

GEORGE STREET REVITALIZATION

Project Overview

OCTOBER 2015

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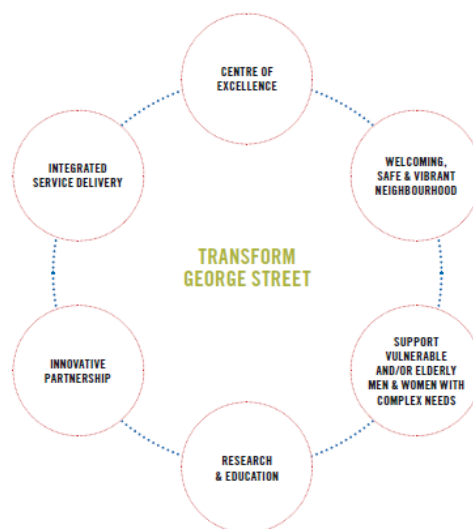
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1.0 PROJECT VISION & MISSION

Vision

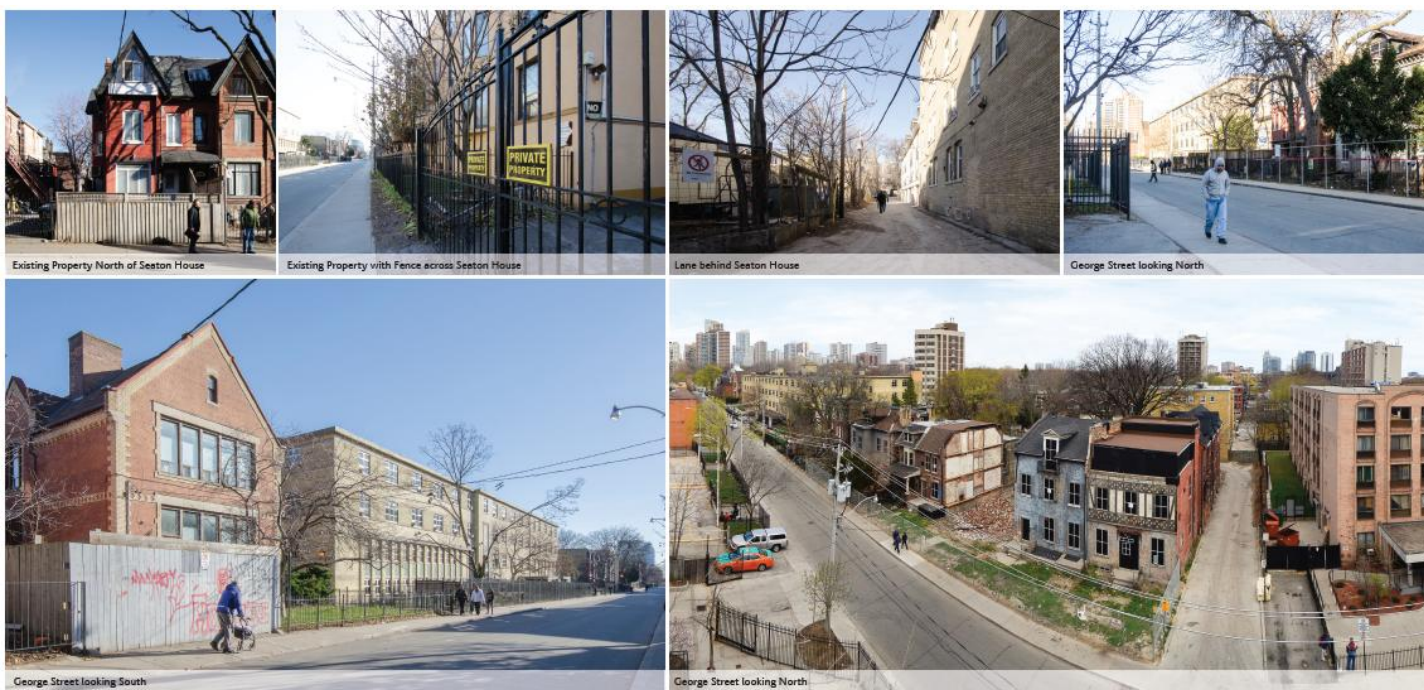
The project vision is to create a centre of excellence that promotes new approaches to integrated service delivery and exemplifies innovative partnerships, research and education. George Street will be transformed with a dynamic range of housing, programs and services to meet the unique and complex needs of homeless, vulnerable and elderly individuals in our community. The physical design of the buildings and the way services are delivered will intentionally create a more welcoming, safe and vibrant neighbourhood for all.



Mission

The project mission is to provide a dynamic range of housing, shelter, long-term care and community services in the downtown east that will offer integrated and specialized programs and services through a new model in order to meet the needs of the local community, including vulnerable individuals and elderly men and women with complex needs. Refer to Appendix 1 for the project organization structure.

Transformation of George Street



George Street Today

2.0 STRATEGIC POLICY ALIGNMENT

The George Street Revitalization (GSR) project supports many of the City's strategic policies as well as two recent Provincial strategic policies. These are:

a. Council's Strategic Plan

- i. **Social Development** – The project responds to the needs of some of Toronto's most vulnerable residents by providing a range of services and accommodations, including affordable housing. The holistic, community-based model will break down barriers and create a safe, inviting and inclusive neighbourhood.
- ii. **Economic Vitality** - The George Street project will establish a social procurement process for the demolition and construction in order to offer employment opportunities to men and women living in the shelter system.
- iii. **Environmental Sustainability** - Buildings will comply with the Toronto Green Standard and will be targeting Leadership in Energy and Environmental Design (LEED) Silver certification.
- iv. **Good Governance** – By breaking down silos between City service providers, a common vision shapes the creation of a continuum of care and a more efficient way to provide services in collaboration with community partners.
- v. **Fiscal Sustainability** - The project offers opportunities for cost avoidances and once operational, the site will implement a range of energy-efficient and environmentally-friendly systems.
- vi. **City Building** - This project exemplifies city building by addressing the needs of both vulnerable citizens and the local community. Heritage properties will be respected and restored, celebrating their role as holders of a collective memory. The site will create opportunities for diverse populations to interact in safe spaces that will also invite formal and informal partnerships with other agencies.

b. SSHA Strategic Directions

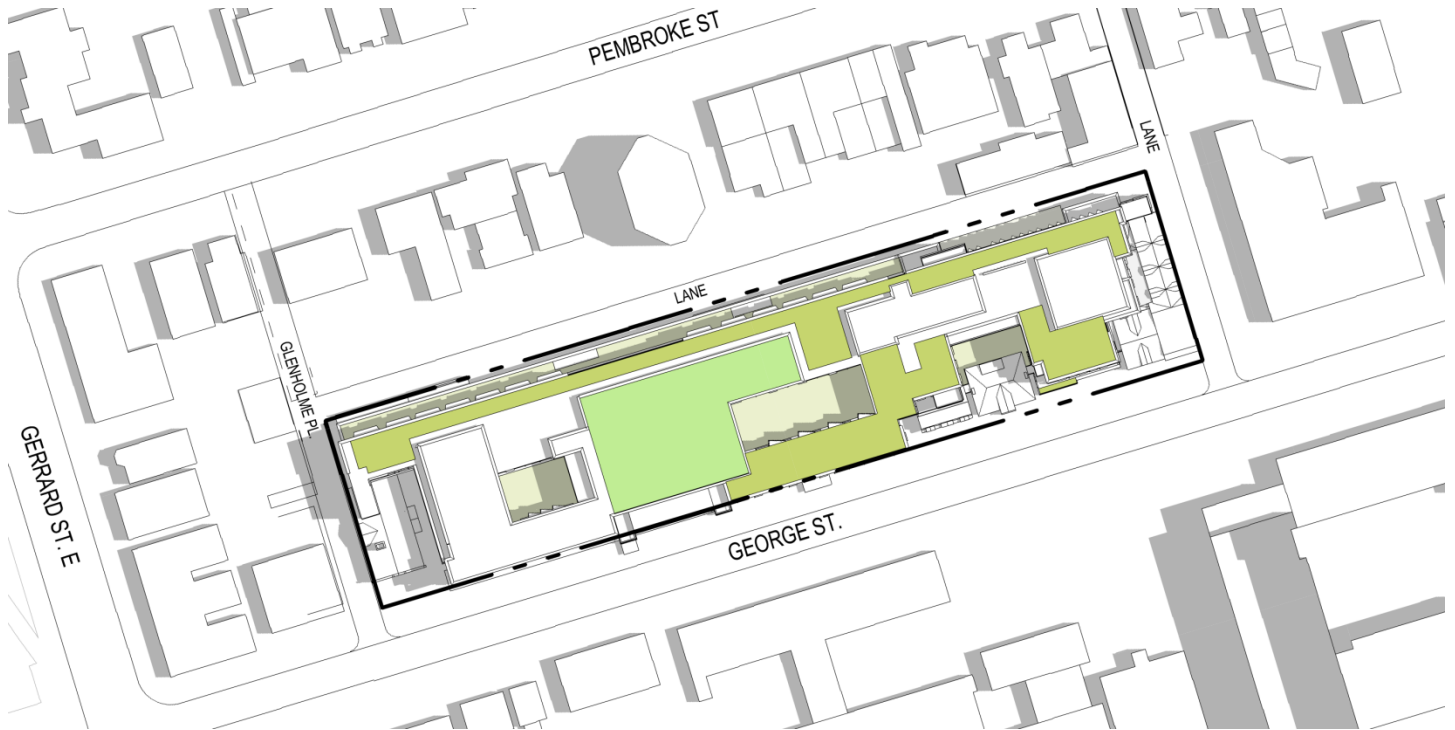
On August 5, 2009, City Council adopted An Affordable Housing Action Plan 2010-2020. In December 2013, City Council adopted the 2014-2019 Housing Stability Service Planning Framework. <http://app.toronto.ca/tmmis/viewAgendaItemHistory.do?item=2013.CD25.10>

GSR will implement strategic directions of these two fundamental policy documents by:

- Engaging clients, community agencies and leaders, and staff in program and design planning;
- Redeveloping one of the city's oldest shelters;
- Delivering high quality service in a model based on best program and design practices;
- Fostering innovation in partnerships with other City divisions and community service partners through an overall common vision;
- Transforming the service system away from one primarily focused on emergency responses to homelessness;
- Supporting the transition to on-site housing; and
- Practicing a harm reduction approach across the entire redevelopment.

c. LTCHS Strategic Direction

The GSR project will advance the LTCHS mission, vision and strategic directions, particularly for the identified goals: (a) to respond to emerging community needs and serve vulnerable populations; and (b) to influence positive outcomes for Toronto's communities and the broader health system through our leadership and expertise.



Site in Context

d. Other Key City Policies

(1) *The Interim Poverty Reduction Strategy*

On July 7, 2015, City Council adopted *TO Prosperity – Interim Poverty Reduction Strategy*. The report sets a vision for our city, lays out objectives for the long-term fight against poverty and proposes ways to act on it now. Access to housing stability, community-based programs and 'local incubators' for employment will be realized through the GSR.

<http://app.toronto.ca/tmmis/viewAgendaItemHistory.do?item=2015.EX7.2>

(2) *Toronto Seniors Strategy*

On May 7, 2013, City Council adopted the *Toronto Seniors Strategy, Towards an Age-Friendly City*. The strategy presents service planning principles for an age-friendly Toronto to guide future decisions regarding funding priorities and service improvements. The GSR will include community space in the long-term care home and responds to the recommendation for a new model designed to assist older adults that use substances or have mental health and/or behavioural issues. <http://app.toronto.ca/tmmis/viewAgendaItemHistory.do?item=2013.CD20.1>

(3) *Toronto Strong Neighbourhoods Strategy 2020*

On March 5, 2012, Council adopted the *Toronto Strong Neighbourhoods Strategy (TSNS) 2020*. The vision of TSNS 2020 is to ensure that all Torontonians have equitable opportunities for well-being, regardless of the neighbourhood they live in.

<http://app.toronto.ca/tmmis/viewAgendaItemHistory.do?item=2012.CD10.3>

(4) *Healthy Toronto by Design*

On October 17, 2011, Toronto's Board of Health adopted *Healthy Toronto by Design*, addressing Toronto's role in fostering a healthy and prosperous city. GSR exemplifies collaboration among City divisions and community partners to respond to the challenges faced by the city and its residents. <http://app.toronto.ca/tmmis/viewAgendaItemHistory.do?item=2011.HL8.1>

(5) *Downtown East (DTE) Revitalization Action Plan* (cited in the report's Decision History)

The interdivisional approach to the DTE Action Plan and GSR will ensure that both initiatives move forward in a manner that is coordinated, holistic and responsive to community needs. GSR will be a major catalyst for the redevelopment of the downtown east area.

<http://app.toronto.ca/tmmis/viewAgendaItemHistory.do?item=2014.CD31.12>

(6) *Comprehensive to the Core: Planning Toronto's Downtown*

GSR will continue to support the historic role of downtown as an inclusive place for vulnerable populations, addressing the challenges of income inequality and contributing to an integrated planning framework and infrastructure growth strategy. The City is setting an example with the strong conservation approach recommended for the heritage properties.

<http://app.toronto.ca/tmmis/viewAgendaItemHistory.do?item=2014.TE32.47>

e. Province of Ontario's Renewed Poverty Reduction Strategy

In May 2015, the provincial government released its updated poverty reduction strategy (PRS) titled, *Realizing Our Potential: Ontario's Poverty Reduction Strategy (2014-2019)*. The policy and program directions presented in PRS align closely with the City's *Housing Stability Service Planning Framework*.

f. The Premier's Community Hub Framework

The new Premier's Community Hub Framework Advisory Group will review provincial policies and develop a framework for adapting existing public assets to become community hubs. Both the City and Province recognize hubs as a critical place-based strategy to deliver services and programs more efficiently to local residents. The George Street Revitalization will contribute to such an outcome.

3.0 STAKEHOLDER ENGAGEMENT

A 'stakeholder universe' was identified in the early stages of the project. This ever-evolving document was further developed into a communications and engagement plan and strategy. A broad range of stakeholders, both internal and external to the City, have been engaged in a variety of ways and have collectively shaped the program and design into a single, common vision. These stakeholders, in particular the clients and staff with their service partners, also provided input into the transition plan for Seaton House clients. See the Stakeholder Universe, Appendix 2. A project website was set up in 2014 www.toronto.ca/newgeorge as was a dedicated mailbox newgeorge@toronto.ca.

Discussions with service partners and the community began in early 2012 in order to test the concept of a redeveloped George Street. During an 18-month process leading to the July 2013 Council report, close to 400 people were either interviewed individually or participated in focus groups including Seaton House clients, former clients and staff, other City staff, 33 partner agencies, non-profit housing providers and other organizations. For a list of organizations consulted during that time, refer to Appendix 3.

The City Planning division formed the North George Street Working Group (NGSWG) in November 2012 in response to direction from City Council to form a George Street working group in relation to the Downtown East Planning Study. The NGSWG met six times from November 2012 to April 2013, at which time City Planning concluded its lead. The purpose of the NGSWG was to bring together public and private stakeholders to engage in a conversation about issues along George Street. Membership included private property owners, representatives from the Jenny Green Co-op and Metro Toronto Condominium Corp 558, public land owners, City staff and the local City Councillor. The group continues to meet on a quarterly basis and is convened by the local City Councillor.

In approving the GSR project in principle in July 2013, Council directed staff to establish an advisory group. The GSR Stakeholder Advisory Group (SAG) held its first meeting in April 2014 and to date has met six times. Membership includes current and past residents of Seaton House, representatives from CUPE Local 79 including those working at Seaton House, service partners, representatives from local residents' groups and businesses, and other stakeholders. The local councillor has two representatives on the group. Refer to the group's Terms of Reference in Appendix 4.

Beginning in 2011, several public meetings were held for the Downtown East Planning Study within the context of the Downtown East Revitalization Strategy. These sessions were well attended by local residents as well as community agencies and other interested people. Project staff were present at the meetings and were able to offer brief presentations on the status of the project and/or respond to questions.

City staff were invited to and attended meetings of the two residents' associations: the Garden District Residents' Association and the Cabbagetown South Residents' Association. A presentation was also made to the Community Police Liaison Committee. The GSR functional planner and architects were involved in a number of consultations with a variety of stakeholders

3.0

STAKEHOLDER ENGAGEMENT

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from December 2014 to June 2015. This was an opportunity for direct input into program and design development. Another round of sessions was held with Seaton House clients and staff in April 2015 and again with clients in July and August 2015.

A community open house was held in the George Street neighbourhood in June 2015. Over 85 people attended. Storyboards were on display and City and project staff were on hand.

There were three dedicated avenues of input into the concepts for the community service hub. The GSR Stakeholder Advisory Group focused on the community hub at two of its meetings. A special focus group was held with area and interested service partners. Finally, in the spring of 2015 a broad community consultation process was undertaken in the downtown east area with the support of a third party consultant to assess gaps and needs for the downtown east neighbourhood. The community consultation confirmed some City assumptions about the service hub and also raised additional areas for future investigation. The results were shared with the Stakeholder Advisory Group. The report is now online (<http://www1.toronto.ca/City%20Of%20Toronto/Shelter%20Support%20&%20Housing%20Administration/Article/George%20Street%20Revitalization/GSR%20DTE%20Presentation%20to%20Stakeholders%20May%202015.pdf>) and will inform the process for further development of the hub. Based on the consultation, the service hub program offers a list of preferred concepts and spaces to guide the design process.



Stakeholder Meeting on Public Realm



Client Presentation



Stakeholder Meeting on Public Realm

Stakeholder Engagement Sessions

CUPE Local 79 executive members have been invited to a meeting with City staff to discuss GSR developments as they may affect staff. These meetings will continue. City staff at Seaton House and Castlerview Wychwood Towers have also been involved as required and will continue to be kept up to date.

Health sector partners are key stakeholders for the services currently provided in the area and those anticipated in the GSR. These partners are well represented in the Stakeholder Advisory Group through the Toronto Central Local Health Integration Network (TC-LHIN) and Toronto Central Community Care Access Centre (TC-CCAC). Also represented on the SAG are current health providers at Seaton House, the Inner City Family Health Team (ICFHT) and Inner City Health Associates (ICHA).

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STAKEHOLDER ENGAGEMENT

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Two consultations were held with health sector service partners to discuss how services would be provided in the GSR, in particular to the clients in the transitional assisted living program. Health partners also considered how services can continue to be delivered during the transition phase of the project when Seaton House clients are relocated into various new smaller shelters. These discussions continue at various levels. Refer to Appendix 5 for a list of health sector partners that have been engaged in the project.

The Toronto Alliance to End Homelessness (TAEH) is an association of individuals representing organizations with an interest in ending homelessness and providing the needed housing, housing support, and health and employment/training services. TAEH serves in an advisory capacity to the SSHA division and met with staff in August 2015 to review the key directions the staff report was taking and to offer any further advice.

Project staff have been diligent to keep other City divisions abreast of developments and have arranged meetings with relevant project consultants. Two open houses were held for City staff in 2015. City divisions that have been involved in the first stage of this project are listed in Appendix 6.

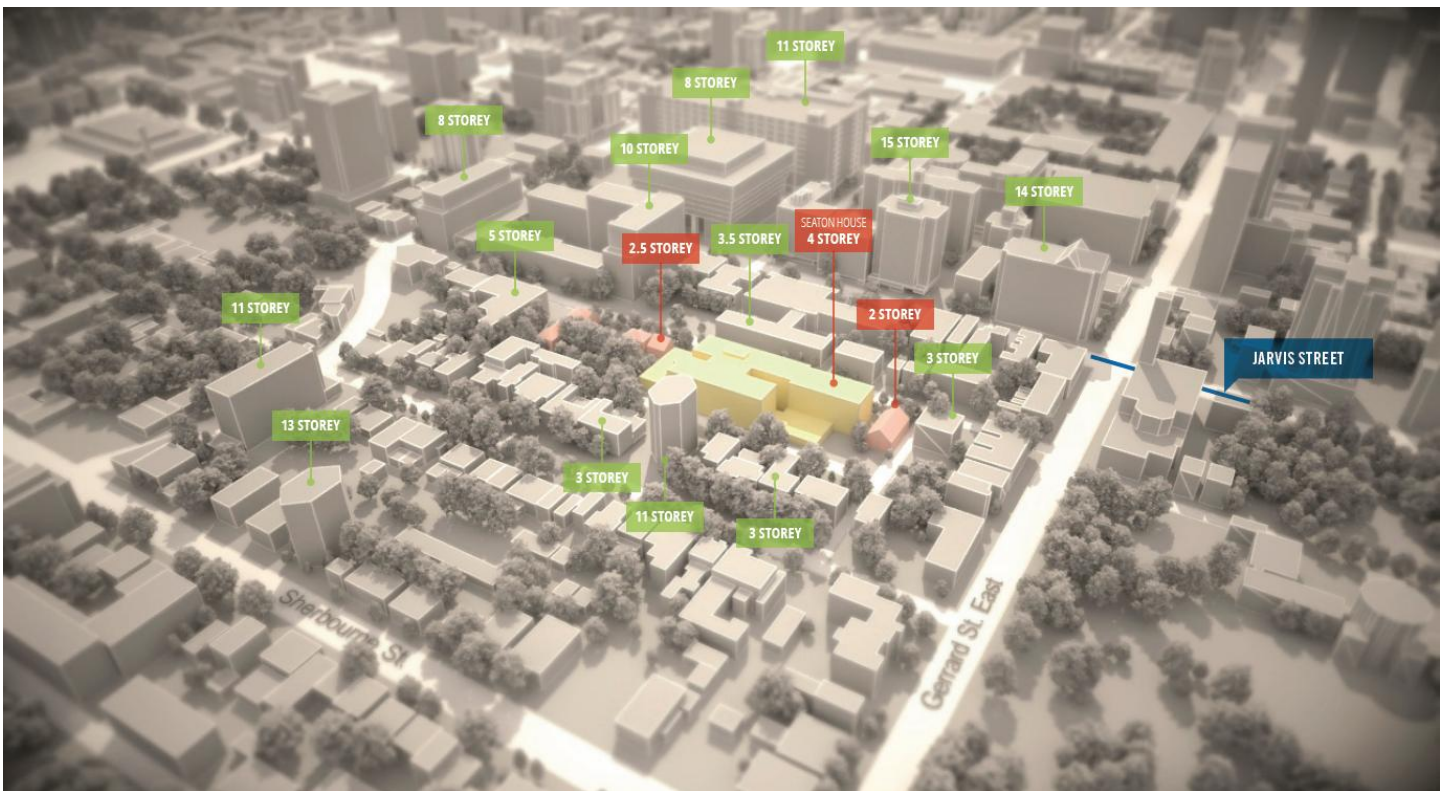
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THE SITE AND AREA

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4.0 THE SITE AND AREA

The proposed project is on George Street between Gerrard Street East to the north and Dundas Street East to the south. George Street is located in the Garden District in downtown Toronto and is also part of the Moss Park neighbourhood, one of City’s most animated, diverse and dense communities with a historic role as an inclusive place for vulnerable populations. This district contains a range of institutional, commercial and office buildings, as well as a diverse mix of housing, and has been the subject of several recent planning efforts. The Garden District is surrounded by various other neighbourhoods: to the west are Downtown and the Discovery District, to the north is the Church and Wellesley neighbourhood, to the east is Cabbagetown and Regent Park, and to the south is the St. Lawrence neighbourhood. Directly to the west of the proposed site is Ryerson University, a dynamic and growing post-secondary institution and just east of this district is Regent Park which is undergoing a massive revitalization. Refer to maps of the area which can be found in Attachment 5 of the staff report and Appendix 9 of this document.



