# B-005-001

Information about institutional shuttle services is included in the Final Transportation Discipline Report and Chapter 4 of the Final EIS.



A LIFE OF SCIENCE

April 14, 2010

Jenifer Young Environmental Manager SR 520 Program Office 600 Stewart St., Suite 520 Seattle, WA 98101

#### Dear Ms. Young:

B-005-001

The Fred Hutchinson Cancer Research Center has reviewed the *SR-520: I-5 to Medina Bridge Replacement and HOV Project Supplemental Draft Environmental Impact Statement* and offers its comments on the analysis. While many of our research staff and employees commute across the bridge and could benefit from the addition of HOV lanes, our comments focus on the project's impacts to our shuttle operations in the Montlake area.

We are disappointed that the SDEIS does not acknowledge or recognize the institutional shuttle services operating at the University of Washington Medical Center. These shuttles form an important link between our partner institutions, including Seattle Cancer Care Alliance, University of Washington Medical Center and Seattle Children's Hospital. The SCCA/UW/SCH shuttles are used to transport cancer patients, staff and care givers between sites. Many of the patients are extremely sick and have compromised immune systems which make it difficult for them to use public transportation. The shuttles run hourly from approximately 7:00 a.m. to 8:00 p.m. providing thirteen runs per day. Additionally, a shuttle between the FHCRC and UWMC operates hourly between 6:40 a.m. and 7:10 p.m. with 15 daily trips, offering convenient travel between research facilities for staff working at multiple locations. This system transports over 8,500 passengers per month, greatly reducing individual vehicle trips between sites and the stress of travel and parking for patients and staff. The shuttles are an essential component of our successful and award-winning transportation management plan.

B-005-001 These shuttles need access to UWMC's main entrance from NE Pacific Street. They also rely on NE Pacific Place and Montlake Blvd. to make their trips to and from Seattle Children's Hospital. Opportunities to use alternate routes are extremely limited and disadvantageous.

Accordingly, for each of the project's alternatives, we are concerned with the future quality of traffic operations on local streets that could affect our shuttle operations. In particular:

B-005-002

We note that traffic performance as measured by intersection level of service degrades along NE Pacific Street with options K and L. For example, when discussing the LOS F at Montlake Blvd. NE/NE Pacific Street with options K & L, the text of the Transportation Discipline Report (6-40) simply notes: "The increased congestion would affect adjacent intersection operations to the north, south, and west." How will the operations be affected? How will travel times be affected? How frequent and far will back-ups be?

B-005-003
2. On NE Pacific Street, traffic now frequently backs up to 15<sup>th</sup> Avenue NE. But the SDEIS, through its Transportation Discipline Report, acknowledges less of a problem: "Congestion can also occur on NE Pacific Street eastbound, extending back through the NE Pacific Place intersection" (Transportation Discipline Report 6-2). How accurate, then, are future projections of traffic operations on NE Pacific Street? What changes in travel time can be expected?

B-005-004
3. Option A shows a small reduction in volume on NE Pacific Street and therefore better levels of service due to removal of the Lake Washington Boulevard ramps. Yet, option A+ as embraced by the Legislative Workgroup retains the ramps. Is it fair to assume that, under option A+, NE Pacific Street would experience levels of congestion comparable to the No Build scenario that includes LOS E at 15<sup>th</sup> Avenue NE and LOS F at Montlake in the PM Peak Hour? If so, it is disappointing that congestion in this area critical to medical access will be notably worse than today's conditions.

B-005-005
4. Could you please clarify the access routes to UWMC during construction? We cannot yet tell how our shuttle operations would be affected.

