# MERITER HOSPITAL

Park Campus General Development Plan

February, 2009

# CONTENTS



### Introduction

**Meriter Hospital** 

1

- a. History of Meriter
- b. Meriter Now
- c. Campus Boundaries
- d. Purpose of the Plan
- e. Overview of Planning Process

#### **Existing Conditions**

2

3

- a. Meriter Property & Uses
- b. City of Madison Comprehensive Plan
- c. Regional Context
- d. Existing Zoning
- e. Access, Circulation & Parking
- f. Density, Greenspace,

Surrounding Uses, & Utilities

#### **Issues & Opportunities**

- a. Meriter Facility Conditions
- b. Health Care Market
- c. Demographics
- d. Facility Recommendations
- e. City of Madison Built Form



### **General Development Plan**

#### **Goals & Objectives**

4

- a. Letter of Intent
- b. Vision & Goals
- c. Planning Principles

#### Recommendations

5

- a. Future Development Patterns & Use
- b. Traffic Analysis
- c. Building Design Principles
- d. Sustainability Strategy

#### **Development Concept**

6

- a. 10 Year Development Concept Plan
- b. Parking & Square Footage
- c. Preferred Phasing
- d. Proposed Projects
- e. Demolition

### **CONTENTS** Specific Implementation Plan

#### **Phase One SIP**

- a. Park Street Campus Survey
- b. Existing Properties
- c. Landscape
- d. New Construction

#### **Zoning Text**

- a. Maximum Heights
- b. District Reference Plan
- c. District One
- d. District Two
- e. District Three
- f. District Four
- g. District Five



7

8

# 01 INTRODUCTION: MERITER HOSPITAL



View of the Park Street Campus from Monona Bay





Meriter's beginnings, 1904



Aerial view of Meriter Hospital from the 1930's



Aerial view of Meriter Hospital from the 1960's

Meriter Hospital has been providing healthcare to the community on its Park Campus since 1903. The first hospital facility had a total bed capacity of thirty. In 1929, the construction of the Center Wing increased the bed capacity to 175. McConnell Hall, a classroom and residence hall for the Madison General School of Nursing, was completed in 1943. The East Wing was added in the early 1950's and included birth rooms, laboratory facilities, and a new surgical suite. In 1963, the original thirty bed facility made way for the North Wing, providing a home for the psychiatric and rehabilitation programs.

In 1967, construction began on the Tower. Completed in 1972, this then modern facility housed a new emergency room, x-ray and surgery departments, and conference space. The Meriter Medical Labs building was constructed in 1970. The former Longfellow School was purchased from the Madison Metropolitan School District in 1997 and now provides space for the employee childcare center, Epic Training, and the employee gym. The Atrium was added in 1998 and provided space for an even newer emergency room, the Community Health and Education Center, and the cardiology and pulmonary departments. In 2006, Meriter completed the expansion of the Atrium and Tower, effectively maximizing the footprint of the hospital.



### MERITER TODAY



Meriter Hospital, which was created in 1997 through the merger of Madison's two oldest hospitals – Madison General and Methodist; is a 448 bed non-profit community hospital that provides comprehensive health services for residents of southern Wisconsin and areas of northwest Illinois. It is a major teaching affiliate of the University of Wisconsin and the fifth largest hospital in Wisconsin. Meriter has been recognized at the Mastery level by the Wisconsin Forward Award in both 2004 and 2005, and with the Governor's Award of Excellence in 2006.

Meriter employs approximately 3,400 staff, including the growing Meriter Medical Group of physicians. In addition, over 900 medical staff from UW Health Physicians and independent groups practice medicine at Meriter. Key service lines include Medicine, Surgery, Behavioral Services and Physical Medicine and Rehabilitation. Meriter distinguishes itself in two specific areas, its Cardiovascular Center of Excellence and its Women's Center of Excellence, which includes the state-of-the-art Newborn Intensive Care Unit.

Health care services are provided through a Collaborative Practice Model across a health care continuum by partnering with physicians, clinics, emergency service providers and facilities. Meriter leads the Madison market in obstetrics and women's health and has the busiest emergency room in Madison.

Meriter Hospital was built around a commitment to community service, as expressed in its mission statement:

- To heal this day
- To teach for tomorrow
- To embrace excellence always
- To serve our communities for a lifetime of quality health care.



