

NO: R225

COUNCIL DATE: November 30, 2009

REGULAR COUNCIL

TO: **Mayor & Council** DATE: **November 30, 2009**

FROM: **General Manager, Planning and Development** FILE: **7909-0098-00**

SUBJECT: **Proposed Master Plan and Urban Design Guidelines for
Surrey Memorial Hospital Site (Application No. 7909-0098-00),
OCP Amendment to City Centre and Rezoning to CD By-law No. 16985
13750 – 96 Avenue and 13605-94A Avenue**

RECOMMENDATION

The Planning and Development Department recommends that Council:

1. Receive this report as information;
2. Endorse the Master Plan for the Surrey Memorial Hospital Campus, attached as Appendix I;
3. Endorse the Urban Design Guidelines for Phase 1 of the Surrey Memorial Hospital Expansion, attached as Appendix II;
4. Consider Final Adoption of By-law No. 16984, redesignating the Surrey Memorial Hospital site from Urban to City Centre in the Official Community Plan;
5. Rescind Council Resolution No. R09-1447 of July 27, 2009 (Regular Council – Public Hearing Meeting) granting Third Reading to Surrey Zoning By-law, 1993, No. 12000, Amendment By-law, 2009, No. 16985 (the "By-law") and amend the By-law by deleting Section G.1. in its entirety and replacing it with the following:
 - "1. *Principal buildings:* The *building height* shall not exceed 50 metres [160 ft.]."; and
6. Consider Third Reading and Final Adoption of By-law No. 16985, as amended, rezoning the Surrey Memorial Hospital site from CD (By-law No. 13526) to CD By-law No. 16985 to permit the phased redevelopment of Surrey Memorial Hospital.

INTENT

The purpose of this report is to:

1. Advise Council of the fulfilment of certain conditions of approval associated with the proposed rezoning of the Surrey Memorial Hospital ("SMH") site;

2. Obtain Council endorsement of the Master Plan for the SMH site;
3. Obtain Council endorsement of the Urban Design Guidelines for Phase 1 of the SMH expansion project; and
4. Bring forward the OCP Amendment By-law and the Rezoning By-law for the SMH site, for consideration of Final Adoption.

BACKGROUND

On June 9, 2009, Fraser Health Authority ("FHA") applied to rezone the SMH site at 96 Avenue and King George Highway from CD (By-law No. 13526) to a new CD Zone to permit the phased redevelopment of the SMH site. As Phase 1 of the SMH expansion is being developed as a Private-Public Partnership (P3) project, the rezoning of the SMH site is proceeding in advance of detailed design drawings, to provide the final P3 proponents a level of certainty during the P3 competition process. Detailed designs will be developed by the successful P3 proponent and will be brought forward to Council as a separate Development Permit Application.

The Planning Report with respect to the subject proposal was considered by Council on July 13, 2009. At the July 13, 2009 Regular Council Land - Use Meeting, Council endorsed the conditions of approval outlined in the Planning Report, gave First and Second Reading to By-law No. 16894 redesignating the subject site from Urban to City Centre, and gave First and Second Reading to By-law No. 16895 rezoning the site from CD (By-law No. 13526) to a new CD Zone (By-law No. 16885). Both By-laws No. 16894 and No. 16895 were granted Third Reading on July 27, 2009, following the Public Hearing with respect to these two By-laws.

Typically, land development applications do not proceed to Council until issues that may affect the layout and development of the related site have been resolved to the satisfaction of both internal and external referral agencies and to Planning and Development Department staff. However, to meet the FHA timelines and to ensure that the SMH expansion project is not jeopardized, the rezoning application was forwarded to Council without a number of issues having been fully addressed. These are identified in the following paragraph.

Stream setback protection issues, with respect to the watercourse on the southwest corner of the subject site, had yet to be resolved. A traffic and parking study, which may have an impact on parking requirements and access points, was to be completed. A Master Plan for the long-term redevelopment of the entire SMH site that addressed the urban design principles and meets the goals and objectives of Surrey City Centre, was to be submitted. As a result, Council approved a recommendation that resolution of these issues would be a condition precedent to final approval for the rezoning of the subject site.

In the July 13, 2009 Planning Report, staff indicated that a follow-up Corporate Report would be presented to Council outlining, in detail, how the applicant had addressed these three issues, the impact the resolution of these issues will have on the proposed site layout and design of the current and future phases, and if amendments are required to the proposed CD Zone for the site. It was also anticipated that the Corporate Report would contain the detailed urban design guidelines for the SMH Phase 1 expansion, which will provide direction for the P3 proponents in their development of a site layout and building design for Phase 1.

