

MEDCHI, THE MARYLAND STATE MEDICAL SOCIETY
HOUSE OF DELEGATES

BOT Report 1-21

INTRODUCED BY: Board of Trustees
SUBJECT: Report of the Building and Conservation Committee

Committee Charge

“The Charge of the Committee is to review the physical plant of MedChi and determine what is necessary moving forward. Consideration should be given to balancing protecting our heritage while modernizing MedChi.”

Background of History of the Baltimore Buildings:

MedChi, The Maryland State Medical Society, owns four buildings in Historic Baltimore. In 1909, after moving from location to location, the Faculty, as it was then known (short for The Medical and Chirurgical Faculty of Maryland), decided to build its headquarters in the Mt. Vernon neighborhood, a site which was central to the regional train stations, to the University of Maryland and its hospital, and to Johns Hopkins University and its hospital. Additionally, numerous physicians’ practices were in proximity.

The idea for a headquarters building was initiated by Sir William Osler, MD. Dr. Osler wanted to establish a location for physicians to meet and socialize and to create a significant medical library as a resource. After looking at other medical society buildings, the Building Committee formed an idea of what they desired. They engaged a local architectural firm, Ellicott & Emmart, to design the building, and received input from Librarian Marcia Noyes, who would live on-site and was the Faculty’s only employee.

The façade from 1909 is deceptively simple. With further investigation, however, it is quite detailed with decorative brickwork, an elegant columned portico, decorative swagging beneath the windows, brick columns topped with Ionic capitals, and a set of three arched French windows on a Juliet balcony. The final decoration is a row of dentil molding with a decorative cornice just below the roofline.

From small meeting rooms to the large Osler Hall and the elegant Reading Room, the new building was a place that met the Faculty’s needs. The building also included a “penthouse” apartment for Marcia, who, as librarian, was available to the physicians 24 hours a day. They would call to request a specific medical book, and she would retrieve it from the four-story library stacks. The physician could then come to MedChi to read what they needed.

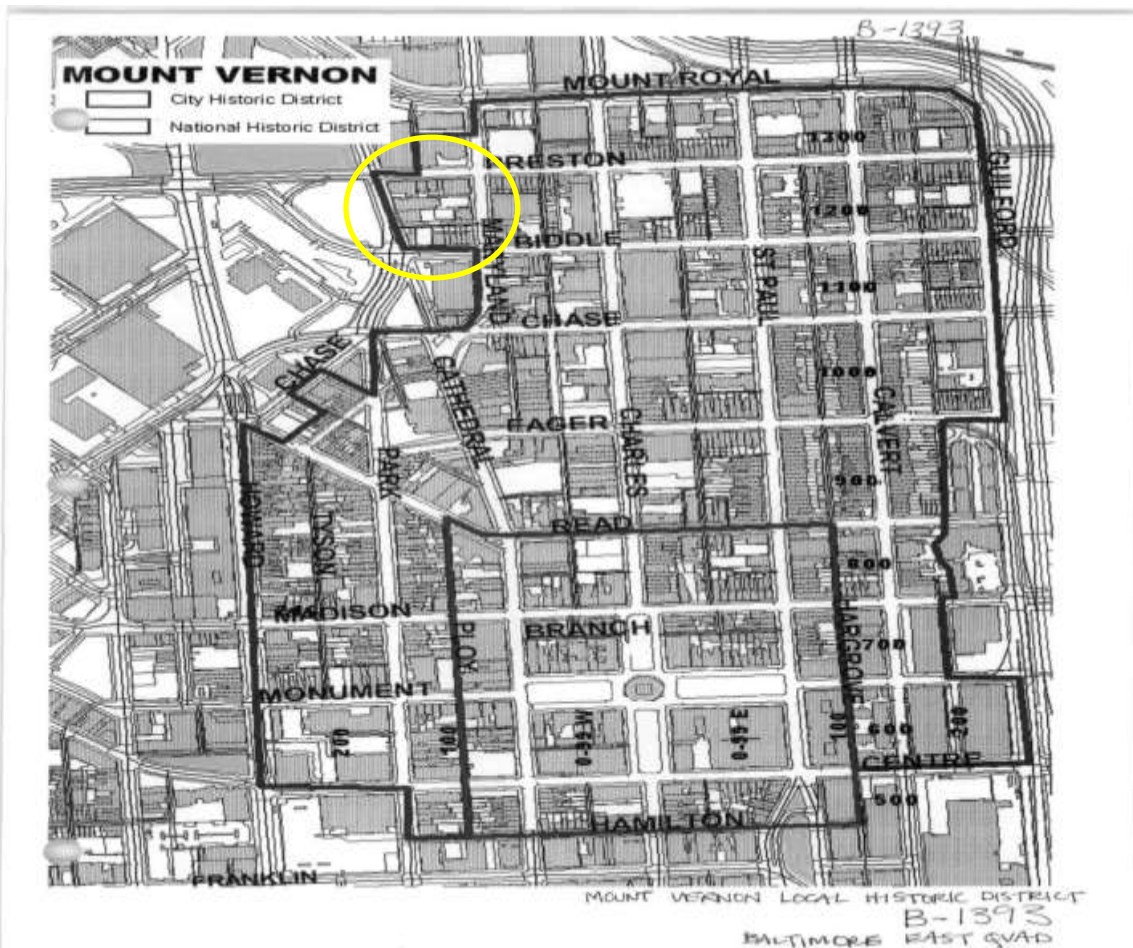
In the 1970s, the adjacent Baltimore City school building, along with its gymnasium building, became available and the Faculty purchased it for the sum of one dollar. School #49 was one of Baltimore’s most prestigious public schools. Students from across the city attended the school which compressed three years of junior high school into two years.

