

REGULAR BOARD MEETING Open Meeting Agenda

Date: June 26, 2024 **Time:** 6:00 p.m.

Location: Hybrid Meeting

Join by Video:

https://rdck-bcca.zoom.us/j/97357212374?pwd=ra6KUFeZQRWdvZ28aP0Zn2RfoUG4bA.1&from=addon

Join by phone:

+1 778 907 2071 Canada 833 958 1164 Canada Toll-free

Meeting number (access code): 973 5721 2374

Meeting password: 946781

In-person Location:

RDCK Board Room, 202 Lakeside Drive, Nelson, B.C.

Proceedings are open to the public.

1. CALL TO ORDER & WELCOME

2. TRADITIONAL LANDS ACKNOWLEDGEMENT STATEMENT

We acknowledge and respect the indigenous peoples within whose traditional lands we are meeting today.

3. ADOPTION OF THE AGENDA

RECOMMENDATION

That the agenda for the June 26, 2024 WKBRHD Board meeting be adopted as circulated.

4. ADOPTION OF THE MINUTES

4.1 WKBRHD BOARD MEETING MINUTES – MARCH 27, 2024 RECOMMENDATION

That the minutes from the March 27, 2024 WKBRHD Board meeting be adopted as circulated.

4.2 WKBRHD EXECUTIVE MEETING MINUTES – JUNE 17, 2024

The minutes from the June 17, 2024 WKBRHD Executive Committee meeting has been received.

5. **DELEGATIONS**

INTERIOR HEALTH AUTHORITY

Todd Mastel, Interim Corporate Director, Financial Services
Lannon De Best, Executive Director, Clinical Operations – Kootenay Boundary

5.1 CAPITAL FUNDING REQUEST FOR KOOTENAY BOUNDARY REGIONAL HOSPITAL (KBRH) MAGNETIC RESONANCE IMAGING (MRI) EXPANSION PROJECT

Todd Mastel will provide the Board update regarding capital funding request for Kootenay Boundary Regional Hospital (KBRH) Magnetic Resonance Imaging (MRI) Expansion Project.

The presentation from Todd Mastel and Lannon De Best re: KBH MRI Project Overview, has been received.

5.2 CLINICAL OPERATIONS UPDATE

Lannon De Best will provide a verbal update to the Board regarding clinical operations.

6. BUSINESS ARISING OUT OF THE MINUTES

6.1 WKBRHD BOARD MEETING FORMAT

This item was referred from the March 27, 2024 WKBRHD Board meeting where staff were directed to investigate meeting venues in Castlegar with appropriate hybrid support, to hold future Board meetings.

That the WKBRHD Board Meeting Format Item be REFERRED to the June 26, 2024 WKBRHD Board meeting.

At the June 17th WKBRHD Executive meeting, staff provided an update to the Executive Committee regarding the meeting location in Castlegar, reviewing the following options:

- Castlegar Community Complex is currently not set up to host a quality hybrid experience for large groups;
- The City of Castlegar Council Chambers space can only accommodate half of the Board to attend in-person;
- The new Confluence building is still under construction, the Mercer Celgar boardroom will accommodate up to 50 people and will be equipped with cutting-edge technology good option for 2025.

The Executive Committee recommends to continue the hybrid option with in-person location in Nelson until quality hybrid options in Castlegar are available in 2025.

7 NEW BUSINESS

7.1 CHAIR'S REPORT

Chair Hewat will provide the Board with a verbal report.

7.2 2024 UBCM MEETING PRIORITY TOPICS

Chair Hewat will provide an overview to the Board regarding the UBCM meeting priority discussion at the June 17, 2024 Executive Committee meeting. The Committee identified priorities for a meeting request with the Ministry of Health, with a Ministry meeting submission deadline of June 21, 2024.

Executive Committee determined that the following priorities:

The RDCK and RDKB are looking to discuss the availability of health care in the rural areas, including the following:

- 1. Recruitment and retention of healthcare workers the retention of qualified workers is a key struggle in the rural areas.
- 2. Mental health and addiction supports. Many of the issues our communities are dealing with are a direct result of mental health and addiction, and increased supports around these issues is critically required.
- 3. Access to health care services is limited by transit accessibility in rural areas. This issues presents itself not only for services in larger centres (Kelowna) but also locally (i.e. Kaslo to Trail).

7.3 CAPITAL FUNDING REQUEST FOR KOOTENAY BOUNDARY REGIONAL HOSPITAL (KBRH) MAGNETIC RESONANCE IMAGING (MRI) EXPANSION PROJECT

The letter dated June 7, 2024 from Sylvia Weir, VP & Chief Financial Officer – Interior Health re: Capital Funding Request – KBRH MRI Expansion Project, has been received.

RECOMMENDATION

THAT staff prepare an expenditure bylaw for the Kootenay Boundary Regional Hospital (KBRH) Magnetic Resonance Imaging (MRI) expansion project and a financial plan amending bylaw to the West Kootenay-Boundary Regional Hospital District Bylaw No. 420, 2024 for Board consideration.

7.4 DISCUSSION ITEM: AGING EQUIPMENT IN LOCAL HOSPITALS

At the June 17, 2024 Executive Committee meeting, during the UBCM priorities discussion, the Committee requested a Board discussion regarding aging equipment in local hospitals, be added to the June 26, 2024 Board meeting.

7.5 WKBRHD ACCOUNTS PAYABLE SUMMARY

The WKBRHD Accounts Payable Summary report prepared by the RDCK Finance Department for March – May 2024, has been received.

7.6 INTERIOR HEALTH AUTHORITY CAPITAL PROJECTS AND PLANNING STATUS REPORT

The Master Summary report for June 2024 has been received from the Interior Health Authority.

7.7 2022 WKBRHD AUDITED FINANCIAL STATEMENTS

The 2022 WKBRHD Financial Statements dated year ended December 31, 2022, has been received.

RECOMMENDATION

THAT the audited financial statements for the West Kootenay Boundary Regional Hospital District for the year ended December 31, 2022 be approved

8. QUESTIONS PERIOD FOR PUBLIC & MEDIA

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

9. ADJOURNMENT RECOMMENDATION

Γhat the meetin	g adjourn at	p.m.
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REGULAR OPEN MEETING MINUTES

The **second** regular meeting of the Board of the West Kootenay-Boundary Regional Hospital District for the year 2024 was held on Wednesday, March 27 at 6:00 p.m. through a hybrid meeting model.

Quorum was maintained for the duration of the meeting.

ELECTED OFFICIALS PRESENT:

Chair S. Hewat	RDCK Village of Kaslo	In-Person
(RDCK)		
Director G. Jackman	Area A	In-Person
Director A. Watson	Area D	
Alternate Director J. Smienk	Area E	In-Person
Director H. Cunningham	Area G	
Director W. Popoff	Area H	
Director A. Davidoff	Area I	
Director H. Hanegraaf	RDCK Area J	
Director T. Weatherhead	Area K	
Director K. Page	City of Nelson	In-Person
Director L. Casley	Village of New Denver	
Director D. Lockwood	Village of Salmo	
Alternate Director J. Lunn	Village of Slocan	

(RDKB)

•		
Director A. Grieve	Area A	
Alternate Director B. Edwards	Area B	
Director G. McGregor	Area C	
Director L. Wiese	Area D	
Director S. Gibbs	Area E	
Director B. Wenman	Village of Fruitvale	
Director E. Baker	City of Grand Forks	
Director J. McLean	Village of Greenwood	
Director J. Weaver	City of Rossland	
Director T. Martin	City of Trail	
Director F. Marino	Village of Warfield	

ELECTED DIRECTORS ABSENT:

Director C. Graham RDCK Area E

Director T. Newell

Director B. Bogle

Director E. Buller

Director L. Main

Director A. McLean-Caux

Director L. Worley

RDCK Area F

City of Castlegar

Village of Slocan

Village of Silverton

Village of Naksup

RDKB Area B

Director D. Berriault Village of Montrose
Director J. Willsey Village of Midway

STAFF PRESENT

Mr. M. Morrison Deputy Secretary/RDCK Corporate Officer

Ms. H. Smith Finance Manager

Mr. Y. Malloff RDCK Corporate Financial Officer

Ms. C. Hopkyns Meeting Coordinator

INTERIOR HEALTH

Mr. L. DeBest Executive Director, Clinical Operations – Kootenay

Mr. T. Mastel Corporate Director, Business Operations

Join by Video:

https://nelsonho.webex.com/nelsonho/j.php?MTID=mc145397f858f54c6c2d8ede5740d65bc

Join by phone:

+1-604-449-3026 Canada Toll (Vancouver)

Meeting number (access code): 2774 146 9653

Meeting password: PeHmZbRp797 (73469277 from phones)

In-person Location:

RDCK Board Room, 202 Lakeside Drive, Nelson, B.C.

Proceedings are open to the public.

1. CALL TO ORDER & WELCOME

Chair Hewat called the meeting to order at 6:04 p.m.

2. TRADITIONAL LANDS ACKNOWLEDGEMENT STATEMENT

We acknowledge and respect the indigenous peoples within whose traditional lands we are meeting today.

3. ADOPTION OF THE AGENDA

Moved and seconded, And Resolved:

That the agenda for the March 27, 2024 Board meeting be adopted as circulated.

Carried

4. ADOPTION OF THE MINUTES

Moved and seconded, And Resolved:

That the minutes from the January 24, 2024 Board meeting be adopted as circulated.

Carried

5. **DELEGATIONS**

INTERIOR HEALTH AUTHORITY

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

5.1 INTERIOR HEALTH UPDATE REPORT

The report from Todd Mastel, Corporate Director, Business Operations, Financial Services, re: Summary of Minor Equipment Global Grant Items, has been received.

Todd Mastel provided an overview of the 2024/25 under \$100K Equipment Global Grant initial listing and answered the Boards questions.

Todd discussed Item 7.2 West Kootenay Boundary Project Summary. He reviewed three projects previously approved by the Board that are having cost pressures related to HVAC system issues:

- 1. Air Supply Fan Replacement project at Kootenay Boundary Regional Hospital in Trail;
- 2. Multi Zone Air Handling Replacement project at Boundary Hospital in Grand Forks;
- 3. Cooling Chiller Replacement project at Columbia View Lodge in Trail.

Interior Health is working with the architects in the design phase regarding the HVAC issues. Todd will update the Board on these projects at the June Board meeting.

Todd answered the Board's questions.

5.2 CLINICAL OPERATIONS UPDATE

Lannon DeBest provided a verbal update to the Board regarding clinical operations.

- 1. Kootenay Boundary Regional Hospital In February, the upgraded service of three tier 3 neonatal beds opened. These beds provide care for neonatal babies, while keeping families in their own community.
- 2. Integrated Crisis Response Team This team came from targeted funding from Mental Health and Addiction to a variety of communities that provides 7 days week,

- just in time response, for people in crisis. The teams are in Trail, Nelson and Grand Forks. Although the program is very new, the results have been promising.
- 3. Nelson Health Campus Good progress is being made on the project, with plans to open in early 2025.

Lannon and Todd answered the Boards questions related to the updates.

6. BUSINESS ARISING OUT OF THE MINUTES

6.1 INTERIOR HEALTH CAPITAL FUNDING REQUEST FOR 2024/2025 FISCAL YEAR

The letter from Sylvia Weir, Chief Financial Officer & VP Corporate Services, Interior Health Authority, dated December 11, 2023, was received at the January 24, 2024 Board meeting. The letter is attached for reference during the review of the bylaws.

6.2 Bylaws

(a) BYLAW NO. 408

(Fire Alarm System) WEST KOOTENAY-BOUNDARY REGIONAL HOSPITAL DISTRICT CAPITAL EXPENDITURE BYLAW NO. 408

Moved and seconded, And Resolved:

17/24

West Kootenay-Boundary Regional Hospital District Capital Expenditure Bylaw No. 408, 2024 is hereby read the FIRST, SECOND and THIRD time.

