



WE SEE **YOU** INSIDE AND OUT

**A BOLD NEW BEGINNING FOR
BETTER HEALING STARTS WITH YOU.**

HELP BRING LIFE-SAVING MENTAL HEALTH CARE TO GEORGIAN BAY
GENERAL HOSPITAL, SO NO ONE HAS TO FACE A CRISIS ALONE.





MENTAL
HEALTH
IS HEALTH.

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A new beginning starts with **YOU**

Mental health challenges affect all of us—parents, children, neighbours, colleagues, and friends. Whether it's a new mother facing post-partum depression, a teen in crisis, a senior struggling with dementia, or a neighbour overwhelmed by anxiety—we see them. These stories are part of our community.

Mental health *is* health. And right now, our region is in crisis.

At Georgian Bay General Hospital (GBGH), we care for more than 1,700 mental health patients every year. That's about three people in crisis every single day. But despite the growing need, our hospital isn't equipped or funded to provide acute mental health care.

Instead, patients in crisis must be transferred to hospitals in other communities including Royal Victoria Regional Health Centre (RVH), Orillia Soldiers' Memorial Hospital (Soldiers), or Waypoint Centre for Mental Health Care (Waypoint), and when those beds are full – sometimes even further away.

But here's the reality: those beds are often full. That means patients are left waiting at GBGH, sometimes for days. Not getting the care they urgently need. Not in the environment they deserve. And not with the dignity or compassion that every person in crisis should receive.

This delay is heartbreaking. It's time for change.

With your support, we can bring acute mental health care to GBGH so no one in our community has to face a mental health crisis alone, or wait to be seen.





QUICK STATS

Simcoe Muskoka has the **second-longest wait time in Ontario** for a mental health bed.

No one in crisis should have to wait *days or weeks* for care.

But right now, that's the heartbreaking reality for too many people in our community. When someone reaches their breaking point, there should be help. There should be hope. There should be a place to turn.

With your support, there can be.

Georgian Bay General Hospital (GBGH) has submitted a Capital Submission to the Ministry of Health to bring a much-needed acute mental health program to our hospital. But we can't do it alone.

Together, through the **We See You** campaign, we must raise the community share of funds needed to build a 48,400-square foot acute mental health wing, equipped with 24 dedicated beds – right here at GBGH. This new space will ensure that patients in crisis receive expert, compassionate care close to home, without delay.

It will mean a better place to heal. A safer place to stay. A stronger future for everyone in North Simcoe.

A new beginning starts with *you*.

Join us in bringing this bold vision to life and help transform mental health care in our community, for all who need it.



“By giving today you will literally be creating a bridge to a new wing, where patients who have nowhere to go and can't access care, can finally get the support they so desperately need.”

**– Matthew Lawson,
President & CEO, GBGH**

THE NEED IS URGENT.

