



## President's Report

By Frank Quennell, Board President



Frank Quennell

As many members of the Community Health Services (Saskatoon) Association Ltd. (CHSA) are aware, the Saskatoon Community Clinic (SCC) was founded during the 1962 Saskatchewan doctors' strike. Physicians were initially opposed to the establishment of Medicare, North America's first universal health insurance program that would be adopted nationally a few years later.

The founders established the clinic to provide medical services to the people of Saskatoon during the strike and to demonstrate how salaried doctors could deliver these services, as was originally intended when the provincial government introduced the program.

As we know, SCC continued operating even after the strike ended and carried on as a member-owned and controlled co-operative, providing a multi-disciplinary set of health-care services. It continues as a health-care co-operative today, providing care through a team of salaried health-care professionals including physicians, nurse practitioners and many others to this day.

In 1975, true to the vision of its founders that SCC should lead by example in providing equitable health care to ensure our universal health insurance program would be truly universal, the co-operative established Westside Community Clinic on 20th Street West to serve the people of Saskatoon's core communities. For almost 50 years, SCC's Westside location has provided safe, welcoming health care "when the patient is ready to receive it" to those who otherwise could not expect to receive that quality of care.

As the crisis of homelessness deepens in Saskatoon and some of the effects of that crisis are on display, especially in Saskatoon's core neighbourhoods, the reaction of some is to retreat from the challenges. Notably, as I have previously reported, the College of Dentistry abandoned

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its dental clinic at Westside. However, it is the intention of the current board of the SCC to take every opportunity to expand the provision of health-care services in Saskatoon's core.

It is largely through services at Westside that the SCC demonstrated leadership during the HIV epidemic, which was met with complacency and inaction elsewhere in the health-care system. Repeatedly, it is the SCC that has demonstrated leadership and commitment to providing equitable health care to those who might otherwise be less well-treated or less cared for. Refugee health-care services, gender-affirming care and reproductive health are important examples of that leadership and commitment.

The SCC is an established institution in our city but not necessarily a secure one. Personally, I do not believe the threat to our clinic comes from political antagonism. Rather, it comes more from a bureaucratic failure to appreciate that the SCC delivers health care differently and that some measures that apply to the larger system do not properly measure what the clinic delivers and accomplishes.

Today, recent changes in the model of compensation for doctors, which may well be positive overall, threatens the ability of the SCC to attract and retain doctors.

The membership of the co-operative has always supported advocacy for policies and action which would improve the health of Saskatchewan people in the broadest sense. Now I believe we must focus our advocacy on behalf of the SCC for policies that will allow the clinic to continue to provide leadership in equitable delivery of health care in our city and province well into the future.

As we prepare to head into the new year, the board is finalizing its strategic plan to inform the SCC's work for the next three to five years. More than 203 members, patients and staff provided valuable input into the plan via

*Continued on page 2...*

in-person and telephone interviews and online and paper surveys. We believe we have set a strategic direction that will support the SCC's ability to continue to be a leader in

the equitable delivery of health care and look forward to members reviewing the plan at the upcoming CHSA Semi-Annual Meeting in January.

## A t-shirt to start a conversation

By Danielle Chartier, Member and Public Relations Director

In recognition of National Day for Truth and Reconciliation, all staff at the Saskatoon Community Clinic (SCC) were gifted the clinic's custom-designed orange shirt in September.

"As part of our commitment to reconciliation, we encourage staff to wear an orange shirt at work to acknowledge the experience of those who went to residential schools and to honour them," explains SCC Executive Director Lisa Clatney.

"We have found not everyone has their own orange shirt, creating a barrier for them to show their support in this small way to residential school survivors. We also felt it was important for us to reflect on what our own orange shirt might look like and how this could help spread truth. We didn't want this to be 'just an orange shirt,'" says Clatney.

SCC's Truth and Reconciliation Committee spent several months working with Indigenous artist Azby Whitecalf to design a shirt that represents the values of the clinic and why National Day for Truth and Reconciliation is so important to SCC.

One word that emerged from the committee's conversations about this day and what committee members wanted represented on this shirt was "Finally"— finally people who experienced Canada's residential schools are speaking of what most kept hidden for so long, the terrible truths of these schools.

