

**CLSC NASKAPI
ANNUAL REPORT
2022-2023**



Table of Contents

1.	MESSAGE FROM THE CLSC NASKAPI AUTHORITIES	3
2.	DECLARATION REGARDING THE RELIABILITY OF DATA AND RELATED CONTROLS	6
3.	PRESENTATION OF THE ESTABLISHMENT	6
4.	THE 2022-2023 HIGHLIGHTS	7
5.	REPORT ON RELATED ACTIVITIES, RISK MANAGEMENT AND QUALITY	7
6.	HEALTH PROGRAMS AND SERVICES	10
7.	SOCIAL AND COMMUNITY SERVICES	13
8.	HUMAN RESOURCES	15
9.	FINANCIAL RESOURCES	17
10.	INFORMATION TECHNOLOGY (IT) DEPARTMENT	20
	Appendix 1 – Code of ethics and good conduct for administrators	21
	Appendix 2 - DECLARATION OF PERSONAL INTERESTS	31
	Appendix 3 - ADMINISTRATOR'S OATH OR AFFIRMATION	33
	Appendix 4 - OATH OR AFFIRMATION OF THE INDIVIDUAL TASKED WITH APPLYING THE CODE.....	34
	Appendix 5 - Organizational chart.....	35

1. MESSAGE FROM THE CLSC NASKAPI AUTHORITIES

MESSAGE FROM THE CHAIRMAN OF THE BOARD OF DIRECTORS OF THE CLSC NASKAPI, FROM THE EXECUTIVE DIRECTOR OF THE CLSC NASKAPI AND THE COMPLAINTS COMMISSIONNER

a) Message from the Chairman of the Board of Directors

The year 2022-2023 saw some major changes! In June 2022, our Director General, Denis Tremblay, announced his retirement. He kindly offered to stay with CLSC Naskapi for the time needed to complete the hiring process and ensure the transfer of knowledge to his successor. Following the selection process, François Bérubé was appointed Director General and took over the role in October 2022. Denis Tremblay stepped down in March 2023 after having completed the knowledge transfer process.



On behalf of the Board of Directors, I'd like to thank Mr. Tremblay for his efforts and for giving CLSC Naskapi a new lease of life after several years without stable general management. Thank you for your dedication and professionalism. I wish you the happiest of retirements.

Unfortunately, for personal reasons, Mr. François Bérubé was unable to continue his mandate with CLSC Naskapi and announced his departure at the end of March 2023. On behalf of the Board of Directors, I wish Mr. Bérubé the best for the future. Patrice Trudel, Finance, Information Resources and Administration Coordinator, was appointed Interim Director General by the Board of Directors on April 1, 2023. I would like to sincerely thank Mr. Trudel for accepting this major challenge as part of the recruitment process.

The CLSC Naskapi has continued its project to develop social and community services for the population, with the addition of several new team members, including Catherine Tétreault, who was appointed the role of coordinator at the end of the year.

On the medical side, the project in partnership with the CHU de Québec-Université Laval and the Kawawachikamach Naskapi Nation Band Council to provide dialysis services directly at CLSC Naskapi has been submitted to the Ministère de la Santé et des Services sociaux (MSSS) and is currently at the approval stage. Dialysis patients who permanently live outside the community can improve their quality of life by staying with family and friends.

The Board of Directors has passed a resolution appointing a new doctor, thereby strengthening the team and ensuring succession in the event of any departures.

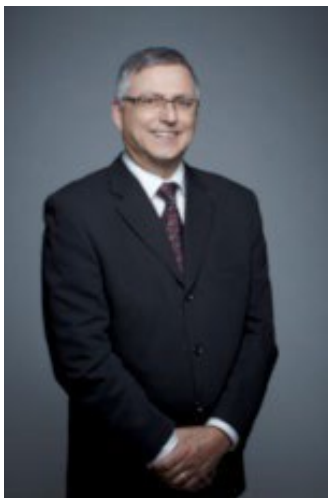
I would like to thank the members of the **Miyupimaatisiun** Cultural Safety Committee for their work in promoting Naskapi culture and developing culturally respectful services. This standing committee will continue its efforts to further this process in the years to come.

Finally, the election of members to the CLSC Naskapi Board of Directors, which was to have taken place in October, was postponed for technical reasons relating to outdated election regulations. The regulations were updated by the Band Council and are in the process of being approved by the MSSS, with elections scheduled for next June.

Looking forward to meeting with you in 2022-2023 dear CLSC Naskapi employees and clients.

b) Message from the Executives Directors

Having held the position of Director General for over 6 months during 2022-2023, and then that of Senior Advisor to the Director General until March 2023, I would like to thank the Board of Directors for its collaboration and confidence. I have sincerely enjoyed the years spent working with you and the CLSC team to lay the foundations for a solid organization and to develop services for the health and well-being of the Kawawachikamach community.



Below are the main files and projects we worked on this year:

- **Physical health**
The hemodialysis service project is progressing well. The drafting of the clinical plan in collaboration with the CHU de Québec-Université Laval has been completed and we intend to officially submit it to the MSSS on April 19, 2023. The clinical plan had previously been presented to the Kawawachikamach Naskapi Nation Band Council, who were very pleased with the progress of this priority project for the community. We have also arranged monthly physiotherapy and chiropractic services, as well as four occupational therapy visits a year.
- **Development of social and community services**
Significant efforts have been made to draw up an action plan for the development of social and community services. Recruiting and retaining staff, such as social workers, human relations officers and community nurses, is very difficult due to labour shortages in these sectors. Despite this, we continue to work tirelessly so we can deliver these services to the population.
- **Miyupimaatisiun cultural safety**
The **Miyupimaatisiun** committee has finalized the first personalized training session on Naskapi culture, which will be mandatory for all CLSC Naskapi employees and key collaborators. It also ensured the erection of a highly visible teepee outside the CLSC. The committee is currently developing several future projects, including the adaptation of lobbies and waiting rooms, and a meeting room for social and community services.
- **Policies and procedures**
The CLSC Naskapi Board of Directors has adopted the Non-Insured Health Benefits (NIHB) policy, which will serve as a basis for the adoption of a range of NIHB procedures. The Management Committee, responsible for establishing procedures, has already adopted a

measure concerning the transportation of beneficiaries. Other procedures will follow, such as those for services relating to dental specialties, eye care, eyewear, medical equipment and supplies, and many others.

