



## Office of the Chairperson

The Board was presented with the platform of the newly elected Chairperson, Jeannie Pelletier.

#### Reclaiming our path on four key principles:

- Appreciation of the distinctiveness of an Eeyou/ Eenou world view and traditions
- Indigenous awareness about the process and impacts of colonialism
- Cultural knowledge and traditions as paramount to retaining Eeyou/ Eenou identity and collective awareness

Engagement and empowerment

## Office of the Chairperson

#### **Restoring our Health:**

- Support what is working well in our current system
- Restoring health of the people to its full and natural potential
- Review priorities and expectations

#### **Rewriting our story:**

- Change how we operate
- Change how we decolonize the language to reflect our Eeyou/Eenou world view.
- Create a stronger sense of community by rebuilding and restoring our human need for fellowship and relationship
  - Use voice grounded in our ancestral teachings

## **Resolution Officer's Report**

The Board received the Resolution Officer's Report for the period from June 2024 to December 2024. A total of 43 employee complaints have been received and responded in that time. Two instances were significant enough to be resolved with conflict resolution processes.

The Resolution Officer provided *Lets Reflect on Ourselves Training* when requested. He also attended modules 4 to 7 of *CFOT Development Training* over the course of the period covered. He also participated in the Mistissini Career Week and the WESC Regional Emergency Psychosocial Response Team in-person training provided by the Canadian Red Cross. Finally, the report noted that funding for an Assistant Resolution Officer position was approved.



## Governance Advisory Committee (GAC): Council of Nurses By-law Amendment

The Board received the proposed amendment to the Council of Nurses By-Law, to be reviewed and approved at a later meeting. The amendment

- Recognizes new job titles: Nurse Practitioners (NP) and Licensed Practical Nurses (LPN)
- Expands the Council of Nurses Executive Committee (CNEC) from seven to nine members, while also adding flexibility by designating six nurse representatives, including a dedicated Cree nurse representative; also new on the CNEC is the LPN Committee Chair, while the ED and DPSQA – Health remain on the CNEC.



## **GAC:** Council of Nurses By-law Amendment cont.

The by-law also changes the CNEC member mandate from two to three years, with a maximum of two consecutive mandates. It also provides for a two-month transition period, and, in the case of vacant seats, the mandatory replacement with an individual selected by the CNEC, to be served until the next elections.

Finally, the by-law creates a new advisory LPN Committee while also formalizing the Skills Maintenance and Promotion Committee and the Ad Hoc Committee.

The amendment has been reviewed and endorsed by the CNEC and was ratified at the Annual General Assembly of the Council of Nurses in October 2024. And the Governance Advisory Committee recommended its approval at the next Board meeting with prior notice of thirty (30) days in accordance with Consolidated Bylaw No.8.

# Vigilance and Client Experience Committee: Commissioner of Complaints and Quality Assurance Report

The Commissioner of Complaints and Quality Assurance presented the Board received with quarterly report for July 1 to September 30, 2024. The report reviewed complaints and statistics and summarized the activities of the complaints department, while also defining relevant terms for Board members.

Over the period, 32 files were opened, including five complaints, 19 requests for assistance, seven interventions and one consultation. The previous period also saw 32 complaints, while for this period in 2023 the department received 54 complaints.



#### Commissioner of Complaints and Quality Assurance Report cont.

The Department also made community visits to Wemindji and Ouje-Bougoumou and was present at local general assemblies in Waskaganish and Chisasibi as well as at the CNG AGM in Wemindji. Department members participated in Ombudsman Training in Toronto and held monthly meetings with the Executive Director, the Regional Commissioners (RCPQS), and the Working Group for a Culturally Safe Complaints Review System.



## Council of Physicians, Dentists and Pharmacists (CPDP): renewal of Physicians, Dentists and Pharmacists.

# The Board approved the renewal of privileges or the first-time privileges for physicians.

A total of 113 family physicians and general practitioners were renewed in the Department of General Medicine; a further 35 specialists and ten public health physicians were also granted privileges. These privileges are valid from 1 January 2025 to 31 December 2027. Four family physicians and five specialists resigned or chose not to have their privileges renewed.



