



SUNSHINE COAST REGIONAL HOSPITAL DISTRICT



REGULAR BOARD MEETING TO BE HELD IN THE BOARDROOM OF THE SUNSHINE COAST REGIONAL DISTRICT OFFICES AT 1975 FIELD ROAD, SECHELT, B.C.

Thursday, July 18, 2024

AGENDA

CALL TO ORDER 1:00 p.m.

AGENDA

1. Adoption of Agenda

Pages 1 - 2

MINUTES

2. Sunshine Coast Regional Hospital District Board Meeting
Minutes of April 18, 2024

Annex A
pp. 3 - 4

BUSINESS ARISING FROM MINUTES AND UNFINISHED BUSINESS

PRESENTATIONS AND DELEGATIONS

3. Johan Marais, Regional Director, Capital Asset Management
and Planning; Darlene MacKinnon VP, Coastal Community of
Care, Vancouver Coastal Health
Regarding: Capital Update and Cost Share Requests

Annex B
pp. 5 - 30

REPORTS

COMMUNICATIONS

6. Darlene MacKinnon, Vice President, Coastal Community of
Care, Vancouver Coastal Health dated May 7, 2024
Regarding: Health Vision Sechelt | shíshálh Hospital
Information

Annex C
pp. 31 - 33

MOTIONS

BYLAWS

NEW BUSINESS

IN CAMERA

ADJOURNMENT



SUNSHINE COAST REGIONAL HOSPITAL DISTRICT

April 18, 2024

MINUTES OF THE MEETING OF THE BOARD OF THE SUNSHINE COAST REGIONAL HOSPITAL DISTRICT HELD IN THE BOARDROOM AT 1975 FIELD ROAD, SECHELT, B.C.

PRESENT:	Chair	Town of Gibsons	S. White
	Directors	Electoral Area E	D. McMahon
		Electoral Area A	L. Lee
		Electoral Area B	J. Gabias
		Electoral Area D	K. Backs
		Electoral Area F	K. Stamford
		District of Sechelt	A. Toth
		District of Sechelt	D. Inkster
ALSO PRESENT:	GM, Corporate Services / Chief Financial Officer		T. Perreault
	Corporate Officer		S. Reid
	Manager, Financial Services		B. Wing
	Administrative Assistant / Recorder		T. Crosby
	Media		0
	Public		0

Directors, staff, and other attendees present for the meeting may have participated by means of electronic or other communication facilities.

CALL TO ORDER 1:01 p.m.

AGENDA **It was moved and seconded**

13/24 THAT the agenda for the meeting be adopted as presented.

CARRIED

MINUTES

Minutes **It was moved and seconded**

14/24 THAT the Sunshine Coast Regional Hospital District Board Meeting Minutes of February 22, 2024 be adopted as presented.

CARRIED

PRESENTATIONS AND DELEGATIONS

Cory Vanderhorst, Regional Assurance Partner of MNP LLP addressed the Board regarding the Sunshine Coast Regional Hospital District’s Final Report – 2023 Audit Findings, Draft Independent Auditor’s Report and draft audited Financial Statements for year ending December 31, 2023.

REPORTS

Financial Statements

It was moved and seconded

15/24

THAT the report titled Sunshine Coast Regional Hospital District (SCRHD) Draft Audited Financial Statements – Year Ended December 31, 2023 and the following documents be received for information;

- 2023 Audit Findings – Report to the Board of Directors;
- Draft Independent Auditor’s Report;
- Draft Audited Financial Statements Year Ended December 31, 2023;

AND THAT the SCRHD Draft Audited Financial Statements for Year Ended December 31, 2023 be approved as presented.

CARRIED

ADJOURNMENT

It was moved and seconded

16/24

THAT the Sunshine Coast Regional Hospital District Board meeting be adjourned.

CARRIED

The meeting adjourned at 1:08 p.m.

Certified correct _____ Secretary

Confirmed this _____ day of _____

Chair

FY25 Capital Update & Cost Share Requests

Sunshine Coast Regional Hospital District

July 18th, 2024



Territorial Acknowledgment

We wish to acknowledge that the land on which we gather is the traditional and unceded territory of the Coast Salish Peoples, including the Musqueam, Squamish, and Tsleil-Waututh Nations.

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.



