



APPENDIX B

AREA SPECIFIC PLAN: A FUTURE FOR HEALTH & INNOVATION (OAKVILLE HOSPITAL DISTRICT)

FINAL REPORT
OCTOBER 2020

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EXECUTIVE SUMMARY

The purpose of this Area Specific Plan (ASP) is to recommend a Preferred Planning and Development Framework for the Town of Oakville's Hospital District.

This ASP supports the transformation of the Hospital District into an employment-focused community that accommodates mixed use developments in a compact urban form. New development will promote health-oriented innovation in research, life sciences, and technology sectors, along with healthy, resilient living conditions that are integrated with the area's natural features.

VISION STATEMENT

Oakville's Hospital District will be a world-class center for medical innovation in health care delivery, providing compassionate, quality community health care. The Oakville Trafalgar Memorial Hospital will serve as the heart of the district. As a vibrant mixed use, transit-oriented and pedestrian-friendly community, the district will carefully integrate a variety of uses that strengthen its strategic employment capacity and impact as a driver of economic development in the Town of Oakville, Halton Region, and beyond.

GUIDING PRINCIPLES

The following guiding principles were finalized with the Town of Oakville and members of the public.

Development of Oakville's Hospital District will:

1. Promote a balanced mix of land uses to create a vibrant complete community;
2. Create compact, transit supportive built form through mid-rise development;

3. Provide green corridors to link parks and green infrastructure;
4. Ensure design excellence with high-quality design and low-impact development practices;
5. Establish strong visual and physical connectivity between the hospital and key destinations;
6. Safely and efficiently accommodate all modes of transportation;
7. Facilitate collaboration in patient-oriented service delivery;
8. Promote environmental resiliency;
9. Adopt public-private partnerships and initiatives to facilitate collaboration and innovation;
10. Promote a holistic approach to parking management and supply; and
11. Create flexible and performance-based plans and policies.

KEY DIRECTIONS

Seven key directions will guide the Hospital District ASP:

1. Green connections will incorporate nature in the Hospital District and connect it to parks and green spaces;
2. Focal points will create a distinct sense of place and ease accessibility;
3. Environmental resiliency will inform an eco-friendly, innovative site design that embraces natural features;
4. Pedestrian-oriented street character will be incorporated throughout the Hospital District;
5. Connectivity will be increased through a grid-shaped street network, mid-block connections and more.
6. Land uses and densities will be planned based on surrounding context and use; and
7. The Hospital District will be an urban campus with Oakville Trafalgar Memorial Hospital at its heart.

PREFERRED PLANNING AND DEVELOPMENT FRAMEWORK

The Preferred Planning and Development Framework is described in detail in Section 5. It provides direction for the development of precincts within the Hospital District, and policy directions related to land uses, building heights, open space, and streets and blocks.

Precincts

Precincts divide the Hospital District into five distinct areas (Figure I). These include the Office-focused Precinct with office employment uses; the Transitional Precinct with a mixture of uses and emphasis on green connections; the Complementary Precinct that supports the Institutional Precinct; the Innovation Precinct with higher densities and a mix of uses; and the Institutional Precinct that includes current and future healthcare services and facilities.

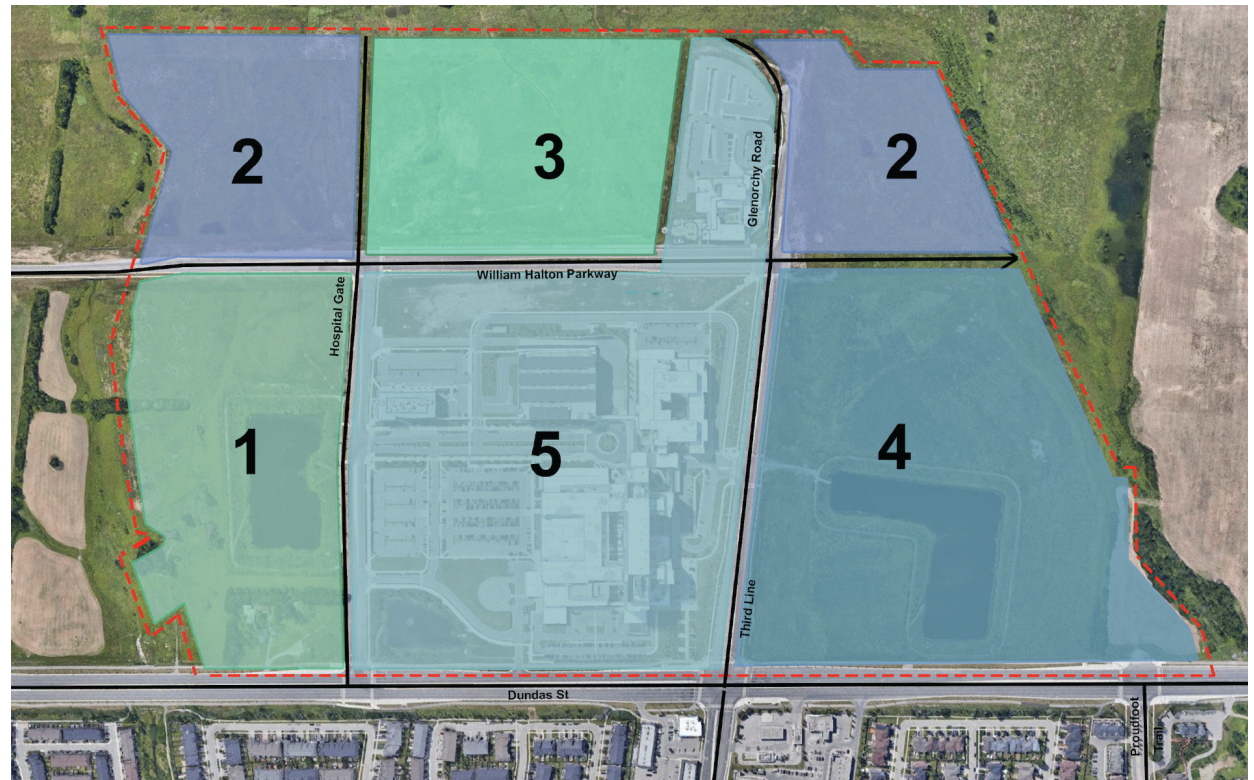


Figure I | Precinct Plan

Land Uses

The Hospital District will accommodate a mix of uses through the Urban Core designation. Remaining lands will be designated Institutional (Figure II).

Mixed use designations will support and complement the Institutional focus of the District, serve the needs of employees, residents, and visitors, and make efficient use of existing and planned services.

Building Heights

Minimum and maximum building heights are identified in Section 5.2.1.

Mid-rise development between 6 and 12 storeys is permitted in most of the Hospital District, with taller buildings permitted in parts of the Innovation and Institutional Precincts (Figure III).

- Legend:
- - - Study Area
 - Institutional
 - Urban Core

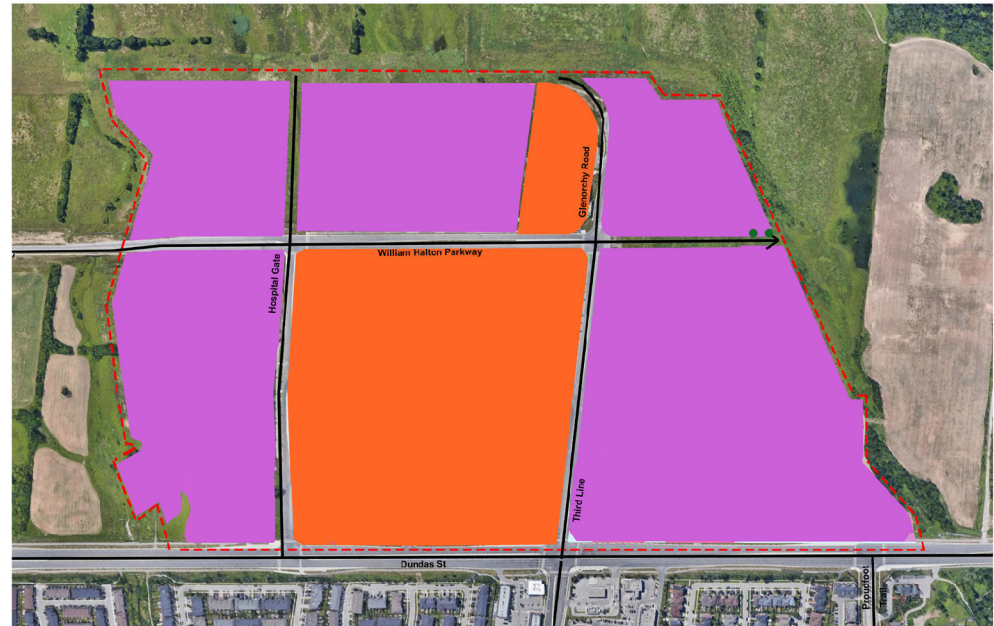
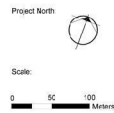


Figure II | Land Uses

- Legend:
- - - Study Area
 - Tall
13-15 Storeys
 - Mid rise
6-12 Storeys

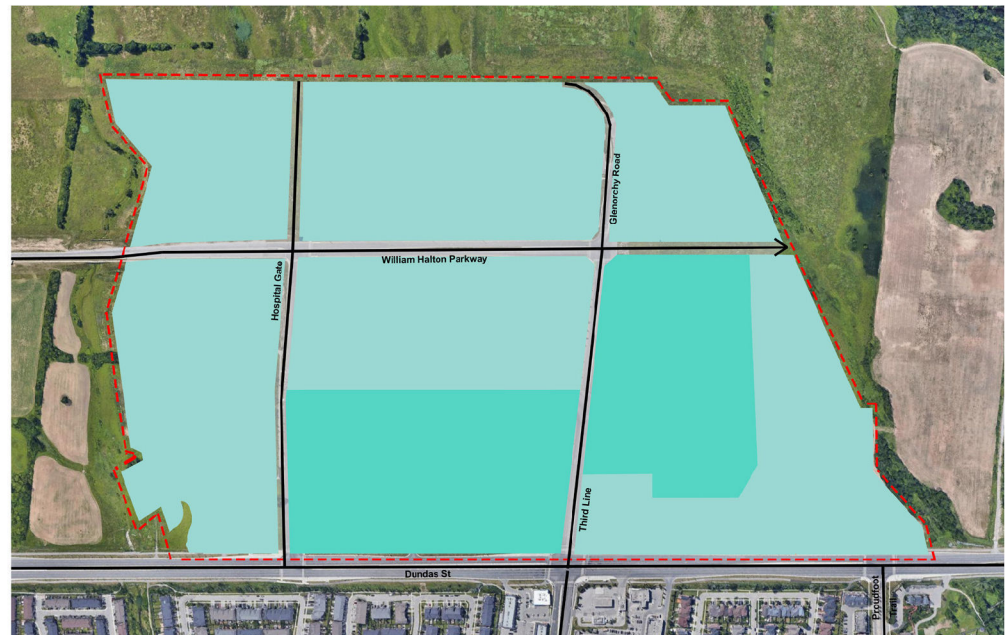
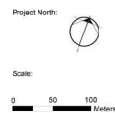


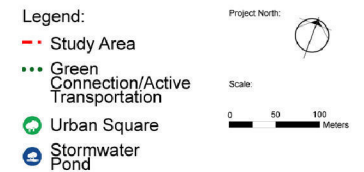
Figure III | Building Heights

Open Spaces

Urban squares, in the form of privately owned public spaces (POPS), will complement existing parks, open spaces and natural areas. Locations for three future urban squares are identified in Figure IV.



Figure IV | Open Spaces



Transportation

The proposed road network improves connectivity by reducing block sizes and increasing the number of public roads (Figure V). Smaller blocks provide greater opportunity for use of integrated pedestrian walkways and linear green spaces.

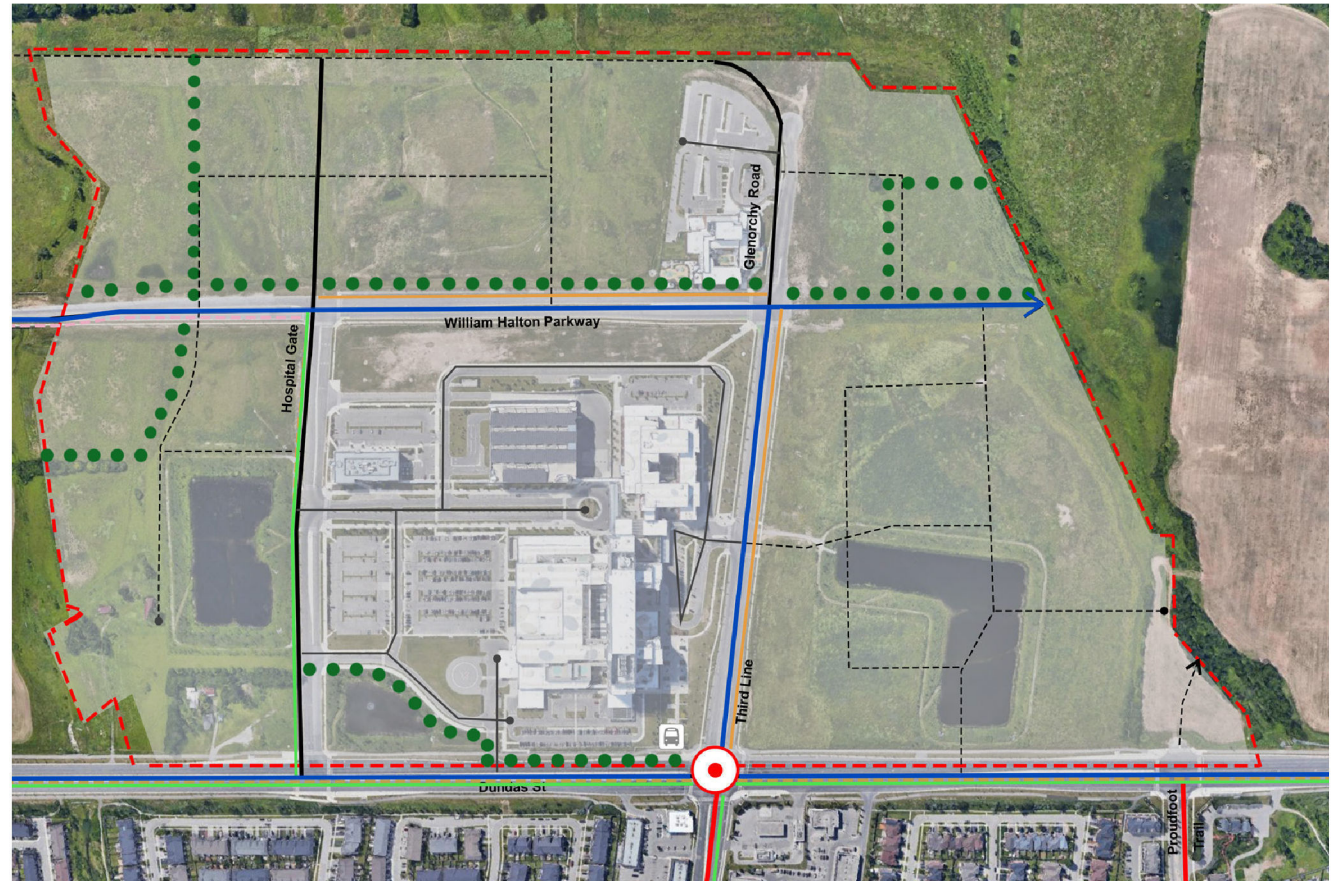
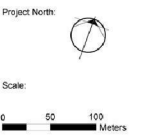


Figure V | Roads and Blocks

Legend:

- - - Study Area
- Major Arterial
- Minor Arterial
- Major Collector
- Local Road
- Busway Corridor
- - - Proposed Road
- Bike Lane
- - - Proposed Bike Lane
- Multi-use Trail
- - - Facility on a Regional Road (Proposed)
- Green Connection/Active Transportation
- ⊙ Gateway
- 🚌 Transit Stop



DEMONSTRATION PLAN

A Demonstration Plan is provided on the following page (Figure VI) to illustrate one way that the Hospital District could be developed based on the vision, principles and directions of this ASP.

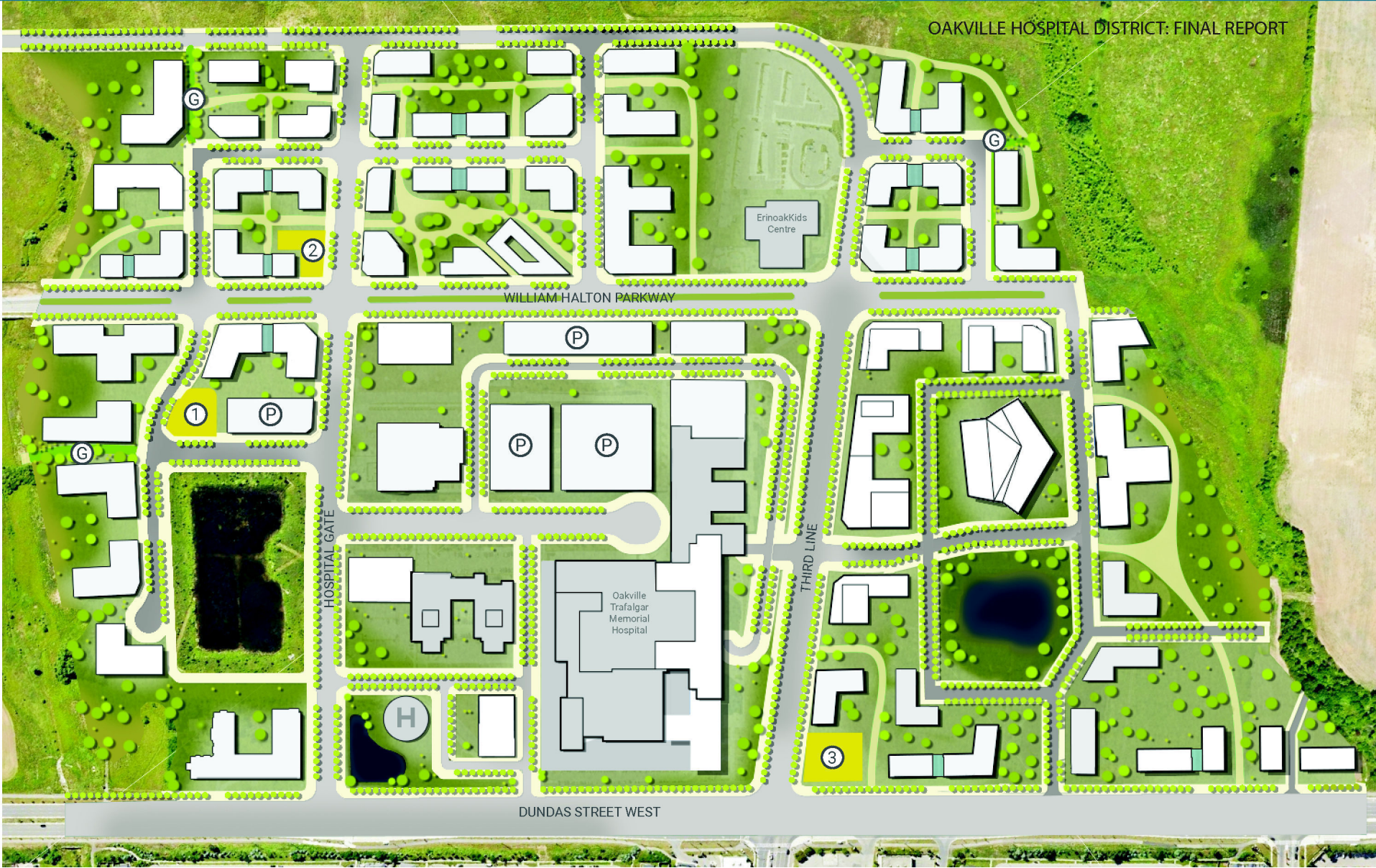


Figure VI | 2D Demonstration Plan

- Midblock and Bridge Connection
- 1 Urban Plaza
- 2 Gateway Parkette
- 3 Urban Plaza
- G Green Connection
- P Parking Garage



Figure VII | 3D Demonstration Plan

IMPLEMENTATION

The Town of Oakville and public and private sector partners will use this ASP to guide development of the Hospital District over a twenty-year time horizon, and beyond.

