



# CITY of BOSTON

Martin J. Walsh, Mayor

To: Aisling Kerr, BPDA  
From: Zachary Wassmouth, PWD  
Date: October 22, 2019  
Subject: St. Elizabeth's Medical Center EPNF/IMPINF - Boston Public Works Department Comments

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Included here are Boston Public Works Department comments for the St. Elizabeth's Medical Center EPNF/IMPINF.

**Site Plan:**

The developer must provide an engineer's site plan at an appropriate engineering scale that shows curb functionality on both sides of all streets that abut the property.

**Construction Within The Public Right-of-Way (ROW):**

All proposed design and construction within the Public ROW shall conform to Boston Public Works Department (PWD) Design Standards ([www.boston.gov/departments/public-works/public-works-design-standards](http://www.boston.gov/departments/public-works/public-works-design-standards)). Any non-standard materials (i.e. pavers, landscaping, bike racks, etc.) proposed within the Public ROW will require approval through the Public Improvement Commission (PIC) process and a fully executed License, Maintenance and Indemnification (LM&I) Agreement with the PIC.

**Sidewalks:**

The developer is responsible for the reconstruction of the sidewalks abutting the project and, wherever possible, to extend the limits to the nearest intersection to encourage and compliment pedestrian improvements and travel along all sidewalks within the ROW within and beyond the project limits. The reconstruction effort also must meet current American's with Disabilities Act (ADA)/ Massachusetts Architectural Access Board (AAB) guidelines, including the installation of new or reconstruction of existing pedestrian ramps at all corners of all intersections abutting the project site if not already constructed to ADA/AAB compliance. Plans showing the extents of the proposed sidewalk improvements associated with this project must be submitted to the Public Works Department (PWD) Engineering Division for review and approval. Changes to any curb geometry will need to be reviewed and approved through the PIC.

The developer is encouraged to contact the City's Disabilities Commission to confirm compliant accessibility within the Public ROW.

**Driveway Curb Cuts:**

Any proposed driveway curb cuts within the Public ROW will need to be reviewed and approved by the PIC. All existing curb cuts that will no longer be utilized shall be closed.

**Discontinuances:**

Any and all discontinuances (sub-surface, surface or above surface) within the Public ROW must be processed through the PIC.

**Easements:**

Any and all easements within the Public ROW associated with this project must be processed through the PIC.

**Landscaping:**

The developer must seek approval from the Chief Landscape Architect with the Parks and Recreation Department for all landscape elements within the Public ROW. Program must accompany a LM&I with the PIC.



**PUBLIC WORKS DEPARTMENT**

Boston City Hall • 1 City Hall Sq Rm 714 • Boston MA 02201-2024

**CHRIS OSGOOD** • Chief of Streets, Transportation, and Sanitation

Phone (617) 635-2854 • Fax (617) 635-7499



**Street Lighting:**

The current street lighting in the vicinity appears to be wired overhead. This project shall include installing appropriate underground conduit systems for all street lights adjacent to the project site.

The developer must seek approval from the PWD Street Lighting Division, where needed, for all proposed street lighting to be installed by the developer, and must be consistent with the area lighting to provide a consistent urban design. The developer should coordinate with the PWD Street Lighting Division for an assessment of any additional street lighting upgrades that are to be considered in conjunction with this project. All existing metal street light pull box covers within the limits of sidewalk construction to remain shall be replaced with new composite covers per PWD Street Lighting standards. Metal covers should remain for pull box covers in the roadway.

**Roadway:**

Based on the extent of construction activity, including utility connections and taps, the developer will be responsible for the full restoration of the roadway sections that immediately abut the property and, in some cases, to extend the limits of roadway restoration to the nearest intersection. A plan showing the extents and methods for roadway restoration shall be submitted to the PWD Engineering Division for review and approval.

**Project Coordination:**

All projects must be entered into the City of Boston Utility Coordination Software (COBUCS) to review for any conflicts with other proposed projects within the Public ROW. The Developer must coordinate with any existing projects within the same limits and receive clearance from PWD before commencing work.

**Green Infrastructure:**

The Developer shall work with PWD and the Boston Water and Sewer Commission (BWSC) to determine appropriate methods of green infrastructure and/or stormwater management systems within the Public ROW. The ongoing maintenance of such systems shall require an LM&I Agreement with the PIC.

Please note that these are the general standard and somewhat specific PWD requirements. More detailed comments may follow and will be addressed during the PIC review process. If you have any questions, please feel free to contact me at [zachary.wassmouth@boston.gov](mailto:zachary.wassmouth@boston.gov) or at 617-635-4953.

Sincerely,

**Zachary Wassmouth**  
Chief Design Engineer  
Boston Public Works Department  
Engineering Division

CC: Para Jayasinghe, PWD



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## MEMORANDUM

**TO:** Aisling Kerr, Project Manager  
**FROM:** John (Tad) Read, Senior Deputy Director for Transportation & Infrastructure Planning  
Manuel Esquivel, Senior Infrastructure & Energy Planning Fellow  
Ryan Walker, Smart Utilities Program - Associate  
**DATE:** October 25, 2019  
**SUBJECT:** Saint Elizabeth's Medical Center Parking Garage –  
**Smart Utilities Comments – PNF**

### **Comments and request for additional information:**

Thank you for your Smart Utilities Checklist submission. Below are our comments and requests for additional information. Please update the Checklist using the edit link and/or send any diagrams to [manuel.esquivel@boston.gov](mailto:manuel.esquivel@boston.gov).

- **Green Infrastructure:**
  - Please provide a diagram indicating where Green Infrastructure will be located and indicate the capacity associated with each installation. (See Checklist Part 4)
- **Smart Street Lights:**
  - Please provide a Smart Street Lights diagram (See Checklist Parts 6 and 7) that indicates the following:
    - The main electricity loop that will power the lights and where the connection between this loop and the electricity in the right of way will occur.
    - "Shadow" conduits running next to the main electricity loop, with capacity for the additional electricity and fiber to comply with Smart Streetlight capability; and hand holes for access to these conduits.
    - Where these conduits would connect in the future to electricity and fiber in the right of way.
- **Smart Utility Standards:**
  - Please provide a diagram indicating where proposed utility infrastructure laterals will be located, showing how utilities will be extended into each building from the right of way. This includes: water, sewer, drainage, electric, gas and telecom. (See Checklist Part 7)
  - As discussed during the Scoping session, we would like for you to consider incorporating pulling the utilities for the proposed clinical building during construction of the parking garage to minimize road openings and include this in the diagram requested above.

If you have any questions regarding these comments or would like to arrange a meeting to discuss the policy please feel free to contact Manuel Esquivel.

### **Context:**

On June 14, 2018 the BPDA Board adopted the [Smart Utilities Policy for Article 80 Development Review](#). The policy (attached) calls for the incorporation of five (5) Smart Utility Technologies (SUTs) into new Article 80 developments. Table 1 describes these five (5) SUTs.

Table 2 summarizes the key provisions and requirements of the policy, including the development project size thresholds that would trigger the incorporation of each SUT.