Aligning our Investment to Strategic Priorities



Exceptional Care

Timely access to high-quality care for the best health outcome, in the best setting: hospital, home or community



Research and Innovation for Impact

Vibrant research and innovation ecosystem for better health outcomes and healthy system sustainability



Great Place to Work

Work together to build a healthy workplace with opportunities to grow and develop



Healthy People

Support optimal health and well-being by addressing social determinants of health

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 focused on:

- Long Term Care
- Health Vision
- Emergency Department renovations
- Mental Health & Substance Use
- Surgical Services
- Diagnostic Imaging
- Infrastructure deficit
- Community Services
- Clinical & Systems Transformation (CST) Implementation
- ERP System – HR/Payroll
- Indigenous Health initiatives



FY25 – FY28 Capital Plan – Coastal CoC Revenue

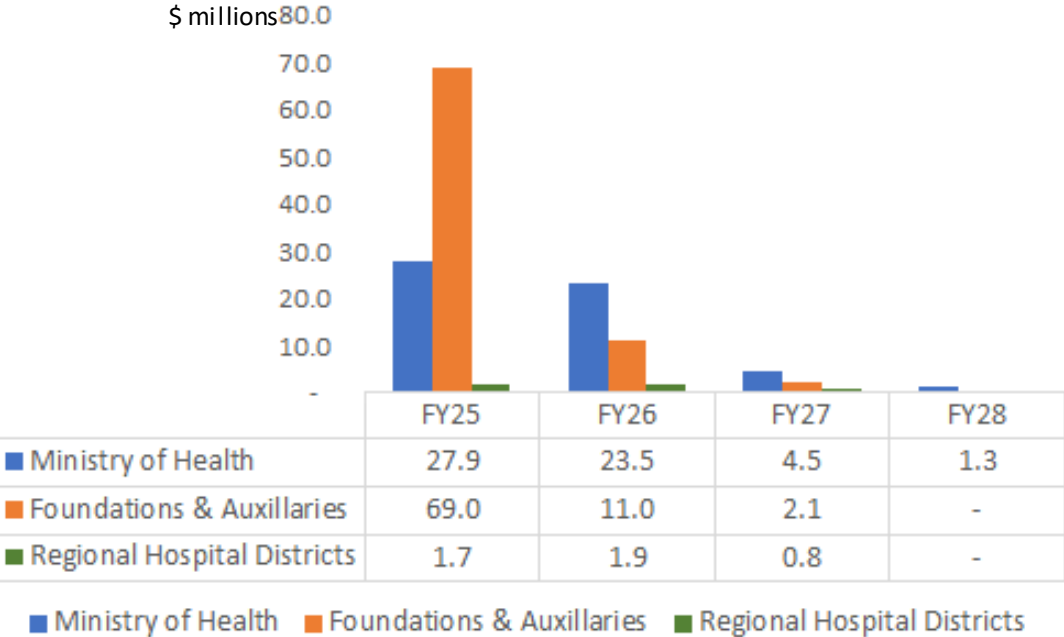
FY25 & FY26 revenues of **\$98.6M** and **\$36.4M** respectively include

- \$66.9M and \$10.0M for the new Acute Care Facility at Lions Gate Hospital

Funding sources

- *Ministry of Health* revenue is based on the annual Routine Capital Investment (RCI) allocation, which includes the FY25 prioritized projects
- *Foundation & Auxiliaries* revenue represent funding commitments to date
- *Regional Hospital Districts'* revenue include cost share commitments and FY25 cost share requests

Total Revenue **\$98.6M** **\$36.4M** **\$7.4M** **\$1.3M**



FY25 – FY28 Capital Plan – Coastal CoC Expenditure

Capital Expenditure Coastal CoC	Cashflows (\$ millions)					
	FY25	FY26	FY27	FY28+	Total	%
Priority Investments						
Acute Care Facility - Lions Gate Hospital	66.9	10.0	-	-	76.9	
Total Priority Investment	66.9	10.0	0.0	0.0	76.9	54%
Other Capital Projects >\$2M						
Pharmacy IV Room Upgrades - qathet	2.7	-	-	-	2.7	
ED Renovation - Sechelt	3.1	-	-	-	3.1	
Modular CT Scanner - SGH	3.2	3.2	0.1	-	6.5	
Northern Expansion Chillers 1 & 2 Replacement - LGH	0.3	-	-	-	0.3	
Acute Tower Elevators 1-4 Replacement - LGH	0.5	0.5	1.4	1.0	3.4	
2nd MRI - LGH	1.6	8.0	0.8	-	10.4	
Angiography Suite Replacement - LGH	0.8	4.5	2.7	-	8.0	
Total Other Capital Projects >\$2M	12.3	16.2	5.0	1.0	34.5	24%
Other Capital Projects <\$2M						
Facilities	10.3	9.8	2.4	0.3	22.7	
Underway	6.9	3.7	2.0	0.3	12.9	
New	3.3	6.1	0.3	-	9.8	
Equipment	9.1	0.4	-	-	9.5	
Underway	5.2	-	-	-	5.2	
New	3.9	0.4	-	-	4.2	
Total Other Capital Projects <\$2M	19.4	10.2	2.4	0.3	32.2	22%
Total Expenditure	98.6	36.4	7.4	1.3	143.6	100%

