

**Minutes**  
**Mount Waddington Health Network Steering Committee**  
**27Feb13**  
**Regional District offices**

**Present**

Alyson Hagan-Johnson (Chair)	Nikki Shaw (Councillor, Port Hardy)
Shirley Ackland (Councillor, Port McNeill)	Christine Swain (VIHA Discovery Youth Addictions Services)
Kelly Amodeo (School District #85)	Heidi Soltau (Director, Area A (Sointula))
Val Eyford (representative, Port Alice)	Angelika Starr (Manager, VIHA Acute Care Services)
Greg Fletcher (CAO, Regional District of Mount Waddington)	Cathie Wilson (NI Crisis & Counselling Centre Society)
Gail Franklin (Co-ordinator, Mount Waddington Health Network)	Michele Dorsey (Youth Emergency Housing Co-ordinator, NI Community Services)
John Tidbury (Councillor, Port Hardy)	Wendy White (Councillor, Alert Bay)
Chris Parker (ED, NI Crisis & Counselling Centre Society)	

**1.0 Welcome and Introductions**

**2.0 Review Agenda**

Approval of agenda

**Motion:**

Accept the agenda.

**Carried.**

**3.0 Previous Minutes**

Approval of minutes of  
23 January 2013

**Motion:**

Accept the minutes of 23 January, 2013 as true and accurate.

**Carried.**

**4.0 Correspondence**

The following correspondence was circulated:

- E-mail communication from Sean Junglas:  
Extreme Weather Shelter Development Project Proposal - Port Hardy  
(withdrawing the proposal)
- E-mail communication from Shane Thomas:  
Addictions Services Planning Update  
(community-based detox pilot project)
- Application to the Vancouver Foundation for Research:  
By Drs S.Grzybowski, G.Avery, J. Kornelsen  
Sustainable Operative Care in Rural Communities:  
A Feasibility Study of Surgical Services in Northern Vancouver Island
- Regional District of Mount Waddington  
Volunteer Transportation - Para Transit Pilot Project

## 5.0 Reports

### 5.1 EXECUTIVE COMMITTEE REPORT

*Alyson Hagan-Johnson reporting*

#### ***Food security co-ordinator***

A contract with VIHA has been agreed, to fund a researcher/co-ordinator to assess food security needs and opportunities, and the feasibility of a regional food security hub. The job posting will be placed in local media and distributed through community networks.

#### ***Criteria for funding requests***

An ad hoc working group will meet on March 11 to discuss and develop criteria for funding requests made to the Health Network.

### 5.2 SENIORS & ELDERS BETTER LIVING ADVISORY COMMITTEE

*Alyson Hagan-Johnson reporting in the absence of Gail Neely.*

#### ***Committee elections***

Elections were held for committee officers at the February meeting.

All nominees were acclaimed, as follows: Gail Neely, chair; Sandra Waarne, co-chair; Helen Gurney, secretary.

Elder abuse and food security continue as the priority concerns of this group for the coming year.

#### ***Hospice***

Chris Parker was invited to remark on the volunteer hospice service being developed in this region. In addition to conducting volunteer training, NICCCS will set up a trainer-training program. Funds from the previous hospice program in this area will be transferred from the Campbell River Hospice Society to NICCCS. The hospice service will be part of NICCCS' volunteer management program, and will fall under the NICCCS insurance.

#### ***Motion:***

Accept the SEBLAC report.

***Carried.***

### 5.3 YOUTH EMERGENCY HOUSING ADVISORY COMMITTEE (YEHAC)

*Christine Swain reporting*

Christine introduced Michele Dorsey, the new co-ordinator of the Youth Shelter project.

Accept the SEBLAC  
report

Accept the YEHAC report

A Port McNeill family that is experienced in working with vulnerable people has offered their home as a safe house for youth involved with the program.

To provide credible data for this pilot project, a minimum of three months is required rather than the one month remaining in the official program plan. A three-month budget for under \$1200 has been prepared.

**Motion:**

Accept the YEHAC report.

**Carried.**

**5.4 HOUSING AND HOMELESSNESS COMMITTEE**

*Chris Parker reporting*

Accept the Housing and Homelessness report

The consultant's report of the regional survey of affordable housing issues is expected on March 20. It will be presented first to the Housing core committee; then the wider regional committee, followed by a public forum. Following the community conversation, community decisions will be brought to the Steering Committee for discussion. The consultant responsible for the survey will help the core H&H committee decide on its next steps with this information.

**Motion**

Accept the report of the Housing and Homelessness Committee.

**Carried.**

**5.5 ADDICTIONS SERVICES PLANNING COMMITTEE**

(Appended) Shirley Ackland reporting

**Community-based detox**

The Community-based Detox pilot is progressing as planned, and the first patient has been admitted. Alcohol-related problems only will be accepted in this pilot initiative, not drugs or dual diagnosis. A Nurse Practitioner is the admitting agent in consultation with medical referral. Staff for this project were trained through NICCCS and VIHA. The pilot was noted at this month's meeting of the Local Working Group on medical services stabilization.

