Community Healthcare System Support Playbook

A roadmap for local communities to support their healthcare and emergency workers

A Living Document

BRITISH COLUMBIA
Ministry of Health

healthywestshore
A SAUNDERS FAMILY FOUNDATION PROJECT

Executive Summary

The Canadian healthcare system holds a fundamental position in our national identity. Currently, healthcare and emergency workers providing essential services in communities across BC struggle to access housing, daycare, transportation, and other necessities, negatively impacting the delivery of healthcare services.

Traditionally, the healthcare system has been seen as the sole responsibility of the provincial and federal governments, and there has been little to no role identified for local governments and communities. ***Many stressors impacting healthcare and emergency workers are not primarily or only the responsibility of senior governments but rather the purview of local governments and communities, including housing, transportation, and many other issues.***

This project is focused on empowering local communities to take an active role in supporting the Ministry of Health and Health Authorities to attract and retain healthcare workers to their area by addressing current barriers within their jurisdictions. ***The roadmap of actions outlined in this Playbook are intended to be an inclusive resource aimed at improving access to healthcare for all British Columbians, including our Indigenous Peoples.***

The ***Community Healthcare System Support Playbook*** offers a wide range of actionable steps local governments, local businesses, and community groups can take within their jurisdictions, thereby increasing their resilience, retention, and attraction of healthcare workers to our communities.

The range of initiatives outlined in this playbook empowers a community to take action to respond to stressors healthcare workers face, including, but not limited to:

- Affordable housing
- Childcare availability and cost
- Pet care availability and cost
- Cost of living generally
- Time spent commuting
- Cost of transportation, parking and lack of options outside of business hours
- Cost of education and student loans
- Long hours, overtime, and burnout
- A lack of a sense of community support
- Clinic space availability and lease costs
- Costs of fitting out a clinic
- Cost of staff and administration loads
- Technology limits
- Low availability of education spaces to train workers

The goal of this work is not to drive competition between communities but to foster collaboration with the Ministry of Health and Regional Health Authorities in supporting recruitment and retention and developing a province wide partnership in making B.C. an attractive and supportive place to live and work as a health professional.

Led by the Saunders Family Foundation, in collaboration with Thrive Social Services Society, Westplan Consulting Group, and the help of community members, this groundbreaking initiative has received essential funding support from the Ministry of Health.

This initiative represents a significant step toward fostering a thriving and resilient healthcare sector, positively impacting the lives of citizens throughout the province.

Table of Contents

Acknowledgements 3
List of Figures 6
Introduction 7
Overview of the Healthcare System 8
A Local Opportunity to Coordinate Action 11
to Support Healthcare Workers 11
Local Governments 13
The Business Community 22
Real Estate Development 27
Community Organizations 31
Educational Institutions 37
Examples for a Toolkit 42
Conclusion 42
Appendices 44
Appendix 1 – An Overview of the Canadian Healthcare System 45
Appendix 2 – An Overview of the Challenges Healthcare Workers Face 50
Appendix 3 – Funding Opportunities 56
Appendix 4 – Contact Information for Ministries within BC Government 58

Acknowledgements

Funding for this project was generously provided by:

- The Saunders Family Foundation
- The BC Ministry of Health

This project has had the benefit of contributions and ideas from an extensive range of partners and experts. Over 100 people, including physicians, nurses, a wide range of healthcare workers, healthcare administrators, municipal politicians and staff, businesspeople, the development industry, and many others provided input and ideas, and we are deeply grateful to them for their contributions, expertise, and energy.

The project was managed by Thrive Society, and the Playbook was drafted by the team at Westplan Consulting Group

The Community Healthcare System Support Team

Dave Saunders, President - The Saunders Family Foundation

David Saunders was born and raised on Vancouver Island. He and his wife have three daughters and have made their family home in beautiful Colwood.

As an entrepreneur for over 30 years, Dave has built successful businesses in tree care, excavation, development, municipal development consulting, and land and rental holdings. He also helped manage the Saunders family's Subaru dealership in Colwood for five years.

Saunders has an extensive public and municipal background. He was elected as a councillor for the City of Colwood in 2005 and as mayor in 2008. Before stepping back to spend more time with his family, Saunders held many appointments, including to the Metchosin Uplands Planning Commission, Westshore Parks and Recreation Society Board of Directors, Capital Regional District Core Area Liquid Waste Management Committee, CRD Solid Waste Advisory Committee as chair, CRD Environmental Sustainability Committee, CRD Board of Directors, City of Colwood Planning/Zoning as chair and Mayor's Task Force chair.

Active in the community, he is president of the Saunders Family Foundation, where he founded the Comfy Kids Program that provides support for community, families in need and children affected by cancer who must travel to BC Children's Hospital in Vancouver. Dave is also currently the Lieutenant Governor in Council appointee to the Royal Roads University Board of Governors. Recently, Dave has volunteered his time to spearhead the development of a Community Health Services Network Playbook. In partnership with Westplan Consulting and Thrive Social Services, Dave and the Saunders Family Foundation have developed a wide range of actionable steps that local governments, local businesses, and community groups can take within their jurisdictions, to increase the resilience, retention, and attraction of healthcare workers to our communities.

Dave was awarded the Medal of Bravery by the Governor General of Canada in 2005 for an act of heroism.

Mark Holland, Principal - Westplan Consulting Group

Mark is a partner in Westplan Consulting Group – a consulting firm specialising in community planning and real estate development projects. Mark is also a faculty member at Vancouver Island University where he helped launch and teaches in its Masters in Community Planning Program.

Mark's past work has included serving as a city planner in Vancouver, as well as being the first Manager of the City's sustainability office. He has cofounded several planning consulting firms and spent over a decade in the real estate development industry, as a VP of Development for several companies, and as a consultant.

Mark holds professional degrees in both *Landscape Architecture*, and *Community and Regional Planning*, and has dedicated his career to pursuing successful and innovative real estate projects, and planning innovations in sustainability, health promotion, urban food systems and the creation of unique and destination places.

Mark's projects have won the top planning awards including BC's *Planner of the Year,* the *Queen's Diamond Jubilee Medal*, the Provost's award for Scholarship and Teaching at Vancouver Island, and in 2022, he was inducted into the Canadian Institute of Planners' College of Fellows.

Scott Bradford, Executive Director - Thrive Social Services Society

Since 2019, Scott Bradford has been the Executive Director of Thrive Social Services Society in Victoria, B.C.

A seasoned leader with a 25-year track record in non-profits. Scott has been part of teams that have developed innovative new programs, formed new partnerships, raised significant funds, developed capital campaigns, and helped in efforts to serve more people with even better programs.

In partnership with Westplan Consulting and the Saunders Family Foundation, Scott has contributed to the development of the Community Health Services Network Playbook. This project is focused on empowering local communities to take an active role in supporting the Ministry of Health and Health Authorities in retaining and attracting healthcare workers to their area.

Scott is a recipient of the Queen's Diamond Jubilee Award as well as the United Way of Ottawa's Community Builder award.

Valerie Nicol, Principal - Valerie Nicol and Associates

Valerie is a results-oriented, strategic health system consultant with demonstrated ability to succeed in complex, multi-stakeholder environments. She is a strong collaborative leader with extensive experience in engagement and facilitation of measurable outcomes. Valerie has demonstrated success leading health system quality improvement, collective impact, and change initiatives through her work in health authority, Division of Family Practice, Doctors of BC Joint Collaborative Committees, and Primary Care Network environments. She is also an experienced Not-For-Profit Executive Director and Board Chair with a Master of Arts (MA) in Counselling Psychology from The University of British Columbia, and a partially completed Ph.D. in Health-Related Community-Based Participatory Research with Indigenous Communities at the University of Victoria.

In April 2024, Valerie joined the Community Health Services Network team to support the roll-out of the Playbook – a comprehensive collection of actionable steps that local governments, local businesses, and community groups can take within their jurisdictions to increase the resilience, retention, and attraction

of healthcare workers to our communities.

Outside of work, Valerie is a proud Mom of two lovely daughters and an adorable Maltese-Yorkie dog. She enjoys spending time with her family and friends, hiking, travelling, and yoga.

Upholding Indigenous Ways of Knowing

This Playbook intends to support communities and the health system in their efforts to eradicate systemic and institutional racism experienced by Indigenous Peoples (inclusive of First Nations, Inuit, and Métis Peoples) in BC. We endeavour to provide a Playbook and accompanying policies that ensure a trauma-informed approach that can play a role in addressing experiential and historical truths of Indigenous people seeking care in community and that enables all health care workers to advance reconciliation in primary and community care settings as outlined in: Truth and Reconciliation Commission of Canada: Calls to Action (2015); the Declaration on the Rights of Indigenous Peoples Act (2019); the In Plain Sight report (2020); and the Declaration on the Rights of Indigenous Peoples Act Action Plan (2022–2027).

Commitment to the *Declaration on the Rights of Indigenous Peoples Act*

In 2019, the provincial government passed the *Declaration on the Rights of Indigenous Peoples Act* (DRIPA). DRIPA establishes the United Nations Declaration on the Rights of Indigenous Peoples (UNDRIP) as the province's framework for reconciliation, as called for by the Truth and Reconciliation Commission's Calls to Action. Actions 18 to 24 focus on the health of Indigenous Peoples and, among other actions, call upon governments to close the gaps in health outcomes between Indigenous and non-Indigenous communities.

The roadmap and series of actions outlined in this Playbook encourage and empower action at the local level. The Playbook is intended to be an inclusive resource aimed at improving access to healthcare for all British Columbians, including the province's Indigenous Peoples.

List of Figures

Figure 1. Diagram of Levels of Government 13

Figure 2. Diagram of Canadian Healthcare System 47

Figure 3. Average House Prices in British Columbia, 2018-2022, with Forecast for 2024 51

Figure 4. Average Listed Rent by Province and Unit Type for Apt. and Condo Listings: August 2023 52

Introduction

The Canadian healthcare system is not just a fundamental pillar of our national identity; it plays a crucial role in shaping the quality of life within our communities.

> *A closer examination reveals that many stressors impacting our healthcare and emergency workers can be addressed at the local level.*

In British Columbia (BC), the shortage of healthcare and emergency response workers has become a prevailing issue that many believe is threatening the strength and effectiveness of our healthcare system. Extensive dialogue and efforts are now underway at the Provincial level to address the pressing concerns that continue to emerge across the province, such as staffing shortages, employee burnout, lack of family doctors, extended wait times for procedures and emergency care, overcrowded hospitals, and a growing sense of a crisis in the healthcare system.

While traditionally, many have viewed it as the responsibility of Federal and Provincial Governments to tackle healthcare challenges, a closer examination reveals that many stressors impacting our healthcare and emergency workers can be addressed at the local level. Our health system faces difficulties attracting and retaining doctors, nurses, emergency personnel, and other important allied healthcare workers, even as their populations grow. As a result, a collaborative effort is needed—an "all-hands-on-deck" response—to reverse this critical situation. If combined, the efforts of senior and local governments can be compelling.

The foundational premise of the Playbook is that while the parameters of the healthcare system are the responsibility of senior governments, the wellbeing of healthcare workers is key to a sustainable system, and there are many actions that local communities can take to show support for healthcare workers.

This Playbook is designed to outline a wide range of actions that can be taken by local community organizations, governments, businesses, real estate developers, educational institutions, and others to support the well-being of our local healthcare and emergency personnel in collaboration with the Ministry of Health and Regional Health Authorities.

> *This approach is not "offloading" responsibility for healthcare to local communities from senior governments. Rather, it is an initiative to empower local governments to identify opportunities and act on issues that fall within their purview and where they are uniquely positioned to be effective.*

While the actions in this Playbook could be used to support any sector of workers, this project is focused on healthcare and emergency personnel, ***who provide essential services in our communities***, in recognition of the critical roles they play and the challenges faced at a community level in retaining, supporting, and attracting healthcare workers.

By following the roadmap of action presented in The Playbook, each one of us has the potential to contribute to the resilience of our healthcare system and the well-being of our dedicated healthcare workers.

Overview of the Healthcare System

The Canadian healthcare system is a complex network of organizations and institutions working together to maintain the health and well-being of the population.

- ***The federal government*** plays a central role in governing and administering national healthcare policies and standards, and it provides a significant contribution to healthcare funding to the provinces and territories through the Canada Health Transfer. Canada has a publicly funded healthcare system defined by the Canada Health Act (Federal legislation).

- ***Provincial and territorial governments*** are responsible for delivering and funding healthcare services within their jurisdiction. They manage regional health authorities, healthcare budgets, set priorities and regulations, and ensure compliance with the Canada Health Act.

- ***The First Nations Health Authority*** (FNHA) was created in BC in 2013, and it works with other agencies and service providers in the healthcare system to provide culturally appropriate healthcare services to BC's First Nations.

- ***Healthcare providers***, including physicians, nurse practitioners, nurses, and other healthcare professionals, deliver healthcare services to Canadians and are paid through public and private funding sources. Healthcare professionals are overseen by health profession colleges that set policies and standards for licensure and practice. Physicians are licensed and regulated by the provincial College of Physicians and Surgeons.