DISCUSSION

The various issues that had not been fully resolved prior to the Planning Report proceeding to Council on July 13, 2009 have now been addressed by the applicant. These are discussed in the following sections.

Stream Setback Protection

A tributary of Quibble Creek is located in the extreme southwest corner of the block in which SMH is located, and is located within a lot owned by the City of Surrey. Although most of the standard 30-metre (100 foot) setback protection area is contained within the City-owned lot, a portion of the 30-metre (100 foot) setback protection extends beyond the City-owned lot into the lot on which SMH is located.

The Phase 1 development anticipates that the Charles Burnham building, located at the southwest corner of the SMH site, adjacent to 94A Avenue, will be retained. The Charles Burnham building is actually located within the 30-metre (100 foot) setback area of Quibble Creek. However, to provide adequate vehicle access into the site and to create a functional vehicle circulation network on the site, a driveway and drive aisle will be constructed between the Charles Burnham building and the stream as part of the Phase 1 expansion. The proposal to construct the driveway and drive aisle, and to add parking spaces within the 30-metre (100 foot) stream setback protection area, was reviewed by the City's Environmental Review Committee ("ERC") on July 15, 2009. The ERC, which includes a representative of the Department of Fisheries and Oceans ("DFO") supports this Phase 1 driveway and drive aisle provided additional vegetation is planted between the driveway and drive aisle and the existing stream setback planting. FHA has agreed to provide this additional planting.

To achieve broader access and circulation goals and objectives, FHA is anticipating a new vehicular connection into the site from King George Highway, as well as a major connection into the site from 94A Avenue in the proximity of the Charles Burnham building. Although the final site layout for the westerly portion of the SMH site will not be finalized until the Phase 1 P3 proponent is selected, any internal driveways and parking areas will need to be sited as far from the stream as possible, to maximize the amount of planted area on the north and east sides of the stream.

Traffic and Parking Study

Phases 1 and 2 of the SMH expansion result in an increase of hospital beds from 500 to 826, with an accompanying increase in staff, physicians and students, from 4,000 to 6,740. Given the additional trips and parking demand generated by the expansion, the applicant engaged IBI Group to undertake a Traffic Impact and Parking Analysis Report for Phases 1 and 2 of the SMH expansion.

The Traffic Impact and Parking Analysis Report has been reviewed by the Engineering Department. Given the uncertainty of future phases, FHA did not undertake an assessment of the traffic and parking associated with Phases 3 to 6.

Based on the conclusions of the Traffic Impact and Parking Analysis Report, the location and number of driveways proposed for the SMH site are acceptable, with the exception of the driveway off 94A Avenue at the west side of the site near King George Highway. 94A Avenue is expected to experience an increased role within the strategic road network with densification and development of the City Centre and the ultimate completion of Whalley Drive (formerly East Whalley Ring Road) between Fraser Highway and 96 Avenue, with the addition of the traffic generated from the SMH site. Consequently, the siting of this particular driveway is problematic. Without improvements to the intersection, traffic turning left from 94A Avenue onto King George Highway will back up, blocking the driveway. The proposed driveway location will only be acceptable if improvements are constructed at the 94A Avenue/King George Highway intersection.

The applicant has identified mitigation measures at the intersection of 94A Avenue and King George Highway. In the short term, reconfiguring the westbound approach to King George Highway to include a dedicated left turn lane, plus a shared left/right turn lane, will increase the left turn processing capacity of the signal. Queues will be reduced to the point where spillback would occur no more than two to three times per year (by 2024). Over the longer term, widening of 94A Avenue between the proposed driveway and King George Highway by 3.5 metres (11.5 feet) to accommodate a second westbound dedicated left turn lane should be provided. This will significantly reduce queues and provide additional capacity to this street. These will be identified as Engineering Requirements at the Development Permit stage for the appropriate phases of the SMH development.

The Traffic Impact and Parking Analysis Report also outlines the number of parking spaces that are currently provided on-site at SMH, as well as the additional parking spaces that will be provided on-site with the completion of Phase 1 and Phase 2. Based on the Report, it appears that with the development of both Phase 1 and Phase 2, the number of parking spaces that will be provided (1,949) will be in excess of the number of parking spaces that are required (1,489) under Part 5 Off-Street Parking and Loading/Unloading of Surrey Zoning By-law , 1993, No. 12000.

As part of the larger "hospital district" in this part of the City Centre, there is currently a high level of demand for on-street parking. It is the expectation of staff that additional on-street parking management, in the form of expanded on-street metering, will be required to effectively control parking as both the SMH and supporting medical and care facilities develop.

