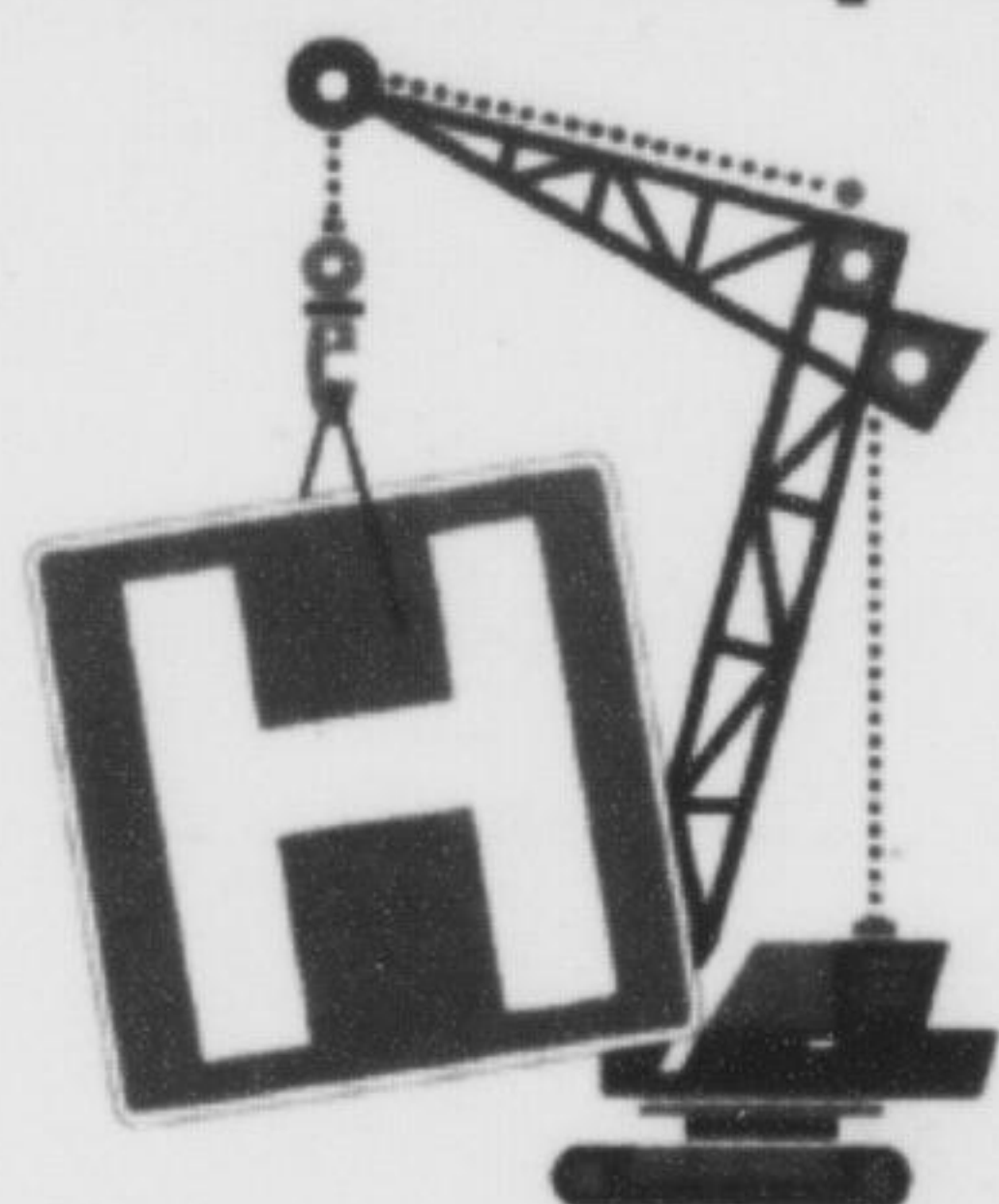


Complex one of largest community hospitals in Ontario

Halton Hospitals



Building Our Health Care

in 10-15 years.

When complete, the 1.6-million-square-foot complex, whose total contract value is \$2.7 billion, will house 39,000 pieces of medical equipment and be one of Ontario's largest community hospitals.

"This will be a full-service, community hospital for Oakville and the surrounding area. It will be sized properly and fitted out to meet all the diverse needs of the residents of Oakville," said Halton Healthcare Service (HHS) President and CEO John Oliver.

"Within the Halton Region, we will be centralizing mental health inpatient beds at this site, dialysis, systemic therapy... so oncology services and major orthopedic joint procedures."

While patients will have to continue to look elsewhere for cardiovascular surgery, neurosurgery, specialty pediatrics and radiation therapy, Oliver said, virtually everything else will be handled at this new building.

