

Minutes
Hospital and Neighborhood Committee Meeting
Tuesday, July 13, 2010

In a regular session, Tuesday, July 13, 2010 at 7:00 p.m. in the Public Service Building, 900 S. Marshall, Marshall, MI the Hospital and Neighborhood Committee Meeting was called to order by Chairman Ken Jendryka.

Members Present: Rob Covert, Dave Deppe, Holly Harden, John LaPietra, Nick Metzger, Mark O'Connell, Jim Pardoe, Jennifer Rupp, Dave Ryan, Ginger Williams and Chairman Ken Jendryka.

Members Absent: None

Chairman Jendryka welcomed Committee Members and thanked them for committing to work together to come up with a plan that will work well for the hospital and neighborhood. He stated the meetings will be based on the Open Meetings Act and asked members to stick with the goals and to try not stray away from the monthly agendas. Chairman Jendryka asked that each member of the committee introduce themselves with their name and address and reaffirm their interest in serving on the committee. He read the goal, "Provide a plan to accommodate hospital expansion that is satisfactory to the Community and the Hospital", and asked each member if they agree with the goal and would work together to achieve it.

Mayor Bruce Smith thanked the members for their presence. He read the editor's letter from the January 19, 1983 Marshall Chronicle that talked about the growth of Oaklawn Hospital. Mayor Smith talked about compromise and how it will be critical for committee members to make tough decisions that will affect the economic growth in our community. Mayor Smith stated the committee's report would be reviewed and voted on by the City Council and then be sent to the Planning Commission for codification. He said that there are no bad ideas and that he and the City Council look forward to many successful meetings in the future.

Identification and examination of issues

Committee Members listed common issues associated with the possibility of future Oaklawn Hospital expansions:

- Hospital needs to grow
- Hospital needs room to grow
- Can city survive without a vibrant hospital
- Communication on change
- Limited space
- Impact on Historical Landmark District
- Neighborhood living in a constant construction zone
- Property value impact
- Pedestrian traffic flow
- Noncontiguous space
- Parking
- Zoning requirements by city
- Landscaping and buffering
- Loss of City tax base revenue

- No legal protection for Historic District
- Disagreements between hospital and neighborhood
- Neighborhood traffic
- Hospital influence – size, number of employees, stacking boards
- Disconnect between the Historic District and hospital
- Promise vs. actual
- Flux of hospital system in general
- Legal limitations of hospital property
- Keeping Marshall economically vibrant
- Inaccurate information from City
- Solution by referendum
- Safety issues
- Running a business
- Maintaining Marshall's heritage
- Impact on tourism
- Transparency – education on both sides
- Inability to overcome personal agendas on community boards
- Immediate neighbors to hospital
- Historical district
- Impact on local businesses
- Location of hospital expansion
- Average Marshall citizen
- Negatively impacts the community
- Employees and employers
- When there is no compromise

After further discussion the committee determined that breaking down the list into what is an actual problem or a problem that is associated with an attitude, would help with coming up with possible solutions. While discussing these issues it was determined to categorize the list into six (6) categories. The categories will be further discussed during the next meeting which will be held on August 10, 2010. The following are the six (6) categories:

1. NEIGHBORHOOD IMPACTS

- a) Increased Traffic – vehicle & foot
- b) Safety Concerns
- c) Constant Construction Zone
- d) Parking Issues (lack of parking available)
- e) Communication with Neighbors
- f) Disagreements between Hospital and Neighbors

2. HISTORIC DISTRICT ISSUES

- a) Impact of Historic District
- b) No Legal Protection for the Historic District
- c) Economic Impact
- d) Disconnect between Businesses

3. HOSPITAL GROWTH

- a) Needs to Grow
- b) Room to Grow
- c) Infringing upon Neighborhood
- d) Constant Construction Zone
- e) Impact of Historic District
- f) Noncontiguous Space
- g) Disconnect between Businesses
- h) Legal Limitations
- i) Flux of Healthcare
- j) Parking Issues
- k) Communication

4. ECONOMIC IMPACT

- a) Largest Employer in City
- b) Disconnect between Businesses
- c) Tax Revenue Loss
- d) Flux in Healthcare
- e) Keeping Marshall Vibrant
- f) Viability of Downtown Area
- g) Disagreements between Hospital and Community

5. GOVERNMENT

- a) Inaccurate Information from City
- b) Legal Protection
- c) Setback Requirements
- d) Landscape & Buffering
- e) Communication on Change
- f) Parking Issues
- g) Inability to Overcome Personal Agendas

6. COMMUNITY ATTITUDES

- a) Immediate Neighbors to Hospital
- b) Historic District
- c) Local Businesses
- d) Location of Hospital Expansion
- e) Average Marshall Citizen
- f) Negatively Impacts Community
- g) Employees & Employers
- h) When there is no Compromise

- i) Solution by Referendum
- j) Promise vs. Actual
- k) Can City Survive without a vibrant hospital

Public Comments

Tim McCaleb, 410 E. Prospect, spoke about the success of the group and how they will help clear up any misconceptions between the community and the hospital. He is grateful the committee was formed.

Keith Mengel, 216 N. Division, stated that he is a property owner in the neighborhood next to the hospital and is concerned about what would happen to property values if the hospital should expand again.

Adjourn

Meeting was adjourned at 9:30 p.m.

Submitted by:

Colleen Webb