

December 4, 6:30 @ Riverside

Present: Ed Staples, Spencer Coyne, June Hope, Ole Juul, Judy Short, Brad Hope, Nienke Klaver

1. Minutes of November 5 meeting - Approved on a motion by Ole, seconded by June.

2. Treasurer's report - All outstanding bills have been paid. June will talk to Lynn Holland at CIBC and ask about a 'no fee' account.

3. Update on activities

3.1 Steering Committee - Brad gave an update on the Princeton Health Care Steering Committee. He went to an IH recruiting session in Kelowna and Princeton is the only success story. He feels we are in a very good position compared to communities such as Kaslo and likes the way the committee is set up. Judy mentioned that IH is listening and is taking notes.

3.2 Princeton/UBC Okanagan research - Scope has extended. What services are available? How do we tie in Area H communities and set up a volunteer system in each community? We probably need to contact all community associations and Community Services to find out names of volunteers.

A paid position to coordinate all Princeton and Area H volunteers would be necessary. Ed gave information on last week's meeting with Dr. Pesut and her team and the three visitors who told their story.

From a telephone conversation with Dr. Pesut afterwards: she feels we should go for the 'quick wins' first which would be her job. Social asset mapping would be a longer term project. Find where the connections are, once you have that map we will have a better idea of what can be done. June cautioned that physicians, social workers and the Community Centre will not be able to give out names of patients. These have to come from the community and we have to keep in mind that some patients would not want to be involved.

3.3 BC Healthy Communities grant application - Ed talked about the Sherbrooke Artist in Residence program and is working on filling out the application. This grant would be for one year and we would have to show that it can be sustainable after that. Brad thinks that would be possible if we approach Industry, RDOS, Town and others for small contributions of \$2,500 each.

Community Services is receiving IH money. June thought it could possibly be tied in with continuing education programs from universities.

Possible name could be *Artists for Life*.

4. Review on Mission statement and Goals - Ole feels that rather than being specific it would be better to have very general terms, so we would not have to change it every year.

Brainstorming ideas:

- Community Cohesion (neighbourhoods, attractive, retaining)
- Centre for Excellence
- Teaching hospital (education)
- Artist for Life (involvement, creativity, self esteem)
- Support for people at risk
- Volunteerism and coordination of volunteers, paid position
- Image driven
- A model for others
- Larger work to be done: Canada Health Act and privatization danger (Cambio Clinic trial)
- Princeton could become a leader in the province as far as innovation in health care goes.
- Healthy Community means - thriving business
 - thriving arts
 - people involvement

5. Other - Dr. Eva would like to see PGH become a teaching hospital that could attract people from Lillooet, Hope, Ashcroft and Merritt.

- We talked about ongoing education and to work towards expanding this; Tanya TerKeurs is already teaching and Dr. Eva has had two medical students working with him.
- We should look at the ideas that Gloria Levi put forward when she gave a presentation in Princeton last February.

It was decided that everyone would put their thoughts about SOHC's Mission, Vision and Goals and submit it to Ed by email.

The next meeting is set for January 7, 2014 @ 6:30, Riverside