- Improved working conditions and living environment for employees

This year, major efforts were made to replace the furniture and equipment in the employee housing units, and several employees have been relocated to more modern accommodation. We have also introduced a cargo premium for all employees living in the region. This premium serves to reimburse transportation costs for food deliveries from outside the region.

➤ Information technology

Several information technology projects were launched in the last third of 2022, with the aim of implementing, strengthening and modernizing the CLSC Naskapi systems.

Last March, the Board of Directors launched the CLSC Naskapi strategic planning process for the next five years. This essential exercise enables the CLSC and the Naskapi Nation of Kawawachikamach to prioritize their efforts to better serve the population.

We are looking forward to continuing our efforts together for the Naskapi community of Kawawachikamach.

c) Message from the CLSC Naskapi Complaints Commissioner



Below is the annual report on the implementation of the Complaints Review and Service Quality Improvement Plan for the year 2022-2023. This report outlines the activities carried out over the past year at CLSC Naskapi by my team, myself and the designated medical examiner.

I would also like to express my gratitude to the staff, managers and members of the establishment's management for their contribution to the reviewing of the files. Their work has been vital in improving the quality of care and services, as well as respect for users' rights.

During the year 2022-2023, five (5) files were opened; one (1) intervention file and four (4) administrative complaint files. I would like to point out that every year, citizens of the Naskapi community go to the police station for situations that have arisen at the CISSS de la Côte-Nord. These files are therefore recorded in the CISSS Côte-Nord register and not in the CLSC Naskapi register.

Service Quality and Complaints Commissioner

Infant,

Manon Bourgeois

2. DECLARATION REGARDING THE RELIABILITY OF DATA AND RELATED CONTROLS

I am responsible for the information contained in this annual management and activity report. Throughout the year, reliable information systems and controls were maintained to ensure that the objectives identified by the CLSC Naskapi Board of Directors were met. A review of the plausibility and consistency of the information presented in this report was conducted by the management team. The results and data in the CLSC Naskapi's annual management and operations report for 2022-2023 fiscal year accurately describe the institutions mission, mandates, responsibilities, activities and strategic directions in addition to outlining objectives indicators and providing accurate and reliable data.

Executive Director of the CLSC Naskapi.

3. PRESENTATION OF THE ESTABLISHMENT

a) Presentation of the CLSC Naskapi

The CLSC Naskapi cannot be presented without mentioning its distinctive character that is a result of the signing of the Northeastern Quebec agreement (NEQA) for the Naskapi Nation of Kawawachikamach on January 31, 1978.

The CLSC Naskapi is a public institution whose mission is, among others, to improve and maintain the health and well-being of the Naskapi beneficiaries in providing general services, in particular, emergency 24/7, social and community services, diagnosis and treatment, promotional and prevention services, assessment and home care. If a health or social service is not available in the region, the CLSC Naskapi cover travel, accommodation and other costs for Naskapi beneficiaries to obtain services outside the region.

b) Members of the CLSC Naskapi Board of Directors

The CLSC Board of Directors is composed of seven members.

- Georges Guanish, Chairman (men in the population)
- Martha Mary Shecanapish, Vice-Chairman (female in the population)
- Georges Shecanapish (persons over 50 population)
- Louise Nattawappio (appointed by the NNK Council)
- Agnes Uniam Einish (elected by the Naskapi Education Committee)
- Marion Einish (elected by employees)
- Denis Tremblay/François Bérubé (Executive Director)

The CLSC Naskapi Board of Directors held 15 meetings during 2022-2023.

Unfortunately, because of the COVID-19 pandemic, the Board of Directors did not hold a public information meeting to which it would have invited the population. This situation will change in 2023-2024.

c) Notes on committees and boards

Unfortunately, due to its size, the CLSC Naskapi is not obliged or in a position to create the following committees; user committee, physician council, dentists and pharmacists, nurses council, multidisciplinary council, risk management committee, vigilance committee, and quality committee.

d) Code of Ethics and Good Conduct

Our institution's Code of Ethics and Good Conduct, which outlines the duties and obligations of Board members, and its Executive Director, was approved by the CLSC Naskapi Board of Directors in 2002 and revised in 2008. In accordance with the MSSS circular, the Board did not deal with any cases in 2022-2023 and did not find any deficiencies among their members.

4. THE 2022-2023 HIGHLIGHTS

Report from the CLSC Naskapi executive management team

i. COVID-19

In December 2021, we had our first cases of COVID-19. Since the start of the pandemic situation, our teams have maintained their efforts to be able to overcome the work overload due to vaccination and the screening test.

Thank you to all our employees as well as to the members of the emergency committee in place to fight against this COVID-19 pandemic.

ii. Election of the board members

Elections were due to take place in October 2022, but due to a procedural issue, they were cancelled and have been postponed until 2023-2024. The Naskapi Nation Band Council is working with CLSC Naskapi and the MSSS to modernize the procedure.

iii. NIHB

Adoption of a policy for non-insured services and an essential related procedure: the transportation of Naskapi beneficiaries. This new procedure is used every day, and is clearer and better adapted to today's reality.

iv. Nouveaux services offerts

1. Physiotherapy
2. Chiropractic
3. Occupational therapy
4. Dental hygiene

5. REPORT ON RELATED ACTIVITIES, RISK MANAGEMENT AND QUALITY

Quality of care and security of services

The CLSC Naskapi does not have a risk management committee, vigilance committee or quality committee due to the reduced number of staff within the establishment. During 2022-2023, the CLSC Naskapi registered and reported seven incidents. The users required regular monitoring and regular interventions by the CLSC Programs Manager. Monitoring and strengthening of best practices by nurses was another measure put in place by the manager to ensure the security and

quality of services by CLSC professionals.

Main types of incidents (7)	Number	Percentage of all incidents
A	2	28%
B	4	57%
C	1	14%

A = Fall or physical trauma
 B = Drugs
 C = Error in diagnostic tests

Québec Ombudsman
 Intervention Report 2022

Recommendations:

- R-1** Promote the participation of psychosocial workers in community activities in order to foster a climate of trust between the population and the CLSC;

Response

Social and community services managers have implemented several intervention protocols, including visits by school nurses and human relations officers to schools and daycare centres. Workers were involved in the various theme week activities. Among the recommendations is a project to build housing for the social services team in the community.

- R-2** In order to avoid service breakdowns or repeated missed appointments, remind psychosocial workers of the need to contact, whether by telephone, text message or e-mail, users who are subject to CLSC follow-up measures.

Response

With the hiring of a social and community services coordinator, this summer we will start work on the project to set up a Reception, Analysis, Guidance and Referral Service. We will also be implementing clinical supervision and monitoring the distribution of mandatory files for all workers.