In general, conversations about and review of the incorporation of the applicable SUTs into new Article 80 developments will be carried out by the BPDA and City staff during every stage (as applicable) of the review and permitting process, including a) prefile stage; b) initial filing; c) Article 80 development review prior to BPDA Board approval; d) prior to filing an application for a Building Permit; and e) prior to filing an application for a Certificate of Occupancy.

In conjunction with the SUTs contemplated in the *Smart Utilities Policy*, the BPDA and City staff will review the installation of SUTs and related infrastructure in right-of-ways in accordance with the *Smart Utility Standards* (“SUS”). The SUS set forth guidelines for planning and integration of SUTs with existing utility infrastructure in existing or new streets, including cross-section, lateral, and intersection diagrams. The *Smart Utility Standards* are intended to serve as guidelines for developers, architects, engineers, and utility providers for planning, designing, and locating utilities.

In order to facilitate the review of integration of the SUTs and the SUS, the BPDA and the Smart Utilities Steering Committee has put together a *Smart Utilities Checklist* that can be filled out and updated during the review process. Please fill out the parts of the *Checklist* that apply to your project. Make sure to review this *template* first, before submitting the *Smart Utilities Checklist*.

After submission, you will receive:

1. A confirmation email with a PDF of your completed checklist. Please include a copy of this document with your next filing with the BPDA.
2. A separate email with a link to update your initial submission. Please use ONLY this link for updating the Checklist associated with a specific project.

Note: Any documents submitted via email to Manuel.Esquivel@Boston.gov will not be attached to the PDF form generated after submission, but are available upon request.

The *Smart Utilities Policy for Article 80 Development Review*, the *Smart Utility Standards*, the *Smart Utilities Checklist*, and further information regarding the *Boston Smart Utilities Vision* project are available on the project’s website: <http://www.bostonplans.org/smart-utilities>.

Manuel Esquivel, BPDA Senior Infrastructure and Energy Planning Fellow, will soon follow up to schedule a meeting with the proponent to discuss the *Smart Utilities Policy*. For any questions, you can contact Manuel Esquivel at manuel.esquivel@boston.gov or 617.918.4382.

**Table 1** - Summary description of 5 Smart Utility Technologies (SUTs) included in the *Smart Utilities Policy for Article 80 Development Review*

Smart Utility Technology (SUTs)	Summary Description
<b>District Energy Microgrid</b>	Energy system for clusters of buildings. Produces electricity on development site and uses excess “heat” to serve heating/cooling needs. By combining these two energy loads, the energy efficiency of fuel consumed is increased. The system normally operates connected to main electric utility grid, but can disconnect (“island”) during power outages and continue providing electric/heating/cooling needs to end-users.
<b>Green Infrastructure</b>	Infrastructure that allows rainwater to percolate into the ground. Can prevent storm runoff and excessive diversion of stormwater into the water and sewer system.
<b>Adaptive Signal Technology</b>	Smart traffic signals and sensors that communicate with each other to make multimodal travel safer and more efficient.
<b>Smart Street Lights</b>	Traditional light poles that are equipped with smart sensors, wifi, cameras, etc. for health, equity, safety, traffic management, and other benefits.
<b>Telecom Utilidor</b>	An underground duct bank used to consolidate the wires and fiber optics installed for cable, internet, and other telecom services. Access to the duct bank is available through manholes. Significantly reduces the need for street openings to install telecom services.

**Table 2** - Summary of size threshold and other specifications for the 5 SUTs advanced in the *Smart Utilities Policy for Article 80 Development Review* (**Note: This table is only for informational purposes. Please refer to the complete *Smart Utilities Policy for Article 80 Development Review* to review the details.**)

	Article 80 Size Threshold	Other specifications
<b>District Energy Microgrid</b>	>1.5 million SF	Feasibility Assessment; if feasible, then Master Plan & District Energy Microgrid-Ready design
<b>Green Infrastructure</b>	>100,000 SF	Install to retain 1.25" rainfall on impervious areas (Increase from 1" currently required by BWSC)
<b>Adaptive Signal Technology</b>	All projects requiring signal installation or improvements	Install AST & related components into the traffic signal system network

<b>Smart Street Lights</b>	All Projects requiring street light installation or improvements	Install additional electrical connection & fiber optics at pole
<b>Telecom Utilidor</b>	>1.5 million SF of development, or >0.5 miles of roadway	Install Telecom Utilidor

**Boston Water and  
Sewer Commission**



980 Harrison Avenue  
Boston, MA 02119-2540  
617-989-7000

October 23, 2019

Ms. Aisling Kerr, Project Manager  
Boston Planning & Development Agency  
One City Hall Square, 9 Floor  
Boston, MA. 02210

Re: St. Elizabeth's Medical Center Parking Garage, Brighton  
Project Notification Form/Institutional Master Plan Notification Form

Dear Ms. Kerr:

The Boston Water and Sewer Commission (Commission) has reviewed the Project Notification Form/Institutional Master Plan Notification Form (PNF/IMPNF) for the proposed project located at 253 Washington Street in the Brighton neighborhood of Boston. This letter provides the Commission's comments on the PNF/IMPNF.

The Project Site is approximately 42,450 sf and is bounded by Washington Street on the southeast, the SEMC Medical Campus on the north, and the St. Gabriel's Monastery site on the southwest, which is currently being redeveloped for residential use. The Project Site currently contains a paved surface parking lot and an undeveloped area that slopes downward from a high point on the SEMC Medical Campus at St. Joseph's Hall and the William F. Connell Pavilion, an emergency facility, to Washington Street. The proponent, Steward St. Elizabeth's Medical Center of Boston, is proposing an approximately 215,400 sf six-floor precast concrete parking garage structure that accommodates approximately 610 parking spaces, 13 of which will be handicap accessible.

For water service, the Commission owns and maintains a 12-inch DICL water main that was installed in 1989 in Washington street.

For sewer and drain service, the Commission maintains a 15-inch sanitary sewer in Washington Street. The site is served by a 15-inch and 20-inch storm drain in Washington Street.

Though both water and sanitary services will be provided for the proposed garage, the project will not include any bathrooms or facilities which will contribute to the water and sanitary sewer systems. There will be minimum to no average daily water consumption. The existing hydrant flow data is approximately 1,736 gallons per minute (gpm). A maximum sanitary discharge rate is based on the 11-year storm event and assumes during said storm the building will discharge approximately 343 gpm.



## General

1. Prior to the initial phase of the site plan development, Steward St. Elizabeth's Medical Center of Boston, should meet with the Commission's Design and Engineering Customer Services Departments to review water main, sewer and storm drainage system availability and potential upgrades that could impact the development.
2. Prior to demolition of the building, all water, sewer and storm drain connections to the buildings must be cut and capped at the main pipe in accordance with the Commission's requirements. The proponent must complete a Cut and Cap General Services Application, available from the Commission.
3. All new or relocated water mains, sewers and storm drains must be designed and constructed at Steward St. Elizabeth's Medical Center of Boston's, expense. They must be designed and constructed in conformance with the Commission's design standards, Water Distribution System and Sewer Use regulations, and Requirements for Site Plans. The site plan should include the locations of new, relocated and existing water mains, sewers and drains which serve the site, proposed service connections, water meter locations, as well as back flow prevention devices in the facilities that will require inspection. A General Service Application must also be submitted to the Commission with the site plan.
4. The proponent estimates that daily sewage will be less than DEP's 15,000 gpd threshold. However, the proponent should be aware that if during the site plan permitting process it becomes apparent that wastewater flows will be 15,000 gpd or more, the Commission will invoke the requirement that the project participate in the 4 to 1 program.

