

Clause embodied in Report No. 9 of the Humber York Community Council, as adopted by the Council of the City of Toronto at its meeting held on June 18, 19 and 20, 2002.

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**Final Report - 82, 130, 160 and 162 Dunn Avenue,
and 9-17 Close Avenue; Application To Amend the Official Plan
and Zoning By-law No. 438-86 of the (former) City of Toronto
Toronto Rehabilitation Institute
(Parkdale-High Park, Ward 14)**

(City Council on June 18, 19 and 20, 2002, adopted this Clause, without amendment.)

The Humber York Community Council, based on the findings of fact and conclusions and for the reasons that the proposal is an appropriate use of lands, recommends the adoption of the Final Report (May 17, 2002) from the Director, Community Planning, South District, subject to the following:

- (1) That the Toronto Rehabilitation Institute be requested to maintain the exterior and the properties of 82 Dunn Avenue and 1 to 17 Close Avenue, and to take all necessary steps to rehabilitate the vacant houses, in conjunction with the community, for affordable housing or similar use;
- (2) That the Site Plan include a rehabilitation program for the existing housing on the south side of the site;
- (3) That the maintenance of the landscaping on the residential properties to the south owned by the hospital, be incorporated into the regular maintenance program of the hospital;
- (4) That a community public meeting be held regarding the final details of the site plan, prior to its approval;
- (5) That the siting of the building and other refinements be further reviewed during the site plan process;
- (6) That the replacement of the existing playground be also reviewed during the site plan process; and
- (7) That provision (4) in the Draft Zoning By-law (Attachment 8) be amended by adding the following words at the end "...and the depth of the existing public hospital at 130 Dunn Avenue shall be permitted as it existed on the date of the passing of this by-law;" to read as follows:

“(4) the depth of the proposed building may not exceed 54 metres and the depth of the existing public hospital at 130 Dunn Avenue shall be permitted as it existed on the date of the passing of this by-law;”

The Humber York Community Council reports for the information of Council, having:

- (i) held a statutory public meeting on June 4, 2002 and that notice was given in accordance with the Planning Act; and
- (ii) received the communication from Mr. Ross Waddell and Ms. Buffy Jeffs.

The Humber York Community Council submits the following Final Report (May 17, 2002) from the Director, Community Planning, South District:

Purpose:

This report reviews and recommends approval of an application to amend the Official Plan and the Zoning By-law for a four-storey Long Term Care building and the maintenance of the Queen Elizabeth Hospital at 130 Dunn Avenue, a day care at 160-162 Dunn Avenue, as well as three detached houses and one pair of semi-detached houses which are on one lot.

Financial Implications and Impact Statement:

There are no financial implications resulting from the adoption of this report.

Recommendations:

It is recommended that City Council:

- (1) amend the Official Plan for the former City of Toronto substantially in accordance with the draft Official Plan Amendment attached as Attachment No. 7;
- (2) amend the Zoning By-law No. 438-86 for the former City of Toronto substantially in accordance with the draft Zoning By-law Amendment attached as Attachment No. 8;
- (3) authorize the City Solicitor to make such stylistic and technical changes to the draft Official Plan Amendment and draft Zoning By-law Amendment as may be required; and
- (4) at least three weeks prior to the introduction of the Bills in Council require the Owner to:
 - (a) submit to the Commissioner of Works and Emergency Services, a Reference Plan of Survey in metric units and referenced to the Ontario Co-ordinate System and delineating thereon PARTS of the lands under the application and any appurtenant rights-of-way for preparation of legal descriptions; and

- (b) submit to the Commissioner of Works and Emergency Services final approved drawings of the development with sufficient horizontal and vertical dimensions of the exterior walls of the proposed buildings to enable the preparation of building envelope plans.

Background:

Proposal

The applicant is proposing to construct a 6,660 m² Long Term Care Facility with 128 beds within the north-west quadrant of the site. The proposed four-storey building will flank Close Avenue. The primary entrance to the building is proposed at its south-east corner, internal to the site. The proposal also contemplates alterations to the parking areas and access/loading arrangements serving the existing hospital in order to accommodate the new building. The application was received on October 29, 2001 and circulated for staff comment.

Site and Surrounding Area

The 33,025 m² site is located half a block south of King Street West. It covers a large part of the block between Dunn Avenue and Close Avenue. The site includes a daycare facility at the north end and a four-storey hospital at the south end. Between these two buildings is a large surface parking lot and an extensive area devoted to private open space. This portion of the site contains a number of mature trees, lawns and gardens that provide amenity for residents of the hospital and the community.

