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Projet de reconstruction du complexe Turcot à Montréal, Montréal-Ouest et Westmount			
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Introduction

The Concertation Interquartier (CIQ) unites St Henri, NDG and Westmount organisations in efforts to maximize the positive benefits to surrounding neighbourhoods from the arrival of the McGill University Health Centre at the Glen Yards.

The CIQ community partners are: **Notre Dame de Grace**: NDG Community Council, CSSS Cavendish and the CDEC CDN-NDG. **Westmount**: Westmount Municipal Association, CSSS de la Montagne and the Contactivity Centre. **St-Henri**: RESO, Solidarité St-Henri, and the CSSS Sud-Ouest Verdun/Sud-ouest

The Concertation Interquartier collaborates with the McGill University Health Centre to realize a partnership agreement signed in 2004. The Partnership Agreement establishes a formal relationship between the MUHC and the communities that surround the Glen Yards site. The Agreement establishes a Joint Committee to ensure communication and implementation. In the Agreement, the MUHC agrees to work with the surrounding neighbourhoods to maximize the positive effects of the hospital in: site development (environment, circulation); direct and indirect employment and training; economic development; housing; and challenges in health care delivery. The full text of this agreement can be found here: http://tinyurl.com/b3lbtd.

With research support from Montreal universities, the CIQ is actively exploring several different avenues: how can the MUHC become a major employer of local residents? How can the hospital stimulate local businesses? How can we minimize the inconveniences during construction period? How can we ensure a harmonious integration of the hospital into the surrounding neighbourhoods? For details on the role of the universities, see our community-university research alliance (CURA) website: www.mcgill.ca/urbanplanning/mpc.

The CIQ and the MUHC are currently negotiating a long term and more formal extension of the agreement, with measurable targets and strategies for deepening the hospital-community collaboration.

The site of this future hospital is immediately beside the central knot of the Turcot Interchange, towards the North-East. The CIQ has followed the public debates on this project closely and, through its collaboration with Montreal universities, has made an effort to understand how this project will affect the surrounding neighbourhoods.

Our five years of inter-neighbourhood collaboration around hospital site design, neighbourhood integration and social and economic issues related to the MUHC site in its urban context provides us with strong and well-informed opinions on the Turcot Interchange.

This sister mega-project will have permanent affects on our neighbourhoods' social and economic structure, on our quality of life and on our health, which we are highlighting in our brief to you today.

Construction period

Whatever is done to repair or replace the Turcot Interchange and its interconnected parts, a construction period that is expected to last many years, we want it to be undertaken with the highest degree of respect for the residents living in proximity to the works and on the service routes to and from the worksite.

A excellent example from recent experience is that followed by contractors during the decontamination of the Glen Yards, future site of the McGill University Health Centre, from 2005-2007.

A few highlights from this exemplary worksite will serve to illustrate what we would expect from the MTQ throughout the reconstruction:

To **keep dust down**, workers made liberal use of water: they cleaned the streets often (reducing dust raised by truck and car wheels); the trucks were watered; and the dusty loads were covered by tarps.

To respect local residents, **noise from the site was controlled**: hours of work were strictly regulated (so if start-time was 7am, trucks arriving early were not allowed to idle their engines before then); truck traffic to and from the worksite was directed along designated routes, planned to be as least offensive and to have the least impact on people (through uninhabited, industrial or low density routes).

Affected **public were informed and listened to**: The MUHC set up a hotline for personal complaints and actually responded to it, when people called; they held public meetings, well advertised in advance and well before work began, where the MUHC explained what would happen and the kind of disruptions that residents could expect; the MUHC maintained a clear and bilingual website. Importantly, residents who are living alongside the site or on affected routes should have detailed information, clearly explained and in both English and French, delivered right to their door. This measure was one of the most important features of the information campaign to local residents and should be used by the MTQ.

These simple and respectful measures, implemented during the decontamination of the Glen Yards site, made a big difference to residents and families living near the site and reduced resident anger and frustration with those responsible for managing the worksite.

Community benefits agreement

We believe there should be a formal, legally binding long term agreement in place to compensate residents for those negative effects that cannot be mitigated, in the form of a Community Benefits Agreement.

