

CITY OF JACKSONVILLE
DOWNTOWN DEVELOPMENT REVIEW BOARD
MEETING

Proceedings held on Thursday, January 16, 2025,
commencing at 2:00 p.m., at City Hall at St. James,
117 West Duval Street, Lynwood Roberts Room,
Jacksonville, Florida, before Diane M. Tropa, a
Notary Public in and for the State of Florida at Large.

BOARD MEMBERS PRESENT:

LINZEE OTT, Chair.
KEVIN CRAIG, Board Member.
PETER DEIULIIS, Board Member.
JOANA BERLING, Board Member.
CARL DAWSON, JR., Board Member.
JOSEPH LORETTA, Board Member.

ALSO PRESENT:

BRETT JAMES, Director, Planning and Development Dept.
GUY PAROLA, DIA, Operations Manager.
TERRENCE HARVEY, Office of General Counsel.
CHRIS MILLER, City Council Member.
AVA HILL, DIA, Administrative Assistant.

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1 THE CHAIRWOMAN: Thank you all so much.
2 And I'm just going to remind members of
3 the public either attending or online about
4 speaker cards, and let us know if you do want
5 to speak.

6 We have a relatively short agenda today.
7 We're going to start with approval of the
8 December meeting minutes, if anyone has had a
9 chance to review those and wants to make a
10 motion.

11 BOARD MEMBER CRAIG: I'll make a motion to
12 approve the minutes.

13 BOARD MEMBER BERLING: Second.

14 THE CHAIRWOMAN: Thank you, Ms. Berling.
15 All those in favor of approving the
16 minutes, signify by saying aye.

17 BOARD MEMBERS: Aye.

18 THE CHAIRWOMAN: Any opposed?

19 BOARD MEMBERS: (No response.)

20 THE CHAIRWOMAN: Show the December 19th,
21 2024, DDRB minutes approved.

22 We will start with voting conflict
23 disclosures. Does anybody have an 8B form to
24 file? If you'll just let us know now.

25 BOARD MEMBER DEIULIIS: (Indicating.)
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1 PROCEEDINGS
January 16, 2025 2:00 p.m.

2 - - -

3 THE CHAIRWOMAN: We're going to call the
4 January 16th, 2025, DDRB meeting to order.
5 I'm going to go ahead and start with
6 introductions. If I could start at my left
7 over here.

8 MR. PAROLA: Guy Parola, DIA staff.

9 BOARD MEMBER DEIULIIS: Peter Deiuliis,
10 DDRB.

11 BOARD MEMBER LORETTA: Joe Loretta, DDRB
12 Member.

13 THE CHAIRWOMAN: Linzee Ott, DDRB Chair.

14 BOARD MEMBER BERLING: Joana Berling, Vice
15 Chair.

16 BOARD MEMBER DAWSON: Carl Dawson,
17 Secretary.

18 BOARD MEMBER CRAIG: Kevin Craig, DDRB
19 Member.

20 MR. JAMES: Brett James, Director of
21 Planning and Development.

22 COUNCIL MEMBER MILLER: Chris Miller, City
23 Council.

24 MR. HARVEY: Terrence Harvey, Office of
25 General Counsel.

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1 THE CHAIRWOMAN: Yes, Mr. Deiuliis.
2 BOARD MEMBER DEIULIIS: Madam Chair, I
3 would like to say that on December 12th, I did
4 have a one-on-one discussion with Mr. Trevor
5 Lee of the firm representing this project
6 today, and the -- it was probably about
7 30 minutes or so.

8 THE CHAIRWOMAN: So I -- correct me if I'm
9 wrong. I think that might be ex parte
10 communication. I don't think you need to file
11 an 8B for that.

12 BOARD MEMBER DEIULIIS: Oh, thank you.

13 THE CHAIRWOMAN: Do you have a voting
14 conflict?

15 BOARD MEMBER DEIULIIS: No, I do not.

16 THE CHAIRWOMAN: Okay. All right. Well,
17 then, we will -- we'll get to that and we'll
18 note that on the record.

19 Okay. We will now get to DDRB Application
20 2024-009.

21 MR. PAROLA: (Nods head.)

22 THE CHAIRWOMAN: Okay. Just checking.
23 This is conceptual and final review for
24 Baptist Medical Center.

25 Mr. Dawson, will you get us in the proper
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1 posture?

2 BOARD MEMBER DAWSON: Pardon?

3 THE CHAIRWOMAN: Actually, did I get out

4 of order here?

5 Do you want to move the item?

6 BOARD MEMBER DAWSON: I move to approve.

7 THE CHAIRWOMAN: Okay. Okay. And I'm

8 going to open the public hearing.

9 Did I do that wrong? I think I did. It's

10 been a little -- we're rusty after the

11 holidays.

12 Okay. Opening the public hearing on

13 2024-009, and then we'll do -- I guess we'll do

14 ex parte disclosure now.

15 Do we need Mr. Deiuliis to repeat his?

16 MR. HARVEY: Yes.

17 THE CHAIRWOMAN: Okay.

18 Sorry, Mr. Deiuliis. Do you mind

19 repeating yours?

20 BOARD MEMBER DEIULIIS: No worries.

21 Yes. On December 12th, I spoke with

22 Trevor Lee regarding the project that we'll be

23 reviewing today.

24 THE CHAIRWOMAN: Anybody else?

25 BOARD MEMBER LORETTA: Yes.

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1 On January 9th, I had a conversation with

2 Mr. Trevor Lee to understand a bit about the

3 project.

4 BOARD MEMBER BERLING: I too had a

5 conversation with Trevor Lee. I do not

6 remember which day.

