				NB Left	A	A	
Thru	A				Thru		A	
Right	A				Right		A	
Peds					Peds			
SB Left	A				SB Left	A	A	A
Thru	A				Thru		A	A
Right	A				Right		A	A
Peds					Peds			
EB Right					EB Right			
WB Right					WB Right			
Green	25.0				5.0	14.5	35.0	
Yellow	4.0				3.0	0.0	4.5	
All Red	2.0				0.0	0.0	2.0	
Cycle Length: 95.0 sec								

Intersection Performance Summary

ppr/ lane grp	Lane Group Capacity	Adj Sat. Flow Rate (s)	Ratios		Lane Group		Approach	
			v/c	g/C	Delay	LOS	Delay	LOS
Eastbound								
T	353	1343	0.06	0.26	26.3	C	26.5	C
	417	1583	0.09	0.26	26.5	C		
Westbound								
R	364	1384	0.41	0.26	29.7	C		
	417	1583	0.45	0.26	30.1	C	29.9	C
Northbound								
	171	1770	0.06	0.42	19.0	B		
	1304	3539	0.55	0.37	24.3	C	23.8	C
	583	1583	0.13	0.37	20.0+	C		
Southbound								
R	561	1770	0.30	0.61	10.2	B		
	1842	3536	0.94	0.52	31.6	C	29.7	C

Intersection Delay = 28.1 (sec/veh) Intersection LOS = C

Flock
Swalt Hamilton Associates, Inc.

Phone: Fax:
E-Mail:

ALL-WAY STOP CONTROL (AWSC) ANALYSIS

Analyst: bjf
 Agency/Co.: Downers Grove
 Date Performed: 3/14/03
 Analysis Time Period: Existing AM
 Intersection: 39th/Hospital Drive/Washington
 Jurisdiction:
 Units: U. S. Customary
 Analysis Year: 9220.900
 Project ID:
 East/West Street: 39th Street
 North/South Street: Hospital Drive/Washington St

Worksheet 2 - Volume Adjustments and Site Characteristics

	Eastbound			Westbound			Northbound			Southbound		
	L	T	R	L	T	R	L	T	R	L	T	R
Volume	140	160	10	30	200	175	5	15	20	45	5	55
Thrus Left Lane												

	Eastbound		Westbound		Northbound		Southbound	
	L1	L2	L1	L2	L1	L2	L1	L2
Configuration	L	TR	LTR		LTR		L	TR
PF	1.00	1.00	1.00		1.00		1.00	1.00
Flow Rate	140	170	405		40		45	60
Heavy Veh	0	0	0		0		0	0
Opposing-Lanes		2		1		1		2
Conflicting-Lanes		1		2		2		1
Conflicting-lanes		2		2		2		2
Geometry group		5		4b		4b		5
Operation, T	0.25	hrs.						

Worksheet 3 - Saturation Headway Adjustment Worksheet

	Eastbound		Westbound		Northbound		Southbound	
	L1	L2	L1	L2	L1	L2	L1	L2
Flow Rates:								
Total in Lane	140	170	405		40		45	60
Left-Turn	140	0	30		5		45	0
Right-Turn	0	10	175		20		0	55
Opp. Left-Turns	1.0	0.0	0.1		0.1		1.0	0.0
Opp. Right-Turns	0.0	0.1	0.4		0.5		0.0	0.9
Opp. Heavy Vehicle	0.0	0.0	0.0		0.0		0.0	0.0

Adjustments Exhibit 17-33:							
hLT-adj	0.5		0.2		0.2		0.5
hRT-adj	-0.7		-0.6		-0.6		-0.7
hHV-adj	1.7		1.7		1.7		1.7
adj, computed	0.5	-0.0	-0.2		-0.3		0.5
							-0.6

Worksheet 4 - Departure Headway and Service Time

	Eastbound		Westbound		Northbound		Southbound	
	L1	L2	L1	L2	L1	L2	L1	L2
low rate	140	170	405		40		45	60
d, initial value	3.20	3.20	3.20	3.20	3.20	3.20	3.20	3.20
, initial	0.12	0.15	0.36		0.04		0.04	0.05
d, final value	5.87	5.32	5.09		6.21		6.85	5.70
, final value	0.23	0.25	0.57		0.07		0.09	0.09
ove-up time, m		2.3		2.3		2.3		2.3
ervice Time	3.6	3.0	2.8		3.9		4.6	3.4

Worksheet 5 - Capacity and Level of Service

	Eastbound		Westbound		Northbound		Southbound	
	L1	L2	L1	L2	L1	L2	L1	L2
low Rate	140	170	405		40		45	60
ervice Time	3.6	3.0	2.8		3.9		4.6	3.4
tilization, x	0.23	0.25	0.57		0.07		0.09	0.09
ep. headway, hd	5.87	5.32	5.09		6.21		6.85	5.70
apacity	390	420	655		290		295	310
elay	10.29	9.80	14.39		9.37		10.19	9.00
OS	B	A	B		A		B	A
pproach:								
Delay		10.02		14.39		9.37		9.51
LOS		B		B		A		A
ntersection Delay	11.98			Intersection LOS	B			

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 -Mail:

ALL-WAY STOP CONTROL (AWSC) ANALYSIS

Analyst: bjf
 Agency/Co.: Downers Grove
 Date Performed: 3/14/03
 Analysis Time Period: Existing Midday
 Intersection: 39th/Hospital Drive/Washington
 Jurisdiction:
 Units: U. S. Customary
 Analysis Year: 9220.900
 Project ID:
 East/West Street: 39th Street
 North/South Street: Hospital Drive/Washington St

Worksheet 2 - Volume Adjustments and Site Characteristics

	Eastbound			Westbound			Northbound			Southbound		
	L	T	R	L	T	R	L	T	R	L	T	R
Volume	95	185	10	20	155	110	10	10	20	155	5	200
Thrus Left Lane												

	Eastbound		Westbound		Northbound		Southbound	
	L1	L2	L1	L2	L1	L2	L1	L2
Configuration	L	TR	LTR		LTR		L	TR
HF	1.00	1.00	1.00		1.00		1.00	1.00
Flow Rate	95	195	285		40		155	205
Heavy Veh	0	0	0		0		0	0
Opp. Lanes		2		1		1		2
Opposing-Lanes		1		2		2		1
Conflicting-lanes		2		2		2		2
Geometry group		5		4b		4b		5
Operation, T	0.25 hrs.							

Worksheet 3 - Saturation Headway Adjustment Worksheet

	Eastbound		Westbound		Northbound		Southbound	
	L1	L2	L1	L2	L1	L2	L1	L2
Flow Rates:								
Total in Lane	95	195	285		40		155	205
Left-Turn	95	0	20		10		155	0
Right-Turn	0	10	110		20		0	200
Prop. Left-Turns	1.0	0.0	0.1		0.3		1.0	0.0
Prop. Right-Turns	0.0	0.1	0.4		0.5		0.0	1.0
Prop. Heavy Vehicle	0.0	0.0	0.0		0.0		0.0	0.0

Flock
 Swalt Hamilton Associates, Inc.

Phone: _____ Fax: _____
 E-Mail: _____

ALL-WAY STOP CONTROL (AWSC) ANALYSIS

Analyst: bjf
 Agency/Co.: Downers Grove
 Date Performed: 3/14/03
 Analysis Time Period: Existing PM
 Intersection: 39th/Hospital Drive/Washington
 Jurisdiction:
 Units: U. S. Customary
 Analysis Year:
 Project ID:

East/West Street: 39th Street
 North/South Street: Hospital Drive/Washington St

Worksheet 2 - Volume Adjustments and Site Characteristics

	Eastbound			Westbound			Northbound			Southbound		
	L	T	R	L	T	R	L	T	R	L	T	R
Volume	35	260	15	15	190	60	10	5	15	150	5	150
Thrus Left Lane												

	Eastbound		Westbound		Northbound		Southbound	
	L1	L2	L1	L2	L1	L2	L1	L2
Configuration	L	TR	LTR		LTR		L	TR
IF	1.00	1.00	1.00		1.00		1.00	1.00
Flow Rate	35	275	265		30		150	155
Heavy Veh	0	0	0		0		0	0
No. Lanes		2		1		1		2
Opposing-Lanes		1		2		2		1
Conflicting-lanes		2		2		2		2
Geometry group		5		4b		4b		5
Operation, T	0.25 hrs.							

