



Alberni-Clayoquot Regional Hospital District

BOARD OF DIRECTORS MEETING WEDNESDAY, FEBRUARY 10, 2021

Due to COVID-19, the meeting will be held via Zoom Video Conferencing and will be livestreamed on the ACRD website at <https://www.acrd.bc.ca/events/10-2-2021/>

Public Attendance: the public are welcome to attend the meeting via Zoom Webinar by registering at:

https://portalberni.zoom.us/webinar/register/WN_buBbOFncSHagzZ85fnkqCw

AGENDA

	PAGE #
1. <u>CALL TO ORDER</u> <i>(immediately following the ACRD Board Meeting)</i>	
Recognition of Territories	
Notice to attendees and delegates that this meeting is being recorded and livestreamed to YouTube on the Regional District Website.	
2. <u>APPROVAL OF AGENDA</u> <i>(motion to approve, including late items requires 2/3 majority vote)</i>	
3. <u>ADOPTION OF MINUTES</u>	
a. Board of Directors Meeting – January 13, 2021	3-6
<i>THAT the minutes of the Alberni-Clayoquot Regional Hospital District Board of Directors held on January 13, 2021 be adopted.</i>	
4. <u>CORRESPONDENCE FOR ACTION/INFORMATION</u>	
a. Correspondence January 29, 2021 from Island Health regarding 2021/2022 Capital Projects and Equipment	7-10
Possible Motion:	
<i>THAT the Alberni-Clayoquot Regional Hospital Board of Directors refer this request to budget discussions.</i>	
5. <u>REQUEST FOR DECISIONS & BYLAWS</u>	

6. REPORTS

- a. Bamfield Health Centre – B. Beckett
- b. Alberni-Clayoquot Continuing Care Society – J. McNabb
- c. West Coast Native Health Care Society – P. Cote
- d. Tofino General Hospital – West Coast Directors
- e. Alberni-Clayoquot Health Network – P. Cote
- f. West Coast General Hospital – Alberni Valley Directors
- g. Island Health and Vancouver Island Regional Hospital District Semi-Annual Joint Planning Meeting – J. McNabb **11-26**
- h. Other Reports

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

7. UNFINISHED BUSINESS

8. LATE BUSINESS

9. QUESTION PERIOD

Questions/Comments from the public participating in the Zoom meeting.

Questions/Comments from the Public, respecting an agenda item, can be emailed to the ACRD at responses@acrd.bc.ca and will be read out by the Corporate Officer at the meeting.

10. ADJOURN



Alberni-Clayoquot Regional Hospital District

MINUTES OF THE BOARD OF DIRECTORS MEETING HELD ON WEDNESDAY, JANUARY 13, 2021

Due to COVID-19 pandemic, meeting conducted via Zoom video/phone conferencing

- DIRECTORS PRESENT:** John McNabb, Chairperson, Director, Electoral Area "E" (Beaver Creek)
John Jack, Vice-Chairperson, Councillor, Huu-ay-aht First Nation
Bob Beckett, Director, Electoral Area "A" (Bamfield)
Tanya Shannon, Director, Electoral Area "B" (Beaufort)
Kel Roberts, Director, Electoral Area "C" (Long Beach)
Penny Cote, Director, Electoral Area "D" (Sproat Lake)
Dianne Bodnar, Director, Electoral Area "F" (Cherry Creek)
Ron Paulson, Councillor, City of Port Alberni
Rachelle Cole, Councillor, District of Ucluelet
Tom Stere, Councillor, District of Tofino
Kirsten Johnsen, Councillor, Toquaht Nation
- REGRETS:** Alan McCarthy, Member of Legislature, Yuułu?it?ath Government
Wilfred Cootes, Councillor, Uchucklesaht Tribe Government
Sharie Minions, Mayor, City of Port Alberni
- STAFF PRESENT:** Douglas Holmes, Chief Administrative Officer
Teri Fong, Chief Financial Officer
Alex Dyer, Planner
Jenny Brunn, General Manager of Community Services
Wendy Thomson, General Manager of Administrative Services
Heather Zenner, Protective Services Manager
Janice Hill, Executive Assistant

The meeting can be viewed on the Alberni-Clayoquot Regional District website at <https://www.acrd.bc.ca/events/13-1-2021/>

1. **CALL TO ORDER**

The Chairperson called the meeting to order at 4:47 pm.

The Chairperson recognized the meeting this afternoon 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 Beckett
SECONDED: Director Shannon

THAT the agenda be approved as circulated.

CARRIED

3. ADOPTION OF MINUTES

a. Board of Directors Meeting – December 9, 2020

MOVED: Director Shannon
SECONDED: Director Roberts

THAT the minutes of the Alberni-Clayoquot Regional Hospital District meeting held on December 9, 2020 be adopted.

