

CBHSSJB BoD Summary

2-3-4 June 2026

Double Tree by Hilton

Pointe-Claire [Montreal], QC

A scenic landscape 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 dense forest of evergreen trees covers a rising bank. A large, white, semi-transparent circle is centered over the image, containing the text "OFFICE OF THE CHAIRPERSON" in a bold, blue, sans-serif font.

**OFFICE OF THE
CHAIRPERSON**

Appointment of Members to ED Selection Committee

The CBHSSJB's Board of Directors is responsible for ensuring an orderly and proper process to select the new Executive Director for the organization.

To initiate the selection process, the Board has approved the appointment of the following members to undertake a review of the job posting and prepare the required documentation:

- **Jeannie Pelletier, Chairperson of the Board, who will serve as President of the Selection Committee**
- **Matthew A. Happyjack, Waswanipi Representative**
- **Liz Hester, Non-Clinical Staff Representative**



Honouring Nations Canada Award

The Board was updated on the CBHSSJB being selected for recognition through the Fulbright Canada Honouring Nations Canada Awards. The letter from Honouring Nations Canada noted that “The Cree Health Board stood out as a powerful example of Indigenous leadership, governance excellence, cultural grounding, innovation, and practical impact. Its work represents the kind of Indigenous led institution building, public service, and nation building leadership that Honouring Nations Canada was created to recognize.”

Honouring Nations Canada is an Indigenous led and Indigenous informed national awards initiative of Fulbright Canada. The award will be presented as part of the Victoria Forum, taking place in Victoria, British Columbia, from August 23 to 24, 2026.



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 "COMMITTEES OF THE BOARD" in a bold, blue, sans-serif font.

COMMITTEES OF THE BOARD

Governance Advisory Committee (GAC): Ethics and Conflict of Interest Policy for Board Members and Executive Director

The Board was updated on the Working Group from the Governance Advisory Committee's mandate to review the Ethics and Conflict of Interest Policy applicable to Board Members and in force since 2020. Objectives include shortening the policy, simplifying its language, and making it more accessible.

The Board was presented with a summary of significant changes to this policy. Notably, the Seven Eeyou Values were introduced as ethical principles. In many instances, provisions were restructured for clarity and some phrasings were altered. A number of redundancies were also eliminated.

The review of the procedures regarding ethics and conflict of interest for Board Members is ongoing. Once this process is completed, the revised policy and procedures will be presented for adoption by the Board of Directors.



GAC: Health Agreement Negotiations Update

The Board was updated on the status of health agreement negotiations with Quebec. The CBHSSJB aims to secure sustainable funding with enhanced flexibility to align funding with evolving needs. Negotiations include governance models and accountability structures to ensure transparent and effective management of health services. The agreement aims to link long-term strategic planning with measurable outcomes and annual implementation cycles for improved healthcare delivery, and reflects broader shifts in priorities, including integrated care, infrastructure renewal and improved accessibility.



GAC: Health Agreement Negotiations Update cont.

The update touched on the agreement structure, the funding framework, capital funding context and constraints (especially as they affect key infrastructure projects such as the new hospital), and governance issues. It also outlined strengths, risks and opportunities, and laid out the next steps in the process – including (among other points) ongoing negotiations to refine points and effective communication with community and partners to ensure transparency and support throughout the process.



Vigilance & Client Experience Advisory Committee: Commissioners of Complaints & Quality Assurance Annual Report 2025-2026

The Board approved the 2025-2026 Annual Report submitted by the Commissioners of Service Quality and Complaints.

The report outlines the roles and responsibilities of the commissioners, the highlights of the past year, and the commissioners' activities. It also presents case records, breaks down complaints by service and community, and incorporates the medical examiner's report.

The annual report will be translated into French and submitted to the MSSS to be tabled in the National Assembly.



