



3



YEARS
growing with our
community

Reflections on thirty years in the Parkdale Community:

Joint message from Executive Director and Board President



Carla Ribeiro
Executive Director

When you walk through the front doors of our centre, you are greeted with the words “Every One Matters”. This is not just a catchphrase, it is the cornerstone of our work in the community. After 30 years Parkdale Community Health Centre remains a leader in community health and well being, even as the health system in Ontario undergoes significant change. From its very beginnings Parkdale CHC has been committed to providing the best healthcare possible for the most marginalized in the community. That commitment is borne out of our values of equity and social justice and over the years we have seen the difference we make in the lives of those we serve. Today, as the health system grapples with rising cost and sustainability, more attention has shifted to marginalized populations and their utilization of health care resources.

Today as we reflect and retell the story of Parkdale CHC we are struck by the themes that emerge again and again at every phase of the organization’s evolution. We are often trailblazers, e.g. we opened one of the earliest needle exchange programs in the city and began providing harm reduction services to

sex workers and substance users. We have always attracted a diverse and committed staff team who bring their hearts and a spirit of activism to their work. We are agile and nimble, ready to make the changes necessary to serve an ever-changing population. Over the years we have been directly affected by global geo-politics, which brings wave after wave of newcomer and refugee populations who settle in Parkdale. In the past decade we have seen large populations of Tibetans and Hungarian Roma settling in Parkdale, and we have responded appropriately and quickly to address their health care needs. At various points we have also responded to the needs of Cambodians, Latin Americans, Sri Lankan Tamils, Vietnamese and others. In the past four years we have also responded to the health care needs of LGBT*Q populations by providing much needed primary care for LGBT*Q residents of the west end.

Nowhere is our responsiveness to the community more evident than in the broad range of programs and services that we provide. Over the years the basket of programs and services has grown and changed with the populations in the neighbourhood. The broad

Timeline >



range includes: primary care and chronic disease management; health promotion with diverse, ethnocultural communities; streethealth programs, including harm reduction services; violence against women services; programs for seniors, newcomers and LGBT*Q residents; homeless outreach services; mental health programs; oral health services; nutrition and support programs for pregnant and parenting families; community development and capacity building activities.

While we have always been able to “do more with less”, the context of fiscal restraint in Ontario in the past few years has been an ever-increasing challenge and concern. In recent years our Board’s governance attention has turned to driving concrete measures of efficiency and accountability for improving health outcomes. We have been willing participants in the health system integration agenda and have been directly involved in many initiatives designed to improve the quality and seamlessness of care for clients of the system. Our organization has embraced quality improvement (QI) and has moved forward with the implementation of an electronic health record as a key driver and enabler of QI. Just recently our Board revised

our ENDS statements to include and better reflect our commitment to accountability, sustainability and health system integration. As we have consistently done in the past, we continue to collaborate with other community organizations and networks, in an effort to expand our reach and enhance access to our services for more people who need us. As a result of such partnerships our programs and services are delivered in multiple locations in the community. We have also expanded our use of online platforms and social media (www.pchc.on.ca Facebook and Twitter), to increase community engagement and share information with our clients and broader stakeholders.

As we look ahead to the next 30 years we are inspired by the resilience we witness in the communities we serve. We are reenergized by the passion and commitment of our staff and volunteers and we are ready to do our part to create the most effective, most sustainable health system that delivers the highest quality care to all of our people.

We hope you enjoy sharing in the highlights of our work in the pages that follow.

Parkdale Community Health Centre officially opened on December 1984 with seven funded staff positions and a budget of \$280,000. At present the Centre employs over 75 staff and operates on a budget of almost \$6M. Follow the timeline bar to see the highlights of our evolution over the years >

Mission Statement

Strong community.
Better lives.

Vision Statement

All members of our diverse community will have access to integrated primary health care services to improve their quality of life.

Values Statement

The Parkdale Community Health Centre's work is integrated within a framework that expresses our core values, articulates our vision for the Parkdale Community, and is aligned with the CHC Model of Health and Wellbeing which focuses on five service areas, including primary care, illness prevention, health promotion, community capacity building and service integration.

At Parkdale Community Health Centre our work is driven by our core values:

Access. Health services and supports when and where they are needed.

Equity. Ensuring everyone is treated according to their needs.

Client-centered. Working together with the client who shares in the decision-making.

Dignity and respect. Acknowledging that every person has value and recognizing diversity as an asset.

Social justice. Supporting individual and collective rights so that everyone can fully take part in society.

ENDS

The Parkdale CHC Board uses a policy governance model to fulfill its mandate. In keeping with this framework, the Board defines ENDS statements to reflect the strategic objectives of the organization. The ENDS statements articulate the reason the organization exists and describe the impact we want to have in the community. The ENDS are reviewed regularly to ensure that they remain as relevant as possible. In the past year the Parkdale CHC Board reviewed and revised the ENDS statements, adding a fourth END that reflects broader health system priorities.

Parkdale Community Health Centre acknowledges that all ENDS hold equal importance, are interconnected and that progress towards their achievement occurs concurrently.

Promote health and well being

Provide access to knowledge and resources that support healthy lives

Improve community health

Improve health outcomes with a focus on priority populations

Address the social determinants of health to reduce barriers

Advocate for healthy public policy

Collaborate broadly to ensure advocacy efforts reflect community needs

Adapt to change responsibly

Demonstrate accountability and efficiency

Plan for sustainability

Demonstrate leadership in the community and in an integrated health system

the 80s >

Parkdale residents get together and formed a committee to pursue a community goal – to establish a much needed Community Health Centre

1982



Programs and Services Offered in the Past Year

Primary Care:

Family medicine
 Same day medical drop-in
 Acupuncture Drop-In
 Infant Hearing Screening
 Flu Shot Clinic
 Physiotherapy
 Chiropody
 Healthy Smiles Dental
 West End Oral Health Clinic
 Naturopathy
 Healthy child screenings
 Ophthalmology screening

Chronic Disease Management:

Living Life Well with Diabetes
 Craving Change – managing food cravings
 Helping You Cope – stress management for those with diabetes
 Plan Well, Budget Smart, Be Healthy – healthy eating on a budget
 Insulin Management Support Group
 Living Well Lunch Club
 Sorauren Farmers’ Market Tour – for individuals with diabetes
 Steps Across Parkdale - walking group
 Gentle Exercise Class
 Asthma education
 Arthritis Self Management Program
 Fecal Occult Blood Test (FOBT) Workshop for Men

Harm Reduction:

Anonymous HIV testing
 KAPOW – sex worker drop-in

Kit Making Group
 Needle Exchange
 ID Clinic
 Finally Understanding Narcotics (FUN) Group
 Men’s Drop-In
 Nalaxone Workshop
 Harm Reduction Community Advisory Group

Mental Health:

Psychiatry
 Individual and group counselling support
 Postpartum Mood Disorders Group
 Postpartum Depression Information Night
 Men’s Mental Health Advisory Group

Health Promotion:

Child Minding Training
 Peer Nutrition program
 Seniors Wellness Drop-In
 Peace through Piecing Quilting Group – for seniors
 Seniors Drumming Circle
 Seniors Salad and Soup Making
 Seniors English Conversation Class
 Seniors Leadership and Advocacy Group
 Seniors Hearing Screening Clinic
 Seniors Advisory Group
 Parkdale Young Parents
 LGBTQ Drop-In
 LGBTQ Wellness Group on Mental Health
 Nobody’s Perfect – parenting group for newcomers

Women’s Connection:

Individual and Group Counselling for Women
 Prenatal Nutrition and Support
 Baby and Me
 Mom and Baby Circle
 Mother and Infant Massage
 Women’s Art Classes
 The Language of Parenting
 Postpartum Depression Support Group
 Postpartum Depression Information Night
 Trauma Informed Yoga for Women
 Yoga and Mindfulness Meditation at 180 Sudbury Street
 Healing through breath and movement – 12 week group for Survivors of Childhood Sexual abuse (Partnership with WESAT)
 Exploring Your Options: Career and Training Forum for Women
 Building Skills: Peer Learning and Empowerment Program for Women
 Drop-in Acupuncture Group
 Women’s Connection Community Advisory Group
 Tamil Women’s Group
 Yoga for Postpartum Depression Prevention
 Yoga and Mindfulness for Moms
 Trauma 101
 Yoga by the Lake and Acupuncture

Food Security and Nutrition:

Good Food Box
 Gardening Drop-In
 Organic Gardening 101 Workshop

Special Events and Community Development:

Elder Abuse Community Walk
 Parkdale Community World Pride Celebration – panel discussion and BBQ
 World Diabetes Day
 Income Tax Clinic
 Trans Day of Remembrance
 Parkdale Community Walk in support of Breast Cancer Awareness and Community Health Week
 One Stop Shop on Breast Health – open house health fair
 Parkdale CHC Information Sessions
 Holiday Food and Craft Sale
 Housing Worker from West End Housing Help
 Seniors Month
 Harm Reduction Sign Unveiling



Needs Assessment is completed by a team of consultants and advisors

1983

Parkdale CHC is incorporated

1984

Funding is approved from the District Health Council of Metropolitan Toronto and Ministry of Health thereafter



Population Health and Community Engagement

The Population Health Team provides services across our catchment areas through individual and group counselling, community development activities, health education and health promotion workshops, harm reduction programming, advocacy, and community engagement. Our staff members work in partnership with other community agencies, resident groups, and community advisory committees to address the determinants of health and wellbeing in Parkdale.

Addressing income as a determinant of health: Tax Clinic at PCHC

PCHC continued to run an annual tax clinic in partnership with St. Christopher House (now West Neighbourhood House) for low-income residents of Parkdale. The clinic provides free support with tax return filing and is supported by a team of dedicated volunteers with experience in the financial sector. Income is a key determinant of health: by supporting our clients to file their tax returns PCHC looks to address one of the upstream factors necessary for improved health. In 2014, 188 people filed their tax returns at PCHC with a total combined return amount of \$376,084.



Raising awareness and building capacity for seniors' wellbeing

PCHC received a grant from the New Horizons for Seniors program through the Government of Canada for "Seniors in Action: A Community Approach to Volunteerism". This program provided free training and placement assistance to potential volunteers and agencies to find a good volunteer match in the community. Some key achievements of the project include:

- Three community training sessions with a total of 55 seniors completing the training
- A community fair organized and delivered in partnership with Volunteer Toronto
- A volunteer manual with an inventory of tools and strategies to recruit and retain volunteers using a community development model
- A toolkit providing information and guidance to seniors and older adults looking for volunteer opportunities.

We anticipate improved volunteer capacity and opportunities for seniors in the Parkdale neighbourhood as a result of this program.

PCHC works with an active group of seniors who care passionately about the wellbeing of their peers. In June, seniors took the lead on raising awareness of elder abuse through a number of community events, including a theatre piece, education sessions, income support session, and a community walk. Over 200 participants attended these events. Evaluations show marked improvements in awareness of elder abuse and its risk factors, as well as community resources.

