

**STAFF REPORT TO THE PLANNING & PROTECTIVE SERVICES COMMITTEE
MEETING OF WEDNESDAY, JUNE 28, 2006**

SUBJECT: **Redevelopment of the Emergency Department at Victoria General Hospital**

PURPOSE/ISSUE:

To request approval for \$120,000 representing the Capital Regional Hospital District's 40% share of planning funds to redevelop the Emergency Department at Victoria General Hospital.

BACKGROUND:

The Victoria General Hospital (VGH) is one of two major hospitals serving the Capital Regional District. The facility is located in View Royal and is operated by the Vancouver Island Health Authority (VIHA). In addition to providing general acute care, VGH provides the Region's maternity, paediatric and rehabilitation services. VGH is also the designated major trauma centre for Vancouver Island.

The Emergency Department (ED) at VGH has received only minor renovations since the hospital was constructed 25 years ago. As emergency care has evolved and the CRD's population has increased, a number of functional deficiencies¹ in the ED have been identified that can only be resolved by a major capital project (see Attachment One).

In the late 1970's, the VGH Emergency Department was designed to receive 10,000 patient visits per year. That number has increased by 260% to 36,000 visits per year. In addition to the increased patient load, the following deficiencies have been identified:

- Patient and staff safety
- Confidentiality issues
- Congestion at triage area
- General congestion
- Inadequate space for:
 - Paediatrics, Trauma
 - Families
 - Staff, Physicians
 - Support personnel (Ambulance, Police)
 - Equipment & supplies storage
 - Emergency care services
 - Bathrooms & shelter for ambulatory drop-offs

VIHA plans to expand the ED southward from the existing ED entrance with a single-storey addition accommodating an expanded ED and minor renovation within the existing building (See Attachment Two). This option can be completed in the shortest time for the least capital cost. Other options considered are outlined in the Alternatives section of this report.

The redeveloped ED would include:

- Increased number of stretchers from 24² to 31 dedicated stretcher areas, seven fast-track cubicles and one psychiatric assessment/secure room;
- Increased floor area from 695 sq meters to 1,700 sq meters – an increase of nearly 1.5 times the size of the current ED;
- Relocating Emergency Trauma/Resuscitation and urgent acute assessment/treatment stretchers to the new addition;
- Renovating the existing ED area for non-urgent acute assessment/treatment; fast-track treatment; and an area dedicated for paediatric waiting and treatment.

¹ A functional deficiency is typically a lack of space or outdated configuration of space to meet current care standards or increased patient load. Technical deficiencies are typically building-code related. Health facilities commonly become functionally deficient before they become technically deficient.

² Of the current 24 stretchers in the existing ED – 4 are located in a hallway and 20 are in dedicated stretcher bays.

The estimated capital cost is \$7.5M with completion by mid-2008. VIHA is ready to begin this project and is requesting the Capital Regional Hospital District (CRHD) to contribute its 40% share of the planning funds in the amount of \$120,000.

Of note, the CRD has a right-of-way for water supply mains through the hospital property near the site of the ED expansion (See Attachment Two). CRD Water Services has provided VIHA with information regarding the location of the right-of-way and size of the mains to avoid conflict with the ED project.

ALTERNATIVES:

1. Expansion at North End

This was initially considered the best option as construction could proceed without disrupting the existing Emergency service at the south end of the hospital. This alternative is the most expensive given the topography at the North End requiring a two-storey structure and extensive roadwork to access a new emergency department. VIHA has rejected this option primarily for cost and schedule reasons.

Approximate capital cost: \$20M

2. Major Renovation in Place

This alternative would consist of phased renovations within the existing ED (while operational) and expansion into the adjacent Surgical Daycare department which, in turn, would require relocation to alternate premises. Execution of this alternative would be highly complex, costly and disruptive to the ED service and has been rejected by VIHA.

Approximate capital cost: \$10M-\$12M (CRD estimate)

3. Expansion at South End

This alternative involves constructing a single-storey addition immediately outside the entrance to the current ED as well as minor renovation inside the existing building without impacting Surgical Daycare. This alternative can be constructed relatively quickly for the least cost and only moderate disruption to the ED service. This alternative is VIHA's preferred option.

Approximate capital cost: \$7.5M

FINANCIAL IMPLICATIONS:

The estimated cost and CRHD share of Alternative Three is summarized in Table One:

Table 1 : Preliminary Cost Estimate	Total Cost	CRHD 40% Share
Alternative 3 - Estimated Cost	\$7.5 M	\$3.0 M
Planning component - 4% of total cost	\$300,000	<u>\$120,000</u>

The District's share of planning funds is included in the CRHD's capital budget with sufficient cash flow for 2006 and 2007. The next CRHD Ten Year Capital Plan (2007-2016) will include the construction funding for this project.

The District's \$120,000 share of the planning phase can be funded from surplus money remaining from the sale of Mount St. Mary properties received in 2004³ thereby, avoiding borrowing costs on a relatively small amount of capital.

³ Of the \$1,914,746 received from Mount St. Mary - \$245,356 remains unallocated. The balance went to funding the District's share of the Outpatient Rehabilitation Project at VGH and for minor capital improvements at various VIHA facilities.

SUMMARY/CONCLUSIONS:

VIHA is proceeding with a much needed capital project to redevelop the Emergency Department at Victoria General Hospital. This project will alleviate safety and congestion issues that are an increasing problem in the current VGH Emergency Department. Alternative Three (Expansion at South End), is VIHA's preferred alternative for an estimated cost of \$7.5M and completion by mid-2008.

The budget for the planning (design) component is \$300,000 and VIHA is requesting the CRHD provide its 40% share (\$120,000). The CRHD's capital budget includes sufficient planning and cash flow allocations for this project for 2006 and 2007. The CRHD's pending capital budget cycle will incorporate the construction phase of this project for 2007 and 2008.

RECOMMENDATION:

That the Committee recommends the Capital Regional Hospital District Board approve allocating \$120,000 from the Mount St. Mary capital reserve to fund the District's 40% share of planning funds to redevelop the Emergency Department at Victoria General Hospital.

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COMMENTS:

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