- ***Local healthcare organizations***, collaborating with provincial and territorial governments, deliver various healthcare services paid for by the government, often focusing on ensuring accessibility, equity, and responsiveness to the needs of their communities. In B.C.:
  - Regional Health Authorities have responsibility for the health services provided to the population in their region. They oversee hospitals, Urgent and Primary Care Centres (UPCCs), and many of the community health care services delivered in their region.
  - Public health departments focus on promoting and protecting the health of local populations through health promotion, disease surveillance, outbreak management, and environmental health inspections, immunizations, health screenings, and counselling.
  - Since the launch of the Ministry of Health's Primary Care Strategy in 2018, there has been significant change to the delivery of front-line primary care services. More specifically:
    - Primary Care Networks (PCNs) have been created around the province. A PCN is a clinical network of local primary care service providers located in a geographic area. A PCN is enabled by a partnership between the local Division of Family Practice and Health Authority, along with local First Nations and

Indigenous partners.

- PCNs also have Steering Committees (SCs), convened by a local family physician who is nominated and supported by the local Division of Family Practice, to help guide resource allocation and the identification of priorities within their geographical area. PCN SC membership includes the partners listed above as well as representation from local primary care clinics, community partners, and patients and family caregivers. Community Advisory Group (CAG) members are also part of PCN SCs to facilitate improved integration of community perspectives into decision-making.

- PCNs aim to coordinate and optimize all primary care services in the region. This includes both private businesses run by primary care providers (family physicians and nurse practitioners) as well as emerging and expanding team-based models of primary care (where the addition of allied health staff expands primary care capacity, access, and quality, with examples of emerging team-based models including Foundry Centres, First Nations-led Primary Care Centres [FNPCCs], and Community Health Centres [CHCs]).

- More detail on the PCN structure and purpose can be found at https://fpscbc.ca.

- Overall, primary care providers (family physicians and nurse practitioners) serve as patients' initial contact points providing services such as check-ups, referrals, and treatment for common illnesses. Community-based medical specialists (i.e., specialist physicians) offer a wide range of community-based clinic services that patients can access based on referrals from primary care clinics (i.e., for the management of conditions requiring specialist care but not requiring hospitalization).

- Lastly, Assisted Living and Long-term Care facilities offer housing, care, and support for individuals requiring ongoing assistance with daily living activities.

Who are our healthcare and emergency personnel?

This project focuses on how local communities can support those who provide healthcare and emergency support. A list of various roles in this sector is provided below. It is not exhaustive, but it provides an insight into many of the people and roles it takes to keep our communities safe and healthy.

Healthcare Workers:

- Physicians: Including general practitioners, specialists, and assistants
- Nurses: Registered Nurses (RNs), Licensed Practical Nurses (LPNs), Nurse Practitioners (NPs), Agency Nurses, Emergency Room Nurses, Critical Care Transport Nurses
- Patient Care Technicians
- Pharmacists
- Therapists: Physical therapists, occupational therapists, respiratory therapists, speech-language pathologists
- Medical Technologists and Technicians: Laboratory technologists, radiology technologists, EMTs, paramedics, etc.
- Dietitians and Nutritionists
- Mental Health Professionals: Psychologists, psychiatrists
- Midwives
- Personal Support Workers (PSWs)
- Medical Administrative Staff: Secretaries, receptionists, billing specialists, coders
- Healthcare Managers and Executives
- Custodial and Maintenance Staff
- Community Health Workers
- Health Educators
- Volunteers and Interns
- Occupational Therapist
- Medical Transcriptionist
- Administrative workers (many types)
- Social Workers, Clinical Counselors
- Dentists and Dental Hygienists
- Optometrists
- Chiropractors and other complementary healthcare providers
- Interpreters

Emergency Personnel:

- Emergency Medical Technicians (EMTs) and Paramedics
- Firefighters: trained as first responders or EMTs
- Police Officers
- Search and Rescue Personnel
- Emergency Room Doctors
- Flight Nurses and Flight Medics
- Specialized Emergency Response Teams: Including Hazardous Material (HazMat) teams, mountain rescue teams, etc.
- Emergency Medical Responder (EMR): An entry-level emergency medical provider
- Emergency Medical Dispatchers
- Coast Guard and Lifeguards
- Disaster Response Teams
- Military Personnel engaged in emergency response.

A Local Opportunity to Coordinate Action to Support Healthcare Workers

Challenges

Today, healthcare and emergency workers face many challenges that impact the stability of healthcare services across communities. While these challenges can appear significant, the good news is that there are many opportunities for local community governments, businesses, and organizations to take action to help relieve some of the major stressors that are undermining our healthcare workforce's well-being.

Local Empowerment

Research undertaken through the development of this playbook identified several areas of high priority for local community institutions to address can support the well-being of its healthcare workers, including, but not limited to:

- Supporting more affordable housing options.
- Supporting more flexible and affordable child and pet care options.
- Reducing the costs and increasing opportunities for affordable travel and parking.
- Helping address any factors in the cost-of-living healthcare workers and their families face.
- Supporting a social network around healthcare workers to provide various types of assistance and community support.
- Creating a culture of support and celebration of healthcare workers and appreciation for their work.

The Important Role of the Coordinator

There are many options for action that local governments, businesses and community organizations have to support their local healthcare workers. However, a consistent requirement amongst all of these is that of the "coordinator."

Most actions that can significantly positively impact healthcare workers' lives require a coordinated series of actions and initiatives engaging many local community organizations. As such, many require a "coordinator role" to:

- Liaising with the Ministry of Health and the local Regional Health Authority
- Educate organizations on what measures could be taken.
- Organize meetings within or between organizations to create action plans or create and implement programs.
- To connect organizations that can help healthcare workers who need help.
- To regularly check in and ensure programs and relationships are strong and effective.
- To coordinate the implementation of any and all actions and programs.
- Monitor progress and assist organizations in adapting over time.

A central coordinating role managed by skilled and paid staff will be the most robust in ensuring programs are created, implemented, funded, sustained, and evolve appropriately over time. However, many smaller communities will not have the resources for coordinating staff.

The great fact is that "anyone can play a coordinating role" – they do not have to be a paid staff member of any organization. Individuals can step up to help coordinate even a single initiative, and that will have a positive impact.

The rest of this report focuses on the many areas where local communities can take action to support the well-being of their healthcare and emergency workers.

An Overview of the Playbook

This document is structured as a "playbook" – or a set of many possible paths of action that an organization can take to address issues and opportunities. The playbook will be accompanied by a series of supportive policies and tools intended to help facilitate implementation at the local level.

Several key organizations in a community can act in support of healthcare workers, including:

- Local Governments
- Local Businesses
- Real Estate Developers
- Community Organizations
- Educational institutions

Each community organization has its unique strengths and opportunities for leading action.

The range of actions that local organizations can take to support healthcare workers generally falls into a typology of types of actions, including:

- Committing to and creating strategies for action
- Raising awareness and making connections
- Research and communication
- Fundraising
- Supporting or undertaking specific targeted programs of action and support
- Others.

Each community organization has its unique strengths and opportunities for leading action. The playbook includes a section dedicated to each type, highlighting action options aligned with the specific characteristics of each organizational category.

More importantly, each community will need to chart its own path based on the unique social capital it has to respond to challenges and opportunities.

Together, with the opportunities outlined in this Playbook, and working collaboratively with the Ministry of Health, Regional Health Authorities, Indigenous partners (e.g., First Nations Health Authority), and not-for-profit community health care organizations, BC communities can empower themselves to support, retain and attract healthcare and emergency workers in their communities.

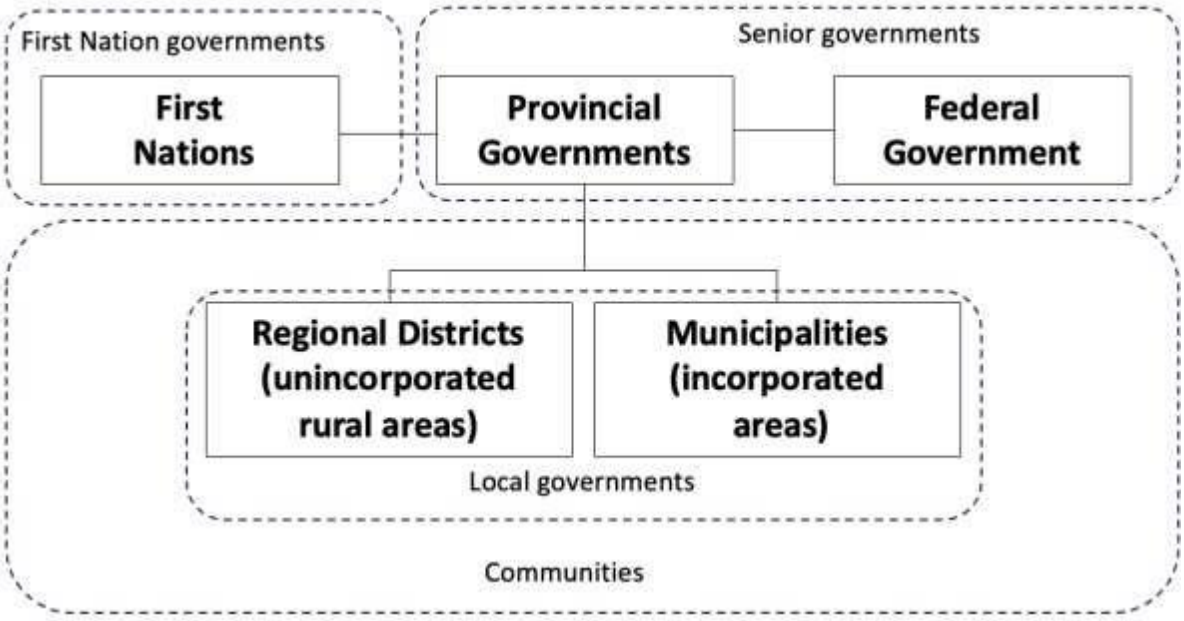
Local Governments

This section provides an overview of a range of actions local governments can take to support healthcare and emergency personnel.

Introduction

The first community organization to address is probably its most important and effective in supporting the local healthcare system and its workers – that of the local government (municipality or regional district).

Figure 1. Diagram of Levels of Government



Local governments in BC operate under provincial laws, such as the ***Local Government Act*** and ***Community Charter***, which define their roles and responsibilities. These laws establish the rules and structures that guide how municipalities and regional districts provide services to their communities. The goal is to ensure that these services align with the specific needs and desires of the people they serve. In simpler terms, these laws help local governments make decisions and take actions that benefit their communities in the best possible way.

Local governments provide various services, including essential services, water and sewage systems, waste management, road maintenance, public transportation, parks and recreation, and public safety. Additionally, they offer community services like public libraries, community centers, recreational programs, cultural events, and social services.

The second major role local governments play is as the regulatory decision-maker for the community and enforce a structure of policies, plans, regulations, and bylaws. Local governments regulate land use and development through zoning bylaws, development guidelines, and building codes. Local governments create and enforce bylaws and regulations covering noise, parking, business licensing, and other essentials to ensure compliance with local rules and regulations. They have the authority to collect property taxes from residential, commercial, and industrial properties to fund services and infrastructure projects. Local governments also promote economic growth by implementing strategies that attract businesses, support entrepreneurship, and create a favorable business environment.

Local governments also have jurisdiction over emergency services (police, fire, ambulance), which are integral to the healthcare system.

The following list of ideas provides a broad range of options for local governments working with Regional Health Authorities and the Ministry of Health to have a meaningful impact in supporting healthcare and emergency personnel (referred to hereafter as "healthcare workers").

Opportunities for local governments to support healthcare workers

Opportunities	Description
Adopt policies to support healthcare workers	A local government can adopt a range of policies to enshrine a commitment to support the healthcare system and its workers in the community, including a section in its Official Community Plan or as a standalone policy.
Create a Healthcare Committee	A local government can create a municipal task force or committee on healthcare issues and invite key knowledgeable stakeholders and representatives from many involved groups to work with the local government to develop strategies and programs and coordinate action. This committee can function like other municipal advisory committees. It can be a great resource in aiding the local government to determine the best path of action to address local healthcare challenges. It is important to include representatives of the Health Authority in the Committee to ensure accuracy in understanding issues and existing government initiatives and to build partnerships. Through working with the Health Authority, gaps can be identified that the Health Authority cannot jurisdictionally cover, and these can become key areas of local focus.

- Examples

This committee can also be expanded across several jurisdictions that may want to work together or link with other local governments' committees.

  - City of Colwood
  - District of Sooke

Adopting a Formal Healthcare Worker and System Support Strategy

Local government can create and adopt an overall strategy to support healthcare and emergency workers. This plan can outline a diverse range of actions designed to assist healthcare workers – and many are outlined in this section.

A standalone strategy presents an opportunity to unify all stakeholders, provide pertinent information, and formulate strategies for collaborative action. This approach can subsequently guide an array of local government and community-wide initiatives. Additionally, a well-defined strategy enhances the opportunities when seeking funding grants for implementation.

