### Zoning Amendment Application Humber River Regional Hospital (Wards 6 and 27 - North York Humber, York Humber)

(City Council on December 14, 15 and 16, 1999, amended this Clause by:

- (1) adding to Recommendation No. (5) embodied in the report dated November 4, 1999, from the Acting Commissioner of Urban Planning and Development Services, the words "provided that the hospital is not made responsible for the cost of traffic calming measures", so that such recommendation shall now read as follows:
  - "(5) the conditions of the Works and Emergency Services Department as set out in Schedules 'G', 'H1' and 'I' in the Final Report dated December 18, 1998, and Appendix 'D' in this report, be met, provided that the hospital is not made responsible for the cost of traffic calming measures;"; and
- (2) *adding thereto the following:*

"It is further recommended that the Acting Commissioner of Urban Planning and Development Services, the Commissioner of Works and Emergency Services and the local Ward Councillors be requested to meet with representatives of the Humber River Regional Hospital to determine what traffic calming measures on Church Street are necessary for this community.")

The Planning and Transportation Committee, after considering the deputations and based on the findings of fact and recommendations contained in the report (November 4, 1999) from the Acting Commissioner of Urban Planning and Development Service, recommends that the report (November 4, 1999) from the Acting Commissioner, Urban Planning and Development Services be adopted subject to amending Recommendation (2) by deleting the words "prior to" and substituting in place thereof the word "following", so as to read:

- "(2) following the enactment of the zoning by-law, all requirements in accordance with the Municipal Act be met with respect to the closure and sale of the following portions of roads (all within the former municipality of the City of North York) to the Humber River Regional Hospital on terms and conditions to be determined by City Council:
  - (i) the southern 15.27 metres of Longview Drive; and
  - (ii) the closed portions on Woodward Drive on the east and west sides of the hospital;"

The Planning and Transportation Committee reports, for the information of Council, having held a statutory public hearing on November 29, 1999 in accordance with Section 34 of The Planning Act and advises that appropriate notice of this meeting was given in accordance with the Planning Act and the Regulations thereunder.

## The Planning and Transportation Committee submits the following report (November 4, 1999) from the Acting Commissioner, Urban Planning and Development Services:

#### Purpose:

On January 11, 1999, Urban Economic Development Committee (UEDC) discussed the December 18, 1998 Urban Planning and Development Services report regarding the rezoning of the Humber River Regional Hospital (HRRH) on Church Street. UEDC referred the report back to staff to permit further community consultation. This report provides supplementary information on the revised plans and community consultation, and is presented to the Transportation and Planning Committee to enable the statutory Public Meeting. It is recommended that zoning be enacted to permit a 2,415m<sup>2</sup> expansion of the Emergency Ward and related Imaging Services. The report also recommends that any other expansion beyond this be subject to a Holding Zone with further transportation impact analysis required.

#### **Financial Implications:**

All of the costs associated with the processing of this application are included within the 1999 Operating Budget.

#### Recommendations:

It is recommended that the rezoning application for 200 Church Street be approved subject to the following conditions:

- (1) the zoning be amended to a hospital zone in accordance with an implementing zoning by-law which generally complies with the draft by-law attached as Schedule "E";
- (2) prior to the enactment of the zoning by-law, all requirements in accordance with the Municipal Act be met with respect to the closure and sale of the following portions of roads (all within the former municipality of the City of North York) to the Humber River Regional Hospital on terms and conditions to be determined by City Council:
  - (i) the southern 15.27 metres of Longview Drive; and
  - (ii) the closed portions on Woodward Drive on the east and west sides of the hospital;
- (3) that an "H" holding designation be imposed on the proposed south addition (Phase 2). The lifting of the "H" by City Council would be subject to the following conditions being met:
  - (i) an updated traffic impact study be prepared and submitted to the satisfaction of the Commissioner of Works and Emergency Services that demonstrates that sufficient capacity is available to accommodate the additional traffic generated by the Phase 2 (south) expansion, and that the development would not result in an unacceptable level of arterial road service; and

- (ii) a building permit has been issued for the west parking deck.
- (4) the design principles outlined in Schedule "A" in the Final Report dated December 18, 1998 be considered in the review of a site plan application;
- (5) the conditions of the Works and Emergency Services Department as set out in Schedules-"G", "H1" and "I" in the Final Report dated December 18, 1998, and Appendix-"D" in this report, be met;
- (6) the conditions of the Public Health Department as set out in Schedules "K1" and "K2" in the Final Report dated December 18, 1998 be met;
- (7) the conditions of the utilities as set out is Schedules "M1", "M2" and "M3" in the Final Report dated December 18, 1998 be met;
- (8) that the City Solicitor and Planning Staff do all things necessary to prepare and perfect the implementing zoning by-law.

Procedural Steps

- (1) On November 9, 1999, North York Community Council discussed the report from Real Estate and Facilities regarding the closure and sale of portions of Longview Drive and Woodward Avenue.
- (2) The Planning and Transportation Committee consideration of this current report is the statutory Public Meeting under the Planning Act.
- (3) On November 29, 1999, the Planning and Transportation Committee is receiving a report from Works and Emergency Services to authorize the initiation of the appropriate road closure procedures.
- (4) The Public Meeting for the road closing will be scheduled in early 2000 at Planning and Transportation Committee once the appropriate notice has been provided. Provided that both the rezoning and road closing are approved, then Council can enact a zoning by-law.

#### Background:

In January 1998 HRRH filed the original rezoning application for the hospital expansion. HRRH now requires a rezoning to allow for the expansion of the hospital in two phases. The first and most immediate need is for a 2,415m<sup>2</sup> expansion of the emergency ward and related imaging services. The second phase is a potential 3,409m<sup>2</sup> expansion at a later date, for a combined total expansion of 5,824m<sup>2</sup>.

At the January 1999 UEDC meeting, the Committee did not hear deputations, but referred the application back to staff for further community consultation.

During the time taken for additional public consultation, HRRH initiated revisions to the plans which were in response to community input and the changing nature of the health care delivery. The revisions included a slightly enlarged south addition, which would necessitate additional parking in the anticipated form of a parking structure on the existing west parking lot. Statistical details of the expansion are summarized on Table 1.

As per UEDC direction in January 1999, further community consultation was held in each former municipality as outlined in this report. This report also consolidates all of the recommendations of the December 18, 1998 Final Report and those arising from the revisions.

Site and Surrounding Area:

The site is bounded by Church Street, Uphill Avenue, Pelmo Crescent, Queenslea Avenue and Pine Street, and is currently occupied by the hospital and 11 detached houses (see Schedules "A", "B" and "C"). The block straddles the former municipal boundaries of York and North York. The main access to the hospital building is from Uphill Avenue and is served by a visitor/patient parking lot adjacent to that access. Staff parking lots are located on the west and north sides of the building. The height of the existing hospital varies between 2 and 7 storeys. Three houses in private ownership and a 10-storey building containing a school are also located on the hospital block.

#### Original Proposal:

HRRH applied for a rezoning in January 1998 to allow for the following:

- a 2-storey expansion to the emergency wing on the north side of the hospital;
- a 3-storey addition to the mental health wing on the south side of the building; and
- a 2-storey parking garage structure to replace an existing surface parking lot and four houses fronting Church Street at the southeast side of the site.

A Final Planning report dated December 18, 1998 recommending approval of the rezoning application, subject to conditions, was prepared for consideration by UEDC.

#### **Revised Proposal:**

After further community consultation and the addition of the property at 52 Uphill Avenue to the site, HRRH revised their application. The most recent revisions are for a phased project.

Phase 1 involves the expansion of the emergency wing and the expanded parking garage on the east side of the hospital. The larger parking garage is made possible by the hospital purchase of 52 Uphill Avenue. In response to a request from the community, the hospital-owned house at 54 Uphill Avenue will be retained as a house-form building which will be an appropriate separation between the parking garage and the existing two privately-owned residences on Pelmo Crescent.

Phase 2 is a 4-storey, 3,409m<sup>2</sup> south addition on the Church Street side, which may be required in the future. The revised proposal adds a fourth floor to this south addition, which is stepped back from the lower three floors to ensure minimal impact. See Schedule "D2" for elevations.

The community had asked how much more expansion could be expected on the site and Phase 2 was a response to that question. Phase 2 is proposed to form part of the zoning by-law at this time and gives a final build out envelope to the site over the long term.

Given the unknown (possibly long term) time frame, the current uncertainty of the HRRH program that could in the future occupy this space, and the complexity of the access/traffic and parking issues generated by Phase 2, a Holding designation in the zoning by-law is proposed.

In order to lift the Holding designation and construct Phase 2, HRRH would need to fulfill several conditions. These conditions would include a traffic study of Phase 2 and its impacts, with recommendations subject to the satisfaction of the Commissioner of Works and Emergency Services.

It is currently expected that the south addition would trigger the need for a 2-storey parking structure to be constructed on the west parking lot. This is anticipated to accommodate approximately 115 staff parking spaces, and increase total on-site parking to 931 spaces. Statistics of the original and revised proposal are outlined below.

Item	Jan. 1999 Statistics	Revised Statistics
Site Area	45,190 m <sup>2</sup>	45,771 m <sup>2</sup>
Emergency Addition (North) – phase 1	2,415 m <sup>2</sup>	2,415 m <sup>2</sup>
Church St. Addition (South) – phase 2	2,745 m <sup>2</sup>	3,409 m <sup>2</sup>
Total Additions	5,160 m <sup>2</sup>	5,824 m <sup>2</sup>
Existing Gross Floor Area	32,810 m <sup>2</sup>	32,810 m <sup>2</sup>
Existing Total Density	0.73 FSI	0.72 FSI
Proposed Total Density – for Phase 1	0.78 FSI (35,225 m <sup>2</sup> )	0.77 FSI (35,225 m <sup>2</sup> )
Proposed Total Density – for Phase 1 & 2	0.84 FSI (37,970 m <sup>2</sup> )	0.84 FSI (38,634 m <sup>2</sup> )
Proposed East Parking Deck (Uphill)	257 spaces	382 spaces
Proposed West Parking Deck	Not proposed	115 spaces
West Surface Parking Lot	271 spaces	294 spaces
North Surface Parking Lot	148 spaces	140 spaces
Existing Parking	526 spaces	526 spaces
Total Parking Phase 1 (north addition only)	676 spaces	816 spaces
Total Parking Phase 2 (north & south additions)	676 spaces	931 spaces

Table 1 - Project Information

The issue of the accommodation of a day-care centre at the site was discussed in the December 1998 report. Since then, the day-care operator has found a permanent home at another location, and therefore this issue is no longer relevant.

Community Consultation:

In order to fully explore the application with the community, two working groups were set up to discuss design and massing and parking and traffic. In addition, the six area Councillors were directed by UEDC to form the Advisory Committee on Hospital Restructuring Matters. The

working groups and committee met frequently in 1998 to discuss the proposal (see Appendices "A" and "C" for the meeting minutes).

As part of the community participation process, three information meetings were held in 1998, one in May and two in November. The latter were held as Open Houses in each former municipality.

Further to the January 1999 UEDC directive to undertake further consultation, two more meetings, one in each former municipality, were held on February 11 and March 4, 1999 (see Appendices "B" and "C" for motions made at these meetings and the minutes).

