

Report to Council



Date: January 28, 2019
File: 1200-70
To: City Manager
From: James Moore, Long Range Policy Planning Manager, Policy and Planning Department
Subject: Hospital Area Plan – Phase II – Transportation and Land Use

1.0 Recommendation

THAT Council receives, for information, the report from the Policy and Planning Department dated January 28, 2019, with respect to the Hospital Area Plan – Phase II;

AND THAT staff bring back for Council consideration at the appropriate time, amendments to the Official Community Plan, Zoning Bylaw 8000, and the Capital Plan (transportation) as outlined in the Hospital Area Plan – Phase II Transportation and Land Use report from the Policy and Planning Department, dated January 28, 2019.

2.0 Purpose

To inform Council on the Hospital Area Plan – Phase II, specifically as it relates to land use and transportation, with the goal of proactively guiding the future development of the area east of the Kelowna General Hospital.

3.0 Background

The overall aim of the Hospital Area Plan (see Map 1) is to support a vibrant Health District while balancing the needs of adjacent established neighbourhoods. As Kelowna General Hospital (KGH) continues to expand and the city's population grows, there is an increasing need for patient services, KGH infrastructure, and other hospital related uses. While the focus for these needs will remain primarily on the KGH campus, land designated as Health District is intended to accommodate development that supports the operations of the hospital and other related uses. In doing so, Health District lands will provide a moderating transition between the hospital and nearby residentially designated lands. The City of Kelowna and Interior Health (IH) worked together to prepare this plan, which assesses and provides recommendations for parking, land use, and transportation in the area east of KGH.

3.1 Phase I

In Phase I of the Hospital Area Plan, the transitional buffer issues between the KGH campus and the established residential neighbourhoods west of Pandosy Street were considered. Following resident and

stakeholder consultation, a new health services transitional area was proposed for properties immediately north and south of KGH and a new HD3 (Health Services Transitional) zone was created to match the land use regulations with the intent of the updated Future Land Use designation. The intent of creating this zone was to minimize additional impact on adjacent residential neighbourhoods and to direct other health services to the larger Health District east of Pandosy Street where appropriate land assemblies could be achieved. Council adopted the proposed bylaw amendments in September 2014.

3.2 Phase II

Through Phase II of the Hospital Area Plan, further examination of the Health District was conducted, with an emphasis on the area east of Pandosy Street. Additionally, longer-term KGH Master Plan activities were considered. The intent of Phase II was to focus on hospital-related activity and to explore methods to encourage sensitive transition from hospital related uses to surrounding land uses. Specifically, Phase II examined four elements: on-street parking, parking on the KGH campus (IH-led), land use, and transportation. As per the Study Area Boundary Map below, two study areas were used in this exercise: a larger area for the Hospital Area On-Street Parking Plan (yellow boundary) and a smaller area for the Hospital Area Land Use Plan and Hospital Area Neighbourhood Transportation Plan (red boundary).

Figure 1: Hospital Area Plan Phase II Process



Map 1: Study Area Boundary Map



3.2.1 Hospital Area On-Street Parking Plan

As the first stage of Phase II, on-street parking was evaluated through parking studies and consultation, which led to the development of the Hospital Area On-Street Parking Plan. Overall, the Hospital Area On-Street Parking Plan identified methods of managing short-term on-street parking that align with the City’s Parking Management Strategy Framework¹. The Hospital Area On-Street Parking Plan was adopted by Council in December 2016, and applicable parking infrastructure was put into place in 2017². Subsequently, staff report that there has been a significant reduction in parking issues in the area. Following the City’s on-street parking analysis, IH examined its own on-campus parking needs (See Section 6.1).

3.2.2 Hospital Area Land Use Plan

Following the on-street parking study and plan and IH’s on-campus parking assessment, Phase II continued by focusing on the longer-term land use requirements of the transitional area east of KGH. Specifically, this exercise assessed potential hospital related developments, including health services and associated uses, and considered the needs of both the Health District and the residential areas east of Pandosy Street.

