

INNOVATION
OF
CHANGE

IN A

TIME

CHANGE

2020

ANNUAL GENERAL MEETING REPORT



Grand River
Community
Health Centre

Our Vision

A community where we work together to achieve equity, belonging, health and wellbeing for all.

Our Mission

GRCHC provides innovative primary health care, health promotion and community development as part of an integrated system of quality care, while helping our clients and community members to enhance their own health and wellbeing.

Our Values

At GRCHC, we are:

Innovative –

We are creative in finding new ways to improve everything that we do.

Collaborative –

We work as a team with our clients and partners to provide coordinated care for our community.

Accountable –

We are accountable to our clients, community and funders for quality programs and services and using resources appropriately.

Respectful –

We are inclusive, non-judgmental, compassionate and caring; everyone matters.

Equitable and Accessible –

We strive to ensure that people in our community can access our programs and services and are treated fairly.



**I like this place.
It makes me comfortable.”**
- General Centre Comment



Tim's recognizes GRCHC front line workers



**This has changed how my family eats.
We are losing weight and feeling better.”**
- Cooking with Pulses cooking series

GRCHC QUICK FACTS

15,245 primary care interactions with clients

395 referrals made to other GRCHC services

13,085 allied health interactions with clients
(social work, outreach, nutrition)

9,056 group participants

723 individuals seen at Seasonal Agricultural
Worker clinics

182 individuals assessed at Memory Clinics

262 Individuals served in COPD program

4,400 volunteer hours logged

99 active volunteers

8 community partners on site –

Brant County Health Unit Dental Program;

BCHS Diabetes Education Service;

HNHB LHIN Home and Community Care;

Feet First Foot Care Program;

Grand River Council on Aging;

The AIDS Network;

Chronic Non-Cancer Pain Management Program
(CNCMP) - Delhi Community Health Centre;

Canadian Mental Health Association (CMHA)



Staff Self Care - Janet



Staff Self Care - Rachel



**Encourages me to
keep going when I don't
know what to do.”**
- Gender Journey Youth



Community BBQ in our parking lot

Board of Directors SEPT 2019 • SEPT 2020

Heather Bruce
Dave Diegel
Cathy Donahue
Derek Douglas
Kelly Gordon
Roger Ma

Ryan Martens
Andrew McRobert
Jeanette Pickett
Pierce
Erica Gavin - *resigned*



Cooking Class



2019-20 BOARD OF DIRECTORS



Annual Report Message - September 2020 Executive Director and Board Chair

Thank You!

A special thank you to the many volunteers who build a healthier community by sharing their time and expertise in our centre, on our Board, committees, and focus groups, and through community programs.

“ **People attend even if they are not able to participate in the exercise because they love the environment.**” - Zumba



One of the outdoor activities during our community BBQ.

What a difference a year makes.

At our last AGM in September 2019 GRCHC was reflecting on its 10th year anniversary of serving this community and the various celebrations marking that milestone.

One year later, GRCHC (and its health system partners) face unparalleled challenges associated with the COVID 19 pandemic. Despite much collaboration and planning, there remains considerable uncertainty around a potential resurgence in the coming months. But let us continue to celebrate, by considering our health centre's response. There are so many notable innovations: our COPD program's production of home exercise videos, phone and video primary care visits, wellness calls to clients, new models of serving seasonal agricultural workers on farms, and outreach to homeless shelters. Resilience and innovation have been our strength.

Apart from COVID, our world is experiencing so many other threats to wellbeing as seen through the lens of the social determinants of health. Climate change, homelessness, substance use and poverty are but some examples. Recent examples of racial injustice are unconscionable. Indigenous peoples, migrant workers, and LGBTQ2S+ persons in communities neighbouring Brantford have faced/are facing injustice, intolerance and stigma. Community Health Centres have, for so many years, embraced diversity, fought injustice and advanced health equity. Those values have likely, never-before been so salient.

Covid has spotlighted many examples of injustice and inequity. While these observations are often sobering and daunting, we remain hopeful and determined to do our part in addressing these issues.

