

Appendix I

Peel 2041 Regional Official Plan Review – Draft Regional Official Plan Amendment 27  
Proposing Changes Related to Health, Built Environment and Age-Friendly Planning, and  
Technical and Administrative Updates

THE CONSTITUTIONAL STATEMENT

Part A, THE PREAMBLE, does not constitute part of this Amendment

Part B, THE AMENDMENT, consisting of amendment to the Text of the Region of Peel,  
constitutes Amendment Number 27 to the Region of Peel Official Plan.

**PART A – THE PREAMBLE**1. Purpose of the Amendment

To revise and add policies in the Regional Official Plan (Official Plan) for the purposes of conformity to Provincial initiatives and progress on planning issues affecting the Region such as health and the built environment, age-friendly planning, and technical and administrative updates.

2. Location

This Amendment applies throughout the Regional Municipality of Peel.

3. Basis**Regional Official Plan**

The Official Plan was initially adopted by Council on July 11, 1996 and approved with modifications by the Minister of Municipal Affairs and Housing on October 22, 1996. The Official Plan was subsequently reviewed through the Regional Official Plan Strategic Update (ROPSU) process that was initiated in 2002, as a scoped review of the Official Plan. This scoped review included three major amendments to the Official Plan related to regional forecasts and structure – Regional Official Plan Amendment (ROPA) 8 (updated population and employment forecasts reflecting the 2001 Census), ROPA 15 (North West Brampton urban boundary expansion), and ROPA Amendment 17 (established the 2021 Mayfield West Rural Service Centre Boundary). The next major updates were introduced to the Official Plan through the Peel Regional Official Plan Review (PROPR) that consisted of six amendments including ROPA: 21A, 21B, 22, 23, 24 and 25. The PROPR process brought the Official Plan into conformity with relevant legislation, plans and policies including the Provincial Policy Statement, 2005 (PPS), the Greenbelt Plan (2005) and the Growth Plan for the Greater Golden Horseshoe, 2006 (Growth Plan). Finally, ROPA 26 introduced policies that were supplemental to those established by the PROPR process. The 1996 Official Plan, as amended by the above-noted amendments, constitutes the current version of the Official Plan pertaining to growth management and regional forecasts.

**Peel 2041 Regional Official Plan Review and ROPA 27**

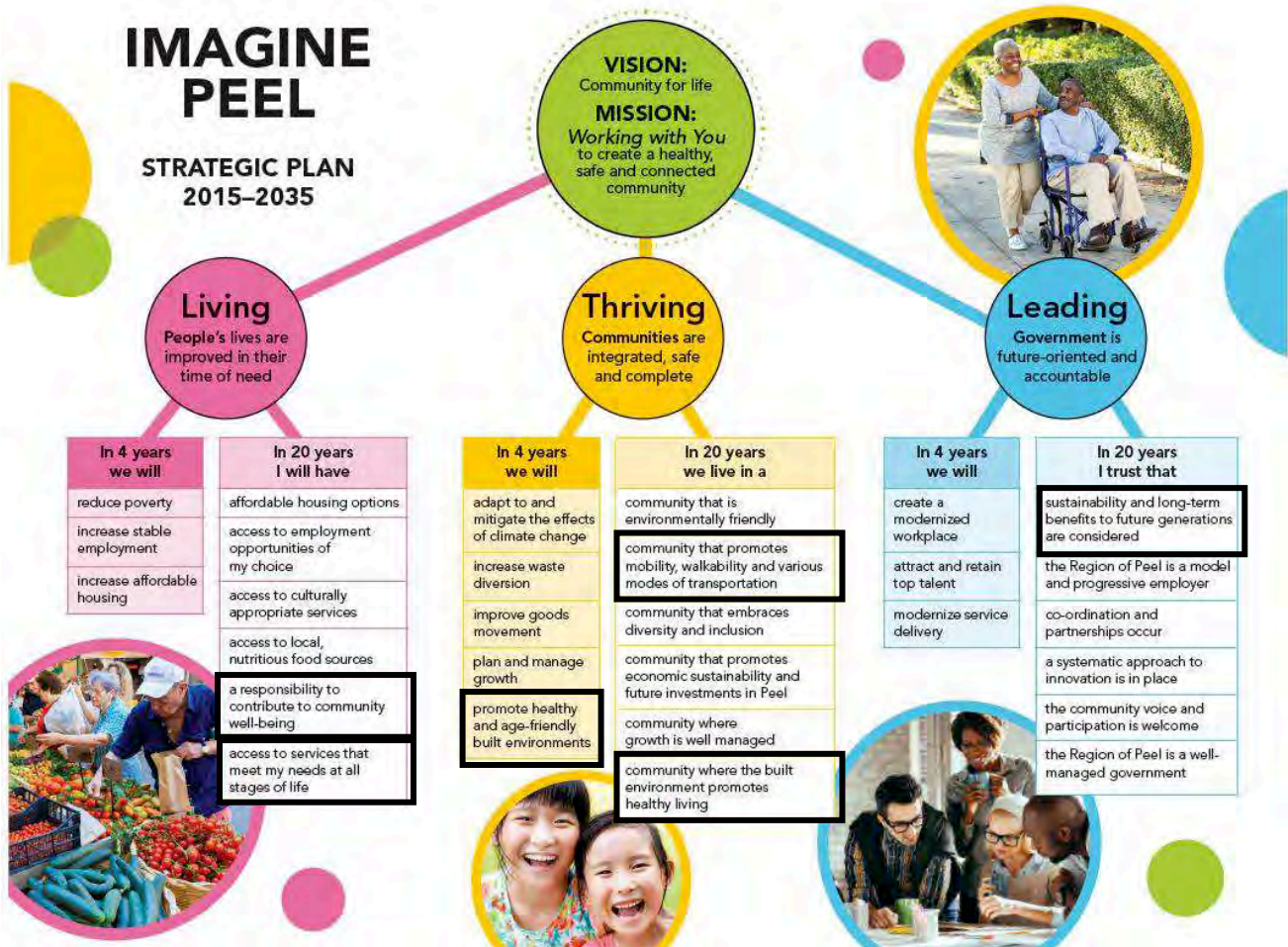
In accordance with the endorsed work program, the Peel 2041 Regional Official Plan Review (Peel 2041) is being completed through several policy review projects that will result in ROPAs. These amendments will bring the Official Plan into conformity with provisions of Amendment 2 to the Growth Plan, the Provincial Policy Statement (PPS) 2014, *Affordable Housing Act*, 2011 (Bill 140), *Smart Growth for Our Communities Act*, 2015 (Bill 73), and other Provincial policy initiatives.

ROPA 27 is the first amendment of Peel 2041. In addition to Provincial requirements, this amendment also supports the following components of the Region's 20-Year Strategic Plan and 4-Year Term of Council Priorities which was approved by Regional Council on November 12, 2015:

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ROPA 27 supporting the following Strategic Plan components and Term of Council Priorities:



ROPA 27 introduces new and updated policy areas such as health and the built environment, age-friendly planning, and technical and administrative updates. The built environment and age-friendly communities are elements that contribute to active and healthy communities. The Region has a prominent role in advancing these elements that have inter-relationships that inform each other's plans and actions. An integrated approach to address these issues is needed to inform the implementation of the ToCP - Promote Healthy and Age-Friendly Built Environments. The PPS 2014 includes updated policies to support active and healthy communities by building on existing policies on public spaces to include community connectivity and providing for trails and linkages. Also, *Smart Growth for Our Communities Act, 2015* (Bill 73) adds language to the *Planning Act* on promoting built-form as a matter of Provincial interest for municipalities to have regard to. Proposed ROPA 27 helps implement these planning goals and objectives while advancing Regional planning interests.

Through the policy review projects, revisions to the Plan's text are being proposed to ensure that the Official Plan is up-to-date, conforms to provincial policy requirements and addresses the Strategic Plan and Term of Council Priorities.

