

Focus

Saskatoon
Community
Clinic
"Your Health
Care Co-op"



Summer, 2008
Volume 44, Number 2

Community Health Services (Saskatoon) Association Ltd.
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"May you live in interesting times." *(Chinese proverb)*

By Cheryl Loadman, CHSA President

Interesting times can be the most difficult -- yet they can also be the most rewarding, too. It is during times like this that we are challenged, tested, and occasionally, see ourselves rise to be the best we can be.

Looking into the future for the Saskatoon Community Clinic we recognize that these are indeed interesting times. Most recently the election of the Saskatchewan Party heralds in a new direction and vision for health and social programming in Saskatchewan. Front and centre of their early decisions has been the withdrawal of funding from Station 20 West: a decision bearing heavily upon our Clinic, and reshaping our community and its energy. Other decisions have seen established programs enhanced, other programs cut back, and a number of programs abolished. We can expect this will be the first of many changes that will be commonplace in our lives over the next year or two.

Change does not necessarily spell bad outcomes. It does however require adjustment. A first step on this road for our Clinic has been meeting with our newly elected MLAs and more recently, the Minister of Health, Don McMorris. From them we have asked for changes in the way our government approaches health disparities. Delivering proactive health care to our community means more staff, more services and more programs. So we asked for enhanced funding to support our ongoing operations, and to assist us in growing innovative solutions, responsive to the needs of our community.

We are also going to be asking this new government to take action to remedy the mounting social ills afflicting our community: housing shortages and escalating rents, the rising costs of food, the persistence of callous racism and

intolerance and the many other social ills afflicting our community. At a time when our economy is "booming", people need assurances that somebody out there cares about them, is listening to them - that they are not just a disposable underclass. This government must demonstrate courageous leadership and take ownership of conscious action. No Saskatchewan government can claim to have a balanced budget when a deficit exists in our social economy.

Government cannot bear this burden alone. Our Clinic understands that in interesting times community leadership is a necessity. We ask that the government work with us in a collective spirit embodied in a respectful dialogue and collaborative relationships. People-based solutions borne from our common purpose equates to opportunity for our community. Yet, uniting together does not just happen. Rather it is a product of focused effort, sustained hard work and selfless purpose.

Lastly, we recognize that as we all adjust to these very interesting times we have to look to ourselves and our partners to create and share their energy and vision. And we must look to our members and employees to provide us with their steady guidance, their dogged determination and their unwavering commitment to the social good - and their patience, too. Achieving all this will mean we are the best that we can be.

CHSA Annual Meeting

Join us for our Annual Meeting

Tuesday, June 10, 2008

Mayfair United Church

See page 3 for details.



Board and staff members with Health Minister Don McMorris at Westside Clinic April 25, 2008. From left are: Gary Beaudin, Board member; Minister McMorris; Cheryl Loadman, President; Brenda Kinniewess, Aboriginal Diabetes Outreach Worker and Don Bear, Aboriginal Diabetes Outreach Coordinator.

Saskatoon Community Clinic Foundation President's Report for the Year 2007

By Laurence (Laurie) Thompson, Foundation President

In 2007 you entrusted the Saskatoon Community Clinic Foundation with over \$78,000. This is the second highest fund-raising the Foundation has ever achieved. Our heartfelt thank you to all those who have contributed bequests and donations in the past year. You assist us to support important programs and services that otherwise it would not be possible to provide.

This year your funds supported transportation for Clinic seniors group programs and appointments, replaced an outdated lab analyzer, provided good food boxes for community diabetes programming, supported Westside Clinic programs with food, transportation, and childcare, assisted continuing education for staff, and purchased a voice amplifier for conversations between health care providers and hard-of-hearing clients, a big screen TV for seniors programs, and books and pamphlets for

the Health Information Centre.

The Foundation Board continues to anticipate major capital investments in improving primary health care services in central and westside Saskatoon. We have organized our finances and laid the groundwork so we are ready to respond to large capital and project funding requests we expect in the next few years.

During 2007, the Community Clinic Foundation Board was made up of the following volunteers: Evan Carlson, Nancy Carmichael, Carole Courtney, Glenda Gartner, Nikki Gerrard, Felix Hoehn, Patti Kehrer, Cheryl Loadman, Judith Martin, Mary Ogresko, Ewa Olszynski and Milton (Mickey) Woodard.

