

Princeton Healthcare Community Consultation
Action Plan

Healthcare Issue or Idea	Action	Implementation	Responsibility
1. Physician shortage (“on call” physician shortage)	<ul style="list-style-type: none"> continue recruitment campaign to hire doctors for Princeton work in cooperation with IHA, RDOS and Town to attract and retain doctors to Princeton 	<ul style="list-style-type: none"> renovate existing clinic at PGH to efficiently accommodate four physicians and one nurse practitioner work with IHA to develop contracts that provide “bridge” financing for new doctors to the community 	<ul style="list-style-type: none"> Susan Brown (IHA), Marilyn Harkness (Town), Brad Hope (RDOS)
2. ER closures	<ul style="list-style-type: none"> contract a minimum of four doctors with contractual obligations to do “on call” duty increase NP scope of practice to include ER duty 	<ul style="list-style-type: none"> work with Town of Princeton, RDOS, and IHA to actively recruit doctors to establish a practice in Princeton survey Princeton doctors to determine effective ways to retain their services for longer periods work with IHA and BCMA to change rules regarding NP scope of practice see #1. 	<ul style="list-style-type: none"> Susan Brown (IHA), Marilyn Harkness (Town), Brad Hope (RDOS) Dr. Eva Idanwekhai
3. Outside administration - unclear responsibilities & lack of accountability	<ul style="list-style-type: none"> establish community healthcare council with both advisory and decision making responsibilities 	<ul style="list-style-type: none"> research past efforts and present successful models work with Town of Princeton, Area H, and IHA to establish a framework for the CHC, to include organization, roles, and responsibilities establish an ongoing assessment mechanism to determine the effectiveness of the CHC and to provide for improvement to the model over time 	<ul style="list-style-type: none"> Susan Brown (IHA), Marilyn Harkness (Town), Brad Hope (RDOS) Dr. Eva Idanwekhai
4. Traveling distance for basic health services, e.g. x-rays, blood glucose monitoring, non stress tests	<ul style="list-style-type: none"> inform residents of available services provide a wider range of basic health services within the community increase visiting specialist time, addressing specific community needs provide TeleHealth services at PGH 	<ul style="list-style-type: none"> prepare and distribute health services information brochure to residents. make it easier to travel to services not available locally. work with local health professionals and IHA to identify services that should be added at the local level. 	<ul style="list-style-type: none"> Ed Staples and (brochure); Brad Hope & Lynn Pelly (transportation); Cherie Whittaker & Susan Brown (specialist services, TeleHealth)

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5. Limitations on Nurse Practitioner scope of practice	<ul style="list-style-type: none"> increase NP scope of practice to include ER duty 	<ul style="list-style-type: none"> work with BCMA and College of Physicians and Surgeons (others?) to increase NP scope of practice 	<ul style="list-style-type: none"> IHA (?) Janice Perrino (Hospital Board Chair)
6. Shortage of healthcare professionals - difficult recruiting	see #1 Physician shortage	see #1	see #1
7. Under-utilization of the hospital	<ul style="list-style-type: none"> recommendations from IH internal consultation 	<ul style="list-style-type: none"> renovation of existing facilities encourage all health care components to operate out of PGH/Princeton Health Centre 	Susan Brown, Cherie Whittaker (IHA) Marilyn Harkness (Town) Brad Hope (RDOS)
8. Insufficient health promotion/ wellness programs	<ul style="list-style-type: none"> develop brochure to inform public about available programs consult with Community Integrated Health Services, IHA work with the Okanagan Similkameen Health Living Coalition to enhance existing programs and develop new ones 	<ul style="list-style-type: none"> distribute brochure to public promote healthy life styles through public education organize and administer programs aimed at developing healthy living in our community 	Dr. Gerry Karr (OSHLC) Betty Brown (IHA) Ed Staples (SOHC) Brad Hope (RDOS) Dr. Eva Idanwekhai
9. Effect of healthcare downsizing on rural economy	<ul style="list-style-type: none"> develop a campaign to promote Princeton as a “healthy place to do business” work with SVPS, Chamber of Commerce, the Tourism Advisory Council (SVPS), the Town, and RDOS to present the community in an accurate and positive light 	<ul style="list-style-type: none"> establish a working group to develop promotional ideas for the Town of Princeton and Area H implement ideas 	<ul style="list-style-type: none"> Town of Princeton RDOS Chamber of Commerce TAC SVPS SOHC
10. Emergency Medical Services (EMS) Issues	<ul style="list-style-type: none"> upgrade paramedic levels conduct research to determine efficiencies and adequacies in EMS services 	<ul style="list-style-type: none"> establish a working group to develop an improvement strategy for EMS implement recommendations stemming from research 	Rob Miller (Osprey Lake) Brent Hobbs (IHA) Spencer Coyne (SOHC)

