Supplemental Material to the
PHILADELPHIA HISTORICAL COMMISSION

City of Philadelphia
NEW HEALTH CENTER
On the Grounds of Friends Hospital
4641 E. Roosevelt Boulevard

September 4, 2020

THE SCATTERGOOD FOUNDATION
VSBA ARCHITECTS & PLANNERS
<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Letter from Joe Pyle, Scattergood Foundation</td>
<td>1</td>
</tr>
<tr>
<td>Letter from Commissioner Thomas Farley, Philadelphia Department of Public Health</td>
<td>4</td>
</tr>
<tr>
<td>Letter from Seth Cohen, VSBA Architects &amp; Planners</td>
<td>7</td>
</tr>
<tr>
<td>View from Entry Gate</td>
<td>8</td>
</tr>
<tr>
<td>Friends Hospital Campus Sites Considered: Proposed, Alt 1, &amp; Alt 2</td>
<td>9</td>
</tr>
<tr>
<td>Option A: Proposed Site Plan with West Entry</td>
<td>10</td>
</tr>
<tr>
<td>Infeasible Option B: West Entry, Shifted Building Footprint 1</td>
<td>11</td>
</tr>
<tr>
<td>Infeasible Option C: West Entry, Shifted Building Footprint 2</td>
<td>12</td>
</tr>
<tr>
<td>Infeasible Option D: East Entry Drop Off 1</td>
<td>13</td>
</tr>
<tr>
<td>Infeasible Option E: East Entry Drop Off 2</td>
<td>14</td>
</tr>
</tbody>
</table>
September 4, 2020

Jonathan E. Farnham, Ph.D.
Executive Director
Philadelphia Historical Commission
1515 Arch St., 13th Floor
Philadelphia, PA 19102

RE: Response to Architectural Committee for Historical Commission
Conceptual Approval of new City Health Center at Friends Campus
4641 Roosevelt Blvd, Philadelphia, PA 19124

Dr. Farnham and Historic Commission,

Please accept this letter on behalf of The Thomas Scattergood Behavioral Health Foundation (“Scattergood Foundation”) as a supplemental piece of information to support our original submission requesting the Conceptual Approval of the site location for new City Health Center at 4641 Roosevelt Blvd.

As I am sure you are aware, the need for community behavioral health programs is at an all-time high as we are faced with unprecedented levels of societal stress (widespread fear and disruption due to COVID-19, economic downturn, and racial injustices, etc.). Over the last few months we have experienced higher rates of death by suicide and overdose, as well as an increase in long-term disability due to the exacerbation of behavioral health issues. It is more important than ever for the Scattergood Foundation to prioritize our spending to support our mission and community programs.

This fiscal year, the Foundation will spend approximately $1.7 million in supporting community programs working to build a stronger, more effective, compassionate, and inclusive society where behavioral health is central. On average, every dollar the Scattergood Foundation spends supporting programs, it leverages an additional three dollars directly to those programs. The Foundation is on track to have $5.1 million in community impact this year. The Scattergood Foundation is currently funding:

- Color Me Back Program of Mural Arts Philadelphia
- Community Life Improvement Program (CLIP) Same Day Work Program in Kensington
• Impact Services
• MANNA
• New Kensington Community Development Corporation
• Prevention Point
• School District of Philadelphia
• Tookany-Tacony Frankford Watershed Partnership
• 28 immigrant and refugee serving organizations through our participatory grantmaking program known as the Community Fund for Immigrant Wellness and,
• The RISE Partnership which supports over 100 unique non-profits in building their internal capacity for evaluation.

For over 200 years, we have been the stewards of the mission and vision of those who created the historic campus and have always maintained the campus as a therapeutic tool. For the last 15 years the Foundation has continued to demonstrate our commitment to the founders’ vision by:

• placing the back 49 acres under conservation easement with Natural Lands, permanently protecting it from development. Preservation of this landscape safeguards historic greenspace and the scenic views from nearby Tacony Creek Park,
• giving easement to the City of Philadelphia to build the Philadelphia Department of Park and Recreation’s Tacony Trail Extension through the back part of the campus, and
• securing a $600,000 grant from the Philadelphia Water Department to create a stormwater management facility on the campus.

As you can see, we are deeply committed to preserving our historic campus. In fact, we voluntarily placed it on the National and Philadelphia Registers of Historic Places to save it from condemnation as a part of a highway improvement project in the 1970s. We raise these points to highlight that we do not make the request to demolish Lawnside lightly.

When the Department of Public Health approached us with the opportunity to develop a health center, we carefully studied where it should be placed on campus. We considered a range of possible sites and configurations. Unfortunately, the proposed design was the only one that met all of our safety and access requirements.