CARRIED

4. CORRESPONDENCE FOR ACTION/INFORMATION

5. REQUEST FOR DECISIONS & BYLAWS

6. REPORTS

a. Bamfield Health Centre – B. Beckett

Director Beckett reported on the hiring of a part-time clerical position combined with home support services to assist with stay at home patients and palliative care for the community.

b. Alberni-Clayoquot Continuing Care Society – J. McNabb – No Report

c. West Coast Native Health Care Society – P. Cote – No Report

d. Tofino General Hospital – West Coast Directors

Director Stere provided an update on Tofino General Hospital and ongoing capital projects. The x-ray department renovation is complete, they are looking at replacing cardiac monitors which are at the end of life and upgrades to lighting in critical areas of the Hospital. Three new mental health workers have been hired. Director Stere discussed space constraints and the Hospital making operations challenging. An open house with Island Health representatives is scheduled for the west coast on January 28th. Invitations coming out shortly.

Director Cole commended the set-up and management of the COVID testing trailer at Tofino General Hospital. She spoke to the lack of space at the Hospital and reported that some Island Health staff will be housed out of the Ucluelet Health Centre.

e. Alberni-Clayoquot Health Network – P. Cote

Director Cote provided an update on the on the Network. They recently went through a recruitment process and have been conducting new member orientation over the past few days. Director Cote welcomed Director Stere to the Network.

f. West Coast General Hospital – Alberni Valley Directors

The Chair reported he attended a meeting on Dec. 18th regarding COVID-19 and the vaccine roll out.

g. Other Reports

Director Jack reported that the Huu-ay-aht First Nation received rapid vaccines for the residents of Anacla Village.

MOVED: Director Roberts

SECONDED: Director Bodnar

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

CARRIED

7. LATE BUSINESS

8. QUESTION PERIOD

Questions/Comments from the public attending the meeting via Zoom webinar. The Corporate Officer advised there were no questions from the public.

In order to provide the public with an opportunity to ask questions or provide input to the Board of Directors respecting a topic on the agenda, the Regional District set up an email address responses@acrd.bc.ca. The Corporate Officer reported there were no questions or comments received from the public with respect to the meeting today.

9. ADJOURN

MOVED: Director Roberts

SECONDED: Director Shannon

THAT this meeting be adjourned at 4:59 pm.

CARRIED

Certified Correct:

John McNabb,
Chairperson

Wendy Thomson,
General Manager of Administrative Services

January 29, 2021

Ms. Teri Fong
Manager of Finance
Alberni-Clayoquot Regional District
3008 5th Avenue
Port Alberni, BC V9Y 2E3

Dear Ms. Fong:

Re: 2021/2022 Capital Projects and Equipment

Island Health is requesting ACRHD cost-sharing on their 2021/22 capital project and equipment requirements.

Detailed project and equipment lists are attached which support the following allocation amounts:

Minor Capital Projects	\$371,760
Equipment	\$443,395
2021/22 Minor Capital Request	\$815,155

We thank you for considering this \$815,555 minor capital request amount even though it exceeds your provisional budget amount of \$550,000.

Island Health's records indicate approximately \$400,000 in unspent ACRHD funding from prior years which, with your approval, could be applied to this year's capital request.

Major Capital Items – Ten-Year Capital Plan

Island Health's ten-year capital plan includes the following major capital items which fall within the ACRHD:

Project Name	Site/Location
CT Scanner	WCGH
Integrated Primary Care Centre	Ucluelet
Tofino General Hospital Replacement	Tofino

Commencement of these major capital projects is subject to available funding, and their prioritization relative to other Island Health projects.

Island Health will keep you informed of any further developments on these projects.

Capital Planning

Located at: 1952 Bay Street | Victoria, BC V8R 1J8 Canada
Mailing address: 1952 Bay Street | Victoria, BC V8R 1J8 Canada

Tel: 250-519-1726 | Fax: 250-370-8689
viha.ca

We thank the ACRHD for its significant contribution to Island Health's capital project and equipment needs, and we look forward to our continued partnership in meeting your healthcare infrastructure needs.

Yours truly,



Kevin Daniel
Manager, Capital Planning and Leasing, Geos 2 & 3

Attachments

cc: Marie Duperreault, Director, Port Alberni/West Coast, Island Health
Sheila Leadbetter, Executive Director, Geography 2, Island Health
Chris Sullivan, Director, Capital Planning and Leasing
Carol Botrakoff, Director, Capital Finance and Treasury
Scott McCarten, Corporate Director, Capital Management and Finance Projects

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**Island Health 2021/22 Minor Capital Project List
Alberni-Clayoquot Regional Hospital District**

