

## CENTRAL COAST REGIONAL HOSPITAL DISTRICT

*"Our Vision for the Central Coast Regional District is an inclusive, resilient and sustainable group of communities thriving within a locally influenced, safe, healthy and natural environment"*

### REGIONAL HOSPITAL DISTRICT REGULAR BOARD MEETING MINUTES 13 November 2014

In Attendance:	Electoral Area A	Chair Cathi McCullagh
	Electoral Area B	Director Reg Moody-Humchitt
	Electoral Area C	Director Brian Lande
	Electoral Area D	Director Ivan Tallio
	Electoral Area E	Absent
	CAO	Darla Blake
	Recording Secretary	Cheryl Waugh
	Local Gov't Intern	Krista Ediger

(A)

1. **CALL TO ORDER**
  - (a) Opening Reflection/Prayer

Chair McCullagh called the meeting to order at 11:35 a.m.

#### **ADOPTION OF AGENDA**

(a) Introduction of any late items

**14-11-01H** M/S Directors Tallio/Moody-Humchitt that the agenda be adopted as presented.

**CARRIED**

#### **(B) ADOPTION OF MINUTES**

(a) 09 October 2014

**14-11-02H** M/S Directors Tallio/Moody-Humchitt that the minutes of the October 9, 2014 meeting be adopted as presented.

**CARRIED**



**(C) OPERATIONAL AND POLICY MATTERS**

**(a) Select Standing Committee on Health**

At the UBCM Conference the CAO attended a pre-conference session on rural and remote health. Notes from that session are included in the agenda.

The pre-conference meeting on rural and remote health was also discussed and there was a request for submissions to the Select Standing Committee on Health, on how to ensure quality and sustainability of the BC health care system.

The deadline for submissions has been extended from 31 October 2014 to 31 December 2014. At the last CCRHD meeting the Board was asked to think about what they would like to include in any submission to the strategy.

The CAO is now seeking clarification from the CCRHD Board on whether they wish to put forward a submission to the Select Standing Committee on Health and if so to have a discussion to consider and provide guidance to the CAO on how the Board's wishes to proceed.

**Recommendation** – That the Central Coast Regional Hospital District receives the information on the Select Standing Committee on Health,  
and

That the CCRHD Board agrees to provide the CAO with their comments no later than 5 December 2014, in order for the CAO to prepare the CCRHD Board's submission prior to 12 December 2014.

**OR**

That the Central Coast Regional Hospital District receives the information on the Select Standing Committee on Health,

and

That the CCRHD Board advises the CAO they do not wish to make a submission to the Select Standing Committee on Health.

Considerable discussion took place on the various concerns regarding health care in our region. Physician retention, the financial burden for mothers giving birth away from their

*The Mission of the Central Coast Regional District is to foster the sustainable socioeconomic and environmental well being of the Central Coast through the professional and efficient delivery of mandated regional and community services*

homes, the need for palliative care, as similar issues exist for those patients needing to go away from their communities for care. This can affect the quality and quantity of life.

Could midwifery be investigated as a support for local births? United States health care has a position in-between doctor and nurse-practitioner. This could be a good thing for rural communities as there is a certain level of care they can provide but they aren't allowed to practice in the Canadian system.

Right now in First Nations communities the government is planning to download health care to the community. This devolution process has problems and is doubtful to be an improvement for communities. Looking towards the future, these issues need to be put on the chart. If First Nations are going to be asked to take over health care for their communities, what impact is this going to have? There is a need to start bulleting here. Are the concerns of the local hospital board similar to those of community members? There is a need to have the conversation with the community to understand what they see happening.

There is concern for future health care as hospitals are struggling financially. If services are going to be reduced will this accelerate and see health care institutions closing down? In that case all health care will be sought outside and away from communities.

Seniors residences are needed more than the current long-term care in a hospital. Quality of life is reduced in those situations rather than in assisted living of some sort. More support required in the elder situation. Elder care models must be designed for our communities and not those of bigger centers as they won't work for us. It has to suit the community.

As an example the Sherbrooke Village Centre based in Saskatoon, Saskatchewan, was discussed, which is modelled on the Eden Alternative model, where the residents care and service is resident direct as opposed to resident centered. This means the residents themselves direct their own lives and staff support them in their choices. Using the Eden Alternative they can overcome boredom, loneliness and helplessness, improve thinking processes, too, as even people with dementia have an opinion. It was noted, there are such facilities in BC where this model is practiced. It defines a clear distinction to empower the residents to help them look after themselves to the best of their abilities but have assistance when needed. The model can be used in whether the person is in a care facility or in their own home. This keeps the population intact in the community and sustainability results.

The CAO will liaise with the CCRHD board chair further to craft a submission based on today's conversation.

**14-11-03H** M/S Directors Tallio/Lande that the Central Coast Regional Hospital District receives the information on the Select Standing Committee on Health, and

*The Mission of the Central Coast Regional District is to foster the sustainable socioeconomic and environmental well being of the Central Coast through the professional and efficient delivery of mandated regional and community services*

That the CCRHD Board agrees to provide the CAO with their comments no later than 5 December 2014, in order for the CAO to prepare the CCRHD Board's submission prior to 12 December 2014.

**CARRIED**

**(b) BC Transit – Draft 3 Year Budget Forecasts for Fiscal Years 2015/16, 2016/17 and 2017/18**

**14-11-04H** M/S Directors Lande/Tallio that the 3 Year Budget Forecasts for Fiscal Years 2015/16, 2016/17 and 2017/18 from BC Transit for the Bella Coola Transit System be accepted,

and

That the CCRD Chief Financial Officer incorporate the 3 Year Budget Forecasts for Fiscal Years 2015/16, 2016/17 and 2017/18 from BC Transit for the Bella Coola Transit System into the long term CCRHD Budgets.

**CARRIED**

**(D) ADJOURNMENT**

There being no further business, the meeting was adjourned at 12:07 p.m.

\_\_\_\_\_  
Chair

\_\_\_\_\_  
Corporate Officer