Worksheet 3 - Saturation Headway Adjustment Worksheet

	Eastbound		Westbound		Northbound		Southbound	
	L1	L2	L1	L2	L1	L2	L1	L2
Flow Rates:								
Total in Lane	35	275	265		30		150	155
Left-Turn	35	0	15		10		150	0
Right-Turn	0	15	60		15		0	150
Op. Left-Turns	1.0	0.0	0.1		0.3		1.0	0.0
Op. Right-Turns	0.0	0.1	0.2		0.5		0.0	1.0
Op. Heavy Vehicle	0.0	0.0	0.0		0.0		0.0	0.0

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 Swalt Hamilton Associates, Inc.

Phone: _____ Fax: _____
 E-Mail: _____

ALL-WAY STOP CONTROL (AWSC) ANALYSIS

Analyst: bjf
 Agency/Co.: Downers Grove
 Date Performed: 3/14/03
 Analysis Time Period: Total AM
 Intersection: 39th/Hospital Drive/Washington
 Jurisdiction:
 Signs: U. S. Customary
 Analysis Year:
 Project ID:
 East/West Street: 39th Street
 North/South Street: Hospital Drive/Washington St

Worksheet 2 - Volume Adjustments and Site Characteristics

	Eastbound			Westbound			Northbound			Southbound		
	L	T	R	L	T	R	L	T	R	L	T	R
Volume	140	160	10	30	200	185	5	15	20	50	5	55
Thrus Left Lane												

	Eastbound		Westbound		Northbound		Southbound	
	L1	L2	L1	L2	L1	L2	L1	L2
Configuration	L	TR	LTR		LTR		L	TR
IF	1.00	1.00	1.00		1.00		1.00	1.00
Flow Rate	140	170	415		40		50	60
Heavy Veh	0	0	0		0		0	0
Opposing-Lanes		2		1		1		2
Conflicting-Lanes		1		2		2		1
Conflicting-lanes		2		2		2		2
Geometry group		5		4b		4b		5
Duration, T	0.25 hrs.							

Worksheet 3 - Saturation Headway Adjustment Worksheet

	Eastbound		Westbound		Northbound		Southbound	
	L1	L2	L1	L2	L1	L2	L1	L2
Flow Rates:								
Total in Lane	140	170	415		40		50	60
Left-Turn	140	0	30		5		50	0
Right-Turn	0	10	185		20		0	55
Opp. Left-Turns	1.0	0.0	0.1		0.1		1.0	0.0
Opp. Right-Turns	0.0	0.1	0.4		0.5		0.0	0.9
Opp. Heavy Vehicle	0.0	0.0	0.0		0.0		0.0	0.0

Geometry Group		40		40		5	
Adjustments Exhibit 17-33:							
hLT-adj	0.5		0.2		0.2		0.5
hRT-adj	-0.7		-0.6		-0.6		-0.7
hHV-adj	1.7		1.7		1.7		1.7
adj, computed	0.5	-0.0	-0.3		-0.3		0.5

Worksheet 4 - Departure Headway and Service Time

	Eastbound		Westbound		Northbound		Southbound	
	L1	L2	L1	L2	L1	L2	L1	L2
low rate	140	170	415		40		50	60
d, initial value	3.20	3.20	3.20	3.20	3.20	3.20	3.20	3.20
d, initial	0.12	0.15	0.37		0.04		0.04	0.05
d, final value	5.90	5.35	5.10		6.26		6.88	5.73
d, final value	0.23	0.25	0.59		0.07		0.10	0.10
make-up time, m		2.3		2.3		2.3		2.3
Service Time	3.6	3.1	2.8		4.0		4.6	3.4

Worksheet 5 - Capacity and Level of Service

	Eastbound		Westbound		Northbound		Southbound	
	L1	L2	L1	L2	L1	L2	L1	L2
low Rate	140	170	415		40		50	60
Service Time	3.6	3.1	2.8		4.0		4.6	3.4
utilization, x	0.23	0.25	0.59		0.07		0.10	0.10
dep. headway, hd	5.90	5.35	5.10		6.26		6.88	5.73
capacity	390	420	665		290		300	310
delay	10.35	9.86	14.84		9.42		10.31	9.03
LOS	B	A	B		A		B	A
approach:								
Delay		10.08		14.84		9.42		9.61
LOS		B		B		A		A
Intersection Delay	12.25							
					Intersection LOS	B		

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ALL-WAY STOP CONTROL(AWSC) ANALYSIS

Analyst: bjf
 Agency/Co.: Downers Grove
 Date Performed: 3/14/03
 Analysis Time Period: Total Midday
 Intersection: 39th/Hospital Drive/Washington
 Jurisdiction:
 Units: U. S. Customary
 Analysis Year:
 Project ID:

East/West Street: 39th Street
 North/South Street: Hospital Drive/Washington St

Worksheet 2 - Volume Adjustments and Site Characteristics

	Eastbound			Westbound			Northbound			Southbound		
	L	T	R	L	T	R	L	T	R	L	T	R
Volume	95	185	10	20	155	120	10	10	20	165	5	200
Thrus Left Lane												

	Eastbound		Westbound		Northbound		Southbound	
	L1	L2	L1	L2	L1	L2	L1	L2
Configuration	L	TR	LTR		LTR		L	TR
PF	1.00	1.00	1.00		1.00		1.00	1.00
Flow Rate	95	195	295		40		165	205
Heavy Veh	0	0	0		0		0	0
No. Lanes		2		1		1		2
Opposing-Lanes		1		2		2		1
Conflicting-lanes		2		2		2		2
Geometry group		5		4b		4b		5
Operation, T	0.25 hrs.							

Worksheet 3 - Saturation Headway Adjustment Worksheet

	Eastbound		Westbound		Northbound		Southbound	
	L1	L2	L1	L2	L1	L2	L1	L2
Flow Rates:								
Total in Lane	95	195	295		40		165	205
Left-Turn	95	0	20		10		165	0
Right-Turn	0	10	120		20		0	200
Prop. Left-Turns	1.0	0.0	0.1		0.3		1.0	0.0
Prop. Right-Turns	0.0	0.1	0.4		0.5		0.0	1.0
Prop. Heavy Vehicle	0.0	0.0	0.0		0.0		0.0	0.0

Geometry Group	5	4b	4b	5
Adjustments Exhibit 17-33:				
hLT-adj	0.5	0.2	0.2	0.5
hRT-adj	-0.7	-0.6	-0.6	-0.7
hHV-adj	1.7	1.7	1.7	1.7
adj, computed	0.5	-0.0	-0.2	-0.3
				0.5
				-0.7

Worksheet 4 - Departure Headway and Service Time

	Eastbound		Westbound		Northbound		Southbound	
	L1	L2	L1	L2	L1	L2	L1	L2
low rate	95	195	295		40		165	205
l, initial value	3.20	3.20	3.20	3.20	3.20	3.20	3.20	3.20
, initial	0.08	0.17	0.26		0.04		0.15	0.18
l, final value	6.64	6.10	5.88		6.62		6.75	5.56
, final value	0.18	0.33	0.48		0.07		0.31	0.32
ove-up time, m		2.3		2.3		2.3		2.3
ervice Time	4.3	3.8	3.6		4.3		4.4	3.3

Worksheet 5 - Capacity and Level of Service

	Eastbound		Westbound		Northbound		Southbound	
	L1	L2	L1	L2	L1	L2	L1	L2
low Rate	95	195	295		40		165	205
ervice Time	4.3	3.8	3.6		4.3		4.4	3.3
ilization, x	0.18	0.33	0.48		0.07		0.31	0.32
ep. headway, hd	6.64	6.10	5.88		6.62		6.75	5.56
apacity	345	445	545		290		415	455
elay	10.75	11.78	13.92		9.84		12.44	10.81
OS	B	B	B		A		B	B
pproach:								
Delay		11.45		13.92		9.84		11.54
LOS		B		B		A		B
Intersection Delay	12.15							
					Intersection	LOS	B	

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 Swalt Hamilton Associates, Inc.

