



NHH Master Planning – Growing Care for the Future

Engagement Forum #3 – Outpatient Priorities and Strategic Partnerships
January 28, 2026



Welcome from CEO Susan Walsh



1. Welcome and Introductions
2. Territorial Acknowledgement
3. Outpatient Services Today
4. Outpatient Service Needs based on Future Growth
5. Engagement Discussion

Background

- NHH is currently conducting a collaborative master planning process that will: “develop the future needs for services and project future space requirements to develop a long-term redevelopment roadmap and final proposal for submission and approval by the Ministry of Health.” (Terms of Reference, NHH Master Planning Steering Committee)
- Overseen by a Master Planning Steering Committee and supported by our Project Management Office and external subject matter experts in master planning, architecture and design, and data analysis and projection (Agnew Peckham and Cumulus)
- NHH's new Master Plan—**the first since this facility was built**—will be informed by you, NHH's Leadership Team, alongside patients, caregivers, providers, and volunteers as well as our community partners and residents
- Formally launched in May 2025, this project, **titled NHH Master Planning - Growing Care for the Future**, will span approximately 12 months in total and conclude in May 2026 with a formal MEMORANDUM submission to the Ministry of Health and Ontario Health regarding the proposed long-term program and facility requirements of NHH.

Purpose

A hospital **Master Plan** looks farther in the future, **mapping out needs anticipated in future decades**. As such, it will: •

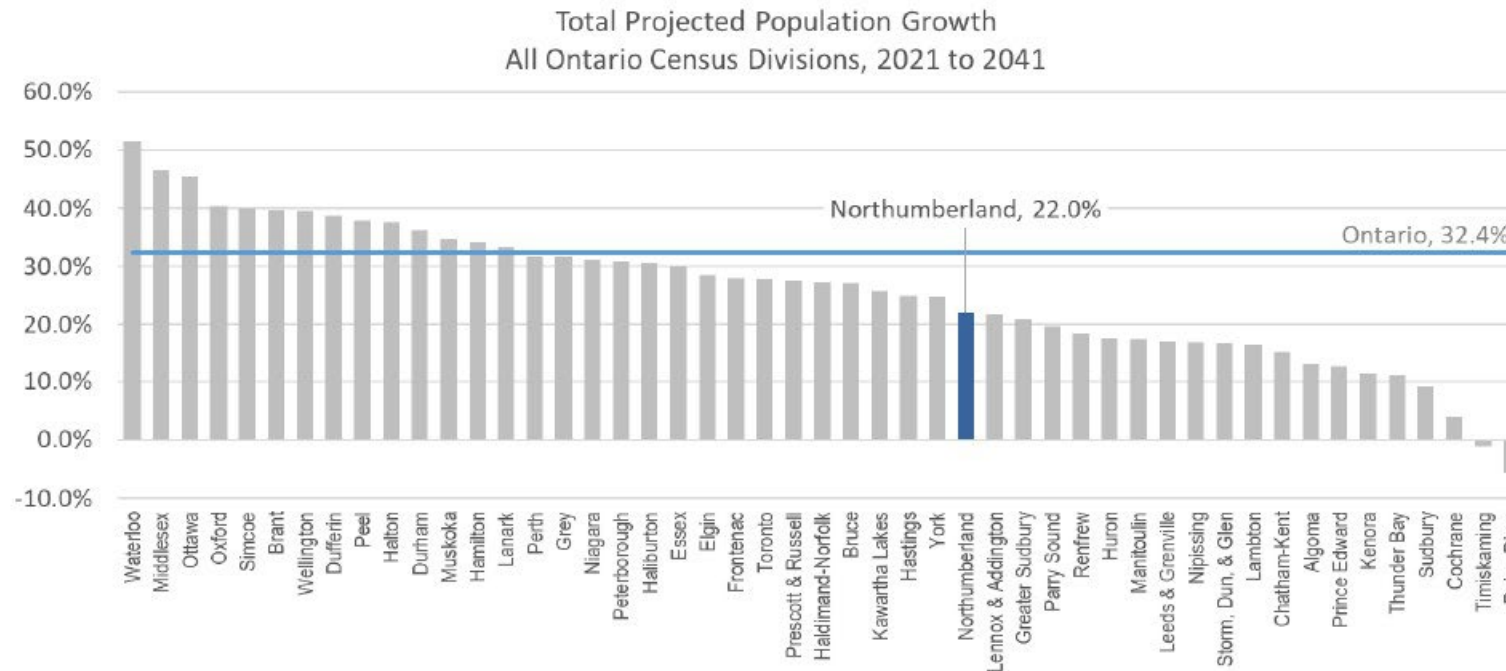
- build on the current strengths of NHH;
- consider the new opportunities and needs identified during visioning exercises and community consultation;
- address current and anticipated government direction regarding hospital service sustainability;
- position NHH for the necessary Ministry approval and support to advance future growth;
- define NHH's role as a strong medium-sized hospital within the system;
- consider how NHH can be an environmental steward by creating a sustainably accountable organization;
- leverage innovation and technology to better enable care for generations to come.