Site in Context

The project site is 1.923 acres in size on the east side of George Street and is surrounded by three laneways (north, east and south sides). It includes the current Schoolhouse (349 George Street, built in 1886 and currently serving as a shelter) which is not on the City of Toronto’s inventory of heritage properties but has been flagged as worthy of preservation and will also be incorporated into the project.

5.0 PROGRAMS AND SERVICES

Program Development

In November 2013, City staff began to explore program needs and to develop a base document that was to be delivered to a functional programmer. During the 12 months of work, stakeholders were consulted about program needs. Work groups were formed for each of the program components and participants included service users, staff and service partners. As the content developed, it was measured against the current system of services to vulnerable people and the project vision and mission to ensure concurrence. The project's program committee and Stakeholder Advisory Group provided ongoing advice.

Staff also conducted a literature review on best practices in other jurisdictions related to shelters, assisted living programs and other programs similar to the innovative directive of the proposed GSR project.

Functional Program

In November 2014, a functional programmer was engaged. Bessant Pelech Associates led this work over a seven month period and built on the 12-month program consultation process that had just finished.

The functional programming process involved a series of meetings, consultations and work sessions with various groups. Oversight for the functional programming exercise was the responsibility of the GSR project team comprised of representatives from City divisions and Prism Partners. Work groups included community representatives and staff from several City divisions.

The majority of the work involved members of the GSR Program and Design Committee and five program-specific work groups. The leads and members of these groups were invited to participate on the basis of their operational knowledge as well as their 'big picture' and strategic thinking capabilities. The work groups included: Emergency Shelter, Transitional Assisted Living, Long-Term Care Home, Service Hub and Shared Support Services. The discussions and directions put forward by these groups provided the requisite detail on which to build the program-specific descriptions.

The functional programming process contributed to the ongoing consultations with the multitude of stakeholders participating in the GSR project. The process engaged context experts and challenged each to explore evidence-based research and trends in resident populations, program design, operational approaches and building features with a view to using leading edge thinking to set new standards of practice and building design innovations for the GSR.

In this section describing the functional program, the proposed combination of programs is referred to as the New George Community.

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PROGRAMS AND SERVICES

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Functional Programming Guiding Principles

The functional program principles set the bar for the programming work and at every opportunity participants were engaged in:

- Applying leading edge thinking to program/service planning and design including delivery approaches and environments;
- Integrating operational best practices and shared resources among City divisions and community partners to ensure optimum effectiveness and efficiency;
- Balancing the opportunities and risks of integrating diverse groups of vulnerable people;
- Celebrating and recognizing the history of George Street and Seaton House;
- Breaking down barriers, debunking myths and reducing stigmas associated with services to vulnerable populations to foster a new foundation for the New George Community;
- Identifying options and means to be more flexible recognizing that the programs will continue to evolve and change over the course of the project and life course of the building; and
- Conceiving new service models and approaches to program integration that could be piloted and potentially replicated as a successful urban model.



Aerial View Looking Southeast

The George Street Revitalization project functional program represents both a product and a process. The end result was a report, the pre-design guideline document that describes all characteristics and requirements of the programs that will constitute the New George Community. These descriptors range from who will use the building and how, how the programs will function independently and collectively, and finally what building elements and features are necessary to facilitate optimal program function. The functional program document provides the designers with an understanding of how the building must perform and what spaces and places are necessary to successfully fulfill the mandate of the New George Community. The functional program guides the design process.

Harm Reduction Approach

In 2005, Toronto City Council approved the Toronto Drug Strategy which is a municipal strategy based on the integrated components of prevention, harm reduction, treatment, and enforcement. Governments around the world use this comprehensive policy approach to address the harms of substance use for individuals, families and communities. Harm reduction is an integral part of Toronto's drug strategy, working together with prevention, treatment and enforcement approaches.

Harm reduction refers to policies and practices that reduce the harms associated with substance use for individuals, families and communities. It can include, but does not require, abstinence. It is important to include harm reduction in the range of responses to drug use because some people do not want to stop or are unable to stop using drugs, and require access to services and supplies that reduce the associated harms.

As part of a comprehensive approach, health interventions need to be available for people wherever they are along the continuum of substance use. Harm reduction workers focus on providing necessary supplies and educating people on how to reduce the harms of drug use (e.g. preventing disease transmission and overdose), building trusting relationships to keep people connected to the service system, connecting people to primary health care (e.g. wound care, immunization), and linking people with other supports and services in the community (e.g. drug treatment, housing).

SSHA is currently working with other City divisions and community partners to develop a harm reduction definition and framework that builds on the work done by Toronto Public Health (TPH). That framework will inform the harm reduction models at the New George Community and will support its success.

Functional Programming Parameters

The complexity and compressed timeline of the due diligence stage presented certain challenges that were mitigated by a rotating schedule of work group meetings in close succession and between-meeting assignments. Two other key factors were instrumental in expediting the programming process:

- The extensive pre-programming consultation efforts of Shelter, Support & Housing Administration at Seaton House and Women's Residence in 2014; and
- The redevelopment experience of Long-Term Care Homes & Services (LTCHS), most notably and recently at Kipling Acres (Phase 1 opened in early 2014 and Phase 2 is under construction).

One of the concessions made by the City project team in response to the schedule pressures was that unlike typical functional programming exercises, direct resident engagement would be delayed until more transition planning had been completed. It was decided that the broader consultation of resident and staff groups across the programs would be scheduled during the

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PROGRAMS AND SERVICES

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early design stage when preliminary sketch plans could be used to illustrate the key program and design features.

The facility support services is a pre-design tool that documents the requirements for the support service departments that will serve the individual and collective programs of the New George Community. The facility support services component was the end result of a process of learning, consultation and decision-making related to all aspects of the new revitalization project. The process incorporated the review and consideration of key common services required to support long-term care, transitional assisted living, shelter and service hub programs. Reviews of Kipling Acres, Seaton House, Women’s Residence and other City shelters were undertaken. Lessons learned from the recent redevelopment of Kipling Acres (337 bed long-term care home and community hub) as well as operational practices from other larger healthcare and institutional developments were explored and incorporated into the program where appropriate.



View Looking Northeast (Artist's conceptions based on 33% design and subject to change.)

5.1

LONG-TERM CARE HOME

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5.1 LONG-TERM CARE HOME

The changing nature of the long-term care sector is well documented. In addition to the demographics of an aging population, these future long-term care residents will have significant medical issues, belong to many different ethnic and cultural groups, require mobility devices, larger beds and lifting devices.

The long-term care home will be a major component of the New George Community, bringing hundreds of people to the new building including residents, families and friends, volunteers, staff, visitors, contracted services, service partners and suppliers. The home will be operated by LTCHS.

The City, as an operator with multiple homes facing redevelopment, must sequence projects. With the building on George Street, residents currently living at Castlevue Wychwood Towers (CWT), a home mandated for redevelopment, will be given the option to move into New George or transfer to another home through Community Care Access Centre (CCAC) while CWT is redeveloped.



Long-Term Care Great Room/Lobby (Artist's conceptions based on 33% design and subject to change.)

Operational Description

The operational description of the new long-term care home outlines how the programs and services will be delivered over the 24/7 routine cycle of day-to-day operations. It also identifies the staff required to deliver the services that meet the complex needs of the resident population and support the business operations of the program. These operational details will evolve through

the ongoing discussions with CWT leadership and LTCHS staff. The experiences of the redeveloped Kipling Acres also continue to inform these discussions.

LTCHS and SSHA continue to explore the respective roles and responsibilities for operational aspects of the New George Community. This program is based however, on the assumption that LTCHS will take the lead in operating the central production kitchen and laundry facilities. These operational details are presented in the Facilities Support Service section, below.

Design Assumptions

- The existing residents of the City of Toronto long-term care homes would, for planning purposes, represent the population of the new home;
- The program would be operated by the City of Toronto through LTCHS in collaboration with existing healthcare partners and Shelter, Support and Housing Administration, especially as it relates to the:
 - specialized programs of care for formerly homeless men and women; and
 - operations of the facility support services and service hub amenities
- A number of resident home areas (RHAs) within the home will be designated for formerly homeless men and women who are eligible for long-term care but have very complex medical, behavioural and social conditions that make long-term care placement difficult;
- The mandate and operational plan (e.g. operational and service roles/responsibilities, legislative/regulatory accountabilities, funding, etc.) for the new home will be consistent with those of other City homes in operation;
- The program would follow a conventional long-term care layout of twinned resident home areas on each floor for operational efficiency;
- The program will account for care specialization as yet to be determined;
- The program will account for anticipated trends and changes in the resident population of the future; and
- The program will meet the requirements of the *Long-Term Care Homes Act, 2007* and its regulations, and the LTC Design Manual (MOHLTC, 2015).

Programming for the new home has the advantage of insight and experience from the redevelopment of Kipling Acres. Kipling Acres was used as a living lab to test assumptions and concepts under consideration during the programming work. In addition, many of the lessons learned were incorporated into the program. This programming exercise provided the City the opportunity to continue to evolve its long-term care operations and building design elements and to explore new ideas and options brought about by the current MOHLTC Design Manual, the Building Code as well as other recently redeveloped long-term care homes.

Functional Description

The new home will welcome residents from CWT who choose to relocate to the New George Community. As with all redevelopment projects, the transition of a traditional long-term care environment to a new home will require a substantial shift in organizational culture and

5.1

LONG-TERM CARE HOME

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operations to fully realize the potential of the new building. The leadership of CWT was engaged in the programming processes through participation in the various work groups. The LTCHS lead for the George Street Revitalization Project also met with the leaders to explore program and design issues and directions.

The 378 residents of the new home will live in self-contained houses or ‘resident home areas’ (RHAs) of up to 32 people. Each of the 12 houses will be comprised of private and semi-private bedrooms, ensuite washrooms and shared amenities as well as support service spaces. One private room in each of six (6) RHAs will be programmed and designed to accommodate bariatric care.



Long-Term Care North Courtyard (Winter garden) with Living Wall (Artist's conceptions based on 33% design and subject to change.)

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LONG-TERM CARE HOME

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The bed distribution (40% preferred private and semi-private, 60% basic) by accommodation type is reversed from conventional LTCHS programming and design (60% preferred private, 40% basic) in recognition of:

- Anticipated socio-economic characteristics of residents choosing to live in the New George Community (i.e. assumption that a high majority of residents will live with social frailty including limited income, social support and increasing care needs);
- Anticipated preferences of residents with a history of homelessness, mental health needs and/or substance use issues (e.g. preference for communal living);
- Increasing acuity in the LTC resident population with future opportunity for room flexibility to accommodate more complex care needs; and
- LTCHS policy for long-term care development.

Resident Profile

The resident population of the New George home will reflect the ethno-cultural, linguistic and socio-economic diversity of the city of Toronto and the DTE neighborhood.

From a clinical perspective, the resident population is expected to present with:

- Complex co-morbidities;
- Dual mental health diagnoses; and
- Responsive behaviours.

It is also anticipated that some residents may transition from long-term care to other accommodations with support services within the New George Community or elsewhere in the city.

Mandate and Specializations

The long-term care home will operate under the *Long-Term Care Homes Act, 2007* and accompanying Regulation 79/10. As such, the general purpose and function of the home as described in the functional program is compliant with all statutes, standards and policies governing long-term care in the province and the policies, mission, vision and values of LTCHS.

- **Mission:** We provide a continuum of high quality long-term care services to eligible adults in both long-term care homes and the community.
- **Vision:** To be recognized leaders in excellence and ground-breaking services for healthy aging. Our positive environment, partnerships in education and research integrate knowledge and innovation. Our contributions shape and influence public policy. Our services improve resident and client outcomes; enhance quality of life throughout the continuum of care and for the people of Toronto.
- **Values:** Toronto Long-Term Care Homes & Services believes in the core values of:
 - **Compassion.** We are committed to providing compassionate care and comforting support that values the strengths, needs and desires of those we serve.

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- **Accountability.** We are committed to acting with integrity and to using City property, services and resources in a responsible, accountable and transparent manner.
- **Respect.** We are committed to upholding resident/client rights and respecting diversity; by embracing our differences and supporting others we demonstrate fairness, inclusion and equity.
- **Excellence.** We are committed to providing the highest quality of care and service; through innovation, teamwork, customer satisfaction, best practices and working co-operatively.

These CARE values are shared by all stakeholders, drive culture and priorities, and provide a framework in which all decisions are based.



Long-Term Care Home Main Entrance (Artist's conceptions based on 33% design and subject to change.)

LTC Specializations

While the program and design of all 12 houses or RHAs will be similar, it is anticipated that the new home will offer care and services to long-term care residents with specialized needs. The functional program has been developed on the following general assumptions regarding specialized RHAs:

- LTCHS have developed expertise in a number of specialized long-term care services that will be also offered at the new home. These services include:
 - Dementia care for persons living with Alzheimer's Disease or related dementias;
 - Behavioural support; and

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LONG-TERM CARE HOME

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- LGBTQ support.
- Specializations offered at the existing Castleview Wychwood Towers may also be relocated to the new home including areas designated for:
 - Residents whose safety is at risk due to wandering behaviours and where a secure living environment is required;
 - Convalescent care program, short-stay respite, palliative care; and
 - Younger adult (aged 19-64 years) residents who are cognitively alert and live with physical disabilities that necessitate long-term care services.

In conjunction with SSHA, the new home will operate up to two RHAs designated for men and women who live with complex physical and mental health needs and/or substance use issues and have a history of homelessness. A significant number of persons with these care needs are currently living within the shelter system which is ill-equipped to provide care to the growing number of older clients. In general, the long-term care system is limited in its capacity to provide care and services to a large number of residents with these particular needs due to limited resources. These new RHAs will address a gap in services and be a welcomed resource within the TC-LHIN.

The two specialized home areas (up to 64 beds) under consideration will focus care and service delivery in three key areas:

- Behavioural support (focused on dual diagnoses of mental health and dementia);
- Harm reduction (including managed alcohol programs); and
- Complex medical and psychological co-morbidities (including end-of-life care).

Bariatric care will also be offered on a limited basis in the home but is not anticipated to be a specialized program of care.

Congruence with GSR Vision and Mission

The long-term care program is congruent with the mission and vision of the project and incorporates:

- Specialized programs of care and service that will introduce new and innovative practices to the sector;
- New and emerging partnerships with SSHA in the provision of long-term care services to formerly homeless men and women;
- New shared practices with SSHA for facility support services, some of which the long-term care home will assume responsibility (e.g. food service and laundry services)
- New RHA design concepts such as:
 - Large and small dining areas;
 - Home kitchen;
 - Den; and
 - Use of full tracking ceiling lifts.

5.2 EMERGENCY SHELTER

The emergency shelter in the New George Community will be one of several new permanent men's shelters planned for the city of Toronto. The shelter will be operated by SSHA and will replace, in part, the hostel program currently operating at Seaton House.

Emerging Model for New Program of Service

At 100 beds, the new shelter will replace some of the existing hostel beds. Its smaller size is intentional. The 100-bed capacity is expected to offer the residents a better physical environment and more personalized support while providing staff with a more rewarding work life.

Furthermore, the smaller number of men residing at the shelter will lessen the impact on the George Street neighbourhood. As the functional program describes, this shelter represents a new model and standard for emergency shelters in the city.



Emergency Shelter Dining Room (Artist's conceptions based on 33% design and subject to change.)

Four fundamental questions shaped the discussions and direction of the shelter functional program. In the absence of a cache of evidence-based best practice and design literature on emergency shelters for men, the functional program participants used experience to address these questions. With a view to offering an optimum, safe and non-institutional living experience:

- How can a population of 100 men cohabitating in an emergency shelter best be organized into more human scaled groups for activities of daily living?
- How, when and for what do these smaller groups of men come together over their stay in the shelter?

- What services and programs will be accessible to all members of the New George Community and which will be exclusive to the men of the shelter?
- How will the programs and services of the new shelter support each man in expanding his behaviour space beyond the New George continuum and easing his transition to permanent housing?

Shelter Resident Profile

The demographic profile of men who are homeless and seeking shelter services is changing. Not only are there more seniors who are homeless, but the homeless population as a whole is aging. More men are living with mental health and/or substance use issues. Trending into the future, it is expected that this population will also be living with even more chronic, complex mental and physical health challenges and as a consequence need more supports.

It is anticipated that very few of the men staying at the GSR emergency shelter will have such complex needs as to require long-term care or managed care. If they do, they will be redirected to the appropriate program either in the New George Community or within the broader service system.

The population of the new shelter will comprise one of two key groups, namely:

- Men who are characterized as episodically and chronically homeless; and
- Men who are characterized as transient and short-term homeless

Despite this categorization, all men will be integrated into the general emergency shelter population. The only exceptions for segregation will be on the basis of medical condition and risk management. This practice will afford the shelter leadership full flexibility in the admission and room designation processes.

The services required to meet the needs of shelter residents will be provided by SSHA staff and partner agencies. These services will include:

- Assistance and referral to obtain appropriate housing;
- Assistance and referral to obtain housing follow-up supports where required;
- Assistance in obtaining financial benefits, if eligible;
- Assistance in obtaining employment supports and financial literacy;
- Referrals to appropriate services or resources;
- Assistance to obtain clothing and transportation;
- Case management; and
- Counselling.

Mandate and Specializations

The City of Toronto Hostel Services is mandated to provide accommodation, three meals per day and basic referral services. Shelters such as the New George shelter also provide case management, counselling and support services. The shelter will be expected to provide a secure environment for residents and continue the tradition of Seaton House as being the ‘place of last

resort'. This means that the shelter will continue to provide services to men who are homeless and have challenging physical and mental health and/or substance use issues.

SSHA staff will also be mandated to:

- Work in partnership with other divisions within the City of Toronto and community agencies providing health and social support services;
- Provide services and supports based on harm reduction principles; and
- Implement the City's Housing First practices and assist residents in finding and maintaining permanent housing in the broader community.

The new shelter will address the needs of Toronto's diverse population. Sensitivity to and specific accommodations for individuals representing the ethno-cultural and gender identity mosaic will be a cornerstone of the new shelter operations. The new shelter spaces will also be programmed and designed for accessibility and as such, the shelter will contribute to the city's inventory of shelters that are becoming appropriate accommodation for persons with mobility challenges and will be AODA compliant as per the Toronto Shelter Standards.

Congruence with GSR Vision and Mission

The shelter program and design are congruent with the mission and vision of the George Street Revitalization project in that the shelter will:

- Be an exemplar project showing innovation in:
 - Small-scale congregate living groups of residents into shelter pods of 25 men and trans men;
 - Infection prevention and control measures specific to the containment of communicable diseases in the private rooms;
 - Small-scale living quarters in the form of private, semi-private and quad rooms, compared to the dorms used previously, following the practice in other recent shelter developments across North America; and
 - Ensuite washrooms versus communal washrooms.
- By virtue of its smaller scale lessen the impact on the surrounding neighbourhood.

5.3 TRANSITIONAL ASSISTED LIVING

Although not in the original plans, a decision was made in 2014 to develop a new program for the George Street site: a transitional 'assisted living' residence. A significant number of the men residing at Seaton House for longer periods of time, including those men in the managed alcohol and infirmary programs, have personal or medical needs exceeding the mandate and resources of the emergency shelter system and are not eligible for long-term care. During the engagement process with health sector partners, it became evident that such programs are lacking in Toronto and that the project would be an opportunity to develop something new to meet a service gap, expanding the program to include women and trans people from the shelter system.

PRECEDENTS FOR HERITAGE INTEGRATION



Precedents for Heritage Integration

Operational Description

The transitional assisted living program will be a new and innovative component of the New George continuum of service community. This transitional assisted living program will offer accommodation and a wide variety of services to men, women and trans people experiencing long-term homelessness. It will be focused in particular on chronically homeless men, women and trans people who have personal or medical needs that exceed the mandate and resources of the emergency shelter system and who are ineligible for a long-term care home. The goal of the program will be to provide safe accommodation and appropriate medical and personal care to these vulnerable individuals while working towards relocation to permanent housing or a successful transition to long-term care.

The functional program for the transitional assisted living program is premised on several key pre-design assumptions, including:

- The existing residents of the Annex/Managed Alcohol/Infirmary and Long-Term programs currently operating at Seaton House and Women's Residence would, for planning purposes, represent the population to be served by the new program;
- The assisted living program would be operated by the City of Toronto through its SSHA division in collaboration with existing healthcare partners and possibly LTCHS;
- In the absence of a defined mandate and operational plan (e.g. operational and service roles/responsibilities, legislative/regulatory accountabilities, funding, etc.) for the new transitional assisted living program, the functional program would proceed on the basis of general program parameters and be sufficiently flexible to accommodate changes as the program evolved;

- The transitional assisted living program may be positioned as a pilot to contribute new insights and data (i.e. through program and system performance measures) for future planning of shelter services and to inform efforts to encourage the provincial government to recognize and support the needs of these vulnerable men, women and trans people experiencing homelessness;
- Other supported living models, either permanent or transitional, would be explored as references for discussions and decision-making throughout the functional programming exercise; and
- With alignment of floors between of the transitional assisted living and the long-term care home, there would be significant flexibility for the potential repurposing of the transitional assisted living program area to long-term care should the need and opportunity arise.

The functional program for the transitional assisted living program describes the new operations and space requirements of the program. While the residents of the new program will be similar to those currently residing at Seaton House in the 'Annex' and 'Long Term' programs, many of the program elements and services are new. Such innovation reflects best practice and opportunities that a new building will afford.

Functional Description

A single best practice program model for transitional housing for single, vulnerable, homeless men and women does not exist. *“Just as those affected by homelessness are heterogeneous..., transitional housing projects vary widely in the groups served, the goals adopted, the types and levels of services provided and the outcomes expected”* (Novac, Brown and Bourbonnais, 2009).

SSHA continues to advance the concepts, goals, programs of service, staffing and expected outcomes of the transitional assisted living program model. Nevertheless, key program assumptions grounded the ongoing planning and subsequent design work of the project. These assumptions provide a framework for the emerging program and set out broad guidelines such that the program will:

- Offer a safe and supportive living environment;
- Provide services and supports based on harm reduction principles;
- Provide the necessary supports, care and supervision to each resident based on their personal needs, abilities, goals and preferences;
- Provide opportunities for skills development for those who are able;
- Foster a sense of community and belonging amongst residents;
- Assist residents in rebuilding their social network; and
- Encourage residents to broaden their scope of interaction to areas within the New George Community and surrounding neighborhood.

Resident Profile

The demographic profile of men and women who are homeless and in need of transitional shelter and permanent housing with supports is changing. Not only are there more seniors who are homeless, but the homeless population as a whole is aging. There are more older men and women in shelters who are living with mental health and/or substance use issues. Trending into the future, it is expected that this population will have even more chronic, complex mental and physical health challenges, and as a consequence, will need more supports.

The resident population of the Annex/Infirmarary/MAP and Long-Term programs at Seaton House and the second floor of Women's Residence provide a clear picture of people who will be served by the new transitional assisted living program. Refer to the assessment process described below, in Section VII, Transition Plan, "Process to Date." Other data provided by Seaton House is presented below to describe the expected resident population of the new transitional assisted living program. By way of a series of general characteristics, the residents of the new program will be men and women who will have some or many of the following:

- Be over age 18 but likely older (e.g. middle aged);
- Require personal care, professional nursing care and daily living support care on a 24/7 basis but may not qualify for long-term care admission;
- Have at least one chronic illness, but likely multiple chronic co-morbidities and concurrent mental health diagnoses;
- Require regular medical interventions;
- Require re-enablement, restorative and rehabilitative care;
- Have difficulty transitioning to permanent supportive housing apartments because of their prolonged tenure in institutional settings resulting in functional losses across both activities of daily living (ADL) and instrumental activities of daily living (IADL);
- Have substance use issues (alcohol or other drugs);
- Require health care, or supports for mental health and/or substance use issues provided in a combined harm reduction based, low-barrier setting;
- Require moderate to high level of support due to disabilities, brain injury, developmental delay and/or premature aging;
- Have responsive behaviours associated with their mental health or substance use issues ;
- Benefit from harm reduction supports and strategies such as managed alcohol program;
- Have dual diagnoses that impact their level of cognitive function;
- Require palliative care;
- Participate in routine smoking behaviour; and
- Waiting for permanent housing options with support following discharge from convalescent care program, long-term care or other healthcare environments.