The proponent should also note that the 4 to 1 requirement must be addressed 90 days before the activation of the water service.

5. The design of the project should comply with the City of Boston's Complete Streets Initiative, which requires incorporation of "green infrastructure" into street designs. Green infrastructure includes greenscapes, such as trees, shrubs, grasses and other landscape plantings, as well as rain gardens and vegetative swales, infiltration basins, and paving materials and permeable surfaces. The proponent must develop a maintenance plan for the proposed green infrastructure. For more information on the Complete Streets Initiative see the City's website at <http://bostonconwletestreets.org/>
1. Steward St. Elizabeth's Medical Center of Boston is advised that the Commission will not allow buildings to be constructed over any of its water lines. Also, any plans to build over Commission sewer facilities are subject to review and approval by the Commission. The project must be designed so that access, including vehicular access, to the





Commission's water and sewer lines for the purpose of operation and maintenance is not inhibited.

6. It is Steward St. Elizabeth's Medical Center of Boston's responsibility to evaluate the capacity of the water, sewer and storm drain systems serving the project site to determine if the systems are adequate to meet future project demands. With the site plan, Steward St. Elizabeth's Medical Center of Boston must include a detailed capacity analysis for the water, sewer and storm drain systems serving the project site, as well as an analysis of the impacts the proposed project will have on the Commission's water, sewer and storm drainage systems.

### Water

1. Steward St. Elizabeth's Medical Center of Boston must provide separate estimates of peak and continuous maximum water demand for residential, commercial, industrial, irrigation of landscaped areas, and airconditioning make-up water for the project with the site plan. Estimates should be based on full-site build-out of the proposed project. Steward St. Elizabeth's Medical Center of Boston should also provide the methodology used to estimate water demand for the proposed project.
2. Steward St. Elizabeth's Medical Center of Boston should explore opportunities for implementing water conservation measures in addition to those required by the State Plumbing Code. In particular, Steward St. Elizabeth's Medical Center of Boston should consider outdoor landscaping which requires minimal use of water to maintain. If Steward St. Elizabeth's Medical Center of Boston plans to install in-ground sprinkler systems, the Commission recommends that timers, soil moisture indicators and rainfall sensors be installed. The use of sensor-operated faucets and toilets in common areas of buildings should be considered.
3. Steward St. Elizabeth's Medical Center of Boston is required to obtain a Hydrant Permit for use of any hydrant during the construction phase of this project. The water used from the hydrant must be metered. Steward St. Elizabeth's Medical Center of Boston should contact the Commission's Meter Department for information on and to obtain a Hydrant Permit.
4. The Commission is utilizing a Fixed Radio Meter Reading System to obtain water meter readings. For new water meters, the Commission will provide a Meter Transmitter Unit (MTU) and connect the device to the meter. For information regarding the installation of MTUs, 1-IFLW should contact the Commission's Meter Department.



## Sewage/Drainage

1. A Total Maximum Daily Load (TMDL) for Nutrients has been established for the Lower Charles River Watershed by the Massachusetts Department of Environmental Protection (MassDEP). To achieve the reductions in Phosphorus loading required by the TMDL, phosphorus concentrations in the lower Charles River from Boston must be reduced by 64%. To accomplish the necessary reductions in phosphorus, the Commission is requiring developers in the lower Charles River watershed to infiltrate stormwater discharging from impervious areas in compliance with MassDEP. Steward St. Elizabeth's Medical Center of Boston will be required to submit with the site plan a phosphorus reduction plan for the proposed development. Steward St. Elizabeth's Medical Center of Boston must fully investigate methods for retaining stormwater on-site before the Commission will consider a request to discharge stormwater to the Commission's system. The site plan should indicate how storm drainage from roof drains will be handled and the feasibility of retaining their stormwater discharge on-site. Under no circumstances will stormwater be allowed to discharge to a sanitary sewer.

In conjunction with the Site Plan and the General Service Application Steward St. Elizabeth's Medical Center of Boston will be required to submit a Stormwater Pollution Prevention Plan. The plan must:

- Identify best management practices for controlling erosion and for preventing the discharge of sediment and contaminated groundwater or stormwater runoff to the Commission's drainage system when the construction is underway.
  - Include a site map which shows, at a minimum, existing drainage patterns and areas used for storage or treatment of contaminated soils, groundwater or stormwater, and the location of major control or treatment structures to be utilized during construction.
  - Provide a stormwater management plan in compliance with the DEP standards mentioned above. The plan should include a description of the measures to control pollutants after construction is completed.
2. Developers of projects involving disturbances of land of one acre or more will be required to obtain an NPDES General Permit for Construction from the Environmental Protection Agency and the Massachusetts Department of Environmental Protection. Steward St. Elizabeth's Medical Center of Boston is responsible for determining if such a permit is required and for obtaining the permit. If such a permit is required, it is required that a copy of the permit and any pollution prevention plan prepared pursuant to the permit be provided to the Commission's Engineering Services Department, prior to the commencement of construction. The pollution prevention plan submitted pursuant to a NPDES Permit may be submitted in place of the pollution prevention plan required by



the Commission provided the Plan addresses the same components identified in item 1 above.

3. The Commission encourages Steward St. Elizabeth's Medical Center of Boston to explore additional opportunities for protecting stormwater quality on site by minimizing sanding and the use of deicing chemicals, pesticides, and fertilizers.
4. The discharge of dewatering drainage to a sanitary sewer is prohibited by the Commission. Steward St. Elizabeth's Medical Center of Boston is advised that the discharge of any dewatering drainage to the storm drainage system requires a Drainage Discharge Permit from the Commission. If the dewatering drainage is contaminated with petroleum products, I-IFLW will be required to obtain a Remediation General Permit from the Environmental Protection Agency (EPA) for the discharge.
5. Steward St. Elizabeth's Medical Center of Boston must fully investigate methods for retaining stormwater on-site before the Commission will consider a request to discharge stormwater to the Commission's system. The site plan should indicate how storm drainage from roof drains will be handled and the feasibility of retaining their stormwater discharge on-site. All projects at or above 100,000 square feet of floor area are to retain, on site, a volume of runoff equal to 1.25 inches of rainfall times the impervious area. Under no circumstances will stormwater be allowed to discharge to a sanitary sewer.
6. The Massachusetts Department of Environmental Protection (MassDEP) established Stormwater Management Standards. The standards address water quality, water quantity and recharge. In addition to Commission standards, Steward St. Elizabeth's Medical Center of Boston will be required to meet MassDEP Stormwater Management Standards.
7. The Commission requests that Steward St. Elizabeth's Medical Center of Boston install a permanent casting stating "Don't Dump: Drains to Charles River" next to any catch basin created or modified as part of this project. Steward St. Elizabeth's Medical Center of Boston should contact the Commission's Operations Division for information regarding the purchase of the castings.
1. Sanitary sewage must be kept separate from stormwater and separate sanitary sewer and storm drain service connections must be provided. The Commission requires that existing stormwater and sanitary sewer service connections, which are to be re-used by the proposed project, be dye tested to confirm they are connected to the appropriate system.
8. The enclosed floors of a parking garage must drain through oil separators into the sewer system in accordance with the Commission's Sewer Use Regulations. The Commission's Requirements for Site Plans, available by contacting the Engineering Services Department, include requirements for separators.



