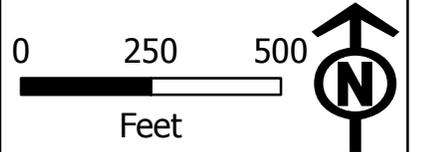


14-059AFDP  
 Amended Final Development Plan  
 Dublin Springs  
 7625 Hospital Drive





City of Dublin

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**PLANNING AND ZONING COMMISSION**

**RECORD OF ACTION**

**SEPTEMBER 4, 2014**

The Planning and Zoning Commission took the following action at this meeting:

**1. Perimeter West PCD, Subarea 2 - Dublin Springs Hospital 7625 Hospital Drive  
14-059AFDP Amended Final Development Plan**

Proposal: An amended final development plan to permit a 10-foot, galvanized steel, security fence around the rear portion of the property. The site is located at the southwest corner of the intersection of Perimeter Drive and Hospital Drive.

Request: Review and approval of an amended final development plan application under the provisions of Zoning Code Section 153.050.

Applicant: Brian Zets, Esq. for Garry Hoyes of Dublin Springs.

Planning Contact: Tammy Noble-Flading, Senior Planner.

Contact Information: (614) 410-4649, tflading@dublin.oh.us

**MOTION:** John Hardt moved, Todd Zimmerman seconded, to table this amended final development plan application at the request of the applicant.

**VOTE:** 5 – 0.

**RESULT:** The Amended Final Development Plan was tabled.

**RECORDED VOTES:**

Chris Amorose Groomes	Yes
Richard Taylor	Absent
Amy Kramb	Absent
John Hardt	Yes
Todd Zimmerman	Yes
Victoria Newell	Yes
Amy Salay	Yes

**STAFF CERTIFICATION**



Tammy Noble-Flading  
Senior Planner

Mr. Zimmerman amended page 2, mid-way down, the sentence attributed to him, change the word "a 185 units where" to "when the road network".

Ms. Amorose Groomes amended page 19, 3<sup>rd</sup> paragraph down, attributed to her, to change "comment" to take "public comment".

Mr. Hardt moved, Mr. Zimmerman seconded, to accept the August 7, 2014 meeting minutes as amended. The vote was as follows: Ms. Amorose Groomes, yes; Ms. Newell, yes; Ms. Salay, yes; Mr. Zimmerman, yes; and Mr. Hardt, yes. (Approved 5 – 0)

Ms. Amorose Groomes said there are two cases on the agenda this evening. She said Case 3, Liggett Cosgray case was postponed prior to the meeting. She said the Indian Run Meadows case was on the consent agenda and said Case 2 would be heard first as consent and the agenda order will be Case 2, and then 1. She briefly explained the rules and procedures of the Planning and Zoning Commission. [The minutes reflect the order of the published agenda.]

**1. Perimeter West PCD, Subarea 2 - Dublin Springs Hospital 7625 Hospital Drive  
14-059AFDP Amended Final Development Plan**

The Chair, Ms. Amorose Groomes, introduced this application for an amended final development plan to permit a 10-foot, galvanized steel, security fence around the rear portion of the property. The site is located at the southwest corner of the intersection of Perimeter Drive and Hospital Drive. The Commission is the final authority on this application.

Ms. Amorose Groomes swore in anyone intending to address the Commission on this case.

Tammy Noble-Flading said the proposal includes two requests:

1. To increase the amount of area to be fenced in to the rear of the building.
2. To increase the height of the existing fence from a six foot fence to a ten foot fence.

Ms. Noble-Flading said the site is 8.9 acres with frontage on Perimeter Drive and Hospital Drive and is zoned Planned Commercial District, as part of the Perimeter West Planned District, Subarea 2. She said the site contains a 55,000-square-foot building with parking in the center of the site with approximately 115 parking spaces. She said there is a walking path with associated landscaping and patios attributed to the different wings of the facility. She said the focus of this discussion is the existing 6-foot wood privacy fence located to the rear of the building.

Ms. Noble-Flading said the applicant is proposing to increase the fenced area expanding the entire length of the building which is approximately 330 feet. She said it would be located 10 feet further back on the property, than the existing fence, and would expand the entire length of the building. She stated that the fence would have internal sections of fence that created four separate areas of fenced in areas that would provide individual outdoor space for different populations of the facility. She said the proposed location encroaches into a building setback by 10 feet. She said the existing six-foot wood privacy fence will be removed along with the existing stone columns.

Ms. Noble-Flading said the applicant is proposing a 10-foot galvanized black powder coated fence extending the perimeter of the building. She said that Planning has worked with the applicant as well as analyzed the proposal and believes that the extensive height of the proposed fence is not appropriate in an office setting. She said the other issue that they have discussed with the applicant is safety concerns. She said that Planning believes that there are other viable options to ensure safety of the patients. She concluded that the review criteria is not met and is recommending disapproval based on those analyses.