### **MERITER TODAY**

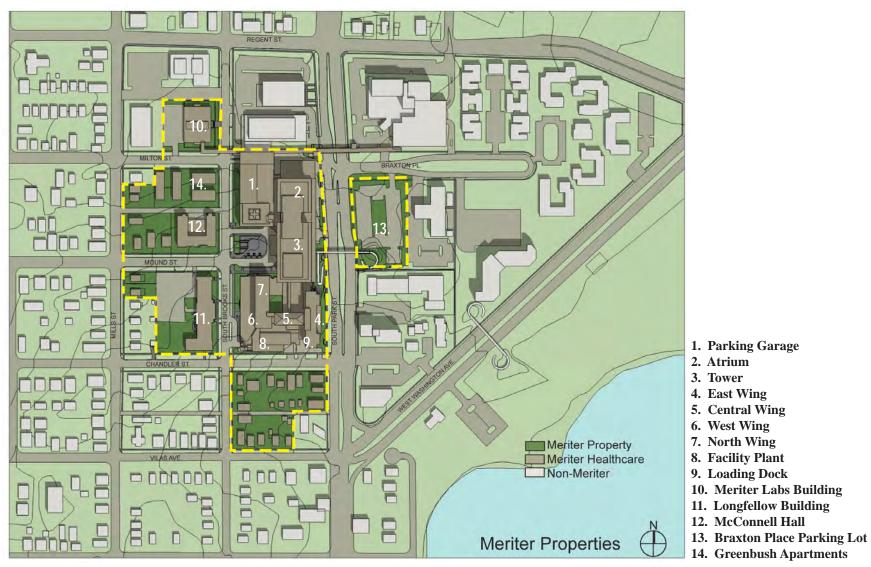




The Child and Adolescent Psychiatric Hospital, which is the only community based program in south central Wisconsin dedicated to meeting the unique mental health needs of children and teens, Max W. Pohle Dental Clinic, which provides services to patients with behavioral, emotional, or medical conditions that create unique dental needs, and the SANE program (Sexual Assault Nurse Examiner) are services that have grown out of Meriter's continuing commitment to community.



**PARK STREET CAMPUS BOUNDARIES** 



#### **MER!TER**



### **PURPOSE OF THE PLAN**

The Meriter Park Campus Master Plan is the most comprehensive planning project the hospital has ever undertaken. Although only designed to be a ten-year document, the plan creates a flexible framework that will provide a clear map for decisions that do not impede the long-term goal of the Park Campus remaining Meriter's flagship, diagnostics and treatment center.

Built on a solid foundation of recommendations for long-term growth from national healthcare planners, this Master Plan will guide the decision-making process for the next ten years, until land availability and acquisition dictate the direction of the long-term growth and replacement of the diagnostics and treatment platform.

### **OVERVIEW OF THE PLANNING PROCESS**

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Potter Lawson

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Throughout the process to develop this ten-year Master Plan, a series of strategic goals and planning principles were developed to guide the decisionmaking and prioritization process. These goals were derived with input from the entire spectrum of stakeholders in the planning process, from the President of Meriter, national healthcare consultants. a core group of Meriter employees, City of Madison planning staff and a neighborhood steering committee formed explicitly to aid Meriter in their decisions that affect the surrounding neighborhoods.

Having hired Potter Lawson Inc. to develop a Master Plan document that would satisfy the Park Street Design Guidelines, Meriter Hospital organized a Neighborhood Steering Committee in June of 2007 that was composed of residents and representatives of the local neighborhoods and Alder Julia Kerr. This group has since met with representatives of Meriter Hospital every month through March of 2008.

Figure 01: Neighborhood Steering Committee, Comments Meeting 06/08/07



### **OVERVIEW OF THE PLANNING PROCESS**

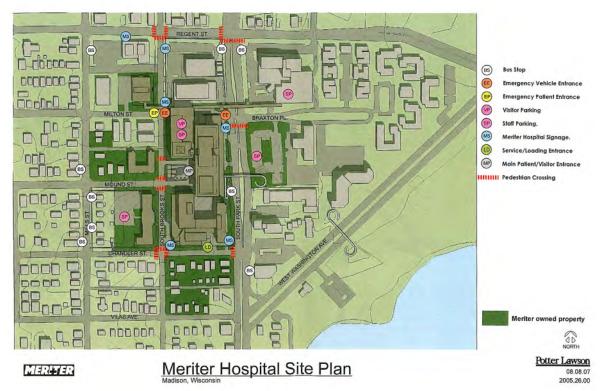


Figure 02: Meriter Core-group Wayfinding Meeting 08/08/07

Kurt Salmon and Associates began a strategic facility Master Plan in the summer of 2007. This strategic Master Plan looked at the existing conditions of Meriter's assets, both internally and externally, and created a framework that defines Meriter's market expectations and clinical needs, as compared to national healthcare standards and the local Madison healthcare market. This strategic facility plan provides the options for 30-50 year growth and forms a roadmap for the decisions made in this 10-year Master Plan.

After working with the Neighborhood Steering Committee and monthly meetings with City of Madison planning staff, the Master Plan was documented as a 10-year plan with a preferred phasing plan. This further defines the immediate goals verses the longer-term decisions that are expected to have a direct affect on the Park Campus beyond the next decade.





