#### RESOLUTION NO. 7879-R59

A RESOLUTION APPROVING AND AUTHORIZING THE EXECUTION OF AN AGREEMENT FOR THE CONSTRUCTION AND DEDICATION OF A STREET

BE IT RESOLVED BY THE CITY COUNCIL OF THE CITY OF URBANA, ILLINOIS, as follows:

- 1. That an Agreement between Mercy Hospital and the City of Urbana, Illinois, concerning the construction and dedication of a street, a copy of which said Agreement is attached hereto and incorporated by reference, be and the same is hereby approved.
- 2. That the Mayor of the City of Urbana, Illinois, be and the same is hereby authorized to execute said Agreement for and on behalf of the City of Urbana, Illinos:

PASSED by the City Council this /9th day of

1979.

APPROVED by the Mayor this 2 day of

1979.

## Agreement

For and in consideration of good and valuable consideration, the receipt of which is hereby acknowledged, the undersigned Mercy Hospital, a corporation, hereby agrees to construct and deducate to the City of Urbana, Illinois, a street which fully complies with the subdivision ordenances of the City of Urbana now in effect, and in compliance with the State of Illensis Standard Specifications for Roads and Bridge Construction, now in effect. The said street shall be so combucted and offered for deducation on or before Dec 31, 1981. The said street shall be boated as depicted on Appendix C to "An Overview of A street closing (Romine Street between PARK Street and Church Streets)? The said street shall be booked between Romine Street (as presently located) and wright St. and parallet to and immediately South of the railroad Right of way. Ronald R Aldrich represents that there exists a duly enacted corporation resolution Authorizing him to enter unto the agreement. Dased at choose, Lel. this 19th day of Mariel dr. Mary Phol Mater Lonal O. B. aldrick

ATTEST

# CITY OF URBANA JEFFREY T. MARKLAND, MAYOR CHARLES C. TROPPITO, ADMINISTRATIVE OFFICER

AN OVERVIEW OF A STREET CLOSING (ROMINE STREET BETWEEN PARK STREET AND CHURCH STREET)



Prepared By: Larry E. Reed, Administrator

Dept. of Community Development Services

117 W. Elm Street - Urbana, IL

In Consultation With:

Balbir Kindra, City Engineer

Engineering Department

406 S. Vine Street - Urbana, IL

Karna Hanna, Planner R.P.C. Technical Staff Urbana Plan Commission

117 W. Elm Street - Urbana, IL

## AN OVERVIEW OF A STREET CLOSING (ROMINE STREET BETWEEN PARK STREET AND CHURCH STREET)

The City of Urbana, on October 11, 1978, was requested by Mercy Hospital to vacate Romine Street between Park Street and Church Street. This portion of Romine Street is immediately east of Mercy Hospital's emergency entrance. The purpose of the vacation is to accommodate a major addition to the east of the existing hospital, including a new parking structure on the land to the east currently used as a surface parking lot.

#### CONCERNS EXAMINED

- A. Is the vacation of Romine Street between Park Street and Church Street necessary or simply convenient for expansion? Are there other options? Are there major cost differences between expansion options?
- B. Are there alternatives for keeping Romine Street open and still allowing Mercy Hospital to expand to the east? What are the costs of other alternatives?
- C. What are the effects of vacating a portion of Romine Street?
  - 1) Will the requested vacation and proposed addition isolate the neighborhood north of Mercy Hospital?
  - 2) Will the vacation of Romine Street place significant amount of additional traffic onto Goodwin Avenue and/or Wright Street thereby overloading the street (exceed design capacity)?
- D. Is the vacation of a portion of Romine Street, weighing all of the factors, in the best interest of the general public?
- E. What are the other policy considerations beyond the impact of a street closing (vacation)?

NOTE: In reviewing the Romine Street vacation request (closing between Park Street and Church Street), the assumption was made that there is a valid need for the expansion in terms of health service needs. Therefore, this examination did not analyze the validity of Mercy Hospital's proposed expansion. Further, there are local, regional, and state health service reviewing agencies which analyze proposed hospital expansions in relation to projected health service needs.