Council of Physicians, Dentists & Pharmacists (CPDP): Nominations of Physicians and Dentists, & Resignations

The Board approved the CPDP's nominations of the following nine family physicians and one specialist, with all nominations effective to 31 December 2017:

Dr. Edouard Roy

Dr. Anabelle Madore

Dr. Noémie Chenail

Dr. Marie-Hélène Paquet-Boulet

Dr. Kimiya Kaffash-Mohamadi

Dr. Philippe Durande

Dr. Aigul Zaripova

Dr. David Dannenbaum

Dr. Étienne Boyer-Richard

Dr. Marie-Josée Lord, pediatric psychiatry



Council of Physicians, Dentists & Pharmacists (CPDP): Nominations of Physicians and Dentists, & Resignations

The Board approved the CPDP's nominations of the following five family physicians for changed status, with all nominations effective to 31 December 2017:

Dr. Katrina Gong

Dr. Darius Bayegan

Dr. Silvi Oako

Dr. Thu An Nguyen

Dr. Tedi Oendro

The Board also accepted the resignation of Dr. Gerald Dion, effective May 1, 2026.



Council of Physicians, Dentists & Pharmacists (CPDP): Nominations of Physicians and Dentists, & Resignations

The Board accepted the nominations of the following three dentists, effective to 31 December 2027:

Dr. Michael Lacroix

Dr. Jean-François Cusson

Dr. Mohammed Badwelan

Further, the Board accepted the resignation of Dr. Salomé Deschenes, effective 15 April 2026.



CPDP: CPDP 2025-2026 Annual Report

The Board approved the 2025-2026 Annual Report submitted by the CPDP.

The CPDP has 232 members, including 176 physicians, 42 dentists and 14 pharmacists, as of March 31, 2026. This includes 135 family physicians who are active members, as well as 13 specialists who are active members and 24 specialists who are associate members. In Public Health, there are 10 physicians and one dentist who are active members. Among dentists, six are active members and another 27 are replacement dentists who are associate members; there are eight associate member dentistry specialists. Among pharmacists, there are 10 active members and four replacement associate members.

The Report summarized the activities of the CPDP's eight obligatory committees and 11 other committees mandated by the CPDP's Executive Committee.



CPDP: End of Life Care Report

The Board approved the CPDP's End-of-Life Care Report.

The report noted that a total of 54 individuals received palliative end-of-life care. Of these, 19 were in the hospital, seven were in long-term care homes, and the remaining 28 were in their homes.



CPDP: Nominations for Chief of Pharmacy and of Dentistry

The Board approved the nomination of Ms. Amélie Fortin as Chief of the Department of Pharmacy, for a term not exceeding four years.

Ms. Fortin is a permanent full-time pharmacist with extensive experience and knowledge, as well as effective collaboration and management skills.

The Board also approved the nomination of Dr. Shayan Sadeghi as the Chief of the Department of Dentistry, effective June 8, for a term not exceeding four years.

Dr. Sadeghi will replace Dr. Lucie Papineau, who has served as Chief of Dentistry since 2008 but is now retiring. Dr. Sadeghi is a permanent full-time dentist and has served in the CBHSSJB's Department of Dentistry for seven years.



Council of Nurses: Quarterly Report

The Council of Nurses Executive Committee (CNEC) submitted its quarterly report updating the committee's positions, the activities of the Mental Health and Continuous Education subcommittees, and the Council's upcoming actions.

While most CNEC positions are filled, the committee is still trying to fill the position of Cree representative.

The Mental Health subcommittee has reviewed challenges across communities, prioritized key topics, conducted a literature review, and developed recommendations; these recommendations are now under review and will be presented to the relevant stakeholders to explore existing initiatives, the feasibility of the proposals, and potential opportunities for collaboration.



Council of Nurses: Quarterly Report cont.

The Continuous Education subcommittee meets monthly and aims to provide recommendations regarding training and educational offerings for nurses. A regional tour has included Wîchihîtuwin nurses and others; remote meetings have also been held.

Upcoming CNEC projects include initiating a peer-to-peer feedback program and assisting in the creation of a new Licensed Practical Nurse (LPN) subcommittee.



Human Resources (HR) Committee: HR Dashboards – April 1, 2025 to March 31, 2026

The Board was updated on data represented on the HR dashboards, which offer a portrait of the organization for the past fiscal year. The data is organized into five categories: staffing, workplace wellness, recruitment & retention, unassigned recall list, and positions.