Ms. Amorose Groomes asked if the applicant would state their name for the record.

Brian Zets, Attorney, Isaac Wiles, 2 Miranova Place, Columbus, Ohio, said he is here on behalf of the applicant and has two other representatives from Dublin Springs. He said if they are thinking that they have never allowed a 10 foot fence in the City of Dublin that the answer is that the City of Dublin has never had a facility like Dublin Springs inside the City of Dublin. He said they are unique and what they do is unique, the patients that they serve is unique and based on the uniqueness of their services the patients that they provide services to they believe this application is necessary and should be approved.

Mr. Zets said Dublin Springs Hospital is a 72 bed facility in with 3 wings each housing a different type of patient with various types of disorder, such as substance abuse, self-inflicted harm, and psychiatric care. He said they usually run at a strong occupancy rate usually occupying 62 beds. He said the ratio is one nurse for every four patients and if combined with staff plus nurses that ratio is two staff and/or nurses for every one patient. He said for patients that possess a strong likelihood of harm to themselves the ratio is one to one.

Mr. Zets said the outside component is important to what they do, 80 percent of patients are voluntarily admitted and the other 20 percent is involuntarily admitted from hospitals or "pink slipped" and ordered to attend the facility. He said that the Dublin facility is one of the first 4 facilities that were built in the country and at the time the facility was planned and constructed, their safety needs were not fully known. He said the data shows that the 10 foot fence is the best method to safety secure patients from leaving the facility without properly checking out. He said since the facility has opened 12 people have left the facility, some have walked out of the gate and others have used the stone gazebo to scale the fence.

Mr. Zets said the proposal is to include the entire rear portion of the perimeter to take advantage of the other spaces behind each of the units with security gates in-between the sections so that staff can have access to the areas without having to go through the building. He said the Dublin Police had done an analysis of security report last October which indicated they need to further investigate the requirements of having the fence gates locked. He said that the Fire Department has required that the fence gates not be locked.

Mr. Zets said they are requesting a higher fence that will be located 10 feet beyond the existing fence with internal separation for each wing of the facility. He said the Dublin Police Department asked that the facility investigate an alarm on the gates of the fence and consider changing the type of fence that makes it more difficult to climb and be open, to provide more visibility. He said the fence is an aesthetically pleasing and is less visible than the existing privacy fence. He said the Police suggested making the outdoor furniture more secure to prevent moving it to aid in climbing the fence. He said they are proposing to relocate the fence

10 feet beyond the existing location to separate the fence from the existing gazebo which has also been used to scale the fence.

Mr. Zets said that based on their operations, they believe that the 10-foot fence is the best option for patient safety and for the safety for the Dublin residents. He said sometimes the patients do decide they want to check out on their own and do make it outside the facility and there was one instance where a patient found a bike and was caught riding toward Delaware. He said the fence would alleviate safety concerns and provides needed security for the facility.

Ms. Amorose Groomes invited public comment. [Hearing none] She closed public comment for the Commission discussion to commence.

Ms. Newell asked what options were discussed with the applicant to provide security.

Ms. Noble-Flading said one of the first things they identified was locking the gates so that the fenced in area would be secure. She said they also talked about a fence that would be a more appropriate height but eliminate the columns which is primarily used to scale the fence. She said they also discussed various methods of modifying the gazebo so that patients could not use the building to climb the fence or provide separation between the gazebo and the fence.

Ms. Newell asked if they had talked about using tracking devices on their patients.

Ms. Noble-Flading said they did not discuss tracking devices but that they had discussed providing additional staff that would aid in monitoring the patients when they are in the outdoor area.

Mr. Zimmerman said he had the same questions of how patients are leaving the facility without being observed by staff and concluded that if a patient wants to scale a 10-foot fence they will. He said they said staff is always outside when patients are on the patio and it is difficult to understand how a staff member does not observe the patients climbing the fence.

Mr. Hardt said several questions have been answered, but wondered if Alan Perkins would comment on the locked gate.

Fire Marshall, Alan Perkins, 6200 Eiterman Road, said this facility went through a variance with the Ohio Board of Building Appeals to allow them to go through two different locked doors before exiting the building. He said the Building Code does not permit going through more than one locked door within a building before exiting the building. He said the building meets this requirement but would prevent them from locking the gates. He said this is typical with nursing homes and memory care facilities.

Mr. Hardt said in terms of people being able to evacuate the facility in an emergency, the gates on the fence is seen as part of an egress route and would be possible with the permission from the right authorities.

Fire Marshall Perkins said it would require additional approvals and he would have to review the existing approval to provide further details.

