



**Regional Hospital Board
AGENDA**

**Tuesday, June 23, 2026
3:00 P.M.**

Regional District Boardroom

Page

1. CALL TO ORDER

2. APPROVAL OF AGENDA

2.1 Regional Hospital Board Agenda

(All Directors - Unweighted Vote)

THAT the agenda be approved, as presented.

3. ADOPTION OF MINUTES

3.1 Regional Hospital Board Meetings Minutes - April 28, 2026 5 - 7

(All Directors - Unweighted Vote)

THAT the minutes of the Regional Hospital Board held April 28, 2026 be adopted.

4. DELEGATION & INQUIRIES

4.1 Richard Gage, Michelle Hanna, Sam Samsami, Patricia JappyLoker, and Johan Marais, Vancouver Coastal Health (VCH) re VCH Coastal CoC's Financial Year 2027 Capital Plan Update and Cost Share Requests 9 - 31

5. UNFINISHED BUSINESS

6. CORRESPONDENCE

7. BUSINESS ARISING FROM CORRESPONDENCE

8. CHAIR'S REPORT

9. RESOLUTIONS

10. REPORTS

10.1 First Quarter Regional Hospital District 2026 Strategic Plan Progress Report 33 - 40

(All Directors - Unweighted Vote)

THAT the Board enter into the minutes and file the report titled First Quarter Regional Hospital District 2026 Strategic Plan Progress Report.

11. BYLAWS

12. NEW BUSINESS

13. QUESTION PERIOD

14. IN CAMERA SESSION

14.1 Proposed Closed Session

(All Directors - Unweighted Vote)

THAT the Board move in-camera and that the meeting be closed to the public on the grounds that the subject matter to be considered relates to matters covered by the *Community Charter* under section 90(1):

(1) A part of a Board meeting may be closed to the public if the subject matter being considered relates to or is one or more of the following:

(n) the consideration of whether a Board meeting should be closed under a provision of this subsection or subsection (2); and

(2) A part of a Board meeting must be closed to the public if the subject matter being considered relates to one or more of the following:

(b) the consideration of information received and held in confidence relating to negotiations;

(i) between the regional district and a provincial government or the federal government, or both, or between a provincial government or the federal government, or both, and a third party.

15. RISE AND REPORT FROM IN CAMERA SESSION

16. ADJOURNMENT

Regional Hospital Board Minutes

**April 28, 2026, 3:00 PM
Regional District Boardroom**

Present: Chair, Tla'amin Nation Director Brandon Louie
Director, Electoral Area A Jason Lennox
Director, Electoral Area B Mark Gisborne
Director, Electoral Area C Clayton Brander
Director, Electoral Area D Sandy McCormick
Director, Electoral Area E Andrew Fall
Municipal Director Cindy Elliott
Municipal Director Robert Southcott

Staff Present: Al Radke, Chief Administrative Officer
Michelle Jones, General Manager of Corporate Administration |
Corporate Officer
Linda Greenan, General Manager of Financial Administration
Celine Lillies, Manager of Financial Services
Caleb Allen, Manager of Information Technology
Rebecca Coleman, Legislative Services Coordinator
Sherry Lawson, Records Management Clerk

1. CALL TO ORDER

Chair Louie called the meeting to order at 3:00 pm.

2. APPROVAL OF AGENDA

2.1 Regional Hospital Board Agenda

Moved and Seconded

THAT the agenda be approved, as presented.

MOTION CARRIED.

3. ADOPTION OF MINUTES**3.1 Regional Hospital Board Meetings Minutes - March 24, 2026**

Moved and Seconded

THAT the minutes of the Regional Hospital Board held March 24, 2026 be adopted.

MOTION CARRIED.

Director Gisborne joined the meeting at 3:02 pm.

4. DELEGATION & INQUIRIES**4.1 Cory Vanderhorst, MNP, re Draft Audited 2025 Financial Statements**

Cory Vanderhorst and Graham Roberts, MNP presented a report to the Board regarding the Draft Audited 2025 Financial Statements for the Regional Hospital District.

5. UNFINISHED BUSINESS**6. CORRESPONDENCE****7. BUSINESS ARISING FROM CORRESPONDENCE****8. CHAIR'S REPORT****9. REPORTS****9.1 qathet Regional Hospital District Audited Financial Statements 2025**

Moved and Seconded

THAT the Board approve the qathet Regional Hospital District Financial Statements for the year ended December 31, 2025.

MOTION CARRIED.

10. BYLAWS**11. NEW BUSINESS****12. QUESTION PERIOD****13. IN CAMERA SESSION****13.1 Proposed Closed Session**

THAT the Board move in-camera and that the meeting be closed to the public on the grounds that the subject matter to be considered relates to matters covered by the *Community Charter* under section 90(1):

(1) A part of a Board meeting may be closed to the public if the subject matter being considered relates to or is one or more of the following:

(e) the acquisition, disposition or expropriation of land or improvements, if the Board considers that disclosure could reasonably be expected to harm the interests of the regional district;

(l) discussions with regional district officers and employees respecting regional district objectives, measures and progress reports for the purposes of preparing an annual report under section 98 [*annual regional district report*]; and

(n) the consideration of whether a Board meeting should be closed under a provision of this subsection or subsection (2).

MOTION CARRIED.

The meeting moved in-camera at 3:09 pm.

The open meeting resumed at 4:13 pm.

14. RISE AND REPORT FROM IN CAMERA SESSION

The Board rose and reported on the following:

1. The Board referred the First Quarter 2026 Strategic Plan Progress Report - Regional Hospital Board to the June 23, 2026 open Regional Hospital District Board meeting.

15. ADJOURNMENT

There being no further business, the meeting adjourned at 4:14 pm.

Chair

Corporate Officer

FY27 Capital Update & Cost Share Requests

qathet Regional Hospital District

June 23rd, 2026



Territory Acknowledgement

Vancouver Coastal Health is committed to delivering exceptional care to 1.25 million people, including the First Nations, Métis and Inuit, within the traditional territories of the Heiltsuk, Kitasoo-Xai'xais, Lil'wat, Musqueam, N'Quatqua, Nuxalk, Samahquam, shíshálh, Skatin, Squamish, Tla'amin, Tsleil-Waututh, Wuikinuxv, and Xa'xtsa.

