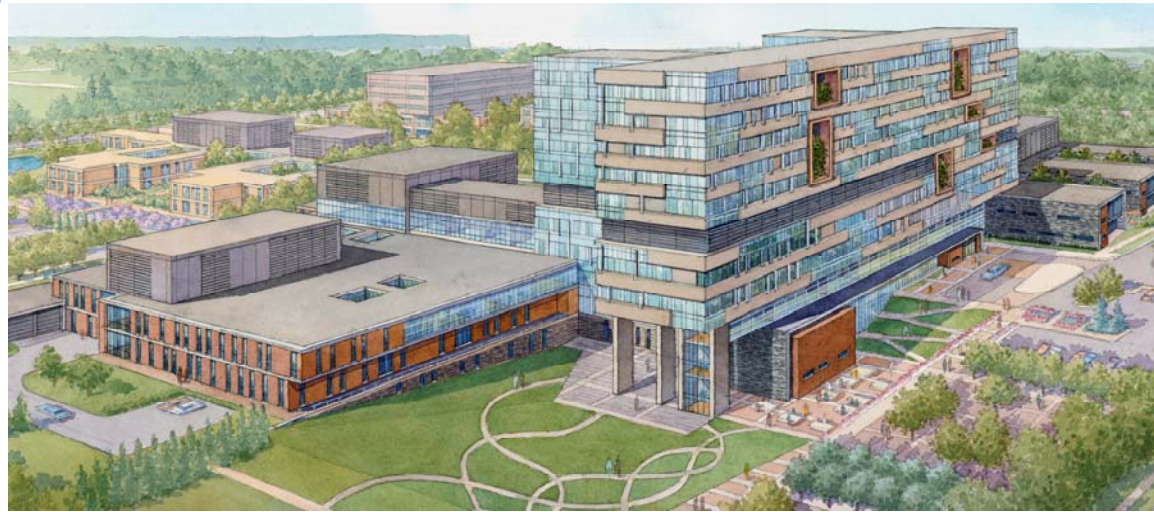


New Oakville Hospital News

Winter 2010

Fulfilling Our Local Share



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In October 2009, Halton Healthcare Services (HHS) submitted a formal request to the Town of Oakville to consider a financial contribution to the local share plan for the New Oakville Hospital in the amount of approximately \$200 million (2014/15 dollars).

An initial payment is not required until completion of construction, expected in late 2014. The balance can be paid over 30 years. The exact amount of HHS' request of the Town will be finalized when the project reaches financial close in 2011.

The local share, which also consists of commitments from HHS and the Oakville Hospital Foundation, is required to finance components of the project that are not paid for by the Province. These costs include 100% of clinical equipment costs and non-eligible construction (parking and retail facilities) as well as 10% of eligible construction costs and 30-year building maintenance.

Project cost estimates will continue to be refined as planning progresses. The final cost of the New Oakville Hospital will be known after the deal has been signed (financial close) with the preferred project team. Following financial close, expected for Spring 2011, full project costs will be shared publicly.

On Tuesday, December 8, 2009, at a special meeting of the Town's Committee of the Whole, HHS made a presentation to Town Council about the importance of the Local Share and the need for Council's support of the full \$200 million request.

At the conclusion of the meeting, Council voted unanimously for public consultations to be held in January and February 2010. The request by HHS for a local share contribution will be considered at the March 1, 2010 Council meeting.

Visit us on-line at www.newoakvillehospital.com.



Halton Healthcare

What is the Local Share?

The local share refers to components of a project that are not paid for by the provincial government. All hospital redevelopment projects require a robust local share plan.

Before the Ministry of Health and Long-Term Care approves the release of a Request for Proposals for our project, we must prove our local share will be fulfilled. We have asked the Town to commit to a portion of our local share for the New Oakville Hospital.

This commitment is required by March 2010 in order to release the Request for Proposals in Spring 2010.

Components of Our Local Share Plan

Oakville Hospital Foundation Capital Campaign - \$60 million (+/- 15%)

- Personal &/or private sector donations
- Led by the Oakville Hospital Foundation

Halton Healthcare Services – \$270 million (+/- 15%)

- Parking revenue
- Patient services revenue – eg. Premium accommodation
- Other retail revenue

Local Government

Municipality - \$200 million (+/- 15%)

Another Milestone Achieved

This past November, Halton Healthcare Services and Infrastructure Ontario released a request for qualifications (RFQ) to design, build, finance and maintain the New Oakville Hospital.

The RFQ invites developers to indicate their interest and qualifications for the project. This is a very important milestone in moving towards the construction of our new hospital.

“The release of our RFQ would not have been possible without the hard

work of our staff, support of our community and the government,” said John Oliver, HHS President & CEO. “We are grateful for the commitment shown to the hospital by all of our partners and we look forward to continuing our collaborative work.”

The deadline for RFQ submissions is February 5, 2010.

Following an evaluation process, pre-qualified project teams will be selected to proceed to the next stage – the Request for Proposals.

Understanding AFP

Alternative Financing and Procurement (AFP) is a relatively new financing model used by the Province to fund large-scale infrastructure projects.

Infrastructure Ontario’s AFP model uses private financing to strategically rebuild vital infrastructure, on time and on budget, while ensuring public control and ownership.