Currently, the study area consists of 214 properties, and there are four existing Future Land Use Designations in the study area: Health District, Multiple Unit Residential (Low Density), Single/Two Unit Residential, and Educational/Major Institutional. In terms of zoning, the study area is primarily residential with some Health District zoning. The area’s existing Future Land Use Designations and zoning is outlined on the maps below (see Appendix B for more detail).

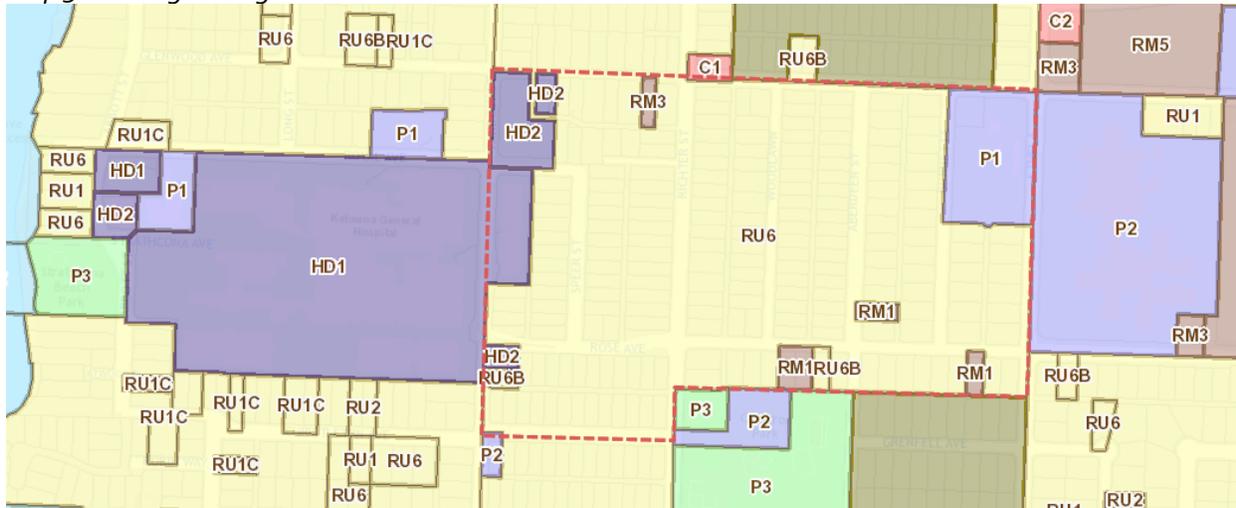
Map 2: Existing Future Land Use Designations



¹ City of Kelowna, May 13, 2013. Report to Council – Parking Management Strategy Framework.

² City of Kelowna, Dec. 5, 2016. Report to Council – Hospital Area On-Street Parking Plan.

Map 3: Existing Zoning



3.2.3 Hospital Area Neighbourhood Transportation Plan

Phase II continued by assessing the long-term transportation needs of the transitional area east of KGH to acknowledge land uses that would require improved transportation connectivity to the KGH campus. The Hospital Area Neighbourhood Transportation Plan was conducted in 2017 with the objective of establishing a baseline for the area’s current transportation infrastructure, the impact of growth on traffic volumes, and the impact of emergency vehicle use. To inform this plan, targeted public engagement was conducted (as outlined below). Additionally, pedestrian volume, cycling volume, and traffic volume counts were conducted between 2014 and 2016.

4.0 Engagement & Stakeholder Consultation

A number of engagement and consultation initiatives were undertaken to inform the land use components of the Hospital Area Plan – Phase II, as outlined in the following table. These engagement opportunities supplement the public information and engagement work done to address other components of this plan, particularly parking.

Initiative	Date	Level of Engagement
Initial Consultation Open House	May 2016	88 attendees, 26 exit surveys
Online Survey	May 2016	615 responses
Stakeholder Consultation (Medical Professionals, Institutions, Development Community, Residents’ Associations)	November – December 2016	Multiple small group meetings/calls
Follow-up Consultation Open House	November 2016	100 attendees, 29 exit surveys
Follow-up Consultation Open House	May 2018	65 attendees, 18 exit surveys

Through all of these key engagement opportunities, IH staff were present and participated alongside City staff and consulting support (Urban Systems Ltd.). This gave members of the public the ability to ask questions on a wide variety of topics related to the land use, parking, transportation and KGH activities. It was vital that IH staff be present at these engagement opportunities, given that it is the growth and expansion of the hospital that is driving the need for this planning work.

