

From: ottawadisabilitycoalition@gmail.com

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To: sean.moore@ottawa.ca

Cc: Jim.Watson@ottawa.ca; Jeff.Leiper@ottawa.ca; riley.brockington@ottawa.ca;

Catherine.Mckenney@ottawa.ca; capitalward@ottawa.ca; rideaurockcliffeward@ottawa.ca;

tobi.nussbaum@ncc-ccn.ca; Catherine.McKenna@parl.gc.ca; Kathryn Hendrick <khendrick@gbagroup.ca>

'Forgie, Charmaine' <Charmaine.Forgie@ottawa.ca>

Subject: Accessibility Report: New Campus Design: File No. D07-12-21-0059 and D07-07-21-0007

Hello Sean

Please find my report and recommendations dealing with the planning project mentioned above. As you know, I have been working in collaboration with the former members of the Campus Engagement Group (CEG) of TOH as well as the Graham Bird Associate (GBA) project manager to help make the new hospital campus fully accessible, safe, healthy and nurturing. Although that work is not complete, I felt that I could not wait any longer for information I had requested from GBA and other updates before submitting this report to you.

Assessment and recommendations

Given the current structural design of the Hospital on the site, I do not believe the plan meets the accessibility requirements under the AODA. Although the project team is looking into operational fixes to the accessibility issues, the design should not be approved and no physical work on the project should be allowed until it can be determined that all AODA requirements will be met at the time of opening of the hospital.

Summary of issues

The Site Plan has two very major barriers which impact on persons with disabilities and seniors:

1. Distance of travel from the street, public transit and the parkade. For public transit, there is no bus service onsite, the LRT service is a long distance away and even if it is moved south of Carling and integrated, it is still a long distance to get to the main entrance. It is currently unclear how and when the LRT Station will be integrated with the Hospital. Currently the station is on the North side of Carling Avenue and all people would need to cross at grade level to the south side over a long and busy roadway. This also applies to bus riders.
2. Unsafe or circuitous paths of travel: Some of this is related to the above, but the crossing of Carling Avenue to access the bus, the intermixing of pedestrians and vehicles leading to the main hospital entrance, and the curved walkways also contribute. These issues were spelled out clearly in the Transportation Impact Assessment (TIA): The statement "Opportunity limited due to site constraints" was used to describe the issues.

TDM-supportive design & infrastructure measures: Non-residential developments

1. WALKING & CYCLING: ROUTES

1.1 Building location & access points

1.1.1 Locate building close to the street, and do not locate parking areas between the street and building entrances

BASIC

1.1.2 Locate building entrances in order to minimize walking distances to sidewalks and transit stops/stations

BASIC

1.1.3 Locate building doors and windows to ensure visibility of pedestrians from the building, for their security and comfort

Although there are other accessibility, equity, diversity and inclusion issues, these two issues alone call for a major rethink and design for the site.

Further Background

The site itself, although in a beautiful location, comes with a lot of constraints. Many of these are due to the shape and physical nature of the property and infrastructure. There are also many "stakeholder" constraints.

The Ottawa Hospital (TOH) has created a world class "functional" design for the hospital which focuses on patient care. This includes getting "emergency" patients into the facility.

TOH has also included the University of Ottawa Heart Institute and a major research facility.

Given the number of people expected to work on or use the site, the parking facilities will need to be large.

The current design is an attempt to fit too large of a package (hospital, other facilities and parking) on a site given the existing constraints. In doing so, it has failed to meet the needs of many of the staff, patients, families and visitors who will be accessing and using the hospital and site.

In particular, seniors and persons with disabilities will have major accessibility issues.

The logic behind having "accessible parking spots" close to destinations---generally 10 to 20 metres around pharmacies---is to make them accessible! Having the main entrance to the hospital 150 to 250 (although I have asked for accurate measures from the project team, they have not been supplied to me) metres from public transit is not acceptable.

The distances from the "accessible parking spots" in the parkade are unknown at this time. However, the only viable way to make them accessible is having the parkade underneath the hospital, with the accessible parking spots close to the elevators going to the main lobby. Having the parkade any distance away from the hospital means that accessibility requirements cannot be met.

Feel free to contact me for any clarifications

Jerry Fiori

Chair, Ottawa Disability Coalition

Resident of Knoxdale-Merivale Ward (Merivale Gardens), Senior, Person with a Disability

<https://www.ottawadisability.com/>

To build a fully inclusive community in which all persons with disabilities have equitable access to the same opportunities and activities as other citizens of the City of Ottawa and surrounding areas.

We value equity, diversity, and inclusion. A world without discrimination would be better for all people regardless of their abilities. It is widely known that discrimination, in various forms (e.g., racism, ableism, ageism, sexism), exists within systems and society in general. We would look forward to working with others to combat racism and discrimination in its many forms.