



DEPARTMENT OF DEVELOPMENT SERVICES – PLANNING DIVISION

REPORT: Proposed Zoning Text Amendment to define “Methadone or Substance Use Rehabilitation Clinics” as a new Service use for consideration on Tuesday September 13, 2022

STAFF REPORT

TO: Planning & Zoning Commission
PREPARED BY: Evelyne St-Louis, Senior Planner (evelyne.st-louis@hartford.gov)

PROJECT: Zoning Text Amendment
Citywide

ENERGOV ID: P&Z-COMM-2022-0662

TYPE: Text amendments to various sections of the Zoning Regulations to add Methadone or Substance Use Rehabilitation Clinics as a new use under the Service Use category

APPLICANT: The Hartford Dispensary d/b/a Root Center for Advanced Recovery c/o Andrea Gomes

BACKGROUND INFORMATION

This application is for a proposed zoning text amendment to Figure 3.2-A and various other sections of the Regulations that would define “Methadone or Substance Use Rehabilitation Clinics” as a new use, under the Service Use category, to be permitted by special permit in the MX-1, Multi-Use Mix district. Currently, the Zoning Regulations essentially prohibit this use in all districts.

KEY APPLICATION TIMELINES

- Application Submission Date: Monday July 11, 2022.
- Date Application Accepted as Complete: Monday July 11, 2022.
- Application Date of Receipt: Tuesday July 26, 2022 (sooner of either: date of next regularly scheduled meeting, or 35 days after acceptance of complete application.)
- Public Hearing scheduled to open: Tuesday September 13, 2022; Open Hearing Deadline: Thursday September 29, 2022.
- Close Hearing Deadline (if opens September 13, 2022) (35 days after opening): Tuesday October 18, 2022.
- CT General Statutes Sec.8-7D allow that the applicant may consent to one or more extensions, provided total extension of all time periods shall not be for longer than 65 days.

LEGAL STANDARD

Standard for Application Type:

The Commission reviews requests for re-zonings in accordance with Zoning Regulations Section 1.3.5. The Commission must consider the Plan of Conservation and Development and state on the record its findings on the consistency of the proposed amendment with such plan.

STANDARD SPECIFIC TO THE USE

Hartford Zoning Regulations

Section 1.3.6.E.(5) The zoning board of appeals may not issue a variance for any of the following new or expanded principal uses (or for any such use as an accessory use) or conditions:

- (c) Methadone or drug rehabilitation clinic in any DT, MS, MX, NX, or N district.

Section 3.3.2.B. Government/Higher Education/Hospital Facilities. Large-scale community-serving facilities associated with healthcare, universities, colleges, or government functions. Includes such uses as universities, theological schools, city hall, government offices, and hospitals.

- (1) Government Facility. [...]
- (2) Higher Education Facility. [...]
- (3) **Hospital.** A licensed institution providing medical care and health services to the community, primarily ill or injured in-patients. These services may be located in one building or clustered in several buildings, one of which must provide emergency services, and may include additional hospital-affiliated accessory uses such as laboratories, in- and out-patient facilities, training facilities, medical offices, staff sleeping quarters (but not full-time residences), food service, heliports, pharmacies, laundry facilities, florists, vendors of medical equipment, opticians, and gift shops.

Section 3.3.5 Service Uses. A category of uses that provide patrons services and limited retail products related to those services.

Section 3.3.5.A. Neighborhood Service. A service use with a gross floor area of less than 8,000 square feet. Neighborhood service includes such uses as those listed in Figure 3.3-C Typical Service Uses.

- (1) **Medical Clinic.** Medical clinic means a licensed institution providing same-day, walk-in, or urgent medical care and health services to the community, primarily ill or injured out-patients, *which is not a hospital and which is not a medical office, and which shall not include methadone or drug rehabilitation clinics. Provision of an indoor waiting area for use by individuals when a portion of the facility is not opened for operation is required, so that clients will not be required or allowed to queue for services outdoors.* The term licensed institution as used in this section shall mean a single legal entity formed for the diagnosis and treatment of out-patients in which at least 2 medical professionals, licensed by the State and having related specialties, practice cooperatively. The term medical professionals shall only mean medical doctors, dentists, clinical psychologists, osteopaths, podiatrists, chiropractors, acupuncturists, nurses or nurse practitioners, or physiotherapists so licensed by the State. A medical clinic shall not provide rental services, storage of hazardous materials in large quantities, or dormitory facilities. [Emphasis added.]

Section 3.3.7.A. Office Uses. A category of uses for businesses that involve the transaction of affairs and/or the training of a profession, service, industry, or government. Patrons of these businesses usually have set appointments or meeting times; the businesses do not typically rely on walk-in customers. Office uses include those listed in Figure 3.3-D Typical Office Uses.

- (2) **Medical Office.** Medical office means a facility in which medical professional(s) licensed by the State have their offices and provide medical care and health services primarily on a pre-scheduled basis (not primarily on a same-day or urgent care basis), ***which is not a hospital and which is not a medical clinic, and which shall not include methadone or drug rehabilitation services.*** The term medical professionals shall only mean medical doctors, dentists, clinical psychologists, osteopaths, podiatrists, chiropractors, acupuncturists, nurses or nurse practitioners, or physiotherapists so licensed by the State. A medical office may also contain in-house ancillary services such as in-house diagnostic testing facilities, medical counseling services, in-house research, and similar services. A medical office shall not provide rental services, storage of hazardous materials in large quantities, or dormitory facilities. [Emphasis added.]

Section 4.8. General Building Type. The General Building Type is a less distinctive building than the Storefront or Civic buildings and is typically limited to office, civic, and/or residential uses. General Building type regulations for the MX-1 district:

- **Minimum height:** 2 stories (at least 9' per story)
- **Permitted ground-story uses:** Any use permitted by district, except retail, service, and adult use cannabis uses are limited to no more than 25% of the ground floor area and shall be located along the street facade (see also Note 4).
- **Permitted upper-story uses:** Any use permitted by district except retail and service uses, except Eating Places, Drinking Places, and Adult Use Cannabis uses as permitted in the district are allowed on the second story per Note 4.
- **Front Facade Entrance Type:** Stoop; Arcade
- **Principal Entrance Location:** Front or courtyard façade.

Plan of Conservation & Development (POCD)

Our starting point: “[...] Residents of Hartford will play the largest role in realizing this City Plan. But we also have to build bridges with people in neighboring communities across the Connecticut Valley. That is why, under the umbrella of the “Hartford 400” initiative, we are coordinating our City Plan with a region-wide vision for the whole Connecticut Valley.”

One of eight overall priorities: Health. Become a healthy city with a holistic approach to addressing the well-being of individuals and families.

Live400, Health:

- **Eliminate overdose deaths:** Incorporating evidence-based drug prevention programs in schools and community centers will stem this health crisis, which has hit Hartford very hard in recent years.
- **Pioneer treatment of toxic stress:** Treating endemic toxic stress resulting from exposure to violence, poverty, insecurity, and substance abuse will improve education, employment, and overall well-being of residents.
- **Engage anchor institutions in wellness efforts:** Connecting anchor institutions like colleges and hospitals to citywide efforts community development will improve residents’ well-being and support healthy neighborhoods.

