

DRAFT STRAWMAN FOR CONTINUING CARE FACILITY DISTRICT (PCC) AND RELATED CHANGES

DEFINITIONS (New provisions are underlined.)

ADULT DAY HEALTH CARE CENTER: A licensed facility where four or more adults who are aged, medically fragile, or infirm and/or who have a disability (handicap) receive supportive services, health monitoring, protection, and supervision on a regular, non-residential basis during part of a twenty-four-hour day. This use does not include any facility licensed by the State Board of Health or the Department of Mental Health, Mental Retardation and Substance Abuse Service or any facility that provides for the primary diagnosis or treatment of a medical or mental health condition. This use also does not include ASSISTED LIVING FACILITY, NURSING FACILITY OR HOME, or SENIOR CENTER.

ASSISTED LIVING FACILITY: A licensed facility for persons who are unable to live independently that provides all of the following: (a) private ~~living quarters~~ or semi-private accommodations, which include a bed and accessible bathroom, and may include ~~kitchen~~ limited food/drink preparation facilities, limited to a sink, refrigerator and/or microwave;; (b) supervision and general care, including but not limited to the provision of all daily meals, housekeeping, and health care;; and (c) life care services and assistance with moderate activities of daily living. For purposes of this Ordinance, an assisted living facility ~~shall be~~ is deemed a MEDICAL CARE FACILITY.

CONTINUING CARE FACILITY: A coordinated development under one ownership that provides a variety of accommodation options within a facility offering a continuum of life and health care services. Such a facility must be developed as an integrated continuum of accommodation types and service features that allows for the ability to move between levels of support as an individual's health care needs evolve. At a minimum, such a facility must offer or provide life care and other services to include the on-site provision of meals, housekeeping, transportation, recreation, health care, and other services integral to the personal, health, and therapeutic care of persons within the facility.

DWELLING: A building or portion thereof, but not a MOBILE HOME or any building or portion of a building within a CONTINUING CARE FACILITY, designed or used for residential occupancy. The term ~~'dwelling'~~ "dwelling" does not include ~~shall not be construed to mean~~ a motel, rooming house, hospital, or other accommodation used for more or less transient occupancy.

DWELLING UNIT: One (+) or more rooms in a residential building or residential portion of a building ~~which~~ that are arranged, designed, used, or intended for use as a complete, independent living facility, which includes provisions for living, sleeping, eating, cooking and sanitation, but does not include any unit located within a CONTINUING CARE FACILITY. Occupancy ~~shall~~ must be in accordance with the provisions of Sect. 2-502.

INDEPENDENT LIVING FACILITY: A residential development that is primarily limited to occupancy by elderly persons and/or by persons with handicaps (disabilities) a disability (which includes a handicap, as such term is defined in the Federal Fair Housing Amendment Act of 1988.) Such a facility shall provide must include: (a) dwelling units with complete kitchen facilities, (b) supportive services, such as that could include a meal program meals, personal emergency response systems, recreation and transportation services, and (c) universal design features, such as wider doorways and hallways, accessible-ready bathrooms and lower light switches, and (d) on-site staff. This use does not include a CONTINUING CARE FACILITY or any development providing only age-restricted housing with no on-site meal service, supportive services and/or staff. An INDEPENDENT LIVING FACILITY may include, as an accessory component, a NURSING FACILITY and/or an ASSISTED LIVING FACILITY, if the combined number of units or beds in all such accessory facilities comprises no more than twenty percent of the total number of units in the INDEPENDENT LIVING FACILITY and use of such facilities is primarily by persons who previously occupied an independent living unit within the development.