It is clear that the residents living in proximity to this worksite and on the routes that serve it will be inconvenienced: some will be heavily inconvenienced. This "human cost" to families and residents will be very difficult to measure, but literature suggests the effects may include, for some: reduced quality of life (both indoors and outdoors); health deterioration; frustration, fatigue and eventually displacement. And this, above and beyond those expropriated. A five year worksite, thousands of trucks, dust and noise (despite the best possible mitigation measures): there will be a cost to local residents—and only to these local residents—for this asset we call the Turcot Interchange.

This reconstruction project is necessary, many will admit. The rebuilt Turcot Interchange is essential for the regional, national and international economy. This structure will serve hundreds of thousands of residents each day coming from a great distance and going to many different destinations.

But only the residents and families will have to suffer the negative consequences of its reconstruction, which will be considerable.

We believe that the MTQ should dedicate a percentage of the capital costs of the reconstruction towards a **Community Benefits Agreement** (accord de benefices a la collectivité) that will in part compensate for these negative effects, to be invested directly into the neighbourhoods directly affected.

A Community Benefits Agreement is a legally-binding contract between a developer, the City and the community sector (often a trusted and representative community group with the capacity to manage the agreement, of which our neighbourhoods have several).

While such agreements are often prompted by recognition that large-scale projects impose hardships on their host communities, the agreements have created the basis for highly successful projects that achieve their primary aims and fit well in their local environment. In the best examples, the project becomes a motor for local development and help to knit new developments into their surrounding urban context.

In such cases, significant contributions to local communities have taken diverse forms that include: direct financing of parks or community centres, affordable and non-profit housing, adoption of local employment and training initiatives and the achievement of higher environmental standards.

Research shows that where community benefits agreements do not set minimum, legally binding targets in their areas of concern, agreements are difficult to evaluate, impossible to enforce, and can result in a failed partnership.

See Appendix A for details.

Increased pollution: reduce capacity

We believe the Turcot project should aim to reduce capacity and reduce traffic volumes, not maintain or increase them.

We want to make three distinct points here:

One: the scientific literature shows conclusively that living in proximity to major highways is not good for human health. Clear evidence shows that living within a 200 meter perimeter of a congested roadway increases the risk of premature death in seniors; increased risk of cardio-pulmonary disease; asthma; sleep disorders and the list continues. This has been amply shown by the Direction de santé publique and associated Montreal researchers, and in a growing body of scientific literature from around the world. (We attach a diagram showing the 200 meter limit around the Turcot Interchange, prepared by the DSP.)

It is in all our interests to reduce car capacity on inner city roads, given the ecological crisis we find ourselves in, but it is also paramount that we not ignore the scientific literature that addresses the immediate costs of this infrastructure to local residents.

It is morally imperative that we make best efforts to reduce these negative health costs: it seems to us that this is best done by reducing highway capacity, not increasing it.

Two: the Turcot Interchange is one of the most important concentrations of air pollution in our City and it is only a few hundred meters from the site of the Shriner's Hospital for Children and the McGill University Health Centre.

Wind is an important factor with regards to air pollution. Is the MUHC site downwind from the knot of the Turcot Interchange and therefore directly in line with the pollution plume coming off this highway intersection? We have not for certain verified this, but student research suggests it is, and if so, this should be a concern to everyone. California law does not permit hospitals to be built within 500 feet of highways.

The site for the McGill University Health Centre was decided on many years ago, and before many of these local studies were undertaken: we are not suggesting that we move the hospital site.

We believe this is another good reason for taking important steps to reducing the traffic capacity on these highways.

Three: we concur with a growing number of critics of the MTQ proposal on its basic premise, that we must build increased capacity on our highways to solve the congestion problem and to meet projected growth in the suburbs.

We will not here address this argument in detail, which is no doubt done better elsewhere, but simply share with you a major theme of our interneighbourhood conversation during the past 4 years, which we are actively researching through the community-university research alliance (CURA).

In the coming years and decades, we see a more compact and dense neighbourhood development in our communities surrounding the Glen Yards site. We hope to see more social and community infill housing built for existing residents, but also housing for workers at the MUHC. We see local residents getting jobs at the McGill mega-hospital.

We see hundreds of workers living close enough to the McGill University Health Centre, their place of work, that they can walk or bike there.

We see thousands of others living on or close to mass-transit lines that have easy and fast access to their place of work, without having to come by car.

