

# Focus

Saskatoon  
Community  
Clinic  
"Your Health  
Care Co-op"



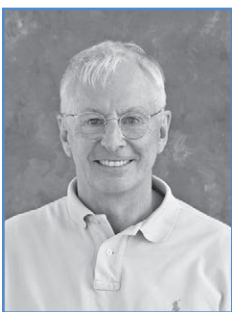
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Community Health Services (Saskatoon) Association Ltd.  
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## Board of Directors Year-end Report

By Bill Davies, President



Bill Davies

Greetings from your Board of Directors. We have had another busy year and are pleased to update our membership on the Association's key activities as we work towards our vision of healthy people in a healthy community. The CHSA Board of Directors continued to focus on the following 3 strategic priorities:

- Adopting a patient and family-centred approach to care;
- Nurturing a healthy, culturally diverse workplace that actively engages staff and volunteers; and
- Investing in infrastructure and facilities to meet our evolving needs.

In addition, we also have also begun work on:

- Improving access and capacity to serve existing and new patients;
- Offering comprehensive primary health services focused on community needs and growth trends, with emphasis on vulnerable populations; and
- Adopting and applying the UN Declaration on the Rights of Indigenous Peoples as a reconciliation framework.

In the fall, we received the final report from KCI Ketchum Canada. The report assessed the feasibility of SCC embarking on a successful capital campaign in an effort to achieve our long-term strategic goals of a facility expansion at Westside Clinic and redesign of our Downtown location. Although KCI advised us that we are not ready to launch a campaign of this magnitude right now, we now have a clear sense of the activities and path forward to set ourselves up for success.

One of our accomplishments this year that will help us move forward as an Association is the significant construction project undertaken at our Westside Clinic. Although the needed repair to the north wall was unforeseen, we were able to make the most of the situation by expanding the Clinic to include a Pharmacy when the wall was rebuilt. Pharmacy services already exist for clients who access care at our Downtown location. The creation of a pharmacy at Westside enables our clients in the core neighbourhood to have the same access to this important service. This expansion will result in reduced gaps in services as the pharmacist can quickly consult with prescribers, reducing wait times regarding medication cost coverage or drug interaction queries. Pharmacists also gain valuable information about patients' well-being and can intervene

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Community Health Services (Saskatoon) Association Ltd.

## Annual General Meeting

**Join us for our Annual Meeting**

**Mayfair United Church Hall**

**Wednesday, June 20, 2018**

**Registration 6:30 p.m.; Meeting 7:00 p.m.**

The AGM will include elections for three Board members.

If you are interested please contact Member Relations at (306)652-0300 or email [member.relations@communityclinic.ca](mailto:member.relations@communityclinic.ca).

**See page 3 for details.**

quickly if they need to be referred to their physician.

The Board and staff continue to advocate on behalf of our members and the community we serve. This year, we had a strong focus on food insecurity and worked with our Registered Dietitians to highlight the actual costs of maintaining a healthy diet in our city, and expressed our concerns to the government regarding recent policy changes and potential impact on health outcomes. In response to a Resolution passed at the 2017 AGM, the Board of Directors worked with the Seniors Advisory Council to encourage the province to implement a Saskatchewan Seniors Advocate to help address the needs of this often vulnerable population. The Board also focused its attention on adopting the UN Declaration on the Rights of Indigenous Peoples as a reconciliation framework and to apply its principles, norms, and standards to Clinic policy and core operational activities. Key steps in this journey include engaging with Elders in a guidance and advisory capacity, and ensuring a robust communication, education and engagement process for our staff, Board of Directors and volunteers. For example, the Clinic recently held a Kairos Blanket Exercise for Board and staff to help raise awareness of the nation-to-nation relationship between Indigenous and non-Indigenous peoples in Canada.

We also advocated for more resources to assist with the HIV epidemic in this province and are pleased to report that

the SCC was recognized specifically, with an ongoing investment of \$50,000 for our Westside Clinic to provide additional HIV supports.