### **Health and the Built Environment**

Regional Council has identified several Strategic Objectives from the Strategic Plan for the built environment that promotes healthy living and walkability. To support the Region's efforts in promoting healthy living and walkability the PPS 2014 includes new policies in section 1.5 Public Spaces, Recreation, Parks, Trails and Open Space to promote healthy and active communities by planning public streets, spaces and facilities to facilitate active transportation and community connectivity. Further additions to the PPS 2014 include planning and providing for equitable distribution of publicly-accessible built and natural settings for trails and linkages. The *Smart Growth for Our Communities Act*, 2015 (Bill 73) adds language to the *Planning Act* on promoting built-form as a matter of Provincial interest. The built-form is to be well-designed, encourages a sense of place, and provides for public places that are of high quality, safe, accessible, attractive and vibrant. The draft policies on health and the built environment aim to increase the application of health-based criteria into the land-use planning process across the Region.

To achieve this objective, the principles of the policies approved through ROPA 24 and 25 have been expanded upon and strengthened through ROPA 27. ROPA 24 and 25 introduced the need for health assessment tools and raised awareness of health impacts linked to the built environment. The policies in ROPA 27 will enable the Healthy Development Framework to be implemented at the Regional level and with the local municipalities by requiring a health assessment to be completed as part of a complete application for planning and development proposals. In addition, the Region and local municipalities will have to conduct a health assessment on Regional or municipal buildings, public squares and open space projects. The proposed policies will ensure municipal councils are informed of the health impact of development and support the ongoing monitoring and evaluation of the health impacts of development at the Regional and municipal levels.

The final Healthy Development Assessment User Guide which contains the Healthy Development Assessment Framework will be brought forward to be requested for approval by Regional Council at the same time as when ROPA 27 is recommended for adoption in later 2016.

The policies enable the creation of healthier communities through improving the built environment by optimizing the health promoting potential, namely through active transportation.

### **Age-friendly Planning**

Seniors (individuals aged 65 and older), are the fastest growing age group in Peel and across Canada. The strongest impact of this change will be experienced over the next several decades, as the 'baby boomer' population ages. Issues such as aging within the same community, establishing complete/walkable communities, and accessibility are important to meeting the needs of seniors. The Term of Council Priority on promoting

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healthy and age-friendly built environments is supported by Peel 2041 and will introduce policies that support the establishment of age-friendly communities.

Peel 2041 presents an opportunity for the Region to respond to: senior level governmental initiatives including the Province's "Action Plan for Seniors", address the needs of an increasing seniors population in our communities, and build on the existing policy framework.

The Age-friendly Planning discussion paper has identified strengths and opportunities to advance the development of age-friendly communities and is proposed as part of ROPA 27. The discussion paper has identified opportunities for the local municipalities to develop official plan policies to support seniors to age in place. Universal accessibility design in the built form can be encouraged to create a safe, barrier-free and more inclusive environment. The Healthy Development Framework is required to be implemented by the local municipalities to ensure active and healthy aging in Peel. Also, there should be an assessment of the built environment in neighborhoods to support universal accessibility.

**Technical and Administrative Updates**

In order to improve clarity, address errors, omissions, inconsistencies in the text and in the schedules and figures that are currently in effect, a policy will be implemented through ROPA 27 that does not affect the intent of existing policies.

Currently, an official plan amendment is required to address revisions such as italicizing certain references to reflect those defined in the Glossary; correcting references that have been incorrectly italicized; bolding or removing the bolding of titles; minor revisions to maintain consistency; and a number of typographical errors. Such proposed modifications do not in any way change the intent of any of the approved policies, schedules and figures in the Official Plan, and do not propose modifications to those amendments to the Official Plan that are before the Ontario Municipal Board.

The new policy will allow for such revisions to be made through the preparation of an office consolidation of the Plan without undertaking a formal official plan amendment process. This approach is similar to other municipal official plans and will improve clarity and accuracy of the Official Plan.

Other revisions consist of updates to the Official Plan reflecting current planning administration in Peel, and to improve and clarify the understanding of existing policies. For example, approving plans of subdivision, plans of condominium, and local official plan amendments that conform to the Regional Official Plan have been delegated to the local municipalities.

Further revisions include updating terminology in several policies areas. For example the term Long Term Waste Resource Management Strategy has changed to Waste Reduction and Resource Recovery Strategy in 2012 to reflect specifically how waste is to be managed.

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## **PART B – THE AMENDMENT**

All of the Amendment entitled PART B – THE AMENDMENT, consisting of the attached text constitutes Regional Official Plan Amendment 27 to the Region of Peel Official Plan.

### **a. Amendments to Text – Health and the Built Environment**

1. Chapter 5, Regional Structure, section 5.4.3.2.8.1 is amended by deleting it:

~~“5.4.3.2.8.1 Healthy Communities and the Built Environment~~

~~The *Region of Peel* is committed to creating *healthy communities*. A *healthy community* includes, but is not limited to, pedestrian-friendly and transit-supportive *infrastructure* that enables and encourages physical activity through *active transportation*. *Active transportation* is greatly impacted by the following interconnected elements of the built environment: Density, Service Proximity, Land Use Mix, Street Connectivity, Streetscape Characteristics, and Parking. Standards for these elements are further defined in the *Health Background Study Framework*. In partnership, the Region and area municipalities will:~~

- ~~— Incorporate health considerations into the planning and *development* review processes through the integration of the *Health Background Study Framework* elements and subsequent *health assessments*.~~
- ~~— Develop and apply the *Health Background Study Framework* implementation plan to operationalize in the local context.~~
- ~~— Create built environments that facilitate physical activity and optimize the health promoting potential of communities.”~~

2. Chapter 7, Implementation, Section 7.3.6.2.2 is amended by replacing “public health impact studies” with “health assessment as defined by the *Healthy Development Framework*”.

“Require the following studies, reports and documents when determining if an application to amend the Regional Official Plan is complete:

- a completed Regional Official Plan Amendment application;
- the current application fee;
- a draft of the proposed amendment, including the proposed text and all proposed schedules;
- at least one pre-consultation meeting to determine the required studies, reports and documents; and
- other studies, reports and documents as required through the pre-consultation meeting or meetings.

The following list includes studies that may be required to evaluate an application to amend the Regional Official Plan:

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- ...
- ~~public health impact studies~~ health assessment, defined by the *Healthy Development Framework*;
  - ...
3. Chapter 7, Implementation, is amended by inserting the following new Section 7.4 entitled “Healthy Communities and the Built Environment” with the following preamble, objectives and policies; and renumbering the existing Section 7.4 Crime Prevention Through Environmental Design as 7.5, the existing Section 7.5 Emergency Measures as 7.6; the existing Section 7.6 Regional Planning Initiatives as 7.7; the existing Section 7.7 Regional Road Widening as 7.8; the existing Section 7.8 Regional Finances as 7.9 and the existing Section 7.9 Performance Measurement, Review and Updating as 7.10:

#### **“7.4 Healthy Communities and the Built Environment**

The *Region of Peel* is committed to creating pedestrian, cyclist and transit supportive infrastructure, which are key components of a *healthy community*. The outcomes of a *healthy community* are increased rates of *active transportation*, improved air quality and greater social connectivity.

*Healthy communities* are impacted by the following interconnected elements of the built environment: Density, Service Proximity, Land Use Mix, Street Connectivity, Streetscape Characteristics, and Efficient Parking. Health assessments take such elements into consideration when determining the health promoting potential of a *community*.

Health assessments will be incorporated into the *development* and review process. To achieve this, *the Region* will partner with area municipalities to:

- Identify appropriate health assessment tools
- Operationalize the implementation of such tools
- Monitor, evaluate and report on assessment results

##### **7.4.1 Objective**

To create built environments that facilitate physical activity and optimize the health promoting potential of *communities*.

