

*Kaiser Permanente Oakland Medical Center Phase 2 Design*

# COMMUNITY MEETING RESULTS REPORT

*Meeting convened Monday, March 3, 2007, 7:00 p.m. to 9:30 p.m.  
Mosswood Recreation Center, Mosswood Park, Oakland  
Report prepared by Bluhon Planning Group, March 12, 2008*

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## MEETING OVERVIEW

Kaiser Permanente convened the fifth meeting in a series of community workshops to present architectural design changes made since the previous workshop and to solicit community input. The agenda consisted of:

1. Welcome and Introductions
2. Presentation & Design Update
  - Medical Planning
  - Architectural & Building Massing Update
  - Building Materials Review
  - Ground Floor Plan
  - Landscape & Plaza Design Update
3. Q&A and Discussion
4. Next Steps and Adjourn.

Peter Bluhon convened the meeting, reviewed the agenda, and asked participants to introduce themselves. Michael Lane, Kaiser Permanente, summarized key topics to be presented at this meeting. Doug Olson of NBBJ Architects presented a slide show about the medical planning process and revisions to the building design. NBBJ's Brian Lin presented material samples and display boards of photographs of other Kaiser facilities. Zoe Astrakhan of Interstice Architects presented landscape and plaza design changes.

This report summarizes the community's key questions and feedback. The PowerPoint presentations are available on the project website:

<http://www.oaklandnet.com/government/ceda>.

## ATTENDANCE

Approximately 20 residents and organizational representatives attended the meeting.

### Meeting Presenters and Consultants:

*Kaiser:* Michael Lane, Judy DeVries, Jim Kautz, Cameron White, Gary Bankhead.

*NBBJ Architects:* Doug Olson, Brian Lin, Jan Kooi.

*Interstice Architects:* Zoe Astrakhan, Tim Rogan.

*City of Oakland:* Scott Gregory, Contract Planner; Gary Patton, City of Oakland.

*Bluhon Planning Group:* Peter Bluhon, Julia Kocs.

## PRESENTATION & COMMUNITY QUESTIONS & COMMENTS

*Comments are preceded with an ">" and questions/answers are indicated with a Q and A.*

### A. SUMMARY OF PAST COMMUNITY WORKSHOPS

Peter Bluhon reviewed topics discussed in the four community workshops convened in 2007.

### B. PRESENTATION OF DESIGN UPDATE

Doug Olson, NBBJ, presented key design updates for the hospital. Topics included:

- Medical planning diagrams for the first four floors and the medical tower.
- Building mass sketches
- Program stacking and program expression
- Materials diagram, including material selection criteria
- Building material concepts for Level One, Garage/CUP, Base and the Tower

Key changes in the design: the overall height of the tower is reduced 2 feet; the podium (at the tower area) is reduced from 4 to 3 stories; and the south side of the podium is stepped back.

### QUESTIONS AND RESPONSES DURING DESIGN PRESENTATION

#### *Non-Design Topics*

> *Q:* Patients may be affected by construction noise. Is this being addressed?

> *A:* This is a key consideration and will not exceed regulatory standards.

> *Q:* Will the noise from the air-handling units (on the rooftops) be mitigated?

> *A:* Yes, they will include a high standard of sound mitigation balanced by the need for energy efficiency.

> *Q:* The architectural treatment of the lower air-handling units is important.

> *A:* There will be further development on the design of the lower units.

> *Q:* Are any mitigation measures being considered to baffle acoustically the reverberation of street noise off the building façade?

> *A:* The principal tool for noise mitigation is the streetscape. Also, breaking up the façade with different design elements will help mitigate reverberation.

#### *Design & Massing*

> *Q:* How high is the new tower compared to the existing tower?

> *A:* The existing tower is 190 feet and the new one is 210.

> *Q:* How was the building height reduced by 2 feet?

> *A:* In changing the height of one of the podium floors from 17 feet to 15 feet.

