

growth & stability
in a time
of systems change



**PARKDALE
QUEEN WEST**
Community
Health Centre

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.

MESSAGE FROM The Board President and Executive Director

The work that we do every day is grounded in the principles that good health for people and communities is possible only when all have basic needs and equitable services and supports and the ability to challenge and/or remove barriers to those services and supports. The work of our Centre over the past year has amplified those principles as we continue to provide stability for vulnerable clients, particularly those impacted by the overdose and toxic drug supply crisis.

We are growing our programs to meet the care needs of the diverse communities we serve, many of whom face significant barriers to quality health care services. We have enhanced access to dental care for low-income clients without access to insurance coverage; expanded, through partnerships, anonymous HIV Point of Care testing for vulnerable populations; decreased social isolation and increased supports for low-income isolated seniors while increasing awareness of elder abuse through senior-led performing arts programming.

We are providing diabetes care to vulnerable individuals living in rooming houses and care homes in the community. We've increased our harm reduction outreach services to local respite centres and new street outreach locations. By securing provincial support for the creation of a federally approved Supervised Consumption Service in Parkdale we have been able to expand life-saving overdose prevention services. We continue to provide coordinated services for newcomers in Parkdale, as evidenced by the receipt of an award for ten years of staff leadership in the Parkdale Newcomers Service Providers Network. PQWCHC is celebrating ten years of running K.A.P.O.W. (Knowledge and Power of Women), a weekly harm reduction-based drop-in for sex workers in Parkdale.



Karen Lior
President

Our Nail Salon Workers project now includes Korean-speaking nail salons with the intent of supporting and improving their working conditions. We have become the trustee and mentor for a skills and capacity development project for Black LGBTQ+ young people in Toronto (DOMINO) and grown our trustee support and mentorship program led by former youth in care to support Black young people in and transitioning out of the child welfare system (CHEERS).

The Indigenous-led Niiwin Wendaanimak (Four Winds) health promotion and wellness services has grown by integrating an Indigenous Traditional Healer and introducing a weekly healing circle for Indigenous clients in Parkdale, deepening our commitment to decolonization and solidarity with Indigenous, Metis and Inuit Peoples as a non-Indigenous led organization. This positive growth is taking place in a context of tremendous change in the health care system compounded by local, national and international challenges to values of equity and social justice.



Angela Robertson
Executive Director

A significant strategic achievement in this changing political landscape and the health system transformation and the creation of Ontario Health has been the validation that the merger of our two former CHCs into one has positively positioned Parkdale Queen West to face the changes ahead. We are confident that we will continue to grow our programs to be responsive to the present and emerging needs of our clients and communities.

We have not been without challenges, as we grieve the loss of clients and colleagues to the overdose crisis and chronic illnesses. Daily, at our doorsteps and in our communities we see the impact of homelessness and lack of supportive and affordable housing that is responsive to substance using and those living with mental health challenges. We remain vigilant in honouring the resiliency of the clients we serve and working with all in our communities who seek to advance the principles of equity and social justice.

All that we do would not be possible without the dedicated and committed staff team. They bring an unwavering commitment to the clients and communities. We take this opportunity to thank them for their dedication and service. And, of course, a grateful thank you to our community, funders, donors and partners for your continued trust and belief in the value of our work. ●



Primary Health Care

Our second year as an integrated team has seen an increase in new clients being attached to a health care provider. This year's growth of community partnerships has allowed us to increase our reach to providing primary care services to underserved populations. The following are some of the highlights of this past year.

INCREASING ACCESS TO APPOINTMENTS



One of the contributors to no-shows is booking appointments too far ahead of time. Booking everyone one or more months in advance reduces the opportunity for clients to attend their own provider on a more urgent basis, and it results in individuals forgetting their appointments or deciding not to come. This year, we made a real effort to give our clients support on when to call for a follow-up appointment, rather than book an appointment more than three weeks in advance. This has assisted us in being able to offer more same-day urgent appointments and start to reduce our no-show rate.

At one site, we did a trial to see if offering same-day urgent slots of 15 minute appointments would improve client access to care. For those clients who are frequently no-show often due to challenging social conditions, these same-day slots offer an opportunity to receive care without having to book in advance. ●





COMMUNITY OUTREACH

Our team of clinicians at both Queen West and Parkdale sites continue to actively engage in clinical outreach in the community:

West Neighbourhood House's Queen Street location is home to The Meeting Place, a drop-in for socially isolated and under-housed adults. Two half-days a month, Dr. Sonika Kainth and Safe Consumption Service Nurse Kieran Hart, attend The Meeting Place to provide clinical care and, when individuals are interested, attach them to a provider at Parkdale Queen West.

Strachan House is a supportive housing building for adult men and women who are chronically under-housed. Dr. Sandy Glover and Nurse Beth Jensen, as well as harm reduction staff, regularly attend to provide clinical care and harm reduction counselling and support.

Breakaway Addiction Services provides a range of harm reduction and addiction services, including supportive housing. Dr. Muna Chowdhury provides service one half-day each week.

St. George House, House of Compassion, and Eden House: All three of these supportive housing programs are for individuals with persistent mental health challenges who are homeless or at risk of homelessness. Dr. Cynthia Pun alternates between these sites two half-days a month.

St. Felix Centre runs a 24/7 drop-in program for individuals who are homeless/ marginally housed. Safe Consumption Service Nurse Samantha Lee attends one half-days a month to provide care.

Bailey House and Ecuhomes: Bailey House is a supportive housing program for adult men living with significant mental health challenges, co-occurring diabetes or pre-diabetic conditions and are homeless or at significant risk of homelessness at the time of referral. Ecuhome provides single-room housing with supports to individuals who are homeless. Diabetes Nurse Jane Rajah and Diabetes Dietitian Laura Baum attend each agency once a month to provide group and individual service to the clients of these housing programs, as well as to provide education to its employees. ●

In the near future: THE BLUE DOOR CLINIC

A collective of Community Health Centres, led by South Riverdale CHC, is establishing The Blue Door Clinic. The goal is to provide precariously-insured or non-insured people with HIV/AIDS with access to funded interim health care and social supports and to connect them to stable, coordinated ongoing care. The project also aims to build the network of primary care providers, with the appropriate knowledge and ability, who are willing to provide ongoing care to precariously or non-insured PHAs. The partners began meeting over the last year and an agreement will be finalized in the new year. ●

SPOTLIGHT:

MEETING THE CLIENT CARE WHERE THEY ARE – PARKDALE ACTIVITY RECREATION CENTRE

Parkdale Activity Recreation Centre (PARC) is an organization whose work focuses on those who are homeless/ under-housed, and individuals with mental health challenges. PARC opened its doors to its members in 1980 and has been working collaboratively with Parkdale Queen West CHC for almost 20 years. Shona MacKenzie, Nurse Practitioner at our Parkdale site, has been providing care to clients at the PARC clinic since 2003.

The PARC Clinic provides low barrier, low threshold primary care services for individuals who do not normally access health services and who are challenged with keeping an appointment. The service is drop-in, allowing the case managers and members access on Tuesday and Thursday mornings. A St. Elizabeth Mental Health Registered Nurse also provides similar services on Fridays, and Shona collaborates with her on an ongoing basis to support the members. The drop-in staff members identify individuals who might benefit from care and bring them to Shona. Members who see Shona will often ask if she can see their friend who is in need of care. PARC has hired a harm reduction worker but previously, the Parkdale Queen West CHC's harm reduction staff would visit to provide ongoing harm reduction education and safer use tips.

