MEDICAL DISTRICT MASTER PLAN

SPRING 2013
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Seton Healthcare representatives, including:
Greg Hartman, Kate Henderson, Peter Rieck, Alan Bell, Doug Strange
Central Texas Healthcare representatives, including:
Juan Garza and Larry Wallace
The University of Texas at Austin Medical District Master Plan articulates the vision for a new medical district on the southern edge of the University of Texas in downtown Austin. The medical district will be a compact, dynamic, urban setting that nurtures innovation, collaboration, and community. It will be developed as a partnership between UT Austin, Seton Healthcare (Seton), and Central Texas Healthcare (Central Health), and will contain the university’s planned new medical school and medical research building, as well as a new teaching hospital and medical office building (MOB). The vision for the district is founded on an innovative idea for medical education that integrates healthcare, teaching, and research within an interdisciplinary setting, taking full advantage of adjacent university resources.

The master plan establishes an overall planning, design, and programmatic framework for the entire medical district, and a more detailed plan and program for the first phase of development. The plan reinforces the integration of activities and ensures that the critical adjacencies and relationships among the medical school, teaching hospital, research building, and MOB are carefully calibrated to ensure success.

The new district will provide a high-quality and welcoming environment for physicians, faculty, students, researchers, patients, and visitors. It will emulate the best qualities of the main campus with its shady tree-lined spaces and streets and human-scaled urban campus feel. The urban design structure will extend and restore the Austin city grid in order to preserve the connected and pedestrian-oriented nature of the district, and ensure that the area is seamlessly integrated with adjacent areas. A clear and simple grid of pedestrian pathways will be maintained through the district, and building heights and step backs will create comfortable, appropriately-scaled urban streets, courtyards, and plazas.

The primary vehicular approaches to the medical district are from 15th Street and Martin Luther King Jr. Boulevard, and Red River Street and Trinity Street. At these intersections, two important “welcome plazas” will provide clear and convenient visitor access to the district’s four main facilities. Just north of 15th Street on Red River, a tree-lined plaza with benches and special paving will create a welcoming urban place between the main entrances to the hospital and medical school. Similarly, directly adjacent to a proposed light rail stop at 17th on Trinity Street, a wide shady plaza will connect to Waller Creek, and accommodate the main entrances to the new research building and MOB.

Waller Creek will provide natural relief from the dense urban district that surrounds it. South of 15th Street, the City of Austin has made or planned investments to protect and enhance the overall experience of the creek. In addition, the university has committed to the enhancement of the creek corridor on the main campus. Similar investments will be made within the district to ensure that Waller Creek is an integral and accessible amenity that reinforces the wellness function of the district.
BACKGROUND

The University of Texas at Austin campus master plan identifies the area of the central campus east of Trinity Street and south of Martin Luther King Jr. Boulevard as the potential location for The University of Texas at Austin Medical District and location for the new medical school. This area was selected mainly because of its proximity to the University Medical Center Brackenridge complex on East 15th Street, the presence of the School of Nursing, and the availability of potential development sites.

The UT Austin Medical District will be developed as a partnership between the university, Seton Healthcare (Seton), and Central Texas Healthcare (Central Health). Seton and Central Health are currently partners in the University Medical Center Brackenridge. The first phase of development within the medical district will include the UT Austin medical school, a research building, a vivarium, and an expansion of the university’s central chiller station that will be needed to support the new facilities. Seton will also develop a new 220-bed teaching hospital to replace the existing Brackenridge hospital. A medical office building (MOB) is also a required part of the medical district program, together with a 1,000-space parking structure for the MOB. The existing Brackenridge parking garage will also be preserved to serve the new hospital.

The university plans to open the medical school in the fall of 2016, while the planned opening of the hospital is January 2017. Given this aggressive schedule, the partners have fast-tracked the medical district planning process in order to confirm sites for each building and move forward with required infrastructure improvements, architect selection, and project design.
PROCESS

The UT Austin Medical District planning effort involved the following primary tasks:

- Defining a master plan level program for the Phase 1 medical facilities as the basis for planning, and developing an order-of-magnitude projection of long-term facility needs for the medical district and associated research.

