

CBHSSJB Board of Directors Meeting Summary

June 14-15-16 2022

Chalet des Voyageurs

Mont Tremblant

A scenic landscape featuring a calm lake reflecting a soft, pastel sky at dawn or dusk. The shoreline is covered in low-lying vegetation and rocks. In the background, a dense forest of evergreen trees is visible on a hillside. A large, white, semi-transparent circle is centered over the image, containing the text "COMMITTEES OF THE BOARD" in a bold, blue, sans-serif font.

COMMITTEES OF THE BOARD

Governance Advisory Committee (GAC)

The Governance Advisory Committee provided two verbal updates to the Board: the first on issues related to Bill 96, an Act respecting French, the official and common language of Quebec, and the second on the Memo of Understanding on the process to revise the CBHSSJB's legislative framework.

The GAC also presented on Research Processes and Reforms and on the Patient Transportation Policy.



GAV: Research Process and Reforms update

The Board was informed of challenges with research projects carried out in conjunction with the CBHSSJB.

There is much interest in carrying out research through the Cree Health Board. Since 1994, at least 191 projects have been proposed to the research committee; 68 of these have been completed. However, this research is led by non-Indigenous scholars who often have little understanding of the Cree context. In addition, often the research does not respond to the needs of the local and regional Cree population. In addition, researchers usually want to publish their research rather than maintaining confidentiality, thus violating traditional Cree values.



GAC: Research Process and Reforms continued

The GAC recommends the creation of a Research Governance Committee, which will approve and oversee research. Approved research should follow Cree Miyupimâtsîun Research Principles to ensure it benefits the Cree people.

This committee would be concerned specifically with governance rather than operational aspects of research. Following approval of a by-law creating this committee and identifying its mandate and responsibilities, the GAC proposes a moratorium of up to 18 months on new research, while the framework for approving research is restructured and solidified.



GAC: Non-JBNQA Patient Transportation Policy

The Board voted to approve a revised version of the Non-JBQNA Patient Transport Policy and to repeal the previous policy, which had been adopted in March 2020. The revised policy responds to changes made by the MSSS to its Patient Transport Policy in 2021; the MSSS policy applies to all institutions in Quebec. The CBHSSJB policy follows the MSSS's new policy with adaptations for Region 18. The new CBHSSJB policy will come into force on September 30, 2022.

The new policy favours telehealth services when possible and clarifies what costs are covered, who can authorize transport, and what kind of transport is suitable given specific circumstances. It also considers issues around transport for elective treatments.



Vigilance Committee: SQCC Annual Report

The Board voted to approve the Service Quality and Complaints Commissioner (SQCC) Annual Activity Report for 2021-2022.

The report summarizes the activities undertaken by the SQCC. These include responding to complaints as well as acting on requests for assistance, performing interventions and being available for consultations on issues related to its mandate. The SQCC has also been active in creating the Action Plan to Counter Elder Abuse and the CBHSSJB Code of Ethics. In addition, it collaborated with the McGill University Health Centre Patient Committee to produce a brochure for clients travelling to Montreal for medical purposes. The brochure serves as a guide for clients to report any incidents encountered with medical appointments affiliated with the MUHC, and has been produced in four languages, including Cree syllabics.



Vigilance Committee: Deposit of SQCC Quarterly Report

The Service Quality and Complaints Commissioner deposited its Quarterly Report, covering the period from January 1, 2022, to March 31, 2022. The report presented the number of complaints received, the categories of these complaints, the nature of the complaints, and a breakdown by community and service. It also documents how long it takes to address files.



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

The Board voted to approve nominations and grant privileges to the physicians listed below.

Active Family Physicians:

Dr. Roger Gray	Dr. Nicolas Scarborough
Dr. Valerie Caldas	Dr. Noémie Pothier

All active family physician nominations are effective to December 31, 2024.

Dr. Erin Luxenburg, already a family physician, was granted privileges in Point of Care Ultrasound.