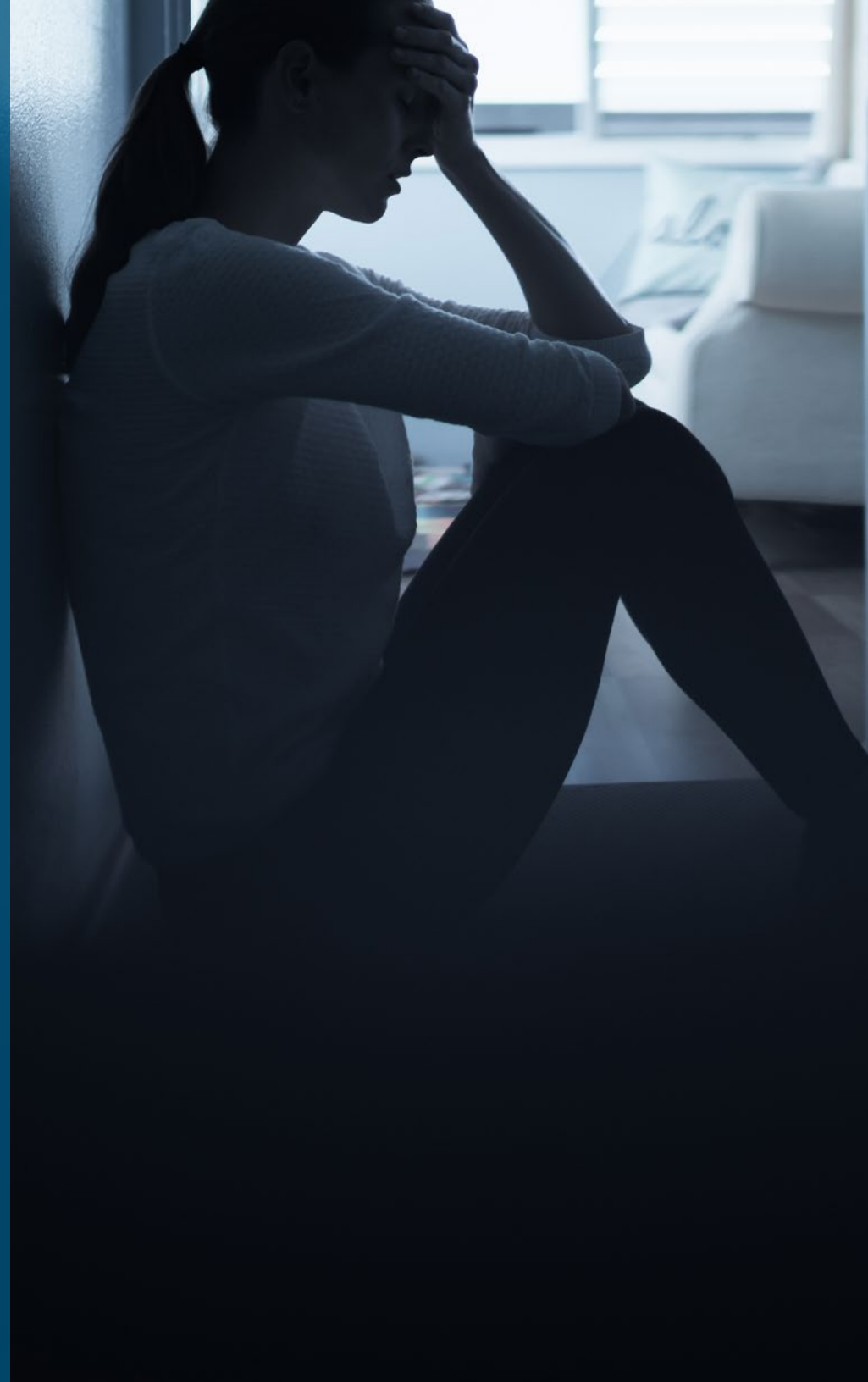
GBGH sees approximately **1,700 patients in mental health crisis** annually.

Our region has one of the **longest wait times in Ontario** for a mental health bed.

Mental health admissions at GBGH **grew 22% in one year (2021)**, more than four times the provincial average.

Patients sometimes **wait more than 100 hours** in the GBGH emergency department (in a safe room) before a mental health bed becomes available, delaying vital psychiatric care.

Our community's mental health needs are **2-3 times higher than the provincial average.**



Our community has far higher than average mental health care needs. Why is that?

Driven by limited resources, a rapidly growing substance abuse problem in Simcoe County and many other social determinants of health including lower incomes and a lack of access to affordable housing, our region is experiencing **two to three times higher than the provincial average for mental health care needs.**

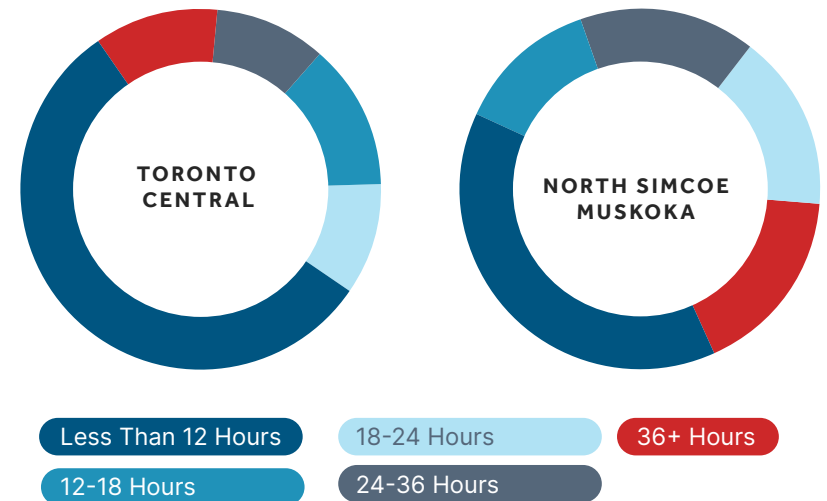
How long do you have to wait for mental health care in our region?

