

**A TALE OF TWO ONTARIO CITIES:
HOW OTTAWA AND WINDSOR CHOSE A SITE FOR THEIR
NEW HOSPITAL**

Are Ottawa-area taxpayers aware that Windsor, Ontario, like Ottawa, is planning a new hospital and, like Ottawa, they are in Stage 2 of the 5-Stage Planning Process?

Surprisingly, there are stark differences in the approach each city adopted to choose a new site and Ottawa residents should question and demand answers as to why they were not accorded the same respect and involvement as their Windsor counterparts.

SITE SELECTION COMMITTEE

To start with, Windsor set up a site selection sub-committee made up of eleven members. Six of the eleven were chosen from past and present members of the hospital Board. Four positions were left open for the community and the hospital called for applications. Seventy-five applications were received from the public and were of such high quality that five, not four, community members were selected for the site sub-committee. One member was selected from the area's youth as it was understood that youth would be using the hospital for the longest period of time. All were asked to sign an agreement that they were not in a conflict of interest.

In Ottawa, spending money to buy the land was not in the equation because the hospital was to be "given" land by the federal government. The NCC received a mandate to review eligible federal lands and come up with a recommendation and justification for the best site suited for a new hospital. It seems that the NCC committee that reviewed the available sites consisted of six people: three NCC Board members and three from the NCC's Advisory Committee of Planning, Design and Realty. There seems to have been no direct community representation, no youth contingent. Understandable, one might claim, given that the NCC represented the owner of all the sites but imagine the goodwill that would have been created if the NCC had opened two spots for community representatives.

COMMUNITY INVOLVEMENT

In Windsor, Stantec was hired to help establish the criteria used to rank the sites that were available. They also hired a “fairness” advisor, representing the eyes and ears of the public. As well, Windsor held over 70 town halls and discussion events giving the community opportunities to ask questions, give feedback and provide input for the criteria. The groups they reached out to included: various ethnic communities including Italian, Muslim, Indian and Chinese associations, French speaking groups, The Rotary, Kiwanis and Probus Clubs, CARP, seniors, retirees, women’s groups, students etc. Radio and television call- in shows were also used to communicate and engage with the community. The site selection took over a year.

In Ottawa, the NCC reached out to major stakeholders. They held an open house at the War Museum on September 22, 2016 where they made a presentation and entertained questions from 500 members of the public. They hired Environics to help with public engagement via an online survey and during a 15-day period about 7700 surveys were completed. The survey period closed October 6,2016 and the NCC Board was advised that Tunney’s Pasture was the chosen location on November 23,2016. The site selection took about 5 months.

SITE SELECTION

In choosing their site, Windsor applied 32 detailed criteria based on Ministry of Health requirements, expert advice and community feedback. The NCC developed 21 less - detailed criteria and received input from the open house and completed surveys.

Windsor Hospital had emphasized that the hospital is the steward of public money and were conscious of the costs: a) to acquire a site b) to bring the site up to the standards required and c) to add needed infrastructure. For example, Criteria 24 called for the site to be relatively flat without too many grade changes in order to reduce the amount of cut and fill during construction. Windsor’s chosen site is flat. (In Ottawa, the Dow’s Lake site is far from flat

and there is a difference of 20 metres from high point to low point.)

Some of the criteria used to evaluate the Windsor sites included:

1. The site must have more than one main entrance in case a secondary access route is required. (In Ottawa, planning officials have stated there is no intention to widen Prince of Wales, but much more importance should be given to that entrance than the hospital allots. It will certainly be just a matter of time before Prince of Wales is widened and the Dominion Arboretum and the Ornamental Gardens are encroached upon.)

2. The site should have no heritage or environmental features unless the site exceeds the minimum size requirement. (The Dow's Lake site has heritage value, is very close to a UNESCO site, and is in an environmentally sensitive area.)

3. Two feeds for electrical and water services should be available to the site.

4. The site must be free from adjacent tall buildings greater than 30 metres in height within $\frac{1}{2}$ km. Windsor, like Ottawa, is locating a helipad on the hospital rooftop. (In Ottawa, the Claridge Icon is 143 metres, Soho Italia will be 96 metres and Richcraft will have 3 towers measuring 178 metres, 140 metres and 60 metres. All of these are thought to be within $\frac{1}{2}$ km of the new hospital.)

5. The site must have the ability to provide for storm water retention on site or in a nearby storm pond or in municipal storm water-pipes. (Fish in Dow's Lake could be affected if the winter run off of salt enters Dow's Lake.)

6. The site should not impinge on native wooded areas. (Hundreds of trees to be cut down in Ottawa)

7. The user access should be free of downward draft from adjacent buildings or structures. Avoidance of north entrances

which offer little winter sunlight and exposure to cold northern winds. (In Ottawa, the main entrance will be north-facing and who knows what wind effect the very high towers at Preston and Carling will have.)

The NCC recommended Tunney's because it received the highest rating compared to the other potential sites. Despite reports stating that hospital CEO Dr. Jack Kitts had said he was surprised but not disappointed at the choice of Tunney's and that the Ottawa Paramedic Service had said they didn't anticipate major problems for emergency vehicles needing access to Tunney's, the hospital Board rejected Tunney's outright.

POLITICAL INFLUENCE

After decrying the backdoor, closed-room politics of Conservative John Baird when he offered a parcel of the Farm to the hospital, and espousing full transparency after their election win, the Liberals resorted to back-room politics again when local politicians and hospital officials got together and declared the Sir John Carling site in the Dow's Lake area the new location for the hospital. No community consultations were involved. Were the costs dealing with the earthquake fault, the LRT trench, the Mooney's Bay Sanitary Sewer, the irregular shaped lot and the topography ever considered? Were the costs relating to infrastructure additions and improvements ever considered? The answer is no, because even now, in 2021, we do not know these costs.

In 2016, five years ago, Windsor's city council agreed to a 1% levy on taxpayers for 14 years to help pay for the community's \$108 million share of the costs. Ottawa has yet to announce how it will raise its \$700 million share of costs, excluding additional infrastructure costs.

CONCLUSION

Windsor's public engagement and transparency have been viewed as exemplary. Ottawa has unique circumstances as the Nation's Capital with its strong federal presence, but Ottawa

taxpayers certainly deserved more public engagement opportunities than they received, and transparency remains elusive. City planners cancel community meetings with no explanation and no make-up date is proposed; community concerns go unacknowledged and unaddressed; cost issues are dismissed and the tax-paying public is left in the dark.

This capital-intensive project will impact the city and its residents for more than half a century. It is imperative that this project is done right. There have been too many cases of projects not going right in Ottawa: the LRT, Lansdowne, LeBreton Flats, Strandherd Bridge, the Chateau Laurier, the airport pedestrian bridge. The hospital Board and municipal, provincial and federal politicians need to understand that ignoring calls for fairness, transparency, accountability and cost management will lead to a weak foundation on which to build the hospital. Railroading the public is certainly not the Canadian way, especially in the Nation's Capital!

Given the information released about the hospital's plans over the last three months, we are compelled to ask, "Is this the right location for a new hospital?"

We are convinced better options exist.

We encourage all voters in the National Capital Region to question all of their riding's candidates regarding their opinion of the site selection process for the hospital and the decision to reject Tunney's Pasture. Ask their opinion of the decision to locate the new hospital in the Dow's Lake area and ask if their opinions reflect those of their constituents.

OUR HEALTH/OUR FUTURE- A Coalition of Community Groups for a New Hospital

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