South Niagara Hospital
Visioning Report

September, 2019

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In November 2018, Niagara Health initiated the Visioning Report for the new South Niagara Hospital. This Visioning Report lays the foundation for the physical development of this new hospital and provides direction to additional studies and guideline documents.

A thoughtfully crafted vision with the support and inclusion of a broad spectrum of stakeholders positions Niagara Health as a continued leader in health care while creating synergies with the Strategic Plan and other previously completed studies.

The Visioning Report is structured in three parts:

Part A - Understand and Analyze;

Part B- Synthesis: Design Program; and

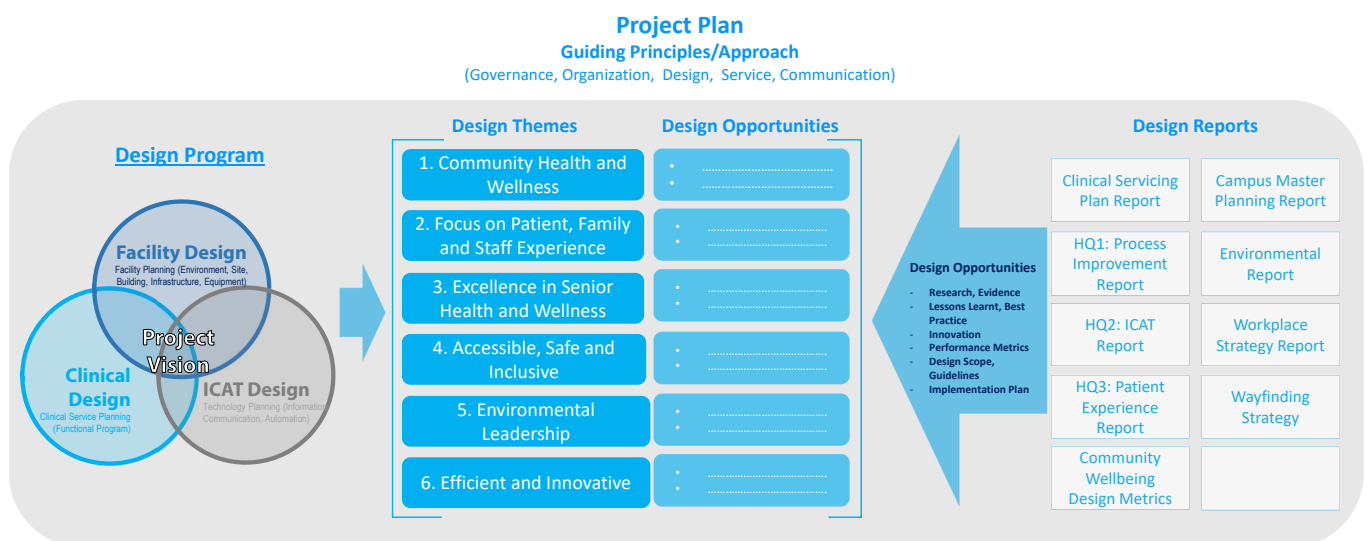**Part C - Make: Next Steps and Implementation**.

Part A of the Visioning Report outlines the project and hospital background, as well as relevant municipal policies. Further, it provides an introduction to the Community Wellbeing Framework (CWF), its relevance applicability for healthcare and outlines an approach through which the CWF would be used in the visioning

process. A brief summary of engagement activities provides an overview of discussion and key emerging themes for the project.

Part B is where a real synthesis of ideas and concepts takes place. Chapter 4 of this section present the Project Vision; structured through the five domains of the CWF, several design themes are articulated. Informed by feedback from stakeholder on CWF metrics, Chapter 5 presents 'made in Niagara' design metric.

Part C provides direction on implementation and includes a recommendation on further studies under the various design themes.

In conclusion, the present Visioning Report is part of a ongoing understanding of the Project Plan for South Niagara Hospital. The Design Vision statement included in this Visioning Report will assist in articulating a overall Project Vision for the hospital, work done under the ICAT Design will be a important keystone in the final Project Vision. The Design Themes identified under the Visioning Report are foundational and will continue to inform additional work (identified as Design Opportunities) and associated Design Reports.

Project Plan
Guiding Principles/Approach
(Governance, Organization, Design, Service, Communication)

Design Program

Facility Design
Facility Planning (Environment, Site, Building, Infrastructure, Equipment)

Project Vision

Clinical Design
Clinical Service Planning (Functional Program)

ICAT Design
Technology Planning (Information, Communication, Automation)

Design Themes
1. Community Health and Wellness
2. Focus on Patient, Family and Staff Experience
3. Excellence in Senior Health and Wellness
4. Accessible, Safe and Inclusive
5. Environmental Leadership
6. Efficient and Innovative

Design Opportunities

Design Opportunities
- Research, Evidence
- Lessons Learnt, Best Practice
- Innovation
- Performance Metrics
- Design Scope, Guidelines
- Implementation Plan

Design Reports

Clinical Servicing Plan Report

Campus Master Planning Report

HQ1: Process Improvement Report

Environmental Report

HQ2: ICAT Report

Workplace Strategy Report

HQ3: Patient Experience Report

Wayfinding Strategy

Community Wellbeing Design Metrics

TABLE OF CONTENTS

PART A:
UNDERSTAND
AND ANALYZE

1.0// UNDERSTANDING

1.1 HOSPITAL BACKGROUND

1.1.1 Niagara Health System

Niagara Health (NH) is a regional healthcare provider with multiple sites and a growing network of community-based services that provides healthcare services to more than 450,000 residents across 12 Regional Municipalities of Niagara. Formed with the amalgamation of eight hospitals in the year 2000, and subsequent direction by the Province in 2004, NH is the sole provider of acute inpatient care for most of Niagara and is spread over five sites. The NH sites of Douglas Memorial, Greater Niagara General, Port Colborne, Welland, and the newly built St. Catherine site, together employs 4,800 employees, 600 physicians, and 850 volunteers. NH services are spread across these sites and, through a growing network of community-based services, provide healthcare to communities with unique geographies and identities, unlike any other in the province.

As NH continues to add services and capacity and improve operations, it strives to maintain its leadership in the community by working with existing community and education partners but also by cultivating new relationships to serve patients and the community better. These relationships not only support the undertaking of new initiatives and innovations but also continue to shape NH as a valued community partner and healthcare provider in the Region of Niagara.

1.1.2 Imagining a Healthier Niagara Strategic Plan 2016-2026

In 2014, NH embarked on a path to identify a strategic direction for its future. Adopted in 2016, the Niagara Strategic Plan identifies the purpose, vision, values and areas of focus for Niagara Health System for the next ten year. Arrived with the assistance of a robust community engagement effort with about a hundred sessions and numerous interactions with internal and external stakeholders, the Strategic Plan identifies 'A Healthier Niagara' as its overarching mission statement. The Strategic Plan identifies four areas of focus, which are illustrated by:

1. **Extraordinary Care**: Focus on the highest level of quality care by advancing a culture of safety and service excellence. Directions include ingraining a culture of patient safety and eliminating preventable harm.

2. **Extraordinary Team**s: Focus on providing support and opportunity to teams to continually learn and improve. Directions include developing future and emerging leaders and collaborative teams.

3. **Extraordinary Future**: Focus on investing in people, equipment and technology and working strategically in the community. Directions include supporting the physical and mental health of the community, enhancing systems for safely sharing health information, investment in care/research/education, using resources wisely and supporting future needs of the communities it services.

4. **Extraordinary Innovation**: Focus on trying new ways to deliver the best care. Directions include partnerships with patients, primary and community care providers, and provide integrated and comprehensive care.

Our **CORE** Niagara Health values are:

Compassion in Action

Our compassionate and respectful culture is one in which we quickly take action to meet the needs of those we serve and to make healthcare better. We treat each other well.

Driven by Optimism

We are hopeful and optimistic in tackling our challenges. In partnership we accomplish more. We are resilient through change and drive innovation.

Achieving Ambitious Results

We hold ourselves to the highest standards. We are accountable for high-performing, high-quality, sustainable and innovative healthcare. We are transparent about performance and commit to improve.

