

4TH 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.

Construction set to begin in the spring of 2027

Windsor Regional Hospital now has a projected time frame for building the New Windsor/Essex Acute Care Hospital. After multiple mentions in the Ontario 2022 Budget, specific details were released on Tuesday, May 3 as part of the Infrastructure Ontario (IO) May 2022 Market Update, indicating the tendering process to start in early 2025 and construction scheduled to begin in the spring of 2027.

Public engagement is helping shape the new hospital

This month, the project management team wrapped up the first Together We Build Virtual Town Hall series. Over the course of 11 town halls, User Group members had the opportunity to share an update about functional programming work that is underway for different clinical and non-clinical areas of the future hospital with hundreds of participants — and to get community feedback.

Throughout the Town Hall meetings, **50 panellists** – including WRH leaders, staff, planners, and patient & community representatives – answered **102 questions** from town hall participants.

“We’ve had many valuable conversations these past few weeks, and we’re grateful to the community for coming out and to the patient representatives and WRH employees who’ve been offering their time and ideas at the planning tables with the experts,” said Paul Landry, Project Director for the New Windsor/Essex Acute Care Hospital Project.

PUBLIC ENGAGEMENT BY THE NUMBERS

- 351** People attended the Virtual Town Halls as audience members
- 736** Views to the Together We Build Virtual Town Halls on YouTube
- 251** Responses to the surveys asking for input on design plans for different departments
- 122** Questions answered at Town halls & www.togetherwebuild.wrh.on.ca
- 67** Ideas submitted to the engagement platform and during the town halls

There’s still time to have your say at www.TogetherWeBuild.wrh.on.ca where everyone is invited to learn more, take surveys, add ideas and ask questions. The site will remain live throughout this planning stage.

PROJECT MANAGEMENT OFFICE TEAM MEMBERS

New Windsor/Essex Acute
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Learn more about the project and
subscribe to the project email list for
updates at www.WindsorHospitals.ca



Some examples of suggestions shared on the Together We Build site:

Idea for Inpatient Units: Larger single inpatient rooms, each with their own universal access washroom with space for two staff members to assist if needed.

Idea for Public Spaces: Green space within the building and in outdoor courtyards with gardens and walking paths would be an immense benefit for the patients' mental and physical recovery.

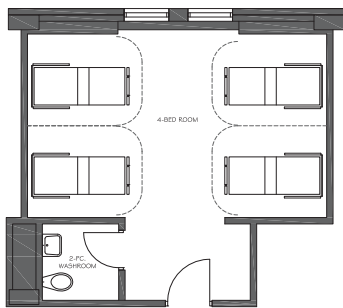
Inpatient Rooms: More space and privacy

The new standard for inpatient rooms is for single rooms that are much larger than current rooms, with larger windows to let in natural light and enable views. Sufficient space for a day-bed for informal caregivers, family and friends gives the ability for overnight stays, when needed and there will be space for the care team and for medical equipment, and for ease of wheelchair accessibility. The result is a much more patient and family focussed environment.

Most patients admitted to the future New Windsor/Essex Acute Care Hospital will stay in private rooms with their own washrooms and **nearly three times the space** as they would have now in WRH's double or four-bed "ward" rooms.

A new single-patient room with its own washroom will **be approx. 290 square feet** (with some specialized rooms being up to 400 square feet). That's compared to the 110 square feet allotted to each patient currently sharing a four-bed room at Met campus and 115 square feet (including the washroom) to those in semi-private rooms.

Current typical 4-bed patient room
Room size is 440 sq.ft.
(110 sq.ft./bed)



Current typical 2-bed patient room
Room size is 230 sq.ft. (115 sq.ft./bed)

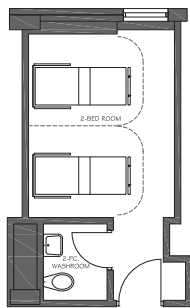
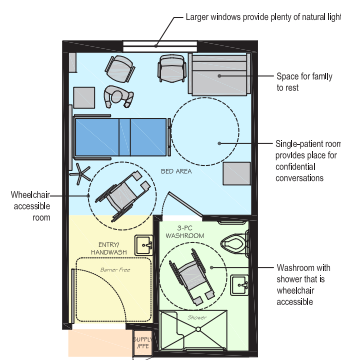


ILLUSTRATION OF FUTURE TYPICAL SINGLE-PATIENT ROOM
Room is 290 sq.ft., with bed area at 160 sq.ft., 3-pc washroom at 65 sq.ft.



"We are really looking forward to the room capacity to have families, visitors, physicians and the nursing team all at the bedside table to give care plans and news in real time, and not being afraid of confidentiality breaches or IPAC (infection prevention and control) concerns," said Kristi Cecile, Director of Medicine Services who is on the Inpatient Unit User Group.

Next steps for public feedback

Feedback received during the town halls and on the website engagement platform will be compiled and shared with User Groups to help guide decision making on the functional program and subsequent design plans of the new hospital. Later this summer, a summary report will also be shared on the project website.