Dr. Ahmed Eldoiati was approved as associate member in pediatrics, effective to December 31, 2024



CPDP: End-of-Life Care Report

The Board voted to approve the CPDP's 2021-2022 End-of-Life Care Report.

This report is produced as required by the CBHSSJB Policy Regarding End-of-Life Care and the Act Respecting End-of-Life Care. The report noted that there have been 32 cases of palliative care over the period covered, and no cases of medical assistance in dying.



CPDP: Annual Report

The Board voted to approve the 2021-2022 Annual Report of the Council of Physicians, Dentists and Pharmacists.

The report summarizes the activities of the CPDP and its committees.



CPDP: Nomination of Co-Chiefs of Public Health's Clinical Department

The Board approved the nominations of Dr. Margaret Odell and Dr. Colleen Fuller as co-chiefs (heads) of the Clinical Department of Public Health.

The appointment of co-chiefs marks a change in governance structure for this department. Dr Odell is a Public Health and Preventative Medicine (PHPM) specialist, while Dr. Fuller is a family physician. Public Health and its Clinical Department have determined that the workload of the position makes the nomination of co-chiefs appropriate and that the department would be best served by having one family physician and one PHPM specialist in these roles.



Council of Nurses: Annual Report

The Council of Nurses submitted its annual report for 2021-2022. The accompanying presentation covered some main points from the report, including activities of the Executive Committee of the Council of Nurses (ECCN) working group, meetings with the Code of Ethics working group, ECCN consultation sessions and meetings with other groups in the CBHSSJB, and special budget allocations for CMCs to recognize nurses.



Human Resources (HR) Committee: Training Plan 2022-2023

The Board approved the 2022-2023 Training Plan presented by the HR Committee.

The training plan aligns with the CBHSSJB's strategic objectives and organizational priorities. HR solicits input from managers for the types of trainings that would be most helpful and has received over 250 requests, which have been screened and prioritized.



HR Committee: Harassment Complaints update

The Board was updated on harassment complaints, drawing on information up to the most recent status report, ending March 31, 2022. Complaints have dropped in the past four years: 12 in 2018, 15 in 2019, 13 in 2020 and 8 in 2021.

A total of 133 managers have received online training on the Policy and Procedure to Promote Respect and to Counter Discrimination, Harassment and Violence in the Workplace, and all managers have had this policy communicated to them.

All employees in each community will receive training from Labour Relations Adviser and Personnel Agents during 2022-2023.



HR Committee: Salary Insurance Statistics update

The HR Health and Safety Committee updated the Board on health and safety office statistics, with an emphasis on salary insurance statistics, CNESST claims and maternity leave through the Safe Maternity Program.

The Committee plans to revise procedures for salary insurance, CNESST and the Preventative Withdrawal Program for the Pregnant Workers in the coming year. It will also develop health and safety trainings for new employees and for managers.



HR Committee: HR Dashboards Update

The Board was updated on the development of HR dashboards, with a focus on the Staffing and Recruitment & Retention Dashboards.

The Staffing Dashboard tracks employee numbers by different categories, including department, age, fiscal year, job category & years of service.

The Recruitment & Retention Dashboard tracks categories including hires & departures by department, years of service of departing employees, number of vacant positions, vacant positions by job category, age ranges of employees (eg those over 50 or 60), employees on maternity or unpaid parental leave, planned absences, and the reasons for planned absences.

These dashboards provide an important tool for managing human resources and anticipating staffing needs.



HR Committee: Communication Reorganization update

The Board was updated on the reorganization of the CBHSSJB communications team.

The pandemic identified a clear need for a centralized Communications Department that will help the organization meet both internal and external communications needs, and a new Director of Communications position has been approved to provide a higher level of strategic leadership to CBHSSJB communications.



HR Committee: Communication Reorganization continued

The next steps involve posting the position for Director of Communications and transferring the Cree Health Board's various communications positions from their departments to form one team under the AED Administration. The Director, once hired, would oversee the restructuration and the development of the Communications Department in support of the Strategic Regional Plan, ensuring effective communications with external bodies and the cultural safety, accuracy, timeliness and relevance of all messages.



