



**REGULAR BOARD MEETING
Open Meeting Agenda**

Date: January 26, 2022
Time: 6:00 p.m.
Location: Electronic participation by WebEx.

Join by phone:
1-844-426-4405
Meeting number (access code): 2467 018 7655

Proceedings are open to the public.

1. CALL TO ORDER & WELCOME

Stuart Horn, Secretary/Treasurer, assumed the chair at _____ pm.

2. ELECTION

2.1 ELECTION OF BOARD CHAIR

Call for Nominations (3) Times

Secretary/Treasurer Horn will call for nominations three times.

Opportunity for Candidates to Address the Board (max. 2 minutes)

Board members running for Chair will have an opportunity to address the Board.

Vote by Secret Ballot

Secretary/Treasurer Horn will provide instructions for the remote voting process in accordance with the WKBRHD Procedures Bylaw .

Declaration of Elected or Acclaimed Board Chair

Secretary/Treasurer Horn will declare the Chair of the West Kootenay-Boundary Regional Hospital District Board.

Destroy Ballots

**RECOMMENDATION
(ALL VOTE)**

That the emails sent for the election of the West Kootenay-Boundary Regional Hospital District Board Chair be permanently deleted.

2.2 ELECTION OF ACTING CHAIR

Call for Nominations (3) Times

Secretary/Treasurer Horn will call for nominations three times.

Opportunity for Candidates to Address the Board (max. 2 minutes)

Board members running for Acting Chair will have an opportunity to address the Board.

Vote by Secret Ballot

Secretary/Treasurer Horn will provide the remote voting process.

Declaration of Elected or Acclaimed Acting Chair

Secretary/Treasurer Horn will declare the Acting Chair of the West Kootenay-Boundary Regional Hospital District Board.

Destroy Ballots

**RECOMMENDATION
(ALL VOTE)**

That the emails sent for the election of the West Kootenay-Boundary Regional Hospital District Board Acting Chair be permanently deleted.

3. CHAIR'S ADDRESS

4. ACTING CHAIR'S ADDRESS

(Commencement of regular agenda with elected Chair presiding)

5. WKBRHD APPOINTMENTS

5.1 Appointment of Directors

RECOMMENDATION

That the following Regional District Directors/Alternate Directors be appointed as **Directors** of the West Kootenay-Boundary Regional Hospital District for 2021:

Regional District of Central Kootenay

Garry Jackman, Electoral Area A
Aimee Watson, Electoral Area D
Ramona Faust, Electoral Area E
Tom Newell, Electoral Area F
Hans Cunningham, Electoral Area G
Walter Popoff, Electoral Area H
Andy Davidoff, Electoral Area I
Rick Smith, Electoral Area J
Paul Peterson, Electoral Area K
Kirk Duff, City of Castlegar
Suzan Hewat, Village of Kaslo
Joseph Hughes, Village of Nakusp
Janice Morrison, City of Nelson
Diana Lockwood, Village of Salmo
Leah Main, Village of Silverton
Jessica Lunn, Village of Slocan
Colin Moss, Village of New Denver

Regional District of Kootenay Boundary

Ali Grieve, Electoral Area A
Linda Worley, Electoral Area B
Grace McGregor, Electoral Area C
Danna O'Donnell, Electoral Area D
Vicki Gee, Electoral Area E
Cathy Korolek, City of Grand Forks
Barry Noll, City of Greenwood
Robert (Fred) Grouette, Village of Midway
Don Berriault, Village of Montrose
Janice Nightingale, City of Rossland
Lisa Pasin, City of Trail
Arlene Parkinson, Village of Warfield
Bill Wenman, Village of Fruitvale

5.2 **Appointment of Alternate Directors**
RECOMMENDATION

That the following Regional District Alternate Directors/Directors be appointed as **Alternate Directors** of the West Kootenay-Boundary Regional Hospital District for 2021:

Regional District of Central Kootenay

Gina Medhurst, Area A
Jace Lamoureux, Area D
Dan Gatto, Area E
Eric White, Area F
Isabelle Herzig, Area G
Briane Verigin, Area H
Andy Ozeroff, Area I
Laurie Watson, Area J
Theresa Weatherhead, Area K
Dan Rye, City of Castlegar
Robert Lang, Village of Kaslo
Tom Zeleznik, Village of Nakusp
Keith Page, City of Nelson
John Fyke, Village of New Denver
Jacquie Huser, Village of Salmo
Colin Ferguson, Village of Silverton
Madeleine Perriere, Village of Slocan

Regional District of Kootenay Boundary

Kirby Epp, Area A
Bill Edwards, Area B
Donna Wilchynski, Area C
Michael Tollis, Area D
Rose Zitko, Area E
Steve Morissette, Village of Fruitvale
Mike Walsh, Village of Montrose
Robert Cacchioni, City of Trail
Diane Langman, Village of Warfield
Andy Morel, City of Rossland
Chris Moslin, City of Grand Forks
Jim Nathorst, City of Greenwood
Richard Dunsdon, Village of Midway

5.3 Appointment of the Executive Committee

Note: If an Executive Committee election occurs, the same election procedures used for Chair and Acting Chair will apply.

RECOMMENDATION

That the following Directors, in addition to the Chair and Acting Chair, are hereby appointed to the Executive Committee of the West Kootenay-Boundary Regional Hospital Board for 2022:

Arrow Lakes/Slocan/Castlegar/Nakusp: _____
Kootenay (Kaslo/Nelson/Salmo): _____
Boundary: _____
Greater Trail: _____

**6. ADOPTION OF THE AGENDA
RECOMMENDATION**

That the agenda for the January 26, 2022 Board meeting be adopted as circulated.

**7. ADOPTION OF THE MINUTES
RECOMMENDATION**

The minutes from the June 23, 2021 Board meeting be adopted as circulated.

8. DELEGATIONS

INTERIOR HEALTH AUTHORITY

Todd Mastel, Interim Corporate Director, Financial Services

Lannon DeBest, Executive Director, Clinical Operations – Kootenay Boundary

8.1 Introduction of Lannon DeBest, Executive Director, Clinical Operations – Kootenay Boundary

8.2 Review of Interior Health Funding Request letter

8.3 Operations Update

9. BUSINESS ARISING OUT OF THE MINUTES

9.1 Aging Population Study

The Aging Population Study prepared by Selkirk Geospatial Research Centre dated August 5, 2015, has been received.

Secretary/Treasurer Horn will provide a verbal update on the Aging Population Study.

RECOMMENDATION

That the WKBRHD Board engage Selkirk College Columbia Basin Rural Development Institute to update the Aging Population study at a cost not to exceed \$18,000 inclusive of GST.

10. NEW BUSINESS

10.1 WKBRHD 2021 Chair's Report

Chair Hewat will provide a verbal summary for 2021 Chair's Report.

10.2 Interior Health Capital Funding Request for 2022/2023 Fiscal Year

The letter from Sylvia Weir, Chief Financial Officer, Interior Health Authority, dated December 23, 2021, has been received.

RECOMMENDATION

That the WKBRHD plan to fund the full amount of the Interior Health Authority's 2022 funding request and that staff be directed to prepare the necessary bylaws for Board consideration at the March 23, 2022 Board meeting.

10.3 Interior Health Authority Capital Projects and Planning Status Report

The Master Summary report for December 2021 has been received from the Interior Health Authority.

10.4 WKBRHD Accounts Payable Summary

The WKBRHD Accounts Payable Summary report prepared by the RDCK Finance Department for June – December 2021, has been received.

10.5 2022 WKBRHD Board Meeting Schedule

The WKBRHD Board conducted an electronic vote October 05, 2021 passing the following resolution:

That the 2022 WKBRHD Board meeting dates be set as follows:

- *Wednesday January 26,*
- *Wednesday March 23,*
- *Wednesday June 22, and*
- *Wednesday October 26.*

Staff were made aware of possible complications with the October meeting date considering the mid-October local government elections. Chair Hewat requested a discussion regarding the 2022 WKBRHD Board meeting schedule.

11. QUESTIONS PERIOD FOR PUBLIC & MEDIA

The Chair will call for questions from the public and members of the media.

12. ADJOURNMENT

RECOMMENDATION

That the meeting adjourn at _____ p.m.



**REGULAR BOARD MEETING
Open Meeting Minutes**

The **third** regular meeting of the Board of the West Kootenay-Boundary Regional Hospital District for the year 2021 was held on Wednesday, June 23 at 6:00 p.m. remotely through electronic participation.

Quorum was maintained for the duration of the meeting.

ELECTED OFFICIALS PRESENT:

Director S. Hewat Kaslo (Chair)

(RDCK)

Director G. Jackman	Area A
Director R Faust	Area E
Director T. Newell	Area F
Director H. Cunningham	Area G
Director W. Popoff	Area H
Director A. Davidoff	Area I
Director P. Peterson	Area K
Director J. Morrison	Nelson
Director C. Moss	New Denver
Director D. Lockwood	Salmo
Director L. Main	Silverton
Director J. Lunn	Slocan

(RDKB)

Director A. Grieve	Area A
Director L. Worley	Area B
Director G. McGregor	Area C
Director D. O'Donnell	Area D
Director L. Kenny	Fruitvale
Director C. Korolek	Grand Forks
Director J. Bolt	Greenwood
Director R. Grouette	Midway
Director D. Berriault	Montrose
Director J. Nightingale	Rossland
Director L. Pasin	Trail
Director A. Parkinson	Warfield

ALTERNATE DIRECTORS PRESENT:

Director J. Lamoureux

Area D, RDCK

STAFF PRESENT

Mr. S. Horn

Secretary/Treasurer

Mr. M. Morrison

Deputy Secretary

Ms. C. Hopkyns

Recording Secretary

1. CALL TO ORDER & WELCOME

Chair Hewat called the meeting to order at 6:00 p.m.

2. ADOPTION OF THE AGENDA

Moved By: Director Pasin and seconded,
And Resolved:

21/21 That the agenda for the June 23, 2021 Board meeting be adopted as circulated.

Carried

3. ADOPTION OF THE MINUTES

Moved By: Director Pasin and seconded,
And Resolved:

22/21 That the minutes from the March 25, 2021 Board meeting be adopted as circulated.

Carried

That the minutes from the June 21, 2021 Executive Committee meeting be received.

3 DELEGATIONS

INTERIOR HEALTH AUTHORITY

Todd Mastel, Interim Corporate Director, Financial Services

Diane Shendruk, Executive Director, Clinical Operations - Kootenay Boundary

3.2 Nelson Health Campus project update and review of Q&A document in response to Board request from March meeting.

Todd Mastel presented an overview of the Nelson Health Campus Question and Answer Summary requested by the Board at the March meeting, noting the following:

- The Campus will provide Long-term Care bed and space for future IH community services at the existing Mount St Francis site;
- IH is currently in contract negotiations with the preferred Proponent;
- The successful Proponent will design and build the Campus to IH requirements and lease the facility to IH ;
- IH will operate and manage the Long-term Care beds;
- All the beds will be in private rooms and experiences from COVID-19 will be incorporated into the design;
- There may be a request in the future from IH to the Regional Hospital District to support clinical equipment or improvements.
- The current cost escalation in the overall construction market is having an impact on the cost of this project.

3.3 KBRH Phase 2 Ambulatory care project update including KBRH Foundation fundraising campaign.

Todd Mastel provided update to the Board regarding the KBRH Pharmacy and Ambulatory Care Project. He reviewed the project timeline, sharing the overall project completion date is March 2023. Todd noted the project budget is \$38.775 Million (MoH - \$23.265M, WKBRHD - \$15.51M).

Todd updated the Board on the KBRH Foundation Fundraising Campaign. Todd shared that the campaign fundraising goal is \$750,000, supporting additional equipment for the project primarily for Ambulatory Care and Oncology. It will also allow for many current items that are approaching end of life but not in scope of the project budget to be upgraded in conjunction with the occupying the new space. The Campaign duration will run to March 2023.

4 BUSINESS ARISING OUT OF THE MINUTES

5.1 WKBRHD Board Membership

Mike Morrison, Deputy Secretary, provided an update to the Board on the issue raised at March meeting regarding the formal appointment of a Regional District Alternate Director as director to the WKBRHD Board. The WKBRHD letters patent indicates that regional district Alternate Directors cannot be formally appointed as Directors to the WKBRHD Board.

5 NEW BUSINESS

5.2 WKBRHD priorities for UBCM Convention

Chair Hewat will provide an update to the Board regarding the Executive Committee's discussion on WKBRHD priorities for the UBCM Convention. The Chair shared the Executive Committee determined that the following priorities:

Interior Health's capital funding priorities:

- Long term care space in Nelson;
- MRI unit in Trail;
- Oncology department in Nelson;
- Emergency department in Castlegar and Grand Forks;

The Executive Committee priorities:

- Rural health care delivery;
- Improving patient transport services;
- Primary care.

5.3 Letter from RDKB Board Chair to Interior Health Authority CEO Susan Brown regarding Integrated Treatment Teams.

The letter dated April 30, 2021 from Diane Langman, Regional District of Kootenay Boundary Board Chair, re: Substance Use – Integrated Treatment Teams, has been received.

5.4 Letter from Capital Regional Hospital District Board Chair to the Minister of Health regarding revisions to the Hospital District Act

The letter dated March 29, 2021 from Capital Regional Hospital District Board Chair, re: Revisions to Hospital District Act (HDA), has been received.

5.5 WKBRHD Administration contract

The Memorandum dated June 15, 2021 from Mike Morrison, Deputy Secretary, re: 2020 WKBRHD Administration Contract, has been received. The Administrative Services Agreement dated October 15, 2015 is attached for reference.

Mike Morrison, Deputy Secretary, was available for any questions from the Board.

Moved By: Director Pasin and seconded,
And Resolved:

23/21

That the Board authorize a one-year Administrative Services Agreement between the West Kootenay Boundary Regional Hospital District and the Regional District of Central Kootenay covering the period between January 1, 2021 to December 31, 2021 at the same terms as the 2016-2020 agreement at a total value of \$100,902 and that the Board Chair and Deputy Secretary be authorized to sign the necessary documents.

Carried

Moved By: Director Pasin and seconded,
And Resolved:

24/21

That staff be directed to commence a Request For Quotes process to procure administrative services for the West Kootenay Boundary Regional Hospital District for a five-year period commencing January 1, 2022.

Carried

Moved By: Director McGregor and seconded,
And Resolved:

25/21

That the Executive Committee be tasked with reviewing submitted quotes and recommending contract award to the Board for the Request For Quotes process to procure administrative services for the West Kootenay Boundary Regional Hospital District for a five-year period commencing January 1, 2022.

Carried

5.6 2020 WKBHRD Audited Financial Statements

The Audited Financial Statements for the West Kootenay-Boundary Regional Hospital District provided by Grant Thornton dated December 31, 2020, has been received.

Stuart Horn, Treasurer, reported to the Board that the 2020 Long Term debt is retired and the WKBHRD is debt free.

Moved By: Director Pasin and seconded,
And Resolved:

26/21

That the Board approve the audited financial statements for the West Kootenay Boundary Regional Hospital District for the year ended December 31, 2020.

Carried

6.6 Interior Health Authority Capital Project Planning and Status Report

The Master Summary report for April and May 2021 has been received from the Interior Health Authority.

6.7 WKBHRD Accounts Payable Summary

The WKBHRD accounts payable summary prepared by the RDCK Finance Department dated June 14, 2021 has been received.

6 QUESTIONS PERIOD FOR PUBLIC & MEDIA

No questions from the public or members of the media.

6. ADJOURNMENT

Moved By: Director Davidoff and seconded,
And Resolved:

27/21 That the meeting adjourn at 7:00 p.m.

Carried

Suzan Hewat, Board Chair

Mike Morrison, Deputy Secretary

Interior Health 2022/23 Funding Request

Presentation to West Kootenay Boundary Regional Hospital District

Lannon De Best – Executive Director, Clinical Operations, Kootenay Boundary
Todd Mastel – Corporate Director, Business Operations

January 26, 2022

IH Capital Budget – 2022/23

Challenging year in prioritizing capital

- Aging infrastructure and equipment
- Strategic priorities and service level growth
- Rising Costs



Projected Escalation 2022 - 2024

Projected escalation over the next three years

- 2022 – 2023: 14 to 16 %
- 2023 – 2024: 12 to 14 %
- 2024 – 2025: 10 to 12 %

Mitigation strategies:

- Match the delivery model to project complexity, schedule and risks;
- Assess market conditions and supply chain factors frequently and make informed decisions;
- Increased due diligence in procurement to consider contractor commitments, liquidity, and other factors.



2022/23 Capital Funding Request Review of Items



\$3.8M Total Funding Request

Facility	Location	Equipment/Project Description	Total Budget	RHD Share	Previous RHD Approval		2022/23 Funding Request
					Amount	B/L #	
		<u>Construction Projects over \$100,000</u>					
East Shore Community Health Centre	Crawford Bay	Generator	\$ 300,000	\$ 120,000			\$ 120,000
Kootenay Lake Hospital	Nelson	Building Voltage Regulation	218,600	87,440			87,440
Kootenay Boundary Regional Hospital	Trail	MRI - Planning	150,000	60,000			60,000
		<u>Construction Projects under \$100,000</u>					
Nelson Campus	Nelson	Leasehold Improvement New Long Term Care	5,000,000	2,000,000			2,000,000
Arrow Lakes Hospital	Nakusp	Fire Alarm System Upgrade	99,000	39,600			39,600
Boundary Hospital	Grand Forks	Chemotherapy Relocation	95,000	38,000			38,000
Nelson Friendship Outreach Clubhouse	Nelson	Safety Exit	75,000	30,000			30,000
		<u>IH-Wide Digital Health</u>					
Regional		Various	955,500	382,200			382,200
		<u>Equipment over \$100,000</u>					
Kootenay Boundary Regional Hospital	Trail	Medstation - Additional	743,750	297,500			297,500
Various	Various	Laboratory Middleware	353,000	141,200	\$ 49,200	324	92,000
Arrow Lake Hospital/Boundary Hospital	Nakusp/Grand	Chemistry Analyzer (x2)	218,000	87,200			87,200
Kootenay Boundary Regional Hospital	Trail	Navigation System ENT	197,000	78,800			78,800
		<u>Equipment under \$100,000 (Global Grant)</u>					
All Facilities		Equipment between \$5,000 and \$100,000	1,124,000	449,600			449,600
TOTAL			\$ 9,528,850	\$ 3,811,540	\$ 49,200		\$ 3,762,340



Construction Projects over \$100K

- **Nelson Campus, Leasehold Improvements for New Long Term Care Building**
- Total Budget = \$5.0Million, RHD Share = \$2.0Million
- Scope includes COVID related improvements for Resident areas:
 - increased HVAC capacity to ensure optimal air flow
 - smaller neighbourhoods and separate support areas
 - allow for separation of neighbourhoods in the case of an outbreak.
- **East Shore Community Health Centre Electrical Generator**
- Total Budget = \$300K, RHD Share = \$120K
- Scope includes back up generator, connections & enclosure
 - site is prone to power outages
 - due to the urgency of this project, we anticipate beginning prior to April 1, 2022.



Construction Projects over \$100K

- **KLH Building Voltage Regulation System**
- Total Budget = \$219K, RHD Share = \$87K
- Scope includes voltage regulating equipment between the utility transformer and electrical service entrance to the site
 - building systems equipment will perform better and last longer
 - co-benefits of energy cost reduction.
- **KBRH Magnetic Resonance Imaging (MRI) - Planning**
- Total Budget = \$150K, RHD Share = \$60K
- Scope includes planning for a future fixed MRI at this site
 - the fixed MRI will replace the current mobile unit
 - accessing would be significantly improved with a fixed/permanent MRI
 - also address the increasing safety and quality requirements.



Construction Projects under \$100,000

- **ALH Fire Alarm System Upgrade**

- Total Budget = \$99K, RHD Share = \$40K
- Scope includes replacement of quick start annunciator panel, wiring and components:
 - current system is obsolete and parts are no longer available.

- **BDH Chemotherapy Clinic Relocation**

- Total Budget = \$95K, RHD Share = \$38K
- Scope includes relocating the clinic to WHERE IN THE FACILITY?
 - Service requires a larger area with 2 additional chemotherapy chairs.

- **Nelson Outreach Clubhouse Safety Exit**

- Total Budget = \$75K, RHD Share = \$30K
- Scope includes an outside exit route on the second story for fire and urgent exit purposes.



IH-Wide Digital Health

- IH-Wide initiative with benefits distributed equally across all regions costing approximately \$9.5 million
- Cost allocation to the RHD's based on population
- West Kootenay Boundary allocation = 10% (\$956K, RHD 40% = \$382K)



IH-Wide Digital Health

Includes multiple elements

- Network infrastructure hardware & software
- Continuation of MyHealthPortal expansion
 - patients access to their information and appointments
- Primary & Community Care Transformation
- Telephone system replacements
- Protection from cyber attacks



MyHealthPortal

Sign In

Welcome to Interior Health's MyHealthPortal.

For best performance, we recommend using the latest browser versions of Google Chrome, Microsoft Edge and Safari. All older versions and other browsers not listed here are not recommended and will not be supported.

Please be advised that our Terms and Conditions have been updated and you will be prompted to read and accept at your next log in.

Logon ID (required)

Password (required)

[Sign in](#)

[Forgot Logon ID?](#)

[Forgot Password?](#)

Don't have an account?
[Sign up](#)



Equipment over \$100K

- **KBRH Additional Medstations**
- Total Budget = \$744K, RHD Share = \$298K
- Automated Dispensing Cabinets (ADC) for medications
 - This technology has brought improvements in patient safety and workflow
 - Currently in use @ KBRH in Emergency Department & Inpatient Units
 - This would replace manual drug distribution used within a number of other departments (i.e. Operating Room areas, Maternity, Oncology).
- **IH Wide Laboratory Middleware (additional request)**
- KB Budget = \$353K, RHD Share = \$141K
- Previous RHD approval = \$49K, **additional request = \$92K**
- Middleware is software that connects laboratory analyzers and the Laboratory Information System
 - IH budget (updated) = \$3.5Million, KB share – 10%.



Equipment over \$100K

- **ALK & BDH Laboratory Chemistry Analyzers**
- Total Budget = \$218K, RHD Share = \$87K
- One analyzer for each hospital
 - units being replaced are at Arrow Lakes Hospital (purchased in 2011), and Boundary Hospital (purchased in 2007).
- **KBRH Ears, Nose and Throat (ENT) Surgical Navigation System**
- Total Budget = \$197K, RHD Share = \$79K
- Instrument tracking system used for surgery that can be compared to a global positioning system in a car
 - Replacing a system purchased in 2012 where parts and support will no longer be available .



Equipment under \$100,000

- **Global Grant for equipment that costs between \$5,000 and \$100,000**
- Total Budget = \$1.124Million, RHD Share = \$450K
 - Will provide an initial proposed listing for your next Board meeting
 - Detailed report of actual items and costs provided at end of the fiscal year.





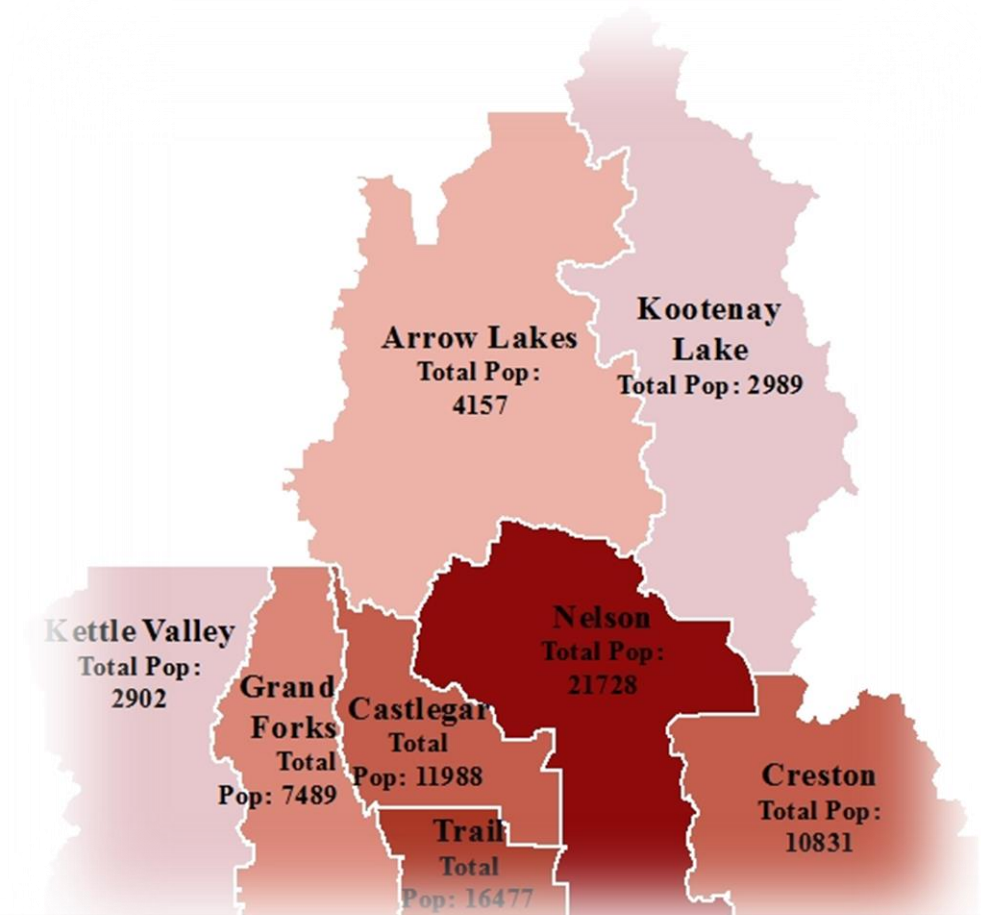
Questions



Thank you for your
support



Aging Populations and Health Services in the West Kootenay Boundary Regional Hospital District



05 August 2015

A preliminary analysis of changing demographics, select available health service facilities and transportation options within the WKBRHD

Prepared for: Walter Popoff, Ramona Faust, Garry Jackman
Regional District of the Central Kootenay, Regional Directors

Prepared By: Kailee Woodbeck, GIS Developer
Ian Parfitt, SGRC Coordinator
Selkirk Geospatial Research Centre



Table of Contents

List of Tables	3
List of Figures	4
Introduction	5
Overview	5
Project Scope	5
Analysis	6
Population Projections	6
Service Areas	9
Ground Ambulance/ Emergency Room	9
Diagnostic Facilities	10
Care Beds	12
Hospital Care	12
Long Term Care	14
Transportation	17
Conclusion	20
Discussion	20
Recommendations	22
Literature Cited	24

List of Tables

Table 1. Cities, towns and communities in each LHA within the WKBRHD..... 6

List of Figures

Figure 1. Map of study area.	5
Figure 2. Percent population by age group of combined LHAs.....	6
Figure 3. Projection of percent population of 'baby boomers' in WKBRHD LHAs.....	7
Figure 4 Projection of percent population over 65 in WKBRHD.....	8
Figure 5. Percent change in population by LHA from 2004 to 2034.....	8
Figure 6. Service areas for BC Ambulance Service in the WKBRHD.....	9
Figure 7. Map displaying previous and current emergency room service areas.	10
Figure 8. Percentage of houses from 2002 and 2015	10
Figure 9. Diagnostic facility by service type. From top left to right: Pulmonary Function, Radiology and Diagnostic Ultrasound service areas. From bottom left to right: Nuclear Medicine, Electroencephalography and Electromyography service areas.	12
Figure 10. Comparison of number of beds per 1000 people.....	12
Figure 11. Number of beds/ 1000 people by hospital in WKBRHD.	13
Figure 12. Hospital beds by functional centre in central Kootenay region.....	13
Figure 13. Number of Long Term Care Beds by Town from 2002 to 2015	14
Figure 14. Change in Long Term Care Beds.	14
Figure 15. From left to right: Long term care beds vs. percent population age 65 and over, 50- 64 and under 50 years.....	15
Figure 16. Long term care beds per 1000 people.....	16
Figure 17 Estimate of population over 85 years requiring care vs. number of long term care beds.....	16
Figure 18. BC Transit Bus schedule for RDCK and Trail.	18
Figure 19. From left to right: HandyDart, Health Connections and Paratransit service routes.	19

Introduction

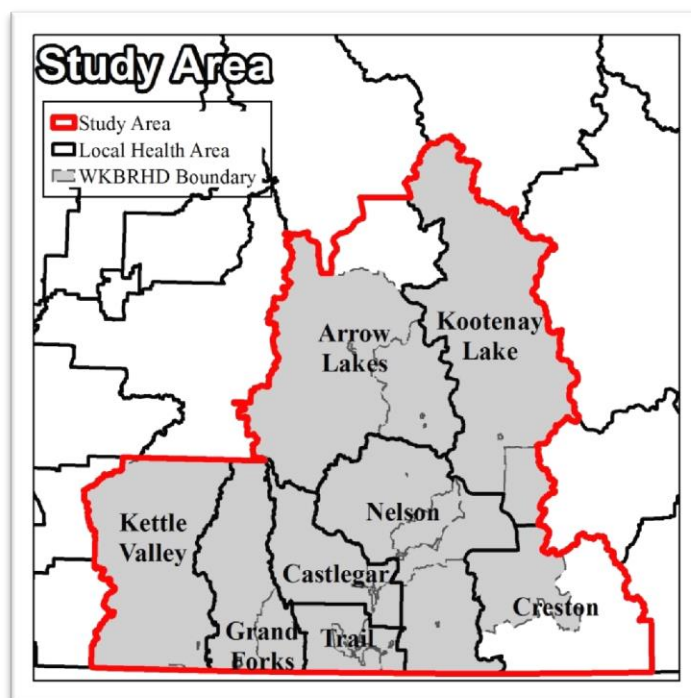
Overview

The West Kootenay Boundary Regional Hospital District (WKBRHD) is an area that encompasses 78 000 km² with a population of approximately 78 000 residents. This relatively remote region is characterized by rugged terrain, winding roads and challenging weather conditions. Low populations, geographic remoteness and long travelling times contribute to the challenges of providing appropriate access to health care in the communities within the WKBRHD.

These challenges have been compounded by the closure and/ or transfer of diagnostic services and decreasing hours of operation of existing services. The movement of services to urban areas can reduce health delivery costs to the provincial government through centralization of services, but this strategy results in longer travelling times for residents requiring health care in rural and remote communities. Rural Health Service BC classifies 7 communities within the WKBRHD as rural or remote including; Grand Forks, Creston, Nelson, Castlegar, Nakusp, Kaslo and New Denver¹. Aging people typically require more health services, and approximately 37% of the population within the WKBRHD's local health areas are projected to be over the age of 65 by 2025. With a significant percentage of the population aging in the WKBRHD, it is important to review existing health care services to make informed decisions based on the District's health care needs.

Project Scope

The purpose of this project was to analyze the population demographics and health services within the WKBRHD to help evaluate the infrastructure in place to accommodate the changing population demographic. Populations, health facility service areas, as well as hospital and long term care bed counts in the region were analyzed. Transportation options within the Regional District of the Central Kootenay (RDCK) were evaluated as a pilot for future research opportunities for the district. Analysis for this project was performed using geographic information system (GIS) technologies, a system designed to analyze data with a geographic component².



Source: GIS data of LHA and electoral boundaries obtained through BC Stats, WKBRHD boundary approved by RDCK district managers.

Figure 1. Map of study area.

¹ Ministry of Health. 2015. Rural Health Services in BC: A Policy Framework to Provide a System of Quality Care. <http://www.health.gov.bc.ca/library/publications/year/2015/rural-health-policy-paper.pdf>. 03/26/2015.

² ESRI. 2015. What is GIS? <http://www.esri.com/what-is-gis>. 03/27/2015.

Local Health Area	City	Town/ Village	Community
Arrow Lakes		Nakusp	Edgewood
		New Denver	Fauquier
		Silverton	Burton
			Trout Lake Hills
Castlegar	Castlegar		Robson Deer Park
Creston		Creston	Yahk
			Kitchener
			Boswell
			Wyndel
Grand Forks	Grand Forks		Christina Lake
Kettle Valley	Greenwood	Midway	Rock Creek
			Bridesville
			Westbridge
			Beaverdell
Kootenay Lake		Kaslo	Crawford Bay
			Riondel
		Meadow Creek	Ainsworth Hot Springs
			Argenta
			Gray Creek
Nelson	Nelson	Slocan	Winlaw
		Salmo	Ymir
		Balfour	
Trail	Trail	Warfield	Genelle
		Rossland	
		Montrose	
		Fruitvale	

The WKBRHD consists of electoral districts from the RDCK and the Regional District of the Kootenay Boundary (RDKB). For the purpose of this project, the Ministry of Health’s Local Health Area (LHA) administrative boundaries were used for analysis. The Cities/ Towns and communities within each LHA within the WKBRHD are displayed in Table 1.

The LHA boundaries used for analysis differ slightly from the WKBRHD boundary, as shown in Figure 1. Mention of the WKBRHD in this report refers to the study area used as shown above.

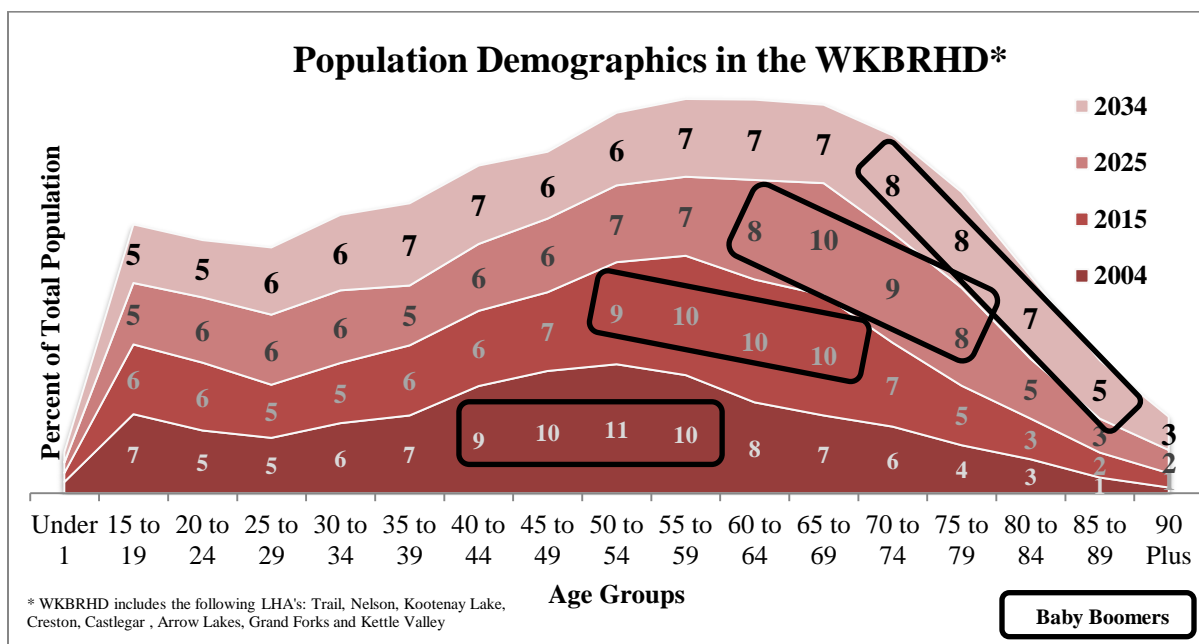
Source: BC Stats, Data BC.