These characteristics are more aligned with the profiles of residents in the Seaton House Annex/Infirmarary/MAP program than with the fourth floor program. Residents in the latter tend to be more physically or socially vulnerable, are less likely to have a serious medical condition necessitating ongoing medical support but the majority require administration of daily medication by staff. These residents tend to have a longer tenure. According to the preliminary

5.3

TRANSITIONAL ASSISTED LIVING

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transition plan for Seaton House, approximately 85% of the beds in the transitional assisted living program will be occupied by men and women with characteristics similar to those currently residing in the Annex/Infirmarary/MAP program. There is a significant need for managed alcohol programs for men and women in the Toronto shelter system.

Mandate and Specializations



Elevation (Looking East) (Artist's conceptions based on 33% design and subject to change.)

City of Toronto Hostel Services is mandated to provide accommodation, three meals per day and basic referral services. As part of this system, the new George Street transitional assisted living program will also provide case management, counselling, support services, personal support and healthcare services. There are three distinguishing components of the new program, including:

- **Comprehensive Assisted Living Services** – The program will provide medical and personal care services to vulnerable men and women, primarily older adults, experiencing chronic homelessness but who are not suited for long-term care (i.e. ineligible or identified by a long-term care home as requiring resources beyond the home's capacity) but who still require care and supervision that exceeds the capacities of emergency shelters and social housing. The tenure of men and women living in the transitional assisted living program will be longer, perhaps up to three (3) years before relocation to permanent housing. The program will operate consistent with the City's Housing First practices and assist residents in finding and maintaining permanent housing in the broader community, specifically:
 - With a person-centred mandate, the program will respond to the unique abilities, desired outcomes and barriers to stable housing for each resident. The new transitional assisted living program will address the needs of Toronto's diverse population. Sensitivity to and specific accommodations for individuals with physical challenges and those representing the ethno-cultural and gender identity mosaic will be a cornerstone of the operations (e.g. vulnerabilities and integration challenges experienced by transgendered/transsexual/two-spirited residents).
 - The scope of support and services encompassed in the transitional assisted living program will be broad. Resident needs will range from medical and skilled

nursing care, personal support, behavioural support, reactivation, restorative care and palliative care. Staff will work in partnership with other divisions within the City of Toronto and community agencies to provide the required health and social support services.

- **Harm Reduction** – A comprehensive and integrated harm reduction approach will be a key element of the program. While there will be a particular emphasis on the managed alcohol program (MAP), the transitional assisted living program will also include clients using illicit substances and require harm reduction supports. Unlike the general transitional assisted living program, the age for eligibility into the MAP will be 19 to be consistent with the legal drinking age in Ontario. Additional considerations for the program include:
 - As an alternative to delivering the harm reduction supports in designated locations of the building, the transitional assisted living program may integrate those practices into the routine care and services to residents wherever they reside, as indicated in their individualized service plan.
 - The five 26-resident clusters that may be configured as follows:
 - Women and trans women cluster;
 - Men and trans men clusters (2);
 - Co-ed cluster with a focus on sobriety and support for recovery;
 - Co-ed cluster
- **Pilot and Research** – As a pilot, the transitional assisted living program will assess the costs and benefits of the services as well as the success in supporting residents in their transition to permanent housing with supports. Flow through the program will represent a particularly important aspect of the enquiry. In addition to an improved quality of life and health for the residents of the program, another expected outcome of the transitional assisted living program is a reduction in the number of residents in the emergency shelter system that have health and personal care needs that exceed the services available. The research findings are expected to provide evidence that will inform efforts to encourage the provincial government to recognize and support the needs of vulnerable individuals experiencing homelessness.

Congruence with GSR Vision and Mission

The transitional assisted living program and design are congruent with the mission and vision of the George Street Revitalization project in that the shelter will:

- Keep vulnerable people safe
- Be an exemplar project showing innovation in:
 - Piloting new service interventions to care for vulnerable people who experience homelessness and are medically complex;
 - Small-scale congregate living groups of residents into assisted living clusters of 26 people;

5.3

TRANSITIONAL ASSISTED LIVING

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- Infection prevention and control specific to the containment of communicable diseases in the private rooms;
 - Small-scale living quarters in the form of semi-private rooms; and
 - Ensuite washrooms versus communal washrooms.
- By virtue of its smaller scale, lessen the impact on the surrounding neighbourhood.

5.4

AFFORDABLE HOUSING

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5.4 AFFORDABLE HOUSING

Affordable housing is an important step in the continuum from homelessness to independent living for men, women and trans people referred from the George Street emergency shelter, assisted living and long-term care programs. The housing will be managed by an experienced non-profit organization that will lease the housing from the City for a nominal sum and provide a range of supports and referrals for the residents.

It is anticipated that the residents will learn the skills necessary to live independently during their tenancy and be able to make choices about their next steps.



Built Form and Context: Existing Buildings

5.5

COMMUNITY SERVICE HUB

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5.5 COMMUNITY SERVICE HUB

The community service hub is an integral component of the GSR project. It represents and implements two key project goals:

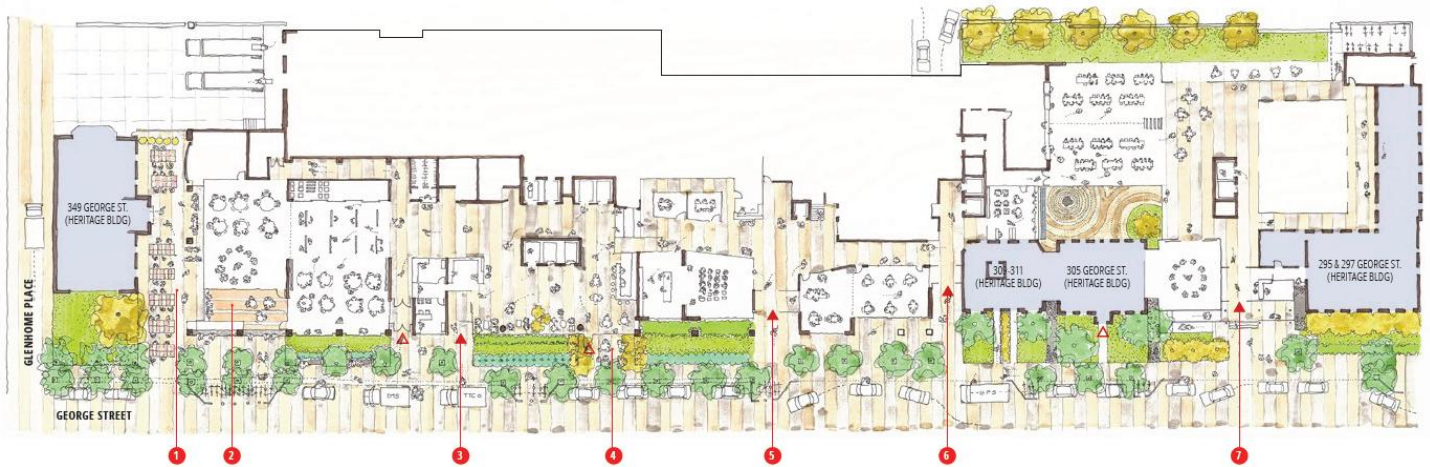
- (1) Offering programs and services to on-site residents, vulnerable individuals and the local geographic community, the hub will foster social inclusion and integration, facilitate and support interaction between different social communities; and
- (2) The design will be flexible for a long hub life that can adapt to evolving community needs, maximize and enhance existing municipal and community-based programs and services, and support current and future needs of the Downtown East (DTE) community.

Functional Description

The role and function of the service hub is to first and foremost support the programs of service operating within the New George Community. Its broader function relates to the DTE Revitalization Strategy, with a focus on:

- Opportunities to streamline service provision to ensure consistent, holistic and accessible services, and avoid duplication; and
- Ways to address identified gaps in services across the Downtown East.

Connecting to Street & Community



Connecting to Street and Community (Artist's conceptions based on 33% design and subject to change.)

A variety of services are contemplated for inclusion in the service hub. The breadth and scope of services under consideration encompass social services, limited health care, employment opportunities, education and training, financial support services, recreation and leisure services and community support services. Specific partner and programmatic elements will be determined through on-going community consultation. The intent of the service hub is not to 'be all things to all people', but rather to ensure that a range of programs and services are offered to in response to evolving needs of residents and clients alike.

The preferred concepts articulated in the functional program relate to:

- The balance between program-specific functions and areas and those to be shared by all New George Community and neighbourhood residents;
- The considerations associated with safety and security as they relate to:
 - Managing movement to and from program-specific areas and the service hub across the 24/7 cycle;
 - Determining gradients of access to certain service areas and spaces (i.e. who may have access to which spaces when);
 - Integrating the diversity of people expected in the service hub, many with particular yet different vulnerabilities;
 - Establishing the foundation for an organizational culture that reflects the service hub philosophies of accessibility, inclusivity and diversity;
- The need for flexibility in the design to accommodate the evolving composition of the service hub through the development process and after opening; and
- The expectation that service integration would realize not only improved services from a client perspective but also economies of scale, greater efficiencies and cost savings from the operational perspective

Congruence with GSR Vision and Mission

The main purpose of the programs and services in the New George Community service hub will facilitate integration as well as collaboration amongst and between service providers. The service hub will accommodate the City's efforts to maintain certain key partnerships currently operating at Seaton House and to forge new working relationships with other organizations to best service all of the resident groups. Some of these services will also further support the George Street Revitalization mission and vision by facilitating education and research opportunities.

The service hub represents a unique opportunity for numerous City of Toronto Divisions to work together to conceptualize, plan, develop and operationalize this new entity as a critical element in the revitalization of the George Street neighbourhood. The service hub will bring numerous opportunities to continue existing partnerships and establish new working relationships with other social service and health agencies serving vulnerable populations in the Downtown East.

Coordination with Area Programs and Services

There are two nearby initiatives that will impact on the programs and services provided at the George Street hub: (1) On May 5, 2015 City Council adopted the report *Change of Proposed Site for The 519 Sport and Recreation Project*. (2) TCHC and MLSE are partnering to develop a Sport for Development Centre.

On May 5, 2015, City Council adopted the report *Change of Proposed Site for the 519 Sport and Recreation Project*. Council granted authority to undertake a due diligence review for a new site located in the Moss Park community, including the site occupied by the John Innes Community

Centre. That proposal is related to GSR due to the potential project's proximity and programs that may provide opportunities for coordination and leverage.

<http://app.toronto.ca/tmmis/viewAgendaItemHistory.do?item=2015.EX5.10>

A follow-up staff report, *The Moss Park Redevelopment Project (Formerly The 519 Sport and Recreation Project) Update and Next Steps*, was adopted on September 21, 2015 by the Executive Committee and on September 30, 2015 by Council.

<http://app.toronto.ca/tmmis/viewAgendaItemHistory.do?item=2015.EX8.9>

The second proximate initiative is the Centre for Sport Development at 261 Jarvis Street, a partnership between TCHC and the Maple Leaf Sports and Entertainment (MLSE) Foundation. The MLSE Foundation will build Toronto's first ever Sport for Development Centre, used exclusively to deliver sport and life skills programming. Partners delivering integrated programming for youth with focus on: healthy body, healthy mind, ready for school and ready for work skill sets. The centre will be hub for social innovation with focus on sport as the driver for social outcomes with multiple programming partners. If approved, it is expected to open in 2017.

The community service hub proposed as part of the George Street Revitalization will work closely with these two initiatives to ensure coordination of programs for all residents and users of the various facilities, to maximize efficiencies and avoid duplication.

Functional Description

The role and function of the service hub is to first and foremost support the programs of service operating within the New George Community. Its broader function relates to the Downtown East (DTE) Revitalization Strategy, with a focus on:

- Opportunities to streamline service provision to ensure consistent, holistic and accessible services, and avoid duplication; and
- Ways to address identified gaps in services across the Downtown East.

A variety of services are contemplated for inclusion in the service hub. The breadth and scope of services under consideration encompass health care, social services, employment opportunities, education and training, financial support services, recreation and leisure services and community support services. Specific partner and programmatic elements will be determined through on-going community consultation. The intent of the service hub is not to 'be all things to all people', but rather to ensure that a range of programs and services are offered to in response to evolving needs of residents and clients alike.

A broad community consultation process was undertaken with the support of a third party consultant. The community consultation confirmed some City assumptions about the service hub and also raised additional areas for future investigation. Based on the consultation, the service hub program offers a list of preferred concepts and spaces to guide the design process. The schematic design process provides parameters for decisions regarding the services and amenities to be included in the New George Community service hub. Ongoing consultation will be undertaken as the scope of service hub continues to be developed.

5.5

COMMUNITY SERVICE HUB

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The preferred concepts articulated in the functional program relate to:

- The balance between program-specific functions and areas and those to be shared by all New George Community and neighbourhood residents;
- The considerations associated with safety and security as they relate to:
 - Managing movement to and from program-specific areas and the service hub across the 24/7 cycle;
 - Determining gradients of access to certain service areas and spaces (i.e. who may have access to which spaces when);
 - Integrating the diversity of people expected in the service hub, many with particular yet different vulnerabilities;
 - Establishing the foundation for an organizational culture that reflects the service hub philosophies of accessibility, inclusivity and diversity;
- The need for flexibility in the design to accommodate the evolving composition of the service hub through the development process and after opening; and
- The expectation that service integration would realize not only improved services from a client perspective but also economies of scale, greater efficiencies and cost savings from the operational perspective

PRECEDENTS FOR MAIN STREET



Precedents for Service Hub Main Street

Mandate and Specializations

The mandate of the New George Community service hub is to be the centre of shared services and amenities for:

- Long-term care residents;
- Shelter residents;
- Transitional assisted living residents;
- Affordable housing tenants;
- Vulnerable people who reside in and/or frequent the Downtown East.
- Staff, volunteers and visitors; and
- Neighbourhood residents.

The governance model will need to be determined and staff are exploring options.

5.6

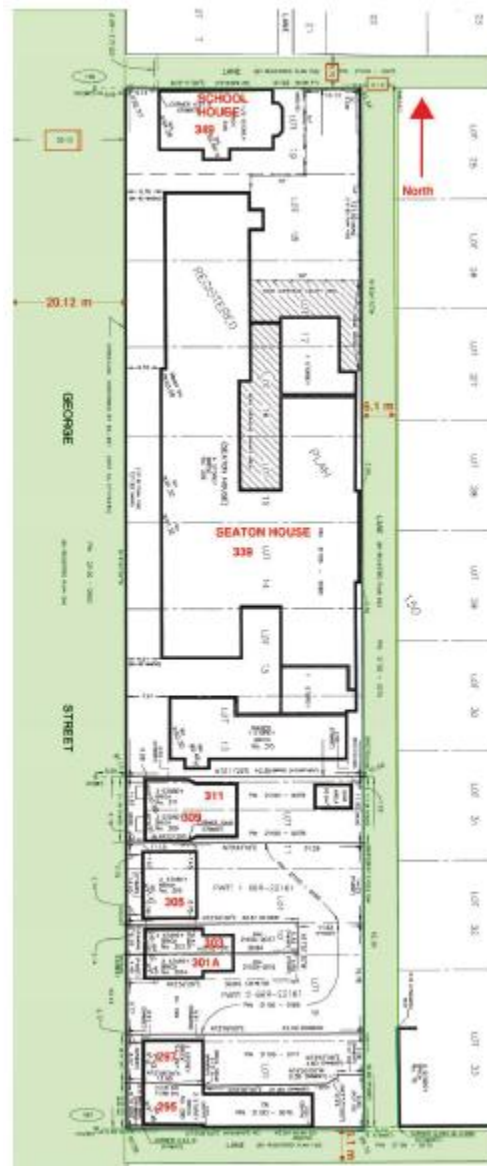
FACILITY SUPPORT SERVICES

George Street Revitalization – Attachment 6 – October 2015

5.6 FACILITY SUPPORT SERVICES

An integrated model will be implemented whereby singular support service departments will provide services to all components of the New George Community. Specific integrated support service departments will include the following:

- **Central Laundry** – A central, on-premise laundry to support personal clothing for the long-term care residents, mops and rags generated within the facility, and some shelter and/or assisted living residents on a contingency basis. Processing of bed linens and terrycloth will be outsourced to a third party provider via exchange cart system.
- **Materials Management** – Central procurement, receiving and warehousing function to support the needs of each of the four programs.
- **Facilities Services** – Centralized Environmental Services equipment and materials storage, equipment cleaning areas and waste and laundry chutes.
- **Maintenance Services** – Centralized shop, equipment storage and repair space, and materials storage space to support equipment and facility repair.
- **Food Services** – Centralized receiving, storage, preparation and production of bulk food items to support the individualized menu items and service styles/formats for the long-term care, assisted living and shelter programs.



Current State

Discussion and final determinations of operational responsibility for each of the departments is ongoing. The program is based on the assumption that LTCHS will operate central laundry and production kitchen, in part due to the specific requirements of the Long-Term Care Act and its regulations. Staffing for the facility support service departments is under development. Program assumptions associated with staffing numbers as they impact functional space requirements were based on new projects of similar scale and scope.

6.0 DESIGN APPROACH

The George Street Revitalization project provides a unique opportunity to transform George Street, while setting a precedent for revitalization in the Garden District that is focused on providing a quality public realm and superior building design. The redevelopment of the site will create a safe, inviting and vibrant place that reinstates the scale and rhythm of the greater neighbourhood. This project considers the building, site and streetscape comprehensively. Multiple entrances, new pathways, strong indoor-outdoor connections, dedicated landscaped areas, usable and flexible outdoor spaces all work to de-institutionalize George street, while the restoration of heritage-designated properties revive the vernacular that defines the community's rich urban history.



Alternative View Looking Northeast (Portrays Street Festival) (Artist's conceptions based on 33% design and subject to change.)

Building articulation provides variety and interest – reflective of the innovative programming and planning within – while adhering to the intent of the OPA's Performance Standards. It responds to context, generates connectivity, and ultimately solidifies the facility as community hub. The form does not cast shadows on Allan Gardens and casts only minimal shadows on the neighbouring residential properties to the east. The scale provides an effective transition between low-rise dwellings to the east and existing and proposed tall buildings to the west. The plan orients views from the north and south away from residential backyards to the east, minimizing overlook and increasing privacy.

Beyond reinvigorating aging and inadequate infrastructure, much design consideration is devoted to the public realm where public life should thrive, creating vibrant spaces anyone can pass through, feel comfortable in and gather at. Public spaces are designed to fold out from nearby parks, stretching greenery into and through the built environment. With increased attention to accessibility reflected in wide and barrier-free sidewalks, minimal grade changes and clear way finding, these spaces invite circulation, incite activity and appeal to a broad public.

Principles from Crime Prevention through Environmental Design (CPTED) will be used to craft all outdoor spaces surrounding the building to ensure a safe environment for residents, clients, staff, visitors, and neighbours.

Universal and barrier-free design principles are at the core of the strategy for the development of public spaces promoting equal opportunities for people of all abilities. Flexibility and resiliency, ease of maintenance and contemporary design are also essential qualities of the design.

Positioned directly on the property line with fully glazed edges, an abundance of lighting, multiple entrances and drop-off areas, and renewed visual connections, the complex no longer facilitates illicit behaviour rather, it discourages it. It will reconnect a neglected part of downtown back to the city. In short, it will set a precedent for urban renewal.

While a co-location of various services presents challenges, functional design considerations, as required by the LTC Design Standards and for resident safety include separate programming areas and separate street entrances for each programming area.

Further details on the design approach are available in Appendix 8.

Restoration, Integration and Adaptive Reuse of Heritage Buildings

The development site contains seven properties (295, 297, 301a, 303, 305, 309, 311 George Street) that are Designated under Part IV of the Ontario Heritage Act, and one property (349 George Street) that is not on the City of Toronto's Inventory of Heritage Properties but has been flagged as worthy of preservation. Along with their individual heritage designations, the site is within the Study Area for the Garden District Heritage Conservation District (HCD) Plan (the District Guidelines are currently being prepared).

Goldsmith Borgal & Company Limited Architects (GBCA) was retained by the project architect consultants to assess the existing structures in their architectural, historical and contextual significance,. As part of the buildings' architectural significance, the existing condition was also reviewed.

The City's Heritage Consultant, GBCA, has assessed the historical, contextual and architectural significance of the existing structures.



Historical George Street

6.0

DESIGN APPROACH

George Street Revitalization – Attachment 6 – October 2015

Existing conditions were also considered. The conditions of the heritage buildings vary significantly with some still in use, such as 349 George Street (the former Schoolhouse now used as a shelter), and others that are not only vacant but have been extensively damaged by fire.

The national *Standards and Guidelines for the Conservation of Historic Places in Canada* (specifically those for rehabilitation) have provided the framework for considerations in the design development phase – that is, to ensure the “heritage values and attributes” of the heritage properties as set out in the Designation By-Laws are conserved.

While the HCD Plan guidelines have yet to be drafted at the time of writing of this Design Development Report, a meeting with Heritage Preservation Services Staff and the heritage consultant in charge of the HCD Plan has allowed for insights into the forthcoming parameters of the HCD. The future guidelines currently in development have also been considered as part of this site design and, in addition, the heritage consultant for the HCD Plan is aware of the proposed development of the site.

The successful restoration, integration and adaptive reuse of the existing heritage buildings into a new development can be achieved through thoughtful planning that fully integrates the spaces within the heritage buildings for maximum efficiency of use. The heritage buildings, with set dimensions of space, will serve largely as community hub spaces. The buildings at 295 and 297 George Street will serve for the emergency shelter program.

GBCA (under an earlier contract with the City of Toronto) prepared condition assessments and recommendations for the stabilization of 295, 297, 301, 303, and 305 George Street in 2013. Following the recommendations of this earlier project, the vacant buildings were secured and stabilized in anticipation of a redevelopment that would include the adaptive reuse of these buildings.

The heritage consultants have met with the various heritage authorities on several occasions and have received feedback, which has subsequently been assessed and, where possible, integrated into the overall design.