Our vision of our neighbourhoods, then—and by extension, our City—is one that is more densely populated, where active transport is the preferred way to get around, where cars have a place but a much less prominent place on the roads, and where the quality of life is second to none in Montreal.

Access between MUHC and the South-West

We want a solution that permits and even enhances pedestrian, bicycle and car access to the Glen Yards site and that supports an economic exchange between the MUHC site and St-Henri and Cote St Paul. We also see a solution that emerges over the next 5, 10 and 20 years as our City and our transport patterns evolve.

First: easy and agreeable access from the South West to the MUHC's Glen Campus. We have carefully reviewed the plan proposed by the MTQ and various options that have been discussed in the community networks, and we come to only one conclusion: the structure between the centre of the knot of the Turcot Interchange and the Ville Marie Expressway must be elevated. It cannot be buried. The worst possible solution—that proposed by the MTQ— is to put the structure on embankments, permanently walling residents of the South-West from their hospital and from access to the North.

One of the central concerns at the origin of our Interneighbourhood Coalition has been ensuring an agreeable access to the Glen Yards hospital site, from the South-West. Urban planners from the South-West Borough stated this concern very clearly in briefs submitted during the 2005 public consultation. Community groups and residents have repeatedly represented this in different contexts. Many design students have studied the problem, and we anticipate the competing PPP consortia will each have their own solution to this question of the South West doorway.

No one is denying that this design problem is significant. The MTQ solution should enable and support this critical hospital design constraint, not work to its detriment and ultimate failure.

Second: access that strengthens the economic links to the South West. The MUHC represents an important economic driver in the local economy, both as a source of "buyers" for local businesses (8000 employees and 2.2. million visitors annually); but also and more deeply as a force that will "evolve" the local industrial sector towards complementary research and "spin-offs" activities, estimated at 5 times the building volume of the hospital itself (Arbour 2005).

Walling the hospital off from underdeveloped areas close to the site in St. Henri, Cote St Paul and other parts of the South West threaten to weaken this connection and the potential benefits that could accrue for these neighbourhoods.

Third: when rethinking these elevated structures, we hope that the MTQ will work more closely with the City of Montreal and other possible partners to reinvent the "dead spaces" we see underneath them. We could be inspired by the research undertaken by Les Amis de la Montagne, where cities like Portland Oregon have built networks of mountain bike trails underneath their elevated highways. Montreal can and should get more creative about how it thinks of these areas, inspired by a growing number of examples across North America.

Protect the Falaise Saint Jacques:

The Concertation Interquartier has long been concerned about the future of the Falaise St Jacques. We trust that this concern is being dealt with by others in their briefs, and we will only touch on this matter briefly, in ours.

We concur with expert opinions that the MTQ proposal to move all East-West transport into a "transport corridor" and push this up against the Falaise will extinguish the potential of this vast green space to become a City asset. We are not persuaded that the additional costs of moving this stretch of highway (both financial and environmental costs) would release more "viable" hectares of land for development, than leaving the roads and railways where they are now. Careful landscaping, use of berms or sound-barriers, could create a large area beside the Falaise propitious for urban densification.

We refer BAPE commissioners to chapters by Pieter Sijpkes and Patrick Asch in a recent book: *Montreal at the Crossroads: Superhighways, the Turcot and the Environment,* for an excellent treatment of this question. This book is a product of our community university partnership (CURA: Making Mega-Projects Work for Communities).

Coherency between projects, agencies and promoters:

We would like to comment briefly on the apparent lack of coordination and coherency between several of the major projects that are under discussion and being planned for our neighbourhoods.

We will mention only three: the train shuttle to Dorval Airport; the Turcot Interchange and the Glen Campus of the MUHC. (We are deliberately leaving out a half a dozen others.)

We start this observation with a brief anecdote.

A CIQ representative attended a public meeting organised by the MTQ in Westmount, just a few months ago. She asked the MTQ representative if there had been any coordinating meetings between the MUHC and the MTQ, around plans for the Turcot Interchange. The MTQ representative shrugged his shoulders in a gesture that suggested "why should we?" and said flatly: "non".

