



# Message from the Board of Directors & Executive Director

Over the past year Central Toronto Community Health Centres' Board of Directors, staff and key stakeholders have been very busy in continuing our integration of the homeless and street involved youth services at our Queen West site. We are still learning about how to make Queen West a welcoming youth friendly environment and look forward to enhancing our services for this population. 2011 -2012 brought with it the successful completion of our accreditation process. We achieved the standing of Innovation and Excellence in leadership and planning, accessibility, assessment, community responsiveness and coordination of services.

In addition, we spent hours consulting with clients, community partners, staff and Board members mapping out our 2012-2015 Strategic Plan. We are excited to begin working towards implementing our goals of enhancing access and client centred care for our priority populations, continuing to develop a healthy organization and deepen our role with community partners. We invite you to take some time to review our new mission, vision and value statements.

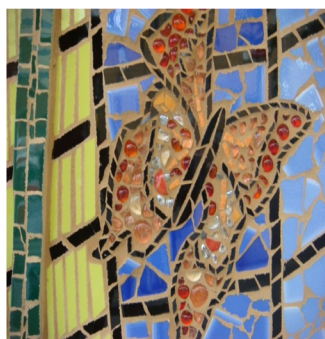
Last, but not least, this year was one of community involvement and evolution from our community garden to the transformative mosaic

installed at the front of the building. We want to thank the staff, clients, community partners and funders who continue to provide the support required to improve the health of the communities we serve.

Sincerely,

Dana Chmelnitsky,  
President of the Board of Directors

Michelle Joseph, Executive Director



## Board of Directors

- Sheila Block
- Dana Chmelnitsky
- Lisa Druchok
- Diana Elder
- Nimira Lalani
- Peter Leslie
- Karen Lior
- Cynthia Macdonald
- Nancy Ng
- Tess Sheldon
- Sharon Vanin
- Diana Walker

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## INTEGRATION & URBAN HEALTH UPDATE, by Kapri Rabin, Director

The Integration and Urban Health Team consists of Counselling, Health Promotion, Early Years, Homeless and Harm Reduction, Trip, Empower, Hepatitis C, Four Winds, Psychiatry, and Chiropody. In addition, we have partnerships with Fred Victor, Justice for Children and Youth, Youth Employment Toronto and SKETCH whose staff come to the centre on a weekly basis to provide a variety of supports to our clients.



### New Initiatives:

#### Mosaic Project

In keeping with our mission, we were interested in developing an art-based community engagement project that would assist in integrating Shout Clinic services with Queen West Community Health Centre and would re-vitalize the front of our building. We partnered with Red Dress Productions on the mosaic project to bring community members, staff and artists together to further

promote physical and mental well being, while strengthening community ties, values and pride. At 12 community sessions, more than 150 people contributed stories, ideas, concepts and images that led as inspiration to artist, Anna Camilleri, to produce the design. During 9 weeks of open studio sessions, the mosaic was built, piece by piece, by over 350 people contributing more than 2000 volunteer hours. Together, we created a public art work that reflects the past and present stories of community struggle, celebration and identity. The final mosaic project called "Centre" is permanently mounted outside on the front of the building.

#### Catch-ED

Over this past year we were provided with resources to hire a new mental health and addictions counsellor to enhance our capacity to provide flexible mental health and addictions services to frequent users of the emergency departments. This project is a collaboration with three other CHC's, several hospitals and case management programs. The goal is to provide primary care, counselling and community services with the intention that this level of integration will reduce the client's reliance on the emergency department.



#### 4 Winds Aboriginal Wellness

We were successful in obtaining Toronto Public Health's Peer Leadership Grant for the Prevention of Type 2 Diabetes. Through this grant peer leaders gain experience and build skills to support and influence those around them.

#### CBT Group

Two counselors developed and ran a successful CBT (Cognitive Behavioural Therapy) group called "No Feeling Is Final" this past year. CBT is an evidence based therapy model which is very effective in working for individuals with anxiety and depression. The group will be offered again in the fall. We are fortunate to have such a dedicated, engaged and hardworking group of staff who are commitment to ensuring that the programs and services continue to meet the needs of all our diverse clients and that the health and quality of life of our clients continues to improve.

