



JAMES SMITH HEALTH CLINIC

2013

James Smith Cree Nation's Health Services Annual Report 2012-2013



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JAMES SMITH HEALTH CLINIC ANNUAL REPORT

Vision Statement

Programs and services are delivered by James Smith Health Clinic based on the philosophies that:

1. James Smith First Nation has control and jurisdiction over the health of its membership under Treaty and Aboriginal rights.
2. The Federal trust and responsibility will be maintained by the James Smith First Nation.
3. There is Federal obligation to provide a comprehensive Health Service which is identified and included in any and all agreements made between the James Smith First Nation and the Federal Government (Health Canada).
4. Traditional health practices must be accommodated and respected.
5. All band members are entitled to access Health services at all times.
6. Standards for service and staff will be equal or superior to the existing standards.
7. The mental, emotional, physical and spiritual well-being of each individual is essential to health, not only the absence of disease.

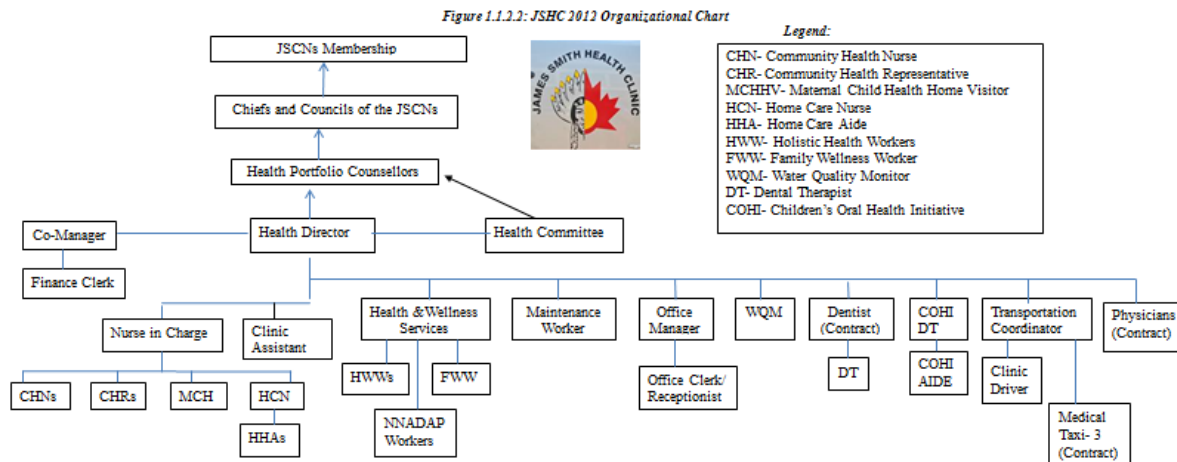
Mission Statement

*James Smith Health Staff will work together as a team
in the spirit of co-operation, mutual support and respect
to provide holistic health care services
to the best of our abilities.*



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Organizational Structure



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Map of James Smith Cree Nation



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Chief's Message

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Health Portfolio Council

GORDON BURNS
JAMES SMITH CREE NATION



Tel 306.864.3636
Fax 306.864.3336

TANYA SANDERSON
CHAKASTAYPASIN BAND



Tel 306.864.3636
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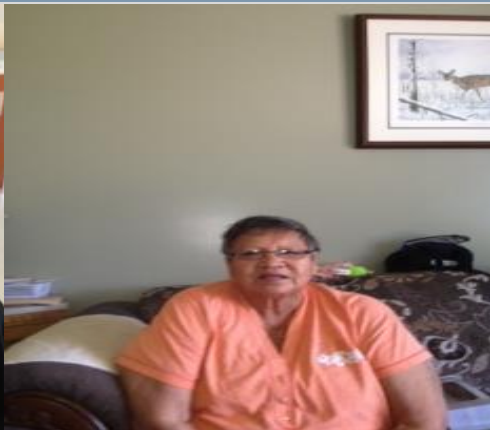

BRIAN HEAD
PETER CHAPMAN BAND



Tel 306.864.3636
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Health Board Members

CAROLINE MOOSTOOS HEALTH BOARD ELDER	EVEYLYN BURNS HEALTH BOARD MEMBER	JOHN STONESTAND HEALTH BOARD MEMBER
		

SANDRA SANDERSON HEALTH BOARD MEMBER	BOBBI HEAD HEALTH BOARD MEMBER
	

JAMES SMITH HEALTH CLINIC ANNUAL REPORT

Message from Health Director

Once again, I am happy to report on the year in review with the James Smith Health Clinic. The 2012-2013 Health Clinic programs and services annual report provides an overall review, through informational program summaries and the audited financial statements for the year ending March 31, 2013.

2012-2013 brings to an end of another five year health agreement with First Nation Inuit Health since the first health transfer agreement was signed in 1994 by the leadership. These agreements were to give more control to the First Nations Health Program to administer certain health programs and services. A five year community health plan was developed that involved many people from the community and a final community approval process from the membership was given to enter into these Health Agreements. Since then there has been four community health evaluations done and four community health plans develop for those agreements.

This past year has been a real challenge as the health program had to develop and submit a new five year health plan to Health Canada. Health Canada has made changes to the new five year health agreement on how the five year plan was to be developed and administered. There needed to be a new five year health plan with logic model plans for each program submitted for reviewed and approved by Health Canada. Through the health evaluation process there were a number of recommendations made on how to improve the programs and services. These recommendations have been incorporated into the new Health Plan and Program logic model health plans.

As indicated from the audited financial statements in this report, James Smith Health Clinic continues to be in a good financial position as result of careful budgeting and accountability practices. Programs and services will continue to be sustained as a result of sound financial management.

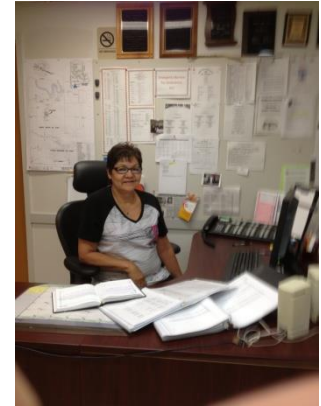
I would like to thank the Leadership, Health Committee and Staff for your continued dedication and support to the improvement of quality health services to the community we serve.