FY25 Facilities Routine Capital Investment (RCI) allocation Sunshine Coast

#	Campus	Investment Category	Project Name	Project Cost Estimate
1	LGH	Infrastructure	LGH Elevators 1-4 Modernization - Additional funding	1,000,000
2	Sechelt	Infrastructure	Replace MCC, Switch & Emerge Gen - Sechelt - Additional funding	300,000
3	SGH	Infrastructure	Generator replacement	1,240,000
4	qGH	Infrastructure	Medical Air Vacuum Upgrades	915,000
5	SGH	Infrastructure	Boiler Replacement	570,000
6	LGH	Clinical	Chemo Compounding Room Upgrade	870,000
7	Sechelt Hospital	Infrastructure	Dishwasher Replacement	870,859
8	Pemberton Health Centre	Clinical	X-Ray Upgrade	1,700,000
9	Pemberton Health Centre	Infrastructure	Electrical Distribution and Phase Protection	1,900,000
10	Sechelt Hospital	Infrastructure	Water resiliency - 3 days backup water supply	750,000
11	Central CHC	Infrastructure	Flooring Replacement – 132 W Esplanade	101,951
12	Parkgate CHC	Infrastructure	Flooring and Painting	100,951
13	Central CHC	Infrastructure	Coastal Leased Sites - Security Upgrades	245,166
14	Sechelt CHC	Infrastructure	Coastal Leased Sites - Security Upgrades	164,406
15	Gibsons CHC	Infrastructure	Coastal Leased Sites - Security Upgrades	105,183
			FY25 Routine Capital Investment (RCI) allocation - Coastal CoC	10,833,516

New: FY25 prioritized and approved Routine Capital Investment (RCI) projects




FY25 Sunshine Coast RCI allocation

2,190,448

20%

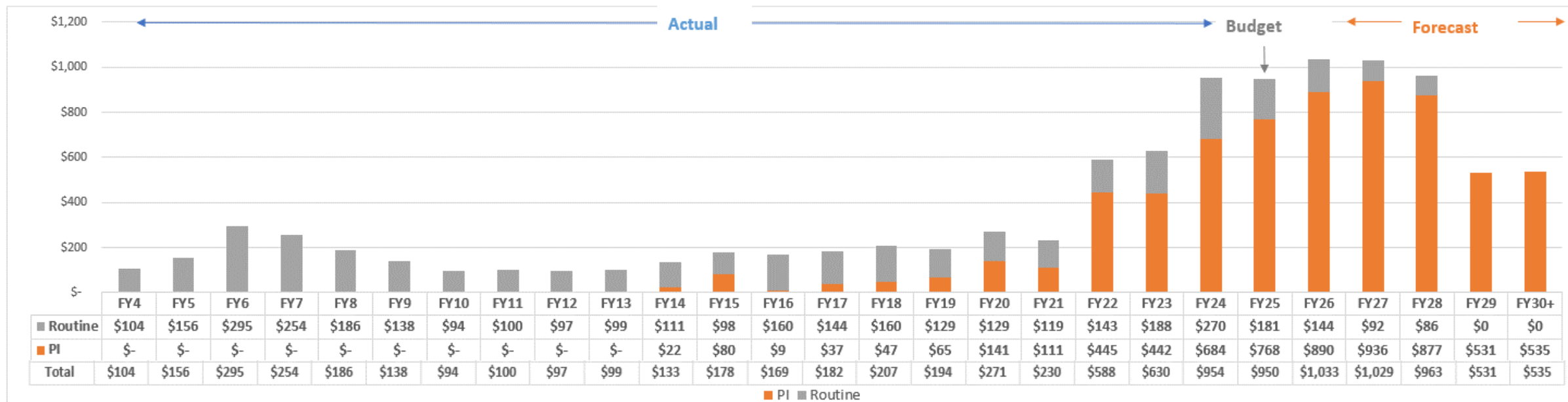
FY25 Capital Plan

Focus

Facilities		Completion of the Master Site Plans for Coastal rural and acute sites. Includes robust First Nations engagement
		Addressing the facility infrastructure deficit
		Further develop regional Long Term Care strategies to address demand
Major Equipment		Longer term strategic plan for medical imaging equipment
PDHIS* (former IMITS)		Transforming voice systems across critical risk sites
		Enterprise Resource Planning (ERP) Human Capital Management System transformation