- Identifying potential development sites within the medical district study area, and testing the accommodation of the Phase 1 facilities on the various sites. Of the three options studied only the master plan option documented in this report proved feasible because of site constraints.

- Establishing an overall urban design framework for the district, addressing land use, open space, vehicular circulation, parking and service, pedestrian circulation, and landscape.

- Articulating a phasing strategy and order-of-magnitude cost estimates for infrastructure and public realm improvements within the district.

The master planning process was structured around a regular series of work sessions with a Facilities and Space Working Group and Master Plan Steering Committee that the university established to lead the planning effort. The Facilities and Space Working Group included representatives from various UT academic, administrative, and support groups, as well as from Seton and Central Health. The work session process brought together key members of the project team to review overall progress, discuss specific issues, and establish direction for moving forward.
Advisory committee workshop
PRINCIPLES

1 Nurture an Emerging Health and Life Sciences Sector
   - Create opportunities for public, private, and institutional enterprise to co-locate in the medical district
   - Foster collaboration, innovation, and job creation
   - Attract and retain high quality and creative staff, researchers, physicians, and faculty
   - Attract and accommodate emerging enterprises in the health and life sciences fields

2 Forge Strategic Partnerships
   - Develop and distribute program mixes that accommodate the shared interests of the hospital, the university, and other invested partners
   - Create the physical infrastructure for collaboration and interaction among partners

3 Create High Quality Design and an Attractive Public Realm
   - Embrace Waller Creek as a valuable asset and a central feature in the plan and enhance its ecological relevance
   - Extend the shady, human-scaled landscape character of the core campus into the medical district
   - Site and design buildings to maximize energy conservation and passive cooling, minimize CO₂ emissions, improve human comfort, and emulate the healing qualities of the place
   - Locate service, emergency, and vehicular access to minimize pedestrian-car conflict and negative environmental impacts
Nurture an Emerging Health and Life Sciences Sector
forge strategic partnerships
create high quality design and an attractive public realm
establish a resource for the Austin community
enhance connectivity and access
improve learning, research, and clinical opportunities
accommodate growth

4 Establish a Resource for the Austin Community
- Create attractive and welcoming resources for Austin’s community and underserved populations
- Establish a new anchor institution in the city that will achieve high quality patient care

5 Enhance Connectivity and Access
- Connect the medical district seamlessly to the university, the Capitol District, and to the downtown
- Site service, emergency, staff parking, and visitor access to minimize pedestrian-vehicular conflicts, and improve the overall quality of the user experience
- Extend existing paths and bike trails, especially along Waller Creek, to create a continuous connection between the university and the downtown

6 Improve Learning, Research, and Clinical Opportunities
- Create buildings that support excellence in medical education and research in the training of tomorrow’s medical professionals
- Optimize programmatic adjacencies to ensure synergistic and efficient interrelationships between users

7 Accommodate Growth
- Accommodate initial and future space needs of the medical school, hospital, and other university uses, as well as other public-private synergistic and complementary uses over the next ten to twenty years
- Phase new development to minimize the impact on existing uses and operations
- Preserve land to provide flexibility for future unknown and innovative uses
SITE ANALYSIS

INTRODUCTION

The UT Austin Medical District study area encompasses approximately 65 acres of urban land within the southeast portion of the university’s main campus. The district boundary is defined by I-35 in the east, Trinity Street in the west, the Myers Track and Soccer Stadium in the north, and a point just south of the existing Brackenridge hospital between 12th and 13th streets.

The portion of the study area south of Martin Luther King Jr. Boulevard and west of Red River Street is currently home to the UT School of Nursing, the Collections Deposit Library, the Penick-Allison Tennis Center, Centennial Park, and the Trinity garage. The area east of Red River contains the Erwin Special Events Center, the Denton A. Cooley Pavilion, John Hargis Hall, the Arno Nowotny Building, and large surface parking areas. University land north of Martin Luther King contains the Mike A. Myers Soccer and Track Stadium, the Lee and Joe Jamail Texas Swimming Center, the School of Social Work building, and surface parking lots.