1.2 PROJECT BACKGROUND

1.2.1 South Niagara Hospital

NH is proposing a new South Niagara Hospital project: a new greenfield hospital that will consolidate and rationalize services from four older facilities located in Niagara Falls, Port Colbourne, Welland, and Fort Erie. The new hospital will not only serve the current residents of the Region, but also the future residents as the Region's communities continue to grow and flourish.
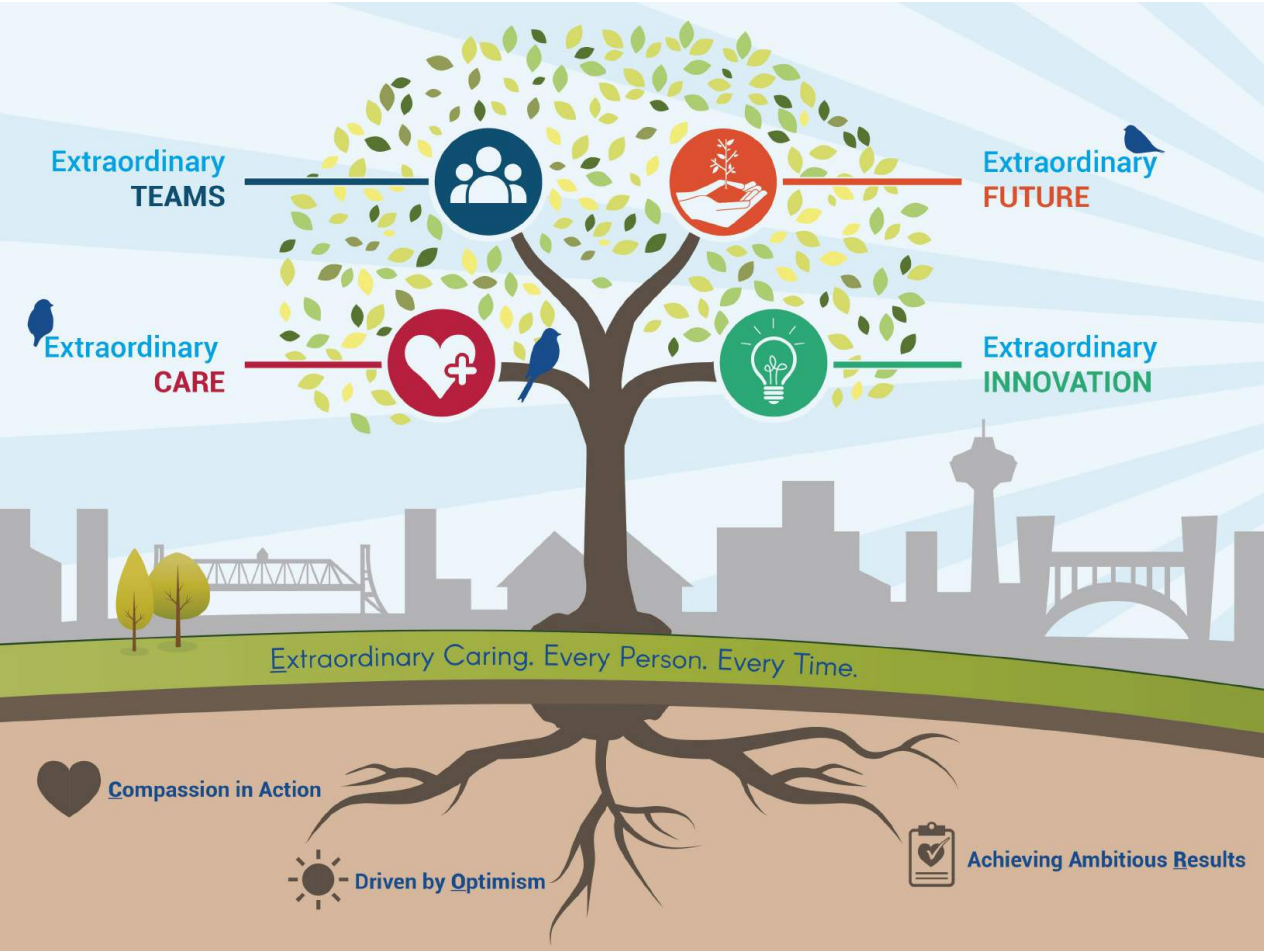
The new South Niagara Hospital's 49.8 acres site is located at the intersection of Biggar Road and Montrose Road in Niagara Falls. The new hospital will be a full acute care hospital, with emergency, diagnostic, and therapeutic services, surgical services, as well as medical, surgical and intensive care inpatient beds. It will also provide ambulatory services as well as post-acute Complex Continuing Care (CCC) inpatient services. A full complement of non-clinical support services will also be provided.

1.2.2 MoHLTC Stage 1 Proposal and Stage 2 Functional Program

In 2015, NH issued Stage 1A to the Ministry of Health and Long Term Care for review and Stage 1B in early 2016, with Stage 2 following in the winter of 2016. During discussions with the MoHLTC, NH revised the Stage 1 and Stage 2 submissions to reflect outcomes of discussions. The revised Stage 1 and Stage 2 submissions were submitted for review in 2018 and in 2019 for review and approval to the MoHLTC.

1.2.3 Clinical Servicing Plan (2015)

The Clinical Vision Plan process aligns the Plan with the strategic focus of the Ministry of Health and Long-Term Care (MOHLTC) and the Hamilton Niagara Haldimand Brand (HNHB) Local Health Integration Network (LHIN) and meets legislative and statutory requirements.

The process of the NHS Clinical Servicing Plan began in 2014 with the defined objective "to develop a plan in order to meet the future healthcare needs for the residents of Niagara." The opportunities identified in the Plan went further to seek alignment of efforts and outcomes with leading best practices and developing an implementation plan. Based on interaction with internal and external stakeholders, five areas of focus were identified, which form the basis of the Clinical Servicing Plan adopted by NH in 2015:

• Health for Seniors and an Elder-Friendly System;

• Health, Wellness and a Definition of Community Care;

• True Acute Hospital of the Future;

• Complex Care and Rehabilitation; and

• Exceptional Patient Experience.

1.2.4 South Niagara Visioning

In 2018, NH issued an RFP for South Niagara Visioning Consultancy Services to develop a Design Program for the new South Niagara Hospital through an interactive process, which would involve wide engagement with internal and external stakeholders. The intent of this exercise is described below:

Develop a Design Program for the new the South Niagara Hospital, one that is robust and gives clear and measurable guidance to inform design process, and future development of the hospital and its immediate context.

1.3 INFORMING DESIGN – THE COMMUNITY WELLBEING FRAMEWORK AND RESEARCH BACKGROUND

Actions which have the potential to impact the quality of life in the long-term are becoming increasingly important to decision-makers. There is a growing body of knowledge that seeks to influence and inform decisions, which impact the wellbeing of a community. In the context of the built environment, the design of spaces and places plays a key role in promoting physical and mental wellbeing, and this is gaining increased traction with practitioners and decision makers who influence built environments.

In 2018, DIALOG and the Conference Board of Canada collaborated on a path-breaking research initiative to develop a framework for defining and evaluating the built environment's contributions to community wellbeing, as well as to demonstrate that investments in wellbeing are beneficial for everyone. A comprehensive literary review, coupled with multiple case studies and interviews grounded the development of the Community

Wellbeing domains, indicators, and metrics. DIALOG and the Conference Board of Canada also engaged design and health industry leaders such as the Public Health Agency of Canada, the Design Industry Advisory Committee, the Association of Local Public Health Agencies, the Centre for Interdisciplinary Research in Rehabilitation and Social Integration, Laval University, and various Medical Officers to provide input and feedback.

The process of developing the Framework was robust and thorough. As a result, it is a research-based design tool that strategically hosts the creation, implementation, monitoring and evaluation of projects. The Community Wellbeing Framework identifies essential domains of wellbeing. The five domains: Social, Environmental, Economic, Cultural, and Political, form the structure of the framework, and eighteen indicators and associated metrics further define the quantifiable aspects of the framework.

The key aspects of the research methods and process included the following:

- Building on existing literature and frameworks in the fields of wellness and design;

- Taking on a qualitative approach that is defined by exploratory, descriptive, and explanatory research methodologies to respond to a subject matter that is in and of itself subjective and of a qualitative nature;

- Incorporating in the process input from a broad range of perspectives through consultations – including those of designers, clients, stakeholders, sub-consultants, political and community leaders and the public at large;

- Employing an iterative process to develop the Framework, whereby new data collected from one method was verified with and informed by another method, and concepts further vetted with experts in the field; and

- Testing through the application of built projects as case studies.

1.3.1 Wellbeing for the Healthcare Sector

The Community Wellbeing Framework report recognizes that there is an established body of literature that examines the relationship between the design of a healing environment and its impact on the physical and mental wellbeing of patients, caregivers, family members and staff. Concerning patients, the physical design of the place can lower stress, reduce blood pressure, and reduce post-operative hospital stay. Patient access to external areas, clear navigation and signage, privacy and views to nature, all contribute to enhanced healing and recovery.

Taking on a wellbeing approach also has substantial benefits for staff. Support systems such as day-cares, respite areas, access to daylight and views to nature are known to lead to job satisfaction and staff retention and can help attract new talent. For caregivers and family members, hospitals can be extremely stressful environments. Access to healthy food, spaces for grieving or celebrating, multi-faith rooms, and other amenities can have a positive impact as they care for patients.

### 1.3.2 South Niagara Visioning and The Community Wellbeing Framework

The Community Wellbeing Framework (CWF) structured the visioning process for the new South Niagara Hospital. The process builds on the work done to date, which includes the 2015 Clinical Services Plan and the 2017 Strategic Plan for NH. The visioning process used key ideas from these documents to inform the background of discussion with internal and external stakeholders.

The key ideas on staff support systems, preventative care, hospital of the future, patient and staff experience, amongst others were widely discussed and were contributory in informing the design Vision and Themes. The CWF was instrumental in structuring these initial discussions through a lens of wellbeing. Part 2 of this Visioning Report provides further detail on the process and outcomes.

In brief, the resulting design Vision and Themes are a result of a synergistic relation between past work and evidence-based research offered by the CWF. In the end, the process offers a "made in Niagara" design Vision, associated Themes, recommendations for next steps, and a tailor-made metric as part of the CWF included in chapter 5 of this Visioning Report.

2.0 // ANALYSIS

This section of the Visioning Report identifies current conditions of the site, including policy direction contained in various regulatory and statutory plans. It also provides an insight into the future land use planning for the area which is provided by the Grand Niagara Secondary Plan. The section ends by highlighting potential synergistic opportunities for the future design of the hospital.
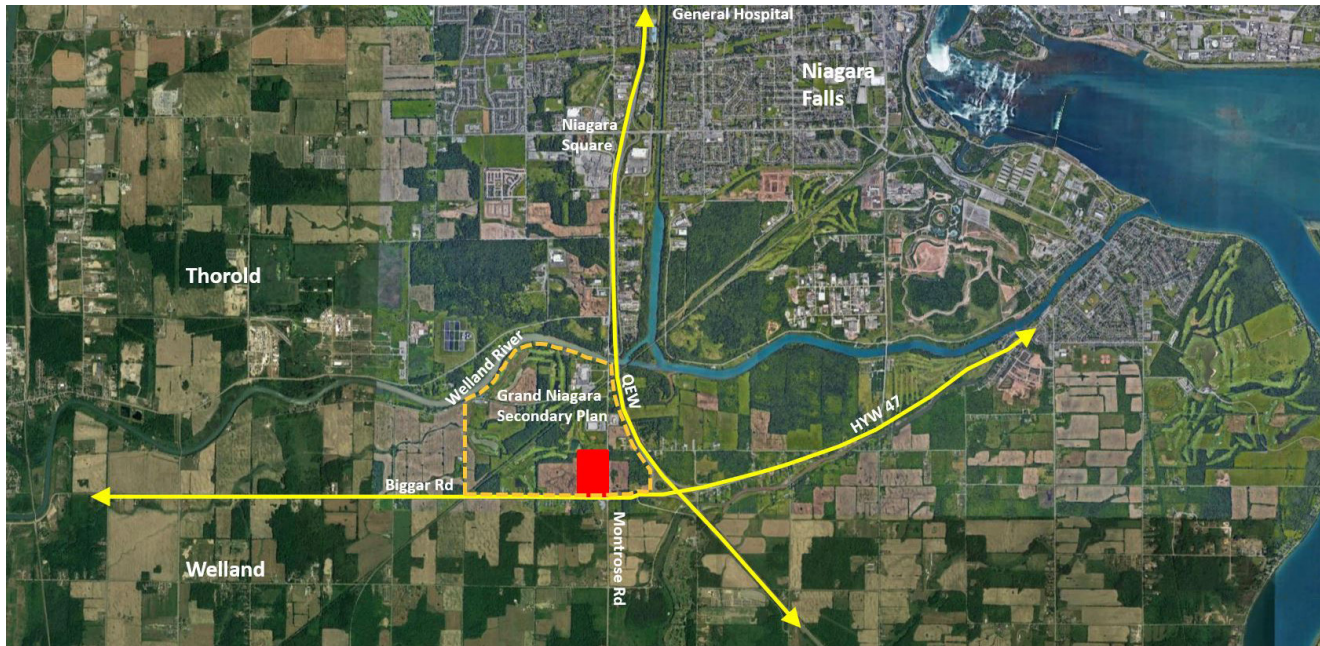
Niagara South Hospital Context Map (Hospital site highlighted in red)

