NANAIMO REGIONAL HOSPITAL DISTRICT

REGULAR BOARD MEETING TUESDAY, DECEMBER 14, 2004 7:00 PM

(RDN Board Chambers)

AGENDA

PAGES	
	CALL TO ORDER
	MINUTES
2-3	Minutes of the regular Hospital Board meeting held September 28, 2004.
	HOSPITAL
4-6	2005 Revised Provisional Hospital District Budget.
7-15	2005 Provisional Hospital District Budget. (Report and back-up information from the Special Committee of the Whole meeting held November 30, 2004 included for information.)
	ADDENDUM
	BUSINESS ARISING FROM DELEGATIONS OR COMMUNICATIONS
	NEW BUSINESS

ADJOURNMENT

NANAIMO REGIONAL HOSPITAL DISTRICT

MINUTES OF THE REGULAR MEETING OF THE BOARD OF THE NANAIMO REGIONAL HOSPITAL DISTRICT HELD ON TUESDAY, SEPTEMBER 28, 2004, AT 7:00 PM IN THE RDN BOARD CHAMBERS

Present:

Director J. Stanhope	Chairperson
Alternate	
Director J. Burnett	Electoral Area A
Director G. Lund	Electoral Area B
Director E. Hamilton	Electoral Area C
Director D. Haime	Electoral Area D
Director P. Bibby	Electoral Area E
Director L. Biggemann	Electoral Area F
Director D. Bartram	Electoral Area H
Director R. Longmuir	City of Parksville
Director T. Westbroek	Town of Qualicum Beach
Director C. Haime	District of Lantzville
Director G. Korpan	City of Nanaimo
Director R. Cantelon	City of Nanaimo
Director T. Krall	City of Nanaimo
Director L. McNabb	City of Nanaimo
Director L. Sherry	City of Nanaimo
Director B. Holdom	City of Nanaimo

Also in Attendance:

K. Daniels	Chief Administrative Officer
C. Mason	Gen. Mgr. of Corporate Services
B. Lapham	Gen. Mgr. of Development Services
N. Connelly	Gen. Mgr. of Community Services
J. Finnie	Gen. Mgr. of Environmental Services
N. Avery	Manager of Financial Services
M. Pearse	Manager of Administrative Services

CALL TO ORDER

The Chairperson welcomed Alternate Director Joe Burnett to the meeting.

PRESENTATION

Chuck Rowe, VIHA, re Phase II Maternity Unit at NRGH.

Mr. Rowe and hospital staff members reviewed the Phase II project and discussed the need to put forward a request to the Nanaimo Regional Hospital Board to consider additional funding in the approximate amount of \$2.6 Million to complete the project.

MINUTES

MOVED Director Sherry, SECONDED Director Hamilton, that the minutes of the regular Hospital Board meeting held April 13, 2004 be adopted.

CARRIED

SCHEDULED STANDING, ADVISORY STANDING AND SELECT COMMITTEE REPORTS

Project Building Committee.

MOVED Director Sherry, SECONDED Director Bartram, that the minutes of the Project Building Committee meeting held September 14, 2004 be received for information.

CARRIED

HOSPITAL

Request for Additional Cost Sharing in Phase II Project - Maternity Wing.

MOVED Director Krall, SECONDED Director Westbroek, that:

WHEREAS VIHA has determined this facility as a regional referral facility;

THEREFORE the Board approve funding using a population-based regional cost sharing model (similar to that used for the MRI equipment), where those Regional Hospital Districts benefiting from the proposed facility will cost share on an equitable proportional usage basis.

MOVED Director Longmuir, SECONDED Director D. Haime that the last paragraph be amended to read:

THEREFORE the Board approve funding using a cost sharing model where those Regional Hospital Districts benefiting from the proposed facility will cost share on an equitable proportional usage basis.

DEFEATED

The question was called on the main motion.

The motion CARRIED.

ADJOURNMENT

MOVED Director Sherry, SECONDED Director McNabb, that this meeting terminate.