CONCERN A: Is the vacation of Romine Street between Park Street and Church Street necessary or simply convenient for expansion? Are there other options? Are there major cost differences between expansion options?

From an examination of the existing internal layout of current health service delivery functions, it is <u>clear</u> the best location or direction of physical expansion is to the east of the

existing hospital. The radiation (X-Ray) rooms, emergency room, out-patient receiving, laboratories, mortuary/pathologist, as well as major external access for visitors, emergency patient delivery, etc., are located on the east end of the existing building. To expand to the north, south, or to add additional stories (floors) would cause a situation where health services would bear no function or logical spacial relationship to each other.

Other expansion solutions are possible, especially to the north. The dollar costs involved, however, are extremely high. To expand to the north means the existing Radiation (X-Ray) Department must be relocated. A conservative dollar cost for relocating the X-Ray Department fixed equipment, lead shielding, etc., exceeds \$500,000. Other indirect costs involve down-time during relocation, inconvenience and additional time to accomplish reorganization. Further, expansion to the north causes some external site development problems in terms of parking, access to the parking structure, and walking distance for visitors, out-patients, etc..

The proposed expansion to the east does involve relocating the existing emergency area. This relocation, because of portable or easily moved equipment, is less expensive and more quickly achieved than fixed x-ray equipment. (See Appendices A.)

CONCERN B: Because Mercy Hospital's proposed expansion is more easily accomplished by constructing on the east end of the existing building, are there engineering alternatives for keeping Romine Street open for local traffic and still allowing Mercy's proposed expansion?

The answer is "yes". There are four (4) engineering solutions:

- 1) Leave Romine Street in place (at least pavement width) and allow Mercy Hospital to building over and under the street.
- 2) Excavate the existing street and construct a new street below grade (tunnel).
- 3) Construct a new street south of the Conrail Railroad right-of-way between Romine Street and Matthews Street.
- 4) Construct a new street south of the Conrail right-ofway between Romine Street and Wright Street.

The dollar costs of the above four engineering solutions are high and add a considerable dollar amount to the proposed expansion cost.

Other negative impacts of the engineering solutions are:

Solution #1 -- The major negative element of leaving the street in place and building over and under the existing street is that it will build into the expansion an internal traffic, medical supply flow problems and simply isolate various health

service delivery functions on the first floor. Staff, patient, visitors, and medical supplies on the first floor must use elevators to reach the first floor from either side of the street.

Solution #2 -- The major negative element is the dollar cost. Solution 2 is the most expensive of the four solutions.

Solutions #3 & #4 -- The major negative element involved with constructing a street south of the railroad tracks between Romine Street and Matthews Street or Romine Street and Wright Street, is the additional dollar costs which accomplishes nothing. It simply duplicates the function of existing east/west streets, north and south of the portion of Romine Street being requested to be vacated. Eads Street, Beech Street, Dublin Street, Beslin Street, Hill Street, and Park Street all connect Romine Street with Goodwin Avenue and Wright Street. (See Appendices B.)

A secondary question is, "Are the effects of closing Romine Street so adverse, that Solutions 1, 2, 3, and 4 should be seriously considered?".

CONCERN C: What are the effects of closing Romine Street?

Sub-Concern: Will the closing of Romine Street isolate the neighborhood north of Mercy to the detriment of the neighborhood?