Table 1. Cities, towns and communities in each LHA within the WKBRHD.

Analysis

Population Projections

The projected change in population demographics were analyzed for the Trail, Nelson, Kootenay Lake, Creston, Castlegar, Arrow Lakes, Grand Forks and Kettle Valley LHAs. Figure 2 shows the population projection for the LHAs listed above, with the ‘baby boomer’ demographic highlighted. The ‘baby boomers’ demographic refers to the population born from 1946 to 1964.

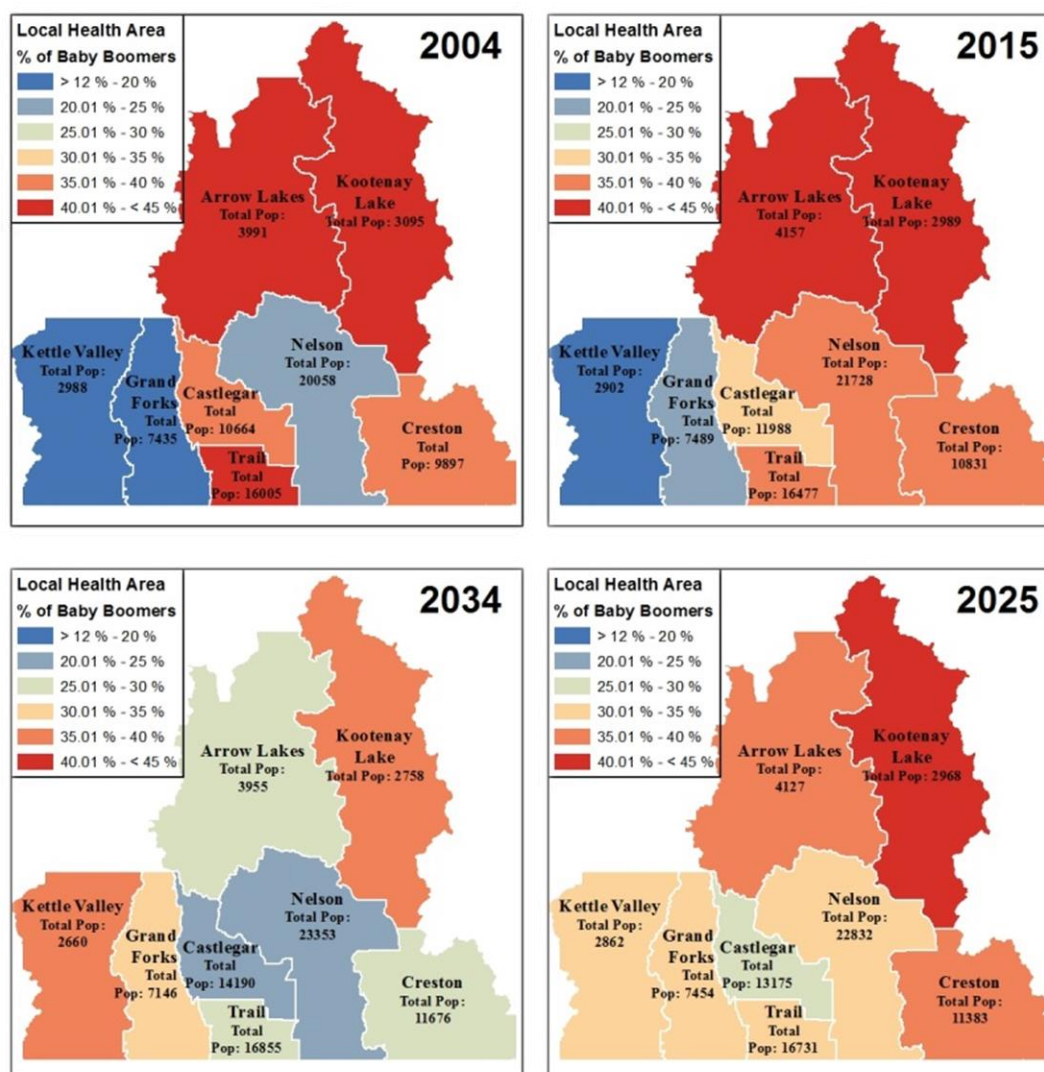


Source: Population projection data obtained through Statistics Canada.

Figure 2. Percent population by age group of combined LHAs.

It is evident from Figure 2 that an increase in the percent population over 65 will occur from 2015 through to 2025. By 2034 that increase will move to the 75 years and older age categories. This increase in the aging population is a result of the aging “baby boomer” demographic.

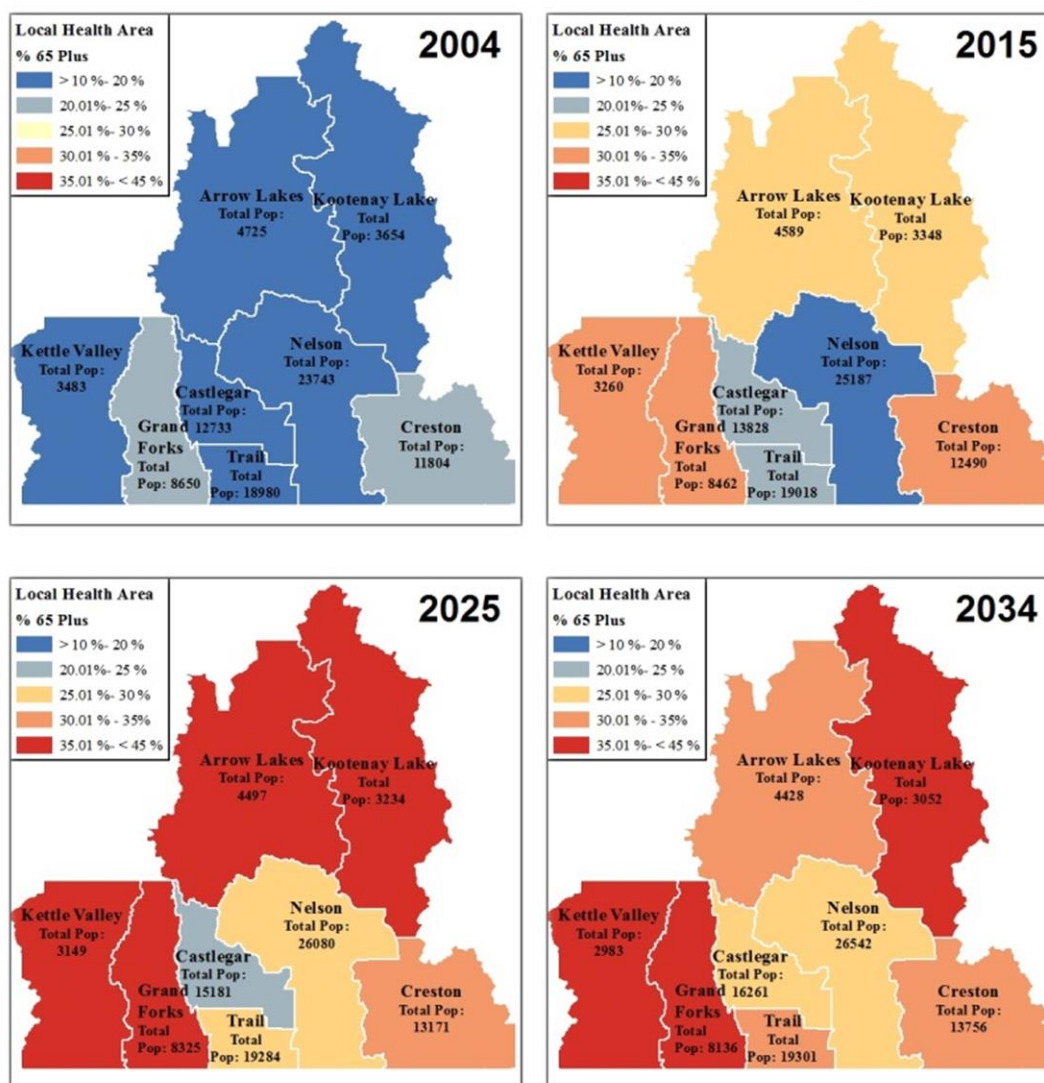
The ‘baby boomer’ demographic contributes to a significant percentage of the population in many LHAs as shown in Figure 3. The Arrow Lakes and Kootenay Lake LHAs in particular currently have over 40% of their population within the ‘baby boomers’ demographic. Baby boomers will continue to dominate the population for the next 20 years, with varying changes to the total population.



Source: Population projection data obtained through Statistics Canada, LHA boundaries obtained from BC Stats.

Figure 3. Projection of percent population of 'baby boomers' in WKBHRD LHAs.

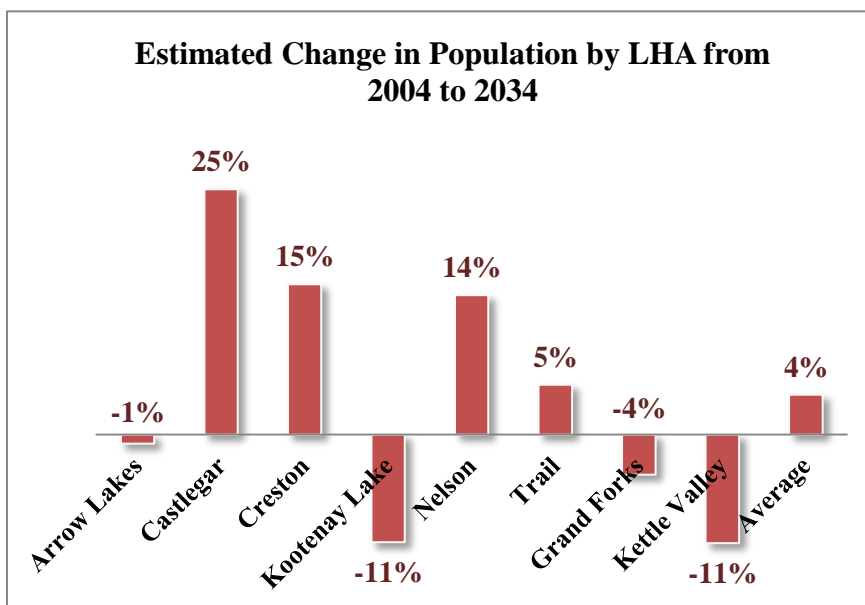
The trend for the population from 2004 to 2034 in the WKBHRD LHAs is an increase in percent of people over the age of 65 shown in Figure 4. From 2004 to 2034, increases in residents over the age of 65 are evident in the Kootenay Lake (9%), Kettle Valley (8%), Grand Forks (7%), Nelson (5%), Arrow Lakes (5%), Creston (3%) and Castlegar (3%) LHAs. Trail LHA however is expected to have a decrease in population over 65 of -4%.



Source: Population projection data obtained through Statistics Canada, LHA boundaries obtained from BC Stats.

Figure 4 Projection of percent population over 65 in WKBRHD.

The total population within the WKBRHD is projected to have a 4% increase from 2004 to 2034. The estimated change in population varies between LHAs over the 30 year timeframe, as shown in Figure 5. Local health areas that are projected to have an increase in population over 30 years include: Castlegar, Creston, Nelson and Trail. Kootenay Lake, Kettle Valley and Grand Forks, however, are estimated to decrease in population from 2004 to 2034. Arrow Lakes LHA is expected to decrease by less than 1% over



Source: Population projection data obtained from Statistics Canada

Figure 5. Percent change in population by LHA from 2004 to 2034.

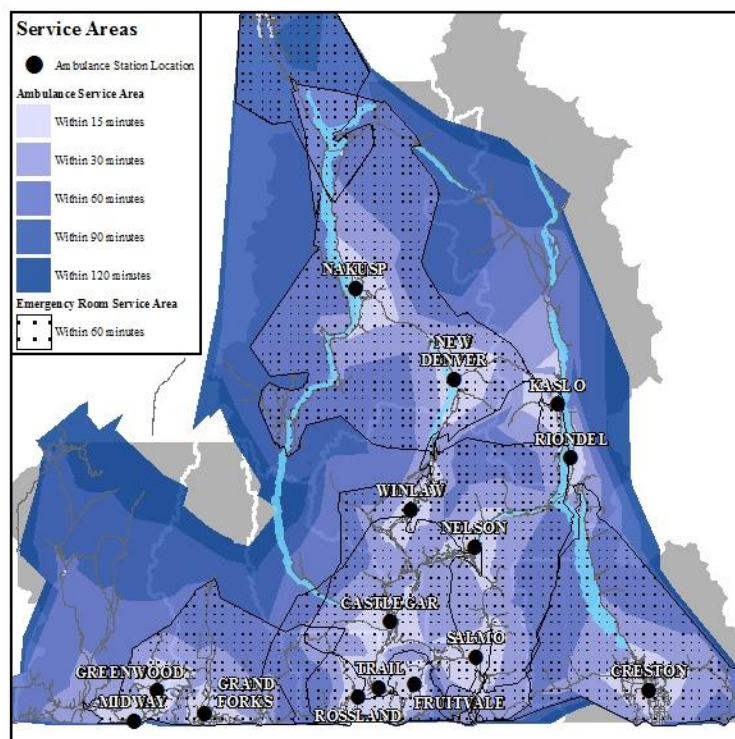
30 years.

The West Kootenay Boundary Regional Hospital District (WKBRHD) on average is projected to have an increase in total population of about 4% over the 30 year period. This increasing population will primarily be in the 65 and over age group. Currently 30% of the WKBRHD's population is over 65. As population increases, the over 65 age group is projected to increase by 4% in the next 20 years throughout the WKBRHD.

Service Areas

Service areas were created to identify gaps in health care services within the West Kootenay Boundary Regional Hospital District (WKBRHD). These service areas were calculated by creating a 'road network' using GIS³. Speed limits were estimated on the road network based on road class. All roads classed as highways were given an 80 km/h speed limit, and all other roads were given a 50 km/hour speed limit. The travelling time was then calculated based on length of road segment and speed travelled. The service area travelling times vary depending on traffic, weather/ road conditions, road construction, ferry dependency/ availability and discrepancies in the estimated speed limit.

Ground Ambulance/ Emergency Room



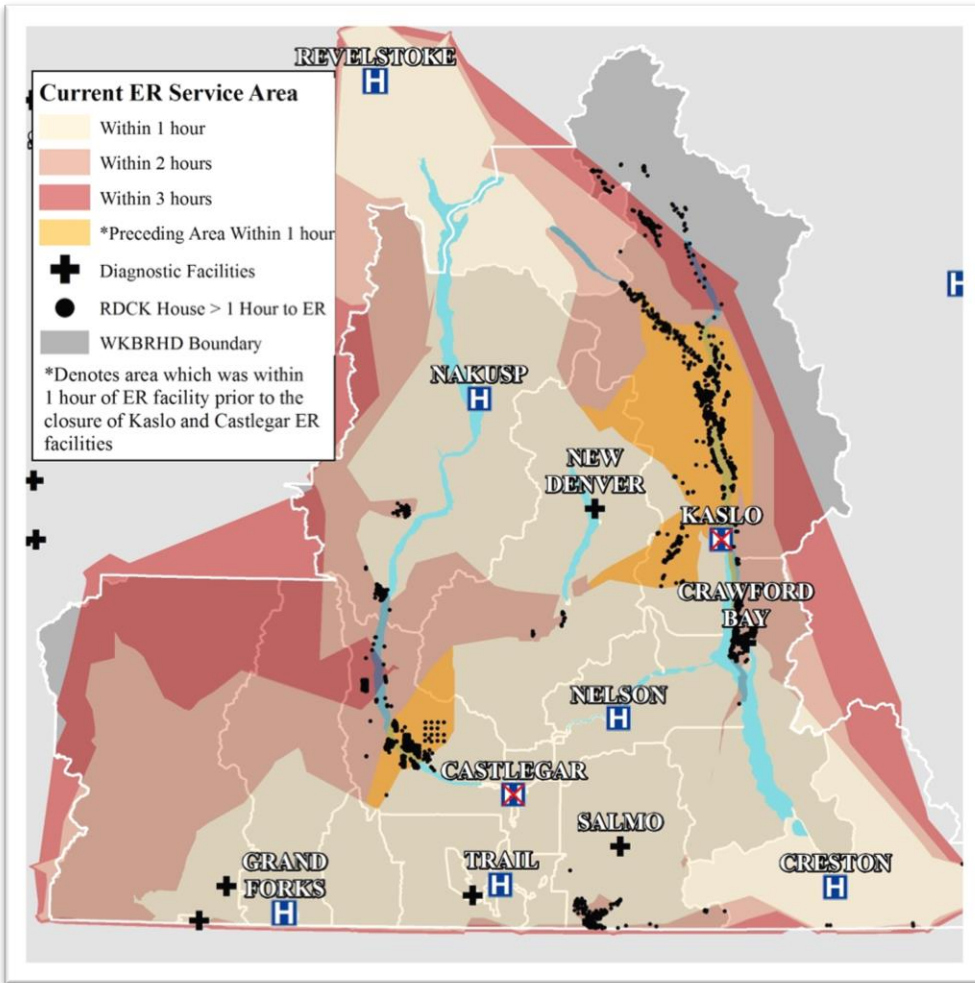
Service areas for the BC Emergency Health Services (BCEHS) ground ambulances were calculated by using the ambulance station as the point of departure and the road network for travelling times. The results of the BCEHS service area response times are shown on Figure 6. Note that these service areas do not take into account the actual speeds ambulance travel. Speed of an ambulance varies frequently depending on; code of the call, road conditions, weather, etc. Wait times as well as other first responder services were not considered for Figure 6.

The actual average response times of each ambulance station was not able to be obtained for this research.

Source: BCAS locations digitized by the SGRC.

Figure 6. Service areas for BC Ambulance Service in the WKBRHD.

³ ArcGIS Resource Center. 2012. Creating a network dataset. ESRI. <http://help.arcgis.com/en/arcgisdesktop/10.0/help/index.html#//0047000005t000000>. (online) 08 APRIL 2015.



Current and previous emergency room service areas were calculated to determine the impact of the ER facility closures the WKBRHD. The results of ER service areas are shown in on Figure 7.

Prior to the closure and/ or reduction in hours of operation at Kaslo and Castlegar ERs, the service area within one hour to an ER was 26867.94 Km² in the WKBRHD. The current one hour service area is now 24685.37 Km². Therefore the WKBRHD lost approximately 8% of area within one hour of an ER facility as a result of the closure of hospitals in Kaslo and Castlegar. Figure 7 highlights the area that lost one

Source: Results from service area analysis RDCK’s dataset on house location

Figure 7. Map displaying previous and current emergency room service areas.

hour ER services in orange. Houses that are currently greater than 1 hour from an ER in the RDCK are displayed as well in Figure 7.

Central Kootenay Electoral Area D was the most heavily impacted by the loss of 24 hour services in Kaslo. The loss of Kaslo’s 24 hour facility reduced the percentage of households within 1 hour to an ER from 95% to 52%. Figure 8 displays the previous and current number of houses within one hour of a 24 hour ER facility.

Diagnostic Facilities

Diagnostic facility service areas were evaluated to visualize regions with gaps in diagnostic services. Using location data for the diagnostic facilities, the travel times to facilities based on diagnostic type were calculated. Figure 9 displays the results of the service areas by diagnostic type as well as availability of the service.

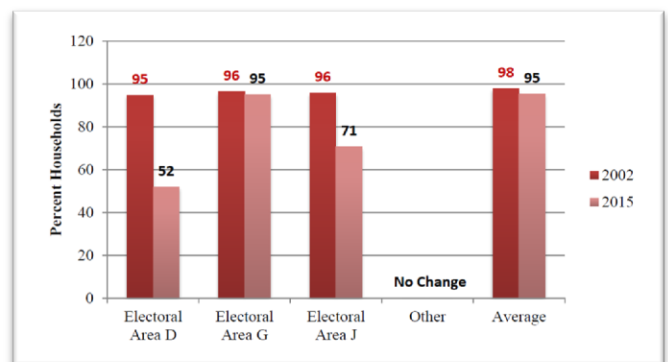
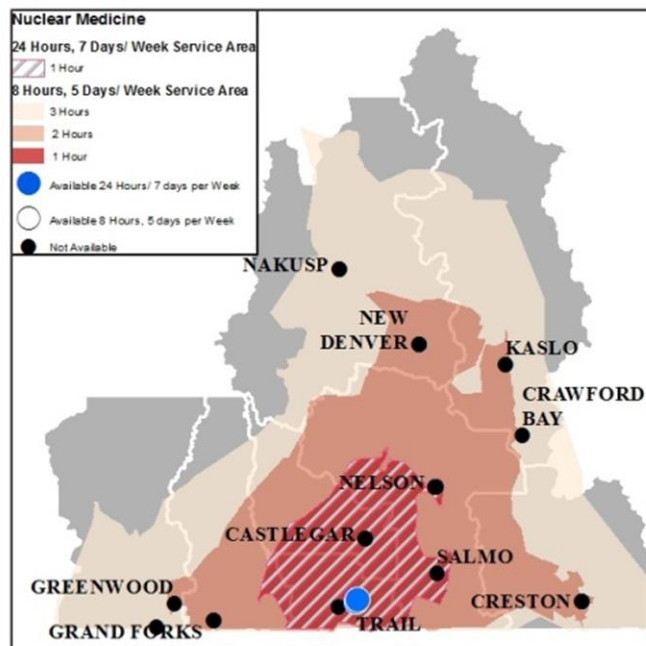
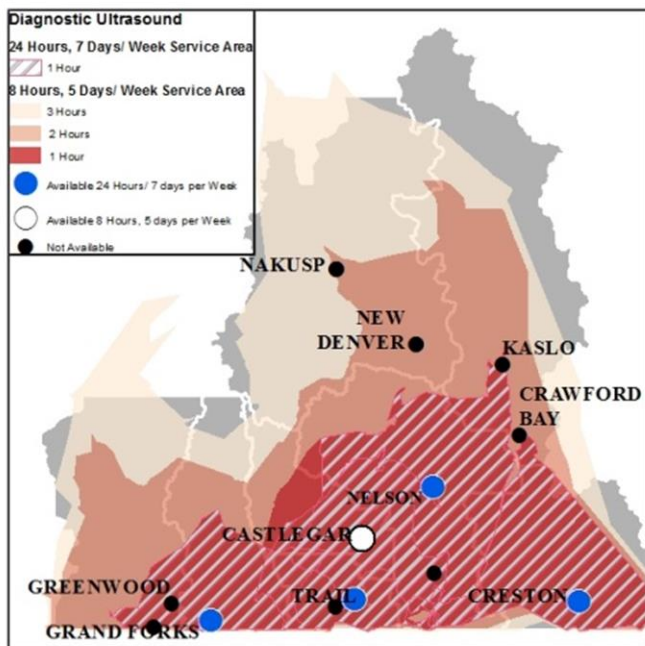
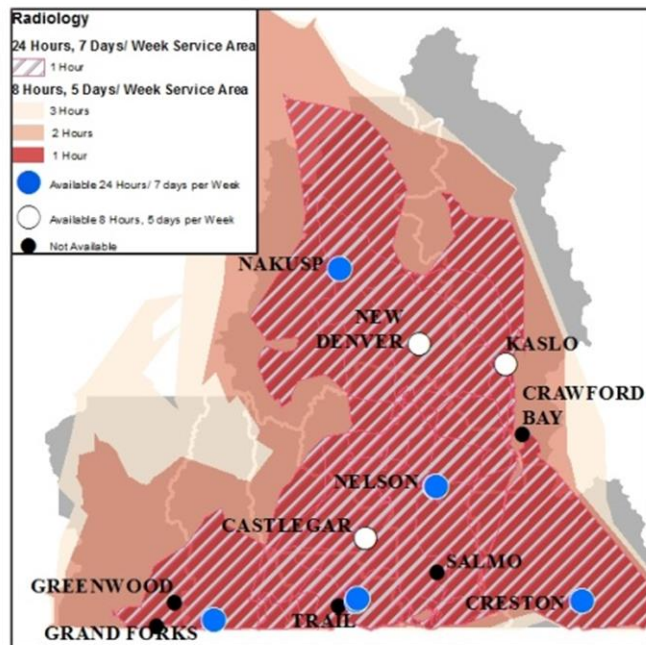
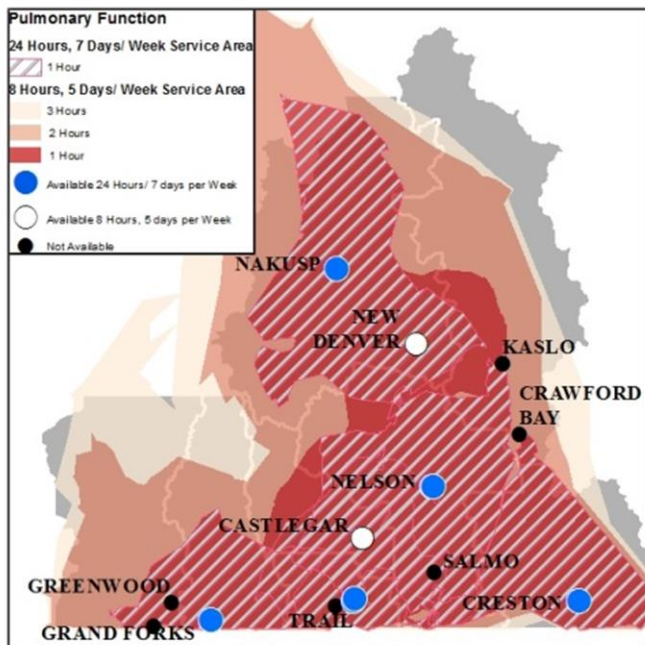
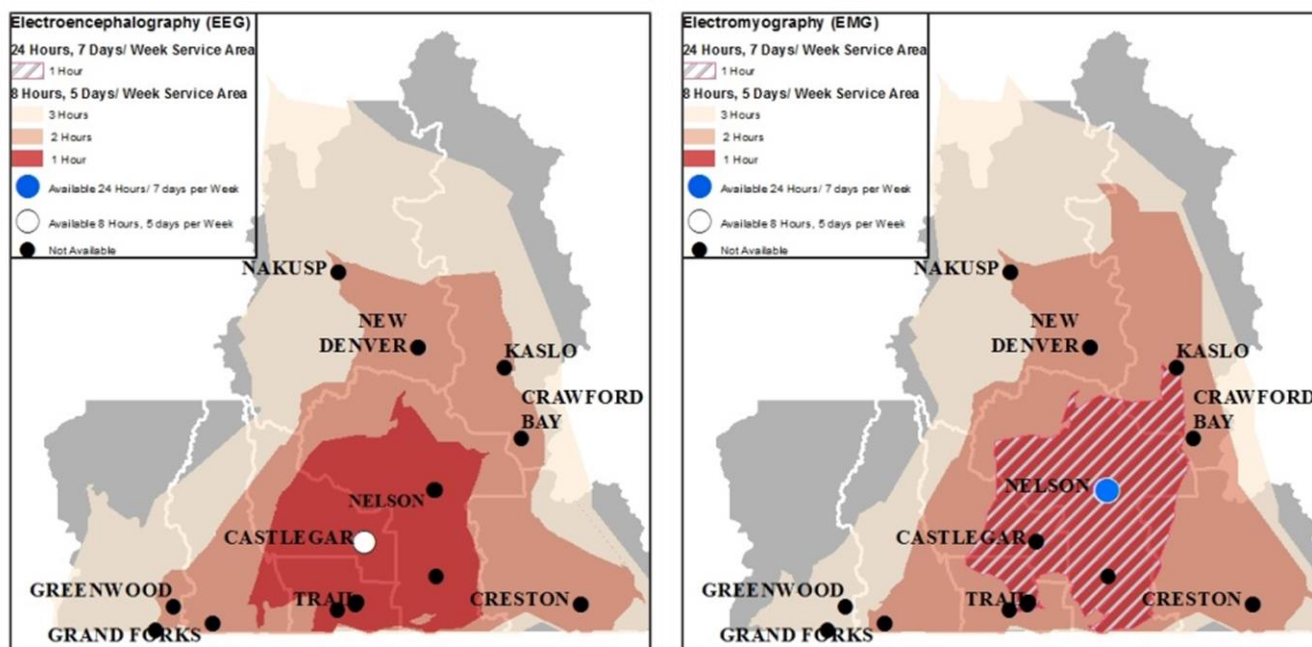


Figure 8. Percentage of houses from 2002 and 2015 within 1 hour of a ER facility.

Source: Road data obtained from Digital Road Atlas and RDCK, LHA boundaries obtained from BC Stats





Source: Diagnostic facility location data obtained from DataBC

Figure 9. Diagnostic facility by service type. From top left to right: Pulmonary Function, Radiology and Diagnostic Ultrasound service areas. From bottom left to right: Nuclear Medicine, Electroencephalography and Electromyography service areas.

The WKBHRD is heavily reliant on facilities in Trail, Castlegar and Nelson for their Nuclear Medicine, Electromyography (EMG) and Electroencephalography (EEG) respective diagnostic services. EMG availability in Castlegar is limited to 8 hours per day, 5 days per week.

The loss of two ER facilities has reduced the service area, and subsequently increased travelling times to an ER for some residents. Almost 50% of houses in Electoral Area D lost one hour service to an ER. It is also evident that the WKBHRD is heavily reliant on diagnostic services in the Trail and Nelson hospitals as well as the Castlegar Health Centre.

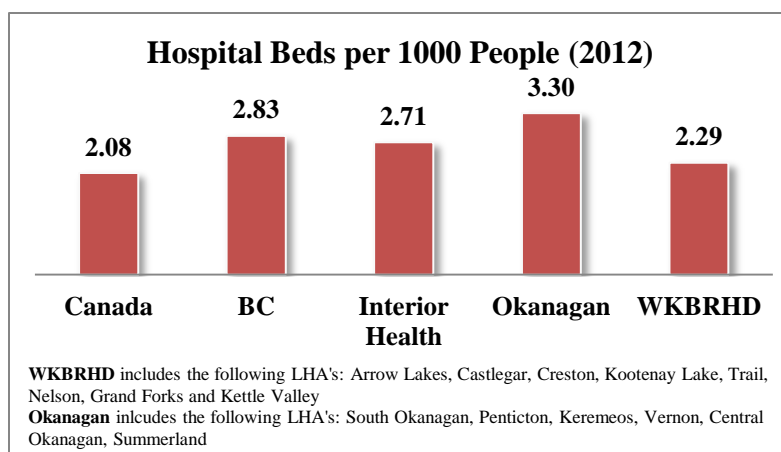
Care Beds

The number of beds within hospitals as well as residential care beds within the long term care facilities was compared to the population data in the WKBHRD.

Hospital Care

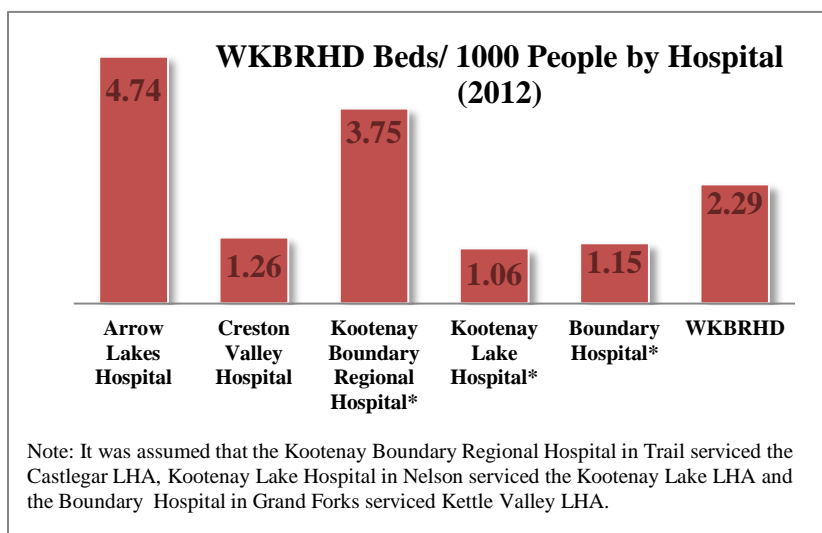
The total number of fully staffed hospital beds per 1000 people within the WKBHRD was compared to the total number of hospital beds on a regional and national scale. The results are shown in

Figure 10. The LHAs within the WKBHRD had an average of 2.29



Source: 2012 Hospital bed data obtained from the Canadian Institute of Health and Information (CIHI), Population data obtained from StatisticsCanada

Figure 10. Comparison of number of beds per 1000 people.

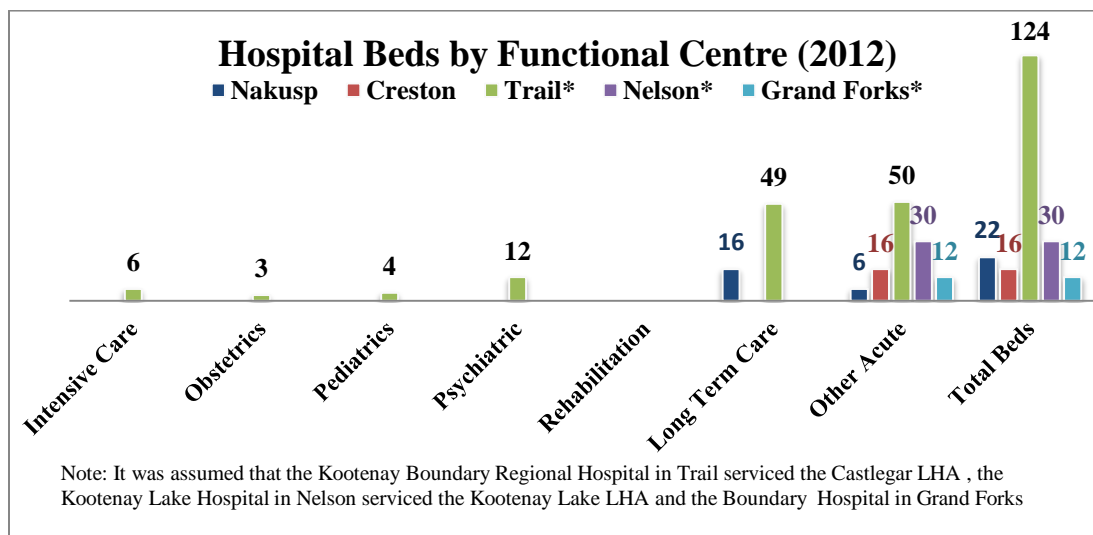


Source: 2012 Hospital bed data obtained from CIHI, Population data obtained from StatsCanada

Figure 11. Number of beds/ 1000 people by hospital in WKBRHD.

residents, 73% of beds at Arrow Lakes Hospital are assigned to the long term care functional centre. When the long term care functional centre beds are omitted from the total bed count, Arrow Lakes Hospital has a count of 1.29/ 1000 residents. Figure 12 displays the number of beds by functional centre for each hospital in the WKBRHD. Kootenay Lake Hospital in Nelson and Boundary Hospital in Grand Forks has 1.06 and 1.15 beds per 1000 people respectively, which are about half the bed counts compared to the Okanagan, Interior Health Authority, BC and Canada.

