

2015⁹ Memorandum of Understanding

BETWEEN:

VANCOUVER ISLAND HEALTH AUTHORITY
(hereafter called “VIHA”)

OF THE FIRST PART

AND:

ALBERNI-CLAYOQUOT REGIONAL HOSPITAL DISTRICT
CAPITAL REGIONAL HOSPITAL DISTRICT
COMOX-STRATHCONA REGIONAL HOSPITAL DISTRICT
COWICHAN VALLEY REGIONAL HOSPITAL DISTRICT
MOUNT WADDINGTON REGIONAL HOSPITAL DISTRICT
NANAIMO REGIONAL HOSPITAL DISTRICT
(hereafter called the “RHDs”)

OF THE SECOND PART

WHEREAS:

1. VIHA is responsible for health service delivery on Vancouver Island, the islands of the Georgia Strait, and in the mainland communities north of Powell River and south of Rivers Inlet.
2. RHDs are responsible for providing the local share of capital expenditures as defined in the *Hospital District Act*.
3. All parties recognize the benefits of coordinating their activities through formal and informal processes within the bounds of their respective legislative and regulatory obligations.

THEREFORE:

VIHA and RHDS agree to the following:

1. That semi-annual meetings between representatives of the VIHA and RHD Boards [are](#) to:

- enable communication of key strategic and operational initiatives that are underway within VIHA as they relate to capital planning and development;
- provide a forum to support a joint dialogue on key issues for both VIHA and the RHDs;
- offer the RHDs an ability to identify specific questions or concerns they have regarding health care delivery in their communities; and
- discuss potential capital priorities.

Both VIHA and RHDs should have the opportunity to influence the agenda for these meetings and adequate time should be planned to allow for both formal and informal discussions.

These meetings will typically occur in October and late Spring.

2. That VIHA and RHDs will have regular meetings between RHD staff and the appropriate staff from VIHA. These should be viewed as “working meetings”.
3. That ad hoc updates outside of regularly scheduled meetings can be arranged to ensure timely communication of issues occurs between staff (and possibly the Boards).
4. To provide increased predictability of RHD funding to VIHA and in recognition of the requirement of each RHD Board to approve expenditures on an annual basis, that minor capital commitments be made on a rolling three-year planning cycle as follows:
 - That a maximum contribution for minor projects be set annually by each RHD in advance of year one of each planning cycle; and
 - That RHDs identify notional contributions for years two and three.

Capital expenditures include facility, ~~and~~ equipment and information management/information technology projects. In some cases, RHDs have also provided funding for Information Management/Information Technology projects.

5. That VIHA will develop a draft capital plan and identify which initiatives they intend to support using the RHD fixed share. The plan will be forwarded to RHDs on or about January 31 each year enabling the RHDs to approve their current year budgets no later than March 31.

Island Health will endeavour to provide increased predictability regarding the capital plan from year to year and from the provisional budget to final budget. Updates to ~~this~~ the capital plan as well as planned and actual use of funds should be part of the regular reporting at scheduled meetings.

6. That a post-occupancy performance measure evaluation be completed for projects greater than \$5 million and shared with the respective RHD within six to 12 months of project completion (timing to be determined based on the specific project).

7. That media releases for capital expenditures for which RHD funding is supplied be jointly produced and released by VIHA and the participating RHD.
8. That the parties agree to work together in full co-operation to best meet the needs for the required quantity and quality of health facilities for VIHA residents.
9. That a review of this Memorandum of Understanding will occur at the semi-annual meeting between representatives of the VIHA and RHD Boards immediately following local government elections.
10. That this Memorandum of Understanding may be executed in any number of counterparts each of which will be deemed to be an original, and all of which taken together will be deemed to constitute one and the same instrument. This Memorandum of Understanding may be executed and delivered by electronic means and each of the Parties may rely on such electronic execution as though it were an original hand-written signature.

In Witness of this Agreement the parties have executed this Memorandum of Understanding on the dates set out below.

Alberni Clayoquot RHD	Print name	Date
Capital RHD	Print name	Date
Comox-Strathcona RHD	Print name	Date
Cowichan Valley RHD	Print name	Date
Mount Waddington RHD	Print name	Date
Nanaimo RHD	Print name	Date

Vancouver Island Health Authority

Print name

Date