



Mr. Gilles Vézina
Office de consultation publique de Montréal
1550 Metcalfe Street, Suite 1414
Montréal (Québec) H3A 1X6

March 6th, 2013

Dear Mr. Vézina,

The N.D.G. Senior Citizens' Council (NDGSCC.ca) is an organization dedicated to improving the quality of life of residents of N.D.G. and Montreal West, aged 50 years and up. Our organization encourages their contribution, promotes their participation through mutual aid and civic engagement, and creates community by providing a sense of belonging, breaking isolation and increasing autonomy.

In the framework of the *Plan d'action Municipal pour les Aînés 2013-2015* and the principle of Universal Accessibility, the NDGSCC is working to address some of the physical and infrastructure problems in NDG that contribute to the social exclusion and loss of autonomy of seniors. We are working with other community groups and the Borough of NDG-CDN to develop a plan of action that aims to make CDN-NDG a more senior-friendly borough.

With the arrival in our neighbourhood of the MUHC super hospital, we are very pleased to take the opportunity of this Programme Particulier d'Urbanisme to voice some of our concerns about the development of the hospital itself and of its area of influence. We are glad to be welcomed by your Office to present our brief in English, on behalf of our clientele, which is overwhelmingly anglophone.

We would like to emphasize our hope that a central concern for the developers of this project will be to maximize accessibility for seniors who live with a wide range of disabilities.

We offer specific suggestions but hope that the designers of this project adopt a “réflexe aîné” – an openness to consider the impact of each design feature on the independence and mobility of seniors, and to seize every opportunity to create senior-friendly physical features. This means imagining that the user of every space might be, for example, an arthritic man who cannot see well and shuffles slowly with a walker, an 80 year-old unilingual anglophone who walks well with a cane but has confusion, or a baby boomer with spinal stenosis driving a scooter.

While the focus of this PPU is on the future hospital itself as well as the surrounding areas, we are sure that its effects –positive and negative—will resonate far beyond its boundaries and touch many political and administrative jurisdictions.

With the development of new housing, NDG’s population density will rise. With more people, the already-stressed transportation, traffic and parking situation could become critical.

As we age, the loss of functional abilities reduces our mobility and narrows our transportation options. A senior-friendly environment, such as accessible public transportation, safe, snow-cleared sidewalks, crosswalks and abundant benches, can maximize choices, reduce dependency on others and make the difference between autonomy and isolation as we travel along the spectrum from health to disability.

Montreal has only recently achieved the adoption of an action plan for making Montreal an Age-friendly City – a “Métropole AMIE des aînés” and so it is not surprising that the **automobile is still the preferred mode of transportation used by 63% of older residents** --as drivers or passengers. The second and third most popular are public transit (18%) and walking (17%).¹ Fewer seniors use wheelchairs or motorized mobility aids --although with the growing population of old people, we can expect to see these more frequently.²

The proximity of the new hospital will make many health services more accessible to the large number of seniors living in NDG who currently have to travel further to reach a hospital in an emergency, for tests and to see specialists.

To achieve the dual purpose of reducing dependency on cars and of facilitating access to the hospital by seniors, it is imperative that older people can count on consistently available, accessible and safe means of transportation. They must have physical access to those spaces, and reasonable mobility within them.

¹ Table de concertation des aînés de l’île de Montréal. (2009) Les moyens de transport et la mobilité des aînés Montréalais : intervenir face au vieillissement de la population.

² AMT, 2008 survey on the transportation habits of Montrealers in *Plan d’action municipale pour les aînés 2013-2015*.

Walkability & Safety:

There is a need to make the streets of NDG and in particular the MUHC grounds fully accessible to pedestrians of all levels of ability, as well as to people using wheelchairs or motorized vehicles. We are pleased that the project plans to make safer pedestrian crossings at six major intersections, and to reduce traffic volume and speed, especially at certain points on St. Jacques, and near the Metro, and part of Sherbrooke St.. This will surely help improve overall access to businesses and services for seniors.

On the other hand, the arrival of the hospital will certainly increase all forms of traffic while also making important intersections more dangerous. Intersection crossings should be shorter or traffic lights must be long enough for slow walkers to safely reach the other side without fearing they will be run over. This is a consideration in the entire borough, but will be particularly critical around the Vendome Metro where special consideration should be given for people with mental and physical challenges.

