STUART-NECHAKO REGIONAL HOSPITAL DISTRICT AGENDA THURSDAY, NOVEMBER 23, 2017

CALL TO ORDER

SUPPLEMENTARY AGENDA Receive

AGENDA – November 23, 2017 Approve

PAGE NO. MINUTES ACTION

3-6 Stuart-Nechako Regional Hospital District Adopt

Meeting Minutes - October 12, 2017

DELEGATIONS

BC EMERGENCY HEALTH SERVICES

Barb Fitzsimmons, Chief Operating Officer

Dr. John Tallon, Vice-President, Clinical and Medical Programs

Paul Vallely, Senior Provincial Executive Director, Patient Care Delivery

RE: Criteria for Landing for Air Services, Carriers Serving Small

Communities, Forestry Ombudsman's Report and Helicopter Responses to

the Area

NORTHERN HEALTH

Penny Anguish, Chief Operating Officer, Northern Interior Health Services

Delivery Area - Via Teleconference

Aaron Bond, Interim Health Services Administrator, Prince George – Via

Teleconference

April Hughes, Health Services Administrator, Omineca

Marie Hunter, Health Services Administrator, Lakes District

RE: Update: Capital Projects, Seniors Care, and Mental Health Services

REPORTS

7-10 John Illes, Treasurer Recommendation

- Investment Policy Statement Adoption (Page 7)

11-12 John Illes, Treasurer Receive

- Completion Report - Lakes District Hospital

13-21 John Illes, Treasurer Receive

- Northern Health Capital Status Reports

- September 30, 2017

22-24 John Illes, Treasurer Receive

- Financial Statements - January 1, 2017 to

September 30, 2017

Stuart-Nechako Regional Hospital District Agenda November 23, 2017 Page 2

| PAGE NO. | CORRESPONDENCE | ACTION |
|----------|--|---------|
| 25-26 | Northern Health – UBCM Meeting September 26, 2017 | Receive |
| 27-33 | Northwest Regional Hospital District: Directors' Report – August 18, 2017 | Receive |
| 34-35 | Northern Health – News Release – New Board Member, Medical Health Officer: NH Board Meeting Highlights | Receive |
| | VERBAL REPORTS | |
| | RECEIPT OF VERBAL REPORTS | |
| | SUPPLEMENTARY AGENDA | |
| | NEW BUSINESS | |
| | ADJOURNMENT | |

STUART-NECHAKO REGIONAL HOSPITAL DISTRICT

MEETING MINUTES

THURSDAY, OCTOBER 12, 2017

PRESENT:

Chairperson

Jerry Petersen

Directors

Chris Beach Eileen Benedict **Dwayne Lindstrom** Thomas Liversidge Rob MacDougall Bill Miller

Mark Parker Gerry Thiessen

Director Absent

Tom Greenaway, Electoral Area "C" (Fort St. James Rural)

Staff

Melany de Weerdt, Chief Administrative Officer Cheryl Anderson, Manager of Administrative Services

John Illes, Treasurer

Wendy Wainwright, Executive Assistant

Others

Alistair Schroff, Lakes Animal Friendship Society – arrived at 10:30 a.m.

Media

Flavio Nienow, LD News – arrived at 10:30 a.m.

CALL TO ORDER

Chair Petersen called the meeting to order at 10:04 a.m.

AGENDA

Moved by Director Parker Seconded by Director Beach

SNRHD-2017-9-1

"That the Stuart-Nechako Regional Hospital District Agenda of October

12, 2017 be approved."

(All/Directors/Majority)

CARRIED UNANIMOUSLY

MINUTES

Stuart-Nechako Regional Hospital District Meeting Minutes - August 17, 2017 Moved by Director Miller Seconded by Director Beach

SNRHD-2017-9-2

"That the minutes of the Stuart-Nechako Regional Hospital District

meeting of August 17, 2017 be adopted."

(All/Directors/Majority)

CARRIED UNANIMOUSLY

REPORTS

Memorandum of Understanding

Moved by Director Benedict Seconded by Director MacDougall

SNRHD-2017-9-3

"That the Stuart-Nechako Regional Hospital District Board of Directors receive the Chief Administrative Officer's October 2, 2017 memo titled "Memorandum of Understanding" and approve the Memorandum of Understanding for signature."

(All/Directors/Majority)

CARRIED UNANIMOUSLY



Stuart-Nechako Regional Hospital District Meeting Minutes October 12, 2017 Page 2

REPORTS (CONT'D)

Discussion took place in regard to the importance of prioritizing communication. Chair Petersen commented that during the Northern Health Board Meetings there is an opportunity for communication.

Director Benedict mentioned that the original Memorandum of Understanding was developed to provide a guideline for Northern Health due to the Stuart-Nechako Regional Hospital District wanting to be more involved in capital projects and requesting more transparency in regard to projects within the SNRHD.

CORRESPONDENCE

Correspondence

Moved by Director MacDougall Seconded by Director Thiessen

SNRHD-2017-9-4

"That the Stuart-Nechako Regional Hospital District Board of Directors receive the following correspondence:

- Smithers Caregivers Support Group Assisted Living;
- Northern Health University Hospital of Northern BC Breast Imaging Clinic Officially Opens."

(All/Directors/Majority)

CARRIED UNANIMOUSLY

Discussion took place in regard to the Smithers Caregivers Support Group – Assisted Living letter. The SNRHD Board of Directors identified that there is a lack of support for caregivers of seniors, Alzheimer's, Dementia and serious illnesses across the entire region including Burns Lake which was identified in the letter as having a new hospital. The Board of Directors noted that having a new hospital in Burns Lake did not mean there is adequate support and service levels for caregivers and their patients.

Director Thiessen spoke to the challenges and impacts associated with seniors care across the north. He noted the need to find solutions for seniors to be able to stay in their communities while also receiving the support to do so. Director Thiessen suggested, because the issue is regional, that it could be discussed at a RDBN Committee of the Whole Meeting and that for 30 minutes at every Committee of the Whole meeting the Regional Board could address regional discussion items.

Director Benedict mentioned that Northern Health is attending the SNRHD Board meeting in November, 2017 and it would be an opportunity to discuss care giver support. Chair Petersen suggested that the SNRHD Board of Directors can forward any further topics of discussion to staff prior to the meeting to forward to Northern Health.

VERBAL REPORTS

Full Time Doctor for Fraser Lake

Director Lindstrom reported that Fraser Lake has a full time doctor moving to the community.

Medical Students Arriving in Vanderhoof Director Thiessen noted that there are two locums and two resident doctors in Vanderhoof and on October 28, 2017 six more medical students will be arriving in the community. He is planning to host a dinner for the students to help encourage them to consider Vanderhoof when they complete their studies.

Stuart-Nechako Regional Hospital District Meeting Minutes October 12, 2017 Page 3

VERBAL REPORTS (CONT'D)

<u>District of Fort St. James</u> Locum Director MacDougall commented that the District of Fort St. James also has a locum doctor in the community. He mentioned that along with the Fort St. James Primary Care Society he attended a dinner for the locum to encourage him to remain in Fort St. James to practice medicine.

Stuart Lake Hospital Replacement Committee Director MacDougall mentioned that in meeting with the Minister of Health at the 2017 UBCM Convention direction was given to form a Stuart Lake Hospital Replacement Committee to focus efforts on the project. Director MacDougall will provide information to Chair Petersen and staff moving forward.