Twenty Five-Year Capital Expenditure Trend

VCH & PHC



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

- Long Term Care initiatives (Dogwood, Fentiman, St. Vincent's)
- 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 – Coastal CoC

- **Active Facilities & Equipment projects**
- **Closed Facilities projects**

FY25 Facilities Projects underway

Sunshine Coast

#	Project ID & Name	Project Budget	Budgeted Funding Source				Life to Date Cost	Project Budget Remaining
			Ministry of Health	Deferred Capital VCH	Foundations & Auxiliaries	Sunshine Coast RHD		
Sunshine Coast - Sechelt Hospital								
1	Replace Motor Control Centre, Transfer Switch & Emergency Power Generator	2,298,000	1,556,400	-	-	741,600	2,214,287	83,713
2	Replace Delayed Vital Power #4 Power Distribution Centre	1,660,000	1,220,000	-	-	440,000	289,307	1,370,693
3	Laboratory Renovation	375,000	-	-	375,000	-	345,342	29,658
4	Emergency Department Renovation	3,442,400	-	392,400	3,050,000	-	398,117	3,044,283
5	Replacement of Heat Exchange & Domestic Hot Water (DHW) Pipes	360,000	216,000	-	-	144,000	23,166	336,834
6	Dishwasher Replacement, Sechelt	870,859	522,515	-	-	348,344	-	870,859
7	Water Resiliency	750,000	450,000	-	-	300,000	-	750,000
8	Coastal Leased Sites - Security Upgrades - Sechelt	164,406	164,406	-	-	-	-	164,406
9	Coastal Leased Sites - Security Upgrades - Gibsons	105,183	105,183	-	-	-	-	105,183
Sub-total - Sunshine Coast		10,025,848	4,234,504	392,400	3,425,000	1,973,944	3,270,219	6,755,629
			42%	4%	34%	20%		

FY25 cost share requests

FY25 Equipment Projects underway

Sunshine Coast

#	Project Name	Project Budget	Budgeted Funding Source			Life to Date Costs	Project Budget Remaining
			Ministry of Health	Foundations & Auxiliaries	Sunshine Coast RHD		
Sunshine Coast - Sechelt Hospital							
1	352096 - Port Fiber Rhinologyngoscope 4	41,738	-	41,738	-	39,689	2,049
2	352119 - Avalon FM30 Fetal Mntr Sys 4	124,699	-	-	124,699	123,301	1,398
3	352145 - Panda Warmer 5 Omnibed 1	313,979	-	313,979	-	238,263	75,716
4	352167 - Anesthetic Workstation	115,874	28,825	87,049	-	115,874	-
5	352188 - ACL TOP 350 CTS	42,266	42,266	-	-	41,830	436
6	352239 - OR Room 1 Light Upgrade	65,420	-	-	65,420	60,697	4,723
7	352240 - OR Room 2 Light Upgrade	65,420	-	-	65,420	60,697	4,723
8	352258 - Retrofit Delayed Vital Breaker	34,296	34,296	-	-	-	34,296
9	352276 - Platelet Agitator Incubator	20,732	-	-	20,732	21,452	(720)
10	352295 - Rees Temp Monitoring System	15,880	-	-	15,880	14,724	1,156
11	352296 - T1 Ventilator	39,814	-	-	39,814	39,744	70
12	352297 - Stress Test Treadmill with Mon	39,027	-	-	39,027	39,027	-
13	352306 - Carescape B650 Monitor	19,178	-	-	19,178	-	19,178
14	352307 - 10 Kw Kohler Back up Generator	16,347	16,347	-	-	15,286	1,061
15	352308 - 10 Kw Kohler Back up Generator	19,582	19,582	-	-	18,311	1,271
16	352336 - SC500X20R X24D 244NXScrubber 3	29,792	29,792	-	-	-	29,792
17	352346 - ECG Cart 2	40,983	-	-	40,983	40,983	-
18	352358 - Carboxyhemoglobin Monitor	8,988	-	8,988	-	8,988	-
19	Total Equipment - Sechelt Hospital	1,054,015	171,108	451,754	431,153	878,867	175,148
			16%	43%	41%		

FY24 Facilities closed projects Sunshine Coast

#	Facilities projects Closed FY23 & FY24	\$ millions	Project Budget
Sunshine Coast - Sechelt Hospital			
1	301286 - DR Room, X-Ray Replacement		0.650
2	301291 - Replace 3x20 Tonne Chillers		1.294
3	301292 - Oxygen Syst Upgrades		0.450
4	301319 - Physician Lounge Renovation		0.172
5	301332 - MDRD Renovation		0.084
6	301309 - Window Replacement		0.591
7	301381 - Office space Reconfiguration		0.125
Facilities projects Closed - Sechelt Hospital			2.649

RHD cost share projects.

