



Our community, our hospital



KMHC EMERGES FROM THE PANDEMIC WITH RENEWED PRIDE AND PURPOSE



Ok tiiohserá:te ne 2022 - 2022 was a big year at KMHC. With the easing of COVID-19 restrictions and regulations, the exhausted team was able to catch their breath and focus on what matters the most: strengthening the health and wellbeing of the people - *onkwe'shón:'a* - by providing services that respond to the needs of the community as a whole - *otiohkhwakwé:kon*.

"2020 and 2021 - even the start of 2022 - were incredibly intense - *io'kstétie*. So much of our energy had to be focused on managing the pandemic," says outgoing KMHC executive director Lisa Westaway. "Then, finally, we were able to step back, look at the bigger picture, discuss what we needed to improve, and make a plan to achieve all the objectives we had set for ourselves prior to COVID." *lonkwate'nikonhrá:kwarihte* - we broadened our minds.

Some of those objectives were administrative in nature, like updating policies, procedures and protocols, establishing more efficient processes and systems, and securing more government funding. However, most of the objectives were geared toward improving the experience and well-being - *ata'karitéshera* - of the people who use the KMHC every day: patients, families, and staff.

"We strive to provide the best possible care and services, and every single person on our team has a critical role to play in that," explains Westaway. "So, we've been working very hard to create the conditions in which everyone can do their best work."

That hard work has paid off. *Kí tsohsera tsi náhe iotohé'tston* - In the past year, while undertaking a very rigorous internal program aimed at continuous improvement, KMHC also expanded its Inpatient Care unit; recruited four new doctors; launched an optometry clinic; reopened the dentistry and ophthalmology clinics;

established a special clinic for community members who don't have a family physician (Access Clinic); created a better system for making semi-urgent care appointments; and strengthened its partnerships with several community organizations and with the Hôpital Anna-Laberge.

To top it all off, KMHC had to go through a re-accreditation process last year, which it passed with flying colours: KMHC was awarded the highest possible level of recognition by Accreditation Canada for its organizational processes, flexibility, adaptability, compassion, and client-centred approach.

Tewa'khwísren tsi sénha entewate'nikonhraientáhston skátne kontiòhkwa oh nahò:ten iakwaio'tenhseratonhátie - "Another thing we're working on is improving our communications with the community. We want every community member to know who we are, what we offer, how to access all of our clinics and services, and how to give us constructive feedback so that we can better ourselves," adds Westaway. "This is their hospital, and they deserve to know what we're doing."

As part of that commitment, KMHC organized an open house in the fall. "It was fantastic being able to open our doors again, to show people our new facilities, and to introduce them to members of our team," states Westaway. "It not only filled us with pride; it also gave our visitors a renewed sense of pride in their hospital."

"We've got our ongoing challenges, like recruiting staff and sourcing funds. And, we're not perfect," she adds. "But we're extremely pleased with what we've achieved and honoured to play a role in ensuring the health and wellbeing of our community members. We move into the new year with great appreciation for one another, carrying forward a renewed gratitude for life and health." *Teiethinonhwerá:tonhs tsi akwé:kon iakwata'karí:te*.

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NOTE

Lisa Westaway stepped down as Executive Director of KMHC on April 3, 2023, to take on the role of Ontario Regional Executive of the First Nations and Inuit Health Branch of Indigenous Services Canada. Valerie Diabo, KMHC's Director of Community & Nursing Care, has since stepped-in as Interim Executive Director. You can read more about Diabo on Page 11.

“ Working together, we can make miracles happen. ”



Lisa Westaway, Outgoing Executive Director

KMHC LAUNCHES NEW SERVICES AND WELCOMES NEW STAFF

The Rolling Stones said it well: “*láh tió:konte thaòn:ton entewatié:nen tsi nahó:ten ionkwatonhontsó:ni* - You can’t always get what you want. But if you try sometimes, you just might find you get what you need.”

