

Examination of the H-Zone Proposal

Concerned Residents of Ridgewood

May 4, 2010



VILLAGE OF RIDGEWOOD
NEW JERSEY

Positives...

1. The process was not rushed (3 years)
 2. The building setbacks have significantly increased
 3. The use of Green-roofs and increased buffers to give greater noise protection and water management
 4. Illumination and Lighting controls
 5. Better traffic management and mitigation
 6. More comprehensive Master Plan wording regarding the H-Zone
 7. Placing the majority of parking underground
 8. An attempt to limit future development
 9. An attempt to cap “intensity of use” limiting floor area used for shared inpatient/outpatient areas
- *Reminder: CRR wants Valley to stay in Ridgewood and modernize, but not overburden the community*

Basis for Proceedings

- “Valley has asked for a 454 single bed facility, so how can this be accommodated within the H-Zone with the minimum impact on the neighborhood?”

Fundamental Issue Remains

- **WRONG BASIS FOR PROCEEDINGS**

- ~~– “Valley has asked for a 454 single bed facility, so how can this be accommodated within the H-Zone with the minimum impact on the neighborhood?”~~

- Should have been:

- **“Given the fact that the H-Zone is surrounded by well kept single family homes on three sides and a middle school on the rear side, what is the maximum lot coverage, building density (GFA) and ‘intensity of use’ that should be allowed?”**

Actions have reinforced Bias Perception (1)

1. Extremely concerned if “Valley agrees” with every proposed change
 - Appearance of PB being Valley’s advocate
2. Not the same level of investigation to see if the neighborhood agrees
 - Appearance that PB is biased against the Residents
3. Statement made by Mayor Pfund at the beginning of the proceedings:
 - “I don’t see a problem with that” [re expediting this quickly]
4. Repeatedly calling the residents “the opposition”
 - Implies that the Planning Board is on the “side” of the hospital and all its demands
5. Not directing the experts to challenge chosen “Renewal” option
 - Relocate, spilt-campus and “Renewal”

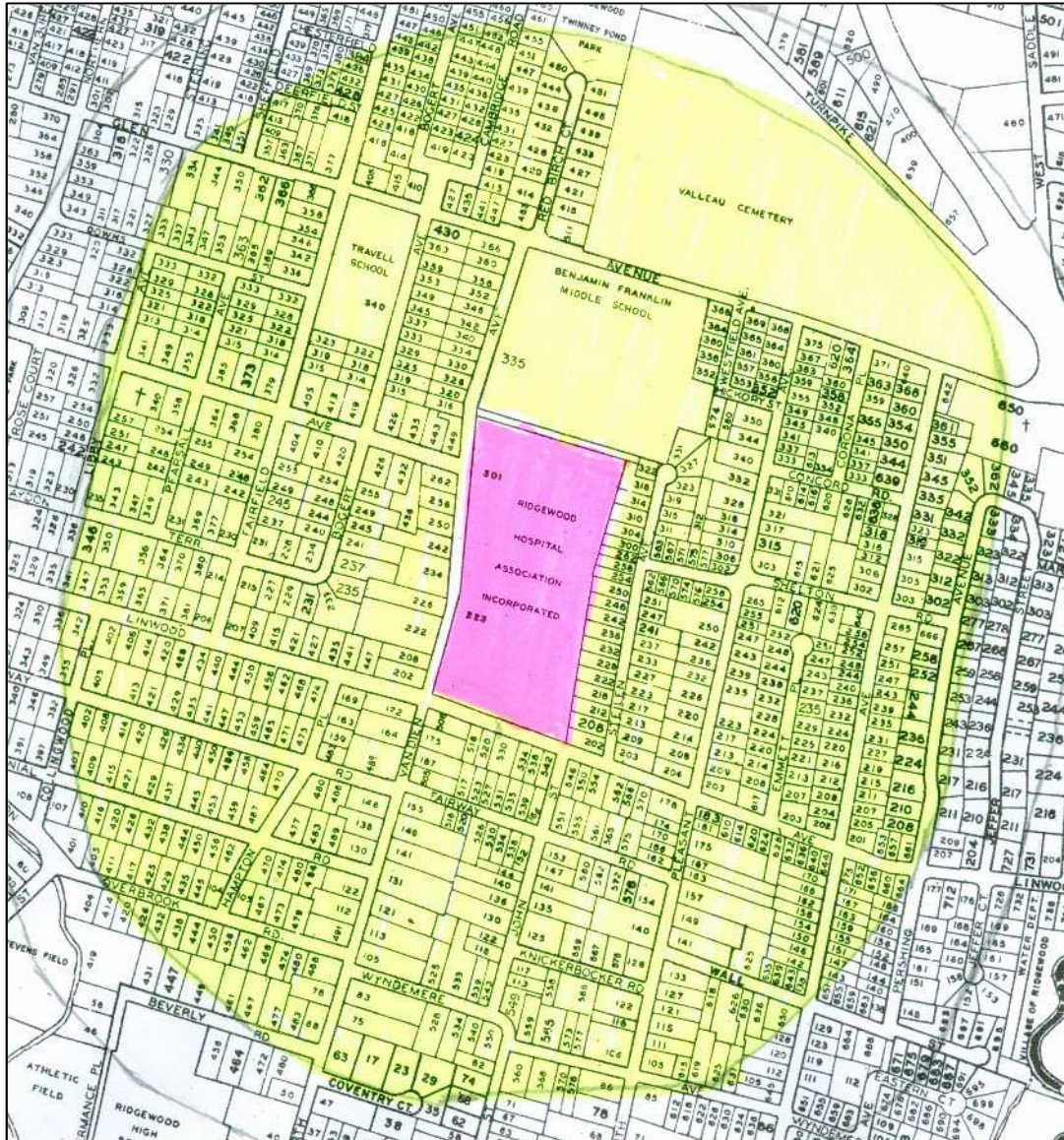
Actions have reinforced Bias Perception (2)