It took several years to raise the money for the conversion from a school to offices, but the job was completed in the mid-1980s. The two buildings were connected, and restrooms and an elevator were added to what had been a ten-foot-wide gap between them. The gymnasium was renovated to become the office of the MedChi Insurance Agency, now known as Unity Insurance. The former playground for the school became the parking lot for MedChi.

In the 1990s, the Faculty, now known as MedChi, acquired the rowhouse adjacent to the Insurance building and converted it to offices. The Physician Health and Rehabilitation Programs are now located in that building.

Both the 1909 building and the school building are located within the Mount Vernon Historic District and are listed on the national Historic Architecture and Buildings Survey, although they are not land-marked.

All four MedChi buildings in Baltimore City are in the Mount Vernon Historical District. Generally, this historic district includes approximately 40 city blocks immediately surrounding and north of Mt. Vernon Place and will subject any redevelopment of the properties to this Zone’s oversight and approval process. This seeks to retain the neighborhood’s character but makes a buyer or developer’s project more costly and complex as they look to improve specific buildings. The map below demonstrates the historic district:



Action – The Committee recommends that the two Cathedral Street buildings be cleaned, painted, and repaired as needed. Issues include HVAC issues, roof leaks, tuckpointing and brick work among other repairs that should be completed.

Annapolis Building

MedChi also owns a property at 224 Main Street, Annapolis, Maryland. It is in the heart of historic Annapolis and was last appraised at nearly one million dollars. The upstairs is rented to a private lobbyist, and the downstairs is a shared space that is also used by the Anne Arundel County Medical Society.

Action – The Committee recommends clean, paint the interior, and refresh the Annapolis office prior to the 2022 Session.

Component Buildings

The Montgomery County Medical Society owns their headquarters in Rockville, Maryland. The Baltimore County Medical Association (BCMA) owns a retail space in Baltimore County that is currently rented. The Lower Medical Societies own a rented building, formerly their Salisbury headquarters. BCMA and the Baltimore City Medical Society currently use rooms at the MedChi headquarters as their home offices.

Future Location of Headquarters

The Committee considered the idea of moving the headquarters out of Baltimore. Given the nature and ownership of the Baltimore office, they felt that keeping the historic building was important, and that a presence near the State Health Department was valuable. However, given the ability for the MedChi staff to telecommute, the Committee suggested that a reduction in the footprint is reasonable, given the more efficient use of space. Moving the Unity Insurance Agency location to a new site seemed reasonable and will be discussed further below.

