

Our Place | Ahu Taumatua

THE REDEVELOPMENT OF PALMERSTON NORTH HOSPITAL

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ACHIEVEMENTS

- First concrete pour for MAPU/EDOA foundations
 - SPIRE progressing well
- Long-term demand and population projections under development
 - Concrete base for new oxygen tank in place



Foundation being laid for MAPU-EDOA facility.



SPIRE progressing.



Foundation pad laid in readiness for new oxygen tank.

WHAKATAUKĪ

Kua ngaro te wai, kua ngaro te whenua kua ngaro tāua
With the loss of our environment and land we too are lost

The environment is a key aspect for wellbeing and is integral in the way Māori view 'hauora' (holistic health). This whakataukī reminds us of the relationship we have with Papatūānuku (Earth mother) and how Māori use the health of the environment as an indicator of health of the people.

“Our Place” keeps you informed of the strategic projects, interim solutions and the supporting infrastructure work being progressed to ensure Palmerston North Hospital is able to meet current and future demand.

Strategic

- Acute Services Block
- Reconfiguration of Clinical Services Block
- Mental Health Acute Facility
- Regional Cancer Facilities

Interim

- SPIRE Project (Surgical and Peri-operative Capacity)
- ED and Acute Assessment Capacity (ED, EDOA & MAPU)
- ICU and Acute Care Capacity

InfraStructure

- Electrical, heating, ventilation
- Three waters
- Medical gases
- Fire systems
- Thermal and emergency generation systems

SPIRE

Steady progress continues to be made with the first Stage of this project. The new Gastroenterology, Recovery and Day of Surgery Admissions areas are taking shape. However, additional work required to address issues found within the ceiling space, etc, together with the impact of COVID, has pushed the completion date out from June towards September. This will impact Stage 2 but the team are looking at ways to minimise this.



Within the ceiling space, the structure needed to hold the many services, such as power, data, medical gas and fire sprinklers, is nearing completion.



One of the next key pieces of work is establishing a plant room on the roof space, and you will soon see scaffolding put up.



MAPU/EDOA

The foundation for this new facility will be completed in May. This is being done in three slabs. The first concrete pour took place on Monday, 11 April.

The two further pours are scheduled.



ACUTE MENTAL HEALTH UNIT

The focus over the past few weeks has been on the business side of the project – looking at the best way of procuring a main contractor to construct the building. The building sector is markedly different today with demand exceeding supply, shortage of skilled staff, and delays with the supply chain. Resource consent has been sought.

The developed design has been reviewed by the Ministry of Health. Suggestions received regarding patient flow, particularly pathways and doors, are currently being further explored.

ACUTE SERVICES BLOCK/ RE-LIFING OF CLINICAL SERVICES BLOCK

A critical component of our business case for these facilities is baselining current demand and forecasting ahead. This was reinforced at a presentation provided by the Ministry of Health's Health Infrastructure Unit in early April.

Paul Greatorex and Dr Richard Fong (Finance & Corporate Services) have completed the first draft of a Health Needs Assessment for our population, examining demand and projections into the future, including the significant unmet need that currently exists and needs to be factored into a new hospital build. This report will be enhanced with further clinical input to guide these projections and Paul and Richard will be working closely with Medical Leads across the hospital over coming months.

All population and long-term forecast data will include a specific focus on equity.



Pictured Paul Greatorex (left) and Dr Richard Fong, Finance & Corporate Services.

Unmet Need

Quantifying unmet demand is a significant issue for MDHB as our current facilities severely constrain what can be done. This is further impacted by the primary care workforce issues the district faces.

Identified population groups experiencing health inequality and inequity include:

- Māori
- Pacific peoples
- People who are socio-economically disadvantaged
- Horowhenua residents (because it has a higher proportion of disadvantaged and older residents in its population)
- Tararua residents (because it has a higher proportion of disadvantaged and older residents in its population)
- Disabled people (identified by NZ Health and Disability System Review report)
- People living in rural areas (identified by NZ Health and Disability System Review report).

Whatever health, social, or economic issues are considered, it's generally these same groups of people who are disadvantaged.

If there is a health issue that affects the whole population, it's usually worse for disadvantaged population groups, for example, major disease and mortality rates, Covid-19 infections.

There is evidence that disadvantaged groups (Māori, Pacific peoples, people who are socio-economically disadvantaged) are not receiving care from our hospital services to the extent required to meet their health needs, i.e. there is unmet need for hospital services among the health disadvantaged. This follows the almost universal world-recognised pattern called the "inverse care law": the people in most need of care are least likely to receive it.

As health inequities are tackled, disadvantaged peoples' unmet need will be addressed, leading to greater volumes of both community care and hospital service use.

BEHIND THE SCENES

Oxygen Project

The foundation pad for the new oxygen storage tank has been completed, and work is now underway to install two 40mm high pressure oxygen lines under the roadway, into the service tunnels below the boilerhouse, through into the hospital basement. This involves digging a trench from the tank site (behind the hospital swimming pool) to the boilerhouse.

The 10 million gaseous litre tank is on the production line to be made in Australia. As it must meet high seismic standards, a special design is required. The tank is expected to be on site around the middle of the year.

The oxygen ring-main is also being extended to support the new MAPU/EDOA facility and SPIRE's requirements.



The concrete pour (35 cubic metres) was one of the last steps in completing the foundation pad for the new oxygen tank.

COVID – Rapid Hospital Improvement Programme

A Ministry of Health funded project is underway to improve areas within critical parts of the hospital to treat COVID patients safely. This largely involves the installation of purpose-design air handling systems.

The first two areas to be done are the acute unit within Ward 21, and the COVID treatment space in the Rehabilitation Block.

Design work for ED, paediatrics, delivery suite, post natal and theatre is well underway, and has just commenced for the MRI and CT areas.

Water Farm

Over coming months you will see the old hospital swimming pool being removed to make way for the five water storage tanks. These tanks, which have been ordered, will hold enough water to enable services on the Palmerston North Hospital campus to operate independent of the Palmerston North City Council's water system for seven days.

The structural design for the foundation pad on which the tanks will sit, has commenced.

The old swimming pool is to be removed to make way for our water farm.



For more information on our capital projects at the hospital go to our new website www.projects.mdhb.health.nz or by scanning the QR code.



Questions, feedback, thoughts – send them to ourplace@midcentraldhb.govt.nz