

LASQUETI LAST RESORT SOCIETY
Minutes of Public Information Meeting (Aug 18, 2018)

Tim Peterson, President and Chair
Suzanne Heron, Secretary

Directors present:

Tom C and Frank B

25 community members present

Tim asks Frank to make introductory comments

Frank spoke about similarities between Lasqueti and Satuma (S) in population (both about 250-400 FT; 1000 summer)

S has had health clinic (since 1932) and has GP visit once weekly and nurse practitioner same on different day funded by IH (as well as mental health nurse monthly). IH also contributes \$10K to help run S clinic (see S sustainable health funding committee). Budget for S clinic can be found online at <https://crd.ca.legistar.com/view.ashx?>

S previously provided administration entirely by volunteers but has realized that this is unsustainable and is now conducting a referendum to levy a tax to cover administration. This will be similar to our proposed tax to cover non-medical aspects of the Center (all medical costs being covered by Island Health).

Frank read comments of Don Dempster regarding recent stay in the Respite Center. These were extremely positive (felt safe and secure; equipment ideal; convenient for islanders; enabled early discharge from hospital; very low cost for service) with suggestions for minor improvements.

Barry: Jennifer found Respite Center inadequate although she was given a tour, an electric heater was present, and she had made arrangements to be at home after one night. There were misunderstandings regarding what was expected at the Center.

Chandra appreciated meeting with respectful discussion; wondered if patient was able to receive care in Respite Center. Dr. Ron made several visits (anyone staying in Respite Center requires care "Island champion" who would ensure that they receive care while staying in center).

Suzanne: Felt that we have a building with no increased services. Other island organizations run by volunteers. Suggested that a Plan B might have the Center open only as necessary with a roster of volunteers to stoke the boiler etc.

Willy: Impression that some Board members were surprised by the level of participation at the last meeting and some views expressed. Feels need for Plan B if referendum doesn't pass.

Frank: Responded that we need to discuss that. Maybe the elephant in the room is the high administration cost that we are proposing. Do people want forms of nontraditional medicine which is not covered by our insurance policies? Our current liability insurance is roughly \$1350 yearly (total

insurance cost is \$7500 much of which is for fire). A hospice center in BC switched to a policy providing comprehensive insurance to cover one yoga instructor which doubled the cost of the insurance.

Tom: The board has a wish list for volunteers which Melinda will circulate. Why can't volunteers do all the work? Some (work) needs to be done by qualified people. Also, we have not had people coming forward and volunteering, so that while not impossible, what we have experienced seems to make totally volunteer service impracticable.

Willy: Brought up changing the funding model from open-ended to something different, eg time-limit; oversight committee. Answer (Frank): Terms and conditions of referendum require review in five years. We do have a newly established operations committee looking at how to reduce spending. The terms and conditions also dictate that the Health Center will control the tax money raised so that if less than the \$45K taxed is used in any one year, the difference will roll over into the next year to reduce the tax for that year. (i.e. we will control the money, not PRRD).

Ray: People say that we have no more than we had before the Center was built, when in fact we have much more, including a method for going forward. We also have a Respite suite, a tele-health center (which we hope to activate soon, once technical problems are solved) and an almost-complete dental clinic with a commitment from dentists to run it.

David: Health care is a human right--how to pay for it? A) Charity--dependability uncertain. B) User Pay--discriminates against poor people. C) Income or wealth tax--possible. D) Property tax--his preference. We should look at mechanisms to combine fund-raising and taxes. Rural health care is diminished currently with most health care in urban centers. Ideally a closer-to-home model would be preferable.

Shelley: People feel they are being taxed for health care which is a human right. No track record of clinic providing services, leaving people wishing for assurance to the contrary. Lasqueti rural health care has been ignored more than elsewhere, and that is something we can address. Answer: Referendum is to raise money for non-medical services (eg administration, health center maintenance, etc).

Kathy: People are thinking, what do we have after four years of constant volunteering? We now have many rules. Who put these rules in and why are these rules here? Answer: Rules are determined to a considerable degree by insurance, which we do not control. In the future it might be possible to move to a different insurance model, but the board cannot do that now. The current insurance costs \$8K and would likely at least double.