We have all seen the posters and the Powerpoint slides that show the logos of the participating agencies and organisations around these various mega-projects, but the information we have gathered over the years through various contacts suggests **very little collaboration and coordination activities are actually happening**, on and between this various projects, which incidentally require vast sums of public money.

We believe there is an urgent need for high-level, multi-partner discussions on these three major projects to identify and creatively solve some of the issues raised in this brief, and many others.

We also believe that these three projects imply a careful attention to land-use planning which must be undertaken simultaneously and in complement to these major projects. We associate these capacities with the City of Montreal.

Thank you very much for allowing us the time to present our comments and concerns, at this public audience.

Best regards,

Leslie Bagg for the Concertation Inter-Quartier

























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NTENTE DE PARTENARIAT

PRÉAMBULE

Ce document vise à énoncer les termes de l'entente de partenariat entre le Centre universitaire de santé McGill (CUSM) et la concertation Inter-quartiers des organismes sociosanitaires, économiques et sociaux des communautés de Notre-Dame-de-Grâce, Westmount et le Sud-Ouest de Montréal, qui constituent les communautés environnantes du futur pôle hospitalier Glen du CUSM.

BUT DE L'ENTENTE

Établir des mécanismes de communication et de participation entre les partenaires (nommés au suivant) afin d'assurer l'intégration harmonieuse du CUSM au sein de sa communauté d'accueil.

LES PARTENAIRES

LE CENTRE UNIVERSITAIRE DE SANTÉ MCGILL (CUSM)

Représenté par les personnes désignées par les autorités du CUSM

8

LA CONCERTATION INTER-QUARTIERS

Représentée par les personnes désignées par les autorités du CLSC Notre-Dame-de-Grâce / Montréal-Ouest, CLSC Métro, CLSC Saint-Henri, CDEC Côte-des-Neiges/Notre-Dame-de-Grâce, Centre contactivité, RESO, Solidarité Saint-Henri, Conseil communautaire de Notre-Dame-de-Grâce et l'Association municipale de Westmount

L'ENTENTE

- 1 Les partenaires conviennent de constituer un Comité conjoint.
- 2 Le Comité conjoint, selon un modèle de partenariat d'action, établira un dialogue ouvert et privilégié permettant ainsi une collaboration constructive et pragmatique.
- 3 Les domaines/sujets des préoccupations principales seront probablement, mais non exclusivement :
 - L'aménagement (environnement, circulation...)
 - Les emplois directs et indirects, l'employabilité et la formation
 - Le développement économique (entreprises et services)
 - □ L'habitation
 - Les enjeux et services en santé préoccupations de la communauté
- 4 Le Comité conjoint comprendra deux à quatre (2-4) représentants du CUSM et trois à quatre (3-4) représentants de la concertation Inter-quartiers. D'autres personnes seront invitées aux rencontres, selon les besoins identifiés vis à vis l'expertise demandée.
- 5 Le Comité conjoint se rencontrera, minimalement, quatre (4) fois par an.
- 6 Le Comité conjoint se dotera de ses propres règles dès la première rencontre.
- 7 Les partenaires signataires de cette entente s'entendent à conjuguer leurs efforts afin d'optimiser les impacts positifs de la venue du CUSM et son intégration dans les milieux environnants et ce dans le contexte de sa mission et de son mandat sociosanitaire, tels que définis par le MSSS.
- 8 Suite à un accord commun des partenaires, d'autres organismes pourront s'intégrer au partenariat de la concertation Inter-quartiers et du CUSM.

ARTNERSHIP AGREEMENT

PREAMBLE

This document outlines the terms of the partnership agreement between the McGill University Health Centre (MUHC) and the Inter-Neighbourhood Coalition of local community health, economic, and social agencies from the communities of NDG, Westmount and the Sud-Ouest de Montréal, which are adjacent to the future home of the MUHC's Glen Campus.

AIM OF THE AGREEMENT

To establish a means of communication and participation between the partners (named below) in order to ensure the harmonious integration of the MUHC into the surrounding community.

