



SOUTH-EAST
OTTAWA COMMUNITY
HEALTH CENTRE
EVERY ONE MATTERS.

ANNUAL REPORT

09/10



every one matters.

Every individual. Every family. Every community.

vision

We envision a future in which everyone in South-East Ottawa has the capacity to work together to develop, access and utilize a wide range of opportunities, responsive services and resources within their communities for a safe, just and healthy life for all.

values

We believe that access to good health and social services improves the quality of life and well-being of residents of South-East Ottawa. We appreciate the worth of each individual in our community. We are inclusive, respectful, honest, responsible, and accountable with partners and participants. We strive to be a healthy organization that incorporates new ideas and innovative approaches, celebrates community, shares successes, and learns from mistakes.

BOARD OF DIRECTORS

Executive Committee:

Wayne Kauk: President

Lee Ann Welsh: Vice President

Denise Chadala: Vice President

Stephanie Wolfe: Secretary/Treasurer

Members-at-Large:

Arlington Dungy

Lorein Estephan-Mezher

Sandra Wright

mission

South-East Ottawa Community Health Centre works with the diverse community of South-East Ottawa and with partners throughout the region to

- **Foster a healthy community** by supporting residents of South-East Ottawa to sustain healthy, welcoming, diverse and safe communities.
- **Strengthen well-being** by promoting the development of healthy individuals and families, particularly with persons who are vulnerable.
- **Provide a place where help may be given and received** by providing integrated and holistic primary health care and social services, promoting access to other services and opportunities for persons who are vulnerable or marginalised, and by supporting community members to help one another.

Directors:

John Ford: Director

Samantha Hamilton: Director

Jane Dickinson: Director

Mohamed Abdi: Director

Jalil Marhnouj: Director

Staff Representatives:

Cathie Racicot and Marian Green

Ex Officio:

Leslie McDiarmid, Executive Director

Jeannie Taylor-Page, Recording Secretary

South-East Ottawa Community Health Centre

1355 Bank Street, Suite 600
Ottawa, Ontario K1H 8K7

Tel 613.737.5115

Fax 613.739.8199

www.seochc.on.ca



MESSAGE FROM THE PRESIDENT AND THE EXECUTIVE DIRECTOR



2009–10 proved to be a year of success and challenge. Challenges came in many forms, H1N1 topped them all! Successes were many, made possible by a highly skilled staff, committed board and active volunteers.

H1N1: After months of planning, on November 4th, 2009, South-East Ottawa Community Health Centre (SEOCHC) was activated as a flu assessment centre (FAC) off-site at the Dempsey Community Centre. FACs were activated because the primary care system was unable to cope with the increased demands placed upon it by individuals requiring influenza care. They also assisted in protecting the acute care system (Emergency Rooms/hospitals) from being overwhelmed by individuals seeking primary care, so that acute care services could be focused on those with serious illnesses. In order to have the capacity to staff the FAC and provide essential services on site at 1355 Bank Street and at the Better Beginnings Better Futures location, all non-essential programs/ services were put on hold. We continued to see urgent care SEOCHC primary care clients, provide crisis intake and high priority counseling, as well as maintain the breastfeeding drop-in and phone calls or home visits to vulnerable clients as required. Our staff were stellar, showing exceptional dedication. SEOCHC served almost 400 people at the FAC. After the announcement that FACs would be closing, Dr. Isra Levy, Medical Officer of Health, said *“Flu assessment centres provided care to nearly 3,000 people with mild to moderate symptoms as the flu activity sharply increased during*

the past few weeks. I extend my sincere thanks to the organizations that have stepped up to the plate to help our community cope in this time of need.”

Going Paperless/Going Green: Great gains were seen in our ability to go paperless although not without many a challenge! Electronic client records are now the norm with the primary care team leading the way. Clinical charting, appointment bookings, prescriptions, lab results, and external referrals are all done electronically. Our Green Team continued to push us to be more environmentally responsible by recommending policies on green (paperless) meetings and green purchasing.