The University Medical Center Brackenridge site contains the hospital building and associated services, the Clinical Education Center Simulation and Education buildings, clinics and rehabilitation spaces, the Blackstock Family Health Center professional office building, parking structures, and the Travis County Medical Examiner’s office.

Waller Creek, occupying a significant portion of the district between Trinity and Red River, is a tremendous natural asset to the district, but creates topographic and flooding challenges that have a significant impact on planning for the district.

Austin in 1887, with the future site for the Medical District outlined in orange.

The historic Austin street grid is still recognizable within the study area, as most of the road rights-of-ways easements have been maintained despite the closure of streets and the realignment of Red River. Restoring the rhythm and pedestrian scale of the urban street grid in the new medical district is a fundamental goal of the plan.
EXISTING ILLUSTRATIVE WITH PLANNING BOUNDARY

UT AUSTIN CAMPUS BOUNDARY
MEDICAL DISTRICT PLANNING BOUNDARY
ASSUMPTIONS

The following are several site and development issues that require consideration and resolution in the plan, as well as the assumptions that were made in relation to these considerations. These considerations include:

- Capitol view corridors
- Waller Creek floodplain
- Heman Sweatt Campus
- Centennial Park
- Red River relocation
- Erwin Center and Cooley Pavilion

CAPITAL VIEW CORRIDORS

Many of the capitol view corridors that preserve views of the Texas State Capitol building cross the proposed medical district and create significant restrictions on building height. Specifically, five different view corridors have an impact on the development potential of the area, including corridors 13, 30, 23, 24, and 25, which create a range of height limits as low as 66 feet on the land between Trinity Street and Waller Creek.

WALLER CREEK FLOODPLAIN

The floodplain associated with the Waller Creek corridor creates significant restrictions to development between Trinity Street and Waller Creek. The analysis considered both the most updated FEMA floodplain delineations as well as City of Austin requirements. The FEMA 100-year floodplain is the most restrictive boundary, and is the basis for determining the development potential of land within the medical district. The FEMA 100-year floodplain map is based on latest flood studies from the City of Austin and is identified as a zone between 493 feet at 15th Street and 502 feet at Trinity Street. The plan assumes that no short-term development will occur within the FEMA 100-year floodplain because the process required to mitigate development within this zone will be time consuming.

In summary, the 100-year floodplain requirements limit the development potential of the site west of Waller Creek and eliminate the possibility of siting the hospital on the blocks between Trinity Street and Waller Creek.

HEMAN SWEATT CAMPUS

The block north of the Erwin Center and directly east of Red River Street has historic significance and was once part of a complex known as Little Campus. It is now known as the Heman Sweatt Campus, after civil rights pioneer Heman Sweatt. Since its beginnings in the 1850s, it has been the site of the state’s Blind Asylum, a mental hospital, a fairground, a WWI aeronautics school, a boys’ dormitory, and a university visitor center. The area currently contains two 19th-century buildings—John Hargis Hall and the Arno Nowotny Building.

John W. Hargis Hall, was built during the Reconstruction, and is now named for the first African-American admitted to UT as an undergraduate. The building currently houses the UT Admission Office. The Arno Nowotny Building is a handsome antebellum limestone building constructed by Abner Cook, who also built the Texas Governor’s Mansion. It currently houses the Center for American History, which offers space for exhibitions.

Although the Heman Sweatt Campus is historically significant and contains important buildings, the landscape dates from the 1980s and should
eventually be replaced by a more historically appropriate design. In the near term, the lawn areas between the buildings are available for the parking replacement needs of the Erwin Center when the new Dell Medical School is constructed on a portion of Lot 108.

CENTENNIAL PARK REPLACEMENT

The review of potential development sites within the study area revealed that the Centennial Park site is the only viable option for the hospital. Centennial Park was a project by the Austin Chamber of Commerce to mark the university’s centennial in 1983 and features a winding path, sculptures, and paving tiles bearing the names of park donors. While some portions of the park are located within the Waller Creek floodplain and will remain as open space, some of the memorial elements and the adjacent Penick-Allison Tennis Center will also require relocation. Conversations about potential options for the tennis center relocation were initiated during the planning process.
RED RIVER RELOCATION

