Connected Care for Nova Scotians

Redevelopment of the QEII Health Sciences Centre





CONTENT

- Background: QEII Health Sciences Centre
- Services provided at Victoria & Centennial buildings
- Current situation with Victoria General site of QEII
- How/when services will be moved
- Timelines and costs
- Staying informed

THE QEII STORY...





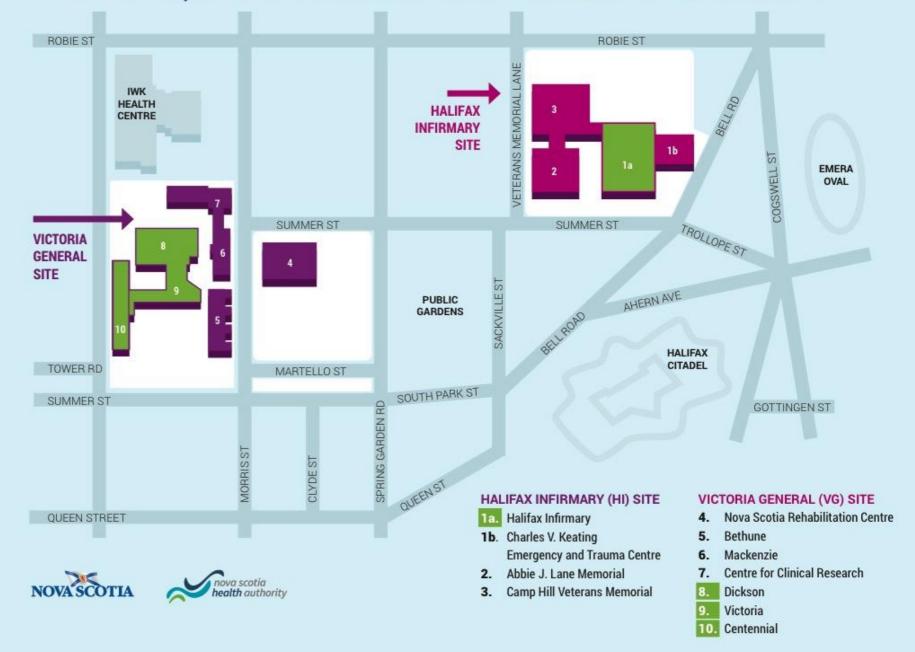
QEII Health Sciences Centre

A leading research and teaching centre providing highly specialized medical and surgical services.

- Serves Atlantic Canada
- Provides most complicated, specialized health care available (i.e. multi-organ transplant)
- Supports research, teaching & learning to continuously improve care
- Serves as community hospital for Halifax peninsula residents & surrounding areas

What is the QEII Health Sciences Centre?

The QEII Health Sciences Centre



CURRENT CLINICAL SERVICES...





CENTENNIAL BUILDING: Current Inpatient Services

(Approx. 215 beds)

- General surgery
- Hematology/blood & marrow transplant
- Medical oncology
- Palliative care
- Multi-organ transplant (liver/kidney/pancreas)
- Thoracic surgery
- Radiation oncology
- Gynecologic oncology

- Urology
- Nephrology
- Hepatology (liver)
- Ophthalmology
- Community transitions unit
- Ear, nose & throat /head & neck cancer
- Oral maxillofacial
- Critical care

CENTENNIAL, VICTORIA, DICKSON BUILDINGS:

Current Outpatient Services

(437,011 outpatient visits/year*)

- Gastrointestinal
- Endoscopy unit
- General surgery/trauma surgery
- Dermatology
- Oncology clinics (Hematology/NS Cancer Centre)
- Gynecology colposcopy
- Radiation therapy
- Termination pregnancy unit
- Outpatient chemotherapy/biologic therapy
- Palliative care
- Immunology

- General medicine
- Endocrinology
- Multi-organ transplant
- Nephrology
- Ear, Nose & Throat
- Ophthalmology
- Oral maxillofacial
- Acute dialysis
- Chronic pain
- Bariatric
- Infectious disease
- Hearing & Speech

CENTENNIAL & VICTORIA BUILDINGS:

Current Surgical Services/Other Departments

(Approx. 15, 800 surgeries/year*)

Surgical Services

- 15 ORs
- Recovery room
- 4 Ophthalmology ORs & 1 minor procedure room
- Medical device reprocessing dept.
- Anesthesia block room
- Pre-admission clinic
- Pre-op area

Other Services

- Diagnostic imaging & lab
- Offices
- Support spaces (e.g., Food & Nutrition)
- Chemotherapy preparation area
- Pharmacy sterile preparation
- Pharmacy
- Cafeteria
- Hyperbaric unit
- Other health disciplines
- Drug distribution
- Retail

WHY WE NEED TO ACT...





