STUART-NECHAKO REGIONAL HOSPITAL DISTRICT AGENDA THURSDAY, NOVEMBER 24, 2016

	SUPPLEMENTARY AGENDA	Receive
	AGENDA - November 24, 2016	Approve
PAGE NO.	MINUTES	<u>ACTION</u>
3-5	Stuart-Nechako Regional Hospital District Meeting Minutes – September 22, 2016	Adopt
	REPORTS	
6	Roxanne Shepherd, Treasurer - Meeting with Northern Health October 17, 2016	Receive
7-10	Roxanne Shepherd, Treasurer - Northern Health Capital Spending Reports, September 30, 2016	Receive
11-17	Roxanne Shepherd, Treasurer - Financial Statements - September 30, 2016	Receive
	CORRESPONDENCE	
18	Ministry of Health - SNRHD Request for <i>Hospital District Act</i> to Reflect Recommendations From the 2003 Ministry of Health Review	Receive
19-63	Northern Health - NH Board & Regional Hospital District Planning Session	Receive
64-65	Northern Health - Northern Health One Step Closer to Magnetic Resonance Imaging (MRI) Services in Terrace and Fort St. John	Receive
66-67	Northern Health - Access to Health Services Across the Regions Highlighted at Northern Health Board Meeting	Receive
68	Northern Health - Notice of Public Meeting - Northern Health Board Meeting - December 6, 2016	Receive
69	Northern Health - Media Advisory - Countdown Event at Haida Gwaii Hospital and Health Centre	Receive

2

Stuart-Nechako Regional Hospital District Agenda November 24, 2016 Page 2

VERBAL REPORTS

RECEIPT OF VERBAL REPORTS

SUPPLEMENTARY AGENDA

NEW BUSINESS

ADJOURNMENT

STUART-NECHAKO REGIONAL HOSPITAL DISTRICT AGENDA THURSDAY, NOVEMBER 24, 2016

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Stuart-Nechako Regional Hospital District Agenda November 24, 2016 Page 2

VERBAL REPORTS

RECEIPT OF VERBAL REPORTS

SUPPLEMENTARY AGENDA

NEW BUSINESS

ADJOURNMENT

STUART-NECHAKO REGIONAL HOSPITAL DISTRICT

MEETING MINUTES

THURSDAY, SEPTEMBER 22, 2016

PRESENT: Chairperson Jerry Petersen

Directors Eileen Benedict

Tom Greenaway Dwayne Lindstrom Thomas Liversidge Rob MacDougall Bill Miller

Bill Miller Mark Parker Gerry Thiessen

Director Absent Luke Strimbold, Village of Burns Lake

Alternate Director John Illes, Village of Burns Lake

Staff Melany de Weerdt, Chief Administrative Officer

Cheryl Anderson, Manager of Administrative Services

Roxanne Shepherd, Treasurer

Wendy Wainwright, Executive Assistant

CALL TO ORDER Chair Petersen called the meeting to order at 9:30 a.m.

AGENDA Moved by Director Miller

Seconded by Director Greenaway

SNRHD.2016-7-1 "That the Stuart-Nechako Regional Hospital District Agenda of

September 22, 2016 be approved."

(All/Directors/Majority) CARRIED UNANIMOUSLY

MINUTES

Stuart-Nechako Regional Hospital District Meeting Minutes – June 9, 2016 Moved by Director Benedict Seconded by Director Parker

SNRHD.2016-7-2 "That the minutes of the Stuart-Nechako Regional Hospital District

meeting of June 9, 2016 be adopted."

(All/Directors/Majority) CARRIED UNANIMOUSLY

DISCUSSION ITEM

Fort St. James Primary Care and Hospital Replacement

Melany de Weerdt, CAO provided an overview of the Fort St. James Primary Care and Hospital Replacement meeting with Northern Health September 20, 2016.

- Northern Health is pursuing an interim lease solution in Fort St. James to address primary care provider's space needs for both the physicians and the patients;
- The need is critical;
- Don't want the long term replacement of the hospital to halt;
- Fort St. James Hospital replacement is not currently a part of the Province's Capital Planning projects;

Stuart-Nechako Regional Hospital District Meeting Minutes September 22, 2016 Page 2

DISCUSSION ITEM (CONT'D)

Fort St. James Primary Care and Hospital Replacement (Cont'd)

- Northern Health can move forward with the interim lease solution as it is within its authority to implement and doesn't require additional government approvals;
- 40% funding consideration from the Stuart-Nechako Regional Hospital District was discussed to complete renovations to the lease location in order to accommodate the physicians, staff and patients;
- Northern Health expressed a desire for support in principle;
- Northern Health invited Ms. de Weerdt, and Chair Petersen has recommended that Director Greenaway sit on the Steering Committee which will be co-chaired by Northern Interior COO, Penny Anguish and Regional Director, Capital Planning and Support Services, Mike Hoefer
 - o The Steering Committee is being developed and initiated immediately to provide guidance on an upcoming lease procurement and tenant improvements.

Director MacDougall mentioned that he met with the Chair of the Fort St. James Primary Care Society on September 21, 2016 and the contract with the physicians in the community is being completed. There are six physicians and nine to eleven staff and they are currently working in a very poor facility not conducive to a healthy work environment. It is critical to maintain the level of care and physicians in the community and he requested the support of the SNRHD. Director Greenaway also emphasized the need to keep the physicians in the community.

Discussion took place regarding the costs to upgrade and lease a building to meet specific health dependent requirements. Concerns were brought forward regarding the potential funds for the interim lease building being taken from monies to be used for the future Fort St. James Hospital replacement project. The monies currently in the SNRHD reserves was discussed. Director MacDougall spoke to the critical need currently in Fort St. James in regard to providing a healthy environment for physicians and patients. The Fort St. James Hospital replacement project is a number of years away from being completed.

The Fort St. James Hospital replacement project is included in Northern Health's future capital plans but is not on the Provincial Capital Plans. Director Benedict spoke to her experience in regard to the Burns Lake Hospital Replacement Project and the importance of involving the community during the planning stages. The Fort St. James Primary Care Society is comprised of community members that are very much involved in the support and continued assistance in maintaining adequate health services in the Fort St. James community.

Director Thiessen spoke to the physician crisis currently being experienced in Vanderhoof and the need to keep physicians in the region. Fort St. James has identified a significant working solution to maintain a level of care in the community and support is needed.

Fort St. James Primary Care and Hospital Replacement

Moved by Director MacDougall Seconded by Alternate Director Illes

SNRHD.2016-7-3

"That the Stuart-Nechako Regional Hospital District Board of Directors approve Melany de Weerdt, Chief Administrative Officer and Director Tom Greenaway's appointment to the Fort St. James Primary Care and Hospital Replacement Steering Committee."

(All/Directors/Majority)

CARRIED UNANIMOUSLY

Stuart-Nechako Regional Hospital District Meeting Minutes September 22, 2016 Page 3

REPORT

SNRHD 2016 Final Budget Information for Fort St. James Hospital Replacement/Primary

Care Discussion

Moved by Director Miller

Seconded by Director MacDougall

SNRHD.2016-7-4

"That the Stuart-Nechako Regional Hospital District Board of Directors receive the report titled "SNRHD 2016 Final Budget - Amended May 26,

2016,"

CARRIED UNANIMOUSLY (All/Directors/Majority)

CORRESPONDENCE

Moved by Director Benedict Correspondence

Seconded by Alternate Director Illes

SNRHD.2016-7-5 "That the Stuart-Nechako Regional Hospital District Board of Directors

receive the following correspondence:

Comox Strathcona Regional Hospital District – Response from Minister

of Health - Hospital District Act - Cost Sharing Authority";

-Northern Health - \$1.59 Million Distributed Across the North to Support

Community Based HIV/HCV Initiatives."

(All/Directors/Majority) CARRIED UNANIMOUSLY

VERBAL REPORTS

Cops for Cancer in Fort

St. James

Director MacDougall mentioned that the Cops for Cancer was in Fort St. James on September 17, 2016. He spoke of the dedication of the riders and the gratitude from Fort St. James for the commitment to raising

funds for cancer research.

University Medical Student

in Vanderhoof

Director Thiessen commented that Vanderhoof hosted a University Medical Student and provided an opportunity to have dinner and

showcase the community.

Receipt of Verbal

Reports

Moved by Director Benedict

Seconded by Director Greenaway

SNRHD.2016-7-6 "That the verbal reports of the various Stuart-Nechako Regional Hospital

District Board of Directors be received."

(All/Directors/Majority) CARRIED UNANIMOUSLY

Moved by Director MacDougall ADJOURNMENT

Seconded by Director Greenaway

SNRHD.2016-7-7 "That the meeting be adjourned at 10:01 a.m."

> (All/Directors/Majority) CARRIED UNANIMOUSLY

Jerry Petersen, Chairperson Wendy Wainwright, Executive Assistant

Stuart-NechakoRegional Hospital District

Memo

November 15, 2016

Board Agenda - November 24, 2016

To:

Chair Petersen and the Board of Directors

From:

Roxanne Shepherd, Treasurer

Regarding: Meeting with Northern Health October 17, 2016

On October 17, 2016 Northern Health had its regular semi-annual capital planning meeting with the northern Regional Hospital Districts (RHDs). The following topics were discussed:

- 1. Progress on major capital projects
- 2. Progress on implementing the 2016/17 Capital Plan
- 3. Capital Planning for 2017/18
- 4. BC Emergency Health Services Update
- 5. Specialty Clinical services in the NE
- 6. College of Pharmacists regulatory changes affecting tele-pharmacy
- 7. Child Health
- 8. Primary Care Home and Interprofessional Teams

A copy of the presentation materials is available on the RDBN website under Board meetings and Agendas. A printed copy is available on request.

I would be pleased to answer any questions.

RShepherd

Recommendation:

(all/directors/majority)

That the memorandum from the Treasurer, dated November 14, 2016 regarding the October 17, 2016 Fall meeting with Northern Health be received.

Stuart-Nechako Regional Hospital District

Memo

November 15, 2016

Board Agenda - November 24, 2016

To:

Chair Petersen and the Board of Directors

From:

Roxanne Shepherd, Treasurer

Regarding: Northern Health Capital Spending Reports, September 30, 2016

Attached are the following Northern Health capital spending reports for the SNRHD for the quarter ending March 31, 2016.

- Building Integrity
- Minor Capital < \$100,000 (Fiscal year 2016 ending March 31, 2016)
- Minor Capital < \$100,000 (Fiscal year 2017 ending March 31, 2017)

I would be pleased to answer any questions.

Recommendation:

(all/directors/majority)

That the memorandum from the Treasurer, dated October 24, 2016 regarding Northern Health Capital Spending Reports for the quarter ending March 31, 2017 be received.



