VANCOUVER HOSPICE SOCIETY

October 22, 2018

Gil Kelley, General Manager
Planning, Urban Design and Sustainability
City of Vancouver
453 West 12th Avenue
Vancouver, BC

Dear Mr. Kelley,

Re: Application to Rezone 4575 Granville Street from RS5 to CD-1

Vancouver Hospice Society (VHS) operates a stand-alone, independent, hospice funded by Vancouver Coastal Health at 4615 Granville Street. Each year, more than 150 Vancouverites spend their final days in this home-like environment, where compassionate end-of-life care is our mission. The hospice is immediately adjacent to the proposed development noted above. We are gravely concerned about the impact this proposal would have on our ability to operate and serve our community.

The rezoning application outlines a proposal to tear down a single family home and replace it with a 41-foot tall, 21-unit, stacked townhouse development to a density of 1.3 FSR, which could accommodate as many as 92 residents and provide parking for 32 cars and 32 bicycles. There are no similar types of housing within 15 blocks in either direction. While on an arterial route, it is not close to shopping or other community amenities, or public schools.

The proposed stacked, 4-storey development would be sandwiched between our recently built, single-storey-plus-basement hospice on the south, and another recently built single-family home to the north. It would loom over our hospice and cause ongoing and undue hardship, stress, and anxiety to more than 150 people facing death who seek the carefully balanced serenity of our hospice each year. It will be similarly distressing for the hundreds of family members, friends, and bereaved individuals who we also serve.

Additionally, anticipated congestion in the shared lane - the sole access to the hospice for ambulances and hearses - would adversely impact patients, families, staff and neighbours.

Our modern facility was carefully designed just over six years ago, with the City's advice and assistance, to ensure it was wholly compatible with our residential neighbours and surrounding community. We have been providing end-of-life and bereavement care - much-needed, essential community services - since opening in 2014, with the strong support of our neighbours, the City, the Province, and Vancouver Coastal Health.

We are perplexed that the City of Vancouver would consider this wholly incompatible proposal, causing us and our patients much anxiety. Already, we have received calls from concerned family members saying they would not wish their loved ones to spend their final days at our hospice if the development were to be approved. Our thorough review of City policies leads us to query why this application was accepted. The public response at the City-sponsored information session and via our online petition indicates thousands of residents are opposed to this development. As such, the policy requirement of community support has clearly not been met.

However, as it seems the application is being given full consideration and some support by the City, we have set out reasons below, to substantiate our request that the City refuse the application and not send it to a Public Hearing. Vancouver Hospice Society has no options for relocation. The City, however, could plan compassionately, and find more suitable locations for developments of this nature.

Yours truly,

Stephen Roberts, Board Chair
Vancouver Hospice Society

cc. Vancouver Mayor and City Councillors,
Bob Chapman, Vancouver Coastal Health Community Services Director

THE ROLE OF THE HOSPICE IN THE COMMUNITY

It is vital to understand the importance of the essential community service we provide to citizens of Vancouver.

We are a team of healthcare professionals, staff and volunteers who are dedicated to providing compassionate end-of-life care and bereavement support for individuals and their families in Vancouver.

In addition to offering quality end-of-life and bereavement care at our 8-bed residential hospice, we provide a range of support services to individuals with a life-limiting illness during the last year of life, and their families within the Vancouver community.

Our programs include Community Home Hospice Volunteers, Bereavement Walking Groups, Healing Touch Services, individual and family bereavement counselling, and bereavement support groups.

We employ a team of over 40 clinical and administrative professionals, and have a volunteer team of over 250 individuals. We embrace a patient-centered approach to care, with a focus on dignity, comfort and respect for all.

Our History

We are a grassroots organization that was built by the Vancouver community, for the Vancouver community.

The Vancouver Hospice Society was formed by a group of volunteers, nurses and physicians within the palliative care community. Their goal was to build freestanding hospices where individuals with life-limiting conditions could live with dignity during their final days, and where families and friends could feel welcomed and supported. VHS was incorporated as a non-profit charitable organization in December, 2003.

