



DISTRICT OF NEW HAZELTON
Regular Meeting of Council
Monday March 2, 2026
4633 10th Ave - Room #2 Council Chambers
Regular Meeting – 7:00 pm

1. CALL TO ORDER: 7:00PM

2. MINUTES:

2.1 Accept Minutes of February 2, 2026 regular meeting

3. PETITIONS & DELEGATIONS:

3.1 Stanley Walker - to discuss widening of pull out on West end of town, and concerns regarding explosive combination of trucks in the same place at the same time within town limits

4. CORRESPONDENCE:

4.1 Request for Support for Hazelton Secondary School Drama Club going to the 2026 National Star Festival in Vancouver

5. REPORTS:

5.1 Council Reports

6. BYLAWS: None

7. NEW BUSINESS

- 7.1 PRGT's Social and Economic Effects Management Plan & Health and Medical Services Plan
- 7.2 Human Right's Commissioner's inquiry into police use of media exclusion zones
- 7.3 Annual Reporting for Northwest BC Regional Funding Agreement
- 7.4 Local Government Development Approval Permits - Regional Project
- 7.5 Donation to Wanda Mason Memorial Scholarship Fund
- 7.6 Council New Business
- 7.7 Council Schedule

8. ADJOURNMENT



DISTRICT OF NEW HAZELTON
Regular Meeting of Council
Monday February 2, 2026
Council Chambers - 4633 10th Ave - Room #2
Public Meeting - 6:45 pm
Regular Meeting – 7:00 pm

1. CALL TO ORDER PUBLIC MEETING: 6:50PM

Present: Mayor G. Lowry
Councillor J. Hobenshield
Councillor A. Berg
Councillor R. Sturney – 6:50PM

Staff: Chief Administrative Officer, W. Hunt
Chief Financial Officer, L. Roe
Corporate Officer, B. White

Absent: Councillor G. Burns
Councillor M. Weeber
Councillor B. Henwood

- To discuss the District of New Hazelton Official Community Plan Bylaw No. 388, 2025, there were no members of public in attendance.
- The meeting was adjourned at 7:00PM

2. CALL TO ORDER REGULAR MEETING: 7:00PM

3. MINUTES

3.1 Accept Minutes of January 5, 2026 regular meeting

RESOLUTION 8463/26

MOVED/SECONDED

THAT, the minutes of the January 5, 2026 regular meeting be accepted as presented.

CARRIED

4. PETITIONS & DELEGATIONS: NONE

5. CORRESPONDENCE

5.1 Kispiox Valley Community Centre Association Request for Letter of Support

RESOLUTION 8464/26

MOVED/SECONDED

THAT, Council authorize Staff to write a letter of support for the Kispiox Valley Community Centre Association's Crown Land lease renewal.

CARRIED

5.2 Joint Application to the Northern Development Initiative Trust (NDIT) Labour Market Research Plan Program with Regional District of Kitimat Stikine (RDKS) and Village of Hazelton

RESOLUTION 8465/26

MOVED/SECONDED

THAT, the District supports the joint application submission to Northern Development Initiative Trust Labour Market Research Plan on behalf of the Regional District of Kitimat Stikine, the District of New Hazelton, and the Village of Hazelton in the amount of \$50,000.00. The District commits to being responsible for its share of any cost overruns.

CARRIED

5.3 2025 UBCM Hazelton Letter from Minister Bowinn Ma

- Received for information only, no further action required.

5.4 Request for letter of support for Gitanmaax purchase of Coast Mountain Hazelton Campus

RESOLUTION 8466/26

MOVED/SECONDED

THAT, Council authorize Staff to write a letter of support for Gitanmaax regarding the purchase of Coast Mountain Hazelton Campus.

CARRIED

6. REPORTS

6.1 Council Reports

- Councillor Sturney gave a report on the BC Natural Resources Forum that was in Prince George January 20-22.
- Mayor Lowry
 - i. advised that we are still working on arranging a meeting with the new Chief and Council for the Hagwilget First Nation
 - ii. Attended the quarterly meeting with the Wrinch administration and met the new NW Senior Operating Officer, Jonathan Blenkinsopp. We continue to stress the need for long-term care in the Hazeltons.
 - iii. Attended the RAC meeting for NDIT. A reminder that the first intake of grant applications is in March.

7. NEW BUSINESS

7.1 Appointment of Chief Electoral Officer and Deputy Chief Electoral Officer

RESOLUTION 8467/26

MOVED/SECONDED

THAT, the District of New Hazelton appoint Wendy Hunt as the Chief Election Officer and Laura Roe as the Deputy Chief Election Officer for the 2026 Municipal Election.

CARRIED

7.2 PRGT's Social and Economic Effects Management Plan & Medical Services Plan

- Received for information only at this time, will be on March agenda for discussion/to provide comments.

7.3 Council New Business

- No new business reported.

7.4 Council Schedule

- Council reviewed their schedule for the upcoming months.

8. BYLAWS

8.1 Adoption of the 2026-2030 Financial Plan Bylaw No. 390, 2025

RESOLUTION 8468/26

MOVED/SECONDED

THAT, Council proceeds with the adoption the 2026-2030 Financial Plan Bylaw No. 390, 2025 as presented.

CARRIED

8.2 Third Reading and Adoption of the Official Community Plan Bylaw No. 388, 2025

RESOLUTION 8469/26

MOVED/SECONDED

THAT, Council gives the Third Reading and Adoption of the Official Community Plan Bylaw No. 388, 2025 as presented.

CARRIED

9. CLOSED MEETING Move to exclude the public and enter a closed meeting pursuant to S. 90(1)(e) of the *Community Charter* regarding acquisition of land at 7:37PM.

10. ADJOURNMENT

RESOLUTION 8470/26

MOVED/SECONDED

THAT, the regular meeting be adjourned at 8:09PM.

CARRIED

CERTIFIED CORRECT THIS 2ND DAY OF MARCH, 2026

Mayor

Corporate Officer

Project Proposal: Supporting Hazelton Secondary School Drama Students at the 2026 National Star Festival in Vancouver

Project Title: *Hazelton Drama Students Take the Stage: National Star Festival 2026*

School: Hazelton Secondary School

Location: Hazelton, British Columbia

Event Date: May 2026

Funding Requested: \$8,770

Project Summary

Hazelton Secondary School's drama program is seeking support to send eight dedicated drama students to the National Star Festival in Vancouver (<https://taeacanada.ca/national-star-fest/>) in May 2026. This opportunity comes after students from Grade 10 and 11 created their own devised theatre piece (written by themselves without a script) and submitted it to a panel of provincial adjudicators. Their piece was selected to qualify them to present at the provincial level in Vancouver at the National Star Festival. This recognition is an extraordinary achievement, and our community is incredibly proud of our students.

The National Star Festival brings together students from across British Columbia to participate in workshops, watch performances, and share their passion for theatre. For many of our students, this would be their first opportunity to experience live theatre outside of our classroom, as Hazelton does not have a large or active theatre community.

The participating students are Gitxsan and Witsuwit'en youth. Their devised theatre piece is entirely their own creation, reflecting their voices, perspectives, and lived experiences. Because the work was written collaboratively without a script, it captures their identities as young people and as emerging Indigenous artists in a way that scripted material cannot. Supporting these students aligns with the Truth and Reconciliation Commission Calls to Action #7 and #10, which underscore the need for equitable access to high-quality educational experiences and culturally relevant learning opportunities for Indigenous youth. Enabling these students to share their work on a provincial stage affirms the value of their creativity, strengthens their confidence, and ensures they have access to enriching arts experiences often unavailable in rural northern schools.

Background and Need

Hazelton is a remote northern community with limited access to professional theatre, performance venues, and fine arts programming. Despite these challenges, our drama students show enthusiasm, creativity, and a desire to grow. Their exposure to theatre is largely confined to what we can build within our school walls.

Attending the National Star Festival would provide experiences our students cannot access locally, including:

- Watching performances by students from larger schools with substantial fine-arts funding
- Participating in professional-level workshops led by experienced theatre artists
- Seeing firsthand what is possible in all categories of theatre performances, including musical theatre, devised theatre, and short plays.
- Building confidence and a sense of belonging within the wider provincial arts community

- Taking a huge step within our community to make our team of students feel valued in alignment with the sports and athletic programming at our school.

This experience has the potential to be transformative, both personally and artistically, for every participating student.

Impact

This program will allow Hazelton youth to step into a world of theatre, collaboration, and creativity. This project strengthens:

- Arts education equity for rural students
- Confidence, leadership, and communication skills
- Connection to the broader provincial arts community
- Inspiration for future creative pursuits
- Advancement of Truth and Reconciliation Commission Call to Action #7, which calls for equitable access to educational opportunities for Indigenous students, including *opportunities beyond the classroom, equity in extracurricular learning, and access to arts and cultural enrichment*
- Advancement of Truth and Reconciliation Commission Call to Action #10, which emphasizes the need for culturally relevant and student-centered learning experiences that affirm Indigenous identity and support Indigenous youth in educational settings

Current Fundraising Progress

Our school community has already raised **\$1,500** through a community play fundraiser, and we are continuing to fundraise actively until the date of travel. We have additional fundraiser play nights planned in February and have donation jars set at local businesses.

We have received a **\$5,000** grant from the Regional District of Kitimat Stikine.

We are receiving an in-kind contribution valued at **\$1,500** from Nonprofit Hazelton Project Management Services to support proposal writing, budget planning, funder engagement, financial tracking support, and post-project budget review for future program delivery.

Funding Request

We are seeking **\$8,770** in additional funding to make this opportunity possible for our students.

Any amount donated will make a meaningful difference and bring us closer to providing these students with an enriching educational experience, a chance to view theatre from a larger cultural perspective, and showcase their own work in a professional setting.

Documentation

We would like to document our trip, play, and festival experience with the help of Vancouver filmmaker Farhan Umedaly, who has also made films for the Gitanyow community. (<https://www.vovoproductions.com/#home>)

Documenting this experience will allow our community to celebrate the students' achievement and share in their journey. The film will also help strengthen the Hazelton Secondary School theatre program by inspiring future students and demonstrating the opportunities available through theatre participation.

Contact Information

Michelle Beam
Drama teacher at Hazelton Secondary School
 Phone: 250-508-5625
 Email: michelle.beam@cmsd.bc.ca

Budget

We are currently seeking \$8,770 as \$7,500 has already been raised.

Expense Category	Description	Cost
Plane Tickets Terrace to Vancouver	\$500/ticket x10 people (8 students & 2 adults)	\$5,000
Lodging (UBC Dorms)	\$50/night x 4 nights x 10 people	\$2,100
Food	\$85/day x 5 days x 10 people	\$4,250
Transportation in Vancouver	\$10/day x 5 days x 10 people	\$500
Transportation from Hazelton to Terrace	\$100/vehicle for fuel + \$10/day x 5 days for parking for 2 vehicles	\$300
Festival Registration	\$95/participant x 6 participants (4 students are free) & + \$50 fee to present the play	\$620
Teacher Coverage	\$500/day x 3 days for substitute coverage	\$1,500
Project Management	\$1,500 value (In-Kind Donation)	\$0
Contingency	Unexpected expenses	\$1,000
Total	Cost per student is \$1,909 (\$15,270/8 students)	\$15,270

Film Making Budget

Documentarian Farhan Umedaly	Vancouver Filmmaker who will document our trip	\$3,000
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Social and Economic Effects Management Plan

Prepared By:
Stantec Consulting Ltd.
Project No. 123223020

Prepared For:
Prince Rupert Gas Transmission Ltd.

Professional Review & Sign-off

This Social Economic Effects Management Plan for the Prince Rupert Gas Transmission (PRGT) Project documents actions to inform affected stakeholders, Nisga’a Nation, and Indigenous groups of the Proponent’s potential interactions with employment, transportation, and community infrastructure and services, and identifies monitoring and reporting requirements. It has been prepared for use in the field by the Proponent and its contractors and may also be used by the Environmental Assessment Office for compliance purposes. Any use of this document by another third party is the responsibility of that party. By using this document, such third party agrees that neither the Proponent, nor its affiliates nor any employees, consultants, or contractors shall be responsible for costs or damages of any kind incurred or suffered by it or any other third party as a result of decisions made or actions taken based on this document.

This Plan was prepared and reviewed by:

Prepared By	Reviewed By
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Heather Taylor, BA, MBA
Megan Macdonald, B.Sc., BIT

Vilma Gayoso-Haro, MSc, BSc

Revision History

Revision	Issued For	Date
A	Client review	August 8, 2025
0	Indigenous groups and regulatory agency review	January 27, 2026

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Acronyms and Abbreviations

Term	Definition
BC	British Columbia
CEMP	Construction Environmental Management Plan
CSCD	Ministry of Community, Sport and Cultural Development
EAC	Environmental Assessment Certificate
EAO	Environmental Assessment Office
EFAP	Employee Family Assistance Program
EPCM	Engineering, Procurement, and Construction Management
HMSP	Health and Medical Services Plan
km	Kilometre
OHS	Occupational Health and Safety
PRGT	Prince Rupert Gas Transmission Ltd.
SEEMP	Social and Economic Effects Management Plan

1 Introduction

Prince Rupert Gas Transmission Ltd. (PRGT, or the Proponent) is constructing the Prince Rupert Gas Transmission Project (the Project). The Project is an approved natural gas pipeline designed to deliver natural gas from northeast British Columbia (BC) to the northwest coast of the province. The Project consists of both land and marine based sections of pipeline and intends to provide natural gas to the Ksi Lisims LNG – Natural Gas Liquefaction and Marine Terminal Project (Ksi Lisims LNG Project) at Wil Milit, BC, on Category A Lands owned by the Nisga'a Nation under the Nisga'a Final Agreement (Nisga'a Treaty) on Pearse Island, approximately 15 kilometres (km) west of the Nisga'a Village of Gingolx and 82 km north of Prince Rupert, BC.

PRGT completed a multi-year environmental assessment process, culminating in the receipt of an environmental assessment certificate (EAC) in 2014 (EAC #E14-06). The issuance of EAC #E14-06 included 45 conditions that PRGT must implement to comply with the EAC (Schedule B, Table of Conditions). Since receiving EAC #E14-06, PRGT applied for and received approval for multiple amendments. The most up-to-date version of the EAC and its conditions are available on BC Environmental Assessment Office (EAO)'s Project Information Centre website.¹

PRGT developed a Social and Economic Effects Management Plan (SEEMP or this Plan), approved on December 1, 2016, that included potential socio-economic effects related to the following valued components: employment, community infrastructure and services, transportation, and Nisga'a Nation (PRGT 2016). The Proponent has decided to update the approved SEEMP based on the current Project; hence, this document addresses Condition 34 of Schedule B of EAC #E14-06 which states the following:²

The Holder must develop and implement a Social and Economic Effects Management Plan (SEEMP). The Holder must develop the SEEMP in consultation with Ministry of Community, Sport and Cultural Development (CSCD) with guidance from framework materials that will be provided by EAO within 120 days of this EAC.

The SEEMP must include specific actions to address the following:

- *Implementation of mitigation set out in the Application Section 38, Table 38-3;*
- *Planning and implementation for effective engagement with affected Aboriginal Groups, Nisga'a Nation, local governments, and provincial service delivery agencies regarding effects related to community level infrastructure and services including water, waste (solid and liquid), health and social services;*
- *Approach to designing and communicating programs related to employment and contracting opportunities, skills training and education;*

¹ <https://projects.eao.gov.bc.ca/p/588511d9aaecd9001b826b33/certificates>

² The Condition is presented as written in the EAC (Schedule B, Table of Conditions); PRGT acknowledges that some of the terminology is now outdated. For example, 'Indigenous' is now preferred over 'Aboriginal,' and some ministry names have changed (e.g., CSCD is now the Ministry of Housing and Municipal Affairs).

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- *Monitoring and reporting on the effectiveness of the mitigation set out in the Application and in the SEEMP; and*
 - *If necessary, description of an adaptive management approach, including the implementation of alternative mitigation, to address unpredicted effects directly related to the Project.*
 - *The Holder must develop the SEEMP no less than six months prior to the Holder's planned date to establish main construction camps that are intended to house a workforce for the applied mechanical work on the Project. In order to allow for CSCD to review, comment and make a recommendation to EAO on whether to approve the final SEEMP, the Holder must provide a final SEEMP to CSCD no less than 90 days prior to the Holder's planned date to establish these main construction camps. The Holder must not establish these main construction camps until the SEEMP has been approved by EAO.*

The Holder is required to implement the SEEMP in consultation with CSCD until one year after Project Operations commence or as otherwise directed by EAO.

2 Scope

The SEEMP describes the strategies and measures that PRGT will implement to mitigate potential effects of the Project on employment and community infrastructure and services. The SEEMP also describes monitoring and adaptive management measures. The SEEMP has been updated to focus on potential socio-economic effects and mitigation measures related to the Project's workforce and activities.

Potential effects and mitigation associated to health services are discussed in detailed in the Health and Medical Services Plan (HMSP) and therefore are only summarized in the SEEMP as they pertain to aspects required in the SEEMP. The HMSP provides detailed protocols for managing healthcare-related risks and supporting coordination with health authorities and providers. The HMSP also describes PRGT's health promotion and mental health programs and services that will support a range of mental health and well-being issues such as substance use and addictions and healthy behaviours. This is not duplicated in the SEEMP to avoid redundancies.

Similarly, the transportation valued component has not been considered within the scope of the SEEMP as mitigation measures related to traffic are accommodated in the Traffic Management Plan section of the Construction Environmental Management Plan (CEMP) Appendix F-16.

Section 2.1 describes other potential socio-economic effects, with mitigation measures that are described in other management plans and not included in the scope of the SEEMP.

2.1 Linkages to Other Management Plans

Although the SEEMP is focused specifically on managing the direct socio-economic effects associated with the Project's workforce and activities, some of the mitigation measures referenced in this Plan are also addressed or implemented through other complementary management plans. Those measures covered in other plans are referenced in the SEEMP as relevant and are not duplicated in this Plan. These linkages enable a coordinated and integrated approach to managing and mitigating socio-economic effects.

In some cases, mitigation measures are operationalized through these other plans rather than the SEEMP itself. For example, coordination with health providers to deliver health promotion initiatives, including communicable disease prevention is addressed in the HMSP. The SEEMP refers to other plans as relevant and should be read in conjunction with the following documents:

- **Health and Medical Services Plan (HMSP)**³ – This plan describes health and medical service provisions that PRGT will implement to reduce potential demand on local health services attributable to the Project’s workforce. This plan describes work-site health services and programs, communicable disease and infection prevention protocols, health promotion initiatives, communication for patient flow and health services monitoring and reporting. The SEEMP and HMSP are complementary to each other and are intended to be implemented together to support community readiness during construction and operation.
- **Construction Environmental Management Plan (CEMP)**⁴ – This document houses related plans, which describes waste management and traffic management protocols, including the Spill Contingency Plan (CEMP Appendix E-9), Access Management Plan (CEMP Appendix F-1), Chemical and Waste Management Plan (CEMP Appendix F-4), and Traffic Management Plan (CEMP Appendix F-16).
- **Marine Access and Traffic Management Plans** – There are two companion documents: the Marine Access and Traffic Management Plan for the Marine Ancillary Facilities and the Marine Access and Traffic Management Plan for the Pipeline. These plans document measures that PRGT will take to communicate vessel schedules and in-water activities, related to the marine ancillary facilities and pipeline, with marine users (e.g., commercial, recreational and Indigenous navigation, fishing, and other uses).

Together, these plans form an interrelated framework that supports the SEEMP's overall objectives and provides alignment with regulatory requirements (Appendix A) and community expectations.

3 Purpose and Objectives

The SEEMP guides the Proponent and its contractors to manage and monitor potential Project effects on employment and community infrastructure and services, while fostering collaboration with Indigenous groups⁵, local government, and provincial government agencies. This Plan covers socio-economic effects directly attributable to the Project’s workforce and activities on services and infrastructure. The SEEMP includes strategies to support local opportunities, such as jobs and contracts for local and Indigenous businesses, while avoiding or reducing, the Project’s effects on community services and infrastructure. The SEEMP establishes a clear, consolidated framework to:

- Fulfill regulatory requirements, including Condition 34 of Schedule B of EAC #E14-06.
- Provide timely Project information to Indigenous groups, local government, provincial government agencies, and the public.
- Implement and monitor the implementation of mitigation measures for socio-economic effects, covering employment and community infrastructure and services management strategies.

³ The HMSP is currently under development and will be shared with Indigenous groups once complete. The document is not associated with any of the conditions in Schedule B of EAC #E14-06 but PRGT committed to developing a HMSP during the process of extending the EAC.

⁴ Refers to the terrestrial pipeline CEMP.

⁵ Indigenous groups have been defined in Section 5.3.1.

-
- Engage with Indigenous groups, local government, and provincial government agencies to review mitigation effectiveness and incorporate feedback.
 - Monitor the effectiveness of mitigation measures using defined indicators and support adaptive management when outcomes differ from predictions, or when concerns are identified.
 - Document and report SEEMP implementation through a semi-annual (i.e., twice per year) SEEMP Status Report.

The SEEMP does not change the role that the Indigenous self-governments and modern treaty bodies and the local governments, provincial government agencies have regarding community infrastructure and service delivery but provides an opportunity to build relationships and share information in the context of the Project among responsible parties for planning and management.

4 Project Overview

This section describes the anticipated Project workforce and workforce accommodations, which may have potential effects on employment and community infrastructure and services and will be managed through the SEEMP. The anticipated workforce size and schedule were estimated in the EAC Application as part of the Environmental Assessment, to assess potential effects on employment and infrastructure and services such as housing, health and social services, water, waste, and transportation within the defined spatial boundaries.

4.1 Anticipated Project Workforce

Construction will be divided into sections⁶ and within a section there could be multiple construction spreads⁷, with one prime contractor responsible for construction of one or more pipeline spreads. Based on current plans, PRGT anticipates the workforce will ramp up once prime contractors are in place. Under current planning, PRGT anticipates the following construction phases and workforce requirements:

- Phase 1 will focus on early works and site preparation, with an estimated workforce of 1,000 to 3,000.
- Phase 2 is expected to begin mainline construction, with workforce numbers increasing to 4,000 to 6,000.
- Phase 3 will continue mainline construction and reach peak activity, with an estimated 6,000 to 8,000 workers.
- Phase 4 will focus on testing, reclamation, and clean-up, with a reduced workforce of 1,500 to 3,000.

PRGT will work with the prime contractors and the Engineering, Procurement, and Construction Management (EPCM) contractor to determine the best work schedule considering factors such as impacts to local population centres along the Project route, traffic, safety, and construction schedule.

⁶ Refers to a separate unit of work that is part of the overall pipeline construction process.

⁷ Refers to individual segments of a pipeline that are constructed and tested; there can be multiple construction spreads within a section.

The workforce is expected to be sourced primarily from within British Columbia and across Canada. Recruitment strategies will prioritize qualified Indigenous, local, and regional workers through partnerships with Indigenous groups, local governments, industry associations, and training institutions (refer to Section 8.1). While international recruitment is not anticipated, limited hiring from outside Canada may occur for highly specialized roles where domestic expertise is not available. Monitoring and evaluation, including for employment indicators are described in Section 9.1.

4.2 Workforce Accommodations

Workforce accommodations will be located in proximity to the Project to support construction activities along the route. PRGT has secured the majority of required permits and approvals for 15 workforce accommodations. As outlined in the Project's Certified Project Description, PRGT's certificate includes:

- One main spread marine camp housing up to 400 workers
- Eight main spread construction camps housing up to 1,100 workers each, and 3 main spread construction camps housing up to 700 workers each
- Three compressor station camps each with up to 225 workers

Camp numbers and locations may be adjusted as construction planning evolves. PRGT will continue to update and engage communities located near camp sites as plans are refined.

The estimated duration and size of the construction workforce are based on current scheduling assumptions. Should these assumptions change due to regulatory decisions or project updates, corresponding revisions to the SEEMP may be made.

5 Methodology

The SEEMP addresses socio-economic effects attributable to the Project's workforce and activities. Potential Project effects were identified and assessed in Section 17.0 Employment (PRGT 2015a), Section 20.0 Community Infrastructure and Services (PRGT 2015b), and Section 34.0 Nisga'a Nation (PRGT 2015c) of the EAC Application and its subsequent amendments.

The SEEMP is designed to adaptively manage potential effects attributable to the Project on employment and community infrastructure and services delivered by Indigenous groups, local government, and provincial government agencies. These effects relate specifically to the presence and behaviour of Project Workers residing in communities in close proximity to the Project (see Section 5.3.1). Adaptive management measures will be implemented where monitoring indicates that mitigation measures are ineffective, only partially effective, or where an unpredicted effect attributable to the Project has arisen.

The SEEMP also serves as the primary mechanism to monitor and report on the effectiveness of socio-economic mitigation measures related to the Project's workforce and activities. A description of indicators and reporting commitments are provided in Section 8.1, Section 10, and Appendix B.

5.1 Engagement and Consultation for SEEMP Development

PRGT underwent an engagement and consultation process on the SEEMP from 2014 to 2016. As part of that process, feedback was received from Indigenous groups, relevant regulatory authorities (i.e., Ministry of Housing and Municipal Affairs [formerly CSCD] and EAO), local government, and provincial government agencies.

PRGT received its EAC and related conditions on November 25, 2014. PRGT began engaging with potentially affected parties on the development of the SEEMP in 2014. These engagements included meetings to discuss the scope of the SEEMP and providing early drafts of the SEEMP and addressing and incorporating feedback received from Indigenous groups, local government, and provincial government agencies. Based on feedback received through the engagement and consultation process, PRGT aligned the 2016 SEEMP with the *Guidelines for Preparing a Socio-economic Effects Management Plan for Liquefied Natural Gas*⁸, added clarity regarding the adaptive management process, and aligned the indicators more closely to potential effects and measurable parameters. After receiving and using the feedback to implement changes to the Plan, the 2016 SEEMP was approved on December 1, 2016 (PRGT 2016).

Following the approval of the 2016 SEEMP, PRGT committed to regulators (i.e., Ministry of Housing and Municipal Affairs and Northern Health) that it would revise the SEEMP.

Indigenous groups, local government, and provincial government agencies, including the Ministry of Housing and Municipal Affairs and the EAO, continue to play an active advisory role in the SEEMP process. Comments and recommendations raised during the ongoing engagement and consultation process will be considered in the ongoing development of the Plan. As the Project advances, feedback received through the Project's engagement activities (see Section 7) will help confirm the Plan's continued effectiveness.

5.2 Document Enhancement

The SEEMP has been updated to reflect recent and relevant ongoing development and enhancement related to socio-economic effects management planning, and Project amendments, as part of ongoing efforts toward continual improvement. This process involved a comprehensive review of the previous version of the SEEMP (PRGT 2016) in addition to more recent SEEMPs developed for similar large-scale projects in BC (CGL 2016, TMX 2017).

The SEEMP will be informed by engagement with potentially affected parties through the environmental assessment process completed for the EAC Application, EAC amendments, and consultation on draft versions of this SEEMP. This engagement shapes the scope, priorities, and mitigation measures of the SEEMP. The Proponent is committed to ongoing engagement throughout the Project lifecycle, including feedback received through the Community Feedback Process and coordination with Indigenous groups (refer to Section 7 for more details on engagement during SEEMP implementation).

⁸ <https://www.unbc.ca/sites/default/files/event/cscd-seemppresentationslidedeck-circlaunch.pdf>

5.3 Boundaries

5.3.1 Spatial

The communities included in the SEEMP are based on the Local Assessment Area communities identified in the EAC Application and the subsequent amendments. These communities have been identified as those most likely to experience direct and indirect socio-economic effects (Figure 1).