CARRIED

TIME: 7:30 PM

CHAIRPERSON GENERAL MANAGER, CORPORATE SERVICES



MEMORANDUM NANAIMO REGIONAL HOSPITAL DISTRICT

TO:

C. Mason

DATE:

December 8, 2004

General Manager, Corporate Services

FROM:

N. Avery

FILE:

Manager, Financial Services

SUBJECT:

2005 Revised Provisional Hospital District Budget

PURPOSE:

To review the implications of additional information from the Vancouver Island Health Authority with respect to the 2005 Regional Hospital District provisional budget.

BACKGROUND:

At the committee meeting held November 30th the Board received a staff report discussing alternatives for the Regional Hospital District's 2005 provisional budget. Staff recommended the following elements for 2005:

Property tax requisition	\$ 5,031,655	(increase of 2.5%)
Capital equipment grants (items less than \$100,000)	\$ 1,817,920	(increase of 2.5%)
Capital equipment/project grants (items more than \$100,000)	\$ 360,000	(same as 2004)

At a meeting held November 24th VIHA staff presented to Regional District staff their capital proposal for 2005. VIHA's proposal versus staff's initial proposal is shown in the table below:

	Equipment under \$100,000	Equipment over \$100,000	Capital Projects less than \$1.5 million (Minor capital)
Regional District staff proposal	\$1,817,920	\$360,000	\$Nil
VIHA actual need	\$3,017,721	\$2,905,535	\$3,430,500
VIHA proposal	\$1,773,575	\$360,000	\$774,000
Increase (decrease) to staff proposal	(\$ 44,345)	No change	\$774,000

VIHA has not requested the standard 40% cost sharing on any of its priorities over \$100,000. In contrast to previous years however, VIHA is requesting support for capital projects over \$100,000, so that the total funding for items costing more than \$100,000 is \$1,134,000 versus the more recent past levels of \$360,000.

Staff had recommended, given the positive surplus conditions in the budget, that major capital for 2005 be funded by a cash grant of \$360,000, rather than by borrowing. Funding an additional \$774,000 for items costing more than \$100,000 can only be accommodated by borrowing.

ALTERNATIVES:

- 1. Approve the provisional budget as recommended by staff.
- 2. Amend the 2005 budget by reducing equipment grants to the 2004 level as requested by VIHA and provide a new allowance for borrowing up to \$774,000 for capital projects.
- 3. Amend the 2005 budget by reducing equipment grants to the 2004 level and provide for borrowing up to \$1,134,000 for all items costing more than \$100,000.

FINANCIAL IMPLICATIONS:

The table below summarizes the alternatives for budget support for capital for 2005:

	Alternative 1	Alternative 2	Alternative 3
Cash grant - equipment less than	\$1,817,920	\$1,773,575	\$1,773,575
\$100,000			
Cash grant - equipment more than	\$360,000.	Nil	\$ 360,000
\$100,000			
Cash grant - capital projects greater	Nil	Nil	·
than \$100,000			
Borrow for capital over \$100,000		\$1,134,000	\$774,000
Total capital funding support	\$2,177,920	\$2,907,575	\$2,907,575.
Tax Requisition 2005	\$5,031,655	\$5,031,655	\$5,031,655
Tax rate per \$100,000	\$35.16	\$35.16	\$35.16
		1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	The second second
Tax Requisition 2009	\$5,554,055	\$5,718,285	5,746,045
Tax rate per \$100,000	\$38.80	\$39.96	\$40.15

Alternative 1

This is the most recent staff recommendation. Under this alternative a cash allowance of \$360,000 for major capital items could be provided for 2005 and 2006, but thereafter would have to be funded by borrowing. This is because debt servicing once the Phase II project is complete will reach a peak between 2007 and 2008. This alternative does not provide for any increase from current levels of capital support. Assuming a similar budget approach beyond 2005, the tax requisition in 2009 is projected at \$5,554,005, at an estimated cost of \$38.80 per \$100,000.