Since then, a large group of dedicated volunteers have worked tirelessly to raise funds to build the hospice, and support its operations. The Provincial Government, recognized the need for this critical service, and gave our hospice a grant of $950,000 so that we could finally open our doors in 2014. We became known as “the little hospice that could.”

Along with donations raised through fundraising campaigns and events, Vancouver Hospice Society has received significant revenues derived from three local, volunteer-run thrift shops: Hospice Opportunity Boutique (HOB) in Kerrisdale, HOB Too, and HOB Too Furniture in Dunbar.

In May, 2017, we secured a commitment from Vancouver Coastal Health to provide ongoing funding for clinical operations of our hospice. At that time, the City was very supportive of our application to receive funding for this critical service available to all residents of Vancouver. We are also grateful to receive an annual Community Gaming Grant from the Government of BC (since 2013) to support our Bereavement Program.

Our Essential Service

There are currently only 36 hospice beds in Vancouver, 8 of which are operated at our facility. There is a consistent wait-list for those 8 beds. Apart from the specialized palliative, end-of-life, and bereavement care we provide, many patients and families have expressed a preference for our hospice due to the peaceful and home-like atmosphere, central location, easy access to transit, and ample street parking. We are also one of the few facilities where patients may opt for the provision of Medical Assistance in Dying (MAID).

As described in more detail below, the proposed development would be seriously incompatible with the special circumstances and requirements of operating a home-like hospice facility. The size, proximity, use and density of this townhouse development would cause ongoing and undue hardship to the over 2000 dying patients, family members, and bereaved individuals we serve from the Vancouver community each year.

As a healthcare organization, we have an obligation to ensure continued access to services for the approximately 170 Vancouver residents who come to our hospice each month for end-of-life and bereavement care. We also have a duty to ensure that the specialized environment we provide is functionally conducive to operating a hospice; the basics of which are privacy, access, a peaceful environment, and reasonable lack of disruption and noise. The approval of this development and resulting disruption of services could lead to hospice closure.

OUR OBJECTIONS TO THE PROPOSED DEVELOPMENT

We have set out our objections below, to the proposed development. These objections primarily relate to the City's stated policy direction about proposals "ensuring good neighbourly urban design."

PRIVACY

Privacy is a vital component to hospice function. Creating a peaceful setting where patients have ample spaces in which to share intimate, private moments with loved ones in the days and weeks leading up to death is a basic necessity of hospice care. Our hospice was purpose-built to include common areas – inside and out – where patients and families can gather privately; with a reasonable lack of disruption or intrusion. As we are a small facility, these areas are limited and few.

The current proposal is oblivious to the seriously detrimental impacts the development would have on the environment of the hospice. The south facing impacts of the townhouse complex are as follows:

1. Two major flat-roofed buildings, one at 30 ft. high and another at 40 ft. high, loom over the north boundary of the hospice site. Those facades contain 14 large windows and 4 upper level outside balcony decks.
2. The easterly block also has a large private roof deck overlooking the hospice site.

Transport of Bodies

Family members gather at the back lane of the hospice to witness the transport of their loved one's body from hospice to hearse. This is a profoundly private and emotional experience for those who are saying their final goodbyes. This area currently offers relative privacy, as it is screened by large, neighbouring hedges, and there are few passing vehicles that access the lane.

If the development is approved, this area will be exposed to a significant number of onlookers due to increased vehicle traffic, and townhouse windows and outdoor patios that overlook the hospice parking lot.

West Entrance Sitting Area

There is a bench at the west entrance of the hospice where patients and family members often sit to enjoy the fresh air, gardens, and late-day sun. The privacy of this area would be compromised by additional vehicle traffic in the back lane, and onlookers from townhouse windows and decks.

North Garden Patio

The patio space at the north garden is completely private; bordered by a large fence lining the adjacent property. It offers a peaceful view of trees and sky. Patients and family members use this area for private moments together or quiet reflection alone. This privacy and quiet would be compromised by the many windows and decks, as well as the sounds reflected from the common project courtyard between the two townhouse blocks.