Shona remains devoted to the work. She notes that she can see people who would never manage appointments or access health care spaces outside of PARC's clinic and that she brings care to people without it being inconvenient. In fact, Shona has been known to walk around the neighbourhood looking for individuals who she knows require immediate care and have not made it in to see her! ●



SPOTLIGHT: FOCUS ON YOUTH

There has been a long history at Parkdale Queen West CHC’s predecessor organizations of prioritizing services to youth. In 1992, the SHOUT Clinic funded by the Ministry of Health to provide health care to street-involved youth. As part of the funding agreement with the Ministry, the SHOUT Clinic joined the West Central CHC (the precursor to the Queen West CHC), although the clinic ran in a different location. Over time, the clinic grew and added more services. In 2010, the building containing the SHOUT clinic was no longer a viable space, and SHOUT and Central Toronto/Queen West CHC officially merged.

Youth services remain a priority to Parkdale Queen West CHC. The Centre has provided trans care training for all our physicians, nurse practitioners and other clinical staff who are involved in supporting youth who wish to transition; conducts pop-up immunization clinics at local high schools to ensure students are not suspended for failing to be immunized; offers youth-specific harm reduction services through our TRIP! Program; and provides outreach clinical services to a number of youth agencies, including:

- **Y House**, run by the YMCA, offers emergency shelter and social supports to youth who are homeless or street-involved. Nurse Practitioner Sandra Petty provides care there a half-day each week.
- **Sprott House** is a YMCA housing program which offers transitional housing to LGBTQ2S+ youth between the ages of 16-24. Dr. Muna Chowdhury attends a half-day each month to provide care.
- **Central Toronto Youth Services** is a community-based children’s mental health services with programming specific to the LGBTQ2S+ community. Dr. Muna Chowdhury provides service two half-days each month.

Improving Service Coordination under New leadership structure: MAUREEN GANS, SENIOR DIRECTOR, CLIENT SERVICES

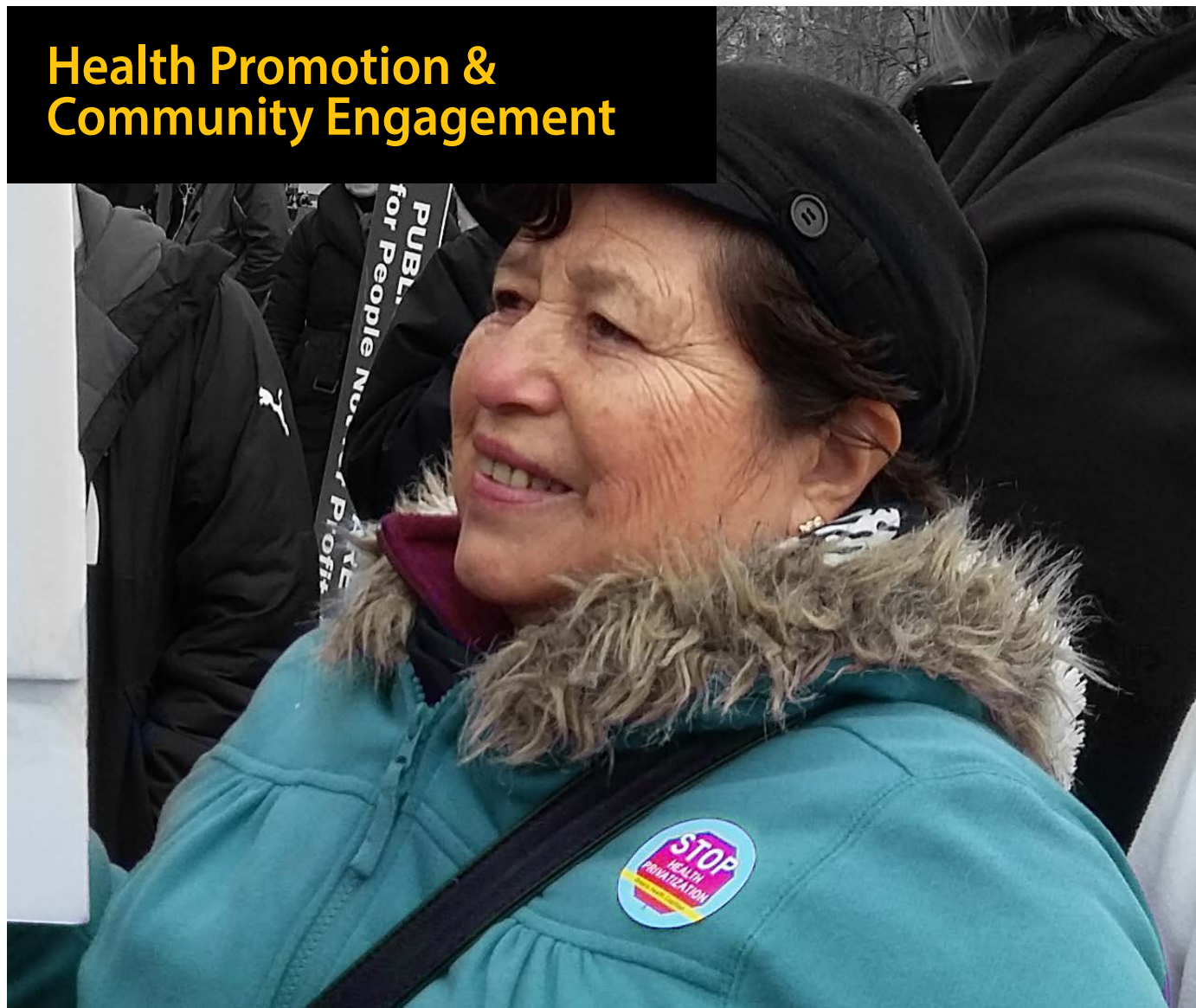
Prior to the integration of Parkdale CHC and Central Toronto-Queen West CHC, each of the two organizations had a Director of Primary Care. After integration, when one of the directors left, we made the decision to hire a Manager for Clinical and Allied Health at each site, with one Director overseeing both managers. With additional changes due to retirement and transitions in leadership for Mental Health and Urban Health/Homeless Harm Reduction Services, the Centre paused to reflect on its entire program leadership structure in the second year of integration. Following up on the commitment to build a structure that would facilitate internal coordination of client care, the decision was made to place client services for primary care, mental health services and urban health/harm reduction services under one single leadership oversight and support. This decision supports service coordination integration service, the sharing of best practices, and prevention of silos from developing amongst staff across multiple sites. Maureen Gans, the former Director of Primary Care transitioned into this new role as our Senior Director of Client Services.

Maureen is a graduate of McGill University (undergraduate degree in psychology with a focus in neuropsychology) and the University of Toronto/Ontario Institute for Studies in Education (Masters Degree in community psychology).

Maureen has worked as a front-line staff in community/social service organizations, as a patient representative for one of the Toronto teaching hospitals, and then spent 18 years in medical regulation, initially as an investigator and then as a manager of several different departments. She then became the director at a family health team. She also spent a brief period of time at the Toronto Central LHIN as the director of quality, safety and risk, before joining us at Parkdale Queen West. Maureen brings with her significant experience in staff management, quality improvement, program development and evaluation, client relations, and client privacy. ●



Health Promotion & Community Engagement



“It is important to get involved; it is for our own good”

–K.S., Seniors in Action



The Health Promotion and Community Engagement team has been working on a number of programs to address the needs of clients and community members through our many partnerships.