Period Date: September 08,2016

Minor Capital < \$100,000

\$47,990 \$180,000 \$93,674 \$47,990 \$180,000 \$93,674 **Budget Total:** \$39,732 \$180,000 \$93,674

RHD

FUNDING SOURCES

Opening Cash

\$138,901

\$138,901

\$138,901

Aux/ Foundation

Actual Expenditures Committed (Spent) \$480,565 \$341,217 \$452,306 \$460,565 \$341,217 \$452,306 \$452,308

Expense Total:

Variance:

\$8,258

MOH

\$8,259

Total

			Minor Car	oltai < \$100,000 Total	\$39,732	\$180,000	\$93,674	\$138,901	\$452,306	417,794	1
		Count:	2	Cancelled Total					\$0		
Lakes District Hospital	N681690134	Centrifu	ge - Refrige	rated					\$0		Cancelled
St. John Hospital	N661690041	IV Pump	Allocation	- SN				I	\$0		Cancelled
		Count::	5 T	of to Operating Total	\$15,530		1	\$61,046	\$76,577	76,577	j
Granisle	N661690070	Infusion	•	ļ				\$485	\$485		f to Operati
Fraser Lake D & T Centre	N661690069		Pumps (4)		\$1,941				\$1,941		f to Operati
Stuart Lake Hospital	N661690072		Pumps (10)	\$4,853				\$4,853		f to Operati
St. John Hospital	N8616N0001	Boller R						\$60,561	\$60,561		f to Operati
St. John Hospital	N661690071		Pumps (18)	\$8,736				\$8,736		f to Operati
			1					\$34,512	\$34,512		j
The Pines	N661690131	Count:	iling (X4)	Ordered Total				\$34,512	\$34,512	·	Ordered
			**	-ompound total	40-1241	4:40,000	400,014				J
www.t.toolen.highm	10000001	Count:	17	Completed Total	\$24,201	\$180,000	\$93,874	\$43,342	\$341,217	341,217	Completon
Stuart Nechako Manor	N661690057	Dishwas			φ3,0£4	+	4-,035	\$14,096	\$14,098	14,096	
Southside	N661690120	Table - i		•	\$3,524	₽1,70Z	\$4,699	45,013	\$8,223	8,223	Completed
Stuart Lake Hospital	N661690114	•	r - Unaging r - Imaging	7		\$1,782		\$9,549	\$11,331		Completed
Stuart Lake Hospital	N661690010		r - Chemisti			\$68,258		\$1,845	\$70,103		Completed
Stuart Lake Hospital Stuart Lake Hospital	N661690009		Jornol Defibrilator			\$23,197 \$25,143		+	\$23,197 \$25,143		Completed
Stuart Lake Hospital	N661640003 N661690009	Oven - 0	litioning unit			£22 407		\$17,124	\$17,124		Completed
St. John Hospital	N661690135		Ultrasound	` '			\$10,785	647.404	\$10,785		Completed
St. John Hospital	N661690133		Wheelchair	0.00			\$5,893		\$5,893		Completed
St. John Hospital	N661690118		Medical Tilt				\$5,289		\$5,289	5,289	
St. John Hospital	N661690106		ınd - Portab	le		\$53,601			\$53,601		Completed
St. John Hospital	N661690100		 Display 			\$6,040		\$728	\$6,768		Completed
St. John Hospital	N661690097	Cabinet	- Endoscop	18	\$3,952	\$1,980			\$5,932	5,932	Completed
St. John Hospital	N661690082	Cabinet	- Warming				\$5,580		\$5,580	5,580	Completed
St. John Hospital	N661690059	Life Pak	15				\$24,475		\$24,475	24,475	Completed
St. John Hospital	N881690058	Stress S	System				\$36,953		\$36,953	36,953	Completed
St. JOHN LINSPIRE	N661640053	Paging :	System		\$16,725				\$16,725	16,725	Completed
016 St. John Hospital											

Wednesday, September 21, 2016

Fund Budget Reconciliation

Capital Expenditures

'Approved' Count:: 0 Count:: 25 Report Total
'On Hold' Count:: 0
'Ordered' Count:: 1
'Completed' Count:: 17

	FL	INDING SOUR	CES	Period Date:	September 08,2016	
МОН	RHD	Aw/ Foundation /Other	Opening Cash /Deferred	Total	Expenditures to Date	File Status
\$39,732	\$180,000	\$93,674	\$138,901	\$452,306	417,794	



Period Date: September 08,2016

Actual Expenditures

\$101,238

\$101,238

Minor Capital < \$100,000

\$184,714 \$172,920 \$44,699 \$160,000 \$562,333 \$184,714 \$172,920 \$44,699 \$160,000 \$562,333 **Budget Total:** \$120,879 Expense Total: \$47,330 \$44,699 \$160,000 \$372,909

RHD

Total

Committed (Spent) \$372,909 \$372,909

Variance:

\$137,384

МОН

\$52,041 \$189,424

Opening Cash

FUNDING SOURCES

Aux/ Foundation

Capital Expenditure	<u>98</u>									
2017	Minor Co	nottal < \$100,000								
St. John Hospital	N661790040	Cabinet - Biolog	pical Safety		\$8,191			\$8,191	8,191	Completed
Stuart Lake Hospital	N881790041	Cabinet - Biolog	pical Safety		\$8,758			\$8,758		Completed
Stuart Lake Hospital	N661790049	Scanner - Blade	ter		\$16,869			\$16,889	16,869	Completed
Stuart Lake Hospital	N661790050	ECG System			\$19,278			\$19,278	19,276	Completed
Lakes District Hospital	N661770001	Decontaminatio	n Room, BLH			\$23,462		\$23,482	23,482	Completed
Lakes District Hospital	N661790051	Call Station			\$6,640			\$6,640	6,640	Completed
Lakes District Hospital	N661790052	Scanner - Blade	ier		\$427	\$17,613		\$18,040	18,040	Completed
		Count: 7	Completed Total		\$60,163	\$41,075		\$101,238	101,238	
St. John Hospital	N661790059	Bed - GoBed X	2		\$11,981			\$11,981		Ordered
St. John Hospital	N661790060	Bed - Barlatric			\$23,717			\$23,717		Ordered
St. John Hospital	N861790081	Bed - Labour &	Delivery		\$25,038			\$25,038		Ordered
The Pines	N661790057	Lift - Ceiling (X4	l)	\$35,639				\$35,639		Ordered
		Count: 4	Ordered Total	\$35,639	\$60,716			\$96,355		
St. John Hospital	N6817N0016	Software for 14/	15 Pump Remediation	\$4,034				\$4,034	4,034	f to Operation
Lakes District Hospital	N661790039	PICC Line Place	ement Tracker			\$3,624		\$3,624	3,624	f to Operation
		Count: 2	Tef to Operating Total	\$4,034		\$3,624		\$7,858	7,658	
Lakes District Hospital	N661790043	Equipment (to b	e assigned)					\$0		Cancelled
		Count: 1	Cancelled Total					\$0		
St. John Hospital	N6617N0004	Pump Remedia	tion (X12)				\$90,000	\$90,000		Op In Prog
Stuart Lake Hospital	N6617N0005	Pump Remedia	tion (X8)				\$50,000	\$50,000		Op In Proc
Fraser Lake D & T Centre	N6617N0002	Pump Remedia	tion (X3)				\$20,000	\$20,000	_	Op In Proc
Granisie	N6617N0003	Pump Remedia	tion (X1)	\$7,657				\$7,657		Op in Prog
		Count: 4 fal	to Op in Progress Total	\$7,657			\$160,000	\$167,657		
		Minor	Capital < \$100,000 Total	\$47,330	\$120,879	\$44,699	\$160,000	\$372,909	108,896]
'Approved' Cou	nt:: 0	Count::	16 Report Total	\$47,330	\$120,879	\$44,699	\$160,000	\$372,909	108,896	
'On Hold' Cou	nt:: 0				-					•

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

Wednesday, September 21, 2016

Stuart-Nechako **Regional Hospital District**

Memo

November 14, 2016

Board Agenda – November 24, 2016

To:

Chair Petersen and the Board of Directors

From:

Roxanne Shepherd. Treasurer

Regarding: Financial Statements – September 30, 2016

Attached are the financial statements for the Stuart-Nechako Regional Hospital District for the nine months ending September 30, 2016.

In the second and third quarter of 2016, the following payments were made to Northern Health:

Global Minor Equipment Grants	\$ 172,920
Building Integrity – FSJ Sprinkler System	\$ 273,573
Building Integrity	\$ 24,000
Integrated Community Clinical Information Systems	\$ 71,224

At September 30, 2016 the SNRHD had a net financial position of \$2,574,673, resulting primarily from the surplus carried forward from 2015 plus interest earned in 2016. There was \$3,166,846 in cash and investments, including \$1,365,445 in the capital reserve and \$1,538 remaining in a separate donation account that is committed for the Healing Garden at the Burns Lake Hospital.

There is no debt outstanding at this time.

I would be pleased to answer any questions.

Recommendation:

K Shepherd

(all/directors/majority)

That the memorandum from the Treasurer, dated November 14, 2016 regarding the September 30, 2016 Financial Statements be received.