Financially, the Clinic ended the 2017-18 year with a surplus. As a significant portion of our Deferred Funding was expended on the repairs and construction at Westside, this surplus will help rebuild our reserves.

The transition to one Provincial Health Authority is complete, and we look forward to working with our partners in this new health system. The Association has been active in participating in provincial discussions on primary health care, and working collaboratively with the Community Co-operative Health Federation to promote the model of team based, interdisciplinary care we provide in our province.

On a final note, the Board would like to express appreciation to Anne Doucette, retiring Board member for her long service on our Board of Directors, including three years as President of CHSA. We also want to take this opportunity to thank our members and staff for their efforts this past year and look forward to the year ahead.

Please refer to our 2017-18 Annual Report for the Executive Director's report and statistics. It is posted on our website one week in advance of the AGM being held this year on June 20th. ❖

## ***Parking Lot Changes!***

A reminder to our patients that the parking lot at the downtown Community Clinic has changed! Entry and exit is now through the alley off 26th Street or 25th Street. Patients can no longer enter off of 1st Avenue. The change moves patient parking closer to the building, creates more patient parking spots and decreases our maintenance cost. Thank you for your patience.

## ***Seniors of Tomorrow Series***

*Please join us for the final session of the year.*

**Wednesday, June 13th, 2:00 to 4:00 pm  
Mel Langer Building, 424 1st Ave North**

The **Meri Misfits** will perform songs and fun skits with a serious message, drawing attention to the hazards of falling and other situations that are dangerous for older adults.

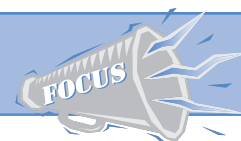
## **Saskatchewan Co-op Youth Program New Worlds Explored. New Friends Discovered.**

Registration continues for the summer 2018 Saskatchewan Co-op Youth Program camps. This summer youth leadership program, for ages 12 – 18, is celebrating 90 years. This year's theme is "New Worlds Explored. New Friends Discovered".

Sponsorships for the 2018 summer camps are available from the Saskatoon Community Clinic. Contact the Community Clinic Member Relations Department if you are interested in a sponsorship or the Co-op Youth program coordinators at (306) 244-3702.



# Annual Meeting Notice



Community Health Services (Saskatoon) Association Ltd.

**Wednesday, June 20, 2018**

**Mayfair United Church, 902 33<sup>rd</sup> 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
5. Report of Auditors and consideration of financial statements
6. Discussion, consideration and disposal of reports set out in Items 4 and 5
7. Resolutions, recommendations and bylaws
8. Election of directors (3 positions available)
9. Reports of special committees
10. Unfinished business
11. Appointment of auditors
12. New business
13. Adjournment

## *Director Elections*

Members will elect three directors at this meeting. If you are interested in running for the Board of Directors, please contact the Member and Public Relations Director 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 the resolutions so they are available for members in advance of the meeting.

## *Meeting Packages*

Meeting materials are available seven days in advance of the meeting at the Downtown Clinic (display table) 455 2nd Avenue North. The Annual Report can also be viewed at [www.saskatooncommunityclinic.ca](http://www.saskatooncommunityclinic.ca). For more information, phone Member and Public Relations at 652-0300, ext. 243.

# Blanket Exercise Illustrates Our Shared History

By Karen Timoshuk, Member and Public Relations Director

At the Saskatoon Community Clinic AGM held in June 2017, members passed a resolution that the Saskatoon Community Clinic adopt the United Nations Declaration on the Rights of Indigenous Peoples. This Declaration is the framework from which the Truth and Reconciliation 94 Calls to Action were built, seven of which are health directives.

Recognizing that knowing our shared history is fundamental to providing appropriate and informed care to its Indigenous patients, in March the Saskatoon Community Clinic had staff and board participate in one of two Kairos Blanket Exercises. "We recognize that our staff and leadership are our greatest assets and so it's important that we invest in them. The Blanket Exercise was a very visual, hands-on lesson that unearths the dark truth of our shared history," noted Lisa Clatney, Executive Director.