MEDICAL CARE FACILITY: Any institution, place, building, or agency, whether or not licensed or required to be licensed by the State Board of Health or the State Hospital Board, by or in which facilities are maintained, furnished, conducted, operated, or offered for the prevention, diagnosis or treatment of human disease, pain, injury, deformity or physical condition, whether medical or surgical, of two (2) or more non-related mentally or physically sick or injured persons, or for the care of two (2) or more non-related persons requiring or receiving medical, surgical or nursing attention or service as acute, chronic, convalescent, aged, physically disabled, or crippled; including but not limited to a general hospitals HOSPITAL, sanatorium, sanitarium, assisted living facility ASSISTED LIVING FACILITY, nursing home, NURSING FACILITY, memory care facility, intermediate care facility, extended care facility, mental hospital, intellectual disability care facility, medical schools and other related institutions and facilities facility, whether operated for profit or nonprofit, and whether privately owned or operated by a local government unit. This term shall does not include a physician's office, first aid station for emergency medical or surgical treatment, medical laboratory, CONGREGATE LIVING FACILITY, CONTINUING CARE FACILITY, GROUP RESIDENTIAL FACILITY, or INDEPENDENT LIVING FACILITY.

NURSING FACILITY: Also known as extended care home, rest home, or convalescent home. A nursing facility is Any place containing beds for two (2) or more patients, established to render domiciliary and/or nursing care for chronic or convalescent patients and which is properly licensed by the State, but not including a child care homes facility or facilities for the care of drug addicts, alcoholics, mentally ill or developmentally disabled patients. This use includes a nursing home, extended care home, rehabilitation center, skilled nursing facility, memory care facility, rest home, and convalescent home.

SENIOR CENTER: A building, other than a dwelling or mobile home, designed primarily for social, educational, and recreational interaction for four or more adults aged fifty-five or over who attend on a drop-in, intermittent, or regular basis during only part of a twenty-four-hour day. This term includes a facility designed for adults who do not require the services of a caregiver for help with activities of daily living, but it does not include ADULT DAY HEALTH CARE

CENTER or any other facility caring for persons who are medically fragile or infirm; who pose a risk to self or others; or who are unable to independently negotiate center facilities, follow safety procedures, understand and carry out directions from staff, recognize and respond appropriately to emergency situations, eat independently, and use the rest room unassisted. Any such facility operated by any department or branch of the Federal Government, Commonwealth of Virginia or the Fairfax County government under the direct authority of the Board of Supervisors, School Board or Park Authority is deemed a PUBLIC USE.

ADD NEW CONTINUING CARE FACILITY DISTRICT (PCC)

Part 6 6-600 PCC PLANNED CONTINUING CARE FACILITY

6-601 Purpose and Intent of the District

The Planned Continuing Care Facility District is intended to provide for a development centered around a continuing care facility that offers accommodation choices, medical care services, and life care services in varying levels and combinations to older adults and/or persons with a disability and that includes full-time, on-site supervision and administration. This district must provide for a mix of accommodation styles and care services that foster aging-in-place within the development, including, at a minimum, the provision of meals, recreational opportunities, health care services, and personal services. The district may be established in an area that is planned for institutional, residential, commercial (office/retail/service), or mixed-use development or where the guidelines set forth in the comprehensive plan would otherwise permit the establishment of an independent living facility, assisted living facility, or other medical care facility.

To these ends, rezoning to and development under this district will be permitted only in accordance with a development plan prepared and approved in accordance with Article 16.

6-602 Principal Uses Permitted

The following principal uses are permitted subject to the approval of a final development plan prepared in accordance with the provisions of Article 16, and subject to the use limitations set forth in Sect. 606 below.

1. Continuing care facility.
2. Public uses.

6-603 Secondary Uses Permitted

The following secondary uses may be permitted by the Board in a PCC District when they are of a scale and in a location designed to serve persons within the continuing

care facility or, where supported by the recommendations of the comprehensive plan, to serve people and uses in areas near the facility:

- A. Accessory uses, accessory service uses and home occupations as permitted by Article 10.
- B. Affordable Dwelling Units and/or Workforce Dwelling Units, subject to the provisions of Sect 606, below.
- C. Automated teller machines.
- D. Business service and supply service establishments.
- E. Columbarium and mausoleum for human or animal interment.
- F. Commercial and industrial uses of special impact (Category 5), limited to:
 - 1. Carryout restaurants
 - 2. Drive-in financial institutions
 - 3. Drive-through pharmacies
 - 4. Funeral chapel
 - 5. Hotels, motels
 - 6. Kennels, limited by the provisions of Sect. 606 below
 - 7. Offices
 - 8. Quick-service food stores
 - 9. Theaters
 - 10. Retail sales establishments
 - 11. Restaurants
 - 12. Restaurants with drive-through
 - 13. Veterinary hospital, limited by the provisions of Sect. 606 below
- H. Commercial recreation uses (Group 5), limited to:
 - 1. Bowling alleys