SENIORS IN ACTION COMMITTEE

Over the years the Seniors in Action Committee (SIA) at Parkdale Queen West CHC has advocated for issues that specifically impact seniors but that are also relevant to the broader community. This year the SIA developed a work plan which prioritizes five issues of focus for their advocacy: TTC, Health and Dental Care, Elder Abuse, and Community Engagement. At their monthly committee meetings SIA members discuss issues, develop plans of action, educate their peers and generate support for their causes. Throughout the year SIA members have attended rallies at Queen’s Park to demonstrate against cuts to health and other services, collected over a thousand signatures in support of free TTC fares for seniors, and visited their local Member of Parliament to ensure his advocacy for Pharma Care, and dental care for seniors. The Seniors in Action Committee is very vocal and certainly not shy in leading advocacy activities aimed at improving social and health care services for seniors and other members of their Parkdale Queen West community. ●

Breaking down social isolation and keeping active:

SENIORS INTERACTIVE THEATRE PROJECT

Our seniors programming promotes social inclusion through ongoing programs and activities that offer opportunities for seniors to keep active and engaged in their communities. Social isolation can affect people of all age groups and all walks of life; still, seniors may be more at-risk because of the social, economic

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SUPPORTING NEWCOMERS/FAMILIES

We continue to work towards increasing awareness of the programs and services for Newcomers and Families at Parkdale Queen West. Programs offered support newcomers in addressing the challenges they face in their settlement and acculturation processes. Our aim is to meet the needs of our clients and to meet them where they are in their journey. We do this by decreasing barriers and enhancing their sense of belonging, and assisting in creating meaningful connections to their community.

Most programs run annually. Among the programs offered this year are:

Child Minding Training provides newcomer women with the opportunity to develop skills and knowledge in early childhood development and community-based childcare. This year 12 women graduated and enhanced their opportunities to access employment and Canadian work experience. At evaluation one of the comments was: "I am thankful for this training—I understand my child much better. Communication has improved, as well as planning ahead, playing, and so on."

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. As well, participants can gain their Safe Food Handling certification which will increase their employability within the restaurant and hospitality sector. The safe food handling program runs throughout the year. This year 69 community members have been certified.

Through these programs and other initiatives we continue the promotion of healthy lifestyles, healthy eating, the building and enhancement of necessary life skills, such as parenting and employment related skills that address the current and emerging needs of our communities.

and health changes that often happen later in life, changes that may result in a decline in the quality and quantity of relationships.

This past year we were delighted to host the seniors' interactive theatre project: "Wonderful, Organized, Wiser" (WOW). This project is supported by New Horizons, in partnership with the Branch Out Theatre Company and aims to encourage seniors to play an active role in their communities by volunteering, participating in and leading an interactive community theatre performance intended to increase awareness on issues that affect their wellbeing. The interactive format of the play allows participants, both actors and audience, to interrupt the play when they witness something they think is wrong and to come up with alternative options to the storyline. In this project, the WOW Seniors Group engaged in the writing and performance of a theatre play that focused on the mistreatment of seniors, including financial abuse. The seniors group trained and rehearsed for a year before making their final performance at a Seniors Forum as the event's main feature. ●



Guys Can Cook.



Supporting newcomers through community partnerships

Parkdale Queen West is proud to be part of the Parkdale Newcomers Service Providers Network (PNSPN), a group of social service agencies that works together to provide coordinated services for newcomers in the Parkdale neighbourhood. PNSPN partners meet monthly to share information and resources in order to support newcomers as they adapt to their new home. PNSPN has been working together for over 10 years, and in April this year, the network celebrated its 10-year anniversary with special guest MPP Bhutla Karpoche at our Parkdale site.

We appreciate the work that PNSPN members do in welcoming newcomers to the Parkdale neighbourhood. Member agencies include: Abrigo Centre, CultureLink, JobStart, Kababayan Multicultural Centre, Parkdale Community Information Centre, Parkdale Community Legal Services, Parkdale Intercultural Association, Parkdale Queen West Community Health Centre, Polycultural Immigrant and Community Services, Vietnamese Association Toronto, West Neighbourhood House, Working Women Community Centre. ●



NIIWIN WENDAANIMAK – FOUR WINDS PROGRAM

Indigenous peoples in Canada experience significant and persistent inequities that affect their health, social and community well-being. Indigenous communities and agencies in Toronto and across Canada have taken important steps to address the structural origins of inequity by increasing local community control over underlying social, economic, political and cultural conditions. The types of measures adopted to advance self-determination are diverse: i.e. legal recognition of territory and new approaches to service delivery based on Indigenous values and traditions.

The self-determining achievements of Indigenous peoples exemplify strength and resilience in the face of persistent inequality. Parkdale Queen West CHC believes there is a necessary role for non-Indigenous organizations to be allies with Indigenous peoples and organizations to create and adopt new approaches outside of the models provided by the broader mainstream Canadian society to address the root causes of inequity. To this end, Parkdale Queen West CHC in partnership with West Neighbourhood House's The Meeting Place Drop-in and Evangel Hall Mission with support from the Central LIHNs to work collaboratively and with Indigenous organizations to create a unique service model to examine gaps and current issues in our health and social services systems of care and support. Guided by an Indigenous led Advisory Council to identify and implement strategies that best meet the needs of Indigenous peoples.

Niiwin Wendaanimak Advisory Council's Mandate

To provide guidance, oversight and advice within a strategic process to enable transformational changes in access and well-being for Indigenous populations in the Queen/West and mid-West downtown Toronto area. Specifically to:

- Identify and develop the pathways to care for Indigenous adults and youth, particularly those who are homeless, living in poverty and at-risk of homelessness and to identify where service investments are needed;



- Improve attachment of target Indigenous populations to primary care and harm reduction services—by providing repositioned and more culturally responsive primary care services to better serve this target-population on and off-site at community partner organizations;
- Provide Indigenous culturally specific psycho-social supports which integrates recognition of the chronic trauma caused by genocide and colonization; and
- To evaluate and build the evidence and approach for how non-Indigenous organizations can collaborate with Indigenous communities to implement culturally responsive Indigenous services to allow for scalable and sustainable services (particularly across the TC LHIN).

Authority

The Niiwin Wendaanimak Advisory Council continues to be a community Indigenous led advisory body with input from Elders, health service agencies (Indigenous and non-Indigenous alike), and service users linked to the Queen West area. As such, the Niiwin Wendaanimak Advisory Council oversees all aspects of planning, development and activity of the program, and guides and provides direction to its evaluation and reporting. The Advisory Council agency representatives come from: Native Canadian Centre of Toronto, 2-Spirited People of the 1st Nations, Ontario Aboriginal HIV/AIDS Strategy, Evangel Hall, West Neighbourhood House and St. Stephens Community House. ●

Nail salon workers: INCREASING OUR REACH

The Nail Salon Workers Project, which was initiated in 2013, started out of health concerns for technicians as they are exposed to chemicals at their workplaces. Through this project much health education has been done in areas of skin protection, respiratory and reproductive health. Since its inception the project has made successful inroads enhancing health knowledge and skills building among nail technicians in Toronto.

In 2017, nail technicians along with Parkdale Queen West CHC and Chinese & Southeast Asian Legal Clinic (CSALC) established the Nail Technicians' Network (NTN) where they can have a forum for networking, sharing life/work experiences, problem solving workplace issues and learning new nail skills. Currently, the NTN has 156 members.

Recently, with funding from Atkinson Foundation's Decent Work Fund, the project has partnered with Chinese and South Asian Legal Clinic and Workers' Action Centre to focus on labour issues faced by the nail technicians, such as wage theft and job misclassification. Responsibility often falls to workers to enforce the labour law, but the power imbalance greatly takes away their ability to assert their rights. From our interactions with the nail technicians, we found that the majority are unaware of their labour rights.