##### **7.4.2 Policies**

It is the policy of *Regional Council* to:

- 7.4.2.1 Approve the *Healthy Development Framework*, which supports the implementation of the policies in this plan, Section 7.4. This Framework contains the Region’s Healthy Development Assessment tool and identifies health assessment tools that were developed by the area municipalities to address their specific development contexts; in consultation with *the Region*.

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- 7.4.2.2 Direct the area municipalities to incorporate policies in their official plans that endorse and align with the *Healthy Development Framework*, in consultation with *the Region*.
  - 7.4.2.3 Ensure *the Region* integrates the elements as defined in the *Healthy Development Framework* into its policies, plans, standards and design guidelines to optimize their health promoting potential.
  - 7.4.2.4 Direct the area municipalities to integrate the elements as defined by the *Healthy Development Framework* into its policies, plans, standards, and design guidelines to optimize their health promoting potential.
  - 7.4.2.5 Direct the area municipalities to incorporate a policy in their respective official plans to require a health assessment, defined by the *Healthy Development Framework*, as part of a complete application for planning and *development* proposals. The area municipalities may require proposals to address the results of the health assessment to contribute to *healthy communities*.
  - 7.4.2.6 Require a health assessment, as defined by the *Healthy Development Framework*, to be completed to the satisfaction of the area municipalities for planning and development proposals and that results are reported to local council in consultation with the Region.
  - 7.4.2.7 Require Regional and area municipal staff to conduct health assessments as defined by the *Healthy Development Framework* on Regionally or municipally developed, owned and operated public buildings, public squares and open space project applications.”
  - 7.4.2.8 Work with the area municipalities to assess the community health and wellbeing of developed areas to inform development, policies, strategies and/or studies, that will ensure communities are age-friendly, walkable and contain a mix of housing options.
4. Chapter 7, Implementation, section 7.9.2.9 is amended by deleting it:
- ~~“Prepare, jointly with the area municipalities, an assessment tool that will allow evaluating the public health impacts of proposed plans or development as part of the approval process.”~~



And replacing it with the following:

“Monitor, *jointly* with the area municipalities the application of the *Healthy Development Framework* for Regional and area municipal policies, plans, standards, and design guidelines; and applications for planning and *development* proposals to determine its effectiveness in contributing to *healthy communities*.”

5. Glossary is amended by inserting the following new addition:

**“Healthy Development Framework:** A collection of health assessment tools used to assess the health-promoting potential of planning or development proposals. This Framework is comprised of tools that have been adapted to include the following interconnected elements of the built environment: Density, Service Proximity, Land Use Mix, Street Connectivity, Streetscape Characteristics, and Efficient Parking to address the specific development contexts found in each of the area municipalities. This Framework contains *the Region’s* tool and the related area municipal assessment tools, adapted to the satisfaction of *the Region*.”

**b. Amendments to Text – Age-friendly Planning**

6. Chapter 6, Regional Services, is amended by inserting the following new Section 6.3 entitled “Age-friendly Planning” with the following introductory text, objectives and policies; and by renumbering the existing Section 6.3 Water and Water Services as 6.4 and existing Section 6.4 Waste Management as 6.5:

**“6.3 Age-Friendly Planning**

*Peel Region’s* demographic profile will change substantially in the coming years with the seniors population defined as those aged 65 and older doubling in size by 2031. While demographic changes in *Peel* are already being experienced, the strongest impacts will be felt over the next several decades as the baby boom population ages. It is important that *the Region* and the area municipalities plan, prepare and adapt our programs and *services* to meet the needs of the growing and changing senior population.

The increase in the senior population will impact the planning and delivery of Regional and area municipal *services* including *affordable housing*, accessible transportation, recreation, physical *infrastructure* and *community* health. *The Region* and the area municipalities recognize the challenges and opportunities posed by an aging population and will better plan for age-friendly *communities* that enable residents to age actively through supportive policies, *services* and *infrastructure*.

The *Region of Peel* supports the planning of age-friendly *communities* and will work collaboratively with the area municipalities to work towards this outcome. This includes providing access to a range of housing options that are affordable, transit that is accessible and the use of *universal accessibility* design in the physical environment. The vision is to plan for more age-friendly *communities* throughout *Peel Region* where seniors have access to supports that enable them to age safely and with dignity, while maximizing their quality of life.

### 6.3.1 Objectives

- 6.3.1.1 To recognize the diversity of *Peel's* aging population in terms of age, ability, gender, ethnicity, support needs, and income.
- 6.3.1.2 To provide for the needs of *Peel's* aging population and allow opportunities for seniors to age within their *community* including the integration of community facilities and services with residential land uses.
- 6.3.1.3 To promote the use of *universal accessibility* design in *Peel Region's* built environment to enhance safety, mobility, and independence of seniors.
- 6.3.1.4 To promote *active aging* for older adults by establishing healthy, complete, and accessible *communities* that are in close proximity to amenities, support services, and transit.

### 6.3.2 Policies

It is the policy of *Regional Council* to:

- 6.3.2.1 Encourage the area municipalities to develop policies in their official plans to support seniors to age within their *communities*, as provided for in the objectives of the Urban and Rural System sections of this Plan including the integration of *community* facilities and services with residential land uses.
- 6.3.2.2 Encourage the use of *universal accessibility* design in the built environment to create a safe, barrier-free, and more inclusive environment that will enhance the mobility and independence of all residents including seniors.
- 6.3.2.3 In accordance with policies in section 7.4 of this Plan, require the area municipalities to implement the *Healthy Development Framework* to support independent, active and healthy aging for all residents in *Peel* by creating healthy, walkable *communities* close to amenities, green spaces, programs and *services*.
- 6.3.2.4 Work with the area municipalities to assess supporting *services* and the built environment in neighbourhoods where there is a predominance of seniors to identify gaps with respect to *universal accessibility* and opportunities to better support *Peel* residents.”

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7. Glossary is amended by inserting the following new addition:

**“Active Aging:** the process of optimizing opportunities for health, participation and security in order to enhance quality of life as people age.”

**c. Amendments to Text – Technical and Administrative Updates**

8. Chapter 1, Introduction, Section 1.3.3, paragraph two is amended by deleting the second sentence:

~~“Except as expressly noted in Policies 7.2.2.3 and 7.2.2.7, any changes, additions, or deletions to these elements will require an amendment to this Plan.”~~

and replacing it with the following:

“Except as expressly noted in Policies 7.2.2.3, 7.2.2.7, and 7.2.2.9; any changes, additions, or deletions to these elements will require an amendment to this Plan.”

9. Chapter 6.2, Regional Human Services, the second paragraph is amended by replacing “ambulance” with “paramedic services”.

~~“The Region~~ is responsible for planning, delivering and/or contributing to the funding of a wide range of human *services*, including health services, social services, housing, ~~ambulance~~ paramedic *services* and emergency programs and police.”

10. Chapter 6, Regional Services, Section 6.2.2.9 is amended by inserting “and the Accessibility for Ontarians with Disabilities Act” at the end of the policy.

“Encourage the area municipalities to develop appropriate accessibility policies and regulations in their Official Plans, Zoning By-laws, Urban Design Guidelines, and Site Plan Manuals, in accordance with the Ontarians with Disabilities Act and the Accessibility for Ontarians with Disabilities Act.”

11. Chapter 6, Regional Services, Section 6.2.2.10 is amended by replacing “Prepare a” with “Review the” and delete “and review the plan”.

~~“Prepare a~~ Review the Regional Accessibility Plan ~~and review the plan~~, as required by the Ontarians with Disabilities Act, and make the plan available to the public.”

12. Chapter 6, Regional Services, Section 6.4 (renumbered to 6.5 as a result of new section 6.3 Age-Friendly Planning) is amended by deleting “incineration” and replacing “Long Term Waste Resource Management Strategy” with “Waste Reduction and Resource Recovery Strategy”.