The question is easy to answer from a technical assessment, but difficult from neighborhood reaction assessment. However, the following comments can be made from examining Mercy Hospital's proposed expansion plans:

- 1) The initial expansion will only be two (2) stories with the structural ability to add a third floor in the future.
- 2) Any street closing is a two (2) sided issue—on one (1) side, a street closing helps maintain the essence of a residential neighborhood by eliminating non—local thrutraffic; on the other side, a street closing is often perceived as detrimental to the neighborhood (limits residence access to and from the area). An unscientific analysis of this case determined that most residents had no strong opinions either way. Of those voicing opinions, there appeared to be an even split for and against the closing.
- 3) From a purely local traffic access evaluation, the area north of the Conrail Railroad tracks, west of Lincoln Avenue, south of Bradley and east of Wright Street will not be isolated. The hospital location and the proposed Romine Street vacation in relation to the area's street system is illustrated in Appendicies B. The area north of the Conrail Railroad tracks, as shown, has access to the south via Wright Street and Goodwin. The area between Wright Street and Goodwin Avenue is only three (3) blocks wide and the inconvenience of getting to the middle of the 1300 block of the east/west streets is no more than one (1) block. In fact, from a traffic safety standpoint,

access into or out of the area is much safer at the signalized intersections of Wright Street and Goodwin Avenue.

Sub-Concern: Will the vacation of a portion of Romine Street place a significant amount of additional traffic onto Goodwin Avenue, Wright Street, and/or Fairview Street, thereby, overloading those streets?

The answer is thoroughly addressed in Barton-Aschman Associates traffic studies. A critical point to remember is that Barton-Aschman Associates consistently used the worst case approach to analyze the Romine Street vacation traffic impact.

At this point, this report utilizes information contained in the Barton-Aschman Associates traffic analysis and paraphrases portions in an attempt to simplify the analysis for those reading this report.

#### CURRENT & DISPLACED TRAFFIC

The extreme case for diverted traffic (from Romine Street) would be that all of 1,100 vehicles per day (average 24-hour volume for both directions) will move either east to Goodwin Avenue or west to Wright Street. The equivalent peak-hour volume for these extreme case situations added to existing traffic on Goodwin Avenue or Wright Street would be 360 or 400 vehicles (two-way) or 180 to 200 vehicles in each direction.

If a sharp one-way directional proportion is assumed (e.g. percent of traffic in one direction equal (=) 75% of 360 or 400 vehicles) going in both directions, the one-way peak volume would be 270 or 300 vehicles per hour. These volumes would use only 2/3 of design capacity for Wright Street or 3/4 for Goodwin Avenue.

Again, in the worst case this means that no congestion would be anticipated, moreover, there will be surplus capacity to accommodate future traffic growth caused by new traffic expected to be generated by the proposed expansion (e.g. unused street capacity, 150 vehicles one-way for Wright Street, and 100 vehicles one-way for Goodwin Avenue). (See original traffic study dated September 11, 1978.)

#### FUTURE ADDITIONAL TRAFFIC

It is expected that there will be an increase in traffic generated because of additional employment, as well as an increase in patient trips to the expanded facility.

- (a) Current employment: Current daytime employment is approximately 600 persons. From experience, some ride sharing is anticipated which would result in a vehicle occupancy of around 1 to 2 persons per vehicle. On this basis, the 600 person daytime shift represents 500 automobiles generated by Mercy Hospital at current employment levels.
- (b) New employment traffic generation: Calculations are based

on the type and function of proposed additional space, and growth projections by the hospital that employment may increase by 10 percent (10%). This converts to an additional increment of vehicle generated employee traffic of 50 vehicles one-way during the daytime shift (total 550 vehicles one-way per day).

(c) Out-Patient, In-Patient/Visitor traffic generation: Barton-Aschman calculates uniform rate of 80 patients per day. During peak visitation times on weekdays, this figure may be twice as high, or 160 patients per day at the existing level. Given the expected increase in activity levels as a result of proposed expansion and a 20 percent (20%) growth factor 30 to 35 more out-patients could be generated on a peak weekday basis. In-patient visitor traffic will increase by twenty (20) additional automobiles (total 180 vehicles one-way per day).

NOTE: The above are one-way vehicle trips. For a total of 730 vehicles per day in-bound and 730 vehicles per day out-bound.