And so it is with KMHC, which has found ways to add a host of new services and clinics by establishing strategic partnerships and bringing more than a dozen new medical staff members on board to share their expertise – and the workload - *sénha é:so ne tékeni iawén:re asé:’tsi nihá:ti ratétsen’ts wahontáhsawen tehotiio’tenhs tsi nón:we ne tsi tehsakotitsén:tha.*



Dr. Rachael Eniojukan,
Director of Professional Services

According to Dr. Rachael Eniojukan, a family physician who has been working at KMHC since 2008 and who has been its director of professional services since 2020: “There’s a lot that’s new at KMHC, from expanded eye-care services, to additional internal medicine resources, to midwife services incorporating traditional approaches – *tsi niionkwarihó:ten.*” KMHC is also planning to expand its psychiatry services and is in the process of readying its Radiology Department. “I consider it an honour and privilege to help establish the Radiology/Medical Imaging Service at KMHC,” says

Medical Imaging Coordinator Jennifer Julien. “Together, I’m confident that we will create something extraordinary.”

KMHC has been working with the Université de Montréal school of optometry to provide a broader range of services, resulting in the recruitment of four eye specialists. Some are students, who are already certified optometrists and who wanted to gain some community experience, particularly in Indigenous communities, explains Eniojukan. “It’s a win-win on both sides.”

“We have also hired a general surgeon/*shakoia’tahrè:nas* to do consultation for us,” notes Eniojukan, referring to Dr. Lillian Lee, whose full-time job is Chief of Surgery at Hôpital Anna-Laberge in nearby Châteauguay. Dr. Lee works in a KMHC clinic once a month, so patients can be seen in a place that’s familiar and more convenient for them. “She may look after a few lumps and bumps for us,

but it’s mainly clinical consultation,” Eniojukan explains.

Thanks to another partnership, this time with the McGill University Health Centre (MUHC), KMHC now has two internal medicine specialists visiting once a month. Their time at KMHC will be staggered, so a specialist can be on hand every two weeks. “It gives us quicker access to internal medicine specialization,” Dr. Eniojukan, herself a McGill grad in family medicine, said, noting there are hopes to make the centre a teaching venue for internal medicine in the summer of 2024 – *tsi niwakénhnes ne 2024.*



The good thing about the KMHC community is that we are like a family. We are ourselves, and physicians fall in love with us.

Although family physicians are in short supply everywhere, KMHC has managed to recruit four new family doctors, which means half of its patients are now connected to one, says Eniojukan. “One of the helpful factors is that we are a rural

medicine teaching site with links to McGill’s medicine program,” she adds. The KMHC is now also linked to the family medicine teaching group at Hôpital Anna-Laberge. The goal is to continue recruiting two or three new family doctors a year.

“The good thing about the KMHC community is that we are like a family. We are ourselves, and physicians fall in love with us,” Eniojukan says, noting that newly-arrived doctors often remark on how relaxed and unstressed they feel in the setting. “It makes the difference. They see it as a healthy, positive working environment, and I think that’s a big factor in recruitment and retention.”

Three new doctors tell us what they think about working at KMHC

Wa'tewatohseróhetste', sénha é:so ne tékeni iawén:re asé:'tsi nihá:ti ratétsen'ts wahontáhsawen tehotiio'tenhs tsi nón:we ne tsi tehsakotitsén:tha - More than a dozen new medical staff have joined the Kateri Memorial Hospital Centre within the last year, many on a part-time basis. This does two things: It allows the centre to offer a wider range of services to the community and it gives the new staff members a working experience they love. We spoke with three, asking them all the same questions.

Dr. Lillian Lee
General Surgeon



Dr. Lillian Lee is chief of surgery at Hôpital Anna-Laberge in Châteauguay. She now provides general surgery consultations at the KMHC, as well as minor surgery procedures and follow-ups for her cancer patients (primarily breast and colorectal oncology). *McGill iakoterihwajenhstá:ne* - She went to medical school at McGill and did her residency training at Université Laval and has a particular interest in minimally-invasive laparoscopic surgery.

Dr. Romina Pace
General Internist



Dr. Romina Pace is a general internist who also trained at McGill. *Skátne ieio'tenhs ne Onkwehonwe'shón:'a tánon ieiá'tahsní:nenhs ónkha'k rotinonhwáktani* - She has been providing clinical consultations and working alongside Indigenous communities in northern Québec to develop initiatives to improve health outcomes and delivery of care. Pace is now working on laying the foundation for a program of quality improvement and cultural safety initiatives at the MUHC to improve care for Indigenous patients.

Dr. Siwen Jin
Family Physician



Dr. Siwen Jin is a family physician - *ietétsen'ts* - specializing in pediatrics, and most of the patients she treats at KMHC are children. Another graduate of McGill, she completed her residency at Hôpital Anna-Laberge in Châteauguay and continues to work there. She spends the rest of her time helping at a refugee clinic in Montréal's Parc-Extension neighbourhood.