As noted, the Traffic Impact and Parking Analysis Report assesses the impact of the planned first two phases of the SMH expansion. Given the potential for an additional four phases to the hospital redevelopment, additional traffic and parking studies and further applicant-funded improvements will probably be required.

Master Plan for SMH

Although the conceptual SMH Master Plan, developed by IBI Group, consultants for the FHA, and presented to Council as part of the July 13, 2009 Planning Report, may meet the needs and requirements of FHA from a functional perspective, this conceptual Master Plan does not achieve important design elements. Namely, making the SMH site more permeable to both pedestrians and vehicles, developing buildings on the site that are less monolithic and institutional and integrating the SMH campus with the surrounding community. As a result, the applicant was requested to develop a revised Master Plan that not only meets the functional goals and objectives of FHA, but which also achieves the goals and objectives of Surrey City Centre as outlined in the

Key Urban Design Principles, which were attached to the July 13, 2009 Planning Report and are attached to this report as Appendix III.

IBI Group and FHA, in consultation with City staff, have now developed an acceptable Master Plan for the SMH campus (Appendix I).

The Master Plan developed by IBI Group and FHA addresses only the western portion of the SMH site on which Phases 1 and 2 of the proposed SMH expansion will be located. Although it is anticipated that Phase 1 of the proposed expansion will be completed by 2014, it is not anticipated that Phase 2 will be completed until at least 2019 or 2020, and even then, only if Provincial funding becomes available for the Phase 2 expansion. As a result, FHA is reluctant to commit to a Master Plan for the SMH site beyond the 2020 time horizon, given the evolving nature of health care delivery in the Province and the uncertainties of senior government funding. Beyond Phases 1 and 2, the Master Plan contains only a statement of broad goals and objectives, such as increased vehicle and pedestrian permeability of the site and the creation of large, meaningful open spaces.

The main component of the new Master Plan for the westerly portion of the site is the development of a north-south vehicle and pedestrian connection from 96 Avenue to 94A Avenue that runs along the west face of the proposed Phases 1 and 2 buildings. This connection will permit increased permeability of the site for both vehicles and pedestrians and will help better integrate the hospital campus with the adjoining communities.

The Master Plan also anticipates the creation of a new front entry to SMH along the westerly face of the Phase 1 expansion as well as a new, formal driveway entry from King George Highway to the new front entry of the hospital.

Proposed CD By-law Amendment

In the development of the SMH Master Plan, it became evident that the height of the proposed building at the northwest corner of the site, adjacent to the intersection of 96 Avenue and King George Highway, slated for future phases of the SMH redevelopment, may be inappropriate. Similarly, the preliminary results of building height, skyline studies and view corridors currently being undertaken by staff as part of the next phase of the Surrey City Centre Plan Update, indicate that the site is more appropriate for lower-profile buildings than was originally envisioned with the original overall concept plan for the SMH site.

As a result, it is recommended that Council amend CD By-law No.16895 to reduce the permitted maximum height of buildings on the SMH site from 120 metres (400 feet) to 50 metres (160 feet). The applicant has no objection to this revision.

Phase 1 Urban Design Guidelines

FHA is currently in the process of selecting three P3 proponents to bid on the Phase 1 expansion of SMH. While FHA provides the proponents with functional and programming criteria and requirements, it is also incumbent on the City to provide the proponents with Urban Design Guidelines to give direction with respect to site layout, site circulation, building location and design and landscaping and open space.

The proposed Urban Design Guidelines for the Phase 1 SMH expansion are shown on Appendix II.

The Urban Design Guidelines are intended to ensure that the proposed expansion of SMH is in conformance with the goals and objectives of Surrey City Centre, as outlined in the Surrey City Centre Plan Update, Phase II, Stage 1 report adopted by Council on February 9, 2009 (Corporate Report No. C001). These goals include increasing the vehicle and pedestrian connectivity in City Centre through the creation of smaller blocks and a finer-grained road network, achieving a more urban, pedestrian-oriented environment, enhancing the natural environment, and creating more human-scale, high quality buildings.

CONCLUSION

The rezoning of the SMH site proceeded to Council without all issues being fully addressed to ensure that all FHA timelines are achieved so as not to jeopardize the SMH expansion project. Issues related to stream setback protection, traffic, parking and vehicular access have now been resolved.