7 BOARD MEMBER CRAIG: I also had a

8 conversation with Trevor Lee on January 15th.

9 THE CHAIRWOMAN: Okay. And I also had a

10 conversation with Mr. Lee on December 16th to

11 get more information and hear about the

12 project.

13 Okay. We will move forward -- excuse me,

14 y'all. Staff presentation report, if there is

15 one.

16 MR. PAROLA: There is one. Thank you,

17 Madam Chair.

18 And for the benefit of Mr. Lee, he used to

19 be on this board, we're going to do things a

20 little differently today. So staff is going to

21 give a very brief overview, then we'll be

22 quiet. Your conversation with the board and

23 deliberation will happen. When that is over,

24 staff will give their recommendation.

25 We found that it provides a little better

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1 context to the recommendation if they hear from

2 the applicant and their design intent.

3 Slide, please.

4 I wish I had a computer in front of me.

5 This DDRB application, 2024 [sic], as was

6 mentioned by the -- Madam Chair, seeks

7 conceptual and final review for Baptist Medical

8 Center Emergency Department Expansion. This is

9 located within the existing 17-acre Baptist --

10 for want of a better term -- campus.

11 If you look at the aerial, in the top left

12 over there, at least the left-hand side, you'll

13 see a star. That's where the building is

14 generally located. And that sort of polygon

15 with some transparency is what we're calling

16 that 17-acre parcel.

17 You can get a little more specific as to

18 what the site looks like if you're looking at

19 the image on the bottom right-hand side.

20 Again, anyone who is familiar with this

21 area understands there is building upon

22 building upon building. There's no one single

23 context of design. And later on, we'll show

24 some images of the surrounding properties.

25 While they may or may not meet the strict

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1 definition of brutalism for the architects,

2 it's still a very brutal area in terms of raw

3 concrete. And we can take a look at it.

4 Slide, please.

5 So this is what the most recently approved

6 DDRB building on the campus looks like. This

7 was also approved by conceptual and final at

8 the same meeting. I think you're going to see

9 some similarities in what they're trying to

10 accomplish in terms of adding more

11 transparency, especially on the upper floors,

12 than is otherwise there in some of the other

13 buildings.

14 Slide, please.

15 Again, this is the location. The red star

16 is what -- the location you'll be looking at

17 today, and the blue star is where the building

18 you had just seen one slide earlier is located.

19 I just wanted to give you context of the

20 building, since I brought it up for design

21 purposes.

22 If you could, go to the next slide,

23 please.

24 This is the before and after. If you look

25 at where the building is being located, it's to

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1 the left-hand side of the upper left-hand
2 image. What's right in front of you right now
3 is a ramp. So if you take the right roadway,
4 you go underneath the ramp, you're in the
5 emergency room -- or the entrance to the
6 emergency room, you can look around. If you
7 take the ramp up, you hit their helipad, I
8 believe is what you'd run into.

9 The bottom slide shows you where they're
10 putting the building. You can see why I showed
11 you the most recent building approved and
12 constructed on campus. You can see the
13 transparency that's trying to be accomplished.

14 This building is a total of 76 feet in
15 height, and that includes the penthouse.

16 Slide, please.

17 This is what I meant by the hardness of
18 the area, if you will, and why staff feels that
19 the design proposed here is a great addition.
20 It's very concrete heavy in this area. There's
21 a lack of transparency, for want of a better
22 term.

23 Next slide, please.

24 This is something that's important.
25 It's -- it was interesting when staff went to

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1 Mr. James and Mr. Harvey, thank you so
2 much.

3 Thank you for also giving me time to speak
4 with you ahead of time. As Mr. Parola
5 suggested, this is a complex project and a
6 complex site, and we have spent the better part
7 of a year working on this project and designing
8 it. It is one of the more, in my opinion,
9 transformational projects for the city. This
10 will expand and add additional emergency
11 department capacity both for adults and
12 children on the ground floor, something that is
13 much needed. Many of you may know that the
14 Baptist ED is sort of Jacksonville's ED, and so
15 we're excited to have this project before you
16 today as our last step before we get to
17 permitting.

18 With me today are Baptist representatives,
19 Kimberly, director of construction for Baptist;
20 and Joe Coughlin, project manager here for
21 Baptist as well. You'll hear from Fremont at
22 MLH, who is our landscape architect. He'll
23 present after me.

24 But thank you again so much for having me.

25 I will be pointing as needed on the screen

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1 look at how the building met the criteria, both
2 for final and conceptual, as well as the design
3 guidelines and everything else, because it does
4 not front a right-of-way. And so this is
5 more -- for background information, this
6 portion of Prudential Drive was closed
7 previously, so this sits entirely within a
8 parcel, and arguably within a center of a
9 parcel. The only building that is not owned by
10 Baptist is a parking garage that goes with -- I
11 still think it's the One Call building.

12 Next slide.

13 Mr. Lee.

14 (Mr. Lee approaches the podium.)

15 THE CHAIRWOMAN: Please state your name
16 and address for the record, Mr. Lee.

17 Good to see you.

18 MR. LEE: Thank you so much.

19 Trevor Lee, 1301 Riverplace Boulevard,
20 Jacksonville, Florida 32207.

21 Thank you so much. It's so great to be
22 here today.

23 Thank you, Chair Ott, for hosting us, and
24 Board Members. Council Member Miller, thank
25 you for being here.

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1 behind you. I'm so sorry if you might have to
2 turn if I'm pointing something out, but nothing
3 here is new that you -- that you haven't
4 already seen.