Audit Committee: Audited Financial Statements 2021-2022 (AS-471)

The Board voted to approve the Audited Financial Statements 2021-2022 (AS-471).

These statements were prepared and submitted by the firm of Raymond Chabot Grant Thornton S.E.N.C.R.L. The audited statements will now be forwarded to the MSSS, as required by law.



Audit Committee: Consolidated Annual Financial Report (CNESST)

The Board voted to approve the CNESST Consolidated Annual Financial Report for the period running from January 3, 2021, to January 1, 2022.

The *Commission des normes, de l'équité, de la santé et de la sécurité du travail* (CNESST) program supports the Public Health Department's activities to to prevent work-related injuries and illnesses.



Audit Committee: Budget Parameters 2022-2023

The Board voted to approve the budget parameters and detailed budget for 2022-2023.

The submission of budget parameters and a detailed budget is in accord with article 7 of the *Act to provide for balanced budgets in the public health and social services network*, which specifies that the Board of Directors of a public institution in the public health and social services network must adopt an operating budget within three weeks of receiving an initial budget from the MSSS. The CBHSSJB received its initial operating budget for 2022-2023 from the MSSS on June 13, 2022.



Audit Committee: Line of Credit June 2022

The Board approved the resolution to establish a line of credit with *Financement-Québec* to address operating cash flow requirements.

The line of credit will be in effect from July 1, 2022 to December 17, 2022.



Audit Committee: External Auditor Call for Tenders

The Board was informed of the Call for Tender process for an external auditor, as the current contract with RCGT is coming to its end.

The Call for Tender will be issued at the end of June/beginning of July. The selection committee will be composed of a recently appointed audit committee member, Teresa Danyluk, a member of the finance department, Nora Bobbish, and an external member, Gary Chewanish. Candidates will be assessed according to their experience with the health sector, on-site resources, capacity to deliver reports on time, and audit experience with First Nations organizations.