The Indigenous groups and potentially affected communities include the following:

Indigenous Groups^{9, 10, 11, 12}

- Nisga'a Nation
- Binche Whut'en
- Blueberry River First Nations
- Doig River First Nation
- Gitanyow First Nation
- Gitga'at First Nation
- Gitxaala Nation
- Gitxsan Nation
- Halfway River First Nation
- Horse Lake First Nation
- Kitselas First Nation
- Kitsumkalum First Nation
- Lake Babine Nation
- Lax Kw'alaams Band
- McLeod Lake Indian Band
- Metlakatla First Nation
- Nak'azdli Whut'en
- Saulteau First Nations
- Takla First Nation
- Tl'azt'en Nation

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<https://projects.eao.gov.bc.ca/api/public/document/5886908ae036fb0105768bb4/download/Order%20issued%20under%20section%2011%20of%20the%20proposed%20Prince%20Rupert%20Gas%20Transmission%20Project%20signed%20by%20Nathan%20Braun%20%28EAO%29%20November%208%2C%202013.pdf>

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<https://projects.eao.gov.bc.ca/api/public/document/588690a9e036fb0105768c84/download/Order%20issued%20under%20section%2013%20of%20the%20Environmental%20Assessment%20Act%20for%20the%20proposed%20Prince%20Rupert%20Gas%20Transmission%20Project%20-%20signed%20by%20Nathan%20Braun%20%28EAO%29%20May%2021%2C%202014.pdf>

11

<https://projects.eao.gov.bc.ca/api/public/document/68670acfb96cc50022f7d6db/download/PRGT%20Marine%20Amendment%20Assessment%20Report%20FINAL.pdf>

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<https://projects.eao.gov.bc.ca/api/public/document/68b71518bc7d290022b1c98f/download/PRGT%20Eastern%20Amendment%20Assessment%20Report.pdf>

-
- West Moberly First Nations
 - Yekooche First Nation

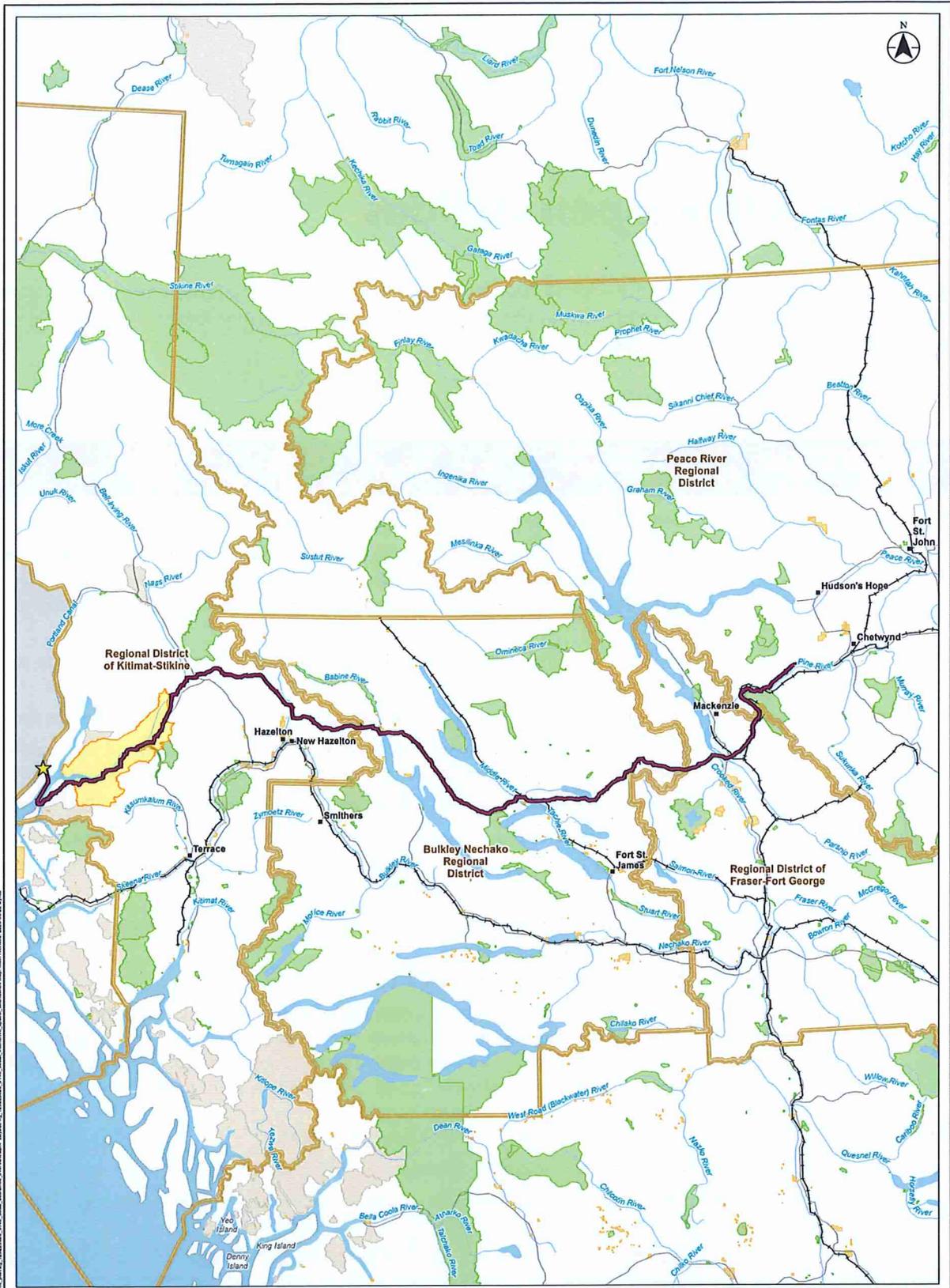
Local Government

- City of Fort St. John
- City of Terrace
- District of Chetwynd
- District of Fort St. James
- District of Hudson's Hope
- District of Mackenzie
- District of New Hazelton
- Regional District of Bulkley-Nechako
- Regional District of Fraser-Fort George
- Regional District of Kitimat-Stikine
- Peace River Regional District
- Town of Smithers
- Village of Hazelton

5.3.2 Temporal

The Proponent will implement the SEEMP in consultation with the Ministry of Housing and Municipal Affairs (formerly CSCD); the SEEMP is applicable from applied mechanical construction¹³ start (when the main construction camps for the mechanical construction workforce will be in use and potential socio-economic effects are most likely to occur) until one year after Project operations commence, or as otherwise directed by EAO.

¹³ Mechanical construction commences when trenching and pipelaying begins.



- Populated Place
- International Border
- Road
- Local Road
- Railway
- Watercourse
- Conservancy Area
- First Nations Reserve
- Nisga'a Lands Boundary
- Provincial Park, Ecological Reserve, or Protected Area
- Regional District Boundary
- Waterbody

★ Ksi Lisims Project Location
 — Prince Rupert Gas Transmission Pipeline Alignment



Stantec PRGT

Project Location: British Columbia
 Project Number: 123272020
 Prepared by: M2 20220201
 Projected by: TO 20220201
 Checked by: LL 20220202

Client/Project/Report: Prince Rupert Gas Transmission Ltd. Prince Rupert Gas Transmission Project Social and Economic Effects Management Plan

Figure No: 1 Page No: 1 of 1

Social and Economic Effects Management Plan Spatial Boundaries

Disclaimer: Stantec assumes no responsibility for data supplied in electronic format. The recipient accepts full responsibility for verifying the accuracy and completeness of the data. The recipient releases Stantec, its officers, employees, consultants and agents, from any and all claims arising in any way from the content or provision of the data.

6 Roles and Responsibilities

The Proponent is responsible for compliance with all applicable regulatory requirements, commitments, and conditions for the Project. Table 1 summarizes the primary roles and responsibilities of each party involved in the development, implementation, and reporting of the SEEMP.

Table 1 Overview of Roles and Responsibilities

Role	Responsibilities
The Proponent (or designate)	<ul style="list-style-type: none"> • Develop the SEEMP to satisfy Condition 34 of EAC #14-06 • Engage with Indigenous groups, local government, and provincial government agencies regarding effects related to community level infrastructure and services (including water, waste [solid and liquid], and health and social services), providing opportunities for their input • Allow a minimum 30-day review period for regulators and Indigenous groups to comment on the draft SEEMP • Document all engagement outcomes, including concerns raised and responses provided • Implement the SEEMP in consultation with the Ministry of Housing and Municipal Affairs until one year after Project operations commence, or as otherwise directed by EAO • Establish and maintain policies, procedures, and processes to facilitate SEEMP compliance • Verify contractors adhere to SEEMP requirements and oversee their mitigation activities • Collect and analyze data to support the monitoring and evaluation and reporting frameworks, as outlined in Section 9 • Prepare and submit SEEMP Status Reports to Indigenous groups, EAO, and Ministry of Housing and Municipal Affairs • Apply the adaptive management process outlined in Section 11.2 • Participate in and contribute to a regional social and economic management and monitoring committee, if such a committee (or its equivalent) is created by the provincial or local government, to address regional socio-economic and environmental issues in which industry is invited to participate, per Condition 6.1 of Amendment 7.
Contractor(s)	<ul style="list-style-type: none"> • Adhere to mitigation measures listed in the SEEMP • Adhere to and implement all relevant SEEMP policies and programs • Develop and follow site-specific procedures to address Project-related socio-economic effects within their work areas • Report regularly to the Proponent on compliance with mitigation measures and SEEMP-related policies • Communicate any concerns raised by workers or communities to the Proponent • Supervise sub-contractors' implementation of required mitigation measures

Role	Responsibilities
Sub-Contractor(s)	<ul style="list-style-type: none"> Adhere to mitigation measures listed in the SEEMP Adhere to all relevant SEEMP policies and programs Implement appropriate internal processes that enable data collection to provide accurate data to contractor(s) Report regularly to the contractor(s) on compliance with mitigation measures and SEEMP-related policies Communicate any concerns raised by workers or communities to the contractor(s)
Nisga'a Nation	<ul style="list-style-type: none"> Provide primary contact to receive routine and ad-hoc updates from the Proponent Co-develop elements of cultural awareness training Review the SEEMP and provide feedback
Indigenous groups	<ul style="list-style-type: none"> Provide primary contact to receive routine and ad-hoc updates from the Proponent Co-develop elements of cultural awareness training (with participation at the discretion of Indigenous groups) Review the SEEMP and provide feedback
EAO	<ul style="list-style-type: none"> Review the SEEMP and provide feedback Confirm compliance of the SEEMP
Ministry of Housing and Municipal Affairs	<ul style="list-style-type: none"> Review the SEEMP and provide feedback

Indigenous groups will be invited to review and comment on the draft SEEMP, offering cultural perspectives that enhance the relevance and sensitivity of monitoring and mitigation measures. These Nations will provide input for the selection of SEEMP indicators (refer to Section 8.1 and Appendix B) and co-develop elements of the cultural awareness training. Throughout the Plan's implementation, they will be engaged in relevant discussions and feedback processes.

7 SEEMP Communications and Ongoing Engagement

7.1 Engagement Approach

Engagement with Indigenous groups, local government, and provincial government agencies was initiated during the development of the 2016 SEEMP and of the updated SEEMP. Each of these entities were invited to review the draft updated SEEMP and provide feedback. Comments will be considered by the Proponent, and revisions made throughout the Plan, where relevant. The Proponent will provide responses demonstrating how feedback has influenced the development of the updated SEEMP.

Engagement is a foundational element of the SEEMP. This section describes engagement methods and records applicable to SEEMP implementation.

The Proponent will engage with Indigenous groups, local government, and provincial government agencies by undertaking a series of structured and ongoing engagement activities. These activities will include:

- Meetings to review the effectiveness of mitigation measures and to identify emerging social and economic issues.
- Timely and accessible information about the Project (e.g., sharing information on construction activities, potential impacts in local communities, and workforce, training, or procurement opportunities), which will be shared through multiple communication channels to reach wider audiences on a monthly basis, based on the nature of the activity being undertaken. Communication methods may include, a mix of social media, newsletters, printed materials, local advertising, and the Project website.¹⁴
- Engagement with regulators, including Ministry of Housing and Municipal Affairs, Northern Health, will form part of the SEEMP's ongoing engagement and monitoring activities.
- All engagement activities will be documented, and the outcomes will be communicated to the engaged parties (listed below).
- Following implementation of the SEEMP, where concerns are raised, the Proponent will address these issues in at least the same manner they are received (e.g., verbally during meetings; via email). If necessary, concerns will be escalated to trigger adaptive management processes (see Section 11.2).

Engaged parties will include, at least:

- Indigenous Groups¹⁵
- Local Government¹⁶
- Provincial Government Agencies (including Health Authorities)
 - EAO
 - Ministry of Housing and Municipal Affairs

¹⁴ www.princerupertgas.com

¹⁵ Indigenous groups have been defined in Section 5.3.1.

¹⁶ Local Government has been defined in Section 5.3.1.

-
- Ministry of Jobs and Economic Growth
 - Northern Health Authority
 - Ministry of Post-Secondary Education and Future Skills
 - Ministry of Emergency Management and Climate Readiness
 - Ministry of Transportation and Transit

Throughout the implementation of the SEEMP, the Proponent will continue to engage Indigenous groups, local governments, and provincial government agencies. Feedback will be documented and incorporated through adaptive management and the update process (refer to Section 11.2). While the SEEMP does not create formal decision-making authority for external partners, the Proponent is committed to integrating input through a responsive and inclusive process. Opportunities for Indigenous participation in SEEMP implementation, including follow-up program review, will be considered as implementation progresses.

The Proponent will review the effectiveness of SEEMP-related engagement activities monthly; results of the review will be reported semi-annually in the SEEMP Status Reports (Section 10). This may include collecting qualitative feedback, tracking satisfaction or concerns regarding the process, and adjusting engagement approaches to identify the need for action and response.

7.2 Communication Methods

The Proponent will use a variety of communication methods to provide updates to the engaged parties identified in Section 7 regarding Project activities and actions related to SEEMP mitigation implementation and effective monitoring. These methods include the following:

1. Project Information

- Project information updates (e.g., construction progress, workforce planning) will be provided monthly during peak construction or when key milestones are reached. These updates will be distributed through a combination of:
 - Community-specific newsletters
 - Social media
 - In-person or virtual engagements
 - Updates posted to the Project website

2. Toll-Free Phone Line

- A dedicated toll-free number will be available for urgent inquiries and responses to Project-related questions.

3. Community Feedback Process

- A communication framework for Indigenous groups and the public to inquire for information and share feedback regarding the Project.
- Describes the procedures for the Proponent to consider community questions, comments and concerns, respond to, and adjust mitigation measures or develop new measures.

4. Public Events

- The Proponent and/or its contractors will provide opportunities for public information sharing. This may include in-person or virtual information sessions held at appropriate times to support local awareness of career, training, and procurement opportunities. Public meetings or sessions will be organized at the discretion of the Proponent, based on the needs of the Project and the interests of communities.
- Events will be planned in collaboration with local community-based organizations, including those supporting underrepresented populations such as women and gender-diverse individuals, Indigenous youth, elders, people with caregiving responsibilities.

5. SEEMP Status Reports

- A summary of engagement and communications will be included in SEEMP Status Reports, which will be made available semi-annually.

The Proponent will track metrics related to engagement activities, including:

- Event attendance numbers
- Demographic data (when voluntarily disclosed)
- Distribution reach (e.g., number of newsletters distributed, website views)
- Feedback received

7.3 Engagement Record

Engagement activities for the SEEMP will be logged and documented including information about topics discussed, issues raised, actions taken, and any unresolved concerns.

Feedback received through engagement will be tracked and considered for SEEMP updates. A summary of input received, responses provided, and any resulting updates will be documented in SEEMP Status Reports (refer to Section 10). Where input identifies conflicts or differing views, the Proponent will seek to resolve them collaboratively and transparently through ongoing dialogue and the Community Feedback Process.

7.4 Management of Community Interests

While the SEEMP specifically addresses socio-economic effects associated with the Project, the Proponent recognize that additional community interests or issues may emerge that fall outside the immediate scope of the SEEMP. To manage, the Proponent will adopt a systematic approach comprising the following steps:

1. Identification

Indigenous groups, local government, and provincial government agencies may raise issues through engagement sessions, the Community Feedback Process, or the social and economic management and monitoring committee (if and when established). These may include concerns not directly tied to Project activities or outside the Proponent's direct authority.

2. Documentation

Issues that fall outside the direct scope of the SEEMP will be logged so that issues are tracked and that any referrals or follow-up actions are clearly recorded.

3. Collaboration and Referral

The Proponent commits to collaborating with the appropriate Indigenous groups, local government, and provincial government agencies to address issues beyond the immediate scope of the SEEMP. The Proponent will:

- Facilitate introductions or arrange meetings between engaged parties and the relevant authorities.
- Provide referrals to agencies or organizations that have the expertise and mandate to resolve the issue.
- Encourage dialogue among engaged parties to collaboratively identify potential solutions.

Concerns determined to lie outside the SEEMP's regulatory scope will not be included in SEEMP Status Reports, but they will continue to be managed through an appropriate process. This approach provides clarity in regulatory reporting while also demonstrating the Proponent's commitment to addressing broader community concerns in a structured and transparent manner.

8 Mitigation and Enhancement Measures

This section outlines mitigation measures designed to proactively address and manage potential socio-economic effects of the Project, related to the employment and community infrastructure and services valued components. A comprehensive list of mitigation measures is provided in Table 38-3 in Section 38.0 in the EAC Application (PRGT 2015d).

8.1 Employment, Procurement, and Training Strategy

The Employment, Procurement, and Training Strategy will describe measures to enhance employment, procurement, and training opportunities for local and regional residents and businesses, emphasizing the recruitment and training of Indigenous peoples and women. This strategy will involve communicating Project expectations (e.g., potential job opportunities, procurement opportunities, hiring schedules, skills and certification required) to Indigenous groups, local government, industry associations, and training institutions (Mitigation 38-7).

The Project will develop a training initiative, which will involve partnering with Indigenous groups, local government, industry associations, and training institutions, to invest in education and support training strategies that balance workforce needs (Mitigation 12-1, Mitigation 12-6). Its training initiative will aim to improve general work-readiness of the regional labour force and enhance local and Indigenous participation in the Project (Mitigation 12-11). The Proponent will also work with contractors to identify and address employment participation barriers for local and regional residents to increase opportunities to participate in the Project (Mitigation 12-2) (PRGT 2015d).

Implementation of the Employment, Procurement and Training Strategy will be the responsibility of the Proponent with support from the contractors. Participating Indigenous groups may also have specific commitments with respect to employment, procurement and training provided through confidential Project Agreements.

8.2 Code of Business Ethics

The Proponent and its contractors will be required to manage their staff and comply with the Proponent's Code of Business Ethics, which prohibits contractors and workers from participating in illegal and/or inappropriate activities that could be detrimental to the company. The Code of Business Ethics includes requirements for workers to maintain respectful behaviours while on and off-site (Mitigation 39-45).

8.3 Accommodation Strategy

The Accommodation Strategy outlines measures to reduce the use of rental housing and short-term accommodations and reduce pressure on the regional housing market. The Project will provide housing in workforce accommodations within the bounds of its permits for all non-local workers during construction (Mitigation 39-6). The workforce accommodations will be located outside of the Nisga'a Villages and local communities (Mitigation 39-1, Mitigation 13-3) and designed to be self-contained (Mitigation 13-4) (PRGT 2015d). Exceptions may include individuals with medical, or accessibility needs that make worker accommodations unsuitable. Any exceptions will be documented by the contractor(s), with records submitted to PRGT. This will include the rationale for the exception, expected duration of the residence, and any mitigation or support measures put in place to offset impacts on accommodation availability.

8.4 Indigenous Cultural Awareness Training

The Proponent will provide Indigenous Cultural Awareness Training to all Project workers pursuant to Condition 39 of the EAC Schedule B conditions. The training will be mandatory for all Project personnel and will result in a Certificate of Completion. The Indigenous Cultural Awareness Training is currently being co-developed with Indigenous groups and will reflect cultural knowledge, values, and best practices in cross-cultural communication. The training will be delivered via an online platform with video modules and self-assessments by the potential affected Indigenous groups.

8.5 Regional Social and Economic Management and Monitoring Committee

The Project is one of several factors influencing the broader socio-economic conditions in the region. It may interact cumulatively with other projects and activities. The Proponent is committed to participating in and contributing to a regional social and economic management and monitoring committee, should one be established by the provincial or local government, to address regional socio-economic and environmental issues in which industry is invited to participate.

8.6 Health and Social Services

The Proponent and contractor(s) will provide health and social services on site for their workers and contractors. A brief description of these services is provided in the following sections. Further details on health initiatives and protocols are described in the Health and Medical Services Plan.

8.6.1 Medical Services and Equipment

The Proponent will provide emergency personnel, medical equipment and access to virtual primary care (Mitigations 13-17, 13-23 and 39-12). Emergency medical personnel will be available 24/7 to respond to emergencies. At a minimum, the Proponent will adhere to the minimum levels of first aid requirements outlined in Schedule 3-A of Occupational Health and Safety (OHS) Regulation Part 3 which includes¹⁷:

- Two intermediate first aid attendants with transport certification
- Two advanced first aid attendants

For primary care needs, first aid attendants will be virtually supported by either a nurse practitioner or physician available 24/7.

At a minimum, the Proponent will equip each main spread camp with:

- An advanced first aid kit
- A medical centre that includes a first aid room, private consultation spaces and a private space for workers to access virtual medical appointments equipped with computers with camera access and headphones/microphones
- Sharps disposal containers located in the medical centre and other strategically located areas
- Automated external defibrillators located in the medical centre and other strategically located areas
- A fully equipped ambulance¹⁸ (Mitigation 13-17)

8.6.2 Drug and Alcohol Policy and Procedures

The Contractor will implement a series of drug and alcohol policies and procedures including:

- Prescreen workers for drug and alcohol use at the time of hire (Mitigation 13-13 and Mitigation 13-24)
- A Drug and Alcohol Policy (Mitigations 13-19, 13-25 and 39-39) that outlines procedures for enforcing a zero-tolerance policy for the use, possession, distribution, sale of illicit drugs, drug paraphernalia and alcohol use while on-shift. The Drug and Alcohol Policy will describe the roles and responsibilities of employees/contractors, outline supports and rehabilitation options for workers suffering from addiction and describe the progressive consequences.
- Harm reduction measures such as having naloxone available within the medical centre, first aid kits and allowing workers to have naloxone kits in their accommodations.
- Providing confidential and non-judgmental treatment and access to naloxone or referrals to company resources, virtual primary staff or other services.

¹⁷ Applicable for a Class 4 workplace which means that it is both a remote and less-accessible workplace, with a high hazard rating for 500 or more workers (WorkSafeBC 2025)

¹⁸ An ambulance will not be available at the marine camp main spread

8.6.3 Worker On-boarding

The Contractor will provide workers with health and safety information upon on-boarding including:

- Awareness of the Drug and Alcohol Policy
- The location of the medical centre and medical equipment including naloxone kits
- A description of medical services available including access to virtual primary care and programs such as Employee Family Assistance Program (EFAP)
- The expectation that workers are required to bring all prescribed medications for the duration of their shift and are expected to arrange primary care consultations within their home location, where possible¹⁹
- Delivery of health and safety orientation and training to all workers before and during construction employment to help prevent and control incidents leading to primary and acute-care needs (Mitigation 13-14)

8.6.4 Health Promotion Initiatives

Health promotion initiatives are measures intended to enhance worker's health and well-being. The Proponent will collaborate with Indigenous groups, local governments, and provincial government agencies to develop culturally appropriate health promotion measures. The Contractor will provide a variety of health promotion initiatives including providing access to (Mitigation 13-21):

- Develop and implement a Project-specific mental health program
- Financial management training (Mitigation 39-41)
- Recreational options such as gym and fitness amenities on-site and culturally appropriate recreational programming
- Telecommunication services for workers to maintain communication to their families (Mitigation 39-44)
- Healthy food options available on-site for every meal and snacks
- Delivery of promotional material (e.g., posters, pamphlets, email communications) and information sessions on a variety of health topics such as mental health, communicable diseases, healthy eating, harm reduction, substance use, and chronic disease prevention

¹⁹ The Proponents understand that not all health issues can be predicted or foreseen and that in some instances where the virtual nurse practitioner/physician requires the worker to seek in-person medical care, workers may need to use local services. It is expected that workers arrange regular check-ups, screening, follow-up appointments with their primary care provider in their home location.

9 Monitoring and Evaluation

The Proponent conducted baseline studies to establish the current social and economic environment, which serve as the foundation for assessing potential Project effects. These baseline assessments are necessary in determining whether mitigation measures are effective in reducing or avoiding adverse effects associated with the Project. The approach to monitoring the effectiveness of mitigation is structured as follows:

The Proponent will implement all mitigation measures as specified in the SEEMP, in accordance with federal and provincial regulatory requirements.

1. The Proponent will track implementation progress, verifying that activities comply with established regulatory requirements and that mitigation measures are delivered as planned.
2. Key indicators will be used to monitor the effectiveness of mitigation measures (Appendix B).
3. Adaptive management will be applied should a mitigation measure be deemed ineffective or there is an unpredicted effect that is attributable that arises (Section 11.2).
4. Monitoring results, including any adjustments made, will be communicated in SEEMP Status Reports (Section 10). This supports ongoing engagement and provides assurance that mitigation efforts are being evaluated and refined.

9.1 Indicators

Key monitoring indicators are used to track the implementation and effectiveness of mitigation measures; if mitigation measures are deemed ineffective, an adaptive management process will be applied (Section 11.2). These indicators are defined as *Project-specific indicators*, which reflect the Project's contribution to socio-economic outcomes, and *context indicators*, which describe the broader socio-economic conditions in which the Project will occur. The Project-specific and context indicators are drawn from internal and external sources (e.g., contractor data, feedback processes) and are detailed in Appendix B.

9.2 Evaluation

Monitoring data will be reviewed to determine whether further mitigation is necessary. If a mitigation measure is deemed ineffective, the adaptive management process could be triggered (refer to Section 11.2).

In instances where residual or unforeseen social and/or economic effects directly attributable to the Project are identified, the Proponent will take the following actions:

- Develop and implement revised mitigation measures aimed at addressing the observed deficiencies. The Proponent will engage with Indigenous groups, local government, and provincial government agencies to assess impacts and collaboratively identify enhanced mitigation responses.
- Revised mitigation measures will be implemented and their effectiveness monitored over time. All changes will be documented through the SEEMP review and update process (see Section 11) and reflected in SEEMP Status Reports (see Section 10).

9.3 Frequency

The Proponent will track and review internal monitoring metrics on a monthly basis or at the frequency specified in Appendix B. Project information updates will be provided monthly and posted to the Project website (see Section 7.2). Results and monitoring outcomes will be reported semi-annually (refer to Section 10, SEEMP Status Reports).

10 Reporting and Compliance

The Proponent will produce a consolidated SEEMP Status Report during construction and for the first year of operation. The SEEMP Status Reports will be produced semi-annually to align with the summer and winter construction seasons. Reporting has been designed to fulfil all requirements of Condition 34 of Schedule B of EAC #E14-06. The reports will summarize implementation, monitoring, and adaptive management across the following key topics:

- Workforce and Employment
- Procurement and Economic Participation
- Worker Accommodation and Housing Pressures
- Adaptive Management Actions
- Engagement and Community Feedback

The SEEMP Status Reports will include reporting on indicators that may trigger further mitigation. They will also provide a summary of any adaptive management actions taken in response to these indicators. For a complete list of reporting indicators. Mitigation measures are described at a high-level in Section 8. A comprehensive list of mitigation measures is provided in Table 38-3 in Section 38.0 in the EAC Application (PRGT 2015d).

The SEEMP Status Reports will be shared with those listed in Section 7, and be publicly available on the Project website.

11 Social and Economic Effects Management Plan Review and Update Process

11.1 Update Process

The SEEMP may require updates throughout the Project due to changes which may include, permit or regulatory updates, unanticipated conditions encountered during construction, input from Indigenous groups, local government or provincial government agencies, and changes in best practices.

The mitigation measures summarized in the SEEMP apply to multiple Project phases. If specific protection measures need to be revised as a result of ongoing consultation or to address unforeseen site-specific conditions, the SEEMP will be updated to reflect the revised measures. Edits to the SEEMP will typically align with one of three categories:

Administrative:

- Including spelling and grammatical corrections and incorporation of current information on EAC or provincial conditions.

Minor Update:

- Including, clarifications of text to reduce ambiguity. These clarifications do not result in a material change in practices, mitigation, or commitments made by the Proponent. Minor Updates may also include clarification of requirements, clarification of responsible party, and updated guidance and permit wording that does not result in a change in practice.

Revision:

- Including, changes in best practices, material changes to mitigation, or material changes to commitments made by the Proponent. Any edits to commitments that have been subject to a non-compliance issued by EAO would also be considered Revisions.

