

## **Rural Sustainability meeting - MINUTES**

October 25, 2016. 3:30 to 5:00 pm

**SOS Health Centre, Keremeos** 

Attendees: Dr. Peter Entwistle (Chief of Staff – SOGH); Dr. Yves Thomas (Family Physician – Oliver); Dr. Marina Louw (Family Physician – Keremeos); Petra Veintimilla (Councillor, Town of Oliver); Sue McKortoff (Mayor, Town of Osoyoos); Manfred Bauer (Mayor, Village of Keremeos); Walter Despot (Chair – SOS Medical Foundation); Keith Olsen (SOHC Princeton and Princeton Healthcare Steering Committee); Susan Brown (IH – CHIS Administrator SOS); Angel McDonald (Nurse Practitioner, Okanagan Nation Alliance); Aarin Frigon (Project Lead, SOS DoFP); Sheila Johnstone (Project Coordinator, SOS DoFP)

By Teleconference: Dr. Curtis Bell (IH – Executive Director Community & Residential Care); Karen Reader (Unit Chief -BC Ambulance Service, Princeton);

Regrets: Dr. Tim Van Der Heide (Family Physician – Princeton); George Bush (RDOS – Area B); Shauna Fox (Home 4 Health Care Coordinator – Upper Similkameen Indian Band); Ed Staples (SOHC, Princeton); Nienke Klaver (SOHC, Princeton); Jackie McPherson (Health Services Manager – OIB); Sandra Shaw (Community Health Nurse – OIB); Dr. Madia Smallwood (Family Physician – Oliver); Marieze Tarr (Board Chair -- School District 53); Eliza Terbasket (Health Administration – Lower Similkameen Indian Band); Dr. Harsh Hundal (IH – Community Medical Director); Deb Runge (IH – Acute Health Service Director)

Topic		Action
ADMINIS	STRATION	
• 7	The agenda was accepted as presented.	
t	The minutes of September 22 were accepted with one revision: The statement that Osoyoos is also getting community paramedics should be revised to read Keremeos.	
PREVIOL	JS MEETING FOLLOW UP	
First Pra	ctitioner Collective Event 'Get Connected'	
• 7	<ul> <li>The event was very successful.</li> <li>The physicians were updated on the project during the business meeting.</li> <li>The cross-talk the event was designed to facilitate took place during both the business meeting and the social.</li> </ul>	
• 1	<ul> <li>17 physicians and one resident attended the event</li> <li>15 (62.5%) local physicians with SOS Rural Corridor family practices attended</li> <li>2 locums and 1 resident</li> <li>5 physicians (local and locums) who had accepted the invitation were unable to attend</li> </ul>	
• 1	13 spouses and partners and 24 children and teens also attended	
	Aarin showed the draft proof of the newsletter that will go out to physicians and will be shared with the JSC.	
• F	Four more of these events will take place during the life of the project.	
Meeting	with the Minister of Health	
	Petra Veintimilla presented to Minister Terry Lake with support from Sue McKortoff and others.	
• 1	The presentation was to request government facilitation of EMR integration.  O Petra spoke with Dr. Entwistle and IHA Executive Medical Director and Chief Information Officer Dr. Douglas Kingsford to help prepare.	



Topic		Action
<ul> <li>The meeting w of the day.</li> </ul>	rent well and Minister Lake was engaged even though it was the end	
	inister seemed keen on using this area as a pilot project. g access permission from patients was seen as a privacy issue.	
	ister Lake followed up with Petra within a week that the Ministry with the concept.	
BC Dividends Grant an	d UNBC Healthcare Traveling Roadshow	
The UNBC Hea options for rur	Ithcare Traveling Roadshow showcases healthcare careers as al students.	
to our area.	r contacted Dr. Sean Maurice at UNBC about bringing the roadshow	Manfred will speak with Linda on
	adshow is completely booked out for the next year and are at ty. Our area is on a list for 2018.	Friday, Oct 28
1	osed speaking to MLA Linda Larson, who sits on the select standing health to see if we can get a similar roadshow group to travel out of	
REGIONAL UPDATES		
Community Paramedic	cs	
The communit	y paramedic rollout is in the second stage.	
and then conno	Karen Reader and Susan Brown are an update meeting on Princeton ecting in Keremeos. ting with Carl Meadows and Deb Runge and Sue McKortoff will take n about a week.	
	ould be hired by February 2017. Taking training into account, the an October 2017 start.	
Karen reported     Keremeos staff	d positive responses and good feelings for the initiative from f.	
Okanagan Correctiona	l Centre (OCC)	
	community coalition members should take a tour of the OCC. She ested members to Frank Armitage.	
while nursing s o Doctor	eported that all systems are in place in the correctional centre, but staff is in place they are still seeking doctors.  The seed not be full time. Medical care in the OCC works like a walk-in or the prisoners.	
work at the OC o A discu	ct us regionally is if part-time physicians are doing only a few hours CC causing emergency patients to fall back on the community.  Ussion took place on patient transport engaging RCMP officers if the er is staying in custody. This is another potential regional issue.	
The Crossing		
_	as a new operator called Pacific Community Resources Society based in Vancouver with satellite offices in the Okanagan.	