WHAT DREW YOU TO KMHC?

Dr. Lee Working at Anna Laberge hospital, I already had many residents from Kahnawà:ke under my care. They are some of my favourite patients, and I love how family-oriented and kind they are. I wanted to be able to provide a more streamlined service directly on the reserve to optimize their care and access to a general surgeon. During medical school, I trained on a Navajo reservation in Chinle, Arizona, for several months - *tohkáre niwenhni:take*. I was so humbled to learn about the complexity of the issues that Native men and women have to face every day. I also had the opportunity to learn about the KMHC during a tour of the premises on my last elective in Indigenous health, and it just seemed like fate that I signed on later to work next door at Anna Laberge after residency... so I knew I had to come and join Kateri hospital as well!

Dr. Pace I was drawn to KMHC after learning of the need for General Internal Medicine (GIM) services in the community. Having had contact with community members at the MUHC, I was excited - *tewa'ksterihá:ton* - to help and provide care closer to home for patients.

Dr. Jin Having done my residency in Châteauguay, I had the pleasure of meeting members of the community during my training. I was most impressed by the blend of traditional medicine and western medicine, as well as the community spirit that is going strong! It is great to see three or more generations interacting regularly together.

WHAT HAVE YOU ENJOYED MOST ABOUT YOUR CONTACT WITH THE COMMUNITY HERE?

Dr. Lee I love how committed the community is to embrace their history and traditions and to heal from the generational trauma they have lived. I'm seeing a lot of my younger patients determined to improve the community as a whole and return to their roots individually... they are so beautiful and strong - *teiohonkwehser:io tánon tion'shátste* - , and I'm honoured to be able to witness even a glimpse of their journey. I've also enjoyed being able to explore Kahnawà:ke's local businesses when I'm here!

Dr. Pace The community is so welcoming. It has truly been a pleasure working here! Everyone I have met has been kind and caring.

Dr. Jin The kindness, the authenticity and the desire for constant improvement!

WHAT HAS SURPRISED YOU ABOUT KMHC?

Dr. Lee All the providers, the health-care workers, and the administrative staff here really seem to have the same vision to adapt and respond to the needs of the community. I adore their commitment to incorporating both contemporary and traditional medicine to offer holistic care directly in Kahnawà:ke.

Dr. Pace How the KMHC staff goes above and beyond to care for patients. The team is incredibly dedicated! *Tetewatia'takehná:tshera* - Everyone is willing to help each other out and ensure that KMHC runs smoothly.

Dr. Jin *Kahkwákon* - The food is amazing! The cafeteria at Kateri Memorial is the best I have tried in all the hospitals in Greater Montréal.

KMHC's Inpatient Care teams are dedicated to their patients and committed to providing quality care

Left: Robin Guyer, Manager of Long-Term Care
Right: Samantha Cross, Manager of Short-Term Care



What's the difference between Short-Term and Long-Term?

SHORT-TERM CARE UNIT

We accept patients who have the following needs: Post-surgery care, palliative care, medication adjustments, extended IV therapy, physical rehabilitation (depending on their requirements)

LONG-TERM CARE UNIT

We accept individuals who require 24-hour care due to cognitive and mobility issues that limit their functional autonomy. We call them residents, because they live at KMHC.

So, in April, we've got a team coming from John Abbott to give them a course in it. It's really exciting, because we weren't able to offer any training during the pandemic." The nursing team also initiated another important new project: In April/*Onerahtókha*, they will begin a course at the CHUM on how to treat detox patients, so they can start accepting them in the Short-Term Care unit. *Iorihowá:nen tsi nahò:ten tehotiio'tenhs ne tewá'tsnie né:'e tsi é:so nihá:ti Kahnawá'keró:non enhantihsnié:nen* - "This is very meaningful to our nurses, because there is a real need for this type of care in the community," says Cross. Guyer also stresses the special link between the KMHC and the Kahnawà:ke community.

People need to know that our staff are incredibly dedicated, that they really care about the patients, and that they give their all every day. (R. Guyer)

"A lot of our staff members are from here, and our volunteers are all locals," says Guyer. "They get to know all the residents and patients, and it feels almost like an extended family."