Thank you to all of you for your time and effort.

Clinic Reincorporates under Co-operatives Act

By Ingrid Larson, Membership Director

In February 2008 our Association was reincorporated under *The Co-operatives Act*. When the Association was organized, the provincial government was not able to fund our services under the co-operative legislation. As a result, the founders of the Association incorporated under the *Mutual Hospital and Benefits Act*. Provincial legislation has since changed.

Re-incorporation under *The Co-operatives Act* is in keeping with our history and values. Since 1962 the Board has governed the organization according to the International Co-operative Alliance Principles, for example

we have voluntary, open membership and democratic governance. The co-operative movement has also always embraced Community Clinics as part of the co-op family.

There are some small changes that members will notice. For example, family memberships will now be called Joint Memberships and assessment fees will be referred to as annual service fees. A copy of the *Co-operatives Act* is available from the Government of Saskatchewan. A copy of the Association's by-laws is available by contacting the Member Relation Department at the Clinic.

Live Well™ with Chronic Conditions

The Stanford Chronic Disease Management Program

This is a program that provides practical suggestions and support, which builds confidence in coping with the everyday challenges of a chronic condition.

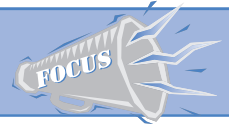
This program is for care givers and/or individuals who have chronic health conditions such as: chronic pain, arthritis, heart disease, chronic lung disease, Parkinson's disease, stroke/spinal cord injury, osteoporosis, Multiple Sclerosis, and kidney disease.

This is a free, six week program lead by two trained leaders. You will learn to take control of your chronic illness by using skills such as symptom management, communication skill, relaxation techniques, goal setting and problem solving.

The Community Clinic will offer a session beginning September 16, 2008 at 7 p.m. If you would like to register or require further information contact Trudy Myers, Director of Physical Therapy, 664-4260.



Annual Meeting Notice



Community Health Services
(Saskatoon) Association Ltd.

Tuesday, June 10, 2008

**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
2. Reading and disposal of minutes of preceding annual general meeting
3. Business arising out of minutes
4. Reports of President, Directors, Administrator, Medical Director, Treasurer and other Officers
 - 4.1 Community Clinic expansion
5. Report of Auditor and consideration of financial statement
6. Discussion, consideration and disposal of reports set out in 4 and 5
7. Break
8. Resolutions, recommendations and bylaws
9. Election of directors
10. Reports of special committees
11. Unfinished business
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 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 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.

The Sublime Joy of Weight Loss (part 2)

By Dr. Louise Gagné, Family Physician

Dr. Louise Gagné is a family physician at the Community Clinic. She has completed a two year fellowship in integrative medicine through the University of Arizona.

In part one of this series, we explored ways to avoid hunger ‘attacks’ that may cause us to crave (and over eat) sweet/starchy foods. Eating balanced meals with low glycemic index (GI) carbohydrates is a great place to start on your weight reduction plan. Keeping blood sugar levels even throughout the day can lower excessive insulin levels and allow us to burn our fat stores. It can help to prevent headaches, mood swings, fatigue and irritability. It can help us to feel more in the mood to be active. Controlling blood sugar levels and lowering excessive insulin release also lowers levels of stress hormones that can damage our health.

What about your metabolic rate? This is the ‘idle speed’ that your body runs at and it determines how many calories you burn when at rest. It is important to understand that, even at rest, our muscle tissue burns 70 times more calories than our fat tissue! This means that if we build more muscle tissue, we burn more calories, even when we are sitting in front of the television or reading. Both aerobic exercise and weight training are useful in building more muscle. Of course, exercise itself will burn some calories, but the benefits continue for you around the clock when you raise your metabolic rate.

‘Exercise’ doesn’t need to be at the gym. We all need to find ways to exercise that are interesting and rewarding to do. Consider what you enjoy (or what you once enjoyed) and what might fit with your schedule. Moving to music in some way can be a wonderful form of exercise. Small everyday choices can also add up like taking the stairs, walking to work, lifting weights a few times per week, etc. Even people who fidget more at their desks have been found to be more successful at losing weight!

