



November 24, 2021

Ms. Jacki Byerly
Andover Planning Department
Town of Andover
36 Bartlett Street
Andover, MA 01801

**RE: PROPOSED REHABILITATION FACILITY
140 HAVERHILL STREET, ANDOVER, MA**

Dear Ms. Byerly:

Bayside Engineering prepared the original Traffic Memorandum qualitatively assessing the impacts associated with the proposed Topsail and Commonwealth Detox facility to be located in Andover, MA. This letter report has been prepared to update the traffic and parking projections and to respond to written comments received prior to the October 26 Planning Board Public Hearing from the Town of Andover on the application.

TRAFFIC MEMORANDUM UPDATE

Proposed Project

The site is in the northwest corner of the intersection of Haverhill Street (Route 133) and High Street. Currently, the site consists of Doctors Park I and Doctors Park II. Two driveways currently serve the site, one from Haverhill Street and one from High Street.

The current development proposal consists of construction of two buildings. The first building, consisting of 39,000 gross square feet of space will include a sixty-four (64) bed Acute Treatment Services (ATS) facility and the Clinical Stabilization Services (CSS) facility, to be known as Commonwealth Detox. The second building will consist of a 9,180 square foot (sf) out-patient facility (Topsail) that is currently operating in the existing Doctors Park I building and will be relocated.

Commonwealth Detox will have 34 bedrooms with 64 beds. The first floor will have small offices, a cafeteria and a large group room. The second floor will have a lobby, an exam room, a nurses' station, two (2) bathrooms with showers, a community room, and several sitting areas. The third floor will have several small offices, two (2) medium size group rooms, a nurses' station, an exercise room, and an open lounge area.

Topsail will have an entrance lobby, several small offices, and group meeting rooms on the first floor. The second floor will have clinical staff offices, a conference room and a staff break room. The basement level will have a lunchroom with a small kitchen area, mechanical room, and access to a terrace at the back of the building.

The Commonwealth Detox facility will provide the medical equivalent of withdrawal and detoxification services (in-patient) and the non-medical component of addressing withdrawal on an out-patient basis. Topsail provides clinical addiction recovery services.

The two buildings will replace the existing Doctors Park I building. Access would continue to be provided by way of the driveways to Haverhill Street and High Street.

Proposed Commonwealth Detox Facility Site Traffic Generation

To develop the traffic characteristics of the proposed development, available trip-generation statistics published by the Institute of Transportation Engineers (ITE)¹ was researched and projected site operations and employee data were reviewed. The ITE does not contain trip-generation data for this land use. The closest Land Use Code (LUC) would be a Clinic (LUC 630).

Based on the ITE definition, *'a clinic is a facility that provides limited diagnostic and outpatient care but is unable to provide prolonged in-house medical and surgical care. A clinic may have a lab facility and supporting pharmacy but typically does not have equipment and medical personnel available at an urgent care site.. A clinic typically offers a wide range of services which makes it distinct from a medical office building that typically houses specialized and individual physicians.'* This does not define the proposed operations for the Commonwealth Detox facility. Commonwealth Detox proposes to operate an Acute Treatment Services (ATS) facility. This is the medical withdrawal/detoxification component. Commonwealth Detox proposes to operate Clinical Stabilization Services (CSS), a nonmedical post-withdrawal component. Both ATS and CSS are regulated by 105 CMR 164.000, Licensure of Substance Abuse Treatment Programs and are all inpatient services. Current Outpatient services will be offered in a separate 9,180 +/- square foot building (Topsail).

The trip generation for the proposed Commonwealth Detox facility was determined based on the expected number of employees, expected site operations and delivery activities. Staffing is summarized in Table 1.

¹*Trip Generation*, Tenth Edition; Institute of Transportation Engineers; Washington, DC; 2012.