Access to the hospital loading areas is located along the south edge of the site. South of the hospital site, the Toronto Rehabilitation Institute owns two detached homes and a pair of semi-detached houses on Close Avenue, as well as one detached house on Dunn Avenue.

Official Plan

The Official Plan designation for the site is Low Density Residence Area. This designation permits residential uses with a maximum density of 1.0 times the area of the lot.
Zoning By-law No. 438-86, as amended

The site is zoned R2 Z1.0. This zoning category permits a variety of residential uses up to 1.0 times the area of the lot. The height limit for the entire site is 10.0 metres.

Site Plan Control

An application for Site Plan review was submitted to the City and will be the subject of an Undertaking.

Reasons for Application

The applicant is proposing amendments to the (former) City of Toronto Official Plan Part I and Zoning By-law No. 438-86. The proposed use is not allowed by the Official Plan or the R2 zoning. The height of the proposed building exceeds the 10-metre height limit by approximately 4 metres. The Zoning By-law requires a minimum front lot line setback of 4.9 metres and the proposal is 4.0 metres. The building has a depth that exceeds the standard that would normally apply under the R2 zoning and more than one building is being proposed to be either erected or maintained on a single lot.

Community Consultation

The Toronto Rehabilitation Institute has been consulting with area residents, the local City Councillor, and City staff about the proposed development of the Long Term Care Facility site since last summer. Provincial funding was awarded in May 2001 and the application was submitted on October 29, 2001. Three community information meetings were held to discuss development options prior to submission of the application. Since then a further information meeting was held on November 26, 2001. A community consultation meeting was held on March 18, 2002. Approximately 15 residents attended the information meeting and 40 residents attended the community consultation meeting.

Agency Circulation

The application was circulated to all appropriate agencies and City Departments. Responses received have been used to assist in evaluating the application and to formulate appropriate by-law standards.

Comments:

Built Form

The building proposed for the north end of the site has been massed along the Close Avenue frontage in order to reinforce the streetscape created by the existing houses to the north and the school to the west. The building's location also allows the retention of a significant amount of landscaped open space within the site. The location of the building was discussed with area residents as part of the Institute's consultation program. Planning staff requested modifications to the west elevation of the building to improve its relationship to this section of Close Avenue. The applicant's architect responded with 3 three-storey window bays that will break up the massing of the building. Further, in response to planning staff's request, the applicant's architect proposed contrasting colour brick, on the window bays, that will highlight the residential character of the building.

The floor plans were modified to allow for the location of the activity rooms at the south-west corner of the building on all floors and access from the ground floor to an outdoor patio adjacent to Close Avenue.

Sun and Shadowing

Shadow studies were requested by both the adjacent residents at 111/119 Close Avenue and City staff. The shadow studies for June 21 and September 21/March 21 were submitted and reviewed by City planning staff. The June 21 Summer Solstice studies show no impact on the adjacent properties to the north for the morning and afternoon. The September 21/March 21 Equinox studies show rear yard shadowing for early to mid-morning, but no shadowing on the adjacent rear yards from noon to late afternoon.

Overlook and View Impacts

Concerns were raised by the adjacent neighbours on Close Avenue and King Street West about the impacts of overlook and loss of views. To respond to the overlook impact of the proposed building on the adjacent neighbours, the north sideyard setback has been increased from 5.2 metres to 7 metres, and additional landscaping has been provided. In addition, the architect for the hospital has proposed to recess the north-west corner of the building in order to allow for increased views for the nearest house on Close Avenue. To respond to the King Street West residents concerns about views and overlook, the hospital agreed to have a photograph taken from the rear yard of the house on King Street West and insert a simulated model of the proposed building and enhanced landscaping. The photograph demonstrates the limited impact on the current views and very little degree of overlook.

Parking

The Long Term Care Facility will maintain the existing hospital parking count of 204 spaces. A parking study was requested by City staff to monitor the current parking capacity and determine future needs. The hospital's traffic consultant determined that the existing and future needs could be met with the existing parking facility. In order to reduce the impact on on-street parking the fees charged for parking are quite low and a number of spaces are rented out to the Queen Victoria School on Close Avenue.

The hospital has agreed to remove the temporary truck parking area on the hospital's receiving driveway as requested by Works and Emergency Services and by adjacent residents.