If you are someone who tends to overeat when you are tired, try to address this issue. Are you short of sleep? See if you can arrange your day so that you have a longer, more restful sleep; most people need 7-8 hours per night. Develop a regular sleep routine and sleep in a completely darkened room. Research has shown that sleep deprivation leads to increased hunger and increased craving for calorie dense, high carbohydrate foods. If you are getting adequate sleep and still tired, ask your doctor to check for sleep apnea, anemia, hypothyroidism, diabetes, depression or other medical causes of fatigue.

Then there’s stress—we all have it to some degree. If you often feel overstressed or anxious, consider starting some kind of mind/body practice. (See recent focus articles on this

topic.) Self hypnosis, guided imagery, meditation, yoga, breathing exercises or biofeedback games can all help to teach us how to truly relax. Chronic stress tends to result in weight gain by causing levels of hormones such as cortisol to rise. Elevated cortisol levels lead to an increase in hunger and tend to cause an accumulation of fat around the waist. To make matters even worse, this abdominal fat itself produces hormones that cause even more weight gain! Reducing stress is a key strategy in your weight loss program. When you feel less stressed, you will be more motivated to eat well and to exercise. And, conversely, eating well and exercising will help you to feel more relaxed! So, be kind to yourself. Take yourself to parasympathetic nervous system land where you can refresh your spirit (see *Mind Body Medicine, Focus Fall and Winter, 2007*).

Here is a summary of tips for successful weight loss:

1. Plan for a slow, steady weight loss with an occasional plateau. Find ways to encourage and reward yourself along the way.
2. Eat regular, balanced meals; include a protein food at every meal. Remember that eating breakfast will greatly increase your chances of successfully losing weight! Here are some examples of healthy, low GI breakfasts:
 - a. Large flake oatmeal (sprinkle with lightly toasted slivered almonds, cinnamon and a small amount of brown sugar), bowl of mixed blueberries and raspberries, 1 poached egg.
 - b. All Bran cereal with 1% milk, low fat yogurt, an apple.
 - c. Cooked quinoa cereal, (try tossing some pecans and dried cranberries on top), peaches, and 1 soft boiled egg.
 - d. Smoothie with soy milk, yogurt, banana, berries and wheat germ. Keep foods such as nuts, soy nuts, apples, yogurt or cheese and whole grain crackers on hand so that you can have a low GI snack mid afternoon or anytime you can feel yourself heading for a ‘hunger attack’.
3. Get enough sleep. Address other causes of fatigue.
4. Reduce your stress level. Find some kind of mind/body practice that works for you.
5. Build more muscle.
6. Increase the numbers of fruits and vegetables in your diet.
7. Remember to treat yourself with loving kindness and compassion. When you look in the mirror, greet yourself as a beloved friend.

Bon Voyage!

Recommended reading:

1. *The Low GI Diet Revolution* by Brand-Miller, Foster-Powell and McMillan-Price
2. *Ultra-metabolism* by Mark Hyman M.D.

Community Clinic Seniors Groups Entertaining, Educational and Interesting

By Mavis Carleton, Seniors Group Participant

Old age does not come alone, it brings its friends. Unfortunately for many seniors, these 'friends' include isolation and loneliness. These two conditions are harmful to us, both physically and emotionally. Socialization with others is an important step towards beating depression and all that goes with it. That is why the Community Clinic's Seniors Groups, "Happy Gang", and "Silver Threads" are so important to our well being.

Participants join these groups after being referred by their Community Clinic health care provider. The groups are coordinated by Clinic staff – Sandy Hagele, Brenda Goossen and Norine Shewchuk with help from Chris and Wanda, Clinic receptionists. The bi-weekly sessions are entertaining, educational and interesting. Activities can include speakers, films, music and discussion. We look forward to our gatherings as a time of fellowship and enjoyment. It is always a delight when we receive our notices, and the cheery follow-up calls from the Clinic staff.

Although occasionally we meet outside the Clinic most of

our sessions are held at the Mel Langer Building, or '424', as it is commonly called. It is a very welcoming and inviting space, and we enter knowing that the co-ordinators have done their utmost to provide us with a special afternoon. When I walk in, I am always reminded of a sign I once read that stated "There are no strangers here, only friends you haven't met".



