

GRAND RIVER HOSPITAL AND ST. MARY'S GENERAL HOSPITAL SITE SELECTION – STAGE 1 MANDATORY AND STAGE 2 EVALUATED CRITERIA

STAGE 1 MANDATORY CRITERIA

1. Proposed sites must contain a minimum of 50 acres of contiguous land and be comprised of lands that have sufficient frontage and depth suitable for the development of a hospital. Larger sites will be scored higher in Stage 2 evaluation.
2. Proponents must be a person or entity with legal ability to enter into an agreement with the Hospitals and execute a transaction to convey the Proposed Site.
3. Proponents must provide an attestation which denotes all known natural topographic and soil conditions, including, water features, flood plains, landforms, or conservation designations that could adversely affect or limit construction on the Proposed Site.
4. The Proposed Site must be serviced, or serviceable by natural gas, electricity, regional water, regional wastewater, and communications infrastructure. If not currently serviced, Proponents shall disclose an estimated timeline for servicing.
5. The Proposed Site must have attributes that allow for the creation of a heliport that meets the requirements of Canadian Aviation Regulations (CARs) 2019 1, Standard 325 (“CAR Requirements”).
6. The Proposed Site must be located greater than a minimum of 70 metres from a Class II Industrial Facility, or 300 metres from a Class III Industrial Facility. Where applicable, the Proposed Site must comply with the Minimum Distance Separation (MDS) formulae and guidelines for prime agricultural areas.
7. Proponents must provide an attestation which provides detail on any known environmental contaminants, and specifically any that would require remediation prior to hospital development.
8. Proponents must provide an attestation which declares all known heritage and/or archaeological features present on the Proposed Site.

STAGE 2 EVALUATED CRITERIA

1. Proposed Site location relative to current and future population density / residential growth areas as indicated in the region's Official Plan. Proposed Sites closer to current and future population density shall be scored higher.
2. Proposed Site location as measured by surface travel distance to access points: 1) major arterial highways; 2) major arterial roadways; 3) secondary roads. Proposed Sites with shorter distances to each of these types of access shall be scored higher.
3. Proposed Site location as measured by surface travel distance to the closest public transit access points, including: 1) light rail transit; 2) primary bus routes (express bus routes); 3) secondary bus routes; 4) GO Transit / Via Rail. Proposed Sites closer to modes of public transit shall be scored higher.
4. Costs related to the Proposed Site including: 1) cost of purchase of land; 2) estimated cost of any environmental remediation required; 3) estimated servicing costs (if applicable). Proposed Sites with lower costs shall be scored higher.
5. Size of the Proposed Site is over the minimum of 50 acres. Larger Proposed Sites shall receive higher relative scores.
6. Value-added components that Proposed Sites brings (e.g., transaction simplicity, partnerships, brownfield/greenfield site characteristics, etc.). Proposed Sites with value-add components shall be scored higher.
7. Positive site features that enhance patient and staff experience of the health care facility and contribute to the Hospitals' goal of building a stronger and healthier community, such as access to nature, views, natural light, and prevailing winds. Proposed Sites with such positive features or attributes shall be scored higher.
8. Proximity to amenities that would enhance the experience of people, care workers, families, visitors and others in the community using the hospital (e.g., nearby businesses, services, etc.). Proposed Sites closer to such amenities shall be scored higher.
9. Amendments, if any, to the form of Option Agreement as attached hereto as Schedule 2 and form of Purchase Agreement as attached hereto as Schedule 3. Any changes (other than insertion of required information) will be assessed in terms of ability of the Hospitals to effectively transact with the Proponent.