We are grateful to provide care on the traditional territory and treaty lands of the Tla'amin Nation.

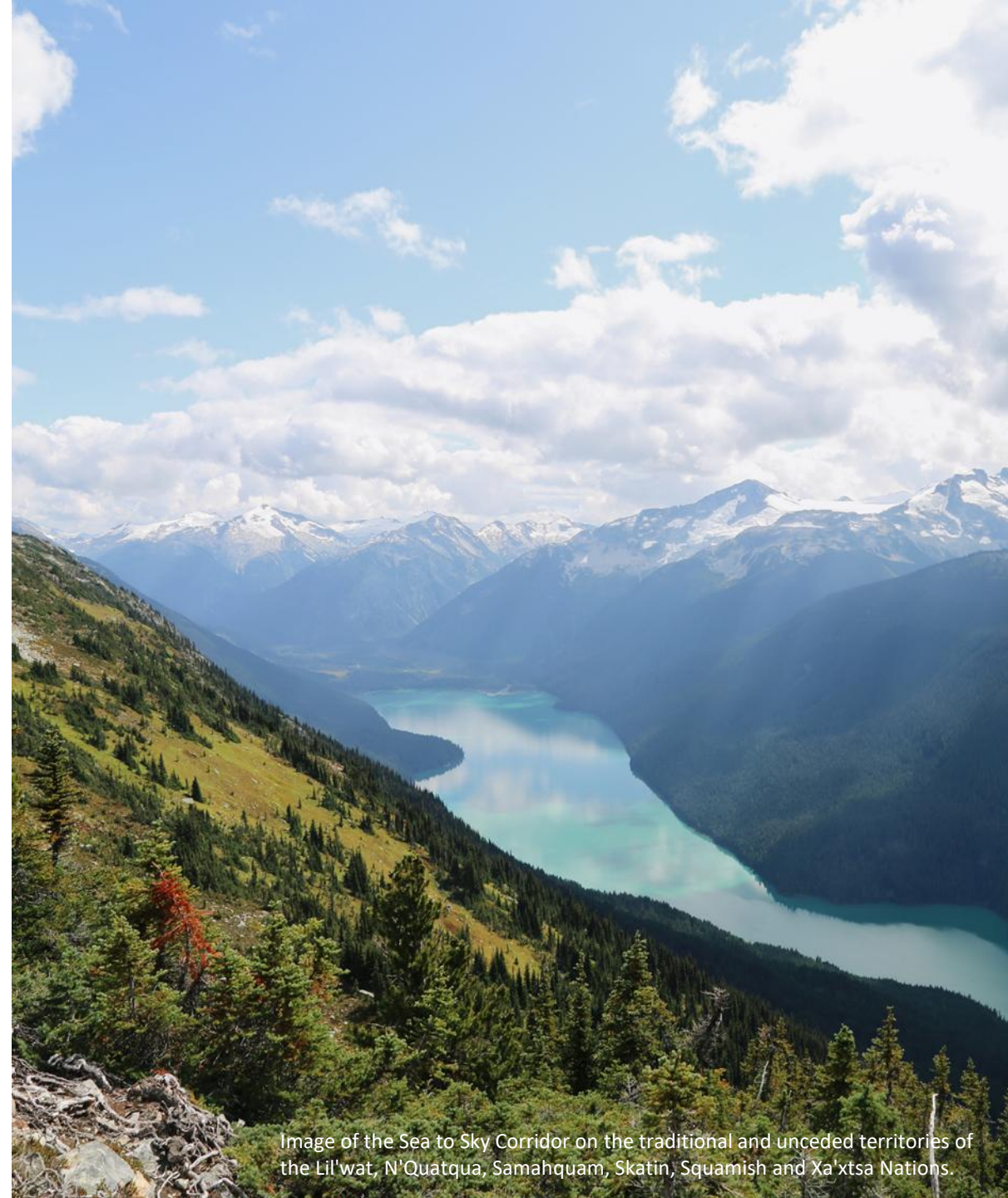


Image of the Sea to Sky Corridor on the traditional and unceded territories of the Lil'wat, N'Quatqua, Samahquam, Skatin, Squamish and Xa'xtsa Nations.

Aligning our Investment to Strategic Priorities



Healthy People

- Invest in prevention and health promotion
- Address the social determinants of health



Exceptional Care

- Improve access to health services based on population needs
- Strengthen the safety, quality and experience of care



Research and Innovation for Impact

- Expand our capacity for research and innovation
- Reimagine care



Great Place to Work

- Develop and sustain a positive workplace culture that builds on inspiring leadership
- Attract, develop and retain VCH staff and medical staff

Capital Planning Principles

The following principles inform the whole facility life-cycle, from planning, design and RFP processes, through to construction, operations and building end-of-life:

- **Operational Sustainability** – ensure our assets are maintained in a state that supports the best possible patient outcomes
- **Asset Condition** – asset renewal strategies to improve facility condition index (FCI) and address historical deficit of investment, ensuring safe and uninterrupted services
- **Indigenous Health** – engagement with and incorporation of the unique host Nation cultures on which our facilities are located, to create safe, sustainable spaces that support Indigenous healing practices and prioritize holistic health outcomes
- **Planetary Health** – ensure facilities are sustainable and climate resilient, support the delivery of sustainable future-focused services such as reusables and virtual health
- **Diversity, Equity & Inclusion** – ensuring facilities support gender equity and diversity, particularly through design of washrooms, change rooms and showers



Strategic Overview

Capital needs are focused on:

- Acute Care
- Surgical Services
- Long Term Care
- Addressing Alternate Level of Care (ALC) challenges
- Diagnostic Imaging
- Community Services & Urgent Primary Care Centres
- Mental Health & Substance Use
- Infrastructure deficit



FY27 Capital Plan: projects have been approved at the highest level e.g. Senior Executive Team (SET), VCH Board, and Ministry of Health/ Treasury Board.