As part of the public interest analysis, the Foundation has hired a consultant to do a preliminary analysis to determine the financial feasibility of renovating and operating the Lawnside building for adaptive re-use. Based on the numbers, adaptive re-use is not feasible: the costs to renovate and relocate ($450-$550/sq. ft) would dramatically exceed the potential rent ($16-22/sq. ft.).
From the preliminary analysis the cost of moving and renovating Lawnside poses a significant burden to the Scattergood Foundation at a time when our financial resources are desperately needed to serve our core mental health missions. Spending $990,000 to $1.21 million to renovate and move Lawnside would impair the Foundation’s ability to carry out its mission.

Based on our careful study of alternatives to demolition, which are summarized in our earlier submission and these supplemental materials, the Scattergood Foundation has concluded that removing Lawnside is the only means to developing a safe and accessible new City Health Center. So, as these materials show, demolition of Lawnside is necessary to serve the public interest of building the new City Health Center. For those reasons, we request the Commission’s conceptual approval of our proposed site and the demolition of Lawnside to enable this necessary public health project.

On behalf of the Scattergood Foundation, we thank you for your consideration and look forward to meeting with the Historic Commission to discuss this request further.

Respectfully,

Joseph Pyle, MA
President
Scattergood Foundation
September 3, 2020

Jonathan E. Farnham, Ph.D.
Executive Director
Philadelphia Historical Commission
1515 Arch St., 13th Floor
Philadelphia, PA 19102

RE: Health Center at Friends Campus
4641 Roosevelt Blvd., Philadelphia, PA 19124

Dear Dr. Farnham and Historical Commission Members:

Please accept this letter as demonstration of the City of Philadelphia’s strong support of the Scattergood Foundation’s proposal to the Philadelphia Historical Commission. In response to the Architectural Committee’s feedback, the Philadelphia Department of Public Health would like to emphasize a few points for the Historical Commission’s consideration.

1. **Patient and Commuter Safety** – One of the most important goals of the City’s Community Health Centers is assuring safe, convenient, and accessible locations for its service sites. Based on the City’s analysis, we estimate the new City health center will serve approximately 31,300 patients per year and expects to host 136,500 patient visits, or over 430 visits per day.

   Among those visits, we expect over 9,500 visits, or 31 visits per day, will be with patients who either require use of a wheelchair, walker, cane, crutches, or who use a stroller for their children. The pace of patients requiring some sort of mobility assistance will be 3 to 4 patients per hour that the health center is open. This includes visits during all weather conditions as well.

   For this reason, it is incredibly important that the health center be located as near as possible to the SEPTA stop, which we expect to be used by at least a quarter of this health center’s patients. We expect many elderly patients and patients with disabilities to make use of the SEPTA Customized Community Transportation (CCT Connect) program, the para-transit option for patients with disabilities and in compliance with the American with Disabilities Act.

   There are often queues as para-transit waits for patients, and as family members gather children or elderly family members, so a wide and safe two-way pick-up/drop-off lane is critical for the functioning of a busy health center with 50 patient visits per hour.
Additionally, our patients in this part of Philadelphia use personal vehicles, Uber, Lyft, or are dropped off about 58 percent of the time, and thus availability of adjacent handicap parking spots is a critical requirement. A nearby City health center on Cottman Ave. suffered the death of one elderly patient and the hospitalization and serious injury of the patient’s sister, each of whom was hit by a vehicle after receiving their flu shots at the health center. The City Health Centers’ Patient Advisory Boards are attuned to assuring patient safety as a top priority, as am I.

2. **Serving Philadelphia’s Residents** – The need for safety net medical services is large and growing, and this ninth City health center will help to serve Philadelphia large population of residents living in poverty.

Today, the City operates eight primary care health centers that served over 82,100 Philadelphia residents in 2019, a 17 percent increase from 2017. Among patients served, 83 percent earn incomes at or below the Federal Poverty Level; in 2019, a family of four earning $25,750 was considered to be living in poverty. The patients served by the City’s eight health centers are 94 percent non-White, including 69 percent Black or African American and 21 percent Hispanic or Latino/a. Over 41 percent of the City’s patients lack health insurance, a number that has increased 16 percent since 2017.

The urgent need for a new City health center is highlighted by the current long wait times and high demand for services, and the increasing levels of uninsured patients that persist in Philadelphia. A family trying to schedule a new pediatric appointment at City Health Center 10, the nearest City health center proxy for this new location, can expect to wait 4.6 months, while a new adult appointment can take 4.9 months. The urgent demand for this health center is evident.

3. **Site Selection** – The City has undertaken a rigorous and comprehensive site review process and has identified the Friends Campus as the best location to serve populations in greatest need. There was a suggestion by the Architectural Committee that perhaps the City could identify another more appropriate site for a City health center, and I write to assure you that is not possible.

