

THE CORPORATION OF THE CITY OF NORTH VANCOUVER

**Meeting of the Advisory Design Panel
Held via WebEx on Wednesday, August 11th, 2021**

MINUTES

Present:	N. Petrie S. Mitchell M. Rahbar K. Blomkamp K. Bracewell, RCMP M. Muljani M. Tashakor M. Messer Councillor A. Girard
Staff:	D. Johnson, Planner R. Fish, Committee Clerk
Guests:	<u>231 East 15th Street (Development Permit Application)</u> Travis Prystai, PCL Donogh O'Connor, PCL Chris Arthur, Vancouver Coastal Health Veronica Gilles, HDR Jason-Emery Groen, HDR Mike Doiel, HDR Breanna Mitchell, Hapa Chris McBride, Hapa
Absent:	K. Ross D. Burns

A quorum being present, the meeting was called to order at 5:32 p.m.

1. Minutes of Meetings of the Advisory Design Panel held July 21st, 2021

It was regularly moved and seconded

THAT the minutes of the meeting of the Advisory Design Panel held July 21st, 2021 be adopted.

Carried Unanimously

2. Staff Update

None.

3. 231 East 15th Street (Rezoning Application)

The City has received a development variance permit application for the Lions Gate Hospital site at 231 East 15th Street. The application proposes a new six-storey acute care facility, including 108 patient rooms, eight universal operating rooms, a mixture of amenities, including roof-top courtyards on the fourth level, as well as multi-purpose hall and retail services.

Staff would like to receive feedback on the proposal with respect to the following:

- The proposed circulation for the drop-off area;
- The inclusion of CPTED principles in the design;
- Retention of existing trees along East 13th Street;
- Distinctiveness of the design and the buildings' contribution to the urban realm;
- Prominence and distinctiveness of the main building entrance;
- Effectiveness of landscaping along the East 13th Street frontage; and
- Effectiveness of the courtyard design.

Jason-Emerly Groen, HDR, described the project to the Panel:

- Surrounded by midrise buildings.
- Intentional materiality, contextual collaboration.
- Reuse of artifacts from the existing building, natural lighting and public spaces.
- Proposed 59% coverage.
- Access to internal street from East 15th Street, drop-off along East 13th Street.
- Central concourse links the new south entrance to the north entrance.
- Exploring the integration of art into the project with a sea to sky theme.
- Three existing cedar trees need to be removed and will extend the spirit of the trees with milling the timber and reclaiming the wood in the building.
- Wayfinding ribbon that starts outside and extends through the building.
- Exterior materiality includes metal panel, louver band, brick and batten.
- Activation of building artifacts to celebrate the history of the site.

Breanna Mitchell, Hapa, reviewed the landscape plan:

- Front entry ensures CPTED design uses.
- Legible access to the entry points with adequate lighting.
- Courtyard is close to primary south entrance, incorporates landscaping.
- Chemotherapy courtyard provides space for chemotherapy unit, allow eyes to wander while body receives treatment.
- Level four roof garden includes covered arrival, exercise area and treed grove with gathering area and sensory garden.
- Theme of North Shore mountains carries through the building.
- Focus on native species, inspired by context.
- Landscape settles the building on the site.

Questions from the Panel included but were not limited to:

- Are the gardens and rooftop area intended for patient use or patient and visitor? **A:** They will be accessible to everyone. Certain times will be cut off and available just for staff use.