Questions with results before and after events:

I have knowledge of the signs & symptoms of Elder Abuse



I have knowledge of the different forms of Elder Abuse



I understand what Elder Abuse means



I have knowledge of the risks factors of Elder Abuse



I have knowledge about what to do if I, or someone I know is a victim of Elder Abuse



I have knowledge of community supports for victims of Elder Abuse



1984

The first 3 staff are hired – the Coordinator, the Administrative Assistant & Health Educator



An interim office opens at 1624 Queen Street West

Active outreach begins



Raising awareness of cancer prevention

In October, PCHC delivered 4 educational workshops on cancer screening in order to improve awareness of cancer prevention as well as increase rates of screening for breast, cervical, and colorectal cancers among

targeted, underserved populations. 142 clients attended educational sessions and 40 women participated in a community walk to raise awareness of breast cancer. Highlights include:

Chinese Senior Women Breast and Cervical Cancer Awareness

100%

- > of participants reported increased knowledge of the health benefits of early screening

Tamil Senior Women Breast and Cervical Cancer Awareness

90%

- > of participants reported increased knowledge of the health benefits of early screening

Breast Cancer Awareness and "one stop" clinic

50%

- > of women scheduled follow up appointments with a physician
- > of women booked mammograms
- > Pre/post evaluation demonstrated 50% increase in knowledge of health benefits of early screening

Fecal Occult Blood Test (FOBT) for men living with mental health and substance use issues

14
56%

- > men took FOBT kits for follow up
- > of men reported increase in knowledge of screening and colon cancer



Newcomers and families

PCHC worked in partnership with Parkdale Intercultural Association, 4 Villages CHC, and Davenport Perth CHC to deliver 3 childminding trainings over the past year. This program provides adults (primarily newcomer and low-income women) with the opportunities to develop skills and knowledge in early childhood development and community-based child care, and to increase employment opportunities for these populations. 44 women graduated from the program in the past year and the feedback from participants and community agencies is overwhelmingly positive. *The childminding partnership was the recipient of a Vital Ideas grant from the Toronto Community Foundation* and will be developing an evaluation of the program and a toolkit to share with other agencies interested in replicating this program.

Parkdale Parents Primary Prevention Project (5Ps)

Our 5Ps program continues to grow and attract pregnant and parenting women and families from the neighbourhood. Through this program, clients are connected with a myriad of supports to improve the wellbeing of their family. 185 women attended our prenatal program, 106 attended our post-natal program, and 30 fathers participated in our father involvement initiatives. (Service was provided in 16 languages.) These programs are funded through the Public Health Agency of Canada and are made possible through partnerships with Toronto Public Health, Working Women Community Centre, and other community partners.

Improving access to services for the LGBT*Q community

At Parkdale Community Health Centre, our work is driven by our core values of access, equity, client-centeredness, dignity and respect, and social justice. We aim to increase access to health care for the lesbian, gay, bisexual, trans, two-spirited, intersex, queer, and questioning community, particularly clinical services for trans* individuals. This year we offered a series of workshops for LGBT*Q individuals which focused on PTSD, depression and anxiety. The focus of the workshops was to increase participants' knowledge, as well as help them develop the necessary skills to cope and manage symptoms of PTSD, depression and anxiety. The workshop included experiential exercises in mindfulness, meditation and laughing yoga which allowed participants to learn stress management skills for their home practice.

Parkdale CHC also held a Transgender Day of Remembrance and World Pride event for clients, community members and service providers in order to raise awareness and commemorate these significant events for the LGBT*Q community.



Parkdale Community Health Centre opens to the public and staffing is expanded to include 1.5 Physicians, 1 Primary Care Nurse, and 1 Receptionist



Programs begin in the community and Health Action Groups are actively operating



Official opening ceremonies at permanent location – December 1984

1985

Community development at Women's Connection

On September 14th, 2013 the Women's Connection program hosted the "Exploring Your Options" forum at Metro Hall. The forum was geared towards women and trans people looking to explore their options with regard to career, training and volunteer opportunities. Inspired by and under the leadership of the Community Advisory Group, the forum included a speakers panel, workshops, and an information fair. 49 participants were brought together with community partners to learn about working together in various capacities.

The gathering of women to explore training and career options helped provide the foundation for an ongoing program at Women's Connection: "Building Skills – Peer Learning and Empowerment". This ongoing program focuses on building on communication skills and self confidence in a supportive, trauma informed environment. The program now successfully runs three times a year and is open to all women. Client feedback is very positive: in the words of one participant: "I feel I am more confident to go in front of people and ask for what I want or need to accomplish my goals. "

Counselling

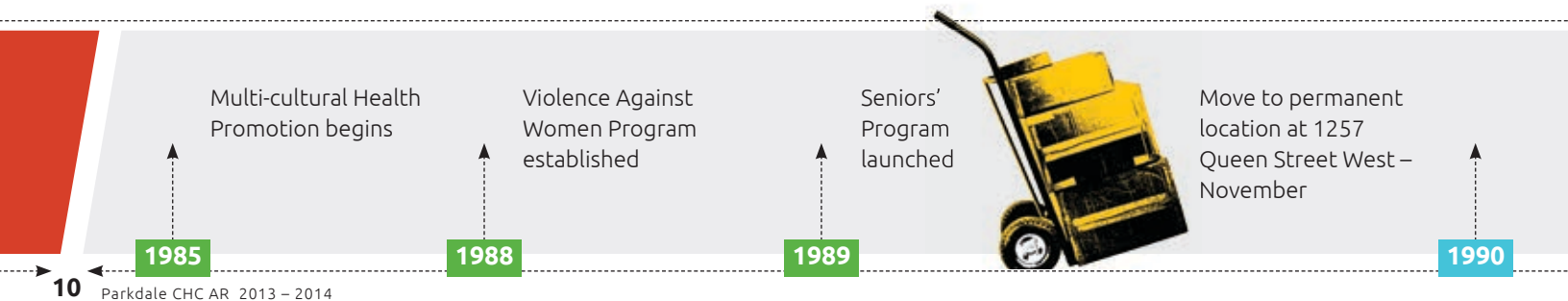
The Women's Connection program offers individual and group counselling, as well as psycho-educational group programs. Our teams have worked closely with many community partners to increase access to services and as a result we served 271 clients. Our unique, trauma-informed approach is connected closely with our community development programs and has received positive feedback from clients.

" I feel more open and I lead more with my heart. But most importantly I have a greater understanding of how to listen to my own needs and become the architect of my own life."

Expressive Arts Group

The Expressive Arts Group, a group where women come together to create, express themselves and connect to the community. It's been a busy year for the group! On top of learning from guest speakers and working on independent projects, the artists participated in several community events.

