

FEMA
FINDING OF NO SIGNIFICANT IMPACT
HHC Bellevue Hospital Hazard Mitigation
New York City, New York County, NY
New York City Health and Hospitals Corporation (HHC)
FEMA-4085-DR-NY

BACKGROUND

On October 29, 2012, Hurricane Sandy caused storm damage to several areas of New York City including Bellevue Hospital in New York County, New York. President Barack Obama declared Hurricane Sandy a major disaster on October 30, 2012. The declaration authorized federal public assistance to affected communities and certain non-profit organizations per Federal Emergency Management Agency (FEMA) 4085-DR-NY and in accordance with the Robert T. Stafford Disaster Relief and Emergency Assistance Act of 1974 (42 U.S.C. 5172) as amended; the Sandy Recovery Improvement Act (SRIA) of 2013 and the accompanying Disaster Relief Appropriations Act, 2013. The New York City Health and Hospitals Corporation (HHC) (Subgrantee), which operates the city's public healthcare system has applied to FEMA for financial assistance for a comprehensive flood mitigation project for Bellevue Hospital, its healthcare facility located in the Kips Bay neighborhood on the east side of Manhattan. The New York State Division of Homeland Security and Emergency Services (NYS DHSES) is the Grantee partner for the proposed action.

Hurricane Sandy inundated the Bellevue Hospital campus with contaminated floodwaters, causing the loss of critical electrical and mechanical systems ultimately requiring evacuation of all patients and staff. HHC is seeking funding from FEMA pursuant to sections 406 and 428 of the Robert T. Stafford Disaster Relief and Emergency Assistance Act for the Proposed Project, which would prevent damage to the hospital from future storm or flooding events by providing a flood barrier around the hospital campus as well as elevated and/or hardened space for critical mechanical, electrical, and plumbing (MEP) equipment. The Proposed Project would also provide redundant systems for important hospital infrastructure to ensure that the hospital is fully operational under backup systems.

This Environmental Assessment (EA) has been prepared in accordance with Section 102 of the National Environmental Policy Act (NEPA) of 1969, as amended; and the Council on Environmental Quality (CEQ) Regulations for Implementation of NEPA (40 Code of Federal Regulations [CFR] Parts 1500 to 1508). The purpose of the EA is to analyze the potential environmental impacts of the proposed project and alternatives, including a no action alternative, and to determine whether to prepare an Environmental Impact Statement (EIS) or a Finding of No Significant Impact (FONSI). In accordance with above referenced regulations and FEMA's regulations for NEPA compliance found at 44 CFR Part 10, FEMA is required, during decision making, to fully evaluate and consider the environmental consequences of major federal actions it funds or undertakes.

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PROJECT DESCRIPTION

The proposed project would construct a perimeter boundary system around the 7-acre Bellevue Hospital campus consisting of a series of connected permanent and removable walls with integrated flood gates. Additional mitigation measures that would be implemented include strengthening of the loading dock walls, stormwater and sanitary pump stations, mitigation of existing elevators, new exterior elevators, relocation of air handling units and switchgears, installation of a redundant water and medical gas system, mitigation of emergency power, and installation of a backup heating system.

SUMMARY OF POTENTIAL IMPACTS AND MITIGATION

The Subgrantee identified that the proposed project is the best-suited alternative to repair, rehabilitate, and increase the resiliency of Bellevue Hospital and to minimize damage to the critical facility's infrastructure and ensure the hospital remains fully operational during and after future storm or flooding events. The perimeter boundary protection system and other mitigation measures would provide a defense against flooding, thus minimizing risk of future damage to the hospital's critical assets and minimizing future disruption of function and service to the community. The continuous functionality of the hospital is critical to minimize deleterious public health, economic, and environmental consequences that could arise as a result of a disruption in the hospital's service.

This EA concludes that the construction and operation of the perimeter boundary system and other mitigation measures would have no significant adverse impact on the human environment. While there are numerous ongoing projects throughout New York City and near the Bellevue Hospital site related to restoring roads, buildings, recreational facilities, and public utilities to pre-disaster conditions, the proposed project is not anticipated to impact these projects. The proposed project is subject to certain design, regulatory compliance, and/or best management practices under New York City and state regulatory frameworks, including permitting and required reviews. Additional impacts not addressed through these existing local and state means are predominantly temporary, incremental, and not a significant impact to the human or natural environment.

