

**9<sup>TH</sup> 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.*

## Accelerated project schedule

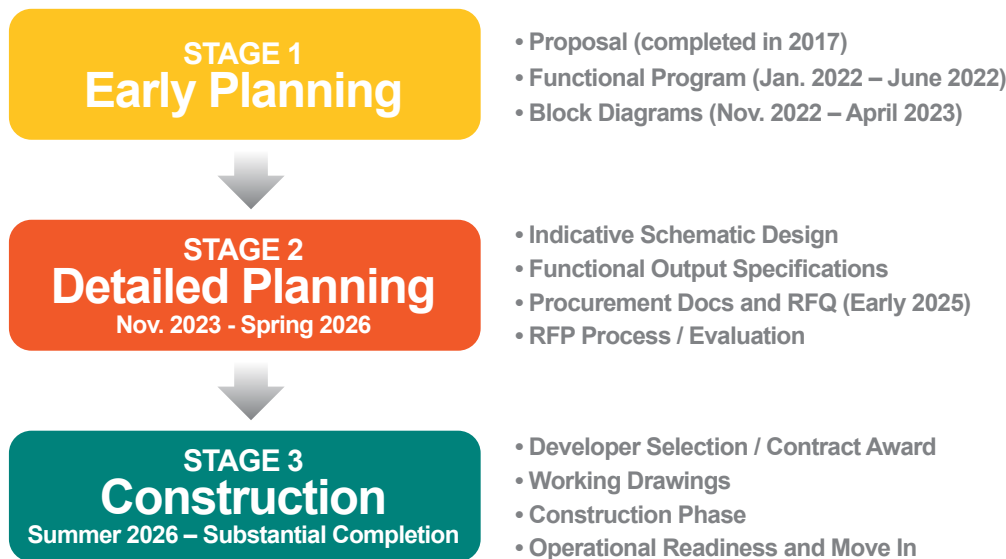
The Ontario government is accelerating the project schedule for the New Windsor/Essex Acute Care Hospital.

Infrastructure Ontario's latest Market Update shows construction for the new hospital starting nearly a year earlier than was previously announced.

The November 2022 update shows the tendering process beginning in early 2025 with a contract awarded and construction starting in the summer of 2026.

By tightening the approval process and getting shovels in the ground sooner, the anticipated move-in date is now set for late 2030.

This is great news for the project and reaffirms the government's commitment to moving this project forward without delay.



## 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](http://www.WindsorHospitals.ca)

## BY THE NUMBERS

**12** New hospital projects Stantec has led as PDC in the past 15 years

**25** Consultants supporting PDC (includes backup team lead)

**135** Number of people who attended PDC kickoff meeting

**4** Rounds of User Group meetings for this stage of planning

# New hospital taking shape with launch of next planning phase

Work is now underway for the next phase in new hospital planning to provide a visual representation of what's been completed to date and serve as a test-fit for the Functional Program (FP).

At a November kickoff meeting, 135 members of the WRH leadership team and User Groups involved in planning for the new hospital had an opportunity to meet with the Planning, Design and Conformance (PDC) team of architects and engineers from Stantec who are leading the process. The team provided details about this next phase of planning and design, and discussed what to expect throughout the process.

The PDC team is now working with the User Groups (made up of executive leads, physicians, directors, managers and patient representatives from all clinical and support programs) to complete a Campus Site Plan illustrating how and where the hospital facilities will be located on the site, as well as key access points and traffic routes. They will also complete Block Diagrams illustrating critical adjacencies of departments, including how and where they will be positioned within the facility, while also confirming the square-footage area of each department.

The goal is to submit the final plans along with the FP and an early cost estimate to the Ministry of Health by the Spring of 2023.

*The following sample diagrams illustrate the type of planning that will take place over the next few months. All drawings in this newsletter have been shared by the Stantec PDC leadership team as examples. They are not related to WRH.*

## User Groups focus on 'Campus Site Plan'

The first step in this part of planning is to develop a preliminary Campus Site Plan that includes the location of buildings on the site, as well as the main entrances, emergency department entrance, ambulance drop-off areas, logistics access and parking lots.