A second round of town hall meetings is being planned for the Fall, so User Group teams can once again check in with the community.

Meanwhile, the public input to date is being considered by the 38 User Groups, now in their third round of meetings as part of the Stage 2 planning process for the new hospital. The functional program groups are led by leading hospital planning experts and include WRH leadership and staff, professional staff and patient representatives. The 38 teams are planning spaces for clinical programs, such as cancer services, the emergency department, surgical suites and inpatient units, and non-clinical departments, such as food services, material management, plant maintenance, housekeeping and education.

When finished, the functional program will provide the sizing and adjacency requirements for all departments and all rooms in the new hospital.

Details are still being worked out, but patients and their families will notice distinct improvements in the size of inpatient rooms, waiting rooms, treatment rooms and public areas.

Infection Prevention and Control (IPAC)

At the current hospital, there are only a few airborne isolation rooms on the inpatient units.

At the new hospital, each 36-bed unit will have airborne isolation rooms for airborne infections and all rooms will be private rooms for contact isolation. These are well-ventilated rooms with hepa-filtration and designed to maintain negative air pressure and limit the spread of infection into the surrounding areas of the inpatient unit and other areas of the hospital.

“We’ve learned a lot over the past couple of years with COVID-19 and we want to make sure our inpatient units are safe for our patients,” said Theresa Morris, Vice-President of Medicine and Patient Flow. “We want them to be adaptable and very efficient.”

The new single-room standard includes adequate space for:

- patients to walk as part of recovery
- wheelchairs and walkers
- larger windows to let in natural light and enable views
- confidential conversations between the patient, family members, and health care providers
- a day-bed couch that converts to an overnight bed for a family member or loved one to stay overnight. Evidence shows both the patient and the loved ones rest much better as a result
- an ensuite 3-piece washroom with a sink, toilet and shower
- Equipment, such as IV and medication pumps, patient lifts, and portable documentation and medication carts
- an overhead patient lift above the patient bed that leads all the way into the washroom for ease of moving patients and reducing injuries of staff
- space for caregivers and learners

“Room for movement, whether it was walking to get fresh air or at least being able to see outside went a long way for me emotionally and physically in my healing,” said Nate Bouchard, a transplant recipient and User Group patient representative. “Allocating space for movement in the places patients will recover is an excellent idea. And having space for family and loved ones is important.”

Critical Care rooms will be even larger than medical surgical rooms: 335 square feet, compared to the current 200-square-foot average. Each will have a two-piece washroom and a pull-out couch for families to stay overnight.

“That’s the difference when you talk about making it a nicer experience for the patients and their families,” said Lucy Brun, Principal with Agnew Peckham Health Care Planning Consultants. “We support patient and family-centred care by making the rooms larger, by providing a family lounge with a three-piece washroom, a nourishment area and a quiet/consultation room.

The new hospital will have significantly more inpatient beds than both WRH campuses combined. Bed numbers are being finalized and will be shared later as soon as they are reviewed and approved by the Ministry of Health following the Stage 2 Submission in early 2023.

Operating Rooms: Space to provide the best possible care

Currently, one outpatient procedure room at WRH is too small to use for anything but dental procedures. Most of the others are so cramped that infection control is a constant concern and medical equipment not in immediate use has to be stored in the hallways.

To put it in measurement terms, the biggest OR at Met Campus is 488 square feet. The biggest at Ouellette is 599 square feet. By comparison, the smallest (OR) at the new hospital will be 590 square feet — almost the size of the current largest one. Operating Rooms in the new hospital used for cardiac, neuro, thoracic and vascular surgery will be even larger: 650 square feet. Two specialized rooms with integrated imaging for vascular and cardiac procedures will be over 1,000 square feet.

CURRENT GENERAL OPERATING ROOM
Average room size is 421 sq.ft.

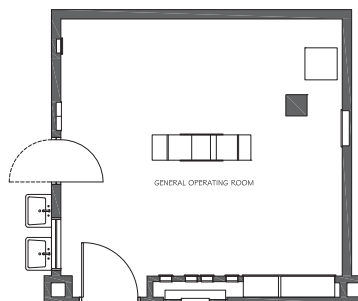
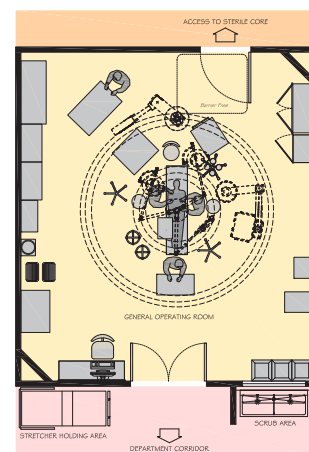


ILLUSTRATION OF FUTURE GENERAL OPERATING ROOM
Room size is 590 sq.ft.



Larger Operating Rooms mean adequate space for modern surgical equipment, some of which can be mounted on ceilings. They also allow physicians, nurses and technicians – who now often find themselves doing procedures in tight conditions – to move safely around the patient and equipment while maintaining infection control standards. There will also be more space for medical and other health care learners.