Master Planning Timeline



Projected Population Growth

Projected total population growth for Northumberland lower than Ontario



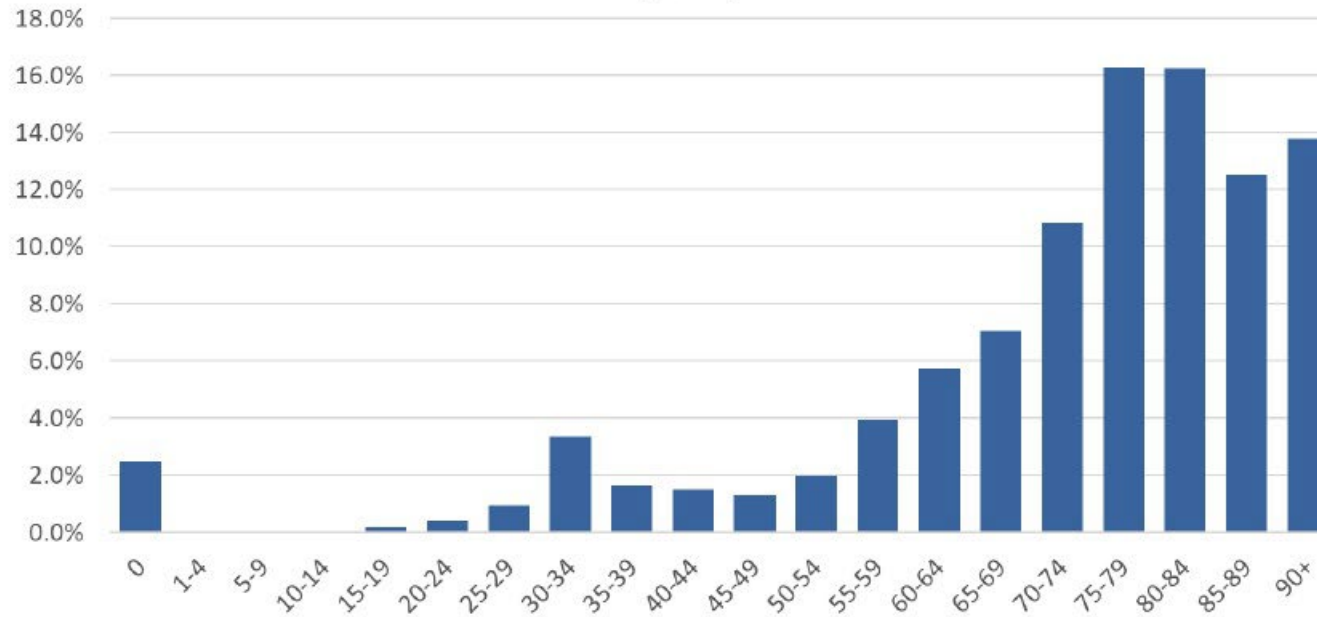
Source: Ministry of Finance (Fall 2024 Release)

NHH Future Growth-Aging effect

Aging effect is significant as over 75% of acute inpatient days are among patients aged 65+