PUBLIC INVOLVEMENT

An electronic copy of the EA was made available by email request and for download from <http://www.nyc.gov/html/hhc/html/about/About-PublicNotice-BellevueEA.shtml>. The public was invited to submit written comments by mail to: FEMA NY Sandy Recovery Office, Attn: EHP-Bellevue Hospital Hazard Mitigation EA Comments, 118-35 Queens Blvd., Forest Hills,

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NY 11375, or: FEMA-4085-Comment@fema.dhs.gov. This EA reflects the evaluation and assessment of the federal government, the decision-maker for the federal action; however, FEMA has taken into consideration any substantive comments received during the public review period to inform the final decision regarding grant approval and project implementation.

PERMITS & PROJECT CONDITIONS

The Subgrantee is responsible for obtaining all applicable Federal, State, and local permits and other authorizations for project implementation prior to construction and adherence to all permit conditions. Any substantive change to the approved scope of work will require re-evaluations by FEMA for compliance with NEPA and other laws and EOs. The Subgrantee must also adhere to the following conditions during project implementations and consider the below conservation recommendations. Failure to comply with grant conditions may jeopardize Federal funds:

1. The Best Available Data (BAD) must be used to determine the 500-year floodplain elevation for final engineering design in accordance with 44 CFR Part 9. At the time of this publication, the Preliminary Flood Insurance Rate Map Community-Panel Number 3604970201G dated January 30, 2015 is the BAD.
2. Any proposed construction in the floodplain must be coordinated with the local floodplain administrator and must comply with Federal, state and local floodplain laws and regulations.
3. Excavated soil and waste materials shall be managed and disposed of in accordance with applicable Federal, state, and local regulations. Solid waste haulers will be required to have a NYSDEC waste hauler permit and all waste will need to be disposed of or processed at a permitted facility.
4. Threatened or endangered species are likely to not be found in the area of the proposed project site. As a result, pursuant to section 7(a)(4) of the ESA and implementing regulations at 50 CFR § 402.02 and 50 CFR § 402.10, FEMA has determined that the proposed action would not be likely to jeopardize endangered or threatened species, or destroy or adversely modify critical habitat. If any threatened or endangered species are to be found in project area, work will cease and consultation with United States Fish and Wildlife Services and other appropriate agencies will be conducted.
5. In the event that unmarked graves, burials, human remains, or archaeological deposits are uncovered, the Subgrantee and its contractors will immediately halt construction activities in the vicinity of the discovery, secure the site, and take reasonable measures to avoid or minimize harm to the finds. The Subgrantee will inform the Grantee, NYSHPO and FEMA immediately. The Subgrantee must secure all archaeological findings and shall restrict access to the area. Work in sensitive areas may not resume until

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consultations are completed or until an archaeologist who meets the Secretary of the Interior's Professional Qualification Standards determines the extent and historical significance of the discovery. Work may not resume at or around the delineated archaeological deposit until the Subgrantee is notified by the Grantee to proceed.

6. A Construction Protection Plan may be required for this site to identify the coordination needed to limit potential impacts to the environment, protected resources and communities within and abutting the Project area.
7. The Subgrantee and its contractor are required to use best management practices for construction not limited to sedimentation and erosion control measures, dust control, noise abatement and restriction of work areas to limit vegetation removal and habitat impacts.
8. OSHA standards shall be followed during construction to avoid adverse impacts to worker health and safety.
9. The Subgrantee shall submit copies of all obtained permits to the Grantee/FEMA at or prior to final closeout of the public assistance grant.
10. Subgrantee shall not initiate construction activities until fifteen (15) days after the date that the Finding of No Significant Impact (FONSI) has been signed as "APPROVED."

