



Civic Hospital Neighbourhood Association

Fact Sheet: Technical Review of Development Application # D02-02-13-0068 Regarding 45 Ruskin St.

1. The development application violates the Ruskin 30 year Agreement signed by the Civic Hospital residents, representatives of The Ottawa Hospital and the City of Ottawa in 1996.
2. Contrary to TOH assertions this lot is not the only option for parking compliance for the UOHI expansion. Only 60-80 patients and visitors will be for the UOHI of the 466 new spots produced.
3. Other parking development options meet the needs of UOHI and TOH better and have access off Carling Ave, a six lane, underutilized arterial roadway.
4. The City of Ottawa's approval of the lease for 45 Ruskin St was premature and was made without relevant facts presented in the TOH Development Application
5. Use of an expanded Ruskin garage will increase traffic significantly on already overused residential streets.
6. Carling is underutilized and provides the best option for hospital access. With proper location of parking entrance/exits conflicts with emergency vehicle access can be avoided and traffic blockages can be limited.
7. TOH Consultant reports show that the single southbound Parkdale lane in the morning rush hour is three times busier than one lane of Carling eastbound; and Ruskin eastbound from Parkdale has more volume at that time than a single lane of Carling.
8. 70-80% of the traffic to the proposed Ruskin garage will get there via Parkdale; 20-30% via Melrose and streets east of the traffic circle.
9. According to TOH representatives at the June 24, 2013 information session, ambulances are routed to the hospital via Carling during peak hours when there are traffic tie ups on Parkdale.
10. The Civic Hospital neighbourhood is being asked to compromise personal safety for privacy. A narrow alley way would be created between the proposed garage and the tree berm, particularly on the Hutchison St side, that could be used to entrap persons. This is a direct contradiction of the Official Plan: 4.8.8 Personal Security
11. The current surface ground lot with 270 parking spaces, which is dedicated to the use of UOHI patients and visitors, sits in an established residential neighbourhood. Over the years, alterations to the 45 Ruskin lot have been made so that it would fit within this context of the established community including the creation of the berm and parking use limitations. The new structure with 4 stories, 725 parking spaces changes the fabric of the neighbourhood and does not fit well within the established patterns. TOH cannot

control or limit access to the garage, which will be used by staff as well as patients and visitors to the entire hospital

12. The 45 Ruskin lot cannot be rezoned from to I2, Major Institutional, because it does not have direct access to an arterial road.
13. The TOH development application has several contradictions.
 - Bylaws require 7.5m setbacks from the sidewalk for the proposed garage on Ruskin and the option on Carling at P6. The bylaw is stated as a reason not to expand at P6, but they are breaking the bylaw with 0 m setback for Ruskin.
 - The Private Approach Bylaw requiring 75m distance from the exit to the nearest intersection is valid to exclude the option of P4 development, but they can break this bylaw for Ruskin with the entrance/exit on MacFarlane.
 - With regard to expansion of P4, CastleGlen indicated this option was rejected because it would be *“putting additional traffic on both Ruskin and Melrose.”* by routing cars around the campus. It appears that for this option increasing a portion of traffic to a smaller garage on the Carling side of the campus is inappropriate however; a greater increase of traffic on these streets for a larger garage on Ruskin is acceptable.
14. The assessments of the parking lot alternatives to Ruskin were cursory and simplistic. Each lot was assessed on an individual basis and compared in size, parking volume and cost to Ruskin. There were only negatives to the on campus lots and positive for the Ruskin lot. This was clearly not a critical assessment.
15. The hospital wants to avoid use of the Carling side of the campus to preserve the “attractive appearance” for the community and in case they don’t end up moving and need to build more medical facilities. The community is being asked to bear the cost of potential future changes and destroy our “attractive appearance.
16. The proposed garage is called a “temporary” structure, but there is no mention of demolition at the end of its use or the return of the space to a park. It is unlikely that the city will pay to demolish a revenue generating structure and then pay for the reinstatement of a park.