2.1 THE STUDY SITE – EXISTING CONDITIONS

2.1.1 Site Location and Context

The development site for the new hospital is located about 8km southeast from Niagara Falls downtown and about 7km from the southern edge of the city. The land parcel is on the northeast corner of Biggar Road (regional Highway 47) and Montrose Road, running parallel to and just east of the QEW and site occupies a component of a larger clearing that as shown in the map, extending both westward and eastward.

The Grand Niagara Golf Course extends across the northern boundary, and the southern side hosts a few large private residential lots and a Hungarian Hall, alongside a large forested area. The wider immediate context is dominated by forests, parklands and farmlands, with the Welland River running in an east-west direction about 1.5km north of the site, feeding into the larger Niagara River system.

The site lies within the current land use designation of the Industrial Area of the City's Official Plan with a few light industrial and office sites located along Montrose Road. The Niagara Square – a retail mall and transit hub 4km north of the site – is the closest site with amenities, including stores, food

services and a cinema, amongst others. Several destination points such as the Niagara Falls Art Gallery, YMCA, Niagara Children's Museum, a Camp Resort, and the Heartland Forest Nature Experience are located within driving distances.

The wider context offers additional destinations, including many beautiful walking trails and natural features such as the Niagara Falls themselves and a number of smaller water falls throughout the Region.

2.1.2 Site Access

At present, private vehicle mode provides the easiest access to the site via Biggar Road or Montrose Road, with a nearby exit from QEW, which provides regional access to the site. Regional bus routes 60/65 and 22 run along Montrose Road - the former connects downtown Niagara Falls with Welland, and the latter connects from Niagara Square to Fort Erie. The regular transit journey into the centre of Niagara Falls would take approximately 50 minutes. The limited frequency of transit service is described by stakeholders as a barrier to transit use.

Connections to the site through walking and cycling are limited to unofficial paths and roadways. Several recreational cycling and walking trails in the greater Region however, provide future opportunities to improve connectivity and access to the site in a safer manner.

Zoom-in of the Niagara Region Cycling Trails Map
The yellow wedges highlight an approximate 10-minute cycling distance from the hospital site.

Zoom-in of the Niagara Region Transit (NRT) Route Map.
The small yellow circle highlights a 10-minute walking radius around the hospital site. The larger yellow wedge outlines an area reaching the centre of Niagara Falls downtown, from where the journey would be about 45-60 minutes.

2.2 POLICY CONTEXT

Within the context of the site and its immediate surrounding, this section of the report will highlight planning and policy direction, without prejudice, contained in the City of Niagara Official Plan, Grand Niagara Secondary Plan and relevant policies from the Niagara Escarpment Conservation Lands. For the purpose of municipal applications or subsequent design and planning work, the original policies should be considered in full. This section intends to highlight information contained in the mentioned documents to inform the work herein contained, including edits to the associated Metrics of the Community Wellbeing Framework. If required, a detailed conformity and alignment exercise of site and area-specific policies contained in the Provincial Policy Statement 2014, City of Niagara Official Plan, and other relevant documents should be done at the development approval and site plan approval stages of the project.
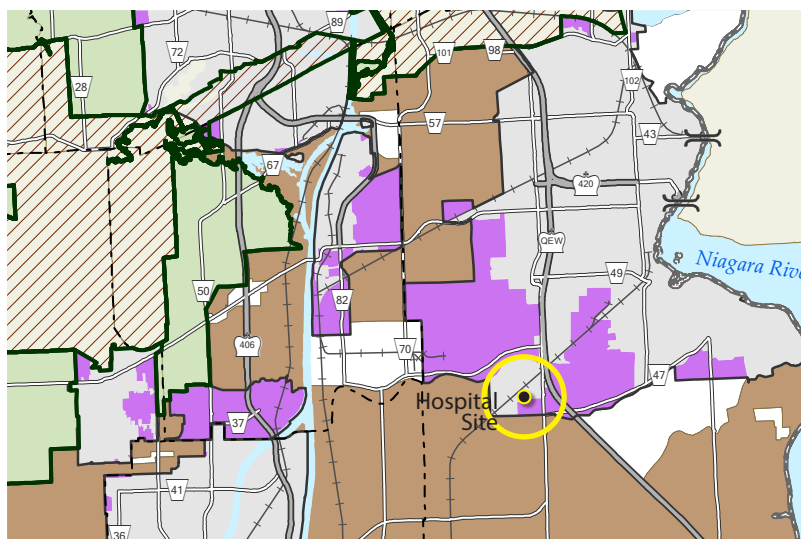
2.2.1 Niagara Regional Official Plan

The Regional Official Plan (ROP) is the long-range, community planning document that guides the physical, economic, and social development of the Niagara Region.

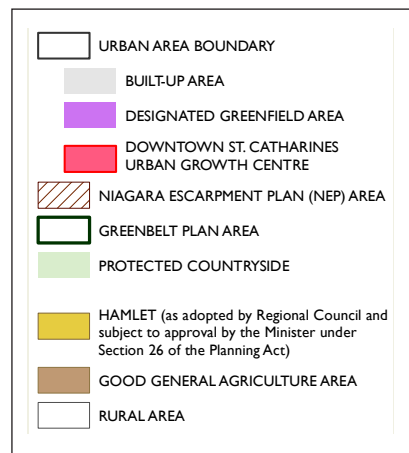The ROP contains objectives, policies and mapping that implement the Region's approach to managing growth, growing the economy, protecting the natural environment, resources and agricultural land and providing infrastructure. The ROP must also implement provincial policies and plans. Schedules G and G1 of the ROP identify the site for the South Niagara Hospital as a "Gateway Economic Zone" and as "Employment Land," respectively.

2.2.2 City of Niagara Official Plan

The South Niagara Hospital site lands are designated as "Industrial" use (Schedule A) and as part of the "QEW Employment Corridor" (Schedule A2) in the City of Niagara Falls Official Plan (OP). The QEW Employment Corridor marks the southern gateway into the urban area of the City and is envisioned to play a major role in the implementation of the GGH's (Greater Golden Horseshoe) Gateway Economic Zone. The overarching goal of the QEW Employment Corridor policies is to add to the overall diversity of employment in the City. Notwithstanding the intent of the policies to retain employment uses, the section 8.8.3 of the QEW Employment Corridor policy allows office and large-scale institutional uses that require QEW access.

Zoom-in of *Schedule A - Regional Structure Map* from the Official Plan (legend below).

URBAN AREA BOUNDARY

BUILT-UP AREA

DESIGNATED GREENFIELD AREA

DOWNTOWN ST. CATHARINES URBAN GROWTH CENTRE

NIAGARA ESCARPMENT PLAN (NEP) AREA

GREENBELT PLAN AREA

PROTECTED COUNTRYSIDE

HAMLET (as adopted by Regional Council and subject to approval by the Minister under Section 26 of the Planning Act)

GOOD GENERAL AGRICULTURE AREA

RURAL AREA

Schedule C – Major Roads Plan - identifies Biggar Road and Montrose Road as "Arterial Roads" and Grassy Brook Road and Crowland Avenue are identified as "Collectors." Under the Collector and Local Road Network Sub-Section 1.5.34, the Official Plan identifies a 26m proposed ROW for Biggar Road from the section of the road from the western city limit to Montrose Road, and a 26.2m proposed ROW for Montrose Road for the section of the road