It's not all roses, though. Cross and Guyer are quick to acknowledge that things are not always perfect. "There is no way any hospital is going to be perfect, but we strive to learn from our experiences and we take steps every day to improve," says Cross.

Being a healthcare professional these days is extremely demanding, due to ongoing staffing shortages and a never-ending variety of viruses. So, it may come as a surprise to hear that Robin Guyer and Samantha Cross absolutely love what they do. Guyer and Cross are in charge of Inpatient Care at the KMHC, and their enthusiasm comes across the minute you start speaking with them.

"Wa'kenonhwéskwani tsi niwatio'tenhserò:ten - I love my job. I truly enjoy waking up and coming to work every morning/*thia'teiohrhon'kehserò:ten,*" says Cross, who worked on and off as a nurse/*tewá'tsnie* at KMHC for many years, then became manager of the Short-Term Care Unit.

Sha'té:kon iawén:re niiohsérà:ke tsi náhe watiakotáhsawen tánon iah nonwèn:ton wa'eiá:kenhn - "I came to work here 18 years ago and never left!" adds Guyer, who has been manager of the Long-Term Care Unit for three years. "Not every day is easy. But I love my job and I don't want to be anywhere else."

With the worst of the pandemic behind them, Guyer and Cross can now work on honing their management skills and finding ways to provide even better care to patients. And, now that the expansion space meant for Inpatient Care is no longer being used as a COVID-19 ward, they are also looking forward to opening the new beds in their respective units.

Two nursing consultants are currently working with the entire Inpatient Care team to help them operate more efficiently and effectively. This will enable them to gradually take on more long-term residents and short-term patients. "It's about working smarter," says Guyer. "With just a few tweaks here and there, like streamlining our communications and ensuring that every staff member gets to use the full scope of their training, we're going to become much more efficient. This means we'll be able to provide better service and treat more people."

"Working with the consultants has been very empowering, because everyone has been able to express concerns and propose ideas," adds Cross. "For example, our nurses told us they wanted to learn more about wound care.

Volunteers Wanted: Come make a world of difference in the life of a KMHC resident

Vanessa Rice swears that, once you start volunteering, you'll be hooked.

Rice is the KMHC's Volunteer Coordinator, and she has been volunteering at KMHC for 15 years, both in the hospital and as a breastfeeding consultant in the community – *wíhsk iawèn:re niihserá:ke kén:'en tsi tehsakotitsèn:tha watiakoio'tenhs, tánon ne ó:ni ka'nistéhsera teiakohsnié:nens*. "Our residents can feel isolated, they don't always get visitors every day, and the staff can't be with them all the time," says Rice. "That's why volunteers are so important. They not only visit patients, they also help out with feeding and run the social activities."

The Inpatient Care unit is always looking for more volunteers. "We need people of all ages, genders and backgrounds, so we can pair them up with residents they'll have the most in common with, or who they might even know through family or friends," says Rice. "Believe me: volunteers get as much out volunteering as the residents do. Just try one visit. Once you see the smiles on their faces, you'll want to come back!" she assures.

Adds Robin Guyer, Manager of Long-Term Care: "Volunteers are critical to the care we provide. We encourage them to join our team and see what we do. Even an hour a week can make a huge difference in someone's life."

Volunteers can choose to do a wide variety of things, like:

- Visiting with residents in their room/*letshinatahré:nahse né:ne ratí:teron*
- Feeding residents who need some extra help/*Enhonwati:nohte tsi nonkwá:ti ne rotihné:se tsi entahon'tshká:hon*
- Playing games or doing arts & crafts in the Activities Room/*Enhonwati'nikonhró:ri né:ne enhatoráhstanion tóka' ni' thé:nen nahó:ten enhon'tshwa'tánion*
- Decorating rooms and common areas for the holidays/*Enhatinonshshahserón:ni tsi nikahá:wi ne entewate'nikonhroiá:nehr*
- Giving hand massages, manicures or hairdos on "spa days"/*Entehstsi'nikharons tóka' ni' skwatá:ko raotinónhkwihis tánon tehsatia'tohserókwes ne raotitshén:na*
- Taking residents for walks, either outdoors or indoors/*Skátne tesa'khwatá:se, tóka' n'átste tóka' ni' kanónhskon*
- Raking, mowing and landscaping the residents' yard in the warm months/*Atstéshon ne kahén:take enhatihentahserón:ni*
- Helping residents plant flowers in the garden during springtime/*Skátne ratí:teron testsi'tsaiénthohs kahéhtakon tsi niwakénhnes*
- Taking residents to medical and dental appointments outside the hospital/*lenhonwatia'ténhawe tsi tehsakotitsèn:tha rotí:teron tsí:non ne inehonwaná'tkose*



