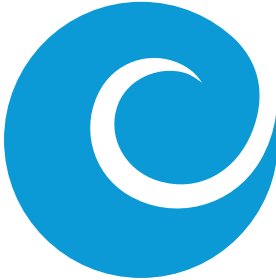
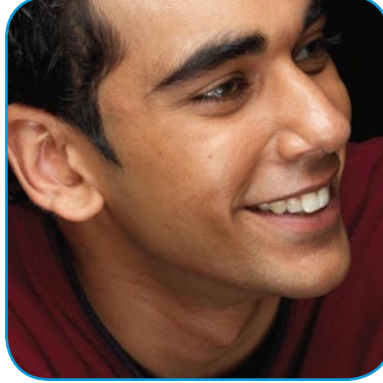


GREATER ST. CATHARINES COMMUNITY HEALTH CENTRE



Every One Matters.  
Ontario's Community Health Centres



ANNUAL REPORT 2009-2010



George Kurzawa,  
Board Chair



Coletta McGrath,  
Executive Director

interconnected primary health care system. Time and thought have been dedicated to ensuring that the mechanics together with the processes essential to this infrastructure are in place. Greater St. Catharines CHC's work with North Hamilton CHC, to develop a partnership with respect to the provision of IT and data management support, has been central to all of our information system related activity over the last year.

## A Message from the Chair of the Board and Executive Director

For Greater St. Catharines Community Health Centre (Greater St. Catharines CHC) 2009-2010 has been a year focused on the meaningful theme of cultivation – preparing, nurturing, making ready. Board and staff have diligently centred their attention on activities related to infrastructure, relationship building and setting the stage for programs and services. Each of these position Greater St. Catharines CHC to ensure the effective provision of barrier free primary health care for individuals who do not always feel welcome including isolated seniors, sexually and gender diverse residents (LGBTTIQQ2S, lesbian, gay, bisexual, transgender, transsexual, intersex, queer, questioning, two spirited), persons who are homeless/under housed, people experiencing mental health, addiction and/or concurrent disorders and at risk children and youth.

For many of us, the thrill of leadership comes from seizing opportunities, developing and delivering programs and services, and anticipating client and community needs. Yet, building infrastructure is like exercising, you may be able to survive without it but you'll be much better for it. Infrastructure is especially important for new organizations preparing to move to the next level and grow.

With that principle in mind the Greater St. Catharines CHC has dedicated significant energy in this past year to infrastructure development on multiple fronts. Considerable attention has been given to Board as well as Staff recruitment. Human Resource policies, practices and procedures have been generated and implemented in a variety of areas including recruitment, compensation structures, and performance management, to name a few.

A health information technology infrastructure is also essential to an accountable, quality based, efficient and

And what would all of the above be without the most appropriate venues from which to provide our services? 2009/2010 has seen considerable progress take place with respect to Greater St. Catharines CHC's interim and permanent sites. These sites, both of which will be located at 145 Queenston St. in St. Catharines, have been approved by the Hamilton Niagara Haldimand Brant Local Health Integration Network (HNHB LHIN) and offers to lease have been negotiated. In the meantime points of service in the community are being explored. While additional points of service will be established over time, Suite 100 at 145 Queenston St. along with Start Me Up Niagara, located at 17 Gale Crescent, are already confirmed.

