

*Martini*  
*Sum*



Robert Bailey Design Group 909 Southwest St. Clair Portland, Oregon 97205 • 503/228 1381

November 6, 1980

Mr. Mario Martini  
Bureau of Traffic Engineering  
City of Portland  
317 Southwest Alder Street  
Portland, Oregon 97204

Re: Kaiser Signage on the Greeley Pedestrian Overpass

Dear Mr. Martini:

I have received your letter dated November 3, 1980, along with interoffice memos, structural specifications and other specified requirements.

Our working drawings for the construction of the two signs in discussion reflect all the comments, recommendations and requests made by the Bureau of Traffic Engineering.

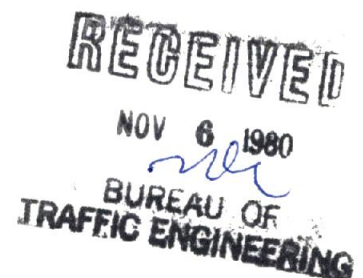
Thank you for your assistance in solving a major signage problem at Bess Kaiser Medical Center.

Regards,

ROBERT BAILEY DESIGN GROUP

Dale Hoover  
Associate Partner

DBH/cc





DEPARTMENT OF  
PUBLIC WORKS  
MIKE LINDBERG  
COMMISSIONER

OFFICE OF  
PUBLIC WORKS  
ADMINISTRATOR

621 S.W. ALDER  
PORTLAND, OR 97205

October 1, 1980

MEMORANDUM

TO: MARIO MARTINI  
Bureau of Traffic Engineering

FROM: STEVEN L. BARRETT *SB*  
Structural Design Division  
Bureau of Street & Structural Engineering

SUBJECT: Proposed Traffic Signs on the Pedestrian  
Overpass of N. Greeley at Kaiser Hospital

The attachment of the two proposed 1'-6" x 5'-0" signs to this structure is approved subject to Robert Graham's review and approval of the connection of the signs to the steel girders. An acceptable connection could be made similar to the attached Oregon Department of Transportation Standard Drawing No. S-3 detail titled "Structure Mount Detail."