### **CPDP: Renewal of Physicians, Dentists & Pharmacists cont.**

The Board also approved the renewal of privileges or the first-time privileges of dentists and pharmacists.

A total of 11 permanent dentists had their privileges renewed in the Department of Dentistry, along with another 41 replacement dentists (seven of these replacement renewals dependent upon information or documents pending). Another seven dental specialists were also renewed. These privileges are valid from 1 January 2025 to 31 December 2027.

Finally, the Board also renewed the privileges of 12 permanent and part-time pharmacists. These privileges are valid from 1 January 2025 to 31 December 2027.



## **Council of Nurses: Quarterly Report**

The Council of Nurses Executive Committee (CNEC) presented its quarterly report covering the period from October to December 2024. The report introduced the new CNEC committee members, elected at the October 2024 annual nurses training. The report also summarized the activities of the council, including a budget proposal, a review of the new council of nurses' by-law, and reviews of tools and protocols.

Goals for the coming year include improving quality assurance in nursing care.



## **Human Resources (HR): Dashboards Update**

The Human Resources (HR) Committee updated the Board on the functions of dashboards for General Management, Administrative Services, Miyupimaatisiiun, Pimuhteheu and Nishiiyuu. The dashboards present a portrait of each department for the 1 April 2023 to 31 March 2024 fiscal year.

Data is organized into four categories: Staffing, Workforce Wellness, Recruitment & Retention and Positions. The first three of these are overviews of employee status, while the last summarizes roles by position. The dashboards enable management to see the strengths and weaknesses of the workforce and to anticipate areas that will be need of staffing changes.



## **Audit Committee: Approval of Financial Report**

The Board voted to approve the Quarterly Report (AS- 617 P6 for 2024-2025) presented by the Audit Committee.

The report highlighted the challenges in managing the expenses incurred by the increasing costs of nursing agencies. The rising costs lead to significant difficulties in ensuring consistent and high-quality service delivery, as well as retaining skilled labour.



#### **Audit Committee: Accumulated Surplus & List of Contracts**

The Audit Committee also updated the Board on the accumulated surpluses and the list of contracts over \$250,000.

Of an accumulated surplus of just over \$7 million, almost \$2.7 million has been allocated to the purchase of new medical and midwifery equipment, vehicles and kitchen equipment, leaving an unrestricted surplus of over \$4 million to address emergencies.

The CBHSSJB has 23 contracts of over \$250,000, 14 of which are directed towards capital projects.



### Risk Management: Incident/Accident Statistics & Update

The Board was updated on Incident/Accident (I/A) statistics from April1 to Nov 30, 2024, and on the Risk Management team's activities.

A total of 742 I/A reports were filed in this period, compared to 656 from the same period last year. Of these, 99% (738) led to no or only temporary consequences to the patient and did not require or prolong hospitalization. The three most frequently cited events involved medication, appointment scheduling, and laboratory events; these accounted for 65% of the total. The team is analyzing, in collaboration with internal and external partners, the root causes of the most recurrent types of events and implementing actions to reduce their frequency and enhance quality of care.

## Risk Management: Incident/Accident Statistics cont.

Four were sentinel events, which could have contributed to the death of clients; three of these were related to transport, while one was activity-related. The Risk management team is collaborating with managers, clinical teams and external partners in reviewing the sentinel events to ensure they do not recur.

The Risk Management team continued to facilitate quarterly meetings of nine working groups, in addition to training CBHSSJB staff on an updated reporting system to be functional in 2025, updating the risk management framework, and creating new positions to address risk management in living environments.





## **Acceptance of New Board Members**

The Board voted to welcome two new members to the Board of Directors, Dr. Kevin Rousseau as Clinical Staff Representative and Bella M. Petawabano as Community Representative for Mistissini.

Dr. Rousseau replaces Dr. Robert Tremblay, who resigned as clinical staff representative effective in October/November 2024. Dr. Rousseau will fill the remaining portion of Dr. Tremblay's three-year mandate, ending in December 2025.