5 Thank you. Next slide.

6 Here's our quick table of contents. We'll
7 get into the meat of it right away.

8 Next slide, please.

9 Mr. Parola did an excellent job explaining
10 the site and explaining the fact that it is an
11 in-parcel site, not on a public right-of-way,
12 and describing how this project kind of weaves
13 itself into an existing area, drop-off,
14 ambulance, surgery, as well as improving
15 significantly the patient experience when
16 you're getting dropped off under distress,
17 which I'll get into.

18 Next slide, please.

19 Zooming in, what we tried to do -- there's
20 a lot of overlapping lines here -- is explain
21 both the expansion footprint of the actual
22 building, some of which is on top of another
23 building; and we've defined with the red line
24 how the site is going to be directly impacted;
25 and then the blue area is kind of the total

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1 area of potential impact we've got with
 2 renovation and some other infrastructure needs
 3 we've got.
 4 Next slide, please.
 5 At any time, if you have any questions,
 6 I'm free to pause if you would like.
 7 This is some more site context than
 8 Mr. Parola provided. What you see in the upper
 9 right-hand corner is the existing drop-off. So
 10 it's -- it works, but it's not the most
 11 pleasant experience when you are in distress,
 12 so we have moved the entrance and improved both
 13 its visibility upon arrival, but also its
 14 experience for both children and adults,
 15 because Wolfson's will have a children's
 16 hospital emergency department separate from
 17 adults in this new facility.

18 Next slide, please.
 19 This one, Mr. Parola asked us to go back
 20 and kind of take another look at, which was
 21 very well pointed out to us. We separated what
 22 is being renovated -- you can see it's
 23 extensive, it's the entire existing ED -- and
 24 what the new footprint of the new building will
 25 be. You see how we've kind of had to wedge it

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1 between two existing buildings at different
 2 angles.
 3 The remaining outdoor space, we've
 4 turned -- in some ways, I think, expertly by
 5 Fremont and his team -- into a place of respite
 6 and a garden for both patients and staff while
 7 working at the hospital. And we'll get into
 8 more detail on that in a little bit.

9 Next slide, please.
 10 The architectural context of the campus
 11 has been significantly elevated in the last
 12 15 years, and so what we decided to do at the
 13 direction of Baptist was to weave and stitch
 14 this project into the existing architectural
 15 language, not create something new, not break
 16 any new ground.

17 So we drew from the Heart Hospital, which
 18 is the oldest project that we drew from, which
 19 is right on the river on the lower right-hand
 20 side, also the Weaver neuro tower, and then, as
 21 Mr. Parola pointed out, the new NICU tower, as
 22 well as MD Anderson. So you'll see components
 23 of all those in our project, both in the -- in
 24 terms of the quality of the materiality, but
 25 also in the rhythm and the design that we used

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1 to effect this building.
 2 Next slide, please.
 3 The illustration Mr. Parola showed didn't
 4 have this one step further, which is we faded
 5 back areas of the project that we are not
 6 designing, in some ways because the building is
 7 so stitched in with the existing campus. So
 8 what you're seeing in highlighted fashion is
 9 the project. Everything else that's kind of
 10 been grayed back is not the project.

11 And so we've added quite a bit of
 12 transparency in the patient room areas on the
 13 elevated floors.

14 The lower floors represent, on the
 15 left-hand side, the ambulance drop-off and
 16 storage; and on the right-hand side represents
 17 emergency department exam rooms, trauma rooms,
 18 and those triage rooms that are so important to
 19 care. Not a lot of transparency on that floor.

20 But the other thing I'll point out is
 21 that, as you drive up to this new ED entrance
 22 for both adults and kids, is you can now see
 23 the entrance as you pull into Prudential Drive,
 24 whereas before it was hidden underneath that
 25 helicopter landing pad and Heart Hospital drop

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1 off. So that is -- in some ways, being able to
 2 see the front door is better than any signage
 3 or arrows you can provide to families, again,
 4 in distress.

5 Next slide, please.
 6 Here's the image without the grayed back
 7 so you can see it sort of in its full context.

8 Next slide, please.
 9 As we come up the ramp and we look back on
 10 the building, one of the images Mr. Parola
 11 shared that didn't have a lot of
 12 transparency -- the Howard building now shows
 13 up in the background, and you get a better
 14 sense of how that large arrival canopy really
 15 allows a lot of cars to be parked for what
 16 might be quite a while as you move somebody in
 17 and out, but it also starts to queue you up for
 18 how to park once you -- once you do drop off.
 19 It's right there off to the left.

20 Next slide, please.
 21 Another view after you make the turn,
 22 underneath the Heart Hospital drop-off as you
 23 come up and queue to that front door. So
 24 transparency into the lobby and waiting area,
 25 transparency into registration, these are all

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1 tools that Baptist has perfected in multiple
2 iterations of their EDs that have recently been
3 built, both freestanding and at other hospitals
4 here in Jacksonville.

5 Next slide, please.

6 I like this view a lot because this view
7 gives you a view from the Howard building,
8 looking back down on the new expansion. It
9 gives you a sense of how it gets placed next to
10 the existing Wolfson Children's Hospital. It
11 gives you a sense of the garden space that's
12 being created, again, by Fremont and his team.

13 And it gives you a sense of how we've
14 tried to protect the ambulance drop-off from
15 the rest of the activity that's going on around
16 it; how we have continued to elevate the
17 architecture, despite kind of being around the
18 corner and the back of the house.

19 And, as many of you may know, one of my
20 pet peeves -- we have completely encapsulated
21 all the mechanical equipment in a mechanical
22 penthouse, including a generator and battery
23 backups. Not only encapsulating it, providing
24 two different areas of access, both in the
25 stair and in the elevator shaft near the old

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1 Wolfson's rotunda.