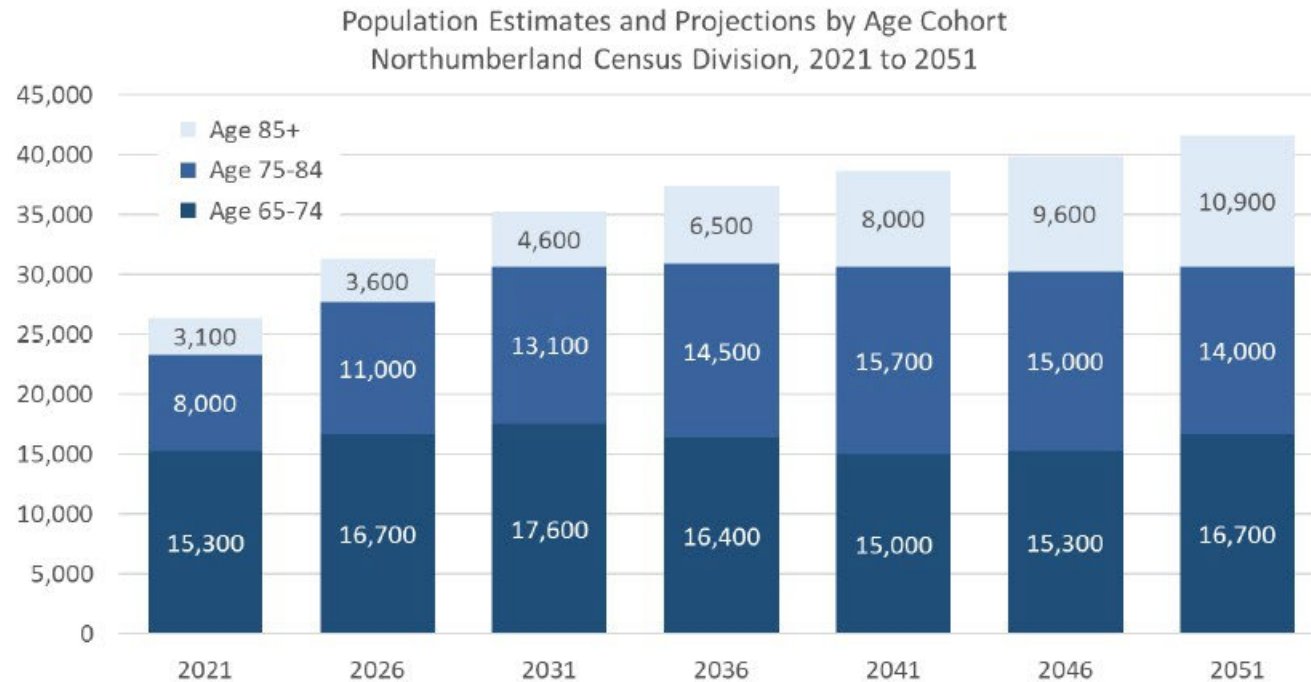
Total Inpatient Day (DAD) Distribution by Age Cohort
NHH, 2023/24



Source: Ministry of Health: IntelliHealth Ontario (DAD Data)