The project has coordinated workshops, English circles and social events to address various social determinants of health with the focus on labour and related issues. This work will continue into 2020. The outreach team has reached 136 salons within the GTA. Outreach to the nail salons has many challenges, such as owner's resistance and distrust. The team does follow ups and re-visits salons to build relationships with both the nail technicians and owners. There is no short cut. We also outreach to training programs for nail technicians, settlement agencies and churches. *SALON – continued on next page >*



Circle on workplace communication and workers' rights.



SALON – continued from last page

With funding from the Dragonfly Fund of the Tides Foundation, outreach and resource development has expanded in the areas of health promotion within nail salons. Building on successful work done in the Chinese and Vietnamese communities, the project has expanded to include Korean nail salons and Korean language resources. This work has been aided by links with the Korean Canadian Women’s Association.

In March, the project team attended the Progress Summit of the Broadbent Institute. The summit focused on how global politics, the economy and climate change can impact local issues. The team learned about matching the movement to the moment, building a platform/ base and transforming fears into opportunities.

We have been invited by a program consultant of the Canada Nutrition Pre-natal Program of Public Health Agency of Canada to do a presentation in March 2020. The content will focus on how the nail technicians’ work impacts on their health, such as chemical exposure. In addition, the team is involved in different social and advocacy movements, such as \$15 & Fairness campaign, and community efforts against budget cuts to health care and legal clinics.

The range of initiatives within the Nail Salon Worker’s Project truly exemplifies the work of the Health Promotion and Community Engagement team to work at building individual skills, knowledge and capacities, as well as working collaboratively with agencies and communities to address broader systemic and structural issues all impacting on the social determinants of health. ●



Young superhero at the 5Ps program

CONTRIBUTING TO INFANT FOOD SECURITY RESEARCH IN CANADA

Breastfeeding/chest feeding in general can be potentially stressful for families, and in particular for parents who are facing additional life stressors. With generous funding from the Sprott Foundation our Parkdale Parents Primary Prevention Project (5Ps) and Great Start Together (GST) perinatal programs have been collaborating on innovative research in infant feeding and nutrition.

The 5Ps Feeding Tiny Souls Infant Feeding Program which was initiated in 2015 provides targeted infant feeding supports to program pregnant and parenting participants with young infants until their babies reach seven months of age. The program aims to:

- Increase breastfeeding/chest feeding rates of exclusive breastfeeding/chest feeding to six months (as per current pediatric guidelines);
- Decrease barriers that prevent the establishment of breastfeeding/ chest feeding;
- Increase the social supports to new parents; and
- Create a sustainable program which can continue to enhance the ability of 5Ps to meet the ongoing needs of families in Parkdale.

In 2016 the 5Ps program initiated the Parkdale Infant Nutrition Security targeted Evaluation Project (PINSTEP) which included multiple research projects looking at infant feeding practices amongst families that attended its programs. 5Ps clients are primarily low income families, newcomers, single parent households, young parents and teens, and parents experiencing mental health and/ or substance use issues.

Through a partnership with the Healthy Beginnings perinatal program at The Stop, 5Ps, GST and the Sprott Foundation the PINSTEP research is examining infant feeding practices in our communities, the impact of providing free in home or in hospital lactation consultant support as well as the provision of free double electric breast pumps. This project is currently in its four year and hopes to test the feasibility of attaching these supports to other perinatal programs in Canada. ●



Dental services FOR VULNERABLE RESIDENTS OF TORONTO



This year, in partnership with the Canadian Centre for Refugees and Immigrant Health Care, and Evergreen Centre for Street Youth with the support of Toronto Public Health, we successfully completed the Dental Services for Vulnerable Residents of Toronto project.

The project was funded by Green Shield Canada which has a stated commitment to funding projects that:

- Improve access to basic health and dental care for uninsured and underinsured populations in Canada;
- Address gaps in access to dental care for marginalized populations—prioritizing the homeless, working poor and those on social assistance; and
- Include a “navigator” that connects individuals to other appropriate services.

The Dental Services for Vulnerable Residents of Toronto project came out of an identified need for affordable dental care for vulnerable populations who do not have access to employee or publicly funded dental benefits and who instead have to seek urgent treatment in emergency hospitals. The project aimed to ensure that vulnerable individuals would have reduced wait times to address their oral pain and disease, improved oral and general health, as well as improved social well-being, and often improved employment prospects.

The established outcomes for this two-year project included:

- Increased access to dental services for working poor adults, homeless adults and youth, refugees and new immigrants through the employment of one full time dentist who will provide dental care as well as navigational support to community resources;
- Implementation of a funding model developed by a business analyst capable of sustaining a full time dentist by second year of the project through the collective generation of funding revenue; and
- Enhanced navigator role through the development of an improved social health questionnaire and consultation with partners.

The project exceeded the established outcomes.

The following are some of the highlights:

504	individuals were seen for 1612 appointments
438	individuals were referred to other supports with the assistance of the navigator
96%	of individuals experienced an improvement in overall health
89%	of individuals felt that the care they received met their needs
90%	of individuals felt better connected to existing health services and supports
86%	of individuals were referred to services that they needed
86%	of individuals felt more confident navigating the health care system after meeting the navigator

Developing a sustainable business model for the future

Another successful outcome of this project was the development of a report entitled Expanding Dental Care Services for the Uninsured and Underinsured. The report identifies challenges and makes recommendations for changes to address challenges and improve the operating of the service offered. This comprehensive report and its findings will be, and is currently being, used by partner agencies in the Dental Services for Vulnerable Residents of Toronto project to enhance their existing services to increase future sustainability and ensure the continued provision of crucial dental care for the most vulnerable individuals in our communities. ●



Mental Health Services

“The counselling service I received had been the only lifeline to go through the most difficult moment in my life. I appreciate it so much.”



CAPACITY BUILDING TO PROVIDE BEST POSSIBLE MENTAL HEALTH SERVICES

Mental Health Services staff at all three of our sites (Queen West, Parkdale, and the satellite on Roncesvalles) work diligently to provide the best possible mental health services to our clients, many of whom have significant trauma experiences and in addition to mental health struggles, are also trying to navigate housing, income support, and child rearing challenges.

In order to support the staff who support our clients, our counsellors are provided with an opportunity for both group and individual supervision. Group clinical supervision occurs once a month to enable the counsellors to review cases, share resources, and explore themes/issues in their work, as well as develop some common approaches to their work. In addition, counsellors may retain their own clinical supervisor for individual monthly supervision to explore issues arising in their practices. The purpose of each type of supervision is different, but complementary.

With a new counseling model implemented last year, there is an increased focus on brief therapy models, including single-session, in order to serve more clients. This is not unique to our organization. Access Alliance Multicultural Health and Community Services hired a therapist to provide training on single-session therapy and six of our counselors took advantage of this two-day training, further preparing them to incorporate the model into their practice.

One of our sites has been doing monthly chart audits for some time and this activity offers counsellors the opportunity to identify trends, questions based on their practices compared to their peers, and the need for operational procedures that may require development. This quality improvement/professional development practice will begin in the new year at the other sites. ●

COGNITIVE BEHAVIOURAL THERAPY FOR INSOMNIA

Cognitive Behavioural Therapy for Insomnia (CBT-I) is being used more often in primary care to address the over-use of sedatives/hypnotics for sleep, especially in clients over the age of 65. Three of our Parkdale Queen West counsellors (Mark Caspi, Elizabeth Guete and Kinsey Lewis) have been certified in the highly recognized and researched Cognitive Behavioural Therapy for Insomnia developed by Colleen Carney (Ryerson University) and Jack Edinger. Mark and Kinsey have conducted two low threshold pilot groups at the Queen West location. They have been well attended and feedback from the attendees was very positive. While improvements in sleep quality and sleep habits were clearly identified as positive outcomes, further evaluation will be needed to determine if participants were able to reduce their reliance on medication for sleep assistance. ●





Urban Health Services/ Harm reduction and homeless/

“First time using SIS,
made me feel like a
human, like I don’t
have to hide away
to use.”