At the consultation meeting in May 2018, more than half of respondents indicated that they either somewhat or strongly supported the proposed land use changes. Outstanding areas of concern raised by some participants include parking, traffic, parkade development, loss of street trees, and continued hospital expansion.

Public Areas of Concern	Response
Negative impacts of parking & traffic from the hospital on surrounding residents	On-street parking will continue to be managed pro-actively by City of Kelowna Parking Services and adjusted as necessary on an ongoing basis.
More active transportation options are needed to reduce the need for vehicle use among staff and patients	Several active transportation improvements are identified for the area in the Pedestrian and Cycling Master Plan.
Hospital expansion and parkade development have negative impacts on surrounding areas	KGH is a regionally significant facility and its growth is managed by Interior Health. The City is encouraging hospital expansion on the existing campus. Medical-related uses that occur near the KGH campus will be designed to limit potential impacts on adjacent lands.
Loss of mature trees due to more intensive development	Each new development will require a Rezoning and Development Permit process at which time staff will work with applicants to protect mature trees where possible, and to add street trees through frontage improvements.

Best efforts have been made by staff to offer strategic planning solutions for the area that address hospital expansion and parking challenges in a way that supports KGH as a major medical facility while providing an effective transition to surrounding residential neighbourhoods.

5.0 Hospital Area Land Use Plan – Proposed Changes

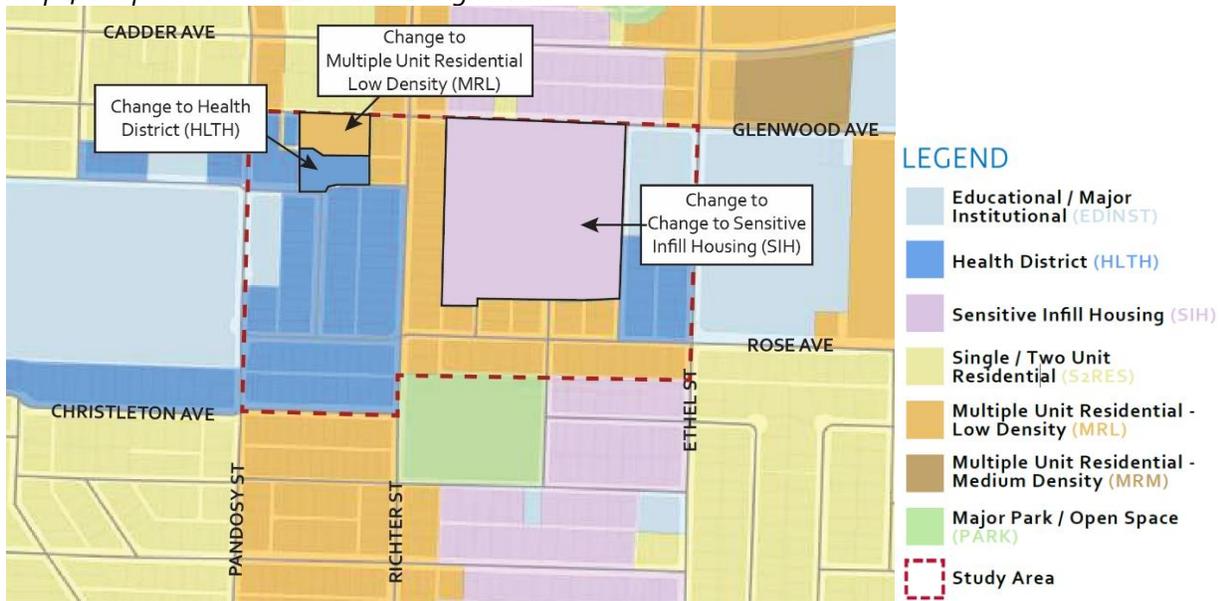
On the basis of this background work and public engagement, Section 5 outlines the proposed land use changes in the subject area, including changes to the Official Community Plan and zoning.

