



**SURREY  
HOSPITALS  
FOUNDATION™**

# HEALTHY OPTIONS

POSITIVE SOLUTIONS TO THE  
SURREY HEALTH CARE CRISIS

A REPORT FROM THE  
SURREY HEALTH CARE SUMMIT  
MAY 30, 2023

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## 1. Preface

The Surrey Health Care Summit was convened by the Surrey Hospitals Foundation and hosted by the City of Surrey on May 30, 2023. The political environment at the time was one of significant tension and stress, with almost daily pronouncements from clinicians and other stakeholders about the dire situation at Surrey Memorial Hospital (SMH) as a result of compounding challenges in meeting the health care needs of residents in Surrey and south of the Fraser River. In the midst of this dynamic tension, five dozen stakeholders met at Surrey City Hall to identify the diverse issues and challenges, and to find consensus on possible solutions to the crisis. This report is an outcome of those discussions. It includes a recording of the identified issues at that moment in time, and the ideation around solutions as discussed on May 30.

One week later, on June 7, the Government of British Columbia's Ministry of Health (MoH) and Fraser Health Authority (FHA) announced they would be taking action to improve health care access in Surrey. The announcement followed a series of meetings from June 1 to 6 between the Minister of Health, along with other ministry and health authority officials, and healthcare providers. In its announcement, the government acknowledged Surrey Memorial's tertiary mandate, the chronic congestion and overcapacity issues at SMH, the impacts of a growing and changing population in Surrey, and the human resources challenges facing the region – emphasizing the dedication of health care workers, and the need for real, meaningful solutions to meet demand and ensure physical and physiological health and safety of staff.

The [government announcement](#) outlined specific actions, both short-term and medium-term, to ease tensions and reinforce SMH's designation as a tertiary hospital, in addition to the new hospital already announced for Cloverdale.

According to MoH, planning will start immediately for renal services, interventional radiology, catheterization lab and cardiology services, net new MRI and CT capabilities, critical-care and rehab, transitional beds, and 'hospital at home' services. Additionally, the government says, maternity care resources (including pediatric and women's health) will be reassessed and expanded to meet provincial wait-time benchmarks. Other short-term actions will aim to increase flow through the hospital, from emergency department to in-patient to discharge, as well as build out capacity of its family birthing unit.

The government says over the next five months it will conduct an inclusive acute clinical services planning process. The outcome is expected to be a refreshed clinical service plan for the hospital and region that will inform the MoH's 2023 autumn, capital and operating planning process.

It is noteworthy that many of the themes identified by MoH closely mirror those identified at the May 30 Health Care Summit, including: lack of specialized, acute services including cardiac, stroke, trauma, maternity, and pediatrics; overwhelmed hospital infrastructure and the need for hospital expansion; staff recruitment, training, and retention; and reassessing clinical service and community vision plans.

It is important to recognize the government's willingness to step forward and commit to addressing many of these issues. It underscores the critical nature of these issues and the collective desire for prompt resolution.

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Summit attendees confirmed that dedicated, integrated and aggregated planning and implementation involving collaboration from all stakeholders is required to truly bring sustained, transformative change to the health care environment in Surrey and south of the Fraser. This conclusion is the most significant outcome of the Summit.

## 2. Executive Summary

There can be no disagreement that the health care system in Canada in 2023 is under stress. No region of the country is immune to the challenges of meeting the demand for quality, public health care in the face of a growing and ageing population and skyrocketing costs. However, some parts of the country are experiencing especially urgent crises. Surrey, British Columbia is one such community.

As the City of Surrey's population has grown and it has become the second largest city in the province of British Columbia, investment in health care services and infrastructure have not kept pace. Surrey lags behind all other large Canadian cities in its per capita health care spending and health care infrastructure. This has resulted in a disproportionate number of Surrey residents travelling to other jurisdiction to receive health care. The Province of BC committed to building a second hospital in Surrey – and has since committed to providing even more supports to the city, and to Surrey Memorial Hospital. Ultimately, however, inequities still exist, and Surrey's health care and community leaders felt it was important to take action.

One such action was the convening of the Surrey Health Care Summit on May 30, 2023. The objectives of the Summit were twofold:

1. Clearly articulate the current health services situation south of the Fraser.
2. Propose solutions for the key priorities that can lead to immediate, mid- and long-term actions.