Stuart-Nechako Regional Hosp. Dist. Income Statement As of September 30, 2016

Department* Consolidated Departments

	Revenue	Current Month	Total YTD	YTD Budget	Variance YTD	Annual Budget
4000	Tax Requisitions	0	1,790,001	1,790,000	1	1,790,000
4010	Transfer from General Fund	0	579,016	0	579.016	0
4019	Transfer from Capital Reserve	0	62,000	63,500	(1.500)	63,500
4050	Grants in Lieu of Taxes	0	6,373	8,000	(1.627)	8,000
4100	Interest Income	1,303	13,044	3,750	9.294	5,000
4999	Surplus Carried Forward	0	<u>535,510</u>	535,510	0	<u>535,510</u>
	Revenue total	1,303	2,985,944	2,400,760	585,184	2,402,010
	Expenses					
	•		4=0.000	470.000	_	4=0.000
5026	Global Minor Equipment Grants	Ü	172,920	172,920	0	172,920
5037	Building Integrity-FSJ Sprinkler Sys	Ü	273,573	340,000	66.427	340,000
5040	Building Integrity	0	24,000	24,000	0	24,000
5047	Vanderhoof Hospital Operating Ro	0	Ü	50,040	50.040	50,040
5048	Vanderhoof Hospital Anesthetic Ma	. 0	Ü	130,000	130.000	130,000
5049	VHF & FSJ Telephone System Up	Ō	Ü	91,440	91.440	91,440
5056	Burns Lake Hospital Construction	Ü	74 004	640,778	640.778	854,370
5060	Ingegrated Com Clinical Info Syste	Ü	71,224	71,224	0	71,224
5460	Bank charges & interest	3	67	40.750	(67)	47.000
5470	Administration & Audit	1,250	11,250	12,750	1.500	17,000
5471	Director's Remuneration & Travel	342	3,060	7,500	4.440	10,000
5476	Burns Lake Hospital Healing Garde	Ü	62,000	62,000	0	62,000
5500	Transfer to Capital Reserve	Ů.	62,000	570.040	(62.000)	570.046
5600	Transfer to Capital Reserve	0	579,016	579,016_	0	579,016
	Total Expenses	1.595	1.259.110	2.181.668	922.557	2.402.010
	Net Income	(292)	1,726,834	219,093	1,507,741	0

Stuart-Nechako Regional Hosp. Dist. Income Statement As of September 30, 2016

Department1 Capital Reserve Fund

	Revenue	Current Month	Total YTD	YTD Budget	Variance YTD	Annual Budget
4010	Transfer from General Fund	0	579,016	0	579.016	0
4100	Interest Income on Cap. Resv.	983	8,760	0	8.760	0
	Revenue total	983	587,776	0	587,776	0
	Expenses					
5500	Transfer to General Fund	0	62,000	0	(62,000)	0
	Total Expenses	0	62.000	0_	(62,000)	0
	Net Income	983	525,776	0_	525,776	0

Stuart-Nechako Regional Hosp. Dist. Income Statement As of September 30, 2016

Department2 General Fund

	Revenue	Current Month	Total YTD	YTD Budget	Variance YTD	Annual Budget
4000	Tax Requisitions	0	1,790,001	1,790,000	1	1,790,000
4019	Transfer from Capital Reserve	Ó	62,000	63,500	(1.500)	63,500
4050	Grants in Lieu of Taxes	0	6,373	8,000	(1.627)	8,000
4100	Interest Income	321	4,284	3,750	534	5,000
4999	Surplus Carried Forward	0	<u>535,510</u>	<u>535,510</u>	0	<u>535,510</u>
	Revenue total	321	2,398,168	2,400,760	(2,592)	2,402,010
	Expenses					
5026	Global Minor Equipment Grants	0	172,920	172,920	0	172,920
5037	Building Integrity-FSJ Sprinkler Sys	ŏ	273,573	340,000	66.427	340.000
5040	Building Integrity	ŏ	24.000	24,000	00.727	24.000
5047	Vanderhoof Hospital Operating Ro	Ö	0	50,040	50.040	50,040
5048	Vanderhoof Hospital Anesthetic Ma	Ö	Ö	130,000	130.000	130,000
5049	VHF & FSJ Telephone System Up	0	0	91,440	91.440	91,440
5056	Burns Lake Hospital Construction	0	0	640,778	640.778	854,370
5060	Ingegrated Com Clinical Info Syste	0	71,224	71,224	0	71,224
5460	Bank Charges & Interest	3	67	0	(67)	0
5470	Administration & Audit	1,250	11,250	12,750	1.500	17,000
5471	Director's Remuneration & Travel	342	3,060	7,500	4.440	10,000
5476	Burns Lake Hospital Healing Garde	0	62,000	62,000	0	62,000
5600	Transfer to Capital Reserve	0_	579,016	<u>579,016</u>	0	579,016_
	Total Expenses	1,595	1,197,110	2.181.668	984,557	2,402,010
	Net Income	(1,275)	1,201,058	219,093	981,965	0

Stuart-Nechako Regional Hosp. Dist. Balance Sheet As of September 30, 2016

Department* Consolidated Departments

	Assets	Current Month	Prior Month	Prior Year
1000	Cash & Bank Accounts	822	1,532,917	29,219
1020	Investments & Term Deposits	3,164,486	1,653,185	2,272,146
1021	Investments - BL Hospital Replace	1,538	1,536	63,220
1060	Accts Receivable - Municipal	3,153	3,153	3,200
	Total Assets	\$3,169,999	\$3,190,791	\$2,367,784
2100 2150 2300	Liabilities Accounts Payable - General Due to Regional District Due to Capital Reserve Fund Total Liabilities	2,000 14,310 579,016 \$595,326	2,000 34,810 579,016 \$615,826	2,000 14,274 0 \$16,27 4
	Net Financial Position	\$2,574,673	\$2,574,965	\$2,351,510

Stuart-Nechako Regional Hosp. Dist. Balance Sheet As of September 30, 2016

Department1 Capital Reserve Fund

	Assets	Current Month	Prior Month	Prior Year
1020	Reserve Investments	1,365,445	1,364,464	775,004
1021	Investments - BL Hospital Replace	1,538	1,536	63,220
	Total Assets	\$1,366,983	\$1,366,000	\$838,224
	Liabilities			

Stuart-Nechako Regional Hosp. Dist. Balance Sheet As of September 30, 2016

Department2 General Fund

	Assets	Current Month	Prior Month	Prior Year
1000	Cash & Bank Accounts	822	1,532,917	29,219
1020	Investments & Term Deposits	1,799,041	288,721	1,497,142
	Total Assets	\$1,799,864	\$1,821,638	\$1,526,361
2100 2150	Liabilities Accounts Payable - General Due to Regional District	2,000 14,310	2,000 34,810	2,000 14,274
	Total Liabilities	\$16,310	\$36,810	\$16,274
	Net Financial Position _	\$1,783,554	\$1,784,828	\$1,510,087



OCT 0 4 2016

1060908

Mr. Jerry Petersen Chair Stuart-Nechako Regional Hospital District PO Box 820 Burns Lake BC /V0J 1E0

Dear Mr. Petersen,

OCT 11 2016
REGIONAL LISTHICT OF
BULKLEY NECHAKO

Thank you for the letter of July 26, 2016, requesting that the *Hospital District Act* (HDA) be updated to reflect the recommendations from the 2003 Ministry of Health Review. I apologize for the delayed response.

The Ministry of Health will consider the recommendations from the 2003 Review and certainly consult with regional hospital districts the next time there is an opportunity to make amendments to the HDA.

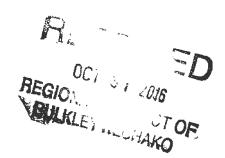
I appreciate the opportunity to respond.

Sincerely,

Terry Lake Minister

pc: Mr. Manjit Sidhu, Assistant Deputy Minister, Ministry of Health

Mr. Joel Palmer, Executive Director, Ministry of Health

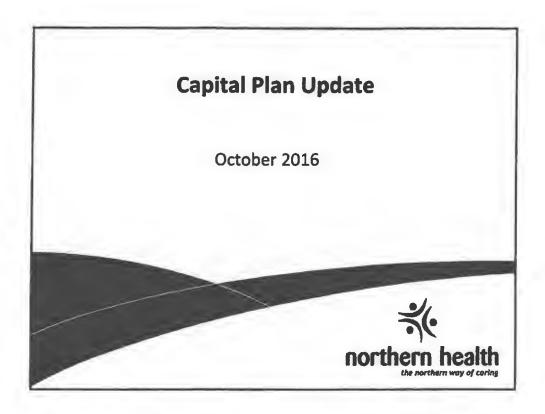


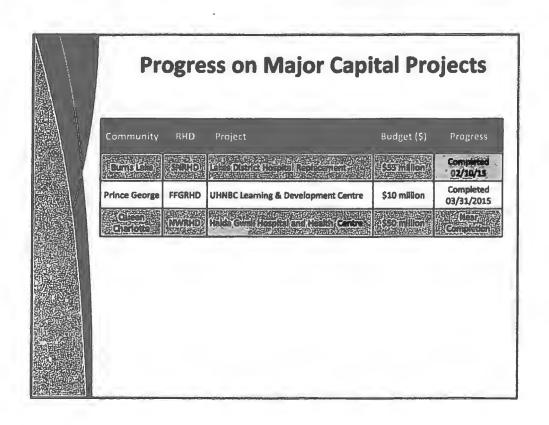
NH Board & Regional Hospital District Planning Session

October 17, 2016











Haida Gwaii Hospital and Health Centre

- Project value \$50,000,000
- Northwest RHD funding \$18,884,000
 - Range of acute and community services, 8 acute care beds plus 1 labour bed, and 8 complex care beds





Progress on Major Capital Projects

Haida Gwaii Hospital and Health Centre

- Substantial completion date: October 2016
- Estimated occupancy by patients and staff: mid-November 2016
- A completion ceremony was held on September 30, attended by members of the Royal family and dignitaries



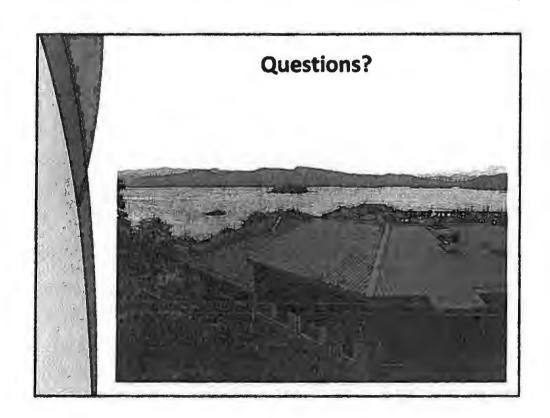


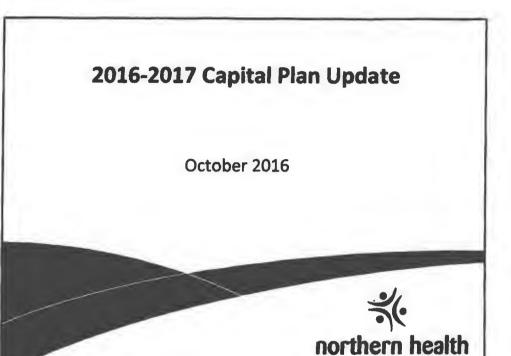
Progress on Major Capital Projects Haida Gwaii Hospital and Health Centre

- An official opening ceremony is planned for November 2016.
- Subsequent phases include:
 - remediation
 - · deconstruction of the existing hospital
 - · completion of public parking and site works.









