Health Vision Lions Gate Hospital

Project Background

Vancouver CoastalHealth

Who?

Vancouver Coastal Health (VCH) is proactively planning for the future of Lions Gate Hospital (LGH) by developing a high-level plan for the LGH campus to help meet the future health and wellness needs of the North Shore and adjacent communities.

What?

Health Vision Lions Gate Hospital will consider the long-term health and wellness of the North Shore and local First Nations. It will also consider the increasingly regional role of LGH in serving adjacent communities, including Lions Bay, Bowen Island, the Sea to Sky corridor, Sunshine Coast and the Central Coast.

As part of the planning process, VCH has developed a **draft clinical services plan** for the LGH campus, based on historical data and trends, industry best practices, population projections and community input. The clinical services plan will consider all clinical and non-clinical services as well as regional programs that operate from LGH.

Once finalized, the clinical services plan will provide an overarching vision for future health-care services at the hospital campus and help inform the space requirements and infrastructure recommendations set out in Health Vision LGH.

Why?

Continued population growth, an aging demographic and LGH's increasingly regional role all contribute to a high use of clinical services, with demand expected to increase. Long-term planning is required to maintain and, in some cases, expand access to health-care services. Moving forward, health-care programs and places also need to be designed with climate resiliency and sustainability in mind.

Where?

Learn more about Health Vision LGH, including findings from phase 1 engagement, by visiting **Health Vision Lions Gate Hospital | Vancouver Coastal Health**

When?

01 Engagement Phase 1 – Visioning

Engagement on health-care services at LGH

02 Report Back

June 2025 - Report-back on what we heard in Engagement Phase 1

03 Development of draft Health Vision Lions Gate Hospital

Summer 2024 to Fall 2025

04 Engagement Phase 2

Spring 2026 - Engage on draft planning for Health Vision Lions Gate Hospital

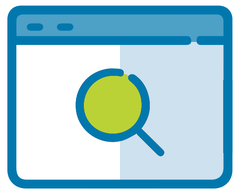
05 Final Report-back on Health Vision Lions Gate Hospital

2026

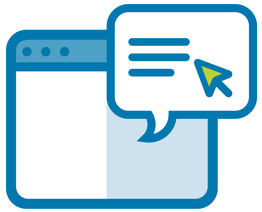
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Community Engagement – Overview

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Engage VCH page
2,296 website visitors



Online survey
1,021 responses to public survey



Interviews and focus groups
13 participants from 10 organizations



First Nations engagement
10 interviews / focus groups attended by 26 representatives from two Host Nations



E-blast
85+ community partner organizations



Posters
70+ posters at key community locations



Newsletter
960 VCH newsletter recipients



Translations
Posters and surveys translated into Traditional Chinese, Simplified Chinese, Korean and Farsi

Staffing, primary, community and long-term care considerations impact LGH campus operations, but are beyond the scope of this exercise. VCH continues to evaluate and invest in these foundational areas through a variety of initiatives:

- Sustainable staffing
- Available and accessible primary care and community-based services
- Available and accessible long-term care (LTC). LTC is currently a service offered on-campus however future planning would consider relocating this service into the community.

First Nations, staff and medical staff engagement:
In addition to broader community engagement, VCH also engaged directly with:

- Sḵwx̱wú7mesh (Squamish) and səl̓ílwətaɬ (Tsleil-Waututh) Nation health teams
- VCH staff and medical staff at LGH and on the North Shore
- North Shore Division of Family Practice

Clinical engagement:
Cornerstone Planning Group led engagement with clinical leadership and partners

Health Vision Lions Gate Hospital

Engagement scope

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The below table outlines the existing facilities on the hospital campus, as well as the core services delivered at these locations, which have been reviewed as part of Health Vision LGH.