- Awaiting FY27 Capital **Funding Letter**

FY27 – FY30+ Capital Plan – Coastal CoC

Capital Expenditure

(\$ millions)	Life to Date Spend FY19 - FY26	FY27	FY28	FY29	FY30	FY31+	Total	%
Priority Investments								
LGH Acute Care Facility	302.5	9.2	14.2	-	-	-	325.9	
Hilltop House LTC Replacement (re-paced)	-	-	-	-	-	-	-	
Total Priority Investment	302.5	9.2	14.2	-	-	-	325.9	70%
Other Capital Projects > \$5M								
Underway								
CNCPL Chiller #2 Replacement - Lions Gate Hospital	5.7	0.2	-	-	-	-	5.9	
3.0T MRI project, LGH	4.3	7.1	0.9	-	-	-	12.3	
Angiography Suite Replacement, LGH	5.8	3.2	-	-	-	-	9.1	
SGH Modular CT Scanner	6.5	2.6	-	-	-	-	9.0	
New								
Totem Lodge TCU Conversion		5.0	6.1	-	-	-	11.1	
Pemberton Expansion Facility		0.1	3.0	3.9	-	-	7.0	
Total Other Capital Projects > \$5M	22.3	18.2	10.0	3.9	-	-	54.3	12%
Other Capital Projects < \$5M								
Facilities	21.4	23.0	22.6	7.2	-	-	74.1	
Underway	21.4	17.3	8.3	-	-	-	47.0	
New		5.7	14.3	7.2	-	-	27.1	
Equipment	3.5	6.2	-	-	-	-	9.7	
Underway	3.5	3.4	-	-	-	-	6.9	
New		2.8	-	-	-	-	2.8	
Total Other Capital Projects < \$5M	24.9	29.2	22.6	7.2	0.0	0.0	83.8	18%
Total Expenditures	349.6	56.6	46.8	11.1	-	-	464.1	100%

FY27 Facilities Routine Capital Investment (RCI) allocation Coastal CoC

Rank	CoC	Campus	Building	Project Name	RCI Request	Other Funding Sources (Fdn, RHD, Other)	Total Request
1	Coastal	Sechelt Hospital	Totem Lodge	Totem Lodge TCU Conversion	4,050,122	7,000,000	11,050,122
2	Coastal	Sechelt Hospital	South Wing	Upgrade Passenger Elevator #1S and 2S	2,900,000		2,900,000
3	Coastal	Sechelt Hospital	Sechelt Hospital	2South MHSU Renovations	549,464	3,000,000	3,549,464
4	Coastal	Pemberton Health Centre	Pemberton	Pemberton Expansion Facility	6,970,000		6,970,000
5	Coastal	Squamish General Hospital	Squamish	ED bay 3	210,000		210,000
6	Coastal	Sechelt Hospital	Sechelt Hospital	Transfer Switch for new generator	746,833		746,833
7	Coastal	Lions Gate Hospital	Lions Gate	Parkade Structural Remediation	3,000,000		3,000,000
8	Coastal	qathet General Hospital	qathet General	Isolation Room	685,000		685,000
9	Coastal	Lions Gate Hospital	Acute Tower	Domestic Hot Water Reconditioning	1,430,000		1,430,000
10	Coastal	Bella Coola General Hospital	Bella Coola	Medical vacuum replacement	400,000		400,000
11	Coastal	Lions Gate Hospital	Acute Tower	Cafeteria Dishwasher	2,700,000		2,700,000
12	Coastal	Squamish General Hospital	Squamish	Parking Safety Remediation	125,000		125,000
13	Coastal	Coastal - Leased	Squamish	Squamish Mental Health - 38085 2nd Ave	177,991		177,991
14	Coastal	Coastal - Leased	221 W	NV UPCC - 221 W Esplanade - Security	250,925		250,925
15	Coastal	Coastal - Leased	West Van CHC	West Van CHC – 2121 Marine Dr -	326,069		326,069
16	Coastal	Pemberton Health Centre	Pemberton	Fire Suppression	620,000		620,000
17	Coastal	Whistler Health Care Centre	Whistler	Chiller Replacement	2,750,000		2,750,000
18	Coastal	Bella Coola General Hospital	Bella Coola	X-ray replacement	2,826,614		2,826,614
19	Coastal	Heiltsuk Hospital	Heiltsuk	X-ray Replacement	3,118,516		3,118,516
20	Coastal	Coastal - Leased	Sechelt Home	Sechelt Home Health - 5630 Inlet -	235,760		235,760
Total New Requests					34,072,294	10,000,000	44,072,294

New: FY27 prioritized and approved Routine Capital Investment (RCI) projects.

FY27 Project Prioritization

qathet General Hospital project funding requests **not funded**

Rank	CoC	Campus	Building	Project Name	RCI Request	Other Funding Sources (Fdn, RHD, Other)	Total Request
35	Coastal	qathet Gener	qathet General Hospital	Space Improvements - 3rd Floor	7,500,000	-	7,500,000
				Unfunded New Requests	7,500,000	-	7,500,000

Not approved for FY27

Capital Overview FY27 by Portfolio

Facilities

- Strengthen Forecast process and spend tracking
- Enhance reporting accuracy and decision support
- Cohesive regional multi-year planning perspective
- Establish regular CoC reviews and strategic alignment meetings

