

Focus

Saskatoon
Community
Clinic
"Your Health
Care Co-op"



Summer, 2011
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Community Health Services (Saskatoon) Association Ltd.
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President's Year End Report 2011

By Anne Doucette, President

It has been a challenging year for your Community Clinic. We hope, however, that by meeting these challenges head on that we have laid the groundwork for a positive future. We continue to be a model of primary care which, we believe, should be available to all Canadians.

Over the past few years our provincial operating grant has not kept pace with the increasing costs of providing services. As a result, in the fall of 2010, our Board was in the difficult position of having to reduce some services and find other means of reducing our operating costs. This included reduction of staffing in some areas, eliminating one management position, eliminating discounts on pharmacy service fees and restructuring some programs. These efforts were reported on in my semi-annual report published in Winter 2010 Focus. We also began managing vacation leave in a different way to reduce unfunded vacation liability. These efforts were successful in that we hope to end this fiscal year with a small surplus of approximately \$ 40,000. This surplus will help us replenish our reserves which are close to depleted. We continue to have a shortfall of operating funds which we will need to contend with during the upcoming year.

At the same time the provincial government provided additional targeted funding to enhance programming for our Westside Clinic to meet the needs of patients with, or at risk of HIV/AIDS. This included a capital grant contribution towards the mortgage of the new building, new funding for two additions workers and increased funding for the provision of physician services at the Westside Clinic. These additional funds are greatly appreciated and will help the community in addressing this very significant public health concern.

In the spring the board regretfully accepted the resignation of Administrator, Patrick Lapointe, who retired following twenty years of service. We struck a hiring committee with involvement of the Board and staff. We are pleased to have hired Tim Archer as our new Executive Director. Please join us in welcoming him to the Saskatoon Community Clinic.

The Board was very active in organizing several special events during the year including:

- A pedestrian safety walk
- A grand opening celebration for our newly relocated Westside Clinic
- A special members meeting to discuss having our Federation join the Cooperators
- An educational session about the effects of inadequate housing on health
- A news conference about the need for more affordable housing
- A going away potluck for Patrick Lapointe

We also had a very fruitful discussion with members at the semi-annual meeting. Our members provided ideas about where our Association should be headed in the next five years in the areas of service delivery, advocacy and member engagement. These are just a few highlights from the past year. There are many other accomplishments including work done by the Seniors Advisory Council in the area of co-operative housing for seniors, and activities organized with the public library and Council on Aging.

In October, members of our Board met with Saskatoon Health Region Board members. We discussed our joint efforts in meeting the health needs of the community including our HIV/AIDS strategy and dealing with the

Continued on page 2...

CHSA Annual Meeting

Join us for our Annual Meeting
Mayfair United Church

Tuesday, June 21, 2011

See page 3 for details.

adverse affects of homelessness. We continue to be active in the Community Co-operative Health Federation. In March the Federation met with Saskatchewan Health representatives regarding health care renewal, out-of-scope compensation and implementation of electronic health records.

We are saddened by losses of members and active supporters during the year. This includes the passing of Dr. Carla Eisenhauer who was a great leader in our organization, serving for several years as the head of our medical group

and for thirty years as an exemplary Community Clinic family physician. Mavis Carleton, who served on the Seniors Advisory Council, passed away in November. Most recently we mourned the loss of former Premier Allan Blakeney who, amongst his many significant accomplishments, was instrumental in establishing medicare and was a friend of Saskatchewan's Community Clinics.

I wish to thank the Board members, staff, members and volunteers for their hard work, dedication and commitment to our health care co-operative during the past year. ❖

Best Wishes to Retiring Administrator Patrick Lapointe

By Anne Doucette, President

Patrick Lapointe, Administrator, retired from the Saskatoon Community Clinic on April 15. Patrick joined our Counselling Department in 1975. He then moved to Regina, working for the Department of Health developing a homecare program, assisting the Minister of Health in the implementation of district health boards and other health reform initiatives. He returned to the Community Clinic in 1993 as Administrator.