Agenda

2016-17 Capital Projects Progress

- Major Projects <\$5 Million
- IM/IT Major Projects
- Carbon Neutral Capital Program Projects
- Major Equipment >\$100,000
- Minor Equipment <\$100,000

Major Projects <\$5 Million

Community	RHO	Project	Budget (\$)	Progress
Quesine!	CORHO	OPI Elevator Replacement	327,600	in Construction
Quesnel	CCRHD	GRB Emergency Generator Replacement	1,208,000	In Construction
Quesnel	CCRHD	GRB QUESST Renovation	754,000	In Construction
Mackenzie	FFGRHD	MCK Primary Care Unit	700,000	Preparing for Tender
Prince George	FFGRHD	UHN Waste Handling System	987,497	Complete
Dawson Creek	PRRHD	DCH Fluoroscopy Room Renovation	238,000	In Progress
Houston,	NWRHD	HDT Rooftop Air Handling System (Phase 1)	310,000	in Construction

Major Projects <\$5 Million Dunrovin Park Lodge Elevator Replacement

- Project value \$327,600
- Cariboo-Chilcotin RHD funding \$131,040
- Upgrading of both elevators in the dining area
- · Contract awarded to Venture Elevator
- To be completed this fiscal year



- Project value \$1,208,000
- Cariboo-Chilcotin RHD funding \$483,200
- Installing two new standby generators to replace the current single end-of-life standby generator
- Contract awarded to Apple Electric
- To be completed this fiscal year



Major Projects <\$5 Million GR Baker Memorial Hospital QUESST Renovation

- Project value \$754,000
- · Cariboo-Chilcotin RHD funding \$200,000
- Quesnel Unit for Emergency Short Stay Treatment (QUESST)
- Convert the 2NE former inpatient unit to accommodate the seclusion room and other minor renovations as needed to be CSA Z8000 compliant
- Moved into current fiscal year for reprocurement as it was over scope and budget
- Contract awarded to Vector Projects





- Project value \$700,000
- Fraser-Fort George RHD funding \$280,000
- Conversion of former BC Ambulance space to new Primary Care Clinic
- Contract not yet awarded
- To be completed this fiscal year

Major Projects <\$5 Million UHNBC Hospital Waste Handling System

- Project value is \$987,497
- Fraser-Fort George RHD funding is \$395,000
- Installation of refurbished waste handling system
- · Completed May 1, 2016







Dawson Creek Hospital Fluoroscopy Room Renovation

- Project value \$238,000
- Peace River RHD funding \$95,200
- Moving the Toshiba Ultimax from Fort St. John to Dawson Creek Hospital, replacing the existing end of support and service Ultimax room
- Contract not yet awarded
- Estimated completion: February 2017

Major Projects <\$5 Million

Houston Health Centre
New Rooftop Air Handling System

- Project value \$310,000 (Phase 1)
- Northwest RHD funding \$124,000
- Replacement of main original air handling unit
- Upgrade system to meet current CSA standards and improve environmental conditions to be implemented under Phase 2.
- Contract awarded to All Pro Heating & Plumbing
- Phase 1 to be completed this fiscal year





Community	RHD	Project	Budget (\$)	Progress
Regional	All	Community Health Record – Primary Care Clinics and Business Requirements	2,626,754	Complete
Regional	AI	Community Health Record – Public Health, Regional Chronic Disease and Inter-professional Teams	3,160,432	in Progress
Terrace	NWRHD	MMH Phone system	350,000	In Progress

IM/IT Major Projects

Community Health Record (Phase 1)

- Project value \$2,626,754
- RHD funding \$1M
- To expand the use of an Electronic Medical Record (EMR) system to all non-acute (i.e. non-hospital based) health services
- Implementation of Primary Care and Specialty Care Clinics
- Complete





- Project value \$3,160,432
- RHD funding \$1,260,000
- To enable the new clinical team-based care service model, as part of the Primary and Community Care initiative
- To custom develop an innovative community Electronic Medical Record (EMR) system, and then implement, support and continuously improve it
- Currently assessing the needs for a phase 3 to complete this project (beyond 2018)

IM/IT Major Projects Mills Memorial Hospital Phone System Upgrade

- Project value \$350,000
- Northwest RHD funding \$140,000
- Replacement of the phone system which serves the hospital and other NH facilities in Terrace
- To be completed next fiscal year



Community	RHD	Project	Budget (\$)	Progress
Quesnel	CCRHD	GR Baker Vertilation System & Boller Plant Upgrade	543,736	Contract Awarded
		UHNBC Boiler Plant Upgrade	724,084	Contract Awarded

 A provincial government initiative to achieve carbon neutrality in the public sector

CNCP Projects

GR Baker Memorial Hospital Ventilation System & Boiler Plant Upgrade

- Project value \$543,736
- Cariboo-Chilcotin RHD funding \$146,600
- Upgrades to building ventilation equipment, related controls and scheduling capability, and potential upgrades to boilers and their controls
- A thermal energy study has been completed.
- · Awarded to Canadian Western Mechanical Ltd.
- Estimated completion date: March 2017



CNCP Projects UHNBC Hospital Boiler Plant Upgrade

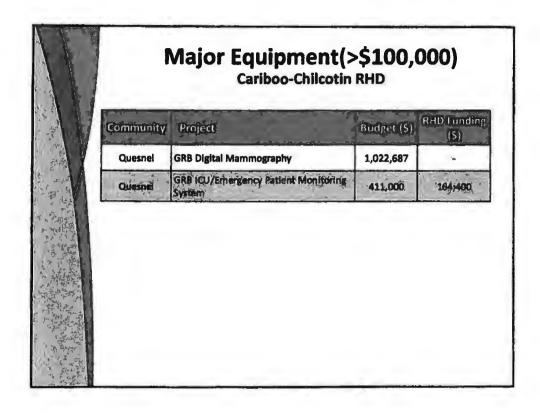
- Project value \$724,084
- Fraser-Fort George RHD funding \$250,809
- Upgrade results in reduced pumping energy and reduced heat loss to boiler room and surrounding areas
- Awarded to Canadian Engineered Products & Sales Ltd.
- Estimated completion date: March 2017

Major Equipment(>\$100,000) Northwest RHD

Community	Project	Budget (\$)	RHD Funding (\$)
Hazeten	WAI Automater (Medication Dispensing) Cabinet	108.000	43,200
Masset	MAH Automated Medication Dispensing Cabinet	142,000	56,800
Prince Rupert	PRICH Digital Marnimography	903,740	7 7 7 7 7
Stewart	STE & Ray Room	253,000	101,200
Terrace	MMH Digital Mammography	1,206,837	-
Jerrace.	MMHER/ ICU/ Mai/ Med-Surg Patient Monitoring System	367,081	146,832
Теггасе	MMH CT Scan – SPECT Discovery	1,200,000	480,000
Тегтасе	MMH Fixed MRI	2,839,030	1,135,612

N	Major Equipment(>\$100,000) Fraser-Fort George RHD			
Community	Project	Budget (\$)	RHD Fundin	
Prince George	UHN Immunohistochemistry Analyzer	130,250		
Prince George	UHN'd 501 Chemistry Analyzer	205,000	82,000	
Prince George	UHN Digital Mammography	1,655,042	-	
Prince George	UHN FMU/IGU/IMU Pattent Monitoring	829,000	331,600	
Prince George	UHN General & Echo Ultrasound Machine	114,000	45,600	
Prince George	UHN Laser System, Holmium	240,000	- 1	
Prince George	UHN Mass Spectrometer	300,000		
Prince George	UHN MRI Replacement	2,860,000	1,144,006	
Prince George	UHN Peds/DI/PAR/NEO Patient Monitoring System	1,435,000	574,000	

Major Equipment(>\$100,000) Stuart-Nechako RHD			
Community	Project	Budget (\$)	RHD Func (5)
Vanderhoof	SIH PAR Patient Monitoring	325,000	130,000
Vanderhoof	SJH Medical Imaging - C-arm Replacement	125,100	50,040
	-801 -801	which property of the second	med ned red f



Northern Rockies RHD	Major Equipment(>\$100,000) Northern Rockies RHD		
Community (Project Budget (\$)	HD Fund (S)		
Fort Heison Phili Pharmany Auto, Medication 135,000	51,000		

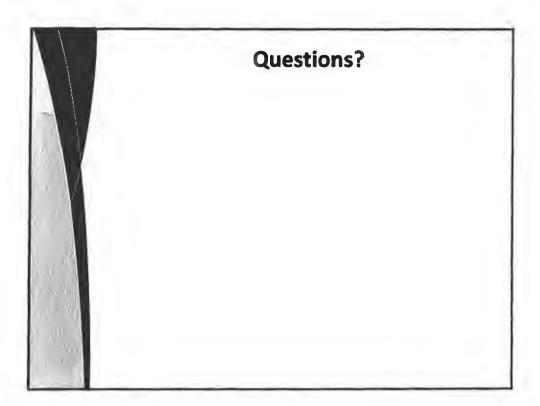
Major Equipment(>\$100,000) Peace River RHD

Community	Project	Budget(\$)	RHD Funding (\$)
Dewson Creek	DCH Digital Mammography	1,042,316	
Fort St. John	FSH Fixed MRI	2,602,838	1,040,802

Minor Capital (<\$100,000)

Minor Capital Allocations	Total Funding (\$)
Northwest HD:	Parts
Fraser-Fort George RHD	2,983,803
Sour e Nechalio RAD	432/6347 -
Cariboo-Chilcotin RHD	470,571
Northern Rockies RHD	180,457
Peace River RHD	1,417,999
Regional initiatives	150,000
Fleet-Regional	290,000

*206 +10%
2017-Inflation





Agenda

- 2017-18 Capital Planning
 - Proposed Priority Investments >\$5M
 - Major Projects <\$5M
 - IM/IT Major Projects
 - Major Equipment > \$100,000
- VFA Data
- Master Planning Update
- Project Lifecycle
- Project Scheduling & Budgeting
- Standards Affecting Northern Health Capital Projects

Priority Investments (>\$5 Million)
Concept Plans Submitted to the Ministry

No on on rest.



* Proposed Budget is as submitted in the Concept Plan and error estimate is +/- 10%, 19 times out of 20. Budget will be refined when approval is given to proceed to Business Plan development.

bolo post of ser principles

Priority Investments (>\$5 Million)

Master Planning to Commence in Near Future

Community	RHD	Project	Proposed Budget (\$M
Prince George	FFGRHD	UHN Redevelopment	TBD
NE	NE	NE Residential Care Beds and/or Dementia Care Option	32.0
NW	NW	NW Residential Care Beds and/or Dementia Care Option	38 *
Fort Nelson	MRRHD	FNH Services Redevelopment	780
Smithers	NWRHD	BVH Hospital Replacement	TBD
Hazelton	NWRHD	WRI Hospital Replacement	TBĎ
Tumbler Ridge	PRRHD	THC D&T Replacement	TBD
NI NI	N.	Residential Care Beds and/or Dementia Care Option	50
Terrace	NWRHD	MMH Surgical Services	TBD
Regional	All	Safer Care (IM/TT)	TBD
NI	NI	Fraser Lake Health Centre	TBD

Order of magnitude costing based on early Planning (Residential/ Dementia care)
 +/- 20%. Budgets and project priorities subject to change and develop in the Master Planning process.