Thank you for the opportunity to comment on this project.

Yours Truly,

A handwritten signature in blue ink, appearing to read "John P. Sullivan", written over the printed name below.

John P. Sullivan, P.E.  
Chief Engineer

JPS/fd

cc: Harrison R. Bane, Steward St. Elizabeth's Medical Center of Boston  
M. Zlody, BED via e-mail  
M. Connally via e-mail  
C. McGuire, BWSC via e-mail  
P. Larocque, BWSC via e-mail

St. Elizabeth's Medical Center Parking Garage Public Comments via website form.xlsx

Date	First Name	Last Name	Organization	Opinion	Comments
10/25/2019	Anna	Hohler	SEMC	Support	The new SEMC parking garage will help to streamline local traffic, provide patients with parking optimization, and improve the access of the community to the hospital services. This parking expansion, part of a greater SEMC improvement project, will increase services and care that SEMC will be able to provide to the community.
10/24/2019	Tina	Ok	St Elizabeth's Medical Center	Support	I work at St Elizabeth's. At least once a week, patients will ask me where they can park. For some patients, it is very unaccommodating. They are ill and here to see a doctor; it is a struggle already to walk up the hill and now they have to make a trek because they parked on the street. I think healthcare should be easier to access. Patients should not have to jump through hoops in order to seek the care they need.
10/24/2019	Darrell	Boling	St Elizabeth's Medical Center	Support	Highly support this project, parking is a becoming an issue for our patients and visitors
10/24/2019	Ellen	MacInnis		Oppose	We are in need of a new garage at St. Elizabeth's because the company sold our parking lot to raise \$21 million which the parent company took as profit. None of that money stayed in our community. It was all used for the purchase of corporate properties elsewhere. Here at St. Elizabeth's we struggle to provide safe patient care in the face of chronic understaffing due the the hospital's failure to hire sufficient staff, a lack of basic supplies because the hospital fails to pay its vendors and unsafe working conditions due to an understaffed security force. This multi million dollar corporation relies on the public resources of the City of Boston's Police Department to protect patients and staff rather than hire enough security officers to monitor and secure private property. I object to the proposed expansion unless and until Steward abides by its commitment to provide safe care to all of our patients and a safe place to work for all of our employees. This house must be set in order before it can permitted to expand. Sincerely, Ellen MacInnis
10/24/2019	Isabel	Morais	St. Elizabeth's Medical Center	Support	My name is Dr. Isabel Morais. I am the Chair of Obstetrics and Gynecology at St. Elizabeth's Medical Center. I want to express my support of St. Elizabeth's expansion plans. I joined the medical staff at St. Elizabeth's when I left Beth Israel several years ago to come here and lead the Obstetrics and Gynecology department. I came to St. Elizabeth's because I saw the transformation happening, the investments being made, the unwavering commitment Steward had to rebuild this hospital and provide great care to the community, and I wanted to be a part of that. There's been over \$1.1 million dollars invested in our level III Neonatal Intensive Care Unit (NICU), one of only a handful of units in Boston that provides the most advanced care and technology for premature and critically ill newborns which is staffed 24 hours a day, seven days a week by MassGeneral for Children physicians. Because of Steward's investment in robotic-assisted surgical technology, we've recruited a team of extremely skilled surgeons and can offer women the option of minimally invasive surgery with the state-of-the-art da Vinci® Surgical System. This technology enables surgeons to perform even the most complex and delicate procedures through very small incisions which can have shorter recovery time, and less pain and scarring for patients. These are just some of the ways our patients benefit from the many investments that Steward has made in St. Elizabeth's and that is why I support St. Elizabeth's expansion plans. Thank you.
10/24/2019	Mary	Duffy	RN	Oppose	Dear Ms. Kerr, I have lived in Brighton all my life, 60 something years. I was born at St. Elizabeth's, where I am currently a Registered Nurse, in the OR, SEMC. I have deep concerns about Steward investing \$85 million dollars into new construction without providing the staff that St. Elizabeth's need to care for the current patients we have. The parking garage is not as important as patient safety. I have waited this long for a new garage, I can wait longer and lived with the impact of the traffic. I can't wait any more for staff to get safe patient care. I speak for myself, my husband, Joseph, and my son Michael. Sincerely, Mary Duffy, RN

St. Elizabeth's Medical Center Parking Garage Public Comments via website form.xlsx

10/23/2019	Alan	Hackford	Steward Medical Group	Support	I wish to express my strong support for the proposed expansion of St. Elizabeth's campus. As a surgeon who has been caring for patients at St. Elizabeth's for the past 16 years, there is no doubt in my mind that, over the last decade, the quality and the complexity of the care provided at SEMC has moved to a much higher level - certainly, in large part, because of the investments that Steward has made in the campus and in the medical staff. I can attest that both the medical staff and patients have benefited from the investments made in this hospital. Ten years ago, the future of St. Elizabeth's did not look promising. When Steward acquired the Caritas network of hospitals, St. Elizabeth's was in serious financial jeopardy and was unable to invest in its aging physical plant and its staff. To see the hospital thriving once again, expanding the services it provides, making improvements in the infrastructure to better serve our patients, is quite rewarding. Starting with the new Emergency Department that opened a decade ago, St. Elizabeth's has improved the efficiency, privacy and comfort of the care provided. The many investments in technologies have allowed us to quickly diagnose and treat patients more effectively. The new, state-of-the-art ICU allowed us the ability to care for patients with more advanced medical needs, allowing them to stay in their own community, close to friends and family. The new operating rooms and the many investments in the latest equipment have allowed us to recruit top surgeons from Mass. General and other academic medical centers and provide a level of high quality, affordable, accessible care here in Brighton that surpasses what is typically available in a community hospital. A strong St. Elizabeth's helps improve the health and wellbeing of the communities we serve while creating jobs for local residents. I hope that you will support the hospital's plans for continuous improvement. Sincerely, Alan (Andy) Hackford, MD
10/23/2019	Rita	Marrocchio	St Elizabeth Hospital	Support	As a long time resident of Allston/Brighton I am in approval of the parking garage and the expansion of SEMC. With the increasing traffic coming to Brighton due to the all of the condo's being built we need more medical and medical care. That being said we need to control the traffic to be safe for our children and elderly and I feel the parking garage fits those needs Sincerely, Rita Marrocchio
10/23/2019	Georgann	Bruski	Steward Health Care	Support	My name is Georgann Bruski and I would like to express my strong support for St. Elizabeth's proposed expansion plans. I left Beth Israel to come to Steward more than 10 years ago and I have seen firsthand the investments that Steward has made in St. Elizabeth's over the past decade and how the community has benefitted from this. St. Elizabeth's was on the verge of bankruptcy when Steward took over but with tens of millions of dollars in technology, infrastructure, and staffing, St. Elizabeth's has reached a new level of care and that is invaluable to the community. For example, we've gone from doing 200 open heart surgeries a year to now doing over 750. We've delivered on the promise to bring world-class, affordable and accessible care to the community. We've invested almost \$1.2million in our NICU. We've bought new CT scanners and MRI equipment. We've recruited some of the best surgeons and created many jobs for local residents. To see where the hospital is now, continuing to grow and better serve our patients, is so incredible. It is important that St. Elizabeth's continue to expand to better serve the community. Thank you.
10/23/2019	Shah	Hossain	St. Elizabeth's Medical Center	Support	It is essential for proper functioning of this hospital that this projects gets the support of the agency. This is the only way parking for hospital staff can be relocated from miles off site and decrease the woes of all commuters who provide care to this hospital.