FACILITY NAME (BUILD DATE)	CORE SERVICES
Shakespeare House (1912)	Outpatient mental health programming and offices; a heritage building
South Tower (1958)	Inpatient beds and existing perioperative suite
Evergreen House (1971)	Long-term care
Parkade (1977)	Vehicle and bicycle parking on multiple levels and loading dock
Northern Expansion (1978)	Emergency, medical imaging, laboratory and most other clinical support services
North Shore Hospice (2010)	End-of-life care
HOpe Centre (2014)	Mental Health and Substance Use inpatient and outpatient services; academic space
New Paul Myers Tower (2025)	Inpatient beds, outpatient services and perioperative suite
St. Andrew’s Laydown Site	Vacant land used for construction project staging

Health Vision Lions Gate Hospital

Community Engagement – Key Findings

Key considerations when accessing health-care services:

- Same-day or unscheduled appointment options
- Evening and weekend care
- Doctor or nurse familiar with personal concerns and history
- Sufficient parking for health-care facilities

Top priorities when receiving health care at the hospital:

- Timely care for urgent issues
- High-quality care and experiences and interactions with health-care professionals that feel safe
- Health-care services that are well coordinated between providers
- Cleanliness of hospital spaces and facilities

Key opportunities and challenges when accessing services or provider care at the LGH campus:

- Increase staffing levels through staff recruitment, development and retention
- Improve wait times for emergency and urgent issues
- Expand and increase health care services to provide better access to specialists, medical imaging and mental health and substance use health, especially for young adults and children
- Improve communication to patients and families about health-care services across continuum of care to improve ease of navigation and patient experience, especially for complex cases and at discharge
- Enhance integration of health-care services by improving collaboration, patient experiences and local community partnerships
- Expand and improve infrastructure including more beds, and improvements to design (for privacy and specific areas like emergency), as well as parking



Note: Participants also identified the need for more long-term and primary care in community. These considerations impact LGH campus operations, but are beyond the scope of this exercise. VCH continues to evaluate and invest in these foundational areas through a variety of initiatives.

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Indigenous Engagement – Key Findings

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To help inform Health Vision LGH, VCH engaged with local First Nations, including **Sḵwx̱wú7mesh** (Squamish) and **Səl̓ílwətaɬ** (Tsleil-Waututh) Nations.

The two Host Nations identified the following **top opportunities** for improving health care on the hospital campus for Indigenous Peoples:

The critical role of the Indigenous Patient Navigator (IPN) program and need for its expansion

Cultural safety and trauma-informed training for hospital staff to address racism and bias in health care and improve patient experiences

Improved communication and relationship building between LGH and First Nations community health services

Opportunities to further integrate Indigenous culture, customs and tradition into health care delivery and site planning – for example, through Indigenous food, traditional medicine and ceremonies, the creation of welcoming spaces and inclusion of territory acknowledgments

The two Host Nations identified opportunities to improve health care for Indigenous Peoples:

- Access to culturally safe care
- Better follow-up after discharge
- Addressing racial bias and discrimination
- Work in partnership to build trust in the system
- Increase access to mental health and substance use services

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Clinical Services Plan – Overview

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Principles:

The following principles were used to guide the development of the Health Vision LGH plan, including the clinical services plan:

- Indigenous Cultural Safety is one of VCH's pillars and it guides the delivery of care for Indigenous Peoples
- Ensure health-care services at LGH remain aligned with the evolving health-care needs of the North Shore community and the broader region
- Develop plans to address the forecasted capacity increase in this region
- Maintain access to safe, high-quality health care
- Enhance the integration of health services for the Sunshine Coast with LGH as the hub for Coastal Community of Care
- Ensure that the infrastructure on site is resilient, sustainable and considers climate risks and planetary health in the region
- Promote a culture that fosters retention and support of staff and medical staff

Components:

Health Vision LGH comprises:

- **High-level clinical services plan:** Overview of clinical services and models of care (e.g., operating hours, staffing, bed demand and patient profile)
- **Functional programming plan:** Translates the number of beds outlined in the clinical services plan into the amount of space required for each service area
- **Future infrastructure plan for LGH:** Considers how best to accommodate the space requirements detailed in the programming plan on the hospital campus

Purpose:

Once completed, the clinical services plan will help VCH:

- Expand current services to match population growth/aging
- Account for regional plans as available
- Be inclusive of Indigenous needs
- Add services appropriate for the community and the hospital campus' role as a hub for the growing communities it serves

Methodology:

VCH and its clinical planning partners developed the draft clinical services plan based on:

- Key principles (at column to left)
- Applications of clinical best practices and trends
- Clinical and population data projections
- Engagement with First Nations, government leaders, community partners and VCH staff and medical staff
- Broader engagement with community members on the North Shore

Health Vision Lions Gate Hospital

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Clinical Services Plan – Indigenous Priorities

In alignment with the clinical services plan principles, Health Vision LGH seeks to promote culturally safe care and support the unique health-care needs of individual Indigenous communities.