PARTNERS

THE McGILL UNIVERSITY HEALTH CENTRE

As represented by the persons designated by the MUHC

8

THE INTER-NEIGHBOURHOOD COALITION

As represented by the persons designated by the CLSC Notre-Dame-de-Grâce/ Montréal-Ouest, CLSC Métro, CLSC Saint-Henri, CDEC Côte-des-Neiges/Notre-Dame-de-Grâce, Contactivity Centre, RESO, Solidarité Saint-Henri, Conseil Communautaire de Notre-Dame-de-Grâce and the Westmount Municipal Association

AGREEMENT

- 1 The partners agree to form a Joint Committee.
- 2 The Joint Committee, following an active partnership model, shall establish an open and accessible dialogue opening the door to constructive and practical collaboration.
- 3 The areas/subjects of principal preoccupation will most likely, although not exclusively, be:
 - Site development (environment, circulation...)
 - Direct and indirect employment, potential employment and training
 - Economic development (businesses and services)
 - Mousing
 - Challenges in health care service delivery community concerns
- 4 The Joint Committee shall be composed of two to four (2-4) representatives from the MUHC and three to four (3-4) representatives from the Inter-Neighbourhood Coalition. Other persons may be invited to meetings according to expertise required relative to identified needs.
- 5 The Joint Committee shall meet at least four (4) times per year.
- 6 The Joint Committee shall determine its rules at the initial meeting.
- 7 The signing partners to this agreement agree to combine their efforts in order to optimize the positive impacts of the arrival of the MUHC and its integration into the surrounding communities in the context of its mission and social-health mandate defined by the MSSS.
- 8 Following an agreement by the partners, other agencies may join the Inter-Neighbourhood Coalition and MUHC partnership.



David M. Culver

Monsieur David Culver

Président du Conseil d'administration Chairman of the Board of Directors Centre universitaire de santé McGill McGill University Health Centre

Monsieur Louis-Paul Thauvette

Directeur général Executive Director CLSC Saint-Henri

Docteur Arthur T. Porter

Directeur général et chef de la direction Director General and CEO Centre universitaire de santé McGill McGill University Health Centre

Monsieur Pierre Richard

Directeur général Executive Director Regroupement économique et social du Sud-Ouest (RESO)

Madame Maggie St-Georges

Coordonnatrice Coordinator Solidarité Saint-Henri Monsieur Terry Kaufman

Directeur général
Executive Director
CLSC Notre-Dame-de-Grâce /
Montréal-Ouest

Madame Harriett McLachlan

Directrice générale Executive Director Conseil communautaire de Notre-Dame-de-Grâce Monsieur Claude Lauzon

Directeur général Executive Director CDEC Côte-des-Neiges / Notre-Dame-de-Grâce

Monsieur Gary Furlong

Directeur général Executive Director CLSC Métro **Docteur Henry Olders**

Président
President
Association municipale de Westmount
Westmount Municipal Association

Madame Mary Stark

Directrice générale Executive Director Centre Contactivité Contactivity Centre Signé à Montréal le

2004

Signé à Montréal le Signed in Montreal on

Community benefits agreements and similar precedents

Projects involving massive public investment in infrastructure are being cast by public authorities as an opportunity to require investment in the local community, increasingly in the form of a **community benefits agreement**. These tools help to better integrate or 'knit' new developments into their surrounding urban context. While such agreements are often prompted by recognition that large-scale facilities impose hardships on their host communities (e.g., noise traffic, and parking difficulties, gentrification and displacement, decline or closure of local businesses, and creation of unpleasant zones - such as large busy roads, parking structures, wind tunnels, impermeable buildings - with corollary loss of street life) , the agreements have created the basis for highly successful projects that achieve their primary aims and fit well in their local environment. In the best examples, the project becomes a motor for local development and help to knit new developments into their surrounding urban context.

Examples of successful partnership show that community benefits agreements, or similar protocols, can assist in the design, implementation and management of quality developments that garner local support, as seen in:

- St. Bartholomew's and The Royal London Hospital in London
- Yale University's construction of a cancer research hospital in New Haven
- Los Angeles International Airport's \$11 billion modernization project
- McGill University's Solin Hall student residences in the Sud-Ouest borough of Montreal
- the Vancouver (Olympic Bid) Agreement, and
- Hydro-Quebec's wind-generated electricity projects.

In such cases, significant contributions to local communities have taken diverse forms that include: direct or leveraged financing of public amenities (parks, community centres) and affordable housing, adoption of employment and training programmes, achievement of higher environmental standards in building processes and design, and partnerships with community-based organisations and municipal entities to produce such contributions.

