ANTI-RACISM. INDIGENOUS SOVEREIGNTY. IDLE NO MORE.

ANTI-RACY

ANTI-RACY WELDOS COULTY. HUMAN RIGHTS.







VISION

INCLUSIVE COMMUNITIES.
RESPONSIVE HEALTHCARE.
HEALTHIER LIVES.

MISSION

PROVIDING EQUITABLE,
ACCESSIBLE URBAN
HEALTHCARE FOR PEOPLE
WHERE, WHEN AND HOW
THEY NEED IT.

VALUES

CLIENT-CENTRED.
COMMUNITY
RESPONSIVENESS.
SOCIAL JUSTICE.
EQUITY AND ACCESS.
CAPACITY BUILDING.



OUR WORK

A MESSAGE FROM THE PRESIDENT AND EXECUTIVE DIRECTOR

The work we do is framed by our desire to have meaningful and positive impact in the lives of clients and in our communities, as we strive to contribute in creating equitable and just communities and world we want to live and work in. With this goal in mind, it means we are compelled to take risks to interrupt inequality, to forge new paths in creating services that respond to community needs, and to be involved in speaking for changes to social policies that will bring about positive systemic changes for all in our communities.



Lisa Druchok President



Angela Robertson Executive Director

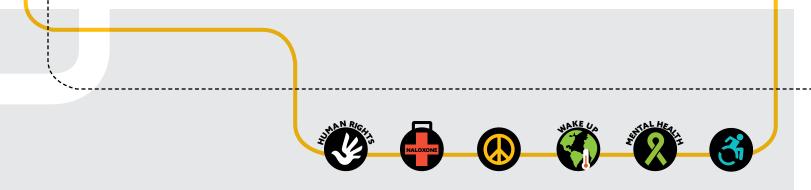
We do this work at a time when we are witnessing an alarming rise in overdose deaths from high levels of toxicity in illicit drugs with devastating loss of lives; and the disproportionate impacts of the COVID-19 pandemic on low-income communities, Indigenous Peoples, Black, and racialized groups. We acknowledge the racist blaming and targeting that Chinese and Asian clients have faced, which only underscores the disparities that already existed for these communities; and the undeniable prevalence of deadly violence that Black and Indigenous community members face at the hands of the police, particularly when called to support those in mental health distress.

Within this socio-political context, the work that we do at Parkdale Queen West in providing care to our communities is amplified as social change work that bends towards justice. Deep gratitude to the group of providers who are extending the continuum of harm reduction support by implementing a safer opioid supply program.

We continue to provide innovative health promotion and wellness supports to seniors and newcomers in our communities to break social isolation, to challenge elder abuse, and to protect their housing threatened by gentrification.

We continue to identify and respond to gaps in services and supports for those made invisible by labour market conditions and discrimination. This includes:

 Nail salon technicians working in discount salons, where they are exposed to occupational health and safety risks, and precarious employment conditions;



- Support to female identified sex workers in Parkdale by offering peer-support, harm reduction services and access to primary health care in a nonjudgemental weekly drop-in program – KAPOW (Knowledge and Power of Women) in partnership with Sistering, A Woman's Place;
- Providing a place for community connection and wellness through the Indigenous-led Niiwin Wendaanimak (Four Winds); and expanding programming for Indigenous clients in Parkdale, guided by an Indigenous-led Advisory Council and an organizational commitment to decolonization; and
- Early Years and Infant Feeding programs that support vulnerable families by providing material supports to address family and infant food security and postpartum depression, through partnership with The Stop Community Food Centre and the Sprott Foundation.

The community of clients we serve are challenged by systemic inequality. Hence, the Centre's staff bring to their work a deep commitment to providing care in ways that challenge the sites of client's inequality, ranging from appeals for income supports; advocacy with specialists to provide care for uninsured clients; care mobile to serve clients in the community at shelters, drop-in's, detention centres and at encampments; and building partnerships with violence against women shelters to respond to the spike in demand for counselling services as the Me Too movement enables more women to name their experience of patriarchal violence and to seek support.

A testament to the credibility of our work and commitment to dignified care to clients without housing is our work at the COVID-19 recovery sites. In call of the pandemic, the Centre was asked by The Toronto Region to extend its support and provide staffing and leadership of a community support provider team at recovery sites for homeless/ unsheltered clients, through a model of health and social care. In partnership with Inner City Health Associates, University Health Network, The Neighbourhood Group and the City's Shelter, Support & Housing Administration, we have supported over 900 clients. We thank our community partners from LAMP and South Riverdale CHCs, Sound Times, Toronto North Support Services, COTA, Casey House, and Breakaway for redeploying staff to provide care for this group of clients, particularly in the early days of the pandemic when there was much fear and uncertainty about the COVID-19 virus.

As the system around us plans for the implementation of Ontario Health Teams (OHT) that seeks to bring health care providers and organizations together to deliver a full and coordinated continuum of care to a defined geographic population, we are active in the Mid-West Toronto OHT implementation planning. In this OHT the priority populations are frail seniors, folks living with mental health and substance use issues, and people who are homeless. The work we are doing at the COVID recovery sites, in harm reduction and primary care for homeless clients and with low-income communities, means we will bring a wealth of expertise and client care resources to the Mid-West OHT.

Deep gratitude to the clients who trust us with their care, to the staff who daily provide care with dignity, to the partners, donors and funders who enable us to have the tools to deliver high quality care and services; and to the Board of Directors whose leadership anchors us continually in the vision and values that centres equity and social justice in all we do.



We were the only Community Health Centre (CHC) involved in this national project.

PRIMARY CARE

QUALITY IMPROVEMENT IN PRIMARY CARE

The clinical teams began working with the Department of Family and Community Medicine, University of Toronto on a Quality Improvement project to reduce unnecessary medications in clients age 65 and older. We were the only Community Health Centre (CHC) involved in this national project. The project focused on medications for "heartburn" (proton pump inhibitors or PPIs), sleep (benzodiazepines), diabetes (Glyburide), and some mental health medications (antipsychotics). All of these have increased-risk for clients over 65, particularly if clients are on multiple medications.

