

# Focus

Saskatoon  
Community  
Clinic  
"Your Health  
Care Co-op"



Winter, 2014  
Volume 50, Number 4

Community Health Services (Saskatoon) Association Ltd.  
455 Second Avenue North, Saskatoon, Saskatchewan S7K 2C2

Phone (306) 652-0300  
Fax (306) 664-4120

## Working Together to Develop a Poverty Reduction Plan

By *Giustino Garcea, Member and Public Relations Coordinator*

It is well recognized that medical treatments and lifestyle choices are not the only factors that determine the length of a person's life or whether they are healthy or sick. Rather, individual health is directly affected by the conditions under which people live. The quality of food and housing, income and employment levels, educational attainment and social status have a profound impact on health status. Collectively, these and many other factors are known as the social determinants of health.

Over the past decade, we've seen a shift in the focus of Canada's healthcare system from an emphasis on acute care of disease and illness, to preventative treatments that address social determinants and other underlying causes of illness.

One of the groups working on these concerns in Saskatchewan is Upstream. It is a local movement of leading experts and concerned citizens who seek "to create a healthy society through evidence-based, people-centered ideas." Recently, Upstream and other community partners launched the Poverty Costs Campaign to raise awareness about the

effects of poverty and to lobby the provincial government for a poverty reduction strategy. In October, the Campaign released a report entitled *Poverty Costs Saskatchewan: A New Approach to Prosperity For All*. This report analyzes the effects of poverty in Saskatchewan and indicates the need for a comprehensive poverty reduction plan. They estimate that dealing with poverty-related issues costs Saskatchewan \$3.8 billion annually including \$420 million in heightened health care service usage.

With the intent of supporting a provincial poverty reduction strategy, and in keeping with our holistic vision of community health which is focused on both prevention and treatment, our members passed the following resolution at the Annual General Meeting in June 2014:

Whereas Upstream has provided a local/provincial context for health outcomes due to poverty in Saskatchewan;

Whereas reducing poverty (including a living wage, affordable housing, and educational and recreational

*Continued on page 2...*



### Inside this Issue of Focus

- Prairie Hospice Society. . . . . pg 2
- Interim Board Report. . . . . pg 3
- Semi-Annual Meeting Notice . . . . . pg 3
- Emotional Intelligence . . . . . pg 4
- Protect Yourself From Fraud . . . . . pg 5
- Private MRI. . . . . pg 6
- Board Governance Review . . . . . pg 7

### Attend the Semi-Annual Meeting

**Wednesday, January 14, 2015, 7 p.m.**  
**(registration 6:30 p.m.)**

**Guest presentation/discussion:**  
**Improving Mental Health Services**  
**in Saskatchewan**

Presented by David Nelson, Executive Director,  
Canadian Mental Health Association – Saskatchewan  
Region with responses from Community Clinic  
staff and members

facilities) leads to better health outcomes for all sectors of society;

Whereas poverty perpetuates and exacerbates negative health outcomes for those living in poverty; and

Whereas a provincial strategy to reduce poverty will also decrease the health care and social costs borne by the Province;

BE IT RESOLVED that the Province of Saskatchewan forthwith adopt and implement an anti-poverty strategy for Saskatchewan.

In recognition of the need for action, the provincial government announced in its recent Speech from the Throne

that in the next few months, it will engage in community consultations to gather input for the development of a Poverty Reduction Strategy.

The announcement was heralded by our Board and others in the community including Upstream, the Saskatoon Anti-Poverty Coalition and the Saskatoon Health Region, all of whom have been seeking such a strategy.

Allison Robertson, Poverty Costs campaign spokes person, has said that poverty “is very complex and there are multiple and interconnected barriers people face. We need to find out what community priorities are and think broadly about how to best support the most vulnerable in our community.” ❖

## Prairie Hospice Society: “When Hearts Soar”

*By Doug Borrowman & Pam Reilly-Bruce, CHSA Member*

Two years ago, we told you about a small group of passionate people wanting to create Saskatoon’s first hospice, a hospice without walls. Today, we can report that we have accomplished it!

Prairie Hospice was organized to respond to the end-of-life needs identified by the community. Our “Hospice without Walls” program provides non-medical care and support for people in their homes and care settings. Volunteers are carefully matched with clients to accompany them and their loved ones on their end-of-life journey. Trained volunteers are the heart of hospice. Within the first 15 months of offering its services, Prairie Hospice received 91 referrals and provided over 2,050 hours of support to clients and their families. In addition, our 50 volunteers (young and older) invested over 1,800 hours in training time, group support meetings and administrative assistance. Our governing board has in the past and continues to advocate for quality end-of-life care in the community.

