



Hospital District Board of Directors Meeting

Wednesday, December 11, 2024

Zoom/Board Room (Hybrid) – 3008 Fifth Avenue, Port Alberni, BC
Immediately following the Board of Directors Meeting

Regular Agenda

Watch the meeting live at <https://www.acrd.bc.ca/events/11-12-2024/>

Register to participate via Zoom Webinar at: https://acrd-bc-ca.zoom.us/webinar/register/WN_AApyws8QaO6m-iTg7uovQ#/registration

PAGE #

1. CALL TO ORDER

(immediately following the ACRD Board Meeting)

Recognition of Territories.

Notice to attendees and delegates that this meeting is being recorded and livestreamed to YouTube on the Regional District Website.

2. APPROVAL OF AGENDA

(motion to approve, including late items requires 2/3 majority vote)

3. DECLARATIONS

(conflict of interest)

4. ADOPTION OF MINUTES

a. **Board of Directors Meeting – November 13, 2024**

4-6

THAT the minutes of the Alberni-Clayoquot Regional Hospital District Board of Directors held on November 13, 2024 be adopted.

5. PETITIONS, DELEGATIONS & PRESENTATIONS (10-minute maximum)

6. CORRESPONDENCE FOR ACTION

7. CORRESPONDENCE FOR INFORMATION

a. **HEALTH EMERGENCY MANAGEMENT BC, FIRST NATIONS HEALTH AUTHORITY, ISLAND HEALTH, MÉTIS NATION BRITISH COLUMBIA**

7-9

Health Impacts of the Winter Season: Information for Community Health Partners and Local Governments.

b. **ISLAND HEALTH**

- Applications call for Youth Resilience Grants – a partnership of Island Health and Pacific Public Health Foundation. **10-11**
- Chief Medical Health Officer Releases Report on Increasing Harms from Psychoactive Substances **12-13**

THAT correspondence a-b be received for information.

8. REQUEST FOR DECISIONS & BYLAWS

- a. **Request for Decision**
2025-2029 Provisional Budget **14-18**

THAT the Alberni Clayoquot Regional Hospital District Board of Directors give first reading to the bylaw cited as “Alberni-Clayoquot Regional Hospital District 2025 to 2029 Provisional Budget No. 138”.

THAT the Alberni Clayoquot Regional Hospital District Board of Directors give second reading to the bylaw cited as “Alberni-Clayoquot Regional Hospital District 2025 to 2029 Provisional Budget No. 138”.

THAT the Alberni Clayoquot Regional Hospital District Board of Directors give third reading to the bylaw cited as “Alberni-Clayoquot Regional Hospital District 2025 to 2029 Provisional Budget No. 138”.

THAT the Alberni Clayoquot Regional Hospital District Board of Directors adopt the bylaw cited as “Alberni-Clayoquot Regional Hospital District 2025 to 2029 Provisional Budget No. 138”.

9. REPORTS

- a. Bamfield Health Centre – B. Beckett
- b. Alberni-Clayoquot Continuing Care Society – V. Siga
- c. West Coast Native Health Care Society – P. Cote
- d. Tofino General Hospital – West Coast Directors
- e. Alberni-Clayoquot Health Network – P. Cote/V Siga
- f. West Coast General Hospital – Alberni Valley Directors
- g. Other Reports

THAT the Regional Hospital Board of Directors receives reports a-g.

10. UNFINISHED BUSINESS

11. LATE BUSINESS

12. QUESTION PERIOD

Questions/Comments from the public:

- **Participating in Person in the Board Room**
- **Participating in the Zoom meeting**
- **Emailed to the ACRD at responses@acrd.bc.ca**

13. ADJOURN



Alberni-Clayoquot Regional Hospital District

MINUTES OF THE BOARD OF DIRECTORS MEETING HELD ON WEDNESDAY, NOVEMBER 13, 2024

Hybrid - Zoom/Board Room, 3008 Fifth Avenue, Port Alberni, BC

DIRECTORS

PRESENT:

Debbie Haggard, Chair, Councillor, City of Port Alberni
John Jack, Vice-Chairperson, Chief Councillor, Huu-ay-aht First Nations
Bob Beckett, Director, Electoral Area "A" (Bamfield)
Fred Boyko, Director, Electoral Area "B" (Beaufort)
Vaida Siga, Director, Electoral Area "C" (Long Beach)
Penny Cote, Director, Electoral Area "D" (Sproat Lake)
Susan Roth, Director, Electoral Area "E" (Beaver Creek)
Mike Sparrow, Director, Electoral Area "F" (Cherry Creek)
Sharie Minions, Mayor, City of Port Alberni
Marilyn McEwen, Mayor, District of Ucluelet
Tom Stere, Councillor, District of Tofino
Moriah Cootes, Councillor, Uchucklesaht Tribe Government
Kirsten Johnsen, Councillor, Toquaht Nation
Levana Mastrangelo, Executive Legislator, Yuułu?if?ath Government

STAFF PRESENT:

Cynthia Dick, General Manager of Administrative Services
Heather Zenner, Manager of Administrative Services
Jenny Brunn, General Manager of Administrative Services
Alex Dyer, Planning Manager
Janice Hill, Executive Assistant

The meeting can be viewed on the Alberni-Clayoquot Regional District website at:

<https://www.acrd.bc.ca/events/13-11-2024/>

1. CALL TO ORDER

The Chairperson called the meeting to order at 3:07 pm.

The Chairperson recognized this meeting is being held throughout the Nuu-chah-nulth territories.

The Chairperson reported this meeting is being recorded and livestreamed to YouTube on the Regional District website.

2. APPROVAL OF AGENDA

MOVED: Director Cote

SECONDED: Director Cootes

THAT the agenda be approved as circulated.

CARRIED

3. DECLARATIONS

4. ADOPTION OF MINUTES

a. Board of Directors Meeting – October 9, 2024

MOVED: Director Jack
SECONDED: Director Sparrow

THAT the minutes of the Alberni-Clayoquot Regional Hospital District meeting held on October 9, 2024 be adopted.

CARRIED

5. PETITIONS, DELEGATIONS & PRESENTATIONS

6. CORRESPONDENCE FOR ACTION

7. CORRESPONDENCE FOR INFORMATION

8. REQUEST FOR DECISIONS & BYLAWS

9. REPORTS

- a. Bamfield Health Centre – B. Beckett.** No report.
- b. Alberni-Clayoquot Continuing Care Society – V.Siga.** Changes coming for seniors care within continuing care facilities.
- c. West Coast Native Health Care Society – P. Cote.** Meeting is next Thursday.
- d. Tofino General Hospital – West Coast Directors.** Will be speaking next Monday at the Canada's Guidance on Alcohol and Health Forum panel with the Regional Medical Health Officer and Dr. Bonnie Henry. Will be speaking on local government policies that can be used to enact some of the harm reduction tools to minimize the impacts of alcohol, as this is the biggest health and safety issue in the region.
- e. Alberni-Clayoquot Health Network – P. Cote.** Contract has been secured for the Alberni-Clayoquot Health Network for the next three years.
- f. West Coast General Hospital – D. Haggard.** Next week will be attending a follow

up session to the Health Summit that was held in June.

g. Other Reports

MOVED: Director Cootes

SECONDED: Director Cote

THAT the Regional Hospital Board of Directors receives reports a-g.

CARRIED

10. UNFINISHED BUSINESS

11. LATE BUSINESS

12. QUESTION PERIOD

Questions/Comments from the public. The Manager of Administrative Services advised there were no questions or comments respecting an agenda topic from public:

- Participating in Person in the ACRD Board Room
- Participating in the Zoom webinar
- Submissions received by email at responses@acrd.bc.ca.

13. ADJOURN

MOVED: Director Cootes

SECONDED: Director Sparrow

THAT this meeting be adjourned at 3:12 pm.