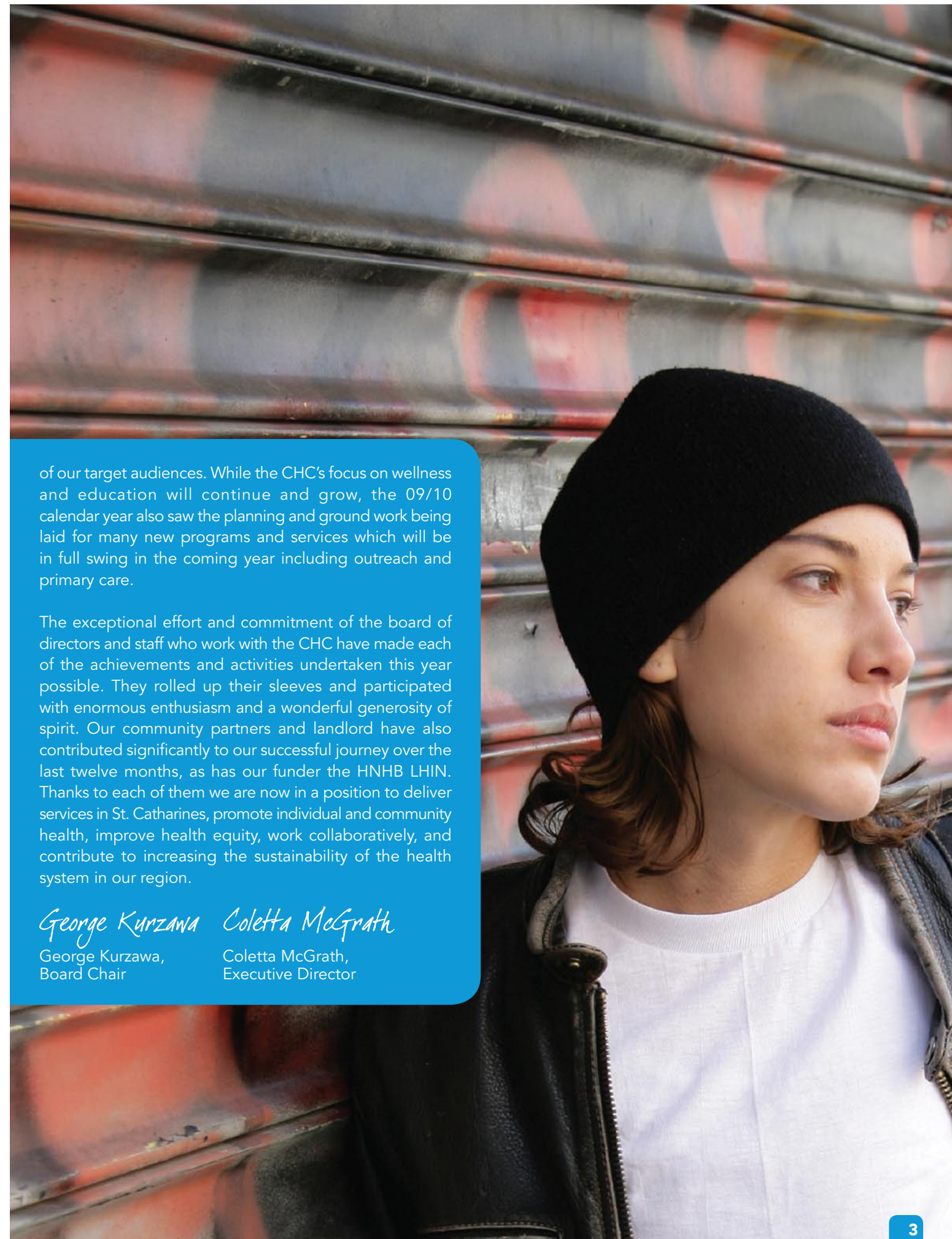
Building connections and building health are intimately linked. This is especially true given the fundamental relationship between an individual's overall well being and social determinants of health such as housing, employment, food security, social networks, income, and immigration status. In light of their impact on health outcomes Greater St. Catharines CHC has made a point, over the last year, of connecting with those organizations and systems across St. Catharines, the Niagara Region and beyond that provide services to address these determinants. The goal has been to explore ways that we can act collaboratively to make a difference. There are many highlights to be mentioned with respect to Greater St. Catharines CHC's work in this area. The Report provides more detailed information on these initiatives.

Providing high quality programs and services is at the forefront of Greater St. Catharines CHC's work. Partnership development and building community relationships has led to exciting outcomes in the past year aimed at health promotion and education programs for a variety

of our target audiences. While the CHC's focus on wellness and education will continue and grow, the 09/10 calendar year also saw the planning and ground work being laid for many new programs and services which will be in full swing in the coming year including outreach and primary care.

The exceptional effort and commitment of the board of directors and staff who work with the CHC have made each of the achievements and activities undertaken this year possible. They rolled up their sleeves and participated with enormous enthusiasm and a wonderful generosity of spirit. Our community partners and landlord have also contributed significantly to our successful journey over the last twelve months, as has our funder the HNHB LHIN. Thanks to each of them we are now in a position to deliver services in St. Catharines, promote individual and community health, improve health equity, work collaboratively, and contribute to increasing the sustainability of the health system in our region.

