



# Mistissini Lodge

# Mistissini

A scenic landscape photograph featuring a calm lake reflecting a soft, pastel sky at dawn or dusk. The foreground is a rocky, sparsely vegetated shore with some autumn-colored shrubs. In the background, a line of evergreen trees marks the far shore. A large, white, semi-transparent circle is centered over the image, containing the text "COMMITTEES OF THE BOARD" in a bold, dark blue, sans-serif font.

# **COMMITTEES OF THE BOARD**



## Governance Advisory Committee: Amended Policy on Mistreatment of Vulnerable Adults

**The Board approved a replacement of the “Policy on the Mistreatment of Vulnerable Adults” with a “Policy on the Mistreatment of Seniors and Vulnerable Adults,” an amendment of the previous policy.**

The policy amendment follows changes in 2022 to the Quebec *Act to combat maltreatment of seniors and other persons of full age in vulnerable situations*, which provides for measures to address mistreatment of vulnerable adults, including seniors. The act, first enacted in 2017, requires that all Quebec health and social services organizations have a policy on the mistreatment of vulnerable adults.



## Amended Policy on Mistreatment of Vulnerable Adults continued

The new CBHSSJB policy also follows discussions between the CBHSSJB, Cree entities and other partners involved in the application of the Act, including the MSSS.

The amended policy clarifies certain definitions, in alignment with the Quebec act, creates a new role of CBHSSJB Advisor – Elder Wellness, and defines responsibilities of the DPQSA – Psychosocial, in addition to some other changes.

The new policy will be sent to the MSSS and is to be reviewed every three years.



## Governance Advisory Committee: Amendment of CNIHB Dental Policy and CNIHB Framework

**The Board voted to replace the current CNIHB (Cree Non-Insured Health Benefits) Dental Policy with a new CNIHB Dental Policy, at the same time replacing the current CNIHB Management Framework with a new framework that incorporates the changes to the dental policy.**

The dental policy was amended to align better with other more-recently amended policies within the CNIHB Management Framework.



## Vigilance and Client Experience Committee: Service Quality and Complaints Commissioners Quarterly Report

The Service Quality and Complaints Commissioners deposited their quarterly report for the period of October 1 to December 31, 2024. The report reviewed complaints statistics and summarized department activities. This period saw 27 files opened, including five complaints, 15 request for assistance, three consultations and four interventions. The report also defined the files by nature of complaints, services, communities, and means of filing.

Department activities include a range of meetings with interested parties and groups, as well as participation in trainings.



## Council of Physicians, Dentists and Pharmacists: Nominations of Physicians and Dentists

**The Board approved the CPDP's nominations of the following physicians, with all nominations effective to December 31, 2027:**

Dr. Amir Arshiya Kaffash-Mohamadi, active member and Fulltime Plus (FT+) family physician

Dr. Stacey Sarkodie, active member and FT+ family physician

Dr. Calia Giorgas, active member and FT+ family physician

Dr. Sarah Mikhail, active member and FT+ family physician

Dr. Élise Girouard-Chantal, active member and FT+ family physician

Dr. Anna Davidson, active member and FT+ family physician



## CPDP Nominations Continued

Dr. Geneviève Gosselin, active member and FT+ family physician

Dr. Vivian Leung, active member and Part-Time (PT) occasional family physician

Dr. Julia-Anne Léonard, active member and PT occasional family physician

Dr. Juliette Massé-Savard, active member and PT occasional family physician

Dr. Janet Chan, active member and PT occasional family physician

Dr. Silvio Qako, active member and FT+ family physician





# CPDP Nominations Continued

**The Board also approved the CPDP's nominations of the following dentists, with all nominations effective to December 31, 2027:**

Dr. Émilie Côté, associate member and replacement dentist

Dr. Marise Saaman, associate member and replacement dentist

**Finally, the Board accepted the resignation of Dr. Marie-Claude Roy** as an active member and full-time dentist, effective June 25, 2025.