The curvature in the existing alignment of Red River Street limits the development potential of the blocks immediately south of the School of Nursing along the east side of Waller Creek. Because of the current parking, service, and staging needs of the Erwin Center and Cooley Pavilion, the site directly south of these facilities is also limited in size and cannot accommodate the new hospital footprint adequately. Closing Red River to through traffic was considered initially to create a larger development site for the hospital, but complete closure is problematic given the need to maintain convenient transit and shuttle access through the district. Realignment of Red River between 16th and 15th street will maintain the functionality of Red River while creating significantly more development capacity in the blocks between Waller Creek and a re-aligned Red River Street. It will also restore Red River to its original north-south alignment. The new site that is created on the west side of the street will become the only site in the medical district that is large enough to accommodate the footprint of the new hospital.

FUTURE RELOCATION OF THE FRANK ERWIN SPECIAL EVENTS CENTER AND COOLEY PAVILION

The Frank Erwin Special Events Center is currently used for both athletics and entertainment events. Built in 1977, the facility is outdated and will require major investment in the future. The Erwin Center will likely be replaced at a different location within the next 10 to 15 years. When the Erwin Center is relocated, it is likely that the Cooley Pavilion will be renovated or relocated to make room for future buildings. In the near term, the Erwin Center and Cooley Pavilion will continue to be fully operational, accommodating both athletics practice and game needs and community-wide events. A significant portion of Lot 108, the large parking area south of the Cooley Pavilion, is used for event staging and must continue to function fully. The service drive that is located under the Cooley Pavilion between Red River and the Frontage Road must continue to provide access for large trucks to the Erwin service dock. There are currently 120 parking spaces that are available for VIPs and Executive Suite visitors which must be relocated temporarily to the Heman Sweatt Campus north of the Erwin Center.

SITE AVAILABILITY

Several existing facilities in the medical district must remain operational and accessible at least for the short term. The Brackenridge Hospital cannot be demolished until the new hospital and MOB are complete. The Erwin Center and Cooley Pavilion will remain operational at least in the short term. Other buildings and uses in the district have a variety of timelines as illustrated in the diagram on the opposite page.

A significant portion of Lot 108 must remain in use by the Erwin Events Center and the remaining land is too small to accommodate the hospital footprint. The area between Trinity Street and Waller Creek is significantly impacted by the 100-year FEMA floodplain. The buildable site in this area is too small and irregular to accommodate the large footprint of the hospital. Given the limited availability or large development sites in the short term, the only viable site for the hospital is the site created by the realignment of Red River Street.
Potential Sites

<table>
<thead>
<tr>
<th>Site</th>
<th>Acreage of Available Sites</th>
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<tbody>
<tr>
<td>1</td>
<td>2.69</td>
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<tr>
<td>2</td>
<td>2.22</td>
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<td>11.3</td>
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<tr>
<td>9</td>
<td>3.1</td>
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Building Removal Timeline

**PERMANENT USE**
1. Historic buildings from the 19th century: John R. Hargis Hall and Arno Nowotny Building
2. Trinity Garage
3. 15th Street Parking Garage
4. Plant Operations

**LONG TERM USE (16+ YEARS)**
5. Nursing School
6. Clinical Education Center
7. CEC Parking Garage

**MIDDLE TERM USE (6-15 YEARS)**
8. Erwin Center
9. Denton A. Cooley Pavilion
10. Collections Deposit Library
11. Cyberknife

**SHORT TERM USE (1-5 YEARS)**
12. UMCB
13. Blackstock Family Health Center
14. Hospital Heliport
# PROGRAM

## & PROGRAM ADJACENCIES

### PROGRAM ELEMENTS

The Phase 1 program for the UT Austin Medical District consists of an academic building for the medical school, which could include space for potential intra-professional education (IPE) with other health profession schools such as nursing and pharmacy, a research building and vivarium, and a potential expansion to the university’s chilling station to support these facilities. An MOB to provide space for specialty clinics, medical offices, hospital support, and clinical research, and a 1,000-space parking structure to serve the MOB will also be developed in Phase 1. Phase 1 program elements to be developed by Seton and Central Health include a new 220-bed teaching hospital.