2. Commercial swimming pools, tennis courts and similar courts
3. Dance halls
4. Health clubs
5. Indoor recreational uses, exclusive of firing and archery ranges

I. Community uses (Group 4)

J. Financial institutions.

K. Garment cleaning establishments.

L. Institutional uses (Group 3), limited to churches, chapels, temples, synagogues and other places of worship.

M. Personal service establishments.

N. Quasi-public uses (Category 3), limited to:

1. Congregate living facilities
2. Cultural centers, museums and similar facilities
3. Private clubs and public benefit associations
4. Private schools of special education

O. Repair service establishments.

P. Transportation facilities (Category 4), limited to bus stations.

6-604 Special Permit Uses

Subject to the standards and limitations set forth in Article 8, any Group 8 - Temporary Use may be permitted with the approval of a temporary special permit when the use is not specifically designated on an approved final development plan.

6-605 Special Exception Uses

Subject to the use limitations presented in Sect. 606 below, any use presented in Sect. 603 above as a Group or Category use may be permitted with the approval of a special exception when the use is not specifically designated on an approved final development plan.

6-606 Use Limitations

1. A continuing care facility must be located in an area served by one or more major thoroughfare or collector streets and where the property is served by public water and sewer.
2. All developments must conform to the standards set forth in Part 1 of Article 16 and all uses must comply with the performance standards set forth in Article 14, as applicable.
3. No Non-Residential Use Permit for a secondary use will be granted until a Non-Residential Use Permit for the continuing care facility has been approved. All secondary uses, except home occupations and automated teller machines, must be shown on an approved final development plan prepared in accordance with the provisions of Article 16.
4. Any use permitted under an approved final development plan must be in substantial conformance with that plan as provided for in Sect. 16-403.
5. All applications for a PCC District must include a detailed proposal for how the development will satisfy the comprehensive plan guidelines addressing affordable accommodations for older adults and/or adults with a disability. At the applicant's option, this may include the provision of affordable dwelling units that could serve employees of the continuing care facility.

NOTE: The Comprehensive Plan will be amended to include affordability guidelines that allow for affordability to be addressed in a number of ways and will include an anticipated benchmark for addressing affordability.

The Comprehensive plan will include these options, in any combination, as guidelines to address affordability:

- 1. Provide on-site or off-site affordable accommodations in accordance with the standards of the Affordable Dwelling Unit (ADU) Program in Part 2 of Article 8 of the Zoning Ordinance, and/or the Board of Supervisors' Workforce Dwelling Unit (WDU) Policy. Any on-site or off-site ADUs and/or WDUs may be made available to current or prospective patrons of the*

continuing care facility or marketed to employees of the facility. The floor area associated with any on-site units (within the PCC District boundary), may be developed as bonus intensity in the continuing care facility and not included in the maximum floor area specified for the district; and/or

2. The use of auxiliary grants, private grants, donations, endowments, trusts, or subsidies, or any other funding sources used to provide affordable accommodations and services within the continuing care facility; and/or
3. The dedication of on-site or off-site land in a sufficient amount and of sufficient quality to facilitate the development of affordable dwelling units or accommodations within the area subject to the PCC District rezoning or off-site; and/or
4. The purchase and dedication to the County of dwelling units to be used by the County or designated agent for the purpose of providing affordable housing; and/or
5. A contribution of funds to the Housing Trust Fund to be specifically utilized for the provision of affordable dwelling units or accommodations for older adults or persons with disabilities.

