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Bringing Life to a Hospital Site: 19 Years of Proposals for the Abandoned Malden Hospital Site in Malden, MA

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Bringing Life to a Hospital Site

19 Years of Proposals for the Abandoned Malden Hospital Site in Malden, MA

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Sustainable Community Development / Public Policy & Administration

Commonwealth Honors College 499Y Research

Community profile

Malden is a long, thin city over 1.5 miles tall and 3.5 miles wide. It is designed in traditional New England style with multiple squares concentrating commercial and residential centers. The population is 63,373 according to the latest U.S. Census report, which is nearly a 5,000-person rise since 2010 (MAPC). It has a median age of 36.2 and approximately 36.5 percent of the population is foreign-born. This is a particularly young and international population for the state, which has a median age of 39.1 and 16.1 percent are foreign-born. Between 2006-2008, it was found that a majority of the foreign-born population were from Latin America, Eastern Asia, and Southeastern Asia respectively (MAPC, 45).

Malden is strongly identified with its position on the MBTA's Orange Line and bus connection. As a "streetcar suburb," the city used to be connected by tram tracks. The city's connection to the subway system and commuter rail is an important economic asset.

The Malden Hospital sits in the West End neighborhood at the Stoneham-Medford border atop a hill overlooking Fellsmere Pond. This neighborhood is approximately 4,823 residents with roughly 60 percent renting apartments. The area is more heavily settled than the city of Malden as a whole, likely due to the continuous string of homes and a few medium-sized apartment complexes. It is a 20-minute walk from Malden Center train station and a 7-minute direct trip on the 99 bus route.

Because the hospital straddles the border of Malden and Medford, it is important to assess the adjacent neighborhood of Medford. Looking at the 7,020-person census tract, the neighborhood is significantly more white (83.42 percent to Malden's 54.37) and wealthy (with a median income of \$120,705 to \$71,795). In addition, vacancy rates are lower and only about 12 percent are rental occupants. The 65 and older population is much higher at 21 percent.

About the site

While further research may clarify the details, the hospital is approximated by 3 parcels of land—two in Malden and one in Medford. The first in Malden, which includes the hospital building, is 417,780 square feet (9.59 acres) and valued at \$15,829,300. The other is currently a few small buildings and a parking lot of 219,083 square feet (5.03 acres) and valued at \$2,207,300. This data comes from Malden's GIS website. Both are zoned as Residential A, or single-family residential. As a hospital, it had been given special zoning; there is apparent agreement that any new development will require a zoning change or special permit. Medford does not give as clear information about parcels, but it can be estimated to be 2.57 acres. This adds up to 17.19 acres, though it has been described as 17.6 acres (Greenstein, 2018; Newman, 2019), 18 acres (Taormina, 2018, June 29) and 21 acres (McCabe, 2009). I suspect 17.6 is the most accurate number.

In Malden's Residential A district (200.1.1) virtually no uses are allowed except for single-family housing, schools, and religious institutions.

I have not found any studies on the health or soil quality of the site. Demolition costs have been estimated to be over \$5 million (Greenstein, 2019).

Important notes about the history of the hospital

- The Converse family built an empire of riches in their rubber and shoe company, established in 1853 (Solo, 2017). Elisha Converse, after founding the company, became the first Mayor of Malden (Babistkaya, 2012, February 27). The Converse family is responsible for the creation of Fellsmere Pond and hired Frederick Law Olmsted to design the landscape (Babitskaya, 2012, July 17).
- The Malden Hospital land was donated by the Converse family and opened in 1892 (Babistkaya, 2012, February 27). For many years the hospital was supported by philanthropy.
- The modern hospital building was built in the 1950's or 1960's. It was expanded further in the 1980's (ibid).

- In 1997, the hospital administration merged with UniCare Health Systems, forming a new nonprofit called Hallmark Health. This organization also supervised the Lawrence Memorial Hospital in Stoneham, the Whidden Hospital in Everett, and the Melrose-Wakefield Hospital.
- In 1999, the Malden Hospital was downsized to the Malden Medical Center.
- In 2000, during a time of great hospital economic distress, Hallmark Health announced that Malden Hospital would be closed (Gould, 2001, January 15). Despite public outcry and threats of a lawsuit, Hallmark went forward with their plan. It officially closed on April 10, 2001 (Israel, 2001, April 13), though some offices may have stayed open for up to four years.
- Melrose-Wakefield hospital is the only hospital in the region that survived the onslaught of closures. Whidden nearly closed but downsized into a medical center instead; it was eventually purchased by Tufts Medical Center (Gould, 2001, April 19). Lawrence Memorial was converted into a medical center. Boston Regional Medical Center, a 100-year-old hospital in Stoneham, closed in 1999.
- Hallmark Health attempted a merger with Partners Healthcare in 2015, but the deal fell through (McCluskey, 2016, March 25). Instead, it merged with Wellforce (the parent company for Tufts Medical Center) in 2016, becoming MelroseWakefield Healthcare (McCluskey, 2016, December 23).