Some data presents a snapshot of the organization on 31 March 2026, while other data illustrates trends over the past year.



HR Committee: Training Plan 2026-2027

The Board approved the 2026-2027 Training Plan submitted by the HR Committee.

The training plan is aligned with the CBHSSJB's four orientations as set out in the SRP: Cree Culture & Autonomy, Health & Well-Being, Access & Quality, and Nurture & Grow.

Almost half (45%) of the training funds will be directed to activities in the Miyupimaatisiun Dept, followed by Pimuhteheu (21%), Administration (20%), General Management (12%) and Nishiiyuu (2%).

The training plan is based on responses to a Call for Requests sent to all managers; requests were reviewed, prioritized, and presented to partners and the HR committee for recommendation to the Board for approval. Presentation of the training plan to managers will follow the plan's approval. From there the trainings will be implemented and monitored to ensure their efficacy.



Council of Midwives: Midwifery Services Contracts

The Board approved midwife contracts with Mélina Dupuis and Mélanie Bergeron-Blais.

These contracts run from June 8, 2026, to June 8, 2027.

Ms. Dupuis will serve on an occasional full-time basis and Ms. Bergeron-Blais on an occasional part-time basis.



Council of Midwives: Midwifery Service Clientele Survey

The Board reviewed results of the Midwifery Service Clientele Survey. The 10-question survey was completed by 37 clients, 95% of whom received services in the Chisasibi pole. 94% of respondents reported being very satisfied or satisfied with services. Some examples of responses to questions:

95% agreed or strongly agreed they were treated with respect; 5% (2 people) were neutral.

92% agreed or strongly agreed they were involved in making decisions about their care; one person disagreed and two were neutral.

95% were happy or very happy with care received from midwives, with 5% neutral.



Council of Midwives: Annual Report 2025-2026

The Council of Midwives submitted its 2025-2026 Annual Report.

The report summarized the activities of the council various committees, presented data from the Chisasibi and Waskaganish poles, and summarized the Council's collaborative work in Eeyou Istchee. There were 81 births in the Chisasibi pole and 50 in the Waskaganish pole for a total of 131. Of the Chisasibi pole, 21 births were in the mother's community and 60 were born in Val d'Or or another service point. For the Waskaganish pole, three births were in the mother's community and 47 were born in Val d'Or or other service point. Midwives provided complete post-natal care in the majority of births, with the remainder being attended by Awash. 72% of births had pre-natal care by midwives; the same number received services in Cree, with Cree midwife trainees being involved with providing care.



Risk Management Committee: Incident/Accident Statistics 1 April 2025 to 31 March 2026

The Risk Management Committee presented Incident/Accident (I/A) statistics for the past year. I/A reports decreased by 2.3% over last year, mainly due to changes in how group events were recorded and the transition to the new reporting platform. Most reported events involved medication, appointment scheduling, laboratory, treatment/intervention and falls. The Committee's report provided a further breakdown of the site of incidents/accidents within the service corridor.

Of the 1,136 events reported, four were sentinel events, one of which resulted in consequences for the client while the other three were "near misses" which could have had serious consequences.

To address I/A reports, including sentinel events, a range of measures have been or are now being implemented; these measures will strengthen the processes used by the CBHSSJB.





GENERAL MANAGEMENT

Capital Projects Update – Strategic Directions

The Board was updated on capital projects; these were grouped as “Pending Completion: Capital Projects 2019-2024,” “Health Agreement Capital Priorities 2026-2033,” and “Future Capital Planning 2033 & up.”

The “Pending Completion” group includes the Waskaganish birthing home (opening Fall 2026) and the Chisasibi Elders’ Home (opening September 2026).

“Health Agreement Capital Priorities” include the Regional Hospital in Chisasibi, the Ouje-Bougoumou CMC, the 80-unit housing facility in Chisasibi, the long-term care facility in Mistissini, and 40-unit housing facilities in Mistissini and Waskaganish.

