

The new St. Paul's Public Consultation

Community Forums – Round One Summary

February 24, 2016 at Carnegie Community Centre (Morning) and Creekside Community Centre (Evening)

BACKGROUND

Providence Health Care is planning a new St. Paul's hospital and integrated health campus on Station Street to transform the future of health care for British Columbians. The new St. Paul's will be designed with patients' needs at the centre to provide them with the highest-quality, seamless care at home, in the community or in the hospital - wherever their needs are best met.

In April 2015, the decision to move St. Paul's Hospital from its current site on Burrard Street to a new site on Station Street, approximately three kilometres away, was confirmed. The decision was made to not rebuild on the current site due to disruption to patients, cost of renovations and the determination that even the investment of \$850 million to renovate the existing site would not yield best practice hospital care facilities.

The new St. Paul's will continue to be one of B.C.'s two most specialized hospitals for adults complete with world-class health care to treat people when they are the sickest and need specialized hospital care. It will remain an academic health sciences centre and continue its strong teaching focus and to ensure that medical research breakthroughs lead to direct clinical benefits for patients.

Guided by the Ministry of Health's vision for patient-centred care across the spectrum and improved overall population health, the new hospital will be integrated with a number of primary care, community health services and support programs on the Station Street health campus and into the broader community with such partners as Vancouver Coastal Health and other providers. By combining hospital-based care with community and primary care – on and off the health campus – the new St. Paul's will continue to meet the needs of patients from throughout B.C. and the local communities, including the West End and Downtown Vancouver.

Planning for the new St. Paul's will take many years before its expected opening in 2023. At this stage, Providence Health Care is currently focused on the development of a business plan to be submitted to the provincial government in the fall. A key component is clinical planning which is currently underway and involves identifying current care being delivered by St. Paul's to our patient populations and communities, what their future health needs will be, which clinical programs and services should be at the new St. Paul's, and how best to integrate new solutions into the broader community and primary care networks.

Comprehensive public engagement has begun with stakeholders and local communities with the objective of understanding their current and future health care needs and how the new St. Paul's can best support those. Feedback gathered as part of this process will be used to inform decision-making as the clinical plan is developed.

This community engagement process is designed as a stepping stone to continued and expanded engagement throughout various stages of project planning until the implementation on the new site.

COMMUNITY ENGAGEMENT PROCESS

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SUMMARY of DISCUSSION

SAFETY & EARTHQUAKE RISK AT FUTURE SITE

- Concern about location and access of housing for staff so they can access the hospital in order to work during a disaster.
- Floodplain areas, like the area the new site will be built on, are at risk of a tsunami during an earthquake.
- New site is in a bog area with the potential for shifting/sinking of land. Design facilities on stilts or in a way that can withstand the sinking effect of the bog.
- The new hospital will be close to where I live so I'm pleased because my property value will go up.
- Need to enhance communication about the safeguards that will be put in place when building on the new site to reduce fears.
- The whole city is at risk of earthquake, not just planned site; the city needs an earthquake plan.
- I wonder about access to hospital in an emergency from West End, especially without viaducts.
- There is some vulnerability being so close to the Port. For example, what if there is an issue there and a need to evacuate the hospital because of a chemical fire in a shipping container?
- Concern with stability of the soil at that site even in a mild earthquake and how to access. The location just doesn't make any sense.
- The new hospital will be located near a train station with diesel fumes that can impact air quality for vulnerable individuals such as patients and seniors.
- How do we get there from West End with viaducts being removed and traffic? Walking there might be faster than getting there by ambulance.
- This plan seems to be setting us up for failure. The government does this over and over. They don't care about the safety and well-being of people.
- Have environmental concerns about the site and costs of new water/sewage system.

QUESTIONS

- Has there been a study that's looked at the earthquake resilience of the site? If so, who did it?
- How will PHC communicate with community to reduce fears about vulnerability of site?
- What upgrades are planned for adjacent areas for traffic/parking/utilities?
- What will be the capacity of the hospital to be able to provide patient care and all related services in case of disaster?
- Will property taxes go up as a result of the hospital being in the area in terms of increased value of real estate?
- What's the real risk of the hospital being built on a landfill? Did someone check this out? What does the report say?
- How far will the new hospital be from the official disaster route?
- Will SPH become the hub for emergency needs in the area because it's going to be the biggest hospital?
- Who's the developer who pushed for this at Station Street?
- How much will it cost to deal with contaminated soil on site?
- Why was the site chosen because it doesn't make sense?
- Will everyone be treated equally at the hospital?
- Will the hospital be able to help people in the Downtown Eastside if an earthquake happens?
- What is the profile of patient reps on the new St. Paul's project planning committee? I.e. is there anyone with dual diagnosis?

DELIVERY OF CARE – PATIENT-CENTRED & COMPASSIONATE CARE TO CONTINUE?