Live400, Social Services:

- Hartford has the highest concentration of social services in Connecticut, which provide a safety net for many vulnerable people. Publicizing and coordinating available services can promote dignity for everyone making their way through our city.
- **Audit and centralize existing social services:** Collecting and coordinating providers of homelessness, mental health, counseling, financial education, and family services will improve outcomes for users.

Live400, Housing:

- **Advocate for a more equitable region:** Helping suburban towns see benefits in opening their borders to residents of all socio-economic backgrounds will deconcentrate poverty and improve opportunity for all.

FINDING OF FACTS

Context and definitions:

- It is well documented that opioid addiction and overdose deaths have become a pressing public health crisis in Connecticut and in the United States overall.¹
- Opioid addiction is considered a chronic disease, which can be managed and treated. According to the U.S. Substance Abuse and Mental Health Services Administration (SAMHSA), one of the best forms of treatment is Medication-Assisted Treatment (MAT), which consists of the use of medication along with counseling and support services. Three medications are available: methadone, suboxone (buprenorphine), or vivitrol (naltrexone). Methadone can only be dispensed at specially licensed treatment centers (SAMHSA-certified Opioid Treatment Programs). Methadone must be taken daily, usually under the supervision of a medical professional. Both suboxone and vivitrol can be dispensed either at treatment centers, or prescribed/dispensed by licensed doctors in physician offices.²
- According to the State Department of Mental Health and Addiction Services (DMHAS), there are currently three methadone clinics in Hartford: Root Center's facility at 345 Main Street, Root Center's facility at 16-18 Weston, and the Health Care Resource Center at 55 Fishfry Street.³
- Figure 2 illustrates where methadone clinics are located across the state. Hartford has the highest number of clinics within Hartford County. The nearest clinics outside of the city are in Manchester, New Britain, and Bristol, which each have one clinic.
- Several other medical locations in Hartford offer suboxone and vivitrol treatment – but not methadone. A few examples include the Wheeler Clinic at St-Francis Hospital,

¹ Connecticut Live Loud. Available at: <https://liveloud.org/help-and-support/connecticuts-crisis/>

² U.S. Department of Health and Human Services, SAMHSA (Substance Abuse and Mental Health Services Administration). "Medication-Assisted Treatment for Opioid Addiction." Available at: <https://portal.ct.gov/-/media/DMHAS/Opioid-Resources/MATInfoFamilyFriendspdf.pdf>. See also <https://www.samhsa.gov/medication-assisted-treatment/medications-counseling-related-conditions>; <https://www.samhsa.gov/medication-assisted-treatment/medications-counseling-related-conditions/buprenorphine> and

³ Connecticut DMHAS. Available at: <https://portal.ct.gov/-/media/DMHAS/Opioid-Resources/MethadoneClinicsMappdf.pdf>

InterCommunity at one of their clinics located in the Coventry Street campus, and Community Health Services at 500 Albany Avenue.⁴

Proposed text amendment:

- The proposed text amendment is included in Exhibit A.
- The applicant is Root Center, a non-profit health care agency that provides behavioral health and substance use services. Root Center operates two methadone clinics in Hartford, which serve about 1,400 patients. Root Center operates several other methadone clinics in the state.⁵
- The applicant’s justification for the text amendment is that “Hartford’s current prohibition of Methadone or Drug Rehabilitation Clinics in all zoning districts violates the Americans with Disabilities Act (ADA). [...] Under the ADA, individuals with substance use disorders who are participating in a rehabilitation program are defined as having a "disability," and thus, discrimination against such individuals is a violation of the Act. A number of federal courts interpreting the ADA have held that zoning regulations or decisions that discriminate against drug and alcohol rehabilitation programs, or methadone clinics, violate the ADA. [...]”
- The applicant’s full narrative is included as Attachment 1.

Additional context on this application:

- Root Center’s text amendment is also motivated by the fact that they wish to relocate their 345 Main Street facility to a new, improved facility. Under the current Regulations, the Main Street facility is considered nonconforming and therefore cannot be expanded or moved. Should the text amendment be approved, the applicant would seek to apply for a special permit, which would be reviewed by the Planning & Zoning Commission at a separate public hearing.
- However, it should be noted that text amendments should not be evaluated based on the merits or characteristics of an eventual proposal. Per Section 1.3.5, in making its decision on a proposed amendment, the Commission must consider the POCD and state on the record its findings on the consistency of the proposed amendment with the POCD.

⁴ See various databases that track locations offering different MAT medications:
https://public.tableau.com/views/CTBHPMedicaidMATProviderMap/TreatmentProviders?%3Aembed=y&%3Adisplay_count=yes&%3AshowVizHome=no and also <https://dpt2.samhsa.gov/treatment/directory.aspx>.

⁵ State of Connecticut, “Methadone Treatment Programs in Connecticut”. Available at: <https://portal.ct.gov/DMHAS/Programs-and-Services/Opioid-Treatment/Opioid-Treatment-Programs>