Meeting 08/08/07

Park Campus

# **02 INTRODUCTION: EXISTING CONDITIONS**

Meriter Property & Uses

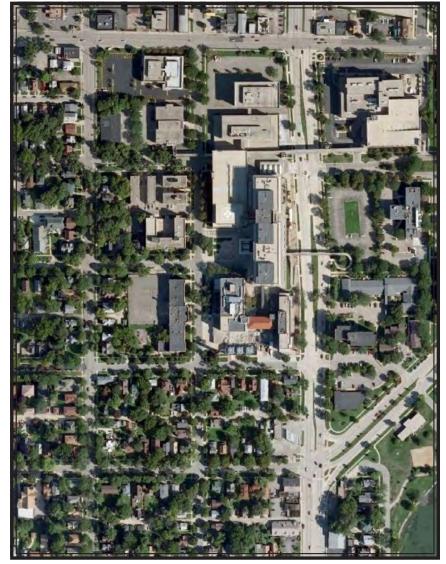
**City of Madison Comprehensive Plan** 

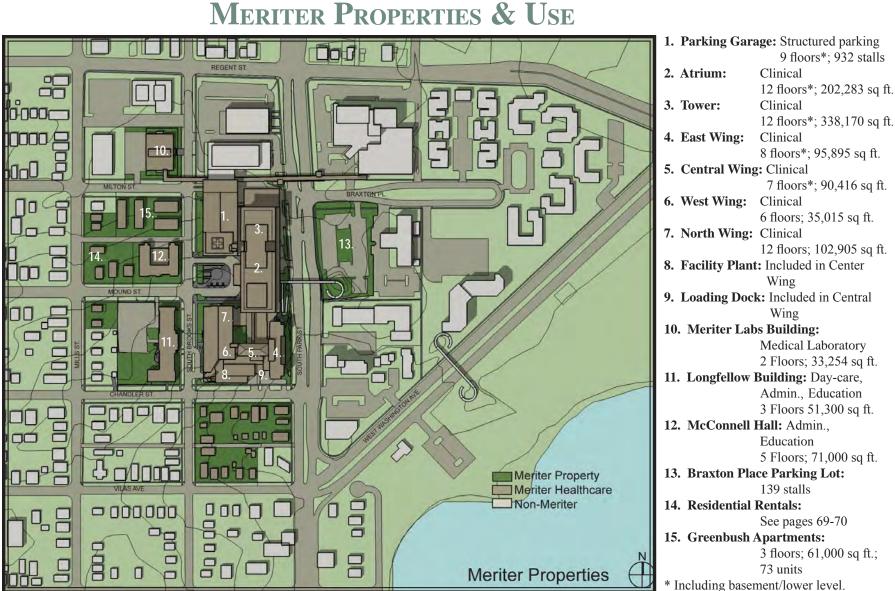
**Regional Context** 

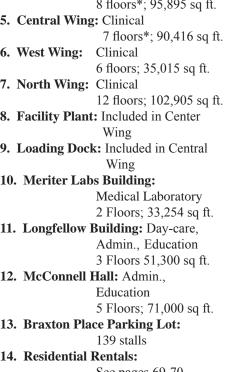
**Existing Zoning** 

Access, Circulation, & Parking

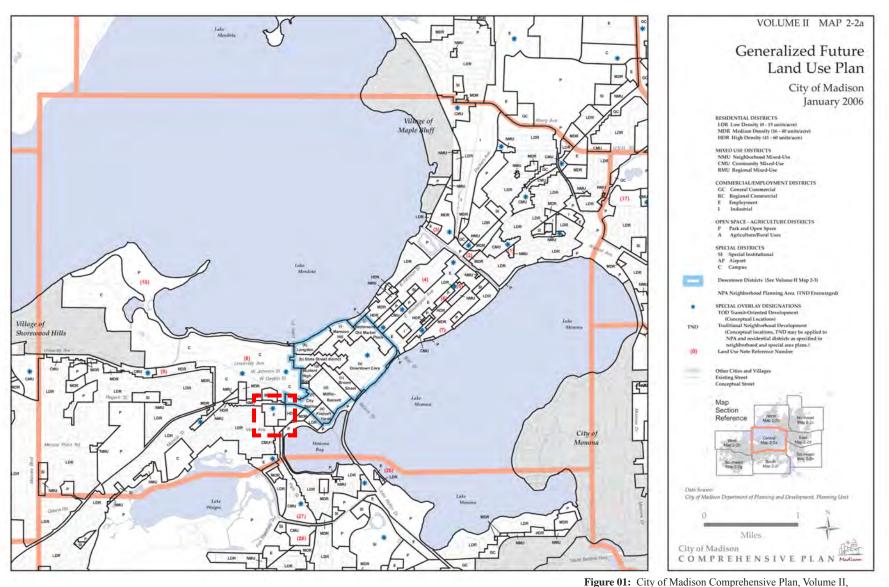
Density, Greenspace, Surrounding Uses & Utilities











### CITY OF MADISON COMPREHENSIVE PLAN

Map 2-2a, Meriter property indicated

**MERLIER** Park Campus

### CITY OF MADISON COMPREHENSIVE PLAN

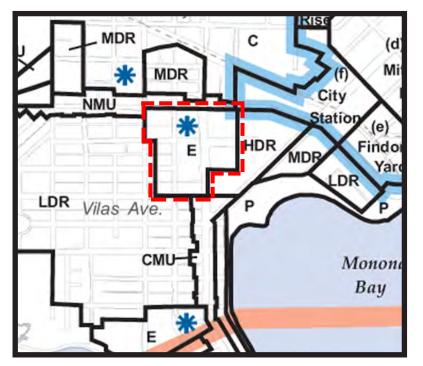


Figure 02: Enlarged, City of Madison Comprehensive Plan, Volume II, Map 2-2a, Meriter property indicated