CARRIED

Certified Correct:

Debbie Haggard,
Chairperson

Heather Zenner,
Manager of Administrative Services

HEALTH IMPACTS OF THE WINTER SEASON: INFORMATION FOR COMMUNITY HEALTH PARTNERS AND LOCAL GOVERNMENTS

The winter season increases the risk of adverse health outcome due to cold, snowfall, flooding and power outages during winter storms. The effects of long-term drought and wildfire also contribute to weakened trees, rockfalls, and landslides during winter rain events.

Who is most at risk during the winter season?

At-risk Groups	Cold	Power Outages	Flooding & Landslides
Those experiencing homelessness	❄️		❄️
Those living in marginal housing or experiencing energy poverty	❄️	❄️	
Those living on floodplains, beside streams, on alluvial fans, or at the base of burned slopes			❄️
Those who live alone or are socially isolated	❄️	❄️	❄️
Those with limited mobility	❄️	❄️	❄️
Those who use substances	❄️	❄️	❄️
Those who depend on electric medical devices		❄️	❄️
Those who spend a lot of time outdoors (working, recreating or driving)	❄️		❄️
Those with certain medical conditions (e.g., diabetes, peripheral neuropathy)	❄️		
Those taking certain medications (e.g., beta blockers)	❄️		

At-risk groups were identified from various sources, including [HealthLinkBC](#) and Prepared BC's [emergency guides and resources](#).

What kinds of health impacts might we see during the winter seasons?

- **Trenchfoot:** a non-freezing cold injury due to continuous exposure to cold and wet, resulting in tingling, itching, burning, or blistered feet that are prone to infection and require medical attention.
- **Frostbite:** occurs when exposed ears, nose, toes, or cheeks begin to freeze and results in tingling, stinging, or aching followed by numbness and change in skin texture (firm, waxy, white, gray or yellow in color). Frostbite should be evaluated by a medical professional.

- **Hypothermia:** occurs when body heat is lost faster than it can be replaced, and can occur quickly during cold, wind, rain, or sudden immersion, or much more gradually in homes kept below 18°C, especially in older adults. Hypothermia is a medical emergency.
- Unsheltered people who camp in marginal areas may be vulnerable to rapidly rising flood waters, collapsing banks, or windfall from damaged or drought-weakened trees. They are also at risk of [fire, burns](#), and CO poisoning when using fuel-burning devices to heat enclosures. You can reduce these risks by creating **outdoor designated camping areas** with basic services to bring people away from danger zones and into closer contact with support services.

In the event of a flood, the community should be aware of the many [hazards within the impact zone](#):

- Drownings, often when trying to cross moving water on foot or in vehicles;
- Electrical hazards when equipment inside or outside the home is submerged;
- Respiratory hazards, like mould and asbestos release, during remediation activities;
- Infections due to exposure of wounds to contaminated water, or if contaminated food crops, food products, or water are consumed. Advice for sorting food can be found in this [food salvaging guide](#).

How can we prepare communities for the winter season?

- Encourage community members to download the [WeatherCAN app](#) or your local emergency management app in order receive timely alerts.
- Establish winter shelters and warming centers in communities, promote the use of the [EmergencyMapBC](#) to find winter shelters and warming centers, and update the map with your own community's information.
- Encourage household preparedness using PreparedBC's collaboratively developed guides on [Severe Winter Weather and Storm Preparedness](#), [Flood Preparedness](#), and [Landslides](#).
- In regions with recent wildfire activity, advise community members on [Landslides and Flooding Risks due to Wildfire](#).
- Government of BC's [Carbon Monoxide resources and FAQs](#).
- In the event of a flood, the webpage on [Flooding and Your Health](#) and [What happens during flood](#) (PreparedBC) provide comprehensive information on:
 - Preparing households and making emergency plans
 - Evacuation information
 - Assessing and [disinfecting your drinking water](#) and water supply
 - Assessing [septic systems](#)
 - Assessing food supply and food safety
 - Dealing with stress and trauma
 - What to do [after a flood](#).

Where can we find resources for mental health and wellness?