Alternative 2

Under this alternative, the Hospital District would commit to borrowing \$1,134,000 for all capital items over \$100,000. Borrowing costs would become a budget item in 2006 and beyond, so that there is no change required to the tax requisition for 2005. The tax requisition projected for 2009 assumes a continuation of major capital funding in the amount of \$1,134,000 annually. The tax requisition projected for 2009 is \$5,718,285 at a rate of \$39.96 per \$100,000.

Alternative 3

Under this alternative the budget would provide a combination of cash grants and authority to borrow up to \$774,000 for capital items costing more than \$100,000. The result of this alternative is similar to Alternative 2. There is no change required to the tax requisition for 2005. The tax requisition projected for 2009 assumes a continuation of major capital funding in the amount of \$1,134,000 annually. The tax requisition projected for 2009 is \$5,746,045 at an estimated cost of \$40.15 per \$100,000.

Alternatives Summary

• Alternatives 2 and 3 have been prepared using the following assumptions:

Annual equipment grants will rise by 2.5% annually. Funding for capital over \$100,000 will rise from \$360,000 to \$1,134,000 annually.

The difference by 2009 between the alternatives is about \$1.35 per \$100,000. Expressed otherwise, at a cost of \$1.35 per \$100,000 the Health Authority would receive an additional \$774,000 for major capital items on a continuing basis.

CONCLUSIONS:

Following receipt of more recent information staff are presenting updated alternatives for a provisional budget for the Regional Hospital District. It is expected that this will be the annual budget recommendation for 2005. The primary consideration for this budget is ensuring sufficient cash flow to meet debt servicing requirements as the Phase II surgical expansion approaches completion. Under any of the options above, tax increases would range between 1.5% and 2.5% annually to meet the debt servicing component of the budget. The difference between the options rests in the amount of current capital support provided in addition to existing fixed commitments.

Staff's original recommendation of a tax requisition increase of 2.5% is unchanged despite more recent information. In this report staff have attempted to provide a forward looking context should the Board continue to provide a similar higher level of capital support for subsequent years. In order to fund additional capital support within a cost of living framework it will be necessary to borrow funds on an annual basis. The difference between the three alternatives presented here is estimated at \$1.35 per \$100,000 by 2009. Annual tax increases will vary between 2.5% and 3.5% up to 2009 and should be able to settle out at about 2.0% to 2.5% thereafter.

While staff are not totally supportive of recommending additional debt servicing in general, there are really no other alternatives to respond to a higher level of capital request from the Health Authority. VIHA has presented a request for their most critical needs and staff therefore recommend Alternative 3 as the preferred approach for 2005.

RECOMMENDATION:

1. That the 2005 Regional Hospital District provisional budget be approved as outlined under Alternative 3 with the following components:

Property tax requisition \$ 5,031,655 Minor capital equipment grants \$ 1,773,575 Major capital equipment grants \$ 360,000 Capital project grants (borrow up to) \$ 774,000

Report Writer

General Manager Corporate Services

C.A.O. Concurrence

COMMENTS:

\Report - Hospital district 2005 provisional budget - Nov 2004.doc



REGIONAL DISTRICT OF NANAIMO

NOV 24 2004

CHAIR GMCrS MEMORANDUM
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GMCmS GMES HOSPITAL DISTRICT

DATE

FILE:

TO:

C. Mason

General Manager, Corporate Services

November 22, 2004

FROM:

N. Averv

ery

Manager, Financial Services

SUBJECT: 2005 Provisional Hospital District Budget

PURPOSE:

To introduce the 2005 Provisional Budget for the Regional Hospital District.

BACKGROUND:

The Regional Hospital District funds capital equipment and capital projects for local facilities. Capital items costing more than \$100,000 are generally paid for by debt financing and are cost shared 60% by the Vancouver Island Health Authority and 40% by the Regional Hospital District. The Health Authority also solicits funds from the Hospital Foundation for capital items.