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Office Manager

It has been a very busy year for everyone involved to meet the challenges and provide services to the community. It takes a dedicated team to meet the requirements of the daily routine of a busy Health Clinic. It has been a successful year and we continue to participate in the health services. The staff continues to do the best to provide the services for your community.



We attend professional development courses to update or enhance our skills in modern technology. I would like to commend the staff for your commitment throughout the year for our community.

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Nursing

We entered the new fiscal year with renewed optimism, enthusiasm and vision for the coming years. There are a lot of reasons to celebrate; our program accomplishments last year are many and we can still improve and deliver them in a much better way.

The community health nursing program is facing many challenges in health care delivery, but we keep our focus on the seamless delivery of mandatory programs like the; immunization program/well baby clinics, pre/post natal programs, school health, communicable disease control, home and community care and access to medical treatment and care. We will not be fazed by the challenges; instead we will face them as inspiration to carry on with our duties and responsibilities to the people of James Smith.

This year we will write the 'blue print' for the James Smith Community health plan for the next 5 years. Careful planning, thoughts, and considerations on where to focus our resources and program activities is paramount in order to achieve best results, mindful of the fact that health care needs are fast changing.

Our community is now in control of the diabetes program. The realization of this dream came about after a proposal to the health director was approved that the funding be removed from the PAGC diabetes program. Then a full program proposal was submitted to Health Canada, and the rest is history. This is one example of changing health needs, as early as 10 years ago we did not need a full time diabetes program, but with the prevalence of diabetes and many of its predisposing factors a one day a month program visit from the PAGC diabetes team is not enough. Now that we have full control of the program we can safely meet the needs in the area of diabetes.

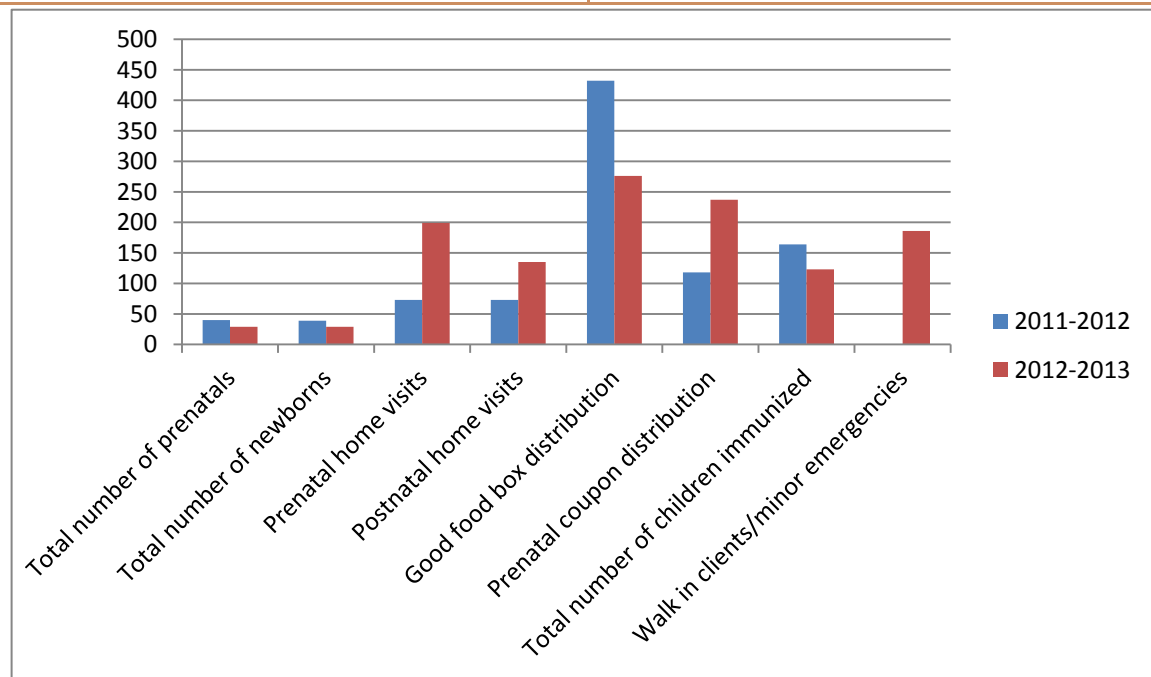
Our young parents and their children will likewise receive additional services. The maternal child health program (MCH) will add a half time position to meet the need of young parents that are in school or at work. We will offer programs after regular working hours to accommodate them. The program will include the fathers in the pre/post natal classes and activities.



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With the changing times, we need to adapt to all the changes in technology, education and health care delivery. Our health staff is taking necessary steps to be able to keep up with the current and effective best practices in health care delivery.

James Smith Health program and Service statistics 2012-2013	
Total number of prenatal	29
Total number of newborn	29
Total number of prenatal home visits	199
Total number of postnatal home visits	135
Total number of good food box distribution	276
Total number of pre and post natal coupon distribution	157
Total number of children immunized	164
Total number of walk in clients/minor emergencies	186



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Home and Community Care

Jimmy & Mary Ann's Cultural Camp

Denare Beach, SK.

Home care & Clinic staff escorted 15 Elders to Jimmy & Maryanne's camp which is located At Denare Beach, it is just 15 minutes away from Creighton. This camp bought back memories for the Elders. We all stayed in cabins right along the lake.

The camp offered a variety of activities for the Elders, they had a chance to pick out the traditional roots, as well as mint leaves for tea. There was many traditional foods, such as moose nose, as well as bone marrow from a Elk. Each evening they would be served from a traditional menu.

They also went berry picking for one afternoon, and then there was a stop for shopping in Flin Flon. We took them for a supper one evening at The Pas, MAN. They enjoyed the casino as well as the mall.

The budget for this trip was \$13,200.00, the home care staff will be planning the next Elders trip for 2013.