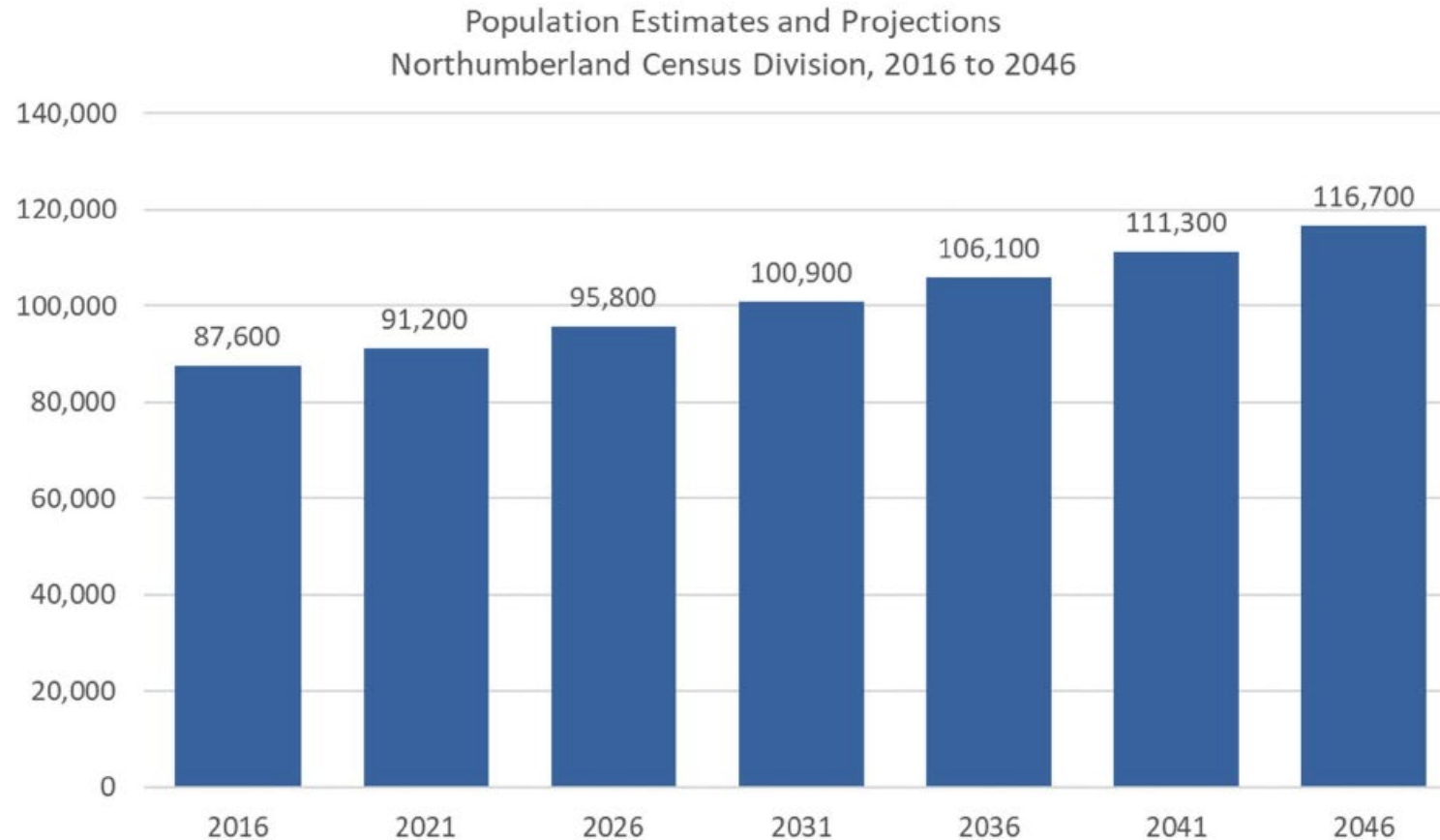
NHH Future Growth

Higher growth among age cohorts that tend to have higher utilization rates



Source: Ministry of Finance (Fall 2024 Release)