The HRRH then decided to revise its application. A further Working Group meeting was held on June 17, 1999 to discuss the revised proposal (Appendix "A"). Further community meetings were also held on September 16 and 30, 1999 (Appendix "C"). A number of issues were raised, including the amount of staff parking, the adequacy of sewer and water services, and the length of time to construct the parking garage. These items were addressed and are in the attached minutes.

The community was not satisfied with the original proposal and expressed opposition to HRRH expansion based on the issues noted above. At the March 4, 1999 community meeting described above, an overwhelming majority voted to recommend to City Council that the application be refused. With respect to the revised proposal, the community did not express a higher level of satisfaction with those alterations that attempted to address their concerns.

Comments:

Built Form:

The revisions to built form include modification to the south addition by adding one additional floor stepped back from the lower three and the addition of a second parking deck on the west side of the site. There is no change to the second phase footprint or the setback from the street.

The Phase 2 addition is nine percent of the overall building and does not impact the Church Street streetscape, as it would maintain a large front yard setback and green open space. Site Plan Approval will ensure proper landscape treatment, access and lighting.

The design principles outlined in the December 1998 report are still pertinent to the proposal.

Traffic, Parking and Sewer/Water:

The Transportation Services Division, Works and Emergency Services has reviewed the updated traffic impact and parking study (June 1999) submitted by the applicant's consultant and concurs that the adjacent road network can accommodate the additional a.m. and p.m. peak hour site-generated traffic as a result of the Phase 1 (north) expansion and revised site accesses (See Appendix "D").

The desire for traffic calming measures was identified during the public consultation process and identified in the December 1998 report. Any traffic calming measures are to be reviewed in consultation with the Councillors, local community, the hospital and Works and Emergency Services staff with the occupation of the Phase 1 (north) expansion and any subsequent additions.

The proposed parking supply for the Phase 1 (north) expansion (for the emergency care services) represents an increase of 290 parking spaces for a total on-site parking supply of 816 spaces, of which 215 are proposed as visitor spaces. The updated traffic and parking study indicates that the future parking demand can be met by the addition of the proposed east parking deck, and is acceptable to the Transportation Services Division. In this regard, the current proposal would translate into a parking ratio of one space per 47 m<sup>2</sup> of gross floor area for the entire site.

The kind of health care delivery that would prompt the expansion of the south portion of the building (Phase 2) has not been settled. Previous plans to enlarge the existing mental health wing are not being pursued at present. The traffic impacts of this expansion will be affected by the kind of expanded health care delivery which is to be accommodated. Given that the community has expressed concerns with the potential for additional traffic resulting from the Phase 2 (south) expansion, a mechanism is required to provide a basis for further evaluation of the impacts of the HRRH expansion. Therefore, it is recommended that a Holding Zone Provision in the proposed zoning by-law be placed on the future Phase 2 (south) addition, which could be lifted subject to the following criteria:

- an updated traffic impact study be prepared and submitted to the satisfaction of the Commissioner of Works and Emergency Services that demonstrates that sufficient capacity is available to accommodate the additional traffic generated by the Phase 2 (south) expansion, and that the development would not result in an unacceptable level of arterial road service; and
- a building permit must be issued for the west parking deck.

The building envelope and density of the south addition and west parking structure are established in the proposed HOS Zoning By-law. The design, landscaping and other details of the Phase 2 addition will be reviewed at the Site Plan Approval stage.

Works and Emergency Services have advised that there is adequate water and sanitary and storm sewer capacity to serve the hospital.

#### Conclusions:

The revised plans have been reviewed with respect to design, traffic and parking. Planning staff have no objection to the extension and redesign of the east parking deck, potential Phase 2 west parking deck and south addition. As a further precaution for the latter phased development, a Hold provision is recommended for the south addition until an updated traffic study has been conducted. Approval of the project is recommended, as in the previous planning report, with the additional recommendations for a Hold on the south addition.

The revised proposal constitutes good planning and it is therefore recommended that the application and draft zoning by-law be approved.

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Schedule "A" – Official Plan Map

Schedule "B" – Zoning Map

Schedule "C" – Revised Site Plan

Schedule "D1" -Uphill Parking Garage Elevations Schedule "D2" -Elevations (East Side – Uphill Ave.) Schedule "D3" -Elevations (South Side – Church St.) Schedule "D4" – North & West Elevations (Longview)

Schedule "D5" – Elevations (West Parking Garage)

Schedule "E"

Authority: Planning and Transportation Committee Report No.\_\_ Clause No.\_\_ , as adopted by Council on \_\_\_\_\_. Enacted by Council:

#### CITY OF TORONTO

Bill No.

#### **BY-LAW No.**

## To amend Zoning By-law 7625 of the former City of North York and Zoning By-law 1-83 of the former City of York for 200 Church Street

WHEREAS authority is given to Council by Section 34 of the Planning Act, R.S.O. 1990, c.P. 13, as amended, to pass this By-law; and whereas Council of the City of Toronto has provided adequate information to the public and has held at least one public meeting in accordance with the Planning Act;

The Council of the City of Toronto HEREBY ENACTS as follows:

- 1. Schedules "B" and "C" of By-law 7625 are amended in accordance with Schedule 1 of this by-law.
- 2. Section 6 of Zoning By-law 1-83 is amended by adding thereto the following as new Subsection (64):
  - "(64) By changing the area shown on District Map 3 comprising the lands described as Block 'A' in Schedule '1' hereto from an R1 to R1 16(249)H, and by changing District Map 3 accordingly."
- **3**. Section 64.44 of By-law 7625 is amended by adding the following subsection:

64.44(3) HOS(3)

#### **DEFINITIONS**

- (a) For the purpose of this exception, "Gross Floor Area" shall mean the total area of all floors, measured between the outside of the exterior walls of the building at the level of each floor, but excluding:
  - (i) any part of the building used exclusively for the accommodation of mechanical equipment necessary to physically operate the building such as heating, ventilation, air conditioning, electrical, plumbing, fire protection and elevator equipment;

(ii) car parking areas within the building including that contained in an above-grade parking structure.

#### **PERMITTED USES**

(b) In addition to the uses permitted in the HOS zone, the following use is also permitted:

Single family dwelling

#### **USE QUALIFICATIONS**

- (c) Accessory Buildings accessory to the single family dwellings shall be subject to the requirements for accessory buildings in R zones.
- (d) A day nursery is not required to be associated with the hospital.

#### **EXCEPTION REGULATIONS**

(e) Gross Floor Area

The maximum gross floor area shall be 85% of the lot area.

- (f) Building Envelopes
  - (i) Single family dwellings may only be permitted within the Building Envelopes B as shown on Schedule HOS (3).
  - (ii) Parking structures may only be located within Building Envelopes C and D as shown on Schedule HOS(3).
  - (iii) All other uses permitted may only be located in Building Envelopes A and B.
  - (iv) Parking kiosks may be located anywhere on the site except in any landscaped area required in clause (i).
- (g) Yard Setbacks
  - (i) The yard setbacks shall be as shown on Schedule HOS(3)
- (h) Building Height
  - (i) The height of any portion of the buildings shall not exceed the heights shown on Schedule HOS(3).
  - (ii) Notwithstanding (i), the height of any portion of the building or structure shall not exceed the horizontal distance between that portion and an abutting R4 zone.

- (iii) Notwithstanding (i) and (ii), the height of the parking structures shall not exceed 135.5 metres above sea level.
- (i) Landscaping
  - (i) A minimum distance of 3.0 metres from all lots lines that abut a street shall be landscaped except for drop off areas and driveways entering and exiting from the lot directly onto the street.
  - (ii) A minimum distance of 13.0 metres from the most westerly lot line defined as N17°54'10"W shall be landscaped.
  - (iii) Despite (i) above, buildings located within Building Envelopes B may encroach into the required landscaped areas.
- (j) Parking

A minimum of 1 space per 47 m<sup>2</sup> of gross floor area of the hospital shall be provided on site.

4. Section 64.13 of By-law 7625 is amended by adding the following subsection:

64.13(54) R4(54)

#### PERMITTED USES

(a) In addition to the uses permitted in the R4 zone, a school of nursing, a nurses' residence and a student residence shall be permitted.

#### **EXCEPTION REGULATIONS**

- (b) The school of nursing and nurses' residence buildings shall be set back a minimum distance of 18.5 metres from the westerly lot line.
- (c) The school of nursing and nurses' residence shall be set back a minimum distance of 12.1 metres from the northerly lot line.
- (d) The maximum height of the nurses residence shall be 10 storeys.

(e) The maximum height of the school of nursing shall be 2 storeys.

5. Section 16 of By-law 1-83 is amended by deleting Subsection (249) and inserting in its place the following as Subsection (249):

#### 16(249) LANDS - EAST OF PINE STREET, NORTH OF CHURCH STREET AND WEST OF UPHILL AVENUE

Notwithstanding the provisions of :

Subsection 3.1.4 of Section 3; Subsection 3.4.11 of Section 3; and Section 7.

The lands municipally known as 180, 186 and 200 Church Street, which lands are more particularly shown in Schedule 1 hereto (and hereinafter referred to as the "lands") shall only be used for the erection and use of the following permitted uses:

Accessory use, buildings or structures; Clinic; Day nursery; Detached dwelling house; Hospital; Health science research laboratory; Medical office; Nursing home; Parking lot; and Retail store,

subject to the following conditions:

- (a) Use Qualifications
  - (i) A clinic, health science research laboratory, nursing home, medical office, and retail store are permitted, if
    - (A) they are located on the same lands as the hospital.
    - (B) they are in association with a hospital on the same lands.
  - (ii) A retail store is permitted if:
    - (A) it is located in a building used primarily as a hospital
    - (B) the maximum retail store area is limited to 10% of the ground level of the hospital building at its main public entrance.
  - (iii) Accessory Buildings accessory to the detached dwelling house shall be subject to the requirements for accessory buildings in set out in Section 7.

(iv) The maximum height of buildings accessory to residential and non-residential uses, except for parking structures, shall be 3.1 metres for flat-roof buildings and 3.7 metres for pitched-roof buildings.

#### **Building Envelopes**

- (i) Detached dwelling houses may only be permitted within the Building Envelopes B as shown on Schedule HOS(3), attached hereto.
- (ii) Parking structures may only be located within Building Envelopes C and D as shown on Schedule HOS(3).
- (iii) All other uses permitted may only be located in Building Envelopes A and B.
- (iv) Parking kiosks may be located anywhere on the site except in any landscaped area required in clause (d).
- (v) Notwithstanding (i), the height of the parking structures shall not exceed 135.5 metres above sea level.

#### **EXCEPTION REGULATIONS**

(a) Gross Floor Area

The maximum gross floor area shall be 85% of the lands.

(b) Yard Setbacks

The yard setbacks shall be as shown on Schedule HOS(3).

- (c) Building Height
  - (i) The height of any portion of the buildings shall not exceed the heights shown on Schedule HOS(3),attached hereto.
  - (ii) Detached dwelling houses may only be permitted within the Building Envelopes B as shown on Schedule HOS(3), attached hereto.
  - (iii) Parking structures may only be located within Building Envelopes C and D as shown on Schedule HOS(3).
  - (iv) All other uses permitted may only be located in Building Envelopes A and B.