2 A lot of thought and care has gone into
3 high-quality design, high-quality materials,
4 and improving patient views and care wherever
5 we have that opportunity (inaudible) the
6 building.

7 Next slide, please.

8 So, our materials selection. I have a
9 physical materiality board right in front you.
10 It is a little bit heavy because some of this
11 is stone, and so I won't pass it around, but
12 any of you that would like to come up and take
13 a closer look, please do.

14 The materials we've selected are materials
15 already being used on the campus. We're not
16 introducing another new material. And this
17 concept goes all the way into how we do
18 hardscape, how we do landscape, how we have
19 selected our furniture and our lights.
20 Everything is existing on campus now.

21 Next slide, please.

22 We have taken our elevations, all four
23 elevations, and we've pinned each one of those
24 materials to where we'll be using them
25 specifically. In some ways, I think the

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1 rendering kind of does a better job of
2 explaining how we're using materials, but we
3 wanted you to have a real chance to be able to
4 say, okay, I see where they're using this, I
5 see where they're using that.

6 As Mr. Parola pointed out, the top of our
7 penthouse is 76 feet above the first floor
8 finished floor. Now, the site does kind of
9 undulate up and down a little bit. As you come
10 up Prudential, it's a little bit low, so it's
11 maybe 3 or 4 feet low. From that side, it's
12 maybe almost 80 feet, but -- about 76 feet.

13 Next slide, please.

14 Did we get hung up?

15 The next page -- I can flip through with
16 you. The next page is the remaining elevations
17 and the material explanation of those
18 elevations. Exactly the same as we did on the
19 first elevation page. This one, the second
20 elevation page gives you a sense of -- where it
21 says "existing building" -- we're on Page 15,
22 for those of you that are just sort of catching
23 up -- it gives you a sense of how we're
24 building on top of the existing building and
25 how we've continued the Heart Hospital's

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1 architectural design across the back side of
2 the new ED expansion and renovation.

3 On Page 16, what you will see are,
4 effectively, the clinical floor plans of the
5 building. So you'll see each one of the exam
6 rooms. You'll see our trauma rooms, our triage
7 room, how the ambulance drop-off takes its
8 patients into the trauma center area, and how
9 we have separated in some ways the pediatric
10 side, which is on plan right side, and the
11 adult side, which is on plan left side. When
12 you're in the pediatric side, it really is all
13 for kids. The exam rooms, the bathrooms,
14 everything is for kids.

15 The next page, Page 17 -- okay, it looks
16 like we're back -- is the second floor. The
17 second floor is an endo lab that they are
18 relocating from another area of the hospital.
19 This is both a renovation and an expansion, so
20 where that red line kind of slices right
21 through many of the functional program spaces,
22 it is effectively one building versus another
23 building. So we will have things like
24 expansion joints to control movement of the two
25 buildings.

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1 Next slide, please.
2 The next two floors are planned as
3 somewhat generic patient rooms called med/surg
4 rooms, or they could be other units within the
5 hospital. They don't have, necessarily, a
6 clearly defined connection to a hospital use at
7 the moment, but this is how the floors will be
8 designed out.

9 On the left, you will see it is an
10 expansion of the existing Heart Hospital floor
11 into, basically, a new nursing unit, and the
12 second floor is the same. So these are two
13 floor plans, effectively. And then our third
14 and fourth plan.

15 Next slide, please.

16 And then our final plan is our mechanical
17 penthouse and roof plan. As you can see, all
18 the equipment will be enclosed within our
19 mechanical penthouse with louvres and both
20 elevator access and stair access.

21 Next slide, please. Thank you.

22 All right. At this time, I'm going to
23 hand the presentation over to Fremont from MLH
24 to deliver the landscape and hardscape.

25 (Mr. Latimer approaches the podium.)

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1 go through it in as much detail as you want,
2 but I'll go through it, as a courtesy, quickly
3 first, then we can back up if we need to.

4 So if we could go to the next slide,
5 please.

6 So again, just an overview of the site. I
7 think we've gone through this enough.

8 Next slide, please.

9 So there's really two parts to this
10 design. The first is kind of the public
11 streetscape, which you'll see outlined in blue,
12 and that's a continuation of the work that was
13 recently completed on Palm Avenue. So DDRB has
14 recently come out with their DIA street
15 guidelines. So this is different, because this
16 was -- Palm Avenue is kind of its own animal,
17 but we wanted to turn that design and use the
18 same materials on the section of roadway that's
19 in front of the Howard building.

20 Then once we get into the site itself,
21 we're going into a set of materials that's
22 reminiscent and matches what was done in the
23 Borowy tower, the critical care tower, that's
24 just to the south. So it's kind of two
25 separate sets of materials.

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1 THE CHAIRWOMAN: Please just state your
2 name and address for the record.

3 Thank you.

4 MR. LATIMER: Fremont Latimer with Marquis
5 Latimer + Halback. We're at 34 Cordova Street,
6 St. Augustine, Florida.

7 So -- thank you very much for your time.

8 So it's an exciting project. Baptist
9 takes the exterior and their site work almost
10 as seriously as they take the inside, so we try
11 to take the mission of the hospital and bring
12 it outside. So -- especially with things like
13 emergency departments, you end up spending a
14 lot of time there, you're stressed out, so
15 finding places of respite, finding places you
16 can relax, take a phone call, they're
17 important.

18 Also, the staff is under a lot of stress.
19 So -- this is a major staff entrance, so
20 finding places they can relax and, you know,
21 kind of decompress from their day is important.