Over the course of over two years, the City evaluated 44 potential sites, and identified 7 sites as finalists. Finalist sites were evaluated by a site selection consultant, which included a detailed site analysis, a program test fit, and an analysis of pros and cons based on the City’s pre-defined criteria. The City’s defined criteria included:

- ability to accommodate the required health center program;
- accessibility to public transportation and major arteries;
- parking, either existing or potential;
- visitor experience, including for elderly and disabled patients, and patients navigating the use of baby strollers;
- visibility to the public;
- proximity to local amenities;
- safe physical environment for patients and staff; and
- site with longevity and permanence.

Using these criteria, it is the position of the City that the Friends Campus location is ideal and that, despite an exhaustive and years-long effort to identify potential sites, no other viable and affordable options have been identified in the area of greatest need. It is also important to note that Philadelphia City Council and multiple community and patient advocacy organizations have for years demanded increased access to safety net health care services in this part of the city.
Please also note that I have earlier attached a copy of a detailed analysis the City completed in partnership with the University of Pennsylvania, which highlights here the areas of primary care shortage in Philadelphia. You can see that the proposed Friends Campus location (the red dot) is ideally situated for the geographic areas of greatest need.

Thank you for the opportunity to clarify the City of Philadelphia and Department of Public Health’s priorities in building a City health center that best serves Philadelphia residents.

Respectfully,

Thomas Farley, MD, MPH
Health Commissioner
September 4, 2020

Jonathan E. Farnham, Ph.D.
Executive Director
Philadelphia Historical Commission
1515 Arch Street
Philadelphia, PA 19102

RE: Health Center at Friends Hospital Campus

Dear Dr. Farnham and Historical Commission Members:

Thank you for your continued review of the application for the Health Center at Friends Hospital. As part of this submission of additional information, we have prepared the enclosed plans that demonstrate the many obstacles presented by alternative siting options.

We carefully evaluated many possible locations and siting orientations on Friends Campus. After thorough analysis, Option A remains the only safe and accessible location that meets all the needs of the Health Center. As shown below, Option A is a safe and accessible location for patients and staff arriving by Septa, on foot, or by vehicle.

The other options shown below have unacceptable physical and safety hazards including traffic flow patterns, pedestrian access obstacles, unsafe pick up/drop off maneuvers, and do not allow for appropriate accessible parking.

Sincerely,

Seth Cohen

Seth Cohen, LEED AP, BD+C
Principal
View from Entry Gate
Friends Hospital Campus Sites Considered: Proposed, Alt 1, & Alt 2

Proposed Site and Configuration:
Optimum site and configuration because:
1. Safest location for: traffic flow, pedestrian access, pick up/drop off, and parking.
2. Most accessible location for: pedestrians, those arriving by public transit, those with accessibility issues, and those dropping off with elderly or young patients.

Alternative 1
Infeasible because:
1. Difficult to access from the SEPTA stop.
2. Significantly longer walking distance for patients to access building.
3. No traffic signal. Only eastbound vehicles on the Boulevard can access the west entry drive to the campus. Exiting traffic can only go eastbound.
4. Most vehicles would still use Main entrance, meaning they must drive through the center of campus to get to the building, creating significant traffic in front of the main hospital building.
5. Significant re-grading is required, site is currently depressed and retains storm water.

Alternative 2
Infeasible because:
1. Difficult to access from the SEPTA stop.
2. Difficult to access by vehicle. There is no existing drive to access site. Site is not visible from Main Entrance. Steep slope from entry drive drops 12 feet.
3. No parking at site. Current plan uses existing spaces to minimize additional parking spaces. It would be very difficult, if not impossible, to accommodate parking without major negative impact to the landscape and adjacent buildings.
4. Entire site is a sloped bowl at the head of a large stormwater system that becomes a stream tributary to the Tacony Creek.
Option A: Proposed Site Plan with West Entry

338 TOTAL PARKING SPACES

CONCEPTUAL SITE PLAN
FRIENDS HOSPITAL HEALTH CENTER
PARKING OPTION A - 338 SPACES

PROPOSED BUILDING FOOTPRINT
98' X 287'

KEY
- DROP-OFF & PARK
- DROP-OFF & LEAVE
- PARK, NO DROP-OFF
- SERVICE

VSBA Architects & Planners
September 3, 2020
Infeasible Option B: West Entry, Shifted Building Footprint 1

Infeasible because:

1. Unsafe for entering/exiting vehicles because drop-off access is located in the curve of the entry drive. Wide curb cut is also confusing and creates unsafe traffic pattern.
2. No accessible parking spaces immediately adjacent to building entrance/drop-off.
3. Requires patients to walk further because Health Center parking spaces are further from building entrance.
4. Building entrance is 80’ further for those arriving by SEPTA or on foot.
5. Obstructs views of the hospital from the entry drive and reduces effect of tree-lined landscape buffer and existing notable specimens.
6. Base floor elevation would be reduced to maintain accessibility. This requires a 4 to 5 foot high retaining wall plus guard rail enclosing the service area, immediately adjacent to Lawnside.
7. Access to Lawnside would be cut off because driveway would be eliminated.
Infeasible Option C: West Entry, Shifted Building Footprint 2

Infeasible because:

1. Creates unsafe traffic flow at parking lot entrance. Drop-off system is one way. Loopback to entry drive for vehicles dropping off is eliminated. Vehicles exiting after dropping off must use the parking access drive. Traffic adjacent to the hospital building is increased, meaning increased risk of accident.