Phone: _____ Fax: _____
 E-Mail: _____

ALL-WAY STOP CONTROL(AWSC) ANALYSIS

Analyst: bjf
 Agency/Co.: Downers Grove
 Date Performed: 3/14/03
 Analysis Time Period: Total PM
 Intersection: 39th/Hospital Drive/Washington
 Jurisdiction:
 Units: U. S. Customary
 Analysis Year:
 Project ID:

East/West Street: 39th Street
 North/South Street: Hospital Drive/Washington St

Worksheet 2 - Volume Adjustments and Site Characteristics

	Eastbound			Westbound			Northbound			Southbound		
	L	T	R	L	T	R	L	T	R	L	T	R
Volume	35	260	15	15	190	65	10	5	15	160	5	150
Thrus Left Lane												

	Eastbound		Westbound		Northbound		Southbound	
	L1	L2	L1	L2	L1	L2	L1	L2
Configuration	L	TR	LTR		LTR		L	TR
PF	1.00	1.00	1.00		1.00		1.00	1.00
Flow Rate	35	275	270		30		160	155
Heavy Veh	0	0	0		0		0	0
Opposing Lanes		2		1		1		2
Conflicting Lanes		1		2		2		1
Conflicting Lanes		2		2		2		2
Geometry group		5		4b		4b		5
Operation, T	0.25 hrs.							

Worksheet 3 - Saturation Headway Adjustment Worksheet

	Eastbound		Westbound		Northbound		Southbound	
	L1	L2	L1	L2	L1	L2	L1	L2
Flow Rates:								
Total in Lane	35	275	270		30		160	155
Left-Turn	35	0	15		10		160	0
Right-Turn	0	15	65		15		0	150
Opp. Left-Turns	1.0	0.0	0.1		0.3		1.0	0.0
Opp. Right-Turns	0.0	0.1	0.2		0.5		0.0	1.0
Opp. Heavy Vehicle	0.0	0.0	0.0		0.0		0.0	0.0

MEMO

To: Plan Commission
From: Joseph Skach, Director, Planning and Community Development *JS*
Subject: PC 2003, Good Samaritan Hospital; PD Amendment; Update to Staff Report
Dated October 3, 2003
Date: October 7, 2003

Staff received the attached revised use summary from the petitioner this afternoon. This information clarifies and updates the overall parking requirement for the hospital complex subsequent to a change in use of the former Psychiatric Hospital facility from an in-patient facility (parked at 1.2 spaces per bed) to an outpatient facility now called the North Pavilion (parked at the medical office rate of one space for the first 5,000 square feet of floor area; one space for the next 20,000 square feet of floor area; and one space for every 400 square feet of floor area of the remainder of the building). Consequently, the parking summary in the staff report would be modified as follows:

	Required	Provided	Surplus/Deficit
Last PD Amend/Current	1,672	2,349	677
With ICU Addition and change in use of Psych Hospital to North Pavilion	1,875	2,350	475

The result is a parking surplus of 475 spaces versus the 646 spaces as indicated in the staff report. The attached updated summary would become part of the Planned Development approval documents.

Attachment

C: Amanda Browne, Planner
File

GOOD SAMARITAN HOSPITAL PD PARKING CALCULATIONS

10/7/2003

1	Building / Facility	calculation current	base proposed	parking ratio	Current PD	Proposed PD
2	Main Hospital (1)	330 beds	338 beds	1.2 per bed	396	406
3	POB #1	106,547 sf	no change	see note (6)	342	342
4	POB #2	82,600 sf	no change	see note (6)	282	282
5	Psych. Hospital / North Pavilion (2)	62 beds	77,010 sf	1.2 per bed see note (6)	75 n/a	n/a 268
6	Peace Manor Senior Housing (3)	150 units	no change	.5 per unit	75	75
7	Cancer Center	13,660 sf	no change	see note (6)	94	94
8	Wellness Center (4)	88,497 sf	no change	see note (6)	296	296
9	Center for Day Surgery	15,906	no change	see note (6)	105	105
10	Gingham Resale Store	2044	no change	see note (5)	7	7
TOTAL REQUIRED PARKING SPACES					1672	1875
ACTUAL PARKING SPACES PROVIDED					2349	2350

NOTES:

- 1 The new ICU addition will add 8 new beds to the Hospital. The old vacated ICU is anticipated to be converted at a later date to additional Medical/Surgical beds pending future State Health Facilities Planning Board approval. No timeframe has been set for the conversion. Good Samaritan Hospital will seek future Village approval at such time and adjust the parking requirements as needed.
- 2 The current PD calculates parking requirements for the Psychiatric Hospital based on its original use. The proposed parking requirements are based on its current use which is outpatient activities. This use increases the parking demand and is more consistent with actual demand
- 3 The Peace Manor Senior Housing is not operated by GSH but is included as part of the PD
- 4 The Wellness Center demand is exclusive of any previously approved expansion
- 5 Commercial use calculated at 1 parking stall per 300 GSF of floor area
- 6 Medical office use calculated at:
 - 1 per 100 of first 5,000 GSF
 - 1 per 200 of next 20,000 GSF
 - 1 per 400 GSF for remainder of building



Forest Preserve District of DuPage County

3 S. 580 Naperville Road • Wheaton, IL 60187-8761 • 630.933.7200 • Fax 630.933.7204 • TTY 800.526.0857

October 9, 2003

Mr. Brent C. Lewis
Associate
Lannert Group
215 Fulton Street
Geneva, IL 60134

RE: Project No. Z-420-001
Landscape Plan Review
Good Samaritan Hospital ICU

Dear Mr. Lewis:

The Forest Preserve District of DuPage County has reviewed your request, per your phone conversation on October 6, 2003, to substitute Weigela florida 'Minuet' for the Vaccinium angustifolium var. and has found it to be acceptable. If you have any further questions or concerns, please feel free to contact me at 630-933-7243.

Sincerely,

Andrea Hoyt, ASLA
Manager of Project Development

cc: Ross Hill, P.E., Project Engineer
Mary Ellen Weller, Project Development Supervisor
Kevin Horsfall, ASLA, Project Planner
Erik Neidy, Natural Resource Management Coordinator
Scott Kobal, Plant Ecologist

0442003KSH/cmg

FILE NO. 2003 PUBLIC HEARING – A petition seeking an amendment to Planned Development No.19, commonly known as Good Samaritan Hospital, 3815 Highland Avenue, Downers Grove (PIN 06-32-306-003, 06-32-306-029, 06-32-306-020, 06-32-306-028, 06-32-306-025, 06-32-306-014, 06-32-107-002, 06-32-306-022) as follows: 1) To rezone from R-1, Single Family Residential to R-4, Single Family Residential, property commonly known as 3801 Highland Avenue, (PIN 06-32-306-003) and to amend the boundary of the Planned Development to include this property; and 2) To construct an approximately 90,000 square foot addition to the Intensive Care Unit; Advocate Health & Hospital Corporation Owner; Robert Bearlund, Good Samaritan Hospital, Petitioner

Chairman Jirik asked if there was a representative of the Petitioner present.