The following key takeaways from Health Vision LGH engagement sessions have been integrated into the draft clinical services plan and functional programming plan, which VCH will advance in collaboration with Sḵwx̱wú7mesh (Squamish) and səl̓ílwətaɬ (Tsleil-Waututh) Nations:

Everyone is responsible for safety: Nation-specific training (required, renewed, evaluated)

Clinical integration of traditional wellness: including Indigenous Patient Navigators in rounds as appropriate and additional cultural positions such as Elders, Wisdom Council and doulas. This includes adding traditional medicines to pharmacy databases, providing Indigenous food choices, and planning spaces and systems to support family gathering and cultural activities.

Continuity of service provided by Indigenous Patient Navigators

Improve patient experiences and outcomes by including Nation positions in discussions about patient transfers to/from community

Visible and accessible Indigenous Patient Experience services including Indigenous Patient Navigators, centering the importance of Indigenous Cultural Safety, Indigenous values, practices and experiences

Design guidelines that prioritize input from Indigenous people, including art and materials selection throughout the new campus

Focus on privacy and inclusivity throughout the hospital, particularly during moments of stress and transition (emergency, registration/admitting)

Health Vision Lions Gate Hospital

Clinical Services Plan - Priorities

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OUTPATIENT SERVICES

SERVICE	Emergency department	Ambulatory clinics	Medical oncology unit	Mental health and substance use
CURRENT STATE	Emergency treatment for critical or life-threatening conditions of mental health emergencies	Scheduled health-care services delivered to patients who do not require hospital admission Treat patients that do not require overnight stay; Services can include diagnosis, treatment, minor surgery and consultation	LGH is a Tier 4 BC Cancer Community Oncology Network site that provides outpatient chemotherapy to North Shore/ Coastal communities, with a focus on adult patients with cancer at risk of metastasis, including chemotherapy for palliative reasons.	These outpatient services are continuously evolving to meet the needs of the population and are run out of HOpe Centre as well as other locations within the community.
PRIORITIES	• Expansion of services • Reorganize patient and emergency health services flow • Provide designated pediatric zone including pediatric observational beds to streamline admission • Provide separate zone for forensic program • Integrated medical imaging spaces within emergency department • Enhance cultural safety	• Expand to meet needs as more acute patients are discharged earlier and specialties and equipment grow more complex • Advance virtual care as much as possible • Connect acute and community health-care information systems	• Maintain the current Tier of service • Continue to provide infusion and transfusion services for oncology patients • Enhance supportive care • Support Indigenous cultural safety by providing a warm and welcoming space physically and socially and providing on-site Indigenous Patient Navigators • Align with best practices in environment with a mix of private and open spaces	• Expand and centralize the majority of mental health and substance use (MHSU) services • Maintain some services off site that provide alternative spaces that are less insitutional and more community and clubhouse in feel • Maintain close relationship and continuum of care through services at HOpe Centre and in community

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Clinical Services Plan - Priorities

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PERIOPERATIVE SERVICES

SERVICE	Surgical inpatient unit	Perioperative and endoscopy	Medical device reprocessing department
CURRENT STATE	Inpatient services surrounding surgical procedures	The perioperative period is the period of a patient's surgical procedure, which includes admission, anesthesia, surgery and recovery	Department providing cleaning, sanitization, sterile storage and distribution for reuseable medical equipment
PRIORITIES	• Expansion of beds to align with additional operating rooms (OR) and providing dedicated support for surgical volumes • Support vascular surgery and trauma as surgical specialties at LGH	• Increase the number of ORs and expand services • Incorporate vascular surgery services • Plan for technological advancements • Pursue short-stay zone for surgical observation for patients who may need extended care beyond pos-anesthesia care unit (PACU)	• Adopt technology proactively • Plan for changes to perioperative instrument complexity