“The municipal *waste* generated in *Peel* is managed by means of reuse, recycling, composting, ~~incineration~~ and landfill. In keeping with the sustainability theme of this

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Plan (environmental, social, economic, and cultural imperatives) *the Region* promotes reductions in material consumption and *waste* generation, and the recognition of *waste* as a valuable resource that, if fully utilized, can have minimal negative impacts on the environment. *The Region* will continue to focus on reduction, reuse, and recycling programs (3Rs), examine and implement *waste* management alternatives that recover resources from the residual waste stream, explore the resource potential of *waste*, strive for a cost-effective *waste* management system, and recognize waste as a valuable source of alternative energy. *Waste* will be managed so as to minimize environmental impacts and emphasize the responsibility of *waste* generators to reduce the amount and type of *waste* generated and bear the costs of collection and management.

The *Region* is responsible for *waste* management in Peel and is committed to maintaining the ~~Long Term Waste Resource Management Strategy~~ Waste Reduction and Resource Recovery Strategy to appropriately plan for and accommodate the present and future needs of citizens and businesses.”

13. Chapter 6, Regional Services, Section 6.4.2.3 (renumbered to 6.5.2.3 as a result of new section 6.3 Age-Friendly Planning) is amended by replacing “Long Term Waste Resource Management Strategy” with “Waste Reduction and Resource Recovery Strategy”.

“Maintain, in cooperation with the area municipalities, the ~~Long Term Waste Resource Management Strategy~~ Waste Reduction and Resource Recovery Strategy to achieve the *waste* management objectives by focusing on reduction, reuse, and recycling programs, and recovering resources of residual waste prior to landfill.”

14. Chapter 6, Regional Services, Section 6.4.2.4 (renumbered to 6.5.2.4 as a result of new section 6.3 Age-Friendly Planning) is amended by deleting “composting”.

“Actively encourage, promote and *support* the efforts of government, the area municipalities the private sector and the general public which reduce *waste*, or emphasize reuse, recycling, (3Rs), ~~composting~~ and other minimization options including extended producer responsibility.”

15. Chapter 6, Regional Services, Section 6.4.2.14 (renumbered to 6.5.2.14 as a result of new section 6.3 Age-Friendly Planning) is amended by replacing “Ministry of Environment’s” with “Ministry of Environment and Climate Change’s”.

“The *Region* and the area municipalities will consult with the ~~Ministry of Environment’s~~ Ministry of Environment and Climate Change’s Renewable Energy Approvals Section regarding possible Renewable Energy Approval requirements prior to the expansion of an existing, or the development of a new, waste management facility that produces energy from renewable sources.”

16. Chapter 6, Regional Services, Section 6.4.2.25 (renumbered to 6.5.2.25 as a result of new section 6.3 Age-Friendly Planning) is amended by adding “and Climate Change” after “Ministry of Environment”.

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- “View the use of land for landfill during the operational life of the site as an interim land use, until such time the landfill is deemed by the Ministry of the Environment and Climate Change and *Regional Council* to be closed and the land is suitable for other uses.”
17. Chapter 7, Implementation, Section 7.2.2.2 is amended by inserting “and 7.2.2.9” after “Policy 7.2.2.7”:
- “Any changes to the text, tables, schedules and glossary, except as expressly noted in Policy 7.2.2.7 and 7.2.2.9, will require an amendment to this Plan.”
18. Chapter 7, Implementation, is amended by inserting new Section 7.2.2.9:
- “An update to this Plan to correct minor errors shall be permitted without an official plan amendment, provided that the purpose, effect, intent, meaning and substance of the Plan are in no way affected. *The Region* is permitted to make the following revisions without the need for a Regional Official Plan amendment:
- a) changing the numbering, cross referencing, and arrangement of the text, Tables, Schedules, Figures, associated captions, or appendices;
  - b) revising or updating the base map information in Schedules and Figures;
  - c) altering punctuation or language for consistency;
  - d) correcting clerical, grammatical, typographical or technical mapping errors; and
  - e) adding explanatory or descriptive text, sidebars and images which are included for information purposes to assist users.”
19. Chapter 7, Implementation, Section 7.3.2.2 is amended by deleting it:
- ~~“Support, during the transition period in which area municipal official plans are brought into conformity with this Plan, those development proposals, official plan and zoning by-law amendments that are in general conformity with the objectives and policies in this Plan.”~~
- and replacing it with the following:
- “Support those *development* proposals, official plan and zoning by-law amendments that are in general conformity with the objectives and policies in this Plan.”
20. Chapter 7, Implementation, Section 7.3.3 is amended by replacing “On approval of this Plan by the Province, the” with “The”.
- ~~“On approval of this Plan by the Province, the~~ The Planning Act requires that the official plans of the area municipalities be amended to conform with this Plan.”
21. Chapter 7, Implementation, Section 7.3.3.2 is amended by deleting it:

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~~“It is the policy of *Regional Council* to require that the *area municipal official plans* be amended to conform with this Plan forthwith after the approval of this Plan, in part or in whole, by the Minister of Municipal Affairs and Housing.”~~

and replacing it with the following:

“It is the policy of *Regional Council* to require that the *area municipal official plans* conform with this Plan and amendments thereto.”

22. Chapter 7, Implementation, Section 7.3.4 is amended by deleting it:

~~“The *Region of Peel* has been assigned by the Minister of Municipal Affairs and Housing powers of approval for *area municipal official plans* and amendments, plans of subdivision and condominium, and land severances, and has been delegated the Minister’s approval authority for part lot control by laws and road closing by laws.”~~

and replacing it with the following:

“The *Region of Peel* has been assigned by the Minister of Municipal Affairs and Housing powers of approval for *area municipal official plans* and amendments, where appropriate. The power to approve plans of subdivision and condominium, land severances, and local official plan amendments that conform with the Regional Official Plan have been delegated to the area municipalities, as well as authority for part lot control by-laws and road closing by-laws.”

23. Chapter 7, Implementation, Section 7.5 Emergency Measures is amended by replacing “Emergency Measures” with “Emergency Management”.

“7.5 ~~Emergency Measures~~ Emergency Management”

24. Chapter 7, Implementation, Section 7.5 is amended by deleting it:

~~“The *Region of Peel* is responsible for the Regional Emergency Measures Plan which must be coordinated with all regional and municipal emergency plans to ensure consistency of content and application.”~~

and replacing it with the following:

“The *Region of Peel* is responsible for the Emergency Plan which must be coordinated with all regional, municipal and provincial emergency plans to ensure consistency of content and application.”

25. Chapter 7, Implementation, Section 7.5.2.1 is amended by replacing “Regional Emergency Measures Plan and Program” with “Region of Peel Emergency Plan”.

~~“Maintain a Regional Emergency Measures Plan and Program~~ Region of Peel Emergency Plan which ensures the provision and coordination of necessary services in the event of a major emergency or disaster, and coordinate such efforts with the area municipalities and emergency response agencies.”