Emergency Room Concerns

Director Miller brought forward concerns in regard to Emergency Room procedures at the Bums Lake Hospital. He has been made aware of an incident wherein a patient sliced open his hand and required 37 stitches but when he arrived at the hospital and rang the bell at the Emergency Department there was no response. The patient waited over an hour before staff responded. He spoke of this issue needing to be brought to Northern Health's attention.

Burns Lake Ambassador Committee Director Beach commented that he is a member of the Burns Lake Ambassador Committee which was formed to provide support to new physicians moving into the community similar to initiatives in Vanderhoof and Fort St. James. He noted that they are planning an event in the future and will be inviting anyone involved in the medical field from doctors and nurses to pharmacists.

Northern Health/Regional Hospital Districts Meeting -October 16, 2017 – Prince George, B.C. Chair Petersen and Melany de Weerdt, CAO are attending the Northern Health and Regional Hospital Districts Meeting October 16, 2017 in Prince George, B.C.

2017 UBCM Meetings with Northern Health and Minister of Health Chair Petersen mentioned that both SNRHD meetings with Northern Health and the Minister of Health were positive. He commented that they were willing to discuss issues and concerns and look toward solutions.

Coordination of Emergency Services

Director Thiessen spoke to the need to include BC Ambulance Paramedics, a key link in healthcare, in the coordination of emergency services discussions. Director Thiessen has been in contact with Craig Parnell, BC Ambulance Service.

Receipt of Verbal Reports Moved by Director Miller Seconded by Director Thiessen

SNRHD-2017-9-5

"That the verbal reports of the various Stuart-Nechako Regional Hospital District Board of Directors be received."

(All/Directors/Majority)

CARRIED UNANIMOUSLY



Stuart-Necheko Regional Hospital District Meeting Minutes October 12, 2017

Page 4

NEW BUSINESS

Burns Lake Hospital
-Maternity Ward

Director Parker questioned if the Burns Lake Hospital is equipped with a Maternity Ward. Director Beach mentioned that the Burns Lake Hospital does have a maternity ward but does not have sufficient staff to be able to deliver babies at this time. He mentioned that he has recently became aware, and will start researching, other small communities in B.C. that have low risk model maternity wards and are able to perform low risk deliveries. Director Thiessen spoke of the need to attract and retain a high staffing level in order to provide maternity ward services. Chair Petersen noted the importance of continuing to communicate with Northern Health in regard to the maternity ward at the Burns Lake Hospital.

ADJOURNMENT

Moved by Director MacDougall Seconded by Director Miller

SNRHD-2017-9-6

"That the meeting be adjourned at 10:38 a.m."

(All/Directors/Majority)

CARRIED UNANIMOUSLY

| Јегту Petersen, Chairperson | Wendy Wainwright, Executive Assistant |
|-----------------------------|---------------------------------------|

Stuart Nechako Regional Hospital District

MEMO

To:

Chair Petersen and the Board of Directors

From: Date: John Illes, Treasurer November 23, 2017

Re:

Investment Policy Statement Adoption

This proposed policy mirrors the investment policy of the Regional District that was adopted on June 22, 2017.

Staff have been following this policy for both the Regional District of Bulkley-Nechako investments as well as the Stuart-Nechako Regional Hospital District. However, as these are separate organizations, with separate investment accounts, our investment advisors have asked that the Hospital Board provide them with an approved policy.

I would be pleased to answer any questions.

Recommendation:

(all/directors/majority)

- 1. That the memorandum from the Treasurer dated November 23 'Investment Policy Statement Adoption' be received;
- That the Stuart Nechako Regional Hospital Board approve the 'Investment Policy Statement' dated November 23, 2017.



Stuart-Nechako Regional Hospital District

POLICY SNRHD Investment Policy ADOPTED:

Stuart Nechako Regional Hospital District Investment Policy Statement

Purpose:

This Policy provides guidance to ensure that the investment of public funds is handled in a prudent manner with due care.

Scope:

This Policy applies to the investment of cash in all funds and reserves.

Policy Statement:

The investment of public money must reflect a conservative philosophy based on the following three prioritized objectives:

- 1. **Safety / Preservation of Capital** Minimizing the potential for loss of the investment principal by considering the credit risk of the issuer of the investment and diversifying the investment portfolio.
- 2. **Liquidity** Ensuring that the maturity dates of the investments match the operating cash requirements of the Hospital District and Northern Health so that investments do not have to be sold prior to maturity, minimizing the risk of capital loss. Liquidity is enhanced by holding a portion of the portfolio in cash and readily marketable short term investments.
- 3. **Maximization of Returns** -A significant amount of revenue is generated through investment earnings. The investment portfolio is designed with the objective of maximizing return subject to the criteria of preservation of capital and liquidity.

Principles:

1. All investments must be made in accordance with Section 183 of the Community Charter, which applies to all local governments in BC and reads as follows:

Money held by a municipality that is not immediately required may be invested or reinvested in one or more of the following:

- a) securities of the Municipal Finance Authority;
- b) pooled investment funds under section 16 of the Municipal Finance Authority Act:
- securities of Canada or of a province;
- d) securities guaranteed for principal and interest by Canada or by a province;
- e) securities of a municipality, regional district or greater board;
- f) investments guaranteed by a chartered bank;
- g) deposits in a savings institution, or non-equity or membership shares of a credit union;



- h) other investments specifically authorized under this or another Act.
- 2. Investments shall be made with judgment and care, which persons of prudence, discretion, and intelligence exercise in the management of their own affairs, not speculation, but for investment, considering the probable safety of their capital as well as the probable income to be derived. Investment officers acting in accordance with this investment policy and exercising due diligence will have the authority to undertake prudent investment transactions. All transactions to purchase investments require two authorizing signatures.
- 3. The prime investment objective of the investment program is to ensure the safety of principal. Therefore, investments shall be selected in a manner that seeks to ensure the preservation of capital. To attain this objective, the Hospital District will mitigate credit risk and interest rate risk as follows:
 - a) Credit Risk: The Hospital District will minimize credit risk, the risk of loss due to the failure of the security issue or backer, by:
 - Limiting investments to securities of high credit worthiness. As such, all securities
 must achieve a rating of better than or equivalent to "R-1 Low" (short term) or "A"
 (long term) as determined by Dominion Bond Rating Services (DBRS), or an
 equivalent rating service. BC and Alberta Credit Unions are rated R-1 Low and their
 investments are fully guaranteed by their respective Provinces. Investments in
 securities of institutions which are not rated can only be invested in with consent
 of the Board.
 - Diversifying the investment portfolio to minimize potential losses
 - b) Interest Rate Risk: The Hospital District will minimize interest rate risk, the risk that market values or yields will fall, by:
 - Structuring the investment portfolio so that securities mature to meet cash requirements for ongoing operations, thereby avoiding the need to sell securities prior to maturity
 - Investing operating funds primarily in shorter-term investments
- 4. The investment portfolio shall remain sufficiently liquid to meet all operating and reasonably anticipated cash flow requirements. Investments will be limited to ten years to the initial call dates. Investments of longer than ten years may be advantageous if the timing of cash needs has a long time horizon, however, would require the approval of the Board to purchase.
- 5. The Hospital District will attempt to diversify its investments by security type and institution. However, at times this will not be possible given the size of the investment portfolio. With the exception of securities issued and/or guaranteed by the Government of Canada, generally not more than 50% of the Hospital District total investment portfolio will be invested with any one issuer.