Snow and ice on sidewalks and streets is a recurring danger to seniors in NDG, which renders many people housebound for most of the winter. Adequate snow removal around important pedestrian spaces will be critical to the accessibility of the hospital for seniors. We hope that the borough of Côte-des-Neiges—Notre-Dame-de-Grâce will give its full cooperation in this regard.

Many seniors fear being hit by bicycles on sidewalks. To avoid collisions, there should be a clear and enforced separation between pedestrian and cycling spaces wherever possible.

There is also concern about the “walkability” of the pedestrian underground access to the hospital grounds with its entrance on de Maisonneuve. We are pleased to see that your plan includes stairless access to the hospital grounds for people entering the site from de Maisonneuve, next to the metro station.

It would be helpful to many seniors if, in addition to elevators, this passage to the hospital--as well as all long passages inside the hospital grounds--had the following physical features:

- A “moving sidewalk” (like those in airports) in the access tunnel to the hospital, would further increase accessibility for people who cannot easily walk 100 meters
- Abundant benches to rest on (eg. along outdoor walkways and green spaces, beside and inside elevators, in long hallways)
- Large and clear graphics designating seating for disabled people only

- Texts on signs displayed in large writing in French and also large enough in English
- Audio announcements that are clear and in both languages

Inside the hospital itself, wheelchairs in working order should be readily available at entrances to buildings. All patients and their caregivers should have reasonably comfortable seating to endure waits of several hours, for example, in the Emergency department. Long periods of time spent in waiting rooms can be excruciating for people with certain musculo-skeletal conditions. Patients with painful conditions should have access to reclining chairs or gurneys.

Public transportation:

Of particular concern is that a growing population will aggravate an already serious situation of overcrowding on the 105 bus. The 105, which serves the Vendome metro and the new hospital, runs along Sherbrooke connecting people at the far Western end of NDG to the new hospital and to the metro system. The 105 is known in NDG for being overcrowded, both in and outside of rush hours. Service is frequent, but still insufficient to meet the need. The lack of seating on the bus causes hardship for many seniors and people with even mild disabilities who are unable to endure standing or lose their balance as it lurches forward or breaks suddenly. Furthermore, once the East-bound bus passes Cavendish Boulevard, it is often so full that it is difficult or impossible to mount the stairs and enter the bus—let alone to find an empty or designated seat.

This crowding situation unfairly impacts seniors and all people who cannot walk long distances, ride a bicycle, drive a car or afford to take taxis. And for those who have access to a car, the dismal transit situation leads directly to increased automobile use, traffic and air pollution. In addition, the fact that access to the hospital by public transit is unfriendly to seniors and the disabled will result in more cars entering the Glen campus, with the attendant problem for the hospital of providing sufficient, affordable parking.

In general, more resting places with benches are needed at bus stops, street corners and on metro platforms.

In an area where public transit is already saturated, a comprehensive plan that addresses the impacts and the accessibility of the new hospital must achieve the cooperation of the STM and find ways to meet the public's need for improved public transit in the project area. The more senior-friendly our buses and metros are, the less need there will be for alternative services like the STM's Transport Adapté.

Parking:

The availability of street parking for residents and businesses is already nearing a critical

point in the borough, and seniors and their caregivers who need a car often cannot find a place to park close to their homes or their destinations. The arrival of the hospital will no doubt lead to further pressure on this scarce resource. More priority street parking should be available for people with disabilities everywhere within the influence of this project.

It is fair to expect that over half of the seniors visiting the hospital will arrive by car. Sufficient designated debarkation and parking spaces located near entrances throughout the Glen campus would greatly increase access to the hospital for seniors and disabled people.

A shuttle bus service between seniors' residences and the hospital would further increase accessibility and reduce traffic and parking challenges.

We thank you for this opportunity to have input into this project in our neighbourhood and its important design features. We hope that the many partners will make efforts to develop a "reflexe aînés" and help make our hospital and our living space in NDG as inclusive as possible of people of all generations and levels of ability.

Sincerely,

Karen Urtnowski
Community Organizer
NDG Senior Citizens' Council

PS: Please note that that the Plan d'accessibilité 2007 au site Glen (CUSM) is listed, but not actually available on your website. <http://www.ocpm.qc.ca/node/3520>