**Via email to: Sean Moore, Planning, Infrastructure and Economic Development Department, City of Ottawa**

**Comments on Zoning By-law Amendment Application File Numbers D02-02-17-0075 and D01-01-17-0016**

**Sep 29 at 1:45 PM**

Hi Sean:

Thanks for providing us with a great deal of information at the Open House on September 25th.  It was a lot to digest.  
  
As per your guidance to participants at the meeting, I am providing you with additional comments from the Civic Hospital Neighbourhood Association (CHNA) on the above applications. Monday's discussion raised even more concerns for CHNA as to the potential implications of a rushed, premature process to zone the lands in question.

We also echo the concerns of many participants at the meeting that the city is the applicant, proponent and decision-maker regarding these applications and this strongly suggests that the outcome is pre-determined and not open for real consultation and change, if required.

Despite resident objections, we heard from city officials that we should not be concerned with these applications.  It appears that the zoning will be approved as is without any modifications and CHNA would appreciate your confirmation of this point.

Our additional comments are as follows:  
  
**1) Zoning without supporting studies - where are the checks and balances?**  
  
The meeting on September 25th created even more unease for CHNA that this zoning application is premature and is being considered when there is no evidence that the zoning proposed is good planning. There are no studies to support it. Indeed, do we know if this zoning will even meet The Ottawa Hospital's (TOH) requirements?  
  
In response to a question about the zoning process and the holding provision from Sharanne Paquette of CHNA's Planning & Development Committee, you indicated that it is not uncommon for a zoning application to move forward without adjacent studies. This has not been our experience as we have found that zoning applications always include supporting studies, which are a crucial component of good planning practices.   
  
For example, the Preston-Carling Secondary Plan was accompanied by a Public Realm and Mobility Study which looked at the impact of the proposed secondary plan zoning on streets, parks, traffic, cycling and pedestrian movement and infrastructure. It also afforded residents an opportunity to review, comment on and influence the assumptions and recommendations within the Public Realm and Mobility Study BEFORE the Secondary Plan was completed.   
  
For this hospital zoning application (which is the most important development project impacting our community for generations to come), the City appears to ask citizens to trust that the zoning is appropriate and that future studies related to the zoning will be adequate so that the holding provision (h) can be removed. Based on what we heard at the September 25th Public Meeting, CHNA and our members remain uncertain as to the process and under whose authority the holding provision would be removed (Planning Committee? Councillors? Affected communities?). Please outline in detail what recourse the community would have available if the removal of the h is not supported and alternative zoning was deemed more appropriate. Clarity around this point is critical. Without confidence in our future ability to object to the final zoning if required, CHNA will be forced to object to the zoning proposed now in order to ensure our right to recourse via City Council and the Ontario Municipal Board (OMB).   
  
Given the history of the selection of this site (final selection was a "behind closed doors" process, without public input), CHNA and our members simply cannot go on trust nor support a premature planning process without any checks and balances in place (i.e.: associated studies).

Based on these concerns, CHNA strongly opposes the rezoning of these lands at this time. The rezoning proposal is premature and should not be undertaken until all relevant studies have been completed. Making an informed decision on the appropriate zoning is simply good planning.

**2) Traffic or transportation - why is there no city-initiated transportation study?**

At the public meeting, Luanne Calcutt, Chair of CHNA’s Transportation Committee asked for clarification between the transportation studies required as part of the site plan approval process and an Area Traffic Management (ATM) study. In particular, she asked at what point in the process the traffic impact of the rezoning on the adjacent neighbourhood would be considered. Would you please confirm your answer provided at the meeting?

The terms “traffic” and “transportation” were used interchangeably  at the meeting and referred more or less to a surface parking strategy on the rezoned lands with mention given to the use of the O-train as a means of accessing the facility.  At no point do we recall any reference to the traffic impact beyond the rezoned lands.  Would you please expand on the city's intentions with respect to mitigating the traffic impact as a result of rezoning?

We also learned that any "traffic" or "transportation" studies will likely be contracted by The Ottawa Hospital to a private firm as part of site plan approval process. CHNA requires that a City of Ottawa area wide transportation plan and a local ATM be conducted as part of the transportation component necessary for a rezoning approval.  We view them as an essential element for CHNA’s support of the rezoning process.

We have years of experience with reviewing transportation and traffic plans as part of site plan approval processes.  The one constant with these studies (from CHNA's perspective) is that they almost always provide a rosy (and largely inaccurate) description of future traffic implications and they do not carefully consider the cumulative impact of traffic on a community or adjacent streets.  In fact, the main objective of a site-plan-specific traffic study is to show how vehicles can move quickly and efficiently in, out and around the proposed development.  In these studies, it is the movement of vehicles that is considered important... the residents of the streets onto which the vehicles are streamed are not considered important.   
  
Our community has been working for years to reduce the number and slow down the speed of the vehicles that attempt to use our residential streets as thoroughfares.  To date, the city has not agreed to conduct any ATM's for our streets to properly manage the traffic generated from the current hospital site.  An ATM and an area wide transportation plan are needed to provide our community with the information needed to protect it from the cumulative effect of the current traffic and the additional traffic to be generated by the new Civic campus.

In conclusion, before millions are spent developing the new Civic Campus, it is only prudent that a holistic, area wide, transportation plan is conducted by the City of Ottawa so that the full traffic impact from this critical development is understood and proactive design and traffic mitigation strategies are developed.  Without this study, neither the safety and livability needs of the nearby community nor the transportation requirements of the hospital are likely to be met.