- I was “treated like a king” at St. Paul’s and trust this type of care will continue to be delivered.
- I feel like staff will continue to provide high level of care.
- Care should be individualized and personalized.
- Patients, family members and staff should be transparent about what is working/not working at the current site so they can expand on what is working in designing the new site and its programs and fix what is not working.
- There is a warmth and the feeling of a smaller hospital at the current St. Paul’s and hope that it will be possible to keep that at new site.
- Clinicians need to provide a high level of care.
- Concerned about discrimination and racism. Staff need training on how to interact with residents in a respectful manner, especially marginalized populations and people in the DTES, in order to support these individuals at the new site.
- Need a strong volunteer program. Engage and mobilize volunteers in the new area, especially Chinese seniors, to tap in to resources for transportation, translation, visiting, etc. This is an untapped resource in the DTES area.
- Ensure accessibility/availability of smudging services and consideration of Aboriginal cultural needs in terms of approach to care.
- Consideration for out-of-town families and providing places for them to stay (e.g. First Nations).
- Ensure prayer rooms available.
- Ensure safety, respect, and adherence to human rights.
- Provide “animal therapy” and other alternative forms of therapy.

QUESTIONS

- With the centralization of services, what is the plan/priority to maintain the current St. Paul’s team approach to care?
- Where will specialized services go?
- Will SPH hire staff in key positions at the new site that are reflective of the community it serves (e.g. First Nations)?
- Will there be reconciliation practices in treating First Nations patients, including DTES residents and homeless people?
- Will there be sensitivity training for staff/care providers?
- Will there be alternative health practices integrated into hospital and community?
- Will there be cultural/sensitivity training that is measurable? And with consequences?

AMBULANCE ACCESS & NOISE

- Need ambulance station to be located in the West End.
- Concern about potential disruption from sirens in area near new site.
- Consider travel time via ambulance to/from new site from West End.
- Changing road networks, i.e. Georgia and Dunsmuir Viaducts, could hinder access.
- What will the scope of emergency services be in terms of what’s left behind in the West End? E.g. air ambulance service.
- Concerned about the capacity of emergency services at new site.
- Quick response time of ambulances in emergencies is important.

- Paramedics need to have correct equipment for non-elevator accessible buildings.
- Consider potential growth in neighbourhoods near new site over long-term and short-term as it relates to ambulance access.

QUESTIONS

- Will the viaducts be torn down before or after the new hospital is built?
- Will there be an ambulance helipad at the new site?
- Are there plans to change road routes to accommodate new site?
- What routes will ambulances take to new site?

HEALTH SERVICES REMAINING AT EXISTING SITE

- Concerned about losing basic health services in West End such as 24-hour emergency, urgent care, mental health and addiction services.
- Concern that current SPH site will become high-density housing.
- Need to have affordable housing built at current site.
- Opportunity to address gaps in health care services for community care.
- I don't believe it is true that the current site needs to be sold to help fund the costs to develop the new site.
- Would like to see long-term care and seniors' care established on existing SPH site, such as a facility for seniors where they can buy meal tickets and have a dining room for their meals.
- Concern about support services surrounding existing SPH potentially moving out of the area. Need plan to help support and transition people to services at new site if needed/desired.

QUESTIONS

- What will happen to the St. Paul's Rose Garden and where people's ashes were spread?
- Where do I look for a family doctor?
- What will remain at the current SPH site?
- Are any of the current St. Paul's buildings earthquake-proof?
- Is the current SPH site being sold?
- What will happen to existing SPH site and can there be conditions imposed on site's future use?
- Will there be health services (i.e. small emergency department) left behind at the current SPH site?
- What is timeframe for new construction?
- What services for addiction and mental health will remain to support the community?
- Is old Burrard Building going to be torn down? Is it a heritage site?

NEW ST. PAUL'S AND ITS CONNECTION TO THE COMMUNITY

- Concerned about the impact on land values (increasing) around the new site from gentrification.
- Potential shortage of accommodation could result in increased cost of long and short-term housing.
- Concerned that current residents who live in single room occupancy housing (SROs) will be displaced.
- Concerned about overall impacts on community (economic, social, health, displacement of local residents).
- Interested in how the urban planning will consider green space and other programmatic uses of green space.
- There will be more complexities in terms of working with community partners at the new large site.

