

Focus

Saskatoon
Community
Clinic
"Your Health
Care Co-op"



Summer, 2015
Volume 51, Number 2

Community Health Services (Saskatoon) Association Ltd.
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Multidisciplinary Learning at the Community Clinic

By Dr. Leane Bettin, Family Physician



Dr. Leane Bettin

During 2014 an exciting initiative took place at the Saskatoon Community Clinic in partnership with the University of Saskatchewan College of Medicine. Thirteen senior medical students and residents enjoyed learning with our physicians and multidisciplinary professionals at our two sites. This created a rich learning environment for the students in multidisciplinary, team-based, and patient-centred primary care. Due to its success the program will be extended for three more years.

The students work alongside physician and non-physician team members. They see patients in their supervising physician's clinical area and choose other disciplines to experience during their two-week placements. Experiences have included: lab work; occupational therapy home visits; nutrition counselling; physical therapy assessments; hospital visits with a family doctor; baby and child nursing-led immunization clinics; and counselling in-take assessments.

The students were very positive in their evaluations of the program and offered feedback such as:

"I thought the multidisciplinary aspects were really great."

"Experience in lab was great! I enjoyed that I was allowed to do phlebotomy (not something we get practice ever) and the information about the lab's needs was helpful."

"Nice idea to incorporate multiple areas of care."

The evaluations also identified areas that need strengthening including more opportunities for the students to have greater choice in the multidisciplinary areas they would like to experience and more "hands-on" versus "observational" experience.

The enthusiastic participation of 41 teachers (14 family physicians and 27 multidisciplinary professionals) created a rich learning environment for Saskatchewan's primary care doctors of the future. We are proud to be able to work with the College of Medicine to offer this opportunity to the students. While they gain professional experience in our co-operative, primary health care model, they also enrich the Community Clinic experience for our staff and patients. ♦



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Community Health Services (Saskatoon) Association Ltd.

Annual Meeting

Mayfair United Church, 902 33rd Street West

Thursday, June 18, 2015

Registration: 6:30-7:00 pm.

Meeting: 7:00 – 9:30 pm.

See page 3 and enclosed insert.

Board of Directors Year-end Report

By Anne Doucette, President



Anne Doucette

Greetings from your Board of Directors. Our Annual Meeting is approaching on June 18th. Your Board and staff team will be there to provide you with an update on our past year of activities, oversee elections for new Board members, present several bylaw changes (see insert) and to hear your feedback. Below is a summary of your Board of Directors' activities during the past year.

The Member Services Committee focussed much of its energies in the past year on policy review and development including recommending revisions to the Client Complaints policy, preparing a Social Media policy and updating the Nominations and Elections policies. They were pleased to have an excellent turnout at the semi-annual meeting for the discussion about improving mental health services.

Several advocacy topics were addressed by the Political and Social Action Committee. Letters were sent to the Provincial Minister of Health advocating for a provincial anti-poverty strategy and the need for improved funding for mental health services. Concern was also expressed regarding the planned introduction of private MRI services in the province. The committee also took action by writing letters to the federal government about the need for renewal of the federal-provincial health accord and for better protection from asbestos.

The Operations Committee has also been busy this year. Highlights include initiation of a review of the Pharmacy

operations. The committee, with other Board members, was involved in the recruitment of a new Medical Director, Dr. Morris Markentin. We thank Dr. Leane Bettin for her past five years of service in this position during which she oversaw the development of a number of initiatives. For example, through her leadership, in 2014 a formal agreement was signed with the University of Saskatchewan College of Medicine in which medical students and residents are being placed for two-week multidisciplinary rotations at our two sites.

Two ad hoc committees were struck by your Board during the past year. A Board Governance Review Committee, is looking at how the Board functions and conducts its business. Inserted into this issue of *Focus* are several recommended by-law changes. The next stage of their work will be to review Board policies. More recently, the Board established another ad hoc committee to oversee a review of our facility needs over the next several years.