- 6. All investments will be in Canadian dollars unless approved by the Board.
- 7. A copy of this policy will be provided to investment dealers purchasing investments on behalf of the Hospital District
- 8. A report shall be prepared annually and presented to the Board, which identifies the investments held as at the prior December 31. The investment report will include:
 - a) A list of current holdings by investment type held at the end of the reporting period by cost and market value;
 - b) The investment term in days and rate of returns on matured investments;
 - c) A detailed listing of bonds held, including investment cost, market value, interest realized YTD and maturity value.

Dated November 23, 2017

Stuart-Nechako **Regional Hospital District**

Memo

Board Agenda - November 23, 2017

To:

Chair Petersen and the Board of Directors

From:

John Illes, Treasurer

Regarding: Completion Report - Lakes District Hospital

Attached is the financial completion report for the Lakes District Hospital.

The total project cost was \$53.973 million with the Hospital District's share (including the money received during the planning stage) of \$10.604 million.

I would be pleased to answer any questions.

Recommendation:

(all/directors/majority)

That the memorandum from the Treasurer, dated November 23, 2017 regarding the Lakes District Hospital Completion Report be received.



Northern Health – Finance Department 300 – 299 Victoria Street, Prince George, BC, V2L 5B8 (P) 250.565.2300 (F) 250.565.2833

October 17, 2017

John Illes Email: john.illes@rdbn.bc.ca Stuart-Nechako Regional Hospital District P.O. Box 820 Burns Lake, BC VOJ 1E0

Re: Project # N661370001 Hospital Replacement Lakes District Bylaw 43, 2012

Dear John:

This project is now complete. The table below is for your information.

| | Total | MOH | RHD |
|-------------------------------|-----------------|---------------------------|-----------------|
| Prior Claim Costs to date: | \$53,972,737.52 | 43,368,248.29 | 10,604,489.23 |
| Add: Equipment | \$0.00 | \$0.00 | \$0.00 |
| Add: New Construction Charges | \$35.82 | \$35.82 | ·\$0.00 |
| Current Project Costs to date | \$53,972,773.34 | \$43,368,284.11 | \$10,604,489.23 |
| • | | Less: Received - Planning | \$2,413,187.34 |
| | | Less: Previous Claims | \$8,191,301.89 |
| | | Amount This Claim | \$0.00 |

Thank you for your continued support. If you have any questions, please do not hesitate to contact our office.

Sincerely,

Deb Taylor, H.B.Comm, CGA

Regional Manager, Capital Accounting

Cc: Penny Anguish, COO, NI

Mike Hoefer, RD, Capital Planning and Support Services

Capital Services

Phone: (250) 565-2399 email: capital.services@northernheaith.ca

Stuart-Nechako Regional Hospital District

Memo

Board Agenda – November 23, 2017

To:

Chair Petersen and the Board of Directors

From:

John Illes Treasurer

Regarding: Northern Health Capital Status Reports September 30, 2017

Also attached are the following Northern Health capital status reports for the SNRHD for the first 2017/18 quarter ending September 30, 2017.

- Building Integrity
- Minor Capital < \$100,000 (Fiscal year 2017 ending March 31, 2017)
- Minor Capital < \$100,000 (Fiscal year 2018 ending March 31, 2018)

I would be pleased to answer any questions.

Recommendation:

(all/directors/majority)

That the memorandum from the Treasurer, dated November 23, 2017 regarding Northern Health Capital Spending Reports for the quarters ending September 30, 2017 be received.



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Northern Health: Finance Department 300-299 Victoria Street, Prince George, BC V2L 5B8 Telephone (250) 565-2300, Fax: (250) 565-2833, www.northernhealth.ca

October 3rd, 2017

Email: melany.deweerdt@rdbn.bc.ca

Melany de Weerdt Financial Administrator Stuart-Nechako Regional Hospital District P.O. Box 820 Burns Lake, BC VOJ 1E

RE: Second Quarter 2017/18 Capital Status Reports

Dear Ms. de Weerdt:

Thank you for your continued support.

Enclosed please find capital status reports for the second quarter of our 2017/2018 year for the Building Integrity and the Minor Capital Grant(s).

If you have any questions on the attached, please do not hesitate to contact our office.

Sincerely,

Lil Milani

A. Lil Milani Capital Accounting Coordinator



Period Date: September 07,2017

| | Fl | JNDING SOUR | CES | | | |
|----------|----------|--------------------|-----------------|-----------|------------------------|----------------------|
| МОН | RHD | Aux/ Foundation | Opening Cash | Total | Actual Expenditures | Committed (Spent) |
| \$36,000 | \$24,000 | | \$62,400 | \$122,400 | \$0 | \$58,240 |
| \$36,000 | \$24,000 | | \$62,400 | \$122,400 | \$0 | \$58,240 |
| | | | \$58,240 | \$58,240 | | |

Budget Total: Expense Total:

Variance:

BI - Building Integrity

\$36,000

\$24,000

\$4,160

\$64,160

Capital Expenditures

2017 BI - Building Integrity St. John Hospital N6617N0043 **Boiler Tube Replacement** Op In Prog \$58,240 \$58,240 Count:: 1 [sf to Op in Progress Total \$58,240 \$58,240 BI - Building Integrity Total \$58,240 \$58,240 'Approved' Count:: 0 Count:: Report Total \$58,240 \$58,240

'Approved' Count:: 0
'On Hold' Count:: 0
'Ordered' Count:: 0
'Completed' Count:: 0





Period Date: September 07,2017

| | FI | JNDING SOUR | CES | | | |
|----------|----------|--------------------|-----------------|-----------|------------------------|-------------------|
| MOH | RHD | Aux/ Foundation | Opening Cash | Total | Actual Expenditures | Committed (Spent) |
| \$36,000 | \$24,000 | | \$213,019 | \$273,019 | \$0 | \$56,862 |
| \$36,000 | \$24,000 | | \$213,019 | \$273,019 | \$0 | \$56,862 |

Budget Total: Expense Total:

\$56,862

\$56,862

Variance:

\$36,000

\$24,000

\$158,157

\$216,157

Capital Expenditures

2018

8) - Building Integrity

St. John Hospital Stuart Lake Hospital

N6618N0009 N6618N0027

Heater - Hot Water X2

Air Conditioner

Count::

2 l'af to Op in Progress Total

BI - Building Integrity

BI - Building Integrity Total

| \$45,297 | \$45,297 | |
|----------|----------|--|
| \$11,565 | \$11,565 | |
| \$56,862 | \$56,862 | |
| \$56,862 | \$56,862 | |
| \$56,862 | \$56,862 | |

'Approved' Count:: 'On Hold' Count::

0

0

0

0

Count::

Report Total

'Ordered' Count::

'Completed' Count::

Op in Prog

Op In Prog



Period Date: September 07,2017

| | Fl | JNDING SOUR | CES | | | |
|-----------|-----------|--------------------|-----------------|-----------|------------------------|-------------------|
| МОН | RHD | Aux/ Foundation | Opening Cash | Total | Actual Expenditures | Committed (Spent) |
| \$171,265 | \$172,920 | \$231,841 | \$169,948 | \$745,974 | \$550,544 | \$751,721 |
| \$171,265 | \$172,920 | \$231,841 | \$169,948 | \$745,974 | \$550,544 | \$751,721 |
| \$177,011 | \$172,920 | \$231,841 | \$169,948 | \$751,721 | | |

Variance:

Budget Total: Expense Total:

Minor Capital < \$100,000

\$(5,748)

\$(5,747)