The City of Toronto is committed to the preservation of the heritage properties as part of the overall redevelopment of the site and the properties will be integrated into the new construction



Heritage Properties Onsite

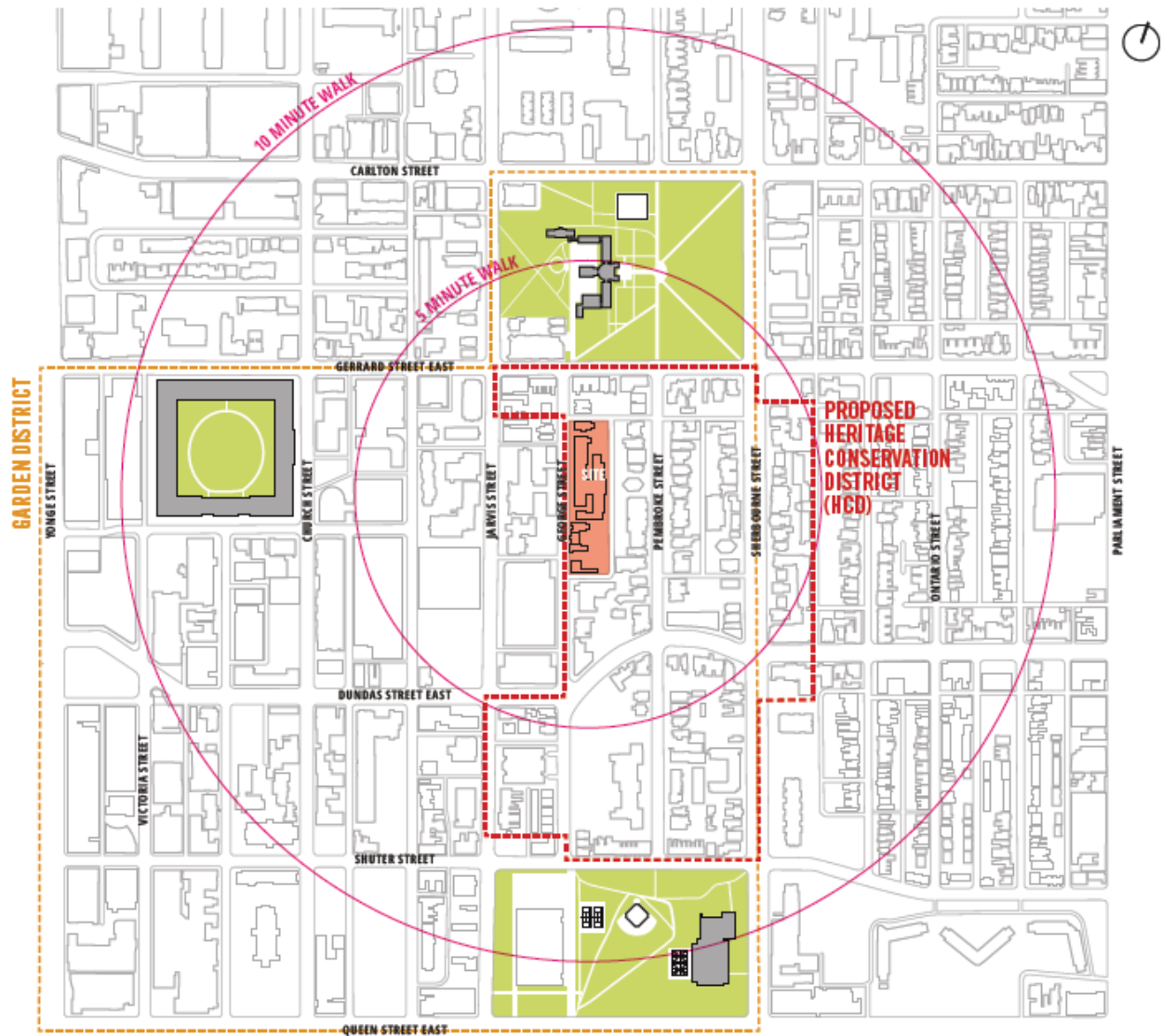
6.0

DESIGN APPROACH

George Street Revitalization – Attachment 6 – October 2015

Official Plan Amendment (OPA) 82

Garden District Site and Area Specific Policy and Zoning By-Law 569-2013



Heritage Conservation District

In response to growing development pressures being exerted on this neighbourhood, the City recently completed an Official Plan Amendment (OPA) for the Garden District. It was adopted by City Council on March 31, 2015, and outlines site specific policies for the neighbourhood – most importantly identifying locations and performance standards for tall buildings. This Site and Area Specific Policy covers the area between Jarvis Street, Carlton Street, Sherbourne Street and Queen Street.

Currently, Toronto’s Zoning By-Law permits a maximum building height of 12.0 metres on the Seaton House site and surrounding properties. However, the permitted height on the Seaton

6.0

DESIGN APPROACH

George Street Revitalization – Attachment 6 – October 2015

House site, and other tall building locations permitted in OPA 82, is expected to be updated to reflect the OPA.

The OPA makes several key recommendations that affect the Seaton House site and neighbouring properties, including:

- Re-designating several properties (including the Seaton House site) from Neighbourhood to Apartment Neighbourhood and permitting Tall Building development on the Seaton House site
- Requiring there are no new shadow impacts on Allan Gardens, Moss Park or other key public sites as a result of new development
- Identifying specific development Performance Standards including angular planes, setbacks, step backs and tower separation distances
- Providing for the revitalization of Seaton House and achievement of its programmatic requirements while remaining sensitive to the surrounding urban context'
- Placing priority on the protection and enhancement of the public realm, including several new mid-block connections



6.0

DESIGN APPROACH

George Street Revitalization – Attachment 6 – October 2015

The Seaton House site and the adjacent property on the west side of George Street are part of the North George Street Character Area identified in OPA 82. Key directions for the Character Area confirm that George Street is an important street in the downtown east and will continue to act as a community hub. The OPA permits publicly-owned institutional uses and commercial uses like restaurants on these sites, but directs that the heritage fabric of North George Street must be preserved and maintained. Tall Buildings are permitted on Block 1 (the Seaton House site) and Block 2 (the Ontario Court of Justice site at 311 Jarvis Street), in accordance with Performance Standards identified in the OPA.

When City Council adopted OPA 82 on March 31, 2015, City Council also directed that the Garden District Area Specific Policy be considered for amendment when the zoning application for the GSR was brought forward if “modifications to the built form permitted by the Policy are required to implement (the) Council approved redevelopment of Seaton House.”

7.0 SEATON HOUSE TRANSITION PLAN

The transition plan's purpose is two-fold: to provide a framework to successfully relocate clients, programs and personnel from Seaton House by 2017 and to ensure that emergency shelter capacity lost due to the closure of Seaton House is maintained in the system.

The transition plan is being coordinated by SSHA with a network of City supports including Human Resources, Corporate Finance, Real Estate Services, LTCHS and SDFA. There are also various external partners and stakeholders involved, including the Inner City Family Health Team (ICFHT), Inner City Health Associates (ICHA), the Toronto Central Local Health Integration Network (TC-LHIN) and the Toronto Central Community Care Access Centre (TC-CCAC).

While the transition plan focus is on client need, it will be implemented within a broader framework of strategic directions within the SSHA's Housing Stability Service Planning Framework:

- Supporting the transition to housing
- The creation of housing opportunities
- Delivering high quality services
- Strengthening partnerships and co-coordination.

Guiding Principles

The transition plan is grounded in principles which influence and direct the manner in which the work is undertaken. These include:

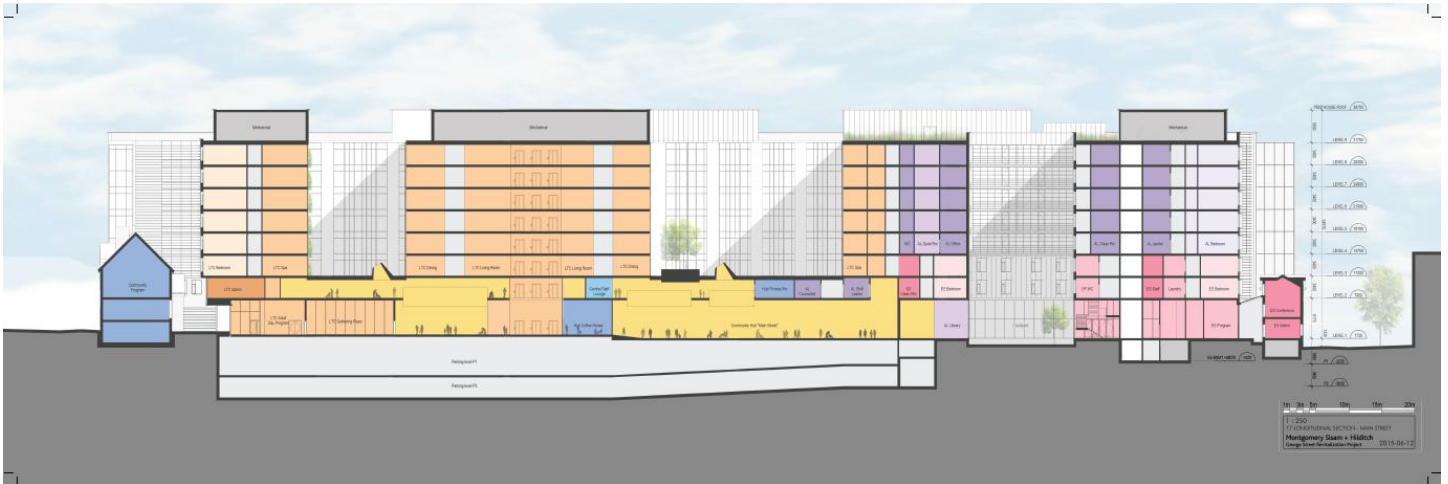
- Clients will participate in developing personal transition plans in consultation with case management staff and service partners;
- No one will be left without accommodation;
- Permanent housing will be the first option for all clients;
- Current programs and services will continue in the new sites;
- Shelter capacity for the men's sector will be maintained; and
- SSHA will operate all new shelter sites associated with the GSR project.

The plan includes the following components:

1. **Client Consultations** - Client consultations regarding the transition plan took place in July 2015 with clients from all Seaton House programs. The majority of clients believed redevelopment of Seaton House was positive, however expressed the real focus for the division should be on providing permanent housing options for those in the shelter system. As for the preferred location of new shelters, clients in the harm reduction and infirmary programs prefer a downtown location close to the medical supports and resources they need. Clients in other programs said they do not need a shelter downtown if they have access to TTC and amenities. Several clients also felt that it would be ideal

if shelters were more specialized and worked with distinct populations (e.g. seniors, those with addictions issues, those actively seeking employment).

2. **Client Assessments** – As described in Attachment 3 of the staff report, City staff, the Inner City Family Health Team and the Toronto Central Community Care Access Centre have recently conducted a joint assessment of 120 Seaton House residents. Further assessments for the remaining residents are scheduled to continue. The results describe the client needs and will help inform each client's transition plan.



Longitudinal Section – Main Street (Artist's conceptions based on 33% design and subject to change.)

3. **Options for Clients** - These will include: (1) housing with supports as required, (2) housing allowances, (3) referral to long-term care, (4) moving to another shelter, and (5) other options that may arise for the client.
4. **Staff transition** - The process of work location change for over 300 staff requires a methodology based on fairness, choice, transparency and compliance with collective agreements and humans resource policies. The process outlines the means by which staff is assigned and aims to be the least disruptive to staff, clients and general operations.
5. **Move Management** - This process involves considerations for inventory of assets, disposal of redundant/unsafe assets, equipment and furniture installation, and the relocation/transfer of clients and their personal belongings. Consideration for the decommissioning for beds and the sequencing of program closures is also taken into account of the move management process.
6. **Community and Councillor Outreach** - New protocols adopted by Council in April 2015, *Strategies to Improve Locating and Relocating Emergency Shelters* (<http://www.toronto.ca/legdocs/mmis/2015/cd/bgrd/backgroundfile-78763.pdf>) require SSHA to formally notify councillors of proposed shelter facilities being considered in their ward. There will also be a need to proactively engage with residents and other neighbourhood entities and be responsive to issues that may arise. A community engagement plan will be incorporated into the transition plan.

8.0

APPENDICES

George Street Revitalization – Attachment 6 – October 2015

8.0 APPENDICES

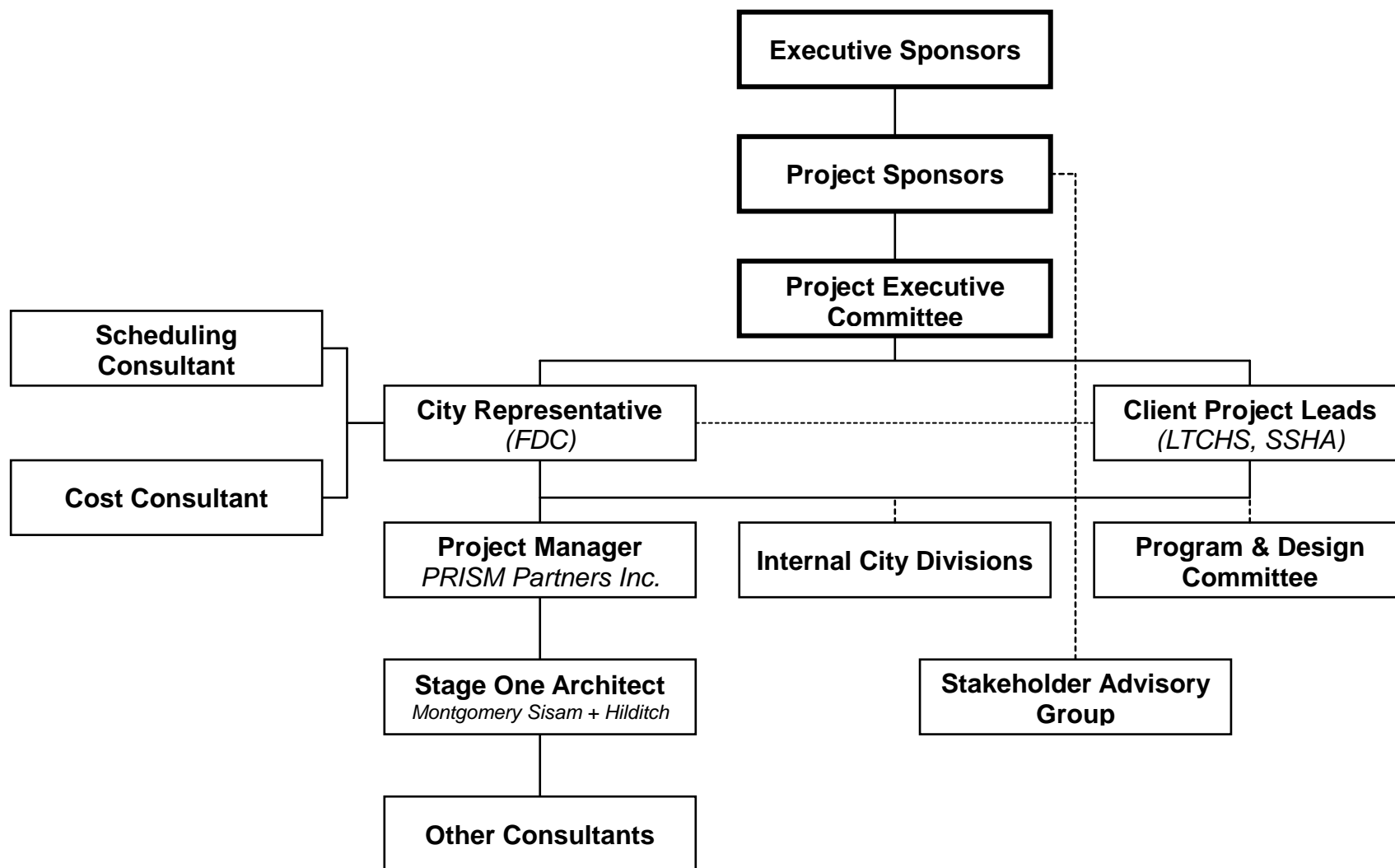
- 8.1 Project Organization Chart
- 8.2 Stakeholder Universe
- 8.3 Community Organizations: Early Consultations
- 8.4 Stakeholder Advisory Group: Terms of Reference and Membership
- 8.5 Health Sector Partners Engaged in Project Stage One
- 8.6 City Divisions, Sections and Units Contributing to Project Stage One
- 8.7 Consultants Assigned to Project Stage One
- 8.8 Design Approach – Further Detail
- 8.9 Illustrations and Early Concepts

8.1

PROJECT ORGANIZATION STRUCTURE

George Street Revitalization – Attachment 6 – October 2015

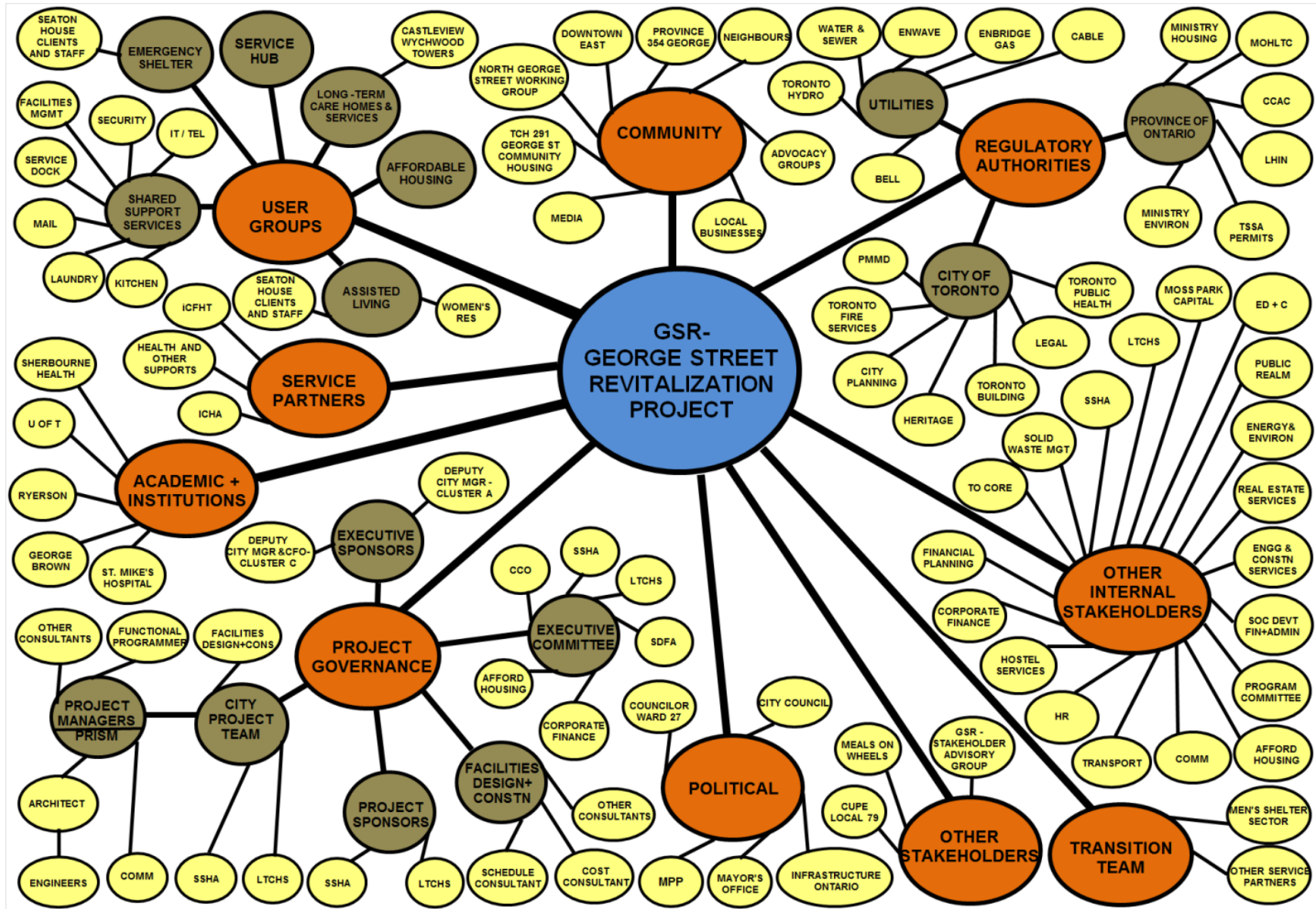
APPENDIX 1 – PROJECT ORGANIZATION STRUCTURE



8.2 STAKEHOLDER UNIVERSE

George Street Revitalization – Attachment 6 – October 2015

APPENDIX 2 – STAKEHOLDER UNIVERSE



8.3 COMMUNITY ORGANIZATIONS: EARLY CONSULTATIONS

George Street Revitalization – Attachment 6 – October 2015

APPENDIX 3 – COMMUNITY ORGANIZATIONS: EARLY CONSULTATIONS

The following community organizations were consulted regarding early concepts of the George Street Revitalization.

- Anishnawbe Health Toronto
- Canadian Mental Health Association, Toronto Branch
- Centre for Addiction and Mental Health (CAMH)
- Community Older Persons Alcohol Program (COPA)
- Community Resource Connections of Toronto (CRTC)
- COTA
- Christian Resource Centre (CRC)
- CUPE Local 79
- Dixon Hall
- EcuHome
- Edmund Place (PARC)
- Evangel Hall
- Fred Victor
- Good Neighbours Club
- Homes First, Strachan
- Inner City Health Associates
- John Howard Society
- LOFT Community Services
- Men's Shelter Sector
- Miziwe Biik Aboriginal Employment and Training
- Native Men's Residence
- Neighbourhood Information Post
- Regent Park Community Health Centre
- Salvation Army Harbourlight
- Sherbourne Health Centre
- St. Clare's Multifaith Housing Society
- St. Michael's Hospital, Detox
- St. Stephen's Community House
- Street Health
- Wellesley Institute
- WoodGreen Community Services
- YWCA, Elm Street

8.4

STAKEHOLDER ADVISORY GROUP: TERMS OF REFERENCE AND MEMBERSHIP

George Street Revitalization – Attachment 6 – October 2015

APPENDIX 4 – STAKEHOLDER ADVISORY GROUP: TERMS OF REFERENCE AND MEMBERSHIP

Mandate

The Stakeholder Advisory Group (SAG) represents a cross-section of key project stakeholders and offers one form of stakeholder participation in this project. The SAG serves in an advisory capacity to the Project Sponsors, i.e. the General Managers of the two lead divisions for the project, noted below. The advisory group will consider aspects of the five project components: a men's emergency shelter, a long-term care home, an "assisted living" residence, a service hub and affordable or mixed housing. The group will work in a collaborative spirit in the best interest of all future users of the services provided at that site.

Background and Authority

At its July 16, 2013 meeting City Council adopted a report "Update and Next Steps of Proposed Redevelopment of Seaton House and Revitalization of George Street".

<http://app.toronto.ca/tmmis/viewAgendaItemHistory.do?item=2013.EX33.17> Council approved in principle the revitalization project and staff are to report back in mid-2015 with more details on programs, design and funding in order to receive full approval to proceed. The project is being co-led in a partnership between Shelter, Support and Housing Administration (SSHA) and Long-Term Care Homes & Services (LTCHS). Council also directed the establishment of "an advisory group for the redevelopment of Seaton House that includes current and past residents of Seaton House, representatives from CUPE Local 79, including those working at Seaton House, service partners including other orders of government as appropriate, representatives from local residents' groups and other stakeholders".

Tasks and Activities

1. Participate in an advisory capacity at meetings of the Stakeholder Advisory Group as requested by the Project Sponsors.
2. In the context of the project's overall goals, attend meetings to provide feedback and expert advice on programs, design and transitional elements for the five project components. There will be a minimum of three sessions as follows:
 - (a) Introduction to the project and an opportunity to 'blue-sky', offer comments on what you consider important elements for a redeveloped site (April);
 - (b) Presentation of program plans as developed by work groups (September);
 - (c) Schematic design for the redeveloped site (2015).
3. Serve as 'ambassadors' of the George Street Revitalization Project, i.e. available to promote the project in their sector, across sectors and at public meetings.

Membership Criteria

Members are expected to provide expertise and feedback based on their knowledge and experience, on: (1) the overall project goals and the inter-relationship of its components for homeless, formerly homeless and vulnerable adults; (2) program and design elements in at least one of the five project components: a men's emergency shelter, a long-term care home, an "assisted living" residence, a service hub and affordable or mixed housing. Members understand that their names will be made public online and in project communications. Service partner members are not expected to represent their sectors.

8.4

STAKEHOLDER ADVISORY GROUP: TERMS OF REFERENCE AND MEMBERSHIP

George Street Revitalization – Attachment 6 – October 2015

Membership Clusters

Members will be selected from among clusters as listed below, each cluster represented by one person unless otherwise noted.

