

Presentation to the *Office de consultation publique de Montréal*

Subject: Expansion of Montreal General Hospital

By

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This document responds to the call for presentations by the *Office de consultation public de Montréal* and as such is made in keeping with the framework expressed on the Office website:

En vertu des dispositions du 5e paragraphe de l'article 89 de la Charte de la Ville de Montréal, la consultation publique porte sur le projet d'agrandissement de l'Hôpital général de Montréal (CUSM), situé au 1650 et 1750, avenue Cedar, dans le cadre des mesures de protection et de mise en valeur élaborées à l'égard du mont Royal.

La mise en œuvre du projet nécessite des modifications au Règlement autorisant l'agrandissement de l'Hôpital général de Montréal (08-012), au Règlement d'urbanisme de l'arrondissement de Ville-Marie et au Plan d'urbanisme de Montréal, portant sur l'affectation du sol, les limites de hauteur et le taux d'implantation. Des dérogations sont également requises au Projet particulier adopté par le conseil d'arrondissement à l'égard du 1750 Cedar concernant la volumétrie, les retraits d'alignement et les matériaux.

We will not equivocate: there is no reason to trust the MUHC, the City of Montreal or any of the other private developers involved in the process of the expansion of the General Hospital and most recently the acquisition of a half-built residential project on land that is zoned residential at 1750 Cedar.

We are tired of fighting for the same cause for decades, assailed as we have been by new initiatives to harm our neighbourhood and do irreparable harm to the Mountain and to the Cedar Avenue approach to it.

We would like to go on record with the litany of promises made and promises not kept in relation to the hospital expansion and the development of 1750 Cedar.

Promises made	Promises not kept: current proposal
Hospital commits to not expanding beyond its footprint	Significant expansion beyond the MGH footprint
Hospital commits to developing on Cote des Neiges and limit development to infill within existing footprint	Hospital moves development away from Cote des Neiges and concentrates development beyond its current footprint
Hospital commits to keeping development away from the Mountain	Hospital moves development to closest possible proximity to the Mountain. No consideration given to the fact that Cedar is too narrow to accommodate increased traffic

Hospital commits to maintaining automobile access and traffic away from Cedar and proximity of the Mountain	Hospital diverts bulk of traffic to Cedar and to the Mountain
Developer gets zoning change based on commitment to a residential building with setbacks exceeding bylaws	
Developer agrees to incorporate staircases into structure to look like existing look and feel of residential Golden Square Mile and Cedar neighbourhood	Developer begins construction but ceases in progress in order to change purpose of 1750 to institutional use with clinics and offices of MGH. Developer then enters into discussion and agreements with MUHC despite MUHC signing a contrary agreement with the city. Developer sells property to MUHC.
Developer commits to a set back on the top floor to diminish volume massing	New proposal calls for building façade that eliminates all terraces
Usual procedure is to only build when zoning has been approved	Developer/MUHC ask to change zoning of property during construction.
Developer promises building exterior will conform to massing and architectural detail to existing Cedar Avenue residences with stone staircases, stone bases, etc.	Set backs of 1750 Cedar are consistent with residential setbacks, not institutional (ref. current Shriners, current MGH), which are set back even further than residences. Building will be institutional in look and feel and entirely inconsistent with other neighbouring buildings other than the hospital itself
New building will be of red brick with articulations on roof line, windows, etc. to have residential look and feel similar to existing Golden Square Mile residences	Proposed development is to be consistent with current hospital/institutional look and completely inconsistent with residential look and feel of the neighbourhood and the Mountain in terms of massing, materials, architectural treatment outlined in <i>Commission des biens culturels</i> letter dated 31/3/05

The new proposal contradicts the published Montreal General Hospital Expansion and Modernization Project and the MUHC’s rationale on multiple levels:

Promises made	Promises not kept: current proposal
The expressed need for the Mountain campus of the MUHC is to consolidate existing trauma care and neurology programs (p.2)	This rationale no longer exists. The Neuro is staying where it is. The 2008 plan could easily accommodate the new building on Pine Avenue
MUHC expresses that “the project is guided by a clear development vision that stems from the following goals:… —Develop two campuses while respecting sustainable development principles…” (p.2)	The proposal does not respect sustainable development principles
“Urban Integration goals: the history of the Mountain Campus site, its pivotal location between urban and natural settings and its particular topographical characteristics formed the creation of six integration goals that have guided the development of the MUHC: …Promote development towards Pine Avenue so that activities are concentrated away from Mount Royal (p.3)	The new proposal goes directly against the stated urban integration goal of the MUHC
The search for a lasting solution “...As a result of meetings with representatives from various levels of government as well as discussions with other stakeholders, such as <i>Les Amis de la montagne</i> and <i>Héritage Montréal</i> , the MUHC changed the concept in order to meet urban integration objectives without detracting from our mission...” 9p.4)	The new proposal in no way meets urban integration objectives. It is in no way satisfactory to any of the stakeholders
The proposed additions to the existing building will have no impact on the views of Mount Royal from the city or vice versa	The new building proposed will have a profound impact on the views of Mount Royal from the city and vice versa.
	Increased vehicular traffic and parking will create huge traffic burden. Taxis and cars will block existing driveways as they do already.
	Increased pedestrian traffic, noise and litter will cause substantial reduction of
	4

	approximately half of the existing street west of the hospital, thus eliminating much of the residential character of Cedar.
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We ask the *Office de consultation* to recommend maintaining the residential zoning of 1750 Cedar, to resist arguments to the contrary and to send the MUHC planners back to the drawing board to provide expansion plans, if necessary, that conform to the existing footprint and the existing zoning.