Project teams at each site used client information materials developed by Choosing Wisely Canada. Coincidentally, two Parkdale Queen West counsellors initiated a Cognitive Behavioural Therapy for Insomnia group, which augmented options for those clients wishing to reduce their benzodiazepine use.





BLUE DOOR CLINIC

The Blue Door Clinic is a walk-in clinic for people who do not have health insurance or immigration status in Canada, providing short-term medical care focusing on HIV treatment, community support and assistance, and links to ongoing services. It is a collaborative project between:

- Regent Park CHC (who hosts the clinic);
- Parkdale Queen West CHC (Dr. Ed Lee is in the provider rotation);
- Committee for Accessible AIDS Treatment;
- Black Coalition for AIDS Prevention:
- Casey House;
- · Centre for Spanish Speaking Peoples;
- Hassle Free Clinic;
- Ontario HIV Treatment Network;
- · Sherbourne Health Centre; and
- Toronto People With AIDS Foundation.

Services include:

- walk-in medical visits specializing in HIV treatment
- access to doctors, nurses and community resource workers
- blood tests and lab costs
- vaccines and immunizations
- connections to medication access programs
- support navigating community services in Toronto
- links to ongoing medical care and a family doctor
- referral to a variety of programs in Toronto (housing, legal, settlement, social supports, and other community services)

THE "OFFICIAL OPENING" OF THE BLUE DOOR CLINIC WAS SEPTEMBER 9, 2019.



I'm grateful for my healthcare provider, for their compassion, and patience, most of all for improving my life by witnessing the moments of truth of what I went through and its current daily impacts.

– Primary Health client



SAFER OPIOID SUPPLY: PROVIDING RESPONSIVE AND EQUITABLE **HEALTHCARE TO PEOPLE IN OUR COMMUNITY**

Safer Opioid Supply is a harm reduction approach to addressing the toxic drug supply, with the goal of replacing contaminated street drugs with prescription alternatives of known quantity and potency. In the spring of 2019, Parkdale Queen West began offering this intervention to clients who were at imminent risk of death, both from contamination of the street supply, but also at risk of death from the ways they were obtaining drugs, and for the ways they are criminalized under the war on drugs.

We made the decision early on that our focus is harm reduction, and that the intervention would be rooted in the voices of people who use drugs and developed with their guidance.

Clients in the program are seen 2-3 times a week for the first two weeks, then once weekly by their medical doctor or nurse practitioner. They have frequent check-ins with the Safe Consumption Service, the primary care team, the harm reduction team, and the community pharmacies.

By the end of the fiscal year, we had about **35 people in the program.**

SOME **OUTCOMES** TO DATE **INCLUDE:**

Significantly fewer overdoses since starting on the program

before program start

since program start



98%_{to}25% (oral use only) and (oral and IV mixed)

decrease in illicit IV drug use



Decreased anxiety, withdrawal symptoms, rates of cellulitis/abscesses in those only using prescribed opioids

Housing and employment gains





Reconnections with community, families, social networks

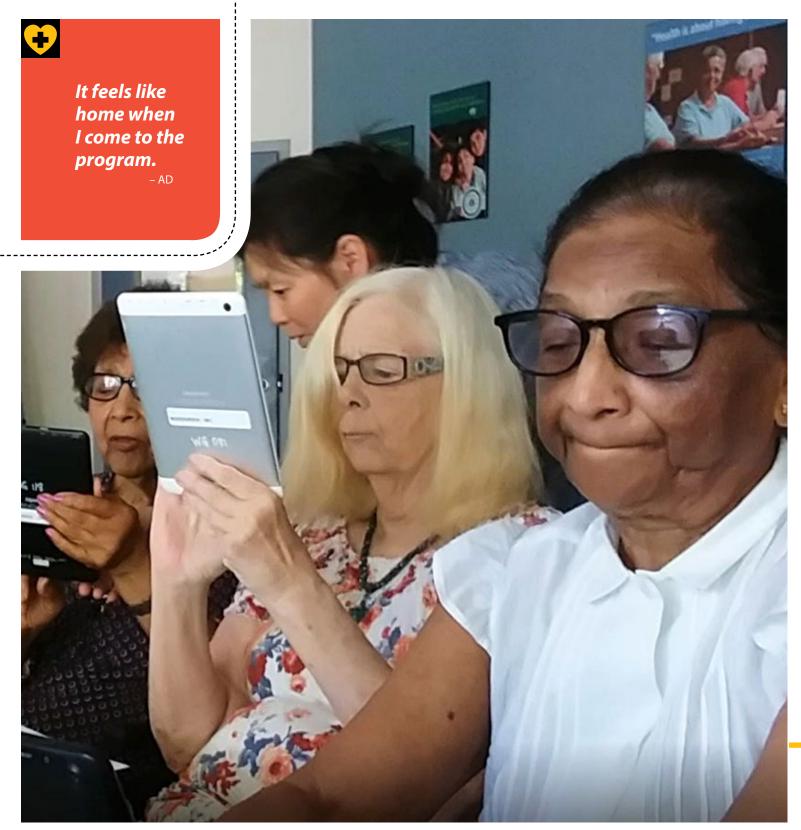
In June 2020 we received federal funding for the 2020/21 fiscal year to grow this program.



HEALTH PROMOTION AND COMMUNITY ENGAGEMENT

The Health Promotion and Community Engagement team works to address the needs of our community through a range of programs and activities geared towards promoting healthy lifestyles, building personal skills, and fostering social inclusion for individuals and families, newcomers and senior populations. In this, we work collaboratively with our many community partners to address broader systemic and structural issues that impact the social determinants of health.







PROVIDING SUPPORT TO SENIORS WHERE AND HOW THEY NEED IT

Our seniors programming promotes social inclusion through a range of programs that offer opportunities for seniors to stay physically active and socially engaged in their communities. Ongoing programs include Seniors Wellness Drop-In, Salad Making, Chronic Pain Self-Management, and Senior's Month Celebration, to name a few. In addition, the Seniors in Action Advisory Committee informs program activities and is actively involved in advocacy towards improving social and health care services for seniors of their Parkdale Queen West community.

