

Branch Language Library

Correspondence Modernization & Service Redesign – Supporting Initiative

Purpose

This initiative was developed as part of the broader Correspondence Modernization & Service Redesign project. I assisted in the development and refinement of a shared internal communications language library designed to improve efficiency, consistency, and clarity across branch correspondence.

The objective was to reduce duplication in drafting, strengthen consistency in messaging, and provide staff with a reliable source of approved language for both routine and complex communications.

Context

Internal correspondence across the branch previously showed variation in tone, structure, and phrasing, particularly in operational updates, service communications, and time-sensitive messaging.

This resulted in:

- Repeated drafting of similar messages across teams
- Inconsistent tone and structure in communications
- Additional time spent aligning language during review cycles
- Variability in clarity and messaging consistency across authors

The need for a shared, centralized reference tool was identified to improve standardization and efficiency.

Solution Overview

A shared OneNote-based Language Library was developed as a branch-wide reference resource for approved messaging, tone guidance, and reusable language blocks.

I supported the development of this tool by contributing to the structure, content organization, and practical application within correspondence workflows.

The OneNote functions as a living repository of approved internal communications language, maintained centrally through the communications function to ensure consistency and version control.

Library Structure

[*samples below](#)

The OneNote is organized into key topics for response:

1. Standard Messaging Blocks

Reusable templates for common communication needs, including:

- General public responses
 - Media requests
 - Operational updates
 - Administrative notices
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2. Approved Language (Sensitive Contexts)

Pre-approved phrasing for high-sensitivity or high-visibility communications, including:

- Service disruption messaging
 - Organizational change updates
 - Time-sensitive notices
 - Uncertain or evolving situations
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3. Tone & Style Guidance

Practical guidance to support consistency across correspondence:

- Plain language principles
- Sentence structure guidance
- Preferred phrasing examples

- Accessibility considerations
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4. Reusable Language Patterns

Modular phrasing to support consistent messaging, such as:

- “We are currently assessing...”
 - “At this stage, we expect...”
 - “Further updates will be provided as more information becomes available...”
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5. Samples

Navigation



Sample Page

DMERS

Tuesday, October 7, 2025 1:24 PM

INTERNAL NOTES: HOW TO USE AND UPDATE THIS LANGUAGE LIBRARY

- **The High level information section** is used for media responses, MLA bullets, official documents, or executive/MO correspondence. Choose the bullets that apply for your specific purpose and/or that answers the issue at hand and the questions being asked. Think critically and use your judgement. Do not simply cut and paste all of the bullets in your response.
- **The Questions & Answer section** is used answers to specific questions, and can be used for mailbox responses. It can also include an action that needs to be taken, such as where to forward an item, like a completed DMER.

TC

References:

- Visit the RSBC website to learn more about [driver medical fitness](#).
- Visit the RSBC website to learn more about [driver medical fitness for commercial drivers](#).