Research and Monitoring

Local governments can invest in research initiatives to better understand healthcare system challenges and opportunities for the community to respond and monitor trends over time. These can include, but are not limited to:

- **Healthcare Needs Assessments** - Undertaking a Healthcare Needs Assessment in some form and documenting needs and missing elements in local healthcare (following engagement with the local Health Authority, the local Primary Care Network [PCN], and other community partners to ensure that efforts are collaborative and not duplicative). The goal would be shared understanding between all partners and enhanced capacity for community asset and gaps mapping.
- **Identifying challenges** - Identifying chronic and new challenges faced by healthcare workers – and trends over time, including changes in the supply of healthcare and emergency personnel in the community.
- **Interviews** - Interviewing healthcare workers and experts to better inform the local government on issues and opportunities.
- **Precedents** - Tracking innovative initiatives in other communities. A student or volunteer can often do this research at little cost.

- **Examples:**
  - Township of Esquimalt – Healthcare Needs Assessment
  - Sooke Region Communities Health Network

Raising Awareness

Local governments can raise awareness of healthcare needs and opportunities through:

- **Campaigns** - Developing and supporting public awareness campaigns and community outreach programs to help educate the community on challenges faced by healthcare workers.
- **Opportunities** - Raising awareness of how the community can support them or organizations providing services.
- **UBCM** - Sponsoring and supporting advocacy for additional health resources and services through the Union of BC Municipalities.

Convene and Coordinate Action

Local governments can allocate staff time and resources to help coordinate actions amongst stakeholders to support healthcare workers, and they can partner with other regional local governments or community organizations to undertake action, including, but not limited to:

- **Healthcare Committee** - Create and coordinate a healthcare committee of key stakeholders to meet regularly with municipal leadership and advise on actions and issues. This initiative can be formal (as in the Municipal Healthcare Committee noted above), shorter-term (as in a Task Force), or more informal as a group of advisors providing insights, advice, and access to networks.
- **Convening** - Coordinating meetings with community, businesses, and other organizations to explore opportunities. Effective action often requires groups to work together, and the first step is to get them into a room together. Calling and hosting a meeting requires very few resources, and most will attend if the mayor or a senior official invites them.
- **Coordination** - Helping coordinate various specific support programs. Many resources are available, but someone needs to coordinate them, and city staff can play a key role in harnessing these resources on behalf of the whole community. Local governments can also help fund other organizations that can take on the coordination role.
- **Resources** - Coordinating research into and pursuing grant applications. Resources are always available through granting agencies, and city staff can coordinate the work to secure the resources to hire others to lead projects.
- **Information materials** - Creating informational materials for the education of various parties. Cities have effective communication capacity and can relatively easily create information resources to aid in a wide range of programs.

Addressing Housing Costs and Availability

Local governments can play a central role in helping alleviate housing costs and stress for healthcare workers, making it more feasible for them to live, work and stay within the local community, including, but not limited to:

- **Attainable and affordable housing** – Undertaking a wide range of general actions to increase the supply and affordability of housing generally throughout the community, including:
  Ensuring there are many decades of housing capacity approved in OCP land designations.
  Pre-setting amenity demand levels and then prezoning as much housing land as possible in order to reduce the timelines and political risk in developing housing.
  Establishing community-wide "missing middle" infill policies that increase housing choice and availability in most neighbourhoods.

- **Hospital area housing** - Amending zoning and density regulations and providing incentives to allow for the construction of more affordable housing units, both generally and targeted at healthcare workers, especially near hospitals. This can be done through Regional Hospital Boards or other partners. The healthcare-targeted housing can also be at the highest densities appropriate adjacent to hospitals and other healthcare facilities.

- **Targeting healthcare** - Targeting programs that create more affordable housing specifically for healthcare workers who need housing assistance. (e.g., density bonusing, Community Amenity Contributions (CACs), others). Some healthcare workers are paid adequately to afford market housing (physicians), but many other healthcare system workers do not have high salaries.

- **Housing agreements** - Supporting housing agreements with developers that specifically target benefits to healthcare workers, such as access to below-market rental or ownership opportunities for those on the lower income levels within the healthcare system.

- **Fee relief** - Waiving a variety of municipal fees for healthcare worker housing developments to reduce development costs and make housing more affordable. Reduction of fees or taxes must be in accordance with the Local Government Act and Community Charter.

- **Priority approvals** - Expediting approvals for healthcare worker- targeted projects to increase the supply of targeted housing.

- **Needs registry** - Working with partners to establish a registry of healthcare workers who need housing or more affordable housing and create protocols for connecting this group to housing supply, including possibly coordinating a program to connect landlords to healthcare workers who need rental housing. Some healthcare workers need permanent affordable housing, and others, such as new physicians, need access to temporary housing while they transition into a community or locums who are in a community temporarily.

- **Innovative housing** - Instituting innovative affordable homeownership programs that target healthcare workers or assist in supporting healthcare workers in accessing other housing support programs.
- **Housing agency** - Developing a housing authority or working with non-profit housing agencies to develop and manage a rental housing portfolio targeted at healthcare workers, including temporary housing for "locums" who are filling in for existing healthcare workers who are away on leave/vacation.
- **Financial support** - Working with partners to provide support or funds to assist in moving costs for healthcare workers, especially those being recruited into the community. These can include scholarships.

Supporting Development of Medical Facilities

Local governments can take a range of actions in the support and expansion of medical facilities, including, but not limited to:

- **Land use regulations** - Including medical office and clinic uses in as many OCP land use designations and land use zones as possible, especially wherever office, retail, institutional or light industrial uses are permitted. This increases the number of sites that can support these facilities and the probability of their development.
- **Supporting facilities** - Encouraging the development of healthcare facilities through measures like:
  - Density bonusing and development agreements that include clinic space as a benefit.
  - Providing tax exemptions and waiving fees for healthcare facility development.
  - Fast-tracking projects that include clinic facilities.
  - Others.
- **Matchmaking** - Connecting developers who have potential clinic space with organizations who are working to develop clinics.
- **CAC policy** - Including various types of clinic support as an acceptable Community Amenity Contribution (CAC) – noting there is no legislative requirement for CACs, and each local government has its own policies. Where CACs for clinic space are considered, ensuring there is actual demand for clinics in that area is important.
- **Available space** - Making existing or new local government facilities available for clinic use, especially in underserved areas, for various reasons.

Supporting the Operation of Healthcare Service Facilities

There are diverse healthcare service facilities, including hospitals, long-term care facilities, clinics, healthcare centres, doctors' offices, etc. Local governments can take a range of actions to support the creation and operation of healthcare facilities, including:

- **Institutional support** - Supporting the creation of non- profit/charitable organizations to serve as the managers of clinics. Municipalities often have a significant capacity of highly trained staff who can support others working to set up charitable organizations to manage healthcare facilities.
- **Community Health Centers** - Supporting the establishment of Community Health Centres (CHCs), and working with organizations already working to secure space and staff to provide these types of health care clinics in neighbourhoods (e.g., see: BCACHC - https://bcachc.org/ and Foundry BC - https://foundrybc.ca).
- **Return of Service agreements** – Establishing Return of Service Agreements with new physicians doing a residency where the local government can pay the physician for their residency in exchange for the physician staying in the community for several years following residency (often done in northern or rural communities).
- **Tax relief** - Reducing taxes on healthcare facility properties, where permitted, to reduce their operating costs and increase the probability of doctors locating their clinics in the community. The rules around tax relief are complex and must be in accordance with the Local Government Act and Community Charter.
- **Fee relief** - Reducing fees for municipal services for healthcare facilities to increase their ability to be constructed more affordably.

Community Organization Partnerships

Local governments can provide a range of support for non-profit organizations that offer special services to local healthcare workers, possibly including:

- **Programs** - Partnering with community organizations to deliver programs with municipal funding or other support.
- **Facilities** - Provide operations space within community facilities.
- **Tax relief** - Provide tax reductions for facilities. This is a complex issue, and any action must be in accordance with the Local Government Act and Community Charter.
- **Funding** - Provide some funding for programs that support healthcare workers within the constraints of a local government's ability to give funding to community organizations.
- **In-kind support** - Provide support to community or healthcare support groups, including funding, operations support, equipment, management coaching, and others.

Coordinate Support Programs with Local Businesses

Local governments can collaborate with local businesses to address challenges and opportunities, possibly including:

- **Discounts** - Facilitating partnerships and encouraging companies to provide essential supplies, offer discounts or special services, and contribute resources to benefit personnel.
- **Leadership** - Leading various programs and asking businesses to support in various ways.
    - Example: *Healthcare worker dollars* - "universal" gift certificates that can be used at most shops in their area, similar to other "local dollar programs."
- **Parking -** Offering parking spaces for healthcare workers at a discounted rate in municipal-owned parking facilities or on the streets. Parking may be part of a collective agreement with healthcare workers, so any parking initiative will require research.
- **Rideshare** - Helping coordinate a discounted or free Rideshare system.

Connecting Support with Needs

Local governments can establish mechanisms to connect available support, resources, and services with the specific needs of healthcare workers and emergency personnel. These can include:

- **Connecting needs** - Allocating staff resources in city hall or through a community organization to coordinate connecting healthcare workers and initiatives that meet their needs. This can include creating inventories of support and presenting or making information available to healthcare unions, primary care associations, or other organizations that are well-connected to healthcare workers.
- **Convening** - Coordinating various groups who each have the capacity to manage some programs to help healthcare workers – such that together, a broad range of needs and support is connected. Example: events at a local hospital to connect workers to the community support systems.
- **Advocacy** - Advocating for and lead work to secure funding and policy changes to address the specific challenges in the community.
- **Welcome wagon** - Creating and delivering a welcome wagon and needs support navigator to be a resource to healthcare workers moving into the community.

Fundraising

A local government can support fundraising efforts to provide additional financial resources to support a broad range of initiatives.

- **Hospital Foundations** - Extensive fundraising efforts are commonly associated with "Hospital Foundations." A partnership with these or other initiatives can further extend the resources that can be raised to assist healthcare workers.

- **Typical fundraising** efforts may include, but not be limited to:
  - Donation drives
  - Auctions
  - Gala events
  - Joint fundraising with schools or community organizations.
  - Matching contributions
  - Contests
- **Legacy** - Promoting programs to support estate legacy funding in the community to be channeled to healthcare support.

Providing Municipal Services

Local governments can support a reduction in the cost of living for healthcare workers, including:

- **Facilities** - Providing discounts on public facilities (recreation, others) for healthcare workers.
- **Transit** - Providing discounts to healthcare workers for transit.
- **Parking** - Providing discounts to healthcare workers for parking in various areas, including their place of work.
- **Childcare** - Providing priority spaces for healthcare in municipal managed childcare facilities.
- **Various services** - Developing any number of services not conventionally undertaken by municipalities and targeting them at healthcare workers (various) to increase their quality of life.

The Business Community

This section provides an overview of a range of actions that local businesses can take to support healthcare and emergency personnel.

Introduction

Businesses are a cornerstone of every community, and business owners and organizations are often leaders in acting on local challenges. Businesses benefit from having a robust healthcare system that can support their employees and their families because a community with ***a robust healthcare system is also more attractive to everyone, which supports economic activity and growth.***

Businesses interact with every aspect of the lives of healthcare workers through the provision of goods and services that they need and use. As such, there are many touchpoints where businesses working collaboratively with Regional Health Authorities and the Ministry of Health can take action to help increase the quality of life and reduce stress in the lives of healthcare workers.

Opportunities for local businesses to support healthcare workers

Opportunities	Description
Adopt a Formal Commitment and Strategy	Most businesses have a range of commitments to contribute to their community through philanthropy or volunteerism. Any business can commit to undertaking actions to support healthcare and emergency workers as part of their community support initiatives. ○ **A formal commitment** - This commitment can be general in nature and respond to opportunities or issues as they arise, or it can be more specific to focus on a specific issue, healthcare facility, or group of workers. ○ **Focus of action** - A business or group of businesses can review a range of options for action and select several areas to focus their efforts through adopting a "strategy." The possible initiatives outlined below can form strategy elements – formally or informally.

Provide Discounted Goods and Services to Healthcare Workers

Every healthcare worker purchases a wide range of goods and services in a community, and businesses can offer a discount to healthcare workers to help reduce financial stress in their lives. These discounts can be implemented in a variety of ways:

- The discounts are offered if a customer shows their healthcare worker ID/passcard.
- Discount cards are issued from the business to targeted groups of healthcare workers (e.g., local clinics/hospitals).
- Provision of gift cards.
- Others.

A sampling of some of the businesses where discounts could assist a healthcare worker and their family include, but is not limited to:

- Restaurants
- Bakeries and coffee shops
- Fitness centres
- Furniture stores
- Appliance stores
- Childcare or petcare
- Clothing and shoe stores
- Food stores
- Bookstores
- Hardware, home and garden stores
- Toy stores
- Florists
- Financial advisors
- Home renovators
- Housecleaning services
- Parking management companies
- Vehicle dealerships
- Rideshare companies
- Hospitality and spas

In addition to discounts, businesses can offer other assistance including, but not limited to:

- **Fitness centers** can:
  - Host fitness challenges or classes specifically designed for healthcare workers, emphasizing stress reduction and self- care, and held at times that work for healthcare shift workers.
  - Collaborate with healthcare facilities to offer wellness programs or nutrition, exercise, and stress management workshops.