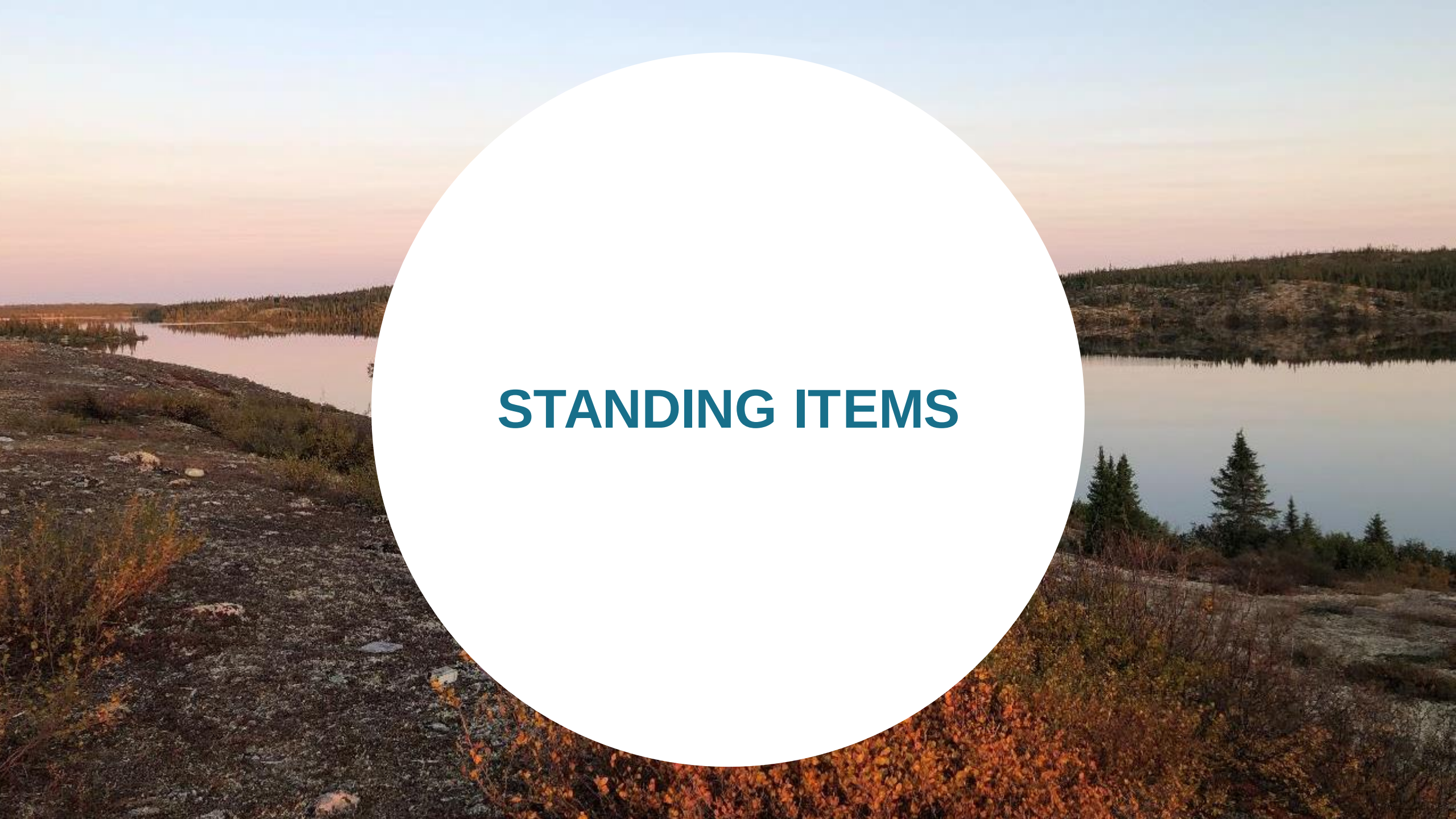
Risk Management Committee: Annual Report

The Risk Management Committee (RMC) submitted its annual report for 2021-2022.

This past year saw 760 declared events, a 9% decrease from the previous year. Most were related to medication, appointment scheduling and laboratory services. All events led to minor and temporary consequences for clients, and 11 (1.4%) were classified as sentinel events, meaning that they had or could have had serious consequences.

Priorities for the coming year, apart from continuing to monitor risk, include reviewing the risk management action plan, discussing clinical indicators to be monitored by the RMC dashboard and the clinical risks to listed in the risk registry, and providing further training on the risk management system.



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 and middle ground show rocky terrain with sparse, low-lying vegetation in shades of brown and orange. A large, solid white circle is centered over the image, containing the text 'STANDING ITEMS' in a bold, dark blue, sans-serif font.

STANDING ITEMS

Director of Youth Protection update

The Director of Youth Protection (DYP) updated the Board on Youth Protection (YP) services.

Since 2020, YP has developed several new positions and filled vacancies, and has continued implementing the Project Integration Jeunesse (PIJ).

The Empowering Youth and Families Project in Mistissini continues. Overall YP staffing remains challenging, so the team continues to strategize new ways of addressing these staffing issues.

Plans for the coming year include developing trainings for staff, working with HR on recruiting and retention strategies, enhancing internal and external collaborations, and continuing work on collaboration protocols with CMCs and the Cree School Board.



Mânûhikû Update

The Board was updated on Mânûhikû (Mental Health) services, featuring a summary of activities and highlights from 2021-2022.

A number of new staff positions are being recruited to enhance services. A notable highlight: the addition of Mathew Makush, Eeyou Wisdom Keeper, in the Eclaireurs (Pathfinders) program, offering traditional healing services in Whapmagoostui.

The Indian Residential School and the Missing and Murdered Indigenous Women programs continue to support individuals and families. The Suicide Prevention program has been training staff and is active in communities through school visits, National Truth and Reconciliation Day events, etc.