If changes to the SEEMP are administrative or minor, the Proponent will notify the 2016 SEEMP reviewers (see Section 7) that the SEEMP has been updated. If a revision is needed, the Proponent will provide the SEEMP reviewers with the opportunity to comment on those revisions. The revised SEEMP will be shared with the EAO, Ministry of Housing and Municipal Affairs, and Indigenous groups. If the revision falls under the jurisdiction of other regulators that reviewed the 2016 SEEMP, the revised SEEMP will also be shared with them.

The implementation of this SEEMP will use an adaptive management approach in response to new information as it becomes available. This approach will occur on an ongoing basis to address feedback from Indigenous groups, changing Project conditions or requirements, results of monitoring programs or feedback from the Community Feedback Process. As part of this adaptive approach, the Proponent will regularly evaluate mitigation measures proposed in this SEEMP for effectiveness. Monitoring and follow-up programs outlined in this SEEMP will inform the necessity of altering/updating implemented mitigation measures if it is determined effects are not being mitigated, or effects are occurring counter to what was characterized in the EAC Application.

The SEEMP Status Reports (refer to Section 10) will include a summary of any substantive updates made during the reporting year, including the rationale for the changes.

11.2 Adaptive Management

If mitigation measures are deemed ineffective or if unpredicted effects arise that are attributable to the Project, an adaptive management process will be applied (see bullets below). The Proponent will engage Indigenous groups and stakeholders to help evaluate whether mitigation measures are achieving the intended socio-economic outcomes. If issues are identified, the Proponent will work collaboratively to develop and implement adjustments. Timelines for implementation will be defined proportionally to the urgency of the issue. When significant adjustments are made, outcomes may be communicated to Indigenous groups and community stakeholders outside of the semi-annual reporting cycle. The adaptive management process involves the following steps:

- *Plan*: Indicators that trigger adaptive management actions will be identified based on the results of monitoring; engagement with Indigenous groups, local government, and provincial government agencies; and feedback received through the Community Feedback Process.
- *Act*: The Proponent will monitor and report on adherence to the SEEMP, effectiveness of mitigation measures and unforeseen social or economic effects directly related to the Project through the processes described in Section 9.
- *Assess*: The Proponent will determine whether objectives and/or targets are being met. If they are, they will continue to maintain the mitigation measures. If they are not, they will adjust the mitigation measures.
- *Adjust*: If mitigation measures are not effective, or the objectives and/or targets identified in the planning step are not met, or if unpredicted effects arise that are attributable to the Project, adjustments will be required. Once adjustments or new mitigation measures are implemented, continue to assess and adjust.

Monitoring, noncompliance, and incident reports, specific to employment and community infrastructure and services, will be reviewed by the Proponent on a monthly basis to determine whether mitigation measures are effective and if the effects are the same as described in the EAC Application. Where effects are greater than or different from those predicted in the EAC Application, this SEEMP will be updated to provide additional or revised mitigation measures in accordance with the process set out in Section 11.1 and included in SEEMP Status Reports.

12 References

- Coastal GasLink. 2016. Socio-economic Effects Management Plan. Available at: <https://projects.eao.gov.bc.ca/api/public/document/58868fd9e036fb010576879b/download/CGPs%20Socio-economic%20Effects%20Management%20Plan%20%28SEEMP%29%20Rev.%202%20dated%20March%2024%2C%202016.pdf>. Accessed July 2025.
- Prince Rupert Gas Transmission (PRGT). 2015a. Part B-3 Assessment of Potential Economic Effects - Employment. Available at: <https://projects.eao.gov.bc.ca/api/public/document/588690a5e036fb0105768c66/download/17%20Employment.pdf>. Accessed July 2025.
- Prince Rupert Gas Transmission (PRGT). 2015b. Part B-4 Assessment of Potential Social Effects – Community Infrastructure and Services. Available at: <https://projects.eao.gov.bc.ca/api/public/document/588690a4e036fb0105768c63/download/20%20Community%20Infrastructure%20and%20Services.pdf>. Accessed July 2025.
- Prince Rupert Gas Transmission (PRGT). 2015c. Part C Aboriginal Consultation – Nisga’a Nation. Available at: <https://projects.eao.gov.bc.ca/api/public/document/588690a1e036fb0105768c42/download/34%20Nisgaa%20Nation%20Part%201.pdf>. Accessed July 2025.
- Prince Rupert Gas Transmission (PRGT). 2015d. Part F Conclusions. Available at: <https://www.projects.eao.gov.bc.ca/api/public/document/5886909fe036fb0105768c39/download/38%20Conclusions.pdf>. Accessed July 2025.
- Prince Rupert Gas Transmission (PRGT). 2016. PRGT Socio-economic Effects Management Plan. December 2016. Available at: https://projects.eao.gov.bc.ca/api/public/document/5899037bb78f32001d572506/download/PRGT%20Socio-Economic%20Effects%20Management%20Plan_Final.pdf. Accessed July 2025.
- Trans Mountain Pipeline ULC (TMX). 2017. Socio-economic Effects Monitoring Plan for the Trans Mountain Pipeline ULC. Trans Mountain Expansion Project. NEB Condition 13. Available at: https://docs2.cer-rec.gc.ca/llisapi.dll/fetch/2000/90464/90552/548311/956726/2392873/2981674/3298049/A84618%2D3_Attachment_1_Revised_Compliance_Filing_Condition_13_%2D_A5R7K4.pdf?nodeid=3296630&vernum=-2. Accessed July 2025.
- WorkSafeBC. 2025. OHS Regulation part 3: Rights and Responsibilities. Available at: <https://www.worksafebc.com/en/law-policy/occupational-health-safety/searchable-ohs-regulation/ohs-regulation/part-03-rights-and-responsibilities#Schedule3A>. Accessed October 2025.

Appendix A Table of Concordance

Appendix A Table of Concordance

Table A.1 Table of Concordance

Condition Number	Condition ²⁰	Relevant Section or Corresponding Management Plan
Environmental Assessment Certificate		
34	The Holder must develop and implement a Social and Economic Effects Management Plan (SEEMP).	This Plan
	The Holder must develop the SEEMP in consultation with CSCD with guidance from framework materials that will be provided by EAO within 120 days of this EAC.	Section 1 Introduction
	The SEEMP must include specific actions to address the following:	-
	Implementation of mitigation set out in the Application Section 38, Table 38-3;	Section 8 Mitigation Measures and Enhancement Measures
	Planning and implementation for effective engagement with affected Aboriginal Groups, Nisga'a Nation, local governments, and provincial service delivery agencies regarding effects related to community level infrastructure and services including water, waste (solid and liquid), health and social services;	Section 7 Engagement Strategy
	Approach to designing and communicating programs related to employment and contracting opportunities, skills training and education;	Section 7 Engagement Strategy
	Monitoring and reporting on the effectiveness of the mitigation set out in the Application and in the SEEMP; and	Section 9 Monitoring and Evaluation; Section 10 Reporting and Compliance
	If necessary, description of an adaptive management approach, including the implementation of alternative mitigation, to address unpredicted effects directly related to the Project.	Section 11.2 Adaptive Management

²⁰ The Condition is presented as written in the EAC (Schedule B, Table of Conditions); PRGT acknowledges that some of the terminology is now outdated. For example, 'Indigenous' is now preferred over 'Aboriginal,' and some ministry names have changed (e.g., CSCD is now the Ministry of Housing and Municipal Affairs).

Condition Number	Condition ²⁰	Relevant Section or Corresponding Management Plan
	<p>The Holder must develop the SEEMP no less than six months prior to the Holder's planned date to establish main construction camps that are intended to house a workforce for the applied mechanical work on the Project.</p> <p>In order to allow for CSCD to review, comment and make a recommendation to EAO on whether to approve the final SEEMP, the Holder must provide a final SEEMP to CSCD no less than 90 days prior to the Holder's planned date to establish these main construction camps. The Holder must not establish these main construction camps until the SEEMP has been approved by EAO.</p>	<p>Section 1 Introduction; PRGT Socio-economic Effects Management Plan (PRGT 2016)</p>
	<p>The Holder is required to implement the SEEMP in consultation with CSCD until one year after Project Operations commence or as otherwise directed by EAO.</p>	<p>Section 5.3.2 Implementation Timeline</p>

Appendix B Indicators

Appendix B Indicators

Table B.1 provides a list of *Project-specific* and *context indicators*. *Project-specific indicators* comprise data that is provided by PRGT and its Contractor(s), that is specific and attributable to the Project. *Context indicators* provide information about socio-economic conditions, where the Project may be one of many contributing influences but where change in the indicator cannot be solely or accurately attributed to the Project. *Context indicators* are included as they may help explain (or provide context for) why observed socio-economic change is occurring and provide overall context regarding socio-economic conditions in the area, which identifies the extent to which a given community or region may be resilient and able to more easily absorb or adapt to Project-related influences; or whether the community or region is likely to be more vulnerable to adverse effects.

Table B.1 Indicators

Potential Effect(s)	Indicator(s)	Rationale for Selection	Responsible Party	Frequency of Data Collection
Project-Specific Indicators				
Employment and Labour Force	<ul style="list-style-type: none"> • Total number of project workers <ul style="list-style-type: none"> – Direct hires – Contractors – Location of each worker (regional vs. non-local) – Voluntary identity factors (e.g., gender, Indigenous affiliation, ethnicity) • Number of workers from Nisga’a Nation, local Indigenous groups (broken down by nation) and women <ul style="list-style-type: none"> – % of workforce that is BC or Canadian residents • Number of grievances or disputes related to employment 	To monitor workforce size and diversity; identify areas where employment strategies may need adjustments.	PRGT Contractor(s) Indigenous Nations	Monthly
Business and Procurement Participation	<ul style="list-style-type: none"> • Value of contracts awarded to: <ul style="list-style-type: none"> – Nisga’a businesses – Indigenous businesses – Local businesses – Regional businesses • Number of businesses participating in the procurement process (bid submission) 	To monitor inclusion of Indigenous and local businesses.	PRGT Contractor(s) Indigenous Nations	Monthly

Potential Effect(s)	Indicator(s)	Rationale for Selection	Responsible Party	Frequency of Data Collection
Workforce Development and Training	<ul style="list-style-type: none"> • Number of training opportunities provided • Number of apprenticeships provided • Number individuals participating in training or apprenticeships, including voluntary identity factors (e.g., gender, Indigenous affiliation, ethnicity) • Completion rate of training and certification programs • % of workers who completed cultural awareness training 	To assess support for workforce readiness and inclusive participation in skilled roles.	PRGT Contractor(s) Indigenous Nations Training Institutions	Monthly (cultural awareness training), Quarterly
Community Infrastructure and Services	<ul style="list-style-type: none"> • Number of workers in workforce accommodations • Camp occupancy data • Use of any off-site or rented housing (including rationale and duration) • Number of calls for service to ambulance, fire, and police • Volume or weight of wastes produced • Volume or weight of organic waste (compostable materials) 	To understand workforce distribution and related impacts to community infrastructure and services.	PRGT Contractor(s) Camp Contractor(s)	Monthly

Potential Effect(s)	Indicator(s)	Rationale for Selection	Responsible Party	Frequency of Data Collection
Healthcare Demand	<ul style="list-style-type: none"> Number of occupational and non-occupational injuries and illnesses referred: <ul style="list-style-type: none"> On-site Off-site medical facilities (i.e., ER, walk-in clinics) Number of mental health and wellness initiatives offered to workers 	To monitor demand for healthcare services and effectiveness of health and safety measures.	PRGT Contractor(s)	Monthly
Community Feedback	<ul style="list-style-type: none"> Number and type of community complaints or concerns related to Project-related effects to employment, community infrastructure and services, and transportation logged Summary of feedback on Project-related effects to employment, community infrastructure and services, and transportation 	To track emerging issues and responsiveness to community concerns and to understand Project-related effects experienced by local communities to assess whether mitigation is effective.	PRGT Contractor(s)	Monthly
Internal Employee Feedback	<ul style="list-style-type: none"> Employee turnover Code of Conduct violations Policy breaches, workplace conflict 	To track emerging issues and responsiveness to internal employee concerns to assess whether mitigation is effective.	PRGT Contractor(s)	Monthly

Potential Effect(s)	Indicator(s)	Rationale for Selection	Responsible Party	Frequency of Data Collection
Context Indicators				
Employment and Labour Force	<ul style="list-style-type: none"> Unemployment rate Labour force participation rate 	To provide context regarding broader labour market trends.	N/A	Annually
Social Cohesion and Community Safety	<ul style="list-style-type: none"> RCMP crime rates 	To provide context regarding broader crime trends.	Royal Canadian Mounted Police	Semi-annually

Prince Rupert Gas Transmission Health and Medical Services Plan

Prepared By:
Stantec Consulting Ltd.
Project No. 123223020

Prepared For:
Prince Rupert Gas Transmission Ltd.

02282-PRGT-RE-PLN-0010
2026-01-27

Revision 0

Revision History

Revision	Issued For	Date
A	Client review	January 6, 2026
0	Indigenous groups and regulatory agency review	January 27, 2026

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Acronyms and Abbreviations

Term	Definition
BC	British Columbia
BCEHS	British Columbia Emergency Health Services
CTAS	Canadian Triage and Acuity Scale
CDCL	Communicable Disease Control Lead
EAC	Environmental Assessment Certificate
EA0	Environmental Assessment Office
EFAP	Employee Family Assistance Program
ERP	Emergency Response Plan
FNHA	First Nation Health Authority
HEMBC	Health Emergency Medical BC
HMSP	Health and Medical Services Plan
km	Kilometre
LNG	Liquefied Natural Gas
MHO	Medical Health Officer
NLG	Nisga'a Lisims Government
OHS	Occupational Health and Safety
PPE	Personal Protective Equipment
PRGT	Prince Rupert Gas Transmission Ltd.
SEEMP	Social and Economic Effects Management Plan
SSERP	Site-Specific Emergency Response Plan

1 Introduction

Prince Rupert Gas Transmission Ltd. (PRGT, or the Proponent) is constructing the Prince Rupert Gas Transmission Project (the Project). The Project is an approved natural gas pipeline designed to deliver natural gas from northeast British Columbia (BC) to the northwest coast of BC. The Project consists of both land and marine based sections of pipeline and intends to provide natural gas to the Ksi Lisims Liquefied Natural Gas (LNG) – Natural Gas Liquefaction and Marine Terminal Project (Ksi Lisims LNG Project) at Wil Milit, BC, on Category A Lands owned by the Nisga'a Nation under the Nisga'a Final Agreement (Nisga'a Treaty) on Pearse Island, approximately 15 kilometres (km) west of the Nisga'a Village of Gingox and 82 km north of Prince Rupert, BC.

PRGT completed a multi-year environmental assessment process, culminating in the receipt of an environmental assessment certificate (EAC) in 2014 (EAC #E14-06). The issuance of EAC #E14-06 included 45 conditions that PRGT must implement to comply with the EAC (Schedule B, Table of Conditions of EAC #E14-06). Since receiving EAC #E14-06, PRGT applied for and received approval for multiple amendments. The most up-to-date version of the EAC and amendments and its conditions are available on BC Environmental Assessment Office (EAO)'s Project Information Centre website¹.

As per the EAO's report on the Review of an Application for Extension of an EAC (EAO 2019), Northern Health indicated that there has been new guidance developed for assessing and addressing social and health impacts since issuance of the EAC. Northern Health recommended that PRGT consider this guidance. PRGT committed to developing a Health and Medical Services Plan (HMSP). The HMSP will incorporate guidance from Northern Health to reduce potential Project-related strain on local health services and to provide a healthy and safe environment for PRGT's employees and contractors. PRGT committed to continued engagement with Northern Health to identify new issues and mitigation relevant to PRGT should the Project re-establish commercial support.

1.1 Project Overview

Construction of the Project will be divided into sections² and within a section there could be multiple construction spreads³, with one prime contractor responsible for construction of one or more pipeline sections. Based on current plans, PRGT anticipates the workforce will ramp up once prime contractors are in place. Under current planning, PRGT anticipates the following four construction phases and total workforce requirements:

- Phase 1 will focus on early works and site preparation, with an estimated workforce of 1,000 to 3,000
- Phase 2 is expected to begin mainline construction, with workforce numbers increasing to 4,000 to 6,000 workers
- Phase 3 will continue mainline construction and reach peak activity, with an estimated 6,000 to 8,000 workers
- Phase 4 will focus on testing, reclamation, and clean-up, with a reduced workforce of 1,500 to 3,000 workers

¹ <https://projects.eao.gov.bc.ca/p/588511d9aaecd9001b826b33/certificates>

² Refers to a separate unit of work that is part of the overall pipeline construction process.

³ Refers to individual segments of a pipeline that are constructed and tested; there can be multiple construction spreads within a section.

PRGT will work with the prime contractors and the Engineering, Procurement, and Construction Management (EPCM) to determine the best work schedule considering factors such as impacts to local population centres along the Project route, traffic, safety, and construction schedule. The workforce is expected to be sourced primarily from within British Columbia and across Canada. Recruitment strategies are described in the Social and Economic Effects Management Plan (SEEMP).

1.2 Purpose

The purpose of the HMSP is to describe the on-site medical services and programs to be delivered for the Project workforce to reduce impacts to local health services and to provide a healthy and safe environment for Project employees and contractors. The HMSP also describes the measures and protocols to coordinate health service delivery with Northern Health. Each Prime Contractor is required to adhere to provisions outlined in the HMSP, at a minimum, and develop a site-specific HMSP for each terrestrial and main spread marine camp described in Section 1.3.1.

The objectives of the HMSP are to:

- Meet the commitment made during the review of the Application for Extension of the EAC (EAO 2019) of developing an HMSP that follows latest guidelines from Northern Health
- Complement the SEEMP by providing further details on the implementation of health mitigation measures
- Outline the provisions of on-site emergency medical staff, primary medical staff and medical facilities
- Describe emergency response protocols
- Describe health promotion and mental health programs
- Develop measures for addressing communicable disease, disease and infection prevention and outbreak protocols

The HMSP is informed by guiding documents such as:

- Health and Medical Services Plan Best Management Guide for Industrial Camps (Northern Health 2015)
- Best Practices for Industrial Work Settings No. 2: Communicable Disease Management Guide (Northern Health 2023)
- Health and Safety During the Opioid Overdose Emergency: Northern Health's Recommendations for Industrial Camps (Northern Health 2018)
- Expectations of Industrial Medical Service Providers (Northern Health Office of Health and Resource Development 2023)
- Public Health Act Industrial Camps Regulation (British Columbia 2012)
- WorkSafeBC Occupational Health and Safety Regulation (WorkSafeBC 2025a)
- Nisga'a Lisims Government (NLG) Emergency Management Plan (NLG 2011)
- Nisga'a Lisims Government Adaptive Management Plan and Protocols Framework (NLG 2025a)
- Nisga'a Lisims Government Social, Economic, and Cultural Monitoring Plan (NLG 2025b)

1.3 Boundaries

1.3.1 Spatial

The spatial boundaries for the HMSP include all areas within which workers will be accommodated and working along the Project route and associated facilities, including ancillary facilities, meter stations and compressor stations (Figure 1). Workforce accommodations will be located throughout the Project corridor to support construction activities along the route. PRGT has secured most required permits and approvals for up to 15 workforce accommodations. As outlined in the Project's Certified Project Description, PRGT's certificate includes the following workforce accommodations:

- One main spread marine camp housing up to 400 workers
- Eight main spread construction camps housing up to 1,100 workers each, and three main spread construction camps housing up to 700 workers each
- Three compressor station camps, each with up to 225 workers

For the purposes of the HMSP, terrestrial camps refer to the main spread construction camps and compressor station camps. Camp numbers and locations may be adjusted as construction planning evolves. PRGT will continue to update and engage communities located near camp sites as plans are refined.

1.3.2 Temporal

The HMSP is applicable from the initiation of applied mechanical construction⁴ (when the main construction camps for the workforce will be in use and potential socio-economic effects are most likely to occur) until one year after Project operations commence, or otherwise directed by EAO.

⁴ Mechanical construction commences when trenching and pipelaying begins.

2 Roles and Responsibilities

Roles and responsibilities of different entities are described in Table 1.

Table 1 Overview of Roles and Responsibilities for the HMSP

Role	Responsibilities
PRGT or designate	<ul style="list-style-type: none"> • Lead the development and implementation of the HMSP • Engage with the EAO, Northern Health and Indigenous nations on the HMSP and provide opportunities for review and input • Require Contractors to adhere to policies, procedures, and protocols outlined in the HMSP • Liaise with Northern Health and Indigenous nations identified in Section 2 throughout the duration of the Project to keep up-to-date information on health services in the region • Designate a Communicable Disease Control Lead (CDCL) and Medical Director(s) for the Project • Track communication and decisions with Northern Health, Indigenous nations, and other stakeholders • Participate in and contribute to a regional social and economic management and monitoring committee, if such a committee (or its equivalent) is created by the provincial or local government, to address regional socioeconomic and environmental issues in which industry is invited to participate, and is related to the Amendment #7 Certified Pipeline Corridor, unless otherwise authorized by EAO.
Project Communicable Disease Control Lead (CDCL)	<ul style="list-style-type: none"> • Lead implementation of communicable disease procedures and protocols outlined in Section 5 • Collaborate with and support Contractors in communicable disease preparedness • Thoroughly document response efforts for all notifiable disease alerts and outbreaks • Collaborate with health providers to deliver health promotion initiatives, including communicable disease prevention outlined in Section 3.6 • Lead notifiable disease monitoring and adaptive management efforts outlined in Section 5 • The CDCL will inform affected Indigenous nations' health centre representatives on outbreaks or other health emergencies under the discretion of Northern Health's Medical Health Officer (MHO) • In the event of a potential outbreak, or outbreak, the CDCL will consult with the MHO at Northern Health • The CDCL will inform the First Nation Health Authority (FNHA) on outbreaks or other

Role	Responsibilities
Project Medical Director(s)	<ul style="list-style-type: none"> • Update, manage and communicate the policies and procedures outlines in the PRGT HMSP • Adhere to acts and regulations outlined in Section 1.2 • Manage the procurement of medical supplies and equipment, including developing security measures for medications and hazardous materials, coordinating resupply of supplies and medications, and coordinating the disposal of medical waste • Work with medical staff to determine the medical supplies, including pharmaceuticals, and equipment required on-Site • Work with medical staff to implement security measures for medications and hazardous materials • Oversee compliance with the <i>Personal Information Protection Act</i> including secure storage, patient consent protocols and staff training on privacy
Contractor(s)	<ul style="list-style-type: none"> • Develop a site-specific HMSP • Provide health and medical services and medical personnel and staff on-Site, in accordance with the HMSP • Provide workers with complete on-boarding and training as required in the HMSP • Require workers to comply with policies and procedures described in the HMSP • Report and document all workplace accidents, illnesses, and injuries to the on-site manager • Report on all reportable disease cases (numbers) and symptoms as well as all unknown or emerging illnesses to the CDCL
Incident Commander or designate	<p>As per the PRGT’s Core Emergency Response Plan (ERP), each contractor must develop a Site-Specific Emergency Response Plan (SSERP). Each SSERP must include Incident Command System (ICS) organizational charts, identify ICS roles and responsibilities and establish procedures for activating and operating the Incident Command Post and Emergency Operations Centre.</p>
Emergency Medical Personnel (e.g., paramedics)	<ul style="list-style-type: none"> • Respond to, assess, and treat on-Site medical emergencies as per protocols outlined in Section 4 • Manage patient information/health records including documenting all responses-to medical emergencies • Adhere to the safety and privacy of the patient’s personal and medical information • Be trained in medical emergency response protocols including the delivery of naloxone • Refer non-emergent cases to medical staff • Support medical staff in health promotion initiatives outlined in Section 3.6 • Accompany workers to medical appointments if determined to be necessary by the medical staff based on the worker’s medical condition as per procedures identified in Section 4

Role	Responsibilities
Medical Staff (e.g., nurse)	<ul style="list-style-type: none"> Assess and treat injured or ill workers to recognized scope of practice Assess workers' mental health conditions to recognized scope of practice and where appropriate, refer workers to mental health services programs that their company is implementing (e.g. EFAP) Develop and provide training to workers via information sessions, presentations, posters, or digital communications on relevant health topics Manage patient information/health records including documenting all worker visits and asking patient consent to share records with home care providers Follow communication, emergency and transportation procedures and protocols outlined in Section 4 Upon each worker's medical visit, ask the worker consent to transfer medical records to primary care physician or location of medical care follow-up Adhere to the safety and privacy of the patient's personal and medical information Communicate in a timely manner with the CDCL any signs and/or symptoms of potential notifiable diseases and support the CDCL manage outbreak responses as directed Support the CDCL in communicable disease prevention and outbreak response, including providing sexual health training, assessment, treatments, or referrals
Workers	<ul style="list-style-type: none"> Adhere to policies, procedures, and protocols outlined in the HMSP Guidance and site-specific HMSPs Report notifiable disease symptoms and seek appropriate care from the on-site medical staff Wear appropriate and prescribed personal protective equipment (PPE) for the work being performed Where feasible, use medical services in their home location (which may include telemedicine) for non-urgent, non-occupational injuries and general healthcare needs Bring enough prescribed medications for the duration of their shift
Northern Health	<ul style="list-style-type: none"> Advise PRGT on emerging best practices Provide observational feedback on the effectiveness of health measures, or emerging health pressures associated with the Project
British Columbia Emergency Health Services (BCEHS)	<ul style="list-style-type: none"> Provide emergency response to PRGT Provide observational feedback on the effectiveness of health measures, or emerging health pressures associated with the Project Advise PRGT on emergency response protocols
Health Emergency Medical BC (HEMBC)	<ul style="list-style-type: none"> Advise PRGT on emergency response protocols Point of contact for emergency response protocols as described in Section 4

3 Health and Medical Services

This section summarizes provisions of health and medical services to be provided on-site at *each* camp accommodation (Described in Section 1.3.1). Roles and responsibilities of the Medical Director, Emergency Medical Personnel, and Medical Staff are summarized in Table 1.

All emergency medical personnel and medical staff are expected to maintain a high standard of professionalism and adhere to the *Personal Information Protection Act*. Emergency medical personnel and medical staff are required to:

- seek patient consent for all medical consultations and procedures
- thoroughly document medical visits
- maintain confidentiality and privacy of workers health information
- manage and securely store medical records
- transfer medical records to workers home care provider(s)

3.1 Medical Director

PRGT will designate a Medical Director for the Project to oversee medical operations. Roles and responsibilities of the Medical Director are summarized in Table 1.

3.2 Emergency Medical Personnel

At a minimum, Contractors will adhere to the minimum levels of first aid requirements outlined in Schedule 3-A of WorkSafeBC Occupational Health and Safety (OHS) Regulation Part 3.⁵

On the marine spread camp, medical personnel will comply with the necessary WorkSafeBC and Transport Canada qualifications.

3.3 Medical Personnel

For each terrestrial camp, at a minimum, Contractors will provide access to a registered nurse stationed at on-site accommodations. Registered nurses will be required to work within their scope of practice outlined by the BC College of Nurses and Midwives.

⁵ Applicable for 500 or more workers (WorkSafeBC 2025b)

3.4 Virtual Services

Internet and other forms of telecommunication will be available on-site. Contractors will provide access to virtual medical services to support on-site medical personnel and workers including:

- Access to a virtual nurse practitioner and/or physician available 24/7 to support primary care needs. Virtual medical providers must adhere to their regulated scope of practice⁶. Virtual nurse practitioners and physicians can assist on-site medical staff by:
 - Providing patient consultation and referral
 - Ordering diagnostic services and managing results
 - Conducting mental health and capacity assessments
 - Prescribing drugs (including prescribing for opioid use disorder)
- Access to a virtual clinical psychologist/certified social worker available 24/7

3.5 Medical Facilities and Equipment

For each terrestrial camp, at a minimum, Contractors will adhere to the minimum levels of first aid room requirements and first aid supplies outlined in Schedule 3-A of OHS Regulation Part 3:

Each terrestrial camp will contain:

- A medical centre that includes a first aid room, private consultation spaces and a private space for workers to access virtual medical appointments
- Sharps disposal containers located in the medical centre and other strategically located areas
- Automated external defibrillators located in the medical centre and other strategically located areas
- Designated secure and temperature-controlled space for worker prescriptions
- A helicopter landing pad

The main spread marine camp will contain all of the medical facilities and equipment described above and is also required to include the following:

- An emergency watercraft designed and equipped to secure and protect injured workers from excessive movement, ability for injured worker to maintain normal body temperature, and adequate space for the emergency medical personnel (WorkSafeBC 2025b). This emergency watercraft will be used to transport workers from the main spread marine camp to the designated on-shore muster location.
- Per Transport Canada's (2014) the required safety equipment (TP 14070 E (2010)) for a vessel length more than 12 metres (e.g., the main spread marine camp) must include:
 - Transport Canada approved lifejacket, sized for each person on board
 - Marine emergency first aid kit
 - Reboarding device

⁶ Detailed scope of practice for Nurse Practitioners, including limitations, is further described under the British Columbia College of Nurses & Midwives (2025) Nurse Practitioners Scope of Practice: Standards, Limits, Conditions

-
- Buoyant heaving line at least 15 m long
 - Lifebuoy attached to buoyant line at least 15 m long
 - Life raft
 - Required fire equipment such as marine type fire extinguishers, fixed fire extinguishing system, fire axe, fire buckets, fire pump, hose and nozzle, smoke detectors and temperature and rate of heat rise detector

PRGT will work with the medical staff to determine appropriate pharmaceuticals and additional equipment to be provided on-Site. Any pharmaceuticals will be securely stored.