- (d) Landscaping
  - (i) A minimum distance of 3.0 metres from all lots lines that abut a street shall be landscaped except for driveways and drop off areas entering and exiting from the lands directly onto the street.
  - (ii) A minimum distance of 13.0 metres from the most westerly lot line defined as N17°54'10"W shall be landscaped.
  - (iii) Despite (i) above, buildings located within Building Envelopes B may encroach into the required landscaped areas.
- (e) Parking

A minimum of 1 space per 47  $m^2$  of gross floor area of the permitted uses shall be provided on site.

- (f) Holding Provision
  - (i) Until the removal of the holding symbol "H", any portion of the lands designated R1-16(249)-H may be used only for the purposes existing at the time of passing of the by-law including a two storey plus basement wing of the hospital and open space.
  - (ii) The holding symbol "H" on the lands designated as R1-16(249)-H shall only be removed when the following conditions have been met:
    - (a) an updated traffic impact study be prepared and submitted to the satisfaction of the Commissioner of Works and Emergency Services that demonstrates that sufficient capacity is available to accommodate the additional traffic generated by the Phase 2 (south) expansion, and that the development would not result in an unacceptable level of arterial road service; and
    - (b) a building permit has been issued for the west parking deck.
- **6**. Section 64.44 of By-law 7625 is amended by adding Schedule HOS(3) attached to this by-law.
- 7. By-laws 28538, 25569, 21789, 11620 which amended North York By-law 7625 are hereby repealed.

ENACTED AND PASSED this day of , A.D. 1999

Mayor

Schedule "1" to By-Law

Schedule "HOS(3)" to By-Law

#### Appendix "D"

(Memorandum dated October 6, 1999, from the Director, Transportation Services – District 3, North York Civic Centre, addressed to the Director, Community Planning – North District)

Further to my memorandum of November 16, 1998, I am providing the following comments on the zoning application for this site as per the revised site plan and traffic studies that have been submitted.

The development site is located on the north side of Church Street, west of Jane Street and south of Highway 401. The applicant is proposing to build a 2,415 m<sup>2</sup> addition to the existing hospital, for a total of approximately  $35,225 \text{ m}^2$  of hospital uses with 205 beds. There is also a proposal for a further south addition of 3,409 m<sup>2</sup> in the future, which is not anticipated to be built in the next five years but is part of the current rezoning application. The site straddles the District 1/District 3 border, and any operational issues will continue to be reviewed by the separate districts.

#### Traffic Assessment

BA Consulting Group Limited prepared an updated traffic impact study (June 1999) and a supplement for the south addition (August 1999) that compared the traffic generated by the proposed development with the existing uses on-site and the impact on the area road network. Trip generation rate surveys conducted on site were used in determining the vehicle trips generated by the proposed uses and are shown in the following table.

	AM Peak Hour		PM Peak Hour			
	In	Out	Total	In	Out	Total
Total Existing Trips	280	105	385	110	270	389
New Proposed Trips	135	75	210	45	150	195
Total Proposed Trips	415	180	595	155	420	575
New Future Trips	42	18	60	16	44	60
Total Future Trips with South Addition	457	198	655	171	464	635

Overall, it is anticipated that there would be a net increase in the number of two-way vehicular trips generated by approximately 210 trips in the a.m. peak hour and 195 trips in the p.m. peak hour from what is currently generated on site. The future South Addition would add a further 60 two-way trips per peak hour.

Roadway capacity analyses of the surrounding streets indicate that the additional site generated traffic from the proposed development can be accommodated on the adjacent road network. The need for traffic calming measures was identified through the public meetings.

Access

Access to the site is to be provided from the surrounding local streets as follows:

- (1) Full move access on Longview Drive to serve the North staff parking lot.
- (2) Full-moves access on Longview Drive to the loading area.
- (3) Full-move secondary access for emergency vehicles only on Uphill Avenue.
- (4) Full-moves access to the parking structure, emergency area from the driveway that forms the west leg of the intersection of Uphill and Woodward Avenues.
- (5) Inbound only access to the parking and fire route access from Church Street.
- (6) Full-moves service access on Church Street.
- (7) Full-moves access to the parking from the driveway that forms the east leg of the intersection of Pine Street and Woodward Avenue.

#### Parking

In accordance with By-law #7625, 268 spaces are required while 816 spaces are proposed (including 19 disabled spaces), including the construction of a new parking deck on the east side of the site. At the proposed amount of parking, 20 disabled spaces are required.

The future south addition would include an increase in parking of 114 spaces for a total of 930 spaces through the construction of a new parking deck on the west side of the site. 20 disabled spaces would still be required.

The following table summarizes the parking available for the proposal and the future south addition, including off-site parking at the Prayer Palace and the Bond International College and on-street parking:

Parking Type/Location	Existing Supply	Proposed Supply	Future Supply with
			South Addition
On-Site	528	816	931
Off-Site	40	40	40
On-Street	40	35	35
Total	608	891	1006

Proposed parking is based on actual demand rather than existing by-law standards. The current proposal would translate into an approximate parking rate of one space per 47  $\text{m}^2$  of gross floor area for the entire site (or one space per 4.9  $\text{m}^2$  of bedroom area or three spaces per bedroom).

#### Loading

In accordance with By-law #7625, three loading spaces are required and are proposed for the current expansion and the future south addition.

#### Site Plan Review

Having reviewed the site plan (Dwg. No. A100 by Zeidler Roberts Partnership – Architects dated June 8, 1998), the following issues have been noted that need to be addressed by the applicant:

- (1) The designated separation between the eastbound left-turn lane and the through/right-turn lane at the intersection of Jane and Church Streets must be increased to 60 metres plus taper through appropriate pavement markings. This may require changes to parking by-laws on Church Street.
- (2) Upgraded pavement markings and signage, including improved pedestrian crossing treatments, must be provided at the intersections of Uphill Avenue with Pelmo Crescent, Woodward Avenue, and Church Street.
- (3) An eastbound left turn lane is required for the inbound-only Church Street parking access through pavement markings to improve traffic operations. This will require the removal of parking spaces and meters on the north side of Church Street and changes to parking by-laws.
- (4) All parking spaces and aisles must conform to the requirements of Zoning By-law 7625, including widths of 2.7 metres.
- (5) In accordance with Zoning By-law 7625, a minimum of three loading spaces are required with minimum dimensions of 11 metres long, 3.6 metres wide and have a vertical clearance of 4.2 metres.
- (6) In accordance with By-law 31770, 20 disabled spaces must be provided.
- (7) The secondary emergency access on Uphill Avenue must be gated or chained.
- (8) All other existing access must be closed and restored to City of Toronto standards.
- (9) All of the above conditions must be met at no cost to the City of Toronto.

#### Traffic Calming

During the public consultation process, various traffic calming measures were illustrated that would change driver behaviour and result in an overall reduction of speed, which appears to be a principal concern of the area community.

Any traffic calming measures required are to be reviewed in consultation with the Councillors and Traffic Operations staff (in both District 1 and District 3), in co-ordination with the local community and the hospital, with the occupation of the first and subsequent phases of the expansion. These measures are to be implemented at the developer's expense.

#### Road Closures

The expansion on the north side of the hospital building requires a portion of Longview Drive to be closed and sold to the Hospital. In addition a portion of Woodward Avenue east of Pine Street and a portion of Woodward Avenue west of Uphill Avenue (which are being used solely by the Hospital for a parking area and access) are to be closed.

A separate report on the road closures is being prepared as part of this application in accordance with Council policy.

#### South Addition

The transportation analysis provides a general overview of the anticipated traffic and parking demand for the proposed south addition. Given that the south addition is not expected to be built for a few years, it is recommended that an updated traffic impact and parking study be required at the time the applicant proceeds with the south addition and the west parking deck to verify the assumptions contained in the traffic report dated August 1999.

#### Conclusions

Given the above, I have no objections to the proposal from a transportation perspective subject to the applicant complying with the above noted requirements through the site plan control process.

# The Planning and Transportation Committee also submits the following report (December 18, 1998) from the Commissioner of Urban Planning and Development Services:

#### Purpose:

This is a final recommendation report on the rezoning for the expansion of the Humber River Regional Hospital at 200 Church Street to permit additions to the existing hospital on the north and south sides. A two storey parking garage on the southeast corner of the site has also been proposed. This site straddles the boundary of the former municipalities of York and North York and therefore all planning reports have been directed to the Urban Environment and Development Committee for consideration and in order to hold the statutory public meeting.

#### Recommendations:

It is recommended that the rezoning application for 200 Church Street be approved subject to the following conditions:

- (1) the zoning be amended to a hospital zone in accordance with an implementing zoning by-law which generally complies with the draft by-law attached as Schedule "F" and the by-law be perfected prior to enactment;
- (2) prior to the enactment of the zoning by-law, the following conditions shall be met:
  - (i) the southern 15.27 metres of Longview Drive be closed and stopped up and conveyed to those persons entitled by law to such conveyance; and
  - (ii) the closed portions of Woodward Drive on the east and west sides of the hospital site be conveyed to the hospital;
- (3) the design principles outlined in Schedule "A" apply to the consideration of any site plan approval application;
- (4) prior to site plan approval, a community meeting be held to discuss the parking and drop off areas for the proposed daycare at 180 Church Street and the daycare be included as a permanent use in the zoning by-law;
- (5) the conditions of the Works and Emergency Services Department as set out in Schedules "G", "H1" and "I" be met;
- (6) the conditions of the Public Health as set out in Schedule "K1" and "K2" be met.; and
- (7) the conditions of the utilities as set out in Schedules "M1", "M2", and "M3" be met.

#### Background:

1.0 Site and Surrounding Area

The site straddles the former municipalities of York and North York in the southeast quadrant of Jane Street and 401 and is predominantly surrounded by detached homes. The hospital owns 10 of the 14 houses around the site (See Schedules "A" and "B").

The hospital site (See Schedule "C" - Site Plan) is characterized by the existing two to seven-storey hospital building in the middle of the site with its main access on Uphill Avenue. Parking is located on the east, west and north portions of the site with the service areas are generally located on the west side of the hospital.

#### 2.0 Proposal

The Humber River Regional Hospital is proposing to expand the Church Street facility to implement the Provincial Health Services Restructuring Commission (HSRC) directives. The original proposal submitted was for the immediate expansion of both the mental health wing on the south side of the building (Church Street) involving a two level structure plus a basement level of approximately 2,415 m<sup>2</sup> (26,000 sq.ft.) and the expansion of the emergency wing on the north side of the building (Pelmo Crescent) involving a one level plus basement level addition of approximately 2,415 m<sup>2</sup> (26,000 sq.ft.). The north addition also requires the closing and acquisition of Longview Drive. A new electrical transformer station is also proposed on the west side of the existing building with an area of approximately 330 m<sup>2</sup> (3,570 sq.ft.).

Since the time of the original proposal, the hospital has determined that the mental health program can be moved to the Finch site of the Humber River Regional Hospital and therefore the south expansion of the Church Street site is not immediately necessary which responses to community consultation where a common suggestion arose to move any programs possible to the Finch site of the hospital where there is more room for expansion.