This past year we offered new and innovative programs:

- Healthy Hearts Program run in the winter, bringing weekly health information and support directly to the homes of a local seniors' residence in Parkdale.
- O Low Impact Aerobic Fitness offered weekly fitness classes for the full year, and Nordic Pole Walking run weekly outdoor sessions during the fall for women-identified older adults 50+. Both programs were sponsored by Shopper Drug Mart's Shoppers Loves Your Grant Program.
- O Seniors Interactive Tablet Project engaged seniors in the use of tablet technology. Participants learned the basics of Internet surfing and how to stay virtually connected, all while having fun texting each other. Upon completion of the project, seniors were very proud of their accomplishments. Thanks to the support of WoodGreen Community Services we were able to offer each participant their own tablet for the duration of the project.





PLACING CULTURE AND TRADITION AT THE CORE **OF INDIGENOUS HEALTH**



THE NIIWIN WENDAANIMAK (FOUR WINDS) PROGRAM

This past year the Niiwin Wendaanimak program has worked with a Traditional Healer to incorporate traditional healing practices into our programming.

For Traditional Healer Harry Snowboy, acting as *Shkaabewis* (Traditional Helper, in Anishinaabemowin) has been a massive, beautiful responsibility. The therapeutic nature of reconnecting Indigenous communities to traditional healing forms, spaces denied for decades, has been emotional to say the least. We have seen clients well into their 60s finally learn their Spirit Name and Clan, spiritual responsibilities they will carry until their last days.

Witnessing first-hand the effects of cultural reconnection for our street-based community within the Niiwin Wendaanimak program has been eye-opening. Many in the community remain opposed to Harm Reduction, largely perceived as enabling. Many in our community have gone years, if not lifetimes, being denied the right to access traditional healing spaces due to their struggles with the impacts of colonization. Indigeneity and trauma sometimes can seem like a double-edged sword. Many of our street-based community members struggle with the impacts of colonization, whether this manifests through post-traumatic stress disorder, mental health, and/or substance use challenges. Intergenerational trauma coupled with the lack of culturally responsive care within and outside institutions forms immeasurable barriers for the Indigenous community working towards wellness.

The empowerment inherent to learning who they really are, and the practice of Harm Reduction as unconditional love has brought joy and tears for our members. They are welcomed and worthy of healing no matter where they are at in life, and their right to traditional healing will always be reaffirmed within this space.

"We are, and remain to be, everything that could not be silenced or suppressed. Everything they could not contain. It is a privilege to do the work, to give our community this opportunity to reconnect and heal".

-Indigenous Health Promoter

The Four Winds program continues to offer twice-weekly socially distanced drum circles on Mondays and Fridays, grocery cards to group members, and support in the form of traditional medicines during the pandemic.





NAIL SALON WORKERS: THE WORK CONTINUES TO GROW

The Nail Salon Workers Project initiated in 2013 out of health concerns for technicians working in the industry as they are exposed to toxic chemicals in their workplaces. This project is now supporting the growth of the Nail Technicians Network (NTN) in their efforts to encourage safer working conditions for workers in nail salons across Toronto. The NTN is a technician-led initiative established in 2017 that builds a collective voice for workers to share their life and work experiences, and to advocate for systemic changes in the discount nail salon sector.

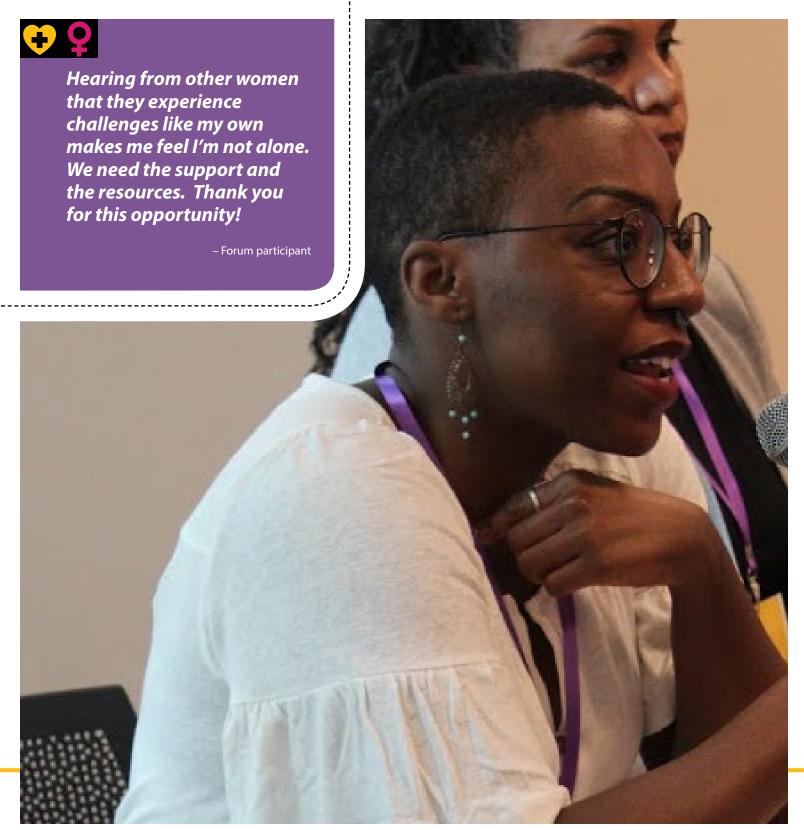
With the support of the Atkinson Foundation's Decent Work Fund and MakeWay (Tides) Canada's Dragonfly Fund, the NTN's work over the past year focused on: expanding the network, identifying priorities for continued work, and providing training opportunities in the areas of labour rights, health, and job skills.

The peer outreach/educator team worked creatively and persistently to strengthen connections with nail technicians across the GTA, and hosted 30 workshops and special events in multiple

languages. We were happy to see more familiar faces at each event, and even have people from within the network stepping into leadership roles for workshops.

Interest in training and social opportunities continues to thrive. We are very excited about continued participation in the project, even as we shift from an emphasis on health-related training towards labour rights issues and the Employment Standards Act. The work is informed by the needs of nail technicians and it has taken time to build the trust for participants to share their honest questions and fears. We are beginning to see a shift in the type of questions people are willing to ask, and an increase in people identifying what changes are needed. We are also learning what works best for people to engage in their own advocacy.