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James Smith Home and Community Care Program Report 2012-2013

Home Care Nurse	1	RN
Home Health Aides	4	HHA
Total # of Home Visits	6059	Visits
Total # of Home Care Clients	105	Clients

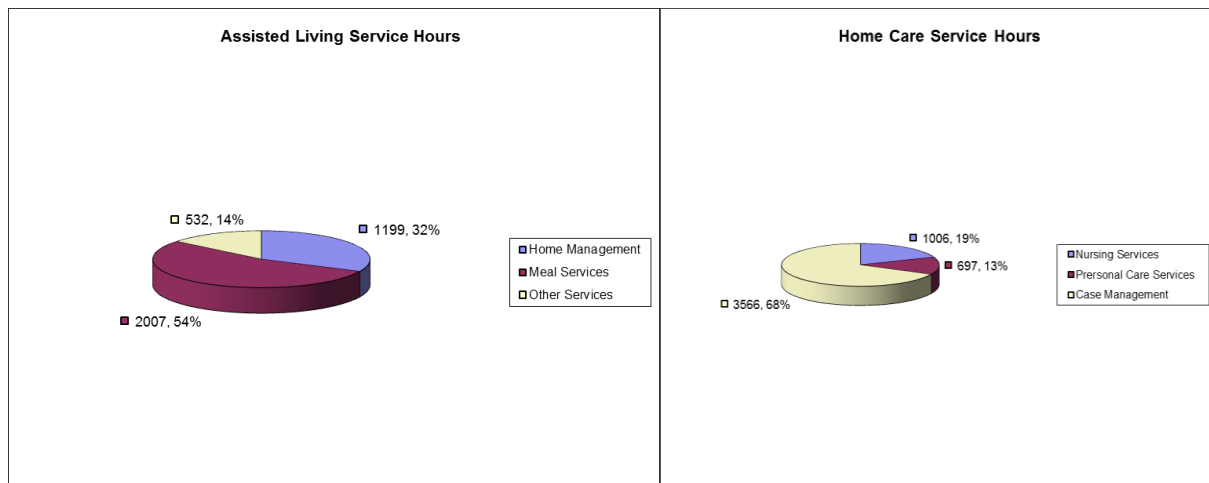
Assisted Living Services

Home Management	1199	Hours
Meal Services	2007	Hours
Other Services	532	Hours
Total Hours of Assisted Living Service	3738	Hours

Home Care Services

Nursing Services	1006	Hours
Prpersonal Care Services	697	Hours
Case Management	3566	Hours
Total Hours of Home Care Service	5269	Hours

Grand Total Hours of Home and Community Care (Delivered by Home Care Nurse and Home Health Aides)	9007	Hours
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Elder's days	Attended	Foot care	Programs	Attended
April 13/11	13	Apr.26/11		8
April 20/11	13	May 24/11		12
April 27/11	12	June 28/11		5
May 4/11	16	July 26/11		8
May 11/11	13	Aug.23/11		12
May 18/11	15	Sept.20/11		13
May 25/11	16	Oct.13/11		12
June 1/11	13	Nov.15/11		11
Sept.7/11	19	Dec.19/11		10
Sept.14/11	16	Jan.25/12		10
Sept.21/11	19	Feb.23/12		11
Oct.5/11	19	Mar.19/12		10
Oct.12/11	18			
Oct.19/11	17			
Oct.26/11	13	Total		110
Nov.2/11	14			
Nov.9/11	15			
Nov.23/11	16			
Dec.12/11	20			
Jan.11/12	21			
Jan.18/12	19			
Feb.1/12	14			
Feb.8/11	17			
Feb.15/11	16			
Mar.7/12	15			
Mar.13/12	13			
Mar.27/12	16			
Total	528			

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Community Health Representatives

The CHR services in the community of James Smith cover's a large amount of different activities, some of which is planning on activities on independently & also working with other health staff professionals. This report will go in detail as to what the CHR program offers to the community and how it works with other staff members on the team.

Medication Delivery- Chrs deliver urgent medication on a daily bases.

Medication Deliveries - 2700

Home Visiting – each CHR is required to 25 home visits each month. To let home owners, families and mother's about services the health clinic provide and ask about concerns they may have e.g.: water, sewer, mold, immunizations, doctor days. Pre/post natal. Chronically ill patients

Referrals – CHR refers clients to other health care professionals, as the need arises and also finds other services for clients to off reserve services. We also work closely with the transportation coordinator. 352 Clients Referrals

Hearing Program – Bernard Constant Community School staff conduct the hearing program.

Eye Exams – 3rd annual eye exam clinic at Bernard Constant School with Dr. Holmgrens office. CHRs are responsible for getting parental consent from the parents and relaying messages from parents to Dr. Holmgrens office. We assist with the students if parents are not available.

Infection Control – CHR's go to the school and teach hand washing 2 times per year

Nursery – 12

296 Students

We also teach the housewife's, family about head lice, sores children may have proper laundering, also any other concerns parents may have. A lot of times CHR'S have to refer them to a doctor. The E.H.O from P.A.G.C. also comes out to our community checking homes that were referred by health care professionals. We also make referrals to John Moostoos who is our water tech in our community. 125 Homes

Immunization Program – C.H.R'S help the community health nurse taking height, weight, of babies and assisting the mothers. We also contact the parents when baby is due and some time we need to do extra teaching with parents who will not bring their child in for their immunization.

Immunization Graduation – This year is our 4rd annual Immunization Graduation, CHR'S work with the Community Health Nurses. We take this time to celebrate and thank the parents for bringing in their children and getting them protected from all the different childhood sicknesses that can make our children very sick.

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As a team we have a common goal, to get our children protected.



We give the parents information about the different vaccines that their children will need throughout their lifetime.

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Immunization is Prevention

T.B Control – Merle & Annie have been both trained to administer TB meds to school children, We also do short presentations about TB information to the school children for the TB poster/essay contest put on by the health clinic. We also help the community health nurse & the TB nurse when they do the mantoux testing on selected school aged children at the school.

0 child on TB meds

296 school children

30 mantoux tests

Dental Health Program – CHR'S go house-to-house getting parent consent for the fluoride rinse program & dental for the dental therapist and also the children's oral health initiative. Relaying the programs services to the parents/guardians.

Child Find – CHR'S conducted an ID program in our community

We randomly put certain times of the year to do this activity.