Capital Expenditures

| 2017 | Minor Ca | pital < \$100,000 | | | | | | | |
|--------------------------|------------|---|-----------|-----------|-----------|-----------|-----------|--|--------------|
| St. John Hospital | N661730004 | Renovations to meet infection control stand | \$77,054 | | T | | \$77,054 | 77.054 | Complete |
| St. John Hospital | N661790040 | Cabinet - Biological Safety | | \$8,191 | | | \$8,191 | | Completed |
| St. John Hospital | N661790059 | Bed - GoBed X2 | | \$19,602 | | | \$19,602 | | Completed |
| St. John Hospital | N661790060 | Bed - Bariatric | | \$12,498 | | \$11,033 | \$23,531 | | Completed |
| St. John Hospital | N661790061 | Bed - Labour & Delivery | | \$23,660 | | , | \$23,660 | | Completed |
| St. John Hospital | N661790070 | Oven - Combi | | \$24,114 | | | \$24,114 | | Completed |
| St. John Hospital | N661790072 | Pumps - IV X4 | - | \$1,727 | \$22,000 | | \$23,727 | | Completed |
| St. John Hospital | N661790074 | Cart - Meal | | \$9,714 | 7=0,000 | | \$9,714 | | Completed |
| St. John Hospital | N661790098 | Pump - Syringe | | | \$7,959 | | \$7,959 | | Completed |
| St. John Hospital | N661790103 | Storage System | | | \$18,379 | | \$18,379 | | Completed |
| St. John Hospital | N661790104 | Evacuator - Smoke | | - | \$8,628 | | \$8,628 | | Completed |
| Stuart Lake Hospital | N661790041 | Cabinet - Biological Safety | | \$8,758 | 11,111 | | \$8,758 | | Completed |
| Stuart Lake Hospital | N661790049 | Scanner - Bladder | Mention | \$16,869 | | | \$16,869 | | Completed |
| Stuart Lake Hospital | N661790050 | ECG System | | \$19,278 | | 1 | \$19,278 | | Completed |
| Stuart Lake Hospital | N661790073 | Stainer - Stide | | \$19,353 | | | \$19,353 | | Completed |
| Stuart Lake Hospital | N661790090 | Ultrasound - Portable | | | \$59,526 | | \$59,526 | | Completed |
| Stuart Lake Hospital | N661790102 | Ventilator - Transport | \$20,839 | - | \$15,650 | | \$36,489 | | Completed |
| Lakes District Hospital | N661770001 | Decontamination Room, BLH | | | \$23,462 | | \$23,462 | | Completed |
| Lakes District Hospital | N661790051 | Call Station | | \$6,640 | | | \$6,640 | | Completed |
| Lakes District Hospital | N661790052 | Scanner - Bladder | | \$427 | \$17,613 | - | \$18,040 | | Completed |
| Lakes District Hospital | N661790088 | Stretcher - Trauma | \$9,176 | | | \$1,982 | \$11,158 | | Completed |
| Lakes District Hospital | N661790092 | Scrubber - Floor | \$6,193 | \$2,089 | | 7 1/2 2 2 | \$8,282 | | Completed |
| The Pines | N661760004 | Vocera | \$2,839 | | | \$17,190 | \$20,029 | | Completed |
| The Pines | N661790057 | Lift - Ceiling (X4) | \$32,124 | **** | | | \$32,124 | | Completed |
| The Pines | N661790087 | Lift - Sit to Stand | \$9,322 | | | | \$9,322 | | Completed |
| Stuart Nechako Manor | N661790077 | Scrubber - Floor | | | | \$10,374 | \$10,374 | | Completed |
| | | Count:: 26 Completed Total | \$157,547 | \$172,920 | \$173,217 | \$40,580 | \$544,264 | 544,264 | , |
| St. John Hospital | N6617N0004 | Pump Remediation (X12) | -1-3 | | \$55,000 | \$14,576 | \$69,576 | 69.576 | f to Operati |
| St. John Hospital | N6617N0016 | Software for 14/15 Pump Remediation | \$4,034 | | | | \$4,034 | | f to Operati |
| Stuart Lake Hospital | N6617N0005 | Pump Remediation (X8) | | | | \$45,448 | \$45,448 | The state of the s | f to Operati |
| Stuart Lake Hospitat | N6617N0029 | Flooring - Granit | \$770 | | | \$18,442 | \$19,212 | | f to Operat |
| Lakes District Hospital | N661790039 | PICC Line Placement Tracker | | | \$3,624 | | \$3,624 | | f to Operati |
| Lakes District Hospital | N6617N0023 | Automatic Door Opener | \$5,188 | | | | \$5,188 | | f to Operati |
| Fraser Lake D & T Centre | N6617N0002 | Pump Remediation (X3) | | | | \$14,775 | \$14,775 | | f to Operati |

| Fund | Budget | Reconciliation |
|------|---|----------------|
| | - A- / - | |

| Fund Budget Reconcil | liation | | | |
|-------------------------|-------------|-----------|--------------|------------------------|
| Capital Expendit | <u>ures</u> | | Year(s): 2 | 017 |
| Granisl e | N6617N0003 | Pump Re | mediation | (X1) |
| | | Count:: | 8 Ts | of to Operating Total |
| Lakes District Hospital | N661790043 | Equipme | nt (to be as | signed) |
| | | Count:: | 1 | Cancelled Total |
| Stuart Lake Hospital | N6617N0027 | Condition | er - Air | |
| | | Count:: | 1 lsf to 0 | Op In Progress Total |
| | | | Minor Cap | ital < \$100,000 Total |
| 'Approved' Co | iunt:: 0 | Cour | nt:: 36 | Report Total |

| | | | , vapie | |
|---------------------|----|---------|---------|-------|
| 'Approved' Count:: | 0 | Count:: | 36 | Repor |
| 'On Hold' Count:: | 0 | | | - |
| 'Ordered' Count:: | 0 | | | |
| 'Completed' Count:: | 26 | | | |

| | FL | INDING SOUR | CES | Period Date: | September 0 | 7.2017 | • |
|-----------|-----------|----------------------|--------------------------------|--------------|-----------------|---------|----------------|
| MOH | RHD | Aux/ | Opening | Total | | , | |
| | | Foundation /Other | Cash /Deferred /Internal | | Expenditures to | Date | File Status |
| \$7,447 | | | | \$7,447 | 7,447 | f to Op | eratic |
| \$17,439 | | \$58,624 | \$93,242 | \$169,304 | 169,304 | | |
| | | | | \$0 | | Cance | elled |
| | | | | \$0 | | | |
| \$2,025 | | | \$36,127 | \$38,152 | 31,764 | Op In | Prog |
| \$2,025 | | | \$36,127 | \$38,152 | 31,764 | | |
| \$177,011 | \$172,920 | \$231,841 | \$169,948 | \$751,721 | 745,333 |] | |
| \$177.011 | \$172.920 | \$231.841 | \$189 Q4R | \$751 721 | 745 222 | 1 | |





Period Date: September 07,2017

| | Fl | INDING SOUR | | | | |
|-----------|-----------|--------------------|-----------------|-----------|------------------------|-------------------|
| МОН | RHD | Aux/ Foundation | Opening Cash | Total | Actual Expenditures | Committed (Spent) |
| \$190,000 | \$177,000 | \$50,537 | \$13,449 | \$430,986 | \$171,260 | \$315,674 |
| \$190,000 | \$177,000 | \$50,537 | \$13,449 | \$430,986 | \$171,260 | \$315,674 |
| \$150,417 | \$101,271 | \$50,537 | \$13,449 | \$315,674 | | |

Variance:

Budget Total: Expense Total:

Minor Capital < \$100,000

\$39,583

\$75,729

\$115,312

Capital Expenditures

| 2018 | | pital < \$100, | 000 | | | | | | | | |
|--------------------------|------------|----------------|--------------|-------------------------|-----------|-----------|----------|----------|-----------|---------|--------------|
| St. John Hospital | N661890014 | Bed X2 | | | | \$19,457 | | | \$19,457 | 19,457 | Completed |
| St. John Hospital | N661890027 | ice Machi | ne | | | \$9,983 | | | \$9,983 | 9,983 | Completed |
| St. John Hospital | N661890040 | Colonosc | ope | | | \$2,849 | \$36,288 | | \$39,137 | 39,137 | Completed |
| St. John Hospital | N661890056 | Rack - W | asher | | | | \$5,382 | | \$5,382 | 5,382 | Completed |
| Stuart Lake Hospital | N661890012 | Bed - Gol | Bed X2 | | | \$19,457 | | | \$19,457 | | Completed |
| Stuart Nechako Manor | N661890013 | Chair - Ba | athing | | \$21 | | | \$13,449 | \$13,470 | | Completed |
| NI Community Services-SN | N661890035 | Refrigera | tor - Vacci | ne | \$6,592 | | | | \$6,592 | | Completed |
| | | Count:: | 7 | Completed Total | \$6,613 | \$51,746 | \$41,670 | \$13,449 | \$113,478 | 113,478 | |
| Lakes District Hospital | N661890066 | Scrubber | - Floor | | | \$8,429 | | | \$8,429 | | Approved |
| The Pines | N661890067 | Lift - Ceili | ng X9 | | \$79,010 | | | | \$79,010 | | Approved |
| | | Count:: | 2 | Approved Total | \$79,010 | \$8,429 | | | \$87,439 | | |
| St. John Hospital | N661890011 | Processo | r - Video 8 | Lightsource | | \$30,775 | | | \$30,775 | 30,775 | Ordered |
| St. John Hospital | N661890059 | Insufflator | | | | \$3,497 | \$3,000 | | \$6,497 | • | Ordered |
| Stuart Lake Hospital | N661890054 | Auto Load | ter | | | \$6,363 | | | \$6,363 | | Ordered |
| Stuart Lake Hospital | N661890060 | Mattress | - Alternatin | ng Pressure | | \$461 | \$5,867 | | \$6,328 | | Ordered |
| | | Count:: | 4 | Ordered Total | | \$41,096 | \$8,867 | | \$49,963 | 30,775 | ant release. |
| St. John Hospital | N6618N0021 | Walk-in C | ooler Syst | tern Upgrade | \$7,238 | | | | \$7,238 | 7,238 | f to Operati |
| The Pines | N6618N0019 | Replace a | exsisting st | torage tank | \$25,152 | | | | \$25,152 | | f to Operati |
| | | Count:: | 2 T | sf to Operating Total | \$32,390 | | | | \$32,390 | 32,390 | |
| St. John Hospital | N6618N0024 | C-Arm Re | pair | | \$29,707 | | | | \$29,707 | 27,007 | о Ор Іп Рго |
| Stuart Lake Hospital | N6618N0005 | Training - | - | for file N661790102) | \$2,696 | | | | \$2,696 | | Op In Pro |
| | | Count:: | 2 l'af to | Op in Progress Total | \$32,403 | | | | \$32,403 | 27,007 | |
| | | ı | Minor Cap | oltal < \$100,000 Total | \$150,417 | \$101,271 | \$50,637 | \$13,449 | \$315,674 | 203,651 | |
| 'Approved' Cou | nt:: 2 | Coun | t:: 17 | Report Total | \$150,417 | \$101,271 | \$50,537 | \$13,449 | \$315,674 | 203,651 | 1 |

O

'Ordered' Count::
'Completed' Count::

Project Detail

20

Created By: Leah Joseph on Thursday, September 28, 2017

Report Status as of: 9/25/2017

Project Activity for : Last Week (Last 7 Days)
Upcoming Tasks for: Next Week (Next 7 Days)

EXECUTIVE SUMMARY

PROJECT PROFILE

Identification

Name: Phone System Upgrade - St John Hospital (Vanderhoof)

Replacing legacy phone system in the 5t John Hospital

Number:

2824

Classification

Description:

Type: Technology Business Priority

Status: Project Planning Category IT 8
Priority: Refer to Evaluation Portfolio. ITS

Organization Owner Network & Telecom Project Owner Uhrich , James

Status Undate (Last Modified: 9/18/2017 5:50:50 PM)

Brianne Russell 9/18/2017 2 50:24 PM

Andrew completing the pre-field to send to Charter for a quote

approved on the 17/18 major capital plan

Health

 Name
 Value

 Cost
 Ø Not Set

 Overall Project Health
 Ø Not Set

 Quality
 Ø Not Set

 Scope
 Not Set

 Value

 Value

 Scope
 Not Set

Properties

Name Value Name Value

Project Purpose / Objective(s)
Replace the legacy phone system in the St John
Hospital
Hospital
Funding Type
Major Capital

Rational Existing system is end of life Cost Code (WIP) 58001.85.6618601

is the project time constrained?

No Project File Number N661860001

Planned Fiscal Year Start 17/18

SCHEDULE SUMMARY

Schedule Details

 Start Date:
 6/1/2015
 Baseline Start Date:
 Actual Effort To Data(hrs):
 22 00 Planned Effort to Date(hrs):
 852,00

 End Date:
 12/1/2017
 Baseline End Date:
 % Complete:
 0 % Expected % Complete:
 75 %

Duration(days): 654 Baseline Duration(days):

Accomplishments

None for the selected period

Exceptions

None for the selected period

Upcoming Tasks

None for the selected period.

ISSUES SUMMARY

New Issues This Period

No new issues for selected period

STATUS UPDATE SUMMARY

No new Status update for selected period

Project Detail

Upcoming Tasks for: Next Week (Next 7 Days)

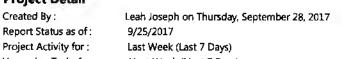
PROJECT DETAIL

FINANCIAL

Financial Plan: Initial Financial Plan [Druft/Working Copy]

Year View: Flacal

| | Total | Grand | |
|-------------------|--------------|--------------|--|
| | 2016 | Total | |
| Funding | \$201,000.00 | \$201,000.00 | |
| Internal Cash | \$120,600.00 | \$120,600.00 | |
| RHD | \$80,400.00 | \$80,400.00 | |
| Budget | \$201,000.00 | \$201,000.00 | |
| Capital | \$201,000 00 | \$201,000,00 | |
| Computer Hardware | \$175,000.00 | \$175,000.00 | |
| Internal Labour | \$13,000.00 | \$13,000.00 | |
| Project Manager | \$11,400.00 | \$11,400.00 | |
| Travel Expenses | \$1,600.00 | \$1,600.00 | |
| | | | |



Stuart-Nechako Regional Hospital District

Memo

Board Agenda - November 23, 2017

To:

Chair Petersen and the Board of Directors

From:

John Illes, Treasurer

Regarding: Financial Statements - January 1, 2017 to September 30, 2017

Attached are the financial statements for the Stuart-Nechako Regional Hospital District for the year to date ending September 30, 2017.

At September 30, 2017 the SNRHD had a surplus of \$1,869,755, resulting primarily from the surplus carried forward from 2016 plus interest earned in the quarter and some of the planned budget items being deferred until 2018 (Ft. St. James Primary Care).

At September 30, 2017 there was \$1.9 million in cash and investments in our operating account and \$2.2 million in capital reserves. There is no debt outstanding at this time.