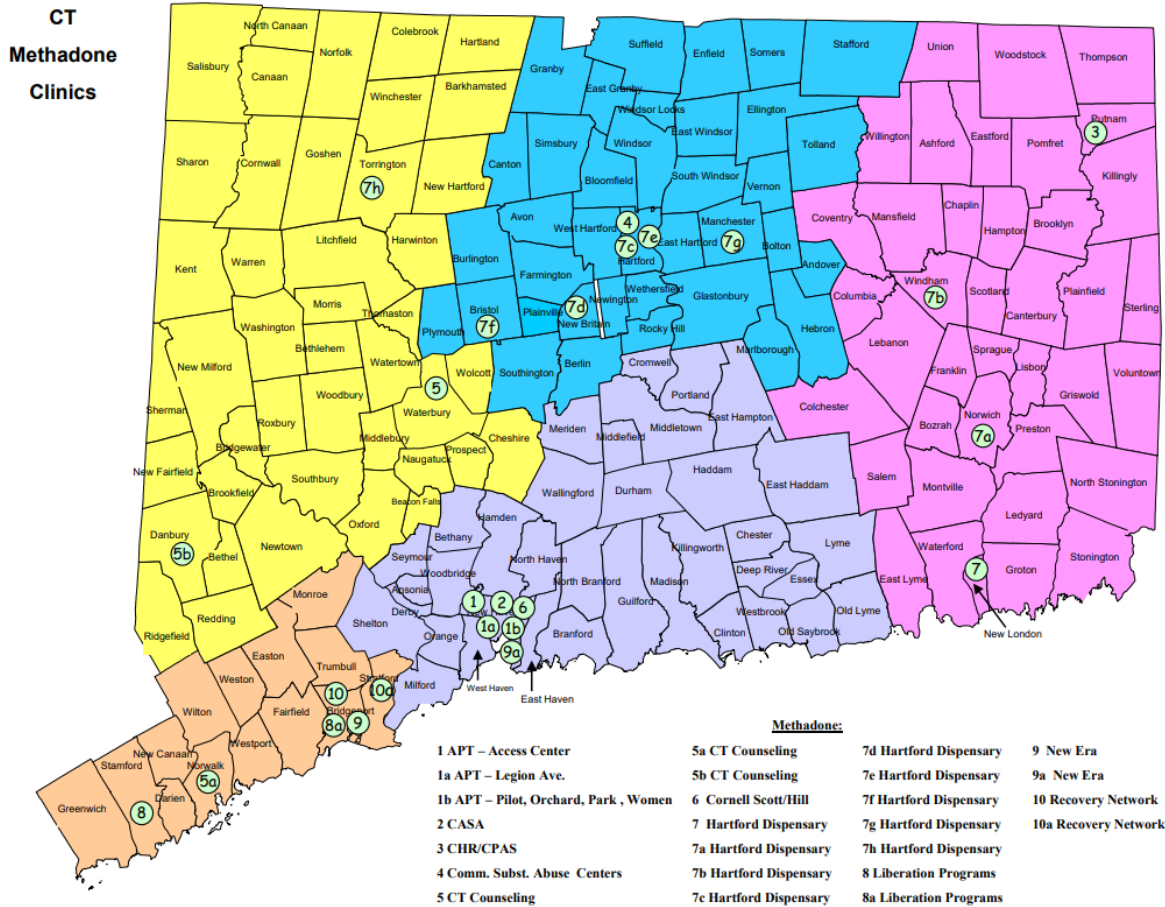


Figure 2. Methadone Clinics in Connecticut (State Department of Mental Health and Addiction Services).

COMMENTS RECEIVED (DEPARTMENTS, AGENCIES, NRZs, PUBLIC)

Following a request from Hartford NEXT, Staff met virtually with NRZ leaders on Wednesday September 7, 2022, to answer questions about the proposed text amendment. As of the time of writing, no written public comment had been received by Staff.

Adjoining municipalities were notified of this application on August 12, 2022 (Bloomfield, East Hartford, Newington, West Hartford, Wethersfield, and Windsor). As of the time of writing, no comments had been received from these towns.

CRCOG was notified of the application on August 11, 2022. They shared the following communication:

September 2, 2022

TO: HARTFORD PLANNING AND ZONING COMMISSION

REPORT ON ZONING REFERRAL Z-2022-112: Proposed zoning amendment to include “Methadone or Substance Use Rehabilitation Clinic” as new, standalone special permit use, as well as, setting requirements for such facilities.

COMMISSIONERS: Receipt is acknowledged of the above-mentioned referral. Notice of this proposal was transmitted to the Policy and Planning Division of the Capitol Region Council of Governments under the provisions of Section 8-3b of the Connecticut General Statutes, as amended.

COMMENT: The staff of the Regional Planning Commission of the Capitol Region Council of Governments has reviewed this zoning referral and finds no apparent conflict with regional plans and policies or the concerns of neighboring towns.

The public hearing date has been scheduled for 9/13/2022.

In accordance with our procedures this letter will constitute final CRCOG action on this referral. Questions concerning this referral should be directed to Christopher Henchey.

DISTRIBUTION: Planner: Windsor, Bloomfield, West Hartford, Newington, Wethersfield, East Hartford, South Windsor

Respectfully submitted,

Jennifer Bartiss-Earley, Chairman
Regional Planning Commission

Brendan Malone, Vice Chairman
Regional Planning Commission



Christopher Henchey
Transportation Planner

ANALYSIS

Recap of the Hartford’s Current Zoning Regulations

Hartford’s Zoning Regulations do not provide a definition of “methadone or drug rehabilitation clinics”. Further, the table of principal uses does not identify this as a stand-alone use, but specific references to this use are found in several sections of the Regulations, indicating that it is currently considered an unlisted dissimilar use.

“Methadone or drug rehabilitation clinics” are specifically prohibited as part of Medical Clinics (Neighborhood Service use) or Medical Offices (Office use). Furthermore, the Regulations state that the Zoning Board of Appeals may not issue a variance for “methadone or drug rehabilitation clinics” in DT, MS, MX, NX, or N districts.

It is worth noting that ID and CX districts are not included in the list of districts where variances cannot be granted. Also, in contrast to Medical Clinics and Medical Offices, the Hospital use does not explicitly prohibit “methadone or drug rehabilitation clinics”. The Government/Higher Education/Hospital use is permitted by special permit in CX-1, CX-2, and ID-1 districts.

Taken together, these references still suggest that the Zoning Regulations essentially prohibit “methadone or drug rehabilitation clinics” in all districts.

The applicant has argued that, under the ADA, this broad zoning prohibition is discriminatory towards people with disabilities.

Proposed Text Amendment

The applicant submitted their application in July. Throughout late July and early August, Staff worked with the applicant to refine the proposed text, mostly to add use-specific conditions to mitigate potential negative externalities and to encourage appropriate neighborhood-scale design that would still also allow for the use’s effective operation.

Exhibit A is the version of the text amendment that is before the Commission for consideration. This version incorporates many of Staff’s proposed changes, but it is the applicant’s final preferred version. Exhibit B shows staff’s proposed version. Some of these edits are points of disagreement with the applicant, and some are additional changes that came to staff’s attention since the time the application was advertised to CRCOG.

Key elements of the text amendment as currently proposed by the applicant (Exhibit A):

- “Methadone or Substance Use Rehabilitation Clinics” would be defined as a new stand-alone use under the “Service Use” category permitted by Special Permit in MX-1.
- It would be a distinct use from Medical Clinics and Medical Offices.
- As proposed by the applicant, the use would be defined as a “licensed facility that provides treatment for substance use disorders, which treatment may include one or more of the following: Medication Assisted Treatment; behavioral or mental health services; and wellness and community services. The term “licensed facility” refers to a legal entity formed for the treatment of out-patients in which at least two medical professionals, licensed by the State, practice cooperatively.”
- This use would need to be registered as an accredited opioid treatment program with the SAMHSA if MAT is offered.
- This use would not be allowed to offer inpatient or residential care.
- This use would have a maximum building size of 8,250 gsf. Note that this number was proposed by the applicant based on their proposed new building.
- This use would be required to locate on lots that are at least 0.5 acres in size. This requirement was suggested by Staff and is consistent with the minimum lot size permitted for assembly uses.
- This use would only be permitted in the General Building type. All other building types permitted in MX-1 (Civic, Apartment, Stacked Flats, Row, House A, and House B Building types) would be ineligible for this use.