*George Kurzawa* *Coletta McGrath*  
George Kurzawa, Board Chair      Coletta McGrath, Executive Director



### INFORMATION SYSTEMS

Greater St. Catharines CHC is developing our information system policies, standards, protocols and technology collectively with a number of other Community Health Centres. Supported and encouraged by the HNHB LHIN we have been working in partnership with the North Hamilton Community Health Centre to ensure that CHC information systems develop and advance within a

## Achievements and Highlights 2009 - 2010

### 1. Building a Reliable Infrastructure

Greater St. Catharines CHC's Board continues to grow and evolve as several new members joined the Board in 2009/10. Chris Bittle, Tiffany Gartner, Fraser MacKay, Ebru Ustundag and Nadine Wallace have stepped up to the plate and we welcome their energy and diversity of perspective. At the same time Board members move on. We would like to express our thanks to one of our founding Board members, Ed Klassen. Ed's dedication, sense of vision, and commitment to ensuring primary health care for marginalized populations in our community will continue having an impact for many years to come.

### STAFF

Greater St. Catharines CHC's staff team has expanded considerably since last year when the Executive Director was hired. The preliminary stages of team development began in 2009/10 with the hiring of a Program Manager, Health Educator, Executive Assistant/Human Resource Coordinator and Administrative Coordinator. Job descriptions, advertisements and interview processes for hiring Physicians and Nurse Practitioners were also generated with the expectation of hiring these positions early in 2010/2011.

Human Resources has many facets in addition to hiring employees. The staff team has contributed significant time and energy to achieving a broad range of human resource related outcomes for the Greater St. Catharines CHC. Key among these are a Policy and Procedures Manual, Performance Evaluation Process and 360 Feedback Survey document, Compensation Structure, Benefits Plan, and the introduction of an on-line source of human resource information and support. In anticipation of the challenging market for many of the CHC's staff positions pension plan providers have been interviewed and options are being assessed from a sustainability as well as from an employee attraction and retention perspective.

collaborative environment that ensures it is responsive to participating CHC's clinical priorities as well as privacy and security considerations, data quality, and client and funder accountability. Within this context a number of different activities have been initiated. These include an agreement whereby North Hamilton CHC provides staffing to support Greater St. Catharines CHC's information technology and data management needs; participation on the Integrated Decision Support Project Committee to track a patient's journey within HNHB LHIN funded agencies and provide more timely access to data; purchasing the Ontario Telemedicine Network technology and software; and preparing to implement electronic health records.

### PLANNING FOR A PLACE TO SET UP SHOP

The Board completed its selection process for both the interim and permanent sites this year. Following a review of several architectural firms and the selection of Lett Architects from Peterborough, and guided by the architect, a clear set of criteria generated by Colliers Real Estate, and recommendations from its Facility Committee, the Board selected 145 Queenston St. as the location for its interim as well as its permanent sites. Upon obtaining LHIN approval the Board has moved forward with the exciting task of signing the interim and permanent lease offers and initiating leasehold improvements for the interim site.

### WHAT'S IN A NAME? JUST ABOUT EVERYTHING!



The Greater St. Catharines CHC has now formally changed its name to **Quest Community Health Centre**. The name is being launched at this year's annual meeting. The original name was intended as a working name. The CHC recognized that its single most important branding decision would

be choosing its name. It is the first contact everyone will have with the organization. The Board also felt that the purpose of an organization's name goes far beyond identification. A good name will distinguish the CHC from similar organizations, create an immediate, positive image of the CHC, help people remember the CHC and inspire images that will influence our organization's logo, marketing campaigns, and other communication efforts.

With all of the above in mind this past year the Greater St. Catharines Community Health Centre launched an exciting branding exercise with 180 Marketing. After much research and deliberation the Centre chose a new name – **Quest Community Health Centre**. The name was selected based on a number of considerations. Among these were the ease with which it can be connected to its street location in St Catharines – Queenston St.; the name's simplicity and the minimal effort with which it can be remembered; and the message that it conveys with respect to the importance of moving forward toward a vision and goals for the CHC as well as our clients.



to explore the relationship between the Emergency Department and Greater St. Catharines CHC, and the opportunity for referral processes. Meetings have also taken place with local seniors, children's, LGBTQ, mental health and addiction agencies and services to explore opportunities to work together. Greater St. Catharines CHC is interested in promoting an understanding of and interest

## Achievements and Highlights 2009 - 2010 (Cont'd)

### 2. Building Connections and Building Health

2009/10 saw the CHC begin to dedicate time to becoming part of the community services network in St. Catharines and across the Niagara Region. This meant beginning to explore planning and service delivery partnerships and coordinated working relationships. Greater St. Catharines CHC plans on making collaboration one of its greatest strengths in order to improve service quality, better meet client needs and make more efficient use of resources. As a result, work has continued and moved considerably further along in 2009/10.

