

Belleville & Quinte West Community Health Centre

Annual Report 2017 - 2018



Vision

Together achieving health and wellness

Mission

To partner with clients, staff and community in providing quality care

Values
Client Self Determination
Compassion
Respect
Equity
Integrity

2017-21 Strategic Directions

Engage

BQWCHC will work with our clients, community members, and staff to strengthen the organization and the work we do

Influence

BQWCHC will work on social issues that impact the health of our clients and communities

Integrate

BQWCHC will work with others to ensure people get the care they need, on time, and in ways that make sense

Innovate

BQWCHC will explore different ways of doing things better

President's Report

This has been an active year for the Board of Directors of the Community Health Centre.



Some experienced Board members retired, or took leaves of absence from the Board and new people joined the Board requiring orientation and mentoring. This was a challenge for the Board, especially since there were many serious decisions facing it; however we feel we were successful in meeting our goals over the year.

Last year we welcomed a new Executive Director, Sheila Braidek. Sheila's first day started by going to an urgent meeting with a local politician and her pace has not really slowed down since then. We have enjoyed working with Sheila and her experience and knowledge of the CHC system has been truly beneficial. The Board looks forward to working with her for years to come.

The Board has spent considerable time discussing how to connect with the community it serves. We want to engage with the community in an effort to determine the true needs of its citizens. A Community Advisory Committee reports to the Board and is always looking for involvement and feedback from people who have an interest in the work of the CHC.

For a number of years we have been trying to build a new CHC site in Quinte West. This past year has been a roller coaster ride in trying to get final approvals for the build. The Board is pleased with the progress that has been made and looks forward to putting the shovel in the ground before the end of 2018, with a new building completed in 2019. The Board would like to express its sincere appreciation to all those involved in making this happen.

I am retiring from the Board and would like to take this opportunity to thank all past and present Board members and staff of the CHC for making this such a rewarding experience. I have truly enjoyed my time on the Board and would encourage anyone looking for a positive Board experience to apply for Board membership. I leave knowing this Board will continue to represent the community well and will ensure a high level of health care for the people it serves.

Alan Mathany

President

Executive Director's Report

We've done a lot and it feels like we are doing the right things – engaging with our clients and community...



Each year when I get ready to prepare our annual report, part of what I do is review my monthly reports to the Board of Directors and the minutes from our Management Team and Staff meetings.

Wow. No wonder we're happy and tired! We've done a lot and it feels like we are doing the right things – engaging with our clients and community, delivering high quality programs and services, working with our partners, keeping equity on the radar.

It is hard to capture in a few words all that a community health centre is and does. It is a place where people come when they are sick, when they want to learn, when they want to make a personal change, when they are scared, when they are outraged and want society to change, when they want to work with their neighbours to make our communities healthier. What it does is build connections, treat illness, promote health, nurture possibility and help change things for the better. How we do these things on a day-to-day basis is reflected throughout this report.

To do our work, we rely on our knowledgeable and hardworking staff and volunteers. Thank you! As is typical in any organization, we have seen some staff come – Welcome! – and some go. Priya Abeysirigunawardena, Meagan Feeney, Joanne Fitzgibbon, Maggie Flynn, Leslee Holland, Jessica Lyon, M. Anne McDermid, Margaret O'Neill, Sharon Roberts, Erika Thorn and Mary Woodman all left BQWCHC this year. We thank them for their service and wish them all the best.

The coming year promises more challenges and more opportunities. We will be – yes finally – starting construction on our new facility in Trenton, partnering to bring Addictions and Mental Health Services on site, helping expand opioid management programs in the area, and launching our part of the Home For Good housing program. Oh yes, and all the other stuff too!

Thank you to our clients and community for your ongoing support. Thank you as well to the Southeast Local Health Integration Network for funding and support and to our partner organization for your support.

82-

Sheila Braidek
Executive Director

Primary Health Care

At BQWCHC our comprehensive model of primary health care means that people have access to a primary care provider who is working in partnership with other professions, like social work and pharmacy, to address your health concerns. Each member of the team brings their unique skills and experience to working with you.

PRIMARY CARE

At BQWCHC we have 5267 clients getting care from our primary care providers - physicians and nurse practitioners. Of these 32% had 3 or more complex health issues.

Quality care is important to us.

We monitor our cancer screening and influenza vaccination rates. Our performance continues to be well above the provincial average.

90% of clients say they are involved in decisions about care & treatment.