UT developed the initial medical school program based on the enrollment and faculty FTE assumptions that are summarized in Table 1. The hospital and MOB programs were developed by Seton and Central Health based on an analysis of long-term healthcare needs within the Austin service area, and anticipated changes in public medical service delivery. The overall medical district program was refined and confirmed through discussions with the Facilities and Space Working Group and Seton and Central Health stakeholders during the master planning process. The program consists of master plan level space needs for each facility, which were employed to test potential sites and adjacencies. The detailed program for each project will be refined once the university hires a dean for the medical school, and upon selection of architects for each project. The UT Austin Medical District program is summarized in Tables 2A and 2B.

### Table 1. Medical School Enrollment and Faculty FTE

<table>
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<tr>
<th></th>
<th>Phase 1 FTE</th>
<th>Future FTE</th>
<th>Comments</th>
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<tr>
<td><strong>Students</strong></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Total Medical</td>
<td>200</td>
<td></td>
<td>Assumes 50 incoming students</td>
</tr>
<tr>
<td>Total PhD</td>
<td>125</td>
<td></td>
<td>Assumes 25 incoming PhD students</td>
</tr>
<tr>
<td><strong>Residents</strong></td>
<td>175</td>
<td>350</td>
<td>Over 10 years</td>
</tr>
<tr>
<td><strong>Faculty</strong></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Basic Science</td>
<td></td>
<td>36</td>
<td>Over 5 years</td>
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<tr>
<td>(lab-based)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Clinical Science</td>
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<td>17</td>
<td>Over 5 years</td>
</tr>
<tr>
<td>(patient-based)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Clinical Lab</td>
<td></td>
<td>17</td>
<td>Over 5 years</td>
</tr>
<tr>
<td>(lab-based)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Medical/Surgical</strong></td>
<td>150</td>
<td>250</td>
<td>Over 10 years</td>
</tr>
<tr>
<td><strong>Staff</strong></td>
<td>TBD</td>
<td>TBD</td>
<td></td>
</tr>
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</table>
The medical district is expected to grow over time to include additional UT medical research buildings, and possibly facilities for other health profession programs. The university might also consider developing some housing for medical students within the district, as well as other supporting commercial uses.

Seton and Central Health plan to develop a 120-bed psychiatric hospital, cancer center, a second phase MOB, and a parking structure containing another 500 spaces. The Travis County Medical Examiner’s Office also plans to expand its current building area within the Brackenridge site by 51,000 square feet. These additional program elements are listed in Table 3.

### PROGRAM ADJACENCIES

The planning process identified several critical program adjacencies through discussions with the Facilities and Space Working Group and Seton and Central Health stakeholders. The adjacencies were key drivers of the site selection process and the master plan recommendations. They include:

- The teaching hospital must be located with immediate pedestrian access to both the medical school, the MOB, and patient parking
- UT’s research building must be located within a maximum of one or two blocks of the medical school

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**Table 2a. Dell Medical School Program**

<table>
<thead>
<tr>
<th>PROGRAM ELEMENT</th>
<th>GSF</th>
</tr>
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<tbody>
<tr>
<td>Education and Administration Building</td>
<td>75,000</td>
</tr>
<tr>
<td>Research Building and Vivarium</td>
<td>240,000</td>
</tr>
<tr>
<td>MOB Phase 1</td>
<td>200,000</td>
</tr>
<tr>
<td>Parking Structure (1,000 spaces)</td>
<td>325,000</td>
</tr>
<tr>
<td>Intra-Professional Education (IPE)*</td>
<td>+/- 50,000</td>
</tr>
</tbody>
</table>

*Not included in Phase 1 planning budget.