I would be pleased to answer any questions.

Recommendation:

(all/directors/majority)

That the memorandum from the Treasurer, dated November 23, 2017 regarding the September 30, 2017 Financial Statements be received.

Stuart-Nechako Regional Hosp. Dist. Income Statement As of September 30, 2017

Department* Consolidated Departments

| 4000 4010 4050 4100 4999 | Revenue Tax Requisitions Transfer from General Fund Grants in Lieu of Taxes Interest Income Surplus Carried Forward Revenue total | Current Month 0 0 2,221 2,968 0 5,189 | Total YTD 1,790,000 814,751 4,615 18,638 551,738 3,178,742 | YTD Budget 1,790,000 0 7,900 3,750 551,738 2,363,388 | Variance YTD 0 814.751 (3.285) 14.888 0 825.354 | Annual Budget 1,790,000 7,900 5,000 551,738 2,364,638 |
|--|--|---------------------------------------|---|--|---|---|
| | Expenses | | | | | |
| 5026 5031 5040 6048 5049 5061 5062 5063 5064 5065 5460 5470 | Global Minor Equipment Grents Major Project - FSJ Primery Care Building Integrity Vanderhoof Hospital Anesthetic Ma VHF & SS Telephone System Uppr CHR - Public Health, Reg Chronic CHR-Mental Health/HCC/Clinical D Cardiology Information System Medical Imagining/Radiology Echo Health Link North - Cemer Upgrad Bank charges & interest Administration & Audit Director's Remuneration & Travel | 0 | 177,000 0 24,000 66,768 0 77,099 29,514 0 86,709 19,053 27 11,925 3,141 | 178,108 800,000 24,000 130,000 105,200 77,099 45,548 59,694 73,106 19,132 0 13,500 7,500 | 1.108 800.000 0 63.232 105.200 0 16.034 59.694 (13.603) 79 (27) 1.575 4.359 | 178.108 800.000 24,000 130.000 105,200 77,099 45,548 59,694 73,106 19,132 0 18,000 |
| 5600 | Transfer to Capital Reserve | 0 | 814.751 | 814.751 | | 814.751 |
| | Total Expenses | 1.677 | 1.309.987 | 2,347,638 | 1.037.851 | 2.354.638 |
| | Net Income | 3,512 | 1,869,765 | 5,750 | 1,864,005 | 0 |



Stuart-Nechako Regional Hosp. Dist. Balance Sheet As of September 30, 2017

Department* Consolidated Departments

| Assets | Current Month | Prior Month | Prior Year |
|--|---|--|---|
| | The real of the real of | and the state of t | 822 |
| | | | 2,585,470 |
| | - CC TODA TODA (C) | | 1,538 |
| Accts Receivable - Municipal | 3,153 | 3,153 | 3,153 |
| Total Assets | \$4,079,902 | \$4,074,716 | \$2,590,983 |
| Liabilities Accounts Pavable - General | 2.000 | 2.000 | 2,000 |
| Due to Regional District | 15,066 | | 14,310 |
| | 814,751 | 814,751 | 0 |
| Total Liabilities | \$831,817 | \$830,143 | \$16,310 |
| Net Financial Position | \$3,248,085 | \$3,244,573 | \$2,574,673 |
| | Liabilities Accounts Payable - General Due to Regional District Due to Capital Reserve Fund Total Liabilities | Cash & Bank Accounts 7,704 Investments & Term Deposits 4,067,414 Investments - BL Hospital Replace 1,631 Accts Receivable - Municipal 3,153 Total Assets \$4,079,902 Liabilities Accounts Psyable - General 2,000 Due to Regional District 15,068 Due to Capital Reserve Fund 814,751 Total Liabilities \$831,817 | Cash & Bank Accounts 7,704 1,825,486 Investments & Term Deposits 4,067,414 2,244,448 Investments - BL Hospital Replace 1,631 1,629 Accts Receivable - Municipal 3,153 3,153 Total Assets \$4,079,902 \$4,074,716 Liabilities 2,000 2,000 Due to Regional District 15,066 13,392 Due to Capital Reserve Fund 814,751 814,751 Total Liabilities \$831,817 \$830,143 |





Board & Administration Office #600 - 299 Victoria Street, Prince George, BC V2L 588 Telephone: (250) 565-2922 www.northernhealth.ca

October 23, 2017

Chair Jerry Peterson Regional District of Bulkley Nechako Box 820, 37 3rd Avenue Burns Lake, BC VOJ 1E0

Dear Chair Peterson,

OCT 31 2017

ONAL DISTRICT OF
WILKLEY NECHANO

Re: UBCM Meeting September 26, 2017

Thank you for the opportunity to meet with you at UBCM in Vancouver. We appreciate the time you set aside to meet with us to discuss the areas of concern for the Bulkley Nechako Regional District.

We discussed the replacement of the Fort St James Hospital. As you are aware, Northem Health has submitted a concept plan to the Ministry of Health. In partnership with the Fort St James Primary Care Society, Northern Health has proceeded with a procurement process for leased space for the primary care clinic and community services. Commercial negotiations are currently underway with the owner. We are also anticipating that Northern Health will need to revise the concept plan for the Hospital to include options for both a phased redevelopment approach and the potential for modular development. This work will begin in November 2017 unless otherwise directed by the Ministry of Health.

We also discussed access to senior's health care and the gap in assisted living. As you are aware, we are in the progress of updating our projections regarding long term care bed needs across the region. We discussed this further with the executives of the northern Regional Hospital Districts at the October joint session between the RHDs and Northern Health. In addition, we are very supportive of and involved in the work underway in Vanderhoof to develop a prototype senior's housing development.

It was helpful to learn about some of the experiences in your area regarding access to youth and adult mental health services. We agree that access to services and the need to develop the skills and capacity of service providers in providing care to those living with mental health concerns continues to be a critical need. We had opportunity to discuss some of the work underway in the Lakes District area to improve both the quality and access to these services. We understand that Aaron Bond will be providing the municipality with an overview of the services available in the area.

Finally, we discussed the opioid crisis in the province and the initiatives underway in the North to address this important issue. Currently, there is an implementation team in the Northern Interior and work has focused on naloxone access and availability, access to opioid substitution therapy, ensuring reporting of overdose presentations in emergency departments, educating etaff and physicians regarding the opioid crisis and undertaking an anti-stigma campaign regarding people living with mental health and substance use challenges.



Thank you again for the opportunity to meet with you to discuss these concerns.

Sincerely,

Cathy Ulrich

President & Chief Executive Officer

Northern Health

cc. Colleen Nyce, Chair, Northern Health Board
Penny Anguish, Chief Operating Officer, Northern Interior
Mike Hoefer, Regional Director Capital Planning & Support Services
Aaron Bond, Director, Specialized Services Northern Interior
Marie Hunter, Health Service Administrator, Lakes District
April Hughes, Health Service Administrator, Omineca District







North West Regional Hospital District: Directors' Report

Meeting Date: Friday, August 18, 2017 at 11:30 am

Place: Regional District of Kitimat-Stikine, Board Room, Terrace, BC

The following octions were token at the August 18, 2017 Regular meeting of the North West Regional Hospital District Board.

In-Camera Meeting – no new items

Regular Meeting

No Delegations:

Correspondence:

G2. Letter from Linda Lupini, Executive Vice Preseident, PHSA and BCEHS. Senior management will attend the November 24, 2017 NWRHD Meeting.

G3. Memo from Ted Clarke, Vice President of Northern BC Helicopter Emergency Rescue Operations (HEROS). Request for letter of support.