Hospital beds were evaluated by functional centre for each of the hospitals within the WKBRHD boundary and are displayed in Figure 12. With the exception of long term care beds at the Arrow Lakes Hospital in Nakusp, Trail is the only hospital with beds assigned to specific functional centres.



Source: Hospital bed data by type obtained from CIHI (2012)

Figure 12. Hospital beds by functional centre in WKBRHD.

On average, the numbers of beds in the WKBRHD are lower than the Okanagan, Interior Health and Provincial average, yet higher than the national average. The amount of beds per 1000 people varies significantly across the region.

beds per 1000 people, which was a lower bed density than Okanagan LHAs, Interior Health Authority and all of BC. The WKBRHD is however higher than the national average of 2.08 beds per 1000 people.

The number of beds per 1000 people for each hospital showed significant variability, as shown in Figure 11. For analysis purposes, it was assumed that residents in Castlegar LHA used Trail hospital, Kootenay Lake LHA used Nelson hospital and Kettle Valley LHA used Grand Forks hospital.

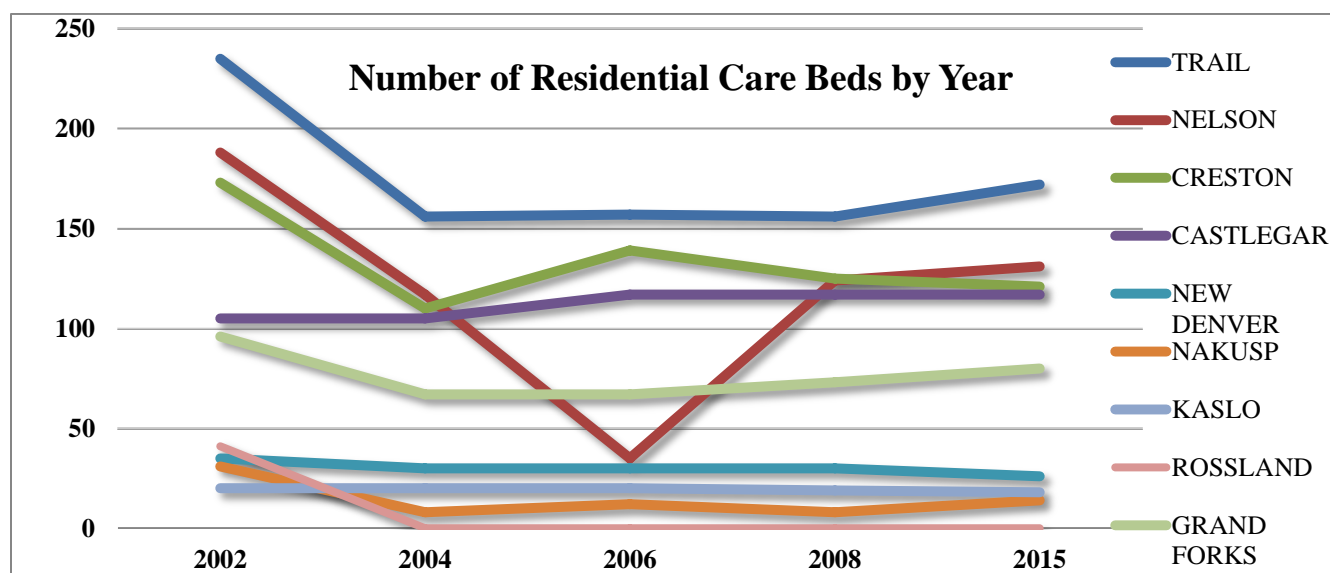
Although Arrow Lakes Hospital in Nakusp has the highest number of beds by population at 4.7/ 1000

The highest being 4.74 beds/ 1000 people in Nakusp and the lowest being 1.06/ 1000 at Kootenay Lake hospital in Nelson. With the exception of Kootenay Boundary Regional Hospital in Trail, there are few hospital beds assigned to specific functional centres within the WKBRHD.

Long Term Care

The changes in residential care bed counts within long term care facilities throughout the WKBRHD were examined from the period of 2002 to 2015. Interior health refers to residential care as “complex health care needs requiring 24-hour professional care”⁴. For this analysis, it was assumed that the residential care bed data falls under Interior Health’s previously mentioned definition of residential care.

Figure 13 displays the number of residential care beds in each town within the WKBRHD by year.

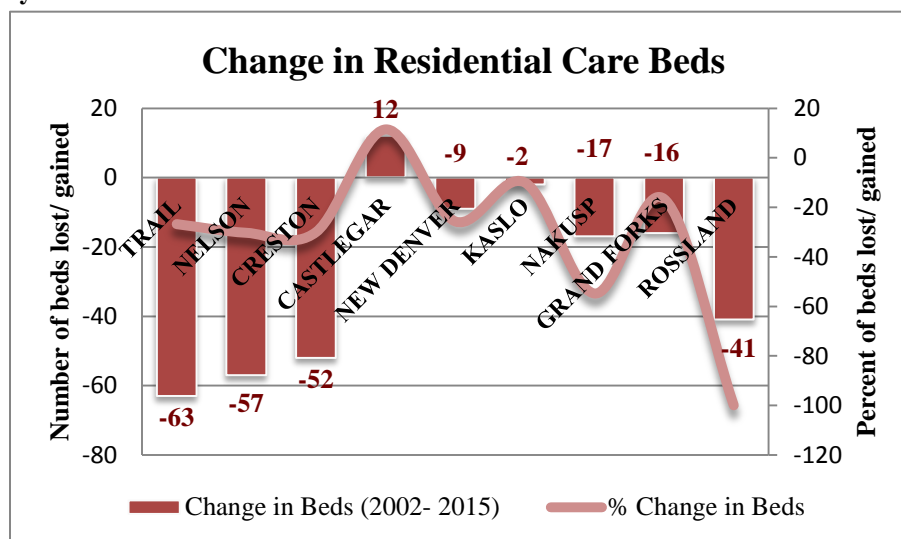


Source: Historical residential care bed counts obtained from PDF document provided by RDCK directors titled “Kootenay Boundary Health Care Losses”, 2015 residential care bed counts obtained from Interior Health Authority website.

Figure 13. Number of Residential Care Beds by Town from 2002 to 2015

The most significant changes in number of residential care beds in the WKBRHD occurred from 2002 to 2004. Rossland and Nakusp lost 100% and 74% of their long term beds respectively. Trail, Nelson, Creston and Grand Forks lost 30-38% of residential care beds within this same time frame.

From 2002 to 2015 the change in residential care beds indicated a trending decrease, shown in



Source: Historical residential care bed counts obtained from PDF document provided by RDCK directors titled “Kootenay Boundary Health Care Losses”, 2015 long term care bed counts obtained from Interior Health Authority website.

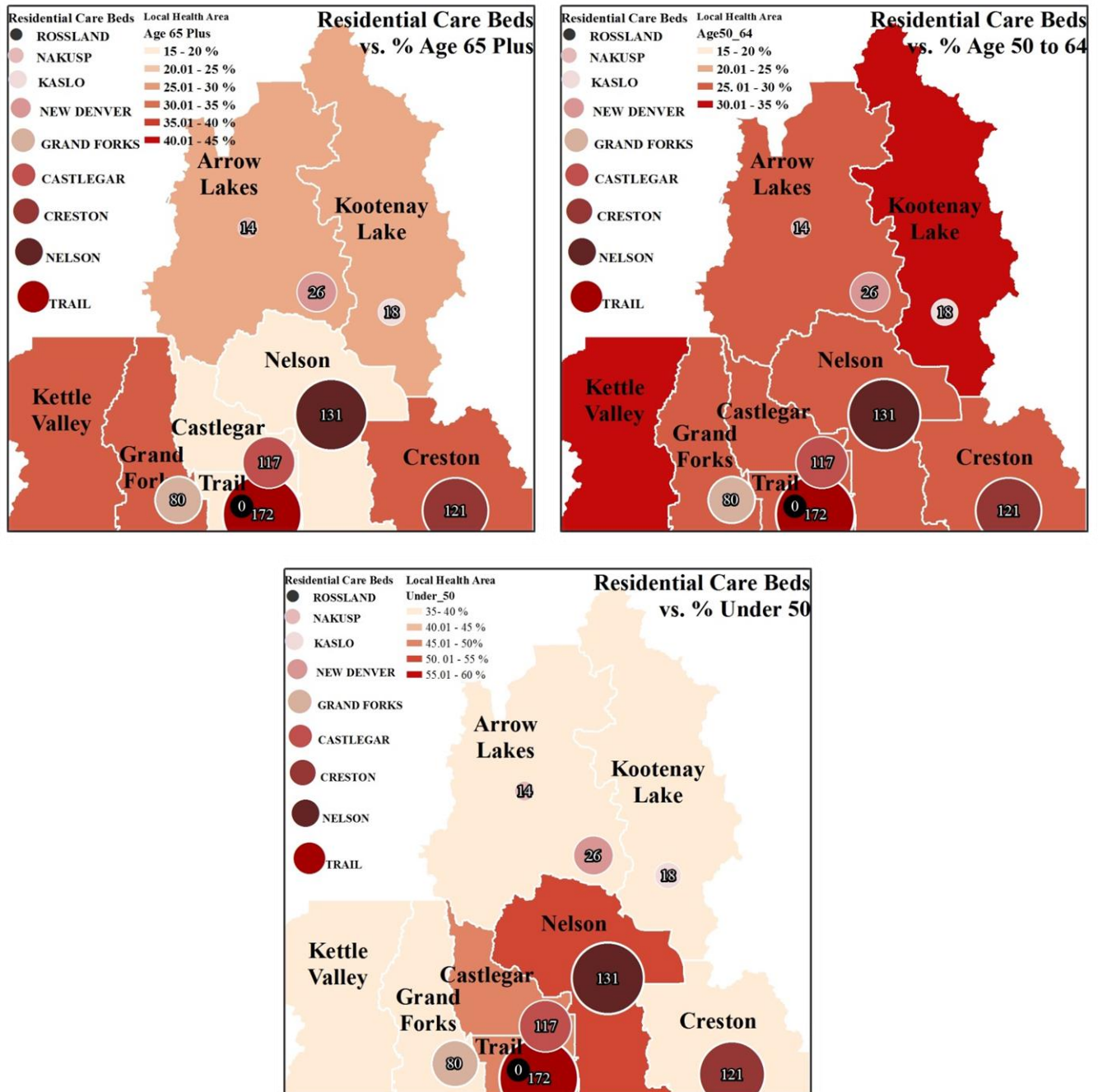
⁴ Interior Health. 2015. Residential Care. <https://www.interiorhealth.ca/YourCare/HousingHealth/ResidentialCare/Pages/default.aspx> (online) 8/4/2014.

Figure 14. Change in Residential Care Beds.

Figure 14.

In total, 245 residential care beds were lost in the WKBRHD from 2002 to 2015. Significant losses in residential care beds occurred in Rossland (-100%), Nakusp (-55%), Creston (-30%), Nelson (-30%), Trail (-26%) and New Denver (-25%). Castlegar was the only city that had an increase in beds at 12%.

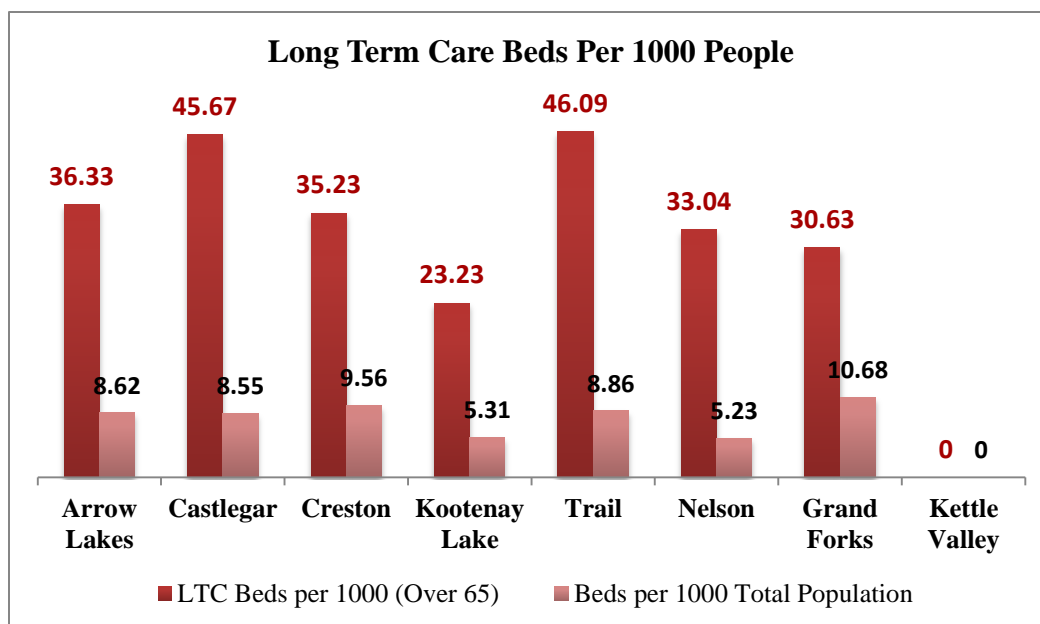
Residential care bed counts were analyzed against population demographics for the LHAs in the region. Figure 15 displays the current number of residential care beds and trends in population, including percent population over the age of 65, percent age 50 to 64 and percent under 50 years.



Source: Current residential care bed numbers obtained from Interior Health Authorities website, Population demographic data obtained from Statistics Canada.

Figure 15. From left to right: Long term care beds vs. percent population age 65 and over, 50- 64 and under 50 years.

Arrow Lakes, Kootenay Lake, Creston, Kettle Valley and Grand Forks LHAs have 30- 35 % of their population over the age of 65. Twenty five to 35 % of the population is between the ages of 50-64 in all of the LHAs within the WKBRHD. It is projected that there will be a 5 to 10% increase of people over the age of 65 throughout the region in the next 20 years.

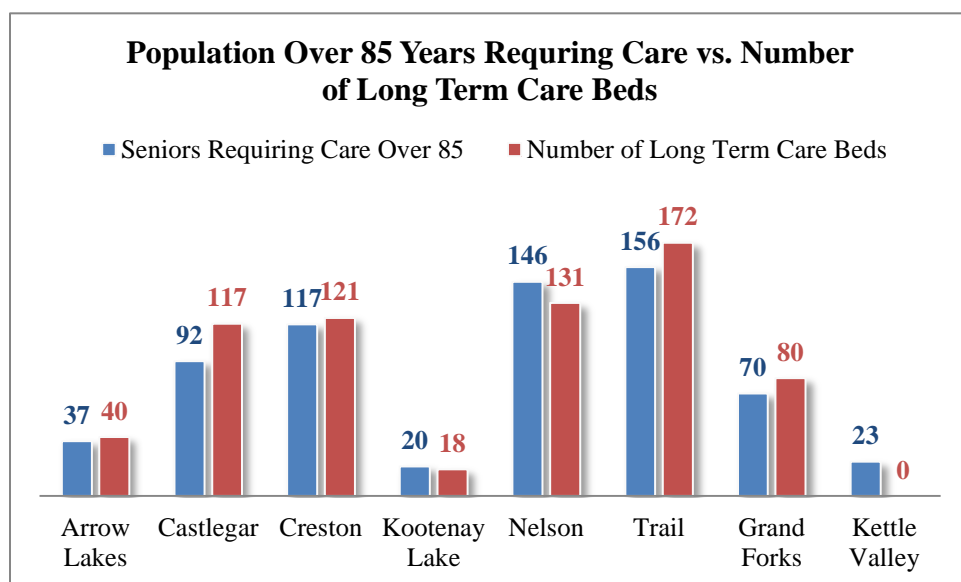


Source: Current residential care bed numbers obtained from Interior Health Authorities website, Population demographic data obtained from Statistics Canada.

Figure 16. Long term care beds per 1000 people.

Currently residential care beds are on the decline at an average of -31% throughout the LHAs within the WKBRHD. Figure 16 displays the number of long term care beds per 1000 people by total population as well as by population over 65 years of age.

A 2011 study conducted by the Canadian Institute for Health and Information (CIHI) found that 25% of seniors over the age of 85 had moderate (15%), severe (5%) or total limitation (5%) of functional capacity⁵. Based on this study,



the number of seniors over 85 assumed to have a limitation of functional capacity within the WKBRHD was calculated. The results of this analysis compared to the number of residential care beds in the WKBRHD are shown in Figure 17.

The number of residential care beds in the local health areas compared to the estimated number of seniors over 85 experiencing functional limitations is relatively similar. Nelson LHA, however, has a larger number of estimated

Source: Current residential care bed numbers obtained from Interior Health Authorities website. Population demographic data obtained from Statistics Canada. Seniors requiring residential care calculated based on research performed by the CIHI.

Figure 17 Estimate of population over 85 years requiring residential care vs. number of long term care beds.

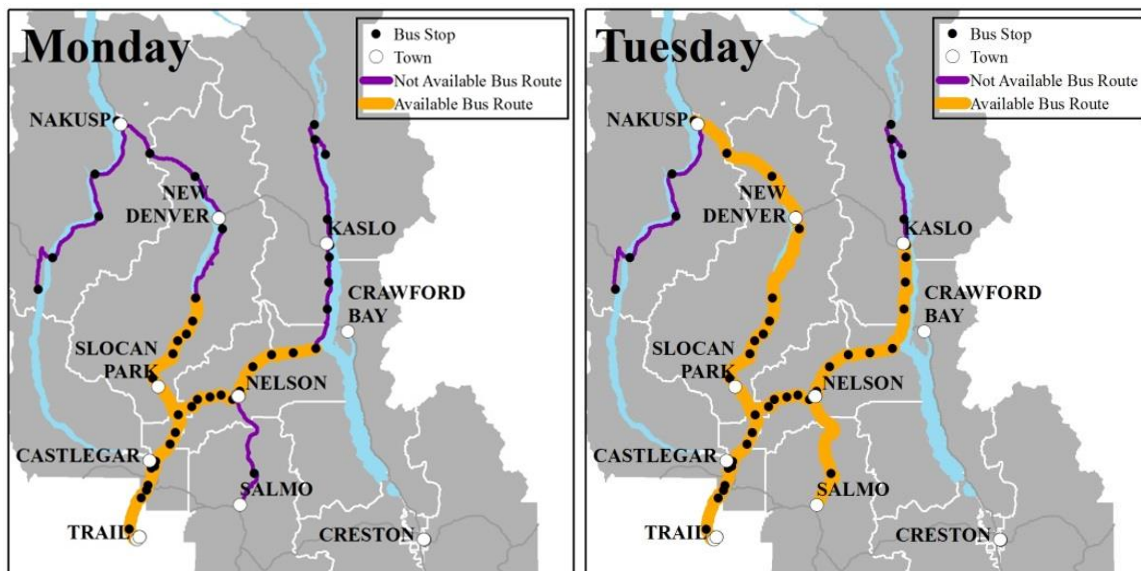
⁵ Canadian Institute for Health Information. 2011. Health Care in Canada 2011, A Focus on Seniors and Aging. https://secure.cihi.ca/free_products/HCIC_2011_seniors_report_en.pdf (online). 02 APRIL 2015.

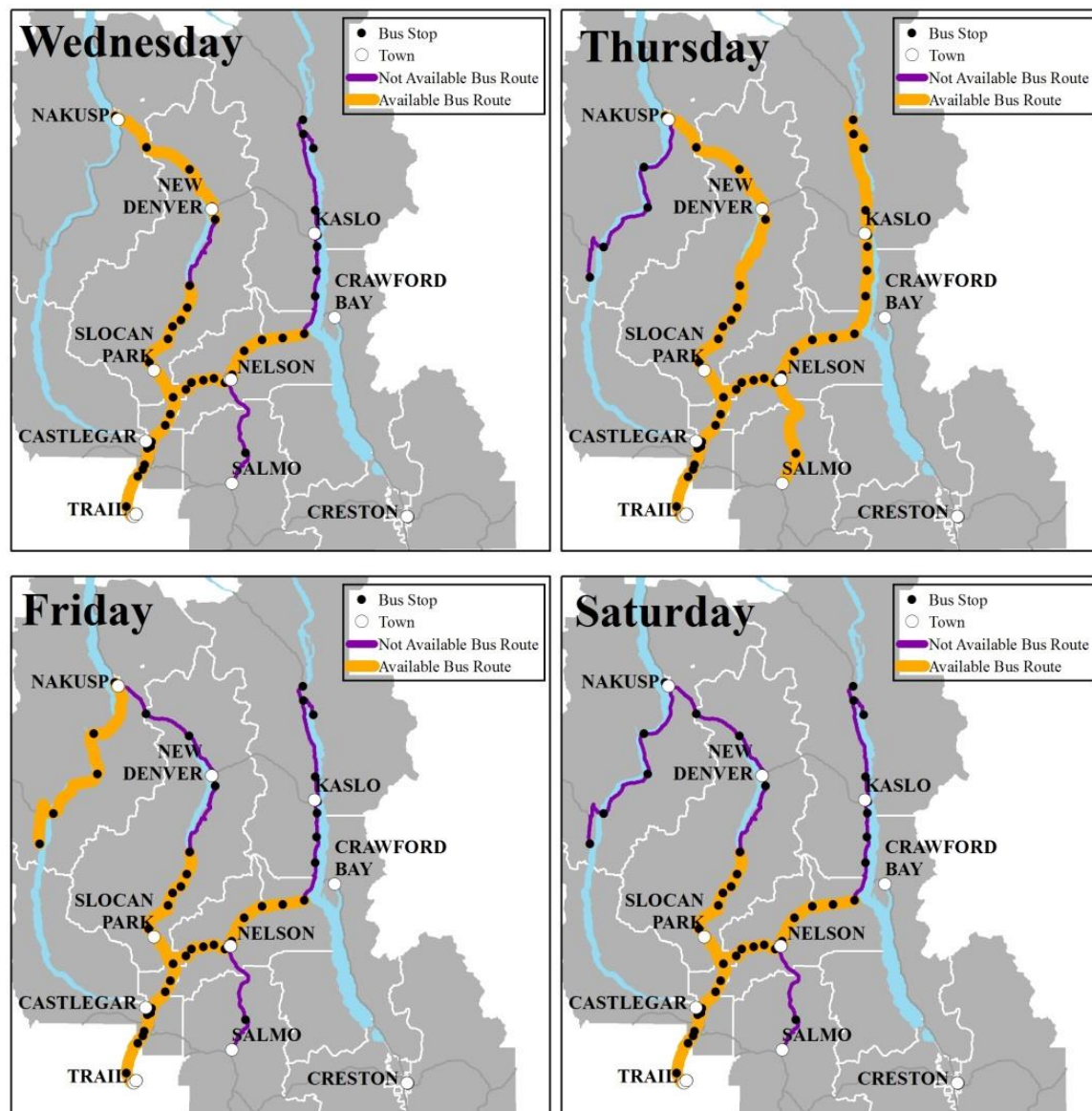
seniors requiring care then there are residential care beds. The Kettle Valley LHA has no residential care beds for the estimated 23 seniors requiring residential care. The residents requiring beds in the Kettle Valley LHA would likely be absorbed by the residential care beds in Grand Forks, which has 10 extra beds. It should be noted that this is only an estimate of the population requiring care. The analysis displayed on Figure 17 does not take into account people under the age of 85 requiring care, nor is it known that 25% of seniors over the age of 85 require residential care beds in the WKBRHD.

Transportation

Available transportation solutions for seniors requiring care was explored within the Regional District of the Central Kootenay (RDCK) as a pilot for future research within the West Kootenay Boundary Regional Hospital District (WKBRHD). The transportation options reviewed were: BC Transit, HandyDart, Health Connections and Paratransit.

BC Transit services the largest area within the RDCK at the highest frequency. BC Transit servicing is most widespread on Tuesdays and Thursdays. On the weekend, services are limited on Saturday to Balfour, Nelson, Trail and Slokan Valley. Weekly service availability is shown in Figure 18 with the exception of Sundays, as there is no service available for that day.





Source: BC Transit routes and stops obtained from BC Transit Website.

Figure 18. BC Transit Bus schedule for RDCK and Trail.

It is evident from Figure 18 that a gap in BC transit services exists within the RDCK on Monday, Wednesday, Friday, Saturday and Sunday. Kaslo and surrounding area as well as north of New Denver and surrounding area are missing transit services on the above mentioned days. This limits transportation options to health care services to Tuesday and Thursday only. Due to the dynamics of the bus schedule for the rural routes, further research would be required for an in depth analysis of scheduling logistics.

The service routes for HandyDart, Health Connections and ParaTransit transportation options are displayed in Figure 19. HandyDart is a door-to-door service offered through BC Transit. It is for people with permanent/ temporary disabilities that would prevent usage of their fixed route transit system⁶. Users must register to be eligible for this service. BC Transit website indicates that the service is only available in the areas around Trail, Castlegar and Nelson.

⁶ BC Transit. 2015. handyDart. <http://bctransit.com/west-kootenay/riderinfo/handydart>. (online). 01APRIL2015.

Another transportation option in the region is Health Connections. Health Connections is a regional travel assistance program sponsored by Interior Health and ran by BC Transit⁷. The program offers transportation options from Kaslo, Nakusp and Salmo to Nelson and back at subsidized transit rates. Users of this service are required to book ahead of time for exact scheduling.

Paratransit is a transportation service offered through BC Transit for people with disabilities. Paratransit service in the region is targeted more towards offering local transit options in the rural communities surrounding Nakusp and Kaslo.

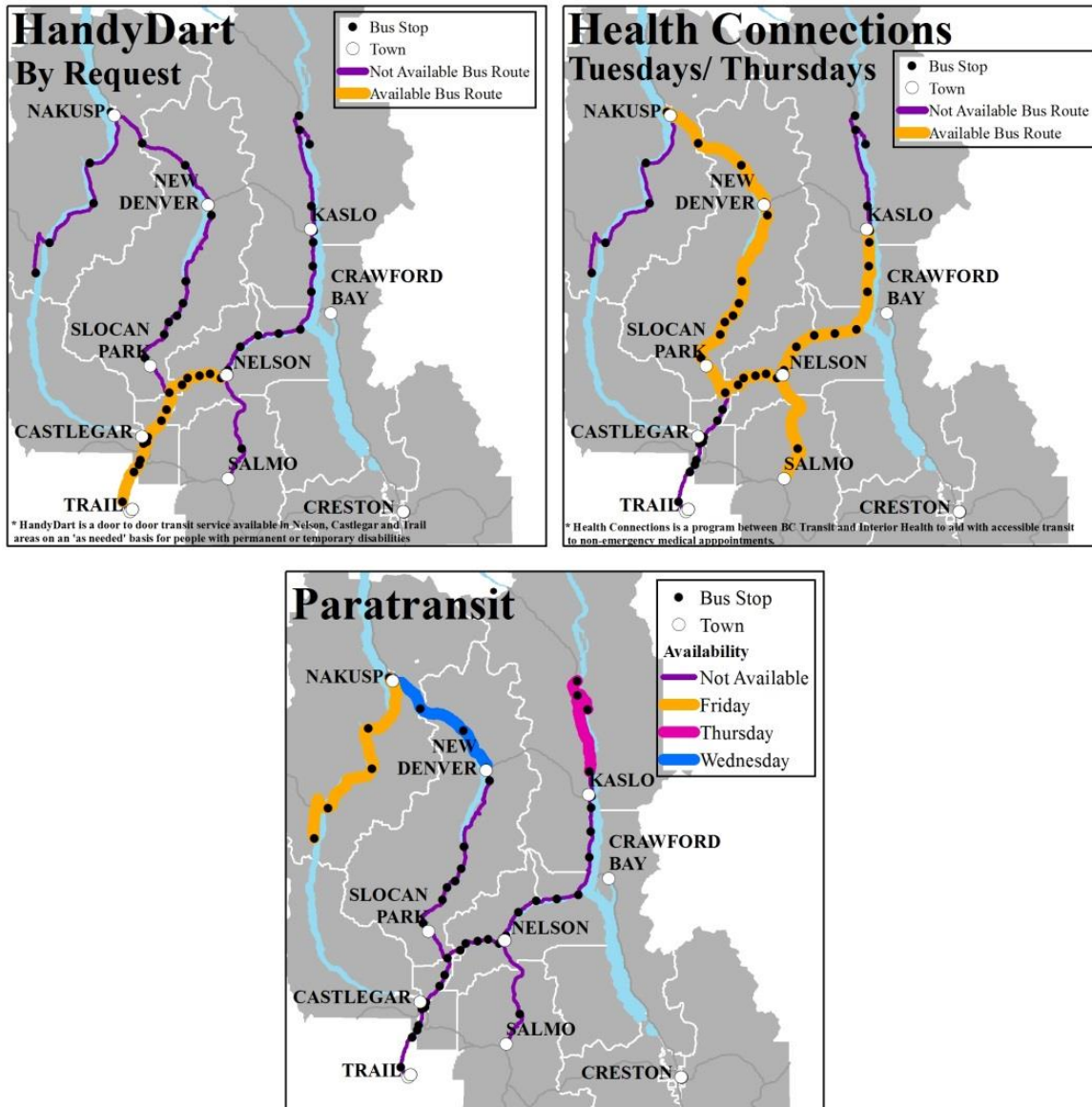


Figure 19. From left to right: HandyDart, Health Connections and Paratransit service routes.

HandyDart is the most limited service in the region as it has restrictive service routes. Health Connections has a much larger service area but it is only available Tuesdays and Thursdays. These are also the only days that services are offered with the standard bus schedule with BC Transit. Finally ParaTransit has limited service routes because it is targeted at local transit options in rural communities instead of transportation to health care facilities.

⁷ British Columbia Health. 2015. Health Connections. <http://www2.gov.bc.ca/gov/topic.page?id=61EE42451F754D418FD4004E4994E8C0> (online). 01APRIL2015.

Conclusion

Discussion

Population Projections

Based on the projected population data obtained through Statistics Canada, it is evident that the demographic of seniors is increasing throughout the West Kootenay Boundary Regional Hospital District (WKBRHD). This increase in seniors is particularly significant in the Kootenay Lake, Kettle Valley and Grand Forks local health areas (LHAs), which are projected to have approximately 8 % increases in population over 65 years by 2034. These three LHAs are also projected to have decreases in total population over 30 years at 11% for both Kootenay Lake and Kettle Valley and 4% in Grand Forks. The similarity of increasing population over 65 to decreasing total population indicates that people under the age of 65 are moving away from these LHAs.

Increases in total population are expected in Castlegar (25%), Creston (15%), Nelson (14%) and Trail (5%) by 2034. These LHAs are expecting an increase in the population over 65 of about 5 to 10 %. Population projections could be indicating movement from rural LHAs such as Kootenay Lake and Kettle Valley with little to no health care services to LHAs with existing services within the WKBRHD. Expected increases in total population and percent population over 65 within the above mentioned LHAs indicates a greater amount of residents moving to these LHAs than there are leaving the LHAs with decreasing populations. Therefore this indicates that movement of population over 65 years into Castlegar, Creston, Nelson and Trail LHAs is occurring from outside of the region. The movement of population within the 'baby boomer' demographic is visible from 2015 to 2025 but decreases in 2034. This could indicate that 'baby boomer' demographic is not necessarily moving into the WKBRHD from outside regions.

Population vs. Ambulance and Emergency Room Service Area

The scope of this report and a lack of access to BC Emergency Health Services ground ambulance response time data limited the ability to accurately predict ambulance service areas. Based on the estimated ambulance service areas, areas of concern were identified where ambulance response times were greater than 15 minutes, and greater than 60 minutes to the closest emergency room.

The reduced hours of the Victorian Community Health Centre in Kaslo from a 24 hour, 7 days per week facility to 8 hours, 5 days per week facility has impacted Electoral Area D of the RDCK significantly. Previously 95% of houses were within 1 hour of an emergency room facility. With the loss of this facility, more than 50% of houses are now greater than an hour away from an emergency room.

The Kootenay Lake LHA which Electoral Area D is within has one the highest percentage of people greater than 65 years of age when compared to the rest of the LHAs within the WKBRHD. The Kootenay Lake LHA also has one of the lowest total populations when compared to other LHAs (approximately 3000 residents). It is possible that this reduction of hours at the Victorian Community Health Centre was due to too small of a population to contribute resources to. Arrow Lakes LHA in comparison has a relatively similar population (around 4000 residents), and maintains a 24 hour/7 days per week facility. Similarly, Kettle Valley LHA has a comparable population to Kootenay Lake with few services and a large area greater than one hour to Grand Forks hospital. Proximity of Kettle Valley residents to hospitals in Kelowna, Penticton and Oliver however were not taken into consideration during this research.

Population vs. Diagnostic Facility Service Area

The population is heavily reliant on Trail, Castlegar and Nelson for Nuclear Medicine, Electroencephalography and Electromyography respective diagnostic services. The Centre for Nuclear Science and Technology Information indicates that “one out of three patients admitted to hospitals undergo at least one medical procedure that uses isotopes⁸”. Therefore it could be assumed that 1/3 of patients admitted to hospitals within WKBRHD are being transferred to Trail for Nuclear Medicine diagnostic services. Electroencephalography diagnostic service is only available at the Castlegar Community Health Centre, which is not a 24 hour facility. The reliance on the diagnostic services in Trail, Castlegar and Nelson and the lack of hours to access them puts more pressure onto these health care facilities from the surrounding LHAs within the WKBRHD.

Population vs. Hospital Beds

The WKBRHD has the lowest amount of beds per 1000 people when compared to the Okanagan LHAs, the Interior Health Authority region, and the entire BC province. Kootenay Lake Hospital in Nelson and Boundary Hospital in Grand Forks have the lowest number of beds per 1000 people in the WKBRHD. With LHAs relying on the diagnostic services that are only available in Nelson and Trail, it is likely the number of beds per 1000 people in these hospitals is lower than what was calculated as the service areas for these hospitals extends well beyond the LHA they are located in.

The loss of 24 hour ER services to the hospital in Kaslo has increased the amount of people relying on Nelson’s hospital due to its close proximity to the Kootenay Lake LHA. The number of beds at the Kootenay Lake hospital in Nelson does not reflect the increase in use and demand on its ER facilities as a result of the Kaslo loss in ER services. Therefore assuming that Nelson is the primary hospital for the Kootenay Lake LHA as well as the Nelson LHA, the bed per 1000 people is extremely low at 1.06. Although Kootenay Boundary Regional Hospital (KBRH) in Trail has a higher than national average bed count, this analysis did not take into account other LHAs usage of this hospital.