Our Volunteers: Our already strong Board continued to build strength in the area of governance. Board development included training on the Community Health Centre (CHC) model of care, anti-oppression, Ministry of Children and Youth Services strategic directions, membership and fund development and accreditation. Six members of the Board met regularly to prepare for the on-site accreditation interview focusing on governance, related policy and practice. The Board conducted a broad based performance review of the Executive Director, approved standing committee terms of reference, amended a number of policies and developed and approved a policy on integration. The Board began using a dashboard (summary report) to monitor progress and identify any areas of concern. Volunteers increased both in number and in the amount of time and expertise donated to the Centre. The annual volunteer recognition event was well attended and 100% of volunteers identified the Centre as a good place to volunteer. People helping one another continued to be a cornerstone of our organization.



Flu Assessment Centre

Our Staff: Collectively staff members spoke 22 different languages and represented 24 different ethnic backgrounds. Working closely with the community, staff planned and implemented programs in 35 unique community locations, addressed issues, supported community capacity and leadership development and met the very individual needs of close to 10,000 people. Outside of job responsibilities staff raised money in support of relief efforts in Haiti, cancer research, the United Way and for a colleague who experienced much loss due to a fire in her home.

Our Community: A year ago we were privileged to have Dr. John Rook address our members at our Annual General Meeting. Dr. Rook spoke about the important role that agencies play in addressing poverty and advocating for social justice, a role that our Board and staff prioritize daily. The South-East Ottawa interfaith group continues to meet at the Centre, share information and address issues of common concern. We held a community forum to bring together organizations and groups in our area to build on our common areas of interest. The Multicultural Advisory Group provided feedback to the Board to assist us in meeting the needs of our diverse community. There is no doubt, together we are stronger.

What's New: We supported the implementation of the Urban Priorities School project funded by the Ministry of Education at Ridgemont and Rideau High Schools. Working closely with the

schools and partners, SEOCHC supported and coordinated a wide range of community agencies to deliver programs and services to address student needs. After a very successful Community Health Day display and interactive activities held at Elmvale Shopping Centre, you will see us more often in local shopping malls and at community events, providing information and health promotion activities. To accommodate an ever-increasing number of SEOCHC and partner agency staff we implemented phase 1 of a functional plan that saw an increase of 6 workstations, all of which are now full!

Looking Ahead: In the year ahead we will expand our partnership with the Perley Rideau Centre to support their *Village* concept, which will provide a complete array of supports and services for seniors. We will explore Nurse Practitioner-led clinics and the lack of primary care providers in the area between Greely and Metcalfe. We will work with Hunt Club/Riverside Community Services Centre to support them as they build operation and governance structures. And, we will continue to focus on quality improvement initiatives and seek opportunities to expand our range of services to meet the needs of individuals, families and neighbourhoods because here, at our Centre, **Every One Matters.**

Wayne Kauk, President

Leslie McDiarmid, Executive Director



2009–10 Board of Directors



Community Health Day at Elmvale Mall

CLIENT STORIES

**Names have been changed when requested*

Anjola

“Anjola” is a 31-year-old mother. When she was in her twenties she left a loving family in Nigeria, hoping to find work and a sustainable income in Southern Europe. There, she endured a violent and traumatic kidnapping. She survived ongoing abuse at the hands of her captors. Despite her disconnection from a support system, she survived and escaped. She fled to Canada and sought asylum in Montreal in the winter of 2009.

At the suggestion of the Reception House staff in Montreal, she traveled by Greyhound bus to Ottawa and sought refuge in a women’s shelter downtown. During her stay in the shelter, she gave birth to her first child, “Nathan”. After some time, she was able to settle in her first home in Canada, a small apartment in the South-East Ottawa community.

With a referral from her public health nurse, Anjola connected with our Centre’s Health Services team, Breastfeeding Drop-In, and Social Services team. As a new mother, she made links with as many parent support and early years programs as were available to her. Her focus always on her child’s well-being, she got to know our Centre and the providers and staff within.

Over time, as trusting relationships grew with SEOCHC staff, Anjola became more open to seeking out support for herself. She took the courageous step of disclosing the frightening and dehumanizing

experiences she endured. She spoke about her hopes to remain safely in Canada and create new systems of support for herself and her son.

Anjola is now a regular visitor to our Play and Learn program, making connections with other parents and community members. She seeks every opportunity to attend learning events that will advance her skills and knowledge, participating recently in a Parent/Caregiver Training workshop. She has also begun healing work with a counselor.