Partnerships are essential to the success of the Nail Salon Workers Project and we are fortunate to partner with the Workers' Action Centre, the Chinese and Southeast Asian Legal Clinic, and The Lighthouse to support the NTN's work.



PQW ANNUAL REPORT 2019-2020





BEYOND CAREER AND TRAINING OPTIONS

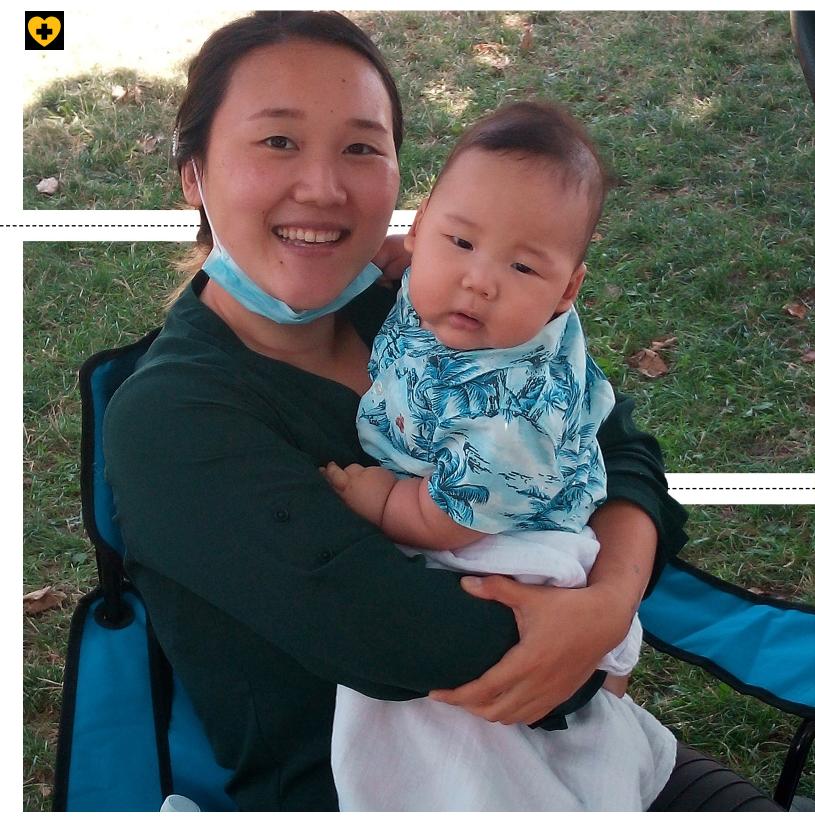
EXPLORING YOUR OPTIONS - WOMEN'S FORUM

On October 5, 2019, we successfully hosted our third forum 'Exploring Your Options' at Toronto's Metro Hall. Spearheaded by the Women's Advisory Group of Parkdale Queen West CHC and with the support of partner organizations, the forum is a long-day event which brings together notable speakers, panel discussions, interactive workshops, resume-building booth and information fair.

Over the years Exploring Your Options has become a tool for women, not only to learn about career and training programs that are available, but also an opportunity to connect with other women with similar interests and who may experience similar challenges. Peer-learning is ingrained in the activities of the Advisory Group whose original vision of the forum was to create a space for women to explore career and training opportunities in a safe and trauma-informed setting that facilitates information sharing and learning from one another

Through evaluation of each event, we learn about the challenges women often experience when seeking career and training opportunities. This feedback informs the topics for future forums. This year's theme centred on mental health and work-life balance, a concern for many women as they struggle with their efforts to pursue meaningful careers while juggling work, family, and personal life. To respond to this need, we invited guests from organizations that offer a range of supports in the GTA, and that could speak to women's concerns while offering information about available resources and supports. In addition, we offered two workshops titled "How to keep it together mindfully when things don't go as we like", and "How to pursue your career goals while balancing family life".

We thank the Women's Advisory Group for their vision and leadership in their effort to address the needs of women in our community. We also thank our community partner organizations for their support and willingness to take part in this venture: The Canadian Mental Health Association; Casa Foundation/ INVCAP; The Centre for Mindfulness Studies; George Brown College; Innovations, Science and Economic Development Canada; JobStart; Skills for Change; Times Change Women's Employment Service; WE-Hub, The Women's Entrepreneurship Hub; Scadding Court Community Centre; and Up With Women.



PQW ANNUAL REPORT 2019-2020



PARKDALE INFANT NUTRITION SECURITY TARGETED EVALUATION PROJECT (PINSTEP) MAKING SIGNIFICANT HEADWAY

PINSTEP is a 4-year research project agreement between Parkdale Queen West CHC and the University of Toronto's Department of Nutritional Sciences. The goal of this partnership is to develop methods and models to evaluate and implement community breastfeeding and infant feeding support programs in vulnerable communities.

In 2019/20 the project saw some exciting developments:

- Phase-One of the research project, which focuses on the Parkdale Parents Primary Prevention Project's (5Ps) Feeding Tiny Souls Infant Feeding Program, completed three separate studies and published two academic manuscripts, to date. These studies include a chart review of the factors that may predict participation in the prenatal programs, a series of focus groups and interviews with participants in our postnatal programs, and a study of participants' experiences in the Feeding Tiny Souls Infant Feeding Program.
- Phase-Two of the research project, which focuses on Parkdale Queen West's Great Start Together (GST) perinatal program and the Healthy Beginnings perinatal program at The Stop, is completing a study looking at how providing breast pumps and professional lactation consultant support to participants in their program impacts the way they feed their baby.

The research is supported by two Ph.D. candidates from the University of Toronto.



What is unique about the PINSTEP partnership?

There is minimal research in Canada on infant food security and this project contributes to that body of work significantly. Through focusing on perinatal programs which are funded by the national Canada Prenatal Nutrition Project (CPNP), the PINSTEP partnership can explore the feasibility of implementing community infant feeding supports in other parts of Canada, therefore potentially supporting many vulnerable families.



The cooking sessions were fun and interactive, but the Safe Food Handling was really interesting to learn.