In November the group participated in Graven Feather Gallery's "In the Round" exhibition, which featured works by over 100 artists, all of whom used 5" circles to express themselves through a variety of media. December also brought new opportunities, and the Arts group partnered with the West-End Food Co-op and local community merchants to host a fabulous holiday sale that featured artwork, handmade goods and artisanal treats. In July the group partnered with other community members to participate in Parkdale's Lab Cab Festival, which provided women an opportunity to showcase and sell their works.



Spotlight on Harm Reduction

At Parkdale Community Health Centre harm reduction principles are embedded in everything we do.

We have been running a harm reduction program for 24 years. Through our drop-in needle exchange, clients access supplies and resources and meet with peer outreach workers.

In 2013 we distributed:



78,368 syringes

8,610 pipes

52,591 condoms

There were 7,000 interactions with clients in need of harm reduction services.

85%

Eighty five percent of the syringes distributed were returned to PCHC for safe disposal.

Harm reduction is also embedded in all elements of services at PCHC and many clients connect into our interdisciplinary care model through harm reduction services.

Supplies & Resources

Because of what I have learned here over the years, I've taught others in the community and even though I don't use anymore, I always carry kits to give to others; just the other night, I stopped a girl from sharing—I learned that here.

TRUST—you can get free, safe supplies and advice on health without judgement and make that connection to care.

If harm reduction is inconvenient, people would go back to using bad equipment and sharing rigs and pipes.

The HR Room keeps me healthier, it's always open when I need it—a healthy and clean environment that helps me start my day.

Programs

I first came to PCHC to get pipes, then started getting educated on drugs and how to use more safely, learned about HIV and Hep C and how to talk about it and share what I learned with other users, then got involved with the advisory groups and Men's Group, volunteered for Kit-Making, and started receiving regular health care.

Primary Care & Allied Health

Most people I know who came here first for needles and pipes are now using primary health care here...*the harm reduction room is the "bridge to health care" for people who use drugs.*

Without it, there would be a lot more overdoses, more endocarditis, more sickness, more death.

Counselling & Support

It's my sanity tool. It keeps my sobriety easier to handle—and that's the truth. It really helps. I've got the number to call if I feel panicky. Even just to leave a message—it calms you down to hear the words harm reduction.

You can ask them any question. You can explain it to them, ask any question without feeling shy or embarrassed.

Engagement

It engages people that might not otherwise engage. *It's the beginning.*

What we're doing well...
It's somewhere people
can go and feel safe.
Every community
should be so lucky as to
have facilities like this.



the 90s >

Street Health
Program begins



1990

Primary Health Care: A focus on access and equity

Access

The past year has been extremely busy responding to the needs of the Parkdale community. Mindful of the growing demand for accessible health care services in an ever-shifting health care environment, we have been very busy finding ways to serve our community better. Our clinical staff continues to work diligently and with great compassion to respond, to the health challenges that our clients face, within a context of higher demand for accessible service and rising complexity of client care.

PCHC serves many people who face multiple barriers accessing health care services. About sixty percent of our clients report an annual household income of under \$20,000.00. In addition many of our clients face multiple chronic health issues compounded by the impact of homelessness, lack of status, unemployment, discrimination and mental health and addiction issues. Timely access to primary health care is often difficult because these barriers mitigate against their ability to attend to their health needs. Feedback from our community consistently tells us that timely access to an appointment with providers was a concern.

Our primary health care team is very aware that an appointment based system of care delivery does not always work well to address the barriers that our clients face. Over the past year Parkdale CHC embarked on a new strategy to pilot a more flexible approach to the way that we provide access to appointments with our physicians and nurse practitioners.

In the past it has often taken more than three to four weeks to schedule an appointment with one's own provider. Advanced Access or Open Access was implemented so that clients could get an appointment on the same day or when they want one. Evaluation of this pilot suggests that we still have a little way to go in order to reach that goal, but we are making progress. We are also continuing to make changes to how we do things, in order to achieve this goal.

Beginning in September we will increase the number of same day appointments available and decrease the number of pre-booked appointments. The impact on our clients will be quicker access to their own provider. In order to make this work, however, clients will notice some changes to the way that they will be asked to book appointments. Because more appointments will be available on a daily basis, we will no longer schedule a daily drop-in. Ongoing evaluation of Open Access scheduling will continue to tell us how we are doing.



Dr. Sherman Ki (second from right) is recognized for years of service as a volunteer dentist.

Needle Exchange Program initiated

Satellite Program established to provide treatment for opiate drug users

PCHC is granted capital funds to build a new facility

1991

1993

1994



Health equity

Access to appropriate health care service also involves integrating our understanding of the barriers our clients face with our approach to delivering service. This understanding is reflected in a health equity approach to care.

What is health equity?

Equity in healthcare refers to ensuring quality care regardless of race, religion, language, income or any other individual characteristic (Mt. Sinai, Health Equity Project, 2014). It is important that health inequities or differences in healthcare outcomes are not based on variables that can be explained by access related factors, clinical needs, interventions or client preferences.

Over the last year Parkdale CHC has participated in a pilot project initiated by the Toronto Central Local Health Integration Network to address health inequities. This means that we are collecting more information about the communities that we serve and the characteristics of clients in our care. This information is an important building block in the removal of health inequities and the provision of better care. Our clients will notice that we are asking for more information on our registration form and we appreciate their assistance with this additional data collection.

Parkdale CHC is committed to health equity and gives priority to individuals/groups who have traditionally encountered barriers to accessing good quality health care. Over the past year, our work in this area is illustrated by the following numbers:

354 people without health insurance coverage saw a primary care provider

29% of our clients were newcomers who arrived in Canada within the past 5 years

229 people who are homeless accessed our services

40 Trans people were referred to our Primary health care team

30% of our clients struggle with mental health and substance use challenges

Mental health and substance use

Mental health and substance use issues are important variables in our clients' ability to access equitable health care. The links between mental health, substance use, homelessness, low income, unemployment and discrimination are very strong. At least thirty percent of our clients have mental health and substance use issues. Moreover, South Parkdale is home to a disproportionate number of individuals living with complex needs and the impact of mental health and substance use. We know that timely access to care that considers the barriers that these people face are critical to good health outcomes and improved quality of life.