# Council of Nurses: Quarterly Report

The Executive Council of Nurses' quarterly report presented the new Council of Nurses Executive Committee (CNEC), which has had a change in representation following the passing of the CNEC bylaw. Members of the CNEC include Diane Blueboy (President & Chisasibi Pole Representative), Christina Matoush (VP & Cree rep), Marc-Antoine Galarneau (Secretary & Mistissini Pole rep), Stephanie Grenier (Treasurer & Regional rep), and Antoine Harmoy (Communications Agent & Waskaganish Pole rep).

The report also provided a general overview of activities, including preparations for the election of a nurse practitioner representative, drafting of a CNEC tour budget, implementation of the auxiliary nurses committee, and review of tools and protocols.



# Council of Nurses: Quarterly Report continued.

Goals for 2025 include improving CNEC structure by including a new representatives for nurse practitioners and auxiliary nurses, as well as establishing the Auxiliary Nurses Committee and enhancing training for CNEC members.

In addition, the CNEC aims to improve quality assurance in nursing care.



# Human Resources (HR) Committee

The HR Committee provided an update on the newly created Employee Wellness Working Group's efforts to assess and support the psychological health of CBHSSJB employees. These involve educating people on mental health and wellness, destigmatizing mental health issues, raising awareness and self-awareness, and promoting health environments.

In addition, the presentation noted that a call for proposals for Psycho-Social Remote Services will be launched on SEAO in March and that the Employee Assistance Program (EAP) has been renewed for one year with Telus.

The working group will be collaborating with Nishiiyuu and Communications as it progresses in its efforts.



# Audit Committee: Quarterly Financial Report & Analysis of MSSS Accounts Receivable

**The Board approved the Quarterly Financial Report submitted by the Audit Committee.**

The report, for period 9 of 2024-2025, noted the projected and actual operating and capital asset funds as well as combined funds and accumulated surpluses.

The Board was also apprised of MSSS accounts receivable, including specific allocations (such as for for CNIHB, new residential facilities, etc) as well as special allocations (eg, COVID-19 allocation) and expenses integrated into the operating budget (eg, development, foster homes, salary measures etc).





# Audit Committee: List of Contracts & Budget Process

The Board was informed of the CBHSSJB's list of contracts over \$250,000. There are currently seven contracts in this category.

The Board was also reminded of the budget process. A working group formed by the Executive Director, the Assistant Executive Director Administration, and the Director of Finances sets the budget parameters and objectives regarding income and expenditure to guide the development of draft budget. When the final budget is approved, the Executive Director and the Director of Finances are responsible for implementing it. The process from start to finish takes about five months.



# Audit Committee: Internal Auditor's Report

Finally, the Board reviewed the internal auditor's "Clearview Update" report by the Mallette accounting firm.

This report, covering 2017 to 2024, summarized the number and nature of cases reported, which ranged from concerns of fraud & conflicts of interest (five instances each over these years) to issues around compensation and benefits (two) or simply suggestions for improvement (three). The report also noted key performance indicators from the initial response and follow-ups to the submission of the final report per case and the closing of files.

The report concluded with a set of current and proposed targets for initial response times, submission of final reports, and closing of files.



# Risk Management Committee: Update

The Board was updated on the Risk Management (RM) incident/accident (I/A) statistics as well as the team's activities. So far, the total of 981 I/As reported this year are over last year's number (835) at this point. Of these, 970 had no or only temporary consequences for clients, but 11 were sentinel events that could affect the health of clients and/or could have contributed to the death of a client. Of these, four were related to the client's medical record, four to transportation, two to a fall and one to an off-site activity.

Most frequently reported I/A events concerned medications, followed by appointment scheduling and laboratory; none in these categories contained sentinel events.



# Risk Management Committee: Update continued

RM activities include enhancing the RM system by launching a communications plan and implementing the 2025-26 action plan, among other initiatives. RM is also migrating to a new reporting system (from Gesrisk 5 to Gesrisk SaaS) and is training staff on the new system, as well as collecting and sharing risk data and trends. Finally, RM is participating in nine working groups with internal and external partners to identify the causes of the most recurrent and serious I/A events and to create action plans and support for their implementation.