At this time one major capital project is underway - the construction of surgical and obstetric facilities at the Nanaimo Regional General Hospital (Phase II). The surgical portion of the project is expected to be completed around May 2005 - the Regional Hospital District share of this project is currently \$9,517,340. The debt servicing cost for this one project will be approximately \$1,000,000 per year. In anticipation the Board has raised property taxes over the course of 2001 to 2004 to provide budget room for this financial impact. The surplus forecast for the end of 2004 is \$1.25 million.

The Hospital District budget also provides for a capital equipment allowance for items costing less than \$100,000. Again, the Health Authority pools Hospital District funding, the Provincial envelope funding and Foundation funds for these lower cost items which generally entail replacement of equipment at the end of their useful life. In 2004 the equipment allowance was \$1.77 million.

To date the Health Authority has not provided any information on their capital requirements for 2005. In fact the Health Authority generally finds itself ultimately working backwards from the amount likely to be approved by the Board. However, the Board did approve a 20% increase based on the Health Authority's submission for 2004.

The 2005 budget presented with this report includes a 2.5% increase in property taxes, a capital equipment allowance of \$1.817 million (an increase of 2.5% over 2004) and a further cash allowance of \$360,000 for funding equipment items over \$100,000.

ALTERNATIVES:

- 1. Approve a 2005 Hospital District Budget at the same level as 2004.
- 2. Approve a 2005 Hospital Budget sufficient to fund future debt requirements as currently known.
- 3. Approve a 2005 Hospital District Budget which includes a 2.5% increase to the tax requisition, a 2.5% increase in equipment grants for items costing less than \$100,000 and a \$360,000 cash allowance for equipment costing more than \$100,000.

FINANCIAL IMPLICATIONS:

To provide some context for the options above the following table is provided. The upper section of the table shows a snapshot of the capital funding provided by the Regional District from 2001. The lower section of the table shows the annual debt servicing costs, accumulated surplus and tax cost for that time period. Debt servicing represents the largest component of the budget – in the range of 70% of the tax requisition is committed for debt servicing.

·	2001.	2002	2003	2004	2005 (proposed)
Tax Requisition	\$4,516,840 4.5%	\$4,605,000 2%	\$4,789,200 4%	\$4,908,930 2.5%	\$5,031,655 2.5%
Equipment < \$100,000	\$1,380,000 0%	\$1,449,000 5%.	\$1,477,980 2%	\$1,773,575 20%	\$1,817,920 2.5%
Equipment > \$100,000	\$. 62,750.	\$ 316,800	\$0.	\$360,000 (allowance for borrowing)	\$ 360,000 (from current taxes)
Capital projects	\$10,477,200		-		
Total capital support	\$11,919,951	\$1,765,800	\$1,477,980	\$2,133,575	\$2,177,920
Debt servicing	\$3,267,120	\$3,053,350	\$3,239,830	\$3,190,650	\$3,392,770
Cumulative surplus	\$ 174,870	\$359,090.	\$ 701,915	\$1,079,010	\$784,720
Tax cost per \$100,000	\$ 37.58	\$37.74.	\$. 37.64.	\$34.75	\$ 35.20

Noteworthy in the table above is the 20% increase in minor capital equipment grants in 2004. This represented a higher level of commitment from the Regional Hospital District following the Health Authority's presentation of urgent priorities in 2004.

The driving force behind the last several years of hospital district budgets has been the timing of the Phase II project. Timing has been good to the budget in this regard, allowing about \$1.25 million in savings to be accumulated to offset the impact of assuming a new debt cost of \$1,000,000. Debt servicing is expected to peak at \$3.8 million dollars in 2008 and thereafter will decline fairly rapidly, as old debt is retired.

