

The Future of Hospitals in Niagara

August 6, 2025
Port Colborne Healthcare Advisory Committee



Why are we here?

- 1. Context setting— Understanding the current state of healthcare and wellbeing in Niagara
- 2. System pressures Understanding the needs of the community to align health services
- **3. Opportunities to transform care** How Niagara Health is planning hospital care for the future
- **4. Working as a partner in Niagara** Overview of our current work with healthcare partners to address system gaps







Health and Wellbeing in Niagara



Aging Population

• 23.5 percent of residents are 65+ (Above Ontario's average of 17.5 percent)

Chronic Disease & Hospitalization

- Hospitalization rates for heart failure, COPD and diabetes are above the provincial average
- Higher-than-average rates of diabetes, hypertension, heart disease, obesity and smoking

Primary Care Shortage

Niagara is short approximately 100 primary care physicians

Economic Considerations

 Median household income: \$68,000 (Ontario average: \$81,000)







Healthcare Pressures

Significant patient volumes and staffing pressures at hospital sites and with community partners.

Pressures are most apparent in our Emergency Departments but are being felt across the hospital.

- Niagara's high rates of chronic disease require consistent care best provided by primary care, not EDs.
- Primary care is more cost-effective and results in better outcomes than emergency visits.
- Ongoing care with a primary provider improves continuity, early intervention and long-term health.
- Niagara Health continues to work beyond its mandate, including exploring primary care options at the Port Colborne site.

Community pressures in Niagara impacting hospital operations

Lack of primary care leads to overreliance on EDs, delays in seeking care: Shortage of more than 100 family physicians – leaving major gaps in access to ongoing, preventative care.

Shortage of 400 long-term care beds and workforce pressures in home and community care:

More than 100 patients (Alternate Level of Care) every day in hospital beds who could be discharged but are staying in our hospital waiting for care in the community, with the majority awaiting long-term care.





A Piece of the Puzzle





Primary Care (Family Doctor, Nurse Practitioner, Walk-in Clinic)

• First point for non-emergent care

Home and Community Care

• Support for those who require care in their home, at school or in the community

Long-Term Care

• 24/7 nursing care and supervision, primary medical care and help with daily activities

Community Health Centres

• Primary care services and health promotion programs

Niagara Region Public Health

• Health promotion and disease prevention programs

Niagara Emergency Medical Services (EMS)

• 24/7 pre-hospital care and transportation for individuals experiencing emergency injury or illness

Hospital (Niagara Health)

• Emergent, specialized, critical and surgical care (acute care services)







Profile of Niagara Health

- One of Ontario's largest hospital systems
- **7,300**+ staff, physicians, students and volunteers
- \$693 million annual operating budget
- Fourth-busiest Emergency Department in Ontario and first in the Hamilton-Niagara-Haldimand-Brant (HNHB) region, with visits involving conditions that could be seen by primary care providers in the community
- Fifth-most beds in operation of large community hospitals in Ontario
- Highest number of day surgeries and inpatient surgical cases in the HNHB region
- Niagara has the third-highest older adult population in Canada
- Niagara residents have higher rates of chronic health conditions than the provincial average





1,090 Beds



40,029 Admissions





150,592 Emergency



33,147 Urgent Care



57,915 Dialysis/Renal



20,364



82,824 Oncology



183,472 Other Outpatient





7,697



2,198

II CARE BY NUMBERS



Hip and Knee replacement surgeries



3,484 Babies Bor



6,839 Cataract Surgeries



19,198 MRI Scans



77,892 Ultrasound Exams



1,883
Heart Investigation
Unit Procedures



814 Stroke Inpatients



Cardiac Inpatients



1,620 Children's Admissions

Patient Care
Statistics
2024/2025

Historical Context — Capital Plan



1999

Ontario **Health Service** Restructuring

2000

Amalgamation of Niagara Health Sites

2009

Fort Erie and Port Colborne Hospitals were converted into **Urgent Care** Centres

2011

Ontario Ministry of Health (MOH) appoints Provincial Supervisor of Niagara Health.

2012

Provincial Supervisors final report recommends a regional model with 2 hospital sites (North & South sites) and closure of the Fort Erie. Port Colborne and Welland sites.

2013

Niagara Health St. Catharines Hospital opens.

2014-2015

Planning changed to reflect Welland Hospital to stay open.

2015

- Master Plan submitted to MOH based on recommendations from Supervisor's report.
- Recommendation includes keeping **Welland Hospital** open.