Private sector companies have always been used to build public projects. The AFP model differs from the traditional procurement process in several ways that help to protect the public interest:

- Transfers risk from the public sector to the private sector. Under the AFP model, the private sector assumes risks associated with cost overruns and late delivery.
- Payment occurs only after construction is completed. This ensures projects are delivered on-time and on-budget
- Long-term life-cycle and building maintenance is tied to the building team ensuring integration of design and construction with maintenance and lifecycle costs. This provides the hospital with a “warranty” that the facility will be maintained in optimal condition over the term of the 30-year facility maintenance agreement.

For more information about the AFP financing model, visit www.infrastructureontario.ca.

Introducing a New Standard for Care

The New Oakville Hospital is one of the first new hospital projects in Ontario to be built using the Ministry of Health and Long Term Care's new design guidelines for hospital construction.

The guidelines are part of a new set of standards the Province has developed to improve the efficiency of the planning process, create greater consistency among hospitals throughout the Province, and prevent the spread of infectious diseases in hospital settings.

The new guidelines include recommendations for such things as the location of hand hygiene stations, HVAC (Heating Ventilation and Air Conditioning), spacing and storage, clean and soiled storage areas, and waste management.

Examples of recommendations included in the guidelines:

- Visitor routes shall minimize contact with patients/clinical areas.
- Separate toilet, shower and handwashing areas for each inpatient room.
- One handwashing sink inside each in-patient room, adjacent to the entrance. The handwashing sink in the room is in addition to the sink in the washroom.
- Alcohol-based hand rub bottles shall be mounted adjacent to the bedside.

The new guidelines result in more square footage to accommodate separate entrances and exits for staff and visitors, and new configurations for clinical spaces to minimize contamination of hospital equipment.



These new standards are designed to reduce the spread of infectious diseases, such as C. difficile, within the hospital and improve the patient experience.

Local Share - Philanthropy

Without a sense of caring, there can be no sense of community.

— Anthony J. D'Angelo

Did you know that most medical equipment is not funded by the Province? In fact, the Oakville Hospital Foundation exists to respond to the equipment needs of Oakville-Trafalgar Memorial Hospital. Donations to the Foundation this year will result in \$1.7 million in equipment needs being met. The need has become greater.

A \$60 million Capital Campaign to support the New Oakville Hospital is in its early stages. With the engagement of highly committed campaign and Board volunteers we have identified commitments from Oakvillians of more than \$8 million to-date. The Oakville Hospital Auxiliary has committed \$3 million toward this once-in-a-lifetime opportunity. Physician and staff ambassadors are stepping forward to tell their stories.

Their stories have one thing in common - we can build and equip a remarkable hospital that will respond to emergencies, mend broken bones, administer cancer care and promote all aspects of health in our local community. Let us give them the tools they need.

There are many ways for you, your family, workplace, school or local community group to become involved with this meaningful opportunity.

With your support, we will all celebrate reaching our \$60 million goal when we open the doors to the New Oakville Hospital in five years. Together we will celebrate a sense of caring and a sense of community.

Frequently Asked Questions

Accommodations

How many beds will there be?

When the hospital opens all inpatients from our current hospital will transfer to the new facility. The number of beds will increase over a period of time as the hospital ramps up operations to its capacity of 457 beds.

I have heard that 80% of the rooms will be single-patient. What does this mean?

Eighty percent of the inpatient rooms at our new hospital will be designed for one patient. Single-patient rooms enhance infection control and provide patients with increased quiet and privacy. New hospitals across the Province are being built with a larger percentage of rooms designed for single-patient use.

What if I cannot afford a semi or single room?

Individuals who require hospital care will never be refused a bed.

Upon admittance, every effort will be made to place you in the room you request – ward, semi or single. If, for any reason, you are placed in a room other than the type you requested, you will not be charged more than the cost of the requested room. For example, if you require a single room for medical reasons you will be assigned a single patient room at no additional charge.

The following is a breakdown of the hospital's accommodations policy:

Request	Assigned	Billed
Ward	Private or semi	No charge
Semi or private	Ward	No charge
Semi	Semi or single	Charge for semi
Single	Semi	Charge for semi
Single	Single	Charge for single

Project Costs

What is the total cost of the project?

Providing an estimate at this time is premature and could jeopardize the competitive procurement process. We want to obtain the most favourable proposals from future bidders. Publicly revealing cost estimates could artificially establish low/high costs and undermine the competitive tension of the bidding process.

How are patient rooms assigned?

Upon admission to the hospital you will be asked to make a choice of accommodation (ward, semi or single).

Rooms are assigned based on several factors. These include, but are not limited to:

- Medical condition
- Type of accommodation requested
- Room availability

If you are assigned a room other than the type you have requested you will be relocated as soon as the right type of room becomes available.

What percentage of the project is paid for by the local share?

The local share includes 100% of clinical equipment, 100% of non-eligible construction (retail space, parking facilities, etc.) and 10% of eligible construction costs and the 30-year life-cycle costs and maintenance of the building.

On Track...

November 2009
Request for Qualifications Issued

May 2010
Request for Proposals Issued

Winter 2010
Select Preferred Proponent

Spring 2011
Commercial Close, Financial Close and start of construction

New
**Oakville
Hospital**

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