- Seaton House Residents (1 Current & 1 Former)
- Seaton House Staff (2)
- LTCHS Staff (2)
- LTCHS Resident
- Service Partners
 - Health
 - Mental Health
 - Harm Reduction
 - Addictions
 - Housing Providers
 - Housing Supports
 - Shelters
 - Seniors' Services
 - LTCHS Volunteer
 - Aboriginal Community
 - Corrections / Courts
 - Drop-ins
- Local Community: Garden District Residents' Association
- Local Community: Tenants
- Local Business Community
- Local Councillor's Representatives (2)
- International Federation on Ageing
- Toronto Central – Local Health Integration Network
- Toronto Central – Community Care Access Centre
- CUPE Local 79
- At Large (3)

Accountability and Decision Making

The Stakeholder Advisory Group is an advisory body to the Project Sponsors and decision-making rests with the City. Project Leads will provide the 'day-to-day' support. The SAG has direct access to Project Sponsors as required. When required, members will be expected to respect the confidentiality of materials presented and discussed.

Term

The group will function until mid-2015. Thereafter, pending Council approval of the project, the lead City divisions will consult with the membership to determine how to proceed for the duration of the project.

Meetings and Attendance

Meetings will be facilitated by City staff in order to maximize the participation of all members. While consistency in membership is desirable, members may choose to have an alternate

8.4 STAKEHOLDER ADVISORY GROUP: TERMS OF REFERENCE AND MEMBERSHIP

George Street Revitalization – Attachment 6 – October 2015

represent them if required. Other persons may be invited to attend the meetings at the request of the Project Leads. Agenda and support documentation will be provided by project staff.

Member Agencies

Service Partners

Helen Cheung, Support Manager, Houselink Community Homes

Angie Hains, Executive Director, Ecuhome

Bradley Harris, Executive Director, Salvation Army Toronto Emergency Shelters

Stephen Hwang, Physician and Research Scientist, St Michael's Hospital

Kapri Rabin, Executive Director, Street Health

Antonio Bruno Scorsone, Executive Director, The Good Neighbours' Club

Kate Stark, Executive Director, Dixon Hall

Victor Willis, Executive Director, PARC

Rhona Zitney, Mental Health Court Support Worker, Community Resource Connections of Toronto

Local Business Community

Bob Aykler, Vice President/Property Manager, Aykler & Co Realty Ltd.

At Large

Judith Binder, CMHC Corporate Representative, Canada Mortgage and Housing Corporation (CMHC)

Doris Grinspun, Chief Executive Officer, Registered Nurses' Association of Ontario
Representative from Toronto Police Service

Seaton House

Katie Keating, Seaton House staff

Leroy Miller, Seaton House staff

Seaton House Resident, current

Seaton House Resident, former

Long-Term Care Homes & Services

Nancy Lew, Administrator, LTCHS

Lorraine Siu, Administrator, LTCHS

Jack Harmer, LTCHS Volunteer

Local Community

Nicholas Culverwell, President, Garden District Residents Association

Dalton Sharp, Vice President, Board of Directors, Jenny Green Co-op

8.4 STAKEHOLDER ADVISORY GROUP: TERMS OF REFERENCE AND MEMBERSHIP

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Representing the local Councillor, Kristyn Wong-Tam

Joy Connelly

Rainer Soegtrop

International Federation on Ageing

Dr. Jane Barratt

Greg Shaw

Toronto Central - Community Care Access Centres

Mieshia Forrester, Co-ordinator, Toronto Central CCAC

Toronto Central – Local Health Integration Network

Nello Del Rizzo, Senior Consultant, Performance Management

CUPE Local 79

Sandra Higginson, Unit Officer, CUPE Local 79 (Alternate)

David Kidd, Vice President and Chief Steward, CUPE Local 79

8.5 HEALTH SECTOR PARTNERS ENGAGED IN PROJECT STAGE ONE

George Street Revitalization – Attachment 6 – October 2015

APPENDIX 5 – HEALTH SECTOR PARTNERS ENGAGED IN PROJECT STAGE ONE

The following health sector organizations were consulted regarding early concepts of the George Street Revitalization.

- Community Older Persons Alcohol Program
- Community Resource Connections of Toronto
- COTA
- Inner City Family Health Team (ICFHT)
- Inner City Health Associates (ICHA)
- International Federation on Ageing (IFA)
- PARC
- Regent Park Community Health Centre
- Registered Nurses' Association of Ontario
- Sherbourne Health Centre
- Sound Times Support
- St. Michael's Hospital
- Street Health
- Toronto Public Health
- Toronto Central Local Health Integration Network (LHIN)
- Toronto Central Community Care Access Centre (CCAC)

8.6

CITY DIVISIONS, SECTIONS AND UNITS CONTRIBUTING TO PROJECT STAGE ONE

George Street Revitalization – Attachment 6 – October 2015

APPENDIX 6 – CITY DIVISIONS, SECTIONS AND UNITS CONTRIBUTING TO PROJECT STAGE ONE

Affordable Housing Office

Chief Corporate Office

- Corporate Security

City Manager's Office

City Planning

- Community Planning
- Urban Design
 - Heritage Preservation Services
 - Civic Improvement
- Zoning Bylaw

Corporate Finance

- Strategic Initiatives and Intergovernmental Finance

Economic Development & Culture

- Business Growth Services

Engineering & Construction Services

- Engineering Review
 - Utility Mapping
 - Development Engineering
- Engineering Support Services
 - Land & Property Surveys

Environment & Energy

- Energy Efficiency Office
- Toronto Renewable Energy Office

Equity, Diversity and Human Rights

Facilities Management Division

- Facilities Design & Construction

Financial Planning

- Corporate Financial Planning

Fire Services

- Fire Prevention and Public Education
 - Fire Code Enforcement South

Human Resources

- Employee and Labour Relations
- Occupational Health & Safety/Disability Management
- Organization Development & Learning

8.6

CITY DIVISIONS, SECTIONS AND UNITS CONTRIBUTING TO PROJECT STAGE ONE

George Street Revitalization – Attachment 6 – October 2015

- Strategic Recruitment & Employment Services

Information & Technology

- Business Enablement & Client Services
 - Client Relationship Management
- Technology Infrastructure Services
 - Voice and Wireless Network Group

Legal Services

- Legal Municipal Law
- Legal Real Estate Law

Long Term Care Homes & Services

- Administration and Support Services
- Executive Office
- Management Services
- Castleview Wychwood Towers
- Fudger House
- Kipling Acres
- Seven Oaks

Municipal Licensing & Standards

- Investigation Services
 - Toronto & East York District
- Policy & Strategic Support
 - Policy & Planning Services

Office of Emergency Management

Parks, Forestry & Recreation

- Parks, Toronto & East York District
- Parks Development & Capital Projects
 - Special Projects

Purchasing & Materials Management

Real Estate Services

- Acquisitions & Expropriations
- Strategic Projects

Shelter, Support & Housing Administration

- General Manager's Office
- Hostel Services
 - Fort York Residence
 - Seaton House
 - Women's Residence
- Program Support
 - Budget & Finance

8.6

CITY DIVISIONS, SECTIONS AND UNITS CONTRIBUTING TO PROJECT STAGE ONE

George Street Revitalization – Attachment 6 – October 2015

- Partnership Development & Support
- Streets to Homes
- Housing Stability Policy & Strategic Investments
- Social Housing Unit

Social Development, Finance & Administration

- Community Resources
 - Tower & Neighbourhood Revitalization
- Social Policy, Analysis & Research

Strategic Communications

- Corporate Communications
- Media Relations & Issues Management

Toronto Building

Toronto Employment and Social Services

- Wellesley Place Employment & Social Services
- OW Program & Delivery Support

Toronto Office of Partnerships

Toronto Paramedic Services

- Program Development & Professional Standards
 - Community Safeguard Services

Toronto Police Services

Toronto Public Health

- Healthy Communities
 - Toronto Drug Strategy

Toronto Public Library

Toronto Water

- Water Infrastructure Management
 - Policy & Program Development

Transportation Services

- Public Realm Management & Overhead
 - Beautiful Streets
- Transportation Infrastructure
 - Cycling Infrastructure & Programs
- Transportation Planning

8.7 CONSULTANTS ASSIGNED TO PROJECT STAGE ONE

George Street Revitalization – Attachment 6 – October 2015

APPENDIX 7 – CONSULTANTS ASSIGNED TO PROJECT STAGE ONE

The following community organizations were consulted regarding early concepts of the George Street Revitalization.

- Allegion Canada
- Amec Foster Wheeler
- BA Consulting Group
- Bessant Pelech Associates
- Brook McIlroy
- Cicada Design
- DesignABLE Environment
- Enwave Energy Corporation
- Goldsmith Borgal & Company Architects (GBCA)
- Geo-Xergy Systems
- Hilditch Architect
- Kaizen Foodservice Planning & Design
- MMM Group
- Montgomery Sisam Architects
- National Elevator Consulting
- PRISM Partners Inc.
- Sereca Larden Muniak Consulting
- Tyco Integrated Fire & Security
- Urban Forest Innovations
- Vertechs Design

APPENDIX 8 – DESIGN APPROACH – FURTHER DETAIL

Approach

To realize the City’s vision, the George Street Revitalization project is committed, in its design and delivery, to the development of a holistic, community-based model that breaks down barriers, creating a place of dignity and delight for residents, staff and neighbours alike. Our design is found upon the following principles:

- **Generating Neighbourhood Transformation:** The George Street Revitalization redefines the public realm as open, inviting and safe for all people – a public realm that embodies the idea of community.
- **Providing an Integrated Continuum of Care:** The George Street Revitalization provides a new and transformed environment with a strengthened network of institutions, parks, social services and housing options that vulnerable individuals can rely on.
- **Employing Best Practice Architecture for the Vulnerable Sector:** The George Street Revitalization offers safe, dignified and respectful places to live that afford comfort and opportunity to residents and foster a culture of health and wellbeing across the greater community.
- **Implementing Social Sustainability, Environmental Stewardship and Fiscal Responsibility:** The George Street Revitalization project is informed by a larger social consciousness and sense of responsibility so as to play a dignified and lasting role for its occupants and the wider community.
- **Respecting Seaton House, its Residents and its Staff:** George Street Revitalization initiatives are representative of a collective of voices shaped through discussion, extensive consultation and consensus building strategies into a single, common vision.
- **Bringing new life to the heritage properties:** The City of Toronto is committed to the conservation of the heritage properties as part of the overall redevelopment of the site and, as such, the team has carefully considered their integration into the new construction.

Reviving the Public Realm

Beyond reinvigorating aging and inadequate infrastructure, much design consideration is devoted to the public realm where public life should thrive, creating vibrant spaces anyone can pass through, feel comfortable in and gather at. Universal and barrier-free design principles are at the core of our strategy for the development of public spaces promoting equal opportunities for people of all abilities. Flexibility and resiliency, ease of maintenance and contemporary design are also essential qualities of our design.

Redefining Street Edge

Today, George Street is a two-way street with a narrow fence-lined sidewalk, basic pedestrian infrastructure and limited green features highly reflective of the current state of mistrust and isolation that characterizes the neighbourhood.

Through redevelopment George Street begins to acquire more flexibility with a contemporary, pedestrian-friendly curbless design along the entire complex frontage; a quality which could eventually extend the entire length of the Street from Moss Park to Allan Gardens.

Designing Greenscape: Fitting Addition to Garden District

The basic premise in the development of green space associated with this revitalization project is that landscaped areas become more than simply a backdrop but rather contribute to and enhance the creation of a barrier-free, welcoming and therapeutic environment that reaches out to and integrates the surrounding community.

Resident-Centred Design: Defining Features

A resident-centered philosophy governs design decision made throughout the project, particularly in the development of the new care complex. This philosophy works to subvert the institutionalization of the care environment in favour of integration, community engagement, and holistic wellness. This strategic approach to site redevelopment reinvigorates the George Street neighbourhood while simultaneously providing clients with a treatment facility that does not intimidate nor alienate but one that offers a home-like environment that is welcoming, respectful, and dignified.

Key defining features include:

A Clear Distinction between Public & Private Realms

Building design clearly distinguishes between active, public spaces dedicated to interaction, participation and/or service, and the more subdued private spaces for healing, sleeping and/or respite.

Bringing the Outdoors In

Exposure to the natural environment, whether through natural light, framed views to the outdoors or direct access to the public spaces, private courtyards and terraces, exerts significant influence on positive health outcomes, minimizing stress and facilitating emotional and physical restoration for people of all ages and abilities.

Flexibility

All spaces are designed with maximal flexibility and adaptability in an effort to maximize programmable space, minimize life-cycle costs and consider ever-evolving systems of care.

Connectivity

Design solutions have been and continue to be mindful of the need to mitigate isolation both within and beyond the new care complex.

Efficiency

The design is carefully crafted according to a holistic appreciation for staff work flow and client care cycles. Centralized service and support stations improve upon travel distances, work-flow,

operational efficiency, service distribution, care delivery, universal accessibility, wayfinding and life-cycle costs.

Main Street & the New Community Hub

This project is a catalyst for the creation of a new integrated service delivery model.

Main Street

The George Street project introduces an innovative feature to this revitalization initiative – “Main Street” – an internal corridor running the almost entire north south length of the new complex at grade. Main Street offers a distinct public route through the ground floor and connecting critical program spaces, namely long-term care, assisted living and the community service hub.

As a whole, Main Street promotes easy orientation and intuitive wayfinding with unobstructed views to courtyards, gardens, out to George Street, and up to the second level. It maintains strong physical connections with the outdoors by way of multiple access points off George Street. It also offers access to the second floor – physically, via a feature stair just off the main entrance and visually, through the double-height ceiling of the LTC Great Hall.

The Community Hub

Through formal and informal partnerships with the new complex, social agencies will occupy designated spaces along Main Street. These agencies will form an important community hub offering varied client-centered services and animating not only the ground floor and select portions of the second floor (accessible via the central feature stair) but the public realm beyond. As specific uses of these spaces have yet to be determined they are designed to provide as much flexibility and variation as possible.

Generating Efficiency through Centralized Services

Central laundry, kitchen and refuse/recycling facilities are shared across all building programs; a feature design to produce greater operational efficiency as well as reduced overall space requirements for servicing. Opportunities for integration of central storage and other support facilities will be further explored as the project design progresses.

Connecting to the Outdoors

Designed to engage and animate the complex and the larger neighbourhood, indoor ground floor spaces will relate to outdoor spaces through a pattern of landscaped and programmed areas that will provide cues to public vs. private space; main entries vs. secondary entries; and vehicle vs. pedestrian zones.

8.8

DESIGN APPROACH – FURTHER DETAIL

George Street Revitalization – Attachment 6 – October 2015

Courtyards

The smaller of the two long-term care (LTC) courtyards located towards the northern portion of the LTC area is an enclosed space, a Winter garden that will provide natural light to the interior and views of the exterior but also a venue for recreational activities, programming and horticultural pursuits year round.

The larger courtyard is open and positioned towards the southern end of the LTC area (or mid-point of the complex). It has been designed to provide options for walking, working at raised garden beds and respite.

Walled Garden

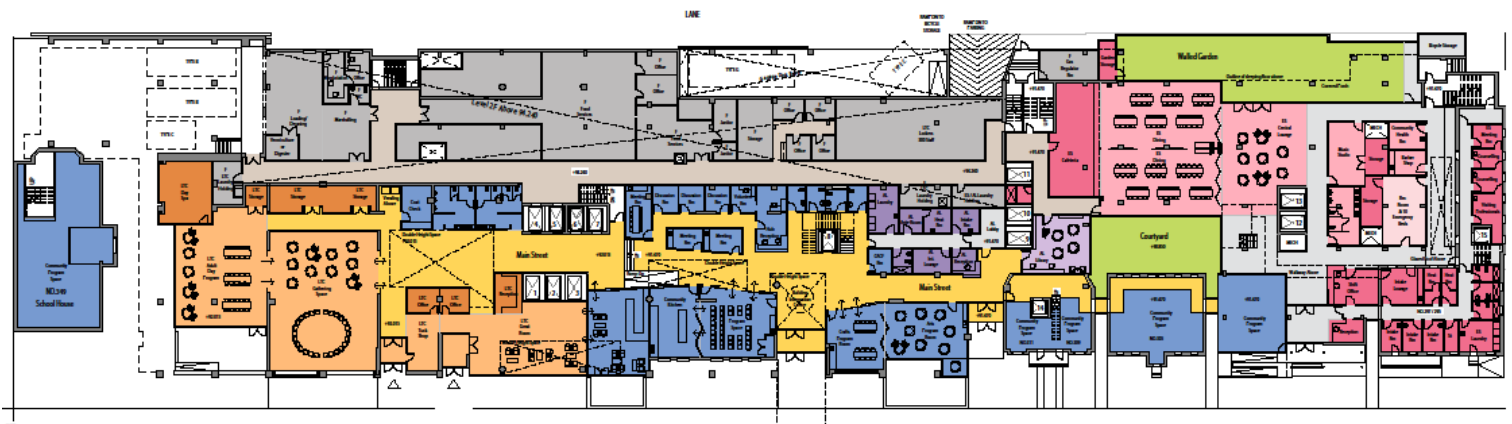
A Walled Garden is located at the South end of the site towards the rear of the complex and providing separation from the service laneway; this space serves the residents of the emergency shelter (ES). We imagine the wall being constructed of brick salvaged from the heritage building repurposing and offering continuity between new and old.

Contemplative Garden

A large garden is located on the ground floor between 305 George Street and the ES dining room. This courtyard is positioned to allow natural light to enter deep into the shelter floor plate while offering beautiful, unobstructed views of the newly restored heritage property.

Program description:

Ground Floor



Long Term Care (LTC)

LTC Communal Space

Towards the north end of the site, a generous canopy shelters the LTC drop-off and entrance; it leads through a vestibule opening into the LTC Great Hall. The Great Hall, a double height lobby space, is accompanied by a reception area (strategically positioned to provide supervision), a Tuck

Shop and administrative offices. Strong visual connections are provided between the seating area of the Great Hall, George Street, the drop-off and the main entrance, offering excellent opportunities for the LTC residents to both observe and experience the flurry of activity indoors and outdoors. The design also supports physical connections between the Great Hall, reception, cafe and/or Main Street during the day with the option for segregation via partitions at night.

A large Gathering Space is strategically located at the north end of Main Street with its own entrance off George Street providing important flex space to the centre. A designated bank of elevators within the Great Hall offers access to the LTC floors above. The Adult Day Program, which can be accessed directly from outside off George Street or from inside off Main Street, provides services to LTC residents as well as other seniors living in the community. The Adult Day Program can make use of the adjacent LTC Gathering Space, a secure terrace and a generous multi-purpose courtyard space to lead its activities. The courtyard, located between the Schoolhouse (349 George Street) and the main building, also provides temporary parking for buses transporting non-resident day program participants.

Community Hub Space

Community Program Space

The community hub invites formal and informal partnerships with local social agencies to offer client-specific services and services for the local neighbourhood in dedicated spaces along the interior “Main Street.” The hub extends to and includes portions of the second floor; the double height main street, a dedicated elevator and stair link service spaces above visually and physically with those below. As specific uses of these spaces have yet to be determined they are designed to provide as much flexibility and variation as possible.

Assisted Living (AL)

AL Staff Space

Just beyond the AL main entrance is a designated AL Intake & Welcome Centre for new and returning AL residents. Within the Welcome Centre is shower, laundry, washroom facilities, lounge and intake offices.

AL Communal Space

Adjacent to the Intake & Welcome Centre is the AL Library with views of the Courtyard Garden behind 305 George Street.

In addition to the library, AL residents have direct access to Main Street and the many Community Hub services located along it. Access to the AL residence floors and accompanying support space is gained via a controlled door adjacent to the Welcome Centre leading to a secure lobby with a dedicated pair of elevators

Emergency Shelter (ES)

ES Communal Space

Through the ES main entrance doors is a generous vestibule accompanied by a designated ES Intake & Welcome Centre with administration and counselling spaces occupying the newly integrated heritage building. Beyond the vestibule are the major communal spaces supporting the ES program; locating amenities on the ground floor encourages residents to participate in the larger community. These include the community health room, barber shop, music studio and central lounge. Also on this floor are two adjoining dining areas accommodating 50 people each. These can be combined to provide one large space for special occasions and/or community events.

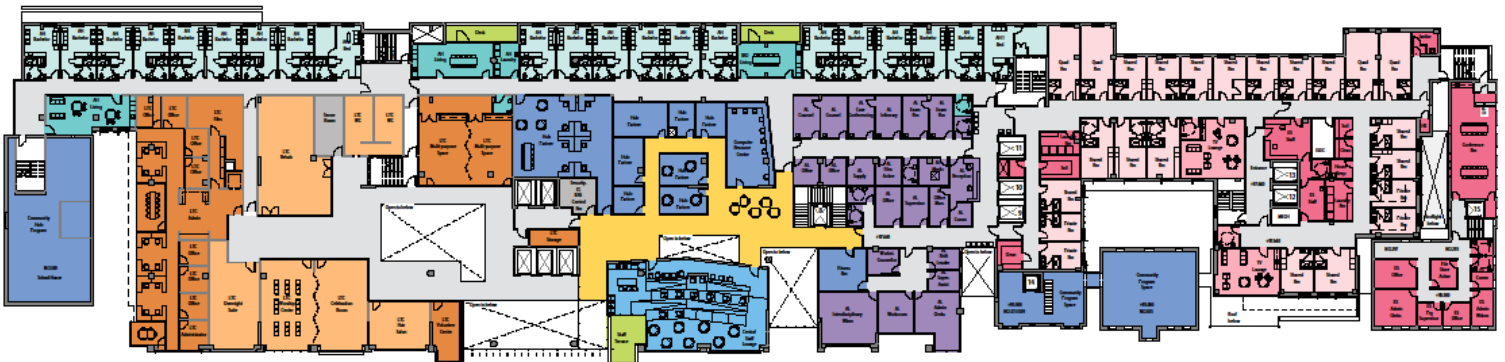
Here, transparency is a key element of design. Sight lines are carefully constructed from the Main Entrance through the shelter commons and into the Walled Garden offering a sense of openness. A secure bank of dedicated ES elevators provides access to all other levels of the ES program.

Facility Support Space

All facility support spaces are given access to natural light, ventilation and views of the service lane (located behind the building) providing opportunities for informal supervision and enhanced security.

Central laundry, kitchen and refuse/recycling facilities are clustered together to form services hubs on every level designed to support all programs across the floor. Combining all staff areas into one space reduces duplication of staff kitchens, dining and lounges; promotes synergies and collaboration between different staff members; and maximizes operational efficiency.

Second Floor



Long-Term Care (LTC)

Upon arrival to the second floor via elevator, residents, family and staff emerge in a large lobby space with expansive views of George Street, offering immediate orientation and intuitive way

finding. As a whole, the Second floor contains the central amenity spaces specific to the LTC organized around the double-height Main Street below. These spaces include a hair salon, rehab space, worship centre, and celebration room which together make up a secondary amenity hub. Two large multi-purpose spaces complement this amenity hub offering opportunities for art and music programs.

The generous corridor that connects the amenities of this secondary hub also provides an informal gathering space from which residents can enjoy the action and animation of the ground floor Main Street and LTC Great Room below while feeling safe and contained. A skylight floods the corridor with natural light and offers residents views into the third floor courtyard and green wall located directly above.

The LTC second level also comprises the main administration and central staff blocks which provide a layer of informal supervision.

Affordable Housing (AH)

AH Bedroom

There are 19 self-contained studio apartments and two one-bedroom apartments located on the second floor and along the eastern edge of the complex. These units are accessed from the ground floor through the community hub.

AH Communal Space

There are two amenity rooms complete with kitchens and private outdoor terraces that accompany these apartments. There is also a separate laundry facility for AH residents. These apartments are ideally situated within the facility so as to be close to assisted living offices as well as other community hub related support services.

