



ANNUAL REPORT

2023 - 2024



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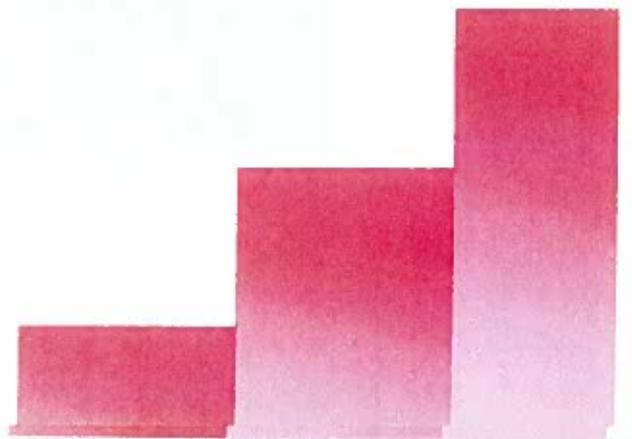


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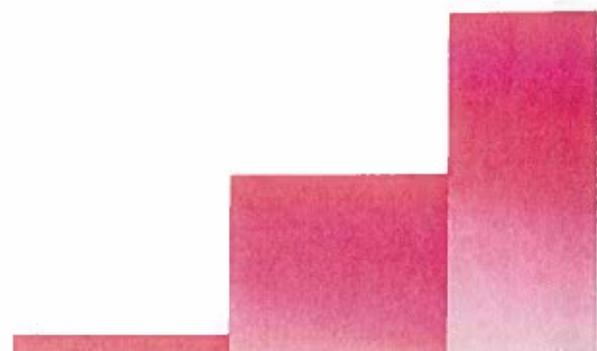


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CHAIR MESSAGE

TO OUR STAKEHOLDERS, WE INVITE YOU TO REVIEW THE ANNUAL REPORT FOR THE FISCAL YEARS APRIL 1, 2023 - MARCH 31, 2024.

THIS REPORT OUTLINES THE KEY ACCOMPLISHMENTS OF EACH OF THE NUNEE HEALTH BOARD SOCIETY'S DEPARTMENTS AND AUDITED FINANCIAL STATEMENTS.

HIRING A HEALTH DIRECTOR BECAME A BOARD PRIORITY. THE FALL OF 2023, THE BOARD HIRED GLORIA FRASER, WHO BROUGHT YEARS OF EXPERIENCE.

THERE WAS ALSO A TURNOVER OF THE BOARD OF DIRECTORS AT THE ORGANIZATION'S GOVERNANCE LEVEL. THE BOARD COMPRISES A MIX OF APPOINTEES FROM THE ATHABASCA CHIPEWYAN FIRST NATION, MIKISEW CREE FIRST NATION AND THE FORT CHIPEWYAN MÉTIS NATION, AS WELL AS BOARD APPOINTMENTS FOR YOUTH AND ELDER FROM INTERESTED CANDIDATES FROM THE COMMUNITY.

I AM GRATEFUL TO THE STAFF FOR THEIR STEADFAST COMMITMENT TO SERVING THE COMMUNITY.

CLARIS VOYAGEUR
CHAIR, BOARD OF DIRECTORS





ACTING HEALTH DIRECTOR MESSAGE

I am pleased to share highlights of the organization and staff's good work from April to October 2023 until Gloria Fraser started as the Health Director.

Accreditation: Thanks to the hard work of its staff, the Nunee Health Board Society successfully achieved Accreditation with Commendation. The Accreditation Canada seal shows that the organization is actively working to improve patient outcomes and mitigate risk, identifies strengths and gaps in programs and processes, promotes communication and staff empowerment across the organization, fosters a culture of quality and safety and gives confidence to patients.

Community Wellness: Mental health and addictions are a community health priority, but staffing vacancies have limited the delivery of these programs. The organization relies on consultant therapists to commute, and some funding has been provided directly to the nations to deliver programming based on activities outlined in their work plans. Nunee has called upon assistance from other provincial First Nations mental wellness teams during crises such as attempted suicides and the wildfire evacuation to Fort McMurray.

Mutual Aid Relationship Agreements: As a health organization, Nunee has an influenza pandemic emergency plan and is part of the mutual aid relationship agreements of the Regional Municipality of Wood Buffalo for environmental health emergencies.

Lyle McLeod, CMA CPA MBA

Acting Health Director to October 2023 (Controller)



CURRENT HEALTH DIRECTOR MESSAGE

I joined Nunee Health in October 2023, halfway through the 2023-2024 fiscal year. In these six months, my focus was addressing staff recruitment and retention and outstanding reporting.

Recruitment/Retention: All managers and other vacant positions have been filled. A full staff complement will deliver quality health services and improve the health outcomes in our community. The Human Resources department and Managers' hard work, dedication and unwavering commitment to the organization is commendable.

Outstanding Reporting: Due to the high change-over of the Health Director, Nunee was falling behind in their reporting requirements for Health Canada. Work continues to ensure reporting is caught up and remains current.

Partnerships: The organization continues to develop and enhance the delivery of health and wellness programs and services. Discussions continue to bring more allied health services to Nunee Health, such as X-rays and ultrasounds.

I am proud of what we have accomplished and look forward to sharing the exciting new initiatives the organization has planned for the 2024-2025 fiscal year.

Gloria Fraser
Health Director, BScN, RN



**Nunee Health
Board Society**

**MENTAL
HEALTH,
DRUGS,
ALCOHOL &
ADDICTION**

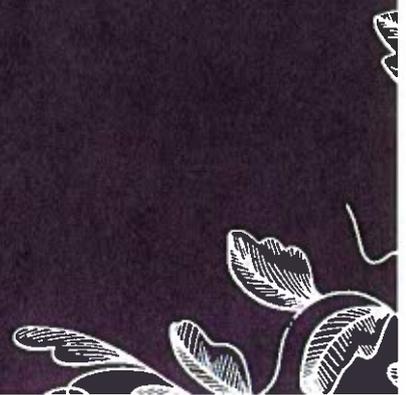


DIABETES

PRIORITIES

YOUTH

CANCER



Core Values

Our Mandate

The Mandate of the Nunee Health Board Society is to represent the health and health related needs of the residents of fort Chipewyan to all levels of government;

Ensuring that all citizens are provided with an equal opportunity to access and maintain the same type, level, and quality of health care and related services as those available to all others Albertans and Canadians.

Core Values

- I – Ingenuity
- Pro** – Professionalism
- C** – Compassion
- C** – Courtesy
- E** – Empowerment
- S** – Safety

Belief Statement

The Mandate of the Nunee Health Board Society is based on the following value statement:

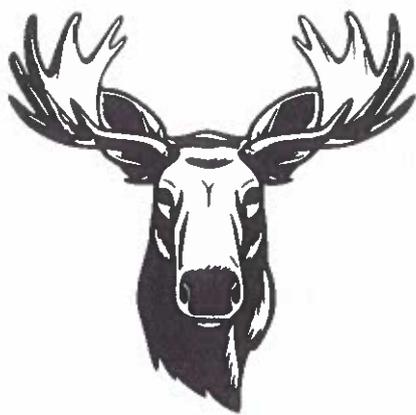
Each individual is a unique being and will have varying needs at different points during his/her life;

Each member of the community is entitled to receive the same type. Level and quality of service irrespective of age, sex, religious beliefs, race, or place of origin or residence;

Each member of the community is entitled to be treated in a manner which respects his/her dignity, culture, language, and personal values and;

Each individuals who are suitable qualified and licensed to provide these services.

