

## NEWS RELEASE

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For Immediate Release  
January 28, 2009

### **TWO NEW HOSPITALS RECOMMENDED FOR COMOX STRATHCONA**

VICTORIA – Following extensive community feedback over the past two years, the Board of Directors of the Vancouver Island Health Authority (VIHA) today announced it has endorsed a new model for the delivery of acute care (hospital) services on the North Island.

“The 122,000 people who live in the Comox Valley, Campbell River, Mount Waddington and the West Coast communities deserve high quality health care services accessible through modern, brand new state-of-the-art hospitals,” said Jac Kreut, Chair of the VIHA Board. “We have clearly heard what area residents, community representatives and health care providers have said about the need to maintain fully functioning hospitals in both Campbell River and in the Comox Valley.”

As a result of this feedback, VIHA is proposing two new hospitals be built to serve residents of the Comox Strathcona area – one hospital in Campbell River and one hospital in the Comox Valley. Together, the new hospitals would have about 250 beds – an increase of 80 beds from the current bed base in Campbell River and Comox. All currently provided health care services would continue to be delivered in each community’s new hospital. Additionally, Campbell River would have 20 more beds. Enhanced regional services would be provided in the new Comox Valley hospital. These enhanced services would benefit all residents of the North Island.

“After meeting with the staff and physicians at Campbell River Hospital and members of the Regional Hospital District Tuesday night, VIHA has confirmed that an additional 20 beds will be placed in Campbell River,” said Kreut. “That means the two hospitals would have a total of about 250 beds.”

“With the region’s growing and aging population, particularly in the Comox Valley, VIHA recognizes there is a need for more beds and more services to meet the health care needs of Comox Strathcona area residents now and into the future,” said Kreut. “VIHA’s new approach keeps community hospital services in each community intact, while also giving North Island residents better and closer access to enhanced regional health care services such as renal programs, cardiac services, cancer care, MRI diagnostics, enhanced seniors’ care, higher levels of maternity and trauma care and psychiatric emergency care – services that are currently only available in Nanaimo or Victoria.”

In 2006, the VIHA Board put forward a proposal to build a regional hospital on the Inland Island Highway at Dove Creek. Under this proposal, capital improvement would have been made to maintain a community hospital in Campbell River with 24/7 urgent care services, and the role of St. Joseph’s hospital would have been redefined to provide community-based services such as primary care and residential care. Since this proposal was put forward, it has become increasingly clear this model has neither concept nor financial support from key stakeholders, including many area residents, physicians and local government.

“The original 2006 model proposed by an independent consultant had merit. However, we also recognize the lack of community support for this model, and since North Island residents need health care service improvements now, VIHA needs to move forward with a different model,” said Kreut. “We are confident that two brand new state-of-the-art facilities, with a single integrated medical and nursing staff working across both sites, will better support sustainable services and help with recruitment and retention of physicians and other health care providers.”

Kreut stresses that VIHA’s new model for two new hospitals is a proposal only. VIHA has not determined specific site locations for either hospital. The model itself does not yet have provincial government or local government endorsement, and no funding request has been made to either level of government.

In the coming weeks, VIHA plans to solicit feedback from the community and stakeholders on the new proposed model. Following this, a detailed business case would be developed and submitted to both levels of government.

Initial estimates, based on similar projects in other jurisdictions, put the cost of the two new hospitals at between \$500 to \$600 million (plus or minus ten percent), plus incremental annual operating costs. More accurate costing will be developed in the detailed business case and through an eventual public tendering process.

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Find out more at: [www.viha.ca/news](http://www.viha.ca/news)

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# BACKGROUND

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## COMOX STRATHCONA ACUTE CARE SERVICE OPTIONS VIHA BOARD OF DIRECTORS' KEY CONSIDERATIONS

- VIHA's Board of Directors conducted a lengthy deliberation of potential new options for acute care service delivery at their November 2008 meeting.
- The VIHA Board referred to a detailed briefing document "Comox-Strathcona Acute Care Service Options" [www.viha.ca/about\\_viha/comoxstrathcona.htm](http://www.viha.ca/about_viha/comoxstrathcona.htm) prepared by VIHA staff.
- The Board also developed and considered key outcomes and key success factors in its deliberations to select the new option.