The Board of Directors continues to be active in the Saskatchewan Community Health Co-operative Federation and the Saskatchewan Co-operative Association. We also continue our membership in the Canadian Association of Community Health Centres. In October, alongside other municipalities in Canada, we were pleased to have the City of Saskatoon Proclaim the first week of October as Community Health and Wellbeing week.

Thank you to our members and staff and to my fellow Board members for your hard work and dedication during the past year. We hope you will join us at the Annual Meeting. All are welcome! ♦

Congratulations to the following staff who received long-term service awards on May 27, 2015:

5 Years of Service:

Jason Stefanuk
Dr. Yan Wu
Dr. John Dosman

25 Years of Service:

Coreen Usselman

10 Years of Service:

Jennifer Desjarlais
Rose Marie Laird
Nayyar Javed
Teresa Hodgkinson
Marnie Parent
Dr. Narmin Ibrahim

30 Years of Service:

Loretta Baier

15 Years of Service:

Trudy Myers
Kathleen Pollock
Connie Goodmanson

35 Years of Service:

Patricia Ollenberger

20 Years of Service:

Chris Stevenson

Retirements:

Linda Bec
Keitha Solvason
Patrick Coulterman



Annual Meeting Notice



Community Health Services (Saskatoon) Association Ltd.

Thursday, June 18, 2015

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, Executive Director, Medical Director, Treasurer and other Officers
5. Report of Auditor and consideration of financial statement
6. Discussion, consideration and disposing of reports set out in 4 and 5
7. Break
8. Resolutions, recommendations and bylaws (see enclosed insert)
9. Election of Directors
10. Reports of special committees
11. Unfinished business
12. Appointment of auditors
13. New business
14. Adjournment

Election of Directors

Six (6) Board members will be elected at the meeting. If you are interested in running for the Board of Directors, please contact the Board secretary at 306-652-0300. 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 and Public Relations Department. The Annual Financial statements and other meeting materials will be available for pick up by interested members at the Clinic seven days in advance of the meeting. For more information, please telephone Member and Public Relations at 306-652-0300, ext. 243.

Eating 9 to 5!

By Amber Chutskoff, Nutrition Student

Approximately 45% of Canadians have difficulty eating healthy while at work. The 2015 national Nutrition Month campaign, celebrated in March, addressed this problem by inspiring Canadians to eat better and create a healthy workplace environment. Try these tips below:

1. Rushed Mornings

A balanced breakfast consisting of complex carbohydrates, protein, and fibre provides your body with the fuel it needs and enhances your concentration, productivity and vitality. Try these ideas to beat morning madness:

- Put your own twist on a basic whole grain muffin batter by adding nuts, blueberries or mashed bananas for flavour tailored to your preference. Bake and freeze the muffins to use when short of time.
- Take advantage of leftovers by incorporating them into breakfast. Leftover turkey and scrambled eggs on whole wheat toast makes a delicious breakfast sandwich. Discard leftovers after they are two days old.

2. Meetings, Events and the Workplace

A food-filled celebration, meeting, or common area can influence the dietary decisions people make. Often times, treats provided are full of sugar and hard to resist. Try these tips to eliminate the pressures associated with eating at your workplace:

- Fool your sweet tooth and enjoy a fresh fruit platter instead of cake or donuts.
- Eat carrot sticks and sliced peppers with hummus to satisfy your hunger between meetings.
- A handful of nuts with dried apricots is an excellent portable snack rich in nutrients.

3. Lunchtime

People often look for a fast fix or convenience when it comes time for lunch to suit their busy schedule. Consider

making these easy and delicious recipes in advance to avoid visiting the nearest fast food outlet:

- Half a multigrain bun + tomato sauce + veggies + shredded part skim mozzarella cheese = Pizza Sandwich
- Seasoned skinless chicken breast + salsa + veggies + shredded part skim mozzarella cheese + whole grain tortilla = Tasty Quesadilla

4. Mid-Day Slump

Snacking can help bridge hunger and moderate appetite, but can also lead to over indulgence and contribute to weight gain or poor cognitive function. Try these smart snack ideas below:

- Whole grain crackers with tuna or cheese.
- Sliced apples and almond butter with unsalted pretzels.
- Edamame or crunchy roasted lentils with green tea.