* Will the city ensure a holistic, area wide transportation plan is conducted?
* Will the city demand that the parameters of the TOH traffic plan include protecting Civic Hospital neighbourhood streets from additional traffic generated by the hospital?

**3) Mixed- Use Centre zoning - why?**  
  
Following September 25th's discussion, CHNA has become increasingly uneasy about the Mixed-Use Centre (MC F (1.5)) zoning for the lands encompassing Queen Juliana Park (QJP) and the parking lot adjacent to Preston Street.  Mixed-Use Zoning allows for land uses far beyond a hospital designation such as "*offices, secondary and post secondary schools, hotels, hospitals, large institutional buildings, community recreation and leisure centres, day care centres, retail uses, entertainment uses, service uses such as restaurants and personal service businesses, and high-and medium-density residential uses"*and this has raised some flags in our community.

These federal lands, which include precious green space, were provided to TOH for a hospital. The zoning for the lands must respect the intent of the land transfer - a hospital.  For example, we note that the General Campus of TOH is zoned I2 for a major industrial complex. The Queensway-Carleton Hospital is zoned RI for rural industrial. Because of the Civic's proximity to the Central Experimental Farm, CHNA understands the necessity for an IL (light industrial) zoning designation.  Based on the precedents set by the General and Queensway Carleton hospitals, we are convinced that it is not appropriate to zone any lands encompassing the Civic Hospital with the MC designation.

Perhaps there are other development plans in the works (besides a hospital facility) for these lands?  Are there behind-the-scenes discussions around developing the Mixed-Use Centre for uses other than a hospital?  If so, this information should be disclosed before the lands are zoned.

Unless there are other, undisclosed plans for the lands currently occupied by the parking lot and QJP, or a more complete reasoning given for an MC designation, CHNA requests that the whole site be zoned light hospital/institutional - the IL designation.

**4) Transportation - plan for the 21st century, not 1950**

There seems to be little thinking at this stage about fully exploring innovative approaches to encouraging hospital employees to take transit to work instead of using their vehicles.  What about securing hospital-staff-dedicated park and rides along the O-train corridor?  Or incentives for employees to take buses or LRT?  CHNA encourages the city and the hospital to think outside the box when it comes to encouraging transit usage.  
  
The impacts of intensification planned for by the Preston-Carling Secondary Plan combined with the congestion and activity from a new hospital campus does not seem to be well understood.  The corner of Preston and Carling is a very busy intersection now... how will it handle additional vehicular traffic?

**5) Queen Juliana Park (QJP) and Collector roads - reinforce what we have achieved in traffic diversion and calming in our community!**  
  
**QJP:**  During the extensive public consultations on the Preston-Carling Secondary Plan, the community was successful in preventing a proposed cut-through road through QJP, which would have "sling-shotted" traffic into our community.  Sherwood and Bayswater Avenues would have been particularly affected.   
  
In early 2015, this QJP cut-through road idea was resurrected again in a traffic study [on 845 Carling Avenue](https://maps.google.com/?q=on+845+Carling+Avenue&entry=gmail&source=g).  With the help of our city councillor, the community rallied once more and we were again successful in nixing the cut-through road idea a second time. We also received a formal acknowledgement from the city's Planning Committee that this road idea was "explicitly rejected by the city in the mobility plan attached to the Preston-Carling Secondary Plan".  
  
Please be aware that should the idea of this cut-through road arise a third time, there will be widespread opposition from our community.  
  
**Collector Streets:**  Our small community is bounded by a highway in the 417 and an arterial main street in Carling Avenue.  Additionally, there are three collector roads embedded within our community.

CHNA has been working for years to reduce and slow traffic on our collector and residential streets, and we continue to be active in this endeavour.  
  
Please be aware that any traffic or transportation plan seeking to designate one or more of our local streets as collectors will be vigorously opposed.

**6) Greenspace - "small & high" or "large & low" footprint?**  
  
There was considerable discussion at the public meeting about the loss of precious, downtown green space and heritage farm acreage.    
  
Before any decisions are taken around zoning, we suggest the city and the hospital undertake a special consultation to ascertain whether the community considers it preferable to design a campus of taller buildings with smaller footprints that allow for more trees and green space, or low rise buildings that will take up much of the green space.  
  
**7) Tennis courts - should they be excluded?**  
  
A question about the tennis club elicited a vague response that left some hope amongst attendees that the tennis club might not be affected by the new hospital facilities.  Why, then, is the tennis club included in the zoning documents?  Shouldn't we wait to see if it will be affected and apply for the zoning after that?  
  
**8) Public consultations - are we looking at an adversarial or a collaborative process?**

The Ottawa Hospital has indicated they want an open, consultative process with the community for this project, to renew people's confidence and trust in the process and outcome.

Unfortunately, it is our view that the City's Public Meeting & Open House on Sept. 25th was adversarial in tone and as such, did nothing to increase public confidence or trust in the public consultations process.  Instead of working together to move the process forward, the type of town hall meeting we participated in on Sept. 25th is divisive and increases tension.   Residents were scolded should they ask more than one question or include a long preamble whereas city officials were given ample time to speak and answer questions.  From the perspective of residents, this seems unfair, and we have shared our views on the consultation with city and hospital officials.

Thank you for the second opportunity to comment.  
  
Sincerely,  
  
Kathy Kennedy  
Chair, Planning & Development  
CHNA  
  
CC:

Karen Wright, President, CHNA

Peter Eady, Vice-President, CHNA

Luanne Calcutt, Chair, Transportation

Jeff Leiper, City Councillor

Fiona Mitchell, Office of Councillor Jeff Leiper