Tracy Kasson, member of the law firm Rathje Woodward, 300 E. Roosevelt Road, Wheaton, Illinois, stated he represents Advocate Health & Hospital Corporation in its application for an addition to the Good Samaritan Hospital campus.

Mr. Kasson referenced the site plan displayed on the easel and noted that it is an approximately two acre parcel which will contain about 1.7 acres after some dedication to the DuPage County Highway Department for roadway purposes.

Mr. Kasson stated they are here this evening seeking approval to rezone 3801 Highland Avenue and to seek an amendment to include it as part of the Hospital's Planned Development and to construct the 44-bed intensive care unit facility. Mr. Kasson introduced their witnesses: David Fox, Chief Executive for Good Samaritan Hospital; Dan White, architect; Bob Gudmundson, engineer; Bonnie Flock, traffic consultant; Joseph Ryan, appraiser; Joseph Abel, planner; and Brent Lewis, landscape architect. Mr. Kasson provided the Recording Secretary with a list of all of the Hospital's Exhibits as well as the exhibits themselves marked per the list. He noted the only exhibit not included is the Building and Site Model currently on display on the table.

David Fox, Chief Executive Good Samaritan Hospital, advised that the Illinois Health Facilities Planning Board on August 19, 2003, unanimously approved the need for this new project. They also issued a staff report that was 100% positive in all of the Board's planning criteria. Mr. Fox stated they have come forward with a project that meets all the State standards.

Mr. Fox explained currently they have a 36-bed complement of ICU and Surgical Heart Unit beds in the Hospital. Most of those beds are located in 27-year-old facilities, and the majority of those beds are provided in four bed wards, although there is one eight-bed ward. Mr. Fox stated they currently have very inadequate space in confined areas for the numbers of patients in confined areas. This makes it difficult for family members to visit, it makes these units noisy, and it is a challenge to provide the kind of privacy they want to provide their patients and their family members. Mr. Fox pointed out it is difficult to wheel in some of the equipment such as ventilators and kidney dialysis equipment that oftentimes are needed for these very sick patients.

Mr. Fox stated the new facility, if approved, would provide a 44 bed, all private room ICU and Surgical Heart Unit. It would also provide adequate support space to accommodate family members, who come and stay for many long hours to visit their family member in the ICU. It would also provide space for the physicians, nurses, pharmacists and pulmonologists who all spend many, many hours all day long caring for ICU patients. Because it would be an increase in the effective bed complement from 36 licensed beds today to 44 ICU and Surgical Heart beds in the future, it would help to relieve what is a serious crowding problem at Good Samaritan Hospital. Mr. Fox stated every morning upon his arrival at work he is apprised of how many ICU beds are either available or how many are not available. The reality is that many days each week the Hospital has zero beds or one bed or two beds, and patients are constantly being moved to a less intensive level of care so that the Level One Trauma Center can be ready to accept a serious trauma and potentially Hospitalize that patient in the ICU. Mr. Fox pointed out it does not happen too often, but occasionally it is necessary to place the Emergency Room on a diversion status when ICU beds are not available to handle a serious accident.

Mr. Fox concluded that the new ICU facility would bring a state of the art facility to the people of Downers Grove and surrounding communities. Mr. Fox pointed out Good Samaritan Hospital is known for its critical care, trauma, heart care, cancer care, etc. The project is desperately needed. Mr. Fox expressed the hope that the Plan Commission would rule favorably on this project.

Mr. Kasson next introduced Dan White with Phillip Swager Associates, the architect for the project. Mr. White indicated he is a graduate of the University of Illinois, is registered in the State of Illinois and Wisconsin, is nationally certified, is a member of the American Institute of Architects and is Program Chairman for the Chicago American Institute of Architects Health Care Committee.

Mr. White displayed the first exhibit, the Planned Development site plan indicating all the calculations and requirements under the current Planned Development and as the project evolves with the addition of the ICU to the campus. The property being added to the Planned Development is commonly referred to as the Heckel Property (3801 Highland Avenue), which is in the core of the campus. A single-family residence had been on this property for many years, and the Hospital was able to purchase it. The property is in the core of the campus. Mr. White advised the addition of this parcel allowed them to locate the new ICU on the same level as the Operating and Emergency Rooms so that patients who are in the intensive care unit would not have to take an elevator ride to get their bed.

Mr. White stated the proposed facility is a one-story addition with a basement. This addition has some implication to site circulation and parking. Mr. White advised the Hospital's traffic consultant would further explain this later in the presentation. Mr. White indicated the key factor to keep in mind is that the parking areas that are being displaced by the ICU addition would be reconfigured and added back into the campus.

There is no net loss of parking on the campus. The Planned Development is significantly over the zoning requirements for the amount of parking required for this use on the campus.

Mr. White stated the other key criterion with regard to the Planned Development is the floor area ratio. They added the 1.72 acres of the Heckel property to the Hospital's land bank. Mr. White recalled that a large portion of the campus has been dedicated to the preservation and protection of Lyman Woods and no-disturb zones. The overall campus floor area ratio remains significantly below the maximum allowed, and the open space ratio requirement is almost doubled. Mr. White noted the character of the neighborhood is well preserved with the addition of the ICU itself.

Mr. White displayed the proposed floor plans and walked the Plan Commission members through the components of the addition. He indicated the lower level would contain the area of all the public spaces and family amenities associated with the ICU such as showers, education conference room, Internet access, vending rooms, and kitchenettes. He explained the parking in front of the Hospital is depressed which enables entry at that grade level. There would also be a dedicated parking lot for the ICU.

Mr. White stated the first floor would contain 44 new beds clustered in pods of eight with a 12-bed pod at the westerly end. Mr. White pointed out that all of the pods would focus the patient rooms on exterior landscaped gardens. The first floor of the intensive care unit would be directly connected with the first floor lobbies. There will also be a public gallery space that will keep the public circulation outside of the ICU, whereas Staff circulation would come from the heart of the ICU.

Mr. White noted the upper floor is designed to be a mechanical room, which will align with the entire second floor of the existing Hospital. Mr. White also noted there will be ability for future vertical expansion.

Mr. White next focused on the design of the one-story building. The predominant material, brick with pre-cast limestone accents, will match the existing Hospital. Mr. White displayed the various elevation drawings and noted the building as seen from Highland Avenue is much longer than it is wide. The presence from Highland Avenue is relatively small compared to the footprint of the building. Mr. White referenced perspective drawings that were included in the Commission packet.

Mr. Kasson then introduced the landscape architect, Brent Lewis, of the Lannert Group. Mr. Lewis stated he has a bachelor's degree in agriculture with an emphasis on ornamental horticulture and a master's degree in landscape architecture. He walked the Plan Commission members through the landscape plan noting that native and non-invasive plant materials were used to add more color to this plan and the rest of the campus. Mr. Lewis indicated he worked on this plan with the DuPage County Forest Preserve District from the beginning of the project. He noted the Forest Preserve District was very appreciative of the use of native plant material in this project. They gave their approval to the landscape plan. Mr. Lewis stated the landscape plan accentuates the

architecture of the building and more color was added to the entry and the drop-off area. The plantings in the courtyards were designed for the patients not the visitors so that a patient in a bed can look out at the various colored perennials and types of grasses. There will be low voltage lighting installed to create a soft glow at night. Mr. Lewis explained planters would be installed on top of the walls. With regard to the parking lot, there will be trees, grasses and shrubs planted. Consideration was also given to the necessary plantings adjoining the wetlands.

Mr. Kasson next introduced Bob Gudmundson with Cowey, Gudmundson & Leder, a surveying, civil engineering and natural water resources consulting firm. Mr. Gudmundson is a registered professional engineer in the State of Illinois. He graduated from Illinois Institute of Technology with a bachelor's degree in civil engineering. Mr. Gudmundson indicated he is a principal with Cowey, Gudmundson, Leder. Mr. Gudmundson stated he has been involved in land development engineering for over 26 years. He recalled that he appeared before the Plan Commission many times with regard to the Esplanade Planned Development and the Spiegel corporate headquarters.