Priority Investments (>\$5 Million) Business Cases Submitted to Ministry Community RHD Project Proposed Budget (5M) Prince George FFGRHD UHN Interim Bed Solutions 8* Quesnel CCRHD GRB EN/ICU/DCS 202.

Major Projects (<\$5 Million) Rock order Proposed Community RHD Project Eudget (\$)* Houston NWHRD HDT Rooftop Air Handler Replacement (Phase 2) 705,000 UHMBC Electrical Upgrade 3,795,000 Prince George FFGRHD **Dawson Creek** PRRHD DCH Sterilization Dept. Renovation 1,324,000 Prince Goods UHNBC Security Camero System FIGRID 400,000 Terrace NWRHD MMH Chiller Replacement #2 and #3 260,000 Terrece MMH Hot Water Beller #3 260,000 NWRHD Prince George FFGRHD **UHNBC CNCP Project** 980,000 MAH Emergency Beds & Observation Room Massat NWRHD 950,000 McBride FFGRHD MCB Ventilation System 901,000 PIN Cafeteria Expansion 1,854,000 SHRHD **Burns Lake** UHNBC Maternity - OR FFGHRD 577,000 **Prince George** FFGHAD UHNBC Phoenix Outpatient Lab Reno 317,000 Prince George ...list continued on next slide * Budgets and project priorities subject to change

Major Projects (<\$5 Million)

Community	RHO	P/aject	Proposed Budget (S)
Fort St. John	FROM DE	TON Staff Personal Expension	370,000
Quesnel	CCRHD	GRB Kitchen Renovation	2,152,000
Smithers	NWHO:	BUE Niurse Call System	300,000
Prince George	FFGHRD	UHNBC Medical imaging- Vic Med Replacement	311,000
Smithers	NWITHO	SYDH Main Floor Expension	1,200,000
Prince George	FFGRHD	UHNBC Retrofit Electrical Panels Room	379,000
lütimat	NWRHD	KIT & MVL Vocera	278,000
Quesnel	CCRHD	GRB Parking Lot	576,000
Terrace	NWHRD	TVL Nurse Call System	270,000
Тегтаса	NWRHD	MMH Service & OR Patient Elevator	231,000
Prince Rupert	NWRHD	PRRH Medical Treveyor (Supply Lift) System Replace/Upgrade	150,000
Prince Rupert	NWRHD	PRRH - ER Triage Renovation	100,000

...list continued on next slide

Major Projects (<\$5 Million)

Community	400	Project	Proposed Bodget (\$)	
Atlin	MWRHD	ATL Nursing Station Replacement	2,100,000	
Terrace	NWRHD	MMH Parking Lot Upgrade	900,000	
Terrace,	NW RHD	NR(H Sprinkler System)	830,000	
Smithers	NWRHD	BUL Solarium Project	250,000	
Kitimat	NWITHD	KIT Loundry Washers	155,000	
Kitimat	NWRHD	KIT Chiller Replacement	400,000	
Kitimat	NWRHD	KIT Steam Generator	100,000	
Prince Rupert	NWRHD	PRRH Air Handling Units	591,000	

* Budgets and project priorities subject to change

^{*} Budgets and project priorities subject to change

IM/IT Major Projects

Community	(RHD)	Groject	Proposed Budget (5)*
Regional	Al	Community (leafth Records (F) see 2)	3,150,400
Теттасе	NWRHD	MMH Phone System Upgrade	350,000
Regional	All	Community Health Records (Phase 3)	1,200,000
Regional	All	Cerner Code & Hardware Upgrade	4,521,072
Regional	All	Phone Systems Upgrades**	3,055,000
Regional	All	Cardiology Information System	1,220,400
Regional	All	Medical imaging/Nediology Echo PACS	3,435,700
Regional	All	EDIS	3,260,000
Regional.	All	Server Infrestructure	250,000
Regional	All	Core Network Upgrade	340,000
Regional	All	Wireless Control System	500,000
Regional	All	Mobility Management	200,000

...list continued on next slide

* Budgets and project priorities subject to change

IM/IT Major Projects

Community	RHD	Project	Proposed Budget (\$)*
Regional	All	Natural Security	200,000
Regional	All	Clinical Media Management	900,000
Regional	· All	Workforce Timelseper	1,860,000

* Budgets and project priorities subject to change

Major Equipment (>\$100,000)

Community	RHD	Projects	Proposed Budget (\$)*
Prince Rupert	RUMHD	PRRH Filoroscopy Room	1,400,000
Fort St. John	PRRHD	FSH X-ray Rad Rex room 1 replacement	500,000
Quesnel	CCRHD	GRB GARM	208,000
Smithers	NWRHD	BVH Radiology Room #1	600,000
FortSt John	PRRHD	ISH Nuclear Medicine Spect CT Gamma Camera	1,750,000
Smithers	NWRHD	BVH CT suite	2,600,000
Vanderhoof	SHILLE	SIH GArm Replacement	125,100
Chetwynd	PRRHD	CGH Automated Medication Dispensing Cabinet	133,000
Prince Rupert	MWWHD.	PRAH Operating Room Boom System	120,000
Prince George	FFGRHD	UHNBC Rehab-ECU nurse call system	258,000
Delizion Creek	PRINTD'	DCH Automated Medication Dispensing Cabinet	123,000
1 Houston	NWRHD	HDT - Radiology Room	375,000

...list continued on next slide

Major Equipment (>\$100,000)

Community	community (HD) Project;		Proposed Budget (S)*
Prince Groups	FIGHTO	SWYS VENEZA A PROVINCE	202,900
Hudson's Hape	NWRHD	HHC Automated Medication Dispensing Cabinet	123,000
Smithers	HWAHD	BVH Anaesthetic Unik & S/5 Monitor	160,000
Quesnel	CCRHD	GRB Anesthesia System	155,000
Prince George	FFGRHO	UHINBC Automated Dispensing Cabinet Replacement	355,000
Smithers	NWRHD	BVH - Anaesthetic Unit #2	160,000
Quesnel	CORHD	GRB Automated Dispensing Cabinet Replacement	150,000
Terrace	NWRHD	MMH CT Suite	2,200,000
Quesnel'	CORHD	GRB Ultrasound Room 3	165,000
Prince George	FFGRHD	UHNBC Microbiology Blood Culture Analyzer	130,000
Prince George	FFGRHD	UHNBC Medical Imaging-Replacement of X-Ray Room	600,000

...list continued on next slide

^{*} Budgets and project priorities subject to change

^{*} Budgets and project priorities subject to change

Major Equipment (>\$100,000)

Community	RHD	Project	Proposed Budget (\$)
Prince George	FFGRHD	UitNBC Sone Mineral Denstomesry, replacement	122,000
Prince George	FFGRHD	UHNBC Pharmacy Fastpak Verifier	150,000
Prince George	FFEMHD	UHNBE Microbiology Vitak 2XL	152,000
Prince George	FFGRHD	UHNBC Sterile Processing Low Temp Sterilizer	140,000
Prince George	FFGRHD	UHNBC Interventional Radiology Room replacement	1,000,000
Prince George	FFGRHD	UHNBC Fluoroscopy Room replacement	700,000
Prince George	FFGRHD	UHNBC Hematology Autoimmuse Testing	260,000
Prince George	FFGRHD	UHNBC OR Video Towers Orthopedic	220,000
Prince George	FFGRHD.	UNNSC ON Video Towers General Surgery	565,000
Prince George	FFGRHD	UHNBC Histology Tissue Processor	163,000
Prince George	FFG. D	UHNBC Hawtieye Replacement	885,000

...list continued on next slide

Major Equipment (>\$100,000)

Community	RHD	Project	Proposed Budget (\$)*
Prince George	FFGRHD	UHNBC Siemens C-Arm Replacement	135,000
	FFERHO	UHNBC Food Services Cell System	206,000
Prince George	FFGRHD	UHNBC CO2 Laser (Surgical)	265,000
	FEERID!	UNBAchabuh Cover in Euslan en e	.u.(00)
Fraser Lake	SNRHD	FLC Carestream Quantum Radiography Room	500,000
الأرسالة ا	NVNHO	MMH Automated Medication Dispensing Cabinet	100/00
Valemount	FFGRHD	VHC Automated Medication Dispensing Cabinet	123,000
Prince Rûpert	NWRHD	PRRH Automated Medication Dispensing Cabinet	123,000
Stewart	NWRHD	STE Automated Medication Dispensing Cabinet	123,000

^{*} Budgets and project priorities subject to change

^{*} Budgets and project priorities subject to change

VFA Data

- 2016 will comprise the 5th of 5 years of assessments
- 2017 will be year one of the next 5 year cycle of assessments

Cariboo RHD							
	*********	The special section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a section in the section in the section in the section is a section in the section in the section in the section in the section is a section in the sec	Marson militi	As Assistantials	s of Sept		
Evilding	Community	रदा	Value [mijlions]	(millions)	Cons		
Dungsein Ports Lodge	Qualityal	0.23	25:01	5.89	屋前1		
Ounrovin Park Lodge Addition	Cuesnel	0.09	23.08	2.17	20		
Eleca flamsay Memorial Clinic	Quespel 200		2.45	0.56	1		
G R Baker Memorial Hospital	Quesnel	0.70	76.26	53.66	15		



Fraser Fort George RHD

As of Sept 28, 201

(In Idag)	Discovered by	10	Replacement Value (milions)	Acpairs/Renewal	Year Constructed
Mackenale Hospital	Mackenzie	D.OF	16.94	21.24	100
Storage	Mackenzie	0.25	0.57	0.14	1995
Meliride and Objiries Heapter	Marks	0.64	12.16	533	1963
Alward Plece*	Prince George	0.38	20.82	7.91	1985
Aspen 1 Independent Living	Prince George	0.57	4.04	2!30	1965
Aspen 2 Independent Living	Prince George	0.52	3.79	1.96	1964
Duples Cottage independent Listing	Prince George	0.54	0.71	0.38	1355
Fourplex Cottage Independent Living	Prince George	0.65	1.19	0.77	1959
Gateriory Assisted Living	Prince George	0.06湿	29.20"	1.45	2009
Gatavay Residential Care Complex Care		0.00	45.78	0.17	2009
irte House	Prince George	0.14	5.74	0.81	2002
JG Mechanzia Family Practice Centra	Prince George	0.23	3.94	0.89	1996
Lourier Manor!	Prince George	0.16	7.24	116	2001
Pariside Intermediate Care Home	Prince George	0.28	12.65	3.53	1983
Project Perent North	Prince George	0.28	0.58	0.16	1975
Rainbow Intermediate Care Home	Prince George	0.46	7.68	3.57	1972
Spruce land	Prince George	0,66	9.18	6.08	1955
HHNBE	Prince George	0.45	264.61	119.30	1958
Valemount Health Centre!	Valemount	1.13	1.52	1.72	-1978