6. Hiring experts to improve Valley's proposal and not an independent planning expert to look at the H-Zone from the perspective of the neighborhood
7. No investigation of previous determinations of Council about the original intent of the forming of the H-Zone (not included in the new amendment)
 - Impression that the Ridgewood history or precedents are not important
8. Impact on nearby property values "cursory" and not independent
9. Probe deeper into the traffic projections

Still missing...

1. Hydrological study to determine effects on ground water and village wells also enforce “recycle” methods
 - § 190-88 A(1) *“Protect groundwater supplies, including aquifer recharge areas;”*

Potential area of impact



1,500 ft radius
around Valley
where ground
water and village
wells might be
affected by
dewatering*

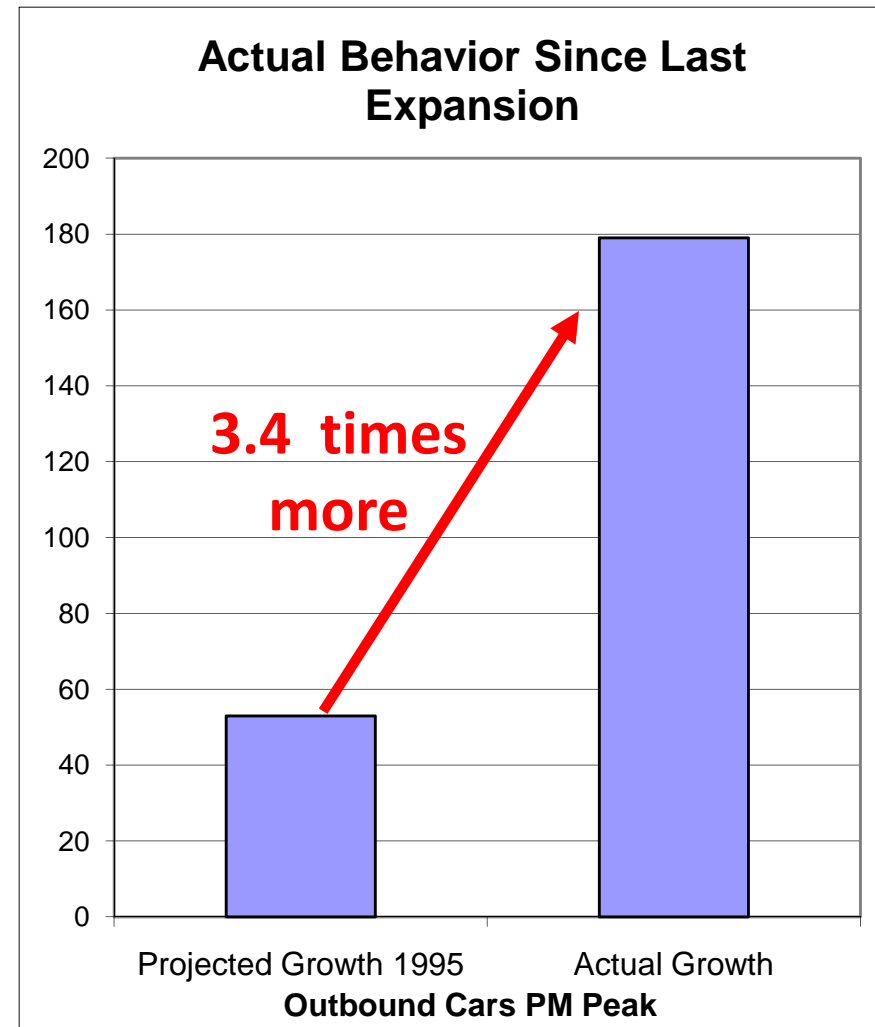
* Larry Keller,
Whitestone Associates Inc