Section 6 provides an overview of relevant planning tools and potential partnerships required to successfully implement this plan. Recommended planning tools include an Official Plan Amendment, strategies for parks and parking and active coordination with Halton Region.

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1.0

INTRODUCTION

1.1 PURPOSE

The purpose of this Area Specific Plan (ASP) is to present the Preferred Planning and Development Framework that will guide the development of The Town of Oakville's Hospital District.

The Framework supports the transformation of the district into an employment-focused community that accommodates mixed use development in a compact urban form. New development will promote health-oriented innovation in research, life sciences and technology sectors, along with healthy, resilient living conditions that are integrated with the area's natural features.

The objectives of the ASP are to:

- Define the Hospital District's primary function and role in the context of the Town of Oakville and the North Oakville West Secondary Plan, which identified this area as a node for further study;
- Establish targets for employment and population growth;
- Determine the appropriate mix of uses, scale of built forms, and transitions to adjacent areas;



Figure 1 | Oakville Trafalgar Memorial Hospital

- Establish a cohesive transportation network with seamless connections that prioritizes emergency vehicles, pedestrians, cyclists and transit users;
- Identify strategies to accommodate a range of employment-supportive amenities and a more compact transit-supportive pedestrian-friendly environment;
- Establish a cohesive development strategy including urban design directions to achieve a compact and attractive urban campus; and

- Explore partnerships between the Town, public institutions, and the private sector to support Oakville’s economic development strategy.

The boundaries for this plan were determined by the location of major roads, existing and planned land uses and natural features, building on the placement of the Oakville Trafalgar Memorial Hospital at the center.

1.2 PROCESS

This ASP was developed in five phases (Figure 2):

- Phase 1 involved background research, developing a baseline understanding of the existing and planned conditions, and the vision for the district.
- Phase 2 established guiding principles and objectives, scenario development, and public engagement.
- Phase 3 included completion of numerous technical studies, including market and financial analyses, transportation and parking studies, and functional servicing and stormwater management plans.



Figure 2 | Study Process Chart

1.3 REPORT STRUCTURE

- Phase 4 involved developing the Preferred Planning and Development Framework to guide the evolution of the district, with maps, as presented in this ASP.
- Phase 5 will involve a town-led Official Plan Amendment based on the ASP.

This ASP is divided into five sections:

- Section 1 identifies the purpose, process, and structure.
- Section 2 provides the context for establishment of the district, the existing conditions and best practices from other jurisdictions.
- Section 3 includes the vision, guiding principles and key directions guiding the development of the district.
- Section 4 establishes the foundation for the mixed use function of the district.
- Section 5 outlines the planning, policy, and development directions for land uses, transportation, municipal services and urban design.
- Section 6 offers a recommended path for implementing the plan.

2.0

BACKGROUND

INTRODUCTION

This section describes the Oakville Hospital District and the extensive suite of policies and directions that inform this ASP.

2.1 STUDY AREA

The Hospital District is located at the north-west corner of Dundas Street West and Third Line in North Oakville. It is anchored by the Oakville Trafalgar Memorial Hospital (Figure 3). To the south, the Hospital District is surrounded by low density residential and commercial uses, undeveloped lands planned for the West Oakville Sports Park to the north, planned employment uses to the west, and planned residential uses to the east (Figure 4).

The Hospital District is part of the North Oakville West Secondary Plan Area (Figure 5). The planning process to create this ASP refined what was a general planning study area in the secondary plan (a Health Oriented Mixed Use Node) into the district shown in Figure 4. The secondary plan states that the planning area will incorporate a hospital and potential “research and development facilities, medical and other offices, laboratories, clinics, supportive housing, long-term care facilities, rehabilitation facilities, and other similar uses including retail and service commercial facilities related to the permitted uses”.



Figure 3 | Aerial Image of the Hospital District



Figure 4 | Context Map of the Hospital District

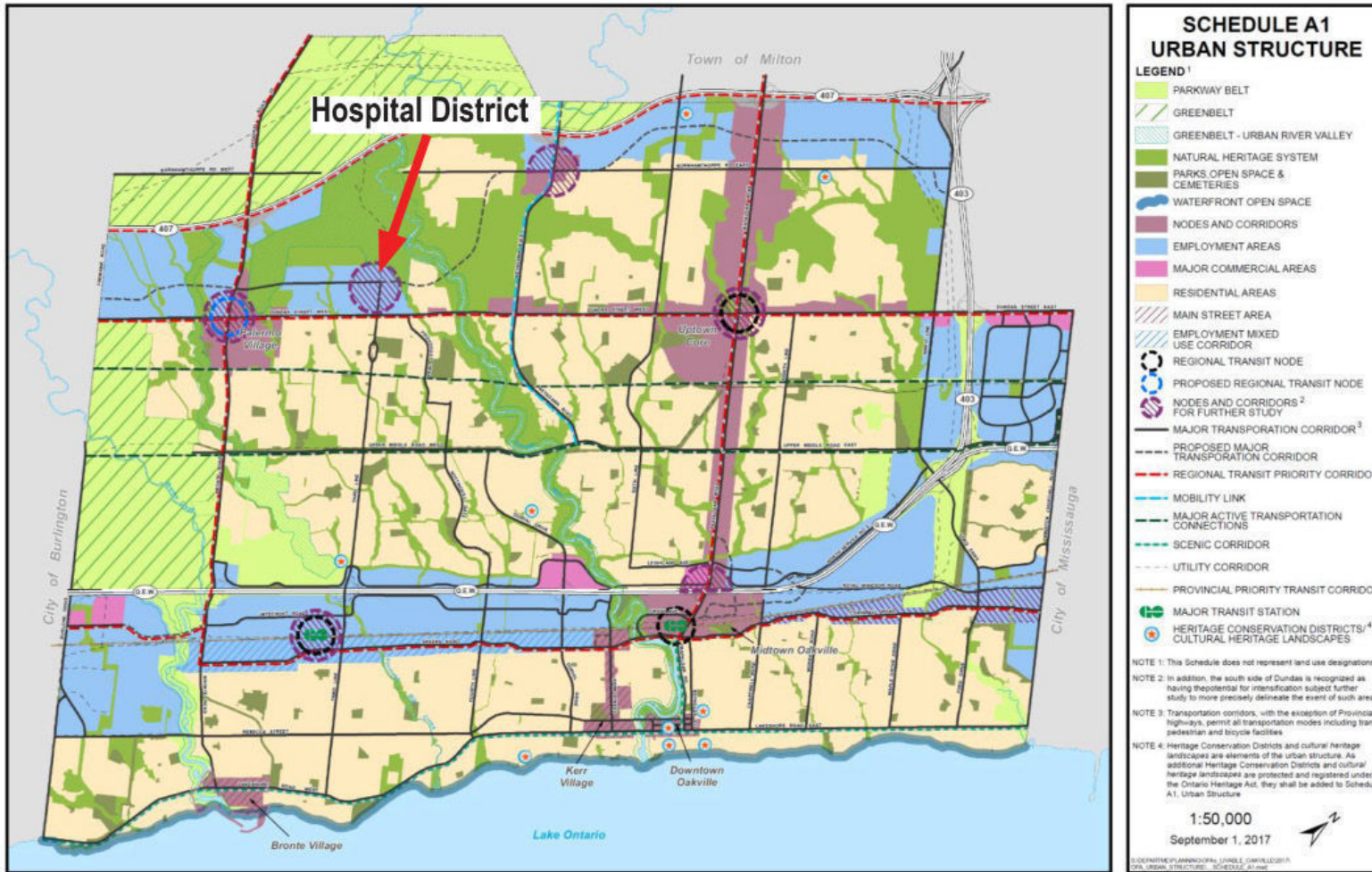


Figure 5 | Schedule A1 - Urban Structure (Nodes and Corridors for Further Study)

2.2 POLICY FRAMEWORK

This section identifies the key provincial, regional and municipal policies and guidelines that will guide the development of Oakville's Hospital District.

2.2.1 PROVINCIAL

Provincial Policy Statement, 2020

The Provincial Policy Statement (PPS) establishes the broad policy context for municipal planning initiatives. The Hospital District is within a "settlement area" intended to be the focus of growth and development (S.1.1.3.1). Land uses in settlement areas are based on densities and uses that are appropriate and efficiently planned for existing infrastructure and public facilities. The PPS directs planning authorities to promote economic competitiveness by encouraging compact and mixed use development, including compatible employment uses (S.1.3.1).

A Place to Grow: Growth Plan for the Greater Golden Horseshoe, 2020

The Growth Plan builds on the PPS to establish a land use planning framework for the region, providing guiding principles, including support

for the creation of complete communities designed to support healthy and active living (S. 1.2.1).

The Growth Plan directs most growth to settlement areas that have a delineated built boundary and existing or planned municipal services (S.2.2.1.2a). It also emphasizes that complete communities should feature a mix of uses, including residential and employment, with convenient access to local stores, services and public service facilities (S.2.2.1.4a) and to a range of transportation options (S.2.2.1.4di).

Draft Technical Guidelines on the Application of the Intensification and Density Targets (Growth Plan), 2018

The draft guidelines are intended to support municipalities in conducting a municipal comprehensive review, required to demonstrate how they will meet the Growth Plan's intensification and density targets. They provide direction on official plan policies, such as appropriate transit corridors and strategic growth areas for establishing permitted uses, heights, densities and other zoning regulations (S.2.4.6). It also requires municipalities to develop strategies that identify growth areas to

achieve the intensification and density targets in the Growth Plan (S.4.4).

2041 Regional Transportation Plan for the Greater Toronto and Hamilton Area, 2018

Metrolinx's plan for an integrated multimodal regional transportation network identifies Oakville's Dundas Street as a Higher Order Transit Corridor and includes a planned 22 kilometre bus rapid transit corridor between Bronte Road and Kipling Station in the City of Toronto.

2.2.2 REGIONAL

Halton Regional Official Plan (ROP, 2009)

The Town of Oakville is guided by Halton's Regional Official Plan policies, currently under review. The plan identifies the general area surrounding Oakville Trafalgar Memorial Hospital as a Hospital District in the Urban Area and Employment Area (Map 1, Regional Structure). It identifies objectives for Urban Areas including accommodation of growth that is compact and transit-supportive (S. 72). It also includes objectives for Employment Areas in conjunction with employment

uses in residential and mixed use areas, and supporting a wide range of economic activities and ancillary uses (S.77.1). It identifies Dundas Street as a Major Arterial and a Higher Order Transit Corridor (see Map 3). It also outlines that Area Specific Plans or policies are required for major growth areas and will be incorporated into local official plans through official plan amendments (S. 77 (5)).

Policy areas currently under review include the integrated growth management strategy, natural heritage systems, rural and agricultural systems and climate change mitigation and adaptation.

Other relevant regional plans include:

- The Road to Change Transportation Master Plan, 2011, which proposes a four-lane Regional Road through the Hospital District, a widening of Dundas Street from four to six lanes, and plans for bus rapid transit services along Dundas Street (S. 7.3), with transit-supportive land uses and densities (S. 8.2.4), and population growth north of Dundas Street (S. 3.3);
- The Active Transportation Master Plan,

2015, which provides plans for multiuse trails on both sides of Dundas Street for off-road cycling facilities (S. 7.9). A pilot project for an accessible multi-use trail crossing treatment is also provided at the intersection of Dundas Street and Third Line (S. 7.4.4).

- The Mobility Management Strategy for Halton, 2017 recommends a network of east-west and north-south transit priority corridors. It identifies where improvements are required, and where higher-order transit and/or regional road widenings have been planned, including Dundas Street from Brant Street to Winston Churchill Boulevard (including the frontage of the Hospital District) as a Transit Priority Corridor.
- The Halton Region Employment Survey, 2019, provides information on regional economic health and trends in economic development. It supports monitoring and implementation of targets for land use, water, wastewater, and transportation master plans. It recognizes the Hospital District as an Employment Area that contributes to the Region's economic health.

2.2.3 MUNICIPAL

Livable Oakville Official Plan, 2009

Oakville's Official Plan establishes its urban structure and the desired land uses in the Town. It accommodates growth to 2031. It also establishes the desired land use pattern for lands located south of Dundas Street and north of Highway 407.

While the Hospital District is currently subject to the North Oakville West Secondary Plan, the town-wide Urban Structure review (Official Plan Amendments 15, 317 and 318) identified the area as among "Nodes and Corridors for Further Study". Nodes identified through the Official Plan Amendment (OPA) process comprise the strategic growth areas, as defined in the Growth Plan (Figure 5). The Region approved the Urban Structure in 2018. OPA 15 was appealed to the Local Planning Appeal Tribunal and is not in full force and effect. Official Plan Amendments for the North Oakville East and West Secondary Plans (OPAs 317 and 318) were adopted by Council and provide a framework for accommodating growth to 2041.

A review of the official plan is underway to ensure consistency with provincial and regional policies, the Town's strategic goals, and the vision and needs of the community.

An Employment and Commercial Review, 2018, was completed as part of the Official Plan Review to assess the lands designated to accommodate the Town's long-term employment and commercial needs. OPA 26 was adopted in 2018 to update the associated policies in the OP, and has since been approved by Halton Region. While the Hospital District is not in the Livable Oakville Plan, the employment and commercial review contains direction for the North Oakville Secondary Plans. As such, key themes were developed as part of this study.

North Oakville West Secondary Plan, 2009

The North Oakville West Secondary Plan (NOWSP) provides policy direction for growth and development to 2021, building on the official plan. It recognizes Employment Districts (S.8.6.5) and includes the Hospital District as a Health Oriented Mixed Use Node (S.8.6.5.1). Relevant policies include:

- Designations that protect for and establish a range of development opportunities for industrial, office and employment uses. The range and scale of uses are to be compatible with the Hospital District (S. 8.6.5.1).
- The Hospital District must "include a hospital and may include research and development facilities, medical and other offices, laboratories, clinics, supportive housing, long-term care facilities, rehabilitation facilities, and other similar uses including retail and service commercial facilities related to the permitted uses".
- The Hospital District is subject to site-specific zoning (S. 8.6.5.4.a). Any proposed land use will be evaluated to ensure there are no adverse impacts on other uses in the node.
- Oakville is conducting an environmental assessment to determine the future alignment of a new North Oakville Transportation Corridor and Crossing of Sixteen Mile Creek (S. 8.7.2.5.e), located northwest of the Hospital District.

North Oakville Secondary Plan Reviews, ongoing

The North Oakville Secondary Plans Review was undertaken to ensure their consistency with provincial and regional policies. Through this process, OPAs 321 (North Oakville East) and 322 (North Oakville West) were approved.

- Policy 8.6.2.2 (OPA 322) was revised as there are numerous stormwater management facilities in the Hospital District, to state that "stormwater management ponds will be discouraged within 100m of Dundas Street".
- The Hospital District has frontage along Dundas Street that has been identified as a Regional Transit Priority Corridor, planned to provide greater levels of transit service connecting people to existing and planned local and regional destinations. These corridors should also provide a focus for transit-supportive development.
- The Hospital District has been identified in the Urban Structure (OPA 15) as a Strategic Growth Area, which is defined as an area of focus for "accommodating intensification

and higher-density mixed uses in a more compact form”.

North Oakville Urban Design and Open Space Guidelines, 2009

The guidelines direct that the Hospital District be planned as a compact, pedestrian-oriented, urban community containing a broad range of uses. It outlines design criteria for a variety of building typologies, land uses, open spaces, the public realm, road networks, and mixed use densities ranging from low-rise to mid-rise buildings. It identifies Dundas Street as where the highest densities are to be concentrated.

Livable by Design Manual - Urban Design Direction for Oakville, 2014

The manual presents a comprehensive set of urban design principles for the Livable Oakville Official Plan, approved through OPA 8. It is in full force and effect, and applies to lands north and south of Dundas Street, and north of Highway 407. The manual provides design directions for mid-rise and tall buildings, including those developed in the Hospital District, as well as direction beyond

its built form.

North Oakville Urban Forest Strategic Master Plan, 2012

The plan recommends a multi-faceted strategy that connects urban forestry best practices to existing environmental features in Oakville’s Natural Heritage System, and directs overall planning for residential, commercial, and industrial lands. The plan is complemented by the Town’s canopy cover strategy, contained in the Livable Oakville Official Plan’s sustainability strategies, which has a 40% target for forest and town-wide tree coverage.

In addition to the above documents, several master plans have informed this Area Specific Plan, including:

- Transportation Master Plan, 2013 and Review, 2018;
- Active Transportation Master Plan, 2017;
- Stormwater Master Plan Phase 2, ongoing;
- Five-year Review of the 2012 Parks, Recreation and Library Facilities Master Plan, 2017; and

- Recommendation Report, Master Site Plan, Halton Healthcare Services Inc., and Oakville Hydro Energy Services Inc., 2010.