- The use would be required to locate in a single-occupant building. This is a typical model and form for methadone clinics. Because of this requirement, the text amendment exempts the use from the usual General Building type use requirements and instead allows the proposed use to occupy 100% of General Building type’s ground and upper floors.
- The building’s principal entrance would be required to be at the rear façade. This design element was proposed by the applicant to ensure patient privacy (as required by federal law).
- In order to encourage an interactive, pedestrian-oriented façade, this use would still be required to meet minimum transparency requirements and have at least one secondary entrance on a street-facing façade.
- A General Building type in MX-1 occupied by this use would be permitted to have only one story, as long as the ground floor is at least 18 ft in height. This provision exists elsewhere in the Regulations for several building types. This design element was requested by the applicant because a single-floor level can be more easily monitored by clinic staff. Of note, the applicant requested an exemption from the 18-foot minimum for the corner side façade.
- As proposed, the use would be encouraged to have indoor queuing to ensure that clients are protected from inclement weather and to minimize impacts on neighboring properties. However, the applicant wished to retain the option for outdoor queuing given recent health epidemics such as COVID-19 and Monkeypox. The text is also written so as to provide the Commission with discretion to review that outdoor queuing plans are “safe and orderly” and would “not be a nuisance to neighboring properties”.
- A security plan would need to be submitted as part of an application. As is the case with all special permit applications, the zoning administrator would be entitled to request additional documentation as deemed necessary per Section 1.3.4.B.(3).
- The use would not be permitted to locate within a 1,500-ft radius from another Methadone or Substance Use Rehabilitation Clinic. This distance is a standard dispersion threshold used elsewhere in the Regulations (see Convenience Stores, Discount Variety Stores, Private Clubs, Beer/Wine/Liquor Sales, and Cannabis Retail).
- The use would not be permitted to locate within a 500-foot radius from existing schools or parks. This is a standard dispersion threshold used elsewhere in the Regulations (see Beer/Wine/Liquor Sales and Cannabis Retail).
- Parking maximums would be determined through the special permit process as is the case for other Service uses that are permitted only by special permit.
- Note that several other minor changes are proposed throughout the Regulations to ensure consistency in terminology and requirements.

Staff’s recommended changes (see Exhibit B):

1. Change the name of the use to “Methadone Clinic” and update/clarify the use’s definition as follows: “A licensed facility that administers methadone, and may include one or more of the following: alternative Medication Assisted Treatment, behavioral or mental health services, and wellness and community services.” Also clarify that *all* “Methadone Clinics” would need to be registered as accredited opioid treatment programs with the Substance Abuse and Mental Health Service Administration.
 - *Explanation:* It is Staff’s understanding that methadone may only be dispensed in licensed facilities, whereas alternative Medication Assisted Treatment options

(suboxone, vivitrol) can be prescribed and dispensed by doctors in physician offices. Staff wishes to avoid confusing this new proposed use with medical or hospital uses that offer these alternative, non-methadone MAT options, so far as this continues to be permitted by state and federal law.

2. Reduce the maximum building size from 8,250 gsf to 8,000 gsf.
 - *Explanation:* This size threshold is used elsewhere in the Regulations, for example to differentiate the Neighborhood Service from the General Service use. This would be more consistent with the Regulations and would avoid arbitrarily tailoring the text to a specific proposal or property.
3. Require queuing to be indoors.
 - *Explanation:* While Staff acknowledges the applicant's desire for flexibility with outdoor queuing, the queuing requirement for this use should be consistent with the Medical Clinic use, which only allows indoor queuing.
4. Remove the following sentence: "For purposes of this section, a park does not include open greenspace that is not located in the OS zoning district."
 - *Explanation:* The applicant requested to include this sentence as they were concerned that green spaces located in front or corner side yards could be construed as park space. This sentence could be seen as inconsistent with other sections of the Regulations and unnecessary given that the zoning administrator or the Planning & Zoning Commission does not define parks in this way.
5. Add the following use-specific condition: "In reviewing special permit applications for this use, the Commission may give preference to existing facilities that are looking to relocate or expand, over allowing new facilities."
 - *Explanation:* This would provide the Planning & Zoning Commission with some additional discretion in reviewing special permit applications.
6. Remove the minimum height exception for corner side façades in Section 4.8.2.B.
 - *Explanation:* Staff does not see a valid reason for this exemption. This height provision applies in several other places in the Regulations and should be applied consistently for all applicants.
7. The Planning & Zoning Commission may consider whether to increase the minimum lot size from 0.5 acre to 1 acre.

Parcel Analysis

The Regulations describe MX districts as "centered around large-scale institutional facilities including the State Capitol area, universities, hospitals, and in other areas where low-scale mixed-use development is appropriate. These districts include a mix of compatible office or residential uses in the General Building Type and residential building types." The MX-1 district is generally intended to be of lower intensity than the MX-2 district, as MX-2 is often paired with the Campus Overlay to accommodate larger-scale users with multiple buildings.

Parcels zoned MX-1 can be found in several neighborhoods such as Asylum Hill, the West End, Frog Hollow, SoDo, and Sheldon-Charter Oak. MX-1 parcels are often located along street types classified as "Avenues" by the Regulations, such as Asylum Ave, Farmington Ave, Wethersfield Ave, or Washington Street.

Based on the service- and medical-oriented nature of the proposed use, it seems generally compatible with the intention and description of MX-1.

Given the number of use-specific conditions proposed in the text amendment, Staff conducted an analysis of the City's assessor database to estimate roughly how many MX-1 parcels would be considered eligible for the proposed use. The estimate was conducted by filtering for parcels in the MX-1 district measuring at least 0.5 acres, that were either classified as vacant or as having a non-residential structure of 8,000 gsf or less. To provide a more conservative estimate, parcels with missing building size data and/or missing lot acreage data were also included.

Based on the assessor's database downloaded on July 27, 2022, staff estimated that approximately 18 existing parcels may currently meet the proposed criteria. With the minimum parcel size increased to 1 acre, only about 4 parcels would be eligible.

Consistency with the POCD

The POCD's Live400 chapter recognizes the elimination of overdose deaths as a goal given that this health crisis has "hit Hartford very hard in recent years". While the POCD only specifically mentions drug prevention programs in schools and community centers, it would seem that allowing methadone clinics in at least one district in the city, and ensuring that existing methadone clinics can modernize or relocate, is consistent with this goal.

Methadone clinics are often stigmatized as leading to increased crime, public disturbances, or other negative externalities such as queuing in the public right-of-way – these outcomes could be seen as inconsistent with the POCD. However, the special permit process outlined in the text amendment provides a process through which these concerns could be mitigated. The POCD's Health section discusses the need for a holistic approach to physical and mental health and acknowledges that exposure to substance use can negatively impact households and communities. Destigmatizing methadone clinics and allowing more modern facilities could therefore be seen as consistent with the POCD.

Having said that, the POCD highlights the need to advocate for a more equitable region and to build bridges with neighboring communities. While this is discussed mostly under the lens of housing, it could be seen as applicable more broadly to social services. For instance, the POCD states that "Hartford has the highest concentration of social services in Connecticut". As such, providing services to address the opioid crisis could be framed as a regional need that should also be addressed at a regional scale. The current concentration of methadone clinics in Hartford relative to neighboring towns may be a reason to narrow and/or restrict the use, even while allowing it.

