










Template a: HSD -Key Commitments

Commitment	Lead	Support	Documents and or update
Ensure the COVID-19 fall and winter preparedness plan is implemented successfully, including ... providing a new Hospital at Home program so patients can get safe care while in the comfort of their homes.	CRHEM/ HSD (HSB)		 a - Key commitment timeline HSD Hospit s. 12; s. 13; s. 17
Move forward a staffing retention strategy that provides workers in long-term care and assisted living with “levelled up wages” even after the pandemic ends, and restore provincial standards for wages, benefits, and working conditions.	HSWBSD	HSD	HSWBSD preparing
Work toward eliminating multi-bed rooms in health authority-owned long-term care facilities, giving seniors more dignity.	HSD (SSB)	FCS/ supported by HSIAR	 a - Key commitment timeline HSD multi t Input provided by Capital – Kirk Eaton
Support delivery of better care to seniors by private operators of long-term care homes by making them more accountable for the public funding they receive.	HSD (SSB)	FCS	 08 a - HSD Key commitment timelin

Improve and expand publicly funded home care to provide better care and help with daily living so that people can stay in their own homes for as long as is safely possible, receiving care from a more stable group of care aides.	HSD (SSB)	HSWBS/ FCS	 09 a - HSD Key commitment timeline
Work with rural and Indigenous communities to ensure the success of our rural collaborative framework to deliver more immediate and culturally safe care closer to home.	HSD (PSB/HSB)	OIH	 HSD A - Rural framework.docx
Where possible and appropriate, transition long-term care aides, housekeeping, and dietary hospital workers back into the public health care system.	HSWBSD	HSD	HSWBSD preparing
Seek to further reduce wait times by optimizing surgical and diagnostic space and teams, and add additional MRI scanners where they are needed most, so B.C. can keep pace with the demand for new surgeries and diagnostic scans	HSD	FCS	 HSD A - Surgical Diagnostic Services
Make British Columbia a leader in the full continuum of cancer care by launching a 10-year cancer action plan.	HSD (PSB)		 HSD A - 10-year cancer action plan_C s.12; s.13; s.17
Implement a comprehensive health care human resources strategy, expanding training in all fields of health care and improving the province's credential recognition process and licensing so that people trained in other countries can more quickly and easily provide their skills and knowledge here in B.C.	HSWBSD	HSD	HSWBSD preparing
Support the work of the Minister of Mental Health and Addictions to improve B.C.'s response to the opioid crisis across the full continuum of care: prevention, harm reduction, safe prescription medications, treatment and recovery, including transferring the	MMHA	HSD (MHSU)	MMHA preparing

oversight of recovery homes and other private treatment providers to the Ministry of Mental Health and Addictions.			
Support the work of the Minister of Mental Health and Addictions to provide an increased level of support – including more access to nurses and psychiatrists – for B.C.'s most vulnerable by developing Complex Care housing.	MMHA	HSD/PCD	MMHA preparing
Support the work of the Attorney General and Minister responsible for Housing to address the needs of people experiencing homelessness, including those living in encampments.	AG/MMHA	HSD	AG preparing
Support the Minister of Health's work to hire 7,000 new health care workers in long-term care and assisted living, ensuring the Health Career Access Program provides quality care for seniors and new opportunities for workers who lost their jobs in other sectors due to COVID-19.	HSWBSD	HSD	HSWBSD preparing
Engage non-profit providers to support the Minister of Health in our government's plan to build more public care homes, including new public beds, to keep seniors safer, healthier and more comfortable.	HSD (SSB)	FCS	 07 a - HSD Key commitment timeline
With support from the Minister of Public Safety and Solicitor General, lead work with community groups and the B.C. Seniors Advocate to develop a made-in-B.C. Silver Alert system to help assist first responders in locating missing seniors, particularly those with dementia and Alzheimer's disease.	HSD (SSB)		 a - Key commitment timeline HSD Silver /

Preliminary Timeline for Key Ministry Commitments/Initiatives

Initiative: Hospital at Home to provide an alternative pathway to access acute care from patient homes

Mandate letter commitment or pre-existing priority initiative, including mandate letter item from 2017 (include whether the item is linked to an existing public-facing program or strategy).	COVID-19 Fall/Winter Plan s. 12	Hospital at Home program s. 12
Proposed scope – brief summary	s. 12 Commitment to introduce this new program was reiterated in the Minister of Health's November 2020 mandate letter. The December 2020 <i>Speech from the Throne</i> noted: "A new Hospital at Home initiative is ramping up across the province that allows patients to receive medical services in their own homes, helping to reduce congestion in hospitals."	
List any previous direction provided by Cabinet and its Committees for this initiative.		
Is legislation required? If yes, describe.		
Is additional funding required beyond the ministry's base budget allocation? Please provide preliminary estimates for annual costs over a 3 year period.		
Identify existing \$\$ allocations and/or funding for "like"/existing programs (reinvestment opportunities), whether within the ministry or a group of ministries (collaboration opportunities).		
Does the ministry require additional direction from Cabinet committees? If yes, which one?		
Proposed schedule (recommended approach based on existing resources)		

s.12; s.17

Is an accelerated schedule feasible with additional resources?	s.12
Are there significant implications if initiative is delayed?	
Is timing contingent on other initiatives?	
Notes/flags	