- **Financial institutions** can:
  - Offer special loan programs or financial assistance options adapted to healthcare workers, like educational loans.
  - Collaborate with healthcare workers to help them with personal finances and investments. (Healthcare worker financial advisor)

Provide Discounted Goods and Services to Healthcare Workers

- **Wellness services** can:
  - Arrange for on-site massage, physiotherapy, chiropractor, or spa services where healthcare workers can receive relaxation and rejuvenation treatments during breaks or after work shifts. This can help reduce stress and promote physical and mental well-being.
- **Childcare services** can:
  - Offer flexible arrangements tailored to healthcare workers' needs, such as extended hours, weekend care, or drop-in services. This could also include backup childcare services for healthcare workers if their regular arrangements fall through or unexpected childcare needs arise.
- **Local media** can:
  - Create online platforms or social media pages where healthcare workers can share their stories, challenges, and needs and rally for support.
  - The media can report back to the community on the
  - healthcare worker's difficulties, experiences, and sacrifices. This will give the community a better understanding of their daily challenges.
  - Provide airtime for interviews, write articles, and
  - documentaries about healthcare workers' challenges.
  - Support fundraising drives for healthcare facilities and
  - workers' needs.
- **Transport services** can:
  - Local transport companies can provide dedicated shuttle services for healthcare workers that are customized to the worker's needs and schedules. This can include (Uber, Lift, Uride, BC transit)
  - Can develop a local ridesharing program that offers discounted or free rides for healthcare workers.
  - Have transport dedicated to deliveries or pick-ups for healthcare workers like Pet supplies, food delivery services, laundry pick up and drop off, pet pick up drop off and many more.
- **Petcare services** can:
  - To support healthcare workers during busy periods or when they are on call, offering them priority access to pet-sitting and walking services would be beneficial.

Coordinate Support Programs with Local Businesses

Businesses can take the lead in playing a coordinating role with other businesses, organizations, and local government to identify and take action to help local healthcare workers by:

- **Local healthcare service subscriptions** – Creating a partnership with a local medical clinic to provide services to the business's employees instead of patronizing large national or international healthcare corporate programs where appropriate.

Coordinate Support Programs with Local Businesses

- **Targeted program** - Creating and coordinating a program to gather businesses to work together to address a specific need. This can be done through an existing business organization (e.g., BIA) or by connecting with other businesses in the same area or sector.
- **Adopt a healthcare worker** - Coordinating an "adopt a healthcare worker" program to provide neighbourly support to healthcare workers in a nearby or specific facility. Businesses can connect with a nearby clinic or other facility and work with their managers to identify worker needs and challenges and coordinate businesses and others to assist in helping out. This kind of initiative needs to be carefully implemented as it will involve engagement with the personal lives of healthcare workers but can be effective if done well.
- **Healthcare worker appreciation events** – Coordinating a *Healthcare worker appreciation week* to put the spotlight on healthcare workers and focus efforts into a specific time frame.
- **Employee volunteerism** - Coordinating a program where employees can take some paid time to volunteer to assist various healthcare initiatives or workers. Many businesses support employees spending some time on various causes and supporting healthcare workers can be included. Many healthcare agencies have volunteer management programs that may be easy to connect with.
- **Network resource** - Collaborating to create a resource to connect volunteers with healthcare and emergency personnel who need support. A key factor in the success of any local support program is an effective way to connect those who have needs to those who can help.
- **Rides** - Coordinating a rideshare carpooling program where various business employees can partner with healthcare workers to support their transportation needs.
- **Raising awareness** - Promoting greater public awareness of issues and providing information about community participation opportunities. This is particularly possible when a local neighbourhood risks losing key healthcare personnel.
- **Advocacy** - Collectively encouraging and supporting the local government to act on issues. Business leaders can educate politicians about needs and how the local government can assist.
- **Create task force** - Taking the lead to form a community task force of representatives from different sectors like businesses, local government, local organizations, and healthcare to develop action plans and coordinate resources.
- **Business admin help** - Connecting those with business management skills to support medical clinics that may benefit from additional business management capacity.

Fundraising	Businesses can play a significant role in fundraising efforts to support healthcare workers and clinics, including: ○ **Events** - Organizing events where businesses donate goods or services for fundraising events, with the proceeds supporting initiatives that support healthcare workers, possibly including virtual auctions where community members can bid on items or experiences donated by local businesses, generating funds for healthcare initiatives. ○ **Galas** - Planning and hosting special events or galas aimed at raising funds and awareness. ○ **Business donations** - Encouraging employees, customers, and the community to donate money or in-kind to support healthcare workers. ○ **Donation matching** - Offering to match donations made by customers or employees, effectively doubling the impact of their contributions. ○ **Contests** - Organizing contests or raffles where the entry fees or a portion of the proceeds are directed towards healthcare worker support initiatives. ○ **Scholarships** - Support with sponsorship or scholarship healthcare students and professionals, possibly including targeting foreign- trained healthcare professionals who need to get certified for practice in Canada.
Supporting Development of Housing and Medical Facilities	Local businesses can overlap with the real estate development sector in addressing the need for housing and healthcare facilities through: ○ **Discounted support** - Providing discount goods and services to support the development and finishing of housing and space dedicated to healthcare workers and facilities. ○ **Partnerships** - Collaborating with local housing organizations, like Habitat for Humanity and other non-profit entities specializing in affordable housing solutions. ○ **Financial support** - Providing financial contributions, grants, or investments to support the construction or renovation of housing and medical facilities. (Funding for affordable housing projects, medical clinics, hospitals...), and/or more broadly coordinating a community response to a clinic that may be facing financial or other challenges.

Real Estate Development

This section provides an overview of a range of actions that the real estate development industry can take to support healthcare and emergency personnel.

Introduction

Real estate development is a subset of the overall business community. However, they are of special importance in supporting healthcare and emergency workers because they deal with the critical factors of housing and healthcare facilities.

Real estate development is a highly complicated and resource-intensive industry, but it is required to construct homes and any other commercial or institutional space. Most homes and commercial spaces that might be available for healthcare workers or facilities will be those that already exist (were constructed in the past). The elements of the real estate industry that involves existing buildings are owners (private / corporations / Real Estate Investment Trusts (REIT), others) who lease / rent space to residential and commercial tenants. The other real estate development industry aspect is the companies that get "new buildings" approved and constructed. Both aspects of the industry can take actions to support healthcare workers and facilities.

The following outlines a range of actions the real estate development industry in collaboration with Regional Health Authorities and the Ministry of Health can consider supporting healthcare and emergency workers directly.

Opportunities for the real estate development industry to support healthcare workers

Opportunities	Description
Research	A developer can increase their understanding of the challenges and opportunities related to healthcare through: ○ **Local needs** - Researching healthcare needs in the area of their projects, both for healthcare facility space as well as the needs of healthcare workers. Healthcare information can be found through regular research and likely most easily through connecting to local healthcare organizations (Primary Care Networks, others); however, there is unlikely to be a central location for information on needs.

- **Local area planning** - Work with local and senior governments to understand the short- and long-term healthcare system needs in areas where new development is being planned or contemplated. Areas with new growth often do not have enough healthcare capacity to serve the new population, and this challenge can be addressed by planning ahead in a coordinated manner.

A Company Commitment and Strategy

A developer can identify the healthcare system and workers as a priority for their company for both projects and philanthropy and develop a corporate commitment and strategy for leadership in this area. Many actions outlined in this section can be elements of such a strategy.

Providing Targeted Housing Opportunities

A developer can assist in making housing opportunities available to healthcare workers through:

- **Targeted affordable housing** - Negotiating with the local government so that affordable housing commitments in new construction are targeted at healthcare workers, where appropriate. This commitment can be included in the project's legal housing agreement.
- **Targeted rentals** - Prioritizing healthcare workers in their tenant recruitment / rental policies. Small reductions in rental rates can also be considered for healthcare workers.
- **Temporary housing** - Securing rental units for temporary locums replacing existing healthcare workers on leave. Temporary housing for locums who fill in for a physician on holiday or leave is a significant issue in supporting healthcare workers' personal needs for a more balanced life and supporting the next generation of physicians who often get started as locums.
- **Higher density near healthcare** - Negotiating with local governments for higher densities near hospitals or major healthcare facilities to provide housing for workers within walking distance of these major healthcare employers. Community plans may not acknowledge that higher density housing near major healthcare employment centres meets many housing and other community objectives, especially if some of that housing is targeted at healthcare workers.
- **Supported housing** - Considering a partnership with a healthcare agency to provide housing for healthcare workers, possibly with the support of government or philanthropic grants. Most organizations do not pursue housing projects for their constituency because they do not understand how to develop real estate. However, with a developer partner, it could be a possibility and attract funding.
- **Partnerships** - Partnering with Habitat for Humanity or another organization and helping connect healthcare workers to those opportunities.

Supporting Healthcare Workers with Housing Issues

A developer or homebuilder can assist healthcare workers in a variety of housing challenges through:

- **Advisory support** - Providing discounted, low or no-cost advisory support to a healthcare worker who needs assistance in design approvals and construction of a home or alterations to their home. These elements can be confusing, expensive and time- consuming for those with little experience.
- **Discounted fees** - Offering a discount for work done for healthcare workers.
- **Adopt a healthcare worker's home** - Creating an "adopt a healthcare workers' home" program where various development/construction/maintenance related companies can help a healthcare worker with their home. This program would require securing a group of developers or builders to participate, and then a linkage with a pool of healthcare workers (e.g., hospital or other), and terms of reference for selecting projects.

Providing Space for Healthcare Facilities

A developer can support the proliferation of healthcare facilities, especially clinics run by physicians or non-profit organizations, through:

- **Zoning** - Ensuring that healthcare facilities are included in the allowable land uses in their project rezonings. Most zoning codes are unnecessarily restrictive, and other than traffic/parking, clinics and similar facilities have few impacts on their neighbours and thus can be permitted in many areas of a city.
- **Healthcare space** - Looking to include healthcare facility space in projects where possible. Each project selects its desired land uses, and clinics and similar facilities can be planned into projects from the beginning. This initiative should be undertaken with advice or a partnership with the Health Authority to ensure optimum outcomes.
- **Interior design** - Assisting in various ways in the "fit-out" of space to be used as a healthcare facility, including advisory, design, materials, construction, and others. Healthcare facilities have many requirements for their interior design, and help can be offered to doctors and non-profit groups setting up clinics in existing or new buildings to assist them in meeting these requirements.
- **Property management** - Assisting in property maintenance and management services to a healthcare facility, including advisory, various management services, renovations, etc. Many doctors and health service providers can use assistance in managing the commercial real estate side of their business and facilities.

Build Partnerships with the Healthcare Sector and Champion the Cause within the Industry

A developer or homebuilder can assist in building relationships and partnerships between the healthcare and development sectors through:

- **Dialogue** - Supporting, hosting or sponsoring dialogue between stakeholders in both sectors to identify opportunities. These two sectors rarely interact formally, and thus, many opportunities can be lost; however, both have industry or professional organizations that could coordinate dialogue (such as the Urban Development Institute and the Health Authority or any others).
- **MOUs** - Developing letters of intent / MOUs between parties to undertake mutually beneficial projects of various kinds. A developer or development organization can formalize a commitment to work with a healthcare organization to increase the probability of long-term success.
- **Champion with municipality** - Bring healthcare leaders into discussions with municipalities to lobby for opportunities or changes. Local governments can benefit from hearing from healthcare representatives regarding opportunities or changes that would benefit local healthcare workers.
- **Raising awareness** - Promote the dissemination of important information on healthcare workers' challenges, needs and opportunities. Increasing understanding of the challenges can increase the will to act. This type of initiative can also raise awareness of larger health and demographic issues in built form, such as the need for accessible spaces and aging in place.
- **Industry initiative** - Encourage or lead the development of a "task force or committee" to be a point of contact and proactively reach out to healthcare professionals. The development industry needs someone tasked with liaising with

  the healthcare industry to optimize the identification and pursuit of opportunities.

Supporting Fundraising and Sponsoring Initiatives

A developer or homebuilder can support fundraising initiatives for programs to support healthcare workers, including:

- **Various needs** - Raising funds for housing for healthcare workers – including temporary needs and possibly grants to qualified recipients for down payments.
- **Repairs** - Raising funds to assist in repairs for a healthcare worker's home or clinic.
- **Equipment** - Raising funds to assist in securing essential equipment for a community clinic or health centre.
- **Partnerships** - Partnering with or supporting fundraising efforts with other organizations.
- **Major donations** - Donating land or facilities to healthcare organizations.

Community Organizations

This section provides an overview of a range of actions that community organizations can take to support healthcare and emergency personnel.

Introduction

Community organizations form the backbone of social activity and collaboration in every city, and even more so in small towns. Some organizations have a general community well-being orientation (e.g., Rotary, Lions), and others have a more specific orientation (e.g., streamkeepers, food banks, sports associations, etc.).

Many actions also occur in a community as self-organizing groups agreeing to work together on some initiative, and not as part of a formal society or association.

Community organizations and groups can play a key role in supporting healthcare workers in collaboration with Regional Health Authorities and the Ministry of Health through a wide range of actions, as explored below.