from Welland River to the southern city limit. The Official Plan allows for transit routes with bus lay-bys and shelters and bicycle facilities such as bike lanes, shared use lanes and paved shoulders on the City's arterial roads.
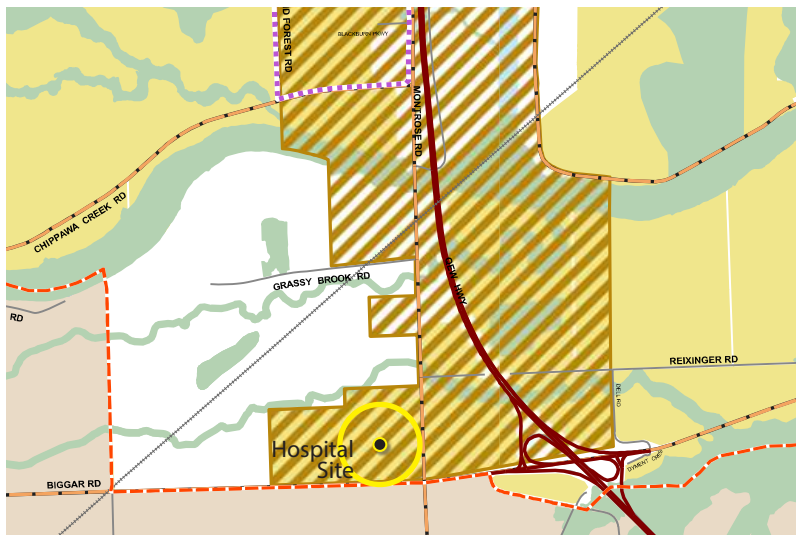
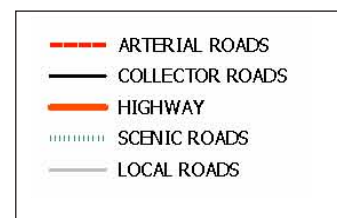**Zoom-in of** *Schedule A2 - Urban Structure Plan,* **from the Official Plan** (legend below).
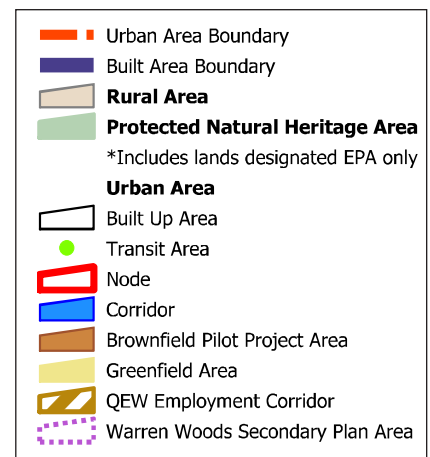
Zoom-in of *Schedule C - Major Roads Plan,* **from the Official Plan** (legend below).

2.2.3 Grand Niagara Secondary Plan

The City of Niagara Falls approved the Grand Niagara Secondary Plan in 2017, which provides direction on the future development of the lands within its limits. The boundary of the Plan includes the proposed hospital site. Based on the principles of building complete communities, the Secondary Plan envisions the area as a mix of residential, commercial and hospital-based uses.

The Grand Niagara Secondary Plan re-designated the proposed hospital lands from their current industrial designation to "Hospital Employment Campus." Section 5.2 of the Secondary Plan states:

"The Hospital Employment Campus Designation is intended to apply to lands adjacent to the proposed hospital that are not part of the Provincial planning review exercise. For lands not required for the hospital, as determined through the Provincial planning review exercise, and when the details of the

Provincial planning review exercise are known, the following Hospital Employment Campus Designation applies."

Notwithstanding the intention of the Official Plan, the Grand Niagara Secondary Plan states "where there is a conflict between the principles, objectives, and policies of this [Grand Niagara] Secondary Plan and the Official Plan, the principles, objectives, and policies of this Secondary Plan shall prevail. "

The Hospital Employment Campus designation builds on the proposed proximity of the new hospital to suggest a range of potential primary and associated uses to surrounding employment uses and the community at large. It identifies the area northwest of Biggar Road and Montrose Road as an area for medical services and research in the Region. The Secondary Plan identifies the following permitted uses:

- Major large-scale institutional uses, medical clinics, laboratories, office, retail, and small-scale commercial uses that serve or support the
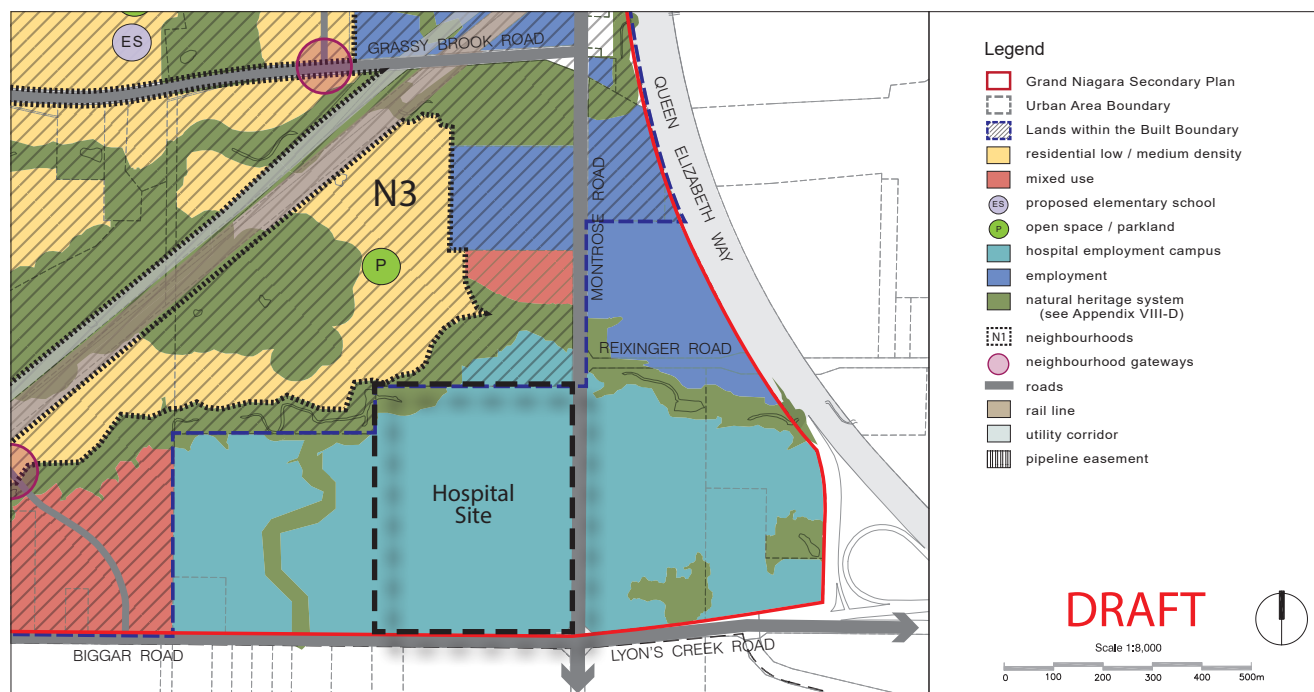
Zoom-in of *Grand Niagara Secondary Plan Schedule A-4 to the Official Plan Land Use* (May 2017)

hospital function;

- Prestige industrial uses including research, innovation, and development facilities, and business and administrative office buildings;

- Community infrastructure including indoor recreation facilities and fire and emergency services;

- Hotels, restaurants; and

- Residential uses in the form of townhouses, apartments, retirement and long-term care facilities, that provide affordable housing options for seniors and special needs groups.

Furthermore, the Secondary Plan provides direction on transit, active transportation and urban design. The Secondary Plan states that the Hospital Employment Campus lands are to be well serviced by public transit and well connected to active transportation facilities. The Secondary plan requires that all new development within the Hospital Employment Campus designation shall be consistent with the Urban Design Guidelines included in Appendix A to the Secondary Plan.

3.0// ENGAGEMENT PROCESS

A central goal of the development of the South Niagara Visioning exercise was to engage with Niagara Health's internal and external communities at every milestone in the project process, eliciting the opinions and feedback that would constitute a robust Vision. Presented on the following pages is a summary of all key engagement events, including information on: the strength of participation, attendees represented, the main objectives and the takeaways, which were then used by the Consultant Team to craft further work.

Objectives of the engagement strategy included

- Providing open and transparent lines of communication;

- Updating NH staff and NH Board of Directors (BOD) on the status of the project as it developed;

- Presenting the emerging design Vision and Emerging Themes and seeking feedback;

- Soliciting input and feedback from the Development Project Team;

- Working collaboratively with stakeholders to craft a 'made in Niagara' version of the Community Wellbeing Framework (CWF) Metrics; and

- Presenting back how previous feedback and input has been incorporated into the CWF metrics and implementation recommendations.

An important part of the Visioning process were report-backs to the Niagara Health Executive Leadership Team, through the Project Redevelopment Team. The Niagara Health Board of Directors were also presented with report-backs at each key stage of the project.

STAGE 1 PROJECT RECONNAISSANCE

KICK-OFF WITH THE NIAGARA HEALTH BOARD OF DIRECTORS

November 22, 2018
Information session

ATTENDANCE:
- Members of NH Board of Directors and NH Executive Team

OBJECTIVES:
- Present the Community Wellbeing Framework to the NH Board and Executive Leadership Team; and
- Attend the NH Board ideas session to record some of the key challenges and opportunities identified by the group.

STAKEHOLDER INTERVIEWS

December 4, 2018
All-day event of one-hour interviews with focus groups

ATTENDANCE:
- 52 attendees at St. Catherine and Greater Niagara General Hospital]: NH Staff and physicians

OBJECTIVES:
- Contextualize the project by introducing the CWF;
- Introduce the project and process to attendees; and
- Seek candid input on initial 'big picture' ideas, hopes and concerns.

STAGE 1 OUTCOMES:
Initial feedback on 'big picture' ideas. Key emerging ideas were captured through initial engagements events and were taken to a wider stakeholder audience in the Stakeholder Workshop 1.

STAGE 2 DEVELOPING THE DESIGN VISION

STAKEHOLDER WORKSHOP 1 + PUBLIC POP-UP EVENTS

January 18, 2019
Working session and interactive panel display

ATTENDANCE:
- 65 attendees at the workshop [at Welland County General Hospital]: NH staff, physicians, Brock students and Niagara College students
- Avg. 15-20 attendees at each pop-up [at Welland, Niagara Falls and Fort Erie locations]: NH staff, visitors and patients

OBJECTIVES:
- Introduce the project and the CWF;
- Develop ideas towards a draft Design Vision; and
- Identify design opportunities using the five Domains of the CWF and associated Indicators as a reference.
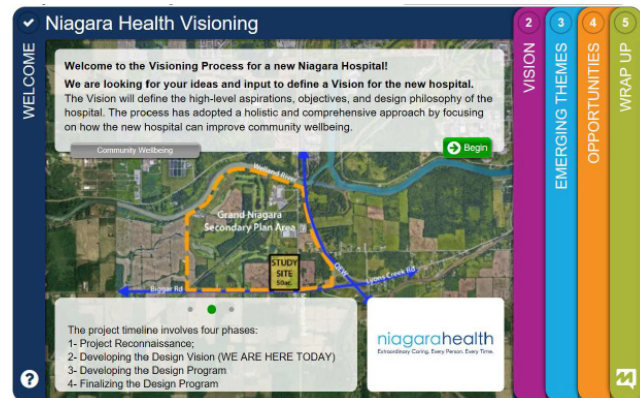
ONLINE SURVEY

February - March, 2019
Online MetroQuest survey

ATTENDANCE:
- 503 participants: NH staff and physicians

OBJECTIVES:
- Introduce the project and the CWF to the wider NH community of staff and physicians;
- Seek feedback on project Design Vision and emerging Themes, prioritize CWF indicators; and
- Seek general information about participants.