SLB:jw

Attachment

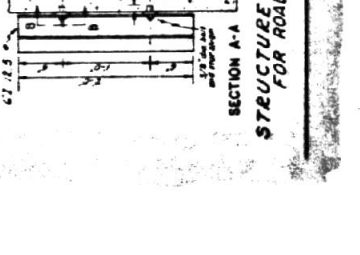
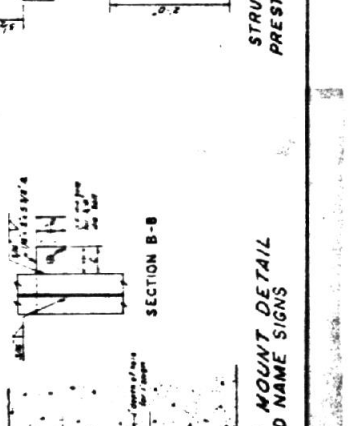
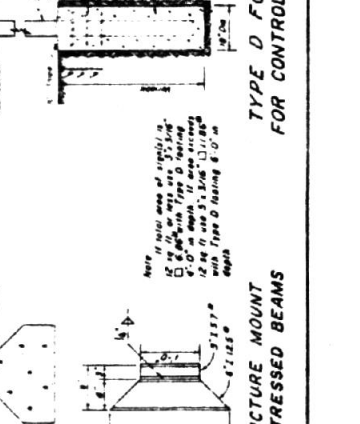
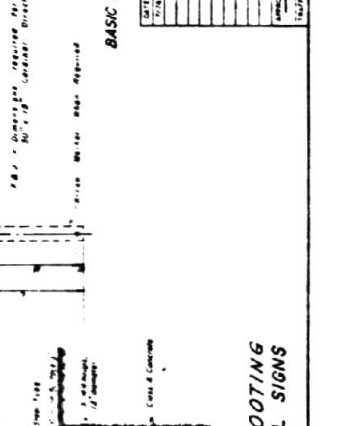
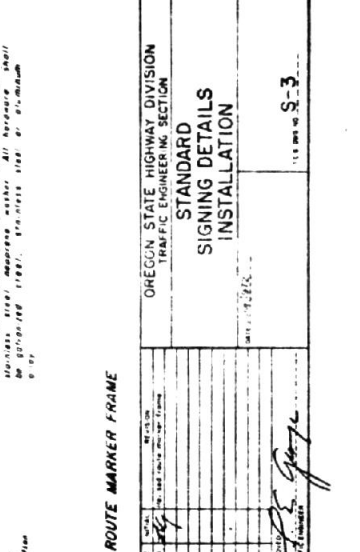
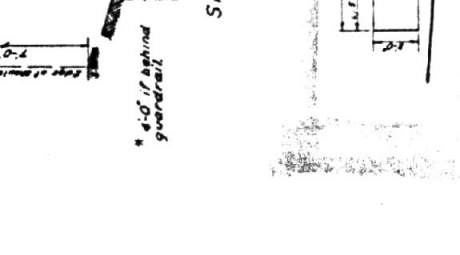
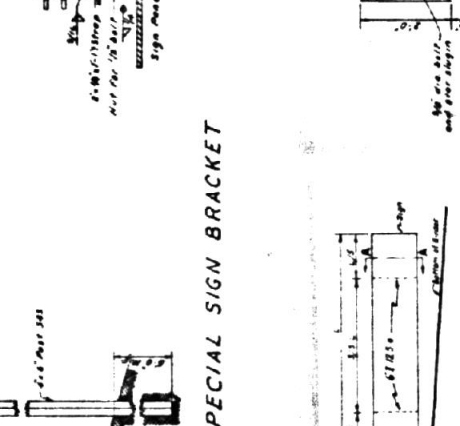
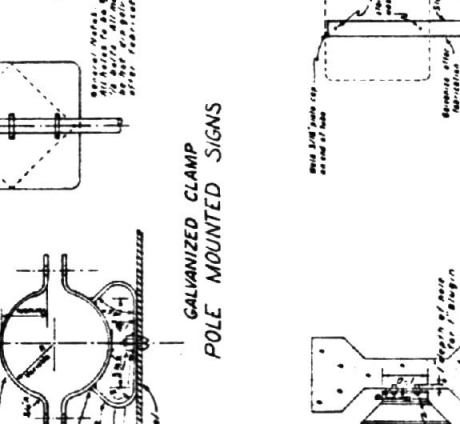
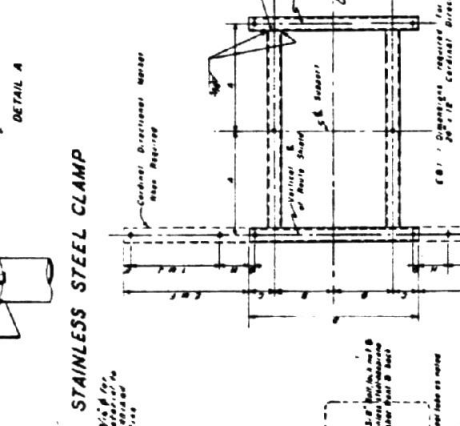
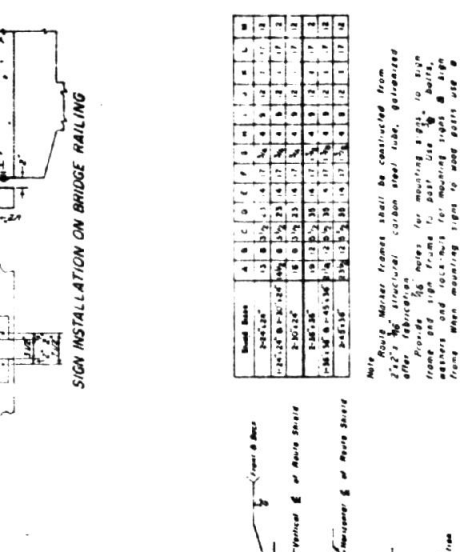
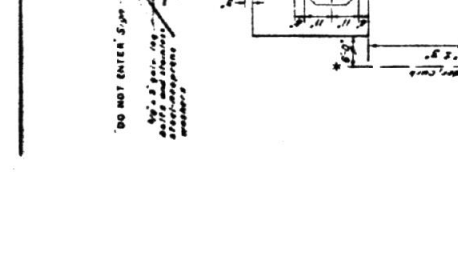
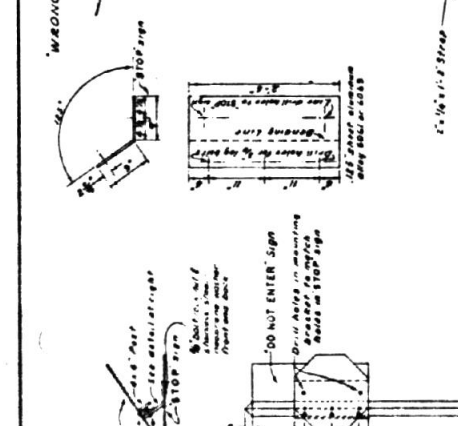
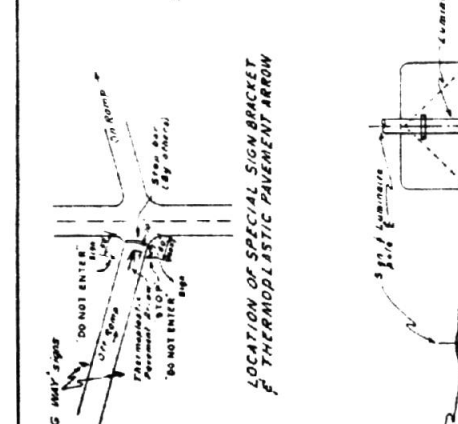
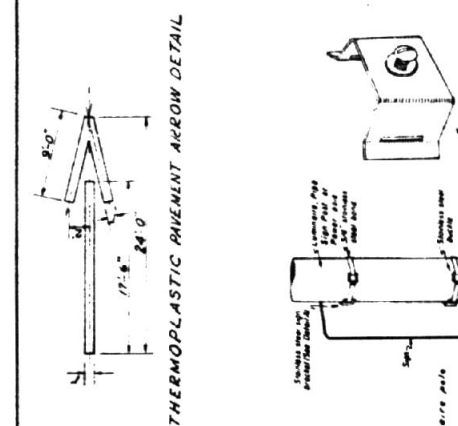
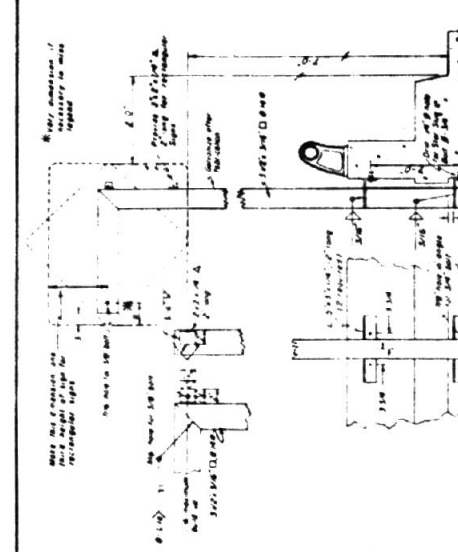
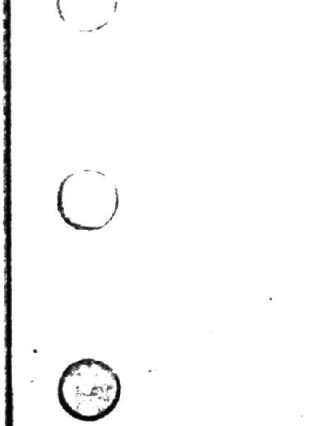
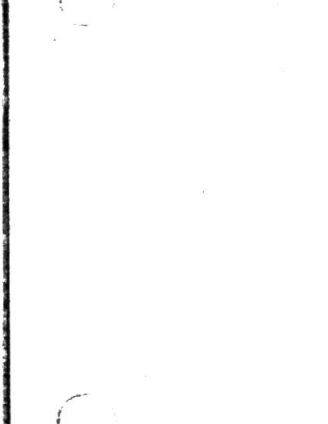
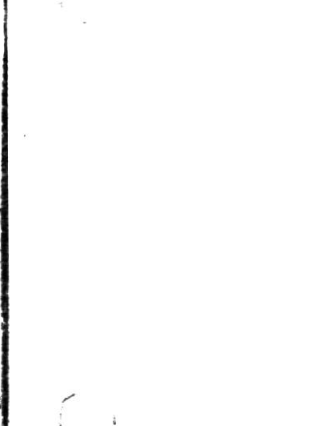
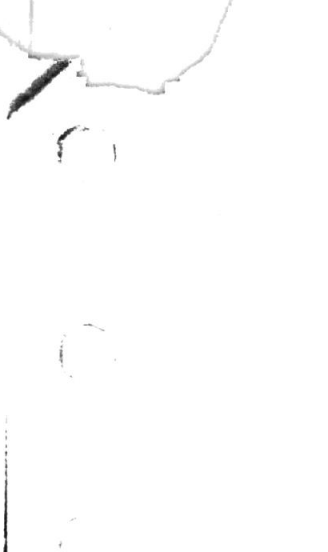
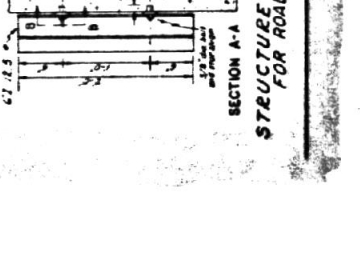
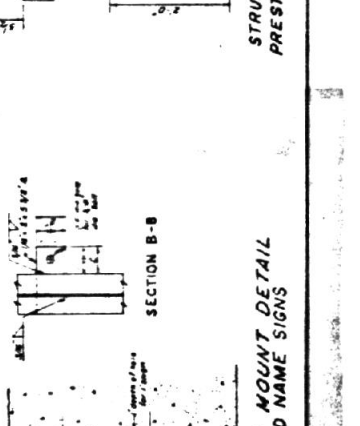
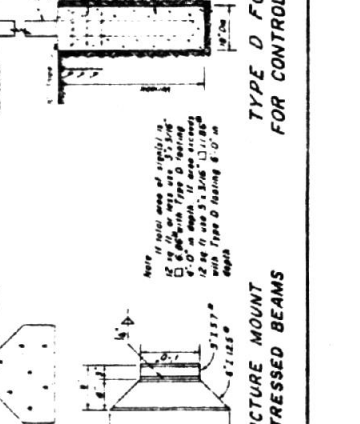
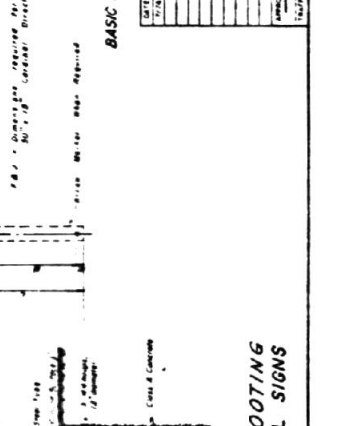
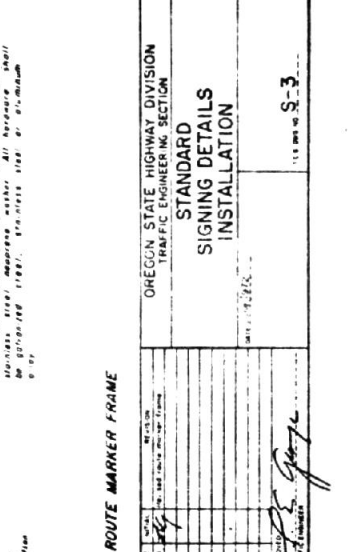
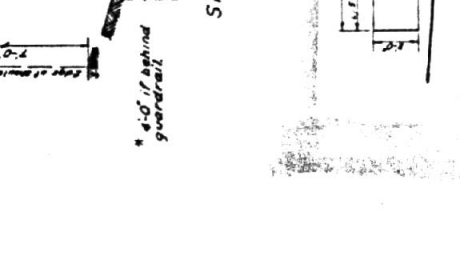
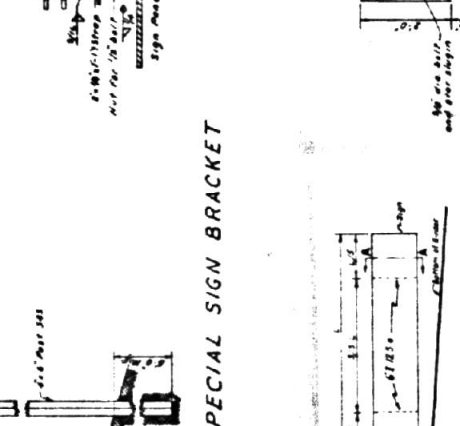
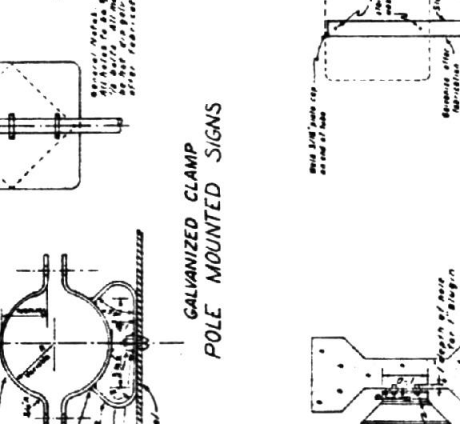
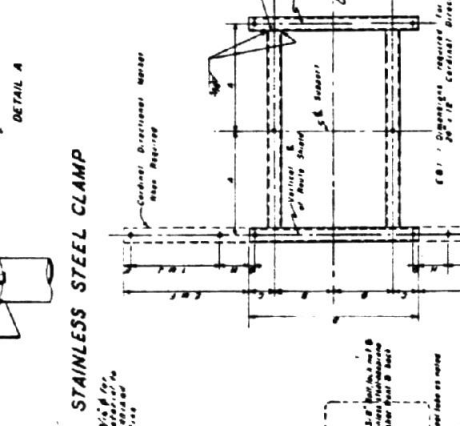
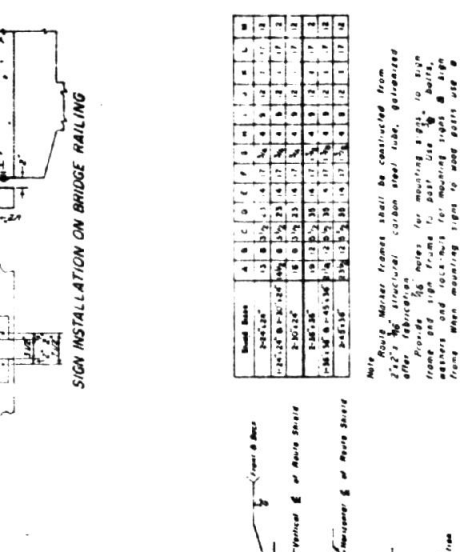
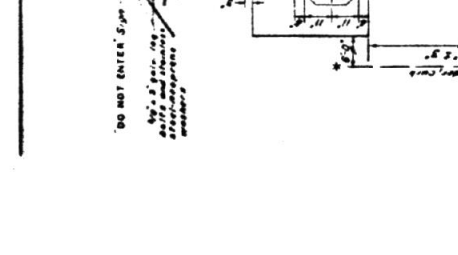
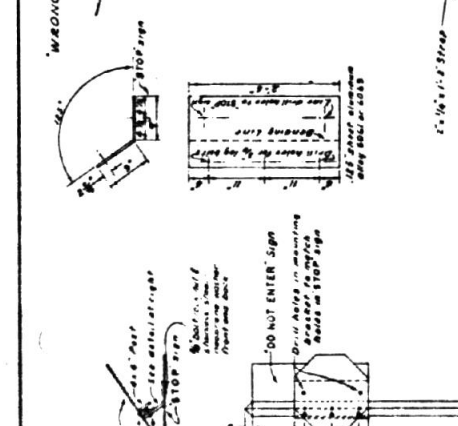
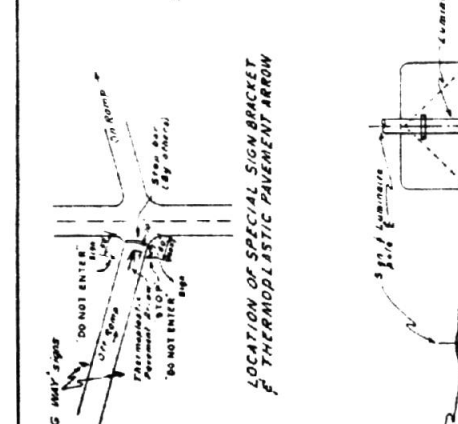
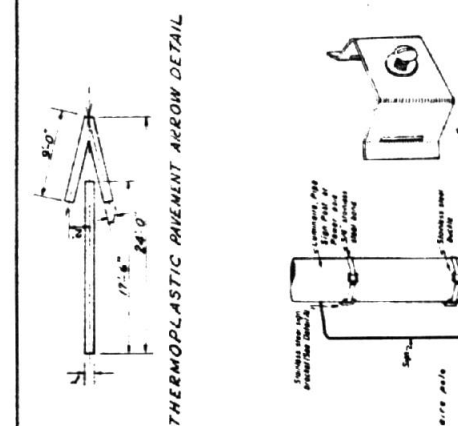
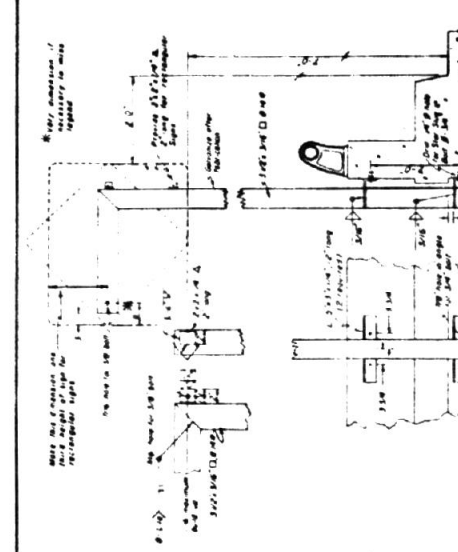
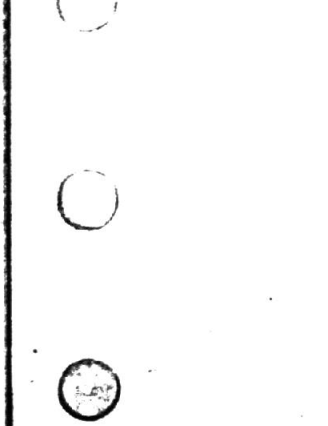
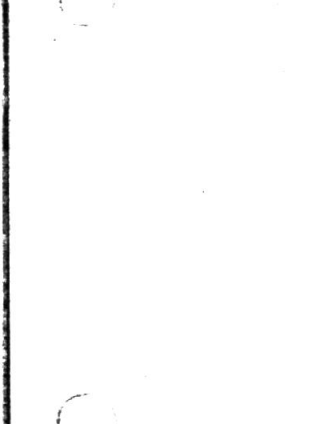
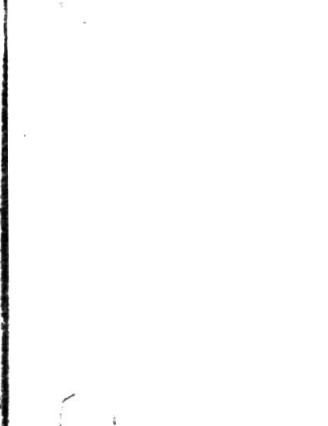
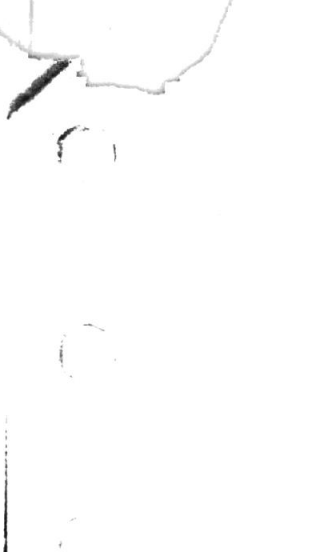
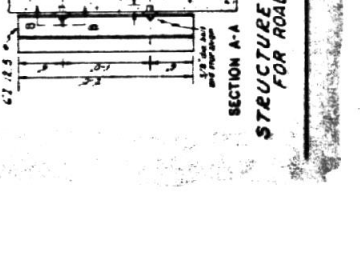
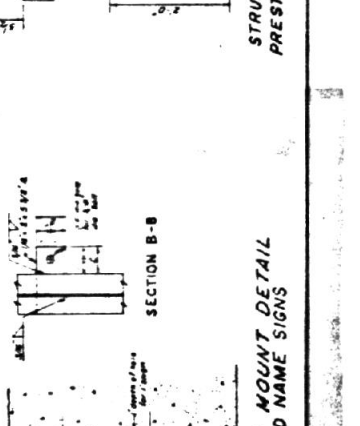
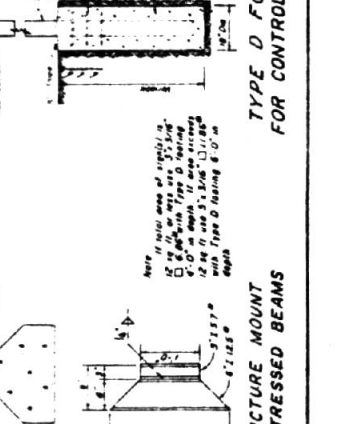
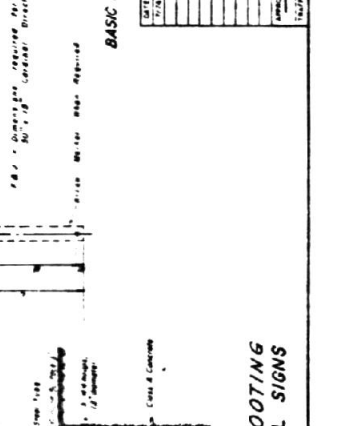
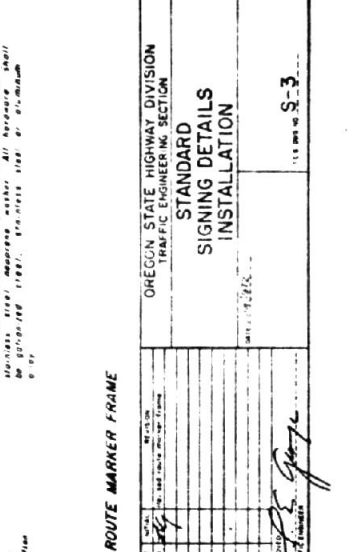
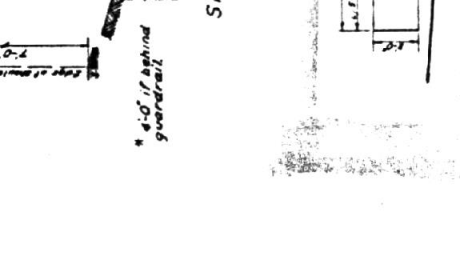
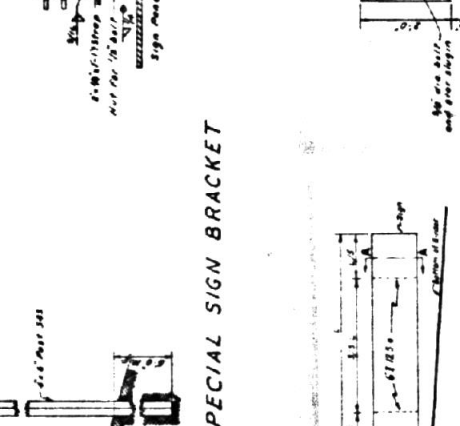
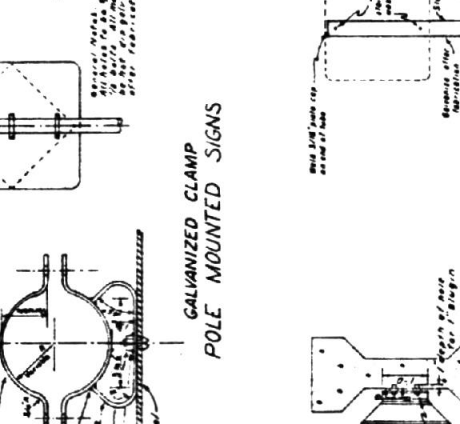
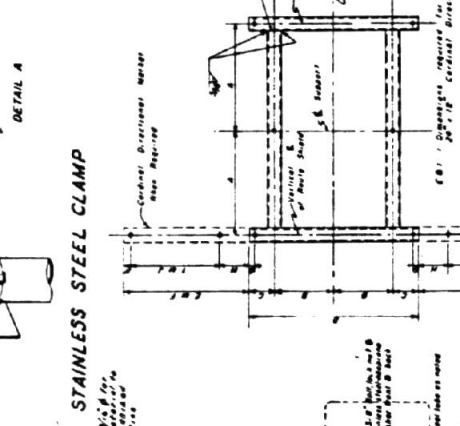
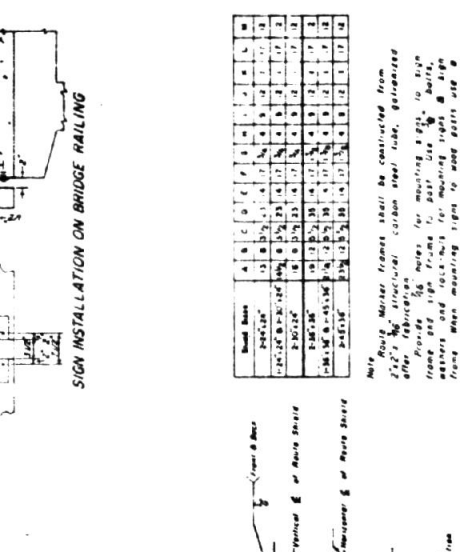
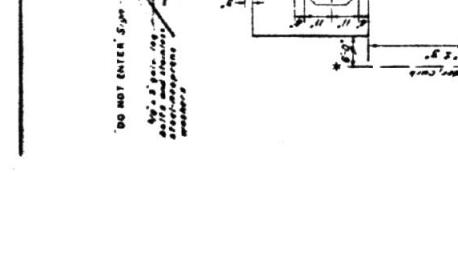
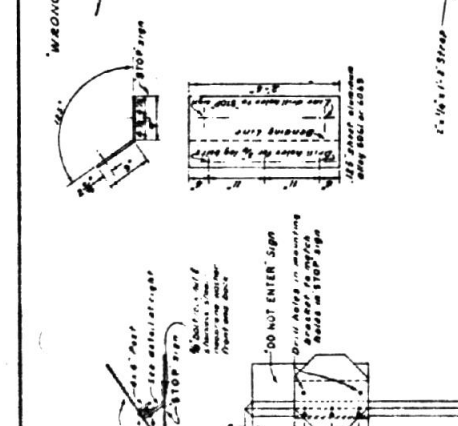
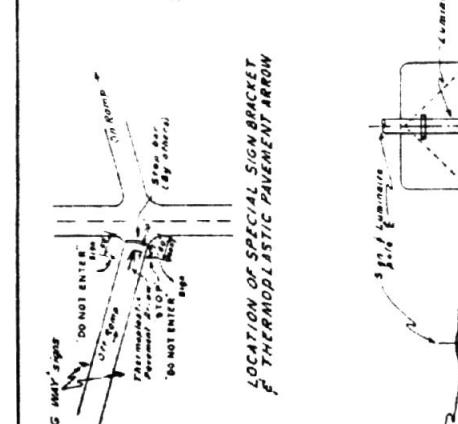
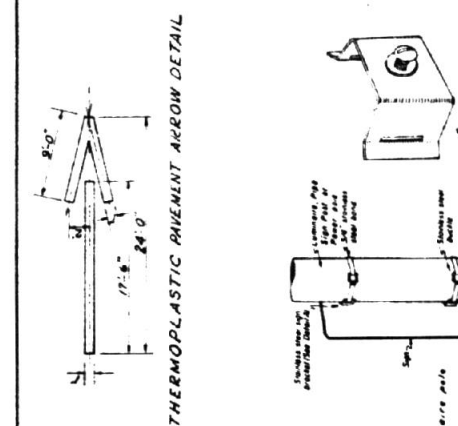
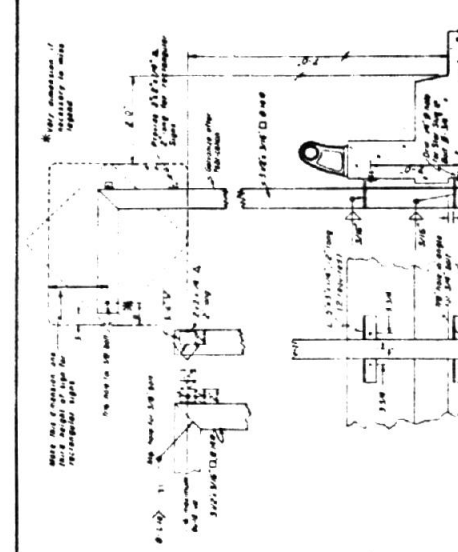
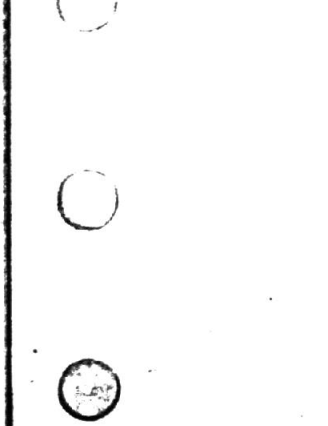
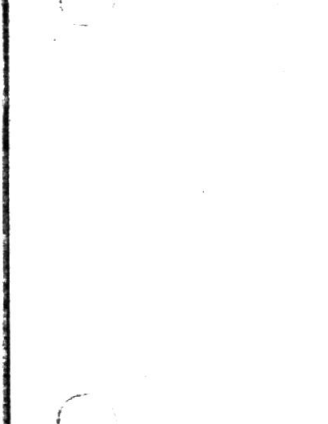
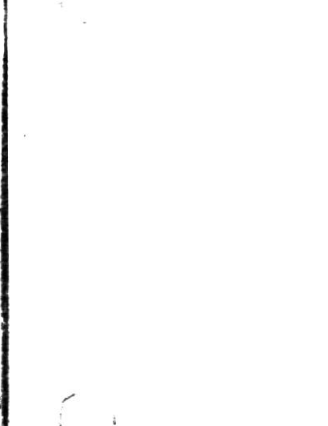
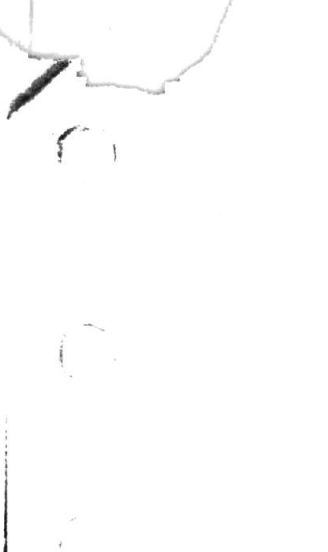
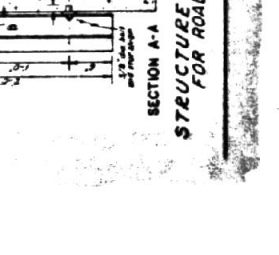
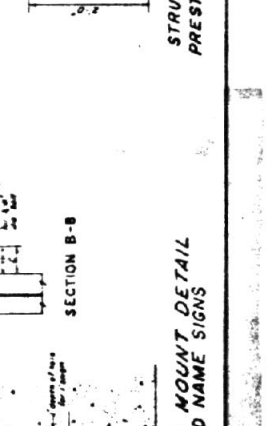
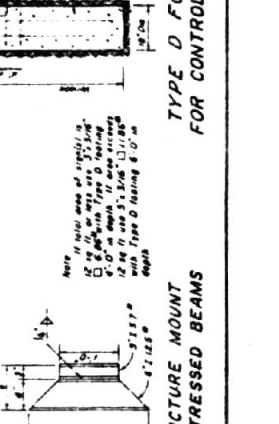
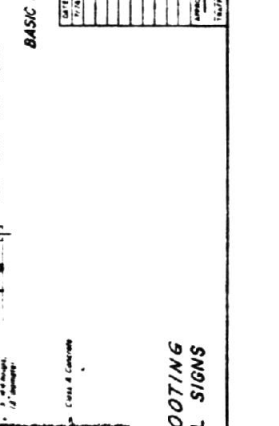
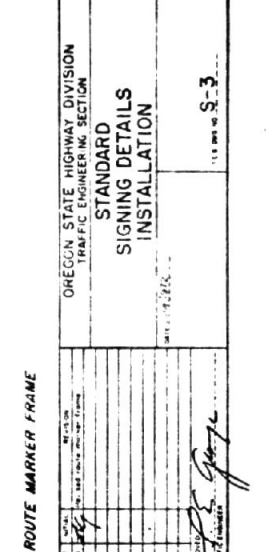
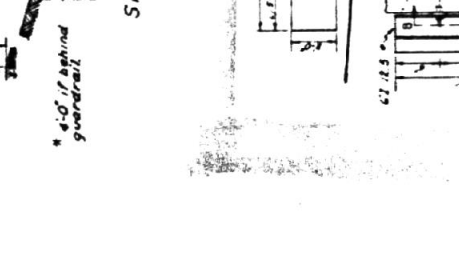
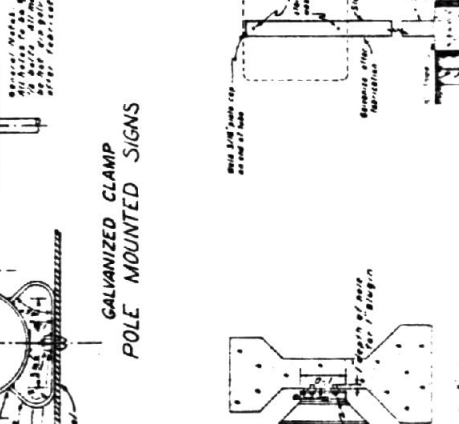
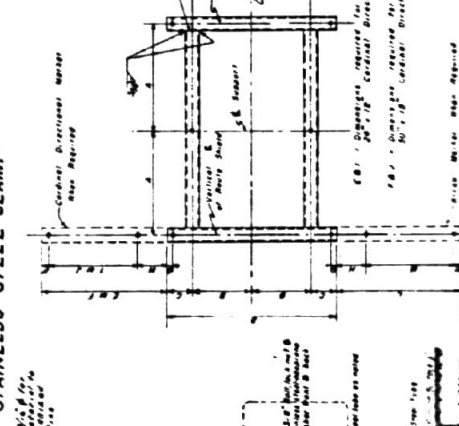
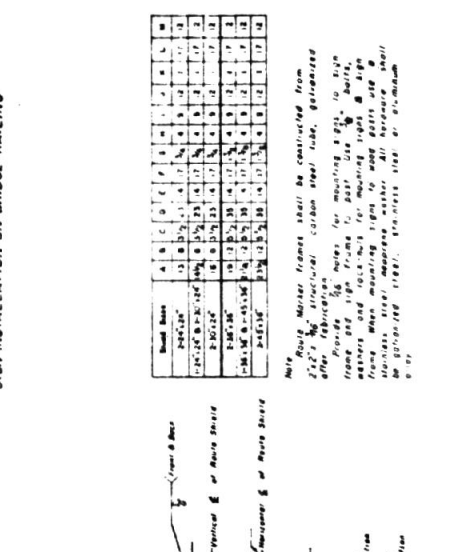
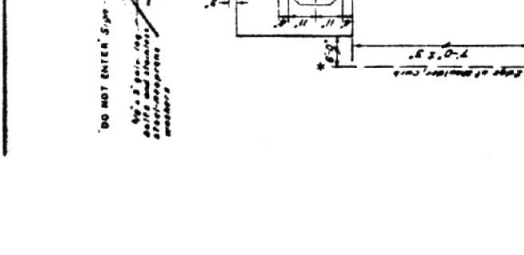
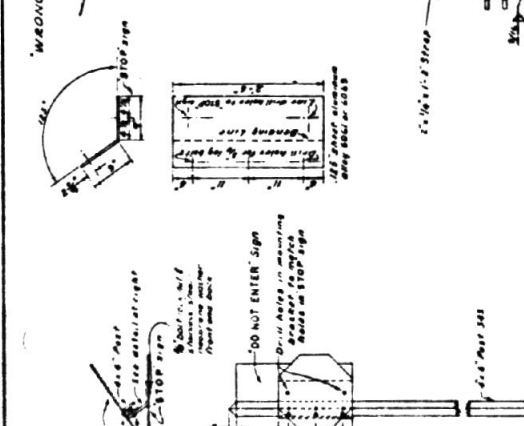
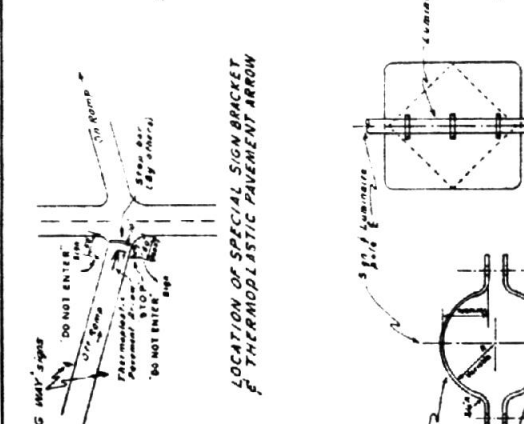
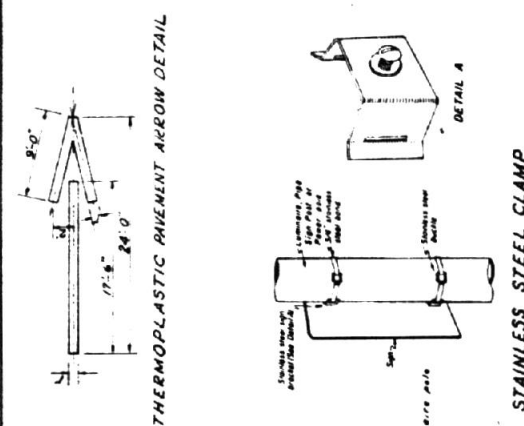
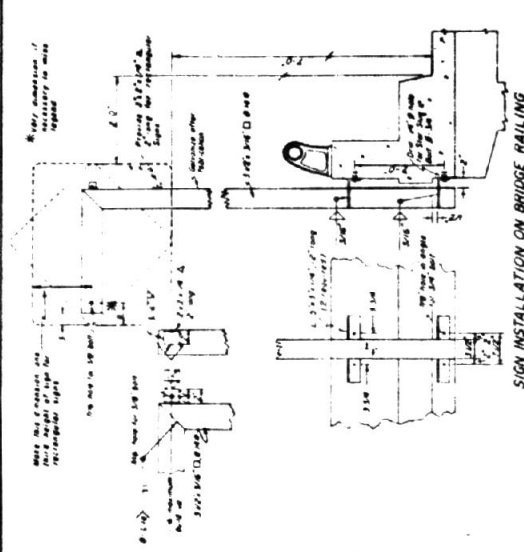
cc: Robert Graham  
Maintenance Engineering