- R-3** Develop a collaboration agreement for complementary psychosocial services between the CLSC and the Wellness Program;

Response

Partner agreements will be finalized in the coming months, however we are already working with the Wellness Program on various activities.

- R-4** Ensure regular administrative supervision of psychosocial workers by the head of their program until the head of psychosocial services takes over, particularly in order to offer users available time slots for consulting a worker;

Response

Since May 26, there has been administrative supervision of workers, first by the Director General and then by the Community and Social Services Coordinator.

- R-5** Take the necessary measures to use the CLSC's isolation room effectively, thereby avoiding the needless detention of users in crisis at the police station. To do this:

- Ensure the room is compliant with current safety standards;
- Train the staff concerned on how to use the room.

Response

The compliance of the room has been certified by the architectural firm in accordance with government standards, and staff have been trained.

- R-6** Revise the protocol for using the isolation room to bring it into line with ministerial standards for protocols for the application of control measures, including chemical substances. Use clear language to prevent ambiguity and confusion among staff;

Response

The protocol for use has been finalized and complies with ministerial standards.

- R-7** Take the necessary steps to ensure that intervention plans are drawn up and recorded in the files of users receiving psychosocial services;

Response

Intervention plans have been drawn up and recorded in users' files.

- R-8** Remind nursing staff, including those from agencies, of the importance of developing therapeutic nursing plans and recording them in the files of those receiving home support services.

Response

Nurses and agency staff have been reminded.

- R-9** Offer I-CLSC training to all staff who provide direct care to users;

Response

I-CLSC training has already been delivered to community and social services staff and will be rolled out to nursing staff in the coming months.

6. HEALTH PROGRAMS AND SERVICES

The Naskapi community of Kawawachikamach has access to an assortment of programs. These programs are generally in first-line services. They aim to address physical health emergencies and problems.

a. Current healthcare services

These services are available to all individuals who have an illness or a symptom, or have experienced trauma and must receive immediate care or treatment from a nurse or doctor. The services are also for individuals who require regular monitoring or continuous service due to their illness. These are usually nursing services that are provided with or without an appointment by a physician or nurse, emergency medical interventions, information and orientation services provided by nurses, medication distribution, diagnostic support (blood or other samples, simple X-ray diagnostics).

	Users	Interventions
Emergency	404	602
Current health clinic	841	7678
Blood Samples		1399

b. Prenatal and postnatal services and childhood illness prevention and promotion service (public health)

We call the program "Integrated Perinatal and Early Childhood Services" (SIPPE). It is also a program for young mothers, which allows us to regularly follow up with both mothers and babies after the birth. We are still in the process of finding an innovative way to reach these young mothers on a regular base and to get them interested in receiving support or advice regarding their health and wellbeing, as well as their child's. In order to achieve the objective of this program, most of our interventions are carried out individually. This program complements certain Health Canada programs according to the Contribution Agreement: the Maternal and Child Health program and the Prenatal Nutrition program.

	Use rs	Interventions
Prenatal and Postnatal Services	2	27

Immunisations principalement. Sous-programmes I-CLSC 580 Immunisation & 590 Prévention scolaire

c. Home care services (loss of autonomy among elders)

This program consists of a range of primary activities related to nursing home visits, social auxiliary support, in-home services and occupational therapy services. These programs are designed for seniors, but they can also be offered to individuals who have temporarily lost their autonomy following surgery or hospitalization. Individuals who are eligible for the services provided by this program must be evaluated before receiving services. This program is a complement to the Health Canada Home and Community Care program under the Contribution Agreement.

	Users	Interventions
Nursing home visits	34	547
Home-based support	19	461

d. Public health program

The public health programs offered in the Naskapi community are targeted measures that are integrated in the daily, clinical, and preventive practices by the CLSC's technical and professional staff. These preventive actions are designed for the Naskapi population in general and for the vulnerable sectors of the Naskapi Nation with the support of other sectors of activities involved in public health provision such as schools, early childhood centers, recreation facilities, and all organizations under the responsibilities of the Band Council. Public health includes the programs mentioned above (preventive dental services, school health services, nutrition) and also programs to promote healthy living and manage chronic illnesses. Illness prevention programs introduce healthy living habits for children, teenagers and adults and cover nutrition, physical activity and smoking. The overall objective of these activities is to reduce the impact of chronic illnesses including cardiovascular disease, COPD, asthma, cancer, diabetes, obesity and osteoporosis. These programs are a complement to Health Canada Aboriginal Diabetes Initiatives, Maternal Child Health, and Fetal Alcohol Syndrome programs under the Contribution Agreement.

e. Curative and preventive dental services (public health)

The prevention dental health program is aimed at young children who are in school. The program offers regular monitoring of their dental condition. Where required, this a complementary program that refers clients to curative dental services. This program encompasses the activities usually carried out in a dental practice such as diagnostic, preventive, endodontic, dental restoration and surgical services.

f. NIHB

The Non-Insured Health Benefits program at the CLSC Naskapi allows the registered recipients of the Northeastern Quebec Agreement to obtain products and services that are not offered in the CLSC Naskapi. These services include transport and accommodation expenses and all other expenses required for a trip for medical reasons. These services are provided based on the decision of professional, physician or dentist according to the policies and procedures of the CLSC Naskapi.

g. Health Canada Community Programs under an Agreement with the Naskapi Nation of Kawawachikamach (NNK)

The CLSC Naskapi works with the Naskapi Band Council to provide the following services to the population:

- Aboriginal diabetes initiatives.
- Fetal alcohol spectrum disorder program.
- Canada prenatal program.
- Maternal and child health program.
- Home and Community Care program

The objective is to offer the clinical expertise of the CLSC Naskapi to the team of the Naskapi Band Council, which offers federal program services.

Under the agreement, the CLSC produces an annual report in Health Canada's format of the federal services provided to the Naskapi Nation. This form shows the cost of the services offered, which is \$555,181 for 2022-2023.

Aboriginal diabetes initiatives

The Aboriginal Diabetes Initiative is designed to provide a more comprehensive, collaborative and integrated approach to reducing diabetes and related complications within the Naskapi community. The ADI program at the Naskapi CLSC aims to build awareness of diabetes and its complications, and teach what can be done to prevent diabetes. The program emphasizes healthy eating and active living, and raises awareness of the risk factors, complications, and what can be done to prevent these from occurring. This program offers care and treatment for diabetics, promotes healthy living and diabetes prevention, and provides support services for a better lifestyle.