"Silver Threads Participants", from left to right, Brenda Goossen, OT/Group Co-ordinator; Jo Scappaticci, Volunteer; Beatrice Scyrup, Group member; Helen Baker, Group member.

There are a wonderful group of volunteers who warmly meet and greet us, and serve a delicious luncheon. We are extremely grateful to all who make these afternoons possible.

We would be remiss if we did not thank the Clinic for providing subsidized transportation to the groups. This is funded by the Clinic's Meger Seniors Transportation Fund

and member donations. Without the subsidized transportation, it would be virtually impossible for many of us to attend.

Thank you once again to our Community Clinic for seeing to the needs of the elderly in this area.

Board and Staff News

Welcome to...



Donna Rothenburger, Receptionist, SWITCH Clinic

Teresa Kornelson, Awasis KidsFirst Program Coordinator

Heather Patterson, Awasis KidsFirst Home Visitor

Dorothy Griffith, Head of Nursing

Have your say!

The Focus Editorial Committee's responsibilities include responding to members' suggestions about Focus. We value your comments. The members of the Editorial Committee are Grace Milashenko, Carla Atherton and Margaret Shearer. You can contact a committee member by leaving a message at 652-0300, Ext. 243.

Tai Chi - The Moving Meditation

By Jone Barry, Nurse Practitioner

We have heard all about the negative effects of stress from our environment. We are told not to stress-out and to spend time relaxing. Easier said than done.

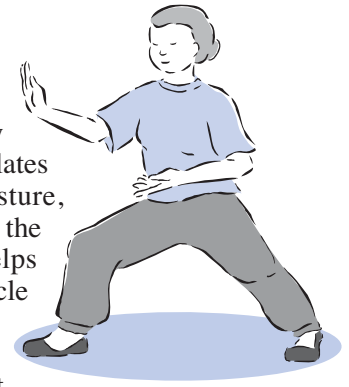
The flight or fight stress reaction is important to help us cope in our busy environment. Cortisol is a naturally occurring hormone that is released by the adrenal glands when we are under stress. This hormone helps to rev up our system when we are trying to run from a dangerous situation or needing to defend ourselves. Unfortunately, there is a down side to having too much of this anti-inflammatory hormone floating around like high blood pressure, poor sleep and insulin resistance.

If you are looking for a way to reduce stress both mentally and physically, then Tai Chi is for you. Tai Chi had its beginnings with thirteen fundamental postures in the 13th century. These postures have evolved into the “moving meditation” we see today. A series of forms or positions are carried out in sequence to imitate the natural movements of animals and birds. The forms are executed alone or in groups using slow soft movements that flow evenly from one position to the next.

The origins of Tai Chi are based on Chinese Taoist philosophy. This philosophy expects that the world will change, therefore, we should not fight the change but work with it. Yin and Yang is a Chinese concept related to change. There are always forces working in opposition to each other. The balance of these opposing forces are complementary as they work to keep the universe and our lives in balance. Tai Chi reflects this balance with its rocking flowing movements representing change and harmony.

The purpose of the Tai Chi form is to create streams of energy flowing through the body. In Chinese teachings the concept of “chi” exists. Chi is thought to be a life energy that circulates through the body enhancing health and vitality. Each different position creates a variation of this energy flow leaving you with a feeling of well-being.

Practicing Tai Chi has many physical benefits. Tai Chi stimulates circulation, improves posture, reduces joint pain, improves the immune system and helps digestion. It also increases muscle tone, flexibility, strength, improves balance and co-ordination. The low impact movements are well tolerated by people who have joint problems such as osteoarthritis and rheumatoid arthritis.



A small study was done by Dr. Timothy Hain in 1994 for the Office of Alternative Medicine. The purpose of the study was to see if daily practice of Tai Chi would improve balance. In just eight weeks, there were significant improvements in posture and balance. Improved balance and flexibility can reduce the risk of falls.

In addition, blood pressure can be reduced, chronic pain relieved and cardiovascular health improved. It is no surprise that gerontologists and rheumatologists are recommending this as a healthy form of exercise.