**Table 2b. Teaching Hospital and MOB Program**

<table>
<thead>
<tr>
<th>PROGRAM ELEMENT</th>
<th>GSF</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hospital (220 beds)</td>
<td>480,000</td>
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</tbody>
</table>

**Table 3. Future Medical District Program**

<table>
<thead>
<tr>
<th>PROGRAM ELEMENT</th>
<th>GSF</th>
</tr>
</thead>
<tbody>
<tr>
<td>Psychiatric Hospital (120 beds)*</td>
<td>240,000</td>
</tr>
<tr>
<td>Cancer Center and MOB Phase 2*</td>
<td>150,000</td>
</tr>
<tr>
<td>Parking Structure (500 spaces)*</td>
<td>162,000</td>
</tr>
<tr>
<td>Travis County Medical Examiner’s Office Expansion*</td>
<td>51,000</td>
</tr>
</tbody>
</table>

*Potential future program element which could be planned and implemented by others. This will not be by UT Austin.
The master plan for the new UT Austin Medical District proposes a compact, connected, and functional district that will create a high quality and comfortable new home for physicians, faculty, students, and researchers, and a welcoming new destination for patients and visitors. The new medical district will emulate the best qualities of the main campus with its shady tree-lined spaces and streets and human-scaled urban campus feel. With a Floor Area Ratio (FAR) of 2.0, it will also be as dense as the core campus to accommodate the tightly knit and interconnected community of health professionals and academics within a walkable, synergistic urban context.

The urban design structure of the district, an extension and restoration of the Austin city grid, will preserve the connected and pedestrian-oriented nature of the district and ensure that the area is seamlessly connected to adjacent districts. Buildings in medical districts are typically very large and the UT Austin Medical District will be no exception. The urban design framework and related design guidelines will ensure that a clear and simple grid of pedestrian pathways is maintained, and building heights and step backs create comfortable, appropriately-scaled urban streets, courtyards, and plazas.

The primary vehicular approaches to the medical district are from 15th Street and Martin Luther King Jr. Boulevard, and Red River Street and Trinity Street. A fundamental design principle is to minimize the exposure of back-of-house functions, such as service and parking, along these major gateway streets. Where there are no other options to accommodate service access, as is the case with the hospital along Red River, every effort must be made to create architectural screening and ensure a high quality pedestrian experience.

There are two important “welcome plazas” that clearly identify the main entrances to the key facilities in the district. Just north of 15th Street on Red River, a tree-lined plaza with benches and special paving creates a welcoming urban place between the main entrances to the proposed hospital and medical school. Similarly, directly adjacent to the proposed light rail stop at 17th on Trinity Street, a wide shady plaza connects to Waller Creek, and accommodates the main entrances to the new research building and medical office building. Although there will be many other points of entry, the two “welcome plazas” will provide clear and convenient visitor access to the district’s four primary facilities.

Waller Creek will provide natural relief from the dense urban district that surrounds it. South of 15th Street, the City of Austin has made or planned investments to protect and enhance the overall experience of the creek. In addition, the university has committed to the enhancement of the creek corridor on the main campus. Similar investments will be made within the district to ensure that Waller Creek is an integral and accessible amenity that reinforces the wellness function of the district.
The proposed Medical District, looking northeast toward the stadium and East Campus.
1. View of Welcome Plaza on Red River between the proposed hospital and new medical school

2. View of Trinity Street looking south beyond the new medical office building

3. View of Waller Creek pathways adjacent to proposed medical office building

4. View from Welcome Plaza between the new research building and medical office building
The proposed Medical District, looking South toward the Texas State Capitol building.
WALLER CREEK: EXISTING SECTION
WALLER CREEK: PROPOSED SECTION
RED RIVER HOSPITAL DROP-OFF: PROPOSED STREET SECTION
RED RIVER HOSPITAL SERVICE: PROPOSED STREET SECTION
FRAMEWORKS

The following urban design frameworks organize the medical district master plan, and provide a clear overarching structure to the district from a land use, landscape, and mobility perspective.

LAND USE

The four key facilities and associated parking that are planned in the short term—the hospital, the medical school, the MOB, and a medical research building—are located at the core of the district and are sited to respond to critical adjacencies and parking. The hospital is centered between Waller Creek and Red River Street, and is connected by pedestrian bridges across 15th Street to the existing Brackenridge parking garage and across Waller Creek to the proposed MOB. The new medical school sits directly across the street from the hospital, and the new research building is directly adjacent to the MOB. All of these four facilities are within 300 feet of one another, and form a dense active hub at the center of the district. The near-term facilities are also located so that future related development will grow in a logical way that preserves fundamental adjacencies over time. The future growth of the district is described below, under the phasing section of this report.