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## PRIMARY CARE, by Shivaneer Nadarajah, Director

It has been a very productive year for the staff in Primary Care. Our nurses, physicians and administrative staff have been hard at work providing clinical services to youth and adults within our community. CTCHC recog-

nizes that many in our community face barriers to accessing clinical services. In order to ensure that new clients are able to access care when they need it, we have recently refined our centralized intake system. Now,

new clients are given a thorough one on one orientation and assessment with an intake worker. Clients are then seen by a clinician usually within a week.

We have also implemented PINC – People in Need Clinic for clients who are unable to keep appointments. PINC operates on Monday and Wednesday afternoons on a drop-in basis. New clients come in without an appointment and are assessed by the intake worker. They are then seen on the same day by a nurse to have their health care needs attended to immediately.

The Diabetes team has worked hard to provide various programming including partnerships with local physician clinics and other agencies, fitness programs and cooking demon-

strations.

CTCHC continues to partner with Imagine Clinic which is a student run volunteer clinic with the University of Toronto. The Imagine Clinic will begin its third year of operation at our site



on October 20<sup>th</sup>. The clinic runs every Saturday from 10:30am to 2:30pm and offers basic health care services to vulnerable clients in our community.

At this time last year, we had just integrated Shout clinical services to this site at Queen West. A year later, we find ourselves a larger and more collaborative team which is able to meet the needs of our clients. The Primary Care team has played an integral part in this successful transition. We would like to thank all the staff in the Primary Care department for all of their tireless work and dedication over the last year.

## FINANCIAL SUMMARY

### SUMMARY BALANCE SHEET AS AT MARCH 31, 2012

	2012	2011
<b>ASSETS</b>		
Current assets		
Cash	\$ 957,268	\$ 733,858
Accounts receivable and prepaid expenses	80,367	147,238
	1,037,635	881,096
Property and equipment	5,436,276	5,586,754
	<b>6,473,911</b>	<b>6,467,850</b>
<b>LIABILITIES</b>		
Current liabilities		
Accounts payable, accrued liabilities and unearned revenue	414,206	503,081
Accounts payable - Toronto Central LHIN and Ministry of Health and Long-Term Care	528,078	366,855
	942,284	869,936
Deferred capital contribution	5,328,445	5,496,949
	<b>6,270,729</b>	<b>6,366,885</b>
<b>NET ASSETS</b>		
Unfunded payroll obligations	(161,291)	(265,150)
Other activities - unrestricted	364,473	366,115
	203,182	100,965
	<b>6,473,911</b>	<b>6,467,850</b>

### SUMMARY STATEMENT OF OPERATIONS YEAR ENDED MARCH 31, 2012

Revenues		
Toronto Central LHIN financial support	5,933,452	6,176,119
Fees and other income	482,384	275,283
Other grants/projects	473,986	355,288
	6,889,822	6,806,690
Expenses		
Salaries, benefits and relief	4,849,685	5,102,083
Occupancy costs	306,143	352,918
General and operating	1,142,359	1,016,722
Non-recurring expenses	-	119,749
Other grants/projects	473,986	355,288
Depreciation expense	15,432	15,329
	6,787,605	6,962,089
Excess (deficiency) of revenues over expenses for the year	\$ 102,217	\$ (155,399)

# CENTRAL TORONTO

## Community Health Centres



### Mission

The Central Toronto Community Health Centres delivers holistic, integrated, needs based primary health services and supports to improve the well being and quality of life of individuals and communities who are at risk and/or face barriers in accessing high quality health care services and supports by engaging our partners and the community.



### Vision

A model of urban health care for people where and when they need it.



Service area for Queen West CHC

## FUNDERS

### Foundations & Associations:

- North Toronto Dental Hygienists Association
- The Sprott Foundation\*
- Winnipeg Foundation – The Moffat Family Fund\*

### Individuals:

Joseph Kaposi

*\*denotes foundations that have committed to multi-year support*

