

## **Hospital and Neighborhood Committee Presentations Summarized**

### **Understanding Municipal Planning and Zoning:**

- Explained the planning and zoning regulations.
- Explained zoning uses and districts, zoning ordinances, Special Land Use processes, site plans and processes for site plans, variances and how the Zoning Board of Appeals works.
- City of Marshall has a Master Plan which is strategic and serves to explain what the city wants to accomplish.
- City of Marshall's Master Plan was developed without Oaklawn Hospital and health care's potential impact to this Master Plan and the City as a "whole".

### **Conclusions drawn from understanding Municipal Planning and Zoning:**

- Municipal Planning and Zoning should be used as a tool to aide us in our goal.
- There are mechanisms in the process to be used to overcome limitations as we work towards our goal.
- When the City of Marshall's Master Plan is updated this committee's findings, knowledge gained and plan should be integrated into that Master Plan.

### **Understanding Marshall's National Historic Landmark District:**

- Marshall's National Historic Landmark District is based solely on the integrity and density of its historic buildings, is a function of the city and has nothing to do with the Marshall Historic Society.
- Marshall's Downtown District is the spine of the Marshall National Historic Landmark District.
- Adaptive reuse of contributing buildings benefits the district whereas moving or tearing down contributing buildings does not.
- No multi-structure National Historic Landmark District has ever been de-designated.

### **Conclusions drawn from understanding Marshall's National Historic Landmark District:**

- Contributing buildings that are impacted by Oaklawn Hospital's growth would have minimal impact if adaptive reuse is utilized. Contributing buildings moved or torn down should not occur but as the last resort to implement a plan that would accommodate a

significant advancement towards accomplishing hospital expansion plans satisfactory to the community and to the hospital.

- Individual contributing buildings, in themselves, do not change the status of the district but are an important part of the whole.
- The plan, that will be developed, must recognize and minimize the potential impact to the Marshall National Historic Landmark District.

#### Understanding the Planning Commission Discussion

- If a plan can be put together with how the hospital plans to expand, then the Planning Commission will try to work to make all future planning and zoning districts compatible.
- The Master Plan is a reference for further growth in general, not a prescriptive document that must be rigidly followed.
- Marshall's ordinances are controlled by the city, except for Michigan Avenue or MDOT roads. They fall under the county and state ordinances.
- After the committee agrees on where and how the hospital can expand, the Planning Commissioners and City Council will work together to see the committee's plan through.

#### Conclusions drawn from Understanding the Planning Commission Discussion:

- The Planning Commission will be a partner in establishing a plan to accommodate hospital expansion that is satisfactory to the Community and to the Hospital.
- There are mechanisms in the process to be used to overcome limitations as we work towards our goal.

#### Understanding Economic Impact of Oaklawn Hospital on the Marshall Community:

- Oaklawn Hospital generates \$50 million annually in personal earnings in the Marshall area.
- In 2009 the hospital's 769 employees supported an estimated 208 additional jobs in the city/surrounding townships.
- Oaklawn Hospital increases the attractiveness of the city to potential employers and to new and existing residents.

#### Conclusions drawn from Economic Impact of Oaklawn Hospital on the Marshall Community:

- Oaklawn Hospital is part of Marshall's economic base.
- A strong Oaklawn Hospital means a strong Marshall Community.

### Understanding Oaklawn Hospital's Future Expansion Needs:

- Providing patients with excellent services and facilities is Oaklawn Hospitals mission.
- Healthcare reform will result in reduced reimbursements, reduced profitability, and reduced opportunity for financial viability to survive.
- There are numerous examples of hospitals and hospital-owned parking in neighborhoods.
- When current expansion is completed, Oaklawn Hospital will still require 150,000 sq. ft. of additional space over the next 20 years, or approximately 35% more than what they will have after the surgery project to meet future needs.
- Oaklawn Hospital needs to grow to remain financially viable, to have space for new technologies/services, to accommodate growth in patients and needed services, and, to achieve greater economies of scale.
- Oaklawn Hospital is in a very challenging fight for survival as an independent hospital.
- By code, currently there is a 313 parking space shortfall, 500 - 700 parking space shortfall in 20 years.
- Parking ramp spaces cost \$15,000, surface parking \$3,000-\$6,000/space.
- Cost to build a new hospital with just current square footage plus surgery is \$150 – 200 million and would require an additional 150,000 sq ft of additional space over the next 20 years.
- Oaklawn Hospital works with neighbors by creating buffer properties, utilizing landscaping guidelines and agrees to "guarantee" no loss in market value on sale of property to nearby neighbors.

### Conclusions drawn from Oaklawn Hospital's Future Expansion Needs:

- Building a new hospital on a green field site would be cost prohibitive.
- Healthcare reform may challenge the very existence of Oaklawn Hospital.
- A healthy hospital requires a healthy community and a healthy community requires a healthy hospital.
- Ideal solution is to expand within the existing footprint or expand the current footprint with no further growth into neighborhoods.
- Parking solutions must fulfill the long term parking shortfall.
- Doubling current parking over 20 years will require innovative solutions.