In addition, the applicant is proposing to construct a two level parking structure, located partially underground, on the southeast corner of the site at the junction of Church Street and Uphill Avenue. The parking spaces will increase by 150 spaces from 526 spaces to a total of 676 spaces. The total increase in the gross floor area including the south expansion would be 5,160 m2 (55,550 ft.) increasing the existing floor space index of 0.71 to 0.82. With the south expansion excluded, the increase in gross floor area is  $2,745 \text{ m}^2 (29,570 \text{ sq.ft.})$  which increases the floor space index to 0.77.

	North Addition + Electrical	South Addition	Existing Hospital	Total
Site Area				45,190 m <sup>2</sup>
Gross Floor Area	2,745m <sup>2</sup>	2,415m <sup>2</sup>	32,236 m <sup>2</sup>	37,396 m <sup>2</sup>
Floor Space Index	0.06	0.05	0.71	0.82
Parking Provided	150 spaces		526 spaces	676 spaces
Parking Required	1 space/28 m <sup>2</sup> of bedroom area			144 spaces

Table 2.1- Site Statistics

#### 3.0 Planning Controls:

The site straddles two former municipalities, therefore two Official Plan and Zoning By-law designations apply to the site.

#### 3.1 Official Plan Designations:

North York District: General Institutional which permits institutional uses including hospitals and uses ancillary and complementary to hospitals

York District: Institutional which permits the hospital use

The proposal complies with the Official Plans for both former municipalities.

- 3.2. Zoning
- North York District: R4 (One-Family Detached Dwellings Fourth Density Zone) subject to site specific by-laws 11620, 21789, 25569, and 28638 which permit the existing hospital use and built form.
- York District: R1 (Residential Zone 1) subject to site specific by-law Section 16(249) which permits the hospital use and built form.

The existing site specific by-laws in both municipalities do not contemplate any extension of boundary lines to include the house lots now owned by the hospital, or the expansion of the hospital uses onto those lots. Expansion of the hospital footprint and the parking areas is also not contemplated in the existing site specific by-laws.

#### 4.0 Community Consultation

Prior to the rezoning application, submitted on February 24, 1998, the hospital held several meetings with the community to inform the local residents of the future plans for the hospital and get their feedback. The Urban Planning and Development Services Department held an Information Meeting at Pelmo Park School on May 21, 1998. Two working groups were formed to address the issues identified by planning staff and the community. The issues are outlined below. As well, City Council, at its meeting of June 3, 4 and 5, 1998, recommended that an Advisory Committee on restructuring matters be created with representation from local councillors and the community.

#### 4.1 Working Groups

The Working Groups are comprised of local residents living, for the most part, in the immediate vicinity of the hospital. Representatives from the Pelmo Park and Weston Ratepayers Associations attended as representatives of the larger communities. Planning staff also attended the various meetings.

The Working Groups identified and discussed the issues over a span of nine meetings. The meetings were divided into two main topics: Design and Massing, and Parking and Traffic.

The following issues arose at the Design and Massing Group meetings:

- location and built form of the parking garage
- location of front entrance for the hospital
- substantial landscaping required over the entire site
- keep existing front yard (as much as possible) on Church Street
- reduction of berm by the west parking area
- built form and impact of the north addition on the adjoining residential homes
- facade improvements

The Parking and Traffic Group meetings focused on the following issues:

- traffic speed and infiltration to neighbourhood
- circulation of traffic and pedestrians around and within the hospital grounds
- parking adequacy, location and potential reductions of staff parking

The issues from both groups are discussed in the Planning Issues and Urban Design sections of the report.

#### 4.2 Advisory Committee on Restructuring Matters

In accordance with the direction given at the May 19, 1998 Urban Environment and Development Committee meeting, an advisory group was established composed of the six area Councillors, community representative and hospital and city staff. This group was given the direction to assess the impact of planning decisions on the respective communities, to discuss hospital program planning and the Health Services Restructuring Commission decisions. The group has had several meetings and has recommended that the hospital continue to work to shift some the substance abuse services (part of mental health) from the Church site back to the Finch site.

While the programming within the hospital is beyond the scope of the rezoning application, the program requirements of the hospital have directed the location and extent of the proposed hospital expansion. The north expansion responds to the need for the expansion of both the Emergency Room and the diagnostic imaging department on the main floor. The southern expansion reflected the need to upgrade the mental health department which subsequently will be moved to the Finch site in response to the Advisory Group's recommendation.

#### 4.3 Information Meetings

Three Information Meetings have been held for this project. One was held on May 21, 1998. Approximately 30 people attended this meeting. Two others were held November 3 and 4, 1998, one each in the former municipalities of York and North York. Similar issues were raised as in the Working Groups such as traffic, facades, parking, landscaping, and impact on surrounding residential area. The comments received at these meeting are attached as Schedule "N".

#### 5.0 Other Department Comments

The comments received from the various departments and agencies circulated are summarized in Schedule "G" and are also attached as Schedules "H" through "M".

#### Discussion:

#### 6.0 Planning Issues:

While the proposed additions to the hospital are relatively small, this hospital is located in the midst of a single family residential neighbourhood and therefore careful consideration is needed as to how the hospital can better fit within the residential community. In order to aid this evaluation, principles of development were established by the planning staff and the Working Committees. The principles are as follows:

- (a) create/maintain residential character;
- (b) structure must not be visually intrusive to the surrounding neighbourhood;
- (c) the edge of the hospital property must be aesthetically appealing and well maintained;
- (d) traffic on surrounding roads must flow safely and efficiently;
- (e) reduce traffic and parking congestion throughout the neighbourhood;
- (f) internal vehicle circulation must be maximized to minimize external vehicle circulation;
- (g) emergency/visitor parking and entrance must be easily found and accessed; and
- (h) efficient and effective emergency access must be maintained .

As a result of recommendations from Working Group, the applicant has responded with changes to the design and internal traffic circulation. The following sections discuss the issues and how the principles were addressed.

#### 6.1 Built Form and Urban Design

There are three distinct key components of the proposal: the north addition, the parking garage, and the future south addition. Each of these components is outlined below and reflect the Urban Design Guidelines in Appendix "A".

#### 6.1.1 North Addition

The north addition (See Schedules "C" and "D2" - Site Plan and Elevations) is proposed to house an expanded emergency room function. Due to the immediacy of the functions occupying this portion of the hospital, the uses must be at grade and easily accessible. The emergency visits to the hospital are projected to increase from approximately 40,000 per year to 70,000 per year. The expansion is required to meet this increased load. The addition requires the removal of an existing house at 15 Longview Drive which is now in hospital ownership. The addition is proposed to be 14.25 metres in depth and have a 68 metre width with a height of 2 storeys (6.5 metres above grade). The first storey is below the established grade which reduces the visual impact of the addition.

The residents' concerns were that the north addition was too close to the house at 63 Pelmo Crescent which remains in private ownership. The addition is proposed to have a setback of 6.5 metres and a maximum height of 6.5 metres measured from the northeast corner of the proposed addition which is the closest point to the existing house at 63 Pelmo Crescent. Shadow diagrams were done which show there is not a significant shadow impact on the house. The proposed addition maintains a similar setback from the residential property line as specified in the existing zoning by-law (20 feet - 6.1 metres).

The location and size of the north addition is appropriate provided a high level of urban design and landscaping are achieved as part of the expansion.

#### 6.1.2 Future South Addition

The south addition was proposed to contain an expansion of the existing mental health wing that is currently located at the south edge of the hospital. However, since the time of the original proposal, the hospital has determined that these facilities can be incorporated at the Finch site. The south addition proposal would still be appropriate if required in the future using the design principles of maintaining the residential character of the area and not being visually intrusive.

The south addition would extend to align with the adjacent houses on Church Street. The height of 11 metres meets the bylaw requirement in the former City of York (See Schedule "C" and "D1").

The original application had large institutional windows and strong horizontal lines. Revisions have been made to the facade design which include a sloped roof and vertical partitions which are similar to the residential lot widths. This would render the facade more in keeping with the residential streetscape.

#### 6.1.3 Parking

The following table 6.1.3 summarizes the existing and proposed parking on site.

Table 6.1.3: Parking

	Existing	Proposed
North Visitor Lot	30 Spaces (Gravel Lot)6 Spaces (Metered & Paved)	32 Spaces (Metered)
South Visitor Lot	102 Spaces (Surface)	214 Spaces (Parking Structure)
ER (Doctor)	6 Spaces	8 Spaces 3 Ambulance Spaces
North Staff Lot	163 Spaces	148 Spaces
West Staff Lot	219 Spaces	271 Spaces
Total	526 Spaces	676 Spaces

The hospital retained the BA Group to undertake a traffic impact and parking study. The City's transportation department has reviewed the BA Group's traffic and parking study and has concurred with its conclusions that there will not be parking congestion throughout the neighbourhood as a result of the restructuring as parking demand is met on-site.

Due to the increased volumes of visitors to the Humber River Regional Hospital (Church Street location) more parking is required on-site. No reliance upon on-street parking is made to accommodate future staff and visitor parking demand increases. The majority of hospital traffic comes along Church Street from Jane Street. The location of the visitor parking structure at Uphill and Church presents an opportunity to get visitor traffic off the local streets at first available point. The existing visitor lot is behind four existing houses owned by the hospital with its access from Uphill Avenue.

As there is limited possibility of providing more surface parking on site, the hospital is proposing to construct a parking garage on the existing visitor parking lot (See Schedule "C"). This will involve the demolition of the four houses fronting Church Street. The two level parking structure will have 214 parking spaces which will be constructed primarily at and below grade.

The parking garage will extend north along Uphill Avenue and gradually the P1 parking level will become buried as the grade changes. This will allow the main vehicular entrance to be maintained at grade as it extends over P1. At the north edge of the parking garage, adjacent to 52 Uphill Avenue, the parking garage will look like a surface parking area with a wall at its perimeter. (See Schedule "D3" - Parking Cross Section)

The existing access on Uphill Avenue to the visitor parking area will be relocated to Church Street. This will be a one-way in-only with the exit from the garage located at the upper P2 level on the internal road. An alternate access to the parking garage is also provided from the main access driveway opposite Woodward Avenue.

A number of issues emerged from the Working Groups with respect to the location and impact of the parking garage. The following principles were taken into account in locating and designing this structure:

- (a) create/maintain residential character
- (b) must not be visually intrusive to the surrounding neighbourhood
- (c) the edge of the hospital property must be aesthetically appealing and well maintained
- (d) reduce traffic and parking congestion throughout the neighbourhood
- (e) visitor parking entrance must be easily found and accessed

Planning staff is of the opinion that an improved design which incorporates the urban design principles set out in Appendix "A" at the east location is a better solution than moving the parking garage and compromising the principles of access and external circulation. The improved design also addresses the issue about the facade treatment of the garage.

#### 6.2 Traffic

The traffic volumes on the streets surrounding the hospital will increase as a result of the hospital expansion. However, in accordance with the transportation consultants findings as reviewed and accepted by city transportation staff, the level of operation will still be within acceptable limits. Some modifications to signal timing and pavement markings have been proposed to improve the traffic situation. Provision for these modification will be secured at the site plan stage. Church Street, Uphill Avenue and Pelmo Avenue are designated as collector roads in the Official Plan which generally accept higher volumes of traffic than local streets.

The hospital traffic is one component of the overall traffic makeup of the area. The largest volume of hospital traffic is along Church Street between Jane Street and Uphill Avenue where hospital traffic represents about 30% of the traffic. Other traffic is generated by the residents of the area and transient traffic cutting through the neighbourhood.