Supervised Consumption Service

Saving Lives: RESPONDING TO THE OVERDOSE & TOXIC DRUG SUPPLY CRISIS

Our Parkdale site’s Overdose Prevention Site (OPS) finally opened in November 2018; it was one of 3 sites in Ontario whose opening had been halted by the provincial government while conducting a review of evidence as to their effectiveness. The opening of the OPS provided members of the Parkdale community with a safe and legal space to use, access to peer assisted injection, harm reduction supports, education and lifesaving medical health interventions in reversing overdoses, as well as connections to other health and social service within the Centre and broader community.

Since we opened the SCS and OPS, we continue to experience increases in client uptake of the service. We have had over 2000 visits to the SCS and over 1000 client visits to the OPS and feedback from clients has been positive. This increase demonstrates the value of the service and clients feeling safe and comfortable accessing the space.

Staff continue to build service pathways and relationships with internal health care providers and counsellors to improve access to medical care and counselling supports for clients.

In March 2019, Parkdale Queen West received a Health Canada exemption from section 56 of the Controlled Drugs and Substance Act to operate a supervised consumption service so now the OPS is a Safe Consumption Service (SCS). In addition, Health Canada granted a three-year exemption renewal of Queen West’s SCS.

As a result of the review process, the provincial government moved forward to replace SCS and low-barrier OPS service model with the new Consumption and Treatment Services (CTS) model.



On March 29, 2019 it was announced that our funding applications to operate a CTS at our two sites (Queen West and Parkdale) were approved. This was great news for the clients we serve and whose lives are saved by having these services in place. With this new funding, we will be able to expand service hours of both sites to seven days a week, renovate the Parkdale site's space as well as hire permanent staff, including nurses, which will allow the Parkdale site to also expand the level of care the SCS will be able to offer clients.

Parkdale Queen West CHC is grateful for the ongoing support of our committed staff and local community members, community partners, business improvement associations, resident associations, government representatives, Toronto Medical Officer of Health, researchers and allies—many of whom have been personally impacted by the overdose crisis—in advocating for these essential services and connecting clients to wrap-around services and support for Parkdale Queen West's CTS funding applications and the Parkdale site's Health Canada exemption application. These lifesaving services have created confidential, supportive, non-judgmental, clean, legal and welcoming spaces for people to use pre-obtained drugs under the supervision of trained staff and to have access to sterile harm reduction supplies, learn about safer injection/consumption techniques and access a wide arrange of services and supports.

The Parkdale and Queen West SCS/OPS have reduced overdose risk and prevented overdose-related deaths through the provision of medical interventions (staff have reversed 42 overdoses) and providing clients with overdose prevention education and Naloxone training and kits. The services have had an impact on delivering harm reduction, nursing, case management, and counselling services as well as connecting clients to internal and external harm reduction, primary care, drug treatment, social supports and wrap-around services. The services have also led to increased community awareness about harm reduction and the important role that our SCS/OPS play in regard to responding to the opioid overdose crisis and addressing community concerns regarding public drug use and discarded needles.

Peer Assisted Injection

In January 2019, Health Canada amended the Queen West site's SCS exemption agreement to allow for peer injection assistance as part of a national pilot project. This project permits clients who are unable to self-inject to have another client or a community member prepare their drugs and provide injection assistance. Allowing peer-to-peer assisted injection will allow us to reduce service barriers and injection-related risks for a significant number of people who inject drugs but who cannot self-inject.

Evaluation of the SCS

The Queen West SCS is one of three Toronto agencies participating in the OISIS evaluation project. Supported by the Canadian Institutes of Health Research, OISIS Toronto is an open prospective community-recruited cohort of people who inject drugs (PWID), initially developed to evaluate the effectiveness of the city's first three supervised consumption sites integrated within existing community health agencies. Recruitment at the Queen West site began in November 2018. To date, 578/750 interviews have been conducted. At the Queen West site, 96 clients and 67 non-clients have been recruited and completed their interviews.



Staff have reversed 42 overdoses



“You guys saved my life! Without this service I would be dead.”



Drug checking services

In partnership with the Centre for Addictions and Mental Health, St Michael's Hospital, the Centre for Drug Policy Evaluation, Toronto Public Health (The Works) and South Riverdale Community Health Centre, we submitted exemption applications to Health Canada to provide Drug Checking Services (DCS) at our Queen West SCS. The DCS is an innovative harm reduction and overdose prevention intervention to prevent the deaths associated with the current opioid overdose crisis. The DCS will allow for clients to have their drugs and/or paraphernalia to be tested at participating hospital laboratories. Test results will provide clients with comprehensive information on the composition and potency of their illegal substances.

Community engagement

In our ongoing commitment to meaningfully engage with our community, be a responsive provider of services and a good neighbour, as well as contribute to the safety, health and well-being of the communities we serve, we have engaged a wide range of stakeholders in a number of activities as part of our community consultation process:

- Engaged and involved people with lived experience in all aspects of operating the SCS/OPS, including design, operation and evaluation;
- Engaged people who use drugs help to build bridges and ensure our SCS/OPS is responsive to clients' needs;
- Held regular SCS community liaison committee meetings at our Queen West site;
- Held two successful open house events in 2018 to celebrate the opening of our Queen West site's SCS (April) and the opening of our Parkdale site's OPS (December), both were well attended by a diverse cross-section of stakeholders;
- Met with Toronto Police Service representatives and participated in 14 Division's community liaison committee to foster positive and effective relationships with our local police division as well as to increase awareness of the service among front-line police; and
- Will be implementing a community liaison advisory at our Parkdale site where we will bring local business, neighbourhood residents and community service representatives together on a bi-monthly basis.



Naloxone Kits

If you or someone you know is taking opioids, or at risk of an opioid overdose, a naloxone kit could mean the difference between life and death.

Our commitment in this crisis

With over 303 opioid overdose deaths in 2017, Toronto continues to struggle to respond to this crisis. According to Toronto Public Health, these deaths represent a 63% increase in just under 2 years and a 121% increase since 2015. In 2017, one in four opioids overdose deaths in Ontario occurred in Toronto. Opioids are now a leading cause of accidental death, comparable to fatalities on Ontario's roadways. The above data do not represent the full picture as they do not capture the number of people that overdose and do not call 911 or seek help at emergency rooms.

In response to this ongoing crisis and the need for responsive services that address community members' health and wellness needs, we continue to support and build upon our supervised consumption and harm reduction services and to advocate for effective drug and overdose prevention policies. In addition, we will continue to actively support integrated responses among public and private stakeholders with a role in preventing opioid-related deaths and are committed to working with our community, partners, allies and government stakeholders in ensuring that the gains made in overdose prevention will be continually protected.

We are proud to be an ally with those who have lost friends, relatives and community members to the overdose crisis and to join the community of others SCS and OPS providers in this city and across the country in providing a proactive public health service response to a critical individual and public health crisis. ●

Parkdale Queen West advocates for ending criminalization of HIV non-disclosure



From left: Arif Virani MP for Parkdale-High Park, Maureen Gans, Parkdale Queen West CHC, Brook Biggin, Community-Based Research Centre, Randy Boissonnault, Liberal MP, Edmonton Centre, Valerie Nicholson and Chad Clarke, The Canadian Coalition to Reform HIV Criminalization.