Mr. Hardt said they have had other businesses that had needs that warrant higher fences but have required high aesthetic hurdles such as stone columns and extensive landscaping. He said if he was going to give this request consideration he would require the same things. He said he would want to see that other security measures were pursued, prior to pursuing a 10-foot fence. He said he would not consider the approving a fence that violated the building setback. He said that if the gazebo is contributing to the issues, it should be relocated or removed from the site.

Ms. Salay said she agrees with Mr. Hardt regarding the setback and removing or relocated the gazebo. She said the stone columns were used to help in scaling the fence so they may not be a viable feature for the proposed fence but the fence will need to be heavily landscaped. She also stated that a seven or eight-foot fence should be explored, before proposing a ten-foot fence. She stated that 80 percent were voluntarily committed to the facility and asked for clarification about the security needs of the patients.

Mr. Zets said each patient has to be "checked" out by the clinical psychologist when treatment is finished and the average length of stay is 8 or 9 days and headed toward another outpatient type service.

Ms. Salay asked if they know who might be a flight risk.

Mr. Zets said there is not a good way to determine which patient would be.

Ms. Salay asked how is it that the patients are able to get out with a staff ratio of one to two staff to each patient.

Mr. Zets said they have never not accounted for a patient and the ratio is usually two or three staff members to 10 to 12 patients. He stated that they typically have had issues when patients create distractions that help other patients pursue leaving the facility.

Ms. Salay said that might be an operational issue and not a fence issue. She said she is not able to approve a 10-foot fence until they have pursued all other methods of securing the facility.

Ms. Salay asked if the gates on the exterior of the fence are locked but staff have key card access that would open the gates, would that be acceptable by the building code.

Fire Marshall Perkins stated that staff having access to locked doors by way of key card access is currently a condition of their approvals.

Ms. Amorose Groomes said analyzing the review criteria of an amended final development plan and zoning for this area it appears that this facility is operating with a more incarceration type of component than what was originally approved. She said the reason they previously approved a 6-foot fence in the original application was to prevent children from walking away from a daycare facility or someone accessing a daycare facility. She said it has also been approved for facilities that have elderly patients that may become disoriented and need the security of a fence. She said the Commission has not approved a fence that is intended to prevent patients from escaping. She said this is a big shift in the operations of the facility from what was originally approved.

Ms. Amorose Groomes said the analysis is that the proposal is not consistent with the approved preliminary development plan and not consistent with the area. She said another consideration is the safety of the residents of Dublin and if this facility is perceived as a threat to the general public, a bigger fence is not the correct way to resolve the issue. She said this proposal does not lend itself to the open space consideration and lacks the appropriate landscaping to buffer the fence. She said she would not support a 10-foot fence and furthermore if the citizens of Dublin are at risk, perhaps this was not an appropriate use for the site.

Ms. Newell said she lives very close to this facility and is aware of an occasion where a police helicopter was searching the neighborhoods where they were looking for one of the patients of the facility and that event has occurred on more than one occasion and believes that security is an issue. She said it is alarming as a resident to have police helicopters looking for someone from a facility that is supposed to be there on a voluntary basis.

Ms. Newell said they have not been able to confirm that they will be locking the gates on a proposed 10-foot fence and under the Building Code there are very specific provisions for egress from institutional environments and there might be other modifications they need to make to the interior of the building that might allow them to lock the gates. She said she cannot support a modification of a 10-foot fence if it will not be permitted to be locked. She said she has worked with Police Departments with other projects and if they have stated that they would like visual access into the fence it is because they are monitoring what going on behind the fence.

Ms. Newell said they should consider using tracking devices on patients that are of flight risk. She said it is a common practice done on nursing home facilities those patients wear a simple wrist band or ankle bracelet and for the same reasons that has been stated.

Mr. Zets said he does not believe tracking devices are a viable option for their patients. He said he is not trying to alarm the community that there is an alarming number of patients that have left the facility.

Ms. Amorose Groomes said there have been 12 incidents which she believed is alarming.

Mr. Hardt said he lives in the area and witnessed the helicopters and shares the same concern that when the facility came in he was under the impression that it was a facility for treatment of people who were voluntarily seeking drug dependent treatment and it wasn't clear that there would be people that were involuntarily brought to the facility and thought this is a potential issue.

Ms. Amorose Groomes asked if the applicant had specific questions from the Commission to move forward.

Mr. Zets said that the gazebo location is regulated and thought it had to be 50 or 55 feet from the building and the location is where it has to be due to smoking regulation.

Ms. Newell asked if the regulation was an operational regulation.

Mr. Zets said it is a regulation in the Code.

Mr. Zets said they have a unique population and unique needs which warrants the request. He said they are proposing landscaping and the site has a a natural tree line behind the building that runs most of the majority of the length along the property line that provides a natural buffer and reduces the size of the fence.