- Does the building have an emergency component to it? **A:** No, the existing emergency department will remain.
- Can you describe the architectural elements that make reference to the adjacent buildings? **A:** The closest relationship is to the HOpe Centre in terms of vintage. We looked at volume and how it relates to lifting and extending of the elements. The goal is to bring the tone and rhythm through. We leaned toward the HOpe Centre with the warmth of the materials and emulate that through the south entrance.
- Have you considered lowering the building or making it more subtle compared to the existing buildings? **A:** There is a programmatic reality that is required. The space underneath is not typically publically accessible so we want to celebrate the space with a positive entrance.
- What is the rationale for the south facing windows and blank space? **A:** It is programmatically driven. The blank areas are mechanical in nature and includes other elements that don't have requirements for glazing. We've included electrochromic glazing so there's no need for solar shading.
- Have you considered any mechanisms for rain in the outdoor garden area? **A:** There is a covered area in the corner by the entrance and a covered walking route. Visibility and connection is also important.
- How many people can be waiting at the main entrance? **A:** The driveway will have several loading spots for public and hospital vehicles, the canopy will provide enough coverage space for people waiting.
- What is the rationale for the south entrance not being parallel to the street? **A:** There is a significant grade change that drops down toward the hospital. We wanted to ensure access through to the space but the doors do face directly south.
- Will the fourth floor amenity space be used by people in wheelchairs or also used by anyone in a hospital bed? **A:** We haven't discussed the use of a hospital bed yet, it is possible. Anticipating patients with mobility aids or those walking on their own.
- Are large trees possible in the two small courtyards on level four? **A:** Yes, we carefully ensured this can happen, we would like them to stretch to the sixth floor.
- There doesn't seem to be a lot of landscaping between the buildings. Have you considered adding more? It would be nice for staff to get out and get fresh air between patients. **A:** We are working with limited space, some greenery is provided, where we can add more, we will.
- Are there covered bike parking shelters on the outside? **A:** There's no requirement for coverage. There are six on the east side that are not covered.
- Could there be some consideration for texturing of the blank space on the south facade, vertical glass panelling maybe? **A:** We will take this into consideration.
- Is there a communications strategy for the removal of the trees? **A:** We tried to pull back from the public realm as much as possible, there is a story behind why this has to be and that helps a little bit. There is a public good that comes from the building.
- Are the trees in a location that they could not be retained? **A:** That's correct.
- Can you speak to the impacts of the east side of the building to the HOpe Centre? **A:** We wanted to pull back as much as possible for the patient room areas above. We've extended the distance as much as possible. There approximately a 12m gap. Service levels are at level two on the east side.

Comments from the Panel included but were not limited to:

- Pay attention to details for drainage off the roofs.
- Electrical shading on the windows is a good touch.

- Landscaping concept is well thought out, admire choice of artwork.
- Massing needs to be resolved, the entrance is monumental with the pillars. Would expect more stories above it, bring the scale down a bit.
- There's a lack of fenestration facing south and East 13th Street. Consider moving around the mechanical rooms to create more fenestration and use in the architecture.
- The relationship between HOpe Centre and building is lacking in terms of scale and height.
- Architecturally you could have borrowed more elements from the neighbouring buildings to imbed it.
- Consider patients and visitors that use the outdoor areas and the contact with the landscaping, not just visual.
- Heating outside could encourage more interaction.
- It's important to respect the context and adjacent buildings.
- Consider dropping the height of the entrance columns by one storey.
- Proportions of the openings in the building is squarer which is different than the adjacent buildings.
- Greenery on top of the fourth floor covered outdoor space would be a good idea.
- Consider more heritage elements in the landscape on the fourth floor amenity space.
- Most CPTED will come up on the operational end and be addressed then.
- Drop off point will be vulnerable, make sure it is easily traversed and well signed, ensure people enter and exit appropriately.
- Palette and materials are successful inside and outside.
- Presence of the street is important to give a sense of relief for the patients and allow practitioners to do what they're trained to do.
- It's good that the building is away from the emergency area, it separates and gives peace and direction to patients who are coming and going with fear.
- Healing program of art is inspiring.
- Encourage client to consider developing a communications plan for the tree removal, emphasize what's put into the building using the trees.
- Consider coverage of bike parking areas.
- Give some thought to the massing at the south entrance to bring it down a bit.
- Give some consideration with regard to the HOpe Centre on east side, the building will have an impact.

Presenter's comments:

- Thank you for the comments.

It was regularly moved and seconded

THAT the Advisory Design Panel has reviewed the Development Permit for 231 East 15th Street and recommends approval of the project subject to addressing the following issues to the satisfaction of the Development Planner:

- Further design development of the scale of the massing, materiality and proportion of glazing that faces East 13th Street;
- Encouraged to explore additional covered space and potential for heating at the fourth floor garden amenity; and
- Encouraged to provide additional covered bike parking.

AND THAT the Panel wishes to thank the applicant for their presentation.

Carried Unanimously

4. Adjournment

There being no further business, the meeting adjourned at 7:00 p.m.

The next regular meeting of the Advisory Design Panel will be held on Wednesday, September 15th, 2021.

Chair