Bella M. Petawabano was elected as the community representative for Mistissini in the election held on October 28, 2024. She will serve a three-year mandate.



## **Appointment of Vice-Chair**

The Board approved the appointment of Robert Auclair, the Community Representative for Whapmagoostui, as interim Vice-Chair for the Board of Directors.

He will hold this interim position until elections for Vice-Chair and the appointment of board representatives on various Board Committees are completed in the new year.





#### **Executive Director Succession Plan**

The Board was updated on succession planning for an Executive Director to succeed Daniel St-Amour. The overview of the process noted some changes to discuss. Notably, the eligibility criteria has been revised from being restricted to Cree CBHSSJB AEDs with five years experience with the organization to also allow for Cree CBHSSJB senior managers with five years experience with the organization.

The succession plan for senior managers begins with (1) a call for interest among potential applicants and is followed by (2) the selection & approval of candidates, and (3) an education profile and (4) competency development program for selected candidates, which leads to a revised overall timeline for ED succession.

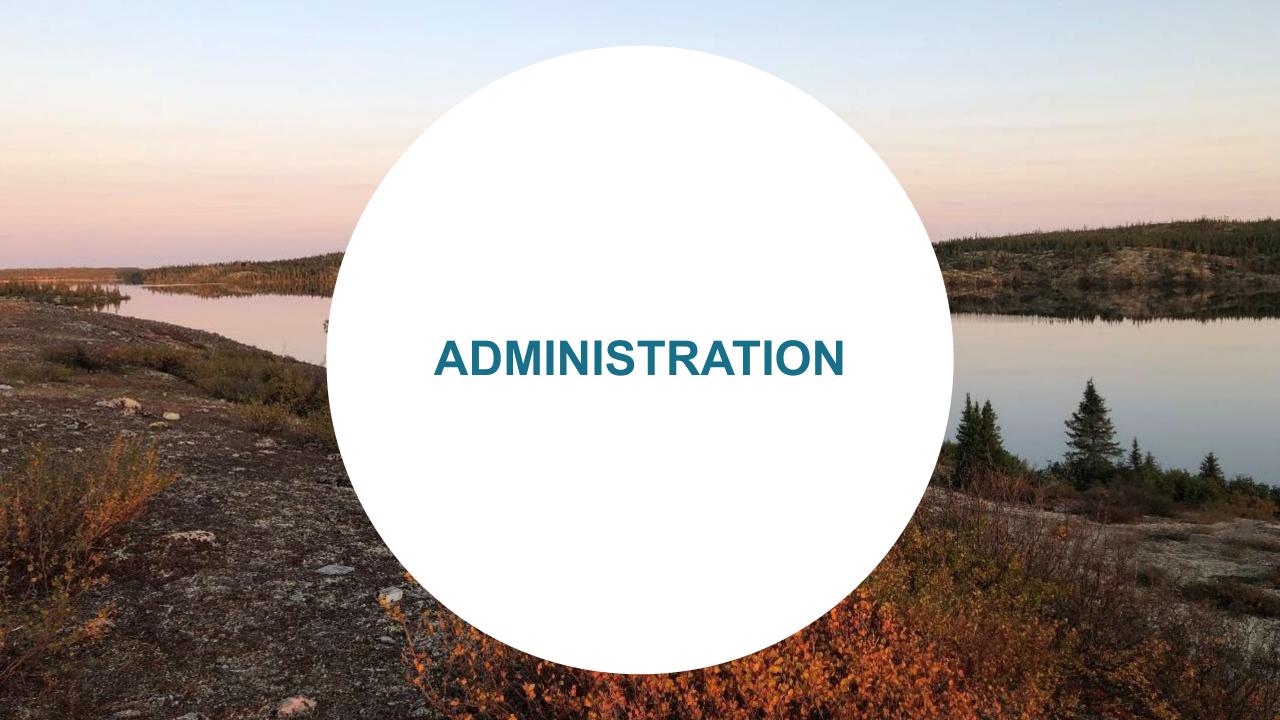


#### **Executive Director Succession Plan cont.**

The revised timeline involves an initial 6-12 months of identifying and developing potential successors, then 12-16 months in an IMPM masters program, a 12-month selection process to identify the new ED, and a 12-24 month learning continuum to support the new ED's growth and performance. The entire process is expected to take 42-64 months, a change from the earlier estimate of 36-52 months.