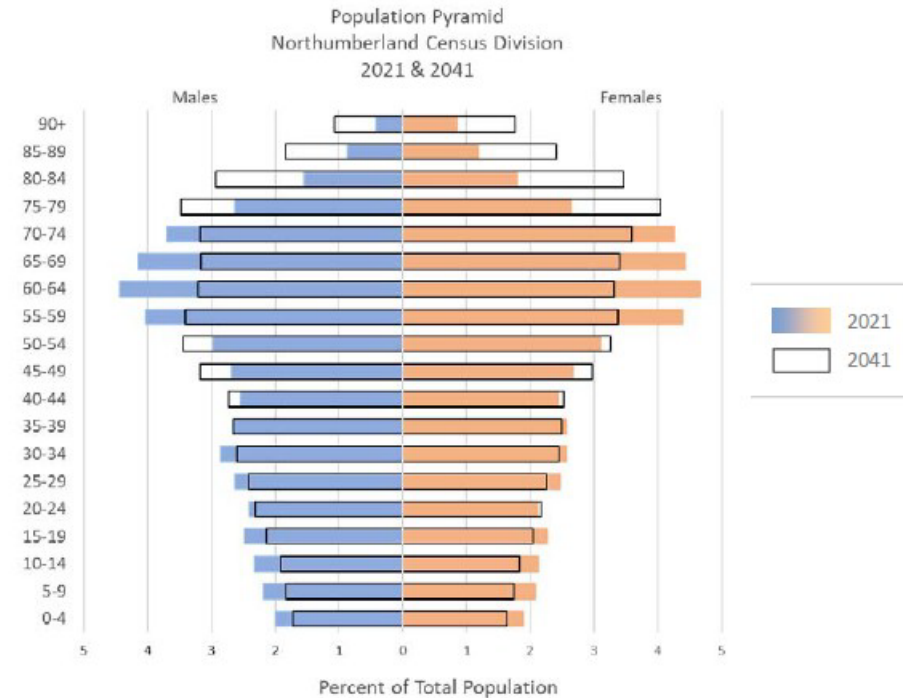
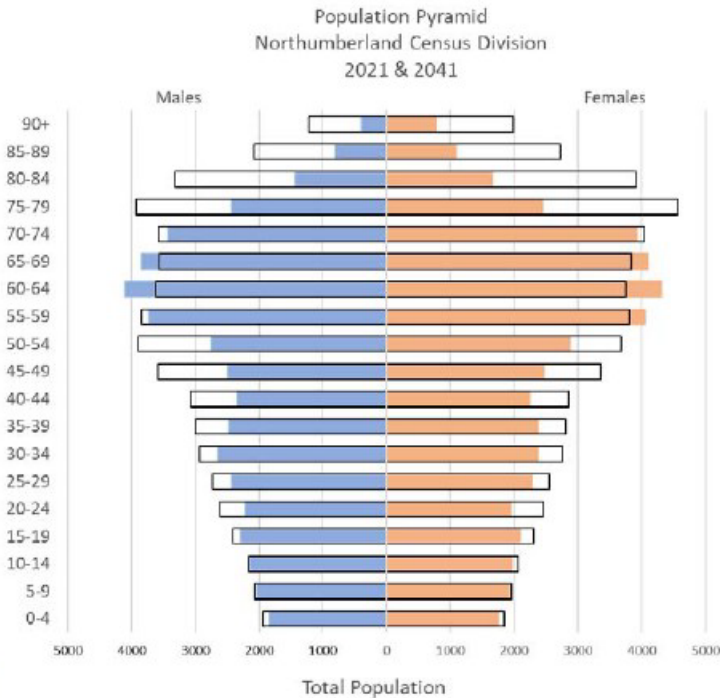
Population projections indicate moderate total population growth for Northumberland



Source: Ministry of Finance (Summer 2023 Release)

NHH Future Growth 2021-2041

Population pyramids demonstrate the growing and aging of the population from 2021 to 2041




Source: Ministry of Finance (Fall 2024 Release)

Outpatient Services Today








NHH Services Today

- NHH delivers a broad range of acute, post-acute, outpatient and diagnostic services. Acute services include emergency and intensive care, medical/surgical care, obstetrical care and palliative care.
- Post-acute specialty services include restorative care and rehabilitation. Mental health care, cancer and supportive care, dialysis and other ambulatory care clinics are offered on an outpatient basis.
- NHH offers a full range of diagnostic services, including magnetic resonance imaging (MRI), computed tomography (CT) and mammography.

Activity Snapshot	Activity			Year-Over-Year Change (%)
	2022-23	2023-24	2024-25	2022-25
 Emergency Department Visits	37,619	40,022	40,145	↑ 6.7%
 Total Admissions (includes Acute & Post-Acute) Births	5,027	5,493	5,833	↑ 16.0%
	4,490 537	4,961 532	5,314 519	18.4% -3.4%
 Total Surgical Cases Inpatient Day surgery	5,851	5,955	6,052	↑ 3.4%
	680 5,171	711 5,244	788 5,264	15.9% 1.8%
 Dialysis Visits (Level I & II)	7,961	8,053	8,564	↑ 15.5%

Medical and Professional Staff		2022-23	2023-24	2024-25
 Total Staff	Full-time	794	885	895
	Part-time	352 442	460 425	444 451
 Medical Practitioners Physicians (including specialists) Midwives		169 160 9	168 159 9	160 154 6

Activity Snapshot	Activity			Year-Over-Year Change (%)
	2022-23	2023-24	2024-25	2022-25
 Chemotherapy Visits	14,670	16,083	16,939	↑ 15.5%
 Out-Patient Ambulatory Care Clinic Visits (Excluding Mental Health & Diagnostic Imaging)	15,774	16,474	16,811	↑ 6.6%
 Community Mental Health Total number of visits	37,254	47,319	51,282	↑ 37.7%
 Diagnostic Imaging (all modalities)	–	64,683*	73,106	↑ 13.0%
 Telemedicine Visits	1,587	2,320	1,651	↑ 4.0%