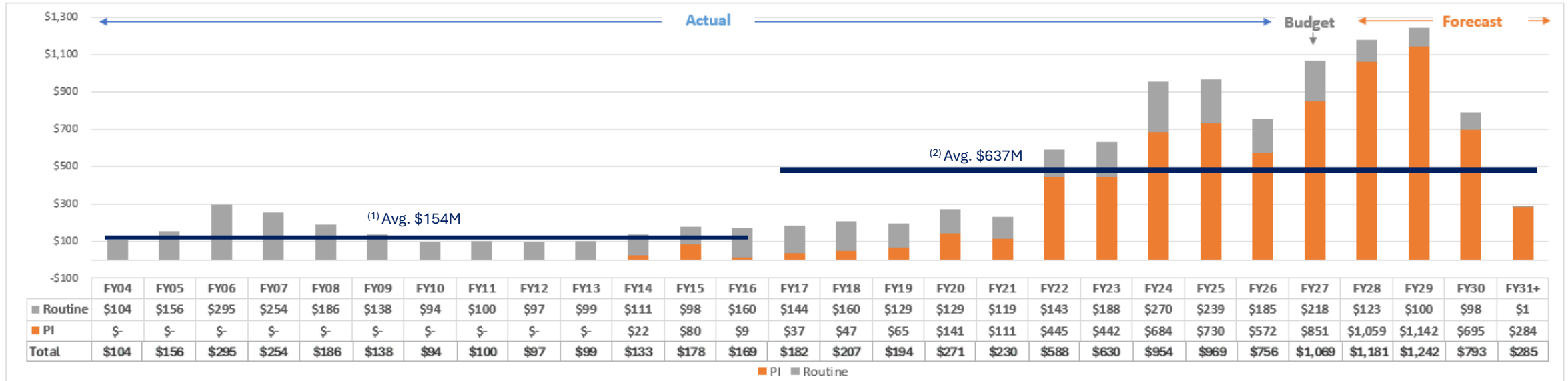
Equipment

- Lack of capital spending resulted in material equipment deficits
- State of “break-fix” approach impeding consideration for emerging, innovative, or environmentally sustainable technologies
- Dependent on contributions from Hospital Foundations to help address the gap in funding ~\$20M, annually
- Development of a 10-year strategic medical imaging equipment plan/ proactive lifecycle management

PDHIS

- CST Cerner Implementation - G.F. Strong Rehabilitation Centre & Vancouver Detox
- Continued work on replacing the current Workforce Management Solution
- Further work on transforming clinical systems and infrastructure across critical risk sites

Twenty Five-Year Capital Expenditure Trend VCH & PHC



Major projects completed FY04 – FY21:

- VGH Redevelopment
- Hilltop House LTC Expansion
- St. Vincent’s - Honoria Conway-Heather, PHC
- Sechelt Hospital Expansion
- Tertiary Mental Health projects (Riverview)
- Blusson Pavilion (ICORD)
- Robert H. N. Ho Research Centre
- Clinical & Systems Transformation (CST) – 2024 completion
- Hope Centre, LGH
- Segal Pavilion, VGH

(1) Average spend FY04 - FY16
 (2) Average spend FY17 to FY31+, excluding New SPH

Significant increase FY22 through FY30+ due to major redevelopment projects:

- Clinical & Systems Transformation (CST)
- Long Term Care initiatives (Dogwood, Fentiman, St. Vincent’s, Hilltop)
- Acute Care initiatives (LGH, VGH OR Renewal Phases 2, Richmond Hospital Redevelopment, New St. Paul’s Hospital)
- PHC Clinical Support & Research Centre
- Urgent Primary Care Centres (UPCC’s)
- Land acquisitions

At book value VCH needs an average of \$200M/yr in funding to address infrastructure deficits.

Closed & Active Facilities & Equipment Projects

FY27 Facilities projects closed (to date) qathet

Item #	Facilities FY26 Projects Closed qathet Project ID & Name	Project Actuals	Ministry of Health	Deferred Capital VCH	Foundations & Auxiliaries	Regional Hospital District
1	301437 - Med Rm CST Reno qGH	92,185	92,185			
2	301445 - ECU Office Renovation qGH	60,288	60,288			
3	301374 - Modernize Clean Dirty Dumbwait	259,128	172,000			87,128
Facilities / Facilities Equipment		411,601	324,473	-	-	87,128
Total		411,601	324,473	-	-	87,128

FY27 Facilities & Equipment projects underway

qathet

Item #	FY27 - P02 qathet Project ID & Name	Project Budget	Ministry of Health	Deferred Capital VCH	Foundations & Auxiliaries	Regional Hospital District	Other	Life to Date Cost	Project Budget Remaining	Comments
1	301290 - Pharmacy IV Room Upgrades qGH	4,131,076	3,206,076			925,000		4,019,241	111,835	Financial closeout.
2	301396 - ER Triage Upgrades qGH	2,500,000	1,720,000		20,000	760,000		2,185,937	314,063	Financial closeout.
3	301402 - MDRD Sterilizers qathet	638,027	630,513	7,514				618,314	19,713	
4	301412 - Medical Air Vacuum Upgrade qGH	915,000	915,000					876,558	38,442	Financial closeout.
5	301454 - Oncology Nursing Stat Reno qGH	75,638	75,638					34,065	41,573	Financial closeout.
6	301456 - Emergency Department Bays Renovation qGH	268,000	268,000					146,319	121,681	Financial closeout.
7	301458 - X-Ray Replacement - qGH	1,999,000	1,199,000			800,000		572,958	1,426,042	
8	301459 - Security Modifications qGH	100,000	100,000					36,663	63,337	
9	301463 - Nurse Call Upgrade qGH	130,000	130,000					-	130,000	
10	FA27-011 - Isolation Room	685,000	411,000			274,000		-	685,000	FY27 cost share request.
Facilities / Facilities Equipment		11,441,741	8,655,227	7,514	20,000	2,759,000	-	8,490,055	2,951,686	
11	352490 - Sigma ECT Device	71,335	71,335					69,832	1,503	
12	352522 - Slim CMAC 8 Inch Cart	63,616	63,616					63,616	-	
13	352532 - Panda Ires Bedded Warmer	50,823			50,823			50,839	(16)	
14	352541 - Hamilton T1 Ventilator	59,156			59,156			59,156	-	
15	352543 - Defibrillators 10	290,989	290,989					-	290,989	
16	352553 - Flight Clave45 Steam Sterilizer	41,371	41,371					41,371	-	
17	352554 - Flight Clave45 Steam Sterilizer	41,845	41,845					41,845	-	
18	352565 - E SCAIOE 00 Respiratory Module	11,910	11,910					11,910	-	
19	352570 - SP50 Sweeper LP50 Scrubber	105,117		105,117				105,117	-	
20	352614 - Affinity 4 Birthing Bed 2	47,293	47,293					-	47,293	
21	352617 - SLT YAG Combination Laser	100,243	10,243		90,000			-	100,243	
22	EQ27-012 - Mammography Unit	431,400	258,400			173,000		-	431,400	FY27 cost share request.
Equipment		1,315,098	837,002	105,117	199,979	173,000	-	443,686	871,412	
Total		12,756,839	9,492,229	112,631	219,979	2,932,000	-	8,933,741	3,823,098	
% Funding Source			74%	1%	2%	23%	0%			



