

# 2019 2020 BQWCHC ANNUAL REPORT



Belleville and Quinte West  
Community  
Health Centre

## Vision

**Together** achieving health and wellness

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

## Values

Client Self Determination



## 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

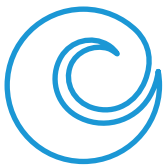
### Innovate

BQWCHC will explore different ways of doing things better

### Integrate

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

## BQWCHC at a Glance



**66 Staff**



**Total budget**  
**\$7,130,714**



**47,621 Encounters**  
**with clients**



**346 New primary**  
**care clients taken in**



**61 Volunteers**  
**contributing over**  
**3100 hours**



**602 Groups with**  
**6020 attendances**

# President's Report

I'm excited to share with you that in February 2020 we secured approval to proceed with construction of our new building in Quinte West where we will be better able to carry out duties for our community with the services needed in Primary and Community Health Care. We look forward to moving into our new building later in 2021.

At the end of the year, BQWCHC understood the world around us was changing at an enormous pace as a result of the emerging pandemic. Consequently, BQWCHC began a transformation to ensure we could continue to provide the services needed by our communities going forward.

Some of these changes were already underway throughout the year, as the Board of Directors began to redevelop how we work in order to allow for more generative discussions to complement our more traditional fiduciary and strategic work. These generative discussions focused on how to better engage our community and how to revise our membership, how to transform our services by utilizing digital health better, and in some cases they led us to re-examine aspects of what we do and how we do it.

The Board also focused on its own development as a way of ensuring we continue to learn and improve our ability as a group to provide direction to BQWCHC. The Board focused on preparing for accreditation, reviewing Board roles and responsibilities, and reviewing existing and new opportunities for program expansion such as social prescribing and understanding adverse childhood experiences and their impact on health outcomes and wellbeing.

Additionally, the Board was actively involved in analyzing the impact of provincial health reforms on BQWCHC, our clients, and our community partners. We are pleased that BQWCHC is working with other organizations on the development of the Quinte Ontario Health Team.

During the year, Sandie Sidsworth, BQWCHC President resigned, with regret. Sandie left to focus more on the growth of the Enrichment Centre for Mental Health where she is the Executive Director. The Board accepted Sandie's resignation with regret and thanked her for her many years of dedicated leadership with BQWCHC. My term as President started in February and I look forward to continuing to work with the Board to ensure we represent the community well and ensure a high level of health care for the communities we serve.



**Brad Harrington, President,**  
BQWCHC Board of Directors

**2019/2020 has been a year where BQWCHC has achieved long-standing goals and also when we began preparing for potentially enormous health risks for our communities.**

# Executive Director Report

**BQWCHC understands the health and wellbeing of individuals to be closely tied to the health and wellbeing of the community as whole, and vice-versa.**

The emergent COVID-19 pandemic is one example of this. The way in which lesbian/gay/transgender/bisexual youth experience more health risks is another example. This year's annual report reflects that dynamic. It explores the work we do that is focused on individuals, families and community. Within that exploration we see that these categories are not distinct but intertwined: work with individuals is about building community; work with families is about supporting an individual.

Since health is a holistic concept, it makes sense that the work we do to promote and maintain health is also holistic. This is not to say that one organization can or should be all things to all people. Rather, that we should be a conduit – linking people to what we can do internally and to what else is available in the community.

Holistic, dynamic connection: seems like the definition of BQWCHC. The outline in this report highlights some of the work we do to reflect this.

These ideas and services really only come alive with meaning and purpose (for the people we serve) with the commitment of a lot of folks.

Thank you to the staff and volunteers for your passion and hard work.

Thank you to the Board for your leadership.

Finally, thank you to our funders for your support.



**Sheila Braidek,**  
Executive Director



# Supporting Individuals & Families

BQWCHC provides a range of services to support the physical, social and mental wellbeing of our clients. Physicians, nurse practitioners, nurses, chronic disease prevention and management nurses, pharmacist, respiratory therapists, social workers, and dieticians work collaboratively with our clients to address their health needs. Often client needs may present as physical but also have social and emotional dimensions to them. By working together staff can bring different perspectives to the issues impacting clients, rely on the expertise of each other, and build a variety of relationships with the people we serve.