Population vs. Long Term Care

The BC Liberals promised an increase of 5000 additional non-profit residential care beds across the province by 2008 during their 2001 provincial election campaign⁹. From 2002 to 2015, the WKBRHD lost 245 residential care beds. In that same time frame, the total population of the WKBRHD increased 3.5% and the percent of population over 65 increased 8%. As long term care beds are primarily used by seniors¹⁰ and population over 65 is increasing, long term care bed counts should theoretically be increasing as opposed to decreasing in the WKBRHD.

Furthermore, the decrease in residential care beds within the WKBRHD puts even more pressure on the acute care system by having hospital beds utilized by people waiting for residential care beds⁹.

⁸ Centre for Nuclear Science and Technology Information. 2014. Medical Applications. <http://www.nuclearconnect.org/know-nuclear/applications/medical-uses>. (online) 15MAR2015.

⁹ Cohen, M., Tate, J., Baumbusch, J. 2009. An Uncertain Future for Seniors: BC’s Restructuring of Home and Community Health Care, 2001- 2008. Canadian Centre for Policy Alternatives. https://www.policyalternatives.ca/sites/default/files/uploads/publications/BC_Office_Pubs/bc_2009/CCPA_bc_uncertain_future_full.pdf. (Online) 31JULY 2015.

¹⁰ Canadian Life and Health Insurance Association Inc. 2012. CLHIA Report on Long-Term Care Policy. [http://www.clhia.ca/domino/html/clhia/CLHIA_LP4W_LND_Webstation.nsf/resources/Content_PDFs/\\$file/LTC_Policy_Paper.pdf](http://www.clhia.ca/domino/html/clhia/CLHIA_LP4W_LND_Webstation.nsf/resources/Content_PDFs/$file/LTC_Policy_Paper.pdf). (Online) 19 MARCH 2015.

Population vs. Transportation (RDCK Only)

A study conducted on rural seniors by Nelson Cares Society's Age Friendly Community Initiative identified access to health services and long distances to medical centres as being a barrier for rural seniors¹⁰. Availability of BC Transit fixed routes and Interior Health sponsored bus routes are limited throughout the RDCK. Tuesdays and Thursdays are the only days in the week that rural residents in the Kaslo area and Nakusp area are able to use public transit to access Trail, Nelson and Castlegar health care facilities. Bus route services also have time constraints as their availability is limited from 6:00am to 10:00pm on those days. Other challenges are faced by seniors utilizing public transit that were not explored in this report. These challenges include bus scheduling and length of travel time to diagnostic facilities that increase the difficulty in utilizing the existing services.

Arrow Lakes and Kootenay Lakes LHA have the highest percent of residents over 65 years with the least options for transportation service routes and scheduling. Evidently population density influences the cost per rider of operating bus services. However transportation has been identified as one of the biggest barriers for seniors in the region¹¹. Exploring the feasibility of a higher level of servicing from an Interior Health sponsored bus service such as 'Health Connections' bus service is required to identify usage and scheduling efficiencies of this service.

Recommendations

This analysis shows that the population within the West Kootenay Boundary Hospital District receives less public health services when measured by total beds relative to the neighboring Okanagan District, the IH region, and BC as a whole. Services were reduced in 2002-4 and again more recently through the reduction in operating hours of facilities in Castlegar and Kaslo.

Further study is required to determine and document how the reduction in these services have impacted the residents of the West Kootenay Boundary Regional Hospital District: Interior Health cooperation or contribution of IH admissions data or data for use of specific types of health services by population would be required for best results. The actual response times of ambulance and other first responders in the WKBRHD should be compared to other regions in BC. The amount of travel for health services within the region and between the region and larger centres should be quantified and monitored for change over time. The impact of reduced health services on the choices residents make about where to live in the region, or whether to leave the region altogether, is another interesting dimension that should be explored, especially given the significant population aging that the region will experience over the next 20 years. Service reduction mitigation strategies, including improved public transportation for populations that are unable to drive themselves, can be modelled using GIS. Gaps in transportation scheduling and service routes can be identified to build a route system that is optimal for rural seniors. Residents in the Kaslo and Argenta region have already taken the initiative to write down the scheduling that is optimal for them¹⁰. With the identification of gaps in scheduling/ service routes and incorporating residents input, there will be a justified need for increased funding for enhanced transportation to health care facilities. The costs of public transit options as well as routes and schedules would have to be considered in order to determine the most cost-effective strategies. Tele-health may also mitigate service reductions by providing virtual access to out-of-region specialists.

¹¹Younie, C. 2014. Transportation Solutions for Rural Seniors. Age-Friendly Community Initiative, Nelson CARES Society.

Higher level analysis can be conducted on long term care beds as well. Variables such as quantities of market priced vs. assisted long term care bed counts can be examined based on population demographics and average income. Assisted living options and their associated service areas can also be mapped to show which organization supports what local health area.

GIS could be used to explore the optimal locations for services in the region. Moving existing services will always be controversial, however. A more detailed retrospective review of the shuffling of services within the region and moving services out of the region may be possible, especially if IH supports this work by providing service change data going back in time, to more fully evaluate the changes to travel times and costs. Other organizations, such as unions representing health workers, may also be tracking changes to health services as well.

We recommend that decision-makers in the WKBRHD continue to carefully monitor changes in health services to ensure that residents receive a level of care similar to what other British Columbians receive. We also recommend that where possible decision-makers prepare strategies to respond quickly should IH propose further service reductions. There will always be more demand for health services than available resources so the focus must remain on how the regional population can best be served by the available health budgets.

Literature Cited

- ArcGIS Resource Center. 2012. Creating a network dataset. ESRI.
<http://help.arcgis.com/en/arcgisdesktop/10.0/help/index.html#/0047000005t000000>. (online) 08 APRIL 2015.
- BC Transit. 2015. handyDart. <http://bctransit.com/west-kootenay/riderinfo/handydart>. (online). 01APRIL2015.
- British Columbia Health. 2015. Health Connections.
<http://www2.gov.bc.ca/gov/topic.page?id=61EE42451F754D418FD4004E4994E8C0> (online).)01APRIL2015.
- Canadian Institute for Health Information. 2011. Health Care in Canada 2011, A Focus on Seniors and Aging.
https://secure.cihi.ca/free_products/HCIC_2011_seniors_report_en.pdf (online). 02 APRIL 2015.
- Canadian Life and Health Insurance Association Inc. 2012. CLHIA Report on Long-Term Care Policy
[http://www.clhia.ca/domino/html/clhia/CLHIA_LP4W_LND_Webstation.nsf/resources/Content_PDFs/\\$file/LTC_Policy_Paper.pdf](http://www.clhia.ca/domino/html/clhia/CLHIA_LP4W_LND_Webstation.nsf/resources/Content_PDFs/$file/LTC_Policy_Paper.pdf). (Online) 19 MARCH 2015.
- Centre for Nuclear Science and Technology Information. 2014. Medical Applications.
<http://www.nuclearconnect.org/knownuclear/applications/medical-uses>. (online) 15MAR2015.
- Cohen, M., Tate, J., Baumbusch, J. 2009. An Uncertain Future for Seniors: BC's Restructuring of Home and Community Health Care, 2001- 2008. Canadian Centre for Policy Alternatives.
https://www.policyalternatives.ca/sites/default/files/uploads/publications/BC_Office_Pubs/bc_2009/CCPA_bc_uncertain_future_full.pdf. (Online) 31July 2015.
- ESRI. 2015. What is GIS? <http://www.esri.com/what-is-gis.03/27/2015>.
- Interior Health. 2015. Residential Care.
<https://www.interiorhealth.ca/YourCare/HousingHealth/ResidentialCare/Pages/default.aspx> . (online) 8/4/2014.
- Ministry of Health. 2015. Rural Health Services in BC: A Policy Framework to Provide a System of Quality Care.
<http://www.health.gov.bc.ca/library/publications/year/2015/rural-health-policy-paper.pdf>. 03/26/2015.
- Younie, C. 2014. Transportation Solutions for Rural Seniors. Age-Friendly Community Initiative, Nelson CARES Society.



Mr. Stuart Horn, Secretary/Treasurer
West Kootenay Boundary Regional Hospital District
c/o Regional District of Central Kootenay
Box 590, 202 Lakeside Drive
Nelson, BC V1L 5R4

December 23, 2021

Dear Mr. Horn:

RE: CAPITAL FUNDING REQUEST FOR THE 2022/23 FISCAL YEAR

Please find enclosed our annual funding request for Interior Health's (IH) next fiscal year for your approval. It is based on IH's capital budget, which has been approved by our Board. The budget is developed by prioritizing identified capital needs throughout our organization within the context of the Capital Investment Strategic Framework.

Additional investment in primary care remains a priority, as Urgent and Primary Care Centres and Primary Care Networks are established across our region. Energy efficiency and equipment that reduces carbon emissions will also be a focus in the upcoming years as IH supports wider government efforts to combat climate change. Patients will be better served with advanced Digital Health clinical innovations to enhance quality through risk mitigation and strengthening workflow efficiency. These technology driven solutions include Laboratory "middleware" to increase auto-verification reporting of lab tests, as well as automated dispensing cabinets for Pharmacy Services to manage medications.

The bulk of the capital budget, however, remains focused on investments that aim at maintaining services through replacement of clinical and non-clinical equipment and systems.

Please note that all capital initiatives over \$100,000 are subject to government approval.

For the 2022/23 fiscal year we are requesting funding for the following projects and equipment:

1. Construction Projects over \$100,000

a. Leasehold Improvements New Long Term Care Building, Nelson

IH is entering into an agreement to lease a new building specifically designed for long-term care (LTC) that will provide 75 new single occupancy rooms. The building will be operated by IH and is part of a wider campus which will provide long term care, community health and mental health services.

The leasehold investment is part of our plan to ensure the design reflects best practice in community-based and facility-based care, including all our learnings from COVID. This is captured in the LTC area with all single rooms, increased HVAC capacity to ensure optimal air flow, smaller neighbourhoods and separate support areas to avoid risk of cross contamination and allow for separation of neighbourhoods in the case of an outbreak.

b. Generator at East Shore Community Health Centre, Crawford Bay

This remote site is prone to power outages and therefore requires installation of a generator. Considering the size of the site and non-intensive services and equipment, the generator is sized at 35kW. The project scope includes cabling and connection to the main building and an enclosure for the generator. Due to the urgency of this project, we anticipate beginning prior to April 1, 2022.

c. Building Voltage Regulation at Kootenay Lake Hospital, Nelson

This project will include installation of voltage regulating equipment between the utility transformer and electrical service entrance to regulate the incoming voltage from the utility provider, which is typically higher than what the site actually needs. By installing voltage regulation, building systems equipment will perform better and last longer. While this project is a priority due to the impact on our electrical infrastructure, it will also produce co-benefits of energy cost reduction and alignment with sustainability goals.

d. Magnetic Resonance Imaging (MRI) - Planning at Kootenay Boundary Regional Hospital, Trail

Locating a fixed MRI at this site would allow IH to improve and update services at Kootenay Boundary Regional Hospital. Access for disabled and inpatient populations would be significantly improved with a fixed permanent environment rather than with the existing mobile unit. A fixed MRI would also address the increasing safety and quality requirements expected for MRI operation in British Columbia.

The project will enable the next phase of procurement and installation of a fixed MRI including construction in the area adjacent to the current Medical Imaging department. The fixed MRI will replace the current mobile unit.

2. Construction Projects under \$100,000

a. Fire Alarm System Upgrade at Arrow Lakes Hospital, Nakusp

A fire alarm system is a number of devices working together to detect and warn people through visual and audio appliances when smoke, fire, carbon monoxide or other emergencies are present, and provides notification to the occupants to evacuate the building or take action in the event of a fire or other emergency. The current system is obsolete and parts are no longer available. The scope of work will include replacement of an obsolete quick start annunciator panel, all integral wiring and various components.

b. Chemotherapy Relocation at Boundary Hospital, Grand Forks

In its current location, the chemotherapy room is over-crowded; it requires a relocation to a larger unused area within the facility. This move will also allow for an addition of two chemotherapy chairs. Scope of work will include two additional hand hygiene sinks, medical gas installation, adding a patient washroom and a patient nutrition centre, hoarding, flooring, patching and painting.

c. Safety Exit at Nelson Friendship Outreach Clubhouse, Nelson

This site requires an outside exit route on the second storey for fire and urgent exit purposes. The scope of work will include opening the exterior wall on the south side or back of the clubhouse for the installation of a new egress door. A landing and staircase will then be installed to allow safe access to the ground level from the new egress door.

3. IH-Wide Digital Health (formerly IMIT)

The ongoing advancement of the IH digital platform is a key enabler of IH's ability to support health service operations, enable key strategies, improve quality and patient safety, and incorporate innovation to improve effectiveness and efficiency. This year's Digital Health Investment Plan includes technology systems to enable primary and community care transformation, giving patients access to their information and digital appointment bookings, presenting clinicians and management with real-time actionable information, and updating infrastructure so patient, employee and financial information is protected from cyber attacks.

This project is an IH-wide initiative costing approximately \$9.5 million. The project's benefits are distributed equally across IH regions; therefore the cost allocation to each of the seven Regional Hospital Districts (RHD) is based upon population data using the PEOPLE 2021, BC Statistics. The West Kootenay Boundary (WKB) RHD's percentage ratio is approximately 10%. Claims on this project will be calculated using this percentage for the actual cost distribution.

4. Equipment over \$100,000

Please note that pictures shown below are for illustrative purposes only and may not depict the actual equipment to be purchased by IH, which will be established during the procurement process.

a. Medstation - Additional for Kootenay Boundary Regional Hospital, Trail

Automated dispensing cabinets (ADC) for medications were first introduced in IH in 2006. This technology has brought improvements in patient safety and workflow that have been well supported by both nursing and pharmacy staff. This purchase of ADCs is additional to our current inventory of medstations and are replacing manual drug distribution used within a number of departments at this site.



b. Laboratory Middleware for Various Sites

Middleware is software that connects laboratory analyzers and the Laboratory Information System. This software enables communication and data management between those two complex environments. Middleware is a general term for software that "glues together" or bridges the gap between separate, complex programs or systems.

Middleware will allow IH laboratories to enhance and streamline operations. This software streamlines quality control processes that ensure the integrity of laboratory results. The middleware provides the opportunity to integrate and automate repetitive tasks. It is very customizable and adaptable, and will allow IH laboratories to easily incorporate new technology and equipment.

IH requested \$480,000 from the various RHD's in December 2018 from an original project cost of \$1.2M and your RHD contributed \$49,200 on bylaw #324 towards this project. Since the original request IH entered into a lengthy vendor selection process and now requires a budget increase of \$2.3M for the software and implementation costs across the whole of IH; the WKB RHD's portion of the increase is \$92,000. Until the actual vendor selection was completed IH was unable to budget accurately for the technical requirements of this project.

c. Chemistry Analyzer (x2) for Arrow Lakes Hospital, Nakusp and Boundary Hospital, Grand Forks

These innovative systems will have the ability to manage difficult samples and ensure the integrity of results by continually verifying every step of the testing process. These analyzers provide a robust, automated system that will allow the laboratory to perform tests that directly impact patient diagnosis, monitoring and ongoing treatment decisions. This is part of an IH wide initiative to replace aging Chemistry Analyzers. The units being replaced are at Arrow Lakes Hospital (purchased in 2011), and Boundary Hospital (purchased in 2007), both within the Clinical Laboratory department.



d. Navigation System – Ears, Nose and Throat (ENT) for Kootenay Boundary Regional Hospital, Trail

A surgical navigation system – ENT is made up of a high-powered computer system, specialized software, and instrument tracking technology. Instrument tracking can be compared to a global positioning system in a car, which allows the driver to see his or her exact location on a virtual roadmap. In surgical navigation, medical images created by a Computer Tomography Scanner or MRI system are imported into the navigation system creating an internal map of the body and the region of interest. As the surgeon's instruments travel within the patient's body during a procedure, the system displays their exact position relative to the inside of the body on a high-definition monitor. With the ability to "see" the instruments as they are inserted into the body, surgeons can more safely perform delicate procedures without damaging critical surrounding structures such as arteries and nerves. Parts and support will no longer be available for the current 2012 system in the Surgical department.



5. Equipment under \$100,000 (Global Grant)

We are requesting global funding for equipment that costs between \$5,000 and \$100,000.

A financial summary of our funding requests is provided in Appendix 1. We would appreciate it, if you could submit the requests to your Board for consideration. Please advise us of the meeting date when they will be discussed to enable us to have IH representatives attend and to answer questions that may arise. If the requests should receive approval, please send Laura Dalton, Director, Capital Finance copies of the relevant bylaws for our records.

We thank you for your on-going support of our capital initiatives. If you require further information, or if you have any questions or concerns, please contact Todd Mastel, Corporate Director, Business Operations or me directly.

Sincerely,



Sylvia Weir, VP & Chief Financial Officer
Interior Health Authority

/at

Encl. Appendix 1 ~ Summary of Regional Health District Funding Request for 2022/23

cc: Suzan Hewat, Chair, WKBRHD

Interior Health Authority
505 Doyle Ave.
Kelowna, BC V1Y 6V8
Web: www.interiorhealth.ca

VP & Chief Financial Officer
Telephone: (250) 215-8354
E-Mail: sylvia.weir@interiorhealth.ca

IHA Capital Projects and Planning Status Report

Master Summary - December 2021

Project Number	Project Name/Phase Name	Project Manager	% Complete Status			Substantial Complete Date Mth/Yr	Total Complete Date Mth/Yr	On Time	On Budget	Other Issues	Project Budget
			Program	Design	Const.						
Cariboo Chilcotin (CC)											
6220145	CMH Redevelopment	Scott M.	100%	53%	0%	TBD	Aug-26	Y	Y	N	\$ 211,226,489
6221136	CMH OR Expansion	Jennifer G.	N/A	N/A	N/A	Mar-21	Sep-21	Y	Y	N	\$ 2,250,000
Central Okanagan (CO)											
6118008	KGH Medstations, IH-wide Pyxis Replacement, Phase 2	Terry S.	100%	100%	95%	Jun-18	Feb-22	Y	Y	N	\$ 4,161,000
6118229	KGH Surface Parking	Michael M.	N/A	100%	99%	Dec-20	Nov-21	Y	Y	N	\$ 1,350,000
6119008	KGH Electrophysiology (EP) Lab Equipment	James D.	N/A	100%	100%	Aug-20	Sep-21	Y	Y	N	\$ 6,380,000
6119224	KGH Boiler Room Upgrade	Shane H.	N/A	100%	100%	Mar-21	Sep-21	Y	Y	N	\$ 682,200
6120003	KGH Spect CT	Shane H.	100%	100%	100%	May-21	Sep-21	Y	Y	N	\$ 1,823,000
6120004	KGH Endovascular Treatment Equipment	Shane H.	100%	100%	0%	Sep-22	Oct-22	0	Y	0	\$ 6,500,000
6121163	KEL LTC Business Plan	Maria B.	90%	0%	0%	Jan-22	Feb-22	Y	Y	N	\$ 375,000
6121175	KEL Kelowna OUH/MHSU - Leasehold Improvements	Martin D.	N/A	100%	99%	Mar-21	Dec-21	Y	Y	N	\$ 1,995,000
6121310	KGH Parkade Security Fencing	Shane H.	N/A	100%	100%	Oct-21	Nov-21	Y	Y	N	\$ 495,000
6122002	KGH Sprinkler Replacement	Shane H.	N/A	100%	0%	Apr-22	May-22	Y	Y	N	\$ 500,000
6122104	BKN Chiller Replacement	Darren P.	N/A	5%	0%	Apr-22	May-22	Y	Y	N	\$ 472,000
6122121	KGH Magnetic Resonance Imaging (MRI) Replacement and Addition - Planning	Bruce M.	50%	0%	0%	Mar-22	Apr-22	Y	Y	N	\$ 250,000
6122023	KGH Parking	Michael M.	0%	0%	0%	TBD	TBD	0	Y	N	\$ 7,500,000
6122132	KEL Downtown First Nations Medical Centre (Planning)	Jared F.	0%	0%	0%	Sep-22	Oct-22	Y	Y	N	\$ 150,000
6122148	KGH Pharmacy Upgrade	Shane H.	N/A	20%	0%	Jul-22	Aug-22	0	Y	0	\$ 150,000
Kootenay East (KE)											
6418010	EKH Biomed Department Renovation	Lucas M.	N/A	100%	100%	Apr-20	Oct-21	Y	Y	N	\$ 491,000
6419076	EKH/CVH Medstations, IH-Wide Pyxis Replacement, Phase 4	Terry S.	N/A	N/A	100%	Aug-19	Jul-21	Y	Y	N	\$ 1,295,000
6419089	CLH Healing Gardens	Lucas M.	N/A	100%	90%	Sep-20	Aug-22	Y	Y	N	\$ 526,749
6420000	EKH Pharmacy Renovation	James W.	N/A	100%	75%	Apr-22	May-22	N	Y	N	\$ 3,475,000
6420001	EKH Kitchen Waste Disposal and Conveyor System	Martin K.	N/A	100%	98%	Mar-21	Mar-22	Y	Y	N	\$ 700,000
6421000	EKH Spect CT (upgrade from Gamma Camera)	James W.	N/A	100%	0%	Jul-22	Sep-22	Y	Y	N	\$ 2,198,000
6421011	DUR Exterior Landscaping	Norbert F.	N/A	100%	97%	Aug-21	Jun-22	Y	Y	N	\$ 400,000
6421041	SWH RO Replacement	Christine E.	N/A	N/A	90%	Mar-22	May-22	Y	Y	N	\$ 400,000
6421051	EKH Energy Conservation Measures	Kevin H.	N/A	N/A	70%	Mar-22	May-22	Y	Y	N	\$ 2,000,000
6421052	IDH Biomass Boiler	Martin K.	0%	95%	0%	TBD	TBD	0	Y	0	\$ 166,359
6421053	CBK LTC Business Plan	Maria B.	90%	0%	0%	Jan-22	Feb-22	Y	Y	N	\$ 375,000
6421081	CVH Monitoring System, Physiological	Martin K.	100%	100%	95%	Jun-21	Aug-21	Y	Y	N	\$ 330,000
6422000	GOC Health Center Addition & Renovation - Planning	Maria B.	5%	0%	0%	Aug-22	Sep-22	N	Y	Y	\$ 150,000
6422002	EKH Reverse Osmosis Replacement & Upgrade	Martin K.	N/A	0%	0%	TBD	TBD	0	Y	N	\$ 400,000
6422037	CBK Urgent & Primary Care Center/Primary Care Network (UPCC/PCN) - Leasehold Improvement	James W.	100%	100%	100%	Nov-21	Mar-22	Y	Y	N	\$ 3,000,000
6422001	CVH Heating Boiler Replacement	James W.	N/A	0%	0%	TBD	TBD	0	Y	N	\$ 1,000,000
6418003	EKH Integrated Chemistry/Immunochemistry Analyzer (x2)	Norbert F.	N/A	0%	0%	TBD	TBD	0	Y	N	\$ 214,622
North Okanagan Columbia Shuswap (NOCS)											
6119169	VJH MDR Redesign & Expansion	James D.	N/A	100%	100%	Mar-21	Sep-21	Y	Y	N	\$ 2,010,000
6119234	VJH Medstations, IH-wide Pyxis Replacement, Phase 4	Terry S.	N/A	N/A	N/A	Jan-20	Sep-21	Y	Y	N	\$ 2,939,000
6121008	VJH CT Scanner (Replacement)	James D.	N/A	100%	40%	Feb-22	Mar-22	Y	Y	N	\$ 2,859,000
6220000	SLH Monitoring System, Physiological	Maxwell M.	N/A	100%	100%	May-21	Sep-21	Y	Y	N	\$ 190,000
6220001	QVH Elevator Modernization	James D.	N/A	100%	100%	Mar-21	Sep-21	Y	Y	N	\$ 780,000
6220002	QVH Emergency Generator	James D.	N/A	100%	100%	Jun-21	Nov-21	Y	Y	N	\$ 4,950,000
6220006	SAC Leasehold Improvements	Maxwell M.	100%	100%	0%	TBD	TBD	N	N	Y	\$ 600,000
6220007	SLH Pharmacy Renovation	Maxwell M.	N/A	100%	40%	May-22	Jun-22	Y	Y	N	\$ 2,530,000
6221014	BSP Generator Replacement	Maxwell M.	N/A	100%	40%	Mar-22	May-22	N	Y	N	\$ 1,200,000
6221012	SLH CT Scanner (Replacement)	Maxwell M.	N/A	100%	95%	Nov-21	Nov-21	Y	Y	N	\$ 2,509,000
6221215	SLH Mammography System	Maxwell M.	N/A	30%	0%	May-22	May-22	Y	Y	N	\$ 1,938,000
6121257	VJH Inpatient Psychiatry Redesign - Concept Plan	Maria B.	50%	0%	0%	Feb-22	Mar-22	Y	Y	N	\$ 700,000
6222002	SAC Community Care Services - Leasehold	Maxwell M.	50%	20%	0%	TBD	TBD	0	Y	Y	\$ 1,800,000
6122000	VER Vernon Long-term Care Facility - Business Plan	Maria B.	0%	0%	0%	Sep-22	Nov-22	Y	Y	N	\$ 400,000
6122001	VJH Psychiatric Unit 3N Redesign	Guy H.	N/A	100%	0%	Dec-21	Jan-22	Y	Y	N	\$ 173,000
6122012	PVM Generator & Switchgear Replacement	Maxwell M.	N/A	40%	0%	Apr-22	Apr-22	Y	Y	0	\$ 950,000
6222003	QVH Monitoring System, Physiological	James D.	N/A	N/A	100%	Sep-21	Oct-21	Y	Y	N	\$ 183,000
6122105	VJH CT Scanner (Additional)	James D.	0%	35%	0%	Jan-23	Mar-23	Y	Y	N	\$ 5,700,000
6222113	BSP Chiller Replacement	Marko K.	0%	0%	0%	Mar-22	Apr-22	Y	Y	N	\$ 770,000
6122007	VJH Meal Delivery System	Lorne C.	N/A	0%	0%	TBD	TBD	0	Y	N	\$ 1,430,000
Okanagan Similkameen (OS)											
6115193	PRH Patient Care Tower	Scott M.	100%	100%	100%	Dec-18	Mar-22	Y	Y	N	\$ 255,597,758
6117190	PRH Patient Care Tower Equipment	Scott M.	N/A	85%	85%	Mar-22	TBD	Y	Y	N	\$ 20,016,266
6117212	PRH Patient Care Tower Phase 2 Reno	Scott M.	N/A	100%	95%	Mar-22	Apr-22	Y	Y	N	\$ 25,953,939
6120124	PRH PCMS (Patient Choice Meal Service)	Lorne C.	0%	0%	0%	TBD	TBD	0	Y	N	\$ 799,160
6118023	PRH Various Infrastructure Projects	Scott M.	N/A	100%	96%	Sep-21	Dec-21	Y	Y	N	\$ 3,500,000
6119001	SOG Renovation of Emergency Department, Triage and Admitting	Ev K.	100%	100%	100%	Jan-20	Sep-21	Y	Y	N	\$ 1,300,000
6121009	PRH Medical Vacuum System Replacement	Shane H.	N/A	100%	25%	Mar-22	Apr-22	Y	Y	N	\$ 735,000
6121011	PGH Electrical Infrastructure Upgrade - Phase 1	Shane H.	N/A	50%	0%	Jul-22	Aug-22	Y	Y	N	\$ 2,300,000
6121006	PRH CT Scanner (Additional)	Shane H.	N/A	95%	0%	Apr-22	Jun-22	0	Y	N	\$ 5,000,000
6122003	SHC Boiler Replacement	Lucas M.	N/A	25%	0%	Jul-22	Nov-22	Y	Y	N	\$ 1,000,000
6122004	SHC Emergency Generator Upgrade	Lucas M.	N/A	5%	0%	Oct-22	Nov-22	Y	Y	N	\$ 900,000
6122018	SOG Monitoring System, Physiological	Shane H.	N/A	100%	0%	Feb-22	Mar-22	0	Y	N	\$ 324,000
Thompson (T)											
6217218	RIH Patient Care Tower	Scott M.	100%	100%	94%	Feb-22	TBD	Y	Y	N	\$ 313,857,350
6218181	RIH Patient Care Tower - Equipment	Scott M.	N/A	0%	0%	Nov-21	TBD	Y	Y	N	\$ 25,834,757
6218182	RIH PCT ACE	John G.	0%	0%	0%	Jun-21	TBD	Y	Y	N	\$ 13,860,299
6221144	RIH Patient Care Tower Phase 2 Reno	Michael M.	100%	90%	0%	Dec-25	Dec-25	Y	Y	N	\$ 53,414,654
6218252	RIH Elevator Modernization	Maxwell M.	N/A	100%	100%	Feb-21	Dec-21	Y	Y	N	\$ 850,000
6219011	RIH Medstations, IH-wide Pyxis replacement, Phase 3	Terry S.	N/A	100%	100%	Jun-19	Sep-21	Y	0	N	\$ 2,981,000
6220004	LIH MDR Upgrade	Maxwell M.	N/A	100%	95%	Jan-21	Oct-21	Y	Y	0	\$ 736,000
6220005	RIH Pharmacy Renovation	Maxwell M.	N/A	100%	40%	May-22	Jul-22	Y	Y	N	\$ 2,835,000
6220138	RIH P3 Maintenance Obligations - Phase 1 & 2	Michael M.	N/A	22%	9%	Dec-25	Feb-26	Y	Y	N	\$ 2,000,000
6220200	CLW Domestic Hot Water System	Maxwell M.	N/A	100%	100%	Apr-21	Sep-21	Y	Y	N	\$ 449,143
6220201	RIH Elevators Modernization (x3)	Maxwell M.	N/A	100%	90%	Mar-22	May-22	Y	Y	N	\$ 1,900,000
6221000	ASH Nurse Call	Maxwell M.	N/A	100%	100%	Sep-21	Sep-21	Y	Y	N	\$ 308,000
6221003	CLW Nurse Call	Maxwell M.	N/A	100%	100%	Sep-21	Sep-21	Y	Y	N	\$ 357,000
6221015	RIH Fire Door Hardware	Maxwell M.	N/A	100%	95%	Oct-21	Oct-21	Y	Y	N	\$ 400,000
6221016	MER Lab Outpatient Area Expansion	Maxwell M.	N/A	100%	95%	Sep-21	Oct-21	Y	Y	Y	\$ 437,000
6221229	RIH Parkade Security Fencing	Lucas M.	N/A	N/A	100%	Sep-21	Sep-21	Y	Y	N	\$ 200,000
6222000	RIH Acute Care Minor Surgery Ventilation Upgrade - Planning	Maria B.	5%	0%	0%	Jan-22	Feb-22	Y	Y	N	\$ 150,000
6222001	KAM Kamloops Long-Term Care - Business Plan	Maria B.	0%	0%	0%	Sep-22	Nov-22	Y	Y	N	\$ 400,000
6222004	RIH Monitoring System, Physiological	James D.	N/A	100%	0%	Feb-22	Apr-22	Y	Y	N	\$ 756,000
6222007	OEC Chiller/Cooling Tower Replacement	James D.	N/A	100%	0%	Mar-22	May-22	Y	Y	N	\$ 690,000
6222006	CLW Renewable Energy Upgrade	James D.	N/A	0%	0%	Dec-22	Jan-23	Y	Y	N	\$ 1,995,240
6222145	RIH MRI Upgrade	James D.	N/A	0%	0%	Dec-22	Jan-23	Y	Y	N	\$ 2,000,000