HIGHLIGHTS



- On October 10, 2023, Nunee Health Board Society welcomed a new Health Director, who took on the responsibilities of leading our health initiatives.
- Transitioned to a new Electronic Medical Records (EMR) system, ACCURO, enhancing our data management and patient care capabilities.
- In February 2024, we received our new conveyance vehicle, purchased in 2023, improving our outreach and service delivery.
- The pandemic was officially declared over in May 2023, marking a significant milestone for our community's health.
- Residents were evacuated on May 27, 2023, due to a forest fire, and successfully returned one month later.
- On March 31, 2024, two staff members announced her resignation after six impactful years at Nunee.
- A two-year extension for our Community Health Plan was granted, allowing us to continue our commitment to community wellness.
- We welcomed two new Board Members: Pam Gibot, representing Mikisew, and Michelle Voyageur, representing ACFN.
- Cardilla Cardinal joined us as the Métis Board Representative in February 2024, enriching our governance with diverse perspectives.
- We proudly received our Accreditation seal on December 21, 2023, reflecting our adherence to high standards of service delivery.
- We hosted a visit from Indigenous Services Canada (ISC) on February 29, 2024, strengthening our partnership.
- The Good Food Box program launched on March 7, 2024, enhancing food security within our community.

These developments mark significant progress in our efforts to support the health and well-being of our community.



HUMAN RESOURCES DEPARTMENT

The Nunee Health Board Societies Human Resource department is responsible for providing assistance for all Human Resource functions within all departments of Nunee Health.

Lorraine Cardinal has been with Nunee for 18 years. She is the Human Resource Coordinator and works directly with the Health Director and Managers.

As the Human Resource Coordinator, she performs a range of duties supporting the Health Director and Managers. The Human Resources Coordinator administers benefit plans and assists employees with their insurance and health care claims and benefit packages. Other responsibilities include the keeping of accurate up to date and complete records and forms, data entry, file maintenance, assist with payroll, safety, policies, employee training, education, job descriptions recruiting process, hiring, compensation, wages, promotions and assist with disciplinary measures. The Human Resource Coordinator also assists employees with any concerns and issues with payroll, benefits, as well as other employee matters.

During this past 2023 – 2024 fiscal year Nunee has had various positions open such as: Health Director, Health Promotion, Treatment Nurse, Public Health Nurse, Home Care Lead, Administrative Assistants, Admin/Finance Assistant, COHI, IRS Worker, Land Based Cultural Worker, due to staff re-location, leave of absences or turnover.

Nunee has filled most of the vacant positions internally and externally, we hired a Health Promoter, Treatment R.N, Public Health/Homecare Nurse, IRS worker, Admin Assistant, Land Based Cultural Worker and a Health Director. The Health Director started in October 2023 within the six (6) months we have seen great improvements within our organization with staffing and services.

Currently Nunee has a total of 45 employees which includes our permanent and casual employees. The following are the number of employees in each position that we have here at Nunee:

- ❖ 1 Health Director
- ❖ 1 Executive Assistant
- ❖ 1 Finance Coordinator
- ❖ 1 Human Resource Coordinator
- ❖ 3 Administrative Assistants
- ❖ 1 Admin Floater
- ❖ 1 Wellness Coordinator (Contract)
- ❖ 2 Wellness Workers
- ❖ 1 Indian Residential Support Worker (Contract)
- ❖ 1 Based Cultural Worker
- ❖ 1 Elders an Driver
- ❖ 1 Nurse in Charge
- ❖ 2 Treatment Nurses
- ❖ 1 Home Care Lead
- ❖ 1 Home Care Nurse
- ❖ 1 Home Care LPN
- ❖ 2 Health Care Aides
- ❖ 1 Pharmacy Clerk
- ❖ 2 Community Health Representatives
- ❖ 1 Maternal Child Health Worker
- ❖ 2 Medical Transportation Clerks
- ❖ 1 Medical Transportation Driver
- ❖ 1 Filing Clerk
- ❖ 3 Custodians
- ❖ 4 Security
- ❖ 2 Maintenance

NHBS is held together and fully functions because of the employees who work here. We have three departments where our staff work: Administration, Community Wellness and Treatment. Our staff are the heart and soul of Nunee Health, they are dedicated, caring individuals who all work together to ensure that we provide the best services possible to our community. Each department compliments each other and make our vision a daily reality.



PUBLIC HEALTH PROGRAM



There has been a strong focus on updating immunization records for primary, elementary, and junior high school students, as well as for individuals aged 65 and older and those at risk for specific diseases. Significant disruptions in the provision of immunizations over the past four years have primarily been due to the impact of COVID-19. Historically, vaccinations have proven to be one of the most effective methods for preventing illness and disease worldwide. Recent reports of outbreaks of measles, whooping cough, and diphtheria are alarming, as all of these diseases are vaccine-preventable.

Mandatory Programs:

- Vaccine Preventable Disease/Immunizations:
- There has been a primary focus on updating vaccine records for school age children and youth over the last year. As well as updating records for clients 65 years and older to provide routine recommended vaccines for these age groups.
- The following are current stats that will provide a picture of current statistics for routine immunizations, and the justification for focusing on immunization catch up and maintenance. For consideration I want to include the years 2019 to current which could provide a picture of how staffing and covid disruption have affected immunizations.

Primary immunization 0-2 years of age data from CHIP:

GOAL to provide community wide protection 90-95%

- 2023 50%
- 2022 50%
- 2021 23.1%
- 2020 50%
- 2019 55%

Measles specific by age 7 (2023 omitted as they would not receive vaccine until age 1 in 2024)

GOAL to provide community wide protection 90-95%

- 2022 57%
- 2021 46%
- 2020 54%
- 2019 40%

Primary HBV by 1yr (3 doses) GOAL to provide community wide protection 90-95%

- 2023 50% (2 doses to date)
- 2022 57.1%
- 2021 53.8%
- 2020 66.7%
- 2019 60%

Adolescent 12-17 years old Dec 31, 2019 to current *Completed* stats based on recommendations

GOAL to provide community wide protection 90-95%

- dTap 14.9%
- MCACYW 12.4%
- MMR 13.9%
- VZ 76.7%
- HBV (2 dose) 34.4% (used to be 3 dose series)
- HPV (2 dose) 54.8%
-

Client GOAL recommended at 80%

- Pneumo23 47.6%
- dTap 51.94% (protection for whooping cough)

Covid immunizations and boosters:

A new booster was rolled out on October 16 to provide coverage for the current circulating variant XBB.1.5, the vaccine is available to those 6 months and older. Emails were sent to organizations offering visit to their offices no response to same; however, individuals did present on their own. Signs have been posted throughout the community indicating flu and covid vaccines were available and the electronic board also has a notice.