5.1 Proposed Future Land Use Designation Changes

The following Future Land Use Designation changes are being proposed as outlined in Map 4 below:

1. Re-designate five properties on Royal Avenue north of Speer Street from Single/Two Unit Residential to Health District. The Health District and associated uses provide opportunities for more appropriate transition from higher-intensity, hospital-related uses to adjacent residential.
2. Re-designate five properties on the south side of Glenwood Avenue from Single/Two Unit Residential to Multiple Unit Residential (Low Density). This change will allow those properties to be redeveloped over time to accommodate row housing, which area residents have identified as a more desirable transition between medical uses and single/two unit residential uses.
3. Re-designate 70 properties on Woodlawn Street, Aberdeen Street, and Burnett Street from Single/Two Unit Residential to Sensitive Infill Housing. This final change is to accommodate RU7 – Infill Housing zoning, discussed in greater detail in Section 5.3.

Map 4: Proposed Future Land Use Designations



Additional consideration was given to the long-term strategy of extending the Health District further east, connecting ultimately to Ethel Street. At this stage, there has been very limited uptake of HD designated lands. On this basis, staff are not recommending the further extension of the HD designation eastward until such a time as clear demand is demonstrated for the area already designated. Should demand for HD designated properties grow considerably over current levels, then further expansion of the designation eastward flanking Rose Avenue may be appropriate.

5.2 Proposed Changes to HD2 Zone

The HD2 zone provides for a range of institutional, medical-related commercial, and complimentary residential uses to support KGH and a transition between hospital and residential areas. The purpose of the zone is to "...provide a zone for the conversion and new development of buildings that provide services to the medical community associated with the Kelowna General Hospital, Interior Health Authority, and UBC Medical Programs including staff, clients, patients and their families".

Proposed changes to the HD2 Zone include:

1. Update the development regulations regarding floor area, to update outdated references and definitions, and to make it consistent with other zones.
2. Revise development regulations to clarify parking requirements for multiple unit housing at 1 parking stall per dwelling unit and to make health services parking requirements consistent with other health services across the city. These changes will be integrated with an ongoing review of the City's parking standards.
3. Update landscaping buffer requirements for ease of interpretation. This will result in slightly higher landscape buffer requirements in some instances.
4. Add 'urban agriculture' and 'community gardens' as permitted secondary uses.
5. Add a requirement for ground level institutional or commercial health related uses in association with multiple unit housing developments.
6. Remove the connection between lot area and permitted uses to make it more consistent with other zones.

Please see 'Attachment A' for a full explanation of the proposed HD2 amendments.

5.3 Proposed RU7 Zoning Changes

In addition to updates to the HD2 zone, it is proposed that 70 properties within the Health District Area be rezoned from RU6 into RU7, as per the Proposed RU7 Zoning Map below (orange boundary). These properties were identified as candidates for the RU7 zone when the zone was created, but as the Hospital Area Plan was underway at the time, staff opted to complete the planning process prior to proposing RU7 rezoning. Of note, the existing sanitary sewer network was found to provide adequate capacity to service the densities associated with RU7 rezoning³.

Map 5: Proposed RU7 Zoning Area



6.0 Hospital Area Neighbourhood Transportation Plan – Proposed Changes

The Hospital Area Neighbourhood Transportation Plan indicated that traffic congestion within the study area is expected to worsen due to hospital growth and increased residential density; however, this will be dominated by background growth from development in Pandosy and the south Mission. The study area is also facing parking challenges and gaps in pedestrian and cycling infrastructure. To improve active transportation infrastructure in the study area, implementation of pedestrian and cycling upgrades consistent with the Pedestrian and Bicycle Master Plan⁴ are recommended. Key upgrades include:

Infrastructure	Recommendation	Details
Sidewalk improvements	Sidewalk connections	Various critical locations through the study area, as identified in Attachment B
	New Pedestrian / cycling connection	Between Royal Avenue and Richter Street

³ City of Kelowna, May 7, 2018. Memo – Sanitary Servicing Assessment – Health District RU7 Land Use Change

⁴ City of Kelowna. (2016). *Kelowna on the Move: Pedestrian and Cycling Master Plan*.

https://www.kelowna.ca/sites/files/1/docs/related/pbmp_final_draft.pdf

	Crosswalk	Across Richter Street at the new pedestrian / cycling connection with Royal Avenue
Cycling improvements	Cycle tracks	Along Ethel Street and Rose Avenue
	Shared-used pathway	Through the KGH site

In terms of vehicle infrastructure, there are a number performance challenges identified for both existing and future conditions. Recommended upgrades do not fully resolve these, but represent a balanced approach to addressing the identified challenges and include:

Infrastructure	Recommendation	Details
Vehicle improvements	New right-turn bays	Northbound at Richter Street and Cadder Avenue, and at Pandosy Street and Cadder Avenue
	Signalization	Rose Avenue and Ethel Street, and Royal Avenue and Pandosy Street
	New road connection	Extend Royal Avenue to Richter Street with redevelopment over time

Some of these improvements will be carried forward to be considered in the City’s capital planning processes and prioritized among other infrastructure needs across the community. Other identified improvements will be triggered by redevelopment. Staff will also continue ongoing traffic operations monitoring through the area.

Please see ‘Attachment B’ for a more detailed summary of the improvements recommended by the Hospital Area Neighbourhood Transportation Plan.

6.1 Interior Health Parkade

While transportation demand management measures are encouraged to help alleviate some of the demand for parking in the hospital area, a 300 – 500 stall deficit for KGH staff parking currently exists, and on-street parking conflicts remain a source of tension in the study area. To address these issues, IH has identified the need for a new parkade. The intent of the parkade is to replace surface parking spaces being lost during the development of JoeAnna’s House and to provide additional parking for KGH staff. When compared to a surface parking lot, a parkade is a more appropriate long-term solution due to the provision of additional parking spaces, as well as the potential to provide a location for hospital amenities on the ground-level.

Two general locations are being considered: on campus, and on the west side of Speer Street⁵. Staff have a strong preference that a parkade structure be located on the KGH campus. However, should that option

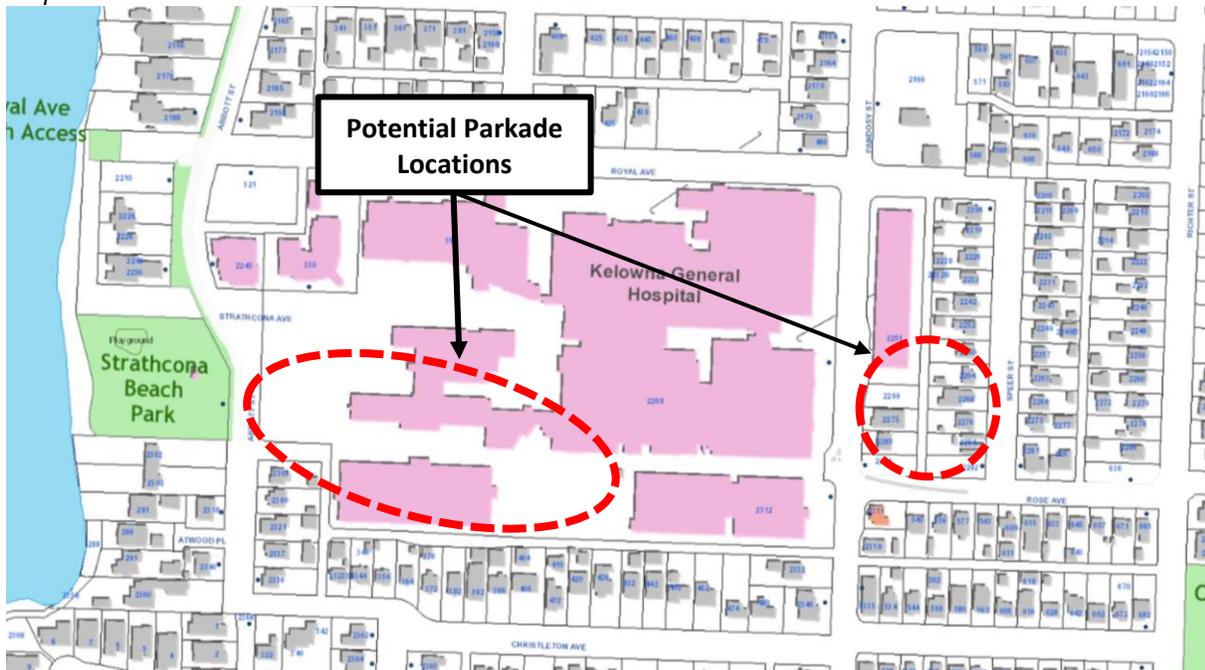
⁵ Interior Health current has an active development application (COP18-0017, Z18-0077) to build surface parking on the south side of the block between Speer Street and Pandosy Street.