We have a critical shortage of acute mental health beds in our region. During 2024/25, 60% of mental health patients who presented to an emergency department in North Simcoe Muskoka waited more than 12 hours for admission to a mental health bed. And, 23% waited more than 48 hours.

“We recently had a patient waiting here for over 100 hours to see a psychiatrist. That’s not helping them get any better and, in some cases, it’s escalating their condition because they are not getting the care they need.”

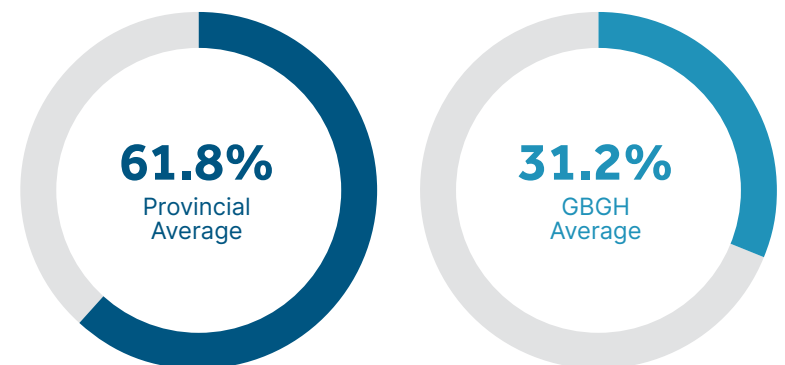
– MATTHEW LAWSON,
PRESIDENT & CEO, GBGH

Emergency Department Wait Times for Mental Health Admission



*GBGH data compiled from the Decision Support Unit 2025.

Emergency Department Discharge Time to Mental Health Bed <12 hours





FROM THE FRONT LINES

A message from Dr. Cait Button, GBGH Chief of Emergency Services

What I want to emphasize to you is this: I know of too many instances where the standard of holistic care – both physical and mental – is not being met.

As an Emergency Physician, I see the mental health pressures on every shift. And I'm not the only one... every Emerg physician and nurse in our hospital sees this challenge and experiences this frustration every time they work.

As just one of many examples of why the need is so great, recently, our Emergency department had seven mental health patients in crisis... without a single mental health bed available in the region.

Two of these seven patients waited more than 60 hours in our Emerg for an acute bed. That was 60 hours during which their physical care needs were capably being met by the Emerg team, but their mental health care was delayed. And 60 hours where

our Emerg staff's ability to help other patients was impacted by the challenge of caring for mental health patients without the right support.

*WE SEE the importance of holistic care for our patients, and we know it is **not** patient-centred care when mental and physical health needs aren't being met **simultaneously**.*

*We will work hard to **change** this for mental health patients by establishing a program that brings mental health services – both inpatient and a day hospital program – to our hospital. But we need your help. We need you to join us in a new beginning for better healing today. **our patients and our community deserve more.***

Dr. Cait Button

Why do we have to send mental health patients from GBGH to other hospitals?

Since GBGH does not have its own acute mental health program, we must refer our mental health patients to other hospitals within our region. And each hospital is unique in what specific mental health services and programs that they are able to provide, and are also facing increased mental health volumes coming from their own Emergency departments.

For example, if a patient has a physical condition or injury that deems them medically unstable, they are limited in which facilities can treat them for both mental and physical health needs. Some facilities can refuse patients due to alcohol level, substance abuse levels and behavioural problems, which many mental health patients also experience. Therefore, while people think we have the necessary services in our community, we do not.

GBGH is projected to care for the same number of mental health inpatients and more than 3X the number of outpatients as Waypoint, with a fraction of the beds.

“All three regional organizations that currently have mental health programs are serving their communities. We need to be able to serve ours, while still being available to assist patients throughout the region. The longer we are delaying care, the more problematic it is.”

– MATTHEW LAWSON, PRESIDENT & CEO, GBGH

RVH (2025)
46 Beds

OSMH (2025)
25 Beds

WAYPOINT (2025)
315 Beds
Mental Health care only;
no acute medical care

GBGH (2025)
0 Mental Health Beds
1700 Mental Health
visits in ED Every Year

GBGH (FUTURE)
24 Mental Health Beds


YOU can change this picture:

The situation: Ben, a 45-year-old father of four comes into our Emergency Department with suicidal thoughts, overwhelmed with anxiety and depression after the recent death of his mother and an impending job loss. He is in active crisis and begging for help.