Capital project cost share & Minor equipment funding requests

FY27 Capital project cost share requests

Project Name	\$'M	Project Cost Estimate	Cost Share Request		Description
			VCH (60%)	qRHD (40%)	
Isolation Room, qathet General Hospital		0.685	0.411	0.274	<p>qathet General Hospital currently lacks compliant Airborne Isolation Rooms. The renovation of patient rooms 416 and 417 will deliver two dedicated isolation rooms with a shared anteroom, meeting CSA Z3127.2 standards. Completion is targeted before the 2026 cold and flu season and includes:</p> <ul style="list-style-type: none"> - The installation of a dedicated exhaust fan and associated ducting with integrated controls - Upgrading the anteroom and patient doors with touchless auto-openers - Improve the airtightness of the rooms at the door openings and ceilings - Modernize the interior finishes including new T-bar ceilings, lighting, flooring, and wall paint
Mammography Unit replacement, qathet General Hospital		0.431	0.259	0.173	<p>The unit is almost 10 years old which is considered end of life. qGH currently performs Diagnostic & Screening Mammography. The current standard for diagnostic mammography now include tomography and the current unit does not have this capability.</p>
Total Project Cost Estimate		1.116	0.670	0.447	Requesting a 40% cost share from qRHD totaling \$447K.

FY27 Minor equipment funding request

- qathet General Hospital is requesting a minor equipment funding allocation from the qathet Regional Hospital District to replace **7 stretchers**, totaling **\$93,365**:

Project Name	Quantity	Unit Cost, incl. Delivery charges & Taxes	Total Project Cost Estimate	Description
Stretchers, qathet General Hospital	7	13,338	93,365	qathet General Hospital is in need of 7 new Stretchers.
Total request for minor equipment	7	13,338	93,365	

- The promotional pricing of \$93,365 is **expiring June 30th** after which pricing will increase to **\$107,600**.

Cost share request	\$447,000 (slide 15)
Minor equipment	<u>\$ 93,365</u>
Total requested	<u>\$540,365</u> ←

Multi-year Priorities

Capital priorities qathet

Status update

- Health Vision qathet – review in the fall for planning \$'s and consideration for FY28

Upcoming priorities

Capital project prioritization process to be informed by Health Vision findings.

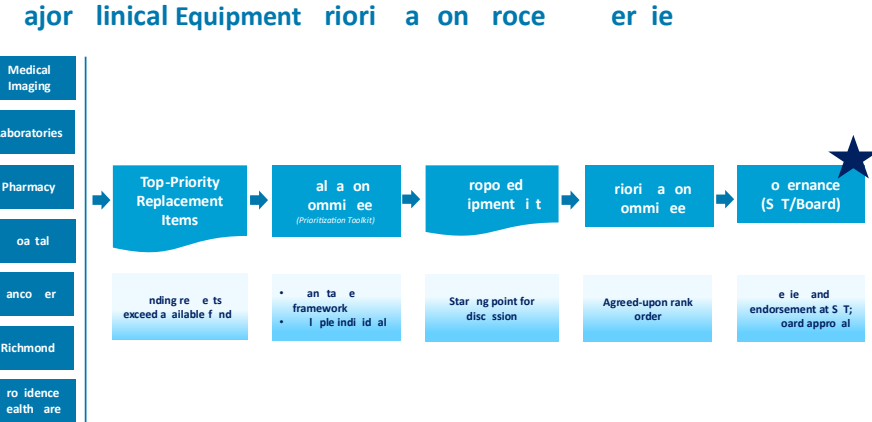
- Imminent priorities include:
 - The 3rd floor Space Improvement project at qathet General Hospital is in design and will be submitted for FY28
- The FY27 approved initiatives is a portfolio of work for Coastal Community of Care (CoC) extending to FY30

FY27 Project Intake & Prioritization

FY27 Prioritization Process Overview

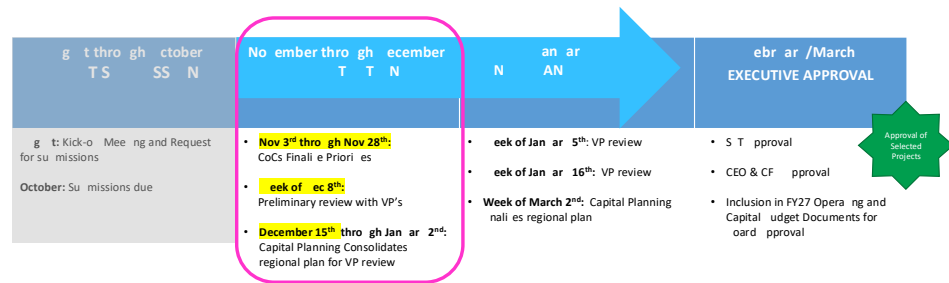
VCH/ PHC project prioritization process for Facilities, Major Clinical Equipment & PDHIS (IMITS) projects:

- Commenced - Aug 2025
- Finalize prioritized projects - Dec 2025
- SET endorsement – Feb - May 2026
- CAMC – June 2026
- VCH Board approval – June 2026