- For those who live alone or are otherwise socially isolated, encourage people to sign up for the [Red Cross Friendly Calls Program](#), where community members are matched with a trained Red Cross volunteer to provide day-to-day connection, support, and informational resources.
- Island Health [Mental Health and Substance Use Services](#)
- FNHA [Mental Health and Wellness Supports](#)
- For those who identify as Métis:
 - Healthcare navigation support can be accessed via healthservicerequest@mnbc.ca
 - Mental Health navigation support can be accessed via mentalwellnesscoordination@mnbc.ca
 - For 24/7 Métis Crisis Line call 1-833-Metis-BC (1-833-638-4722)



Melissa Joe
Regional Manager, EPH – Vancouver Island Region
First Nations Health Authority



Ryan Kuhn
Director, HEM – Island Health
Health Emergency Management (HEMBC)



Leona Shaw
Executive Director.
Ministry of Environment, Climate Change, and Food
Security
Métis Nation British Columbia



Reka Gustafson
VP Population and Public Health &
Chief Medical Health Officer
Island Health

From: [Island Health Communication \[ISLH\]](#)
To: [Island Health Communication \[ISLH\]](#)
Subject: Island Health news release: Applications call for Youth Resilience Grants – a partnership of Island Health and Pacific Public Health Foundation
Date: December 2, 2024 10:13:39 AM
Attachments: [image001.png](#)
[image002.png](#)

[CAUTION] This email originated from outside of the ACRD



NEWS RELEASE

FOR IMMEDIATE RELEASE
December 2, 2024

Applications call for Youth Resilience Grants – a partnership of Island Health and Pacific Public Health Foundation

Island Health-wide – Island Health and the [Pacific Public Health Foundation \(PPHF\)](#) are excited to welcome grant applications from organizations interested in building youth mental well-being and resilience. For the first time, Island Health and PPHF are partnering to allocate up to \$450,000 for the Youth Resilience Grants program (previously known as Resilience and Safety Grants). These grants, now in their third year, aim to help improve mental well-being and build youth resilience to challenging life events.

PPHF, which supports programs and projects that address public health priorities for B.C., is contributing funding for the Youth Resilience Grants. Not-for-profit organizations, schools and Indigenous-led organizations are invited to submit applications for initiatives that support youth health and wellness.

“These grants are filling a real gap in our system,” says Dr. Réka Gustafson, vice president, Population Health and chief medical health officer at Island Health. “These kinds of programs are essential for the resilience and well-being of young people. Youth often tell us that what got them through challenging times was connection, that one mentor who made them feel seen or that one program that engaged them when they needed it the most.”

Resilience grants of up to \$50,000 are available to launch new and innovative projects/programs in communities across the Island Health region that aim to improve youth resiliency. The youth resilience grants are not intended to fund ongoing or existing programs.

“Finding ways to improve youth mental health is an important public health priority, and we’re actively working with public health leaders to support innovative projects like the Youth Resilience Grant program,” according to Pacific Public Health Foundation. “We look forward to collaborating with Island Health as we work toward our aims of emphasizing positive health promotion and proactively strengthening well-being.”

Disconnection and isolation from community and culture, impacts of climate change and the unregulated drug poisoning emergency have all contributed to increasing rates of poor mental health among youth. Many would benefit from supports to develop resilience in a changing world.

Applications should focus on:

- Connections to one or more stable and supportive adults
- Belonging to a broadly defined family, community or school
- Connection to culture
- Sense of autonomy, competence, purpose
- Social and emotional learning and skills

Youth Resilience Grants provide the opportunity for schools, school districts, Parent Advisory Councils, youth-led groups, not-for-profit organizations, local government organizations, Indigenous-led organizations and communities to apply for one-time funding to improve resilience among youth up to age 19.

For more detailed information and to submit an application, please visit [Youth Resilience Grants](#). The deadline to submit a grant application is Friday, December 20.