Other notable projects in Malden

- **TeleCom City:** Planned to be a major tech-industrial facility around the same time period of 2001. While it received more attention in the news, it did not come to fruition.
- **Rowe's Quarry:** Like the Malden Hospital, Rowe's Quarry is a large-scale site that has not been developed since its
- **City Hall:** Before its demolition in 2016, the previous city hall was known as "The Monster" (sometimes "Beast") "...of Pleasant Street" (Levine, 2016). It was built in 1975 at the connection of Pleasant and Florence street, which some claim to be a mistake that led to the economic downturn of Malden in the 1970's and 80's. While this claim is not a certain truth, the city made it a priority to rebuild city hall to become a more livable downtown. It opens Pleasant street close to its original form and adds a series of walkable areas for pedestrians and bikes. It will hold 26,000 square feet of retail space, several apartments and 42,000 square feet of office rooms (McCabe, 2015, January 16). After many years of construction, the city hall development is near completion.
- There are various successful developments by Combined Properties, inc., the proponents of the Malden Hospital's first proposal, that arose in Malden Center.

DATA FROM U.S. CENSUS

Attribute	“West End” (Malden CT341102)	Northeastern Medford (CT340100)	Malden, MA	Massachusetts	USA
<i># Population, 2018</i>	4,823	7,020	63,373	6,872,636	326,881,190
<i>Population Density (per sq. mile), 2019</i>	14,035	9,225	12,579	886	93
<i>Median Household Income, 2019</i>	\$71,795	\$120,705	\$73,740	\$89,372	\$71,720
<i>Household Income, Per Capita (\$), 2019</i>	\$46,024	\$50,855	\$37,090	\$47,451	\$37,657
<i>% Population in Poverty, Total, 2019</i>	16.18%	5.56%	14.75%	11.07%	15.36%
<i>% Population, 65 Years and Older, 2019</i>	15.26%	21.79%	14.10%	16.72%	15.92%
<i>% Education Attainment, < High School (Pop 25+), 2019</i>	11.56%	8.83%	14.33%	9.98%	13.22%
<i>% Education, Enrolled Public School (Pop 3+), 2019</i>	10.74%	12.68%	17.67%	18.81%	21.80%
<i>% Population, Speaks English (Pop 5+), 2019</i>	52.10%	75.81%	45.49%	73.26%	73.93%
<i>% Housing, Renter Occupied, 2019</i>	69.26%	11.72%	58.41%	38.69%	36.61%
<i>% Vacant Units, 2019</i>	4.60%	2.76%	5.52%	9.10%	11.19%

All following photos taken by me in late August 2019



Above: "No Trespassing" sign on a fence at the front of the hospital.



Above: Former loading dock at the side of the hospital, from Hospital Road.



Above: Boarded-up auxiliary building on Hospital Road.



Above: Closer view of the auxiliary building on Hospital Road.



Above: Main entrance to the hospital.



Above: Back of the hospital, adjacent to the wooded Medford portion, which might have been an access point for ambulatory vehicles.

List of Stakeholders

Government

Mayor of Malden

Richard C. Howard (1996 - 2012); Gary Christenson (2012 - present)

Ward 3 City Councillor

Bill Spadafora (1992 - 2005); Paul DiPietro (2006 - 2011); John Matheson (2012 - 2019); Amanda Linehan (To start in 2020)

Other notable City Councillors

Neil Kinnon (Ward 6 City Councillor 2007-2017, MVRCS founder & Board Member), Councillor-At-Large David D'ArcAngelo, Councillor-At-Large Debbie DeMaria

City Planner

Michelle Romero (2009? - present)

MelroseWakefield Healthcare

Also known as: UniCare Health Systems (before 1997) and Hallmark Health (before 2016).

President / Chief Executive

Richard Quinlan (1993-2003); Michael Sack (c. 2006); Alan McDonald (c. 2015)

Developers / Nonprofit Developers

Combined Properties, inc.

John Pereira (1991 - present)

New England Deaconess Association

Rev. Herbert B. Taylor (c. 2006 - 2009)

Fellsmere Housing Group (FHG)

Tony Green (partner) (c. 2014-2019)

Friends of Fellsmere Heights (FoFH)

DIRECTOR Steven Keleti (~2015); VICE PRESIDENT Robert Doolittle (~2014 - present); PRESIDENT Prisco Tamaro (2015 - present); TREASURER David Miller (???? - present) Alicia Garza (2015 - unknown); Joan Cyr (2015 - unknown)

List of “official” proposals

The following proposals are categorized as “major,” meaning they either signed a purchase-and-sale agreement, had serious engagement with the city council, or for at least some period of time is the most well-developed proposal in the absence of others.

In narrative analyses, **bold** means the text will be discussed and **highlight** signifies the purpose/intent.

Proposal #1: Combined Properties

Page 6
Malden Observer • Thursday, February 22, 2001

CONDITION CRITICAL

Mayor Howard, Hallmark Health announce initiative

SOUNDBITES
Heard at the hearing

The following comments came from residents in attendance at the Feb. 15 Department of Public Health hearing.