Fetal Alcohol Syndrome program

Fetal Alcohol Syndrome (FAS) is a term used to describe birth defects caused by drinking alcohol while pregnant and breastfeeding. Alcohol causes an enormous amount of damage to a baby's brain. FAS and related health problems are a concern because they can cause permanent defects that require ongoing support. The reasons behind FAS are complex and deep-rooted and go beyond the simple consumption of alcohol during pregnancy. FAS can cause many problems which include intellectual disability, learning difficulties, hyperactivity, poor attention and memory retention, an inability to control anger, and poor problem-solving skills.

Prenatal Nutrition Program

The Prenatal Nutrition Program for the Naskapi Community is a comprehensive program that supports pregnant women who face risks that threaten their health and the development of their babies. The program also provides support to expectant mothers to give their babies a healthier start in life. The Prenatal Nutrition Program is geared towards health promotion and prevention objectives for pregnant women. Using an empowerment strategy, the objective of the program is to recognize and reinforce the ability of women to strive for better health and wellbeing conditions that are favorable for both themselves and their unborn children.

Maternal and Child Health program

The Maternal and Child Health (MCH) Program states that pregnant women and families with infants or young children living in the Naskapi community must receive support to reach their full potential in terms of development and longevity. The goal of this program will be achieved through providing access to services that are local, integrated, and effective and that address the needs of individuals, families, and the community. The development period between conception and the age of six is the most important period for brain development and is a determining factor with regard to a child's behavior and health. The effects of the mother's health during pregnancy and what the child experiences during the first six years of their life have lifelong repercussions. The objective of the program is to ensure that pregnant women and families with infants and young children are given the opportunity to reach their full potential in a community environment that is committed to promoting health and providing support for families.

Home and Community Care program

The Home and Community Care program aims to preserve and maximize community member's ability to maintain optimum health, wellbeing, and independence in their home environment for as long as possible. The Program consists of a number of different services that are delivered to

the homes of individuals and families who have lost either partial or total autonomy. By providing services as part of a holistic approach, that meets the individual's needs. The Home and Community Care program promotes wellness to prevent, delay or substitute the need for institutional care and enhance the client's responsibility for maintaining his or her own health.

7. SOCIAL AND COMMUNITY SERVICES

In 2022-23, we focused on evaluating and restructuring social and community services to ensure they meet MSSS standards in terms of access, continuity, quality and cultural safety. A consultant accompanied us throughout the evaluation process and an action plan was drawn up to achieve these objectives. We have already started to implement this plan. The first measure taken was the hiring of a psychosocial and community services program manager. An interim took over the role from June 2022, and the new manager took office in April 2023.

a) General psychosocial services

Current psychosocial services should be the main point of entry into the social system since they strive to address a need to maintain or improve the wellbeing of an individual or a family. The clinical activities and help that is offered are based on one-on-one intervention for people in specific situations or those presenting an urgent issue or a critical psychological situation. The staff of the psychosocial services also carry out preventive and support activities in schools and other organizations in the Naskapi Community. These services are a complement to the Health Canada programs according to the Contribution Agreement, especially fetal alcohol syndrome services.

- **Intake:** It is the entrance of all requests to social and community services. Assessment of the client's situation and needs, and referral to appropriate service or intervener. This service have been created this year, protocol written, etc
 - **Social emergency services-on call (24/7):** response to emergency situation as suicidal crisis, domestic violence, sexual abuse, mental health disorganization. Defuse the crisis, prevent deterioration of the situation, protect the person and her family;
 - **Psychosocial consultation :** to support people facing personal, social, domestic or familial problems, to avoid the deterioration of the situation; for example: separation, grief, anxiety, domestic issue, etc.;
 - **Psychological consultation** (mainly on line): to support people facing personal, social, domestic or familial problems, to avoid the deterioration of the situation; for example: separation, grief, anxiety, domestic issue, etc.
- Youth psychologist have been hired and started assessment of client
- **Psychosocial interventions within the scope of civil security (to be developed);**

	Users	Interventions
Psychosocial services	189	488

b) Mental Health

Accompaniment, support and referral in the process with second line services in Sept-
Iles, support to families.

c) Addition

To support people facing personal, social, domestic or familial problems, to avoid the deterioration of the situation; for example: separation, grief, anxiety, domestic issue, etc. Hiring a certified **Naskapi Addiction counsellor**, who will start working in July 2023.

d) Youth in difficulty and family counselling

Support to parents having children in difficulty, family therapy. Hiring process.

e) Agir tôt

This program is intended for children aged 0 to 6 years and their families. It aims to identify as quickly as possible the signs of difficulties in the development of a child in order to direct him to the right services quickly. The objective of the program is therefore to support the development of the full potential of children and to facilitate their entry into kindergarten. **(In process of implementation)**

f) School health and vaccination 5-17

The school health program provides clinical activities in a school setting in order to apply the public health programs that are aimed at maintaining physical health. These activities may include tracking the health problems (vision, hearing, obesity, etc.) of children through individual or group interventions.

	Users	Interventions
School Health	229	409

g) Homecare psychosocial support

Psychosocial homecare services for elders or disabled people; (others services as nursing, occupational therapy for this clientele are under nursing services)

h) DI-DP-TSA (to be developed)

i) Kinesiology

Clinical support to people facing different physical injuries or chronic diseases (diabetes, chronic obstructive pulmonary disease, cardiovascular disease, stroke, cancer, arthritis, back pain, asthma, etc.). Also, promotion of physical activities for physical and mental well-being; Full time kinesiologist have been hired, (starting June 2023)

j) Community Nutrition

Prevention-promotion activities for healthy way of life (at school, in the community, with community organizations). We have hired a nutritionist who is coming 1 week/2 months. Visits: September and November 2023, January and March 23.

- 8 workshops at school
- 4 workshops at Daycare
- 4 activities in the community

- 3 activities in community groups
 - 3 activities for elders (meals on wheels)
- k) Preventive Dental Hygiene
 Prevention of tooth decay and promotion of dental health for early childhood and young people. Have been reactivated in March 2023, with the hiring of two dental hygienist, who will visit the community 3 times/year;
 First visit in march 2023:
- Application of fluoride: 174 students
 - Referral to dentists: 71 students
 - Screening for sealants: 123 students
 - Screening for FDA: 34 students
- l) Promotion-prevention activities in the community
- Many activities have been done in collaboration with different community partners, as mental health week, suicide prevention week, etc.
 - Smoking stop counselling : 5 clients 10 interventions
- m) Télé Psychosocial Services
 Psychotherapy, psychosocial interventions have been held on line by different CLSC psychosocial counsellor (intake assessment, psychotherapy, support through legal process, etc.).
- n) Evaluation of the quality of psychosocial services
 Creation of a specialist position in clinical activities with a support function, supervision, evaluation of good practices, etc.