Mr. Zimmerman he will not support a fence that is located in the building setback.

Ms. Amorose Groomes asked the applicant what they would like to do with their application either proceed with a vote or they could request a tabling to work out some of the issues.

Mr. Zets requested to table this application to have further discussion with staff and the Dublin Police Department.

### **Motion and Vote**

John Hardt moved, Mr. Zimmerman seconded, to table this application at the request of the applicant. The vote was as follows: Ms. Amorose Groomes, yes; Ms. Salay, yes; Ms. Newell, yes; Mr. Zimmerman, yes; and Mr. Hardt, yes. (Tabled 5 – 0)

Ms. Salay said they do appreciate the facility being in the community and it is very important that they are able to provide those services and hearing the comments there are a lot of unanswered questions and options that could be done operationally and aesthetically to have their needs met and be able to continue to be in the community.

Garry Hoyes, Dublin resident and lives at 9347 Rosetta Villa Drive, CEO of Dublin Springs, said he thought there was a misunderstanding of the Commission with the Mental Health Act. He said that even voluntary patients once admitted to the hospital can be evaluated by a psychiatrist who can hold them up to 3 court days to determine their condition. He said they are civil matters and people that are involuntary patients because they are a danger to themselves or others. He said they are the fourth facility built by Springstone and every hospital that has been constructed since the Dublin facility has had a 10-foot fence. He said the staff ratio is at 2 to 1 which includes everyone in the facility along with the employees in the business office and CFO Management type employees with the nursing staff at basically 1 to 1, but that number is split between 3 shifts and having maybe 22 staff members total on hand through the night shift. He said he is happy to work with staff on the fence options and is committed to providing landscaping so that the fence will not be seen.

Ms. Newell recused herself prior to this case introduction, saying her husband represents the homeowners association. [Ms. Newell left the room.]

## **2. Indian Run Meadows PUD-Shops on Muirfield-Shade on Muirfield**



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**PLANNING AND ZONING COMMISSION**

**RECORD OF ACTION**

**JULY 19, 2012**

The Planning and Zoning Commission took the following action at this meeting:

**2. Perimeter West, Subarea 2 – Dublin Springs 12-035AFDP 7625 Hospital Drive Amended Final Development Plan**

Proposal: A second 36-square-foot monument sign at the Perimeter Drive entrance to the Dublin Springs facility in Subarea 2 of the Perimeter West Planned Commerce District, located on the southwest corner of the intersection of Perimeter Drive and Hospital Drive.

Request: Review and approval of an amended final development plan under the Planned District provisions of Zoning Code Section 153.050.

Applicant: Springstone Properties LLC, represented by API, LLC, Eric Goodman.

Planning Contact: Tammy Noble-Flading, Senior Planner

Contact Information: (614) 410-4649, tnoble-flading@dublin.oh.us

**MOTION:** To approve this Amended Final Development Plan application because the proposal complies with the approved Preliminary Development Plan and is consistent with existing development in the area, with two conditions:

- 1) The applicant will be required to obtain an easement encroachment permit prior to the approval of a building permit;
- 2) The applicant will work with Planning to determine the appropriate light fixtures and landscape material to effectively screen the proposed light fixture.

\* Garry Hoyes, Dublin Springs, agreed to conditions.

**VOTE:** 7 – 0.

**RESULT:** This Amended Final Development Plan application was approved.

**RECORDED VOTES:**

Chris Amorose Groomes	Yes
Richard Taylor	Yes
Warren Fishman	Yes
Amy Kramb	Yes
John Hardt	Yes
Joseph Budde	Yes
Victoria Newell	Yes

**STAFF CERTIFICATION**  
  
 Tammy Noble-Flading  
 Senior Planner

**2. Perimeter West, Subarea 2 – Dublin Springs  
12-035AFDP**

**7625 Hospital Drive  
Amended Final Development Plan**

Chair Chris Amorose Groomes introduced this application requesting review and approval of an amended final development plan for a second 36-square-foot monument sign for the Dublin Springs facility in Subarea 2 of the Perimeter West Planned Commerce District located on the southwest corner of the intersection of Perimeter Drive and Hospital Drive. She swore in those intending to speak in regards to this application including Garry Hoyes, 5699 Briardale Court, Dublin, representing Dublin Springs, and City representatives.

Tammy Noble-Flading presented this application for a facility that was reviewed and approved by the Commission in 2010. She explained that the site is under construction for a single-story, 55,115-square-foot hospital facility with associated parking. Ms. Noble-Flading said the main entrance is on Hospital Drive, however the site also has frontage on both Hospital Drive and Perimeter Drive. She said the Commission originally approved a monument sign along the entranceway from Hospital Drive, and a similar monument sign is proposed with this application.