“Right now the urgent care unit can be used if a firefighter gets injured during a call. It depends on the place in the city where the fire is, but it could be 10 to 15 minutes depending on traffic (to get to Melrose-Wakefield or Lawrence Memorial), or four minutes to get to Malden Medical Center.”
— **Capt. Roy Tribble, Malden Fire Department**

“I am concerned about the Malden Hospital closing. I have heard stories of five- to eight-hour waits at the Melrose-Wakefield Hospital because there is no place else to go.”

“I actually worked in the Malden Hospital 25 years ago. Now I work (as an X-ray technician for Orthopedic Services Inc.). I see how (the closings) affect surgery scheduling. They are dealing with two less hospitals, Boston Regional Medical Center and the Malden Hospital. It impacts these doctors (and) how quickly they can schedule operations. They can’t get an operating room.”
— **Ruth Luca, Malden resident**

“We all would love to see both Malden and Everett stay open. With the closing of the Malden Hospital we always want to keep an upbeat feeling. I think Senate [President Thomas] Birmingham has worked closely (with those involved) and he is concerned about the Whidden closing. I think with him that we can save the Whidden.”
— **Michael Mennolo, Everett City Councilor**

“I used to work for Malden. It was a nice hospital. When

The following is a joint statement released by Malden Mayor Richard C. Howard and Hallmark Health President Richard S. Quinlan

Hallmark Health and the city of Malden, through the office of Mayor Richard C. Howard, have announced a unique joint initiative to assure continued access to needed health care services in the Malden community and to refocus those services on today’s most pressing needs.

Hallmark Health and its predecessor Malden Hospital have been a critical component of this community’s health care delivery system for nearly 110 years. Much has changed during that time. While it is no longer financially possible for the Malden community to support its own full service inpatient facility, the need for 24-hour medical care remains throughout the community, and a growing elderly population needs and wants a wider spectrum of services.

Hallmark Health and the city of Malden have pledged to work together to identify a new owner for the Malden Hospital building, an owner who is prepared to upgrade or convert the building and to bring much needed assisted living and related services to people who have lived all or most of their lives in the Malden community.

Assuming this upgrade and a reasonable business plan to facilitate and assure a strong medical presence in the building, Hallmark Health is prepared to relocate its Family Health Center to the main hospital building and to expand its scope of services to include 24-hour medical care supported by residents training at the Family Practice Residency at Hallmark Health.

Hallmark Health and the city of Malden will also work to structure a mutually acceptable governance arrangement to assure that the Family Health Center operation is responsive to the evolving needs of the community. Hallmark Health and the city of Malden are proposing that the hospital building house: 24-hour medical care, physician offices, senior day care and elder services, child care, other medical programs and corporate services.

As Hallmark Health transfers ownership of the Malden Hospital building, it clearly will not abandon its mission of caring for the people of this community. Hallmark will work actively and collaboratively with the city to assure that the health care needs of the community continue to be met.

While Hallmark Health and the city are united, a key element in realizing our mutual objective is to obtain governmental funding (state and federal) to assist us. We have already initiated conversations with government leaders and other key decision-makers. While no commitments have been made, we are making progress toward our mutual goals.



STAFF PHOTO BY TON CAROLINA

At last Thursday’s hearing, Mayor Richard Howard, foreground, unveiled the beginnings of a plan to work with Hallmark Health to keep health care services in Malden.

Pictured: Page 6 of the Malden Observer on February 22, 2001, as the Mayor announces his intention to repurpose the Malden Hospital.

Time period: Sept. 2001 - c. Early 2002

Status: Dropped, likely by developer; no vote held.

Description: Combined Properties, inc. was the first seriously considered proposal for the Malden Hospital site. It is described as multifamily housing and was alleged to preserve some medical services. Due to the lack of published information, there are several unconfirmed theories about what this development would entail. It fizzled out sometime between late 2001 and 2002 after public opposition.

Proponent(s):

- Combined Properties, inc. (CP), headed by John Pereira
- Mayor Richard Howard

- Hallmark Health

Supporting arguments:

- First promising development after closure of the hospital
- Promised continuation of medical services as promised by the mayor and HH in previous joint statement (Howard & Quinlan: 2001)
- Local developer

Potential reasons for failure:

- Public opposition, including vocal protest from then-Ward 3 Councillor Bill Spadafora
- Lack of transparency, or the appearance thereof, including but not limited to:
 - No disclosure about the details of the development plan
 - No disclosure about cost of plan
 - No participation by the City of Malden or the public in the meetings conducted by HH to select a developer
 - No announcement of the purchase-and-sale until a week after the publication of an Op/Ed
- Apparent misinformation about the scale of the development, including being “turned into a massive condominium development” - though since details are unclear, the exaggeration is hard to measure