General

AH Communal Space

A centralized staff area that includes a kitchenette, lounge, dining area and washrooms is located on the second floor at approximately the mid-point of the hub. The area is easily accessible from LTC, AL and ES. There are large windows overlooking George Street and access to a staff terrace. The space has been located and designed to encourage interdepartmental relationships and to promote staff use of the hub facilities. Lockers, change rooms and showers are also located in the lower areas of each respective program.

Assisted Living (AL)

AL Communal Space

Two program areas are located within the central portion of the building on the second floor level: AL administration and the Inner City Health Services Centre. These programs share a lobby/waiting area and reception and are accessible via private resident elevators, a public elevator off Main Street or a central feature stair just beyond the building's main entrance. Public access to this part of the complex allows for both residents and the larger community to make use of Inner City Health services.

AL Staff Space

The AL Administration area comprises administration offices, staff offices, clerical & filing spaces many of which enjoy views and natural light from windows overlooking George Street.

Emergency Shelter (ES)

ES Sleeping Rooms

Shelter rooms are located along the perimeter of a looping corridor on both the second and third level. All of these rooms have unobstructed views of either the garden courtyard or the city. The majority of rooms are shared by two people; with each bed having a clearly defined space. Three sleeping rooms are single occupancy and four sleeping rooms have four beds. All sleeping rooms have an ensuite washroom consisting of toilet, sink and European shower. The quad rooms have an additional lavatory installed outside the ensuite washroom.

ES Staff Space

In the centre of the loop is a staff area for general oversight along with certain services including storage, housekeeping and linen room. Additional service rooms are also located at various points along the looping corridor.

ES Communal Space

The communal areas are located to overlook George Street or the contemplative garden below, connecting ES residents to the community.

Third Floor



Long Term Care (LTC)

The LTC floor is organized around a hierarchy of interconnected spaces from the most public (lounge, activity rooms, terrace and dining) to the most private (bedroom, spa, therapy spaces). The LTC Resident Home Areas (RHAs) begin at the third level.

LTC Communal Space

Doors of main elevator shaft open onto a large lounge with expansive west-facing glazing offering views of George Street, scads of natural light and access to two generous terraces. Adjacent to the elevators is a central communications centre staffed by nurses and support workers welcoming residents as they arrive.

Opposite the lounge facing east is a dining room complete with a home-like kitchen. The dining room is divided into two zones to provide different dining experiences. With limited partitioning of amenity spaces and extensive glazing, residents in the dining room can enjoy both outward vistas and/or inward views.

LTC Bedroom & Spa Area

The LTC Resident Home Areas (RHAs) begin at the third level. Two RHAs are organized around a looping corridor system that provides excellent opportunities for residents to ambulate and/or rest and enjoy views of the activity spaces within and the city beyond. While two distinct courtyards, a smaller enclosed courtyard (Winter garden) and a larger open courtyard, occupy the centres of these loops, bedrooms line their perimeter, offering unobstructed views inwards towards amenity spaces (including the courtyards) and outwards towards the city. Greater privacy is achieved with this configuration with only 22 of 63 rooms facing into other rooms. Bedrooms occupy the majority of the floor area offering both semi-private and private options. Despite the constraints of this tight urban site and complex programmatic requirements, each bedroom design exceeds the MOHLTC guidelines for minimum sizes. Of note, all bedrooms are equipped with recessed mounted ceiling lifts.

Each of the two RHAs is accompanied by a spa; these spas are positioned to back directly onto their nearest courtyard gaining important access to natural light.

8.8

DESIGN APPROACH – FURTHER DETAIL

George Street Revitalization – Attachment 6 – October 2015

LTC Staff Space

Strategically positioned next to the main elevator shaft, the communications centre provides supervision of and support to the lounge area, the terraces and other nearby amenity spaces. It is the primary Staff space servicing LTC on this floor and is positioned directly across a bank of service elevators for efficient access to the complex's core service facilities. Two additional staff areas are organized into nodes at opposite ends of the designated LTC area, one in each of the two RHAs. The first node with serveries, cleaning supplies, utilities and supply storage, is located between the larger LTC courtyard and the ES access doors. The second node is located between the smaller courtyard and resident rooms, and includes a soiled utility room, janitor closet, equipment storage, satellite office and touchdown station (part of the therapy room). Both nodes are positioned to allow staff to provide informal supervision to areas well beyond the communications centre.

Emergency Shelter (ES)

Please refer to the description provided for Level 2.

Typical Floor (4, 5, 6, 7 & 8th Floor)



Long Term Care (LTC)

Please refer to the description provided for Level 3.

Assisted Living (AL)

AL resident spaces begin on the fourth floor and are organized around a hierarchy of movement from the most public (living room, hobby rooms, dining, terraces and office) located just off the elevators to the most private areas (sleeping rooms), located down and around a looping corridor. These floors align with the adjacent LTC floor levels, allowing for controlled staff access and emergency exiting.

AL Bedrooms

8.8

DESIGN APPROACH – FURTHER DETAIL

George Street Revitalization – Attachment 6 – October 2015

The AL bedroom wing is organized around a looping corridor system that provides an excellent opportunity for residents to ambulate. All of the sleeping rooms are located along the perimeter of the AL floor plate and provide unobstructed views to the exterior.

Each AL residential floor contains 26 beds, with a mix of single and shared sleeping rooms with a maximum of two residents per room, each bed having a clearly defined space. Each room contains an ensuite bathroom with toilet, basin and shower. All of the 26 beds are located in rooms with accessible, roll-in showers, accommodating residents with mobility issues.

AL Communal Space

The common areas on each floor are organized as a sequence of interconnected open spaces purposely articulated to promote varying degrees of privacy. Each floor also makes available a private bathing room with lift assist for resident use.

AL Staff Space

Staff occupying either the team room or counselling rooms have clear sight lines to the majority of the common areas and to the elevator lobby. The counselling rooms have hand wash sinks so that they can double as exam rooms if required. Service rooms are provided for storage, linens and housekeeping.

Outdoor / Green Space

Outdoor access is provided in three locations on each AL residential floor. A deck running the full length of the living room looks west over 305 George Street. A deck running the full length of the dining room looks east over the rear laneway. Finally, a smaller deck off the quiet room overlooks 311 George Street; it is the most secluded of the three and may be suitable as an outdoor smoking area.

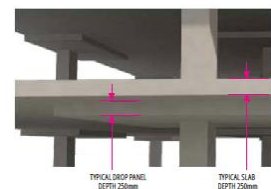
Material, Quality, Durability & Resiliency

Material, Quality & Durability

Key to the sustainability of this project is the selection and use of durable materials, within and without, that will provide a long service life with minimum maintenance. This includes exterior materials that do not require refinishing to maintain their appearance and interior materials that not only withstand normal wear and tear without premature deterioration but are particularly resistant to the impact of mobility assistive devices such as power wheelchairs and scooters that are becoming increasingly common.

Resiliency

Designing for building resiliency means reducing or even eliminating the facility's demand for externally supplied utilities and instead allow for smaller, less expensive and more manageable systems to be employed.

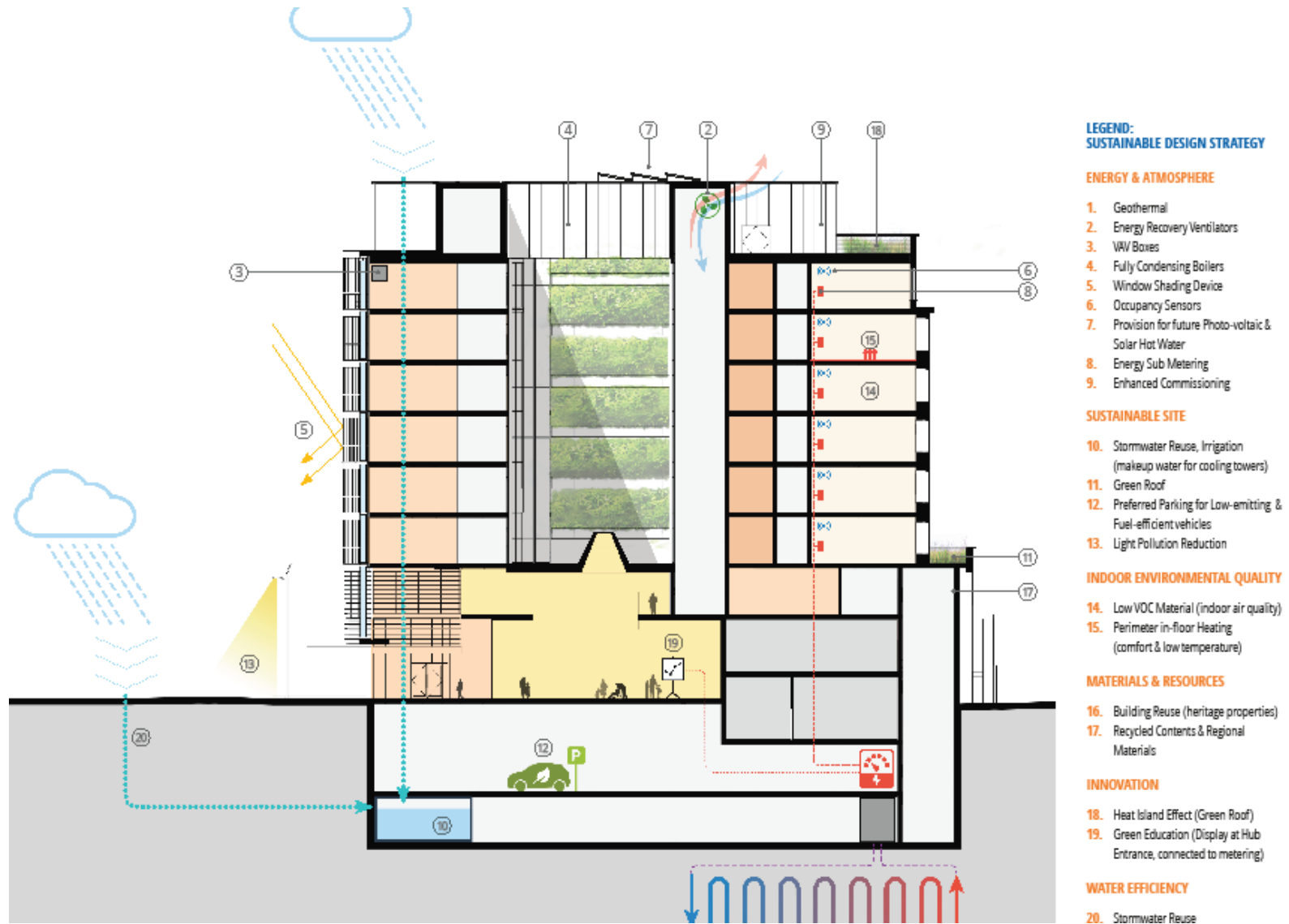


8.8 DESIGN APPROACH – FURTHER DETAIL

George Street Revitalization – Attachment 6 – October 2015

Sustainability

The buildings will comply with the Toronto Green Standard and will be targeting LEED Silver certification.



8.9 ILLUSTRATIONS AND EARLY CONCEPTS

George Street Revitalization – Attachment 6 – October 2015

APPENDIX 9 – ILLUSTRATIONS AND EARLY CONCEPTS

See next page.

8.9 ILLUSTRATIONS AND EARLY CONCEPTS

George Street Revitalization – Attachment 6 – October 2015



Aerial View of Site

8.9 ILLUSTRATIONS AND EARLY CONCEPTS

George Street Revitalization – Attachment 6 – October 2015



Existing Property North of Seaton House



Existing Property with Fence across Seaton House



Lane behind Seaton House



George Street looking North



George Street looking South



George Street looking North

George Street Today

8.9 ILLUSTRATIONS AND EARLY CONCEPTS

George Street Revitalization – Attachment 6 – October 2015



Existing and Proposed Entrances

8.9 ILLUSTRATIONS AND EARLY CONCEPTS

George Street Revitalization – Attachment 6 – October 2015

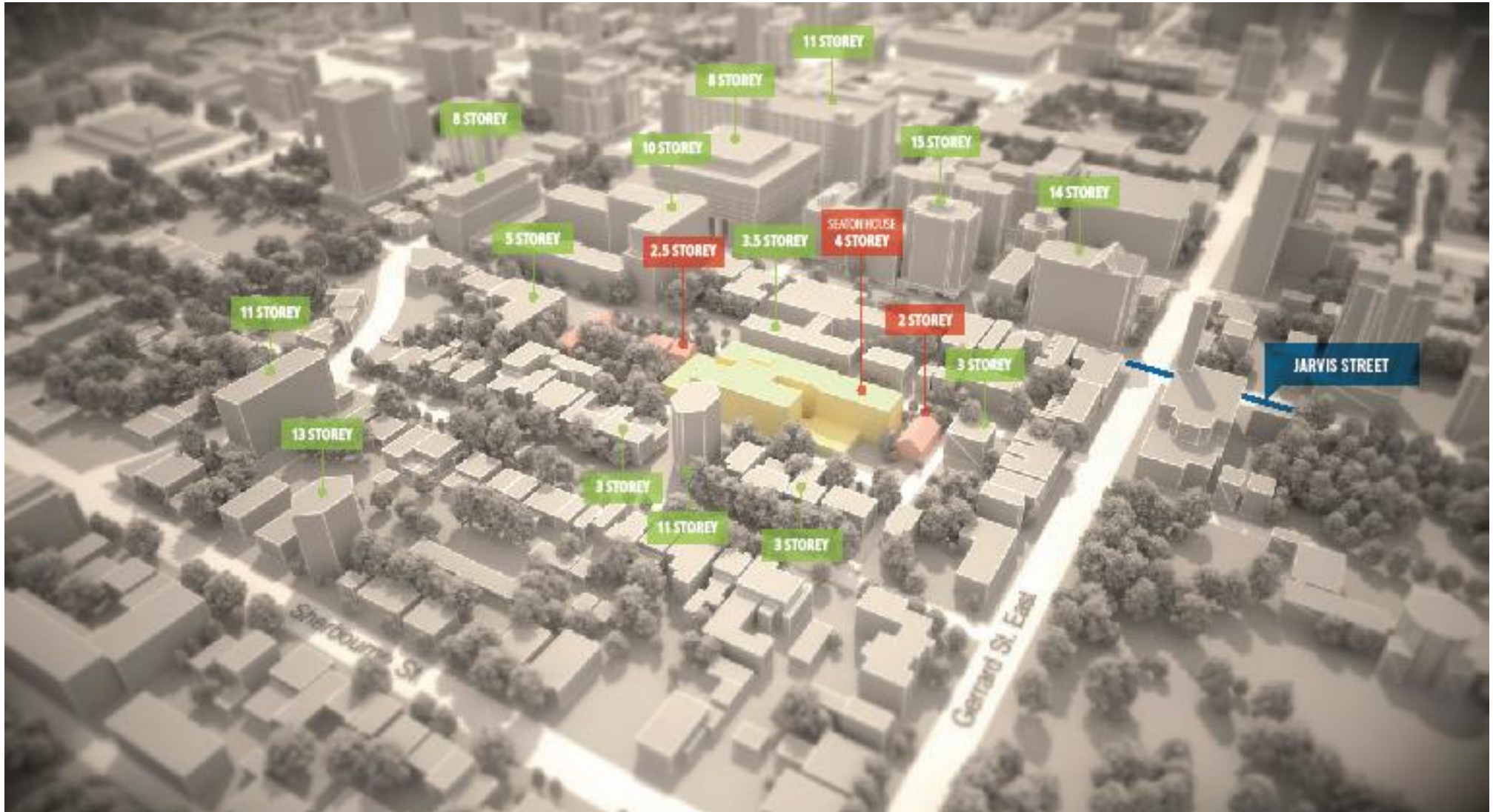
2015 AERIAL PHOTO



Site in Context

8.9 ILLUSTRATIONS AND EARLY CONCEPTS

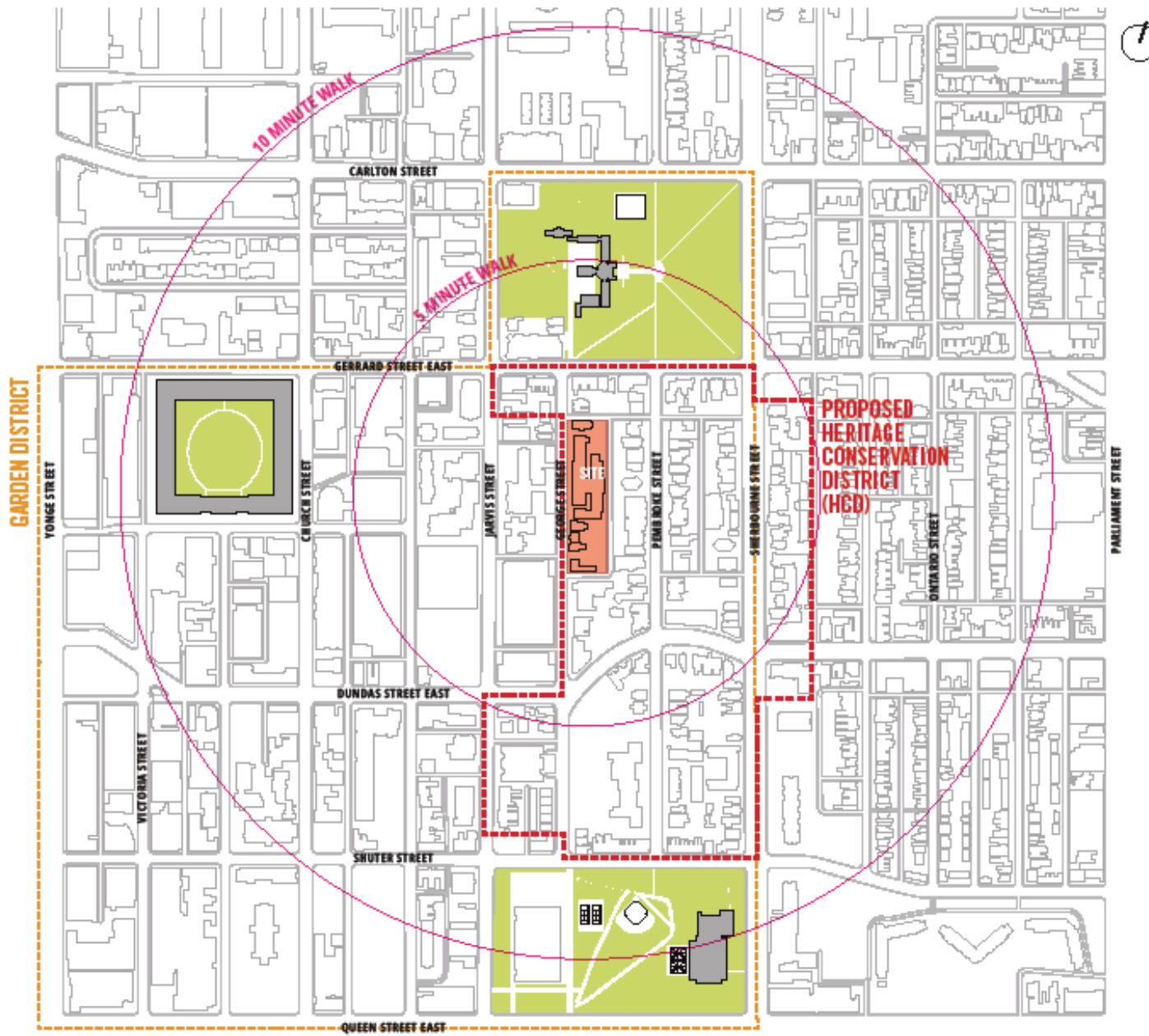
George Street Revitalization – Attachment 6 – October 2015



Current Site in Context

8.9 ILLUSTRATIONS AND EARLY CONCEPTS

George Street Revitalization – Attachment 6 – October 2015



8.9 ILLUSTRATIONS AND EARLY CONCEPTS

George Street Revitalization – Attachment 6 – October 2015

1884 GOADS FIRE INSURANCE PLAN



1884 Goads Fire Insurance Plan

8.9 ILLUSTRATIONS AND EARLY CONCEPTS

George Street Revitalization – Attachment 6 – October 2015

1910-1912 GOADS FIRE INSURANCE PLAN



1910-1912 Goads Fire Insurance Plan

8.9 ILLUSTRATIONS AND EARLY CONCEPTS

George Street Revitalization – Attachment 6 – October 2015

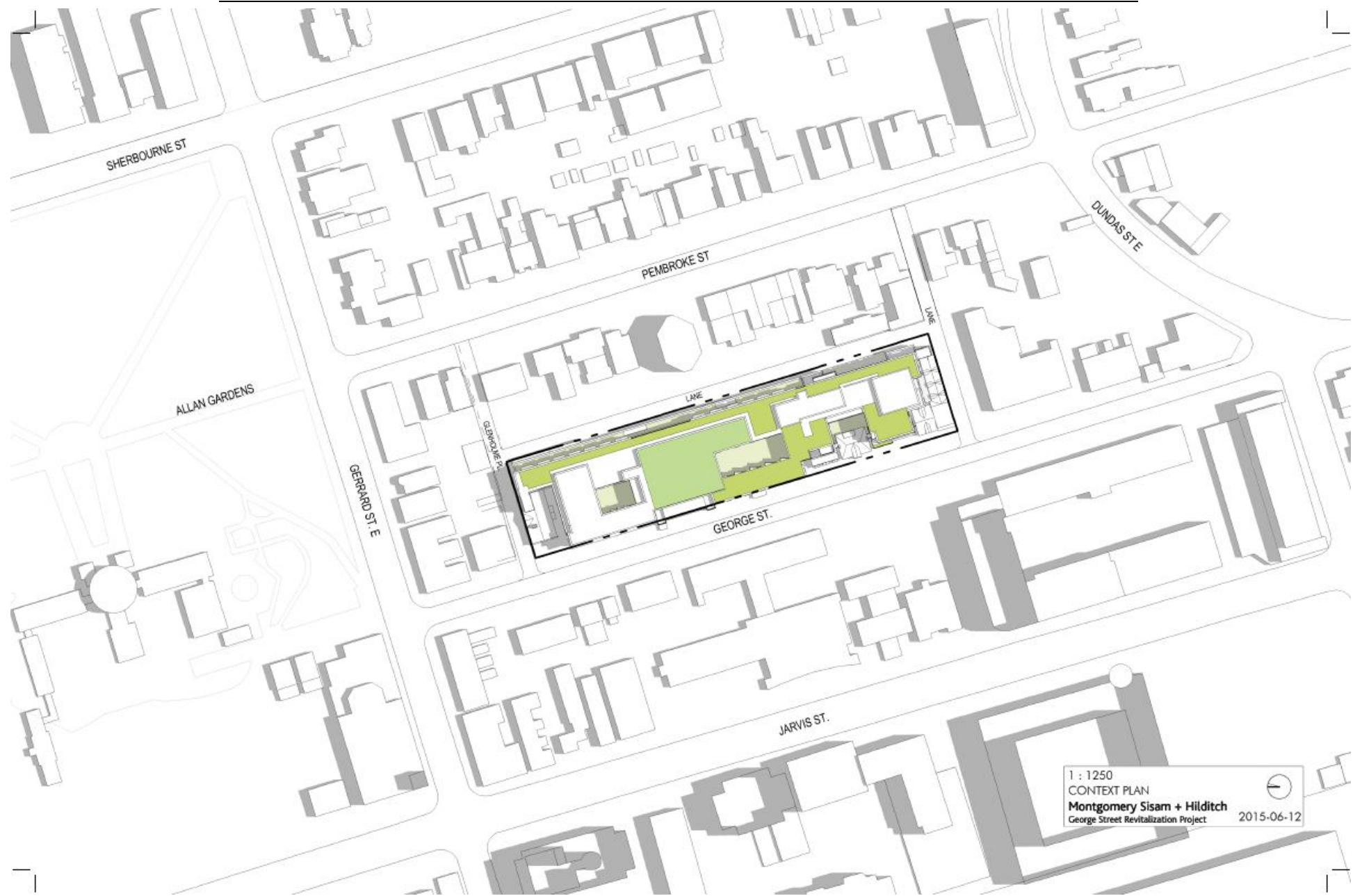
1957-1960 CITY OF TORONTO PLANNING BOARD ATLAS