2005 Budget Alternatives	2005 Alt #1	2005 Alt #2	2005 Alt #3
Tax Requisition	\$4,908,930 0%	\$4,982,565 1.5%	\$5,031,655 2.5%
Equipment less than \$100,000	\$1,817,920 2.5%	\$1,817,920 2.5%	\$1,817,920 2.5%
Equipment greater than \$100,000	\$360,000 (borrowing allowance)	\$0	\$ 360,000 / (cash grant)
Total capital support	\$2,177,920	\$1,817,920	\$2,177,920
Section 1 Program of the Section 1 Program of			
Debt servicing	\$3,392,770	\$3,392,770	\$3,392,770
Cumulative surplus	\$1,020,850	\$1,095,180	\$784,730
Tax cost per \$100,000	\$ 34.30	\$ 34.85	\$ 35.20

<u> Alternative 1 – Status Quo Budget</u>

Under this option a status quo tax requisition (\$4.91 million) would be approved. The budget would provide \$1.817 million for minor capital equipment grants and a commitment to permit borrowing for major capital equipment up to \$360,000.

Staff project however that in order to address the peaking of debt servicing by 2008 property taxes would need to rise by 2% in 2006 and at about that same rate for subsequent years until about 2011 when debt servicing costs are expected to decline by about \$520,000. Annual capital equipment grants could rise by 2.5% annually, but there would be no funding for equipment or projects beyond that.

Alternative 2 - 1.5% property tax increase

This option would include a 1.5% increase in property tax revenues to \$4,982,565. The budget would provide \$1.817 million for minor capital equipment grants and no funding, by borrowing or otherwise for major capital equipment.

Staff project that subsequent years requisition increases would be 1.5%. This approach provides for regular increases for annual minor capital equipment grants, but does not provide any room to participate in any additional capital requests.

Alternative3 - 2.5% property tax increase

This option would include a 2.5% increase in property tax revenues to \$5,031,655. The budget would provide \$1.817 million for minor capital equipment grants and cost sharing in major capital equipment up to \$360,000. The tax cost for providing \$360,000 as a current capital allowance is about \$2.55 per \$100,000, although the actual 2005 cost is less as a result of the current accumulated surplus included in the budget.

Staff project that subsequent years requisition increases would be 2.5%. This approach allows more of any surplus to be used to directly fund additional major capital equipment rather than borrowing for that purpose.

SUMMARY/CONCLUSIONS:

Regional Hospital District's are required to approve a provisional budget. Three alternatives are outlined above which cover a range of property tax increases from 0% to 2.5%. The primary consideration for this budget is ensuring sufficient cash flow to meet debt servicing requirements as the Phase II surgical expansion approaches completion. Under any of the options above, tax increases are likely to continue to range between 1.5% and 2.5% annually to meet the debt servicing component of the budget. The difference between the options rests mainly in whether more or less of the dollars raised are committed to current capital requirements.

A typical hospital district budget includes cash grants for minor capital equipment and a borrowing allowance for more major capital equipment. For 2005 staff suggest using some of the accumulated surplus to provide an allowance for cost sharing in up to \$360,000 for major capital equipment, a cost we would typically finance over a ten to fifteen year period. The tax cost of providing current cash resources as opposed to borrowing \$360,000 for major capital equipment is about \$2.55 per \$100,000, although in 2005 this cost is reduced because of the current accumulated surplus available in the budget.

To date staff have not been provided any information from the Health Authority as to what its capital requirements for 2005 might be, but informally, Health Authority staff recognize that any increase is likely to be modest. The most recent request from the Health Authority to provide further funding support to the Phase II project, if approved, will not likely have a 2005 budget impact, but would have some impact for 2006 and beyond. Staff recommend therefore, a provisional budget with a 2.5% property tax increase as it appears to provide the best long term approach to funding both the current and some future capital requirements.

