

Oakville Beaver

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Town defers hospital decision

Artist's rendering courtesy Halton Healthcare Services



“If we are concerned about what future generations will think, let us ask how our own children will judge this decision.” - Resident Mark Dawson

It's possibly the largest decision an Oakville council will ever have to make and more time and information is needed to make sure it's the right decision.

This was the conclusion Town councillors arrived at Thursday in the third installment of a council meeting held to ponder whether Oakville should provide Halton Healthcare Services with a \$200 million contribution for the new Oakville hospital, not provide it or defer the decision.

In the end, council opted for the deferral and now has until April 24, which the Province says is the latest date the decision can be pushed back to without damaging the hospital's Request for Proposal (RFP) process.

A council meeting concerning the decision will take place on Monday, April 19, giving several days for delegations to make their points.

In a statement to a delegate during Wednesday's portion of the meeting, Oakville Mayor Rob Burton spoke about the problem council faced with making a decision now.

“There is some information that we don't have and we have actually asked for over and over. What is the exact amount being asked for this? Is it \$170 million, is it \$200 million, is it \$230 million or is it \$383 million? We have not been able to nail that down. The reason we can't nail down what it is, is because we can't find out what the rate of interest is,” said Burton.

“The other question we have is what is really included in this package. What do we really get? For example, we at this moment still don't know whether there really is a cancer centre in the new hospital and we still don't know when or whether there would ever be 457 beds or just room for them. We have some anxieties that have not yet been allayed.”

Burton said he was delighted the Province had given council until April 24 to find some of these answers, since they are necessary for council to be able to make a responsible decision.

The hospital question has drawn considerable public interest. If council agrees to a \$200 million contribution, property taxes would go up. One payment model shows an escalation in property taxes from \$15 per year per \$100,000 of assessment in 2015 to \$35 per year per \$100,000 of assessment over 30 years.

Around 27 delegations spoke during the council meeting, which stretched into three segments over three days, with supporters and dissenters expressing their views.

Oakville resident Ken Robertson voiced concerns about the \$200-million contribution stating the hospital should not be a luxury condo and the costs involved might be greatly reduced if some the extravagant aspects like the family accommodation areas were taken out.

Oakville resident Brian Hopkins expressed concern about the uncertainty around the future of the existing Oakville Trafalgar Memorial Hospital (OTMH) site when it is replaced by the new hospital at the corner of Dundas Street and Third Line in 2015.

He also objected to nearby communities not paying for the hospital when their residents would almost certainly be using it.

“How can this spending be justified at a time when council is freezing spending on new services? A lengthy marketing campaign has provided very little information about the costs of the proposed hospital. The \$200 million is only one part of the stated \$530 million wanted from our community. Local fundraising (by the Oakville Hospital Foundation) is said to cover \$60 million (hospital revenue will cover the remaining \$270 million). What are the plans for how to raise this amount? Is it achievable? Where is the track record to support these lofty goals? What happens if there’s a shortfall?” asked Hopkins. “Show us the realistic plans for fundraising and revenue portions of the local share before asking for our tax dollars.”

At Wednesday’s meeting, Burton addressed the issue of residents from other communities using the hospital. He said charging the other Halton communities was not practical.

“I’ve been trying to say to the public, when I interact with them on this question of charging other communities, how much we go to other communities, so many of my friends have gone to other facilities to get the specialized care they need, and I don’t believe that is going to change,” said Burton.

“I said to one of these people, ‘You expect to be able to charge other people to come here, aren’t you aware that you would have to pay to go to these other places if you needed those.’ So let’s get over that.”

Residents supporting the \$200-million contribution also spoke.

Mark Dawson said the proposed tax increase wasn’t a lot to ask for what Halton Healthcare Services is offering.

“If we are concerned about what future generations will think, let us ask how our own children will judge this decision,” he said. “Will they be happy that we saved \$20 off the tax bill at the suggestion of a pollster or will they be thankful that we supplied a CT scanner for our emergency rooms when their grandmother slips and falls. Will our principled stand for exclusive provincial funding mean that a generation of school kids grow up in Oakville with inadequate and outdated hospital space? I certainly hope not.”