Opportunities for community organizations to support healthcare workers

Opportunities	Description
Adopt Strategies to Support the Healthcare System and Its Workers	A community organization can commit to undertaking actions to support healthcare and emergency workers as part of their community support initiatives. The organization can also expand their strategy beyond their organization and make it public or as a partnership with other organizations and businesses.
Research	Community groups can work together to research the extent of the challenges healthcare workers are facing in their community and identify methods for connecting to provide them with access to assistance, including: ○ **Healthcare Needs Assessments** - Conducting "healthcare needs assessments" to identify the specific needs and challenges healthcare workers and emergency personnel face in their community (following engagement with the local Health Authority, the local Primary Care network [PCN], and other community partners to ensure that efforts are collaborative and not duplicative). This information can guide the development of targeted support programs and initiatives.

- **Stakeholder interviews** - Approaching Health Authorities and healthcare organizations (such as Primary Care Networks, Physician's associations, Nurses associations or Unions, and others) to better understand the challenges they see in the community.
- **Educational partnership** - Partnering with a local university research team to fund a healthcare-related study or partnership with a K-12 school to connect more young people to the healthcare system to see it as a good career opportunity.
- **Existing data** - Engaging community and government organizations that already undertake research into health issues to secure data for their local community.
- **Supporting research** - Helping to fundraise and write grant applications to support research.

Creating a Healthcare Worker Support Strategy

Community associations can pursue a strategy within their organization or lead the community to collectively develop a local healthcare support strategy, including:

- **Convening** - Calling many stakeholders together to create the strategy.
- **Strategy** - Assisting in coordinating the strategy development work.
- **Implementation** - Coordinating the implementation of the strategy, initiative by initiative.
- **Recognition** - Celebrating and thanking the efforts of those involved.
- **Others** - Including many of the initiatives discussed below.

Raising Awareness

Community and charity organizations play a vital role in raising awareness and rallying support for initiatives to support local healthcare and emergency personnel, including:

- **Social media** - Launching social media campaigns to raise awareness about healthcare and emergency personnel's challenges, achievements, and needs. Utilize platforms like Facebook, Twitter, and Instagram to share their stories, highlight their contributions, and encourage community engagement. (e.g., create a hashtag to showcase inspiring stories and messages of support and gratitude – example: #HeroesInHealthcareNanaimo)
- **Events** - Organize public events to discuss healthcare issues and educate the community on challenges and opportunities, including guest speakers, panel discussions and educational sessions.
- **Media** - Produce a series of radio and television pieces featuring interviews with healthcare workers, emphasizing the importance of community support, offering ways for individuals to get involved, and celebrating individuals and groups offering assistance. This initiative could expand to include a partnership with a local news outlet to publish a regular column or feature segment highlighting healthcare and emergency personnel's achievements, challenges, and needs.

- **Rallies** - Host a community-wide rally in a prominent public space, inviting healthcare workers, local leaders, and community members to unite and show their support.
- **School partnership** - Partner with a local school to organize an art contest where students create artwork honoring healthcare workers, showcasing the winning pieces in prominent community spaces. This program could also include writing letters of appreciation to healthcare and emergency workers.

Connecting - Linking Support with Needs

Community organizations have the power to establish mechanisms that connect their available support, resources, and services with the specific needs of healthcare workers, including:

- **Volunteer linkages** - Organizing volunteer programs where community members can contribute their time and skills to support healthcare and emergency personnel. This can include tasks such as providing transportation assistance, running errands, offering respite care, meal deliveries, pet sitting, household chores, landscape maintenance, or transportation support, thereby relieving healthcare workers of some non- medical responsibilities.
- **Partnership building** - Establishing partnerships between the community organization and local healthcare organizations, such as hospitals or clinics, to directly connect needs with those who can volunteer support. There will also be many existing community programs that may be a good foundation for a new partnership or extension of services to support healthcare workers.
- **Access portals** - Creating resources where healthcare workers and emergency personnel can access information, support services, and resources relevant to their profession. These centers can serve as a central hub for information and assistance.
- **Training** - Developing training programs or workshops to enhance healthcare workers' and emergency personnel's skills and knowledge in various areas that may benefit them. This can include topics such as stress management, resilience, communication skills, or self-care strategies.

Community Organizations' Specific Opportunities

There are many types of community organizations, and the following offers ideas for how some specific kinds of groups can provide support.

Healthcare Advocacy Organizations: (Canadian Mental Health Association (CMHA), Diabetes Canada, Heart and Stroke Foundation Canada, and others) These organizations are of significant size and have resources and credibility with senior governments.

- **Financial** - Provide financial assistance or grants to healthcare workers facing financial hardships or scholarships for education or professional development.
- **Research** - Conduct research and data analysis to identify gaps in healthcare services and advocate for improvements.

Community Organizations' Specific Opportunities

- **Awareness** - Raise awareness about the challenges healthcare and emergency personnel face through public campaigns, media outreach, and storytelling.
- **Advocacy** - Advocate for policy changes and resources to address healthcare challenges and improve the well-being of healthcare workers.

Volunteer Healthcare Support Groups (Red Cross volunteers, Hospital volunteer Programs, Hospice Volunteer Programs, Support groups for Specific Health Conditions, Health Education and Promotions Programs, Community Health Clinics, and others). These organizations are more local but have strong relationship capital in the community.

- **Healthcare worker welcome wagon** - Create a “welcome wagon” program to welcome new healthcare workers or locums to the community/neighbourhood and get them connected to the community.
- **Adopt a healthcare worker** - Implement an “adopt a healthcare worker” program where a group gathers around a specific healthcare worker facing challenges and coordinates a range of support services for them. This program could initially be linked to new healthcare workers through the “welcome wagon” program.
- **Volunteer capacity** - Recruit and train volunteers to provide non- medical support to healthcare workers, such as running errands, assisting with administrative tasks, or offering emotional support.
- **Transportation** - Coordinate transportation services to help healthcare personnel commute to and from work, especially during late hours or emergencies.
- **Visitor support** - Provide housing and transportation services for healthcare workers visiting another city for medical or other urgent needs. (Example: Comfy Kids program in Colwood).
- **Meal support** - Organize meal delivery or support services to ensure healthcare workers have nutritious meals and necessary supplies during their shifts.
- **Wellness support** - Host "Wellness Moments" with activities like yoga sessions, art therapy workshops, and pet therapy visits to promote mental and emotional well-being among medical students and staff.
- **Support networks** - Facilitate the creation of peer support networks such as online forums and communities designed for healthcare professionals to connect with peers. (e.g., All nurses, Medscape). These networks can provide a platform for sharing experiences, offering emotional support, and exchanging knowledge and resources.

Local faith-based organizations

- **Partnerships** - Faith-based organizations can establish partnerships with local healthcare organizations, clinics, or hospitals to support joint initiatives.

- **Facilities** - Offer space within their facilities for healthcare- related workshops or support groups.
- **Emotional resources** - Provide access to spiritual support and counselling services to healthcare and emergency personnel experiencing trauma or emotional challenges in their work or personal lives.

Service Clubs and Groups: (United Way Canada, YMCA, Habitat for Humanity, Boys and Girls Rotary Clubs, Lions Clubs of Canada, Kiwanis Clubs, Royal Canadian Legion, Food Banks). These are locally oriented groups with national or international networks and many community support programs and capacities.

- **Fundraising** - Coordinate programs to raise funds for initiatives that support general or specific needs, facilities, or workers. These can assist healthcare workers facing financial hardships, such as emergency funds, access to various family needs (housing, food, clothing, etc.), assistance with travel and parking costs, etc.
- **Volunteerism** - Coordinate volunteer efforts to provide non- medical support to healthcare personnel.
- **Family support** - Provide family support services such as child-minding, after-school supervision, weekend excursions, and others.
- **Food security** - Assist in food insecurity by ensuring access to nutritious food so that healthcare workers and their families can be supported in maintaining their health and energy levels.

Fundraising

Community groups have expertise in fundraising, and this skill and capacity can be used in support of healthcare workers, including:

- **Targeted projects** - Identifying initiatives to raise funding for - individually or in partnership with other groups/businesses.
- **Charity events** - Hosting events such as charity walks, runs, galas, or benefit concerts to raise funds for healthcare workers. These events can both generate financial support and raise awareness.
- **Crowdfunding** - Using online platforms and crowdfunding websites to launch fundraising campaigns supporting healthcare workers. These campaigns can reach a wider audience and make it easy for individuals to contribute financially from anywhere.
- **Business partnerships** - Collaborating with local businesses to create joint fundraising initiatives. For example, businesses can donate a portion of their sales or hold special promotions where a percentage of proceeds are allocated to supporting healthcare workers.

Addressing Housing Needs	Community groups can work together to assist healthcare workers in their housing challenges, including: ○ **Housing connections** - Non-profit housing organizations specifically focus on housing and housing programs for healthcare workers and emergency personnel, including access to rental housing, temporary housing, below-market housing ownership, shared housing initiatives, etc. ○ **Crisis housing support** - Coordinating fundraising to assist healthcare workers facing significant housing challenges, especially in short-term/emergency situations. ○ **Housekeeping support** - Coordinating volunteer efforts to: ▪ Assist with moving efforts and costs for healthcare workers. ▪ Assist with home renovations. ▪ Assist with home and garden maintenance. ▪ Others.
Supporting Investment in Facilities and Infrastructure to Support Healthcare Services	Community organizations can work together to support the supply of healthcare facilities, including: ○ **Facility upgrades** - Raising money and providing grants or donations to healthcare facilities for infrastructure improvements, such as renovating outdated facilities, upgrading medical equipment, or implementing electronic medical record systems. This type of activity is well documented in the work of hospital foundations across the province. ○ **Facility development** - Partnering with local businesses or property owners to repurpose existing buildings or spaces into healthcare facilities. This can involve renovating vacant buildings, securing unused office spaces, or collaborating with property developers to construct purpose-built healthcare facilities. ○ **Mobile health units** - Raising money to invest in mobile healthcare units or other equipment and facilities that can enhance the ability to provide medical services to small and rural or remote communities. These units can help provide on-site medical services, screenings, and preventive care to populations that may have limited access to healthcare facilities.
Taking a Central Coordinating Role in Programs	Community organizations are well suited to take a central role in coordinating the capacity, programs, and actions across many stakeholders (local government, businesses, developers, educational institutions, and others) to be the most effective at positively impacting healthcare or emergency personnel in need.

Educational Institutions

This section provides an overview of a range of actions that educational institutions can take to support healthcare and emergency personnel.

Introduction

Educational institutions are part of every healthcare worker's life, as all healthcare roles require training. Students exposed to healthcare opportunities during their K-12 years may choose a healthcare career. Post-secondary schools then offer the training necessary to enter the healthcare field, and most post-secondary schools have alumni programs that create an opportunity to continue to support healthcare workers who are their alumni.

Educational institutions have a unique position in that they undertake both research and teaching and are connected to the senior and local governments in various ways.

These institutions continue to play many roles in the lives of healthcare workers throughout their careers, including:

- Initial professional training
- Upgrading over a career
- Educating their children and family

For more rural and remote communities looking to attract healthcare workers, the provision of supplementary education (e.g., continuing medical education) to support what is often an expanded or more fully realized scope of practice in underserved areas could be a facilitating factor. Furthermore, students and residents / trainees completing practicums often stay in the communities where they train; thus, efforts from educational institutions to position students and residents in these locations, and to position them there for extended periods of time (e.g., as a primary or "home" placement versus as a short-term placement) could be a further facilitating factor to recruit and retain healthcare workers to communities in need.

Beyond these examples, there are many additional opportunities and mechanisms by which educational institutions in collaboration with Regional Health Authorities and the Ministry of Health can play a role in supporting healthcare workers and their families.

Opportunities for educational institutions to support healthcare workers

Opportunities	Description
Adopt Strategies to Support the Healthcare System and Its Workers	Educational institutions can adopt a formal healthcare system and worker support strategy that positions the institution to play a key role in responding to the healthcare system's and its workers' challenges. Adopting a formal strategy will embed the support of the healthcare system into its core leadership and management program. Elements of this strategy can include but are not limited to: ○ Institutional objectives ○ Faculty research and educational initiatives ○ Programs ○ Staff roles ○ Facility plans ○ Community engagement strategies ○ Budgets ○ Enrolment ○ Tuition and bursaries/scholarships ○ Job placement support ○ Research initiatives ○ Micro-credentials and upskilling programs ○ Partnerships
Research and Monitoring	Educational institutions can play a key role in the research and dissemination of information on challenges and solutions for the healthcare system and the well-being of healthcare workers, including: ○ **Research partnerships** - Establishing research and funding partnerships with healthcare organizations, research institutes, and government agencies to research topics relevant to healthcare workers. ○ **Surveys** - Conducting surveys or needs assessments to gather insights directly from healthcare workers and emergency personnel. These assessments can help identify specific challenges, preferences, and areas where additional support is required in a community. They can also assist in shaping educational and support programs the educational institution offers. ○ **Trend tracking** - Conducting longitudinal surveys and research into healthcare workers' challenges and the trends or effectiveness of various programs implemented over time. ○ **Precedent research** - Researching other healthcare systems and initiatives and policies that support the well-being of healthcare workers and local support for healthcare. ○ **Policy analysis** - Monitoring the evolving landscape of healthcare policies and programs and evaluating their impacts. ○ **Educational grants** - Leveraging funding opportunities only available to educational institutions (e.g., MITACS, N/SSCHERC, others) to focus on creative strategies and partnerships for supporting the healthcare system and its workers.