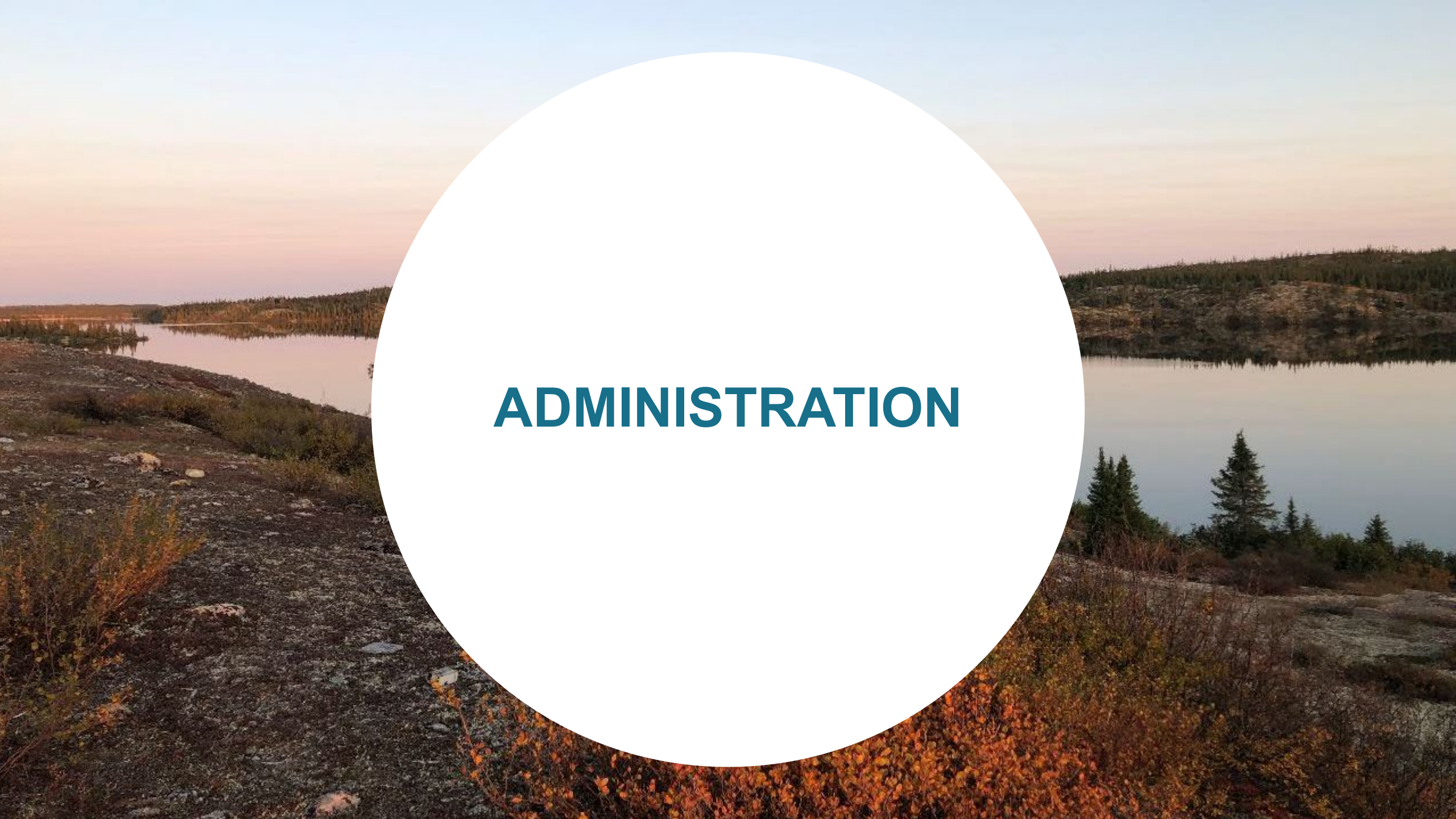
Mistissini & Chisasibi birthing homes and the healing lodge came under “Future Capital Planning.”



Executive Director's Mandates

The Board reviewed the Executive Director's mandates from Board directives assigned at the March 2026 meeting. A summary noted which mandates have been completed and which remained in progress.