"Chemotherapy is probably the biggest new add that we have," he said.

"A fair (number) of Oakville (residents) leave Oakville to access services because we are short of beds here; we are short of services. So, I think for many, it is just that we will have the capacity and the physicians and

the specialists that will allow them to stay in Oakville and receive their care close to home." Oliver said there were few choices when it came to deciding whether the community needed a new facility.

A review was conducted of the existing Oakville Trafalgar Memorial Hospital (OTMH) site on Reynolds Street to determine whether it could be expanded to meet the future needs of a growing Oakville over the next 30-40 years.

OTMH site too small

It was ultimately decided the existing site had too little acreage and the 60-year-old building was too old.

Oliver noted HHS outlined its vision for a new hospital in 2001-2002 and began an extensive dialogue with the community and the Ministry of Health, with Oakville MPP Kevin Flynn championing it throughout, on why it was needed.

The decision to build on the Dundas Street/Third Line site was made in 2005 and construction began in June 2011.

Consultations with the Town of Oakville to secure a local share contribution to the building, up to \$130 million, took place in 2010. As of mid-February, construction was said to be on schedule — about 52 per cent complete.

HHS Vice-President of Redevelopment Bill Bailey said one of the largest factors in the way the facility is being built is its focus on family-centred care.

Family-centred care

This means every patient room will have a family zone, including a sleeper couch, where family members will be welcome to stay.

He said with 80 per cent single-patient rooms, there will be a greater capacity for patient privacy and confidentiality.

The theme extends to the stretcher bays in emergency where a switch can be flicked causing ion reactions to make the glass windows and doors of the rooms become opaque.

At the current hospital, privacy comes in the form of curtains.

The new hospital will also feature room ser-



Halton Healthcare Services President and CAO John Oliver stands in front of the new Oakville hospital currently under construction.

Nikki Wesley / Metroland West Media Group (Follow on Twitter @halton_photog)

vice, pneumatic tube systems to move products back and forth from the pharmacy and the lab, and a helipad, which will be 60 metres from the emergency department.

The current helipad is located near the Ford of Canada complex, so after a medical helicopter touches down, the patient has to transfer to an ambulance to get to the existing hospital.

A larger emergency power supply was also an important feature of the new facility.

"If we ever went off the grid, for whatever reason, we could sustain every light in the building and every operation in the building with six 2.5 kilowatt generators that are up on the roof for 72 hours without interruption," said Bailey.

"That is a huge safety factor for the hospital." HHS Chief of Staff Dr. Lorne Martin said the new healthcare facility is being designed to mitigate the risk of hospital-based infections, like C. difficile.

The rooms, he said, are being built so a specific cleaning process can more effectively remove these types of bacteria.

Dale Clement, chief operating officer for OTMH, said the large number of single-patient rooms also means better infection control.

"When you have more than one person sharing a room, the opportunity for things to be transmitted is there," she said.

"With the new hospital, having these single-patient rooms and being able to provide the right isolation and still allow flow through the hospital is really important."

Clement said bedpan sterilizers inside the rooms means soiled items, and the bacteria they carry, are not being transported into the greater hospital community.

HHS Executive Vice-President Denise Hardenne said the building will feature a new de-

sign for inpatient nursing units.

To cope with a larger percentage of single-patient rooms HHS will create 36 bed units. These are divided into three, 12-bed pods, each of which will have its own nursing station, medication room, supplies and storage.

"The goal is to have our nursing staff with the patients and caring for the patients instead of walking around looking for things and finding supplies and equipment," said Oliver. "Right now, we have what's called the track. So, you have all the supplies in the middle and 36-40 beds around it like a racetrack. The nurses are walking down to see the patient and back to get the supplies and back down to the bedside so you have all this lost time."

Aiming to eliminate wait in ER

Wait times, particularly in the emergency department, are also expected to be better at the new Oakville hospital.

Martin said an increased number of inpatient beds means people won't have to be placed on stretchers in the emergency area.

Oliver said the new emergency department would not only be larger than the one at OTMH, but would operate much more effectively.

The goal, he said, is for people who come into emergency to be assessed by a nurse almost immediately.

From there, the admitting clerks take the patient into whatever care area they need to be in to receive their treatment.

Bailey said diagnostic imaging equipment will be set up in the emergency department so it can be quickly determined the seriousness of a patient's condition.

"Our expectation is that wait times should significantly drop and certainly that sense of sitting in a waiting room — waiting and



Tina Depko-Dermer



Michael Gregory



Lisa Tallyn



David Lea



Nikki Wesley

Next week, Halton Hospitals: Building Our Health Care will look at Burlington's Joseph Brant Hospital. For all the stories, photos and video, visit <http://insidehalton.com/video/4395970>.