* 2016 assessment has not been finalized. Any data provided is from an assessment finalized in 2004

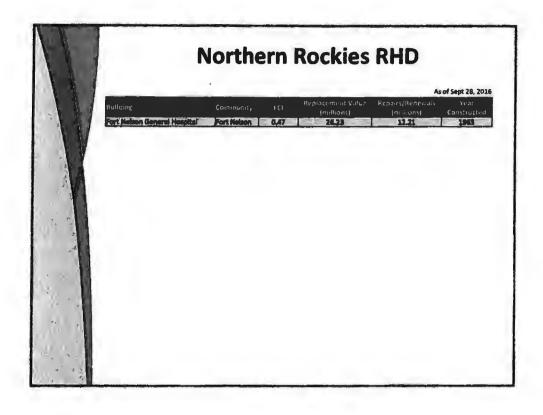
Stuart Nechako RHD

As of Sept 28, 201

					Of 36pt 26, 20
Bull ding	Community	FCI	Replacement Value (millions)	Heneirs/Renewat	i ear. Constructe
This Pines;	Burres Color	0,20	10.15	2.05	1992
Lales District Hospital Health Centre*	Burns Lake	1 .	55		2011
Murres Residence*	Surns Latie	0.28	0.67	0.15	1985
Southside Health and Wallness Cantre®	Burns Lake		1,47		1999
Stirert Lake Hospital	Fort St ² James	0.41	9.99	4.09	1972
Fraser Lake Community Health Centre	Fraser Lake	0.49	5.83	2.83	1979
Nurses Residence?	Manderhool	0.23	2.44	0.57	1935
Old Hospital - College of New Caledonia	Vanderhoof	0.47	6.81	3.22	1940
St John Hospital	Vanderhoof	0.63	25.49	14.02	1971
Stuart Nechako Manor	Vanderhoof	0.11	18.21	1.94	2004

* 2016 acceptment has not been finalized. Any data provided it from an acceptment finalized in 2005





Northwest RHD As of Sept 28, 2016 Community (03) 12 Tatche Street. 23 Tatche Street 215 Done Labor 1979 0.49 Dease Lake 0.33 0.34 0.11 1979 0.20 0.97 Dease Lake 3.10 ne Health Centre 0.35 8.92 634 0.73 0.73 17.34 frinch Memorial Hospital Hazelton 1977 net General Hospital part Efficie Einer Core les et 2208 and 2210 Dogwood o Otimat 0.23 15.94 70.26 0.77 16.01 2,48 0.44 1970 0.57 5.93 nerel Hespita Prince Rupert 11.27 rince Rupert Regional Hospital talde Gwell Hospital & Health C Prince Rupert 0.65 54,43 35.12 **50.00** 16.01 Queen Charlotte Smithers luikiey Lodge hulkiey Valley District Hosp itawart Health Centre 0.31 4.91 21.30 1972 0.71 29.94 12.04 2.93 0.28 Stewart 0.24 1993 0.17 1.66 TRITICO 7.25 \$8.97 0.56 cConnell Estates 0.08 .1959 24,65 Terrace 0.53 non Sistem Bouldential Montal H Тептасе 3.08 2000 telite Besser Medica Clinic 0.49 1.35 7.81 1984 17.95 erraceview Lodge Terrace * 2016 assessment has not been finalized. Any data provided is from an assessment finalized in 2004

Peace River RHD

			As of Sept 28, 2016		
Buildicg	Carrier - No.	řři	Replacement F Value (millions)	epairs/itenewa (milkons)	v. Constructed
Chetarrid General Höspitäl	Charterprod	0.70	17.78	12,49	1971
Dowson Creek & District Hospital Service	Dawson Creek	0.25	7.84	1.98	1996
Dervision Creek and District Hospital	Davison Creak	0.54	85.81.	E-46,59 FTD	1960
D.C. Mental Health Residence*	Dawson Creek	0.47	0.43	0.20	1968
Retary Munor Addition*	Develop Creek		9.90		2011
Rotary Manor*	Dawson Creek	0.23	9.80	2.25	2002
Fort St John Hospital	Fort St John	0.00	191:77	0.00	2012
Peace Villa Residential Care	Fort St John	0.00	38.87	0.00	2012

2016 accomment has not been finalized. Any data provided is from an assessment finalized in 2004

Master Planning Updates

NH has current Master Plans for Facility Redevelopment for the following facilities:

- Mills Memorial Hospital (2014)
- Dawson Creek District Hospital (2015)
- G. R. Baker Memorial Hospital (2015)
- Stuart Lake Hospital (2015)
- Tumbler Ridge Health Centre (2013)

Master Planning Updates

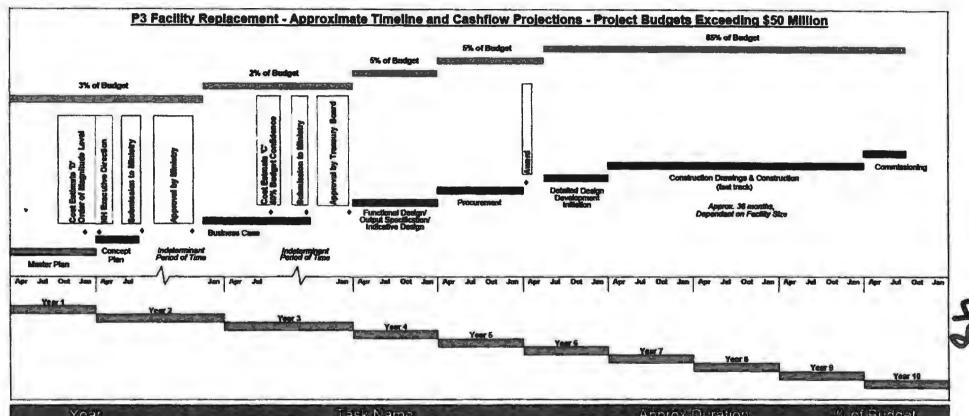
NH has submitted Concept Plans to the Ministry for Facility Redevelopment for the following facilities:

- Mills Memorial Hospital
- Dawson Creek District Hospital
- · G. R. Baker Memorial Hospital
- Stuart Lake Hospital

Project Lifecycle

- Procurement approvals and timing
- Costing Estimates
 - Drivers of project cost
 - · Evolution of cost with time
 - · Evolution of cost with project design

Project Scheduling & Budgeting



Year	Task Name	Approx Duration	% of Sudget	
Y1	Master Plan	12 months		
Y2	Concept Plan	6 months	3%	
	Approval by Ministry	Unknown		
Y2 to Y3	Business Case) 9 to 12 months		2%	
Y3	Approval by Treasury Board	Board Unknown		
Y4	Functional Design/Output Specification/Indicative Design	9 months	5%	
Y5	Procurement	12 months	5%	
Y6	Detailed Design Development Initiation 6 months Construction Drawings & Construction (fast track) 36-48 months+			
Y6 to Y9			85%	
Y10	Commissioning	6 months		

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- CSA Z8000 Canadian Health Care Facilities -Planning, Design and Construction
 - Draft available in 2011/12
 - · Ministry would not adopt in interim
 - Issued 2014, due for revision 2018-2020
 - Within CSA Z8000
 - · Heating and Ventilation, Fresh Air, recirculation
 - Electrical Standards such as generators, redundancy of power
 - Single Patient Rooms with private washrooms
 - Many other infection control issues

Building Standards Affecting Health Care Facilities

- CSA Z317.13 Infection Control During Construction
 - Issued 2003, Revised 2007, revised 2012
 - Especially applies to renovations in an active hospital
 - 107 pages
- British Columbia Building Codes
 - Current version, 2012, updated every 5 years
- WorkSafe BC
 - Ranges from overhead patient lifts and portable lifts to eye wash stations and flooring standards for non slip, non grounding



- BCCDC
 - BC Centre for Disease Control (BCCDC)
 - Provincial Infection Control Network of British Columbia (PicNET)
- Pharmacy Standards
 - USP797- issued 2004, 2 revisions, 1 pending revision(2017)

Other Standards Affecting Northern Health Capital Projects

- Nuclear Medicine radiation safety, shielding for X-rays, containment of radiopharmaceuticals
- Diagnostic Accreditation Program standards
 - Laboratory
 - Medical Imaging
 - · Nuclear Medicine
- College of Pharmacists



Update on Telepharmacies in Northern Health

Dr. Dana Cole Regional Director, Pharmacy Services



Background

- Telepharmacy Locations in NH Region:
 - McBride
 - Valemount
 - Hudson's Hope
 - Dease Lake
 - Masset
- In past, NH support to 3 locations
- Rural incentive offered for Pharmacare Benefits to support retail operations
- No incentive for First Nations non insured health benefits (NIHB)



- Pharmacy Technicians recognized as health professionals in 2011
- College of Pharmacists supported bridging programs to December 2015
- Telepharmacy Providers now required to employ Technicians
 - Compliance extension granted to December 2016
- Recruitment of Technicians challenging

Narcotic and Controlled Substance Concerns

- Federal regulations require direct handling by Pharmacists, Nurses, or Physicians
- College and Ministry supporting extension to include Technicians
- Ongoing discussions regarding access for remote communities

Actions to Date

- Ongoing communications with College regarding options
- Ongoing meetings with Ministry of Health regarding options
- Contingency service arrangement negotiated with community pharmacy for distance service



Growing Up Healthy in Northern BC

Report on Community Consultation 2016

Executive Summary

From Northern Health's Strategic Plan to 2021

Vision

Northern Health leads the way in promoting health and providing health services for Northern and rural populations.

Mission Statement

Through the efforts of dedicated staff and physicians, in partnership with communities and organizations, we provide exceptional health services for Northerners.

Values

Value statements guide decisions and actions.

We will succeed in our work through:

- Empathy Seeking to understand each individual's experience.
- Respect Accepting each person as a unique individual.
- Collaboration Working together to build partnerships.
- Innovation Seeking creative and practical solutions:

Priority 1: Healthy people in healthy communities

Northern Health will partner with communities to support people to live well and to prevent disease and injury.

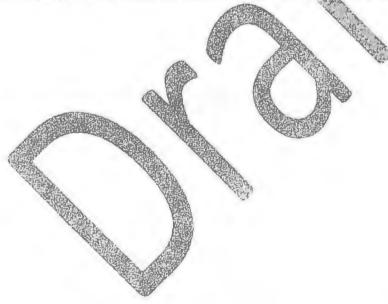
Objective 6

We will partner with communities and organizations to improve the health and wellbeing of Northern children and families.