Anjola is awaiting a decision on her refugee claim and hopes for the opportunity to rebuild a life for herself and Nathan in this community. She regularly calls the South-East Ottawa Community Health Centre her “home”.

Addison

“Addison” is a regular student of the ESL program at a local Community House. She came to Canada several years ago from Africa with hopes and dreams for a better future. Being a single parent of three young children with limited English skills, Addison finds it challenging to find full-time work. She is currently receiving financial assistance from Ontario Works. She believes by improving her English she will have more opportunities to work in the human services field. Addison is fluent in French and Swahili and would like to be an interpreter for newcomers.

It was through a Housing Outreach presentation that Addison discovered SEOCHC could provide help with her housing challenges. Not only did Addison have issues with repairs and maintenance she was also at high risk for eviction. She had received a “Form N4”, a *Notice to End a Tenancy Early for Non-payment of Rent*, but did not understand the Notice because it was only in English.



Display at Elmvale Acres

After the presentation, Addison approached our Housing Outreach Worker, who explained that the Notice indicated that her rent had increased due to a change in her household income. Although her rent was arranged to be paid directly from Ontario Works (OW), the adjustment for the increase in rent was not made, causing Addison to unknowingly be in rental arrears. At Addison's request, the Housing Worker advocated with OW to make the financial adjustment and with Ottawa Housing to delay the eviction process while the OW financial correction was being made. Ottawa Housing agreed not to file an application with the Landlord and Tenant Board, thereby saving Addison the \$170 filing charge, and ceased the advancement of the eviction process.

Addison plans to learn more about her housing rights. From now on, she intends to advocate on her own behalf to have repairs and maintenance done on her home.

Dieudonné

"Dieudonné", originally from the Congo, arrived in Canada with his wife and 4 children after 15 years in a refugee camp in Kenya. While waiting in the refugee camp he dreamed of finding a safe place to live and a better life for his children. He feels that his experience with South-East Ottawa Community Health Centre (SEOCHC) has helped him provide that to his family.

In 2008, Dieudonné was referred to SEOCHC by Reception House for basic primary health care. He soon became aware of the many other programs and services we offer at the centre. An internal referral linked this family to our Community Developer who identified a variety of other areas we could assist with. Dieudonné and his family truly appreciate the willingness of our staff to go the extra distance and help out beyond what is in their job descriptions.

An e-mail was sent out to all staff requesting household items to assist this family. Contributions through the staff enabled them to set up their house and start building a life in Canada. Both Dieudonné and his wife have had schooling and are currently working as Personal Support Workers. They have had another child since their arrival who has been receiving primary care at our centre since birth. Through our internal and external referrals this family has been able to access school supplies, support through the holidays, transportation and the Winter Warmth program.

In closing our conversation about his family's story, Dieudonné asked me to share this. "SEOCHC is like the mother ship. They help us, advise us and send us in the right direction and we appreciate it."



South-East Ottawa Green Team

Margaret (in her daughter's words)

I first met Cathie Racicot, a staff member from the South-East Ottawa Community Health Centre in Nov. 2007. My mother, "Margaret", was very ill at the time, and I had no idea how to provide the help she needed. Margaret lives in Ottawa, I live in Chicago, and my brother, David, lives in France. There was no other family around.

The two most memorable and distinguishing elements of my first meeting with Cathie were her attentive interest and her kindness. I felt as if I had stepped into a ray of sunshine. I was struggling to understand the ins and outs of the Canadian healthcare system, deal with a mother who refused hospitalization for a very serious UTI and kidney infection, and somehow put a network of support in place for her.

Cathie first found us a cleaning lady—a sweet, gentle Indian woman who was not only able to clean, but more importantly, could reach out in friendship and kindness to our mother. Cathie had been quick to understand exactly what our needs were. Margaret recovered from those health issues and was able to live independently for a while, but about a year later she started to decline again. A series of mini-strokes over the course of several years was slowly compromising her cognitive abilities. However, she refused to move out of her home or acknowledge the decline.

