

Date: August 6, 2025
Time: 3:00 pm
Location: Committee Room 3-City Hall
 66 Charlotte Street, Port Colborne, Ontario, L3K 3C8

Pages

1. Call to Order
2. Adoption of the Agenda
3. Disclosures of Interest
4. Approval of the Minutes
 - 4.1 Healthcare Advisory Committee Meeting - July 23, 2025 1
5. Presentations
 - 5.1 Taralea McLean - Executive Director, Bridges Community Health Centre 4
 - 5.2 Keira Thibault - Director, Primary Care Services, Centre de Sant
Communautaire Hamilton-Niagara
Awaiting attachment.
 - 5.3 Harpreet Bassi - Executive Vice Present, Communications and Strategy,
Executive Lead at the Niagara Health Knowledge Institute, Interim
Executive Vice-President for Capital Planning and Redevelopment, at
Niagara Health. 25
6. Information Package 4
Awaiting attachment.
7. New Business
 - 7.1 Continuation of Discussion - Special Meeting (August 27, 2025)
 - 7.2 Approval of Future Meeting Dates
8. Adjournment

City of Port Colborne
Healthcare Advisory Committee Meeting Minutes

Date: Wednesday, July 23, 2025
Time: 3:00 pm
Location: Committee Room 3-City Hall
66 Charlotte Street, Port Colborne, Ontario, L3K 3C8

Members Present: C. Tamas
M. Lallouet
T. Triano
S. McDowell
P. McGarry
W. Steele, Mayor (non-voting) (entered at 3:58 p.m.)
M. Aquilina, Councillor (non-voting)
R. Bodner, Councillor (non-voting)

Staff Present: J. Beaupre, Deputy Clerk (entered at 3:15 p.m.)
R. Bisson, Senior Community Engagement Advisor

Others Present: J. Croteau, Physician Recruitment Lead, Niagara Region (exited at 4:57 p.m.)
T. Galitz, Executive Director, Niagara Ontario Health Team (exited at 4:57 p.m.)

1. Call to Order

The Chair called the meeting to order at 3:02 p.m.

2. Adoption of the Agenda

Moved By M. Lallouet
Seconded By P. McGarry

That the Healthcare Advisory Committee Agenda, dated July 23, 2025, be approved.

Carried

3. Disclosures of Interest

There were no disclosures of interest.

4. Approval of the Minutes

4.1 Healthcare Advisory Committee Meeting - July 9, 2025

Moved By T. Triano

Seconded By M. Lallouet

That the Healthcare Advisory Committee minutes, dated July 9, 2025, be approved.

Carried

5. Presentations

5.1 Jill Croteau, Physician Recruitment Lead - Niagara Region

Jill Croteau from the Niagara Region presented to the Committee on physician recruitment.

5.2 Tara Galitz and Frank Ruberto - Niagara Ontario Health Team

Tara Galitz from the Niagara Ontario Health Team presented to the Committee on the Ontario health landscape and primary care.

6. Information Package 3

Geneviève-Renée Bisson, Senior Community Engagement Advisor, provided an overview of the information package to the Committee.

7. New Business

The Chair brought up the calling of a special meeting for public delegations to solicit strategy development feedback.

Moved By M. Lallouet

Seconded By P. McGarry

That a special meeting of the Healthcare Advisory Committee be scheduled for August 27th, 2025, at 6 p.m.

Carried

8. Adjournment

The next meeting of the Healthcare Advisory Committee is scheduled for August 6, 2025, at 3 p.m. The Chair adjourned the meeting at 5:14 p.m.

Sydney McDowell, Chair

Jessica Beaupre, Deputy Clerk

Bridges

Community Health Centre

Fort Erie and Port Colborne/Wainfleet



Ontario's Community
Health Centres



Bridges Community Health Centre

creating a healthier community



Every One Matters.

Every individual. Every community. Every staff person.

Community Health Centres (CHCs): A Brief History

- **First stage of Medicare – Tommy Douglas**
- **Second stage of Medicare**
- **2005 – 21 newly-funded CHCs in Ontario**
- **Ministry of Health (MoH) approved 3 new CHCs in Niagara – Niagara Falls CHC, Quest CHC, and Bridges CHC**
- **A Francophone CHC already existed in Welland**



What is Bridges CHC?