STAGE 2 OUTCOMES:
Feedback on Emerging Themes, identifying design opportunities related to the CWF Domains in the context of the South Niagara Hospital. Sharing of information with a wider NH community through online engagement.

STAGE 3   DEVELOPING THE DESIGN PROGRAM

STAKEHOLDER WORKSHOP 2

April 8, 2019
Interactive working session

ATTENDANCE:
- 110 attendees [in Niagara Falls]: NH staff and physicians, EMS, staff from the City of Niagara Falls and Niagara Region, March of Dimes, Indigenous partners, Brock students, Infrastructure Ontario, Hotel Dieu Shaver, Hospice Niagara and LHIN

OBJECTIVES:
- Introduce the draft Design Vision Statement and draft Design Themes;
- Review and affirm project direction with respect to the Design Vision and Design Themes;
- Provide an opportunity to stakeholder to identify any other key opportunities that might have been missed; and
- Review the Design Program draft Metrics and provide an opportunity for stakeholders to edit, strike-out or retain each metric.

STAGE 3 OUTCOMES:
Consensus on the Design Vision Statement and Design Themes, and an edited and refined version of 'made in Niagara' Design Metrics.

PART B:
SYNTHESIS.
DESIGN
PROGRAM

4.0// DESIGN VISION STATEMENT AND DESIGN THEMES

Part B of this Visioning Report captures conversations that took place through the engagement period of the project. These conversations informed by the Community Wellbeing Framework were held with internal and external stakeholder. Report back to the Project Redevelopment Team, Executive Leadership, Niagara Health Board of Directors, feedback from the engagement process, and subsequent iterations have shaped the outcome of Chapter 4 of the Visioning Report. This section put forward a Design Vision Statement, a set of Design Themes which aim to inform the future planning and design of South Niagara Hospital.

The Design Vision statement is an encompassing declaration by the Niagara Health community that synthesis their hopes and expressions. It centers around the overarching commitment to contribute towards the wellbeing of the communities it serves, and deep regard for its natural setting.

The idea of a welcoming, supporting, accessible to all campus acknowledges the need for the hospital to be sensitive and accommodating to its users - patients, families and staff. Continuum of care is seen as a critical component of the Design Vision as the hospital not only guides and tracks patients through array health services over some time but also contributes to prevention and recovery. Last but not least, the hospital needs to be an inspiring place to work with the ability to attract the best talent to its unique environment. An environment which contributes positively to healing and recovery for all who seek care within its setting.

The Design Themes further elaborate on the ideas expressed through the Design Vision which are synthesized into six themes covering - community health and wellness; patient, family and staff experience; senior health and wellness; an accessible, inclusive and safe environment; environmental leadership; and efficient and innovative hospital. The Design Themes section

provides an overview of the conversations which help craft that particular theme, and highlights some of the key suggestions which were brought forward by different stakeholders.

Supporting the Design Vision and Design Theme is Chapter 5 of this Visioning Report, a 'made in Niagara' version of the Community Wellbeing Framework.

4.1 DESIGN VISION STATEMENT

*"South Niagara Hospital will be a **welcoming** and **supportive** community health campus which is **accessible to all**. It will be **integrated** to provide a **continuum of care**, offer an **inspiring** place of work, and a supporting environment for **healing**. It will contribute to the **wellbeing** of its community and its natural setting."*

1 *Community Health and Wellness*

A campus that is more than a hospital: a place for prevention, healing, and recovery.

While we are good at treating people when they are sick, we are not great at catching the cause of illness upstream twenty years earlier. How does a hospital become a place of prevention, healing and recovery for the communities it services and for staff, patients, and caregivers who visit it? Which aspects of the building and campus design can we influence to have a positive impact on our wellbeing? These questions inform the first design theme of the Visioning process. As the stakeholders searched for answers, a robust, achievable and innovative idea of community health and wellness emerged.

What we heard!

- Create a healing environment: bright, connected to green, with a gym, healthy food options, etc.

- To support great treatment of health, focus more on prevention.

- Build partnerships! The hospital itself cannot provide everything.

- Collaborate with the City to provide community services within the proximity of the hospital

- Provide opportunities for education on-site: nutrition classes, art therapy, exercise, etc.

The Wellness Institute, Seven Oaks, Winnipeg, Manitoba

2 *Focus on Patient, Family & Staff Experience*

A hospital that focuses on user-experience and on fulfilling the needs of its community – patients, families, caregivers, staff, visitors, and neighbours.

Hospitals can be stressful environments for many who visit, patients and family members. Staff and physicians who spend many hours working are also affected by the built environment in which they operate. What constitutes a welcoming environment? Are there quite spaces, places for repose, celebration and at a time for grieving? Are there opportunities to build a sense of belonging and involvement? These questions and suggestions have informed this second theme with a focus on the experience of the community as people visit, stay and work at the hospital.

What we heard!

• Create a welcoming entrance and environment throughout.

• Create a diversity of spaces for different users: quiet spaces, interfaith rooms, social spaces, etc.

• Consider the specialized needs of each user: places for families, comfort for patients, etc.

• Provide amenities for staff, such as a daycare and showers facilities, others such as a gym, and cafeteria open to visitors, caregivers and staff.

• Provide visual access to the exterior as well as natural light.

Waiting Area, Memorial Sloan Kettering Josie Robertson Surgery Center, New York

3 *Excellence in Senior Health and Wellness*

A hospital the reflects Niagara's demographic and is sensitive to the needs of its aging population.

Work done under the Clinical Vision plan gives the Visioning project a robust overview of the demographic profile of Niagara's population. Further, it identifies clinical requirements that are needed. Through the engagement process, this project was able to reconfirm and validate those suggestions through a community wellbeing lens. Providing timely and reliable access to services and care for seniors will be important. At times care would be best accessed within the community, close to home. Identifying services and mechanism to provide a continuum of care to guide and tracks seniors over time through an array of health services is another crucial aspect of senior health and wellness.

What we heard!

- Design for geriatric care, considering the increasing aging population in the region.

- Suggestions for separate entrances, waiting areas, and gathering places for seniors.

- Develop a continuum of care for seniors.

- Provide reliable access to the hospital, through transit, and ride-share partnerships.

- Make it easy for seniors to get to the hospital, and conversely, bring care out to the community.

- Provide opportunities off-site for healing and wellness, closer to home.

- Provide access to nature for healing, repose and recovery.

Bridgepoint Health, Toronto, Ontario

4 Accessible, Safe and Inclusive

A hospital that is inviting and accessible to all – easy to get to and navigate throughout. A place where people feel safe and included, no matter their background.

Accessing services at a hospital needs to be safe and comfortable for all. People from all walks of life, different abilities, cultural backgrounds, identities, and economic backgrounds visit the hospital. Some might face difficulty in physically accessing the hospital, others might encounter stress in an unfamiliar surrounding, and for another language might be a barrier. How does the built environment acknowledge and respond to gender non-conforming identities? What are some indoor and outdoor settings which help build a sense of belonging?

What we heard!

- Incorporate principles of Universal Design, beyond Accessibility for Ontarians with Disabilities Act (AODA) standards.

- Build a partnership with the City and Region for transit connection and transit hub

- Incorporate territorial acknowledgment and consider all cultures in the hospital design.

- Remove the stigma of coming to the hospital and create a safe and inclusive environment.

- Give special consideration to mental health and dementia patient needs.

- Provide a range of indoor and outdoor spaces for patients, staff and family members.

Zaans Medical Center, Zanandam, Netherlands

5 *Environmental Leadership*

A hospital that is at the forefront of environmental conservation, resilience and climate change adaptation.

Hospitals can have a positive contributing impact on the wellbeing of the community and the environment. Ways to reduce energy use are increasingly being utilized by institutions such as hospitals. The site for South Niagara Hospital is based on the urban periphery, transit access, and transportation demand management strategies can reduce car-dependency. Strategies for sustainable procurement of commodities such as pharmaceuticals, medical instrument and food are being recognized to create environmental and health benefits(WHO) and are aspects which require additional thought and study.

What we heard!

• Strive for lower energy use and water consumption.

• Explore ways to reduce car dependency.

• Explore for sustainable procurement of health-care commodities.

• Reflect Niagara's ecology in the design of internal and external environments.

• Reduce waste and consider the life-cycle of all materials.

CLIMATE ACTION: Climate Change Playbook, noharm.org

6 *Efficient and Innovative*

A hospital that is a forerunner in operational efficiency, designed to work today and into the future.

What is the hospital of the future? While technology will drive innovation in clinical servers and efficiencies in back-office operations, patient and staff experience for wellbeing is also increasingly becoming important. Whereas some of the smart technologies will lead the way in patient care and quick response time by attending staff and physicians, the need for welcoming and healing environments are now equally important. Single-patients rooms, nurse substations, a hospital enabling a continuum of care, and a place embracing nature to heal and provide respite are few of the key ideas which are gaining traction as communities build new healthcare institutions.

What we heard!

- Utilize innovative technologies to simplify processes: high tech with high touch.

- Streamline physical connections to reduce wait times and for ease in navigation.

- High Tech with High Touch.

- Be a knowledge provider.

- Develop a clear and simple wayfinding strategy for easy navigation.

- Create a restorative environment to reduce healing time and hospital stay for patients.