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11. Lack of mental health services	<ul style="list-style-type: none"> consult with Public Health Office and Community Services to determine available services and areas needing increases obtain statistically accurate information on present and future needs 	<ul style="list-style-type: none"> advocate for improved funding at the provincial ministerial level expand and improve services where needed 	June Hope (SOHC) Joseph Savage (SOK Mental Health Manager) Lynn Pelly (PCS)
12. Lack of knowledge of available services	<ul style="list-style-type: none"> provide information to community on available services 	<ul style="list-style-type: none"> develop and distribute information brochure 	Ed Staples and PSS staff and students (brochure)
13. Poor continuity of care	<ul style="list-style-type: none"> research what is needed in this area determine what is meant by “continuity of care” 	<ul style="list-style-type: none"> improve continuity of care as needed 	IHA Princeton medical practitioners
14. Maternity care	<ul style="list-style-type: none"> research present pre-natal and post-natal services available determine areas of improvement, e.g. stress testing capabilities 	<ul style="list-style-type: none"> educate the public on services presently available through PGH; through Penticton Regional Hospital provide information and rationale for lack of full obstetric services 	Spencer Coyne Ed Staples Beatrice Bibby (Public Health)
15. Lack of resources for community services	<ul style="list-style-type: none"> identify present resources and determine upgrades and improvements needed 	<ul style="list-style-type: none"> increase/improve resources if needed 	Lynn Pelly Nienke Klaver
16. Limited walk-in clinic hours	<ul style="list-style-type: none"> determine the extent of the limitations 	<ul style="list-style-type: none"> increase/improve walk-in clinic resources if needed 	Nienke Klaver
17. Lack of patient education, e.g. health promotion, chronic illness	see #8,11, & 12.		
18. Limitations on paramedic scope of practice	<ul style="list-style-type: none"> determine the extent of the limitations 	<ul style="list-style-type: none"> increase/improve resources if needed 	Ed Staples Rob Miller
19. Transportation to and from services after an acute event	<ul style="list-style-type: none"> determine the extent of this problem research needed 	<ul style="list-style-type: none"> include information in brochure improve bus services to include Kelowna 	Brad Hope

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20. Difficult road conditions in winter	<ul style="list-style-type: none"> provide improved bus services where possible 		
21. Long waits in ER	<ul style="list-style-type: none"> research needed to determine extent of this problem provide patients with appropriate assessment tools establish Healthcare Council 	<ul style="list-style-type: none"> make improvements as needed work with healthcare professionals to make necessary improvements healthcare model becomes accountable to the Council 	IHA Town RDOS
22. Aging equipment - failures	<ul style="list-style-type: none"> determine extent of equipment failures prioritize needs; set replacement schedule identify equipment requirements 	<ul style="list-style-type: none"> start community fund raising campaign to purchase needed equipment work with IHA Capital Equipment Department to monitor equipment and identify replacement needs 	<ul style="list-style-type: none"> Ed Staples Cherie Whittaker Susan Brown Janice Perrino Hospital Auxiliary rep
23. Triage in ER	<ul style="list-style-type: none"> research needed to provide evidence of problem 	<ul style="list-style-type: none"> work with healthcare professionals to improve triage 	IHA
24. Lack of privacy for healthcare providers	<ul style="list-style-type: none"> research what is needed in this area 	<ul style="list-style-type: none"> work with healthcare providers to tackle this problem 	Dr. Idanwekhai
25. Lack of specialist services	see #4.		
26. EMS not always timely	<ul style="list-style-type: none"> provide information to community, i.e. call 911 see #10. 	<ul style="list-style-type: none"> work with EMS staff to improve response time 	Rob Miller Spencer Coyne
27. Penticton Regional Hospital over capacity	<ul style="list-style-type: none"> advocate for funding of upgraded facilities at PRH 	<ul style="list-style-type: none"> work with Janice Perrino and Hospital Board to provide assistance with their campaign 	Nienke Klaver Janice Perrino
28. Demands placed on healthcare from resource industry, e.g. mine, mill	<ul style="list-style-type: none"> maintain contact with Business Stakeholders Group research specific industry needs and shortfalls 	<ul style="list-style-type: none"> work with Business Stakeholders Group to determine best ways to address their concerns 	Brad Hope Marilyn Harkness

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29. Outsourcing of food, laundry - quality of these services	<ul style="list-style-type: none"> • work with Cherie Whittaker and hospital staff to determine most effective and efficient provision of service in this area 	<ul style="list-style-type: none"> • work with Val Tregillus and consultation committee to influence model improvement • provide accurate information regarding services provided locally • insource services wherever possible 	Ed Staples Spencer Coyne
30. Lack of standardization for EMS protocols or evacuation protocols	<ul style="list-style-type: none"> • research what is needed in this area 	<ul style="list-style-type: none"> • work with EMS staff and administration to standardize protocols 	Rob Miller Spencer Coyne
31. Inability to find family physician	<ul style="list-style-type: none"> • determine extent of problem 	<ul style="list-style-type: none"> • provide information to public in Healthcare Services Brochure 	Ed Staples