Under his leadership our health care co-operative saw many changes in the types and range of services offered. These included the introduction of chronic disease management programs, specialized programming for low income and Aboriginal persons, the introduction of new disciplines, such as nurse practitioners, employment equity, a renovated pharmacy and an expanded Westside Clinic. Patrick was also very involved in the health centre movement serving as Secretary of the Saskatchewan Community Co-operative Federation and President of the Canadian Alliance of Community Health Centre Associations.

Many at our Clinic, in our health region, province and nationally, have been touched by the work of Patrick Lapointe and inspired by his dedication to the community clinic model. His consultative style, commitment to our co-operative and sense of humour will be missed by all. Best wishes in your retirement Patrick! ❖



On April 1st 150 members, staff, and guests joined with in a Celebration of Patrick Lapointe's Year of Service to the Community Clinic.



Patrick Lapointe receives a fond farewell from Community Clinic Staff

New Executive Director Joins Community Clinic

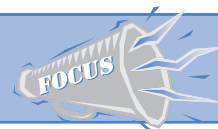
The Board of Directors is pleased to announce that Tim Archer has been hired as the Saskatoon Community Clinic's new Executive Director. Tim, a resident of Saskatoon, brings to us almost twenty years of experience in health care management most recently as Project Manager of Capital Projects at the Saskatoon Health Region. Tim has also worked for the University of Saskatchewan as Director of the Student Health Centre. As we say good bye to Patrick Lapointe we ask you to join us in welcoming Tim Archer to our health care co-operative. ❖



Tim Archer, Executive Director



Annual Meeting Notice



Community Health Services (Saskatoon) Association Ltd.

Tuesday, June 21, 2011

Mayfair United Church, 902 33rd Street West, Saskatoon

Registration: 6:30 p.m. - 7:00 p.m. Meeting: 7:00 p.m. - 9:30 p.m.

Agenda

- | | |
|--|---|
| 1. Call to order | 7. Break |
| 2. Reading and disposal of minutes of preceding annual general meeting | 8. Resolutions, recommendations and bylaws |
| 3. Business arising out of minutes | 9. Election of directors |
| 4. Reports of President, Directors, Executive Director, Medical Director, Treasurer and other Officers <ul style="list-style-type: none"> • Report semi-annual strategic planning session | 10. Reports of special committees <ul style="list-style-type: none"> • Anniversary Committee |
| 5. Report of Auditor and consideration of financial statement | 11. Unfinished business |
| 6. Discussion, consideration and disposing of reports set out in 4 and 5 | 12. Appointment of auditors |
| | 13. New business |
| | 14. Adjournment |

Election of Directors

Five (5) Board members and one (1) Focus Editorial Committee member will be elected at the meeting. If you are interested in running for the Board of Directors or the Focus Editorial Committee, please contact the Board secretary at 652-0300. Your name will be forwarded to the Nominating Committee, and an information package will be sent to you. Biographies received at least seven days in advance of the meeting will be included in the agenda package.

Eligibility for Voting and Elections


Upon approval of the Board of an application for membership, the member shall be entitled to attend any general or special meetings of the Co-operative and be entitled to vote. Each member will be entitled to one (1) vote only, and no member may vote by proxy. In cases where a member has a spouse or a spouse and dependents who are members (joint or family memberships), the spouse and any dependent who is eighteen (18) years of age or over shall be entitled to vote and shall be eligible to be elected as a director.

Deadline for Resolutions

Resolutions from members are welcome. Members

may introduce resolutions from the floor. However, the Board urges members who would like to put forth a resolution to submit them a minimum of ten days in advance of the meeting. Early submission allows for copying of the resolutions so they are available for members to review and for copies to be distributed at the meeting.

Childcare, Transportation and Meeting Packages

If you require childcare or transportation, contact the Member Relations Department. The Annual Financial statements and other meeting materials will be available for interested members at the Clinic ten days in advance of the meeting. For more information, please telephone Member Relations at 652-0300, ext. 243. 