22 So, you know, I thank Baptist for letting
23 us do some really cool work with some
24 meaningful -- some real meaning behind it.

25 So I've got a lot of data. I'm willing to

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1 Next slide, please.

2 So when we're looking at the hardscape,
3 again, you know, the materials and the
4 thoughtfulness that go into these spaces, it is
5 elevated compared to what you'll get on most
6 sites. So we've got things like, you can see,
7 those elevated planters. We have those
8 throughout. They have integrated benches.
9 Even the concrete, you can see that picture in
10 the lower left with the scoring. You know,
11 we'll be -- we'll be using, you know,
12 decorative score lines throughout.

13 And then in the bottom right, you'll see
14 we're using exposed aggregate concrete. Just
15 because it is a hospital, a lot of wheelchairs,
16 a lot of people with mobility issues, we don't
17 want to use pavers or anything like that, so we
18 tend, on hospital sites, to use decorative
19 concrete instead.

20 Next slide.

21 So some renderings. So the space between
22 the existing building and our new building, it
23 is -- it's a garden, but it's also a ramp.
24 We've got about 4 feet of elevation change. So
25 we took what, you know, could have been a

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1 boring ramp and turned it into a garden space.
2 This is largely going to be a staff entrance,
3 so you can see how we've got those elevated
4 planters with the screen walls. This is really
5 a space that's designed for the staff to use
6 when they need a break.

7 Next slide.

8 Again, some more -- some more details on
9 those planters. We've got them spaced
10 throughout. They're really kind of the feature
11 of what will be used on that site. You can see
12 an example of that on the left.

13 Next slide.

14 We've got some elevated site furniture
15 throughout. Again, when you're in the waiting
16 room of an emergency department, you're going
17 to be there for a while, so you need something
18 to stare at. So a lot of this is used so that
19 you've got something to look at while you're in
20 the waiting room. So the geometric pots we'll
21 have planted in between the ramp and all the
22 glazing from the waiting room. The dendritic
23 benches are placed throughout. Again, it's a
24 place to go take a phone call. And even the
25 trash cans are nicer than your average.

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1 palette. It's largely based on native plants,
2 but we did want to bring in some color. We do
3 have a lot of shade, due to, you know, being
4 between six- and seven-story buildings, so we
5 have azaleas and things like that.

6 Next slide, please.

7 Again, just looking at the ground covers,
8 we tried to use a whole variety of plants. It
9 is a challenging site due to the shade, so it's
10 a lot of the shade-loving species.

11 Mr. Loretta, if you have any questions on
12 the plant palette, just let me know.

13 BOARD MEMBER LORETTA: (Shakes head.)

14 MR. LATIMER: Next slide.

15 So again, some perspectives. So you can
16 see in plan view, on the right-hand side,
17 that's that ramp and that kind of staff garden,
18 and then that greenspace on the left which is
19 next to the ED, that's really the place to take
20 phone calls and relax if you want to get
21 outside of the waiting room itself.

22 Next slide.

23 This is just a better view of that, that
24 ramp and staff garden and how it interacts with
25 the buildings.

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1 Next slide, please.

2 Site lighting. So on the streetscape
3 itself, we're using standard COJ double acorns.
4 That's what was used on Palm Avenue. But once
5 you get into the site itself, we're going for a
6 more -- more of an elevated appearance. So you
7 can see the lighted bollards and the
8 (inaudible) here.

9 Next slide, please.

10 (Inaudible) the planting plan. If -- we
11 can just go on to the next one. We'll look at
12 it in more detail.

13 So it's all a series of native plants
14 where we have space. There are a lot of
15 utilities, as you can imagine with a hospital,
16 but everywhere we could find space, we've got
17 shade trees; you know, bald cypress, Dahoon
18 holly, Natchez crape myrtles, which are the
19 large variety. And then where we have limited
20 planting space, we're using smaller trees;
21 sabal palms, olive trees, which have a history
22 in Greek medicine, kind of tells the story of
23 the hospital.

24 Next slide, please.

25 Again, some more pictures of the planting

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1 Next slide.

2 I really like this view. This is what
3 you'll be seeing -- so you're standing right
4 now at the curb on Prudential looking up
5 towards the site. So we're really trying --
6 and, you know, the flowering might be
7 ambitious, but we certainly hope it does look
8 like that at times, especially in the spring.

9 But you can see that raised planter, you can
10 see the olive tree that's in it. I think it
11 will be a feature, you know, regardless of when
12 the plants are flowering.

13 Next slide.

14 And then looking -- here is that staff
15 patio. It gives you that view looking both
16 ways.

17 Next slide.

18 And here's looking down from the building.
19 So this is looking down the ramp. So it's got
20 that -- the shapes and the zigzags of the path
21 to make it seem less of a ramp and more of a
22 courtyard.

23 Next slide.

24 Again, here is the courtyard looking up
25 towards the rotunda.

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1 Next slide.

2 And then here's the sunny portion. So the

3 emergency department itself and that canopy is

4 right behind that crape myrtle that's

5 (inaudible). This is where there's plenty of

6 space, you know, to come out, and there's

7 benches and seating throughout this garden.

8 Next slide.

9 And here it gives you a sense of what it

10 feels like under that canopy. I think one of

11 the tough parts of the current drop-off is it's

12 so dark. So one of the things I think Trevor's

13 team did really well was they lit up this

14 canopy. So it's got a nice, light, wood feel.

15 There's linear lights here. They're also

16 installing linear lights under the rotunda

17 itself. So I think it will make it feel less

18 cave-like, much warmer and more inviting.

19 Next slide.

20 Looking back the other way. Again, it

21 really -- I think that roof texture really

22 changes the experience of being under that

23 canopy.

