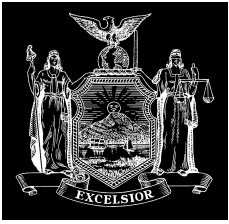


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SENATOR THOMAS K. DUANE

29th SENATORIAL DISTRICT • NEW YORK STATE SENATE



TESTIMONY BY NEW YORK STATE SENATOR THOMAS K. DUANE
BEFORE THE NEW YORK CITY LANDMARKS PRESERVATION COMMISSION'S
HEARING ON CERTIFICATES OF APPROPRIATENESS
FOR THE ST. VINCENT'S HOSPITAL REDEVELOPMENT

July 15, 2008

My name is Thomas K. Duane and I represent New York State's 29th Senate District, in which St. Vincent's Hospital ("St. Vincent's") and the Greenwich Village Historic District are located. Thank you for the opportunity to present testimony before the New York City Landmarks Preservation Commission (LPC) today.

The applications before LPC are to garner Certificates of Appropriateness for the modifications of four hospital buildings in the Greenwich Village Historic District to accommodate a new residential use, the alteration of the current Materials Handling Center at 76 Greenwich (The Triangle site), the demolition of four buildings and the construction of townhouses and apartment buildings in their place, as well as a hardship application for the demolition of the O'Toole building and a Certificate of Appropriateness for a new hospital in its place.

Manhattan Community Board 2 (CB2) laid out its concerns and questions in its June 19, 2008 resolution and July 10, 2008 letter to LPC and I wish to highlight some of our shared reservations and encourage that further modifications be made.

In my April 1, 2008 testimony, I stated that five of the buildings on the St. Vincent's campus east of 7th Avenue are historically relevant, embody the hospital's evolution in Greenwich Village and, according to the Greenwich Village Historic District Designation Report, "generally conform with the houses in the adjoining streets." I appreciate that the Rudin family has made every effort to preserve four of these buildings – Smith, Raskob, Nurses Residence and Spellman – in their revised plans, however, I am disappointed that they have not chosen to adapt the Reiss building for re-use as well. Although it may be noncontributing when viewed alone, its simple red brick design completes the picture of this block. It is important that the building that replaces Reiss likewise complements the buildings on either side and is consistent with the existing streetscape. Thus, I ask that the Rudin family heed CB2's recommendation that design changes be made to "better reflect the historic language of a Village side street."

I also expressed concern in my previous testimony over the height and bulk of the proposed residential tower on 7th Avenue. The building's reduction in width by 60 feet and reduction in height by 30 feet in the current application creates a scale closer to the buildings currently

existing at this site. However, it is still much larger and the façade has much more glass than the structures in the surrounding area. The community continues to express concerns regarding the design of this building, as well as the modifications to the existing buildings to the east side of 7th Avenue and I encourage the Rudin family to maintain an open dialogue with CB2 to discuss the details of the proposal.

In regards to the proposed new hospital building, the architects have designed the building with setbacks, an ovoid shape, and a diagonal orientation to lessen the impact of the required bulkiness of the hospital and have further created more light and air for the surrounding neighborhood by reducing the building by 9% in the revised proposal. While it continues to be tall, bulky and oddly shaped, St. Vincent's has made a compelling argument that the proposed hospital building offers the most efficient way to fulfill its mission of providing medical care with, to quote the hospital's own mission statement, "respect, integrity, compassion and excellence." I do have confidence in St. Vincent's claim, and therefore I am at a loss to find or be presented with compelling evidence to the contrary.

As for the hardship application for the demolition of the O'Toole building, I do not claim to be an expert on this topic and understand there are many factors to consider. Nevertheless, it seems that the only financially feasible option, although a regrettable option, is for St. Vincent's to build a new state-of-the-art hospital resulting in the demolition of this architecturally significant building. Proximity and easy accessibility to emergency care is obviously extremely important and it is essential to keep St. Vincent's in Greenwich Village; however, due to the large plot of land needed for the footprint of the hospital and the large expense and limited availability of real estate, St. Vincent's has very limited options. Arguably, O'Toole has the richest history of all the hospital buildings and is a unique and remarkable structure. While I am saddened to see this structure go, this is an exceptional case of a life-saving facility needing to grow due to the lack of emergency health care options in the area and the overarching need for access to the ever advancing field of medicine. No other facility that I know of within a historic district can make such a claim and, therefore, I do not believe a dangerous precedent will be set. Not everyone is convinced of these arguments, however, and I request that St. Vincent's make every effort to answer the questions laid out in CB2's resolution in order to continue to and even more exhaustively provide the community with the information it needs to support this application without hesitation. And, again, while I have confidence in the institution, I am going to continue to encourage St. Vincent's to answer the community's questions regarding the need for the hospital to be housed in one building verses two or more in that there continues to be so much concern over this specific issue. I want to thank LPC for calling on experts in an advisory capacity to provide guidance on these complicated applications and I am confident that ultimately all relevant questions will be considered carefully and accurately during this process, even if the answers do not please all stakeholders.

St. Vincent's and the Rudin family have obviously heard loud and clear that preservation had not been a high enough priority in the previous plans and that the proposed buildings were too tall and bulky. The current applications are not perfect and perfection is probably not attainable, but they are a direct and good faith response to those concerns and I appreciate the great strides the applicants have most recently made. Although it is not within LPC's purview, St. Vincent's and the Rudin family have also responded to concerns regarding the overcrowding of schools in Community District 2 and have facilitated an agreement between the School Construction Authority and the Foundling Hospital to create a much-needed elementary school. I hope St.

Vincent's and the Rudin family will continue to evaluate the needs of the community as this project moves to the Uniform Land Use Review Procedure.

As I have said previously and continue to say at every available opportunity, I am especially interested in the production of special needs housing as well as low to moderate income housing in at least one of the Rudin residential buildings. St. Vincent's has shown leadership in providing services to marginalized populations and I look forward to continued conversations with them and the Rudin family about the financial feasibility, government and neighborhood will, and appropriate space to address this crucial issue.

Despite my appreciation for the services St. Vincent's has been providing to lower Manhattan for over 150 years, and the critical importance of its vitality for this community, at LPC's initial hearing on this redevelopment on April 1, 2008, I expressed a number of significant reservations that made it impossible for me to support the applications at that time. St. Vincent's and the Rudin family have made considerable changes in their current applications that address many of the objections raised not only by me but also by other elected officials, CB2, preservationists, community members and you, the LPC commissioners. I value these changes and am compelled by them.

For the reasons listed above as well as St. Vincent's making a persuasive argument that this redevelopment is the only way it can finance a new, easily accessible, state-of-the-art hospital to serve the West Side of Manhattan, I support the revised applications for Certificates of Appropriateness that are before LPC with the reservations that I have listed above. Furthermore, I look forward with confidence to continued discussions with St. Vincent's and the Rudin family on the details of this massive proposal. Thank you for allowing me to testify today and for your consideration of my recommendations and position.