Seclusion rooms are being constructed in CMCs, and trainings offered on their use.



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

CBHSSJB 2021-2022 Annual Activity Report

The Board voted to approve the CBHSSJB 2021-2022 Annual Activity Report.

The production of the annual report documenting the CBHSSJB's activities over the past fiscal year is required by the *Act respecting Health services and social services for Cree Native persons*.

The report will now be tabled at the Annual General Assembly of the GCCEI/CNG, and will be translated into French and submitted to the Quebec Minister of Health and Social Services by September 30th.



Appointment of Members to Audit Committee

The Board voted to appoint Teresa Danyluk (Wemindji representative), Eric R. House (Chisasibi representative) and Stellar Moar (Nemaska representative) to the Audit Committee for a one-year term.

The Audit Committee is responsible for advising the Board on the choice of auditor, examining the auditor's work, examining the results of internal and external audits, and recommending to the Board any actions that are necessary related to these audits, among other things.





GENERAL MANAGEMENT

Executive Director's Mandates & Capital Projects Update

The Board received updates on the Executive Director's mandates from the March Board meeting and on capital projects. These include

- the regional hospital, 80-unit transit facility, healing lodge, 9-bed mental health facility & 9-bed group home in Chisasibi;
- Elders' homes in Chisasibi & Waskaganish;
- birthing homes in Chisasibi, Mistissini & Waskaganish;
- the special needs facility in Eastmain;
- three triplexes in Oujé-Bougoumou, three triplexes in Waskaganish & a sixplex in Nemaska;
- a 40-unit transit facility in Waskaganish; and
- CMCs in Oujé-Bougoumou, Waskaganish & Whapmagoostui.



Capital Projects continued

At the Regional Hospital in Chisasibi, major renovations are being undertaken in the hemodialysis unit, the laboratory, and the dentistry clinic.

At the Ashûkin Elders' Home in Waswanipi, interior design and IT cabling is being completed.

The Reception Centre in Mistissini is being renovated to house the regional sleep clinic, and the old police station in Waskaganish is undergoing renovations for hemodialysis equipment.



Special Needs Action Plan update

The Board was updated on the Special Needs Action Plan, which identifies three phases:

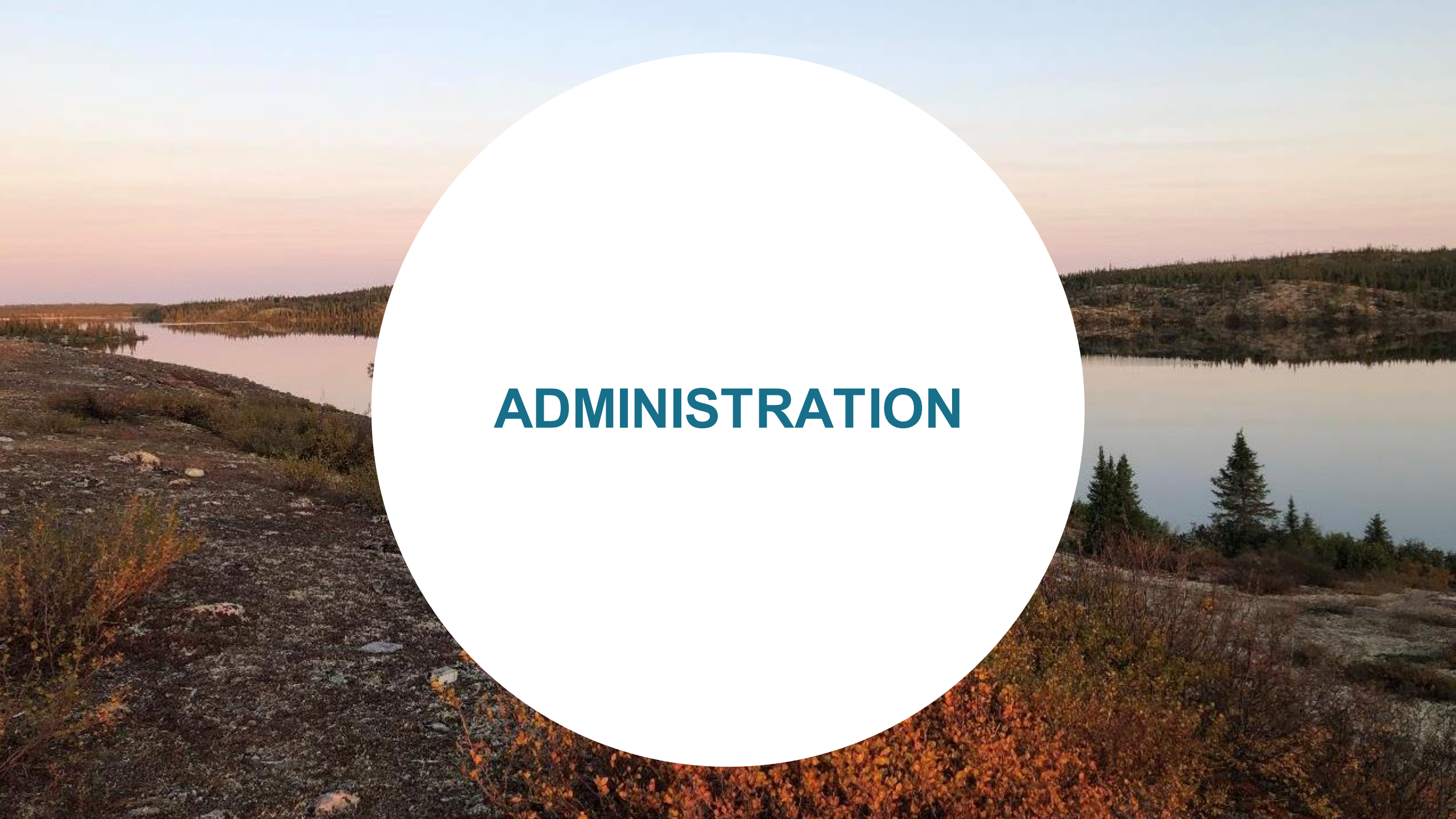
- the development of special needs respite centres that are respectful to Cree culture, Cree healing methods and helping traditions;
- the development of mental health facilities along a similar plan to the special needs respite centres;
- and the organization of respite care services and mental health responses and services in those communities without physical facilities.



Special Needs Action Plan update continued

Next steps involve creating an advisory group, recruiting special needs trainees for the Eastmain pilot project, working with Nishîyû to develop trainings in cultural safety, developing programs and policies, and conducting focus groups with community members to identify specific needs and concerns.



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 word "ADMINISTRATION" in a bold, blue, sans-serif font.

ADMINISTRATION

Microsoft Enterprise Agreement

The Board voted to approve the Microsoft Enterprise Agreement for 2022-2025.

This is a three-year licensing agreement that ensures a stable price commitment, with the possibility of minor increases from year to year, based on the installation of further software licenses beyond those initially estimated.

The license runs from April 1, 2022 to March 31, 2025.



A landscape photograph of a lake at sunset. The sky is a mix of soft pinks, oranges, and blues. The lake's surface is calm, reflecting the colors of the sky. The shoreline is rocky with sparse, low-lying vegetation in shades of brown and green. In the background, a line of trees marks the far shore. A large, solid white circle is centered over the image, containing the text 'MIYUPIMAATISIUN' in a bold, blue, sans-serif font.

MIYUPIMAATISIUN

Renal Health Update

The DPSQA-Health updated the Board on renal health initiatives aiming to increase access to dialysis in all communities, to increase follow-up for patients at risk of kidney failure, and to ensure sufficient specialized nursing support.