The shirt has already helped start conversations amongst staff and with patients/clients.

### The elements of the design, explained

#### Shape

The committee wanted a circular design to evoke the idea of finally getting to share these stories, bringing to mind Sharing Circles and Healing Circles. The circle is of significance to many Indigenous cultures, a sacred symbol of the interdependence of all forms of life. The circle is a key symbol of spirituality, of family structure, gatherings of people, meetings, songs and dances. For example, Dances take place in a circle, Drums are round, Sweat Lodges are round, Tipis are round and the Medicine Wheel is round.



#### Sweetgrass Braid

As a health-care co-operative that strives to blend western and Indigenous medicine, it was important to the committee to include at least one of the Four Sacred Medicines in the design. We chose a braid of Sweetgrass. Sweetgrass is used for smudging and purification and symbolizes healing and peace. It represents the connection of humans to earth and sky and is used in many ceremonies and prayers to attract good energy and spirits.



#### Hands and People

The inner part of the design is a set of hands that merge into three people. These hands symbolize the care and support we provide and our efforts to meet people where they are and lift them up together. The people represent the community we serve and the child represents all those children who went to residential schools, including those who did not come home and those who have had to live with the legacy of the schools.

If you would like to learn more about the artist with whom we worked, here's more about them:

<https://www.azbywhitecalf.com/about-wapimostosis>.

The clinic was also proud to use the local Indigenous-owned printing company XUSI Clothing and Screen-printing.



*Saskatoon  
Community  
Clinic*

Community Health Services (Saskatoon) Association Ltd.

# 2025 SEMI-ANNUAL MEETING

**Virtually over Zoom  
Thursday, January 23  
6:30 p.m. until 9:30 p.m.**

Register online:



## **REGISTRATION**

Advance registration required by **Monday, January 13 at 5 p.m.** to ensure you are registered to vote electronically.

To register, email [agm@communityclinic.ca](mailto:agm@communityclinic.ca), phone **306-664-4265** or visit our website at [www.saskatooncommunityclinic.ca/2025-sam/](http://www.saskatooncommunityclinic.ca/2025-sam/) or scan the QR code.

## **RESOLUTIONS**

Submission of resolutions accepted until **Monday, January 13 at 5 p.m.** Email [agm@communityclinic.ca](mailto:agm@communityclinic.ca).

# A co-op near you: Planet S and Prairie Dog

By Danielle Chartier, Member and Public Relations Director



Stephen Whitworth

*“Don’t it always seem to go, that you don’t know what you’ve got ’til it’s gone.” —Joni Mitchell*

Stephen Whitworth, the editor of Saskatoon’s Planet S and its Regina sister paper, Prairie Dog, doesn’t want Mitchell’s scenario to come true for his readers. But after taking “hit after hit” for more than a decade, he says the future of Hullabaloo Publishing Workers Co-op — the Saskatchewan co-operative behind the two long-running alternative news publications — is uncertain at best.

“I don’t know if we’re at the end now or if we’ll be able to pull it out of the fire, but we’re trying!” says Whitworth.

Focus readers are likely familiar with the two newspapers-turned-digital entities. Prairie Dog came first, launching on Groundhog Day in 1993. Planet S followed in 2002.