Mr. Gudmundson explained his firm was retained by Advocate Health Care as their surveying and civil consultant on this project and to provide the civil engineering drawings necessary for the new addition. They have put together a full set of engineering improvement plans and have submitted them to the Village, the Downers Grove Sanitary District, the DuPage County Department of Transportation and the Environmental Protection Agency. Mr. Gudmundson advised at this point they have received most of their approvals. A few of them are still pending, but they are very close to being ready to get this project up and running once approval has been obtained from the Village.

Mr. Gudmundson displayed the utility plan and noted the site is well suited for the development as proposed. It also has more than adequate utilities available either on the site or immediately adjacent to the site. There is an existing ten-inch sanitary sewer along the north end of the site. It will be extended across the entire north frontage of the building to provide service connections as necessary. That sewer in turn connects to the existing outfall that runs in a northwesterly direction and ties into the Downers Grove Sanitary District facilities. Mr. Gudmundson explained throughout the site there is an existing 12 inch water main that will be extended and looped completely around the proposed building providing both domestic and fire protection services to the new facility. Mr. Gudmundson pointed out the location of the Village water tower several hundred feet north of the campus. Mr. Gudmundson indicated the new development would also incorporate a series of storm sewers. The storm sewer will pick up the run-off from the building and the parking areas and convey it in a westerly direction to the stormwater management facilities that are located along the west perimeter of the site adjacent to Highland Avenue.

With regard to stormwater management, Mr. Gudmundson stated they did quite a bit of research looking at what had been done to date and what needed to be done to bring this development into compliance with the Village and County Stormwater Ordinances. In addition to the stormwater plans, they also created a stormwater management report that

has been submitted, reviewed and commented on by the Village Engineering Department and the consulting civil engineer. A letter from the consulting engineer was received back in July indicating that the plans met the requirements of the Stormwater Ordinance.

A series of four detention basins will be created, two are currently on the site and two more will be built. In conjunction with building these new basins, they are combining the existing dry detention basin that is located near the northwest corner of the site just off the parking lot. That basin will be connected to Basin A as shown on the plans, which will be a new detention facility just immediately to the south of the existing basin. At the same time the physical connection is made, the existing basin will be excavated to a level below the outlet condition to provide the marshy bottom facility. Mr. Gudmundson explained a marshy bottom facility is one of the items looked at in a best management practice approach. It provides ability for the natural vegetation that would be installed in the bottom of the basin to function as a natural filter to the stormwater run-off. In addition, by designing the storm sewer to have its outlet elevations about six inches above the bottom of the basin, an opportunity is provided for actual retention to occur on this site. Water will get into the basin and stay there over time to percolate and evaporate. The first flush of water from a typical storm which runs off the site will pick up the debris and contaminants from the parking areas and will get into this basin and typically stay there and be absorbed by the plant material instead of running off the site. Mr. Gudmundson indicated this is good practice, and something they implemented in the design of this project.

Mr. Gudmundson continued there are two other basins immediately south of the combination basin called Basin B. There is an existing basin immediately north of the access drive off of Highland Avenue. These two basins will also be connected to the first two, so all four basins will essentially be linked together so that when run-off does occur through the restrictive release, it routes through the four basins, gets back into the outfall storm system, which is a 48 inch pipe, that routes back up through the existing parking lot to the north and west and again goes through another existing stormwater detention facility located north of the water tower where it exits on downstream toward Lacey Creek. Mr. Gudmundson noted they have tried to provide a little extra in terms of stormwater management and best management practices for higher quality effluent leaving the property

Mr. Gudmundson next displayed the soil erosion and sedimentation control plan, which is an important aspect of the project particularly during construction. The erosion control measures that will be incorporated into this site during construction and while the area is re-vegetated will include silt fencing around the site and all the outfall areas, inlet baskets and a stabilized construction entrance off of Highland Avenue, as well as all the criteria required by the Village's and the County's Stormwater Ordinance for best management practices. As soon as the basin areas are graded, they will be blanketed with an erosion protection material.

Mr. Gudmundson advised this plan has been submitted to the Illinois Environmental Protection Agency, and in August they received the State permit.

Mr. Kasson then introduced Bonnie Flock of Gewalt Hamilton Associates, the traffic consultants for the project. Ms. Flock stated she has a Bachelor of Science degree in civil and environmental engineering as well as over 18 years of experience in the field of traffic engineering. She explained that her firm conducted the traffic impact analysis for this development. A series of data collection efforts as well as analyses were performed. The data and the technical analyses are all documented in the traffic report submitted to the Village.

Ms. Flock described the proposed traffic operations planned for this addition. Access will be gained from existing driveways; the signalized driveway off of Highland Avenue and the four-way stop sign controlled driveway off of 39th Street. Ms. Flock indicated there was no off-site roadway improvements required at either intersection as a result of this development. The minimal amount of traffic increase is about 1%. The levels of service at both of those intersections remain the same as existing conditions. She explained levels of service range from A to F, with A being best operations and F being worse. Currently both locations operate at an acceptable level of service C, and both will remain at level of service C with the development of this project.

Ms. Flock advised that they also looked at whether or not the access drive off of Washington Street warranted a traffic signal, and the found the volumes were not strong enough to warrant a traffic signal.

Ms. Flock displayed the traffic operations plan (Exhibit 5B) that showed the recommended on-site signage and striping. The current east-west road that leads into the atrium is a two-way road. After this development, it will become one-way west bound with appropriate signage.

Mr. Waechtler asked the Chairman if traffic questions should be asked now, and Chairman Jirik asked that all questions be held to the end of the petitioner's presentation.

Mr. Kasson next introduced Joseph Abel who will cover the planned development standards. Mr. Abel stated he is a planning, zoning and economic development consultant with a degree in city and regional planning, and he has performed graduate work at the University of Chicago. Mr. Abel recalled that he was Director of Planning for DuPage County for 17 years and is very familiar with Downers Grove.

Mr. Abel noted with some of the zoning cases that have taken place recently, it is important that the Plan Commission and the Village Council look at the Zoning Ordinance, specifically Chapter 28-1607; *Standards for Approval* in order for the Plan Commission to come to a conclusion and a recommendation and for the Village Council to approve or deny the petition. Mr. Abel reviewed these Standards.

With respect to Item #1, Mr. Abel stated the submitted plan meets all the standards. The allowable floor area ratio is 0.6, and the plan is at 0.48 with the inclusion of this proposal. With regard to open space, Mr. Abel noted the open space requirement is 30% and the Planned Development has 69% of its site devoted to green space. All of the setback

requirements are exceeded. With regard to parking, there is a surplus of 646 spaces on the Hospital campus.

With respect to Item #2, Mr. Abel indicated there are no departures from the zoning and subdivision regulations.

With respect to Item #3, Mr. Abel stated the proposed plan exceeds all the requirements. He noted that a great deal of professionalism has gone into the landscape plan, the architecture, the functioning of the building and all of the traffic, public utilities and stormwater detention, etc.

With respect to Item #4, Mr. Abel referred to a paragraph in the Village's Land Use Plan that states, "development in the coming years may be best categorized as completion of projects which began in the late 1970's and early 80's...." Mr. Abel stated this is a continuation of a Planned Development that started some time ago. Mr. Abel also noted that the Land Use Plan also states "...infill development on land which for various reasons has been past over...." Mr. Abel indicated this particular lot surrounded on three sides by the Hospital is an example of that. Mr. Abel stated the Land Use Plan also states "...or redevelopment of land for which more productive uses may be achieved." Mr. Abel expressed the opinion that is exactly what is being accomplished with this particular proposal.

Mr. Abel noted the Ordinance also states "(b) the Village Council may authorize a planned development designation, plan or amendment with findings such as, but not limited to, the following:

With respect to Item #1, Mr. Abel emphasized that the Hospital had received approval of the Certificate of Need. Mr. Abel noted DuPage County is one of the fastest growing counties in the State of Illinois. The population is aging and there is a definite need for this facility.