A scenic landscape featuring a calm lake reflecting the sky, surrounded by a forest of evergreen trees. In the foreground, there is a rocky shore with some autumn-colored vegetation. A large white circle is superimposed over the center of the image, containing the text 'CORPORATE SERVICES' in a bold, blue, sans-serif font.

# **CORPORATE SERVICES**



# Appointment of Board Representatives to Committees and Vice-Chair

The Board voted to approve several appointments.

**The Board approved the appointment of Pauline Lameboy (Chisasibi representative) as Vice-Chair of the Board of Directors for the coming year.** She replaces Christine Petawabano, whose term in office has ended.

**The Board appointed Pauline Lameboy, Nicholas Ortepi, Robert Auclair and Thomas Jolly to the Administrative/HR Committee for a one year term.**

**The Board appointed Thomas Jolly to the Audit Committee.** He joins Pauline Lameboy and Jamie Moses (Eastmain) on this committee, and replaces Teresa Danyluk, whose term in office had come to an end.







# **GENERAL MANAGEMENT**

# Capital Projects

The Board was updated on the status of the CBHSSJB's capital projects.

**Regional Hospital** construction is on target. High school demolition is complete, as are foundation plans and Hydro Quebec planification. Internal consultations with Biomed and other groups are in progress.





# Capital Projects

A service agreement and an operational budget for the **Mirage** site have been completed, and a five-year renovation plan that will accommodate CBHSSJB needs in services rendered is currently in the process of being completed. A preventative maintenance plan is being developed and should be complete in May 2025.

All **Espresso Hotel** teams have been provided with training and equipment and a monitoring system is currently being developed. Functional renovations are underway and will be completed by the end of March 2025. An agreement on maintenance, cleaning services and reporting is to be signed shortly.



# Capital Projects

A funding strategy is being developed for the **Mistissini Elders' Home**. If the MSSS approves the strategy, a contract will be signed for spring 2025, with foundation and substructure work beginning in April/May 2025; modules will be on the assembly line by April. The project is expected to take 24 months to complete, once construction has begun.





# Capital Projects

At the **Chisasibi Elders' Home**, slabs have been poured, and the second floor has also been completely poured. Doors and windows are 85% complete. The interior system and building mechanics are currently underway, with construction expected to be complete in December 2025.



# Capital Projects

For the **Mîniwâchihwâukimikkw/Healing Lodge**, the development of plans and specifications will begin in early 2025 and will take 12 months. Clearing for the access road and construction site should start in 2026. Cree representatives will be consulted for developing the building concept, both internally and externally.

The launch of the **Ashuukin Services** facility in Waswanipi has been disrupted as recent changes at the Ministry have created delays in funding approval. Negotiations are being re-initiated in March.



# Capital Projects

The **Waskaganish Birthing Home** structure is complete and work on the interior system is in progress. The installation of doors, windows and inside insulation is underway. Construction should be completed in December 2025, with commissioning taking place in winter 2026.



# Capital Projects

The **Youth Protection Facility** – formerly the old **Band Office in Eastmain** – is currently undergoing an inspection of mechanical systems. The concept for the building is 90% complete, with the exterior still in progress. Consultations and mechanical upgrades will begin in winter 2025. Interior renovation will begin in spring/summer 2025, with project completion expected in early winter 2026.



# Capital Projects

**Facilities for special needs and for wounded spirits (mental health)** await approval of the health agreement extension from the government. A contingency plan will see some of this clientele accommodated in a wing of an Elders' Home.

Calls for tender for **40 transit units in Waskaganish and Mistissini** will be launched following the approval of the health agreement extension. Site preparation for construction is complete and plans will be ready for call for tender in March.

All plans and specifications for the **80 transit units in Chisasibi** have been completed and can now be integrated into cost negotiations. The project also depends on the approval of the health agreement extension.