#### 6.2.1 Traffic Calming

Concern has been raised about traffic volume and speed of traffic as it affects quality of life in the neighbourhood. Issues such as pedestrian safety, noise, difficulty in backing out of driveways, congestion and short cutting traffic have been discussed in the Working Group meetings. These issues are longstanding concerns that should be addressed regardless of whether or not the hospital expands. Several presentations to the Working Groups and the Advisory Group have been made to illustrate the possibilities of traffic calming measures that can help to slow down traffic and improve pedestrian safety. If viable traffic calming measures are determined, then the appropriate reports will be submitted to Council for consideration.

Traffic calming can be take many forms such as raised pedestrian crossings, speed humps and bumps, medians, narrowing the pavement, traffic circles, and raised intersections for example. Traffic calming is intended to modify the geometry of a street to passively regulate speed, give priority to pedestrians and improve the look and feel of the street.

# 6.2.2 Transportation Management Demand

There are limited opportunities to try and reduce the demand for parking and the number of vehicle trips to the hospital site. This can be achieved by promoting the increase in transit usage, increase the average auto occupancy, increase other modes such as walking and bicycling, and spreading out peak hour demands to off peak hours. It has been indicated by the traffic consultant that there is greater potential for an effective strategy to be implemented for hospital staff rather than visitors. In this regard three measures have been recommended by the traffic consultant:

- adjust staff parking pricing;
- promote ridesharing and car pooling; and
- promote non-auto travel, i.e. transit and bicycle.

While the overall impact of such measures may have modest impacts on the overall demand, the hospital is encouraged to pursue the implementation of an appropriate Transportation Demand Strategy.

# 6.3 Environment

The hospital was requested by staff to submit a Phase I Environmental Site Assessment to determine if there was any soil contamination on site and if the site was suitable for the intended use. When the hospital submitted their rezoning application in February of this year, the hospital was using its incineration facilities to dispose of some of the hospital waste. As a result of concern from the residents surrounding the site, the hospital discontinued the use of the incinerator and now disposes of its garbage using compactors and shipping it to the appropriate disposal facilities.

The Phase I Environmental Site Assessment determined that an underground oil storage tank that was removed in 1992 was a potential source for soil contamination. As a result, a Phase II Environmental Site Assessment was carried out to determine whether or not soil or ground water on the property had been contaminated. The conclusion of the environmental consultants further testing and measures was that all of the soil and ground water samples comply with the current Ministry of the Environmental perspective for the proposed use. Prior to site plan approval, a peer review and a record of site condition will be required.

## 6.4 Daycare Use

City Council adopted a Temporary Zoning By-law in July 1998 to allow the hospital owned house at 180 Church Street (See Schedule "C" - Site Plan) to be used for a daycare centre for a one year period. The by-law was appealed to the Ontario Municipal Board by local residents in October 1998. Council adopted a resolution in October 1998 to request the Board to extend the period for which the by-law is to be in effect to three years. Following the hearing on December 10 and 11, 1998, the Ontario Municipal Board verbally approved the temporary use by-law for the daycare use provided a further community meeting is held to discuss the parking and drop-off areas for the daycare. Prior to site plan approval, a community meeting will be held to discuss these issues.

The existing house is to be used for a daycare with approximately 50 children. Five parking spaces would be provided on the lot with 6 staff spaces provided in the hospital staff parking lot, adjacent to the subject house.

The staff report (July 2, 1998) indicated that a daycare use at this location would be further evaluated in conjunction with the hospital expansion and rezoning. The City's transportation staff concur with the conclusions and recommendation of the traffic consultant who indicated the change in traffic volumes would be small. The change in traffic volumes beyond the immediate site environs are considered to be small since this local community facility was previously established in a nearby location along Pelmo Crescent.

The primary objective of relocating the daycare to this site was to keep a valuable community service within its existing neighbourhood. The second objective was to provide an opportunity for workplace day-care as an added service to the hospital and its staff. This type of use is normally incidental and accessory to the main hospital use and would provide a benefit to both the hospital and the community. Therefore "day nursery" is included in the range of permitted uses set out in the draft By-law amendment (Schedule "F") attached.

# 6.5 Hospital Zone

The existing site specific by-laws of both former municipalities allowed for the current built form and density on the site but made no allowance for expansion. Even minor increases to the built form of the hospital required a rezoning. The attached draft by-law allows for some flexibility for future minor building on the site, without the need to make another rezoning application. All previous site specific by-laws will be rescinded and the attached by-law is proposed to replace them.

A hospital zone has been drafted which could also be used in the new consolidated Toronto Zoning By-law when it is created. The existing houses are recognized for residential or accessory hospital uses. Other uses include day nursery, clinic, health science research laboratory, personal service shop, medical office, retail store and sanatorium. There are qualifications for some of these other uses.

Four properties on the block have not been included in the hospital zone, as they are not in hospital ownership. As a result, the adjacent hospital lands have a limited building envelope in order to protect these existing private residential uses. Should the hospital acquire these properties in future, and wish to expand further than the proposed building envelope and heights, a new application for rezoning would be required to allow an evaluation of the impact of such a proposal with a full community consultation process.

The numbers shown on Schedule HOS(3) of the draft by-law indicate the same heights as the subject proposal. Any new development on the site is required to stay within these height limits. The height of the existing hospital owned houses will remain at 2 storeys. The draft by-law allows for flexibility within the prescribed enveloped as identified by Schedule "F".

The former City of York by-laws calculate the parking requirement according to the number of hospital beds. Beds are not the crucial indicators any longer because of the major changes to health care delivery that have been made in the last few years. The more pertinent indicator is the relationship of parking spaces to gross floor area. As a result, the standard has been changed to one parking space for each 7.7 m<sup>2</sup> of gross floor area which reflects the real parking demand.

The Temporary Use By-law will not be required once the amending zoning by-law is passed for the entire hospital site, but does not need to be repealed as it will automatically cease to apply to the lands once the time period has expired.

## Conclusions:

The hospital is requesting an additional 12.5 percent increase to the existing gross floor area in two phases. Consultation with the community through information meetings and working groups has been extensive and the proposed additions have adhered to the principles adopted by the Working Groups.

The traffic and parking study has indicated that, with minor adjustments, the existing streets can accommodate the increased traffic due to the restructuring and expansion of the hospital. It is important to note that the increase in traffic is due primarily to the hospital program restructuring rather than the 12.5 percent increase in gross floor area. Even without the expansion, the traffic volumes in the area would have risen.

The new HOS(3) zoning permits the proposed development and allows for a margin of flexibility by providing an additional 1.2 percent density over the proposed gross floor area. It also protects the surrounding residential area by defining a building envelope, maximum building heights and a landscape buffer around the entire perimeter of the site. Accessory uses are also confirmed as appropriate in the main hospital building and existing house form buildings.

The proposal constitutes good planning for the site and, as such it is recommended that the application and draft zoning by-law be approved.

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# Appendix "A" – Urban Design:

It is important that the following principles also be addressed in the site plan approval:

- (a) create/maintain residential character
- (b) structure must not be visually intrusive to the surrounding neighbourhood
- (c) the edge of the hospital property must be aesthetically appealing and well maintained
- (d) traffic on internal driveways must flow safely and efficiently
- (e) internal vehicle circulation must be maximized and external vehicle circulation minimized
- (f) emergency/visitor parking and entrance must be easily found and accessed
- (g) efficient and effective emergency access must be maintained

#### North Addition:

The northern expansion's proximity to the single family homes fronting Pelmo Crescent requires particular attention to the urban design and landscaping.

Landscaping and fencing between the hospital property and the house at 63 Pelmo Crescent would lessen the impact of the proposed addition. The proposed height, setback and landscaping address the principle of the structure not being visually intrusive to the surrounding neighbourhood.

The proposed north facade was also redesigned to incorporate smaller windows and more vertical details to mimic the scale of the surrounding residential area. The second storey windows have been proposed to be high windows which preserves the privacy of the abutting residential property. These changes address the principle of creating a more residential character that recognizes the surrounding area.

## Parking Garage:

The parking garage is proposed to be constructed on the current surface lot and to replace four houses on Church Street. The Massing and Design Committee preferred the structure to have a residential scale and design elements to relate to the houses. The design was revised to keep the height of the parking garage similar to the houses across the street and use brick to mimic the material of houses.

An enhanced landscape buffer is proposed along the east and south perimeters of the parking garage on Uphill and Church Avenues. The proposed landscaping reduces the visual impact of the parking structure.

The provision of 150 additional parking spaces on site attempts to reduce the visitor and staff parking congestion throughout the neighbourhood. The largest increase in parking will be for visitors where currently there are 138 visitor parking spaces, the proposal increases this to 246 spaces. The majority of these spaces will be in the proposed parking structure. The west surface staff lot will have an additional 42 spaces. The transportation consultants have indicated that the new total of 676 parking spaces on site exceeds the Zoning By-law parking requirements and meets the projected on-site parking demand at the hospital. There is no reliance upon on-street parking to accommodate future staff and visitor parking demand increases.

The possible relocation of the parking structure was discussed by the Working Committees. The hospital was asked to look at the feasibility of relocating the garage to the west side of the hospital, with access from Pine Street. The conclusion from the hospital's consultants was that while the cost to build the structure would be the same at either location, the west side location would require extensive internal renovations to the hospital to relocate the main entrance. The alternative proposal would also require traffic to move one block further into the community.

The traffic consultants comment that the west site would be less visible and accessible than the existing east location. This west location contradicts the principles of minimizing external vehicle circulation, and ease of finding visitor parking.

Future South Addition:

The architect introduced vertical elements to the south addition, smaller scale windows and mansard roof details, all of which reflect the residential character of the street. A substantial front lawn with similar setbacks as the existing front lawns of adjacent houses needs to be maintained as green open space between Church Street and the new addition. The addition meets the principle of being less visually obtrusive as a result of the changes to the facades and the retention of a large open landscaped space.

Appendix "B" - Department Comments

The following section summarizes significant comments received from the departments and agencies circulated.

- (1) Works and Emergency Services Department
  - (a) Transportation Division

The applicant was required to submit a parking and traffic study in order to address the parking supply, traffic operations on site and on the surrounding streets, neighbourhood traffic issues and the location of visitor parking facilities. The study concluded that while the road network is experiencing high traffic volumes today, the additional traffic which will be generated by the hospital expansion can be accommodated and that the proposed parking supply was adequate. Some pavement marking and signal modifications were recommended. The Transportation Division concurs with the conclusions and recommendations of this report. A traffic calming process that had been initiated through the Working Groups will be continued in coordination with the local community and area Councillors. If viable traffic calming measures are determined to be appropriate, they will be reported on to Council.

A portion of Longview Drive is required for the north hospital expansion. The closure of Longview Drive south of Pelmo Crescent is recommended in two phases which can be initiated simultaneously. The portion of Longview Drive needed for the expansion needs to be closed prior or concurrently with enactment of the zoning by-law. This closure only involves the hospital as the sole land owner of abutting property. The closure of the remainder of Longview Drive which involves both the hospital and an abutting residential property can occur subsequent to the by-law enactment in order to provide more time to resolve any issues. If the second phase of the road closure does not occur, a cul-de-sac will be required at the end of the street to be paid for by the hospital. These comments are attached as Schedule "G".