## Revisions to the Regional Official Plan that don't require a Regional Official Plan Amendment

- Chapter 6, Regional Services, Section 6.1.1 is revised as follows:

### Regional services currently include:

#### Ambulance and Programs Regional Emergency Management

- ~~Land Ambulance~~
- 9-1-1 emergency number services
- ~~Emergency measures planning management~~ planning
- Regional fire co-ordination

#### Health Services

- Health protection
- Health promotion
- Disease prevention
- Long-term care ~~facilities~~ homes
- Paramedic services
- Community support services

#### Public Works

- Water supply and distribution
- Sewage collection and treatment
- Waste management
- Regional road construction and maintenance

#### Police Services

- Emergency and call response
- Investigation
- ~~Highway Traffic Act enforcement~~ Road safety services
- Community partnerships and problem solving
- Community education
- Funding OPP in Caledon

#### Financial contributions to:

- Conservation authorities
- ~~Hospitals~~
- ~~Children's aid societies~~
- GO Transit
- Assessment Services
- ~~GTA Pooling~~

#### Social Services

- Social assistance and employment programs
- ~~Service system planning and Mmanagement of~~ early learning services child care ~~system, including child care subsidies~~
- TransHelp for people unable to access regular transit
- Homelessness outreach ~~program~~
- Intake screening services for Ontario Works ~~in~~ Centre West Ontario
- Special needs resourcing for children
- Community programs funding

#### Regional Planning

- Planning policy
- Planning research
- Development review
- Transportation planning

#### Housing and Property Services:

- ~~Social Housing funding/administration~~
- ~~Social Housing development and property management~~
- ~~Promotion and support of Affordable Housing~~
- ~~Homelessness and housing initiatives~~
- ~~Peel Heritage Complex program~~
- Subsidized Housing funding/administration
- Subsidized Housing development and property management
- Housing and Homelessness Planning

#### Other Services

- Capital borrowing and financial services
- 2-1-1 number services for local community, social, health and government services information
- Peel Art Gallery, Museum and Archives (PAMA)
- Legislative Services



**REPORT**  
**Meeting Date: 2015-11-19**  
**Growth Management Committee**

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**DATE:** November 6, 2015

**REPORT TITLE:** **UPDATE ON CREATING HEALTHY BUILT ENVIRONMENTS IN PEEL**

**FROM:** Janette Smith, Commissioner of Health Services  
Dan Labrecque, Commissioner of Public Works  
Lorraine Graham-Watson, Commissioner of Corporate Services  
Eileen de Villa, MD MBA MHScc CCFP FRCPC,  
Medical Officer of Health

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**RECOMMENDATION**

**That a Regional Official Plan amendment be brought forward for consideration in order to strengthen plan policies to:**

- **Require health assessments as part of the development application process;**
- **Ensure municipal councils are informed of the health impact of development;**
- **Support the ongoing monitoring and evaluation of the health impacts of development at the Regional and municipal levels.**

**REPORT HIGHLIGHTS**

- Reducing chronic diseases such as diabetes and obesity requires creating supportive environments, such as complete communities, which enable health-promoting behaviours.
- Complete communities meet people's needs for daily living throughout an entire lifetime. Such communities provide convenient access to an appropriate mix of jobs, local services, a full range of housing, convenient access to public transportation, safe options for active transportation, and community infrastructure, including affordable housing, schools, recreation and open space for their residents.
- In light of the increasing diabetes and obesity rates in Peel, staff from Public Health and Planning have been directed to work together to assess the extent to which proposed land-use developments contribute to the development of complete communities.
- These efforts resulted in the creation of the Healthy Development Assessment (HDA), an evidence-based and user-friendly health assessment tool for the planning community.
- An evaluation of early versions of the HDA found success in raising awareness of the link between the built environment and health; integrating health-promoting elements into new and existing planning policies and documents; and testing the tool on a variety of development proposals and plans.
- Challenges brought forward through the evaluation suggest that implementation of the HDA has been inconsistent because it is not a required study; health assessment recommendations are not always addressed by proponents; and certain key elements of design require alignment of Regional and municipal public policies to better support healthy, complete communities.



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- In order to be more consistent and impactful in the future, the evaluation recommends that:
  - health assessments be required on new development,
  - the findings from these health assessments be reported to municipal councils, and
  - where planning policies and healthy development standards are misaligned, efforts be undertaken to identify and address the issues, and ongoing monitoring and evaluation of the health impacts of development at the Regional and municipal levels be completed.
- Overall, the healthy communities' agenda is well aligned with other Regional priority areas such as sustainability, growth, transportation demand management, active transportation including transit, and supporting an aging population.
- Further advancement towards designing healthy, complete communities will require continued, progressive Regional leadership and collaborative action across levels of government.

## DISCUSSION

### 1. Background

#### a) The underlying health issues: Obesity and diabetes

The circumstances in which people have been leading their lives have changed dramatically in recent decades. Alterations in our physical, social and economic environments have exerted powerful influences on food consumption and physical activity behaviors. Not unlike most developed countries, Peel residents less frequently walk or cycle to work, school and/or to run errands. Residents are more sedentary at work and deploy a multitude of labour-saving devices at home. The consequences of these societal changes include a population that is less active and fit, obesity rates that have doubled in a few decades and ever-increasing rates of diabetes. Not only does this situation reflect a direct threat to the health and wellbeing of the residents of Peel, but it hampers productivity as a society, and further stretches the capacity of the healthcare system.

#### b) The Link between Community Design and the Public's Health

Evidence indicates that reducing chronic diseases such as diabetes and obesity requires creating supportive environments, namely complete communities, which support health promoting behaviours. Complete communities meet people's needs for daily living throughout an entire lifetime by providing convenient access to an appropriate mix of jobs, local services, a full range of housing, and community infrastructure, including affordable housing, schools, recreation and open space for their residents. Convenient access to public transportation and options for safe, non-motorized travel is also provided.

The impact of designing healthier built environments is emerging in several jurisdictions across North America where, over the past decade, comprehensive policy change has been pursued to support this direction. In New York City, the feasibility of achieving policy change has resulted in demonstrable improvements in population behaviours, including increases in commuter cycling, reduced traffic injuries and increased transit use. New York City is also one of many areas in the U.S. that have demonstrated reductions in childhood obesity rates with the establishment of healthier schools, as well as a number of other initiatives to support walking and cycling.

## **UPDATE ON CREATING HEALTHY BUILT ENVIRONMENTS IN PEEL**

From an environmental health perspective, complete communities offer reduced pollution, reduced energy consumption, and protection of greenspace and habitats.

From a societal perspective, complete communities enable healthy aging in place, promote social connectivity, and mental health. Complete communities also encourage a range of housing options that contribute to the increased development of affordable housing stock and allow residents to remain in their communities if or when their lifestyle needs change.

### **c) Planning and Public Health**

In Peel, Public Health and Planning have undertaken a deliberate, yet evolutionary approach to shifting the paradigm towards planning for healthy built environments. Concerted efforts have been made across both sectors to raise awareness of this inter-dependent relationship and opportunities to advance shared goals. This has been accomplished through policy directives included in the Region of Peel Official Plan Amendments (ROPA) 24 and 25. These amendments required the Region:

- To work with area municipalities to raise public awareness of the health impacts of development
- To prepare an assessment tool to evaluate the health impacts of development

These amendments also created the policy context for the Region to:

- (May) request health impact studies as part of a complete development application
- (May) develop health indicators to analyze the effectiveness of the Official Plan policies and serve as the basis for policy adjustments.

The current discretionary application of health-based criteria, however, is not sufficient to address the challenges associated with historical approaches to developing the built form in Peel. Fostering complete communities requires the consistent and explicit consideration of health impacts of proposed development and planning decisions in the Region of Peel.

This report summarizes progress and milestones the Region and municipalities have achieved in shifting the practices within the planning community to date. However, changing the design of communities in Peel requires continued progressive Regional leadership that supports all participants in the planning process to develop and prioritize complete communities (Appendix I).

## **2. Update of Activities**

### **a) Healthy Development Assessment**

The need for an evidence-based tool to assess potential health impacts of planning decisions was identified as an early priority. The Healthy Development Assessment (HDA) has been developed and refined through a series of updates. Initially, a body of research evidence was compiled that identified elements and quantifiable measures associated with increased walkability. This evidence base was developed in partnership with St. Michael's Hospital Centre for Research on Inner City Health and McMaster

## UPDATE ON CREATING HEALTHY BUILT ENVIRONMENTS IN PEEL

University, and presented to Regional Council in July 2010. It summarizes the empirical evidence linking attributes of the built environment with health outcomes into quantifiable standards. The standards are organized according to the following categories: Density, Service Proximity, Land Use Mix, Street Connectivity, Streetscape Characteristics and Efficient Parking.