CURRENT SITUATION: Centennial & Victoria

- Qualified health care teams, providing safe, quality care
- 15,871 surgeries/year*
- Most complicated, specialized services

Challenges

- Aging infrastructure
- Flooding, elevator failures, lack of air-conditioning & water quality
- ORs/recovery rooms on different levels critical patients transferred by elevator after surgery
- Services fragmented in various buildings patients transported between VG site and Halifax Infirmary for certain treatments
- Modern health care standards require different infrastructure

MANAGING THE TRANSITION





Approach

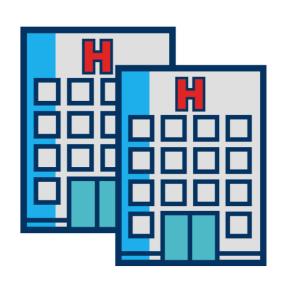
Thoughtful, careful planning that includes:

- considering the needs of our patients
- engagement with clinical leaders & staff
- evidence, best practice & standards of care
- appropriate setting of care
- population needs
- use of technology

MEETING THE NEEDS OF PATIENTS FOR THE NEXT 50 YEARS...





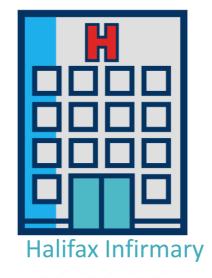










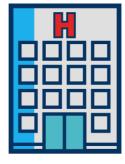












Dartmouth General









Complex and specialized services

Transfer the most complex & specialized services (i.e multi-organ transplant) from VG site to the Halifax Infirmary site of the QEII



Complex and specialized inpatient services

Halifax Infirmary

SITE

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QEII Health Sciences Centre – Halifax Infirmary

- 5th FLOOR RENOVATIONS
- move 4 specialized care areas to HI (including multi-organ transplant)

SERVICES

- increase capacity of pre-op, PACU, ICU & IMCU
- 3 ORs: added to 16 currently there
- increased capacity of inpatient beds

BENEFITS:

- moving some of the sickest patients/specialized services out of the VG
- specialized care & resources in the same location (teams & equipment)
- better coordination & continuity of care

Complex and specialized inpatient services

Halifax Infirmary

SITE

SERVICES

QEII Health Sciences Centre – Halifax Infirmary HALIFAX INFIRMARY EXPANSION, RENOVATIONS, & SPECIALIZED OUTPATIENT CENTRE

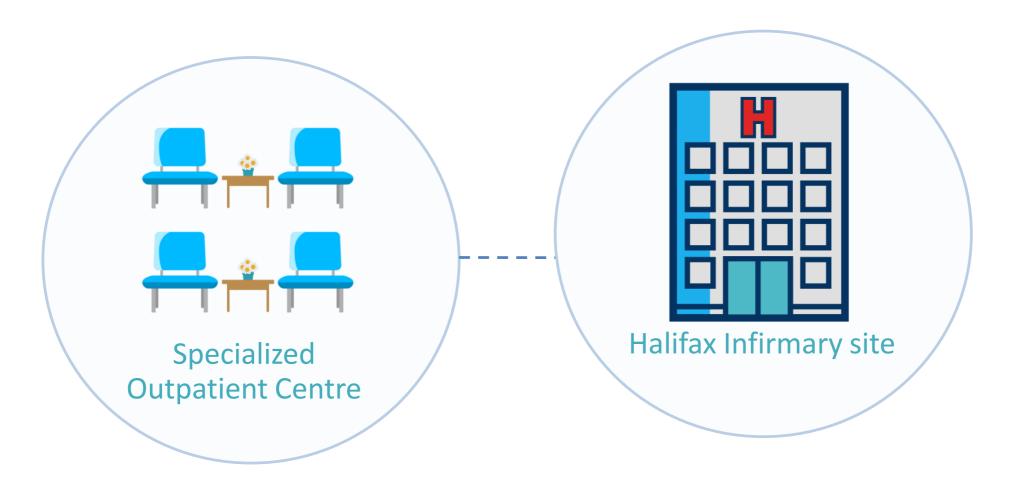
- 26 ORs: relocation of 10 ORs from VG site & 4 ophthalmology ORs (location TBD)
- Relocation of remaining intermediate care & intensive care beds
- 498 inpatient beds: relocation of 162 beds from VG site

BENEFITS:

- specialized care & resources in the same location (teams & equipment)
- better coordination & continuity of care

Specialized Outpatient Centre

Construct new space for specialized outpatient centre that must remain close, or even connected, to existing Halifax Infirmary building