3.6 Health Promotion and Mental Health Programs and Services

This section describes health promotion and mental health programs and services through worker on-boarding, health promotion initiatives and substance use policies.

3.6.1 Worker On-boarding

At a minimum, Contractors will provide workers with health and safety information upon on-boarding including:

- Awareness of the Drug and Alcohol Policy
- The location of the medical centres and medical equipment including naloxone kits
- A description of medical services available on-site including access to virtual primary care and programs such as EFAP
- The expectation that workers are required to bring all prescribed medications for the duration of their shift and are expected to arrange primary care consultations within their home location, where possible⁷
- Delivery of health and safety orientation and training to all workers before and during construction employment to help prevent and control incidents leading to primary and acute-care needs

3.6.2 Health Promotion

Health promotion initiatives are measures intended to enhance worker's health and well-being. Contractors will provide a variety of health promotion initiatives including providing access to:

- An EFAP which provides access to 24/7 virtual counselling for workers and their families
- Financial management training
- Recreational options such as gym and fitness amenities on-site and culturally appropriate recreational programming
- Telecommunication services for workers to maintain communication with their families

⁷ The Proponent understands that not all health issues can be predicted or foreseen and that in some instances where the virtual nurse practitioner/physician requires the worker to seek in-person medical care, workers may need to use local services. It is expected that workers arrange regular check-ups, screening, follow-up appointments with their primary care provider in their home location.

-
- Healthy food options available on-site for meals and snacks
 - Delivery of promotional material (e.g., posters, pamphlets, email communications) and information sessions on a variety of health topics that may include, but is not limited to the following examples such as mental health, communicable diseases, healthy eating, harm reduction, substance use, and chronic disease prevention

3.6.3 Substance Use Policies

Contractors will implement a series of drug and alcohol policies and procedures including:

- Adhering to PRGT's Drug and Alcohol Policy aligned with the Canadian Model for a Providing a Safe Workplace that outlines procedures for enforcing a zero-tolerance policy for the use, possession, distribution, sale of illicit drugs, drug paraphernalia and alcohol use. The Drug and Alcohol Policy will describe the roles and responsibilities of employees/contractors, outline support and rehabilitation options for workers suffering from addiction and describe the progressive consequences
- Prescreening workers for drug and alcohol use prior to beginning work at site
- Providing harm reduction measures such as having naloxone available within each medical centre, first aid kits and allowing workers to have naloxone kits in their accommodations
- Providing confidential and non-judgmental treatment and access to naloxone or referrals to company resources, virtual primary staff or other services

4 Health Incident and Emergency Response

This section describes the policies and procedures including the notification and communication protocols for various types of health incidences such as emergency response, non-emergency medical transfer, WorkSafeBC notifications and return to work protocols. As per PRGT's Core ERP, Section 1.2 states that the "CORE ERP applies to all PRGT construction activities under British Columbia Energy Regulators (BCER) jurisdiction along the approved route. Construction contractors will develop Site-Specific Emergency Response Plans (SSERPs) that implement Core ERP requirements while addressing site-specific hazards, local emergency resources, and construction-phase activities".

The Canadian Triage and Acuity Scale (CTAS) is a clinical tool used by emergency departments, emergency department nurses, physicians, and healthcare management to triage patients according to acuity risk and care base on signs and symptoms, (CTAS National Advisory Committee n.d.). The CTAS tool will be adopted for the Project to inform emergency response protocols including notification and transportation. A description of the CTAS levels and corresponding Project response protocols are described in Table 2.

Table 2 Communication and Response Protocols for CTAS Levels and Other Medical Conditions

CTAS Levels/Type of medical condition	Description	Response Personnel	Minimally required communication and response protocols
Level 1 – Resuscitation	<p>Level 1 applies when there are “conditions that are threats to life or limb (or imminent risk of deterioration) requiring aggressive interventions”.</p> <p>Level 1 patients present with very obvious signs of distress and unstable vital signs. They are at immediate risk of deterioration requiring immediate aggressive interventions. They do not need further assessment. Examples include:</p> <ul style="list-style-type: none"> • Cardiac arrest • Respiratory arrest • Major trauma (in shock) • Shortness of breath (severe respiratory distress) • Altered level of consciousness (unconscious) 	Emergency Medical Personnel	<p>Terrestrial Camps</p> <ol style="list-style-type: none"> 1. The emergency situation is immediately brought to the on-Site Manager’s attention 2. On-Site Manager immediately contacts on-Site emergency medical personnel to respond 3. Emergency medical personnel respond to the incident and determine if the worker(s) need to be evacuated to a medical facility 4. If evacuation is required, the communication response protocol outlined in each SSERP will be activated. The Incident Commander will contact HEMBC to receive further instructions and HEMBC will contact the local health service providers in the event that emergency personnel are transporting workers to a hospital 5. All communications will be thoroughly documented <p><i>Mass Casualty</i></p> <p>In a mass causality scenario (e.g., two or more workers requiring evacuation), the communication response protocol outlined in the SSERP will be activated. The Incident Commander will inform BCEHS and HEMBC that there are multiple workers that need to be evacuated and receive further instructions regarding triaging and evacuation procedures.</p> <p><i>Main spread marine camp</i></p> <p>If evacuation is required at the main spread marine camp, the communication response protocol outlined above for the terrestrial camps will apply. Additionally, the Incident Commander will:</p> <ul style="list-style-type: none"> • Call BCEHS (911) and request air transport service to respond to emergency • If air transport is unable to respond (e.g., due to inclement weather), the Incident Commander will direct the emergency medical personnel to transport the worker via watercraft to nearest on-shore muster station and will communicate further transport instructions as directed by BCEHS • Contact the Canadian Coast Guard as standby if the worker is not able to be evacuated from site to shore
Level 2 – Emergent	<p>Level 2 applies when there are “conditions that are a potential threat to life, limb or function, requiring rapid medical intervention” by physician or medical directive. Examples include:</p> <ul style="list-style-type: none"> • Shortness of breath (moderate respiratory distress) • Vomiting blood (dizzy on sitting up) • Hypertension (Systolic Blood Pressure >220 or Diastolic Blood Pressure >130 with symptoms) • Altered level of consciousness • Fever (temperature >38C, looks septic) • Chest pain, cardiac features • Chest pain, non-cardiac features (other significant chest pain ripping or tearing) • Abdominal pain (severe pain 8/10) • Headache (sudden, severe, worst ever) • Major trauma – blunt, no obvious injury (e.g., pedestrian struck by car travelling at speed) 	Emergency Medical Personnel	Same as process for Level 1

CTAS Levels/Type of medical condition	Description	Response Personnel	Minimally required communication and response protocols
Level 3 – Urgent	<p>Level 3 applies when there are “conditions that could potentially progress to a serious problem requiring emergency intervention. May be associated with significant discomfort or affect ability to function at work or in activities of daily living”. Vital signs are usually normal or at the upper and lower ends of the normal range. These patients have a clear potential for deterioration but are often assigned to the emergency department waiting room if overcrowding problems. Examples include:</p> <ul style="list-style-type: none"> • Shortness of breath (mild respiratory distress) • Hypertension (Systolic Blood Pressure >220 or Diastolic Blood Pressure >130 with no symptoms) • Vomiting &/or nausea (mild dehydration) • Abdominal pain (moderate pain 4-7/10) • Headache (moderate pain 4-7/10) • Diarrhea (uncontrolled bloody diarrhea) 	Emergency Medical Personnel & Medical Staff	Same as process for Level 1
Level 4 – Less Urgent	<p>Level 4 applies when there are “conditions that relate to patient age, distress, or potential for deterioration that would benefit from intervention or reassurance within one or two hours”. Examples include:</p> <ul style="list-style-type: none"> • Confusion (chronic, no change from usual state) • Urinary tract infection complaints/symptoms (mild dysuria) • Constipation (mild pain) 	Medical Staff	<p>Terrestrial camps and main spread marine camp Workers needing attention seek care from the Medical Staff (e.g., nurse) at the on-site clinic</p> <ol style="list-style-type: none"> 1. If the Medical Staff requires additional support to diagnose or treat the worker, the Medical Staff will call the on-call virtual nurse practitioner/doctor or on-call virtual psychologist/mental health worker 2. If the Medical Staff requires the worker to seek care that is not provided on-Site (e.g., lab requisitions, medical imaging), and care cannot wait until the worker returns to their home location, the Medical Staff will arrange for the worker to receive local medical services (Appendix A) 3. If the worker presents signs and symptoms of communicable disease, the Medical Staff will refer to protocols outlined in Section 5.
Level 5 – Non-urgent	<p>Level 5 applies when there are “conditions that may be acute but non-urgent as well as conditions which may be part of a chronic problem with or without evidence of deterioration. The investigation or interventions for some of these illnesses or injuries could be delayed or even referred to other areas of the hospital or health care system”. Examples include:</p> <ul style="list-style-type: none"> • Diarrhea (mild, no dehydration) • Minor bites (+/- mild acute peripheral pain) • Dressing change (uncomplicated) • Medication request 	Medical Staff	Same as process for Level 4

CTAS Levels/Type of medical condition	Description	Response Personnel	Minimally required communication and response protocols
Mental Health Crisis	A mental health crisis can be characterized by a person experiencing difficulty achieving everyday functions/tasks, confusion and/or difficulty concentrating, changes in normal habits, sudden and intense mood swings (e.g., irritable, agitated, or angry) isolated and withdrawal, and experiencing fear and worry (St. John Ambulance 2024)	<ul style="list-style-type: none"> • Emergency medical personnel • Medical staff • Security services 	<p>Terrestrial camps and main spread marine camp</p> <ol style="list-style-type: none"> 1. Emergency situation is immediately brought to the worker's Manager or designate attention. 2. Manager or designate immediately contacts on-Site emergency medical personnel and/or on-Site security to respond. 3. Emergency medical personnel respond to the incident and determine if workers need to be evacuated to a medical facility. If immediate medical attention is required, the response protocol described for levels 1-3 will come into effect. 4. If the emergency medical personnel determine that the worker does not require evacuation, the emergency medical personnel will contact the on-Site medical staff (e.g., nurse). 5. The medical staff will assess the situation and call the on-call virtual physician and psychologist for additional support as required. 6. If the medical staff requires the worker to seek care that is not provided on-Site and care cannot wait until the worker returns to their home location, the Medical Staff will arrange for the worker to receive local medical services (Appendix A and Appendix B)

^aSource: Canadian Association of Emergency Physicians 2013

4.1 WorkSafeBC Notification

In all work-related illnesses or injuries, the Prime Contractor or designate must immediately notify the Project Medical Director and the Project Medical Director must notify WorkSafeBC within 72 hours. WorkSafeBC must be notified if the worker (WorkSafeBC 2025c):

- Sustains physical injury (even if no work is missed)
- Received a diagnosis of a work-related disease
- Has a mental health injury related to work or the work environment
- Has hearing loss due to prolonged exposure or a specific incident
- Suffers broken eyeglasses, dentures, hearing aids, or artificial limb due to a work-related incident

4.2 Return to Work Protocol

If workers are transferred off-site for medical treatment, the medical staff will prepare appropriate documentation to be completed by the workers and off-Site medical staff for returning to work. In emergency situations, the medical staff will follow up with off-Site medical treatment location staff to support completing required documentation.

Injury management and return to work is the sole responsibility of the employer. Workers will be required to have written return to work authorization by a medical professional after the following events:

- In an emergency situation that requires emergency medical personnel to respond to incident (on and off-site)
- In a non-emergency situation that required a worker to be transferred off-site for further treatment
- In non-emergency situations where the medical personnel have deemed the worker to be unfit for work
- In instances where workers are seeking treatment/support related to substance abuse issues

5 Communicable Disease Management

Contractors will be responsible for developing a communicable disease control plan that adheres to Section 21 of the *Workers Compensation Act*⁸. This section outlines PRGT's approach to communicable disease risk assessment, prevention, preparedness, and outbreak response. The approach incorporates guidance from:

- Northern Health's Best Practices for Industrial Work Setting No. 2: Communicable Disease Management Guide (2023)
- Industrial Camps and Communicable Diseases Guidelines: Guidance for Workers, Contractors, and Employers in the Agricultural, Forestry, and Natural Resource Sectors on Implementing the Provincial Health Officer Industrial Camps Order (Government of British Columbia 2022)

CDCL's roles and responsibilities are described Table 1 and further described within the protocols below.

Prior to the start of mechanical construction, the CDCL will:

- 1) Conduct a communicable disease risk assessment for the Project. The risk assessment will:
 - a) identify and describe factors that contribute to communicable disease transmission (e.g., workforce demographics, living conditions)
 - b) assess the severity, likelihood and risk of communicable diseases including influenza-like illnesses, gastrointestinal illness, sexually transmitted illnesses, blood-borne infections and vector borne infections. Northern Health (2023) definitions for each type of communicable disease are described below:
 - i) Influenza-like illnesses: Respiratory illness with fever >38°C, cough, and one or more of the following: sore throat, joint pain, muscle pain, or fatigue. Respiratory illnesses are transmitted through infectious respiratory particles through person-to-person spread (e.g., coughing, sneezing or talking) or through contact with contaminated surfaces or objects (Government of Canada 2025).
 - ii) Gastrointestinal (GI) illnesses: An illness that may be caused by a variety of agents including bacteria, viruses and protozoa. Diarrhea with or without nausea and/or vomiting.
 - iii) Sexually-transmitted illnesses: An infectious disease caused by an organism (bacteria, virus, or parasite) infection that is predominantly passed from one person to another during sex or intimate contact, although some sexually transmitted infections may pass through blood or blood products, or through contact with infected clothing, bed linens, or towels.
 - iv) Blood-borne infections: An infectious disease that can be spread through contact with infected blood and other potentially infectious body fluids.
 - v) Vector-borne infections: An infectious disease that is transmitted by insects and/or animals.
- 2) Identify communicable disease transmission measures across a hierarchy of controls including through elimination, substitution, engineering, administrative and personal protective equipment
- 3) Establish a communicable disease equipment and supply inventory
- 4) Develop a list of contacts to notify in the event of an outbreak

⁸ <https://www.worksafebc.com/en/law-policy/occupational-health-safety/searchable-ohs-regulation/ohs-guidelines/guidelines-for-workers-compensation-act#SectionNumber:G-P2-21>

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- 5) Prepare roles and responsibilities for contractors and staff in the event of an outbreak
 - 6) Prepare communicable disease education and training materials for contractors and staff
 - 7) Review the alert phase and outbreak phase response protocols in Table 3 and prepare training materials to camp operators and medical staff

During mechanical construction, the CDCL will implement response protocols for the two different scenarios outlined in Table 3.

Table 3 Outbreak Response Protocols

	Alert Phase Response	Outbreak Response
When the response phase will be activated	When three or more cases of influenza-like illness or GI illness occur within a three-day period at the Site	If the MHO declares an outbreak
Contact	Northern Health Regional Communicable Disease Hub Email: RegionalCD.HubTeam@northernhealth.ca Phone: 1-855-565-2990 [Outside business hours, MHO On-call (1-250-565-2000, press 7 for switchboard)]	
CDCL's responsibilities	<ul style="list-style-type: none"> • Contact Northern Health Regional Communicable Disease Hub • Communicate that an Alert Outbreak Response Protocol has been activated with contractors and medical staff • Coordinate enhanced cleaning and disinfecting measures • Encourage employee hygiene and use of appropriate PPE • Instruct symptomatic workers to not come into work duties until 48 hours after symptoms have ended (or as further directed by the MHO) • Discuss with the MHO the option to isolate/cohort workers experiencing symptoms and coordinate with camp operator for isolation instructions • Consult with the MHO to determine if on-site medical staff will complete testing to confirm the infectious agent and diagnosis such as using BC Centre for Disease Control GI Disease Outbreak Kits or testing for other infectious diseases • Consult with the MHO and camp operators to determine if shared facilities (e.g., gym) are required to be temporarily closed • Monitor and document all activities, communications and timeline of events throughout the Alert Phase 	<ul style="list-style-type: none"> • Contact Northern Health Regional Communicable Disease Hub • Consult with Northern Health about the appropriate action required including the extent to which notifications about the outbreak to Indigenous nations and the public is required • Coordinate roles and responsibilities • Contact contractors, such as the camp operators, to inform of the scenario and to activate outbreak procedures • Notify staff that an outbreak has occurred and emphasize hand hygiene, PPE requirements, and any isolation requirements • Coordinate outbreak signage throughout the worker accommodations • Coordinate increased cleaning and disinfection procedures for common areas and frequently touched surfaces

6 Health Services Monitoring and Quality Improvement

The SEEMP provides a list of Project-specific and context indicators, including health indicators to monitor healthcare demand including the number of occupational and non-occupational injuries and illnesses referred onsite and to off-site medical facilities and the number of mental health and wellness initiatives offered to workers. Contractors are responsible for providing PRGT with health indicators to support SEEMP reporting. If implementation of the HMSP is deemed ineffective via the monitoring and reporting process outlined in the SEEMP, or if unpredicted effects arise that are attributable to the Project, the following adaptive management process, described in the SEEMP in more detail, will be applied:

- *Plan:* Indicators that trigger adaptive management actions will be identified based on the results of monitoring; engagement with Indigenous nations, local government, and provincial government agencies; and feedback received through the various communication methods listed in Section 7.2 of the SEEMP.
- *Act:* The Proponent will monitor and report on adherence to the SEEMP, effectiveness of mitigation measures and unforeseen social or economic effects directly related to the Project through the processes described in Section 9 of the SEEMP.
- *Assess:* The Proponent will determine whether objectives and/or targets are being met. If they are, they will continue to maintain the mitigation measures. If they are not, they will adjust the mitigation measures.
- *Adjust:* If mitigation measures are not effective, or the objectives and/or targets identified in the planning step are not met, or if unpredicted effects arise that are attributable to the Project, adjustments will be required. Once adjustments or new mitigation measures are implemented, continue to assess and adjust.

As described in the SEEMP, PRGT will engage Indigenous nations and stakeholders to help determine the effect the Project has on local health services. If issues are identified, the Proponent will work collaboratively with Indigenous nations and stakeholders to revise, develop or implement new measures.

6.1 HMSP Update Process

The HMSP may require updates throughout the Project due to changes which may include, permit or regulatory updates, unanticipated conditions encountered during construction, input from Indigenous nations, local government or provincial government agencies, and changes in best practices. If specific protection measures outlined in the HMSP need to be revised as a result of ongoing consultation or to address unforeseen site-specific conditions, the HMSP will be updated to reflect the revised measures. Indigenous nations and other parties identified in Table 1 will be informed of changes made to the HMSP.

7 References

- Alberta Health Services. n.d. Find Healthcare. Available at: <https://www.albertahealthservices.ca/findhealth/Service.aspx?serviceAtFacilityID=1137858> Accessed November 2025.
- Blueberry River First Nation. n.d. Health Services. Available at: <https://blueberryfn.com/departments-services/health/> Accessed November 2025.
- Binche. n.d. Health Services. Available at: <https://binche.ca/band-programs-and-services/> Accessed November 2025.
- British Columbia. 2012. Public Health Act Industrial Camps Regulation. Victoria: King's Printer. Updated August 26, 2025. Available at: https://www.bclaws.gov.bc.ca/civix/document/id/complete/statreg/70_2012. Accessed September 2025.
- British Columbia College of Nurses & Midwives. 2025. Nurse Practitioners Scope of Practice: Standards, Limits, Conditions. Available at: https://www.bccnm.ca/Documents/standards_practice/np/NP_ScopeofPractice.pdf. Accessed October 2025.
- BC Energy Regulator (BCER). n.d. Contact. Available at: <https://www.bc-er.ca/contact/> Accessed November 2025.
- BC Emergency Health Services. n.d. Contact us. Available at: <https://www.bcehs.ca/contact>. Accessed November 2025.
- Canadian Association of Emergency Physicians. 2013. The Canadian triage and Acuity Scale: Combined Adult/Pediatric Educational Program. Participant's Manual. Available at: https://ctas-phctas.ca/wp-content/uploads/2018/05/participant_manual_v2.5b_november_2013_0.pdf. Accessed March 2025.
- Canadian Triage and Acuity Scale National Advisory Committee (CTAS National Advisory Committee). n.d. CTAS Introduction. Available at: https://ctas-phctas.ca/?page_id=17. Accessed March 2025.
- Doig River First Nation. n.d. Health Services. Available at: <https://doigriverfn.com/member-area/health/> Accessed November 2025.
- Environmental Assessment Office (EAO). 2019. EAO's Report on the Review of an Application for Extension of an Environmental Assessment Certification: Prince Rupert Gas Transmission Project November 25, 2014. EAC #E14-06. Available at: https://projects.eao.gov.bc.ca/api/public/document/5cc1f5576a15600025dd7914/download/PRGT_EAC-Extension-Report_April%2025.pdf. Accessed July 2025.
- First Nations Health Authority. n.d. First Nations Virtual Doctor of the Day. Available at: <https://www.fnha.ca/what-we-do/ehealth/virtual-doctor-of-the-day> Accessed November 2025.
- Gitanyow Human Services Authority. n.d. Contact us. Available at: <https://gitanyowhealth.ca/contact/> Accessed November 2025.
- Gitga'at First Nation. n.d. Health Services: A variety of health and social services available to members, and in some cases, guests. Available at: <https://www.gitgaatnation.ca/health>. Accessed November 2025.

Gitxaala Nation. n.d. Health Services. Available at: <https://gitxaalanation.com/departments/health/> Accessed November 2025.

Government of British Columbia. 2022. Industrial Camps and Communicable Diseases Guidelines: Guidance for Workers, Contractors and Employers in the Agricultural, Forestry, and Natural Resource Sectors on Implementing the Provincial Health officer *Industrial Camps Order*. Available at: https://www2.gov.bc.ca/assets/gov/health/about-bc-s-health-care-system/office-of-the-provincial-health-officer/covid-19/guidance_all_sector_work_camps.pdf. Accessed November 2025.

Government of Canada. n.d. Report a search and rescue incident. Available at: <https://www.ccg-gcc.gc.ca/contact/search-rescue-recherche-sauvetage-eng.html> Accessed November 2025.

Government of Canada. 2025. Respiratory Infectious Diseases: How to Reduce the Spread with Personal Protective Measures. Available at: <https://www.canada.ca/en/public-health/services/diseases/respiratory-infectious-diseases-reduce-spread-personal-protective-measures.html>. Accessed August 2025.

Halfway River First Nation. n.d. Contact Us. Available at: <https://hrfn.ca/contact/> Accessed November 2025.

HealthLinkBC. n.d. 1-800-Suicide 24-7 distress phone services. Available at: <https://www.healthlinkbc.ca/find-care/find-health-services/program/1-800-suicide> Accessed November 2025.

HealthLinkBC. 2024. HealthLink BC 8-11 Services. Available at: <https://www.healthlinkbc.ca/find-care/healthlink-bc-8-1-1-services> Accessed November 2025.

Kitselas First Nation. n.d. Departments. Available at: <https://kitselas.com/departments/health/> Accessed November 2025.

Kitsumkalum First Nation. n.d. Contact Us. Available at: <https://kitsumkalum.com/contact/> Accessed November 2025.

Lake Babine Nation. n.d. Lake Babine Nation. Contact Us. Available at: <https://www.lakebabine.com/contact-us/> Accessed November 2025.

Lax Kw'alaams Band. n.d. Health. Available at: <https://laxkwalaams.ca/health/> Accessed November 2025.

Mcleod Lake Indian Band. n.d. Social and Health Department. Available at: <https://www.mlib.ca/departments/social-and-health/> Accessed November 2025.

Metlakatla First Nation. n.d. Metlakatla Health Centre. Available at: <https://metlakatla.ca/health/metlakatla-health-centre> Accessed November 2025.

Nak'azdli Whut'en. n.d. Contact. Available at: <https://www.nakazdliwhuten.ca/contact> Accessed November 2025.

Nisga'a Valley Health Authority. n.d. Services. Available at: <https://nisgahealth.bc.ca/services/> Accessed November 2025.

Nisga'a Lisims Government (NLG). 2011. Emergency Management Plan: A Strategic Guide for Site Support to Major Emergencies and Disasters. Available at: https://www.nisgaanation.ca/wp-content/uploads/2024/07/NLG-Emergency-Response-Plan-March-2012_0.pdf. Accessed September 2025.

NLG. 2025a. Adaptive Management Plan and Protocols Framework. Accessed September 2025.

NLG. 2025b. Social, Economic and Cultural Monitoring Plan. Accessed September 2025.

Northern Health. n.d.a. Fort St. John health services at a glance. Available at: <https://www.northernhealth.ca/our-communities/fort-st-john/health-services-at-a-glance>. Accessed November 2025.

Northern Health. n.d.b. Terrace health services at a glance. Available at: <https://www.northernhealth.ca/our-communities/terrace/health-services-at-a-glance>. Accessed November 2025.

Northern Health. n.d.c. Chetwynd health services at a glance. Available at: <https://www.northernhealth.ca/our-communities/chetwynd/health-services-at-a-glance>. Accessed November 2025.

Northern Health. n.d.d. Fort St. James health services at a glance. Available at: <https://www.northernhealth.ca/our-communities/fort-st-james/health-services-at-a-glance>. Accessed November 2025.

Northern Health. n.d.e. Hudson's Hope health services at a glance. Available at: <https://www.northernhealth.ca/our-communities/hudsons-hope/health-services-at-a-glance>. Accessed November 2025.

Northern Health. n.d.f. Mackenzie health services at a glance. Available at: <https://www.northernhealth.ca/our-communities/mackenzie/health-services-at-a-glance>. Accessed November 2025.

Northern Health. n.d.g. The Hazeltons health services at a glance. Available at: <https://www.northernhealth.ca/our-communities/the-hazeltons/health-services-at-a-glance>. Accessed November 2025.

Northern Health. n.d.h. Smithers health services at a glance. Available at: <https://www.northernhealth.ca/our-communities/smithers/health-services-at-a-glance>. Accessed November 2025.

Northern Health. n.d.i. Prince Rupert Facilities. Available at: <https://www.northernhealth.ca/our-communities/prince-rupert/prince-rupert-facilities>. Accessed November 2025.

Northern Health. n.d.j. Stewart health services at a glance. Available at: <https://www.northernhealth.ca/our-communities/stewart/health-services-at-a-glance>. Accessed November 2025.

Northern Health. n.d.k. Vanderhoof health services at a glance. Available at: <https://www.northernhealth.ca/our-communities/vanderhoof/health-services-at-a-glance>. Accessed November 2025.

Northern Health. n.d.l. Prince George Facilities. Available at: <https://www.northernhealth.ca/our-communities/prince-george/prince-george-facilities>. Accessed November 2025.

Northern Health. n.d.m. Burns Lake health services at a glance. Available at: <https://www.northernhealth.ca/our-communities/burns-lake/health-services-at-a-glance>. Accessed November 2025.

Northern Health. n.d.n. Fraser Lake health services at a glance. Available at: <https://www.northernhealth.ca/our-communities/fraser-lake/health-services-at-a-glance>. Accessed November 2025.

Northern Health. n.d.o. The KUU-US Crisis Response Service. Available at: <https://www.northernhealth.ca/services/mental-health-substance-use/get-help-now>. Accessed November 2025.