Motion: That NWRHD write a letter of support for HEROS proposal to the provincial government to establish an independent Royal Commission to examine all aspects of prehospital care in BC, supported by a universal cast/benefit analysis study. (Director Pages/Director Christiansen) This support will be stated in the NWRHD UBCM information package.

G4. Letter from Ciro Panessa, COO,NHA. Bulkley Valley District Hospital's Mammography Screening Program. A new Mammography machine is going through the procurement process. The old machine has been tested and will continue in operation until the replacement arrives. There have been two meetings of the Breast Health Advisory Committee.

Sup H2. Verbal report from Director Pierre on the Office of the Seniors Advocate British Columbia.

- The results of the residential care survey will be made public September 15, 2017.
- A report of elder abuse is being worked on.
- Complaints about level of care have resulted in a tribunal with Northern Health and the Gitxsan.
- There is a rep from each village that is working with NH to improve services.
- The committee has not worked that well so there are plans for changes in September.
- A copy of the Summer 2017 newsletter was included in the agenda.





Bylaw 102 - NWRHD Capital Expenditure Bylaw - Fluoroscopy Room

1st and 2nd Reading – Director Cunningham/Director Beldessi 3rd Reading – Director Layton/Director Ramsey Adoption – Director Ramsey/Director Layton

Bylaw 103 - NWRHD Capital Expenditure Bylaw -Mills Memorial Phone System

1st and 2nd Reading – Director Lowry/ Director Cunningham
 3rd Reading – Director Christiansen/Director Lowry
 Adoption – Director Ramsey/Director Pages

New Business:

UBCM Meetings have been requested with RDKS. MOH, MOF and MOE

College of Physicians and Surgeons Changes:

Memo circulated by Director Cunningham. A copy will be attached with this report.

- Doctors that have been working in the region for many years are now being required to write exams or close their practices.
- The exam covers their specialty and GP topics. Many have not worked as GP's for years and would have to study for months for these exams.
- These physicians can work in other parts of the country without having to write these exams. We are at risk of losing northern doctors.
- We need to gather more information to ensure we are asking for the same thing as the Physicians are asking for.
- We need to understand the role of the College of Physicians and Surgeons and the Provinces role/influence related to these changes.
- What is the College's reasons for asking a Physician that has practiced for 18 years without complaints to now write exams?
- There is a need for common sense and grandfathering of some individuals.
- More information to be provided by Director Cunningham/Director Brain.

Motion: To gather information from the local physicians and write a letter of support for local doctors, asking the College to reconsider their changes. (Director Cunningham/Director Pages)

MOE has offered to come in the fall and has requested an October date. Decision made to not call a special meeting in October and to stick to the regular meeting schedule. MOE will be invited to attend in November 2017 or January 2018.

Next Meeting: November 24, 2017 Regular Meeting





Suite 300-4545 Lazelle Avenue, Terrace, BC V8G 4E1
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Email: nwrhd@rdks.bc.ca

UBCM 2017

North West Regional Hospital District

NUMBER ONE CAPITAL PRIORITY

Replacement of Mills Memorial Hospital A Trauma Center for the North

The North West Regional Hospital District looks forward to the replacement of Mills Memorial Hospital. In February 2017, an announcement was made that capital funding was set aside and operating funds were included in long term budgets.

It was encouraging to hear and read that all candidates and parties during the May 2017 election supported this project. Knowing the Concept Plan is completed at the Northern Health level and is awaiting Provincial permission to move into the Business Planning process is a positive step towards modern health care in the North.

Northern Service Gap

The replacement of Terrace's Mills Memorial Hospital is critical to reducing the service gap in the North. This service gap comes from the commonly held attitude that people in the North have chosen to live there and should not expect the same level of health services as urban centers. This needs to be balanced with the fact that it is the rural parts of this Province whose resources and industries produce a significant portion of the Province's wealth.

Reports have been prepared identifying the needs of the North and expressing a high level of concern over the number of individuals that die before they reach the level of care required to stabilize them. The north has been under criticism in the news for many years for having an "absolutely third class ambulance system".

Despite the best safety programs, increases in industrialization equates to increased risk for industrial type accidents. Hospitals in the region need to prepare for these associated risks. Without the rebuild of Mills Memorial Hospital a Level 3 Trauma Center will be impossible as the existing hospital is not capable of preforming the procedures required to be a full Level 3.

¹ A Population-Based Analysis of Injury-Related Deaths and Access to Trauma Care in Rural-Remote Northwest British Columbia Study in 2010, lead by Dr. Richard Simons, Medical Director Trauma Services at Vancouver Coastal Heath, The BC Coroners Service 2010 Annual Report.

² Vancouver Sun April 7, 2013



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Trauma Center. The old building has structural barriers which make renovations as costly as building a new hospital.

The BC Ambulance services only stations air ambulances in communities with a trauma center, as it requires its staff to start and end each shift at a base that provides specialized health services. A Level 3 Trauma Center in the north would open the door for the establishment of an air ambulance base.

In 2017 the BC Forestry Safety Ombudsman report on Helicopter Emergency Medical Services in BC pointed out areas in need of improvement including the need for a Level 3 Trauma Center in the north.

NWRHD supports Northern BC Helicopter Emergency Operations Society (HEROS) calling for a Royal Commission to examine all aspects of prehospital care in BC, supported by a universal cost/benefit analysis study. Both improvements to prehospital care along with higher levels of hospital care are needed in the Northwest.

We must be diligent to ensure that the replacement of Mills Memorial does not come at the cost of services to other parts of our region. Distances between communities means services must be available at multiple facilities. The addition of a CT Scan at the Bulkley Valley District Hospital is a welcomed upgrade in service.

Financial Information

The NWRHD Board has been very clear in its commitment to fund twenty percent of the Mills Memorial Replacement with the regional property tax levy. This project will require NWRHD to take on a significant amount of long term debt and raise property taxes. As a sign of this pledge NWRHD raised property taxes 48% in 2017 to ensure that it will be able to follow through with this commitment.

The 2017 tax levy increase has positioned NWRHD to increase reserve contributions and reduce long term borrowing costs on future projects. The total capital debt at the end of 2017 will be \$23.2 million and will rise to \$66.8 million at the completion of Mills Memorial. This will mean a 227% increase in debt payments.

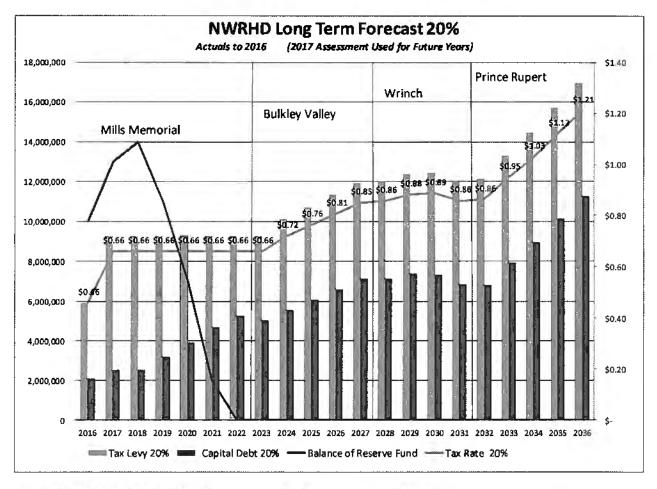
North West residents understand that these projects are essential to the North but as cost estimates rise for this project so does concerns about the ability to pay, especially from smaller more remote communities who will still have significant commutes to received health care in Terrace yet will pay the same rates. We cannot lose sight of the fact that there are four hospitals to replace.



