

Master Plan overview

Background

While Southlake is committed to the delivery of exemplary care, it is limited by its aging infrastructure and size. Southlake is located on a 19 acre lot on Davis Drive in Newmarket and has core buildings dating back to the 1960s and 70s.

- One of the most overcrowded hospitals in Ontario, Southlake faces significant capacity challenges due to space pressures. Almost 90% more space is required just to right-size our current units to today's hospital standards.
- Our buildings were developed decades ago and gradually expanded over time, so adjacencies between programs and services and linkages to exits and parking are suboptimal. This limits operational efficiency and makes wayfinding difficult for patients and families.
- As our current site is landlocked and has a floodplain to the east, options for expansion on the existing site are limited.

In January 2019, following the launch of Southlake's 2019-2023 Strategic Plan, we started to develop a new Master Plan. We challenged ourselves and our communities to reimagine how healthcare will be provided in the future as the system evolves.

Process and Considerations

The Master Plan was developed after thorough consultation with our communities, staff, physicians, volunteers, Patient and Family Advisors, donors and health system partners. Environmental scans, emerging healthcare trends, detailed service delivery analyses and future demand projections were all factored in.

To ensure that patients receive care close to home and that we can be as efficient as possible, Southlake's future service delivery model will be built upon the premise of co-location of similar patients based on complexity and acuity. This balances projected demand with operational consideration across care settings (e.g. inpatient, ambulatory, community-based, virtual) and will enable Southlake to:

- Integrate technology and virtual care to drive innovation and digital transformation
- Grow the Ontario Health Team model, focusing on the proposed future Southlake Ambulatory facility
- Shift lower acuity care to more appropriate settings to improve patient experience and outcomes

Options

A series of initial options were developed and analyzed:

- **Option 1:** Acute inpatient services stay on redeveloped Davis Drive site, shift ambulatory outpatient services to a new site
- **Option 2:** Ambulatory outpatient services stay on current Davis Drive site, build a new hospital for acute inpatient services at a new site



- **Option 3:** Build a new site for both acute inpatient and ambulatory outpatient services. The Davis Drive site would not be used.
- **Option 4:** No new sites, full redevelopment of the existing Davis Drive site

Further analysis, including significant internal and external consultations, led to three viable options (Options 1, 2, and 3 above). Option 4 was ruled out because of the significant disruption to patient care and cost premiums to renovate and expand an already densely populated site.

Preferred Option

Option 2 was selected as the preferred option for various reasons:

- Maximizes use of existing assets over time
- Aligns best with emerging trends in healthcare
- Minimizes service delivery disruption and impacts on patients, families, staff and our community
- Lowest cost option
- Minimizes the time required to expand acute care services in the 10-year time horizon
- Provides capacity for our Ontario Health Team and other future partnerships
- Allows for Southlake’s two Restorative Care Units at the Humber Church and Humber Finch sites (60 beds) to be moved back to our Davis Drive campus so people can receive care closer to home
- Reduces density on the existing Davis Drive site for better patient and staff experience
- Aligns with the Town of Newmarket’s Municipal Urban Centre Secondary Plan
- Optimizes parking and traffic flow and eliminates the need for a large additional parking facility at the Davis Drive site



What sort of growth will the preferred option accommodate?

	2017/18 (baseline)	2027/28 (10-year planning horizon)	2037/38 (20-year planning horizon)
Beds (inpatient and critical care)	429	620	843
Emergency Department spaces	47	83	92
Operating Rooms and procedure rooms	29	33	29 (+6 in community)