The House of Commons' Standing Committee on Justice and Human Rights is currently studying the criminalization of non-disclosure of HIV (human immunodeficiency virus) status. Parkdale Queen West CHC was invited to address the Committee as it considers whether the legislation and government directives on HIV non-disclosure require change.

Parkdale Queen West's presentation at the Committee hearings on April 30 2019 was delivered by Maureen Gans, our Senior Director of Client Services. Maureen's presentation was informed by the work we do providing Point of Care anonymous HIV testing and counselling and ongoing primary care to individuals who are HIV positive.

The criminal code currently permits crown attorneys to charge HIV positive individuals who have engaged in sexual activity without disclosing their HIV+ status. Individuals can be charged with assault or sexual assault, even if they have used condoms and are on pre- or post-exposure prophylaxis (medication to reduce the virus) and even if their viral load is undetectable. There is NO risk of HIV infection from an individual whose viral load is undetectable.

Many individuals and groups presented to the Committee, including AIDS service organizations, infectious diseases specialists, lawyers, community groups and individuals with HIV who have either been charged or threatened with charges. Maureen delivered a statement speaking to the impact and increased likelihood of criminalization of non-disclosure on populations marginalized by race, immigration status, drug use, nationality, and gender. She questioned the efficacy of criminalization in the face of research evidence and noted the continuing presence of stigma and discrimination against people who are HIV positive.

In presenting options for consideration, Maureen focused on testing, treatment and support. She noted that in the last year, Parkdale Queen West CHC tested 485 individuals; of those, 9 were HIV positive. All have disclosed their HIV status, have access to a primary care provider, and are on medication. Most who test negative come back for regular testing, which provides us with an opportunity to develop trusting relationships with individuals, to counsel about PrEP (pre-exposure prophylaxis), and to provide support and assistance if a test is positive.

Maureen concluded that what women, people who use drugs, and racialized communities need is investment in the beneficial impact of HIV testing and other public health initiatives in modifying behaviour that risks transmitting HIV. Testing needs to be the centrepiece of our strategies and we need treatment to be available to anyone who needs it. We need investment in social and emotional supports for individuals living with HIV to eliminate the fear, isolation and discrimination that exists when disclosure happens.

Parkdale Queen West CHC is proud to be in solidarity with the many clients impacted by HIV/AIDS and remain committed to the fight against the discrimination many still face. ●



CLIENT SURVEY

What our clients have to say

Every year we ask our clients to share their experience of the care and services they receive from us. This is what they told us:



ACCESS

73% say they can usually book an appointment within a reasonable amount of time

97% say they feel comfortable and welcomed

82% say they can get services in the language of their choice

SERVICE SATISFACTION

83% rate the care and services they received as Excellent/Very Good

96% say they are treated with dignity and respect

82% agree things are explained in a way that is easy to understand

82% agree they are able to ask questions about recommended treatment

87% agree they are involved in decisions about their care and treatment

WELLBEING AND COMMUNITY

86% say they feel a strong sense of belonging to their community

93% agree the Centre has a positive impact on the community



WHAT WE ARE DOING WELL!

- Inclusivity: "Being sensitive and non-discriminatory"
- High quality medical attention "Practitioners are knowledgeable and caring"
- Excellent quality of services
- Welcoming and friendly environment
- Strong Indigenous wellness program
- Holistic approach to services
- Access and diversity of programs offered
- Excellent counselling service
- Friendly front desk staff
- Easy access to booking appointments
- Fostering of sense of community

WHAT WE CAN DO BETTER

- Improve phone communication
- Increase trans specific services
- Address difficulties scheduling appointments
- Expand hours of services
- Provide longer-term counselling options
- Reduce appointment wait time
- Improve consistency of drop-in medical services



SERVICE IMPACT

OVERALL SERVICE UTILIZATION

14,425	Active clients
1464	New primary care clients
1206	New primary care clients - priority population*
29,129	Individual face-to-face
500	Anonymous HIV testing

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

ILLNESS PREVENTION/CHRONIC DISEASE MANAGEMENT

75%	Cervical cancer screening rate
70%	Colorectal cancer screening rate
72%	Breast cancer screening rate
54%	Influenza vaccination rate
86%	Rate of interprofessional care for diabetes

DENTAL – PARKDALE

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

355	Total visits / TPH
148	seen by dentist / George Brown
207	Visits for dental Hygiene / George Brown
128	New Dental Clients seen by WEOHC

DENTAL – QUEEN WEST

492	Unique Clients Served
903	Individual Client Encounters
50	Diabetes care

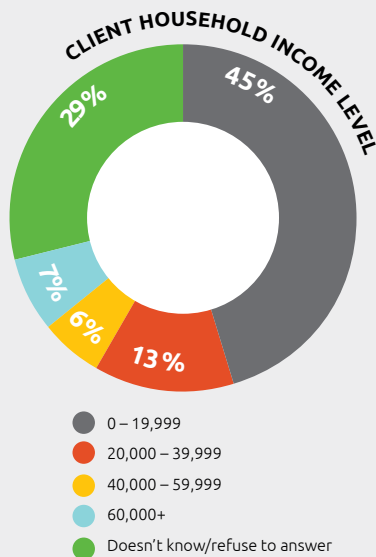
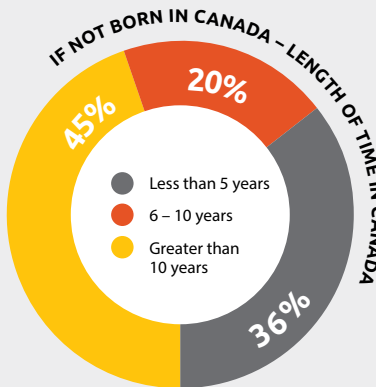
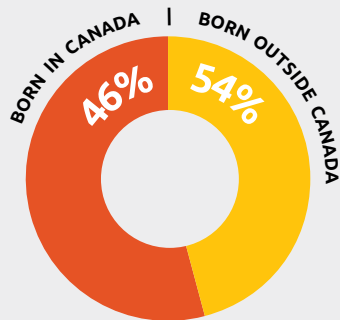
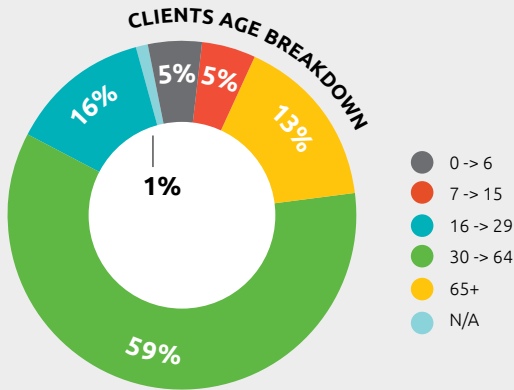
HEALTH EQUITY

246	Indigenous clients served
762	Non insured clients served
1320	Newcomers <=5 years
1387	Homeless clients

OFFSITE & HOME VISITS

1139	Primary care
189	Counselling
50	Diabetes care

CLIENT PROFILE



TOP 10 COUNTRIES OF ORIGIN (EXCLUDING CANADA)

# OF CLIENTS	COUNTRY OF ORIGIN
457	Portugal
338	India
308	Brazil
284	Hungary
258	Nigeria
222	China
139	United States
138	Philippines
130	Jamaica
117	United Kingdom

DISTRIBUTION OF CLIENTS BY PREFERRED SPOKEN LANGUAGE

# OF CLIENTS	PREFERRED SPOKEN LANGUAGE
4745	English
499	Portuguese
182	Hungarian
161	Spanish
104	Chinese (Mandarin)
54	French
51	Arabic
40	Hindi
35	Chinese (Cantonese)
25	Amharic