- **Non-profit, community-governed organization with a mandate to provide comprehensive primary health care, illness prevention, health promotion and community development initiatives**
- **Two sites...one in Port Colborne (which also serves Wainfleet) and one in Fort Erie**
- **Currently have 39 staff**
- **Governed by a community-led Board of Directors**



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What is Bridges CHC? (Con't)

- **Provide client-centred care in order to treat the ‘whole’ person**
- **Operate through a Health Equity lens**
- **Funded through the Gov’t of Ontario via Ontario Health (OH)**
- **We have an Accountability Agreement with OH which outlines our accountabilities and performance expectations**
- **Report our performance on a quarterly basis**



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Our Interprofessional Clinical Team

Family Physicians
Registered Nurses
Social Workers *
Physiotherapists *
Physiotherapy Assistant *
Community Health Workers *
Dental Health Community Worker *

Nurse Practitioners
Registered Dietitians *
Registered Psychotherapists *
Kinesiologist *
Health Promoters *
Diabetes Educators(RNs/RDs)*

*** All services provided by these clinicians are open to anyone in the community**

**** All staff are salaried. We do not bill OHIP for any of our services**

***** Clinical staff are supported by our Medical Secretaries and Admin Team**



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Our Target Populations

- **Seniors (with an emphasis on those at-risk/isolated)**
 - **Individuals and families living on low incomes**
 - **Children and youth (with an emphasis on at-risk)**
 - **Newcomers to Canada**
 - **Individuals without a primary care provider**
- * We serve many individuals who other primary care providers will not accept due to their complexity**
- **We provide services to uninsured individuals who do not have OHIP coverage**
- *** We provide interpretation services for those who require it**



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Primary Care vs. Primary Health Care

Primary Care

- Narrower concept of primary care
- Care is provided at the individual level and is focused on providing routine and urgent medical care
- Key providers are generally family physicians and nurse practitioners

Primary Health Care

- Encompasses primary care, and goes even further
- Broader, community-oriented approach, encompassing not only individual medical services but also community health initiatives and addresses social determinants of health
- Team-based care
- Supports all aspects of health and wellbeing for individuals, communities and populations



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Primary Care vs. Primary Health Care (Con't)

Primary Care

- Core services: Include routine check-ups, vaccinations, management of chronic conditions, and treatment of common illnesses
- Includes comprehensiveness, continuity, and care coordination

Primary Health Care

- Interprofessional clinical care, health promotion and community development
- derived from the core principles articulated by the World Health Organization (WHO) that 'health is a state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity



Bridges CHC's Mission Statement

Provide the best possible primary health care to residents of Fort Erie, Port Colborne and Wainfleet. Engage and collaborate with other community services to extend our reach and impact



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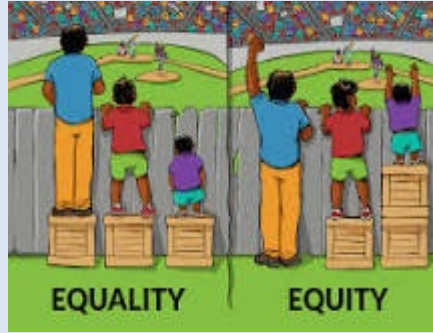
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Bridges CHC's Vision

A healthy and strong community served by highly-skilled professionals, who provide services that adapt to changing needs

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Bridges CHC's Values



**ACCOUNTABILITY
BREEDS
RESPONSE-
ABILITY.**

Stephen R. Covey

QUOTEID.COM



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What is Health Equity?

- Health equity means ensuring that everyone has a fair and just opportunity to be as healthy as possible, regardless of their social or economic circumstances
- It's about removing barriers such as poverty, discrimination, and lack of access to resources that prevent people from achieving their full health potential
- Health equity goes beyond simply providing the same resources to everyone (equality) and recognizes that some individuals and groups may need targeted support to overcome systemic disadvantages



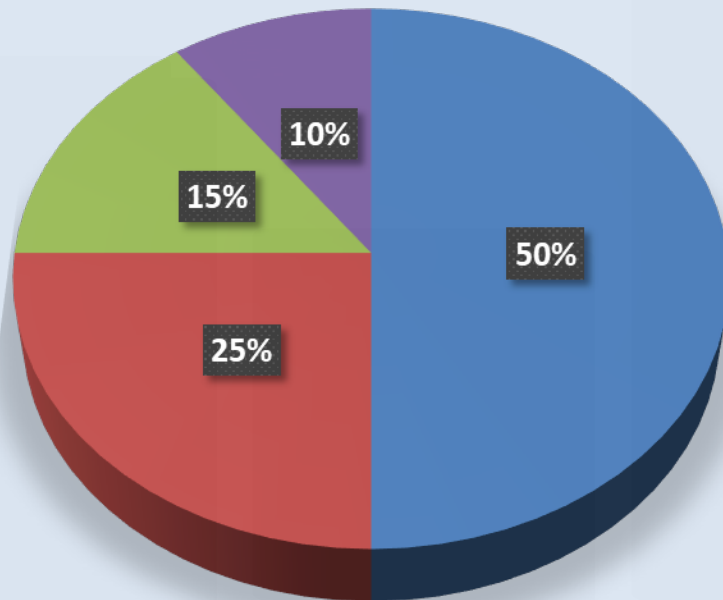
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What Makes People Unhealthy?