(b) Fire

The Fire Division requires some additional information prior to the site plan approval, but does not have any objections to the rezoning application. These comments are attached as Schedules "H1" and "H2".

(c) Technical Services

The York office (District 1) has indicated that storm water drainage must comply with the Sewer Use By-law which requires an underground facility to control storm water run-off for the additional and existing paved areas. Curb and sidewalk reconstruction must be paid for by the applicant as they relate to main entry and the parking structure. These comments are attached as Schedule "I".

The North York office (District 3) has not submitted their written comments yet, but has verbally indicated they have no objections to the proposal provided that: if a cul-de-sac is required, it will be at the expense of the hospital; a sidewalk is required on the east side of Uphill Avenue at an estimated cost of \$20,000; stormwater runoff be limited to pre-envelopment conditions and some stormwater quality measures are required; an inspection manhole is required on the portion of Longview Drive at the expense of the hospital. These written comments will be made available at the public meeting.

The central Technical Services Division has indicated that adequate water and sewer facilities are available. These comments are attached as Schedule "12".

# (d) Ambulance Services

The Ambulance Services submitted detailed comments on ER access as attached in Schedule "J". The proposed driveway configuration did not provide any buffering of the private home at 52 Uphill Avenue and therefore planning staff asked the traffic consultant and the Ambulance Service staff to look at some options for the ER drop off area. The site plan as shown in Schedule "C" is an option which is acceptable to the Ambulance Division and buffering of 52 Uphill Avenue is provided. The comments on the site plan are attached as Schedule "J2".

# (2) Public Health

This department reviewed the Phase 1 Environmental Site Assessment in order to assess existing site conditions and identify environmental concerns which may impact upon the future expansion of the building. The department requires data on the quality of the ground water for the north east and west sides of the excavation from which underground storage tanks were removed, and further documentation on the PCB's from the light ballasts. Provided that the preceding conditions are met, the department has no objection to the application. These comments are attached as Schedules "K1" and "K2". Subsequent to these comments, a Phase II Environmental Site Assessment has been submitted. A peer review and record of site condition will be required prior to site plan approval.

(3) Parks and Recreation

There are no park land dedication requirements. These comments are attached as Schedule "L".

(4) Utilities

Hydro (York) has indicated that services for the site will need to comply with Hydro's Terms and Regulations of Supply. The site is also serviced with a Customer-Owned Transformer Facility. Costs for its modifications shall be funded by the proponent. Specifications of drawings to be submitted at Site Plan Approval stage are outlined. These comments are attached as Schedule "M1".

Enbridge Consumers Gas has indicated that some gas services will need to be relocated prior to construction. These comments are attached as Schedule "M2".

Bell Canada has no objections to the plan, however if conflicts with facilities arise the owner shall be responsible for rearrangements or relocation. These comments are attached as Schedule "M3".

Schedule "A" – Official Plan Map

Schedule "B" – Zoning Map

Schedule "C" – Site Plan

Schedule "D1" – Elevations East & South

Schedule "D2" – Elevations West & North

Schedule "D3" - Parking Cross Section

Schedule "D4" – North & South Addition Cross Section

Schedule "E" – Landscape Plan

Schedule "F"

Authority: Planning and Transportation Committee Report No.\_\_ Clause No.\_\_ , as adopted by Council on \_\_\_\_\_. Enacted by Council:

# CITY OF TORONTO

Bill No.

# **BY-LAW No.**

# To amend City of North York Zoning By-law 7625 and City of York Zoning By-law 1-83 for 200 Church Street

WHEREAS authority is given to Council by Section 34 of the Planning Act, R.S.O. 1990, c.P. 13, as amended, to pass this By-law; and whereas Council of the City of Toronto has provided adequate information to the public and has held at least one public meeting in accordance with the Planning Act;

The Council of the City of Toronto HEREBY ENACTS as follows:

- 1. Schedules "B" and "C" of By-law 7625 are amended in accordance with Schedule 1 of this by-law.
- **2.** District Map 3 of By-law 1-83 is amended in accordance with Schedule 1 of this by-law.
- **3.** Section 64.44 of By-law 7625 is amended by adding the following subsection:

64.44(3) HOS(3)

## DEFINITIONS

- (a) For the purpose of this exception, "Gross Floor Area" shall mean the total area of all floors, measured between the outside of the exterior walls of the building at the level of each floor, but excluding:
  - (i) any part of the building used exclusively for the accommodation of mechanical equipment necessary to physically operate the building such as heating, ventilation, air conditioning, electrical, plumbing, fire protection and elevator equipment;
  - (ii) car parking areas within the building including that contained in an above-grade parking structure.

## PERMITTED USES

(b) In addition to the uses permitted in the HOS zone, the following use is also permitted:

Single family dwelling

#### **USE QUALIFICATIONS**

- (c) Accessory Buildings accessory to the single family dwellings shall be subject to the requirements for accessory buildings in R zones.
- (d) A day nursery is not required to be associated with the hospital.

# **EXCEPTION REGULATIONS**

(e) Gross Floor Area

The maximum gross floor area shall be 85% of the lot area.

- (f) Yard Setbacks
  - (i) The yard setbacks shall be as shown on Schedule HOS(3)
  - (ii) Single family dwellings may only be permitted within the Building Envelopes B as shown on Schedule HOS(3).
  - (iii) A parking structure may only be located within Building Envelope C as shown on Schedule HOS(3).
  - (iv) All other uses permitted may only be located in Building Envelopes A and B.
  - (v) Parking kiosks may be located anywhere on the site except in any landscaped area required in clause (h).
- (g) Building Height
  - (i) The height of any portion of the buildings shall not exceed the heights shown on Schedule HOS(3).
  - (ii) Notwithstanding (i), the height of any portion of the building or structure shall not exceed the horizontal distance between the building and structure, or portion thereof and an abutting R4 zone.

- (iii) The parking structure height shall not exceed the height shown on Schedule HOS(3).
- (h) Landscaping
  - (i) A minimum distance of 3.0 metres from all lots lines that abut a street shall be landscaped except for drop off areas and driveways entering and exiting from the lot directly onto the street.
  - (ii) A minimum distance of 13.0 metres from the most westerly lot line defined as  $N17^{\circ}54'10''W$  shall be landscaped.
  - (iii) Despite (i) above, buildings located within Building Envelopes B may encroach into the required landscaped areas.
- (i) Parking

A minimum of 1 space per 7.7  $m^2$  of gross floor area of the hospital shall be provided on site.

- **4.** Section 16(249) of By-law 1-83 is amended by deleting the subsection and replacing it with the following:
  - 16(249) LANDS EAST OF PINE STREET AND NORTH OF CHURCH STREET

## DEFINITIONS

- (a) For the purpose of this exception, "Gross Floor Area" shall mean the total area of all floors, measured between the outside of the exterior walls of the building at the level of each floor, but excluding:
  - (i) any part of the building used exclusively for the accommodation of mechanical equipment necessary to physically operate the building such as heating, ventilation, air conditioning, electrical, plumbing, fire protection and elevator equipment;
  - (ii) car parking areas within the building including that contained in an above-grade parking structure.

(b) Permitted Uses

The following are the only uses permitted:

- accessory use; clinic; day nursery; detached dwelling house; hospital; health science research laboratory; medical office; nursing home; parking lot; retail store.
- (c) Use Qualifications
  - (i) A clinic, health science research laboratory, nursing home, medical office, and retail store are permitted, if
    - (A) they are located on the same lot as the hospital.
    - (B) they are in association with a hospital on the same lot.
  - (ii) A retail store is permitted if
    - (A) it is located in a building used primarily as a hospital
    - (B) the aggregate area of a retail store located in all buildings is limited to 10% of the area of the storey directly accessible from the ground level at the base of a building at its main public entrance.
  - (iii) Accessory Buildings accessory to the detached dwelling house shall be subject to the requirements for accessory buildings in set out in Section 7.

## **EXCEPTION REGULATIONS**

(d) Gross Floor Area

The maximum gross floor area shall be 85% of the lot area.

- (e) Yard Setbacks
  - (i) The yard setbacks shall be as shown on Schedule HOS(3).

- (ii) Single family dwellings may only be permitted within the Building Envelopes B as shown on Schedule HOS(3).
- (iii) A parking structure may only be located within Building Envelope C as shown on Schedule HOS(3).
- (iv) All other uses permitted may only be located in Building Envelopes A and B.
- (v) Parking kiosks may be located anywhere on the site except in any landscaped area required in clause (g).
- (f) Building Height
  - (i) The height of any portion of the buildings shall not exceed the heights shown on Schedule HOS(3).
  - (ii) The parking structure height shall not exceed the height shown on Schedule HOS(3).
- (g) Landscaping
  - (i) A minimum distance of 3.0 metres from all lots lines that abut a street shall be landscaped except for driveways and drop off areas entering and exiting from the lot directly onto the street.
  - (ii) A minimum distance of 13.0 metres from the most westerly lot line defined as N17°54'10"W shall be landscaped.
  - (iii) Despite (i) above, buildings located within Building Envelopes B may encroach into the required landscaped areas.
- (i) Parking

A minimum of 1 space per 7.7  $m^2$  of gross floor area of the hospital shall be provided on site.

5. Section 64.13 of By-law 7625 is amended by adding the following subsection:

64.13(54) R4(54)

(a) Permitted Uses

In addition to the uses permitted in the R4 zone, a school of nursing and a nurses' residence shall be permitted.

- (b) Exception Regulations
  - (i) The school of nursing and nurses' residence buildings shall be set back a minimum distance of 18.5 metres from the westerly lot line.
  - (ii) The school of nursing and nurses' residence shall be set back a minimum distance of 12.1 metres from the northerly lot line.
  - (iii) The maximum height of the nurses residence shall be 10 storeys.
  - (iv) The maximum height of the school of nursing shall be 2 storeys.
- **6.** Section 64.44 of By-law 7625 is amended by adding Schedule HOS(3) attached to this by-law.
- 7. Section 16(249) of By-law 1-83 is amended by adding Schedule HOS(3) attached to this by-law.
- 8. By-laws 28538, 25569, 21789, 11620 which amended North York By-law 7625 are hereby repealed.
- **9.** By-laws 1766-73, 1792-73, 1736-74, 1936-74, 3213-79, 4234-82 which amended York By-laws 1-83 and 1000 are hereby repealed.

ENACTED AND PASSED this day of , A.D. 1998

Mayor

City Clerk

Schedule "HOS(3)" to By-Law

Schedule "1" to By-Law

# Schedule "G"

# (Memorandum dated November 16, 1998 from the Director, Transportation Services – District 3, addressed to the Director, Community Planning – North District)

#### Introduction

The site is located on Church Street, west of Jane Street. As a result of the Health Restructuring Commission, Humber River Regional Hospital (HRRH) is required to expand the existing Church Street site. The expansion includes: two building additions  $(5,150m^2 \text{ GFA})$  to the existing hospital (37,400m<sup>2</sup> GFA); an expansion of the staff parking on the west side of the building by 50 parking spaces; a new 214 parking space two-level parking structure for visitors at the south east corner of the lot; and a new access from Church Street to serve the parking structure and main entrance to the building. As well, the hospital is undertaking internal renovations, and some external site modifications to the parking areas and parking aisles.