Random Blood Sugar / Blood Pressure Checks –The CHR'S do these checks on doctor days. We take their sugar test & blood pressure and give them healthily eating counseling

Good Food Choices / Healthily Choices following the Canada Food Guide – CHR'S have been doing home visits talking about healthy food choices young families, diabetic and general home owners

CHRs also go with the nurses to do education on different topics

- Sexual health
- Parenting/teen pregnancy prevention
- FASD
- Head lice checks & rapid body checks
- Diabetic Education
- Peer Pressure
- Bullying
- Immunizations

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Cancer Awareness Program-

TOUGH ENOUGH TO WEAR PINK



We did this program to honor our cancer survivors and to bring education & awareness to the community about cancer and all the different types of cancer. And most importantly to send the message that everyone young and old, we all need a good family doctor who we see for regular physical exams and to go for lab, ultrasounds tests when the doctor asks us to. We had a candle light ceremony in remembrance of the people we had lost to cancer. We presented the survivors with star blankets, and they spoke about their personal challenges. We had a very awesome response from the community, a lot of people attended.



In April the CHRS also took some of the cancer survivors to the living well cancer conference in Regina Sask. We took 9 survivors and spouses, support people. We had a very awesome time. It was something to see our cancer survivors interact with other survivors.

We are very proud of our cancer survivors

Baby Sitting Course – One of the CHRS also worked with the Canadian Red Cross 17 students were certified. We served all the participants lunch all four days, it was fun spending time with all the kids in our community, Getting to know them.

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James Smith Daycare

Coordinator	Cathy Marion
Early Childhood Educators	Eileen Sanderson
	Michelle Marion
	Serina Mercredi
Janitor	Ron Head

February 15th of 2013 marked the 13th year of operation of the day care centre. It has been another great year with plenty of different children coming through the centre.

In mid-August, just before school starts, the staff host an open house for fall intake. All children that attend the centre must have all of the required forms filled out before enrollment.

The staff are scheduled a different group each week (infants, toddlers, preschoolers). They plan crafts/activities based on the weekly theme. The staff rotate cooking and cleaning duties.

The day care will be closed for the summer. This will be the first summer that the centre will be closed due to low number of children attending in the summer. Also, renovations will be taking place during the summer months.

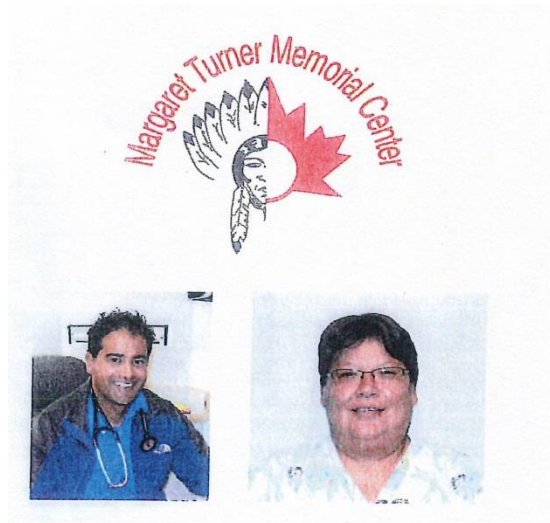
I, Cathy will be leaving the centre at the end of June. I have been at the centre for over 9 years and it has been a great opportunity working with the young children in our community preparing them for school.

Enrollment in the Daycare

Month	Infants	Toddlers	Pre-Schoolers	# of Children
April	0	2	9	11
May	0	3	13	16
June	0	1	9	10
July	0	1	6	7
August	0	1	5	6
September	2	5	10	17
October	4	7	7	18
November	3	7	10	20
December	1	2	9	12
January	2	3	12	17
February	2	2	10	14
March	1	2	10	13

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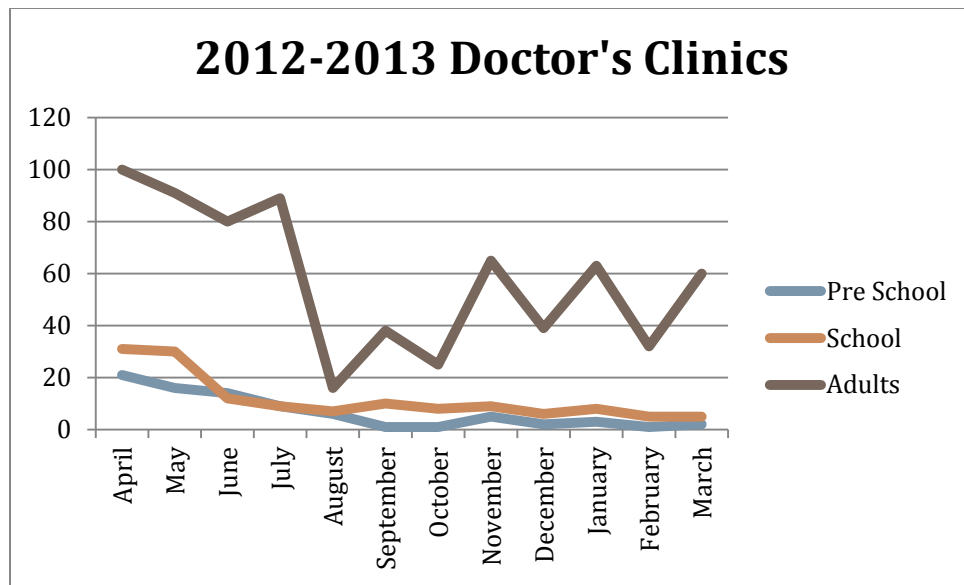
Physician



Doctor's Clinic Reports 2012-2013

		Age Groups			Number of Clinics
		Pre School	School	Adults	
April	2012	21	31	100	7
May	2012	16	30	91	6
June	2012	14	12	80	6
July	2012	9	9	89	6
August	2012	6	7	16	1
September	2012	1	10	38	2
October	2012	1	8	25	1
November	2012	5	9	65	3
December	2012	2	6	39	2
January	2013	3	8	63	3
February	2013	1	5	32	2
March	2013	2	5	60	4
Totals		81	140	698	43

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We have doctor clinics Tuesday and Thursday of each week at the present time Dr. Van Der Ross from Melfort comes out to the clinic. In the past the clinics have been very busy with treatment, referrals, and follow-up appointments for patients. A total of 919 patients have been seen and the breakdown is as follows: 81 preschool, 140 children and 698 adult.