Refer to Appendix B for further detail.

2.3 EXISTING CONDITIONS

2.3.1 TRANSPORTATION AND CONNECTIVITY

Figure 6 illustrates existing road and active transportation classifications in the Hospital District. Dundas Street is identified as a major arterial and higher order transit corridor, William Halton Parkway West is a major arterial, Third Line is a minor arterial, and Hospital Gate is identified as a future road.

Existing bike lanes are located along a portion of William Halton Parkway West between Hospital Gate and Third Line. A bicycle lane is proposed along Third Line along with a multi-use trail on Dundas Street.



Figure 6 | Existing Transportation, Active Transportation and Connectivity

2.3.3 BUILDING HEIGHTS

The Oakville Trafalgar Memorial Hospital has a maximum height of 54 metres (fifteen storeys) with a large share of its buildings in the range of four to eight storeys. The ErinoakKids Centre for Treatment and Development on the north side of William Halton Parkway West is four storeys. In addition, a medical office building at 3075 Hospital Gate is four storeys.

Heights associated with recently approved but as-yet unbuilt developments in the district include a new assisted living and long-term care centre at four to six storeys, and the Oakville Green mixed use development east of Third Line at fifteen storeys.



Figure 8 | Existing Building Heights



Hospital, looking west along Third Line



Main Hospital entrance, looking west along Third Line



Third Line, looking north



Third Line, looking south



Hospital, looking west along Third Line, approaching William Halton Parkway West and ErinoakKids Centre for Treatment and Development



Structured and surface parking, looking west along William Halton Parkway West

2.4 MARKET CONDITIONS

A market and development trends analysis was conducted in November 2019 to support the development of this ASP (Appendix E). Key findings include:

- A reconfiguration of the Dundas Street corridor to accommodate higher order transit is critical for supporting any substantial amount of office or other employment-type development in the Hospital District.
- The district is well-positioned to leverage the recent and ongoing concentration of development activity in the northern portion of the community, and specifically situated between two primary growth areas along the Dundas Street West corridor.
- There is potential to accommodate office expansion in the district, though it is not likely to represent a significant concentration of major office space, or become a prominent employment node in the broader context of Halton Region or the Greater Toronto Area (GTA).
- There are other common hospital-related development opportunities that offer a stable and reliable source of employment, and demand for real estate from private pharmacies, general practitioner offices, diagnostic facilities, and senior care facilities. In addition, there are likely to be opportunities for regional public institutions, community service-based facilities, and private enterprises like daycare facilities (Figure 9).
- To develop a regionally significant node, the district must differentiate itself from other hospital areas located elsewhere in the GTA.



	Humber River Hospital	Etobicoke General	Mississauga General	London Health Sciences	Southlake	Brampton Civic	Milton General	Totals
Family Doctor	✓	✓	✓	✓	✓	✓	✓	7/7
Specialist	✓	✓	✓	✓	✓	✗	✓	6/7
Research	✗	✗	✗	✓	✓	✗	✗	2/7
Seniors' Facilities	✓	✓	✓	✗	✓	✓	✓	6/7
Lab Testing	✓	✗	✓	✓	✓	✗	✓	5/7
Child Care	✓	✗	✗	✓	✗	✓	✓	4/7
Pharmacy	✓	✓	✓	✓	✓	✓	✓	7/7
Public Services	✓	✗	✓	✗	✓	✓	✓	5/7

SOURCE: urbanMetrics inc. Based on desktop review.

NOTE: Uses shown are illustrative in nature. This review was based on high-level research. More detailed, in-person confirmations may be required to confirm the findings presented.

Figure 9 | Supporting Uses Near Comparable Hospital Locations

2.5 BEST PRACTICES

2.5.1 LOCAL MARKET

Hospital developments are on the rise throughout the province. Ontario's BuildON ten-year infrastructure program is investing in more than thirty new hospitals, community care, and more than three hundred long-term care homes. Several related projects in GTA municipalities include:

- The City of Mississauga's Life Sciences Cluster Strategy, 2017. A first among Canadian municipalities, the five-year strategy outlines high-level priorities and specific actions to build the second largest cluster of its kind in the country (by employment). Mississauga is also home to Trillium Health Partners, an integrated hospital network consisting of three main sites: Credit Valley Hospital, Mississauga Hospital and Queensway Health Centre.
- The City of Vaughan has established a Healthcare Centre Precinct Plan to guide the development of the Mackenzie Vaughan Hospital (opening late-2020) and adjacent City- owned lands. The plan includes a variety of healthcare-related uses such as medical and dental offices, research and

laboratory facilities, rehabilitation and long-term care facilities, and educational facilities.

- The City of Markham has a new Strategic Plan (2019-2022) for the Markham Stouffville Hospital. The hospital's updated vision seeks to establish innovative ways to deliver seamless and integrated care to the community beyond the hospital walls.
- The Town of Newmarket is home to a health tech cluster centered on the Southlake Regional Health Centre, a full-service hospital and research and teaching facility. It includes CreateIT Now, an innovative business incubator established through Southlake's research and innovation team in 2015 in partnership with the Town of Newmarket, York Region, Seneca College, York University, and ventureLAB.

2.5.2 CASE STUDIES

A comprehensive review of best practices demonstrated by health districts across Canada and the United States was undertaken to support the development of draft land use options for this Area Specific Plan (see the following pages and Appendix A). It provides direction for the development of a health-focused mixed use Hospital District in Oakville based on case studies from Buffalo, New York; the Greater Boston Region, Massachusetts; Baton Rouge, Louisiana; Surrey, British Columbia; and Hamilton, Ontario.

The case studies revealed several key considerations for creating a successful health district.

1. Land use balance: Establish a balanced mix of land uses, ensure that intensification is of an appropriate scale and built form, and include flexible approaches for the provision of parking. For example, the Life Sciences Corridor in Massachusetts adopted a 40/60 split between retail and residential uses.

2. Green connections that prioritize pedestrian mobility: Promote walking and cycling with a pedestrian-oriented street character that includes, for example, wide sidewalks, active building frontages, benches, dedicated cycling facilities and connections to parks with tree-lined green corridors.
3. Regulatory framework: Implement specific zoning regulations that address the design and character of the area, while ensuring flexibility in terms of future uses.
4. Parking management: Implement a robust strategy that prioritizes safety, efficiency, and flexibility with measures such as shared parking agreements, flexible parking structures, and clear signage.
5. Strategic partnerships: Use public-private partnerships, and practices designed to facilitate high levels of collaboration among stakeholders.
6. Marketing: Establish an identity for the district with cohesive branding, and promote placemaking and visual connectivity with wayfinding and signage at key locations, such as major intersections, gateways, and hospital buildings.

Each of these six best practices were taken into consideration as the ASP recommendations were developed.

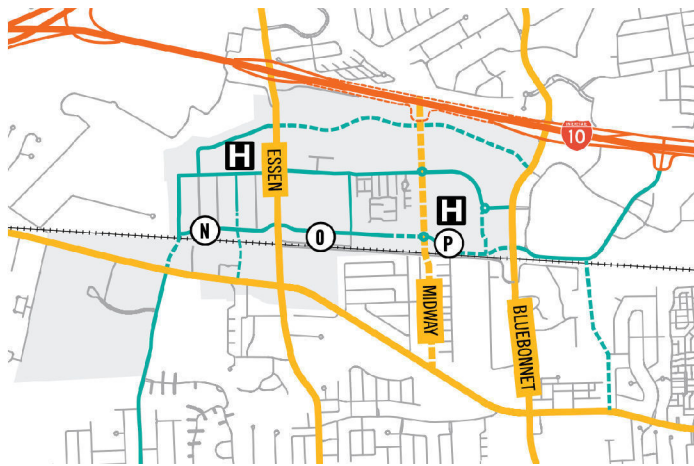


CASE STUDY: LIFE SCIENCES CORRIDOR BOSTON, MASSACHUSETTS

Area Characteristics

- Provides a mix of uses including housing, commercial, and retail uses (in addition to institutional uses).
- Focuses on pedestrian-friendly design with open spaces above parking garages, mid-block connections, wayfinding, public art, and more.





Locations of transit stations within the District

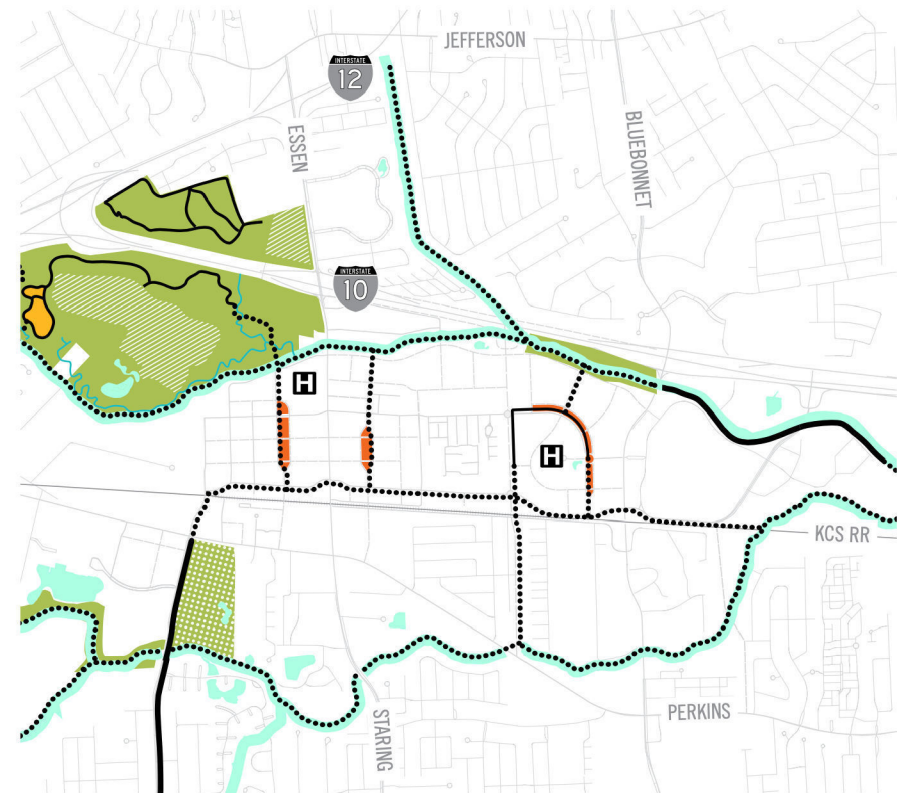
CASE STUDY:
BATON ROUGE HEALTH DISTRICT
LOUISIANA

Area Characteristics

- Developments are located within a five- to ten-minute walk from transit.
- A parking management strategy that prioritizes transit use.
- Leverages natural areas as assets.

Transit Station Location

- Ⓝ West of Essen Lane
- Ⓞ East of Essen Lane
- Ⓟ East of Midway Blvd



- Urban Forest
- Active / Sports Park
- Agricultural Fields
- Botanical Gardens
- District Signature Park
- Existing Trail
- Proposed Trail
- Creek
- Lake
- Proposed Future Street Network

Open spaces and trails within the District



CASE STUDY:
HEALTH AND TECHNOLOGY DISTRICT
SURREY, BRITISH COLUMBIA

Area Characteristics

- Includes an underground fibre optic network,
- High tech offices will include six storey podiums with towers up to twelve storeys.
- Mixed use development that will consider residential in addition to offices, active retail, entertainment, and more.

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3.0

CREATING THE HOSPITAL DISTRICT

INTRODUCTION

This section describes the vision, guiding principles and key directions developed to guide this ASP. The guiding principles and key directions were developed based on background and technical analysis, assessment of existing conditions, review of best practices from other jurisdictions, and an evaluation of market conditions.

3.1 VISION STATEMENT

Oakville's Hospital District will be a world class center for medical innovation in health care delivery, providing compassionate, quality, community health care. The Oakville Trafalgar Memorial Hospital will serve as the heart of the district. As a mixed use transit-oriented, pedestrian-friendly and vibrant community, the district will carefully integrate a variety of uses that will also strengthen its strategic employment capacity and impact as a driver of economic development in the Town of Oakville, Halton Region, and beyond.

3.2 GUIDING PRINCIPLES

The development of Oakville's Hospital District will be informed by a number of guiding principles that encompass placemaking, mobility, innovation, and successful implementation.

PLACEMAKING

Placemaking is a collaborative process that involves attention to urban design and encourages creative land uses, and shapes the physical, cultural and social identities that define a place and its ongoing development. Placemaking makes the most of a district's assets and potential, with a goal of creating well-designed spaces that contribute to people's health and wellness. It requires consideration of the balance in the mix of uses; green corridors; a compact, pedestrian-friendly and transit-oriented built form; design excellence; and strong visual and physical connections.

1. A balanced mix of uses

In the Hospital District, a mix of land uses will help to create a vibrant complete community that supports existing and future planned conditions. Employment uses will continue to be the dominant land use, with a range of employment-supportive amenities. Residential uses will be secondary to the primary employment uses. Together with new public spaces, the district will create a unique sense of place with a distinct identity.



Well-designed urban squares between buildings contributes to a sense of place and provides gathering spaces for employees and residents

PLACEMAKING

2. A compact and transit-supportive pedestrian-oriented built form

The location and orientation of buildings has a significant impact on how a place functions, and its identity. Mid-rise buildings are more relatable and human-scaled than tall buildings. They help to create a sense of transition between low-rise and high-rise buildings and tend to support a livelier streetscape.

In the Hospital District, buildings will be predominantly mid-rise in form. Active grade-related uses will be encouraged, with buildings situated to support easy transit connectivity and pedestrian access throughout the district.

Consistent with Ontario's Building Code, Provincial Policy Statement and Growth Plan for the Greater Golden Horseshoe, building height and locations will not impede the safe flight path to and from the hospital's helipad. For the Hospital District, this limits building heights to a maximum of fifteen storeys.



Human-scale built form creates a pedestrian-friendly streetscape

PLACEMAKING

3. Green connections

Connections with walking paths, cycling lanes, and green corridors that include low impact development technology, planting, and weather protection will link parks and green infrastructure like the West Oakville Sports Park, public spaces, urban squares in the form of POPS, and the existing stormwater management ponds. Green corridors will be considered as the area is developed to enhance the sense of place in the Hospital District.



Pedestrian- and cycling-friendly trail (top); tree-lined street (bottom left); separated cycling lanes (bottom right)

PLACEMAKING

4. Design excellence

Design excellence refers to the architectural qualities of new developments, such as how well they make a positive contribution to the public realm, and support the vision and goals of a community.

In the Hospital District, all new public and private sector developments, including buildings, infrastructure, streetscapes and open spaces, will have a high-quality of design and incorporate low-impact development practices like rain gardens and grassy bioswales to manage stormwater runoff.



Planting can serve both decorative and functional purposes (Source: UrbanToronto) (top); permeable paving (bottom left); rooftop garden (bottom right)

PLACEMAKING

5. Strong visual and physical connectivity

Strong visual and physical connections are important components of successful placemaking. With thoughtful design, planning, and investment in the public realm, such as with wayfinding, they increase the relationship between people and individual buildings and spaces to create a more cohesive sense of place.

In the Hospital District, these connections should be encouraged in key locations such as hospital buildings, gateways, green spaces, the planned Dundas bus rapid transit stops, and existing facilities such as the ErinoakKids Centre for Treatment and Development, and All Seniors Care assisted living and care facility.



A sheltered walkway with seating demonstrates a clear visual and physical linkage

MOBILITY

Over time the Hospital District will experience growing numbers of employees, residents, and visitors. The ability for people to access and move throughout the district efficiently and sustainably supports the Town's vision and goals for its economy, environment and quality of life.

1. Balanced, safe and efficient mobility

Safely and efficiently accommodating transportation for all ages and abilities should prioritize the most vulnerable users. The following transportation hierarchy will be used to guide decision-making: emergency service vehicles such as ambulances; pedestrians; public transit users, cyclists and private motorized vehicles.

Movement throughout the district will encourage barrier-free, seamless connectivity between all transportation modes. Walking and cycling will be promoted with a pedestrian-oriented street character that includes, for example, wide sidewalks, active building frontages, benches, and dedicated cycling facilities. Pedestrian enhancements will be a focus at major gateways, particularly along Dundas Street and Third Line, but also be provided throughout the district.



Safe and accessible dedicated active transportation path

INNOVATION

The Hospital District is envisioned as a health-oriented innovation area with leading-edge anchor public and private sector institutions and companies that are clustered together and support important economic drivers like start-ups and business incubators. With the Oakville Trafalgar Memorial Hospital at its core as an urban campus, the district needs to be transit-accessible and include mixed use buildings, offices, retail and services to create a compelling place to work, live, and visit. To encourage innovation, it needs to facilitate collaboration, and consider environmental sustainability by applying new technologies and practices.

1. Facilitate collaboration

As a health-oriented innovation area in Oakville, new development will nurture collaborative relationships between organizations and individuals. The hospital will prioritize patient-oriented service delivery as part of an integrated system of health care. This includes optimizing collaboration among health care partners, including clinical and research facilities, where academics, entrepreneurs, developers, start-up companies as well as local and international stakeholders can forge partnerships to drive innovation.



Collaboration between local and international partners will promote innovation

INNOVATION

2. Environmental Sustainability

The Hospital District can promote climate resiliency and environmental sustainability by encouraging the use of green building materials, low impact development technologies and practices, and flexible adaptive reuse strategies, like conversion of surface parking for events and programming, stormwater ponds, and permeable paving.



Parking with permeable surfacing and trees provide visual and climate relief

SUCCESSFUL IMPLEMENTATION

To achieve the vision of this Area Specific Plan, the development of the Hospital District requires strategic partnerships, a holistic approach to parking management, and to measure progress over time, while encouraging flexibility and creativity.

1. Strategic partnerships

Development of the Hospital District will include the adoption of public-private partnerships and initiatives designed to facilitate high levels of collaboration between the Town of Oakville, the development industry, and universities. New partnerships will also help to support the Town's economic development strategy.



The Hospital District will support the Town of Oakville's goals

SUCCESSFUL IMPLEMENTATION

2. Holistic approach to parking

The Hospital District will include enough parking to meet the needs of residents, employees, and visitors while also incentivizing transit use and prioritizing pedestrian safety. Carefully integrating parking structures into the overall built form and designing them with future adaptability in mind, such as by including bike parking and storage facilities, will help achieve the vision for the district. Surface parking and parking configurations that can transition to other uses over time will also be included.