RECOMMENDATIONS:

1. That a 2005 Regional Hospital District provisional budget be approved as outlined under Alternative 3 with the following components:

Property tax requisition \$ 5,031,655 Minor capital equipment grants \$ 1,817,920 Major capital equipment grants \$ 360,000

Report Writer

General Manager Corporate Services

C.A.O. Concurrence

COMMENTS:

NANAIMO REGIONAL HOSPITAL DISTRICT 2005 PROVISIONAL BUDGET

				\$	%
REVENUES		2004	2005	Change	Change
Tax requisition total Grants in lieu of taxes Interest revenues Surplus from 2004	\$	4,908,930 26,000 32,400 1,084,065	\$ 5,031,655 26,000 53,000 1,253,080	122,725 0 20,600 169,015	2.5% 0.0% 63.6% 15.6%
	\$	6,051,395	\$ 6,363,735		
EXPENDITURES					
Administration fee	\$	8,160	\$ 8,325	165	2.0%
Debt servicing		3,190,650	3,392,770	202,120	6.3%
Capital equipment grants		1,773,575	2,177,920	404,345	22.8%
Future years expenditures		1,079,010	 784,720	(294,290)	-27.3%
	_\$	6,051,395	\$ 6,363,735		

2005/06 Capital Requirements vs Estimated Funding

2005/06 Requirements - Top Priorities	and the second				NRGH PH2 Obstetrics /	
		Equip <\$100K	Equip >\$100K	S _I Projects	Special Care Nursery Project	Total \$'s
Nanaimo Regional Hospital District Cowichan Valley Regional Hospital District Alberni-Clayoquot Regional Hospital District Central Island-wide maintenance projects not allocted to RHD's		3,011,721 1,756,565 854,632	2,905,535 1,234,546 180,000	3,430,500 1,110,000 385,270	2,223,426 228,103 94,467	11,571,182 4,329,214 1,514,369
	1	[A] 5,622,918	4,320,081	7,168,450	2,545,996	19,657,445
Estimated Funding	Funding Details	Equip <\$100K	Equip >\$100K	Projects	NRGH PH2 Obstetrics / Special Care Nursery	T-9-1
Nanaimo Regional Hospital District Nanaimo Regional Hospital District	Equipment funding based on previous year Major project funding	1,773,576	360,000	494,000	2,223,426	4,851,002
		1,773,576	360,000	774,000	2,223,426	5,131,002
Cowichan Valley Regional Hospital District Alberni-Clayoquot Regional Hospital District	Equipment funding based on previous year Previous Year's Funding		194,140	444,000 154,108	228,103 94,467	2,133,159
Ministry of Health Services / Federal Government Foundations, Auxiliaries, Other	Estimate of grant amounts	1,274,087 453,253	3,371,258 435,000	5,796,342	1 1	10,441,687
		[B] 5,292,832	4,360,398	7,168,450	2,545,996	19,367,676
Requirements (Higher) / Lower than Funding	[B] - [A]	4) (330,086)	40,317	1	1	(289,769)

			ND HEALTH AUTHORITY - CENTRAL ISLAND 0k Equipment Requirements - NRHD Items				
				T			ļ
FACILITY	DEPARTMENT	CONTROL#			TOTAL	CUMULATIVE	NRHD
RIORITIES:		CONTROL	ITEM DESCRIPTION	QTY	COST	COST	Cost Sha
CUMBERLAND LAUNDRY	N/A	03-0448	CART WASH (Cost shared 50/50 CI/NI)				40%
CUMBERLAND LAUNDRY	N/A	03-0449		1	62,500	62,500	
NANAIMO HOSPITAL	INFORMATION SYS	1541	TRACK SYSTEM-OVERHEAD (Cost shared 50/50 CI/NI)	11	75,000	137,500	
NANAIMO HOSPITAL	LAB	03-0247	UPGRADE EXISTING S.I. LANIER CQUENCE MANAGENT SYSTEM (CMS)	11	110,000	247,500	
NANAIMO HOSPITAL	NUCLEAR MED	02-0122 / 02-0123	BLOOD BANK AUTOMATED TESTING EQUIPMENT	1-1-	163,035	410,535	
NANAIMO HOSPITAL	OPERATING ROOM	01-0542	GAMMA CAMERA (REPLACE ADAC & SMV)	2	1,550,000	1,960,535	
NANAIMO HOSPITAL	OPERATING ROOM	432	LO2 LASER FOR MAIN OR	+-1-	575,000	2,535,535	
NANAIMO HOSPITAL	OPERATING ROOM	433	MICROSCOPE ENT	11	250,000	2,785,535	
		700	INICROSCOPE EN1	1 1	120,000	2,905,535	1,162,2
PRIORITIES:				+-+			
CENTRAL ISLAND	INFORMATION SYS	1546`	REPLACEMENT OF RADIOLOGY INFORMATION SYSTEM	+			
NANAIMO HOSPITAL	GENERAL X-RAY	03-0262	FLUOROSCOPIC UNIT - MOBILE C ARM	+	549,516	3,455,051	
NANAIMO HOSPITAL	GENERAL X-RAY	02-0126	MOBILE C-ARM	+	220,000	3,675,051	
NANAIMO HOSPITAL	ULTRASOUND	02-0125	ULTRASOUND MACHINE	+	220,000	3,895,051	
NANAIMO HOSPITAL	ULTRASOUND	01-0553	ULTRASOUND MACHINE WITH COLOUR DOPPLER	+-}-	265,000	4,160,051	
			W ONNE THAT GOED BY DOFFLER	1-1-	365,000	4,525,051	
				 -			
				 			
