
Creative Planning Dialogue™

**Pre-planning session for Gabriola Island Primary Health Care
Public Engagement Initiative:**

**A Joint partnership for Gabriola Island Health Care Society,
Vancouver Island Health Authority, BC Ministry of Health
General Practitioners, (and the people of Gabriola Island)**

***Pre-Planning Session for Gabriola Island
Community Dialogue on Primary Health Care***

May 21st, 2008

Record of Proceedings

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Session Summary

To collaboratively develop the agenda for a one day public dialogue as part of an on-going dialogue on Primary Health Care on Gabriola Island.

Participants

Donald Butt, MD and Director of the Gabriola Island Health Care Society
Brenda Fowler, Gabriola Ambulance Society and Director of Gabriola Is. Health Care Society
Geoff Harding, MD
Daile Hoffmann, MD
Steve Jackson, Director, Gabriola Emergency Social Services
Jessica Plante, Founder and Manager - The Gathering Place
Kelly McQuillen, Director, Patients as Partners - BC Ministry of Health
Victoria Power-Pollitt, Director, Primary Health Care and Chronic Disease Management Program, Vancouver Island Health Authority
Lawrence Spero, President - Gabriola Island Health Care Society
Alice Verstraete, Executive Director - Hope Centre
Fay Weller, President Elect - Gabriola Island Health Care Society
Randy Young, Board Member - Gabriola Residents & Ratepayers Association

Session Leader

Ian Curtin, M.T.C., B. Comm. Dip. C.
President, IC Possibilities Consulting Inc.



IC Possibilities
Consulting Inc.

Focus Question for Pre-planning Session

**How can the patient
experience and
confidence in Primary
Health Care service on
Gabriola Island be
enhanced?**

What are your expectations for this session?

IDENTIFY WHAT ARE THE KEY PRIMARY CARE ISSUES FOR GABRIOLANS

Clarify primary health care definition

CREATE Strategic Map

Identify Strategic Services

Clarity on what we are consulting about? The question

Confirm purpose of community consultation day.

Confirm what info is required for community consultation day

LOCATION OF SERVICES

Consensus on process to engage G.I in "the dialogue"

A PROCESS THAT ENABLES WIDEST INPUT Structure of public meeting

ENSURE WIDEST POSSIBLE CHANCE FOR INPUT

LIMIT SPEAKERS TO 10 MIN 5 MIN

+ 5 MIN DISCUSSION WHO NEEDS TO BE INVOLVED? How TO GET THEM INVOLVED

How to involve as many many

Gabriolans as + visitors possible I want them there!

IDENTIFY VIHA ; MOH ; OTHER GOVT DEP. NEEDED TO RESPOND TO HEALTH CARE NEEDS

VIHA DEPARTMENTS & EXPECTATIONS

A PLAN TO GENERATE COMMUNITY SUPPORT IN NUMBERS

DEVELOP A CONSISTENT MESSAGE THROUGH LOCAL MEDIA

COMMUNICATION PLAN + PUBLIC MTG

Catch the 5:20 ferry home

How will participants be ~~invited~~ identified + invited

Background

21/09/08

Never Been a ^{AIC} ~~COMPARATIVE~~ Strat Plan for Gab's needs

WHEN CUT-OFF FROM THE VANC. ISLAND VIHA RESOURCE, GABE NEEDS TO HAVE ENOUGH SUPPLIES TO LAST AT LEAST 72 HRS. (GESS)

~~VIHA~~ VIHA SERVICES ARE NOT CO-LOCATED WITH OTHER PRIM. CARE SERVICES

NEED FOR ACCESS TO URGENT CARE ^{LOCALLY}

ACCESS TO A PRIMARY CARE MD.

G HCS proposal to VIHA for PHC Centre

ISSUES OF AFFORDABLE HOUSING → LESS YOUNG PEOPLE LEAVING

Economic Profile of families changing

STABLE ^{ON} FUNDING FOR ON-CALL SERVICES REQUIRED

NEED FOR 3 DR'S FOR ON CALL

Rural Setting Sets up a unique profile

AVERAGE AGE OVER 50 ON GABRIOLA HIGHER THAN BC AVE.

Accessibility Issue.