A scenic landscape 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 dense forest of evergreen trees covers a gentle slope. A large, white, semi-transparent circle is centered over the image, containing the word "ADMINISTRATION" in a bold, blue, sans-serif font.

ADMINISTRATION

Agreement of Grant & Agreement of Superficie with Ouje-Bougoumou Cree Nation

The Board approved the grant and agreement of superficie with the Cree Nation of Ouje-Bougoumou.

This transaction enables the CBHSSJB to use for residential purposes the parcels of land bearing lot numbers 62, 8, 268, 272, 182, 183 & 184, and situated at 204A & 204B Opemiska Meskino, 206A & 206B Opemiska Meskino, 4A & 4B Wastawshkootaw, 268A, 268B, & 268C Sakiigunshish, 272A, 272B & 272C Sakiigunshish, 269A, 269B & 269C Kabeeshagmaou Meskino, 289A, 289B & 289C Kabeeshagmaou Meskino, and 291A, 291B & 291C Kabeeshagmaou Meskino.

The grant and agreement of superficie is valid for a period not exceeding 75 years.



Air Creebec Charter

The Board voted to approve the Chartered Air Service Contract with Air Creebec.

This contract will see Air Creebec provide shuttle air services to the CBHSSJB for ten years, from June 1, 2026 to May 31, 2036.



Appointment of Board Member to Wiichichiitwin Working Group

The Board appointed Matthew A. Happyjack (Waswanipi representative) and Bert Blackned (Waskaganish representative) to the Wîchichîtuwin Audit Recommendations Working Group.

This working group aims to support the prioritization, development, implementation and follow-up of the 14 recommendations from the optimization audit of the Wîchichîtuwin Department completed in February 2025.

The Board members (representing inland and coastal communities) will join representatives of departments of the CBHSSJB on this ad hoc working group.



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 overlaid on the center of the image, containing the text 'MIYUPIMAATISIUN' in a bold, blue, sans-serif font.

MIYUPIMAATISIUN

Nisk Model of Care update

The Board was updated on the Nisk model of care, the implementation of which has been paused briefly to enable the implementation team to fully understand issues and conduct a review of gaps and challenges. The team met with collaborators/stakeholders to get their feedback on how to improve support to the CMCs, and a revised plan has now been developed to support ongoing Nisk implementation. This plan awaits approval from the executive committee.



Directors of Professional Services and Quality Assurance update

The Board was provided updates from the Directors of Professional Services and Quality Assurance (DPSQAs) for Allied Health, Health and Psychosocial.

For Allied Health, the emphasis is on working with local and regional partners, strengthening services in the new model of care, and maximizing resources and coverage.

For Health, logistics and operations are currently prioritized, including the role of nurse practitioners, infection prevention & control, renal health, regional on-call & the floating team, and quality & evolution of practices.

For psychosocial, the focus is on defining current needs and priorities, delivering culturally safe and high-quality psychosocial care, and developing the journey of care to miyupimaatisiin.



Healing-Informed Care Training update

The Board was updated on training for the healing-informed care project, which employs a “river of resilience” metaphor.

Healing-Informed Care (HIC) strengthens how people are perceived and understood in care – with themselves, with colleagues, and with communities. It turns complex learning about issues related to stress, trauma, attachment, and survival into practical ways to pause, notice, return, and respond in real care situations. The training created a space where staff could slow down, reflect, connect across roles, and begin practicing the language of HIC together. Participants are gaining language for stress, survival, regulation & safer care. While HIC is still in a foundational stage, early feedback shows strong promise and growing interest.



Health Funding Consolidated Contribution Agreement

The Board approved the Health Funding Consolidated Contribution Agreement 2025-2035.

This program provides funding for federal programs over a ten-year period.



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 in shades of brown and orange. A large, solid white circle is centered over the image, containing the text 'NISHIIYUU' in a bold, dark blue, sans-serif font.