Action – The Committee recommends keeping the MedChi headquarters in historic Baltimore while increasing the use of virtual meetings, telework, and other locations to make activities more accessible to all members.

Increasing the Use of Telework

The COVID-19 pandemic demonstrates that a significant amount of telework can be done remotely by MedChi employees. However, the historic space needs to be modernized and redesigned because employees will, at times, need in-person meetings and team meetings.

Action – The Committee recommend MedChi develop a formal telework policy.

In-Person Meetings

The Committee discussed how much space is needed for in-person meetings, considering factors such as whether MedChi staff needs more space in the Baltimore office, and how frequently meetings could be conducted using virtual telework solutions such as Zoom or Microsoft Teams. The Committee suggested studying considerations for renting space for larger events.

Action – The Committee recommend developing a revised plan for the space to maximize in-person meeting space and efficient use of workspace.

Preservation

The Committee discussed what parts of the old buildings, if any, should be preserved for historical reasons, or preserved to serve as activity space. The committee felt the 1211 Cathedral Street building continues to be very important to our history and in need of preservation. Furthermore, the adjacent building, with its history, was also worth preservation.

Action – The Committee will report back on a business plan for a Maryland Medical Museum or Exhibit space, perhaps being open on demand with an event center.

The Stacks

The four-story stacks at MedChi holds thousands of books, as well as medical journals from many state medical societies, plus many specialty societies and national and international medical societies. The stacks mostly contain documents for the period between 1900 and 1999. The remaining are rare books and the archives of the organization, which were professionally catalogued and organized in 2014.

In this digital age, most of the medical journals have been digitized and are either available publicly, or through a subscription service such as JAMA or J-Stor. Due to these technological innovations, the value of the journals is questionable.

About 20 years ago, the very best of MedChi's rare books were sold at auction, but there are still numerous antique and rare books.

The stacks are constructed of cast iron columns and braces. Wood flooring completes the structure, and the library shelving is laid between the cast iron columns. The floors are connected by an iron staircase.



As is visible from the early blueprints, the stacks occupy the space above the far end of the current finance office (the server room) and the storage room off Osler Hall.

While most of the ceilings in our building range from 12' to 16', the levels in the stacks are only 7.5' high, essentially fitting four floors of stacks into two stories of the building.

The main issues with the space are as follows:

- The cast iron structure of the stacks is essentially the skeleton of the space. It cannot be dismantled without affecting the structural integrity of the entire space.
- There is only one access and egress point for the stacks. This is not compliant with current fire codes. While there was an elevator, it is inoperable and has been sealed by the fire department. There is still a dumbwaiter in the stacks, but its operating status is questionable.
- There are no exterior windows and doors on any of the four levels.
- There is no HVAC system to heat or cool the space, which is also not insulated.
- The space is currently not in active use and is not regularly accessed.

Action item – The Committee recommends that MedChi ask the History of Medicine committee staff to further study how to handle the content of the stacks. Furthermore, we recommend The Building Committee continue to examine opportunities for acceptable uses for the stack space.

Adequacy of Parking

The Committee had a discussion regarding adequacy of parking. While no specific action was recommended, the Committee felt the issue was important enough to consider as we move forward with any building plan. Furthermore, if we dispose of excess property, we need to make sure we keep adequate parking for our activities.

Rental of Space and Partners

MedChi currently rents to various related entities and to several component societies: Physician Research Institute, The MedChi Alliance, Monumental Medical Society, and the Maryland Chapter of the Academy of Pediatrics, among others.

Action – The Committee recommends MedChi needs to discuss the needs of our various partners and renters post COVID-19. Furthermore, MedChi should review the agreements, and make sure the relationships are appropriate for the Society moving forward. MedChi should assure that appropriate organizations are aware of the possibility of renting space.

The Agency (Unity Insurance)

MedChi Insurance Agency was recently renamed and rebranded as Unity Insurance.

Unity Insurance is located in the 1204 Maryland Avenue building. Unity Insurance has 14-16 total employees, many of whom are working remotely selling insurance. The downtown location is not ideal or convenient to the workflow of the sales team or to its customers.