Still missing...

1. Hydrological study to determine effects on ground water and village wells also enforce “recycle” methods
 - § 190-88 A(1) “Protect groundwater supplies, including aquifer recharge areas;”
2. Provide relief from the effects on home prices during construction
 - § 190-89 A(3) “...avoids adversely affecting the value of adjacent or nearby properties”
3. Obtain independent planning advice
4. Environmental expert to determine the full effect on the community
5. Re-analyze expected traffic growth rates
6. Roof top equipment setbacks
 - Amendment : building 94 ft tall (appear 7 storeys)
7. Stronger definitions around outpatient limits
8. Remove all consideration of Phase II (PB Nov 3, 2008)
9. A solid plan to deal with COAH requirement (60 -80 units)
 - Can not just say “a solution is pending”. A significant liability. Needs a firm taxpayer neutral plan before proceeding (not just “wishes and dreams”)

Unanswered questions raised by the traffic data

- Can we believe the traffic data?
- The traffic study that accompanied the last expansion underestimated the growth in traffic!
- One car now leaves the campus every 6 seconds at peak
(2:45pm to 3:45pm)



Sources: July 18, 1995 and Jan 12 2009 traffic studies

“Intensity of use” and traffic

- CRR fully agrees with Blais and the Planning Board in that limiting “Intensity of use” is a key protection for Ridgewood
- All about traffic!
- Not parking but turnover → **outpatients!**
- *“The Village Board should place the appropriate conditions [before granting] approval to ensure that the number of patients and employees will not increase beyond the existing levels resulting substantial increases of trip generation.”*
 - Joe Staigar, Jan 12, 2009
- **Restrictions on the number of patients and employees should be added to the Master Plan**

Actions show that Valley as no intention of staying at current “Intensity of use” (1)

SUPERIOR COURT OF NEW JERSEY
LAW DIVISION - BERGEN COUNTY
DOCKET NO. BER-L-8333-07

MAHWAH REALTY ASSOCIATES,
INC., a New Jersey Corporation
and TSI MAHWAH, LLC,

CIVIL ACTION

Plaintiffs,

Vs.

Deposition of:
JEFFREY LIETO
January 19, 2009

TOWNSHIP OF MAHWAH, a
Municipal Corporation of the
State of New Jersey; THE MAYOR
AND COUNCIL OF THE TOWNSHIP OF
MAHWAH; THE PLANNING BOARD OF
THE TOWNSHIP OF MAHWAH; VALLEY
FITNESS AND WELLNESS CENTER,
LLC; VALLEY HOSPITAL, INC.,
Defendants.

“Joint venture agreement between the fitness development consulting group and a subsidiary of Valley Health and Medical Group” (p9)

“Valley ...55% [of the] capitalization” (p 10)

[of the total space] “15% for Rehabilitation services and 30% or 40% for conference rooms and educational space” (p13)

[The benefit to the owner, Valley] “access to an owner that also operates programs that perform neurosurgery, open heart surgery, cancer care, provides, you know, \$600 million a year health care-related serves and admits 50,000 patients, does about a million outpatient visits...” (p 34-25)

- *Jefferey Lieto – hospital administrator reporting directly to the CEO Audrey Meyers*

Actions show that Valley has no intention of staying at current “Intensity of use” (2)