The application includes lands which are not currently in the ownership of the hospital, namely, a portion of Longview Drive road allowance which is a dedicated public highway in the ownership of the City (former City of North York).

The hospital is situated such that the southern half of the site is located within the former City of York and the northern half is within the former City of North York.

## Traffic Impact Study

A report entitled "Humber River Regional Hospital, Church Campus, Traffic and Parking Study", prepared by BA Consulting Group Ltd., dated September 1998, was submitted in support of the application. The traffic report indicates that with the expansion to the hospital, the net traffic increase in the a.m. peak period will be 155 two-way trips bringing the morning peak hour to a total of 535 two-way trips, and in the p.m. peak, there will be 165 two-way trips bringing the afternoon peak hour to a total of 560 two-way trips.

In general terms, the report concludes that while the road network is experiencing high traffic volumes today, the additional traffic which will be generated by the hospital expansion can be accommodated. Through the course of the consultant's study, several improvements on the local roads were identified which could assist with current traffic operations. These improvements are not directly associated with the hospital expansion.

- "- modify the pavement markings on Church Street at Jane Street to provide for a 60m rather than 30m of designated separation between motorists making left turns and motorists making through/right turns from Church Street to Jane Street;
  - consider providing more green time for the eastbound approach on Church Street in order to minimize queuing along Church Street; and

- upgrade the pavement marking and signage at the intersections of Uphill Drive with Pelmo Crescent, with Woodward Avenue and with Church Street and, in particular, the pedestrian crossing treatment."

The report also indicates that Transportation Demand Management (TDM) measures and Traffic Calming initiatives could improve the local roadway operations.

This Division has reviewed the report and technical appendices, and concurs with the conclusions and recommendations.

# Parking

The proposed on-site parking supply is 676 parking spaces of which 246 parking spaces are proposed for visitor use. The parking supply exceeds the By-law requirement, however, as noted in the consultant's report, the parking supply is estimated to be the relative parking demand for the hospital site.

To augment the proposed on-site parking supply, on-street metered parking could be located along Church Street, Woodward Avenue and Pine Street. The current parking meter supply is about 40 meters but this total will be reduced with the implementation of a new hospital access from Church Street.

## Access

Currently, the hospital site has several accesses from the surrounding streets. The following is a list of current access locations:

- (a) Uphill Avenue has two access points. The northerly access is the primary access to the hospital and serves the main entrance, ambulance entrance and visitor parking areas. The southern access serves the south visitor parking lot.
- (b) Church Street has one access primarily to the south receiving area.
- (c) Pine Street has one access which serves the staff parking lot.
- (d) Longview Drive has two accesses which serve the staff lots and the north receiving area.

As well, the hospital has a temporary access at 5 Queenslea Drive where staff park at the vacant building.

It is proposed in the application to remove the southern access on Uphill Avenue and introduce a one-way inbound access from Church Street on the east side of the building. The one-way inbound driveway would serve as a secondary access to the main access on Uphill Avenue. The new access would result in the removal of a number of on-street parking meters.

# Loading

The hospital site has two distinct loading areas on the north and south sides of the building. The loading operations and truck routes are not anticipated to change significantly with the expansion.

# Day Care

An independently operated day care facility is proposed by the hospital at 180 Church Street. The day care is anticipated to accommodate 50 children and day care staff parking can be accommodated within the hospital staff parking lot. The driveway to the property, which takes access from Pine Street, is to be re-designed as a circular driveway to better accommodate the pick-up/drop-off activity, and would likewise require the removal of a number of on-street parking meters on Pine Street. Details with respect to site layout have not been provided at this time.

# Traffic Calming

As noted in the consultant's report, the traffic volumes in the area around the hospital, especially on Church Street, are relatively higher than the traffic volumes associated with roads within a community setting. During the public consultation process, various traffic calming measures were illustrated. The purpose of traffic calming is to attempt to change the driver behaviour on a particular road system which should result in the overall reduction of speed. The speed of traffic appears to be the principal concern of the area community.

Traffic calming is typically carried out with the installation of physical modifications to the roadway and while its implementation is not directed to reduce traffic volumes, a successful traffic calming program will alter the street in a manner that drivers will drive more slowly and consequently this may have the indirect impact of reducing transient traffic.

A traffic calming process has been initiated by the City in co-ordination with the local community and HRRH. If viable traffic calming measures are determined, then the appropriate reports will be submitted to Council for consideration.

## Transportation Demand Management (TDM)

The consultant's report indicates that TDM measures could reduce traffic impacts and parking demands associated with the hospital's staff. The benefits of any TDM measures designed to reduce work-home based trips and Church Campus-Finch Campus trips are encouraged. It is recommended that a TDM plan be formulated by the hospital.

## Woodward Avenue Extension

The extension of Woodward Avenue to Jane Street has been raised at several public meetings. This suggestion is not a viable option since Woodward Avenue was originally closed at Jane Street for safety reasons at the time when the ramps from Highway 400 extension ramps were being constructed. This section of Jane Street to the intersection of Church Street is under the control of the Ministry of Transportation (MTO). This is to ensure the safe operation of the ramps which usually extend up to 365 metres from a highway interchange. Woodward Avenue is approximately 60 metres south of the ramps terminals which is too close to introduce a new intersection.

# Road Closures

The expansion of the north side of the hospital building requires a portion of Longview Drive to be closed and sold to the Hospital. However, the Hospital has expressed its desire to only acquire that portion (approximately 16 metres or 50 feet in depth) necessary for the expansion.

Longview Drive south of Pelmo Crescent functions as a principal access to the hospital and a secondary access to the residential property known as 67 Pelmo Crescent.

Given that all municipal services and public utilities within the road allowance serve only hospital related properties, the remainder of the road between Pelmo Crescent and the hospital needs, is no longer required for municipal purposes. Therefore, it would appear that it would be in the City's best interest to close the entire section of Longview Drive.

Recognizing that the northern section of Longview Drive is not required for the immediate needs of the hospital, the full closure of the roadway could be achieved in two sections, for which both processes would be initiated simultaneously. The first being the southern portion of the road allowance required for the hospital expansion which could proceed concurrent with the enactment of the site specific zoning By-law, as no other land owners are involved. The second section would be the northern portion of the road allowance.

Should the closure of the latter section of the road not proceed, then it should be terminated in an appropriate turning circle to allow road maintenance services to occur.

In addition, the survey supplied with the application indicates a portion of Woodward Avenue east of Pine Street and a portion of Woodward Avenue west of Uphill Avenue which should have been closed as road allowances in the past, and are being used solely by the hospital for a parking area and access. The closure of these sections of road allowance must be initiated to enable the sale of these lands to the hospital.

## **On-Street Parking Meters**

With the implementation of the new Church Street access and the circular driveway for the daycare centre building, several parking meters need to be removed. The applicant is required to contact the Toronto Parking Authority to determine the number of parking meters to be removed and the remuneration required.

## Site Plan Issues

After reviewing the revised site plans, this Division has the following comments:

(a) All parking spaces reserved for the disabled must be signed and marked in accordance with By-law No. 31770.

- (b) The loading/servicing, ambulance and emergency doctor's parking areas must be signed and marked as such to prevent parking in these areas.
- (c) A detailed signage plan is required for the entire site.
- (d) A sidewalk is required on the west side of Uphill Avenue between the hospital entrance and Pelmo Crescent.
- (e) All work on the municipal road allowance (curb-cuts, boulevard restorations, utility relocations, sidewalks, etc.) must be undertaken to the satisfaction of the Commissioner of Works and Emergency Services, and at no cost to the City of Toronto.

Recommendation

Therefore, it is recommended that approval of this application be subject to the following:

- (a) that the appropriate road closure procedures be initiated in accordance with Council policy, namely:
  - (i) the closure of Longview Drive south of Pelmo Drive;
  - (ii) that portion of Woodward Avenue east of Pine Street; and
  - (iii) that portion of Woodward Avenue west of Uphill Avenue.
- (b) that the site plan requirements as noted above have been addressed.

Further, the City will undertake a review of the roadway improvements as suggested by the applicant's transportation consultant and described in the Traffic Impact Study, and also, we will continue to work with the Ward Councillors to finalize the development of a Traffic Calming program for the area, in consultation with the Community.

Schedule "H1"

(Memorandum dated October 28, 1998, from Inspector/Plan Examiner, City of Toronto Fire Services -North Command, addressed to Planning Department)

The following information is required to conduct a complete review of the proposed development. A revised site plan showing the following:

(1) clearly mark existing and proposed fire hydrants, (both public and private) to comply with O.B.C. 3.2.5.7.;

- (2) existing and proposed Fire Department connections to comply with O.B.C. 3.2.5.5. and 3.2.5.16.;
- (3) identify the proposed Fire Access Routes; and
- (4) Locate the Fire Alarm Annunciator and Control Panels.

The above-noted information can be dealt with at the Site Plan Control Process.

Schedule "I"

(Memorandum dated March 25, 1998, from the Director of Professional Services, York Civic Services Centre, addressed to the Commissioner of Development Services)

We are in receipt of your memo of March 6, 1998 with regards to the above-noted application.

The proponent has not submitted any drawings showing how the site will be served. If storm water is drained to the York district, the proponent needs to comply with the Sewer Use By-law which requires underground facility to control storm water run-off for the additional paved area plus the existing paved area.

The proponent is required to apply to the operations Services Department and pay for the cost of reconstructing the existing curb and sidewalk affected by the application, namely the main entry to the proposed above and below grade open parking structure.

Schedule "K1"

(Memorandum dated March 11, 1998, from the Public Health Department, North York Civic Centre, addressed to the Acting Commissioner of Planning and the Commissioner of Development Services)

Environmental Health staff have reviewed the above-mentioned application to amend the zoning by-law to permit the expansion of hospital facilities by a total of  $5,160 \text{ m}^2$ . The proposal is to expand and re-configure the existing emergency and diagnostic services, ambulatory care and outpatient facilities and the construction of an above and below grade open parking structure.

The site is bounded by Church Street to the south, Pine Street and Dalbeattie Avenue to the west, Queenslea Avenue and Pelmo Court to the north and Uphill Avenue to the east.

We have no objections to this proposed application provided that:

- An environmental site assessment is completed in accordance with the MOE's Guideline for Use at Contaminated Sites in Ontario, revised February 1997. The environmental size assessment should identify any significant potential environmental liabilities at the site that may have resulted due to the historical usage of the site (garbage incineration) and to identify any present conditions or practices that may represent a materially significant environmental risk.

If you require further information, please contact George Matsumura, Senior Public Health Inspector, Healthy Environments, at 395-0306.

Schedule "K2"

(Memorandum dated May 29, 1998, from the Public Health Department, North York Civic Centre, addressed to the Director of Community Planning)

Environmental Health staff have reviewed the above-mentioned application to amend the zoning by-law to permit the expansion of hospital facilities at 200 Church Street.

The site is bounded by Church Street to the south, Pine Street and Dalbeattie Avenue to the west, Queenslea Avenue and Pelmo Court to the north and Uphill Avenue to the east.

On behalf of Humber River Regional Hospital, Angus Environmental Limited (AEL) was hired to carry out a Phase I Environmental Site Assessment (ESA) in accordance with the substance and intent of the current CSA Standard Z768-94. The purpose of the investigation was to assess the existing site conditions from an environmental perspective and to identify the presence or possible presence of potential environmental concerns which might impact upon the future expansion of the building.