There Is No Health Without Mental Health

By Nayyar Javed, Rose Marie LePoudre, Joan Stephens, and Dennis Morrison,
Community Clinic Counsellors

According to Ban Ki Moon, the Secretary General of the United Nations, there is no health without mental health, because mental health is critical in promoting a sense of wellbeing. Disruption in mental health seriously decreases an individual's ability to think clearly, solve problems, engage in satisfying activities, and have healthy relationships. In addition, mental health affects, and is affected by, physical health.

The statement by Mr. Bam Ki Moon is based on worldwide research that indicates a strong link between mental health problems and communicable and non-communicable diseases. Research shows that people struggling with a chronic disease are at high risk for developing mental illness and people who are mentally ill are more prone to have chronic illness and injuries. This research also indicates severely reduced longevity for people who have mental illnesses.

Despite the threat that mental illness poses to public health, and the suffering of those who are struggling with mental illness, most countries in the world have failed to invest the resources needed to prevent mental illness and have failed to offer sufficient services to those who become its victim. This reflects neglect in acknowledging the relationship between mental illness and economic and social impoverishment.

There is an urgent need for countries to address the effects of mental illness at the policy level and in health budgets. The statement made by the UN Secretary General was an attempt to create awareness about this need.

Ban Ki Moon's statement and worldwide research have inspired many countries to mount campaigns to heighten awareness of mental illness. Some of these campaigns have integrated a human rights perspective to remind the world that neglecting the investment in health promotion and in services for mentally ill citizens is a serious violation of people's human rights. In fact, the United Nations has developed a comprehensive guideline for implementing human rights through mental health services.

The human rights perspective proposed by the UN has implications for Canada because Canada signed a UN Convention regarding the rights of mentally ill citizens. Despite these agreements, mentally ill citizens are consistently discriminated against in Canada in regards to access to services and in other areas of life.

Canada's National Union of Public and General Employees (NUPGE) recently launched a campaign entitled "All Together". It started with the statement "No Health without

Mental Health" and went on to suggest that Canadians say, "No to Corporate Tax Cuts, and Yes for More Mental Health Services".

There is a dramatic increase in the number of Canadians of all ages (one in five) that are diagnosed with mental illness. The rate of mental illness is significantly higher in marginalized populations. Despite these statistics, there has not been any increase in resource allocation for "social protection" and services for mentally ill Canadians. Social protection consists of special programs which ensure equity in access to resources and services. It includes access to decent jobs, adequate housing, and resources for meeting other needs necessary for a decent quality of life. Unfortunately, in recent years, persistent cut backs in programs for social protection in Canada have caused serious deterioration in the living conditions for Canadians who are mentally ill.

According to NUPGE this crisis has forced many Canadians who are mentally ill to end up either homeless or in correctional facilities. This is a sad reflection on Canada. On top of it all, Canada is the only G8 country without a formal mental health strategy to deal with a very serious issue.

Canadians are paying a huge price for this neglect because mental illness is the leading cause of disability and suffering in Canada. Our economy loses 51 Billion dollars every year because of mental illness. This adds to our belief that Canada has failed in complying with its international obligations to protect the human rights of its citizens who have mental illnesses. This failure is taking its toll at many different levels including personal suffering and social and economic cost. Canada's failure to comply with its international obligations and its ignoring having a national strategy for mental health, is responsible for the persistence of discrimination against Canadians who are mentally ill and for the tendency to blame people for their illness. This victim blaming conceals the real source of the problem which is Canada's failed mental health strategy. This failed strategy interferes with creating an 'enabling environment' for the promotion of mental health and for overcoming mental illness.

A national strategy is needed in Canada that emphasizes human rights and integrates knowledge about the social determinants of mental health. This type of strategy will acknowledge the rolls of supportive family, community, and society in empowering people to face the challenges of life. It will promote what the World Health Organization defines as well-being. Well-being is more than the absence of disease - it is a combination of many feelings, a way of thinking, and way of relating to self and to others. All of the components of well-being help to create a positive mental state. When people

live in a social context which fails to meet their physical, mental, emotional, and social needs their sense of wellbeing is compromised. That leads to symptoms and illnesses such as depression, anxiety and other mental illnesses. Therefore, health promotion must include a focus on mental health and mental health services.