92% of clients say their provider spends enough time with them.

Timely access to care is also important. We have been working hard in the past few years to improve same/next day access for our existing clinical clients, and our clients have noticed.

Clients reported their ability to access same day/next day to a primary care provider increased from 47% to 65% in the past year!

for primary

POST-HOSPITAL FOLLOW-UP

We are now able to monitor when our clients have been to the Emergency Department or discharged from hospital. Our dedicated nurses call these clients to connect with them and arrange a follow-up appointment with us if necessary. This reaching out helps reduce the number of people who have to go back to the hospital.





SOCIO-DEMOGRAPHIC DATA REFRESH

We have been updating the socio-demographic data about our clients. This data - about your age, income, education, ethnicity, gender identity and sexual orientation - helps us plan and evaluate our programs and services. And it helps the broader health system understand generally who we are working with and the role of community health centres. It is voluntary to provide this information and please ask if you have any questions. Thanks very much to the this important project!

SOCIAL WORK



provides short term counselling for our primary care clients and others. They also play an important role in our group programs for our clients and the community at large. In the past year they helped make programs like **Managing Powerful Emotions** and People Skills available in the

Our social work team

PHARMACY

Our community **pharmacist** does not dispense medications but she does work closely with providers and clients to ensure effective use of medications. The pharmacist can help in reducing opioid or marijuana use or ensuring people are taking their medications safely. Medication reconciliation -

Belleville and Quinte West area.

making sure clients are taking the right medications in the right way - is important to client safety and health outcomes.

80% of our Health Links eligible clients have had a medication reconciliation.

WOUND AND FOOT CARE



The High Risk Wound and Foot Care program served 116 people.

Effectively managing these types of wounds and foot issues helps improve health and reduce further complications.

NUTRITIONAL COUNSELLING



Our dietitian had 444 one-to-one nutritional counsel-

ling appointments with individuals with chronic disease, eating disorders, or other nutritional concerns.

DISEASE PREVENTION AND MANAGEMENT



Chronic Disease
Prevention and
Management nursing

brings special knowledge and skill to working with people with or at risk of chronic diseases. The CDPM Nurse works in partnership with the client and other BQWCHC staff to reduce the impact of the chronic disease and improve overall health.

During 2017/18 the nurse worked with 532 people during 1170 individual and 33 group visits.

BRIGHT IDEAS



BQWCHC was pleased to be able to participate in IDEAS this year. IDEAS (Improving & Driving Excellence Across Sectors) is a comprehensive, evidence based quality improvement training program for Ontario's health professionals. IDEAS is

a partnership of the Ministry of Health and Long Term Care, Health Quality Ontario, Institute for Clinical Evaluative Services, University of Toronto and McMaster University.

Our IDEAS project was to develop a new way of supporting our clients with chronic pain. Our pharmacist, social worker, health promoter and physician worked together to design and test a workshop on managing non-cancer pain. Clients who participated reported slight improvements in managing their pain and a small decrease in anxiety and depression. We will be looking at ways to build on this project in the coming year.





Community & Health Promotion

Physical activity is part of healthy living. Activities such as Indoor Walking, Urban Poling and Seated Exercise help get people moving and are open to anyone in our community.

CHRONIC DISEASE MANAGEMENT

In addition to working with individuals and their primary care provider to manage chronic conditions, our team runs several workshops on **chronic disease management**. These are focused primarily on living with chronic pain, COPD, or diabetes. And we offer a support group for people living with chronic conditions.

NUTRITION

BQWCHC is a distribution depot for the Good Food Box and our dietitian does workshops with children (aged 9 - 12) and adults focused on cooking basics and learning about nutrition. Nothing smells better in the Health Centre than fresh made muffins! And nothing brings a group together like food.

In 2017/18 our dietitian participated in 132 group sessions involving 1944 attendances.

8074 attendances in groups

2337
Good Food boxes
& Fruit Bags
distributed





ORAL HEALTH

Oral health is a key to overall health. BQWCHC Oral Health program is focused on people living on low incomes. Over 1600 people received services this year. This is only what we have the capacity to do and does not come close to meeting the demand for affordable oral health care.



THRIVE

Thrive is a regional program to support

pregnant and parenting women with experience of opioid substance use. The programs builds connections, skills and capacity among women to improve parent and child health.

Throughout the year Thrive was able to provide support to 77 individual women and their families with 1072 face to face visits.