I called Cathie again. "Help! What do I do?" Cathie's calm support and matter-of-fact solutions were so helpful. She introduced me to a team of people within SEOCHC who have been a godsend, because their support has allowed our mother to live independently much longer than would otherwise have been the case. Marian, Stephanie, and Patti have together created a network of support for Margaret. They have provided weekly nursing care, cleaning help, and periodic check-ins. Most importantly, they have been extremely effective at communicating with David and me, largely through e-mail but also by phone. They alert us to anything we should know, and we do the same.

All who are involved have recognized Margaret's continuing cognitive decline and we are considering what the next steps need to be. Unfortunately neither of us can move Margaret to where we live, because we cannot obtain health insurance for her in our countries of residence. It is a challenging and heartbreaking situation, but without SEOCHC we would be like anonymous tadpoles swimming in a confusing and sometimes frightening sea of decisions.

What SEOCHC has given Margaret is the ability to live the last years of her life with dignity. Dignity doesn't just come from providing home care and support services. It comes from how those services are delivered. Everyone at SEOCHC has been kind, attentive, respectful, and thoughtful—to Margaret, and to David and me.



Tina, Breanna, and Lisa at Registration Desk



Annual General Meeting. October 1, 2009

SEOCHC is an invaluable asset to the community, not because of its list of programs and services but because of how those services are provided. David and I are deeply grateful for the support and assistance we have received from SEOCHC, and we hope its methodology can be duplicated. It is a model of one of the most important elements of Canada's social safety net.

Susan and Douglas

Imagine being a new immigrant to Canada, finding out you are pregnant and learning that the father of the child is not interested in participating in the care of this new life. While struggling to figure out how you are going to manage all on your own, you learn that you may have breast cancer. Without a support network, without the knowledge of available resources, many people would fall between the cracks and give up. But "Susan" was not one of these women. She learned about the Better Beginnings Better Futures (BBBF) program from a neighbour and arrived at the door asking for help. She was pregnant, alone and scared. Susan was assigned a family visitor—someone who would meet with her weekly, help her with pre-natal care, assist with navigating the health care system and support her through her child-bearing journey.

After her healthy little boy "Douglas" was born, the family visitor assisted the new mom with learning about the developmental stages and brought toys to encourage growth. But early on, it was clear that Douglas was not meeting his developmental milestones. He made little eye contact, seemed disengaged from his surroundings and was not talking at all. With the help of the BBBF staff, more referrals and assessments were made and at 20 months old, Douglas was diagnosed with autism. It could have been a devastating blow to a woman already facing serious health issues of her own, but with the support and guidance of the BBBF staff, Susan was able to face each day with hope and determination to provide the best start for her little boy.

Recently, 24-month-old Douglas came to visit the BBBF community house. With smiles, clapping and affection to others, Douglas has made great progress. Susan has recently learned that she does not have breast cancer. Despite devastating challenges, the resiliency, determination and passion of mothers continues to amaze all of us.



Community Health Day April 30, 2010



Community Celebration



Better Beginnings Better Futures
22–1485 Heatherington Rd.
www.betterbeginnings.ca

Tara

My name is Tara Bell. I have lived in the Heatherington community for about 14 years. I'm a single mum with two gorgeous boys, aged 15 and 5 years. I didn't have a lot of contact with the Better Beginnings House for the first few years I was in the community as I was busy studying and working. I was a single parent but I believed I was doing pretty well—had a fairly decent job and managed to get a good education. However 10 years after my first son was born, I found myself pregnant again at the age of almost 40. Things went downhill pretty fast. I knew it was going to be a major setback for me to start over with a baby and I was extremely hard on myself—especially when I thought about the future for my eldest boy who had no relationship whatsoever with his father.

While I was pregnant with my little guy, Linda, the Family Visitor Coordinator knocked on my door and invited me to Better Beginnings. She had an extremely kind and gentle disposition and I agreed. I went to the House and met with the lactation consultant, Sheena, and the Family Visitor, Mila, who was also a nurse. Both were very helpful. Initially Sheena helped me after I had my son as I attempted to nurse and I couldn't. If she hadn't been there, it never would have happened. She gave me the resources and encouragement that I had never had when I had my first son in the hospital. In fact, I had given up nursing with my first son, as a lot of women do.

Mila visited every week to check on my progress, answer or research any questions I had and provide emotional support. This continued after I had my baby and for the following 4–5 years. Those years were extremely difficult for me as I had many personal issues. I gave up my job because of the stress. My self esteem was very low. I had problems with the little one's father and I had financial problems. I was feeling extremely vulnerable.