The Kairos Blanket Exercise is a participatory teaching tool that raises awareness of the historical to present day nation-to-nation relationship between Indigenous and non-Indigenous peoples in Canada. It was written following the release of the *Report of the Royal Commission on Aboriginal People* with participation of many Indigenous people. "It teaches a history of Canada that most of us have never learned," added Kathy Hitchings, the lead facilitator of the Exercise. "Since its creation in 1997, it has been used hundreds of times with thousands of people of all ages and from all backgrounds, by a wide variety of groups that include Indigenous and non-Indigenous people. It explores major themes of human relationships and examines how federal policies and

programs impact the lives of Indigenous peoples in Canada and identifies what Indigenous peoples and their allies are doing to bring about positive change."

As the name suggests, each participant was asked to bring a blanket to the exercise. Those blankets, laid within the circle of participants, represented the north part of Turtle Island, the original name given to the land that once belonged to the First Nations, Inuit and Metis peoples. A

series of scripts read by volunteer participants described how and when actions and policies of consecutive governments since Confederation led to the removal of two thirds of this land from the hands of Indigenous people. These actions were visually illustrated

through the gradual folding, and ultimately the removal of most of the blankets.

Elder Irene Sharp, who is also a member the Community Clinic, oversaw the Blanket Exercise and led the opening blessing. Erin Shingoose, Community Clinic CUPE Local 974 President, shared her reflection of the Exercise: "I have done this exercise a few times, and, each time I have done it I have learned new things. I found it very interesting and very emotional, especially the group discussions that followed." Clatney added, "Although it was difficult to hear and experience, this exercise will enable us to become

better, patient-centred leaders in primary health care. With guidance from a number of our Indigenous patients and partners, it is our plan to now act upon those health recommendations cited in the TRC report. The knowledge we gained from the Blanket Exercise provided us with an important foundation for reconciliation." ♦

**"Where common memory is lacking, where people do not share in the same past, there can be no real community. Where community is to be formed, common memory must be created."**

*Georges Erasmus, Dene Nation, Co-chair of the Royal Commission on Aboriginal Peoples.*



*Blankets, brought to the exercise by the Community Clinic staff and Board, were used to illustrate the taking away of land from the Indigenous people.*



## Landscape Design Volunteer Needed

Do you have the skills and knowledge to plan a green space or flower beds? The Clinic is seeking a volunteer to assist in the overall design of the Tribute Garden planned for the front of the Downtown Clinic Building.

You will work closely with a team of staff and volunteers to help design the space. We have ideas about the design but we need an experienced landscaper to help us meld these ideas into a cohesive plan.

The Tribute Garden group will meet during daytime hours over the next six months to create the plan. We expect the planting and installation to unfold over several years.

The Landscape Volunteer may choose to assist with the installation and planting or help with the design only.

If you are interested in joining the team please contact Wilson at Mel Langer Reception, phone Wilson at (306) 664-4283 or email [member.relations@communityclinic.ca](mailto:member.relations@communityclinic.ca).



## Upcoming Events of Interest

Offered by our Partners in the Community

**Saskatoon Council on Aging.** Call 306-652-2255 to register.

**Elder Abuse Awareness workshop: Tuesday, June 12th:** 8:30 a.m. to noon, McClure United Church, 4025 Taylor Street East. \$10. fee to attend.