Reference #	Site	Portfolio	Project Name	Total Project Cost	Cash Flow					
					Prior Years	2021/22			2022/23	2023/24
						Annual	Island Health	ACRHD		
New Project Approvals:										
<\$100K										
2020-3417	Bamfield Health Centre	Operations & Support Services	Generator Replacement	77,000	77,000	\$46,200	\$30,800			
9994	Port Alberni Home & Community Care Centre	Clinical Service Delivery	Staff Break Room Reno	38,500	38,500	\$38,500	\$0			
2021-3684	Tofino General Hospital	Clinical Service Delivery	Develop an Emergency Department Crisis/Quiet Room	99,000	99,000	\$59,400	\$39,600			
2021-3683	Tofino General Hospital	Clinical Service Delivery	Admitting/Triage Redesign	99,000	99,000	\$59,400	\$39,600			
2019-1209	Tofino General Hospital	Operations & Support Services	Nurse Call Replacement	82,500	82,500	\$49,500	\$33,000			
2019-1208	Tofino General Hospital	Operations & Support Services	Paving and Drainage Upgrades	99,750	99,750	\$59,850	\$39,900			
2021-3724	West Coast General Hospital	Clinical Service Delivery	Replace patient room blinds to address infection control	99,000	99,000	\$59,400	\$39,600			
9996	West Coast General Hospital	Clinical Service Delivery	Reno doors to the 3 ICU rooms	93,500	93,500	\$56,100	\$37,400			
2019-1407	West Coast General Hospital	Operations & Support Services	Medical Air Compressor Replacement	33,000	33,000	\$19,800	\$13,200			
2019-1534	West Coast General Hospital	Operations & Support Services	Optimize building controls for energy conservation	97,650	97,650	\$58,590	\$39,060			
2021-4027	West Coast General Hospital	People	Ceiling Lifts - Post Anesthetic Care Unit - 1 room	50,000	50,000	\$30,000	\$20,000			
2020-2891	Westhaven Residential Care	Priority Populations & Initiatives	Meiko Sanitizer installation	99,000	99,000	\$59,400	\$39,600			
Total				\$967,900	\$967,900	\$596,140	\$371,760			

Notes:

Definition of minor project: cost is between \$5,000 and \$1,500,000.

VANCOUVER ISLAND HEALTH AUTHORITY
2021/22 RECOMMENDED APPROVED CAPITAL EQUIPMENT - ALBERNI CLAYOQUOT REGIONAL HOSPITAL DISTRICT

Capital #	Control #	Program	Site	Equipment Name	Qty	Budget	New / Replace
Equipment >\$100,000							
	2021-3831	Laboratory Services	TGH	Chem Platform - TGH General Chemistry Analyzer	1	100,000	Replacement
	2019-1903	Port Alberni, West Coast	WCGH	Philips Monitoring Infrastructure & Telemetry	1	436,300	Replacement
Total Equipment > \$100,000						536,300	
Equipment < \$100,000							
	2021-3824	Laboratory Services	WCGH	Chem Platform Immunoassay Analyzer	1	75,000	Replacement
	2021-3823	Laboratory Services	WCGH	Chem Platform General Chem Analyzer	1	95,000	Replacement
	2020-3230	Heart Health	WCGH	ECG cart	1	24,097	Replacement
	2020-3232	Heart Health	WCGH	ECG cart	1	24,097	Replacement
	2021-3720	Port Alberni, West Coast	WCGH	Cystoscopes	4	73,295	New
	2020-3087	Port Alberni, West Coast	WCGH	Omi retractor sets	1	12,677	Replacement
	4271	Port Alberni, West Coast	WCGH	Ureterscope for OR	2	29,120	Replacement
	2104	Port Alberni, West Coast	WCGH	ICU BED	1	21,894	Replacement
	3901	Port Alberni, West Coast	WCGH	Vein Viewer Vision 2 - Critical Care Float	1	24,647	Replacement
	2020-3061	Port Alberni, West Coast	WCGH	Bariatric Stretcher	1	11,864	Replacement
	2020-3062	Port Alberni, West Coast	WCGH	Shower Trolley	1	11,693	Replacement
21-0016	2021-3464	Food Services	WCGH	Rational Oven	1	53,925	Replacement
	2020-3210	Food Services	WCGH	Walk-in Cooler Doors	3	24,266	Replacement
	2021-3688	Port Alberni, West Coast	TGH	Physio Arjo Sara Plus Lift	1	14,966	Replacement
	2021-3682	Port Alberni, West Coast	TGH	Cast Cutter with Dust Collector	1	7,700	Replacement
	2020-3034	Port Alberni, West Coast	TGH	Nasopharyngeal Scope	1	14,021	Replacement
	2021-3465	Food Services	TGH	Rational Oven	1	53,925	Replacement
Total Equipment < \$100,000						572,187	
Total Equipment Approved						1,108,487	
Total Possible Cost Sharing						443,395	

**Island Health and
Vancouver Island Regional Hospital Districts
Semi-Annual Joint Planning Meeting
Via Zoom
November 25, 2020
Minutes of Meeting**

Island Health

Leah Hollins
Kim Kerrone
Elin Bjaranason
Chris Sullivan

Kathy MacNeil
Scott McCarten
Mike Lowe

Regional Hospital Districts (RHDs)

John McNabb, Alberni-Clayoquot
Denise Blackwell, Capital
Kevin Lorette, Capital
James Warren, Comox-Strathcona
Andrew Hory, Mt. Waddington
Ian Thorpe, Nanaimo

Douglas Holmes, Alberni Clayoquot
Michael Barnes, Capital
Charlie Cornfield, Comox-Strathcona
Myriah Foort, Comox-Strathcona
Greg Fletcher, Mt. Waddington
Jeannie Bradburne, Nanaimo

First Nation Health Authority (FNHA)

Mark Fitz-Morris

1. Introductions

Meeting attendees introduced themselves.