## **Topic** Action Manfred has spoken to the manager. He is pleased with PCRS and thinks they will do a good job. The planned opening is in January 2017. The Community Coalition has sent information to both parties, but has had no response. We will revisit linkage between The Crossing and the prison at a later date. **Keremeos Community Worker** Aarin is meeting with Princeton Family Social Services and Eileen Oliver-Bauer, Administrator of the Lower Similkameen Social Services Society this week. The plan is for Sherry, the Princeton community worker, to hold the position in both Princeton and Keremeos for about six months with the plan to train up a Keremeos local to take over. **General Access to Med Access EMRs** Aarin is now in discussion on pricing with TELUS. There is not really a solution in place for general access. However, there is pricing on mobile access at \$179 per physician per month. This is too high. Locums can currently sign in to a clinic EMR without an extra charge and Aarin is looking at the same kind of solution for general access in the rural corridor. Aarin anticipates further pricing information next week. **Introducing Nurse Practitioner Angel McDonald** Angel McDonald job shares with Julia Walker. Julia is .6 FTE and Angel is .4. Angel works for the Lower Similkameen Band and alternates between the Upper Similkameen Band and Penticton Indian Band on Thursdays. Until February she is also working with the Okanagan Indian Band. Angel can diagnose, prescribe and order diagnostic tests within her comfort zone. She also does lots of health teaching. Her work benefits from her ability to spend up to 45 minutes or an hour with a patient. **Princeton Seminars** Keith Olsen detailed Support our Healthcare (SOHC) in Princeton's one-day and evening seminars. The first seminar is detailed two-hour video presentation on Lyme disease and takes place on November 22. o Keith is contacting Weyerhaeuser and local ranchers with an interest in the tick problem for funding. **Princeton Pain Self-Management Program** SOHC are also working with UVic on presentation of the pain self-management

program.

The UVic program is two hours a week over a 6 week program.

Topic		Action
•	In Keremeos, one co-presenter was from Keremeos and the other from Summerland. Local physicians identified their patients who would benefit from the program.	
•	The main challenge is finding the volunteers to teach.	
	<ul> <li>UVic uses the train-the-trainer approach.</li> </ul>	
•	Co-leaders are local. There are trained leaders in Keremeos, Oliver and Princeton (Keith). The challenge is scheduling two to work together.	Keith will give Aarin the
•	Another challenge is a place to present the program. For example, there can be costs with a community centre.  o IHA supports presentation. o Sue and Petra volunteered to find a place.	contact information on this program.
•	Aarin will coordinate with Keith. From there Aarin will call on the community members to provide a venue.	
•	The Arthritis Society is interested in presenting clinics in Princeton. There has also been some interest from the Cancer Society and an acupuncturist.	
•	The group expressed an interest in monitoring how many attend the clinics and seminars in Princeton, and in tracking the process for sustainability.	
TERMS OF REFERENCE		
•	A few edits were suggested to the TOR, e.g. adding Interior Health to the listed groups.	
•	A discussion took place on whether the TOR referenced too broad a mandate.	
•	A discussion took place on educating your community on issues specific to your community and the best use of resources.  O Making sure people were aware of all the resources in their community (e.g. don't always look to a physician) was seen as very important, as was education on what people can do for themselves.  O A critical piece of education is about understanding the system better.  An example of the learning that happened in Princeton around the system was given: IHA does not hire physicians and tell them where to go.	The committee
Chair o	f the Community Coalition	will review the
•	A suggestion was made to have someone other than Aarin chair to develop coalition sustainability.	chair next year.  Aarin will
Coalitie	on Membership	reach out to
•	A discussion took place about who else should be coalition members.	the Indian Bands.
•	Petra and Sue suggested adding someone else from the school board as an alternate for Marieze Tarr. Our standing meetings are Tuesday afternoons, and this may be a conflict for Marieze.  There are two school board members who live in Keremeos and it might be easier for those people to attend. Agrin will reach out to those members.	Aarin will talk to the Keremeos- based
	for these people to attend. Aarin will reach out to these members.	members.