Over the course of the Summit, hosted at Surrey City Hall, approximately 60 stakeholders identified the following primary, overarching issues:

1. Disproportionate allocation of resources between north and south of the Fraser.
2. Lack of an evidence based health services plan for Surrey and south of the Fraser communities.
3. Inadequate primary and community care services, including insufficient family doctors.
4. Lack of funding for tertiary, specialized services (cardiac, trauma, maternity, pediatric, IR surgical, diagnostics).
5. Not enough beds and inadequate hospital infrastructure for the population and burden of disease.

Participants discussed and prioritized a number of possible solutions to those primary issues. Summit participants coalesced around four key recommendations. A fifth recommendation arose out of the need to have an engaged, cross disciplinary, group with oversight to activate the proposed solutions in such a way that they will have lasting impact, address inequities in care, and meet the needs of the community.

### Recommendations

1. That the Ministry of Health strike a multi-disciplined and locally-led Task Force to: study the current state of the health care ecosystem in Surrey and south of the Fraser; develop an evidence-based, needs-based, long-term strategic plan to address gaps and shortages in health care in the region; and provide recommendations and budget for a detailed implementation plan.
2. Match urgent needs with urgent solutions (e.g. address the hospitalist shortage immediately).

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3. Fund an inclusive, comprehensive, acute and community health services plan for Surrey. Use results of the plan to inform future healthcare investments in Surrey.
4. Build the second tower with more facilities at Surrey Memorial Hospital (already provided for in earlier capital planning processes).
5. Improve training, education, research, recruitment, and retention for doctors, nurses, and allied health personnel.

### 3. Introduction

#### About the Surrey Hospitals Foundation

The Surrey Hospitals Foundation (SHF) is a registered charity and the largest non-government funder of health care for families in Surrey. The SHF partners with donors and the community to support equitable and exceptional care in Surrey hospitals. Since 1992, the SHF has raised \$200 million from over 250,000 donors to support health care in Surrey.

The Foundation's approach to its mandate is to listen to the community and health care staff, identify their most pressing needs and gaps in services, advocate for and collaborate on a plan to address these needs and gaps, and, when necessary, rally the community, build support, and raise funds to support health care in Surrey.

#### The State of Healthcare South of the Fraser in 2023

The City of Surrey has been facing compounding challenges to its health care system for decades. As its population has grown exponentially, making it the second largest city in the province of British Columbia, health care services have not been able to keep pace. Surrey now lags behind most other communities in the province – many by a large margin – in the services Surrey Memorial Hospital (SMH), the region's tertiary referral hospital, is able to provide.

Surrey's acute services crisis is exacerbated by the city's lack of primary and community health providers/services. Surrey has the lowest ratio of family physicians in BC. Surrey has 59 family physicians per 100,000 residents compared to the BC average of 112. The City of Vancouver, by comparison, has 136 family doctors for every 100,000 people.

Vancouver, with a population of 662,000, has direct access to over 3,000 acute care beds within its municipal boundaries. Surrey, with a population of about 604,000, has 634 beds. At 1 patient bed per thousand residents, Surrey falls well below the Canadian average of 2.5 beds per thousand residents. Surrey also has one of the lowest ratios of community service beds per 1,000 resident in Canada.

Capacity and availability of tertiary critical services are significant issues at Surrey Memorial Hospital. In 2021, 26,000 Surrey residents received inpatient care at SMH, another 15,000 were forced to be treated elsewhere in FHA. Similarly, while the SMH Emergency Department struggled to treat 137,000 patients, another 82,000 Surrey residents were forced to go to Emergency Departments at other FHA hospitals. And just as many Surrey residents had surgery outside of their home community as were able to be accommodated at SMH.

Surrey, which has BC's highest burden of disease in the adult and pediatric populations, is separated from critical services by a river. The Fraser River is frequently an impassible barrier due to traffic congestion and when the region is struck by a natural disaster, residents may be cut off from life saving services for a

prolonged period of time. The Fraser is a physical embodiment of the inequities in health care between communities north and south of the river.

Surrey, with Canada's busiest ER, is the only large city in Canada currently unable to treat the three leading causes of sudden death: heart attack, stroke, and trauma. Surrey women deliver 6,010 babies annually. SMH is the busiest maternity ward in the province. It runs over capacity or is on diversion almost daily. Surrey Memorial Hospital's Pediatric ER has 12 beds and was built to see 20,000 patients annually. In 2019, it saw over 45,000 kids – double its capacity.

Surrey Memorial Hospital is not adequately funded for the tertiary services it is mandated to provide for Surrey and its non refusal sites south of the Fraser River (Peace Arch, Langley Memorial and Delta Hospitals).