Ms. Noble-Flading said the Commission had previously discussed whether the one existing sign along Hospital Drive would be sufficient because the hospital receives limited visits to the facility. She said during the construction, the applicants have concluded that there is significant traffic along Perimeter Drive in addition to confusion resulting from the facility's proximity to the Dublin Methodist Hospital. She said for these reasons, the applicants are requesting a second sign at the Perimeter Drive entry.

Ms. Noble-Flading said the proposed sign is located in a landscaped island perpendicular to Perimeter Drive and extends several feet into a utility easement. She explained that Engineering has reviewed the proposed sign location and will permit the sign to encroach into the utility easement with the condition that an encroachment form be filed with the City prior to the approval of a sign permit. She said the applicants are proposing to illuminate the sign to improve its visibility; however, the ground-mounted fixtures are required to be completely screened. She said that the applicants have proposed perennials for screening, but Planning recommends that the applicant work with Planning to appropriately screen the fixtures year round to properly meet the Code requirement.

Ms. Noble-Flading presented a rendering of the existing sign, which is a 2-foot high, 18-foot long brick wall with pin-mounted lettering stating, 'Dublin Springs.' She said a blue logo identifying the facility has been added. She said the proposed sign was slightly different from the existing sign in the sense that the proposed sign will not be curved like the existing sign, will be shorter in length, and will not have a boulder. Ms. Noble-Flading said all other aspects of the sign are similar to the existing sign along Hospital Drive.

John Hardt asked if the Hospital Drive signs will be illuminated. Ms. Noble-Flading stated that the sign on Hospital drive will not be illuminated.

Ms. Noble-Flading presented photos of the site from Perimeter Drive and Hospital Drive. She concluded that Planning had reviewed this amended final development plan application and found that it met both the required criteria of the City of Dublin Zoning Code and the approved Preliminary Development Plan, and therefore approval is recommended with two conditions:

- 1) The applicant will be required to obtain an easement encroachment permit prior to the approval of a building permit.
- 2) The applicant work with Planning to determine the appropriate landscape material to use along the base of the sign to effectively screen the proposed light fixture and meet the intent of the Zoning Code.

Garry Hoyes, representing Dublin Springs, said that Ms. Noble-Flading had covered everything in her presentation.

Ms. Amorose Groomes invited public comments regarding this application. [There were none.]

Mr. Hardt commented that if the applicants decide to illuminate the sign located along Hospital Drive, they should use the same light fixtures and landscape materials as the proposed sign along Perimeter Drive.

Joe Budde commented that the development was beautiful and was turning out to be a very nice facility.

Ms. Amorose Groomes asked what landscape material Planning would consider to be appropriate to screen the light fixtures on a sign as short as the one proposed. She suggested it might be more appropriate to revise the second condition to require that the ground-mounted light fixtures be well fixtures instead, because there is such limited space for a fixture above the ground without blocking the sign. She said she presumed the proposed fixtures would protrude three to six inches above the ground, which would almost cover half the sign. She did not think it was the right direction to get plant material to cover the fixtures because there are few plantings that grow more than four inches but less than 12 inches high.

Ms. Noble-Flading offered to work with the applicants to find something more appropriate that is lower but still provides the desired illumination of the sign.

Victoria Newell suggested that the condition be modified to allow a combination of appropriate light fixtures and landscaping be part of the review by Planning

Ms. Amorose Groomes said that the Black Eyed Susan listed on the plant list was not appropriate because they spread. She suggested there needs to be something more contained, like Yellow Coreopsis.

### **Motion and Vote**

Mr. Taylor moved to approve this Amended Final Development Plan application because the proposal complies with the approved Preliminary Development Plan and is consistent with existing development in the area, with two conditions:

- 1) The applicant will be required to obtain an easement encroachment permit prior to the approval of a building permit.
- 2) The applicant work with Planning to determine the appropriate light fixtures and landscape material to effectively screen the proposed light fixture.

Mr. Hoyes agreed to the modified conditions.

Mr. Fishman seconded the motion. The vote was as follows: Ms. Amorose Groomes, yes; Ms. Kramb, yes; Mr. Hardt, yes; Mr. Budde, yes; Ms. Newell, yes; Mr. Taylor, yes; and Mr. Fishman, yes. (Approved 7 – 0.)

### **3. BSC Sawmill Center Neighborhood District – Piada – Master Sign Plan Review**

**12-042MPR**

**6495 Sawmill Road  
Minor Project Review**

Chair Chris Amorose Groomes introduced this application requesting review and approval of a Master Sign Plan to permit two signs that exceed the maximum area permitted by the Code for an existing restaurant



PLANNING AND ZONING COMMISSION  
RECORD OF ACTION  
MAY 19, 2011

2.