Hvidovre Hospital – SafeBuzz Wayfinding, Copenhagen, Denmark

5.0// COMMUNITY WELLBEING FRAMEWORK

5.1 OVERVIEW

Aspects of wellbeing can be described within different spatial contexts—country, region, neighbourhood, or the specific community in which individuals live and work—and scales—ranging from smaller (i.e., neighbourhood, site, building, and building interiors) to larger (i.e., municipal and national).

A framework can be used to capture different aspects of wellbeing within the context of a defined community and for tracking changes over time. It can also be used to inform the aspects that impact wellbeing, including those of the built environment. The Community Wellbeing Framework was designed to be an open-ended guide for decision-making and examining the impact of the design of physical environments—

the subject matter of urban planners, architects, landscape architects, interior designers, and engineers—on the wellbeing of individuals and communities.

The Community Wellbeing Framework was instrumental in structuring conversations regarding the vision of the new South Niagara Hospital. Key ideas from previous work such as the Clinical Vision and Strategic Plan were drawn into the conversation. Using the domains and indicators of the framework early conversations and helped build the Design Vision and Design Themes through an iterative process in Stage I workshop.

5.2 DESIGN METRICS FOR SOUTH NIAGARA HOSPITAL

The CWF is designed to serve as a tool and resource for initiating conversations and making decisions that will positively impact community wellbeing. While the indicators define each domain of CWF, the associated metrics assist in assessing indicators.

During Stage II workshop, participants were asked to review, refine and edit the Design Metrics of the CWF. Updated version of the Design Vision and Design Themes served as a reference to guide the workshop process.

The outcome of the workshop was a set of Design Metrics which were contextual, well-informed, and applicable to the Niagara and the needs of the new South Niagara Hospital.

The following pages the Design Metrics for the South Niagara Hospital, organized within the Community Wellbeing Framework.

DOMAINS

INDICATORS

METRICS

Social Domain

Welcoming
Support
Systems
Socialization

The social domain comprises the social conditions that enable individuals and their communities to flourish and fulfill their potential. It speaks to the extent communities create opportunities for people to participate in community life and self-realization. The built environment both makes up the human-made surroundings that provide the setting for human activity, ranging from large-scale civic surroundings to personal places, and is also the result of social processes. These systems create important contexts in which health is shaped. Design features of built environments may connect and strengthen communities and enhance community health and wellbeing through their impact on social engagement, social support, and community safety. - The Community Wellbeing Framework

1. Welcoming

Do people feel welcomed, safe, and engaged, 24/7, regardless of background or physical ability?

METRICS

1A Project design, siting and orientation to provide direct physical and visual connections to the outdoors

  1: Frontages along public streets/spaces to be physically and/or visually permeable to support a welcoming environment (e.g., predominance of doors and windows facing public areas, while still respecting other objectives such as thermal performance and privacy)
  2: Project design and operations to recognize the needs of users during different times of the day and week

1B Public/common areas and points of entry to be located along main pedestrian routes and designed as special, community spaces

1C Lighting design and placement to be human-scaled, circadian, assist wayfinding along public/common areas, support a sense of safety, and be sympathetic to the surrounding environment

1D Project to work with stakeholders to identify context-specific safety challenges and mitigation strategies, and employed best practice CPTED (Crime Prevention Through Environmental Design) principles and other tools

1E In addition to meeting Accessibility for Ontarians with Disabilities Act - AODA (or equivalent) standards, project to work with stakeholders to identify project-specific vulnerable and/or challenged users and be designed accordingly

1F   Project to be designed to accommodate the needs of people of all ages, including children and seniors

1G   Project to be designed to be inclusive, recognizing the needs of people of different genders, identity, sexual orientation and cognitive abilities

1H   Project to work with partners and stakeholders to identify and make welcome all context-specific individuals and/or populations

2. Support Systems

Do people have access to support facilities and services, daily and during moments of need?

METRICS

2A   Project to support a continuum of care on-site and/or within an accessible travel distance

2B   Project to include healthy food options on-site and/or within an accessible travel distance

2C   Project to provide quiet space indoors and outdoors for individual repose
       1: Public/common areas are designed to respond to recognized community needs

3. Socialization

Do people have indoor and outdoor spaces to engage socially at formal and informal levels?

METRICS

3A   Project to provide indoor social gathering space
       1: Project to use lobby of ground floor as a social connection point (e.g., provides comfortable seating for groups)

3B   Project to provide access to outdoor social gathering space

3C   Project to work with stakeholders to identify and accommodate context-specific spaces for social gathering(s) (e.g., team rooms, family gathering space, multi-faith rooms, and others)

Environment

Delight and
Enjoyment
Natural Systems
Mobility
Resilience

The wellbeing of the environment and of natural systems is intricately linked to the wellbeing of people–one is unattainable without the other. Design should seek to sustain and enhance the healthy functioning of natural systems that sustain clean air and water, flourishing ecosystems and biodiversity, and controllable climatic conditions. Project designs should also seek to create the conditions that promote healthy behaviours in users, such as the conservation of natural heritage and capital, the reduction of carbon and GHG footprints, the enjoyment of active lifestyles with access to natural settings, and to future-proof the wellbeing of communities by building resilience, mitigation, and adaptation capabilities. - The Community Wellbeing Framework

1. Delight and Enjoyment

Can people enjoy high quality, beautiful spaces (interior/exterior) with abandon?

METRICS

1A Project to maximize physical and visual connections to nature from public/common areas and from spaces where people typically spend more than four hours per day

   1: Project to provide physical and visual connections to nature from public/common areas
   2: Project to provide physical and visual connections to nature from spaces where people typically spend more than four hours per day

1B Project to maximize use of natural lighting and ventilation for public/ common areas and spaces where people typically spend more than four hours per day

   1: Project to provide more than three hours of natural daylight/ sunlight for spaces where people typically spend more than four hours per day
   2: Project to include operable windows that provide access to outdoor air and daylight in spaces where people typically spend more than four hours perday. Where operable, windows to be installed; sequences or strategies to turn off mechanical cooling to conserve energy

1C A biophilia plan to be developed and implemented for the project, maximizing human-nature interactions for public/common areas and spaces where people typically spend more than four hours per day

1D Project to be designed to evoke a sense of wellness and comfort recognizing people linger and wait

1: Public/common areas and primary circulation routes to incorporate opportunities for active programming, retail, people-watching, public art, and/or significant views
2: Public/common areas and primary circulation routes to incorporate furnishings for informal use, including seating
3: Public/common areas and circulation routes to be generous in their dimensions, including horizontal space for informal use, and an ample floor-to-ceiling height

1E Quality design and beauty to be characteristic of the project recognized by users/stakeholders

1F Project design to deliver high indoor air quality, including supply of high-quality outdoor air, to occupants

1: Project to incorporate best practices around air quality from industry organizations, whose guidelines are evidence-based and recommended by professionals (e.g., meet minimum AsHrAE standards)
2: Project air quality and air filtration system to meet evidence- based standards (AsHrAE, CsA Group, WELL)
3: Project to implement control measure to minimize/optimize the consumption of energy due to outdoor air treatment (i.e., the system has sequences to recover waste energy and to reduce energy consumption when spaces are not occupied)

1G Project to maximize and allow for personalization of thermal comfort among occupants

1: Efforts to be made to address building thermal loads by exceeding minimum guidelines for building thermal properties (e.g., local building codes, ASHRAE, passive house)
2: Occupancy types to align with and be grouped to optimize thermal comfort
3: Where feasible, project design to incorporate options for individual thermal comfort devices that allow occupants to adjust temperatures to suit their thermal preferences
4: For exterior spaces, project design to incorporate features to support the comfort of pedestrians exposed to weather conditions, including heat, cold, wind, and shade

2. Natural Systems

Does the project have a positive impact on the functioning of local and global natural systems?

METRICS

2A Project to enhance the ecological function and biodiversity of the site

1: Opportunities for planting trees and naturalized landscapes to be maximized
2: Attention is to be paid to providing environments that support pollinator species
3: Project to take appropriate mitigation measures for ecological conservation (e.g., where projects have natural habitat components, project implementation to include appropriate environmental expertise to include adequate design and implementation of conservation measures)

2B   Project to be GHG-neutral (or negative)

1:   Project to develop and implement a sustainability action plan that demonstrates commitment to reach GHG neutral goals (e.g., use of natural resources, non-renewable energy sources, and waste production)

2C   Project to implement measures to promote water conservation and provide high-quality water treatment for use on-site

1:   Project to evaluate water usage onsite, and to implement measures to reduce water use (i.e., plumbing fixture type, grey water collection, on-site water treatment)
2:   Project to incorporate best practices around water quality from industry organizations, whose guidelines are evidence-based and recommended by professionals (e.g., meet AsHrAE standards)
3:   Project design to make high-quality drinking water easily accessible to occupants

2D   Project to employ noise reduction materials and measures to reduce ambient noise levels (50 decibels for large public spaces; 40 decibels for general spaces; 30 decibels for quiet spaces)

1:   An acoustic plan to be developed that identifies loud and quiet zones, and noisy equipment in the space
2:   Project to employ noise reduction materials and measures to reduce ambient noise levels

3. Mobility

Does the project facilitate the uptake of active transportation, active lifestyles, and reduced car-dependency?

METRICS

3A   Project to provide ample opportunities for people to lead active lifestyles

1:   Project to provide exercise facilities (interior and exterior) or be located within walking distance of dedicated exercise facilities (interior and exterior)
2:   Project to provide showers, lockers, and changing facilities (minimum 1 m^2 per full-time occupant)
3:   Project to provide integrated vertical circulation system that encourages everyday stair use between floors for occupants
4:   Project to maximize the accessibility, aesthetics, and visibility of staircases

3B   Project to prioritize and celebrate active modes of transportation and connections to transit, rather than single-occupancy vehicles

1:   Project to enable and prioritize active modes of travel to the project area, with access within walking distance to a cycling path and a transit stop
2:   Project to provide secure, covered bicycle storage, adjacent to public areas, entrances, and primary circulation corridors
3:   Project to enable and prioritize active modes of travel within the project area, including walking/cycling paths and vertical circulation)
4:   Project to consider a mix of land uses on the site and within the immediate context

4. Resilience

Does the project implement a plan for operational continuity and the management of and adaption to identified hazards (e.g., climate change, extreme weather, demographic shifts, economic fluctuations, etc.)?