# Capital Projects

A clinical plan for **Waswanipi hemodialysis** has been completed and sent to the MSSS for approval. The project requires the approval of the health agreement extension.

The new **Waskaganish CMC** is complete with provisional acceptance expected mid-March. Commissioning will take place March-September 2025.



A scenic landscape featuring a calm lake reflecting the sky, surrounded by a forest of evergreen trees. In the foreground, there is a rocky, sparsely vegetated shore with some autumn-colored shrubs. A large, white, semi-transparent circle is centered over the image, containing the word "ADMINISTRATION" in a bold, blue, sans-serif font.

# **ADMINISTRATION**

# Air Creebec and Northern Operations Centre Update

The Board was updated on aeromedical evacuations, shuttle services for the CBHSSJB, and an upcoming contract renewal with Air Creebec. In 2024, there were 657 medevac flights, 116 with two or more patients. In 2023, there were 656 flights (99 with 2+ patients), and 2022 saw 527 (87 with 2+ patients).

The Board was also apprised of the number of evacuations by community and the limitations faced by carriers, such as relatively few equipped and available carriers, a maximum duty time of 14 hours/day, and a shortage of pilots, and especially experienced pilots. There are other operational limitations, such as weather, airport maintenance & services (fuel, de-icing), and other limits on resources.



# Air Creebec and Northern Operations Centre Update

Air Creebec shuttle services are available for transporting patients and caregivers to appointments and carrying healthcare personnel, with over 21 flights weekly. Monday and Friday each have one flight prioritizing CBHSSJB employees and medical personnel. In 2024, there were 60,174 transports of CBHSSJB passengers, a 400% increase since 2016; passenger volume is expected to increase a further 10% in 2025.

The contract with Air Creebec is coming to an end and negotiations for a new contract are in progress. The new contract should be presented to the Board for approval at the June meeting.



# Supplier for Generator Maintenance

**The Board approved Gestion IMM-TECH Inc. to provide generator maintenance services from November 20, 2024, to November 30, 2029.**

Generators at specific establishments in each community must be supported and maintained as they are the backup source of power during power outages.





A landscape photograph of a lake at sunset. The sky is a mix of soft pinks, oranges, and blues. The water is calm, reflecting the sky. The shoreline is rocky with some low-lying vegetation. A large white circle is centered over the image, containing the text 'MIYUPIMAATISIUN' in blue.

**MIYUPIMAATISIUN**

# Foster Care Resources

The Board was updated on the Cree Foster Care Resources Program, which aims to ensure the provision of a safe and nurturing environment for persons needing foster care. Foster Care's move to the Department of Youth Protection in April 2025 is being facilitated through an action plan and a transition plan.

The presentation summarized activities over the past two years and milestones reached. It also identified strategic opportunities in recruitment and retention and in Foster Care Best Practices and Protocols, and provided an overview of the stages in the transition processes as well as the priorities identified for the transition.



# Informal Caregiver Support

The Board was updated on informal caregiver supports. Informal caregivers are those who provide care to one or more members of their immediate circle, such as family members or close friends, who have a disability of some sort. The support can be long or short term, intermittent or continuous, and can take many forms (transport, housekeeping, providing meals, etc). A Government Action Plan is providing funding to recognize and support caregivers.



# Informal Caregiver Support continued

Recommendations for a Caregiver Action Plan, developed in 2024, involve building caregiver awareness/self-awareness, building and coordinating relationships between CBHSSJB personnel and caregivers, promoting wellness and developing capacity-building training for caregivers and health care personnel. The action plan aligns with the strategic regional plan by developing Cree culture, focussing on health and wellbeing, assuring access and quality, and nurturing and growing health care capacities.



# Federal Programs and Services

The Board was updated on federal programs and services. The current five-year block health contribution agreement with Indigenous Services Canada (ISC) expires at the end of March 2025 and a draft new agreement is in progress, to be signed by the end of March; this will be an estimated \$190m over 10 years, from 2025-2035. Over the course of the expiring agreement, Miyupimaatisiun received 50% of the funds, Pimuhteheu 34%, Nishiiyuu 2%, Administration 1% and General Management 13%.