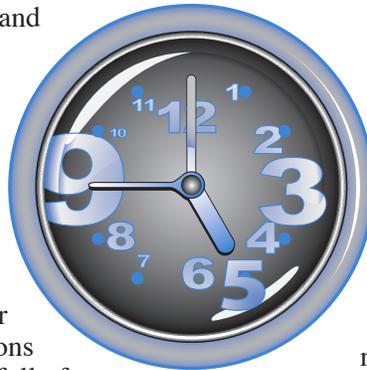
5. Speedy Suppers

Combining a long day and commute can leave people feeling hungry or tired with minimal time and energy to cook healthy meals upon arriving home.

Try these quick and healthy meal recipes:

- Stir-fried vegetables and chicken served over brown rice, quinoa, or couscous is a meal in itself.
- Incorporate cooked pasta and browned lean beef or turkey with sautéed mushrooms and onions for a hearty dish.
- Make a double batch of curry, soup, or chilli using lentils, diced tomatoes, carrots, mushrooms and potatoes. Leftovers can be packed for lunch the next day.

This article contains information adapted from the Dietitians of Canada 2015 Nutrition Month theme. Visit www.dietitians.ca for more information. ❖



CACHC Call to Action Now Live

The Canadian Association of Community Health Centres (CACHC) has released its 2015 Federal Election Call to Action, calling on all parties to commit to:

1. A federal poverty-reduction strategy
2. A federal Pharmacare program for prescription drug coverage
3. A federal housing and homelessness-reduction strategy
4. A federal strategy to expand access to Community Health Centres

Visit CACHC'S Federal Election page for call to action. Get involved:

- Add your name to the four online national petitions.
- Share the petitions and encourage others to sign - build momentum!

Notice of Bylaw Changes

**Community Health Services (Saskatoon) Association Ltd.
Saskatoon Community Clinic
Notice of Bylaw Changes
Annual General Meeting June 18th, 2015**

Summary of Proposed Changes:

On June 18, 2015 at the Annual General Meeting, the following resolutions will be presented by the Board of Directors to amend the Association's bylaws.

Essentially, two major changes are recommended to the bylaws. The first will decrease the total number of Directors (from a maximum of 12, to a maximum of 9), and place term limits on the number of consecutive years a Director may serve (6 years). The second change removes the mandatory committee structure from the bylaws. This change reflects *The Co-operatives Act 1996* which states that the Board can determine all standing committees except for the Audit Committee, which is required under *The Co-operatives Act 1996*.

Changes will only become effective once they have been ratified by the members, and approved by the Registrar of Co-operatives. The changes to the bylaws will not change the objectives or responsibilities of the Board, or the Board's relationship to members or staff. The Board will continue to perform all of the same functions and duties that it currently performs, but in some cases these duties may be reassigned through a different committee structure.

These changes are designed to address several emerging challenges including: recruiting qualified Directors; absenteeism/achieving quorum at meetings; and ensuring the Board of Directors guides the future of the organization, rather than spending undue amounts of time reviewing past actions. By limiting the amount of time Directors can serve (maximum of 6 consecutive years), the changes will encourage new ideas, and a renewed spirit in achieving the Association's vision, mission and goals.

Resolution #1

That Bylaw # 1 be replaced in its entirety as follows:

1. Directors

(a) The Board.

The board of directors (the "Board") shall be structured as follows:

- i. Up to the close of the annual general meeting in 2016, the Board shall consist of twelve (12) members of the Co-operative, duly elected.
- ii. Effective at the close of the annual general meeting in 2016, the Board shall consist of nine (9) members of the Co-operative, duly elected.
- iii. At the annual general meeting in 2016, elections will be held to fill only the number of vacancies that will result in a full Board of nine (9) directors.