The City of Madison Comprehensive Plan indicates the Meriter Park Campus as an "Employment Center" use. Just as important are the Residential Districts indicated on all sides. Directly to the east of Meriter's property, between Park Street and West Washington Street, is a High Density Residential District. To the north, across the Regent Street Neighborhood Mixed-Use District is a Medium Density Residential District. Directly west and to the south is a Low Density Residential District. By making possible the development of a three or four story transitional zone along its eastern edge, this Master Plan seeks to provide a formal transition zone between the Low Density Residential District and the higher density use of the hospital itself, as well as the surrounding higher density residential and mixed-use districts on Park Street.



### **Regional Context**

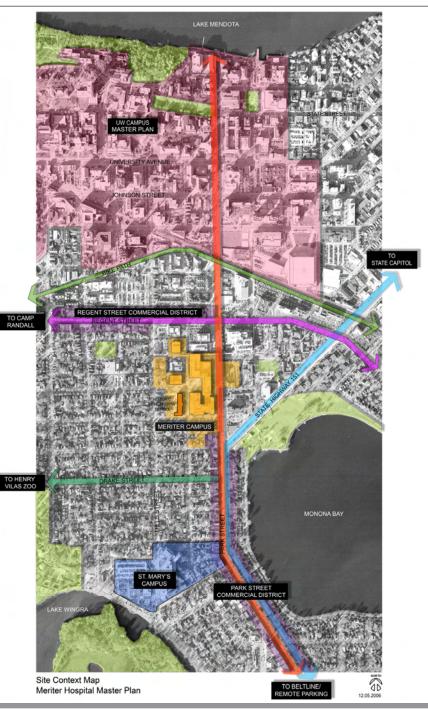
The Meriter Park Campus lies at a very prominent location in the City of Madison. Park Street itself is a gateway into the city's Downtown, as well as the University of Wisconsin. Located just south of the Regent Street Commercial district, Meriter is at the southeastern edge of the Regent Street Design Guidelines.

While not in the Regent Street Design District, it is in the northern end of the Park Street Design District. Working with the intent of both design guidelines, the Meriter Master Plan seeks to integrate the two design districts, while maintaining an identity for the Hospital.

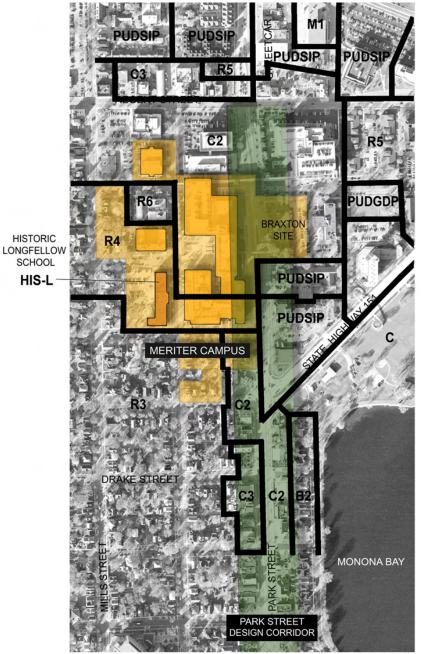
The natural landscape is a very important feature for the Meriter Campus. Located less than three blocks from Monona Bay, Meriter maintains views of the Bay from several of its buildings.

To the west of Meriter is the Vilas/Greenbush singlefamily residential neighborhoods. Maintaining a residential scaled transition zone forms an integral part of the Meriter Master Plan.

Meriter also recognizes the changes occurring along Brooks Street. Three blocks south of the Meriter campus, lies St. Mary's hospital. This places two major hospital entrances along Brooks Street, which is also a heavily used pedestrian area.







City of Madison Zoning Designations Park Street Design Corridor Special Zoning **EXISTING ZONING** 

Being the oldest hospital in the City of Madison, Meriter has grown into some very interesting zoning districts. While the majority of the Hospital is within a Commercial District, C2, portions of the hospital are also in R3, R4 and R6 disctricts.

Part of the goal of this Master Plan is to lay a framework for the future development by rezoning the properties owned by Meriter Hospital.

In addition to the various zoning districts Meriter occupies, it is also part of the Park Street Design Corridor. The Park Street Corridor Urban Design Guidelines recognize that a hospital campus should not follow the exact same guidelines as the commercial development that it is intended to direct. However, Meriter must follow the intent of the Park Street Corridor Urban Design Guidelines as much as possible.

A final note on the zoning for the hospital is in regard to the Longfellow Building. This beautiful brick school building is on the National Register of Historic Buildings and is listed as a Madison Landmark. This Master Plan seeks to maintain the historical character of the building, while integrating it into the fabric of the Meriter Park Campus.