For more information about the implementation of Social and Community action plan 2022-2024, just consult it by asking the new head of program.

8. HUMAN RESOURCES

A staffing development plan is still in progress with the MSSS, in order to increase our workforce and thus be able to offer better services to the Naskapi population. Waiting for this plan did not stop us from hiring new employees and from always being active in our recruitment efforts. The CLSC currently has 68 employees and 33 full time equivalent employees.



The Human Resources department has worked hard to improve working conditions for employees. We have introduced a cargo premium for all employees, which serves to reimburse transportation costs for food deliveries from outside the region. The implementation of a policy and procedure on working conditions for managers will facilitate the hiring and retention of the management team.

By replacing the furniture and equipment in the employee housing units, the team was able to improve our employees' living environment. We also relocated several employees to more modern accommodation.

We would like to thank all our work teams for their commitment and dedication in delivering quality services to Naskapi beneficiaries.

Below is the key information on the workforce and hours worked, compared with last year.

Presentation of data for monitoring the Law on workforce management and control 2022-2023

CLSC Naskapi	364 day comparison		
	2022-03-27 to 2023-03-25		
Sub-category of employment	Working hours	Over time	Total paid hours
1 – Management	9 477	34	9 511
2 – Professional	13 307	258	13 564
3 – Nursing	10 203	1 523	11 726
4 – Office staff and technician	25 416	284	25 700
5 – Maintenance and housekeeping	4 360	11	4 371
Total 2022-2023	62 762	2 110	64 872
Total 2021-2022	45 937	1 602	47 539

Target 2022-2023	63 577
Difference	(1 296)
Difference in %	(2.0%)

* The target established by the MSSS was practically reached for the year 2022-2023

Breakdown of the workforce in 2022-2023 by personnel category

CLSC Naskapi	Number of jobs as of March 31, 2023 for 2022-2023	Number of full-time equivalents in 2022-2023
1 - Nursing and cardio-respiratory care personnel	9	5
2 - Para technical personnel, auxiliary services and trades	7	2
3 - Office staff, technicians and administrative professionals	27	14
4 - Technicians and professionals in health and social services	16	7
5 - Staff not covered by the Act respecting bargaining units in the social affairs sector *	0	0
6 – Management staff	9	5

* Either pharmacists, clinical biochemists, medical phvsicists, midwives and students.

9. FINANCIAL RESOURCES

During the preparation of its Annual Financial Report, the CLSC Naskapi used primarily the Financial Management Manual written by the MSSS, as prescribed by section 477 of the Act respecting health and social services. These guidelines are consistent with Canada's Public Sector Accounting Standards. In order to fulfill his responsibility and complete tasks, the Head of Financial and Administrative Services maintains a system of internal controls that he considers necessary. The controls provide reasonable assurance to protect the assets that transactions are properly accounted for and properly approved at the appropriate time, and that reliable financial statements are provided.

The Board of Directors regularly monitors periodic financial reports and approves financial statements audited in accordance with MSSS generally accepted auditing standards. The CLSC report outlines the nature and scope of this audit and the expression of its opinion.

Statement of results:

The CLSC Naskapi ended its 2022-2023 fiscal year with a deficit of \$252, 986, which is not in line with the objective of a non-deficit settlement established by the MSSS. This deficit is explain by acquisition in fixed assets not budgeted as well as various operating items.

Name of the establishment	Code	Page / Idn.
CLSC Naskapi	1104-3866	200-00 /
All funds	fiscal year ended March 31, 2023 - AUDITED	

STATEMENT OF OPERATIONS

	Budget	Operations Cur. Yr. (R.deP358 C4)	Capital Assets Current Yr. (Note 1)	Current Year Total C2 + C3	Prior Yr. Total
	1	2	3	4	5
REVENUES					
MSSS Grants (FI:P408)	1	8 341 568	12 442 582	1 076 447	13 519 029
Government of Canada grants	2				
User contributions	3		XXXX		
Sale of services and recoveries	4	345 112	794 646	XXXX	794 646
Donations (FI:P294)	5				
Investment revenue (FI:P302)	6				
Business revenue	7				
Gain on disposal (FI:P302)	8				
	9	XXXX	XXXX	XXXX	XXXX
	10	XXXX	XXXX	XXXX	XXXX
Other revenues (FI:P302)	11	377 000	555 178	555 178	480 827
TOTAL (L.01 à L.11)	12	9 023 680	13 792 406	1 076 447	14 868 853

EXPENDITURES					
Salaries and fringes benefits	13	3 765 419	5 400 857	XXXX	5 400 857
Medications	14	834 570	1 441 016	XXXX	1 441 016
Blood products	15			XXXX	
Medical and surgical supplies	16	97 610	137 574	XXXX	137 574
Food products	17	2080		XXXX	
Honoraria paid to non-institutional resources	18			XXXX	
Financial charges (FI:P325)	19	53 450	145 672	535 242	680 914
Maintenance and repairs, including non-capital costs related to capital assets		157 660	186 504		186 504
Bad debt	21		2 353	XXXX	2 353
Rent	22	659 870	423 295	XXXX	423 295
Capital assets depreciation (FI:P422)	23		XXXX	704 243	704 243
Loss on disposal of capital assets (FI:P420, 421)	24		XXXX		
Transfer expenses	25			XXXX	
	26	XXXX	XXXX	XXXX	XXXX
Other expenditures (FI:P325)	27	3 453 021	6 145 083	6 145 083	4 797 313
TOTAL (L.13 à L.27)	28	9 023 680	13 882 354	1 239 485	15 121 839

SURPLUS (DEFICIT) OF THE YEAR (L.12 - L.28)	29	0	(89 948)	(163 038)	(252 986)
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Note 1: column 3 applies to public establishments only