Notice of Bylaw Changes

- iv. No incumbent director's term of office will be cut short by the reduction in the number of directors required to constitute a full Board.
- (b) Directors' Term of Office.
- i. Except as provided in (ii) and (iii), the term of office for a director shall expire at the close of the third annual general meeting following his or her election, and, in this section, that period of time is called a "full term."
 - ii. The members at an annual general meeting at which director elections are to be held are entitled, by ordinary resolution passed before the director elections, to provide for staggered terms of office that expire at the next annual general meeting or the second annual general meeting following a director's election, and, in this section, that period of time, which is less than a full term, is called a "partial term."
 - iii. When another director ceases to hold office, the director elected or appointed to fill the vacancy is elected or appointed to fill the remaining period of time in the full term or partial term of his or her predecessor and, in this section, that remaining period of time in the full term is called a "residual term."
 - iv. Subject to (v), an individual whose full term, partial term, or residual term is expiring at an annual general meeting is eligible for re-election or re-appointment.
 - v. No individual is entitled to serve more than:
 1. Two (2) full terms, served consecutively, or
 2. Six years consecutively in any combination of full or partial terms.
 - vi. An individual, having served the maximum number of consecutive terms described in (v) as a director, is again eligible to be elected or appointed to the board of Directors if that individual, after having served the consecutive terms described in (v) as a Director, has remained off the Board for at least the period of time between his or her last annual general meeting as a Director and the next following annual general meeting.
- vii. A Director ceases to hold office when the Director
1. dies;
 2. resigns in writing;
 3. has served the maximum number of consecutive terms described in (v);
 4. is removed from office by the Members; or
 5. is no longer qualified.
- viii. A director who without adequate reason fails to attend three (3) consecutive meetings of the Board may be asked to resign from office by the remaining directors. If such a request is made, and the absent director does not resign from office, the remaining directors may submit a request to the membership to have the absentee director removed from office in accordance with the provisions of The Co-operatives Act, 1996.
- (c) Employees as Directors.
- Employees of the Co-operative are eligible to be directors, subject to the following:
- i. Subject to (ii), the total number of Directors who are also employees of the Co-operative shall not at any time be more than three (3).
 - ii. Subject to (iii), effective at the close of the annual general meeting in 2015, the total number of employees as Directors shall not at any time be more than two (2).
 - iii. No incumbent employee Director's term of office will be cut short by the reduction in the number of employees as Directors on the Board.

Notice of Bylaw Changes

The above bylaw will replace:

1. Directors

The board of directors (the "Board") shall consist of 12 members of the Co-operative, duly elected. Each individual elected as a director shall hold that office for a three (3) year term. The terms of office of the directors shall be staggered such that only one third (1/3) of the directors shall be re-elected in any year. Each director shall retire from office at the annual general meeting held in the year in which such director's term of office expires. Any director who fills a vacancy on the Board shall hold office only for the unexpired term of the director whose departure or resignation created the vacancy. A vacancy on the Board may be filled until the next general meeting by appointment by the remaining directors.

For the purposes of continuance, directors who hold office in Community Health Services (Saskatoon) Association, Limited, a mutual medical and hospital benefit association (the "Association"), concurrent with continuance shall continue in office as directors of the Co-operative for the remaining term that such directors would have held as directors of the Association.

A director who without adequate reason fails to attend three (3) consecutive meetings of the Board may be asked to resign from office by the remaining directors. If such a request is made, and the absent director does not resign from office, the remaining directors may submit a request to the membership to have the absentee director removed from office in accordance with the provisions of The Co-operatives Act, 1996.

Any individual who is party to a subsisting agreement with the Co-operative entered pursuant to section 11(1) of The Mutual Medical and Hospital Benefit Associations Act or section 266(1) of The Co-operatives Act, 1996 is eligible for election or appointment as a director of the Co-operative. However, if such an individual is so elected or appointed, then such director shall not be entitled to vote in connection with any matter directly related to the said agreement between the Co-operative and the director. The Board shall not, at any time, have more than three (3) members who have entered into a subsisting agreement under section 266 of The Co-operatives Act, 1996 or subsection 11(1) of The Mutual Medical and Hospital Benefit Associations Act.