RECEIVED

OCT 1 1980

BUREAU  
TRAFFIC ENGINEERING

*M. GREELEY  
Kaiser Hospital*



*Greeley*

September 29, 1980

MEMORANDUM

TO: The Council

FROM: Mayor Connie McCready  
Commissioner of Finance and Administration

This Report returns Calendar 2028, a Communication from Dale Hoover of Robert Bailey Design Group, on behalf of Bess Kaiser Hospital requesting to place a traffic control sign for North bound traffic into the Hospital on the pedestrian overpass across North Greeley; recommending that it be placed on file and that a revised proposal for installation of the signs be adopted by Council.

jjp



September 29, 1980

MEMORANDUM

TO: Mayor Connie McCready

FROM: D. E. Bergstrom

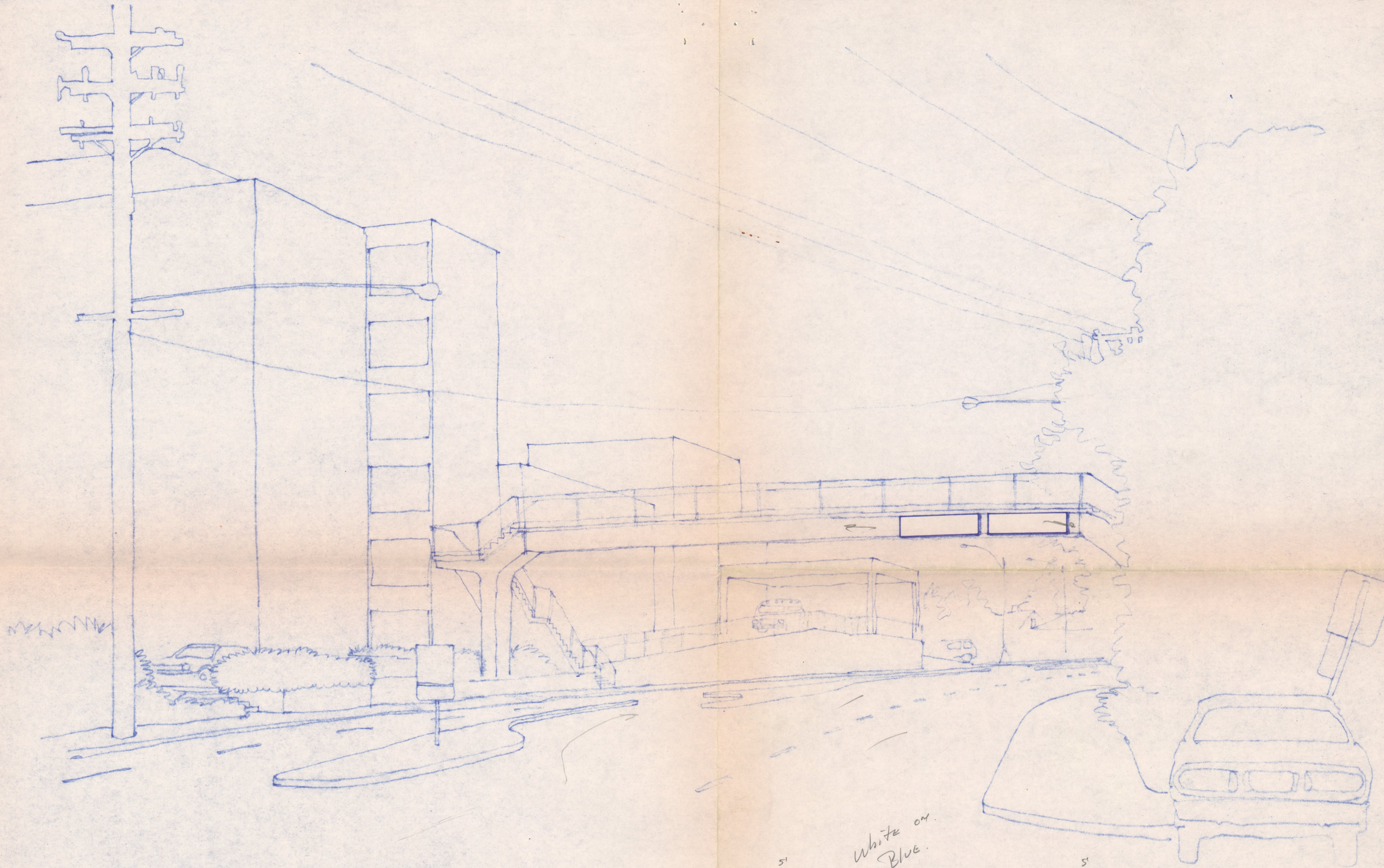
I am returning C. C. 2028, which is a request by the Bess Kaiser Hospital to install traffic directional signs on the pedestrian overpass. We have reviewed this request and recommend approval under the following conditions:

1. There being a limit of 2 signs, each measuring 5' x 1-1/2'.
2. That the signs have white lettering on a blue background with the wording and arrows conforming to City standards.
3. That both signs be illuminated.
4. That no change in message on the signs be permitted without prior City approval.
5. That Bess Kaider Hospital be responsible for maintaining the signs.