PROFESSIONAL CME ACCESSIBILITY LOCUMS

STRATEGIC PLAN MAY BE IN PIECES and not communicated

Large Senior Population

No Public Transport

LOCUMS

Need consensus on strategic plan that reflects needs of Gabriola

Small teen population

FERRY ENGINEER NOT ON CALL

VIHA + Ministry operate in silos - Difficult for public to understand

Background

21/05/08

-2

STABLE AND COMPETENT MEDICAL AND HEALTH-WORKER STAFFING

OVER 50% of GABRIOLA ISLAND SEEK PHC

Recruit ment challenges

PHYSICIAN BURNOUT

Don't know why residents seek service of island.

NEED TO MAINTAIN HIGH LEVEL OF HEALTH CARE PROFESSIONAL MAKE IT ATTRACTIVE TO COME HERE

Community & patient responsibility for health.
- Role for citizens

Patients/communities as partners in PHC primary health care

BUILD TRUST STRENGTHEN WITH FUNDING SOURCES

MoH / VIHA / GP / GPHS / MoU

P.O.V
Too MANY PEOPLE ARE BASING THEIR VIEWS UPON HEAR SAY.
ADDRESS THE DISSENTERS' ISSUES

DISRUPTIVE BEHAVIOUR

Community Has Had ALOT OF DISCUSSION ALREADY ON THIS TO PIC - why would anyone come

EMERGENCY DOCK PETITION PASSED TO DEFEAT DOCK RESIDENTS NOT THAT CONCERNED about the how it is done - They just want it.