STAFF RECOMMENDATION

Staff recommends approval of the proposed zoning text amendment with the changes shown in Exhibit B. These changes would be considered non-substantive for the purposes of public noticing requirements.

A draft resolution follows.

ATTACHMENTS

- Attachment 1: Accompanying narrative provided by applicant.

REVIEWED AND EDITED BY,

Aimee Chambers, Director



CITY OF HARTFORD
PLANNING & ZONING COMMISSION RESOLUTION
TEXT AMENDMENT TO ADD METHADONE OR SUBSTANCE USE REHABILITATION
CLINICS AS A NEW USE UNDER THE “SERVICE USE” CATEGORY

- Whereas,** The City of Hartford Planning and Zoning Commission reviewed the proposed zoning text amendment to Hartford’s Zoning Regulations (the Regulations) to amend Figure 3.2-A and various other sections of the Regulations to define “Methadone or Substance Use Rehabilitation Clinics” as a new use, under the Service Use category, to be permitted by special permit subject to use-specific conditions in the MX-1, Multi-Use Mix district; and
- Whereas,** Section 1.3.5 of the Regulations requires that the Commission consider the plan of conservation and development (POCD) and state on the record its findings on the consistency of the proposed amendment with such plan; and
- Whereas,** The Regulations currently prohibit “methadone or drug rehabilitation clinics” in all districts; specific mentions of this use in the Regulations can be found under Medical Clinics (Neighborhood Service use) and Medical Offices (Office use) where this type of facility is strictly prohibited; the Zoning Board of Appeals is also currently prohibited from granting variance for this use in DT, MS, MX, NX, and N districts; and
- Whereas,** This broad prohibition of “methadone or drug rehabilitation clinic” could be seen as discriminatory towards people with disabilities, given that under the Americans with Disabilities Act (ADA), individuals with substance use disorders who are participating in a rehabilitation program are defined as having a "disability"; and
- Whereas,** It has been well documented that opioid addiction and overdose deaths have become a pressing public health crisis in Connecticut and the United States; and
- Whereas,** Medication-assisted treatment (MAT) is a well-recognized treatment for opioid addiction and is highly regulated at the federal and state level; and
- Whereas,** As of the time of writing, the City of Hartford had a total of three methadone clinics within city boundaries per data compiled by the State Department of Mental Health and Addiction Services (DMHAS); and

Whereas, The proposed text amendment defines the proposed use as distinct from Medical Clinics and Medical Offices; and

Whereas, The proposed text amendment includes a number of use-specific conditions meant to mitigate potential negative externalities and to encourage appropriate neighborhood-scale design that would also allow the use's effective operation; and

Whereas, The proposed text amendment would allow this use to locate only in the General Building type and would provide flexibility around specific building regulations to allow for the use's effective operation (such as the principal entrance location, building height, and entrance type); and

Whereas, The proposed text amendment is generally consistent with Hartford's Plan of Conservation & Development: namely, the Live400 chapter recognizes the elimination of overdose deaths as a goal given that this health crisis has "hit Hartford very hard in recent years"; the Live400 chapter also discusses the need for a holistic approach to physical and mental health and acknowledges that exposure to substance use can negatively impact households and communities; it would seem therefore that allowing methadone clinics in at least one district in the city, and ensuring that existing methadone clinics can modernize or relocate, is consistent with the POCD; and

Whereas, The POCD also highlights the need to advocate for a more equitable region and to build bridges with neighboring communities. For instance, the POCD states that "Hartford has the highest concentration of social services in Connecticut", and providing services to address the opioid crisis could be framed as a regional need that should also be addressed at a regional scale. As such, the current concentration of methadone clinics in Hartford relative to neighboring towns may be a reason to narrow and/or restrict the use, even while allowing it;

Now therefore Be It

Resolved, The City of Hartford Planning & Zoning Commission hereby **finds/ does not find** that the proposed Zoning Text Amendment is consistent with the Plan of Conservation & Development: and

Resolved, The City of Hartford Planning & Zoning Commission hereby **denies/approves** the proposed zoning text amendment to Hartford's Zoning Regulations shown in **Exhibit A**, which proposes to amend Figure 3.2-A and various other sections of the Regulations to define "Methadone or Substance Use Rehabilitation Clinics" as a new use, under the Service Use category, to be permitted by special permit subject to use-specific conditions in the MX-1, Multi-Use Mix district, **with the following conditions of approval:**

- 1. The changes suggested by Staff in Exhibit B shall be incorporated into the final proposed text amendment.**

Be It Further,

Resolved, This 13th day of September 2022.

EXHIBIT A

[PROPOSED AMENDMENTS ARE SHOWN IN BLUE.]

FIGURE 3.2-A. TABLE OF PRINCIPAL USES

- Include “Methadone or Substance Use Rehabilitation Clinic” as new, standalone special permit use in MX-1, under “Service Use” category.

SECTION 3.3.5 (SERVICE USES):

- New subsection “P” (3.3.5.P) to include “Methadone or Substance Use Rehabilitation Clinic” as new service use.

P. Methadone or Substance Use Rehabilitation Clinic. A Methadone or Substance Use Rehabilitation Clinic is a licensed facility, with 8,250 square feet of gross floor area or less, that provides treatment for substance use disorders, which treatment may include one or more of the following: Medication Assisted Treatment; behavioral or mental health services; and wellness and community services. The term “licensed facility” shall mean a legal entity formed for the treatment of out-patients in which at least two medical professionals, licensed by the State, practice cooperatively. If the Methadone or Substance Use Rehabilitation Clinic provides Medication Assisted Treatment, it shall also be registered as an accredited opioid treatment program with the Substance Abuse and Mental Health Service Administration. Such a clinic shall not provide inpatient or residential care. Note that this use is distinct from Medical Clinics per Section 3.3.5.A.(1) and Medical Offices per Section 3.3.7.A.(1).

When noted as subject to conditions (“●”) or requires a special permit (“○”) in Figure 3.2 -A Table of Principal Uses, the following regulations apply:

- (1) **Minimum Lot Area.** There shall be a minimum lot area of 0.5 acres for Methadone or Substance Use Rehabilitation Clinics.
- (2) **Building Type.** Methadone or Substance Use Rehabilitation Clinics may only locate in single-occupant, General Building Types. This shall mean that a Methadone or Substance Use Rehabilitation Clinic may fully occupy 100% of a General Building Type’s ground floor and upper floors, as long as the maximum gross square footage (8,250 gsf) is not exceeded.
- (3) **Principal Entrance.** The principal entrance shall be located at the building’s rear façade. Indoor queuing is preferred, but if outdoor queuing is proposed, the applicant shall be required to demonstrate that outdoor queuing will be safe and orderly, and that it will not be a nuisance to neighboring properties. At least one additional secondary entrance shall be required along the building’s street-facing facade, but such secondary entrance shall not be used for client entry/exit, except in emergencies. The principal and secondary entrances may be Storefront, Stoop, or Arcade entrance types per Section 4.19.