Staff have seated themselves strategically at a number of regional planning and coordination tables. They are Members of the Niagara Region Prosperity Council; the Niagara Geriatric Services Collaborative; the Diabetes Network and the Effective Response Demonstration Project for Children and Youth with Mental Health Problems. It is expected that their work at these tables will help to connect Greater St. Catharines CHC with new clients and begin to support the establishment of best and most promising practices with respect to service effectiveness along with service efficiency.

Long established Community Health Centres have clearly demonstrated that clients benefit from the right types of partnerships. With that in mind Greater St. Catharines CHC has been rigorously exploring a variety of partnering opportunities over the past year. For example, individuals experiencing mental health or addiction issues, as well as concurrent disorders, end up falling through the system's cracks and often placing inordinate strain on hospital emergency rooms. Meetings and conference calls with board and staff from the Greater St. Catharines General Hospital including the Board President, senior management, and front line emergency room staff have been initiated this year to begin

in CHC's on the part of new physicians and at the same time benefiting from the services that can be provided through university residents and medical students. With that objective in mind Greater St. Catharines CHC has developed a Memorandum of Agreement in conjunction with McMaster University's Department of Family Medicine and their DeGroote School of Family Medicine to provide the opportunity for students and residents to work as part of the CHC Team.

Meetings have taken place and will continue with the Medical Officer of Health and Assistant Medical Officers of Health as well as the Commissioner of Community Services and his staff to learn about their services, brief them on the CHC's mandate, and explore how we can work together. Co-location opportunities have been raised with MOHLTC funded agencies in Niagara as well as other agencies serving the CHC priority populations and these discussions will continue with respect to the permanent site. Meetings to discuss opportunities to work together have also been launched with the President of Niagara College, as well as the Dean and Chair of the Health Sciences Department. Start Me Up Niagara has been confirmed as a point of service and meetings with the Collegiate Institute and Kernahan Park School are underway with this goal in mind as well. The dental initiative launched by Southridge Community Church has been transferred to Greater St. Catharines CHC and a Dental Advisory Committee consisting of a cross section of community members and dental professionals has been established to guide the development of the CHC's oral health program.

Ongoing conversations have been and will continue to be organized with key stakeholders outside of the human service sector including the city's mayor and members of provincial and federal parliament, for example. These will ensure that CHC's remain on the political and public radar.

### 3. Developing and Delivering Programs and Services

Partnership development and building community relationships has led to wonderful outcomes in the past year aimed at health promotion and education for a variety of our target audiences. These included an assortment of program initiatives and activities. For example, working in partnership with the Niagara Drug Awareness Committee and Tune into Mental Health and Addictions, the CHC has participated in programs to raise awareness surrounding substance abuse as well as mental health issues. Promoting men's health has also been on the CHC's radar as we engaged in a particularly creative partnership with Bridges Community Health Centre to provide a community screening event at the Fort Erie Race Track called "Racing for Health." We have also aligned ourselves with the province's Smoke-Free Ontario Strategy to offer smoking cessation programming that provides clients with an opportunity to access free supportive counselling and pharmaceutical aid to quit smoking.

The 09/10 calendar year also saw the planning and ground work being laid for many of our current programs and services which are now in full swing including outreach, primary care, and health promotion. Through our careful preparation and recruitment processes we have laid the base for a strong foundation and commitment to collaborative interdisciplinary practice that takes a whole person, client centred approach to health services and focuses on addressing the full spectrum of the social determinants that make up a person's health and well-being. We are excited and eager to see what the fruits of our labour allow us to achieve in the 10/11 calendar year!