Based on that review and the supporting documentation, we offer the following comments.

AEL provided an assessment of the environmental liability based on information that was available from public records on the historical land use of the property, aerial photographs and site and building audits. Based on the AEL report and the Waste Disposal Inventory published by the MOE, no active or closed waste disposal sites are located within two kilometres of the subject site. Inventories of coal gasification plants and industrial sites where coal tar was produced to used list no sites of this type located within two kilometres of the subject site.

## Recommendations

With respect to the MOE Guidelines for Use at Contaminated Sites in Ontario, revised February 1997, we offer the following comments based on the review of the AEL report:

- USTs were removed and approximately 209 tonnes of contaminated soil and 600 gallons of oil and water was removed off site. After backfilling, a single borehole was advanced at one location outside the perimeter of the excavation. One confirmatory soil sample for BTEX and TPH was taken from the borehole and did not reveal any soil contamination. As only the south side of the excavated area was analysed, this Department recommends that similar data be made available for the north, east and west sides of the excavation. In addition, data should be made available to review the quality of the ground water in this area.
- Documentation should be provided by the applicant stating that the light ballasts that contain PCBs being stored in an unregistered PCB storage site have been properly disposed. In addition, documentation should be provided stating whether the hospital intends to discontinue the use of the incinerator and the method presently used by the hospital for the safe storage of incinerator ash.
- This Department believes that it is not unreasonable for the City to receive an opinion in writing as to whether the property is suitable for the proposed redevelopment.

Conclusion

Provided that the conditions as set out in the Recommendations are met, this Department has no objections to this proposed application.

Schedule "M1"

(Communication dated March 27, 1998, from the Consumer Service Manager, Toronto Hydro-Electric Commission, addressed to the Commissioner of Development Services, North York Civic Centre)

In response to our letter dated March 9, 1998, and attached plans, we offer comments as follows:

- the service for this site will comply with the terms of our "Conditions and Regulations of Supply"; and
- this site is serviced with a Customer-Owned Transformer Facility. All costs to modify this facility for increased loads or new needs shall be funded by the proponent.

Drawings submitted at Site Plan require conceptual details and space provisioning in order to ensure that York Hydro's needs are not compromised. These drawings have the following deficiencies:

- proximity of structures to existing primary lines, (5 meter clear envelope required);
- duct bank routings;
- electrical rooms;
- easement requirements; and
- meter locations.

We urge the Consultants/Architects of this project to resolve these outstanding issues early in the plan processing. Our Jerry Mirka, Manager of Engineering would be pleased to assist.

# Schedule "M2"

(Communication dated December 9, 1998 from the Supervisor-Drafting, Distribution Operations Expansion, Enbridge Consumers Gas, addressed to the Planning Department, North York Civic Centre)

We have indicated on the attached print our existing and/or proposed underground plant.

Please arrange with Dave Forgie at 249-5082 to arrange a site meeting for relocation of gas service prior to construction. Our standard clearances of 0.3m minimum vertically and 0.6m minimum horizontally must be maintained.

We trust this information is satisfactory for your records.

Schedule "M3"

(Communication dated March 31, 1998, from Manager – Right of Way, Bell, Mobility, addressed to the Planning Department, North York Civic Centre)

Thank you for your letter of March 9, 1998 concerning the above zoning amendment.

Please be advised:

(1) We have no objections to this proposed plan as submitted.

If there are any conflicts with existing Bell Canada facilities or easements, the Owner/Developer shall be responsible for re-arrangements or relocation.

If you have any questions, please contact: Janusz Starszyk 234-4613.

The Planning and Transportation Committee also had before it the following material, which was forwarded to all Members of Council with the agenda of the Planning and Transportation Committee for its meeting of November 29, 1999, and copies thereof are on file in the office of the City Clerk:

- Appendices "A", "B", and "C" appended to the report (November 4, 1999) from the Acting Commissioner of Urban Planning and Development Services;
- Notices of Community Meetings being held at Pelmo Park Community Centre, York Civic Centre Council Chambers and York Civic Centre Council Chambers, appended to Appendix "D" of the report (November 4, 1999) from the Commissioner of Urban Planning and Development Services;
- Schedules "H2", "I2", "J", "J2", "L", "N" and "O" appended to the report (December 18, 1998) from the Commissioner of Urban Planning and Development Services;
- memorandum (November 10, 1999) from the Director, Community Planning, North District, Urban Planning and Development Services, submitting 1998 and 1999 Meeting Minutes of the Advisory Committee Meetings, Community Meetings, and Working Group Meetings;
- the following communications which were also before the Urban Environment and Development Committee at its January 11, 1999 meeting:
  - (November 30, 1999) from Councillor Sgro, addressed to the President and C.E.O., Humber River Regional Hospital, requesting the Humber River Regional Hospital to undertake a review of the programming/services that are planned for the Church Street Site;
  - (2) (December 24, 1999) from Mr. Sam Gildharry objecting to the zoning By-law to permit additions to the south east existing hospital Church Street Site for a two storey parking garage;
  - (3) (undated) from Ms. Florence Nightingale advising that the hospital's restructuring proposals are devaluating the nearby residential properties;
  - (4) (December 29, 1998) from J.M. Darvill, P.Eng., opposing the Application for a variety of reasons;
  - (5) (December 29, 1998) from Ms. Myrna and Mr. Jim Geldart opposing the proposal to permit additions;
  - (6) (January 4, 1999) from the Manager, Development Services, North District, outlining details of municipal services in the area;
  - (7) (January 4, 1999) from Mr. Sam Gildharry opposing the amendment of the Zoning By-law to permit additions;
  - (8) (undated) from Mr. J. Doyle objecting to the Zoning By-law because of increase of pollution and traffic;

- (9) (undated) from Jack and Carole Doyle objecting to the Zoning By-law because of traffic congestion and disturbance of the quiet neighbourhood;
- (10) (undated) from E. Windsor protesting the reconstruction and addition of a parking garage;
- (11) (January 7, 1999) from Carley R. Sala, Weston Ratepayers and Residents Association, opposing the application for a variety of reasons; and
- (12) (January 11, 1999) from Councillor Sgro outlining the issues identified by the community Working Committee on the impacts the proposed redevelopment will have on their neighbourhood;
- (November 15, 1999) from Sam Gildharry opposing the amendment to the Zoning By-law;
- (November 12, 1999) from Noreen Lloyd objecting to the amendment of the Zoning By-law;
- (November 15, 1999) from Jay Doyle objecting to the amendment of the Zoning By-law;
- (November 21, 1999) from C.R. Sala objecting to the amendment of the Zoning By-law;
- (November 21, 1999) from C. R. Sala, Corresponding Secretary, Weston Ratepayers and Residents Association, advising that the Association passed a motion to oppose the Final Recommendation Report – Zoning Amendment Application for Humber River Regional Hospital, Church Street Site;
- (November 15, 1999) from E. Windsor objecting to the Humber River Regional Hospital's request to amend the By-law;
- (November 17, 1999) from C.M. Stickley, Secretary, York Federation of Ratepayers Associations Inc., advising that the York Federation of Ratepayers Association opposes any additions to the York Finch and Humber River Regional Sites;
- (November 19, 1999) from Myrna F. Geldart commenting on the traffic problems in the area and raising several questions regarding the application;
- (undated) from Carlos Da Silva voicing his displeasure on the proposed expansion of Humber River Hospital Church Street Site;
- (November 21, 1999) from John and Betty Cullen and residents expressing their concerns about the proposed additions being planned;
- (November 25, 1999) from James M. Darvill forwarding a communication from Kay Baker dated February 2, 1998, addressed to The Honourable Elizabeth Witmer, Minister of Health, expressing concerns about the quality of health care in the community and opposing the Zoning By-law Application for a number of reasons;

- (undated) from Joan Tipple expressing concerns about vehicular traffic, pollution and parking in the community and opposing the Zoning By-law Application;
- (November 25, 1999) from James M. Darvill submitting photographs and a communication opposing the Zoning By-law Application for a number of reasons;
- (undated) from Florence Nightingale expressing concerns about vehicular traffic and parking in the community and opposing the Zoning By-law Application;
- (November 21, 1999) from J.H. Thompson suggesting proposed changes be made to the Northwestern Site;
- (undated) from Jacqueline Bradshaw expressing concerns about traffic congestion and parking;
- (November 29, 1999) from Dalius Butrimas objecting to the proposed zoning amendment; and
- Petition signed by 405 signees, filed by Andrew Kaschuk, requesting that the proposed expansion of the Humber River Regional Hospital-Church Street site be halted until an investigation into the economic viability of the expansion and a community environmental and social impact study has been completed by an independent consultant.

The following persons addressed the Committee in respect to this matter:

- Rueben Devlin, President, Humber River Regional Hospital advised that he was present to talk about the hospital's rezoning application in order to proceed with plans for the addition to the emergency department and trauma room;
- Barbara Collins, Vice-President, Planning and Support Services, Humber River Regional Hospital advised that the hospital was formed in 1997 as a result of a voluntary merger and the goals of the restructuring are to enhance amenities to the community and added that the aim was to provide the best possible health care and that one of the first construction programs was to create a larger emergency department;
- Frank Lewinberg, Principal/Partner, Urban Strategies Inc. explained that there would be an extension to the south side of the hospital; and a two storey parking structure;
- Tony Yates, Principal, BA Consulting Group advised that he was retained by the hospital to assist them in preparing their rezoning application and had also been involved in attending committee meetings;
- Dalius Butrimas objected to the rezoning application and expressed the residents' concerns with traffic congestion and the proposed construction of a two-storey garage which does not fit with the character of this unique neighbourhood;

- Andrew Kaschuk provided a history of the neighbourhood and expressed objection to the potential increased traffic, noise pollution and potential reduction in safety for school children as well as potential devaluation of properties;
- Jim Darvill provided a map and history of the neighbourhood and filed a petition opposing the application and expressed his and the residents' objection to the rezoning application;
- Professor Leon King objected to the rezoning application and cited traffic concerns in the neighbourhood;
- Michael McDonald requested that consideration be given to the residential character of the neighbourhood and that the matter be deferred or that the public be given sufficient protection from future expansion;
- Jacqueline Bradshaw expressed the residents' concerns regarding traffic congestion, the inappropriateness of traffic calming measures and school children's safety;
- Marguerite Darvill objected to the rezoning application and advised that the extent of the hospital expansion would have a major impact on the community, and anticipated traffic chaos for some years;
- Mario Gentile requested deferral of the rezoning application based on the residents' concerns and on insufficient information on funding of road improvements, and raised concerns over inadequate parking for hospital staff; and
- Helen N. Lepone requested that the natural landscape of the neighbourhood remain unchanged and emphasized the inappropriateness of building a two-tier garage.

(City Council on December 14, 15 and 16, 1999, had before it, during consideration of the foregoing Clause, the following communications expressing concerns in regard to the zoning amendment application with respect to the Humber River Regional Hospital:

- (*i*) (December 1, 1999) from Ms. Helen N. Lepone;
- (ii) (November 29, 1999) from Mr. Jim Darvill, P. Eng., Pelmo Park Community Resident and Home Owner; and
- (iii) (December 3, 1999) from Mr. Michael J. McDonald.)