Summary of Organizing Effort

For the past 18 months or so, there has been a series of meetings involving residents of Antigonish town and county concerned about the health reform process, and especially the lack of any effective organization that could solicit and act upon community health concerns. This group has changed in composition over time, but a core group has remained active. The main focus of its discussions has been the establishment of a Community Health Board for Antigonish, or some equivalent organization. There are approximately 38 Community Health Boards now established across Nova Scotia. Antigonish is the only rural municipality in Eastern Nova Scotia that remains without a Community Health Board. In addition, there has been general discussion about the determinants of community health and the barriers to community involvement in health planning.

A continuing concern of the people involved in these discussions has been to broaden the scope of community participation in their discussions. To this end, a widely-advertised public meeting was held on September 23, 1997. At the meeting there was discussion about what makes a healthy community and the type of organization best suited to organize community input into the health planning process. An interim Steering Committee was chosen at the meeting and told to gather information on Community Health Planning groups of various description and to report back within a reasonable time-frame to another public meeting with recommendations on the best type of community health planning organization for Antigonish.

On March 7, 1998, a Workshop on Community Participation in Health Planning - planned and organized by the Interim Steering Committee and widely advertised to town and county - was held at the Coady building on the campus of St. Francis Xavier University. Guest speakers included the former Minister of Health (Dr. Ron Stewart), the former CEO of the Eastern Regional Health Board (Mr. John Breen), and a number of representatives of Community Health Boards and Councils. The information and opinions generated by this workshop was used by the Steering Committee to frame a set of recommendations, which were presented at another public meeting on April 29, 1998. (See attached)

At this meeting, the present Steering Committee was struck and given the mandate to identify and invite individuals willing to serve as representatives on a Community Health Board. Members of this Steering Committee are listed below. At one of its meetings, the Committee heard a presentation from Sheila Profit of the Eastern Regional Health Board regarding the status of Community Health Boards in Eastern Nova Scotia. At a subsequent meeting, a decision was taken to proceed with the establishment of a Community Health Board by soliciting nominations from various organizations throughout Antigonish town and county. A number of individuals from this list of nominees are to be contacted by the Committee and asked to serve on the first Antigonish Community Health Board. Once the Board has been staffed, the Steering Committee's work will be complete and it will be dissolved.

Members of the Steering Committee to Establish a Community Health Board

Doris Gillis, Jane MacGillivary, Sarah AvMaat, Leonarda MacNeil, Maria Gillis, Sr Loretta Gillis, Marian MacLellan, Marion Alex, Jim Bickerton, Brock Elliot, John Beaton, Beth MacGillivary, Lucille Harper, Evelyn Lindsay, Colleen Cameron, Donna Gallant.

Recommendations from the Interim Steering Committee for a Community Health Planning Organization for Antigonish Town and County

April 29, 1998

The Interim Steering Committee established to identify options for forming an organization to support community health planning in Antigonish Town and County recommends

- that there be an autonomous community health organization for Antigonish town and county;

- that a steering committee be formed to develop this organization;

-that this organization have the mandate to develop links with the Eastern Regional Health Board and to procure resources for developmental purposes;

- that the organization once established constitute itself as a non-profit organization required to hold annual general meetings;

- that in order to ensure inclusiveness the steering committee consider the following criteria when inviting individuals to serve on this organization: age, ability, gender, geographical location, language, race, income, and a range of skills and backgrounds;

- that some members from the interim steering committee making these recommendations serve on the steering committee until the community health organization has been developed.

COMMUNITY HEALTH BOARD MEMBERSHIP

About Community Health Boards

Community Health Boards (CHB) or local planning mechanisms are *new structures*, accountable to Regional Health Boards and to their communities for local health planning. As community health planners, these groups are responsible for developing a community health plan and developing strategies that improve the health of their community.

Regional Health Boards are responsible for establishing a network of Community Health Boards or local planning mechanisms that ensure community participation in health planning. *The following information has been developed for individuals who may be interested in serving on a Community Health Board or local planning mechanism.*

What is the Role of a CHB or local planning mechanism?

The role of Community Health Boards or local planning mechanisms will be consistent throughout the province. The 8 point mandate is as follows:

- Developing community health plans
- Establishing priorities for primary care services which are *consistent with core services, affordable within available resources, address unnecessary duplication and demonstrate community consultation*
- Fostering community development by encouraging active community participation in local health planning
- Assisting with the development of regional health plans through the submission of community health plans to RHBs
- Identifying and supporting *broad determinants of health* in planning for health *(i.e. the many factors that influence our health such as education, income, lifestyle etc)*
- Assisting in evaluating the local health system
- Coordinating, where appropriate, with other communities to share primary care services
- Assisting with public education about health and the health care system

What general skills, interests and commitments are required by those interested in serving on a Community Health Board or local planning mechanism?

In general, what is most important is that you have:

- A willingness to volunteer your time, energy and talents to the group in serving your community and region in planning for health *(educational materials, planning tools and supports will be provided through the Regional Health Boards)*
- An interest in health issues and improving health in your community
- A willingness to share your experience and knowledge about your community and the local health system
- An interest, or experience, in working as part of a team or group
- A willingness to learn more about the health of your community and to share this information with your community and Regional Health Board
- A willingness to get involved in your community and a commitment to promote community development

What type of activities will members of a CHB or local planning group be involved in?

Examples of CHB activities in the first year of operation include:

- Attending an education session on your job as a community health planner
- Identifying other individuals or groups that are willing to work with you in gathering local information and developing a community health plan
- Developing methods for communication with your RHB and your community
- Developing a community profile that would provide an inventory of health and health related supports and services *(a workbook will be available in assisting you in this task)*
- Leading the development of a community health plan *(assistance will be available from your RHB and the Department of Health)*