01



02



03



04

01 Standing, left to right:
Volunteers Janis Saylor
and Lois Saylor;
Sitting, left to right:
Residents Loretta
Beauvais and Pepper Horn

02 **Vanessa Rice,**
Volunteer Coordinator

03 **Valentine's Day**

04 **Residents' garden**

DO YOU WANT TO BECOME A VOLUNTEER?

- *ÍHSEHREK KEN
ENHSEKHSNIÉ:NENS?*

Contact Vanessa Rice at:

450-638-3930
Ext. 2237

Hoping for the best; preparing for the worst

KMHC nearing completion on overhaul of emergency measures

WHAT IF?

It's the question that keeps people who work in risk management and emergency preparedness awake at night. And, when it comes to a medical facility such as the Kateri Memorial Hospital Centre, there are a lot of what-ifs, as Melissa Arquette has come to realize in overseeing an upgrade of the KMHC's comprehensive emergency measures.

"We're helping the community stay safe," she says, "including our visitors, our staff, our patients, and our elders. I really enjoy it; it's a challenge." *Tetewatatia'tekéhnahs tsi tóhsa ónhkha'k aiakwanonhwa'ktani. lakononhwehskwani (Melissa) tsi niio'tenhseró:ten né:'e tsi wató:re - teiotonhontsóhon enienion'tonió:ko.*

Formerly an administrative assistant/*iakotirihwahseronnién:nis iontatieawá:se* for the Mohawk Council of Kahnawà:ke, Arquette has been at KMHC since 2022.

Raised in Akwesasne until she was 16, and a resident of Kahnawà:ke ever since, Arquette comes armed with a Risk Management course she took at McGill University, as well as a diploma from St. Lawrence College in Cornwall. She's also working on her Bachelor of Business Administration at Yorkville University.

Plans for the emergency measures revamp are nearing completion/*ò:nen thó:ha wát:sha*. They consist of a training program to help staff employ non-

violent responses in dealing with violent situations, as well as the establishment of a code system that spells-out exactly who does what in different types of emergencies, which could be anything from dealing with a fire or a spill of hazardous material, to the dreaded "active shooter" scenario practised by schools/*tsi ionterihwaienhstákhwa*, hospitals/*tsi tehsakotitsén:tha*, universities/*è:neken tiótte tsi ionterihwaienhstahkwa'kó:wa*, and other institutions everywhere/*tánon ne ó:ia'k nón:we thotio'tenhstha*.

Another type of emergency training includes programs being run by the local fire department/*ron'swahthà:ke* on the KMHC's fire-extinguisher and sprinkler systems. And, perhaps by late this summer/*tsi nenwatkenhnò:kten'*, KMHC may stage a major emergency exercise involving KMHC staff and local police and fire personnel, aimed at improving cooperation between the different agencies involved in crisis response.

"Staging that exercise is definitely going to be a big endeavour," Arquette says.

The goal of all of this work is to bring KMHC's emergency plans and procedures into line with those employed by other similar medical facilities across Quebec, Arquette notes.

Aiá:wenhs tsi entewatahsonhá:ton Enniskó:wa toka' ni' Onerahtókha - "We're expecting to go live in March or April," she says, adding that the biggest remaining hurdle is to make sure staff are fully trained to handle the different types of emergencies they might have to face. Trying to coordinate training and refresher sessions, when everyone has incredibly busy schedules, is the toughest part of her job so far.

"We're starting to see some light at the end of the tunnel," she says.



It's a serious subject, but we end up laughing together, which makes us closer as a team. We're all working as hard as possible to make sure everyone is safe.