To date 94 doses have been given. Here's a breakdown by age:

0-9yr	-	5
10-19	-	0
20-39	-	12
40-59	-	18
60-80+	-	59



Annual Influenza Immunizations

The annual flu vaccine was rolled out late September for HCW and a general roll out occurred on October 16th along with the covid booster. As noted above information on the vaccine and available was sent via communication through email, posters and on the electronic board. We continue to encourage everyone come in for their flu vaccine as flu cases do increase going into December, January and February.

To date 72 doses of the standard flu have been given and 61 doses of the high dose flu for those over 65 have been given.

Several home visits have been made with home care nurses to ensure clients have been offered annual flu and covid boosters this season. An updated list of clients/ community members 65+ was also shared with home care staff to support their assessments.

RSV is a growing concern and currently the vaccine is not publicly funded and only available for purchase through pharmacies.

Shingrix is currently available by prescription for NIHB covered clients 60+ Currently we do not have an effective way to ensure our community members have access via this prescription process, this is currently being addressed with hopefully some resolution.



Sexually Transmitted and Blood-Borne Infections and Tuberculosis

Syphilis is on the rise throughout Canada, to date at last conversation with clinical a few weeks ago no one in Fort Chip has been diagnosed. Information was submitted in one of the newsletters in the past providing information about syphilis. Two staff members participated in a workshop in Fort McMurray, where they received training in rapid testing for STIs. They returned with several kits for use in clinical settings.

A few Mantoux tests have been done over the last year, one person completed the DOT treatment over months, no positives in the last months. Questions are asked during the clinics regarding TB screening. Currently there is no apparent risk within the community.

Aboriginal Diabetes Initiation

To date the position is currently empty.

Environmental Health Officer

The Environmental Health Officer was incredibly open to the food certificate training in the community, however fire risks pretty much put that to rest. Hopes of the program to restart in the near future. The EHO will require minimum ten people initiate a class.







PUBLIC HEALTH COMMUNITY HEALTH REPRESENTATIVE

The Community Health Representative (CHR) program includes routine weekly water testing in accordance with program guidelines. The CHR has recently finished the long-awaited training for this testing and has also begun conducting chemical water tests, which go beyond the typical scope of public health. Concerns have been raised about the time commitment required for these tasks, with some emails expressing resistance to having the CHR manage them. It has been suggested that a dedicated position for testing be established, as the entire procedure generally takes 2 to 3 days to complete. In addition to water testing, the CHR has actively engaged in Maternal and Child Health (MCH) initiatives and is responsible for obtaining consent forms for school immunizations. The CHR has successfully completed several online training courses, each resulting in a certificate, including:

- WHMIS 2015 Certificate
- Transport of Dangerous Goods
- First Aid, CPR, and AED
- Community-Based Water Monitor Training



Water samples are collected from designated reserves within the community every Monday. This process includes gathering sampling bottles, conducting free and total analyses using a testing machine, and faxing the results for interpretation. The samples are then sent to the laboratory via the morning flight for comprehensive testing.

On Wednesdays and Thursdays, additional water samples—typically around 30 bottles from six different locations—are collected. Each bottle is labeled before collection, and after sampling, the bottles are packed and ready for dispatch on the plane.

The CHR is also dedicated to obtaining immunization consent forms by visiting families with children who are due for school immunizations, and has helped ensure that local high school students are up to date on their vaccinations.

In addition, visits to the Elders Home have taken place to assist with administering COVID-19 and flu vaccinations to elderly residents. Regular support is provided for gatherings of mothers and toddlers in the clinic's boardroom. Special events, such as a Halloween gathering, included crafts, painting, and snacks that the children greatly enjoyed.

The CHR attended a conference with other staff members, which proved to be a valuable learning experience. Efforts are currently underway to engage the community and secure parental consent forms for children's immunizations, with a strong emphasis on completing this important task.

MATERNAL CHILD HEALTH

Over the past year, numerous initiatives were undertaken to support the community and improve program operations. Key responsibilities included assisting at the front desk and pharmacy to address staffing shortages, organizing events for families, and managing logistics for essential baby supplies for the program.

Notable highlights included holiday-themed celebrations for Valentine's Day, St. Patrick's Day, Easter, and Mother's Day, which engaged numerous families and provided opportunities for children to partake in activities such as crafts and decorating. Additionally, plans were made for a baby food-making class, with arrangements in place to secure a suitable venue for the event.

In terms of community outreach, efforts were focused on connecting with local mothers to inform them about new programs like Roots and Berries and to establish partnerships with organizations such as "Aunties Within Reach," which supports expecting and new mothers.

Professional development was prioritized throughout the year, with completed First Aid training and participation in pharmacy training programs. A new vehicle was also acquired for the MCH program, enhancing the capacity for service delivery.

Despite facing personal challenges, including medical leave and a family bereavement, the focus remained on building connections within the community and ensuring the ongoing success of the programs offered.

Overall, the year was characterized by progress in service delivery, community engagement, and personal growth through training and development opportunities.



Drinking Water Safety Program Progress

Monitoring of drinking water quality is essential to protect the health of your community members. Environmental Public Health Services (EPHS) works with First Nation communities to ensure public and semi-public water supplies are monitored on a scheduled basis for microbiological and chemical parameters.

Public and Semi-Public Water System Microbiological Sampling Testing:

To properly monitor the drinking water quality in your community, the Community Based Water Monitors (CBWMs) are required to sample and test water from each of the identified locations according to the attached sampling schedule. These sampling locations have been identified in consultation with the community based on the design of the water system infrastructure information (where available).

EPHS is committed to assisting communities in sending water samples to accredited laboratories (Prov ab). Due to sample transportation issues, there are a small number of communities that use the Tecta PSD (Pathogen Detection System), and are required to send duplicate quality control samples to the Prov ab on a monthly basis.