Name of the establishment	Code	Page / Idn.			
CLSC Naskapi	1104-3866	204-00 /			
All funds					
fiscal year ended March 31, 2023 - AUDITED					
STATEMENT OF FINANCIAL POSITION					
	Funds	Operation	Capital assets	Current year Total (C1+C2)	Prior Yr. Total.
	1	2	3	4	
FINANCIAL ASSETS					
Cash on hand (overdraft)	1	220 643		220 643	3 412 855
Short-term Investments	2	XXXX	XXXX	XXXX	XXXX
Receivables - MSSS (FE: P362, FI: P408)	3	1 713 042	162 235	1 875 277	958 972
Other receivables (FE: P360, FI: P400)	4	1 593 688	(30)	1 593 658	841 590
Cash advances to public institution	5	XXXX			
Interfund receivables (payables)	6	773 458	(773 458)		
Grant receivable (deferred grants) - accounting reform (FE: P362, FI: P408)	7	130 527	18 773 601	18 904 128	19 431 790
Portfolio investments					
Deferred debt issuance costs	9	XXXX	XXXX	XXXX	XXXX
	10	XXXX			
Other items (FE: P360, FI: P400)	11	74 445		74 445	
TOTAL FINANCIAL ASSETS (L.01 à L.11)	12	4 505 803	18 162 348	22 668 151	24 645 207
LIABILITIES					
Short-term debt (FE: P365, FI: P403)	13	6 336 911	951 156	7 288 067	8 439 637
Accounts payable - MSSS (FE: P362, FI: P408)	14				
Other accounts payable and accruals (FE: P361, FI: P401)	15	1 881 714	179 280	2 060 994	1 501 561
Cash advances - decentralized envelopes	16	XXXX			
Accrued interests payable (FE: P361, FI: P401)	17		162 235	162 235	169 492
Deferred revenue (FE: P290 et 291, FI: P294)	18		18 309 627	18 309 627	18 350 604
	19	XXXX	XXXX	XXXX	XXXX
Long-term debts (FI: P403)	20	XXXX	17 892 245	17 892 245	18 721 635
Liability for contaminated sites (FI: P401)	21	XXXX			
Liability for employee future benefits (FE: P363)	22	397 509	XXXX	397 509	412 504
	23	XXXX	XXXX	XXXX	XXXX
Other items (FE: P361, FI: P401)	24				
TOTAL LIABILITIES (L.13 à L.24)	25	8 616 134	37 494 543	46 110 677	47 595 433
NET FINANCIAL ASSETS (NET DEBT) (L.12 - L.25)					
	26	(4 110 331)	(19 332 195)	(23 442 526)	(22 950 226)
NON FINANCIAL ASSETS					
Capital assets (FI: P423)	27	XXXX	19 346 520	19 346 520	19 172 217
Supply inventory (FE: P360)	28	117 879	XXXX	117 879	117 867
Prepaid expenses (FE: P360, FI: P400)	29	130 298		130 298	65 299
TOTAL NON FINANCIAL ASSETS (L.27 à L.29)	30	248 177	19 346 520	19 594 697	19 355 383
SHARE CAPITAL AND CONTRIBUTED SURPLUS					
ACCUMULATED SURPLUS (DEFICIT) (L.26 + L.30 - L.31)	32	(3 862 154)	14 325	(3 847 829)	(3 594 843)

10. INFORMATION TECHNOLOGY (IT) DEPARTMENT

For the year 2022-2023, the CLSC IT department hired one specialized technician and one data processing operator, and we will keep recruiting and hiring. Our objective is to create a group able to handle and support all the projects we started to better control our systems and put in place the modern technological tools that the MSSS health network wants to put in place for its operations and accountability. The technological modernization plan funding granted to the CLSC is \$778 400\$.



Currently we have 12 identified projects, seven are in progress and five have not yet started. In major projects to summarize:

- Deployment of the electronic medical record
- master patient index
- integration of appointments
- Digitization of archives
- Website-intranet

This year, the IT team carried out two projects related to building security, namely the installation of surveillance cameras and an access card system at the entrances of the building and certain sensitive sectors.

In addition, the installation of a multimedia system in the waiting room will inform the beneficiaries on subjects such as diabetes, nutrition and other general information useful in health, social services and community services.

Appendix 1 – Code of ethics and good conduct for administrators

CODE OF ETHICS AND GOOD CONDUCT FOR ADMINISTRATORS



CODE OF ETHICS AND GOOD CONDUCT FOR ADMINISTRATORS

Adopted by the Board of Directors

April 15, 2002

Revised on March 29, 2008

PLAN

Preamble

1. Overall objective and scope of application
2. Definitions
3. Administrators' duties and obligations
4. Mechanisms for applying the Code
5. Commitments

Appendices

- I. Declaration of personal interests
- II. Administrators' oath or affirmation
- III. Oaths or affirmation by the individual tasked with applying the Code

The administration of a public establishment requires administrators to respect obligations that do not apply to private administration. This kind of social contract requires a high level of trust on the part of citizens in the establishment.

As a result, conduct that respects our code of ethics remains an ongoing concern within the establishment since we require compliance in order to guarantee and build public trust in our integrated management process with regard to public funding.

In line with our fundamental values, we decided to outline the ethical and conduct guidelines that administrators in our establishment must respect in this Code of Ethics and Good Conduct.

The purpose of this Code is not to substitute laws and regulations that are in effect or to outline an exhaustive list of behaviour that we expect from administrators. Rather, the purpose of the Code is to present the overall duties and obligations of our administrators.

In particular, it:

- outlines preventive measures, especially those related to regulations governing the declaration of personal interests;
- outlines the identification of situations involving conflicts of interest;
- outlines the duties and obligations of administrators after their terms come to an end;
- provides mechanisms for applying the Code.

All administrators of our establishment are obliged to respect the principles of ethics and good conduct that are provided by law and presented in this Code. In the event of a discrepancy, the most stringent principles and regulations apply.

If the administrator is in doubt, they must act in a way that respects these principles and regulations.

Administrators are bound by the same obligations when, following a request on the part of the establishment, they perform administrative duties within another organization or business or are a member of another organization or business.

2. DEFINITIONS

Unless the context suggests another meaning, in this Code:

"Administrator" refers to a member of the establishment's Board of Directors, regardless of whether they were elected or appointed.

"Conflict of interest" refers in particular to, without limiting the legal scope of this expression, any situation where either a direct or indirect conflict of interest on the part of an administrator is such that it risks compromising the objective execution of their task because their judgment may be influenced and their independence affected by the existence of this interest.

"Business" refers to any form that an organization may take. Such businesses may provide goods and services or any other form of commercial, industrial or financial services. It also refers to any group that strives to promote certain values, interests or opinions or strives to influence the establishment's authorities.

"Family member" refers to an administrator's spouse or common-law partner, child, father, mother, brother or sister. This term also includes the spouses and children of the individuals mentioned above and those of the administrator's associates.