TOP 10 LANGUAGE INTERPRETATION SERVICE PROVIDED

# OF CLIENTS	LANGUAGE INTERPRETATION PROVIDED
1161	Hungarian
400	Portuguese
159	Spanish
147	Mandarin
73	Tibetan
63	Arabic
48	Tigrinya
41	Czech
30	Cantonese
29	Amharic



PQW FINANCIAL SUMMARY

Summary Statement of Financial Position

for year ended March 31, 2019

2019

2018

ASSETS

Current assets

Cash and short-term deposit	\$ 1,475,392	\$ 1,849,457
Accounts receivable and prepaid expenses	1,120,601	803,808
	2,595,993	2,653,265
Property and equipment	6,962,528	7,068,393
	9,558,521	9,721,658

LIABILITIES

Current liabilities

Accounts payable – accrued liabilities and deferred revenue	1,833,091	1,747,562
Accounts payable – Toronto Central LHIN and MOHLTC	188,624	349,733
	2,021,715	2,097,295
Deferred capital contribution	7,007,219	7,096,061
	9,028,934	9,193,356

NET ASSETS

Unfunded payroll obligations	(231,437)	(220,699)
Other activities – unrestricted	761,024	749,001
	529,587	528,302
	9,558,521	9,721,658

Summary Statement of Operations for year ended March 31, 2019

REVENUES

Toronto Central Local Integration Network (TCLHIN)	\$ 13,063,782	\$ 12,939,254
Ministry of Health and Long Term Care – AIDS Bureau	298,125	197,231
Ministry of Health and Long Term Care – SCS	770,175	409,133
City of Toronto	195,451	345,226
Public Health Agency of Canada (PHAC)	263,650	334,403
Ministry of Community and Social Services (MCSS)	178,340	165,885
Other grants, fees and other income	1,366,967	922,281
Total revenues	16,136,490	15,313,413

EXPENSES

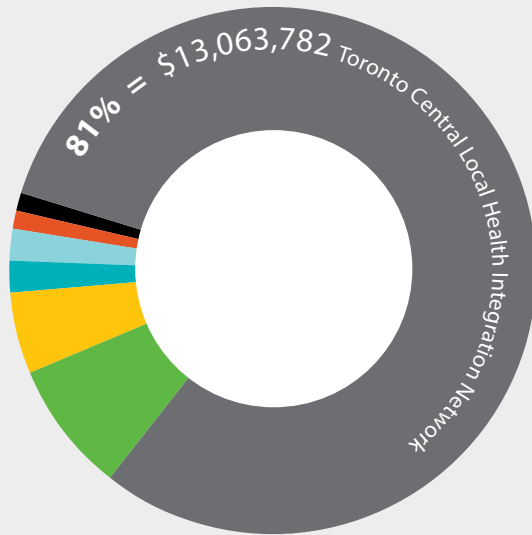
Salaries and benefits	12,977,039	12,027,395
Occupancy costs	902,199	805,982
General and operating	2,238,944	2,444,921
Depreciation expense	17,023	23,044
Total expenditures	16,135,205	15,301,342
Excess of revenues over expenses for the year	\$ 1,285	\$ 12,071

This is a summary of the audited Financial Statements by Hilborn, LLP.

Complete audited financial statements available upon request from the the office of the Executive Director.

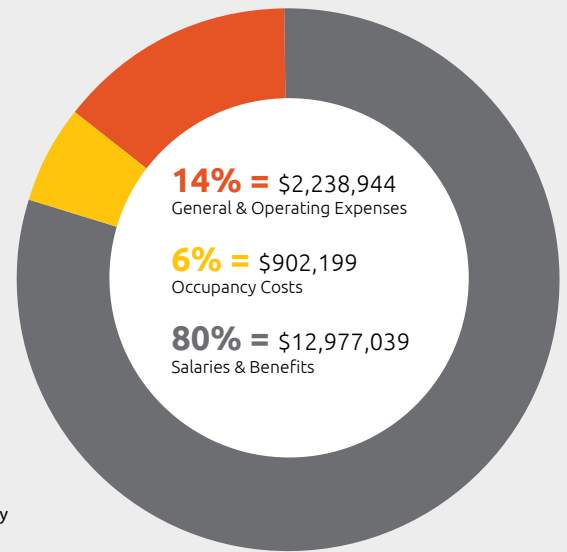
CORPORATE INFORMATION

REVENUES



- 8% = \$1,366,967**
Other grants
- 5% = \$770,175**
SCS – Ministry of Health and Long Term Care
- 2% = \$263,650**
Public Health Agency of Canada
- 2% = \$298,125**
AIDS Bureau – Ministry of Health and Long-Term Care
- 1% = \$195,451**
City of Toronto
- 1% = \$178,340**
Ministry of Children, Community and Social Services

EXPENSES



BOARD OF DIRECTORS 2018 – 2019

- Karen Lior, President
- Lisa Druchok, Vice President
- Bernard King, Secretary
- Lois Fine, Treasurer
- Dean Bere, Director
- John LeFave, Director
- Kelly Dobbin, Director
- Marc André Hermanstynne, Director
- Shelina Ali, Director
- Yervant Terzian, Director
- Anu Radha Verma*(Resigned)
- Kate Hammer*(Resigned)

*No longer with PQWCHC

FUNDERS

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



Ministry of LABOUR

Ministry of CHILDREN, COMMUNITY AND SOCIAL SERVICES





Staff profiles

Growing together in changing times: Responding to the needs of clients and communities

One of the goals of integration of Parkdale and Central Toronto-Queen West Community Health Centres was to increase our ability to meet the changing needs in a transforming health care system, while offering opportunities for employees to move into different roles and take on new responsibilities. In the past year, some of our staff have transitioned into new roles, and new staff have joined our team.

NEW EMPLOYEES

Parkdale Queen West CHC has been fortunate over the years to attract an amazingly talented and dedicated group of employees. This past year has been no exception. We asked some of our 'newbies' to tell us why they chose to work at PQWCHC. Here is what they told us:

Ashley Miller, Counsellor



I have been working in the counselling field for over 16 years and since moving back home to Toronto in 2005, I have known about and admired the work that takes place at Parkdale Queen West CHC. I was grateful to have found

the opportunity to do my placement for my Masters of Counselling Psychology Degree, referring and transferring clients, attending case conferences and most importantly engaging in collaborative care work.

I have been drawn to the values and philosophy that Parkdale Queen West holds and cultivates that speak to creating a safe space that honours people's vulnerabilities, strengths, sorrows, and survivorship. Being surrounded by such wisdom from my colleagues and peers, the managers, and the clients we serve, I am becoming a better person.

Michele Daniels, Registered Nurse



I really enjoy working with the clients we serve here at Parkdale Queen West: newcomers, people who use substances, people with mental health challenges, and many other vulnerable people.

I had worked at a health centre in London, UK and after I moved back to Canada I was looking for a similar role in a health care setting. The difference here is that the Centre has so many services and programs to keep people engaged. We were not so fortunate in London to have the space, staffing or hours of operation.

I think Parkdale Queen West really makes a difference in the lives of clients and in the community as a whole. When I see the people I have engaged with come back for care it really gives me something positive.

Nanky Rai, Physician



As a volunteer at the unsanctioned pop-up Overdose Prevention Service in Moss Park, I met and connected with the amazing Harm Reduction workers who also work at Parkdale Queen West CHC. I have also had the privilege

of knowing Angela Robertson, Parkdale Queen West's Executive Director, for some time. So when the position became available, I jumped at the opportunity to work somewhere where I knew that my co-workers, from frontline providers to management, all had a firm grounding in social justice. The relationships are what drew me in and I also knew that by working here, I'd feel supported and could be uncompromising in my values. I wanted to work somewhere where I would be surrounded by people who are committed to struggles for Indigenous sovereignty, migrant justice, an end to the drug war, and the liberation of all dispossessed communities. And every day, I feel privileged to work at Parkdale Queen West where we provide health care in ways that affirms peoples' autonomy and right to self-determination.