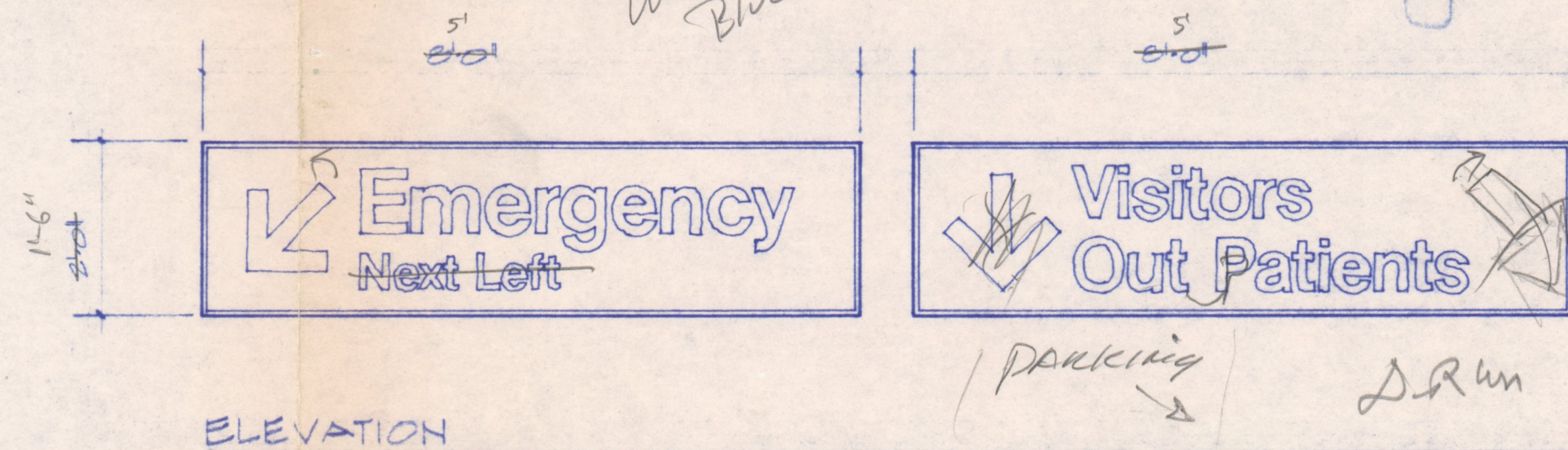
It is my recommendation that the Council approve and authorize installation of these signs.

DEB:jjp





NORTH BOUND ON GREELEY



Robert Bailey Design Group  
909 Southwest St Clair  
Portland, Oregon 97206  
503/228-1381

Date: \_\_\_\_\_  
Drawn By: \_\_\_\_\_  
Revised: \_\_\_\_\_

DRBG

4207



JUN 13 55 PM 1980

REC  
0  
AUDITOR  
CORE

BY \_\_\_\_\_

Robert Bailey Design Group 909 Southwest St. Clair Portland, Oregon 97205 • 503/228 1

June 2, 1980

CC# 2028

Portland City Council  
1220 SW Fifth Avenue  
Portland, Oregon 97204  
Room 202

Gentlemen:

We are currently re-programming the existing sign system at Bess Kaiser Hospital, 5055 N. Greeley Rd. in North Portland. Our goal is to effectively and safely direct hospital traffic off ~~of~~ Greeley and into designated emergency and parking areas.

In order to do this, we would like to utilize an existing pedestrian overpass to direct North bound traffic. Because there is a great deal of congestion here, from hospital traffic, pedestrians and commuters, we feel this sign location is optimum to avoid confusion for drivers who may be in a crisis situation.

Enclosed are drawings which help illustrate existing conditions and our proposed solution.

Your consideration of this matter at your next council meeting would be greatly appreciated.

Sincerely,



Dale Hoover  
ROBERT BAILEY DESIGN GROUP

DH/kt

Enclosures

RECEIVED

JUN 19 1980

BUREAU OF  
TRAFFIC ENGINEERING

2028

Communication from Dale Hoover of Robert  
Bailey Design Group, on behalf of Bess  
Kaiser Hospital requesting to place a  
traffic control sign for North bound traf-  
fic into the Hospital on the pedestrian  
overpass across North Greeley.

THURSDAY

JUN 11 1980

REFERRED TO FINANCE & ADMINISTRATION

Filed JUN 5 1980

GEORGE YERKOVICH

Auditor of the City of Portland Croell 4026

By

*Gordon Croell*

DEPUTY

*Greely*

November 3, 1980

Mr. Dale Hoover  
Robert Bailey Design Group  
909 S.W. St. Clair Ave.  
Portland, OR 97205

Dear Mr. Hoover:

We herewith transmit certain city interoffice memos, structural specifications, and a copy of our requirements, for the Kaiser signing on the Greely pedestrian overpass.

Please indicate by return letter your acknowledgement of these documents and requirements.

We trust no further business will be necessary to begin work on your project. Thank you for your cooperation.

Sincerely,

M. J. Martini  
Sr. Traffic Engineer

MUM:DRM:mc



*File*  
BUREAU OF TRAFFIC ENGINEERING  
INTRA-OFFICE ROUTE SLIP

FROM *Mund...* DATE *10-6-80*

STAFF

☐ BAUER  
☐ BERGSTROM  
☐ BURDETTE  
☐ BUTTENHAM  
☐ CHOATE  
☐ DAVIS  
☐ DORN  
☐ ELLISON  
☐ EVANS  
☐ FRANKLIN  
☐ HASSETT  
☐ JAMES  
☐ KNUDSON  
☐ KOENIG  
☐ LOOMIS  
☒ MAGIN  
☐ MARTINI  
☐ MASCO  
☐ MASON  
☐ MUIR  
☐ NEELY  
☐ NOZAKI  
☐ PARKS  
☐ PHELAN  
☐ SCHOMANN  
☐ SPEER  
☐ STARK  
☐ THOMPSON  
☐ WEBER  
☐ WETMORE  
☐ WILSON, JIM  
☐ WILSON, MAURY

CIRCULATE

☐ INITIAL  
☐ FILE  
☐ FOR YOUR INFORMATION  
☐ FOR YOUR APPROVAL  
☐ ORDER  
☐ PREPARE ANSWER (DRAFT)  
☐ RETURN TO \_\_\_\_\_  
☐ SEE ME  
☐ INVESTIGATE AND REPORT  
☐ PLEASE PROCESS  
☐ PLEASE ATTEND  
☐ REVIEW AND COMMENT  
☐ PLEASE DISCUSS WITH ME

*send a copy  
of this letter  
with specs on  
fastening to  
architects*

PARKING PATROL DIVISION

*Took copies  
from this sheet*

*Copy sent to  
architects*

*Davis*

*Greeley*

September 18, 1980

INTEROFFICE MEMORANDUM

TO: Auditor  
FROM Bureau of Traffic Engineering  
SUBJECT: C.C. 2028 Bess Kaiser Hospital  
5055 N. Greeley

This bureau approves in principle the Bess Kaiser's signing proposal on the pedestrian overpass over N. Greeley Ave. Certain revisions in sign size and legends are being recommended.

DRM:mc

Encl: Letter of request



DEPARTMENT OF  
PUBLIC WORKS  
MIKE LINDBERG  
COMMISSIONER

OFFICE OF  
PUBLIC WORKS  
ADMINISTRATOR

621 S.W. ALDER  
PORTLAND, OR 97205

*N. GREELEY*

October 1, 1980

MEMORANDUM

TO: MARIO MARTINI  
Bureau of Traffic Engineering

FROM: STEVEN L. BARRETT *SB*  
Structural Design Division  
Bureau of Street & Structural Engineering

SUBJECT: Proposed Traffic Signs on the Pedestrian  
Overpass of N. Greeley at Kaiser Hospital

The attachment of the two proposed 1'-6" x 5'-0" signs to this structure is approved subject to Robert Graham's review and approval of the connection of the signs to the steel girders. An acceptable connection could be made similar to the attached Oregon Department of Transportation Standard Drawing No. S-3 detail titled "Structure Mount Detail."

SLB:jw

Attachment

cc: Robert Graham  
Maintenance Engineering

**RECEIVED**

OCT 1 1980

BUREAU OF  
TRAFFIC ENGINEERING



DEPARTMENT OF  
PUBLIC WORKS  
MIKE LINDBERG  
COMMISSIONER

OFFICE OF  
PUBLIC WORKS  
ADMINISTRATOR

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Attachment

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Maintenance Engineering

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1 1980

BUREAU OF  
TRAFFIC ENGINEERING



*Greeley*

August 1, 1980

Ms. Matilda K. Hall  
2434 N. Willamette Blvd.  
Portland, OR 97217


Dear Ms. Hall,

Thank you for your June 3, 1980 letter requesting reflectors at the south end of the overpass railing on the east side of N. Greeley Avenue, south of N. Going Street. We understand your impression of the desirability of these devices, and we expect to install them when work scheduling permits.

Parking on a sidewalk is illegal. We advise you to call the Parking Patrol Division, 248-4134 or 248-4757, whenever you can give the location of any vehicle so parked.

Your interest in these matter is appreciated.

Sincerely,

  
Mario J. Martini  
Senior Traffic Engineer

MJM/DRM/as



Greeley

Portland, Or.  
June 3-80

Gentle man -

While you are attempting to gather in revenue from over due parking tickets - why not collect more from people who insist on parking their cars across side walks? -

I walk quite a lot, and find blood pressure raising on having to walk into street because of car on sidewalk -

Isn't this against the law? -

Why not when policeman driving down street - and sees the car stop and ticket it? -

Another complaint in mind since days of Goldschmidt & Klingner discussions on Sunday night - always intended to phone them -

Coming north on Greeley - just before Geary St. - one is on outside of quite a curve - all at once at Geary overpass - lane straightens

— only two times a year - this is a problem I've heard many complaints about - and that is when it's quite foggy - some reflectors at end of cement wall on overpass

would help -

Thanks for listening.

Matilda K. Hall

2434 N. Willamette Blvd.

97217

cc/Masco

RECEIVED

JUN 5 1980

BUREAU OF  
TRAFFIC ENGINEERING

*Greeley*

TRAFFIC ENGINEERING INVESTIGATION  
ZONE CHANGE OR CONDITIONAL USE REQUEST

NO. CU 63-80

DATE 7/16/80

Location 5055 N. Greeley Ave.

EFFECT ON:	CRITICAL PROBLEM	MAJOR PROBLEM	MINOR PROBLEM	NO PROBLEM	IMPROVES EXISTING CONDITIONS
1. <u>On Street Parking</u>				✓	
2. <u>Traffic Volume</u>				✓	
3. <u>L.T. from Arterials</u>				✓	
4. <u>Accident Potential</u>				✓	
5. <u>Pedestrians</u>				✓	
6. <u>Driveways</u>				✓	
7. <u>Noise</u>				✓	
8. <u>Neighboring Property</u>				✓	
9. <u>Schools</u>				✓	
10. <u>Senior Citizens Homes</u>				✓	
11. <u>Other - List:</u>				✓	

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

RECOMMENDATION:

- ☐ NO OBJECTION TO ZONE CHANGE  
☐ OBJECTION TO ZONE CHANGE  
☒ NO OBJECTION TO CONDITIONAL USE CHANGE  
☐ OBJECTION TO CONDITIONAL USE CHANGE

By: Dam

  
M. J. Martini  
Sr. Traffic Engineer



THE CITY OF  
**PORTLAND**



**OREGON**

CONNIE MCCREADY  
MAYOR

OFFICE OF  
PLANNING AND  
DEVELOPMENT

BUREAU OF  
PLANNING  
621 S.W. ALDER ST.  
PORTLAND, OR 97205

FRANK FROST  
ACTING DIRECTOR  
248-4253

CODE  
ADMINISTRATION  
248-4250

LONG RANGE  
PLANNING  
248-4260

SPECIAL  
PROJECTS  
248-4509

TRANSPORTATION  
PLANNING  
248-4254

HOUSING AND  
POPULATION  
248-5525

*Maple* *DRM*  
DATE: JULY 9, 1980

MEMORANDUM

TO: Government Agencies and Neighborhood Association(s)

FROM: Code Administration Section, 130/211

RE: CU 63-80

A public hearing will be held to consider the following request  
during Aug. 1980.

Applicant: Bess Kaiser (James DeLong 224-3400)

Proposal: Conditional use for an addition to a Hospital  
\*\* Master Plan, and Willamette Greenway ;

Location: 5055 N Greeley

Legal Description: Tax Lot 70, Section 21, TIN, R1E

Lot (Site) Size: 6.9 acres

Quarter Section: 2527

Neighborhood: NPCC, Overlook

Zone: R5

Ground floor: 1525 sq ft Engineering & stores, 600 sq ft Physical Therapy  
First floor: 3805 sq ft Administration & Waiting, 280 sq ft of Lobby entry  
Second Floor: 465 sq ft of Labor & delivery, 550 sq ft of Bridge to south wing.

The parking on the north and across N Greeley to the east would not be changed.

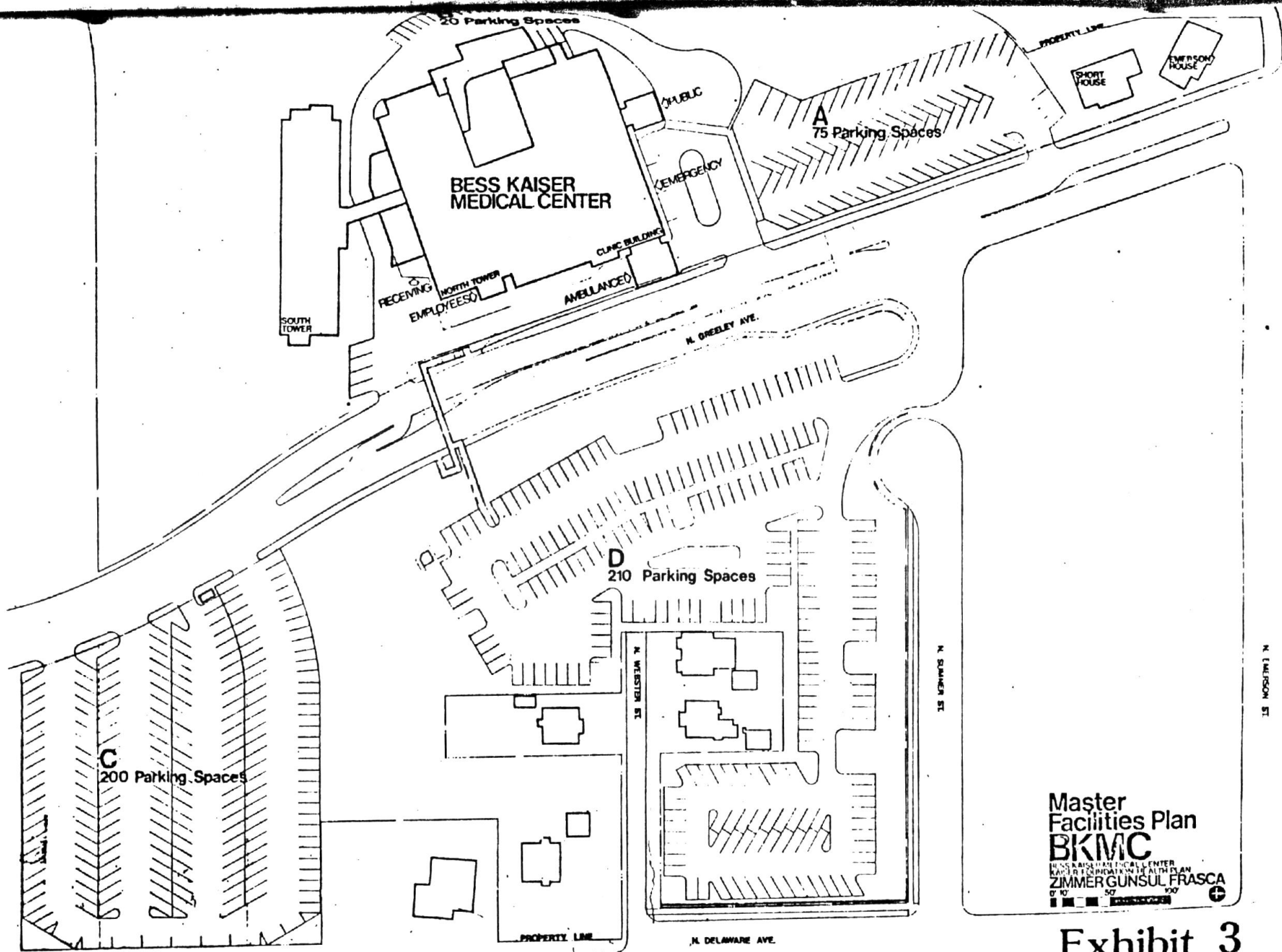
The number of patients, employees or beds will not be changed from the current levels.

The Master Plan is a 1980-1985 plan for the remodeling and limited expansion listed above.

The applicant requests the temporary use of the Trailers until Oct 1982.

We are interested in any impact this request would have relating to your field of expertise and would appreciate your review and opinions before July 28, 1980. If you need additional information regarding this request, we would be glad to assist you at 248-4250.