“[projected membership of the health club] would be between six and 8,000” (p19)

“the main purpose...integrate the many, many programs that only a hospital can offer, such as access to cardiology care, oncology, neurologic care, orthopedic... intake and outreach programs ” (p13)

- *Jefferey Lieto – hospital administrator reporting directly to the CEO Audrey Meyers*

- **Conclusion: Valley Health wanted to gain access to the projected 8,000 members of the Mahwah health club in order to funnel them into Valley Hospital**
- **Ridgewood needs to protect its Residents! The Master Plan needs to more precisely and narrowly limit “Intensity of Use”**

“Tipping Point”

- Criteria* for drawing the line between positives and negative impacts: (p110-110)
 - Traffic
 - Visual impact of large buildings
 - Noise
 - Lights
 - Safety concerns
 - Adequacy of Parking
 - Aesthetics
- Somerset Medical Center is an example*
 - Located future development off-site
 - “They [Somerset] recognized that there was no way we can fit this without creating problems” (p108)

* June 8, 2009 – Blais Brancheau (Village Planner)

The “Tipping Point” has been reached!

SVS:eam
12/13/83
02-4952
WP4.1

IN THE MATTER OF THE APPLICATION :
OF :
THE SOCIETY OF THE VALLEY HOSPITAL :
FOR PRELIMINARY SITE PLAN :
APPROVAL INCLUDING VARIANCE :
AND DEVIATION OR EXCEPTION :
RELIEF CONCERNING PREMISES :
KNOWN AS LOT 51 IN BLOCK 3301 :
ON THE TAX ASSESSMENT MAP OF :
THE VILLAGE OF RIDGEWOOD :

RIDGEWOOD VILLAGE COUNCIL

RESOLUTION OF APPEAL

BE IT RESOLVED, by the Council of the Village of Ridgewood:

...as decided by the Ridgewood Village Council

Dec 13, 1983

- Village Council's response to a Site Plan submitted to the Planning Board by Valley...

FINDING OF FACT AND CONCLUSIONS

DETERMINATIONS D, F and G.

"... The Applicant's desire to modernize is admirable and is applauded. The Council's responsibility, however, in this instance is to weigh the effect of the construction of the building proposed on the site to determine the traffic, both on site and off, that it will generate, to determine whether it will promote a desirable and harmonious visual environment which will not be incongruous with the adjoining residential area of the Village or the character of the neighborhood and to determine whether the proposal will materially adversely affect the value of adjacent or nearby property."

Dec 13, 1983

"This Council is concerned with the massive scale of the proposed project, an overall increase of 25% in the square footage, including a large underground facility extending beyond the footprint of the building. The Council is concerned that, in its need to modernize, Valley Hospital has 'exceeded in its plan a realistic modernization on the site in question.'"

Dec 13, 1983

As sympathetic as the Council is to the hospital's desire to modernize, we conclude, that there is no evidence in the record to support a variance and the determination of the Planning Board in this regard is reversed. The Council further finds, however, that if a variance were not required, that on pure site plan considerations alone, as herein enumerated, the proposed plan without other change in the hospital footprint would unduly burden the site contrary to the aforementioned purposes of the Village Code. If a multi-story building is to be constructed on the premises, the overall footprint of the hospital must not exceed the **16%** code limitation.

Current Village Ordinances for the H-Zone have been historically tested and affirmed

Background

- *Current Ordinance allows Maximum Building coverage of **16%***
- *Current square footage Floor area **530,000 sq. ft.***

1983

- Valley obtained a state certificate of need to increase the bed count (end round)
- Valley made a successful development application to the Planning Board
- Council overturns Planning Board permission

1985

- Matter settled in court

1988 – Development Approval (1/19/88)

- The “Cerebral Palsy Center” to be removed (to reduce the overall coverage to 17.1%)

1993 - Final Site Plan approval (4/20/1993)

- “Underground garage to be closed between 7pm and 6am on weekdays and all day and all night Saturday and Sunday”

The Neighborhood has NOT Changed!

- If anything, the ordinances have become more restrictive for the Residents
 - so called “McMansion Law” Ord. No. 3083
- In 1983 the council was concerned about the proposed impact of a 25% increase in coverage
- The current amendment would allow 200% increase in lot coverage and GFA!
- **The neighborhood has not changed since 1983.**

Compare

	Today (1983)	Proposed Amendment	Increase
Building Site Coverage	16% (as built 17.1%)	30% to 35%	205%
Floor Area	530,000 sq. ft.	1,170,000 sq. ft.	220%

The Ridgewood Council in 1983 was alarmed with a 25% increase and the resulting compromise was a 1.1% increase.