- (4) **Security Plan.** Applicants are required to submit a security plan for review by the zoning administrator. Refer to Section 1.3.3.B.(16)(d). Additional documentation may be requested of the applicant per Section 1.3.4.B.
- (5) **Proximity to Other Methadone or Substance Use Rehabilitation Clinics.** No Methadone or Substance Use Rehabilitation Clinic shall be located within a 1,500-foot radius in any direction of any parcel where a Methadone or Substance Use Rehabilitation Clinic is located.
- (6) **Proximity to Certain Uses.** No new Methadone or Substance Use Rehabilitation Clinic shall be located within a 500-foot radius of any part of an existing school or park. For purposes of this section, a park does not include open greenspace that is not located in the OS zoning district.

SECTION 1.3.6. VARIANCE

Section 1.3.6.E.(5) The zoning board of appeals may not issue a variance for any of the following new or expanded principal uses (or for any such use as an accessory use) or conditions:

- (c) Methadone or ~~drug rehabilitation clinic~~ Substance Use Rehabilitation Clinic in any DT, MS, ~~MXMX-2~~, NX, or N district.

SECTION 3.3.5 - SERVICE USES

Section 3.3.5.A. Neighborhood Service. A service use with a gross floor area of less than 8,000 square feet. Neighborhood service includes such uses as those listed in Figure 3.3-C Typical Service Uses.

- (1) **Medical Clinic.** Medical clinic means a licensed institution providing same-day, walk-in, or urgent medical care and health services to the community, primarily ill or injured out-patients, which is not a hospital per Section 3.3.2.B and which is not a medical office per Section 3.3.7.A.(1), and which ~~shall not include methadone or drug rehabilitation clinics~~ is not a Methadone or Substance Use Rehabilitation Clinic per Section 3.3.5.P. Provision of an indoor waiting area for use by individuals when a portion of the facility is not opened for operation is required, so that clients will not be required or allowed to queue for services outdoors. The term licensed institution as used in this section shall mean a single legal entity formed for the diagnosis and treatment of out-patients in which at least 2 medical professionals, licensed by the State and having related specialties, practice cooperatively. The term medical professionals shall only mean medical doctors, dentists, clinical psychologists, osteopaths, podiatrists, chiropractors, acupuncturists, nurses or nurse practitioners, or physiotherapists so licensed by the State. A medical clinic shall not provide rental services, storage of hazardous materials in large quantities, or dormitory facilities.

SECTION 3.3.7 - EMPLOYMENT USES

- A. **Office Uses.** A category of uses for businesses that involve the transaction of affairs and/or the training of a profession, service, industry, or government. Patrons of these

businesses usually have set appointments or meeting times; the businesses do not typically rely on walk-in customers. Office uses include those listed in Figure 3.3-D Typical Office Uses.

- 1) **Medical Office.** Medical office means a facility in which medical professional(s) licensed by the State have their offices and provide medical care and health services primarily on a pre-scheduled basis (not primarily on a same-day or urgent care basis), which is not a hospital per Section 3.3.2.B and which is not a medical clinic per Section 3.3.5.A.(1), and which ~~shall not include methadone or drug rehabilitation clinics~~ is not a Methadone or Substance Use Rehabilitation Clinic per Section 3.3.5.P. The term medical professionals shall only mean medical doctors, dentists, clinical psychologists, osteopaths, podiatrists, chiropractors, acupuncturists, nurses or nurse practitioners, or physiotherapists so licensed by the State. A medical office may also contain in-house ancillary services such as in-house diagnostic testing facilities, medical counseling services, in-house research, and similar services. A medical office shall not provide rental services, storage of hazardous materials in large quantities, or dormitory facilities.

SECTION 4.8 GENERAL BUILDING TYPE REGULATIONS

Section 4.8.2.B. Height. Under the MX-1 column, in the “Ground Story Maximum Height” row, add “Note 3.a.”.

Note 3.a. For any Methadone or Substance Use Rehabilitation Clinic (refer to Section 3.3.5.P), if ground floor is 18 feet or more in height along the primary street facade, the ground story shall count as 2 stories towards maximum building height.

Section 4.8.2.C Uses. In the Ground Story and Upper Story rows, add a “Note 5”.

Note 5. Per Section 3.3.5.P, a Methadone or Substance Use Rehabilitation Clinic may occupy 100% of the building’s ground floor or upper floors.

SECTION 7. PARKING

Figure 7.2-A Maximum Off-Street Automobile Parking

- Automobile Fueling & Limited Service, Automobile Service/Car Wash, Drinking Places, Entertainment Assembly, & Smoking Places, and Methadone or Substance Use Rehabilitation Clinic: In accordance with special permit review or, if special permit not required, in accordance with site plan review.

Figure 7.2-B Bicycle Parking (*NO CHANGES PROPOSED*)

- Retail & Service Uses
 - Minimum long-term: No minimum requirement

Minimum short-term: 1 per every 3,000 square feet.

EXHIBIT B.

[PROPOSED AMENDMENTS ARE SHOWN IN BLUE.]

[STAFF'S ADDITIONAL CHANGES ARE SHOWN IN RED]

FIGURE 3.2-A. TABLE OF PRINCIPAL USES

- Include “Methadone ~~or Substance Use Rehabilitation~~ Clinic” as new, standalone special permit use in MX-1, under “Service Use” category.

SECTION 3.3.5 (SERVICE USES):

- New subsection “P” (3.3.5.P) to include “Methadone ~~or Substance Use Rehabilitation~~ Clinic” as new service use.

P. Methadone ~~or Substance Use Rehabilitation~~ Clinic. A Methadone ~~or Substance Use Rehabilitation~~ Clinic is a licensed facility, with ~~8,250~~ 8,000 square feet of gross floor area or less, that administers methadone, and that may include one or more of the following: alternative Medication Assisted Treatment, behavioral or mental health services, and wellness and community services. ~~provides treatment for substance use disorders, which treatment may include one or more of the following: Medication Assisted Treatment; behavioral or mental health services; and wellness and community services.~~ The term “licensed facility” shall mean a legal entity formed for the treatment of out-patients in which at least two medical professionals, licensed by the State, practice cooperatively. ~~If the A Methadone ~~or Substance Use Rehabilitation~~ Clinic provides Medication Assisted Treatment, it~~ shall also be registered as an accredited opioid treatment program with the Substance Abuse and Mental Health Service Administration. Such a clinic shall not provide inpatient or residential care. Note that this use is distinct from Medical Clinics per Section 3.3.5.A.(1) and Medical Offices per Section 3.3.7.A.(1).