This is a picture of what happens today:

- Our hospital doesn't have mental health services.
- Ben would be triaged, seen by a physician, a crisis worker if available, and wait while blood work is done, while we begin the long process of trying to transfer him to a hospital with an appropriate bed.
- Ben will be placed in our safe room if not already occupied, which it frequently is. Ben will not be seen by a psychiatrist or receive any mental health treatment until he goes to another hospital that has mental health beds, possibly away from his family and community. Ben is feeling more and more hopeless and his suicidal thoughts are increasing in the absence of treatment.
- Ben will most likely **wait over three days**, with no mental health treatment before being transferred to another hospital.

WE SEE our patients struggling, and know our patients deserve so much more.



This is what the picture would look like if GBGH had an on-site mental health program:

- Ben would be assessed and brought to a safe room. He would be seen by the ER physician and since he is having suicidal thoughts, he would be admitted to an acute mental health bed at GBGH where he would receive around-the-clock dedicated one on one care.
- His healing journey would begin right away.
- In time, as his mental health improves, Ben would learn appropriate strategies and tools. When his suicidal thoughts become less frequent and it is safe for him to be discharged, he will return to his family with ongoing support from our outpatient program.
- **Ben will continue to have access to nurses, social workers, peer support, referrals to other programs and whatever else he needs to integrate back into his family and community.**

“Last night, about half of my patients were brought in for mental health issues. All of these patients needed to be assessed and have blood work done. The crisis worker was called in and they had to be monitored in the Emergency Department until a transfer could be made to one of the mental health hospitals in our area. Sadly, this sometimes takes days or weeks, which is why we so urgently need more mental health services at GBGH.”

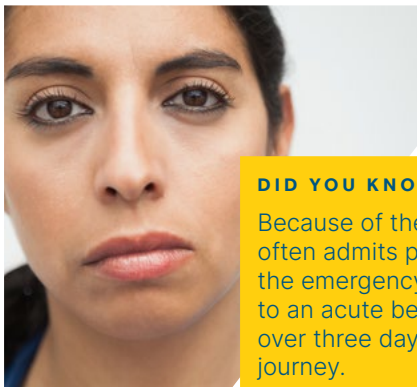
– EMILY NOACK, ED NURSE AT GEORGIAN BAY GENERAL HOSPITAL

No one should have to wait days or weeks for the care they need. It's heartbreaking.

"Nurses have come to me in tears because they feel hopeless in being able to support patients that languish for days in our Emergency Department waiting for a mental health bed. Some of these patients are children. People come to the hospital to get care and when we are unable to provide that care, it is heartbreaking for our patients, their families and our teams.

Our community needs and deserves access to equitable care. We want better care for our patients and the community. By supporting this campaign, you are helping us reach that goal."

– LINDA GRAVEL, VP OF CLINICAL SERVICES AND CHIEF NURSING EXECUTIVE



DID YOU KNOW

Because of the lack of beds for mental health patients, GBGH often admits patients to our acute area to free up space within the emergency department. Over 30% of those patients admitted to an acute bed while waiting for a mental health bed are waiting over three days before they could begin their mental health healing journey.

Having a program at GBGH would allow us to address any acute medical issues at the same time as helping patients through their mental health challenges.

MENTAL HEALTH IS HEALTH. HERE'S WHAT YOU NEED TO KNOW:

- Things that can impact mental well-being include job stress, money challenges, discrimination, care giver burdens, the loss of a loved one and other tragic circumstances.
- About half of adults will have a mental health issue at some point in their lives. The good news is we are talking about it more than ever.
- Young people aged 15 to 24 are more likely to experience mental illness and/or substance use disorders than any other age group.
- 39% of Ontario high-school students indicate a moderate-to-serious level of psychological distress (symptoms of anxiety and depression). A further 17% indicate a serious level of psychological distress.
- Mental illness and substance use disorders are leading causes of disability in Canada.
- About 4,000 Canadians per year die by suicide – an average of almost 11 suicides a day. It affects people of all ages and backgrounds.
- The stigma is real. People are nearly three times less likely to want to disclose a mental illness like depression than a physical one like cancer*.
- The presence of a mental illness contributes to the worsening of other conditions such as heart disease, diabetes, obesity, asthma, epilepsy and cancer treatments.
- Rates of tobacco use, alcohol abuse and illicit drug problems increase in the presence of mental illness.
- Children of affluence are generally presumed to be at low risk. However, recent studies have suggested problems in several domains—notably, substance use, anxiety, and depression—and two sets of potential causes including: pressures to achieve and isolation from parents.
- Pre COVID nearly 2.3 million Canadians said they had unmet or partially unmet mental health needs. Over ¾ of those mentioned the largest two barriers being not knowing where to get help and help not being readily available as the reason they did not get care. GBGH wants to change this for our local community. Our doors are open 24/7 to care and we want to ensure every resident knows in their time of crisis they can come here.