At Parkdale CHC we are very proud of our work with clients who are dealing with these complex issues. Our providers collaborate with each and with our clients to achieve the best outcomes possible within a harm reduction framework.

Consistent with the objectives of the South Toronto Health Link, coordinated access to mental health and substance use services are a priority at PCHC. Towards that end we have embarked on a strategy to improve access and the coordination of mental health and substance use services at both our main and satellite locations. We anticipate that a centralized intake and coordinated access to services will be in place by the fall of 2014.

PCHC moves into its current location at 1229 Queen St. W. – official opening ceremonies are held in the fall

1998



Naturopathic Medicine services are offered, thanks to partnership with Canadian College of Naturopathic Medicine

Programs for Homeless individuals begin

2000



What we're doing well...
Being very accommodating to get an appointment with a doctor when there is an urgent issue—often on the same day.



Canadian College of Naturopathic Medicine (CCNM)

The Canadian College of Naturopathic Medicine (CCNM) operates a number of teaching clinics throughout the GTA, including 5 in community health centers. The naturopathic clinic at Parkdale CHC was first started in 2001.

Naturopathic medicine is a system of primary health care that promotes wellness and prevention of illness or disease. Naturopathic doctors are highly educated primary care providers who integrate standard medical diagnostics with a broad range of natural therapies including: acupuncture, herbal medicine, clinical nutrition, and lifestyle counseling. Naturopathic doctors provide primary care or adjunctive care for a variety of conditions. In particular they treat clients with mental health, musculoskeletal complaints, digestive disorders, cardiovascular disease, reproductive issues, and pain management.

The majority of the clients are referred to the clinic by PCHC medical staff and also by client referrals. The clinic sees roughly 25 client visits per week. In 2013 the clinic saw 56 new clients and tracked 1104 clients visits. The naturopathic team strives to recommend the safest & most effective treatment approaches. If they believe the best treatment is outside their scope, they refer the client to other medical providers at PCHC.

Since 2003, Matt Gowan is the licensed naturopathic doctor supervising the 4th year clinic interns assigned to PCHC. Every term four new interns rotate through the clinic for a total of 12 students per year. The naturopathic clinic is free to clients living in the catchment area. In addition, the clinic dispenses various natural health products free of charge thanks to donations from supplement companies. **+**

the new Millennium:



George Brown College School of Dental Hygiene

The *West End Oral Health Clinic* (WEOHC) was started through a partnership of dedicated volunteers from various health and social service agencies in the Parkdale area who came together to address an unmet community need—lack of access to dental care for low income adults. Until late 2010, it operated out of the Ambulatory Care Clinic at St. Joseph’s Hospital one Saturday a month.

In 2010, the volunteers worked with Parkdale Community Health Centre (PCHC) and Toronto Public Health (TPH) to create a sustainable partnership and open a dental clinic at PCHC funded by the provincial government’s *Healthy Smiles Ontario* program. This *Healthy Smiles Ontario* clinic provides preventive and basic restorative oral health care to eligible children under the age of 18 and eligible seniors over 65 years of age. The establishment of the clinic in the CHC was an important step forward in the fight for equitable and affordable access to dental care but it did little to address the needs of those that fall between 18 – 64 years of age. To anyone who works with low-income individuals, this gap in dental care programming is both obvious and persistent.

However, the dedicated volunteers who spearheaded the *West End Oral Health Clinic* continued to work with PCHC and Toronto Public Health to find a way to provide dental care to those left out by existing public programs. The result was a formalized partnership between PCHC, TPH and George Brown College where preventive and basic dental care is available to low income adults (between 18 & 64 years of age) two evenings each week and one Saturday each month. The dental team consists of volunteer dentists, dental assistants, dental hygienists, George Brown College dental hygiene students and faculty and an office administrator.

The benefits of this partnership have been numerous. It provides a way for people to access much needed dental care and provides an opportunity for a few dedicated dentists and dental hygienists to use their skills and give back to those in need. But perhaps even more notably, this arrangement allows all dental hygiene students at George Brown College to meet and provide care for a group of individuals who would otherwise not be able to access it. In this way, the students come to better understand the barriers to care that exist for people in our communities. To date, we have successfully provided care for 358 people. That said, the program has generated a waiting list of people in need that exceeds 400 individuals. In addition, due largely to a lack of funding, the range of treatment services is limited to basic restorative and extractions. We simply do not have the resources to purchase the equipment & supplies to provide more complex care. +



Clients share their experience

Every year we ask our clients to share their experience of the care and services they receive from us. This is what they told us this past year.



Impact

94%

agree that programs and services offered at PCHC help them to improve their health and well-being

93%

agree that PCHC has a positive impact on the health of the community



Client-Centred

89%

say that staff members spend enough time with them during an appointment

79%

say that staff tell them about different treatment options and involve them in decisions about the best treatment

86%

say that staff members are easy to talk to and encourage them to ask questions



Access

78%

say they can get an appointment when they need one

87%

say they can get service in a language of their choice

91%

say staff members explain things in a way that is easy to understand



Equity

95%

say they always feel comfortable and welcome at PCHC

overall
94%
said they would recommend a friend or family member to PCHC



More feedback from clients

They tell us they want to see:

- More psychiatrists, doctors, nurses
- Shorter wait times for appointments and in waiting room to see provider
- Increase hours of service
- Faster telephone response
- More harm reduction services
- More seniors services
- More children's programs
- Have more food available
- Provide transportation



Strengthening the community by strengthening its women

I was referred to the women's connection program by a friend while talking about the challenges I experienced as a child. I was overjoyed to hear of a program that potentially offered free assistance to people like me, especially seeing as I know many women who experienced hardship in their younger years that is now obstructing their ability to progress healthily in the world.

I found the approach of all of the counsellors that I worked with in the center, helpful and welcoming in a grounded and understanding way. The level of sincerity and experience that all of the staff within this program exude is something unique that I have never experienced on this level or in this context.