A landscape photograph of a lake at sunset. The sky is a mix of soft pinks, oranges, and blues. The water is calm, reflecting the sky. The foreground shows a rocky shore with some low-lying vegetation, some of which has turned orange and yellow. A large white circle is superimposed over the center of the image, containing the text "NISHIIYUU" in a bold, dark blue, sans-serif font.

**NISHIIYUU**

# Nishiiyuu Department Audit Update

The Board was provided a comprehensive summary of the final report of Nishiiyuu's optimization audit, which aimed to verify that the department's internal processes and activities are working appropriately and efficiently to provide the best possible services. The audit also sought to ensure that Nishiiyuu is prepared to address the future needs of the Cree population and of CBHSSJB employees and that it developed a culture of continuous improvement.

The final report provided background information and assessed Nishiiyuu across a range of categories, including Work Culture, Governance, and Risk Management at both the departmental and the program level. It also referenced new programs and activities, Nishiiyuu budget, and digitization processes.



## “Beauty for Ashes”/Arrigah House

The Board was updated on the “Beauty for Ashes” (BfA)/Arrigah House project, approved in 2022 to address root causes of health and social issues in Eeyou Istchee. BfA is based on the Southcentral Foundation’s trauma-based Family Wellness Warriors Initiative. The Board was provided a timeline of past, current and future activities in the project (including interviews, onboarding of Cree trainers and storytellers, etc) through the end of fall 2025, at which point the CBHSSJB team will visit Anchorage to receive onsite training from the Southcentral Foundation. Nishiiyuu will also host Training the Trainers sessions in Montreal to support BfA.



# Family Group Conferencing

The Board was updated on Peyakutenuu Niishtam (Family Group Conferences). These are gatherings that include family members, community workers, social workers, youth protection workers, and other interested individuals, who come together to develop a family healing plan. This initiative is tailored for families who have a file with Youth Protection, with the aim of ensuring families are cohesive and stable and can stay together. The program, piloted in Mistissini and Chisasibi, offers participants the chance to work together in planning a better future.

The presentation outlined the Peyakutenuu Niishtam process and presented upcoming steps, including a relaunch of the program in Mistissini in March, the final adoption of documents, and hiring for vacant positions, as well as continuing the pilots in Mistissini and Chisasibi.





A scenic landscape photograph featuring a calm lake reflecting the sky, surrounded by a dense forest of evergreen trees. The foreground shows a rocky, sparsely vegetated shore with some autumn-colored shrubs. A large, white, semi-transparent circle is centered over the image, containing the text "PIMUHTEHU" in a bold, blue, sans-serif font.

**PIMUHTEHU**

# Director of Youth Protection Designates

**The Board approved three Department of Youth Protection staff members to serve as Director of YP (DYP) Designate if the DYP is suddenly absent or unable to act.**

The DYP Designates are Allysa Mark, Assistant DYP – Protection (Interim), Ashley Iserhoff, Assistant DYP – Family Support, and Helen Voyageur, Youth Protection Coordinator, Mistissini, Waswanipi & Oujé-Bougoumou. They would be responsible for ensuring proper youth protection coverage in the event that the DYP is unable to do so.





## Wiichihiwaauin Emergency Steering Committee (WESC)

The Board was updated on WESC highlights from June to December 2024. These include WESC's mandate of providing psychosocial support in times of crisis and breaking down silos, as well as WESC's pathway for achieving this end. It also includes the refinement of WESC's regional psychosocial support pathway, which involved (among other things) the psychosocial preparation for the forest fire season.

In November, WESC PFA Responders and other collaborators received Red Cross Certified Psychological First Aid (PFA) training; PFA provides emotional and practical support to individuals, families or communities in psychological distress.



## WESC continued

The WESC update also discussed the development of local psychological response plans for all communities. Training and development of response plans took place in early March, and draft response plans for communities are to be presented to local Chiefs and Councils in April.