Shelley: We should have service closer to home. Data supports that for health outcomes. We shouldn't have to pay as much as the referendum is asking for. Answer (Frank): We should be able to go to IH and demand funding similar to Saturna.

Dave: Regarding volunteerism, he donated time for 3 years and feels betrayed by costs introduced since then.

Tom: Actual budget is \$60K; our request is for \$45K. We hope the rest will come from donations. Can we reduce it below \$45K? Possibly, if enough volunteers can be found.

Richard: In favor of Center; possibly somewhat overbuilt now, but taking advantages of opportunities for future, we should work to make IH realize the value of giving us funding.

Peter: Saturna's population is decreasing over the past 7 years (Island Trustee). Nurse has not had funding for malpractice insurance. Melinda explained that she is covered by Island Health. Many people volunteered to build center. Has there been an attempt to organize volunteers for operations: eg splitting firewood, etc? (Wish list addresses this). If referendum passes, money will not be available until next year; plan needed to get through until then. Historically, Lasqueti has not demanded equal services to other islands. Anonymous letter discussion re appropriateness of introducing anonymous comments. Meeting voted in favor of accepting. Letter spoke to need for cutting costs.

Larry: Saturna, Gillie's Bay have been mentioned for comparison. Is that information available? Answer: Yes, online (see above re Saturna).

Chandra: Problem is date--too soon.

Willy: Lasqueti is low-income. We have not pressured IH as much as possible, possibly because of an assumption they would contribute. If we can put more political pressure on (he would volunteer to help) this might raise funding.

Barry: Has reservation about seniors and associated health care. European countries spend more keeping people in their own homes; North American countries more on infrastructure, not support. Has worries about health clinic building vis a vis this model.

Shelley: We have not adequately sought volunteers. More might volunteer if requested on a rotational basis.

Tim: In favor because clinic is a way of socializing the cost of something built by us for us. If he sees the nurse twice per year, he has saved money by the tax.

Melinda: Wish list to be posted on Lasqueti email. A) Volunteer Coordinator B) Website update C) Write articles, involve social media D) Coordinate small jobs in Center E) Minute taker F) Membership Chair

Kathy: One issue is trust in the PRRD (fear that tax money will not stay with Island). Answer: Terms and conditions assure we will keep money. Formal terms and conditions when received from Linda Greenan (PRRD) will be posted on Lasqueti email.

Meeting Adjourned 3:30 pm

VOLUNTEER WISH LIST READ OUT AT MEETING

**VOLUNTEER COORDINATOR
WEBSITE MAINTENANCE
COMMUNICATIONS: ARTICLES FOR ISLE 'N TIMES; FACEBOOK; ETC.
SMALL JOBS COORDINATOR
MINUTE TAKER
MAINTAIN MEMBERSHIP LIST**

FROM DAVE ROGERS
PLEASE ~~ADD~~ ATTACH TO MINUTES

Did Powell River seek input from The Last Resort Directors before table ling the referendum question? If No , Why not?

Did the board of directors from The Last Resort request input to the wording of the referendum question? If no, why not?

Why has the referendum question not been put forward to the community by PR or our Pr representative or the board of directors of the Last Resort?

Is the board of directors aware that the P.R. has in the recent past shown themselves to be less concerned with the Lasqueti Island's concerns then their bureaucratic interests?

Given the recent history of P.R. Does the board believe that P.R. is working in the best interests of Lasqueti and The Last Resort Society?

Is The Board of Directors questioning and/or have questioned the wording of the referendum.?

Why has a long winded referendum question been allowed , when a simple question like 'DO YOU SUPPORT FUNDING THE JUDIITH FISHER CENTER THROUGH TAXATION" would have been much more direct and to the point?

It appears to me the convoluted referendum question is worded to give P.R. Control of the funding and therefore control of the Health Centre. What measures have the Board of Directors implemented to insure that our health centre will not become a financial cash flow for P.R. And the a burden on our community?