This work got underway in November with the first round of meetings consisting of two sessions with representatives from clinical and non-clinical User Groups.

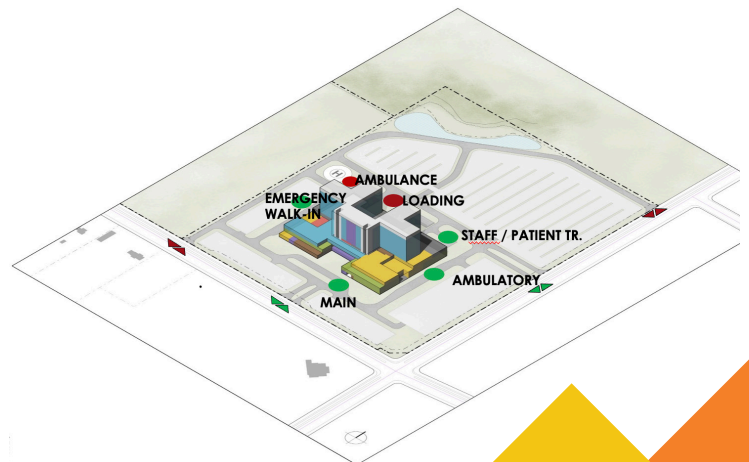
Discussions at the high-level meetings focused on options for site access and options for optimum use of the site.

Planning teams looked at site-planning studies and potential designs that included both vertical stacking and horizontal building massing options. Options for helipad locations were also explored.

As indicated by the Stantec Team, Campus Site Planning can be likened to sliding puzzle pieces around on the site to develop the most optimal fit for the main building components, helipad, and parking requirement.

*Sample Campus Plans courtesy of Stantec. These examples show how and where a building is located on the site, and where key access points (entrances) are located, as well as traffic routes.*

### Sample Campus Plans



The objective of the Round 1 meetings was to come away with a collection of questions, suggestions and ideas for consideration in evolving the campus plan and in starting the development of the Block Diagrams.

Block Diagrams are early drawings that allow planning teams to review and analyze preliminary department locations (horizontally and vertically), key adjacencies and space requirements that have been described in the FP.

Future rounds of meetings are scheduled for January, February and March, and will include all User Group participants. They'll explore the arrangements of departments and services. Specifically, the meetings will look at where each department should be located in terms of access requirements, key adjacencies and program and

support requirements.

“We will be examining building circulation, from the perspective of public or “front of house” spaces, and logistics or “back of house” areas, said Paul Landry, Project Director.

Department layouts will be focused on higher-level zoning and interdepartmental circulation at this stage of planning and design. More detailed department layouts will be produced in Stage 3 design work next year.

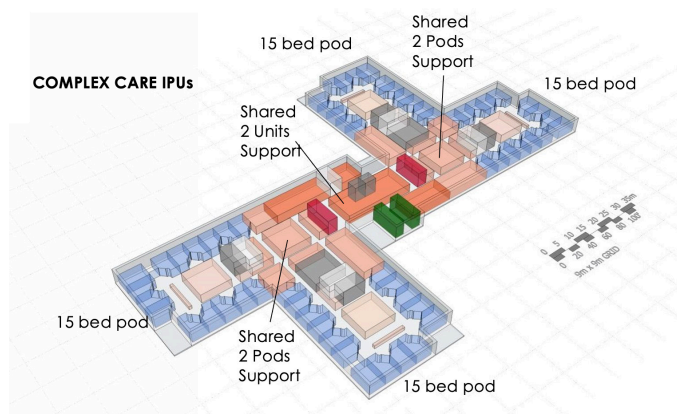
The PDC team is scheduled to provide an update to the WRH Board of Directors at its February meeting and present a final version of the plan for review and approval in April, before submitting the plan to the Ministry of Health.