	○ **Think tanks** - Engaging healthcare system managers and leadership in innovative programs to harness the intellectual capacity of the educational institution to address key challenges.
Raising Awareness	Educational institutions play a key role in a community in raising awareness of important issues and possible solutions, including: ○ **Campaigns** - Launching awareness campaigns focused on healthcare and emergency personnel, highlighting their contributions, challenges, and needs. These campaigns can include informative posters, videos, social media campaigns, and awareness events to engage students, faculty, and the community. ○ **Guest speakers** - Organizing guest speaker events where healthcare professionals, emergency personnel, or representatives from healthcare organizations can share their experiences, expertise, and insights. These sessions can aim to inspire educational institutions to take action and make an effort to address the needs of healthcare workers. ○ **Volunteer connections** – Providing volunteer programs and support to connect students to the healthcare field so they get interested in it as a career choice. ○ **Alumni support** - Promoting the availability of counselling services and wellness programs through various communication channels, especially to the alumni of its healthcare-related programs. ○ **Advocacy** - Advocating with senior governments and health institutions for partnerships that promote research, knowledge exchange, and the development of support programs and policies. ○ **Focus on healthcare** - Launch or support an existing "Mental Health Awareness Week" and convene healthcare professionals to share their experiences and coping mechanisms with students and the community.
General Education and Training Initiatives	Educational institutions can undertake a range of training and educational initiatives to support the healthcare system and workers, including: ○ **Curriculum enhancement** - Encouraging many faculties, departments, and programs to integrate information and projects on the challenges faced by the healthcare system and workers in their curriculum and assignments to increase the general awareness of challenges and solutions across the student body. ○ **Professional development** - Offering ongoing professional development opportunities for healthcare workers, including conferences, seminars, and webinars. These can be offered in ways and at times that are convenient for healthcare workers and provide access to the latest medical advancements, best practices, and networking opportunities.

- **Alumni support** - Providing programs that assist healthcare workers in dealing with trauma and burnout and offer strategies to help healthcare workers manage challenging situations effectively. These can be especially effective when targeted at alumni who already have a connection with the institution.
- **Teaching self-care** - Integrating work-life balance and self-care seminars into the healthcare program curriculum to prepare students for the challenges that lie ahead in their careers and build a caring relationship with students where they experience the school supporting them after graduation.
- **Mentorship** - Establish a mentorship program where experienced healthcare professionals mentor aspiring medical students, providing guidance and insights into the medical field, and coaching them in their careers' early years to build resilience.

Specific Opportunities

Educational institutions offer different programs, and these programs can pursue initiatives for students of various faculties and programs to advance their skills by implementing programs, practicums and internships in ways that support local healthcare workers, possibly including:

- **Counselling and psychology** – offering counselling and coaching support to healthcare workers or establishing a peer support network for healthcare workers managed by practicum students.
- **Physical development / Human Kinetics** – offering fitness facilities, classes and a variety of health and recovery support initiatives to healthcare workers.
- **Architecture and Planning** – offering support for renovations and approvals to healthcare workers' homes.
- **Landscape architecture or horticulture** – offering landscape design, construction, and maintenance services to healthcare workers.
- **Trades** - offering programs where trades students work on healthcare workers' properties and assist in renovations or other projects.
- **Automotive** – offering free / discounted automotive services (oil changes, tune-ups, others) to healthcare workers.
- **Hairdressing** – offering hair services to healthcare workers.
- **Accounting and business management** – offering business and accounting/tax support to healthcare workers and their facilities.
- **Culinary trades** – offering food services to healthcare workers and their families.
- **Tutoring and education** – offering help to healthcare workers' children in their studies.
- **Culinary trades** – offering food services to healthcare workers and their families.

	○ **Tutoring and education** – offering help to healthcare workers' children in their studies. ○ **Childhood education** – offering childcare and support services to healthcare workers' families. ○ **Others.**
Community Organization and Business Partnerships	Educational institutions can support or partner with any number of community organizations or businesses in a variety of initiatives to support healthcare workers, including: ○ **Facilities** - Providing access to facilities the school can provide to support initiatives (classes, events, fitness, others) ○ **Campaigns** - Supporting awareness raising and educational campaigns. ○ **Fundraising** - Supporting fundraising campaigns. ○ **Alumni connections** - Encouraging alumni to support various programs.
Fundraising	Educational institutions can support fundraising initiatives, including: ○ **Alumni** - Contacting their alumni network, seeking donations and support for healthcare worker initiatives. Alums may feel a strong sense of pride in contributing to the well-being of their community's healthcare heroes. ○ **Healthcare scholarships** - Offering scholarships, bursaries, or financial aid programs to attract more individuals into nursing programs and address the nursing shortage. ○ **Crowdfunding** - Organizing targeted online crowdfunding campaigns that can mobilize a broader community, including students, faculty, staff, and the public, to raise funds for healthcare worker support programs. ○ **Fundraising partnerships** - Partnering with local businesses and corporations to sponsor or host fundraising events or donate funds for healthcare worker initiatives, including galas, charity runs, auctions, and many others. ○ **Social media** - Utilizing social media platforms to promote fundraising efforts can reach a wider audience, including potential donors who may be passionate about healthcare causes.

Examples for a Toolkit

This Playbook has outlined various options for action across a broad range of local community organizations. While the initiatives are presented at an overview level, numerous steps and resources are required to implement almost any of the suggested paths of action.

A growing series of initiatives are already underway in many communities. A few of the many that are underway with connections to the process of creating this Playbook include:

- **Central Saanich** is working to add healthcare-supportive policies to their OCP.
- **Shoreline Medical Clinic** is being supported by local municipalities on Vancouver Island.
- **Non-profit clinics** are under development in the Westshore communities outside of Victoria.
- **The Westshore Primary Care Society** is establishing and operating community-based primary care clinics
- **Colwood** has established a municipal Healthcare Committee to advise the city on how to support healthcare workers and enhance services.
- **The Sooke Regional Community Healthcare Committee** has undertaken many initiatives.
- **Municipally owned clinics** are under consideration by some municipalities on Vancouver Island to provide services in underserved areas.
- **A rideshare program** is under development in Colwood to get rideshare programs donating rides for healthcare workers who need them.

A "Toolkit" of supportive policies and other tools and resources is currently being created to accompany the playbook, with the goal of helping to facilitate implementation at the local level. Examples of tools underway include sample work plans, draft agreements, draft budgets, and many other tools that would make it easy for communities and organizations to take rapid action on any initiatives that are identified as being viable and helpful.

Conclusion

The Community Healthcare System Support Playbook offers a path of action to bring together communities and stakeholders working in collaboration with Regional Health Authorities and the Ministry of Health to address crucial healthcare challenges in British Columbia. This comprehensive roadmap offers practical solutions to work together to improve our healthcare system.

Supporting and retaining healthcare and emergency personnel is vital, as many of the challenges they encounter fall within the jurisdiction of local governments and communities.

This initiative has come to life thanks to the dedication of the Saunders Family Foundation, Thrive

Society, community members, and the essential funding support from the Ministry of Health. It reminds us of the importance of our Canadian healthcare system in shaping our national identity and the well-being of our communities.

The Playbook acknowledges that while addressing healthcare challenges is often the responsibility of Federal and Provincial Governments, local involvement is crucial. Supporting and retaining healthcare and emergency personnel is vital, as many of the challenges they encounter fall within the jurisdiction of local governments and communities.

The concept of a multi-lateral support system offers a clear vision of a resilient healthcare system that is understandable and embraced by various stakeholders. The Playbook outlines actionable steps and thereby empowers local communities, governments, businesses, real estate developers, educational institutions, and others to actively contribute to the well-being of our dedicated frontline healthcare workers. It will be accompanied by a series of supportive policies and tools intended to help facilitate implementation at the local level.

By implementing the Playbook's strategies, we can build a stronger and more sustainable healthcare system, ensuring better access to care and attracting and keeping valuable healthcare professionals and services.

We now have a roadmap for a transformative journey to empower local communities to take a major role in supporting their healthcare workers and securing and expanding available services. Together, we can address the pressing challenges and create a healthier future for all residents of British Columbia.

Appendix List

1. Overview of the Canadian Healthcare System

2. Challenges Healthcare Workers Face in Our Communities

3. Funding Opportunities

4. Contact Information for Ministries within BC Government

Appendix 1 – An Overview of the Canadian Healthcare System

This appendix provides an overview of the Canadian healthcare system and its major organizations and responsibilities. It demonstrates how complex the set of relationships and responsibilities are and how little connection it has to local communities and healthcare workers' daily needs and lives.

The Canadian Healthcare System

The Canadian healthcare system is a complex network of organizations and institutions working together to maintain the health and well-being of the population. Canada operates a healthcare system funded and regulated by the federal and provincial governments.

The federal government plays a central role in governing and administering national healthcare policies and standards, and it provides a significant amount of healthcare funding to the provinces and territories through the Canada Health Transfer. Canada has a publicly funded healthcare system as defined by the Canada Health Act (Federal legislation).

Provincial and territorial governments are responsible for delivering healthcare services within their jurisdiction. They manage regional health authorities, healthcare budgets, set priorities and regulations, and ensure compliance with the Canada Health Act. In addition, these regional authorities are crucial in tailoring healthcare services to meet the specific needs of their populations. Provinces and Territories receive healthcare financial transfers from the Federal Government.

Healthcare providers, including physicians, nurse practitioners, nurses, and other healthcare professionals, deliver healthcare services to Canadians and are paid through public and private funding sources. Working alongside them are private healthcare providers, such as clinics and insurance companies, which offer services not covered by the public system. These providers often require out-of-pocket payments or private insurance coverage. Healthcare professionals are overseen by professional colleges that set policies and standards for licensure and practice. For example, physicians are licensed and regulated by the Provincial College of Physicians and Surgeons, a quasi-judicial entity that enjoys arms-length independence from the government in most provinces. Physicians and other health care professionals also organize under provincial professional associations, which act on behalf of physicians or health care professionals as advocates around pay, working conditions and government relations much as a union functions. Health care unions also play an important role in representing the interests of health care workers.

The First Nations Health Authority (FNHA) was created in BC in 2013, and it works with other agencies and service providers in the healthcare system to provide culturally appropriate healthcare services to BC's First Nations.

Local healthcare organizations, collaborating with provincial and territorial governments, deliver various healthcare services paid for by the government, often focusing on ensuring accessibility, equity, and responsiveness to the needs of their communities. In B.C.:

- Regional Health Authorities have responsibility for the health services provided to the population in their region. They oversee hospitals, Urgent and Primary Care Centres (UPCCs), and many of the community health care services delivered in their region.

- Public health departments focus on promoting and protecting the health of local populations through health promotion, disease surveillance, outbreak management, and environmental health inspections, immunizations, health screenings, and counselling.

- Since the launch of the Ministry of Health's Primary Care Strategy in 2018, there has been significant change to the delivery of front-line primary care services. More specifically:

    - Primary Care Networks (PCNs) have been created around the province. A PCN is a clinical network of local primary care service providers located in a geographic area. A PCN is enabled by a partnership between the local Division of Family Practice and Health Authority, along with local First Nations and Indigenous partners.

    - PCNs also have Steering Committees (SCs), convened by a local family physician who is nominated and supported by the local Division of Family Practice, to help guide resource allocation and the identification of priorities within their geographical area. PCN SC membership includes the partners listed above as well as representation from local primary care clinics, community partners, and patients and family caregivers. Community Advisory Group (CAG) members are also part of PCN SCs to facilitate improved integration of community perspectives into decision-making.

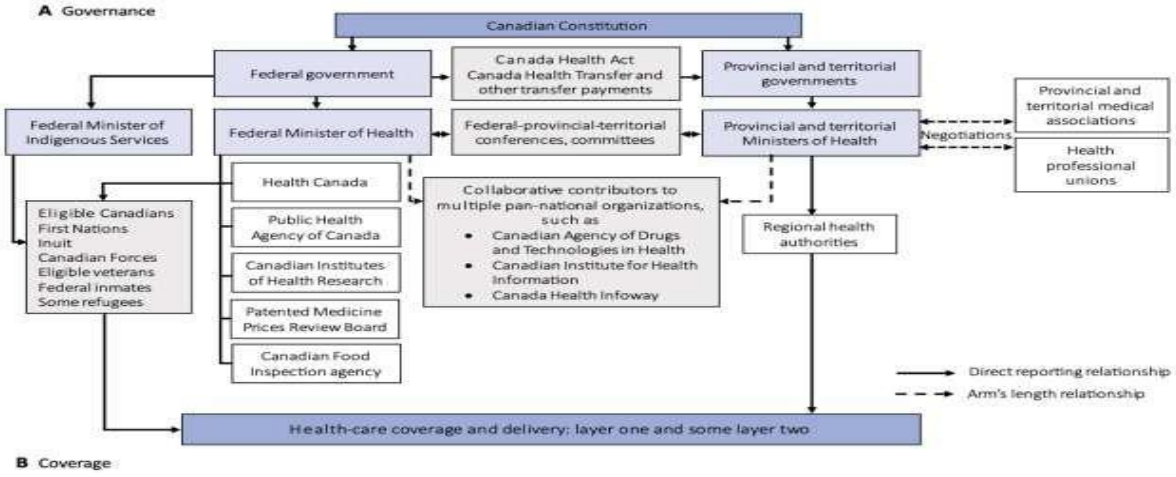
    - PCNs aim to coordinate and optimize all primary care services in the region. This includes both private businesses run by primary care providers (family physicians and nurse practitioners) as well as emerging and expanding team-based models of primary care (where the addition of allied health staff expands primary care capacity, access and quality, examples of emerging team-based models include Foundry Centres, First Nations-led Primary Care Centres [FNPCCs], and Community Health Centres [CHCs]).