**OUTSaskatoon.** Call 306-665-1224 for more information.

**Pride Flag Raising:** Monday, June 11th at noon, Saskatoon City Hall

**Welcome to the Gaybourhood - Community BBQ:** Wednesday, June 13th, 11:00am - 3:00pm, at OUT Saskatoon

**CHEP Good Food Inc. 2nd Annual SIGA Good Food Run**

**Sunday, June 10th:** 10 a.m. to 1 p.m. in support of CHEP, beginning at Victoria Park, Saskatoon. To register, visit <https://raceroster.com/events/2018/16789/siga-long-runners-good-food-run>

**AIDS Saskatoon:** Call 306.242.5005 for more information

**National HIV Testing Day,** June 27th at the Friendship Inn, Saskatoon Sexual Health, and the Idlwyld Medical Centre. Sponsored by AIDS Saskatoon, Saskatoon Sexual Health, Elizabeth Fry Society, PLWA, Saskatchewan Health Authority, SHARE, and Canadian AIDS Society.

**National Hepatitis Day BBQ,** July 27th, at AIDS Saskatoon, 1143 Ave F North.



The Saskatoon Community Clinic was pleased to participate in Bike to Work Day YXE 2018 at both our Downtown and Westside Clinic locations.

# Universal Pharmacare

By Stan Rice, Saskatoon Community Clinic Pharmacist 1970-1983

On February 27th, 2018, Canada's finance minister Bill Morneau announced the federal government would be introducing a universal pharmacare program. Members of the Saskatoon Community Clinic celebrated this announcement along with many other organizations that have long been advocates of pharmacare. The cheering was short lived as the following day Mr. Morneau began backtracking on this promise. He began talking about a national pharmacare strategy not a national pharmacare plan. He said "We need to recognize that we need a strategy that deals with the gaps and doesn't throw out the system we currently have." In other words the federal plan will not be universal and will not eliminate paying insurance companies to administer a plethora of plans.

The good news is that on April 18th, 2018, the Commons Standing Committee on Health released a report Pharmacare Now: Prescription Medicine Coverage for all Canadians. The all-party committee recommended that prescription drugs be included as insured health services under the Canada Health Act. They went on to say, "The majority of the Committee believes it is time to move forward and create a universal single-payer prescription drug coverage program."

There are a number of good reasons to introduce a universal pharmacare program:

- One in ten Canadians cannot afford the drugs they are prescribed. It is estimated that failure to fill a prescription or cutting back on the recommended dose costs the health care system \$7 to \$9 billion each year.
- We pay more for our prescription drugs in Canada than we need to. Of 32 OECD countries, Canada pays the second highest cost for prescription drugs. We need to force the drug companies to compete.
- We pay more to administer our current plethora of private plans than we need to. We could reduce the administrative costs by 6% by moving to a single-payer system.
- Canada is the only country with universal health care that does not include drugs.
- We could improve safety, quality and efficacy of the drugs we use by better assessment based on evidence and cost/benefit analysis.

**A pharmacare plan must be universal with a single payer system.** A universal plan would eliminate the current

patchwork of provincial government plans and private plans as well as cover those with no drug plans. For example, cancer treatment can vary from no cost in one province to \$20,000 in another province.

Public drug plans in each of the provinces and territories as well as six different plans covered by the federal government pay for 43% of the total costs of prescription drugs. These plans vary greatly. Private plans are also quite varied and pay for 35% of prescription costs. Out-of-pocket costs amount to 22%.

Our current patchwork contains large administrative costs that drive up the premiums that employers and employees pay for their drug plans. It is estimated that these administrative costs are 8% while costs for a single payer (i.e. each provincial government) would amount to 2%.

## Action required

The public must vigorously oppose any national drug plan that does not:

1. Provide universal coverage;
2. Provide for a single payer in each province and territory; and
3. Reduce costs to the maximum by adopting all available strategies.

We urge you to write or email your Member of Parliament, the federal health minister, the finance minister and the Prime Minister to urge them to move quickly towards a universal national single-payer drug program for all Canadians. Contact information is available at [www.ourcommons.ca](http://www.ourcommons.ca).

## Some History

- In 1969 the Saskatoon Community Clinic (SCC) demonstrated that we could force drug companies to compete on pricing through the use of a drug formulary. We provided significant savings (25%) for the cost of prescriptions. We did this through excluding expensive brands of drugs where less expensive brands were available and rejecting products of no proven clinical value.