Peak hour -- In the worst case, the maximum peak hour traffic load would be approximately 80 vehicles per hour out-bound, however, not all hospital generated traffic arrives or leaves by way of Goodwin Avenue or Wright Street. Barton-Aschman estimates no more than 1/3 of those hospital generated trips use Goodwin Avenue, or no more than 25 vehicles peak hour one-way. (NOTE: The 1/3 figure appears again to be the worst case example.)

Twenty-five (25) vehicles one-way added to peak hour existing and diverted traffic on Goodwin Avenue and Wright Street (see section on current and displaced traffic on page 4 of this report) used figure--75 percent (75%) of 400 equals (=) 300 for Goodwin and 75 percent (75%) of 360 equals (=) 270 for Wright Street. Then adding all 25 vehicles (new traffic) to 300 (Goodwin Avenue), there is estimated 325 vehicles one-way peak hour traffic for Goodwin Avenue or adding 25 vehicles to 270 (Wright Street), there is estimated 295 vehicles one-way peak hour traffic for Wright Street. The maximum peak hour design capacity for Goodwin Avenue and Wright Street is approximately 400 vehicles per hour in one direction. To put it in terms of surplus peak hour capacity, 75 additional one-way peak hour vehicles are still available on Goodwin and 105 on Wright Street. (See traffic report dated December 21, 1978.)

(d) Future third floor addition: The projected impact of the third floor is harder to assess. However, assuming the same proportional allocation of square footage to out-patient services, research, and education as on the lower two floors, 39 additional vehicles per day one-way is not unreasonable to expect. This converts to not more than 10 to 15 vehicles one-way at peak hour, and can be substracted from surplus peak hour capacity of Goodwin Avenue or Wright Street. (See data dated January 4, 1979.)

analyzed in Concerns A, B, and C, in the best interest of the general public?

The negative or adverse impacts of vacation (closing) of Romine Street between Park Street and Church Street appear to be minimal in relation to isolating the neighborhood. The proposed expansion will add a significant amount of vehicular traffic to the area. However, the additional generated traffic will not use up the surplus street capacity. Therefore, the public benefit gained in expanded health services by granting the proposed Romine Street vacation appears to far exceed the impact involved for any expansion of comparable scope with or without the aspect of closing a street.

## CONCERN E: What are the other considerations beyond the impact of vacating (closing) a portion of Romine Street?

- 1) Any exchange of funds from Mercy Hospital to the City under Urbana's street vacation formula be "earmarked" for use only in Census Tract 53.
- 2) Initiate engineering study to determine the priority for improving Goodwin Avenue, with the end result being the scheduling of Goodwin Avenue for improvement under Federal Aid Urban (F.A.U.) funds.
- 3) Opening of Matthews at Conrail Railroad tracks.
- 4) Installation of pedestrian signalization at corner of Beslin Street/Fairview Street and Goodwin Avenue for King School students.
- 5) Installation of traffic signals at Fairview Street and Lincoln Avenue.
- 6) Prohibiting parking on selected east/west street to faciliate two-way traffic movement between Romine and Wright Streets and Romine and Goodwin Avenue.
- 7) Making Matthews a one-way street north between University Avenue and Park Street.

Response #1 -- Restricting the use of the money (if any) the City obtains from Mercy Hospital's closing of Romine Street, for use only in Census Tract 53, is possible. However, such a restriction has never been done before. The precedent set may not be to the best interest of all the Urbana's citizens, especially in periods of high inflation and close budget review of City operations by the Council. This suggestion should be examined more closely.

Response #2 -- Goodwin Street is presently classified for F.A.U. funding and scheduling the improvement as to its priority can be done. The critical factor in prioritizing Goodwin Street improvement is the timing of the improvement in relation to other F.A.U.

priorities such as Lincoln Avenue, Race Street, Colorado/Vine and Windsor.

NOTE: The area around and north of Mercy Hospital is bounded on three (3) sides by the major arterial streets of Bradley Avenue, Lincoln Avenue, and University Avenue. The area is completely developed, except for the north Harvey, Gregory/Wascher Drive area, which is tentatively designated as an acquisition and clearance area. Even if this clearance area is redeveloped with low density residential, and access is provided onto Goodwin Avenue, the added population of the area would not use up all the surplus capacity of Goodwin Avenue.