LANDSCAPE STRUCTURE

One of the most important urban design strategies for the district is the landscape framework. Distinct from many medical districts in the country, the UT Austin Medical District will have a strong landscape identity and cohesiveness. The grid of tree-lined walkways and streets that connect a range of shady courtyards and plazas will ensure an experience similar to the core campus.

MOBILITY

A multifaceted approach to transportation will ensure an appropriate balance between vehicular and service needs in the district and the pedestrian experience. Minor changes are proposed for 15th Street to improve the pedestrian experience. With adjustments to lane and sidewalk configurations of Trinity Street and Red River Street, the primary streets in the district will become more pedestrian in character, while still accommodating vehicle traffic, emergency vehicles, and service access. The realignment of Red River will create more development potential in the district, and will rationalize and reduce the size of intersections. Express buses and UT shuttles can continue to access and travel through the district along Red River. A new light rail that will stop at the intersection of Trinity and 17th Streets will provide a new mass transit for the district.

Pedestrian paths provide a grid of access to all parts of the district, and connect seamlessly to adjacent urban areas. Bicycle routes will tie into existing paths, linking north and south and east and west. Structured and surface parking facilities will address parking needs for students, employees, and visitors over the multiple phases of development.
PHASING

The UT Austin Medical District master plan will be phased over time. The first phase of development will include the medical school education and administration building, the research building and vivarium, the MOB Phase 1 and associated parking, the hospital, and potentially a new chilling station. To facilitate development, the existing Penick-Allison Tennis Center will need to be relocated, as will the Centennial Park memorial features. This phase will be built while the existing Brackenridge hospital and Erwin Center continue to operate. The second phase of development can occur in the future south of 15th Street once the existing hospital is vacated. None of the Phase 2 scope would be by UT Austin. The final build-out of the plan would be by UT Austin and can occur as needed once the Erwin Center and Cooley Pavilion are relocated in the future.

PHASE 1

<table>
<thead>
<tr>
<th>Dell Medical School Program</th>
<th>Teaching Hospital and MOB Program</th>
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<tbody>
<tr>
<td>Education and Administration Building</td>
<td>Hospital (220 beds)</td>
</tr>
<tr>
<td>Research Building</td>
<td></td>
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<tr>
<td>MOB Phase 1</td>
<td></td>
</tr>
<tr>
<td>Parking Structure (1,000 spaces)</td>
<td></td>
</tr>
<tr>
<td>Chilling Station (Potential)</td>
<td></td>
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</tbody>
</table>
**PHASE 2**

*Future Medical District Program*
- Psychiatric Hospital (120 beds)
- Cancer Center and MOB Phase 2
- Parking Structure (500 spaces)
- Travis County Medical Examiner’s Office Expansion

**FINAL BUILD-OUT**

*Future Medical District Program*
- UT Austin Future Academic and Research Buildings
- Parking Structures (2)
- Future Housing
SUSTAINABILITY

Sustainability is a core principle for the planning and development of the medical district, building on the precedent set in earlier planning efforts. Sustainability is embedded within every aspect of the main campus master plan and follows clear goals established in the university’s Natural Resource Management and Conservation Strategic Plan.

One of the early questions in the planning process was how to narrow the all-encompassing idea of sustainability into a framework tailored to the master plan and the broader issues and opportunities at UT Austin. The master plan identified seven key themes to serve as benchmark issues: energy, landscape, community, mobility, economic development, mission, and ecology. UT Austin has already taken significant steps towards achieving campus sustainability, with many new buildings achieving LEED Silver and LEED Gold ratings. Future planning studies are poised to take advantage of existing planning frameworks, such as the Sustainable Sites initiative as a guiding framework for a future landscape plan. In addition, interdisciplinary learning is an increasing emphasis in academics, including linking learning and research opportunities to the actual operations of the UT Austin campus.

SUSTAINABILITY IN THE MEDICAL DISTRICT

The planning and development of the new medical district offers a tremendous opportunity to apply sustainability frameworks and deploy sustainable design strategies at the district, landscape, and building scales. The medical district framework offers a unique opportunity for achieving community and health-oriented outcomes, as well as innovative design and engineering performance. Specifically, there are opportunities relating to power, heating, and cooling; parking; stormwater, landscape, and trees; connectivity; and human comfort, happiness, and health. Moreover, innovations that prove successful in the medical district may later be extended to the rest of campus.

