

**CRITERIA # 18 User Access (roadway, drop-off, loading)**  
**Weight: 4**

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**Scale Factors:** Multiple points of access to the parcel and a minimum frontage on municipal road(s) to locate access roads are desirable:

- "10": Frontage on at least 2 roads and a minimum frontage of 300M on at least one arterial road and a drop off area
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	Vendor Response	Stanlec Response	Notes	Scale
<b>Site A</b>	Given that this is a green field site Windsor Regional will be free to develop a site plan that deals with all user access issues to its satisfaction. Frontage on #3 Hwy. can be extended to over 800' should the site designers require additional frontage on #3 Hwy.			
<b>Site B</b>	This is a Land Purchase Proposal only, therefore without a specific detailed drawing of the proposed hospital plans we are unable to determine any patient access/egress or shipping receiving areas.			
<b>Site C</b>	The Subject lands have direct access to Walker Road, which is an Arterial Road. It will also have direct access to the new east/west Road that runs along the north of the property. See Figure 21.			
<b>Site D</b>	This site is a blank slate. The site has frontage on County Road 8 and Bell Avenue and South Talbot Road. The frontage will readily provide for the minimum 300 metre drop off area. Control is signalization and other required traffic planning aspects would easily be incorporated into this site. Due to the multiple points of access to the site, the desired functionality can be easily met. Bell Avenue is likely the most ideal access route for supplies and service deliveries.			
<b>Site E</b>	Multiple points of access to the subject site and a minimum frontage on municipal roads are excellent to locate access roads: there is frontage on at least 2 roads and a minimum frontage of 300m on at least one arterial road and a drop off area. 18 (a) The subject site has road frontage on all sides. 18 (b) Patient access and service vehicles to the site can be easily accommodated. This response is applicable to all three (3) parcels of land that form the subject site.			
<b>Site F</b>	The Site currently has entrances on Manning Road, as well as on Concession Road 12. It may also be possible to build an exit from the 401 that goes directly to the Site. Our suggestion would be for (1) Concession Road 12 via North Talbot to be a staff and sipping/receiving entrance and (2) 401 and/or Manning Road would be the main entrance for patient access/egress. The Site fronts: Concession Road 12 by 2633.84 ft. (802.79 m); The 401 by 1754.43 ft.(534.75 m); and Manning Road by 293.55 ft. (89.47 m).			
<b>Site G</b>				

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<b>Site H</b>	Multiple points of access to the site and minimum frontage on municipal road(s) are EXCELLENT to locate access roads: the subject site has at least 2 roads and a minimum frontage of 300 m on at least one arterial road and a drop off area. 18.1 The subject site has sufficient area with 22 ha (55 ac) to accommodate a hospital campus. 18.2 The subject site has frontage with 550 m on Banwell Road, a major arterial road. 18.3 The subject site will have frontage on Twin Oaks Drive with over 800 m frontage on two sides of the road. 18.4 The subject site will be designed with a safe, coordinated primary and secondary accesses to municipal roads. 18.5 The regional hospital campus design will accommodate an internal road system that allows for a protected drop off at the hospital main and secondary entrances as well as accessory/secondary buildings. 18.6 The hospital campus will be designed with loading, shipping and receiving access for the hospital and other buildings on the campus. 18.7 Access will be designed for the new regional hospital as a campus concept that is functional and allows for internal road network system. 18.8 The hospital campus design will support and compliment a trail and pathway system that encourages a walkable, healthy community. 18.9 The hospital campus will be designed with an internal road system that can provide a priority to emergency vehicles. 18.10 The hospital campus will be designed with an internal road and pedestrian system to accommodate parking lot coordination to the hospital. The subject site provides for an excellent access and internal road system to accommodate the hospital campus.			
<b>Site I</b>	Parcel B: Frontage on the north side of property, N. Talbot Rd = 315 metres. Parcel A&B: Frontage on the south side of the Site, (County Rd 34) total 220 metres.			
<b>Site J</b>	Frontage on the north side of Site, (County Rd 34) = Talbot Rd = 211.8m			
<b>Site K</b>	The Subject Site has over 390m of frontage along Walker Road (a 4-lane, Class 2 artery), along which a drop-off area could be constructed. Frontage is also provided along approximately 175m of Kildare Road and 100m of Seneca Street (refer to Figure 1a, attached)			
<b>Site M</b>	The proposed site is very large and rectangular in shape and therefore lends itself to flexible site plan considerations. Options for emergency vehicle access and patient related drop off areas can be accommodated while providing separate areas designated for loading docks and refuse/recycling facilities. In order to achieve the best site plan, the parcel size and direct road access exists and can be utilized to design the site around an internal road network under a campus model with appropriate traffic control measures. The proposed connections to adjacent arterial roads (County Road 42 and Lauzon Parkway) are facilitated by the site having frontages measuring 350m on the west side and 750m along the north side.			
<b>Site N</b>	The site is a blank canvas. Any conceivable design can be accommodated. Frontage on County Road 42 and Ninth Concession can both exceed 300m immediately. Service roads may be constructed additionally.			
<b>Site O</b>	This site is of adequate shape and size to allow for all of the amenities and services that are necessary to a large hospital complex in the areas that they must be located and with separations for public and operational accesses. Site Plan Provided FOR DETAILS & INSERTS SEE INDEX TAB 18			
<b>Site P</b>	The site can be fronted on two roads being Manning Rd. and Baseline Rd to allow for access from different points. With 1,200 feet of frontage on one road and 1,800 feet on the other this presents many opportunities to ship and receive with no interference to patients, visitors, and emergency vehicles.			
<b>Site Q</b>	The Site is large enough to provide access, drop off requirements and shipping and receiving			

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Site R	As previously mentioned, the site maintains considerable frontage along County Road 20. It is envisioned that this would be the main access point to the Facility for patient and emergency services. The site and building will be designed in such a way to maximize the utility of this access point for incoming patients, wheel-trans, patient-transfers, etc. Having the advantage of 450 feet of frontage along County Road 20 allows for multiple access points provided the County of Essex is in support of the proposed entrance configurations. A separate dedicated entrance could be used for loading, refuse/recycling and truck transfers, so that these daily operations of the facility do not impede ambulatory, patient-transfer and other priority drop-offs.			
Site S	As previously mentioned, the site enjoys roughly 1,000 feet of frontage along County Road 22. It is envisioned that this would be the main access point to the Acute Care Facility for patient and emergency services. The site and building will be designed in such a way to maximize the utility of this access point for incoming patients, wheel-trans, patient-transfer vehicles, etc. The secondary access to the site is off of West Puce Road. This access point would be considered the primary access point for loading/unloading as well as refuse/recycling, visitor parking etc. The separation of these entrances for the separate uses will ensure that transfer vehicles are separated from ambulatory visitor drop-off points.			
Site T	The Site has access via Weaver Rd which connects to Ojibway Parkway and it also fronts along Sprucewood Ave thereby providing for the possibility for ample access points. Given the potential size of the Site the facility could be configured in such ways as desired to maximize functionality and access to the acute care hospital			
Site U	No response provided			

Signature \_\_\_\_\_

Date \_\_\_\_\_