TELEMEDICINE



BQWCHC manages the regional Ontario **Telemedicine** Network

service. This year OTN had 959 individual appointments. By using technology to connect clients with providers and providers with colleagues, we improve access to health care.

Because of the telemedicine program 959 people did not have to take extra time off work or pay for transportation to get the care they needed.

The most frequent type of telemedicine visit was for mental health services.

QUINTE HEALTH LINK



QHL is a collaborative of organizations working to provide better coordinated care for people living with multiple complex health and social issues.

BQWCHC is the lead agency for Quinte Health Link. In 2017/18 QHL worked with 405 new clients to develop a Coordinated Care Plan.

Over the past 4 years QHL has been able to reduce the Emergency Department utilization by an average of 37% and hospital admissions by an average of 54% among its Health Link clients! Thanks to all the partner organizations contributing to Health Links – it is making a difference!



VOLUNTEERING AT BOWCHC

In addition to the Board of Directors and its committees, we now have 14 programs that involve volunteers, past clients/participants helping facilitate the programs. Thank you to all our volunteers!



Community Development & Capacity Building

Our community is healthier when people help each other.

COMMUNITY GOVERNANCE



Community governance is one way that our community shapes BQWCHC

and we help shape our community.
The Board of Directors are volunteers
who provide strategic leadership,
oversee our finances and make
sure we are in touch with our
community.

HOUSING

Access to safe affordable housing is a foundation to good health. BQWCHC and the Quinte Health Link supported the Home For Good Initiative of Hastings County. This initiative will build a 40-unit supported housing development and provide rent supplements and support that tenants will need. This exciting project is a partnership among many local agencies and BQWCHC is pleased to be a partner!



PRIDE

For many years BQWCHC has participated in local **Pride** events. In 2017 we were proud to march in the parade. Access to health care is important for everyone. Access is in part about feeling welcome, listened to and not judged.

Celebrating the l/g/b/t/q community means celebrating health and equity!

Marsha Stephen Community Health Leadership Award

In 2017, the Board of Directors was honoured to present the Marsha Stephen Community Health Leadership Award to Terry Richmond.

The Marsha Stephen Community Health Leadership Award is about recognizing leaders that understand that health starts where we live, learn, work and play – in our community. They understand the importance of strong collaborative communities and work tirelessly to create strong partnerships and build capacity for better health for our communities and the people in them.

Terry Richmond, CEO at Cheshire Homes, is one such leader. Thank you and congratulations Terry!

Finance Committee Report 2017 - 2018

FINANCIAL STATEMENT SUMMARY

BQWCHC has a Treasurer, Wendy Osborne and Finance Committee of the Board. We have an annual audit completed by an external auditor, Welch LLP. Any surplus from the Southeast Local Health Integration Network or the Government of Ontario is repayable to the provincial government.

If you would like a copy of the complete audited financial statements, please contact us at info@bqwchc.com.

Welcome to Roger Snow, our new Director of Corporate Services and thanks to the corporate services team!

Statement of Revenue, Expenditure and Net Assets

(as excerpted from the audited Financial Statements)

