

Kaslo Community Forum: Healthcare

Tuesday May 11, 2010

“Kaslo cares about health care for all. We will not allow forced attrition to deteriorate the effective and proactive integrated primary health care centre we have, nor let it be slowly replaced with a two-tier system that introduces creeping privatization from this government. We will not vote for that. None of us”

What are the key healthcare issues for North Kootenay Lake?

Centralization.	Communication- no one to take concerns to.
No chair at table for stakeholders.	Misuse of administration money.
Universities are teaching that integration models are the best. IHA is regressive.	Unique demographics, but being treated with the same model as larger centres.
Continuity of care. Maintaining physicians.	Business model does not work for healthcare.
Reduced time with health care services due to cuts to staff hours.	Decreased health care despite increased need because of demographics.
No local autonomy.	Can physicians be community advocates?
Numerous managers who do not consult with staff.	Inefficient medical model means more emergency room admissions.
Home care/ assisted living.	Full time PHCN or nurse practitioner.
Transportation to medical appointment to Trail and Nelson.	One IHA Directors salary would pay for 6 frontline workers.
Need more services in Nelson.	More money to frontline, less to administration.
Rural isolation/ distance from critical emergency care.	It is critical that what has been working is not lost.

What should the Provincial Government do?

Decentralize.	Provide statistical details- distribution of funds.
Use social media to communicate and educate.	Education about healthcare & healthcare system.
We need autonomy with our healthcare dollars. Back to local health boards.	Administration closer to home/ smaller areas.
Return to the integrated, primary health centre model (put together in 2002).	Cuts in personnel need to be restored (public health nurse, primary care nursing).
Collaboration between IH and community (KAHA).	Better public transportation. Coordination of transportation with patient booking times.
Public health dollars should go to service providing, not Regional Health Authorities at large salaries.	Is it possible to show cost-efficiency working in our present model?