

2026 Strategic Plan Update

Sustainable Future: **Clinical Services Plan**

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Clinical Services Plan Overview

Sustainable Future

Ensuring our Healthy Future

Goal: Develop a Hospital Clinical Services Plan to clarify our acute care and academic mandates, to inform and guide planning for short to medium term services, and related resource requirements.

Objective: Assess long-term service demand and impacts on the resources required to support them.

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Background & purpose

- ▶ Feedback received during SP2026 engagement highlighted:
 - ▶ Importance of clarifying hospital care & academic mandates to ensure clear understanding of priorities.
 - ▶ Need for short to medium term plan that informs & guides planning.
 - ▶ Regional stakeholders desire to more fully participate in providing needed care closer to home.
 - ▶ Need to understand and plan for longer term demand, and related health human resource, space and equipment requirements.



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Key deliverables

- ▶ Clinical services plan that:
 - ▶ Identifies short to medium term (5 year) service demand, and strategies and plans to deliver and support required care.
 - ▶ Provides a clear understanding of Hospital Academic & Care mandates, and related priorities.
- ▶ Master program:
 - ▶ 30-year vision for required programs and services.
 - ▶ Includes projected community and regional needs, models of care, services and facilities needed to meet those needs.
- ▶ Master plan:
 - ▶ Adds more detail to high level vision, including a multi-year infrastructure plan, a technical building assessment, a business case for the facility development plan, and an estimated project timeline.
 - ▶ Includes all staffing, physical space, equipment and related cost elements.



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Challenges/Barriers

- ▶ Covid impacts interrupted our “normal”, so accurate volume forecasting more difficult.
- ▶ Academic and Hospital Care mandates are new, entail extensive consultation, may require difficult prioritization decisions and will take time for fully implement.
- ▶ Regional stakeholders desire to provide increased care must be balanced against their staffing, space, equipment and funding capacities.
- ▶ Given collaborator workload and this and other intensive projects, scheduling engagements needed to inform and validate requirements is challenging.



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Clinical Services Plan Timelines

	2022/23				2023/24				2024/25				2025/26				2026/27		
Strategic Directions / Enablers & Projects	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3
Develop Clinical Services Plan to Project Future Service Demand and Required Capacities																			
Estimate our short to medium term (2-5 year) service demand, resources required (staff, equipment, space, etc) to support them, and any expected gaps.																			
Engage internal leadership, partners and stakeholders to clarify and confirm volumes, acute and academic areas of focus																			
Identify and clarify our acute care and academic mandates																			
Review our current services, determine which are consistent with our acute care and academic mandates and adjust and/or re-align services as required.																			
Leverage the service demand and requirements, and with support of an external consultant, develop a Hospital master program and master plan.																			
Work with our partners and stakeholders to ensure required non-acute and lower acuity services are re-aligned and supported.																			



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Master Plan and Master Program - Overview

The Ministry of Health - Health Capital Investment Branch (MOH-HCIB) has requested that TBRHSC complete a Stage 1.2 Proposal to identify its Master Plan after the cardiovascular surgery project is completed to further understand the Hospital's long-term redevelopment strategy on the existing site and to ensure that long-term context has been considered in TBRHSC's smaller and short-term projects (i.e. PICC, NICU, DI Recovery, Renal, etc.)

Updates are typically completed every ~10 years, or as part of a major capital project (CVS), last updated in 2011. MOH – HCIB requested that TBRHSC complete a Stage 1.2 Proposal (Master Program / Master Plan) at a point in time; after the Cardiovascular Surgery project is completed.

The 2025 update is led by **Agnew Peckham Health Care Planning Consultants** and **Parkin Architects**.



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Master Plan and Master Program - Timelines

- ✓ Preliminary volume projections (November)
- ✓ Kick-off meeting with SLC (December)
- ▶ January: preliminary data finalization
 - ▶ ALC bed direction
 - ▶ Link to Clinical Services Plan 5-year volumes
- ▶ End Jan to May: service delivery model and master program development
- ▶ Spring/Summer: Master Plan Options Development (to be refined with Parkin)
- ▶ Fall: Preferred Master Plan Option identified & Facility Development Plan
- ▶ Fall/Winter: Submit to MOH



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Academic & Hospital Care Mandates - Overview

Numerous stakeholders were consulted to help inform Thunder Bay Regional Health Sciences Centre's and Thunder Bay Health Research Institute's joint Strategic Plan 2026. A key theme in stakeholder feedback was the need to clarify the Hospital's Academic and Care mandates to ensure a clear understanding of its areas of focus and priorities.

The Hospital's Academic and Hospital care mandates are intended to provide guidelines to inform decisions and priorities for Academics and Hospital Care in areas such as expansion, growth and opportunities for realignment long term.

It is both understood and appropriate that the mandates will evolve and be refreshed regularly and as required.



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Engagement Phase 1: Dec/2024 to Feb/2025

- ▶ TBRHSC Leadership – Administration, Medical Chiefs, Medical Directors and Medical Leads (Q2 review)
 - ▶ Medical Advisory Committee – All Chiefs
 - ▶ Follow up by invite: Internal Medicine Dept, Critical Care Dept, Surgery Dept, Hospitalist program
 - ▶ Medical Education Committee (MEC)
- ▶ MEC – Postgraduate Medical Education
 - ▶ MEC – Undergraduate Medical Education
 - ▶ MEC – Health Sciences Education * Feb 18/25
 - ▶ MEC – Research (TBRRI & NOSM U Research Leadership)
- ▶ Equity, Diversity & Inclusion Steering Committee
- ▶ Director of Health Professions & Collaborative Practice
 - ▶ Health Professions Standards of Practice Meeting



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Engagement Phase 2: Feb to Apr/2025

- ▶ CNS/IPE Staff
- ▶ Local/Regional Educational Institutes: Lakehead University, Confederation College, Oshki-Wenjack, Seven Generations, continued NOSM U engagement
- ▶ Regional Chiefs of Staff and Regional CEOs
- ▶ Indigenous Partner Steering Committee
- ▶ Learners
- ▶ Primary Care Networks & Health Teams
- ▶ Ontario Health Teams
- ▶ Home & Community Services



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