Carried

Moved and seconded, And Resolved:

18/24

West Kootenay-Boundary Regional Hospital District Capital Expenditure Bylaw No. 408, 2024 is hereby ADOPTED and the Chair and the Secretary are authorized to sign same.

Carried

(b) BYLAW NO. 409

(Building Voltage Regulation) WEST KOOTENAY-BOUNDARY REGIONAL HOSPITAL DISTRICT CAPITAL EXPENDITURE BYLAW NO. 409

Moved and seconded, And Resolved:

19/24

West Kootenay-Boundary Regional Hospital District Capital Expenditure Bylaw No. 409, 2024 is hereby read the FIRST, SECOND and THIRD time.

Carried

Moved and seconded, And Resolved:

20/24

West Kootenay-Boundary Regional Hospital District Capital Expenditure Bylaw No. 409, 2004 is hereby ADOPTED and the Chair and the Secretary are authorized to sign same.

Carried

(c) BYLAW NO. 410

(Washroom Renovation) WEST KOOTENAY-BOUNDARY REGIONAL HOSPITAL DISTRICT CAPITAL EXPENDITURE BYLAW NO. 410

Moved and seconded, And Resolved:

21/24

West Kootenay-Boundary Regional Hospital District Capital Expenditure Bylaw No. 410, 2024 is hereby read the FIRST, SECOND and THIRD time.

Carried

Moved and seconded, And Resolved:

22/24

West Kootenay-Boundary Regional Hospital District Capital Expenditure Bylaw No. 410, 2024 is hereby ADOPTED and the Chair and the Secretary are authorized to sign same.

Carried

(d) BYLAW NO. 411

(Air Handling Unit) WEST KOOTENAY-BOUNDARY REGIONAL HOSPITAL DISTRICT CAPITAL EXPENDITURE BYLAW NO. 411

Moved and seconded, And Resolved:

23/24

West Kootenay-Boundary Regional Hospital District Capital Expenditure Bylaw No. 411, 2024 is hereby read the FIRST, SECOND and THIRD time.

Carried

Moved and seconded,

And Resolved:

24/24

West Kootenay-Boundary Regional Hospital District Capital Expenditure Bylaw No. 411, 2024 is hereby ADOPTED and the Chair and the Secretary are authorized to sign same.

Carried

(e) BYLAW NO. 412

(Kitchen Air Handling Unit Replacement) WEST KOOTENAY-BOUNDARY REGIONAL HOSPITAL DISTRICT CAPITAL EXPENDITURE BYLAW NO. 412

Moved and seconded, And Resolved:

25/24

West Kootenay-Boundary Regional Hospital District Capital Expenditure Bylaw No 412, 2024 is hereby read the FIRST, SECOND and THIRD time.

Carried

Moved and seconded, And Resolved:

26/24

West Kootenay-Boundary Regional Hospital District Capital Expenditure Bylaw No. 412, 2024 is hereby ADOPTED and the Chair and the Secretary are authorized to sign same.

Carried

(f) BYLAW NO. 413

(Packaged Air Handler Replacement) WEST KOOTENAY-BOUNDARY REGIONAL HOSPITAL DISTRICT CAPITAL EXPENDITURE BYLAW NO. 413

Moved and seconded, And Resolved:

27/24

West Kootenay-Boundary Regional Hospital District Capital Expenditure Bylaw No. 413, 2024 is hereby read the FIRST, SECOND and THIRD time.

Carried

Moved and seconded, And Resolved:

28/24

West Kootenay-Boundary Regional Hospital District Capital Expenditure Bylaw No. 413, 2024 is hereby ADOPTED and the Chair and the Secretary are authorized to sign same.

Carried

(g) BYLAW NO. 414

(Boiler Feedwater Pumps) WEST KOOTENAY-BOUNDARY REGIONAL HOSPITAL DISTRICT CAPITAL EXPENDITURE BYLAW NO. 414

Moved and seconded, And Resolved:

29/24

West Kootenay-Boundary Regional Hospital District Capital Expenditure Bylaw No. 414, 2024 is hereby read the FIRST, SECOND and THIRD time.

Carried

Moved and seconded, And Resolved:

30/24

West Kootenay-Boundary Regional Hospital District Capital Expenditure Bylaw No. 414, 2024 is hereby ADOPTED and the Chair and the Secretary are authorized to sign same.

Carried

(h) BYLAW NO. 415

(Interior Health - Wide Digital Health) WEST KOOTENAY-BOUNDARY REGIONAL HOSPITAL DISTRICT CAPITAL EXPENDITURE BYLAW NO. 415

Moved and seconded, And Resolved:

31/24

West Kootenay-Boundary Regional Hospital District Capital Expenditure Bylaw No. 415, 2024 is hereby read the FIRST, SECOND and THIRD time.

Carried

Moved and seconded, And Resolved:

32/24

West Kootenay-Boundary Regional Hospital District Capital Expenditure Bylaw No. 415, 2024 is hereby ADOPTED and the Chair and the Secretary are authorized to sign same.

Carried

(i) BYLAW NO. 416

(Waste and Cardboard Compactor) WEST KOOTENAY-BOUNDARY REGIONAL HOSPITAL DISTRICT CAPITAL EXPENDITURE BYLAW NO. 416

Moved and seconded, And Resolved:

33/24

West Kootenay-Boundary Regional Hospital District Capital Expenditure Bylaw No. 416, 2024 is hereby read the FIRST, SECOND and THIRD time.

Carried

Moved and seconded, And Resolved:

34/24

West Kootenay-Boundary Regional Hospital District Capital Expenditure Bylaw No. 416, 2024 is hereby ADOPTED and the Chair and the Secretary are authorized to sign same.

Carried

(j) BYLAW NO. 417

(Steam Sterilizer) WEST KOOTENAY-BOUNDARY REGIONAL HOSPITAL DISTRICT CAPITAL EXPENDITURE BYLAW NO. 417

Moved and seconded, And Resolved:

35/24

West Kootenay-Boundary Regional Hospital District Capital Expenditure Bylaw No. 417, 2024 is hereby read the FIRST, SECOND and THIRD time.

Carried

Moved and seconded, And Resolved:

36/24

West Kootenay-Boundary Regional Hospital District Capital Expenditure Bylaw No. 417, 2024 is hereby ADOPTED and the Chair and the Secretary are authorized to sign same.

Carried

(k) BYLAW NO. 418

(Mammography Breast Imaging Specimen System) WEST KOOTENAY-BOUNDARY REGIONAL HOSPITAL DISTRICT CAPITAL EXPENDITURE BYLAW NO. 418 Moved and seconded,

And Resolved:

37/24

West Kootenay-Boundary Regional Hospital District Capital Expenditure Bylaw No. 418, 2024 is hereby read the FIRST, SECOND and THIRD time.

Carried

Moved and seconded, And Resolved:

38/24

West Kootenay-Boundary Regional Hospital District Capital Expenditure Bylaw No. 418, 2024 is hereby ADOPTED and the Chair and the Secretary are authorized to sign same.

Carried

(I) BYLAW NO. 419

(Global Grants under \$100,000) WEST KOOTENAY-BOUNDARY REGIONAL HOSPITAL DISTRICT CAPITAL EXPENDITURE BYLAW NO. 419

Moved and seconded, And Resolved:

39/24

West Kootenay-Boundary Regional Hospital District Capital Expenditure Bylaw No. 419, 2024 is hereby read the FIRST, SECOND and THIRD time.

Carried

Moved and seconded, And Resolved:

40/24

West Kootenay-Boundary Regional Hospital District Capital Expenditure Bylaw No. 419, 2024 is hereby ADOPTED and the Chair and the Secretary are authorized to sign same.

Carried

(m) The Board Memorandum from Stuart Horn, Secretary/Treasurer, presenting Draft 2024 Budget Scenarios and Bylaw 372 Borrowing, has been received.

Heather Smith, Finance Manager, provided an overview to the Board regarding the Draft 2024 Budget, reviewing the three scenarios outlined in the memorandum. Director Lockwood proposed another scenario (D) with a 2% increase. The Board discussion regarding the options and staff answered their questions.

Moved and seconded, And Resolved:

41/24

That the Board approve WKBRHD budget scenario D with a taxation amount of \$4,923,380 and a contribution to reserve of \$960,091.

Carried

BYLAW NO. 420

(Annual 2024 Budget) WEST KOOTENAY-BOUNDARY REGIONAL HOSPITAL DISTRICT BUDGET BYLAW NO. 420

Moved and seconded, And Resolved:

42/24

West Kootenay-Boundary Regional Hospital District Capital Expenditure Bylaw No. 420, 2024 is hereby read the FIRST, SECOND and THIRD time.

Carried

Moved and seconded, And Resolved:

43/24

West Kootenay-Boundary Regional Hospital District Capital Expenditure Bylaw No. 420, 2024 is hereby ADOPTED and the Chair and the Secretary are authorized to sign same.

Carried

The Board had a discussion regarding borrowing options. Staff answered questions regarding borrowing under the bylaw 372.

Moved and seconded, And Resolved:

44/24

That staff be directed to borrow \$9,819,192 under bylaw 372 for Phase 2 of the Kootenay Boundary Hospital Renovations.

Carried

7. NEW BUSINESS

7.1 CORRESPONDENCES

- **7.1.1** The letter dated December 13, 2023 from Janice Morrison, Mayor City of Nelson, re: Dialysis Service in Nelson, has been received.
- **7.1.2** The letter dated January 22, 2024 from Andy Leathwood, President Rotary Club of Nelson Daybreak, re: Letter of Support for a Hemodialysis unit at Kootenay Lake District Hospital, has been received.
- **7.1.3** The letter dated January 24, 2024 from Al Friend, Lions Club re: Nelson Lions Letter of Support for a Hemodialysis unit at Kootenay Lake District Hospital, has been received.
- **7.1.4** The letter from Ruth O'Byran, IODE Kokanee Chapter Education Officer, re: Letter of Support for a Hemodialysis unit at Kootenay Lake District Hospital, has been received.
- **7.1.5** The letter dated February 27, 2024 from Mary Gris, Past-President (current Acting President) Nelson Catholic Women's League, re: Letter of Support for a Hemodialysis unit at Kootenay Lake District Hospital, has been received.

7.2 INTERIOR HEALTH AUTHORITY CAPITAL PROJECTS AND PLANNING STATUS REPORT The Master Summary report for March 2024 has been received from the Interior Health Authority.

7.3 WKBRHD ACCOUNTS PAYABLE SUMMARY

The WKBRHD Accounts Payable Summary report prepared by the RDCK Finance Department for January - February 2024, has been received.

7.4 WKBRHD BOARD MEETING FORMAT

Chair Hewat requested a discussion regarding WKBHRD Board meeting format.

Two options brought forward:

- Virtual only with the Chair in person at the RDCK Board office.
- Hybrid meeting with the in person at the RDCK Board office.

The Board had a discussion regarding meeting format and location. Staff provide background sharing results from the Board survey last year regarding meeting format and location. The Board agreed to keep the hybrid meeting format (in-person or remote

	Complex has appropriate hybrid support to hold the future Board meeting.
	Moved and seconded, And Resolved:
45/24	That the WKBRHD Board Meeting Format Item be REFERRED to the June 26, 2024 WKBRHD Board meeting.
	Carried
8.	QUESTIONS PERIOD FOR PUBLIC & MEDIA The Chair will call for questions from the public and members of the media at 7:36 p.m.
	The media requested a copy of the Bylaw 420 Annual 2024 Budget. Staff will email the budget to her.
9.	ADJOURNMENT Moved and seconded, And Resolved:
46/24	That the meeting adjourn at 7:37 p.m.
	Carried
<u></u>	- Usuat Chair
Suzar	n Hewat, Chair
Chris	tine Hopkyns, Recording Secretary

attendance). Staff were directed to investigate if the Castlegar & District Community

EXECUTIVE COMMITTEE MEETING Open Meeting Minutes

Date: June 17, 2024

Time: 11:00 a.m.