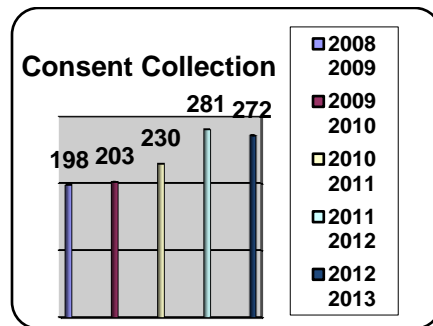
Submitted by:
Eldeen McKay
Doctor Assistant

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Dental Therapy



The overall goal of the Dental Program is to enhance dental health of James Smith Cree Nation by increasing access to Dental Therapy. The focus population is the students at Bernard Constant Community School nursery to grade 12, with participation from daycare and head start programs.



The priority programs in the community are:

1) Prevention

- Classroom presentations once a year or upon request from teacher
- Brushing program for head start – grade 5 with toothbrush exchange every 3 months.
- Fluoride rinse program for grades 1-6 elementary division from September – June.
- Community Health fair- Display Booth at the school gym
- Diabetes Awareness Day- Display Booth at Health Centre



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2) Treatment

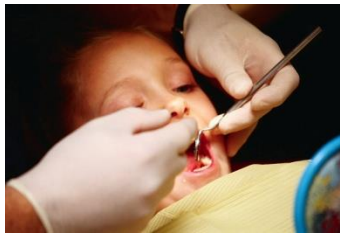
- Treatment plans for new school students or recalls for both on & off reserve clients.

*Patients receive preventive oral treatments

*Patients receive Restorative Oral treatments

*Patients are referred for General Anaesthesia to Saskatoon

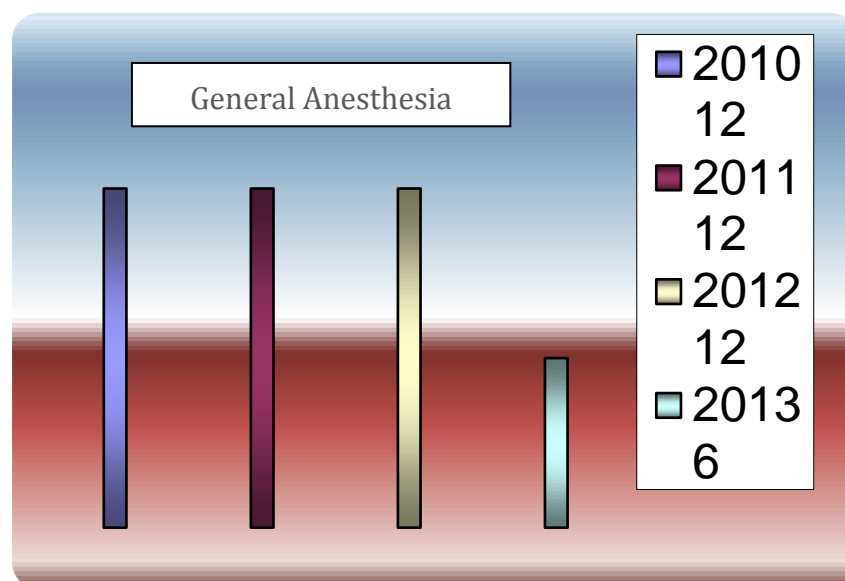
- Specific/walk in appointments seen Monday's as the doctor is only available on Wednesdays out of the community.



3) Emergency/Referral Treatment

-Both Adults & Children are treated and depending on extent of emergency a referral is

Sent to nearest facility which is Melfort as needed unless client states otherwise for treatment.



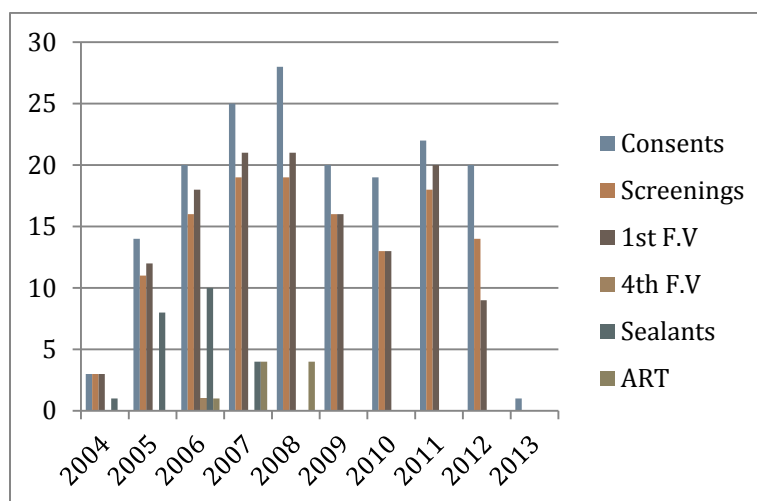
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Children`s Oral Health Initiative



The COHI is a service provided to on-reserve First Nations children and Inuit children to help them establish and maintain healthy teeth and gums.

It is a fluoride varnish program and it is applied in 4 stages quarterly to children ages 0-7 years old. The program follows the school calendar and runs September through August. We also provide prenatal presentations and individual oral hygiene instructions for parents/guardians and children in the program.