Response #3 -- To open Matthews Street at the Conrail Railroad tracks accomplishes very little. Further, such an opening coupled with the location of the proposed parking structure exit may adversely effect the residential area north of the railroad. If Matthews Street is opened vehicles exiting from the parking structure will be able to go north on Matthews. (NOTE: Matthews Street was closed by order of the Illinois Commerce Commission (ICC). To open Matthews would require an order from ICC.)

Response #4 -- Installation of pedestrian signalization at the corner of Beslin/Fairview Streets and Goodwin Avenue for King School is not needed. This intersection is currently controlled by 4-way stop signs, and appears to be adequate for the amount of traffic, including future vehicle traffic and pedestrian traffic increases. Additional traffic signs may be needed and if warranted will be installed.

Response #5 -- Installation of traffic signals at Fairview and Lincoln was addressed by Balbir Kindra, City Engineer, in a memo to the Community Development Commission dated December 18, 1978. The following is a quote from the referenced memo:

"There is a possibility, but no direct evidence available in the Barton-Aschman report that traffic will increase on Fairview between Goodwin and Lincoln. Recently the Engineering Department has completed an intersection design study for the intersections of Lincoln Avenue and Fairview, and Goodwin and Fairview. Projected traffic for both intersections indicate that traffic signals will not be needed at the intersection of Fairview and Lincoln till the year 1983 and at Goodwin and Fairview beyond year 2000. Of course, geometrics can be improved (increased radius, etc.) without installation of signals and we do plan to accomplish them anyway with the proposed improvement of Fairview Street.

Currently there are ten (10) intersections in the City where traffic signals are warranted today. A question might be asked about increase in traffic on Fairview after its improvement. The answer may be yes or may be no. Similar questions were raised when the 2100 block of Vine Street was open and traffic projections were made

by the computer simulation. Expected volumes were given as 1500 ADT and our experience shows it only up to 750 ADT. Temporarily traffic may and can increase because of new improvements and because of curiousity of the drivers but usually it tapers off after awhile."

Response #6 -- Prohibiting on-street parking on selected east/west streets in the area should be examined by the Engineering Department. Any action should wait until after Romine Street between Park Street and Church Street is vacated and, therefore, be based on the needs as they become evident. Eliminating the ability to park along a street in front of a person's house could be more of a concern than closing a street.

Response #7 -- The impact of traffic exiting the proposed parking structure onto Matthews Street south of Conrail Railroad appears to warrant traffic signals at the intersection of University Avenue and Matthews Street. However, traffic signals on University Avenue at either Matthews Street or Romine Street are undesirable because of the proximity to traffic signals at University Avenue and Goodwin Avenue, and Wright Street. The best way to relieve traffic from the intersection of University Avenue and Matthews is to make Matthews Street one-way north bound only between University Avenue and Park Street. It may also be necessary to install four-way stop sign controls at the intersections of Park Street and Matthews Street, and Park Street and Romine Street.