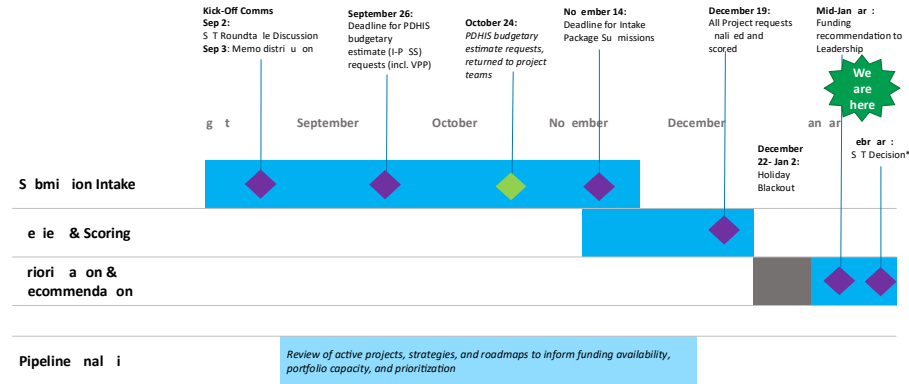


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FY27 Facilities Capital Prioritization – Timeline & Deliverable



FY27 VCH/ IS Capital Planning – Timeline & Deliverable



* Approval date is subject to Board schedule

Appendices

Capital - Risks & Opportunities

Risks

- Expectations to **expand access to services or programs** are at a pace that is not aligned with availability of capital funding
- Timelines associated with deliverables **are challenging** given critical reliance on overstretched and/or lack of capital asset base to support
- Capital investment in IT Systems & Infrastructure, Equipment, and Facilities **have fallen behind** health system demand and **capital deficits are growing** due to historical lack of funding
- Unspent capital funding **may not be carried forward**, risking delivery of approved projects.
- Accuracy of forecasting is **key for reliable projections** to support decision-making and has become a priority for the Ministry

Opportunities

- Leveraging **infrastructure risk** planning to better inform priorities
- Minor increases in **funding**
- Pursue approvals for **alternate funding** models
- Continue to **build and strengthen partnerships** with First Nations, FNHA and other stakeholders such as BC Housing, to leverage investments and improve access to care

Thank you

First Quarter Regional Hospital District 2026 Strategic Plan Progress Re...
REGIONAL HOSPITAL DISTRICT RESOLUTIONS

Goal	Details	Start Date	Due Date	Curren...	Update	Owner
Public Engagement : 100%	THAT the Board direct staff to prepare a report on options for the Board for engagement options about what the current local health facilities needs are.	2021/11/30	2021/12/31	95% 95 / 100%	<p>AI Radke:</p> <p>Progress: A joint Sea to Sky, Sunshine Coast and Powell River Hospital District meeting was held on February 27, 2023. It was attended by the Chair.</p> <p>Recently, an invitation was sent to Division of Family Practice and the PR Hospital Foundation to discuss relationships with Vancouver Coastal Health. A meeting is anticipated to occur in May.</p> <p>On March 3, 2023 the annual RHD Capital Planning Group meeting was held in Sechelt. It was hosted by Vancouver Coastal Health and attended by representatives of the Sea to Sky, Sunshine Coast and Powell River Hospital Districts. It was a hybrid meeting.</p> <p>Challenges: <i>No value</i></p> <p>Next Steps: <i>No value</i> 2023/04/18</p>	AI Radke

Goal	Details	Start Date	Due Date	Curren...	Update	Owner
Powell River Regional Hospital Board Engagement Options : 100%	<p>THAT the Board communicate with Sea to Sky and Sunshine Coast Regional Hospital Districts and request a strategic planning meeting; and</p> <p>THAT the Board extend an invitation to Powell River General Hospital Facility Engagement Initiative, Division of Family Practice, and the Powell River Hospital Foundation to discuss opportunities for cooperation and collaboration.</p>	2022/10/07	2023/10/31	75% 75 / 100%	Shelley Termuende: Progress: The Chair has had discussions with Sea to Sky and Sunshine Coast Hospital Districts, of whom expressed interest in a shared healthcare related planning session. If Sunshine Coast and Sea to Sky RHDs were to adopt a similar motion, then staff could facilitate planning a date. The Chair recommends that VCH be asked if these entities (PRGHFEI, Division of Family Practice and Powell River Hospital Foundation) can participate in some of our "Working Group" meetings. This Working Group was not yet established at the time the original resolution was adopted. The Chair has also proposed the potential for a select committee to support their inclusion. Challenges: <i>No value</i> Next Steps: <i>No value</i> 2025/08/15	Al Radke
Correspondence dated September 28, 2023 from Shas White, Sunshine Coast Regional Hospital District Board Chair re Regional Hospital District Memorandum of Understanding : 100%	<p>THAT the Chair and Vice Chair work with the Chairs and Vice Chair of the Sea to Sky and Sunshine Coast Regional Hospital Districts in conjunction with Vancouver Coastal Health (VCH) to update our joint 2014 Memorandum of Understanding.</p>	2023/11/10	2024/11/08	60% 60 / 100%		Al Radke
Correspondence dated March 19, 2025 from Robert Fitzpatrick, Program Manager, Miklat Recovery Program re Request for Additional Funding to Complete the Miklat Recovery Arbutus 12-Bed Expansion Project : 100%	<p>THAT the Board direct staff to investigate and provide a report with information on funding possibilities for the Miklat Recovery Arbutus 12-Bed Expansion Project funding request.</p>	2025/04/16	2026/03/25	56% 56 / 100%	Linda Greenan: Progress: <ul style="list-style-type: none"> Staff plan to have a report with options on the April 29 RHD Board meeting. Challenges: <i>No value</i> Next Steps: <i>No value</i> 2025/04/16	Linda Greenan
Proposed Revised Vancouver Coastal Health Memorandum of Understanding : 100%	<p>THAT the Board refer the proposed revised Vancouver Coastal Health Memorandum of Understanding report back to staff to solicit feedback from the Board members and bring back to the Regional Hospital District Board meeting, August 26, 2025.</p>	2025/06/27	2026/06/24	54% 54 / 100%		Al Radke