Location: Remote Meeting

ELECTED OFFICIALS PRESENT:

Director S. Hewat Village of Kaslo – RDCK (Chair)
Director F. Marino Village of Warfield – RDKB

Director W. Popoff Area H - RDCK

Director K. Page City of Nelson – RDCK

Director S. Gibbs Area E – RDKB
Director T. Martin City of Trail – RDKB

STAFF PRESENT:

Stuart Horn Secretary/Treasurer
Carly Feeney Meeting Coordinator

1. CALL TO ORDER & WELCOME

Chair Hewat called the meeting to order at 11:02 a.m.

2. TRADITIONAL LANDS ACKNOWLEDGEMENT STATEMENT

We acknowledge and respect the indigenous peoples within whose traditional lands we are meeting today.

3. ADOPTION OF THE AGENDA

Moved

And Resolved:

That the agenda for the June 17, 2024 Executive Committee meeting be adopted as circulated.

Carried

4. NEW BUSINESS

4.1 2024 UBCM Meeting Priority Topics

Chair Hewat led discussion regarding the strategy and desired outcomes for the upcoming UBCM meeting. The Committee discussed numerous topic ideas including kidney dialysis in small communities, wraparound support of housing for the unhoused population, recruitment of healthcare workers, pediatric mental health beds, aging equipment at local hospitals, Primary Care centers, ground transportation issues, mental health support and interprovincial medical care.

Executive Committee identified the following priorities:

The RDCK and RDKB are looking to discuss the availability of health care in the rural areas, including the following:

- 1. Recruitment and retention of healthcare workers the retention of qualified workers is a key struggle in the rural areas.
- 2. Mental health and addiction supports. Many of the issues our communities are dealing with are a direct result of mental health and addiction, and increased supports around these issues is critically required.
- Access to health care services is limited by transit accessibility in rural areas. This issues
 presents itself not only for services in larger centres (Kelowna) but also locally (i.e.
 Kaslo to Trail).

4.2 WKBRHD BOARD MEETING - IN-PERSON LOCATION

Stuart Horn provided an update to the Executive Committee regarding the meeting location in Castlegar. He reviewed the options:

- Castlegar Community Complex is currently not set up to host a quality hybrid experience for large groups;
- The City of Castlegar Council Chambers space can only accommodate half of the Board to attend in-person;
- The new Confluence building is still under construction, the Mercer Celgar boardroom will accommodate up to 50 people and will be equipped with cutting-edge technology good option for 2025.

The Committee recommends to continue the hybrid option with in-person location in Nelson until better hybrid options in Castlegar are available in 2025.

Moved

And Resolved:

That it be recommended to the Board to continue hybrid meetings with in-person location in Nelson RDCK Board Room until 2025, when improved meeting locations options become available.

Carried

Item 4.2 June 17, 2024 Executive Committee Meeting West Kootenay Boundary Regional Hospital District

DJOURNMENT Joved
nd Resolved:
nat the meeting adjourn at 11:54 a.m.
Carried
Digitally approved by
ı

KBH MRI Project Overview

Presentation to West Kootenay Boundary Regional Hospital District

Todd Mastel, Corporate Director, Business Operations Lannon De Best, Executive Director, Clinical Operation June 26, 2024

Land Acknowledgement

Interior Health would like to recognize and acknowledge the traditional, ancestral, and unceded territories of the Dākelh Dené, Ktunaxa, Nlaka'pamux, Secwépemc, St'át'imc, Syilx, and Tŝilhqot'in Nations where we live, learn, collaborate and work together.



Background

- Overview:
 - Replacement of mobile MRI with permanent 1.5 Tesla MRI
 - Building expansion for new MRI suite & services (~482 sqm or ~5,200 sq ft) and basement for mechanical systems (~450 sqm or ~4,900 sq ft)
 - Upgrades to KBH parking areas for patients and staff
 - Ministry of Health has approved project to proceed



Project Objectives



Support 20-year service growth



Optimize operational efficiencies



Provide quality care and patient & staff safety



Compliance with all clinical standards



Maintain fiscal responsibility and minimize risks



Site Plan





Floor Plan

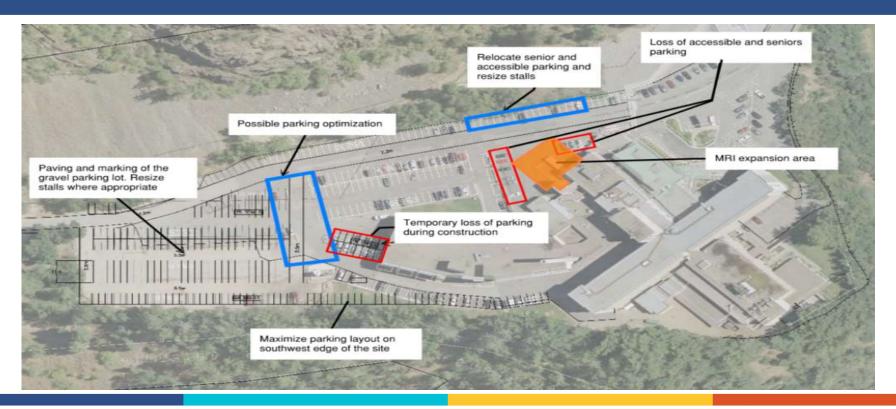
New Spaces:

- MRI and Equipment Rooms
- Patient Support Areas
- Patient Recovery Area
- Offices
- Non-Clinical Support Areas





- Parking Plan:
 loss of 14 stalls due to MRI structure foot print
- add 19 to 23 stalls through lot upgrades





Project Timeline

- Design Start: August 2024
- Procurement of General Contractor: February 2026
- Construction Start: July 2026
- Target Completion: June 2028



Funding Impact

- Procurement Delivery Method: Design-Bid-Build
- Total Capital Cost: \$35.9M
 - > WKBRHD contribution request: \$14.4M
- **KBRH Foundation for Health:** In discussions on their funding participation in this project.



 Business Plan was submitted to Ministry of Health in December 2023

Questions?





Health and well-being for all

Quality | Integrity | Compassion | Safety

June 7, 2024

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

Sent via email:shorn@rdck.bc.ca

Dear Mr. Horn:

Re: Capital Funding Request for Kootenay Boundary Regional Hospital (KBRH) Magnetic Resonance Imaging (MRI) Expansion Project

In November, 2023 Interior Health (IH) submitted a Business Plan for the new KBRH MRI Expansion to the Ministry of Health (MoH). We now have MoH approval to proceed with this project which is exciting news for the people in Kootenay Boundary.

This project, scheduled for completion in June 2028, will replace the existing mobile MRI with a permanent MRI suite in a new building expansion adjacent to the existing medical imaging department at KBRH resulting in a significant improvement in quality of care and accessibility to services for patients. The MRI suite will house a new MRI, patient areas, and support spaces and the project will also deliver upgraded client parking. The updated MRI technology will be faster and will have the ability to perform more complex care exams which will reduce wait times and the need for patient transfers to other service areas.

The total project cost is projected to be \$35.9 million, and we are requesting a contribution of \$13.945 million from your RHD with consideration that project costs could increase as we proceed to tender or due to unexpected events. We have estimated projected cash flows based on the project schedule here.

Estimated Cash Flow (in \$,000s)	2024/25	2025/26	2026/27	2027/28	2028/29	Total
Total Per Fiscal Year	1,135	1,785	4,549	5,857	619	13,945

Interior Health would like to recognize and acknowledge the traditional, ancestral, and unceded territories of the Dãkelh Dené, Ktunaxa, Nlaka'pamux, Secwépemc, St'át'imc, Syilx, and Tŝilhqot'in Nations where we live, learn, collaborate and work together.

We would appreciate it if you could submit this formal funding request to your Board for approval at your June 20, 2024 meeting. IH representatives will be attending to answer questions the Directors may have. Should the Board approve this project, please send Cindy Rephin, Corporate Director Capital Finance, copies of the relevant bylaws for our records. We appreciate and thank you for your support for this project that will benefit the residents and staff of the Kootenay Boundary region.

If you require further information, or if you have any questions or concerns, please contact Todd Mastel or myself directly.

Sincerely,

Sylvia Weir

VP & Chief Financial Officer

/cyr

cc: Suzan Hewat, Chair, WKBRHD

Todd Mastel, Corporate Director, Business Operations

Interior Health would like to recognize and acknowledge the traditional, ancestral, and unceded territories of the Däkelh Dené, Ktunaxa, Nlaka'pamux, Secwépemc, St'át'imc, Syilx, and Tŝilhqot'in Nations where we live, learn, collaborate and work together.

DIRECTOR STIPENDS (details attached)	\$ 3,725.00
ACCOUNTS PAYABLE (details attached)	\$ 925,278.52
TOTAL	\$ 929,003.52

Vendor	Date	Description	Invoice #		Amount Paid
INTERIOR HEALTH	2024-03-21	WKBRHD-BYLAW-381-56	6323000 56	\$	1,362.96
<u></u>	2024-03-21	WKBRHD-BYLAW-383-53	6323020_53	Ś	16,423.49
	2024-03-21	WKBRHD-BYLAW-390-1	6323067 1	Ś	29,293.26
	2024-03-21	WKBRHD-BYLAW-405-10	6324038_10	Ś	42,258.17
	2024-04-18	WKBRHD-BYLAW-382-53	6020001 53	Ś	3,487.64
	2024-04-18	WKBRHD-BYLAW-365-15	6022016 15	\$	35,976.52
	2024-04-18	WKBRHD-BYLAW-401-1	6024010 1	\$	52,817.39
	2024-04-18	WKBRHD-BYLAW-321-2	6320005 2	\$	29,291.39
	2024-04-18	WKBRHD-BYLAW-359-4	6322054 4	\$	37,152.80
	2024-04-18	WKBRHD-BYLAW-374-4	6322095 4	\$	32,573.92
	2024-04-18	WKBRHD-BYLAW-392-2	6323018 2	\$	28,844.04
	2024-04-18	WKBRHD-BYLAW-402-59	6323045_59	\$	8,963.38
	2024-04-18	WKBRHD-BYLAW-395-1	6324035 1	\$	20,331.61
	2024-04-18	WKBRHD-BYLAW-364-14	B/L 364 14	\$	7,661.39
	2024-04-18	WKBRHD-BYLAW-380-8	B/L 380 8	\$	36,601.25
	2024-04-18	WKBRHD-BYLAW-380-9	B/L 380_9	\$	8,606.04
	2024-04-18	WKBRHD-BYLAW-400-3	B/L 400_3	\$	247,965.33
	2024-04-18	WKBRHD-BYLAW-400-4	B/L 400_4	\$	38,236.72
	2024-04-18	WKBRHD-BYLAW-400-5	B/L 400_5	\$	40,753.95
	2024-05-22	WKBRHD-BYLAW-318-49	6020016_49	\$	81.87
	2024-05-22	WKBRHD-BYLAW-318-47	6020017_47	\$	5,015.25
	2024-05-22	WKBRHD-BYLAW-321-3	6320005_3	\$	32,244.06
	2024-05-22	WKBRHD-BYLAW-360-11	6322000_11	\$	2,634.00
	2024-05-22	WKBRHD-BYLAW-359-5	6322054_5	\$	6,492.34
	2024-05-22	WKBRHD-BYLAW-397-1	6324034_1	\$	31,760.24
	2024-05-22	WKBRHD-BYLAW-394-1	6324036_1	\$	36,491.97
	2024-05-22	WKBRHD-BYLAW-405-23	6324038_23	\$	22,266.82
	2024-05-22	WKBRHD-BYLAW-326-34	B/L 326_34	\$	68,215.60
OTHER					
BENEVA INC.	2024-03-21	WKBRHD-AD&D POLICY 1M680 2024-2025	6027398	\$	825.00
RECEIVER GENERAL	2024-04-11	WKBRHD-CRA REMITTANCE-Q1	APR 11 2024	\$	178.72
			Total Trades Payable March - May 2024	\$	924,807.12