Perimeter West, PCD, Subarea 2 - Dublin Springs Hospital  
11-024FDP

7625 Hospital Drive  
Final Development Plan

**MOTION #2:** To approve this final development plan which includes a parking reduction because it complies with all applicable review criteria and the existing development standards in the area, with ten conditions:

- 1) That a detail of the proposed light fixtures and poles be provided prior to the submission of a building permit.
- 2) That the location of the directional sign be indicated as part of the sign permit.
- 3) The monument sign is modified to be a total of 50 square feet in size, with the maximum height restricted to six feet.
- 4) The bollards be painted to match the proposed buildings and be administratively approved by Planning, prior to the approval of a building permit.
- 5) Planning is requiring that the solid fence, proposed to the west of the building, be constructed from wood materials. The proposal should also include stone columns, to coordinate with the proposed building.
- 6) The pavement width of the entry boulevard drive aisle be reduced to 11 feet per lane, subject to approval by Planning and Engineering.
- 7) That the applicant work with Planning to ensure that the wall-mounted air conditioning units are appropriately screened with landscaping.
- 8) That the applicant install landscaping at the terminus of the joint access drive, subject to Planning approval.
- 9) That the applicant revise the plans to indicate the column spacing of eight to ten feet prior to building permit submittal.
- 10) That the applicant work with Planning to find alternative plant material to the proposed Japanese blood grass.

\* Eric Goodman, API, Architectural Property Investments, representing the applicant agreed with the conditions.

**VOTE:** 5 - 0.

**RESULT:** This Final Development Plan was approved.

STAFF CERTIFICATION



Tammy Noble-Flading  
Senior Planner

**1. Perimeter West, PCD, Subarea 2 – Dublin Springs Hospital  
11-024FDP**

**7625 Hospital Drive  
Final Development Plan**

Ms. Amorose Groomes introduced this final development plan application which involves the construction of a 55,115-square-foot, one-story, specialty hospital, and associated site improvements on an 8.98-acre parcel located on the southwest corner of the intersection of Hospital Drive with Perimeter Drive. She explained that this application requires a motion for the text modification and one for the final development plan. She said with the final development plan, the Commission may approve a reduction in parking which should be stated as part of the motion.

Ms. Amorose Groomes swore those wishing to speak in regards to this application, including the applicant, Kevin Burns, Architectural Property Investments, their representatives, Eric Goodman, and City representatives.

Tammy Noble-Flading presented this proposal for a specialty hospital within the Perimeter West PCD. She said the Planned Commerce District preceded the Planned Unit Development District process as a form of review for planned districts in the city. The PCD process resulted in preliminary development plans that contained more general standards for development and more detailed information is required at the final development plan stage.

She said the vacant site has two access points, one on Perimeter Drive, and one on Hospital Drive. Ms. Noble-Flading said the site is flat without any natural or environmental components. She said Hospital Drive will be the primary entranceway. She said an access drive will come off Hospital Drive and extend to the rear of the building to address comments from the Washington Township Fire Department. Ms. Noble-Flading said that a sign will identify the entrance point. She said the applicants are proposing a curved boulevard extending to the front of the building with a circular drive for patient drop-off.

Ms. Noble-Flading said the proposed single-story building will be located to the rear of the site and explained that the building location is important to the design of the site in an effort to provide a secure and quiet environment for the recovery process of the patients. She said that there will be two nodes of parking located to the forefront of the building. Ms. Noble-Flading said a patio area located south of the entranceway will provide a dining facility for the patients. She said an outdoor rear yard space for the patients will include a gardening area and a gazebo. She stated that both the outdoor dining area and the rear yard space will be fenced for the privacy and security of the patients. Ms. Noble-Flading said there are a retention basin along Hospital Drive that will provide stormwater management for the site and a walking path along Perimeter Drive. She said two accessory buildings are proposed, a maintenance building and a trash dumpster enclosure located on the southern portion of the site. She said the trash dumpster enclosure had bollards on the southern part of the building. She explained that those bollards have been conditioned to be reviewed by Planning to ensure that they are an appropriate color and height.

Ms. Noble-Flading said the architectural elevations provided by the applicants were in the packets. She said the applicants were primarily introducing an exterior façade entailing two color tones of brick, and the base of the building will be stone. She said the building façade replicates the design of the Dublin Methodist Hospital and has elements including an angled roofline and natural materials that provide a more modern exterior that continues to utilize natural materials. Ms. Noble-Flading said the applicants are proposing a sign that would complement the exterior of the building.

Ms. Noble-Flading explained that this application requires a waiver for the two fences that will exceed the maximum height permitted by Code. The Code restricts fences to four feet, in height, and the applicant is proposing two six-foot fences. She described the materials and appearance of the two fences and explained that the additional height of the fences is to provide security for the patients.