Research shows that where community benefits agreements do not set minimum, legally binding targets in their areas of concern, agreements are difficult to evaluate, impossible to enforce, and can result in a failed partnership. The RFP stage of a public bid provides an opening for consideration of community benefits within a structured process. For example, in recent Hydro-Quebec Calls for Proposals, an evaluative weighting of 9 percent was given to required "sustainable development" elements. This requirement prompted significant community benefits for the local communities and the metropolitan regional councils in which these facilities will be located.

Quebec is allowing for private profits in the delivery of public services, as in both the Hydro-Quebec example for the production of wind-generated electricity and the PPP proposed for the construction and maintenance of the MUHC facilities. This decision creates new opportunities for the MUHC-CIQ partnership. While the purpose of the PPP process is to build the best possible hospital at the Glen Yards site, and to contribute to excellence in teaching, research

and medical service provision, it can also contribute to the creation of healthy neighbourhoods. Indeed, the best possible hospital, from the stance of the CIQ, is one integrated physically into its surroundings, situated in healthy, viable, affordable, inclusive neighbourhoods, and supportive of the local social and economic fabric. Community benefits agreements, through the designation of a clear process for citizen engagement and the specification of measurable and attainable goals, are a tool that can help realization of this vision.

Further details on a selection of past agreements follow. [The text of the California examples is from J. Gross' summary of CBAs in California, available at www.communitybenefits.org/index.php]

Devimco/Griffintown Agreement – 2007 – Montreal, QC

In 2007, Devimco and the RESO signed a partnership agreement that sought to minimize the negative effects of a \$1.3B real estate development project in the Griffintown neighbourhood of the SouthWest. This agreement also included an investment fund to promote local employment. Specific elements of the agreement included:

- 1/3 of all new jobs created on site targeted to local, unemployed residents.
- Collaboration between Devimco and local organisations and the Borough to facilitate moving dislocated businesses elsewhere in the Borough.
- A major financial contribution from Devimco to support workforce training and preparation for unemployed workers in the SouthWest.

Solin Hall protocol – 1989 – Montreal, QC

In 1989, McGill University and local community groups in St.-Henri, Montreal created an agreement that aimed to integrate an off-campus residence hall and the students into the community. Specific benefits of the agreement included:

- a \$500,000 loan at favorable lending rates for social housing
- employment of local contractors in construction of the facility
- research and training services to local community organisations

Southeast False Creek Olympic Village CBA--2006--Vancouver, BC

In 2006, the City of Vancouver and a community-based organisation worked with a private developer to ensure that the community gets substantial economic revitalization support from the developments associated with the Olympic bid. The agreement continues the City's commitment to use its tendering and project development processes to achieve community employment and procurement benefits. The implementation and monitoring of the Agreement is the responsibility of a community based economic development organisation. Benefits include:

- a \$750,000 legacy fund for pre-employment and skill development training
- 100 construction jobs for inner city residents
- 15,000,000\$ of goods and services purchased from inner-city businesses
- other business opportunities for inner-city businesses
- project benefits both social enterprises (social economy businesses) and local businesses

Hydro-Quebec Sustainable Development RFP--Quebec 2007

In the 2007 call for tenders for the production of 2000 megawatts of wind energy, Hydro-Quebec required private sector bidders to negotiate legal agreements with local communities which translate into economic benefits for landowners, local residents, the MRC and the province. Minimum targets were set, for example that.

- 60 percent of all project spending must be made in Quebec
- 30 percent of all project spending must be made in the local region of Quebec

- A minimum of 2000\$ per megawatt produced per year (20 years) shall go to the local MRC (typical project is 100 megawatts, equal to 200,000\$ per year)
- Local industries are created and local employment.