1957-1960 City of Toronto Planning Board Atlas

8.9 ILLUSTRATIONS AND EARLY CONCEPTS

George Street Revitalization – Attachment 6 – October 2015



1 : 1250
CONTEXT PLAN
Montgomery Sisam + Hilditch
George Street Revitalization Project 2015-06-12

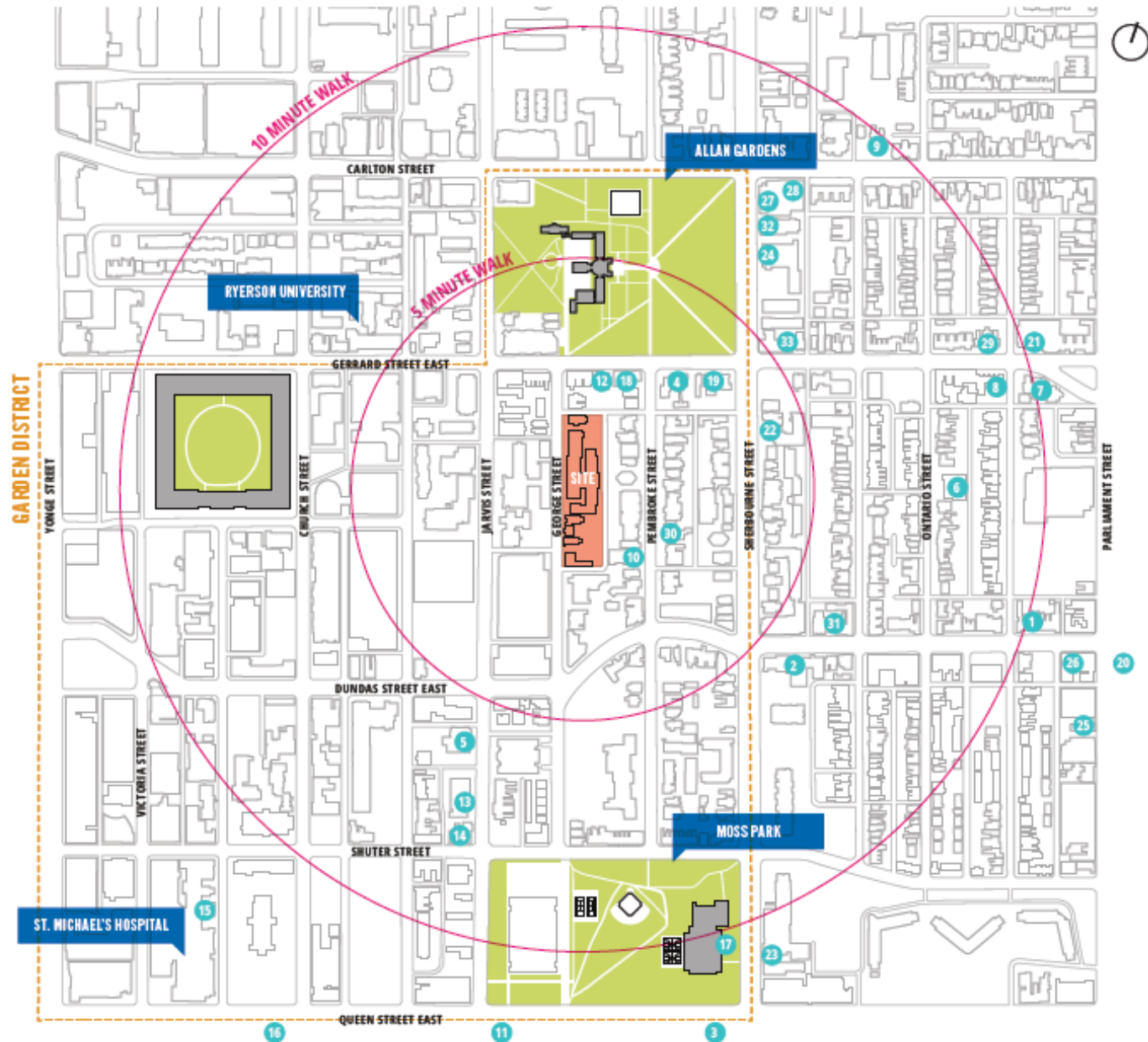
8.9

ILLUSTRATIONS AND EARLY CONCEPTS

George Street Revitalization – Attachment 6 – October 2015

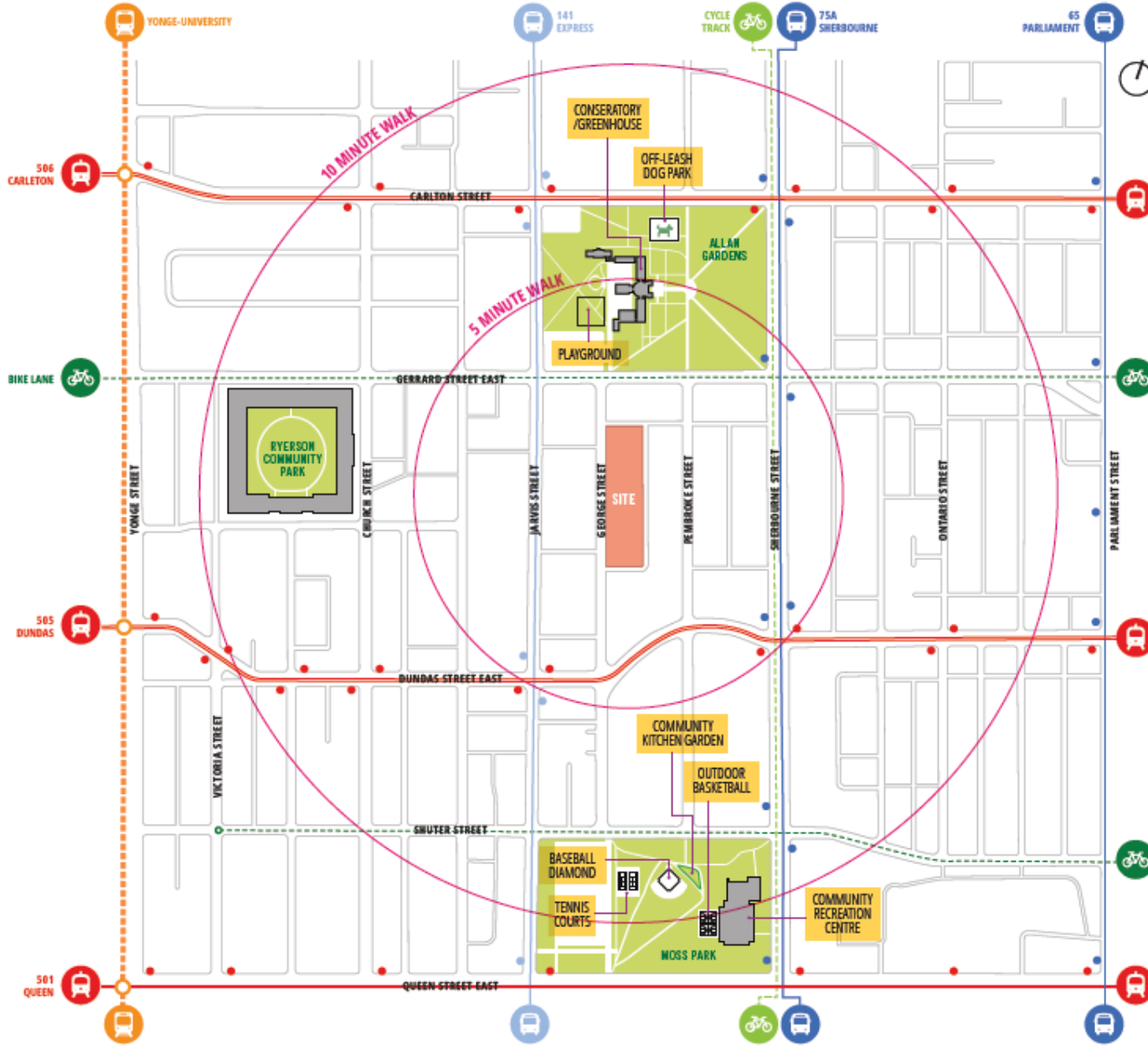
LEGEND: COMMUNITY RESOURCES

1. 416 Community Support for Women
2. All Saints Church-Community Centre (Open Door Centre)
3. Anishnawbe Health Toronto
4. Anishnawbe Health Toronto
5. Canadian Centre for Victims of Torture
6. Central Neighbourhood House
7. Centre for Community Learning & Development, Parliament Street Library
8. Children's Book Bank
9. Dixon Hall Neighbourhood Services
10. Ecuhome Corporation
11. Fred Victor Centre
12. Gerrard Early Learning Centre
13. Good Neighbours' Club
14. Homes First Society
15. Inner City Family Health Team
16. Inner City Health Program, St. Michale's Hospital
17. John Innes Community Centre
18. Miziwe Biik Aboriginal Employment & Training
19. Native Women's Resource Centre of Toronto
20. Regent Park Community Health Centre
21. Yonge Street Mission, Christian Community Centre
22. Robertson House
23. Salvation Army Maxwell Meighen Centre
24. Sherbourne Health Centre
25. Sound Times Support Services
26. St. Jude Community Homes
27. St. Luke's United Church, Allan Gardens Food Bank
28. St. Luke's United Church, Mixed Company Theatre
29. St. Michaels Homes
30. Street Haven at the Crossroads
31. Street Health
32. The Reiki Centre at Sherbourne Place
33. Toronto People with AIDS Foundation



8.9 ILLUSTRATIONS AND EARLY CONCEPTS

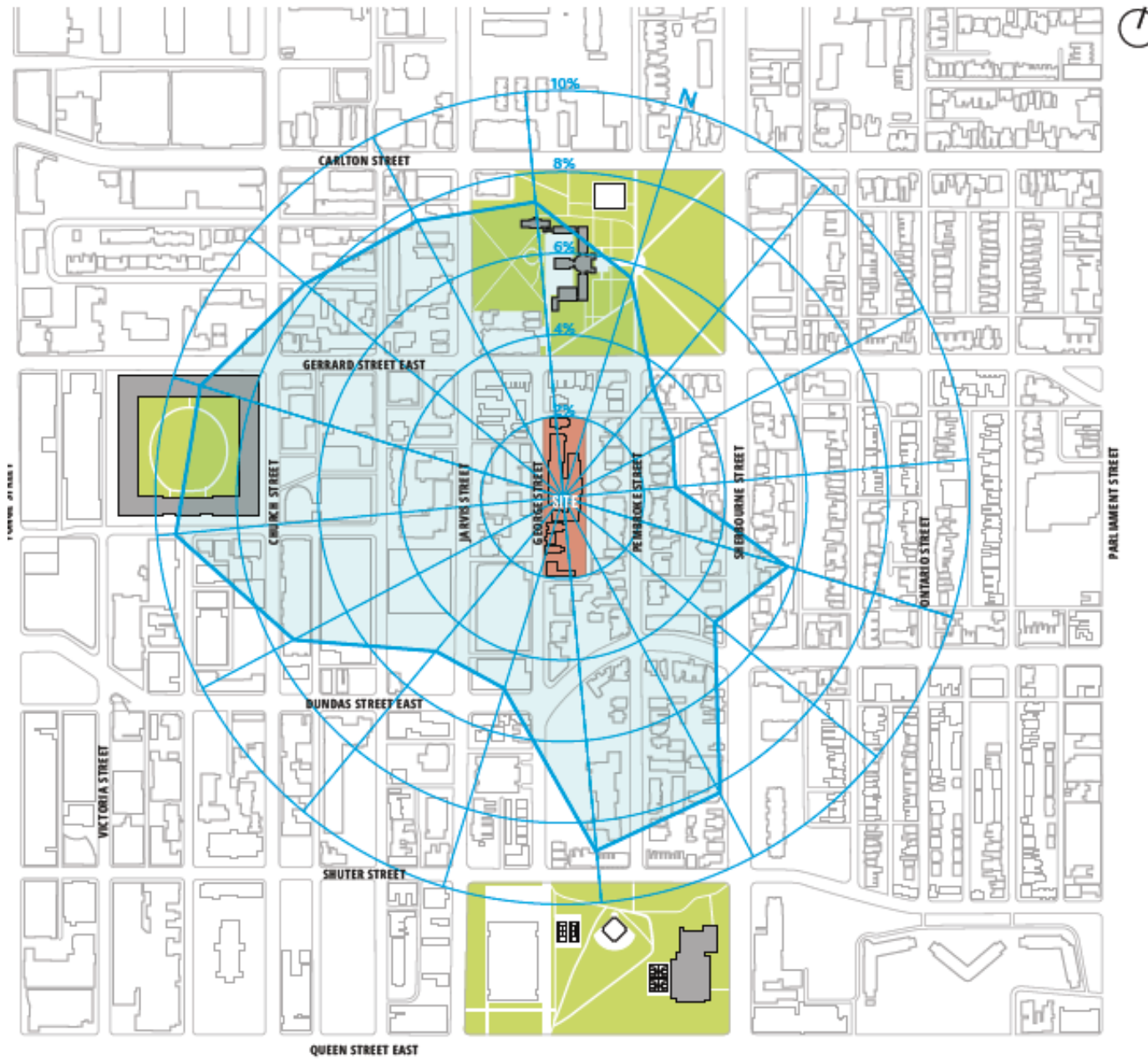
George Street Revitalization – Attachment 6 – October 2015



Surrounding Transportation

8.9 ILLUSTRATIONS AND EARLY CONCEPTS

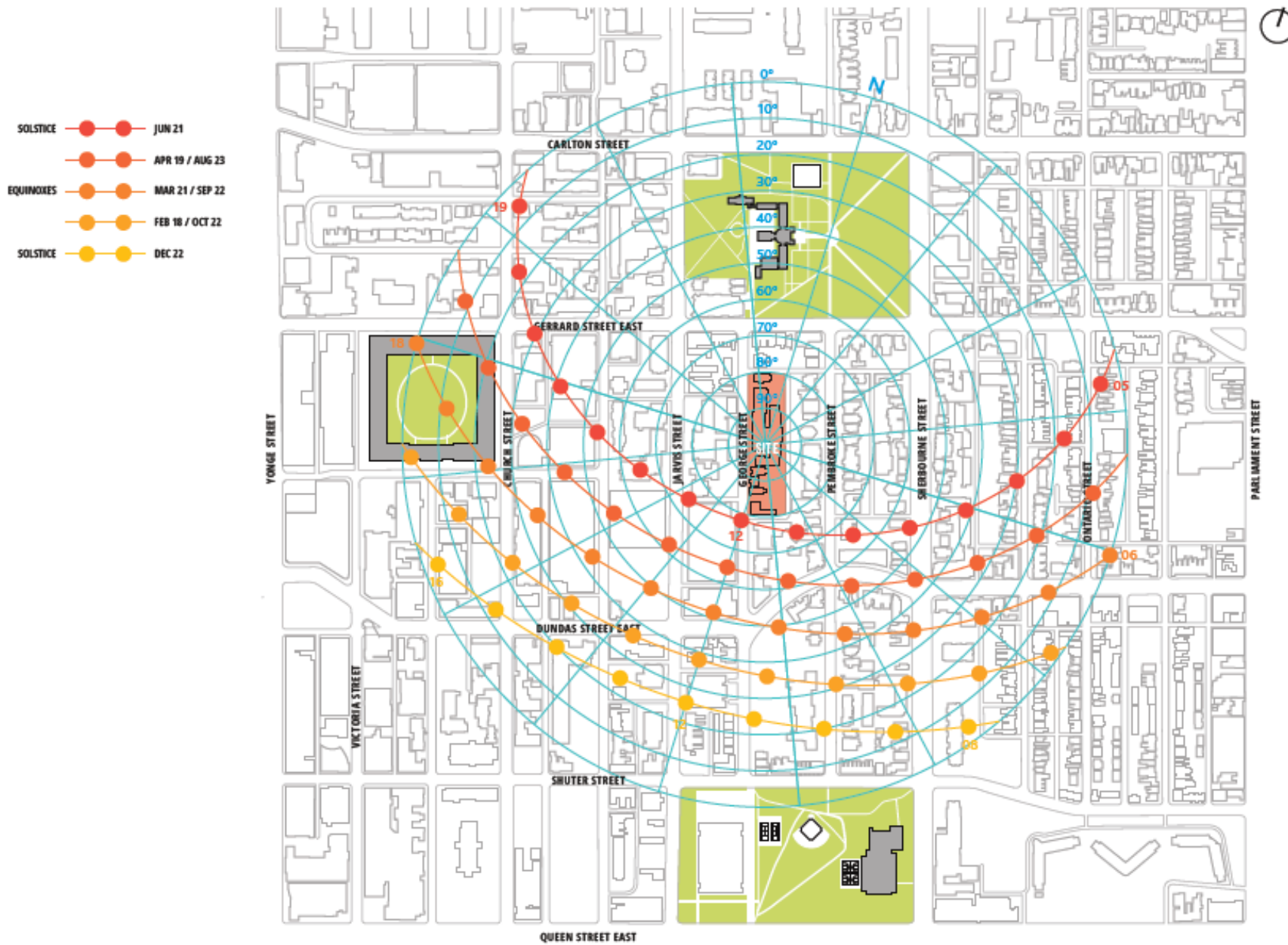
George Street Revitalization – Attachment 6 – October 2015



8.9

ILLUSTRATIONS AND EARLY CONCEPTS

George Street Revitalization – Attachment 6 – October 2015



8.9 ILLUSTRATIONS AND EARLY CONCEPTS

George Street Revitalization – Attachment 6 – October 2015



Split View (Artist's conceptions based on 33% design and subject to change.)

8.9 ILLUSTRATIONS AND EARLY CONCEPTS

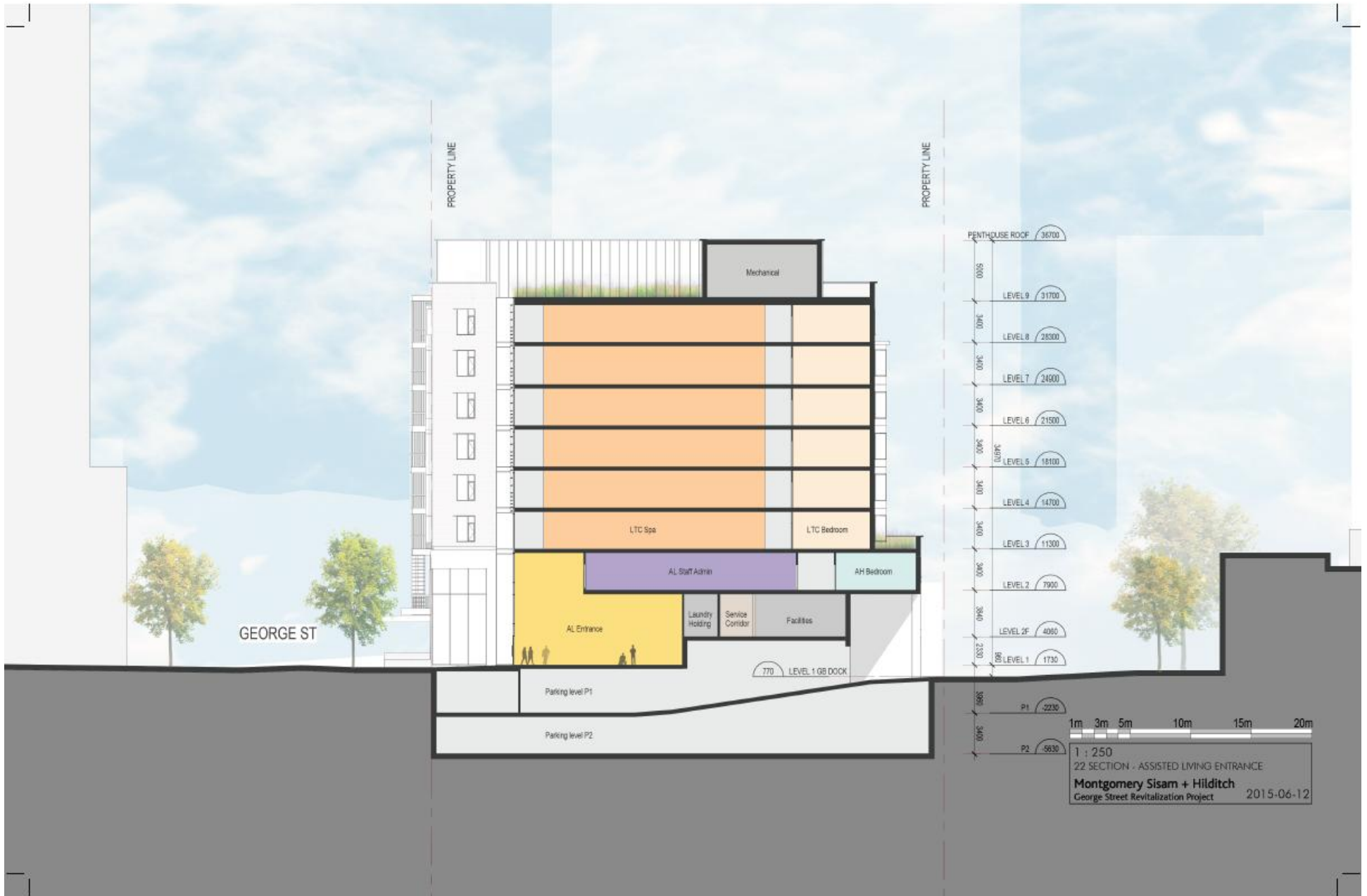
George Street Revitalization – Attachment 6 – October 2015



Western Elevation (Artist's conceptions based on 33% design and subject to change.)

8.9 ILLUSTRATIONS AND EARLY CONCEPTS

George Street Revitalization – Attachment 6 – October 2015



Split View (Artist's conceptions based on 33% design and subject to change.)