The succession process is being supported by Calgary-based organizational psychologist Eloise Moodie, an experienced executive assessor and lead partner with Odgers Berndtson's Leadership Advisory Practice.





#### **Maintenance of Assets Plans 2025-2028**

#### The Board voted to approve the Maintenance of Assets Plans for 2025 to 2028.

Maintenance of Assets funding covers several specific funding envelopes: buildings, minor functional renovations for buildings, medical equipment, and non-medical & other equipment.

In addition, the Maintenance of Assets plan also includes the plan for new residential housing (NRH), which consists of two sections: NRH furniture and NRH renovations.



## Diabetic Retinopathy Tele-Screening Devices

The Board voted to approve the purchase of new tele-screening devices to support diabetic retinopathy.

The much-needed new equipment will replace obsolete or non-functioning equipment. Diabetes affects one third of adults in Eeyou Istchee, and currently 3,112 people are on the waiting list for screening. The new retinal cameras with optical coherence tomography (OCT) will eliminate the need for eyedrops, freeing nurses to attend to other responsibilities, and are also more convenient for patients, allowing them to be treated on territory. The purchase covers twelve new retinal cameras with OCT: one for each CMC, one for a specialized trailer, one for Espresso and one for McGill. There is an agreement with McGill to pay back the cost of one device.

#### **Snow Removal Services**

The Board approved Concreete Construction S.N.E.C. for snow removal and sand spreading services for CBHSSJB facilities in Chisasibi from November 1, 2024, to April 30, 2027.

Concreete Construction was the sole bidder responding to the call for tender open from September 19 to October 4, 2024. The call for tender was based on a fixed bank of hours to clear snow and spread sand in parking areas of all CBHSSJB facilities in Chisasibi. However, the approval also allows for reasonable cost increases resulting from a heavier and/or longer snow season each year.





## **Homelessness Project**

The Board was updated on Homelessness Projects. The MSSS's Interdepartmental Action Plan on Homelessness, provides four years of funding with \$1.2 million available for Eeyou Istchee programming to (1) address addiction and homelessness, (2) provide emergency shelters, and (3) to consolidate local homelessness services. Some Phase One projects have been completed while others are in progress, and Phase Two proposals are being developed and considered for further projects.

The Board was provided with statistics and other information concerning the various projects and proposals. This included information on the use of phase-one-supported facilities such as Beaver Lodge in Ouje-Bougoumou, the land-based Mianscum Solidarity Camp (operating through Oujé-Bugoumu), and Awashish Kuutikunikamukw in Waswanipi.

## Homelessness Project cont.

Six delegates from the CBHSSJB also attended the Homelessness Conference in Ottawa from October 29-31; the delegates aimed to gather resources to address homelessness in Eeyou Istchee.

The team has also met with CNG representatives to discuss funding and ways that the CBHSSJB could collaborate with the CNG.

Next steps involve (1) reviewing phase two proposal submissions, (2) providing financial assistance to extend phase one projects already underway, (3) establishing indicators to determine types of services required, (4) defining scope, scale and sustainable approaches with partners for services and programming, and (5) developing policies, procedures and protocols for administration.

#### **Elder Wellness Action Plan**

The Board was updated on the Elder Wellness Action Plan, which aims to prevent Elder abuse.

The Action Plan focuses on building awareness, collaborating with other key stakeholders to build effective relationships, establishing a vision to promote Elder wellness, and providing specific trainings for CBHSSJB staff, the EE Police Force, Band Councils and other partners.

It also laid out the processes to be followed for reporting and responding to Elder abuse, summarized the highlights of work carried out in 2023-2024, and outlined next steps for 2025.

The Policy on Mistreatment of Seniors and Vulnerable Adults will be tabled for approval at the next meeting of the Board.