Key Messages	
RoadSafetyBC is responsible for assessing the medical fitness of drivers and making licensing decisions. RoadSafetyBC's goal is to allow people to drive as long as is safely possible.	Approved by ADM on January 21, 2026
The primary tool used to assess driver medical fitness in B.C. is the Driver Medical Examination Report (DMER), which is completed by a physician or nurse practitioner.	Approved by ADM on January 21, 2026
A DMER helps assess the severity, progression, treatment, or effects of any medical condition(s) that the driver may have that could affect their fitness to drive.	Approved by ADM on January 21, 2026
Although physicians and other medical practitioners play an important role in driver fitness assessment, only the Superintendent of Motor Vehicles and their delegates have the authority to make driver fitness licensing decisions.	Approved by ADM on January 21, 2026
DMERs must be completed regularly for commercial drivers, drivers with known or suspected medical conditions, and drivers at age 80, 85 and every two years after that.	Approved by ADM on January 21, 2026
All reports received about a driver's medical fitness are assessed on a case-by-case basis in conjunction with the CCMTA Medical Standards for Drivers with B.C. Specific Guidelines .	Approved by ADM on January 21, 2026
Commercial and senior drivers can continue to hold a valid driver's licence and drive while awaiting review of routine commercial or age-based DMERs. <i>Updated by program area - waiting for first ADM approval.</i> Driver medical fitness decisions are based on a review of all medical information, along with consideration of the individual's driving record. --> INTERNAL NOTE: flag this update for ED/ADM, the first time it's used. Then update the approval status here & in DMF decisions tab messages. When it comes to driver medical fitness, RSBC only notifies drivers if there is a change in their driver's licence status or if it requires more information. While RSBC is experiencing a backlog in processing driver files, driver medical fitness files are triaged for processing based first on medical urgency and then reviewed in the date order they are received. (See official backlog messaging , if needed)	Approved by ADM on January 21, 2026
Commercial and senior drivers can continue to hold a valid driver's licence and drive while awaiting review of routine commercial or age-based DMERs.	Approved by ADM on January 21, 2026
<i>Updated by program area - waiting for first ADM approval.</i> Driver medical fitness decisions are based on a review of all medical information, along with consideration of the individual's driving record. --> INTERNAL NOTE: flag this update for ED/ADM, the first time it's used. Then update the approval status here & in DMF decisions tab messages.	Approved by ADM on January 21, 2026
When it comes to driver medical fitness, RSBC only notifies drivers if there is a change in their driver's licence status or if it requires more information.	Approved by ADM on January 21, 2026
While RSBC is experiencing a backlog in processing driver files, driver medical fitness files are triaged for processing based first on medical urgency and then reviewed in the date order they are received. (See official backlog messaging , if needed)	Approved by ADM on January 21, 2026