24 Next slide.

25 And as Mr. Lee was pointing out, you can

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1 rotunda -- the rotunda entry, that back side

2 there, can you talk a little bit more about who

3 is using that and when they're using that?

4 MR. LATIMER: Could you bring up the site

5 plan, please?

6 BOARD MEMBER DEIULIIS: Slide 6 is a

7 large-scale site plan.

8 MR. LATIMER: Slide 6 would be great.

9 So it's still the same approach. You're

10 approaching from the right side of the ramp.

11 You're going to come under the rotunda, and

12 then drop-off will be on the right-hand side as

13 you come around.

14 BOARD MEMBER DEIULIIS: So I'm referring

15 to this kind of southern garden back here

16 (indicating).

17 MR. LATIMER: Oh, yeah. Okay. I

18 apologize.

19 BOARD MEMBER DEIULIIS: Yeah, yeah. No

20 problem. No problem.

21 It's listed, I think, as the rotunda

22 entry.

23 MR. LATIMER: Yeah. So that's the

24 existing main entrance.

25 BOARD MEMBER DEIULIIS: Okay.

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1 really see the entrance. It's important.

2 People get lost right now. So I think having

3 that red, having all of the color in there is

4 going to be critical to wayfinding and defining

5 the space.

6 Next slide.

7 And that concludes our presentation.

8 THE CHAIRWOMAN: Board members, any

9 questions for any of our presenters or for

10 staff?

11 BOARD MEMBER DEIULIIS: Madam Chair.

12 THE CHAIRWOMAN: Mr. Deiuliis.

13 BOARD MEMBER DEIULIIS: Thank you.

14 First off, I'd like to say thank you very

15 much, Mr. Lee, for taking the time beforehand

16 to kind of walk me through. The few issues

17 that I brought up, which were largely

18 graphical, have been addressed, and it's much

19 appreciated.

20 No real comments about the design. I

21 understand the methodology and how it fits into

22 the fabric there.

23 One question, and it might be more for

24 landscape, and I'll defer to Joe a little bit

25 on this as well to get his input, but the

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1 MR. LATIMER: So the -- that's largely

2 going to be a staff entrance.

3 BOARD MEMBER DEIULIIS: Okay.

4 MR. LATIMER: So as you're approaching

5 from Prudential, you walk, you know, up. Then

6 that first section on the far right is largely

7 flat, but then the portion, as soon as you take

8 that turn to go towards the rotunda, that's

9 where you've got that 4- to 5-foot elevation

10 difference.

11 BOARD MEMBER DEIULIIS: Uh-huh.

12 MR. LATIMER: That becomes the ramp.

13 BOARD MEMBER DEIULIIS: Okay.

14 MR. LATIMER: The users there are largely

15 staff.

16 BOARD MEMBER DEIULIIS: Largely staff.

17 Twenty-four hours a day?

18 MR. LATIMER: It's a hospital, yeah.

19 BOARD MEMBER DEIULIIS: It's open to the

20 public? Is that accessible to the public?

21 MR. LATIMER: It's accessible, yes.

22 BOARD MEMBER DEIULIIS: So this might be a

23 graphical issue, but if you look at some of the

24 renderings, they're very dark.

25 MR. LATIMER: Uh-huh.

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1 BOARD MEMBER DEIULIIS: And it just raises
2 some questions. It's an exciting space. I
3 know exactly what you're trying to do,
4 tropical. But it -- I wonder a little bit
5 about, you know, thoughts given to lighting and
6 security. And it looks like it's a pretty long
7 pathway back. Can you talk a little bit about
8 that?

9 MR. LEE: Absolutely.

10 Through the Chair, thank you so much for
11 that question.

12 One of the purposes of the new NICU tower
13 was to create a new front door for both the
14 hospital and children's. This idea that this
15 was an entrance or is being used as an entrance
16 both -- either in or out in any major capacity
17 is gone. That happened because of the new NICU
18 tower. Everybody is directed to that.

19 This is now a -- not open 24 hours a day,
20 almost always going to be either staff or maybe
21 surgery discharge, so you're getting discharged
22 out of it and taken around to a pickup,
23 potentially, but it will not be used as a
24 primary entrance or exit for patients or for
25 the public. It is -- it is -- that is the

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1 THE CHAIRWOMAN: Questions?

2 BOARD MEMBER DAWSON: Has a complete
3 subsurface analysis been done?

4 MR. LEE: Through the Chair, "complete" is
5 a big word. In this area of the campus, it's
6 kind of unbelievable. This might be one of the
7 most complex projects that this Baptist team
8 and this design team work on in our careers.
9 We'd like to think we got most of it figured
10 out, but we will be extremely careful as we
11 start peeling back those layers and
12 understanding what might not be on either
13 infrared, found utilities, or on plans of where
14 our utilities might be in this area. So we'll
15 tread very, very carefully.

16 Not to mention, this is an emergency
17 department. It can never shut down, not for
18 one minute. So it will remain open the entire
19 time, ambulance drop-off, patient drop-off
20 helicopter drop-off. So the staging and the
21 enabling of this project, it is going to take a
22 very long time. We're going to be very, very
23 careful.

24 BOARD MEMBER DAWSON: Thank you.

25 MR. LEE: Through the Chair, thank you so

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1 purpose of the new NICU tower.

2 BOARD MEMBER DEIULIIS: Okay.

3 MR. LEE: In terms of safety and lighting,
4 Baptist takes patient safety and public safety
5 extremely seriously on their campus, so the
6 idea of lighting, trip hazards, wayfinding,
7 this is -- this is above and beyond what most
8 businesses do because patients are so fragile
9 and because they need that additional time and
10 extra support in order to remain safe once
11 they're on Baptist's campus.

