

The Ottawa Hospital New Campus Engagement Group

Meeting notes: June 11, 2019

Tuesday, June 11, 2019, 7 to 9 pm

Skills and Simulation Centre, The Ottawa Hospital Civic Campus

Attendees:

Bernie Etzinger, Paul Johanis, Robert Brinker, Michelle Currie, Peter Eady, Jerry Fiori, Luc Fournier, Shaun Hopkins, Amy Johnson, Leslie Maitland, Kimberly Peterson, Martin Petersons, Michael Powell, Bhagwant Sandhu, Sue Stefko, Randy Taylor; **Consultants:** Greg Jodouin; Don Lenihan **Secretariat:** Sarah Hartwick, Kate Eggins

Regrets: Charmaine Forgie, Eric Jones,

Guests: Joanne Read (TOH VP Planning and Support Services), Dr. Alan Forster (TOH VP, Population Health, Quality and Innovation), Tony Sottile (TOH Board of Governors, Chair of Master Planning Committee), Inge Roosendaal (Ottawa Public Health)

Record of discussion and decision:

#	Agenda item	Discussion/Decision	Actions
	Meeting opened		
1	General statements by co-chairs (Bernie Etzinger and Paul Johanis)	<ul style="list-style-type: none"> Welcome to the group, roundtable introduction to guests Guest from Ottawa Public Health. Inge Roosendaal authored the “Building Blocks for a Healthy Ottawa” discussion paper on the City’s Official Plan. TOH had a conference today with invest Ottawa – excited to partner with them. 	
2	Update on session with heritage experts (Leslie Maitland)	<ul style="list-style-type: none"> Had a meeting with heritage conservation and modernism experts to explore the ways in which the West Annex building, and the overall Sir John Carling building, might inform site design and building design going forward. This group was assembled ad hoc based on expertise and interest, not an established group. Opportunity to update a very informed group on our engagement process and to seek feedback. Discussion included ways in which design of the Sir John Carling building and the West Annex, and the associations with surrounding areas, can inform good design going forward. Focus on respecting the context of the site. The hospital should be a positive player in health outcomes going forward. This group is interested in being engaged in heritage discussions going forward. The discussion was in line with the CEG’s principles. 	Notes from meeting to be circulated (Sarah)
3	Update on discussion with city on partnership (Bernie)	<ul style="list-style-type: none"> Hospital Communications and Planning teams had discussion with city on how to work together going forward. Need to find a way to arrive at the outcomes that work and are achievable The idea of a Healthy Ottawa is something we’re all seeking. Looking for an opportunity to work with the city on a pathway to a healthy city. The City sees an opportunity to work together on this healthy Ottawa opportunity 	

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		<ul style="list-style-type: none"> • Proposal: That the city treat the planning aspects of the hospital under the ideas set forward in the new Official Plan, while continuing to manage the ongoing zoning process under previous regime. <p>Discussion:</p> <ul style="list-style-type: none"> • There is a need to pursue our goals early so that they can be considered early on, otherwise opportunities might not present themselves. • There is a sense that the renewal of the Official Plan might make some areas feel forced into higher density; having greenspace around the hospital seems in line with idea of a healthy city/healthy community. • Current test fit design puts most dense areas of site on Carling, with cut-throughs at ground level to allow easy access to greenspace. • Overall goal of creating a planning partnership would be to find solutions that work for the community, the City, and the hospital. 	
4	<p>Official Plan discussion paper: <i>Building Blocks for a Healthy Ottawa</i> (Inge Roosendaal)</p>	<ul style="list-style-type: none"> • Ottawa Public Health has been thinking for some time about how to promote a healthier city. • Five major areas of focus in paper: Neighbourhoods, complete streets, housing, food, greenspaces, sustainable building design. • A local example of sustainable design: Ikea is actually a cooling area in Ottawa because of its design. • The discussion paper unpacks these ideas on how a built environment can improve health, and seeks to get feedback on them. <p>Discussion:</p> <ul style="list-style-type: none"> • How much weight does Ottawa Public Health have on Official Plan development? >> OPH is embedded right on the Official Plan team. There isn't just one policy that will make a healthy community – there are many aspects and pieces that must happen in concert. • Does the City's climate emergency declaration change anything? >> We were already on this path. The discussion paper had these elements before the declaration, but now there is stronger interest on this subject. • There's a strong relationship between preventative care – addressing issues of inequity and poverty – and hospital care. To help people avoid coming to hospital at all, healthy community means addressing these issues. 	
5	<p>Discussion Papers for the Official Plan (Paul Johanis)</p>	<ul style="list-style-type: none"> • The Official Plan is looking for ways to stay in their communities. Seeking to create modules where people can live, work, and find entertainment. • While built form isn't its own discussion paper for the Official Plan, it does influence several of the papers. • Built form is important because it informs transportation and infrastructure. 	

