2010-2011 Annual Report

with hands with heart

Grand River Community Health Centre
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www.grandriverchc.ca
Every One Matters.

**Vision**
Our vision is a community where all members have a sense of equity and belonging and where we work together for better health: Healthy Individuals. Healthy Communities. Healthy Futures.

**Mission**
Through collaboration and leadership, the Grand River Community Health Centre provides opportunities for the people of Brantford/Brant to lead healthier lives. GRCHC provides community-based primary health care and pursues wellness, health promotion and community development initiatives.

**Values**

**Respect** is the cornerstone to creating an inclusive non-judgmental service environment for our clients and a creative and supportive work environment for our staff and volunteers.

**Accessibility** to programs and services supports individuals in setting and achieving their own health goals.

Inter-professional and inter-agency collaboration is important to ensure that services are responsive and client-centred.

**Partnerships** within the health care sector and across sectors, improve services to our clients and our community.

**Accountability** to our clients, our community and our funders is integral to GRCHC growth.

Cover artwork: The photos featured on the cover and at the top of each page depict some of the 100 cast hands and objects created by members of the community as a Heart to Art project. The art project was coordinated by artist Marcia Tavernese and will be a feature installation at the GRCHC permanent building.
Our last year has been full of milestones in establishing a new Community Health Centre. In last year’s report, we recognized that our first primary care client was seen in the summer of 2009. In April 2010, we celebrated the one-year anniversary of opening our interim site. Since then, our primary care team has served several thousand clients with numbers continuing to grow. Our impact in the community in a wide range of health promotion and community development initiatives is now well established.

Another key milestone was the development of our inaugural strategic plan, which is outlined herein. We have set a direction on several fronts and are proud of our achievements.

On the cover is a picture of an art project of 100 cast hands. It will be a feature of our permanent site. More importantly, it illustrates the theme of “with hands—with heart.” The staff, volunteers, board members and others assembled through this Health Centre live that theme and demonstrate a deep commitment to our clients and our community. Of course, we don’t do this alone. We are also deeply indebted to the dozens of agencies with which we collaborate. Together, with our partners and our clients, we continue to improve individual and community health and well-being.

So too are we grateful to our funders: the Ministry of Health and Long-Term Care, the Local Health Integration Network and a variety of granting agencies and individuals. Our sincerest appreciation.

Community Health Centres are making their mark across Ontario. Our Health Minister said it well: “Community health centres work. They focus on prevention. They focus on wellness. They focus on being there for people who have challenges accessing our health care system. In my opinion, I think community health centres really capture the very best of Ontario’s health care system.” (Honourable Deb Matthews, Minister of Health and Long-Term Care, November 2010)

The upcoming year holds great promise. Our Centre is approaching full-staffing. A new permanent building is in sight. Our team is making great strides in quality primary care, in expanding the range of health promotion activities and in our achievements in community development.

At the same time there are great challenges. Issues of health equity remain. Barriers to well-being for marginalized populations still exist. While the relevance of social determinants of health (e.g. adequate income, housing, social supports) is increasingly recognized, concrete strategies remain hard to find. Much is still needed.

Everyone at GRCHC is grateful for your continued support.

Peg Purvis
Chair, Board of Directors

Peter Szota
Executive Director

With hands, with heart

Board of Directors
2010-2011

Paul Armstrong
Donna Creighton
Bev Gow
Kareen Hall
Bruce Hodgson
Denys Jones
Jamie LeClair*
Louis Muscat*
Rose Press
Peg Purvis
Anna Romano
Lynn Stone
Dick Verity

*indicates directors who have now left the Board.

Thank you!
A special thank you to the many volunteers who build a healthier community by helping in our centre, on our Board, committees and focus groups, and through our community programs.
Reaching out

All the kids have said how much they are enjoying going home with fresh vegetables every week (to help feed their families). All the kids gather the harvest as a group and happily share the bounty... no arguing about it.

Gloria, Garden Coordinator

Thank you so much for making this happen. If not for you, it wouldn't be.