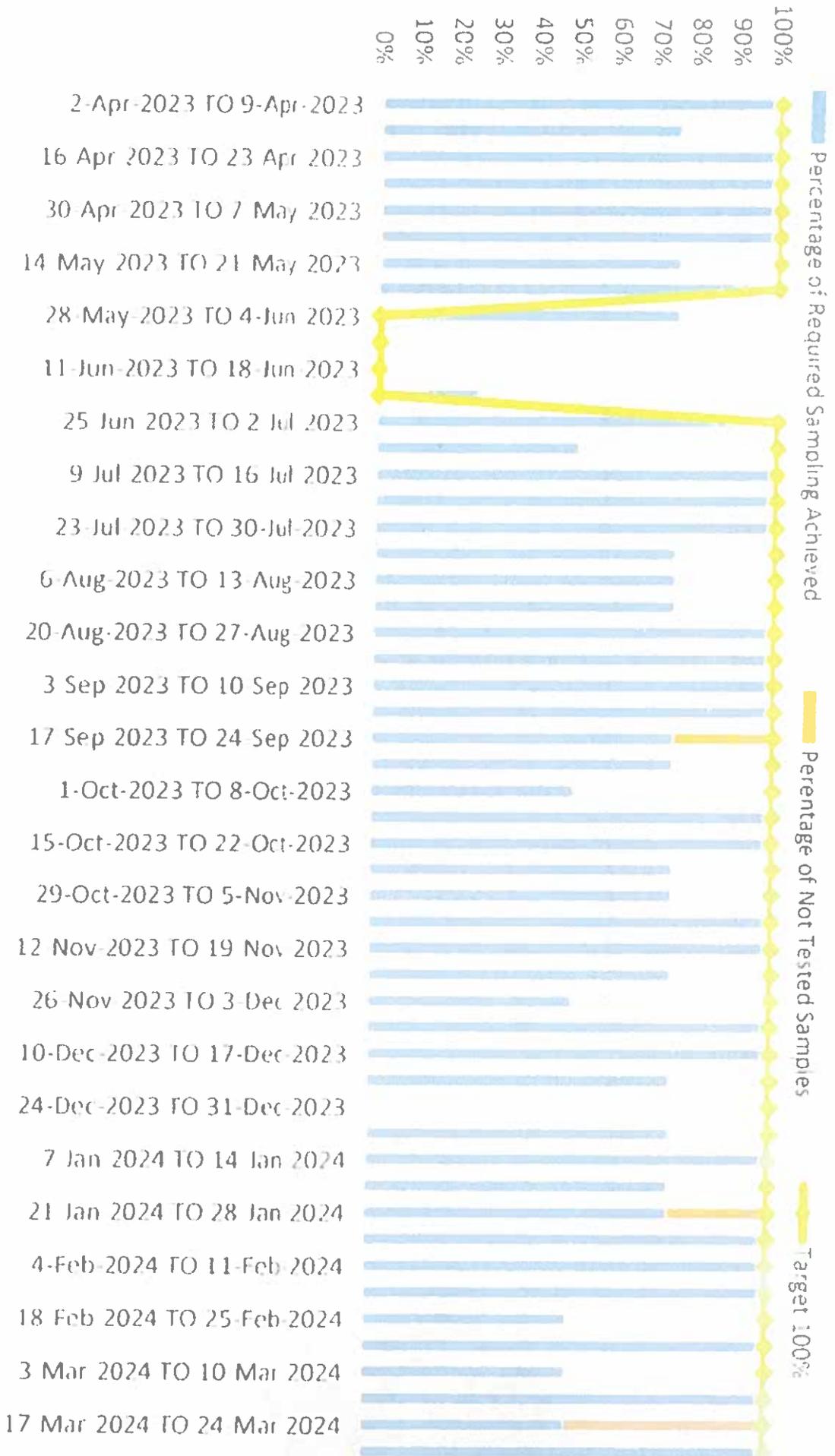
Results from the water reports received by our office are compiled in the Environmental Public Health water data base. The water sampling data is then reported on a weekly basis to align with the attached sampling schedule.

(A) Routine Sampling and Testing Public and Semi-Public Water Systems.

The graph below illustrates the overall sampling goal, the percentage of routine weekly sampling achieved, and any samples that were not test by the lab. This progress report is intended to provide feedback on progress and identify areas of improvement. For this reporting period, your community achieved 4 sampling compliance.



Routine Water Testing, April 2023 to April 2024:



Nutrition Education Initiative Annual Report Fiscal Year 2022 – 2023

Community Based Activities Provided:

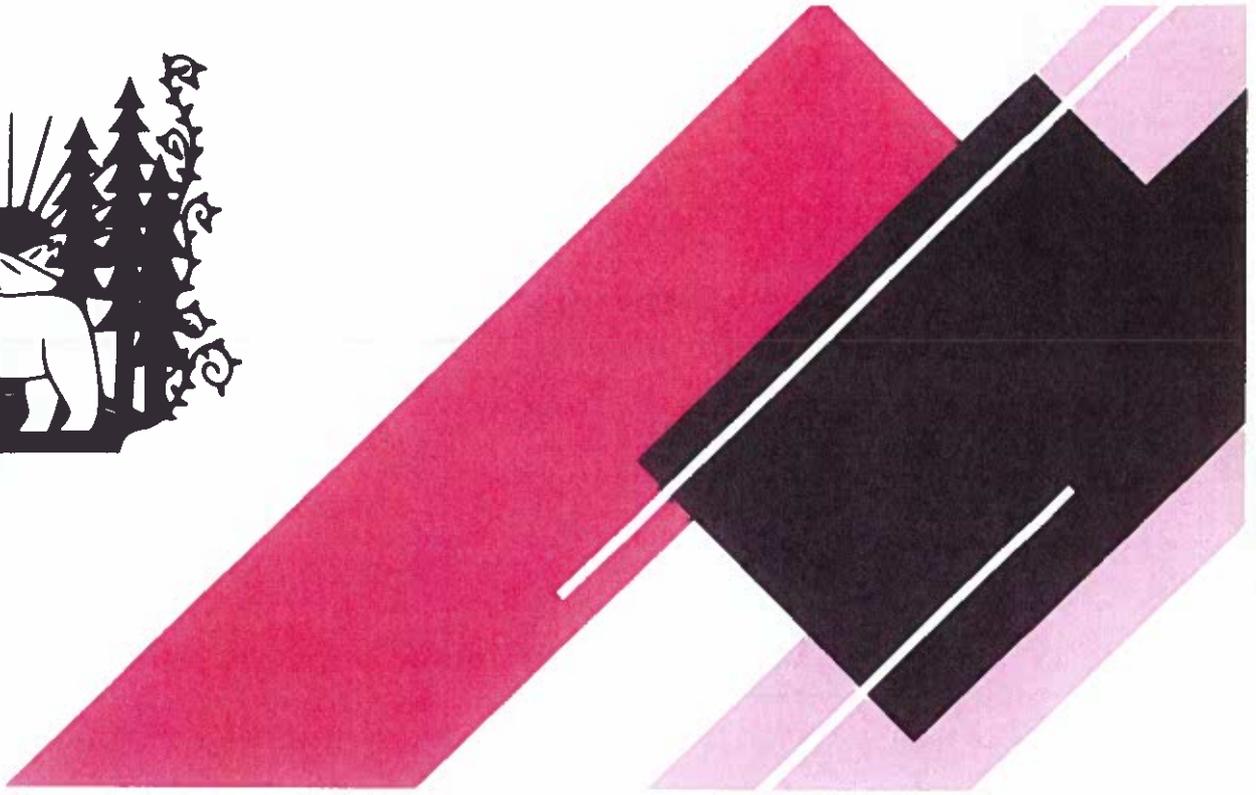
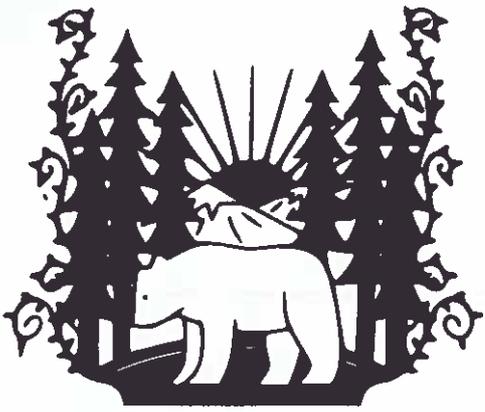
Type	# of Time Per Year	Details and Attendees
Cooking Classes	6	12 Participants
Good Food Boxes	1	84 Boxes 320 Participants
Hunting or Fishing Activities	4	60 Participants
Nutrition Presentations	1	85 Participants
Games/Challenges	2	10 Participants
Healthy Snacks or Meals in School, Prescehool or Daycare	Breakfast Club Daily	XX
Healthy Snacks or Meals for Elders or Adults	4	XX
Community Feasts	3	XX
Social Media Nutrition Posts	12 Newsletters	XX
Displaying Nutritional Informmation (Ex:Posters)	8	XX