> MERITER Park Campus

Introduction: Existing Conditions 17

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### **EXISTING CONDITIONS:** Access, Circulation and Parking

#### **Access Circulation:**

Meriter Hospital is located just south of the intersection of Park Street and Regent Street, so the Hospital has good vehicular access from all directions. Both Park and Regent Streets are heavily used, providing Meriter with excellent visibility and presence within the City. The height of the Tower and Atrium buildings designates them as visual landmarks in the surrounding area, and can be seen from across Monona Bay.

There are a series of issues with regard to the vehicular access to the Hospital.

The most obvious issue is that even though Meriter Hospital has a Park Street address and a huge presence along Park Street, it does not have a vehicular entry on Park Street other than for emergency vehicles. This creates confusion for first-time visitors to the Hospital who expect entry to parking along this busy street.

Regent and Park Streets form a very congested intersection that at times constrains left turns from and into Brooks and Regent Streets, restricting traffic flow around the Meriter Park Campus. However, once visitors locate the entry on Brooks Street, they have an easy time getting into and out of the Hospital, with parking and drop-off operating smoothly at the front door.

Since first impressions are very important and a visitor's first visit to a hospital can be a very stressful time, the signage along both Park and Regent Streets should be made clearer so that wayfinding to the Brooks Street entry is easier for the first-time visitor.

Another issue is that of congestion at the emergency vehicle entrance on Brooks Street. Emergency service vehicles and emergency patient vehicles share the same entry drive on Brooks Street, with their fixed building entries also located too close to one another for confusion-free operation.

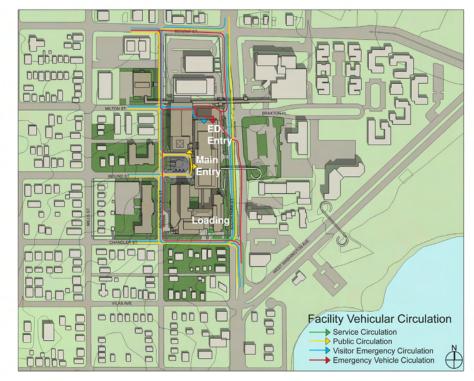


Figure 01: Meriter Vehicular Circulation



### **EXISTING CONDITIONS:** Access, Circulation and Parking

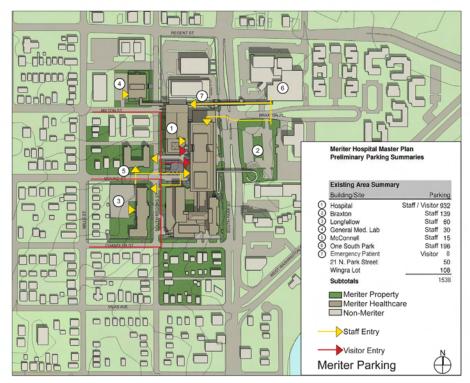


Figure 02: Meriter Vehicular parking

The main entry to Meriter Hospital is referred to as the "horseshoe." It has an excellent functional relationship with the main parking facility for the Hospital. Although there is some congestion in the horseshoe, at times aggravated by a rare delivery to the front door, overall the entry functions well in its location. One issue for the Hospital is the need to provide valet parking at the front door. Currently, there is no space for this service, which may require partial redesign of the horseshoe so as not to add congestion to the parking structure entry.

Common to many such busy entries, the crossing of pedestrians and vehicles poses a concern for Meriter Hospital that will be addressed in the landscape Master Plan. Brooks Street is a pedestrian corridor for students walking to the University of Wisconsin, as well as local residents, Meriter staff, and visitors. As there is currently no bus service along Brooks Street on the Meriter Campus, vehicular congestion along Brooks is reduced. Adequate bus service is available along both Park and Mills Streets.

Perhaps the area in the most need of immediate improvements is the loading and trash area to the south of the main hospital along Chandler Street. The current loading facility is undersized for the Hospital and only functions well due to an incredibly efficient and vigilant receiving schedule and process. The loading bays are not deep enough to a accommodate large trucks moving through them and often delivery trucks must block Chandler Street while navigating into the loading bays. This congestion is an irritant for local residents who have to hear and navigate around large, noisy trucks coming in at different times to make their deliveries.

Due to the lack of an entry along Park Street, Chandler Street becomes a main entry point for the Hospital for people arriving from the south. As the loading area for the Hospital is also located on Chandler Street, it becomes the first portion of the Hospital seen by visitors and patients, creating a visually unappealing entry point.

While the parking structure at Brooks Street adequately serves the majority of Meriter patient and visitor parking, staff parking is a patchwork of offsite rented spaces and piecemeal parking spread across the campus. Meriter recognizes that with future development, parking must be accounted for with each new project.



### **EXISTING CONDITIONS:** Density and Greenspace

#### **Density:**

This figure-ground drawing highlights the density of the surrounding area and shows the scale of the Meriter as compared to the adjacent single-family residential neighborhoods. It also shows the increase in scale along Park Street and at the Regent Street intersection. This drawing also illustrates the history of growth for the Hospital. First sited north of Chandler Street between Brooks and Park Streets, both Mound and Milton streets have been vacated as the Hospital has grown north toward Regent Street.