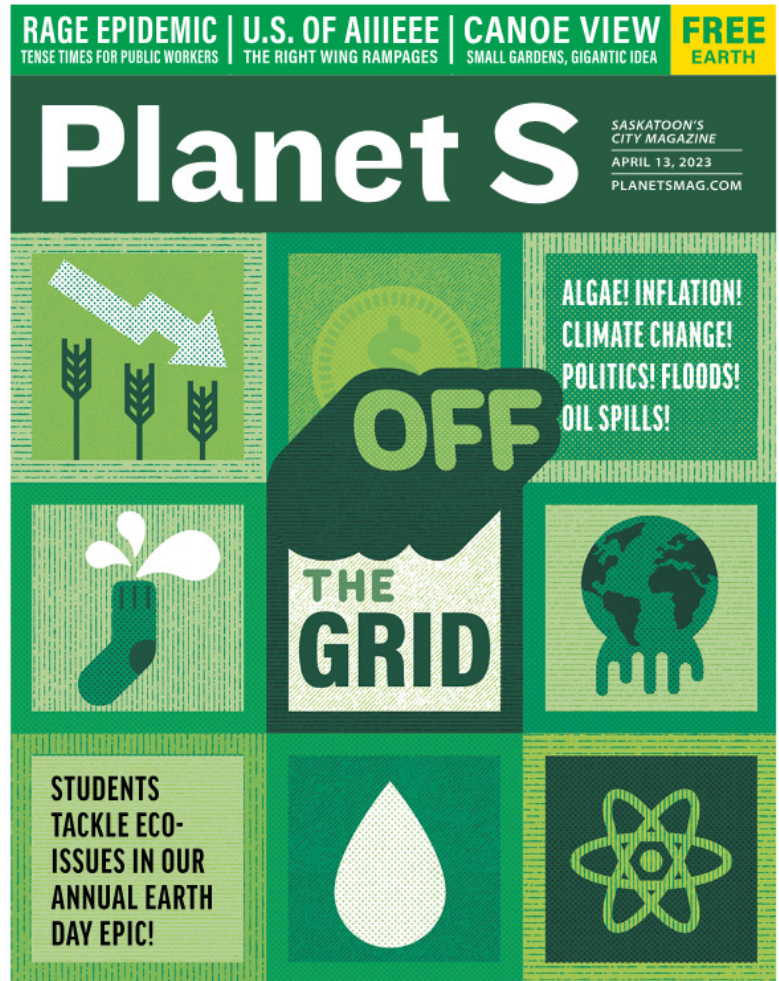
“When the ’Dog debuted in Regina, Saskatchewan’s unemployment rate was sky-high and jobs were scarce. It was an era one Prairie Dog freelancer once described as “the decade fast food restaurants taped ‘Not Hiring’ signs to their doors,” explains Whitworth.

The original Prairie Doggers thought founding a co-op sounded better than moving to Alberta for work. They also thought news media was missing important perspectives in its coverage, and they wanted to roll up their sleeves and fill the gap.

“Prairie Dog was founded by people with strong political ideas who created their own make-work project,” says Whitworth. “They wanted to push back against anti-citizen public policy and create a space for the stories and issues that weren’t necessarily being heard in other media outlets at the time.”

As Prairie Dog grew, the team began work on expansion — first to a bi-weekly (from monthly) print schedule and next, to Saskatoon. That culminated in the launch of Planet S on Sept. 5, 2002.

Over the years, Prairie Dog and Planet S have reported on and fought for affordable housing, workers’ rights and fair wages, public investment, Indigenous Peoples and minority communities, climate action, academic and scientific



This cover art is from one of Whitworth’s all-time favourite issues of Planet S, featuring Tommy Douglas High School’s Off the Grid program.

independence, and downtown revitalization and sustainable urban planning.

They’ve also covered the arts, culture, film and music. Their ‘Best Of’ contests remain a perennial favourite.

“Planet S and Prairie Dog, at their best, have been wildly fun and irreverent publications with real passion for progressive causes,” says Whitworth. “They’ve done a lot to make this province a better and more civilized place.

“I think we’ve also brought a lot of playfulness and fun to Saskatchewan, along with a valuable perspective,” he adds.

Unfortunately, says Whitworth, the publications have been decimated by media’s collapsing advertising-based business model exacerbated by social media monopolies like Meta and Google.

The pandemic supercharged the co-op’s financial challenges, he says. Most revenue over the years came from local

advertising, but ad sales have not returned to pre-covid levels.

In January 2024, the federal government came calling for repayment of the co-op's Canada Emergency Business Account (CEBA) pandemic support loan. Whitworth says the \$60,000 loan was essential to Planet S and Prairie Dog's survival and the papers would have shut down without it. But like a lot of CEBA recipients, the publications hadn't yet recovered enough to pay it back by the deadline.

Readers stepped up, raising over \$43,000 to pay off the loan's non-forgivable portion by the deadline.

"If readers hadn't raised that money, we'd be done," says Whitworth. "We would've had to walk away in bankruptcy."