Project Number	Project Name/Phase Name	Project Manager	% Complete Status			Substantial Complete Date Mth/Yr	Total Complete Date Mth/Yr	On Time	On Budget	Other Issues	Project Budget
			Program	Design	Const.						
West Kootenay Boundary (WKB)											
6318010	KBH Steam and Condensate Line Replacement	Ev K.	N/A	100%	99%	Jan-21	Sep-21	Y	Y	N	\$ 523,000
6318053	KBH Emergency Department Redevelopment	Ev K.	N/A	100%	97%	Apr-21	May-22	Y	Y	N	\$ 19,050,000
6318089	KBH Boiler Room	Ev K.	N/A	100%	100%	Aug-20	Aug-21	Y	Y	N	\$ 745,000
6319002	ALH Emergency Department Renovation	Ev K.	100%	100%	98%	May-20	Nov-21	Y	Y	N	\$ 2,100,000
6319067	KBH Pharmacy & Ambulatory Care Project	Ev K.	N/A	100%	29%	Dec-22	Mar-23	Y	0	N	\$ 32,775,000
6319074	KBH Ambulatory Care 2nd Floor	Ev K.	N/A	100%	97%	Apr-21	May-22	Y	Y	N	\$ 6,000,000
6320004	KBH Monitoring System, Physiological	Ev K.	N/A	100%	95%	Mar-21	Nov-21	Y	Y	N	\$ 684,000
6320005	KLH Waste and Cardboard Compactor	Lucas M.	N/A	50%	0%	TBD	TBD	0	Y	0	\$ 324,000
6321011	KBH Sterilizer - Steam Autoclave	Kevin T.	N/A	N/A	100%	May-21	Jul-21	Y	Y	N	\$ 146,000
6321014	KBH OR Ceiling Replacement	Kevin T.	N/A	0%	85%	Nov-21	Dec-21	Y	Y	N	\$ 685,000
6321015	KBH Medical Air and Vacuum System Replacement	Ev K.	N/A	100%	45%	Jan-22	Mar-22	Y	Y	N	\$ 1,125,000
6321016	KLH Pharmacy Upgrade	Martin K.	N/A	100%	97%	Aug-21	Mar-22	Y	Y	N	\$ 2,200,000
6322000	KBH Public Elevator Modernization	Ev K.	N/A	20%	0%	May-23	Jul-23	Y	Y	N	\$ 1,350,000
6322050	BDH (BCC) RO Replace	Christine E.	N/A	15%	0%	TBD	TBD	0	Y	N	\$ 400,000
6322054	KBH Steam Plant Retrofits	Ev K.	N/A	0%	0%	TBD	TBD	0	Y	N	\$ 2,100,000
Completed Projects											
6121247	PRH South Okanagan Home Support Scheduling Office Renovation	Todd Y.	N/A	N/A	100%	Mar-21	May-21	Y	Y	N	\$ 220,000
6121134	WES West Kelowna Urgent and Primary Care Centre - Planning	Neel C.	100%	100%	100%	Oct-20	Mar-21	Y	Y	N	\$ 3,100,000
6218019	OEC Generator and Switchgear Upgrade	James D.	N/A	100%	100%	Nov-20	Jan-21	Y	Y	N	\$ 1,900,000
6120006	VJH Monitoring System, Physiological	James D.	N/A	N/A	100%	Feb-21	Jun-21	Y	Y	N	\$ 446,000
6119002	KGH Pediatrics 4 South Renovation	Shane H.	N/A	100%	100%	Nov-20	Jun-21	Y	Y	N	\$ 355,000
6220199	CMH Boiler & Chiller Plant Retrofit	Peter R.	N/A	100%	100%	Mar-21	Jul-21	Y	Y	N	\$ 1,285,157
6219197	LYT Heat Pump Recommissioning	Maxwell M.	N/A	100%	100%	May-20	Jul-21	Y	Y	N	\$ 668,273
6318011	SCH Generator Replacement	Maxwell M.	N/A	100%	100%	Aug-20	Jun-21	Y	Y	N	\$ 861,000
6319001	SCH Waste Water Treatment Plant	Maxwell M.	N/A	100%	100%	Sep-19	Jun-21	Y	Y	N	\$ 360,000
6118214	WHC Leasehold Improvements	Neel C.	N/A	15%	0%	TBD	TBD	N	N	N	\$ 750,000
6121237	VJH Morgue Update	James D.	0%	N/A	100%	Mar-21	Sep-21	Y	Y	N	\$ 350,000
6121133	PEN Pentiction Community Urgent and Primary Care Centre	Neel C.	100%	100%	100%	Mar-21	Nov-21	Y	Y	N	\$ 2,500,000
6120370	KGH Cath Lab #1	James D.	N/A	100%	100%	Dec-20	May-21	Y	Y	N	\$ 1,448,000
6120380	KGH Cath Lab #2	James D.	N/A	100%	100%	Nov-20	May-21	Y	Y	N	\$ 1,554,000
6121155	KGH PCR Expansion	Maxwell M.	N/A	100%	100%	Dec-20	Sep-21	Y	Y	N	\$ 1,188,000
6320003	BDH Security Upgrade	Ev K.	N/A	100%	100%	Oct-20	May-21	Y	Y	N	\$ 275,000
6319003	BDH Secure Room	Ev K.	N/A	100%	99%	Oct-20	Jun-21	Y	Y	N	\$ 610,000
6320006	KLH General Radiographic System - Digital	Martin K.	N/A	100%	100%	Nov-20	Jun-21	Y	Y	N	\$ 965,000
6120007	SCH General Radiographic System	Shane H.	N/A	100%	100%	Sep-20	May-21	Y	Y	N	\$ 808,345
6120002	KGH Monitoring System, Physiological	Shane H.	N/A	100%	100%	Mar-21	Sep-21	Y	Y	N	\$ 943,000
6221145	SLH OR Expansion	Lannon D.	N/A	N/A	100%	Mar-21	Sep-21	Y	Y	N	\$ 1,049,000
6121177	KGH Eye Care Centre Expansion	Nancy T.	N/A	N/A	100%	Mar-21	Jun-21	Y	Y	N	\$ 581,000
LEGEND:											
No Schedule, Budget or Other issues for the reporting period.											
Issues resolved without material impacts; projects proceeding or, issues under investigation.											
Issues have material impacts and/or corrective actions and/or approvals required before project proceeding.											
Projects are complete and financially closed.											
Y Yes											
N No											
0 Other											
NOTES:											
Active Projects											
											Project Budget
1 Cariboo Chilcotin											\$6,221,136
15 Central Okanagan											\$32,783,200
17 Kootenay East											\$17,121,730
20 North Okanagan Columbia Shuswap											\$34,611,000
8 Okanagan Similkameen											\$15,059,000
18 Thompson											\$19,444,383
15 West Kootenay Boundary											\$70,207,000
94 Sub-total: Active Routine Capital Projects											\$195,447,449
4 Pentiction Regional Hospital Patient Care Tower											\$302,367,123
4 Royal Inland Hospital Patient Care Tower											\$406,967,060
1 Cariboo Memorial Hospital Redevelopment											\$211,226,489
9 Sub-total: Active Major Capital Projects											\$920,560,672
103 Total Active Projects											\$1,116,008,121
22 Total Completed Projects											\$22,216,775
125 Grand Total											\$1,138,224,896

Cariboo Chilcotin Reports

December 2021

Project Name						CMH Redevelopment		Project Budget:		\$211,226,489
Project Number						6220145		RHD Contribution (Y/N):		Y
Project Manager						Scott M.				
% Complete Status			On Time	On Budget	Other Issues	Start Date	Substantial Completion			
Programming	Design	Const.					Original	Rev. #	Revised	
100%	53%	0%	Y	Y	N	Apr-21	Mar-26	0	TBD	
Scope										
Redevelopment of the Cariboo Memorial Hospital in two phases. Phase one (new build) is the expansion of a new Emergency Department, Medical/Surgical Inpatient Unit, Maternity Services Unit and Pharmacy. Phase two (renovations) includes the renovations on the main floor for Ambulatory Care, Main Entry and Reception areas on the second level a new Mental Health and Substance Use Inpatient Unit and on the third level renovations for the University of BC Faculty of Medicine Academic area.										
Progress										
<ul style="list-style-type: none"> RFIs and Enquiries are on-going. The 50% formal submission was received October 12 and re-submitted October 19 with authority review ongoing until November 10, 50% formal submission was further rejected with resubmission due December 20 Technical submission #1 was received October 12, evaluation completed with findings presented to Project Board on November 19 & 24 Financial submission #1 was received November 04, evaluation completed with findings presented to Project Board on November 24 The Archeological report is currently being finalized by Sugar Cane Archaeology then it will be sent to the Archeology Branch within the Ministry of Forestry BC for their recommendations on the next steps after the report noted some finds on the proposed redevelopment location. 										
Issues										
The Design Builder provided an initial rough order of magnitude for the project which is based upon current market conditions and is approximately \$50 million over the project affordability ceiling. IHA is working closely with the Design Builder and Infrastructure BC to better understand and assess assumptions and risks used in the estimate. Over the next period, a detailed review of cost pressures, value engineering items and the construction schedule will be reviewed. IHA will monitor this closely over the next number of months as we move towards the formal financial submission in the fall of 2021. The Project Team remains confident we can receive pricing within the affordability ceiling.										
Financial										
Actuals	Actuals	Projected					Total Actuals	Projected	Variance	
to March 31, 2021	YTD	FY21	FY22	FY23	FY24	FY25-28	+ Projected	Unspent	to Budget	
\$ 2,096,674	\$ 4,042,584	\$ 7,152,350	\$ 39,517,085	\$ 88,981,844	\$ 29,928,507	\$ 43,550,029	\$ 211,226,489	\$ -	\$ (0)	

Project Name						CMH OR Expansion		Project Budget:		\$2,250,000
Project Number						6221136		RHD Contribution (Y/N):		N
Project Manager						Jennifer G.				
% Complete Status			On Time	On Budget	Other Issues	Start Date	Substantial Completion			
Programming	Design	Const.					Original	Rev. #	Revised	
N/A	N/A	N/A	Y	Y	N	TBD	TBD	0	Mar-21	
Scope										
To purchase equipment for the expansion of surgical services at Cariboo Memorial Hospital. The budget includes dental, ENT, ophthalmology, orthopedics and urology surgical equipment.										
Progress										
All new equipment has been received and installed. Project will proceed to financial close.										
Issues										
None.										
Return to main Status Report.										
Financial										
Actuals	Actuals	Projected					Total Actuals	Projected	Variance	
to March 31, 2021	YTD	FY21	FY22	FY23	FY24	FY25	+ Projected	Unspent	to Budget	
\$ 1,849,405	\$ 157,600	\$ 159,300	\$ -	\$ -	\$ -	\$ -	\$ 2,008,705	\$ 241,295	\$ -	

Central Okanagan Reports

December 2021

Project Name						KGH Medstations, IH-wide Pyxis Replacement, Phase 2		Project Budget:		\$4,161,000
Project Number						6118008		RHD Contribution (Y/N):		Y
Project Manager						Terry S.				
% Complete Status			On Time	On Budget	Other Issues	Start Date	Substantial Completion			
Programming	Design	Const.					Original	Rev. #	Revised	
100%	100%	95%	Y	Y	N	Oct-17	Feb-18	2	Jun-18	
Scope										
This newest platform for Automated Dispensing Cabinets (ADC) for medications (Omniceil G4) has a number of improvements over the older technology. This project is for the actual purchase of the Omnicell ADC's, renovations and project staffing specifically at the Kelowna General Hospital and is classified as Phase 2 for 2017/18 as part of the entire IH rollout.										
Progress										
The new equipment is in operation but some issues are still being resolved with the manufacturer.										
Issues										
None.										
Financial										
Actuals to March 31, 2021	Actuals YTD	FY22	FY23	Projected			Total Actuals + Projected	Projected Unspent	Variance to Budget	
\$ 4,026,262	\$ -	\$ 109,046	\$ -	\$ -	\$ -	\$ -	\$ 4,135,308	\$ 25,692	\$ -	

Project Name						KGH Surface Parking		Project Budget:		\$1,350,000
Project Number						6118229		RHD Contribution (Y/N):		Y
Project Manager						Michael M.				
% Complete Status			On Time	On Budget	Other Issues	Start Date	Substantial Completion			
Programming	Design	Const.					Original	Rev. #	Revised	
N/A	100%	99%	Y	Y	N	May-18	N/A	0	Dec-20	
Scope										
This project will help address a parking short-fall on the Kelowna General Hospital campus which has been exasperated by the loss of parking stalls on land that is committed towards the construction of JoeAnna's House. The project envisions 74 new paved surface parking stalls with appropriate landscaping, lighting, and safety controls on 2276 Speer Street.										
Progress										
The GC is on-hold for one final deficiency before this project can be closed. We anticipate this last deficiency will be completed by end of November.										
Issues										
None.										
Financial										
Actuals to March 31, 2021	Actuals YTD	FY21	FY22	Projected			Total Actuals + Projected	Projected Unspent	Variance to Budget	
\$ 722,181	\$ 186,065	\$ 186,065	\$ -	\$ -	\$ -	\$ -	\$ 908,246	\$ 441,754	\$ -	

Project Name						KGH Electrophysiology (EP) Lab Equipment		Project Budget:		\$6,380,000
Project Number						6119008		RHD Contribution (Y/N):		N
Project Manager						James D.				
% Complete Status			On Time	On Budget	Other Issues	Start Date	Substantial Completion			
Programming	Design	Const.					Original	Rev. #	Revised	
N/A	100%	100%	Y	Y	N	Sep-18	Jun-20	1	Aug-20	
Scope										
To provide clinical capability and resources to deliver Electrophysiology (EP) and advanced cardiac heart rhythm/arrhythmia services.										
Progress										
Project being closed out.										
Issues										
None.										
Financial										
Actuals to March 31, 2021	Actuals YTD	FY22	FY23	Projected			Total Actuals + Projected	Projected Unspent	Variance to Budget	
\$ 5,401,893	\$ 82,746	\$ 82,746	\$ -	\$ -	\$ -	\$ -	\$ 5,484,639	\$ 895,361	\$ -	

Central Okanagan Reports

December 2021

Project Name KGH Boiler Room Upgrade						Project Budget: \$682,200			
Project Number 6119224						RHD Contribution (Y/N): Y			
Project Manager Shane H.									
% Complete Status			On Time	On Budget	Other Issues	Start Date	Substantial Completion		
Programming	Design	Const.					Original	Rev. #	Revised
N/A	100%	100%	Y	Y	N	Jan-19	N/A	2	Mar-21
Scope									
This project entails efficiency upgrades to the boiler room at this facility which will include a condensate heat recovery tank, high pressure steam bypass, re-piping of condensing boilers and control upgrades, demand control ventilation in the kitchen supply and exhaust systems, insulate existing exposed steam and condensate piping. This project's 60% portion will be funded through the Ministry of Health's Carbon Neutral Capital Program (CNCP) and aligns with carbon reduction and sustainability goals.									
Progress									
Project close out underway.									
Issues									
None.									
Financial									
Actuals to March 31, 2021	Actuals YTD	FY22	FY23	Projected			Total Actuals + Projected	Projected Unspent	Variance to Budget
\$ 600,237	\$ 28,371	\$ 46,000	\$ -	\$ -	\$ -	\$ -	\$ 646,237	\$ 35,963	\$ -

Project Name KGH Spect CT						Project Budget: \$1,823,000			
Project Number 6120003						RHD Contribution (Y/N): Y			
Project Manager Shane H.									
% Complete Status			On Time	On Budget	Other Issues	Start Date	Substantial Completion		
Programming	Design	Const.					Original	Rev. #	Revised
100%	100%	100%	Y	Y	N	Jul-19	Apr-20	3	May-21
Scope									
These newer units have combined a gamma camera with a CT to improve image quality and help with land marking (identifying the location of the abnormal function). They are used to locate cancerous tumors, minor bone fractures, abnormal functioning of organs such as the thyroid, brain and kidney and to examine cardiac functions and many other medical problems. This unit is replacing a 2004 Gamma Camera in the Medical Imaging Department.									
Progress									
Project close out underway.									
Issues									
None.									
Financial									
Actuals to March 31, 2021	Actuals YTD	FY22	FY23	Projected			Total Actuals + Projected	Projected Unspent	Variance to Budget
\$ 1,120,219	\$ 679,627	\$ 679,627	\$ -	\$ -	\$ -	\$ -	\$ 1,799,846	\$ 23,154	\$ -

Project Name KGH Endovascular Treatment Equipment						Project Budget: \$6,500,000			
Project Number 6120004						RHD Contribution (Y/N): N			
Project Manager Shane H.									
% Complete Status			On Time	On Budget	Other Issues	Start Date	Substantial Completion		
Programming	Design	Const.					Original	Rev. #	Revised
100%	100%	0%	0	Y	0	Feb-20	Jul-21	3	Sep-22
Scope									
The EVT includes a Bi-Plane Angiogram System and additional equipment necessary to fully equip the suite. The scope of the project includes reconfiguration of the existing clean and dirty utility areas outside the angio suite, creating (2) recovery bays and workstations for the booking clerk in the central administration area (storage alcoves to be created to accommodate the equipment stored in the central administration area). The renovation of the angio suite will retain the existing control room, all doors and walls. The renovation will include upgraded structural for the bi-plane system, mechanical and electrical upgrades to suit the equipment and the associated new ceilings, wall finishes and storage millwork.									
Progress									
Construction Tender package was issued for pricing by P3 partner and closed in late November. The results are currently being evaluated. The planned construction start will be delayed until issues have been resolved.									
Issues									
It has been identified that Phillips will not be able to deliver equipment as planned in March 2022 as planned due to production issues. In conjunction with delays in the tender period and review the construction start will be delayed.									
Financial									
Actuals to March 31, 2021	Actuals YTD	FY22	FY23	Projected			Total Actuals + Projected	Projected Unspent	Variance to Budget
\$ 234,728	\$ 548,442	\$ 646,263	\$ 5,619,009	\$ -	\$ -	\$ -	\$ 6,500,000	\$ -	\$ -

Central Okanagan Reports

December 2021

Project Name KEL LTC Business Plan						Project Budget: \$375,000			
Project Number 6121163						RHD Contribution (Y/N): N			
Project Manager Maria B.									
% Complete Status			On Time	On Budget	Other Issues	Start Date	Substantial Completion		
Programming	Design	Const.					Original	Rev. #	Revised
90%	0%	0%	Y	Y	N	Aug-20	Dec-20	0	Dec-20
Scope									
Business Plan development for a new facility that replaces the existing 221 bed site of Cottonwoods Care Centre that currently has 4 people to a room. The project will look to utilize nearby vacant land which IH currently owns to construct the new facility.									
Progress									
Business Plan final draft is being compiled alongside Infrastructure BC. Senior Executive Team has endorsed the Business Plan for submission to the IH Board.									
Issues									
None.									
Financial									
Actuals to March 31, 2021	Actuals YTD	FY22	FY23	Projected			Total Actuals + Projected	Projected Unspent	Variance to Budget
\$ 146,889	\$ 108,589	\$ 142,989	\$ -	\$ -	\$ -	\$ -	\$ 289,878	\$ 85,122	\$ -

Project Name Kelowna OUH/MHSU - Leasehold Improvements						Project Budget: \$1,995,000			
Project Number 6121175						RHD Contribution (Y/N): N			
Project Manager Martin D.									
% Complete Status			On Time	On Budget	Other Issues	Start Date	Substantial Completion		
Programming	Design	Const.					Original	Rev. #	Revised
N/A	100%	99%	Y	Y	N	Oct-20	Feb-21	1	Mar-21
Scope									
To relocate Outreach Urban Health (OUH) from current location at 455 Leon Avenue and co-locate select Mental Health & Substance Use (MHSU) programs. The MHSU services will include: Supervised Consumption Site (current RV will be decommissioned), injectable Opioid Agonist Treatment and Opioid Agonist Therapy.									
Progress									
Construction work is completed and the facility is in operation. Deficiencies and post-occupancy items are being completed.									
Issues									
None.									
Financial									
Actuals to March 31, 2021	Actuals YTD	FY22	FY23	Projected			Total Actuals + Projected	Projected Unspent	Variance to Budget
\$ 1,821,727	\$ 153,977	\$ 173,273	\$ -	\$ -	\$ -	\$ -	\$ 1,995,000	\$ -	\$ -

Project Name KGH Parkade Security Fencing						Project Budget: \$495,000			
Project Number 6121310						RHD Contribution (Y/N): N			
Project Manager Shane H.									
% Complete Status			On Time	On Budget	Other Issues	Start Date	Substantial Completion		
Programming	Design	Const.					Original	Rev. #	Revised
N/A	100%	100%	Y	Y	N	Mar-21	Aug-21	1	Oct-21
Scope									
Provide fencing around the perimeter of all levels above the second floor of both the public and staff parkades.									
Progress									
Project close out underway.									
Issues									
None.									
Financial									
Actuals to March 31, 2021	Actuals YTD	FY22	FY23	Projected			Total Actuals + Projected	Projected Unspent	Variance to Budget
\$ 220,999	\$ 252,537	\$ 274,001	\$ -	\$ -	\$ -	\$ -	\$ 495,000	\$ -	\$ -

Central Okanagan Reports

December 2021

Project Name KGH Sprinkler Pipe Replacement						Project Budget: \$500,000				
Project Number 6122002						RHD Contribution (Y/N): N				
Project Manager Shane H.										
% Complete Status			On Time	On Budget	Other Issues	Start Date	Substantial Completion			
Programming	Design	Const.					Original	Rev. #	Revised	
N/A	100%	0%	Y	Y	N	Apr-21	Jan-22	1	Apr-22	
Scope										
The fire sprinkler piping in the Royal Building has been subject to electrolysis, resulting in pin holes if not replaced. There is potential for a major rupture which could cause extreme damage to hospital equipment and infrastructure. This project will address ongoing operational impacts in dealing with leaks and will complete the fire sprinkler piping replacement on the main floor in the building.										
Progress										
Design is complete and tender has been issued. Work to begin in winter 2022.										
Issues										
None.										
Financial										
Actuals to March 31, 2021	Actuals YTD		FY22	FY23	Projected FY24	FY25	FY26	Total Actuals + Projected	Projected Unspent	Variance to Budget
\$ -	\$ -	\$ -	\$ 35,000	\$ 365,000	\$ -	\$ -	\$ -	\$ 400,000	\$ 100,000	\$ -

Project Name BKN Chiller Replacement						Project Budget: \$472,000				
Project Number 6122104						RHD Contribution (Y/N): N				
Project Manager Darren P.										
% Complete Status			On Time	On Budget	Other Issues	Start Date	Substantial Completion			
Programming	Design	Const.					Original	Rev. #	Revised	
N/A	5%	0%	Y	Y	N	TBD	Sep-21	0	Apr-22	
Scope										
To replace a 1996 York duplex reciprocating package chiller.										
Progress										
An energy study report is presently being completed to identify the most efficient replacement model, construction is anticipated to start in winter 2022.										
Issues										
None.										
Financial										
Actuals to March 31, 2021	Actuals YTD		FY21	FY22	Projected FY23	FY24	FY25	Total Actuals + Projected	Projected Unspent	Variance to Budget
\$ -	\$ 1,815	\$ -	\$ 91,960	\$ 380,040	\$ -	\$ -	\$ -	\$ 472,000	\$ -	\$ -

Project Name KGH Magnetic Resonance Imaging (MRI) Replacement						Project Budget: \$250,000				
Project Number 6122121						RHD Contribution (Y/N): N				
Project Manager Bruce G M.										
% Complete Status			On Time	On Budget	Other Issues	Start Date	Substantial Completion			
Programming	Design	Const.					Original	Rev. #	Revised	
50%	0%	0%	Y	Y	N	Jul-21	Mar-22	0	Mar-22	
Scope										
A Business Plan development for a building expansion and renovation to replace an existing 1.5T MRI that is at the end of its operational life as well as a new 3T MR for more detailed imaging and to decrease wait times. No operational downtime can be accommodated during the equipment replacement, so the new 1.5T unit must be installed and made operational before the old unit is removed.										
Progress										
Supporting consultant work is underway including completion of topographic survey. Aboriginal partners and user group meetings are ongoing. Functional program draft received including Schedule of Accommodation for internal review. Two plan layouts are being developed for costing, one with a second floor option. Geotechnical site work scheduled for January 6&7, 2022.										
Issues										
None.										
Financial										
Actuals to March 31, 2021	Actuals YTD		FY21	FY22	Projected FY23	FY24	FY25	Total Actuals + Projected	Projected Unspent	Variance to Budget
\$ -	\$ 16,704	\$ -	\$ 142,999	\$ -	\$ -	\$ -	\$ -	\$ 142,999	\$ 107,001	\$ -

Central Okanagan Reports

December 2021

Project Name KGH Parking						Project Budget: \$7,500,000				
Project Number 6120233						RHD Contribution (Y/N): Y				
Project Manager Michael M.										
% Complete Status			On Time	On Budget	Other Issues	Start Date	Substantial Completion			
Programming	Design	Const.					Original	Rev. #	Revised	
0%	0%	0%	0	Y	N	May-20	TBD	0	TBD	
Scope										
Surface parking across several properties around KGH. Parkade for KGH will not proceed at this time. IHA is currently pursuing alternate options for ~400 surface parking stalls on lands adjacent to KGH.										
Progress										
Following the completion of the RFP evaluation process, the design team has been awarded. Initial meetings to commence the design will be coordinated in December. Initial steps will set out key timelines associated with re-zoning, permitting, design and approvals required to schedule construction.										
Issues										
None.										
Financial										
Actuals to March 31, 2021	Actuals YTD	Projected					Total Actuals + Projected	Projected Unspent	Variance to Budget	
		FY21	FY22	FY23	FY24	FY25				
\$ -	\$ -	\$ 32,892	\$ 71,920	\$ 1,786,206	\$ 1,041,953	\$ -	\$ 2,932,972	\$ 4,567,028	\$ -	

Project Name KEL Downtown First Nations Medical Centre (Planning)						Project Budget: \$150,000				
Project Number 6122132						RHD Contribution (Y/N): N				
Project Manager Jared F.										
% Complete Status			On Time	On Budget	Other Issues	Start Date	Substantial Completion			
Programming	Design	Const.					Original	Rev. #	Revised	
0%	0%	0%	Y	Y	N	Oct-21	Sep-22	0	Sep-22	
Scope										
Development of a medical centre in the UBC downtown Kelowna campus that will provide culturally integrated healthcare that will serve the local indigenous community members in the Central Okanagan region. Medical practitioners and care staff will provide assessment, treatment and support along with traditional Elder/Healers who will share cultural knowledge and teachings and engage people in practices, ceremonies and holistic ways of healing from trauma. Councillors and Social Navigators will be available to support individuals and families to take steps to recover from trauma and to assist them to access resources, remove barriers, complete forms and navigate systems.										
Progress										
Project scope of work development to commence prior to fiscal year end.										
Issues										
None.										
Financial										
Actuals to March 31, 2021	Actuals YTD	Projected					Total Actuals + Projected	Projected Unspent	Variance to Budget	
		FY21	FY22	FY23	FY24	FY25				
\$ -	\$ -	\$ -	\$ 145,000	\$ -	\$ -	\$ -	\$ 145,000	\$ 5,000	\$ -	

Project Name KGH Pharmacy Upgrade						Project Budget: \$150,000				
Project Number 6122148						RHD Contribution (Y/N): N				
Project Manager Shane H.										
% Complete Status			On Time	On Budget	Other Issues	Start Date	Substantial Completion			
Programming	Design	Const.					Original	Rev. #	Revised	
N/A	20%	0%	0	Y	0	Nov-21	Jul-22	0	Jul-22	
Scope										
Renovations for the KGH Pharmacy and additional adjacent space will bring department in compliance with the new NAPRA standards. Current budget will allow for the engineering work to begin with the project set for approval in Fiscal 2023.										
Progress										
Preliminary design work has begun including site reviews to establish current conditions and limitations on installation of new HVAC equipment.										
Issues										
Preliminary HVAC equipment selections are nearly complete. Initial manufacturer feedback has indicated lead times that will not allow for project completion prior to July 2022 NAPRA compliance requirement with the College of Pharmacists. Mitigation strategy being developed.										
Financial										
Actuals to March 31, 2021	Actuals YTD	Projected					Total Actuals + Projected	Projected Unspent	Variance to Budget	
		FY21	FY22	FY23	FY24	FY25				
\$ -	\$ -	\$ 30,000	\$ 120,000	\$ -	\$ -	\$ -	\$ 150,000	\$ -	\$ -	

Return to main Status Report.

Kootenay East Reports

December 2021

Project Name EKH Biomed Department Renovation						Project Budget: \$491,000					
Project Number 6418010						RHD Contribution (Y/N): Y					
Project Manager Lucas M.											
% Complete Status			On Time	On Budget	Other Issues	Start Date	Substantial Completion				
Programming	Design	Const.					Original	Rev. #	Revised		
N/A	100%	100%	Y	Y	N	Sep-17	Feb-18	6	Apr-20		
Scope											
The existing Biomedical Department at this site is 50 years old and inefficient for current requirements and needs. Extra space is required for staff, as well as for parts and inventory storage. The project will renovate space with proper workbenches, install adequate storage and create an additional working area for new staff members.											
Progress											
Project complete and being closed.											
Issues											
None.											
Financial											
Actuals to March 31, 2021	Actuals YTD	FY22	FY23	Projected		FY24	FY25	FY26	Total Actuals + Projected	Projected Unspent	Variance to Budget
\$ 404,632	\$ 5,572	\$ 5,572	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 410,204	\$ 80,796	\$ -

Project Name EKH/CVH Medstations, IH-wide Pyxis Replacement, Phase 4						Project Budget: \$1,295,000					
Project Number 6419076						RHD Contribution (Y/N): Y					
Project Manager Terry S.											
% Complete Status			On Time	On Budget	Other Issues	Start Date	Substantial Completion				
Programming	Design	Const.					Original	Rev. #	Revised		
N/A	N/A	100%	Y	Y	N	Apr-19	Jul-19	1	Aug-19		
Scope											
Continuing the replacement of Pyxis 3500 with Omnicell G4, this project is for the actual purchase of the Omnicell ADC's, renovations and project staffing specifically at the East Kootenay Regional Hospital and Creston Valley Hospital and is classified as Phase 4 for 2019/20 as part of the entire IH rollout.											
Progress											
Project complete and will be closed once final invoices have been processed.											
Issues											
None.											
Financial											
Actuals to March 31, 2021	Actuals YTD	FY22	FY23	Projected		FY24	FY25	FY26	Total Actuals + Projected	Projected Unspent	Variance to Budget
\$ 1,054,669	\$ 68,198	\$ 68,198	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1,122,867	\$ 172,133	\$ -

Project Name CLH Healing Gardens						Project Budget: \$526,749					
Project Number 6419089						RHD Contribution (Y/N): N					
Project Manager Lucas M.											
% Complete Status			On Time	On Budget	Other Issues	Start Date	Substantial Completion				
Programming	Design	Const.					Original	Rev. #	Revised		
N/A	100%	90%	Y	Y	N	May-19	Oct-19	1	Sep-20		
Scope											
Landscaping which involves construction of patio, retaining walls, fencing, benches and pathways.											
Progress											
Work for the 2021 construction season is complete. Working with Society to plan completion of remaining items in 2022.											
Issues											
None.											
Financial											
Actuals to March 31, 2021	Actuals YTD	FY22	FY23	Projected		FY24	FY25	FY26	Total Actuals + Projected	Projected Unspent	Variance to Budget
\$ 526,749	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 526,749	\$ -	\$ -

Kootenay East Reports

December 2021

Project Name EKH Pharmacy Renovation						Project Budget: \$3,475,000			
Project Number 6420000						RHD Contribution (Y/N): Y			
Project Manager James W.									
% Complete Status			On Time	On Budget	Other Issues	Start Date	Substantial Completion		
Programming	Design	Const.					Original	Rev. #	Revised
N/A	100%	75%	N	Y	N	May-19	Aug-20	4	Apr-22
Scope									
The sterile compounding area in the Pharmacy Department at this site requires upgrading, including new equipment, air filtration, and air flow handling. Effective July 2022 the College of Pharmacists of British Columbia bylaws will require all pharmacies in B.C. to adopt the National Association of Pharmacy Regulatory Authorities (NAPRA) model standards for sterile compounding. Compounding allows individual ingredients to be mixed together in personalized strengths and dosages based on a patient's needs.									
Progress									
Wall construction complete with glazing, finishing work ongoing. Above ceiling HVAC installation continuing, hard ceilings to follow. Lunchroom millwork installed, following with stainless steel lab millwork. Construction will continue through to spring 2022.									
Issues									
Delivery of the major HVAC equipment has been further delayed, impacting the planned completion date. We are working with the contractor and supplier to address issues.									
Financial									
Actuals to March 31, 2021	Actuals YTD	FY22	FY23	Projected FY24	FY25	FY26	Total Actuals + Projected	Projected Unspent	Variance to Budget
\$ 180,174	\$ 741,206	\$ 2,077,284	\$ 1,217,542	\$ -	\$ -	\$ -	\$ 3,475,000	\$ -	\$ -

Project Name EKH Kitchen Waste Disposal and Conveyor System						Project Budget: \$700,000			
Project Number 6420001						RHD Contribution (Y/N): Y			
Project Manager Martin K.									
% Complete Status			On Time	On Budget	Other Issues	Start Date	Substantial Completion		
Programming	Design	Const.					Original	Rev. #	Revised
N/A	100%	98%	Y	Y	N	Jun-19	Oct-20	2	Mar-21
Scope									
A 1960's pulping disposal system and related piping need to be removed and replaced with a new garburator and venting. Also a new conveyor system needs to be retrofitted to the garburator and will include a soiled dish table, waste trough, stainless steel tray slides, overhead rack shelf, power roller rack transfer conveyor, clean dish table with backsplash and a hose clean up station. The new conveyor table is replacing a 2004 system in the Food Services Department. With a discontinuation of pulping system, a new cardboard compactor is also required to address waste volumes. The dishwasher and pot washer are also reaching end of life and will be replaced including a 3-well sink to meet guidelines when completing manual dish washing.									
Progress									
Issues have been discovered with the kitchen HVAC systems related to the modifications made. We are reviewing these design coordination issues with the engineers to find a solution and ensure proper air flow.									
Issues									
None.									
Financial									
Actuals to March 31, 2021	Actuals YTD	FY22	FY23	Projected FY24	FY25	FY26	Total Actuals + Projected	Projected Unspent	Variance to Budget
\$ 489,643	\$ 66,360	\$ 88,691	\$ 40,000	\$ -	\$ -	\$ -	\$ 618,334	\$ 81,666	\$ -

Project Name DUR Exterior Landscaping						Project Budget: \$400,000			
Project Number 6421011						RHD Contribution (Y/N): Y			
Project Manager Norbert F.									
% Complete Status			On Time	On Budget	Other Issues	Start Date	Substantial Completion		
Programming	Design	Const.					Original	Rev. #	Revised
N/A	100%	97%	Y	Y	N	May-20	Mar-21	1	Aug-21
Scope									
This project will improve the exterior grounds at this facility and provide a safe welcoming area for persons in care to bring friends and family that meets the long-term care licencing requirement for appropriate outdoor space. The scope of work will include new concrete walkways with a dementia friendly design, handrails, sitting benches, fencing, shrubbery, sunny and shaded areas to encourage and increase use in all seasons as well as replacement of the failing walkway surface in the secure courtyard.									
Progress									
Engineer has approved pergolas, have done site walk through and agreed to substantial completion. Deficiency list has been issued. Deficiencies are now being scheduled for the spring 2022.									
Issues									
None.									
Financial									
Actuals to March 31, 2021	Actuals YTD	FY22	FY23	Projected FY24	FY25	FY26	Total Actuals + Projected	Projected Unspent	Variance to Budget
\$ 12,845	\$ 228,968	\$ 275,147	\$ 112,008	\$ -	\$ -	\$ -	\$ 400,000	\$ -	\$ -

Kootenay East Reports

December 2021

Project Name SWH RO Replacement						Project Budget: \$400,000					
Project Number 6421041						RHD Contribution (Y/N): N					
Project Manager Christine E.											
% Complete Status			On Time	On Budget	Other Issues	Start Date	Substantial Completion				
Programming	Design	Const.					Original	Rev. #	Revised		
N/A	N/A	90%	Y	Y	N	Jan-21	Dec-20	3	Mar-22		
Scope											
This request is to replace the RO and the Loop in the Sparwood Community Dialysis Unit. The existing system has reached the end of its 10 year life expectancy. Replacement at this time also provides the ability to move to the next generation RO with heat disinfection capabilities.											
Progress											
The equipment is on site but alterations are required before it can be commissioned and put into service. Final work being planned for this winter.											
Issues											
None.											
Financial											
Actuals to March 31, 2021	Actuals YTD	FY22	FY23	Projected		FY24	FY25	FY26	Total Actuals + Projected	Projected Unspent	Variance to Budget
\$ 137,647	\$ 169,325	\$ 169,325	\$ 93,028	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 400,000	\$ -	\$ -

Project Name EKH Spect CT (Upgrade from Gamma Camera)						Project Budget: \$2,198,000					
Project Number 6421000						RHD Contribution (Y/N): Y					
Project Manager James W.											
% Complete Status			On Time	On Budget	Other Issues	Start Date	Substantial Completion				
Programming	Design	Const.					Original	Rev. #	Revised		
N/A	100%	0%	Y	Y	N	Jun-20	Sep-21	2	Jul-22		
Scope											
These newer units have combined a gamma camera with a CT to improve image quality and help with land marking (identifying the location of the abnormal function). They are used to locate cancerous tumors, minor bone fractures, abnormal functioning of organs such as the thyroid, brain and kidney and to examine cardiac functions. This unit is replacing a 2009 gamma camera in the medical imaging department. The East Kootenay Foundation for Health is contributing towards the purchase of this equipment.											
Progress											
The contract for construction has been awarded with detailed scheduling in progress (in coordination with the user group to ensure equipment downtime is minimized).											
Issues											
None.											
Financial											
Actuals to March 31, 2021	Actuals YTD	FY22	FY23	Projected		FY24	FY25	FY26	Total Actuals + Projected	Projected Unspent	Variance to Budget
\$ 285,764	\$ 47,797	\$ 728,590	\$ 1,183,646	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 2,198,000	\$ -	\$ -