3. ADMINISTRATORS' DUTIES AND OBLIGATIONS

WHILE PERFORMING THEIR DUTIES:

- Act in the best interests of the establishment and the population that it serves.

To this end, the administrator:

Is sensitive to the needs of the population and always take into account the fundamental rights of citizens.

Ensures that the services provided are pertinent, high-quality and efficient.

Ensures that the establishment's human, material and financial resources are used in an economical and efficient manner.

Ensures that the establishment's human resources can participate, are motivated and appreciated, and can develop their skills.

- Exercises care, caution, diligence and competence.

To this end, the administrator:

Availability and active participation

Makes themselves available to carry out their duties and takes an active part in decision-making within the Board of Directors.

Care and competence

Ensures that they are knowledgeable when it comes to the evolution of the establishment and informs themselves, where necessary, and avoids making rash decisions.

Neutrality

Puts forward proposals by exercising their right to vote in the most objective way possible. To this end, they cannot make a commitment to a third party or provide any guarantee regarding their vote or any other decision.

Discretion

Uses discretion with regard to their knowledge base while carrying out their duties. Furthermore, they must exercise caution and restraint with regard to confidential information where the communication or use of this information would affect the interests of the establishment, undermine the privacy of individuals or grant either an individual or a business an unfair advantage.

Confidentiality

Keeps facts and information that they are privy to confidential as required by law or the decision of the Board of Directors with regard to confidentiality.

- Exercises care, caution and competence.

To this end, the administrator:

Public relations

Will always be polite and courteous when interacting with the public and avoid all forms of discrimination and harassment that are prohibited by law.

Strive to always provide citizens with the information that they request and that they have the right to obtain in as short a timeline as possible. Where the administrator is unable to access this information, they will direct the citizen to the appropriate department within the establishment.

Show restraint with regard to expressing their opinions in a public manner.

- Exercise honesty and loyalty.

To this end, the administrator:

Will act in good faith and in the best interests of the establishment and the population that it serves without taking into account the interests of any other individuals, groups or entities.

Combat all forms of abuse of power such as conflicts of interest, failure to comply with regulations, inefficient management, wasting resources, divulging confidential information, granting favours, hiding mistakes and misleading the population.

Duties and conflict of interest

Avoid situations where duties overlap with personal interests.

Conflict of interest - administrators excluding the Executive Director

Administrators, with the exception of the Executive Director, under penalty of being removed from their position, shall renounce in writing their interest in the Board of Directors where either a direct or indirect interest in a business results in a clash between their personal interests and the interests of the Board of Directors or one of the establishments that it administers.

Furthermore, administrators must abstain from participating in deliberations where the decision involves debating a business in which the administrator has a personal interest.

However, where an administrator is a minority shareholder of the corporation or business in question, it does not constitute a conflict of interest when the shares of the corporation are traded publicly on a known stock market and where the administrator in question is not an insider of this corporation as defined in section 89 of the Securities Act (RSQ, chapter V-1.1).

Conflict of interest - Executive Director

The Executive Director may not, under penalty of being removed from their position, have either a direct or indirect interest in a business that conflicts with their personal interests and those of the establishment.

However, the Executive Director shall not be removed from their position if a personal interest is no longer in question following a succession or donation and as long as they renounce it or, after informing the Board of Directors, dispose of the assets within the timeline determined by the Board.

The Executive Director must, within sixty (60) days of their nomination, submit to the Board of Directors a written declaration that mentions pecuniary interests that they have in corporations, companies or businesses that are likely to enter into contracts with the establishment. This declaration must be updated within sixty (60) days of the acquisition of such personal interests by the Executive Director and every year within sixty (60) days of the anniversary of their nomination.

The Executive Director must, within thirty (30) days of entering into any professional services contract, submit to the Board of Directors a written declaration that mentions the existence of the contract in question that bind the establishment and a corporation, business or company in which the Executive Director holds pecuniary interests.

The exclusive nature of the Executive Director's duties

The Executive Director should, under penalty of being removed from their position or being suspended without pay, subject to certain exceptions provided for in legislation, carry out work and duties for the establishment on an exclusive basis. However, where they hold another position, responsibility or function, they must, with sixty (60) days following such a designation and each year within sixty (60) days of the anniversary of their nomination, submit a written declaration that mentions this fact.

The establishment's assets

Administrators must use the establishment's assets, resources and services according to the usage terms and conditions that are recognized and applicable to all users. They may not combine the establishment's assets with their own assets.

Undue advantages or benefits

Administrators must behave in a manner that does not result in their administrative duties creating undue advantages for themselves, their personnel or other individuals.

Administrators may not either directly or indirectly accept or solicit any form of advantage or benefit from an individual or company that does business with the establishment or acts on behalf of the establishment if the advantage or benefit is for the purpose of or is likely to influence the administrator in the performance of their duties or managing their expectations.

In particular, administrators must not accept gifts, sums of money, loans at preferential rates, debt forgiveness, employment offers, special favours or anything else that has an appreciable monetary value that could compromise or appear to compromise the administrator's ability to make fair and objective decisions.

They must not receive any pecuniary treatment or advantages with the exception of the reimbursement of their expenses incurred during the fiscal year in accordance with the conditions and scope determined by the government.

The Executive Director must, under penalty of being removed from their position, refrain from accepting any sums or direct or indirect benefits from either a foundation or a corporation that operates in the health and social services sector and solicits the public to donate sums of money or goods.

Transparency

Administrators must reveal all information and facts to the other members of the Board of Directors when they are aware that the communication of this information or fact could significantly impact an upcoming decision.

Abuse of power

Administrators must refrain from intervening in the staff hiring process, unless requested to do so by the Executive Director or a senior manager.

They must abstain from any approaches that favour friends or family members.

They must not act as an intermediary, even where they are not paid for their services, between an organization (for-profit or non-profit) and the establishment.

ONCE THEIR MANDATE HAS COME TO AN END, ADMINISTRATORS MUST:

- Exercise caution, discretion, honesty and loyalty.

To this end, the administrator:

Must behave in a manner that does not result in their administrative duties creating undue advantages for themselves, their personnel or other individuals.

During the year following the end of their mandate, they must avoid acting on their behalf or on behalf of another individual with regard to a procedure, negotiation or any other operation in which the establishment that they previously represented is involved, and on which they have information that is not public knowledge.

They must not, at any time, use confidential information that they obtained while performing their administrative duties.

They must refrain from making immoderate comments that could damage the reputation of the establishment and its personnel.