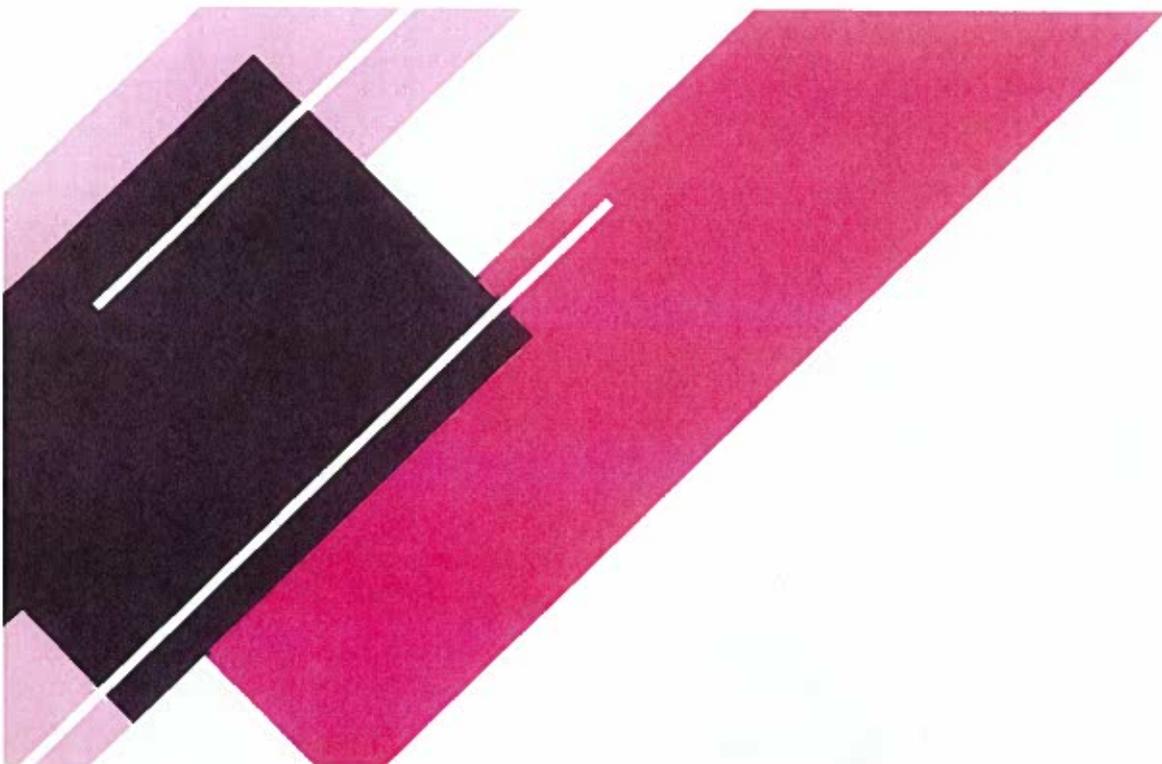
Types or Participants:

Gender	Age	# of Participants
Male	0 - 11	35
	12 - 17	35
	18 - 49	200
	50 plus	100
Female	0 - 11	40
	12 - 17	40
	18 - 49	300
	50 plus	100
Another Gender	0 - 11	-
	12 - 17	-
	18 - 49	-
	50 plus	-





TREATMENT



Dr. Renate Smith as our newest physician.

Starting in the new year, Debbie Sandberg will transition to a recurring rotation with Nunee Health.

Two registered nurses will begin their rotational roles as Registered Nurses (RNs) in January.

Amy Fraser has completed training to serve as a backup for Amanda in the pharmacy department.

Iris Whiteknife is now trained to assist Bernadette in the transportation role

EMR Implementation & Data Transfer:

- **The transition to the new Electronic Medical Record (EMR) system is in progress.**
- **Plans are in place for the decommissioning of Wolf by mid-February 2024.**
- **Staff training occurred in the first two weeks of February, leading up to a Go-Live date in mid-February.**

COVID-19 Protocols:

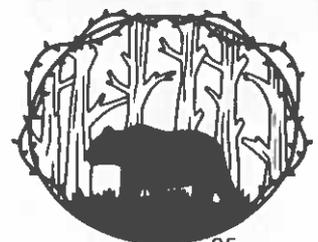
- **In response to a resurgence of COVID-19 in the community, masking requirements for direct patient contact have been reinstated at Nunee.**
- **Staff members are actively conducting tests and providing residents with guidance on management and self-care.**

Palliative Care Program:

- **Ongoing development includes a partnership with MCFN for bed space and connections with a palliative care physician based in Edmonton.**
- **An extension has been received to address funding delays caused by leadership transitions and wildfire evacuations.**

VODP (Virtual Opioid Dependency Program):

- **The program has initiated OAT (opioid antagonist therapy) for community residents using Suboxone and Sublocade.**
- **This includes individuals withdrawing from opioids in RCMP cells who express interest in treatment.**



Dental

	Fluoride Consents Offered	Fluoride Consents Returned	Oral Assessment Completed	Observed Decay	Fluoride Varnish
Kindergarten	9	4	3		3
Grade 1	17	7	5	2	5
Grade 2	16	5	5	2	5

During the visit to the school, staff members visited all classrooms to help alleviate dental anxiety and improve future consent returns. The purpose of the visit, causes of tooth decay, and the importance of effective daily oral care were discussed. Efforts were made to reassure students and address any questions they had regarding school visits, oral health, or fluoride varnish. It is hoped that these efforts will lead to an improved consent return rate in the future.

An evaluation of the clinic for dental sealants was conducted as planned. However, there was some confusion regarding the distribution of dental sealant consent forms, which were not sent home. As a result, dental sealant assessments could not be completed, and this will need to be revisited next year. Next time, it may also be possible to obtain consent for all services for students from kindergarten to grade 6.

Additionally, a visit to the daycare was made to connect with the director and discuss plans for a future visit that would include oral health education, fluoride varnish application, and oral health assessments.