Ms. Noble-Flading presented a rendering of the landscape plans provided by the applicant. She said the applicants have worked diligently with staff to provide a landscaping plan that meets and exceeds our requirements. She said they are proposing perimeter landscaping around the building and interior and perimeter landscaping around the parking areas. She said the applicants have focused on additional landscaping treatments along two additional areas of the site. This includes the walking path and the pond. Ms. Noble-Flading said included in the application, light poles will provided throughout the parking areas and sensitively located so that the poles will not negatively impact the proposed vegetation. She stated that they have not provided elevations of the light fixtures of poles, and they will be required to provide that information before the approval of a building permit.

Ms. Noble-Flading said that there is a provision in the text that allows for a parking waiver. She said that the parking calculations for the site are based on the two uses proposed, inpatient or hospital care and outpatient or medical office use. She said the two calculations result in a requirement of 320 parking spaces for the site. She said the applicant has provided information to the Commission regarding the basis of the request. Ms. Noble-Flading stated that the parking requirement for hospitals is 2 ½ spaces per bed based on the expectation of visitors in a traditional hospital setting. She stated that patients at the Dublin Springs Hospital will be undergoing a recovery process and visitors are discouraged during that time. She stated that furthermore, the hospital specializes in adolescents and geriatrics which are typically not prone to driving.

Ms. Noble-Flading presented a graphic of the sign proposed along Hospital Drive. The sign will have a brick façade that would match the colors of the building. She said the text 'Dublin Springs Hospital' will be included on the sign and that the sign will be non-illuminated. She said a boulder is proposed to emphasize the sign.

Ms. Noble-Flading said that Planning has reviewed the text modification for the fence height and found that it meets the criteria outlined in the Code.

Ms. Noble-Flading said Planning recommends approval of the final development plan with five conditions, as modified from the original report:

- 1) That a detail of the proposed light fixtures and poles be provided prior to the submission of a building permit.
- 2) That the location of the directional sign be indicated as part of the sign permit.
- 3) The sign is modified to be a total of 50 square feet in size, with the maximum height restricted to six feet.
- 4) The bollards be painted to match the proposed buildings and be administratively approved by Planning, prior to the approval of a building permit.
- 5) Planning is requiring that the solid fence, proposed to the west of the building, be constructed from wood materials. The proposal should also include stone columns, to coordinate with the proposed building.

Pat Hammer, Chief Operating Officer of Springstone, 2514 Forest Creek Court, Lanesville, Indiana, the applicant said that Dublin Springs Hospital will provide mental health care and

substance abuse treatment to adults and adolescents. He said the types of issues they treat include mood disorders, depression, bipolar depression, anxiety disorders, and chemical dependence treatment. He said they provide a full continuum of care between inpatient, partial hospitalization, and intensive outpatient.

Eric Goodman, API Architectural Property Investments, 1517 Fabricon Boulevard, Jeffersonville, Indiana, representing Springstone stated that they had a presentation if the Commission wanted to see it.

Ms. Amorose Groomes invited public comments. (There was none.)

Todd Zimmerman stated that the boulevard proposed is 16 feet wide and his belief is that Engineering usually requires lanes between 11 and 12 feet. He would prefer to reduce the boulevard to 11 feet.

Mr. Goodman said they would be willing to reduce the lanes to 11 feet.

Ms. Amorose Groomes suggested Condition 6 be 11 feet.

Mr. Zimmerman said that he liked the architecture but was concerned with the appearance of wall HVAC units. He asked if they could be eliminated.

Kevin Burns, Architectural Property Investments, 222 South First Street, Louisville, Kentucky said the mechanical units were located in each of the sleeping rooms because Code requires that there be individual controls in each unit. He said they selected a PTech unit, which to the best unit available for noise reduction. He said the mechanical systems for the rest of the building are split systems with condenser units on the roof. He said there would not be adequate roof space to accommodate split systems for each of the sleeping rooms. He explained that the Ptech units are designed so that the exterior grill is flush with the exterior skin of the building. He said they are purposely locating thick landscaping in front of the units, so they cannot be seen.

Mr. Burns presented a slide showing the proposed wall units along the side of the building on a residential unit. He said they felt they were not creating any visual eyesore or anything that would generate noise.

Ms. Amorose Groomes asked if the windows were fixed. Mr. Burns stated they were fixed.

Jennifer Readler pointed out that the Commission is limited in what they could do to regulate the air conditioning units. She stated that the text specifically prohibited through wall HVAC units for hotels and that the restriction could not be construed for other type of uses including the proposed hospital.

Mr. Fishman said he also had concerns about the window units based on the fact that as units get older, they tend to increase their noise levels.

Mr. Goodman reiterated that they selected the quietest units available. He said it would be an ongoing maintenance issue if they became louder because of patient disturbance. He said they would carefully monitor the noise.