Not everyone has the same health issues or the same needs at any given time. The response of the team can increase or decrease to match the current situation of a client – bring to bear more or less resources as makes sense. We also know that some groups of people, because of other factors in their lives, may need more support to experience the same opportunities as others and achieve wellbeing. We are able to focus our resources on those groups of people.

**In practical terms, supports to individuals and families include, but are not limited to:**

- Advocacy and system navigation
- Help with accessing basic needs assistance
- Medical examination, diagnosis and treatment
- Primary care home visiting
- Counselling on stopping smoking and chronic disease management
- Education on how diet impacts a medical condition like diabetes or schizophrenia
- High risk wound or foot care
- Complex case management
- Education and counselling on medications
- Restorative dental care and oral hygiene
- COPD diagnosis and community management
- Mental health counselling
- Case management and support through our Thrive program for pregnant and parenting women with a history of opioid use
- Regional Telemedicine program facilitating remote access to specialists and groups

# Supporting Individuals & Families

## This past year our work included:

- 47,621 visits with 6,566 clients for all services
- Helping 543 clients avoid a visit to the emergency department for dental issues
- Supporting 975 people who had 3 or more complex co-morbidities in 2019-20 and 78% of them were supported by an interdisciplinary team
- Provided case management or system navigation support to 467 people
- Facilitating 3,186 Telemedicine clinical appointments, saving people in our community over 773,792 km in travel. This is equivalent to more than 19 trips around the world and over \$30,000 in travel costs.
- Helping 582 people quit smoking with a stop smoking rate of 29%!

This year the Clinical team has been doing more outreach home visiting where appropriate, primarily for palliative care. New primary care client intake, while ongoing, was challenged this year due to the slow-down associated with our new electronic medical record implementation.

The Community Health Team went through some significant staffing and programmatic changes over the year. The Food Security program supported by our Dietician ramped up to include some food preparation and support for community-driven meal programs. The Housing Worker, Community Health Worker and our Complex Case Coordinator came together to form the Extending Team Care (ETC) Team to better leverage their range of skills across the organization.

**In 2019/2020 we also launched a regional Lung Health Program in partnership with the Quinte Sub-Region and Lakeview, Prince Edward and Queen's Family Health Team and the Belleville Nurse Practitioner-Led Clinic.**

The Lung Health Program brings Respiratory Therapy into our interdisciplinary group and is focusing initially on improving diagnosis and community management of chronic obstructive pulmonary disease (COPD).

From a quality perspective, BQWCHC was able to maintain above average cancer screening, diabetes management, and influenza immunization rates. We proactively reached out to our clients who had been discharged from hospital for follow-up. We doubled our efforts to collect socio-economic data on our clients. This data is important for program and service

planning as well as quality improvement. For example, we were able to confirm that our cancer screening rates for all ethnocultural groups were generally comparable. This speaks in part to the quality of the relationships we build with the people we serve. Our client satisfaction rates remain high and program participants are reporting higher rates of a sense of belonging – a key indicator for health.

### **This past year, groups of this nature were:**

- Bouncing Back from Anxiety and Depression
- Bouncing Beyond
- Spotlight on Diabetes
- Best Weight
- Living Well With Chronic Disease/COPD/Chronic Pain
- Mindfulness Awareness Stabilization Training
- Transforming Trauma
- Managing Powerful Emotions
- People Skills
- Craving Change



### **Other groups have a primary goal of reducing social isolation and building mutual support while building skills and knowledge. Examples of these groups are:**

- Chronic Pain & Conditions Support Group Drop-In
- Seated Exercise
- Adult Colouring
- Indoor Walking
- Fun With Crafts / Quinte West Craft Group
- Cancer – Surviving and Thriving
- Breakfast of Champions
- Club 50+ Drop-In
- Cooking Basics
- Decoding Food Labels
- Quinte West Dinner Club Drop-In
- Learning to Live Again – Life Beyond Grief
- Life Skills Drop-In
- Food For Thought

### **Health Link**

The Quinte Health Link program was sunsetted in March 2020. Over the past five years this program has been successful in reducing emergency department visits and hospitalizations by over 40% of a select group of people with multiple health issues. This was achieved primarily through dedicated case coordination and greater system integration at the client level. Funding for this initiative was not renewed, however the focus on system integration was shifted to the development of Ontario Health Teams. Our thanks and congratulations to everyone who was engaged in Health Link over the past several years.