NW/1b  
6/17/80



Master  
Facilities Plan  
**BKMC**  
BESS KAISER MEDICAL CENTER  
Kaiser Foundation Health Plan  
ZIMMER GUNSUL FRASCA  
0' 10' 50' 100'

Exhibit 3



# Bess Kaiser

BESS KAISER MEDICAL CENTER  
CONDITIONAL USE PERMIT APPLICATION

BUREAU OF PLANNING

CU 63-80

July 1980

CITY OF PORTLAND

Kaiser Permanente Medical Care Program  
Crown Plaza Building  
1500 S.W. First Avenue  
Portland, Oregon 97201

Prepared by:

Benkendorf • Evans Ltd.  
620 S.W. Fifth Ave.  
Portland, Oregon 97204  
(503) 226-0068

RECEIVED  
JUL 03 1980  
City of Portland  
Bureau of Planning

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## 1. Introduction

The Kaiser-Permanente Medical Care Program has entered into a long-range, two-phased program of renovating and updating the Bess Kaiser Medical Center. Phase I started in 1978 and is nearing completion. It provided for the addition of 13,462 square feet on the east side of the main building which enlarged areas of the basement, first and second floors and provided a new ambulance entrance with canopy.

Phase II of the program will involve:

- 1) the addition of 7,455 square feet of new floor area, and
- 2) a reorganization of services and facilities throughout the Medical Center.

The Kaiser-Permanente Medical Care Program has offered quality medical care in the Portland Metropolitan area over the past 38 years. At the present time, more than 230,000 people are part of the Kaiser-Permanente Program and receive a broad range of medical and dental care. A major source of this care is the Bess Kaiser Medical Center. Since 1959 Bess Kaiser has been an integral part of the Portland medical service system, especially in the north and northeast areas of Portland.

As a response to advances in medical techniques, practices and equipment, Bess Kaiser, and all hospitals, are called upon to add new procedures and modernize facilities to meet the needs of patients, nurses and doctors. Bess Kaiser must also respond to increased membership enrollment in the Kaiser Foundation Health Plan of Oregon.

At Bess Kaiser, Phase II will accomplish the following:

1. Upgrade mechanical, structural and electrical systems as required by applicable codes and professional standards.
2. Accommodate current and planned utilization demands for service, including emergencies and same-day surgeries.
3. Expand ancillary support services (such as Central Service, Pharmacy) to meet requirements of hospital patient care departments.
4. Relocate services to improve operational efficiency.
5. Implement recommendations of the Joint Commission on Accreditation of Hospitals (JCAH) and guidelines of various professional organizations and regulatory agencies regarding space and building environment.

Phase II will also resolve the following problems:

1. Current space limitations in the laboratory, causing it to be divided into two locations.
2. Present same-day surgery holding area prevents use of 18 beds for hospitalized patients.
3. Improve environmental control and patient receiving by consolidating operating rooms into a single area.
4. Lack of patient privacy in diagnostic testing area (Nuclear Medicine and Ultrasound).
5. Three widely separated recovery rooms serving one surgical area.
6. Inadequate engineering and storage space.



The result of Phase II will be the more efficient operation of Bess Kaiser Medical Center and the continued provision of quality services to the more than one-quarter million members of the Kaiser Foundation Health Plan of Oregon.

## II. General Information

### A. North Portland - Overlook Neighborhood

Bess Kaiser Medical Center is located within the North Portland area which includes the area west of the I-5 freeway, north of the Willamette River and south of the Columbia River. The Linnton area on the west side of the Willamette River, opposite the St. Johns area, is also included. (See Exhibit 1.)

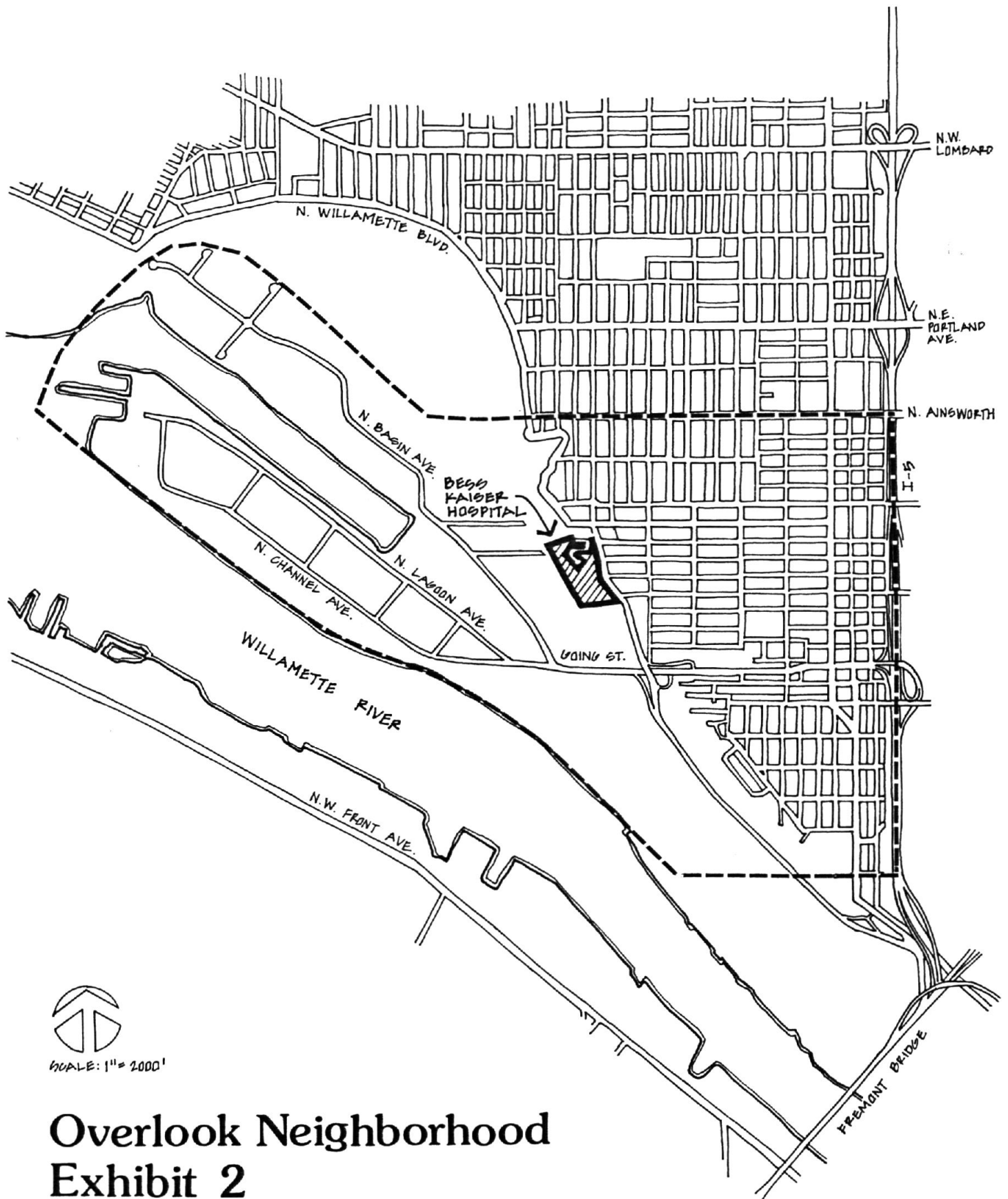
The North Portland area is divided into seven (7) specific neighborhoods. The Medical Center is located in the Overlook Neighborhood. The Overlook Neighborhood is bounded on the east by the I-5 freeway, on the north by Ainsworth Street and the bluff, on the west by the Willamette River and on the south by Fremont Street. Swan Island and the Mocks Bottom area are also included in the Overlook Neighborhood. (See Exhibit 2.)

Bess Kaiser Medical Center is the only hospital facility located within the North Portland area, although both Emanuel and Holladay Park Hospitals are located on the southeast fringe of the area, just east of the I-5 freeway.

In addition to the Bess Kaiser Medical Center, the Kaiser Montana-Interstate Medical Offices are also located within the Overlook Neighborhood. These offices were established to perform office-oriented doctor-patient functions previously carried on at Bess Kaiser. Other medical office facilities in Vancouver (Wash.), Beaverton and Portland (N.E. Broadway and Sandy Boulevard) perform similar functions, reducing the need for



# Vicinity Map Exhibit 1



## Overlook Neighborhood Exhibit 2

visits to Bess Kaiser. These medical offices refer patients to Bess Kaiser for hospitalization or more extensive treatment.

#### B. Vicinity Conditions

1. Surrounding Land Use - The Overlook area contains several well defined types of land uses. Below the bluff at N. Greeley Avenue and on Swan Island and Mocks Bottom the uses are almost exclusively industrial. Adjacent to Interstate Avenue and near the freeway interchanges the uses are commercial. Throughout the balance of the Overlook area the uses are residential, both single family and multiple family. This pattern of industrial uses adjacent to the rivers, commercial uses along the main arterials and residential uses in the interior areas predominates in the North Portland area.

Around Bess Kaiser Medical Center, there are fully built-out single family residential uses to the north and east, industrial use to the west below the bluff and a city park site (Madrona Park) and single family residential use to the south and southeast, respectively.

2. Accessibility - Major access routes to North Portland are Lombard Street from the east and Interstate Avenue and the I-5 freeway from the south. Access from the west is limited by the number of river crossings. From the north, the I-5 freeway provides the only viable access after crossing the Columbia River. Major arterials include Columbia Boulevard, Killingsworth Street and Going Street from the east and Greeley Avenue from both north and south.

The Overlook area is most accessible via Ainsworth, Killingsworth, Alberta and Going Streets from the east and the I-5 freeway, Interstate and Greeley Avenues from the north and south.

3. Traffic - Due to the limited accessibility to North Portland, the available routes carry large amounts of traffic. The I-5 freeway, Interstate Avenue and Lombard Street are the most heavily traveled routes, all carrying a complete mix of traffic ranging from bicycles to large trucks. All major intersections are signalized on Interstate and Lombard, while access to and from I-5 is limited to the major cross-thoroughfares. Overall volumes have been increasing on the major routes, but none have reached capacity or create unusual problems.

#### C. Site Characteristics

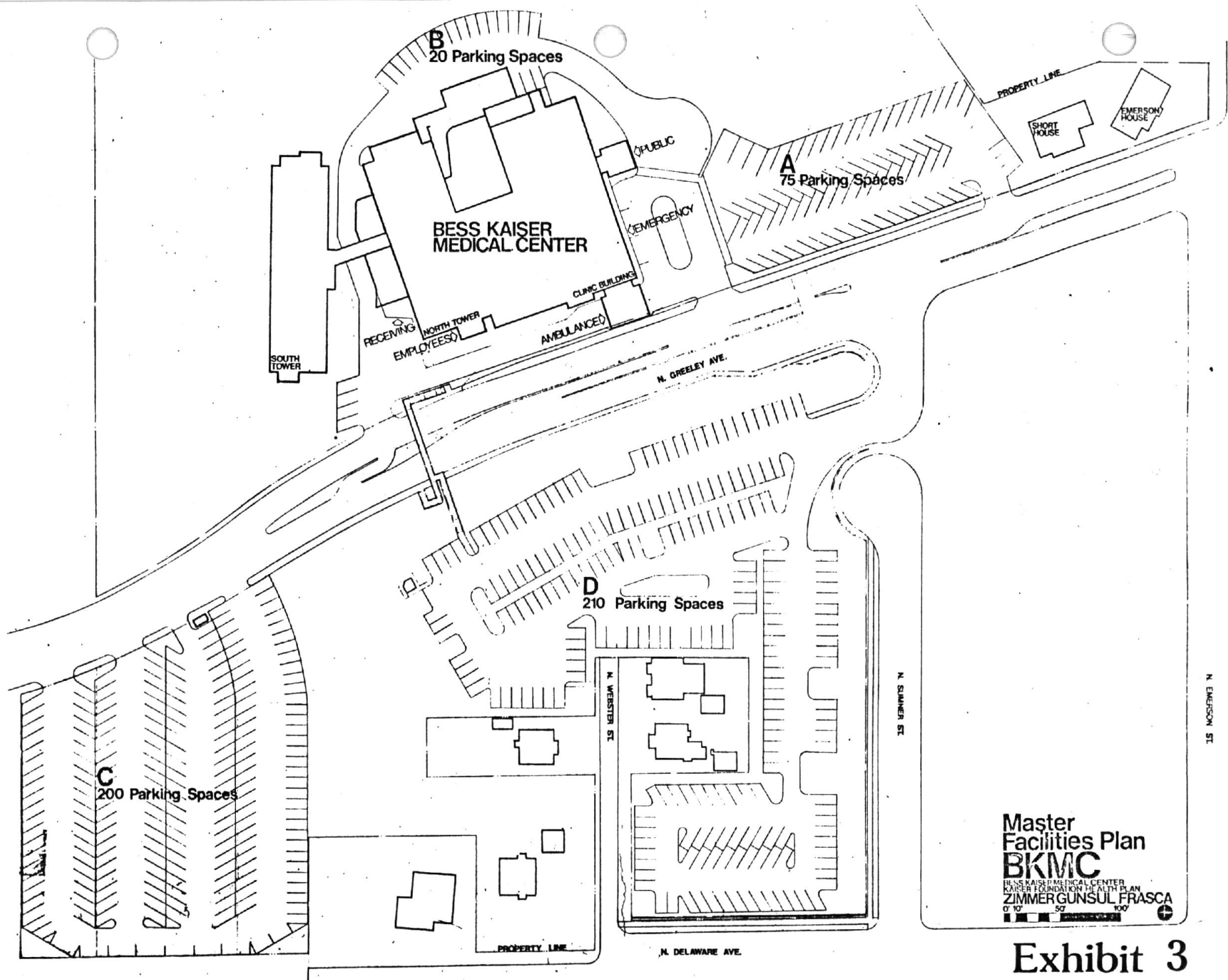
The Bess Kaiser Medical Center site is located on N. Greeley Avenue between Alberta and Emerson Streets. All structures are located on the west side of N. Greeley Avenue just above the bluff overlooking the Willamette River and Swan Island. Major hospital parking is located on the east side of N. Greeley Avenue with some restricted parking to the north and west of the medical center. (See Exhibit 3.)

1. Kaiser Land Ownership - Kaiser Foundation Hospitals owns the parcel on which the main medical center is located, identified by the Assessor as: 1N, 1E, Section 21 NW $\frac{1}{4}$ , TL 70, 6.91 acres.

2. Site Area Acreage and Breakdown - Total site area is approximately 519,252 square feet, or 11.92 acres. Of that total, 7.25 acres (315,707 sq. feet) is in three (3) contiguous parcels on the west side of N. Greeley Avenue. The remaining land is in 41 parcels on the east side of N. Greeley Avenue.

3. Slope and Topography - Topography in the area is mostly gentle with the exception of a low scarp which separates the "upper" and "lower" parking areas on the





Master  
Facilities Plan  
**BKMC**  
BESS KAISER MEDICAL CENTER  
KAISER FOUNDATION HEALTH PLAN  
ZIMMER GUNSUL FRASCA  
0' 10' 50' 100'

**Exhibit 3**

east side of N. Greeley Avenue. The slopes are gentle enough to allow use throughout the vicinity. The ground slopes both to the west and to the south. On the east side of N. Greeley Avenue the westward slope is considerably less evident, but the southward slope is similar to the slopes on the opposite side of N. Greeley Avenue.

4. Current Land Uses - The entire site area is currently used for hospital purposes. The medical center is located on the portion of the site area between N. Greeley Avenue and the bluff to the west. Other uses here consist of parking and two frame dwellings which are used for hospital related purposes. On the east side of N. Greeley Avenue, opposite the medical center, is parking for employee and visitor's cars. The two lots, upper and lower, contain 410 spaces. (See page 11 for total parking spaces available.)

5. Land Coverage - In the staff findings for CU-67-78 it was determined that after Phase I the medical center would cover 36% of the specific lot upon which it is located. While it was stated that the maximum allowable lot coverage for a hospital in a R5 zone is 35%, the coverage constituted only 21% when considering the hospital's total project area. In his decision on CU-67-78 the Hearings Officer chose to consider the total project area rather than the single tax lot. By this means, the medical center was determined to be neither non-conforming nor in need of a variance.

6. Structures - The three interconnected structures which make up the medical center are located on the land area to the west of N. Greeley Avenue. Other structures include two frame dwellings on separate lots located to the north side of the hospital.

a. Floor area - Current overall total floor area of all five structures within the entire project area is 160,376

square feet. The main building, north tower and south tower contain a total floor area of 157,605 square feet. The two frame dwellings contain a total of 2,771 square feet of floor area.

b. Height - The current height of all structures, although they may be greater than the currently allowable maximum in the Code, has been recognized by the City. This is due to previous approvals by the City for continued construction of the medical center structures.

7. Transportation - The medical center is located on Greeley Avenue and just north of Going Street. As such, it is accessible from other areas of the city by both public and private means. However, the medical center is oriented more to access by private vehicle than by the public bus.

