



June 25, 2025

1301249

Via email: leonard.hiebert@prrd.bc.ca

Leonard Hiebert
Chair, Peace River Regional District Board
Peace River Regional District
PO Box 810
1981 Alaska Ave
Dawson Creek BC V1G 4H8

Dear Leonard Hiebert:

Thank you for your series of letters from November 22, 2024, to January 3, 2025, regarding the Peace River Regional District (PRRD) Board's concerns about the number of temporary emergency department closures within the Peace Region. I apologize for the delay in response.

Access to emergency departments (EDs) is an important part of community infrastructure, and disruptions in service are very challenging for people and communities to bear. I share your concerns about emergency department service interruptions and want to assure the PRRD that every effort is made to avoid them before the difficult decision is made to have a temporary unplanned closure of an ED and divert patients to other available sites within the region. With this letter, I hope to provide PRRD with more information about the short-term and longer-term measures being taken by the Northern Health Authority (NHA), the Ministry of Health, and partners to reduce the number of ED service disruptions.

Staffing shortages are the primary reason behind ED diversions. The temporary closure of an ED is an absolute last resort when there are no health care providers who can manage a patient who arrives at the health care facility extremely unwell and who needs hands-on care. In this event, the only way to manage such a patient in the safest way possible is to quickly divert them to the closest hospital capable of managing those types of issues. While diversions are never ideal, they are unfortunately sometimes necessary to ensure the best and safest care is provided to patients.

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NHA continues to prioritize health care worker recruitment to ensure safe and quality care is provided to patients. With the support of the Ministry of Health, and in collaboration with partners including Divisions of Family Practice, post-secondary institutions, and community members, NHA is working hard to attract and retain the skilled health professionals needed to maintain and improve services in Northern British Columbia.

NHA and provincial efforts include:

- Provincial Rural Retention Incentive, which provides retention bonuses to health care workers in eligible rural and remote communities
- Provincial Rural and Remote Recruitment Incentive, which provides signing bonuses of up to \$30,000 for specific high needs vacancies in Northern Health, which come with a 24-month return of service
- GoHealthBC, a service (initiated in Northern Health that has since expanded to include communities in Interior Health and Island Health) that employs 436 nurses delivering services in rural and remote communities to reduce reliance on agency nursing services
- Emergency Care BC (ECBC), a network of provincial partners to drive improvements across the health care system, including support for hybrid models of care on EDs where virtual care could be delivered and help optimize physician capacity.

Working weeks and even months ahead, most staffing situations that could lead to an ED diversion are mitigated significantly in advance of when the diversion would have taken place. Even when an ED diversion has been declared, health authorities make every effort to try to fill the shift and prevent the closure.

It is encouraging that NHA is making progress in limiting the length and number of service interruptions; since July 2024, NHA has seen a reduction in ED service interruptions compared to 2023. However, I recognize there is still much work to do to further reduce ED closures and to strengthen BC's public health care system.

In the medium to longer term, we are taking important steps to train and hire more health care workers to build human health resources across the health care system, including:

- Tripling our capacity to credential internationally trained doctors
- Working with the College of Physicians and Surgeons to provide immediate provisional licenses for those trained in Canada and within six weeks for those trained in comparable regions, like the US and UK

- Expanding the UBC Medical School by 128 seats
- Adding 582 new nursing student seats and introduced a tuition-waiver program since 2021
- Establishing a new medical school at SFU in Surrey with first intake in September 2026
- Hiring new Physician Assistants to work in EDs, which will help alleviate staff shortages (there are currently 4 Physician Assistant postings in NHA).

We are also taking action to free up emergency departments for those who need them by continuing to build the primary care system and connecting more people to family doctors, opening Urgent and Primary Care Centres, and allowing pharmacists to treat minor ailments. Together, all these actions mean there are more health care providers working in hospitals to prevent emergency department diversions.

In your letters, you also expressed concerns about communications. In the event of an ED diversion, health authorities take steps to prepare the community, including advising BC Emergency Health Services as diversions may impact demand for ambulances in the area and advising 8-1-1. Communities are advised via public service announcements which include information on how to safely access care. I know health authorities recognize the challenge of timing the communication of a pending ED diversion to the general public as they urgently work to avert such a diversion while needing to provide the community with sufficient notice. I encourage you to speak directly with NHA regarding your concerns with communication and to work with them with respect to the needs of local governments.

If you wish to discuss your concerns further, you may consider contacting the Northern Health Patient Care Quality Office (PCQO). Each health authority has a PCQO that works with patients to address care quality concerns. The PCQO will be able to review the matter and provide you with a response to your complaint, as well as information on any decisions or actions taken as a result. You may contact NHA's PCQO at:

Northern Health Authority	Telephone: 1-877-677-7715
Patient Care Quality Office	Facsimile: 250-565-2640
6th floor, 299 Victoria St	Email: patientcarequalityoffice@northernhealth.ca
Prince George BC V2L 5B8	Website: www.northernhealth.ca

We encourage members of the public to always call 9-1-1 if they have a life-threatening health emergency so they can be transported to the nearest available and appropriate facility, which may be their local emergency department, or an alternate facility in the event the local ED is unavailable at the time.

In closing, I hope that the above helps to build understanding of some of the actions being taken to keep emergency departments open. Again, I share your deep concern of the impacts that ED closures have on communities—particularly rural and remote communities like the one where I live. I am deeply committed to continuing the work that we must do to build human health resources and strengthen the entire health care system, and I always welcome your ideas and suggestions moving forward.

I appreciate the opportunity to respond.

Sincerely,



Josie Osborne
Minister



PEACE RIVER REGIONAL DISTRICT

November 22, 2024

File: 0400.20.16

Honourable Josie Osborne
Minister of Health
PO Box 9050 Stn Prov Govt
Victoria, BC V8W 9E2
Via Email: HLTH.Minister@gov.bc.ca

Dear Minister Osborne,

Re: Northern Health - Service Interruptions

At its July 18, 2024, Regional Board meeting, the Peace River Regional District (PRRD) Board discussed their concerns regarding the number of diversions and emergency room closures taking place within the Peace Region. The Regional Board subsequently passed the following resolution:

MOVED, SECONDED and CARRIED,

“That the Regional Board send a letter weekly to Premier Eby, Minister Dix, and both North and South Peace MLAs asking them to request that Northern Health advertise service interruptions, without Ministry interference, in the Peace Region.

The Regional Board is very concerned with the ongoing number of diversions, emergency room closures and shortage of health-care professionals resulting in reduced access to essential health care services. The lack of communication from Northern Health regarding these ongoing closures/diversions is unacceptable; communications need to be streamlined with an improved process that will “get the word out” in a timelier manner. The Board believes there is an urgent need to find effective solutions and long-term strategies to stop diversions/closures from taking place and is requesting your support in asking Northern Health to communicate effectively on this critical issue.

Sincerely,

Leonard Hiebert

Leonard Hiebert
Chair

c: Premier David Eby, Premier@gov.bc.ca

diverse. vast. abundant.