### Sample Main Floor Plan



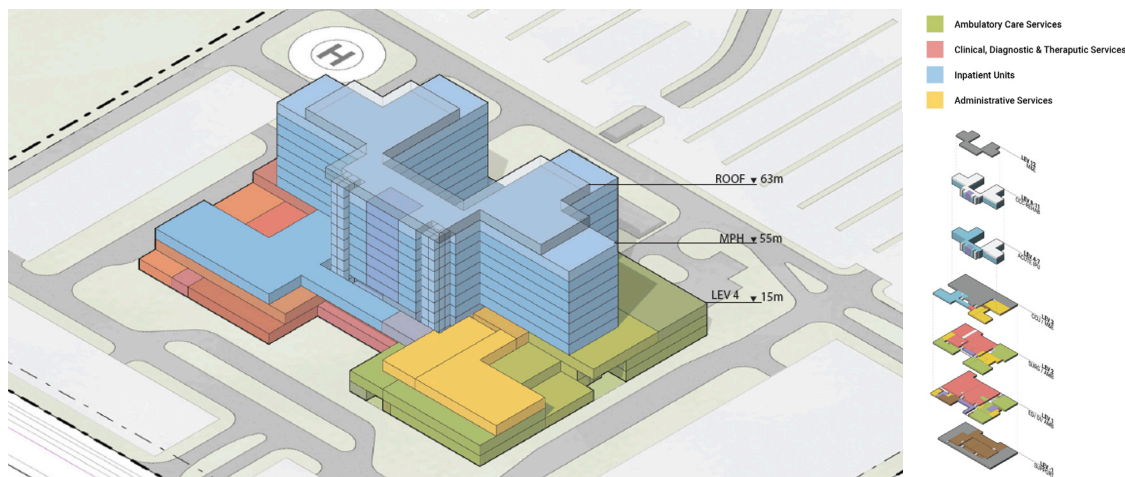
Sample Block Diagram plan, courtesy of Stantec. This drawing shows all programs and services on an entire floor and their locations in relation to other programs and services as well as entrance points, elevators and the hallway circulation route.

### Sample Program Stacking



Sample Block Planning, courtesy of Stantec. When developing this detailed drawing of an inpatient unit, planners would be looking at components, such as whether there is space on the exterior walls for every patient room to have a window.

### Sample Typical Inpatient Unit



Sample Block Stacking, courtesy of Stantec. This 3-dimensional image shows how the programs and services fit together vertically and horizontally within a facility.

# Focus of upcoming User Group meetings

User Group meetings during this process are structured differently than meetings held for FP development and will often include multiple User Groups meeting together to examine adjacency options and circulation at an interdepartment level.

- **Round 2:** Clusters of multiple User Groups with common interests and adjacencies will meet to review interdepartmental adjacencies and flows, and provide feedback on preliminary Block Planning layouts and input on planning. An example would be to determine where the emergency department, surgical services, the lab and the pharmacy should go in relation to imaging, and where and how patients, staff and materials travel throughout the facility. The objective of Round 2 is to finalize the correct locations for different departments and the major building circulation.
- **Round 3:** Smaller and individual User Groups will meet for a more refined test-fit of floor plans and for “day-in-the-life” patient journey mapping that will look at the entire experience, from the time a patient parks the car, for example, until they leave after the visit. The groups will provide direction for finalizing layouts, diagrams and construction phasing.
- **Round 4:** This final round of User Group meetings will bring multiple groups back together for larger discussions on both interdepartmental and intradepartmental layouts. In this round, teams will sign off the work at this level of detail, and develop a list of considerations to be addressed in subsequent detailed planning stages

## Meet Stantec’s PDC leadership team

With more than 60 combined years of experience delivering healthcare projects across Ontario and Canada, the PDC leadership team from Stantec is very comfortable in this role.

That experience includes acting as PDC for 12 new Ontario hospital projects in the past 15 years, including some of the province’s most recent hospital builds, like Oakville Trafalgar Memorial Hospital and Groves Memorial Community Hospital. Ongoing work includes the new South Niagara Hospital. In addition, Stantec has also been the successful P3 proponent for multiple healthcare builds in Ontario and across Canada.