Health Vision Lions Gate Hospital

Clinical Services Plan - Priorities

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INPATIENT SERVICES

SERVICE	Acute care	Critical care	Maternity, infant, child and youth care	Mental health and substance use
CURRENT STATE	Medical patients requiring stay in a hospital overnight for urgent medical conditions, including sub-acute medicine and specialty units: cardiac, neurology, palliative, inpatient rehabilitation, post-surgical care	LGH's ICU is a Level II critical care unit, which supports critically ill individuals with potentially life-threatening conditions. This unit deals with the highest acuity inpatients at the hospital. High Acuity Unit (HAU) is a unit which provides specialized care for patients with complex, life threatening medical problems requiring urgent and intensive treatment at a lower acuity than ICU.	Includes a birthing centre, neonatal intensive care unit (NICU) and pediatric inpatient unit. Patients in the hospital for ante or post-natal care, or delivering a baby will receive care in the birthing centre. NICU will provide care to newborns who require close monitoring or medical intervention, and the pediatric unit will treat patients for medical, surgical and mental health care who are under the age of 18.	There are two types of inpatient MHSU services: Carlile - an acute MHSU unit for individuals 17 to 25 with mental health presentations Psychiatry inpatient unit - supports medically stable patients with psychiatric illness in closed and certified units for adults 19+ with serious or persistent mental illness
PRIORITIES	• Increase beds to meet demand of growing and aging population • Build with modern best practices and standards in mind including single occupancy rooms, private ensuites, access to natural light and designated family spaces • Integrate mobilization and rehabilitation spaces • Minimize transfers by expanding services on site as appropriate	• Expand services by increasing the number of ICU and HAU beds • Maintain the separation of ICU and HAU • Minimize transfers by expanding services on site	• Expand all 3 units to align with modern best practices • Implement a dyad-model of care in the NICU for baby-parent rooms • Single room maternity care model where labour, delivery, recovery and post-partum care is in the same room • Incorporate Indigenous practices for birthing	• Expand adult mental health inpatient services • Maintain close connection with outpatient and community services • Improve flows to other inpatient services • Maintain and improve access to daylight and secure outdoor space

Health Vision Lions Gate Hospital

Clinical Services Plan - Priorities

CLINICAL SUPPORT SERVICES

SERVICE	Laboratory	Pharmacy	Medical imaging services
CURRENT STATE	Laboratory services support timely and accurate diagnosis, care management and treatment planning.	Pharmacies produce, prepare, dispense, review and monitor medications (the satellite pharmacy supporting the medical oncology unit is not covered in this section).	Diagnostics and interventional imaging services supporting diagnosis, treatment planning and monitoring patient progress (e.g. x-ray, ultrasound, computed tomography (CT) scanner)
PRIORITIES	• Maintain robust point-of-care testing services to support timely diagnostic results without requiring specimen collection in the lab • Redesign space for modern laboratory	• Support Indigenous medicines interaction information during Best Possible Medication History (BPMH) checks • Plan for advanced technology integration • Explore remote dispensing initiatives (for rural sites)	• Provide magnetic resonance imaging (MRI) services for patients from Coastal areas • Provide screening mammography services • Integrate advanced technology as it becomes available • Capitalize on telehealth/ telemedicine opportunities

Health Vision Lions Gate Hospital

Clinical Services Plan - Priorities

Vancouver CoastalHealth

LONG-TERM CARE AND SUPPORTING SERVICES

SERVICE	Long-term care	Hospice
CURRENT STATE	Long-term care (LTC) homes provide 24-hour professional care and supervision to adults in a supportive and secure environment. The services are available to people with complex care needs and physical and/or mental health conditions who cannot live safely and independently at home.	The current North Shore Hospice is adjacent to the existing LGH campus and some services are integrated. It is considered a community site with a residential license and provides basic end-of-life care.
PRIORITIES	VCH is working on an overall LTC strategy to ensure we are taking a comprehensive look at the needs and demands of the community. Future LTC planning will consider locating these services in the community as well as look at the care models that are best suited to community needs.	No expansion of this facility is being contemplated as the character of the site is based on it's smaller home-like environment. Any additional capacity required would best be off-campus, in community.

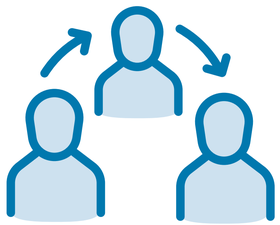
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Next Steps

Vancouver CoastalHealth

Where do we go from here?

01



VCH is engaging with key partners, North Shore communities and communities served by LGH to share the highlights of the draft plan and solicit feedback.

02



VCH will consider any further feedback and finalize the draft plan for the LGH hospital campus.

03



Once finalized, Health Vision LGH will serve as a high-level plan for health-care services and infrastructure on the hospital campus.

04



VCH will work with key partners and communities to further engage on the initiatives outlined in Health Vision LGH.