Parking structures can be adapted for reuse

SUCCESSFUL IMPLEMENTATION

3. Accountability

Plans and policies will be performance-based and promote creativity and flexibility with design standards such as Leadership in Energy and Environmental Design (LEED) certified developments. This should include establishing a program of monitoring and reporting on progress, with accountability protocols in place, in keeping with the Town's current practices. Buildings should also be planned for flexibility to facilitate changes to programming, technologies, and tenant needs.



Buildings will be thoughtfully designed and meet sustainability requirements

3.3 KEY DIRECTIONS

Seven key directions will guide the ASP (Figure 10). These directions are the outcome of an analysis of this plan's guiding principles and objectives, as well as applicable policies, existing conditions, best practices, and opportunities and constraints. The result is a series of directions that have been developed to identify functional “on-the-ground” improvements to the Hospital District.

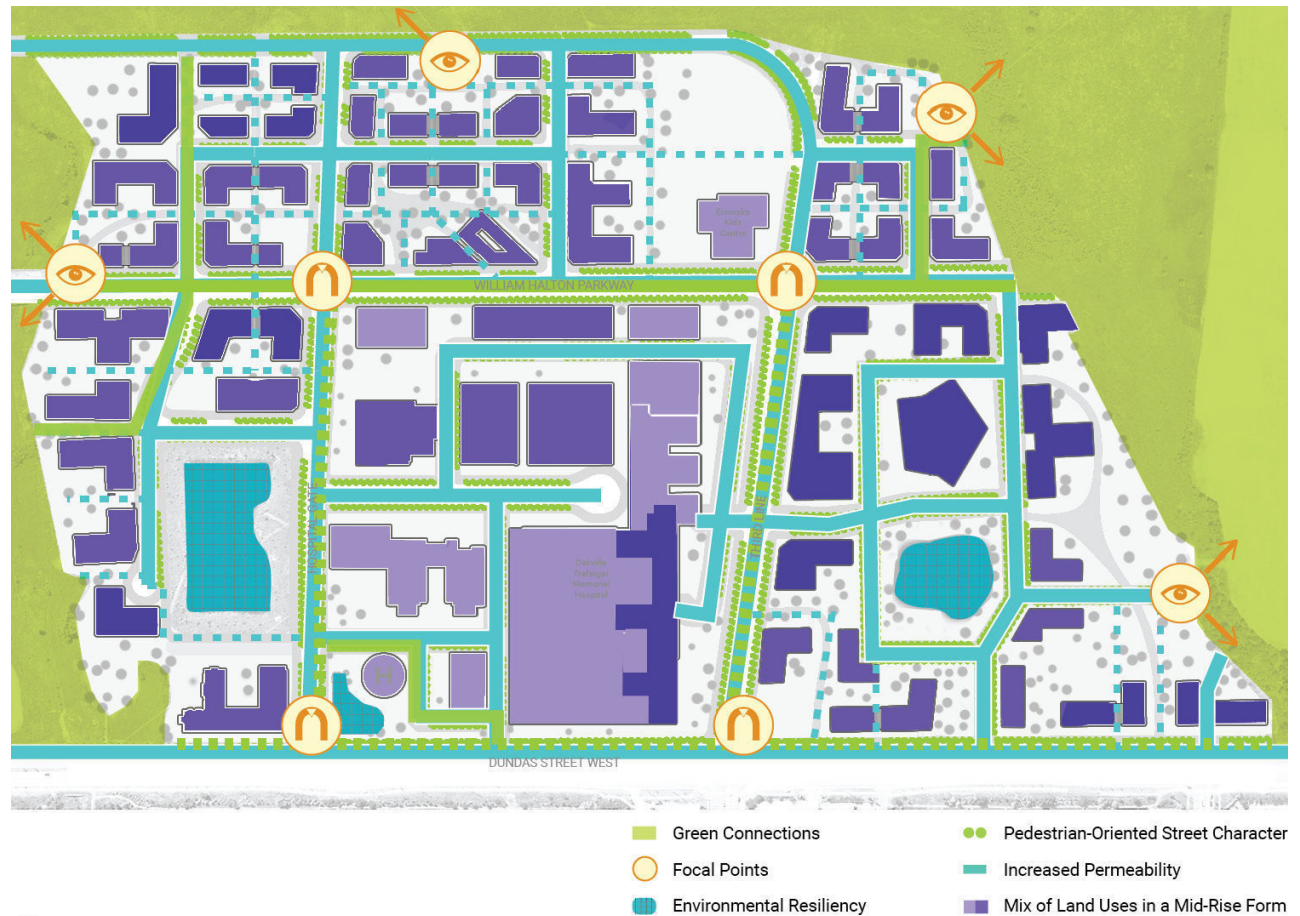


Figure 10 | Key Directions



1. GREEN CONNECTIONS

Green connections will incorporate nature into the Hospital District and connect the district to nearby parks and green spaces within and outside the district. Wide sidewalks, cycling lanes, and street trees will contribute to the pedestrian experience, support active transportation and provide green infrastructure.

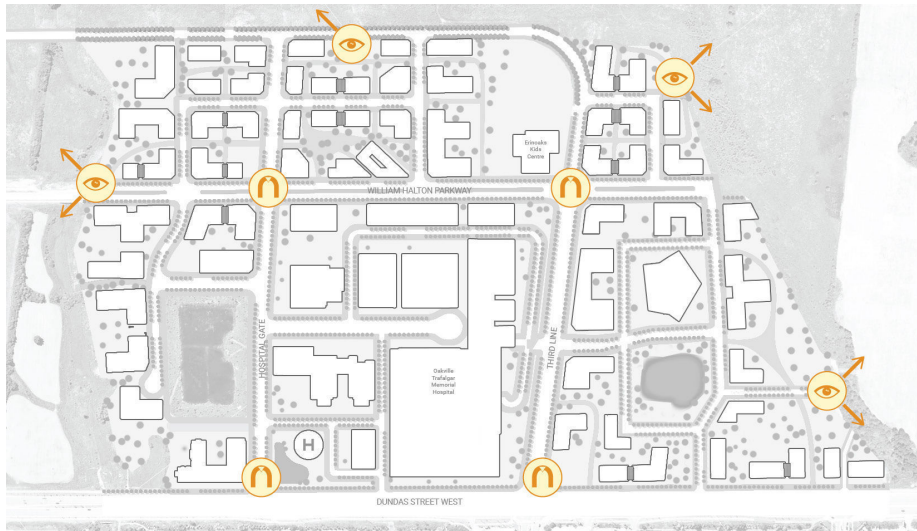
Connections to existing and planned parks and green spaces include to the West Oakville Sports Park (north), Palermo Park (west), the natural heritage system (along the district boundary), and the McCraney Trail and Castlebrook Park (southwest).



Wide sidewalks and street trees enable high-quality streetscapes



Green connections within blocks provide convenient linkages to key destinations



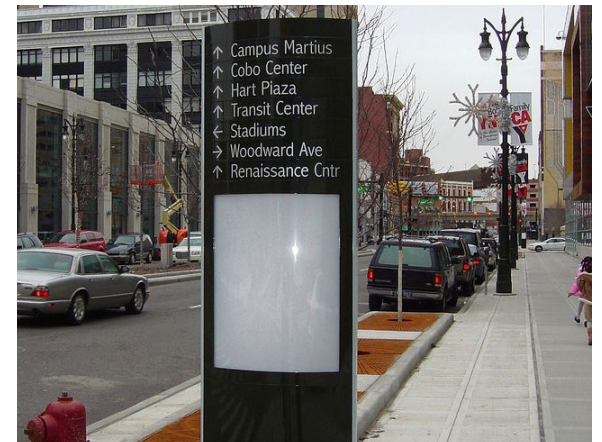
2. FOCAL POINTS

Key views and points of entry into the Hospital District will be reinforced by focal points such as gateways to create a distinct sense of place and to facilitate accessibility within and around the district. Gateways could include new physical structures, public art, streetscape improvements, wayfinding, signage, and more.

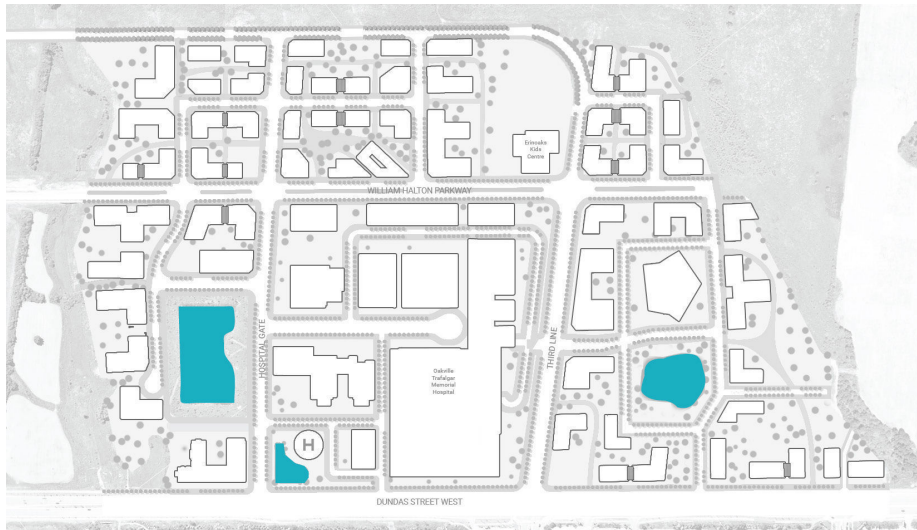
- Potential focal points include the Dundas Street and Third Line intersection, major transit stops for the Dundas bus rapid transit, the corner of Third Line and William Halton Parkway West, and the Dundas Street and Hospital Gate intersection.
- Views of Sixteen Mile Creek, the West Oakville Sports Park, and the natural heritage system along William Halton Parkway West will be enhanced.



Visual interest through public art at building entrances



Accessible wayfinding features improve the pedestrian experience



3. ENVIRONMENTAL RESILIENCY

The Hospital District will embrace its existing natural features through eco-friendly, innovative site design. Three existing stormwater ponds will be integrated into the district’s open space strategy, providing functional environmental benefits and passive recreational space for employees, residents and visitors.

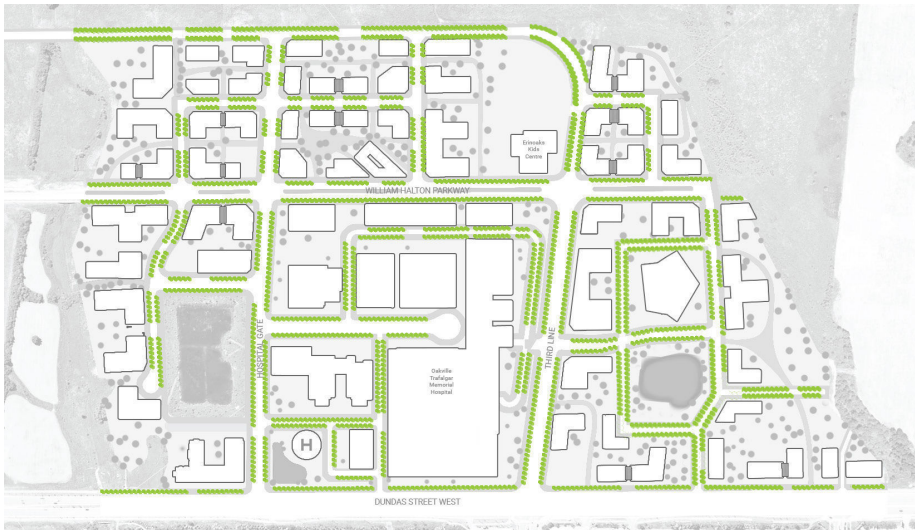
Design will incorporate innovative and sustainable design practices for the district’s buildings, streetscapes, energy distribution, natural habitat, and stormwater management. Innovative and sustainable design practices will be encouraged by applying the Town’s guidelines for urban design, sustainable design, urban forests, and tree canopy requirements to all new developments.



Low impact development through raised planters and silva cells



Passive recreation areas around stormwater ponds



4. PEDESTRIAN-ORIENTED STREET CHARACTER

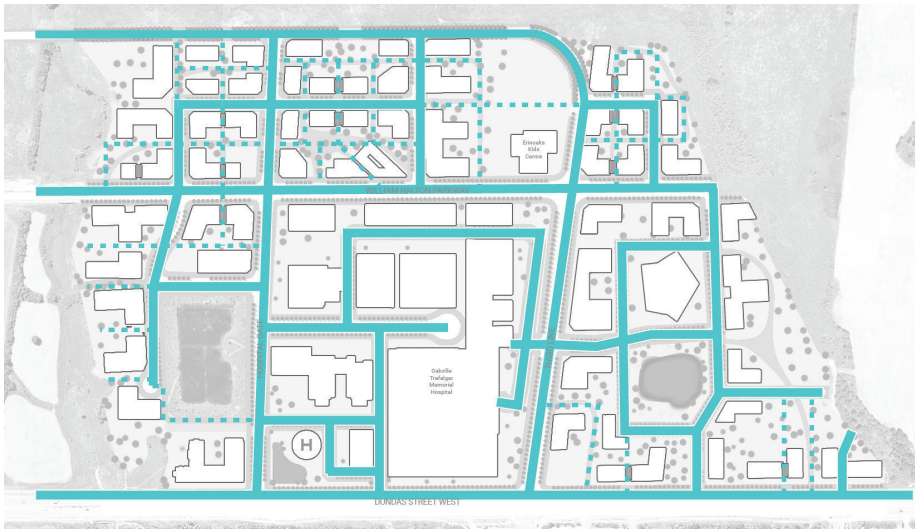
Streets in the Hospital District will be designed to enhance the pedestrian experience. Wide sidewalks, street trees, planters, public furniture, and various ground floor uses will create an attractive and safe environment that facilitates seamless movement between buildings and precincts.



At-grade uses improve safety and enhance the public realm



Pedestrian-friendly streetscape through public furniture and wide sidewalks



5. INCREASED PERMEABILITY

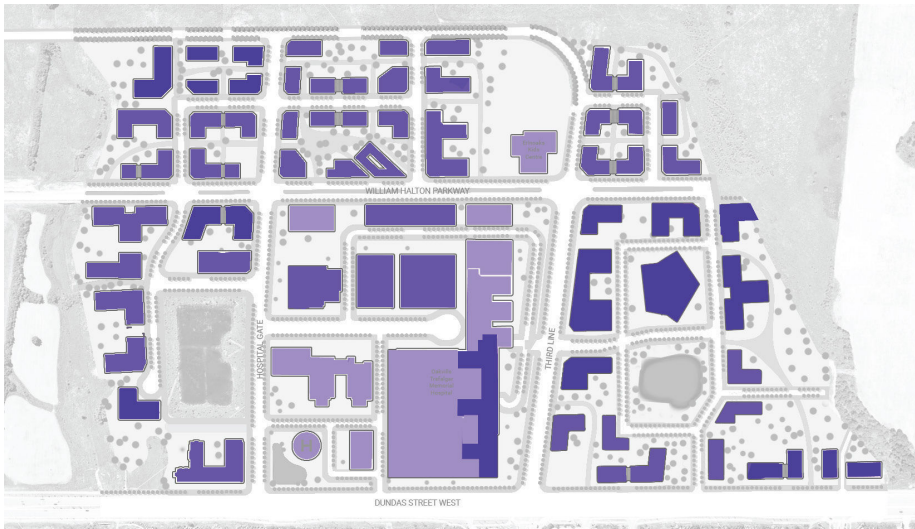
Compact urban form and pedestrian-focused building design will ensure greater permeability and connectivity for all users in the Hospital District. The street network will be in the shape of a grid to allow for easier navigation of blocks and precincts. Buildings will include well-designed walkways and mid-block connections that divide larger blocks and provide alternative routes for pedestrians.



Local streets within precincts ensure seamless circulation for all road users



Mid-block connections facilitate pedestrian movement between buildings



6. MIX OF LAND USES IN A MID-RISE FORM

The Hospital District will support mid-rise buildings and a mix of land uses with a variety of block and parcel sizes. Appropriate land uses and densities will be planned based on the surrounding context and uses.

Intensification and taller building heights will be focused at the eastern quadrant of the district, particularly along Dundas Street. Retail uses will also be encouraged in this area to support an urbanized, active streetscape, and a pedestrian-oriented public realm.



A healthy mix of uses create a vibrant district



At-grade service commercial uses cater to employees, residents and visitors

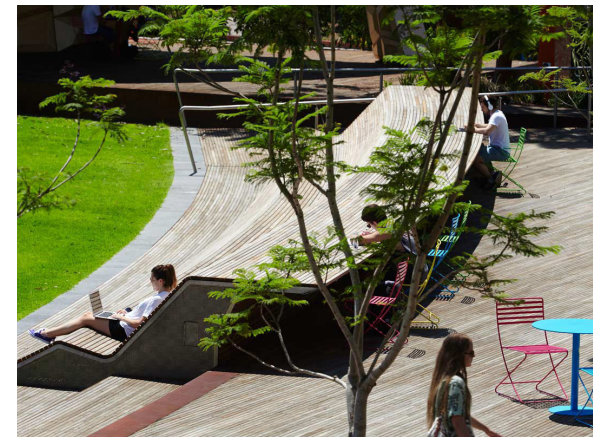


7. URBAN CAMPUS

The Hospital District will take the form of an urban “innovation campus”, with Oakville Trafalgar Memorial Hospital at its heart. The district will encourage innovative health-oriented uses in office development, research facilities, commercial, retail, academic, and other uses.



High-quality design leads to the district's innovative and urban character



Open spaces provide a collaborative "campus feel"

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4.0

MIXED USE JUSTIFICATION

INTRODUCTION

The vision for the Hospital District is for a world-class center for medical innovation in health care delivery, providing compassionate, quality, community health care. The Oakville Trafalgar Memorial Hospital will serve as the heart of the district. As a mixed use, transit-oriented and pedestrian-friendly vibrant community, the district will be developed by the careful integration of a variety of uses that prioritizes and strengthens its strategic employment capacity.

The North Oakville West Secondary Plan includes the Hospital District as a node for further study. It identifies an employment target for North Oakville West of approximately 250 net hectares of employment and 10,000 jobs, at capacity. The review of projected employment forecasts for the Region, Town, North Oakville West and the Hospital District identified that the Hospital District lands alone could accommodate more than 10,000 jobs, but that doing so would hinder the Town's ability to allocate employment to other strategic growth areas in Oakville.

