# THE PMO REPORT 255





**3RD MONTHLY EDITION** 

Keeping you informed on progress and plans for the New Windsor/Essex Acute Care Hospital Project. Brought to you by the Project Management Office.

#### **Project Vision**

Create a state-of-the-art treatment and healing environment for all of those who we care for; a supportive workplace with the latest technologies to allow all of our staff to provide the most efficient and highest quality care, in a new hospital that supports well-being and has the capacity to provide timely, patient and family-centred care for generations to come.

# **Project Update:**

It's been another busy month of planning as the functional programs are starting to take shape. We have now completed our 2nd round of User Group meetings with 38 teams made up of consultants from Agnew Peckham Healthcare Planners, hospital leadership, staff and patient representatives.

Each group has now reviewed the first of three drafts for each of the clinical services and support services of the future hospital. They have reviewed and discussed forecasted volumes that are based on historic trends, and demographic and immigration projections based on Ministry of Finance data. They have also discussed models of care, patient and staff flow, and space requirements for all services. Detailed space lists are evolving for all departments and for the entire hospital.

We've now completed about 50 per cent of planning for the Functional Program – the detailed planning document that will describe in words the layout and location of every room, department and area in the New Windsor/Essex Acute Care Hospital. The teams will meet again in early April to review the 2nd draft and further refine the functional programs.

# PROJECT MANAGEMENT OFFICE TEAM MEMBERS

New Windsor/Essex Acute Care Hospital Project

# Paul Landry Project Director

**Dr. Andrew Petrakos**Director of Clinical Services Planning

#### **Jeff Geml**

Director of Support Services Planning

#### **Allison Johnson**

Manager of Communications & Community Engagement

#### **Fatima Lopes-Barros**

Administrative Assistant

Learn more about the project and subscribe to the project email list for updates at www.WindsorHospitals.ca

# **What's Next:**

This summer, the "Planning, Design and Conformance Team" (a team of architects and engineers) will be onboarded. They will use the functional program to begin developing "block-schematic drawings" to outline how all department "blocks," with required rooms and spaces, should be arranged horizontally and vertically into an efficient patient and staff flow, and ultimately a much better patient and family experience in a state-of-the-art new acute care hospital.

"We want to make sure the new hospital is ready for the community and for all of the dedicated professionals who will be working there," said Dr. Andrew Petrakos, Director of Clinical Services Planning. "Most importantly, we want to make sure the patient experience is as positive as it can possibly be."

While this is still early in the Stage 2 planning process (only about a quarter of the way through), many services are starting take shape. Members of these User Groups are starting to see what the new space standards are and how much bigger and more efficiently organized the services will be in the new hospital, including an inviting lobby with a volunteer-based welcome centre and a connecting "main street" concept that will run through the main floor connecting several critical areas like the Emergency Department, Diagnostic Imaging, Outpatient Clinics, the cafeteria, and the new Cancer Centre.



# **Heading Into 3rd Round Of User Group Meetings**

As we head into the 3rd round of User Group meetings, we're encouraged by feedback we've been receiving from our patient and staff participants:



- "I don't know about the flow of the hospitals, but I do know what it's like to sleep on a chair next to vour child's bed. This is our chance to make our hospital the best space it (can) be. I want kids to be excited to go into the hospital, not scared."
- Patient rep, Mellissa Patrick, whose daughter was diagnosed with leukemia in 2018.



- "It's great to be part of a planning committee that is so knowledgeable. We have expertise around the table and together we are going to create and hear
- Patient rep, June Muir at the Emergency Services Virtual Town Hall.



- "The suggestions and feedback that we've had so far from patients and families have often been things our clinical and medical teams may not have thought of otherwise... I can't think of a better moment than somebody walking into the new hospital and encountering a service or a feature of the hospital and saying, 'That was my idea. I suggested that.""
- Jonathan Foster, Vice-President of Emergency and Trauma Services

# The RFP process for the PDC Team is underway!

A public Request for Proposals (RFP) document to recruit the Planning Design and Conformance (PDC) Team is currently being finalized with Infrastructure Ontario (the procurement specialists of the Province of Ontario that lead the procurement processes for large infrastructure projects and the Ministry of Health). It is on schedule to launch on the online tender system MERX in early April. The submission and evaluation period will take approximately three months, and we hope to have our PDC Team onboarded in July.

Once onboarded they will begin immediately to review the new functional program, previous documents and reports and will start working on draft block plans for departments and building massing. They will be working closely again with the 38 User Group Teams to develop layouts and arrange all departments into an efficient and patient focussed flow, as well as staff and support services flow. By early fall we should start to see the block schematic plans that include general floor layouts and building massing images for the new hospital.