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Long Term Forecast

NWRHD long term financial planning includes consideration for replacing Mills Memorial, Bulkley Valley District Hospital, Wrinch Memorial and the Prince Rupert Regional Hospital. As part of the long-term planning process a twenty-year forecast was prepared showing the impact of changing the capital contribution at 5% intervals. This exercise left the board discouraged and feeling that even the original 20% contribution was a huge ask of northern residents.



The NWRHD asks that the Province confirm that the Provincial Budget and Financial Plan included the NWRHD contributing 20% to the replacement of Mills Memorial or arrange a meeting to discuss the Provinces expectations.



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Need to Update the Hospital District Act

Currently the Hospital District Act and Hospital District Regulation are outdated, listing regional hospital districts that no longer exist and includes rates that do not reflect today's reality. The North West Regional Hospital District is not even listed. The Act does not address questions related to the funding formula. It is time for a major revision.

A major issue for all Regional Hospital Districts is the unwritten contribution expectation. RHDs have historically been expected to follow a standard, not clearly defined by principles or based on a formula to provide equitable solutions. There is a need for the Province to create a framework for all Regional Hospital District to operate from.

The standard expectation for RHDs to fund forty percent is known but is becoming increasingly unrealistic for areas with smaller population bases. The Province, through the Ministry of Health and Health Authorities, has a responsibility to provide quality health care to all BC residents. The Ministry of Health Cost-Sharing Review 2003 states, "the health authorities must be unfettered by cost sharing requirements in their ability to provide health care services regardless of the fiscal capacity of the region". How is this statement reconciled with the standard blanket expectation of 40% contributions by regional hospital districts, especially as hospital replacements are running in the hundreds of millions of dollars?

The NWRHD asks that the Ministry of Health update the current Hospital District Act to reflect the recommendations of the 2003 Cost Share Review and provide opportunity for all Regional Hospital Districts to participate in the process.

NWRHD and Who We Represent:

- Largest Hospital District Geographically
- Same boundaries as the entire Regional District of Kitimat-Stikine (RDKS) and North Coast Regional Regional District (NCRD), and the western portion of the Regional District of Bulkley-Nechako (RDBN).
- 28-member elected Board of Directors
- 25 municipalities and electoral areas, including the Nisga'a Nation.
- Population approximately 80,000
- Varied Population of workers, children and seniors, as well as a large transient workforce.
- Supports two Health Authority and 20 facilities, more facilities than any other RHD.



Dr. Samuel Alfred Smith, Orthopedic Surgeon

- Commenced as an Orthopedic Surgeon Prince Rupert Regional Hospital on April 1, 1999
- Dr. Smith was granted temporary registration for the practice of medicine restrict to
 Orthopaedic Surgery in Prince Rupert and the surrounding area.
- During the first year Dr. Smith was to take and pass the Medical Council of Canada Evaluating Examination (M.C.C.E. E.) to have his registration extended beyond one year. This exam was done and passed within the first year.
- Dr. Smith also had to take and pass the Medical Council of Canada Qualifying Examination Part I and Part II to become a Licentiate of the Medical Council of Canada. These exams were done and passed.
- In 2010 Dr. Smith wrote and successfully passed the Royal College of Physician & Surgeons of Canada Principles of Surgery examination.
- Dr. Smith was told by the College of Physicians & Surgeons of BC at the time of his registration
 that he would not need to write the Orthopedic Specialty exam. Now after 18 years of service
 in Northern BC he is being asked to write the specialty exam by April 2018 and if he does not
 write and pass the exam he will have 90 days after that date to close his practice.
- Dr. Smith is an exceptional Orthopedic Surgeon from the point of view of his technical expertise
 and his conscientious update of his skills even though he is practicing in a rural area and has an
 extremely high clinical load.
- He attends numerous amounts of Continuing Medical Education in Canada and the United States. He has been asked to speak at nation meetings and conferences especially in regards to his knowledge of ankle and foot surgery.
- Dr. Smith has and continues to deliver an invaluable service to the patients of the Prince Rupert
 and surrounding areas and it is a privilege to have him here in the community. He is extremely
 competent and a dedicated surgeon who takes pride in his daily work.
- He is a leader in medico legal issues and very approachable to help when a matter arises.
- The medical and anaesthesia staff at Prince Rupert Regional Hospital has a very high opinion of his technical expertise and he is always involved in assessing and trying to improve outcomes.
- He is always willing to share his knowledge and has an idealistic and caring attitude.
- He has a thoughtful and knowledgeable attitude towards resource allocation and the appropriate choice of investigations so as to reach a diagnosis without unnecessary pain and inconvenience.
- Dr. Smith plans on retiring in 5 years and having him forced to write the exams after 18 years of services should be reconsidered by the College of Physicians & Surgeons of BC





RECEIVED

OCT 1 9 2017
REGIONAL DISTRICT OF
BULKLEY NECHARO

NEWS RELEASE

For Immediate Release October 19, 2017

New board member, medical health officer: NH board meeting highlights

At the latest regular board meeting in Prince George, the Northern Health board of directors expressed thanks to staff and Northern Health partners for their dedication and compassion for evacuees from this summer's wildfire emergency.

Northern Health staff and physicians provided care for inpatients, long term care and assisted living residents, renal, maternity, and palliative care patients. Together with its physician partners, NH also provided primary care and community services for the evacuees who came to Quesnel and Prince George over the course of the summer.

"We are very grateful to our staff, physicians and community partners in Prince George and Quesnel for their support in this unprecedented response," said Colleen Nyce, Northern Health Board Chair. "Over the coming weeks, Northern Health will be reviewing the response to identify what went well, and where we might improve our emergency response plans and processes for the future."

The October meeting was the first for Nyce as chairperson since her appointment to the role in September, after serving as interim chair since the retirement of Dr. Charles Jago at the end of June. The board also welcomed its newest member, Frank Everitt, who was also appointed in September 2017.

"I am excited to participate on the board for an organization that is important to the health and well-being of all Northerners," said Everitt. "I look forward to the learning and the work that is ahead for me and my fellow board members."

Other highlights from the October 2017 meeting:

The latest Human Resources update to the Board shows that mental health continues to be one of the top reason for long term disability claims, along with musculoskeletal and connective tissue disorders. Awareness of mental health and proactive self-care continues to be a focus for the organization as Northern Health Workplace Health & Safety continues to develop resources for staff and physicians



aimed at removing stigma around mental health within the organization and fostering a psychological healthy and safe workplace.

The board welcomed Northern Health's newest Medical Health Officer, Dr. Jong Kim. Dr. Kim studied medicine at Queen's University, and completed his Masters of Science in Community Health Sciences at the University of Calgary. He started in the role of MHO for the Northeast health service delivery area in August 2017, joining Dr. Raina Fumerton in the Northwest, and Dr. Andrew Gray in the Northern Interior.

"Northern Health is very happy and fortunate to have this team of highly-skilled Public Health and Preventive Medicine specialists," said Chief Medical Health Officer Dr. Sandra Allison. "Our regional Medical Health Officers are very engaged with NH senior leadership and community leaders to effect change in local communities, and improve the overall health of Northerners."

The meeting concluded with a presentation from the United Way of Northern BC that shared the impact they have across the region as well as exploring ways for the United Way and Northern Health to partner on community services and initiatives in the future.

The next Northern Health board meeting will be held December 3 & 4, 2017 in Prince George.

Media Contact: NH media line - 250-961-7724