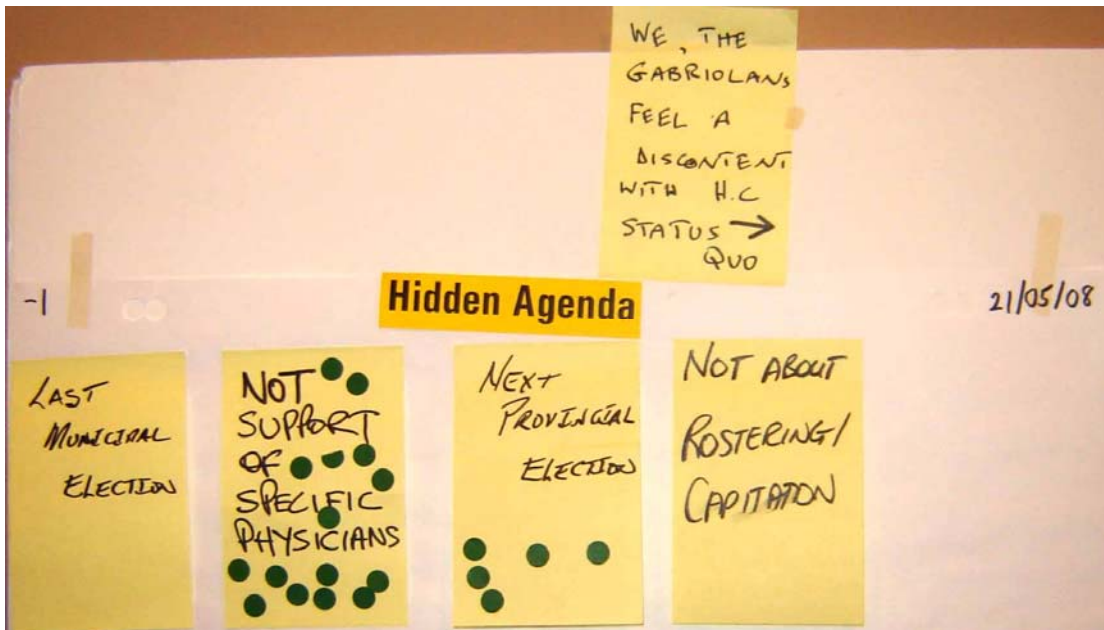
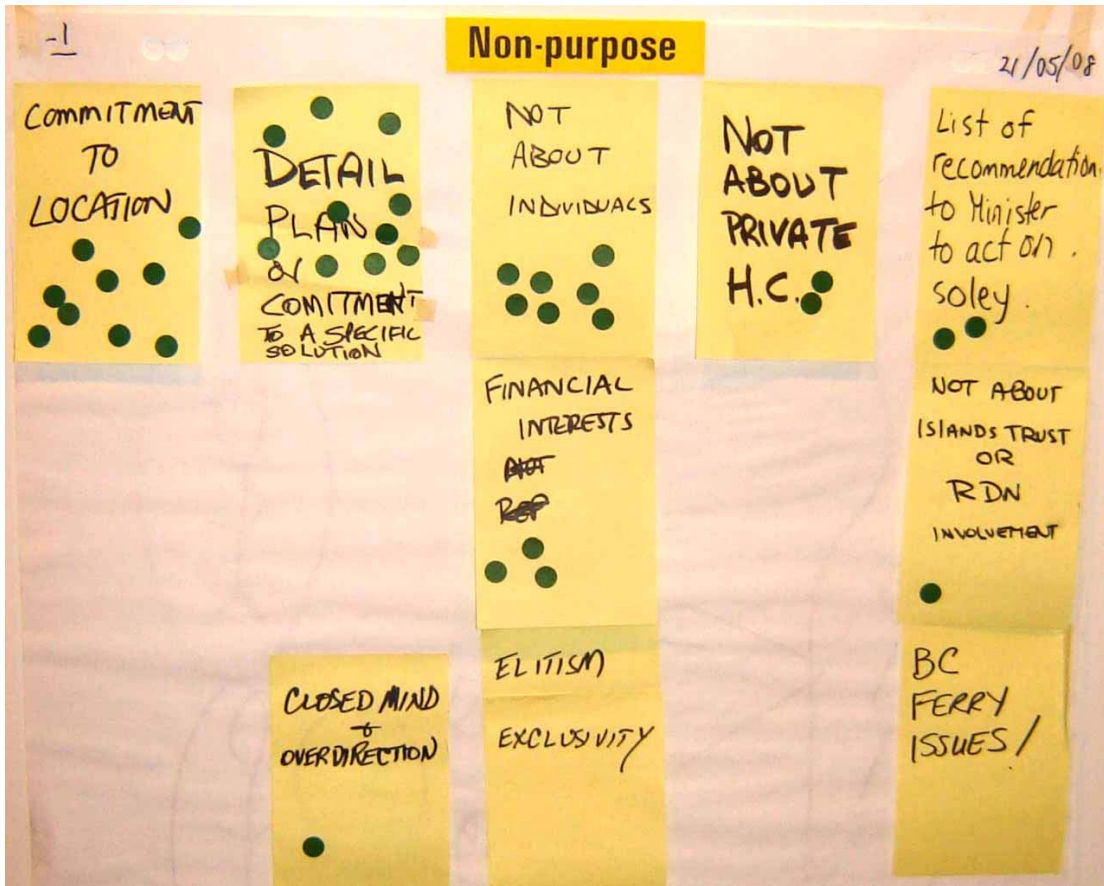
Media
Not a consensus on adequacy + support of current level of services

VIHA has received 3 letters of discontent with previous process

VIHA services on Island
- HCL
- PH
- MHAS

MoH funding consultation process through GHCS FPs & BC position in place EMERGENCY TREATMENT ROOM FUNDED BY COMMUNITY BCAS services on island IMMUNIZATION CLINIC ± MONTHLY HEALTH FAIR FUNDING WITHDRAWN BUT CLINIC WILL BE MAINTAINED