- Interested in seeing new daycare spaces provided in the area for children of SPH staff and the rest of the neighborhood.
- Interested in affordable housing for families around the new hospital site.
- Interested in safety, ease and enjoyment of walking to new site.
- Concerned about impacts on community, such as less parking and timely ambulance access.
- Concerned about public transit access, bike routes and parking in/around community and hospital.
- Increase in noise pollution in area is a concern.
- Conduct impact studies as part of planning process.
- Provide accessible spaces for families to stay near hospital.
- Concerned about increased population density around the future site and impact on access.
- Concerned about changing traffic flows in area and the impact.
- Consider strengthening the link between City of Vancouver's DTES community plan and the new St. Paul's project.
- Need to maintain a diverse population as growth around the new site takes place.
- Provide access to appropriate and affordable parking.
- Strengthen hospital partnerships with local community organizations for recruitment.
- Planning for services at new site should consider populations needs.
- Proximity to SkyTrain and Pacific Central Station with train access is bonus.
- I like the new site – will enable the development of the biggest, most advanced hospital in B.C.

QUESTIONS

- Will hospital fit with neighbourhood as it changes over next decade?
- How is this linked to plans and development in the DTES?
- Why was the plan to establish a new hospital at this site not communicated as a possible outcome in advance of the finalization of the DTES local area plan (LAP)?
- Why put a hospital next to a train station (concern about poor air quality)?
- Will hospital employees choose to relocate/live closer to the new location?
- Will there be further attempts to engage groups impacted as planning progresses?
- Will there be an increase to long-term care beds/facilities? (aging population)
- What kind of accommodation will be provided for out-of-town patients and visitors?
- Will there be more services for children at St. Paul's? (emergency/specialized care/NICU)
- How will wait times in the emergency department be impacted?
- Will jobs be created for local population? Will priority be given?
- Was there an impact study done more recently?
- How will PHC continue to work with community partners at the new site?
- What kind of community care will be provided in the area outside of the hospital?
- What kind of short-term housing will be available for patients and their families?
- What is the strategy around green spaces and the healing nature of those spaces? (volunteers could help with maintenance)
- How easy will it be to walk from the current site to the new site?
- How will the planning and design of the hospital campus consider wildlife in the area or returning to the area? (i.e. providing natural habitats, green spaces, etc.)

HEALTH SERVICES REMAINING AT CURRENT SITE

- There is need for day-to-day primary care services, e.g. MD, NP, multi-disciplinary care
- Ensure provision of transitional services, e.g. from acute to recovery/rehab.
- Need to increase home care services.
- Interest in Providence-run clinics that operate 24/7 with consistent staffing.
- Repurpose space in newer buildings on current site to accommodate health services that should remain.
- Provide urgent care services.
- West End is a natural aging-in-place community that needs support services, e.g. seniors health care hub.
- Provide access to rentals for aids – canes, beds, etc.
- Ensure collaboration/partnership with new St. Paul's and West End site.
- Need transit that provides good access to new site, multiple buses from West End.

QUESTIONS

- Is this move an opportunity for privatized health care to slide into the void?
- What is happening with the heritage building?
- What will happen with the Providence towers?
- What is the commitment to keep health care services on current site when the hospital moves?
- What is the difference in travel time by car in having an emergency department on Burrard St. v.s. an emergency department at new site?
- How will PHC address the continued need for support services that are currently sited around the hospital and may move once the hospital moves? I.e. doctor's offices, pharmacies, and other services that are currently clustered around the hospitals. Is this part of the planning?

INTEGRATION OF NEW SITE

- Bike travel and transit to/from site should be easy, fast and very accessible.
- Shift away from illness by focusing on wellness for health and prevention of illness. Incorporate green spaces, healing garden, community garden, outdoor space for inpatients and design these with an emphasis on bringing the community together.
- Consider the principles of [BC Healthy Communities](#).
- Give due attention to the physical layout of the site and road access connecting new site into community via a road, bike and walking path network.
- Open site to allow foot traffic to flow in, through and around the campus versus making people circumnavigate one big building.
- The new hospital should approach development planning as a good neighbour.
- Consider access for ambulance traffic and emergency routes.
- Consider providing commercial and retail services for community.
- Plan for gardens and trees and extend this into the neighbourhood.
- Plan for public art commissioned by City of Vancouver or PHC.

- TransLink needs to plan for enhanced transit options to support movement to new site and reduce reliance on parking.
- Build sustainability into site.
- It is important for PHC to connect with the community so that residents feel a sense of pride in the hospital becoming part of the neighbourhood.
- Build the new site to integrate into the fabric of the community.
- Keep services community-based and accessible to the public/residents in order to build sense of ownership.
- Bridge the generation gap and build social connection in the community.
- Focus on relational over transactional processes.
- Public/private partnership (P3) may be restrictive with regards to options for the site's layout.
- Be careful about the level of density developed around new site.
- Keep the site clean and green – beautify the area.

QUESTIONS

- How can the hospital be a “good neighbour”?
- How do we build a sustainable site/campus/system?
- How do we build the community's sense of ownership at the new site?
- How much control will we have on the design of a P3 structure?
- Will the site be opened up to other providers, such as specialized services in the DTES?
- Will there be an intention to partner with community agencies?
- Will employees be encouraged to use transit, bike or walk to work?
- How can we trust this plan over the next six years (with so many changes happening in our city)?
- Who is watching the budget and where is the money coming from to fund this project?