Tai Chi does not just provide physical benefits; it also affects the mind and the spirit. Tai Chi focuses thought through its moving meditation so that the mind and body work together as one. This will lower cortisol levels, improve concentration, reduce anxiety and depression and improve quality of sleep.

Before you start any exercise program you should speak with your doctor, especially if you have a chronic illness. Work with a qualified instructor to avoid injury. There are numerous Tai Chi clubs throughout the city. Check your Leisure Guide or community bulletins for a club near you. Tai Chi is not expensive. You will need loose fitting clothing and flat soled shoes. No special equipment is required.

Give Tai Chi a try if you are looking for a way to relieve stress and control or prevent chronic illnesses.

The Student Experience at the Community Clinic

By Ingrid Larson, Membership Director

The Community Clinic is fortunate in being located in a community with several post-secondary institutions which train students in the many health and social disciplines offered in our setting. This allows our organization to provide opportunities for students to gain professional experience in our co-operative primary health care model as well as enriching the Community Clinic experience for our staff and patients.

Every year students do supervised placements at the main and Westside clinics in family medicine, counselling, physical therapy, nursing, and nutrition, to name a few. These can be for several days or for several weeks or months.

Students also enrich the experience at the Community Clinic by undertaking or assisting with research projects, as members and patients and through partnership programs,

such as SWITCH, the Student Wellness Initiative Toward Community Health, a student run health service operating out of our Westside Clinic. The Community Clinic supports SWITCH by providing space, nursing and reception staff and mentorship. In turn the students involved in SWITCH have allowed our organization to offer more services at our Westside Clinic.

In addition many of our staff work with students in other ways in our community. For example, in addition to supervising student doctors in-clinic, we have physicians who teach courses or lecture in the College of Medicine. Other doctors are mentors to students as part of the SWITCH clinics. Our Administrator, Patrick Lapointe and myself do presentations on the Community Clinic model for university classes and for student tours of our facilities. Cheryl Hand, Westside Co-coordinator provides education to students interested in learning more about the challenges of working in the inner city through student plunges organized by International Interdisciplinary Community University Student Partnership (IICUSP), a unique partnership of non-profit organizations.

We have also hosted visiting out-of-province students. For example, a fourth year UBC medical student, with an interest in health care co-operatives, did a month-long

placement in 2007 with the Saskatoon and Prince Albert co-operative health clinics.

From time-to-time, you may, as a patient of the Community Clinic, have the opportunity to be provided services by a student. They will identify themselves as a student and are under the supervision of our staff. We appreciate your support in helping them become familiar with our unique model of primary health care.



Neal Zaleski, Masters of Physical Therapy student and Tammy Nelson, Social Work student currently doing student placements at the Community Clinic.

Handicraft Club Report

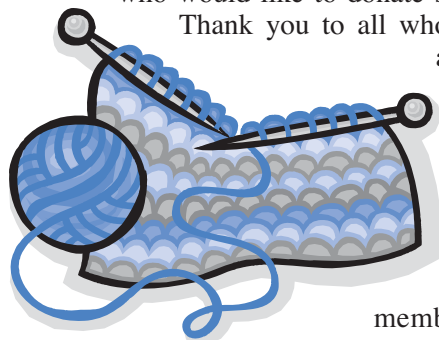
by June Candline, Secretary

Members with an interest in making and selling crafts and baking are invited to join our Handicraft Club. We meet at the Clinic the fourth Tuesday of every month, at 1:30 p.m., excluding June and July. We hold showcase sales at the back door of the main clinic the first Tuesday of the month from 9 to 3 p.m. at which we sell our crafts and baking.

The purpose of our Club is to provide opportunities for like-minded members to get together to make crafts, socialize and give back to our Clinic and community.

We have a drop-off box at the main Clinic for members who would like to donate supplies to our Club.

Thank you to all who have donated yarn and material. We appreciate it.



Over the years our club has funded many worthwhile projects. For example, our members make blankets

and quilts for Linus. These are given to patients in hospital, cancer patients, babies, children and teens, as well as those in diabetic camps. These homemade blankets provide comfort during stressful times and are taken home when they leave the hospital.