2. Welcoming Remarks

Leah Hollins welcomed everyone to the meeting and provided opening comments including:

- Acknowledging with respect and gratitude the Lekwungen peoples of the Songhees and Esquimalt First Nations whose traditional territory we are calling from today; acknowledging the many nations within the Vancouver Island First Nation Families of the Coast Salish, Nuuchah nulth, and Kwakwaka'wakw peoples who have cared and nurtured this land for all time and give thanks for welcoming us as visitors to live, work and care; and recognizing the Métis, Inuit and other Indigenous peoples on Vancouver Island.
- On behalf of the Island Health Board, thank you to everyone attending this semi-annual to facilitate an effective two-way communication.
- A special welcome to John McNabb as new Chair, Alberni-Clayoquot Regional Hospital District. A special thank you to Josie Osborne who is the outgoing chair.
- Our response to the pandemic requires: every one of us to be champions; to listen, follow and promote the recommendations from Public Health; and working together to control the spread of COVID-19.

3. Approval of Agenda

There were no changes to the agenda.

4. May 29, 2020 Minutes (Semi-Annual Joint Planning Meeting)

Chris Sullivan provided an update on the following Action.

- Follow-up on what alternative models exist for long term care beds in rural communities.
 - A response was provided in the May 29, 2020 Minutes.

5. Island Health Update

Kathy MacNeil started with a territorial recognition similar to that provided by Leah earlier.

Kathy provided an update on various items including:

- COVID-19 preparedness and outbreaks
 - Taking a system wide approach to our pandemic response - One Health System – following the lead of the province and Dr. Henry.
 - Working closely with First Nations communities.
 - Readiness and response –we are ready for surge and actively prepared.
 - Long term care – simulations, coach program, staffing (single site), visitors, ambassadors.
 - Home and community care – increasing home support capacity, virtual care.
 - Capacity planning including designated cohort units and increasing critical care beds.
 - PPE supply status.
- Surgery renewal
 - Approximately 98% of the 4,000 surgeries postponed in the Island Health region have either had their surgery completed or have an upcoming scheduled surgery date.
- Hospital at Home
 - In November we launched the Hospital at Home program out of the Victoria General Hospital (VGH). This program provides hospital-level interdisciplinary care to acutely ill adult patients in their own home who would otherwise be admitted to hospital.
- Urgent Primary Care Centres (UPCCs)
 - James Bay UPCC opened in Victoria this past spring, to date, there have been 9,487 visits and 1,703 patients have been attached to a primary care provider.
 - In September, the Medical Arts UPCC in Nanaimo celebrated its first anniversary of operations; there have been 40,574 patient visits with 954 patients being attached to a primary care provider.
 - Island Health is scheduled to open its fourth site – North Quadra UPCC in Saanich shortly.

- High Acuity Units (HAUs)
 - The first interim HAUs opened at Nanaimo Regional General Hospital and Royal Jubilee Hospital in October. HAUs are transitional critical care units providing an intermediate level of care with more monitoring than acute care, but less than intensive care.
- Organizational update
 - Dawn Thomas, Vice President, Indigenous Health & Diversity, Equity and Inclusion has been appointed as an interim Associate Deputy Minister in the Ministry of Health in response to a recommendation in the November 2020 “In Plain Sight” report.
 - Krista Allan joined Island Health’s leadership team November 18 as the new Vice President, Knowledge, Practice and Chief Nurse Executive. Krista comes to us from the Winnipeg Regional Health Authority where she held the role of Chief Health Operations Officer and Chief Nursing Officer.
 - In June, our organization structure was realigned based on four key principles:
 - Strengthening integration and partnership between strategy and operations.
 - Aligning functions so natural groups who need to co-create are organized together.
 - Further distributing our executive presence outside of Victoria.
 - Ensuring our Quality Councils have voice directly into the Executive Team.
 - Elin Bjarnason and James Hanson now share responsibility for Clinical Operations – Elin for the South Island and James for Centre/North Island.
 - Max Jajszczok joined Island Health as the Executive Director for North Island (formerly Geography 1). Max joins us from Alberta Health Services where he held the role of Executive Director of Provincial Seniors Health and Continuing Care.
 - Dr. Sandra Allison joined Island Health’s team of medical health officers, and will work alongside Mike Benusic to serve the central Vancouver Island region. Most recently, Dr. Allison was Chief Medical Health Officer at Northern Health.
 - Recruitment is also underway for the position of Chief Project Officer, Cowichan District Hospital rebuild.
- Underserved/Opioid
 - The government has made a province wide announcement to expand Assertive Community Teams (ACTs), including new teams for Victoria, Cowichan and Nanaimo. In addition, MHSU staff were able to align and shift resources to create a new ACT team in the Comox Valley.
 - Outreach capacity to encampments on the South Island is being expanded. This service is highly mobile and proactively goes to encampments to check on people’s wellbeing, build relationships and connect them with the health and social services they require.
 - In Nanaimo, a low barrier primary care outreach project is underway in partnership with the Nanaimo Division of Family Practice, Island Health and Open Heart Collaborative. The team consists of primary care physicians working in collaboration with MHSU outreach nurses and contracted peer support workers. The team is also mobile and supports those who may otherwise be unable to access primary care.