471.40

Director Expense Reimbursements

Employee #	Name	Description	Invoice #	Amount Paid	
1017	JACKMAN, GARRY A	WKBRHD-BOARD MEETING JAN 2024	JAN 24 2024	\$ 91.	1.00
1017	JACKMAN, GARRY A	WKBRHD-BOARD MEETING MAR 2024	MAR 27 2024	\$ 91.	00
1103	HEWAT, SUZAN	WKBRHD-BOARD MEETING JAN 2024	JAN 24 2024	\$ 126.	5.50
1103	HEWAT, SUZAN	WKBRHD-BOARD MEETING MAR 2024	MAR 27 2024	\$ 126.	5.50
1153	JOSH SMIENK	WKBRHD-BOARD MEETING MAR 2024	MAR 27 2024	\$ 36.	.40

Total Director Expenses Payable March - May 2024 \$

Stipend

Emp.#	Name	Given Name	Chair Stipend	Travel Time	Stipend	Total	
503	Cunningham	Hans			\$ 133.00	\$	133.00
513	Grieve	Alison			\$ 133.00	\$	133.00
516	Jackman	Garry			\$ 133.00	\$	133.00
524	Popoff	Walter			\$ 133.00	\$	133.00
537	McGregor	Grace			\$ 133.00	\$	133.00
568	Davidoff	Andy			\$ 133.00	\$	133.00
574	Watson	Aimee			\$ 133.00	\$	133.00
584	Hewat	Suzan	\$ 400.00		\$ 133.00	\$	533.00
590	Lunn	Jessica			\$ 133.00	\$	133.00
600	Edwards	William			\$ 133.00	\$	133.00
658	Lockwood	Diana			\$ 133.00	\$	133.00
676	Weatherhead	Teresa			\$ 133.00	\$	133.00
677	Wenman	William			\$ 133.00	\$	133.00
693	Weaver	Jeff			\$ 133.00	\$	133.00
694	Marino	Frank			\$ 133.00	\$	133.00
696	Gibbs	Sharen			\$ 133.00	\$	133.00
697	Baker	Everestt			\$ 133.00	\$	133.00
699	Wiese	Linda			\$ 133.00	\$	133.00
700	Smienk	Johannes			\$ 133.00	\$	133.00
701	Hanegraaf	Henrica			\$ 133.00	\$	133.00
703	Page	Keith			\$ 133.00	\$	133.00
706	Martin	Terry			\$ 133.00	\$	133.00
709	Casley	Leonard			\$ 133.00	\$	133.00
710	McLean	Jessica			\$ 266.00	\$	266.00

Total Directors Stipend March - May 2024

\$ 3,725.00

IHA Capital Projects and Planning Status Report Master Summary - June 2024 Item 7.6

		% C	omplete St	tatus	1		
					Total Complete Date	Project	
Project #	Project Name/Phase Name	Program	Design	Const.	Mth/Yr	Status	Project Budget
	West Kootenay Boundary (WKB)						
6319067	KBH Pharmacy & Ambulatory Care Project	N/A	100%	97%	Dec-24		\$32,775,000
6320005	KLH Waste and Cardboard Compactor	0%	100%	50%	Oct-24		\$522,000
6322054	KBH Steam Plant Retrofits	0%	100%	60%	Dec-24		\$2,520,461
6322095	ESH Generator	0%	100%	97%	Jul-24		\$300,000
6323067	KBH Relocate & Replace Supply Fans 12 & 13	0%	50%	N/A	Jun-25		\$3,258,150
6323068	BDH Multizone Air Handling Unit Replacement	0%	30%	0%	Jun-25		\$641,107
6323069	CVL Chiller and Cooling Tower Replacement	N/A	30%	0%	Jun-25		\$1,317,935
6323074	KLH Laboratory Surface Replacement	N/A	10%	0%	Oct-24		\$123,500
6324038	KBH Meal Delivery System	0%	100%	97%	Jun-25		\$917,000
6324039	KLH Medstation	N/A	N/A	0%	Sep-24		\$504,000
6324040	NEL LTC and Community Clinic Tenant Improvement	N/A	N/A	N/A	TBD		\$11,500,000
6324042	NEL LTC and Community Clinic Equipment	N/A	N/A	N/A	TBD		\$7,000,000
6324059	KBH Foundation Office Renovation	N/A	100%	98%	Aug-24		\$495,000
6324101	KBH MRI	N/A	0%	0%	Sep-28		\$35,864,000
6325000	CDH Fire Alarm System	0%	0%	0%	Nov-25		\$1,375,250
6325001	KBH Steam Sterilizer	0%	0%	0%	Jan-25		\$129,699
6325007	KLH Building Voltage Regulation	0%	0%	0%	Aug-25		\$562,201
						Total:	\$99,805,303

West Kootenay Boundary Reports

Project Name				KBI	Pharmacy & Amb	ulatory Care Project	Project Budget:		\$32,775,0
roject Number						6319067			
roject Manager						Ev K.	RHD Contribution (,	Υ
	% Complete Status		On Time	On Budget	Issues	Start Date		bstantial Complet	
Programming	Design	Const.	On time	On Budget			Original	Rev.#	Revised
	100%	97%	Υ	Υ	N	Jan-19	Dec-22	0	Mar-23
cope						t expansion. The old			
		llow for a major exp	ansion of the curren			e. In addition, the cas of the pharmacy proo			
rogress									
						lete. Some minor wo hysical work planned			
sues	None.								
inancial									
Actuals	Actuals			Projected			Total Actuals	Projected	Variance
to March 31, 2024	YTD	FY24	FY25	FY26	FY27	FY28	+ Projected	Unspent	to Budget
30,363,078	\$ 30,410,420	\$ -	\$ 2,407,084	\$ -	\$ -	\$ -	\$ 30,367,916	\$ -	\$
	% Complete Status	Const.	On Time	On Budget	Issues	Martin K. Start Date		bstantial Complet Rev. #	ion Revised
Programming	Design						Original		
0%	100%	50%	Υ	Υ	N	Jun-19	Nov-19	6	Aug-24
cope						ncy with regards to v			
rogress	commercial comparand contractor safe engaged to carry of Ongoing constructive week of June 17. Licurrent issues at sit	ctor/packer roll off c sty there are also rein with the design. on. Progress has be ooking at completio te. Challenges with	ombo, container, wanovations required to the container of the container of dock and canopexisting service container.	Ilk-on dock, contained access the compart of the compart of the can be sufficiently by mid to end of Juractor remain and o	er stand assembly, ctor, dock cover an opy connector plate uly allowing the ten ther options (service	controls for the hydra d lighting. Due to unl es (connection to the approary bins to be loc- te contractors) are cu	aulic system and ele- forseen circumstanc existing building). S cated by the new doc urrently being explore	ctrical supply. To ac es, a new consultin steel structure to sta ck thereby alleviatin ed.	ddress staff, pub g team will be rt to be erected g some of the
rogress	commercial compa and contractor safe engaged to carry or Ongoing constructi week of June 17. L current issues at sit	ctor/packer roll off of ty there are also rein with the design. on. Progress has be ooking at completio te. Challenges with	ombo, container, wa novations required to een impacted by cha n of dock and canop existing service con	Ilk-on dock, containe o access the compa llenges with the can y by mid to end of J ractor remain and o Service contractor's	or stand assembly, ctor, dock cover an opposite cover an opposite cover and opposite cove	controls for the hydra d lighting. Due to unit es (connection to the apprary bins to be loc	aulic system and ele- forseen circumstanc existing building). S atted by the new doc irrently being explore ompactors. Equipme	ctrical supply. To ac es, a new consultin siteel structure to sta ck thereby alleviatin ed.	ddress staff, pub g team will be int to be erected g some of the
sues	commercial compa and contractor safe engaged to carry of Ongoing constructive week of June 17. L current issues at sil Discrepancies in proprawings with addit to the existing build	ctor/packer roll off of ty there are also rein n with the design. on. Progress has be ooking at completio te. Challenges with	ombo, container, wa novations required to een impacted by cha n of dock and canop existing service con	Ilk-on dock, contained access the compaling of the compaling of the compaling of the contractor remain and of the contractors in the region of the contractors in the contractors in the region of the contractors in the region of the contractors in the contractors in the contractors in the contractors in the region of the contractors in the region of the contractors in the contractors in the region of the contractors in the contracto	or stand assembly, ctor, dock cover an opposite cover an opposite cover and opposite cove	controls for the hydra d lighting. Due to unless (connection to the apprary bins to be locue contractors) are cultick-up and drop off controls.	aulic system and ele- forseen circumstance existing building). Si ated by the new docurrently being explore ompactors. Equipmic currently upheld due	ctrical supply. To ac es, a new consultin iteel structure to sta sk thereby alleviatin ed.	ddress staff, put g team will be int to be erected g some of the indated Shop j in structural st
rogress sues inancial Actuals	commercial compa and contractor safe engaged to carry or Ongoing constructi week of June 17. Li current issues at sit Discrepancies in pr Drawings with addit to the existing build	ctor/packer roll off of ty there are also rei n with the design. on. Progress has be ooking at completio te. Challenges with opposed Vendor Sha tional alternatives a ling.	ombo, container, wa novations required to been impacted by chan on of dock and canop existing service con op Drawings and the nd other Service Co	Ilk-on dock, contains of access the compa llenges with the can y by mid to end of J ractor remain and o Service contractor's tractors in the region Projected	or stand assembly, ctor, dock cover an oppy connector plate only allowing the tenther options (services ideas on how to pen have been engaled).	controls for the hydra d lighting. Due to unl es (connection to the hiporary bins to be loc se contractors) are cu- ick-up and drop off of ged. Construction is	aulic system and ele- forseen circumstance existing building). Sizated by the new docurrently being explore currently upheld due	ctrical supply. To ac es, a new consultin steel structure to sta ck thereby alleviatin ed. ent Vendor have up to issues with tying	dress staff, pub g team will be ret to be erected g some of the redated Shop g in structural ste
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Project Name					KBH St	team Plant Retrofits	Project Budget:		\$2,520,46
Project Number						6322054			
Project Manager						Martin K.	RHD Contribution ((Y/N):	Υ
% Complete Status			On Time	On Durdmet	Issues	Start Date	Substantial Completion		on
Programming	Design	Const.	On time	On Budget	issues		Original	Rev.#	Revised
0%	100%	60%	Υ	Υ	N	Jan-22	Jun-23	2	Oct-24
Scope									
	emissions.	ne frequency drives,	, steam bypass, the	imai insulation, dem	and control ventilation	on and near pumps	to reduce utility cost	s and associated gri	eeiiilouse gas
	emissions.		·	•					
	emissions. A number of small	scope Energy Cons	·	•	nitiated and some co				
Progress	emissions.	scope Energy Cons	·	•					
Progress Issues	A number of small started or set to sta	scope Energy Cons	·	•					
Progress Issues	emissions. A number of small	scope Energy Cons	·	•					
Progress	A number of small started or set to sta	scope Energy Cons	·	•					
Progress	A number of small started or set to sta	scope Energy Cons	·	•					
Progress Issues Financial	emissions. A number of small started or set to sta	scope Energy Cons	·	(ECMs) have been i			nore substantial ECf	Ms are now awarded	I with construction

Project Name						ESH Generate	r Project Budget:		\$300,00
Project Number						632209	5		
Project Manager						Kevin 7	. RHD Contribution (Y/N):	Y
	% Complete Status		On Time	On Budget	Issues	Start Date	Su	ion	
Programming	Design	Const.	On time	On Budget	issues		Original	Rev.#	Revised
0%	100%	97%	Y	Υ	N	Apr-22	Jun-22	6	May-24
Scope									
	This remote site is a	arone to nower outs	ides and therefore i	requires installation of	of a generator Cons	idering the size of	he site and non-inten	sive services and e	equipment the
				bling and connection					rquipo.i., aro
									Aquipmoni, and
Progress	generator is sized a	t 35kW. The projec	t scope includes ca		n to the main buildin	g and an enclosure			iquipinoni, are
Progress	generator is sized a	t 35kW. The projec	t scope includes ca	bling and connection	n to the main buildin	g and an enclosure			Agriculture and a second
Progress Issues	generator is sized a	at 35kW. The project	ct scope includes ca	bling and connection	n to the main buildin	g and an enclosure			дартоп, ат
Progress	generator is sized a	at 35kW. The project	ct scope includes ca	bling and connection	n to the main buildin	g and an enclosure			дартоп, по
Progress	generator is sized a	at 35kW. The project	ct scope includes ca	bling and connection	n to the main buildin	g and an enclosure			дарион, по
Progress Issues	generator is sized a	at 35kW. The project	ct scope includes ca	bling and connection	n to the main buildin	g and an enclosure		Projected	Variance
Progress Issues Financial	generator is sized a Contractor is currer Manufacturing dela	at 35kW. The project	ct scope includes ca	abling and connection fuel lock device from ete new feed and tie	n to the main buildin	g and an enclosure	for the generator.		

