

I, like a lot of other residents, am concerned about how the North Shuswap Health Center funding Bylaw has come about. Most people I have spoken to were not even aware of either of the petitions that were reported as the reasons for the CSRD having passed the funding through three readings. There are three main concerns for this Delegation Request. One is the process, or lack thereof, of the original petitions, how they were presented to the CSRD Board, and the highly questionable validity of the petitions; the fact that health care is a shared provincial and federal issue and it is overreach for the Regional District to get involved in Health Care taxation funding; and the AAP itself. I am asking that Bylaw No. 5848, 2022 be tabled before final reading because of the following:

1. The 4345 signature on-line petition. On-line petitions are almost never given any credence. They must have a verification process and a way to stop people from filling it out more than once. The number 4345 is totally suspect as according to the CSRD website, we only have a population of 3200. Even now, after the fact, we still have been given no info on the subject matter of the petition. How broad was it? Did it have any relevance at all? Why would the CSRD even consider it as pertinent?
2. The 1000+ signature local petition. (The word "local" here indicated that there were no geographic parameters to the on-line petition in #1. People world-wide could have signed it.) Did the same people sign both petitions? Again, what was the subject matter of the petition? Who could sign it? Was there a verification process to limit it to local electors? Once again, there appears to have been no integrity with this petition. In fact, it has come to my attention that they did indeed collect signatures from Chase.
3. The time given to do the AAP was too short, especially since most of us didn't know anything about the questionable petitions used to push this matter forward and first heard about it in the Kicker. Now is when most residents are winding down from the summer and are not thinking about tax issues. The timing is questionable especially given that there is an election coming up and it could have been included as a referendum. All of the concerns included here would have come up if there hadn't been such a

rush to push this through. As an aside, it is interesting the Director Simpson stated in the August 19, 2019 Kicker that he “didn’t like it (the AAP) as a private citizen and I don’t like it now.” Yet here he is utilizing said process to help push through a Bylaw based on invalid and/or incomplete information.

4. The NSHC apparently knew that their doctor was leaving. While she is highly respected among her patients, her husband’s job requires that they move closer to his medical work in Kelowna. It appears that they will be leaving sometime in mid-October. The NSHC knew their doctor was leaving when they put forward their request for funding. Can the NSHC be trusted with our tax dollars?
5. According to reports in the Kicker, the NSHC had over 4600 yearly patient visits. Since there are 2080 working hours in a year, that means that the average visit lasted just under half an hour. Given that most visits are booked at 15 minutes or less, why were so many residents not allowed to access the Center?
6. Why are potential patients asked if they are a member? Non-members are not admitted. This is not indicative of a public health system. It is more like a members only private club. Will this change if the funding goes through?
7. According to reports in the Kicker, the NSHC had about 3000 registered patients. If I, as a resident, couldn’t get in, who are the 3000? Remember we only have 3200 residents. If they were summer residents, then the hours/visit in #5 above would be drastically increased because they aren’t here most of the year. Even those of us who live here usually take a winter break somewhere further south. I have heard that a number of patients followed a previous doctor here from Chase and Sorrento. If that is the case, and the numbers certainly indicate that that is extremely likely, then why are we, North Shuswap residents being taxed to help non-residents take away our medical spots?
8. I notice that Director Simpson made no mention of any of this in his monthly “Kickin’ It Up With Jay”. Yes, some of it was covered elsewhere but isn’t it Director Simpson’s responsibility to give us the whole picture? He took full responsibility to convince the CSRD board and staff of this need

for funding but presented nothing to us, the people he is supposed to represent.

9. Who has audited the NSHC to verify their need for funding? When the doctor leaves, how will that effect the funding?
10. Why wasn't this, especially given all we know now, put to referendum on the upcoming ballot? That would also have allowed full disclosure to the rate payers.
11. If so many people, those who are able to use the clinic, want to support it more, why don't they do it through the related non-profit society?
12. This whole situation is premature since the province is giving more money to GP's to help with overhead costs and is negotiating with them to ensure their practices are more viable so more doctors will continue practicing and more will be enticed to enter family practice.