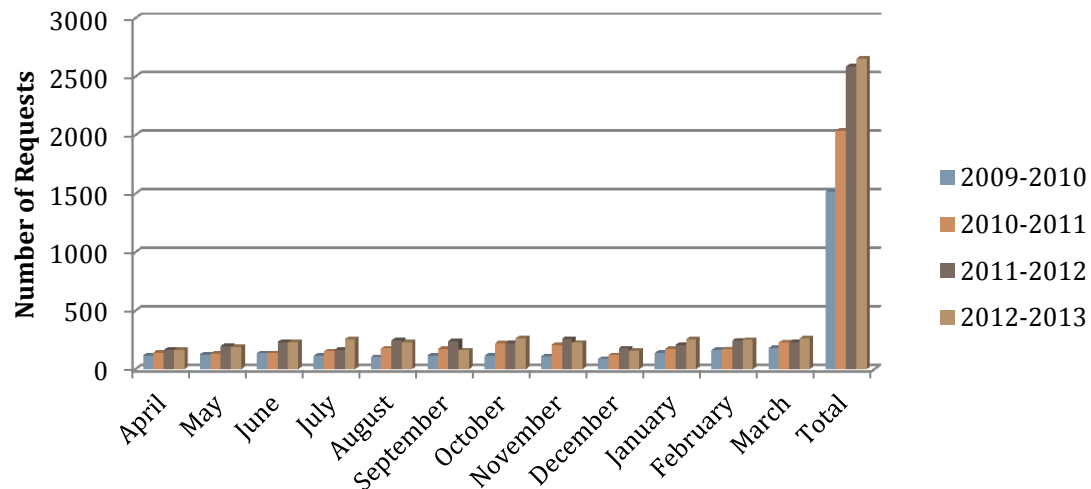


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Medical Transportation

In 2012-2013, the Medical Transportation Program once again has seen a jump in the number of requests for transportation assistance to attend medical appointments. The following table and chart shows the comparisons between the 2009/2010, 2010/2011, 2011/2012 and 2012-2013 fiscal years.

James Smith Health Clinic Medical Transportation Total Number of Requests



Included in the table and chart are requests to see dentists, general practitioners, and optometrists, specialists in Prince Albert and Saskatoon, Traditional Healers to name a few. However the table and chart does not show any requests that were denied. These numbers were too small a figure shows up on any chart.

The trip distribution according to the destination for the Medical Transportation program is reflected in the table and chart below. Once again the pie chart reveals the majority of trips in 2012/2013 were to Melfort.

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<i>James Smith Health Clinic</i>	
<i>Trip Distribution-Destination</i>	
<i>2012-2013 Fiscal Year</i>	
<i>Destination</i>	Number of Trips
<i>Saskatoon</i>	301
<i>Prince Albert</i>	185
<i>Tisdale</i>	280
<i>Melfort</i>	1053
<i>Traditional Healer/Out of Province</i>	87
<i>Other(Regina,Nipawin, etc)</i>	15

Health Canada has designated Melfort as our nearest destination to access general practitioners, dentist, optometrists etc. This shows on the chart as Melfort has over half the trip destination.

Respectfully,

Alvin Sanderson
Medical Transportation Coordinator



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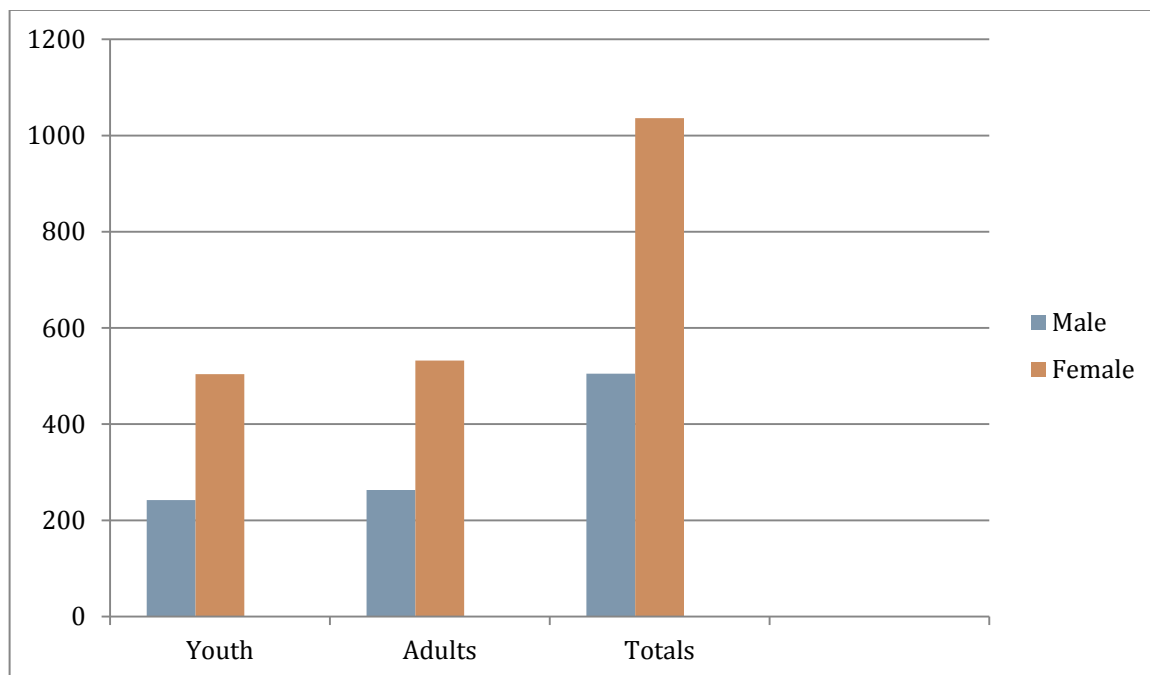
Family Wellness Team

Family Wellness, NNADAP, Youth Coordinator, Mental Health



During the 2012-2013 fiscal year the community wellness team consisting of NNADAP (Darryl Burns and Brenda Constant), Tiffany Sanderson (Youth Program Development Worker), Family Wellness (Wilma Burns) and the Holistic Health Therapists (Wanda Seidlikoski Yurach and Patti Cram), delivered programs and services to community members.