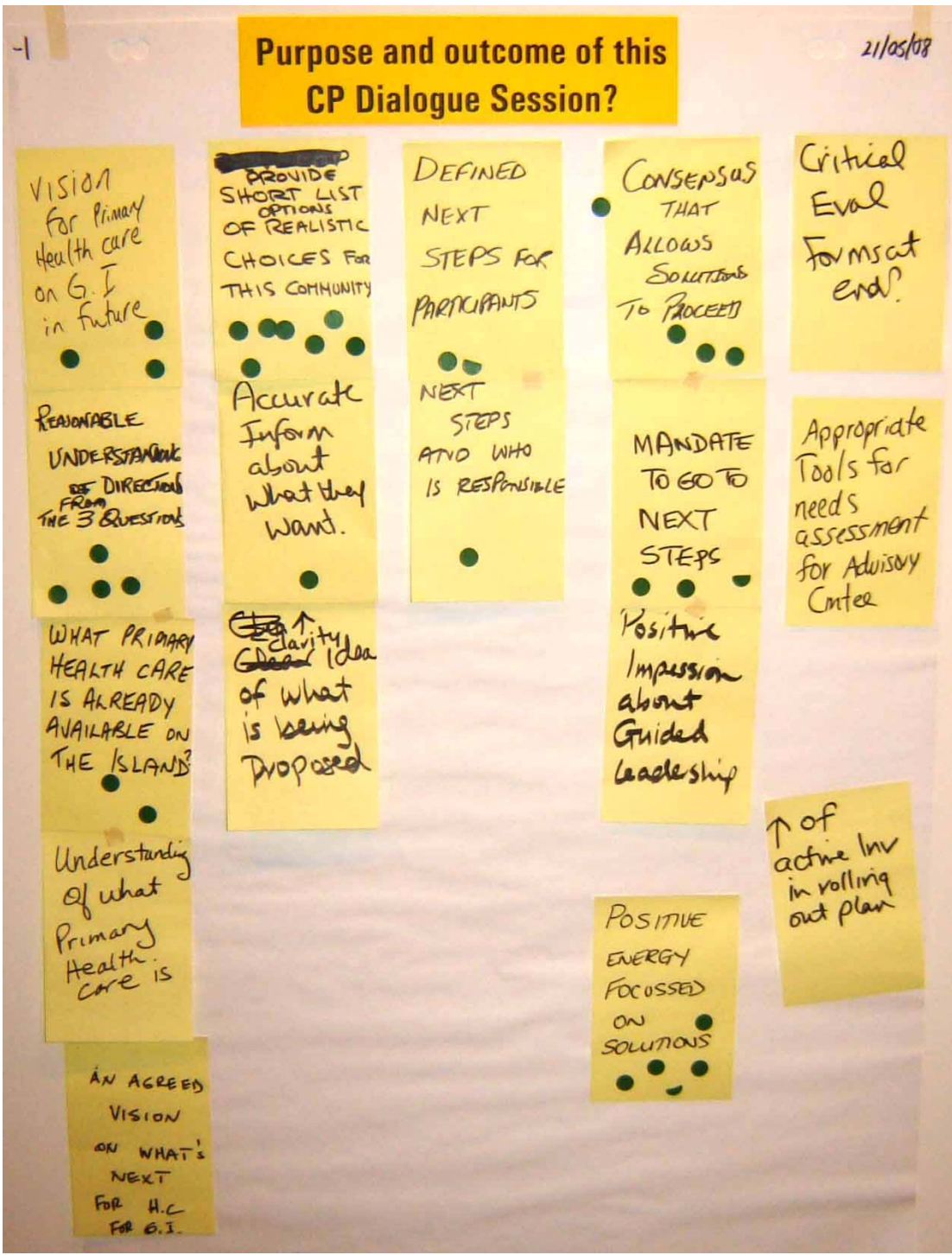
**Purpose and outcome of this
CP Dialogue Session?**

PRIMARY
HEALTH
CARE

WHAT
IS IT?

WHAT
CAN IT
LOOK
LIKE ON
G.I.

HOW CAN
WE BUILD
ON OUR
PARTNERSHIPS
IN THE FUTURE



Purpose and outcome of this CP Dialogue Session?

21/05/08

VISION for Primary Health care on G.I. in future

PROVIDE SHORT LIST OF REALISTIC CHOICES FOR THIS COMMUNITY

DEFINED NEXT STEPS FOR PARTICIPANTS

CONSENSUS THAT ALLOWS SOLUTIONS TO PROCEED

Critical Eval Format end?

REASONABLE UNDERSTANDING OF DIRECTIONS FROM THE 3 QUESTIONS

Accurate Inform about what they want.

NEXT STEPS AND WHO IS RESPONSIBLE

MANDATE TO GO TO NEXT STEPS

Appropriate Tools for needs assessment for Advisory Cmtee

WHAT PRIMARY HEALTH CARE IS ALREADY AVAILABLE ON THE ISLANDS

Get clarity idea of what is being proposed

Positive Impression about Guided Leadership

Understanding of what Primary Health care is

↑ of active Inv in rolling out plan

AN AGREED VISION ON WHAT'S NEXT FOR H.C FOR G.I.