6. Hospital District Act Amendment

Scott McCarten summarized the background related to the Hospital District Act and previous reviews indicating the need for an update. See Slide 2 of Attachment.

Kevin Lorette identified the following issues:

- There is no ability for a RHD to delegate decisions to staff. This was an issue when the CRHD was building the Summit long term care facility.
- RHDs require Ministry of Health approval to designate non-acute care facilities for the purpose of RHD cost-sharing.
- RHDs require Ministry of Health approval of their annual budget.

There were other comments including:

- Previous work by CSRHD to connect with other provincial RHDs but unable to get Ministry participation.
- Preference for this to be a province wide initiative.
- Current funding model may not be realistic.
- Need to request Act be updated to reflect the current health system without specifically identifying the changes needed.

ACTIONS:

- Leah Hollins to engage other regional health authority Board Chairs.
- CRHD staff to formally request other RHDs to participate in a request to the Ministry to update the Act. Scott McCarten and Chris Sullivan are available to support.

7. Capital Update

Scott McCarten provided background on Island Health capital funding sources, capital needs, prioritization process and process updates for 2020. Scott also provided an update on Island Health's progress for new long term care facilities. See Slides 3 to 13 of Attachment.

There was a discussion on linkage between Island Health and FNHA on projects. Mark Fitz-Morris indicated that elder care is a FNHA priority across the province. FNHA is also working with BC Housing and Indigenous Services Canada on these projects. Mark also indicated there may be linkages for projects related to addictions and treatment.

ACTION:

- Island Health and FNHA to continue conversations on linkages.

8. Round Table

Greg Fletcher appreciated the recent staff to staff meeting between Island Health and MWRHD.

Charlie Cornfield suggested more dialogue with BC Housing related to supportive housing projects. Kim responded that BC Housing and Island Health have close linkages. Charlie also indicated that recent strategic planning discussions with Island Health have been helpful.

John McNabb brought forward three items:

- The difference in direct care hours per resident at long term care facilities – Island Health indicated the Ministry of Health is moving to a common framework and language across the province. Kim also indicated some providers find it difficult to find staff. In these cases, other staff may be hired when available for resident socialization and feeding.
- Funding to affiliate long term care providers for significant capital projects such as a roof replacement – Island Health indicated that surplus funding is made available to not-for-profit affiliate providers; however, in the last few years there has been no surplus. Island Health recognizes this is an issue.
- The importance of local health networks and request for Island Health to continue funding – Island Health indicated we are planning to continue to support the health networks.

Ian Thorpe thanked Island Health for providing a draft long term capital plan to the NRHD Board.

Mark Fitz-Morris appreciated the invitation for FNHA to participate in the meeting. Mark also commented on the importance of community services to reduce pressure on acute care facilities.

Michael Barnes commented on CRHD's willingness to broaden the scope of the Hospital District Act across the continuum of care.

Myriah Foort suggested that Island Health infographics presenting a high level health picture to RHD Boards would help support RHD decision-making.

9. Future Meetings

RHDs are asked to let Island Health know if they have any agenda items they would like to discuss at the Spring 2021 meeting.

10. Closing Remarks

Kim thanked everyone for participating and providing their perspectives on the various topics.