**TABLE 1
 COMMONWEALTH DETOX FACILITY EMPLOYEE CHARACTERISTICS ^a**

Employee Type	Responsibilities
Medical Director	Licensed MD in Massachusetts with significant experience treating persons with addiction
Executive Director	Masters level professional with extensive experience leading a residential addiction treatment program. Approved by Massachusetts Department of Public Health (DPH) as a Program Director
Nurse Manager	MSN with significant experience leading medical team addressing addiction treatment
Nurse	Supervisor of each medical shift shall be led by a BSN.
Staff Nurse	RN or LPN approved to dispense medications used in residential treatment.
Clinical Director	Master Level licensed independent clinician with a minimum of 4 years of experience supervising clinicians treating persons with addiction
Program Director	Responsible for the administrative functioning of the program. They also maintain staff schedules and act as the middle manager between the staff and the executive director.
Nurse Practitioner	Licensed Nurse Practitioners with psychiatric and medical experience specifically in an addiction treatment setting who will provide psychiatric and medical care.
Counselors	Masters level and/or licensed substance abuse/mental health counselors meeting all Massachusetts requirements.
Case Managers	B.A. or B.S. level education and experience with treatment planning for persons with addiction.

^aStaffing estimates provided by Commonwealth Centers Detox Inc.

**TABLE 1 (CONT.)
 COMMONWEALTH DETOX FACILITY EMPLOYEE CHARACTERISTICS ^a**

Employee Type	Responsibilities
Behavioral Health Technicians	High school graduate with experience recovery coaching for persons with addiction.
Security Guard	High school graduate with training in de-escalation tactics, CPR and how to handle aggressive verbal or physical confrontation of any member of the public who tries to enter the facility or harass the clients.
Food Service Director	Required to meet all Massachusetts and Andover regulations and have experience/expertise in dietary factors that enhance the recovery from addictions process.
Receptionist	Responsible for to answer the telephone, deal with clients, and greet visitors.
Admissions	Responsible for seeing to the admission and discharge of patients.
Food Service Staff	Kitchen staff responsible for preparing patient meals.

^aStaffing estimates provided by Commonwealth Centers Detox Inc.

The number of nurses, behavioral health technicians, case managers and counselors required for the facility are established by federal regulations and are established based on the number of beds in the facility. Attached at the end of this letter is a typical staffing schedule for these employees, which was also used to determine traffic generation for the facility.

The nursing schedule will be split into three shifts (7:00 AM to 3:00 PM, 3:00 PM to 11:00 PM and 11:00 PM to 7:00 AM) with generally two (2) nurses per shift for the ATS facility. A third nurse would be on duty for the CSS facility from 12:00 noon to 4:00 PM.

Four (4) behavioral health technicians would work each shift as well, two (2) in the ATS facility and two (2) in the CSS facility.

Eight (8) case managers would work each day. Working hours would vary from 7:00 AM to 3:00 PM (three (3) managers), 9:00 AM to 5:00 PM (two (2) managers), 11:00 AM to 7:00 PM (three (3) managers). Six (6) case managers would be associated with the ATS facility and two (2)

would be associated with the CSS facility.

Counselors similarly would work from 7:00 AM to 3:00 PM (two (2) counselors), 9:00 AM to 5:00 PM (two (2) counselors), and 11:00 AM to 7:00 PM (two (2) counselors). All six (6) counselors would be associated with the CSS facility.

Administrative staff typically works from 9:00 AM to 5:00 PM. This includes one (1) Executive Director, one (1) Medical Director, one (1) Clinical Director, two (2) Program Directors (one for the ATS facility and one for the CSS facility), one (1) Nurse Manager, one (1) Food Service Director, two (2) admissions staff, one (1) receptionist, two (2) food service staff, and up to three (3) nurse practitioners (one (1) nurse practitioner per day shift but need two to three full time equivalents to provide the coverage). This yields a total administrative staff of thirteen (13) staff.

There will be three (3) security guards (one (1) per shift (7:00 AM to 3:00 PM, 3:00 PM to 11:00 PM and 11:00 PM to 7:00 AM)).

Daily deliveries of food/beverage, office supplies, linen, medical supplies and waste pickup is expected as follows:

- One weekly delivery for linens,
- Twice a week delivery for food items from Sysco,
- One weekly dumpster pick-up,
- Two to three times per week there are other weekly medical deliveries/pick-ups (Quest Diagnostics picking up blood/urine samples, etc.)

This yields approximately eight (8) trips a day (four (4) vehicles entering and four (4) vehicles exiting) assuming the case where all deliveries/trash pick-up occurred in a single day.

Patient admissions and discharges are expected to average five (5) per day. These are expected to typically occur between 10:00 AM and 6:00 PM.

There is a small cleaning staff. One cleaner works the first 8-hour shift (7:00 AM to 3:00 PM) and a second works the second 8-hour shift (3:00 PM to 11:00 PM).