Bess Kaiser is served by Tri-Met routes 2 and 71. Route 2 is a major north-south line traveling along Greeley Avenue in both directions. Route 2, the St. Johns Line, begins in downtown Portland and terminates in the Rivergate area beyond St. Johns. Route 71 is an east-west beltline route between Swan Island and 60th and Killingsworth. Connections between Route 71 and various north-south lines are available throughout north and northeast Portland, increasing the access to the medical center. Frequency of service on Route 2 from the Portland Mall to Rivergate ranges from 10 minutes at the peak hours to one hour after 9:00 p.m. Average frequency for the 19 hour service period is one bus every 22 minutes. Service begins at approximately 5:30 a.m. and terminates at 12:30 a.m. In the opposite direction from Rivergate to the Portland Mall, frequency ranges are similar with an average frequency of 21 minutes. Service begins at approximately 5:00 and terminates at 1:00 a.m.

Route 71 provides service between N.E. 92nd & Sandy and Swan Island. Frequency of service in either direction aver-

ages 27 minutes for an 18 hour service period. Both routes, 2 and 71, travel on Greeley Avenue providing direct service to the Medical Center.

8. Parking - Parking at Bess Kaiser was considered in detail for CU-67-78 and determined to be more than satisfactory. An additional 53 spaces were required for Phase I and 5 more for the use of the house on Emerson Court. The following table illustrates the available off-street parking spaces and city requirements:

TABLE 1

	<u>CU-36-74</u>	<u>PHASE I</u>	<u>PHASE II</u>
Available Spaces	521*	521	509
City Requirement	425	478	482 or 497 or 509**

\* Through a minor miscalculation, 526 spaces were considered available.

\*\* Requirement may vary depending upon method of calculation and number of beds used as a basis for the calculation.

### III. Conditional Use

#### A. Description of Proposal

Kaiser Permanente requests approval of a Conditional Use application in order to continue the Phase II expansion and internal

renovation and remodeling program at Bess Kaiser Medical Center. Phase II will add a total of 7,455 square feet of floor area to the existing structures (see Exhibits 4a, b, c, d and e) and will upgrade the physical plant, relocate services to improve operational efficiency, expand ancillary support services to meet the needs of specific departments and to implement recommendations of the Joint Commission on Accreditation of Hospitals and other organizations and agencies.

As part of this application the applicant is requesting approval of two temporary permits to allow placement of trailers to be used during construction. One permit is requested so two office trailers can be placed in the parking lot west of the main hospital building. These trailers are already in place as part of Phase I construction under CU-67-78. The second permit is requested to allow for the temporary use of vacant parcel west of the Greeley house for construction trailers and equipment staging. These temporary structures will be required during the construction period, approximately October, 1980 to October, 1982. This temporary use was also allowed under CU-67-78.

Because all setbacks from property lines, heights and lot coverage have been met or previously granted variances, all portions of Phase II will satisfy the Zoning Code and will not require variances.

#### B. Requirements

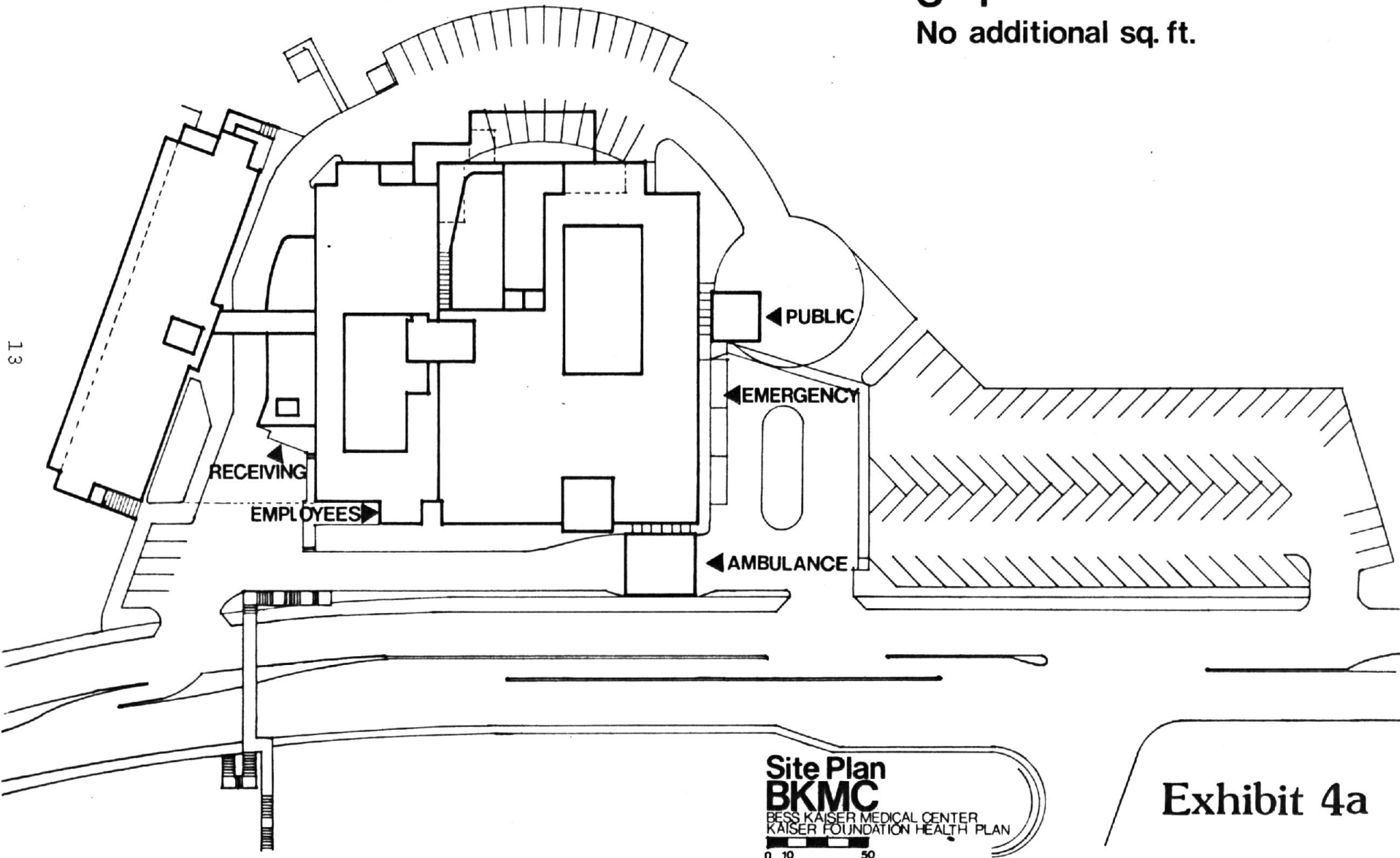
1. Bureau of Planning Application Form - submitted separately.
2. Reasons for Initiating this Action - There are two reasons for requesting this Conditional Use at this time. One, a conditional use is required to undertake any expansion because hospitals are regulated under the code as condition-



## Phase II

**S-1**

No additional sq. ft.

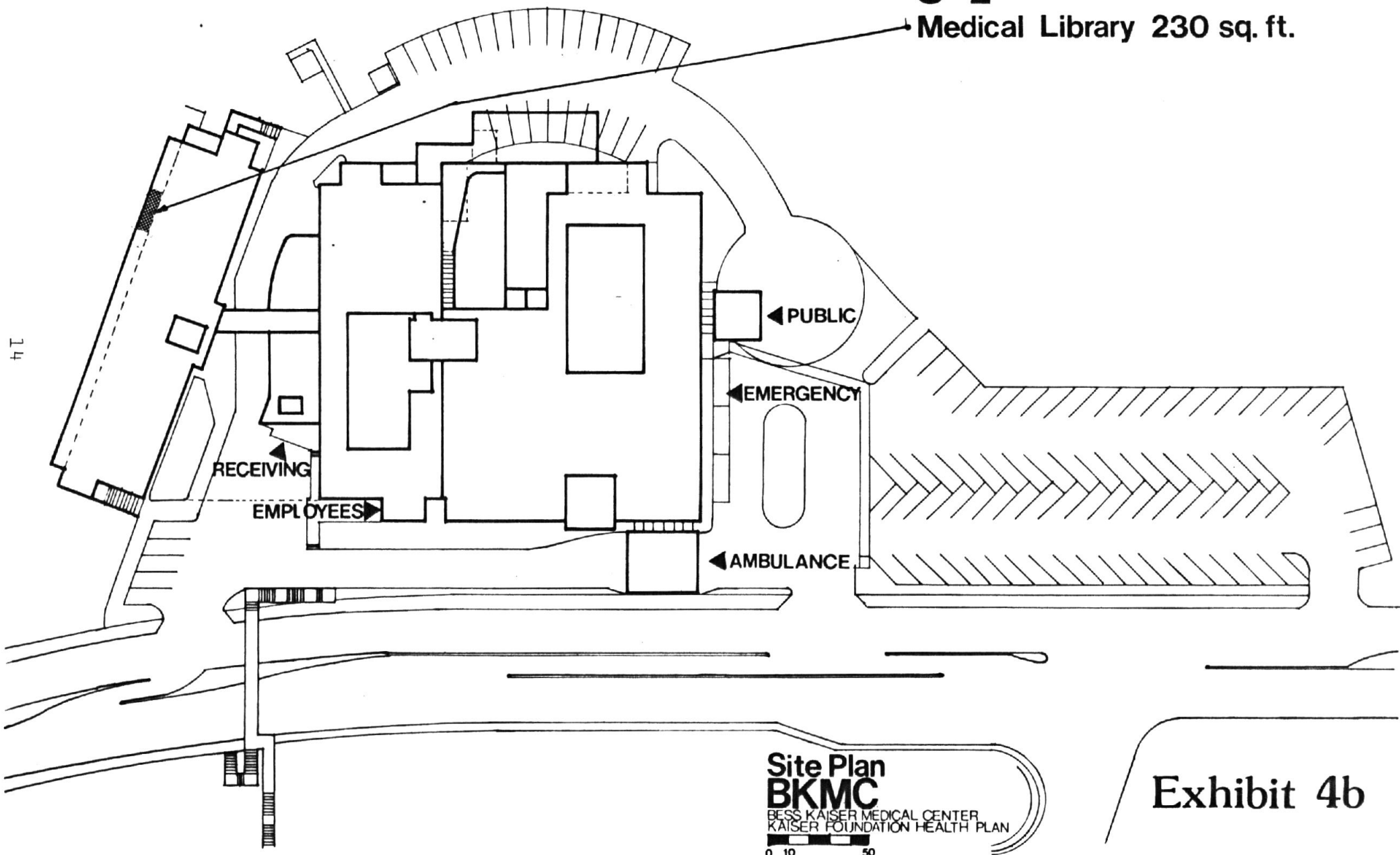


**Exhibit 4a**

## Phase II

**S-2**

**Medical Library 230 sq. ft.**



**Site Plan**  
**BKMC**  
BESS KAISER MEDICAL CENTER  
KAISER FOUNDATION HEALTH PLAN  
0 10 50

**Exhibit 4b**

## Phase II

### GROUND FLOOR

Engineering & Stores 1525 sq.ft.

Physical Therapy 600 sq.ft.

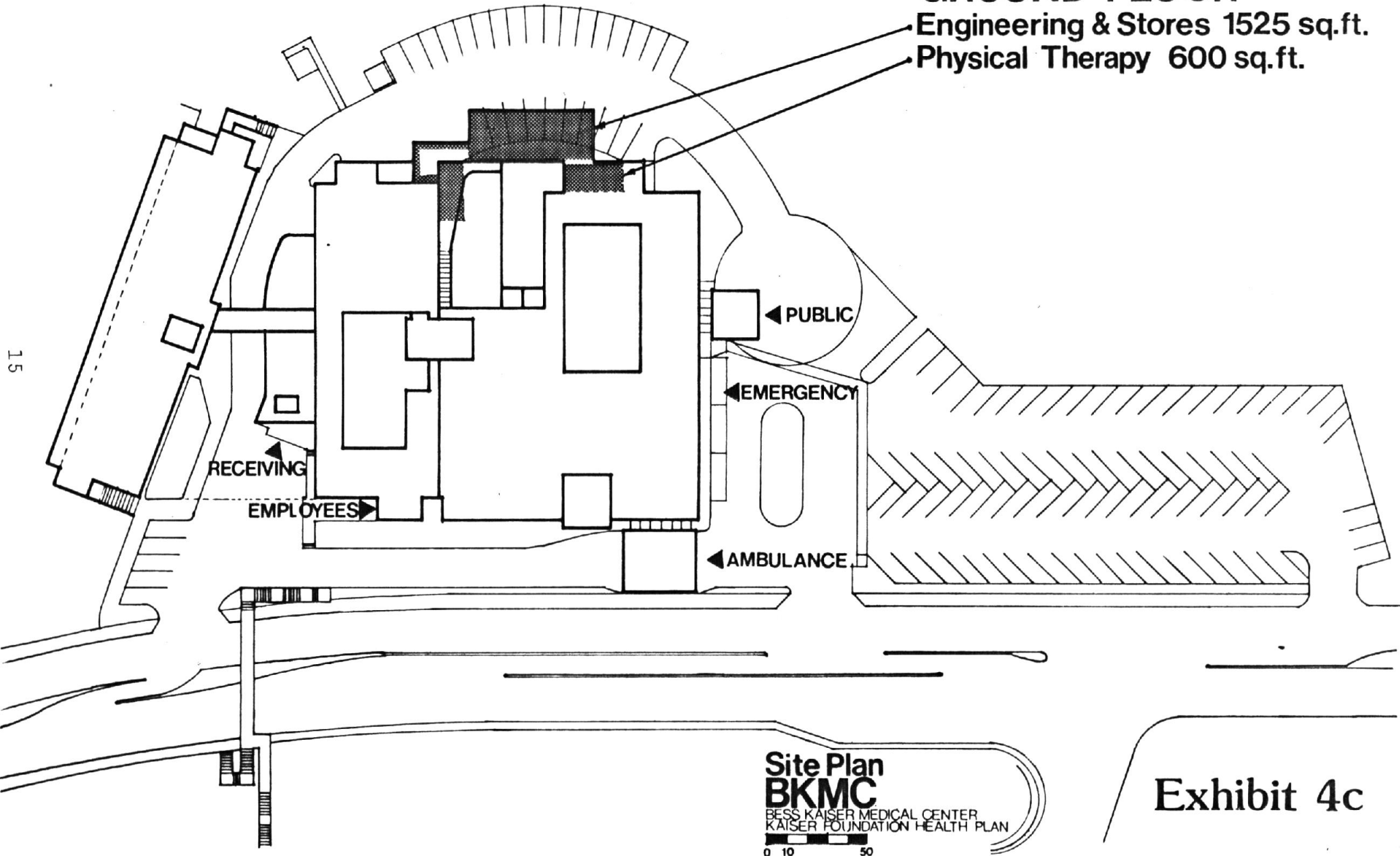


Exhibit 4c

## Phase II

### FIRST FLOOR

Administration & Waiting 3805 sq.ft.

Lobby Entry 280 sq.ft.