12 BOARD MEMBER DEIULIIS: Okay. Yeah. If
13 you look at some of the renderings, you can
14 kind of probably imagine my idea -- my concern
15 about a late night, someone leaving or entering
16 and being down -- there's so much landscaping
17 that's going on.

18 MR. LEE: Yeah.

19 BOARD MEMBER DEIULIIS: The renderings are
20 a little on the dark side, so it just -- it
21 raises concerns, do I want my 65-year-old mom
22 nurse wandering through that area after a
23 late-night shift or those types of things. So
24 just making sure that's on you radar.

25 MR. LEE: Through the Chair, absolutely.

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1 much for that question.

2 BOARD MEMBER CRAIG: Madam Chair, a
3 landscaping question.

4 Are you comfortable with the amount of
5 shading on site? Obviously, there's some
6 natural shading from the abutting buildings,
7 but for staff that are on a lunch break or
8 something like that, obviously there's some
9 canopy coverage from some of the trees, but for
10 certain times of the day, are you confident, is
11 Baptist confident on the amount of shade
12 available?

13 MR. LATIMER: Yeah. So we are -- so
14 the -- largely, the public areas are on the
15 north side of the building.

16 BOARD MEMBER CRAIG: Yeah.

17 MR. LATIMER: So they naturally have a lot
18 of shade. For the times when the sun is
19 directly overhead, there are shade trees in
20 place.

21 BOARD MEMBER CRAIG: Great. Thank you.

22 THE CHAIRWOMAN: Mr. James.

23 MR. JAMES: Yes.

24 So I'm not familiar with the campus. I
25 haven't been there. I'm curious, is there any

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1 pedestrian kind of through traffic in this
2 area? It seems like there might not be.
3 You've got the river on one side, I-95,
4 the Acosta expressway, but anything passing
5 through there? Or is this kind of getting
6 parked and entering the building and then back
7 out?

8 MR. LEE: Thank you for the question,
9 Mr. James.

10 Through the Chair, the Baptist campus
11 always has pedestrian traffic on it. We are
12 always seeing people walking around the
13 campuses moving from, when the weather is
14 pleasant, one side of the campus to the other
15 from the parking garages across the street.
16 We've done a lot of work to actually improve
17 the safety of pedestrian traffic around this
18 area, one, by closing off the existing drop-off
19 that happens right there, but also by
20 clarifying the existing ambulance drop-off and
21 narrowing it down.

22 One of the things we do not want is cars
23 going in the ambulance area, people walking in
24 the ambulance area, or people stopping
25 ambulances from coming in. So we have

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1 understand the question. If you're asking, are
2 we providing signage for people to walk around
3 the campus, I'm not sure that we've done that
4 in this project.

5 MR. PAROLA: If I could maybe, through the
6 Chair, give context to this.

7 Really, the only place to go if one were
8 near here and they didn't want to be there is
9 the Riverwalk. If somebody wanted to get to
10 the Riverwalk, they would stay on San Marco
11 Boulevard. There would be no reason to walk
12 through the campus. As a matter of fact, this
13 campus would be an impediment. And when
14 they're on San Marco Boulevard, they would
15 cross Prudential Drive.

16 We had The Southerly, which is that --
17 it's now brown, hopefully it will be a
18 different color one day -- apartment complex
19 dedicate the space between their building and
20 the railroad tracks as the on-land way to get
21 to the extension of the Riverwalk.

22 That's a lot of words to saying the campus
23 gets you nowhere; if you're on campus, you're
24 there for a reason.

25 MR. JAMES: Okay.

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1 clarified all of that wayfinding with this
2 project as much as possible on a campus with
3 many, many hundreds of beds of care and being
4 the city's emergency department. This is a
5 significant improvement.

6 Through the Chair, I hope that answers
7 your question.

8 MR. JAMES: So I understand you've put a
9 lot of effort into making sure people can move
10 around on the campus. I'm still curious if
11 there's anybody -- and it seems like there's
12 not, but is there anybody that would just be
13 crossing through the campus? And if so, have
14 you accounted for that? Or maybe you want to
15 discourage it and not allow it.

16 MR. LEE: Through the Chair, we want to
17 encourage walking and we want to encourage
18 safety and walking across the street. As
19 Mr. Parola pointed out, there are parking
20 garages across the street, so we want to
21 provide a safe way to cross those crosswalks,
22 and that signage has been (inaudible) as a part
23 of this project and is currently on the campus
24 right now.

25 I'm not a hundred percent sure I fully

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1 THE CHAIRWOMAN: Councilman Miller,
2 anything? Questions?