Northern Health. 2015. Health and Medical Services Plan Best Management Guide for Industrial Camps. Available at: https://www.northernhealth.ca/sites/northern_health/files/services/office-health-resource-development/documents/industrial-camps-BMG.pdf. Accessed July 2025.

Northern Health. 2018. Health and Safety During the Opioid Overdose Emergency: Northern Health's Recommendations for Industrial Camps. Available at: https://www.northernhealth.ca/sites/northern_health/files/services/office-health-resource-development/documents/overdose-prevention-camps.pdf. Accessed July 2025.

Northern Health. 2023. Best Practices for Industrial Work Settings No. 2: Communicable Disease Management Guide. Available at: https://www.northernhealth.ca/sites/northern_health/files/services/office-health-resource-development/documents/communicable-disease-best-practices-guide.pdf. Accessed July 2025.

Northern Health Office of Health and Resource Development. 2023. Expectations of Industrial Medical Service Providers. Available at: https://www.northernhealth.ca/sites/northern_health/files/services/office-health-resource-development/documents/industrial-expectations.pdf. Accessed July 2025.

Office of Gitanmaax. n.d. Committed to Wellness. Available at: <https://www.gitanmaax.com/health-services>. Accessed November 2025.

Saulteau First Nation. n.d. Health. Available at: <https://www.saulteau.com/departments-and-services/health-centre/> Accessed November 2025.

STARS. n.d. Contact Stars. Available at: <https://stars.ca/contact/> Accessed: November 2025.

St. John Ambulance. 2024. Know the Signs: Mental Health Crisis. Available at: <https://sja.ca/en/our-impact/know-the-signs-mental-health-crisis>. Accessed August 2025.

Takla First Nation. n.d. Staff Directory. Available at: <https://www.taklafn.ca/staff-directory/> Accessed November 2025.

TI'azt'en Nation. n.d. Contact Us. Available at: <https://tlaztennation.ca/contact-o/> Accessed November 2025.

Transport Canada. 2014. Chapter 5- Be Ready for Emergencies. Available at: <https://tc.canada.ca/en/marine-transportation/marine-safety/chapter-5-be-ready-emergencies>. Accessed July 2025.

West Moberly First Nation. n.d. Department, Health. Available at: <https://westmo.org/departments/health/> Accessed November 2025.

WorkSafeBC. n.d. Contact Us. Available at: <https://www.worksafebc.com/en/contact-us> Accessed November 2025.

WorkSafeBC. 2025a. Occupational Health and Safety Regulation. Available at: [Occupational Health and Safety Regulation - WorkSafeBC](#). Accessed September 2025.

WorkSafeBC. 2025b. OHS Regulation Part 3: Rights and Responsibilities. Available at: <https://www.worksafebc.com/en/law-policy/occupational-health-safety/searchable-ohs-regulation/ohs-regulation/part-03-rights-and-responsibilities>. Accessed May 2025.

WorkSafeBC. 2025c. Report a Workplace Injury or Disease. Available at: <https://www.worksafebc.com/en/claims/report-workplace-injury-illness>. Accessed April 2025.

Yekooche First Nation. n.d. How We Thrive. Available at: <https://yekooche.com/how-we-thrive/> Accessed November 2025.

Appendix A Description of Local Health Services

Appendix A Description of Local Health Services

Table A.1 Local Health and Medical Services Relevant to the Project

Community	Facility	Services	Pharmacy in community? Yes (Y)/No (N)
Fort St. John ¹	Fort St. John Hospital	3 intensive care units, 44 acute care beds, 124 long-term care beds, 7 maternity rooms, Cardiac diagnostics, respiratory services, minor surgeries, medical imaging, laboratory testing.	Y
	Fort St. John Health Unit	Dental, environmental health, hearing and audiology services, licensing, public health	
	Fort St. John Medical Clinic	Community rehabilitation, mental health, nutrition and social workers, public health services (immunizations and sexually transmitted infections)	
Terrace ²	Ksyen Regional Hospital	4 operating rooms, 1 trauma bay, 8 critical care beds, 2 high-acuity beds, 20-beds psychiatric unit, cardiac diagnostics, birthing unit, community cancer clinic, dialysis clinic, emergency services, lab, medical imaging, respiratory services	Y
	McConnell Estate	Two-storey, 22 units of subsidized assisted living units, laundry facilities on each floor, common area includes a dining and recreation area	
	Terraceview Lodge	99 bed long-term care facility, including 90 long-term care beds, three hospice care beds and six short-term beds, dental room, rehabilitation services, food and nutrition services, recreational therapy	
	Seven Sisters Facility ¹¹	Mental health facility next to the Ksyen Regional Hospital, 25 beds, five apartment style spaces, multi-sensory room, recreation spaces, long-term rehabilitation and recovery programming	
	Terrace Health Unit ¹²	Prenatal and early year education and support, sexual health programming, nutritional support and programming, immunizations, speech and language, dental health, harm reduction	

Community	Facility	Services	Pharmacy in community? Yes (Y)/No (N)
Chetwynd ³	Chetwynd Hospital and Health Centre	7 long term-care beds, 5 acute beds, emergency services, medical inpatient care, respiratory therapy, primary care nursing and home support, palliative care, medical imaging, laboratory testing.	Y
	Primary Care Clinic	1 procedure/CPR room with AED, 12 exam rooms, Northern Health office space, Aboriginal liaison, mental health and substance use, public health nursing, respiratory care therapy, occupational therapy	
Fort St. James ⁴	Nats'oojeh Hospital and Health Centre	27 beds, 9 acute care beds, 18 long-term care beds, emergency care, acute care, cardiac diagnostics, long-term care, lab, medical imaging, primary and community care	Y
Hudson's Hope ⁵	Hudson's Hope Health Centre	Cardiac diagnostics, dental clinic, home and community care, laboratory, medical imaging, pharmacy, palliative care, primary care	Y
District of Mackenzie ⁶	Mackenzie and District Hospital and Health Centre	5 acute beds, 4 long-term care beds, cardiac diagnostics, emergency services, home and community care, laboratory, medical clinic, medical imaging, mental health and substance use services	N
District of New Hazelton ⁷	Wrinch Memorial Hospital	1 respite bed, 1 secure psychiatric observation room, 9 long-term care beds, 13 acute care beds, cardiac diagnostics, dental clinic, lab, medical imaging and ultrasound, respiratory services, retail pharmacy on-site, medical clinic, mental health, rotating specialists, public health, chronic disease	Y
Smithers ⁸	Bulkley Valley District Hospital	24 acute care beds, cardiac diagnostics, community cancer clinic, emergency/outpatient, lab, medical, medical imaging, palliative care, pediatric services, psychiatric observation unit, respiratory services, surgical services	Y
	Healthy Living Centre	Chronic disease, dietitian support, primary and community care	
	Smithers Community Health	Mental health, substance use services, public health	

Community	Facility	Services	Pharmacy in community? Yes (Y)/No (N)
Prince Rupert ⁹	Prince Rupert Regional Hospital	30 beds, including 26 inpatient beds, two maternity beds and two high acuity beds, acute and emergency care, cardiac diagnostics, general and orthopedic surgery, internal medicine, lab and medical imaging services, maternity care unit, respiratory services	Y
	Acropolis Manor	Long-term care with three units, including 56 long-term care beds, three respite beds, two palliative beds, with single and double occupancy rooms, recreation rooms, outdoor courtyards	
	Prince Rupert Community Health ¹⁴	Prenatal and early year education and support, sexual health programming, nutritional support and programming, immunizations, speech and language, dental health, harm reduction	
	Summit Residence	15 subsidized living units for single or double occupancy, communal dining room, two laundry rooms, lounge area	
Stewart ¹⁰	Stewart Health Centre	Physician's Office, emergency care, primary care, prenatal and postnatal care, radiology, laboratory and medical imaging services, mental health and substance use services, specialists upon referral	N
Vanderhoof ¹¹	St. John Hospital	24 beds acute care, surgeries, cardiac diagnostics, dietician, occupation therapy, physiotherapy, lab and medical imaging, maternity unit, oncology clinic, palliative care, respiratory services	Y
	Stuart Nechako	53 beds, including 12 beds for dementia residents, two temporary beds for respite and palliative care, single and double occupancy, recreation room, outdoor courtyard, hair salon	
Prince George ¹²	University Hospital of Northern British Columbia	Ambulatory care, laboratory and medical imaging, outpatient services, surgery, visiting clinics, Indigenous Health services	Y
	Health facilities	A main medical hub in northern British Columbia offering health services such as subsidized assisted living units, medical clinics, hospice facility, several long-term care facilities, a senior home, specialized services for Multiple Sclerosis patients	

Community	Facility	Services	Pharmacy in community? Yes (Y)/No (N)
Burns Lake ¹³	Lake District Hospital and Health Centre	Acute care, cardiac diagnostics, emergency services, lab and medical imaging, mental health and substance use services, rehabilitation services	Y
	Medical Clinics	A main medical hub in northern British Columbia offering three health clinics, a long-term care facility and an assisted living facility	
Fraser Lake ¹⁴	Fraser Lake Community Health Center	Diagnostic and treatment centre, ambulance and emergency transfer services, cardiac diagnostics, palliative care, dietician, home care, lab and medical imaging, mental health and substance use services, occupational therapy, respiratory services	Y

Sources:

¹ Northern Health. n.d.a

² Northern Health. n.d.b

³ Northern Health. n.d.c

⁴ Northern Health. n.d.d

⁵ Northern Health. n.d.e

⁶ Northern Health. n.d.f

⁷ Northern Health. n.d.g

⁸ Northern Health. n.d.h

⁹ Northern Health. n.d.i

¹⁰ Northern Health n.d.j

¹¹ Northern Health n.d.k

¹² Northern Health n.d.l

¹³ Northern Health n.d.m

¹⁴ Northern Health n.d.n

Appendix B Health and Medical Contact List

Appendix B Health and Medical Contact List

Local service provider and agency contact numbers are described in Table B.1

Table B.1 List of Service Providers and Contact Details

Service Provider/Agency	Description of services	Contact
PRGT 24-Hour Emergency Contact	PRGT 24-Hour Emergency Contact	1-866-421-5808
BCER 24-Hour Incident Reporting ¹	BCER 24-Hour Incident Reporting	Industry Line: 1-800-663-3456 Public Line: 1-800-500-2237
HealthLinkBC 811 ²	All general health inquiries, service provider information, immunization information Including dietitian support Physical activity support	Phone #: 8-1-1 Open 24/7
WorkSafeBC ³	In all work-related illnesses or injuries, WorkSafeBC must be notified by the Incident Commander or designate within 72 hours (Process described in Section 4.1)	Claims: 1-888-967-5377 Health and Safety Assistance: 1-888-621-7233 Worksite Emergency: 1-888-621-7233 Crisis Support: 1-800-624-2928
Northern Health Northern Health Regional Communicable Disease Hub ⁴	When three or more cases of influenza-like illness or GI illness occur within a three-day period at the Site (Process described in Section 5)	Email: RegionalCD.HubTeam@northernhealth.ca Phone: 1855-565-2990 [Outside business hours, Medical Health Officer (MHO) On-call (1-250-565-2000, press 7 for switchboard)]
First Nation Health Authority Virtual Doctor of the Day ⁵	Access to virtual primary health care to Indigenous peoples and their family members in BC.	Phone number: 1-855-344-3800 Hours of operation: seven days a week 8:30 am to 4:30 pm
STARS ⁶	With a base in Grand Prairie, Alberta, STARS offers critical care through air, ground or virtually.	Phone number: 1-780-830-7000
BC Emergency Health Services ⁷	BCEHS offer out-of-hospital and inter-hospital health services throughout BC.	9-11 Toll Free: 1-800-461-9911 Cellphone/SAT Phone/ Outside BC: 250-374-5937

Service Provider/Agency	Description of services	Contact
Northern Health: Mental Health and Substance Abuse ⁸	Northern Health provides a mental health hotline for emotional support. The KUU-US Crisis Response Service provides culturally aware crisis support for Indigenous people. The substance abuse hotline can help individuals find resources and support.	Mental Health: 310-6789 KUU-US Crisis Response: 1-800-588-8717 Substance Abuse: 1-800-663-1441
First Nation Health Centres or Contacts	Nisga'a Valley Health Authority ⁹	Phone: 1-888-233-2212 24- Hour Crisis Line: 1-250-975-0991
	Binche Whut'en Health Services ¹⁰	Phone: 1-250-648-3673
	Blueberry River First Nation Health Services ¹¹	Phone: 1-250-785-3411
	Doig River First Nation Health Services ¹²	Phone: 1-250-827-3776 ext. 1271
	Gitanyow First Nation ¹³	Phone: 1-250-849-5572
	Gitga'at First Nation ¹⁴	Phone: 1-250-841-2525
	Gitxaala Nation ¹⁵	Email: healthreception@gitxaalanation.com
	Gitxsan Nation Health and Wellness Centre ¹⁶	Phone: 1-250-842-6320
	Halfway River First Nation ¹⁷	Phone (reception): 1-250-772-5058
	Kitselas First Nation ¹⁹	Phone: 1-250-635-5084 (ext 4086)
	Kitsumkalum First Nation ²⁰	Phone: 1-250-635-6172
	Lake Babine Nation ²¹	Phone: 1-250-692-4700
	Lax Kw'alaams Band ²²	Phone: 1-250-625-3331
	McLeod Lake Indian Band ²³	Phone: 1-250-750-4415
	Metlakatla First Nation ²⁴	Phone: 1-778-629-1080
	Nak'azdli Whut'en ²⁵	Phone: 1-250-996-7400
	Saulteau First Nations ²⁶	Phone: 1-250-788-7266
	Takla First Nation ²⁷	Phone: 1-250-996-7780
	Tl'azt'en Nation ²⁸	Phone: 1-250-648-3350
	West Moberly First Nation ²⁹	Phone: 1-250-788-3622
	Yekooche First Nation ³⁰	Phone: 1-250-612-4388

Service Provider/Agency	Description of services	Contact
BC Health Link 24-7 Distress Phone Services ³¹	Confidential, 24-hour toll-free crisis line for emotional and mental health support. Crisis line workers provide intervention through emergency mental health teams, emergency services and may refer calls to local crisis centres for additional support.	BC Wide Toll Free: 1-800-784-2433
Coast Guard ³²	Coastal search and rescue services.	Toll Free: 1-800-277-7270 Telephone: 613-965-3870

Sources:

- ¹ BCER n.d.
- ² HealthLinkBC 2024
- ³ WorkSafeBC n.d.
- ⁴ Northern Health 2023
- ⁵ First Nations Health Authority n.d.
- ⁶ STARS n.d.
- ⁷ BC Emergency Health Services n.d.
- ⁸ Northern Health n.d.o
- ⁹ Nisga'a Valley Health Authority n.d.
- ¹⁰ Binche n.d.
- ¹¹ Blueberry River First Nation n.d.
- ¹² Doig River First Nation n.d.
- ¹³ Gitanyow Human Services Authority n.d.
- ¹⁴ Gitga'at First Nation n.d.
- ¹⁵ Gitxaala Nation n.d.
- ¹⁶ Office of Gitanmaax n.d.
- ¹⁷ Halfway River First Nation n.d.
- ¹⁸ Alberta Health Services n.d.
- ¹⁹ Kitselas First Nation n.d.
- ²⁰ Kitsumkalum First Nation n.d.
- ²¹ Lake Babine Nation n.d.
- ²² Lax Kw'alaams Band n.d.
- ²³ McLeod Lake Indian Band n.d.
- ²⁴ Metlakatla First Nation n.d.
- ²⁵ Nak'azdli Whut'en n.d.
- ²⁶ Sauteau First Nation n.d.
- ²⁷ Takla First Nation n.d.
- ²⁸ Tl'azt'en Nation n.d.

Service Provider/Agency	Description of services	Contact
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²⁹ West Moberly First Nation. n.d.

³⁰ Yekooche First Nation n.d.

³¹ HealthLinkBC n.d.

³² Government of Canada n.d.



British Columbia's
**Office of the Human Rights
Commissioner**

DECEMBER 18, 2025

All Mayors of British Columbia
VIA EMAIL

Dear Mayors,

**Re: Human Rights Commissioner's inquiry into police use of media exclusion zones –
recommendations and request for response**

On October 16, 2023, I initiated an inquiry into police use of media exclusion zones. The goal of the inquiry is to shine a light on how police use exclusion zones to restrict media access to observing police action affecting the human rights of marginalized populations, in situations where there is no injunction that explicitly allows for such an exclusion zone.

The primary focus of this inquiry was the exclusion zone created in Vancouver during the Downtown Eastside decampment on April 5 and April 6, 2023. The inquiry examined whether and how police use of exclusion zones can comply with domestic and international human rights standards. More information about the inquiry can be found [here](#) and in the confidential attached executive summary.

I appreciate that you did not provide evidence to inform this inquiry. However, because of the significant impact of exclusion zones on freedom of the press and because their use is growing across B.C. and Canada in a variety of contexts including decampments, I am making a recommendation to all municipalities and all police departments in B.C. regarding the use of media exclusion zones (or indeed, any areas in which media access is restricted) without judicial authorization.

Section 47.20 of B.C.'s *Human Rights Code* provides that at the conclusion of an inquiry, I can make a written report containing any recommendations I consider appropriate. The inquiry report includes a total of 6 recommendations, including the following:

Recommendation 1

The Vancouver Police Department and the City of Vancouver, as well as all other police departments and municipal governing bodies in British Columbia, immediately cease

excluding or restricting media areas around police action¹ without explicit judicial authorization, unless required by immediate and unforeseeable circumstances limited to a credible and substantial threat to public safety (in accordance with the law) or for the integrity of a criminal investigation. If an exclusion zone (as defined in this report) is required in these circumstances, every reasonable effort to mitigate the impact on freedom of press must be taken.

I am requesting a formal response from your municipality to the recommendations by Monday, January 12, 2026. In your response, please indicate whether your municipality accepts and will implement the recommendations. Please note that I may make your municipality's response public when the report is released.

Please note that I anticipate releasing the final report in early February 2026. My team will be following up with you after that time as well to engage in conversation with you and your staff about plans for implementation.

I am grateful for your attention to this matter and would be happy to meet with you, should you wish to learn more about the inquiry or discuss the impacts on press freedom in more depth in your community. Freedom of the press is a vital part of our democracy and is enshrined in both our constitutional and our international law commitments. My mandate as Human Rights Commissioner covers all local governments in the province and includes promoting protection with international human rights law. I look forward to working with you to ensure that freedom of the press is protected across the province.

If you have any questions in the meantime, please feel free to contact Carly Hyman, General Counsel at Carly.Hyman@bchumanrights.ca.

Sincerely,



Kasari Govender, Commissioner
BC's Office of the Human Rights Commissioner

Attachment: Confidential - Executive Summary of Commissioner's inquiry into media exclusion zones

¹ Including (but not limited to) where police are involved in 'keeping the peace'.





Commissioner's recommendations

The Commissioner's following recommendations must be implemented in a manner that is consistent with domestic and international human rights laws and promotes and protects the rights of people who are unhoused or otherwise impacted by exclusion zones.

Please note that the footnotes to the recommendations contain additional context, clarity and examples, and do not form the substance of the recommendations.

Recommendation 1

The Vancouver Police Department and the City of Vancouver, as well as all other police departments and municipal governing bodies in British Columbia, immediately cease excluding or restricting media areas around police action¹ without judicial authorization, unless required by immediate and unforeseeable circumstances limited to a credible and substantial threat to public safety (in accordance with the law) or for the integrity of a criminal investigation. If an exclusion zone (as defined in this report) is required in these circumstances, every reasonable effort to mitigate the impact on freedom of the press must be taken.

Recommendation 2

By June 2027, the Ministry of Public Safety and Solicitor General introduces legislation, legislative amendments or regulations to enshrine the directive established in Recommendation 1. This must be done in collaboration with municipal police departments and RCMP e-division, and in consultation with Indigenous Peoples, media organizations, subject matter experts and advocacy organizations.

In compliance with the *Charter of Rights and Freedoms* (the Charter) and domestic and international human rights standards including *United Nations Declaration on the Rights of Indigenous Peoples* (UNDRIP), the legislation (and attendant regulations as necessary) should include:

- direction on how to determine whether someone is a journalist, taking into account that journalism is a function shared by a wide range of actors. People engaged in a good faith

¹ Including (but not limited to) where police are involved in 'keeping the peace'.

news-gathering activity of a journalistic nature on matters of public interest should be captured by this direction, in accordance with both international and domestic law. For the sake of clarity, the Commissioner recommends that the Ministry not engage in credentialling journalists for this purpose;

- time limits and size constraints for exclusion zones, to ensure as minimal intrusion on freedom of the press as possible;
- rules around managing admission, access control points and pool cameras, including ensuring that pool cameras are established by media rather than police and are only used when strictly necessary;²
- requirements for when notice of media restrictions is to be given to the media and the content of such notice;
- training requirements for all involved front-line officers and commanders to ensure familiarity with the legislative changes;
- training requirements for all front-line officers and commanders on press freedom and freedom of assembly, as discussed in more detail below.

Recommendation 3

The Ministry of Public Safety and Solicitor General provide funding for rights-based training for all front-line police officers and commanders, including:

- to the Canadian Association of Journalists or other experts to develop training on press freedom, which should include the role of the press in a functional democracy, legal protections of freedom of the press, when and in what way media access may be restricted and police obligations when interacting with or making operational decisions in regard to the media; and
- to a legal organization or expert to develop training on freedom of association, which should include the importance of the right to assemble in a functional democracy, legal protections of the right, when and in what way protests may be restricted, regulated or monitored and police obligations when interacting with or making operational decisions in regard to protests.

² For example, pool cameras should be limited to only those circumstances where only one camera shot is possible (for example, a person speaking at a podium), where it is only physically possible for one camera to fit in the filming space or where expense of filming is extraordinary and therefore outweighs benefits of diverse views.



The Ministry should direct the Justice Institute and the RCMP to work with these organizations to deliver this ongoing training or should otherwise incorporate this recommendation into their ongoing development of standardized training curriculum, starting in February 2027.

Recommendation 4

By February 2027, the Ministry of Attorney General provide annual funding (either independently or in collaboration with another legal funder) to an independent organization tasked with providing systemic advocacy and individual legal support to media and media organizations who encounter legal and policy issues concerning freedom of the press.

Recommendation 5

By June 2026, the Vancouver Police Board amend its policy regarding handling of service and policy complaints to require that all complaints are handled in a procedurally fair manner and with rigour, including by ensuring that members involved in a matter under investigation are not tasked with investigating their own actions or those of their superiors and that all handling of complaints is addressed in a manner that is free from conflicts of interest, either real or perceived, and transparent.

Recommendation 6

By June 2027, the Ministry of Public Safety and Solicitor General introduce amendments to the Police Act to:

- amend s.171(1) to make explicit that where investigations of Service and Policy complaints are conducted, they can be done by an independent third party;
- amend s.171(2) to make compliance with the Office of the Police Complaint Commissioner's recommendations mandatory; and
- amend s.173(1)(b) to change non-binding recommendations on investigation, study or procedural courses of action to binding directions.



Executive summary of Commissioner’s Inquiry into Media Exclusion Zones

This Inquiry was intended to shine a light on the importance of press freedom by examining the restrictions imposed by the City of Vancouver (the City, COV) and the Vancouver Police Department (VPD) during the Hastings decampment on April 5 and 6, 2023. The Human Rights Commissioner has broad powers under the *Human Rights Code* (the Code) to initiate an inquiry if she is of the view that inquiring into a matter would promote or protect human rights in the province. In this case, the matter the Commissioner decided to inquire into was the reported restrictions on media during the Downtown Eastside (DTES) decampment in order to promote and protect human rights in the province, because a free press is critical to a functioning democracy.

The Inquiry examined whether and why media and others were restricted from the Hastings Street encampment on April 5 and 6, 2023, and why public access to the traffic cameras was shut down on the morning of April 5, 2023. The Commissioner examined whether the restrictions complied with human rights law protections for freedom of the press and freedom of assembly in domestic and international law. The Inquiry also examined the process followed by the Vancouver Police Board’s (VPB, the Board) and VPD’s consideration of a complaint about the creation of an exclusion zone on April 5 and 6, 2023.

During this Inquiry, the Commissioner gathered extensive records from the City of Vancouver, the Vancouver Police Department and the Vancouver Police Board. The Commissioner’s staff interviewed, under oath, staff from the City and the VPD who were involved in the decampment and media who were present in the Downtown Eastside during the decampment. The Commissioner held three engagements sessions with members of the media and community organizations who support people living in the Downtown Eastside.

As a preliminary point, the term exclusion zone was a point of contention in this Inquiry. In the Commissioner’s view, the definitions suggested by the VPD and the City and the distinctions drawn between an “exclusion zone” and a “work zone” or a “safety zone” are overly formalistic and not based on principle or law. An exclusion zone is the closure or regulation of any form of access, including media access, to public space.¹ It might also be referred to as a no-go zone, buffer zone, temporary access control area, work zone, restriction or safety zone.² The significance of a restriction on access depends on its effect and the impact on press freedom, not on the words

¹ Robert Diab, *Commissioned Paper: The Policing of Large-Scale Protests in Canada: Why Canada Needs a Public Order Police Act*, (Public Order Emergency Commission, 2022), 41, <https://publicorderemergencycommission.ca/files/documents/Policy-Papers/The-Policing-of-Large-Scale-Protests-in-Canada-Diab.pdf>.

² “A History of Media Exclusion Zones – How injunctions became synonymous with police drive crackdowns on press freedom in Canada,” Canada Press Freedom Project, June 15, 2023, <https://canadapressfreedom.ca/a-history-of-media-exclusion-zones/>.

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used to describe it or even the intent or purpose in establishing it.³ The human right to press freedom may be affected by partial as well as total restrictions.⁴ Our reference to the term exclusion zone encompasses all the various names referred to above because of their similar effect on restricting media access to specific areas, potentially hindering the ability to gather and disseminate information to the public.

The Commissioner found:

1. **Transparency was compromised during the Hastings decampment.** Despite claims from the City and the VPD that media were only restricted during the first 45 minutes of the decampment, the Commissioner found that the VPD restricted media and others from accessing defined zones throughout April 5 and 6, 2023. The Commissioner found that the VPD allowed a pool camera it arranged into the exclusion zone and that all other media access had to be approved through a chain of command. Many media were denied entry into the exclusion zone for various lengths of time. Some media entered on their own, and were not asked to leave. Others were denied access and never entered the zone. The exclusion of media meant that their ability to report on the police action was impacted, and therefore transparency was compromised. The Commissioner found that, while not intentional, the traffic camera shutdown and subsequent lack of clarity contributed to the lack of transparency caused by the exclusion of the media and the public.
2. **The exclusion zone was not in accordance with human rights standards.** The Commissioner found that the exclusion zone was an extension of the City’s practice of creating “safe work zones” and had the primary purpose of preventing safety issues, including issues associated with protests. The Commissioner found that while restricting media access was not the goal of the restrictions, the impact on the media was not adequately considered and the potential risks to staff or public safety did not justify the broad restrictions. The limited access that was provided was insufficient to meet the requirements of necessity and proportionality. The Commissioner found that the VPD did not have statutory or common law authority for the exclusion zone and that it was unlawful. The Commissioner found that the disproportionate effect on marginalized groups—especially Indigenous people and people with disabilities—that resulted from the April 5

³ *Ontario Human Rights Commission and O’Malley v. Simpsons-Sears Ltd.*, 1985 CanLII 18 (SCC), 551, <https://canlii.ca/t/1ftxz>; *Andrews v. Law Society of British Columbia*, 1989 CanLII 2 (SCC), 173-174, <https://canlii.ca/t/1ft8q>.

⁴ UN Human Rights Committee, *General Comment no. 34, Article 19, Freedoms of opinion and expression*, CCPR/C/GC/34, 12 September 2011, paras 22-24, 26-29, 33-36, <https://www2.ohchr.org/english/bodies/hrc/docs/gc34.pdf>; UN Human Rights Committee, *General comment no. 31, The Nature of the General Legal Obligation Imposed on States Parties to the Covenant*, CCPR/C/21/Rev.1/Add. 13, May 26, 2004, para 6, https://tbinternet.ohchr.org/_layouts/15/treatybodyexternal/Download.aspx?symbolno=CCPR%2FC%2F21%2FRev.1%2FAdd.13&Lang=en; **Edison Lanza**, *Protest and Human Rights, Standards on the rights involved in social protest and the obligations to guide the response of the State Special Rapporteur for Freedom of Expression* (Office of the Special Rapporteur for Freedom of Expression of the Inter-American Commission on Human Rights, 2019), para. 31, <https://www.oas.org/en/iachr/expression/publications/Protesta/ProtestHumanRights.pdf>.