The applicant must demonstrate that the combined value of all affordability initiatives is equivalent to the current value of the rent for a one-bedroom multiple family dwelling unit in an amount of at least 12% of the total number of accommodation units within the continuing care facility. For equivalency purposes, such rentals should be considered for a thirty-year period and equally divided into three income tiers for a one-person household of up to 60%, 80% and 100% of the Area Median Income (AMI) for the Washington Metropolitan Statistical Area.

All proposals that include an affordable accommodation or housing program other than through the ADU or WDU Programs must be accompanied by a detailed description of all elements of the proposed affordability program, how that program will be administered for a period of not less than thirty years, the income limits and maximum prices to be charged for an entrance fee, if any, and monthly/periodic charges, unit sizes and distribution, services provided, enforcement and other factors that enable an objective analysis of the proposal.]

6. When a use presented in Sect. 603 above as a Group or Category use is being considered for approval on a final development plan, the standards set forth in Articles 8 or 9 apply and may be modified by the Planning Commission. For any use presented for special exception approval, if the use is in substantial conformance with the approved conceptual development plan and any imposed

development conditions or proffered conditions and is not specifically precluded by the approved final development plan, no final development plan amendment is required.

7. All applications for a PCC District rezoning, and any applicable amendments thereto, will be referred to the Health Care Advisory Board. The Advisory Board will make a recommendation, to be provided to the Planning Commission and Board of Supervisors at their public hearings. The Advisory Board may, in addition to information from the applicant, solicit information and comment from providers and consumers of health services, or organizations representing such providers or consumers and health planning organizations, as appropriate, but neither the Planning Commission nor the Board of Supervisors will be bound by any such information or comment. The Advisory Board may hold one or more hearings, as appropriate, and it may ask the Board of Supervisors to defer action as may be reasonably necessary to accumulate information upon which to base a recommendation. The Board of Supervisors is not required to accommodate the Advisory Board's deferral requests.

In making its recommendation, the Health Care Advisory Board will specifically consider whether:

- A. There is demonstrated need for the proposed facility, in the location, at the time, and in the configuration proposed. Such consideration must take into account alternative facilities and/or services in existence or approved for construction, and the present and projected utilization of specialized treatment equipment available to persons proposed to be served by the applicant; and
 - B. There is a general hospital sufficiently located and equipped to ensure the availability of a full range of diagnostic and treatment services, and
 - C. The proposed facility will contribute to, and not divert or subvert, implementation of a plan for comprehensive health care for the area proposed to be served; such consideration must take into account the experience of the applicant, the financial resources available and projected for the project and operation; and the nature and qualifications of the proposed staffing of the facility.
8. Signs are permitted only in accordance with Article 12, and off-street parking and loading facilities and private streets must be provided in conformance with Article 11.
 9. Any kennel and veterinary hospital must be located within a completely enclosed building which is adequately soundproofed and constructed so that there will be no emission of odor or noise detrimental to other property in the area. The size and scale of any kennel or veterinary hospital must be appropriate related to the size and scale of the continuing care facility and cannot be designed to serve

customers from outside the community. In addition, the Health Department must approve the construction and operation of any veterinary hospitals before issuance of any Building Permit or Non-Residential Use Permit.

10. A drive-through pharmacy is permitted only on a lot which is designed to minimize the potential for turning movement conflicts and to facilitate safe and efficient on-site circulation and parking. Adequate parking and stacking spaces for the use must be provided and located in such a manner as to facilitate safe and convenient vehicle and pedestrian access to all uses on the lot.

6-607 Lot Size Requirements

1. Minimum district size: Land intended for development of a continuing care facility can be classified in the PCC District only when the purpose, intent and all standards and requirements of the PCC District can be satisfied and, unless modified by the Board of Supervisors, the land area is not less than:
 - A. ten acres; or
 - B. three acres when located within an area designated as a Community Business Center, Commercial Revitalization Area, or Transit Station Area in the adopted comprehensive plan or is in a Commercial Revitalization District.
2. Minimum lot area: No requirement.
3. Minimum lot width: No requirement.

