

RURAL HEALTH MATTERS

British Columbia Rural Health Network

October - November, 2019

Dedicated to the development of a health services system that improves and sustains the health and well-being of residents of rural communities across British Columbia as a model of excellence and innovation in rural health care.



Letter from the President

Dear
BCRHN Members and Supporters

Greetings from the beautiful Tulameen River valley. One of things I love about where I live is that we have four seasons of even length each with their own special character. As we move into Autumn, I hope each of you, wherever you live, will take time in your busy schedules to appreciate this wonderful province we call home.

Recently, the BCRHN Board of Directors met in Sicamous to develop a strategic plan that will guide our actions for the coming year and beyond. After two days of very focused and concentrated discussion, we came to agreement on six broad tasks:

- Ensure evidence-based strategies
- Develop and implement a membership plan
- Perfect board development
- Support province-wide campaigns
- Grow our alliances
- Identify and secure multiple funding sources

For each of these areas a working group has been formed and over the next several months they will be meeting to begin work on these important tasks.

Our first Board of Directors retreat is a very important step in our efforts to provide focus and direction to our activities over the coming year. It's my hope that it will also serve as a guide for all future activity of the BC Rural Health Network.

To all our members and supporters who are dedicated to the improvement of health services in our communities, I want to thank you for being a part of this valuable work and I wish you success in all your endeavours.

All the best,

Ed Staples

The Rural Coordination Centre of BC generously granted funding for the BCRHN retreat, on Sept 14/15. Thank you RCCbc!

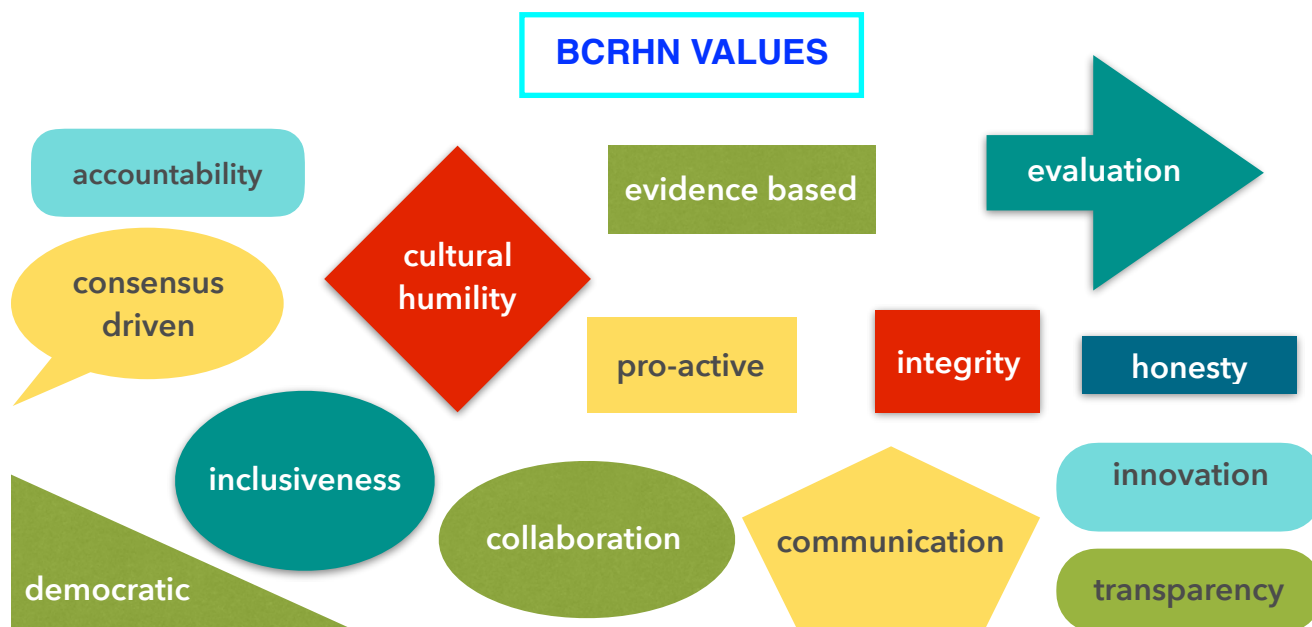


Comments from the Administrator

In August, 14 members of the BCRHN responded to a survey regarding their reasons for joining BCRHN and their local area priorities for improving the delivery health services in their community. Here are a few highlights:

- 1. Organizations and individuals have joined BCRHN in order to have a unified voice with their regional health authority and the Ministry of Health. Working together to improve rural health services is seen as critical for generating service improvements.**
- 2. The most critical health care gaps or needs:**
 - A. Adequate transportation**
 - B. Housing and poverty**
 - C. The current physician funding model**
 - D. A lack of residential beds.**
- 3. BCRHN was asked to give strong emphasis to these health care needs:**
 - A. Assist and lead in the improvement of transportation services**
 - B. Developing/improving rural area electronic infrastructure including tele-health.**

Curt Firestone



Member of the Month

NELSON - Community First Health Co-op

We mortals know that Wellness is a Mind, Body, and Soul journey. Through the shared values of co-operation, connectedness, compassion, education, inclusion, and kindness, community is engaged in serving wellness with Community First Health Co-op.

Community First Health Co-op is a not for profit co-op, incorporated in 2003 with a volunteer community board, now with membership of over 1500 community members across the full spectrum of the community. Creating community responses through the lens of the World Health Organization's Social Determinants For Good Health has provided unlimited possibilities and adventures to create more opportunities for wellness for all in our community. Social connection to others and community is a key determinant for good health. The Co-op's, Nelson and Area Wellness and Education Centre (Health Centre) has tracked over 70,000 (a conservative count), annual visits.

Programs provide outreach programs and services, educational sessions including multidisciplinary self-management chronic pain programs, drug awareness, addictions treatment and support, counselling, street outreach, multi-sector health promotion, home visits and or telehealth for those that are unable to come to the centre in communities across the Central Kootenay and Kootenay Boundary Regional Districts.

Accessibility, prevention and health promotion activity, client and family-centeredness and chronic disease management contribute to community enthusiasm and satisfaction.

Research has shown that Community Health Centres reduce hospital emergency room visits as compared to other models. The Nelson and Area Wellness and Education Centre, exceeds expectations in reducing emergency room visits.

Over 50 practitioners, several volunteer boards of partners and 17 volunteer community organizations work together to respond to emerging community wellness issues through support, education and services at the Wellness Centre and across Central Kootenay and Kootenay Boundary Regional Districts without additional financial burden on the participants.

In 2018 Community First Health Co-op received \$110,000 - available over three years- in transitional funding from the current Provincial government as part of their first step to invest in Community Health Centres.

Community First Health Co-op Health promotion is ongoing. With the consensus of community experiences, volunteers and practitioners increasing support for mental wellbeing and physical activity are underway. This year over 1.5 million minutes of activity in were collected by Community First Health Co-op, with over 500 events and activities and 1000 free pedometers enthusiastically taken by residents excited to join The Every Step Counts movement and conversation growing in our community while promoting community connections and inclusion.

You can learn more about our communities' quest for wellness at <http://healthco-op.ca> or Community First Health Co-op or just email us at cfhcoop@shaw.ca if you would like more information.

WHAT IS CULTURAL HUMILITY AND CULTURAL SAFETY?

On June 21, 2016, the First Nations Health Authority launched a campaign to support the advancement of cultural humility and cultural safety for First Nations and Aboriginal peoples in the British Columbia health system.

Cultural safety is an outcome based on respectful engagement that recognizes and strives to address power imbalances inherent in the healthcare system. It results in an environment free of racism and discrimination, where people feel safe when receiving health care.

Cultural humility is a process of self-reflection to understand personal and systemic biases and to develop and maintain respectful processes and relationships based on mutual trust. Cultural humility involves humbly acknowledging oneself as a learner when it comes to understanding another's experience. Learn more at:

<http://www.fnha.ca/wellness/cultural-humility>

The policy statement that FNHA provides can be found on our website at <https://bcrhn.files.wordpress.com/2019/11/guidebook-indigenous-engagement-and-cultural-safety-v1.0.pdf>

Individual Board members of the BC Rural Health Network taking the pledge for Cultural Safety and Humility, September 14/15, 2019.

From left to right: Elaine Storey, Curt Firestone, Colin Moss, James Leslie, Nienke Klaver, Pam Beech



Your Board of Directors

Colin Moss - New Denver
Connie Kaweesi - Fort St. John
Ed Staples - (President) Princeton
Elaine Storey - (Secretary) Fraser Lake
Johanna Trimble - Roberts Creek
Jude Kornelsen - Centre for Rural Health Research UBC
Pam Beech - (VP) Sicamous
Pegasis McGauley - Nelson
Stuart Johnson - Rural Coordination Centre of BC
Sue McCrae - (Treasurer) Blind Bay
Curt Firestone - (Administrator) Salt Spring Island

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