Narrative analysis

<p>Michael T. Sheehan, candidate for Councillor-at-Large in 2001: “I am deeply disappointed that the Malden City Council voted to enter executive session <u>under the guise</u> that there was pending litigation between the city and Hallmark Health, owners of the hospital... under the rules of the Commonwealth, this is a <u>serious violation</u> of open public meeting laws. Furthermore, Hallmark Health informed me that their proposed sale is not with the City of Malden, but with <u>two private entities...</u>” (Sheehan: 2001).</p> <p>“The public has a <u>constitutional right</u> to be <u>informed and have a voice</u> on the future of this valuable Malden institution” (ibid).</p>	<p>Sheehan uses verbs that suggest the City and Hallmark Health are conspiring - meeting secretly “under the guise” of a court case and making a “serious violation” against the public. He also delivers the “two private entities” line (referring to CP and MVRCS) in a “not with... but” structure as though it belonged to the City of Malden. The language evokes a feeling of betrayal and trickery, with the City of Malden complicit. His invocation of the first amendment is a further call to action.</p> <p>Sheehan’s only assertion about what should happen next is to keep the public informed.</p>
<p>Bill Spadafora, Ward 3 Councillor: “As the hospital, <u>now known</u> as Hallmark Health, proposes to sell their property, we once again will <u>fight for the right</u> to be heard. Any development <u>will not happen without</u> <u>direct input</u> from people living closest to the project” (Spadafora: 2001).</p>	<p>By equating the hospital property with HH, Spadafora frames the debate about the hospital as a battle between the residents and the development proponents (CP and HH). This is illustrated by the use of “fight” and an insistence that changes “will not happen” - as if the building is guarded by the neighborhood. Spadafora also attributes a “lack of respect” from HH.</p>

<p>“The developer and Hallmark Health must understand that the number one issue up there is for them to do the right thing, keep it a low-density program and <u>have the respect for the neighbors that has been lacking</u> over the years” (Gould: 2001, October 25).</p>	<p>In these quotes Spadafora specifically suggests more public engagement and low-density development.</p>
<p>David Arsenault, ran for Ward 3 City Councillor in 2001: “I’d like it sold to a non-profit organization... [CP] is <u>up there to make money</u>. If they bought it for \$10 million, how are they going to get their money back?” (ibid).</p> <p>“We should have some kind of [affordable housing] program. People get scared on that issue because they think it’s going to bring the neighborhood down. It should be for people that are going to work hard and <u>not just milk the system to get cheap housing</u>” (ibid).</p>	<p>Like Spadafora, Arsenault plays on the offensive with CP, claiming they are making the deal solely for profit. He also addresses the issue of affordable housing, which may or may not be a factor in the CP Proposal. He seems to empathize with the anti-density sentiment by establishing two groups “people who are going to work hard” and people who will “milk the system to get cheap housing.” This innuendo seems to follow an insider/outsider paradigm, establishing a preference for “people who grew up and went to school in Malden” (ibid).</p>

Research gaps

- Look through newspapers in 2002 to find conclusion of proposal
- Inquire with CP for any more information about the proposal
- Potential interviewees: Former Mayor Richard C. Howard, John Pereira, Bill Spadafora

Proposal #2: Mystic Valley Regional Charter School (MVRCS)

Time period: 2001

Status: Dismissed by city council

Description: Mystic Valley Regional Charter School proposed building a new campus on the site. The plan was in competition with the Combined Properties, inc. proposal and seemingly fell to the wayside sometime in late 2001. There are also unconfirmed follow-up proposals for the school to reuse the land.

Proponent(s):

- MVRCS board

Supporting arguments:

- Low-density, low traffic impact
- Educational use to benefit community
- Evidence of community outreach: MVRCS handed out fliers in the neighborhood and called for further public review (Gould: 2001, October 4)
- According to my communications with former board member Neil Kinnon, the hospital was to reoccupy the original hospital building rather than rebuild

Reasons for failure:

- Not the preferred choice by Hallmark Health to adopt the site in late 2001
- Apparent lack of pursuit by MVRCS after CP dropped plans

Narratives around proposal:

Not enough data on this proposal.

Research gaps

- Potential interviewees: Neil Kinnon

Proposal #3: Parkview on the Fells



Pictured above: Rendering of Parkview on the Fells as featured on The Boston Globe.

Time period: July 2005 - June 2009

Status: Dropped by developer

Description: Parkview on the Fells was a \$65 million dollar senior living community proposal by Deaconess Abundant Life Communities, a nonprofit housing group. Deaconess signed a purchase-and-sale agreement with Hallmark Health and would have torn down the hospital to build 301 upscale units for seniors. While many favored the idea of senior living on the site, it was criticized for its anticipated costs of living. The deal collapsed in late 2008, during the Great Recession.