At the same time, achieving the vision for the district is dependent on the introduction

of residential and mixed uses. A review for this Area Specific Plan determined that it is possible to include the ingredients for creating a complete community in the district while accommodating 10,000 jobs at full build out (Appendix J).

The following sub-sections provide the policy rationale for the introduction of residential and mixed uses, and identifies tools for implementation.

This subsection presents the relevant provincial, regional and municipal policies that support the Hospital District's proposed mixed use function.

4.1 POLICY

[Provincial Policy Statement, 2020](#)

The PPS includes policies that promote long-term economic prosperity (S.1.7.1) and encourage transit-supportive development and intensification to improve the mix of employment and housing uses to support provincial goals for energy conservation, air quality and climate change (S.1.8.1).

The Hospital District's proposed mixed use function is consistent with the policies outlined in the PPS.

- The vision for the Hospital District will promote opportunities for economic development; provides a range of housing options within close proximity to jobs; continues to provide long-term availability of land both for employment and residential functions; promote sustainable development with respect to proximity between employment and people; higher-order rapid transit; and a symbiotic relationship between development and the areas natural features (S 1.7.1).
- It also encourages transit-supportive development and intensification that

improves the mix of employment and housing to shorten commutes and decrease congestion (S 1.8.1).

A Place to Grow: Growth Plan for the Greater Golden Horseshoe, 2020

The Province amended the Growth Plan in June 2020 to address potential barriers to an increase in the supply of housing and jobs, and the ability to attracting investment. Among the changes is a new allocation for Halton Region to achieve new minimum population and employment targets of 1,100,000 people and 500,000 jobs by 2051.

Several Growth Plan policies are relevant to the Hospital District, including those related to employment planning:

- Employment policies call for a modernized employment area designation system that protects employment lands and highlight that conversion to non-employment uses can only occur where a municipal comprehensive review determines it can be rationalized, based on a set of criteria provided in the policy (S.2.2.5.9).
- The employment policies were updated

through Amendment 1 to allow for conversions prior to a municipal comprehensive review, with conditions, including that some employment will be maintained (S.2.2.5.10); and to require that upper- and single-tier municipalities, in consultation with lower-tiers, establish minimum density targets for all employment areas within settlement areas that meet a set of criteria (S.2.2.5.13).

- Amendment 1 also introduced a new employment policy, directing that outside of employment areas, the redevelopment of any employment lands should retain space for a similar number of jobs to remain accommodated on site (S.2.2.5.14).

The Growth Plan provides a planning rationale for mixed use in the Hospital District. The district conforms with these policies:

- It supports Halton Region in achieving its minimum population and employment targets. In addition, employment targets for the district do not decrease due to the introduction of residential and mixed

uses.

- Lands remain protected for employment uses while unlocking the potential for residential development. The proposed conversion of lands to non-employment uses appropriately addresses all criteria listed in Growth Plan policy 2.2.5.9. Specifically, the conversion of the district's employment lands will not inhibit the Town and Region in accommodating forecasted employment growth.
- In accommodating 10,000 jobs, the district's proposed mix of uses will contribute to the overall viability of employment growth in Oakville. The proposed mixed use function is also supported by existing and planned infrastructure, including transit infrastructure and public service facilities. Implementation of the Area Specific Plan will protect for employment uses by ensuring specific thresholds are achieved before permitting the introduction of residential uses.

Provincially Significant Employment Zones

Ontario identified new, provincially significant employment zones as priority areas in 2019. They are strategic areas that provide stable, reliable employment across the region and opportunities to improve coordination between land use planning, economic development, and infrastructure investments over the long-term. The policy rationale is provided by the Growth Plan.

The Hospital District is not identified as a Provincially Significant Employment Zone.

Regional Policies

Halton Regional Official Plan, 2018

Currently under review, Halton's Regional Official Plan identifies the Hospital District area as an employment area within the Urban Area (Map 1 - Regional Structure). It identifies objectives including the accommodation of compact and transit-supportive growth (S.72); support for complete communities of various sizes, types and characters (S.72.3); phasing of growth (S.72.5); planning for

a balance of jobs and housing (S.72.7); providing an appropriate range and balance of employment uses (S.72.10); and providing opportunities for new post-secondary facilities (S.72.11).

Halton's Regional Official Plan provides policies for Intensification Areas, with the objectives of creating a complementary urban form (S.78.1) at higher densities than the surrounding area (S.78.9); encouraging urban design that is cost-efficient and innovative (S.78.2); providing a range of employment opportunities, facilities and services in central, transit-accessible locations (S.78.3); providing a mix of diverse and compatible land uses (S.78.4); creating a pedestrian-oriented, transit-supportive urban environment that supports active transportation (S.78.5; S.78.8); and attracting a significant portion of population and employment growth (S.78.6).

The plan also provides a policy for Mixed Use Nodes (S.80) in the Livable Oakville Official Plan, that directs that they be identified where there is a concentration of residential and employment uses with development densities, patterns supportive of pedestrian

traffic, and public transit.

Halton's Regional Official Plan requires Oakville to prepare detailed official plan policies, or an Area Specific Plan, for the development or redevelopment of an intensification area (S.48, S.77.5). It also directs that the provisions for Intensification Areas may also be incorporated as part of a larger community plan (S.81.3).

The Regional Official Plan provides a planning rationale for mixed use in the Hospital District. The district conforms with these policies:

- It introduces a compact form of intensification that is supportive of pedestrians, active transportation, and transit while making efficient use of space and services, promoting live-work relationships and helping to foster a strong and competitive economy. The district will support the creation of complete communities by encouraging diverse land uses, while still prioritizing employment (S.72).
- It will also provide a balance of jobs and housing in an area that will be well

- served by planned transit. In prioritizing employment, the district will have a wide range and balance of employment uses, including office, prestige office, retail, service commercial, and institutional (among others) to accommodate existing and future needs (S.72).
- It provides an urban form that is transit-supportive, and promotes live-work synergies, collaboration, and social interaction. With a wide range of employment and residential uses and densities, the District is well positioned to accommodate population and employment growth (S.78; S.80; S.81).

Local Policies

The Livable Oakville Official plan establishes the urban structure and desired land uses in the Town. While the Hospital District is currently subject to the North Oakville West Secondary Plan, the town-wide Urban Structure review (OPA 15) identified the area as among “Nodes and Corridors for Further Study”. Nodes identified through the process will comprise the Strategic Growth Areas (SGAs) in the Town. As defined by the Growth Plan,

the Hospital District SGA would be a node identified by the municipality to be “the focus for accommodating intensification and higher-density mixed uses in a more compact built form” (see the Growth Plan 2020, Definitions).

- OPA 15 provides a planning rationale for mixed use in the Hospital District. The district conforms with these policies as a Strategic Growth Area, intended to accommodate intensification and higher-density mixed uses in a compact built form. Its proposed mixed use function is in keeping with the definition of Strategic Growth Areas, providing a diverse range of employment uses combined with residential permissions, in addition to institutional, recreation, commercial and entertainment uses to ensure the creation of a complete community where people can live, work and play. With its transit-supportive densities and planned transit infrastructure, the proposed mixed use development is well positioned to help the Town and Region achieve its population and employment targets.

The Hospital District currently includes several sensitive uses such as the Oakville Trafalgar Memorial Hospital, ErinoakKids Centre for Treatment and Development, in addition to the approved All Seniors Care and Assisted Living Centre and a future long term care facility on the lands controlled by a Minister's Zoning Order, located north of the Hospital and west of ErinoakKids. Introducing residential uses within the district would complement this precedent and is in conformity with the vision for the area.

4.2 CONTEXT & CASE STUDIES

Case Studies

A Best Practices review of health districts across Canada and the United States served as a key input into the development of the Hospital District's land use typologies (see Appendix A).

Of the five case studies reviewed, four included mixed use designations:

- Buffalo Niagara Medical Campus, New York: Land uses include hospital and related medical, university, research facilities, office, retail, hotel, and residential;
- Life Sciences Corridor, Massachusetts: Land uses include hospital and related medical, university, office, entertainment, retail, commercial, hotel, and residential (including middle income housing units). A 2.5 acre, 1.5 million square foot, mixed use development in Somerville incorporates a split of 60% commercial and 40% residential.
- Baton Rouge Health District, Louisiana: Land uses include hospital and related medical, office, commercial, hotel,

residential, institutional, and light industrial uses; and

- Health and Technology District, British Columbia: Land uses include hospital and related medical, university, office, open space, retail, commercial, entertainment, and residential.

While the Guelph Innovation District (GID) was not captured in the Best Practices review as it is not primarily "health-focused", the 436-hectare district exemplifies a true mixed use community. Coined as a live-work research and development cluster, the approved secondary plan for the GID includes targets to accommodate 7 000 people and create 9 000 new jobs, specifically in the communications, media, and agriculture and environmental technology sectors.

In the current socio-economic climate where we are seeing a greater reliance on technology and a shift to at-home-working, identifying an appropriate mix of jobs and residents for the Hospital District is critical. A shift from retail to health care tenants as anchors well-positions the district to provide a more sustainable mixed use model as the

demand for health care facilities that serve both aging and future populations continues to trend upwards. Employees and visitors of health care facilities also serve as consumers who could support services provided within a walking distance from the hospital (e.g., restaurants, coffee shop, pharmacy, entertainment, and retail).

To ensure the Hospital District will achieve appropriate employment targets, residential uses will be introduced only once a predefined employment (non-residential) threshold has been achieved. This approach protects employment uses and the realization of a true mixed use district.

Refer to Section 5.1 for additional details on the thresholds.

4.3 IMPLEMENTATION

Various tools may be employed to implement the thresholds in the Hospital District. The Livable Oakville Official Plan presents several, including the use of a holding by-law.

Through the zoning by-law amendment to rezone lands in the district, the Town can affix a holding symbol “H” in conjunction with any zoning category to specify the future use to which lands, buildings or structures may adopt once the specific non-residential threshold has been satisfied. The holding symbol is removed through an amendment to the Zoning By-law. A site specific holding by-law may be used to implement this ASP for the following reasons:

- To ensure that certain conditions, studies or requirements related to a proposed zoning change are met;
- To achieve orderly staging of development or redevelopment, in accordance with municipal and provincial policies; and
- To ensure that adequate infrastructure and community services and facilities are, or will be, available in accordance with municipal standards.

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5.0

AREA SPECIFIC PLAN:
Preferred Planning and
Development Framework

INTRODUCTION

Based on the study objectives, vision statement and guiding principles; a study boundary, two land use options and evaluation criteria were developed. They took into consideration a range of office, institutional, and mixed uses, as well as slight modifications to the road network and other components. These options were presented to the public at an open house in November 2019.

A preferred land use option was then created based on comments from the public (Appendix C), input from Town staff, consistency in approach with other growth areas, shifts in provincial policy, and other inputs (Appendix D).

This section presents the Preferred Planning and Development Framework for Oakville's Hospital District. It provides direction related to development of precincts in the district as well as land uses, building heights, open space, and streets and blocks.

5.1 PRECINCTS

As a critical employment and health care node, the Hospital District is envisioned as a world-class center for health-related innovation in an employment-focused mixed use community concentrated on research, life sciences and technology sectors.

For planning purposes, the district is divided into five distinct precincts, each with their own character and function (Figure 11). Each precinct is defined by a typology that directs land uses, building types, built form, and policy directions. All precincts will accommodate a mix of uses. Residential uses will be permitted only once a predefined employment threshold is achieved. The precincts set the foundation for the ASP.

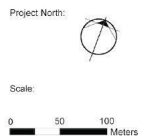
- Precinct 1: Office-focused
- Precinct 2: Transitional
- Precinct 3: Complementary
- Precinct 4: Innovation
- Precinct 5: Institutional



Figure 11 | Precinct Plan

Legend:

- Study Area
- 1 - Office-Focused
- 2 - Transitional
- 3 - Complementary
- 4 - Innovation
- 5 - Institutional



5.1.1 PRECINCTS

1. Office-focused Precinct

Envisioned as an urban office park, the Office-focused Precinct is primarily intended to accommodate office employment uses, such as prestige office uses.

The precinct will feature active at-grade uses such as service-oriented commercial uses, and attractive gathering spaces for employees and visitors through urban squares and courtyards.

Movement throughout the precinct will be facilitated through secondary and flexible streets, as well as open spaces. Properties fronting on Dundas Street West will feature a distinct streetscape

The predominant building type will be mid-rise.

* Employment Threshold: 50% non-residential, 50% residential (standalone or in combination).

2. Transitional Precinct

Located in the northwest and northeast corners of the district, the Transitional Precinct will feature a mix of uses with a special focus on sustainability.

The Transitional Precinct facilitates the transition between employment, institutional, natural heritage, and open space and parks areas within the Hospital District. The precinct will include retail and service commercial uses in addition to office and residential. This precinct will emphasize an enhanced public realm.

Through flexible streets and open spaces, the precinct will highlight its green connections to adjacent natural heritage land and parkland such as the West Oakville Sports Park (north), Palermo Park (west), and the natural heritage lands (east). In addition to contributing to the district's sustainability objectives, green connections will facilitate recreation through active and passive uses.

- Northwest corner: An urban square located at the intersection of William Halton Parkway West and Hospital Gate will serve as an anchor and centre of

activity for this precinct, and will include planters and trees, public furniture and active transportation infrastructure (e.g., cycling facilities). This precinct will accommodate limited vehicular access.

- Northeast corner: The east-west flexible streets will provide connections to the natural heritage lands bounding the eastern edge of the district will serve as the defining characteristic of this precinct, establishing smaller blocks and providing accessible walking and cycling paths.

The predominant building type will be mid-rise.

* Employment Threshold: 20% non-residential, 80% residential (standalone or in combination).

3. Complementary Precinct

The Complementary Precinct is intended to focus on life sciences, tech and engineering and will feature a compact urban campus character. Aligned with the educational, research and development focus, the precinct will incorporate prestige office and residential uses with ancillary retail and service commercial uses.

East-west open spaces and flexible streets will facilitate pedestrian movement between buildings and provide gathering spaces for employees, visitors and residents. Vehicular access will be provided through two north-south secondary streets with connections to the primary streets.

The Complementary Precinct is strategically located north of the Institutional Precinct to encourage synergies between the two.

The predominant building type will be mid-rise.

* Employment Threshold: 60% non-residential, 40% residential (within mixed use buildings).

4. Innovation Precinct

As the most urban precinct in the district, the Innovation Precinct features a "live work play" character. The precinct will accommodate a wide range of uses such as retail and service commercial, office, residential, entertainment, and hotels, among others.

Safe and comfortable pedestrian movement will be facilitated through a network of secondary and flexible streets. The built form will be carefully oriented around open spaces.

This precinct will focus on public private partnerships between the Town and various stakeholders, which could include developers, post-secondary institutions, tech incubators, pharma, biotech, and research and development ventures.

Building heights will range from six to fifteen storeys.

* Employment Threshold: 65% non-residential, 35% residential (standalone or in combination).

5. Institutional Precinct

With the Oakville Trafalgar Memorial Hospital serving as the district's anchor, the Institutional Precinct features a large-scale institutional and medical character to serve Town and Region-wide purposes.

A network of secondary streets facilitate the movement of priority emergency and private vehicles.

Aligned with the district's focus on sustainability, a well-maintained stormwater management pond along Dundas Street West will provide passive recreational space and functional environmental benefits.

The predominant building type will be mid-rise with some taller buildings.

* Employment threshold does not apply.

5.1.2 THRESHOLDS

For the Hospital District to develop as a mixed-use employment-focused area it is important that residential and other uses be introduced while employment targets are maintained. This section of the report analyzes existing policy, market analysis and best practices research; it provides a high-level discussion of primary and secondary land uses to be accommodated within each precinct, and functions as a baseline for recommending employment and residential thresholds.

Livable Oakville OP and NOWSP

As outlined in the Livable Oakville OP, the Town of Oakville is expected to experience growth in employment of 45,000 new jobs between 2006 and 2031. Most of this growth is expected to be concentrated within North Oakville.

The NOWSP envisions a range of higher density employment areas, in addition to a significant supply of residential units at varying densities. At full build out, between 45,000 and 55,000 people, as well as approximately 25,000 jobs, are expected for North West Oakville. The Hospital District itself is expected to accommodate up to 10,000 jobs.

A Place to Grow: Growth Plan for the Greater Golden Horseshoe

Amendment 1 to the Growth Plan permits the conversion of employment lands prior to a municipal comprehensive review. This conversion is only permitted if the lands maintain some employment uses, and minimum density targets for employment lands are identified by upper-tier municipalities in consultation with lower-tier municipalities.

Hospital District Employment Target

This ASP maintains the Hospital District's initial employment target of 10,000 jobs and ensures that this target be met prior to introducing residential and other non-employment uses.

The intent is for primary land uses within the Hospital District to remain the same and include: hospital use, research, development and incubation facilities, institutional uses, medical and health-related professional offices and manufacturing uses. Secondary uses are to maintain an employment focus and include: rehabilitation facilities, transition and long-term care facilities, a hotel, and retail and service commercial uses. The introduction of residential uses is subordinate to primary and secondary land uses.

As discussed in Sections 4 and 6, designations within the Hospital District should be subject to site-specific zoning regulations, including the use of a holding zone; any proposed residential uses should be carefully evaluated to ensure their introduction does not adversely impact the employment function of the Hospital District.

Further, the Town should continue to be mindful of other potential growth areas throughout the municipality, including along the QEW and Lakeshore West GO Corridor.

Market Analysis

Market analysis of employment and residential demand (Appendix E) provides insight into development capacity. Key observations include:

- Significant population and employment growth potential in North Oakville will require expansion to the existing retail/service commercial offering to maintain appropriate service levels within the community. Some of these uses can be located within the Hospital District.
- There is potential for accommodating office expansion within the Hospital District, however, this will not likely result in a meaningful concentration of major office space, nor a prominent employment node in the broader context of Halton Region or the GTHA. This accommodation could reasonably involve the development of some 23,000 m² to 28,000 m² of supportive office space.
- A review of the Humber River, Etobicoke General, Mississauga General, London Health Sciences, Southlake, Brampton Civic

and Milton General Hospitals revealed that often located adjacent to hospitals were private pharmacies and general practitioners' offices. Additionally, the vast majority of hospitals reviewed had adjacent senior's facilities.