				 			
				 			

Requested

\$360,000

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	Project	Site	Category Name	P/NP	2005/06		2006/07	2007/08	2008/09	2009/10	0	Est Cost	Sharable	e VIHA Share		RHD Share
	Renovate Lab Space	NRGH	W.	۵.		\$,		.4	40	4				1	
3 Expand	Expand Microbiology into	NRGH	WCI	۵.	\$ 35,000		+47		• •	∩ +0	A +€	35,000	Yes Ves	v, √	30,000 \$	20,000
	Adjacent Space									•	+	000	3			
4 Renova	Renovate Ambulatory Care	NRGH	G (م ،	\$ 50,000	\$	\$ 000'001		·	₩	+	750,000	Yes		30,000 \$	20 000
	ile railiailve Care 10 Main	ころと	CT _P	۵.			1	,	+	↔	+	300,000	Yes	\$ 18(180,000 \$	120,000
6 Realign	Realign Incoming Power	NRGH	ਹੋ	ž	\$ 800,000	900	,		₩	-1-		0	;			
Distribution	vution								·	^	^	800,000	Yes	\$ 48(480,000 \$	320,000
8 Renova	Renovate Nuclear Medicine Hot	NRGH	WCI	Ь	\$ 50,000	\$ 000	\$ -		\$		\$ -	50 000	44,154	Assessment of Science Science	FO 000 #	
Lab							-			.	}	200'00	9		2000	
9 Renova	Renovate Old CSR Vacated Space NRGH	NRGH	Ü	2	\$ 300,000	\$ 000	\$ 000,009	•	\$	₩	1/)	000'006	92	\$ 300	\$ 000'008	
11 Renova	Renovate/Consolidate Grant	Nanaimo Health Unit	e d	ž	\$ 100,000	\$ 000	188,400 \$	ı	· 49-	₩	\	288,400	9	\$	100,000	
	61											•				
14 Increas18 Replace	Increase File Storage Area Reblace Flooring In Food Services	NRGH	I W	ط م	\$ 20,000	\$ 600	49 -4		, +A ·	₩	∨) ,	20,000	90	\$		
			T)	Ž		A	i	•	, €9-	₩	1/)	50,000	no		50,000 \$	
20 Upgrad	Upgrade Medical Gas System	NRGH	MCI	å	\$ 90,000	\$ 000	1	•	₩	49	+	, 0				
	Install Pneumatic Tube System	NRGH	J	۵	\$ 250,000			•	· +	} +	∩ +	000,08	2		\$00000	
	Expand Dining & Activity Area	Dufferin Place	ਹੈ	ــه		00	,		· → +	9 4	A +	000'067	20	\$ 250		
-	Modify Nurse Call System	Trillium Lodge	WCI	ž		00.	→		·	÷ +	n +	145,000	9		-	
26 Funding	Funding for OHS Issues	NRGH	WCI	2		+ +	7 ∀	ı	·	A 4	h /) -	70,000	9		\$ 000,07	
	S&I New Ergonomic Workstation	NRGH	WCI	۵.		\$ \$	1	, ,	· ·	∩ ••	/} \/	95,000 10,000	0 0		95,000 \$	
	Doning Hatmy Done to Daily			!												
33 Reconfi	Reconfigure Workstations	NK6H Parlonilla • Nice II	WCI	<u>ş</u> ,	\$ 55,000	٠ 00	√)	•	· +5	₩	₩	55,000	n	\$	55,000 \$	
	Telestical	rarksville & Dist. Home Support	MCI	-		\$	'	•	,	₩	√ 9	20,000	ç	*		
ab pipilo ce	Opgrade reseptione Software	NKGI	WCI	ş	\$ 80,500	\$ 00	₩	ı	•	₩	• •	80 500	2 2			
	Sat rrimary water Supply	NKGH	MCL	₹	\$ 75,000	\$	1	."	₩.	+0		75,000	2 2	ξ F		
Filtration 38 Build Fold	Filtration Build Folding Wall & New Dining	Trillium Lodos	ţ	c					_		}	000	2		\$ 000°c/	
	lrs	3600	MCT	1 _	40,000	A	V }	1	, s	₩.	√) -	40,000	0	\$	40,000 \$	
44 Renovat Area	Renovate Store Room to Office Area	NRGH	MCI	۵.	\$ 45,000	\$ 00	∜} '		, 4	₩	1 0-	45,000	D.	\$	45,000 \$	
			ı		- 1	- 1			,							
		iotal Minor Capital Projects	1	Total	\$ 2,730,500	ı	\$ 1,488,400 \$	٠	\$	\$	4	4,218,900		\$ 2,236,500	\$ 005'	494,000