Pixley Bailey, Director, Finance and Operations



Pixley is an immigrant from Jamaica. His involvement in and passion for community service started as a child growing up seeing his grandmother providing food to various homeless and disadvantaged persons in his

community. Since moving to Canada his focus has been geared to agencies and organizations that provide support and services to at-risk and marginalized communities.

For a number of years Pixley has admired the work that Parkdale Queen West CHC does; more specifically, its demonstrated unconditional passion and advocacy for the clients who are at risk and who sometimes fall through the cracks in the communities it serves, and who may not have received ready access and support otherwise. These were significant considerations that attracted him to the Parkdale Queen West family. Pixley accepted the role of Director, Finance and Operations in July 2018. He freely acknowledges that over the past year, his experience with the great leadership and amazing staff at Parkdale Queen West has confirmed that his move here has been the most fulfilling experience in his over 28-year career.

Retha Ganaprakasam, Counsellor



A client from the community had commented to me that Parkdale Queen West CHC has treated them very well over the years and the services they received were always provided with kindness and compassion. In

my short time here, I have met many of these kind and compassionate individuals who strive to make health possible for community members who come in through our doors. This is why I chose to work at Parkdale Queen West CHC.

Racquel Bremmer, Manager, Clinical & Allied Health



I enjoy working within the community health care sector and have always gravitated to working with marginalized folks, having been a front line staff for many years in the past at other community health centres and AIDS

service organizations. Parkdale Queen West CHC's values and strong leadership make me confident that I will further develop my management skills. Each day at the Centre brings dynamic experiences, thus I am always engaged. With the learnings I receive from and provide to, my team continually challenges me to utilize my strengths and to improve on the tools I need to address the needs of clients and staff. Having a strong leadership team to lean on and learn from are also some of the reasons I enjoy coming to Parkdale Queen West each day.

Sherry Sandhu, Physician



When I graduated from medical residency, my first position was as a locum at Parkdale Queen West at the Parkdale Site. I was welcomed with open arms into a diverse and lively environment. I continued working as

a locum in other health care settings and at the Queen West site. When I ultimately decided to come on full time at Parkdale, it was after a year of reflection on the type of work I wanted to do as a Family Physician. I knew I wanted to work in a community setting with opportunities for collaboration, advocacy and with populations that inspired and challenged me. I wanted to derive some meaning from my work. And as challenging as work can be at Parkdale Queen West CHC, I learned early on that it was fulfilling work and work worth doing.

Working at Parkdale Queen West has allowed me to put into practice the knowledge and skills I have gained throughout my medical training and graduate work. Today, I am happy to be a part of the diverse team and look forward to continue working with our clients and the community. checked



Maureen Gans, Senior Director, Client Services



I began working at Parkdale Queen West CHC on the first day of the 2018/19 fiscal year as the Director of Primary Care. However, I like to tell people that my journey to Parkdale Queen West started in 1991. Having just completed my Masters degree, I applied for a health promoter position at the former Parkdale CHC. At the time, the priority populations were seniors, individuals managing mental health challenges, and those who were homeless/ precariously housed. Doing community development work with these populations was exactly what I was looking for at

the time. I was surprised Parkdale granted me an interview, as I really did not have the experience they must have been seeking. The interview was very positive, so was the follow up call letting me know that I hadn't been hired. Twenty-seven years later, I am finally here! All the experience I have gained between that first interview and now has been to prepare me for working with this amazing organization. I feel like I have finally made my way home.

NEW ROLES

Jessica Ziliotto, Manager, Clinical & Allied Health Team



Jessica has held various roles in the organizations that have merged into what today is Parkdale Queen West CHC. She initially obtained a contract to assist with the annual financial audit at the former Central Toronto Community Health Centre (CTCHC). Once the work was complete, Jessica staffed the front desk at both CTCHC and the SHOUT Clinic. At the time, the SHOUT Clinic was linked to CTCHC through a funding agreement. Jessica was then hired as a medical receptionist/client support worker at the SHOUT Clinic, and after moving away from Toronto for some time, she came back on a three-month contract, where her position as a medical secretary became permanent.

When CTCHC and SHOUT merged into one location at the Queen West location, Jessica became a medical secretary for about a year. She then transitioned into an administrative assistant position to the Operations team, covering building management, IT support and some support for the Board of Directors. Later, Jessica was offered a position as Supervisor for the medical secretaries which she maintained for about two years. In 2018, Jessica became the Manager of the Clinical & Allied Health Team at the Queen West site.

Jessica grins when she tells her story. She says that "it's pretty obvious she enjoys change". Integration and the opportunity to move into different roles have offered Jessica different perspectives and new challenges.

Tysa Harris, Administrative Supervisor



Tysa began work 17 years ago at what was then the Parkdale Community Health Centre. She was initially hired as a relief receptionist and a few days later, she was offered the position on a permanent basis. She stayed in that role for 6 months until a position as a medical secretary became available. In September 2017, Tysa transitioned into the newly formed role of Administrative Supervisor.

Tysa says that when she was first hired, she really liked the feel of the place: "It was small and felt like a family... People were friendly, open, warm and generous with their time". She is proud of how the Centre has evolved over the years to meet the changing needs, in particular, of the growth and expansion of the Harm Reduction program which, when she began, was a small program with only two program staff.

Tysa has always supported new initiatives, to both support the organization and to keep things interesting for herself. Several years ago when the Centre was looking for someone to link individuals with frequent visits to hospitals to primary care, she volunteered by taking the role of 'case coordinator'. Tysa has worked through three different electronic medical records and became a "super user" for the most recent one. Tysa appreciates all the opportunities made available to her to learn and grow in the organization which have allowed her to take on her most recent challenge as a supervisor.

PARKDALE QUEEN WEST CONTACT INFORMATION

PARKDALE SITE

1229 Queen Street West
Toronto, ON M6K 1L2
Tel: 416.537.2455

Hours of Operation

Monday, Tuesday &
Thursday

9:00 a.m. to 8:00 p.m.

Wednesday

1:00 p.m. to 8:00 p.m.

Friday

9:00 a.m. to 5:00 p.m.

Saturday

10:00 a.m. to 1:00 p.m.

SATELLITE SITE

27 Roncesvalles Avenue
Suites 301
Toronto, ON M6R 3B2
Tel: 416.537.8222

Hours of Operation

Monday to Friday

9:00 a.m. to 5:00 p.m.

QUEEN WEST SITE

168 Bathurst Street
Toronto ON M5V 2R4
Tel: 416.703.8482
Fax: (Admin) 416.703.7832
Fax: (Clinical) 416.703.8479

Hours of Operation

Monday, Tuesday &
Thursday

9:00 a.m. to 8:00 p.m.

Wednesday

1:00 p.m. to 8:00 p.m.

Friday

9:00 a.m. to 5:00 p.m.

Dental Clinic Hours

Monday, Wednesday &
Friday

9:00 a.m. to 12:00 p.m.

1:30 p.m. to 5:00 p.m.

Tuesday

CLOSED

Thursday

10:00 a.m. to 1:30 p.m.

2:30 p.m. to 7:00 p.m.



**PARKDALE
QUEEN WEST**
Community
Health Centre



Ontario's Community
Health Centres
Every One Matters.