SUSTAINABILITY ACCOUNTABILITY

The UT Austin Sustainability Committee proposes five recommendations that deal with various aspects of the medical district, which together form a comprehensive approach to district, landscape, and building planning and design.
1. Evaluate Sustainable Sites Initiative for the Medical District

The focus of the Sustainable Sites initiative (SSI) is on ecosystem services, health, and performance. The SSI addresses early design issues through construction to on-going monitoring of landscape. Adopting an SSI approach, integrated with the importance of exterior and inter-building spaces in a health focused environment, can help guide the university toward an appropriately higher level of ecosystem services in the medical district.

2. Maintain LEED–New Construction Silver for New Buildings in the Medical District

Since 2007, UT Austin has achieved or anticipates achieving a LEED gold rating on seven of the eleven buildings where LEED was integrated within the design and construction process. Given the high energy demands of medical and research buildings, it will be a challenge to achieve optimal energy performance. The LEED framework will continue to be a useful guide to integrate the design, engineering, and construction processes. The University should consider additional investment in exploring cutting edge green design and engineering strategies to achieve energy savings. In addition to district energy strategies, UT should provide training for personnel responsible for operating buildings and performing ongoing maintenance. Beyond better energy modeling, the district energy concept could be further supported by the SSI (see Recommendation 1).

3. Evaluate the LEED Application Guide for Multiple Buildings and on-Campus Building Projects (AGMBC)

The USGBC has developed a tool to assist landowners planning multiple LEED projects over a long period of time, the Application Guide for Multiple Buildings and on-Campus Building Projects (AGMBC). The AGMBC is a documentation support tool, not a rating system. Most of the credits documented in the AGMBC are applicable to both LEED-NC and LEED-Healthcare rating systems.

4. Evaluate LEED–Neighborhood Development for the Medical District

The USGBC rating system, LEED-Neighborhood Development (ND) is specifically designed “to take into account the connections between buildings and their context as well as the natural environment.” While LEED-ND was developed with traditional neighborhoods, the USGBC has made a concerted effort to promote LEED-ND for university campuses, even if only as a planning framework and not in pursuit of a rating.

5. Advance Energy and Water Resource Management Goals

The medical district requires significant new infrastructure to support anticipated energy and water demands. Some questions have been raised about how the needs of the medical district should be influenced by the campus energy and water efficiency goals (as documented in the Natural Resource Management Plan). In the design and planning phases, special attention should be directed toward green design strategies for the district, landscape, and buildings in order to reduce energy consumption. After the new district and buildings are operational, it will be important preserve that operational efficiency through strategies such as commissioning and operations training.

6. Evaluate Models for Funding Sustainability Accounting in the Medical District

Sustainability advocates recognize that sustainability initiatives, such as the recommendations outlined above, carry a perception of higher first cost—especially when the initiatives are not embraced fully at the earliest stages of a design and planning process. Some district-wide sustainability initiatives are appropriately funded through a “distributed costs” model while other initiatives may be more appropriately funded with external funding not already incorporated into the medical district planning. These costs models should be explored and, as appropriate, adopted as part of the district management structure.
The university master plan identified the opportunity to develop an “innovation district” near the university campus to provide space and technical resources that can leverage university research and discoveries into new businesses and products. Successful models for this kind of university public-private partnership research districts include Kendall Square in Cambridge, Massachusetts, and Mission Bay in San Francisco, California. Planning for the innovation district will require participation by a broad range of university, public, and private stakeholders, and must articulate a vision, programmatic focus, and strategy for formation of the district. Issues to be considered in planning include areas of excellence and research clusters that can be the focus of district activity, potential facilities, and locational and connectivity parameters to centers of related research such as the medical school, teaching hospital, engineering, and natural sciences.

A potential location for the Innovation District is illustrated on the diagram on the opposite page. This area responds to the need for adjacency to the medical district and other research activities. Properties within this area are not owned by UT, but could developed through public-private partnerships for research and development.