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About the report

The Board of Directors of Northern Health is committed to engaging residents through region-wide consultations on important health topics. These topics have ranged widely over the years, and in 2016 the subject was *Growing Up Healthy in Northern BC*. It is clearly an important topic and addresses one of the objectives in the current Northern Health Strategic Plan. The consultation also aligned with the Chief Medical Health Officer's Health Status Report on Children's Health (available here).

Meetings were held in 18 communities, including open public sessions, stakeholder focus groups and discussions with youth 13 to 18 years old. There was also an online Thoughtexchange option for people to provide their ideas, and then rank each other's ideas by those which they most support.

There were 275 meeting participants and 599 who contributed online (with perhaps some overlap).

The basic questions posed in every setting were:

- 1. What does growing up healthy mean to you?
- 2. What is working in your community to support children and youth to grow up healthy?
- 3. What could be improved in your community to support children and youth to grow up healthy (what are the challenges)?

This report summarizes the ideas contributed across Northern BC. It also looks at implications for Northern Health, based on what was learned. A full report, with more detail and a brief summary of each community meeting is available by contacting Northern Health.

Key findings

Commonly heard themes for each of the consultation questions are briefly noted below.

Question 1: What does growing up healthy mean to you?

<u>Feeling loved, safe, valued and worthy:</u> A child should be secure in their existence in the world. This means having healthy attachment to one or more adults, feeling significant, being celebrated, experiencing love and acceptance (unconditionally), and being safe, physically and emotionally.

The necessities of life: Without the basic necessities, it's difficult for children and youth to experience the world as a secure place, one that invites them to engage and develop into a healthy adult. Those necessities include safe and decent housing, adequate nutritious food, access to quality health care, a good education, appropriate childcare when needed, and the ability to participate in activities in school and community.

<u>Access to nature and free play:</u> Children and youth benefit intellectually, emotionally and physically through experiencing the natural world and through unstructured, imaginative play.

<u>Participation in organized activities:</u> Enjoying opportunities to be active, to learn, to celebrate, to socialize...and to have fun are all important to growing up healthy. This means access to organized recreation and sports and participation in cultural activities (music, dance, theatre, arts etc).

<u>Becoming independent and responsible people:</u> A healthy young adult is a responsible person who can function independently and is physically and emotionally healthy. Health care, a good education, adult mentors and being trusted and given responsibility are all elements of fostering this.

Question 2: What is working in your community to support children and youth to grow up healthy?

<u>Outdoor recreation and access to nature:</u> The ability to experience fields, forests, rivers, lakes, the ocean, mountains and the abundant wildlife of Northern BC is clearly understood and appreciated.

Health care and community services: There is general appreciation for access to primary care (physicians and nurse practitioner led), local and regional hospital services - and the more specialized services such as paediatrics. There is also clear recognition of the value of an array of services for early childhood and a range of useful community-based programs; with Strong Start considered important in almost every location.

<u>Sports</u>, <u>recreation and cultural opportunities</u>: The benefits of participating in sports include physical exercise, team-building and social inclusion. Not every community has all the amenities (a pool for example), yet each has recreation options, and all have local governments, recreation staff, schools and volunteers behind the scenes - making sports and recreation viable. Recreation facilities (fields, pools, rinks, trails, gyms etc.) are appreciated and missed when not available.

Cultural activities range from place to place with music, dance, visual arts, theatre, film and festivals / events all being noted. A growing number of communities have access to Aboriginal cultural learning and experiences.

<u>Caring collaborative communities:</u> There is a sense across Northern BC that there is something unique about living in mostly rural and remote communities, based in a demanding yet wonderful natural setting. The qualities described are around resiliency to adapt to change and challenge, the coming together to do what needs to be done, and people knowing and caring for their neighbours.



Question 3: What could be improved in your community to support children and youth to grow up healthy (what are the challenges)?

Increase supports for mental health and substance use issues: There seems to be an increase in the need for mental health support for youth and children, while there is a chronic shortage of access to mental health assessments and treatment. Counselling and treatment support for substance use problems (often related to mental health issues) are also difficult to access in a timely appropriate manner - or at all.

Put simply, there is an acute need for increasing timely access to mental health, addictions and social workers, improved coordination at institutional and local levels, and access to specialized services. This is for young children through to young adults.

Address poverty: Children who live in poverty are at a disadvantage when it comes to growing up healthy - and many children in Northern BG live in poverty. Of course it is their families that struggle and the children experience the consequences. While each child and family have their own story, those disadvantages can include inadequate housing, not enough (and sometimes poor quality) food, an inability to participate in sports and cultural activities, poorer education involvement, a lack of adequate transportation, inability to access some family child supports, and living with the stigma of being seen as different from other children

Improve health services: Health services are an integral part of growing up healthy, from basic services to address illness and injury to those specifically in place for pregnancy, childhood and youth. Many issues were raised around things that could be improved related to health services.

Some of the most frequently heard were:

- Early childhood services including support for screening at 18 months and greater support for women who must travel to give birth;
- Primary care improvements should help with range of child and family needs;
- Many children suffer from inadequate dental assessments and treatment; and
- Youth participants in particular raised concerns about receiving timely and useful learning around sexuality and health...and being able to access services in a confidential and appropriate way when needed.

Implications

This report provides a summary and analysis of what Northern BC residents had to say about "Growing Up Healthy in Northern BC". It will be used by Northern Health's Board of Directors and management to inform planning and decisions. It may also be useful to local government, First Nations Health Authority, Divisions of Family Practice, health and social agencies, UNBC and others. While the report does not contain direct recommendations, implications of what was learned are noted here.



Increase collaboration

Many elements that help children grow up healthy are not directly health services or are activities that require collaboration between sectors and organizations.

Collaboration means getting those who have a stake in something to come together and find innovative, sustainable ways to improve things or make change. This can range from simply sharing information and understanding each other's roles to working together with money, people and other resources to build something, whether a service, a program, an event or a building.

Implications/considerations:

- What else can Northern Health bring to local community efforts to improve the health of children and youth?
- How can Northern Health enhance the community health partnerships it already has?
- What roles do Northern Health staff play at community tables? Could it be enhanced?
- What information on health status and successful programs (evidence-supported) can Northern Health share widely?
- What are the highest value collaborations (for child and youth health) with other institutions in Northern BC?

Northern Health's role in addressing poverty

Children must have their basic needs met in order to grow up healthy. Adequate housing, enough (good) food, access to recreation and cultural activities, quality childcare, full participation in school, dental care, and transportation were some needs noted.

Northern Health cannot address poverty in terms of increasing incomes for families or mitigating all the problems noted above. However, there are opportunities to play a role in addressing this - or to enhance existing work to support families.

Implications/considerations:

- Can Northern Health services be reviewed with a 'poverty-lens'? Access to medical services, outreach to families, social supports at discharge, transportation options, and links to First Nations communities are examples of work that could be re-thought.
- Can Primary Care Teams being created across the North look at their patient rosters and consider the diagnosis of 'poverty' when looking at supports and health care patients may need? (This is in practice elsewhere.)
- Can Northern Health use its mandate to gather population health information and to advocate for good health to more explicitly raise issues related to the impacts of poverty on children and families?
- What else can Northern Health do to work with communities to improve food security, especially where there are collaborative efforts already underway?

Mental health and wellness supports for youth

Support for young people for mental health and substance use is a high priority in many communities. This was also raised in youth-only meetings. It's recognized that this topic ranges from acute high-need supports in time of crisis or healing - to basic things like opportunities for recreation, inclusion in the community and better transportation.

Implications/considerations:

- Can Northern Health look more deeply into its mental health services and how to improve its capacity for counselling and specialized support?
- Will better coordination with local and regional partners improve supports to youth (MCFD, social services, Divisions of Family Practice, RCMP, and First Nations)?
- How can the Primary Care home be a stronger resource for youth with mental health or substance use problems?
- Does Northern Health have information or resources to support communities around improving recreation and transportation services for youth?

Focus on early childhood

While there were many comments acknowledging the terrific supports in place for the early years, there were also many describing what needs to be improved. It's clear that strong families are at the root of much childhood success, and that the inability to meet basic needs is a major stressor for some.

Implications/considerations:

- How can the recommendations in the Chief Medical Health Officers Health Status Report on Child Health and what was learned from this consultation be aligned?
- Can Northern Health instigate another phase of early childhood screening at 18 months, in order to identify and address developmental concerns earlier?
- Is it possible to increase resources for early childhood therapies (speech-language, physiotherapy, occupational therapy, etc.) or better coordinate resources with schools and other agencies?
- Are there additional elements to consider when implementing Primary Health Care teams in Northern BC (that improve coordination and support from pregnancy to six years old)?

Prepared by Gary Ockenden

withinsight



Glossary

General Abb	reviations or Terms
CMOIS	Community Medical Office Information System
CNCP	Carbon Neutral Capital Program
CSA	Canadian Standards Association
EDIS	Electronic Data Information Source
EMR	Electronic Medical Record
FCI	Facility Condition Index
IM	Information Management
IT	Information Technology
МОН	Ministry of Health
PACS	Picture Archiving and Communication System (for Medical Imaging)
QUESST	Quesnel Unit for Emergency Short Stay Treatment
VFA	Value Facility Assessment
Regional Hos	pital District Abbreviations
CCRHD	Cariboo Chilcotin Regional Hospital District
FFGRHD	Fraser-Fort George Regional Hospital District
NRRHD	Northern Rockies Regional Hospital District
NWRHD	Northwest Regional Hospital District
PRRHD	Peace River Regional Hospital District
SNRHD	Stuart-Nechako Regional Hospital District
Medical Abbi	
ст	Computerized Tomography
DI	Diagnostic Imaging
ER	Emergency Room
Fluoro	Fluoroscopy
FMU	Family Medicine Unit
ICU	Intensive Care Unit
IMU	Internal Medicine Unit
MRI	Magnetic Resonance Imagining
NEO	Neo-natai Care
PAR	Post Anesthetic Recovery
Peds	Paediatric Department
Pyxis	Brand name of Automatic Medication Dispensing Cabinet
SPD	Sterile Processing Department
SPECT	Single Positron Emission Computed Tomography