Project Name EKH Energy Conservation Measures						Project Budget: \$2,000,000					
Project Number 6421051						RHD Contribution (Y/N): N					
Project Manager Kevin H.											
% Complete Status			On Time	On Budget	Other Issues	Start Date	Substantial Completion				
Programming	Design	Const.					Original	Rev. #	Revised		
N/A	N/A	70%	Y	Y	N	Nov-20	Nov-21	1	Mar-22		
Scope											
Project implements Energy Conservation Measures (ECMS) which include: LED lighting upgrade, control upgrades, building envelope improvements and heat exchanger replacement.											
Progress											
Site work is progressing. Teams are coordinating with the site to ensure continuity of operations and minimal impact. Work will continue through winter.											
Issues											
None.											
Financial											
Actuals to March 31, 2021	Actuals YTD	FY22	FY23	Projected		FY24	FY25	FY26	Total Actuals + Projected	Projected Unspent	Variance to Budget
\$ 1,102,715	\$ 332,975	\$ 673,744	\$ 223,541	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 2,000,000	\$ -	\$ 0

Kootenay East Reports

December 2021

Project Name IDH Biomass Boiler						Project Budget: \$166,359			
Project Number 6421052						RHD Contribution (Y/N): N			
Project Manager Martin K.									
% Complete Status			On Time	On Budget	Other Issues	Start Date	Substantial Completion		
Programming	Design	Const.					Original	Rev. #	Revised
0%	95%	0%	0	Y	0	Jul-20	Jun-21	1	TBD
Scope									
To install a containerized biomass boiler plant to provide heating hot water and DWH for hospital site.									
Progress									
The 95% design review has been completed. Project will be put on hold due to funding re-allocation.									
Issues									
Assigned Carbon Neutral Capital Program (CNCP) funding is being reallocated. This project will be put on hold until new CNCP funding is in place.									
Financial									
Actuals to March 31, 2021	Actuals YTD	FY22	FY23	Projected FY24	FY25	FY26	Total Actuals + Projected	Projected Unspent	Variance to Budget
\$ 53,566	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 53,566	\$ 112,793	\$ -

Project Name CBK LTC Business Plan						Project Budget: \$375,000			
Project Number 6421053						RHD Contribution (Y/N): Y			
Project Manager Jared F.									
% Complete Status			On Time	On Budget	Other Issues	Start Date	Substantial Completion		
Programming	Design	Const.					Original	Rev. #	Revised
90%	0%	0%	Y	Y	N	Aug-20	Feb-21	3	Jan-22
Scope									
Business Plan development for a new facility that replaces the existing 60 bed facility (FW Green Home) and adds 70 new long term care beds for a total of 130 beds to be constructed on the existing site.									
Progress									
BP final draft is being compiled alongside Infrastructure BC. SET has endorsed the BP for submission to the IH Board.									
Issues									
None.									
Financial									
Actuals to March 31, 2021	Actuals YTD	FY22	FY23	Projected FY24	FY25	FY26	Total Actuals + Projected	Projected Unspent	Variance to Budget
\$ 128,301	\$ 123,325	\$ 217,425	\$ -	\$ -	\$ -	\$ -	\$ 345,726	\$ 29,274	\$ -

Project Name CVH Monitoring System, Physiological						Project Budget: \$330,000			
Project Number 6421081						RHD Contribution (Y/N): N			
Project Manager Martin K.									
% Complete Status			On Time	On Budget	Other Issues	Start Date	Substantial Completion		
Programming	Design	Const.					Original	Rev. #	Revised
100%	100%	95%	Y	Y	N	Mar-21	Jun-21	0	Jun-21
Scope									
To replace 2011 Monitoring System.									
Progress									
Equipment install complete. Minor deficiencies being completed.									
Issues									
None.									
Financial									
Actuals to March 31, 2021	Actuals YTD	FY22	FY23	Projected FY24	FY25	FY26	Total Actuals + Projected	Projected Unspent	Variance to Budget
\$ 233,124	\$ 8,691	\$ 26,876	\$ -	\$ -	\$ -	\$ -	\$ 260,000	\$ 70,000	\$ -

Kootenay East Reports

December 2021

Project Name						GOC Health Center Addition & Renovation - Planning		Project Budget:		\$150,000	
Project Number						6422000		RHD Contribution (Y/N):		Y	
Project Manager						Maria B.					
% Complete Status			On Time	On Budget	Other Issues	Start Date	Substantial Completion				
Programming	Design	Const.					Original	Rev. #	Revised		
5%	0%	0%	N	Y	Y	Apr-21	Dec-21	1	Aug-22		
Scope											
Planning is required to explore potential options for the expansion of community, allied health and primary care program spaces to meet the growing needs for the town of Golden and the surrounding area.											
Progress											
Procurement of consultants to proceed once project scope is reconfirmed.											
Issues											
Direction on the scope of work to proceed with for the project is required.											
Financial											
Actuals to March 31, 2021	Actuals YTD	FY21	FY22	Projected		FY23	FY24	FY25	Total Actuals + Projected	Projected Unspent	Variance to Budget
\$ -	\$ -	\$ -	\$ 68,300	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 68,300	\$ 81,700	\$ -

Project Name						EKH Reverse Osmosis Replacement & Upgrade		Project Budget:		\$400,000	
Project Number						6422002		RHD Contribution (Y/N):		Y	
Project Manager						Martin K.					
% Complete Status			On Time	On Budget	Other Issues	Start Date	Substantial Completion				
Programming	Design	Const.					Original	Rev. #	Revised		
N/A	0%	0%	0	Y	N	TBD	TBD	0	TBD		
Scope											
This system is over 18 years old and is starting to fail, requiring replacement. It no longer meets the demand from departments requiring reverse osmosis water. The scope of work will include the relocation of the system into one area which will allow easier access for servicing as well as an increase to the main distribution line size to provide the volume of water required.											
Progress											
Project Initiation is underway.											
Issues											
None.											
Financial											
Actuals to March 31, 2021	Actuals YTD	FY21	FY22	Projected		FY23	FY24	FY25	Total Actuals + Projected	Projected Unspent	Variance to Budget
\$ -	\$ -	\$ -	\$ 400,000	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 400,000	\$ -	\$ -

Project Name						CBK Urgent & Primary Care Centre/Primary Care Network (UPCC/PCN) - Leasehold Improvement		Project Budget:		\$3,000,000	
Project Number						6422037		RHD Contribution (Y/N):		N	
Project Manager						James W.					
% Complete Status			On Time	On Budget	Other Issues	Start Date	Substantial Completion				
Programming	Design	Const.					Original	Rev. #	Revised		
100%	100%	100%	Y	Y	N	Apr-21	Oct-21	0	Nov-21		
Scope											
To establish an Urgent and Primary Care Centre (UPCC)/Primary Care Network Hub in Cranbrook, located in Baker Street Mall.											
Progress											
Construction work is complete, equipment installed and commissioned. The UPCC opened as scheduled on Dec 8, 2021. Deficiency correction is underway. We will coordinate the landlord's installation of the permanent HVAC systems when they arrive in Jan 2022.											
Issues											
None.											
Financial											
Actuals to March 31, 2021	Actuals YTD	FY21	FY22	Projected		FY23	FY24	FY25	Total Actuals + Projected	Projected Unspent	Variance to Budget
\$ -	\$ 1,453,275	\$ 2,925,000	\$ 75,000	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 3,000,000	\$ -	\$ -

Kootenay East Reports

December 2021

Project Name CVH Heating Boiler Replacement						Project Budget: \$1,000,000					
Project Number 6422001						RHD Contribution (Y/N): N					
Project Manager James W.											
% Complete Status			On Time	On Budget	Other Issues	Start Date	Substantial Completion				
Programming	Design	Const.					Original	Rev. #	Revised		
N/A	0%	0%	0	Y	N	TBD	TBD	0	TBD		
Scope											
Two (2) Existing heating boilers (1960's) are past expected life span and are starting to fail, requiring significant repairs. Project will replace existing boilers with new, high efficiency units providing high quality heating control and reliable operation. This project's 60% portion will be funded through the MoH's Carbon Neutral Capital Program and aligns with carbon reduction and sustainability goals.											
Progress											
Project initiation underway.											
Issues											
None.											
Financial											
Actuals to March 31, 2021	Actuals YTD	FY21	FY22	Projected		FY23	FY24	FY25	Total Actuals + Projected	Projected Unspent	Variance to Budget
\$ -	\$ -	\$ -	\$ 1,000,000	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1,000,000	\$ -	\$ -

Project Name EKH Integrated Chemistry/Immunochemistry Analyzer (x2)						Project Budget: \$214,622					
Project Number 6418003						RHD Contribution (Y/N): Y					
Project Manager Norbert F.											
% Complete Status			On Time	On Budget	Other Issues	Start Date	Substantial Completion				
Programming	Design	Const.					Original	Rev. #	Revised		
N/A	0%	0%	0	Y	N	TBD	TBD	0	TBD		
Scope											
This innovative new integrated system is a single main frame chemistry instrument that provides routine and immunochemistry testing on a single platform. This new combined instrument will be replacing a 2001 Immunoassay analyzer and a 2006 Chemistry analyzer in the Clinical Laboratory (Biomed # 1028365 & 1007934).											
Progress											
Project initiation underway.											
Issues											
None.											
Financial											
Actuals to March 31, 2021	Actuals YTD	FY21	FY22	Projected		FY23	FY24	FY25	Total Actuals + Projected	Projected Unspent	Variance to Budget
\$ -	\$ -	\$ 75,495	\$ 139,127	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 214,622	\$ -	\$ -

[Return to main Status Report.](#)

North Okanagan Columbia Shuswap Reports

December 2021

Project Name						VJH MDR Redesign & Expansion			Project Budget: \$2,010,000		
Project Number						6119169			RHD Contribution (Y/N): Y		
Project Manager						James D.					
% Complete Status			On Time	On Budget	Other Issues	Start Date	Substantial Completion				
Programming	Design	Const.					Original	Rev. #	Estimated		
N/A	100%	100%	Y	Y	N	TBD	Mar-21	0	Mar-21		
Scope											
The project will be expedited and consists of two distinct phases, renovating an existing shelled space and an operational MDR space. The shelled space will include 2 offices, a meeting & loaner room as well as space for 7 additional workstations. Alterations to MDR include creating 1 large storage space, revised doors and relocating a hand wash sink. MDR will also receive high density shelving and 1 additional sterilizer.											
Progress											
Project is complete and the close out process is underway.											
Issues											
None.											
Financial											
Actuals to March 31, 2021	Actuals YTD	FY22	FY23	Projected		FY24	FY25	FY26	Total Actuals + Projected	Projected Unspent	Variance to Budget
\$ 1,058,929	\$ 132,376	\$ 132,376	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1,191,305	\$ 818,695	\$ -

Project Name						VJH Medstations, IH-wide Pyxis Replacement, Phase 4			Project Budget: \$2,939,000		
Project Number						6119234			RHD Contribution (Y/N): Y		
Project Manager						Terry S.					
% Complete Status			On Time	On Budget	Other Issues	Start Date	Substantial Completion				
Programming	Design	Const.					Original	Rev. #	Estimated		
N/A	N/A	N/A	Y	Y	N	Sep-19	Jan-20	0	Jan-20		
Scope											
Continuing the replacement of Pyxis 3500 with Omnicell G4, this project is for the actual purchase of the Omnicell ADC's, renovations and project staffing specifically at the Vernon Jubilee Hospital and is classified as Phase 4 for 2019/20 as part of the entire IH rollout.											
Progress											
Project is substantially complete. Awaiting financial completion.											
Issues											
None.											
Financial											
Actuals to March 31, 2021	Actuals YTD	FY22	FY23	Projected		FY24	FY25	FY26	Total Actuals + Projected	Projected Unspent	Variance to Budget
\$ 2,336,847	\$ -	\$ 33,000	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 2,369,847	\$ 569,153	\$ -

Project Name						SLH Monitoring System, Physiological			Project Budget: \$190,000		
Project Number						6220000			RHD Contribution (Y/N): Y		
Project Manager						Maxwell M.					
% Complete Status			On Time	On Budget	Other Issues	Start Date	Substantial Completion				
Programming	Design	Const.					Original	Rev. #	Estimated		
N/A	100%	100%	Y	Y	N	Oct-20	Apr-21	1	May-21		
Scope											
Physiological monitoring systems consist of a bedside monitor connected to a central system and the patient. This system continuously monitors the patient's ECG, blood pressure, temperature, and blood oxygen levels among other vital signs. This information is also sent to a central system, which displays all of this information for each patient in real time at the nursing station. This system is replacing a 2010 model in the intensive care unit.											
Progress											
Project is complete and is awaiting financial completion.											
Issues											
None.											
Financial											
Actuals to March 31, 2021	Actuals YTD	FY22	FY23	Projected		FY24	FY25	FY26	Total Actuals + Projected	Projected Unspent	Variance to Budget
\$ 152,704	\$ 25,280	\$ 25,280	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 177,984	\$ 12,016	\$ 0

North Okanagan Columbia Shuswap Reports

December 2021

Project Name						QVH Elevator Modernization			Project Budget:		\$780,000
Project Number						6220001			RHD Contribution (Y/N):		Y
Project Manager						James D.					
% Complete Status			On Time	On Budget	Other Issues	Start Date	Substantial Completion				
Programming	Design	Const.					Original	Rev. #	Estimated		
N/A	100%	100%	Y	Y	N	May-19	Apr-20	1	Mar-21		
Scope											
This project entails the complete installation of a new elevator within an existing redundant elevator shaft and associated architectural, mechanical & electrical work. Work will include the installation of new structural steel, cut out of existing blockwork miscellaneous builders work, installation of a new elevator and associated electrical and mechanical work within the existing shaft and elevator machine room.											
Progress											
Project is complete and the close out process is underway.											
Issues											
None.											
Financial											
Actuals to March 31, 2021	Actuals YTD	FY22	FY23	Projected		FY24	FY25	FY26	Total Actuals + Projected	Projected Unspent	Variance to Budget
\$ 600,756	\$ 86,224	\$ 86,224	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 686,980	\$ 93,020	\$ 0

Project Name						QVH Emergency Generator			Project Budget:		\$4,950,000
Project Number						6220002			RHD Contribution (Y/N):		Y
Project Manager						James D.					
% Complete Status			On Time	On Budget	Other Issues	Start Date	Substantial Completion				
Programming	Design	Const.					Original	Rev. #	Estimated		
N/A	100%	100%	Y	Y	N	Jun-19	Jun-21	0	Jun-21		
Scope											
The existing single diesel generator is under sized and is to be replaced with two new redundant emergency generators. The generators will be sized to back up all the essential loads of the hospital. This new electrical system will incorporate a "bumpless" or closed transition automatic transfer switch which will allow the hospital to test the emergency power system on a weekly basis without power interruption to the hospital's normal operations. The work will include a new high voltage electrical service to serve a new 600 volt primary distribution and upgrades to portions of the 208 volt distribution to provide improved reliability of the system.											
Progress											
Project is complete and the close out process is underway.											
Issues											
None.											
Financial											
Actuals to March 31, 2021	Actuals YTD	FY22	FY23	Projected		FY24	FY25	FY26	Total Actuals + Projected	Projected Unspent	Variance to Budget
\$ 1,008,822	\$ 1,053,282	\$ 1,056,949	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 2,065,770	\$ 2,884,230	\$ (0)

Project Name						SAC Leasehold Improvements			Project Budget:		\$600,000
Project Number						6220006			RHD Contribution (Y/N):		Y
Project Manager						Maxwell M.					
% Complete Status			On Time	On Budget	Other Issues	Start Date	Substantial Completion				
Programming	Design	Const.					Original	Rev. #	Estimated		
100%	100%	0%	N	N	Y	Mar-20	Jun-20	2	Mar-22		
Scope											
To improve access for those with complex medical conditions and/or frailty IH is moving community services within Salmon Arm over the next three years in order to address an upcoming lease termination and take advantage of an opportunity to consolidate programs within the community, addressing current needs and future growth. The move of services also provides the opportunity for a fresh look at space organization and utilization, which is expected to find efficiencies.											
Progress											
Project is over budget and the sole tender bid was rejected. Options forward are being reviewed by senior management.											
Issues											
Labour market and supply chain issues are influencing bid costs. Project budget, quantity survey, and bid results do not support continuing with project in current configuration. Working with site leadership to develop next steps.											
Financial											
Actuals to March 31, 2021	Actuals YTD	FY22	FY23	Projected		FY24	FY25	FY26	Total Actuals + Projected	Projected Unspent	Variance to Budget
\$ 6,430	\$ 25,341	\$ 25,341	\$ 568,360	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 600,131	\$ -	\$ (131)

North Okanagan Columbia Shuswap Reports

December 2021

Project Name						SLH Pharmacy Renovation			Project Budget:			\$2,530,000
Project Number						6220007			RHD Contribution (Y/N):			Y
Project Manager						Maxwell M.						
% Complete Status			On Time	On Budget	Other Issues	Start Date	Substantial Completion					
Programming	Design	Const.					Original	Rev. #	Estimated			
N/A	100%	40%	Y	Y	N	May-19	Aug-20	3	May-22			
Scope												
The sterile compounding area in the Pharmacy Department at this site requires upgrading, including new equipment, air filtration, and air flow handling. Effective May 2021, the College of Pharmacists of British Columbia bylaws will require all pharmacies in B.C. to adopt the National Association of Pharmacy Regulatory Authorities model standards for sterile compounding. Compounding allows individual ingredients to be mixed together in personalized strengths and dosages based on a patient's needs.												
Progress												
Phase 2 construction continues to build the hazardous compounding room.												
Issues												
None.												
Financial												
Actuals to March 31, 2021	Actuals YTD	FY22	FY23	Projected			Total Actuals + Projected	Projected Unspent	Variance to Budget			
\$ 131,754	\$ 527,751	\$ 1,789,969	\$ 608,277	\$ -	\$ -	\$ -	\$ 2,530,000	\$ -	\$ 0			

Project Name						VJH CT Scanner (Replacement)			Project Budget:			\$2,859,000
Project Number						6121008			RHD Contribution (Y/N):			Y
Project Manager						James D.						
% Complete Status			On Time	On Budget	Other Issues	Start Date	Substantial Completion					
Programming	Design	Const.					Original	Rev. #	Estimated			
N/A	100%	40%	Y	Y	N	TBD	Jan-22	1	Feb-22			
Scope												
A CT scan combines a series of X-ray images taken from different angles around the body and uses computer processing to create cross-sectional images (slices) of the bones, blood vessels and soft tissues. This premium CT scanner is larger, requiring more cooling, and will draw more power than a standard CT, resulting in substantial renovation costs. This machine is replacing the existing CT installed in 2008 in the medical imaging department.												
Progress												
Phase 1 CT Scanner Relocation - Renovation is substantially complete and the relocated CT scanner is now operational for clinical use. All deficiencies have been completed except replacing the existing emergency stop button with the correct colour. This item is on back order and will be addressed as soon as it arrives.												
Issues												
None.												
Financial												
Actuals to March 31, 2021	Actuals YTD	FY22	FY23	Projected			Total Actuals + Projected	Projected Unspent	Variance to Budget			
\$ 609,751	\$ 228,818	\$ 355,778	\$ 1,729,350	\$ -	\$ -	\$ -	\$ 2,694,879	\$ 164,121	\$ 0			

Project Name						BSP Generator Replacement			Project Budget:			\$1,200,000
Project Number						6221014			RHD Contribution (Y/N):			Y
Project Manager						Maxwell M.						
% Complete Status			On Time	On Budget	Other Issues	Start Date	Substantial Completion					
Programming	Design	Const.					Original	Rev. #	Estimated			
N/A	100%	40%	N	Y	N	TBD	May-21	2	Mar-22			
Scope												
The current generator is over 25 years old and parts are difficult to obtain. The new generator will be sized to back up all the essential loads of this long-term care facility. The work will include a new generator, automatic transfer switch, 72 hour sub-based fuel tank, cabling and a new outdoor enclosure.												
Progress												
All site work has been completed to prepare for delivery and installation of generator and automatic transfer switch. Supply chain issues have pushed the fuel tank out several months, delaying the delivery and subsequent installation to March 2022.												
Issues												
None.												
Financial												
Actuals to March 31, 2021	Actuals YTD	FY22	FY23	Projected			Total Actuals + Projected	Projected Unspent	Variance to Budget			
\$ 48,150	\$ 150,487	\$ 164,364	\$ 620,886	\$ -	\$ -	\$ -	\$ 833,400	\$ 366,600	\$ 0			

North Okanagan Columbia Shuswap Reports December 2021

Project Name						SLH CT Scanner (Replacement)			Project Budget:		\$2,509,000
Project Number						6221012			RHD Contribution (Y/N):		N
Project Manager						Maxwell M.					
% Complete Status			On Time	On Budget	Other Issues	Start Date	Substantial Completion				
Programming	Design	Const.					Original	Rev. #	Estimated		
N/A	100%	95%	Y	Y	N	Apr-21	Nov-21	0	Nov-21		
Scope											
A CT scan combines a series of x-ray images taken from different angles around the body and uses computer processing to create cross-sectional images (slices) of the bones, blood vessels and soft tissues. This premium CT scanner is larger, requiring more cooling, and will draw more power than a standard CT, resulting in substantial renovation costs. This machine is replacing the existing CT installed in 2010 in the medical imaging department.											
Progress											
Project is complete save for a few small deficiencies that were on back-order. Deficiencies will be complete by end of January. Substantial Completion has been confirmed and room is fully operational.											
Issues											
None.											
Financial											
Actuals to March 31, 2021	Actuals YTD	FY22	FY23	Projected			Total Actuals + Projected	Projected Unspent	Variance to Budget		
				FY24	FY25	FY26					
\$ 609,744	\$ 332,329	\$ 1,389,256	\$ -	\$ -	\$ -	\$ -	\$ 1,999,000	\$ 510,000	\$ (0)		

Project Name						SLH Mammography System			Project Budget:		\$1,938,000
Project Number						6221215			RHD Contribution (Y/N):		N
Project Manager						Maxwell M.					
% Complete Status			On Time	On Budget	Other Issues	Start Date	Substantial Completion				
Programming	Design	Const.					Original	Rev. #	Estimated		
N/A	30%	0%	Y	Y	N	Apr-21	May-22	0	May-22		
Scope											
This equipment is essentially an x-ray system for breast imaging and is primarily used for cancer detection. The tube shoots x-rays through the breast tissue and exposes on a film held below. The images are extremely detailed and require a very high level of resolution. Mammography is the one field of medical imaging that has not made a successful transfer to digital imaging and PACS systems, and as such mammography systems are still using film. A digital stereotactic unit is an optional component of a mammography system. Mammographic stereotactic biopsy systems are used to perform fine-needle aspiration and core-needle biopsies when a lesion is found on a screening mammogram. Stereotactically guided needle biopsy, an outpatient procedure that leaves no scars, is an alternative to biopsy by excisional surgery, a painful procedure that often requires a hospital stay and is likely to cause scarring. This is a new program for the medical imaging department at this site.											
Progress											
Project is back on budget and Schematic Design Review is booked for early January.											
Issues											
None.											
Financial											
Actuals to March 31, 2021	Actuals YTD	FY22	FY23	Projected			Total Actuals + Projected	Projected Unspent	Variance to Budget		
				FY24	FY25	FY26					
\$ -	\$ 5,781	\$ 20,783	\$ 1,917,217	\$ -	\$ -	\$ -	\$ 1,938,000	\$ -	\$ -		

North Okanagan Columbia Shuswap Reports

December 2021

Project Name						VJH Inpatient Psychiatry Redesign - Concept Plan			Project Budget:		\$700,000
Project Number						6121257			RHD Contribution (Y/N):		N
Project Manager						Jared F.					
% Complete Status			On Time	On Budget	Other Issues	Start Date	Substantial Completion				
Programming	Design	Const.					Original	Rev. #	Estimated		
50%	0%	0%	Y	Y	N	Feb-21	Dec-21	1	Feb-22		
Scope											
The Ministry of Health (MoH) has provided approval to submit a Concept Plan to relocate and redevelop a new psychiatry inpatient unit on the Vernon Jubilee Hospital (VJH) campus. VJH Inpatient Psychiatric Unit is the designated secondary service for the residents in the North Okanagan, Shuswap and Revelstoke regions. The current 1972 era building has design and layout issues that impede patient recovery and pose significant patient and staff safety risks. Therefore, a patient-centered design would have significant benefit to these patients, their quality of care and for the staff. A capital planning project is required to complete the Concept Plan for submission to the MoH.											
Progress											
Functional programming is well underway with stakeholders and design consultants. Preliminary design options have been costed by the QS and further discussion is required before beginning the refinement process for the preferred schematic design approach. Sections of the Concept Plan have been shared with the Ministry of Health for review and comment.											
Issues											
None.											
Financial											
Actuals to March 31, 2021	Actuals YTD	FY22	FY23	Projected		FY24	FY25	FY26	Total Actuals + Projected	Projected Unspent	Variance to Budget
\$ -	\$ -	\$ -	\$ 642,000	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 642,000	\$ 58,000	\$ -

Project Name						SAC Community Care Services - Leasehold			Project Budget:		\$1,800,000
Project Number						6222002			RHD Contribution (Y/N):		Y
Project Manager						Maxwell M.					
% Complete Status			On Time	On Budget	Other Issues	Start Date	Substantial Completion				
Programming	Design	Const.					Original	Rev. #	Estimated		
50%	20%	0%	0	Y	Y	Apr-21	Jul-22	0	Jul-22		
Scope											
With one of our community partners and landlords experiencing increasing demands for their services this has triggered a review of space requirements in Salmon Arm as well as an opportunity to align the delivery of Community Services. A move from three leased facilities to two will allow for a strategic collocation to improve services. Moving to two locations will allow for one site to provide all Mental Health & Substance Use services in one location with a second location focusing on all other community programming. Project will include fitting out new space with all the required tenant improvements and information at 10 Avenue NE.											
Progress											
Project is on hold awaiting Senior Management action.											
Issues											
With potential changes requested related changes in community service delivery models the project would deviate significantly from the original approved scope. This issue under review with senior leadership.											
Financial											
Actuals to March 31, 2021	Actuals YTD	FY22	FY23	Projected		FY24	FY25	FY26	Total Actuals + Projected	Projected Unspent	Variance to Budget
\$ -	\$ 15,338	\$ 15,338	\$ -	\$ 120,000	\$ -	\$ -	\$ -	\$ -	\$ 135,338	\$ 1,664,662	\$ -

Project Name						VER Vernon Long-term Care Facility - Business Plan			Project Budget:		\$400,000
Project Number						6122000			RHD Contribution (Y/N):		Y
Project Manager						Maria B.					
% Complete Status			On Time	On Budget	Other Issues	Start Date	Substantial Completion				
Programming	Design	Const.					Original	Rev. #	Estimated		
0%	0%	0%	Y	Y	N	May-21	Jun-22	1	Sep-22		
Scope											
Investing in renewal and expansion of health authority-owned LTC facilities is a priority for the MoH 10-year capital plan. IH has been requested to develop business plans for our highest priority LTC projects in the community. A capital planning project is required to further refine the project requirements and to complete the Business Plan submission to the MoH.											
Progress											
Initial project approval has been provided. Scope of work drafting has begun. Consultant engagement will commence upon direction from the 2 current LTC planning projects.											
Issues											
None.											
Financial											
Actuals to March 31, 2021	Actuals YTD	FY22	FY23	Projected		FY24	FY25	FY26	Total Actuals + Projected	Projected Unspent	Variance to Budget
\$ -	\$ -	\$ 345,100	\$ 4,700	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 349,800	\$ 50,200	\$ -

North Okanagan Columbia Shuswap Reports December 2021

Project Name						VJH Psychiatric Unit 3N Redesign				Project Budget:		\$173,000
Project Number						6122001				RHD Contribution (Y/N):		Y
Project Manager						Guy H.						
% Complete Status			On Time	On Budget	Other Issues	Start Date	Substantial Completion					
Programming	Design	Const.					Original	Rev. #	Estimated			
NA	100%	0%	Y	Y	N	Apr-21	Dec-21	0	Dec-21			
Scope												
Currently there are 17 designated psychiatric beds to serve the entire North Okanagan. The average number of beds utilized at VJH for psychiatric patients has consistently surpassed the number of beds available. Due to the high occupancy of psychiatric patients the most complex/acute patients are cared for on the in-patient psychiatric unit while the remainder of the clients are cared for in the emergency department overflow area or on medical units. The intent is to create an additional designated area for psychiatric patients so these patients can be co-located in a safe environment and cared for by the Mental Health and Substance Use team. To modify the area changes are required to ensure safety of the clients. Eight rooms will be modified to include double swing doors to prevent clients from barricading themselves in the rooms, add impact resistant material to the windows, installing cameras in the hallways and eliminating any fixtures that could be utilized for self-harm. The changes to 3 North are an interim measure to create a safe environment where psychiatric patients can be cared for while we await the new unit for VJH.												
Progress												
Installation was due to commence in September, however with the increased surge in COVID-19 patients this has been delayed until October, at this time however still anticipated to meet completion by financial year end.												
Issues												
None.												
Financial												
Actuals to March 31, 2021	Actuals YTD	FY22	FY23	Projected			Total Actuals + Projected	Projected Unspent	Variance to Budget			
\$ -	\$ -	\$ 150,000	\$ -	\$ -	\$ -	\$ -	\$ 150,000	\$ -	\$ -			

Project Name						PVM Generator & Switchgear Replacement				Project Budget:		\$950,000
Project Number						6122012				RHD Contribution (Y/N):		Y
Project Manager						Maxwell M.						
% Complete Status			On Time	On Budget	Other Issues	Start Date	Substantial Completion					
Programming	Design	Const.					Original	Rev. #	Estimated			
N/A	40%	0%	Y	Y	0	May-21	Jan-21	1	Apr-22			
Scope												
This facility currently has a 22 year old generator which does not meet the emergency power requirements for the campus during a power failure. The scope of this project will be to replace the existing generator, automatic transfer switch and portions of the primary and secondary distribution in order to supply the entire site with the required emergency power.												
Progress												
Design Development review scheduled for January. Project is on budget per Class C at Schematic Design phase.												
Issues												
Long lead times for generators in this climate will likely push our delivery of equipment to late 2022.												
Financial												
Actuals to March 31, 2021	Actuals YTD	FY22	FY23	Projected			Total Actuals + Projected	Projected Unspent	Variance to Budget			
\$ -	\$ 8,140	\$ 14,578	\$ 685,422	\$ -	\$ -	\$ -	\$ 700,000	\$ 250,000	\$ -			

Project Name						QVH Monitoring System, Physiological				Project Budget:		\$183,000
Project Number						6222003				RHD Contribution (Y/N):		Y
Project Manager						James Dalsvaag						
% Complete Status			On Time	On Budget	Other Issues	Start Date	Substantial Completion					
Programming	Design	Const.					Original	Rev. #	Estimated			
N/A	NA	100%	Y	Y	N	May-21	Sep-21	0	Sep-21			
Scope												
Physiological monitoring systems consist of a bedside monitor connected to a central system and the patient. This system continuously monitors the patient's electrocardiogram, blood pressure, temperature, and blood oxygen levels among other vital signs. This new system is replacing a 2010 model in the combined medical/surgical department.												
Progress												
Project is complete and the close out process is underway.												
Issues												
None.												
Financial												
Actuals to March 31, 2021	Actuals YTD	FY22	FY23	Projected			Total Actuals + Projected	Projected Unspent	Variance to Budget			
\$ -	\$ 132,836	\$ 132,836	\$ -	\$ -	\$ -	\$ -	\$ 132,836	\$ 50,164	\$ (0)			

North Okanagan Columbia Shuswap Reports

December 2021

Project Name						VJH CT Scanner (Additional)			Project Budget:		\$5,700,000
Project Number						6122105			RHD Contribution (Y/N):		N
Project Manager						James D.					
% Complete Status			On Time	On Budget	Other Issues	Start Date	Substantial Completion				
Programming	Design	Const.					Original	Rev. #	Estimated		
0%	35%	0%	Y	Y	N	Jul-21	Jan-23	0	Jan-23		
Scope											
Purchase of an additional second CT Scanner and renovations to a vacated area and exterior courtyard at the VJH, including upgrading electrical and HVAC to meet the specifications of the newer technology to accommodate it.											
Progress											
The stakeholder design development meeting was held and a revised class C estimate was produced indicating the project is on budget. The consultant team will continue pushing the design forward in January.											
Issues											
None.											
Financial											
Actuals to March 31, 2021		Actuals YTD		Projected			Total Actuals + Projected		Projected Unspent	Variance to Budget	
		FY22	FY23	FY24	FY25	FY26					
\$ -	\$ -	\$ 451,600	\$ 3,248,400	\$ -	\$ -	\$ -	\$ 3,700,000	\$ 2,000,000	\$ -	\$ -	

Project Name						BSP Chiller Replacement			Project Budget:		\$770,000
Project Number						6222113			RHD Contribution (Y/N):		N
Project Manager						Marko K.					
% Complete Status			On Time	On Budget	Issues	Start Date	Substantial Completion				
Programming	Design	Const.					Original	Rev. #	Revised		
0%	0%	0%	Y	Y	N	TBD	Mar-22	0	Mar-22		
Scope											
The project tender package has been completed. Upon completion of a Class A estimate it has been found with current market conditions the project is over budget, a review is currently underway regarding next steps.											
Progress											
Project initiation is underway.											
Issues											
None.											
Financial											
Actuals to March 31, 2021		Actuals YTD		Projected			Total Actuals + Projected		Projected Unspent	Variance to Budget	
		FY21	FY22	FY23	FY24	FY25					
\$ -	\$ -	\$ 1,485	\$ 768,515	\$ -	\$ -	\$ -	\$ 770,000	\$ -	\$ -	\$ -	

Project Name						VJH Meal Delivery System			Project Budget:		\$1,430,000
Project Number						6122007			RHD Contribution (Y/N):		N
Project Manager						Lorne C.					
% Complete Status			On Time	On Budget	Issues	Start Date	Substantial Completion				
Programming	Design	Const.					Original	Rev. #	Revised		
N/A	0%	0%	0	Y	N	TBD	TBD	0	TBD		
Scope											
IH is implementing the Patient Choice Meal Service model at this facility. This new service model better reflects client centered care by giving patients a choice while meeting their clinical nutritional needs. Proper nutrition is an important part of recovery and overall health. Our hospitals are prepared to provide our inpatients with nutritionally-balanced meals to encourage a successful recovery with a choice in menu items providing greater satisfaction. This project will replace rethermalization equipment from 2003 and includes renovations and associated IMIT hardware and software.											
Progress											
Project initiation underway.											
Issues											
None.											
Return to main Status Report.											
Financial											
Actuals to March 31, 2021		Actuals YTD		Projected			Total Actuals + Projected		Projected Unspent	Variance to Budget	
		FY21	FY22	FY23	FY24	FY25					
\$ -	\$ -	\$ -	\$ 1,430,000	\$ -	\$ -	\$ -	\$ 1,430,000	\$ -	\$ -	\$ -	