NISHIIYUU

Client Data Tracking for Nishiiyuu - Care4 Update

The Board was presented an update on the staff training for and implementation of the Care4 program. A series of trainings have been or will be presented from April through June 2026, including Managers, Admin staff, “super users,” some HROs, Activity Organizers and PPROs, and Family Group Conferencing staff. The program will be implemented across the department in July.

Care4 will capture all data related to all Nishiiyuu service delivery (e.g. requests and referrals, participant counts, cancellations, travel booking, coordinated scheduling, communications, etc), improving data quality and enabling more accurate program evaluation.



A scenic landscape photograph featuring a calm lake reflecting the sky, surrounded by a dense 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 text "PIMUHTEHU" in a bold, blue, sans-serif font.

PIMUHTEHU

Director of Youth Protection Designates

The Board approved the designation of three Youth Protection Designates: Minnie Loon, Assistant DYP – Protection (first designate), Ashley Iserhoff, Assistant DYP – Family Support (second designate) and Alyssa Mark, Advisor to DYP (third designate).

The designate must act as director if the Director of Youth Protection is suddenly absent or unable to act.



Nomination – Director of Youth Protection (Temporary)

The Board voted to appoint Minnie Loon as temporary Director of Youth Protection, retroactively from May 23, 2026, to August 16, 2026.

The position of Director of Youth Protection has been vacant since August 26, 2022, and since then has been filled on a temporary basis. Minnie Loon has the knowledge, experience and skills necessary to maintain Youth Protection services until the new Director steps in.



Nomination – Director of Youth Protection

The Board approved the nomination of Stephanie Gilpin as Director of Youth Protection on a permanent, full-time basis, effective August 17, 2026.

This position has been vacant since August 26, 2022, and since then has been filled on a temporary basis. Ms Gilpin was interviewed by the selection committee after the pool of candidates had been narrowed to a final four. Her appointment is subject to a one-year probation period.



Youth Healing Services: Limitation of Freedom & Intensive Supervision Statistics

The Board received Youth Healing Service's summary of limitations of freedom, intensive supervision and use of detention/isolation, broken down by gender, age and type & duration of limitation of freedom and extensive supervision, for the period from December 2025 through April 2026.

The summary also gave an overview of the number of youth in YHS under the Youth Criminal Justice Act and summarized common motivations for runaways.



Out-of-Country Travel to Harlem Children's Zone, New York, USA

The Board approved out-of-country travel to Harlem, New York, USA, for a fifth CBHSSJB delegation to visit the Harlem Children's Zone.

This visit will aid in the further development of the CBHSSJB's project "Working Together to Empower Youth and Families." The HCZ afterschool program has been a model and source of inspiration for this similar program for Cree youth. A proposed list of participants will be submitted to and reviewed by the Executive Director.



A landscape photograph of a lake at sunset. The sky is a mix of light blue and soft orange/pink. The lake is calm, reflecting the sky. The foreground and middle ground show rocky terrain with sparse vegetation, including some trees and shrubs. A large white circle is overlaid on the center of the image.

VARIA

CHB Slide Deck Training

The Board, and especially audit committee members, received training to enhance their understanding of the organization's financial statements, enhance their ability to interpret financial information for governance and oversight purposes, and connect strategic orientations as identified in the Strategic Regional Plan to financial reporting.



CBHSSJB SRP Financial Mapping & Financial Lexicon

The Board reviewed summaries of financial mapping to support the orientations identified in the Strategic Regional Plan. This mapping identified the SRP objective, financial assets and liabilities associated with each objective as well as revenues and expenses, and how these are expressed on financial statements.

The Board also reviewed the financial lexicon to ensure that all members are familiar with terms used in financial reporting.



CBHSSJB Annual Report 2025-2026

The Board was able to view the draft version of the CBHSSJB annual report. This version is close to complete, needing only final proofreading before being submitted for approval.



Strategic Regional Plan – Infographic

The Board viewed an infographic for the 2023-2030 SRP. This infographic identifies the SRP's four key orientations (Cree Culture & Autonomy, Health & Wellbeing, Access & Quality, and Nurture & Grow) as well the objectives under each orientation.



NEXT REGULAR BOARD MEETING

15-16-17 September 2026





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