B-005-006 It is imperative that we are able to maintain our shuttle services for patients and staff. We are concerned that potential increases in travel time, both during and after construction, may result in significantly poorer service and may result in substantially

# B-005-002

Effects on affected intersections were described in the Section 5.1 of the SDEIS and the Transportation Discipline Report. Exhibits 6-3 and 6-4 of the Transportation Discipline Report show the predicted level of service in 2030 at Montlake area intersections. Based on standard methodology, the local study area reported in the SDEIS was determined by the change in traffic volumes on the local streets with the No Build Alternative versus the Preferred Alternative during peak hours; only intersections where traffic volumes would increase by more than 5% were included. Five percent was selected as the criterion because a change in traffic volume increases were less than 5% on adjacent streets, the intersection was not included in the analysis. Thus, all intersections not included in the local study area would experience an overall change in traffic volumes during the a.m. and p.m. peak hours of less than 5% with implementation of the project.

Please see the Final EIS and Chapter 6 of the Final Transportation Discipline Report (Attachment 7 to the Final EIS) for a discussion of intersection level of service with the Preferred Alternative.

### B-005-003

The quoted text is from an introductory description characterizing existing conditions, rather than a quantitative result of analysis. Since congestion varies by time of day and from day to day, the text simply described congestion as extending through, or past, the NE Pacific Place intersection.

Future traffic projections are estimates based on average existing weekday traffic conditions during the month of October. Population and employment growth estimates maintained by the Puget Sound Regional Council were used in the modeling process to forecast the additional transportation demand for the year 2030. The estimates are based on B-005-006 B-005-007 higher costs for us to maintain acceptable shuttle frequency and capacity. We welcome the opportunity to work with you in addressing construction period circulation needs and in developing acceptable mitigation plans for these vital transportation services.

Thank you for the opportunity to comment on the regionally significant project.

Sincerely. cott Rusch

Vice President Facilities and Operations

current information about planned growth and development from jurisdictions throughout the region.

The project would not substantially affect travel times along NE Pacific Street and Montlake Boulevard NE. However, anticipated future population and employment growth would contribute to increased travel times on the local streets.

Please see the Final EIS and Chapter 6 of the Final Transportation Discipline Report (Attachment 7 to the Final EIS) for a discussion of intersection level of service with the Preferred Alternative.

### B-005-004

The Preferred Alternative is similar to Option A, with several design refinements based on public input and coordination with stakeholders. Traffic operations on local streets with the Preferred Alternative would be similar to the No-build alternative. However, operations in the No-build alternative would be better than stated in the comment due to revised regional growth estimates. The purpose of the SR 520, I-5 to Medina project is to improve mobility for people and goods across Lake Washington within the SR 520 corridor, while avoiding or minimizing impacts on surrounding neighborhoods. Therefore, congestion improvements will be most evident on the SR 520 corridor and at local street intersections near the Montlake interchange. When evaluating travelers' overall trips, this will substantially benefit the many people who travel on SR 520 to reach the University of Washington Medical Center and other key destinations near the University District.

Please see the Final EIS and Chapter 6 of the Final Transportation Discipline Report (Attachment 7 to the Final EIS) for a discussion of traffic volumes and intersection level of service along NE Pacific Street with the Preferred Alternative.

## B-005-005

During construction of the Preferred Alternative, the routes would be the same as those currently used to access the University of Washington Medical Center. If Options K or L were identified as the Preferred Alternative in the future, temporary access would be provided during construction, and the routing would be determined during final project design.

# B-005-006

Traffic operations on local streets are expected to remain similar to existing conditions during most of construction. However, the demolition and re-construction of Montlake Boulevard over SR 520 during year 6 of construction is expected to result in some additional travel delays. The construction transportation effects of the Preferred Alternative would be primarily at the Montlake Blvd/SR 520 interchange, but could result in delays that extend to NE Pacific Street and to E Montlake Blvd, north of NE Pacific Street. These effects would occur during the peak traffic hours and would be due to changes in configuration of the roadway and intersections that are required to allow space for construction of new structures and other project elements. Day-to-day construction activities, such as lane closures, that reduce road capacity and interfere with traffic would not be allowed during the peak hours. Construction plans will continue to be refined through the final design and contracting processes. Throughout these processes, WSDOT will evaluate construction methods to further minimize transportation effects.

## B-005-007

Construction plans will continue to be refined through the final design and contracting processes. Throughout these processes, WSDOT will evaluate construction methods to further minimize transportation effects.