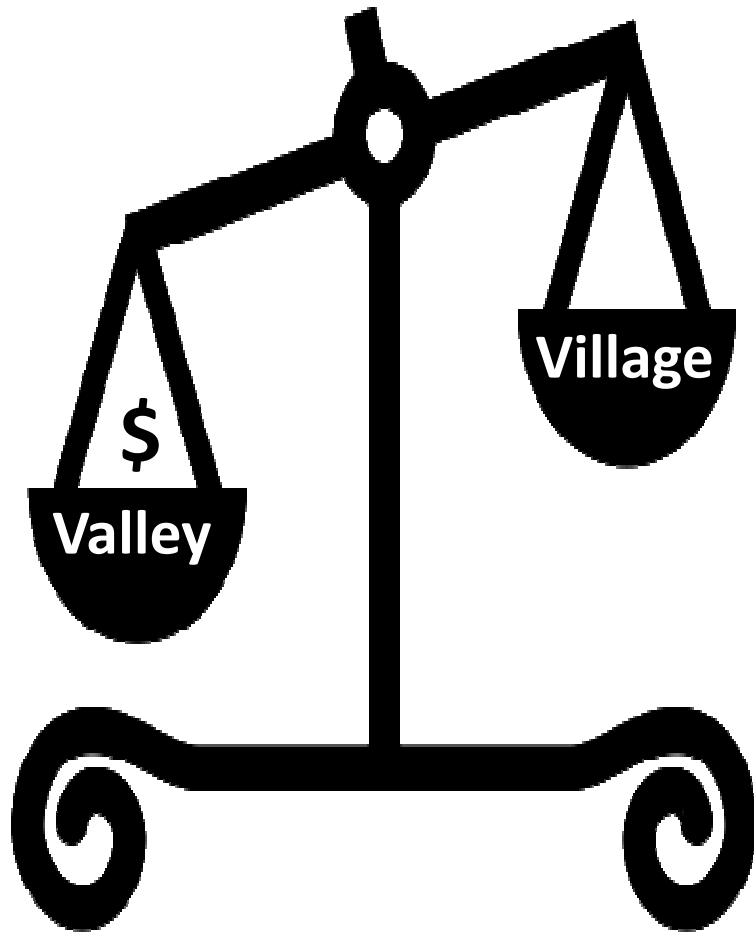
It is incongruous and absurd that this Master Plan amendment should be proposing a 200% increase!

Example of a true compromise



- Will open 2011, the new, state-of-the art hospital will be a dynamic center of medicine and technology, comfort and compassion, disease prevention and education ...*and profitable!*
- 636,000 sq ft set on 50 Acres 238 private patient rooms
- Final design a result of more than 70 community group meetings
 - This did not happen in Ridgewood!

Proposal is NOT a compromise or a “balance”



- What has the Village gained?
- What has Valley conceded?
- What value has Valley added to the Village and the neighborhood in return for the 6.5 years of construction, huge visual impact...?

• **Conclusion: Amendment needs another amendment!**

What the Ridgewood H-Zone will support

NOT!

- Hospital floor area of 1,170,000 sq ft
- 30% to 35% coverage (up from 17%)



Choice

1. Current configuration 530,000 sq ft shared patient rooms (454 beds)
2. Total floor area 650,000 sq ft with private patient rooms (possibly 250 beds)



Recommendations

1. Accept the expert's advice:
 - Rooftop mechanicals underground (to limit height)
 - Limits on patients and employees numbers
2. Complete the Hydrological study and make sure that the aquifer is protected
3. Relook at traffic growth projections
4. Talk to the people who were there at previous expansions
5. Add text to the Master Plan covering previous rulings and precedents
6. Hire an independent planning consultant
7. Hire an independent environmental consultant
8. Ensure no adverse effects on home prices during or after construction or provide a remedy
9. Add stronger limits to outpatient activities
10. Ensure that a solid taxpayer neutral COAH plan is in place
11. Limit building coverage to 20%
12. Limit Total Building GFA to 650,000 sq ft