Resolution #2

That Bylaw # 20 be replaced in its entirety as follows:

20. Committees

The Board, by resolution, may appoint such committees as they deem advisable to carry out such duties as the Board may assign. Any such committee shall consist of at least three (3) directors. The Board may appoint any member of the Co-operative, although not a director, as an advisor of a committee. As required under *The Co-operatives Act 1996* the Board will retain a *Finance & Audit Committee* with no less than three members, or may appoint the board as whole to perform this function.

The term of office of Committee members and the appointment of the member advisors will expire on the date of the Annual General Meeting.

Committees shall keep minutes of their proceedings and submit them to the Board at the next regular or special meeting of the Board.

The above bylaw will replace:

20. Committees

The Board may appoint such committees as they deem advisable to carry out such duties as the Board may assign. The Board may appoint any

Notice of Bylaw Changes

member of the Co-operative, although not a director, as an advisor to any such committee. The standing committees of the Board shall be as follows:

Member Services Committee: Comprised of up to five (5) Board members who elect a Chairperson. President (ex-officio). Duties and Responsibilities (as outlined in Terms of Reference established by the Board from time-to-time) including educational, budgetary, Membership Director, policy and by-laws, public relations, evaluation of projects and programs matters.

Operations Committee: Comprised of up to five (5) Board members who elect a Chairperson. President (ex-officio). Duties and Responsibilities (as outlined in Terms of Reference established by the Board from time-to-time) including policies and by-law changes, finances, buildings and facilities, evaluation of departments and programs, reviews of contracts with outside agencies matters.

Personnel Committee: Comprised of up to five (5) Board members who elect a Chairperson. President (ex-officio). Duties and Responsibilities (as outlined in Terms of Reference

established by the Board from time-to-time) including policies, grievances, salary review, job descriptions, negotiations, reclassification requests and appeals, and other personnel matters.

Political And Social Action Committee: Comprised of two (2) Board members, selected by the Board, one (1) of whom shall serve as Chairperson for the Committee and report to the Board on the Committee's activities. President (ex-officio). The Board shall also appoint up to five (5) members as advisors to the Committee, as follows:

- *Two (2) or three (3) Clinic employees chosen at-large.*
- *Two (2) or three (3) CHSA members chosen at-large.*

Duties and Responsibilities (as outlined in Terms of Reference established by the Board from time-to-time) including monitoring political and social trends and issues which may affect the Co-operative, its clients, or community and proposing recommendations to the Board with respect to such issues.

The term of office of Committee members and the appointment of the member advisors will expire on the date of the Annual General Meeting.

Resolution #3

That Bylaw # 23 be amended as follows (to repeal last sentence):

23. Officers

The Board shall within ten (10) days following the annual meeting of the Co-operative elect from their own number a President and a Vice-President. The Board shall also appoint a Secretary and a Treasurer or a Secretary-Treasurer who may or may not be a director of the Co-operative. If any office becomes

vacant such vacancy may be filled by the Board at any time. ~~The President and Vice-President along with the Chairpersons of the Member Services, Operations & Personnel and Political and Social Action Standing Committees of the Board shall constitute the Executive of the Board.~~

Health checkups: When you need them and when you don't

Re-printed from *Choosing Wisely Canada*

The *Choosing Wisely Campaign* was featured in the Spring issue of *Focus*. The campaign, supported by our physician group, is designed to help physicians and community members engage in conversations about unnecessary tests, treatments and procedures, and to help physicians and patients make smarter and effective choices. The Community Clinic medical group has asked that the following article, originally published by *Choosing Wisely* in October 2014, be re-printed in full in *Focus* to help our patient group understand "health checkups" often referred to as "annual physicals."

Like many people, you may schedule a yearly checkup or "annual physical" with your doctor. It usually includes a health history, physical exam and tests.

It is important to have a regular family doctor who helps make sure you receive the medical care that is best for your individual needs. But healthy people often don't necessarily need annual physicals, and those checkups can do more harm than good. Here's why:

Annual physicals usually don't make you healthier.

There have been many studies of the effects of annual checkups. In general, they probably won't help you stay well and live longer. And usually they don't help you avoid hospital stays or keep you from dying of cancer or heart disease.

Tests and screenings can cause problems.