- The Saskatchewan Prescription Drug Plan (SPDP) as adopted in 1975, was based on the success at the SCC. A provincial formulary was successful in reducing prices. Although, as pointed out in a speech from Dr. John Bury, we only saved about half as much as we could have mostly because the Saskatchewan market was small. A national plan would accomplish much better results.

*Continued on page 7...*

- The plan covered all Saskatchewan residents and featured a co-payment of \$2.00 per prescription. There was a slow erosion of this principle leading to the present state of some coverage for seniors and children based on income testing and with a large co-payment.

- At the same time, the federal government, in a number of

steps increased patent protection from 10 to 20 years under considerable pressure from brand name manufacturers and the USA government. Each of these changes brought promises from the brand name manufacturers that they would increase research and development in Canada, a promise they failed to keep. In 1987 they spent 7% of their sales on R&D and currently are at less than 5%. ❖

## Healthy Debate – Unbiased Facts – Informed Opinions

By Ingrid Larson, Member and Public Relations Director

I am excited to tell you about healthydebate.ca, an excellent Canadian health care website. This resource has easy to read (and listen to) stories, perspectives and evidence-based knowledge for patients and health care providers. Written and produced by staff journalists and edited by physicians and health sciences students, the website has six sections:

### Articles

Covering a range of topical health care concerns, the articles are intended to get us thinking about our health and how the system and environments in which we live affect us. Postings include:

- In healthcare, do the people in power reflect the people they serve?
- Why Canada needs more Genetic Counsellors.
- What are the Health Impacts of Forest Fires?

### Opinions

Citizens from across Canada - journalists, health care providers, managers, policy makers and politicians - post their points of view about the health care system. In addition to learning the views of others, anyone can submit an opinion or respond to others' posts. Some recent contributions include:

- Is research on Alzheimer's disease and dementia being oversold?
- There is nothing funny about leaving Indigenous voices out of the pharmacare discussion.
- How could I witness the death of a patient and feel nothing?
- Cancer advocates, it's time for us to get mad as hell.

### Faces of Health Care

This section profiles patient and health care providers' experiences with the health care system. As the

webmasters note, "People who use our health care system, and those who provide the care, have profound and powerful stories to tell. Faces of Health Care helps to tell these stories."

Through these profiles you will learn how people of all ages and stages experience the health care system, both as users of the system and as providers of health care.

### Health Navigator

Any Canadian can submit a question which will be answered by Paul Taylor, a well-known Ontario health journalist. He recently answered the following questions:

- Is it true there are five types of diabetes, not two?
- Are doctors cutting back on opioids too much and too quickly?
- Provide health advice to older adults? The words you use matter.

### Round Table

Get out your podcasting app! The Round Table is a free weekly podcast hosted by Healthy Debate. The podcast offers an informative and irreverent discussion of new research from major medical journals.

- If the Diet Fits! A SPACE for Opioids in Chronic Pain & Low-Fat vs Low-Carb Diets for Weight Loss
- King of the CASTLE: Catheter Ablation for Afib with Heart Failure and Myocardial Infarction in Influenza
- More or Less: Sepsis, Shock, Stroke, and Staying Dry in Heart Failure
- Need a Lyft? VTE Prophylaxis After Arthroplasty & Ridesharing to Decrease Missed Appointments

Subscribe to the Healthy Debate newsletter at <http://healthydebate.ca/subscribe> Visit their website at [www.healthydebate.ca](http://www.healthydebate.ca) ❖



## Gifts to the Saskatoon Community Clinic Foundation

### *In Memory of:*

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**Shirley Durant Nixon & I. W. Nixon** from Margaret Durant  
**Rebecca Elder** from Margaret Graham-Woloshyn  
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*Thank you for your generosity. Donations from February 1st, 2018 to April 30th, 2018*

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Member concerns and comments are welcomed by the Member and Public Relations Department. Please call 306-664-4243.

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