

Minutes of the Meeting of the Fort Smith Regional Wellness Council

Wednesday, May 21, 2025

1900 - 2100

Location: 41 Breynat Street, Fort Smith Health Centre Board Room

Members Present:

Dianna Korol, Chair
Don Webb, Acting Chair
Mary Pat Short, Council Member
Lynda Martin, Council Member
Lorraine Tordiff, Council Member
Alan Karasiuk, Council Member

Members with Regrets:

Staff Present:

Lisa Sanderson, COO
Candace Dion, Executive Assistant

Guests:

NTHSSA CEO, Kimberly Riles,
NTHSSA Public Administrator, Dan Florizone,
NTHSSA Senior Advisor, Governance, Allen Stanzell.

Community Residents:

Richard Daitch
Darlene Powder
Bea Campbell
Frieda Schumann
Julie Beaver
Linda Masson
Brandee Mills
Natalie Campbell
Maggie Jones
Glenda Simon
Erika Pandke
Chris Dabbs (MLA Thebacha constituency rep)
Edith MacPherson

#	Item and Details	Time	Responsibility
1.0	Call to Order	1902	Chair
2.0	Introduction by the Chair, Dianna Korol, NTHSSA Public Administrator, Dan Florizone, and NTHSSA CEO, Kim Riles.	1903	Chair/Council Members
3.0	Guest speakers: NTHSSA CEO, Kimberly Riles; Public Administrator, Dan Florizone; and Senior Advisor, Governance, Allen Stanzell.	1904	NTHSSA CEO, Kimberly Riles, Public