#### RECOMMENDATION

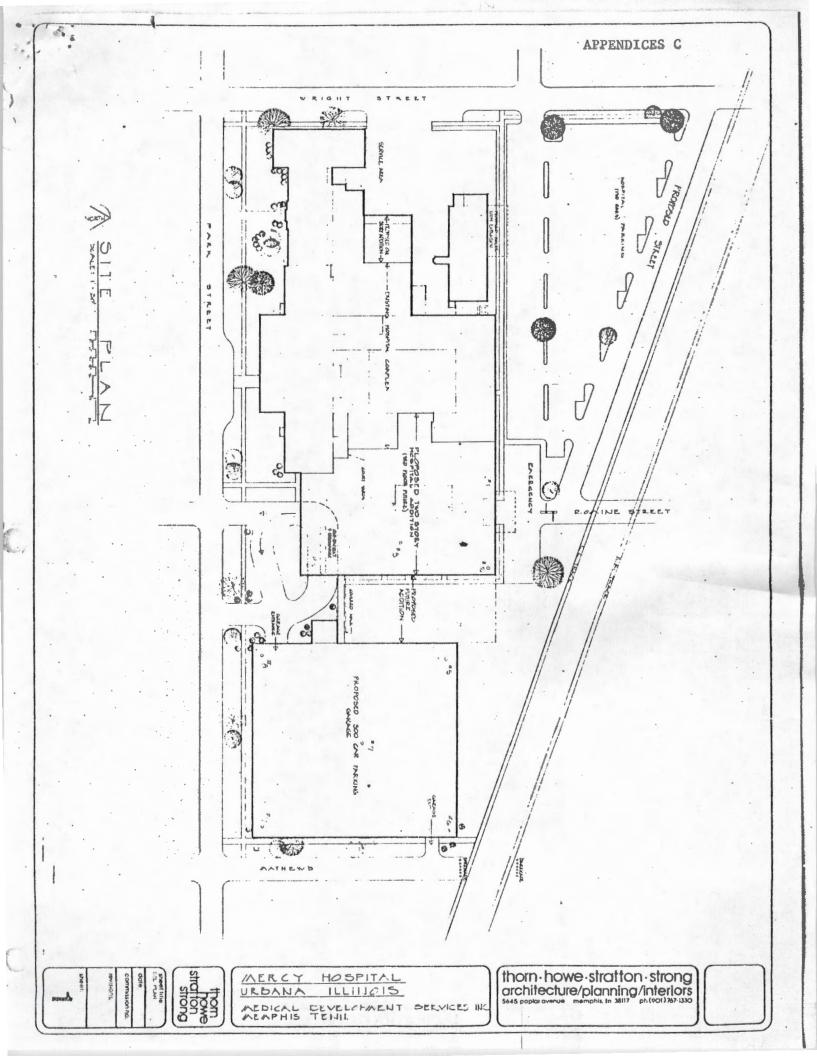
The vacation of Romine Street between Church Street and Park Street is in the best interest of the City. Mercy Hospital's proposed expansion with or without the street closing will generate more traffic in the area. The closing of Romine Street will, in the long term, actually be beneficial to the residential area north of the hospital by directing non-local traffic away from the residential area.

Any major physical or employment expansion has a range of impacts and Mercy Hospital's expansion is not an exception. The impacts are not unmanageable, if the following recommendations are followed:

- Install additional traffic signs relating to pedestrian/school cross walks for intersection of Fairview and Beslin Street as recommended by the City Engineer.
- 2) Make Matthews Street one-way north bound between University Avenue and Park Street.
- 3) Install additional traffic directional signs, as recommended by the City Engineer, in the area to direct traffic to the presently signalized inter-

section of University Avenue and Goodwin Avenue, and University Avenue and Wright Street.

- 4) Future commitments by City:
  - (a) Continue the City's policy of reviewing F.A.U. street priorities and scheduling Goodwin Avenue improvements when warranted and approved by City Council.
  - (b) Install traffic signals at Lincoln Avenue and Fairview Avenue and Fairview Avenue/
    Beslin and Goodwin Avenue when traffic volume warrants.
  - (c) Make a commitment to monitor the traffic patterns as they develop in the area north of Mercy Hospital as traffic patterns change over time. When traffic patterns change, if any, install proper traffic control signs (e.g. no parking signs, stop signs, etc.) as required to move traffic on east/west streets between Wright Street and Goodwin Avenue.



## 7879-R60 ILLINOIS MUNICIPAL RETIREMENT FUND

100 South Wacker Drive, Chicago, Illinois 60606

#### **OMITTED SERVICE CREDIT AUTHORIZATION**

(See instructions on reverse side)

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Clerk Clerk or Secretary

RESOLVED, that it is the finding of this\_

City Council

IMRE Form 6 05

4-2-79 Date