2017

Niagara Health receives approval from MOH for the South Niagara Site Capital Project as a first project supporting and endorsing the Master Plan.

2021

South Niagara Site Request For Proposals (RFP) released in partnership with Infrastructure Ontario.

2023

- 2023-2028 Transforming Care Strategic Plan South Niagara Hospital RFP awarded to EllisDon Infrastructure Healthcare.
- Construction began on the South Niagara Hospital in summer 2023.

2024

- Welland Hospital renovations and pre-capital submission to Ministry of Health.
- Niagara Health presents to Port Colborne City Council about a unique partnership opportunity and local share request for the South Niagara Hospital.

2028

Transfer of hospital-based programs and services from the Niagara Falls, Fort **Erie and Port Colborne** sites to the South Niagara and Welland Hospitals.

2028

Opening of the new South Niagara Hospital!

2030+

Redevelopment of the Welland Hospital!













Team Shortages

- Physician shortages, including Emergency Services, Anesthesiologists, General Internal Medicine
- Numerous unfilled Emergency Department and UCC shifts leading into the summer months
- Challenges in recruiting registered nurses, registered practical nurses, personal support workers and medical imaging technologists



Disconnected Care

- Lack of specialty care across sites
- Limited opportunity to grow research and academic partnerships
- Confusion on where to go for care in Niagara
- Lack of primary care
- Lack of home care
- Lack of long-term care beds



Outdated Infrastructure

- Welland Site opened in 1960
- Niagara Falls Site opened in 1958
- Port Colborne Site opened in 1952
- Fort Erie Site opened in 1931



Increased Volumes and Complexities

- Increased patient volumes
- More complex patients
- Fixed number of patient beds
- Long wait times

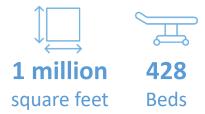
An Interconnected System for Acute and Specialized Care – Our Piece of the Puzzle (2028)

MAROTTA FAMILY HOSPITAL

- 24/7 Emergency Services
- Critical Care
- General Surgery
- Outpatient Clinics and Surgical Services
- Diagnostic Imaging and Laboratory
- Children's Health
- Kidney Care
- Administration

CENTRES OF EXCELLENCE

- Women and Babies
- Cancer
- Cardiac
- Mental Health and Addictions



SOUTH NIAGARA HOSPITAL

- 24/7 Emergency Services
- Critical Care
- General Surgery
- Outpatient Clinics and Surgical Services
- Mental Health and Addictions
- Diagnostic Imaging and Laboratory
- Kidney Care
- Joint Care
- Indigenous Healing
- Administration

CENTRES OF EXCELLENCE

- Complex Care
- Stroke
- Wellness in Aging



WELLAND HOSPITAL

- 24/7 Emergency Services with eight to 10 observation beds
- 90+ complex care beds
- Outpatient clinics (Orthopedics/Fracture, Plastics, Chronic Disease Management and Geriatric)
- Mental Health and Addictions (Residential Addictions and Treatment)
- Diagnostic Imaging and Laboratory (X-ray, Ultrasound, CT, ECG, Echocardiography, Ontario Breast Screening)
- Kidney Care
- Administration hub
- Long-Term Care

CENTRE OF EXCELLENCE

• Eye Care

*Proposed programs and services for Welland are based on approved plans for the South Niagara Hospital. Further staff and community engagement is required to submit a proposal to the Ministry of Health for the Welland Hospital site redevelopment.





Delivering Safe and Quality Care



Transforming How we Work

Working Together for Improved Healthcare



Partnership with Lockview **Medical Group** to support the expansion of their primary care practice in Port Colborne.

Established a new **Primary Care** Pathway to connect unattached children and youth with a primary care provider. Accepting practices include Bridges Community Health Centre in Port Colborne.

Bridges

Community Health Centre

Niagara is part of the larger **Niagara Ontario** Health Team - Équipe Santé Ontario Niagara, which is comprised of more than 45 healthcare providers working together to improve patient experiences and health outcomes.

Partnership initiatives include:

- Let's Go Home Program to support seniors return home sooner with supports.
- SCOPE Niagara to support local primary care providers navigate the hospital system.
- Remote Care Monitoring Program with SeamlessMD to provide greater care information access for patients.



Partnership with the **Niagara Practitioners Healthcare Alliance** (NPHA) to support ongoing two-way communication between Niagara Health and community physicians.

Creation of a new **Chief of Primary Care role** to support communication and outpatient engagement between the hospital and Niagara primary care providers.









Continued Partnerships in Niagara



































Thank you