Joanne Baxter
 Registered Dental Hygienist
 Oral Health
 Alberta Health Services
Joanne.Baxter@albertahealthservices.ca



**TAMARAK PHYSICAL THERAPY
107- 9616 FRANKLIN AVE.
FORT MCMURRY, AB.
T9K 2R3
(780)- 743-3267
FAX: (780)-743-3636**

PHYSIOTHERAPY SERVICES TO FORT CHIPEWYAN

SCOPE OF WORK:

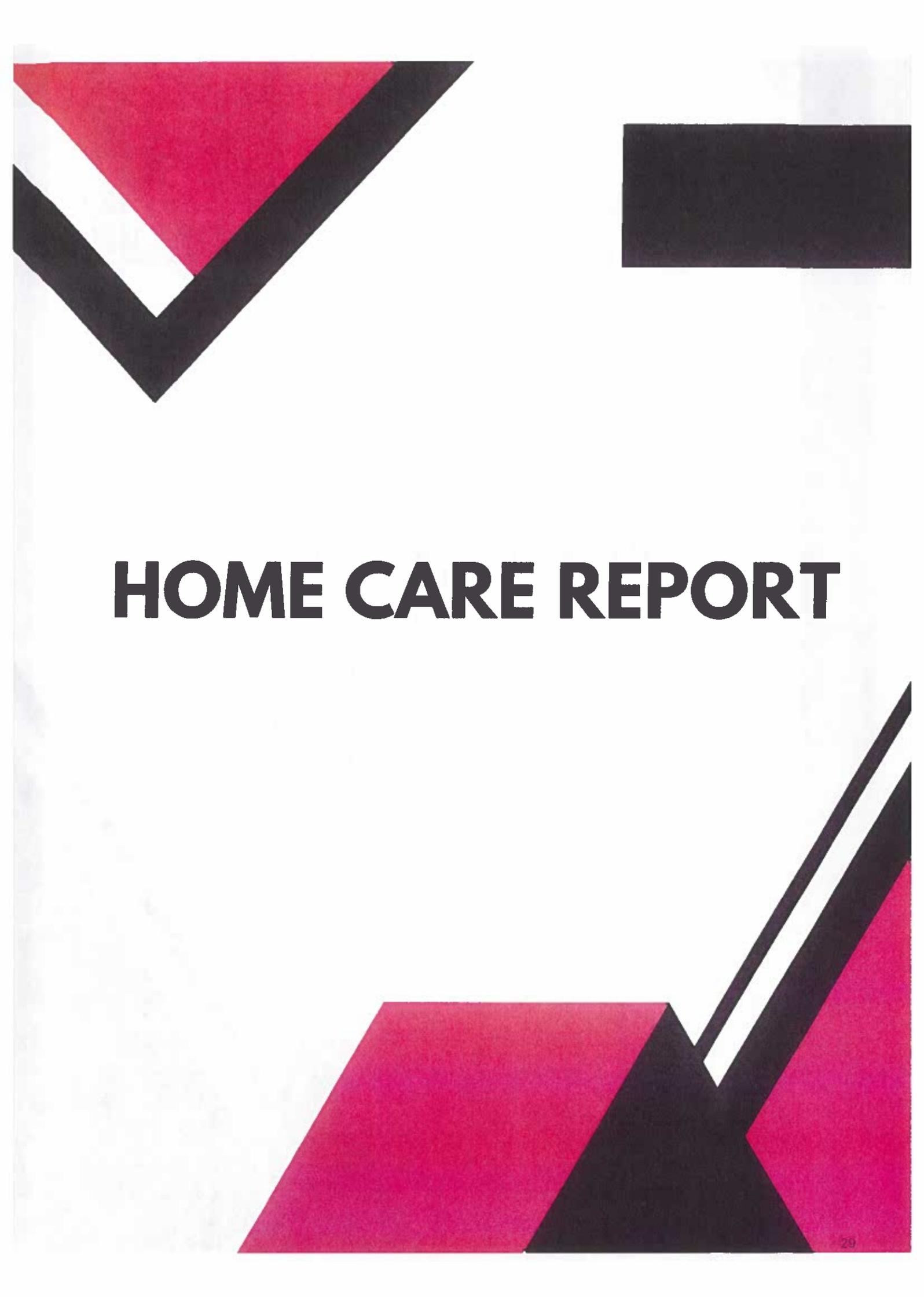
PROVISION OF PHYSICAL THERAPY SERVICES

TOTAL NUMBER OF CLIENTS SEEN: MALE 226 - FEMALE 64



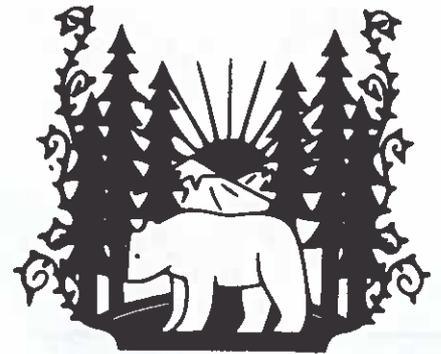
DECORATE YOUR DOOR



The page features a minimalist, abstract design. In the top-left corner, there is a large inverted triangle with a red upper section, a white lower section, and a black border. In the top-right corner, there is a solid black horizontal rectangle. The bottom-right corner is dominated by a complex geometric shape composed of several overlapping triangles in red, black, and white. The central text is bold and black, set against a plain white background.

HOME CARE REPORT

DEPARTMENT SUMMARY



TOTAL HOME CARE CLIENT	52
HOSPITAL	1
RESPITE	1
OUT OF COMMUNITY	3
DISCHARGED	1
CURRENT HOME CARE CLIENTS IN COMMUNITY	46
STAFF TOTAL	5
REGISTERED NURSES	2
HCA	2
LPN	1



ANNIVERSARY

OUR MISSION
The purpose of the Social Security Administration is to provide a secure and dignified retirement and disability income for all Americans who have contributed to the Social Security program.



POLICY STATEMENT
The Social Security Administration is committed to providing a secure and dignified retirement and disability income for all Americans who have contributed to the Social Security program.

OUR VALUES
Integrity
Customer Service
Efficiency
Accessibility
Transparency

OUR VISION
A secure and dignified retirement and disability income for all Americans who have contributed to the Social Security program.





Wellness

Department Summary

Administration and Coordination Activities:

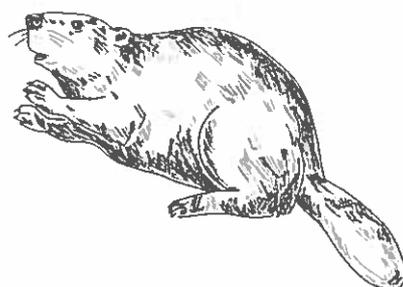
- Regular communication with staff has been maintained through various channels including phone, text, and in-person visits.
- Coordination for the scheduling and onboarding of new mental health therapists was conducted, including meetings with two potential candidates.
- Participation in virtual meetings with provincial crisis response teams and the ISC representative to discuss 2024 funding and service provision.
- Engagement in State of Emergency (SOLE) meetings and enrollment in the First Nation Health Manager Training Course occurred weekly.
- Involvement in the ACFN Think Tank event focused on mental health and addictions.

Program Activities and Events: Life Skills Program:

- Weekly Wellbriety sessions and AA meetings were held.
- An "Understanding Anger" program consisting of four sessions was offered to community members.
- Weekly programming targeted adults with special needs.

Crisis Response Team:

- Awaiting retreat notes and next steps from the MWCRT.
- Ongoing collaboration with Alberta's MWCRT for training and strategic development.