Prairie Hospice has proven that a committed group of people can realize big change in a short period of time.

The Saskatoon Health Region estimates that, annually, as many as 600 residents of the Saskatoon area would be candidates for hospice care in their own homes or in a residential hospice. Both residential hospices and Prairie Hospice Society services are needed in our community. The residential hospice recently announced by the Saskatoon Health Region is an important further step in meeting the needs for hospice services in our community.

Our volunteer training session is full this November, but we run two volunteer training sessions each year. Please visit our website, [www.prairiehospice.org](http://www.prairiehospice.org) to find out more about Prairie Hospice, our referral process or how to become a volunteer. We are also a registered charity and, like many new charities, we are in constant need of donations. You are also welcome to contact us by phone at (306) 249-5554. We look forward to speaking with you. ❖

### Downtown Clinic Renovations



Visitors to our Downtown Clinic over the next month will see renovations taking place in the central core of the building upstairs. The interior space of the building is being renovated to allow for better flow of patients and improved workspace for our reception, health records and billing staff. Signs will be posted to guide you around the areas undergoing construction. Thank you for your patience and understanding for any disruption and noise as we take on this initiative.



## Interim Board Report

By Anne Doucette, President



Anne Doucette

Greetings from your Board of Directors. Your Board members have had a busy time since I last reported. We welcomed two new Board members, Diane Ewert and Bill Allen and one returning member, Twila Leflar.

There have been several new Board initiatives. Under Bill Davies' guidance, we are undertaking a Board Governance Review, something that has not been done for some years. We have expressed our concerns with the province's proposal to undermine universal health care by considering private MRI clinics. I would like to extend thanks to Stan Rice for his lead on this issue. The Member Services Committee, with Diane Ewert, as chairperson, has been busy organizing the semi-annual meeting and helping in the development of a social media policy.

Rachel Gough has been recently appointed as our new chairperson for the Political and Social Action Committee. Our Operations Committee continues to monitor our finances and operations under the direction of the Committee chairperson, Glen Kovatch.

We said a sad goodbye to our past Vice-President, Melanie Medlicott, who had to step down for personal reasons. She is already missed for her insight and good humour. Best wishes to her in her retirement. ❖

## Mittens, Hats and Scarves Needed!

Westside Clinic needs donations of hats, mittens and scarves. The greatest need is for youth sizes, but adult sizes are also appreciated. Please drop off your donations at Westside Clinic, 1528 20th St. W. You can also mark them "Westside Donation" and drop them off at the front reception desk of the Downtown Clinic.

Thank you for your support!

**Saskatoon Community Clinic**  
Community Health Services (Saskatoon) Association Ltd.

## Semi-annual Meeting Notice

*Wednesday, January 14, 2015*

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

**Mayfair United Church Hall**  
**902 33rd Street West, Saskatoon**

### Agenda

1. Introduction
2. Summary of minutes of previous annual meeting
3. Interim report by Board Chairperson
4. Approval of annual service fee
5. Presentation/Discussion

### Improving Mental Health Services in Saskatchewan

*Presented by David Nelson, Executive Director,  
Canadian Mental Health Association – Saskatchewan  
Region including responses from Community  
Clinic staff and members*

6. Written resolutions recommending action to the Board
7. Election to the Board of Directors  
(one position open for election)
8. Announcements
9. Adjournment

If you would like to run for election, require transportation, childcare or have a resolution to submit phone Member Relations at 306-664-4243 or e-mail [memberrelations@communityclinic.sk.ca](mailto:memberrelations@communityclinic.sk.ca)

## Reception Phone Number

On December 8th, 2014 the Community Clinic implemented a new telephone system. This change includes a centralized reception phone number.



To contact your physician's receptionist patients should now phone 306-652-0300.



Thank you for your patience as we implement this change.

## Emotional Intelligence

By Norine Shewchuk, MSW, Community Clinic Counsellor



Norine Shewchuk

As we live day-to-day, we often wonder why some people seem so put together mentally and emotionally, while others are not. We also wonder why some people seem to excel at most of what they do, while others struggle. If questions like this make you ponder, you might want to learn more about a new twist in considering personal “attributes” — one’s Emotional Intelligence (EQ). Emotional Intelligence is getting so much recognition that it

is considered to be more highly recognized by human resource officials than Intelligence Quotients (IQ).