In response to feedback obtained during the initial feasibility testing, the HDA was refined further into a more user-friendly health assessment tool. The tool is applicable across a range of different contexts and allows developers to identify and preemptively mitigate any potential health impacts associated with their development proposals. The framework was developed in a manner such that it can be refined by the area municipalities to suit their needs and contexts. Implementation of the HDA brings forward evidence-based criteria to provide ongoing, transparent, and consistent health rationale to the development review process. However, it is imperative to note that while the Region's tool brings forward opportunities to increase the health promoting potential of proposed developments, the decision-making authority to enforce these recommendations remains with the local area municipalities. As such, Public Health is working in partnership with these municipalities to adopt the assessment tool to each unique municipal context.

To date, Public Health has engaged with municipalities as follows:

- Planning Technical Advisory Committee meetings have provided an opportunity for engagement of municipal staff on the policy intentions and HDA process updates
- The Town of Caledon has already reflected these policies and are testing them in the Mayfield West Phase II secondary plan through ROPA 29
- The City of Brampton is well aligned with the policy and processes through their Sustainability Community Development Guidelines
- The City of Mississauga has been working in partnership with Regional staff to ensure the health assessment tools meet the needs of the local context.

### b) Evaluation

#### Overview:

In 2014, Regional staff undertook an evaluation to determine the influence and impact of the Healthy Development Assessment.

The evaluation found that the tool has been used to assess the following:

- development proposals;
- plans and projects, including the Town of Caledon's Mayfield West Phase II Secondary Plan, the City of Brampton's Transportation Master Plan and the Ninth Line Corridor Review Study in the City of Mississauga.

The HDA has also been used to integrate health promoting elements into new and existing evaluative tools and documents, such as the City of Brampton's Sustainable Community Development Guidelines and the Caledon East Community Improvement Plan (CIP). Recently, integration of the HDS into the Caledon East CIP resulted in the Town of Caledon receiving the following awards:

## UPDATE ON CREATING HEALTHY BUILT ENVIRONMENTS IN PEEL

- Ontario Professional Planners Institute's (OPPI) Annual Excellence in Planning Award;
- OPPI and Heart & Stroke Foundation of Ontario's Healthy Communities Award.

The evaluation found the following:

- The HDA has been instrumental in raising awareness about the link between health and the built environment, especially among the public health and planning communities locally, provincially and nationally;
- The HDA has been used to build and sustain a variety of partnerships, particularly across all Region of Peel planning departments;
- However, when used to assess development proposals and plans, the following challenges were identified:
  - i) A lack of consistency in implementation across the planning processes, because Regional and municipal policies only stipulate the HDA "may" be required
  - ii) The extent to which the recommendations from the HDA are addressed by development proponents was inconsistent. Currently, there is no statutory authority through planning policies or processes within the Region to enable local area municipal staff to enforce the recommendations with the development proponent or inform the respective municipal council of the health impact
  - iii) Decisions about certain elements of the built form are outside of the development proponent's control. For example, public policies and plans often dictate location of key services such as schools and transit, some streetscape characteristics, and street connectivity.

### Evaluation Report Recommendations

The evaluation also made recommendations to address the aforementioned challenges.

#### **i) Requirement to Complete the Assessment and Report on Findings**

Current Official Plan policies at both the Regional and municipal levels only encourage the completion of health assessments on proposed development applications and do not enable local area municipal staff to enforce the recommendations with the development proponent or inform the respective municipal council of the health impact.

Therefore, future Regional Official Plan reviews present an opportunity to enhance related policies so that health assessments of all development applications are required and municipal Councils are informed of the health impact.

## UPDATE ON CREATING HEALTHY BUILT ENVIRONMENTS IN PEEL

### ii) Alignment with Planning Public Policies and Standards

In some circumstances, an assessment element may be outside of the development proponent's control. Therefore, when and where possible, it is critical for all parties involved in a development application to consider the health impacts of their decisions. In addition, some HDA standards are strongly influenced by transportation engineering standards that are outside of the developer's and local municipality's control. In an effort to address this discrepancy, Public Health staff has acquired a position at the Transportation Association of Canada table to advocate for transportation engineering standards that incorporate active transportation into their new Geometric Design Guidelines.

### iii) Refinement of Assessment Tool

The evaluation also recommended further refinement of the tool into a more succinct format to increase the ease-of-use and reduce the time commitment required to conduct the assessment by development proponents. Efforts towards achieving this recommendation are already underway and a draft revised tool is currently in the later phases of testing and implementation planning. The revised tool is anticipated to be ready for release by the end of 2015.

## 3. Strategic Alignment

While Public Health's role has been primarily focused on the health implications of land use and transportation planning, advancing the healthy communities agenda has presented an opportunity to strategically align with other priority areas in the Region of Peel.

### Environment and Sustainability

Complete communities offer reduced pollution, reduced energy consumption, and the protection of greenspace and habitats. Accordingly, the Region has prepared a Climate Change Strategy and municipalities, such as the City of Brampton, are adopting sustainability guidelines. Compared with typical suburban development, healthy complete communities offer significant reductions in energy expenditure and greenhouse gas emissions, predominantly by reducing car use through walking, cycling and public transit (U.S. Environmental Protection Agency, 2011). For example, a Toronto-based study comparing inner-city and suburban neighbourhoods estimated greenhouse gas emissions that were 2.6 times less in the inner-city on a per capita basis (Norman et al, 2006).

### Transportation Demand Management

A reliance on cars for transportation has led to ever-worsening congestion on roads and highways. The annual cost of congestion to commuters in the Greater Toronto and Hamilton area in 2006 was \$3.3 billion with a further \$2.7 billion cost in lost opportunities for economic expansion (Metrolinx, 2008). These costs will more than double over the next 25 years, if congestion remains unattended.

## **UPDATE ON CREATING HEALTHY BUILT ENVIRONMENTS IN PEEL**

As of 2006, the transportation modal split in the Region of Peel for the morning peak period demonstrates the dominance of automobiles, with over three quarters of individuals driving or being a passenger. Public transit and active transportation accounted for 9.5 per cent and 7.6 per cent of morning peak period trips, respectively (University of Toronto Data Management Group, 2006). The Peel Long Range Transportation Plan – Update 2012 indicates that widening existing roads and building new ones will be insufficient to meet future growth in travel demand. Substantial increases in mode share for public transit and active transportation will be required to avoid congestion, which will reach critical levels. Efficient transit use, however, requires the denser, more compact communities that the HDA endeavors to design. These efforts are bolstered further by the work being done on the Transportation Demand Management (TDM) Development Guidelines project that aims to effectively integrate TDM into the development approvals process.

### Infrastructure Costs

The cost implications of low density suburban development patterns to municipalities and their taxpayers are substantial. A recent summary of case studies from across the U.S. found that compared with traditional suburban growth, more compact development saved an average of 38 per cent on upfront infrastructure costs, 10 per cent savings on ongoing delivery of services, and generated 10 times more tax revenue per acre (Smart Growth America, 2013). These findings are consistent with analysis from Calgary, which demonstrated more compact development would be 33 per cent less expensive to build than if the city were to continue to grow if following existing patterns (IBI Group, 2009). The single largest contributor to the difference was road capital costs, followed by water, wastewater and schools. Annual operating costs were 14 per cent less for the more compact option.

Within the Region of Peel, a recent analysis was undertaken on capital and state of good repair (SOGR) costs for water and sewer infrastructure for one sample intensification and two sample greenfield areas. The analysis indicates that capital and SOGR costs are lower for the intensification area when compared with the two greenfield areas. While the unit cost for watermains and sewers in an intensification area is higher because of factors such as utility relocation and traffic management, the total length of watermains and sewers is considerably less compared to greenfield areas, which contributes to overall lower costs in an intensification area.

### Aging Population

Peel Region's population over the age of 65 is expected to double in size by 2031. Recognizing the challenges and opportunities posed by an aging population, it is critical to plan for age-friendly communities that enable residents to age actively through supportive policies, services and infrastructure.

