



THE CORPORATION OF THE VILLAGE OF ASHCROFT

COMMITTEE OF THE WHOLE AGENDA

FOR THE MEETING OF COUNCIL TO BE HELD IN THE COUNCIL CHAMBERS  
OF THE VILLAGE OFFICE AT 6:00 PM ON MONDAY, JANUARY 22, 2018

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1. **CALL TO ORDER**

2. **PRESENTATIONS**

- 2.1. Sgt. Kat Thain, NCO i/c, Ashcroft RCMP Detachment
  - Quarterly Update
- 2.2. Mr. Rick Moen
  - Hiking trails in Ashcroft
- 2.3. Wellness & Health Action Coalition
  - Local Health Care
- 2.4. Other items as time permits

3. **TERMINATION**

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# WELLNESS & HEALTH ACTION COALITION

## What is WHAC?

A volunteer community action group acting as a sub-committee of CRS and dedicated to the improvement of health care services in our region...Ashcroft, Cache Creek, Clinton, Lillooet, Logan Lake, Lytton, First Nations.

## Who is WHAC?

Core committee – reps from Ashcroft, Cache Creek, Clinton, Lillooet:

- General membership 50;
- Info at [www.whac-chb.ca](http://www.whac-chb.ca).

## What has been achieved since April 2014?

- Recruitment and retention of local physicians;
- Working relationships with:
  - Health care professionals; Interior Health; Ministry of Health;
  - Rural & Remote Division of Family Medicine; Doctors of BC;
  - Healthy Communities of BC; Patient Voices of BC;
  - Various health research projects, IH, Ministry, UBC, TRU;
  - BC Rural Health Network (new); Rural Coordination Centre;
  - BC Health Coalition; MLA; Others;
- Presentations to:
  - Select Standing Committee on Health;
  - Minister of State for Rural Economic Development;
- Development of a new model for rural health care delivery with Regional Medical Director.

**The good news...**Our vision fits with the mandates of the government and the health care community.

**The bad news...**Nobody has figured out how to achieve it.

**The Ultimate Goal:** *a multi-disciplinary team-based primary-care model for rural health care delivery that ensures local input and control.*

## Challenges? Drivers?

- Even though health care is not specifically in the municipal jurisdiction, it has become very evident that “communities” (Elected representatives? Citizen-based action groups?) are expected to identify, and be involved in, the solutions;
- How to integrate health care issues into rural community economic development;
- Solutions are proving to be regional and collective;
- Numbers are important to senior governments – small communities quickly disappear between the cracks if they don’t work together (hence the development of BC Rural Health Network).

## What do we need?

- Recognition – if WHAC is to achieve its goals of a new model for rural health care delivery, it asks to be officially recognized as having the authority to speak for “the community”.
- Collective Authority – WHAC asks to be given the right to speak on behalf of all of the local-area governing authorities in matters of local health care needs and services.
- Togetherness – to be truly effective we (all the communities in the service area) need to be able to speak as one, with government and with the numerous other committees/agencies throughout the province.

## KEY OBJECTIVES:

- To create a community-based primary care clinic fully staffed with an interdisciplinary team of medical professionals to ensure continuity of care for all patients.
- To secure funding to create a demonstration project for primary care for our greater catchment area.
- To create a Community Health Board to work with our medical director, Rural and Remote Divisions of Family Practice, Interior Health and our primary care team to develop and deliver health services for our catchment area, and to ensure rural emphasis on health care needs and services.
- To create an ongoing recruitment and retention strategy to ensure a fully-staffed primary care team, including doctors, nurses, lab and imaging technologists, emergency responders and others required to maintain our primary care model.

## The WHAC:

For more information, contact:

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Wellness Health Action  
Coalition  
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A division of  
Ashcroft & Area Community  
Resources Society (CRS)  
Tax Reg. BN 11879 1003 RR0001

The Ashcroft & District  
Wellness Health  
Action Coalition  
(WHAC)



*To facilitate the development  
and sustainability of an  
effective wellness and health  
care model for our region while  
respecting and protecting  
community identities.*

Serving Ashcroft, Cache Creek, Clinton,  
Lytton, Logan Lake, Spences Bridge,  
Walhachin and the indigenous and  
unincorporated communities of TNRD  
Areas I and E.

## WHO ARE WE?

The Wellness & Health Action Coalition (WHAC) is a group of citizens who are committed to redesigning our rural health care from the community up. The group was established in 2014. To achieve our objectives, we work in partnership with the villages of Ashcroft, Cache Creek and Clinton, TNRD Areas I and E, the Western Interior Chapter of Rural and Remote Division of Family Practice, Interior Health, the Ministry of Health and UBC Okanagan.

Our key objectives are listed on the back of this brochure, the most important of which is to create a community-based, interdisciplinary, team-based primary care clinic.

Our definition of primary care:

- Our clinics are the first point of contact for all residents of our catchment area to all health and well-being services;
- Our clinics consist of an interdisciplinary team of health practitioners including but not limited to doctors, nurses, medical technologists, pharmacists, first responders, and allied health and mental health practitioners;
- Our clinics will ensure continuity of care through both the wellness and illness experiences of our patients;
- Our clinics will coordinate referrals to other levels of care such as hospitals and specialists and will assist patients in navigating the larger system.

We appreciate and support the mandates established by the Government of British Columbia and the Ministry of Health. These documents confirm our goals and commitments for the past four years. While there is still much work to be done it is comforting to know that there are no major ideological problems with working together to improve rural health care.

Research has shown that primary care creates direct savings in acute care costs. There are expenses in establishing primary care that will need to be funded, however, the long-term savings of this approach will more than free up the initial start-up costs.

The Wellness & Health Action Coalition is a volunteer, grass-roots organization operating without current sources of financial support. We look forward to establishing financial working relations with all our partners.



## ACTION

We will continue working with our partners to move primary care from a theory to a working model for our catchment area. In 2017-18 we will actively build our primary care team. We will work with our medical professionals to assist them in transitioning from individual practice to dynamic team practice. We will also work with patients so that they understand their role as members of a dynamic team.

We are working with Ashcroft, Cache Creek, Clinton and our First Nations neighbours on a regional Healthy Living Strategic Plan to identify gaps in our health care service and how we can fill them.

We will continue to work with Rural and Remote Division, Interior Health, the Ministry and the medical school to update service protocols to empower primary care and rural-proof health care delivery.

## MEMBERSHIP

Membership in WHAC is open to anyone in the Ashcroft & District Hospital area with an interest in local healthcare reform. Membership forms are available at Ashcroft I.D.A. Pharmacy or on our website: <http://whac-chb.ca/>. Complete the form and drop it off with payment (\$5 per member) at Ashcroft I.D.A. Pharmacy or mail to: Ashcroft and Area Community Resource Society (CRS), PO Box 843, Ashcroft, V0K1A0. Please make cheques payable to WHAC/CRS.