## **Room To Grow**

All of the planning is based on forecasting patient volumes and **service needs** for the next 20 years to ensure the new hospital has the capacity and flexibility to serve the City of Windsor and Essex County.

That means planning a building with sufficient capacity on opening day, and room to grow when needed.

The Ministry of Health now requires hospital planners to **future-proof** the master plan for new hospitals, by including or "shelling in" areas that can be quickly converted to allow for an increase of beds to deal with growth sooner than projected, or to be able to surge in response to a possible future pandemic. COVID-19 has taught us many things that need to be included now in the planning and development of new hospitals.

The planners are also expected to look at areas that are difficult to expand, such as the emergency department, the surgical suite, the diagnostic imaging department and the cancer centre, and place "softer space" like offices, conference rooms and storage adjacent to these areas that will provide increased future flexibility to grow these critical services if and when needed.

"Through this planning process we are really looking at how we are going to organize this building, so we have maximum flexibility for growth in the future," said Paul Landry, Project Director for the New Windsor/ Essex Acute Care Hospital.

# Community gets involved in planning the new hosptial

Many thanks to all those who came out to our Virtual Town Halls over the past three weeks. We were excited to see so many community participants attend these sessions, and we are honoured to answer your questions and take your suggestions for

planning the new hospital.

Don't worry if you missed the town halls. You can still catch the recordings, ask questions and offer your ideas on any of the 11 project pages of our community engagement platform.

#### TogetherWeBuild.wrh.on.ca

Panellists from our Town Hall: Cancer Centre



### **DRAFT STAGE 2 SCHEDULE (14 MONTHS)** JAN FEB MAR APR MAY JUN JUL AUG SEP OCT NOV DEC PART A - DEVELOPMENT OF **FUNCTIONAL PROGRAM (FP)** R1 R2 R3 • User groups (40+) meet to develop the FP • RFP for Planning Design and Conformity Onboarding of PDC Team (PDC / Architects & Engineers) PART B - DEVELOPMENT OF **BLOCK SCHEMATIC PLANS (BSPs)** R1 R2 R3 • User groups (40+) meet to develop the Block Schematic Plans Onboarding of Cost Estimators RFP for Cost Consulting Services PART C - COST **ESTIMATE (Class D) ASSEMBLE THE STAGE 2 SUBMISSION TO MOH STAGE 2 SUBMISSION TO MOH** • WE ARE HERE!

# **Frequently Asked Questions:**

We address some of the most common questions that we've been receiving through the engagement platform and Town Halls.

#### Q: WILL THERE BE MORE BEDS?

A: Yes. We do know the new hospital will have significantly more beds than the current one. What we don't know yet, is exactly how many. Part of the planning involves looking at demographics and forecasting population trends to determine what we will need. We aren't able to confirm detailed numbers at this point, but we expect to have those details in the fall once we have completed the functional program and begin to receive feedback from the Ministry of Health on our recommendations and bed projections.

One thing to remember is that the new hospital will also be built in a way that is more flexible, so we have ROOM TO GROW if needed. That means that the hospital will have more beds to begin with, and it will also have flexibility for additional beds when needed.



#### Q: HAS THE PANDEMIC PLAYED A ROLE IN PLANNING?

A: Yes. In fact, any hospital built since the SARS epidemic in 2003 has been designed with special features to increase infection control. There have been more learnings throughout the COVID-19 pandemic that are impacting standards around features such as airborne-isolation rooms. And Ontario's Ministry of Health now expects hospitals to shell in space for growth to be able to accommodate more beds in the case of a future pandemic.

#### Q: WHY IS THE PROCESS SO LONG?

A: The new hospital will be over one-million square feet. Some even call it a "mega hospital." These types of facilities are among the most complex buildings to design and construct, with complex mechanical and electrical systems, much of which is behind the ceilings and walls. We must also develop a design that achieves the best patient, family and staff experience. It is also important to note that between each of the 5 stages of planning and development required by the Ministry of Health is a review period that culminates into directions required to proceed into the subsequent stage of planning, procurement and eventually construction. It is a complex undertaking to plan and develop such a large hospital.

**BY THE NUMBERS** 

2,201

Visits to our engagement platform in March 60

Responses to our call out for ideas on www.TogetherWeBuild.wrh.on.ca

105

Community questions we answered in March through our town halls and www.TogetherWeBuild.wrh.on.ca

**24** 

**User Group meetings**