    - More detail on the PCN structure and purpose can be found at https://fpscbc.ca.

- Overall, primary care providers (family physicians and nurse practitioners) serve as patients' initial contact points providing services such as check-ups, referrals, and treatment for common illnesses. Community-based medical specialists (i.e., specialist physicians) offer a wide range of community-based clinic services that patients can access based on referrals from primary care clinics (i.e., for the management of conditions requiring specialist care but not requiring hospitalization).

- Lastly, Assisted Living and Long-term Care facilities offer housing, care, and support for individuals requiring ongoing assistance with daily living activities.

Figure 2. Diagram of Canadian Healthcare System



B Coverage

	Services	Funding	Administration	Delivery
Layer one Public services (Medicare): All public funding	Hospitals Physicians Diagnostics	Public taxation	Universal single-payer systems Private self-regulating professions	Private professional for-profit and not-for-profit facilities, and public arm's length facilities
Layer two Mixed services: Combination of public and private funding	Prescription drugs Home care Long-term care Mental health care	Public taxation Private insurance Out-of-pocket payments	Public coverage is targeted Public regulation of private services	Private professional for-profit and not-for-profit facilities, and public arm's length facilities
Layer three Mixed services: Almost all private funding	Dental care Vision care Complementary medicine Outpatient physiotherapy	Primarily private insurance, out-of-pocket payments, with some public taxation	Private ownership Private professions Limited public regulation	Private professional for-profit facilities

Note. This diagram provides an overview of the Canadian Healthcare System, detailing its structure, components, and interrelationships. (source)

Major Players and Responsibilities:

Several key players and their specific responsibilities are notable within the Canadian healthcare system. ***Health Canada***, as part of the Health Portfolio, ensures the availability of health services and works towards reducing health risks. Its regulatory role includes the authorization of health products, with services spanning various areas such as product safety, drugs and health products, environmental and workplace health, food and nutrition, the healthcare system, health concerns, healthy living, and health science and research.

The Public Health Agency of Canada (PHAC), another member of the Health Portfolio, focuses on disease prevention, response to public health threats, promotion of physical and mental health, and providing information for informed decision-making. PHAC offers an array of services, including public health notices, disease and conditions information, guidance for healthy living, travel health advice, monitoring and managing food recalls, risks, and outbreaks, vaccine and immunization initiatives, biosafety and biosecurity measures, emergency preparedness and response, funding opportunities, surveillance programs, public health practice, and recurring reports.

Perspectives and Comments on Roles:

The Canadian healthcare system collaborates with federal, provincial/territorial, and local entities. It is important to find a harmonious balance between regulating and providing healthcare services, ensuring they are accessible, fair, and responsive to the community's needs. The system recognizes the

challenges and diverse perspectives it faces, reflecting the interests and demands of various stakeholders.

Healthcare System at the Local Level

The Canadian healthcare system operates at various levels. The local level ensures accessible and equitable healthcare services to communities. Here, we explore the significant players and their responsibilities and gain insights into the roles and perspectives within the local-level healthcare system.

Primary Care is one of the key components of the local healthcare system, which serves as the initial point of contact for patients seeking healthcare services. Family doctors, nurse practitioners, and other healthcare professionals constitute team-based primary care service delivery. Their responsibilities encompass a wide range of services, including check-ups, specialist referrals, and treatment for common illnesses. By offering comprehensive and personalized care, primary care providers play a vital role in promoting preventive healthcare and addressing the immediate healthcare needs of individuals.

Community Specialist Practices are physician-owned medical offices servicing as a home for specialist physicians who provide non-hospital-based specialist services such as consultations and outpatient procedures.

Hospitals are integral to the local healthcare system, providing essential acute care services. They deliver emergency care, surgical interventions, and inpatient treatment. Operating under the oversight of regional health authorities, hospitals ensure that individuals receive specialized care for critical health conditions. These institutions are typically funded through global budgets, with community boards, voluntary organizations, and regional health authorities playing significant roles in their operation and governance.

Community Health Centres and similar clinics are crucial in delivering healthcare services to local communities https://www.cachc.ca/ourmembers/. They offer a wide range of services, including immunizations, health screenings, and counselling. Moreover, these can cater to the specific needs of different populations, such as seniors, children, refugees, and individuals with mental health concerns. Community health centres and clinics provide specialized care close to home, improve healthcare access, and promote community well-being.

Foundry Centres, created in 2015 through funding from the Provincial Government, Graham Boeckh Foundation and with commitments from other organizations, provide young people and their families/caregivers with resources for primary and specialty care, mental health and wellbeing, substance use, social supports and services, navigation assistance and self-care.
https://foundrybc.ca/

Long-term Care Facilities are crucial in providing housing, care, and support to individuals who require ongoing assistance with daily living activities. These facilities are primarily funded and regulated by provincial/territorial governments. Long-term care services encompass a broad spectrum, from assistance with basic activities like eating, bathing, and dressing to comprehensive healthcare support. The provincial/territorial governments are responsible for ensuring the availability and quality of long-term care services. At the same time, individuals may contribute to room and board costs, which can be subsidized based on specific circumstances.

Public Health Departments at the local level are responsible for safeguarding and promoting the local population's health. Their responsibilities include health promotion and education, disease surveillance and outbreak management, and environmental health inspections. In addition, public health departments contribute to maintaining the local population's health by focusing on preventive measures.

Local Healthcare Organizations are a diverse group of organizations and areas of practice that ensure that healthcare services meet the specific needs of their communities. A wide range of organizations and NGOs provide a broad array of healthcare-related services. By partnering with healthcare providers, these organizations strive to deliver services not covered by the public healthcare system. In addition, they aim to enhance accessibility and responsiveness to the diverse healthcare needs of the local population.

Considerations

The healthcare system in Canada is funded and regulated such that the public sector can only provide the significant majority of health services.

When conditions evolve to be such that significant pressures are being put on the system and healthcare workers, the focus becomes lobbying senior government for changes and increased resources – directly connecting politics and healthcare.

The COVID pandemic in the early 2020s created a major additional stress on the healthcare system that was facing existing challenges. These combined challenges have led to an undersupply of healthcare workers in the system today.

Central to the purpose of this document is the recognition that some of the key issues our healthcare system faces are not within the purview of the federal and provincial governments. Many challenges healthcare workers face today, such as housing and living costs, availability of zoned land for housing and health/medical facilities, and many more, are within the purview of local governments and organizations. The challenges facing our local community healthcare system today require us to work together to address all of these.

Appendix 2 – An Overview of the Challenges Healthcare Workers Face

This appendix explores the significant challenges we face in the healthcare system concerning stresses on our healthcare workers and their connection to local governments and organizations.

Housing

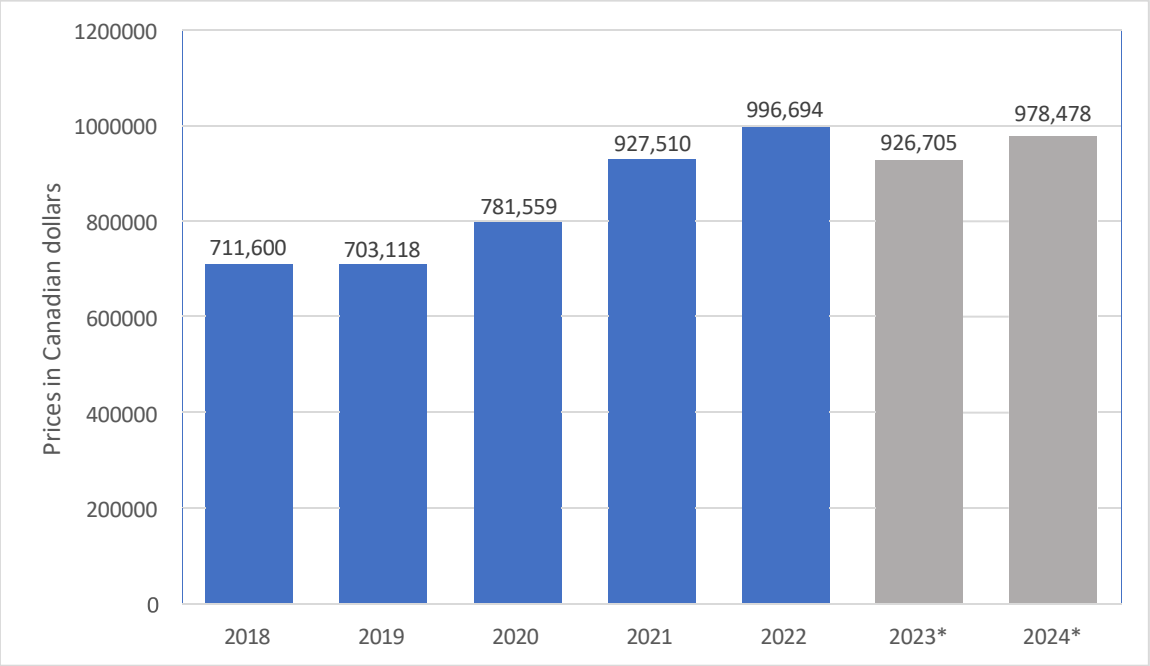
High housing costs make it difficult for healthcare workers, especially those with lower incomes, to find affordable accommodation near their workplaces. In addition, if a large portion of their income goes towards housing, healthcare professionals may struggle to meet their other basic needs. While physicians, surgeons and others are paid well in the healthcare system, they cannot perform their roles without the support of dozens of other workers in the system – most of whom are paid average salaries.

Even physicians with good incomes can still face challenges in housing since most operate their clinics as small businesses under the healthcare service agreements. As such, they are classified as "self-employed" and face challenges securing mortgages in their first several years of practice.

The average house price in British Columbia in 2022 stood at about $997,000 Canadian dollars – significantly more than some other jurisdictions. Condominiums and townhouses are generally less expensive; however, even significantly reduced housing prices are still expensive.

The payment on a mortgage is approximately $500-700/month per $100,000 borrowed, depending on the interest rates. As such, for a $500,000 townhouse or condominium, with a $100,000 downpayment, the family would be paying $2,000-$2,800 a month in mortgage costs, plus utilities, taxes, insurance, and maintenance costs – pushing that cost over $3,000/month – in after-tax income. This means a condominium or townhouse home will require between $40-$50,000 annually in gross income. This translates into a $25-30/hr salary rate – just to pay for housing.

Figure 3. Average House Prices in British Columbia, 2018-2022, with Forecast for 2024



Note. This diagram depicts average house prices in British Columbia from 2018-2022, with a forecast for 2024. (Source)

The cost of buying a home has become so expensive that many people rent for increasingly long periods of time. While renting is a legitimate and respectable form of tenure, many cities do not have enough rental housing stock to supply both new renters (young adults, immigrants, others) and to keep a growing percentage of existing renters in rental housing stock.

Historically, many purchased a home in their 30s and freed up the rental stock for the next generation. With the high cost of purchasing a home, many are staying in the existing rental stock for much longer. This has created significant demand for rental units, which has driven up rents rapidly, triggering government rent control legislation in some cases. Incentives and financing are offered for new-built rental housing; the challenge is that new housing is expensive. The growing cost of rents then reduces the ability of renters to save a downpayment to purchase a home, further prolonging their rental tenure and increasing the demand for rental housing.

The reality of paying current rents for homes now requires a significant salary to cover rent, utilities, and insurance. With an average rent for a 2-bedroom unit in BC frequently over $2,400 and with utilities and insurance added, it again requires a salary of over $30,000 after taxes to pay for housing.