Mr. Fishman requested that the applicants work with staff to make sure the units cannot be seen through the landscaping.

Joe Budde complimented the developer. He said he really liked this and was pleased to see it coming into our community. He said he liked how it blended in with the existing hospital.

Amy Kramb asked how the road coming off Hospital Drive would be terminated.

Mr. Goodman said they did not have plans for landscaping the stub street. He said the adjacent property owner has the right to access the drive as well, so he did not know what their plans for development were. He said they would be willing to put shrubbery or evergreen trees at the stub to dress it up a little.

Ms. Kramb said she did not want to see a large guardrail with 'Do Not Enter' signs.

Ms. Kramb asked how often the stone fence columns would be repeated.

Mr. Goodman said the columns would be placed every eight to ten feet.

Ms. Kramb asked if the painted aluminum fence would rust.

Mr. Goodman indicated that the aluminum fence would be powder-coated and would not rust.

Ms. Kramb referred to the proposed walking trail and asked how they plan to prevent public access to it.

Mr. Goodman said outdoor activity is promoted with the type of treatment they provide, so there will be daily staff supervised walks on the trail and there will be activity on a common occurrence. He said if allowed, they would like to post it as a private trail.

Ms. Kramb said she thought it would be a good idea if they did not want the trail to be used by the public.

Ms. Husak said that type of signs would not be regulated if they were below a certain size requirement.

Ms. Noble-Flading suggested that the signs only be constructed if trespassing became an issue.

Ms. Kramb said that was fine.

Ms. Amorose Groomes asked if the boulder at the sign would be synthetic or a natural stone.

Mr. Goodman said they plan for it to be natural.

Ms. Amorose Groomes commented that the purple globe locust was fantastic and she commended them for selecting that tree.

Ms. Amorose Groomes pointed out that Japanese blood grass was on the invasive species watch list. She noted that 231 were listed on the landscape drawing. She said the grass likely would not be hardy for this area. Ms. Amorose Groomes suggested there were other perennials that would be appropriate such as pink flame garden phlox that would provide red color but would not be problematic.

Mr. Goodman agreed.

Ms. Amorose Groomes said one of the five conditions previously mentioned should be altered to address the stone columns being at eight to ten-foot intervals. She said the sixth condition would be the 11-foot drive aisles, the seventh condition would be to work with staff to coordinate the landscape screening at the HVAC openings, and the eighth condition would be the landscape treatment at the road terminals.

Ms. Amorose Groomes asked that the Commission deal with the text modification that only dealt with the fence height, and then they could return and put the conditions into the final development plan.

Ms. Amorose Groomes said this facility will be of great use in this community and serve Dublin well. She said they were very much looking forward to having the hospital in our community.

**Motion #1 and Vote – Text Modification**

Mr. Zimmerman made the motion to approve this minor text modification regarding the allowable fence height. Mr. Fishman seconded the motion.

The vote was as follows: Ms. Kramb, yes; Mr. Budde, yes; Ms. Amorose Groomes, yes; Mr. Fishman, yes; and Mr. Zimmerman, yes. (Approved 5 – 0.)

**Motion #2 and Vote – Final Development Plan**

Mr. Zimmerman made the motion to approve this final development plan which includes a parking reduction because it complies with all applicable review criteria and the existing development standards in the area, with ten conditions:

- 1) That a detail of the proposed light fixtures and poles be provided prior to the submission of a building permit.
- 2) That the location of the directional sign be indicated as part of the sign permit.
- 3) The monument sign is modified to be a total of 50 square feet in size, with the maximum height restricted to six feet.
- 4) The bollards be painted to match the proposed buildings and be administratively approved by Planning, prior to the approval of a building permit.
- 5) Planning is requiring that the solid fence, proposed to the west of the building, be constructed from wood materials. The proposal should also include stone columns, to coordinate with the proposed building.
- 6) The pavement width of the entry boulevard drive aisle be reduced to 11 feet per lane, subject to approval by Planning and Engineering.
- 7) That the applicant work with Planning to ensure that the wall-mounted air conditioning units are appropriately screened with landscaping.
- 8) That the applicant install landscaping at the terminus of the joint access drive, subject to Planning approval.
- 9) That the applicant revise the plans to indicate the column spacing of eight to ten feet prior to building permit submittal.
- 10) That the applicant work with Planning to find alternative plant material to the proposed Japanese blood grass.

Mr. Goodman agreed to the ten conditions.

Mr. Fishman seconded the motion.

The vote was as follows: Ms. Amorose Groomes, yes; Mr. Budde, yes; Ms. Kramb, yes; Mr. Fishman, yes; and Mr. Zimmerman, yes. (Approved 5 – 0.)