Though I was only able to participate in one session of the trauma 101 workshops, I felt so blessed to be exposed to a workshop that connected women from all kinds of backgrounds with an open and nurturing approach that was also thorough, informative, and empowering.

The community feel within the center is palpable. I never felt out of place there, even though I was in contact with people from all kinds of backgrounds and different walks of life.

My counsellor's involvement in my development and progression in the year since we met has been pivotal. Her expertise and intuitive approach is unlike that of any therapist I have worked with.

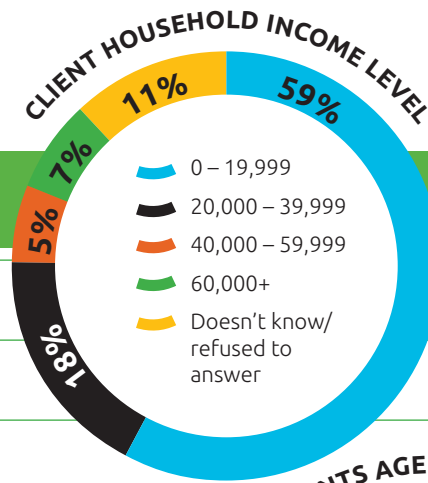
From my initial phone call to request more information to the most recent session I had with my counsellor, the entire experience was nurturing, insightful, and productive. I cannot speak more highly of the program, or the counsellors working to strengthen Toronto's community by strengthening its women.

The change that I have experienced in myself and in how I deal with the world around me since being involved with the women's connection program is profound and lasting. I cannot thank you enough.

Our Numbers

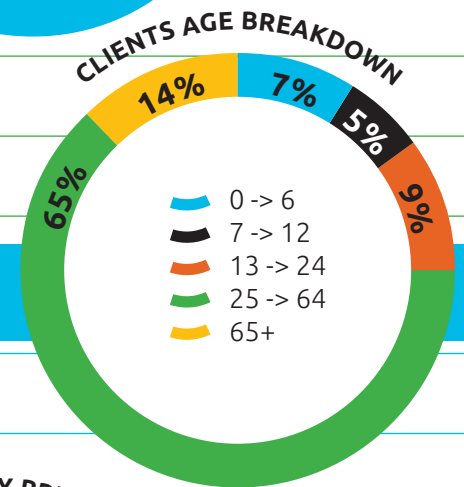
Overall Service Utilization

5,830	Active clients
625	New primary care clients
877	Dental clients (413 children, 464 adults)
24,958	Individual encounters
5,350	Personal development/support group encounters



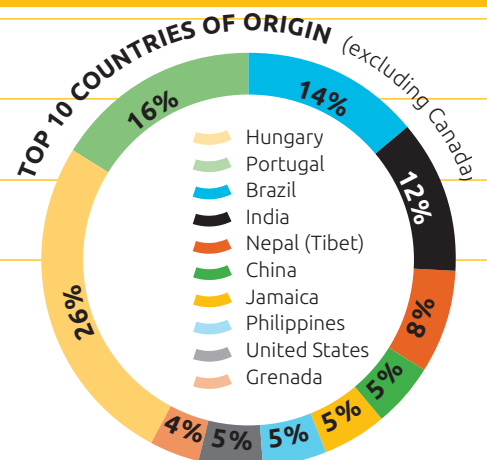
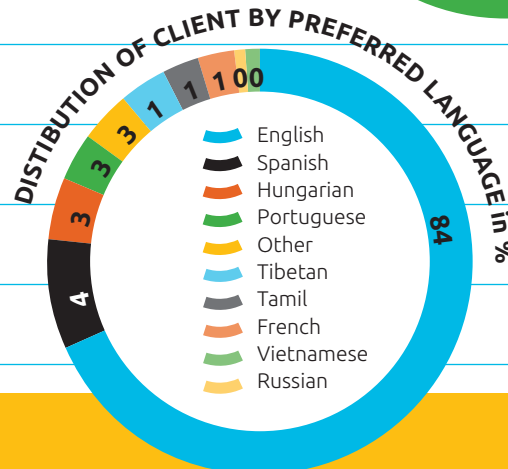
Illness Prevention / Chronic Disease Management

63%	Cervical cancer screening rate
49%	Colorectal cancer screening rate
56%	Breast cancer screening rate
21%	Influenza vaccination rate
73%	Rate of interprofessional care for diabetes
41%	Periodic health exam rate



Health Promotion / Harm Reduction

81,281	Clean works (needles, syringes, etc.) distributed to IV drug users
53,917	Used works collected by needle exchange office to be discarded safely
1,397	Counselling hours for women survivors of violence/abuse
204	Women who received pre and post natal nutrition assistance and other supports



Financials

2014

2013

Statement of Financial Position Year ended March 31, 2014

ASSETS

Current assets	\$	724,548	\$	512,427
Property and equipment		3,138,028		3,257,844
		3,862,576		3,770,271

LIABILITIES

Current Liabilities		460,947		318,782
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NET ASSETS

Capital Assets Fund		3,138,028		3,257,844
Special Projects Funds		263,601		193,645
		3,401,629		3,451,489
		3,862,576		3,770,271

