



**SOUTH KINGSTOWN PLANNING DEPARTMENT**  
**PROJECT REVIEW MEMO**  
**South County Hospital**  
**Institutional Master Plan Review**  
June 22, 2021

Project Type:	<b>Major Land Development Project</b>		
Review Stage:	<b>Institutional Master Plan</b>		
Address:	<b>100 Kenyon Avenue</b>		
Plat:	<b>64-1</b>	Lot:	<b>122</b>
Parcel Size:	<b>17 acres</b>	Zoning District:	<b>GI</b>
Applicant:	<b>South County Hospital c/o Gary Kusnierz 100 Kenyon Avenue Wakefield, RI 02879</b>	Owner:	<b>Same</b>

**Project Description**

In accordance with [Section 603.2.C \(Government and Institutional \[GI\] Zone – Health care institution\)](#) of the Zoning Ordinance, the South County Hospital has submitted an Institutional Master Plan for review and approval by the Town of South Kingstown Planning board.

**Decision Deadline**

This application was Certified Complete on June 7, 2021. As this request is being processed by Staff as a Conceptual Master Plan application, the Planning Board has until **September 5, 2021** (90 days from date of completion) to render a decision on this request.

**Regulatory Considerations**

As outlined in Section 603.2.C of the Zoning Ordinance, master plans are required for health care institutions to promote the orderly growth and development while preserving neighborhood character. The ordinance requires that the plan includes an implementation element which defines and schedules improvements over a period of five (5) years or more, as well as identification of the specific public actions to be undertaken in order to achieve the goals and objectives of the plan. All components of the Master Plan are required to be in compliance with the use and dimensional requirements of the Ordinance, as well as the Town's Comprehensive Plan, and are required to be approved as a major land development project.

As required, health care institutions are required to review its master plan five (5) years following the first approval, and every five (5) years thereafter (regardless of any intervening changes) to determine if any changes are being considered or proposed. The regulations allow for the amendment of the master plan by the institution no more than two (2) times within any five-year term and such amendment shall be submitted not less than six (6) months prior to any planned construction of a new building, any addition to an existing building which will increase the size of such existing building

by five hundred (500) square feet GFLA (gross leasable floor area), or the demolition of any existing building.

The current submission is reflective of a new Institutional Master Plan. Staff has reviewed this submission and opines that while the application is complete, there are significant questions regarding the clarity of its content. This opinion was shared with the applicant whom subsequently provided responses to these concerns as outlined below. However, after reviewing their responses, Staff still feels that these issues need to be addressed more thoroughly.

Staff Comments and Applicant's Responses

- 1) Section 603.2 (Government and Institutional [GI] Zone: Health Care Institution) of the Zoning Ordinance defines the Health Care Institution uses (and affiliated uses accessory thereto) within Section 603.2(A) and outlines applicable regulatory standards, as well as requisite general design criteria for such institutions within Section 603.2(B). Section 603.2(C) outlines the standards for the requisite Master Plan for such institutions and requires that said plan "...shall be in compliance with the use and dimensional requirements of this ordinance..." The submitted plan does not provide analysis on existing conditions as they relate to the regulatory standards and design criteria provided within Section 603.2(B). This analysis should identify those portions of Section 603.2(B) in which the Hospital is in compliance and in which the Hospital is not in compliance. Given that such health care institutions are required to comply with these standards, the Master Plan should identify how the Hospital intends to achieve compliance with any and all deficiencies identified.

***Applicant's response: "As the hospital is an existing facility there are several areas of pre-existing non-conformance under the dimensional regulations and design criteria outlined within Section 603.2(B). These areas fall into:***

- a. Minimum Yard Dimensions. The Main facility falls within the front yard setback to Kenyon Avenue, and the Radiation Therapy facility falls within the front yard setback to Kenyon Avenue and the abutting side yard setbacks. Both buildings are in non-compliance with the ordinance for building setbacks.***
- b. Parking Lot Landscaping. Pre-existing conditions onsite for parking lot landscape islands show a non-compliance to article 7 of the ordinance.***
- c. Parking. Pre-existing conditions onsite for minimum number of parking spaces required by zoning show a non-compliance with the ordinance. South County Hospital will be addressing the requirement of parking lot landscaping, with each improvement project as outlined within the Institutional Master Plan and combatting the parking space quantity non-compliance with by the outlined parking improvement plan. These are outlined within***

***Section 1.9.1 Traffic and Parking of the Executive Summary, Section 5.0 Traffic Study, and Section 10 Proposed Landscape Plan."***

- 2) Section 603.2(C).1 also requires that "...The plan shall include an implementation element which defines and schedules for a period of five (5) years or more, the specific public actions to be undertaken in order to achieve the goals and objectives of the plan." While aspects of certain improvements anticipated within 5- and 10-year time frame have been generally identified, a defined timeline of proposed improvements was not provided. Staff suggests incorporating a Project Management Timeline (such as a Gantt Chart) into the Plan to outline the timing, duration, and completion of anticipated improvements over the 5-year and 10-year timeframes. This is of particular importance as the Master Plan identifies multiple proposed improvements that are dependent on the completion of another.