About Island Health:

Island Health provides health and care services to more than 930,000 people on Vancouver Island, the islands in the Salish Sea and the Johnstone Strait, and mainland communities north of Powell River. With more than 31,000 health care professionals – including more than 3,000 doctors, nurse practitioners midwives and dentists that make up our medical staff – as well as 1,500 volunteers, and the dedicated support of 12 foundations and 19 active auxiliaries, Island Health delivers a broad range of health services, including: public health services, primary health care, home and community care, mental health and substance use services, acute care in hospitals, and much more across a huge and geographically diverse region.

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Central/North Island media inquiries

Dominic Abassi

250-755-7966

Dominic.Abassi@islandhealth.ca

Cowichan/South Island media inquiries:

Andrew Leyne

250-370-8908

Andrew.Leyne@islandhealth.ca

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From: [Abassi, Dominic \[ISLH\]](#) on behalf of [Island Health Communication \[ISLH\]](#)
To: [Island Health Communication \[ISLH\]](#)
Subject: Island Health News: Chief Medical Health Officer releases report on increasing harms from psychoactive substances
Date: December 5, 2024 3:39:49 PM
Attachments: [image001.png](#)
[image002.emz](#)
[image003.png](#)

[CAUTION] This email originated from outside of the ACRD



NEWS RELEASE

FOR IMMEDIATE RELEASE
December 5, 2024

Chief Medical Health Officer releases report on increasing harms from psychoactive substances

Island-wide – The Island Health’s 2024 Chief Medical Health Officer (CMHO) report focuses on the health harms associated with the use of psychoactive substances, including alcohol, illegally manufactured opioids, tobacco, and cannabis.

The report, titled *Challenge and Change: A Public Health Response to our Perplexing Relationship with Psychoactive Substances*, reviews consumption and health outcome data for residents of Island Health related to substance use, including:

- Tobacco and alcohol consumption in Island Health is higher than in the rest of British Columbia;
- Alcohol is the leading cause of substance-related hospital admissions in Island Health;
- Unregulated drug poisonings are the top cause of death in people aged 19-59 in Island Health;
- Premature death rate due to tobacco is declining, but tobacco remains the top cause of substance use-related premature death in Island Health;
- Consumption and health harms related to substance use are inequitable across the Island Health region.

The report also examines how differences in our approaches contribute to or mitigate harms associated with substances.

“Tobacco, alcohol, and illegally manufactured opioids all cause significant harm to the health of people in Island Health,” says Dr. Réka Gustafson, Island Health’s Chief Medical Health Officer. “These harms are preventable and together we have the opportunity to reshape the narrative and drive change to improve health in our communities.”

In British Columbia, medical health officers have the statutory responsibility to monitor and report on the health of the population, providing advice on public health issues and the implementation of relevant health promotion and protection policies.

“Public narrative around substances is increasingly polarized and often based on perception, opinion and history,” says Dr. Gustafson. “I hope the information in this report will support constructive conversations among communities, organizations, and people who use substances in Island Health to help identify and bring about meaningful change for the better.”

The report includes opportunities for actions in which evidence-based solutions could prevent further harms, including investing in prevention, supporting communities with knowledge to influence and develop policy changes, developing an effective and compassionate system of care for people who use substances, meaningfully addressing health inequities experienced by Indigenous Peoples, and advancing healthy public policies for substance use.

The report is intended to serve as an engagement tool to support dialogue among public health staff, clinicians, local governments, First Nation communities, and community organizations across Island Health to address the health and social challenges related to substance use

in the Island Health region.

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To read the full report visit <https://cmho-report-2024.islandhealth.ca/>.

To learn more about Dr. Gustafson, read her bio [Dr. Réka Gustafson | Island Health](#)

About Island Health:

Island Health provides health and care services to more than 930,000 people on Vancouver Island, the islands in the Salish Sea and the Johnstone Strait, and mainland communities north of Powell River. With more than 31,000 health care professionals, including more than 3,000 doctors, nurse practitioners midwives and dentists that make up our Medical Staff – as well as 1,500 volunteers, and the dedicated support of 12 foundations and 19 active auxiliaries, Island Health delivers a broad range of health services, including: public health services, primary health care, home and community care, mental health and substance use services, acute care in hospitals, and much more across a huge and geographically diverse region.