KEY CLINICAL VOLUMES

		Historical		Projected		
	2022/23	2023/24	2024/25	2029/30	2034/35	2044/45
Ambulatory Care Clinic Visits	12,220	12,592	13,614	15,365	17,007	20,028
Outpatient Rehabilitation			1,480	1,810	2,055	2,565
Oncology Visits	14,613	16,111	16,725	18,395	19,525	21,068
Hemodialysis						
Visits	8,108	8,216	8,531	8,790	9,142	9,788
Stations	15	15	15	17	18	19
Maternal Newborn Services						
Births	537	531	524	524	543	617
Emergency - Total Visits	37,619	40,023	40,145	44,148	48,336	57,204
Surgical Services						
Surgical Cases	5,844	5,949	6,044	6,514	6,876	7,385
• inpatient	760	787	841	884	935	1,020
• outpatient	5,084	5,162	5,203	5,630	5,941	6,365



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Outpatient Service Needs Based on Future Growth



NHH and CMH ED Visits, 2024/25

	Actual	Actual	Provincial UCC Data		Scenario: Apply Average % of Visits at UCC of Corporation to NHH Total ED Visits	
Statistic	NHH	CMH	Average % of Visits at UCC of Corporation	Range of % of Visits at UCC of Corporation	NHH "UCC"	NHH "ED" (Remainder)
Total Visits	40,145	19,229			9,063	31,083
1 Resuscitation	818	114	5%	1-10%	41	777
2 Emergent	9,204	2,865	10%	2-20%	920	8,284
3 Urgent	20,930	9,955	20%	10-30%	4,186	16,744
4 Semi-Urgent	6,716	3,576	40%	15-60%	2,686	4,030
5 Non-Urgent	2,459	2,703	50%	20-80%	1,230	1,230
9 Unknown	18	16				18
% CTAS 4 or 5	23%	33%			43%	17%

Notes:

Average % CTAS 4 or 5 in Ontario was 24% in 2024/25

17% CTAS 4 or 5 would be in the lowest 25th percent

43% CTAS 4 or 5 would be above the median but not in the highest 25th percentile

NHH ED Visits, 2034/35 (10 Year Projections)