Using the above information and increasing the daily numbers to account for miscellaneous trips (10% contingency), the projects traffic generation was determined as summarized in Table 2. The trip generation worksheets are attached.

**TABLE 2
 COMMONWEALTH DETOX FACILITY
 TRIP-GENERATION SUMMARY**

	<u>Proposed Facility</u>
<i>Daily</i>	148
<i>Weekday Morning Peak Hour:</i>	
Entering	17
<u>Exiting</u>	<u>8</u>
Total	25
<i>Weekday Evening Peak Hour:</i>	
Entering	1
<u>Exiting</u>	<u>19</u>
Total	20

Proposed Topsail Facility Site Traffic Generation

The trip generation for the proposed out-patient facility was also determined based on the expected number of employees, expected site operations and delivery activities. Again, the ITE does not contain trip-generation data for this land use.

The existing outpatient operates on a daily basis with approximately sixteen (16) employees. These include a medical director, a clinical director, a program director, five (5) licensed clinicians and approximately seven (7) to eight (8) support staff. Staffing is summarized in Table 3.

TABLE 3
TOPSAIL FACILITY EMPLOYEE CHARACTERISTICS ^a

Employee Type	Responsibilities
Medical Director	Licensed MD in Massachusetts with significant experience treating persons with addiction.
Executive Director	Masters level professional with extensive experience leading outpatient addiction treatment program. Approved by Massachusetts Department of Public Health (DPH) as a Program Director.
Clinical Director	Master Level licensed independent clinician.
Program Director	Responsible for the administrative functioning of the program. They also maintain staff schedules and act as the middle manager between the staff and the executive director.
Nurse Practitioner	Licensed Nurse Practitioners with psychiatric and medical experience specifically in an addiction treatment setting who will provide psychiatric and medical care.
Counselors	Masters level and/or licensed substance abuse/mental health counselors meeting all Massachusetts requirements.
Behavioral Health Technicians	High school graduate with experience recovery coaching for persons with addiction.

^aStaffing estimates provided by Commonwealth Centers Detox Inc.

Services are provided during the day from 8:45 AM to 3:45 PM. The employees drive to the facility and some patients are typically driven in a fifteen (15) seat passenger van while others drive themselves. Those patients who drive themselves currently range from approximately fifteen (15) to twenty (20) clients.

There is an evening program three (3) nights a week (Monday, Wednesday and Thursday from 6:00 to 9:00 PM. Two (2) staff members run the program with approximately fifteen (15) to twenty (20) clients.

A small cleaning crew comes in on weekends (generally two to three people) to clean the facility.

Using the above information and increasing the daily numbers to account for miscellaneous trips (10% contingency), the projects traffic generation was determined as summarized in Table 4. The trip generation worksheets are attached.

TABLE 4
TOPSAIL
TRIP-GENERATION SUMMARY

	<u>Proposed Facility</u>
<i>Daily</i>	80
<i>Weekday Morning Peak Hour:</i>	
Entering	40
<u>Exiting</u>	<u>0</u>
Total	40
<i>Weekday Evening Peak Hour:</i>	
Entering	0
<u>Exiting</u>	<u>0</u>
Total	0

Table 5 summarizes the combined Commonwealth Detox and Topsail projected traffic generation.

On a typical weekday, the proposed Commonwealth Detox and Topsail facilities are expected to generate 228 daily vehicle trips (114 vehicles entering and 114 vehicles exiting). During the weekday morning peak hour, 65 vehicle trips (57 entering and 8 vehicles exiting) are expected. During the weekday evening peak hour, 20 vehicle trips (1 vehicle entering and 19 vehicles exiting) are expected. Most of this traffic is expected to be automobiles.

Based on the nature of Topsail’s facility’s operations, no traffic is generated during the weekday evening peak hour.

TABLE 5
COMMONWEALTH DETOX AND TOPSAIL FACILITY
TRIP-GENERATION SUMMARY

	Proposed Commonwealth Detox and Topsail Facility
<i>Daily</i>	228
<i>Weekday Morning Peak Hour:</i>	
Entering	57
<u>Exiting</u>	<u>8</u>
Total	65
<i>Weekday Evening Peak Hour:</i>	
Entering	1
<u>Exiting</u>	<u>19</u>
Total	20

Conclusion

The Commonwealth Detox and Topsail facilities are located on the north side of Haverhill Street and west of High Street.

