

Support Our Health Care (SOHC) Society of Princeton Meeting
September 29, 2014, 8:00 @ Brad and June Hope

Present: Ed Staples, June Hope, Brad Hope, Patti Vinthers, Nienke Klaver
Regrets: Judy Short

1. Agenda

- Minutes June 9
- Financial Report
- Ashcroft Report (Brad and Ed)
- Whistler Doctor Conference
- Rural Coordination Centre of BC
- Business Stakeholders
- PAs
- audiology
- Diane Sterne telehealth GP
- AGM

2. Patti Vinthers was welcomed by Ed.

3. Minutes from the June 9 meeting were accepted.

4. Finances. Ed and Nienke will get reimbursed for some costs incurred during a meeting with Dr. Munro, Dr. Black, the Recruitment and Retention Sub Committee as well as some costs from Dr. Eva's reception.

5. Ashcroft. The Village of Ashcroft asked SOHC for assistance with setting up a Community Consultation similar to what SOHC organized in Princeton in 2013. Dr. Barbara Pesut agreed to lead the Consultation and write the report which will be coming out soon.

The issues in Ashcroft are very similar: difficulty in recruiting and retaining doctors; "we sell recreation to the docs, but when they come they have no time to enjoy these opportunities because of the heavy load of work"; nurses live out of town, since they are not offered full time jobs; residents unable to find a family physician and for the ones that do there is a long waiting time for appointments; for that reason often the ER is being used as a walk-in clinic; transportation issues especially for the frail and elderly. Ashcroft would like to adopt a similar model as we have in Princeton and they are currently in contact with people in Lilloett who want to hold a Community Consultation as well.

Brad pointed out that as we get more communities together and lobby and work together, we will be able to go to the government with a larger body, which will be more effective.

Ed mentioned that a large amount of medical students starting their residency have chosen to be a family doctor. In 2 years time (if the same number of students enter the system next year), we may see an increase in the availability of family physicians.

6. Recruitment:

6.1 Dr. Munro went to the Whistler Conference and handed out brochures to targeted colleagues. IH had a table with Princeton folders provided by Lori Thomas.

6.2 Ed and Nienke had a telephone conversation with Dr. Stuart Johnston and Sharon Mah (Executive Director) of the **Rural Coordination Centre of BC**, a provincial rural health care organization. Dr. Johnston said he would contact his connections to see who might be interested in coming to Princeton. Soon after that we received an email from Dr. Christopher Wilson who is currently practicing in New Zealand, expressing an interest in doing locum work in Princeton between April and July 2015. His information has been passed on to Susan Brown. and someone will contact Dr. Wilson. Since it is a long and involved process for Dr. Wilson to get proper certification and clearance, Susan thought that it might be worth exploring the possibility of having him come to Princeton to do more than just locum work.

6.3 Business Stakeholder Meetings (mine, mill, small business, Town, Area H and SOHC) organized by Brad and held on August 27 and September 19. Brad explained about the sick leave policy at the mine and the mill where employees have to go to the doctors to get a note when they are sick and also when they are going back to work. Both Dr. Munro and Dr. Black had expressed their concerns about these extra patients who sometimes would go to the ER to get this note. Both the mine and the mill have now changed their doctor sick policy. IH will look into their policy as well and the managers at the hospital will be able to use their discretion. Other businesses will also have to be approached about their sick leave policy. Brad also mentioned the negative comments about the doctors on the P and A Facebook Issues which were very upsetting especially to one of the doctors.

7. NPs and PAs: We discussed the pros and cons of Nurse Practitioner versus Physician Assistants. Both Ontario and Manitoba use PAs. Right now PAs are not recognized in BC, however BCMA is in favour of them.

In Ontario, salaries are paid by the doctors, hospitals, and sometimes through government grants, in Manitoba, PAs are paid by Regional Health Authorities. Under the overall supervision of a physician, PAs take histories, conduct physical examinations, order and interpret tests, diagnose and treat illnesses, counsel on preventive health care and may assist in surgery. A PA's practice may also include education, research and administration.

Evidence shows that PAs help to improve access to health services and overall quality of care. The introduction of PAs is designed to help reduce wait times and help ensure that the right care is provided by the right provider at the right time. Both the Canadian and the Ontario Medical Associations have endorsed and support the development of the PA profession.

Nienke has been in contact with the Canadian Association of Physician Assistants and they would be more than willing to provide resources and support.

8. PGH Vacancies: Patti made the point that she talked to nurses who had applied to Princeton but since they would not be given a full time job, would not move here. The question is if it is really cost effective for IH?

9. Ed approached **Connect Hearing in Penticton** to find out if they'd be interested in setting up a 'satellite' clinic in Princeton. They have portable equipment and just need space. Ed phoned Lynn Pelly who has agreed to make a room available and take appointments through Community Services, at least for the beginning until it has been shown that it is lucrative enough for Connect Hearing. Mike Whitney of Connect Hearing has sent a proposal to his superiors asking for approval.

10. Telehealth: Diane Sterne sent us an email asking if we thought it would be possible if she and her husband were able to find a GP who is connected through telehealth, to use his/her services through the PGH. It was felt that this could work since everything is set up already and our telehealth at the moment is underutilized.

11. AGM: The date for our next AGM was set for November 5 @7:00, Riverside Community Centre.

Actions:

- full time positions for nurses
- Telehealth for GPs
- PAs
- continue to look into the possibility of panel managers

Meeting was adjourned at 10:00