Capital Management &
Finance Projects

Capital Management

Scott McCarten – Corporate Director, Capital Management & Finance Projects



Hospital District Act Conversation

- **Overview/History**

- Enacted in 1967
 - Single Hospitals and Hospital Boards
 - Narrow continuum of care
- Role of the RHDs is to cost-share the capital costs associated with health facilities that operate under the authority of the Hospital Act
 - The minister may designate an institution or facility in the health field as a health facility for the purposes of the Act.
 - Cost sharing is voluntary

- **Challenges**

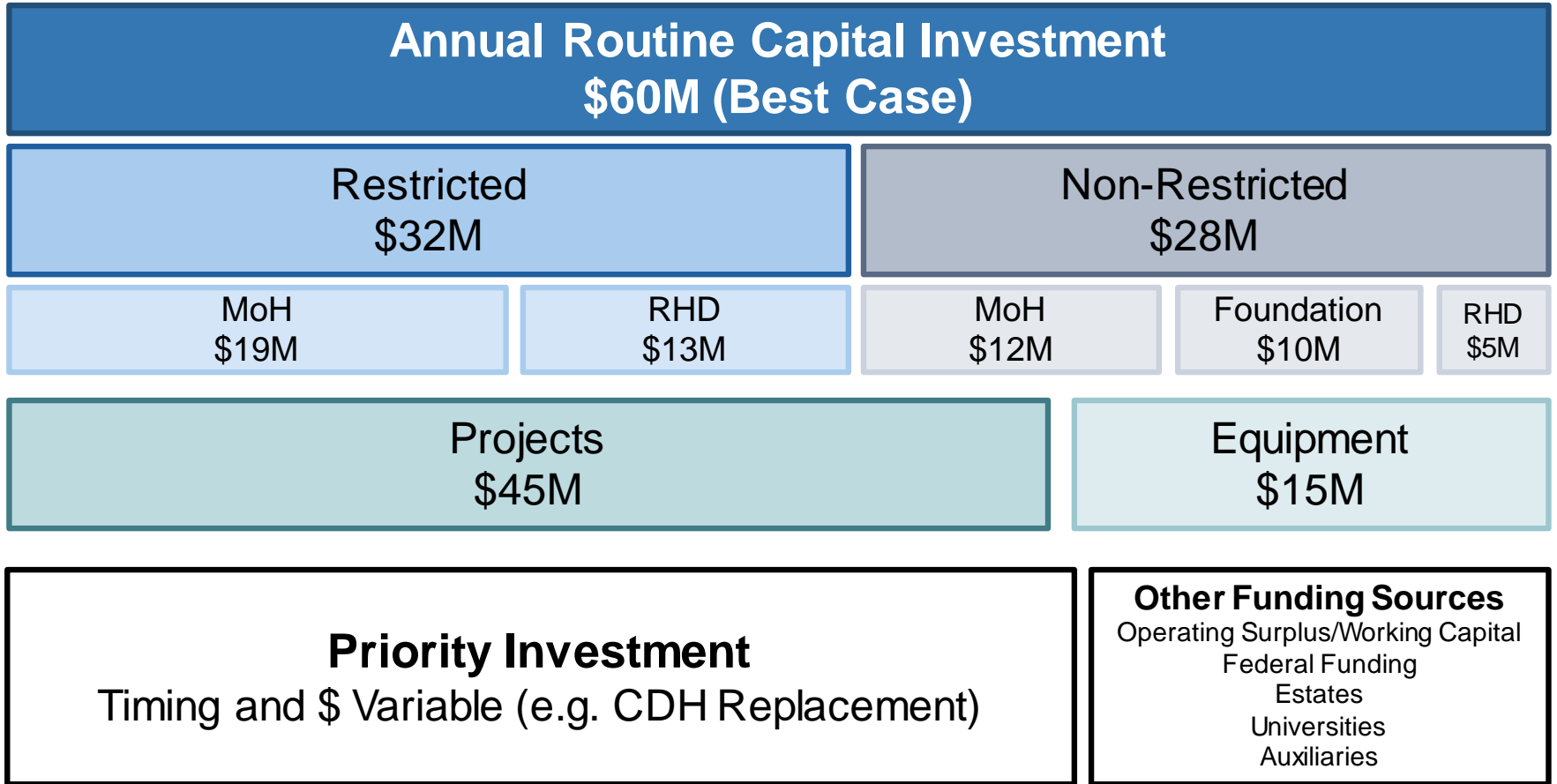
- Move to broader continuum of care = additional capital requirements
- Move to larger Health Authorities = diluted capital budget
- Lack of standardized processes and policies across regions
- Misalignment of budget cycles
- Long term planning
- Delineation of Capital vs. Operating accountabilities

What are our various funding sources for?

Funding Source	Purpose	Funding Availability	Funding Certainty	Approval Process
Routine Capital Investment	Asset rehabilitation, Upgrade, Equipment Replacement	Annual	Notional Current Year = 100% Year 2 = 75% Year 3 = 50% Year 4 = 50%	1) Annual Budget to be used at IH Discretion 2) MoH Approval required for projects >\$2M 3) Treasury Board Approval for projects >\$5M
Priority Investment	New Asset Purchase, Major Facility Replacement or Renovation	Ad Hoc	None	1) Annual request list to MoH 2) MoH prioritizes against other HA requests 3) Treasury Board prioritization 4) Concept Plan (Class D cost estimate) 5) Business Case (Class C cost estimate)