Mila took notes on Luke's health and development and helped give me a sense of empowerment over my situation. Although the resources and materials provided to me were extremely important, it was the emotional and personal support I remember the most. All these things helped me get back on my feet.

Both Sheena and Mila asked if I would be interested in volunteering on the Better Beginnings Better Futures steering committee and I was excited to have the opportunity to give back a little bit. My eldest son has helped at the annual BBBF party which everyone in the community loves and enjoys. I recently participated in the SEOCHC fundraising auction, which was very interesting. I am also employed as a Home Support Worker through SEOCHC, which has been extremely satisfying.

I see Better Beginnings Better Futures as a means of bringing the community together, which is something you can't put a value on. People get to know one another through the Community House and become part of the family. They help each other, watch out for each other, and newcomers get a sense of identity. It's a resource that enables people to move forward with their lives.



Kids in the BBBF "hood"



BBBF Party June 2010

STRATEGIC GOALS

HIGHLIGHTS, 2009–2010

financial perspective

GOAL: *Secure and manage focused financial resources efficiently and effectively*

- >90% of submissions addressed core and/or identified priorities
- 86% of core/identified priority submissions were actually approved for funding
- \$6,422,573 received for core activities
- \$378,399 received for non-recurring projects
- \$10,842,124 received for midwifery services
- 18 different funding sources
- Balanced budget: year end surplus, 1.68%

employer of choice perspective

GOAL: *Become an Employer of Choice*

- 90% of performance appraisals up-to-date
- Diverse staff: 29% visible minority; 22 different languages; 24 different ethnic backgrounds
- 8 *Greening Initiatives* implemented by *Green Team* including policy development on green meetings and purchasing
- SEOCHC choir and on-site yoga classes subsidized by Centre
- Health and Fitness benefit provided to all employees
- Staff trained in non-violent communication (hero/victim/villain model), interested staff reps from each team received additional training



SEO Choir: Sisters in Song and a Brother

accountability perspective

GOAL: *Demonstrate Value and Impact*

- 100% of staff using standard data collection tools and following standard process for data collection, all tools approved
- Program evaluation completed and summarized for each program/department
- Pandemic plan deployed in mock experience twice
- In collaboration with Health Centres and other partners worked with Ottawa Public Health to mitigate the impact of the H1N1 virus—planned and implemented a Flu Assessment Centre off-site at Dempsey Community Centre

sustainability perspective

GOAL: *Help people help us to help others, and strategically position SEOCHC*

- Video highlighting SEOCHC programs and services completed
- 250 registered volunteers contributed approximately 14,933 hours
- 100% of volunteers rate the Centre as good to excellent in all domains (welcoming environment, respect, approachability, cooperation, appreciation, availability, meaningful work, training)
- \$174,853 received from donations, fees and fundraising
- Staff represent SEOCHC at 83 different coalitions/outside planning/networking bodies
- 37 student placements in 10 different disciplines provided over 2500 hours of experience (including 2 Dietitians, 2 foot care nurses, 19 child care workers, 5 medical secretaries, 1 physician, 3 social workers, 1 nurse practitioner, and 4 high school students)

client and community health perspective

GOAL: *Deliver quality services and programs that positively impact the determinants of health*