POSITIVE ENERGY FOCUSED ON SOLUTIONS

Headers					
INTRODUCTION OPENING REMARKS	PRESENTATION -WHAT IS PHC	OPEN SPACE	SET UP FOR OPEN SPACE -THEME FOR THE DAY -HOUSEKEEPING	AGENDA SETTING BY PARTICIPANTS	BREAK AND "SHOPPING" FOR SMALL GROUP DISCUSSIONS
THREE SESSIONS OF 20 MINUTES EACH IN SMALL GROUPS. KEY POINTS FROM CONVERSATION RECORDED BY PARTICIPANTS AND POSTED ON THE WALL	THREE SESSIONS OF 20 MINUTES EACH IN SMALL GROUPS KEY POINTS FROM CONVERSATION RECORDED BY PARTICIPANTS	WRAP UP. PARTICIPANTS CHOOSE 2 AFTERNOON CAFE TOPICS BY POSTING TWO DIFFERENT COLORED FLAGS ON TOPICS POSTED ON THE WALL TOPICS COULD BE DISTRIBUTED PRIOR TO THE MEETING.	LUNCH (DURING LUNCH, FACILITATION TEAM ASSIGNS TABLES TO EACH TOPIC BASED ON # OF VOTES (FLAGS) FOR EACH TOPIC. MAXIMUM 10/12 PEOPLE/TABLE	MORE DETAILED EXPLORATION OF ISSUES + SOLUTIONS	INTRODUCTION TO COURTYARD CAFE. - MOVE TO FIRST OF TWO 50 MIN. SESSIONS - REPORT OUT FROM EACH TABLE AFTER FIRST SESSION
BREAK	SECOND SESSION -REPORT OUT FROM EACH TABLE ON CONVERSATION HIGHLIGHTS	PHC WORKING GROUP MANDATE	ONE WORD CHECK-OUT FOR DAY.	-CONCLUSION REMARKS -THANK YOU -EVALUATION END OF SESSION	

Who should attend?

OPEN
INVITE

Next Steps			21/05/08
WHAT	WHO	WHEN	
INVITATION, PRESENTATION AND MATERIAL PREPARATION WORKING GROUP SERVICES CURRENTLY PROVIDED ON GABRIOLA SUMMARIZED MOU ROLES OF PARTNERS TABLE TOPICS Primary Health Care Services as they exist.	DEFINE PRIMARY HEALTH CARE DEMOGRAPHIC PROFILE SOME STATS ON UTILIZATION CHCS VISION, BY LAWS ON INTERNET	FAY - LEAD LAWRENCE BRENDA GEOFF RESOURCE PEOPLE KELLY VICTORIA - PREPARE LITTLE INFO PACKAGE?	FRI JUNE 13
LOGISTICS WORKING GROUP - ROOM/FOOD - SESSION MATERIALS - AUDIO/VISUAL (MICS-WIRELESS) LIST OF NEEDS FOR MTS. IAN SEND TO RANDY	LAWRENCE (HARVEY) RANDY IAN	ASAP	

Key Messages

Provide opportunity for voice + ownership in future.

Co-operative effort

COMMUNITY FOCUSED PRIMARY HEALTH CARE

It is going to be inclusive

FRIDAY
JUNE 20TH
9:00 a.m. -
4:30 p.m.
@
COMMUNITY HALL

EVERYONE INVITED - INVITATION TO APPEAR IN LOCAL PAPERS

PACKAGE AVAILABLE ON-LINE AND AT LOCAL VENUES

WE WILL HAVE AN INFORMED DISCUSSION OF HEALTH CARE PROPOSALS

COME HAVE YOUR SAY IN GABRIOLA HEALTH CARE FROM HERE ON

Provide opportunity for partnerships "active engagement"

GOOD LUNCH!

FREE LUNCH

SIZE OF FACILITY

• LOCATION OF FACILITY

PUBLIC MEETING ABOUT WORKING TOGETHER TOWARDS GABRIOLA SPECIFIC Primary Health Care

COORDINATE THE SILOS

BROADEN OUR COMMUNITIES UNDERSTANDING OF WHAT PH CARE WILL LOOK LIKE AND