PUBLIC COMMENTS

Following are the comments received from the public comment period for the EA and FEMA's Response

Commenter	Comment	Response
US EPA	Language about native planting plans should be included.	Post construction revegetation at Bellevue Hospital campus will be done using native plants as practicable.
US EPA	More details on how greenhouse gases are analyzed in the EA. a. How it is addressed through SEQR; is HHC preparing a CEQR/SEQR review? If so, that may have the level of analysis needed. b. CEQ guidance from December 2014 updating 2010 guidance should be referenced.	Bellevue Hospital anticipates that variances will be required from the New York City Board of Standards and Appeals; these actions are subject to review under New York City Environmental Quality Review (CEQR). EA Section 5.17, "Climate Change," was prepared following the CEQ guidance referenced by US EPA as well as SEQRA and CEQR guidance. The Draft CEQ guidance suggests a threshold of 25,000 tons for requiring quantified analysis; the Proposed Alternative is well below the 25,000 ton threshold, thus not requiring analysis.

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		<p>Further, since the Proposed Alternative would include updated and more efficient boilers, the EA concluded: "energy use and the associated GHG emissions would improve with the implementation of the Proposed Alternative, consistent with Federal, State, and City policies aimed at reducing GHG emissions."</p>
<p>US EPA</p>	<p>A request for more substance backing up the claim in the Clean Air Act section regarding the de minimus discussion; is there a quantitative analysis or information to support the assertion beyond the air quality permit included? This pertains not just to the operation of the facility but also the construction period.</p>	<p>The Proposed Alternative would include the installation of a perimeter boundary protection system and infrastructure improvements to provide a defense against flooding. Overall, the Proposed Alternative would not increase the capacity of the hospital. Therefore, the Proposed Alternative would not result in an increase in vehicle trips after the construction period and consequently would not increase emissions from mobile sources. Although the Proposed Alternative would provide redundant systems to ensure that the hospital is fully operational under backup systems, it would not affect the operation or loads requirement of the hospital. Therefore, the Proposed Alternative would result in insignificant changes in the total amount of pollutants emitted region wide.</p> <p>Unlike typical ground-up building construction, the Proposed Alternative would not involve extensive building demolition, excavation, or foundation activities, which typically generate the highest levels of air emissions. Although the installation of the perimeter boundary protection system would require excavation of existing soils, these activities would be minimal. In addition, measures would be taken to reduce pollutant emissions during construction in accordance with all applicable laws, regulations, and building codes. Further, the increasing use of newer and cleaner</p>

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		<p>vehicles and engines for construction results in greatly reduced air pollutant emissions related to construction activities. Accordingly, the potential construction emissions associated with the Proposed Alternative are expected to be below the applicable de minimis levels.</p> <p>Therefore, the Proposed Alternative would not result in adverse effects on air quality.</p>
US EPA	<p>Cumulative Effects section does not sufficiently address FEMA-funded projects in the immediate area. There needs to be discussion about cumulative effects from near-by known FEMA projects.</p>	<p>FEMA has funded flood mitigation and recovery work at the NYU Langone campus north of Bellevue. The Veteran's Administration has funded flood mitigation work at the VA Hospital as well. The work done at Bellevue hospital will not affect the work done at either of these locations and is not expected to be affected substantially by these projects.</p> <p>Post construction, the flood mitigation measures will not interfere with each site as the Hydrology and Hydraulics study has shown that the measures will only cause a negligible increase in flood offset that would not interfere with the other hospital sites and surrounding community.</p>
Michelle Deal Winfield	<p>Received request to extend 30 day public comment period due to receiving a direct mailing about the project.</p>	<p>The EA was posted on the Health and Hospital Corporations (HHC) website named in the public notice and the Public Involvement section of the EA as well as at the New York City Public Library, Bellevue Hospital, and the office of the HHC. A public notice was posted to the New York Post on July 9th 2015 which started the 30 public comment period. The comment period ended on August 8th 2015 thus completing the 30 day comment period.</p> <p>FEMA's opinion is that due diligence has been exercised with a sufficient public notice and EA distribution for public review and will not be extending the comment</p>

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		period. Additional public involvement may be available through New York City's CEQR and permitting process.
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FINDINGS

In accordance with NEPA and 44 CFR Part 10, FEMA has determined that the proposed action will have no significant impact on the quality of the human environment. As a result of this FONSI, an Environmental Impact Statement will not be prepared, and the proposed project as described in the Final PEA may proceed. This FONSI serves as the final public notice for the proposed project.

APPROVED:



Michael Grisham
FEMA Region II Regional Environmental Officer Representative

August 26, 2015