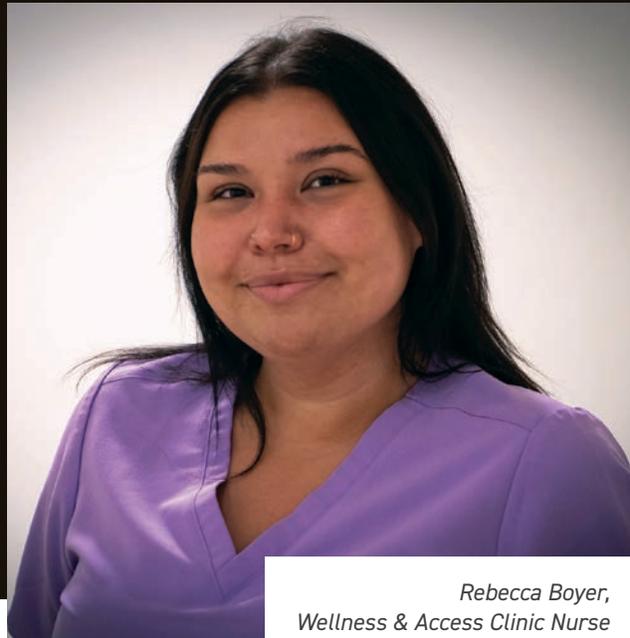
Melissa Arquette, Administrative Technician to the Director of Finance and Operations

SPOTLIGHT ON OUTPATIENT CARE:

Learning how to work smarter to create a better patient experience



Krissi Delaronde,
Assistant Manager of Outpatient Care



Rebecca Boyer,
Wellness & Access Clinic Nurse

When the Outpatient Care team members learned they would be the first ones to undertake an internal improvement program, they didn't all burst into applause. "Changing routines is hard," says Krissi Delaronde, Assistant Manager of Outpatient Care. "But, once we started working with the consultants and began to understand how making changes would make things better for our patients and our team, everyone got on board."

The official name of the program is *Lean Management Training and Continuous Improvement*. It sounds complicated, but it's actually not. It just means identifying which aspects of your organization need improvement, coming up with realistic ways to address those issues, structuring your team so you can work more efficiently, and putting processes in place to make everything run more smoothly.

"Nothing is being imposed by the consultants or by management.

Everyone – doctors, nurses, nutritionists, physiotherapists – gets to propose ideas and give feedback," explains Rebecca Boyer, Wellness & Access Clinic Nurse. "It's teamwork. It's empowering."

The team's main goal was to improve access to the clinic. "We surveyed community members, and their main complaint was that it took too long to get an appointment," says Delaronde. "We also knew we had to do something to limit the number of emergency walk-ins, because it put pressure on all of us to accept them, but then it disturbs the doctors' already busy and full schedules and puts them behind," adds Boyer.

So, first-off, the team created a new system for handling emergency walk-ins: They now have specific criteria for accepting them and allocate just a couple of spots for them in the daily schedule. Next, they found a way to free-up some of the doctors' time so they can see more patients in a day: Instead of doctors doing pre-assessments and prepping patients for minor procedures, nurses are now doing them. "Now our nurses are getting

to apply their training and use their clinical judgment," explains Boyer. As a result, patients can now call the clinic any day of the week and get an appointment within days, instead of weeks.

The program has helped the team achieve another goal: Creating a healthier workplace. "We're not even done yet, but we already see a big difference," explains Delaronde. "Patients are happier, and staff are happier. It's very rewarding."

WHAT ARE THE NEXT STEPS?

Our next goal is establishing better communications with the community, so people understand how things work here.

And we'll continue to re-assess things on a regular basis. This is continuous improvement, after all!

(Krissi Delaronde)

Aòn:ton tsi io'kstétie nò:nen enhserihwá:reke tsi tehsanekwenhsatsikhè:tare
- Finding out that you have diabetes can be very upsetting. “We let people know they’re not alone in this journey,” says Tanya Diabo, Diabetes Nurse Educator and Wellness Nurse at KMHC.

Along with dietitian-nutritionist Joëlle Emond, Diabo is one of the main actors in KMHC’s “At Peace with Diabetes” program. The goal is to empower clients. *Tóka’ skátne tetewatia’takéhnhas, ión:ton tsi’k ónkha’k tehotenekwenhsatsikhè:tare sénha enhonnata’karí:teke nò:nen enhatíentáhston oh ní:ioht tsi enwá:ton teio’ttenionhátie tsi ronónhnhe tánon kahkwí:io rón:ne’ks* – With regular support, people living with diabetes learn to manage their condition through nutrition and gradual lifestyle changes. The circle of care at KMHC includes the physician, diabetes nurse, dietitian, pharmacist, eye doctor, dentist, foot care nurse, and specialist doctors. The program aims not only to help people achieve targets for their physical health, but also to address their emotional and mental health needs – *Ka’nikonhrí:io*.