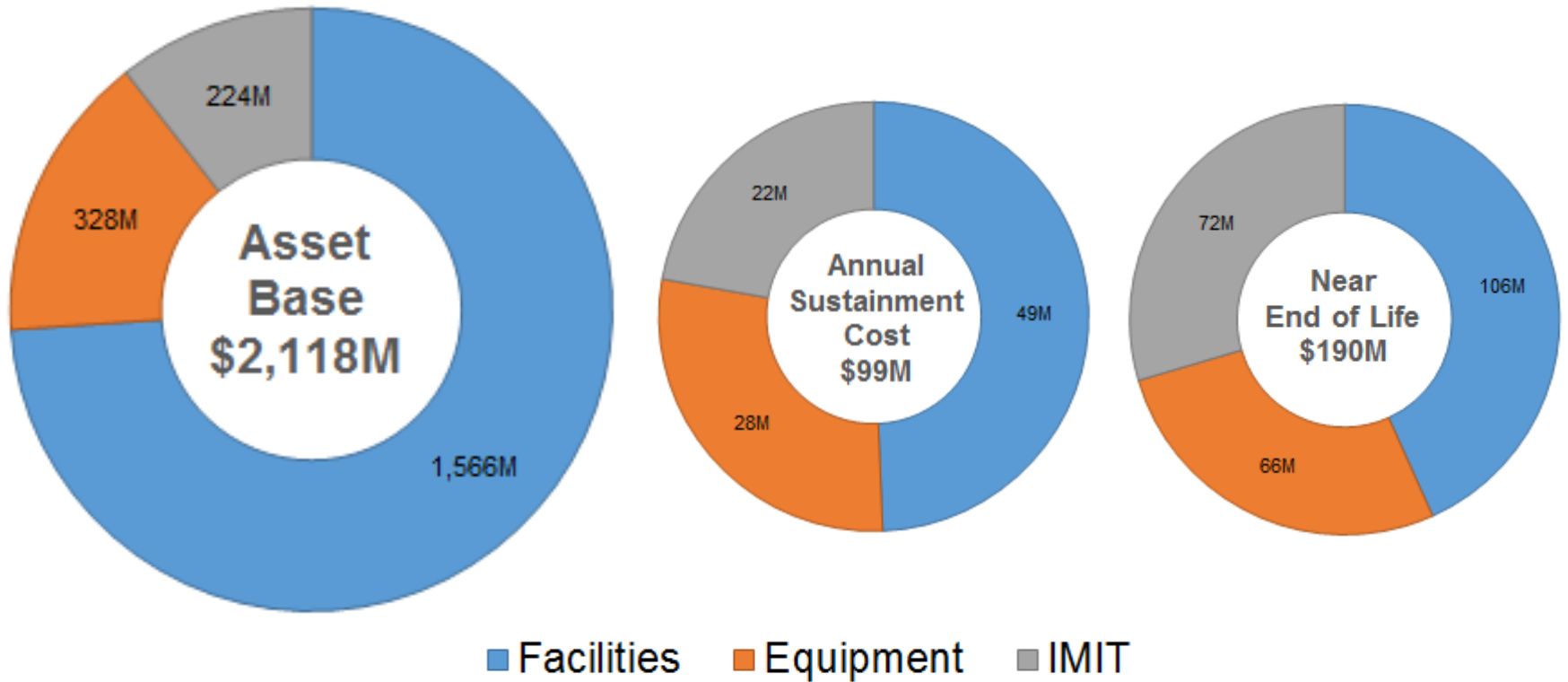
- For RCI: Capital allocation is inconsistent and uncertain, making long range planning challenging
- For PI: not permitted to advance detailed costing until *after* Treasury Board approval

How are our funds broken down and how do we allocate them?