With respect to Item #2 and item #3, Mr. Abel had no comment.

With respect to Item #4, Mr. Abel pointed out presently this is a 67-acre campus, and they are proposing to add 1.7 acres. Mr. Abel stated the development on the east side of Highland Avenue is totally open space or institutional all the way down to 39th Street where there also is a church, a school and a Kindercare facility. On the west side, there is an office building with single-family residences to the west. Most of the single family residential backs up to Highland Avenue.

With respect to Item #5, Mr. Abel had no comment.

With respect to Item #6, Mr. Abel stated this is actually an in-fill piece and will enhance the overall campus.

With respect to Item #7, Mr. Abel indicated all the previous testimony indicates every one of these issues has been covered.

With respect to Item #8, Mr. Abel noted the parking on the site exceeds the Ordinance requirements by over 600 spaces.

With respect to Item #9, Mr. Abel stated the planned development does conform to the applicable regulations. He indicated if there were anyone in the public who wanted to cross-examine him or ask any questions about these standards, he would be available.

Mr. Kasson referred to standard (5) which deals with whether or not the planned development would substantially diminish and impair other property valuations in the neighborhood and advised that LaSalle Appraisal Group, Inc. has prepared a report which is Exhibit 15. He asked Mr. Ryan of LaSalle Appraisal Group to summarize this report. Mr. Waechter asked if that report was included in the Plan Commission packet. Mr. Kasson responded that it was not, but a copy of the report has been given to the Recording Secretary this evening.

Mr. Ryan, appraiser with LaSalle Appraisal Group, stated he surveyed sales and re-sales in three areas; west side of Highland Avenue, south of 35th Street, north of 35th Street west of Highland Avenue, the area that would be most affected and the area south of 39th Street east of Highland Avenue. Mr. Ryan stated there were 11 sales west of Highland from 35th to 39th Streets. Appreciation rates were between 6% to 6%, centered on 6% to 8%. South of 39th Street, an area characteristic of frame homes, appreciation rates were 5% to 19%, centered on 6% to 8%. There were only three sales north of 35th, one sale had 18% appreciation, and the other two sales had 7% to 8% appreciation.

Mr. Ryan stated, in his opinion, the Hospital had no adverse effect on the surrounding property values, and the proposed project also would not have any adverse effect on surrounding property values.

In conclusion, Mr. Kasson stated everyone who testified is available to answer any questions from the Plan Commission members.

Chairman Jirik asked Staff to make its presentation.

Amanda Browne, Planner, stated the first aspect of the petition is the proposed rezoning of 3801 Highland from R-1, Single Family Residence District to R-4, Single Family Residence District, which is consistent with the zoning of the surrounding Hospital complex. The second aspect of the petition is the incorporation of that parcel into the boundary of the Planned Development as well as the construction of the 44-bed ICU addition to the main Hospital building. The Intensive Care Unit itself is approximately 92,000 square feet in area.

Ms. Browne noted the addition is proposed at two stories above grade and ranges in height from 31 feet-7 inches on the east end where it meets the existing Hospital building

to 28 feet-2 inches on the west end adjacent to Highland Avenue. The building is low in its mass and is substantially lower in height than the main Hospital building, which is as tall as five stories.

With respect to the Floor Area Ratio, Ms. Browne stated the maximum Floor Area Ratio for non-residential uses in residential zoning districts is 0.60. The current FAR on site is 0.45 and with the proposed ICU addition that number would increase slightly to 0.48, which is 20% below the maximum threshold of 0.60.

With respect to the proposed green space, Ms. Browne explained Planned Developments in Residential zoning districts are required to provide 30% permanent common open space green space. The current total green space percentage within the Planned Development is 69.6%. Including the proposed ICU addition, the reconfigured parking areas and the land area of the 3801 Highland Avenue property, the proposed green space percentage will decrease slightly to 68.9% which is more than double the minimum requirement for Residential Planned Developments.

With respect to required yards and setbacks, Ms. Browne stated all minimum requirements of the Zoning Ordinance would be met or exceeded for the proposed ICU addition.

With respect to parking, Ms. Browne explained a memorandum was distributed to the Plan Commission this evening regarding the current status and the proposed status of the parking on the project site. Since the last amendment to the Planned Development, the overall parking requirement for the Hospital complex was altered due to a change in the use of one of the facilities. The building, which was formerly called the psychiatric hospital facility, was changed in use from an in-patient facility to an outpatient facility, which is now called The North Pavilion. Because of this new information presented to Staff, the parking summary in the Staff Report is going to be amended as outlined in the memo distributed to the Plan Commission members dated October 7, 2003. Ms. Browne stated with respect to the required number of parking spaces as of the last Planned Development amendment, the minimum requirement was 1,672 spaces, and the Hospital currently has 2,349 parking spaces, with a surplus of 677 parking spaces. With the proposed ICU addition and the change in use of the former psychiatric hospital to the North Pavilion, Ms. Browne explained the requirement increases to 1,875 parking spaces. With the reconfigured parking areas, there will be a net increase of one parking space, bringing the total to 2,350 spaces with a surplus of 475 parking spaces. Ms. Browne noted with respect to that increase from 1,672 parking spaces to 1,875 parking spaces, the North Pavilion contributes 193 spaces of the 203-space increase. The new ICU addition adds a net increase of only ten parking spaces. As a point of clarification with respect to the memorandum, Ms. Browne advised the updated summary will be submitted and become a part of the Planned Development approval documents and will be forwarded on to the Village Council as well.

Ms. Browne indicated the architect did an excellent job noting the architectural design and function of the proposed addition.

Ms. Browne acknowledged there are no outstanding Public Works issues affecting the currently proposed petition; however, there are certain procedural requirements that the Public Works Staff have noted in the Staff Report that will be required to be completed prior to the issuance of a stormwater permit.

With respect to traffic related issues, Ms. Browne stated the Traffic Division has reviewed the petitioner's Traffic Planning Report by Gewalt Hamilton Associates, and concurs with its conclusions and key recommendation to provide turn-guidance signage interior to the site.

With regard to the landscape plan, Ms. Browne indicated the DuPage County Forest Preserve District did review the originally proposed landscape plan and made certain suggestions with respect to species substitutions due to invasive and/or non-native characteristics of certain species that had been proposed. Ms. Browne acknowledged that the landscape architect has modified the plan; however, there is one final plant substitution made by the landscape architect that needs to be approved by the Forest Preserve District.

Ms. Browne also noted the Village Forester has also reviewed the revised landscape plan and indicated that the plant materials are acceptable but should be limited to the list of acceptable species provided by the Forest Preserve District due to the proximity of Lyman Woods.

Ms. Browne concluded that The Staff Development Team recommends that the petitioner's request be considered for a positive recommendation to the Village Council subject to the conditions as noted in the Staff Report.

Chairman Jirik moved to the public participation portion of the hearing. He asked anyone present who wished to speak for or against this petition to come to the microphone and state his or her name and address before speaking.

Thomas Sisul, 3624 Saratoga Avenue, Downers Grove stated he is a neighbor of Good Samaritan Hospital, but is present this evening to speak on behalf of the Downers Grove Chamber of Commerce. The Chamber's Board of Directors considered the proposal as it was presented to them at a recent meeting and warmly endorsed the concepts. Mr. Sisul recalled the many hours and days he worked on Good Samaritan Hospital issues over his years as a Council member. He stated the Hospital has been a very strong neighbor in our community, and they have provided all of us with an excellent level of medical, trauma and cancer care, as well s the heart specialty, which has gained nation-wide recognition.