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and 6, 2023 forced eviction meant that the restrictions on media and attendant harms also disproportionately impacted the rights of the encampment residents. These disproportionate impacts perpetuated systemic discrimination contrary to the *Human Rights Code*.

Given that many members of the media were able to access the site at some point, the extent or scope of the impact on access to information is unclear. However, it is clear that harm was done: the Commissioner heard from members of the media that the media restrictions in this case—even where journalists eventually were able to enter the restricted zone—had the effect of impairing media from reporting on the full story of the forced eviction of the residents of the Hastings encampment.

The Commissioner accepts the City and VPD’s perspective that they took steps to provide for media access in a dynamic and challenging circumstance and acknowledges that the City and VPD had safety risks to manage, including protecting the physical and mental safety of City staff. What was required of the City and VPD officials was to balance managing the safety risks without unnecessarily or unreasonably restricting freedom of the press and freedom of assembly in manner that was proportional to the risks posed. In the Commissioner’s view, the VPD and City clearly prioritized safety over media access and did not give due regard to the importance of the human rights issues at stake. This was clearly confirmed by one of the deputies of the VPD in a meeting with the Commissioner when he said that physical safety always takes precedence over human rights. In prioritizing safety over freedom of the press and freedom of assembly, the City and VPD failed to ensure that the restrictions on these freedoms were proportionate to perceived or anticipated risks.

3. **Oversight process followed by the Vancouver Police Board was insufficient.** The process followed to investigate a complaint about the media exclusion falls within the purview of the Human Rights Commissioner because the right to freedom of the press is rendered meaningless without access to effective remedies. The Commissioner found that the investigator assigned to investigate the complaint was not sufficiently independent because the investigator was also the Gold Commander with overall operational responsibility for the decampment. The Commissioner found that the complaint was not adequately investigated and considered by the VPD and VPB due to insufficiencies in the investigative process. In sum, the process for ensuring oversight over the issues flagged above was significantly compromised.

The Commissioner makes six recommendations to the Ministry of Public Safety and Solicitor General, the Ministry of Attorney General, the City of Vancouver, the Vancouver Police Department and the Vancouver Police Board. Recommendation 1 is also directed to all municipalities and all police departments in B.C.

Statutory Reporting Requirement

Local Government Name:

District of New Hazelton

Have the most recent versions of following documents been completed, and if required, approved and submitted to the Province?

Document	Yes/No	Reporting Timeline	Due Date
Long Term Development Plan (LTDP)	Yes	Once	Apr 1/25
Annual Development Plan	Yes	Annual	Apr 1st
Annual Progress Report	Yes	Annual	Apr 1st
Property Tax Bylaw	Yes	Annual	May 15
Five-year Financial Plan	Yes	Annual	May 15
Audited Financial Statements	Yes	Annual	May 15
Annual Municipal Report	Yes	Annual	June 30
Statement of Financial Information (SOFI)	Yes	Annual	June 30
Local Government Data Entry (LGDE)	Yes	Annual	May 15
LGDE Tax	Yes	Annual	May 15

If "No" to any of the above, please briefly explain why the document was not completed, approved, and/or submitted. Also, provide some estimate on when the document(s) will be completed, approved, and/or submitted.

I hereby certify the information in the Report is correct as at the date of this signature

Financial Officer of the Local Government as defined under Section 149 of the Community Charter or 237 of the Local Government Act

Date

Long-term Development Plan for the Local Government of:

DISTRICT OF NEW HAZELTON

Date Adopted by the Local Gov:

03-Mar-25

For Calendar Years

2024 to 2028

	2024	2025	2026	2027	2028	TOTAL
General Government and Development						
Asset Management	0	1,458,000	729,000	729,000	729,000	3,645,000
Planning	0	0	0	0	0	0
Capital	0	0	0	0	0	0
Capital Maintenance	0	0	0	0	0	0
Operations	0	0	0	0	0	0
Total	0	1,458,000	729,000	729,000	729,000	3,645,000
First Nation Outreach Projects & Initiatives						
Planning	0	0	0	0	0	0
Capital	0	0	0	0	0	0
Capital Maintenance	0	0	0	0	0	0
Operations	0	0	0	0	0	0
Total	0	0	0	0	0	0
Water						
Planning	0	0	0	0	0	0
Capital	0	0	0	0	0	0
Capital Maintenance	0	0	0	0	2,134,000	2,134,000
Operations	0	0	0	0	0	0
Total	0	0	0	0	2,134,000	2,134,000
Housing						
Planning	0	0	0	0	0	0
Capital	0	0	0	0	0	0
Capital Maintenance	0	0	0	0	0	0
Operations	0	0	0	0	0	0
Total	0	0	0	0	0	0
Childcare Facilities						
Planning	0	0	0	0	0	0
Capital	0	0	0	0	0	0
Capital Maintenance	0	0	0	0	0	0
Operations	0	0	0	0	0	0
Total	0	0	0	0	0	0
Sewer & Wastewater						
Planning	0	0	0	0	0	0
Capital	0	0	0	0	0	0
Capital Maintenance	0	800,000	450,000	0	0	1,250,000
Operations	0	0	0	0	0	0
Total	0	800,000	450,000	0	0	1,250,000
Solid Waste & Recycling						
Planning	0	0	0	0	0	0
Capital	0	0	0	0	0	0
Capital Maintenance	0	0	0	0	0	0
Operations	0	0	0	0	0	0
Total	0	0	0	0	0	0
Public Safety & Emergency Management						
Planning	0	0	0	0	0	0
Capital	0	0	0	0	0	0
Capital Maintenance	0	0	0	0	0	0
Operations	0	0	0	0	0	0
Total	0	0	0	0	0	0
Roads & Transportation						
Planning	0	0	0	0	0	0
Capital	0	0	0	0	0	0
Capital Maintenance	0	68,000	0	0	0	68,000
Operations	0	0	0	0	0	0
Total	0	68,000	0	0	0	68,000
Parks, Recreation & Culture						
Planning	0	0	0	0	0	0
Capital	0	0	0	0	0	0
Capital Maintenance	0	0	0	0	0	0
Operations	0	0	0	0	0	0
Total	0	0	0	0	0	0
Other						
Description of "Other"						
Planning	0	0	0	0	0	0
Capital	0	0	0	0	0	0
Capital Maintenance	0	0	0	0	0	0
Operations	0	0	0	0	0	0
Total	0	0	0	0	0	0
TOTAL						
Asset Management	-	1,458,000	729,000	729,000	729,000	3,645,000
Planning	-	-	-	-	-	-
Capital	-	-	-	-	-	-
Capital Maintenance	-	868,000	450,000	-	2,134,000	3,452,000
Operations	-	-	-	-	-	-
Total	-	2,326,000	1,179,000	729,000	2,863,000	7,097,000

I hereby certify that this Long-term Development Plan (Plan) is a materially reasonable estimate of expected planning, operating, and capital expenditures over the five-year term specified in this Plan, and is presented in accordance with the requirements of the Northwest B.C. Regional Funding Agreement.

Date

Financial Officer of the Local Government as defined under Section 149 of the Community Charter or 237 of the Local Government Act

Annual Development Plan for the Local Government of:

District of New Hazelton

Date Adopted by the Local Gov: 02-Mar-26

Note: The ADM for Local Government reserves the right to request additional information regarding cost projections in this document. This could include project budget. And cost items in financial plans, master plans, or other local govt documents.

Summary Information

Item	Annual Cost
General Government & Development --- Asset Management	-
General Government & Development --- Planning	-
General Government & Development --- Capital	-
General Government & Development --- Capital Maintenance	-
General Government & Development --- Operations	-
General Government & Development --- TOTAL	-

Item	Annual Cost
First Nations Outreach Projects & Initiatives --- Planning	-
First Nations Outreach Projects & Initiatives --- Capital	-
First Nations Outreach Projects & Initiatives --- Capital Maintenance	-
First Nations Outreach Projects & Initiatives --- Operations	-
First Nations Outreach Projects & Initiatives --- Total	-

Item	Annual Cost
Water --- Planning	-
Water --- Capital	-
Water --- Capital Maintenance	-
Water --- Operations	-
Water --- Total	-

Item	Annual Cost
Housing --- Planning	-
Housing --- Capital	-
Housing --- Capital Maintenance	-
Housing --- Operations	-
Housing ---Total	-

Item	Annual Cost
Childcare Facilities --- Planning	-
Childcare Facilities --- Capital	-
Childcare Facilities --- Capital Maintenance	-
Childcare Facilities --- Operations	-
Childcare Facilities --- Total	-

Item	Annual Cost
Sewer & Wastewater --- Planning	-
Sewer & Wastewater --- Capital	-
Sewer & Wastewater --- Capital Maintenance	650,000
Sewer & Wastewater --- Operations	-
Sewer & Wastewater --- Total	650,000

Item	Annual Cost
Solid Waste & Recycling --- Planning	-
Solid Waste & Recycling --- Capital	-
Solid Waste & Recycling --- Capital Maintenance	-
Solid Waste & Recycling --- Operations	-
Solid Waste & Recycling --- Total	-

Item	Annual Cost
Public Safety & Emergency Management --- Planning	-
Public Safety & Emergency Management --- Capital	-
Public Safety & Emergency Management --- Capital Maintenance	-
Public Safety & Emergency Management --- Operations	-
Public Safety & Emergency Management --- Total	-

Item	Annual Cost
Roads & Transportation --- Planning	-
Roads & Transportation --- Capital	-
Roads & Transportation --- Capital Maintenance	80,000
Roads & Transportation --- Operations	-
Roads & Transportation --- Total	80,000

Item	Annual Cost
Parks, Recreation & Culture --- Planning	-
Parks, Recreation & Culture --- Capital	-
Parks, Recreation & Culture --- Capital Maintenance	-
Parks, Recreation & Culture --- Operations	-
Parks, Recreation & Culture --- Total	-

Item	Annual Cost
Other --- Planning	-
Other --- Capital	-
Other --- Capital Maintenance	-
Other --- Operations	-
Other --- Total	-

Item	Annual Cost
TOTAL --- Asset Management	-
TOTAL --- Planning	-
TOTAL --- Capital	-
TOTAL --- Capital Maintenance	730,000
TOTAL --- Operations	-
TOTAL	730,000

General Government & Development --- Asset Management

General Description of Asset Management Expenses	Annual Cost
\$729,000 of the 2026 funding was already transferred to our Asset Management Reserve as	
the funding was paid out in 2025 for 2025-2027	
TOTAL	-

General Government & Development --- Planning

General Description of Planning Projects	Annual Cost
TOTAL	-

General Government & Development --- Capital

General Description of Capital Projects	Annual Cost
TOTAL	-

General Government & Development --- Capital Maintenance

General Description of Capital Maintenance Projects	Annual Cost
TOTAL	-

General Government & Development --- Operations

General Description of Operational Expenses	Annual Cost
TOTAL	-

First Nations Outreach Projects & Initiatives --- Planning

General Description of Planning Item	Annual Cost
TOTAL	-

First Nations Outreach Projects & Initiatives --- Capital

General Description of Capital Projects	Annual Cost
TOTAL	-

First Nations Outreach Projects & Initiatives --- Capital Maintenance

General Description of Capital Maintenance Projects	Annual Cost
TOTAL	-

First Nations Outreach Projects & Initiatives --- Operations

General Description of Operations Expenses	Annual Cost
TOTAL	-

Water --- Planning

General Description of Planning Item	Annual Cost
TOTAL	-

Water --- Capital

General Description of Capital Projects	Annual Cost
TOTAL	-

Sewer & Wastewater --- Planning

General Description of Planning Item	Annual Cost
TOTAL	-

Sewer & Wastewater --- Capital

General Description of Capital Projects	Annual Cost
TOTAL	-

Sewer & Wastewater --- Capital Maintenance

General Description of Capital Maintenance Projects	Annual Cost
Desludging Lagoon	450,000
Sewer Lines Rehab	200,000
TOTAL	650,000

Sewer & Wastewater --- Operations

General Description of Operational Expenses	Annual Cost
TOTAL	-

Solid Waste & Recycling --- Planning

General Description of Planning Item	Annual Cost
TOTAL	-

Solid Waste & Recycling --- Capital

General Description of Capital Projects	Annual Cost
TOTAL	-

Solid Waste & Recycling --- Capital Maintenance

General Description of Capital Maintenance Projects	Annual Cost
TOTAL	-

Solid Waste & Recycling --- Operations

General Description of Operational Expenses	Annual Cost
TOTAL	-

Public Safety & Emergency Management --- Planning

General Description of Planning Item	Annual Cost
TOTAL	-

Public Safety & Emergency Management --- Capital

General Description of Capital Projects	Annual Cost
TOTAL	-

Public Safety & Emergency Management --- Capital Maintenance

General Description of Capital Maintenance Projects	Annual Cost
TOTAL	-

Public Safety & Emergency Management --- Operations

General Description of Operational Expenses	Annual Cost
TOTAL	-

Roads & Transportation --- Planning

General Description of Planning Item	Annual Cost
TOTAL	-

Roads & Transportation --- Capital

General Description of Capital Projects	Annual Cost
TOTAL	-

Roads & Transportation --- Capital Maintenance

General Description of Capital Maintenance Projects	Annual Cost
Paving 13th Ave from Kelly St to McLeod St	80,000
TOTAL	80,000

Roads & Transportation --- Operations

General Description of Operational Expenses	Annual Cost
TOTAL	-

Parks, Recreation & Culture --- Planning

General Description of Planning Item	Annual Cost
TOTAL	-

Parks, Recreation & Culture --- Capital

General Description of Capital Projects	Annual Cost
TOTAL	-

Parks, Recreation & Culture --- Capital Maintenance

General Description of Capital Maintenance Projects	Annual Cost
TOTAL	-

Parks, Recreation & Culture --- Operations

General Description of Operational Expenses	Annual Cost
TOTAL	-

Other --- Planning

General Description of Planning Item	Annual Cost
TOTAL	-

Other --- Capital

General Description of Capital Projects	Annual Cost
TOTAL	-

Other --- Capital Maintenance

General Description of Capital Maintenance Projects	Annual Cost
TOTAL	-

Other --- Operations

General Description of Operational Expenses	Annual Cost
TOTAL	-

I hereby certify that this Annual Development Plan (Plan) is a materially reasonable estimate of the expected policy, operating, and capital expenditures over the one-year term specified in this Plan, and is presented in accordance the requirements of the Northwest B.C. Regional Funding Agreement and the terms of the Long-Term Development Plan.

 Financial Officer of the Local Government as defined under Section 149 of the Community Charter or 237 of the Local Government Act

 Date

Annual Progress Report for Year 2025

Spending Item from ADP	Cost Category	Cost Type (Planning / Capital / Maintenance / Operations)	Estimated Amount from Prior Year ADP	Actual Amount for Prior Year	Variance	Is Variance > 20%	Reason For Variance if greater than 20% ¹
Asset Management Reserve	General Government	Asset Management	1,458,000	2,916,000	1,458,000	Yes	Received payment for 3 years in 2025 so annual transfers for all of those years were made
Install overflow pipe from S15 to Lagoon	Sewer & Wastewater	Capital Maintenance	600,000	277,085	322,915	Yes	Project cost less than anticipated and isn't quite complete, \$32,000 remaining once spring comes and we can finish
Desludging Lagoon Survey	Sewer & Wastewater	Capital Maintenance	-	11,222	11,222	Yes	Decided to do a survey to ensure that we needed to desludge the lagoon in 2026
Sewer Lines Rehab	Sewer & Waterwater	Capital Maintenance	200,000	0	200,000	Yes	Moved project to 2026
Paving overlay 13th Ave from Kelly St to McLeod St	Roads & Transportation	Capital Maintenance	60,000	0	60,000	Yes	Moved project to 2026
Pavement cut McBride St	Roads & Transportation	Capital Maintenance	8,000	7,305	695	No	
Asset Management Plan	General Government	Asset Management	-	25,000	25,000	Yes	Received grant of \$25K for Asset Management and used \$25K to assist with putting together an Asset Management Plan

Total

2,326,000 3,236,612

Reconciliation of Unspent RBA Funding in Reserves/Surplus

Unspent RBA funding at Jan 1:	1,199,117
Plus - Actual RBA payment made by the Province to the Local Government	3,529,728
Less - Actual Local Government RBA Expenses:	3,236,612
Plus - interest earned in current year (if applicable):	49,962
Unspent RBA funding at Dec 31:	1,542,195

Note 1: Please explain variance if greater than 20%, otherwise leave blank.

Additional Comments

I hereby certify that this Annual Progress Report (Report) materially represents the estimated and actual policy, operating, and capital expenditures

Date

Financial Officer of the Local Government as defined under Section 149 of the Community Charter or 237 of the Local Government Act

Note 2: The ADM for Local Government reserves the right to request additional information regarding cost projections and actual payments in this document.

Local Govt: District of New Hazelton
 LTDP Term from years 2024 To 2028

Title of Spending Item	Actual LG Expenses from Prior Years (from Previous Annual Progress Reports)							Remaining Balance	Current ADP Request	Balance
	Projected 5-Year Pmts	2024	2025	2026	2027	2028	Total			
	A	B	C	D	E	F	G=B+C+D+E+F			
General Government & Development	5,882,880		2,941,000				2,941,000	2,941,880		2,941,880
First Nation Outreach Projects & Initiatives	-						-	-		-
Water	-						-	-		-
Housing	-						-	-		-
Childcare	-						-	-		-
Sewer & Wastewater	-		288,307				288,307	- 288,307		- 288,307
Solid Waste & Recycling	-						-	-		-
Public Safety & Emergency Management	-						-	-		-
Roads & Transportation	-		7,035				7,035	- 7,035		- 7,035
Parks, Recreation & Culture	-						-	-		-
Other	-						-	-		-
TOTAL	5,882,880	-	3,236,342	-	-	-	3,236,342	2,646,538	-	2,646,538

Actual Payment made by Prov to the Local Government	1,176,576	3,529,728	-	-	-
Positive Variance Equals Reserves/Surplus	1,176,576	293,386	-	-	-
Cumulative Reserve/Surplus Balance	1,176,576	1,469,962	1,469,962	1,469,962	1,469,962

Estimated funds. All excess funds and any unspent funds are held in reserve for future projects.

February 19, 2026

File: 3758.0000.00

Village of Hazelton
4310 Field Street, Box 40
Hazelton, BC V0J 1Y0

Attention: Robyn Carlé, Village of Hazelton, CAO
Wendy Hunt, District of New Hazelton, CAO

RE: Work Program for Development Approvals Review

1.0 PROJECT UNDERSTANDING

Urban Systems (Urban) is pleased to submit this work plan to the Village of Hazelton (Village) and District of New Hazelton (District), to undertake a collaborative approach in establishing updated development procedures processes and informational materials. This work plan has been prepared to reflect conversations with staff and details our overall project understanding and proposed work plan, deliverables, fee estimate, and schedule. It is also our understanding that this work program will support a regional project application to the Local Government Development Approvals Program (LGDAP) and the Village will act as the primary applicant. The desire to pursue a regional project application is due to the close proximity and relationship between the two communities; similarities in local bylaw structure and content; similar local context; shared resources (including building inspector); and overlapping third parties in which the communities regularly engage and consult. It is also our understanding that the two communities have identified potential synergies and areas for collaboration in regards to development approvals processes, including building permit software and bylaw development.

Undertaking this process collaboratively will help to identify efficiencies, as well as ensure a consistent approach to development approvals between the neighbouring communities. We feel our recent experience in assisting both the Village and District in land use planning and development approvals applications, including a review and update of Official Community Plans (OCP) and Zoning Bylaws, leaves us well positioned to assist the Village and District on this project.

This work will consist of conducting a review of current development approvals processes; exploring potential synergies between the two communities as it relates to development approvals and land use planning procedures; reviewing related land use planning and building bylaws for improvements to development approvals processes; reviewing and providing recommended updates to Development Procedures Bylaws; facilitating coordination with external partners and agencies; developing Development Procedures Manuals; and developing educational and informational resources on the development approvals process. It is assumed that the two local governments will organize and hold staff and Council training to understand the updated approach to the development approvals process. The purpose of this work is to provide the Village and District with guidance to ensure that development applications are being reviewed in a consistent, efficient, and systematic manner, to provide information for staff and Councils, and to provide guidance to prospective applicants who are interested in developing in Hazelton and New Hazelton.

Urban is excited at the opportunity to continue working with the two communities on this collaborative project, building on the relationships that have developed over the years.

2.0 WORK PLAN

This section outlines our proposed work plan to undertake this project. It should be noted that, while a review of the current development approvals processes and bylaws will be undertaken separately for each community, potential synergies and areas for coordination between the Village and District will be identified and summarized. We will also look to ensure consistency and alignment in the recommendations for updated development approvals processes and informational materials, including application fees and forms.

TASK 1 – PROJECT INITIATION

- *Task 1.1 – Project kick-off meeting:* A meeting will be held with the Urban project team and key Village and District staff to confirm project goals, work plan tasks, schedule and deliverables; identify relevant background information; and identify key stakeholders to engage. Potential areas of collaboration and coordination will also be explored. It is anticipated that this will be a virtual meeting.

Deliverable: Meeting notes

TASK 2 – REVIEW OF DEVELOPMENT APPROVALS PROCESSES

- *Task 2.1 – Initial background review and gap analysis:* The project team will undertake an initial background review of current resources and documents related to the development approvals process for both the Village and District. The project team will also undertake a high-level review of Zoning Bylaws, Development Procedures Bylaws, and any other relevant bylaws to identify gaps and potential areas for improvement in relation to improving efficiency of development processes. We will also compile and review recent development applications in both communities to help outline trends and provide context which will inform future project tasks.
- *Task 2.2 – Application Fees Review:* We will undertake a comparison and review of application fees found in similar-sized communities, including in northwestern BC. This information will be summarized in a memo to help the Village and District determine if current application fees are in alignment with each other, as well as other municipalities, or if they require a more detailed review.
- *Task 2.3 – Staff meeting:* The project team will hold a virtual meeting with identified Village and District staff to understand the current development approvals processes in each community, including pre-application processes and current information available to developers. The meeting will also involve a discussion on delegated authorities for variances and if changes are needed in this regard. Conducting this meeting together will help to illustrate the similarities and differences in the processes of the two communities, as well as identify areas for collaboration.
- *Task 2.4 – Review of External Partner Communications Protocols:* We will work with Village and District staff to identify potential external partners that may be involved in the development approvals process. We will review existing communications and protocols and outline areas for improvement. While the external partners are to be confirmed in future discussions with Village and District staff, it is anticipated that this could include First Nations, the development community, surrounding local governments and various provincial ministries.

- *Task 2.5 – Meeting with Building Inspector:* Given that the Village and District share a common building inspector, we propose a virtual meeting with them to discuss the existing Building Bylaws and potential improvements, including standardized designs and methods of construction.
- *Task 2.6 - Current development approvals process memo:* The project team will develop a memo outlining findings from the initial background review, gap analysis, and staff meetings for each community. The memo will include a description of the current development approvals process, areas for improvement and potential synergies between the Village and District.

Deliverable: Memos outlining the current development approvals process and areas for improvement for both the Village of Hazelton and District of New Hazelton. These will be separate memos for each community.

TASK 3 – RECOMMENDATIONS FOR UPDATES TO THE DEVELOPMENT PROCEDURES BYLAW

- *Task 3.1 – Recommendations for Development Procedure Bylaw:* Based on the findings from earlier tasks, the project team will outline recommended updates to the Development Procedures Bylaws for each community. This will include considerations related to delegation of authorities, development application review processes and requirements, Council consideration and reconsideration processes, and permit approval processes.

Deliverable: Recommended updates to Development Procedure Bylaws (including areas for potential alignment)

TASK 4 – REVIEW AND RECOMMEND UPDATES TO OTHER RELATED BYLAWS

- *Task 4.1 – Recommended updates to Land Use and Building Bylaws:* We anticipate several bylaw and policy updates may be required to reflect a revised and streamlined development approvals processes, including potential updates to Official Community Plans, Zoning Bylaws, Building Bylaws and Subdivision Servicing Bylaws. We will review and outline recommended updates to these other bylaws through the lens of current best practices, updated development approvals processes and alignment with the *Local Government Act* legislation.

Deliverable: Meeting Notes, memo summarizing potential updates to related

TASK 5 – OUTLINING OF POTENTIAL SYNERGIES BETWEEN THE VILLAGE AND DISTRICT

- *Task 5.1 – Outlining of Potential Development Approvals Synergies:* While the reviews undertaken in Tasks 2 through 4 will be undertaken separately for both the Village and District, potential synergies and areas of coordination and collaboration will be identified and summarized in a memo. It is anticipated that these potential synergies could include procedures and policies, informational materials, and staffing.

Deliverable: Memo outlining potential development approvals synergies between Village of Hazelton and District of New Hazelton.

TASK 6 – DEVELOPMENT OF DRAFT RESOURCES

- *Task 6.1 – Development of draft Development Procedures Manuals and Application Forms:* Manuals will be developed for use by Village and District staff. The Development Procedures Manual is a technical manual that provides staff with details of the various tasks and considerations that occur under each step of the various development application processes. The details provided are intended to ensure that a consistent and comprehensive approach is articulated, however, the complexity of an application will determine to what extent applications will need to be assessed. The project team anticipates the Development Procedures Manual becoming a schedule in the Development Procedure Bylaw. We will also update application forms, where applicable.

It should be noted that while separate manuals and application forms will be developed for both the Village and District, we will ensure alignment and coordination where possible.

Deliverable: Draft Development Procedures Manuals and Draft Application Forms

- *Task 6.2 – Development of Draft Informational Resources:* The project team will develop an array of informational resources that will use a variety of tools and techniques with the goal of presenting easy to understand development approvals information to the communities. Informational resources may include guidance for the creation of a website dedicated to development procedures, including Frequently Asked Questions; links to application forms; a fee summary; and the creation of informational brochures. The types and format of informational resources will be selected based on guidance from Village and District staff.

Deliverable: Draft informational resources

TASK 7 – DEVELOPMENT APPROVALS TECHNOLOGY READINESS ASSESSMENT

- *Task 7.1 – Technology Readiness Assessment:* It is our understanding that both the Village and District are currently exploring the updating of online mapping software. There is the potential to incorporate development approvals processes into these mapping tools. We will work with Village and District staff to undertake a readiness assessment to explore how well positioned the two communities are to implement such processes. This assessment will assess organizational capacity, information workflows, documented processes and procedures, knowledge of technology, tools and software currently in place, staff resources and current data availability.

Deliverable: Memo summarizing development approvals technology readiness assessment

TASK 8 – STAFF REVIEW

- *Task 8.1 – Staff Review Meeting:* The project team will schedule separate meetings with Village and District staff to review and provide feedback for the recommended Development Procedure Bylaw updates, draft Development Procedures Manual, and draft informational resources. We would also recommend legal review of the Development Procedures Bylaw; this has not been included in our budget. We anticipate that these meetings will be held virtually.

Deliverable: Meeting Notes (2 separate meetings)

TASK 9 – FINALIZE MATERIALS

- *Task 9.1 – Finalize materials:* The project team will incorporate feedback received from staff and finalize the Development Procedure Bylaw, Development Procedures Manual, and informational resources.

Deliverable: Final Development Procedures Bylaws, final Development Procedures Manuals, final list of recommended bylaw and policy amendments, and final informational resources.

3.0 FEES/SCHEDULE

Our proposed budget to undertake this project is \$172,500, inclusive of disbursements and travel costs, exclusive of GST. Our proposed budget and schedule are outlined in Table 1.