Actuals	Actuals			Projected			lotal Actuals	Projected	variance
to March 31, 2024	YTD	FY24	FY25	FY26	FY27	FY28	+ Projected	Unspent	to Budget
\$ 226,822	\$ 231,455	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 308,689	\$ -	\$ (8,689)
Project Name				KBH Re	elocate & Replace S	Supply Fans 12 & 13	Project Budget:		\$3,258,150
Project Number						6323067			
Project Manager						Martin K.	RHD Contribution ((Y/N):	Υ
	% Complete Status	5	On Time	On Budget	Issues	Start Date	Sı	ubstantial Complet	ion
Programming	Design	Const.	On time	On Budget	issues		Original	Rev.#	Revised
0%	50%		Υ	N	N	Feb-23	Dec-24	1	Apr-25
Scope		<u> </u>	<u> </u>	·	<u> </u>			·	
Progress	down for periods of Detailed Design co	time. The configure	ation of the equipme	ent does not allow sa	afe access to replac	nreliable and frequer re filters and belts for confirmed that proje	plant service staff.		
Issues									•
	As per the Class C steps is being finali		ling value engineeri	ng) cost estimates, t	he project is curren	tly over budget due t	to site conditions. A	Decision Record on	proposed next
Financial									
Actuals	Actuals			Projected			Total Actuals	Projected	Variance
to March 31, 2024	YTD	FY24	FY25	FY26	FY27	FY28	+ Projected	Unspent	to Budget
\$ 158,593	\$ 166,959	\$ -	\$ 2,361,330	\$ 378,000	\$ -	S -	\$ 3,213,676	\$ 44,474	\$ -

Project Name				BDH M	ultizone Air Handlin	g Unit Replacement	Project Budget:		\$641,107
Project Number						6323068			
Project Manager						Maxwell M.	RHD Contribution ((Y/N):	Υ
	% Complete Status	1	On Time	On Budget	On Budget Issues Start Date Subs	Substantial Comp		ion	
Programming	Design	Const.	On time	On Budget	155005		Original	Rev.#	Revised
0%	30%	0%	Υ		N	Feb-23	Sep-24	1	Apr-25
Scope		•	•	•		•	•		
	frequent repairs, an improving comfort f	d corrosion on the	exterior of the unit is	causing leaks into	the building. The re				
Progress	improving connect i	or both patients and	i employees and wil	railow us to keep tri	e weather outside o	i trie building.			
	Design Developme	nt progress continue	es and an undated i	project budget estim	ate will be delivered	l in midlune			
Issues	Boolgii Borolopiilo	nt progresso commu	oo ana an apaatoa j	orojoot baagot oouiii	ato 11 20 do 0.00	in mid dano.			
100000	A project budget inc	crease will be requir	ed, the magnitude of	of the increase reque	est needs to be conf	firmed and a Decision	n Record will follow.		
	,		, g						
Financial									
Actuals	Actuals			Projected			Total Actuals	Projected	Variance
to March 31, 2024	YTD	FY24	FY25	FY26	FY27	FY28	+ Projected	Unspent	to Budget
\$ 44,563	\$ 60,504	\$ -	\$ 45,847	\$ 595,260	\$ -	\$ -	\$ 685,670	\$ -	\$ (44,563)