Although Prairie Dog and Planet S are still alive, fundraising has not solved massive revenue shortfalls and the co-op has been unable to resume print publication.

Is there any hope?

Whitworth says that for the publications to carry on, they need to thrive, not just survive.

The only way this can happen, he says, is if they are better resourced.

"If people value what we do, there are ways to help," says Whitworth. "Monthly donors are terrific! One-time donors are terrific! Monthly donors who also make one-time donations are terrific!"

Other ways supporters can step up is to spread the word that these papers are worth having and need support — especially local advertising dollars.

"We're in sort of an induced coma right now and we'd really like to come out of it," says Whitworth. "But we *can* do this, and grow it into something better than it's ever been. We've proved it. Our resume is our archives."

"I think Saskatchewan deserves to have print versions of both publications again," he concludes. "The province also deserves the opportunity to read local news, opinion and criticism from a progressive perspective."

You can check out the papers' websites, which includes archives and donation pages, at <https://planetsmag.com/> and <https://prairiedogmag.com/>.

## ♥ Thank you, Saskatoon Co-op! ♥

During Co-operatives Week celebrations in October, the Saskatoon Community Clinic was thrilled to announce our new partnership with the Saskatoon Co-op.

The Saskatoon Co-op will provide \$5,000 in gift cards for groceries to the Saskatoon Community Clinic in support of the Emergency/Ready-To-Eat Food Bags Program. The Saskatoon Co-op has also agreed to provide a discount of 10% on regularly-priced food items purchased for the program. This is great news all around!

This essential initiative supports those with urgent nutritional needs, particularly those receiving care at Westside. It is difficult to address other health-care concerns when you desperately need nutrition," says Lisa Clatney, SCC Executive Director.

"We're incredibly grateful for this donation, which will strengthen the program and support our other critical services," says Clatney.

In 2023-2024, the clinic gave out 706 snack bags and is on track to surpass that number this year.



L-R: Fran Moran, Communications Manager (Co-op); Tyler Dunn, Director of Marketing & Communications (Co-op); Lisa Clatney, Executive Director (SCC); Gerald Hiebert, Chief Executive Officer (Co-op); Trudy Myers, Director of Therapies (SCC); and Holly Hallikainen, Registered Dietitian (SCC).

# Seasonal illness and vaccines, explained

By Rayan Shafi



Rayan Shafi

Hundreds of people this fall have already received their Influenza and COVID-19 vaccinations at the Saskatoon Community Clinic (SCC). Getting vaccinated remains one of the best ways to protect against serious illness or complications related to these infections.

Influenza, also called the flu, is a disease caused by Influenza A or Influenza B virus infection and COVID is a disease caused by COVID-19 (SARS-CoV-2) virus infection.

In the latest reporting year, COVID-19 and Influenza, were the 3rd and 8th leading cause of death in Canada. Complications of these infections, including COPD exacerbations and pneumonia, are among the leading causes of hospitalization in Canada.

The viruses can spread from one person to another by a few different ways. In droplet transmission, the viruses land on another person in large droplets which are released when someone coughs, sneezes, talks, or breathes. In aerosol transmission, the virus is contained smaller droplets called aerosols. Aerosols can float in air for long periods of time and can be inhaled by others. Masking helps prevent droplet and aerosol transmission.

Both viruses, but especially COVID-19, can survive on surfaces that are touched by someone with an infection. In turn, the virus can end up infecting those who touch the surface. Therefore, handwashing and sanitizing frequently-touched surfaces is critical to help reduce the spread of the viruses.



One of our pharmacists at the clinic, Stella, preparing for the influenza and COVID-19 immunization season

Once a person becomes infected, they are immediately able to spread it. However, they may not develop symptoms until a few days after the infection. This makes it challenging to track and control the spread of these viruses.

Symptoms of infection are caused by the virus damaging one's body, but also by the body's immune system attempting to fight the virus. The symptoms of both overlap. People who are infected commonly experience fever, chills, cough, muscle and throat pain, headaches, and tiredness. Additionally, those who have COVID-19 may also experience shortness of breath and new loss of smell or taste. What symptoms a person gets or how severe the symptoms are vary between people.