8.9 ILLUSTRATIONS AND EARLY CONCEPTS

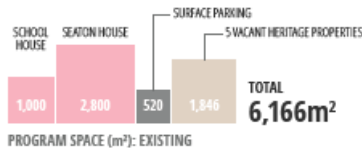
George Street Revitalization – Attachment 6 – October 2015

SECTION 1.2

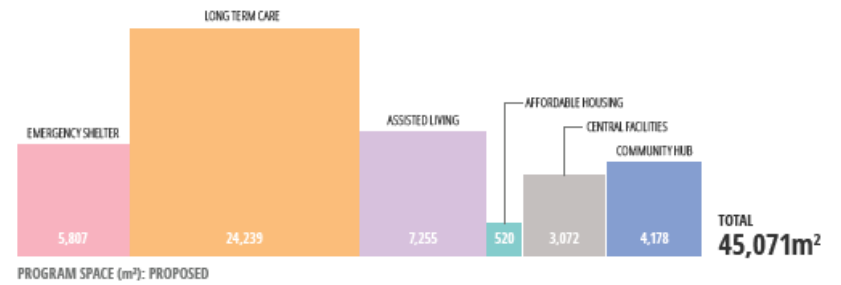
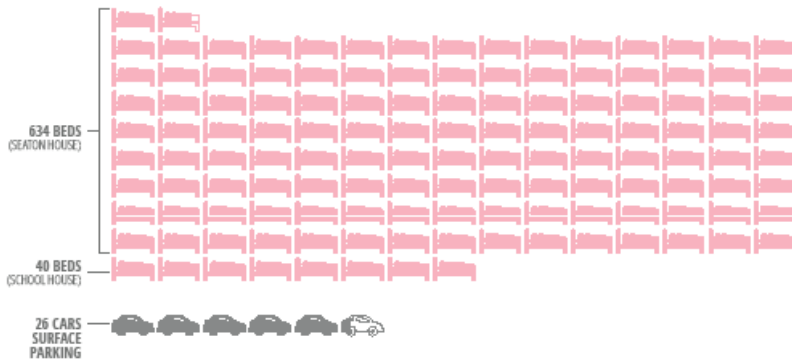
Seaton House: Before & After



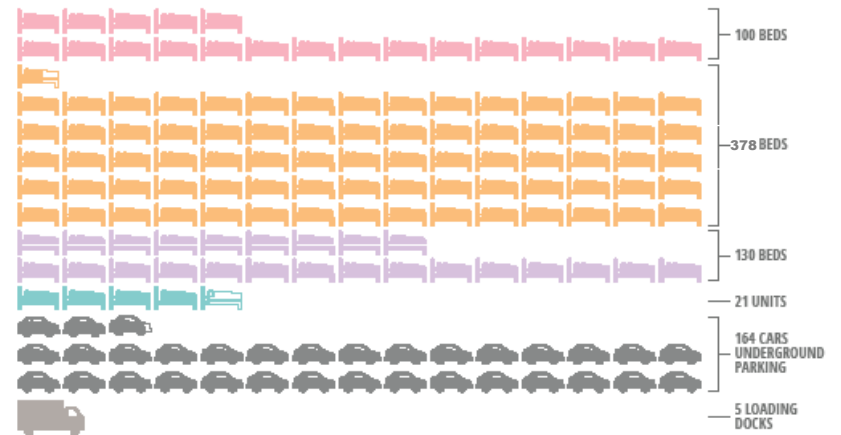
SITE AREA (m²)



PROGRAM SPACE (m²): EXISTING



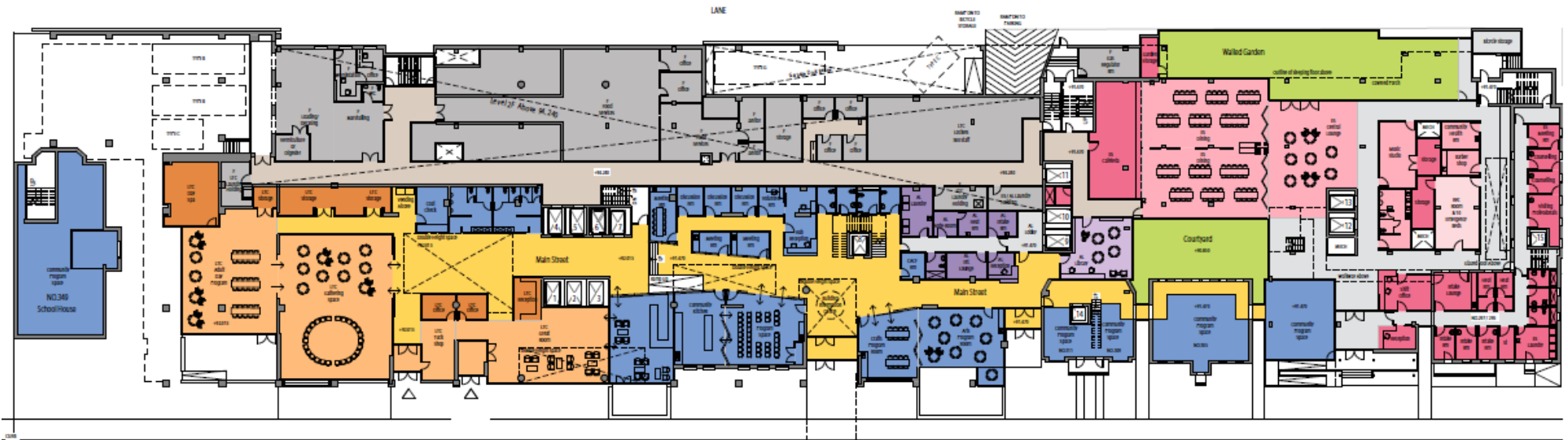
PROGRAM SPACE (m²): PROPOSED



8.9 ILLUSTRATIONS AND EARLY CONCEPTS

George Street Revitalization – Attachment 6 – October 2015

Ground Floor



Ground Floor (Artist's conceptions based on 33% design and subject to change.)

8.9 ILLUSTRATIONS AND EARLY CONCEPTS

George Street Revitalization – Attachment 6 – October 2015

Second Floor



Second Floor (Artist's conceptions based on 33% design and subject to change.)

8.9 ILLUSTRATIONS AND EARLY CONCEPTS

George Street Revitalization – Attachment 6 – October 2015

Third Floor



Third Floor (Artist's conceptions based on 33% design and subject to change.)

8.9 ILLUSTRATIONS AND EARLY CONCEPTS

George Street Revitalization – Attachment 6 – October 2015

Typical Floor (4, 5, 6, 7 & 8th Floor)



Typical Floor (Artist's conceptions based on 33% design and subject to change.)

8.9 ILLUSTRATIONS AND EARLY CONCEPTS

George Street Revitalization – Attachment 6 – October 2015



View Looking Northeast (Artist's conceptions based on 33% design and subject to change.)

8.9 ILLUSTRATIONS AND EARLY CONCEPTS

George Street Revitalization – Attachment 6 – October 2015



Alternative View Looking Northeast (Portrays Street Festival) (Artist's conceptions based on 33% design and subject to change.)

8.9 ILLUSTRATIONS AND EARLY CONCEPTS

George Street Revitalization – Attachment 6 – October 2015



View Looking Northeast (Artist's conceptions based on 33% design and subject to change.)

8.9 ILLUSTRATIONS AND EARLY CONCEPTS

George Street Revitalization – Attachment 6 – October 2015



View Looking Southeast (Artist's conceptions based on 33% design and subject to change.)

8.9 ILLUSTRATIONS AND EARLY CONCEPTS

George Street Revitalization – Attachment 6 – October 2015



View Looking East (Artist's conceptions based on 33% design and subject to change.)

8.9 ILLUSTRATIONS AND EARLY CONCEPTS

George Street Revitalization – Attachment 6 – October 2015



View from Pembroke Street Looking West (Artist's conceptions based on 33% design and subject to change.)

8.9 ILLUSTRATIONS AND EARLY CONCEPTS

George Street Revitalization – Attachment 6 – October 2015



Shelter Dining Room

Shelter Dining Room (Artist's conceptions based on 33% design and subject to change.)

8.9 ILLUSTRATIONS AND EARLY CONCEPTS

George Street Revitalization – Attachment 6 – October 2015

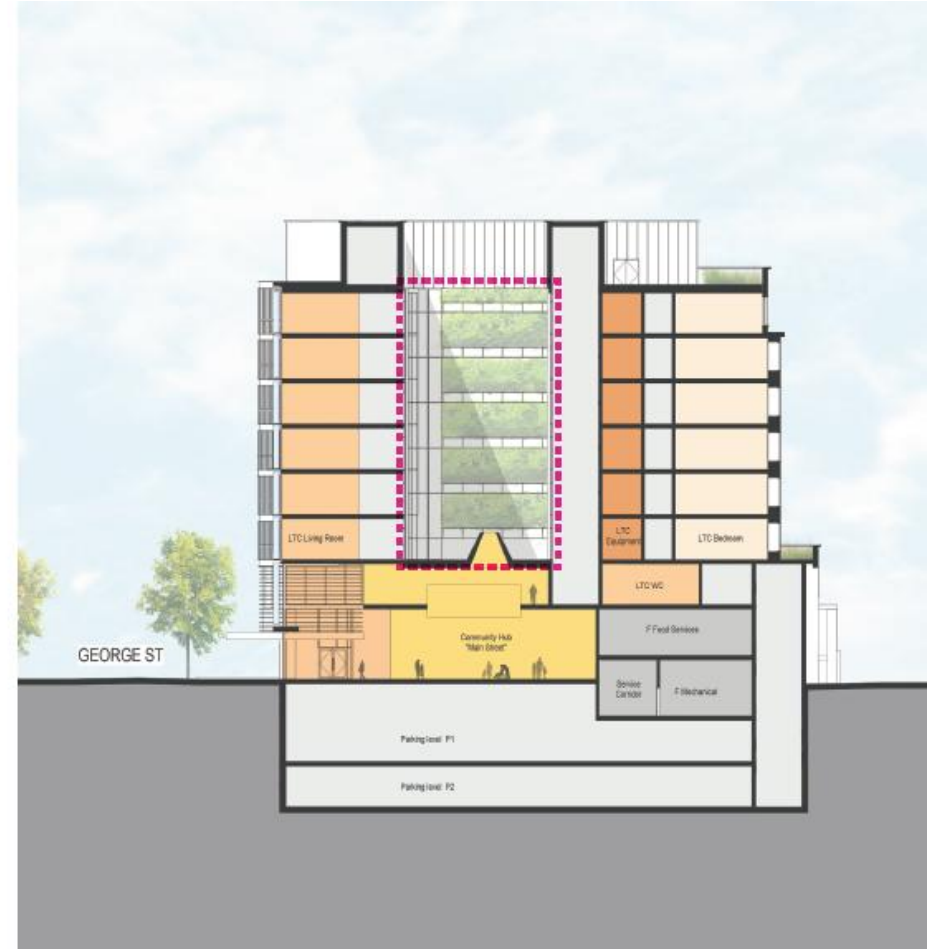


Long Term Care Great Room / Lobby

Long-Term Care Great Room/Lobby (Artist's conceptions based on 33% design and subject to change.)

8.9 ILLUSTRATIONS AND EARLY CONCEPTS

George Street Revitalization – Attachment 6 – October 2015



Long-Term Care Enclosed Courtyard at 3rd floor level, with Living Wall (Artist's conceptions based on 33% design and subject to change.)

8.9 ILLUSTRATIONS AND EARLY CONCEPTS

George Street Revitalization – Attachment 6 – October 2015



LTC LIVING ROOM FACING GEORGE STREET

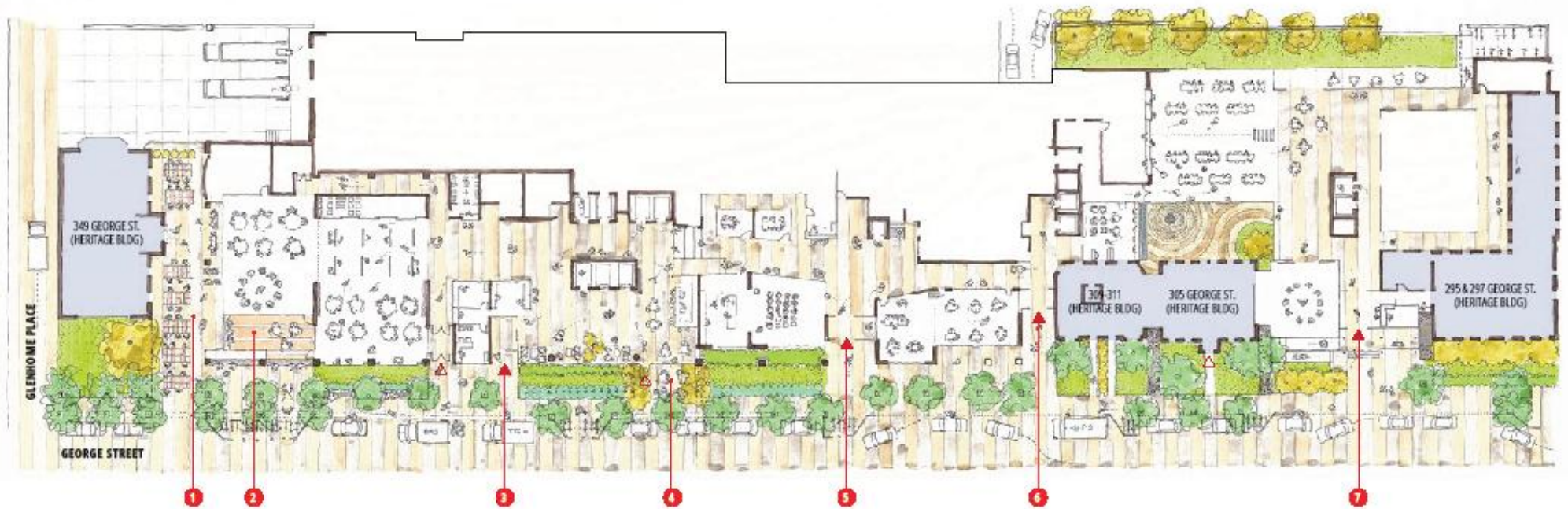


Long-Term Care Living Room Facing George Street (Artist's conceptions based on 33% design and subject to change.)

8.9 ILLUSTRATIONS AND EARLY CONCEPTS

George Street Revitalization – Attachment 6 – October 2015

Connecting to Street & Community



Connecting to Street and Community (Artist's conceptions based on 33% design and subject to change.)

8.9 ILLUSTRATIONS AND EARLY CONCEPTS

George Street Revitalization – Attachment 6 – October 2015



Precedents for Public Realm

8.9 ILLUSTRATIONS AND EARLY CONCEPTS

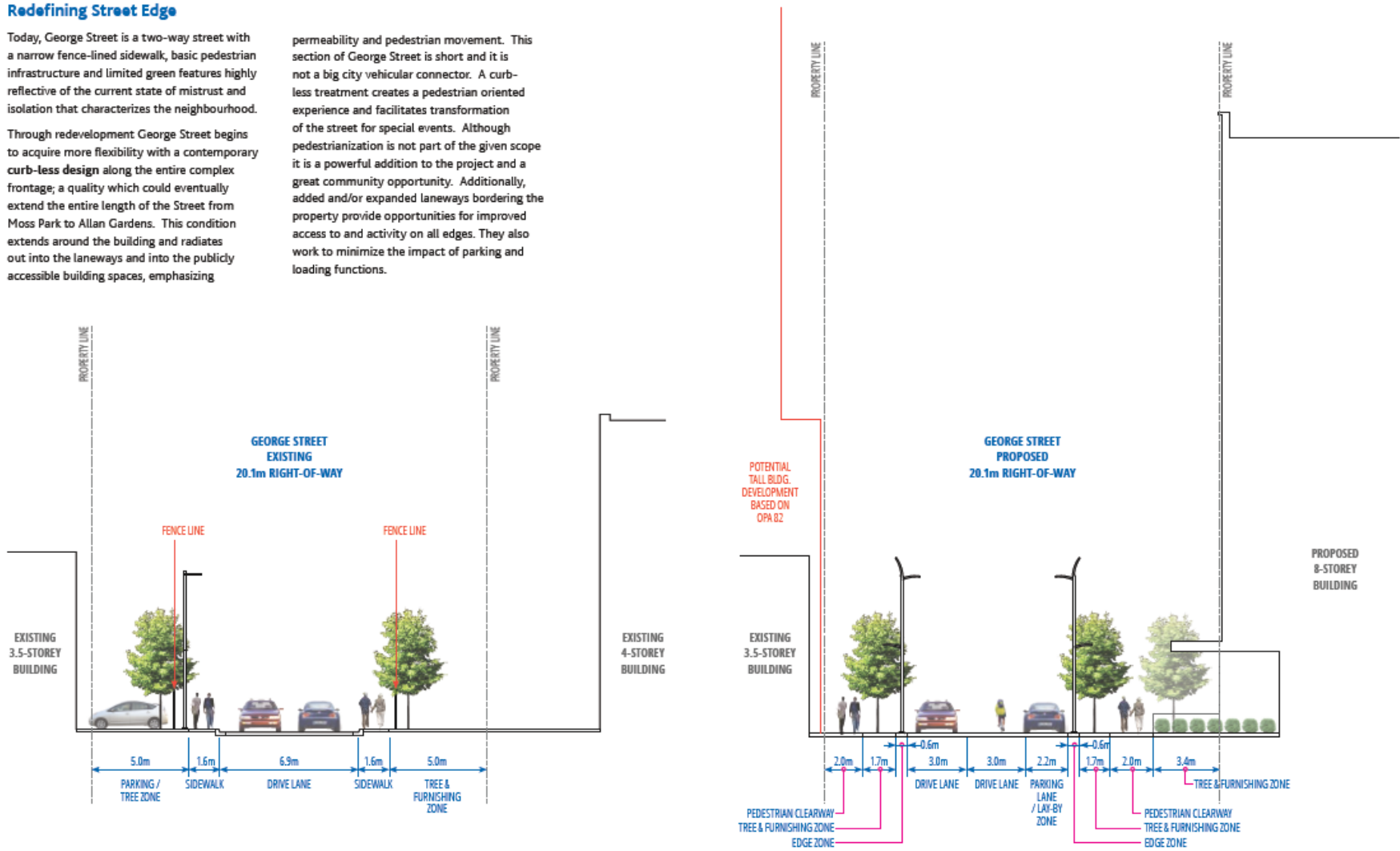
George Street Revitalization – Attachment 6 – October 2015

Redefining Street Edge

Today, George Street is a two-way street with a narrow fence-lined sidewalk, basic pedestrian infrastructure and limited green features highly reflective of the current state of mistrust and isolation that characterizes the neighbourhood.

Through redevelopment George Street begins to acquire more flexibility with a contemporary curb-less design along the entire complex frontage; a quality which could eventually extend the entire length of the Street from Moss Park to Allan Gardens. This condition extends around the building and radiates out into the laneways and into the publicly accessible building spaces, emphasizing

permeability and pedestrian movement. This section of George Street is short and it is not a big city vehicular connector. A curb-less treatment creates a pedestrian oriented experience and facilitates transformation of the street for special events. Although pedestrianization is not part of the given scope it is a powerful addition to the project and a great community opportunity. Additionally, added and/or expanded laneways bordering the property provide opportunities for improved access to and activity on all edges. They also work to minimize the impact of parking and loading functions.



MONTGOMERY SISAM + HILDITCH ARCHITECTS IN ASSOCIATION

33% DESIGN DEVELOPMENT SUBMISSION / 25

Redefining Street Edge (Artist's conceptions based on 33% design and subject to change.)

8.9 ILLUSTRATIONS AND EARLY CONCEPTS

George Street Revitalization – Attachment 6 – October 2015



**LEGEND:
SUSTAINABLE DESIGN STRATEGY**

ENERGY & ATMOSPHERE

- 1. Geothermal
- 2. Energy Recovery Ventilators
- 3. VAV Boxes
- 4. Fully Condensing Boilers
- 5. Window Shading Device
- 6. Occupancy Sensors
- 7. Provision for future Photo-voltaic & Solar Hot Water
- 8. Energy Sub Metering
- 9. Enhanced Commissioning

SUSTAINABLE SITE

- 10. Stormwater Reuse, Irrigation (makeup water for cooling towers)
- 11. Green Roof
- 12. Preferred Parking for Low-emitting & Fuel-efficient vehicles
- 13. Light Pollution Reduction

INDOOR ENVIRONMENTAL QUALITY

- 14. Low VOC Material (indoor air quality)
- 15. Perimeter in-floor Heating (comfort & low temperature)

MATERIALS & RESOURCES

- 16. Building Reuse (heritage properties)
- 17. Recycled Contents & Regional Materials

INNOVATION

- 18. Heat Island Effect (Green Roof)
- 19. Green Education (Display at Hub Entrance, connected to metering)

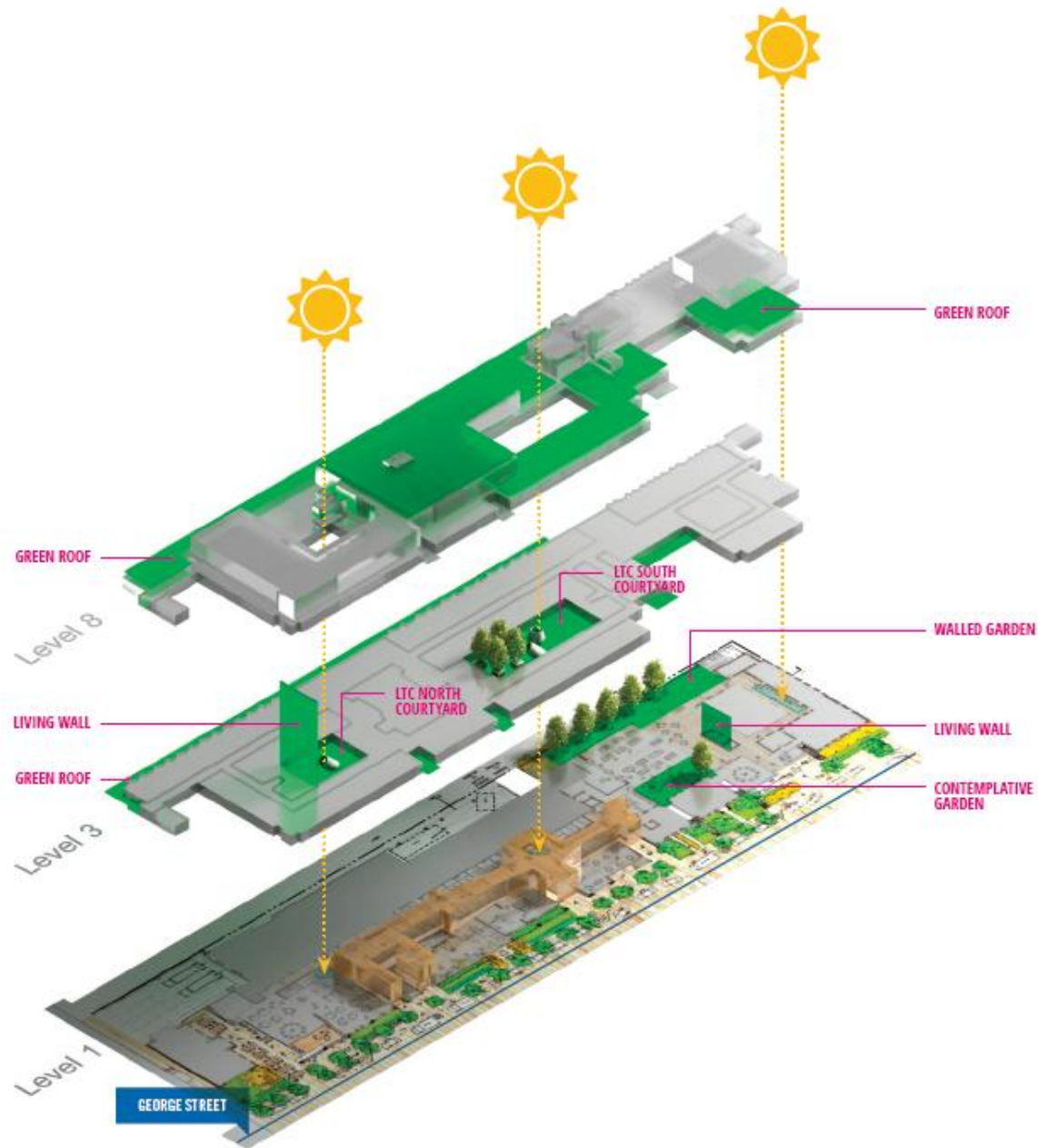
WATER EFFICIENCY

- 20. Stormwater Reuse

Sustainable Design Strategy (Artist's conceptions based on 33% design and subject to change.)

8.9 ILLUSTRATIONS AND EARLY CONCEPTS

George Street Revitalization – Attachment 6 – October 2015



Green Aspects (Artist's conceptions based on 33% design and subject to change.)