North Facing Dining Area

The dining area adjacent to the main floor kitchen is a common space for patients and families to gather; sharing precious final moments comprised of food, comfort, and connection. The beautiful floor-to-ceiling windows provide a peaceful view of trees, sky, and an abundance of natural sunlight. This view would be compromised by the 4-storey structure that would dominate the entire north side of the hospice.

North Facing Living Room and Fireplace

The main floor living room has comfortable seating areas, a fireplace, and craft table. The only communal sitting area for patients and families with a view of trees and sky, it is a calming space to read, visit, or relax. This natural view would also be completely compromised by the townhouse structure.

NOISE

In caring for the dying - as well as bereaved individuals who are grieving the heart-wrenching loss of someone they love - a calm, peaceful environment is a basic prerequisite to care.

The duration and intensity of noise resulting from the construction of a 21-unit townhouse development and 32-space underground parking lot will render it impossible to function and provide this basic requirement to hospice care. This would likely result in hospice closure. (See “Closure,” below).

Upon completion, the development would also create considerable noise at various times of day and night due to the number of units, balconies and decks oriented towards the hospice site. The central common courtyard is likely to funnel and concentrate noise from the units, as well as the central gathering place and playground.

Along with the noise from increased vehicle traffic, the 32 underground parking spots will result in the intermittent noise of a parking gate opening and closing each time a vehicle enters or leaves the lot.

ACCESS

The only vehicular access to the townhouse buildings and underground parking lot would be through a narrow, under-developed, doglegged rear lane. This laneway currently provides the only vehicle access to the hospice for ambulances, hearses, family members, vendors, and visitors to and from its northern connection to Connaught Drive. The southerly connection, via a right-angled dogleg to 32nd Avenue, is wholly inadequate for more than the few single-family homes that it serves.

Congestion in the substandard laneway would consistently block access for family members, ambulances, hearses, visitors and vendors. Each time a townhouse resident (or related vehicle) needed to access the lane, anyone going to or from the hospice would be blocked. More units inevitably equals more service vehicles for repairs, deliveries, tenant moves, etc. If blocked for an extended period of time, essential vehicles (ambulances, patient transfers, hearses, delivery of important medical equipment or supplies) would have no access to or from the hospice.

Many visitors walk from their vehicles parked on Connaught Drive down the laneway in order to access the hospice, therefore, additional traffic in the laneway will create a safety hazard for pedestrians.

Parking

There would be a significant decrease in available street parking on Connaught Drive for hospice visitors, staff, volunteers, and vendors, due to increased demand from the additional townhouse residents and visitors.

As previously mentioned, one of the benefits of our hospice is convenient parking. Of the 8 parking spots in our back lot, we designate one spot per patient, to be used by a loved one. All other loved ones and visitors must rely on the available street parking on Connaught Drive. Family members (who often come and go at all hours) report that this conveniently located parking is a great relief, alleviating some of the immense stress and trauma associated with watching a loved one decline and die.

Staff and volunteers also rely on the close proximity to available street parking on Connaught Drive. This is particularly important for nursing staff, who work long, 12-hour shifts. There are also occasions when additional parking is needed due to meetings, large family gatherings, support groups and hospice events.

These on-street parking needs are easily accommodated in the current primarily single-family neighborhood. An increase of vehicles parked in the underground lot and on Connaught Drive also increases the likelihood of the activation of loud and disruptive car alarms, which would be especially alarming to our patients and visitors. Increased demand for street parking may also motivate the City to restrict street parking, which would negatively affect visiting family members, as well as hospice staff, physicians and volunteers.

DISRUPTION & POSSIBLE HOSPICE CLOSURE

Due to the inability to function as a result of extreme prolonged construction-related noise resulting from this higher density development, the hospice would likely need to close during the construction phase (possibly two years). This disruption of services would result in the loss of 8 of 36 hospice beds in Vancouver - 22 percent of total capacity in the City of Vancouver.