The crisis was well-documented through the first half of 2023, as medical personnel voiced their concerns repeatedly and consistently. As a leader in supporting and advocating for health care in the region, the Foundation saw an opportunity to be a convener of community leaders and health care stakeholders, to facilitate a discussion that would look honestly at the problems, but would bring a solutions-focused lens to the process. It was within this context that the Surrey Hospitals Foundation organized the Surrey Health Care Summit on May 30, 2023.



## 4. Framing the issues

### Context

Approximately 60 health care leaders, first responders, elected officials and other community stakeholders came together for a half-day, facilitated Health Care Summit at Surrey City Hall on May 30. The purpose of the Summit was to identify the main issues that needed to be addressed, discuss possible solutions (some of which may require philanthropic support) and find consensus on key priorities to advance. The objectives of the Summit were twofold:

1. Clearly articulate the current health services situation south of the Fraser.
2. Propose solutions for the key priorities that can lead to immediate, mid- and long-term actions.

The first part of the discussion focused on answering the question: *Based on your understanding of Surrey's current and anticipated clinical services, and given Surrey's community and regional leadership role, what services are lacking?*

Prior to the Summit, participants were asked to submit a list of what they perceived to be the most pressing issues. Their responses were aggregated and presented at the Summit as a starting point for discussions. Using a deliberative process, participants identified gaps and overlaps, and refined the list of issues until they arrived at a general consensus on the key areas of concern.

Key Areas of Concern	
1. Lack of cardiac services	11. Lack of staffing in general
2. Lack of neurological/stroke services (including interventional radiology)	12. Disproportionate allocation of resources between north and south of Fraser
3. Insufficient diagnostic radiology and lab services	13. Lack of trauma services
4. Not enough beds (all kinds)	14. Lack of procedural space and time
5. Inadequate pediatrics services	15. Outpatient services
6. Insufficient maternity and women's health services	16. Renal services
7. Lack of vascular surgery services	17. Silo-ing of programs and services
8. Not enough specialists	18. Lack of clarity, governance and accountability
9. Lack of mental health and addictions support	19. Lack of clinical research resources
10. Not enough family doctors, primary, and community and care	20. Lack of tertiary care programs in general

### Prioritization

There was a spirited discussion around the issues. Participants felt that Surrey Memorial Hospital, which serves not just Surrey but also Delta, Langley, Peace Arch, and the entire south Fraser region, was facing a watershed moment.

Surrey Memorial was designated a tertiary care centre in 2010. In 2023 it does not offer tertiary services in areas such as: cardiac; neurology; trauma; cancer; women’s health; maternity and pediatric health. Despite recognition as a tertiary, academic centre, Surrey Memorial does not receive operational funding that would allow it to develop and sustain tertiary services matched to community need. One participant described it as “calling our house a mansion when it is clearly not one.”

Despite being the fastest-growing region, participants expressed a sentiment that the South Fraser region was not getting its fair share of resources and that those inequities were the result of systemic bias against the city and region. The lack of infrastructure and resources south of the Fraser was highlighted as a significant concern.

Participants were then led through a prioritization exercise to help identify and refine the areas of concern into a smaller subset of the most significant and urgent issues to be considered in the solutions-finding phase.

The following is the consensus list of **top issues** for which the group was then tasked with proposing solutions.

1. Disproportionate **allocation of resources** between north and south of the Fraser.
2. Absence of a **health services plan** matched to demographics and evidence-based need.
3. Inadequate access to **primary and community care services**, including **insufficient family doctors**.
4. Lack of funding for **tertiary, specialized services** (cardiac, trauma, maternity, pediatric, IR surgical, diagnostics).
5. **Not enough beds** and **inadequate hospital infrastructure** for the population and burden of disease.

## 5. Looking at Solutions

### Context

The second part of the discussion focused on solutions, and specifically on answering the question: *Thinking about the top issues you identified in Question 1 above, what are some practical solutions that would have the greatest positive impact in resolving those issues?*

As with the issues identification portion of the Summit, participants were asked to pre-submit a list of what they perceived to be the practical, realistic solutions to the problems identified in part one. Their responses were again aggregated and presented as a starting point for discussions.

There was considerable discussion about the initial list of potential areas to introduce improvements to the Surrey health ecosystem. The list grew substantially, as participants identified specific areas of concern and provided suggestions to bring positive change.