We knit squares for Blankets for Canada, which are delivered to The Wool Emporium where volunteers sew them into blankets for the homeless. We also make knitted finger puppets which are given to children at the clinic who are having examinations or needles.

The Handicraft Club gives a quilt to the first baby born to a clinic patient after July 2nd, the anniversary date of the Clinic. This quilt is presented in August, the first meeting of our year, along with a special cake and refreshments.

One third of all money from handicrafts and baking sold at our backdoor sales is used to fund items requested by our staff for the benefit of patients. Two thirds of the proceeds go to the vendor to cover supplies.

If you are interested in joining our club please call Norine Shewchuk at 664-4270.

Donations January 1, 2008 – April 17, 2008

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

Don Adams, Jack Adams, Ruben & Joyce Amundson, Betty Arthur, Douglas Badger, Don Bear, Joanne Beckett, Catherine Lesley Biggs, Mary Black, Valerie Bleakney, Millie Boucher, John & Joan Braidek, John & Ina Brockelbank, Glenda Carter-Squire, Linda Charlton, Ann Coxworth, Ed & Marlene Decker, Graham Dove & Kathleen Slavin, Ewald Draeger, Erika Dyck, Gordon S. Fletcher, Frank Gerstmar, Audrey Gilroy, Dorothy Griffith, William & Margaret Heffernan, William & Jessie Hope, Laurel & Ken Jensen, Frederick J. Kidd, Marian Lane, Ingrid Larson, Roy E. Ludwig, Margaret E. McNulty, Marie & Rupert Murray, Randall & Isabelle Nelson, Sarah Neudorf, Jack Newman, Lila O'Grady, Daniel Painchaud, Myrtle Pennock, Arnold & Lillian Petty, Raymond Pinto, Polly Popoff, Ted & Ida Postma, Olga & Fred Proznick, Olga J. Proznick, Anna Ratzlaff, Marjaleena Repo, Robert & Edith Rutherford, Anne Savinkoff, Margarita Schellenberg, John & Anne Sheard, Maisie J. Shiell, Robert & Marie Stodler, Harold Tilley, Fred Vanlanduyt, Doreen Walmsley, Richard & E. Joan West, Kay Williams, Ian & Margaret Wilson, Mary F. Wittenberg, United Community Funds of Saskatoon, Lily Yee

Donations Received in Memory:

In Memory of Mrs. Norman Brown: Peter Brown
In Memory of Jane Clark: William L. Clark
In Memory of Hartley Fredeen: Margaret Fredeen
In Memory of Garth Hilderman: Stella Hilderman
In Memory of Darcey John & Tommy Fink: Robert Fink

In Memory of J. Gren Jones: Isobel Jones
In Memory of Mary Ellen Kidd: Frederick J. Kidd
In Memory of George Kowalenko: Elsie Kowalenko
In Memory of Joanne Kutz: John & Betsy Bury, Margaret Cloak, Margaret "Peggy" Durant
In Memory of John Lostowski: AGRA Foundations Limited - Edmonton, Mary Lou Gural, Peter & Violet Kapeluck
In Memory of Jean Newman: Jack Newman
In Memory of Douglas Parkinson: Ruby J. Parkinson
In Memory of Fred Pfeifer: Joy Beach & Ross Hinthier
In Memory of Wes Robbins: John & Ina Brockelbank, Harold E. Chapman, Co-operative Superannuation Society, Gordon & Illa Knudsen, Jonathan & Lucille Lamb, Norma Linwood, Terri N. Lohela, Jack Newman, Joyce Opseth, Karen Prisciak, Bill Richards & Sandra Beardsall, St. Andrews College
In Memory of Mike Shutiak: Mary Shutiak
In Memory of Sheila Steele: Laura M. Jones
In Memory of Edgar Wallace Stinson: Stan & Yvonne Green, Warren & Sara Hewitt, Howard & Elizabeth Klein, Terri Lohela & Kathy Muttart, Syd M. Potts, Gwen Russell, Jan Norris & Ken Sailor, Margaret K. Shearer, Myrna Helen Sprecher, Jim Spinney
In Memory of Susan Tarasoff: Sam & Catherine Antifaev
In Memory of Karen Wurtz: Oliver, Norm & Connie Wurtz

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