# Supporting Community

Sometimes a person or group of people might exhibit symptoms, but in fact, it's the community that has the disease. Loneliness and social isolation are not good for a person's health nor are they good for a community. Furthermore, there are policies and system barriers that make it harder for some groups to get access to health care or wellbeing.

**As a community health centre, we have a responsibility to identify these barriers, expose how they impact groups differently, and work to overcome them.**

## Rainbow Youth Outreach Project

The Rainbow Youth Outreach Project is designed to engage with lesbian/gay/bisexual/transgender (LGBT) youth, build their leadership skills and build community. LGBT youth are more likely to be homeless, have higher rates of substance use, bullying, depression, suicide, and are at greater risk of violence than the general population. These risks arise primarily from the stigma and marginalization associated with being LGBT. By building up leadership skills in our youth and supporting them to exercise those skills in whatever arenas are meaningful for them, we are supporting a sense of belonging and promoting social cohesion. The health benefits of this type of program are long-lasting.



## Gay Pride

BQWCHC again participated in the annual Belleville Pride Parade. Being present and being seen makes it easier for our clients to know that BQWCHC is a safe space and for others to understand that being open about sexual orientation is an important consideration in accessing health services.



## Good Food Box/Good Food Market

Poverty makes it challenging for people to get access to affordable healthy food. The Community Development Council operates the Good Food Box and Good Food Market as a way of bringing fresh affordable food to people who face economic barriers.



## Social Prescribing & Volunteer Program

Social Prescribing is a modern name for a long-standing part of what we already do. It involves primary care providers and others joining people with social programs and connections, and those people bringing their own skills to the table to help themselves and others. Often a health problem that someone brings to the Centre is made worse by a social factor (loneliness or isolation, poverty, lack of information or transportation, etc). By connecting people with social opportunities to give or receive support they are able to reduce these detrimental social factors. Groups such as the Quinte West Dinner Club, Cancer – Surviving and Thriving, and Breakfast of Champions are excellent examples of people creating social solutions for themselves and others.

Sometimes helping out at the Health Centre, either by welcoming clients, distributing the Good Food Box, or preparing a mail-out is a way for someone else to get involved and feel that sense of connection to their communities.



## Community Governance

BQWCHC is governed by an elected Board of Directors. The Board is accountable to our members, our clients, our community and our funders for our work. Beyond accountability, community governance is about making sure that the voice and experience of the people in our community influence the services we provide and the priorities we pursue. This year our Board spent time exploring and shaping how community governance should inform Ontario Health Teams, the impact of digital health solutions on client access to services, and the priorities for shared action.

## Ontario Health Teams (OHTs)

OHTs are the new structure for service integration promoted by the provincial Ministry of Health as part of a broader health system reform. BQWCHC has played a leading role in bringing local service providers together to explore what an Ontario Health Team could look like in Quinte West. A draft application was submitted to the Ministry for consideration and we await the outcome.

## Providing Support Amid the Pandemic

In March, COVID-19 forced us to severely restrict our normal operations. We temporarily closed our oral health program and generally limited our work to only urgent needs. Even then, we restricted the bulk of our activity to phone meetings, virtual appointments, only seeing those clients whose conditions dictated an urgent, in-person visit. During that time we continued to distribute harm reduction supplies and reached out to over 100 people with 'comfort calls' – just to check in on their wellbeing as the pandemic emerged.

A large majority of individuals are referred to or seek out supports in a group setting. Many of these groups have a primary goal of building individual skills, knowledge or understanding on a specific condition(s) in order to help people better manage their own health.