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		<ul style="list-style-type: none"> • There is a strong alignment between the CEG and hospital interests, and on population health in the discussion papers. • Question to the group: How do we articulate and act on this population health aspect? Is maximizing population health the direction we want to support? • Example of response to Official Plan from Greenspace Alliance and other groups. Looks at the discussion papers and responds through the lens of climate emergency. Population health could be the lens the CEG can look through in responding. 	
6	<p>Three Themes for a Plenary Discussion:</p> <ul style="list-style-type: none"> • The “Healthy Ottawa” paper • Expanding the CEG’s narrative based on the paper • Assessing the idea of a “demonstration project” or “proof of concept” <p>(Greg and Don)</p>	<ul style="list-style-type: none"> • There’s an opportunity to find areas of alignment – connect the dots between various goals and principles that have been expressed by CEG, TOH, City. • The connection between population health and design might not be obvious. • Discussion papers really clarify that there is an opportunity for built environment – including new campus design – to be supportive of population health and a healthy community. • Need to look at how we react to Official Plan discussion papers on an immediate level. But then can look at how partnership progresses in the future. • If we want to bridge the gap between traditional views of hospital design and these new ideas, we need a way to get there. • What does it really mean to embed the hospital in the community? This is about the space around the site as well as the site itself. <p>Discussion</p> <ul style="list-style-type: none"> • Seems to represent the intersection between public health and urban planning. Will this have support from the province? • Hits the right concepts. We can use this as language in our own work. • Some concern that it leaves out rural Ottawa. We need to look at how we grow in these areas as well. • Idea of complete, compact and connected landscapes • Could look at continuing to develop our principles and narrative to make this stronger if needed. • Need to look at the idea of health care where people live rather than everyone coming into the hospital for everything. We need to look at system-wide thinking. • There are many aspects that are outside control of hospital. Education etc. Is this a concern? • Consideration in how the campus itself could contribute. Idea of grocery store onsite etc. >> While there are some restraints in the hospital’s lease, if it is allowable, might make sense. • The hospital has clout. Should the approach be stronger and push forward on these things with community support? • Comes back to this idea of livability. Practical outcome is to create a frame through which the city can allocate the 	

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		<p>resources to support the hospital. Ideally, a partnership gives the City an easy path to supporting the new campus and CEG's work.</p> <ul style="list-style-type: none"> • Work on hospital design is a microcosm of how the City's Official Plan could work. There's a value here for them too. • Demonstration projects are important to policy development because if they're done right, they're scalable to other work. 	
7	Update on transportation discussion	<ul style="list-style-type: none"> • Group brought forward document on transportation; this can be put forward to planning team as recommendation. September timeline would be good. Some work still to be done on this. • RFSQ to be posted on Merx; includes all zoning requirements. Will be evaluated through the summer. 	
8	Closing	<p>Next steps on Official Plan response:</p> <ul style="list-style-type: none"> • Greg and Don will work on updating narrative and planning partnership sub-narrative. • CEG to draft a document to express its support of the population health aspects of the Official Plan discussion papers and lay the groundwork for future partnership. • Volunteer to draft: Kim. • To be circulated to group for comment before June 30 deadline, group will approve by email. 	Circulate CEG Official Plan response to group for approval

Next meeting: July 31, 2019

Record taken by Sarah Hartwick, The Ottawa Hospital