Cost Share Request & Upcoming Priorities

FY25 Capital project cost share requests

Project Name	Project Cost Estimate	Cost Share Request		Description
		VCH (60%)	SCRHD (40%)	
Dishwasher Replacement, Sechelt Hospital	870,859	522,515	348,344	<p>The high humidity and low ventilation in the room created an environment prone to mold growth and increased maintenance requirements.</p> <p>The project scope includes HVAC, flooring and dishwasher equipment replacement at Sechelt Hospital.</p>
Water Resiliency, Sechelt Hospital	750,000	450,000	300,000	<p>Various initiatives and measures are in place with a continued focus on water conservation.</p> <p><i>Building Energy Systems Consulting (BES)</i> was contracted to review the domestic cold water system and recommended an on site water storage reservoir system with 2 X 50,000 litres stainless steel tanks, equating to a 3-day emergency water supply for the hospital.</p>
Total Project Cost Estimate	1,620,859	972,515	648,344	The cost share request represents 40% of the project cost estimates.

Capital priorities Sunshine Coast

Underway

- Ongoing Health Vision Sunshine Coast

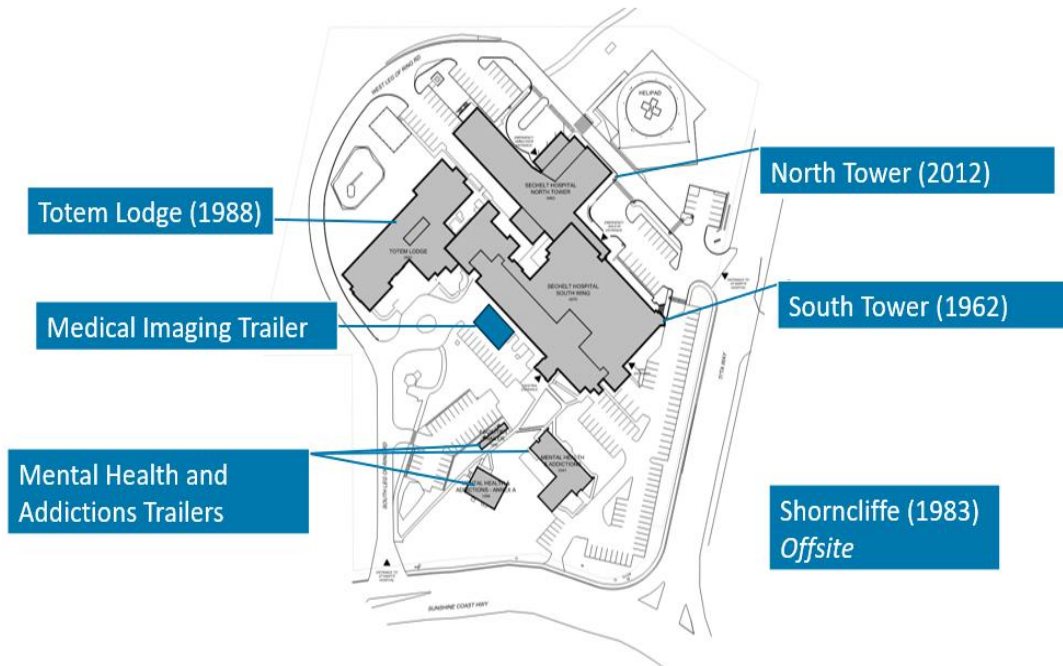
Upcoming priorities

- Repurposing of Totem Lodge
- Building Maintenance System (BMS) upgrade, Sechelt Hospital
- Elevator Renewal, Sechelt Hospital

Health Vision Sechelt | shíshálh Hospital

Objective

Develop Clinical Service Plan, Functional Program, & Infrastructure assessment including gap analysis to inform options and recommendations in the resulting Health Vision for the Campus.