*<https://www.camh.ca/en/driving-change/the-crisis-is-real/mental-health-statistics>



WE SEE the gaps, and
we're ready to fill them.

In October 2023, GBGH submitted its Stage 2 Capital Submission to the Ministry of Health, requesting a comprehensive acute mental health program for our community. With your support, we can raise the \$20 million needed to build a 48,400-square-foot acute mental health wing—a peaceful, supportive space designed for healing and recovery.

This state-of-the-art facility will include:



24 beds, including 16 acute care beds and 8 beds for geriatric patients



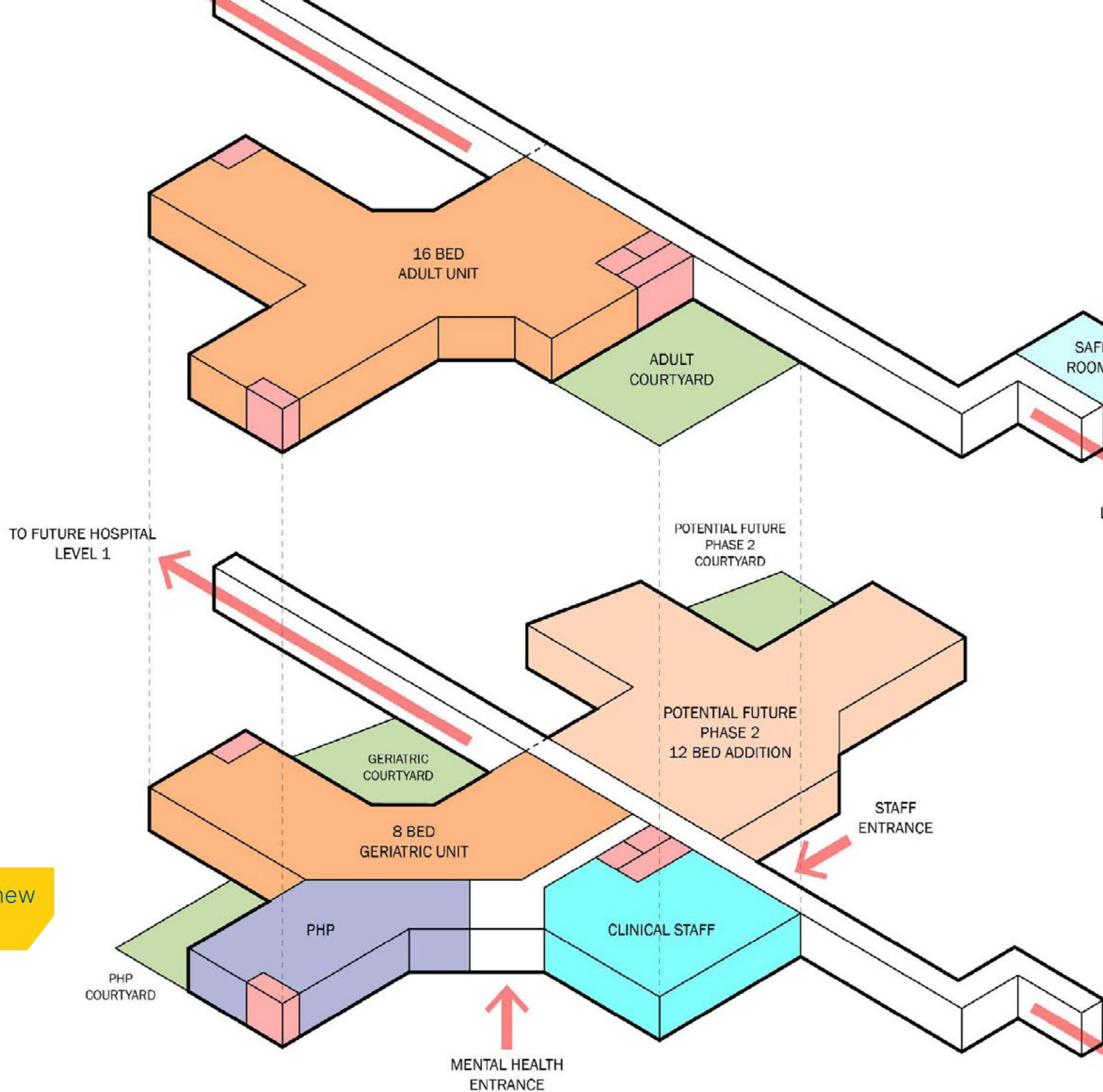
Day programming to support transition back into the community.