Finally, the Board was apprised of events requiring a WESC response, including recovery of a missing three-year old child in Waskaganish in May, the stabbing death of a young man in Chisasibi in June, the loss of a life in a car accident near Wemindji in October, and the loss of two Waskaganish men in a boat accident near in October.

Respite for psychosocial staff in Waswanipi is ongoing.



# Pre-Hospital Emergency Measures Update

The Board was updated on the activities of the Pre-Hospital and Emergency Measures team, including the First Responders agreement and the evacuation protocols. There have been over 4000 First Responders interventions for each of the past two years. First Responder (and security guard) Agreements will be signed with each community within the next 3-6 months.

Concerning evacuations, the protocol is that Phase One evacuations include the most vulnerable populations: those sensitive to smoke and/or with mobility issues. Phase Two involves other vulnerable populations – Elders, young children, etc – while Phase Three involves the remainder of the population.



# Support Program for the Autonomy of Seniors

The Board was updated on the activities of the Support Program for the Autonomy of Seniors (SAPA). The program's Iyaskiwitau Admission Group has 52 individuals on a waiting list for immediate resources, and 37 on a waiting list for CHSLD/CMC services; the overall total is 61 people, as there is some overlap. The majority of these are waiting in the Chisasibi Hospital, public off-territory sites, off-territory Elders' homes, or in their own homes. SAPA's regional community worker visits Elders in long-term care facilities in Montreal for outings and activities, helping them maintain a connection with Cree culture.

The presentation also noted the progress of Elders' Homes in Mistissini and Chisasibi (set to open in May 2026), as well as Aashukan Services for semi-autonomous adults, a collaboration with the Cree First Nation of Waswanipi.



# Jordan's Principle

The Board was updated on applications made for funding from Jordan's Principle, which is meant to address gaps in services for children aged 0 to 17. The overview noted the Jordan's Principle funding applications for group and individual support from April 1 to November 27, 2024, summarizing numbers of applications by community, individual/group, and other criteria. It also noted dominant themes in requests for support, especially off-territory services but also in the areas of education, sports & recreation, disability supports and other basic needs.



## Jordan's Principle continued

The presentation also noted the recent decision by the Canadian Human Rights Tribunal instructing the federal government to work with First Nations to address a backlog in Jordan's Principle applications and to implement a new system for registering complaints.

Finally, it noted that Jordan's Principle is strengthening its focus on health-related applications, and that applications for some other needs (furniture, daycare, clothing, respite, education) will require support letters from registered health professionals.





## Youth Healing Services Limitation of Freedom & Intensive Supervision Stats

The Board received Youth Healing Service's summary of limitations of freedom, intensive supervision and use of detention/isolation, broken down by gender and facility, for the period from December 2024 to March 2025. 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.



# Out-of-Region Placements

**The Board approved the 2025-2026 Out-of-Region Placement and Respite Plan for clients with complex disability profiles,** along with the necessary budget requirements, obligations and commitments.

These clients require specialized rehabilitation services and supported living environments off territory, as these services are not available in Eeyou Istchee



# YP-YHS Merger Discussion

The Board was presented with a summary of discussions concerning a merger of the Departments of Youth Protection and Youth Healing Services, both within Pimuhtheu. The idea of a merger was first presented internally in October 2024 and presented to YHS, which requested further discussions. Both departments are large: YP has about 90 positions (not including Foster Services, being added in 2025), while YHS has about 115 positions. The Awash-USchiniichisuu Shikascheimuun Task Force report will also offer relevant input to the decision.



# YP-YHS Merger Discussion continued

Next steps would involve an independent auditor to listen to listen to all voices in a safe manner where they can openly address their concerns. Pimuhteheu, YP and YHS are united in recommending Michelle Goyette, who has worked in both departments. After she holds internal discussions, a recommendation on whether to merge will be brought to the Board, in either June or September 2025.



# NEXT REGULAR BOARD MEETING

June 11-12-13, 2025