St. Elizabeth's Medical Center Parking Garage Public Comments via website form.xlsx

10/23/2019	David	Mangan	St. Elizabeth's Medical Center	Support	I would like to share my support for the planned redevelopments plans at St. Elizabeth's Medical Center. I am a Pharmacist at the Medical Center and a resident of Natick, Ma. I have no equity stake in the company or its assets. The business needs aside, the community needs and deserves these improvements. Parking at St. Elizabeth's Medical Center is inadequate for the community. On a routine basis the parking garage for patients is at or near capacity. This problem causes a ripple effect of some routine employee parking out into offsite lots and into neighborhoods. It is not within Brighton's character to have shuttle buses for hospital operations be routine. There is no way around that there will be a garage going up on the hill, and concern about the appearance of a citadel rising from the ground is natural. I would suggest that the value of open space in front of the hospital for patients, families and the community is more valuable to the community than the unusable open space on a hill. A hill that is difficult to envision a use for other than a retail/residential structure that would provide less of a community use than parking for patients/family. The appearance and size is something that the community will need to make a decision on. The envelope work that is needed on the Clinical Research Building seems like a no-brainer. The building exterior looks beaten up and doesn't fit in. It is also worth noting that as an individual who has seen presentations about the facilities redevelopment over my 3 years with the Hospital, the need has genuinely been framed as facility improvements needed to serve the community. The improvements proposed have resonated with the employees as being sorely needed. None seem frivolous or wasteful. I am active in my local town government. If presented this scenario in my own town/neighborhood, I would vote for favorable action. Sincerely, David Mangan
10/23/2019	Ann	Sweeney	St Elizabeth's Medical Center	Support	I am writing to support the plan for a new parking garage at St Elizabeth's. It's absolutely essential for the hospital to have adequate parking for our patients, visitors as well as staff. Optimizing the facility at St Elizabeth's will also enhance patient access and care. The Brighton community and businesses will absolutely benefit from enhancing the parking and hospital facilities at St Elizabeth's. Please support the St Elizabeth's Master Plan. Thank you, Yours sincerely, Ann Sweeney, MD
10/23/2019	Paul	Smith	Steward Health Care	Support	As an employee of St. Elizabeth's and part of the leadership team at St. E's, I obviously have a vested interest and significant bias in supporting this project. That said, I wanted to mention how important this is to our patients and staff. With the growth of organization, we are ready to invest in enhancing the parking options for all of our stakeholders. This will improve the day to day operations here at the hospital for our patients and staff significantly. Thank you for your consideration.
10/23/2019	Bertrand	Jaber	St Elizabeth's Medical Center	Support	My name is Bertrand Jaber, and I am a nephrologist and the Chair of the Department of Medicine at St. Elizabeth's Medical Center. On behalf of St. Elizabeth's and the physician members of the Department of Medicine, and I am in full support of the hospital's expansion plans, namely the new parking garage to accommodate the growing needs of our staff, physicians, patients and visitors. I joined the medical staff of St. Elizabeth's in 1997 and I have witnessed the incredible turnaround that our hospital has made since becoming part of Steward Health Care. The significant investments that have been made over the past ten years, including the new emergency department, the new intensive care unit, the operating room upgrades, and new technology and staff, have allowed St. Elizabeth's to recruit outstanding physicians, grow our medical staff, and provide a new level of care to the community, truly world-class care right here in Brighton. It has been a remarkable journey from where St. Elizabeth's was 10 years ago to where the hospital is today and how it is poised for the future. The Brighton community needs a strong community hospital that provides convenient access to advanced, high-quality care that is traditionally found only at academic medical centers that deliver more expensive care. These short-term investments in renovations at St. Elizabeth's truly represent long-term investments in the community, which I hope the Brighton community will support. Sincerely, Bertrand Jaber, MD

St. Elizabeth's Medical Center Parking Garage Public Comments via website form.xlsx

10/23/2019	Peter	Papadimitriou	Pella Insurance Agency	Support	St. Elizabeth's is a mainstay of Brighton and is incredibly important to the community and its continued growth. For the employees of St. Elizabeth's, who work tirelessly to ensure the health and wellness of the surrounding community, to have to park and walk long distances is truly ridiculous. They deserve a space close to the hospital to park. Additionally, patients will benefit from the additional parking.
10/23/2019	Nick	Tsaniklides		Support	Beautiful parking garage and nice new open green spaces!
10/23/2019	Demetri	Tsaniklides		Support	I am in support. I see no issues with the plans to build.
10/23/2019	Demetri	Tsaniklides Jr.		Support	I support this project
10/23/2019	matt	verhamme		Support	I support this project
10/23/2019	Monica	Tsaniklides		Support	Brighton needs as many parking spots as it can get!
10/22/2019	Loretta	Cedrone	Brighton Allston Community Coalition	Oppose	St. Elizabeth's Hospital neglected for a long period of time to submit a master plan. When the community met with them regarding their parking needs they submitted false information regarding their parking needs and spaces available. All of this was going on as the community was dealing with the development of the St. Gabriel property. I attended many meetings regarding St. Elizabeth and the CCF proposals for the development of the property purchased from St. Elizabeth. Perhaps if St. Elizabeth had not neglected the submission of a master plan when it was due and the city had followed up on their lack of submission, they might have reserved some of the property they sold for a parking garage. Now the community has to respond to this proposal when we have 3 new developments (CCF, Avalon, Synagogue) pouring traffic onto Washington St making it untenable for residents to deal with the traffic implications as well as to access Washington Street. I do not think this neighborhood should have to assume this level of traffic and congestion resulting from poor planning on the part of the hospital and the city of Boston. I am TOTALLY opposed to this proposal and ask that the city planning authorities and St. Elizabeth go back to the drawing board and give some respect to this deluged neighborhood. The neighborhood did its part and St. Elizabeth and the city of Boston must now do tasks that both have long neglected.
10/9/2019	Anna	Leslie	Allston Brighton Health Collaborative	Neutral	On behalf of the Transportation Committee of the Allston Brighton Health Collaborative (ABHC), I submit the following comments: The Transportation Committee is composed of community organizations and residents who recognize that transportation is a strong indicator and essential component of community health. We advocate to improve equity, access, and safety of all mobility modes in Allston and Brighton. Since 2016, this committee has worked closely with residents and stakeholders to address barriers to safe, reliable and accessible mobility and has become a leading neighborhood-wide voice on multi-modal transportation interests. Increased development in Allston and Brighton is straining the neighborhood's existing infrastructure and public transit opportunities. Meanwhile the neighborhood has unique and diverse transportation needs that include the highest percentage of cyclists per total vehicles of any neighborhood in the city, according to City of Boston 2017 counts; and two of the MBTA's 15 total key priority bus routes. Developers are increasingly relying on the existing functionality of our transportation infrastructure without investing in its upkeep or growth; by building near public transit, developers can claim their housing is "transit-oriented" without contributing to its improvement. Developers are increasingly funding transportation mitigations that solely benefit their future residents or their immediate geographic area. Allston and Brighton do not exist in isolation and neither do transportation systems. The health and success of our neighborhoods depends on integrated and connected systems that provide safe, equitable, and accessible transportation to all people. We respectfully submit this list of recommendations to the Task Force to be considered as part of a developer's Transportation Demand Management Plan and as mitigations due to development:



					<p>1. Developer must first be required to work with the MBTA to improve the public transportation network before entertaining the creation or funding of an independent shuttle service. Transit improvements include things such as bus lanes, bus shelters, signal replacement to allow for transit signal priority, etc. There are seven MBTA bus stops within the project area and four specifically in the area of the proposed parking garage. (Two of these routes - the 57, 65, and 66 - all see more than 6,000 daily boardings.) To encourage other modes of transportation and mitigate impacts of development and growth, the Developer must be required to provide new bus shelters for each stop in the study area. These shelters must include seating, real-time displays, garbage disposal and bicycle parking. 2. Developer be required to partner with Boston Bikes to assess the need of at least one additional Bluebikes bike-sharing station anywhere in Allston or Brighton. 3. For any additional developments occurring near the development, developer be required to meet with those projects to assess their collective impact, needs, and mitigations. 4. The current proposal mentions bicycle parking but does not specify location or number. The Developer should be required to provide covered and secured spots and charging capabilities for bicycles and micro-mobility devices (eg. e-scooters, e-bikes) and should specify the number of spots in advance of approval. 5. The current proposal mentions carshare parking but does not specify location or number. The Developer should be required to contract with and provide space for car-sharing vehicles (e.g. Zipcar) and specify the number and location in advance of approval. 6. The current proposal mentions EV charging stations but but does not specify location or number. The Developer should be required to provide the number and location electric vehicle charging stations before approval. 7. The proposal mentions encouraging other modes of transportation but does not specify any strategies or metrics for achieving that outcome. In addition to the above, SEMC should be required to provide discounts or free monthly MBTA passes and Bluebikes yearly passes to any interested staff member. 8. Developer be required to partner with Boston Public Works to fund repavement of Washington and Cambridge Sts. In addition, the Allston Brighton Health Collaborative recommends that the Task Force increase its membership to include a representative of a neighborhood health institution. The Task Force should reflect the fact that SEMC is, first and foremost, a healthcare institution and task force membership should more accurately reflect those interests and the impacts of a healthcare institution. Thank you for considering these recommendations and adding them to the project's mitigation strategy in order to improve transportation equity and public health in Allston and Brighton.</p>
9/22/2019	Nancy	Grilk	Ms.	Oppose	<p>It is way to late for this comment. The project is already under construction. Am I missing something here? For the record, I think this parking garage is a blight on this residential street. St. Elizabeth's should not have been allowed to sell the existing garage, that was away from the streetscape, to the St. Gabriel's developers. There is no buffer for the neighborhood; no trees and no set back. This will spew automobile fumes directly into the neighborhood.</p>
9/9/2019	Paula	Dewar		Oppose	<p>As a life long resident on Washington Street in Brighton, I am opposed to the garage on Washington St for St. Elizabeth's hospital. Washington St is very congested both with vehicle traffic and cars parked all along the street. Many times I can not exit my driveway due to cars parked close to the curb blocking the line of sight. The construction from 151 to 201 Washington St has been very disruptive to my well being as it has created a large amount of dirt, noise from construction vehicles all day and night and increased traffic from Construction workers. This proposed garage adjacent to the current construction project would create the same problems. Cars are using the side streets to cut through and avoid the lights on a daily basis. I live at the corner of Nantasket Ave which is a private way....the only cars that should be coming through here are residents..that is definitely not the case! Also, I do not believe Washington St can handle an entrance or exit from this garage with an additional 600 cars! Please consider the residents in this neighborhood when making decisions that affect our quality of life.</p>



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## St Elizabeth Medical center project

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cathy munro [REDACTED]  
To: aisling.kerr@boston.gov

Sun, Oct 20, 2019 at 12:27 PM

To whom it may concern:

My Name is Catherine Munro, I am a RN working at St. E's for 44 years, I have seen a lot over these years but in the last 5-6 years it seems to be worse. I was at both meetings on the 2nd and the 15th. I did speak at the meeting on the 2nd, I was the last person speaking.

My issues that were brought up at that time was how every department in the hospital is short staffed, we don't have the supplies that are needed to take care of the patients and how they are hiring new nurses with no experience. but it is just not nurses, it is every department, non experienced personnel.

What I failed to mention was the comings and goings of senior management. Since 2015, we have had 6 CNO's, 3-4 Presidents, I don't know how many CFO's too many to count, the Heads of Departments, in every department in the hospital, most of them were hired in the last 6 months, if they have been here for a year they are very lucky. The longest length of stay is 18 months. In my department the Maternal Child Health Department, there have been 10 Directors, nurse managers or assistant nurse managers with little experience. The last nurse manager stay was 6 weeks, if that. They are not treated well by their superiors or Cooperative.

There is no consistency or stability in this hospital except for the nurses. They are the only ones that are consistent and stable in their jobs. The only reason for that is the MNA, if we did not have the MNA, I would not be in this position to write you, I would of been let go along time ago.

Nurses are not opposing this huge endeavor because we are asking for a pay raise. We are opposing this project, because we are and have been asking for many years to be staffed adequately to take care of our patients efficiently and safely. The important word here is adequately. We are asking for the equipment and supplies to take care of our patients, appropriately. We do not want to hear that supplies are in credit hold, we want the equipment. What does credit hold mean anyways????

We want consistent and stable management so we are not having the same conversations every year or 18 months, that gets us no where.

I do know that there is a need for a new garage, but when I hear that people have been injured in garage B and nothing is going to be done until after the new garage is built, that concerns me. What do we do when something seriously happens in garage B. and they have to close it, that could be a big problem. What we are asking is for Steward St. E's to fix the inside before the outside.

Thank you very much for your time and allowing us to be included in this huge endeavor.

Cathy



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## St E Garage -unacceptable in current form

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Eileen Houben <[REDACTED]>  
To: aisling.kerr@boston.gov

Fri, Oct 25, 2019 at 5:01 PM

Dear Aisling,

I was unable to attend the meeting as it was during a Jewish holiday.

I studied the plans last night, and they have to greatly improve the entry/exit options before this goes any further. In fact, there should be another public meeting during the current stage, and an extended comment period.

A major exit is onto Washington St where we already have gridlock several times a day, and this is **before** St. Gabriel's is finished and **before** the 4 other projects between St E and Bartlett Crescent are constructed &/or approved. This is unacceptable and won't work.