The closure of the hospice would affect an average of 12 individuals per month in need of end-of-life care, and an average of 50 family members per month. This would also result in the disruption of bereavement and home hospice services we provide to residents of the Vancouver; an average of 108 individuals per month.

The overall result of the closure of our hospice would directly affect an average of 170 Vancouver residents per month in need of end-of-life and bereavement care; over 2000 individuals per year.

Hospice closure would also result in job loss for our 40 dedicated staff members and physicians, who would need to seek employment elsewhere. This would also create a severe reduction in the strong volunteer base we have worked hard to recruit and retain over the years. This carefully chosen and specially trained volunteer team is comprised of nearly 200 hospice volunteers, many of whom may accept volunteer or work positions elsewhere - or form other long-term commitments.

The residual effects of a hospice closure would include an increase in emergency and acute care admissions at local hospitals. At a cost of approximately $500/day per hospice bed vs approximately $2000/day per hospital bed, it makes economic sense to protect and ensure access to the limited supply of hospice beds in Vancouver.

LACK OF COMMUNITY SUPPORT

The City clearly states that rezoning proposals must demonstrate a degree of community support:

- While there may be widespread community support (in principle) to find ways to increase the supply of rental accommodation, the City surely has to take into account the views of the local community, and those of the broader community who understand the need for essential hospice services for residents of Vancouver who require end-of-life and bereavement care.

- We have gathered over 8,000 petition signatures from people who oppose the development. A large number of neighbours and community members have voiced their opposition through attendance at two public information sessions concerning the application, letters to the City, and feedback received at the hospice. (For example, we recently received a phone call from the family of a potential patient saying they do not want their loved one to come to our hospice to die if the townhouse development is approved.)

INCOMPATIBILITIES

This application is incompatible with hospice functions for the following reasons:

- The proposed development will affect basic hospice functions by adverse and ongoing disruptions to privacy, parking, access, and a peaceful hospice environment.
- The proposed development will cause undue hardship and distress to patients, families, staff and volunteers as a result of ongoing disruptions to privacy, parking, access, and a peaceful hospice environment.
- The adverse effects of added density in such close proximity to the hospice will compromise the home-like atmosphere and peaceful, purpose-built environment essential to hospice functions.
- The applicant has clearly not met a basic requirement of a **"demonstrated degree of community support"** as stated in the policy. With our very limited resources, we have easily garnered over 8,000 petition signatures from those who oppose the development.
- There has been no input on this development from the Social Planning Department. It currently states on the City's website that "City staff work with community groups and other agencies to address critical social issues that affect us all and to make sure the needs of all residents are met." Meeting the needs of the dying and their families is a critical social issue that has been identified by all levels of government. In choosing a different site, the City can allow us to continue to help meet this essential mandate.

All of these factors clearly illustrate that this application is wholly incompatible to the essential requirements necessary to operating a hospice, and therefore should not be considered for rezoning approval.

CONCLUSIONS

While we can fully appreciate the objectives of testing potential sites for new 'affordable' housing though the City's INTERIM REZONING POLICY and in the broad areas defined by the City, we cannot assume this means that every proposed site could be considered for the maximum permitted density. We understood it to be a policy that encourages the investigation of appropriate sites in order to determine what might be feasible and compatible with the surrounding area.

In this application, there is a conflict between two critical social needs in our city—- the need for housing and the need for hospice and all the services it provides to Vancouver residents. The City can choose a different option than 4575 Granville St. Vancouver Hospice has no options — we can't move.

It is especially disturbing to see appropriate projects such as our hospice (an essential community service encouraged and approved by the City just six years ago) now being threatened with closure. It is clear that the thousands of our supporters also find this proposal distressing and insensitive to the needs of those we serve.

Please reconsider this rezoning application.

Compassionate Cities make responsible decisions. We respectfully ask that you recommend that City Council refuse this application.