With respect to being healthy and happy, we know personal well-being and self-care play a huge part in how individuals survive and thrive. Education, experience, access to resources and support networks also contribute. We now know Emotional Intelligence plays a significant role and shows through in all interactions. Emotional Intelligence impacts how one carries out their work, lives their life and interacts with family and friends.

Emotional Intelligence is hard to identify and measure. As social workers and counsellors we are taught that it is a type of intelligence that speaks to the ability to observe, assess, appreciate and manage emotions and behaviours. We accept that the emotional mind is far quicker than the rationale mind. Our emotional mind springs into action and reacts, without pausing to consider what it is doing. It is known that the mind’s quickness, if left untamed, can preclude any deliberate, analytical reflection. Toxic emotions can be very unhealthy. They can put our physical health at as much risk as chain-smoking. Increasing our Emotional Intelligence and achieving a healthy state of emotional balance protects our

health and well-being. Emotional Intelligence addresses the ways in which individuals function with respect to self-awareness, self-management, social awareness and relationship management.

As we mature we all learn emotional lessons. Emotional experiences, whether good or bad, shape our emotional circuits. Depending on what we learn and perceive, we either become adept or inept at coping with the challenges of daily living. Childhood and adolescence experiences are the critical windows of time in which we learn the essential emotional habits that will govern our lives. Our genetic heritage plays a role too — it endows each of us with a series of emotional set-points that determine our temperament.

We can get a handle on our pre-programmed emotional behaviours and can make effective changes. Temperament is not destiny and our past does not control our future. The power to take action and become more emotionally intelligent is up to us. Human competencies, such as self-awareness, self-control, empathy, the art of listening, conflict resolution skills and basic cooperation are essential skills. Deficiencies in these areas can put us at risk of depression, a life of violence, eating disorders and drug abuse. We need to recognize and embrace that we have two minds; one that thinks and one that feels. Emotional Intelligence training helps individuals develop effective habits. Useful techniques can be learned and emotions can be honed and successfully managed. At any age, we can learn skills to subdue destructive and/or self-defeating emotional reactions.

Information on Emotional Intelligence is available through the Saskatoon Community Clinic Counselling and Community Services Department, at your public libraries, and at training sessions occasionally offered in your locality. Sessions on Emotional Intelligence are also offered at the Saskatoon Community Clinic, Seniors of Tomorrow Group. Please call Norine at 306-664-4270 for further information.

### ~ 2012 Anniversary Celebration Video ~

A video production of our Anniversary Birthday Bash held on July 3rd, 2012 has been made available by member Don Kossick.

The video is an important record of the event which included dramatic readings and presentations about our history, threats to our publicly funded healthcare system and future opportunities.

To view the video go to [www.youtube.com](http://www.youtube.com) and type in the search bar: Celebrating and Defending Public Health Care.



# Protect Yourself From Fraud

By Giustino Garcea, Member and Public Relations Coordinator



The 'Seniors of Tomorrow' group hosted a 'Protect Yourself from Fraud' information session in April 2013. The session provided information on how to protect oneself, and loved ones, from various scams and fraudulent activities. The session included presentations from Sgt. Velda Beaman of the Saskatoon Police Service, as well as Joan Bell of the Senior's Advisory Council which we have summarized below.

Scammers and fraudsters are increasingly becoming more sophisticated and tech-savvy in conducting scams. Thus, protection and prevention requires education and vigilance for everyone. Sgt. Beaman recommends maintaining an appropriate level of suspicion and scrutiny whenever you are contacted by a stranger regarding any type of transaction. Do not allow yourself to be pressured to act immediately or keep anything secret. Rather, always take the time to do some research and talk to a person you trust, especially before making any types of financial commitments.

The following are examples of scams that have been conducted in the Saskatoon area:

- **Hearing Aids:** People in Saskatoon and Alberta have been sold defective hearing aids. Be sure to only purchase medical supplies from a reputable dealer.
- **Ponzi Schemes:** These are a type of fraudulent investment strategy in which people are promised high returns and early investors are paid with the money of new investors. Eventually, when such schemes are unable to find new investors, they collapse and people lose their money.
- **Phishing:** On the internet fraudsters can pose as legitimate (financial) institutions and prompt you to enter account numbers or other personal information. Remember that legitimate institutions will seldom ask you to provide this type of information, particularly if they have contacted you.
- **Grandson/Granddaughter Scams:** You receive a call from a person posing as your grandson/granddaughter and claiming that they need money immediately to get out of a troubling/dangerous situation. They may claim to be in jail or stranded abroad.
- **Selling Services:** Some fraudsters will sell services at a premium rate that are available for less (or free) from the government. For example, private companies might sell their assistance to help you apply for a passport. Always ensure that you go right online source for services and products.