Project Name				CVL	Unilier and Cooling	Tower Replacement	Project Budget:		\$1,317,9
roject Number						6323069	DUD O	V(A1)	
roject Manager	0/ 0						RHD Contribution (,	Υ
D	% Complete Status		On Time	On Budget	Issues	Start Date		bstantial Comple	
Programming	Design	Const.	V			F.I. 00	Original	Rev.#	Revised
Scope	30%	0%	Ť	Y	N	Feb-23	Sep-24	1	Apr-25
соре	This series will see	th			1:- 2004 The	ent equipment is at ri	ials of fails as in assissa		. 4
					in 2001. The cur	ent equipment is at n	isk of failure in extrem	ne neat and needs	to be replaced v
	a reliable solution the	nat will provide the t	cooling requirement	s for this facility.					
rogress									
		s underway and wil	l be ready for reviev	v in June 2024. Initia	l budget figures sh	ow that the project is	currently under budg	get due to an overa	all reduction of
	cooling capacity.								
ssues									
	None.								
inancial									
Actuals	Actuals			Projected			Total Actuals	Projected	Variance
to March 31, 2024	YTD	FY24	FY25	FY26	FY27	FY28	+ Projected	Unspent	to Budget
\$ 43,985	\$ 58,478	\$ -	\$ 1,084,599	\$ 192,565	\$ -	\$ -	\$ 1,321,149	\$ -	\$ (3,2
		•		•	•	•		•	
Project Name					KI H I aboratory 9	Surface Replacement	Project Budget:		\$123,5
Project Number					INETT Ediboratory C	6323074	1 Tojout Buaget.		Ψ120,
Project Mumber							RHD Contribution (V/N1\-	Υ
rioject wanager	0/ 0		_	_					
B	% Complete Status		On Time	On Budget	Issues	Start Date		bstantial Comple	
Programming	Design	Const.		_			Original	Rev. #	Revised
		00/							
	10%	0%	Υ	Υ	N	Dec-22	Jun-24	2	Aug-24
Scope			Υ	Y			Jun-24		Aug-24
•			ers, and tops made	of plywood and lami			Jun-24		Aug-24
•			ers, and tops made	Y of plywood and lami			Jun-24		Aug-24
Scope Progress	To replace existing	millwork, lab counte	•		nate that do not me			2	Aug-24
•	To replace existing	millwork, lab counte	•		nate that do not me	eet standards.		2	Aug-24
Progress	To replace existing	millwork, lab counte	•		nate that do not me	eet standards.		2	Aug-24
Progress	To replace existing Preferred counter c	millwork, lab counte	•		nate that do not me	eet standards.		2	Aug-24
Progress	To replace existing Preferred counter c	millwork, lab counte	•		nate that do not me	eet standards.		2	Aug-24
Progress Issues Financial	To replace existing Preferred counter of None.	millwork, lab counte	•	sor. Site review done	nate that do not me	eet standards.	layouts and product	2 research.	
Progress Issues Financial Actuals	To replace existing Preferred counter of None. Actuals	millwork, lab counte	ned by Lab supervis	sor. Site review done	nate that do not me	work to finalize design	layouts and product	2 research.	Variance
Progress Ssues Financial Actuals to March 31, 2024	To replace existing Preferred counter of None. Actuals YTD	millwork, lab counter	ned by Lab supervis	Projected FY26	nate that do not me	vert standards. vork to finalize design	Total Actuals + Projected	2 research. Projected Unspent	Variance to Budget
Progress Issues Financial Actuals	To replace existing Preferred counter of None. Actuals	millwork, lab counter	ned by Lab supervis	sor. Site review done	nate that do not me	work to finalize design	layouts and product	2 research.	Variance
Progress Issues Financial Actuals to March 31, 2024	To replace existing Preferred counter of None. Actuals YTD	millwork, lab counter	ned by Lab supervis	Projected FY26	in May. Ongoing v	vork to finalize design	Total Actuals + Projected \$ 123,523	2 research. Projected Unspent	Variance to Budget
Progress Issues Financial Actuals to March 31, 2024 \$ Project Name	To replace existing Preferred counter of None. Actuals YTD	millwork, lab counter	ned by Lab supervis	Projected FY26	in May. Ongoing v	eet standards. vork to finalize design FY28 \$ - Meal Delivery System	Total Actuals + Projected \$ 123,523	2 research. Projected Unspent	Variance to Budget
Progress Issues Financial Actuals to March 31, 2024 \$ Project Name Project Number	To replace existing Preferred counter of None. Actuals YTD	millwork, lab counter	ned by Lab supervis	Projected FY26	in May. Ongoing v	vork to finalize design FY28 FY28 - Meal Delivery System 6324038	Total Actuals + Projected \$ 123,523 Project Budget:	2 research. Projected Unspent \$ -	Variance to Budget \$ (2
Progress Issues Financial Actuals to March 31, 2024 \$ Project Name	To replace existing Preferred counter of None. Actuals YTD	millwork, lab counter	ned by Lab supervis	Projected FY26	in May. Ongoing v	vork to finalize design FY28 FY28 - Meal Delivery System 6324038	Total Actuals + Projected \$ 123,523	2 research. Projected Unspent \$ -	Variance to Budget
Progress Issues Financial Actuals to March 31, 2024 \$ Project Name Project Number	To replace existing Preferred counter of None. Actuals YTD	millwork, lab counter configuration confirm FY24 -	red by Lab supervis	Projected FY26	nate that do not me in May. Ongoing v	vork to finalize design FY28 FY28 - Meal Delivery System 6324038	Total Actuals + Projected \$ 123,523 Project Budget: RHD Contribution (\)	2 research. Projected Unspent \$ -	Variance to Budget \$ (2
Progress Issues Financial Actuals to March 31, 2024 \$ Project Name Project Number	To replace existing Preferred counter of None. Actuals YTD \$ 23	millwork, lab counter configuration confirm FY24 -	ned by Lab supervis	Projected FY26	in May. Ongoing v	vork to finalize design FY28 FY28 - Meal Delivery System 6324038 Rachel Q.	Total Actuals + Projected \$ 123,523 Project Budget: RHD Contribution (\)	2 Projected Unspent \$ -	Variance to Budget \$ (2
Progress Issues Financial Actuals to March 31, 2024 \$ Project Name Project Number Project Manager	To replace existing Preferred counter of None. Actuals YTD \$ 23	rillwork, lab counter configuration confirm	red by Lab supervis	Projected FY26	nate that do not me in May. Ongoing v	vork to finalize design FY28 FY28 - Meal Delivery System 6324038 Rachel Q.	Total Actuals + Projected \$ 123,523 Project Budget: RHD Contribution ()	2 Projected Unspent \$ - Y/N):	Variance to Budget \$ (2
Progress Issues Financial Actuals to March 31, 2024 \$ Project Name Project Number Project Manager Programming 0%	To replace existing Preferred counter of None. Actuals YTD \$ 23 % Complete Status Design	rillwork, lab counter configuration confirm	red by Lab supervis	Projected FY26	in May. Ongoing v	FY28 \$ Meal Delivery System 6324038 Rachel Q. Start Date	Total Actuals + Projected \$ 123,523 Project Budget: RHD Contribution (\) Sul	Projected Unspent \$ -	Variance to Budget \$ (2 \$917,0 Y tion Revised
Progress Issues Financial Actuals to March 31, 2024 \$	To replace existing Preferred counter of None. Actuals YTD \$ 23 % Complete Status Design 100%	FY24 \$ - Const. 97%	FY25 FY25 On Time	Projected FY26 On Budget	in May. Ongoing v	FY28 \$ - Meal Delivery System 6324038 Rachel Q. Start Date Apr-23	Total Actuals + Projected \$ 123,523 Project Budget: RHD Contribution (\) Su Original Jan-24	Projected Unspent \$ Y/N): bstantial Comple Rev. # 3	Variance to Budget \$ (\$917,0 Y tion Revised Jan-24
Progress Issues Financial Actuals to March 31, 2024 \$	To replace existing Preferred counter of None. Actuals YTD \$ 23 % Complete Status Design 100% IH is implementing	FY24 S Const. 97% the Patient Choice	FY25 FY25 On Time Y Meal Service model	Projected FY26 On Budget At this facility. This r	FY27 S Issues N Issues Issues N Issues N Issues Iss	FY28 FY28 S Meal Delivery System 6324038 Rachel Q. Start Date Apr-23 better reflects client c	Total Actuals + Projected \$ 123,523 Project Budget: RHD Contribution (\) Original Jan-24 entered care by givin	Projected Unspent \$ - Y/N): bstantial Comple Rev. # 3	Variance to Budget \$ (\$917,0 Y tion Revised Jan-24 e while meeting
Progress SSUES Financial Actuals to March 31, 2024 \$ Project Name Project Number Project Manager Programming 0%	Preferred counter of None. Actuals YTD \$ 23 % Complete Status Design 100% IH is implementing their clinical nutritio	FY24 \$ - Const. 97% the Patient Choice Inal needs. Proper in	FY25 FY25 On Time Y Meal Service model utrition is an import	Projected FY26 \$ On Budget Y Lat this facility. This r ant part of recovery	FY27 S Issues N Issues Issues N Issues N Issues Iss	FY28 \$ - Meal Delivery System 6324038 Rachel Q. Start Date Apr-23	Total Actuals + Projected \$ 123,523 Project Budget: RHD Contribution (\) Original Jan-24 entered care by givin	Projected Unspent \$ - Y/N): bstantial Comple Rev. # 3	Variance to Budget \$ (: \$917,0 Y tion Revised Jan-24 e while meeting
Progress Issues Financial Actuals to March 31, 2024 \$ Project Name Project Number Project Manager Programming 0% Scope	Preferred counter of None. Actuals YTD \$ 23 % Complete Status Design 100% IH is implementing their clinical nutritio	FY24 S Const. 97% the Patient Choice	FY25 FY25 On Time Y Meal Service model utrition is an import	Projected FY26 \$ On Budget Y Lat this facility. This r ant part of recovery	FY27 S Issues N Issues Issues N Issues N Issues Iss	FY28 FY28 S Meal Delivery System 6324038 Rachel Q. Start Date Apr-23 better reflects client c	Total Actuals + Projected \$ 123,523 Project Budget: RHD Contribution (\) Original Jan-24 entered care by givin	Projected Unspent \$ - Y/N): bstantial Comple Rev. # 3	Variance to Budget \$ (: \$917,0 Y tion Revised Jan-24 e while meeting
Progress Issues Financial Actuals to March 31, 2024 \$ Project Name Project Number Project Manager Programming	Preferred counter of None. Actuals YTD \$ 23 % Complete Status Design 100% IH is implementing their clinical nutritio renovations and as	FY24 \$ - Const. 97% the Patient Choice I nal needs. Proper risociated digital hea	FY25 FY25 On Time Y Meal Service model tith hardware and so	Projected FY26 S On Budget Y at this facility. This r	Issues Issues N N N N N N N N N N N N N	ret standards. work to finalize design FY28 \$ - Meal Delivery System 6324038 Rachel Q. Start Date Apr-23 better reflects client c This project will repla	Total Actuals + Projected \$ 123,523 Project Budget: RHD Contribution (\) Su Original Jan-24 entered care by givince rethermalization e	Projected Unspent \$ Y/N): bstantial Comple Rev. # 3 ng patients a choice equipment from 20	Variance to Budget \$ () \$917,0 Y tion Revised Jan-24 e while meeting 03 and includes
Progress Issues Financial Actuals to March 31, 2024 \$ Project Name Project Number Project Manager Programming 0% Scope	Preferred counter of None. Actuals YTD \$ 23 % Complete Status Design 100% IH is implementing their clinical nutritio renovations and as	FY24 FY24 Const. 97% the Patient Choice in all needs. Proper in sociated digital head obstantially complete obstantially complete obstantially complete.	FY25 FY25 On Time Y Meal Service model utrition is an import lith hardware and so on January 31st, 2	Projected FY26 S On Budget Y at this facility. This r	Issues Issues N N N N N N N N N N N N N	FY28 FY28 S Meal Delivery System 6324038 Rachel Q. Start Date Apr-23 better reflects client c	Total Actuals + Projected \$ 123,523 Project Budget: RHD Contribution (\) Su Original Jan-24 entered care by givince rethermalization e	Projected Unspent \$ Y/N): bstantial Comple Rev. # 3 ng patients a choice equipment from 20	\$917,0 Y tion Revised Jan-24 e while meeting 03 and includes
Progress ssues Financial Actuals to March 31, 2024 \$ Project Name Project Number Project Manager Programming 0% Scope	Preferred counter of None. Actuals YTD \$ 23 % Complete Status Design 100% IH is implementing their clinical nutritio renovations and as The project was sui storage area and p	FY24 FY24 Const. 97% the Patient Choice Inal needs. Proper in sociated digital head postantially complete antry in the long ter	FY25 FY25 On Time Y Meal Service model utrition is an import lith hardware and so on January 31st, 2 m care facility.	Projected FY26 S On Budget Y at this facility. This r	Issues Issues N N N N N N N N N N N N N	ret standards. work to finalize design FY28 \$ - Meal Delivery System 6324038 Rachel Q. Start Date Apr-23 better reflects client c This project will repla	Total Actuals + Projected \$ 123,523 Project Budget: RHD Contribution (\) Su Original Jan-24 entered care by givince rethermalization e	Projected Unspent \$ Y/N): bstantial Comple Rev. # 3 ng patients a choice equipment from 20	\$917,0 Y tion Revised Jan-24 e while meeting 03 and includes
Progress SSUES SSUES Financial Actuals to March 31, 2024 \$ Project Name Project Number Project Manager Programming 0% Scope	Preferred counter of None. Actuals YTD \$ 23 % Complete Status Design 100% IH is implementing their clinical nutritio renovations and as	FY24 FY24 Const. 97% the Patient Choice Inal needs. Proper in sociated digital head postantially complete antry in the long ter	FY25 FY25 On Time Y Meal Service model utrition is an import lith hardware and so on January 31st, 2 m care facility.	Projected FY26 S On Budget Y at this facility. This r	Issues Issues N N N N N N N N N N N N N	ret standards. work to finalize design FY28 \$ - Meal Delivery System 6324038 Rachel Q. Start Date Apr-23 better reflects client c This project will repla	Total Actuals + Projected \$ 123,523 Project Budget: RHD Contribution (\) Su Original Jan-24 entered care by givince rethermalization e	Projected Unspent \$ Y/N): bstantial Comple Rev. # 3 ng patients a choice equipment from 20	\$917,0 Y tion Revised Jan-24 e while meeting 03 and includes
Progress SSUES SSUES Financial Actuals to March 31, 2024 \$ Project Name Project Number Project Manager Programming 0% Scope	Preferred counter of None. Actuals YTD \$ 23 % Complete Status Design 100% IH is implementing their clinical nutritio renovations and as The project was sulstorage area and p Ongoing work to put	FY24 FY24 Const. 97% the Patient Choice Inal needs. Proper in sociated digital head postantially complete antry in the long ter	FY25 FY25 On Time Y Meal Service model utrition is an import lith hardware and so on January 31st, 2 m care facility.	Projected FY26 S On Budget Y at this facility. This r	Issues Issues N N N N N N N N N N N N N	ret standards. work to finalize design FY28 \$ - Meal Delivery System 6324038 Rachel Q. Start Date Apr-23 better reflects client c This project will repla	Total Actuals + Projected \$ 123,523 Project Budget: RHD Contribution (\) Su Original Jan-24 entered care by givince rethermalization e	Projected Unspent \$ Y/N): bstantial Comple Rev. # 3 ng patients a choice equipment from 20	\$917,0 Y tion Revised Jan-24 e while meeting 03 and includes
Financial Actuals to March 31, 2024 \$ Project Name Project Number Project Manager Programming 0% Scope	Preferred counter of None. Actuals YTD \$ 23 % Complete Status Design 100% IH is implementing their clinical nutritio renovations and as The project was sui storage area and p	FY24 FY24 Const. 97% the Patient Choice Inal needs. Proper in sociated digital head postantially complete antry in the long ter	FY25 FY25 On Time Y Meal Service model utrition is an import lith hardware and so on January 31st, 2 m care facility.	Projected FY26 S On Budget Y I at this facility. This r ant part of recovery oftware.	Issues Issues N N N N N N N N N N N N N	ret standards. work to finalize design FY28 \$ - Meal Delivery System 6324038 Rachel Q. Start Date Apr-23 better reflects client c This project will repla	Total Actuals + Projected \$ 123,523 Project Budget: RHD Contribution (\) Su Original Jan-24 entered care by givince rethermalization e	Projected Unspent \$ Y/N): bstantial Comple Rev. # 3 ng patients a choice equipment from 20	\$917,0 Y tion Revised Jan-24 e while meeting 03 and includes
Progress SSUES SSUES Financial Actuals to March 31, 2024 \$ Project Name Project Number Project Manager Programming 0% Scope	Preferred counter of None. Actuals YTD \$ 23 % Complete Status Design 100% IH is implementing their clinical nutritio renovations and as The project was sulstorage area and p Ongoing work to put	FY24 FY24 Const. 97% the Patient Choice Inal needs. Proper in sociated digital head postantially complete antry in the long ter	FY25 FY25 On Time Y Meal Service model utrition is an import lith hardware and so on January 31st, 2 m care facility.	Projected FY26 S On Budget Y I at this facility. This r ant part of recovery oftware.	Issues Issues N N N N N N N N N N N N N	ret standards. work to finalize design FY28 \$ - Meal Delivery System 6324038 Rachel Q. Start Date Apr-23 better reflects client c This project will repla	Total Actuals + Projected \$ 123,523 Project Budget: RHD Contribution (\) Su Original Jan-24 entered care by givince rethermalization e	Projected Unspent \$ Y/N): bstantial Comple Rev. # 3 ng patients a choice equipment from 20	Variance to Budget \$ () \$917,0 Y tion Revised Jan-24 e while meeting 03 and includes
Progress ssues Financial Actuals to March 31, 2024 \$	Preferred counter of None. Actuals YTD \$ 23 % Complete Status Design 100% IH is implementing their clinical nutritio renovations and as The project was sulstorage area and p Ongoing work to put	FY24 FY24 Const. 97% the Patient Choice Inal needs. Proper in sociated digital head postantially complete antry in the long ter	FY25 FY25 On Time Y Meal Service model utrition is an import lith hardware and so on January 31st, 2 m care facility.	Projected FY26 S On Budget Y I at this facility. This r ant part of recovery oftware.	Issues Issues N N N N N N N N N N N N N	ret standards. work to finalize design FY28 \$ - Meal Delivery System 6324038 Rachel Q. Start Date Apr-23 better reflects client c This project will repla	Total Actuals + Projected \$ 123,523 Project Budget: RHD Contribution (\) Su Original Jan-24 entered care by givince rethermalization e	Projected Unspent \$ - Y/N): bstantial Comple Rev. # 3 ng patients a choice equipment from 20	Variance to Budget \$ () \$917,0 Y tion Revised Jan-24 e while meeting 03 and includes
Progress Issues Financial Actuals to March 31, 2024 \$ Project Name Project Number Project Manager Programming 0% Scope	Preferred counter of None. Actuals YTD \$ 23 % Complete Status Design 100% IH is implementing their clinical nutritio renovations and as The project was sulstorage area and p Ongoing work to put	FY24 FY24 Const. 97% the Patient Choice Inal needs. Proper in sociated digital head postantially complete antry in the long ter	FY25 FY25 On Time Y Meal Service model utrition is an import lith hardware and so on January 31st, 2 m care facility.	Projected FY26 S On Budget Y I at this facility. This r ant part of recovery oftware.	Issues Issues N N N N N N N N N N N N N	ret standards. work to finalize design FY28 \$ - Meal Delivery System 6324038 Rachel Q. Start Date Apr-23 better reflects client c This project will repla	Total Actuals + Projected \$ 123,523 Project Budget: RHD Contribution (\) Su Original Jan-24 entered care by givince rethermalization e	Projected Unspent \$ - Y/N): bstantial Comple Rev. # 3 ng patients a choice equipment from 20	Variance to Budget \$ (3) \$917,0 Y tion Revised Jan-24 e while meeting 03 and includes