Although some who get COVID-19 or the flu may only have mild or short-lived symptoms, there are those who experience rare but serious complications that threaten life and health. These complications include worsening chronic health conditions, heart and lung problems, memory problems, pain, and worsened mental health.

Severe symptoms and complications may be more likely in certain groups of people, including the elderly, pregnant people, those with chronic medical conditions, and those with weaker immune systems. These groups of people may be eligible for a stronger version of the vaccine. Vaccine screening forms help doctors, nurses, and pharmacists decide which version is most suitable for you.

Getting vaccinated is the best way to minimize serious symptoms and prevent the spread of both infections. Vaccines mimic the immune system's response to a potential COVID-19 or Influenza infection. Activation of the immune system may cause minor symptoms including redness, swelling, soreness, fatigue, and mild fever in those who are recently vaccinated. A small group of people may experience a treatable allergic reaction to the vaccine within 15 minutes of administration. Clients receiving the vaccine are therefore asked to wait 15 minutes after receiving the vaccines to ensure they are safe from such reactions.

In mimicking the response, the vaccines train the immune system to recognize a real infection. So, when the virus enters the body of someone who is vaccinated, their immune system would create an early and effective response to eliminate the virus. This prevents serious symptoms and complications caused by the viruses. By effectively eliminating the virus, vaccines also make it less likely to infect others. This means if enough people are vaccinated, it indirectly protects those who are not immune or have weakened immunity to the viruses. This is called herd immunity.

However, it takes a few days for the vaccines to be fully active and that vaccines do not fully eliminate the risk of infections. Therefore, precautions like masking and sanitizing are also critical to protect oneself and others.

Not only does the immune system's ability to recognize the virus drop over time, the viruses evolve over time and develop different strains. So vaccines are offered periodically to ensure people's immunity is caught up with the viruses in circulation.

In Canada, influenza is most common in late fall and winter in a period called the flu season. While COVID-19 is not associated with an annual pattern of influenza,

its circulation waxes and wanes through the year. The type and timing of vaccines being offered is based on a combination of predictive research and data on circulating virus type.

If you are a patient of SSC and have not yet had either of these vaccinations, you can now book by calling reception at either the Westside or Downtown locations, and anyone is welcome to contact either of the SCC pharmacies for an appointment.

*Shafi is a second-year medical student at the University of Saskatchewan and a former volunteer for the Saskatoon Community Clinic's Seniors Advisory Council.*

# We ask because it matters

By Danielle Chartier, Director of Member and Public Relations



Christine Dawson

There are times when you may be frustrated checking in for your appointment at the Saskatoon Community Clinic when reception begins to ask you yet again, "Are you still at such and such address," in an effort to confirm necessary information.

A common refrain from patients often is, "Nothing has changed," before the receptionist can even get the questions out.

Not double-checking these details – your address, your phone number and your pharmacy – each time you are at the clinic could negatively impact your timely care, says Christine Dawson, Manager of Clinical Office Assistants/Reception.

"Even if you've been a patient here for a very long time, maybe you got rid of your landline and didn't tell us. Perhaps you changed your pharmacy and didn't think it was important to let us know. Or maybe there's a long-standing typo in your house number that we don't realize," says Dawson.

So how does any of that impact your care? Good question, says Dawson.

Incorrect information might mean your prescription gets faxed to the wrong pharmacy and you have to call the clinic to figure out why your pharmacist did not get it.

If a specialist does not have your most up-to-date address, it might mean you miss a referral letter

from them and have to spend time trying to figure out why it is taking so long to hear from them.

You could miss your appointment reminders if the clinic does not have accurate information in our electronic medical record.

"We all realize patients can be annoyed with us when we try to confirm these details, but please know this minor inconvenience is in the best interest of every clinic patient and helps us ensure you get the care you need," explains Dawson.

"Our reception team is doing the best they can and gathering the information our clinic needs to know. It's important to remember all our employees deserve the same respect all patients expect to receive," she says.





# Gifts to the Saskatoon Community Clinic Foundation

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Saskatoon Community Foundation

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The Estate of Clinton Ross Hilliard

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 If you are a monthly donor to the SCC Foundation through Canada Helps, please note  
 you will be recognized for your 2024 contributions in the Spring 2025 edition of Focus.**

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