- Only two hospitals contained a research facility. For this study, research facilities are understood as private sector or non-profit organizations that develop innovation software, hardware or technical solutions to medical-related issues. Attracting uses of this nature is critical for establishing a regionally significant employment hub that extends beyond the basic service functions of a traditional medical facility.
- Other common hospital-related development opportunities that could provide a stable and reliable source of employment, while also potentially increasing demand for real estate, include: private pharmacies/drug stores, general practitioners' offices and diagnostic facilities, as well as adjacent seniors care facilities.

- There may also be opportunities for additional regional-serving public institutions and community services-based facilities, in addition to private enterprises such as daycare facilities. These adjacent uses provide a stable and reliable source of employment opportunities, and increase demand for office space.
- To develop into a broader regionally significant node, it is important to provide opportunities that attract less-common uses, including external research facilities and corporate organizations. These users may be drawn to a location based on an academic partnership, a notable area of specialization for a given hospital, or a broader culture of innovation within the community.
- Population growth anticipated in Northwest Oakville will require at least some component of local- and regional-serving retail/service commercial amenities. In addition, these types of businesses will be further supported by the employment yields realized as part of the development of the Hospital District.
- Locating broader, regional civic/institutional servicing uses on Hospital District lands may reinforce the regional importance of the node and contribute to its mixed-use nature. These uses could include a post-secondary presence, public library, community centre, or recreation facility, amongst other uses.

Best Practices Case Studies

The Best Practices Review (Appendix A) provides additional insight into complementary land uses and employment thresholds.

The Buffalo Niagara Medical Campus in New York State includes hospital and related medical, university, research facilities, office, retail, hotel and residential uses. The Trico complex within the campus is a mid-rise mixed-use building containing residential, retail, office and hotel uses slated to be completed in 2021. As of April 2019, the campus included 840,000 m² of GFA and 16,000 employees.

The Life Sciences Corridor in Massachusetts includes hospital and related medical, university, office, entertainment, retail, commercial, hotel and residential uses. Innovation Square Phase II, located within the corridor, includes a 24,000 m² mixed-use building and a proposed 93,000 m² of office, lab and multifamily residential uses.

The Health and Technology District in Surrey, British Columbia includes eight mixed-use buildings with a GFA of approximately 140,000 m², and includes hospital and related

medical, university, office, retail, commercial, entertainment and residential uses. At full build-out the district is expected to include 10,000 people and over 13,500 jobs. This ratio of 1.35 jobs per person is comparable to the 1.56 jobs per person ratio projected for the Hospital District (See Section 5.4).

McMaster Innovation Park in Hamilton, Ontario is comprised primarily of research and academic facilities with some retail and hotel/conference uses. The Innovation Park includes 150,000 m² of GFA and building footprints of 1400 to 2800 m².

Each of these best practice case studies include post-secondary and research facilities, in addition to traditional hospital infrastructure.

Precincts

Individual precinct thresholds were determined as part of an iterative process, which demonstrated that the Hospital District could meet the required employment target of 10,000 jobs. A target of 10,000 jobs is roughly equivalent to 650,000 m² of employment GFA.

Employment and residential thresholds are informed by policy directions from Section 5.2, relating to land uses, building heights, and streets and blocks. As previously discussed, all primary and secondary uses must be accommodated prior to the introduction of residential uses. Thresholds for each precinct are as follows:

- Office-focused Precinct: 50 percent non-residential, 50 percent residential.
- Transitional Precinct: 20 percent non-residential, 80 percent residential.
- Complementary Precinct: 60 percent non-residential, 40 percent residential.
- Innovation Precinct: 65 percent non-residential, 35 percent residential.

- Institutional Precinct: 100 percent non-residential.

The Office-focused Precinct is intended to accommodate hospital related supportive office space. This includes primary and secondary land uses such as senior's facilities, general practitioner's offices, daycare facilities, medical testing and diagnostic facilities, pharmacies, and life sciences labs.

Market analysis indicated the Hospital District could reasonably develop 23,000 m² to 28,000 m² of supportive office space. Based on permitted densities for the precinct, adopting a 50/50 split between non-residential and residential uses results in employment GFA of 67,000 m². This implies that unless the Hospital District attracts a significant tenant such as an external research facility, corporate organization, or academic institution, the Office-focused Precinct likely has excess office employment capacity than that recommended in the market analysis. It also implies that residential uses can be reasonably introduced at the identified thresholds.

The size and location of the Office-focused precinct provides a strong transition between planned employment uses to the west and institutional uses to the east. It also provides adequate space to accommodate larger office floorplates.

The Transitional Precinct facilitates the transition between employment, institutional, natural heritage, and open space and parks areas. In addition to residential uses, the precinct is expected to accommodate retail and service commercial uses such as private pharmacies/drug stores, daycare facilities, restaurants and small grocery stores that will support employees and residents within the Hospital District.

Small institutional uses, such as a library, could also be accommodated. The Hospital District is currently served by two libraries located nearly equidistant from the site. The Glen Abbey Library – located at 1415 Third Line – is approximately four kilometres to the southeast of the site. Alternatively, the Sixteen Mile Branch is located at 3070 Neyagawa Boulevard, approximately four kilometres to the northeast of the site. Each of these locations are easily accessible by automobile and located adjacent to existing public transit routes. However, they extend far beyond a reasonable walking distance.

With an employment threshold of 20 percent, the Transitional Precinct has the greatest focus on residential uses within the district. Total projected employment GFA within the precinct is 35,000 m².

The Complementary Precinct includes a 60 percent non-residential employment threshold. It has a specialized focus on life sciences research and development and is intended to support the Institutional Precinct. Located north and west of the Institutional Precinct, the Complementary Precinct is intended to accommodate primary uses such as research, development and incubation facilities, institutional uses, medical and health related professional offices and manufacturing uses. This precinct would be a good location for an academic facility.

Projected employment GFA within the Complementary Precinct is 67,000 m².

The Innovation Precinct is a major employment and residential area within the Hospital District that includes approved zoning for a hotel. This precinct will focus on public-private partnerships between the Town and various stakeholders, which could include developers, post-secondary institutions, tech incubators, pharma, biotech and research and development ventures. It is most likely within the Innovation Precinct that specialized research space could ultimately be attracted.

Employment space within the Innovation Precinct is projected at almost 200,000 m².

The Institutional Precinct includes the Oakville Trafalgar Memorial Hospital Lands and the ErinoakKids Centre for Treatment and Development. The Institutional Precinct is projected to include 293,000 m² of GFA and no residential uses.

Based on the above thresholds, and policy direction (See Section 5.2), the precincts can accommodate a total of 660,000 m² of employment GFA projected to result in 10,600 jobs. Thus, sufficiently meeting the overall employment target while incorporating sensitive land uses, such as residential, which will help support the development of a complete community. See Section 5.4 for a description of projected population and employment densities.

While it is too early to properly understand the full implications of Covid 19 and advancements in virtual meeting technology on office market demand, we expect evolving trends will have less of an impact on medical related office use than other industries. It should be noted, however, that market analysis suggest the Hospital District is not likely to achieve projected employment targets unless specific anchor tenants and/or specialized business activities are actualized.

5.2 POLICY AND DESIGN DIRECTIONS

In addition to policy and design directions, this section provides a description of the following frameworks:

- Land uses;
- Building heights;
- Open spaces; and
- Roads and blocks.

The Preferred Planning and Development Framework features a primarily mid-rise character with permitted building heights ranging from six to fifteen storeys (Figure 13). Taller buildings are concentrated east of Third Line and along Dundas Street.

East-west and north-south connections are provided throughout the district with pedestrian, cycling, and multi-use trails. These connections will allow for safe and seamless linkages to existing and planned parks and open spaces.

5.2.1 LAND USES

The land use policy directions provided below apply to all lands in the Hospital District.

The majority of the lands will be designated mixed use – specifically Urban Core – with the exception of the Oakville Trafalgar Memorial Hospital and ErinoakKids Institutional lands (Figure 12).

The intent of the Urban Core land use designation is to provide an urban built form that includes a variety of uses to support and complement the institutional focus of the district, serve the needs of employees, residents, and visitors, and make efficient use of municipal services and infrastructure.

The mixed use designation provides areas where residential, commercial, and office uses are integrated in a compact urban form at higher development intensities. Mixed use areas are to be pedestrian-oriented and transit-supportive.

Land use designations are intended to encourage animated streets by encouraging retail and service commercial uses on the ground floor of mixed use buildings.

The Hospital District includes the following land use designations:

- Urban Core; and
- Institutional.

Urban Core

Permitted Uses

A wide range of retail and service commercial uses, including restaurants, commercial schools, offices and residential uses may be permitted in the Urban Core designation. Retail and service commercial uses shall be provided on the ground floor of mixed use buildings that directly front a public street. These uses may also extend to other floors. Entertainment facilities and hotels may also be permitted. Office uses and ancillary residential uses may be provided on the ground floor and above the ground floor.

The size and location of uses shall be determined through the development process and regulated by the implementing zoning.

Building Heights

Minimum of six storeys and a maximum of twelve storeys in height.

Parking

Underground and structured parking will be encouraged.

Surface parking should not be permitted between buildings and the adjoining streets, but consideration may be given to limited surface parking within these areas for the purpose of short-term visitor or commercial parking.

Site Specific Development Applications

Southeast, Office-focused Precinct

Permitted Uses: Nursing home, private or public park, ground floor ancillary retail, financial institution, general or medical office, parking garage, art gallery, library, museum, place of worship, and research and development facilities.

Midwest, Innovation Precinct

Permitted Uses: General office use, hotel, information processing, medical office, nursing home (excluding dwelling units), private or public park, parking garage, research and development, retirement home (excluding dwelling units), trade and convention center.

Only Permitted Ancillary Uses: Café, commercial fitness center, convenience store,

day care, financial institution, restaurant, retail store, service commercial, and service establishment.

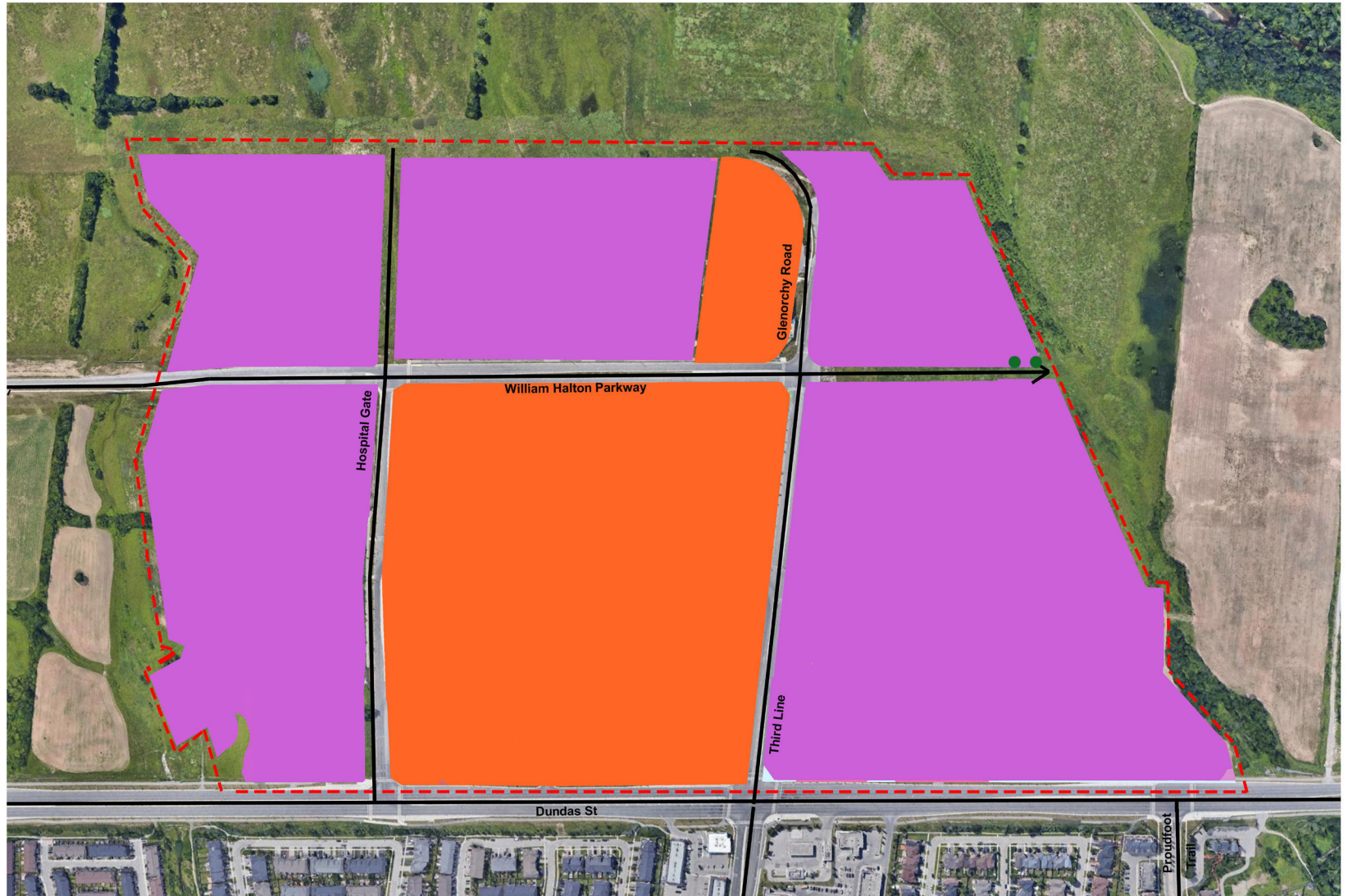
Institutional

Permitted Uses

- Educational facilities with residential accommodations, colleges and universities, health care facilities and hospitals with ancillary uses, places of worship on sites greater than 2.5 hectares, government and cultural facilities, and residential accommodations associated with institutional uses.

Legend:

- - - Study Area
- Institutional
- Urban Core



Location:
Hospital District
Oakville ,ON



Scale:
0 50 100
Meters

Figure 12 | Land Uses

5.2.2 BUILDING HEIGHTS

Mid-rise development between 6 and 12 storeys is permitted in most of the Hospital District. Taller buildings between 13 to 15 storeys are permitted in portions of the Innovation and Institutional Precincts (Figure 13).

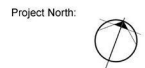
Minimum and maximum building heights are based on land use designations and ensure a high-quality public realm and pedestrian environment.

Legend:

- - - Study Area
- Tall
13-15 Storeys
- Mid rise
6-12 Storeys



Location:
Hospital District
Oakville ,ON



Scale:
0 50 100
Meters

Figure 13 | Building Heights

5.2.3 OPEN SPACES

The Hospital District includes a variety of open green spaces. It also includes urban squares in the form of privately owned public spaces (POPS), a type of public space that, although privately owned, is required to be open to the public under a zoning by-law or binding agreement. Urban squares include spaces such as small plazas, pathways, and parkettes that complement existing parks, open spaces and natural areas. They can be used for passive leisure, short-term events, and more.

In the district, several POPS are strategically located at key intersections in the northwest and southeast quadrants where they can be well-integrated into the urban form of the district, such as to green and active transportation connections (Figure 14).

Urban squares contribute to an inviting and safe public realm for employees and residents, and facilitate connectivity and accessibility in the district.

See Appendix I for guidance related to the design of urban squares.



Figure 14 | Open Spaces

5.2.4 TRANSPORTATION

The proposed road network reduces block sizes and increases the number of roads to improve permeability and connectivity (Figure 15).

Smaller blocks provide greater opportunity for use of integrated pedestrian walkways and linear green spaces. Breaks in the building façade inform the scale and rhythm of new development. A north-south cul-de-sac is provided parallel to Hospital Gate.

A fine-grained road network is provided within the block east of Third Line, with connections to the hospital's main entrance and to Dundas Street.

A transportation study was prepared to assess the traffic and road capacity for the build-out of the Hospital District (Appendix G).

Findings suggest intersections in the district are forecast to operate at acceptable levels of service and within capacity. Several intersection upgrades have been identified to accommodate projected site traffic. Future conditions are based on identified targets as

required by the Halton Region Transportation Master Plan including a 20% transit mode split, a 5% active mode split, and transportation demand management reductions of 3% by 2031.

The proposed internal road network is anticipated to serve projected traffic volumes without issue (Appendix G). The recommended transportation system is expected to achieve a balanced range of travel options that encourage walking, cycling and transit.



Figure 15 | Roads and Blocks

5.2.5 SERVICING

A servicing and stormwater management study was conducted as part of this Area Specific Plan to analyze water, wastewater, and stormwater systems in the Hospital District (Appendix H).

Water

A watermain analysis found that simulated pressures satisfied requirements based on average, maximum, and peak hour scenarios for present and future planning horizons. The proposed network has significant fire flow availability while maintaining minimum residual pressure requirements.

It is recommended that the Hospital District be serviced by a combination of 300mm and 200mm watermains. The existing main into the site (Third Line north of Dundas Street) is a 400mm main and provides sufficient capacity to supply water to a network of 300mm mains. With this servicing strategy, fire flows are expected to be at or above 200L/s for almost all points evaluated in the district.

Wastewater

The impact of the proposed design flow on the Region's wastewater network was also assessed. To accommodate the proposed intensification and effectively convey sewage to the North Sewage Pumping Station, most of the district's existing infrastructure needs to be upgraded. It is recommended that upgrades be concentrated on William Halton Parkway and Third Line with methods such as increasing the slopes of some sewers and/or increasing the diameter of certain sewers.

Stormwater

The hospital's Stormwater Management Plan was reviewed to ensure that existing and future development conforms to criteria set by the North Oakville Creeks Subwatershed Study, Town of Oakville, Conservation Halton, and the Ministry of the Environment, Conservation and Parks.

Lot level stormwater management in the district will address groundwater recharge and water balance with lot grading, discharging clean roof runoff to pervious surfaces, infiltration swales, green roofs and

more. A diversion channel is also proposed to replicate pre-development conditions within the Sixteen Mile Creek tributary to the maximum extent.

Three end-of-pipe stormwater management wet facilities are located in the Hospital District, including the Halton Healthcare Services Stormwater Management Pond, Glen Oak Regional Detention Facilities, and Taplow Creek Regional Detention Facilities. Development will proceed in phases with all facilities in place.

Overall stormwater management objectives outlined in the North Oakville Creeks Subwatershed Study are satisfied by the diversion channel and wet facilities. No on-site quality and quantity control are required for future development, provided overall imperviousness remains below 85%.