To all those staff, volunteers and board members, at GRCHC who are steadfast in putting clients first, especially in these times, we extend our appreciation.

Sincerely,
Heather Bruce, Board Chair
Peter Szota, Executive Director

“ **Good for the body, mind, and soul.**”
- Gentle Yoga

“ I have enjoyed coming to this program. It has helped me a lot to be able to exercise in a supervised setting. It gives me more confidence.”
 - Caring for my COPD program

YEAR ENDING MARCH 31, 2020

Financial Information GRCHC

Auditor's Report

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

Funding

The Grand River CHC receives core operational funding from the Ministry of Health and Long-Term Care, through the HNHB LHIN. We also receive project-related funding grants and private donations. Thank you to all of our funders for your generous support. 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.

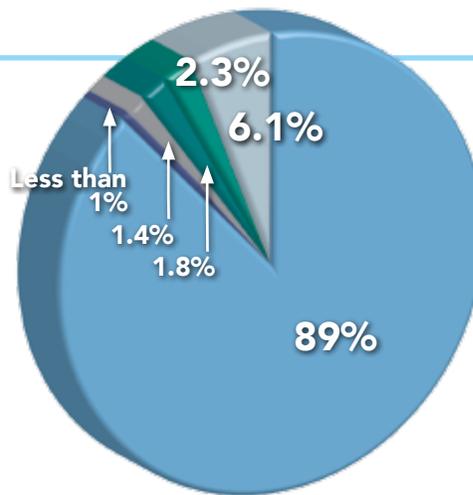
Ontario Midwifery Program

The organization serves as a midwifery program transfer payment agency (TPA). The revenues and expenses of the midwifery practice groups are not reflected in these financial statements. Activity for the year consisted of:
 For the Period Ended March 31 2020

Ontario Midwifery Program - Revenues12,906,623

Total Midwifery Expenses10,815,275

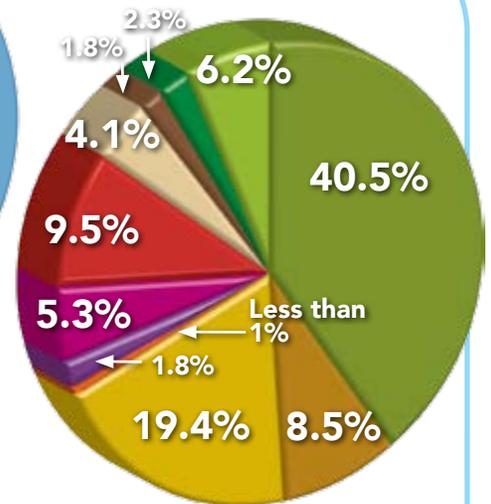
The excess of revenues over expenditures will be advanced to the midwifery practice groups in the subsequent fiscal year. If all of the funds are not advanced, they will be returned to the MOHLTC.



Revenues 5,390,012

Grant - Local Health Integration Network	4,803,951
Less grant allocated to deferred contributions (Note5)*	40,810
MOHLTC-TPA fee income (Note9)**	74,448
Funded projects & community initiatives	99,295
Donations & other income	122,547
Recognition of deferred contributions*	330,581

*Deferred contributions relate to the unamortized portion of capital assets.
 ** Funds held for disbursement.



Expenses 5,345,690

Salaries and wages	2,165,851
Employee benefits	456,980
Medical staff remuneration	1,035,012
Medical and surgical supplies	32,929
Other supplies	95,149
Contracted services	282,926
Other	506,011
Rent	221,786
Funded projects & community initiatives	96,722
Associated expenses	121,743
Amortization	330,581

Excess of Revenues over Expenses for the year\$3,376

Accredited by
 Canadian Centre
 for Accreditation



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 Centre canadien
 de l'agrément



“ It was great. Wonderful environment. Loved the various ideas to enhance normal meals. So many great new meals I would not have thought of!”
 - Cooking Classes

“ Being able to drop-in helps with loneliness and isolation if you live alone.”
 - Men In Action



Grand River
 Community
 Health Centre

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