-30-

Media inquiries:

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To: Regional Hospital District Board of Directors
From: Teri Fong, CPA, CGA, Chief Financial Officer
Meeting Date: December 11, 2024
Subject: 2025-2029 Provisional Budget

Recommendation:

THAT the Alberni Clayoquot Regional Hospital District Board of Directors give first reading to the bylaw cited as "Alberni-Clayoquot Regional Hospital District 2025 to 2029 Provisional Budget No. 138".

THAT the Alberni Clayoquot Regional Hospital District Board of Directors give second reading to the bylaw cited as "Alberni-Clayoquot Regional Hospital District 2025 to 2029 Provisional Budget No. 138".

THAT the Alberni Clayoquot Regional Hospital District Board of Directors give third reading to the bylaw cited as "Alberni-Clayoquot Regional Hospital District 2025 to 2029 Provisional Budget No. 138".

THAT the Alberni Clayoquot Regional Hospital District Board of Directors adopt the bylaw cited as "Alberni-Clayoquot Regional Hospital District 2025 to 2029 Provisional Budget No. 138".

Desired Outcome:

To adopt a provisional budget for the Alberni-Clayoquot Regional Hospital District (ACRHD) to comply with the *Hospital District Act*.

Summary:

Regional Hospital District's provide the local share of 40% for funding of capital costs associated with the construction, acquisition and maintenance of hospital facilities and major equipment within the boundaries. The ACRHD does not operate any facilities, it only provides capital funding. Island Health, with funding from the Province, pays the other 60% of the capital funding requirements and operates the facilities within the ACRHD's boundaries.

The Hospital District Act requires that the ACRHD adopt a Provisional Budget for the following year by December 31st. A separate Annual Budget, in the same 5-year format, will be presented to the Board in February 2025 and requires adoption prior to March 31st.

The Regional Hospital District paid for 40% of the West Coast General Hospital (WCGH) construction

using long term debt secured through the Municipal Finance Authority of BC (MFA). The balance of the debt outstanding is estimated to be approximately \$5,500 at the end of 2024. The WCGH debt will be paid in full during the year 2025.

The 2025 to 2029 Provisional Budget continues to build a reserve for the Tofino General Hospital (TGH) project. The TGH is beyond its useful life and will require replacement in the coming years. Island Health has confirmed that the project is on their priority list and the building of a reserve fund for the construction will reduce the amount of borrowing required when the project is completed.

A flat tax requisition of \$1.836 million over the next five years has been drafted with excess funds being allocated into the TGH reserve fund. Staff recommend that the Provisional Budget be adopted with a 0% tax requisition increase and that any increases or reductions in the requisition be considered during the development of the Annual Budget in February and March as the Regional District Financial Plan will also be under development and the two plans can be considered together.

In addition, the provisional budget also includes an equipment and minor capital grant of \$550,000 for Island Health to purchase equipment and complete projects for the hospitals in the region. Island Health will provide a letter in January 2025 explaining their plan in the region. This letter will be presented as part of the Annual Budget process.

The ACRHD will also be undergoing a Strategic Planning exercise this month as the Island Health requests for funding have expanded from traditional hospital facilities to other health care facilities. For example, in 2024 the ACRHD denied Island Health's request to fund a portion of the Ucluelet Primary Care Centre and the Tofino Staff Housing, Sobering and Assessment Centre as these facilities have historically been funded solely by the Provincial government. The financial impacts of the direction received from the Strategic Planning session will be discussed as part of the Annual Budget process in February and March 2025.

Time Requirements – Staff & Elected Officials:

Approximately 20-30 staff hours are required to develop the provisional budget, annual budget and discuss current as well as upcoming projects with Island Health. This time requirement fluctuates from year to year depending on the nature and number of projects occurring in the ACRD region by Island Health.