Overall stormwater management objectives outlined in the North Oakville Creeks Subwatershed Study are satisfied by the diversion channel and wet facilities. No on-site quality and quantity control are required for future development provided overall imperviousness remains below 85%.

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5.2.6 URBAN DESIGN

The urban design recommendations aim to provide design guidance based on the relationship between buildings, streets, and open spaces. This allows for a phased development approach, aligned with the likelihood that employment uses will build out first followed by complementary residential development. This will be well supported by a typology-based urban design approach. The intent of the approach is to ensure that a vibrant community life is well-supported at all stages of the district's build-out.

The recommendations outlined in this section focus on securing a future character and overall identity for the district that is based on a development's planned and existing adjacencies.

The Hospital District is envisioned as a place for people to work and live, featuring connections to a network of well-established open spaces, interconnected new streets, and an overall built form that complements and frames the streets and open spaces. Facilitated through a series of urban design interfaces, the built form will be specifically

tailored to its surroundings adjacencies, including primary and secondary streets, urban squares, flexible streets, and green streets/connections (Figure 16). This tailored approach to the built form will create a context specific, well-designed and compact human-scaled environment.

The interfaces should be considered when designing and evaluating the appropriateness of development proposals for the Hospital District.

Refer to Appendix I for additional urban design direction.

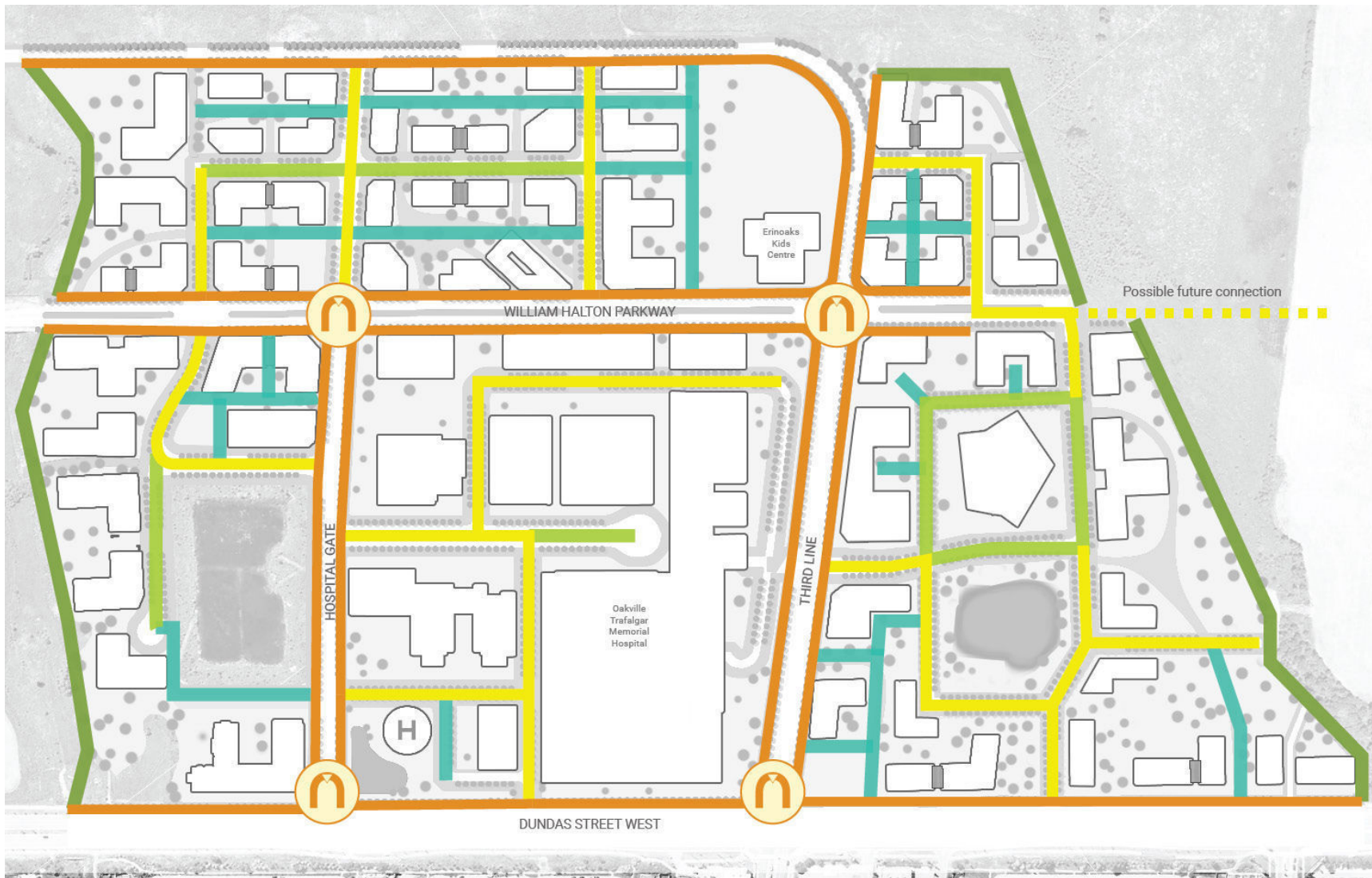
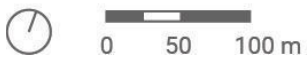


Figure 16 | Urban Design Interface

- Building to Primary Street
 - Building to Secondary Street
 - Building to Flexible Street
- Building to Green Connection
 - Building to Urban Square
 - ⌒ Gateway



Building to Primary Streets

- Primary streets are where the public facing and more institutional character of the Hospital District will be found. They will act as a buffer and introduction to the vibrant urban activity that occurs within the precinct blocks.
- Buildings that frame primary streets will shape the character of the entire district.
- Primary streets are characterized with wide rights of way, large boulevards, and high-quality landscape features.
- With a focus on creating a pedestrian- and cycling-friendly character, the built form orientation will aim to reduce the visual width of the rights of way by locating buildings consistently along the street edge with a minimal street wall of five to eight storeys.

Building to Secondary Streets

- Secondary streets will feature a more urban, fine-grained character and narrower street right of way when compared to primary streets.

- Like primary streets, secondary streets will be framed by building facades, but in contrast, it is recommended that they have a looser street wall massing with a focus on creating semi-private courtyards and amenity spaces for employees, residents and visitors.
- Secondary streets will foster community life and activity, with opportunities for refined building façades, unique open spaces, and a more interconnected series of building entrances and uses.
- Building setbacks should maintain the ideal proportion of street wall to street width. This proportion should be guided by the overall vision for the precinct, ensure sun light on the streets and open spaces, and encourage a mix of building types and styles.
- Secondary streets will support the urban life of the area and should have a different built character than the primary streets.

Building to Urban Squares

- Urban squares in the form of POPS will have appropriately-scaled building



Buildings Frame Secondary Street Edges



Orientation of Buildings Frame Urban Squares

façades that include a building base designed in consideration of the adjacent pedestrian environment.

- A pedestrian scale can be reinforced through a combination of finer vertical and horizontal articulations, visual connections between the interior and exterior spaces, and clearly defined building entrances.
- The overall massing of the buildings will be developed to maximize sunlight on public open spaces.
- Open spaces between buildings should be positioned to provide continuous pedestrian and cycling route connections between the primary and secondary street network.

Building to Flexible Streets

- Buildings facing flexible streets should be treated in a manner similar to those facing secondary streets and urban squares.
- The open spaces adjacent to buildings should seamlessly connect to the flexible street with an aim of visually indicating

the priority of pedestrians.

- Buildings should be located close to the street edge or sufficiently set back to provide for gathering spaces, courtyards, and patio areas. The building base should take into consideration the priority of pedestrian movement within the district.

Building to Green Streets or Connections

- Several precincts include community green spaces and connections. Preserving and enhancing natural features is a key design aspiration of these conditions.
- A single linear building façade or continuous “edge” condition should be avoided. Buildings should adopt appropriate setbacks and step-backs in response to natural features.
- Terraces, building wings, and irregular building footprints should be positioned to create a softened relationship between the buildings and natural areas.
- A less-defined building edge should be used to frame a series of transitional open spaces that complement and connect to naturalized areas.



Flexible Streets Showcase Pedestrian-Friendly Built Form



Building Scale Creates Softened Relationship with Natural Areas (Source: Waterfront Toronto)

5.2.7 PARKING

The Hospital District will demonstrate best practices in parking design for on-street, surface, and structured parking facilities. It will take a balanced approach to parking, providing enough to meet the needs of users, while not discouraging transit use, cycling, and walking. This can be accomplished by applying design principles that recognize the needs of drivers and non-drivers alike.

- On-street parking will be incorporated to animate the street, calm traffic, and buffer pedestrians from vehicles.
- The district will have on-street parking in bump-outs to support adjacent land uses, while having regard for pedestrian safety.
- The design should consider landscaping and snow loading.

Parking structures are the preferred type of parking in the district, as they can accommodate a high volume of vehicles without making use of a substantial amount of land.

- Parking structures should be located

underground.

- Above-ground parking structures should complement surrounding development, add visual interest to the area, and feature high-quality design.
- Above-ground parking structures with frontage along public streets or open spaces should feature active, at-grade uses to promote safety and increase attractiveness.
- Vehicle access to parking structures should be provided via secondary streets or interior blocks.
- Pedestrian access to parking structures should be in highly visible locations.
- Architectural elements and landscaping should be used to screen parking structures at ground level.
- Parking structures should accommodate accessible spaces, electric cars, bicycles, and e-bikes, preferably on the ground floor of above-ground structures.
- Parking structures should incorporate flexible design features that support

transitions to other uses over time.

- All parking will comply with the Town's North Oakville Urban Design and Open Space Guidelines and its Livable Oakville Design Manual.

Surface parking is not recommended as a long-term land use in the Hospital District, except for short-term visitor or commercial parking spaces near building entrances.

- Surface parking will be flexible and accommodate a range of uses during off-peak times, such as events and programming.
- Surface parking should prioritize parking for accessible vehicles, bicycles, energy-efficient vehicles, and car-share services.
- Landscaping and design should be used to divide large surface parking lots into smaller areas of no more than 100-125 parking stalls.
- Landscaping should incorporate trees and shrubs that reinforce circulation routes, provide shade, screen parking from the public realm, and reduce the heat island

effect.

- Permeable paving should be considered to promote drainage.

Sustainable parking considerations should be incorporated into all forms of parking.

- Priority parking spaces should be provided for community car-share services.
- All new development should include priority parking spaces and electrical supply stations for electric vehicles.
- Parking lots and structures should be designed to be converted to other uses over time.

5.3 DEMONSTRATION PLAN

Two-dimensional and three-dimensional demonstration plans (Figures 17 and 18) were developed to help visualize the ASP policy directions.

The plan establishes a permeable road network facilitating improved circulation of pedestrians, cyclists and vehicles. New buildings frame streets and open spaces through a series of interfaces (e.g., primary, secondary and flexible streets, urban squares and green connections) to create a human-scaled environment. And prominent east-west green connections across the northern precincts provide active transportation linkages to surrounding parks and open spaces.

The Demonstration Plan is one example of how the Hospital District could be built out based on the Preferred Planning and Development Framework. It reflects a density of approximately 150 people and jobs per hectare. Note that this Demonstration Plan is for illustrative purposes only.

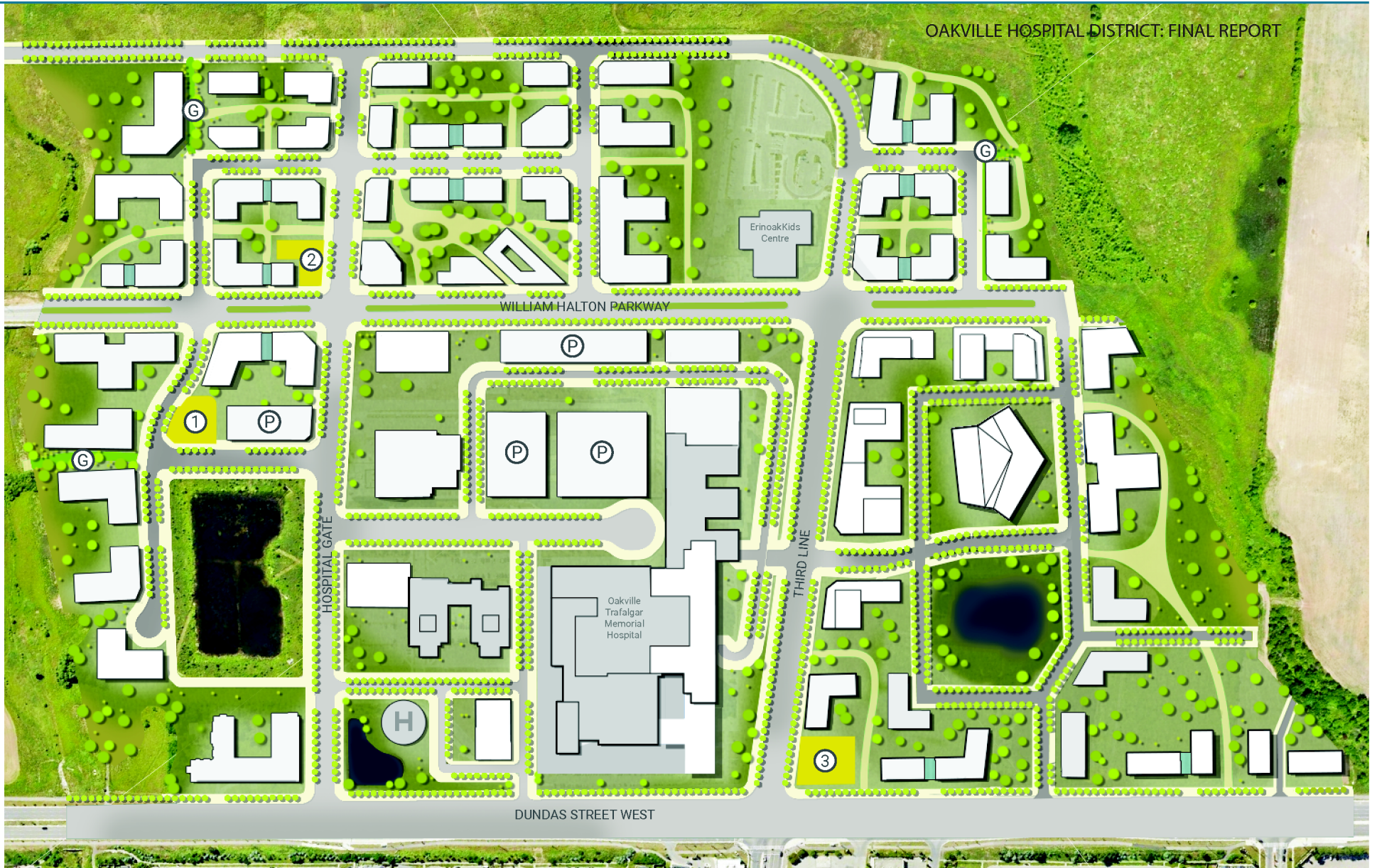


Figure 17 | 2D Demonstration Plan (for illustrative purposes only)

- Midblock and Bridge Connection
- 1 Urban Plaza
- 2 Gateway Parkette
- 3 Urban Plaza
- G Green Connection
- P Parking Garage





Figure 18 | 3D Demonstration Plan (for illustrative purposes only)



Figure 19 | Office Focused Precinct



Figure 20 | Transitional Precinct



Figure 21 | Complementary Precinct



Figure 22 | Innovation Precinct



Figure 23 | Institutional Precinct

5.4 POPULATION AND EMPLOYMENT DENSITIES

Population and employment densities were developed to inform the Preferred Planning and Development Framework, including appropriate built form, building types, and unit types that would support the Hospital District over a twenty-year time horizon.

Recommended population and employment densities are based on market conditions (Appendix E) for similar hospital districts both internationally and within the Greater Toronto and Hamilton Area (GTHA), as well as projected jobs within the GTHA, Halton Region and the Town of Oakville. This review included an analysis of allocations for population and employment within the Town to identify reasonable job estimates for the Hospital District.

Based on these analyses, the Hospital District is expected to accommodate a total of approximately 17,500 jobs and residents - 10,600 employees and 6,800 residents - when fully built (Appendix J).

Projected densities for the Hospital District are based on employment and residential gross floor areas, in addition to floor space per worker and people per unit (PPU) ratios. While

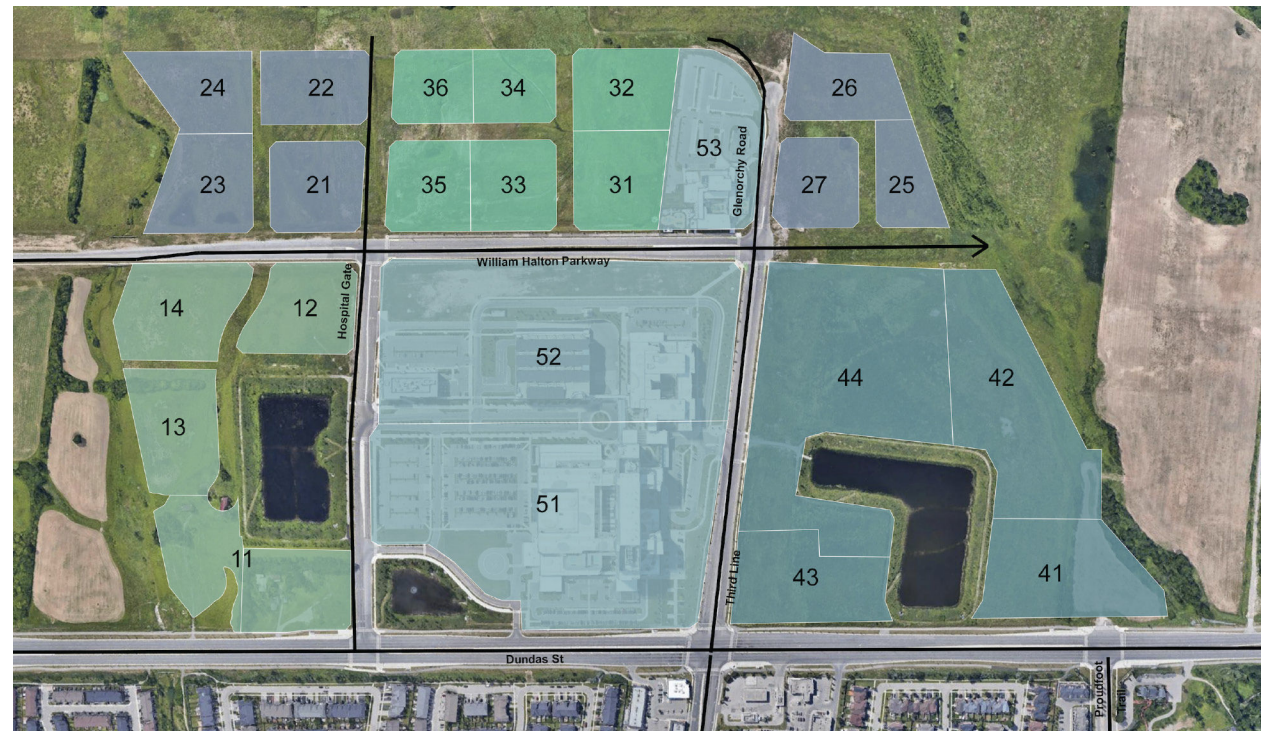
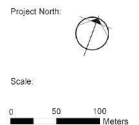


Figure 24 | Development Blocks

Legend:

- 1 - Office-Focused Precinct
- 2 - Transitional Precinct
- 3 - Complementary Precinct
- 4 - Innovation Precinct
- 5 - Institutional Precinct



the district may not develop to the proposed full build out, population and employment densities reflect achievable expectations.