#### Green Space:

This drawing of the surrounding green space and topography shows the lack of any substantial green space on the Meriter Hospital grounds. This is typical of an urban hospital where land is at a premium and development has progressed toward greater density. The topography is key to understanding the future development of the Hospital. Currently, both the Tower and Atrium have fantastic views of Monona Bay. Future development on the Triangle (the adjacent block of land bordered by Park Street, Regent Street and West Washington Avenue) will be under the Park Street Design Guidelines, which should limit development to six stories and maintain Meriter's view corridor to the Bay. Monona Bay and Lake Wingra are both sited within a few blocks of the Hospital. This means that the water table here is fairly high at the southern end of the Campus. The southeastern corner of McConnell Hall actually sits on a high point for the surrounding area. This makes sub-grade parking a possibility for the Longfellow and McConnell sites, while areas near Block Seven at Chandler Street will have a high water table that will add to the cost of sub-grade development.

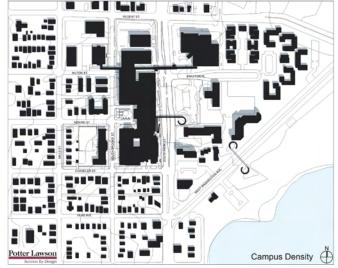


Figure 01: Meriter Density Study



Figure 02: Green Space & Topography



### **EXISTING CONDITIONS:** Surrounding Uses and Utilities

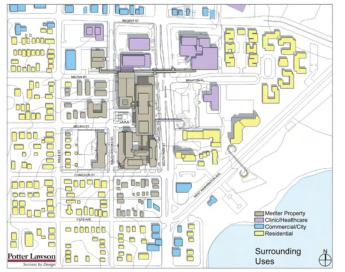


Figure 03: Meriter Surrounding Uses

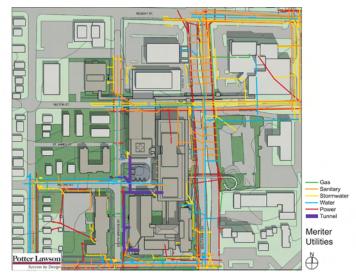


Figure 04: Meriter Utilites

#### Surrounding Uses:

Surrounding Meriter Hospital is a mix of residential, light commercial, retail, and healthcare uses. Both Meriter and St. Mary's hospitals are located along Park Street. The proximity of these hospitals has spurred the growth of nearby supporting medical programs, predominately at the intersection of Park and Regent Streets. Both the Park Street Design Guidelines and the Regent Street Design Guidelines are intended to provide a framework to assist in the future stability, economic growth, and revitalization of both streets and their adjacent neighborhoods.

#### **Utilities:**

The most important consideration for Meriter regarding utilities is the City owned stormwater and utility easement that runs west to east through the northern end of the Meriter Campus where Milton Street used to pass through to Park Street. This is a large stormwater line that forms a substantial constraint to sub-grade development to the north of Meriter's existing property. Chandler Street is also a significant utility corridor, from which a series of underground steam tunnels run from the physical plant at the southwestern corner of the main Meriter building north to McConnell Hall, crossing Brooks Street. There is a significant amount of open space on both the Chandler and Longfellow blocks. Future development that significantly increases the amount of impervious surfaces may require that additional storm water infrastructure be added to Brooks Street to handle increased capacity.

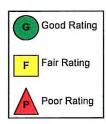


## **03 INTRODUCTION; ISSUES & OPPORTUNITIES**

**Meriter Facility Conditions Health Care Market Demographics Facility Recommendations City of Madison Built Form** 

### MERITER FACILITY CONDITIONS

#### Facility Conditions



KSA used its automated Facilities Condition Evaluation Survey<sup>™</sup> tool to develop "highest and best use" assessments for the six main buildings on the Meriter campus. This tool, developed specifically for use in master plans, quantitatively assesses 121 data points across 11 architectural, engineering, and functional buildings systems, resulting in an easy-to-grasp good/fair/poor score for each facility. That score, translated into a simple color-code (green/yellow/red) is illustrated in **Figure 3** for the principal Meriter buildings.

Key findings of this evaluation were:

- Most of Meriter's buildings, except Atrium, score "fair"
- Key issues include age of structure, functional design, and mechanical systems.
- Central Plant capacity and expandability are development limiters, though not necessarily within the next 10 years if renovations are done with an eye to energy efficiency.
- East, West, and Center wings scored lowest and raise caution regarding future investment for clinical uses

These latter three buildings scored poorly due to basic building structural elements, including low floor-to-floor heights, narrow building widths, poor HVAC, difficult and circuitous access, and updated code requirements introduced since their design, rendering them as poor candidates for significant reinvestment, especially for future clinical services.

This particular finding became an important driver of the preferred facility solution because it wisely directed investment for future clinical improvements into *new* facilities, rather than into renovated existing space.

#### Figure 3

#### Facility Condition Evaluation





### **MERITER FACILITY CONDITIONS**

Functionality

The third and final master plan assessment focused on the functionality of high-cost clinical spaces, such as operating rooms, catheterization labs, imaging rooms, and patient bed rooms. Major discrepancies in size and functionality between Meriter's current rooms and what are considered contemporary standards for large teaching hospitals was yet another driver of the preferred facility solution. **Figure 4** provides a comparison of selected key rooms to current benchmarks.