# Quinte West Capital Project

BQWCHC has been working since 2012 to secure a permanent building in the Quinte West area. Finally, in February 2020, the Ministry of Health and Long Term Care approved our project to move to construction! The building will be located at 69 Catherine Street in Trenton. BQWCHC will serve as the anchor tenant for a community health hub. This construction project will complete the building exterior and finish the interior of the CHC portion. Future funds will have to be secured to finish the interior portion of the building for other agencies joining the hub. The new building will finally allow BQWCHC to have a space that will appropriately accommodate our existing programs.

...And how do you have a ground-breaking ceremony during a pandemic? Virtually! Thank you to everyone who has worked so hard to get us to this exciting point. Now... onward! We are looking forward to occupancy of our new building in late summer 2021.



**Sheila Braidek**, Executive Director, **Mayor Jim Harrison**,  
**MPP Todd Smith**, and **Wendy Osborne**, Board Treasurer



# The Nuts and Bolts

## **BQWCHC has an infrastructure team that keeps all systems go!**

This group includes information technology, decision support, accounting, human resource management, and the management team overall.

This year the big project was implementing a new electronic health record (EMR). This project involved cleaning up and migrating all our data, re-working processes, training all the staff, troubleshooting, and keeping the operation afloat and able to serve clients with minimum disruption and downtime. The entire EMR Committee – and indeed the entire staff – helped make this happen under the sound leadership of the Management and IT teams. Thank you and congratulations!

While the EMR project was a big focus in the year, smaller projects including the roll-out of new hardware, redesigning our activity and accountability dashboards, migrating the bulk of our invoicing to electronic, reviewing our IT system security, updating our human resource policies, and others certainly kept folks busy and the organization ticking along.



## Marsha Stephen Community Health Leadership Award

Sandie Sidsworth was recognized with the Marsha Stephen Community Health Leadership Award in 2019 for her outstanding leadership in community mental health and addictions. Sandie is the Executive Director of the Enrichment Centre for Mental Health, formally CMHA – Hastings Prince Edward. In her work at the Enrichment Centre, Sandie embodies a profound understanding of mental illness as illness, mental health as a resource, and a respect for the dignity and rights of everyone. Sandie also served on the Board of Directors for BQWCHC for the past eight years, the last (almost) two as our President.

**The Marsha Stephen Award was established to recognize leaders in the Quinte area who understand that health starts where we live, learn, work and play: in our community.**

The award acknowledges their commitment to promoting health through collaboration and community capacity-building.

Sandie Sidsworth models those ideals every day. Congratulations, Sandie! And thank you.



**Sandy Sidsworth**, Executive Director of the Enrichment Centre for Mental Health

# Finance Committee Report 2019-2020

On behalf of the Finance Committee and the entire Board of the Belleville and Quinte West Community Health Centre, I am pleased to present the highlights from our financial statements for the twelve months ending March 31, 2020. Copies of the complete audit can be obtained from [info@bqwchc.com](mailto:info@bqwchc.com).

