



Sandy Hill
Community Health Centre

Centre de santé
communautaire Côte-de-Sable

40 Years
Ans

Every One Matters.

Chaque personne compte.

A tradition of excellence,
a legacy of caring
1975 - 2015



Report to the community 2014-2015

221 Nelson Street • Ottawa (ON) • K1N 1C7
613.789.1500 • www.shchc.ca

Board of Directors

Anthony Pizarro	- Board President
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Michele Demers	- Staff Representative
Wendy Hyndman	- Staff Representative

^(R) - Resigned

We are proud to be part of the Coalition of
Community Health and Resource Centres of Ottawa.



Management Team

David Gibson	• Executive Director
Rob Boyd	• Director of Oasis Program
Patricia Eakins	• Director of Finance
Matthew Garrison	• Director of Administration, Human Resources and Information Technology • Acting Executive Director (March - June 2015)
Nancy Knudsen	• Director of Health Services, Health Promotion and Chronic Disease Management
Allison Lampi	• Director of Planning and Evaluation
Robin McAndrew	• Director of Client Access and Director of Addictions and Mental Health Services • Associate Executive Director (March - June 2015)

Our vision

Every one in our community will have an equitable opportunity for health and wellbeing.

Our mission

To lead and innovate in person-centred primary health care and community wellbeing.

Our values

Integrity • Respect • Equity • Collaboration • Empathy

Editors:
David Gibson
Matthew Garrison
Patricia Eakins
Allison Lampi
Design:
Cristina Coiciu

Celebrating forty years

*A*s the milestone of forty years in operation approaches, the Sandy Hill Community Health Centre (SHCHC) will take an uncharacteristic pause and glance nostalgically in the rear-view mirror for a moment, maybe two. In this time of reflection, we will recall a rich history, important milestones worthy of celebrating and links to our community that are a source of great pride and celebration. We will ponder how our association with the Sandy Hill Community Health Centre has impacted our lives and made us healthier, more compassionate and community-minded people.

Humble beginnings

The earliest pages of SHCHC's history saw a fledgling community-based group called the Sandy Hill Community Development Corporation (SHCDC) that wanted to address key needs in their community including low-income housing, social services, daycare and health services, and were prepared to work tirelessly to succeed.



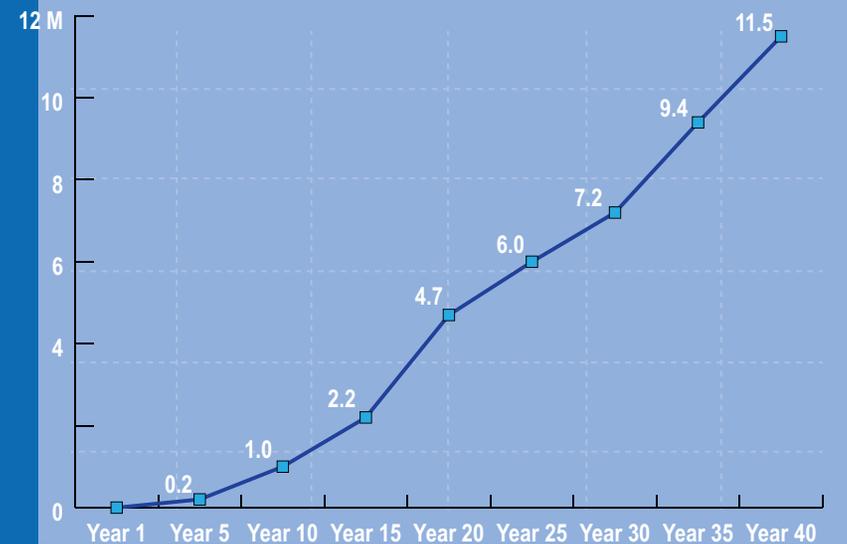
With a small provincial government grant, SHCDC conducted a survey in Sandy Hill in late 1973 and early 1974 to find out what the most important needs of their community were. The results indicated that, among other things, a staggering 24% of residents were without a family doctor. With this information, SHCDC advocated strongly for a much needed neighbourhood centre for health, social and community services.