HEALTH SERVICES AT FUTURE SITE

- Current site is very cluttered, so important to avoid this at future site.
- Focus on integration of primary and community care.
- Consider the continuum of care and integration between acute and community, especially elder care
- Incorporate and enhance public/patient education.
- Embed preventative health care and wellness e.g. resource/reading centre open to the public, gardens.
- Provide access to low-cost, nutritious food. Provide education and demonstrations on nutrition and healthy eating habits.
- Provide access and navigation support to enable people to know about available services and be able to connect to them. Provide education on health related topics.
- Create community by designing public spaces on the campus that are welcoming and accessible to people across the spectrum of mobility.
- New hospital not just about physical relocation. It's an opportunity for transforming the way health care is delivered.
- Consider what the care of the future looks like – improve physical proximity to services to improve health care.
- Incorporate traditional First Nations healing practices and medicine, such as sacred spaces and sweat lodge.

- Focus on improvement in practice and strengthen partnerships now so as to have this established when move to new site occurs.
- Need services for new Canadians.
- Provide an area for non-critical care in emergency (i.e. for the walking wounded), like an urgent care centre.
- Detox facilities should move to new site.

QUESTIONS

- Will the services be the same or expanded? Which services will be kept or eliminated?
- Is there a plan to establish an ambulance station at new site?
- Will there be palliative/hospice care?
- Will there be transitional or convalescent care?
- What new technology will be considered and incorporated?
- How can we continue to optimize efficiency and get the best return on investment?
- How can we share health care expertise using technology like remote services (i.e. telehealth)?
- Is PHC's residential care redevelopment being planned in coordination with St. Paul's redevelopment?
- Will there be a plan to incorporate non-clinical spaces that focus on health and well-being? Will spirituality and social interaction be planned for and implemented?
- Will detox facilities still be at SPH?

TRANSIT AND ACCESS TO NEW SITE

- There is limited public transit access to SkyTrain from West End to the new site.
- Not enough buses (currently only small shuttle buses) to get to new site and they are not easily accessible for seniors.
- Cooperation between City of Vancouver and TransLink is needed to create better public transit access, including:
 - ensuring as few transfers as possible
 - connecting the West End and the Eastside to the new site
 - providing longer distance express buses to the new site to accommodate patients/families who need to get to the hospital from surrounding municipalities
- Widen Terminal Avenue for better access to the hospital and improved traffic flow in the area.
- Provide multiple routes to hospital.
- Create a helipad.
- The area around the Station St. site is not currently pedestrian or cyclist-friendly and needs:
 - better lighting, better visibility
 - cameras to improve safety
 - infrastructure and design catered towards accessibility for all ages
- Provide more public washrooms.
- Main and Terminal area is quite challenging for pedestrians and cyclists, need to consider:
 - intersection scramble (though can be challenge for visually impaired)
 - timing of walk signals
- Create easy access for paramedics to enter/exit site.
- Concern about increase in traffic congestion to Main/Terminal area.

- Parking could be an issue.
- Concern about increased traffic caused by traffic, trucks (supplies), ambulances and bus traffic in an area of high pedestrian use with schools, soccer fields, patients walking.
- Expand water taxi access to close to new site.
- Integrate roads with the area, to ensure safe access, flow with community. Make them permeable, attractive.
- Create well-defined access points to the new site.
- Provide public bike share and carshare options for staff and public.
- Provide electric car plug-ins in hospital parking.
- Concern with access to new site in an earthquake or flood.
- Concern of increased cost of having to take taxis from West End.
- Limited HandyDART services.

QUESTIONS

- How do we increase/improve transit use for staff?
- What will be the impact of viaducts being torn down for ambulance access or access to the new site by West End residents?

NEXT STEPS

This feedback will be used to support discussion at the next set of forums where we will ask participants to provide feedback on the topics of health care services that will remain in the community as well as the need for emergent or urgent care in the West End and Downtown area.

The next Eastside neighbourhood forums will take place Wednesday, March 9, from 6:30 p.m. to 8:30 p.m. at Creekside Community Centre, 1 Athletes Way and Thursday, March 10, from 10:00 a.m. to 12:00 p.m. at Carnegie Community Centre, 401 Main St, Vancouver, B.C.

In addition to the community forums, there are many ways to share input and inform the clinical planning process for the new St. Paul's, including:

- Taking an online survey (closes March 11)
- Answering a short question of the week
- Scheduling a one-on-one meeting or interview (for community groups/external stakeholders)
- Sending a question or comment by email

For the latest news and updates on the new St. Paul's, and ways you can get involved in the planning process, please visit: thenewstpauls.ca

Prepared by:

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Vancouver Coastal Health Community Engagement



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