A revised SMH Master Plan has been submitted. However, this Master Plan, for reasons outlined in this report, addresses in detail only the westerly portion of the SMH site. The Master Plan provides a general framework for development on the SMH site for the next 10 years and includes general goals and objectives for redevelopment beyond the 2020 time horizon.

Based on the above discussion, it is recommended that Council:

- Endorse the Master Plan for the SMH Campus, attached as Appendix I;
- Endorse the Urban Design Guidelines for Phase 1 of the SMH expansion, attached as Appendix II;
- Consider Final Adoption of By-law No. 16984, redesignating the SMH site from Urban to City Centre in the Official Community Plan;
- Rescind Council Resolution No. R09-1447 of July 27, 2009 (Regular Council – Public Hearing Meeting) granting Third Reading to Surrey Zoning By-law, 1993, No. 12000, Amendment By-law, 2009, No. 16985 (the "By-law") and amend the By-law by deleting Section G.1. in its entirety and replacing it with the following:

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- Consider Third Reading and Final Adoption of By-law No. 16985, as amended, rezoning the SMH site from CD (By-law No. 13526) to CD By-law No. 16985 to permit the phased redevelopment of SMH.

Original signed by
Jean Lamontagne
General Manager;
Planning and Development

GAG:saw

Attachments:

Appendix I Master Plan for the Surrey Memorial Hospital Campus
Appendix II Urban Design Guidelines for Phase 1 of the Surrey Memorial Hospital Expansion
Appendix III Key Urban Design Principles

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SURREY MEMORIAL HOSPITAL PHASE 1 EXPANSION URBAN DESIGN GUIDELINES

In addition to the specific urban design guidelines listed below, please refer to the Surrey Official Community Plan, the Surrey City Centre Plan Phase II, Stage 1 Update, and Planning Report for application No. 7909-0098-00, dated July 13, 2009, for additional, general urban design guidelines and development requirements.

1.0 Neighbourhood Context and Character

- 1.1 Create connectivity between the site and surrounding neighbourhoods, in terms of the road and pedestrian network, area parks, and greenway networks.
- 1.2 Increase integration with the surrounding area by increasing the permeability into, and through, the site for vehicles and pedestrians.
- 1.3 Take advantage of surrounding view opportunities.

2.0 Site Layout and Circulation

- 2.1 Create a cohesive and legible hospital campus community.
- 2.2 Create connectivity and linkages within the site for all modes of transportation: vehicles, cyclists and pedestrians.
- 2.3 Create a major north-south vehicle and pedestrian connection through the site at approximately the alignment of 136A Street.
- 2.4 Create the opportunity for an east-west vehicle and pedestrian connection through the site in conjunction with future redevelopment of the eastern portions of the Surrey Memorial Hospital campus.
- 2.5 Emphasize a strong entry procession at vehicle access points to the site, particularly at any entry along King George Highway.
- 2.6 Create a bicycle network within the site, separated, where possible, from the vehicle network.
- 2.7 Provide adequate bicycle parking, both adjacent to building entries for visitors, and within the building for staff.
- 2.8 Create a clearly defined and inviting finer-grained pedestrian pathway system within the site that connects with surrounding pedestrian networks. Where the pedestrian network intersects with the vehicle network, provision should be made to ensure the priority of the pedestrian network.
- 2.9 Integrate the pedestrian network with existing and future public transit stops and stations in the vicinity.

- 2.10 Ensure adequate connectivity, both internal and external, between Phase 1 and the balance of the existing SMH campus.

3.0 Open Space and Public Realm

- 3.1 Create a comprehensive and coordinated open space concept for the western portion of the subject site that incorporates meaningful open spaces for staff, patrons and the public.
- 3.2 Create a public open space adjacent to the Creek that includes significant natural planting and treatments that can also contribute to and enhance habitat associated with the creek.
- 3.3 Ensure that any roads, driveways, or drive aisles on the western portion of the site are located so as to increase and enhance landscaped and habitat areas on the north and east sides of the creek.
- 3.4 Create smaller open spaces at nodes along pathways within the site.
- 3.5 Maximize sun access to open spaces.
- 3.6 Consider rooftop amenity areas, if possible, particularly where views are available.
- 3.7 Create both passive and active programmed spaces including healing and contemplative areas.
- 3.8 Take advantage of natural topography, solar orientation and views.
- 3.9 Provide transitions for public spaces to private spaces within the site

4.0 Form and Character

- 4.1 Articulate the main building entry to be a distinctive architectural element as seen from King George Highway that can help create a new hospital identity.
- 4.2 The main building entry should be established within the design and continue to function as the principal entry for both Phases 1 and 2.
- 4.3 Building form and massing should be articulated to avoid a monolithic institutional character.
- 4.4 Incorporate human scale elements and tactile materials at building entries.
- 4.5 Create a cohesive, high quality architectural expression utilizing durable building materials and colour.
- 4.6 The building design should embrace sustainable design principles to promote environmentally sensitive solutions including passive solar, re-use of materials, etc.