Current Assets Cash \$ 2,281,015 \$ 1,393,715 Short-term investments \$ 1,042,226 \$ 1,033,989 Accounts receivable \$ 315,476 \$ 92,532 Government rebate recoverable \$ 161,457 \$ 98,880 Prepaid expenses \$ 84,678 \$ 3,614 \$ 3,884,852 \$ 2,655,730 Tangible Capital Assets \$ 1,195,776 \$ 1,007,256 Intangible Capital Assets \$ 1,503,364 \$ 1,514,92 Accounts payable and accrued liabilities \$ 556,033 \$ 321,141 Government remittances payable \$ 1,503,164 \$ 1,511,492 Subsidies repayable \$ 1,766,688 \$ 764,233 \$ 3,884,852 \$ 2,655,730 Deferred Contributions related to capital assets \$ 848,221 \$ 677,001 Net Assets Invested in tangible and intangible capital assets - internally restricted \$ 359,108 \$ 355,593 <th></th> <th>2017/18</th> <th>2016/17</th>		2017/18	2016/17
Short-term investments \$ 1,042,226 \$ 1,033,989 Accounts receivable \$ 315,476 \$ 92,532 Government rebate recoverable \$ 161,457 \$ 98,880 Prepaid expenses \$ 84,678 \$ 3,6614 \$ 3,884,852 \$ 2,655,730 Tangible Capital Assets \$ 1,195,776 \$ 1,007,256 Intangible Capital Assets \$ 11,553 \$ 25,338 \$ 5,092,181 \$ 3,688,324 Liabilities and Net Assets S 25,338 \$ 5,092,181 \$ 3,688,324 Liabilities and Net Assets S 25,338 \$ 5,092,181 \$ 3,688,324 Liabilities and Net Assets S 25,338 \$ 3,688,324 Liabilities and Net Assets S 25,338 \$ 3,688,324 Current Liabilities \$ 556,033 \$ 321,141 Government remittances payable \$ 58,967 \$ 58,864 Deferred revenue \$ 1,503,164 \$ 1,511,492 Subsidies repayable \$ 1,766,688 \$ 764,233 Invested in tangible and intangible capital assets \$ 848,221 \$ 677,001 Net Assets \$ 1,021,185 \$ 355,593 \$ 355,593 Unrestricted \$ 7,671,	Current Assets		
Accounts receivable Government rebate recoverable Prepaid expenses \$ 161,457 \$ 98,880 Prepaid expenses \$ 84,678 \$ 36,614 \$ 3,884,852 \$ 2,655,730 Tangible Capital Assets Intangible Capital Assets Liabilities and Net Assets Current Liabilities Accounts payable and accrued liabilities Accounts payable and accrued liabilities Foegarment remittances payable Deferred revenue \$ 1,503,164 \$ 1,511,492 Subsidies repayable \$ 1,766,688 \$ 764,233 \$ 3,884,852 \$ 2,655,730 Deferred Contributions related to capital assets Invested in tangible and intangible capital assets - internally restricted Unrestricted \$ - \$ - \$ - \$ 359,108 \$ 355,593 Unrestricted \$ 7,671,750 \$ 7,579,380 Expenditures Expenditure, before under noted item Expenditure, before under noted item Exs: Subsidies repayable \$ -1,071,859 \$ -764,233 \$ 3,515 \$ -30,344 Net Assets, beginning of the year \$ 355,593 \$ 385,937	Cash	\$ 2,281,015	\$ 1,393,715
Sovernment rebate recoverable \$161,457 \$98,880	Short-term investments	\$ 1,042,226	\$ 1,033,989
Prepaid expenses	Accounts receivable	\$ 315,476	\$ 92,532
Tangible Capital Assets Intangible Capital Assets Intangible Capital Assets Intangible Capital Assets Intangible Capital Assets Liabilities and Net Assets Current Liabilities Accounts payable and accrued liabilities Accounts payable and accrued liabilities Foreign Stand Net Assets Current Liabilities Accounts payable and accrued liabilities Foreign Stand Net Assets Current Liabilities Accounts payable and accrued liabilities Foreign Stand Net Assets Current Liabilities Accounts payable and accrued liabilities Foreign Stand Net Assets Foreign	Government rebate recoverable	\$ 161,457	\$ 98,880
Tangible Capital Assets	Prepaid expenses	\$ 84,678	\$ 36,614
State		\$ 3,884,852	\$ 2,655,730
\$ 5,092,181	Tangible Capital Assets	\$ 1,195,776	\$ 1,007,256
Liabilities and Net Assets Current Liabilities \$ 556,033 \$ 321,141 Accounts payable and accrued liabilities \$ 58,967 \$ 58,864 Deferred revenue \$ 1,503,164 \$ 1,511,492 Subsidies repayable \$ 1,766,688 \$ 764,233 \$ 3,884,852 \$ 2,655,730 Deferred Contributions related to capital assets \$ 848,221 \$ 677,001 Net Assets Invested in tangible and intangible \$ 359,108 \$ 355,593 Capital assets - internally restricted \$ 359,108 \$ 355,593 Unrestricted \$ - \$ 359,108 \$ 355,593 \$ 3,688,324 2017/18 2016/17 Revenue \$ 7,671,750 \$ 7,579,380 Expenditures \$ 6,585,479 \$ 6,827,210 Excess/(Deficiency) of Revenue over \$ 7,671,750 \$ 7,579,380 Expenditure, before under noted item \$ 1,086,271 \$ 752,170 Less: Subsidies repayable \$ -1,071,859 \$ -764,233 Less: Loss on disposal of capital assets \$ \$10,897 \$ -18,281 \$ 3,515 \$ 30,344 Net Assets, beginning of the year \$ 355,593 \$ 385,937	Intangible Capital Assets	\$ 11,553	\$ 25,338