With unbridled determination and the support of the community behind them, they forged ahead and, by June 1975, the Ontario Ministry of Health provided funding so that Sandy Hill residents would get the much needed services they desired. As a result, The Sandy Hill Health Centre was born! In 1988, the Sandy Hill Community Development Corporation was renamed the Sandy Hill Community Health Centre Inc., our name today.

Board of Directors

From day one, the Centre has been carefully governed by a community-based Board of Directors. Our first and founding president, George Wilkes, was an able, dedicated and energetic contributor. He proved to be an excellent choice, as he remained in the role

Annual funding



of president until he left the organization, in 1982. He is still a strong supporter and friend of the Centre today.

No matter its membership, the Board has always been effective at promoting and implementing a vision of health care that integrates medical services with a wide range of health promotion and illness prevention programs. Community engagement, involvement and development have been integral to success in these programs.

In the early days, when resources were often in short supply, one could easily find board members with their sleeves rolled up, moving furniture, cleaning floors and doing whatever needed to be done to make sure the Centre was successful and met the needs of the community.

That mindset is still alive and well as our Board continues to champion the client-centred approach to developing services, and demonstrates an unwavering commitment to empower our community to take charge of their health, using the social determinants of health as the compass that leads the organization's direction.

Staff and leadership

Our staff has always been a vital element of SHCHC's rich history and success. As the Centre has grown, so have the number of employees and the areas of expertise and skill they bring with them. Forty years ago, the Centre opened with four staff members including two physicians, a nurse and a receptionist. Since then, the Centre has been home to over one thousand employees who have, each in their own unique way, made a difference in the lives of our clients.

The Centre has also benefitted from strong operational leadership. It is often said that out of adversity comes opportunity, and this has been especially true for the Centre when it came to the history of the office of Executive Director.

In 1979, both Centre's physicians resigned and were followed by the nurse and receptionist, with the coordinator leaving soon after. With the Centre in crisis, the Board boldly hired an energetic young woman, Dennise Albrecht, to lead the Centre to greener pastures. Her vision, passion and dedication yielded immediate success and became pivotal in the development of the Centre.

Her enthusiasm, respect for all and willingness to take chances created a culture of success that transformed SHCHC into one of the leading CHCs in the province.

Her departure for the Children's Hospital of Eastern Ontario in 1997 left a significant void that the Centre was very fortunate to fill with another inspirational and visionary leader in Susan McMurray, a former Board President and Program Director. Sadly, Sue's tenure was far too short and after two years, she was forced to step down for health reasons. Her passing the following year marked one of the sadder times the Centre has known.

In 2003, the Centre once again was fortunate to find a strong, visionary leader, David Gibson, who provided stability and moved the Centre forward in a clear and positive direction. Since then, he has led SHCHC by working closely with our Board to position our Centre as a leader in primary health care in Ottawa and the province of Ontario.

So much has changed... What's stayed the same?

In contemplating all the changes over forty years, we can only wonder if our Centre even faintly resembles the grassroots agency from those heady days of the 70s. So much has changed - has any of the fabric from those days remained?

The answer is a resounding "yes"!

Through all the moving, shaking, shifting and changing, SHCHC has been able to maintain many of the elements that were so important so many

years ago. Our clients and community are the focus of everything we do. Our Board is still community-minded, diverse and stronger than ever. Our staff is as caring, dedicated and professional as those who came before them. In fact, some have been with us for more than thirty years!

The current government has been clear that CHCs are an excellent model to address the primary care needs of Ontarians. In large part, this is because we are able to provide services that complement primary care and leverage our expertise in community programs and health promotion. We have proven to be a valuable partner, and have excellent relationships with a wide breadth of health and social service agencies across the region. When it opened, SHCHC was one of ten Community Health Centres in Ontario. It is now one of seventy-five in the province.

To borrow from a famous Albert Einstein quote: "*Learn from yesterday, live for today, hope for tomorrow.*" The lessons and experience we have gleaned from our first forty years will undoubtedly provide us with the energy and hope necessary to propel us forward to work toward a healthier community for another forty years and beyond.

Anthony Pizarro, Board President
Matthew Garrison, contributing writer

Forty years of compassionate health care

Sandy Hill CHC has grown over forty years, but the focus on compassionate, community-centred care has remained the same, according to long time employees Usha Kappagantula and Lorne Parent.