When noted as subject to conditions (“●”) or requires a special permit (“○”) in Figure 3.2 -A Table of Principal Uses, the following regulations apply:

- (1) **Minimum Lot Area.** There shall be a minimum lot area of 0.5 acres for Methadone ~~or Substance Use Rehabilitation~~ Clinics.
- (2) **Building Type.** Methadone ~~or Substance Use Rehabilitation~~ Clinics may only locate in single-occupant, General Building Types. This shall mean that a Methadone ~~or Substance Use Rehabilitation~~ Clinic may fully occupy 100% of a General Building Type’s ground floor and upper floors, as long as the maximum gross square footage (~~8,250~~ 8,000 gsf) is not exceeded.
- (3) **Principal Entrance.** The principal entrance shall be located at the building’s rear façade. Indoor queuing is required. ~~is preferred, but if outdoor queuing is proposed, the applicant shall be required to demonstrate that outdoor queuing will be safe and orderly, and that it will not be a nuisance to neighboring properties.~~ At least one additional secondary

entrance shall be required along the building's street-facing facade, but such secondary entrance shall not be used for client entry/exit, except in emergencies. The principal and secondary entrances may be Storefront, Stoop, or Arcade entrance types per Section 4.19.

- (4) **Security Plan.** Applicants are required to submit a security plan for review by the zoning administrator. Refer to Section 1.3.3.B.(16)(d). Additional documentation may be requested of the applicant per Section 1.3.4.B.
- (5) **Proximity to Other Methadone ~~or Substance Use Rehabilitation~~ Clinics.** No Methadone ~~or Substance Use Rehabilitation~~ Clinic shall be located within a 1,500-foot radius in any direction of any parcel where a Methadone ~~or Substance Use Rehabilitation~~ Clinic is located.
- (6) **Proximity to Certain Uses.** No new Methadone ~~or Substance Use Rehabilitation~~ Clinic shall be located within a 500-foot radius of any part of an existing school or park. ~~For purposes of this section, a park does not include open greenspace that is not located in the OS zoning district.~~
- (7) ~~In reviewing special permit applications for this use, the Commission may give preference to existing facilities that are looking to relocate or expand, over allowing new facilities.~~

SECTION 1.3.6. VARIANCE

Section 1.3.6.E.(5) The zoning board of appeals may not issue a variance for any of the following new or expanded principal uses (or for any such use as an accessory use) or conditions:

- (c) Methadone ~~or drug rehabilitation clinic~~ Substance Use Rehabilitation Clinics in any DT, MS, ~~MXMX-2~~, NX, or N district.

SECTION 3.3.5 - SERVICE USES

Section 3.3.5.A. Neighborhood Service. A service use with a gross floor area of less than 8,000 square feet. Neighborhood service includes such uses as those listed in Figure 3.3-C Typical Service Uses.

- (2) **Medical Clinic.** Medical clinic means a licensed institution providing same-day, walk-in, or urgent medical care and health services to the community, primarily ill or injured out-patients, which is not a hospital per Section 3.3.2.B and which is not a medical office per Section 3.3.7.A.(1), and which ~~shall not include methadone or drug rehabilitation clinics~~ is not a Methadone ~~or Substance Use Rehabilitation~~ Clinic per Section 3.3.5.P. Provision of an indoor waiting area for use by individuals when a portion of the facility is not opened for operation is required, so that clients will not be required or allowed to queue for services outdoors. The term licensed institution as used in this section shall mean a single legal entity formed for the diagnosis and treatment of out-patients in which at least 2 medical professionals, licensed by the State and having related specialties, practice cooperatively. The term medical professionals shall only mean medical doctors, dentists, clinical psychologists, osteopaths, podiatrists, chiropractors, acupuncturists, nurses or nurse practitioners, or physiotherapists so licensed by the State. A medical clinic shall not

provide rental services, storage of hazardous materials in large quantities, or dormitory facilities.

SECTION 3.3.7 - EMPLOYMENT USES

B. **Office Uses.** A category of uses for businesses that involve the transaction of affairs and/or the training of a profession, service, industry, or government. Patrons of these businesses usually have set appointments or meeting times; the businesses do not typically rely on walk-in customers. Office uses include those listed in Figure 3.3-D Typical Office Uses.

- 1) **Medical Office.** Medical office means a facility in which medical professional(s) licensed by the State have their offices and provide medical care and health services primarily on a pre-scheduled basis (not primarily on a same-day or urgent care basis), which is not a hospital per Section 3.3.2.B and which is not a medical clinic per Section 3.3.5.A.(1), and which ~~shall not include methadone or drug rehabilitation clinics~~ is not a Methadone ~~or Substance Use Rehabilitation Clinic~~ per Section 3.3.5.P. The term medical professionals shall only mean medical doctors, dentists, clinical psychologists, osteopaths, podiatrists, chiropractors, acupuncturists, nurses or nurse practitioners, or physiotherapists so licensed by the State. A medical office may also contain in-house ancillary services such as in-house diagnostic testing facilities, medical counseling services, in-house research, and similar services. A medical office shall not provide rental services, storage of hazardous materials in large quantities, or dormitory facilities.

SECTION 4.8 GENERAL BUILDING TYPE REGULATIONS

Section 4.8.2.B. Height. Under the MX-1 column, in the “Ground Story Maximum Height” row, add “Note 3.a.”.

Note 3.a. For any Methadone ~~or Substance Use Rehabilitation Clinic~~ (refer to Section 3.3.5.P), if ground floor is 18 feet or more in height ~~along the primary street facade~~, the ground story shall count as 2 stories towards maximum building height.

Section 4.8.2.C Uses. In the Ground Story and Upper Story rows, add a “Note 5”.

Note 5. Per Section 3.3.5.P, a Methadone ~~or Substance Use Rehabilitation Clinic~~ may occupy 100% of the building’s ground floor or upper floors.

SECTION 7. PARKING

Figure 7.2-A Maximum Off-Street Automobile Parking

- Automobile Fueling & Limited Service, Automobile Service/Car Wash, Drinking Places, Entertainment Assembly, ~~& Smoking Places~~, and Methadone ~~or Substance Use Rehabilitation Clinic~~: In accordance with special permit review or, if special permit not required, in accordance with site plan review.

Figure 7.2-B Bicycle Parking (*NO CHANGES PROPOSED*)

- Retail & Service Uses

- Minimum long-term: No minimum requirement
- Minimum short-term: 1 per every 3,000 square feet.

Attachment 1. Narrative submitted by the applicant, dated July 11, 2022.



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Via DDS Website

July 11, 2022

Ms. Josye Utick, Chair,
and Commission Members
Planning & Zoning Commission
City of Hartford
260 Constitution Plaza
Hartford, CT 06103

Mr. I Charles Mathews, Director of
Department of Development Services
Ms. Aimee Chambers, AICP, Director of
Planning
City of Hartford
260 Constitution Plaza
Hartford, CT 06103

Re: Application of The Hartford Dispensary d/b/a Root Center for Advanced Recovery for Zoning Regulation Amendment

Dear Chair Utick, Commission Members, Mr. Mathews, and Ms. Chambers:

On behalf of the Root Center for Advanced Recovery, we hereby apply for an amendment to the Hartford Zoning Regulations, to permit a Methadone or Substance Use Rehabilitation Clinic as a standalone special permit use in the MX-1 district.