Site Access

Concerns were raised regarding increased traffic in front of the existing school on Close Avenue due to the new building. After discussions with City staff, the applicant has responded by introducing a new exit from the parking lot on Close Avenue and a two-way driveway on Dunn Avenue. This will allow traffic to exit the main parking lot northbound on Dunn Avenue or southbound on Close Avenue and avoid the need to drive around the block and in front of the school as is presently the case.

Parking Lot Landscaping

The landscape treatment of the parking lot edge will be improved by the planting of additional shrubs to screen the existing parking. Further shrub planting will be introduced along

Close Avenue. The elevation of the parking lot above the sidewalk will enhance the effectiveness of the proposed landscaping. The hospital has also agreed to provide additional tree planting along the south parking area, behind the proposed shrubs, as requested by City staff.

Existing Houses

The Toronto Rehabilitation Institute owns a number of houses located to the south of the existing hospital. These houses had been purchased over time to provide flexibility for the future development of the site. Several of the houses are rented. Most of the houses require renovation and maintenance. This was discussed with the hospital and it was agreed that the houses' external appearance would be maintained better and yard maintenance would be undertaken more frequently. The hospital also agreed to a split zoning on the site to maintain the existing houses in the current R2 zoning, although initially they were being considered for future demolition to allow expansion of the institutional uses.

Conclusions:

The Queen Elizabeth Hospital has served the city and the community by providing chronic and rehabilitative care for the past 120 years. The Long Term Care Facility proposed for the north end of the site will provide an expanded continuum of care for the community.

Extensive pre-consultation with the local community and the City has taken place, which has led to a site plan that addresses the major concerns raised by the neighbourhood and City staff. The new building should fit well into the residential character of Close Avenue. The pedestrian and vehicular access points and parking provisions will continue to limit traffic and parking problems for the local community.

Maintaining most of the existing open space on the site and increasing landscaped buffer areas will help in providing an attractive site that also serves a day-care facility with expanded park play space.

Contact:

Barry Brooks, Planner, West Section

Tel: (416) 392-0758, Fax: (416) 392-1330; E-mail: bbrooks@city.toronto.on.ca

(The Attachments 1 to 5 referred to in the foregoing report were forwarded to all Members of the Humber York Community Council with the agenda for its meeting on June 4, 2002, and copies are on file in the office of the City Clerk, York Civic Centre.)

The Humber York Community Council also had before it during consideration of the foregoing matter, a letter (May 31, 2002) from Mr. Ross Waddell and Ms. Buffy Jeffs, indicating their opposition to the proposal.

The following persons appeared before the Humber York Community Council in connection with the foregoing matter:

- Mr. Ross Waddell - commented on the concerns expressed in his communication dated May 31, 2002; advised of his opposition to the proposal as this long-term care facility would be detrimental to the neighbourhood and the area properties; that the proposed building is taller and has a larger footprint than any of the other buildings on the block; that there will be a considerable shadowing on the properties situated to the north and would be obstructing the view and gardens that have been there for a long time; the corner of King Street West and Close Avenue is already congested with a few daycare centres, a church and the largest public elementary school in Canada; that traffic from the Gardiner Expressway and the Lakeshore regularly use King Street West as an alternate route to the City; that this will be a new building with residents, visitors and staff who will generate even more traffic; at King Street West and Close Avenue vehicles are double parked and hundreds of children compete for sidewalk space several times a day; that there will also be a loss of mature trees that would take decades to replace; that the parkette at the south end of the building was promised to the community in a deal with the City over ten years ago; this parkette is one of the few safe and closed-in parks in the area and is enjoyed by adults and children; that the new building proposal includes replacing this parkette with a parking lot which would increase traffic, fumes and noise; Dunn Avenue is closed to trucks between Springhurst Avenue and King Street West yet the long-term facility intends to use this route for deliveries; that on-street parking in this area has always been an issue for the residents without driveways or garages creating frustration for permit holders who are unable to find parking due to visitors and staff of the hospital occupying these spaces are a daily occurrence since the other alternative is paid parking on the hospital grounds; that the facility currently consists of three-storey buildings setback from the street on both Dunn Avenue and Close Avenue by several metres and works well with the community because of the beautiful surrounding gardens and the imposing view from the street; that the proposed building does nothing to blend in or appeal to the community where the population density is already higher than other wards; that there are already 12 long-term facilities in south Parkdale; that the Institute has made an attempt to keep the community apprised of its plans and were initially asked for input regarding the potential site location; believed that this decision was made based on cost prior to the community being involved; was advised of a follow-up meeting which has not yet taken place; that notification of today's meeting was not even mailed to other residents who attended the community meetings; although the Toronto Rehabilitation Institution enjoys an excellent reputation, recent bad publicity in regards to extended care in Canada raises many concerns for the future of this venture; that the facility should be turned 90 degrees so that the long end of the building runs parallel to Close Avenue, that underground parking should be required in order to preserve the parkette; that the houses that the hospital owns at the south end of Close Avenue should be upgraded and retained; that a four-storey building would completely block their backyards and obstructing their second floor view of trees and the lake.