Currently, Eeyou Istchee has 605 chronic kidney disease patients, with 97 on dialysis. Another 80 patients will require dialysis in the next two years. To address this need in the short term, the team is opening a training centre for home hemodialysis in Waskaganish, expanding peritoneal dialysis, expanding home hemodialysis in Waswanipi and dialysis in Chisasibi and Mistissini, and strengthening the hemodialysis infrastructure in Chisasibi. This will require a range of resources and cross-departmental collaborations.

Long-term goals include the development of a Renal Health Hub, the creation of pre-dialysis clinics, and implementing home hemodialysis at transition and Elder homes.



Allied Health Services Update

The Board was updated on Allied Health Services, with a focus on regional services offered as well as local coverage. These services include physiotherapy, occupational therapy, speech and language therapy, nutrition, and respiratory therapy. Other areas are also implicated in Allied Health Services (eg, MSDC programming).

Objectives for the coming year include developing mobile teams to supplement local services, developing some new services (eg, orthotics) and approaches, coordinating care transition for clients, and supporting recruitment and retention efforts, among other initiatives.



Healthy Men's Project update

The Board was updated on the Robin's Nest's Men's Support Program.

Men's gatherings held in Chisasibi in June 2021 and March 2022 in partnership with CWEIA aim to encourage Eeyou men to stand up to domestic and family violence and to support women in preventing and bringing awareness to this violence. The Chisasibi Healthy Men's Project, now ongoing, provides a safe space for men to gather and gain traditional knowledge, while practicing traditional activities and learning about the services available to them; the project also creates a peer support group for participants. Other initiatives include the "Chiiwaaschaau Program – Building Healthy Communities" and the "Mianscum Solidarity Coop – Living Without Violence" land-based program.

The 2022-2023 action plan for the Men's Support Program was also presented.



A landscape photograph of a lake at sunset. The sky is a mix of soft pinks, oranges, and blues. The lake's surface is calm, reflecting the colors of the sky. The shoreline is rocky with sparse vegetation, including some shrubs with autumn-colored leaves. In the background, there are forested hills. A large, solid white circle is centered over the image, containing the text "NISHIIYUU" in a bold, blue, sans-serif font.

NISHIIYUU

Action Plan for Nishîyû Optimization Audit Recommendations

This past year Nishîyû completed its optimization audit, and the Board was presented with an action plan to address the recommendations of this audit.

The recommendations cover a range of areas, including employee satisfaction and sense of meaning, governance, and risk management at departmental and program levels. As presented, the action plan identifies each recommendation and outlines how the Nishîyû team plans to address that recommendation.



A scenic landscape photograph featuring a calm lake reflecting the sky, surrounded by a forest of evergreen trees. In the foreground, there is a rocky shore with sparse vegetation. A large, white, semi-transparent circle is centered over the image, containing the text "PIMUHTEHU" in a bold, blue, sans-serif font.

PIMUHTEHU

Miyupimâtisiûn Integrated Care Model update

The Board was updated on the new Miyupimâtisiûn Integrated Care Model (MIC-M), which will be replacing the age-based model that has been used by the CBHSSJB since 2008 but which no longer fits the needs of the Cree people.

This new model is inspired by the Nuka model of care developed by the Southcentral Foundation (SCF) in Alaska. It aims to be client and family-centred, team-based, and culturally relevant.

In developing the MIC-M, representatives of the CBHSSJB have visited the SCF in Alaska to learn more about its model, held a retreat in October 2021, and organized consultations internally and externally from February to April 2022. Further consultation sessions are planned for the coming months.



MIC-M update continued

MIC-M pilot projects are underway in Mistissini (with the Mâmûhkedâu project, launched in 2019) and Chisasibi CMC (with the Nisk team project launched in October 2021). Results from both are positive.

Finally, the Board was presented with a summary of the different impacts the MIC-M will have on services and management, as well as recommendations to ensure the smooth transition to this new model of service.

A framework for implementing the MIC-M will be presented for Board approval at the next meeting.



NEXT REGULAR BOARD MEETING

September 13-14-15, 2022





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