Key Opportunities for Change	
1. Enhance/add services for acute care	11. Develop and implement a formal strategic community visions plan for south of the Fraser
2. Training, education, recruitment and retention for docs, nurses and allied health workers	12. Add more seats south of the Fraser for full medical ecosystem training and streamline foreign doctor licensing
3. Build a cardiac catheterization lab	13. Build a cardiac centre
4. Expand interventional radiology services	14. Build a trauma treatment centre
5. Expand capacity for diagnostics	15. Improve ED capacity
6. Build a second tower with more facilities at SMH	16. Demographics and geography within FHA should drive allocation
7. Increase pediatric and maternity programs, services and beds	17. Review ACCI report and process
8. Establish vascular surgery services	18. Define what needs regionalization and what doesn't
9. Improve data collection and analysis for better planning	19. Review boundaries and jurisdiction of FHA (no longer serving the needs of a large population)
10. Increase mental health and addictions supports	

### Prioritization

Participants suggested a broad range of ideas. For example: including better accountability and governance; reviewing the jurisdictions and boundaries of Fraser Health; building a collective vision for all departments and services to harmonise and optimise efforts; implementing strategies to reduce health care demand through early triage, education, and awareness; developing a strategic vision that considers service

regionalization vs centralization; and improving resource allocation to align with geographic and demographic needs.

Importantly, as each identified opportunity for change was considered, it became clear to participants that “silo-ing” (of issues, of specializations, of solutions, etc.) was part of the problem. It also became clear that it was necessary to understand how the different parts of the Surrey health care ecosystem fit together, and to aggregate the opportunities for change into thematic groupings, in order to set the stage for pragmatic and enduring solutions.

As with the issues identification process, participants were led through a prioritization exercise to help identify and refine the opportunities for change into a smaller subset of the most pressing and plausible solutions to put forward as recommendations.

The following is the consensus set of recommendations that the Summit participants believe need to be addressed first and foremost.

1. **Match urgent needs with urgent solutions** (e.g. address the hospitalist shortage immediately). It was assumed that getting the basics right, including reallocating resources to the most pressing needs, would form the basis for further, future action.
2. Fund an **inclusive, comprehensive, acute and community health services plan** for Surrey. Use results of the plan to inform future healthcare investments in Surrey.
  - a. Review boundaries, jurisdiction, governance, and accountability of Fraser Health Authority.
  - b. Ensure demographics and geography within Fraser Health Authority drive resource allocation.
3. Build **the second tower** with more facilities at Surrey Memorial Hospital (already provided for in earlier capital planning processes).
4. Improve **training, education, research, recruitment, and retention** for doctors, nurses, and allied health personnel.

## 6. The Path Forward

The summit concluded on a note of urgency, recognizing that pressing health care needs require immediate, actionable solutions. Together participants identified significant issues facing the system and proposed key opportunities for change, all of which underscored the need for a collaborative, strategic, and focused effort to tackle the health care challenges faced by Surrey and south of the Fraser.

As noted in the Preface, one week after the Surrey Health Care Summit, the Government of BC announced a suite of new health care services and infrastructure for Surrey, and specifically at Surrey Memorial Hospital. While the announcement addresses a number of specific issues identified during the Summit, including some of the urgent needs, it doesn't change the overarching need to take an aggregated and integrated approach to building the infrastructure and implementing the services. To do otherwise would be to continue the silo-ing of services that was identified as one of the key problems with the current system.

It is important to acknowledge that the government announcement has helped reduce the significant tension and conflict that had begun to define relationships between the province, the health authority, clinicians and community members. Instead, a path forward has been cleared for more productive and collaborative relationships.

Therefore, rather than discussing ways to push the government to action and to advocate for change, as may have been the recommended next step prior to June 7, it is now far more advisable to acknowledge and build from the announcement, and work collaboratively to deliver the services Surrey residents need and deserve.

There are three components to a truly solutions-focused collaboration. Buildings and services are one, but even among those announced on June 7, there are adjustments and additions likely required to meet the actual needs in the community. Prominently, it is important that adequate investments be made at Surrey Memorial Hospital to enable it to fulfill its role as a tertiary referral hospital for communities south of the Fraser. Training, education, research and a recruitment and retention plan – specific and implementable – will be required to thread together all of the current gaps in health care personnel. But first and foremost, it will be critical to work together to develop a true community vision and strategic health care solutions plan. In order to achieve what is required, it will be important to develop such a plan through a truly collaborative process that involves the community, is faithful to the needs of the community, and is open and transparent to the community.

Therefore, in addition to the four consensus recommendations outlined above, the following action is recommended as the next, most important step in achieving lasting health care solutions for Surrey:

**That the Ministry of Health strike a multi-disciplined and locally-led Task Force to: study the current state of the health care ecosystem in Surrey and south of the Fraser; develop an evidence-based, needs-based, long-term strategic plan to address gaps and shortages in health care in the region; and provide recommendations and budget for a detailed implementation plan.**