not be feasible without significant compromises to KGH operations, staff are supportive of IH constructing a parkade on Speer Street, provided the project meets all necessary architectural and infrastructure requirements⁶. An initial traffic analysis was conducted and showed that all traffic associated with a parkade can be accommodated via access to/from Speer Street and Rose Avenue, but additional analysis is necessary.

Locating the parkade on Speer Street would require considerable effort on the part of IH to design a structure that mitigates negative impacts on surrounding residential lands. The following items would require careful design and consideration, as well as consultation with affected landowners:

- Building bulk and massing reduces in scale as it begins to interact with residential lands;
- Provision of a publicly-accessible pocket park;
- Lighting design that meets the needs of the space without compromising the quality of life of area residents;
- Crime Prevention Through Environmental Design (CPTED) application;
- Active uses at grade to create a more pedestrian-friendly environment;
- Vehicle access management and pedestrian infrastructure to reduce potential conflicts and collisions.

Map 6: Potential Parkade Locations



7.0 Summary & Implementation

Phases I and II of the Hospital Area Plan were completed over the past 5 years. Together, Phase I and Phase II addressed land use, parking, and transportation issues in the areas adjacent to KGH. Key changes arising from Phase II include the adoption of the Hospital Area On-Street Parking Plan, the creation of the Hospital Area Neighbourhood Transportation Plan, and three key land use changes: 1)

⁶ Any upgrades or new infrastructure required would be determined at time of rezoning.

updates to the HD2 zone, 2) RU7 rezoning, and 3) corresponding zoning changes to identify the location to accommodate a public parkade for KGH.

These changes will be implemented gradually through the following processes and plans:

- Ongoing development within the Health District will be responsible for attributable infrastructure improvements
- Kelowna on the Move: Pedestrian and Cycling Master Plan
- 2040 OCP update to complete the future land use designation changes
- City-led Zoning Bylaw amendments to the HD2 zone
- City-led review of parking standards in the Zoning Bylaw
- City-led RU7 rezoning and OCP amendment process
- IH-led development application process for a parkade
- Annual Capital Program for capital infrastructure improvements

It will take a number of years to implement the changes outlined in this report, and many components will require further independent public engagement processes. Additionally, Council will have multiple opportunities to consider each action in greater detail as they are brought forward individually.

Internal Circulation:

Department Manager, Community Planning
Community Planning Supervisor
Manager, Parking Services
Manager, Integrated Transportation

Financial/Budgetary Considerations:

The cost of implementing the transportation infrastructure described in this report will be considered as part of the City’s capital planning process; no additional budget is requested. The IH Parkade development will be funded by Interior Health.

Submitted by:

J. Moore, Long Range Policy Planning Manager

Approved for inclusion:



Danielle Noble-Brandt, Policy & Planning Department Manager

cc:

Interior Health Authority

Attachments

Attachment A: Proposed HD2 Zone Changes

Attachment B: Summary of Improvements from the Hospital Area Neighbourhood Transportation Plan