Demographics

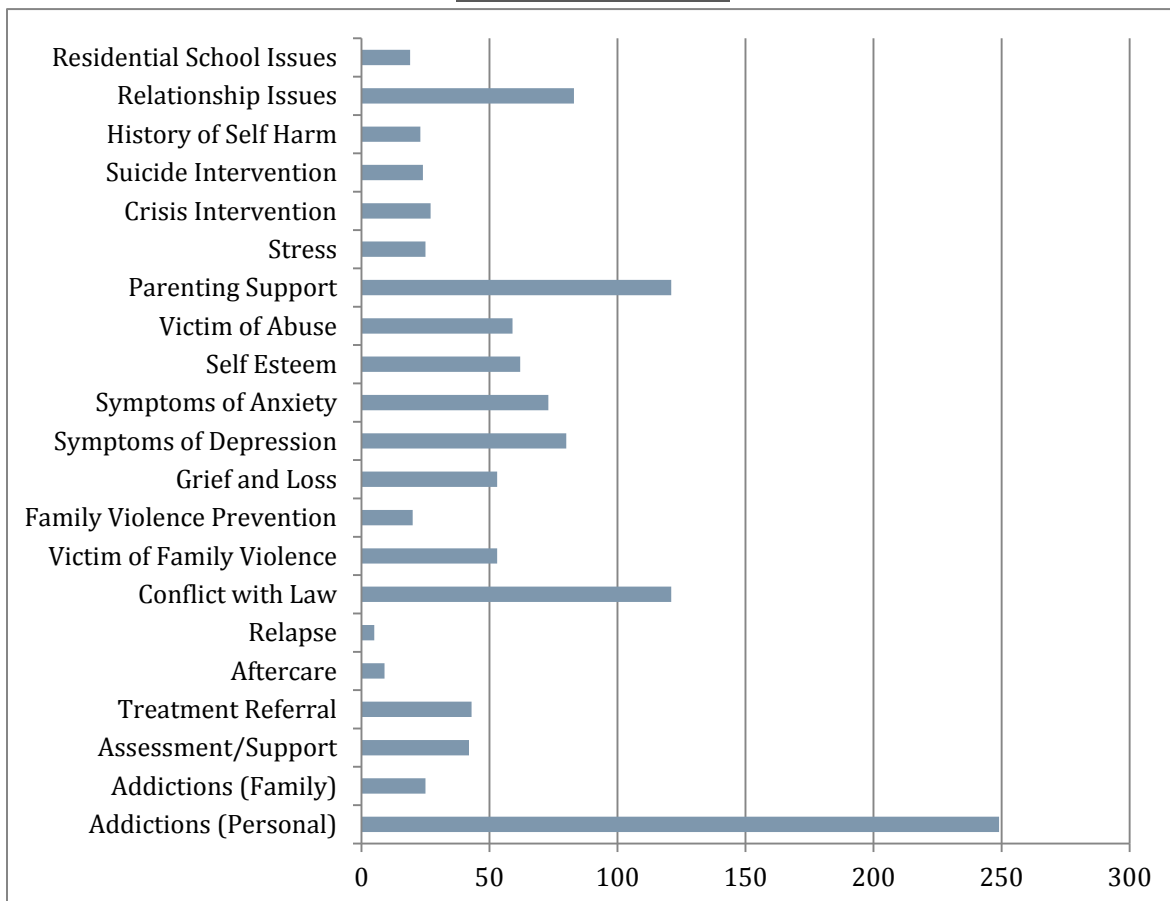


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Service Delivery

	Office	Home Visit	Facility	Totals
Individuals	402	223	313	938
Couples	6	28	0	34
Families	7	14	25	46
Groups	20		457	0
Totals	435	265	482	1018

Presenting Issues



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Workshops/Retreats/Awareness Campaign

Self Care Presentation	8
Youth Cultural Camp	75
Family Retreat	13
Bullying Prevention	15
Grief and Loss Candle Light	5
Strategies to deal with self harming behavior BCCS	18
Conflict Resolution/lateral violence	26
Men's Inner Child Retreat	7
Women's Inner Child Retreat	8
National Addictions Awareness Week	200
Mental Health Awareness	400
Cultural Camp	60
	835

Self Care Workshop

The Self Care Workshop was held on May 7, 2012 at the John Godfrey Centre. Provided an overview of the impact of stress and strategies for self care.

Mental Health Awareness

A poster campaign was facilitated by the Holistic Health Therapists in July, 2012 which provided information on mental health awareness as well as suicide awareness.

Youth Camp

Camps were held August 7, 2012 to August 16, 2012 at Camp Tawow. A variety of workshops and presentations were made to the youth in attendance including: bullying prevention, suicide prevention, sexual health and wellness, leadership, healthy relationships etc.

Cultural Camp

Cultural Camp was held in July, 2012. Wellness team provided a bullying prevention presentation to youth during this camp.

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Family Retreat

Held October 24, 2012 to October 26th, 2012 in Saskatoon. Four families were in attendance with 16 participants in total. Presentations included healthy communications and positive discipline. Also a variety of family activities and discussions took place during the retreat.

National Addictions Awareness Week

Held November 19th, 2012 to November 23, 2012 in the community of James Smith. Activities included a memorial walk, essay contest, candle light vigil and dry dance.

Conflict Resolution/Lateral Violence

Patti and Wanda Holistic Health Therapist's facilitated a one day training workshop for BCCS staff in February, 2013 regarding conflict resolution and lateral violence prevention.

Self –Injury behavior

Wanda facilitated a workshop to BCCS staff regarding strategies for dealing with self-injuring behavior in January, 2013.

Health Fair

The wellness team set up a booth at the Health Fair at BCCS and provided information to individuals. Also Patti provided a workshop on suicide prevention. As well Wanda provided a workshop on Lateral Violence.

Maternal Child Health

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e-Health

Information Technology

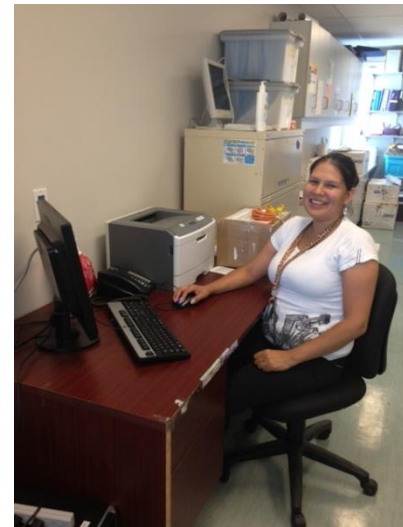
James Smith Health Clinic has taken advantage of new technology as it has become available and more affordable. Using Information Technology, we are better able to support, manage and enhance the delivery of health programs and services. This also plays an important role in the organization's recruitment and retention efforts.