Mary Thomson, Downers Grove Park District Commissioner, 4063 Cumnor Road, Downers Grove explained she is an ex-officio member of the Plan Commission. She acknowledged that it had many years since she last attended a meeting. Ms. Thomson stated at the Thursday, October 2, 2003 Park District Board Meeting, these plans came to their attention. Ms. Thomson thanked the Village Staff for making a legible plant list

available so that the District's Director, Forester and Manager of Natural Resources could review it in addition to the DuPage County Forest Preserve's review. Ms. Thomson indicated that the Park District concurs with the Forest Preserve District. She expressed the hope that the Plan Commission will take seriously Staff's point number one under their recommendation. It reads "coordination and concurrence of the petitioner's suggested plant substitution based on Forest Preserve District recommendations prior to Village Council consideration". Ms. Thomson noted that the landscape architect had done an excellent job and picked some very fine materials. The Forest Preserve did have three substitutions they suggested in protection of Lyman Woods. Ms. Thomson stated Good Samaritan Hospital has been around a long time and is a valuable part of our community as is Lyman Woods. The Park District wants to see both of them thrive and continue.

Ms. Thomson asked for future ease of working and for expediency, it would be helpful if the Park District could receive a copy of things along with the Forest Preserve. She noted the Park District is an owner of Lyman Woods, and they are the managing partner, which gives them a special sensitivity and special knowledge to the property that no other governmental entity will have. She expressed her assurance that not providing this information to the Park District was merely an oversight. She expressed the hope of continuing a good relationship. She thanked the Plan Commission for its diligence and also thanked Staff for their endorsement of the Forest Preserve's plant substitutions.

For clarification, Chairman Jirik asked Ms. Thomson if the Park District was agreeing with the DuPage County Forest Preserve's recommended substitution, and Ms. Thomson concurred and again asked for the future to be notified at the same time as the Forest Preserve District.

Bill Wallback, 1409 Willard Place, Downers Grove, asked everyone to take a real close look at the parking for this project. It was reported that there was more than adequate parking, but he wondered if the Health and Wellness Center is included in these figures. Mr. Wallback noted from a practical stand point as a some-time patient of the Hospital, having parking on one end of the campus does not necessary solve the problem for people on the other end of the campus. Mr. Wallback also pointed out one of the presenters made a comment about four inch water mains. Mr. Wallback stated he understood that the Village at the last budget session was talking about a conversion to six-inch water mains, with one of the advantages being to help the Fire Department. Mr. Wallback asked that the civil engineer check to see what the status is regarding the expansion from four-inch to six-inch water mains. He commented that six-inch water mains would not only help the Fire Department but would be a great advantage for the Hospital.

Gordon Goodman, 5834 Middaugh Avenue, Downers Grove, stated he is the Chairman of the Pierce Downers Heritage Alliance. He advised that Laura Nyberg of the Hospital invited the Alliance to participate in the neighbors' meeting that was held Wednesday of last week. Dr. Goodman indicated it was an informative and useful meeting. He stated he also reviewed more detailed plans at the Village offices and got some copies. Dr.

Goodman noted this is a very big and very complicated project and it is very important to have an opportunity to review the packet in advance of the meeting. Dr. Goodman indicated on Friday, October 3, 2003 he requested a copy of the Plan Commission packet as he has often done in the past. Dr. Goodman told the Plan Commission that he was requested to fill out a Freedom of Information Request and then paid for the number of pages he received. He asked Staff to look into that change in procedure. He was not really sure it was in keeping with the policy of expediting public participation. Dr. Goodman noted he had read over and reviewed the packet and wanted to comment on several features. One, usually for projects of this sort, the narrative that comes from the petitioner is usually longer than the one page description of the project that he feels is quite unusually deficient in this case. He wondered if more information could be obtained. Dr. Goodman noted Staff did a wonderful job of processing the information and presenting it to the Plan Commission, and there were very good oral presentations this evening. Dr. Goodman noted more written submission from the petitioner would have helped us all.

Another feature of concern was the sixteen pages of basic data about the traffic analysis. Dr. Goodman expressed his opinion that such basic data really is not needed in the Plan Commission's packet. There are eight or nine pages of really pertinent data. Dr. Goodman suggested this is something that could be improved upon in the future.

Dr. Goodman stated it is very important for the Hospital to move ahead with this project. He reiterated that it is a very good project, and it is very important to have adequate intensive care and heart support facilities at the Hospital.

Dr. Goodman stated the location of the proposed addition is well situated relative to the other features of the Hospital. He commented that it would substantially improve the traffic pattern on the campus. In his opinion, the Highland Avenue entrance has been a continuing problem. He feels that what we have heard tonight about the roadways will substantially improve that problem.

Dr. Goodman also joined with Mr. Wallback in pointing out that the actual functioning of parking on the campus is quite important. Parking distribution on the campus has certainly led to severe problems when people use the campus' medical office buildings or laboratories. People know parking is very hard to find. Even with this surplus it is a difficult situation. Dr. Goodman expressed the hope that the Hospital and the Plan Commission will give thought to how to improve that in the long run.

Dr. Goodman pointed out one feature that has not been mentioned, and that is the level of tree cover. He indicated when you go past the Heckel property it looks quite densely wooded now. Dr. Goodman noted there was a current topographical survey of the Heckel; property included in the packet. There are 72 trees within the actual property and there are another 21 trees on the perimeter of the property. Dr. Goodman expressed the belief that all of those trees would be eliminated by the project. A very substantial canopy will be lost in this area of about one and three-quarters of an acre, while the landscape plan indicates about 20 major trees will be planted. Dr. Goodman stressed the

proposed trees really are not a canopy or a cover, and they are not suitable for wildlife. Dr. Goodman did note they are very ornamental and will be very gracious. Dr. Goodman stated the campus consists of some 67 acres. There is a wooded portion on the east part of the campus. Part of it is a "No Disturb" zone, part of it is a west buffer, and part of it is grassland near the parking lot for the Wellness Center. Dr. Goodman stated the Plan Commission recommended and the Village Council has approved a landscaping plan developed in May of 1998 for that area. At the time this property is changed and the canopy reduced from approximately 90 trees to 20 trees in a very isolated fashion, Dr. Goodman suggested the Hospital think about planting again on the eastern side where the forest is and where a fair number of trees were removed for the Wellness Center. Forest trees could be added in that area to balance the change on the western side near Highland Avenue with an improvement in the environment on the eastern side. He expressed the hope that could be done perhaps not in this particular Planned Development approval because the Hospital wants to move ahead and it is very important that they do so, but asked that the Village consider this in the future. He suggested that when the Hospital next brings in a Planned Development amendment, the Plan Commission could recommend that the Hospital make some sort of improvement in the eastern campus to offset changes that are being made to reduce tree cover elsewhere on the campus.

Dr. Goodman concluded by stating he is supporting this very good improvement to the campus.

Chairman Jirik asked if there was anyone else who wished to speak regarding this petition. There was no response, and Chairman Jirik closed the public participation portion of the public hearing.

Chairman Jirik asked the Plan Commission members for their questions or comments.

Mr. Waechtler asked if Exhibit 5B, the traffic operations plan, which Ms. Flock displayed during her presentation, was available for the Commissioners. Ms. Flock responded that it should be in the Plan Commission packet. Mr. Waechtler stated he did not see it in the packet.

Mr. Waechtler asked if Exhibit 5B was dealing with traffic from the Highland Avenue entrance and exit to the Hospital, or was it dealing with the traffic from the ICU directly onto Highland Avenue. Ms. Flock responded that study covers how traffic operates today and how it will operate in the future, and it even excluded the ICU addition. Mr. Waechtler asked Ms. Flock if she was on the site herself to look at the traffic. Ms. Flock stated that she was. Mr. Waechtler stated for the last two weeks as he had been visiting the Hospital campus at all hours of the day and night. Mr. Waechtler noted that today he was intentionally there once and accidentally twice. Mr. Waechtler noted he feels there are some very serious problems at the Highland Avenue entrance and exit. He specifically noticed when he left Tower Two and Tower One today to exit onto Highland Avenue, there was traffic coming in off of Highland Avenue. Traffic was backed up and some cars could not proceed on because other cars were blocking them. Mr. Waechtler stated the numbers in the traffic count overwhelmed him. He commented that he feels

counting cars does not tell you this is a jam until you see the actual jam that occurs at a particular time. Mr. Waechtler asked if there were two lanes in and two lanes out, and Ms. Flock concurred. Mr. Waechtler questioned whether there could be three lanes in and three lanes out, as he feels that with the addition of the ICU unit, the traffic problems would be increased.