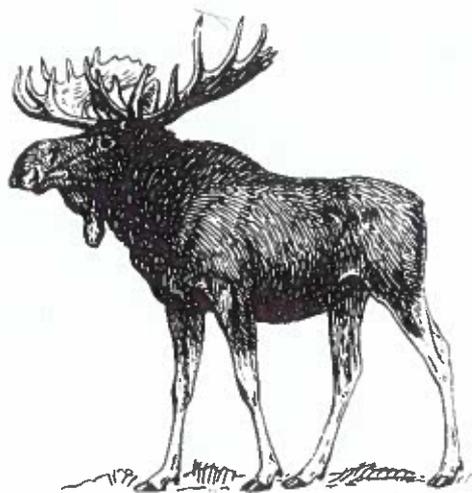


Events and Training:

Scheduled events include the MMIWG Community Awareness Walk, Mental Health Week activities (yoga workshop, medicine bag making, Mental Health Fair, and self-care night), and a Mother's Day drive-through lunch in partnership with Paspew. Cultural events with the ADCS-My Path program are also planned.

Conclusion:

This year, significant strides have been made in fostering community engagement through mental health awareness, training, and skill development. Continued efforts in coordination and collaboration underscore our commitment to improving mental health services and community well-being.





Annual Report Summary: Medical Transportation Program



The medical transportation program aims to facilitate access to healthcare services for users, particularly for those in Fort Chip. The program offers essential transportation support to medical appointments, which is crucial given the challenges posed by geographical barriers and limited transportation options.

Transportation Resources

One full-time driver dedicated to the program.
Two additional drivers utilized on a casual basis as needed.

Vehicles:

Two vans:

One regular van with nine seats.

One handicap-accessible van equipped to accommodate seven wheelchair-bound passengers.

Airline Partnerships:

Two airlines utilized for patient transport:

Fort McMurray Aviation.

Northwestern Air.



Medical Clerks Training: A full-time medical clerk was trained and operational by August 2023, enhancing administrative support for the program.

Improved Data Entry: The MTRS (Medical Transportation Resource System) program has led to improved accuracy and efficiency in data entries, facilitating better resource management.

Operational Challenges

Airline Availability: Reliable flight options remain a significant challenge, impacting timely access to medical appointments for clients.

Clients often require multiple escorts due to mobility issues, complicating transport arrangements.

Long wait times experienced on the phone for referrals to Edmonton can delay necessary treatments.

Timely approval of flight vouchers is lacking, causing further scheduling issues for clients.



Training Needs:

There is a pressing need for additional trained MTRS clerks; three full-time clerks are required to maintain program efficiency and meet increasing demand.

Future medical transportation workshops are essential to enhance staff training and adaptation to new procedures.

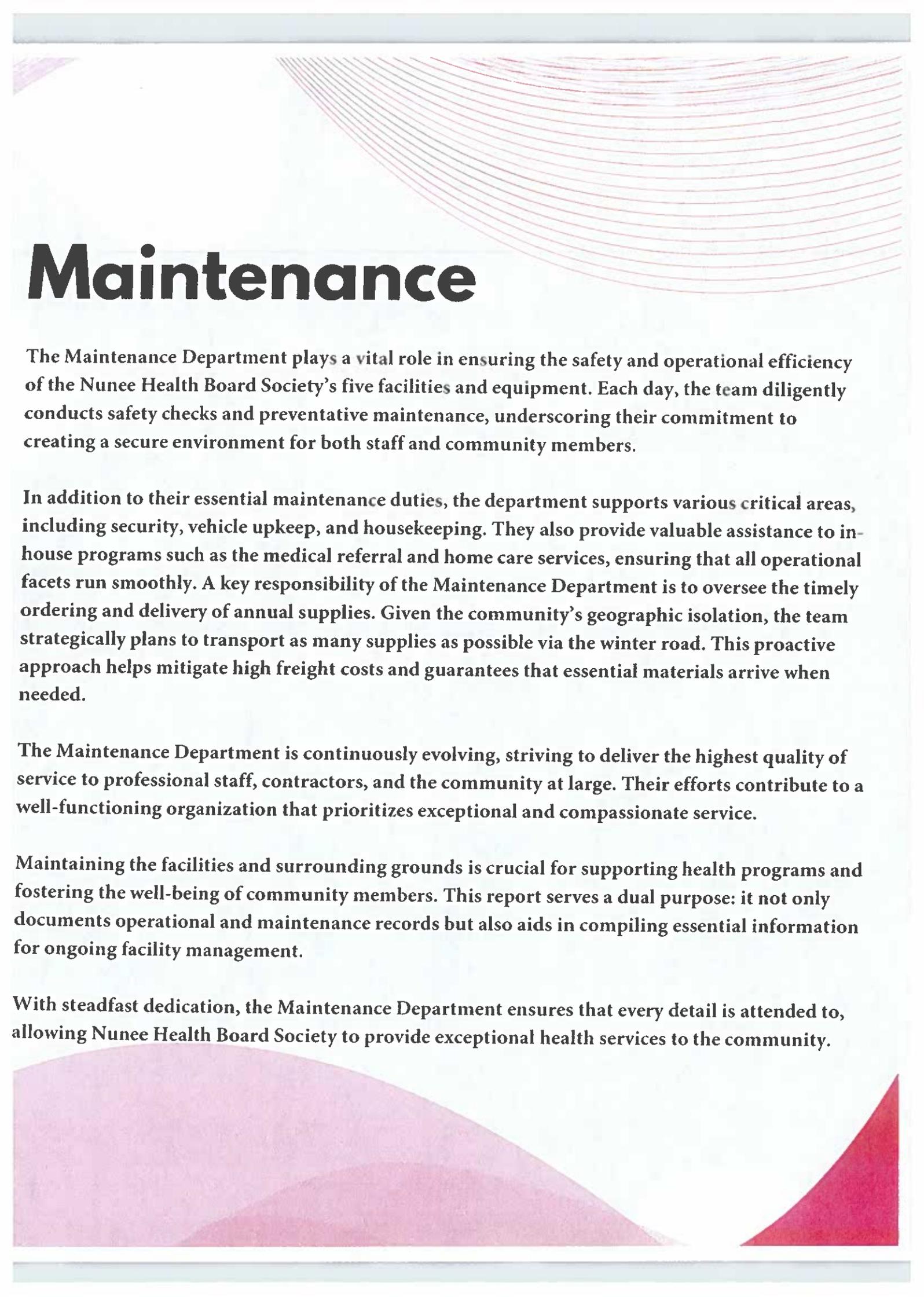
The medical transportation program at Fort Chip has demonstrated its responsiveness to community needs through its accomplishments. However, significant challenges remain, particularly regarding airline reliability, training requirements, and resource management. Addressing these issues will be critical as demand for services continues to grow.

Distinct Appointments and Vouchers Summary (April - August 2023) Had a total of 782 appointments (Cancelled, Pending, Rescheduled)

Total Vouchers Summary (April - August 2023)

Total	Type
Flight Vouchers	1266
Personal Vehicle Vouchers	51
Medi Van Vouchers	339





Maintenance

The Maintenance Department plays a vital role in ensuring the safety and operational efficiency of the Nunee Health Board Society's five facilities and equipment. Each day, the team diligently conducts safety checks and preventative maintenance, underscoring their commitment to creating a secure environment for both staff and community members.