Specialized Outpatient Centre

SITE

Specialized
Outpatient Centre
QEII Health
Sciences Centre –
Halifax Infirmary

SERVICES

Examples of specialized outpatient services include:

- research/ teaching/ academic capacity
- acute dialysis
- QEII pre-surgical admission clinic
- medical day unit
- minor procedures/endoscopy services
- clinically required administrative offices
- cafeteria and retail space

Maritime Heart Health Centre

- cardiac diagnostics
- collaborative heart health clinics

Ophthalmology specialized services

Benefits

- specialized care & resources in the same location (teams & equipment)
- better coordination & continuity of care
- care delivered in the most appropriate setting
- consolidates specialized outpatient services near Halifax Infirmary

Community Outpatient Centre

Develop community outpatient centre for services that do not need to be delivered in hospital setting (or attached to the Halifax Infirmary, for example)



Community Outpatient Centre

SITE

Community
Outpatient Centre
– HRM location
TBD

SERVICES

Examples of community outpatient services include:

- ophthalmology
- cardiology
- chronic pain
- internal medicine
- primary care
- diagnostics, laboratory services and other appropriate health care services
- community dialysis

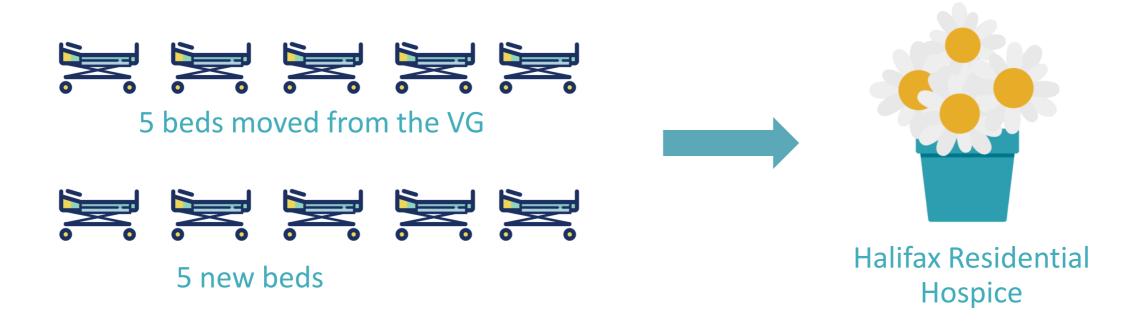
BENEFITS:

- consolidates outpatient services closer to community
- better coordination & continuity of care
- more appropriate use of hospital space

Halifax Residential Hospice

Move 5 palliative care beds to a planned Halifax Residential Hospice

5 **new** beds will also be added for a total of 10



Halifax Residential Hospice

SITE

Halifax Residential Hospice

SERVICES

10 bed residential hospice on Halifax peninsula

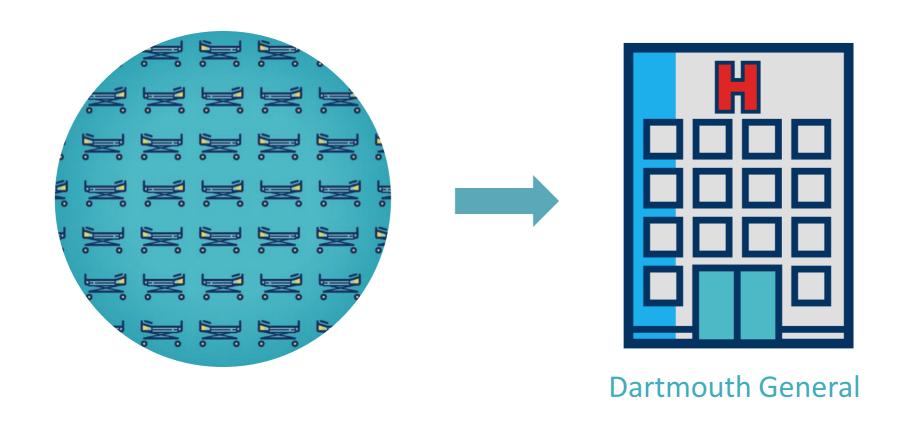
- Move 5 beds from the VG
- 5 new beds

BENEFITS:

- helps meet identified need for hospice care
- care delivered in the most appropriate setting
- gives palliative patients more choice in care options

Dartmouth General Expansion

Expand Dartmouth General Hospital inpatient & surgical capacity



Dartmouth General Expansion

SITE

Dartmouth General Hospital

SERVICES

3rd & 4th floor renovations/ 5th floor expansion & addition

- 8 ORs: increase of 4 ORs
- 147 inpatient beds: increase of 48

BENEFITS:

- relocates about 3,500 surgeries a year
- more scheduled care with less interruption due to trauma cases

Nova Scotia Cancer Centre – enhance and expand









Expand Nova Scotia Cancer Centre

QEII Dickson Building

SITE

SERVICES

Nova Scotia Cancer Centre Relocation of specialized outpatient cancer care services to Nova Scotia Cancer Centre including:

- systemic oncology (chemotherapy & biologic therapy)
 - systemic care suite, systemic supportive care suite, aphaeresis unit
- chemotherapy preparation area
- support services required for the delivery of cancer care (ie. Diagnostic imaging, laboratory services & pharmacy)
- research

BENEFITS:

- specialized care & resources in the same location (teams & equipment)
- better coordination & continuity of care (collaborative environment)

Relocate surgeries by re-opening a second OR at Hants Community Hospital in Windsor & using Scotia Surgery services more





Scotia Surgery services

Relocate Outpatient Surgeries

SITE

SERVICES

Hants Community
Hospital

• Renovate 2nd OR: increase of 1

BENEFITS:

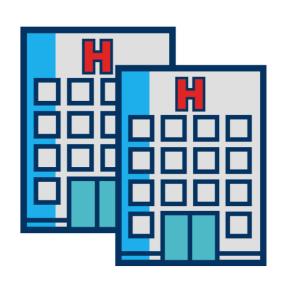
- relocates about 800 procedures a year
- more scheduled care with fewer interruptions due to trauma cases
- makes better use of resources

Scotia Surgery

Currently using 3 days/week; exploring ability to increase use

BENEFITS:

increases outpatient surgical capacity

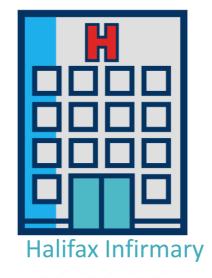










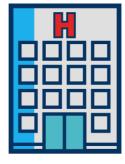












Dartmouth General









WHY THIS IS IMPORTANT FOR NOVA SCOTIANS...





BENEFITS FOR NOVA SCOTIANS

- Most specialized care together, in one place
- Increased co-ordination of care & access
- Improved and modern facilities & spaces
- Meeting patients needs for the next 50 years

MASSIVE UNDERTAKING... MOVING PARTS... DOING THINGS CONCURRENTLY





WORK HAPPENING NOW



Dartmouth General

- renovations to the 3rd & 4th floors
 - completion planned for spring 2017
- detailed design phase for additional inpatient units on 5th floor, new ORs, & support services
 - first construction work planned for summer 2017



Hants Community Hospital

- planning stage for new OR
- design will begin in spring 2016
- cost estimate/construction fall 2016

WORK HAPPENING NOW



Scotia Surgery

- NSHA in discussions
- no construction required



Halifax Infirmary Site

- clinical functional planning to move specialized services from VG site to 5th floor (ie: multi-organ transplant)
- RFP for design to be issued in summer 2016
- planning & programming for expansion, renovations, & additions including QEII specialized community outpatient centres (Halifax Infirmary site & community)

WORK HAPPENING NOW



Halifax Residential Hospice

- planning & design phase
- build 100% funded by Hospice Society of Greater Halifax
- discussion ongoing around operational agreement



QEII Dickson Building: Nova Scotia Cancer Centre

planning phase

FUTURE OF THE BUILDINGS...





CENTENNIAL & VICTORIA BUILDINGS

- relocating of services to begin late 2016
- decommissioning to begin 2020
- demolition to begin 2022

HOW MUCH WILL IT COST...





COSTS & FUNDING

- Dartmouth General Hospital
 - \$132 million \$138 million
- Other project pieces: costs to be determined once planning stage is complete. At that time, estimates will be discussed and approved by government. Patient needs and the fiscal capacity of the province will be considered every step of the way.
- Budget 2016-2017 contributes \$110.3 million to debt repayment, building fiscal capacity to launch this multi-year redevelopment plan
- Continue to seek support from federal government
 - ie. funding around technology/innovation
- Consider other options, including P3 funding
- Community Support
 - Working with foundations, auxiliaries & other partners

So, why now? Why this?

- Victoria and Centennial buildings have served Nova Scotians and Atlantic Canadians exceptionally well for the last 50 years.
- Aging infrastructure cannot support modern, new health care options that are now available.
- And, we know there are better ways to meet the needs of patients—in their community or within the hospital setting.
- This project, in its totality, is a combination of clinical and construction best practice and will serve the needs of patients for the next 50 years.