“We are working on making sure the flow is efficient for the patient and the people doing the work,” said Jen Trkulja, Director of Perioperative Services. “We’re looking at the size of the OR suites and the equipment that is going to be in all of them and making sure the patients are taken care of.”

As well, cubicles for patients to prepare for surgery and recover from surgery will have walls for privacy, confidentiality and infection prevention. There will be one washroom for every six patients. And plans include easy-to-access utility and medication rooms, which means staff members will have to take fewer steps to get to needed supplies.

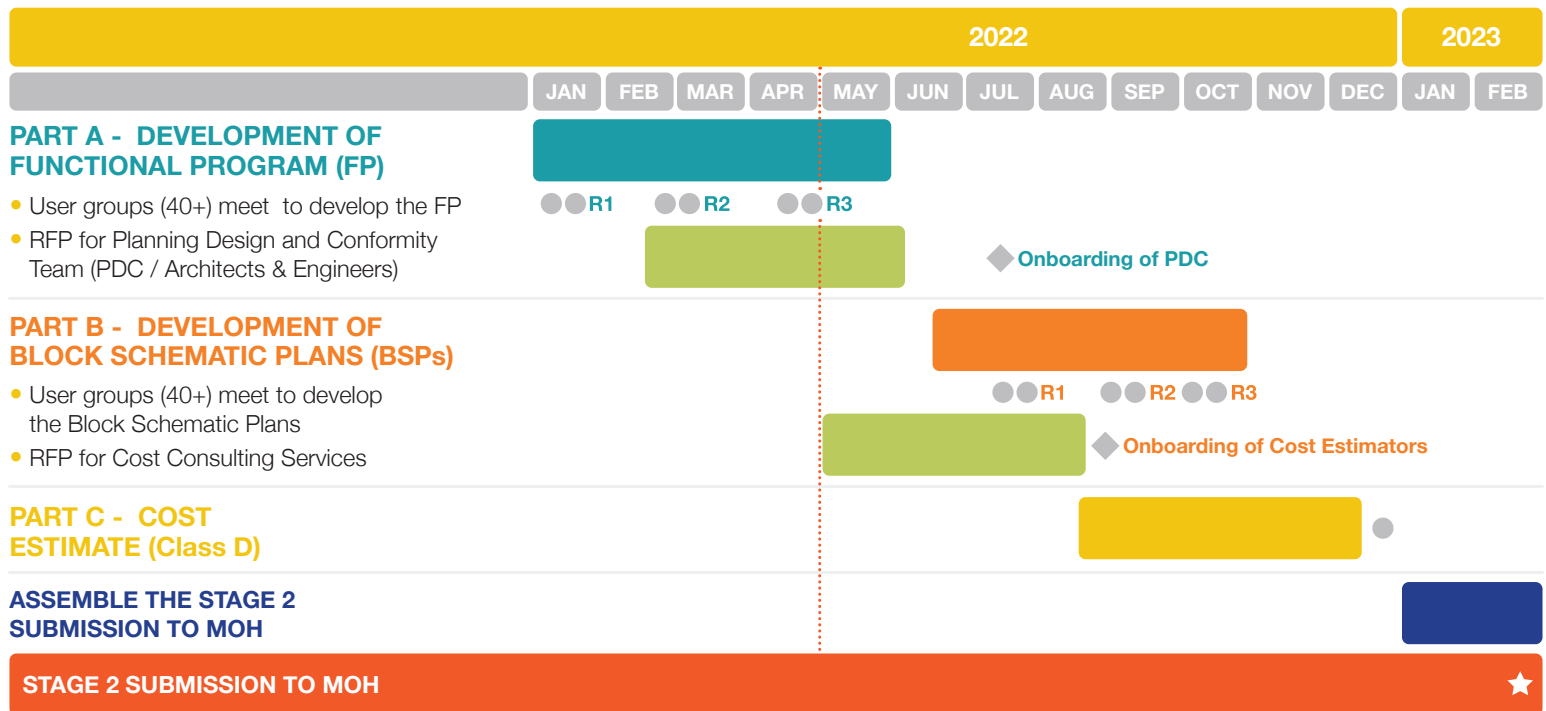
“What’s most important of all is patient and family-centred care: Improved and efficient registration, privacy and confidentiality in all of the rooms, a pleasing environment in terms of light, art, wayfinding and making sure there is a family waiting area near the operating rooms and recovery areas – and a place where surgeons can speak with the families in private,” said Lucy Brun.

More to come!

These are but a few examples of clinical areas where patients and families will experience major differences in accommodations and care. Our overarching goal is to create a truly enhanced patient and family focussed experience.

In the coming months, this monthly report will highlight new standards and features of all clinical services, including the cancer centre, the emergency department, paediatrics and obstetrics, as well as all non-clinical services such as food services, materials management, housekeeping, pharmacy, laboratory and plant maintenance. Stay tuned for more to come!

DRAFT STAGE 2 SCHEDULE (14 MONTHS)



● WE ARE HERE!