Diabetes-related nutrition guidelines

“At Peace with Diabetes” program supports and accompanies people living with diabetes



*Left: Tanya Diabo, Diabetes Nurse Educator and Wellness Nurse
Right: Joëlle Emond, Dietician-Nutritionist*

***Edmond tánon Diabo ietihiatonhserahá:wi tsi enietiríhonnien ne teionekwenhsatsikhè:tare niiorihwá:ke* – Emond and Diabo are certified diabetes educators. Together, they work closely with clients, always communicating back with the referring physician and coordinating with other health professionals.**

Tsi náhe ne 2013 niiohserá:ke – Back in 2013, KMHC participated in Forge Ahead, a university study that involved clinical and community teams in eleven First Nations communities across Canada. “We worked with community members and other healthcare professionals to reinvent our diabetes care program,” Emond recalls. The result was a strengthened partnership between the dietitian and the nurse, which led to more consistent care, increased coordination among health professionals, and, ultimately, less of a burden on clients.

Nò:nen ratétsen’ts tehotiriwahtetiá:ton skátne ónkha’k tehotenekwenhsatsikhè:tare, Diabo iakorihwahserón:ni’s kátke nò:nen kátne enwá:ton enhontio’tenhs – When

a physician diagnoses a person with diabetes, Diabo receives the referral and sets up an appointment. In this first one-hour session, she reviews the person’s knowledge of diabetes, explains what to expect, possible complications, and the plan for care. A few weeks later, the client meets with Emond, who focuses on how to improve blood sugar control through nutrition. The nurse and dietitian adapt their intervention to each client’s specific stage of change—whether they’re ready to take action or not. “We assess where the person is at and take it from there,” says Emond.

After the initial meetings, the nurse and dietitian offer joint sessions to reduce the client’s total number of appointments. They monitor aspects such as blood pressure, since cardiovascular disease is a potential complication of diabetes. They also work with the doctor to adjust the person’s medication, if they’re experiencing any uncomfortable side effects.

Ultimately, the goal is to help people improve their blood sugar numbers and manage their diabetes so they can live normal lives. “We accompany everyone at their own pace and adjust our plans accordingly,” says Emond.



KMHC establishes new complaints process

Alexis Shackleton, Ombudsperson

Do you have a complaint you'd like KMHC to address? A new, independent *lerihwahserón:nis*/Ombudsperson position has been created to help resolve issues. The goal is to make the complaints process more transparent, credible, and efficient.

Many community members may be familiar with Alexis Shackleton from her work as Director of Client Based Services with the Mohawk Council of Kahnawà:ke. Now, in addition to that role, she will serve as KMHC's *lerihwahserón:nis*/Ombudsperson on an as-needed basis.

Complaints used to go to the hospital's Executive Director. The new structure forwards all complaints to the *lerihwahserón:nis*/Ombudsperson. As a third party who doesn't work at the hospital, Shackleton will assess, analyze and investigate the complaint. This involves reviewing the information, policies and processes, and speaking to the people involved, to find a resolution.

"I will be focusing on the client experience and the services that are provided directly to the community," she explains. "I look at

the background, the processes in place, whether they were adhered to. *Né:'e tsi Kahnawá:ke kí:teron tánon íáh tewatio'tenhs* – Because I'm from the community and coming in as someone who doesn't work in the system, I'm evaluating the situation as a potential user of the hospital. I think that's a benefit." At the same time, her professional background equips her with experience in handling issues related to providing community services.

The *lerihwahserón:nis*/Ombudsperson can also make recommendations to KMHC's Board of Directors to address structural issues. Certain complaints are shared with the commissioner at the *Centre intégré de santé et de services sociaux de la Montérégie-Ouest* (CISSS-MO) as required by law.

KMHC is in the process of updating its website to explain the new process and to provide a form – *kahiatónhsera tehsá:wis* – for submitting a complaint. Community members can also request assistance to prepare their complaint, which can be made in writing or verbally.

Mendy Sananikone-Thavonekham, Manager of Quality Improvement, Risk Management & Innovation at KMHC, says they've been working closely with ombudsperson services and complaints commissioners at CISSS-MO and government agencies to develop the new position, policy and reporting structure, and

to provide training to the *lerihwahserón:nis*/Ombudsperson. Ultimately, she hopes these changes will make community members feel more comfortable expressing themselves and giving feedback to the organization.