Current Liabilities Accounts payable and accrued liabilities \$ 556,033 \$ 321,141 Government remittances payable \$ 58,967 \$ 58,864 Deferred revenue \$ 1,503,164 \$ 1,511,492 Subsidies repayable \$ 1,766,688 \$ 764,233 \$ 3,884,852 \$ 2,655,730 Deferred Contributions related to capital assets \$ 848,221 \$ 677,001 Net Assets Invested in tangible and intangible a 359,108 \$ 355,593 Unrestricted \$ - \$ - \$ 359,108 \$ 355,593 \$ 355,593 \$ 5,092,181 \$ 3,688,324 Proper Colspan="2">Revenue \$ 7,671,750 \$ 7,579,380 \$ 6,585,479 \$ 6,827,210 Excess/(Deficiency) of Revenue over Expenditure, before under noted item \$ 1,086,271 \$ 752,170 Less: Subsidies repayable \$ -1,071,859 \$ -764,233 Less: Loss on disposal of capital assets \$ \$ 10,897 \$ -18,281 \$ 3,515 \$ 30,344 Net Assets, beginning of the year \$ 355,593 <t< td=""><td></td><td>\$ 5,092,181</td><td>\$ 3,688,324</td></t<>		\$ 5,092,181	\$ 3,688,324
Current Liabilities Accounts payable and accrued liabilities \$ 556,033 \$ 321,141 Government remittances payable \$ 58,967 \$ 58,864 Deferred revenue \$ 1,503,164 \$ 1,511,492 Subsidies repayable \$ 1,766,688 \$ 764,233 \$ 3,884,852 \$ 2,655,730 Deferred Contributions related to capital assets \$ 848,221 \$ 677,001 Net Assets Invested in tangible and intangible a 359,108 \$ 355,593 Unrestricted \$ - \$ - \$ 359,108 \$ 355,593 \$ 355,593 \$ 5,092,181 \$ 3,688,324 Proper Colspan="2">Revenue \$ 7,671,750 \$ 7,579,380 Expenditures \$ 6,585,479 \$ 6,827,210 Excess/(Deficiency) of Revenue over Expenditure, before under noted item \$ 1,086,271 \$ 752,170 Less: Subsidies repayable \$ -1,071,859 \$ -764,233 Less: Loss on disposal of capital assets \$ -\$10,897 \$ -18,281 \$ 3,515 \$ -30,344 Net Assets, beginning of the ye	Liabilities and Net Assets		
Government remittances payable Deferred revenue \$ 1,503,164 \$ 1,511,492 Subsidies repayable \$ 1,766,688 \$ 764,233 \$ 3,884,852 \$ 2,655,730 Deferred Contributions related to capital assets Invested in tangible and intangible capital assets - internally restricted Contribution Unrestricted \$ 359,108 \$ 355,593 \$ 5,092,181 \$ 3,688,324			
Government remittances payable Deferred revenue \$ 1,503,164 \$ 1,511,492 Subsidies repayable \$ 1,766,688 \$ 764,233 \$ 3,884,852 \$ 2,655,730 Deferred Contributions related to capital assets Invested in tangible and intangible capital assets - internally restricted Contribution Unrestricted \$ 359,108 \$ 355,593 \$ 5,092,181 \$ 3,688,324	Accounts payable and accrued liabilities	\$ 556,033	\$ 321,141
Deferred revenue \$ 1,503,164 \$ 1,511,492 Subsidies repayable \$ 1,766,688 \$ 764,233 \$ 3,884,852 \$ 2,655,730 Deferred Contributions related to capital assets \$ 848,221 \$ 677,001 Net Assets Invested in tangible and intangible capital assets - internally restricted \$ 359,108 \$ 355,593 Unrestricted \$ - \$ - \$ \$ 359,108 \$ 355,593 \$ 5,092,181 \$ 3,688,324			
Subsidies repayable \$ 1,766,688 \$ 764,233 \$ 3,884,852 \$ 2,655,730 Deferred Contributions related to capital assets \$ 848,221 \$ 677,001 Net Assets Invested in tangible and intangible capital assets - internally restricted \$ 359,108 \$ 355,593 Unrestricted \$ 359,108 \$ 355,593 \$ 5,092,181 \$ 3,688,324 2017/18 2016/17 Revenue \$ 7,671,750 \$ 7,579,380 Expenditures \$ 6,585,479 \$ 6,827,210 Excess/(Deficiency) of Revenue over Expenditure, before under noted item \$ 1,086,271 \$ 752,170 Less: Subsidies repayable \$ -1,071,859 \$ -764,233 Less: Loss on disposal of capital assets \$ -\$10,897 \$ -18,281 \$ 3,515 \$ -30,344 Net Assets, beginning of the year \$ 355,593 \$ 385,937	· ·		
\$ 3,884,852	Subsidies repayable		
Net Assets \$848,221 \$677,001	• ,		
Net Assets Invested in tangible and intangible capital assets - internally restricted \$ 359,108 \$ 355,593 Unrestricted \$ - \$ - \$ - \$ \$ 359,108 \$ 355,593 \$ 5,092,181 \$ 3,688,324	Deferred Contributions		