In addition to their essential maintenance duties, the department supports various critical areas, including security, vehicle upkeep, and housekeeping. They also provide valuable assistance to in-house programs such as the medical referral and home care services, ensuring that all operational facets run smoothly. A key responsibility of the Maintenance Department is to oversee the timely ordering and delivery of annual supplies. Given the community's geographic isolation, the team strategically plans to transport as many supplies as possible via the winter road. This proactive approach helps mitigate high freight costs and guarantees that essential materials arrive when needed.

The Maintenance Department is continuously evolving, striving to deliver the highest quality of service to professional staff, contractors, and the community at large. Their efforts contribute to a well-functioning organization that prioritizes exceptional and compassionate service.

Maintaining the facilities and surrounding grounds is crucial for supporting health programs and fostering the well-being of community members. This report serves a dual purpose: it not only documents operational and maintenance records but also aids in compiling essential information for ongoing facility management.

With steadfast dedication, the Maintenance Department ensures that every detail is attended to, allowing Nunee Health Board Society to provide exceptional health services to the community.

CORPORATE RESPONSIBILITY

NUNEE HEALTH BOARD SOCIETY GIVES DONATIONS TO COMMUNITY MEMBERS, EVENTS OR CELEBRATIONS THAT ARE HAPPENING WITHIN THE COMMUNITY IN ACCORDANCE WITH THE DONATION POLICY

\$29,747.96 WAS DONATED TO COMMUNITY EVENTS APRIL 2023-MARCH 2024. NUNEE GIVES OUR YOUTH THE CHANCE TO EXPERIENCE NEW OPPORTUNITIES THAT WILL DEVELOP OR INTEREST THEM IN PHYSICAL, EMOTIONAL AND SPIRITUAL AREAS OF THEIR LIFE. NUNEE HEALTH BOARD SOCIETY SUPPORTS THE HEALTH AND WELLBEING OF OUR COMMUNITY MEMBERS



Financial Statements



Nunee Health Board Society
Financial Statements
March 31, 2024

Management's Responsibility

To the Members of Nunee Health Board Society:

The accompanying financial statements of Nunee Health Board Society are the responsibility of management and have been approved by the Board of Directors.

Management is responsible for the preparation and presentation of the accompanying financial statements, including responsibility for significant accounting judgments and estimates in accordance with Canadian public sector accounting standards. This responsibility includes selecting appropriate accounting principles and methods, and making decisions affecting the measurement of transactions in which objective judgment is required.

In discharging its responsibilities for the integrity and fairness of the financial statements, management designs and maintains the necessary accounting systems and related internal controls to provide reasonable assurance that transactions are authorized, assets are safeguarded and financial records are properly maintained to provide reliable information for the preparation of financial statements.

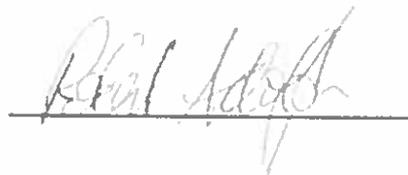
The Board of Directors is composed entirely of Directors who are neither management nor employees of the Society. The Board is responsible for overseeing management in the performance of its financial reporting responsibilities, and for approving the financial information included in the annual report. The Board fulfils these responsibilities by reviewing the financial information prepared by management and discussing relevant matters with management and external auditors. The Board is also responsible for recommending the appointment of the Society's external auditors.

MNP LLP is appointed by the Members to audit the financial statements and report directly to them; their report follows. The external auditors have full and free access to, and meet periodically and separately with, both the Council and management to discuss their audit findings.

October 9, 2024



Health Director



Chief Financial
Officer

Nunee Health Board Society
Statement of Financial Position

As at March 31, 2024

	2024	2023
Financial assets		
Cash and cash equivalents	4,078,702	5,717,200
Accounts receivable	369,276	2,511
Goods and Services Tax receivable	123,870	62,646
Portfolio investments (Note 3)	1,837,361	1,740,439
Total of assets	6,409,209	7,522,796
Liabilities		
Accounts payable and accruals	395,143	471,365
Deferred contributions (Note 5)	4,315,272	3,945,994
Indigenous Services Canada revenue repayable (Note 6)	246,201	240,470
Total of financial liabilities	4,956,616	4,657,829
Net financial assets	1,452,593	2,864,967
Contingencies (Note 8)		
Commitments (Note 9)		
Non-financial assets		
Tangible capital assets (Schedule 1)	13,341,213	13,473,434
Inventory (Note 7)	270,428	323,883
Prepaid expenses	61,578	-
Total non-financial assets	13,673,219	13,797,317
Accumulated surplus	15,125,812	16,662,284
Accumulated surplus is comprised of:		
Surplus	14,671,254	16,206,307
Accumulated remeasurement gains	454,558	455,977
	15,125,812	16,662,284

Approved on behalf of the Board of Directors


 _____ Director


 _____ Director

Nunee Health Board Society
Statement of Operations and Accumulated Surplus
For the year ended March 31, 2024

	Schedules	2024	2023
Revenue			
Indigenous Services Canada			
Funding received		7,322,733	7,777,235
Funding repayable		(5,730)	(33,178)
MAR funding		-	55,300
Prior year funding		-	162,572
Prior year deferred revenue recognized		3,467,871	3,595,563
Revenue deferred		(3,862,245)	(3,467,871)
Government of Alberta			
Prior year deferred revenue recognized		478,123	-
Funding received from Alberta Government		-	478,123
Revenue deferred from Alberta Government		(453,027)	(478,123)
Other income		19,541	23,814
Investment income		286,137	170,027
Total Revenue		7,253,403	8,283,462
Program expenses			
Administration	4	480,482	473,523
Capital Fund	5	567,990	526,959
Health Infrastructure	7	1,263,448	1,354,122
Health Promotion and Disease Prevention	8	4,797,391	4,279,824
Primary Care	9	1,102,576	1,071,753
Public Health Protection	10	99,856	38,615
Supplementary Health Benefits	11	525,781	522,370
Total expenditures		8,837,524	8,267,166
Surplus (deficit) before other items		(1,584,121)	16,296
Gain on investments		49,068	7
Surplus (deficit)		(1,535,053)	16,303
Accumulated surplus, beginning of year		16,206,307	16,190,004
Accumulated surplus, end of year		14,671,254	16,206,307

The accompanying notes are an integral part of these financial statements

Nunee Health Board Society
Statement of Remeasurement Gains and Losses
For the year ended March 31, 2024

	2024	2023
Accumulated remeasurement gains, beginning of year	455,977	603,946
Unrealized gains (losses) attributable to:		
Portfolio investments	47,649	(147,962)
Amounts reclassified to the statement of operations:		
Portfolio investments	(49,068)	(7)
Change in remeasurement losses, for the year	(1,419)	(147,969)
Accumulated remeasurement gains, end of year	454,558	455,977

The accompanying notes are an integral part of these financial statements