Most people should only have a test or exam if they have symptoms or risks factors.

One problem is getting a false-positive result. These false alarms can cause anxiety, and unnecessary follow-up tests and treatments. For example, a false-positive blood test can result in a biopsy. An electrocardiogram (ECG) that is not interpreted correctly may lead to another test that exposes you to radiation. Or you might get a procedure to show arteries in the heart that has a risk of heart attack or death in two patients for every 100 who get the test.

Set a schedule with your family doctor.

Your doctor best knows your health history. You can discuss with him/her the best time for any exams or tests which you may need.

If your doctor wants to schedule an annual physical, you can ask if it is necessary. Or ask if you can wait until you have a problem or are due for a test (such as a Pap smear or blood pressure test).

So when do adults need a checkup?

You may need a checkup:

- When you are sick.
- When you have a symptom that could mean illness.
- To manage chronic or ongoing conditions.
- To check on the effects of a new medicine.
- To help with risk factors like smoking or obesity.
- For prenatal care, if you are pregnant.
- For lifestyle issues like family planning.
- For other reasons that are based on your individual needs.



People in their twenties often do not see a doctor for several years without risking their health, while older people who have developed risks for certain diseases may see a doctor more often. It is best to have a trusted doctor you see regularly who has access to your health records.

What about preventive care?

Preventive care is important. Having a regular doctor helps you get preventive care.

Everyone should get the recommended immunizations and screening tests at the times and frequencies as recommended by the Canadian Task Force on the Periodic Health Examination.

What tests can help?

The recommendations below are for healthy adults. If you have risk factors or a chronic disease, you may need different tests or you may need a test more often. Ask your doctor what schedule is right for you, but here are conditions many people should be screened for:

- High blood pressure
- Cervical cancer
- High cholesterol on men over 40 or women over 50 who have a low risk profile
- Diabetes
- Breast cancer
- Colon cancer
- Osteoporosis (weakened bones)
- Abdominal aortic aneurysm (enlarged blood vessel)

For more informative articles about making wise medical choices visit the *Choosing Wisely* website, www.choosingwiselycanada.org 

Celebrating 20 Years of Collective Kitchens

By Renee Nagus, RD, Community Clinic Nutritionist



The Saskatoon Community Clinic is pleased to celebrate the 20th anniversary of the Collective Kitchen Partnership, a joint effort of CHEP Good Food Inc., the Saskatoon Community Clinic and the Saskatoon Health Region. Over the years, this program has continually proved to be an effective way to deal with issues surrounding food security, poverty, social isolation and lack of food skills. Its unofficial slogan, “Food, Fun and Friendship” speaks to the positive impact this programming has had on the participants’ lives.

A collective kitchen is a small group of people who gather and pool their resources to make healthy, nutritious, and low cost food that they take home to share with their families. Meals are prepared in bulk and divided into portions to take home to freeze or eat over a number of days. Each group collaboratively chooses recipes and decides on the goal of their collective kitchen. Cooking sessions are held monthly over a period of several months. The groups meet to cook in churches, schools and other community settings. Some groups have a special focus, such as ethnic foods, small batch cooking, or preparing foods for special dietary needs.

To sustain the kitchens, the partnership’s paid coordinator provides support and guidance to 10 to 12 collective kitchen groups in Saskatoon. The partnership also provides training for collective kitchen leaders and offers related programs.

To become a collective kitchen leader in Saskatoon, people must attend a Collective Kitchen Leadership training workshop and pass their Food Safe Level 1 course. The three-day leadership training workshop is offered annually and CHEP pays for the Food Safe course.

The Leadership Training and Food Safe Course prepare leaders to facilitate a collective kitchen by focusing on the following knowledge and skills:

- how food security is impacted by collective kitchens
- the history and value of collective kitchens
- the importance of food safety in all aspects of food preparation
- basic food safe skills

- how to incorporate “Eating Well with Canada’s Food Guide” into basic menu planning
- basic steps and processes for starting and facilitating a collective kitchen
- leadership skills, group decision processes and positive problem solving
- the value of a strong foundation through development of group goals and rules
- basic concepts of healthy eating and recipe adaptation

Once a leader has completed the training, they may request funding through the partnership for additional support to sustain their group, for example, matching dollars to purchase a “basic shelf” of ingredients (flour, eggs, milk, pasta, lentils, etc.) or to help with childcare, transportation and honorariums for leaders.