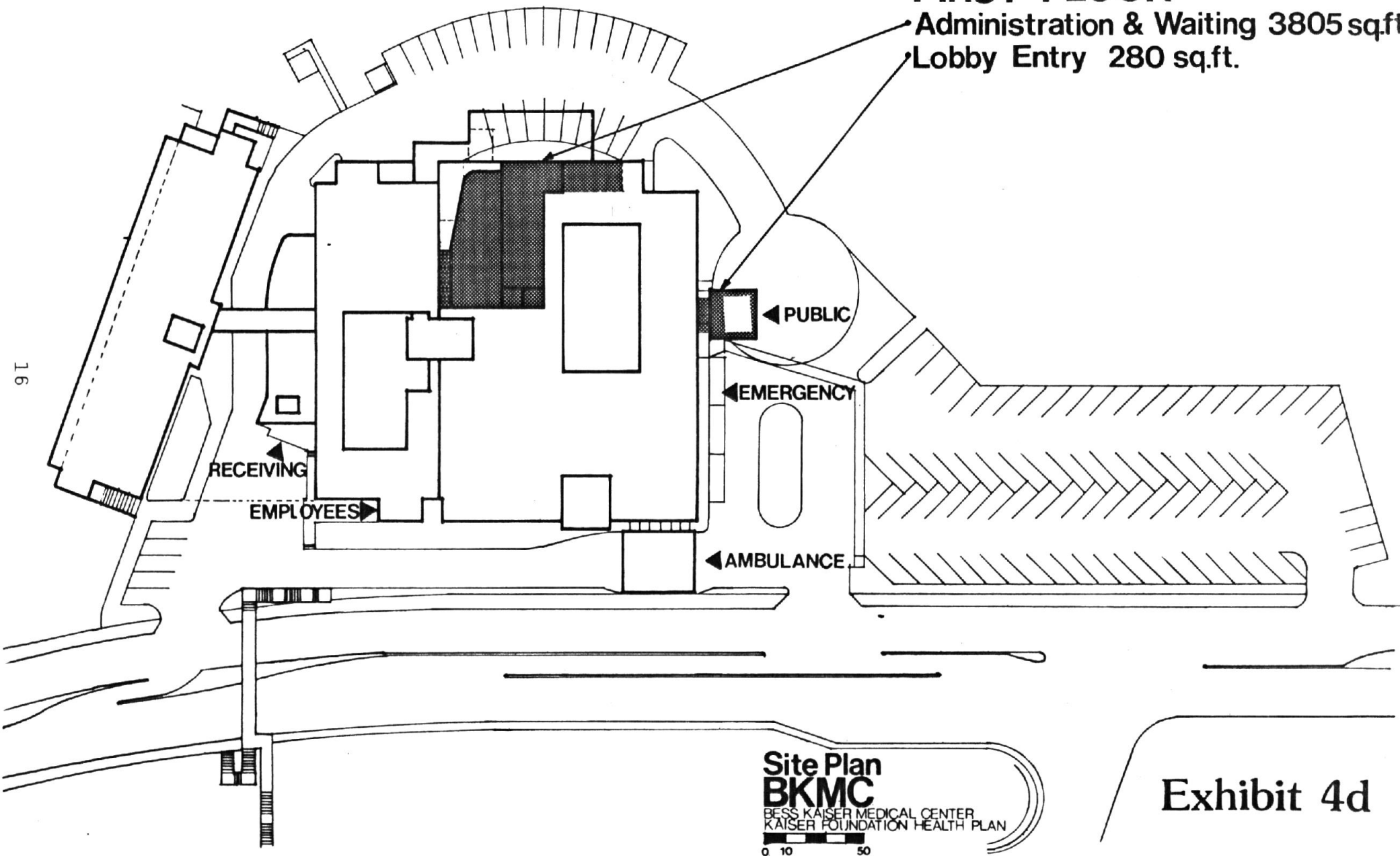


Exhibit 4d

## Phase II

### SECOND FLOOR

Labor & Delivery 465 sq.ft.

Bridge 550 sq.ft.

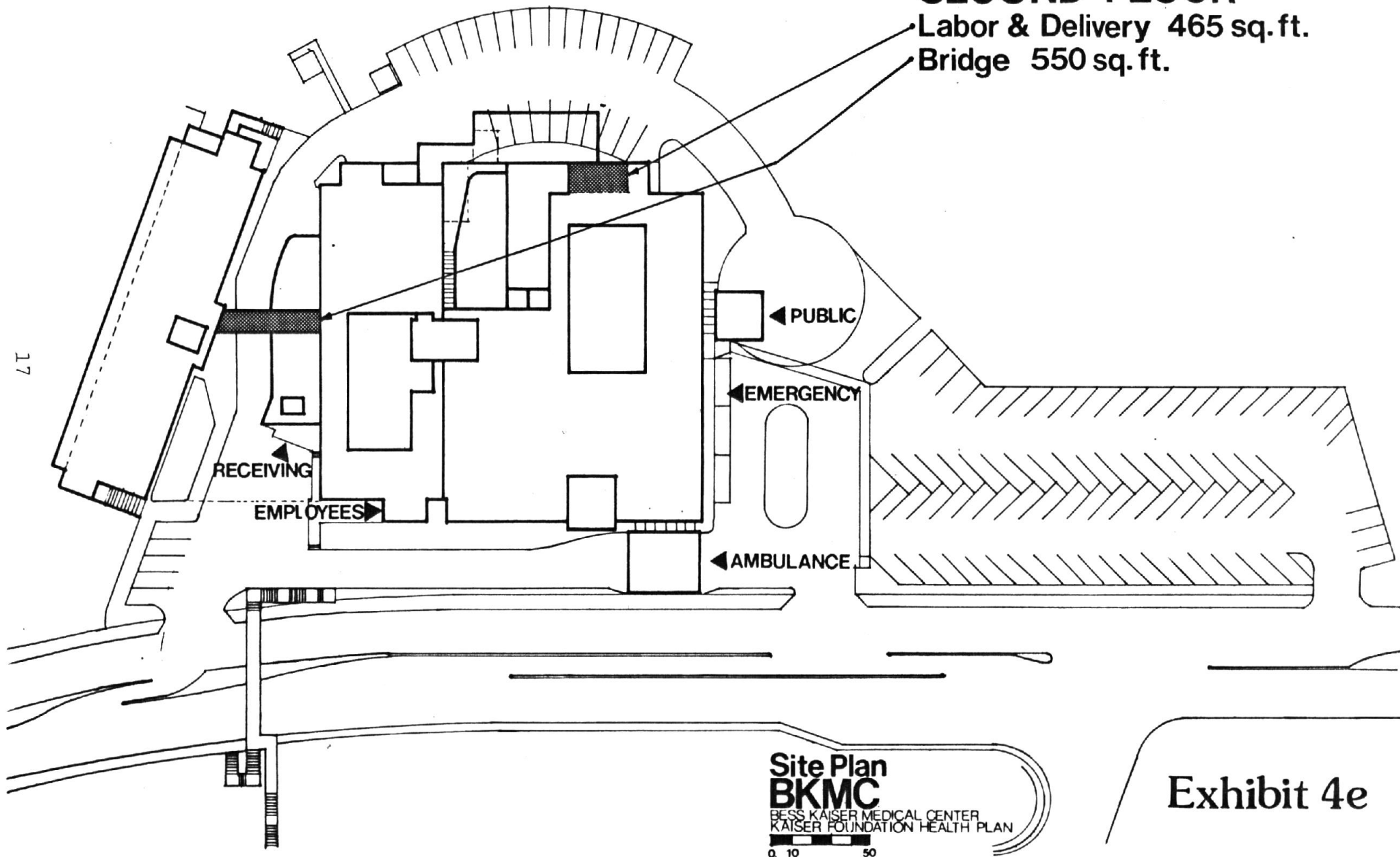


Exhibit 4e



al uses in the R5 zone. Two, a Willamette River Greenway Conditional Use is required because that portion of the site west of N. Greeley Avenue is a part of the Willamette River Greenway area. Both Conditional Use Permits may be considered and granted concurrently.

C. Conformance with Plans, Goals and Policies

1. City of Portland Comprehensive Plan - The site of Bess Kaiser Medical Center is designated on the January, 1980 Recommended Comprehensive Plan Map for the city as High Density Single Family Residential use.

The continued operation of the Medical Center in an area designated for residential use is supported by the following goals and policies:

- "Goal 2 - Maintain Portland's role as the major regional employment, population and cultural center through public policies that encourage expanded opportunity for housing and jobs, while retaining the character of established residential neighborhoods and business centers."

Bess Kaiser Medical Center is one of the major resources of the Oregon Region, serving approximately 20,000 patients per year. Kaiser Permanente Medical Care Program is one of the largest employers in the state of Oregon, providing employment for over 2,400 persons. As a part of North Portland and the Overlook Neighborhood for over 20 years, Bess Kaiser provides jobs and services for the area and lends stability to the character of the established neighborhood.

- "Goal 3 - Preserve and reinforce the stability and diversity of the city's neighborhoods while providing for increased

density in order to attract and retain long-term residents and businesses and insure the city's residential quality and economic vitality."

Bess Kaiser Medical Center has been in the North Portland area since 1959 and represents a long-term commitment to the area by the Kaiser program. The continued effort to maintain a well-kept, modern physical plant and to offer quality medical care results in a stable land use contributing to the quality and economic vitality of the neighborhood and the North Portland area.

- "Policy 3.1 Physical Conditions - Provide and coordinate programs to prevent the deterioration of existing structures and public facilities."

The purpose of this application is to upgrade the physical plant and prevent deterioration of the existing structures. The main building and north tower are over 20 years of age and are in need of renovation and remodeling to serve today's medical needs and demands.

- "Policy 3.5 Neighborhood Involvement - Provide for the active involvement of neighborhood residents and businesses in decisions affecting their neighborhood through the promotion of neighborhood and business associations and their activities."
- "Goal 9 - Maintain citizen involvement in the on-going land use decision-making process and provide opportunities for citizen participation in the implementation, review and amendment of the adopted Comprehensive Plan."

The North Portland Citizens Committee and the Overlook Neighborhood are organized for the awareness and furtherance of the citizen's role in his living environment.

Both organizations allow for the involvement and participation of the resident in the planning process.

Kaiser has participated in the activities of the North Portland Citizens Committee and the Overlook Neighborhood and has provided those forums with descriptions and explanations of its plans and programs. Kaiser welcomes input and creative discussions with individuals and groups alike. On June 16, 1980 a presentation of the Phase II project was made to the North Portland Citizens Committee Board. At that time, the Board voted unanimously to endorse and support the project at the Medical Center. Future meetings and discussions will be held with various groups as may be necessary.

- "Goal 11A - Provide a timely, orderly and efficient arrangement of public facilities and services that support existing and planned land use patterns and densities."

Recent changes in hospital services and capabilities have not required extensions of services or placed additional demands on the city's ability to provide those services.

Phase II is a timely project and can be carried out in an orderly manner in conjunction with the completion of Phase I and the availability of Kaiser Sunnyside Medical Center operation. Phase II provides more efficient medical care for the north and northeast Portland areas in an established location where land use patterns and densities are established and will remain stable.

2. Zoning Code (Page Eight) - Under Section 33.26.240, Item 13, General Hospitals are a conditional use permitted in an R5 One Family Residential Zone subject to the regulations contained in Section 33.26.350. Those regulations are as follows:

1. (Amended by Ord. No. 140290 passed and effective July 24, 1975.) Off-street parking: One space per two beds plus one space per two employees;

Response: Under this Ordinance, the Medical Center would be required to have 497 off-street parking spaces if the licensed capacity of 250 beds is used as the standard, or 482 spaces if the actual bed count of 220 at the completion of Phase II is used. These figures assume an employee count of 743 as shown in the Master Plan. At the completion of Phase II, there will be 509 available off-street parking spaces.

Based on the Hearings Officer's decision on CU-67-78, a total of 483 spaces were required at the completion of Phase I. Phase II will require another 26 spaces. Of the total new floor area of 7,455 square feet, only 6,395 square feet constitute clinic or related uses. The library, lobby entry and bridge are non-clinic uses and should be exempt from parking requirements. The final requirement at the completion of Phase II is 509 spaces. That requirement matches exactly the number of available off-street parking spaces at the completion of Phase II.

2. Off-street loading: For any general hospital of five thousand square feet of floor area or greater, off-street loading berths shall be provided according to the table below:

Square Feet of Floor Area	Loading Berths Required
5,000- 39,999	1
40,000- 99,999	2
100,000- 159,999	3
160,000- 239,999	4

240,000-	319,999	5
320,000-	399,999	6
400,000-	489,999	7
490,000-	579,999	8
580,000-	669,999	9
670,000-	759,999	10
760,000-	849,999	11
850,000-	939,999	12
940,000-	1,029,999	13
Over-	1,030,000	14

Response: At the completion of Phase II, the hospital structures will contain 165,060 square feet of floor area. This will require 4 loading berths. Three berths currently are provided between the north tower and south tower areas on the east side. The new loading berth will be on the west side in the new Engineering and Stores area. (See Exhibit 4c.)

3. Minimum site area: No hospital shall be established on a site less than twenty thousand feet in an area in an R5 zone. At least two thousand square feet of lot or site area shall be provided for each patient bed in an R5 zone.

Response: Not applicable to Phase II and this Conditional Use request.

4. Maximum height: Two and one-half stories or thirty-five feet, except there shall be no limit on buildings located more than four hundred feet away from property lines bounding the project;

Response: All building heights have received prior approvals. Phase II will not increase any existing building heights.



5. Minimum front yard: Thirty feet;

Response: Not applicable to Phase II and this Conditional Use request.

Minimum side or rear yard: Thirty feet;

Response: All Phase II expansion and new building placement meet this requirement.

6. (Added by Ord. No. 140290 passed and effective July 24, 1975.) Maximum site coverage: Area covered by all buildings including accessory buildings shall not exceed thirty-five per cent of the site area;

Response: As determined by the Hearings Officer Report and Decision on CU-67-78, lot coverage is only 21% of the hospital's total project area at the completion of Phase I. Phase II will increase lot coverage of the total project site area to 21.6%.

7. (Added by Ord. No. 140290 passed and effective July 24, 1975.) Locations permitted: New hospital sites shall be restricted to locations abutting a major or secondary traffic arterial with off-street parking ingress directly from and egress directly to such arterial.

Comment: Not applicable to Phase II and this Conditional Use request.

3. Willamette River Greenway - As identified by the Willamette River Greenway Plan for the City of Portland, those portions of the Bess Kaiser Medical Center on the west side of N. Greeley Avenue are within the "Scenic/Development Zone." The intent and requirements for this zone are as follows:

Intent: To allow for use and development consistent with the underlying zoning while allowing for public use and enjoyment of the waterfront and enhancing the river's scenic qualities.

Requirements: Development shall be of a scale and density to encourage people-oriented uses on the riverfront and designed to enhance the scenic value of the river. Non-river dependent uses shall be set back from the river to accommodate public access and landscaping as required by the Willamette Greenway Development Regulations. Existing industrial uses shall be allowed to intensify within sites as they exist upon the date of adoption of the Greenway Plan.

Response: The Bess Kaiser Medical Center is consistent with the underlying zoning because it is allowable as a Conditional Use. This use does not detract from the enjoyment, usability or scenic qualities of the river and is of a scale and density which do not interfere with these characteristics of the river. As with existing industrial uses, the Medical Center should be allowed to intensify within its site area. Phase II, is of relatively small scope of actual floor area expansion and its impact on the Greenway will be very minimal.

Visual character of the Medical Center and the area will not be significantly impacted by Phase II. As such, the integrity of the Greenway in the area will be maintained. The Greenway Trail, which is designated on the west side of N. Greeley Avenue, is already in place by virtue of the existing sidewalk in front of the Medical Center. Phase II will not impact the Greenway Trail in any way.

4. Bess Kaiser Master Plan - This Phase II project has been identified in the recent Master Plan and was described

as a part of Section C, "Master Facilities Plan - BKMC" in Part IV, "Development Plan for Bess Kaiser Medical Center." In addition, Appendix A of the Master Plan is a General Description of Phase II, setting forth exactly what is to be accomplished. By these descriptions, Phase II is in conformance with the Bess Kaiser Master Plan.

#### D. Adequacy of Services and Facilities

1. Sanitary Sewer/Storm Drainage - In the area of the Medical Center, combination service is provided by a single 24 inch line. Current service level is adequate.

2. Water - A 12 inch water line is located in the N. Greeley Avenue right-of-way. Current service level is adequate.

3. Parking - See III. C. 2. (1) above.

4. Traffic - According to traffic studies for the Medical Center which were completed in 1980, Medical Center generated traffic constitutes only 21% of the total traffic on N. Greeley Avenue between the medical center and N. Going Street. To the north on N. Greeley Avenue, Medical Center generated traffic constitutes only 6% of the total traffic between the medical center and N. Killingsworth Street. (See Appendix A.) These traffic levels are within the capacity of the streets in the area.

Because Phase II will not increase the requirements of and demands by the Medical Center on services and facilities, all of the above current levels will be adequate.

#### E. Impacts

1. Surrounding Land Uses - Because the majority of the Phase II project is on the west, or river side of the

Medical Center, the actual impact on surrounding land uses will be minimal.

a. North - Residential development will not be impacted by Phase II because most of the new hospital construction will be integrated into the existing structures. Some new building area may be visible from the north.

b. East - There will be no impact on the residential area to the east because most of Phase II is on the west side of the medical center.

c. South - Due to slope and public ownership of the land, Phase II will be almost totally non-visible from the south.

d. West - Although the majority of Phase II will be on the west side of the Medical Center, the slope and lack of other uses directly adjacent to the west reduces any significant impact. The new construction will be mostly integrated with the existing structures and will not create a scale, height or density problem when viewed from the west.