	2024												2025			
	A	M	J	J	A	S	O	N	D	J	F	M	A			
Clinical Service Planning	[Bar from A to S]															
Phase 1 Engagement		[Bar from M to J]														
Phase 1 Engagement Report Back													[Bar in N]			
Building Assessment	[Bar from A to J]															
High Level Programming Development*				[Bar from J to D]												
Phase 2 Engagement**								[Bar from O to J]								
Site Planning & Report Development									[Bar from O to D]							
Present Final Plan												[Bar from F to A]				

Appendices

- Project Intake & Prioritization

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



Opportunities

- Develop **sustainable capital strategies** to support clinical priorities including Long term care, primary care, health human resource technology, real estate, and critical infrastructure projects
- Focus on **Health Visioning** to determine long-term priorities and enable decision making across VCH/MoH to ensure that limited capital funding is **invested strategically**
- Continue to **build and strengthen partnerships** with First Nations and FNHA to leverage investments and improve access to care

Capital Prioritization Criteria

Prioritization Criteria		
Facilities	Major Clinical Equipment	PDHIS* (former IMITS)
Strategic alignment 	Strategic alignment 	Strategic alignment 
Access & flow	Patient Outcome	Clinical & business impact (health outcomes)
Innovation	Innovation	Access and availability (access & flow)
Safety & risk management	Safety	Safety & risk management
Urgency	Obsolescence	Organizational Impact and likelihood
Cost-benefit (financial)	Financial	Cost benefits (financial & operational)
Human resources		CST Requirements
Funding partnerships		

* PDHIS – Provincial Digital Health & Information Systems

Facilities Strategic Approach to FY25 Prioritization

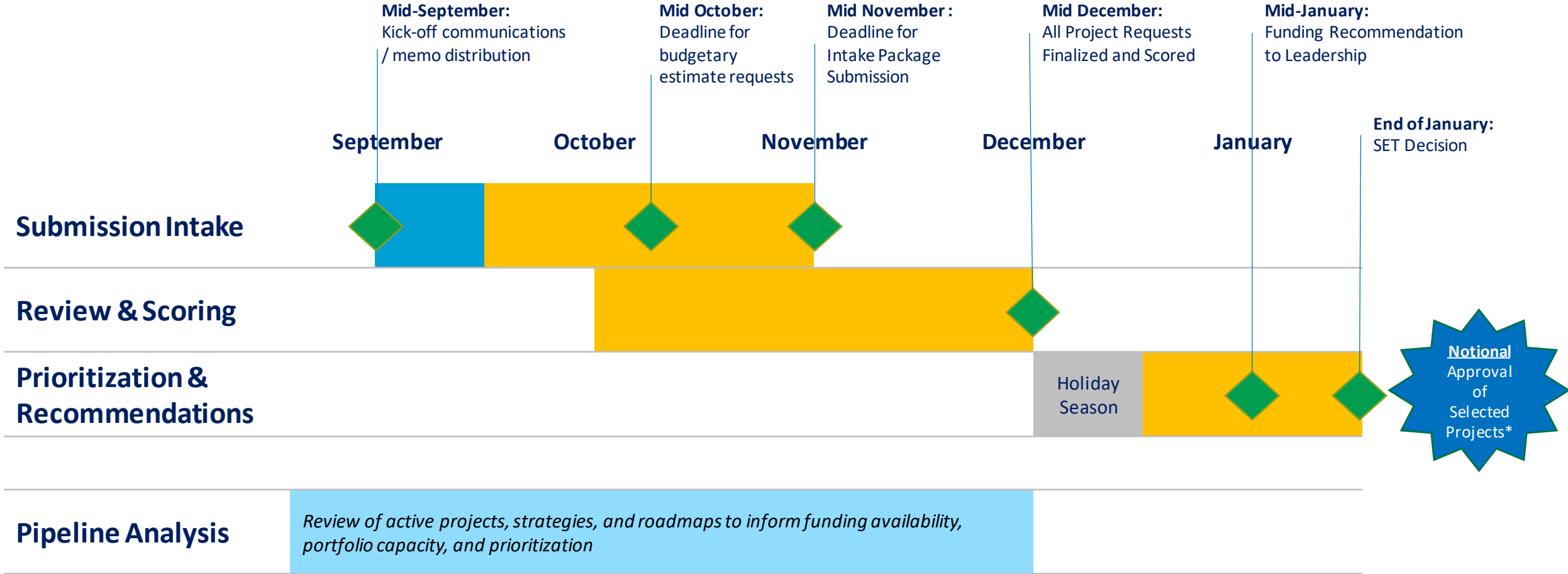
Primary Criteria		Updated 10/4/2023
Capital Prioritization Criteria Weighting	1 Urgency	35
	2 Level of Readiness	10
	3 Impact to Operations, Patient Care & Infrastructure	35
	4 Scale of Impact	10
	5 Operating Cost / Benefit	10
	Total	100

Cross-sectional **Scoring Committee** includes the following members:

- Clinical,
- Facilities project delivery (CPO's/ Exec Dir.),
- Facilities Management & Operations (FMO),
- Real Estate and,
- Capital FP&A

Assessment criteria: Review clinical/ operational impact and assess readiness/ speed to market.