The projected population and employment densities are based on the following assumptions and methodologies:

BLOCK IDS AND AREAS

- Blocks were divided for the purpose of calculating density by removing major arterials and stormwater management ponds from block areas (Figure 18).

BUILDING TYPE

- Mid-rise and high-rise values were attributed to each block, corresponding to proposed land use designations and building heights.

Floor Space Index

- Floor Space Indices (FSIs) are based on the proposed land uses and heights within each block. The FSIs in the district range between 1.8 and 3.0 (Figure 19).
- The following identifies the building

heights for each FSI value:

- 1.8: 6 to 12 storeys (mid-rise);
- 2.0: 6 to 12 storeys (mid-rise);
- 2.5: 6 to 12 storeys (mid-rise); and
- 3.0: 13 to 15 storeys (tall).

Gross Floor Area

- The estimated Gross Floor Area (GFA) of each block was calculated by multiplying the developable block area (in square metres) by the FSI.

Net Floor Area

- The Net Floor Area considers the floor plate efficiency (net to gross floor area efficiency):
 - 90% of GFA for Urban Core; and
 - 70% of GFA for Institutional uses, reflecting a much more significant component of hallway and shared spaces commonly found in institutional facilities.

Block	FSI
Block 11 (Urban Core)	1.8
Block 12 (Urban Core)	2.5
Block 13 (Urban Core)	1.8
Block 14 (Urban Core)	2.5
Block 15 (Urban Core)	2.5
Blocks 21-27 (Urban Core)	2.5
Blocks 31-36 (Urban Core)	2.0
Block 41 (Urban Core)	2.0
Block 42 (Urban Core)	2.5
Block 43 (Urban Core)	2.0
Block 44 (Urban Core)	3.0
Block 51 (Institutional)	2.5

Figure 25 | FSI By Block

UNIT ASSUMPTIONS

The following assumptions are based on Halton Region's 2017 Development Charges Study and market trends in Oakville:

Residential

- GFA for less than 2 bedrooms: 67%;
- GFA for 2 bedrooms or more: 33%;
- Average unit size for 1 bedroom + den: 65.7 m²;
- Average unit size for 2 bedroom or more: 101.7 m²;
- PPU in apartment units less than 2 bedrooms: 1.333 PPU (Greenfield); and
- PPU in apartment units equal to 2 bedrooms or more: 1.730 PPU (Greenfield).

Employment

- Retail employment is based on 45.7 m² required per employee.
- Institutional employment is based on 56.6 m² required per employee.

- Office employment is based on 70.6 m² required per employee (categorized as "Non Retail" in Appendix J).

5.5 FINANCIAL ANALYSIS

A financial analysis was conducted to assess the merits of the proposed land use scenario for the Hospital District from a fiscal impact perspective (Appendix F). The analysis determined that the development of the district at full build-out has the potential to generate a positive fiscal impact for the Town of Oakville and Halton Region. It is important to note that the proposed land use scenario is likely to take many years to develop, and that revenues accrued from the district will accrue over the long-term. Key findings and conclusions from the analysis include:

- The proposed additional uses in the district will generate approximately \$120 million (in 2020 dollars) in revenue for the Town at full build-out, based on current development charge rates. It is estimated that approximately 90% of development charge revenue collected from the build-out of the district could go toward funding capital infrastructure like roads, parks and recreation services.
- Development charge revenue collected by Halton Region could amount to nearly \$108 million (in 2020 dollars) based on current rates. Over 90% of revenue

collected from the build-out of the district could be allocated toward funding hard services like regional roads, water and wastewater infrastructure. The revenue could contribute to offsetting both on-site and off-site development charge-eligible capital infrastructure projects.

- At full build-out, the district is expected to generate a net operating surplus for both the Town of Oakville and Halton Region. While development is ongoing, there is likely to be a net operating deficit for each precinct. This is an expected cost of development, as the future population that will provide the tax base to support the expenditures for road, storm sewer, and water and wastewater infrastructure will only grow over time.

Refer to Appendix F for further detail.

6.0

IMPLEMENTATION

INTRODUCTION

This ASP articulates a vision for the future of the Hospital District over a twenty-year time frame and beyond.

This section makes recommendations for the process by which the ideas in this plan will become a reality. The following subsections discuss the planning tools and the importance of partnerships in enabling the Town of Oakville and its partners to implement this plan.

6.1 PLANNING TOOLS FOR IMPLEMENTATION

The recommendations in this ASP can be implemented using a range of planning tools, including an official plan amendment, and consideration in upcoming parks and parking studies being led by the Town of Oakville. On-going coordination with Halton Region is also key to the successful implementation of this plan.

6.1.1 OFFICIAL PLAN AMENDMENT

An official plan amendment for the Hospital District would support the implementation of recommended policy directions and other components of this plan.

It should include, at minimum:

- The purpose, guiding principles, and objectives for the district, as identified in this plan;
- A land use schedule identifying the potential locations for new streets and blocks, publicly accessible open spaces, and built form edges, with maps and figures that depict maximum heights, densities and precincts;
- A requirement to prepare a conceptual

block master plan prior to the redevelopment of larger parcels. Such plans should show the location of new streets, urban squares in the form of POPS and other publicly accessible open spaces, the proposed built form, and land use relationships;

- A policy which directs that all development shall be designed in accordance with the design direction provided by the Livable by Design Manual;
- A transportation strategy that presents key recommendations for improving connectivity, identifying new streets and intersections, mid-block pedestrian paths, green connections, cycling network improvements, and opportunities for transit integration;
- Specific policies to guide development of each precinct, including their intended character and role, public realm improvements, built-form objectives, desired land uses and building types, development intensity, and appropriate locations for parking; and
- Tools to facilitate improvements to

the public realm, including publicly accessible open spaces, capital funding for community services and facilities, a parkland acquisition strategy, a sustainability strategy, and public realm improvements through site plan control agreements.

6.1.2 PARKS STRATEGY

Where the Town accepts cash-in-lieu of parkland, it should dedicate the funding to the development of a public space program for the district. The Town should prioritize developments that contribute to the enhancement of the public realm, including active transportation infrastructure. The Town should also conduct a complete parkland dedication analysis to determine an appropriate approach.

6.1.3 PARKING STRATEGY

As part of the Town's parking strategy, the Hospital District requires a robust approach to parking management that prioritizes safety, efficiency, and flexibility, such as by introducing shared parking agreements, flexible parking structures, and clear signage.

6.1.4 COORDINATION WITH HALTON REGION

The Town should continue to work in collaboration with Halton Region, particularly with respect to monitoring employment and residential growth and associated infrastructure requirements including the provision of rapid transit and active transportation infrastructure on regional roads.

6.2 PARTNERSHIPS

Throughout implementation, close consideration should be given to the priorities of the partners involved in developing the district, and the changing environment in which this plan will be implemented. These include:

1. Halton Healthcare
 - Innovation in the Delivery of Compassionate, Quality Care.
2. Long-Term Planning in a Moment of Rapid Change
 - The creation of Ontario Health Teams has changed the hospital's reach and focus; and
 - The COVID-19 public health emergency has accelerated change in health care delivery.
3. Observations on Implementation
 - There is an opportunity to "get it right" with a flexible, long-term approach; and

- Qualifying and optimizing opportunities must be informed by strategic insights from the hospital, its partners and the market.
4. A Three-Phase Approach
- The Town's Economic Development Department can lead engagement with Oakville Trafalgar Memorial Campus of Halton Healthcare, the Province of Ontario and Private Landowners to create a Memorandum of Understanding (MOU) on goals for the district;
 - Undertake stakeholder and market soundings; and
 - Each landowner should consider qualifying partners early by issuing a Request for Expressions of Interest (EOI).

6.2.1 HALTON HEALTHCARE: INNOVATION IN THE DELIVERY OF COMPASSIONATE, QUALITY CARE

At the core of the Hospital District is Halton Healthcare's Oakville Trafalgar Memorial Hospital campus. The driving force behind Halton Healthcare's 2020 Strategic Plan includes a mission, vision and commitment to innovation:

- **Mission:** For the communities we serve, Halton Healthcare provides compassionate, quality, community hospital care as part of an integrated system.
- **Vision:** Transforming the community hospital experience, guided by the principle of exemplary patient experiences, always.
- A commitment to innovation in service delivery and partnerships.

6.2.2 LONG TERM PLANNING DURING TIMES OF RAPID CHANGE

While change in health care delivery is constant, two extraordinary changes have intensified the pace of change over the course of this study: the advent of Ontario Health Teams, and the COVID-19 public health emergency.

A. The creation of Ontario Health Teams has changed the Hospital's reach and focus.

In February 2019, Ontario's People's Health Care Act introduced the concept of Ontario Health Teams (OHT). In response, Oakville Trafalgar Memorial Hospital applied for recognition as an OHT in a formal partnership with Halton Region, Acclaim Health, Mississauga Halton Local Health Integration Network, and primary care delivery partners under the banner of Connected Care Halton (CCH-OHT).

In December 2019, Ontario's Ministry of Health and Long-Term Care designated CCH-OHT as one of the first to serve a population of 350,000 people, with a special focus on:

- Enhanced clinical coordination of various processes and pathways across the continuum of care.
- Enhanced access to:
 - Home and community care,
 - Palliative care, and
 - Mental health and addiction services.
- Improved efficiency and reduced duplication.
- Enhanced partnerships and collaboration with primary care services.
- Enhanced staff and physician engagement and satisfaction through increased communication and education.
- Enhanced Patient and Family Advisory Council engagement and participation.
- Implementation of a system-wide scorecard to track key performance indicators that reflect the Quadruple Aim (Better Patient Experience, Improved Population Health, Reduced Costs, and Improved Care Team Well-Being).

In addition to triggering a significant evolution in administrative and funding models, Halton Health acquired four new formal partners, as well as 63 physicians and 56 health service providers and health service organizations (at the time this plan was drafted). These acquisitions underscore Halton Health's significant evolution in its network of partners and its service delivery model.

B. The COVID-19 public health emergency has accelerated change in health care delivery.

It is difficult to overstate the disruption caused by COVID-19 in health care delivery. Yet, as is often the case, adversity has created an acceleration in the development of new and improved approaches to service delivery.

While this plan is not intended to provide a detailed analysis of the varied effects of the current emergency on health care delivery, several considerations included:

- The importance of facilitating care in non-hospital settings, and better integrating with care delivery in other appropriate settings (i.e., the “right level of care at the

right time in the right setting”).

- A massive acceleration in the practice of digital remote health care consultation and service delivery.
- A heightened awareness of the importance of integrating public health services with other aspects of health care delivery.
- A rethinking of standards in all aspects of long-term care delivery, as well as an acceleration of provincial funding programs to invest in new and improved capacity.
- A significant disruption to public finance, expected to result in extraordinary fiscal constraints in future.

6.2.3 OBSERVATIONS ON IMPLEMENTATION

A. A flexible, long-term approach and an opportunity to "get it right".

The lessons of the COVID-19 public health emergency underscore the need for a flexible, long-term approach to realizing the Hospital District's objectives. Change and innovation will remain constants, and development will evolve in tandem with changes in health care delivery.

The Town and the hospital should not be in a hurry to develop the Hospital District. This Area Specific Plan sets out the physical dimensions of growth over a 20-year time frame, and beyond. In the immediate- and short-terms, it is easy to think of the district as a large site. In considering the long-term context, the possibility of competing uses is likely to make choices for decision-makers of what not to do as important as what to do.

It is common for hospitals to be surrounded by inflexible developments and to run out of space to grow. Oakville's Hospital District has a unique opportunity to address measured

growth to appropriately respond to future needs and enable sustainable growth.

B. Qualifying and optimizing opportunities must be informed by strategic insights from the hospital, its partners and the market.

From an optimistic, "blue sky" perspective, it is possible to imagine the introduction of innovative uses in the district that capture foreseeable emerging needs in research, training, and/or delivery. These could include:

- A center of digital remote health care delivery.
- A college of public health (for training, standards, and licensing).
- Centers for Excellence in education, training, and standards for:
 - Long-term care;
 - Palliative care; and
 - Mental health for professionals and policing units.

While any one of the above ideas represent

exciting possibilities, they require the appropriate policy support, capacity, partnerships, and funding arrangements to bring them to fruition. This will require coordination of stakeholder relations and market soundings, and other best practices in procedural design.

A market sounding is a disciplined process to canvass actual interest in a project or site. To optimize the development of the district, it is necessary to understand what is available and to establish a strategy for evaluating potential options against a scorecard that reflects the vision, principles and objectives for the Hospital District.

Best practices for market soundings include:

- Face-to-face meetings in person are ideal for eliciting advice and insights that would not otherwise be gathered in writing.
- Clarity is needed on the scope of work, such as which assets are under consideration, and which are not.

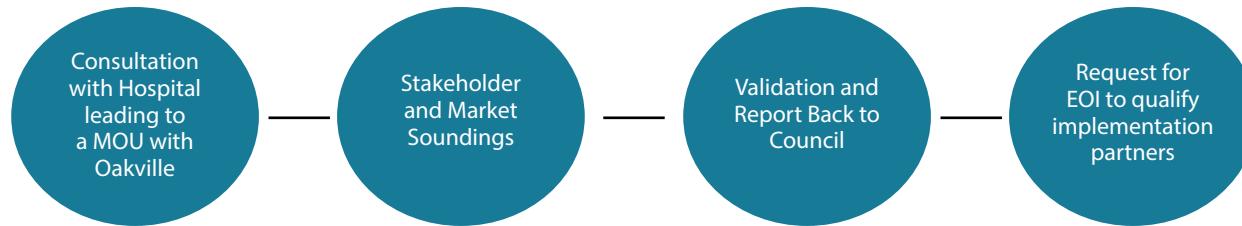


Figure 26 | Four-Phase Implementation Approach

- Stakeholders must be realistic about the market attractiveness of various municipal assets and understand which uses will and will not be acceptable.
- Strengthening interest by providing financial clarity with content that will elicit reactions and feedback, such as a structure, terms sheet, draft sets of parameters and figures, and land use information, such as status of ownership, required approvals, and more.
- It is important to speak to the appropriate individuals in the market and to engage both local and national participants.
- Maintaining an open dialogue with the development community is critical for managing expectations and refining approaches. This will help to ensure high-quality bids and robust pricing.

6.2.4 A THREE-PHASE APPROACH

This Area Specific Plan (ASP) recommends a four-phase approach to implementation (Figure 20). The Town of Oakville Economic Development Department can bring together stakeholders to help facilitate the vision for the district, including staff of key departments: Building, Planning and Development and Economic Development.

A. Engage Oakville Trafalgar Memorial Hospital, Halton Healthcare, Province of Ontario and other major property owners and partners to create a shared understanding of goals for the district.

Oakville Trafalgar Memorial Hospital, Halton Healthcare and its CCH-OHT partners must be consulted. The consultation should be informed by the goals for the Hospital District and seek input on specific uses that would reflect and help advance the next generation of strategic goals for the hospital.

The process should consider the various proposed uses identified in this ASP and tailor them based on stakeholder priorities to guide the district's realization. The shared goals could be formalized in a Memorandum of Understanding (MOU) that would inform the work of developing the district and the Town's Economic Development strategy in seeking partners to develop and occupy the district.

B. Stakeholder and Market Soundings.

Several additional organizations and entities should be canvassed for their interest in the development of the Hospital District. These include partners in health care, education and other organizations:

- Health care delivery partners: The district could potentially accommodate existing partners of the hospital that could benefit from co-location. This includes a large group of entities that should be canvassed.
- Educational partners: The district can

include uses dedicated to research and training facilities and activities, all of which would require the active participation of a willing institutional partner with a strong health programs, such as universities (like McMaster University and the University of Toronto Mississauga), and colleges (like Sheridan College and Mohawk College).

- Other private and not-for-profit organizations: In addition to healthcare and education partners, the district will require financial and development partners (for commercial and residential uses).

Recommendations for proposed market sounding processes and phases, as well as best practices, are included below.

Phase 1: Preparation

- Convene a project workshop with senior municipal and regional staff to confirm goals and explore opportunities and issues;
- Select consultation/market sounding participants and schedule meetings. We would recommend a first group of twelve

participants; and

- Develop a document to describe the opportunity to participants. It is important to provide clear, detailed, upfront information to participants to allow for meaningful dialogue.

Phase 2: Consultation and Market Sounding

- Conduct one-on-one sessions with participants to identify:
 - Levels of interest;
 - Preconditions of interest such as availability of land, rates of return, and proximity to partners and amenities;
 - Resources, processes and governance structures required for the project;
 - Phasing concerns and/or public sector contributions such as site servicing/infrastructure; and
 - “Deal-breakers” (if any).

Phase 3: Report Back

- Summarize and share key takeaways;

- Develop a list of key market sounding factors, assessment criteria and/or goals and objectives of this exercise; and
- Recommend next steps, which may include a structured procurement process that includes the resources, skill sets, and timelines required for the development and execution of a viable public-private partnership business case.

C. Pre-qualify implementation partners.

The next step would be to initiate a public process to pre-qualify implementation partners, such as by issuing an Expression of Interest (EOI).

2020

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