> *Comment:* In the plans presented, the massing and staggered surfaces are good improvements. The building continues to appear as a large block in the middle of a

neighborhood. Consider using setbacks, relief around windows, and other variations in vertical relief and massing.

> *Comment:* The parking lot seems to intrude into the pedestrian zone and is constrained at the Broadway entrance. Broadway has historically been more inviting to pedestrians.

> *Comment:* If there is going to be a vertical light to break up this building mass, what will prevent it from causing light pollution?

### ***Materials***

> *Comment:* The use of stucco for the exterior walls of the podium presents several concerns. It can be a magnet for graffiti, which, if painted over, will not match the surrounding color; and, grit and dust (from the freeway) will lodge in the surface and be difficult to clean.

> *Response:* The project team will address the maintenance and durability of stucco as it evaluates different finish options. Stucco can range from a heavily textured finish to an almost concrete-like smooth finish that does not accumulate grit easily.

### ***Ground Level***

> *Q:* Are there elevations of the Piedmont side?

> *A:* The team has not looked at the Piedmont side yet. The materials and appearance finish will be consistent with the whole building. Elevations will be presented at a future meeting.

> *Q:* Are there going to be clinics and medical offices added?

> *A:* The Piedmont side will have a mix of services chosen with opportunities for transparency and street activation in mind.

**Participants generally supported the revised massing plan.**

## **C. BREAK**

Participants viewed material samples and exhibit boards during a 15 minute break.

## **D. COMMUNITY QUESTIONS & COMMENTS REGARDING MATERIALS & EXHIBIT BOARDS**

Eight exhibit boards consisted of photographs of other Kaiser facilities. The boards were:

- |                            |                              |
|----------------------------|------------------------------|
| 1. Patient Tower           | 5. Special Articulated Zones |
| 2. Base/Podium             | 6. Window Zone Treatment     |
| 3. Ground Floor Level      | 7. Screening                 |
| 4. Façade Breakup Strategy | 8. Detail and User Interface |

### ***Design and Massing***

> The far left images of the **Patient Tower board** are favorable and have a residential feel.

> A treatment similar to the left photo on the bottom of the **Façade Breakup Strategy board** (with the tan metal panels) could be used to break up the tower design.

- > The fact that the tower needs a grid of windows should not drive the decision to use a grid of windows for the podium.
- > The columns on the **Ground Floor Level board** are unattractive and need more detail.
- > The patient tower with the flat walls (top right photo on the **Patient Tower board**) is not attractive. The plane and height should be broken up so that it doesn't feel like a large mass.

### ***Materials and Color***

- > The smooth stucco sample is preferred over the rough sample. The two images of smooth plaster (board #5) is likely the best way to make this project successful.
- > There should be more metal panels than plaster.
- > The sheen of the metal is an important consideration: it should be dull and not too shiny.
- > Avoid the use of "peach," "salmon" or beige colors. Terra cotta is possibly acceptable.

## **E. COMMENTS ON THE LANDSCAPE DESIGN**

Zoe Astrakhan of Interstice Architects presented a revised streetscape for MacArthur and for the plaza on the south side of the hospital and emergency department.

- > *Q*: How does this plan address the Broadway strip where the transit stop will be.
- > *A*: This plan does not reflect all the transit issues.
- > *Q*: Is landscaping the podium roof and green-screening the mechanical air units still under consideration?
- > *A*: Yes.
- > *Comment*: Trees or plants that cause allergic reactions should be avoided.

**Participants generally supported the revised conceptual plan of the plaza.**

## **F. OTHER QUESTIONS**

- > *Q*: Is the sky bridge still being considered between Phase 2 and Phase 3?
- > *A*: Kaiser may apply for a sky bridge in the future.
- > *Q*: Who makes the final signage decisions?
- > *A*: The Master Sign Plan is prepared by staff and does not have to go to the City's Design Review Commission.

## **WORKSHOP ADJOURNMENT**

The meeting adjourned at 9:10 p.m.