6-608 Bulk Regulations

1. Maximum building height: Controlled by the standards set forth in Part 1 of Article 16, or as otherwise established by the guidelines in the adopted comprehensive plan.
2. Minimum yard requirements: Controlled by the standards set forth in Part 1 of Article 16, or as otherwise established by the guidelines in the adopted comprehensive plan, as may be modified by the Board.
3. Maximum floor area ratio (FAR): The intensity of the facility is based on the land use recommendation set forth in the adopted comprehensive plan, as modified in the table below. In all cases, any gross floor area attributable to any Affordable Dwelling Units and/or Workforce Dwelling Units constructed on-site is excluded from the maximum FAR noted in the table below:

(The provisions in the table are new, but are not underlined to make it easier to read.)

Comprehensive Plan Land Use Recommendation	Comprehensive Plan Density/Intensity Recommendation (dwelling units/acre or FAR)	Maximum FAR for PCC District*
Residential Use when specified in terms of Dwelling Units Per Acre (du/ac)	≤ 1 du/ac	0.20 FAR
	> 1 du/ac to ≤ 5 du/ac	0.45 FAR
	> 5 du/ac to ≤ 12 du/ac	0.80 FAR
	> 16 du/ac to ≤ 30 du/ac	1.00 FAR
	> 30 du/ac	1.25 FAR
Institutional, Office, Retail, Mixed Use, Residential, or any other use, excluding Industrial, when specified in terms of Floor Area Ratio (FAR)	All FAR levels	Plan maximum plus 25%

* The Maximum FAR does not include any floor area attributable to affordable units provided in accordance with use limitations set forth in Sect. 6-606.

4. All cellar space is counted as part of the gross floor area and must be included in the calculation of the floor area ratio for any rezoning to the PCC District, except when such cellar space:
 - A. Has a structural headroom of less than six feet, six inches and is specifically identified for mechanical equipment; or
 - B. Is specifically identified for storage and/or other uses that are accessory to the principal uses in the building; or
 - C. Is specifically identified as a loading space, including any associated travel way providing access to the space, as well as the loading dock utilized for the temporary loading and unloading of goods; or
 - D. Is specifically identified to house an unmanned datacenter or other similar telecommunication or electronic equipment.

6-609 Open Space

A minimum of twenty percent of the gross land area must be open space, except as may be modified by the Board in accordance with any urban design guidelines incorporated into the comprehensive plan or otherwise endorsed by the Board.

6-610 Additional Regulations

1. Refer to Article 16 for standards and development plan requirements for all planned developments.
2. Refer to Article 2, General Regulations, for provisions which may qualify or supplement the regulations presented above.

ADD A NEW CONTINUING CARE FACILITY USE TO PDC, PRM, PRC AND PTC

A new use, continuing care facility, will be added to the principal or permitted use provisions of the PDC, PRM, PRC and PTC Districts. The use will include use limitations that mirror the affordability provisions and Health Care Advisory Board review requirements noted above for the new PCC District. The lot size and bulk regulations for the respective districts will apply.

PARKING

Minimum off-street parking spaces accessory to the uses hereinafter designated shall be provided as follows:

Continuing care facility: 0.75 spaces per separate unit or bed approved on the development plan, plus 0.5 spaces per employee on a major work shift, or such number as the Board may require pursuant to a rezoning application.

LOADING

Minimum off-street loading spaces accessory to the uses hereinafter designated shall be provided in accordance with the following schedule:

Standard F: One (1) space for the first 10,000 square feet of gross floor area, plus one (1) space for each additional 100,000 square feet or major fraction thereof.

3. Continuing Care Facility: Standard F.

OTHER RELATED CHANGES

1. Adult day health care and senior centers will be added to the Zoning provisions in a manner similar to child care centers, in terms of location and processes. Adult day health care centers will require review and recommendation by the Health Care Advisory Board.

2. Changes to the independent living facility and medical care facility provisions in Article 9 may be required to correlate to the final continuing care facility provisions.
3. Other “housekeeping” changes are required in a variety of articles to add the new PCC District to the appropriate provisions.
4. Other definitions or changes to existing definitions may be required as part of this amendment.

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