Invested in tangible and intangible capital assets - internally restricted \$ 359,108 \$ 355,593 Unrestricted \$ - \$ - \$ - \$ \$ 359,108 \$ 355,593 \$ 5,092,181 \$ 3,688,324	related to capital assets	\$ 848,221	\$ 677,001
capital assets - internally restricted \$ 359,108 \$ 355,593 Unrestricted \$ - \$ - - \$ 359,108 \$ 355,593 \$ 5,092,181 \$ 3,688,324 2017/18 2016/17 Revenue \$ 7,671,750 \$ 7,579,380 Expenditures \$ 6,585,479 \$ 6,827,210 Excess/(Deficiency) of Revenue over Expenditure, before under noted item \$ 1,086,271 \$ 752,170 Less: Subsidies repayable \$ -1,071,859 \$ -764,233 Less: Loss on disposal of capital assets \$ -\$10,897 \$ -18,281 \$ 3,515 \$ -30,344 Net Assets, beginning of the year \$ 355,593 \$ 385,937	Net Assets		
Unrestricted \$ - \$ - \$ - \$ \$ \$ \$ \$ \$ \$	Invested in tangible and intangible		
\$ 359,108 \$ 355,593 \$ 5,092,181 \$ 3,688,324 \$ 2017/18 2016/17 Revenue \$ 7,671,750 \$ 7,579,380 Expenditures \$ 6,585,479 \$ 6,827,210 Excess/(Deficiency) of Revenue over Expenditure, before under noted item \$ 1,086,271 \$ 752,170 Less: Subsidies repayable \$ -1,071,859 \$ -764,233 Less: Loss on disposal of capital assets \$ -\$10,897 \$ -18,281 \$ 3,515 \$ -30,344 Net Assets, beginning of the year \$ 355,593 \$ 385,937	capital assets - internally restricted	\$ 359,108	\$ 355,593
\$ 5,092,181 \$ 3,688,324 2017/18 2016/17 Revenue \$ 7,671,750 \$ 7,579,380 Expenditures \$ 6,585,479 \$ 6,827,210 Excess/(Deficiency) of Revenue over Expenditure, before under noted item \$ 1,086,271 \$ 752,170 Less: Subsidies repayable \$ -1,071,859 \$ -764,233 Less: Loss on disposal of capital assets \$ -\$10,897 \$ -18,281 \$ 3,515 \$ -30,344 Net Assets, beginning of the year \$ 355,593 \$ 385,937	Unrestricted	\$ -	\$ -
Revenue \$ 7,671,750 \$ 7,579,380 Expenditures \$ 6,585,479 \$ 6,827,210 Expenditure, before under noted item \$ 1,086,271 \$ 752,170 Less: Subsidies repayable \$ -1,071,859 \$ -764,233 Less: Loss on disposal of capital assets \$ -\$10,897 \$ -18,281 \$ 3,515 \$ -30,344 Net Assets, beginning of the year \$ 355,593 \$ 385,937		\$ 359,108	\$ 355,593
Revenue \$ 7,671,750 \$ 7,579,380 Expenditures \$ 6,585,479 \$ 6,827,210 Excess/(Deficiency) of Revenue over Expenditure, before under noted item \$ 1,086,271 \$ 752,170 Less: Subsidies repayable \$ -1,071,859 \$ -764,233 Less: Loss on disposal of capital assets \$ -\$10,897 \$ -18,281 \$ 3,515 \$ -30,344 Net Assets, beginning of the year \$ 355,593 \$ 385,937		\$ 5,092,181	\$ 3,688,324
Expenditures \$ 6,585,479 \$ 6,827,210 Excess/(Deficiency) of Revenue over \$ 1,086,271 \$ 752,170 Less: Subsidies repayable \$ -1,071,859 \$ -764,233 Less: Loss on disposal of capital assets \$ -\$10,897 \$ -18,281 \$ 3,515 \$ -30,344 Net Assets, beginning of the year \$ 355,593 \$ 385,937		2017/18	2016/17
Expenditures \$ 6,585,479 \$ 6,827,210 Excess/(Deficiency) of Revenue over \$ 1,086,271 \$ 752,170 Less: Subsidies repayable \$ -1,071,859 \$ -764,233 Less: Loss on disposal of capital assets \$ -\$10,897 \$ -18,281 \$ 3,515 \$ -30,344 Net Assets, beginning of the year \$ 355,593 \$ 385,937	Revenue	\$ 7.671.750	\$ 7.579.380
Excess/(Deficiency) of Revenue over Expenditure, before under noted item \$ 1,086,271 \$ 752,170 Less: Subsidies repayable \$ -1,071,859 \$ -764,233 Less: Loss on disposal of capital assets \$ -\$10,897 \$ -18,281 \$ 3,515 \$ -30,344 Net Assets, beginning of the year \$ 355,593 \$ 385,937	Expenditures		
Less: Subsidies repayable \$ -1,071,859 \$ -764,233 Less: Loss on disposal of capital assets \$ -\$10,897 \$ -18,281 \$ 3,515 \$ -30,344 Net Assets, beginning of the year \$ 355,593 \$ 385,937	-	, , , , , , , , , , , , , , , , , ,	
Less: Subsidies repayable \$ -1,071,859 \$ -764,233 Less: Loss on disposal of capital assets \$ -\$10,897 \$ -18,281 \$ 3,515 \$ -30,344 Net Assets, beginning of the year \$ 355,593 \$ 385,937	Expenditure, before under noted item	\$ 1,086,271	\$ 752,170
Less: Loss on disposal of capital assets \$ -\$10,897 \$ -18,281 \$ 3,515 \$ -30,344 Net Assets, beginning of the year \$ 355,593 \$ 385,937	Less: Subsidies repayable	\$ -1,071,859	
Net Assets, beginning of the year \$ 355,593 \$ 385,937	Less: Loss on disposal of capital assets	\$ -\$10,897	\$ -18,281
		\$ 3,515	\$ -30,344
	Net Assets, beginning of the year	\$ 355,593	\$ 385,937
			±