The program has been evaluated several times over the past few years. The external evaluators identified a number of positive benefits for participants, leaders and the community including:

- Increased socialization for participants
- Education and skill development
- Increased awareness of and intake of healthier food

The partnership also offers:

Grub & Gab Community Forums: Open to anyone in the community, including families, the group enjoys a light meal followed by a presentation. All the ideas of the topics

Continued on page 7...



Collective Kitchen in action.

come from the participants and from the collective kitchen leaders. Topics have included: “The Pluses of Pulses,” “How to Store Food,” and “What to do with Fall Veggies.”

Drop-in Collective Kitchens: Each year, three drop-in kitchens are held over a five-week period. These sessions are directed at people interested in collective kitchens but cannot find a space in a group or for people who want a little more information about collective kitchens before deciding to join one.

Resource person: Many other organizations are starting collective or community kitchens. The coordinator acts as a resource person to help get them started.

Workshops: If a large number of people are interested in a specific area (e.g. canning) the coordinator will organize a workshop around that subject. Workshop topics have included: bread making, homemade pasta, pie dough, soups from scratch, and food preservation.

For more information about collective kitchen programming in Saskatoon, please see www.CHEP.org or contact Janet Phillips (Collective Kitchen Coordinator) at 306-655-4575. ❖



A grand opening celebration was held of our newly renovated reception area at our Downtown Clinic on April 16, 2015. Thank you to all who supported the project including the Saskatoon Community Clinic Foundation and donors. Seen here at the Grand Opening are: Tim Archer, Executive Director; Nancy Carmichael, Foundation President; and Anne Doucette, CHSA President.

Seniors' Corner

By Laurie Stone, Seniors' Volunteer Coordinator

The Secret of a Happy Life

I am privileged to work with one of the nicest groups of people you can imagine. They come from all walks of life, all occupations and many different countries. They range in age from their mid-20s all the way up to 97 years of age! Yes, they are the Community Clinic Seniors' Program Volunteers.

Volunteers take part in our Seniors' programming in a number of different ways. Our Seniors Advisory Council plays a vital role in supporting programs, fundraising and speaking out on health issues and concerns in the community that affect older adults. The Council was formed to advise the Board of Directors on programs, services and health concerns. It has been gratifying to see the Council grow (now 14 members strong), learn new skills and take on challenges.

In addition to serving on the Council, our 31 volunteers also do home visiting and volunteer with the Happy Gang/Silver Threads Seniors Group, the Seniors of Tomorrow Education Series and/or the Kohkums' Aboriginal Grandmothers Group. Some of them teach fitness classes, go to university, play in bands, volunteer on many community boards, travel extensively and even write books! They are artists, authors, musicians, poets, dancers and teachers of life!

The one thing that unites our volunteers is caring for community and each other. They are positive, thoughtful, respectful and whatever their personal circumstances, care deeply for the concept of a Community Clinic co-operative, founded by members to provide health care for all. Their eagerness to learn new skills, challenge themselves and be involved is their secret to a happy and healthy life. Many are the founders of our Clinic and most of them don't identify with the concept of being a senior citizen at all.

One of our long-time volunteers recently made the following comment, which sums up the attitude of this amazing group of individuals. “I am really proud to be a part of the Volunteer Program at the Community Clinic because I can see how much our programs benefit and brighten the lives of Seniors. And it comforts me to know that if I ever get old and need a seniors' program, we have programs like this at the Clinic that would be there for me.” He was 96 years old. Point well made.

Your comments or questions are welcome. Contact me at lstone@communityclinic.sk.ca or telephone 306-664-4282.



Gifts to the Saskatoon Community Clinic Foundation

In Memory of:

F. Boissonneault from Evelyn Boissonneault
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ISSN 0015-5195

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