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				Ż	NRHD Area	۵							
	Site	Category Name	P/NP	2005/06	/06 2006/07		2007/08	2008/09	2009/10	Est Cost		Sharable VIHA Share	RHD Share
		MAJOR CAPITAL PROJECTS	ROJECT	2									
Ph. 3 - Reno & Expand Emergency NRGH	~	Major	Δ.	÷ 2i	500,000 \$ 2,250,000 \$ 2,250,000 \$	2 \$ 000'0	,250,000	1		\$ 5,000,000) Yes	\$ 300,000 \$	\$ 200,000
N/A		Major	۵	\$	200,000 \$ 1,000,000 \$ 800,000	\$ 000'0	\$ 000'008	,	1	\$ 2,000,000) Yes	\$ 120,000	\$ 80,000
NR6H	•	Major	ž	₩	- \$ 15(000'0	150,000 \$ 1,850,000 \$,	,	\$ 2,000,000) Yes	, ↔	₩
Develop 12 Additional Beds Travell Ph. 4 - Develop new Patient Tower NRGH	Travellers Lodge NRGH	Major Major	a Ž	<> > ◆◆	v> v> ı ı	↔ ↔	\$ 1,800,000 \$ \$ - \$	2 500,000	\$ - \$ 1,800,000 \$ 500,000 \$ 24,500,000 \$ 25,000,000	\$ 1,800,000 \$ 25,000,000	No Yes	+ → + +	₩₩
4	Total Major Capital Projects			\$ 70	700,000 \$ 3,400,000		\$ 6,700,000 \$ 500,000		\$ 24,500,000	\$ 35,800,000	+ (\$ 420,000	\$ 280,000
otal	Total Capital Projects			\$ 3,43	3,430,500 \$ 4,88	8,400 \$ 6	\$ 4,888,400 \$ 6,700,000 \$ 500,000	1 11	\$ 24,500,000 \$ 40,018,900	\$ 40,018,900	\$	\$ 2,656,500	\$ 774,000
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