- Guys Can Cook participant

SKILLS-BUILDING FOR NEWCOMER WOMEN AND YOUTH

We continue to support newcomer families through programs that offer opportunities for social networking, build on existing skills, and enhance opportunities for employment.

Child Minding Training provides newcomer women with the opportunity to develop the essential skills and knowledge in early childhood development and community-based childcare to be able to pursue employment in the childcare sector. This year, 12 women obtained their Safe Food Handling and CPR certification.

Guys Can Cook Program provides young male identified teenagers with youth-friendly environment in which to work with their peers, learn about nutrition and healthy eating, and cook with a professional Chef. In each cohort, up to 12 participants gain their Safe Food Handling certification. This increases their employability within the restaurant and hospitality sector.

Teens Get Cooking gathered 14 young participants for five weeks to enhance their cooking skills, learn to make healthy food choices, and build on social connections.





Since the onset of the pandemic, the health promotion team continued to support clients through the various programs offered regularly. This includes:

- making ongoing 'wellness calls' to clients to offer emotional support and information about COVID-19 and available resources;
- providing a virtual platform for clients to come together, find supports and discuss issues of concern; navigating eligibility for government supports and making connections to community resources as needed;
- making sure that clients had access to a range of material supports such as gift cards for groceries, and TTC fares.

Through our perinatal programs, the Parkdale Parents Primary Prevention Project's (5Ps) and Great Start Together (GST), we provided continued services to families without interruption, including:

- delivery of groceries, infant supplies and breast pumps to families who were unable to leave their homes, and telephone support to over 160 families; (5P's)
- creation of new prenatal lactation supports in the Infant Feeding Program; and advocacy for increased access to labour and delivery services at local hospitals; (5Ps)
- assistance with applications for the Canada Child Benefits, the Canada Emergency Response Benefits, Employment Insurance, birth certificates, Social Insurance Number, and follow-up on OHIP cards as needed; (GST)
- individual phone sessions on Making Baby Food; and virtual workshops in Mandarin on baby and selfcare, pre-and post-natal topics and COVID19 related benefits. (GST)



MENTAL HEALTH SERVICES

Parkdale Queen West Counsellors and Case Managers are well-positioned this year to offer integrated mental health services for our clients and our extended community with an enhanced and consistent Counselling Intake process across all sites. We now have a system for clients to get access to counselling services utilizing common protocols. This is part of our quality improvement process to better serve our clients by expediting appointments and reducing the wait-time for clients seeking the service.

Throughout the year, the Mental Health Services Team continued to offer a range of support services, including one-on-one short-term counselling and psycho-educational groups such as Anger Management, Postpartum Mood Disorder and Mindfulness-based Cognitive Therapy.

> Counselling helped me through challenges and difficult times, always shining a light on my strengths. My counsellor introduced me to wonderful and powerful tools, books, and ideas. Often, in moments of self-doubt and sadness I hear my counsellor's voice offering solutions and ways forward.

> > - Mental Health Services client

BUILDING BRIDGES WITH 'DUNGEONS AND DRAGONS' WHILE REDUCING SOCIAL **ISOLATION**

A pilot Project





From November to December 2019, Case Manager Michael John led a pilot project with a small group of clients to build community supports with a game of Dungeons and Dragons. The project run at a time of year where people often become socially isolated, and are dealing with the pressures and the anxiety of the approaching holiday season and all the expectations that come with it.

Dungeons and Dragons is a structured, yet open-ended fantasy role-playing game where a storyteller, the Dungeon Master, guides a communal story with other players who create characters that play and interact in the story world. The game allows the group to come together, work to solve problems realistically, in a sometimes grounded and sometimes less so, setting.

Having played Dungeons and Dragons for a long time, and understanding the social dynamics enmeshed in the core of the game, Michael knew this could be a powerful tool for people with different interests and backgrounds to find common ground and make new friends. Indeed, this was the case. The game provided an opportunity for group participants to find shared interests, and for those who desire to be more social all around, the chance to see that they can indeed be the party of the crowd.

In addition, being able to play confident, capable heroes enabled participants to think outside the box and play a role they might otherwise be entirely uncomfortable within the real world. For Michael, the challenge of stepping into the role of omnipotent story-teller (the dungeon master) with a group of people whose opinions might not match up was both challenging and inspirational.





One of the major changes necessitated by the COVID-19 pandemic as of mid-March 2020 was a swift transition to virtual support as the major service delivery means. Almost overnight, counsellors and case managers were providing support to clients virtually for their safety and for the safety of our clients, particularly those who were most vulnerable. In addition, the team worked diligently to reach out to current and previous clients to make sure they had the necessary supports.

Throughout it all, we were guided by our shared values. These same values will continue to guide us through the recovery phase of the pandemic, as we come to grips with its potential long-term impacts on people's mental health, particularly on those who are already struggling with anxieties and social isolation.

The group run concurrently at the Parkdale and Queen West locations with Michael at the Parkdale site and Board Member John LeFave taking the role of Dungeon Master at the Queen West site. The project showed great promise, and there are plans to run the group again in the upcoming months.



URBAN HEALTH SERVICES – HARM REDUCTION AND HOMELESSNESS

For people, where, when, and how they need it.

This year afforded new changes to the urban health services team. We created new Harm Reduction Room Worker roles for both the Queen West and Parkdale sites, and a Peer Mentor/Kit Maker role for the Parkdale site. These positions were made possible through the consolidation of many temporary peer positions attached to the harm reduction rooms which were re-designed as full-time permanent positions for people with lived experience to better meet program needs. This change increases our ability to expand our hours of operation for both harm reduction rooms, thus providing consistent service and support. We are very fortunate to have such an incredible group of staff fill these roles and deliver such a high standard of service.

Thank you for everyone working in the site for watching over me all these years. I can't describe how grateful I am.

- Harm Reduction client





HARM REDUCTION OUTREACH AND SATELLITE PROGRAMS

The Harm Reduction Outreach Program offers on-foot and bicycle outreach services across the Queen West neighbourhood providing access to critical resources for people who use substances. Our harm reduction outreach teams do it all, from dropping off bottled water and snacks to communities living in tents, to providing education and best practice methods for safer supply. Outreach has been essential in managing challenges related to resource restrictions and substance use while practicing physical distancing to responding to overdose from the toxic drug and maintaining the dignity of our community.