- Ms. Munce – expressed concerns regarding the housing aspect; indicated agreement with the idea of underground parking; that this was stated at the community meeting; approves with the proposal for these houses which are important to the fabric of the neighbourhood; supports the split zoning as the priority is to have this nursing home operational; that the homes at Nos. 1 and 3 Close Avenue are presently vacant urged the City to address the housing issue.

- Richard Marshall – advised of his support for the split zoning to accommodate the existing houses, the maintenance and external appearance; for a number of years there has been questions regarding this long-term care facility; encouraged the Toronto Rehabilitation Institute and the City to look beyond the external appearance of the houses and work together to secure future housing; they serve a wide cross-section of residents, there are families, seniors, persons with disabilities, two hospitality houses that offer supportive housing to people in crisis and transition; that this is a vibrant part of south Parkdale and we would like to see this built on; there are a lot of people in community with a wealth of skills and work experience and a real willingness to work on such projects.

- Mr. Mark Rochon, President and CEO of the TRI – provided background information on the history of the facility which is the largest in Canada; they operate on five sites across the City and are fully affiliated with the University of Toronto; that they specialize in adult rehabilitation and complex continuous care and recently were successful in being granted a licence from the Ministry of Health in long term care to build and operate a 128 bed facility on a portion of the property at 130 Dunn Avenue; Extendicare with more than 30 years experience in Ontario has been contracted to operate this facility on their behalf with opening scheduled for 2004; last summer four consultation meetings were held with the community, patients, families and staff, in addition to participating in one City hosted consultation this past Spring; that information gathering from the community was very important during this process; there were three options with designs, landscaping features, entrances/exits, parking, traffic and other issues and encouraged the community to share their suggestions and concerns; in particular, as part of the process, the TRI visited individually with the neighbours to discuss their specific concerns and will incorporate as many suggestions as possible into the site plan; they also met with representatives from the Queen Victoria School and their own child care centre, Sunflower House, to listen to their issues and to respond to their concerns; a special telephone line and an email address have been dedicated; and also produced and distributed to the community a newsletter about the project; at their first consultation meeting three different options were presented and based on all the feedback a preferred option was developed; have worked closely with City staff during this process to respond to and balance solutions related to some of the specific issues and concerns that were heard from the community; these included maintaining the houses they own, preserving as much green space as possible, traffic, parking and resolution of the existing loading facilities at the hospital; there is a need for this type facility in this area of the City as identified by the Ministry of Health; there is an increase in the proportion of aging residents requiring the services they provide; and residents would benefit from such a facility and other health care services located close to their homes.

- Jim Prince – has lived in the neighbourhood for 15 years; is opposed to the project as the density and multi-buildings in south Parkdale is already excessive; the area bounded by Dufferin Street to Jameson Avenue and Queen Street West to Springhurst Avenue is one of the highest density in the City; the community doesn't need any more; the increase in vehicles will only add to the existing traffic congestion and parking; at the last public meeting all traffic was actually routed on Close Avenue and only recent changes in the report show that traffic will actually be coming up Dunn which is currently restricted to trucks; the proposal calls for the elimination of the neighbourhood's circle park, the space just south of the existing building; this park has been used by families and TRI residents for many years; south Parkdale has a severe shortage of green space and removing this valuable asset is unacceptable; that there is an agreement between the City and TRI regarding the circle park being a neighbourhood park which was made a number of years ago in exchange for permission to remove residential housing stock owned by the hospital; this agreement needs to be made public prior to proceeding with any approval; early this year there was a community meeting on Dunn Avenue, in March there was one at the TRI facility and consultation has been good to this point, however there was a commitment from City staff to hold another public meeting with the final drawings to be arranged by the architect showing the building and layout of the parking lot; this meeting has not taken place; that there hasn't been adequate public input and the proposal should not be approved; the siting of the building is an issue and a low-rise facility in this area would be more appropriate; knows from personal experience that the service provided by the hospital is excellent; has noticed a reduction in hospital management staff and a complete elimination of specific neighbourhood and local community initiatives aimed at integrating the TRI activities with the community; this has increased lately with the application for the proposal.