Phase II is a minor external expansion of the existing structures, but a major internal reorganization of space and facilities. However, it will not increase the number of employees or patient load. As such, the impact on surrounding uses in all directions will be very minimal.

2. Hospital Operation - One of the purposes of Phase II is an increase in operational efficiency and space utilization. While this necessitates some expansion of the total floor area, there will be no increase in the number of patients, employees or beds as a direct result of Phase II.

a. Patients - Admissions to Bess Kaiser Medical Center and the Average Daily Census have both decreased since 1974. These figures leveled off in 1979 to levels which are predicted through 1985, with some variations. The overcrowding conditions at Bess Kaiser were eliminated with the opening of the Kaiser Sunnyside Medical Center in August, 1975. As a result, upgrading and modernization of Bess Kaiser is now possible. The chart on Hospital Bed Utilization in the Master Plan provides projections for bed utilization at Bess Kaiser Medical Center through 1985. A description of such utilization is found on page 10 of the Master Plan. The end result is that, while actual admissions and average daily census are stabilized, the level of overall medical service for patients, in and out, must be increased to give superior care to all patients.

For out-patients at the Medical Center, current daily averages of 24 out-patients have been calculated. Based on 260 working days per year, approximately 6,200 out-patients are treated annually.

b. Employees - The number of employees is determined by the number of patients, average daily census, services offered and the levels of medical technology and practice. Because the levels of the first two factors are predictable through 1985 the number of employees is predictable as well. Staffing by the end of 1980 is set in the Master Plan at approximately 743 persons and that is projected to carry through to 1985, with some minor variations. See page 15 of the Master Plan for staffing levels.

Phase II does not project new employees and, therefore, will have no impact on the total number of employees in the hospital operation.

c. Beds - Bess Kaiser is licensed for 250 beds. Currently, there are 220 beds, of which only approximately 206 are available for patient use. The remaining beds are used for surgical preparation due to a lack of sufficient space for a separate surgical preparation area. The Hospital Bed Utilization chart demonstrates that the Average Daily Census is less than 200 beds.

Phase II proposes that 220 beds will become fully available for patient use. However, the Average Daily Census is not projected to increase beyond 200 beds, giving the Medical Center greater flexibility in actual bed use.

d. Medical and Administrative Functions - Phase II will have the greatest impact on these functions. As a result of expansion, space reorganization and utilization and operational efficiency, the Medical Center will have adequate space for upgraded and more modern medical equipment and functions. In addition, administrative offices will be recognized for greater efficiency (administrative staff will not be increased).

e. Traffic and Parking

1. Traffic at Bess Kaiser will not change as a result of Phase II. A traffic study completed by Carl H. Buttke, Inc., Consulting Transportation Engineer, shows that hospital-generated traffic on the major streets serving the hospital will not change substantially as a result of hospital modifications. That study is attached as Appendix A.

2. Parking - As shown in the Master Plan (pages 15-17) and in this report (Sections III. C. 2. (1)



and Ill. D. 3.), existing Medical Center parking is ample to meet the ordinance requirement for Phase II off-street parking.

#### F. Public Need

The Bess Kaiser Medical Center, along with every other hospital in the United States, is reviewed on a periodic basis by the Joint Commission on Accreditation of Hospitals (JCAH) and other organizations and agencies, including American College of Surgeons, American College of Pediatrics and American College of Emergency Room Physicians, to insure the best available medical facilities. Significant deficiencies and problem areas may result in the loss of accreditation for a hospital which can be a serious detriment. Several of the Phase II activities are directed toward fulfilling past recommendations for improvements and changes. Other Phase II activities are directed toward alleviating future problem areas.

Because of the importance of Bess Kaiser to North Portland as well to the Health Plan membership, accreditation must be maintained and recommendations and requirements of the various organizations and agencies must be met. The continued operation and accreditation of Bess Kaiser is the basis for the direct employment of over 700 persons and medical care for approximately 20,000 persons each year.

2. Upgrading and modernization of the hospital structure - Since 1959 (21 years ago) when Bess Kaiser Hospital first opened (main building and north tower only), there has been relatively little renovation, remodeling or updating of the original hospital structure. Phase II will act to extend the useful life of BKMC another 20 years. Due to the intensity of use and the continuous nature of the use it is

difficult to conduct preventative maintenance to keep the physical plant in its best condition. Twenty years of life for a hospital structure is considerably more taxing than the same period for other uses. Additionally, the structural makeup of a hospital is very complex to the point that upgrading and modernization is costly, time consuming and very difficult to schedule. An outdated or under-equipped hospital lacks efficiency of use or space utilization.

The importance of Phase II is found in the interior reorganization rather than the actual external addition of 7,455 square feet. However, because of the structure of the hospital, the addition of 7,455 square feet of floor area is extremely necessary. Various hospital functions which will occupy the space must remain stationary, relying on expansion for more space rather than moving to a large area elsewhere in the hospital.

For these reasons there is a need to complete the planned Phase II project. Bess Kaiser Medical Center will then operate more efficiently for the benefit of the patients while remaining a viable part of the neighborhood providing employment and economic stability in the area. The improved levels of services will satisfy the requirements and recommendations of the various organizations and agencies and will provide all patients, Health Plan and non-Plan alike, with the best available medical care and facilities.

APPENDIX A

## TRAFFIC PATTERN

### Trip Generation

The amount of traffic generated by the Bess Kaiser Medical Center was estimated on the basis of number of hospital beds, amount of staff and the current parking space usage pattern. These parameters were related to similar usages at the Kaiser Sunnyside Medical Center where recent traffic counts were made for a one week period. It was not possible to measure the traffic entering and leaving the Bess Kaiser Medical Center parking lots because there is not sufficient space to install traffic counters and obtain reliable counts.

It is estimated that the hospital generates approximately 3500 vehicle trips on a typical weekday. That is, 1750 vehicles enter the hospital parking lots daily and a like number leave the lots. The following table indicates the weekday and peak hour estimated driveway volumes.

These driveway volumes were forecast to 1982 and 1984 on the basis of the expected amount of staff during those years.

These forecasts are also shown on the attached table.

Because there is expected to be a very small change in employment and use of the Medical Center, the traffic generation is estimated not to change substantially in the future.

## ESTIMATED SITE GENERATED TRAFFIC

## Driveway Volumes

	<u>1980</u>	<u>1982</u>	<u>1984</u>
24-Hour Two-Way	3500	3600	3500
7-8 am Enter	125	130	125
7-8 am Exit	40	45	40
3-4 pm Enter	135	135	135
3-4 pm Exit	170	175	170
4-5 pm Enter	90	90	90
4-5 pm Exit	215	220	215

### Distribution of Site Traffic to Street System

The distribution of the hospital generated traffic to the surrounding street system was made on the basis of the patients' residence zip code. Figure 1 indicates this distribution by percent on the major streets serving the site.

It is estimated that 19 percent of the hospital traffic approaches from the north on Greeley Avenue and 81 percent from the south. Approximately eight percent of the traffic is estimated to approach from the east over I-5 at Killingsworth Street. Seventy-six percent is estimated to approach via Going Street from the east.

Figure 2 indicates the assignment of the weekday (24-hour two-way) traffic to the major streets serving the hospital.

### Adjacent Street Traffic

Traffic volume measurements made by the Portland Bureau of Traffic Engineering in August, 1979 indicate that N. Greeley Avenue carries approximately 13,100 vehicles per day (two-way volume) between the hospital and Going Street. As previously indicated, it is estimated that 2800 of these 13,100 vehicles per day is hospital traffic. Therefore, hospital generated traffic accounts for approximately 21



percent of the total traffic on Greeley Avenue between the hospital and Going Street.

It is estimated that the volume on Greeley Avenue between the hospital and Killingsworth Street is approximately 11,000 vehicles per day (two-way). The hospital traffic is estimated to account for 700 of these vehicles or approximately six percent of the total traffic on Greeley Avenue between the hospital and Killingsworth Street.

#### Conclusions

It is concluded that the hospital generated traffic on the major streets serving the hospital will not change substantially as a result of the hospital modifications.

#### PUBLIC TRANSPORTATION SERVICE

TRI-MET provides public transportation service on N. Greeley Avenue passing the hospital. As indicated on Figure 3, the No. 2 Line passes the hospital between St. Johns and downtown Portland. Service is provided at 15 to 20 minute

intervals during the midday with increased service during commute hours.

A second bus line, the No. 71 passes the hospital enroute between Swan Island and Northeast Portland. Service is provided at 45 minute intervals during the day. Service is provided between 6:00 am and 6:20 pm.

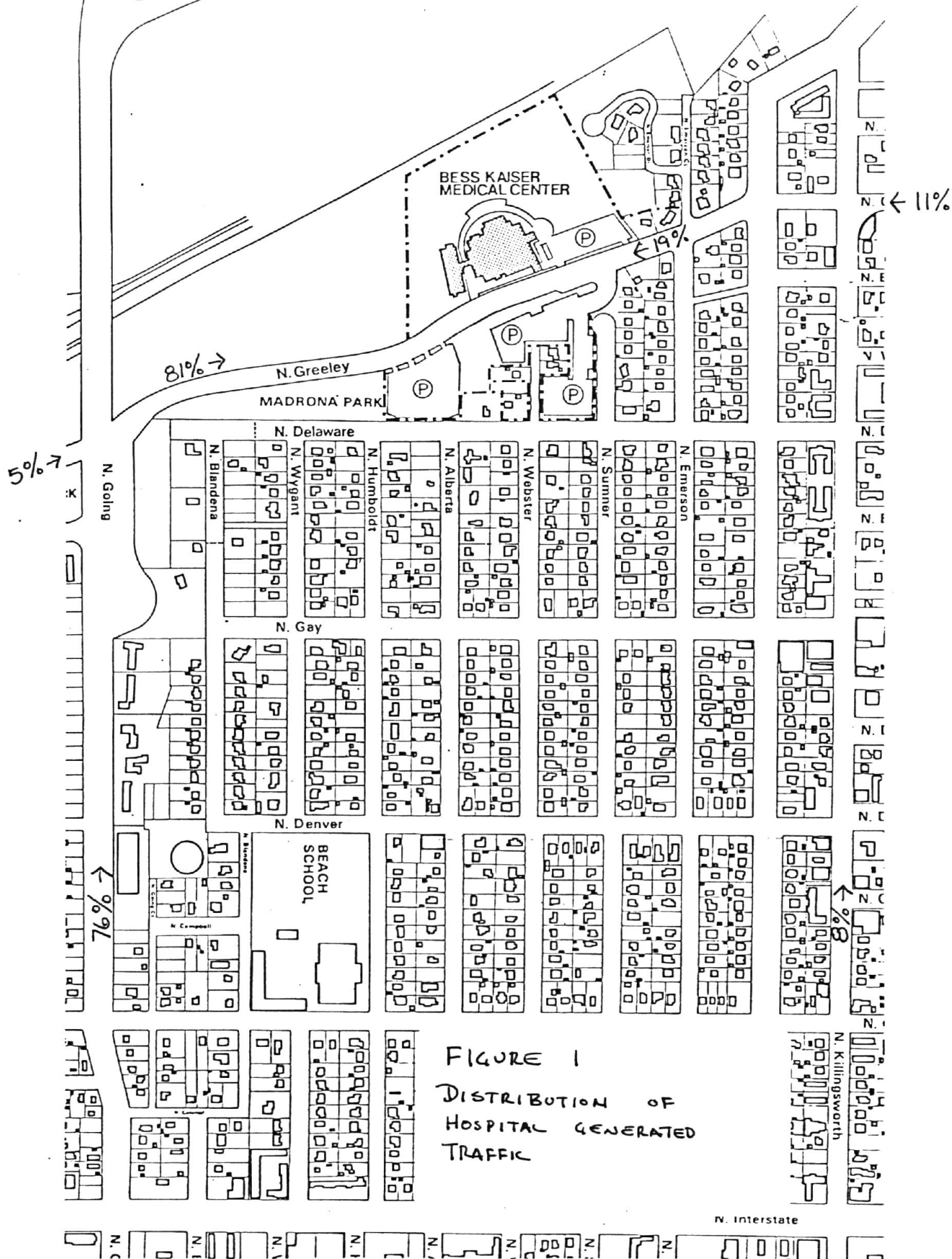


FIGURE 1  
DISTRIBUTION OF  
HOSPITAL GENERATED  
TRAFFIC

200

N. Goling

0092



BESS KAISER  
MEDICAL CENTER

2800

N. Greeley

MADRONA PARK

N. Delaware

N. Wygant

N. Blandena

N. Humboldt

N. Albert

N. Webster

N. Sumner

N. Emerson

N. Gay

N. Denver

BEACH  
SCHOOL

N. Campbell

0092

N. Killingsworth

N. Interstate

FIGURE 2  
ASSIGNMENT OF HOSPITAL  
GENERATED TRAFFIC  
(Average Weekday Volume)



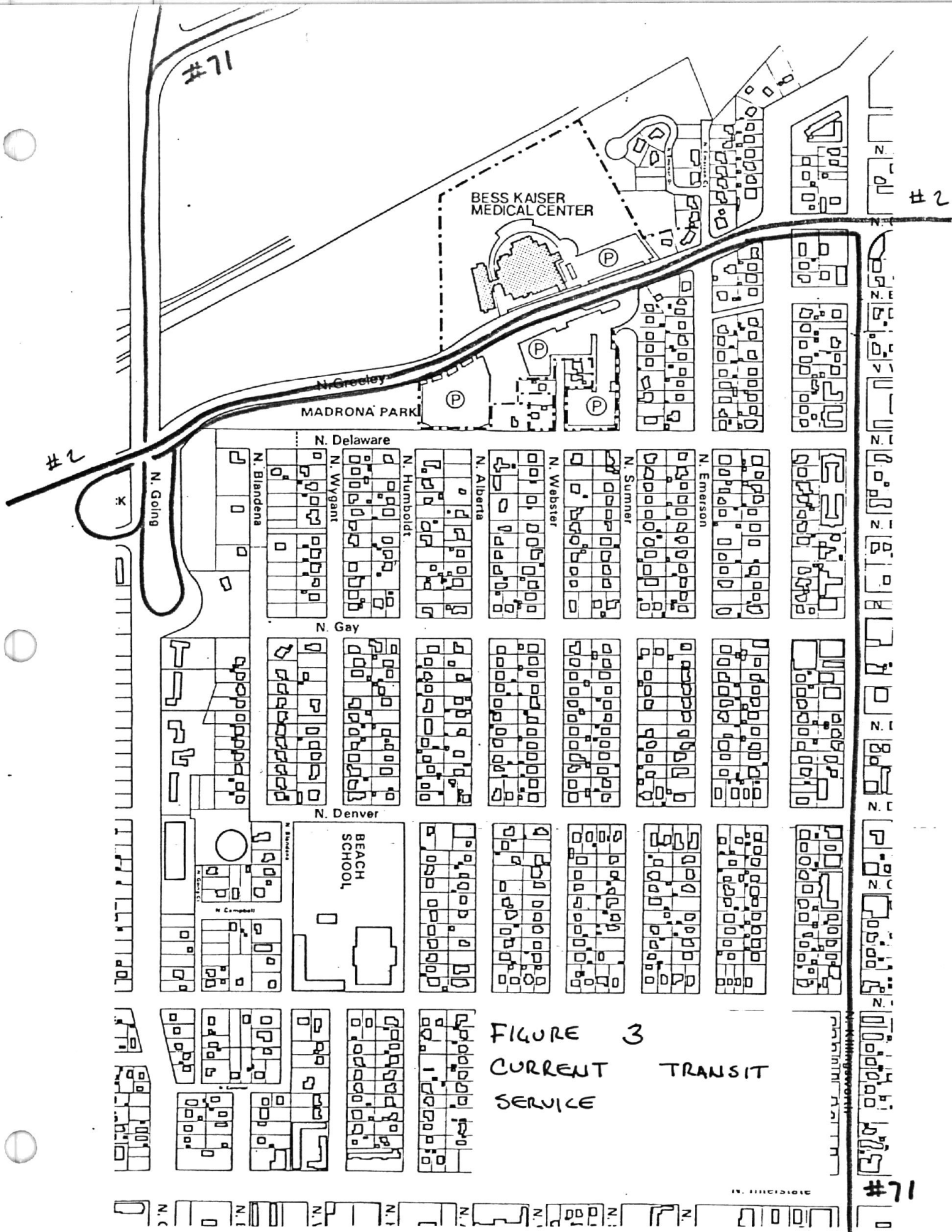


FIGURE 3  
CURRENT TRANSIT  
SERVICE