Table 1 – Fees and Schedule

Task	Schedule	Fees
Task 1 – Project Initiation		
1.1: Project Kick-off Meeting	July 2026	\$1,500
Task 2 – Review of Development Approvals Processes		
2.1: Initial background Review and Gap Analysis	September 2026	\$12,000
2.2: Application Fees Review	September 2026	\$1,500
2.3: Staff Meeting	October 2026	\$2,000
2.4: Review of External Partner Communications Protocols	October 2026	\$6,000
2.5: Meeting with Building Inspector	December 2026/January 2027	\$3,500
2.6: Current Development Approvals Process Memos	November 2026	\$11,500
Task 3 – Recommendations for Updates to the Development Procedures Bylaw		
3.1: Recommendations for Development Procedure Bylaws	November/December 2026	\$16,000
Task 4 – Review and Recommended Updates to Other Related Bylaws		
4.1: Review and Recommend Updates to Land Use and Building Bylaws	December 2026/January 2027	\$20,000
Task 5 – Outlining of Potential Synergies between the Village and District		
5.1: Outlining of Potential Development Approvals Synergies	February 2027	\$9,500

Task 6 – Development of Draft Resources		
6.1: Development of draft Development Procedures Manuals and Application Forms	February – March 2027	\$29,000
6.2: Development of Draft Informational Resources	March - April 2027	\$24,500
Task 7 – Development Approvals Technology Readiness Assessment		
7.1: Technology Readiness Assessment	April/May 2027	\$20,000
Task 8 – Staff Review Meeting		
8.1: Staff Review	April/May 2027	\$2,500
Task 9 – Finalize Materials		
9.1: Finalize Materials	July 2027	\$13,000
Total Fees		\$172,500

4.0 TERMS AND CONDITIONS

We understand that authorization to proceed with this work will consist of written acceptance of this work program from the Village of Hazelton.

Invoices for Urban Systems will be issued monthly based on the hourly rates for the time worked in each month plus disbursements with payment to be received within 30 days of the billing date.

We will not invoice beyond the fee limit presented in our fee schedule without your prior approval. Any change to the scope of work or additional work will be brought to your attention and budget changes will be presented for your consideration. Additional work will not be undertaken without your prior authorization.

5.0 CLOSURE

Thank you for the opportunity to assist the Village of Hazelton and District of New Hazelton with this project. We trust this work program is sufficient for your needs at this time. In the meantime, if you have any questions or concerns, please do not hesitate to contact the undersigned.

Sincerely,

URBAN SYSTEMS LTD.



Chris Rempel
 Community Planner

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Agenda Meeting Schedule

DATE	TIME	WHERE	DETAILS OF EVENT
April 8-10th	All Day	Vancouver @ JW Marriot Parq	2026 COFI Convention – Councillor Burns going.
April 13th	7:00PM	Council Chambers	Regular Council Meeting
April 23rd	10:00AM	Council Chambers	Committee of the Whole Meeting
May 4th	7:00PM	Council Chambers	Regular Council Meeting
May 6-8th	All Day	Smithers Civic Centre and New Arena – 4204 3 rd Ave	Minerals North Conference & Trade Show – Mayor Lowry, Councillor Sturney & CAO, Hunt going.
May 20-22nd	All Day	Prince George	2026 NCLGA AGM & Convention – Mayor Lowry, Councillor Hobenshield & CAO, Hunt going. – 4 rooms booked.
June 1st	7:00PM	Council Chambers	Regular Council Meeting
July 1st	7:30AM	Allan Park	Canada Day Celebration
July 6th	7:00PM	Council Chambers	Regular Council Meeting
August 10th	7:00PM	Council Chambers	Regular Council Meeting
September 8th	7:00PM	Council Chambers	Regular Council Meeting
Sept 14-18th	All Day	Vancouver Convention Centre	UBCM – 3 rooms booked.

March 2026
Information Package



Minutes of the Regular Meeting of the North West Regional Hospital District held Saturday, January 17, 2026, at the RDKS Boardroom and virtually using Microsoft Teams, commencing at 12:05 p.m.

Members Present:

Chair Pages presided.

Stoney Stoltenberg	Bulkley-Nechako Regional District	Electoral Area A
Chris Newell	Bulkley-Nechako Regional District	Electoral Area G
Shane Brienen	Bulkley-Nechako Regional District	District of Houston
Gladys Atrill (Vice-Chair)	Bulkley-Nechako Regional District	Town of Smithers
Annette Morgan	Bulkley-Nechako Regional District	Village of Telkwa
Eric Nyce	Kitimat-Stikine Regional District	Electoral Area A
Cyra Yunkws (Vice-Chair)	Kitimat-Stikine Regional District	Electoral Area B
Bruce Bidgood	Kitimat-Stikine Regional District	Electoral Area C
Dave Brocklebank	Kitimat-Stikine Regional District	Electoral Area D
Ted Ramsey	Kitimat-Stikine Regional District	Electoral Area E
Tina Etzerza	Kitimat-Stikine Regional District	Electoral Area F
Julie Maitland	Kitimat-Stikine Regional District	Village of Hazelton
Gail Lowry	Kitimat-Stikine Regional District	District of New Hazelton
Terry Marleau	Kitimat-Stikine Regional District	District of Kitimat
Angela Brand-Danuser	Kitimat-Stikine Regional District	District of Stewart
Brian Downie	Kitimat-Stikine Regional District	City of Terrace
Sean Bujtas	Kitimat-Stikine Regional District	City of Terrace
Sheldon Martin	Kitimat-Stikine Regional District	Nisga'a Nation
Ocean Rutherford	North Coast Regional District	Electoral Area A
Evan Putterill	North Coast Regional District	Electoral Area E
Lisa Pineault	North Coast Regional District	Village of Daajing Giids
Herb Pond	North Coast Regional District	City of Prince Rupert
Barry Cunningham	North Coast Regional District	City of Prince Rupert
Knut Bjorndal	North Coast Regional District	District of Port Edward
Barry Pages (Chair)	North Coast Regional District	Village of Masset
Scott Cabianca	North Coast Regional District	Village of Port Clements

Others Present:

Cormac Hikish	Interim Northwest Senior Operating Officer, Northern Health
Michael Hoefler	Executive Director, Capital Planning, Facilities Operations & Logistics, Northern Health

Staff Present:

Alisa Thompson	Executive Director
Marc Schibli	Treasurer

Members Absent:

Karl Bergman	North Coast Regional-District	Electoral Area C
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Chair Pages called the meeting to order at 12:05 p.m.

APPROVAL OF THE AGENDA:

R004-2026

MOVED/SECONDED that the January 17, 2026 North West Regional Hospital District Agenda be amended to include a Medical Imaging Update from Northern Health, under Delegations & Guests, and the Agenda be adopted as amended.

Carried.

DELEGATIONS & GUESTS:

Michael Hoefler, Executive Director, Capital Planning, Facilities Operations & Logistics, Northern Health – Ksyen Regional Hospital Project Report

Mr. Hoefler reviewed his report which was included in the Agenda. This may be the last update on the Ksyen Regional Hospital until the final one in the fall of 2026. The Ksyen Regional Hospital received substantial completion in August 2024, and the patient transfer was completed in November 2024. The former building was decommissioned to make room for parking, and the contractor has been completing some additional parking for staff.

The retail cafeteria contract will be awarded and communications regarding this will be sent out soon. A soft launch is expected initially with full service by March of this year. Northern Health is waiting for some equipment to arrive for the cafeteria. The procurement was an open bidding process.

Director Cunningham thanked Mr. Hoefler, the Northern Health team, and PCL for a fantastic job on the Ksyen Regional Hospital. He asked if it would be possible utilize a similar process for the kitchen facility at the Prince Rupert Regional Hospital. Mr. Hoefler explained that it's easier to do this in a new facility but he will investigate the possibility with the Regional Director of Support Services.

Chair Pages thanked Mr. Hoefler for his presentation and work on the project.

Cormac Hikisch, Interim Northwest Senior Operating Officer, Northern Health and Michael Hoefler, Executive Director, Capital Planning, Facilities Operations & Logistics, Northern Health – Medical Imaging Update

Mr. Hikisch and Mr. Hoefler provided an update on Medical Imaging services in the Northwest. A strategic plan and broader diagnostic strategy is under development as well as a service plan. While it is being developed, Northern Health provided an update on medical imaging to the NWRHD Board.

In Kitimat, the new CT equipment is on site and ready to be installed late January/early February. Construction is underway and testing will follow. Patient testing will begin in April/May of this year with full opening anticipated by June 2026. The Bone Mineral Densitometer has to be removed to make room for the CT scanner. Typically there are 200 – 400 bone mineral densitometer scans per year at any facility. The CT is considered more valuable and it is expected that they will do 1,500 to 2,500 CT scans per year in Kitimat. The CT is a better use of space and more technically useful. The Bone Mineral Densitometer will be traded back to the vendor. There is no more room

in the hospital for a Bone Mineral Densitometer, and the ones in Prince Rupert and Ksyen are relatively new.

The Medical Imaging plans are expected to be completed by the end of summer or early fall this year. Mr. Hikisch added that the CT scanner in the Bulkley Valley District Hospital has seen CT usage higher than originally projected. There is no Bone Mineral Densitometer in Hazelton or Smithers due to lower volumes and it is not an emergent diagnostic need.

At the Haida Gwaii Hospital, planning for a CT is underway. The location has been selected where there will be greater ability to connect to IT infrastructure inside the facility. The location chosen will be the lower cost of the two options which will help with the fundraising and allow Northern Health to move forward faster. Northern Health recognized that a CT is needed on Haida Gwaii. The project is not fully funded at this time, and Northern Health will need to sit with the community partners to assist with fundraising. Northern Health anticipates the NWRHD will contribute 40% of the cost of the project, and the remaining 60% will be fundraised.

The first CT in Prince Rupert was 100% fundraised by the community. With a limited capital budget and several projects in the outer years of Northern Health's capital plan, new CTs are first installed by fundraising and then are replaced by Northern Health at end of life.

Director Putterill asked for clarification regarding how decisions for medical imaging equipment installations are being made now, recognizing that a new rubric is being developed. He would like the NWRHD to be involved in the process of reviewing service levels in the northwest. Mini-CT scanners could be available in hospitals that have x-ray technology already. Mr. Hoefer explained that technology has been rapidly changing and equipment that is 8 years old is considered old. The current CT in the Prince Rupert Regional Hospital is an 8 slice which will be replaced with a 64 slice CT with greater capability. Mini-CT equipment can be used in theory, but there are considerations such as radiation safety for staff and patients that need to be considered. It is preferable to use a mini-CT in a shielded room. Mr. Hikisch added that it costs \$1.5 million to run a CT annually. 1 CT scan delivers 100 times the radiation exposure that an x-ray delivers. Staff safety needs to be considered along with patient safety. Staff in rural areas tend not to be certified to operate CT equipment.

Mr. Hoefer will take these comments back to Northern Health and they can include the NWRHD in the development of the plan and discuss the progress before the process is complete.

In the Prince Rupert Regional Hospital, Northern Health is actively in the planning process to replace the CT, which is now eight years old and has repair issues. They are planning to use a mobile CT during the construction and installation process, so patients don't have to go to Kitimat or Terrace to access that service. The replacement of the CT will be an eight-to-ten-week process. It will be replaced early summer into the fall, and the new CT is expected to be operational by late 2026/early 2027. Interior Health will provide a mobile CT from Trail/Castlegar. This is a provincial asset and a good partnership from Interior Health.

The Prince Rupert MRI project is in the planning phase. They are exploring the options inside and outside of the hospital. The MRI requires a Faraday cage and is a \$10 to 14 million project depending on the construction and/or renovation. Northern Health is working on the project plan and when complete this project will go in the outer years of the capital plan.

Mr. Hikisch informed the NWRHD board that the new Northwest Senior Operating Office is John Blenkinsopp. He has been touring the northwest region as he gets up to speed in his new role. Chair Pages thanked Mr. Hikisch for his work as the Interim NW SOO.

Director Young asked for clarification regarding the fundraising and which organizations would be fundraising. This is done by hospital auxiliaries and community foundations. In small communities

without these organizations the Spirit of the North may provide fundraising assistance. Northern Health doesn't provide fundraising to industry directly.

ADOPTION OF MINUTES:

Presented were the Minutes of the November 22, 2025 Regular North West Regional Hospital District Meeting.

R005-2026 MOVED/SECONDED that the Minutes of the November 22, 2025 Regular North West Regional Hospital District Meeting be adopted as presented.
Carried.

CORRESPONDENCE:

Michael Hofer, Executive Director, Capital Planning, Facilities Operations & Logistics, Northern Health – Ksyen Regional Hospital Project Report

R006-2026 MOVED/SECONDED that the presentation from the Northern Health regarding the Ksyen Regional Hospital Project be received.
Carried.

Cormac Hikisch, Interim Northwest Senior Operating Officer, Northern Health and Michael Hofer, Executive Director, Capital Planning, Facilities Operations & Logistics, Northern Health – Medical Imaging Update

R007-2026 MOVED/SECONDED that the medical imaging update from the Northern Health be received.
Carried.

Correspondence from the Assistant Deputy Minister, Substance Use, Treatment, and Recovery, dated November 26, 2025 re: UBCM Meeting Response

R008-2026 MOVED/SECONDED that the Correspondence from the Assistant Deputy Minister, Substance Use, Treatment, and Recovery, re: a Withdrawal Management Facility be received.
Carried.

REPORTS:

North West Regional Hospital District 2026 Draft Budget

The Treasurer presented a report on the 2026 Draft Budget. The Provisional Budget was developed without new assessment information. The Draft Budget does not require a bylaw, and it is an opportunity for the Board to provide direction to staff regarding the 2026 budget and tax rates. New assessment data was received from BC Assessment at the end of 2025. Following the BC Assessment appeal process time period, they will provide a revised tax roll to be used in the final budget. There is typically not a material difference between the completed roll and the revised roll data. Mr. Schibli reminded the Board that tax ratios are determined by the Province for RHDs, unlike municipalities who have the authority to adjust their tax ratios between tax classes.

The NWRHD converted assessment has increased by 7.61% (down from 8.36% the previous year). This is an aggregate number, and some areas had a greater change, and some areas had

lesser change. Rural Areas are not the same as Regional District Electoral Areas, so the information provided is complicated. The Dawson Creek Rural Area saw an increase. This is due to the formal dissolution of the Kitimat-Stikine Regional Hospital District last year. Approximately 500 properties were still listed with the Kitimat-Stikine RHD and now have been correctly added to the NWRHD area.

Non-Market Change will absorb a portion of a tax increase. For a 7% tax increase, 2.48% would be covered by Non-Market Change and existing rate payers would pay 5.2% more (in total).

Northern Health has a fiscal year starting in April and ending in March, unlike the NWRHD whose fiscal year matches the calendar year. This means not all projects listed will be expected in 2026. Global Equipment, Building Integrity, and Information Technology Projects are paid to Northern Health as an annual grant. Major Equipment and Projects are requested by Northern Health. Major Capital Projects from previous years include the Kitimat Dementia House and the Prince Rupert Emergency Department renovations.

The 2026 Draft Budget was reviewed. The actuals have not been finalized. There will be Auditors reviewing the financials in February/March and their findings will be presented at the May meeting. Northern Health's total request for project funding was included in the budget, something that has not been done in previous years. A 7% tax increase would have an increase of \$13.47 for the average residential ratepayer from last year.

The long-term forecast and the assumptions that are included in this modelling were reviewed. The long-term forecast assumes a new hospital is constructed every 10 years (not every five years as was used in earlier models). Previous hospitals have been funded by debt. The RHD is moving away from this approach and making gradual progress to build reserves. It is not a perfectly accurate model. It is possible to borrow but the debt serving costs will increase.

Director Stoltenberg inquired about the impact of the proposed 7% tax rate increase on the mill rate. The current rate is 54 cents per \$1,000 and the mill rate would remain flat with a 7% rate increase. Director Stoltenberg proposed raising the tax increase slightly higher to try to get ahead of the curve. Every 1% of a tax increase adds approximately \$150,000 in revenue, therefore an 8.5% tax increase would raise an additional \$225,000 and the average rate payer would pay to approximately \$16.40 more instead of \$13.47 more. For the average residential property this works out to a total requisition of approximately \$200. By comparison, the Stuart-Nechako RHD and Fraser-Fort George RHD have average requisitions in the \$300 to \$400 range.

Director Putterill correlated building reserves to build better health infrastructure for our communities. He recommended proactive communication regarding the increase and the work of the RHD. The RHD doesn't have the ability to do mail outs although the Regional Districts or member municipalities could be asked to include inserts.

Director Bidgood indicated he could not support the 8.5% tax increase due to the current hardships of his constituents. Director Young was not opposed to building reserves but giving other increases her constituents are faces a greater increase was not supportable. Vice-Chair Yunkws agreed with the value of building reserves, but not the 8.5% increase. Director Bujtas said building reserves demonstrates the NWRHD's commitment to infrastructure rebuilds to the Province. Director Marleau said the raise is not going to be a significant dollar amount and that healthcare is important to our residents. Director Downie supported increasing tax rates to 8.5%. Major projects will be unattainable without building reserves and the amount of the increase is modest but provides opportunities in the future.

The Treasurer suggested the NWRHD could build reserves without increasing the proposed 7% tax increase by reducing Northern Health's allocation in the budget.

R009-2026 MOVED/SECONDED the North West Regional Hospital District Board direct staff to prepare the 2026 budget bylaw with a property tax requisition increase of 8.5%.

Carried.

Director Bidgood wished to be recorded as opposed.

Kitimat Facility Designation under the Hospital District Act

To be eligible for funding by an RHD, a facility must be designated by the Minister of Health under section 49 of the Hospital District Act. The Kitimat Dementia House is a new construction that requires this designation. Northern Health has requested designation and the NWRHD's support is required for this designation.

R010-2026 MOVED/SECONDED that the North West Regional Hospital District Board direct staff to write a letter to the Minister of Health requesting the designation of the Kitimat Dementia Facility under section 49 of the Hospital District Act and confirming the North West Regional Hospital District's approved funding of \$6.6 million for this facility.

Carried.

Nisga'a Lisims Government Facility Designation under the Hospital District Act

While checking on the Kitimat Dementia House designation it was discovered that three of the health centres in the Nass valley require designation as well. The Nisga'a Lisims Government has requested designation and the NWRHD's support is required for this designation.

R011-2026 MOVED/SECONDED that the North West Regional Hospital District Board direct staff to write a letter to the Minister of Health requesting the designation of the Gingolx Health Centre, the Gitwinksihlkw Health Centre and the Laxgalts'ap Health Centre under section 49 of the Hospital District Act and confirming the North West Regional Hospital District's approved funding of \$62,992.28.

Carried.

Directors' Report

R012-2026 MOVED/SECONDED that the Directors' Report dated January 17, 2026 be received.

Carried.

BYLAWS:

There were no Bylaws.

NEW BUSINESS:

Next Meeting is Saturday, March 21, 2026 at 11 a.m.

INFORMATION ONLY:

R013-2026 MOVED/SECONDED that news articles provided for information on this Agenda be received.

Carried.

CLOSED:

R014-2026 MOVED/SECONDED that:

This Meeting be closed to the public as the subject matters being considered relates to 226 (1) of the Local Government Act and the following Sections of the Community Charter:

- Section 90(1)(j) of the Community Charter – information that is prohibited, or information that if it were presented in a document would be prohibited, from disclosure under section 21 of the Freedom of Information and Protection of Privacy Act;
- Section 90(1)(k) of the Community – related discussions respecting the proposed provision of a municipal service that are at their preliminary stages and that, in the view of the council, could reasonably be expected to harm the interests of the municipality if they were held in public.

Carried.

The meeting moved In-Camera at 2:15 p.m.

The open meeting resumed at 2:50 p.m.

RISE AND REPORT FROM THE CLOSED BOARD MEETING:

The following resolution was released from the Closed Board meeting:

MOVED/SECONDED that the North West Regional Hospital District Board approve the updated Memorandum of Understanding with the Nisga'a Lisims Government, authorize the Chair to sign the agreement, and that this resolution be released from in-camera.

Carried.

ADJOURNMENT:

R015-2026 MOVED/SECONDED that the meeting be adjourned.

Carried.

Chair Pages adjourned the meeting at 2:50 p.m.

DULY APPROVED:

CERTIFIED CORRECT:

Chair

Executive Director



Minutes of the Statutory Meeting of the North West Regional Hospital District held Saturday, January 17, 2026 at the RDKS Boardroom and virtually using Microsoft Teams, commencing at 11:05 a.m.

Members Present:

Executive Director Thompson Presided

Stoney Stoltenberg	Bulkley-Nechako Regional District	Electoral Area A
Chris Newell	Bulkley-Nechako Regional District	Electoral Area G
Shane Brienen	Bulkley-Nechako Regional District	District of Houston
Gladys Atrill	Bulkley-Nechako Regional District	Town of Smithers
Annette Morgan	Bulkley-Nechako Regional District	Village of Telkwa
Eric Nyce	Kitimat-Stikine Regional District	Electoral Area A
Cyra Yunkws	Kitimat-Stikine Regional District	Electoral Area B
Bruce Bidgood	Kitimat-Stikine Regional District	Electoral Area C
Dave Brocklebank	Kitimat-Stikine Regional District	Electoral Area D
Ted Ramsey	Kitimat-Stikine Regional District	Electoral Area E
Tina Etzerza	Kitimat-Stikine Regional District	Electoral Area F
Julie Maitland	Kitimat-Stikine Regional District	Village of Hazelton
Gail Lowry	Kitimat-Stikine Regional District	District of New Hazelton
Terry Marleau	Kitimat-Stikine Regional District	District of Kitimat
Angela Brand-Danuser	Kitimat-Stikine Regional District	District of Stewart
Brian Downie	Kitimat-Stikine Regional District	City of Terrace
Sean Bujtas	Kitimat-Stikine Regional District	City of Terrace
Sheldon Martin	Kitimat-Stikine Regional District	Nisga'a Nation
Ocean Rutherford	North Coast Regional District	Electoral Area A
Johanne Young	North Coast Regional District	Electoral Area D
Evan Putterill	North Coast Regional District	Electoral Area E
Lisa Pineault	North Coast Regional District	Village of Daajing Giids
Barry Cunningham	North Coast Regional District	City of Prince Rupert
Knut Bjorndal	North Coast Regional District	District of Port Edward
Herb Pond	North Coast Regional District	City of Prince Rupert
Barry Pages	North Coast Regional District	Village of Masset
Scott Cabianca	North Coast Regional District	Village of Port Clements

Staff Present:

Alisa Thompson	Executive Director
Marc Schibli	Chief Financial Officer, Regional District Kitimat-Stikine

Members Absent:

Karl Bergman	North Coast Regional District	Electoral Area C
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Executive Director Thompson called the meeting to order at 11:05 a.m.

R001-2026 MOVED/SECONDED that the Roster of Votes for 2026 be approved. Carried.

R002-2026 MOVED/SECONDED that the Meeting Dates for 2026 be approved as follows:

- Saturday, January 17
- Saturday, March 21
- Saturday, May 16
- Saturday, August 22
- Saturday, November 21.

Carried.

ELECTION OF CHAIR:

Executive Director Thompson reviewed the process for the election of officers and called for nominations for Chair.

Director Atrill nominated Director Pages for Chair for the North West Regional Hospital District for 2026.

Director Pages allowed his name to stand.

Executive Director Thompson called for nominations for Chair a second time.

Executive Director Thompson called for nominations for Chair for a third and final time.

There were no further nominations, the Executive Director declared Director Pages the Chair for the North West Regional Hospital District 2026, representing from the North Coast Regional District.

Executive Director Thompson turned the meeting over to Chair Pages.

ELECTION OF VICE CHAIRS

Chair Pages called for nominations for Vice Chair representing from the Regional District of Kitimat-Stikine.

Director Lowry nominated Director Yunkws from the Regional District of Kitimat-Stikine for the Vice Chair of the North West Regional Hospital District 2026.

Director Yunkws allowed her name to stand.

Chair Pages called for nominations for Vice Chair for a second time.

Chair Pages called for nominations for Vice Chair for a third and final time.

There being no further nominations representing from the Regional District of Kitimat-Stikine, Director Yunkws was declared Vice Chair for the North West Regional Hospital District for 2026.

Chair Pages called for nominations for Vice Chair representing the Regional District of Bulkley Nechako.

Director Cunningham nominated Director Atrill from the Regional District of Bulkley-Nechako for Vice Chair for the North West Regional Hospital District 2026.

Director Atrill allowed her name to stand.

Chair Pages called for nominations for Vice Chair for a second time.

Chair Pages called for nominations for Vice Chair for a third and final time.

There being no further nominations from the Regional District of Bulkley-Nechako, Director Atrill was declared Vice Chair for the North West Regional Hospital District for 2026.

All three Regional Districts are represented at the Executive Level.

ADJOURNMENT:

R003-2026

MOVED/SECONDED that the Statutory meeting be adjourned and that the Meeting be closed to the public as the subject matters being considered relates to 226 (1) of the Local Government Act and the following Sections of the Community Charter:

- Section 90(1)(k) of the Community – related discussions respecting the proposed provision of a municipal service that are at their preliminary stages and that, in the view of the council, could reasonably be expected to harm the interests of the municipality if they were held in public.
- Section 90(2)(b) of the Community Charter – the consideration of information received and held in confidence relating to negotiations between the municipality and a first nation or a prescribed Indigenous entity, or between a first nation or prescribed Indigenous entity and a third party.

Carried.

Chair Pages adjourned the meeting at 11:10 a.m.

DULY APPROVED:

CERTIFIED CORRECT:

Chair

Executive Director

Resolution for Consideration Ahead of Local Association Deadlines

From EA Council <eacouncil@kamloops.ca>

Date Wed 2/4/2026 10:27 AM

To COUNCIL-Councillors <COUNCIL-Councillors@kamloops.ca>; Byron McCorkell <bmcorkell@kamloops.ca>

Cc Sarah Candido <scandido@kamloops.ca>; Crystal Gelineau <cgelineau@kamloops.ca>; Maria Mazzotta <mmazzotta@kamloops.ca>; Southern Interior Local Government Association <yoursilga@gmail.com>

 1 attachment (138 KB)

Certified Resolution_Heritage Conservation Act_SILGA.pdf;

Good morning Municipalities of British Columbia,

I hope this message finds you well. We have attached a certified resolution from the City of Kamloops that has been sent to the Southern Interior Local Governance Association (SILGA). These important issues hold significant relevance and impact within your area of government.

We strongly encourage you to utilize this resolution as a template and present it before your local governance association prior to your resolution deadline. This can help you address similar issues effectively and align with the objectives we all strive to achieve. Collectively, all five local governance associations bring a strong unified front of advocacy in Victoria.

Should you require any further clarification or additional information, please do not hesitate to reach out. We are here to support you in any way we can.

Warm regards,

Chrissy Cossentine

Executive Assistant to City Council | City of Kamloops

eacouncil@kamloops.ca

P: 250-828-3494 | Kamloops.ca | LetsTalk.Kamloops.ca



**MAKING
KAMLOOPS
SHINE**

If you receive this in error, please contact the sender by return email and delete all copies of this email and any attachments. Please be aware that City of Kamloops records, including emails, may be requested and released in accordance with the British Columbia Freedom of Information and Protection of Privacy Act. If you receive this in error, please contact the sender by return email and delete all copies of this email and any attachments.

CITY OF KAMLOOPS

RESOLUTION FROM THE MINUTES OF A REGULAR MEETING OF THE MUNICIPAL COUNCIL OF THE CITY OF KAMLOOPS, HELD IN COUNCIL CHAMBERS, CITY HALL, 7 VICTORIA STREET WEST, KAMLOOPS, BC

WHEREAS local governments in British Columbia are responsible for land-use planning, infrastructure, permitting, and development approvals, all of which are directly affected by provincial reconciliation policy, archaeology requirements, and the *Heritage Conservation Act* and Regulations;

AND WHEREAS the Province of British Columbia is implementing the Declaration on the Rights of Indigenous Peoples Act (DRIPA) and also undertaking reviews of reconciliation, archaeology, and heritage policy frameworks;

AND WHEREAS local governments are not consistently included as formal partners in provincial policy development related to DRIPA implementation, archaeology processes, and heritage legislation, despite being responsible for implementation at the community level and for public infrastructure projects that are significantly impacted by these policies;

AND WHEREAS the current *Heritage Conservation Act* is outdated, and existing archaeology processes create uncertainty, delays, and cost impacts for local governments, Indigenous communities, and the public, which further contribute to challenges in delivering affordable development and housing in British Columbia;

THEREFORE BE IT RESOLVED that this resolution be forwarded to the Southern Interior Local Government Association, Association of Vancouver Island and Coastal Communities, North Central Local Government Association, Lower Mainland Local Government Association, and Association of Kootenay and Boundary Local Governments, urging the Province of British Columbia to ensure that senior representatives of all local government associations in British Columbia are formally included in discussions and decision-making related to the review, reform, and implementation of DRIPA, reconciliation policy, archaeology processes, and any replacement or reform of the *Heritage Conservation Act*.

