

December 2, 2014

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### Edmonton Zone 2030 Plan – Phase 1 Current State Report

EDMONTON – Alberta Health Services' (AHS) Edmonton Zone is developing a comprehensive, long-term service and infrastructure plan – Edmonton Zone 2030 Plan – to ensure plans are in place to meet the current and future health needs of the Edmonton Zone.

This review, completed in June 2013, provided AHS with a snapshot, at that time, of the current condition and inventory of 18 facilities in the Edmonton Zone, with the objective of optimizing the location of health services and the use of built space to address operational concerns and capacity needs to best serve patients and families.

The review and subsequent report – <u>Phase 1 Current State Report</u> (June 2013) – is now being used to develop a detailed database of the current state of Edmonton Zone health care facilities and is forming the basis for future infrastructure improvements as required over time.

The Government of Alberta has provided more than \$260 million of support to address some of the issues outlined in the current state report, with many improvements already completed or currently in progress. Edmonton Zone health foundations have also contributed in excess of \$30 million towards these improvements.

#### Phase 1 Current State Report (June 2013):

There are four sites with significant capital issues in the Zone – Royal Alexandra Hospital, Misericordia Community Hospital, Alberta Hospital Edmonton and Edmonton General Hospital.

#### Royal Alexandra Hospital

#### Issues and opportunities outlined in report:

- The ATC inpatient tower which currently houses more than 500 inpatient beds is obsolete as an acute, inpatient facility, and requires replacement;
- O There are significant operational and capacity pressures in gyne surgery, medicine, cardiac sciences (inpatients), trauma, cancer surgery, Northern Alberta Renal Program, ophthalmology clinic, emergency, psychiatry, adult ICU and NICU;
- o Key support areas, notably Medical Device Reprocessing (MDR) and pharmacy, are either at capacity or have significant space/design programs that hinder productivity;
- The Emergency Department needs major redesign and expansion to meet its current workload demands;
- o There is a shortage of observation beds throughout the facility that affects all programs;
- o There is pressure to expand the bariatric programs and to add bariatric operating rooms;
- There are major IPC concerns in the older buildings with a shortage of negative pressure/isolation rooms, staff hand-washing sinks and patient toilet and bath facilities;
- Psychiatry for children, adolescents and adults are all substandard spaces that present risks to patients and staff;
- o Elevators and lifts are often not working;



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- o Parking for patients, visitors and staff is a major problem;
- o There is unused capacity in the form of closed beds;
- Northern Alberta Renal Program is at full capacity for its hours of operation and faces major increases in demand;
- Outpatient clinic is small, meaning some initial patient assessments and some patient recovery takes place in hallways;
- The Bridging and Transition units are in poor quality spaces that do not meet the needs of vulnerable and frail elderly patients;
- o Laboratory needs upgrade. The morgue cannot accommodate bariatric patients;
- o Pharmacy is poorly designed;
- o Neither the adult ICU nor the NICU meet current space or design standards;
- o Gestational diabetes is in a very poor space and needs to be moved;
- The IVF clinic needs to move because of the impact on embryos of diesel fumes and vibration from the transit centre;
- o Health records space in the sub-basement presents fire safety concerns.

#### Work done or underway:

- AHS and the Government of Alberta have committed to begin extensive planning, including master planning, of the Royal Alexandra Hospital site. Results of the planning will help guide decisions on the future of the facility. The Master Plan is expected to be complete by summer 2015;
- Since 2010, approximately \$18.6 million has been and is currently being spent on critical infrastructure upgrades at the Royal Alexandra Hospital, including major upgrades to cooling and gas systems, security upgrades, heliport upgrades, renovations to switchboard area, and a new data centre;
- Repairs have also been done to six of the elevators in the older part of the building and repairs of remaining elevators have been identified as a high priority project;
- \$15.3 million has been approved for renovations to existing space at the Royal Alexandra Hospital to create 18 beds for adult mental health and detox patients;
- Future replacement plans for the inpatient tower are part of the discussions and planning process of the Edmonton Zone 2030 plan;
- AHS, Alberta Infrastructure and Alberta Health are currently reviewing the spaces used by children and adolescent mental health and psychiatry programs at both the Glenrose Rehabilitation and the Royal Alexandra Hospital;
- Elderly patients are being moved from the current bridging unit to a better location on the RAH campus. A bridging unit is for patients who are in acute care, but awaiting long term care placement;
- The health records space, while out-dated, does meet fire safety standards. The Royal Alexandra Hospital has passed all recent Fire Marshall inspections;
- o Upgrading of Medical Device Reprocessing to increase capacity is in progress;
- o An additional 15-bed Rapid Transfer Unit opened in November, 2014;
- Planning to improve adult mental health inpatient space and establish assessment detox areas is in progress. Redevelopment will begin later in 2015.