Additionally, in regard to 5- and 10-year improvements, while the Plan identifies suggestions on parking, lighting, and vehicular circulation improvements, these are not identified within the 5-year or 10-year projections and it is unclear or otherwise unknown when these suggested improvements would occur.

**Applicant's response: "The revised Institutional Master Plan submitted addresses the schedules during the five-year period to achieve the goals and objectives of the plan within Section 4.0, and addresses implementation of parking and lighting improvements within Sections 1.9.1 and 1.9.2."**

- 3) Section 603.2(D).1 requires that a master plan contain a mission statement of the hospital, *including its relationship with the neighborhood and community in which it is physically situated*. The mission statement provided within the Plan references the Hospital's commitments and values but does not explain its relationship with the neighborhood and the community in which it is physically located.

**Applicant's response: "The revised Institutional Master Plan submitted contains a mission statement as required and is outlined within Section 2.0."**

- 4) The Plan includes considerable analysis on current and projected parking availability and demand, mostly analyzed from observed conditions. However, the Plan does not mention or compare the parking required by the Town of South Kingstown as outlined within Section 603.2(B), particularly as it applies to the number of staff, employees, outpatient areas or hospital-owned vehicles.

Additionally, in regard to parking the following items were noted:

- a. Pages 5, 6, 7, 8 and 9 discusses patient flow/through put – however, there is no relationship to parking implications for new/re-structured facilities. The through put for patients and visitors need to be correlated to parking needs.
- b. Parking supply needs to clearly state location/counts on a map.
- c. There was a one day count (August 5, 2020) – this count needs to be correlated to employment conditions, visitor and patient through put for that day, otherwise it is difficult to determine if the count reflects a typical day in the hospital.
- d. There are a number of mitigating measures that are discussed on the top of page twelve, but there is no clear recommendation or path to institute the proper measures to control parking on site. Example, the hospital recognizes a problem associated with am parking therefore they will initiate the following protocols involving managing parking:
  - Valet service on xx days, xx hours
  - Shuttle buses for employees .....
- e. The proposed new parking does not comply with the Town's existing regulations. Consequently, the total proposed parking yield has been overestimated. It may be possible to reorient this proposed parking to match expected yield/spaces. Basically, which ones are you planning to utilize, how often, where and when.
- f. On page 21, there is a stated goal to grow orthopedic services, does this have any implications on parking. How, when, effect?
- g. With regards to Covid verses pre-Covid please provide supporting documentations on asserted 90% factor. Does it apply to the Town of South Kingstown as a whole or only the area in the vicinity of the hospital? Traffic

counts could be down but what was the hospital through put. This also corresponds to August parking lot counts.

**Applicant's Response:** "The revised Institutional Master Plan submitted contains an updated parking summary outlining existing parking demands based upon the field parking study and addresses a parking improvement need and schedule for each of the outlined services and planned capital improvements under Section 1.9.1. Traffic Operations and Parking Improvements within the plan's five-year period have been outlined.

- 5) The Plan identifies the displacement of existing hospital operations (several instances) due to additions, improvements or efficiencies being proposed without a valid explanation of where these operations are being relocated to.

**Applicant's Response:** "The revised Institutional Master Plan submitted contains a Clinic Relocation Table that addresses the comment under Section 1.0."

- 6) The Plan identifies several improvements that are presented as 'Options' (i.e. new Operating Rooms) for which it is explained that "No direction has been selected from any of these options and all remain as an opportunity until the need arises for the Hospital to make a decision and complete further due diligence." These options need to be more clearly identified as to how and when these opportunities may be pursued and where they fall in the Hospital's 5- and 10-year projections.

Further, on page 58 the Plan states "This Strategic Facilities Master Plan is considered conceptual and is a hypothetical solution should the hospital experience surgical growth to this scale and community need. Should this project progress, project drawings will be developed and submitted to the Town Planning Board for approval." Please be advised that the consideration of the Master Plan in this manner does not meet the intent of the purpose of the Master Plan in promoting "the orderly growth and development of institutions while preserving neighborhood character." Also be advised that deviations from the Master Plan require Planning Board approval and the Plan can only be amended by the institution no more than two (2) times within any five-year term and such amendment shall be submitted no less than six (6) months prior to any planned construction of a new building, any addition to an existing building which will increase the size of such existing building by five hundred (500) square feet GFLA, or the demolition of any existing building. This same concern applies to the 'orthosphere' discussed on page 62 which indicates that a parking study would need to be conducted in the future if this improvement is proposed and that a parking garage would be needed (which is not accounted for within the capital improvements and/or parking analysis).