We in the counselling department of this clinic believe that advocacy for human rights is an integral part of our work; therefore we were delighted to see the establishment of the National Mental Health Commission in 2007. The Commission has a mandate which includes the development of a much needed Canadian Mental Health Strategy and an increase in awareness about mental illness and the needs of those who are experiencing it. The elimination of discrimination against mentally ill people and the stigma and shame attached to mental illness is a central part of the Commission's work.

It is time that the biochemical disruptions caused by unsupportive and stressful environments be fully acknowledged. The emotional pain caused by these disruptions is as real as physical pain. This acknowledgement must be reflected in the policy and strategy formation and the creation of adequately funded services for all Canadian citizens.

In keeping with our belief in the importance of mental health, services currently available at the Clinic include individual, couple, and family counselling, mental health nursing services, physician services, and educational programs and information. In addition, the Clinic provides group and social work services for people who are elderly and for Westside Clinic clients. Expanded services would include education and programs for other client populations, including those with chronic physical illnesses. ❖

Mental Health Commission of Canada

A transformed mental health system

Vision:

All people in Canada have the opportunity to achieve the best possible mental health and well-being.

Goals:

The seven goals for a transformed mental health system are:

1. People of all ages living with mental health problems and illnesses are actively engaged and supported in their journey of recovery and well-being.
2. Mental health is promoted, and mental health problems and illnesses are prevented wherever possible.
3. The mental health system responds to the diverse needs of all people living in Canada.
4. The role of families in promoting well-being and providing care is recognized, and their needs are supported.
5. People have equitable and timely access to appropriate and effective programs, treatments, services and supports that are seamlessly integrated around their needs.
6. Actions are informed by the best evidence based on multiple sources of knowledge, outcomes are measured, and research is advanced.
7. People living with mental health problems and illnesses are fully included as valued members of society.

Community Clinic Introduces CenteringPregnancy™

By Dr. Leane Bettin, Head of the Medical Group

The Community Clinic is pleased to announce the inauguration of a new model for prenatal care: CenteringPregnancy™. Pregnant women coming to both the Downtown Clinic and the Westside Clinic now have the opportunity to receive care in groups of 8 – 12 women with similar due dates. The group combines private physical assessment of each woman with time for discussion and learning with others in the group about pregnancy, birth and babies. Participants can bring a friend, family member or partner to the group.

To register for the Downtown Clinic program call 652-0300 or speak to your Community Clinic health care provider. If you are interested in participating in this program at the Westside Clinic speak to your Westside Clinic health care provider or phone 664-4310. ❖



Saskatoon Community Clinic staff participated in training sessions for the new CenteringPregnancy™ and CenteringParenting™ programs introduced at the clinic. Front left: Randine Sorowski, Erin Clarke, Leane Bettin, Narmin Ibrahim, Tessa Penrod, and Yan Wu. Back left: Hazel Javier, Ryan Meili, John Dosman, Luanne Hardlotte, Wendy Sutherland, Cheryl Hand, Mardi Apesland and Renee Nagus. Missing from photo: Della Magnusson

Health Disparities and Race: *Tim Wise's Enlightening Lecture in Saskatoon*

by Tracey Mitchell, CHSA Member

On St. Patrick's Day, 2011, a day that typically involves green attire and green beverages, some more critical issues of colour were brought to the attention of many Saskatonians. Anti-racist author and educator, Tim Wise spoke at the College of Medicine on racism and health inequities, one of many presentations during a jam-packed two days in the city. In his eloquent and powerful presentation, Wise shared these facts:

- White women in the United States with no high school diploma have better health outcomes than black women with college degrees.
- Infant mortality rates for babies born to black women with college degrees, good jobs and health insurance are higher than for babies born to white women with only eighth grade education, much lower income and no health insurance.
- Wealthy black people have significantly higher rates of hypertension and heart problems than white people in the same income bracket.

Wise warns against blaming these disparities entirely on genetic or behavioural differences between racialized groups. He cites many studies showing that stress responses to discrimination are the cause of significant health problems, such as hypertension. Contrary to what one might think, the stress response to subtle forms of discrimination is actually higher and causes more health problems than overt acts of racism. This is because when discrimination is veiled, individuals struggle with doubt over the cause of their mistreatment, leading to greater stress over longer periods of time.