Perhaps the Washington St.entrance/exit can be designed for right turns only in & out, at least between 7am-9pm (that would be a stopgap workaround, which may no longer help after all the Washington corridor construction is finished) And it should NOT be the main garage entrance.

I'm also concerned about the major decrease in greenery on Washington from both St Gabriel's and the garage proposal. It's balanced elsewhere, but NOT on Washington.

There are also evidently serious concerns from employees about the St E plans and building emphasis vs patient and staff safety priorities. Again, the project should not go forward until the medical administration, the development administration, and the staff talk to each other, negotiate, and agree on priorities going forward.

Please forward this to Edward Carmody & Brandon Schrenker.

Thank you,  
Eileen Houben  
member CoreyHill Neighborhood Associations &  
member Cong. KTM 113 Washington St



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## St. Elizabeth's Proposed Expansion

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elmacinnis@aol.com <[REDACTED]>  
To: aisling.kerr@boston.gov

Thu, Oct 24, 2019 at 11:59 AM

Ms. Kerr,

Thank you for your invaluable guidance and work with the BPDA on St. Elizabeth's Proposed Expansion plans. I've attached our petition objecting to the proposed expansion in the face of serious, pervasive and ongoing threats to patient safety related to chronic understaffing, lack of supplies and unsafe working conditions.

It is my sincere hope that the BPDA give careful consideration to their decision on an outward expansion in the face of dire internal conditions.

Warmest regards,

Ellen MacInnis, RN  
Staff Nurse  
St. Elizabeth's Medical Center

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 **Expansion Petitions 10.24.19.pdf**  
2633K

PLEASE



Massachusetts Nurses Association

SIGN

Steward / St. Elizabeth's executives have announced plans for a \$100 million expansion of SEMC. We agree with this statement of the MNA Committee at St. Elizabeth's:

"We oppose this plan. Nurses at St. Elizabeth's all know the executives haven't been staffing the hospital to properly care for the number of patients we have today. There isn't evidence that they will be willing or able to properly staff for an expanded number of patients each day. At the same time, they have been closing services at other Steward hospitals. Why in the world would we do anything but oppose this plan?"

NAME: (PRINT) SIGNATURE UNIT JOB TITLE

HOPE KELLMAN Hope Kellman MBU RN/LACTATION CONSULTANT

Emily Hannum E. Hannum MBU RN

Phyllis Buckley Phyllis Buckley MBU RN

Megaw Buchanan M. Buchanan MBU RN/Lact. Consultant

Katarina Tatten K. Tatten MBU RN

Colleen Harris Colleen Harris MBU RN

Jill Oreefe J. Oreefe MBU RN

Christine Connelly C. Connelly MBU RN

Sharon Brangwyn S. Brangwyn MBU RN

Catherine Munro C. Munro MBU RN

Cathi Langran C. Langran MBU RN





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NAME: (PRINT)                      SIGNATURE                      UNIT                      JOB TITLE

Cassandra Chery      C Chery      ICU      Staff Nurse

Sheryl Burns      Sheryl Burns      ICU      RN

Theresa Trach      Theresa Trach      ICU      RN

Michelle Rose      Michelle Rose      ICU      RN

Ana Bonfim      Ana Bonfim      ICU      RN

Blank lines for additional signatures and names.





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NAME: (PRINT)	SIGNATURE	UNIT	JOB TITLE
Stephanie Hinswark	<i>[Signature]</i>	Cath Lab	Staff RN
Laura Morrison	<i>[Signature]</i>	ICU	Staff RN
Paul Kelly	<i>[Signature]</i>	ICU	RN
Jessica Henderson	<i>[Signature]</i>	ICU	RN
Susan Goggin	<i>[Signature]</i>	ICU	RN
Victoria Bird	<i>[Signature]</i>	ICU	RN
Mia Mazzaferro	<i>[Signature]</i>	ICU	RN
Ashley Monteiro	<i>[Signature]</i>	ICU	RN
Lisa Adams	<i>[Signature]</i>	ICU	RN
Susan McLean	<i>[Signature]</i>	ICU	RN
Pamela Moy	<i>[Signature]</i>	ICU	RN
Herardine Michel	<i>[Signature]</i>	ICU	RN
Romane Regis	<i>[Signature]</i>	ICU	RN
Linda Le	<i>[Signature]</i>	ICU	RN
Gianna Gatto	<i>[Signature]</i>	ICU	RN
Sophia Karasavas	<i>[Signature]</i>	ICU	RN





Massachusetts Nurses Association

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NAME: (PRINT)                      SIGNATURE                      UNIT                      JOB TITLE

Denise Gofsky Denise Calmy float Registered Nurse

Isabella Cordeiro  float Registered Nurse

Meghan Schutz Meghan Schutz, RN Float

Blank lines for additional signatures.







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NAME: (PRINT)	SIGNATURE	UNIT	JOB TITLE
Lisa Haggie	<i>Lisa Haggie</i>	M6	RN
Cori Henderson	<i>Cori Henderson</i>	M6	RN
Kimberly Hammer	<i>Kimberly Hammer</i>	M6	RN
Pascal Dalusna	<i>Pascal Dalusna</i>	Float	RN
Nick Spitz	<i>Nick Spitz</i>	M6	RN
Anne Marie Reed	<i>Anne Marie Reed</i>	M6	RN
Sabrina Castor	<i>Sabrina Castor</i>	M6	RN
Linda McSheffrey	<i>Linda McSheffrey</i>	M6	RN
Erin McWeeney	<i>Erin McWeeney</i>	M6	RN
Erika Driscoll	<i>Erika Driscoll</i>	M6	RN
Pragya Shrestha	<i>Pragya Shrestha</i>	M6	RN
Dan Le	<i>Dan Le</i>	M6	RN
Eva Hughes	<i>Eva Hughes</i>	M6	RN
Monica Moschella	<i>Monica Moschella</i>	M6	RN
Susan Ablin	<i>Susan Ablin</i>	M6	RN



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NAME: (PRINT)	SIGNATURE	UNIT	JOB TITLE
Julie Carey	<i>Julie Carey</i>	Secap	RN
Anna Kibicki	<i>Anna Kibicki</i>	Secap	Unit Secretary
Martina Hunt	<i>M Hunt</i>	float	RN
Mary Brosnihan	<i>Mary Brosnihan</i>	Secap	RN
Margalo Petrus	<i>Margalo Petrus</i>	Secap	RN
Barbara Utata	<i>Barbara Utata</i>	SECAP	RN
Edward O'Brien	<i>Edward O'Brien</i>	SECAP	RN
Emily Harless	<i>Emily Harless</i>	Floor Pool	RN
Ashley Greene	<i>Ashley Greene</i>	SECAP	RN
Karen Rider	<i>Karen Rider</i>	SECAP	RN
Nicole Surette	<i>Nicole Surette</i>	Secap	RN
Jeanne JEMINE BIGGOTT	<i>Jeanne Jemine Biggott</i>	SECAP	RN
Lisa Christensen	<i>Lisa Christensen</i>	SECAP	RN



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NAME: (PRINT) SIGNATURE UNIT JOB TITLE