As detailed below, Hartford's current prohibition of "Methadone or Drug Rehabilitation Clinics" in all zoning districts violates The Americans with Disabilities Act, 42 U.S.C. §§ 12101, *et seq.* ("ADA"). Root Center's proposed text amendment will assist in remedying this situation.

If approved, Root Center will return to the Commission with an application for special permit approval to construct a Methadone or Substance Use Rehabilitation Clinic at 35-39 Lafayette Street (Parcel ID 225-440-113), 152-154 Oak Street (Parcel ID 226-440-108), 156-158 Oak Street (Parcel ID 226-440-109), and 162-164 Oak Street (Parcel ID 226-440-110) in

▶ ALBANY ▶ BOSTON ▶ CHICAGO ▶ HARTFORD ▶ MANCHESTER ▶ NEW YORK ▶ PROVIDENCE

Hartford, Connecticut (collectively, the "Subject Property"). Hartford Dispensary Real Estate Inc., an affiliate of Root Center, is under contract to purchase the Subject Property.

The Applicant

Root Center is a private, non-profit, health care agency that provides behavioral health and substance use services to the greater Hartford community. Root Center currently operates two methadone / substance use rehabilitation clinics in Hartford at 345 Main Street and 16-18 Weston Street, which together serve approximately 1,400 patients suffering from substance use disorders. A more detailed mission statement and a narrative summary of Root Center's operations and services is at Tab 3.

In an effort to better serve its existing and future patients, Root Center recently has embarked on a mission to construct new, state-of-the-art clinics throughout Connecticut. Most recently, Root Center closed its clinic on Whiting Street in New Britain, Connecticut, and relocated its operations to a newly-constructed clinic at 542 East Main Street in New Britain. Architectural (pre-construction) perspectives and as-built photographs of the New Britain clinic are at Tab 5.

The ADA and The Hartford Zoning Regulations

As it did in New Britain, Root Center now wishes to relocate its 345 Main Street operations to a new clinic on the Subject Property. However, the Hartford Zoning Regulations explicitly prohibit "Methadone or Drug Rehabilitation Clinics" in all zoning districts.¹ See Regulations §§ 3.3.5.A(1), 3.3.7.A(1) (excluding Methadone or Drug Rehabilitation Clinics from the definition of Medical Clinic and Medical Office, respectively).

Under the ADA, individuals with substance use disorders who are participating in a rehabilitation program are defined as having a "disability," and thus, discrimination against such individuals is a violation of the Act. A number of federal courts interpreting the ADA have held that zoning regulations or decisions that discriminate against drug and alcohol rehabilitation programs, or methadone clinics, violate the ADA. See *MX Group, Inc. v. City of Covington*, 293 F.3d 326, 344 (6th Cir.2002) ("[T]he blanket prohibition of all methadone clinics from the entire city is discriminatory on its face."); *Bay Area Addiction Research and Treatment, Inc. v. City of Antioch*, 179 F.3d 725, 730–37 (9th Cir.1999) (holding that ADA applied to zoning ordinance barring methadone clinics within 500 feet of residential areas, and that such ordinance was discriminatory on its face); *Innovative Health Sys., Inc. v. City of White Plains*, 117 F.3d 37, 44–49 (2d Cir.1997) (holding that the ADA applies to zoning decisions involving drug and alcohol rehabilitation center).

Hartford's blanket prohibition on "Methadone or Drug Rehabilitation Clinics," therefore, violates the ADA.

¹ Root Center is able to operate its two clinics in Hartford as preexisting, non-conforming uses.

Proposed Zoning Regulation Amendment

To address this violation, Root Center is proposing an amendment to the Regulations to permit a Methadone or Substance Use Rehabilitation Clinic as a standalone special permit use in the MX-1 district.

A draft of the proposed amendment is at Tab 4. The Commission will note that, in addition to proposing a new use in the MX-1 district, Root Center also has incorporated into its proposed amendment a number of design elements that differ modestly from the existing MX-1 district Regulations for a Medical Clinic and General Building Type (which most closely meets the needs of a Methadone or Substance Use Rehabilitation Clinic), but are necessary for the effective operation of a Methadone or Substance Use Rehabilitation Clinic, reflective of the unusual configuration of the Subject Property, and in-line with Root Center's brand and aesthetic.

Specifically, Root Center's proposed amendment provides that the principal entry to the proposed clinic will be located at the rear of the building, instead of along the site frontage; this is proposed to ensure patient privacy, in accordance with federal law. Root Center also has proposed text allowing an applicant to satisfy the two-story minimum height requirement in the MX-1 by allowing the inclusion of a clerestory as a second story, because the proposed clinic requires a single-floor level that can be easily monitored at all times by clinic staff. In an effort to meet the spirit and intent of the existing Regulations, however, Root Center's proposed text amendment includes language regarding the story height (minimum nine feet, including parapet walls), roof type (parapet required on the upper-most story), and allowing for the provision of future / staff-only entrances along the front of the building (two such entrances provided along Lafayette Street and Grand Street).

Each of the design elements that differ from the underlying Regulations for a Medical Office and General Building Type in the MX-1 is highlighted in red text in the zoning table at Tab 7. With the exception of those few standards, Root Center's proposed design meets the majority of the bulk standards applicable to a Medical Office / General Building Type in the MX-1 district.

Using the New Britain clinic as a model, Root Center's design team has drafted the conceptual site plan and elevations attached here at Tab 6. The proposed design complies in full with the Regulations, including the proposed text amendment.

When asked to describe the design of the building, Root Center's consulting architect, Ted Cutler, has provided this narrative:

The proposed building represents Root's groundbreaking new paradigm in addiction treatment, with modern clinical functions blended with open and daylight group and individual counseling spaces for an inviting yet safe environment for patients and professional staff alike. All clinical operations reside on a single floor to meet medical programmatic requirements and ensure well-monitored care and service flow. To integrate with the contextual neighborhood scale and spirit of the form-based code, a clerestory is added to the single story design at the

corner of Lafayette Street and Grand Street. This provides the appeal of a second floor, while effectively screening rooftop equipment and allowing an abundance of daylight from vaulted ceilings into the ground floor common spaces below. While the main entrance resides at the patron lot behind, the street-facing facades integrate small entry courts to breakdown the massing and allow the building to adapt to potential functional change in the future. The exterior materials blend clear glass and horizontal shiplap metal siding of neutral tones and woodgrain finish - providing a warm backdrop for the Root Center brand.

As noted above, the applicant will return to the Commission with an application for special permit and site plan approval for the proposed Clinic on the subject property if the proposed text amendment is approved.

We appreciate the opportunity to present this application to the Commission at its earliest possible meeting. Thank you.

Very truly yours,



Andrea L. Gomes

Attachments

cc: Steven Zuckerman (w/ att.)
Ted Cutler (w/ att.)
James Cassidy (w/ att.)