### Key Outcomes:

- **Enhanced North Island acute care capacity** to meet the growing and changing needs:
  - An additional 80 acute care beds over current bed capacity;
  - New regional level services including: enhanced palliative and cancer services; enhanced renal services; geriatric assessment; Level 2A perinatal services; Level 3 trauma services; MRI; and enhanced specialty and sub-specialty services.
- **Improved access to services** as a result of new facilities being built in each community. It brings regional hospital capability to the Comox Strathcona area with a Regional Hospital in the Comox Valley and a fully integrated Community Hospital in Campbell River.
- **Enhanced quality of care** with two new purpose built facilities that provide:
  - better space for patients to recover and reduced risk of infections;
  - specialized designs to support elder friendly care and the healing practices of Aboriginal populations;
  - Leadership in Energy and Environmental Design (LEED) gold standards that support the delivery of 'greener' health care to future generations;
  - attractive and innovative functional workplaces for staff and physicians with the latest technology and equipment;
  - maximum flexibility in facility design to ensure long-term adaptability to changing North Island community needs.
- **Maximized staff and physician recruitment and retention** potential with new state-of-the-art facilities in both locations compared to renovated facilities.

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**Key Success Factors:**

- **Integrated VIHA staff and physicians** are essential to the effective functioning of this two site model working as an integrated regional system. All staff and physicians integrated into single clinical and medical staff teams operating under common standards of practice within unified clinical programs. For instance, staff and physicians would have the option to work at one or both sites.
- **Funding commitments** attained from local government for their capital contribution (up to 40%) and from the Province for the capital and operating resources.
- **Acceptance by the public** and key stakeholders including physicians and staff from both communities and the general public.

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## COMOX STRATHCONA ACUTE CARE PREFERRED OPTION SERVICES AVAILABLE BY FACILITY

- VIHA is proposing two new hospitals be built on the North Island. One hospital would be located in Campbell River, the other in the Comox Valley.
- Combined, the two hospitals would have about 250 beds, a total increase of 80 beds for the area.
- Both new hospitals would continue to provide the same acute care services currently delivered, as follows:

### Campbell River

- New, 80 bed hospital delivering the same services currently provided at Campbell River General Hospital.
- This is an addition of 20 beds to the current bed base at Campbell River General Hospital.
- Services currently provided which will also be provided in a new hospital:
  - Primary Care
  - Outpatient Services
  - Diagnostics
  - Transitional Care
  - 24/7 Emergency
  - Day Surgery
  - Inpatient Surgery
  - Inpatient Medicine
  - Maternity
  - Paediatrics
  - Intensive Care

### Comox Valley

- New hospital delivering the same services currently provided at St. Joseph's General Hospital, replacing the 110 beds at this facility.
  - Services currently provided that will continue to be provided:
    - Primary Care
    - Outpatient Services
    - Transitional Care
    - Diagnostics
    - 24/7 Emergency
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- Day Surgery
  - Inpatient Surgery
  - Inpatient Medicine
  - Maternity
  - Paediatrics
  - Intensive Care
  - Psychiatry
- In addition, the Comox Valley hospital would have 40-50 beds for regional hospital programs, serving all residents of the Comox-Strathcona/Mt Waddington area. These services, which are currently not available on the North Island, include:
    - MRI
    - Trauma Level 3
    - Renal Services
    - Cardiac Medicine
    - Enhanced Cancer Care
    - Specialized maternity and nursery
    - Psychiatric Emergency and Intensive Care
    - Enhanced Seniors Care