## Federal programs and Services

The Board was updated on federal programs and services. The CBHSSJB's current agreement with Indigenous Services Canada (ISC), a five-year block health contribution, expires at the end of March. The objective is to obtain a new five-to-ten-year block funding agreement based on the SRP. The update covered the current financial situation, surplus use in 2025-2026, and next steps.





## Nishiiyuu Activities

The Board received an update of activities in the Nishiiyuu department. Highlights include Miyupimaatisiiun Committees (now supported by the CNG and Cree Nations), Family Group Conferencing (14 staff trained, and more being trained), workforce development, digitalization of materials, and a number of gatherings over the past six months.

Program development has focused on the creation of a Single Nishiiyuu Program Manual, which would include a section for each type of activity, such as land-based activities, Waapimaausuwin, traditional medicine and counsellors, Family Group Conferences and Cultural Safety.



## Nishiiyuu Activities cont.

A number of activities and initiatives are having an impact on community development; these include the Miyupimaatisiiun Committees, new and ongoing collaborations within CBHSSJB departments and between entities, and the training and mobilization of local populations for specific projects such as the Beauty for Ashes project.

The update also noted the signing of service contracts with traditional healers and knowledge keepers, the launch of new Nishiiyuu mandates and activities (for example, digitalization and the development of translation services), and federal funding allocations for projects and programs.





#### **Youth Protection**

The Board was updated on Youth Protection Services, including a summary of priorities for 2024-2025. Among these are

- a restructuring of the organizational chart,
- strengthening collaborations with EE Police Force, Cree School Board, CMCs and Youth Healing Services,
- professional development for managers, team leaders, community workers, and
- close collaboration with the Awash-Uschiniichisuu Shikascheimuun Task Force

Other priorities include the Kwaiiskw iish Pimanaataauch Youth Protection Clinical & Coordination Table, increased quality of services, and sensitization trainings with partners.

## **Youth Healing Services**

The Board was provided a summary of the activities of the Youth Healing Services' Bush Program and Land-Based Healing. The summary was broken down by numbers of participants per group home and program, types of activities, and duration of activities. The summary included statistics for the bush program/land-based healing undertaken by Waseskun, Wapikun and Wasteskun units.

In addition, the Board received a summary of limitations of freedom, intensive supervision and use of detention/isolation, broken down by gender and facility. The summary gave an overview of the number of youth in YHS, broken down by the cause of placement (YP Act or YCJ Act), facility, age, gender, activities undertaken and other data.



#### Maanuuhiikuu

The Board was updated on Maanuuhiikuu (mental health) services to CMCs and off-territory since June 2024. In that time, Maanuuhiikuu has continued its efforts in

- Suicide Prevention & Intervention: delivered Applied Suicide Interventions Skills Training (ASIST) at Dialogue for Life and to the communities, attended local and regional conferences, etc.
- Indian Residential School/MMIW/Day School: continued to support the ground penetrating radar investigation at Fort-George, formed a MMIWG working group with CNG & CWEIA, continued to support CFOT, participated in Truth & Reconciliation Day activities, and trained two new Resolution Health Support Workers

#### Maanuuhiikuu cont.

- Cree Focusing Oriented Training (to be completed in Jan. 2025), and
- Mental Health First Aid FN delivered to Wemindji.

Maanuuhiikuu also continued its efforts to attract psychologists to the CBHSSJB, continued its support for WESC with psychological first aid, and attended CBHSSJB career fairs in Chisasibi and Mistissini.



### **Disability Programs Specialized Services**

The Board received an update on activities of Disability Programs Specialized Services (DPSS), which supports the Miyupimaatisiiun Care Team (MCT) and Extended Care Team (ECT) in providing services and programming for individuals with neurodisability and/or complex disabilities and for their families. The update included a summary of clinical advising per community, neurodisability programming and service delivery, respite planning and knowledge sharing.

DPSS's role is to support the MCT and ECT by sharing knowledge and aid in management, programming and delivery, rather than working directly with clients themselves.

## **NEXT REGULAR BOARD MEETING**

March 2025





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