Our goal is to work in partnership with clients. If they trust and feel they have someone who is not directly in management to receive their complaints, maybe they'll be more comfortable and open to discuss things, so we can improve the service together.

I will be focusing on the client experience and the services that are provided directly to the community.
(Alexis Shackleton)



Cultural safety project aims to improve access and care for Kahnawà:ke residents at Hôpital Anna-Laberge

KMHC and the *Centre intégré de santé et de services sociaux de la Montérégie-Ouest (CISSS-MO)* have begun implementing a new action plan to reduce barriers and improve community members' access to health and social services.

"This is a real collaboration that emanated from mutual discussions," says Lisa Westaway, Executive Director at KMHC. "Our two organizations developed and are carrying-out the project together."

Catherine Lantin is the Cultural Safety Project Manager at CISSS-MO, although she can often be found at her KMHC office, too. *Tsi nikahá:wi ne Ohiaríha 2022* – In June 2022, she began with a research and analysis phase. She conducted nearly 50 interviews with management teams at KMHC, Kahnawà:ke Shakotíia'takehnhas Community Services (KSCS), and CISSS-MO. Wa'ehska:neke tsi "I wanted to understand the frustrations, barriers and obstacles to collaboration—and the things that were working well," she explains. She also met with Onkwata'karitáhtshera, which groups together community organizations in health and social services.

Three key barriers emerged. The first was language, whether it's access to services in English, to a Mohawk language interpreter, or between professionals at the two organizations. The second was the need to better connect staff at the two organizations. And the third revolved around specific access and care issues, such as community members not feeling

culturally safe at the Hôpital Anna-Laberge emergency room (ER).

An action plan was finalized at the end of 2022, with 52 items to be completed by June 2024.

Tsi nahò:ten kwáh tetia'ttíhen - One noticeable change will be the creation of a family room at Hôpital Anna-Laberge, where community members can gather when a loved one is in the ER. The hospital is also striving to employ more workers who speak English and to provide signage and documentation in English explaining what to expect when you come to the ER.

lakwahská:ne'ks tsi Kahnawa'kehró:non entiateri'wahserò:n:ni's tsi kèn:tho ehontiió'ten - Another action plan item is to hire people from the community to act as liaisons at Anna-Laberge, where they will help with communication and knowledge transfer and provide an element of safety.

Other actions relate to increasing staff training and improving communications. To that end, KMHC has created a video to help CISSS-MO staff better understand the community's culture. The two organizations are also working on ways for professionals to get to know their counterparts at each other's facilities, so as to improve communication about clients, quickly resolve issues, and ensure better follow-up and continuity of care.

"All these actions should have a direct, positive impact on community members' access to services and feelings of safety," says Westaway.



This is a real collaboration that emanated from mutual discussions.

(Lisa Westaway)

Hôpital Anna-Laberge



All these actions should have a direct, positive impact on community members' access to services and feelings of safety.



INTRODUCING KMHC'S NEW INTERIM EXECUTIVE DIRECTOR

Although Valerie Diabo is new to her role as Interim Executive Director, she is certainly not a stranger at KMHC. "I first worked here in 1988 as a nurse's aide," she reminisces. Over the years, she held various positions within the organization, such as a patient attendant, Licensed Practical Nurse, and Registered Nurse, before transitioning into management.



Valerie Diabo,
Interim Executive Director

Diabo began her nursing career at St. Mary's Hospital from 1990 to 1997, where she learned the significance of teamwork and positive nurse-client relationships. However, after completing her RN studies, she returned to KMHC, which she fondly calls her "second home."

I'm passionate about my organization and my community

(Valerie Diabo)

Since 2007, as KMHC's Director of Community & Nursing Care, Diabo has collaborated with senior management teams, staff, partners, and community members.

"I was immensely honoured to be asked to step in as Interim ED," Diabo shares.

In her new role, Diabo strives to maintain continuity within the hospital and prioritize the progression of strategic orientations within the organization. "Despite the change, it's business as usual here," she emphasizes.

On a personal note, she views this opportunity as a chance for professional growth and the exploration of potential future roles.

For Diabo, this is both a challenge and a labour of love. She asserts: "I'm passionate about my organization and my community; there is nothing more rewarding than caring for your own. That's why I go home every day feeling good about what I've accomplished."



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