Topic		Action
	Petra will reach out to Denise Blashko, ED at the South Okanagan Chamber of Commerce.	Petra will reach out to
•	Sue and Dr. Alan Ruddiman meet in Osoyoos next week. Sue will see if chamber and tourism participation can be added to the agenda.  A discussion of whether business people can make it during the week took place. The suggestion was made that coalition members add themselves to the agenda at Tourism/Chamber meetings with an invitation to participate.  Keith will check for interest with the Princeton Chamber of Commerce.	Denise. Sue will discuss with Alan. Keith will discuss in
Repres	entation from Princeton Council	Princeton.
•	Aarin spoke to steering committee in Princeton last week.	
•	The council reps requested regular updates and are aware that they are welcome to join the committee.	
Confid	entiality	
•	Aarin drew attention to the importance of keeping certain items that come out of these meetings confidential.	
•	Members were asked to ensure that they explicitly state anything that should not be publicized up front. It will not then go into the minutes.	
Mileag	e	
•	Mileage will be picked up by the project if this is not being covered by your group.	
Comm	unications	
•	Aarin requested that members try to send alternate representation if they cannot attend and bring information back to your groups.  Aarin will provide information that can be communicated out in roughly monthly updates.  The group will spend 15 minutes per meeting on identifying items for communication.	Sue offered to bring forward info to RDOS mayors and regional district reps
Minute	es	
•	Walter Despot noted that another group he participates in circulate minutes within the week.	Sheila will circulate initial
•	A discussion on circulating minutes faster took place.	minutes to just
•	Timing of the circulation of minutes will be revisited once Sheila is no longer supporting the local residency program.	those who attended
ACTIO	N PLAN	
•	<ul> <li>The plan draft action plan circulated contained ideas. The review was to determine an approach (i.e. attempt all or some items) and an initial project.</li> <li>Out-of-hours physician coverage was added to the action plan.</li> <li>The community worker was added to the action plan.</li> <li>Finding residences and producing material for recruitment and retention was added to the action plan.</li> </ul>	Aarin will revise the draft and send out again

Topic		Action
•	A request was made to present on Lyme disease in the next 4-5 months, or at least add it to the list. This was noted as an addition to community education.	
•	Chronic Pain was selected as the first action plan project.	
•	The UVic Pain Self-Management program discussed by Keith appears earlier in these minutes.	
Educat	ion re Chronic Pain	Aarin will bring
•	An aspect of education is a consistent way for practitioners to address chronic pain throughout the rural corridor (e.g. prescribing for opiates).  Aarin will bring forward consistent methodology at the next physician collective meeting.  Aarin will present chronic pain as the initial project at the next physician collective	forward at the next physician meeting
	meeting.	
•	Noted that Pain BC provides pain self-management training, seminars and online courses.	
•	The group supported community education around chronic pain. They determined that community education should be part of every project.  The group was requested to consider community consultation. There is a model that was used in Princeton which can be shared and brought forward to all communities.	
Educat	ion on Substance Use Committee	
Luucat		
•	<ul> <li>The Substance Use committee has been working for 9 years in Keremeos.</li> <li>The initial driver was homelessness and crystal meth drug addiction (crystal meth).</li> <li>An allied group delivered the substance use education course.</li> <li>Manfred noted that the Solicitor General created handouts on crystal meth and translated them into Punjabi.</li> </ul>	
•	The Community Coalition discussed sharing resources with the Substance Use committee. A possible approach was addressing pain and addiction together.	Aarin will connect with
•	Aarin will connect with Pathways in Penticton on their outreach to the rural communities.	Pathways
EMR		
•	<ul> <li>Aarin is working to have Dr. Douglas Kingsford present at an information meeting for the local physicians on integration of EMRs via IHA.</li> <li>This project will support IHA by providing sessional funding for physicians around EMR integration.</li> <li>The target date is November, and this group is welcome to attend.</li> </ul>	
•	As discussed earlier Aarin is also working on general access to Med Access in the rural corridor.	
•	Aarin and Sheila are working on the privacy impact assessment and they will share the impact assessment with physicians and the community group.	
Admin	istrative Help for Palliative Care Rota	
•	This rota provides access to physicians so that the patient does not go to ER.	

Topic		Action
0	The rota could extend from Oliver/Osoyoos to Keremeos and Princeton.	
	twistle requested the assistance of this group with the palliative care rota. oup agreed to provide assistance.	
COMMUNICA	TION POINTS	
<ul> <li>A sepa</li> </ul>	rate document will be provided.	
0	Community worker spread to Keremeos	
0	Successful physician 'Get Connected' event	
0	First big project will be chronic pain/addictions	
0	Update on EMR interoperability	
0	A pared-down list of who is attending	
0	Solidifying First Nations representation	
	NBC traveling roadshow will not be addressed until Manfred reports back on oversation with MLA Larson.	
NEXT MEETING	3	
4 <sup>th</sup> Tuesday of	the month 3-5pm.at SOS Health Centre in Keremeos	
• Noven	nber 22 <sup>nd</sup>	