2. To park, vehicles must pass the drop-off drive and continue around the curve to access the parking lot. This creates confusion for visitors and increases traffic adjacent to the hospital. Confused visitors will incorrectly enter drop-off drive resulting in potentially unsafe traffic jam at building entrance.

3. No accessible parking spaces immediately adjacent to building entrance/drop-off.

4. Proposed accessible parking spaces conflicts with people walking from main parking lot.

5. Building entrance is 70' further for those arriving by SEPTA or on foot.

6. Obstructs views of the hospital from the entry drive and reduces effect of tree-lined landscape buffer and existing notable specimens.

7. Base floor elevation would be reduced to maintain accessibility. This requires a 4 to 5 foot high retaining wall plus guard rail enclosing the service area, immediately adjacent to Lawnside.

8. Requires demolition of addition to Lawnside.

9. Access to Lawnside would be cutoff because driveway would be eliminated.
Infeasible Option D: East Entry Drop Off 1

Infeasible because:

1. Creates unsafe traffic circulation. Building drop off is too close to campus entrance gate and busy Roosevelt Blvd. Not enough time for vehicles to orient and turn right. Not enough queuing length at entry drive for paratransit and other drop-off vehicles – this creates a very dangerous condition.

2. Patient drop off is on the wrong side. Patients are dropped off on right side and must navigate vehicular drive lane to access building entrance – an unsafe condition.

3. Reduced access lanes do not allow for loop back to entry drive. All drop-off traffic must exit by using the parking access drive, resulting in increased traffic within the parking area and adjacent to the main hospital building.

4. To park, vehicles must drive past the drop-off entrance and continue around the building to access the parking lot. This will create undesirable confusion for visitors and increase traffic adjacent to the hospital.

5. Interferes with safe pedestrian access, especially for patients in wheelchairs and strollers. Pedestrians must cross the drop off drive lanes to get to the building entrance.

6. No accessible parking spaces immediately adjacent to building entrance/drop-off

7. Proposed accessible parking spaces conflicts with people walking from main parking lot and are very far from the building entrance - not in keeping with the intent of ADA standards.

8. Health Center parking spaces are much further from building entrance.

9. Health Center is closer to the historic core, obstructing views of the hospital from the entry drive and reducing effect of tree-lined landscape buffer.

10. Service entrance faces main hospital building creating an undesirable relationship to the historic center of campus.

11. Due to the grade changes on the site, the service area would be elevated, resulting in a combination of retaining walls and berms and screen walls adjacent to the entry drive, further obscuring views of the hospital building.

12. Retaining walls would be necessary along the drop-off drive, adjacent to Lawnside.

13. Demolition of building addition to Lawnside is required.

14. Vehicular access to Lawnside would need to be reconsidered.
Infeasible Option E: East Entry Drop Off 2

Infeasible because:

1. Creates unsafe traffic circulation. Building drop off is too close to campus entrance gate and busy Roosevelt Blvd. Not enough time for vehicles to orient and turn right. Not enough queuing length at entry drive for paratransit and other drop-off vehicles – this creates a very dangerous condition.
2. To park, vehicles must drive past the two drop-off curb cuts and continue around the building to access the parking lot. This will create undesirable confusion for visitors and increase traffic adjacent to the hospital.
3. Interferes with safe pedestrian access, especially for patients in wheelchairs and strollers. Pedestrians must cross the drop off drive lanes to get to the building entrance.
4. No accessible parking spaces immediately adjacent to building entrance/drop-off.
5. Proposed accessible parking spaces conflicts with people walking from main parking lot and are very far from the building entrance - not in keeping with the intent of ADA standards.
6. Health Center parking spaces are much further from building entrance.
7. Health Center is closer to the historic core, obstructing views of the hospital from the entry drive and reducing effect of tree-lined landscape buffer.
8. Service entrance faces main hospital building creating an undesirable relationship to the historic center of campus.
9. Due to the grade changes on the site, the service area would be elevated, resulting in a combination of retaining walls, berms, and screen walls adjacent to the entry drive, further obscuring views of the hospital building.
10. Retaining walls would be necessary along the drop-off drive, adjacent to Lawnside.
11. Vehicular access to Lawnside would need to be reconsidered.