During the weekday morning peak hour, 55 vehicle trips (55 entering and 0 vehicles exiting) are expected. During the weekday evening peak hour, 21 vehicle trips (1 vehicle entering and 20 vehicles exiting) are expected. Most of this traffic is expected to be automobiles.

Compared to estimated traffic generation from Doctors Park I as a medical office building, the proposed traffic generation is substantially lower and is attributed to the nature of the operations of the Commonwealth Detox and Topsail facilities.

It is recommended that driveways continue to consist of one entering and one exiting lane. Vegetation or proposed landscaping along Haverhill Street and along High Street in front of the site and within the layout should be cleared and maintained to maintain sight distances.

Review of the proposed Commonwealth Detox and Topsail facilities and access plan shows that in relation to roadway capacity, traffic safety, and traffic impacts upon the surrounding roadway

network, the proposed project will meet safety standards and have a minimal impact on existing traffic conditions. With the proposed access, in conjunction with maintaining sight distances from the driveways (clear sight lines along frontage), safe and efficient access can be provided to the clientele of the proposed Commonwealth Detox and Topsail facilities and to the motoring public in the area.

RESPONSE TO WRITTEN COMMENTS

Several comments were submitted to the Andover Planning Department after the September 28, 2021 Andover Planning Board Public Hearing for the project. These comments are contained below with appropriate responses.

Comment No. 1 Revise or replace the Bayside Engineering Report so that the information provided is consistent and accurate with the Petitioner's Planning and ZBA Board presentations and other written submittals.

Response: This letter has been prepared to update the traffic generation and to reconcile the proposed employee count and descriptions.

Comment No. 2 Request Bayside Engineering to provide supporting documentation for the selection and application of the Land Use Codes for both the current and proposed facilities that match classifications of the Institute of Transportation Engineers (ITE).

Response: There are three (3) ITE Land Use Codes (LUC) related to medical facilities. They are LUC 610 – Hospital, LUC 630 – Clinic and LUC 720 – Medical-Dental Office Building. Copies of the definitions of these three uses are attached.

A review of these uses indicates that LUC 720 most closely resembles the Doctors Park I building as historically, it was used as medical office space (based on sales information, there are nine medical condominium units in the building).

Based on the ITE definition, 'a clinic is a facility that provides limited diagnostic and outpatient care but is unable to provide prolonged in-house medical and surgical care. A clinic may have a lab facility and supporting pharmacy but typically does not have equipment and medical personnel available at an urgent care site.. A clinic typically offers a wide range of services which makes it distinct from a medical office building that typically houses specialized and individual physicians.' This does not define the proposed operations for the Commonwealth Detox facility. Commonwealth

Detox proposes to operate an Acute Treatment Services (ATS) facility. This is the medical withdrawal/detoxification component. Commonwealth Detox proposes to operate Clinical Stabilization Services (CSS), a nonmedical post-withdrawal component. Both ATS and CSS are regulated by 105 CMR 164.000, Licensure of Substance Abuse Treatment Programs and are all inpatient services. Current Outpatient services will be offered in a separate 9,180 +/- square foot building (Topsail).

Comment No. 3 Request Bayside Engineering to generate a complete, best and final list of the total number of all employees and their characteristics or titles for both proposed facilities.

Response: The total number of all employees and their characteristics or titles for both proposed facilities are included in the first section of this letter.

Comment No. 4 Request Bayside Engineering to provide a traffic study for Haverhill Street that determines the additional traffic impact that the new facilities will generate from the current traffic volume, not previous occupant traffic volumes.

Response: A full traffic study has not been prepared. A comparison of the existing use, assumed to be fully occupied, to the proposed use indicates substantially lower traffic generation and a full traffic study is not warranted. The ITE suggests that land development projects that generate more than 100 peak hour peak direction trips should prepare a traffic impact study. ITE's rationale is that 100 vehicles per hour are of a magnitude that can change the level-of-service (LOS) of an existing intersection approach².

Comment No. 5 Request Bayside Engineering to incorporate the impact of other Haverhill Street related developments (i.e., 100-400 Brickstone Square Lab Facility Building and 7 Tantallon Road Redevelopment) on Haverhill Street into the revised traffic report.