3 COUNCIL MEMBER MILLER: (Shakes head.)

4 THE CHAIRWOMAN: Okay.

5 All right. Thank you guys so much for
6 that information.

7 If there are no more questions and staff
8 has nothing else, I will move to public
9 comment.

10 I can't see Ava, but Ms. Hill, do we have
11 any public comment?

12 MS. HILL: There are no public comments.

13 THE CHAIRWOMAN: Okay. So will I close
14 the public hearing.

15 And I apologize, everyone, I was rusty
16 after the holidays.

17 Mr. Dawson, if you will now get us in the
18 proper posture.

19 BOARD MEMBER DAWSON: I move to approve
20 DDRB number --

21 THE CHAIRWOMAN: 2024-009.

22 BOARD MEMBER DAWSON: Thank you.
23 -- with staff suggestions.

24 MR. PAROLA: We recommended approval for
25 both conceptual and final. Since the Ordinance

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1 Code doesn't say how far apart they have to,
 2 you know, occur, I would imagine our attorney
 3 might say take the conceptual vote on it, then
 4 take the final vote on it.
 5 MR. HARVEY: Correct.
 6 THE CHAIRWOMAN: Okay. We can do that.
 7 Okay. So we -- Mr. Dawson, if you don't
 8 mind, would you mind moving conceptual approval
 9 first, and we'll do that.
 10 BOARD MEMBER DAWSON: I'd like to move
 11 conceptual approval on --
 12 MR. PAROLA: 2024-009.
 13 BOARD MEMBER DAWSON: -- 2024-009.
 14 THE CHAIRWOMAN: Okay. Is there a second?
 15 BOARD MEMBER CRAIG: Second.
 16 THE CHAIRWOMAN: Board members, do we have
 17 any discussion on conceptual approval at this
 18 time?
 19 BOARD MEMBERS: (No response.)
 20 THE CHAIRWOMAN: Okay. I'll go ahead and
 21 call for a vote.
 22 All those in favor of approving 2024-009
 23 for conceptual approval, signify by saying aye.
 24 BOARD MEMBERS: Aye.
 25 THE CHAIRWOMAN: Any opposed?

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1 someone who has gone to painstaking lengths to
 2 avoid going to this facility at times of
 3 distress -- I have labored over it for months,
 4 how do I avoid this, in the past -- I am so
 5 excited for this project. It is a beautiful
 6 addition to the campus, which is also a
 7 beautiful addition to our city, so thank you
 8 and good luck.
 9 THE CHAIRWOMAN: Joe.
 10 BOARD MEMBER LORETTA: Just a great job
 11 from the team. Thank you very much for your
 12 time.
 13 BOARD MEMBER DEIULIIS: Nothing
 14 additional.
 15 THE CHAIRWOMAN: Okay.
 16 Councilman Miller.
 17 COUNCIL MEMBER MILLER: (Shakes head.)
 18 MR. JAMES: (Shakes head.)
 19 THE CHAIRWOMAN: Okay.
 20 I just want to add and echo. I,
 21 unfortunately, did have to visit Baptist ER
 22 with my mother last year. And as I shared with
 23 Mr. Lee, when you have anxiety and all kinds of
 24 adrenaline coursing through your body, the last
 25 thing you want to be doing is worrying about

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1 BOARD MEMBERS: (No response.)
 2 THE CHAIRWOMAN: Okay. We will now move
 3 to final approval of 2024-009.
 4 If, Mr. Dawson, you will now posture us --
 5 BOARD MEMBER DAWSON: I would like to move
 6 for final approval of 2024-009.
 7 BOARD MEMBER DEIULIIS: Second.
 8 THE CHAIRWOMAN: With staff
 9 recommendations.
 10 BOARD MEMBER DAWSON: With staff
 11 recommendations.
 12 THE CHAIRWOMAN: Great. And a second from
 13 Mr. Deiuliis?
 14 BOARD MEMBER DEIULIIS: (Nods head.)
 15 THE CHAIRWOMAN: Wonderful.
 16 Thank you. That is tricky, but that was a
 17 fun one for January.
 18 Okay. So now, Board Members, we'll have
 19 discussion, if there is any. Just for kicks,
 20 I'll start with the right side of the table.
 21 BOARD MEMBER CRAIG: No comments from me.
 22 Thank you.
 23 BOARD MEMBER DAWSON: God bless you. No
 24 comments from me, either.
 25 BOARD MEMBER BERLING: I'll just say as

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1 wayfinding or where to park your car.
 2 I did have some concerns previously, but I
 3 am thrilled to see the design and the thought
 4 that was put towards exactly that, is making
 5 that easy for families and users. I also am
 6 very excited about the wayfinding that Mr. Lee
 7 described and the thought that's gone into
 8 that.
 9 And also red. Red is the first color that
 10 catches our eye, and how visible y'all have
 11 intentionally made that, I think, will be very
 12 helpful to users who don't want to be here, but
 13 they've got to know where to go. So thank you
 14 guys for really, truly putting a lot of thought
 15 into this design.
 16 So that being said, I hope I don't have to
 17 go back to use it, but I would like to go back
 18 to see the finished product.
 19 So if there's no more discussion, Board
 20 Members, we'll go ahead and call for a vote for
 21 final approval of 2024-009.
 22 All those in favor, signify by saying aye.
 23 BOARD MEMBERS: Aye.
 24 THE CHAIRWOMAN: Any opposed?
 25 BOARD MEMBERS: (No response.)

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1 THE CHAIRWOMAN: Okay. Final approval as
 2 well.
 3 And do we have any new business, staff?
 4 Anything?
 5 MR. PAROLA: No.
 6 THE CHAIRWOMAN: Okay.
 7 Ms. Hill, is there any general public
 8 comment?
 9 MR. HILL: There are no public comments.
 10 THE CHAIRWOMAN: Okay. Then I will move
 11 we adjourn at 2:45.
 12 (The foregoing proceedings were adjourned
 13 at 2:45 p.m.)

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1 CERTIFICATE OF REPORTER
 2
 3 STATE OF FLORIDA)
 4)
 5 COUNTY OF DUVAL)
 6
 7 I, Diane M. Tropa, Florida Professional
 8 Reporter, certify that I was authorized to and did
 9 stenographically report the foregoing proceedings and
 10 that the transcript is a true and complete record of my
 11 stenographic notes.
 12
 13
 14

15 DATED this 30th day of January 2025.

16
 17 _____
 18 Diane M. Tropa
 Florida Professional Reporter

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