**Applicant's Response:** "The revised Institutional Master Plan submitted contains a clarification and timetable for all options within the five-year plan period.

- 7) Page 70 indicates that there are no specific landscape designs being provided within the Plan. Be advised that landscape improvements are integral to exterior improvements, particularly as it applies to parking. At the very least, general landscaping considerations should be provided to confirm these landscaped areas do not encumber portions of the property anticipated to be used for parking.

**Applicant's Response:** "The revised Institutional Master Plan submitted contains a clarification and timetable schedule for landscape improvements within the five-year plan period under Section 10.0.

- 8) We were concerned to hear that the hospital is undertaken modifications to their lighting plan with review and approval by Town. Section 1.9.2 identifies a problem, however, there

is no clear path to correcting any of these identified deficiencies the regulatory process to accomplish this.

**Applicant's Response:** "The revised Institutional Master Plan submitted contains a clarification and timetable schedule for lighting improvements within the five-year plan period under Section 1.9.2.

- 9) Page 15 has a section titled Recommendations: There are two categories, short term and long term. These time periods need to be defined. In addition a clear permitting path should be mentioned and/or acknowledged.

**Applicant's Response:** "The revised Institutional Master Plan submitted contains a clarification and timetable schedule for all improvements within the five-year plan period."

As a general note there are numerous references to acronyms throughout the plan that are not defined or explained. This leaves readers (particularly those unfamiliar with the Hospital, its operations and/or campus) confused as to what those acronyms refer to. A glossary or definitions section (or a simple explanation of the acronym when first referenced within the text) would be beneficial in understanding what is being referred to.

**Applicant's Response:** "All acronyms have been removed or defined in the submitted Institutional Master Plan."

Also, despite being referenced at the bottom of page 41, there are no conceptual images of the potential picnic shelter and fitness/children's play equipment provided.

**Applicant's Response:** "At this time no imagery has been developed for either the pathway overlooks or play equipment as shown on the Town Farm Park Parking Expansion conceptual plan."

## Review to Date

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### *Institutional Master Plan Review*

#### May 18, 2021 – Technical Review Committee (TRC) Review of the Institutional Master Plan

*The Institutional Master Plan submission was reviewed by the TRC from which the following items were identified:*

- *Applicant needs to substantiate the parking calculations and formulate a table, in usable format that is easily understood, showing existing and projected parking conditions, zoning requirements, and operational needs;*
- *Applicant needs to identify which landscaping projects are going to be instituted with which project improvements and associated time frames;*
- *Applicant needs to identify when lighting is going to be brought into conformance and when lighting improvements are going to be made as they relate to the anticipated capital improvements;*
- *It was reiterated with the applicant at TRC that this project will proceed with full Planning Board review and processed as a Major Land Development project at the Conceptual Master Plan stage of review.*

## Required Findings

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In approving this Institutional Master Plan as a major land development application, the Board must make positive findings on the following standard provisions:

- (1) The Institutional Master Plan is consistent with the comprehensive community plan and/or has satisfactorily addressed the issues where there may be inconsistencies;
- (2) The Institutional Master Plan is in compliance with the standards and provisions of the municipality's zoning ordinance;
- (3) There will be no significant negative environmental impacts from the Institutional Master Plan is, with all required conditions for approval;
- (4) The Institutional Master Plan, as proposed, will not result in the creation of individual lots with any physical constraints to development that building on those lots according to pertinent regulations and building standards would be impracticable (see definition of buildable lot). Lots with physical constraints to development may be created only if identified as permanent open space or permanently reserved for a public purpose on the approved, recorded plans; and
- (5) The Institutional Master Plan will result in development that has adequate and permanent physical access to a public street. Lot frontage on a public street without physical access shall not be considered in compliance with this requirement.

The approving authority must also address each of the following general purposes of zoning:

- (1) Providing for the orderly, thorough and expeditious review and approval of land developments and subdivisions;
- (2) Promoting high quality and appropriate design and construction of land developments and subdivisions;
- (3) Promoting the protection of the existing natural and built environment and the mitigation of all significant negative impacts of any proposed development on the existing environment;
- (4) Promoting design of land developments and subdivisions which are well-integrated with the surrounding neighborhoods with regard to natural and built features, and which concentrate development in areas which can best support intensive use by reason of natural characteristics and existing infrastructure;
- (5) Encouraging local design and improvement standards to reflect the intent of the community comprehensive plans with regard to the physical character of the various neighborhoods and districts of the municipality;
- (6) Promoting thorough technical review of all proposed land developments and subdivisions by appropriate local officials;
- (7) Encouraging local requirements for dedications of public land, impact mitigation, and payment-in-lieu thereof, to be based on clear documentation of needs and to be fairly applied and administered; and
- (8) Encouraging the establishment and consistent application of procedures for local record-keeping on all matters of land development and subdivision review, approval and construction.