4. MECHANISMS FOR APPLYING THE CODE

Introduction of a request for review

Any allegations of misconduct on the part of an administrator or failure to comply with legislation or this Code must be communicated to the President of the Ethics and Good Conduct Committee, or, if the allegations involve the committee President, to another committee member. The individual who is made aware of such an allegation must advise the committee, which must meet within thirty (30) days.

The committee may also take the initiative to examine any instance of irregular conduct on the part of an Administrator.

Summary review

When the committee President is made aware of an allegation as outlined above, they may reject, following a summary review, any allegations that they find to be frivolous, vexatious or made in bad faith. However, they must inform the other committee members of their decision during the next meeting. The committee may then decide to proceed with an examination of the allegation in question.

The committee shall decide which means are required in order to conduct an inquiry following an allegation. However, the inquiry must be conducted in a confidential manner and must, where possible, maintain the anonymity of the individual who is the subject of the allegation.

When the Committee decides that the time is right, it must inform the administrator in question of the allegations that were communicated to the committee and outline the relevant legal provisions or Code provisions. Following a request on the part of the administrator within a reasonable timeline, they must be given the opportunity to have individuals of their choosing testify and to submit pertinent supporting documentation.

Where the Committee concludes that the administrator failed to respect legislation or this Code or that they demonstrated similar misconduct, the Committee shall submit to the Board of Directors a report containing a summary of the inquiry and recommendations for sanctions. This report shall be confidential.

The Board of Directors shall meet in a closed-door session to decide which sanctions to impose on the administrator in question. The administrator may not participate in the deliberations or the decision-making process, but they may be heard before a decision is made if they so wish.

Based on the nature and the gravity of the failure to comply or the behaviour, sanctions that may be taken against the individual in question may include a call to order, a reprimand, suspension from their position, or removal from their position. The Administrator in question shall be informed in writing of the sanctions that have been imposed.

Within sixty (60) days of the adoption of this Code by the Board of Directors, each administrator must submit a signed copy of the commitment shown in Appendix II of this Code.

Each new administrator must do likewise within sixty (60) days of their first day in their position.

Furthermore, the individual who is tasked with applying the Code must submit a signed copy of the commitment shown in Appendix III of this Code within sixty (60) days of their first day in their position.

2002-04-15

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Appendix 2 - DECLARATION OF PERSONAL INTERESTS

DECLARATION OF PERSONAL INTERESTS

of an administrator (not applicable to the Executive Director)

I,
administrator of the following establishment(s):

declare the following personal interests:

1. I have pecuniary interests in corporations, companies or commercial businesses identified below that do business with the establishment(s) mentioned above or are likely to do business with the establishment(s) mentioned above.

Names of the corporations, companies or businesses in question

2. I act as an administrator of a corporation, company or commercial business (for-profit or non-profit) identified below that has entered into a contract with the establishment(s) mentioned above or is likely to do business with the establishment(s) mentioned above.

Names of the corporations, companies, businesses or bodies in question

3. I hold the following positions:

POSITION

EMPLOYER

Provide the job title and employer name

IN WITNESS WHEREOF, I SIGNED IN
ON

ADMINISTRATOR'S SIGNATURE

DECLARATION OF PERSONAL INTERESTS of the Executive Director

I,
 Executive Director of the following establishment(s):

declare the following personal interests:

1. I have pecuniary interests in a corporation, company or business that has signed a professional services contract with another establishment that is governed under the Act respecting health and social services.

Names of the corporations, companies or businesses and establishments in question

2. I have pecuniary interests in a corporation, company or business that is likely to enter into a professional services contract with another establishment that is governed under the Act respecting health and social services.

Names of the corporations, companies or businesses in question

3. I act as an administrator of a corporation, company or business (for-profit or non-profit).

Names of the corporations, companies, businesses or bodies in question

4. I hold another position at a corporation, company or business (for-profit or non-profit).
POSITION **EMPLOYER**

Provide the job title and employer name

IN WITNESS WHEREOF, I SIGNED IN
 ON

EXECUTIVE DIRECTOR'S SIGNATURE

Appendix 3 - ADMINISTRATOR'S OATH OR AFFIRMATION



**OATH OR AFFIRMATION
OF THE ADMINISTRATOR - ROLE AND DISCRETION**

I, the undersigned, _____

a member of the Board of Directors of one or more of the establishments mentioned above, declare that I have read the Code of Ethics and Good Conduct that applies to administrators and was adopted by the Board of Directors on (date), and that I understand the content and scope. I declare that I am bound by each of the Code's provisions as if it were a contractual agreement that binds me to the establishment(s) in question. I am bound by the same obligations when carrying out administrative duties within another organization or company at the request of the establishment or where I am a member of another organization or company.

To this end, I, _____

swear (or solemnly declare) that I shall faithfully, impartially, honestly and independently carry out, to the best of my capacity and knowledge, all of the duties of my position and exercise all of my powers in the same manner.

Furthermore, I swear (or solemnly declare) that I shall accept no sums of money or consideration of any kind for anything that I accomplish or will accomplish while carrying out my duties other than the reimbursement of expenses incurred as allocated under legislation, and that I will not reveal or disclose, without being duly authorized, confidential information or documentation that I have knowledge of while carrying out my duties.

Signed in Kawawachikamach,
on _____

Administrator's signature

Appendix 4 - OATH OR AFFIRMATION OF THE INDIVIDUAL TASKED WITH APPLYING THE CODE



OATH OR AFFIRMATION OF THE INDIVIDUAL TASKED WITH APPLYING THE CODE - ROLE AND DISCRETION

I, the undersigned, _____
the individual tasked with applying the Code of Ethics and Good
Conduct, declare that I have read this Code that applies to administrators
and was adopted by the Board of Directors on (date), and that I
understand the content and scope. I declare that I am bound by each of
the Code's provisions as if it were a contractual agreement that binds me
to the establishment(s) in question.

To this end, I, _____
swear (or solemnly declare) that I shall faithfully, impartially,
honestly and independently carry out, to the best of my capacity
and knowledge, all of the duties of my position and exercise all of
my powers in the same manner.

Furthermore, I swear (or solemnly declare) that I shall accept no sums of money or consideration of any kind for anything that I accomplish or will accomplish while carrying out my duties other than the reimbursement of expenses incurred as allocated under legislation, and that I will not reveal or disclose, without being duly authorized, confidential information or documentation that I have knowledge of while carrying out my duties.

Signed in Kawawachikamach on

SIGNATURE OF THE INDIVIDUAL TASKED WITH APPLYING THIS CODE

Appendix 5 - Organizational chart