**Wendy Osborne,**  
Treasurer

## Statement of Revenue, Expenditure and Net Assets (As excerpted from the Audited Financial Statements)

	2019/20	2018/19
<b>CURRENT ASSETS</b>		
Cash	\$ 3,333,839	\$ 2,725,586
Short-term investments	-	655,795
Accounts receivable	110,714	157,417
Government rebate recoverable	182,085	332,696
Prepaid expenses	71,027	29,897
	<u>3,697,665</u>	<u>3,901,391</u>
<b>Tangible Capital Assets</b>	2,364,516	1,782,634
<b>Intangible Capital Assets</b>	7,394	9,242
	<u><b>\$ 6,069,575</b></u>	<u><b>\$ 5,693,267</b></u>
<b>LIABILITIES AND NET ASSETS</b>		
<b>Current Liabilities</b>		
Accounts payable and accrued liabilities	\$ 715,500	\$ 547,056
Government remittances payable	80,626	69,665
Deferred revenue	727,817	1,229,342
Subsidies repayable	2,173,722	2,055,328
	<u>3,697,665</u>	<u>3,901,391</u>
<b>Deferred Contributions</b> related to capital assets		
<b>Net Assets</b>	1,851,678	1,266,021
Invested in tangible and intangible capital assets - internally restricted	520,232	525,855
Unrestricted	-	-
	<u>520,232</u>	<u>525,855</u>
	<u><b>\$ 6,069,575</b></u>	<u><b>\$ 5,693,267</b></u>
	2019/20	2018/19
<b>Revenue</b>	\$ 8,168,517	\$ 7,757,051
<b>Expenditures</b>	7,015,040	6,779,046
Excess/(Deficiency) of Revenue over Expenditure, before under noted item	1,153,477	978,005
Less: Subsidies repayable	<b>(1,159,100)</b>	<b>(982,720)</b>
Less: Loss on disposal of Capital assets	-	<b>(7,786)</b>
	<u><b>(5,623)</b></u>	<u><b>(12,500)</b></u>
Contribution of Land	-	179,248
Net Assets, beginning of the year	525,855	359,108
<b>Net Assets, end of the year</b>	<u><b>\$ 520,232</b></u>	<u><b>\$ 525,855</b></u>

## Board of Directors 2019-2020

Sandie Sidsworth\*  
Brad Harrington  
Wendy Osborne

James Huff  
Lorrie Heffernan  
Kathy Baker

Kim Egan  
Dawne Brown  
Gerry Watts

Scott Robertson  
Deborah Hierlihy

## Our Staff 2019-2020

Adam Hambly  
Amy Parks  
Anastasia Bennett  
Anna Sherlock  
Bianca Sclipa-Barrett\*  
Bill Anderson\*  
Brittany Papke  
Bob Crutchfield  
Bob Mckay\*  
Carrie McGeown  
Chanse Holder  
Cheryl Swallow  
Christanne Lewis  
Christina Moore  
Cristin Fisher\*  
Claudia Musca\*  
Daina Greene  
Daniel Vernet\*  
Diana Hancock\*  
Deborah Scaletta  
Derk Damron  
Dolores Turner  
Elaine Radway  
Fran Schmidt  
Gretchen Grenke  
Heather McColman

Heather Sylvester-Giroux  
Helen Lakhan  
Holly Johnson  
Jacqueline Dillon  
Jane Clement\*  
Janine DeVries  
Jamie Kennedy\*  
Jason Scott  
Jennifer Allan  
Jess Stevenson  
Jessica Tweedy  
Joanne McLatchie  
Jose Gomide  
Julia Miles  
Karen White  
Kimberley Boyle  
Kira Abelsohn  
Kira Fox  
Krista Smith  
Krista Vandermeer  
Kristina Salomon  
Linda Ankiewicz  
Lois Stather  
Lorri Taylor  
Luba Shepertycky  
Meghan Rosborough

Meghan Thain\*  
Michael Li  
Natasha Kerr  
Natasha Theocharides  
Niki Dodd  
Pam Garrison  
Patty Wilson\*  
Robyn Watson  
Roger Snow  
Ruth McCallum\*  
Sarah Graham  
Sara Graves\*  
Sarah Powell  
Shannon Wall

Shawna McCulloch\*  
Sheila Braidek  
Sonya Fuerst  
Stacey Powell  
Stephanie Collins  
Stephanie Maggiolo\*  
Stephanie Nickerson  
Susan English  
Sydney Akey  
Tania Strong  
Terri Cadeau  
Valerie Robbins  
Veneda Murtha  
Vicki Forestell



\*Indicates people who left BQWCHC during the year



# Quinte West Groundbreaking Spring 2020

Physical distancing due to COVID 19, but still moving forward



Belleville and Quinte West  
Community  
Health Centre





**Alliance for  
Healthier Communities**  
Alliance pour des  
communautés en santé



**Ontario**

South East Local Health  
Integration Network  
Réseau local d'intégration  
des services de santé  
du Sud-Est



**Belleville and Quinte West  
Community  
Health Centre**