Secondary Messages (Subject Specific Breakouts)	
Age Based DMERS	
Age-based DMERs are required at age 80, 85, and every two years thereafter. The age-based DMERs are mailed out approximately two months prior to the driver's birthday.	Approved by ADM on January 21, 2026
The Province of BC's requirement to assess drivers' medical fitness starting at age 80 is consistent with the CCMTA medical standard for drivers which most Canadian jurisdictions follow.	Approved by ADM on January 21, 2026
While age is not necessarily indicative of driver behaviour or competence, the presence of a medical condition or certain medications can significantly affect an individual's safe driving ability, and health problems tend to manifest themselves, or become worse, as we age.	Approved in 2024 Fact Sheet
Senior drivers can continue to hold a valid driver's licence and drive while awaiting review of routine age-based DMERs.	Approved by ADM on January 21, 2026
Commercial DMERS	
DMERs must be completed regularly for commercial drivers, drivers with known or suspected medical conditions, and drivers at age 80, 85 and every two years after that.	Approved
The National Safety Code sets standards for commercial drivers. RoadSafetyBC (RSBC) follows its schedule for checking the medical fitness of commercial drivers.	Approved
Commercial drivers can continue to hold a valid driver's licence and drive while awaiting review of routine commercial or DMERs.	Approved
DMER Cost	
As DMERs are not considered a benefit under the Medicare Protection Act, the fees that doctors and nurse practitioners charge patients for completing DMERs are not set by government, but by the individual medical practices, often following the recommendations of the Doctors of BC Fee Guide for Uninsured Services: www.doctorsofbc.ca	Approved by ED on April 2, 2026
As the fees are not set by government, neither the Ministry of Health nor RoadSafetyBC have the authority to direct private medical offices to lower or waive their fees for the services. While fees can vary, Doctors of BC recommends that doctors reduce or waive the DMER fee for patients who are experiencing economic hardship. Individuals are encouraged to discuss their financial circumstances with their medical offices.	Approved by ED on April 2, 2026
On average, we find most doctors are charging around \$250 for a DMER. The \$75 reimbursement applies only to DMERs for known medical conditions.	Approved by ED on April 2, 2026
If you wish to raise your concerns regarding uninsured fee charges with the Doctors of BC, they have an online contact page, or they can be reached at 604-736-5551 (or toll free at 1-800-665-2262). I hope this information was helpful in addressing your concerns.	Approved by ED on April 2, 2026
??? Check with Jill from MSP email 688811 Coverage of physician fees, including whether a Driver Medical Examination Report (DMER) cost is reimbursed, falls under the Ministry of Health—not RoadSafetyBC.	Approved by ED on April 2, 2026
Miscellaneous	
Medical practitioners and family members can also report concerns about a driver's medical fitness at any time based on first-hand knowledge. These reports are also treated as a priority.	Approved by ADM on January 21, 2026
I understand the importance of maintaining mobility and independence for seniors, and I also appreciate the financial challenges some seniors may face in completing the DMER. If the cost of the DMER is prohibitive, I encourage you to discuss your financial circumstances with your medical office to see if an alternative arrangement can be achieved.	Approved by ED on April 2, 2026
Background Information	
When making driver medical fitness and licensing decisions, RoadSafetyBC upholds public safety while maintaining administrative fairness.	Approved by ADM on January 21, 2026
When a person attends an Insurance Corporation of British Columbia (ICBC) Driver Licensing Office (DLO) to apply for, renew, or replace a driver's licence, they are asked if they have any medical conditions. ICBC will review the DMER issuance guidelines and determine if a medical condition warrants a blue DMER being issued.	Approved in 2024 Fact Sheet
If a person who is turning 80 has not declared a medical condition during a previous visit to an ICBC DLO, they will be issued a yellow form to be used for screening for medical conditions that may affect driving. If at that time a medical condition is identified that requires a follow up, a blue DMER may be issued for that condition in future.	Approved in 2024 Fact Sheet
In the spring of 2023, RoadSafetyBC updated the requirement for age-based DMERs with a new age-based interval as follows: age 80, 85, and every two years thereafter. The 2023 DMER policy change was based on evidence that there was no significant increase in the number of collisions for drivers between the ages of 80 and 85.	Approved in 2024 Fact Sheet
Statistics	
<ul style="list-style-type: none"> In 2024, RoadSafetyBC generated over 177K DMERs. <ul style="list-style-type: none"> 84K (47.5%) commercial, 71K (40%) age-based, and 22K (12.5%) for known or suspected medical conditions. 	Approved by ADM on January 21, 2026
Documents received in May 2025 are currently being processed.*	(last updated: April 2026)

How It Is Used

The Language Library is embedded into day-to-day drafting workflows:

1. Staff identify the communication need (update, change, disruption, etc.)

2. Navigate to the relevant OneNote section
 3. Select or adapt approved language blocks
 4. Draft correspondence using consistent tone and structure
 5. Proceed through standard review and approval processes
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Application Across Communications

The tool is used across a range of branch communications, including:

- Executive and leadership updates
- Operational change communications
- Routine internal staff messaging
- Time-sensitive notices and service updates

It supports consistent messaging regardless of author, team, or communication type.

Outcomes (Early Indicators)

Early use of the Language Library indicates:

- Improved consistency in tone and messaging across correspondence
 - Reduced duplication of effort in drafting standard communications
 - Faster access to approved language during time-sensitive situations
 - Increased confidence among non-communications staff when drafting updates
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Strategic Value

The Language Library functions as a lightweight communications enablement tool that supports:

- Standardization of messaging across the branch
 - Reduced variation in written outputs
 - Improved drafting efficiency for routine correspondence
 - Stronger consistency during organizational change and operational disruption
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Role in Correspondence Modernization

This initiative forms part of the broader Correspondence Modernization & Service Redesign project, supporting:

- Improved efficiency in message production
- Greater consistency in internal communications
- Embedding of approved language into daily workflows
- Development of a more structured and scalable communications model