Goal	Details	Start Date	Due Date	Curren...	Update	Owner
Miklat Recovery Society Funding & Foundry qathet Funding : 100%	THAT the qathet Regional Hospital District Board support the current applications from Miklat Recovery Society and Foundry qathet to be healthcare facilities.	2025/06/27	2026/06/24	71% 71 / 100%	Shelley Termuende: Progress: June 27, 2025 Draft Correspondence sent to the RHD Chair for review and approval to affix signature and send Challenges: <i>No value</i> Next Steps: <i>No value</i> 2025/06/30	Al Radke
Lease Agreement at 4910 Joyce Avenue : 100%	THAT the Board direct staff to bring back a report on the definitions of "nuisance", "hazardous substances", and "permitted uses" within the current lease agreement at 4910 Joyce Avenue and options to ensure compliance from the tenant.	2025/09/04	2026/08/26	0% 0 / 100%		Linda Greenan
Procedure Bylaw Review : 100%		2025/11/07	2026/10/21	92% 92 / 100%		Michelle Jones
Where to Present Report Procedure Bylaw Review : 100%	THAT the qathet Regional Hospital District Board direct staff to incorporate recommendations for amendments to the Procedure Bylaw for consideration at a future qathet Regional Hospital District Board meeting.	2025/11/07	2026/10/21	100% 100 / 100%	Rebecca Coleman: Progress: Integrated within draft bylaw presented at the January 27, 2026 Hospital District Board meeting. Challenges: <i>No value</i> Next Steps: <i>No value</i> 2026/04/24	Michelle Jones
Election of Vice Chair Procedure Bylaw Review : 100%	THAT the qathet Regional Hospital District Board direct staff to prepare an amendment to the procedure bylaw requiring that the Board elect a Vice Chair at its inaugural meeting each year.	2025/11/07	2026/10/21	100% 100 / 100%	Rebecca Coleman: Progress: Integrated within draft bylaw presented at the January 27, 2026 Hospital District Board meeting. Challenges: <i>No value</i> Next Steps: <i>No value</i> 2026/04/24	Michelle Jones

Goal	Details	Start Date	Due Date	Curren...	Update	Owner
→ Agenda Submissions Procedure Bylaw Review : 100%	THAT the qathet Regional Hospital District Board directs staff to prepare an amendment to s.4.7 of the Procedure Bylaw to strike-out the words "prior to completion of the agenda" and insert "The submission must meet requirements established in this bylaw, Regional District policy, or parliamentary authority.	2025/11/07	2026/10/21	100% 100 / 100%	<p>Rebecca Coleman:</p> <p>Progress: Draft procedure bylaw considered at March 24, 2026 Hospital District Board meeting and forwarded from Hospital District to the Regional District with additional directions.</p> <p>Integrated within draft bylaw presented at the January 27, 2026 Hospital District Board meeting.</p> <p>Challenges: <i>No value</i></p> <p>Next Steps: <i>No value</i></p> <p>2026/04/24</p>	Michelle Jones
→ New Business and NOM Procedure Bylaw Review : 100%	THAT the qathet Regional Hospital District Board directs staff to develop a Notice of Motion Policy and present it at a future Board meeting.	2025/11/07	2026/10/21	85% 85 / 100%	<p>Rebecca Coleman:</p> <p>Progress: Policy was presented at the March 24, 2026 Hospital District Board meeting. It has been forwarded from Hospital District to the Regional District with a recommendation for adoption to the April 29, 2026 Regional Board meeting.</p> <p>Challenges: <i>No value</i></p> <p>Next Steps: <i>No value</i></p> <p>2026/04/24</p>	Michelle Jones
→ Voting Electronically Procedure Bylaw Review : 100%	THAT the qathet Regional Hospital District Board directs staff to maintain current practice of voting in elections electronically, and formalize it through written internal procedure, not bylaw amendment.	2025/11/07	2026/10/21	85% 85 / 100%	<p>Rebecca Coleman:</p> <p>Progress: Maintaining current practice. No changes to the amendment procedure bylaw.</p> <p>Challenges: <i>No value</i></p> <p>Next Steps: <i>No value</i></p> <p>2026/04/24</p>	Michelle Jones

Goal	Details	Start Date	Due Date	Curren...	Update	Owner
Procedure Bylaw Review Items #5 through #12 - Referred from the October 21, 2025 Regional Hospital District Board Meeting : 100%		2026/01/06	2026/11/10	100% 100 / 100%	Rebecca Coleman: Progress: Draft procedure bylaw considered at March 24, 2026 Hospital District Board meeting and forwarded from Hospital District to the Regional District with additional directions. Integrated within draft bylaw presented at the January 27, 2026 Hospital District Board meeting. Challenges: <i>No value</i> Next Steps: <i>No value</i> 2026/04/24	Michelle Jones
Delegation Procedures Procedure Bylaw Review : 100%	THAT the Regional Hospital District Board direct staff to prepare an amendment to the Procedure Bylaw permitting delegation requests up to 24 hours before the meeting for items already on the agenda or in accordance with s.4.24.	2026/01/06	2026/11/10	100% 100 / 100%	Rebecca Coleman: Progress: Draft procedure bylaw considered at March Hospital District Board meeting and forwarded from Hospital District to the Regional District with additional directions. Challenges: <i>No value</i> Next Steps: <i>No value</i> 2026/04/24	Michelle Jones
Seating Arrangements Procedure Bylaw Review : 100%	THAT the Regional Hospital Board direct staff to amend s.4.33 of the Procedure Bylaw to strike "will" and insert "may."	2026/01/06	2026/11/10	100% 100 / 100%	Rebecca Coleman: Progress: Draft procedure bylaw considered at March 24, 2026 Hospital District Board meeting and forwarded from Hospital District to the Regional District with additional directions. Integrated within draft bylaw presented at the January 27, 2026 Hospital District Board meeting. Challenges: <i>No value</i> Next Steps: <i>No value</i> 2026/04/24	Michelle Jones