The implementation of the Healthy Development Assessment can help to alleviate some of this burden through the creation of healthy, walkable communities that are close to amenities, services and programs. Healthy communities support independent, active and healthy aging for all residents in the Region along with aging in place - the ability for older adults to remain in the community safely, comfortably, and independently later in life.

### Shifting Demographics and Preferences

Shifts in perspectives are also occurring regarding the desired form of neighbourhoods. In a survey of GTA residents, 13 per cent currently living in more automobile friendly

## UPDATE ON CREATING HEALTHY BUILT ENVIRONMENTS IN PEEL

neighbourhoods indicated that they would prefer to live in a pedestrian/transit friendly neighbourhood (Frank et al, 2012). Conversely, only 4.6 per cent of those living in pedestrian/transit friendly neighbourhoods would prefer to live in a more automobile friendly neighbourhood. Survey data from the U.S. also indicates that the majority (56 per cent) of adults nationwide would prefer living in a smart growth community rather than a sprawl community, primarily because of the convenience of being within walking distance to shops and restaurants (Belden Russonello and Stewart, 2011). (See Appendix II for list of references from this section.)

### 4. Recommended Direction

To continue to build on the momentum to date and as identified in Council's endorsement of the Peel 2041 Regional Official Plan Review work program (Council Resolution 2013-1151), Regional staff recommend that a Regional Official Plan amendment be brought forward for consideration in order to strengthen plan policies to:

- Require health assessments as part of the development application process;
- Ensure municipal councils are informed of the health impact of development;
- Support the ongoing monitoring and evaluation of the health impacts of development at the Regional and municipal levels.

This will help achieve the next milestone towards a planning process in Peel that prioritizes and develops healthy, complete communities.

## CONCLUSION

Traditional automobile-oriented communities have been developed for generations in Peel. Over the last few years, departments across the Region of Peel and area municipalities have come together to reverse this trend and move towards designing and building healthier environments. To this end, Peel Region is beginning to see promising approaches amongst planners and supportive landowners and developers. However, to be impactful and optimize opportunities during a time of growth, continued effort is required to strengthen policies and processes that will normalize the planning of complete communities in Peel. The proposed policies are an important signal and a critical next step in progressive Regional leadership in achieving the longer term vision of building healthier communities in Peel.



Janette Smith, Commissioner of Health Services



Dan Labrecque, Commissioner of Public Works

**UPDATE ON CREATING HEALTHY BUILT ENVIRONMENTS IN PEEL**



Lorraine Graham-Watson, Commissioner of Corporate Services



Eileen de Villa, MD MBA MHSc CCFP FRCPC,  
Medical Officer of Health

**Approved for Submission:**



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D. Szwarc, Chief Administrative Officer

**APPENDICES**

1. Appendix I - Building Healthy, Complete Communities in Peel
2. Appendix II - References

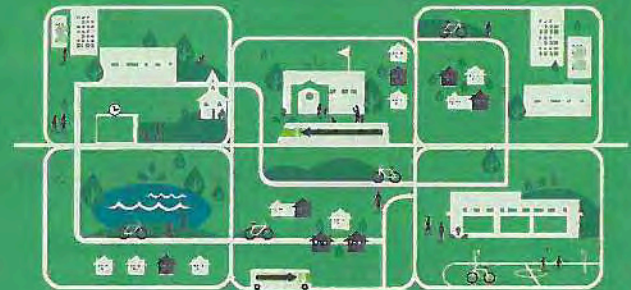
*For further information regarding this report, please contact Olha Dobush, Director, Chronic Disease and Injury Prevention, Ext : 2617, [olha.dobush@peelregion.ca](mailto:olha.dobush@peelregion.ca).*



Appendix I

# Building Healthy, Complete Communities in Peel

2005      ▶      2015–16      ▶      2021–31



**AUTO-DEPENDENT SPRAWL**

- ⬇ Walkability/Active Transportation
- ⬇ Transit Use

**Contributes to:**

- ⬆ Chronic disease conditions
- ⬆ Health care utilization
- ⬆ Congestion
- ⬆ Air pollution
- ⬆ Economic impact (i.e. productivity and job loss)

**COMPLETE COMMUNITIES**

- ⬆ Walkability/Active Transportation
- ⬆ Transit Use

**Enables:**

- Healthy active lifestyles
- Congestion alleviation
- Air quality mitigation
- Social connectivity
- Aging in place
- Agricultural land preservation
- Affordable housing options

**Evolutionary Approach towards Building Healthier Communities**

**Link Health and Planning through:**

- Awareness raising
- Development of evidence based tools



**Shift Practices of Planning Community through:**

- Refinement of planning policies, processes, and tools
- Capacity building across the sector



**Change Design of Communities to be Healthy and Complete through:**

- Consistent and explicit consideration of health impacts
- Incorporation of healthy design elements
- Health impacts prioritized in decision making processes

**Regional Leadership**

**ROPA 24:**  
 Work jointly with area municipalities to raise awareness of public health issues related to planning

**ROPA 24:**  
 Prepare jointly with area municipalities, an assessment tool that will allow evaluating the public health impacts of proposed developments

**ROPA 25:**  
 Region may request health impact studies as part of a complete development application

**POTENTIAL OFFICIAL PLAN POLICY OPPORTUNITIES:**

- Require health assessments as part of a complete development application
- Ensure councils are informed of health impacts of proposed developments and planning decisions

**FUTURE STATE:**  
 Regional and municipal planning departments ensure all development meet/exceed leading standards for healthy community design

**Monitoring and continuous improvement**

## **Healthy Built Environments in Peel Appendix II**

### **References**

Belden Russonello and Stewart. The 2011 Community Preference Survey: What Americans are Looking for When Deciding Where to Live. 2011.

Frank, L., Chapman, J., Kershaw, S., and Kavage, S. City and Regional Residential Preference Survey Results for Toronto and Vancouver: a CLASP Final Report. 2012.

IBI Group. The implications of Alternative Growth Patterns on Infrastructure Costs. Calgary: City of Calgary, 2009.

Metrolinx. Costs of Road Congestion in the Greater Toronto and Hamilton Area; Impact and Cost-Benefit Analysis of the Metrolinx Draft Regional Transportation Plan. 2008.

Norman J, MacLean HL, Kennedy CA. Comparing high and low residential density: Lifecycle analysis of energy use and greenhouse gas emissions. J Urban Plan Dev 2006; 132(1):10-21.

Smart Growth America. Building Better Budgets. A National Examination of Fiscal Benefits of Smart Growth Development. 2013.

University of Toronto Data Management Group. 2006 Travel Survey Summary for the Transportation Tomorrow Survey Area. 2008.

U.S. Environmental Protection Agency. Smart growth: a guide to developing and implementing greenhouse gas reduction programs. Washington: EPA, 2011

## Executive Summary – Planning for an Aging Population Discussion Paper

The purpose of this paper is to provide the basis for the proposed policy amendment to the Regional Official Plan (ROP) related to age-friendly planning and to address directions within the current Strategic Plan and recommendation from the Aging Population Term of Council Priority Steering Committee (APSC) to incorporate the use of age-friendly planning principles into the ROP.

### **Aging-Related ROP Policy Gap Analysis**

The paper builds on the existing ROP policies related to aging that are indirect and dispersed throughout the plan under the themes of: aging within the same community; housing options and affordability; accessibility and age-friendly infrastructure; creating complete communities; and human and health services.

Based on a review of age-friendly approaches, an extensive jurisdictional scan, research and analysis of the existing ROP policies, the paper recommends a standalone policy section to be added. The proposed policy section would include a preamble that refers to the substantial increase in the seniors population in the coming years, the importance of the Region and area municipalities to be prepared for this impact on municipal services and the importance of establishing age-friendly communities. The preamble is followed by high level objectives that recognize the diversity of Peel's aging population, the needs of Peel's population and allowing opportunities for aging in place, promoting the use of universal accessible design and creating better environments for active aging. Following the objectives are proposed policies referring to the following:

- Encouraging the area municipalities to develop policies in their official plans to support seniors to age within their community
- Encouraging the use of *universal accessibility* design in the built form to create a safe, barrier-free and more inclusive environment that will enhance the mobility and independence of all residents, including seniors.
- Require area municipalities to implement the *Healthy Development Assessment Framework* to create healthy, walkable communities close to amenities, green spaces, services and programs to support independent, active and healthy aging for all residents in Peel.

