

The Mid-Polis : 2010 Open Building Competition Challenge

Questions and Answers

April 19, 2011

**Please note that the original wording for some questions have been changed to ensure clarity for all participants reviewing questions and answers.*

Q #	Question	Response
	What is the income/demographic of residents surrounding the site?	Generally these are 'working class' people, meaning they are middle income individuals who are employed in services, education, industry, etc. This demographic will change over time and it has changed in other parts of Somerville.
	What is the situation of current healthcare/wellness around the site now?	Mass General Hospital is across the river to the south of the site. Today there is not a large presence of healthcare but this can and might change in the future. Many other parts of Boston have become healthcare-intensive when anchored by a major hospital.
	Is the hospital on site intended to be a specialized or a general hospital?	
	What does "narrow floor plate building morphology" mean?	Buildings that are designed for daylight in temperate climates use narrow floor plates (in plan view) to increase access to light within the interior. Some resources refer to this as selected the proper 'aspect ratio' or ratio between depth and length. Other sources recommend keeping work areas within 30 feet of exterior daylight sources (windows and curtainwalls).
	How do the "clinical space" in Medical office space and the "clinical space" in Specialty clinical space differ?	Ambulatory care is medical care delivered on an outpatient basis; specialty care is medical care delivered with a specific clinical focus, such as cardiology, cancer, dermatology, etc. While each is basically similar functions of reception, examination, administrative and support spaces facilities for specialty care may include unique diagnostic (imaging and other testing) and treatment spaces (infusion, radiation, and sometimes same day surgery, etc) that may involve longer patient visits, more intense MEP services, grid and floor-to-floor heights.
	Should the 18,000sq ft clinical space be divided into specific units whose use should be defined?	It is not necessary for this level of study.
	[The] words "medical" and "clinical" instead of "hospital" in the requirements. Does it mean functions of medical space and clinical space are different from hospital? If so, what is the difference among the medical office service, specialty clinical, and hospital? Could you please kindly give me some concrete examples about medical office building and specialty clinical building?	Hospitals provide ambulatory and specialty care, but will generally provide more intense level of care, along with emergency services, acute and higher levels of care, and will include overnight beds; support services are more intense to care for patients overnight, and there may be self standing clinical laboratories and other services. Since hospitals house patients who may not be able to fend for themselves, the lifesafety requirements are stringent. Ambulatory, specialty and urgent care does not require overnight stays, nor the intensity of services required of hospitals, and may be contained within Business class code use.
	What details are available regarding the railway to the south of the site, including its future development?	The railway is used by freight, passenger, and commuter trains currently. This mix of traffic will

		likely continue in the future.
	What is "assisted living" ? Could you describe it in more detail?	Assisted living (in the United States) described a facility where the aged and disabled can live independently in home or apartment style dwellings, while receiving regular care from trained healthcare providers who are stationed on site.
	Are "fitness/wellness/rehab center" and "retail" only for the medical center users or also for the neighboring ?	For the neighborhood and region.
	Is the new extension of green-line (MBTA) underground subway or surface light rail?	Assume it will be a surface light rail, similar to the MBTA's blue line north of downtown Boston.
	Please explain Service Space vs. Clinical Space?	Service space supports the clinical functions and will include reception, records, administration, IT backbone, environmental services, storage and receiving, laboratories, etc.
	What are possible functions for public spaces?	Reception, registration, waiting, possibly café, patient education and retail functions.
	Is it possible to link different types of units (for example a Medical office space with a Specialty clinical) in a single building, or they must remain separated?	Either approach is feasible.
	I would like to know if the units [medical office (4), assisted living (3), specialty clinical (4)] must be collocated in different buildings or they can also be placed separated within a single building.	Either approach is feasible.
	What is the difference among medical office, specialty clinical, and fitness /wellness /rehab center ?	Medical office and specialty clinical functions generally focus on ambulatory diagnosis and treatment, while physical rehab expands the notion of treatment to include regular visits that mesh nicely with fitness centers; the opportunity is to provide a broader access to information and specialists to include advice on, say, nutrition, exercise and lifestyle to improve or prevent the need to clinical intervention.
	I wonder if we can make a proposal for the burial of McGrath Highway, leaving on the ground-level only roads with low flow.	You may propose to bury the highway if you make a reasonable case for doing so in your urban plan.
	What exactly do you mean with: "To be replaced with replaced by on-a-grade-4-lane boulevard with 3m planted median"?	This is a road with two lanes running each direction, separated by a strip of planted soil that is 3m wide.
	Is the reconfiguration of McGrath Highway something that we'll design or something already decided? If there's already some kind of project can we have some drawings or references of it?	Current plans place the highway on grade in its existing right-of-way. We do not have plans or images of this. You may make a reasonable proposal for the highway that departs from the existing proposal if your urban plan supports your proposal.
	We have to do a project proposal for the new ground-level "Boulevard"?	You may make a proposal or you can assume the road will be on grade. Entries will be judged on their overall merit that will include many factors other than the highway.
	Is it possible to provide the climatic analysis of the site (sun angle, direction of dominant breeze, etc.)?	Local climate information is available from the National Weather Service Boston Station: http://www.erh.noaa.gov/er/box/
	Is there any need to know the existing lot sizes or should participants determine sizes themselves?	The sizes are implied in the CAD file available for download. The lots within the site were originally intended for industry and are very large. Proposals may change the size of these lots. It is not necessary to show lots in the competition submission – only imply them through the design or your urban plan and the buildings.