

January 6 @7:00

Residence of Brad and June Hope

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

Absent: Bill Day, Lynn Wells

Guests: Rob Miller, Frank Armitage , Kim Maynard, Bob Coyne

1. Agenda

- Minutes from the last meeting
- Financial report
- Rob Miller presentation
- Music and Memory program at Ridgewood - Doug Rebagliati donation
- Review of SOHC Action Plan - discussion
- Submission to the BC Select Standing Committee on Health - discussion
- New items

The meeting was called to order at 7:05

2. Minutes from the December 3 meeting were accepted.

3. Finances: we had \$ 295.08 in our account. Together with the donation from Doug Rebagliati SOHC now has \$2,242.48 in the account. Accepted.

4. Guests: Ed Staples thanked everyone for attending, for their support in the past and ongoing support in the future. He gave a short history of SOHC: the 2013 Community Consultation and Report, followed by the Action Plan which IH used for the Steering Committee's Action Frame Work.

Frank Armitage raised the point that there is confusion among some Princeton councilors as to the merit of having two groups. Ed explained that there is an overlap, our Action Plan is almost identical to that of the Steering Committee. However there are many things in SOHC's Action Plan that are not part of the Steering Committee. As an example Staples mentioned the Connect Hearing coming to Princeton on a trial basis to offer free hearing consultations to residents. Since hearing clinics are not part of public health, the Steering Committee felt that this would not be part of their mandate, and suggested that SOHC would take that on.

There are many other programs such as Artists for Life, Music and Memory that could be taken on by SOHC.

It was also pointed out that through social media SOHC may have a better sense of what is going on in Princeton and Area. As well, SOHC has outside

connections with health care organizations, grassroots as well as professional organizations and SOHC is working on a provincial and federal level to improve health care in rural areas.

5. Rob Miller presentation.

Brad Hope introduced Rob Miller and talked about his past experience as a fire chief, his current position as chief of Hayes Creek and how he has been instrumental in establishing a first response system at Osprey Lake and Erris.

Following is some of the information Miller shared:

- most 911 calls are medical distress calls, fire represent only 5% of the calls
- when someone calls 911, the call gets answered by one person while a second person in the call centre listens in, gives information to his/her colleague, but does not interact with the caller. The call centre will have all the information such as address, past history, criminal record etc. on the computer, but will still ask questions such as house address, symptoms etc.
- Princeton has two ambulances but it does happen that both are in use and out of town in which case an ambulance from Penticton or Kelowna has to be dispatched. This means that instead of reaching the Penticton hospital in 45 minutes, it will take at least 90 minutes or more, depending on where the patient is.
- If one of our ambulances is in Penticton, it may be sent to Osoyoos instead of being sent straight back to Princeton.
- Medication for blood clots can not be given in the Princeton hospital, this has to happen in Penticton where a patient can get analyzed. Without the proper analysis, blood clot medication could kill a patient.
- Princeton has two ambulance responders. One is full time with a wage of \$11 per hour, the second person gets \$2 per hour. If the ambulance gets called out, they both will get full pay.
- Miller explained about the protocol that is followed by first responders and we were shown the logbook where every incident is recorded. A first responder report gets filled out. This report stays with the patient so the doctor will be able to see the history.
- Osprey Lake has 20 people trained as first responders, while Erris has 12 trained people. All first responders will hear the call and usually everyone gets sent since it is good training.
- First responders can not:
 - call in a helicopter
 - transport a patient to the hospital (except as a private person)
 - cancel an ambulance (only the patient or his/her family can cancel the ambulance, using the same phone as the distress call has been made on

- tell the ambulance which hospital they should go to (only the patient or family can do this)
- According to Miller it does not cost a lot of money to increase survival rate in rural areas; early intervention is very important, first responders will be able to stabilize a patient and give oxygen within the 'golden hour'.
He suggested that Princeton, Tulameen and Hedley make arrangements to train people in advanced life support and then ask IH if these trained people could go out to the scene if there are no ambulances available. (This would only cost \$5 more per hour.) (check) The fire department can apply for lottery money to pay for the training. The cost of the course is \$150, training takes two or five days. If Princeton had trained first responders, Kamloops would call the ambulance first, if there was no ambulance available, they would then call the first responders.
- The province does not pay for first responders, consequently the town would have to cover the costs, however it is possible to receive money from gaming (lottery). Bob Coyne mentioned that in the early 90s Princeton looked into training for first responders but decided against it because of costs.
- Most larger towns have paid for the training of first responders, small towns generally do not provide this service.

6. **Music and Memory**; Judy moved that we fund this course for a maximum of US \$1000. Seconded by Nienke. Accepted.

7. **SOHC Action Plan**; since our action plan is 2 years old and has never been updated, the Executive (and guests) were asked to
- write down which items they felt need to stay
 - delete items that were no longer of value
 - add one (or more) items that are missing

The changes will be discussed at our next meeting.

The Executive was also asked to start thinking about which items on the Action Plan they would feel comfortable in taking on.

8. **Next Meeting**; (first Tuesday of the month) will be February 3. Location to be announced.

Actions

- Thank You letter to Doug Rebagliati (Nienke)
- Update Action Plan (Ed)