

## NORTH OKANAGAN/COLUMBIA SHUSWAP REGIONAL HOSPITAL DISTRICT

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February 9, 2024

Sent by email: [HLTH.Minister@gov.bc.ca](mailto:HLTH.Minister@gov.bc.ca)

FILE: 8900

Honourable Adrian Dix  
Minister of Health

Dear Minister:

### **Re: Urgent and Primary Care Centre Financial Obligations**

At the North Okanagan Columbia Shuswap Regional Hospital District (NOCSRHD) Board meeting held on January 23, 2024, the Board discussed Interior Health's request for the NOCSRHD to fund 40 per cent of Vernon's Urgent and Primary Care Centre (UPCC) capital costs. It is recognized that, in accordance with the Hospital District Act, a facility that is not a hospital must be designated as a "health facility" by the Minister under Section 49 of the Act to be eligible to be funded through a Regional Hospital District. The current Vernon UPCC has not yet received this designation.

While the Board carried a motion to grant Interior Health Authority's (IHA) request to pursue the designation of "health facility" for all IHA owned and operated Urgent and Primary Care Centres within the NOCSRHD for the purposes of the Hospital District Act, the motion was amended to include THAT: the Board recognizes the funding for all IHA owned Urgent and Primary Care Centres within the North Okanagan Columbia Shuswap Regional Hospital District is viewed as downloading from the Province.

The Board also made a motion THAT: the Board write a letter to the Minister of Health expressing concerns about provincial downloading requiring the Regional Hospital District to provide 40 per cent of capital funding for existing Urgent and Primary Care Centres within the NOCSRHD.

The NOCSRHD Board is in full support of the UPCC model as the team-based, holistic care approach, with coordination of care with other doctors and providers, is an integrated and comprehensive approach. This all-encompassing approach not only offsets emergency room visits but is equipped to handle the complexity of patient care requirements and provides a wide scope of patient-centred options. Investing in the health care of BC residents is essential and non-negotiable.

However, the Board is highly concerned with the downloading of costs from the government onto regional hospital districts and the taxpayer base. The Board discussed that the UPCC model seems to be the mechanism for replacing walk-in health care clinics and would therefore have 40 per cent of the capital costs funded by local taxpayers, whereas walk-in health care clinics and private medical clinics have been historically funded 100 per cent by the Ministry of Health through Medical Services Plan billings.

In closing, the NOCSRHD Board supports the patient-centred possibilities of the UPCC network but is concerned about the impact of the requested ask on our taxpayers and the download of financial

responsibility from the Province onto the NOCSRHD.

Yours truly,

**NORTH OKANAGAN COLUMBIA SHUSWAP REGIONAL HOSPITAL DISTRICT**

Per:

A handwritten signature in black ink, appearing to read 'Kevin Acton', is written over a horizontal line.

Kevin Acton  
Board Chair