Every One Matters. Every Individual. Every Family. Every Community.

2017-2018 BOARD OF DIRECTORS

Alan Mathany, Kathy Baker
President Kathryn Brohman
Sandie Sidsworth, Dawne Brown
Vice-President Christine Chomyn
Brad Harrington, Christine Durant

Secretary Kim Egan

Wendy Osborne, Lorrie Heffernan Treasurer lames Huff

EMPLOYEES

Priya Abeysirigunawardena* Chanse Holder **Iennifer Allan** Leslee Holland* Daina Ashton Melissa Holowaty Kim Boyle Holly Johnson Sheila Braidek Natasha Kerr Susanne Chatten Helen Lakhan Amalie Churchill* **Christanne Lewis** Jacqueline Dillon lessica Lyon* Susan English M. Anne McDermid Meagan Feeney* Iulia Miles Joanne Fitzgibbon* Veneda Murtha Margaret Flynn* Margaret O'Neill* Vicki Forestell **Brittany Papke** Pamela Garrison **Amy Parks** Athena Gaumond **Brandy Phillips** Jose Gomide Stacey Powell Sarah Graham Elaine Radway Sara Graves Valerie Robbins Gretchen Grenke Sharon Roberts* Katie Grieve April Rowlandson

Luba Shepertycky
Anna Sherlock
Krista Smith
Roger Snow
Lois Stather
Jessica Stevenson
Tania Strong
Cheryl Swallow

Heather Sylvester-Giroux

Lorri Taylor Meghan Thain

Erika Thorn*

Natasha Theocharides

Dolores Turner
Carla Vander Voort
Daniel Vernet
Shannon Wall
Patty Wilson
Mary Woodman*

51BQWCHC staff

Fran Schmidt

Bianca Sclippa Barrett

Generously supported by:





Diana Hancock

^{*}Indicates people who left BQWCHC during the year