	Goal	Details	Start Date	Due Date	Curren...	Update	Owner
First Quarter Regional Hospital District 2026 Strategic Plan Progress Report	→ Discussion Before a Motion is on the Floor Procedure Bylaw Review : 100%	THAT the Regional Hospital District Board direct staff to prepare an amendment to the Procedure Bylaw to include a clause permitting up to two minutes of general discussion per member, by unanimous agreement, at the onset of introducing an agenda item, which can be extended by unanimous agreement.	2026/01/06	2026/11/10	100% 100 / 100%	Michelle Jones: Progress: Draft procedure bylaw considered at March meeting and forwarded from Hospital District to the Regional District with additional directions. Challenges: <i>No value</i> Next Steps: <i>No value</i> 2026/04/23	Michelle Jones
	→ Limits to Debate Procedure Bylaw Review : 100%	THAT the Regional Hospital District Board direct staff to prepare an amendment to the Procedure Bylaw to include a clause limiting speeches to five minutes per occasion, no more than two occasions per question, and no more than ten minutes in aggregate, except by leave of the Board.	2026/01/06	2026/11/10	100% 100 / 100%	Michelle Jones: Progress: Draft procedure bylaw considered at March meeting and forwarded from Hospital District to the Regional District with additional directions. Challenges: <i>No value</i> Next Steps: <i>No value</i> 2026/04/23	Michelle Jones
	→ Updates to 2.9 Public Communications and Engagement Policy regarding Correspondence : 0%		2026/01/06	2026/11/10	0% 0 / 100%		Michelle Jones
	→ Updates to 2.9 Public Communications and Engagement Policy regarding Correspondence - refer to Committee of the Whole : 100%	THAT the Regional Hospital District Board refer the process of the Regional Hospital District Board and Chair receiving correspondence in a timely way to the qathet Regional District Committee of the Whole to consider changes to Policy 2.9 Public Communication and Engagement.	2026/01/06	2026/11/10	0% 0 / 100%		Michelle Jones
	→ Updates to 2.9 Public Communications and Engagement Policy regarding Correspondence - to the Chair : 100%	THAT the Regional Hospital District Board direct staff to provide any correspondence, letters or emails addressed to the Chair, to be provided to the Chair, as soon as is reasonably possible.	2026/01/06	2026/11/10	0% 0 / 100%		Michelle Jones
	Strategic Plan Progress Report : 100%	THAT the Regional Hospital District Board direct staff to provide the qathet Regional District quarterly strategic plan progress report to the Regional Hospital District Board.	2026/01/06	2026/11/10	100% 100 / 100%	Rebecca Coleman: Progress: From January 2026, Strategic Plan Progress Reports have been attached the the Hospital District Board meetings. Challenges: <i>No value</i> Next Steps: <i>No value</i> 2026/04/24	Michelle Jones

Goal	Details	Start Date	Due Date	Curren...	Update	Owner
Fourth Quarter Regional Hospital District 2025 Strategic Plan Progress Report : 100%	THAT the Board enter into the minutes and file the report titled Fourth Quarter Regional Hospital District 2025 Strategic Plan Progress Report.	2026/04/13	2027/03/24	0% 0 / 100%		Al Radke
Procedure Bylaw Update : 100%		2026/04/13	2027/03/24	100% 100 / 100%		Michelle Jones
→ Item 2.1.11 - Procedure Bylaw Update : 100%	THAT the Board amend item #2.1.11 of the proposed amendments to the Board Procedure Amendment Bylaw No. 557.3, 2026, to strike out the words, "than five (5) minutes on any one occasion on a question, and no more than two (2) occasions on the same question, and no more" after the words, "A Member may speak for no more"	2026/04/13	2027/03/24	100% 100 / 100%	Rebecca Coleman: Progress: Amendment included in draft forwarded from the Hospital District to the Regional District. Challenges: <i>No value</i> Next Steps: <i>No value</i> 2026/04/24	Michelle Jones
→ Item 21.5 - Procedure Bylaw Update : 100%	<p>THAT the Board refer item #2.1.5, clause #3.7 of the proposed amendments to Board Procedure Amendment Bylaw No. 557.3, 2026, regarding the requirement for a Regional District officer to be physically in attendance at meetings, to staff for clarification in accordance with applicable legislation; and</p> <p>THAT the revised clause #3.7 be included in the updated version of Board Procedure Amendment Bylaw No. 557.3, 2026, when presented to the qathet Regional District Board for first reading through adoption.</p>	2026/04/13	2027/03/24	100% 100 / 100%	Rebecca Coleman: Progress: Staff report with details requested presented to the Regional District Board on April 29, 2026. Challenges: <i>No value</i> Next Steps: <i>No value</i> 2026/04/24	Michelle Jones
→ MAIN - Procedure Bylaw Update : 100%	THAT the Regional Hospital District Board refer and recommend "Board Procedure Amendment Bylaw No. 557.3, 2026" to the qathet Regional District Board for first reading through adoption.	2026/04/13	2027/03/24	100% 100 / 100%	Rebecca Coleman: Progress: Draft procedure bylaw considered at March 24, 2026 Hospital District Board meeting and forwarded from Hospital District to the Regional District with additional directions. Challenges: <i>No value</i> Next Steps: <i>No value</i> 2026/04/24	Michelle Jones

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Regional Hospital District 2026-2030 Financial Plan Bylaw No. 135, 2026 : 100%	1. THAT the Board give first and second reading of "Regional Hospital District 2026-2030 Financial Plan Bylaw No. 135, 2026". 2. THAT the Board give third reading of "Regional Hospital District 2026-2030 Financial Plan Bylaw No. 135, 2026". 3. THAT the Board adopt "Regional Hospital District 2026-2030 Financial Plan Bylaw No. 135, 2026".	2026/04/13	2027/03/24	0% 0 / 100%		Linda Greenan
Definitions to the Lease Agreement at 4910 Joyce Ave - RISE AND REPORT : 100%	Staff provided a report regarding the definitions for "nuisance", "hazardous substances", and "permitted uses" in relation to the lease agreement at 4910 Joyce Avenue, and the Board is continuing to pursue gathering information and communicating community concerns with parties.	2026/04/13	2027/03/24	0% 0 / 100%		Patrick Devereaux
Long Term Financing - RISE AND REPORT : 100%	The qathet Regional Hospital District is going to reach out to the Ministry of Health and Infrastructure with advocacy for long term financial planning.	2026/04/13	2027/03/24	0% 0 / 100%		Linda Greenan