Statement of Operations Year ended March 31, 2014

REVENUES

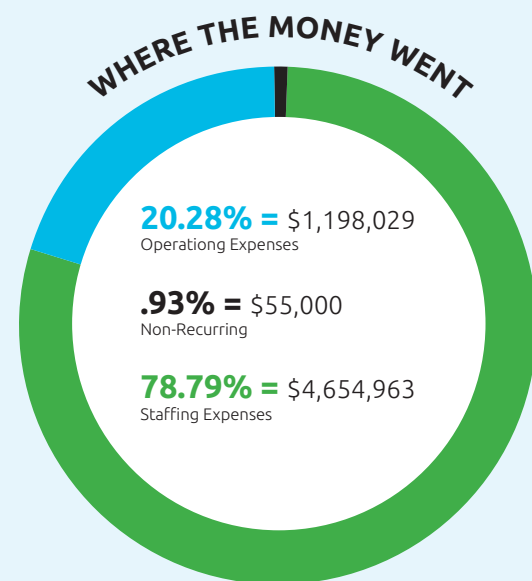
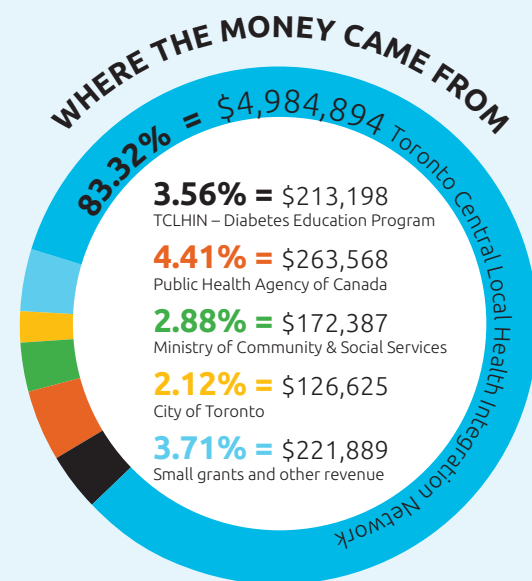
Toronto Central Local Health Integration Network (TCLHIN)		4,984,894		4,820,711
TCLHIN – Diabetes Education Program		\$213,198		213,204
Ministry of Community and Social Services (MCSS)		172,387		158,887
City of Toronto		126,625		91,663
Public Health Agency of Canada		263,568		197,739
Small grants and other revenue		221,889		80,381
Total revenues		5,982,561		5,562,585

EXPENSES

Staffing Expenses		4,654,963		4,427,162
Operating				
Building occupancy		411,154		398,785
Programs & Service Expenses		613,096		599,340
Non-insured		173,779		99,340
		1,198,029		1,097,465
Non-Recurring		55,000		26,960
Total expenditures		5,907,992		5,551,587
Excess (deficiency) of revenues over expenses before the Undernoted		74,569		10,998
Amount refundable to Funders		(4,614)		(13,867)
Excess (deficiency) of revenues over expenses before amortization	\$	69,955	\$	(2,869)

* This is a summary of the audited Financial Statements. For more information, the complete audited financial statements are available from the office of the Executive Director.

Corporate Information



Partners and funders

Access Alliance Multicultural Health and Community Services
 Arrabon House (new addition)
 Association of Ontario Health Centres
 Bailey House/COTA Health
 Breakaway Addiction Services
 Canadian College of Naturopathic Medicine
 Canadian Hearing Society
 Central Toronto Community Health Centre
 Centre for Addiction & Mental Health
 Child Development Institute
 City of Toronto – Public Health
 Creating Together
 CultureLink
 Daily Bread Food Bank
 Davenport-Perth
 Neighbourhood and Community Health Centre
 Department of Public Memory
 Ecuhome Corporation
 Etobicoke Children’s Centre
 Eva’s Satellite
 FoodShare Toronto
 Four Villages Community Health Centre
 Fred Victor
 George Brown College – Assaulted Women & Children’s Advocacy Program; School of Dental Health; Social Service Worker Program
 Greater Toronto Community Health Centres Network

Habitat Services
 Hispanic Development Council
 Interval House – BESS Program
 Jean Tweed Centre
 JobStart
 Kababayan Community Centre
 LAMP Community Health Centre
 Liberty Village BIA
 Mennonite New Life Centre
 Ministry of Community & Social Services (Ontario)
 Ministry of Health & Long Term Care (Ontario)
 More Than Child’s Play
 Oasis Centre des Femmes
 Opportunity for Advancement
 Parent & Child Mother Goose Program
 Parkdale Activity Recreation Centre
 Parkdale BIA
 Parkdale Community Crisis Response Network
 Parkdale Community Information Centre
 Parkdale Community Legal Services
 Parkdale Intercultural Association
 Parkdale/High Park Ontario Early Years Centre
 Parkdale LOFT Community Services
 Parkdale Neighbourhood Church
 Parkdale Newcomer Service Provider Network

Parkdale Project Read
 Parkdale Public Library
 Parkdale Public School – Family Literacy Centre
 Parkdale Residents Association
 Planned Parenthood Community Health Centre
 Polycultural Immigrant & Community Services
 Queen Victoria Public School partners for Early Years Program
 Rainbow Health Ontario
 RECONNECT Mental Health Services
 Regent Park Community Health Centre
 Roma Community Centre
 Roncesvalles/MacDonell Resident Association
 Ryerson University – Nursing Program & Internationally Educated Dietitians Pre-registration Program (IDPP)
 Savards
 Schizophrenia Society of Ontario
 Scout Canada
 Second Harvest Food Rescue
 Seniors Pride network
 Sistering
 SKETCH
 South Riverdale Community Health Centre
 South Toronto Health Link
 St. Joseph’s Health Centre
 St. Stephen’s Community House
 Stonegate Community Health Centre

StreetHealth
 Streets 2 Homes
 Tim Horton Bus
 The Arthritis Society
 The Bargain Group
 The Daily Bread Food Bank
 The Redwood Shelter
 Toronto Central CCAC
 Toronto Art Therapy Institute
 Toronto Central Local Health Integration Network
 Toronto Community Housing Corporation
 Toronto Employment and Social Services
 Toronto Justice Service Collaborative
 Toronto Urban Health Alliance (TUHA)
 West Toronto Housing Help Services
 West End Food Coop (WEFC)
 West End Urban Health Alliance (WEUHA)
 West End Sexual Abuse Treatment
 West Neighbourhood House (formerly St. Christopher House)
 Women’s Health In Women’s Hands CHC
 Woodgreen Community Services
 Working Women Community Centre
 Unison Health and Community Services
 University of Toronto
 Village Family Health Team