Proponent(s):

- New England Deaconess Association, headed by Rev. Herbert B. Taylor

Supporting arguments:

- Senior-living condominiums considered low-impact and serves a community need
- Nonprofit developer

Reasons for failure:

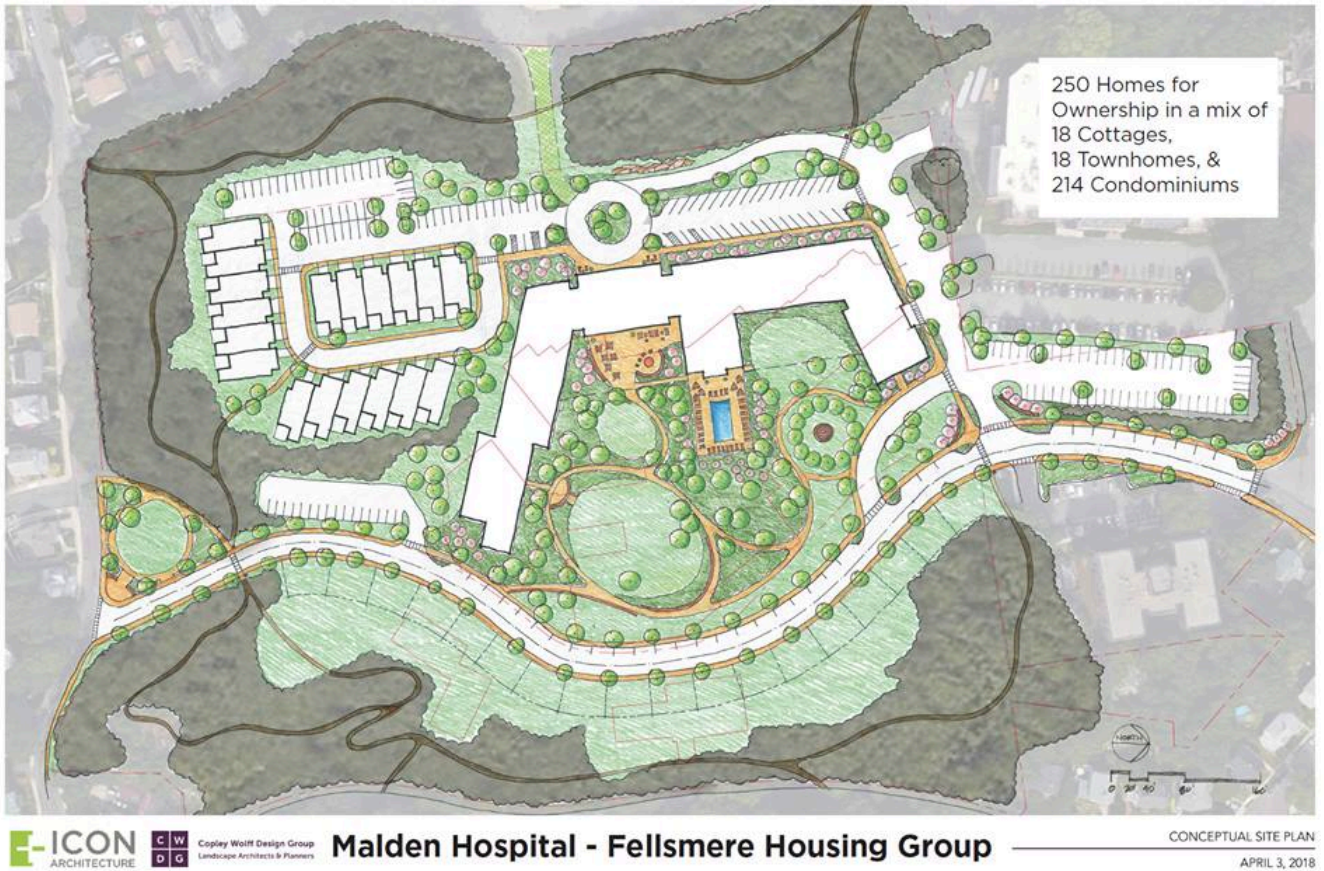
- Economic factors such as the Great Recession and the housing bubble burst

Narratives around proposal:

Not enough data on this proposal; more may be obtained by further microfilm research.

Research gaps

- Microfilm research c. 2006 and 2009 - currently only have Boston Globe articles.

Proposal #4: Fellsmere Housing Group

Pictured above: Fellsmere Housing Group's conceptual plan for the site in 2018.

Time period: Nov. 2014 - Sept. 2019

Status: Dropped by developer

Description: Fellsmere Housing Group released an expansive development plan for the Malden Hospital Site in late 2014 that originally included assisted-living apartments and more. The private developer repeatedly returned with revised proposals, finally giving their last offer of 250 units in 2018 before retracting in September 2019.

Proponent(s):

- Fellsmere Housing Group (Spokesperson: Tony Green)
 - Also includes Bill Cress of Prospectus, LLC, plus former C&K Components Chairman Charlie Coolidge (Ruppenthal, 2015, June 10).
- Mayor Gary Christenson

Supporting arguments:

- Repeatedly included a mix of residential units, including assisted living units, owner-occupied units and expressed a willingness to include affordable housing
- Economically viable and gave back to the city in impact fees

- Contender for use of site while Hallmark Health was being sued for negligence of the building

Reasons for failure:

- Fatigue after major delay caused by 2015 two-year moratorium on new housing developments
- Required a zoning change away from single-family homes; struggled to acquire permit
- Increasing projected costs of demolishing the hospital from \$3 million to upwards of \$5 million over the length of the purchase-and-sale (Lamb, 2014, Nov. 20; Greenstein, 2019).
- Several iterations of the proposal were rejected, including:
 - Initial proposals of 398 units of housing (Lamb, 2014, Nov. 20) met with public opposition in 2014-2015 until the number of units were reduced (Ruppenthal, 2015).
 - Proposal of 224 units plus 72 condominiums and 18 single-occupancy homes (Taormina, 2016) was (possibly) rejected by the planning board in September 2016
 - Proposal of 250 condominiums stymied by the tabling of a key vote to change zoning for the site; discussion never revived (Cardinale, 2018, April 18).
 - Final proposal of 214 units with 18 townhouses and 18 single-occupancy homes did not elicit enough motivation to reopen zoning discussion (Greenstein, 2019).
- Fierce competition from FoFH whose vision had more community support

Narratives around proposal

<p>Tony Green: “I can say [the traffic] will be <u>significantly less than</u> when the hospital was there... it will be <u>more than there is now</u>” (Lamb, 2014, Nov. 20).</p> <p>“The project is <u>revenue-positive</u> and it <u>pays zippo</u> for you today” (Taormina, 2016, September 30).</p> <p>“We would be <u>eliminating about half of the market</u> if we went with something that required everyone to be 55” (Taormina, 2018, April 6).</p> <p>“The development would mean <u>\$1.5 million a year in tax revenue</u> for Malden and in addition, we have offered <u>\$500,000 in mitigation payment</u> to the city to use as they see fit” (Greenstein: 2019).</p>	<p>Green argues his point through a case of facts and positive numbers. In doing so, he uses quantitative phrases like “significantly less,” “more,” “revenue-positive,” “zippo” (meaning nothing). While this delivers facts quickly, research shows this can be less persuasive as it elicits pushback, counter-arguments, and trigger confirmation bias.</p> <p>It is clear that Green’s role in the project is to be a “hype man” - that is to say, he is trying to get the community to appreciate the merits of the development. After five years of back-and-forth and documented community frustration, it seems that the strategy didn’t work.</p>
<p>Sheryl Mills, descendant of Converse Family: “The private developer’s proposal for housing <u>five times</u> that allowed under current zoning would result in <u>negative impacts</u> on the</p>	<p>One theme I will probably discuss in further detail is the framing around density and housing. While there are valid arguments for and against dense housing, there are a number of words and</p>

<p>communities of Medford and Malden, including traffic overload, green space deficit and most importantly would <u>benefit the developer, not the community</u>” (Mills, 2017).</p>	<p>messages that have spread about housing that seem to trigger anti-density (thus anti-housing, sometimes anti-affordable housing) thoughts.</p> <p>Here, Mills says “five times” to invoke the image of overcrowding, associating it with traffic and even “green space deficit.” The latter is interesting because the FGH plan indeed included expansive green space additions, including several acres extending the Olmsted park adjacent to the hospital site.</p> <p>Further, the suggestion of developer’s ill intent is another common phrase aligning the author (and agreeing authors) with suspicion of developers.</p>
<p>Councillor John Matheson: “We don’t want to see the Malden Hospital site become <u>another Field of Dreams</u> where one developer locks up the site throughout an entire upswing in the economy” (Taormina, 2018, January 25).</p> <p>“I would like to give some assurances to <u>those individuals</u> who participated in our vision study and moratorium study that <u>we heard you loud and clear</u> about <u>density issues</u>, the type of development you want to see in this city and the direction you want us to go in” (ibid).</p> <p>“I am not going to vote for a zoning change that <u>supports a developer</u>” (Taormina, 2018, March 1).</p>	<p>My key observation of Matheson’s remarks is that he makes several memorable Malden-specific references that activate unity for a demographic of Maldonians that are politically engaged, anti-density, and tax conservative. In the first line, he compares FHG with the Field of Dreams, suggesting Malden is putting too much stock in the development. In the second line, he gives attention to participants of a study that largely showed a negative perception on density. Finally, the last line is another anti-developer reference.</p>

Research gaps

- Potential interviewees: Tony Green, Mayor Gary Christenson

Proposal #5: Hallmark Health Contingency Plan

Time period: 2017

Status: Rejected by Malden Planning Board

Description: This was a proposal suggested by Hallmark Health as a contingency plan in case the Fellsmere Housing Group proposal failed or dropped out. It was only a partial proposal, dealing with a few acres that could be turned into single-family homes. It was rejected by the Malden Planning Board for not addressing regulations surrounding road widths.