#### Figure 4

Comparison	of Meriter to	Functional	Benchmarks
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Existing at Meriter	Contemporary Standards for Large Hospitals	
<ul> <li>80% medical/surgical beds are semi-privates</li> </ul>	<ul> <li>Large, all-private patient rooms</li> <li>Benchmark size is 280 NSF</li> </ul>	
<ul> <li>Operating rooms are not uniformly sized; many are small; fragmented flow</li> <li>Current range &lt; 400 NSF to 600 NSF</li> </ul>	<ul> <li>Large, efficiently configured surgical suite; operating rooms sized at minimum 600 NSF; clear &amp; coherent flow</li> </ul>	
<ul> <li>Dispersed surgery, angiography, catheterization lab, endoscopy (GI); multiple anesthesia sites</li> </ul>	<ul> <li>Interventional platform with co-located procedural and related support</li> </ul>	
<ul> <li>No coherent ambulatory "vision"; ambulatory services scattered in multiple locations</li> <li>Access from parking not always direct; difficult way-finding</li> </ul>	<ul> <li>Ambulatory services well organized, integrated and accessible, often in single large ambulatory care center</li> <li>Proximate parking, easy wayfinding</li> </ul>	
<ul> <li>Few amenities, especially in inpatient areas</li> <li>Privacy lacking in waiting, reception, prep/recovery areas</li> </ul>	<ul> <li>Strong patient &amp; family amenities</li> <li>HIPAA sensitive privacy in all patient areas</li> </ul>	





### **HEALTH CARE MARKET CONDITIONS**

**Bed Need** 

Having assessed the condition and capacity of current assets, the next step in the planning process was to determine future needs. KSA developed three future bed need scenarios, based on the following assumptions:

- Scenario 1: Baseline (assumes constant market share over the next 10 years)
- Scenario 2: Market Share Gains (assumes increased market share in selected programs<sup>1</sup>)
- Scenario 3: Market Share Losses (assumes decreased market share in selected programs <sup>2</sup>)

A key finding in all three scenarios was the *need for additional critical care beds* within the next 10 years. KSA projects that hospitals with Meriter's level of inpatient acuity will need at least 15% of their medical/surgical bed capacity in critical care beds. Today, Meriter has less than 10% of its medical/surgical beds in that category.

After careful deliberation, Meriter leadership selected *Scenario 2: Market Share Gains* as the appropriate target bed need to drive future facility plans.

	2007 Existing bed Capacity	2017 ESTIMATES		
Beds		SCENARIO 1	SCENARIO 2	SCENARIO 3
Acute Care	231	168	183	163
Critical Care	16	30	31	30
Obstetrics	60	44	47	44
Neonate	30	32	34	32
Behavioral Health	20	40	40	40
Rehab	23	19	19	19
Total	380	333	354	328
Cardiology = 5% Cardiac Surgery = 1% Gastroenterology = 12% General Surgery = 2%	<sup>2</sup> Cardiac Surgery = -2% General Surgery = -1% Neurology = -8.4%		Preferred Scena	rio KS

#### Figure 5: Meriter's 10-Year Projection of Bed Need

### **DEMOGRAPHICS:** PROJECTED NEED

#### Diagnostic & Treatment Services

The second component of projecting future capacity needs looked at key diagnostic and treatment rooms, such as ORs, other interventional rooms (e.g. cath labs, GI labs, and interventional radiology), and major imaging modalities such as CT and MRI. KSA also projected future needs for Emergency Services. This analysis demonstrated that Meriter faces capacity needs within 10 years in the following services:

- Emergency Department
- Gastroenterology
- Imaging (e.g., CT, US)

Major Diagnostic & Treatment Rooms	Existing Rooms	2012 Projected Need	2017 Projected Need
Emergency Department	28	30 - 34	35-40
Surgery	14	14	14
Cath Labs	5	3	3
Gastroenterology	5	6 - 7	7 - 8
СТ	2	2	3
MRI	1	1	1
Rad/Fluoro	5	5	5
Ultrasound	3	4	4
Nuclear Medicine	3	3	3
Mammography	1	1	1
Inventional Radiology	1	. 1	1 1
PET	1 610	1	timer (regely a

Figure 5: Meriter's 10-Year Projection of Diagnostic & Treatment Room Needs

Denotes Room Need





### **FACILITY RECOMMENDATIONS**

Near and Long-Term Direction Near-term investments are detailed below, with their accompanying assumptions. Long-term options are also described.