Our team

Staff

Aisha Sasha John,
Medical Secretary, Relief

Aleksandra Marcon*,
Medical Secretary, Relief

Allison McGee*,
Locum Physician

Antoinette Hyatt,
Medical Secretary, Relief

Ana Maria Navarro,
Physiotherapist

Adrienne Barnes*,
Community Health Outreach
Worker

Arno Lowi *,
CATCH-ED Peer Support

Beth Wierzbicki,
Corporate Executive Assistant

Bronwyn Underhill,
Director of Population Health and
Community Engagement

Carla Ribeiro, Executive Director

Charlene Holland,
Medical Secretary, Relief

Choni Sangmo, Child Care
Worker

Christopher Fowler,
Medical Secretary, Relief

Connie Collinson,
Health Promoter

Cristina Fayet**, Physician

Cristina Raposo**, Medical
Secretary

David Fabrizio, Peer Worker

Deborah Chalmers, Office
Manager

Dennis Kussin, Psychiatrist

Edward Lee, Physician

Elen Azevedo**,
Diabetes Dietitian

Elizabeth Guete, Social Worker

Emma Kendall, Registered Nurse

Falko Schroeder, Nurse
Practitioner

Fatime Khamis, Child Care
Worker

Gerald Fung*, Physician

Grace Landa, Program Assistant

Grażyna Mancewicz,
Social Worker/Therapist

Heather R. Cadogan,
Counselor/Educator

Isabel M. Andariza,
Counselor/Educator

Jackie Clark,
Medical Secretary, Relief

Jacob Fernandes *,
HIV/AIDS Coordinator

Jane Rajah, Diabetes Nurse

Jacque Naughton, HR Manager

Jason Chou*, Locum Physician

Jenny Kim, Chiroprapist

Jessa Hawkesworth,
Food Room Facilitator

Jessica Brunino,
Child Care Worker

Jessica Lee, Medical Resident

Jill Blakeney, Physician

Julie Knights, Registered Nurse

Karin Mary Ng, Clinical Dietitian

Kathy Pinheiro, Peer Worker

Kelly Ribeiro, Medical Secretary

Kendra Kusturin, Social Worker

Kevin Chopra, Psychiatrist

Kimberly Allong**,
Medical Secretary, Relief

Khalid Asad,
Manager of Finance & Resources

Leesa Mae Dean,
Medical Secretary, Relief

Leslie Parker,
Community Outreach Worker

Linda Yaa Adutumwaah,
Medical Secretary

Liza Chau*, Bookkeeper

Loanne Stone,
Receptionist Coordinator

Malu Santiago, Psychologist

Maria Kukhta,
Medical Secretary, Relief

Maryrose MacDonald, Physician

Morgan Llewellyn*, Locum RN

Melissa Abrams,
Nurse Practitioner

Melissa Hergott,
Administrative and
Communications Coordinator

Million Woldemichael,
Receptionist Coordinator

Nadira Mahabir, Child Care
Worker

Nancy Steckley,
Community Development Work

Nat Bannon,
Peer Outreach Worker

Natalie Kallio,
HIV/AIDS Coordinator

Nayana Somaiah,
Locum Physician

Neil Mentuch, Data Management
Coordinator/Planner

Nicholas Durand, Chiroprapist

Norma Hannant,
Social Worker/Therapist

Olivia Llamas, Bookkeeper

Pat Quenelles*, Peer Worker

Rachael Lake*,
Medical Secretary, Relief

Rakini Sivaharan,
Child Care Worker

Raymond Macaraeg,
Nurse Practitioner

Riley Fulkerson,
Diabetes Dietitian

Rosa Ribeiro,
Health Promoter

Sandra G, Health Promoter

Satha Vivekananthan,
Tamil Counselor

Shawn Mattas, Physician

Shirley Hepditch,
Client Support Worker

Shirley Roberts,
Director of Primary Health Care

Shona MacKenzie,
Nurse Practitioner

Sriram Arnanth,
Mental Health Coordinator

Stacia Stewart,
Project Coordinator

Stephanie Moulton*, Peer
Outreach Worker

Steven Idzi, Peer Worker

Steven Hirshfeld *,
Locum Physician

Steven Lipari, Physician

Susan Clancy*,
Director of Population Health &
Community Engagement

Tchela Kalonga*,
Medical Secretary, Relief

Thanusha Gopalpillai*,
HR Assistant, Temp

Tricia Williams,
Medical Secretary

Tysa Harris, Medical Secretary

Victoria Okazawa, Social Worker

Yohama Gonzalez,
Family Support Outreach Worker

Zara Fischer-Harrison,
Medical Secretary, Relief

Board of directors

Kelly Ann Downs
President

Anu Radha Verma
Vice President

Umwali Sollange
Secretary

Wilfred Cheung
Treasurer

Dan Land*
Director

Elisabeth Brückmann*
Director

Jen Quinlan
Director

Karen Urbanoski
Director

Sepali Guruge
Director

IE Wégessy
Director

Terence Williams
Director

Uppala Chandrasekera*
Director

* No longer with PCHC
** On Leave

Students and volunteers

We would like to extend our **Special Thanks** to **ALL** students and volunteers who completed terms at PCHC this past year. Your contribution and commitment to the work of PCHC was greatly appreciated!



Parkdale
Community
Health Centre

Parkdale CHC (Main Site)

1229 Queen Street West
Toronto, ON M6K 1L2

Tel: 416.537.2455

Fax: (Admin) 416.537.5133

Fax: (Clinical) 416.537.3526

Hours of Operation

Monday, Tuesday & Thursday
9:00 a.m. to 8:00 p.m.

Wednesday

9:00 a.m. to 12:00 noon

3:00 p.m. to 8:00 p.m.

Friday

9:00 a.m. to 5:00 p.m.

Saturday

10:00 a.m. to 1:00 p.m.

Parkdale CHC (Satellite)

27 Roncesvalles Avenue
Suites 301/503
Toronto, ON M6R 3B2

Tel: 416.537.8222

Fax: 417.537.7714

Hours of Operation

Monday to Friday

9:00 a.m. to 5:00 p.m.

www.pchc.on.ca