FY25 Capital Planning – Timeline & Deliverables



* Approval date is subject to Board schedule

Facilities Capital Project Scoring Tool

Project title:					RATING	AVG WEIGHT
Urgency						
Extremely urgent	Very urgent	Quite urgent	Fairly urgent	Not urgent	Max Score	35
5	4	3	2	1	5	
Existing asset has already failed or been shutdown; and/or Legal/regulatory orders received requiring immediate action; and/or Missing components to life safety systems ; and/or proposes a significant risk to patient and staff safety (eg. Reduced staff injuries, reduced patient and staff reported incidents, meet current IPAC standards). Project previously approved; request resubmitted due to change in leased site; project is delayed and operational funding has already been provided for this fiscal; termination of lease is within the next year; over 30 staff do not have a space.	Existing asset(s) are showing signs of failure and/or are not operating reliably. Asset(s) are beyond repair and replacement/full recommended project scope is required. Long lead times associated with replacement and/or design required before orders can be made. Project is delayed and operational funding (new program) is being provided for next fiscal; termination of lease is within the next 1.5 years; over 10 staff do not have space to work.	Existing asset(s) are showing signs of failure and/or are not operating reliably. Asset(s) can likely be repaired , but replacement is the recommended option and better investment. Asset due for replacement (no signs of failure) full recommended project scope required for new solution. Operational funding (new program) is approved for 2 years; termination of lease is within 2 years; staff starting within the year will not have a space.	Existing asset(s) will reach the end of their useful life by next fiscal year, or are already overdue for replacement . Asset(s) can be repaired in case of failure, but replacement is the recommended option. Required to meet deadline of 3rd party report or contract requirement (including leases). Operational funding (new program) is approved for 2.5 years; termination of lease is in 2.5 years; staff starting next year will not have a space .	Existing assets are due for replacement within the next 5 years. Low risk of failure. Status quo does not worsen if project does not move forward. Operational funding (new program) is approved for 3 years; termination of lease is in 3 years.		
Level of Readiness						
In Progress	Class A	Class C	Class D	No formal study completed yet	Max Score	10
5	4	3	2	1	5	
Project in progress. Additional funding required.	Project has a Class A estimate (or contractor quote or full scope) and is tender-ready. Detailed design is completed. Lease: Class C completed	Project has a Class C estimate (or contractor quote/estimate for major portion of the construction). Schematic design is completed. Lease: Target site (leased) identified.	Feasibility study completed. Class D estimate / rough order of magnitude. Lease: Functional Program/Schedule of Accommodations completed.	No planning completed.		
Impact to Operations, Patient Care and Infrastructure						
Prevent Severe Disruption and/or Damage	Prevent Major Disruption	Prevent Disruption	Improve the Status Quo	No impact	Max Score	35
5	4	3	2	1	5	
This project is necessary to maintain current service levels; avoid a failure. Failure interrupts or prevents clinical operations for an extended period ; likely damage other building assets or accelerate their deterioration; will trigger a Code Grey. Not proceeding may: lead to severe injury, property damage, or fines. Creates an extended service disruption for an entire clinic.	This project is necessary to maintain current service levels and avoid a failure. Failure will interrupt, delay or prevent clinical operations. Neighbouring building assets might be damaged if a failure occurs. A failure could trigger a Code Grey. Creates an extended service disruption for an entire clinic; project required to meet MInistry mandates.	This project is necessary to maintain current service levels and avoid a failure. Failure might interrupt clinical operations temporarily . Contingency plans in place to allow for continuation of regular service . Not proceeding creates an extended service disruption to part of a clinic.	Existing levels of service will continue if this project does not proceed . An improvement over the status quo. Can include replacing noncritical infrastructure, future-proofing, improvements in efficiency, resiliency, aesthetics, access and flow, patient/staff experience, or an expansion of services / adding net new assets. Not proceeding creates a service disruption to part of a clinic or non-clinical space.			