Near-Term (5-10 year) Facility Investments:

- Achieve 100% private medical/surgical beds through Tower renovations and Atrium completion
- Complete surgery expansion project (4 Tower/Atrium) but relocate prep/recovery, preferably on 2 Atrium
- Develop Women's Pavilion in North / West / Center Wings; relocate existing services as needed
- Develop existing Braxton site for ambulatory services, including ASC, GI, physician practices and parking
- Expand Emergency Services in place

Assumptions needed to support these near-term investments include:

- Selective education and administration spaces within the hospital could be relocated, either to other oncampus locations like McConnell Hall, or to leased off-campus space, which will also significantly reduce the parking demand on campus.
- Planned major renovations over the next 10 years (surgery, inpatient beds, Women's Pavilion in North) could proceed without development of a new power plant. A consulting engineer's opinion concurs with this assumption, provided that the renovations include significant improvements to the energy efficiency of heating, ventilating and cooling (HVAC) systems.

#### Long-Term (beyond 10 years) Facility Investments:

Beyond ten years, the Meriter campus would be prepared to undertake total replenishment. This would begin with a major new "interventional platform" – a common location for surgery, invasive procedures and related support -- and replacement of Meriter's oldest beds. The goal would be to create all new space for major diagnostic and treatment services such as surgery, imaging, and emergency services while providing the base for a new bed tower. This new construction could proceed either to the north or south of the existing Tower/Atrium, depending on land availability and ability to vacate the oldest spaces in the East and Center wings.

Development in either direction may require an "enabling" phase that constructs a new power plant if that is the most costeffective energy solution at that time. In either the north or south long-term scenario, all inpatient care is developed in contiguous space on the west side of Park Street, greatly simplifying logistical and patient transfer services and providing a clear north-south "axis' to the campus that will clarify way-finding and circulation.



### **CITY OF MADISON BUILT FORM**

#### **City of Madison Built Form:**

Meriter lies at the edge of two design districts within the City of Madison, capping the north end of the Park Street Urban Design District and forming the southern boundary of the Regent Street Business District.

Park Street is recognized as a gateway commercial corridor bordering single- and multi-family residential neighborhoods. The Park Street Design Guidelines promote fourstory development along Park Street, with two extra levels available for outstanding building design. The emphasis is on a street level experience that is meant to reinforce the activation and revitalization of the Park Street Corridor. This will improve both the visual character and safety of Park Street. The Meriter Park Campus Master Plan seeks to reinforce the urban design principles of the Park Street Design Guidelines with, "Walkable streets, human-scaled architecture, public spaces, street furnishings and landscaping..." .The Park Street Design Guidelines understand that Meriter is a larger-scale facility than what is typically located in the Park Street Corridor, and as such, include provisions for the Meriter Hospital District that allows Meriter to create its own Master Plan to compliment the Park Street Design Guidelines.

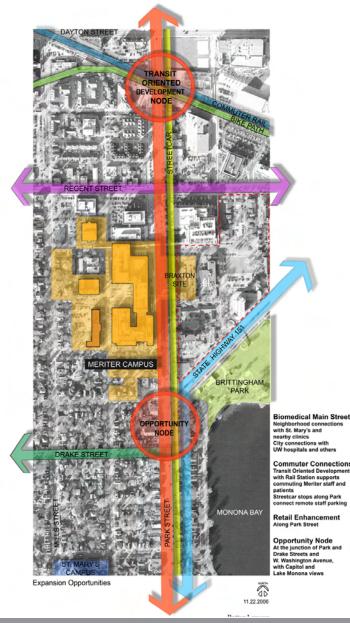




Figure 01: Park Street Design Disctrict

### **CITY OF MADISON BUILT FORM**

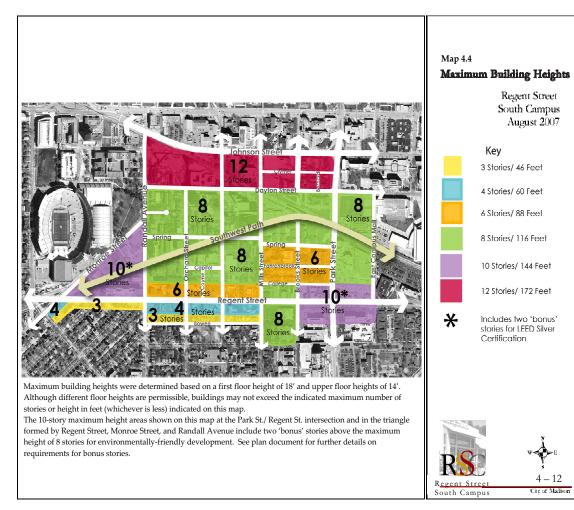


Figure 02: Regent Street South Campus Design Guidelines

To the north of Meriter is the Regent Street Business District. The Regent Street South Campus design guidelines recommend that higher-density uses are a natural fit at the corner of Regent and Park streets because the node is already somewhat isolated from single-family housing, the existing scale is already quite urban, and traffic infrastructure is more robust than many neighboring streets. Heights of up to ten stories at the intersection of Park and Regent Streets are permitted in the guidelines.



# 04 GENERAL DEVELOPMENT PLAN: GOALS & OBJECTIVES

Letter of Intent

**Vision & Goals** 

**Planning Principals** 

<u>Mission:</u> To heal this day To teach for tomorrow To embrace excellence always To serve our communities – For a lifetime of quality health care.

-- Jim Woodward Meriter Hospital President and CEO



Park Campus