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#### Misericordia Community Hospital

#### Issues and opportunities outlined in report:

- Major capacity pressures in emergency, surgical day ward, Endoscopy, cast clinic, lithotripsy, women's health, orthopedic surgery, psychiatry, diabetes clinic, continence/urodynamics, home care office space;
- Sewage leaks in operating rooms, leaking building envelope, mould, failing elevators, obsolete medical gas system, outdated nurse call system, plumbing failures, hot water issues, and insufficient security system;
- o Emergency generators do not meet minimum backup needs;
- o Outdated patient wards;
- o Lack of intermediate care beds;
- o Poorly configured emergency department. Hallway spaces used for patient care;
- Medication storage is not secured. Seclusion room poses safety concerns. One shared entrance for ambulance and walk-in patients;
- o Congested surgical day ward, and poorly designed waiting room;
- Outpatient clinic busy with gowned patients waiting in public areas and soiled utility does not have waste disposal system;
- o Psychiatric unit not configured to meet population needs;
- o Undersized and poorly configured operating rooms;
- o NICU does not meet current space/design standards;
- o Diabetes clinic is at capacity;
- o Pharmacy does not meet current process standards;
- Endoscopy and cast clinic space is too small and creates significant flow issues for patients and staff.

#### Work done or underway:

- AHS and the Government of Alberta have committed to begin extensive planning, including master planning, of the Misericordia Hospital site. Results of the planning will help guide decisions on the future of the facility. The Master Plan is expected to be complete by summer 2015;
- \$6.2 million has been spent on the Misericordia Hospital over the last three years on repairs to the central sterilizing room, replacing chillers, elevator upgrades and renovations to the laboratory;
- o AHS is spending another \$25 million in repairs, renovations and upkeep to Misericordia over the next five years. \$9.4 million is being spent on water damage remediation and renovation projects associated with flooding issues. Close to \$10 million is being spent on upgrades to the electrical systems, emergency generators, elevator upgrades, nurse call systems, sanitary sewage and portable water systems.

#### Edmonton General Continuing Care Centre

#### Issues and opportunities outlined in report:

- o The Northern Alberta Renal Program satellite dialysis unit is poorly designed and only has two private rooms when it needs five;
- The Sleep Lab has a three-year wait list and is not designed to accommodate bariatric patients;



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- o Issues with vermin infestation;
- o Elevators are outdated and function poorly.

#### Work done or underway:

- In the past two years, \$11 million in infrastructure upgrades have been invested to upgrade the fire alarm system, elevators and chillers so that residents are cared for in a safe and comfortable living environment;
- Six elevators are currently being repaired and work is expected to be complete by end of 2014;
- A licensed pest control operator was employed to provide expert assessment and risk mitigation services.

#### Alberta Hospital Edmonton

#### Issues and opportunities outlined in report:

- Expansion over time has created a dysfunctional campus with poor access between key building and confusing way-finding;
- Addiction services are not available onsite. Henwood, a residential addictions treatment centre, is close by and requires major capital redevelopment;
- On-site diagnostic/testing services (general radiology, CT, EEG) with relatively low rates of utilization. Access to services is a challenge for community clients;
- Acuity of psychiatric illness as well as rates of medical co-morbidity are increasing. Very difficult to manage these clinical needs in the current facilities;
- Patients with developmental disabilities are admitted into the general population, presenting programming and safety challenges;
- o The size and design of the adult inpatient units is below current standards;
- o Patient crowding is leading to increased safety and security concerns;
- Insufficient infection control measures such as hand sinks, and private rooms with private washrooms;
- Many areas have no coverage for duress alarms or outdated ones for staff and visitors creating higher levels of risk;
- o Non-sprinkler buildings create significant safety issues.

#### Work done or underway:

- Since 2010, approximately \$7.6 million has been and is currently being spent on critical infrastructure upgrades at Alberta Hospital Edmonton, including major upgrades to the security system, replacement of the emergency generator transfer switch, fire alarm system replacement, and repairs to the courtyard gates and sewage line;
- In April a significant upgrade was completed to the fire alarm system. Upgrades include a new system which would have the fire department responding to a fire at Alberta Hospital within 75 seconds;
- There are updated fire alarm systems and fire cabinets in place. The fire department does regular inspections at the site and Alberta Hospital Edmonton has passed all inspections;



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O New duress alarm systems are being installed in building 10 of Alberta Hospital Edmonton. These are personal pendant-style alarms worn by staff to alert security of the need for assistance and also provide the location of the staff member. There are plans to update duress alarm systems in other buildings as well.

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