- Over 60 different services/groups provided, 23 different services/programs delivered off-site (1355 Bank Street) at 35 unique community-based locations
- Total number Direct Service Hours: 70,868; 17,230 service hours outside regular hours
- 98% of clients reported that “we provided [them] with the opportunity to improve [their] health”
- 90% of clients reported that they “received information about other programs and services at SEOCHC”
- 94% of clients reported that “we provided [them] with the opportunity to give input into their service or health care plan”
- 97% of clients reported that it was “easy to access our programs” (location, hours, etc.)
- 98% of clients reported increased social networking/peer support
- 99% of clients reported that they were “satisfied with [our] program or service”
- 100% of BBBF parents reported that “the family visitor helped improve parenting skills”
- 97% of BBBF parents reported that family visiting had “improved their child’s healthy development”
- 94% of parents/caregivers reported BBBF Playgroup helped them improve their parenting/caregiving giving skills
- 92% of parents attending Early Years programming reported they developed closer relationships with members of their community
- 9.3% increase in midwifery Courses of Care
- Health: 2,910 unique clients seen by Primary Care providers, 22,383 face-to-face visits and 7,258 by telephone
- Breastfeeding drop-in: 350 women and their babies supported via 1,065 encounters
- 100% of parents attending the breastfeeding drop-in increased their confidence and ability to feed their baby
- 100% of Early Years participants attending nutrition workshops reported they increased their knowledge of nutrition and low cost healthy eating
- Settlement support: 1,560 clients received 5,280 services.
- BBBF Playgroup: attended by 491 different children—9,099 contacts with children and 3,634 contacts with adults
- Housing Supports: 313 new cases and 128 ongoing cases (total 441) assisted with housing loss prevention
- Employment Support—181 clients attended 40 employment workshops, 60 participants attended 3 employer presentations, 58 participants attended 10 networking sessions
- 1,143 clients assisted with a variety of practical support programs (e.g. *Campership, Christmas Exchange, Winter Warmth*, etc.)
- 972 crisis calls managed and 520 walk-in appointments to Intake Walk-In
- 2,440 Community Support clients received 17,618 services; 348 caregivers received information and support in groups or individually
- 308 clients attended social services groups; 74 sessions, 1,028 encounters

SOUTH-EAST OTTAWA COMMUNITY SERVICES STATEMENT OF FINANCIAL POSITION

	March 31, 2010	March 31, 2009
ASSETS		
CURRENT ASSETS		
Cash and cash equivalents	\$ 4,478,373	\$ 2,673,021
Accounts receivable	309,950	160,798
Prepaid expenses	374,583	382,829
	5,162,906	3,216,648
CAPITAL ASSETS	266,738	355,736
	5,429,644	3,572,384
LIABILITIES AND FUND BALANCES		
CURRENT LIABILITIES		
Accounts Payable and Accrued Liabilities	673,030	526,868
Repayable to governments	2,511,023	1,284,343
Deferred Revenue	834,709	388,855
	4,018,762	2,200,066
DEFERRED CAPITAL GRANTS	266,738	355,736
FUND BALANCES		
Appropriated	430,000	400,000
General	714,144	616,582
	1,144,144	1,016,582
	5,429,644	3,572,384

SOUTH-EAST OTTAWA COMMUNITY SERVICES STATEMENT OF OPERATIONS

	March 31, 2010	March 31, 2009
REVENUES		
GRANTS		
Ontario	\$ 15,912,204	\$ 12,519,518
Municipal	851,372	737,593
Federal	42,931	246,133
Other	506,455	277,745
Donations and Fundraising	174,853	175,419
Interest Revenue	21,821	85,118
Amortization of deferred grants	123,484	204,770
Miscellaneous Revenue	9,976	27,049
	17,643,096	14,273,345
EXPENSES		
Salaries and Benefits	4,618,636	4,329,068
Materials, Supplies and Services	11,094,036	9,478,954
Non-recurring	96,988	89,688
Amortization of capital assets	123,484	204,770
	15,933,144	14,102,480
NET REVENUE BEFORE ITEMS BELOW	1,709,952	170,865
Transfer (to) from deferred revenue	8,891	
Amount repayable to governments	(1,595,673)	(70,745)
NET REVENUE	123,170	100,120

SOURCES OF FUNDS AND PROGRAM AND SERVICE EXPENDITURES 2009–2010

FUNDING SOURCES, 2009–2010

Ministry of Health and Long-Term Care	\$ 10,837,312	61.43%
Champlain Local Health Integration Network	4,487,161	25.43%
Ministry of Community and Social Services	587,731	3.33%
City of Ottawa	851,372	4.83%
Government of Canada	42,931	0.24%
United Way	136,987	0.78%
Non-Government Grants	369,468	2.09%
Fund Raising and Other	330,134	1.87%
	17,643,096	100.00%

PROGRAMS AND SERVICES, 2009–2010

Health Services	4,221,143	26.49%
Midwifery Program	9,255,342	58.09%
Better Beginnings	609,479	3.83%
Community Support Services	523,827	3.29%
Community and Social Services	1,041,086	6.53%
Administration	282,267	1.77%
	15,933,144	100.00%