General tips on protecting yourself from fraud:

- Order a copy of your credit history once a year.
- Shred all confidential information.
- Keep your SIN card, birth certificate and health card in a secure place.

- If you are appointing a Power of Attorney, only appoint someone that you trust.
- Exercise extra caution when you are dealing with out of province persons/businesses.
- A red flag should wave if a business contacts you out of the blue. Never give out personal information to someone who has contacted you if you are unsure about who you are talking to.

A variety of institutions have been set up to help you protect yourself from fraud. For example:

- The Information Service Corporation can determine whether there is a lien against a vehicle you are purchasing or whether the business you are dealing with is registered in Saskatchewan.
- The Consumer Protection Branch can check if there are any complaints against a business.

If you suspect you may be the victim of a scam you should contact the police or notify your financial institution. ❖

## Holiday Hours

Best wishes for the holiday season from the Board and staff of the Saskatoon Community Clinic.

The Community Clinic holiday hours are: ❄️

### Wednesday December 24th

Christmas Eve: Clinics open from 9 a.m. to 12 noon;  
Drop-in Clinic 12 noon to 4 p.m.

### Thursday, Friday, December 25th and 26th

Christmas Day: All Clinics Closed all Day  
Boxing Day: All Clinics Closed all Day

### Saturday December 27th

Downtown Clinic Saturday services only, 9 a.m. to 1 p.m.

### Sunday, December 28th

Clinics Closed ❄️

### Monday, December 29th

Full service all day, regular hours ❄️

### Tuesday December 30th

Full service all day, regular hours ❄️

### Wednesday December 31st

New Year's Eve: Clinics open 9 a.m. to 12 noon  
Drop-in Clinic 12 noon to 4 p.m.

### Thursday January 1st

New Year's Day: All Clinics Closed All Day ❄️

### Friday January 2nd, 2015

Open for Regular Service ❄️

## Look to Alberta today, not 20 years ago, for guidance on private MRI

*Dr. Ryan Meili, Westside Clinic Physician and Executive Vice-Chair, Canadian Physicians for Medicare*

*Editor's note: At its November meeting, the Saskatoon Community Clinic Board agreed to send a letter to the Government of Saskatchewan expressing its concerns related to the provincial government's recent private MRI proposal and to include the following opinion piece by Dr. Ryan Meili, Executive Vice-Chair, Canadian Physicians for Medicare, in this issue of Focus.*

Premier Brad Wall took to Twitter in November to ask: "Is it time to allow people to pay for their own private MRIs in Saskatchewan like they can do in Alberta?" This came after a radio talk show during which he'd received a call from a patient who's been waiting three months for an MRI scan. This is one of many Saskatchewan patients who are, understandably, frustrated by long waits for essential imaging services.

It is a real problem. For that reason we should be very wary of false solutions and look first to evidence before rhetoric takes over. The best place to look for that evidence is the province Premier Wall references as a model.

Many Saskatchewan residents have sought out care in Alberta's private MRI clinics, giving the impression that the experiment there has been a success. When we take a closer look, it turns out things are not so wildly rosy in the land of private MRIs.

Perhaps the most surprising fact is that the wait list for MRI scans in Alberta, rather than having been shortened by the presence of private imaging clinics, is actually the longest in Canada. According to the Canadian Institute for Health Information, patients in Alberta can wait from 87 days to 247 days for a scan, compared with 28 to 88 in Saskatchewan. These waiting lists exist despite Alberta having the second highest number of scanners per capita in the country, suggesting overuse may be a problem. Excess capacity may actually exacerbate this phenomenon.

It may seem counterintuitive that the public wait list would lengthen in the context of having more MRI clinics and scanners. It appears that capacity, in the form of physicians and technologists, is siphoned off from the public system by parallel, patient-pay services, a pattern that has been seen in surgery as well as imaging. Premier Wall has talked about creating a mechanism to prevent this drift of resources from the public system, but the experience of jurisdictions around the world suggests this promise should be viewed with considerable skepticism.