The Harm Reduction Satellite Team runs hubs or 'satellite sites' from the homes of people who use drugs and community members in high needs residential buildings, providing safer drug use supplies, naloxone and overdose response training, and safety planning to residents where they live. This way they reach people who are unable to get access to services at the Centre or who do not feel comfortable using the service. The satellite team includes nine people operating home sites, and three people conducting similar work from shelters where they live. Satellite workers also train shelter staff on harm reduction best practices and conduct outreach to high needs residential buildings. They have connected well over 100 people to health care and other services at Parkdale Queen West.

You guys are amazing! If it wasn't for you, I don't think I would be even here.

- Harm Reduction client





PQW ANNUAL REPORT 2019-2020

SHIFTING PRIORITIES IN TIMES OF CRISIS

The COVID-19 pandemic brought to the forefront the social and structural inequalities that marginalized communities experience daily; namely, poverty and unemployment, lack of quality healthcare and housing, and social support and education. People who are homeless or street-involved, in particular, are most likely to be affected in times of crisis, and most unlikely to be prioritized in responses to address it. The differential impacts of COVID-19 added another layer of challenge and complexity to their already vulnerable health and wellbeing.

This year's report would not be complete without acknowledging the critical role played by our harm reduction teams in supporting our community since COVID-19 was declared a global pandemic in mid-March 2020. Since and throughout it all, our harm reduction teams have worked tirelessly making sure people have continued access to critical supports, and providing education about COVID-19 safety and prevention measures in shelters and encampments. We are grateful for their advocacy work and their commitment to supporting clients and our community during these difficult times.

COVID-19 RECOVERY SITES FOR PEOPLE EXPERIENCING HOMELESSNESS

As part of an integrated response to address the social impacts of COVID-19 on the homeless population, Parkdale Queen West, in partnership with Inner City Health Associates, University Health Network, The Neighbourhood Group, and the Shelter Support and Housing Administration-City of Toronto, worked collaboratively to set up a recovery site program which offered a dignified place of respite for people who are homeless and who are COVID-19 positive.

A community call out to partner organizations skilled in harm reduction support was issued to rally experienced staff capable of being redeployed to the COVID-19 recovery sites. A thank you to our partners at Breakaway, Casey House, COTA, LAMP CHC, Sound Times, South Riverdale CHC, and Toronto North Support Services for their overwhelming response. Something to note especially in a time of crisis is that it takes a special kind of person to walk into the complete unknown in the middle of a global pandemic. Our community partners have been extraordinary in support by coming together and building a new program from the ground up that included case management, harm reduction support, advocacy, deescalation, therapeutic rapport, and Overdose Prevention Services. Together we created a model of health and social care, multiple avenues for clients to express their needs and high-quality social interactions that have been critical to keeping people safely in place. To date, we have supported over 900 clients, each staying on average 14 days for over 10,000 days of care.

Some notable successes we implemented included an ultra-low barrier managed alcohol program, the initiation of safer supply and stimulation substitution. Despite the challenges and barriers that naturally emerge within the context of this multidisciplinary rapidly assembled project, the experience provided many good lessons learned and capacity to explore a variety of new service models that best address clients' needs. The recovery sites project yielded many new connections and prospective partnerships for post-COVID endeavours.

SERVICE IMPACT

OVERALL SERVICE UTILIZATION

ACTIVE CLIENTS

New primary care clients 1,406

New primary care clients - priority 1,134 population*

Individual face-to-face 29,069 primary care

Anonymous HIV testing

DENTAL - PARKDALE

Dental services are provided through partnership with Toronto Public Health (TPH) & George Brown College – West End Oral Health Clinic (WFOHC)

702	Unique clients served / TPH
1,950	Total visits / TPH
132	Seen by dentist / George Brown
174	Visits for dental hygiene / George Brown
133	New dental clients seen by WEOHC



DENTAL - QUEEN WEST

574

Unique clients served

1,053

Individual client encounters

ILLNESS PREVENTION/ **CHRONIC DISEASE** MANAGEMENT RATES

Cervical cancer screening **Provincial CHCs=68%**

Colorectal cancer screening

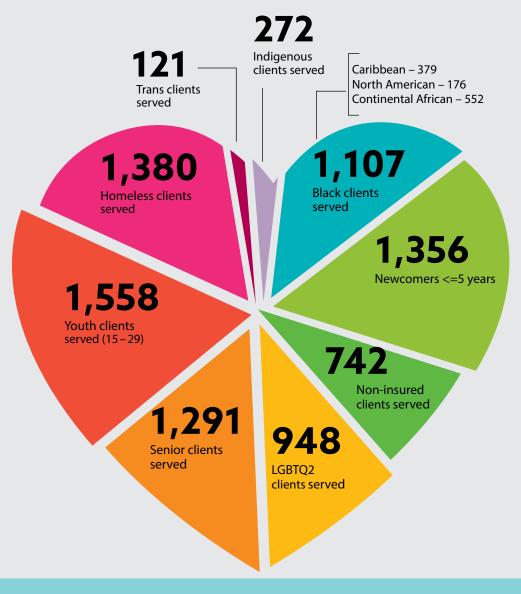
Breast cancer screening

Provincial CHCs=61%

Provincial CHCs=67%

^{*} priority population (homeless, youth 15-29, newcomer >5 years, mental health & substance use, income >\$25,000)

HEALTH EQUITY DEMOGRAPHICS



51%
Influenza vaccination
Sector average= 55%



87%
Interprofessional care for diabetes
Sector average= 78%

COUNSELLING SERVICES



248

Group sessions

3,563

Group participant attendances

9,587

Service provider interactions

OFFSITE & HOME VISITS



1,149

PRIMARY CARE

137

Counselling

30

Diabetes Care

CLIENT SURVEY WHAT OUR CLIENTS HAVE TO SAY

Parkdale Queen West strives to provide the best possible care and services for our clients. As part of our continuous care service improvement efforts we conduct an annual Client Satisfaction Survey to help us understand what we are doing well and what we could improve. This year, this is what they told us:



WELLBEING & COMMUNITY

90%

say the Centre has a positive impact on the community

83%

say they feel a strong sense of belonging to their community



SERVICE SATISFACTION

96%

rate the care and services they received as Good/ Very Good/ Excellent

agree they are able to ask questions about recommended treatment

84% agree they are involved in decisions about their care and treatment

97% say they are treated with dignity and respect

98% agree things are explained in a way that is easy to understand



ACCESS TO SERVICES

96%

say they feel comfortable and welcomed

84%

say they are able to book an appointment with healthcare provider on desired day

93%

say hours and days of operation work well

98%

say they can get servcies in the language of their choice



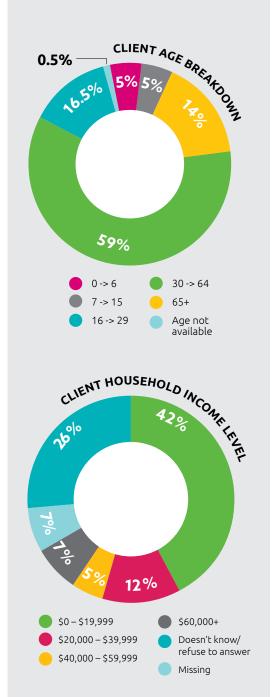
WHAT WE ARE DOING WELL

- Courtesy follow-up calls
- Friendly front-line workers
- Healthy diet information and healthy food provided
- Hormone replacement therapy from trained providers
- Indigenous programming
- Pleasant, approachable, welcoming, respectful and professional environment
- Referrals to specialists when needed
- Use of preferred name and pronouns
- Use of holistic approach

WHAT WE CAN DO BETTER

- Have Dental Clinic for all
- Include alternative medicine options, e.g. Chinese medicine
- Increase the number of weekly programs and available spots in the parenting program (5Ps)
- Increase privacy at client check-in
- Make Tele-health and video counselling available
- More weekend appointments and programs
- Longer SIS hours and more healthcare providers involved
- Reduce restrictions on number of counselling sessions
- Reduce wait-time on the phone

CLIENT PROFILE

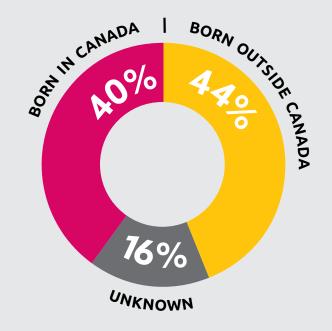


CLIENT PROFILE

TOP 10 LANGUAGE INTERPRETATION SERVICE PROVIDED

1,012	Hungarian
453	Portuguese
266	Spanish
119	Mandarin
57	Tibetan
36	Arabic
28	Cantonese
20	Polish
20	Tigrinya
19	Farsi

TOTAL OF INTERPRETATION 2,087 SERVICES



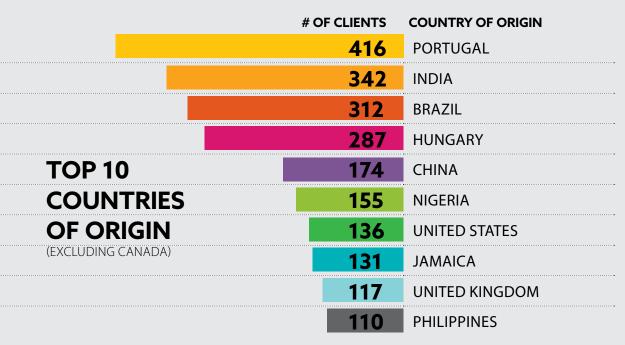
LENGTH OF TIME IN CANADA FOR CLIENTS BORN OUTSIDE OF CANADA

33% < 5 YEARS

9% 6 - 10 YEARS

43% > 10 YEARS



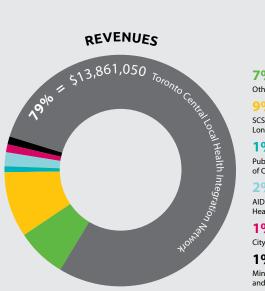


FINANCIAL SUMMARY

SUMMARY STATEMENT OF FINANCIAL POSITION for year ended March 31, 2020 ASSETS	2020	2019
Current assets		
Cash and short-term deposit	\$ \$2,394,701	\$ \$1,475,392
Accounts receivable and prepaid expenses	1,258,384	\$1,120,601
	3,653,085	2,595,993
Property and equipment	6,855,253	\$6,962,528
	10,508,338	9,558,521
LIABILITIES		
Current liabilities		
Accounts payable – accrued liabilities and deferred revenue	2,291,930	\$1,833,091
Accounts payable – Toronto Central LHIN and MOHLTC	775,047	\$188,624
	3,066,977	2,021,715
Deferred capital contribution	6,904,958	\$7,007,219
	9,971,935	9,028,934
NET ASSETS		
Unfunded payroll obligations	(263,644)	\$(231,437)
Other activities – unrestricted	800,047	\$761,024
	536,403	529,587
	10,508,338	9,558,521
SUMMARY STATEMENT OF OPERATIONS for year ended March 31, 2020		
REVENUES		
Toronto Central Local Integration Network (TCLHIN)	\$ \$13,861,050	\$ \$13,063,782
Ministry of Health and Long Term Care – AIDS Bureau	301,731	\$298,125
Ministry of Health and Long Term Care – SCS	1,574,968	\$770,175
City of Toronto	270,262	\$195,451
Public Health Agency of Canada (PHAC)	263,850	\$263,650
Ministry of Community and Social Services (MCSS)	180,706	\$178,340
Other grants, fees and other income	1,166,958	\$1,366,967
Total revenues	17,619,525	16,136,490
EVDENICEC		
EXPENSES		
Colorina and have 6th	44070 500	612.077.022
Salaries and benefits	14,078,583	\$12,977,039
Occupancy costs	934,547	\$902,199
Occupancy costs General and operating	934,547 2,579,475	\$902,199 \$2,238,944
Occupancy costs General and operating Depreciation expense	934,547 2,579,475 20,104	\$902,199 \$2,238,944 \$17,023
Occupancy costs General and operating	934,547 2,579,475	\$902,199 \$2,238,944

This is a summary of the Audited Financial Statements by Hilborn, LLP. Complete audited financial statements available upon request from the office of the Executive Director.