Source: Canadian Institute for Advanced Research

Selected Determinants of Health



- Social/Econ/Envir
- Physical Environ
- Biology/Genetics
- Health Care System

Social Determinants of Health

Social determinants of health are the non-medical factors that influence an individual's health and well-being...the social and economic conditions that affect people's lives. Examples include:

Income (inequality)

Housing

Food security

Social isolation

Gender (identity)

Poverty

Education

Employment/job security

Race

Early childhood and care



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Bridges CHC's Health and Wellness Programs

- **Diabetes education group classes**
- **Group exercise programs (including Pole Walking & Fun Drum)**
- **Smoke cessation**
- **Healthy eating/health cooking programs**
- **Better Sleep Management**
- **Care for the Caregiver**
- **Building Healthy Boundaries**
- **Stress Management**
- **Depression/anxiety**
- **And many others**



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Programs/Services Available to Our Clients vs Broader Community

Primary Care

- Only individuals registered as clients/patients with Bridges CHC can access the services of our MDs, NPs, and Primary Care RN

Programs Open to General Public

- Diabetes Education Program
- Physiotherapy (after any benefit plans have been exhausted)
- Counselling services
- All health and wellness group programs
- Programs/services of our Community Health Workers, Dental Health Community Worker and Health Promoters



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Community Partnerships

- **Ontario Health atHome (formerly CCAC) Care Coordinator is embedded in our CHC**
- **Mobile Cancer Screening Coach on site monthly at our Fort Erie and Port Colborne sites**
- **REACH Niagara – Regional Essential Access to Conected Healthcare – Mobile van dedicated to improving healthcare access for marginalized and underserved populations, particularly those experiencing, or at risk of, homelessness**
- **Feet First Steps for Health (Diabetes Foot Care Program)**
- **Community Addiction Services of Niagara (CASON)**



Community Partnerships (Con't)

- **Pathstone Mental Health**
- **Women's Place of South Niagara**
- **Niagara Sexual Assault Centre**
- **Niagara Region Mobile Dental Bus**
- **The Good Food Box**
- **Niagara Nutrition Partners**
- **Active partner in many local, regional and provincial networks**



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Primary Care Access Clinics

- **Bridges CHC, in partnership with Niagara Medical Group Family Health Team (FHT), Portage Medical FHT, and Welland McMaster FHT is offering Primary Care Access Clinics (PCACs) on certain days throughout the summer when the Niagara Health (NH) Urgent Care Centres (UCCs) are closed**
- **Hosted at Bridges CHC's sites in Port Colborne (PC) and Fort Erie (FE)**
- **Provide assessment and treatment for non-emergency health concerns for anyone permanently residing in Canada**



Primary Care Access Clinics (Con't)

- designed to support people with minor health concerns, similar to issues for which they would visit their family doctor or nurse practitioner
- These clinics do not provide emergency services; they offer timely access to primary care for non-urgent issues
- Fridays in FE and Saturdays in Port Colborne, from Canada Day until September 13th, as well as Civic Holiday Weekend in Fort Erie
- Hours are from 9am to 4:30pm
- No appointment is required



Thank you for listening!

Questions?



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The Future of Hospitals in Niagara

August 6, 2025

Port Colborne Healthcare Advisory Committee



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Extraordinary Caring. Every Person. Every Time.

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



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Transforming How we Work

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)



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Transforming How we Work



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**.



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Community pressures in Niagara impacting hospital operations

Lack of primary care leads to over-reliance 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)



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Transforming How we Work

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

INPATIENT

 **1,090**
Beds

 **40,029**
Admissions

VISITS

 **150,592**
Emergency

 **33,147**
Urgent Care

 **57,915**
Dialysis/Renal

 **20,364**
Mental Health

 **82,824**
Oncology

 **183,472**
Other Outpatient

SURGICAL CASES

 **7,697**
Inpatient

 **32,198**
Outpatient

CARE BY NUMBERS

 **1,402**
Hip and Knee
replacement surgeries

 **3,484**
Babies Born

 **6,839**
Cataract Surgeries

 **19,198**
MRI Scans

 **77,892**
Ultrasound Exams

 **1,883**
Heart Investigation
Unit Procedures

 **814**
Stroke Inpatients

 **740**
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!



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Transforming How we Work



Why Transformation is Needed

Transforming Care 
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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



1 million
square feet




428
Beds

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



1.3 million
square feet



469
Beds

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.*



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Transforming How we Work

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
Fort Erie and Port Colborne/Wainfleet

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.



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Transforming How we Work

Continued Partnerships in Niagara

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Transforming How we Work

Thank you



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