LBGTQA group member

This snack (at 2 p.m.) is the first thing I've eaten all day.

Three of the Heart to Art participants

We recently had a client join the stitch n learn group, she felt very socially isolated, and cried a lot. Since joining, she is really enjoying meeting other people and has re-learned to knit. She told me last week she is enjoying knitting at home and has requested that I teach her rug hooking...Oh, and she smiles a lot now.

Gloria, Community Support Facilitator/Advocate

Clients & community members enjoyed laughter, displays, and a great bowl of chili at our Warm Winter Welcome.

Growing friendships & healthy food in the community gardens.

Cooking, crafts & conversation at the Steps to Success program.

Kids’ activities in the park.

A first for Brantford—Mayor Chris Friel reads the official proclamation declaring Pride Week in Brantford. The GRCHC works with the local LBGTQA group to create a more inclusive community.
Because community matters

Heart to Art, a partnership between the GRCHC and the Brantford Arts Block, uses art-related activities aimed at developing greater social skills, resourcefulness, and healthy eating practices. This year’s activities included hand casting, skateboard design (pictured at left), knitting classes, art lectures, mush hole art exhibit, native dancing, inter-generational programs (pictured below), and more.

A sampling of some of the other community programs we have been involved with over the past year:

- Peace & Diversity Project
- Anti-Poverty Workshop for Frontline Workers
- Grand River Council on Aging support
- HIV/AIDS needs assessment
- On-line Food Access Guide & Website
- “Youth Unlimited” — a day in the life of at risk youth
- Equity Forum—fostering equity in the community
- Community Food Advisor—volunteers providing nutritious cooking demos and services
- Community well-being teams in Paris, Scotland, St.George
- Poverty Roundtable
- Step Up Stroke Prevention Program
- Active Grand
- Do the Math (food/poverty awareness) Challenge
- STREET Program—improving health & safety for sex trade workers
- Smoking cessation and Council for Tobacco Free Brant
- Dying for Better Care—HIV/AIDS education series
- Bone Health and Falls Prevention Committee
- Diabetes Education programs

Have you spotted our community outreach van?

GRCHC staff work not only in our centre, but in the community as well, providing contact, support and services to individuals and groups at various locations.
A gentlemen approached me at outreach to show me his leg, which was causing him pain. When I looked at it, there was a black spot of decaying skin, and an obvious infection travelling up his leg. I asked how he got that, he told me that it was from an injection injury. Ginny agreed to see him immediately at the clinic and we started an injection antibiotic treatment. We both tried to convince him to go to the hospital, his wound was too much for us to debride and treat. I offered to even go to the hospital with him, and he paused and said to me, “if you care about me that much, then I should care for myself that much.” You could see that was a pivotal moment for him. He received further treatment from Shannon at our centre and I followed up at outreach. His wound is healing and he is doing very well.

Margaret, RN

Community outreach with our local partners has led some clients into the CHC who, for the first time, feel safe and comfortable seeking mental health services. Our mental health outreach efforts have grown to include former military personnel, young adults struggling with homelessness, other adults who have recently lost their jobs and seniors who feel isolated.

Marc, Social Worker

GRCHC Staff
Melissa Atkinson, Health Promoter • Morgan Braganza, Heart to Art Health Promoter • Stacey Brown, Counsellor • Margaret Cole, Registered Nurse • Carola Collins, Primary Care Physician • JoAnne Dubois, Community Developer • Sarah Gill, Health Promoter • Cailynn Golding, Registered Nurse • Bonnie Gray, Manager, Health Services/Registered Nurse • Ginny Greene, Nurse Practitioner • Katie Hanke, Registered Dietitian • Shannon Hillsden, Primary Care Physician • Christine Hurst, Office Manager/Executive Assistant • Jan Jacques, Administrative Assistant • Sam Janacek, Medical Secretary/Receptionist • Karen Kuzmich, Manager, Health Promotion & Community Development • Marc Laferriere, Social Worker • Les Lee, Primary Care Physician • Janet Luimes, Nurse Practitioner • Cindy Mather, Registered Practical Nurse, Chronic Disease Specialist • Gloria Ord, Community Support Facilitator Advocate & Community Garden Coordinator • Michelle Overholt, Nurse Practitioner • Kathy Poirier, Grand River Council on Aging Coordinator • Karen Rigs, Medical Secretary/Receptionist • Celia Robinson, Nurse Practitioner • Peter Szota, Executive Director • Marcia Tavernese, Heart to Art Program Coordinator • Jenn Zanatta, Medical Secretary/Receptionist (staff list as at September 2011)
Financial statements
for the year ended March 31, 2011