Proponent(s):

- Hallmark Health

Supporting arguments:

- Hallmark Health wanted an alternative plan in case the Fellsmere Housing Group's proposal failed
- No zoning change required

Reasons for failure:

- No adequate connection of public roads that can support traffic
- Planning board expressed concern that this plan only constitutes 10% of the 21-acre site

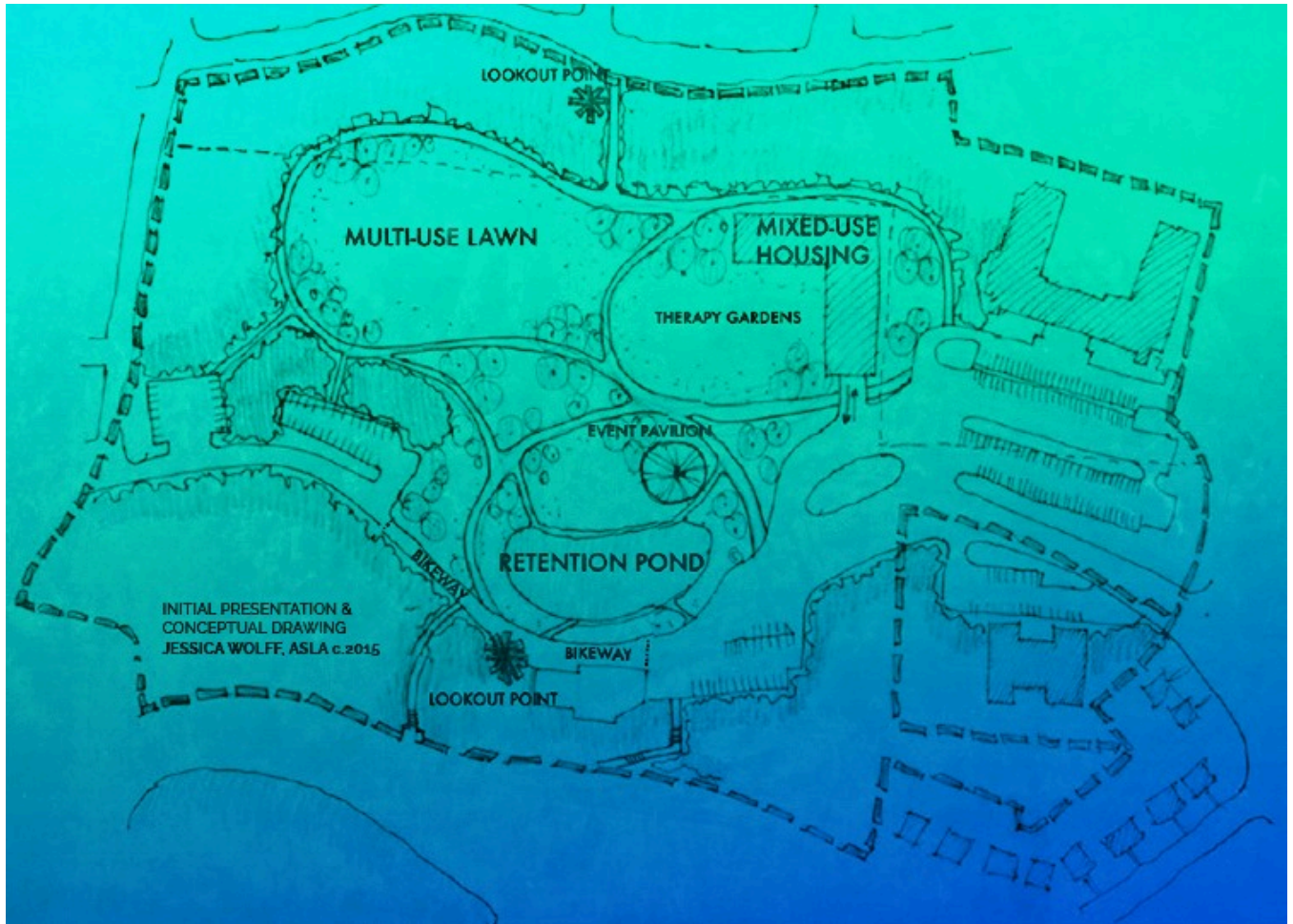
Narratives around proposal:

Not enough data on this proposal.

Research gaps

- Potential interviewees: City Planner Michelle Romero, a Hallmark Health representative

Proposal #6: Friends of Fellsmere Heights



Pictured above: Sketch of the Friends of Fellsmere Heights plan acquired from their Facebook site.

Time period: 2015 - Present

Status: Not considered by City of Malden; raising funds

Description: Since 2015, Friends of Fellsmere Heights has been advocating for a mixed-use development that contains multi-use recreational and open space, housing, bike paths, and a variety of landscape features. It has not formally been proposed, but it has been gradually garnering support among community members and currently appears to be the dominant proposal as of December 2019. It is described as a “16+2” plan which sets aside 16 acres for open space and two acres for a “project that benefits the community” (Taormina, 2018, January 18).

Proponent(s):

- FoFH, headed by Prisco Tammaro
- Jessica Wolff, professional landscape architect from Malden

Supporting arguments:

- Only viable proposal as of end of 2019
- Includes features repeatedly shown to be supported by (some) residents in the Fellsmere Heights area, including green space, recreational/civic space, middle-income/affordable housing, and bike trails (Stevens, 2015; Cardinale & Ruppenthal, 2015;
- Funding from grants like Massachusetts Parkland Acquisitions, Renovations for Communities, and Community Preservation Act funds would support more community-oriented design (Cardinale & Ruppenthal, 2015)
- More in line with intent of Elisha Converse, former mayor who donated the land for medical and public use (Friends of Fellsmere Heights, 2015)
- Diverse groups in Malden have expressed support for the proposal and have been involved in the input/design to at least some degree, including the American Association of Arab Women, Chinese Cultural Connection, and Senior Action Council (Waters, 2016)
- May not require a zoning change (though this does not seem certain)

Reasons for failure

- Proposal has not failed.