- 4.7 Integrate natural daylight and sunlight into the building design to establish a healing and nurturing environment.
- 4.8 Create active uses on the ground floor of buildings, such as lounges, cafes etc. that can interface with the adjacent sidewalks and roads.
- 4.9 Integrate bright airy weather protection canopies at building entries and drop-off/pickup locations.
- 4.10 Ensure all roof-top mechanical units, elevator penthouses and telecommunication elements are screened and integrated into the overall building expression.
- 4.11 Minimize the impacts of parking ramps by locating ramps completely within the building envelope.
- 4.12 Ensure that all loading areas and garbage and recycling areas are contained within a building or are located away from public view and are heavily screened.
- 4.13 Ensure that any vertical mechanical ducting proposed for the exterior face of the building be integrated into the overall architectural expression.
- 4.14 Ensure all at-grade mechanical and service equipment and kiosks are located away from the public realm and screened from public views.
- 4.15 Locate parking vents away from public views and incorporate into the building or landscaping

5.0 Landscaping

- 5.1 Create an integrated landscaping concept for the entire western portion of the subject site.
- 5.2 Ensure the retention of as many mature trees as possible.
- 5.3 Incorporate as many drought resistant and/or native indigenous plant species as possible to ensure reduced irrigation demand, or utilize high efficiency irrigation system.
- 5.4 Incorporate storm water management into the early stages of site planning which may include the provision of open waterways.
- 5.5 Ensure all surface parking lots are adequately screened from adjacent roads. This screening should involve the retention of the existing berm along King George Highway.
- 5.6 Ensure all surface parking lots are adequately landscaped.

- 5.7 Provide a signage concept plan for overall site orientation, including site access points. Provide details of signage and way-finding strategy that incorporates the existing facility.
- 5.8 Provide a detailed exterior furnishing concept for the site.
- 5.9 Incorporate art in the public realm as an integral part of the outdoor/indoor public/patient realm, to encourage the healing process and to provide comfort.
- 5.10 Ensure the project integrates with the required City streetscape standards along adjacent City roads.

6.0 Site Security and CPTED

- 6.1 Create a safe and accessible public realm that incorporates CPTED principles.

7.0 Universal Access

- 7.1 Consider universal access to facilitate access for physically/visually disabled throughout the site, including open spaces.

8.0 Sustainability

- 8.1 A green building strategy to achieve a certified LEED equivalent for the environmental performance of all facets of building design and construction is encouraged.

9.0 Phase 2

- 9.1 Plans for Phase 1 must demonstrate how the site will be developed to accommodate Phase 2 of the proposed Surrey Memorial Hospital expansion and how Phase 2 will integrate with Phase 1.

KEY URBAN DESIGN PRINCIPLES

1. Create a site layout that takes advantage of natural features such as the adjoining stream, sun access, topography, views
2. Maximize opportunities for open space that take advantage of existing natural areas and encourage socializing for staff, patrons and the public
3. Create permeability, linkages, and road and pedestrian connections through the site, particularly where natural pathways occur
4. Create a pedestrian environment that encourages healing and wellness, as well as amenities for both staff and visitors.
5. Orient buildings to maximize sun penetration to pedestrian and public spaces and for daylight access into the buildings
6. Create ground floors of buildings that have interactive uses along any street, driveway or pedestrian area that incorporate weather protection
7. Transition from public to private spaces
8. Create a legible, consistent public realm treatment in coordination with City Centre Green Network and public realm design
9. Incorporate a way finding plan to increase legibility, clearly marking entrances, principle building entrances and open spaces
10. Ensure buildings are articulated and treated to avoid a monolithic institutional character
11. Create a cohesive, high quality architectural expression including materials and colours
12. Promote environmentally sustainable planning, buildings and landscaping
13. Create a safe and accessible public realm environment that minimize opportunities for crime and nuisance activity
14. Resolve vehicular necessities such as drop off and pick up without compromising pedestrian connections
15. Reinforce transit connections and incorporate reduced vehicle usage incentives
16. Minimize surface parking, particularly along King George Highway
17. Focus commercial/retail frontage along the northerly portion of King George Highway and along 96th Avenue to create a retail presence for the hospital campus
18. Incorporate public art wherever possible