Other delegations heard by council included Halton Healthcare Services Chief of Staff Dr. Lorne Martin, who talked about being able to save a young child because the community had raised the money to provide OTMH with the diagnostic equipment it needed.

Martin said that need is growing with the community.

The staff at OTMH, he said, need more room, more beds and more equipment in order to continue to do their lifesaving work properly.

Dr. Neil Rau, medical director of infection prevention control for Halton Healthcare Services, said an outbreak of Norovirus, which happened this week at OTMH, would have been much easier to bring under control in an 80 per cent single patient room facility like the proposed new hospital.

Norovirus is a normally non-lethal virus, which is usually limited to causing nausea, vomiting, diarrhea and abdominal pain, however, this virus still forced the closure of a ward at OTMH.

Rau said this was significant not only because the patients' experience in the hospital was bad, but because 13 OTMH staff members became ill during the outbreak and a number of beds had to remain vacant to prevent the further spread of infection.

Rau said a person in a single-patient room at OTMH did get the virus, but maintained patients have a greater risk of getting hospital-borne diseases if they are in a ward bed.

During Wednesday's meeting, council did get close to some of the answers they were seeking.

In a conversation with Infrastructure Ontario's John McKendrick, council learned the interest rate for the \$200-million loan from Infrastructure Ontario would be 4.86 per cent if the Town borrowed it immediately.

McKendrick, however, could not say what the interest rate would be in five years when the Town actually needed it, but said it would be locked in place for 30 years.

He also said that if the Town borrowed the \$200 million now, the interest would start accruing immediately.

Councillors asked McKendrick why Oakville is being asked to pay so much more for a hospital than any other community.

In Barrie the community was asked for \$52 million towards a new hospital; the City of St. Catharines was asked to contribute \$31 million; the Region of Niagara was asked for \$21 million; the City of Kingston was asked for \$16 million; and the City of Vaughan was asked to contribute \$80 million.

The Region of York has a comparable request before them of \$260 million for their hospital.

"You've got a bigger project than most other municipalities," said McKendrick. "You've got a big project, you've got a big growing area, you've got more needs than other municipalities, so you're local share is going to be bigger."

McKendrick also fielded a question from Ward 6 Councillor Max Khan who wondered about Oakville going through a similar hospital process that Brampton went through.

Khan said that in 2001, it was estimated the Brampton Civic Hospital would cost \$381 million and include 716 beds.

These figures changed as the project went along, with the cost rising in 2004 to \$525 million for a hospital capable of holding only 608 beds.

Finally the hospital opened in 2007 with only 479 beds.

Khan asked McKendrick how a similar situation could be prevented in Oakville.

“You have been approved for 457 beds that has been decided by the Ministry of Health and that is what you are going to get,” said McKendrick. “That’s a functional program that has been approved and that is the basis through which I am advancing this project.”

Halton Healthcare President and CEO John Oliver could not say exactly how many beds the new Oakville hospital would open with, but said it would be more than the 320 beds currently available at OTMH.

Staffing and equipment would be phased — raising the total of available beds to 457 over the course of three years after opening.

Halton Healthcare Services has reported that the hospital’s capacity is expected to move to 600 beds by 2018/2019.

Business manager of the Local 793 International Union of Operating Engineers Mike Gallagher also spoke during Wednesday’s meeting. He attempted to ease some of council’s concerns about the project.

“The building trades, which I am up here representing, are the ones that are going to build the hospital, hopefully, in whatever design you decide it should be built in. We would like to say that we’re prepared to sit down and entertain negotiating a project agreement for this particular job,” said Gallagher. “What that means is we will remove some of the risk going forward in terms of negotiation cycles. If we reach a project agreement there will be no work stoppage during the term of the project.”

Gallagher said he supported the project stating it would create around 2,000 construction jobs.