Dockside Lands project -- Victoria, BC -- 2005

In the redevelopment of a municipally owned waterfront property, the City of Victoria established Green Performance Indicators to measure and monitor the social, economic and environmental impacts of the project. The model demonstrates how to evaluate the benefits and impacts of major development, including environment (land, energy, transportation, water resources, solid waste, and urban ecology) social (diversity, housing affordability, health and well-being, livability, community) and economic (employment and economic activity, infrastructure, revenue for the municipality). Specific targets include:

- LEED Platinum for the development
- Affordable Housing Contribution of \$3 million

Staples CBA -- Los Angeles 2001

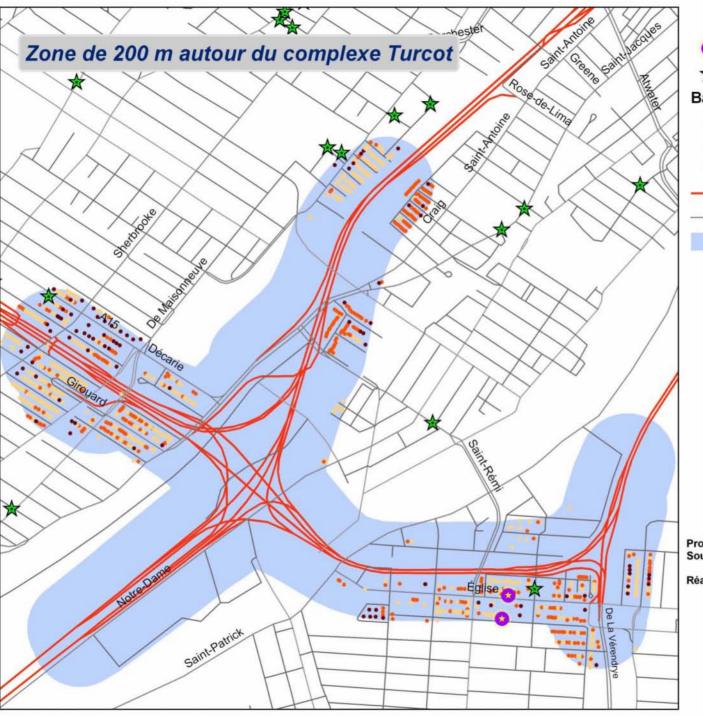
In May of 2001, the Figueroa Corridor Coalition for Economic Justice negotiated a comprehensive CBA for the Los Angeles Sports and Entertainment District development, a large multipurpose project that includes a hotel, a 7,000-seat theater, a convention center expansion, a housing complex, and plazas for entertainment, restaurant, and retail businesses. Public subsidies for the project may run as high as \$150 million. The Staples CBA includes an array of community benefits, including:

- a developer-funded assessment of community park & recreation needs, and a \$1 million commitment toward meeting those needs;
- a goal that 70% of the jobs created in the project will pay the City's living wage, and consultation with the coalition on selection of tenants;
- a first source hiring program targeting job opportunities to low-income individuals and those displaced by the project;
- increased affordable housing requirements in the housing component of the project, and a commitment of seed money for other affordable housing projects;
- developer funding for a residential parking program for surrounding neighborhoods; and
- standards for responsible contracting and leasing decisions by the developer.

Los Angeles International Airport CBA -- Los Angeles 2004

In 2004, the LAX Coalition for Economic, Environmental, and Educational Justice and the Los Angeles World Airports, the governmental entity that operates LAX, entered into the largest CBA to date, addressing the Los Angeles International Airport's \$11 billion modernization plan. Community benefits have been valued at half a billion dollars. The CBA has been hailed as a model for future airport development nationally. The CBA also includes detailed monitoring and enforcement provisions. The benefits include:

- \$15 million in job training funds for airport and aviation-related jobs;
- a local hiring program to give priority for jobs at LAX to local residents and low-income and special needs individuals:
- funds for soundproofing affected schools and residences;
- retrofitting diesel construction vehicles and diesel vehicles operating on the tarmac, curbing dangerous air pollutants by up to 90%;
- electrifying airplane gates to eliminate pollution from jet engine idling;
- · funds for studying the health impacts of airport operations on surrounding communities; and
- increased opportunities for local, minority, and women-owned businesses in the modernization of LAX.

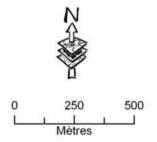


Résidence personnes âgées



Bâtiment résidentiel

- 1 à 2 logements
- 3 à 6 logements
- 7 logements et plus
- Autoroute
- Réseau routier
- 200m ou moins d'une autoroute



Projection : NAD83 MTM zone 8 Sources : Ville de Montréal;

Ministère de l'éducation du Québec

Réalisation : S. Goudreau (2008)

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Agence de la santé et des services sociaux de Montréal