METRICS

4A Project to identify risks and implement a resilience plan

> 1: Project to identify operational continuity requirements
> 2: Project to identify potential hazards (shocks and stresses)
> 3: Project to identify vulnerable systems/population
> 4: Project to identify and implement resilience goals and strategies for mitigation and adaptation

4B Project to develop and implement a climate adaptation plan

Economic Domain

Affordability
Complete
Community
Life-Cycle Value
Local Economy

A built environment's influence on health and community wellbeing begins in the home and extends to where people work (and how they get between the two). Basic physical, social, and emotional needs are likely to be met when people can afford to choose well-designed, quality housing in a convenient geographic setting that accommodates safe living conditions and access to healthy lifestyle options, amenities, and active transportation between home, work, shops, and services. When such choices are not affordable, people live in communities where homes are further away from basic amenities and services, and where public transport is less reliable and long commuting distances in cars is necessary. The built environment can contribute to more socially and economically equitable and sustainable communities, through its impact on density (e.g., concentration of buildings and population in an area), availability of public spaces and places, and opportunity for different uses within the same neighbourhood. - The Community Wellbeing Framework

1. Affordability

Do people of different income levels have access to the hospital's services and/or employment opportunities?

METRICS

1A   The project will benefit, and be enjoyed by, people of all income levels within the community

    1: Low-income people (as defined by statistics Canada) within the community can access the project and benefit from its function

    2: Project to enable partnerships with other agencies, non-profits and community organizations who promote wellbeing and community health

2. Complete Community

Can people realize the activities of everyday life?

METRICS

2A Project to enable a balanced lifestyle, connecting people to places to work, live, play, study, take transit, and make everyday purchase

  1: People have the option of using active transportation for commuting

2B Project to enable colocation of services for the community and staff:

  1: People have multiple reasons to visit the project and engage in different activities that enable a continuum of care

3. Life-Cycle Value

Does the project account for full-life-cycle costing and the costs to the environment and community?

METRICS

3A Life-cycle cost analysis (LCCA) to be conducted as part of the project's business case (including maintenance and operation) with results confirming acceptable long-term costs and benefits

  1: Project to use a life-cycle assessment (LCA) tool to measure the life-cycle environmental impact of the building elements to achieve the lowest LCC (in present-value dollars) from among alternative designs

  2: Project to identify the full-life cycle costs and develops options to pay for these costs over the long term

4. Local Economy

Does the project support a healthy local economy and, specifically, a continuum of care?

METRICS

4A Project to result in a net long-term amplification (of size, strength, and diversity) of the local economy and the continuum of care

  1: Project to foster local entrepreneurialism by providing space and partnership opportunities

  2: Project to include commercial/retail units

  3: Project to support innovation and productivity by contributing to an infrastructure that maximizes density and clustering of related activities

Cultural Domain

Cultural
Vitality
Sense of
Belonging
Play and
Learning

Individually and collectively, we depend on forming bonds of understanding and identity, expressing ourselves creatively and freely,and nurturing a sense of belonging, delight, and play. Various forms of human expression help to fully define our lives and our wellbeing. By participating in leisure and cultural activities, whether arts, culture, or recreation, we contribute to our wellbeing as individuals, to our communities, and to society as a whole. Participating in cultural activities (e.g., going to a museum, art gallery, film, or concert) on a regular basis increases longevity and that culture is a separate variable. Built project design can help to support cultural activity, create opportunity for cultural programming, or promote recreational activities by providing spaces for cultural interpretation, activity, art, and recreation, thereby providing individuals and communities with opportunities to improve their health and wellbeing. - The Community Wellbeing Framework

1. Cultural Vitality

Do people have access to cultural, recreational, and art resources/ facilities?

METRICS

1A   Project incorporates visual arts, public art, and/or opportunities for art programming

1B   Project to commemorate natural and cultural heritage

    1:   Project to recognize and commemorate natural and cultural heritage, both tangible and intangible, including Indigenous heritage, through the design, the incorporation of interpretative elements and art, and conservation of significant heritage attributes

2. Sense of Belonging

Do people feel included and engaged in the hospital community and connected to their social networks regardless of their background?

METRICS

2A Project to enable a personal sense of belonging and expression by users

1: Project to provide spaces to support a sense of belonging (e.g.,outdoor common spaces, spaces that encourage lingering, adequate all-weather seating in public spaces, mixeduse space)

2B Project to identify and commemorate significant cultural heritage factors of the site, the region and its population

1: Project to work with stakeholders to identify significant cultural heritage attributes and the appropriate means of commemoration (e.g., interpretative art or signage, heritage conservation, culturally specific space, designs, and/or programing)

2: Project to commemorate Indigenous heritage, and reflect the spirit and recommendations of the Truth and Reconciliation Commission

3. Play

Do people have quality spaces to relax in and engage creatively?

METRICS

3A Project to provide access to spaces for spontaneous, informal and creative enjoyment

1: Project to provide spaces for informal social gathering and recreation, including being located alongside main pedestrian routes

2: Social and personal spaces are designed and furnished to be manipulated by users and to elicit active participation

4. Learning

Do people of all ages have opportunities to learn and develop? Are the rationales/designs/initiatives that enhance Community Wellbeing overt?

METRICS

4A Project to offer opportunities for people of all ages to learn and develop

1: Project to provide space to support learning activities, collaboration and public engagement

4B Project to communicate contributions to community wellbeing

1: Project to enable and support people to build and share awareness of the project's wellbeing design features

Political Domain

Sense Of Ownership and Stewardship Collaboration Integration

The built environment represents an important policy domain, namely that related to people's need to have opportunities to contribute to their own wellbeing. This is central to the process of being able to flourish and fulfill one's potential. Through collaborative and related processes, the design professions can provide meaningful opportunities for individuals and communities to contribute to their wellbeing. - The Community Wellbeing Framework

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1. Sense of Ownership and Stewardship

Can people understand, control, manage, interact with, and transform their environment? Are they personally invested in its function/success?

METRICS

1A Project design to allow users to control their environment, where appropriate
   1: Project to enable users to tailor and adapt spaces and environment to individual needs and preferences

1B Project users participate in the stewardship of the project
   1: Design process to empower user groups to inform the outcomes
   2: Project, or areas within the project (e.g., front yards, community gardens, community halls), actively involve individuals and/or community groups
   3: Project to offer opportunities for volunteerism and/or stewardship

1C Project users to be engaged in defining and monitoring of community wellbeing indicators
   1: Project creation, implementation, and operation to include mechanisms to engage community members in defining, designing for, and monitoring the Community Wellbeing indicators

2. Collaboration

Have stakeholders involved been given opportunities to meaningfully collaborate, in different ways, throughout different phases of the project?

METRICS

2A Project process to include clear and effective mechanisms for engaging with a broad spectrum of patients, staff, administrators, community members, partners and others, from the outset (along International Association for Public Participation 2 spectrum)

2B Project outcomes to establish mechanisms and spaces for ongoing collaboration with, and among, stakeholders

3. Integration

Are a diversity of perspectives, stakeholders, community, and disciplines meaningfully integrated from the outset and throughout the implementation/life of the project?

METRICS

3A Project to effectively integrate a diversity of perspectives from project inception throughout the life of the project

PART C: MAKE.
NEXT STEPS &
IMPLEMENTATION

6.0// FUTURE DIRECTION AND IMPLEMENTATION STRATEGY

6.1 NEXT STEPS

The final section of this report - Part C identifies specific critical future directions and implementation strategies to bring the vision developed by the NH community to life.

Divided into two parts, the first part of PART C identifies the need for further studies and design reports. These studies and reports aim to address the various themes of South Niagara Vision as well as the five domains under the Community Wellbeing Framework. The second part addresses essential implementation requirements which includes direction on administration and governance, monitoring and updates, the need for ongoing engagement, and the necessity to establish strategic partnerships.

6.1.1 Design Reports and Guideline Documents

While Part B of the Visioning Report incorporates specific design metric which reflects the various 'themes' identified through stakeholder engagement, this section identifies additional opportunities. Identified under the heading of each 'theme' these opportunities range from further design reports to guidelines, and to design strategies for the physical development of the hospital building, its site and surrounding context.

Theme 1: Community Health & Wellness

- **Incorporate Community Wellbeing Framework** as a made in Niagara approach to further guide South Niagara Hospital campus planning master plan. The Community Wellbeing Framework addresses various building design and site design requirements and will be a crucial guide to inform the evolving design approach for the new hospital.

Family Resource Centre, Children's Hospital Colorado, Aurora

- **Facilitate the creation of a Continuum of Care Facility** on-site or within an accessible travel distance. The creation of a health campus was a recurring idea during stakeholder engagements. While the hospital site might have a limited capacity to host health and community supportive facilities, adjacent properties within the vicinity of the may be possible. A facility like this could provide rehabilitation services to recovering patients, have exercise space and equipment geared towards senior and patients with chronic illness, a place to access and interact with Public Health services, and be a social hub promoting wellness for the Niagara region community.

Theme 2: Focus on Patient, Family, and Staff Experience

- **Develop a Public Space Strategy** within the campus for indoor and outdoor spaces. The

design of public space plays a fundamental role in the comfort and experience of a place. Spatial quality, accessibility, natural light, views to nature, and proximity to open spaces, have the potential to influence the health and wellbeing of patients, care givers and staff.

- **Develop a Wellness Space Inventory** to guide space programming for the hospital. During the engagement process with NH staff and other stakeholder identified a diverse range of space such as smaller quite areas, a place to repose, family areas, and amenities such as gyms and daycares. Engage staff and patient groups to guide the development of this space inventory.

