U.S. DEPARTMENT OF VETERANS AFFAIRS
Office of Construction & Facilities Management
Washington DC 20420

U.S. DEPARTMENT OF VETERANS AFFAIRS

PROPOSED SEISMIC UPGRADES AND IMPROVEMENTS AT THE VETERANS AFFAIRS MEDICAL CENTER (VAMC) LOCATED IN PORTLAND OREGON

Virtual Public Meeting – Question/Answer Documentation

Veterans Affairs (VA) held a virtual public meeting on February 22, 2022. VA presented information on the proposed action, Alternative A, Alternative B, the Draft Environmental Assessment (EA), and information on submitting public comments. Five individuals attended the public meeting in addition to VA panelists and meeting facilitators. A total of nine questions were asked during the virtual public meeting. The VA's initial responses provided to questions received during the public meeting are summarized in Table 1.

The 30-day comment period closes March 15, 2022. VA will prepare and publish a Final EA following the 30-day comment period, which will summarize and formally address all comments received on the Draft EA.

Table 1. Questions Received and VA Responses

Question No.	Question/Comment	VA Response
1	Only traffic counts for pre-determined "peak hours" were used in the Traffic Impact Analysis (7:00-9:00 AM and 4:00-6:00 PM) but 24-hour traffic counts in 2019 show that the actual peak hours are 6:00 to 9:00 AM, and 3:00 to 7:00 PM (Table 3-1). Narrowing the peak hour period leaves out over 34% of true peak hour traffic. Both the VAMC and Oregon Health & Science University utilize staggered work hours, so the defined "peak hours" should be determined by the actual data rather than a generalized rule. Why was that not done?	Table 3-1 aggregates all exiting and entering vehicles observed per hour and provides total traffic counts. It further identifies the singular peak hour per day in which traffic volumes were at their highest, which in the AM was 7AM to 8AM and in the PM was between 5 PM and 6 PM. References to 7 – 9 AM and 4 – 6 PM are typical for traffic studies in that the AM peak hour usually occurs between 7 AM – 9 AM and the PM peak hour usually occurs between 4 PM – 6 PM. It is a singular hour that determines the peak traffic hour. Further analysis in the traffic study does in fact incorporate all traffic count data and does not exclude any data or further narrow the peak hour. In regard to staggered work hours, the VA will utilize existing traffic data and available information from the VAMC medical center on work hours, shifts, ingress and egress to further evaluate traffic patterns on campus.

Question No.	Question/Comment	VA Response
2	Why was the Campus Dr./Terwilliger intersection studied in TIA but not Homestead/Terwilliger intersection that is a major access to Gaines and upper VA Hosp. Rd. (i.e.: now garage)? Homestead Dr./Terwilliger intersection is just south of VA main entrance on Terwilliger and leads to #2 from southwest.	The Homestead Drive/Terwilliger intersection was not identified early on during the planning stages for the VAMC improvements as an intersection of concern based upon engineering judgement. The supporting traffic study in addition to preceding studies focused on intersections that provide direct access to the VAMC. The intersection of SW 6th Avenue and SW Gaines Street was analyzed and no operational issues were observed whatsoever. Further a minimal increase in right-hand turn volume from SW 6th Avenue to SW Gaines Street was determined as a result of the proposed action. Construction related vehicles will not be accessing the VAMC campus using SW Homestead and 6th Avenue Drive. VA is committed to coordinating with medical center staff to also ensure this route is not utilized as a primary route to the VAMC.
3	Who uses the new Specialty Care Bldg. (110)? …staff only, or patients too?	Staff and patients will use the Specialty Care Building. Currently, most outpatient visits and VA business functions occur within the Main Hospital Building – Building 100. Outpatient services will be moved to Building 110 in order to allow space within Building 100 to provide single-bed rooms, with their own bathroom, for increased privacy and improved healthcare for our patients. The new Specialty Care Building will provide adequate space for outpatient services along with primary VA business functions. Additionally, having the new building will allow for seismic upgrades while accommodating staff, patients and VA workload.
4	Do you not anticipate traffic cutting through residential areas as a result of Terwilliger congestion? I am afraid this problem will increase.	The VA does not anticipate increased congestion along Terwilliger Boulevard as a result of the proposed action. In the traffic analysis, the VA considered all probable routes and roadways to the VAMC campus. Based on findings within the TIA, the VA determined that traffic volumes are not anticipated to significantly increase or cause congestion in residential areas.

Question No.	Question/Comment	VA Response
5	If new Bldg. 111 will be for outpatient use then won't there be much more turnover of vehicles over the day, contrary to assumptions in TIA of very little turnover from staff use.	The intent of Building 111 is to provide adequate parking in order to meet the existing demand necessary to support patient care. The capacity for outpatient care will not increase as a result of this parking structure and an increase of turnover vehicles per day is not anticipated.
6	Will construction traffic be allowed to use the Terwilliger onto Homestead Dr? We who live on that roadway hope NOT.	No. Construction traffic will not be allowed to use Homestead Drive.
7	What turnouts on Terwilliger will be used on a daily basis for construction parking.	No turnouts will be used on a daily basis for construction parking.
8	Where are proposed traffic signals going to be?	The VA has not proposed any traffic signals as part of the proposed action. VA recognizes and supports the planning, discussion, and potential implementation of future non-VA traffic mitigation measures, in conjunction with the local communities and the City of Portland Bureau of Transportation to address the existing operational issues at nearby intersections. The supporting TIA was an objective review of existing traffic conditions and although mitigation measures were recommended in the study to improve existing conditions, VA is not proposing any traffic signals as part of the proposed action.
9	If intersections 4 and 8 already function at LOS F (failure) then how can you say in TIA & Draft EA that additional traffic won't make much of a difference?	Failing LOS based on existing conditions at intersections 4 and 8 will continue to slightly worsen based on forecasted average daily traffic volumes under a no-build scenario. Minimal impacts to intersections 4 and 8 are anticipated as a result of the proposed action as presented in the intersection performance summary provided in the TIA. Movement delay in seconds for the build and no-build scenarios has been provided for both of these intersections.