Ms. Flock stated the traffic report assumes the ICU would be a 44-bed Hospital. Trip generation rates for a fully hospital facility were used to calculate the traffic count generated by the ICU. Ms. Flock pointed out, recognizing that a Hospital already provides ICU services and many, many other services, they were very conservative in their analysis. She said the volume of traffic was assumed in the report was estimated at 15 to 35 trips either entering or exiting, but it will be even less because the net number of ICU beds is only eight and not 44. The existing 36-bed ICU is being relocated out of the Hospital and put into the new addition. Ms. Flock stressed that the volume of traffic being generated from this addition is not problematic.

Ms. Flock stated right now the vehicle storage for outbound movements stops and then proceeds west on the internal road. There currently is approximately 150 feet of vehicle storage, and this proposed design will add an additional 200 feet of vehicle storage. In response to Mr. Waechtler's question regarding three lanes in and three lanes out, she questioned whether it would be dual left turn movements in or dual right turn movements in. Mr. Waechtler stated his observation is that there are two existing lanes; you can turn north on Highland from the right lane, and you can turn south on Highland from the left lane. He noted it was pretty obvious that the traffic jam was traffic waiting for the green light in order to make a left turn south onto Highland Avenue. Drivers turning right can turn while the traffic light is red. He suggested that from an exiting standpoint it would make sense to have two lanes going left. Mr. Waechtler commented regarding in-bound traffic that if Towers One and Two were very busy it would be beneficial to have two right lanes coming in and one lane going left. He recommended that the traffic experts take another look at this. Mr. Waechtler stressed that total daily traffic counts do not take into consideration traffic jams that occur at certain times of the day.

Mr. Waechtler recalled an earlier statement that there would be 120 parking spaces at this ICU for family visitors. He suggested that a lot more cars would be coming in. Ms. Flock explained that traffic counts include employees, doctors and visitors.

Mr. Waechtler asked if anyone knew if there were traffic sensors monitoring the traffic in and out of the Hospital and controlling the traffic signal at the Highland Avenue entrance/exit. Ms. Flock responded there are traffic sensors at that location.

Mr. Waechtler expressed strong concern about traffic at this intersection.

Ms. Flock reiterated that adding 200 additional feet of vehicle storage will clear up some of the traffic jams at that intersection.

Chairman Jirik suggested that sensitivity to the traffic situation should be duly noted. Chairman Jirik commented that the traffic study shows a level of service "C" which surprised him. He felt some of the time it is a level of "A" or "B". He pointed out that the trip generation to and from the ICU will not exacerbate the traffic situation, but there may be some pre-existing conditions that to the extent this project can improve those, it would be an advantage. Mr. Waechtler agreed.

Mr. Griesbaum noted his experience entering the campus. There is a tight loop to turn right to the towers that seems to back up. He indicated his belief that the proposed extension would alleviate some of the traffic that comes directly from the entrance of the Hospital down into that feeder area.

Mr. Waechtler stated there are two driveways north of the Highland Avenue entrance to the campus. He noted that he drove up one of the driveways, and it was obviously the Heckel residence. He was advised that driveway would be eliminated. Mr. Kasson stated the Heckel residence has been razed. Mr. Waechtler then asked about the driveway north of that driveway. He was advised the driveway is for access to the Village water tower.

Mr. Waechtler then asked about the third driveway and was told that leads to the Drella property which is located towards the center of the Hospital's property, but which the Hospital does not own.

Mr. McCormick asked Mrs. Thomson, Downers Grove Park District if the Park District would acquiesce to whatever the Forest Preserve agrees to with regard to the final changes to the landscape plan. Ms. Thomson advised that the Park District would review the changes and most of the time would concur. The Park District as a managing partner, as an owner of Lyman Woods and as a neighbor, they should receive a copy as a courtesy.

Chairman Jirik stated the Minutes would note the Park District's concern. He asked Staff to look into this with regard to any future petitions and advise Ms. Thomson as an ex-officio member of the Plan Commission how this will be handled in the future.

Mr. Griesbaum commended the petitioner on the thoroughness of this petition. It is obvious the amount of detail that was gone through in presenting this tonight. The plan was well thought out, and the petitioner has presented to the neighbors and different groups as well. Mr. Griesbaum noted that not every petitioner makes such efforts. Chairman Jirik agreed that the petition process was very well presented. Mrs. Reynolds pointed out that the Plan Commission did not hear any adverse comments regarding this petition.

Hearing no further comments, Chairman Jirik called for a motion.

MOTION: WITH RESPECT TO FILE NO. 2003, MR. GRIESBAUM MOVED THAT THE PLAN COMMISSION FORWARD A POSITIVE RECOMMENDATION TO THE VILLAGE COUNCIL FOR THE PROPOSAL TO: 1) REZONE 3801 HIGHLAND AVENUE FROM R-1, SINGLE FAMILY RESIDENCE TO R-4, SINGLE FAMILY RESIDENCE; 2) AMEND THE PLANNED DEVELOPMENT BY AMENDING ITS BOUNDARY; AND 3) CONSTRUCT AN APPROXIMATELY 92,000 SQUARE FOOT, 44 BED INTENSIVE CARE UNIT ADDITION CONSISTENT WITH THE CURRENT SITE MASTER PLAN, SUBJECT TO THE FOLLOWING:

- 1. COORDINATION AND CONCURRENCE OF PETITIONER-SUGGESTED PLANT SUBSTITUTION BASED ON FOREST PRESERVE DISTRICT RECOMMENDATIONS, PRIOR TO VILLAGE COUNCIL CONSIDERATION;**
- 2. WHEN PERMIT PLANS ARE SUBMITTED, INCREASES OR SUBSTANTIAL MODIFICATIONS TO APPROVED FLOOR AREAS, BED COUNTS OR PARKING SPACES AS PART OF AN APPROVED PETITION MAY REQUIRE RE-EVALUATION OF THE PLANNED DEVELOPMENT PARKING REQUIREMENT BY THE VILLAGE;**
- 3. COMPLIANCE WITH ALL PUBLIC WORKS/ENGINEERING REQUIREMENTS OUTLINED IN THEIR MEMORANDUM DATED OCTOBER 1, 2003 PRIOR TO ISSUANCE OF BUILDING AND STORMWATER PERMITS, INCLUDING RECOMMENDED TURN-GUIDANCE SIGNAGE FOR VEHICLES ACCESSING HIGHLAND AVENUE;**
- 4. COMPLIANCE WITH ALL APPLICABLE FEDERAL, STATE AND VILLAGE LAWS, ORDINANCES, REGULATIONS AND POLICIES.**

MR. STARK SECONDED THE MOTION.

Chairman Jirik asked if there were any questions regarding the nature of the intent of the motion. There was no response. Chairman Jirik next asked if there was any discussion regarding the motion. Again, there was no response.

ROLL CALL:

AYE: Mr. Griesbaum, Mr. Stark, Mr. Kahlke, Mr. Matejczyk, Mr. McCormick, Mr. Nicholaou, Mrs. Reynolds, Mr. Waechter, Chairman Jirik

NAY: None

The motion passed unanimously.

Chairman Jirik advised those wishing to follow this matter as it moves through the approval process, to contact Staff as to when it will be scheduled for that next action before the Mayor and Village Council.