Even more troubling is the question of equity. If an MRI scan is the limiting factor in getting a surgery and I can pay for my scan, I get to have my publicly-funded surgery before someone in as much need but less able to pay out of pocket. This is the principle reason that the existence of patient-pay MRI clinics, as Premier Wall pointed out in a 2008 Star Phoenix interview, is against the Canada Health Act. They clearly violate the principle of universality by allowing certain patients to access care quicker than others based on finances rather than medical need.

While the reputation of Alberta suggests a preponderance of private imaging centres, the reality is that in recent years that province has moved away from the patient-pay model. Many of the private clinics charge the public system for the scan and also charge the patient a premium. Alberta was also forced to repay some patients who had paid for medically necessary scans.

With no financial savings and no increase in accessibility, there is actually little real impetus for provinces to promote patient-pay imaging centres. In fact, Alberta has moved in the opposite direction, increasing public capacity and ending the practice of contracting out services to private facilities. As a result, there appear to have been no new private MRIs built in Alberta in the past decade as the business case for such operations is limited without public subsidy.

Along with failing to increase affordability and access, private MRIs pose a more insidious threat to publicly-funded health care. The more that Canadians believe they have to pay out of pocket for necessary care, the more we will see confidence in and commitment to medicare eroded. We need strategies to improve access to diagnostic technologies that strengthen medicare rather than strategies that undermine it.

Premier Wall has expressed a real interest in leading innovation in health policy. There are ways to improve access to MRIs that don't undermine the principles of the public system or confidence in it. Imaging is one of the most overused elements of our health-care system. A 2013 study of MRI use showed that more than half of lower back MRI scans in an Alberta hospital were not appropriate.

Working to promote rational use of technology is one way to make sure it's available for those who need it most. Expanding hours of use, training programs for personnel and the number of machines in the public system is another.

*Continued on page 7...*

Anyone can learn from their mistakes. A true leader learns from the mistakes of others. Saskatchewan should look closely at the experiences of other provinces before it chooses a path that, while seeming to offer solutions to our challenges in health care, could actually make them worse. ❖

## Board Governance Review

By Bill Davies, Committee Chairperson

The Board of Directors has begun a review of its governance structure because it has become apparent that while the organization has changed over time, the bylaws which govern the Board structure and processes have not. A Board committee has been created to oversee the review.

The committee began meeting in October and is in the early stages of its discussions. The committee plans first to deal with how the Board functions and conducts Board business. This aspect of the review will deal with the committee structure and process at the Board level. A second phase will be a review of Board policies. The committee is planning a consultative process with the membership, staff and management as the review proceeds.

Governance is critical to the effective functioning of our co-operative. Members elect directors to develop and administer an organization that serves the needs of our community. Directors come from different areas, ages, interests and backgrounds. They must function efficiently as a team, respond to the needs of members, staff and the community, and provide a satisfying experience to the participants. It's important that the Board's ability to make good decisions is maintained and how the Board functions is reviewed on a regular basis and updated if required.

Items the committee is looking at include:

- Number of board members
- Board committee structure
- Board policies
- Board member roles and responsibilities
- Board calendar

Committee members have received information about the current model and alternatives, for example, the Policy Governance Model. Its members participated in a learning session through skype with the Executive Director of the Association of Ontario Health Centres to learn about the governance models used by Community Health Centres in Ontario.

The Committee will engage and get feedback from members and staff as it develops recommendations. Some by-law changes may be required depending on the outcome of the discussions. If you have questions or suggestions please contact Member Relations at 306-664-4243. ❖

## Seniors of Tomorrow Winter 2015 Education Series

Welcome to the Seniors of Tomorrow Education Series, a Counselling and Community Services Department drop-in group program for Community Clinic members and patients. Sessions take place Wednesday afternoons **2 – 4 p.m.** at the Saskatoon Community Clinic Langer Building, located at 424 1st Ave. N.

### January 21st

#### Overview of Book: *The Man Behind Handsome*

*Pat Trask, Author*, will share her story of a family's struggle. Join us as we explore the power of the human spirit.

### February 4th

#### Health Care Directives

Learn what you need to do to ensure your wishes about medical treatment are known.  
*Public Legal Education Association of Saskatchewan*

### February 18th

#### Chair Yoga

*Brenda Goossen, Occupational Therapist*, will explain chair-assisted yoga. Learn about and try some ancient practices.

### March 4th

#### Too Much Stuff

*Jessica Kyle* will share resources and supports in Saskatoon that can help you minimize your stuff.