- Work with area municipalities to assess the built environment in neighbourhoods where there is a predominance of seniors to support *universal accessibility*.

The proposed policy section is supported by an added glossary term on active aging.

### **Age-friendly Approaches**

Leading up to the policy recommendations, the paper documents research conducted using significant policy and position papers developed by international, national and provincial bodies. Of note is the World Health Organization's (WHO) Global Age-Friendly Cities Guide, 2007 and the Ontario government's 2012 seniors strategy, entitled "Living Longer, Living Well" and the related 2012 Action Plan for Seniors.

### **Jurisdictional Scan**

The paper documents a review of Peel's area municipal policies and strategies, which illustrate the alignment in Regional age-friendly planning direction to current area municipal initiatives. The jurisdictional scan component of the paper continues to document a review of age-friendly land-use plans and strategic documents. A total of X 16 examples were considered due to their innovation, reflection on geographic diversity and applicability to the challenges faced by Peel Region. Several samples of short, medium and long-term strategies that the Region and/or area municipalities could explore and adapt were identified.

The paper documents research and analysis undertaken as a result of the review of age-friendly planning approaches, an extensive jurisdictional scan and review of existing ROP policies. Based on this research and analysis, an assessment and policy gap is realized and the paper recommends a standalone age-friendly planning policy section to be added. The proposed policies will enhance the support for Peel's seniors to age in place within their community, target the establishment of walkable communities to promote active and healthy aging and promote the use of universal accessibility design in the Region's physical environment. The intent is to establish and implement age-friendly planning principles that aim to make Peel a more age-friendly community where seniors have access to supports that enable them to age safely and with dignity while maximizing their quality of life.

## **Status of Focus Areas, Peel 2041, Regional Official Plan Review**

### **1. Regional Official Plan Amendment (ROPA) – Growth Management and Housing**

**Growth Management:** As reported and presented at the March 3, 2016 Peel Growth Management Committee meeting, a new approach to planning, servicing, and financing growth in Peel will involve earlier and more in depth discussions with the local municipalities and development industry regarding the issues, risks and opportunities for managing growth in Peel which include master servicing plans, the land budget and Regional Official Plan Amendment (ROPA) forecast allocations. The growth management focus area of Peel 2041 will include forecast allocations and other growth plan conformity requirements and a draft ROPA including the housing focus area is expected to be brought forth to Regional Council to request public consultation in Q1 2017. To date the Region has worked with the local municipalities on draft forecast allocations and a draft land budget that would inform other potential growth scenarios and ultimately a preferred scenario. The details and process going forward for the new approach to planning, servicing, and financing of growth will be determined by a working group of staff from the Regional and local municipalities.

**Housing:** The housing focus area of Peel 2041 involves research and analysis of opportunities to increase the supply of affordable housing through planning policy mechanisms. Limited potential policy options have been identified including requiring housing assessments at various stages in the planning process. Building on these policy options is the Provincial Long Term Affordable Housing Strategy (LTAHS) Update by the Province in March 2016. The LTAHS Update announces new legislated tools that will be available to municipalities to support affordable housing which include inclusionary zoning and development charges exemptions for second units. Staff will be working with local municipal staff to reflect new legislations emanating from the LTAHS Update. Recommended affordable housing policies will be brought forth in a future ROPA.

### **2. ROPA – Transportation**

The Transportation focus area will involve an update of policies, schedules and figures (mapping). The Long Range Transportation Plan (LRTP) update will set the stage for these changes through a comprehensive review and analysis of growth management information and other inputs. Preliminary analysis has indicated that, while road widenings will continue to play a role in accommodating future travel demand, an increasing number of trips will need to be accommodated through sustainable modes such as transit, carpooling, cycling and walking.

### **3. ROPA – Agriculture, Climate Change, Greenlands System Planning, Water Resources**

**Agriculture:** Policies and mapping are being reviewed and updated to conform to the protection of agricultural lands in the Provincial Policy Statement (PPS) 2014. A discussion paper is being prepared with policy analysis and the completion of background technical studies. The discussion paper will be completed in time to include and reflect the outcomes of the Provincial

## Appendix V

Peel 2041 Regional Official Plan Review – Draft Regional Official Plan Amendment 27 Proposing Changes Related to Health, Built Environment and Age-Friendly Planning, and Technical and Administrative Updates

coordinated plans review which include the Greenbelt Plan, Oak Ridges Moraine Plan, Niagara Escarpment Plan, and Growth Plan for the Greater Golden Horseshoe.

A series of technical studies have been completed including a Land Evaluation and Area Review (LEAR) study, Minimum Distance Separation (MDS) Formulae analysis, and development of draft guidelines for Edge Planning for Agriculture. The MDS analysis was received by Regional Council in 2014. A report to Council on the LEAR and Edge Planning Guidelines is forthcoming. Recommended agriculture policies are planned to be brought forth in a future ROPA in late 2016 and will include these environment themed focus areas – climate change, greenlands systems planning, and water resources

**Climate Change:** A climate change discussion paper has been drafted and is in the process of being reviewed and updated to reflect the changes in Federal and Provincial policy development and direction to municipalities. Additionally, the research and analysis of Peel Climate Change Vulnerability Analysis will be referenced to ensure that all research completed at the time of drafting the discussion paper are included. Analysis of Regional Official Plan (ROP) policies which address issues related to climate change, as well as opportunities for adaptation and mitigation, is currently underway and will be concluded to complete the discussion paper.

**Greenlands System Planning:** The Regional OP natural heritage system planning policies will be reviewed and be updated to conform to the PPS 2014. This review will rely on current practices in conservation ecology which utilizes a natural heritage system approach to preserve and enhance natural features within a connected natural heritage system. A discussion paper is being prepared that will highlight the changes that are mandatory to be consistent with current policy and legislation, as well as provide options for how the Region may address other changes including update of existing mapping.

**Water Resources:** The water resources policies review will ensure that the policies and mapping in the Regional OP conform to the PPS 2014, Oak Ridges Moraine Conservation Plan, the Clean Water Act, and the Lake Simcoe Protection Act. Further, it is an objective of this project to review regional official plan policy regarding stormwater management. A discussion paper will be prepared that will present the policy options for updating the Regional Official Plan water resources policies in order to be consistent with provincial policies and legislation. The paper will also address emerging best practices and Conservation Authority guidance for consideration.

#### **4. ROPA Mineral Aggregates**

The Province has updated the aggregate resources policies in the PPS 2014 to protect the resources and resource operations from development and activities that would preclude or hinder their use or which would be incompatible. As well, the province has updated the aggregate resource mapping for Peel Region. The mineral aggregates policies review will ensure the Regional OP conforms to the PPS 2014 policies on adjacent lands to mineral aggregate resources which contain criteria that would permit development and activities that would not preclude or hinder new operations or access to resources and also conforms to the PPS 2014 to reflect the new language regarding comprehensive rehabilitation planning and

## Appendix V

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recycling of aggregate. Further policy direction related to aggregate resources, aggregate conservation, recycling and rehabilitation based on best practices research and guidance will also be considered.

The mapping for Schedule C, High Priority Mineral Aggregate Resource Areas (HPMARA) will be revised to reflect updated bedrock mapping produced by the Ministry of Northern Development and Mines in 2009. The mapping will also be revised to reflect updated constraints, where aggregate extraction would not be permitted, within HPMARA (i.e. Core Areas of the Greenland System) and ensure the mapping is consistent with local refinements made to the Town of Caledon's High Priority Mineral Aggregate Resource Areas (CHPMARA) where appropriate.