Theme 3: Excellence in Senior Health and Wellness

- **Develop Universal Design Guidelines and Standards** for a senior friendly hospital. A substantial number of Niagara Health service

Creating a familiar environment, inclusive design strategy by St. Plav's. Norway

users are seniors, and as the current demographic cohort progresses, this number will continue to increase. Physical access to the hospital and circulation within the hospital is a challenge for seniors, especially if they require care, have restricted mobility, or suffer from dementia. A key aspect of creating a senior friendly hospital is the design of the environment. An added advantage of a universal design strategy is that it addresses a diversity of users thus being inclusive beyond advanced age criteria. An older person might find other disability or cognitive and sensory restriction. A few documents already exist such as The Center for Excellence in Universal Design (CEDU) - Building for Everyone: A Universal Design Approach (2012), and Dementia Friendly Hospitals from a Universal Design Approach Design Guidelines (2018) amongst others.

Theme 4: Accessible, Safe and Inclusive

- **Incorporate Territorial Acknowledgment and additional engagement.** Released in 2015, the Truth and Reconciliation – Calls to Action advocate for a renewed and improved relationship with Indigenous Peoples. Niagara Health can take the first step towards establishing a relationship and understanding the indigenous culture of the Niagara region by a territorial acknowledgment of traditional territory of the Haudenosaunee and Anishinaabe peoples. There is a need to go beyond initial acknowledgment and identify support for indigenous patients and families through their healthcare journey. Going forward, Niagara Health should reach out to indigenous groups to identify an engagement process.

Signs of Welcome at Hamilton Health Sciences, Ontario

- **Develop an Public Art Plan.** Hospitals can be unfamiliar places for patients and caregiver. There are opportunities to enhance a sense of familiarity within the hospital; inclusion of art is one such opportunity. It is now well established that there is a link between recovery and feeling of wellness. A Public Art Plan provides an opportunity to create a universal strategy for art within the hospital. Such a plan would include public art within common/public areas such as wall and vertical surfaces; collaboration with non-profits such as Art for Healing Foundation for display art on loan from the artist, and fundraising to commission art installations or sculptures within the building and around the campus.

- ***Develop design guidelines and standards for universal washrooms in public/common areas.*** Introduced in 2016, Bill C16 amends the Canadian Human Rights Act to add" gender identity or expression to the list of prohibited grounds of discrimination." The right of all people to use a washroom that supports their gender identity is becoming a prevalent norm in community and recreation facilities across Canada. Design guidelines and standards for universal washrooms in public/common areas would guide designers and architects of the South Niagara Hospital and serve as a reference document for other NH facilities as they require retrofits.

Theme 5: Environmental Leadership

- **Explore collaboration with Health Care Without Harm and Canadian Coalition for Green Health.** Health Care Without Harm (HCWH) is a broad-based international coalition of organizations and hospitals spread across 50 countries. It focuses on eight issues affection health care impact on climate and wellness

'Banana slug' sculpture by artist Michael Binkley - commissioned by BC's Children Hospital Foundation, Vancouver

and includes issues such as restorative health care; healthy food in health care; climate and health; toxic materials; safer chemicals; green building and energy; environmental preferable purchasing; and waste management. The Climate Council is leadership body and consists of 19 health systems representing 500 hospitals. Canadian partnerships include the Canadian Coalition for Green Health, which provides a virtual platform for the sharing of ideas and resources to build a more sustainable health service delivery system.

- **Develop sustainability action plan and resilience plan.** In 2019 Niagara Health rolled out its Energy Conservation and Demand Management Plan (ECDMP). While this plan addresses energy consumption and greenhouse emissions, there is a growing body of evidence to support the need for a wider understanding of sustainability and resilience. The conversation of sustainability needs to expand beyond water and energy to include topics such as waste and its storage, its treatment, recycling and disposal. From the construction stage, there is a need to have regard for the reduction of resource consumption, use of environmentally sustainable products. Existing literature and guidelines by organizations such as Health Care Without Harm's Climate Action Toolkit and documents on sustainability action by Global Green and Healthy Hospitals on waster, energy, water and buildings are excellent resources to as foundation for a 'made for Niagara' Sustainability Action Plan. Similarly, a resilience plan has become equally relevant due to the rise of stresses to the health care system (e.g. aging demographics) as well as shocks to the system produced by extenuating events, such as extreme weather events. High incidences of extreme hot days, storm events

Climate Action is an opportunity for health care to reduce its own carbon footprint

Climate Action is an opportunity to improve patient and community health

Climate Action is an opportunity for hospitals to be anchor institutions for their communities

Climate Action is an opportunity to be leading advocate for healthy people on a healthy planet

Health Care Climate Challenge, Global Green and Healthy Hospital (GGHH)

and snow days can overwhelm the system due to outages, restrictive transportation for staff and patients, restrictive delivery of goods, flooding, vector-borne diseases, and poor air quality.

- **Join the Health Care Climate Challenge.** Launched in 2015 at the Paris Climate Conference, the Health Care Climate Challenge is a Global Green and Healthy Hospital (GGHH) initiative to mobilize health care institutions around the world to play a leadership role in addressing climate change.

Theme 6: Effective and Innovative

- *Develop an effective wayfinding strategy and optimal layout for various circulation flows.* Navigating a large health care facility when in need of care or while visiting a family member at hospital can be stressful and adversely impacts patient and visitor experience. Additionally, navigating a complex myriad of routes can be challenging for staff who are either accessing patients, various sections of the hospitals or are on their routine rounds. Identification and directional signage, staff training, and use of digital technology has the potential to significantly improves the ease of navigation. In addition, a thoughtful layout with simple horizontal and vertical circulation reinforced with opportunities for orientation such as views to outside, location of unique public/common areas routes delivers an effective wayfinding strategy.

Effective wayfinding strategy, Royal Northshore Hospital, Sydney, Australia

6.1.2   Implementation Recommendations

While the project Design Vision Statement supported by Design Themes and the Community Wellbeing Framework helps establish a foundational direction for South Niagara Hospital, it is crucial to articulate an implementing approach. The implementation approach described in this section provides direction on how this Visioning Report informs additional work such as other NH Design Programs, development of performance targets, ongoing monitoring and updates, engagement and establishing strategic partnerships.

Administration and Governance

The South Niagara Hospital Visioning Report plays an important role to guide the development of the hospital over the long term in conjunction with the Niagara Health Strategic Plan. It should be referred to throughout all development planning and design processes so that it can effectively influence the project's design in a comprehensive manner.

- **Process towards implementation.** The Visioning Report represents one of the strategic initiatives required for the realization of South Niagara Hospital. Section 6.1.1 Design Reports and Guideline Documents of the Visioning Report identifies additional studies which will require internal working groups to spearhead and champions various studies under design themes such as Continuum of Care Facility, Public Space Strategy, Sustainability Action plan and Resilience Plan, and Wayfinding Strategy amongst others.

- **Spearhead next steps.** The Design Vision Statement, along with Design Themes and the Community Wellbeing Framework (CWF), should be refereed by other concurrent or future 'Design Programs' which are identified by the Redevelopment Project Team. At present, these include the Design Program for Campus Master Plan and the Wayfinding Strategy.

Establishing Strategic Partnerships with various stakeholders

Monitoring and Updates

The CWF developed under the scope of the South Niagara Hospital Visioning provides a breath of design metrics for the development of the new hospital. The base design metrics of the CWF were tailored to be Niagara Health specific. Going forward, these will require periodic monitoring and updates to keep them relevant and aligned with the Niagara Health Strategic Plan and other initiatives.

- **Monitoring.** Once the performance targets are established and adopted, a bi-annual monitoring report should provide an ongoing update to Niagara Health Board of Directors, Executive Leadership Team. Additionally, a public facing interface should be hosted on Niagara Health webpage.

- **Updates.** A review of the design metric and associated performance targets is suggested at a five-year interval to keep the CWF relevant to change and in alignment with Niagara Health Strategic Plan, performance indicators under Health Quality Ontario, and other indicators which are reported on by Canadian Institute of Health Information (CIHI).

Ongoing Engagement

As development efforts move into the next phase of planning for South Niagara Hospital, it is critical that the Niagara Health community and stakeholders continue to be involved in conversations about its implementation and updates. The current engagement effort has established a healthy constituency of stakeholders, and future efforts will benefit from further engagement as the project progresses.

- **Continuous engagement.** A continued engagement and collaboration between Niagara Health and internal and external stakeholders is an important aspect of the vision's successful evolution over time. It is an important step in maintaining a feedback loop with stakeholders.

- **Consideration for all groups.** A hospital is a community asset with an intrinsic capacity to influence and shape the wellbeing of the community. While the primary focus of the South Niagara hospital will be urgent and critical care of its patients, the wellbeing of its various users - staff, visitors and caregivers is equally important to its functioning. Any engagement should ensure consideration of all user groups.

- **Establish new connections and include additional groups.** Successful engagement needs to be truly representative as the project for South Niagara Hospital progresses. It needs to make efforts to include the voices of the individuals and groups such as Indigenous groups, newcomers to Canada, French speaking residents, and others.

Strategic Partnerships

Throughout the engagement process, the idea of a community health campus with South Niagara Hospital as its key pivot found high degree of appreciation across stakeholder groups. However, it will be unrealistic to except a hospital to deliver along on a host of supportive services. A wide range of services such as an effective and reliable transit connection, nutrition programs, assistance to vulnerable population and others is best provided by other health, community and civic partners.

- **Partnerships along the way.** Strategic partnerships provide venues to achieve project aspirations which might not be under the direct preview of Niagara Health. Regional and local transit connection with a transit hub within walking distance is key to improve access. Likewise, co-location of supportive health services and social services would be crucial.

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This document was developed for Niagara Health in collaboration with the DIALOG as the consultant team, with input from a broad range of stakeholders from the Niagara Health community, and multiple internal and external stakeholders. The consultant team was greatly supported throughout the project process by the Project Redevelopment Team and the Niagara Health Board of Directors.

Practical Efficiency
↳ Operational expertise from
contributing partners
↳ Must be "form that functions"
"function that performs"
↳ Must be mutual value realized
by all partners

Integrated community function & use
↳ External partnerships
↳ Campus concept – as
~sed to "destination" for single

Building
a Healthier Niagara