Okanagan Similkameen Reports

December 2021

Project Name		PRH Patient Care Tower					Project Budget:		\$255,597,758	
Project Number		6115193					RHD Contribution (Y/N):		Y	
Project Manager		Scott M.								
% Complete Status			On Time	On Budget	Other Issues	Start Date	Substantial Completion			
Programming	Design	Const.					Original	Rev. #	Revised	
100%	100%	100%	Y	Y	N	Apr-16	Jan-19	1	Dec-18	
Scope										
Phase 1 encompasses the construction of a new patient care tower which includes a new walk-in care centre, surgical services center, 84 medical/surgical single patient rooms, a new medical device reprocessing unit, parkade and space for the UBC Faculty of Medicine Program. Phase 2 covers the renovation of the vacated areas in the current hospital to expand the emergency department, pharmacy, laundry and material stores.										
Progress										
Phase 1 of the project is complete, all elements of the DKT are operational and all remaining deficiency work associated with the construction are complete. Following the completion of the phase 2 work, the project will be substantially complete.										
Issues										
None.										
Financial										
Actuals to March 31, 2021	Actuals YTD	FY22	FY23	Projected FY24	FY25	FY26	Total Actuals + Projected	Projected Unspent	Variance to Budget	
\$ 242,147,027	\$ -	\$ 2,332,798	\$ 141,534	\$ 9,906,020	\$ -	\$ 250,658,047	\$ 8,212,568	\$ -	\$ -	

Project Name		PRH Patient Care Tower Equipment					Project Budget:		\$20,016,266	
Project Number		6117190					RHD Contribution (Y/N):		Y	
Project Manager		Scott M.								
% Complete Status			On Time	On Budget	Other Issues	Start Date	Substantial Completion			
Programming	Design	Const.					Original	Rev. #	Revised	
N/A	85%	85%	Y	Y	N	Apr-16	Feb-19	0	Mar-22	
Scope										
To purchase equipment for the new Patient Care Tower in Penticton.										
Progress										
Equipment planning and procurement is coordinated with completion of the project. Attached updated completion status and substantial completion dates are for Phase 1 of the project and do not include Phase 2 which is still underway. Phase 2 construction is underway, with completion scheduled for March 2022.										
Issues										
None.										
Financial										
Actuals to March 31, 2021	Actuals YTD	FY22	FY23	Projected FY24	FY25	FY26	Total Actuals + Projected	Projected Unspent	Variance to Budget	
\$ 18,291,720	\$ -	\$ 1,015,684	\$ 510,000	\$ 198,862	\$ -	\$ 20,016,266	\$ -	\$ -	\$ -	

Project Name		PRH Patient Care Tower Phase 2 Reno					Project Budget:		\$25,953,939	
Project Number		6117212					RHD Contribution (Y/N):		Y	
Project Manager		Scott M.								
% Complete Status			On Time	On Budget	Other Issues	Start Date	Substantial Completion			
Programming	Design	Const.					Original	Rev. #	Revised	
N/A	100%	95%	Y	Y	N	Oct-19	Mar-22	0	Mar-22	
Scope										
Phase 2 Reno covers the renovation of the vacated areas in the current hospital to expand the Emergency Department, Pharmacy, Laundry and Material Stores.										
Progress										
~The last major phase of the renovation was completed in December and opened for use on December 16, 2021. ~The new ambulance canopy also open on December 16, 2021. ~The construction team is now focused on the remaining minor elements of work left for the renovation which are primarily the transition areas between the previous phases. This work is underway and is targeting to be complete by the end of February.										
Issues										
None.										
Financial										
Actuals to March 31, 2021	Actuals YTD	FY22	FY23	Projected FY24	FY25	FY26	Total Actuals + Projected	Projected Unspent	Variance to Budget	
\$ 17,803,173	\$ -	\$ 6,696,187	\$ 2,628,004	\$ (1,173,426)	\$ -	\$ 25,953,939	\$ -	\$ -	\$ -	

Okanagan Similkameen Reports

December 2021

Project Name PRH Various Infrastructure Projects						Project Budget: \$3,500,000			
Project Number 6118023						RHD Contribution (Y/N): Y			
Project Manager Scott M.									
% Complete Status			On Time	On Budget	Other Issues	Start Date	Substantial Completion		
Programming	Design	Const.					Original	Rev. #	Revised
N/A	100%	96%	Y	Y	N	Dec-17	Oct-18	1	Sep-21
Scope									
This project addresses electrical and Heating Ventilation and Air Conditioning (HVAC) system deficiencies. These upgrades would include replacement of major components such as transformers, motor control centers and wire boards. In addition, there are several air handlers on the campus within the HVAC system which require replacement as they have exceeded their life expectancy.									
The second phase will address the remaining heating, ventilation and air conditioning systems which have exceeded their life expectancy. This portion of the project will continue the improvements made from the first phase that was approved last year and ensure the reliability of several air handlers and chillers on the campus serving critical care areas of the facility. The remaining funds will be used to upgrade and modernize elevator components which have also exceeded their life expectancy. This upgrade will ensure the elevators' reliability, operational longevity and provide more efficient patient transportation.									
Progress									
~All elements of the project are complete with the exception of the remaining chiller that is to be installed. The chiller has been installed and connected. Final commissioning will take place in the spring when warmer temperatures allow for balancing and verification of operations. The project is now substantially completed with major remaining billings expected in the next period.									
Issues									
None.									
Financial									
Actuals to March 31, 2021	Actuals YTD	FY22	FY23	Projected FY24	FY25	FY26	Total Actuals + Projected	Projected Unspent	Variance to Budget
\$ 3,180,019	\$ -	\$ 210,735	\$ -	\$ -	\$ -	\$ -	\$ 3,390,754	\$ 109,246	\$ -

Project Name SOG Renovation of Emergency Department, Triage and Admitting						Project Budget: \$1,300,000			
Project Number 6119001						RHD Contribution (Y/N): Y			
Project Manager Ev K.									
% Complete Status			On Time	On Budget	Other Issues	Start Date	Substantial Completion		
Programming	Design	Const.					Original	Rev. #	Revised
100%	100%	100%	Y	Y	N	Apr-18	Mar-19	4	Jan-20
Scope									
Provision of a dedicated space will facilitate triage being performed in a confidential manner by appropriate staff reducing risk to the organization. Locating admitting services near the ED is a LEAN concept for reducing traffic between two high volume departments. The scope of work will be phased to allow for renovation of administration spaces, development of a new waiting and triage area and separate public ED entrance. The project also includes new exterior signage to improve wayfinding to the ED.									
Progress									
Final invoice has been received and processed. Project being closed.									
Issues									
None.									
Financial									
Actuals to March 31, 2021	Actuals YTD	FY22	FY23	Projected FY24	FY25	FY26	Total Actuals + Projected	Projected Unspent	Variance to Budget
\$ 1,241,206	\$ 49,968	\$ 49,968	\$ 8,826	\$ -	\$ -	\$ -	\$ 1,300,000	\$ -	\$ 0

Project Name PRH PCMS (Patient Choice Meal Service)						Project Budget: \$799,160			
Project Number 6120124						RHD Contribution (Y/N): Y			
Project Manager Lorne C.									
% Complete Status			On Time	On Budget	Other Issues	Start Date	Substantial Completion		
Programming	Design	Const.					Original	Rev. #	Revised
0%	0%	0%	0	Y	N	TBD	TBD	0	TBD
Scope									
To replace the current food delivery system with a Patient Choice Meal Service.									
Progress									
Work is being coordinated with the PRH PCT project.									
Issues									
None.									
Financial									
Actuals to March 31, 2021	Actuals YTD	FY22	FY23	Projected FY24	FY25	FY26	Total Actuals + Projected	Projected Unspent	Variance to Budget
\$ 62,797	\$ -	\$ 736,363	\$ -	\$ -	\$ -	\$ 799,160	\$ -	\$ -	\$ -

Okanagan Similkameen Reports

December 2021

Project Name PRH Medical Vacuum System Replacement						Project Budget: \$735,000					
Project Number 6121009						RHD Contribution (Y/N): Y					
Project Manager Shane H.											
% Complete Status			On Time	On Budget	Other Issues	Start Date	Substantial Completion				
Programming	Design	Const.					Original	Rev. #	Revised		
N/A	100%	25%	Y	Y	N	Dec-20	May-21	3	Mar-22		
Scope											
The existing medical vacuum systems were installed 10 years ago and are a critical component to patient care. New vacuum systems are more energy efficient, ensure adequate redundancy and comply with the latest standards. The scope of work will include a new vacuum system, associated controls, alarms and CSA compliance commissioning.											
Progress											
Medical vacuum equipment arrived on site Dec 2021. The construction tendering for installation has also been completed and PO's issued. In addition in December a construction kickoff meeting was completed and mobilization to site has been approved for contractor to begin site work in Jan 2022.											
Issues											
None.											
Financial											
Actuals to March 31, 2021	Actuals YTD	FY22	FY23	Projected		FY24	FY25	FY26	Total Actuals + Projected	Projected Unspent	Variance to Budget
\$ 180,832	\$ 699	\$ 144,699	\$ 49,469	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 375,000	\$ 360,000	\$ -

Project Name PGH Electrical Infrastructure Upgrade - Phase 1						Project Budget: \$2,300,000					
Project Number 6121011						RHD Contribution (Y/N): Y					
Project Manager Shane H.											
% Complete Status			On Time	On Budget	Other Issues	Start Date	Substantial Completion				
Programming	Design	Const.					Original	Rev. #	Revised		
N/A	50%	0%	Y	Y	N	Feb-21	May-22	1	Jul-22		
Scope											
The first phase will develop the overall design of the electrical system and replace the 1999 back-up generator with a stand-alone walk-in enclosure outside the building adjacent to the exterior fuel tanks for a cost of \$1.15 million, which has been included in this year's funding request. This project will improve the reliability of the electrical system while adding some flexibility to more easily allow future maintenance tasks.											
Progress											
The design is underway and anticipated to be complete by early winter. Material lead time feedback from the suppliers is longer than expected - in excess of 26 weeks from finalized design. This delay creates additional seasonal constraints due to the required shutdowns to complete the installation and commissioning. Overall completion is anticipated in Summer 2022.											
Issues											
None.											
Financial											
Actuals to March 31, 2021	Actuals YTD	FY22	FY23	Projected		FY24	FY25	FY26	Total Actuals + Projected	Projected Unspent	Variance to Budget
\$ -	\$ 9,547	\$ 34,543	\$ 2,265,457	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 2,300,000	\$ -	\$ -

Project Name PRH CT Scanner						Project Budget: \$5,000,000					
Project Number 6121006						RHD Contribution (Y/N): Y					
Project Manager Shane H.											
% Complete Status			On Time	On Budget	Other Issues	Start Date	Substantial Completion				
Programming	Design	Const.					Original	Rev. #	Revised		
N/A	95%	0%	0	Y	N	Dec-20	Apr-22	0	Apr-22		
Scope											
A CT scan combines a series of X-ray images taken from different angles around the body and uses computer processing to create cross-sectional images (slices) of the bones, blood vessels and soft tissues. This additional, second CT scanner to the medical imaging department is required to meet the current and future demands of this site. This premium CT scanner is larger, requiring more cooling, and will draw more power than a standard CT, resulting in substantial renovation costs.											
Progress											
Design has progressed to 95% and Tender documents are in progress with release for tender planned in Jan 22 through our site P3 Partners.											
Issues											
Overall construction will be revised to reflect design and tendering delays once the construction contract has been awarded.											
Financial											
Actuals to March 31, 2021	Actuals YTD	FY22	FY23	Projected		FY24	FY25	FY26	Total Actuals + Projected	Projected Unspent	Variance to Budget
\$ 20,760	\$ 436,087	\$ 456,724	\$ 4,422,516	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 4,900,000	\$ 100,000	\$ -

Okanagan Similkameen Reports

December 2021

Project Name SHC Boiler Replacement						Project Budget: \$1,000,000					
Project Number 6122003						RHD Contribution (Y/N): N					
Project Manager Lucas M.											
% Complete Status			On Time	On Budget	Other Issues	Start Date	Substantial Completion				
Programming	Design	Const.					Original	Rev. #	Revised		
N/A	25%	0%	Y	Y	N	Jun-21	Jul-22	0	Jul-22		
Scope											
This project entails efficiency upgrades to the boiler room at this facility which will include replacing the two existing main boilers with condensing boilers, interconnecting the main site to the adjacent long-term care facility and making upgrades to the hydronic system to improve reliability and efficiency. This project's 60% portion will be funded through the MoH's Carbon Neutral Capital Program and aligns with carbon reduction and sustainability goals.											
Progress											
The design team has submitted schematic design drawings for review. Design will be advised once schematic plan has been approved.											
Issues											
None.											
Financial											
Actuals to March 31, 2021	Actuals YTD	FY22	FY23	Projected		FY24	FY25	FY26	Total Actuals + Projected	Projected Unspent	Variance to Budget
\$ -	\$ 10,473	\$ 528,418	\$ 437,833	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 966,251	\$ 33,749	\$ -

Project Name SHC Emergency Generator Upgrade						Project Budget: \$900,000					
Project Number 6122004						RHD Contribution (Y/N): Y					
Project Manager Lucas M.											
% Complete Status			On Time	On Budget	Other Issues	Start Date	Substantial Completion				
Programming	Design	Const.					Original	Rev. #	Revised		
N/A	5%	0%	Y	Y	N	Jun-21	Sep-22	1	Oct-22		
Scope											
The current generator is over 36 years old and parts are difficult to obtain. The new generator will be sized to back up all the essential loads of this facility. The work will include a new generator, automatic transfer switch, 72 hour sub-based fuel tank, cabling and associated upgrades to the switchgear and emergency distribution.											
Progress											
The ITQ has come back with a low bidder, the award is on track by the end of the month.											
Issues											
None.											
Financial											
Actuals to March 31, 2021	Actuals YTD	FY21	FY22	Projected		FY23	FY24	FY25	Total Actuals + Projected	Projected Unspent	Variance to Budget
\$ -	\$ -	\$ 115,555	\$ 730,444	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 846,000	\$ 54,000	\$ -

Project Name SOG Monitoring System, Physiological						Project Budget: \$324,000					
Project Number 6122018						RHD Contribution (Y/N): Y					
Project Manager Shane Herrington											
% Complete Status			On Time	On Budget	Other Issues	Start Date	Substantial Completion				
Programming	Design	Const.					Original	Rev. #	Revised		
N/A	100%	0%	0	Y	N	Jun-21	Nov-21	2	Feb-22		
Scope											
Physiological monitoring systems consist of a bedside monitor connected to a central system and the patient. This system continuously monitors the patient's electrocardiogram, blood pressure, temperature, and blood oxygen levels among other vital signs. This new system is replacing a 2012 model in the emergency department.											
Progress											
Planning is complete and product supply resolved to allow site installation in winter 2022 after system configuration and testing off site at Penticton Regional Hospital.											
Issues											
Minor delivery delays have pushed testing in Jan 2022. Installation schedule impact being reviewed with clinical team and biomedical department.											
Financial											
Actuals to March 31, 2021	Actuals YTD	FY21	FY22	Projected		FY23	FY24	FY25	Total Actuals + Projected	Projected Unspent	Variance to Budget
\$ -	\$ 219	\$ -	\$ 173,000	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 324,000	\$ -	\$ -

Thompson Reports

December 2021

Project Name RIH Patient Care Tower						Project Budget: \$313,857,350					
Project Number 6217218						RHD Contribution (Y/N): Y					
Project Manager Scott M.											
% Complete Status			On Time	On Budget	Issues	Start Date	Substantial Completion				
Programming	Design	Const.					Original	Rev. #	Revised		
100%	100%	94%	Y	Y	N	Nov-18	Feb-22	0	Feb-22		
Scope											
The Patient Care Tower (PCT) will provide surgical services, maternal services, mental health services, respiratory, inpatients units, support spaces, underground parkade, and rooftop heliport.											
Progress											
Current construction activity as of November 2021:											
o Final power outages from December 6-9 for conditional/vital/delayed vital. Meetings with the stakeholder departments will be on going through the impacts.											
o A draft blackline project agreement has been submitted from Project Co to the Authority for review.											
o Millwork installation to the atrium and main entrance. Wood panel installation to the public elevator cabs.											
o Punch list completion activities ongoing for levels 2 and 3.											
o Installation of interior glazing, plumbing fixtures, doors, lockers, accessories, and bumper and crashrails from mid to upper levels ongoing.											
o Mechanical and equipment start-ups ongoing.											
o Flooring preparation and install ongoing through the exit stairs.											
o Exterior envelope: Cladding to the exterior columns, north, west, east and south elevations of the building. Installation of cap flashing to all roofs.											
Overall the Project is proceeding on schedule and Service Commencement schedule is unchanged.											
Issues											
None.											
Financial											
Actuals to March 31, 2021	Actuals YTD	FY22	FY23	Projected		FY24	FY25	FY26	Total Actuals + Projected	Projected Unspent	Variance to Budget
\$ 41,386,389	\$ 44,512,220	\$ 58,162,144	\$ 2,195,467	\$ 100,000	\$ -	\$ 324,217,917	\$ 6,016,500	\$ -	\$ -	\$ 0	

Project Name RIH PCT - Equipment						Project Budget: \$25,834,757					
Project Number 6218181						RHD Contribution (Y/N): Y					
Project Manager Scott M.											
% Complete Status			On Time	On Budget	Issues	Start Date	Substantial Completion				
Programming	Design	Const.					Original	Rev. #	Revised		
N/A	0%	0%	Y	Y	N	TBD	Nov-21	0	Nov-21		
Scope											
To purchase equipment for the new Patient Care Tower in Kamloops. This is a sub-project of Project 6217218 - RIH PCT.											
Progress											
Equipment team is working with Project team to ensure equipment arrives on site for installation in PCT as required.											
Issues											
None.											
Financial											
Actuals to March 31, 2021	Actuals YTD	FY22	FY23	Projected		FY24	FY25	FY26	Total Actuals + Projected	Projected Unspent	Variance to Budget
\$ 9,323	\$ 1,135,325	\$ 13,113,812	\$ 2,530,916	\$ 8,205,770	\$ -	\$ -	\$ -	\$ -	\$ 25,834,757	\$ -	\$ -

Project Name RIH PCT ACE						Project Budget: \$13,860,299					
Project Number 6218182						RHD Contribution (Y/N): Y					
Project Manager John G.											
% Complete Status			On Time	On Budget	Issues	Start Date	Substantial Completion				
Programming	Design	Const.					Original	Rev. #	Revised		
0%	0%	0%	Y	Y	N	TBD	May-21	2	Jun-21		
Scope											
To implement Advanced Clinical Standardization & Optimization (ACSO) in the Patient Care Tower in Kamloops. This is a sub-project of Project 6217218 - RIH PCT.											
Progress											
ACE Project went Live on June 7, 2021.											
Issues											
None.											
Financial											
Actuals to March 31, 2021	Actuals YTD	FY22	FY23	Projected		FY24	FY25	FY26	Total Actuals + Projected	Projected Unspent	Variance to Budget
\$ 7,758,441	\$ 5,887,276	\$ 6,101,858	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 13,860,299	\$ -	\$ 0

Thompson Reports

December 2021

Project Name RIH Elevator Modernization						Project Budget: \$850,000				
Project Number 6218252						RHD Contribution (Y/N): Y				
Project Manager William L.										
% Complete Status			On Time	On Budget	Issues	Start Date	Substantial Completion			
Programming	Design	Const.					Original	Rev. #	Revised	
N/A	100%	100%	Y	Y	N	Feb-18	Feb-19	2	Feb-21	
Scope										
Elevator #4 was installed in 1965 and the controls were last upgraded in 1986. In order to improve vertical transport the site requires this elevator upgrade to be compatible and to group/synchronize with elevator #5 and #6 as the dedicated public elevators. The regrouping of these elevators will help to improve patient transfers, public access and patient confidentiality. The scope of the modernization will include new door operators, digital traction controller, geared machine, hoist motor/ropes and other miscellaneous equipment. A new project has been approved to complete elevators 1, 2 and 3.										
Progress										
Elevator #4 has been completed and is in full operation.										
Issues										
None.										
Financial										
Actuals to March 31, 2021	Actuals YTD	Projected					Total Actuals + Projected	Projected Unspent	Variance to Budget	
		FY22	FY23	FY24	FY25	FY26				
\$ 638,532	\$ 1,759	\$ 51,468	\$ -	\$ -	\$ -	\$ -	\$ 690,000	\$ 160,000	\$ 0	

Project Name RIH Medstations, IH-wide Pyxis Replacement, Phase 3						Project Budget: \$2,981,000				
Project Number 6219011						RHD Contribution (Y/N): Y				
Project Manager Terry S.										
% Complete Status			On Time	On Budget	Issues	Start Date	Substantial Completion			
Programming	Design	Const.					Original	Rev. #	Revised	
N/A	100%	100%	Y	0	N	Jun-18	Jan-19	1	Jun-19	
Scope										
Continuing the replacement of Pyxis 3500 with Omnicell G4, this project is for the actual purchase of the Omnicell ADC's, renovations and project staffing specifically at the Royal Inland Hospital and is classified as Phase 3 for 2018/19 as part of the entire IH rollout.										
Progress										
Project is substantially complete. Awaiting financial completion.										
Issues										
None.										
Financial										
Actuals to March 31, 2021	Actuals YTD	Projected					Total Actuals + Projected	Projected Unspent	Variance to Budget	
		FY22	FY23	FY24	FY25	FY26				
\$ 2,598,078	\$ (0)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 2,598,078	\$ 382,922	\$ (0)	

Project Name LIH MDR Upgrade						Project Budget: \$736,000				
Project Number 6220004						RHD Contribution (Y/N): Y				
Project Manager Maxwell M.										
% Complete Status			On Time	On Budget	Issues	Start Date	Substantial Completion			
Programming	Design	Const.					Original	Rev. #	Revised	
N/A	100%	95%	Y	Y	0	Jun-19	Feb-20	3	Jan-21	
Scope										
The project will renovate the existing MDR clean area into separate clean and dirty sides. The existing clean space is adequate to house both operations with the addition of a dividing wall, pass through door, height adjustable three basin decontamination sink and instrument washer. Currently the space for dirty clean up or decontamination is very constricted and work flow is disrupted. Equipment selections were finalized after PHSA finally awarded the MDR equipment vendors several months after their initial estimated award date. This award has allowed the detailed design process to proceed.										
Progress										
MDR is fully operational and complete. One additional item for this project is to install a split AC system within the room. The highway closures and winter driving conditions have made it very difficult to find a contractor able or willing to get to Lillooet to complete this work.										
Issues										
Require issuance of ITQ for split AC system.										
Financial										
Actuals to March 31, 2021	Actuals YTD	Projected					Total Actuals + Projected	Projected Unspent	Variance to Budget	
		FY22	FY23	FY24	FY25	FY26				
\$ 683,633	\$ 3,627	\$ 52,367	\$ -	\$ -	\$ -	\$ -	\$ 736,000	\$ -	\$ (0)	

Thompson Reports

December 2021

Project Name RIH Pharmacy Renovation						Project Budget: \$2,835,000				
Project Number 6220005						RHD Contribution (Y/N): Y				
Project Manager Maxwell M.										
% Complete Status			On Time	On Budget	Issues	Start Date	Substantial Completion			
Programming	Design	Const.					Original	Rev. #	Revised	
N/A	100%	40%	Y	Y	N	May-19	Aug-20	2	May-22	
Scope										
The sterile compounding area in the Pharmacy Department at this site requires upgrading, including new equipment, air filtration, and air flow handling. Effective May 2021, the College of Pharmacists of British Columbia bylaws will require all pharmacies in B.C. to adopt the National Association of Pharmacy Regulatory Authorities model standards for sterile compounding. Compounding allows individual ingredients to be mixed together in personalized strengths and dosages based on a patient's needs.										
Progress										
Phase 1 and the completed Sterile Prep Room will be connected to mechanical systems in the new Patient Care Tower, commissioned, and will be handed over to the pharmacy in early February 2022. Phase 2 including the rest of the new hazardous compounding area will be handed over late April 2022.										
Issues										
None.										
Financial										
Actuals to March 31, 2021	Actuals YTD	Projected					Total Actuals + Projected	Projected Unspent	Variance to Budget	
		FY22	FY23	FY24	FY25	FY26				
\$ 336,780	\$ 568,633	\$ 1,605,435	\$ 850,784	\$ -	\$ -	\$ -	\$ 2,793,000	\$ 42,000	\$ 0	

Project Name RIH Elevator Modernization (x3)						Project Budget: \$1,900,000				
Project Number 6220201						RHD Contribution (Y/N): Y				
Project Manager Maxwell M.										
% Complete Status			On Time	On Budget	Issues	Start Date	Substantial Completion			
Programming	Design	Const.					Original	Rev. #	Revised	
N/A	100%	90%	Y	Y	N	Feb-21	Nov-21	1	Mar-22	
Scope										
This is an additional construction project for the modernization of three more elevators at this site which were installed in 1964. These elevators have been facing repair and maintenance issues on a reoccurring basis, which interrupts site operations and causes safety concerns. Being a tertiary level healthcare facility, efficiency and reliability of the existing elevators for the north and south towers at this site is crucial to meet the high demand, ensure continuity of services, and provide patient, staff and visitor safety.										
Progress										
Elevators 2 and 3 are complete and handed over to the hospital. Elevator 1 is the final elevator requiring work and is due to be completed in January 2022.										
Issues										
None.										
Financial										
Actuals to March 31, 2021	Actuals YTD	Projected					Total Actuals + Projected	Projected Unspent	Variance to Budget	
		FY22	FY23	FY24	FY25	FY26				
\$ 364,720	\$ 9,427	\$ 905,001	\$ 150,279	\$ -	\$ -	\$ -	\$ 1,420,000	\$ 480,000	\$ 0	

Project Name RIH P3 Maintenance Obligations - Phase 1 & 2						Project Budget: \$2,000,000				
Project Number 6220138						RHD Contribution (Y/N): Y				
Project Manager Michael M.										
% Complete Status			On Time	On Budget	Issues	Start Date	Substantial Completion			
Programming	Design	Const.					Original	Rev. #	Revised	
N/A	22%	9%	Y	Y	N	TBD	Dec-24	0	Dec-25	
Scope										
This project will include various electrical, HVAC and plumbing renovations / upgrades throughout the existing buildings are RIH. Projects will be prioritized and executed accordingly.										
Progress										
~This project includes a number of upgrades and replacements across the RIH site. An update on the progress is listed below. Items continue to be prioritized and reviewed by the P3 Ops and FM teams. Confirmed Scope Items: ~Electrical distribution panels - Consulting and preliminary work has commenced ~Supply Fan 1 (MR9) - Not started - On hold until after Phase 2 ~1 South AHU - Complete ~Supply Fan 1 (MR1) - Work ongoing ~Fan bearing replacement - In progress ~Cooling coil replacement - Complete ~Humidifier replacement (MR9 and MR10) - Not started (Next Fiscal) ~Chiller manifold - In progress ~Chiller Pump VFD's - Complete ~Isolation valve heat exchangers - Complete ~Hot water tanks (MR1 and MR3) - Not started ~Mop Sink - Not started (Next Fiscal) ~Fire hose cabinet upgrade - Not started (Next Fiscal) ~Stacks - Not started ~PRV's - Not started ~Asbestos Pipe Removal - In progress										
Issues										
None.										
Financial										
Actuals to March 31, 2021	Actuals YTD	Projected					Total Actuals + Projected	Projected Unspent	Variance to Budget	
		FY22	FY23	FY24	FY25	FY26				
\$ 30,070	\$ 284,924	\$ 709,924	\$ 1,260,006	\$ -	\$ -	\$ -	\$ 2,000,000	\$ -	\$ (0)	

Thompson Reports

December 2021

Project Name						CLW Domestic Hot Water System			Project Budget:		\$499,143
Project Number						6220200			RHD Contribution (Y/N):		Y
Project Manager						Maxwell M.					
% Complete Status			On Time	On Budget	Issues	Start Date	Substantial Completion				
Programming	Design	Const.					Original	Rev. #	Revised		
N/A	100%	100%	Y	Y	N	Jan-20	Jan-21	3	Apr-21		
Scope											
The project will encompass the decoupling of DHW heating from existing hot water boilers and implement the installation and connection of dedicated heat pumps and associated storage tank.											
Progress											
Project is complete. Awaiting financial completion.											
Issues											
None.											
Financial											
Actuals to March 31, 2021	Actuals YTD	Projected					Total Actuals + Projected	Projected Unspent	Variance to Budget		
		FY22	FY23	FY24	FY25	FY26					
\$ 325,434	\$ 78,838	\$ 133,290	\$ -	\$ -	\$ -	\$ -	\$ 458,724	\$ 40,419	\$ 0		

Project Name						RIH Fire Door Hardware			Project Budget:		\$400,000
Project Number						6221015			RHD Contribution (Y/N):		Y
Project Manager						William L.					
% Complete Status			On Time	On Budget	Issues	Start Date	Substantial Completion				
Programming	Design	Const.					Original	Rev. #	Revised		
N/A	100%	95%	Y	Y	N	Jun-20	Dec-20	6	Oct-21		
Scope											
This project will replace all (69) old non-compliant fire door hardware on the interior of the main building stairwell with new panic hardware which will alleviate safety concerns at this site. It will also include the replacement of the lever handle and engagement of a consultant to confirm proper door swing for exiting from a fire stairwell.											
Progress											
All fire doors associated with this project have been replaced on site. Correction of minor deficiencies is underway.											
Issues											
None.											
Financial											
Actuals to March 31, 2021	Actuals YTD	Projected					Total Actuals + Projected	Projected Unspent	Variance to Budget		
		FY22	FY23	FY24	FY25	FY26					
\$ 301,170	\$ (0)	\$ 68,830	\$ -	\$ -	\$ -	\$ -	\$ 370,000	\$ 30,000	\$ 0		

Project Name						ASH Nurse Call			Project Budget:		\$308,000
Project Number						6221000			RHD Contribution (Y/N):		Y
Project Manager						Maxwell M.					
% Complete Status			On Time	On Budget	Issues	Start Date	Substantial Completion				
Programming	Design	Const.					Original	Rev. #	Revised		
N/A	100%	100%	Y	Y	N	May-21	Mar-21	3	Sep-21		
Scope											
This pre-2000 nurse call system is increasingly unreliable, obsolete, failing and any parts available are used and difficult to obtain as these systems are no longer supported by the manufacturer. If this equipment is not functioning properly, it could potentially lead to a dangerous situation for patients and therefore this system has been identified as a top priority for replacement.											
Progress											
Formal training and commissioning has been completed in the facility. Project is complete.											
Issues											
None.											
Financial											
Actuals to March 31, 2021	Actuals YTD	Projected					Total Actuals + Projected	Projected Unspent	Variance to Budget		
		FY22	FY23	FY24	FY25	FY26					
\$ 23,589	\$ 222,238	\$ 229,411	\$ -	\$ -	\$ -	\$ -	\$ 253,000	\$ 55,000	\$ 0		

Thompson Reports

December 2021

Project Name CLW Nurse Call						Project Budget: \$357,000					
Project Number 6221003						RHD Contribution (Y/N): Y					
Project Manager Maxwell M.											
% Complete Status			On Time	On Budget	Issues	Start Date	Substantial Completion				
Programming	Design	Const.					Original	Rev. #	Revised		
N/A	100%	100%	Y	Y	N	May-21	Mar-21	2	Sep-21		
Scope											
This pre-2000 nurse call system is increasingly unreliable, obsolete, failing and any parts available are used and difficult to obtain as these systems are no longer supported by the manufacturer. If this equipment is not functioning properly, it could potentially lead to a dangerous situation for patients and therefore this system has been identified as a top priority for replacement.											
Progress											
Project is complete awaiting financial completion.											
Issues											
None.											
Financial											
Actuals to March 31, 2021	Actuals YTD	FY22	FY23	Projected		FY24	FY25	FY26	Total Actuals + Projected	Projected Unspent	Variance to Budget
\$ 24,995	\$ 263,920	\$ 279,005	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 304,000	\$ 53,000	\$ (0)

Project Name MER Lab Outpatient Area Expansion						Project Budget: \$437,000					
Project Number 6221016						RHD Contribution (Y/N): Y					
Project Manager Maxwell M.											
% Complete Status			On Time	On Budget	Issues	Start Date	Substantial Completion				
Programming	Design	Const.					Original	Rev. #	Revised		
N/A	100%	95%	Y	Y	Y	TBD	Mar-21	2	Sep-21		
Scope											
To improve the level of service at this site this project will increase space to the laboratory footprint and will include an additional phlebotomy area with the installation of a washroom. No major changes to the existing infrastructure are anticipated.											
Progress											
Evacuation of NVH has prevented final completion of remaining deficiencies. Awaiting for a safe time to return and finish the remaining work.											
Issues											
Weather events, evacuations, and facility shutdowns have combined to create delays in getting contractors to site to finish remaining work.											
Financial											
Actuals to March 31, 2021	Actuals YTD	FY22	FY23	Projected		FY24	FY25	FY26	Total Actuals + Projected	Projected Unspent	Variance to Budget
\$ 18,998	\$ 333,025	\$ 380,002	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 399,000	\$ 38,000	\$ 0

Project Name RIH Patient Care Tower Phase 2 Reno						Project Budget: \$53,414,654					
Project Number 6221144						RHD Contribution (Y/N): N					
Project Manager Michael M.											
% Complete Status			On Time	On Budget	Issues	Start Date	Substantial Completion				
Programming	Design	Const.					Original	Rev. #	Revised		
100%	90%	0%	Y	Y	N	Sep-20	Feb-25	0	Dec-25		
Scope											
Phase 2 of the RIH PCT project addresses renovations/expansions within the existing hospital. Affected departments are emergency, post anaesthetic recovery, daycare surgery, morgue, medical imaging and pediatrics.											
Progress											
<ul style="list-style-type: none"> o The project team has reviewed and provided comments to the CD 100% submittal from EllisDon. o Building Permit to be submitted to City of Kamloops in December 2021. o IFT (Issued for Tender) drawing package to be submitted to the Authority late December 2021. o IFT to be sent to industry early January 2022. o The project budget is currently forecasted to be over the \$50.8 million as outlined in the project agreement. The project team continues to work through this issue. o The current construction schedule forecasts the emergency department will run over the allotted 36 months post service commencement. The project team is working through this issue. o IH Equipment team continue to clarify requirements with users and update the equipment list each month. 											
Issues											
None.											
Financial											
Actuals to March 31, 2021	Actuals YTD	FY22	FY23	Projected		FY24	FY25	FY26	Total Actuals + Projected	Projected Unspent	Variance to Budget
\$ 19,016	\$ 57,222	\$ 90,043	\$ 21,017,201	\$ 29,615,136	\$ 1,660,725	\$ 1,012,532	\$ 53,414,654	\$ -	\$ 0		

Project Name RIH Parkade Security Fencing						Project Budget: \$200,000				
Project Number 6221229						RHD Contribution (Y/N): N				
Project Manager Lucas M.										
Complete Status			On Time	On Budget	Issues	Start Date	Substantial Completion			
Programming	Design	Const.					Original	Rev. #	Revised	
N/A	N/A	100%	Y	Y	N	Jun-21	Aug-21	1	Sep-21	
Scope										
Provide fencing around the perimeter of all levels above the second floor.										
Progress										
Fencing on both parkade levels has been installed, project is complete.										
Issues										
None.										
Financial										
Actuals to March 31, 2021	Actuals YTD	Projected					Total Actuals + Projected	Projected Unspent	Variance to Budget	
		FY22	FY23	FY24	FY25	FY26				
\$ 86,231	\$ 86,961	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 190,000	\$ 10,000	\$ (0)	

Project Name RIH Acute Care Minor Surgery Ventilation Upgrade - Planning						Project Budget: \$150,000				
Project Number 6222000						RHD Contribution (Y/N): Y				
Project Manager Maria B.										
Complete Status			On Time	On Budget	Issues	Start Date	Substantial Completion			
Programming	Design	Const.					Original	Rev. #	Revised	
5%	0%	0%	Y	Y	N	May-21	Jan-22	0	Jan-22	
Scope										
The program is forecasting to increase the quantity of treatment rooms which will further exasperate the system's capacity. Planning will consider and review the entire building's program needs while looking to upgrade the shared HVAC system serving the remaining floors to limit re-work required in the future limiting further downtime.										
Progress										
Air Balancing of entire North West wing was completed in late October and is informing basis of Schematic Design Report. Schematic Design Report options are under development and expect to be costed in January 2022.										
Issues										
None.										
Financial										
Actuals to March 31, 2021	Actuals YTD	Projected					Total Actuals + Projected	Projected Unspent	Variance to Budget	
		FY22	FY23	FY24	FY25	FY26				
\$ -	\$ 14,068	\$ 23,968	\$ -	\$ -	\$ -	\$ -	\$ 23,968	\$ 126,032	\$ -	

Project Name KAM Kamloops Long-term Care Facility - Business Plan						Project Budget: \$400,000				
Project Number 6222001						RHD Contribution (Y/N): Y				
Project Manager Maria B.										
Complete Status			On Time	On Budget	Issues	Start Date	Substantial Completion			
Programming	Design	Const.					Original	Rev. #	Revised	
0%	0%	0%	Y	Y	N	May-21	Jun-22	1	Sep-22	
Scope										
Investing in renewal and expansion of health authority-owned LTC facilities is a priority for the MoH's 10-year capital plan. IH has been requested to develop business plans for our highest priority LTC projects in the community.										
Progress										
Initial project approval has been provided. Scope of work draft has begun. Consultant engagement will commence upon direction from the 2 current LTC planning projects.										
Issues										
None.										
Financial										
Actuals to March 31, 2021	Actuals YTD	Projected					Total Actuals + Projected	Projected Unspent	Variance to Budget	
		FY22	FY23	FY24	FY25	FY26				
\$ -	\$ -	\$ -	\$ 339,000	\$ -	\$ -	\$ -	\$ 339,000	\$ 61,000	\$ -	

Thompson Reports

December 2021

Project Name RIH Monitoring System, Physiological						Project Budget: \$756,000			
Project Number 6222004						RHD Contribution (Y/N): N			
Project Manager James D.									
Complete Status			On Time	On Budget	Issues	Start Date	Substantial Completion		
Programming	Design	Const.					Original	Rev. #	Revised
N/A	100%	0%	Y	Y	N	Jun-21	Oct-21	2	Feb-22

Scope

Physiological monitoring systems consist of a bedside monitor connected to a central system and the patient. This system continuously monitors the patient's electrocardiogram, blood pressure, temperature, and blood oxygen levels among other vital signs. This information is also sent to a central system, which displays all of this information for each patient in real time at the nursing station. Alarms sound to alert clinicians if certain parameters fall outside of acceptable ranges, and trends are recorded to help clinicians assess a patient's progress. This system is replacing a 2011 model in the ICU.