Wise also cites studies that show that well-intentioned physicians frequently discriminate in the care they provide due to implicit bias. Wise notes that 70 out of 81 studies found that black cardiology patients received inferior care to white patients when actors of different races presented doctors with the same symptoms and scenarios. Wise noted that some medical schools are beginning to test for and correct implicit bias.

Locally, the Saskatoon Health Region's 2008 Health Disparity Report found that health disparities were strongly correlated to socio-economic status. Though disparities based on racial or cultural background were not as stark, some differences did appear, indicating, for instance, that First Nations youth had 13% higher incidence of depressed moods than non-First Nations youth where no socio-economic difference existed.

The Community Clinic has long recognized the importance of acknowledging race and working to eliminate health inequities. The Clinic's Mission Statement says: "social and economic factors such as racism and poverty can profoundly compromise the health of people we serve. We will act socially and politically to eliminate the negative effects of these factors on people's health." Tim Wise reminds us that we must do more to combat discrimination and challenge white privilege so that everyone may enjoy good health.

Tim Wise discusses these topics, among others in the video Colorblind: The Rise of Post-Racial Politics and the Retreat from Racial Equity, available from the Community Clinic's library. ♦



Dr. Ted Tuchinsky, one of the Saskatoon Community Clinic's first eight original physicians recently visited Saskatoon as a visiting lecturer at the University of Saskatchewan, School of Public Health speaking on "Beyond Medicare: A New Public Health" After leaving the Community Clinic he served as Deputy Minister of Health and Social Development, Province of Manitoba, served in senior level positions in the Ministry of Health, Israel, has been a professor at the Hebrew University and UCLA, and has published extensively on public health topics. He is seen here with our first Member Relations Director, Betsy Bury and retired Community Clinic physician, Dr. John Bury. We were pleased to have Dr. Tuchinsky return to Saskatoon including touring our Downtown and newly renovated Westside Clinic.

Sign Up for Our New Electronic Newsletter @

www.saskatooncommunityclinic.ca

Join our electronic mailing list! It's easy to do. We will send you e-mails to remind you about events, lecture series, programs, health news, members meetings and more.

Health and Wellness Series

The Saskatoon Community Clinic Counselling Department presents a *Health and Wellness Series* focused on maintaining and improving emotional health and well-being. Join us for the final session in this series.

Balance, Bounce and Being: Making Life Style Changes
with Norine Shewchuk BSW, RSW;
Maria Badrock BSW, RSW; and
Jocelyn Leham BSC, BA, M. Ed. (pending)
Monday June 13th 1:30 to 3:30

Everyone is welcome to attend
No pre-registration required

All talks will be held at the Saskatoon Community Clinic, Mel Langer Building, 424 1st Ave North
For more information call 664-4283

Board and Staff News

Retirement wishes to...

Dr. Diane Bekolay, Family Physician, who is retiring at the end of May after serving Community Clinics in Saskatoon and Prince Albert for 41 years! Thank you to Dr. Bekolay for her 17 years of dedication and service at our clinic. She will be missed by her patients and we wish her all the best in her retirement. We are recruiting to replace her.



Welcome to...

Dan Shaw, Accounting Clerk
Cheyenne Machiskinic and **Kayla Siewert**, Receptionists, Westside Clinic
Marcella McFawn and **Violet Munroe**, Aboriginal Health Workers, Westside Clinic

Farewell to...

Roberta Mansell, Accounting Clerk. Many thanks to Roberta for her dedication and contributions during her 16 years of service.

Seniors Corner

By Sandy Hagele,
Seniors Volunteer Coordinator



“Library Outreach Services”

The Seniors Advisory Council and our staff have been working closely with the Saskatoon Public Library Outreach Services.

We are very pleased to be working in partnership with the Library and other agencies in bringing a mobile computer lab out to Saskatoon seniors' residences and seniors' centres in 2011 to teach hands-on basic computer skills.