Narratives around proposal

<p>Bob Doolittle: “Malden has the <u>fifth-least amount</u> of open space in Massachusetts. We cannot <u>give up this opportunity</u> to <u>preserve the site</u>” (Greenstein, 2019).</p>	<p>Doolittle uses similar quantitative language as Green; however, rather than discussing community benefits as a profit or margin, he discusses it as an opportunity not to be missed. This allows listeners to imagine the gain and define it, whether that be through some community gain or potential personal experience.</p>
<p>Mayor Gary Christenson: “The Friends of Fellsmere Heights proposal <u>would require active city participation</u>, which, if you watched the past few budget cycles, we are not in a position to be able to do that... <u>The Fellsmere Housing Group</u> has the <u>capacity</u> to do what they want to do, and in some ways, what we want them to do” (Scalese, 2017).</p> <p>Tony Green: “A year ago the cost of demolition was \$4.5 million. Now it will likely be over \$5 million... We are frustrated. <u>There is no other plan out there that is economically viable</u>” (Greenstein: 2019).</p>	<p>A counter-argument used against FoFH is that it is not “economically viable.” Further analysis would be needed to determine how accurate this assessment is, but it is also true that FHG had more hard money backing it. One major financial barrier for FoFH is the need for Hallmark Health to back them in order to acquire Community Preservation Act funds (Greenstein, 2019). Still, the group has other grants and have enough community support to suggest they are not to be underestimated. For Green in particular to suggest no plan is “economically viable” seems to be a slight on FoFH and potentially an exaggeration, but it is indicative of FHG’s positioning as a “financially secure” option.</p>
<p>Converse family: “We are certain that [the Converse Family’s] <u>intention</u> was that <u>land</u></p>	<p>The Converse family u</p>

<p>remain open space for the benefit of <u>all citizens</u>, rather than be converted into a for-profit enterprise of high density housing. Elisha and Mary understood the importance of open space and nature to the physical, mental, and spiritual health of their community, and that's why they were so <u>generous</u> with their gifts..." (McDonald et. al., 2018).</p>	
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Research gaps

- Potential interviewees: Prisco Tammaro, Bob Doolittle, John Matheson
- Follow the proposal as leaders have indicated more meetings and adjustments throughout January and February 2020

Other proposals

The following proposals are categorized as “minor,” meaning they are more developed than an idea, rumor, or personal opinion. They involve engagement with at least one influential member of the community. Only a short description will be listed.

“Hospital Hill Plan”

A proposal set forth by Malden Resident and once-candidate for Ward 3 Councillor Brian DeLacey. It suggests placing a hotel with views of Boston for revenue while also including open space, affordable housing, a senior center, and parking. It also suggests moving the Department of Public Works to Malden Center in the place of the old senior center. It may have been discussed at a meeting with the mayor and some city councillors, though the plan is evolving and continuing to search for support.

“The Matheson Plan”

This proposal comes from a presentation apparently done by former Ward 3 Councillor John Matheson in 2018 as a counter-proposal to the FHG proposal. It is described as an open space proposal that will be funded 50 percent by Malden and Medford and 50 percent from a private source to build a “senior living facility,” according to photographic notes taken (presumably) by Brian DeLacey on what appears to be his website.

Return to a hospital

Malden historian Inna Babitskaya is a vocal proponent of the hospital returning to its original use. Her reasoning is based on the intent of the Converse Family’s philanthropy and deed, which ordained that the land be used exclusively for public use. Further investigation is required to determine the validity of her claim that other purchase-and-sale agreements violate the deed, but the attorney general approved the sale to Hallmark Health in 1997, so it is unclear.

Boston Architectural College 3 Proposals

Boston Architectural College studied the Malden Hospital and presented their findings at Beebe School in late 2019. They proposed three options for the community, all of which included a 75-unit senior housing facility. Another option included a refurbishment of the hospital for a community health center. A third option includes a “commercial hub with a business incubator” with a civic center that can be used for weddings and events (Taormina, 2019, October 10). I am looking to obtain some of BAC’s findings.

Mystic Valley Regional Charter School #2

It was rumored in an inflammatory Facebook post that MVRCS Board member (and former City Councilor) Neil Kinnon was proposing MVRCS acquire the hospital site and build a tennis field. After debate and accusations, Kinnon explained that it was part of a personal brainstorm, though Councillor David Camell confirmed that Kinnon brought it up with him in person. Whatever the intent, the plan seems to be a modified version of the FoFH proposal except with much of the open space as recreational areas shared between the public and MVRCS. This proposal in other sources have called this the “Community Preservation and Open Space Recreational Plan.”