

## Fact Sheet

# New Building to Replace Moose Jaw Union Hospital

New building, with Patient First approach to layout, service delivery and safety.

Site in Moose Jaw to be determined. Construction expected to begin in early 2013, with completion by end of 2015.

Before the August 30, 2011, announcement, \$5.45 million had been allocated by the Ministry of Health for the development of a functional plan. The Ministry has now approved the development of a schematic design, to be followed by detailed plans for construction. The Ministry will provide an additional \$5 million this fiscal year to complete the detailed plans. Funding will be provided as needed for the next stages of development.

### Expected Efficiencies

- Patient travel around the building reduced by 40 per cent;
- Solutions to promote zero defects, for optimal patient safety;
- Energy costs reduced by 25 per cent; and
- Space needed will be 30 per cent less than if a traditional addition had been added to the existing building.

### Services

- 24-hour emergency and observation
- Inpatient acute services for adults and children
- Palliative care
- Therapy services
- Hyperbaric chamber
- Physician clinics
- Outpatient services including:
  - Dialysis and chemotherapy
- Diagnostic services including:
  - Laboratory
  - Advanced diagnostic imaging
- Community services including:
  - Public health
  - Mental health/addictions counseling
  - Home care
  - Therapy services

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### Existing MJUH Building

Original wing - 1948  
Memorial wing - 1954  
Newest wing - 1973

Tier 1 regional hospital (provides some specialized service not available at Tier 2 regional hospitals).



### **About Five Hills Health Region**

The health region employs the equivalent of 1,200 employees, serving a population of about 54,000 people in an area of south-central Saskatchewan that extends from Lake Diefenbaker to the United States border. The region manages 11 health facilities, and contracts with a number of affiliated organizations, community-based organizations and service providers to provide a range of health services for residents.

### **Regional Health Facility Capital Funding Formula**

<b>Provincial government</b>	<b>80%</b>
<b>Local communities</b>	<b>20%</b>

In February 2011, Health Minister Don McMorris announced a change to the existing 65%-35% funding formula for planning and construction of health facility buildings (or additions/renovations) that qualify and are approved by the Ministry of Health.

Shared costs include the cost of researching and planning the change, developing functional plans, schematic designs and detailed construction plans, site preparation, construction and other activities related to the development of the building.

### **Furnishings, Equipment and other Non-shared Costs**

Health regions are responsible for additional expenses such as furniture, equipment and other items that are not considered shared costs. Fund-raising is often undertaken by a local non-profit organization like the Moose Jaw Health Foundation.