<p><u>Questions Raised by the Public</u></p> <p>A community member raised concerns about the Home Care department. She would like to see the Home Care Coordinator position come back. There are many programs that we could have organized for our elders, but we were unable to do so due to the lack of a coordinator. She would also like to see day programming come back for seniors. A drop-in place where they can go and do whatever, beading, playing cards, having coffee/tea, etc.</p> <p>Answer from the CEO: Day programming is a great suggestion. She can take this back and work with the Department of Health and Social Services (HSS) on the funding and see what we can potentially pursue. Regarding the drop-in place, the COO can work with her team and organize something for the seniors.</p> <p>A community member requests an update on the funding for Long-Term Care beds. This community needs supported living; there are people here who need the extra help and care at home.</p> <p>Answer from the CEO: This is an area that has not had a lot of action in the NWT. The Department of HSS has carried out a review, and they are working on formulating a plan for the next steps.</p> <p>A couple of community members raised the concern about the increased price of Meals on Wheels. It increased from \$1.00 to \$10.00 per meal, which is a significant amount of money for seniors. They were informed that they need to pay two weeks in advance, or they will not receive their meals. Can this be revisited? Is there an option for the seniors to receive the meal for that week, so that they can decide which days they want to pay for?</p> <p>Answer from the CEO: This concern was raised at the closed RWC meeting, and she was aware that the price was going to increase, but was not aware of the magnitude of the increase. She will follow up and discuss with the COO. Regarding the meal option, that is something the COO can take back to her team to discuss to meet the seniors' needs.</p> <p>A community member raised concerns about the staffing shortage at the Health Centre.</p> <p>Answer from the CEO: The number of positions remains unchanged. We can consider short-term casual hires to fill the gaps left by staff on long-term leave.</p> <p>A community member raised their concern regarding the issue with travelling to YK for their 15-minute heart monitor appointment. Can we send staff who operate the machine to the health centre instead of having seniors travel to YK? Most seniors prefer not to travel, especially with the ongoing rise in medical travel issues.</p> <p>Answer from the CEO: She will investigate this issue.</p> <p>A community member raised concerns regarding a new program rollout for indigenous Home Care patients, but the people in charge of this rollout did</p>	<p>Administrator, Dan Florizone, and Senior Advisor, Governance, Allen Stanzell.</p>
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<p>not approach Home Care or the people who need the support. Feels a bit backwards thinking. Why wouldn't they connect with home care or the people who need the support? This community member asked the elders in attendance to come out and support this program. They want their input on what kinds of support can be offered to them.</p> <p>Answer from the CEO: The CEO suggests that a meeting be set up with the COO and the Regional Manager of Continuing Care to discuss the needs and support. She is going to do some light work when she gets home and get more information on the program.</p> <p>A community member raised the concern about the shared accommodations in YK for Medical Travel patients. There have been multiple stories from community members who had no choice but to room with a stranger in one of their boarding homes during their medical travel stay because the hotels were full. People do not feel safe there.</p> <p>Answer from the CEO: She will investigate the issue with the shared boarding home. This process should have ended after the safety incident. On another note, a dental office in the Dehcho is set to open soon, which should reduce the number of patients being sent to YK for dental appointments and hopefully increase the available accommodations for our medical travel patients.</p> <p>A community member raised the concern about the LAB/DI Department and the lack of full-time staff. She asked if this issue is on their agenda and what steps they are taking to fill the vacant positions. Our town/elderly struggle when there is no permanent LAB/DI staff on the premises.</p> <p>Answer from the CEO: The COO has made changes to the job descriptions to see if they have more success in hiring permanent staff. NTHSSA has been attending conferences, scouting graduates from NAIT, and offering a bursary program to attract workers to apply here.</p> <p>A community member raised ongoing concerns about the lack of changes to medical travel, staffing shortages, and Homecare issues. In January 2024, Health Minister Lisa Semler visited Fort Smith, and a number of issues were discussed during the meeting. A report on the issues and steps the NTHSSA planned to take to address these ongoing issues was intended to be shared with the public, but no information has been shared yet. The lack of attention to this matter has brought considerable disappointment from the Fort Smith community.</p> <p>Answer from the CEO: The medical policy is currently under revision. That being said, the NTHSSA cannot fix 100% of everything all at once. If we try to fix a thousand issues all at once, then nothing will get fixed. We need to pick away at specific issues that are achievable and that can make small incremental growths while we work on the bigger issues. The Public Administrator will implement the "52 Improvements in 52 Weeks" work plan into NTHSSA, enabling communities to access better healthcare within the NTHSSA.</p>	
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	<p>A council member raised concerns about the patients who come into the ER with head injuries and heart attacks, and how we can bypass sending these patients to YK and go straight to Edmonton instead. Can the policy be revised?</p> <p>Answer from the PA: This is all a part of the patient journey. Are there other ways of making that clinical judgement? Can we utilize technology to aid in decision-making? This is all in play right now to mapping that journey. Some of it is due to medical travel and clinical reasons. How do we design a system to meet the needs of the population?</p> <p>A community member raised concerns about the clinical waiting list and physician shortage. Any plans to approach this issue?</p> <p>Answer from the PA: He has initiated discussions with the physicians in Yellowknife, and they have identified three priorities as a collective. One is bargaining with the government's interests and bringing them to the table. We need an all-territory strategy. We need to think about how we deliver care. The second priority is determining what incentives can be offered to attract full-time physicians. The third is a system technology, including AI and virtual care. There have been numerous issues with access to primary care. The role of nurse practitioners is huge in rural communities.</p> <p>A community member proposed an idea for educating family members who have loved ones in palliative care. If the government can allocate some funds towards a group that teaches individuals how to remove a sweater from a stroke victim or reposition someone in their wheelchair, including tucking, it would be beneficial to show and educate the families.</p> <p>Answer from the PA: Great idea. He suggests a trial run. A small scale and see what works.</p> <p>A community member asked how the Minister of Health and the Minister of Education are working to strengthen roles and interests in healthcare positions. The focus is on the high school students who are deciding on their careers. Why can't we hold a career day like Yellowknife and invite students from other communities?</p> <p>Answer from the CEO: We have programs with policies and clinical job shadowing available; it just needs to be implemented. We can do more, but we have existing developments that are already available.</p>		
4.0	Adjournment	2040	Chair/Council Members

X *Dianna Korol*

Approved by Dianna Korol
Fort Smith RWC Chair