Response: Bayside obtained the Traffic Assessment prepared by McMahon Associates for the Proposed Lab. This assessment indicated that there will be six (6) additional vehicles added to Haverhill Street (Route 133) during the weekday morning peak hour (one (1) eastbound and five (5) westbound). During the weekday evening peak hour, seven (7) additional vehicles would be added to Haverhill Street (six (6) eastbound and one (1) westbound). This equates to approximately one (1) additional bi-directional vehicle every ten (10) minutes during the peak hours. A volume increase that would not be noticed.

² *Manual of Transportation Engineering Studies*; Institute of Transportation Engineers; Washington, D.C.; 2010; p. 465.

No traffic assessment was performed for the 7 Tantallon Road project. This project consists of the construction of twenty-four (24) residential dwelling units. The existing building will be razed, and a new building constructed, incorporating portions of the existing architectural elements of the existing building.

As no traffic assessment was performed or required by the Andover Planning Board, traffic generation data from the ITE was reviewed. This data indicated that the twenty-four (24) residential dwelling units would conservatively generate thirty (30) vehicles during the weekday morning peak hour (seven (7) vehicles entering and twenty-three (23) vehicles exiting). During the weekday evening peak hour, thirty-one (31) vehicles would conservatively be generated (nineteen (19) vehicles entering and twelve (12) vehicles exiting). Using data from the McMahon study, peak hour directional flow on Haverhill Street is close to 50/50, which would assign fifteen (15) trips to/from the east on Haverhill during the weekday morning peak hour and approximately sixteen (16) trips to/from the east on Haverhill during the weekday evening peak hour. This would add approximately twelve (12) vehicles eastbound during the morning peak hour and approximately ten (10) vehicles westbound during the weekday evening peak hour. This equates to approximately one (1) additional bi-directional vehicle every five (5) minutes during the peak hours. A volume increase that would not be noticed.

If you have any questions, feel free to give me a call.

Sincerely,

BAYSIDE ENGINEERING, INC.



Kenneth P. Cram, P.E.
Director, Traffic Engineering

Andover
 Medico 140 LLC Commonwealth Detox (ATS/CSS)
 Trip Generation Calculations

Weekday Time	Nurse		Behavioral Health Techs		Case Managers		Counselors		Kitchen/Maintenance		Administration/Security		Deliveries		Patient Admissions		Patient Discharges		Janitorial		Total		
	In	Out	In2	Out2	In3	Out3	In4	Out4	In5	Out5	In6	Out6	In7	Out7	In8	Out8	In9	Out9	In10	Out10	In102	Out102	
12:00-12:15 AM																					0	0	
12:15-12:30 AM																						0	0
12:30-12:45 AM																						0	0
12:45-1:00 AM																						0	0
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Weekday	Nurse		Behavioral Health Techs		Case Managers		Counselors		Kitchen/Maintenance		Administration/Security		Deliveries		Patient Admissions		Patient Discharges		Janitorial		Total			
	Time	In	Out	In2	Out2	In3	Out3	In4	Out4	In5	Out5	In6	Out6	In7	Out7	In8	Out8	In9	Out9	In10	Out10	In102	Out102	
3:00-3:15 PM			2			4						2					1					1	0	16
3:15-3:30 PM																							0	0
3:30-3:45 PM																							0	0
3:45-4:00 PM															1								1	0
4:00-4:15 PM			1									1			1			1					1	3
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TOTAL		7	7	12	12	8	8	6	6	5	5	13	13	4	4	5	5	5	5	2	2	67	67	

Weekday	Nurse		Behavioral Health Techs		Case Managers		Counselors		Kitchen/Maintenance		Administration		Deliveries		Patient Admissions		Patient Discharges		Total		
	Time	In	Out	In2	Out2	In3	Out3	In4	Out4	In5	Out5	In6	Out6	In7	Out7	In8	Out8	In9	Out9	In10	Out10
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11:30-11:45 PM																				0	0
11:45-12:00 AM																				0	0
TOTAL	0	0	0	0	0	0	0	0	0	0	0	16	16	0	0	20	20	0	0	36	36

Land Use: 610 Hospital

Description

A hospital is any institution where medical or surgical care and overnight accommodations are provided to non-ambulatory and ambulatory patients. In this context, the term “hospital” does not refer to a medical clinic (a facility that provides diagnoses and outpatient care only) or a nursing home (a facility devoted to the care of persons unable to care for themselves), which are covered elsewhere in this report. Clinic (Land Use 630) and free-standing emergency room (Land Use 650) are related uses.