Financial:

The Provisional Budget has been developed with a tax requisition of \$1.836 million which is the same as the prior year. The tax rate and estimated residential tax impact by area will be presented during the Annual Budget process when the 2024 assessed values are available.

Policy or Legislation:

The ACRHD is required by Section 23 of the Hospital District Act to adopt a provisional budget by December 31st for the following year. Hospital District Act Section 20(4) provides the ACRHD the ability to maintain a reserve account for specified purposes.

Submitted by: Teri Fong
Teri Fong, CPA, CGA, Chief Financial Officer

Reviewed by: Cynthia Dick
Cynthia Dick, General Manager of Administrative Services

Approved by: Daniel Sailland
Daniel Sailland, MBA, Chief Administrative Officer



Alberni-Clayoquot Regional Hospital District

Bylaw No. 138

***A bylaw to adopt the Provisional Budget for the
Years 2025 to 2029***

The Board of Directors for the Alberni-Clayoquot Regional Hospital District in open meeting assembled enacts as follows:

1. This Bylaw may be cited as the ***“Alberni-Clayoquot Regional Hospital District 2025 to 2029 Provisional Budget Bylaw No. 138”***.

2. Schedule “A” attached hereto and forming part of this Bylaw is the Provisional Budget for the Alberni-Clayoquot Regional Hospital District for the years ending December 31, 2025 to 2029.

Read a first time this day of , 2024.

Read a second time this day of , 2024.

Read a third time this day of , 2024.

Adopted this day of , 2024.

Chairperson

Corporate Officer



ALBERNI-CLAYOQUOT REGIONAL HOSPITAL DISTRICT
 2025 TO 2029 PROVISIONAL BUDGET
 SCHEDULE A - BYLAW NO. 138

ALBERNI-CLAYOQUOT REGIONAL HOSPITAL DISTRICT	2024 Budget	2025 Budget	2026 Budget	2027 Budget	2028 Budget	2029 Budget
REVENUE						
Surplus (deficit) from prior years	291,532	-	-	-	-	-
Tax requisition	1,836,000	1,836,000	1,836,000	1,836,000	1,836,000	1,836,000
Grants in lieu of taxes	7,000	7,000	7,000	7,000	7,000	7,000
Investment income & refunds	100,000	20,000	20,000	20,000	20,000	20,000
TOTAL REVENUE	\$ 2,234,532	\$ 1,863,000	\$ 1,863,000	\$ 1,863,000	\$ 1,863,000	1,863,000
EXPENDITURES						
Administration costs	\$ 46,200	\$ 47,000	\$ 48,000	\$ 49,000	\$ 50,000	\$ 51,000
Debenture - interest	1,000	1,000	-	-	-	-
Debenture - principal	6,000	6,000	-	-	-	-
Annual equipment grant	550,000	550,000	550,000	550,000	550,000	550,000
Major capital project contributions	-	-	-	-	-	-
Reserve fund contribution	1,631,332	1,259,000	1,265,000	1,264,000	1,263,000	1,262,000
TOTAL EXPENDITURES	\$ 2,234,532	\$ 1,863,000	\$ 1,863,000	\$ 1,863,000	\$ 1,863,000	1,863,000

TOFINO GENERAL HOSPITAL RESERVE	2024 Budget	2025 Budget	2026 Budget	2027 Budget	2028 Budget	2029 Budget
Balance, beginning of year	\$ 1,697,115	\$ 3,403,847	\$ 4,783,847	\$ 6,211,347	\$ 7,680,647	9,193,047
Contribution from operating fund	1,631,332	1,259,000	1,265,000	1,264,000	1,263,000	1,262,000
Grants and other contributions	-	-	-	-	-	-
Interest earnings	75,400	121,000	162,500	205,300	249,400	294,700
<i>Less - capital expenditures</i>						
Tofino General Hospital	-	-	-	-	-	-
Total capital expenditures	-	-	-	-	-	-
BALANCE, END OF YEAR	\$ 3,403,847	\$ 4,783,847	\$ 6,211,347	\$ 7,680,647	\$ 9,193,047	10,749,747