Preliminary Timeline for Key Ministry Commitments/Initiatives

Initiative: Long Term Care Capital Rejuvenation and Expansion

Mandate letter commitment or pre-existing priority initiative, including mandate letter item from 2017 (include whether the item is linked to an existing public-facing program or strategy).	Work toward eliminating multi-bed rooms in health authority-owned long-term care (LTC) facilities, giving seniors more dignity
Proposed scope – brief summary	s.12
List any previous direction provided by Cabinet and its Committees for this initiative.	
Is legislation required? If yes, describe.	
Is additional funding required beyond the ministry's base budget allocation?	
Please provide preliminary estimates for annual costs over a 3 year period.	
Identify existing \$\$ allocations and/or funding for "like"/existing programs (reinvestment opportunities), whether within the ministry or a group of ministries (collaboration opportunities).	

Does the ministry require additional direction from Cabinet committees? If yes, which one?	s.12
Proposed schedule (recommended approach based on existing resources)	
Is an accelerated schedule feasible with additional resources?	
Are there significant implications if initiative is delayed?	
Is timing contingent on other initiatives?	
Notes/flags	

Preliminary Timeline for Key Ministry Commitments/Initiatives

Initiative: Develop and implement a province-wide long-term care, standardized Service Contract, Funding Model and Long-term Care Monitoring Tool (quality and financial monitoring).

Mandate letter commitment or pre-existing priority initiative, including mandate letter item from 2017 (include whether the item is linked to an existing public-facing program or strategy).	Support delivery of better care to seniors by private operators of long-term care (LTC) homes by making them more accountable for the public funding they receive.
Proposed scope – brief summary	s. 12
List any previous direction provided by Cabinet and its Committees for this initiative.	
Is legislation required? If yes, describe.	
Is additional funding required beyond the ministry's base budget allocation? Please provide preliminary estimates for annual costs over a 3 year period.	
Identify existing \$\$ allocations and/or funding for "like"/existing programs (reinvestment opportunities), whether within the ministry or a group of ministries (collaboration opportunities).	
Does the ministry require additional direction from Cabinet committees? If yes, which one?	
Proposed schedule (recommended approach based on existing resources)	
Is an accelerated schedule feasible with additional resources?	
Are there significant implications if initiative is delayed?	
Is timing contingent on other initiatives?	
Notes/flags	

Preliminary Timeline for Key Ministry Commitments/Initiatives

Initiative: Long Term Care Capital Rejuvenation and Expansion

Mandate letter commitment or pre-existing priority initiative, including mandate letter item from 2017 (include whether the item is linked to an existing public-facing program or strategy).	<div style="border-bottom: 1px solid black; margin-bottom: 10px;"> Work toward eliminating multi-bed rooms in health authority-owned long-term care (LTC) facilities, giving seniors more dignity. (Mandate Letter 2020). </div> <div> Engage non-profit providers to support the Minister of Health in our government's plan to build more public care homes, including new public beds, to keep seniors safe, healthier and more comfortable. (Mandate Letter 2020). </div>
Proposed scope – brief summary	s. 12
<div style="border-bottom: 1px solid black; margin-bottom: 10px;"> List any previous direction provided by Cabinet and its Committees for this initiative. </div> <div> Is legislation required? If yes, describe. </div>	

Is additional funding required beyond the ministry's base budget allocation?

Please provide preliminary estimates for annual costs over a 3 year period.

s.12

Identify existing \$\$ allocations and/or funding for "like"/existing programs (reinvestment opportunities), whether within the ministry or a group of ministries (collaboration opportunities).

Does the ministry require additional direction from Cabinet committees? If yes, which one?

Proposed schedule (recommended approach based on existing resources)

Is an accelerated schedule feasible with additional resources?

Are there significant implications if initiative is delayed?

Is timing contingent on other initiatives?

Notes/flags

Template – Preliminary Timeline for Key Ministry Commitments/Initiatives

(please do not include items where your ministry plays a supporting role but is not the lead – please keep to one page)

Initiative: Rural collaborative framework in rural and Indigenous communities.