A full team of mental health professionals: nurses, psychiatrists, counsellors, therapists, crisis workers, peer support, and more.

Once we receive approval from the Ministry of Health, we anticipate beginning construction within a year, and welcoming patients two years later.

Preliminary drawings for the new
Mental Health wing at GBGH





TO EXISTING HOSPITAL
LEVEL 2 - EMERGENCY DEPARTMENT

All patients, regardless of whether they are affected by medical conditions or mental health conditions, need space, privacy, dignity and supported care to heal.

- The new unit will encapsulate best practices for space planning and design for mental health care (i.e. individual rooms, outdoor recreational spaces).
- The new wing will be connected to the hospital by a healing bridge pathway.
- It will be a bright and soothing environment surrounded by nature.
- Light will be maximized throughout to create a therapeutic environment.
- The new wing will be integrated into the design of the new hospital.
- We will be consulting on the design to ensure that it is a culturally appropriate space for all.
- It will include a dedicated smudge room for our Indigenous population.



TO EXISTING HOSPITAL
LEVEL 1 - SERVICES

GBGH's new state-of-the-art mental health care wing will provide:

16 acute beds


- This kind of bed is for a patient experiencing an acute episodic mental health situation.
- Examples of episodic situations may include severe anxiety, depression, schizophrenia, self-harm behaviours, they may not be taking their medications, etc.
- The patient would be triaged and assessed and supported throughout the episode with appropriate care and follow-up care, until they are able to be discharged and supported through outpatient care as they integrate back into their lives and the community.





8 beds for geriatric patients

- This kind of bed is for elderly patients with severe dementia or delirium.
- A patient requiring this unit may present in the Emergency Department demonstrating agitated or aggressive behaviours that make it unsafe to remain either at home, in a retirement home or a long-term care home.
- These patients require extremely specialized care to help manage their behaviours as well as concurrent geriatric care.
- This level of care provides three to one nursing care and a very specific care plan to help meet the patient's needs, as well as partnering with other home and community care agencies to integrate them back into the community.
- **There are only two geriatric mental health units from Hwy 9 all the way to Sudbury.** With the rapidly aging population, the need for geriatric mental health beds is a very urgent and growing need.
- Within the Midland and Penetanguishene area, the impact of an aging population can be expected to be even more severe, as the proportion of the population that is 65 and older (24.5% in 2016 in Midland, 22.77% in 2016 in Penetanguishene) is already much greater than for Simcoe County (approx. 17.5% in 2016).



**“Empathy is
communicating that
incredibly healing
message of ‘you are
not alone.’”**

– BRENÉ BROWN

WE SEE YOU and the impact of your giving

Every day, at least three people arrive at Georgian Bay General Hospital in mental health crisis. They are our mothers and fathers, our children and grandparents, our friends and neighbours. They are part of our community, and they deserve to be seen, supported, and cared for.

“Mental health challenges are often invisible—but they’re everywhere. You may never know how many people in your life are struggling, because you can’t always see it. It’s the neighbour who never leaves their home because of crippling anxiety. It’s the mother barely hanging on. It’s the successful professional who drinks every night just to get through the day. These are silent battles, made harder by the absence of support.

But imagine a future where every person in crisis is seen and supported. Where no one has to leave their family, friends, or community to get the help they need. That’s the future we’re building at GBGH. And it starts with you,” says Matthew Lawson, President & CEO, GBGH.

By giving to the **We See You: Inside & Out** campaign, you are helping us raise \$20-million to build a 48,400 square foot acute mental health wing at GBGH, and invest in priority equipment and technology across the hospital. This urgently needed expansion will meet the soaring demand for care in our region and provide a safe, healing space for patients to begin their recovery, right here at home.

Your generosity will ensure equitable access to expert, compassionate mental health care for everyone in our community.

We see the need. We see the opportunity. And with your help, we will see lives transformed.

Thank you for seeing us—and for helping us SEE every patient, inside and out.



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