Data Collection systems for:

James Smith Health Clinic done a pilot project on the collection of immunization data collection (SIMS Saskatchewan Immunization Management Systems) a person was hired to input the data. There were approximately 350 client charts entered into the system. The target group was 19 years and younger, or those born in 1994 and after. She was very successful in also entering and updating all the children who continue to live on the reserve and attend school elsewhere and those numbers are included in the total data collection.

Future Initiatives

1. Program Daily Stats
2. Home and Community Care
3. Medical Transportation
4. Dental



Video Conferencing



Through a partnership with PAGC and support from e Health Infostructure Unit FNIHB video conferencing equipment was installed in the Health Clinic boardroom.

This has been a worthwhile endeavour to have video conferencing equipment. Successes of this capacity include having the ability to keep staff in the community instead of sending them out for training. We have also been able to link with partners ie. NITHA, using the

JAMES SMITH HEALTH CLINIC ANNUAL REPORT

equipment to have meetings to deal with communicable disease issues.

Some of the challenges are the inability to interact with provincial partners in the health care sector such as health regions. At the present time we are unable to access any training, in service, or case management with the health regions. If we had this ability client care would certainly improve. For instance if we had the ability to discuss a client's care with certain physicians it would save time and resources for everyone involved. Client would not have to leave the community for health care.

The staff have used the equipment to access the training and in services that NITHA has to offer to community health nurses and support staff such as infection control updates and immunization updates. We were also able to use video conferencing when we had a communicable disease outbreak in the community. Once we have the ability to connect with other agencies we know it will be very beneficial to our health clinic, programs, staff and clients.

High Speed Internet / e Health

Through The e Health initiative fiber optic line that will be installed to the health centers. James Smith Health Clinic will have the fiber optic line installed in 2013

Through a NITHA initiative, we are working towards upgrading our network infrastructure and eventually move to the Province's Community Net (Private Health Network).

Policy Development:

James Smith Health will be working on developing policy. The lack of e-Health policies that will guide the implementation of information technologies to better address our pressing health issues in the community. The development of these policies need to be undertaken now with the participation of all stakeholders; providers, patients, vendors and governments. Some of these will be unique to our jurisdiction while others will require national, provincial cooperation and dialogue.

JAMES SMITH HEALTH CLINIC ANNUAL REPORT

Health Facility Management

The James Smith Clinic is responsible for the Operation and Management of the health facility. The health transfer agreement provides the funding for the operation and maintenance of the building. There have been very positive comments from visitors and the general public on the cleanliness of the health facility.

The Health clinic has begun to develop a Health facility maintenance management plan that will be submitted as part of the community Health Plan. This plan will serve as a guide for the staff and janitorial staff on proper maintenance of the health facility. There is also has a health and safety fire plan developed into the masterplan.

Through-out the last few years the health clinic did submitted for capital funding to expand and renovate the existing building this was completed in 2011.

This fiscal year the health clinic put in a submission to health Canada under the special projects capital funding projects, for the replacement of furnaces in order to support the efficient operation of the facility.

The submission was approved in January for \$34, 149.00 to remove the 3 existing furnaces that serve the health clinic and replace with high efficient Lennox furnaces with all the proper ducting and venting. All work was complete by the contractor by March 31, 2013

Maintenance and Janitorial

Health Canada (FNIHB) facilities management makes annual inspections of building, The office manager keeps records of equipment and vehicles for maintenance purposes and replacement assessments. Our objective is to provide proper maintenance and supervision of all assets and facility, to ensure they are in good repair and to extend their useful life. Health Clinic provides on-going orientation and training of Health Clinic Janitorial staff.

The janitorial staff is responsible for following the maintenance management plan that outlines the cleaning of health clinic. The objective is to maintain the building in good standard and includes interior and exterior cleaning of all surfaces; furniture replacement and perform other miscellaneous maintenance tasks throughout the health clinic. This assures our employees, clients and visitors a clean, healthy, comfortable and satisfying work placement environment. Work orders are done for minor maintenance repairs.

JAMES SMITH HEALTH CLINIC ANNUAL REPORT

Finance

Finance Officer

Pension & Benefits Administrator

Jean Sanderson

Funding for the James Smith Health Clinic is provided through various agencies with the majority coming from Health Canada, some from PAGC and others. The audit was done by Ingram & Yeadon Accountants in Melfort.

Included in the financial audit are:

- The auditor's opinion of the fairness of the financial statements
- Statement of Financial Position (Balance Sheet)
- Statement of Revenue, Expenditures and Fund Balances (Income Statement)
- Combined Statement of Revenues, Expenditures & Accumulated Surplus
- Statement of Net Assets
- Statement of Cash Flow
- Notes to the Financial Statements

There have been more successes in the financial aspect of the James Smith Health Clinic than there have been challenges. This year is the last for the Transfer and Contribution agreements to be in place. In the new fiscal year we will be in a different funding agreement. I look forward to the challenges that that may bring.

Overall it has been a productive year with many programs being delivered to the community by the Health staff.



JAMES SMITH HEALTH CLINIC ANNUAL REPORT

Co-Manager`s Message

I have been privileged to witness and support the astounding amount of work that has been done by this extraordinarily dedicated staff.

James Smith Health Clinic completed its five year evaluation and completed its Community Health Plan in 2013.

Our goal, as always, to improve patient outcomes while improving patient and provider satisfaction, and to reduce the overall cost to the system.

We have been hosting monthly general health committee meetings which provide an opportunity for our members to learn about our many initiatives and to contribute their perspectives to the process. These meetings, combined with regular communication and word-of-mouth in the community have enabled us to deliver successful workshops in the community.

But really the most important attribute of this health clinic is the people.

I would like to thank the Chiefs and Councils for giving me the opportunity to be part of this challenging and very rewarding role. I would also like to thank the amazing staff that has become the glue holding all of our efforts together. It is a privilege to work with you all and I look forward to each day as we work toward primary health care transformation.

Matthew Holinaty, Finance Co-Manager

JAMES SMITH HEALTH CLINIC ANNUAL REPORT

James Smith Cree Nation Health Clinic

FINANCIAL STATEMENTS

MARCH 31, 2013

JAMES SMITH HEALTH CLINIC ANNUAL REPORT

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