### St. Joseph's Hospital

- St. Joseph's Hospital is operated by the Archdiocese of Victoria through an Affiliate Agreement with the Vancouver Island Health Authority.
- St. Joseph's Hospital has its own Board of Directors. VIHA funds, but does not 'own', St. Joseph's hospital, and its staff and physicians are not VIHA employees.
- A future role for St. Joseph's Hospital would be determined with the St. Joseph's Hospital Board of Directors.
- Limited discussions have taken place with regards to a future role for St. Joseph's Hospital providing community-based services. These services could include:
  - Palliative Care
  - Residential Care
  - Assisted Living
  - Primary Care
  - Day Programs

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## COMOX STRATHCONA ACUTE CARE OPTIONS CONSIDERED BY THE VIHA BOARD AND DIFFERENCES BETWEEN 2006 OPTION AND NEW PREFERRED OPTION

- The Board of Directors of the Vancouver Island Health Authority considered four different options (the original 2006 decision and three alternate models) to address acute care service needs to meet the growing health care requirements of residents of the North Island (Comox Strathcona) into the future.
- During the late summer and early fall of 2008, VIHA undertook further engagement with staff and physicians on the North Island. This process resulted in the four options that were reconsidered by the VIHA Board. These four options were:

### **Option 1: Regional hospital on one site**

- Original 2006 Board decision to build a new North Island regional hospital with 230 to 240 beds at Dove Creek and Inland Island Highway
- Convert Campbell River Hospital to an Urgent Care Centre
- Convert St. Joseph's Hospital to a Primary Care Centre
- Capital cost: \$370-465 million
- Operating cost: \$120-132 million

### **Option 2: Enhanced Regional Services (one new hospital, one renovated hospital)**

- Build a new hospital in the Comox Valley to replace St. Joseph's General Hospital (110 beds)
- This facility would also add 40-50 beds for regional services, for a total of 150-160 beds
- Renovate Campbell River Hospital and add 20 beds for a total of 80 beds
- Maintain existing services at Campbell River Hospital with necessary upgrades to the facility
- Convert St. Joseph's Hospital to a non-acute care function
- Capital cost: \$400-500 million
- Operating cost: \$125-135 million

### **Option 3: Enhanced Regional Services (two new hospitals)**

- Build a new hospital in the Comox Valley to replace St. Joseph's General Hospital (110 beds)
- This facility would also add 40-50 beds for regional services, for a total of 150-160 beds
- Build a new 80 bed hospital in Campbell River, adding 20 beds to current bed base
- This option is the same as Option 2, except it proposes a new state-of-the-art hospital in Campbell River instead of a renovated facility
- Capital cost: \$500-600 million
- Operating cost: \$125-135 million

### **Option 4: Enhanced Regional Services at Nanaimo Regional Hospital**

- Campbell River Hospital and St. Joseph's Hospital would remain community hospitals delivering the current services provided

- Nanaimo Regional General Hospital (NRGH) would be upgraded and expanded, adding 60-70 beds for acute specialized services
  - Capital cost: \$280-\$350 million
  - Operating cost: \$125-\$140 million
- The VIHA Board unanimously voted to endorse Option 3 – to build two new facilities. The key differences between the 2006 option and the new preferred option are:

2006 Option	New Option (Option 3)
<ul style="list-style-type: none"> <li>○ Single North Island Regional Hospital with 230-240 beds.</li> <li>○ Regional Hospital to be located at Dove Creek interchange on the Inland Island Highway.</li> <li>○ Renovated Urgent Care Centre in Campbell River providing urgent care, diagnostics, transitional care, outpatient care and primary care. Day surgery and inpatient acute care services to be transferred to the new Regional Hospital.</li> <li>○ Renovated Primary Care Centre in Comox. All acute care services transferred and consolidated at the new Regional Hospital.</li> <li>○ New Regional Hospital to provide psychiatry, psychiatric emergency and intensive care, intensive care, maternity, inpatient surgery, day surgery, inpatient medicine, emergency, diagnostics, transitional care, outpatient care, primary care, critical care, perinatal services, enhanced cancer care, cardiac medicine, renal services, trauma care, MRI and pathology.</li> </ul>	<ul style="list-style-type: none"> <li>○ Two hospitals providing a total of 250 beds.</li> <li>○ New 80 bed hospital in Campbell River providing the same services currently provided at Campbell River Hospital with 20 more beds: primary care, outpatient care, diagnostics, transitional care, emergency, day surgery, inpatient surgery, inpatient medicine, maternity, pediatrics and intensive care.</li> <li>○ New hospital in the Comox Valley delivering the same services currently provided at St. Joseph's Hospital: primary care, outpatient care, transitional care, diagnostics, emergency, day surgery, inpatient surgery, inpatient medicine, maternity, pediatrics, intensive care and psychiatry (110 beds).</li> <li>○ This Comox Valley facility would also have 40-50 additional beds providing enhanced regional services to all residents of the North Island: psychiatric emergency and intensive care, specialized maternity and nursery, enhanced cancer care, cardiac medicine, renal services, trauma care, MRI, and enhanced seniors' care.</li> <li>○ St. Joseph's Hospital would be converted to non-acute care services (e.g. services for seniors).</li> </ul>

- During the Winter and Spring of 2009, VIHA will engage with North Island communities, including local government, physicians and staff and area residents to solicit feedback on the new preferred option.
- Should this option be in a position to then proceed further, a detailed analysis (business case) would be developed and submitted to the Provincial Government and the Comox-Strathcona Regional Hospital District for their consideration.
- Endorsement of this business case and funding support is necessary for this option to proceed to tendering stage.

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## RENOVATING VERSUS BUILDING NEW

- The original buildings of the Campbell River and St. Joseph's hospitals were built around 50 years ago, with newer buildings and/or additions added over the years.
- Both hospitals need significant investment to improve and maintain infrastructure. Building problems include:
  - Do not meet current seismic building codes
  - Poor workspace for staff and physicians to deliver modern day health care. Issues include:
    - Lack of patient lifts, resulting in staff injuries
    - Lack of space for current and emerging technology and equipment
    - Designs that do not support involvement of families in patient care
    - Multiple occupancy patient rooms (e.g. four and three beds per room), which increases the risk of infections and provides a poorer healing environment than single patient rooms.
- Preliminary cost to renovate both Campbell River and District General Hospital (CRDGH) and St. Joseph's General Hospital (SJGH) to bring these hospitals up to modern standards is approximately \$260 million.
- As with many upgrade projects, upon completion of the renovation, both hospitals would still face significant limitations compared to a brand new facility, including:
  - Less flexible design and layout
  - Limitations around hospital flow and workplace environment
  - Shorter life span of buildings and higher future costs for maintenance and upgrades
  - Substantial disruption to patient care during renovations
  - Longer renovation time (6-8 years) compared to three years for a new building, due to the need to complete renovations in stages to minimize patient and operational disruptions
  - Less attractive work environment for staff and physicians, negatively impacting on the ability to recruit and retain health care providers.
- Renovations at CRDGH would require construction of a new building with patient care rooms. This due to the age of the current building and the need for extensive seismic upgrading. Because the buildings at CRDGH vary in age, upgrades would require drilling into the soil and ripping out ceilings and walls for braces to stabilize the building – all of which would need to occur while patient care was still delivered.
- In addition, CRDGH would need new operating rooms, intensive care unit, emergency room, space for support services and hospital day services.

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- St. Joseph's General Hospital needs seismic upgrades as well as new operating rooms, centralized sterilization room, obstetric unit, additional hospital beds, enhanced emergency room and space for more diagnostics and hospital day services.
- In addition, the current location and small campus size of SJGH limits this hospital's ability to provide regional hospital services benefiting all residents of the North Island into the future. Issues include:
  - Limited land available for additional buildings
  - Poor traffic and transit access and difficulties locating and reaching from Inland Island Highway
  - Location is at heightened risk for earthquakes

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