Project Name						KLH Medstation	Project Budget:		\$504,0
Project Number						6324039			
roject Manager							RHD Contribution (Y	,	Υ
	% Complete Status		On Time	On Budget	Issues	Start Date		ostantial Complet	
Programming	Design	Const.	0	on Buager			Original	Rev.#	Revised
		0%	Υ	Υ	N	Apr-23	Aug-24	1	Jun-24
cope	1								
				ere first introduced in I					
				This purchase of ADC				eplaces manual dru	ig distribution us
	within a number of o	departments at thi	is site. These purcha	ses include renovatio	ns and associated	digital health hardwa	are and software.		
rogress	1								
	Renovations are co	mplete as of Marc	ch 2024. Equipment	was delivery May 6, 2	024.				
ssues	1								
	Concern that the bu	udget will be insuff	icient given the rece	nt price increases fror	n the Vendor.				
inancial									
Actuals	Actuals	F)/0.4	FYOE	Projected	F1/07	FYCC	Total Actuals	Projected	Variance
to March 31, 2024	YTD	FY24	FY25	FY26	FY27	FY28	+ Projected	Unspent	to Budget
ρ -	\$ 4,903	\$ -	\$ -	-	\$ -	\$ -	\$ 483,799	\$ 19,754	\$ 44
							I		
Project Name				NEL LTC and	Community Clinic	Tenant Improvement	Project Budget:		\$11,500,0
Project Number						6324040	DUD O	(A.I)	
Project Manager			1	1			RHD Contribution (Y	,	Y
B	% Complete Status		On Time	On Budget	Issues	Start Date		ostantial Complet	
Programming	Design	Const.	V	V	N	A 00	Original	Rev.#	Revised
Всоре			Y	Υ	N	Apr-23		0	
	optimal air flow, sma	and facility-based of aller neighbourhood	care, including all ou ods and separate su	ces to the Nelson com r learnings from COVI pport areas to avoid r	munity. The lease D. This is capture	hold investment is pa d in the LTC area with	art of our plan to ensu	reased HVAC capa	cts best practice acity to ensure
Prograce	optimal air flow, sma	and facility-based of aller neighbourhood	care, including all ou	r learnings from COVI pport areas to avoid r	munity. The lease D. This is capture	hold investment is pa d in the LTC area with	art of our plan to ensu	re the design refle reased HVAC capa	cts best practice acity to ensure
Progress	optimal air flow, sma The Long-term Care	and facility-based of aller neighbourhood	care, including all ou ods and separate su	r learnings from COVI pport areas to avoid r	munity. The lease D. This is capture	hold investment is pa d in the LTC area with	art of our plan to ensu	re the design refle reased HVAC capa	cts best practice acity to ensure
_	optimal air flow, sma	and facility-based of aller neighbourhood	care, including all ou ods and separate su	r learnings from COVI pport areas to avoid r	munity. The lease D. This is capture	hold investment is pa d in the LTC area with	art of our plan to ensu	re the design refle reased HVAC capa	cts best practice acity to ensure
_	optimal air flow, sma The Long-term Care	and facility-based of aller neighbourhood	care, including all ou ods and separate su	r learnings from COVI pport areas to avoid r	munity. The lease D. This is capture	hold investment is pa d in the LTC area with	art of our plan to ensu	re the design refle reased HVAC capa	cts best practice acity to ensure
_	optimal air flow, sma The Long-term Card None.	and facility-based of aller neighbourhood	care, including all ou ods and separate su	r learnings from COVI pport areas to avoid r	munity. The lease D. This is capture	hold investment is pa d in the LTC area with	art of our plan to ensu	re the design refle reased HVAC capa	cts best practice acity to ensure
ssues	optimal air flow, sma The Long-term Card None.	and facility-based of aller neighbourhood	care, including all ou ods and separate su	r learnings from COVI pport areas to avoid r	munity. The lease D. This is capture	hold investment is pa d in the LTC area with	art of our plan to ensu	re the design refle reased HVAC capa	cts best practice acity to ensure
ssues	optimal air flow, sma The Long-term Card	and facility-based of aller neighbourhood	care, including all ou ods and separate su	r learnings from COVI pport areas to avoid r	munity. The lease D. This is capture	hold investment is pa d in the LTC area with	art of our plan to ensu	re the design refle reased HVAC capa	cts best practice acity to ensure
ssues	optimal air flow, sma The Long-term Card None.	and facility-based of aller neighbourhood	care, including all ou ods and separate su	r learnings from COVI pport areas to avoid r iary 2025.	munity. The lease D. This is capture	hold investment is pa d in the LTC area with	art of our plan to ensu all single rooms, inc r separation of neight	rre the design reflereased HVAC cap, pourhoods in the ca	cts best practice acity to ensure use of an outbrea
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Project Name					KBH Foundation	n Office Renovation	Project Budget:		\$495,000
Project Number						6324059			
Project Manager						Ev K.	RHD Contribution (Y/N):	Υ
	% Complete Status		On Time On Budget	On Budget	Issues	Start Date	Su	ıbstantial Completi	on
Programming	Design	Const.	On Time	On Budget	issues		Original	Rev.#	Revised
	100%	98%	Υ	Υ	N	Jun-23	Jun-24	0	
Scope									
	Renovation and ex	pansion of the Hosp	ital Foundation offic	e at the Kootenay B	loundary Regional H	lospital.			
Progress									
	Contractor has a co				ed completion of def	ficiencies is June 20	24. Furniture & wind	low blind installation	is complete KRH
ļi	Foundation moved	into new renovated	space and is operat	lional.					is complete. REFT
Issues	Foundation moved	into new renovated	space and is operat	lional.					is complete. RDIT
Issues	None.	into new renovated	space and is operat	iionai.					is complete. NBT
Issues		into new renovated	space and is operat	iionai.					is complete. RBH
Issues Financial		into new renovated	space and is operat	ionai.					is complete. North
		into new renovated	space and is operat	Projected			Total Actuals	Projected	Variance
Financial	None.	FY24	space and is operat		FY27	FY28	Total Actuals + Projected	Projected Unspent	

Project Name						KBH MRI	Project Budget:		\$35,864,000
Project Number						6324101	, ,		
Project Manager						Ev K.	RHD Contribution (Y/N):	Υ
	% Complete Status		On Time	On Budget	Issues	Start Date	Substantial Completion		on
Programming	Design	Const.	On Time	On Budget	issues		Original	Rev.#	Revised
	0%	0%	Υ	Υ	N	May-24	Mar-28	0	
Scope									
							RI equipment and sums in the Kootenay		
Progress	1								
	The Project Scope 2024.	of Work approval is	nearing completion	. The procurement p	reparation is underv	way for Managing C	onsultant RFP with a	anticipated release t	
									ie end of June
Issues	•								le end of Julie
Issues	None.								le end of June
	None.								le end of June
	None.								ie end of Julie
	None. Actuals			Projected			Total Actuals	Projected	Variance
Financial		FY24	FY25	Projected FY26	FY27	FY28	Total Actuals + Projected	Projected Unspent	

Project Name					CDH	H Fire Alarm System	Project Budget:		\$1,375,25	
Project Number						6325000				
Project Manager						Martin K.	RHD Contribution (Y/N):	Υ	
	% Complete Statu	IS	On Time	On Budget	t Issues	Start Date	Su	Substantial Completion		
Programming	Design	Const.	On time	On Budget	issues		Original	Rev.#	Revised	
0%	0%	0%	Υ	Υ	N	Apr-24	Sep-25	0		
Scope										
		n is over 20 years old egrated into the build			ne system is no ion	ger supported, and	not reliable. This pro	ject will replace the	entire system with	
Progress	one that is fully int	egrated into the build	ling security system.				not reliable. Triis pro	ject will replace the	entire system with	
Progress	one that is fully int		ling security system.				not reliable. This pro	ject will replace the	entire system with	
Progress Issues	one that is fully int	egrated into the build	ling security system.				not reliable. This pro	ject will replace the	entire system with	
Progress	one that is fully int	egrated into the build	ling security system.				TOL TELIABLE. THIS PTO	ject will replace the	enure system with	
Progress	one that is fully int	egrated into the build	ling security system.				постепавіе. Піїѕ ріо	ject will replace the	enure system with	
Progress	one that is fully int	egrated into the build	ling security system.				Total Actuals	Projected	Variance	
Progress Issues Financial	one that is fully int Scope of Work sig None.	egrated into the build	ling security system.	est for Proposal will					,	

				r	KBH Steam Sterilizer	Project Budget:		\$129,69	
					6325001				
Project Manager					Martin K.		RHD Contribution (Y/N):		
% Complete Status		On Time	On Budnet	loouee	Start Date Substantial Con			pletion	
Design	Const.	On Time	On Budget	issues		Original	Rev.#	Revised	
0%	0%	Υ	Υ	N	Apr-24	Nov-24			
am sterilizers ar	e an essential part	of the sterilization pr	ocess performed by	the Medical Device	e Reprocessing (MD	R) department. Thes	se units are designe	d for fast, efficien	
ninal sterilization	n of heat- and mois	ture-stable materials	. This purchase will	replace a 2003 mo	del.	, .	ŭ		
ipment Team is	currently confirmin	g Budget and Mode	l/Make of Sterilizer.						
uipment Team is	currently confirming	g Budget and Mode	l/Make of Sterilizer.						
•	currently confirming	ng Budget and Mode	l/Make of Sterilizer.						
uipment Team is ne.	currently confirming	ng Budget and Mode	l/Make of Sterilizer.						
•	currently confirmin	ng Budget and Mode	l/Make of Sterilizer.						
•	currently confirmin	ng Budget and Mode	l/Make of Sterilizer.			Total Actuals	Projected	Variance	
ne.	currently confirmin	g Budget and Mode		FY27	FY28	Total Actuals + Projected	Projected Unspent	Variance to Budget	
16	Design 0% am sterilizers ar	Design Const. 0% 0% am sterilizers are an essential part	Design Const. On Time 0% 0% Y am sterilizers are an essential part of the sterilization process. The sterilization process.	Design Const. On Time On Budget 0% 0% Y am sterilizers are an essential part of the sterilization process performed by	Design Const. On Time On Budget Issues 0% 0% Y Y N am sterilizers are an essential part of the sterilization process performed by the Medical Device	Design Const. On Time On Budget Issues 0% 0% Y Y N Apr-24	Design Const. On Time On Budget Issues Original 0% 0% Y Y N Apr-24 Nov-24 am sterilizers are an essential part of the sterilization process performed by the Medical Device Reprocessing (MDR) department. These	Design Const. On Time On Budget Issues Original Rev. # 0% 0% Y Y N Apr-24 Nov-24 am sterilizers are an essential part of the sterilization process performed by the Medical Device Reprocessing (MDR) department. These units are designed.	