CORPORATE INFORMATION



7% = \$1,166,958Other grants

9% = \$1,574,968SCS - Ministry of Health and Long Term Care

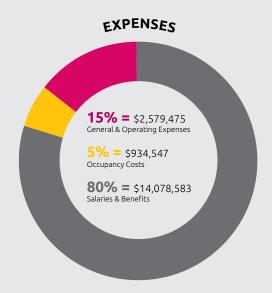
1% = \$263.650Public Health Agency

of Canada 2% = \$301,731

AIDS Bureau - Ministry of Health and Long-Term Care 1% = \$270.262

City of Toronto **1% =** \$180,706

Ministry of Children, Community and Social Services



BOARD OF DIRECTORS 2019-2020

Lisa Druchok, President Marc André Hermanstyne, Vice President Lois Fine, Treasurer Bernard King, Secretary Dean Bere, Director John LeFave, Director Kelly Dobbin, Director Nicole Mihajlovic, Director Shelina Ali, Director Shahilaa Devaraja, Director Karen Lior*, Director

*No longer with PQWCHC

Yervant Terzian*, Director

FUNDERS

Parkdale Queen West CHC wishes to thank all donors for so generously supporting our work over the past year.



Toronto Central Local Health Integration Network



Ministry of HEALTH AND LONG TERM CARE

Ministry of CHILDREN, COMMUNITY AND SOCIAL SERVICES

















DR. MALKIT JOHAL

After 43 years of service to our communities Dr. Malkit Johal retired early in 2019. Malkit became certified to practice medicine in 1976. Eight weeks after giving birth to her son, she began working at the former Alexandra Park Health Centre. The clinic was near a large Toronto Community Housing project and Malkit was drawn to the families who struggled with income security.

Throughout her years at Parkdale Queen West, Malkit supported over three generations of families in this community, at the same time as conducting outreach at women's shelters, supervising medical students, and responding to the Syrian Refugee community needs. By a glance at her daily schedule, one could see Malkit connected with people wherever she went; she was a listener and her clients always felt heard and supported.

Malkit's 'roll up your sleeve' attitude and get down to work nature was evident in her day-to-day work. She was an exemplary team member of the primary care team, always working closely with her colleagues. Malkit was approachable and collaborative in offering her astute advice about a client's care. Her advice was never forced upon anyone but offered as a gift, with profound insight and gentleness. Her strong relationships with staff and clients are a testament to this.

We wish to offer our deepest respect and admiration to Malkit for her many years of service to build the Centre, and for her compassionate care to our clients.

26 YEARS OF SERVICE TO OUR COMMUNITIES

This year, with both sadness and joy, we saw the retiring of two long-standing staff; both of whom have been through the various organizations that have, over the years, changed and merged to become Parkdale Queen West. Each, in their own roles, brought unique skill-sets to the organization. Their 26+ years of service and commitment to providing quality care to the individuals and communities we serve have been invaluable.

We thank them for their commitment to the organization and dedication to clients over the past 26 years and we wish them the best in their new chapter.

DEBBIE HONICKMAN, PHYSICIAN

Debbie's career in the Community Health Centre sector dates back to 1984, beginning with Parkdale CHC when the Centre first opened at a church on Queen Street West, and later at Anishnawbe Health Toronto before she began working as a locum at the Niagara Neighbourhood Clinic in April of 1994. Debbie saw the many mergers and

partnerships Parkdale Queen West has been through, and as such, she carried a tremendous historical perspective on the organization.

Over the years Debbie had many clients with complex needs, many of whom have been with the Centre for several years. As well, Debbie supported the right for patients to die with dignity in their homes

Debbie was well recognized by her clients for her skillful and compassionate care, and the ability to connect with clients emotionally. Her forte for psychotherapy and her ability to apply it in a primary healthcare setting provided a holistic medical practice that was unique and that worked well for many clients. A testament to her unique approach to healthcare is the clients' own words to describe Debbie, as "patient, considerate, personable, empathetic, great humour".

As a team member, Debbie took the time to appreciate the people she worked with. She was approachable, always willing to offer an open ear; offering her much-valued insight and experience to the organization. We will certainly miss her input and perspective.

JANICE MEILACH, COUNSELLOR/PSYCHOTHERAPIST

Janice began working as a Counsellor at the West Central Community Health Centre in October 1994. It can be said that Janice worked in three Centres and that she thrived through three mergers.

Yet Janice's professional career in the community health sector began earlier. Originally trained as an occupational therapist, Janice worked in that capacity for many years at the Health Science Centre in St. John's Newfoundland and at St. Michael's Hospital in Toronto. She also worked at Street Health as an AIDS Health Educator; and as a part-time professor at the University of Toronto's Department of Occupational Therapy, and at George Brown College's Community Worker/Human Services Counsellor Program. The community sector is all the better for the feminist-informed pedagogy Janice brought to the classroom.

Janice's feminist and trauma-informed practice recognized that the clients we serve need multiple approaches to help their healing; hence she brought to the counselling team and to our clients an eclectic set of skills which she applied in her therapy work.

Over the years Janice had many complex clients with whom she was able to find a way to help them find their grounding. She used her creative talents in music, bodywork, and expressive arts in her therapeutic work, with great success. These approaches supported many clients when words failed or were insufficient to uproot and surface trauma towards emotional health.

A true collaborator and teacher, Janice over the years supervised many social work and counselling students to replenish the pool of counsellors in preparation for her retirement. As a colleague Janice's approach was one of appreciative inquiry, always listening and looking to find a solution and insights on complex cases.



PARKDALE QUEEN WEST CONTACT INFORMATION



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

Tel: 416.537.8222 Fax: 416.537.7714 1229 Queen Street West Toronto, ON M6K 1L2

Tel: 416.537.2455

Fax: (Admin) 416.537.5133 Fax: (Clinical) 416.537.3526 168 Bathurst Street Toronto, ON M5V 2R4

Tel: 416.703.8482

Fax: (Admin) 416.703.7832 Fax: (Clinical) 416.703.8479