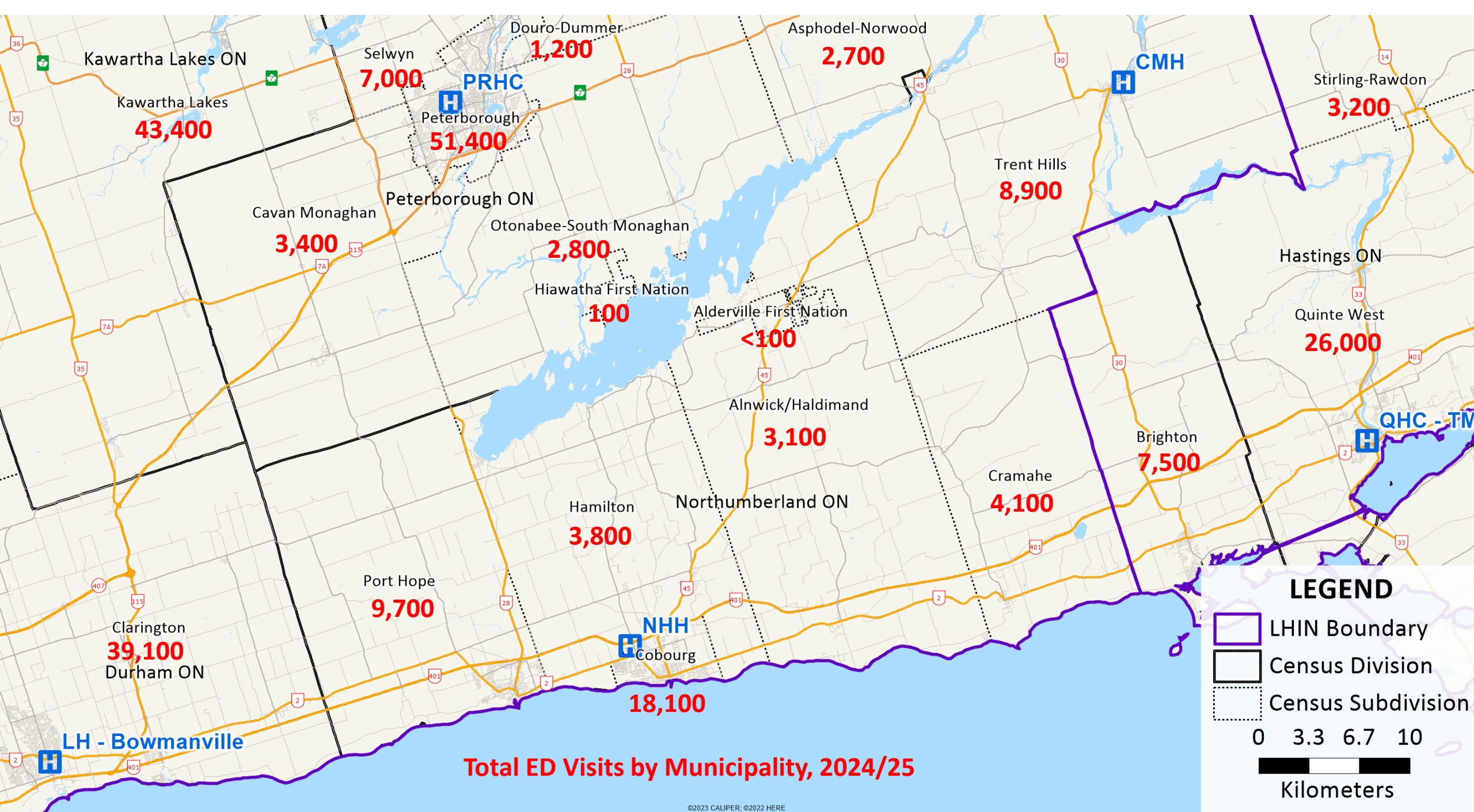
	Actual	Provincial UCC Data		Scenario: Apply Average % of Visits at UCC of Corporation to NHH Total ED Visits	
Statistic	NHH	Average % of Visits at UCC of Corporation	Range of % of Visits at UCC of Corporation	NHH "UCC"	NHH "ED" (Remainder)
Total Visits	48,336			10,803	37,533
1 Resuscitation	927	5%	1-10%	46	881
2 Emergent	11,029	10%	2-20%	1,103	9,926
3 Urgent	25,853	20%	10-30%	5,171	20,682
4 Semi-Urgent	7,710	40%	15-60%	3,084	4,626
5 Non-Urgent	2,797	50%	20-80%	1,399	1,398
9 Unknown	20				20
% CTAS 4 or 5	22%			41%	16%

Notes:

Average % CTAS 4 or 5 in Ontario was 24% in 2024/25

17% CTAS 4 or 5 would be in the lowest 25th percent

43% CTAS 4 or 5 would be above the median but not in the highest 25th percentile



Thoughts for discussion

- Challenges
 - Visit volumes are generally low
 - Geography (location) between NHH and CMH not obvious in terms of critical mass
 - After pulling out UCC volumes, don't want acuity at the NHH and CMH EDs to be too high (e.g., not financially viable/staff burn out)
- Opportunities
 - If you build it, they will come (new/unmet need)?
 - Potential business from current walk-in clinics?
 - Noted during Steering Committee meeting; however, MOH likely not supportive to shift walk-in clinic volumes to UCC?
 - Impact from potential nuclear facility on total ED/UCC visits
 - Economic/increased population (see last slide)
 - Other non-data inputs to consider?
 - Does a nuclear facility require minimum distance to ED/UCC for emergencies?

We Want to Hear from You....



Community and Partner Engagement

1. What do you value most about Northumberland Hills Hospital and our role as a key partner in the region?
 - *This helps us understand what matters most to our community and what we should preserve and build upon.*
2. What could we be doing better as we partner with you to meet the evolving needs of the members of our community?
 - *We want to hear your ideas on how we can improve our services, facilities, and partnerships to better serve you.*
3. What is happening in our communities, in the current environment, and in your organization, that we should be paying attention to as we plan for the future of our hospital?
 - *Your insights will help us anticipate future challenges and opportunities, and ensure our plans are responsive and forward-thinking.*

For details on NHH's Master Planning, a link to our e-survey and watch for details of our next forum and registration link and follow on all our communication channels.

Thank you for joining us!