The Agency needs a new location that is not downtown and is easier for accessibility to clients in the Washington Metropolitan Area. Furthermore, the current building has major repair needs: the floor is separating from the wall, and there is some water damage and mold that needs to be repaired if it is to continue in operation.

Action – The Committee recommends a new location that is more conducive to the workflow and the customers of the Unity Insurance agency is needed. The committee suggests working with a real estate developer to look for options south of the Baltimore Beltway with easy access to Washington Metro Area customers. The ideal location would have other income possibilities for the Society and meeting space for smaller meetings. The building should be owned by MedChi and rented to Unity.

Decisions about renting/buying/building can only be made after reviewing all the financials and markets with the consultants. They require Board approval.

Physician Health and Rehab

The Center for a Healthy Maryland, MedChi's 501c3, runs two physician health programs that are principally located in the 1204 Maryland Avenue building. That building has had water issues and stucco problems. Furthermore, the state contract for one of the two programs requires physical changes. Currently 10-12 employees work in this department.

The Maryland Physician Health Program (MPHP) assists physicians and physician assistants in a confidential, private setting to address issues that may potentially impact their ability to practice. The Program assesses and refers participants to clinically appropriate treatment, helps the participant develop a rehabilitation plan, provides case management to facilitate progress with the plan, and provides advocacy on behalf of the client when needed. The program also provides education and outreach to the medical community regarding physician impairment and available services.

The Maryland Professional Rehabilitation Program (MPRP) for physicians, physician assistants, and allied health providers licensed by the Maryland Board of Physicians has been established at the direction of the Maryland General Assembly for professionals who need treatment and rehabilitation for alcoholism, chemical dependency, or other physical or psychological conditions, and who have been referred by the Board of Physicians for services. The Program is designed to facilitate access to treatment and rehabilitation services. It offers information, evaluation, and referral for treatment. Staff is also available to provide or arrange presentations on topics related to substance abuse and mental health.

In terms of determining the facility needs of these programs, the committee needs more time to work on this issue, including what the needs of MPHP and MPRP are, and considering proper location and requirements under the state contract.

Action – The Committee recommended they continue to work with MPHP and MPRP to determine space needs and a possible new or additional location.

Repairs

The Committee reviewed the repair work needed to all the buildings.

The Committee is not aware of major issues with the Annapolis office. However, it is old, and the downstairs is in serious need of cosmetic improvement.

The Committee reviewed the numerous repairs needed in the Baltimore Buildings. The Committee strongly urged that the historic building be repaired. The Committee expressed concern about repairing the Maryland Avenue buildings until a decision was made on possibly disposing of the facilities.

There is a possibility that the Maryland Avenue buildings will no longer be useful to MedChi, since the Unity Insurance Agency and the Physician Health/Rehabilitation Programs might have new locations.

Much of the repair work has been delayed due to economic or other issues. Some improvements have begun, such as the roof repair, but major projects remain, including the pointing of the 1211 Cathedral Street building, and other improvements.

Action – The Committee suggests developing a work plan to repair the two buildings on Cathedral Street and the Annapolis building. The Committee sees this as a priority item.

Action – The Committee suggests delaying repairs on the Maryland Avenue buildings.

Excess Property

After all evaluation and repair processes have been completed, MedChi, in consultation with its affiliates, will need to decide how to handle excess property. Consideration should be given to selling, re-developing, or renting remaining properties. We should consider a wide range of options including but not limited to offices, residential, or commercial properties.

Action – The committee will work with a real estate developer to determine options and report back on findings.

The Committee understands that many of these suggestions are costly but needed. As we move forward, we will work closely with the Board and Finance committee to formulate a plan that includes a capital campaign, rental income, and other means to complete these goals. If this report is approved, the committee plans to develop a staged action plan to complete the work and will share that document with the MedChi Board.

Committee Members:

Chair - Allan Jensen, MD
Ben Stallings, MD
Michele Manahan, MD
Shannon Pryor, MD
Gary Pushkin, MD

Staff:

Gene Ransom
Barbara Fitzgerald

Fiscal Impact: Significant