Attachment 7

Draft Official Plan Amendment

By-law No. ____-2002

To adopt an amendment to the Official Plan for the former City of Toronto
respecting lands known as 130, 160 and 162 Dunn Avenue
and 9, 11, 13, 15, and 17 Close Avenue

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

1. The text and map annexed hereto as Schedule A are hereby adopted as an amendment to the Official Plan for the former City of Toronto.

2. This is Official Plan Amendment No. _____.

ENACTED AND PASSED this _____ day of _____, 2002.

Deputy Mayor

City Clerk

Schedule A to By-law No. _____-2002

1. Section 18.____ of the Official Plan, for the former City of Toronto is hereby amended by adding the following Section 18.____ and the attached Map 18.____;

18.____ Lands known as 130, 160 and 162 Dunn Avenue

Notwithstanding any of the provisions of this Plan, Council may pass by-laws applicable to the lands known as 130, 160 and 162 Dunn Avenue and delineated by heavy lines on Map 18.____, to permit the erection and use of a nursing home, convalescent home or rest home, home for the aged, a day nursery, a public hospital and uses accessory thereto.

2. Section 18.____ of the Official Plan, for the former City of Toronto is hereby amended by adding the following Section 18.____ and the attached Map 18.____;

18.____ Lands known as 9, 11, 13, 15, and 17 Close Avenue

Notwithstanding any of the provisions of this Plan, Council may pass by-laws applicable to the lands known as 9, 11, 13, 15, and 17 Close Avenue, and delineated by heavy lines on Map 18.____, to permit parking, loading and access to serve the uses permitted in Section 18.____, in addition to the uses permitted in the Low Density Residential designation (Section 12.2).

Attachment 8

Draft Zoning By-law Amendment

By-law No. _____-2002

To amend the General Zoning By-law No. 438-86 of the former City of Toronto
With respect to lands known as 130, 160 and 162 Dunn Avenue
and 9, 11, 13, 15, and 17 Close Avenue.

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

1. None of the provisions of Sections 6(1)(a), 6(3) Part II 2(ii) and 5, 6(3) Part IX 1(a) and (b), 4(2)(a) of By-law No. 438-86, being "A By-law to regulate the use of land

and erection, use, bulk, height spacing of and other matters relating to buildings and structures and to prohibit certain uses of lands and the erection and use of certain buildings and structures in various areas of the City of Toronto”, as amended, shall apply to prevent the erection and use of a *nursing home, convalescent home or rest home, home for the aged, a day nursery, a public hospital* and uses *accessory* thereto on the lands municipally addressed as 130, 160 and 162 Dunn Avenue, and as shown on Map 1 attached to and forming part of this By-law, provided:

- (1) the *height* above *grade* of each building does not exceed 15 metres;
- (2) a minimum of 200 *parking spaces* is provided for the *nursing home, convalescent home or rest home, home for the aged, day nursery* and *public hospital*.
- (3) no part of each building above *grade* used for said uses extends beyond the area outlined by heavy lines shown on Map 2;
- (4) the depth of the proposed building may not exceed 54 metres;
- (5) Notwithstanding any provisions to the contrary, lands known as 130, 160 and 162 Dunn Avenue shall be treated as a single lot for zoning purposes, notwithstanding any consolidation or division of the same and the internal lot lines shall not be construed to be lot lines of the purposes of any zoning regulations, provided all applicable regulations of this By-law relative to all of the lands and there external lot lines are observed.

2. None of the provisions of Sections 6(1)(a), 6(3) Part II 1, and 6(3) Part IX 1 (a) and (b) of By-law No. 438-86, being “A By-law to regulate the use of land and erection, use, bulk, height spacing of and other matters relating to buildings and structures and to prohibit certain uses of lands and the erection and use of certain buildings and structures in various areas of the City of Toronto”, as amended, shall apply to prevent the erection and use of the lands municipally addressed as 9, 11, 13, 15 and 17 Close Avenue, as shown on Map 3, for parking, loading and access to serve the adjacent lands municipally addressed as 130, 160 and 162 Dunn Avenue.

3. For the purposes of this By-law, each word or expression which is italicised shall have the same meaning as the said word or expression has for the purposes of By-law No. 438-86, as amended.

ENACTED AND PASSED this _____ day of _____, 2002.

Deputy Mayor

City Clerk

Location Map