CARRIED.

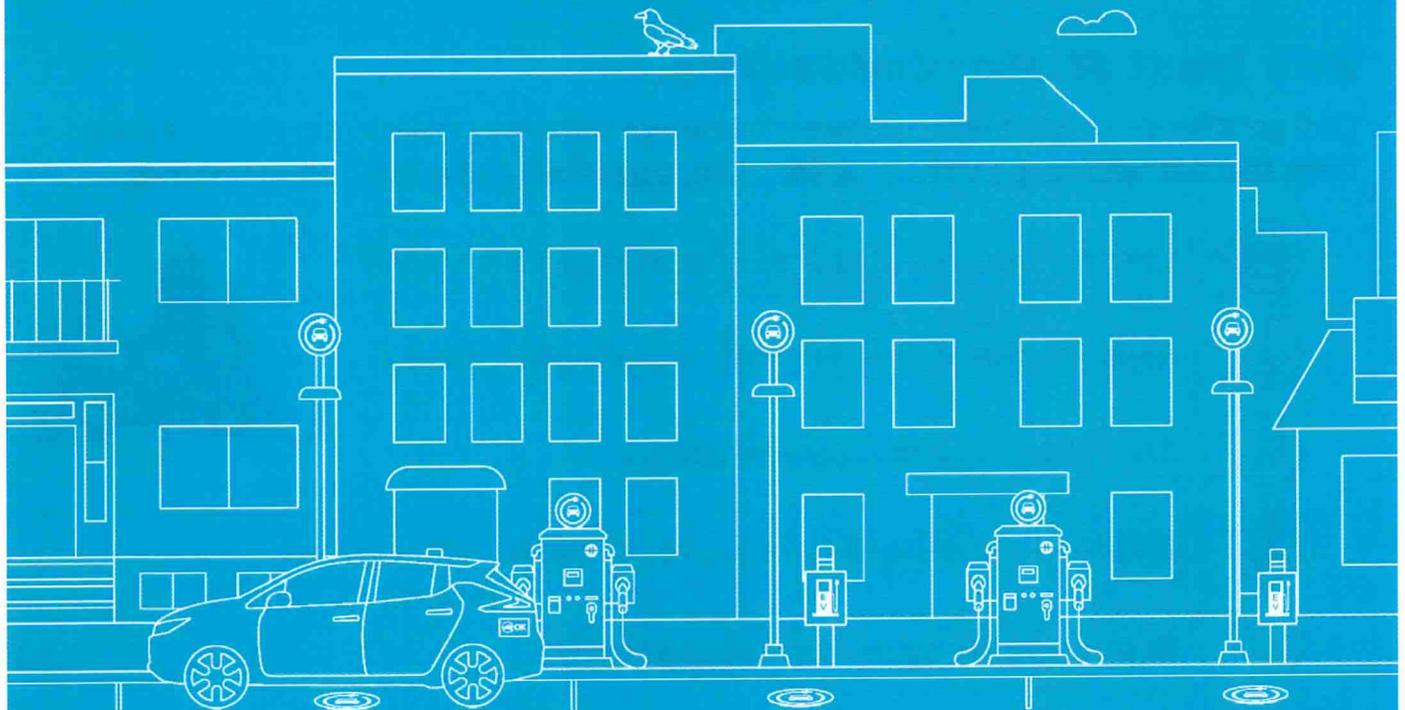
I HEREBY CERTIFY that this is a true copy of a resolution from the minutes of a meeting of the Kamloops City Council held on the 3rd day of February, 2026.

Dated at Kamloops, BC, this 3rd day of February, 2026.



M. Mazzotta
Corporate Officer

EV Site Host Update



**Winter
2025/2026**

 **BC Hydro**
Power smart

EV Site Host Update: Winter Edition

Welcome to the Winter 2025/2026 edition of the BC Hydro EV Site Host Update. As we kick off the new year, we're excited to share network updates, upcoming projects, and ways your partnership continues to drive clean transportation across B.C.

EV News

Canada's transition to electric mobility has reached a significant milestone:

1,000,000 electric and plug-in hybrid vehicles on the road.

B.C. is a Canadian leader in EV targets, with more than 220,000 zero-emission vehicles (ZEVs) on provincial roads, including over 25,000 ZEVs added in the past year.

This growth would not be possible without your partnership in helping ensure reliable, accessible charging where and when drivers need it.



Site Host Winter Guidelines

Cold weather can impact both charging equipment and driver experience. Here are a few steps that will help keep EV charging sites safe, accessible, and reliable all winter long.



Confirm site access and charger markings are visible



Keep charging areas clear of snow, ice and debris



Check lighting and signage visibility



Maintain site cleanliness and proper waste management



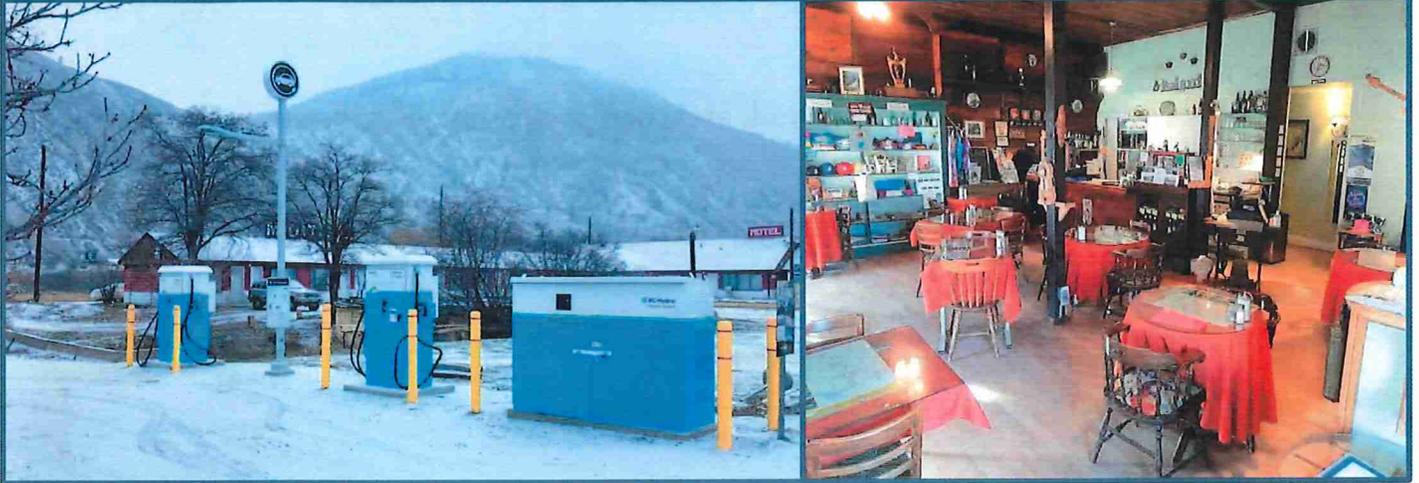
Report any issues or concerns promptly



If have any questions about managing your site during the winter, or about how BC Hydro can support you, please email scott.petrie@bchydro.com



Featured Site - Spences Bridge



Located at the **junction of Highways 1 and 8**, [Spences Bridge](#) has become a natural and welcoming stop for EV drivers in the Okanagan. For this riverside community, joining the BC Hydro EV charging network has created new **economic opportunities**, while inviting visitors to explore local businesses, nature and culture.

Site host representative, Steven Rice, notes that since the chargers were installed, visitors are "staying longer and taking more time to explore the community." While their vehicles charge, drivers often head to the **Packing House Restaurant** or take in views of the **Thompson River** and **Murray Creek Falls**.

When reflecting on the project, Steven credits the **close collaboration** and **strong communication** with BC Hydro as being a major factor in bringing this site to life. The result from Steven's perspective has been the growth of a "**new EV family**", supporting travelers along the highways and the creation of "**economic vibrancy that helps keep rural B.C. communities thriving**." He points to EV charging as a powerful form of community connection, all while supporting clean transportation across the province.

Feature Your EV Site – Photos & Testimonials Wanted

If you're interested in being featured in one of our upcoming EV network newsletters, please reach out with photos of your site in action! If your site is selected, we'll follow up with a short testimonial about your experience as a BC Hydro EV site host.



Just email me to let me know you're interested, and I'll share some tips and tricks for capturing the best photos: scott.petrie@bchydro.com.



BC Hydro EV Site Updates

Our charging network continues to grow, now reaching **829 charging ports at 180 sites** supporting EV drivers across B.C.

Below are some of the new, expanded, and current sites under construction.

New:

- Victoria Ogden Point Cruise Ship Terminal – **16 ports**
- Richmond Gulf of Georgian Cannery – **8 ports**
- North Vancouver Westview Shopping Centre – **6 ports**
- Pitt Meadows Athletic Park – **12 ports**
- Vernon Performing Arts Centre – **10 ports**

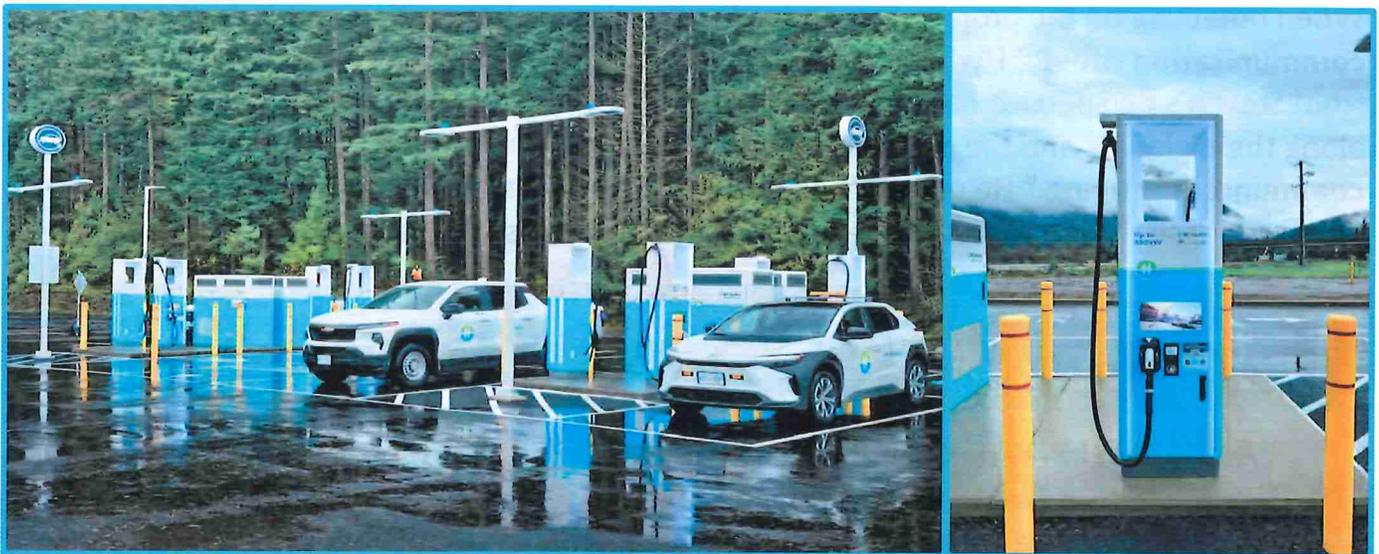
Coming soon:

- Saanich Pearkes Recreation Centre – **8 ports**
- Coquitlam TransLink Park and Ride – **15 ports**
- Coquitlam Superstore (expansion) - **6 ports**
- Nanaimo Superstore (expansion) – **6 ports**



New Site Spotlight: Hope Esso & Silver Creek

The first exclusively high-powered EV charging hub on our network has opened at [Hope Esso & Silver Creek Travel Centre](#).



The site features **eight 350kW charging ports** that will help support EVs traveling along **Highways 1, 3 and 5**. The hub is also designed with **wider parking** to accommodate medium and heavy-duty EVs, including delivery vans and semi-truck tractors.



BC Hydro EV Technology Updates

Did you know?

NACS is the charging connector used by Tesla!

Many of our new fast-chargers are equipped with NACS (North American Charging Standard) connectors, making it easier for NACS-enabled vehicles such as Tesla, Hyundai IONIQ models, the 2026 Toyota bZ, and the 2026 Kia EV9 to charge without the need for an adapter.

Check out [our fast charging network](#) and [charger help centre](#) to learn more about charging with NACS.



NACS

New: 400kW Chargers



We're excited to share that our new **ultra-fast 400kW chargers** are now live at [Burnaby \(BCIT\)](#) and [Nanaimo \(Rock City Centre\)](#).

Designed to support both current and next-generation EVs, these high-powered chargers enable **faster and more efficient charging**. Our 400kW chargers also offer **power sharing**, so two vehicles can charge together on the same unit and receive up to 200kW each.

Under optimal conditions, an average EV can add up to **100-kilometres of range in about three minutes**.

BC Hydro Network Reliability

Our fast-charging network continues to deliver approximately 99% uptime, thanks to proactive maintenance and 24/7 technical support. If you or your customers encounter any issues, our EV support team is always available at:

evsupport@bchydro.com

1-866-338-3369



Site Host Utilization Monthly Dashboard

Chargers In Service

2

Active Port Count

2

Overall Utilization %

1.7%

DCFC Utilization %

1.7%

L2 Utilization %

--

Unique Users Roaming

11

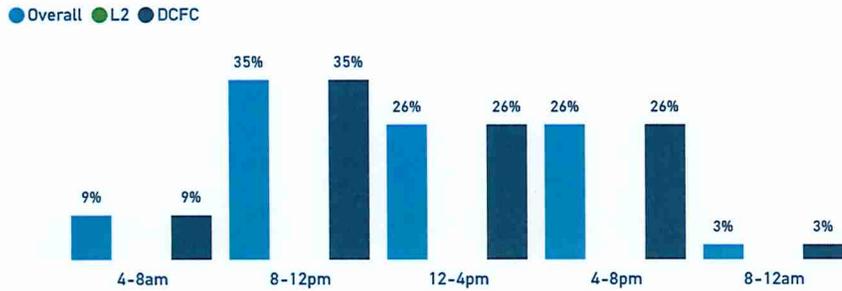
Date

2026-January

Site Name

New Hazelton

% of Charging Sessions by Time

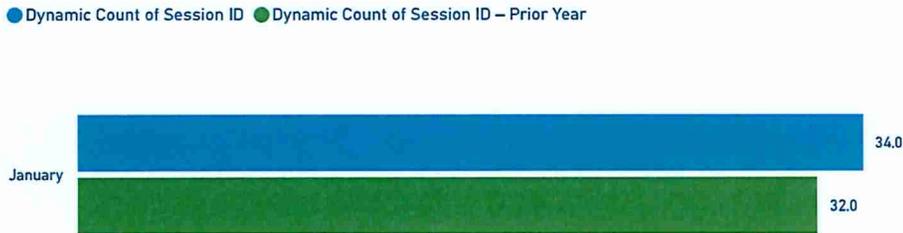


Repeat Users 5 (50%)
Single-session Users 6 (60%)
New Users 1 (10%)

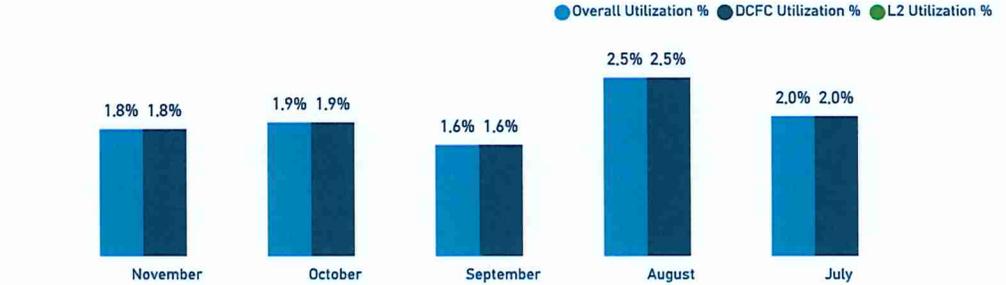
Monthly User Stats



of Charging Sessions



Monthly Utilization %





Call for 2026 Resolutions Notice

Celebrating 100 Years of Collaboration ~ 1926 - 2026

Resolutions provide an opportunity for local governments of all sizes and from all areas of the TCYHA region/Yellowhead Corridor to express concerns, share their experiences and take a united position.

The date for our Annual General Meeting has been set for Friday May 29th – this will also be our Centennial celebration. As in previous years, the Annual General Meeting will be in Edmonton AB as a hybrid event; both In Person as well as virtual participation (by Zoom).

We take this opportunity to invite your Municipality to consider preparing a Resolution(s) for the AGM in hopes this provides ample time to consider making a submission.

Are there any issues concerning the highway (TC Yellowhead #16 or BC Yellowhead #5) that are bothering you? Is there anything to do with the highway corridor that is of concern to your municipality? Is it infrastructure improvements that are needed, or better signage, or some other issue that you need assistance with to advocate to Government. If so, please construct that in the form of a Resolution and submit it for discussion at our Annual General Meeting.

Our members submit resolutions on province-wide or region-specific issues for consideration by the full membership at the TCYHA's Annual General Meeting. Resolutions endorsed by the membership are conveyed to senior levels of government and other stakeholders involved in the affairs of our four western provinces.

Resolutions must be submitted by a member community in order to reach the floor at the TCYHA Annual General Meeting. A representative of the municipality is required to present the Resolution for it to be voted on; this assures that if there are any questions concerning the Resolution someone would be available to answer.

We would like to give municipalities' sufficient time to consider submitting Resolutions and we encourage you to begin the process and submit at your earliest convenience. At this time the deadline for submitting Resolutions for consideration at the AGM is set for Thursday April 30th.

The procedures and forms can be found at: <https://www.goyellowhead.com/association/resources/>. Please ensure that all the documentation is completed prior to submission.

Submit your resolution(s), with the Subject line "TCYHA Resolutions 2026 – Attn: Resolutions Chair" to admin@goyellowhead.com.

If you would like any further information on the above, including the Zoom link for the AGM, contact our C.A.O. John Wojcicki at admin@goyellowhead.com.

Thank you.

Safe travels and stay healthy,

A black ink signature of Pete Pearson, consisting of a stylized, cursive script.

Pete Pearson (Councillor, Valemount BC)
President
TCYHA Board of Directors

A blue ink signature of Sandy Salt, written in a cursive style.

Sandy Salt (Life Member)
Resolutions Chair
TCYHA Board of Directors

**THE CORPORATION OF THE
TOWNSHIP OF SPALLUMCHEEN**

4144 Spallumcheen Way, Spallumcheen, BC V4Y 0N1
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February 18, 2026

Southern Interior Local Government Association
Via Email: info@silga.ca

Re: Township of Spallumcheen Resolution

Please find attached to this letter the resolution for consideration and the background information to support this resolution.

A similar resolution was submitted in 2025 which was supported by SILGA at the 2025 convention and forwarded to UBCM. At the 2025 UBCM convention, the resolution did not make the floor for open debate and was not supported by the committee after the fact. The Township followed up and received the following feedback:

2025-NR68, BC Building Code Amendment to Include Natural Gas - discussion noted that the resolution does not sufficiently address other relevant codes that influence the building step code. It was also noted that the intention of the resolution runs counter to established UBCM policy that supports buildings sector emissions reductions and more equitable building code implementation support for small, rural and northern communities.

Township Council still strongly believes in the 2025 resolution. We have therefore made amendments to address the concerns raised by the UBCM resolution committee and resubmit the amended resolution for consideration of support in 2026.

Respectfully,

A handwritten signature in blue ink, appearing to read 'Lisa Gyorkos', is positioned above the typed name.

Lisa Gyorkos
Manager of Strategic Priorities

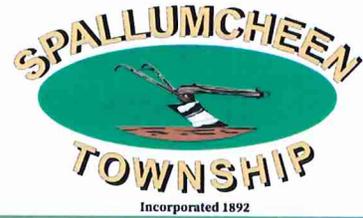
enclosures

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File No 0230-02

TOWNSHIP OF SPALLUMCHEEN

CERTIFIED RESOLUTION

Moved by Councillor Casson/seconded by Councillor York:

"...THAT the Township of Spallumcheen Council direct staff to submit the following resolution to the Southern Interior Local Government Association (SILGA) for consideration of endorsement to proceed to the 2026 UBCM Conference as follows:

WHEREAS the BC Building Code has incorporated the BC Energy Step Code, which sets increasingly stringent energy efficiency and greenhouse gas (GHG) reduction requirements for new buildings and major renovations, effectively limiting the current uses and eliminating the future uses of natural gas as a fuel in areas of BC that use the BC Building Code;

AND WHEREAS many municipalities, including those with significant agricultural, industrial, and rural residential needs, require flexibility and ongoing energy investment to ensure affordable, reliable, and diverse energy options for residents, businesses, and farms;

AND WHEREAS limiting or eliminating natural gas as an energy option could increase energy and construction costs, reduce economic competitiveness, and limit the ability of municipalities to attract and retain families, businesses, and agricultural entities that rely on natural gas for their operations;

AND WHEREAS there have also been recent changes to implementation strategies in the CleanBC legislation by the Province of BC government, in coordination with the Federal government, that should also be considered in context with the BC Energy Step Code and BC Building Code;

THEREFORE BE IT RESOLVED that the Township of Spallumcheen asks the members of SILGA to request the Union of British Columbia Municipalities (UBCM) petition the Province of British Columbia to amend the BC Building Code to ensure that natural gas remains a viable energy option now and in the future, allowing residents, businesses and municipalities the flexibility to determine the most appropriate energy solutions for their unique economic, geographic, and community needs, while still supporting reasonable and achievable energy efficiency goals, and that any such amendment consider applicable provincial building and energy regulations, and be implemented in a manner that expands rather than restricts local autonomy and opportunity, and is flexible and practical for all British Columbia Municipalities."

CARRIED

I hereby certify the above to be a true and correct copy of a resolution adopted by the Township of Spallumcheen at their Regular Meeting of Council held on Tuesday, February 17, 2026.

Dated: February 18, 2026

A blue ink signature of Lisa Gyorkos, written in a cursive style.

Lisa Gyorkos

Manager of Strategic Priorities/Deputy Corporate Officer

Township of Spallumcheen - Resolution Background Information

In 2018, the Province of BC adopted the CleanBC plan. This plan was used to amend the BC Building Code BC through the Energy Step Code, which establishes progressively stringent energy efficiency and greenhouse gas (GHG) reduction requirements for new construction and major renovations. In practical terms, this framework is moving toward the effective elimination of natural gas as an energy option in many areas of British Columbia.

Recent developments underscore the real-world consequences of this trajectory. In December 2023, the BC Utilities Commission denied approval of FortisBC Energy Inc.'s proposed \$327 million Okanagan Capacity Upgrade project, citing uncertainty in future natural gas demand influenced by CleanBC policies and Step Code impacts. This decision highlights how current regulatory direction is already affecting long-term infrastructure planning and private investment in our province.

For communities like the Township—and for many rural, agricultural, and industrial municipalities—natural gas remains a clean-burning, comparatively low-emission, reliable, and cost-effective energy source. It supports essential operations such as greenhouse heating, industrial process heat, and dependable residential heating. In many areas outside the Lower Mainland, electrification alone may not provide the reliability or affordability required, particularly during peak demand or extreme weather events.

This resolution is not about resisting environmental progress, but rather, it's about ensuring that environmental performance is measured by outcomes rather than by prohibiting specific technologies. High-efficiency natural gas systems, hybrid systems, and district energy solutions can achieve strong environmental performance while maintaining affordability and reliability. A balanced transition—rather than abrupt, one-size-fits-all restrictions—better supports both environmental and economic sustainability, and is more reflective of the reality we face.

Restricting natural gas through the Building Code risks several unintended consequences:

- Increased construction and energy costs for families and businesses;
- Reduced economic competitiveness in rural and resource-based communities;
- Diminished attractiveness for agricultural and industrial investment;
- The forced abandonment of functional, efficient infrastructure, resulting in material waste and additional environmental burden.
- The potential to continue our dependency on other jurisdictions as a critical source of on demand energy

After feedback received from UBCM executive in regards to a previous 2025 version of our submission, we have made adjustments to this resolution to respectfully address those recommendations, such as to broaden consideration of the various relevant codes that influence the BC step code, and to acknowledge and respect the autonomy of local

governments in their implementation of building code, based on local priorities and initiatives.

Municipalities vary significantly in geography, infrastructure capacity, climate, and economic composition. Local governments are best positioned to understand these realities and pursue practical environmental progress tailored to their communities. Preserving energy flexibility respects local autonomy, protects public and private investment, and maintains democratic confidence in policy decisions.

The resolution before you asks that the Province amend the BC Building Code to ensure that natural gas remains a viable energy option—now and in the future—while still supporting reasonable and achievable energy efficiency goals. It further calls for any amendments to consider related provincial building and energy regulations and to be implemented in a manner that expands, rather than restricts, local opportunity and autonomy.

This is about balanced transition, environmental responsibility grounded in measurable results, and safeguarding the economic stability of communities across British Columbia.

BULLET POINTS:

Background and Policy Context

- In 2018, the Province adopted the CleanBC plan.
- CleanBC informed amendments to the BC Building Code, incorporating the BC Energy Step Code.
- The Step Code establishes progressively stringent energy efficiency and GHG reduction requirements for new construction and major renovations.
- In practical effect, this framework is moving toward the elimination of natural gas as an energy option in many areas of British Columbia.

Regulatory and Investment Impacts

- In December 2023, the BC Utilities Commission denied approval of FortisBC Energy Inc.'s \$327 million Okanagan Capacity Upgrade project.
- The denial cited uncertainty in future natural gas demand influenced by CleanBC policies and Step Code impacts.
- This demonstrates that current regulatory direction is already affecting long-term infrastructure planning and private sector investment in BC.

Importance of Natural Gas to Rural and Resource-Based Communities

- Natural gas remains:
 - Clean-burning and comparatively low-emission;
 - Reliable and dispatchable;
 - Cost-effective for residential, agricultural, and industrial users.
- Essential applications include:
 - Greenhouse heating;
 - Industrial process heat;
 - Dependable residential heating.
- In many areas outside the Lower Mainland:

- Electrification alone may not provide sufficient reliability;
- Peak demand and extreme weather events pose risks to fully electric systems;
- Affordability remains a significant concern.

The Resolution advocates for:

- Measuring environmental performance by outcomes rather than by prohibiting specific fuel sources;
- Technology-neutral policy approaches.
- High-efficiency natural gas systems, hybrid systems, and district energy solutions can:
 - Achieve strong environmental performance;
 - Maintain affordability and system reliability.
- A balanced and staged transition is more practical than abrupt, one-size-fits-all restrictions.

Risks of Eliminating Natural Gas via the Building Code

- Increased construction and energy costs for families and businesses.
- Reduced economic competitiveness in rural and resource-based communities.
- Diminished attractiveness for agricultural and industrial investment.
- Forced abandonment of functional and efficient infrastructure, resulting in:
 - Material waste;
 - Additional environmental burdens from premature replacement.
- Potential continued dependency on other jurisdictions for critical, on-demand energy supply.

Response to Feedback from UBCM

Revisions include:

- Broadening consideration of the various provincial codes and regulations that influence the Step Code;
- Explicitly acknowledging and respecting local government autonomy in building code implementation;
- Recognizing diverse local priorities and initiatives across municipalities.

Principles of Local Autonomy and Flexibility

- Municipalities differ significantly in:
 - Geography;
 - Climate;
 - Infrastructure capacity;
 - Economic composition.
- Local governments are best positioned to:
 - Assess community energy needs;
 - Balance environmental goals with economic realities;
 - Implement context-sensitive solutions.
- Preserving energy flexibility:
 - Protects public and private investment;
 - Respects democratic decision-making;
 - Maintains public confidence in environmental policy.

Core Request of the Resolution

- That the Province amend the BC Building Code to:
 - Ensure natural gas remains a viable energy option now and in the future;
 - Support reasonable and achievable energy efficiency goals;
 - Consider related provincial building and energy regulations;
 - Implement changes in a manner that expands—rather than restricts—local autonomy and opportunity.

Overall Objective

- Promote a balanced energy transition.
- Ground environmental responsibility in measurable results.
- Safeguard the economic stability and long-term sustainability of communities across British Columbia