The Library has provided the Community Clinic the enclosed list of “Recommended Reading for Seniors” covering topics such as adapting to the changes brought on by retirement, financial and budget planning and coping with changes to health and well-being as we age.

Other services provided by the Library of special interest to seniors include:

- Large Print books, Talking Books on CD and Cassette Tape, Described Movies, Assistive Technology Equipment.
- Home Reader Services for those who are unable to leave their homes due to illness or disability.
- Book deposit to special care homes, seniors' apartments, and outreach facilities.

For more information, phone the Library Outreach Services Coordinator at 975-7565, or visit their website at www.saskatoonlibrary.ca.

Correction:

The spring issue of Focus, page 6, Updates to Vitamin D and Calcium Recommendations for Canadians should have read (right column chart, bottom row):

DRI for Calcium:

Pregnancy and Lactation		
14-18 years	1300 mg	3000mg
19-50 years	1000 mg	2500 mg

Our apologies to author Renee Nagus, Community Clinic Nutritionist as the mistake was made in the design process. Ingrid Larson, Editor.

Donations from January 22, 2011 - April 30, 2011

We gratefully received donations to the Saskatoon Community Clinic Foundation from the following individuals:

Donald G. Adams, Jack E. Adams, Nancy Allan, Betty Arthur, Catherine Lesley Biggs, Anne Blakeney, Millie Boucher, Marjorie Cathcart, Linda A. Charlton, Paul & Viola Coutu, Ed Decker, Lorna Doerkson, Graham Dove & Kathleen Slavin, Ewald Draeger, Margaret Durant, Ted & Audrey Gilroy, D. Brenda Harder, Aaltje Howe, Tim Hutchinson & Lorraine Salt, Mary P. Janzen, Jean Junor, Alex Kostyna, Lillian Laing, Winona Lambert, Arthur J. Matley, G. Allan McGuire, Margaret McNulty, Paul Mostoway, Rose Mykytyzyn, Randall & Isabelle Nelson, Estate of Paul Maurice Paulsen, Arnold & Lilly Petty, Roy Pinkerton, Raymond Pinto, Ted & Ida Postma, Marjaleena Repo, James Robbins, Wendy Roe, Robert Rutherford, Margarita Schellenberg, Sarah Schmidt, John W. Sheard, Margaret Shearer, Karl & Sarah Seeman, Phyllis Siemens, Gordon Taylor, Doreen Walmsley, David & Shirley Weary, Kay Williams, United Way of Saskatoon & Area, Carl Woydon, Evelyn Yuzik

In Honour of Rebecca Elder: Margaret Graham-Woloshyn

Donations Received in Memory:

In Memory of Allan Aberdeen: Gladys Bartley

In Memory of Corinne Appleton: Doug & Viola Appleton, Isabel Berntson, Maureen Cline, Sharon & Glen Down, Berna Jones Betty J. King, Winnifred J. Voigts

In Memory of Harold R. Baker: Hazel Kelly, Mary A. Richiger

In Memory of Hon. Allan Blakeney: Elaine Orvedahl, Wilma & Laverne Regehr

In Memory of Dan Braidek: John & Joan Braidek

In Memory of T. C. Douglas: Jack Newman

In Memory of Dr. Carla Eisenhauer: Margaret Cloak, Dan & Barbara Danaher, Joan S. Divall, Saskatchewan College of Family Physicians

In Memory of Alvin M. (Allie) Hammersmith: Beverly D. Wilson

In Memory of Mrs. Patricia Holtslander: Jim Holtslander

In Memory of Darcey John & Tommy Fink: Robert Fink

In Memory of J. Gren Jones: Isobel Jones

In Memory of George Kowalenko: Elsie Kowalenko

In Memory of Albert Landry: Mary Landry

In Memory of Fran Lovely: Stella Hilderman

In Memory of Rene Lussier: Barbara Lussier

In Memory of James Mitchell: Laura I. Mitchell

In Memory of Marie Murray: Rupert Murray

In Memory of Jean Newman: Jack Newman

In Memory of Sheldon Proznick: Fred & Olga Proznick

In Memory of Sheila Steele: Laura M. Jones

In Memory of Florence Wotherspoon: Margaret Cooper

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