GRAND RIVER COMMUNITY HEALTH CENTRE

STATEMENT OF OPERATIONS

For the year ended March 31 2011 2010

<table>
<thead>
<tr>
<th>Revenues</th>
<th>2011</th>
<th>2010</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grant-Local Health Integration Network</td>
<td>2,594,042*</td>
<td>1,626,567*</td>
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<tr>
<td>Less allocated to deferred contributions</td>
<td>(147,384)</td>
<td>(151,703)</td>
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<tr>
<td>Recognition of deferred contributions</td>
<td>163,977</td>
<td>80,516</td>
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<td>Other income</td>
<td>20,932</td>
<td>4,335</td>
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<tr>
<td>Interest</td>
<td>168</td>
<td>112</td>
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<tr>
<td>Total</td>
<td>2,631,735</td>
<td>1,559,827</td>
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<table>
<thead>
<tr>
<th>Expenses</th>
<th>2011</th>
<th>2010</th>
</tr>
</thead>
<tbody>
<tr>
<td>Salaries and wages</td>
<td>1,067,855</td>
<td>231,769</td>
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<tr>
<td>Employee benefits</td>
<td>202,553</td>
<td>85,331</td>
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<td>Medical staff remuneration</td>
<td>387,795</td>
<td>421,704</td>
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<tr>
<td>M&amp;S supplies (medical)</td>
<td>28,545</td>
<td>42,516</td>
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<tr>
<td>Drugs</td>
<td>8,692</td>
<td>-</td>
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<td>Other supplies</td>
<td>33,955</td>
<td>13,091</td>
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<td>Contracted services</td>
<td>188,306</td>
<td>73,647</td>
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<td>Other expenses</td>
<td>374,186</td>
<td>334,660</td>
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<td>Amortization</td>
<td>163,977</td>
<td>80,516</td>
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<td>Rent</td>
<td>168,683</td>
<td>272,180</td>
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<tr>
<td>Total</td>
<td>2,624,547</td>
<td>1,555,414</td>
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Excess of revenues over expenses 7,188 4,413

The full independent auditor’s report is posted on our website under resources, or a copy can be obtained by contacting the GRCHC.

*As the GRCHC is still ramping up its operations, LHIN revenue is net of their recovery of year-end surplus.

The Grand River CHC is funded by the Ministry of Health and Long-Term Care, through the HNHB LHIN. The GRCHC also receives project-related funding grants and private donations.

The Grand River CHC is a non-profit, registered charitable organization and is governed by a volunteer Board of Directors.

Registered Charitable
# 82936 7556 RR0001
In 2010-11, the GRCHC Board of Directors and staff undertook a strategic planning process. The strategic plan resulted in a stronger Mission, Vision and Values statement (see page 2) and the Strategic Directions outlined below.

**Strategic Directions**

**Develop and move to the permanent site.**

Build on a culture of quality, addressing safety, effectiveness, efficiency and other elements of a positive client experience.

Strive for organizational excellence including being an employer of choice and encouraging innovation.

Establish a range of services responsive to community needs.

Be a catalyst and leader in building community capacity.

Future home of the Grand River CHC at 351 Colborne Street, known in the past as McHutchion’s Bakery. The GRCHC is scheduled to move to the site in the fall of 2012.

The site will retain some of the historical features—such as exposed brick—and will bring the outside in, with a central courtyard. Drawings/MMMC Architects.