NAME: (PRINT)	SIGNATURE	UNIT	JOB TITLE
Kristen Delcakt	<i>Kristen Delcakt</i>	MB	RN
Elena Calvo	<i>Elena Calvo</i>	MB	RN
Maria Perez	<i>Maria Perez</i>	Float	RN
Maria Charbonnier	<i>Maria Charbonnier</i>	MB	RN
Susan Kelly	<i>Susan Kelly</i>	MB	RN
KRISTEN MULCAHY	<i>K. Mulcahy</i>	MB	RN
Heather Foley	<i>Heather Foley</i>	MB	RN
Emily Clifton	<i>Emily A Clifton</i>	MB	RN
Lauren Meredith	<i>Lauren Meredith</i>	Float	RN
Lauren Yetman	<i>Lauren Yetman</i>	MB	RN
Michelle Grossman	<i>Michelle Grossman</i>	Float	RN
Princesse Telamon	<i>Princesse Telamon</i>	Float	RN
Eileen Shells	<i>Eileen Shells</i>	MB	RN
Energy Schmidt	<i>Energy Schmidt</i>	MB	RN
Aloua Naluboga	<i>Aloua Naluboga</i>	Float	RN



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NAME: (PRINT)                      SIGNATURE                      UNIT                      JOB TITLE

Christine Kenney	<i>Christine Kenney</i>	Pretest	RN
Karen Bruno	<i>Karen Bruno</i>	Pretest	RN
Christine Moriarty	<i>CMoriarty</i>	PAT	RN

*CK*





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NAME: (PRINT)	SIGNATURE	UNIT	JOB TITLE
Keriaký Karasavas	Keri Karasavas	7E	RN
Tracey Mann	Tracey Mann	7E	RN
Jan Chou	Jan Chou	7E	RN
Jeannie Kamberidis	Jeannie Kamberidis	7E	RA
Monique Ayala	Monique Ayala	7E	RN
Catherine Archambeault	Catherine Archambeault	7E	RN
Makie Gertha Chery	Makie Gertha Chery	7E	CNA
Cassandra Raymond	Cassandra Raymond	7E	RN
[Signature]	[Signature]	7E	RN
Kara McSweeney	Kara McSweeney	7E	RN
Margaret Doherty	Margaret Doherty	7E	RN
Anderl Lara	Anderl Lara	7E	RN
Marie Clafin	Marie Clafin	7E	RN
Colleen Coddner	Colleen Coddner	7E	RN



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NAME: (PRINT)                      SIGNATURE                      UNIT                      JOB TITLE

Shaina Parry      Shaina Parry      7E                      RN

Amy Ivy      Amy Ivy      7E                      RN

Heather Taczka      Heather Taczka      7-EAST                      RN

Gerlie Razzin      Gerlie Razzin      7-EAST                      RN

Victoria Abner      Victoria Abner      7E                      RN

William Lee      William Lee      7E                      RN

Hannah Prince      Hannah Prince      7E                      RN

Zindy Townsend      Zindy Townsend      7E                      RN

~~Lauren Donahue~~      ~~Lauren Donahue~~      ~~7E~~                      ~~RN~~

Lauren Donahue      Lauren Donahue      7E                      RN

Elizabeth McHugh      Elizabeth McHugh      7E                      RN

Sarah Wiedeman      Sarah Wiedeman      7E                      RN

Pamella Duncan      Pamella Duncan      7E                      RN

Michele Beauregard      Michele Beauregard      7E                      RN



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NAME: (PRINT)                      SIGNATURE                      UNIT                      JOB TITLE

Kim Wheelock	Kim Wheelock	GI	Staff RN
Nancy DiPelle	Nancy DiPelle	GI	RN
Celeste Rorden	Celeste Rorden	GI	Staff
Jacqui Della	Jacqui Della	GI	RN
Joanne Keavody	Joanne Keavody	GI	RN
Megan Saly	Megan Saly	GI	RN
Cathy Jones	Cathy Jones	GI	RN
Lynne Johnston	Lynne Johnston	GI	RN
Core Trappett	Core Trappett	GI	RN

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Steward / St. Elizabeth's executives have announced plans for a \$100 million expansion of SEMC. We agree with this statement of the MNA Committee at St. Elizabeth's:

"We oppose this plan. Nurses at St. Elizabeth's all know the executives haven't been staffing the hospital to properly care for the number of patients we have today. There isn't evidence that they will be willing or able to properly staff for an expanded number of patients each day. At the same time, they have been closing services at other Steward hospitals. Why in the world would we do anything but oppose this plan?"

NAME: (PRINT) SIGNATURE UNIT JOB TITLE

Andrea Cotter Ashley RN

Mary Bridges MBridges 6West PCA

Diane Santisi RN

Caroline Fahey C Fahey RN

Lisa Manuso 6West RN - Would be very interested to learn the plan for staffing (Recruitment AND Retention) as well as the plan to make certain we have enough supplies + equipment to care for the patients because we certainly do NOT have what we need right now.

Elizabeth Messina Elizabeth Messina 6W RN

Laurie Kelley Laurie Kelley 56W RN

Karissa Ramkissoon KR 6W RN

Barbara Macdonald Barbara Macdonald 6W RN

Caitlin Sullivan Caitlin Sullivan 6W RN





Martin J. Walsh  
Mayor

## **Article 37 Interagency Green Building Committee**

November 6, 2019

Harrison R. Bane  
Steward St Elizabeth's Medical Center of Boston  
280 Washington St  
Boston, MA

Re: 253 Washington Street, St Elizabeth's Hospital - Garage Addition - Article 37 Green Building – Comment Letter

Dear Harrison R. Bane,

The Boston Interagency Green Building Committee (IGBC) has reviewed the Institutional Master Plan Notification Form (IMPNF) submitted in conjunction with this project for compliance with Boston Zoning Article 37 Green Buildings.

Due to this project being a parking structure, LEED certification is not available. The PNF indicates that the project will use the Green building Certification Institute's Parksmart rating system as an alternative. The project commits to pursuing Parksmart Bronze as the certification level. The IGBC accepts the rating system selection.

The project team is encouraged to demonstrate leadership in sustainability with a Parksmart Silver certification level or better. Additionally, the IGBC requests that project team contact utility and state DOE representatives as soon as possible and to maximize utility and state-funding for energy efficiency and clean/renewable energy support of the project.

### **Greenhouse Gas Emissions**

In support of the City of Boston's Resiliency and GHG emissions reduction goals including Carbon Neutral Boston 2050 the IGBC requests that the project pursue installing renewable energy generating photovoltaic panels on the project's roof. Such a system may assist the project achieving as much as 12 points under the Parksmart Certification Measure C16 – Renewable Energy Generation. Please provide the IGBC a solar study for this project detailing potential solar yields, costs, energy cost savings, and payback period.

Please follow up within three weeks (of the date of this letter) with your BPDA Project Manager in responding to IGBC comments and the provision of the requested information and items.

Article 37 Interagency Green Building Committee

Please let me know if you have any questions or if I can be of any assistance.

Sincerely,

Benjamin Silverman, LEED AP: BD+C  
On behalf of the Interagency Green Building Committee

Cc: Aisling Kerr, BPDA