Facilities Capital Project Scoring Tool

Scale of Impact						
Campus	Multiple Buildings	Entire Building	Multiple departments	Single Department	Max Score	10
5	4	3	2	1	5	
Impact is felt across more than 5 buildings	Impact is felt across 1-4 buildings, including an entire campus of 4 buildings or less or multiple leased sites.	Impact is felt throughout an entire building or clinic.	Impact is felt across multiple departments / floors / service lines	Impact is felt across a wing/department of a single building or clinic		
Operating Cost / Benefit						
<6 year payback	6-14 year payback	15-30 year payback	No significant payback	No payback	Max Score	10
5	4	3	2	1	5	
<6 year payback	6-14 year payback	15-30 year payback	Some savings due to increases in efficiencies, reduced maintenance and/or utilities. Not enough to substantially quantify.	No Payback		

From: The Receptionist <The.Receptionist@scrd.ca>
Sent: Tuesday, May 7, 2024 3:23 PM
To: Executive Assistants
Subject: FW: Health Vision Sechelt | shfshalh Hospital Information

From: Segatto, Daniela [VCH] **On Behalf Of** VCH Community Engagement [VCH] **Sent:** Tuesday, May 7, 2024 1:31 PM
To: VCH Community Engagement [VCH] <VCHCommunityEngagement@vch.ca>
Subject: Health Vision Sechelt | shfshalh Hospital Information



Dear Community Partner,

The Sunshine Coast is a growing part of the Vancouver Coastal Health (VCH) service delivery area. Continued population growth, along with an aging demographic, contribute to a high use of clinical services, and this demand is expected to increase. At VCH, we are proactively planning for the future to help ensure those needs are addressed.

As part of our ongoing commitment to the delivery of quality care, we are launching Health Vision Sechelt | shfshalh Hospital, a high-level planning process for Sechelt | shfshalh Hospital and health-care services within the campus. Health Vision Sechelt | shfshalh Hospital will consider all clinical services on the hospital campus, including mental health and substance use services, on-campus long-term care, laboratory medicine, medical imaging services, as well as non-clinical supporting services (i.e. parking, housekeeping, food services, laundry, etc.).

Once completed, Health Vision Sechelt | shfshalh Hospital will help ensure health services within the campus remain aligned with the evolving health-care needs of the local community on the broader Sunshine Coast.

Health Vision Sechelt | shfshalh Hospital will be informed through an inclusive engagement process that will enable us to hear directly from the communities we serve as well as the people who care for these communities.

The shfshalh Nation generously gifted the land on which the hospital site is located. VCH and shfshalh Nation renewed their partnership and commitment to reconciliation in a historic memorandum in 2023. The memorandum outlines a commitment to working collaboratively on shared decision-making and accountability, to improve health and well-being of the shfshalh community.

We are asking for input from First Nation partners, communities, local and regional government, staff and medical staff (including agency and contracted staff) and other interested parties. Health Vision Sechelt | shfshalh Hospital will

consider identified community needs, priorities and expectations, alongside best practices for the delivery of health-care services. The planning process will also consider previous planning exercises while incorporating the latest data to ensure planning reflects current and evolving needs.

How to get involved:

- Please complete the [online survey](#) and subscribe to stay informed on this project.
- Please share this poster with your networks and those who may be interested in this engagement opportunity.
- Learn more about the project at www.vch.ca/HealthVisionSecheltHospital
- You can also contact us at ce@vch.ca.

In addition to this first phase of engagement, there will be other engagement opportunities later in the year. We will share with participants how their input was considered and addressed in the planning process.

Your feedback is shaping the future of healthcare on the Sunshine Coast, and we appreciate your involvement.

Warm regards,

Darlene MacKinnon

Vice President, Coastal Community of Care
Vancouver Coastal Health

Dr Peter Edmunds

Senior Medical Director, Coastal Community of Care
Vancouver Coastal Health

Vancouver Coastal Health is committed to delivering exceptional care to 1.25 million people, including the First Nations, Metis and Inuit in our region, within the traditional territories of the Heiltsuk, KITASOO-XAI'XAIS, Lil'wat, Musqueam, N'Quatqua, Nuxalk, Samahquam, shfshalh, Skatin, Squamish, Tla'amin, Tsleil-Waututh, Wuikinuxv, and Xa'xtsa.



Health Vision Sechelt | Shishálh Hospital

Help us plan for the future

Fill out a survey to share your thoughts

Vancouver Coastal Health is planning for the future of the Sechelt | shishálh Hospital campus.

Your input is important and will help shape the future of health care on the Sunshine Coast.



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