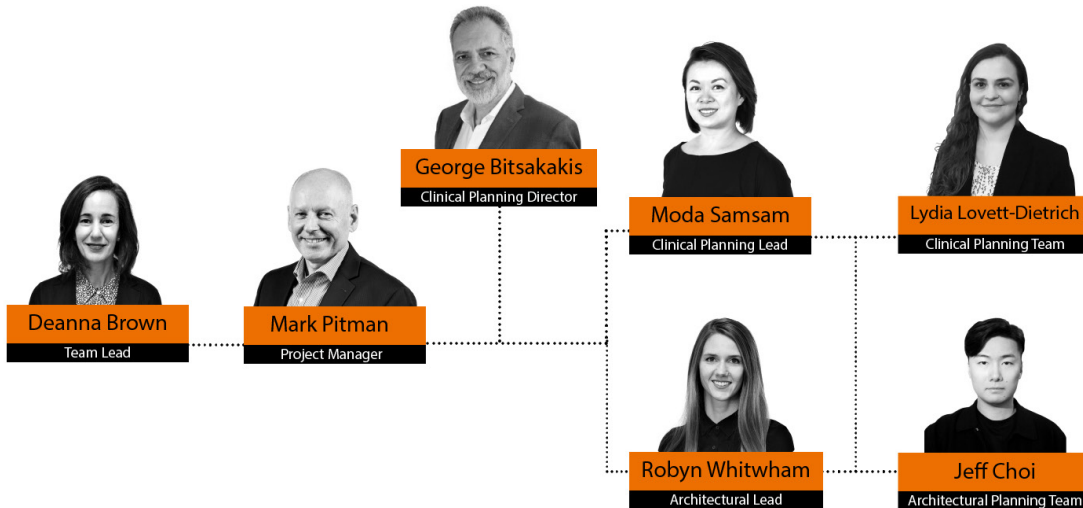
“We really understand this role well,” said Team Lead, Deanna Brown. “We understand how to make sure we’ve got all the documentation

of what your community wants for this new hospital out to potential bidders. And we understand what those potential bidders need to see, so they can get you the exact hospital you want for your community.”

The PDC leadership team is bolstered by additional expert consultants in specific areas, such as architecture and clinical planning, engineering, sustainability, urban planning, landscape, traffic and aviation.

“This is a team that is driven to work with the hospital, the community, the Ministry of Health and Infrastructure Ontario to deliver the next phases,” Brown said.

“We are incredibly honoured to be working on this project.”



# What's next

After work on the Campus Site Plan and Block Diagrams is complete, planners will turn to the more detailed design in the indicative design and RFP preparation phase”, said Dan Munteanu, Design Manager for Stantec.

That’s when the tendering process begins, to select a company that will take the indicative design from approximately 25% complete to 100% and proceed with construction of the new hospital. The work will start with the development of Request for Proposal (RFP) that outlines the project, including requirements around clinical planning, room-by-room planning and a co-ordinated site plan with landscaping and civic works, for potential bidders.

This process includes the development of Illustrative Schematic Design drawings, which provide a detailed look at intradepartmental flow and room layouts, including furniture and equipment.

“Here we’re honing in on the details,” said Robyn Whitwham, Architectural Lead. “We’re drawing the door. We’re drawing the bed (and) the equipment inside the room.”

Next steps after the 2023 submission to the Ministry of Health include:

- Developing RFQ and RFP documents and Project Specific Output Specification (PSOS), which is a written document description of the functional and technical requirements will be the basis of the design and construction contract. It includes

rules and requirements that the successful bidder must abide by during hospital design and construction. It’s considered a guide book or set of rules.

- Issuing the RFP to the market for the purpose of selecting a company to complete the design development and construct the new hospital.

## Sample Illustrative Schematic Design



Sample Illustrative Schematic Design, courtesy of Stantec. This is an example of the type of detail that can be looked at inside one department, including doors, beds and equipment inside the rooms.

## DRAFT Schedule Functional Program & Block Schematics