Mandate letter commitment or pre-existing priority initiative, including mandate letter item from 2017 (include whether the item is linked to an existing public-facing program or strategy).	Work with rural and Indigenous communities to ensure the success of our rural collaborative framework to deliver more immediate and culturally safe care closer to home.
Proposed scope – brief summary	s. 12
List any previous direction provided by Cabinet and its Committees for this initiative.	
Is legislation required? If yes, describe.	
Is additional funding required beyond the ministry's base budget allocation?	
Please provide preliminary estimates for annual costs over a 3 year period.	
Identify existing \$\$ allocations and/or funding for "like"/existing programs (reinvestment opportunities), whether within the ministry or a group of ministries (collaboration opportunities).	
Does the ministry require additional direction from Cabinet committees? If yes, which one?	
Proposed schedule (recommended approach based on existing resources)	
Is an accelerated schedule feasible with additional resources?	
Are there significant implications if initiative is delayed?	
Is timing contingent on other initiatives?	
Notes/flags	

Template – Preliminary Timeline for Key Ministry Commitments/Initiatives

(please do not include items where your ministry plays a supporting role but is not the lead – please keep to one page)

Initiative: Surgical/Diagnostic Services

2020 Mandate Letter:	<ul style="list-style-type: none"> - Seek to further reduce wait times by optimizing surgical and diagnostic space and teams, and add additional MRI scanners where they are needed most, so B.C. can keep pace with the demand for new surgeries and diagnostic scans. - Work to reduce wait times and implement province-wide co-ordination to manage and actively monitor waitlists. s. 12
2017 Mandate Letter:	
Proposed scope – brief summary	s. 12
Previous direction provided by Cabinet and its Committees for this initiative.	
Is legislation required? If yes, describe.	
Is additional funding required beyond the ministry's base budget allocation?	
Please provide preliminary estimates for annual costs over a 3-year period.	
Identify existing \$\$ allocations and/or funding for "like"/existing programs	
Additional Cabinet committee direction	
Proposed schedule (recommended approach based on existing resources)	
Is an accelerated schedule feasible with additional resources?	
Implications if initiative is delayed?	
Is timing contingent on other initiatives?	
Notes/flags	

Template – Preliminary Timeline for Key Ministry Commitments/Initiatives

(please do not include items where your ministry plays a supporting role but is not the lead – please keep to one page)

Initiative: Cancer Action Plan

Mandate letter commitment or pre-existing priority initiative, including mandate letter item from 2017 (include whether the item is linked to an existing public-facing program or strategy).	Make British Columbia a leader in the full continuum of cancer care by launching a 10-year cancer action plan.
Proposed sccpe – brief summary	s. 12
List any previous direction provided by Cabinet and its Committees for this initiative.	
Is legislation required? If yes, describe.	
Is additional funding required beyond the ministry's base budget allocation?	
Please provide preliminary estimates for annual costs over a 3 year period.	
Identify existing \$\$ allocations and/or funding for "like"/existing programs (reinvestment opportunities), whether within the ministry or a group of ministries (collaboration opportunities).	
Does the ministry require additional direction from Cabinet committees? If yes, which one?	
Proposed schedule (recommended approach based on existing resources) – s. 12	
Is an accelerated schedule feasible with additional resources? –	
Are there significant implications if initiative is delayed?	
Is timing contingent on other initiatives?	
Notes/flags	

s. 13

s. 13

Preliminary Timeline for Key Ministry Commitments/Initiatives

Initiative: Improve and Expand Publicly Funded Home Care

Mandate letter commitment or pre-existing priority initiative, including mandate letter item from 2017 (include whether the item is linked to an existing public-facing program or strategy).	Mandate Letter commitment: Improve and expand publicly funded home care to provide better care and help with daily living so people can stay in their own homes for as long as is safely possible, receiving care from a more stable group of care aides.
Proposed scope	s.12
List any previous direction provided by Cabinet and its Committees for this initiative.	
Is legislation required? If yes, describe.	
Is additional funding required beyond the ministry's base budget allocation? Please provide preliminary estimates for annual costs over a 3 year period.	
Identify existing \$\$ allocations and/or funding for "like"/existing programs (reinvestment opportunities).	
Does the ministry require additional direction from Cabinet committees? If yes, which one?	
Proposed schedule (recommended approach based on existing resources)	
Is an accelerated schedule feasible with additional resources?	
Are there significant implications if initiative is delayed?	
Is timing contingent on other initiatives?	
Notes/flags	

Preliminary Timeline for Key Ministry Commitments/Initiatives

Initiative: Develop a “silver alert” type system to help assist first responders in locating missing seniors, particularly those with dementia and Alzheimer's disease.

Mandate letter commitment	MOH: With support from the Minister of Public Safety and Solicitor General, lead work with community groups and the B.C. Seniors Advocate to develop a made-in-B.C. “silver alert” system to help assist first responders in locating missing seniors, particularly those with dementia and Alzheimer's disease.
Proposed scope – brief summary	s.12
List any previous direction provided by Cabinet and its Committees for this initiative.	
Is legislation required? If yes, describe.	
Is additional funding required beyond the ministry's base budget allocation? Please provide preliminary estimates for annual costs over a 3 year period.	
Identify existing \$\$ allocations and/or funding for “like”/existing programs (reinvestment opportunities), whether within the ministry or a group of ministries (collaboration opportunities).	
Does the ministry require additional direction from Cabinet committees? If yes, which one?	
Proposed schedule (recommended approach based on existing resources)	
Is an accelerated schedule feasible with additional resources?	
Are there significant implications if initiative is delayed?	
Is timing contingent on other initiatives?	
Notes/flags	