### March 18th

#### Nutrition for Optimum Health

*Dr. Louise Gagné* will share which foods best support good health and longevity.

To register or for more information, please contact Laurie Stone, Seniors' Volunteer Coordinator at 306-664-4282 or Norine Shewchuk, Seniors' Counsellor at 306-664-4270. You must be a Community Clinic Member or Patient to participate.



## Gifts to the Saskatoon Community Clinic Foundation

### *In Memory of:*

**Alice & Walter Allen** from Bonnie & John Lawrence  
**Rena Margaret Carman** from Kenneth Carman  
**Earl Chapman** from Doreen & Randall Chapman  
**Elizabeth Currie** from Brenda Ritz  
**David England** from Joyce & Mark England  
**Shelly & Laurie Goff** from Brent Goff  
**Mrs. P. Holtslander** from Jim Holtslander  
**Darcey John & Tommy Fink** from Robert Fink  
**J. Gren Jones** from Isobel Jones  
**George Kowalenko** from William Strelieff

**George Kowalenko and Harold & Christie Evjen** from Gary Evjen & Karen Kowalenko-Evjen,  
**Winona Lambert** from Dennis & Teresa Harley  
**Albert Landry** from Mary Landry  
**Herbert Maskell** from Betty Maskell  
**John Matthews** from Clifford Matthews  
**James Mitchell** from Laura I. Mitchell  
**Elsie Rasmussen** from Cora Gamble & Family  
**Alexander Smith** from Carol Glazer  
**Marie Stodler** from Terry Stodler

### *Donations:*

Affinity Credit Union, Jack E. Adams, Tim & Judy Archer, Douglas H. Badger, Catherine Lesley Biggs, Beth Bilson, Thomas D. & Patricia A. Bowman, John & Ina Brockelbank, Bill & Mary Chapman, Linda A. Charlton, Mike Chometa, Paul & Viola Coutu, J. Ronald & Ruth Cruikshank, Kathleen De Armond, Ed Decker, Maggie DeFehr, Graham Dove & Kathleen Slavin, Harold Empey, Paul Fournier, Larry & Lynne Fowke, Adeline Germann, Agnes Helminck, Felix Hoehn & Carol Riekman, Diane Holroyd, Jessie M. Hope, Herbert Lambert, Raymond & Sharron Landreau, Karen Larson, Tannys M. Last, Nicholas McCormick, G. Allan McGuire, Beulah McMillan, Bonnie Mihalicz, Lila O'Grady, Lyall Petrie, Gladys Pippin & Betty Podgursky, Marjaleena Repo, Michael Rohatynsky & Elizabeth Quinlan, Robert Rutherford, Dorothy Sagan, Betty & Leith Shearer, Margaret K. Shearer, Norine Shewchuk, Anne Thiessen, Marlene Tremblay, Burton Urquhart, Tanya M. Veeman, Doreen Walmsley, Kerry & Esther Westcott, Mabel Wiley, Don Wilson, Margaret & Nels Yalte

*Thank you for your generosity ~ September 1, 2014 - November 21, 2014*

**FOCUS** is published by Community Health Services (Saskatoon) Association, Ltd., 455 – 2<sup>nd</sup> Avenue North, Saskatoon, Saskatchewan S7K 2C2. Material may be reproduced with appropriate recognition of the source.

For useful information about your clinic please visit our website at: [www.saskatooncommunityclinic.ca](http://www.saskatooncommunityclinic.ca)

**Editor:** Ingrid Larson

**Editorial Committee:** Carol Glazer, Cheryl Hewitt, Karen Kowalenko-Evjen

**CHSA Board of Directors:** Bill Allen, Bill Davies, Anne Doucette (President), Diane Ewert, Rachel Gough, Glen Kovatch, Daniel Kuhlen, Leading Eagle Man, Twila Leflar, Stan Rice, Carla Smith

**Executive Director:** Tim Archer

**Board Secretary:** Coreen Usselman

Member concerns and comments are welcomed by the Member and Public Relations Department.

Please call 306-664-4243.

ISSN 0015-5195

Canadian Publications Mail Product Sales Agreement 40052408



Return Undeliverable Canadian Addresses to:  
 Community Health Services (Saskatoon) Association  
 455-2<sup>nd</sup> Avenue North  
 Saskatoon, Saskatchewan S7K 2C2  
[www.saskatooncommunityclinic.ca](http://www.saskatooncommunityclinic.ca)