Additional Data

The technical appendices provide supporting information on time-of-day distributions for this land use. The appendices can be accessed through either the ITETripGen web app or the trip generation resource page on the ITE website (<https://www.ite.org/technical-resources/topics/trip-and-parking-generation/>).

The average numbers of person trips per vehicle trip at the four general urban/suburban sites at which both person trip and vehicle trip data were collected were as follows:

- 1.6 during Weekday, Peak Hour of Adjacent Street Traffic, one hour between 7 and 9 a.m.
- 1.6 during Weekday, AM Peak Hour of Generator
- 1.7 during Weekday, Peak Hour of Adjacent Street Traffic, one hour between 4 and 6 p.m.
- 1.7 during Weekday, PM Peak Hour of Generator

The sites were surveyed in the 1980s, the 1990s, the 2000s, and the 2010s in Alberta (CAN), California, Maryland, New Jersey, New York, Pennsylvania, Texas, and Washington.

Source Numbers

112, 186, 253, 262, 423, 429, 533, 573, 591, 601, 630, 719, 749, 878, 901, 904, 908, 909, 971, 1018

Land Use: 630

Clinic

Description

A clinic is a facility that provides limited diagnostic and outpatient care but is unable to provide prolonged in-house medical and surgical care. A clinic may have a lab facility and supporting pharmacy but typically does not have the equipment and medical personnel available at an urgent care site. A clinic typically offers a wide range of services which makes it distinct from a medical office building that typically houses specialized or individual physicians. Hospital (Land Use 610), free-standing emergency room (Land Use 650), and medical-dental office building (Land Use 720) are related uses.

Specialized Land Use

Data collected at a single methadone clinic in New Hampshire in 2021 indicate the likelihood of different trip generation rates than for a general medical clinic. The site gross floor area is 4,300 square feet. The vehicle trip counts are as follows:

- Weekday—283
- Weekday, AM peak hour of adjacent street—39
- Weekday, AM peak hour of generator—45
- Weekday, PM peak hour of adjacent street—1
- Saturday—189
- Saturday, peak hour of generator—64
- Sunday—167
- Sunday, peak hour of generator—56

The methadone clinic generates significantly more trips than a clinic during the morning peak periods and significantly fewer trips during the afternoon adjacent street peak period.

Additional Data

The technical appendices provide supporting information on time-of-day distributions for this land use. The appendices can be accessed through either the ITETripGen web app or the trip generation resource page on the ITE website (<https://www.ite.org/technical-resources/topics/trip-and-parking-generation/>).

The average numbers of person trips per vehicle trip at the five general urban/suburban sites at which both person trip and vehicle trip data were collected were as follows:

- 1.4 during Weekday, AM Peak Hour of Generator
- 1.7 during Weekday, Peak Hour of Adjacent Street Traffic, one hour between 4 and 6 p.m.
- 1.5 during Weekday, PM Peak Hour of Generator

The sites were surveyed in the 1980s, the 1990s, the 2000s, and the 2010s in Alberta (CAN), California, Minnesota, New Hampshire, Texas, Vermont, and West Virginia.

Source Numbers

440, 734, 878, 926, 972, 1049, 1062, 1073

Land Use: 720

Medical-Dental Office Building

Description

A medical-dental office building is a facility that provides diagnoses and outpatient care on a routine basis but is unable to provide prolonged in-house medical and surgical care. One or more private physicians or dentists generally operate this type of facility. General office building (Land Use 710) and clinic (Land Use 630) are related uses.

Land Use Subcategory

Analysis of medical-dental office building data found that trip generation rates are measurably different for sites located within or adjacent to a hospital campus and sites that are stand-alone. Data plots are presented for these two land use subcategories.

Additional Data

The technical appendices provide supporting information on time-of-day distributions for this land use. The appendices can be accessed through either the ITETripGen web app or the trip generation resource page on the ITE website (<https://www.ite.org/technical-resources/topics/trip-and-parking-generation/>).

The sites were surveyed in the 1980s, the 1990s, the 2000s, and the 2010s in Alberta (CAN), California, Connecticut, Kentucky, Maryland, Minnesota, New Jersey, New York, Ohio, Oregon, Pennsylvania, South Dakota, Texas, Virginia, Washington, and Wisconsin.

Source Numbers

104, 109, 120, 157, 184, 209, 211, 253, 287, 294, 295, 304, 357, 384, 404, 407, 423, 444, 509, 601, 715, 867, 879, 901, 902, 908, 959, 972