### Board of Directors

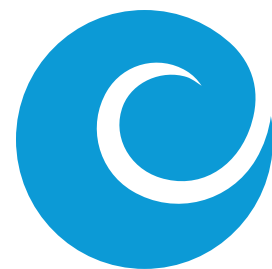
George Kurzawa	Chair
Chris Bittle	Secretary / Treasurer
Ebru Ustundag	
Ed Klassen	
Fraser McKay	
JoAnn Theobald	Vice Chair
Nadia Walker	
Nadine Wallace	
Tiffany Gartner	

## Board of Directors and Staff 2009 - 2010

### Staff

Amy Rukaruck	Health Educator / Promotion
Cheryl Barnet	Registered Nurse
Coletta McGrath	Executive Director
Crystal Poyton	Nurse Practitioner
Danielle Gdansk	Finance Consultant
Dawn Shickluna	Outreach Worker
Jaime Fay	Outreach Worker
Jenny Stranges	Program Manager
Lori Makarchuk	Administrative Coordinator
Vicki Jenkins	Special Projects Coordinator
Victoria LeBlanc	Programs and Services Support

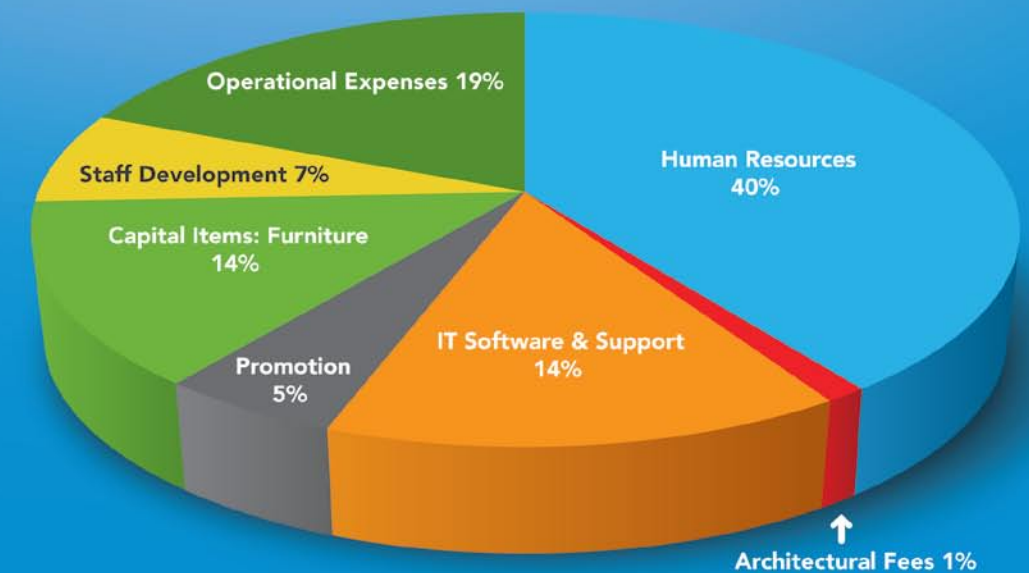
### Position



Every One Matters.

## Greater St. Catharines Community Health Centre Statement of Operations for the year ended March 31, 2010

Total Revenue:		<u>\$765,460.00</u>
Expenses:		
Advertising & Promotion	\$38,641.00	
Architectural Fees	\$7,952.00	
Dues & Memberships	\$8,430.00	
Bank Charges	\$792.00	
Insurance	\$1,923.00	
IT Equipment & Support	\$110,892.00	
Meeting & Forum	\$2,306.00	
Occupancy	\$13,127.00	
Office Furniture	\$104,783.00	
Office Supplies	\$22,663.00	
Operations & Maintenance	\$11,823.00	
Professional Fees	\$8,601.00	
Program Equipment & Supplies	\$57,119.00	
Project Management Services	\$20,264.00	
Purchased Services	\$22,860.00	
Resource Material	\$10,912.00	
Salaries & Benefits	\$211,048.00	
Staff Development	\$51,831.00	
Staff Recruitment	\$51,533.00	
Telephone	\$13,203.00	
Travel Expenses	\$4,013.00	
Cost Recovery (Interest Income)	<u>\$(9,741.00)</u>	<u>\$764,975.00</u>
Surplus (to be returned to LHIN's)		<u>\$485.00</u>







**GREATER ST. CATHARINES COMMUNITY HEALTH CENTRE**

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[www.questchc.ca](http://www.questchc.ca)