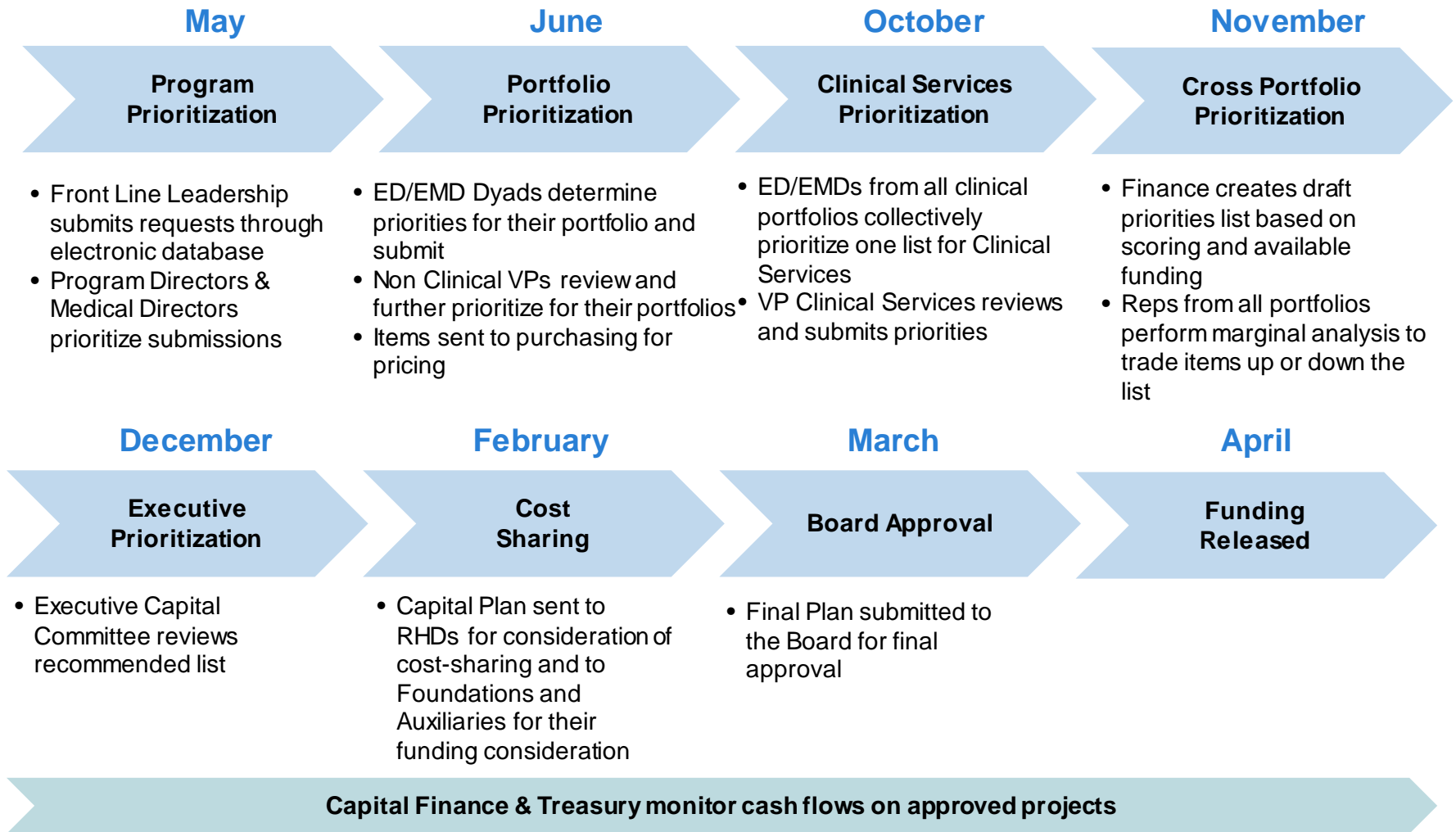


Buckets of funds come with restrictions that limit ability to optimize spend

How many assets do we have and How much will it cost to sustain them?



Minor Capital Prioritization Process



Updates for 2020

- **Detailed 5 year Routine Capital Investment plan**
- **High level 10 year Priority Investment plan**
 - Caveat: Both subject to change depending on MoH funding
- **Advancing Functional Programming on anticipated Priority Investments**
 - Slightly better early cost estimates
- **Advocacy to MoH for additional RCI successful.**
 - Request going to Treasury Board for increased RCI allocations
- **Heavy focus on Primary & Community Care capital investment**
- **\$25M capital investment in COVID response**
 - Mid year = challenges with cost sharing

Update on Long Term Care Business Cases

MoH has confirmed a large provincial capital envelope to replace and expand LTC across the province.

In order to access capital, a full business plan must be submitted to Treasury Board. Completion of the business plan requires:

1. Identification and justification of need
2. Funding sources and partners
3. Class C Cost estimate

A Class C Cost estimate requires:

1. Functional Program for the new facility
2. Identification and assessment of the construction site
3. Indicative Design of the new facility

Update on Long Term Care Business Cases

- **Draft Business Plan complete**
- **Functional Program complete**
 - A functional program describes the requirements which a building must satisfy in order to support and enhance desired activities
 - It includes an outline of the types of spaces required and estimates of square feet of each type of space required
 - It includes reference to key design criteria that must be included in a final indicative design
- **Real estate searches and evaluation of owned sites complete:**
 - 34 sites in 11 communities were evaluated based on multiple criteria.
 - These criteria were used to narrow the field to 12 sites for further investigation.
- **RFPs drafted and posted for site procurement and Indicative Design**

Update on Long Term Care Business Cases

- **Next Steps**

- Complete site selection and procurement
- Complete Indicative design
- Complete business plans and submit to Exec / Board / MoH
- Assuming approval, proceed to draft RFP for construction procurement

- **Priority Communities for Next Steps**

- Campbell River/Comox
- Nanaimo
- Duncan
- Port Alberni
- Sooke
- Westshore
- Saanich Peninsula



Capital Management &
Finance Projects

Thank You!

Questions?