Project Name					KLH Building	Voltage Regulation	Project Budget:		\$562,20°
Project Number					_	6325007			
Project Manager						RHD Contribution (Y/N):		Υ	
	% Complete Statu	is	On Time	On Budget	Issues	Start Date	Sı	ubstantial Complet	ion
Programming	Design	Const.	On Time On Budget Issues			Original	Rev.#	Revised	
0%	0%	0%	Υ	Y Y N Apr-24				0	
Scope									
Progress	I								
	Scope of Work an	d Project Budget Mil	estone documents	completed. Request	For Proposals docu	mentation is current	ly being worked on a	and tentatively to be	issued end of July
ssues									
	None.								
Financial									
Actuals	Actuals			Projected			Total Actuals	Projected	Variance
to March 31, 2024	YTD	FY24	FY25	FY26	FY27	FY28	+ Projected	Unspent	to Budget
\$ -	\$ -	\$ -	\$ 233,057	\$ -	\$ -	\$ -	\$ 337,040	\$ 225,161	\$ -

West Kootenay-Boundary Regional Hospital District **Financial Statements** For the year ended December 31, 2022

West Kootenay-Boundary Regional Hospital District Financial Statements For the year ended December 31, 2022

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Management's Responsibility for Financial Reporting

The accompanying financial statements of the West Kootenay-Boundary Regional Hospital District (the "Hospital District") are the responsibility of management and have been approved by the Board of Directors of the Hospital District.

The financial statements have been prepared by management in accordance with Canadian public sector accounting standards. Financial statements are not precise since they include certain amounts based on estimates and judgments. When alternative accounting methods exist, management has chosen those it deems most appropriate in the circumstances, in order to ensure that the financial statements are presented fairly, in all material respects.

The West Kootenay-Boundary Regional Hospital District maintains systems of internal accounting and administrative controls of reasonable quality, consistent with reasonable cost. Such systems are designed to provide reasonable assurance that the financial information is relevant, reliable and accurate and the Hospital District's assets are appropriately accounted for and adequately safeguarded.

The West Kootenay-Boundary Regional Hospital District is responsible for ensuring that management fulfills its responsibilities for financial reporting and is ultimately responsible for reviewing and approving the financial statements.

The Board of Directors review the Hospital District's financial statements and recommend their approval. The Board of Directors meet periodically with management, as well as the external auditors, to discuss internal controls over the financial reporting issues, to satisfy themselves that each party is properly discharging their responsibilities, and to review the annual report, the financial statements and the external auditor's report. The Board of Directors take this information into consideration when approving the financial statements for issuance to the taxpayers. The Board of Directors also appoint the engagement of the external auditors.

The financial statements have been audited by BDO Canada LLP in accordance with Canadian generally accepted auditing standards. BDO Canada LLP has full access to the Board and management.

Chief F	inancia	al Officer	

Independent Auditor's Report

To the Members of the Board of Directors of the West Kootenay-Boundary Regional Hospital District

Opinion

We have audited the financial statements of the West Kootenay-Boundary Regional Hospital District (the "Hospital District"), which comprise the statement of financial position as at December 31, 2022, and the statement of change in net financial assets (debt), statement of operations, and statement of cash flows for the year then ended, and notes to the financial statements, including a summary of significant accounting policies.

In our opinion, the accompanying financial statements present fairly, in all material respects, the financial position of the Hospital District as at December 31, 2022, and its results of operations, changes in net financial assets, and its cash flows for the year then ended in accordance with Canadian public sector accounting standards.

Basis for Opinion

We conducted our audit in accordance with Canadian generally accepted auditing standards. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are independent of the Regional District in accordance with the ethical requirements that are relevant to our audit of the financial statements in Canada, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Other Matter

The financial statements for the year ended December 31, 2021 were audited by another auditor who expressed an unqualified opinion on those financial statements on September 28, 2022.

Responsibilities of Management and Those Charged with Governance for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with Canadian public sector accounting standards, and for such internal control as management determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is responsible for assessing the Hospital District's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless management either intends to liquidate the Regional District or to cease operations, or has no realistic alternative but to do so.

Those charged with governance are responsible for overseeing the Hospital District's financial reporting process.

Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with Canadian generally accepted auditing standards will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

As part of an audit in accordance with Canadian generally accepted auditing standards, we exercise professional judgment and maintain professional skepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Hospital District's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by management.
- Conclude on the appropriateness of management's use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the Hospital District's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the Regional District to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation.

We communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

Chartered Professional Accountants

Kamloops, British Columbia Report Date

West Kootenay-Boundary Regional Hospital District Statement of Financial Position

As at December 31	2022 202	21
Financial assets		
Cash (Note 2)	\$2,974,392 \$1,953,75	8
Temporary investments (Note 2)	6,677,653 9,763,25	
Accounts receivable	36,042 14,09	4
	9,688,087 11, 73 1,10	2
Liabilities		
Accounts payable and accrued liabilities	531,412 86,52	25
Net financial assets	9,156,675 11,644,57	<u> 17</u>
Accumulated surplus (Note 4)	\$9,156,675 \$11,644,57	77
	97.	

West Kootenay-Boundary Regional Hospital District Statement of Operations

For the year ended December 31	Financial Plan	2022	2021
	(Note 5)		4
Revenue Tax Levy Grants in lieu of taxes Investment income	\$4,827,029 8,500 35,000	\$4,827,032 11,202 171,584	\$4,826,383 10,933 44,098
	4,870,529	5,009,818	4,881,414
Expenses Grants to Interior Health Authority Operating expenses	18,734,582 110,479	7,374,043 123,677	7,531,205 127,356
	18,845,061	7,497,720	7,658,561
Annual deficit	(13,974,532)	(2,487,902)	(2,777,147)
Accumulated surplus, beginning of year	11,644,577	11,644,577	14,421,724
Accumulated surplus (deficit), end of year	\$(2,329,955)	\$9,156,675	\$11,644,577

West Kootenay-Boundary Regional Hospital District Statement of Change in Net Financial Assets (Debt)

For the year ended December 31	Financial Plan	2022	2021
Annual deficit	(13,974,532)	\$(2,487,902)	\$(2,777,147)
Net financial assets, beginning of year	11,644,577	11,644,577	14,421,724
Net financial assets (debt), end of year	\$(2,329,955)	\$9,156,675	\$11,644,577

West Kootenay-Boundary Regional Hospital District Statement of Cash Flows

For the year ended December 31	2022	2021
Operating transactions Annual deficit	\$ (2,487,902)	\$(2,777,147)
Changes in non-cash operating balances Accounts receivable	(21,948)	(27,734)
Accounts payable and accrued liabilities	444,887	77,726
Investing transaction	(2,064,963)	(2,727,155)
Proceeds on disposition of portfolio investments	3,085,597	
Not increase (dominate) in each and each accident	1 000 (24	(2.727.455)
Net increase (decrease) in cash and cash equivalents	1,020,634	(2,727,155)
Cash and cash equivalents, beginning of year	1,953,758	4,680,913
Cash and cash equivalents, end of year (note 2)	\$ 2,974,392	\$1,953,758

December 31, 2022

1. Significant Accounting Policies

Government Reporting Entity

West Kootenay-Boundary Regional Hospital District (the "Hospital District") was incorporated effective January 1, 1996 under Letters Patent issued December 14, 1995 by the Lieutenant Governor in Council for the Province of British Columbia. Its principal business activity is to provide the West Kootenay-Boundary Region's acute and extended health care facilities with funding for capital project construction and the purchase of equipment. The Hospital District is governed by those directors of Regional District of Kootenay Boundary and Regional District of Central Kootenay whose areas fall within the Hospital District's geographic boundaries.

Basis of Presentation

The financial statements of the Hospital District are prepared by management in accordance with Canadian Public Sector Accounting Standards ("PSAS").

These standards require that expenses be presented in the Statement of Operations according to functional area, with the object or type of expense disclosed in the notes to the financial statements. Given that the Hospital District has only a single functional area, the Statement of Operations has instead presented the expenses by object and no disclosure of operating segment information has been made.

Basis of Accounting

The Hospital District follows the accrual method of accounting for revenues and expenses. Revenues are recognized in the period when they are earned, can be measured and there is reasonable assurance that they will be collected. Grants in lieu of taxes are recognized when they are received.

Expenses are recognized as they are incurred and become measurable as a result of receipt of goods or services and/or the creation of a legal obligation to pay.

Portfolio Investments

Portfolio Investment are recorded at cost unless there has been a decline in the market value which is other than temporary in nature in which case the investments are written down to market value.

Tax Requisitions

Each municipality and electoral area within the Hospital District is requisitioned for their portion of the Hospital District service. These funds are then levied by the municipalities and the Province (for electoral areas) to individual taxpayers and turned over to the Hospital District by August 1 of each year. Tax requisition revenues are recognized in the year in which they are levied.

December 31, 2022

1. Significant Accounting Policies (continued)

Investment Income Interest income is reported as revenue in the period earned.

Capital Project Expenses

The Hospital District has no claim on the assets purchased as part of capital project expenses and, as such, has adopted the policy of

expensing these amounts.

Reserve Surplus Funds Funds raised for future operating and capital purposes, as approved by

the Board of Directors and in accordance with Section 20(4) of the Hospital District Act, are set aside in reserves of accumulated surplus.

public sector accounting standards requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities at the date of the financial statements, and the reported amounts of revenues and expenditures during the reporting period. Actual results could differ from management's best estimates

as additional information becomes available in the future.

December 31, 2022

2. Temporary Investments

	2022	2021
Guaranteed Investment Certificate, with an interest rate of 2.40% and matures in August 2023. MFA Pooled Money Market Funds	\$3,531,840 3,145,813	\$6,677,177 3,086,073
	\$6,677,653	\$9,763,250

3. Commitments

Interior Health Authority ("IHA"):

At December 31, 2022 the Hospital District has an outstanding commitment of \$10,799,209 to IHA (2021 - \$14,299,932), this represents the difference between approved bylaws for various projects and the amounts paid out based on invoices submitted by IHA to date.

December 31, 2022

4. Accumulated surplus

Accumulated surplus consists of individual fund surpluses and reserves as follows:

	2021	Annual deficit	Contributions to reserve	Transfer 2022 from reserve
Surplus: Unappropriated surplus	\$ 4,969,828	\$(2,487,902)	\$ (147,457)	\$ 176,393 \$ 2,510,862
Reserve funds Section 20(4) reserve	-	-		
Reserve for future capital	6,674,749	-	147,457	(176,393) 6,645,813
Total accumulated surplus	\$11,644,577	\$(2,487,902)	\$ -	\$ - \$ 9,156,675

A Reserve for Future Capital Expenditures was established by the Board of Directors in 2007. The Reserve is invested in Pooled Investment Funds with the Municipal Finance Authority of British Columbia and Guaranteed Investment Certificates with the Canadian Imperial Bank of Commerce included in portfolio Investments.

	2022	2021
Pooled Investment Funds Guaranteed Investment Certificates	\$3,145,813 3,500,000	\$3,086,073 3,588,676
	\$6,645,813	\$6,674,749

December 31, 2022

5. Financial plan

The budget data presented in these financial statements is based upon the 2022 Financial Plan approved by the Board of Directors on March 24, 2022. The legislative requirements for the Financial Plan are that the cash inflows for the period must equal cash outflows.

Cash inflows and outflows may include such items as debt proceeds or debt principal repayment, asset sale proceeds and transfers to and from reserves and surplus. These items are not recognized as revenues and expenses in the Statement of Operations as they do not meet the public sector accounting standards definition. PSAB requires that budget figures be presented on the same basis of accounting as actual figures.

The legislation does not require the Financial Plan to include non-cash items such as the actuarial adjustments on debt or funding liability accruals to provide for future cash requirements. However, these items are recognized as revenues or expenses in the Statement of Operations under public sector accounting standards.

The chart below demonstrates how the legislative requirement for a balanced Financial Plan has been met.

	Ві	udget Amount
Deficit - Statement of Operations	\$	(13,974,532)
Adjust for budgeted cash items, not included in Statement of operations:		
Contributions to Capital Reserves		(1,865,545)
Transfers from Capital Reserves		235,227
Proceeds from borrowing		<u>15,161,562</u>
Previous year surplus	_	<u>443,288</u>
Total adjustments		13,974,532
Financial Plan Balance	\$	-