



Oregon Health Authority

## Capital Project Reporting Form (CPR-1)

### Reporting Entity Identification and Contact

#### Facility

**Name:** Grande Ronde Hospital and Clinics Corporation  
**Federal Tax ID#:** 93-0505325  
**Address:** 900 Sunset Dr  
**City:** La Grande      **State:** OR      **Zip Code:** 97850

#### Individual completing form

**Name:** [REDACTED]  
**Title:** [REDACTED]  
**Email:** [REDACTED]  
**Phone:** [REDACTED]  
**Fax #:** [REDACTED]

*If address is different than facility listed above, please provide:*

**Address:** n/a  
**City:**      **State:**      **Zip Code:**

### Capital Project Qualitative Information

#### 1. Provide a brief description of the project.

Construction and expansion of hospital campus in support of expanded materials delivery/load dock, surgical services and materials management. The 3<sup>rd</sup> level and 5<sup>th</sup> level will be shelled space for relocation of other programs. Surgical services will contain the following: 7 post anesthesia care unit (PACU) beds, 15 pre/post operation beds, 5 surgical rooms, 2 procedure rooms, Central Sterile, OR waiting room, OR staff areas.

#### 2. Proposed start date: 6/1/2022

#### 3. Date of approval by board: 1/26/2022

#### 4. Expected completion date: 4/1/2024

#### 5. What is the expected project cost? 60,090,861

#### 6. Describe the expected benefits to the community that your facility serves. Include both direct financial benefits such as charity care as well as qualitative benefits such as access to care and quality improvements. Attach additional pages if needed.

This project will provide greater privacy and satisfaction for our patients. It brings our surgical services department all together in one space: patient check-in and pre-op, the ORs and procedure rooms, post-op recovery, Central Sterile and surgical supplies, as well as staff. We will be providing the industry standard of surgical care to our rural community. Large OR rooms allow for better patient access and process flow by staff, currently there is great potential for the OR crew to bump into each other and equipment in the operating room. In addition, with surgical services components currently located on multiple floors, patients are now transported through public areas and up and down elevators. So in addition to solving the current space constraints, the expanded surgical services space will solve the current patient and process flow limitations we face. Improving air circulation will also help alleviate any potential for hospital acquired infection, as will the inclusion of Central Sterile within the space.

**7. In what ways may this project negatively impact the community that your facility serves? Include direct cost such as bonds as well as indirect impacts such as service interruptions. Attach additional pages if needed.**

During construction our helipad at the hospital will be out of service for about a year. This will require an ambulance ride for the patient to an alternate landing site or airport. Whichever is more appropriate for medical care. No other impacts to service are anticipated as this is a new building that will be attached to the existing hospital building upon completion.

**8. How has your facility evaluated the need for this project within the community that you serve?**

Currently our OR's do not meet current code requirements for air exchanges per hour. We have been operating under an OHA waiver since 2012 that ultimately expires in 2028. This code is designed to reduce the chance of Hospital Acquired Infections (HAI). Our air delivery system does not avoid the surgical field like new designs do, another opportunity for a HAI. We have difficulty meeting the required minimum room temperature for surgical glues to work correctly and staff comfort. We cannot maintain code required air exchanges in the current OR's as the interstitial space between floors is only 18" and is full. Current OR size is impacting our ability to do surgeries that require extensive equipment due to the size being less than current code requirements. The surgical equipment just doesn't fit. Current storage for OR equipment is across a public hallway and this increases the risk of contamination and damage to equipment as it is moved daily through the public space into and out of the OR. Currently our pre/post operation patient beds are located several hundred feet from the OR. People are placed on a stretcher and wheeled down a public corridor to the OR, and back after surgery. This project will provide single point of entry for the patient from Pre-op bed, surgery and back to post-op bed then discharge.

Currently our Central Sterile Processing is located on a different floor than the OR's. New construction will place them side by side on the same floor, facilitating equipment turnover and emergent need of supplies via a central core storage between the OR's and Central Sterile. Non-surgical improvements will place our materials management delivery and warehouse easily accessible to delivery trucks. Currently those trucks must pull up the main patient drive then reverse down a side driveway with a 90 degree turn between parked cars to approach the loading dock. A large percentage of the trucks cannot get to the loading dock due to limited clearance under an existing hospital wing and an additional very tight 90 degree turn to the dock. This means drivers and staff are required to unload freight in the parking lot and haul it to the receiving dock while blocking parking lot traffic.

**9. Are the medical services created by this project already available in the community that your facility serves?**

No one else in Union County offers these services. Grande Ronde Hospital is the only provider of OR services in the county and our old OR's will be decommissioned after the new facility is built. This project is a replacement for the existing OR's that were built in 1978. As mentioned above, we are currently operating under a OHA waiver due to the inability to meet current code within the OR suite. We have been operating under this waiver since 2012 and it is due to expire in 2028. The primary reason for this project is to meet the requirements of Oregon Health Authority for operating rooms. This project allows for a safer and more private delivery of surgical services. It also allows us to offer more services in the future that we currently cannot do because of lack of space in our outdated OR's.

## Public Notice and Comment

**1. Provide a link to the webpage where public notice of the capital project was posted. If your facility does not maintain a webpage provide the name of the newspaper where the public notice was made and date of publication. Attach additional pages if needed.**

[www.grh.org/projectfeedback](http://www.grh.org/projectfeedback)

2. Describe your facility's method of collecting and reviewing public comments on the capital project. Attach additional pages if needed.

We will create a landing page on our website for sharing and updating project information for the public that will include a fillable form as a means for interested persons to submit comment for a period of no less than thirty (30) days. At the close of the collection period, all comments will remain on the page at our website for public review as required.

<b>*Signature:</b>	Elaine La Rochelle
<b>Date:</b>	2/24/2022

*\*Entry of name connotes signature*

Please email the completed form to: [HDD.Admin@dhsoha.state.or.us](mailto:HDD.Admin@dhsoha.state.or.us)

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