Figure 4. Average Listed Rent by Province and Unit Type for Apt. and Condo Listings: August 2023

Provincial Overview

Average Listed Rent by Province and Unit Type for Apt. and Condo Listings: August 2023

	Average Rent					% Change Y/Y				
Prov.	Total	0B	1B	2B	3B	Total	0B	1B	2B	3B
AB	$1,578	$1,026	$1,419	$1,760	$1,780	16%	7%	17%	15%	14%
BC	$2,622	$1,949	$2,379	$2,857	$3,408	10%	4%	13%	9%	6%
MB	$1,462	$929	$1,253	$1,618	$2,065	10%	-5%	8%	10%	9%
NS	$2,014	$1,483	$1,880	$2,261	$2,492	1%	-13%	6%	5%	8%
ON	$2,432	$1,788	$2,248	$2,708	$2,890	9%	7%	11%	9%	8%
QC	$1,920	$1,444	$1,687	$2,075	$2,406	14%	12%	13%	12%	10%
SK	$1,089	$856	$1,017	$1,187	$1,343	4%	7%	4%	5%	7%
CA	$2,008	$1,445	$1,850	$2,191	$2,413	11.3%	8%	13%	11%	8%

Source: Urbanation Inc, rentals.ca network data

Note: This chart displays the average listed rent by province, distinguishing between apartment and condo listings and further breaking down by unit type. (Source)

Most large hospitals and major healthcare facilities are in more urbanized areas, where housing is the most expensive. As such, the cost of housing has become a significant stress factor in the lives of healthcare and emergency workers.

Beyond just the cost of a mortgage or rent, additional costs such as insurance, taxes, utilities, repairs, and others continue to climb faster than incomes. As such, the combined costs of all factors in housing remain a major challenge to our healthcare and emergency workers.

In rural areas of the province a key issue is access to suitable temporary rented accommodation while they find or build a home in the community which may take several months or up to a couple of years.

Transportation

Housing is typically less expensive away from metro core business areas. As a result, many choose to live further from the city, and, consequently, farther from major healthcare centers. This distance triggers the familiar challenge of long commutes, which leads to many negative factors in terms of stress, fatigue, transportation costs, less time with the family and for healthy living, and many others.

Shift work often creates challenges to accessing public transit -which may not run early enough for an early morning shift or late enough for a late shift.

Many cities are increasing the cost of parking to deter automobile use; however, this approach requires efficient alternatives to mobility that would connect housing to where healthcare facilities work. In some cases, Health Authorities may offer bus passes to employees. However, the truth is that only a few cities have transit systems capable of catering to families with members working at most healthcare institutions. Consequently, transportation costs are rising significantly.

Childcare

The average expenses for daycare in British Columbia are covered by parents, as stated in the Childcare Provider Profile Survey of the region. The BC Government notes that the province's average daycare cost is approximately $1,000/month.

The responsibility for childcare is often disproportionately on women, who also occupy a disproportionate amount of the lower pay levels in the healthcare system – many doing shift work.

The Province is expanding its $10/day daycare program to help address this issue, but the challenges remain in accessing daycare. Low wages, burnout and other factors are challenging many daycare providers, and the supply of daycare spaces is a real challenge for many.

This situation is especially challenging for healthcare and emergency workers as they often work less predictable shifts, many after business hours. Hiring a child-care provider (babysitter, nanny) in 2023 costs around $20/hr typically, an amount which seriously erodes the income of a healthcare worker on a night shift.

Petcare

Many individuals or couples may not have children, but many will have pets. While some pets are more self-sufficient, dogs require supervision over the course of the workday.

The cost of doggy daycare varies significantly. Pet Keen's price guide in 2023 notes it typically costs $35-51/day for daycare (and similar or slightly more for overnight care) or $700-$1,000/month for business days. This price is close to the cost of childcare.

General Cost of Living

The general cost of living continues to rise, especially with higher inflation rates – increasing the costs of everything related to daily living. Food costs have risen significantly in Canada, as well as consumer goods, such as clothing, home and recreational goods, and many others, have increased dramatically in recent years.

Education

Healthcare and emergency workers require significant training to do their job, from one- or two-year certificates to nearly a decade of post-secondary education to become a doctor and more to become a specialist. The cost of rent and living for most students has also increased significantly. The combined tuition and living costs can deter individuals from pursuing education or, more commonly, result in significant student loan debt. Many sources suggest that the average student loan debt for a doctor is in the range of $100,000.

The provincial and federal governments offer various programs for student loan debt assistance and other financial incentives to attract students to the healthcare field. However, many healthcare workers face significant challenges at the beginning of their careers as their debts are high, but they only receive entry-level salaries.

Working Conditions

A key issue that is receiving more attention today is the working conditions that our healthcare and emergency workers face daily. The COVID-19 pandemic has exacerbated some of the challenges. However, there were many problems before the pandemic that have resulted in record levels of burnout and healthcare workers leaving the profession.

The pandemic significantly impacted the workplace experience for healthcare workers, with ongoing implications. Over 85% of healthcare workers felt more stressed during and since the pandemic due to increased workloads. Nearly two-thirds of healthcare workers considering leaving their jobs noted that stress was a primary reason. (Source)

A recent study in Canada suggested that up to 40 percent of healthcare workers in 2021-2022 are facing symptoms of burnout, and fifty percent intend to leave the healthcare system altogether. (Source)

In later 2021, there were 126,000 vacancies in the healthcare and social assistance sector – nearly double the vacancies two years earlier. (Source)

From 2020 to 2021, there was a notable decline in the provision of healthcare services by physicians in Canada, with a 7.9% decrease overall. Family medicine experienced a 7.1% decrease, while specialists saw an 8.9% decline. This decline marked the first time in 20 years that total physician payments experienced a decrease, specifically a 2% decline. The reduction in services can be attributed to the impact of COVID-19-related public health measures. These measures led to a shift in priorities towards addressing COVID-19 needs and a reduction in non-critical care and elective surgeries. (Source)

Approximately three-quarters of Canadian physicians noted that their workload has increased since the pandemic, and the quality of care has decreased. (Source)

Healthcare workers often work extended hours, face significant overtime demands, and are susceptible to burnout due to the demanding nature of their jobs. In 2021, healthcare workers experienced the highest average overtime hours in over a decade. Approximately 21% of employees in health occupations, totaling more than 236,000 individuals, worked overtime. On average, they worked 8.2 hours per week of paid overtime and 5.8 hours per week of unpaid overtime. Among different occupations, paramedics (45%), salaried general practitioners/family physicians (34%), and respiratory therapists (31%) had the highest proportions of workers engaged in overtime hours. These levels of

overtime have many long-term impacts on workers' health and the quality of the time they have for their families and other needs. (Source)

Healthcare and emergency workers face many challenges in their workplace in the context of overwork and insufficient resources, which can undermine workplace morale and create further stress. When the healthcare system's functionality is compromised, negative reactions from the community in response to perceived lower service levels can further compound the challenges. Nearly half of healthcare workers considering leaving their jobs noted that job satisfaction and mental health and wellbeing were the reasons. (Source)

Clinic Management

The Canadian healthcare system structures most primary care and community based medical specialist services around a business model where physicians are expected to operate their clinics as small businesses, providing services, and invoicing the healthcare system for their time. As such, physicians must take on the costs of office real estate, staff, extensive record keeping and reporting, and other business costs.

Physicians' attitudes toward being a small business vary significantly, and current agreements with the governments are negotiated with physician associations. Some embrace it, and others find it undesirable.

Most physicians become doctors to provide medical service, not to become medical clinic administrators, and the time and resources required for business management impact the availability of time for providing services. Over half of physicians in Canada are not satisfied with the amount of time they have to spend on paperwork. One study suggested that Canadian physicians spend nearly 50 million hours per year on administrative tasks. (Source)

Medical offices compete with all other types of businesses for commercial space in communities, and with increasing real estate costs, this can be a significant challenge. The health and safety requirements and required technology can bring significant additional costs to the design and construction of a clinic.

Conclusion

This section has outlined some of the challenges healthcare workers face, the growth of these stressors and their impact over time.

Senior governments have been responding with new resources, new policies, and agreements, but the scale of the challenge is significant. Furthermore, many of our healthcare workers' stressors are outside the healthcare system's conventional scope. As such, we must explore the issues and opportunities associated with the local community and government dimensions that can assist healthcare and emergency workers.

Appendix 3 – Funding Opportunities

This Appendix has been compiled to list funding opportunities that may help communities further support primary care and health human resources recruitment and retention within their communities.

FP Recruitment and Retention

Provincial Rural Retention Program

The Rural Retention Program benefits are paid to physicians working in eligible communities covered under the Rural Practice Subsidiary Agreement. The incentive program was designed to enhance the supply and stability of physicians in rural communities.

Recruitment Incentive Fund

The physicians who are recruited to fill current or pending vacancies in eligible rural communities receive an incentive from $5,000 - $20,000.

Recruitment Contingency Fund

An annual fund to assist eligible rural communities with recruiting expenses in the event of difficulty in filling a vacancy.

Healthcare Workers Recruitment and Retention

Many Regional Health Authorities have incentive programs for health care workers. See below for a few examples.

Recruitment Incentives for Healthcare Workers in the Interior

Incentives for Nurses including rural retention grants for hard-to-fill positions and certain Medical Laboratory Technologists in the Interior (up to $10,000). Other funding opportunities include the Health Career Access Program that offers paid working and training for Healthcare Support Workers and the Medical Device Reprocessing Technicians Grant that offers paid training and education.

Northern Health – Living and Working Here – Benefits and Incentives

Northern Health offers benefits and incentives from extended health coverage to cash bonuses for positions ranging from physicians and nurses to diagnostic imaging and medical laboratory technologist recruitment.

Vancouver Coastal Health Authority – Relocation Assistance and more

Vancouver Coastal Health provides relocation assistance for select regular-status, hard-to-fill positions.

Island Health Authority – North Vancouver Island Incentives

Retention incentives and temporary travel incentives exist for opportunities based in north Vancouver Island.

BC Nurses Union Bursaries and Funding

Various bursaries and funding are available for student nurses. Eligibility categories include indigenous, internationally educated, student members who aren't currently employed, humanitarian focused, and more.

Loan Forgiveness

B.C. Student Loan Forgiveness Program

Recent graduates in select in-demand occupations can have their B.C. student loans forgiven by agreeing to work at publicly funded facilities in underserved communities in BC.

Canada Loan Forgiveness Program

Offers eligible recent graduates to exchange loans for work in the community.

Community Foundations

Many communities have foundations that support local non-profit organizations in areas that include healthcare. A few examples are listed below:

[Community grants | City of Vancouver]

There are over 20 grants available to non-profit social service groups in Vancouver such as childcare centres and services to at-risk communities

[Vancouver Foundation Grants - Province of British Columbia]

Vancouver Foundation grants support projects to help build healthy, vibrant, and livable communities across BC, including Systems Change Grants for charities taking action to address the root causes of pressing social, environmental, or cultural issues (from $20,000 to $300,000)

Primary Care Support

[Family Practice Services Committee (FPSC)]

FPSC provides various incentive compensation to family physicians to support aspects of longitudinal family practice.

[Rural Coordination Centre of British Columbia Rural Health Initiatives]

Grants for projects spearheaded by rural physicians and their partners practicing and doing research in underserved communities, including The Rural Global Health Partnership Initiative and the Rural Physician Research Grant Program (up to $10,000)

Other

[Investing in Canada Infrastructure Program - British Columbia - Rural and Northern Communities Infrastructure - Province of British Columbia]

Cost-sharing of infrastructure projects that support sustainable and inclusive communities while driving economic growth. Eligibility is based on public use and benefit

[Northern Development Main Street Revitalization – Capital Program - Province of British Columbia]

The Main Street Revitalization – Capital program provides local governments and First Nation bands with funding to complete strategic public investments in public infrastructure within a community's downtown/main street area, including grants for cultural, economic, and recreational infrastructure (up to $300,000)

[Community Gaming Grants - Province of British Columbia (gov.bc.ca)]

Community Gaming Grants are provided annually to not-for-profit organizations to support ongoing programs and services that meet the needs of their communities (up to $125,000 per year for local organizations, and up to $250,000 a year for regional organizations)

Appendix 4 – Contact Information for Ministries within BC Government

Ministry	Email
Agriculture and Food	agriservicebc@gov.bc.ca
Attorney General	servicebc@gov.bc.ca
Children and Family Development	mcf.info@gov.bc.ca
Citizens' Services	servicebc@gov.bc.ca
Education and Childcare	servicebc@gov.bc.ca
Emergency Management and Climate Readiness	emcr.minister@gov.bc.ca
Energy, Mines and Low Carbon Innovation	servicebc@gov.bc.ca
Environment and Climate Change Strategy	servicebc@gov.bc.ca
Finance	servicebc@gov.bc.ca
Forests	servicebc@gov.bc.ca
Health	hlth.health@gov.bc.ca
Housing	servicebc@gov.bc.ca
Indigenous Relations & Reconciliation	servicebc@gov.bc.ca
Jobs, Economic Development, and Innovation	servicebc@gov.bc.ca
Labour	lbr.minister@gov.bc.ca
Mental Health and Addictions	hlth.health@gov.bc.ca
Municipal Affairs	servicebc@gov.bc.ca
Post-Secondary Education and Future Skills	aest.generalInquiries@gov.bc.ca
Public Safety and Solicitor General	servicebc@gov.bc.ca
Social Development and Poverty Reduction	servicebc@gov.bc.ca
Tourism, Arts, Culture and Sport	servicebc@gov.bc.ca
Transportation and Infrastructure	tran.webmaster@gov.bc.ca
Water, Land and Resource Stewardship	servicebc@gov.bc.ca

More information at
https://www2.gov.bc.ca/gov/content/governments/organizational-structure/ministries-organizations/ministries