Progress

Equipment requirements have been confirmed and signed off with an anticipated installation schedule of February 2022.

Issues

None.

Financial										
Actuals to March 31, 2021	Actuals YTD	Projected					Total Actuals + Projected	Projected Unspent	Variance to Budget	
		FY22	FY23	FY24	FY25	FY26				
\$ -	\$ -	\$ 577,500	\$ 84,000	\$ -	\$ -	\$ -	\$ 661,500	\$ 94,500	\$ -	\$ -

Project Name OEC Chiller/Cooler Tower Replacement						Project Budget: \$690,000			
Project Number 6222007						RHD Contribution (Y/N): N			
Project Manager James D.									
Complete Status			On Time	On Budget	Issues	Start Date	Substantial Completion		
Programming	Design	Const.					Original	Rev. #	Revised
N/A	100%	0%	Y	Y	N	Jul-21	Nov-21	2	Mar-22

Scope

To replace the chiller, cooling tower, coils, pumps and auxiliary equipment with a reliable, energy efficient system.

Progress

The construction tender is complete and the award letter has now been issued. Construction mobilization will commence January 2022.

Issues

None.

Financial										
Actuals to March 31, 2021	Actuals YTD	Projected					Total Actuals + Projected	Projected Unspent	Variance to Budget	
		FY22	FY23	FY24	FY25	FY26				
\$ -	\$ 35,465	\$ 201,077	\$ 447,300	\$ -	\$ -	\$ -	\$ 648,377	\$ 41,623	\$ 0	\$ 0

Project Name CLW Renewable Energy Upgrade						Project Budget: \$1,995,240			
Project Number 6222006						RHD Contribution (Y/N): N			
Project Manager James D.									
Complete Status			On Time	On Budget	Issues	Start Date	Substantial Completion		
Programming	Design	Const.					Original	Rev. #	Revised
N/A	0%	0%	Y	Y	N	Aug-21	Nov-22	1	Dec-22

Scope

This project will entail the installation of heating loop heat pumps, and geo-exchange to reduce operating costs and avoid greenhouse gas emissions.

Progress

Consultant procurement has been completed and awarded to Stantec. Project will proceed forward as resources become available.

Issues

None.

Financial										
Actuals to March 31, 2021	Actuals YTD	Projected					Total Actuals + Projected	Projected Unspent	Variance to Budget	
		FY22	FY23	FY24	FY25	FY26				
\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

Thompson Reports

December 2021

Project Name		RIH MRI Upgrade				Project Budget:		\$2,000,000	
Project Number		6222145				RHD Contribution (Y/N):		Y	
Project Manager		James D.							
Complete Status			On Time	On Budget	Issues	Start Date	Substantial Completion		
Programming	Design	Const.					Original	Rev. #	Revised
N/A	50%	0%	Y	Y	N	Dec-21	Jul-22	0	Jul-22
Scope									
The upgrade will address where shielding is compromised, replace equipment coils and provide equipment upgrades to improve system software that will increase efficiency and throughput. The original equipment Fixed Asset # I620509800 was purchased in 2005 with an upgrade #I621505900 in 2016.									
Progress									
A stakeholder walkthrough was conducted to discuss project requirements. Planning will continue in January 2022 to determine equipment delivery schedules and anticipated installation dates.									
Issues									
None.									
Return to main Status Report.									
Financial									
Actuals to March 31, 2021	Actuals YTD	Projected FY22	Projected FY23	Projected FY24	Projected FY25	Projected FY26	Total Actuals + Projected	Projected Unspent	Variance to Budget
\$ -	\$ -	\$ 357,000	\$ 1,643,000	\$ -	\$ -	\$ -	\$ 2,000,000	\$ -	\$ (0)

West Kootenay Boundary Reports

December 2021

Project Name KBH Steam and Condensate Line Replacement						Project Budget: \$523,000			
Project Number 6318010						RHD Contribution (Y/N): Y			
Project Manager Ev K.									
% Complete Status			On Time	On Budget	Other Issues	Start Date	Substantial Completion		
Programming	Design	Const.					Original	Rev. #	Revised
N/A	100%	99%	Y	Y	N	Sep-17	Feb-18	4	Jan-21
Scope									
The existing steam and condensate lines are 60 years old and leaks are developing. The replacement of these components will require access through patient care areas. Careful coordination and infection control precautions will be a key element for this project. In addition to the lines, critical components of the steam condensate infrastructure will be replaced in accordance with the condition survey that was completed. The initial market response put the project significantly over-budget. Value analysis was done and a revised strategy developed to meet the scope.									
Progress									
The project is substantially complete and deficiencies are complete. Project close out documentation is complete. Awaiting final invoice to be processed before project is closed.									
Issues									
None.									
Financial									
Actuals to March 31, 2021	Actuals YTD	FY22	FY23	FY24	FY25	FY26	Total Actuals + Projected	Projected Unspent	Variance to Budget
\$ 272,402	\$ 213	\$ 5,840	\$ -	\$ -	\$ -	\$ -	\$ 278,242	\$ 244,758	\$ (0)

Project Name KBH Emergency Department Redevelopment						Project Budget: \$19,050,000			
Project Number 6318053						RHD Contribution (Y/N): Y			
Project Manager Ev K.									
% Complete Status			On Time	On Budget	Other Issues	Start Date	Substantial Completion		
Programming	Design	Const.					Original	Rev. #	Revised
N/A	100%	97%	Y	Y	N	Jul-17	Dec-19	4	Apr-21
Scope									
The redesign and expansion of the KBRH ED as well as the upgrade to the electrical transformer will address immediate space and service inadequacies and accommodate projected ED needs to 2034. This is Phase 1 of the KBRH service priority renovations.									
Progress									
The space is now occupied and operational. Seasonal deficiencies related to the civil work are being planned for spring 2022 completion.									
Issues									
None.									
Financial									
Actuals to March 31, 2021	Actuals YTD	FY22	FY23	FY24	FY25	FY26	Total Actuals + Projected	Projected Unspent	Variance to Budget
\$ 17,048,602	\$ 1,804,926	\$ 1,804,926	\$ 196,472	\$ -	\$ -	\$ -	\$ 19,050,000	\$ -	\$ (0)

Project Name KBH Boiler Room						Project Budget: \$745,000			
Project Number 6318089						RHD Contribution (Y/N): Y			
Project Manager Ev K.									
% Complete Status			On Time	On Budget	Other Issues	Start Date	Substantial Completion		
Programming	Design	Const.					Original	Rev. #	Revised
N/A	100%	100%	Y	Y	N	Feb-18	Mar-19	6	Aug-20
Scope									
The scope of this project is to install two new dedicated high efficiency domestic hot water boilers and associated storage tank to provide domestic hot water to the facility. The addition of these boilers will allow for the decoupling of the domestic hot water system from the existing steam plant. This project will increase energy efficiency of the domestic hot water production.									
A final solution has been developed to address the issues with the flue venting and work is proceeding. Additional funding was required and has been approved.									
Progress									
Project complete and will be closed once final invoicing has been processed.									
Issues									
None.									
Financial									
Actuals to March 31, 2021	Actuals YTD	FY22	FY23	FY24	FY25	FY26	Total Actuals + Projected	Projected Unspent	Variance to Budget
\$ 726,796	\$ -	\$ (42,000)	\$ -	\$ -	\$ -	\$ -	\$ 684,796	\$ 60,204	0

West Kootenay Boundary Reports

December 2021

Project Name ALH Emergency Department Renovation						Project Budget: \$2,100,000				
Project Number 6319002						RHD Contribution (Y/N): Y				
Project Manager Ev K.										
% Complete Status			On Time	On Budget	Other Issues	Start Date	Substantial Completion			
Programming	Design	Const.					Original	Rev. #	Revised	
100%	100%	98%	Y	Y	N	Jul-18	Oct-19	3	May-20	
Scope										
Redevelopment of the Emergency Department (ED) areas will provide the appropriate space capacity necessary to support the provision of quality patient care within Emergency Services and address the immediate service delivery challenges experienced by the site. Planning, design and renovations will improve sight lines and visual oversight to monitor patients, improve infection control standards, address risk related to lack of privacy and confidentiality, improve patient flow by decreasing congestion, and provide appropriate space for essential equipment/supplies. Renovations will provide the High Acuity Response Team and visiting specialists' appropriate space to deliver quality patient care. The plan for the expanded ED is to include four exam bays, one double trauma bay, one office/exam room and one physician dictation/multi-purpose room. The renovation will be phased to minimize disruption to emergency services at the site.										
Progress										
The newly renovated Emergency Department is open and fully operational. The mechanical contractor has completed the minor revisions to the mechanical systems serving the trauma room. The other final deficiencies are in progress with target completion January 2022. Following this work the project will be closed.										
Issues										
None.										
Financial										
Actuals to March 31, 2021	Actuals YTD	Projected					Total Actuals + Projected	Projected Unspent	Variance to Budget	
		FY22	FY23	FY24	FY25	FY26				
\$ 1,811,479	\$ 28,166	\$ 92,748	\$ 195,773	\$ -	\$ -	\$ -	\$ 2,100,000	\$ -	\$ -	

Project Name KBH Pharmacy & Ambulatory Care Project						Project Budget: \$32,775,000				
Project Number 6319067						RHD Contribution (Y/N): Y				
Project Manager Ev K.										
% Complete Status			On Time	On Budget	Other Issues	Start Date	Substantial Completion			
Programming	Design	Const.					Original	Rev. #	Revised	
N/A	100%	29%	Y	0	N	Jan-19	Dec-22	0	Dec-22	
Scope										
The Project entails the creation of a new Ambulatory Care wing above the Emergency Department expansion. The old Ambulatory Care will be upgraded to accommodate outpatient exam rooms, booking offices, reception, telehealth, and two physician sleep rooms. Current medical records will be relocated to the basement allowing for expansion of the existing oncology unit and physiotherapy will move into the remaining medical records space. In addition, the cast clinic space will be upgraded. Shifting of these other service areas will allow for a major expansion of the current pharmacy area to address the needs of the pharmacy program. The existing generators will be replaced along with an upgrade to the chiller and associated cooling tower.										
Progress										
The multiple phases of construction are progressing well. The Ambulatory Procedures Unit (APU) opened September 21 is fully operational. The first phase of the Pharmacy structural alterations and rough-ins is nearing completion with pre-board inspection early January 2022. Cast Clinic, Physio and Oncology structural & rough-in is ongoing with pre-board inspection end of January 2022. The generator upgrade phase continues. Bi-weekly construction meetings and operational commissioning meetings with stakeholders have been established.										
Issues										
The medical equipment budget has a potential shortfall that is being addressed. Due to existing site conditions floor topping removal and installation is required for the Pharmacy unit and anticipate for the other units being renovated.										
Financial										
Actuals to March 31, 2021	Actuals YTD	Projected					Total Actuals + Projected	Projected Unspent	Variance to Budget	
		FY22	FY23	FY24	FY25	FY26				
\$ 6,650,474	\$ 7,744,519	\$ 11,954,845	\$ 11,430,150	\$ 2,739,531	\$ -	\$ -	\$ 32,775,000	\$ -	\$ 0	

Project Name KBH Ambulatory Care 2nd Floor						Project Budget: \$6,000,000				
Project Number 6319074						RHD Contribution (Y/N): Y				
Project Manager Ev K.										
% Complete Status			On Time	On Budget	Other Issues	Start Date	Substantial Completion			
Programming	Design	Const.					Original	Rev. #	Revised	
N/A	100%	97%	Y	Y	N	Feb-19	TBD	1	Apr-21	
Scope										
Build the second floor on the new ED building to accommodate the Ambulatory expansion. Work will include the structure, stairwell, building envelope and the new bridgeway to the existing building. The fit-out of the space will be completed under project 6319067 KBH Pharmacy and Ambulatory Care Project.										
Progress										
Link Bridge interior and exterior work is complete. Final project documentation will be coordinated with the final completion of the KBH ED project (6318053).										
Issues										
None.										
Financial										
Actuals to March 31, 2021	Actuals YTD	Projected					Total Actuals + Projected	Projected Unspent	Variance to Budget	
		FY22	FY23	FY24	FY25	FY26				
\$ 5,008,592	\$ 303,648	\$ 303,648	\$ 687,760	\$ -	\$ -	\$ -	\$ 6,000,000	\$ -	\$ -	

West Kootenay Boundary Reports

December 2021

Project Name KBH Monitoring System, Physiological						Project Budget: \$684,000				
Project Number 6320004						RHD Contribution (Y/N): Y				
Project Manager Ev K.										
% Complete Status			On Time	On Budget	Other Issues	Start Date	Substantial Completion			
Programming	Design	Const.					Original	Rev. #	Revised	
N/A	100%	95%	Y	Y	N	Jul-20	Mar-21	0	Mar-21	
Scope										
Physiological monitoring systems consist of a bedside monitor connected to a central system and the patient. This system continuously monitors the patient's ECG, blood pressure, temperature, and blood oxygen levels among other vital signs. This information is also sent to a central system, which displays all of this information for each patient in real time at the nursing station. This new system is replacing a 2011 model in the Intensive Care Unit/ED Department.										
Progress										
Some additional components are being sourced for the system to ensure full coverage in all areas.										
Issues										
None.										
Financial										
Actuals to March 31, 2021	Actuals YTD		Projected FY22	Projected FY23	Projected FY24	Projected FY25	Projected FY26	Total Actuals + Projected	Projected Unspent	Variance to Budget
\$ 491,220	\$ -	\$ -	\$ 192,780	\$ -	\$ -	\$ -	\$ -	\$ 684,000	\$ -	\$ -

Project Name KLH Waste and Cardboard Compactor						Project Budget: \$324,000				
Project Number 6320005						RHD Contribution (Y/N): Y				
Project Manager Lucas M.										
% Complete Status			On Time	On Budget	Other Issues	Start Date	Substantial Completion			
Programming	Design	Const.					Original	Rev. #	Revised	
N/A	50%	0%	0	Y	0	Jun-19	Nov-19	2	TBD	
Scope										
This additional environmentally friendly piece of equipment will improve safety and increase efficiency with regards to waste elimination at this site. It will include a new commercial compactor/packer roll off combo, container, walk-on dock, container stand assembly, controls for the hydraulic system and electrical supply. To address staff, public and contractor safety there are also renovations required to access the compactor, dock cover and lighting.										
Progress										
The project is on hold until the impact of the province-wide RFP are confirmed.										
Issues										
The project scope is under review following a province-wide RFP which may change the waste management at the site.										
Financial										
Actuals to March 31, 2021	Actuals YTD		Projected FY22	Projected FY23	Projected FY24	Projected FY25	Projected FY26	Total Actuals + Projected	Projected Unspent	Variance to Budget
\$ 13,986	\$ -	\$ -	\$ 310,014	\$ -	\$ -	\$ -	\$ -	\$ 324,000	\$ -	\$ -

Project Name KBH Medical Air and Vacuum System Replacement						Project Budget: \$1,125,000				
Project Number 6321015						RHD Contribution (Y/N): Y				
Project Manager Ev K.										
% Complete Status			On Time	On Budget	Other Issues	Start Date	Substantial Completion			
Programming	Design	Const.					Original	Rev. #	Revised	
N/A	100%	45%	Y	Y	N	Dec-20	Nov-21	1	Jan-22	
Scope										
These systems are a critical component to patient care and were installed more than 20 years ago and past their useful life. The newer systems are more energy efficient, ensure adequate redundancy and comply with the latest standards. The scope of work will include new medical air and vacuum systems, associated controls, alarms, back-up medical air manifold and Canadian Standards Association compliance commissioning.										
Progress										
Construction continues with medical gas alarm rough-in and piping rough-in nearing completion. The medical air & vacuum equipment is scheduled to arrive the end of December. Bi-weekly construction meetings have been established. The preliminary construction schedule anticipates completion early 2022.										
Issues										
None.										
Financial										
Actuals to March 31, 2021	Actuals YTD		Projected FY22	Projected FY23	Projected FY24	Projected FY25	Projected FY26	Total Actuals + Projected	Projected Unspent	Variance to Budget
\$ 33,839	\$ 309,134	\$ 808,917	\$ 282,244	\$ -	\$ -	\$ -	\$ -	\$ 1,125,000	\$ -	\$ -

West Kootenay Boundary Reports

December 2021

Project Name KLH Pharmacy Upgrade						Project Budget: \$2,200,000			
Project Number 6321016						RHD Contribution (Y/N): Y			
Project Manager Ev K.									
% Complete Status			On Time	On Budget	Other Issues	Start Date	Substantial Completion		
Programming	Design	Const.					Original	Rev. #	Revised
N/A	100%	97%	Y	Y	N	Jun-20	Apr-21	2	Aug-21
Scope									
The sterile compounding area in the pharmacy department at this site requires upgrading of the ante room and overall workflow as well as upgrades to the air handling systems to meet current standards. Effective May 2021, the College of Pharmacists of British Columbia bylaws will require all pharmacies in B.C. to adopt the National Association of Pharmacy Regulatory Authorities model standards for sterile compounding. Compounding allows individual ingredients to be mixed together in personalized strengths and dosages based on a patient's needs. The BC College of Pharmacists has extended the deadline for compliance with the NAPRA standard to July 2022, eliminating this as a project risk for completion.									
Progress									
Construction is complete and the suite has been commissioned. Deficiencies are being addressed by the contractor. The pharmacy equipment has been moved in and certified. The suite is in full use. NAPRA compliance confirmation is being coordinated with the department and the College of Pharmacists.									
Issues									
None.									
Financial									
Actuals to March 31, 2021	Actuals YTD	FY22	FY23	Projected			Total Actuals + Projected	Projected Unspent	Variance to Budget
\$ 773,558	\$ 1,072,087	\$ 1,196,442	\$ 230,000	\$ -	\$ -	\$ -	\$ 2,200,000	\$ -	\$ -

Project Name KBH Sterilizer - Steam Autoclave						Project Budget: \$146,000			
Project Number 6321011						RHD Contribution (Y/N): Y			
Project Manager Kevin T.									
% Complete Status			On Time	On Budget	Other Issues	Start Date	Substantial Completion		
Programming	Design	Const.					Original	Rev. #	Revised
N/A	N/A	100%	Y	Y	N	TBD	Mar-21	1	May-21
Scope									
Steam sterilizers (sometimes referred to as steam autoclaves, or just autoclaves) are an essential part of the decontamination and sterilization process performed by the medical device reprocessing department. These units are designed for fast, efficient sterilization of heat- and moisture-stable materials in addition to sterilization of items for immediate use in the hospital setting. This unit is replacing a 2003 model.									
Progress									
Project is complete and is being closed out.									
Issues									
None.									
Financial									
Actuals to March 31, 2021	Actuals YTD	FY21	FY22	Projected			Total Actuals + Projected	Projected Unspent	Variance to Budget
\$ 91,742	\$ 17,365	\$ 17,365	\$ -	\$ -	\$ -	\$ -	\$ 109,107	\$ 36,893	\$ -

Project Name KBH OR Ceiling Replacement						Project Budget: \$685,000			
Project Number 6321014						RHD Contribution (Y/N): Y			
Project Manager Kevin T.									
% Complete Status			On Time	On Budget	Other Issues	Start Date	Substantial Completion		
Programming	Design	Const.					Original	Rev. #	Revised
N/A	0%	85%	Y	Y	N	Oct-20	Aug-21	2	Nov-21
Scope									
The existing ceiling tiles from 2001 in the operating room, post anaesthetic recovery and the medical device reprocessing (MDR) areas require replacement and redesign. These multi-functional spaces require a ceiling for a hospital setting which includes water-resistant surfaces that are easy to clean to prevent infection, provide sound absorption and blocking to control unwanted sound, and light reflectance.									
Progress									
Replacement of the ceiling within the OR is complete. Minor deficiencies are being coordinated with operations to be completed early in the new year.									
Issues									
None.									
Financial									
Actuals to March 31, 2021	Actuals YTD	FY22	FY23	Projected			Total Actuals + Projected	Projected Unspent	Variance to Budget
\$ 54,380	\$ 86,727	\$ 89,901	\$ 55,719	\$ -	\$ -	\$ -	\$ 200,000	\$ 485,000	\$ -

West Kootenay Boundary Reports

December 2021

Project Name						KBH Public Elevator Modernization			Project Budget:		\$1,350,000
Project Number						6322000			RHD Contribution (Y/N):		Y
Project Manager						Ev K.					
% Complete Status			On Time	On Budget	Other Issues	Start Date	Substantial Completion				
Programming	Design	Const.					Original	Rev. #	Revised		
N/A	20%	0%	Y	Y	N	Aug-21	May-23	0	May-23		
Scope											
Public elevator #1 and #2 were installed in 1953 and the controls were last upgraded in 1999. The site requires this elevator upgrade to ensure safe and reliable vertical transport of the public, staff and critical patients. The scope of the modernization will include new door operators, digital traction controller, geared machine, hoist motor/ropes and other miscellaneous equipment.											
Progress											
The schematic design report has been completed and is under review with the Project Team. Costing is being completed by the quantity surveyor to confirm budget compliance. The design phase completion is anticipated for Spring 2022.											
Issues											
None.											
Financial											
Actuals to March 31, 2021	Actuals YTD	FY21	FY22	Projected FY23	FY24	FY25	Total Actuals + Projected	Projected Unspent	Variance to Budget		
\$ -	\$ -	\$ 19,500	\$ 787,134	\$ 543,366	\$ -	\$ -	\$ 1,350,000	\$ -	\$ -		

Project Name						BDH (BCC) RO Replacement			Project Budget:		\$400,000
Project Number						6322050			RHD Contribution (Y/N):		N
Project Manager						Christine E.					
% Complete Status			On Time	On Budget	Other Issues	Start Date	Substantial Completion				
Programming	Design	Const.					Original	Rev. #	Revised		
N/A	15%	0%	0	Y	N	Oct-21	TBD	0	TBD		
Scope											
Replacement of 2011 Reverse Osmosis in the Grand Forks Community Dialysis Unit located in the Boundary Hospital. This Project is BCRA funded.											
Progress											
An expanded space for the new equipment is being planned. Site meeting with the equipment vendor was completed and design is underway for the new system. Once the equipment vendor provides feedback on fabrication lead-times the schedule will be developed.											
Issues											
None.											
Financial											
Actuals to March 31, 2021	Actuals YTD	FY21	FY22	Projected FY23	FY24	FY25	Total Actuals + Projected	Projected Unspent	Variance to Budget		
\$ -	\$ 230	\$ 230	\$ 399,770	\$ -	\$ -	\$ -	\$ 400,000	\$ -	\$ -		

Project Name						KBH Steam Plant Retrofits			Project Budget:		\$2,100,000
Project Number						6322054			RHD Contribution (Y/N):		N
Project Manager						Ev K.					
% Complete Status			On Time	On Budget	Other Issues	Start Date	Substantial Completion				
Programming	Design	Const.					Original	Rev. #	Revised		
N/A	0%	0%	0	Y	N	TBD	TBD	0%	TBD		
Scope											
Efficiency upgrades to the boiler room and mechanical rooms at KBRH which will include various mechanical retrofits including variable frequency drives, steam bypass, thermal insulation, demand control ventilation and heat pumps to reduce utility costs and associated greenhouse gas emissions.											
Progress											
Project Scope of Work has been prepared and awaiting approval. Project schedule is currently under development.											
Issues											
None.											
Financial											
Actuals to March 31, 2021	Actuals YTD	FY21	FY22	Projected FY23	FY24	FY25	Total Actuals + Projected	Projected Unspent	Variance to Budget		
\$ -	\$ -	\$ 50,000	\$ 2,050,000	\$ -	\$ -	\$ -	\$ 2,100,000	\$ -	\$ -		

[Return to main Status Report.](#)

DIRECTOR STIPENDS (details attached)	\$	5,218.00
ACCOUNTS PAYABLE (details attached)	\$	3,883,415.33
TOTAL	\$	<u>3,888,633.33</u>

WEST KOOTENAY-BOUNDARY REGIONAL HOSPITAL DISTRICT
DIRECTOR STIPEND PAYMENTS AND ACCOUNTS PAYABLE SUMMARY
JUNE-DECEMBER 2021

Item 10.4

Vendor	Date	Description	Invoice #	Amount Paid
INTERIOR HEALTH				
	2021-06-04	WKBHRD-BYLAW-258-7	6318011_7	\$ 5,839.43
	2021-06-04	WKBHRD-BYLAW-279-12	6319002_12	\$ 16,772.89
	2021-06-04	WKBHRD-BYLAW-334-1	6321015_1	\$ 15,634.53
	2021-06-04	WKBHRD-BYLAW-333-4	6321016_4	\$ 6,318.70
	2021-06-04	WKBHRD-BYLAW-326-18	B/L 326_18	\$ 280,993.84
	2021-07-08	WKBHRD-BYLAW-294-2	6019024_2	\$ 12,574.67
	2021-07-08	WKBHRD-BYLAW-304-3	6019086_3	\$ 835.72
	2021-07-08	WKBHRD-BYLAW-318-28	6020017_28	\$ 15,931.01
	2021-07-08	WKBHRD-BYLAW-259-5	6318010_5	\$ 8,599.96
	2021-07-08	WKBHRD-BYLAW-283-3	6319001_3	\$ 9,881.92
	2021-07-08	WKBHRD-BYLAW-336-7	6319003_7	\$ 7,627.38
	2021-07-08	WKBHRD-BYLAW-335-2	6321014_2	\$ 680.71
	2021-07-08	WKBHRD-BYLAW-333-5	6321016_5	\$ 50,788.78
	2021-07-08	WKBHRD-BYLAW-290-45	B/L 290_45	\$ 6,116.46
	2021-07-08	WKBHRD-BYLAW-317-29	B/L 317_29	\$ 1,865.18
	2021-07-08	WKBHRD-BYLAW-348-11	B/L 348_11	\$ 18,051.01
	2021-08-12	WKBHRD-BYLAW-303-30	6318053_30	\$ 521,391.14
	2021-08-12	WKBHRD-BYLAW-326-19	B/L 326_19	\$ 857,473.57
	2021-09-15	WKBHRD-BYLAW-297-2	6019018_2	\$ 10,097.87
	2021-09-15	WKBHRD-BYLAW-333/361-6	6321016_6	\$ 237,079.63
	2021-09-15	WKBHRD-BYLAW-370	CAP22072	\$ 427,820.00
	2021-10-15	WKBHRD-BYLAW-303-31	6318053_31	\$ 82,443.02
	2021-10-15	WKBHRD-BYLAW-336-8	6319003_8	\$ 235.99
	2021-10-15	WKBHRD-BYLAW-319-40	6320006_40	\$ 216.60
	2021-10-15	WKBHRD-BYLAW-334-2	6321015_2	\$ 42,035.45
	2021-10-15	WKBHRD-BYLAW-326-20	B/L 326_20	\$ 869,882.12
	2021-10-15	WKBHRD-BYLAW-366-21-A	I632108100_21-A	\$ 72,344.06
	2021-10-15	WKBHRD-BYLAW-368-22-A	I632108300_22-A	\$ 42,864.18
	2021-10-15	WKBHRD-BYLAW-367-32-A	I632108600_32-A	\$ 61,882.73
	2021-12-15	WKBHRD-BYLAW-258-8-CREDIT NOTE	6318011_8	-\$ 2,477.17
	2021-12-15	WKBHRD-BYLAW-285-2	6319031_2	\$ 1,520.90
	2021-12-15	WKBHRD-BYLAW-315-1	6320007_1	\$ 21,828.02
	2021-12-15	WKBHRD-BYLAW-361-7	6321016_7	\$ 76,002.86
OTHER				
REGIONAL DISTRICT OF CENTRAL KOOTENAY	2021-11-04	WKBHRD-TRANSFER DEPOSIT ERROR TO RDCK	NOV 1 2021	\$ 919.07
	2021-11-04	WKBHRD-2021 ADMINISTRATIVE SERVICES	R210290	\$ 100,902.00
RECEIVER GENERAL	2021-07-08	WKBHRD-REMITTANCE CRA 2ND QUARTER	JULY 10 2021	\$ 278.73
	2021-11-04	WKBHRD-CRA DISCREPANCY 2020	NOV 3 2021	\$ 69.77
				<u>\$ 3,883,322.73</u>
DIRECTOR EXPENSE REIMBURSEMENTS				
Employee #	Name	Description	Invoice #	Amount Paid
1103	HEWAT, SUZAN	WKBHRD-BOARD MEETING-JUNE 2021	JUNE 23 2021	\$ 92.60
				<u>\$ 92.60</u>
Total Accounts Payable - June-December 2021				<u>\$ 3,883,415.33</u>

Stipend

WEST KOOTENAY-BOUNDARY REGIONAL HOSPITAL DISTRICT
 DIRECTOR STIPEND PAYMENTS AND ACCOUNTS PAYABLE SUMMARY
 JUNE-DECEMBER 2021

Item 10.4

Emp.#	Name	Given Name	Chair Stipend	Travel Time	Stipend	Total
503	Cunningham	Hans			\$ 120.00	\$ 120.00
508	Faust	Ramona			\$ 120.00	\$ 120.00
513	Grieve	Alison			\$ 120.00	\$ 120.00
516	Jackman	Garry			\$ 120.00	\$ 120.00
523	Peterson	Paul			\$ 120.00	\$ 120.00
524	Popoff	Walter			\$ 120.00	\$ 120.00
537	McGregor	Grace			\$ 120.00	\$ 120.00
540	Worley	Linda Jean			\$ 240.00	\$ 240.00
568	Davidoff	Andy			\$ 120.00	\$ 120.00
569	Berriault	Don			\$ 120.00	\$ 120.00
584	Hewat	Suzan	\$ 1,260.00		\$ 480.00	\$ 1,740.00
585	Newell	Thomas			\$ 120.00	\$ 120.00
590	Lunn	Jessica			\$ 120.00	\$ 120.00
596	Main	Leah			\$ 358.00	\$ 358.00
606	Parkinson	Arlene			\$ 120.00	\$ 120.00
658	Lockwood	Diana			\$ 120.00	\$ 120.00
659	Pasin	Lisa			\$ 240.00	\$ 240.00
671	Moss	Colin			\$ 120.00	\$ 120.00
672	Morrison	Janice			\$ 120.00	\$ 120.00
674	Grouette	Robert			\$ 120.00	\$ 120.00
680	Korolek	Catherine			\$ 120.00	\$ 120.00
682	Kenny	Lindsay			\$ 120.00	\$ 120.00
683	Nightingale	Janice			\$ 120.00	\$ 120.00
687	O'Donnell	Danna			\$ 120.00	\$ 120.00
689	Lamoureux	Jace			\$ 120.00	\$ 120.00
690	Bolt	John			\$ 120.00	\$ 120.00

Total Directors Stipend June-December 2021

\$ 5,218.00