**Supportive recovery housing**

The next meeting of the Cormorant Island Supportive Recovery Society will be on Friday, March 8. There is interest in constructing a new purpose-built house in Port McNeill.

Accept the ASPC report

### **Committee structure**

The Addictions committee is still sorting out its roles and responsibilities as Jani Urquhart withdraws from her work as its planning lead.

*Discussion:* The role of the Health Network co-ordinator in committee functions and project development was discussed. Overlap was noted in committee membership and the interests addressed by the committees.

### **Motion**

Accept report of the Addictions Services Planning Committee

**Carried.**

## **5.6 VIHA REPORT**

*Angelika Starr reporting in Alison Mitchell's absence*

### **Staff recruitment and retention**

Recruitment and retention continues to be an issue in this region. The local VIHA proposal for a Nurse Practitioner for Port McNeill is being worked on with the PM physician group to prepare for the submission to the Ministry. The Local Working Group on medical services stabilization is involved in creating a comprehensive survey to identify the factors involved.

Rehab services continue to experience the same difficulties. Physio/OT services have been restructured to provide both services in Port Hardy and Port McNeill. The therapist will be based geographically and travel as needed. Postings are on the VIHA website and therapists are urgently needed.

Accept the VIHA report

Prospects for physician recruitment are looking better than last month, as two CVs have been received and one additional doctor is considering whether to make an application.

The housing issue mentioned last month has not been resolved.

Accept the report of the Co-ordinator

The Red Cross loan cupboard is in dire straits. This service, operated from the Hardy Bay Seniors Centre, lends medical equipment such as wheelchairs, walkers, commodes, grab bars etc. for the short-term use of patients returning home. However, the items are not being returned. The stock is dwindling sharply because of these losses. Additionally, the person running the medical equipment loan service is a volunteer and is overworked. Other current volunteers are not in physical condition to take on more responsibilities. An article in last month's paper, pleading for volunteer help, has brought no responses.

The Local Working Group has received funds to plan an Integrated Primary Health Centre in Port Hardy. At its last meeting it heard a presentation on VIHA's capital funding procedures for this

project.

**Motion**

Accept the VIHA report.

**Carried.**

**5.7 CO-ORDINATOR'S REPORT**

(appended)

**Motion**

Accept the Co-ordinator's report

**Carried.**

Subsidizing carpool  
travel costs for  
committee meetings

**BREAK**

Reconvened 11.30 am

**6.0 Matters Arising from Previous Minutes**

(none)

**7.0 New Business**

**7.1 SUBSIDIZING CARPOOL TRAVEL COSTS FOR COMMITTEE MEETINGS**

**Motion**

That any person who drives more than one other person to an authorized Health Network committee meeting is entitled to be reimbursed for mileage at Regional District rates.

**Carried.**

Annually review the  
VIHA capital budget in  
June

**7.2 VIHA CAPITAL PLAN**

*Greg Fletcher presenting*

Accept the VIHA  
Capital Plan

The VIHA current capital budget includes a list of projects specifically related to this region. The Regional Hospital District has traditionally paid 40% of the funds in this budget. It is important that the RHD hear from the Steering Committee whether this list accurately reflects local priorities for VIHA. The RHD will send any budget proposed by VIHA to this group for its attention.

*Discussion:*

Capital items over \$5,000 that are not on the current capital list are not eligible to be purchased by VIHA. Therefore it is important to keep a running list (to which items may be added once a year, in September) to inform the Hospital Auxiliary of fundraising goals as the Auxiliary indicates

Accept committee budget allocations as amended

that it can take on another project. This list should be reviewed annually before budget additions are fixed in September.

*Conclusion: The Steering Committee will create a standing item on each June agenda, to review and put forward local capital needs for addition to the VIHA budget each September.*

**Motion:**

Accept the VIHA Capital Plan.

**Carried.**

**7.1 COMMITTEE BUDGETS**

The following amendments were made to the committee budgets as presented:

- Delete lines for participants' travel and carpooling expenses from all committee and public forum budgets
- Allow movement of funds within the committee categories.

**Motion:**

Accept the budget allocations as amended.

**Carried.**

Accept committee budgets as amended

**7.2 REGIONAL DISTRICT APPLICATION TO SUPPORT VOLUNTEER TRANSPORTATION NETWORK**

*Greg Fletcher presenting*

There is potential to expand the VTN service to include wheelchair pickup. One VTN lift van is currently available for dispatch to fill gaps in BC Transit service for mobility users. However, its priority access service is primarily for Cormorant Island & Sointula.

The Regional District perceives that a second van may be required to increase the availability of wheelchair lift service in other areas. The initial cost of insurance, at \$3500, is a hurdle for not-for-profit organizations. If a second van can be acquired by the community, the Regional District will request funds from the Health Network to cover the insurance.

*Conclusion:* The Steering Committee looks forward to a proposal from North Island Community Services.

**7.3 PUBLIC FORUM**

A public forum to discuss affordable housing will be held on Wednesday, April 24, 2013. Elections to the Steering Committee will also be held at that time.

The Steering Committee will meet on Wednesday, April 10 to discuss final planning of this event.

**Adjourned 12.30 pm.**

Public forum to be held April 24, 2013