Glossary

Facilitie	s Abbreviations		
ACM	Acropolis Manor (Prince Rupert)	MCE	McConnell Estates (Terrace)
ALP	Alward Place (Prince George)	MCK	Mackenzie & District Hospital
ATL	Atlin Health Centre	ммн	Mills Memorial Hospital (Terrace)
BLH	Lakes District Hospital (Burns Lake)	MVL	Mountainview Lodge (Kitimat)
BUL	Bulkley Lodge (Smithers)	NPC	Peace Villa (Fort St. John)
BVH	Bulkley Valley District Hospital (Smithers)	PIC	Parkside (Prince George)
BWP	Birchwood Place (Terrace)	PIN	The Pines (Burns Lake)
CGH	Chetwynd General Hospital	PRRH	Prince Rupert Regional Hospital
DCH	Dawson Creek & District Hospital	QCI	Queen Charlotte Hospital
DPL	Dunrovin Park Lodge (Quesnel)	QUE	Avery Health Clinic (Quesnel)
FLC	Fraser Lake D&T Centre	RAI	Rainbow Lodge (Prince George)
FNH	Fort Nelson General Hospital	RMC	Rotary Manor (Dawson Creek)
FSH	Fort St. John Hospital	SHW	Southside Health and Wellness (Grassy Plains)
GHC	Granisle Community Health Centre	SJH	St. John Hospital (Vanderhoof)
GRB	GR Baker Memorial Hospital (Quesnel)	SNM_	Stuart Nechako Manor (Vanderhoof)
GTW	Gateway Lodge (Prince George)	STC	Stikine Health Centre (Dease Lake)
HDT	Houston D&T Centre	STE	Stewart Health Centre
ннс	Hudson's Hope D&T Centre	STH	Stuart Lake Hospital (Fort St. James)
нднн	Haida Gwaii Hospital and Health Centre (Queen Charlotte City)	SUR	Summit Residences (Prince Rupert)
IRI	Iris House (Prince George)	SVN	Seven Sisters (Terrace)
JUB	Jubilee Lodge (Prince George)	THC	Tumbler Ridge D&T Centre
KIT	Kitimat Hospital and Health Centre	TVL	Terraceview Lodge (Terrace)
LAM	Laurier Manor (Prince George)	UHN	University Hospital of Northern British Columbia
LGW	Legion Wing (Prince George)	VHC	Valemount Health Centre
МАН	Northern Haida Gwali Hospital (Masset)	WRI	Wrinch Memorial Hospital (Hazelton)
MCB	McBride & District Hospital		







NEWS RELEASE

For Immediate Release October 5, 2016

Northern Health one step closer to Magnetic Resonance Imaging (MRI) services in Terrace and Fort St John

The expansion of access to magnetic resonance imaging (MRI) in northern B.C. will grow significantly as the Request for Proposals (RFP) process has been completed and the tender awarded for three new MRIs as part of the Northern Health 10-year medical imaging strategy. Siemens has been awarded the tender and will be meeting with NH officials to develop the plan for installation and commissioning.

"We support Northern Health's commitment to bringing the best care closer to people's homes," said Health Minister Terry Lake. "Our government has made a commitment to help deliver this service for residents, and the successful completion of the RFP for the new MRIs will allow us to better serve the people of northern B.C."

The expansion of services began with a concept that was built on mobile MRI, but through the tender processes, and with a commitment from the Regional Hospital Districts (RHDs) and the Ministry of Health, ended with permanent machines. Mills Memorial Hospital in Terrace, B.C. and the Fort St. John Hospital and Health Centre in Fort St. John, B.C. will receive new MRIs, and University Hospital of Northern BC will replace their current MRI (the oldest in BC).

"We know that with our large region there is travel required for various procedures and tests, and being able to offer MRIs to people in the northwest and northeast we can reduce some of the travel burden," said Cathy Ulrich, Northern Health's chief executive officer and president. "The 10-year strategy for medical imaging will evolve over time as technology changes and this is a first step in enhanced medical imaging opportunities in our communities."

The total capital cost for all three MRIs and installation is \$8.3 million. Funding support for the MRIs is being provided by the Province of B.C, three Regional Hospital Districts (Fraser Fort George RHD, Peace River RHD, Northwest RHD), Northern Health and local foundations who choose to join the partnership.





"We are pleased with the addition of any new medical equipment that will improve access to service and reduce travel time for residents within the regional district" said Don McPherson, Chair of the Peace River Regional Hospital District.

"This investment will make it easier for people who require care to get that care close to home, and we are pleased to be part of it," said Harry Nyce, Chair of the Northwest Regional Hospital District.

An MRI is a valuable exam for medical professionals that use a magnetic field and pulses of radio wave energy to make pictures of organs and structures inside the body. Muscles, ligaments, cartilage, and other joint structures are often best seen with an MRI. In many cases MRI gives information about structures in the body that cannot be seen as well with an X-ray, ultrasound, or CT scan. Northern Health performs approximately 5,500 MRI scans each year. With increased clinical utilization for MRI scans, this regional strategy will equip the north for the growing demand of services through a closer to home model.

"The Fraser-Fort George Regional Hospital District is extremely proud of the role it plays in providing funding for important medical equipment for our region. The addition of a new MRI will go a long way to enhancing health services to residents in our region," says Murry Krause, Chair of the Fraser-Fort George Regional Hospital District.

The purchase of three MRI's is the first part of an overall medical imaging strategy to help improve access to medical imaging technology in northern B.C., and some of the equipment continues to be supported through regional health care and hospital foundations. The 10-year plan will address access to MRI, Ultrasound imaging and other modalities, and includes the implementation of the Provincial Breast Health Strategy.

"We're pleased to work with Northern Health, the Province of B.C., and with other foundations on the 10-year medical imaging strategy," said Judy Neiser, CEO of the Spirit of the North Healthcare Foundation. "Providing support will allow us to help residents across the region with access to services."

For further information on medical imaging in northern B.C. visit <u>northernhealth.ca</u> or <u>healthlinkbc.ca</u>.

Media Contact:

NH Media Line: 250-961-7724



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NEWS RELEASE

For Immediate Release October 19, 2016

Access to health services across the regions highlighted at Northern Health board meeting

New and improved services and resources undertaken by Northern Health and its partners to improve the delivery of health services were highlighted for the Board during their regular meeting in Prince George on October 19th, 2016. The board also heard about significant awards garnered by Northern health staff and physicians.

The expansion of access to magnetic resonance imaging (MRI) in northern B.C. will grow significantly over the next year as the Request for Proposals (RFP) process has been completed and the tender has been awarded for three new MRIs as part of the Northern Health 10-year medical imaging strategy. The MRIs will be located in Terrace, Fort St. John and Prince George (replacement for UHNBC).

"We know in our expansive region that sometimes travel is required. Establishing MRIs to serve people in the northwest and northeast can reduce some of the travel burden," states Dr. Charles Jago, Northern Health Board Chair. "This is a significant first step in enhanced medical imaging opportunities in our communities."

The Board also heard details regarding the visit by their Royal Highnesses The Duke and Duchess of Cambridge to Haida Gwaii on Friday, September 30th. The Duke and Duchess toured the new hospital and health centre and met with Northern Health physicians, health care workers, patients and their families.

Haida Gwaii Hospital and Health Centre – Xaayda Gwaay Ngaaysdll Naay will officuially open for service to the public in November and is the first facility in Northern Health that carries both an English name and a First Nations name.

An update on community consultations on 'Growing up Healthy in Northern BC' was also presented during the board meeting. Completed by the end of July, consultation results are being analyzed for a comprehensive report upcoming. There were two main approaches to listening to residents. The first approach included community meetings that were held across the north, including open public sessions, stakeholder focus groups and youth groups. The second approach was an electronic process where residents were also asked to



contribute ideas and select priorities through an innovative online process, using Thoughtexchange as the platform for that engagement.

A total (allowing for overlap) of 874 participants engaged in these consultations, providing their thoughts, feedback and ideas for supporting child health in the north. Some of the suggestions brought forth from the public included:

- Focus on traditional First Nations and Aboriginal culture
- Increase supports for mental health and substance use issues for children and youth
- Increase access to existing recreation and culture activities
- Reducing use of technology (or use too young)
- Address poverty and related issues (food security well noted)

"Prioritizing child health is one way we are working to improve the current and future care of northern B.C. residents," said Cathy Ulrich, Northern Health President & CEO. "We are grateful for the input of those people who live, work, learn and play in northern communities as we work together to support living well and preventing disease and injury."

Northern Health, the Cariboo Chilcotin Regional Hospital District, the Cariboo Regional District and Barkerville Gold Mines partnered in the establishment of the Wells Primary Care Clinic. The clinic will host a visiting Nurse Practitioner and is a great example of how community partnerships improve access to health care. The official opening occurred on September 20, 2016.

Award-winning Northern Health staff and physicians were hailed at the meeting:

- Barb Crook, Health Services Administrator, Mackenzie & District Hospital & Health Centre is this year's recipient of the Health Care Hero Gold Apple award.
- Dr. Nadine Caron, an Associate Professor in the Department of Surgery and Co-Director of the UBC Centre for Excellence in Indigenous Health, has received the Dr. Thomas Dignan Indigenous Health Award from the Royal College of Physicians and Surgeons.
- Dr. Becky Temple, Clinical Instructor, Department of Family Practice has been awarded the 2016 Clinical Faculty Award for Excellence in Community Practice Teaching by the Faculty of Medicine.

The next Northern Health Board Meetings will be held in Prince George on December 3 & 4.

Media Contact

Northern Health Media Line 1 (877) 961-7724







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NOTICE OF PUBLIC MEETING

November 1, 2016

Northern Health Board meeting – December 6, 2016

Northern Health's Board of Directors will hold its next regular meeting December 5 & 6, 2016 in Prince George, B.C.

The open (public) meeting will take place Tuesday, December 6 from 1:15 p.m. to 3:30 p.m. at Northern Health Regional Office 1411 Third Avenue, Prince George.

Northern Health welcomes presentations from interested individuals or parties. Speakers can submit a <u>request for a presentation</u> time slot by calling 250-565-2922 or via email at desa.chipman@northernhealth.ca

The deadline for submitting a request for presentation is 4:00 p.m., November 18, 2016

Future Public Board Meeting Dates

February 19-20, 2017: Mackenzie April 23-24, 2017: Dawson Creek June 11-12, 2017: Haida Gwaii December 3-4, 2017: Prince George

(Dates, times and/or venue subject to change on short notice).

If you have any questions regarding this notice please contact: Irma Trudel 250-649-7038 Irma.trudel@northernhealth.ca





MEDIA ADVISORY

November 3, 2016

Countdown event at Haida Gwaii Hospital and Health Centre

In preparation for the Grand Opening on November 24th (News Release and details upcoming), Northern Health invites you to attend a "Countdown to the Big Move" community event at the new Haida Gwaii Hospital and Health Centre.

Media and residents are invited to attend the speeches and enjoy complimentary refreshments. Tours of the new facility will be offered.

When:

Wednesday, November 9th, 2016

Time:

10:30 AM

Location:

Haida Gwaii Hospital and Health Centre - Xaayda Gwaay Ngaaysdll

Naay

3209 Oceanview Drive

Queen Charlotte

BC VOT 1SO

Media contact:

NH media line - 1 (877) 961-7724