Starting her work with the organization when it was a small clinic on Somerset Street, Usha says her first patient taught her about the trust placed in Sandy Hill CHC staff. When Usha asked her client about his profession, he told her he was a thief. Usha was amazed at her patient's honesty, saying he "came across as very vulnerable yet at the same time very human". She says this interaction laid a foundation for her work at the Centre.

Usha describes the rich diversity of clients she has seen in her practice, from prominent local figures to a tiny baby who travelled across the ocean and lost its mother along the way. Usha says, "It teaches you a lot. It teaches you that happiness and suffering are universal."

One of only eight staff members when he started his position, Lorne says that Sandy Hill CHC has been deeply involved in the community from the beginning. From Saturday Fun Runs to a Seniors Muffin Baking Contest judged by former Executive Director Dennise Albrecht and Lorne as Julia Child, Lorne highlights the way the Centre has created a fun, interdisciplinary practice that provides good, integrated medical and social care. Lorne says, "There was a great camaraderie - a feeling that you're pulling together. The whole point is improving health in the community."

Usha agrees that the core values of Sandy Hill CHC have remained the same over the years: "We've come a long way... in terms of research, advocacy and services. The core philosophy of caring, sharing, and trust is still there."

by Nancy Knudsen, Director of Health Services,
Health Promotion and
Chronic Disease Management

"I feel very fortunate to have access to health services at Sandy Hill CHC. I have been coming here for 19 years. Everyone is very helpful and friendly. We are very happy. Excellent primary care!"

- Client



No wrong door

“ I have been a client since 1984 and the clinic has been a wonderful community resource. It is a model for other community clinics. I appreciate the support I have received for myself and for my son who was always welcomed back by his counsellors. ”

- Client



The Client Access Team (CAT) is a relatively new team at the Centre and is comprised of Central Reception, Client Access/Intake Workers, Practical Assistance Workers and Administrative Assistants. Created in 2008 as a first point of contact for clients coming into the centre, CAT has evolved through various configurations to continuously respond to clients' needs demonstrating flexibility and innovation through its various programs.

The Client Access Team was created in part to advance the objectives of the Centre's Strategic directions that were set to respond to emerging community needs in addictions, mental health and other social determinants of health and evidence-based best practices in these areas of service.

Prior to 2008, mental health counselling clients were assessed separately from addictions counselling clients. Intakes for addictions counselling were typically done in a group setting and social services were provided as part of mental health services. Recognizing the need for a Concurrent Disorders approach to intake and treatment, CAT adapted its process in 2010 to provide individual intakes for both mental health and addictions and referrals to Addiction and Mental Health Services. These changes have created a more comprehensive and connecting process to better serve clients.

The Client Access Team offers a wide variety of services that address social factors that impact health. As food insecurity emerged as a struggle for our community, our emergency food cupboard

was established to assist our clients in 2007, in partnership with the Ottawa Food Bank. What was once two shelves worth of canned goods as part of the social services team has since grown into a full pantry of food, serving an average of 56 individuals and families per month through the Social Services Walk-in. Other primary CAT services are support to those in emotional crisis through our Social Service Walk-in and assistance to clients in need of help to apply for their Health Cards and personal ID through our Practical Assistance office.

CAT is the first point of contact for clients coming into the centre at Central Reception and embodies the “no wrong door” approach. The team strives to provide client-centred, accessible, and coordinated services that take into account all of the services a client may need. The spirit of CAT is to welcome all walks of life and its strength lies in its ability to continuously evolve with the needs of the community.

by Robin McAndrew, Director of Client Access Team and Addictions and Mental Health Services



Empowering people to improve their lives

Sandy Hill Community Health Centre has a rich history of increasing opportunities for equity and access to services through inclusive, innovative and community-based approaches. Community development, which builds on community leadership, exchanged knowledge, partnerships, as well as the lived experiences of residents to contribute to the health of their communities, continues to be a key pillar of the work of SHCHC. What may be a lesser known reality of doing community development is the absolute joy and satisfaction of participating in this work.

As Community Developers, we have not only the responsibility but also the pleasure and honour of working in partnership with residents in Sandy Hill and Old Ottawa East to create spaces where members of the community can identify common goals, mobilize resources, leverage partnerships and develop and implement strategies to reach those goals. Community development is the work of visioning, dreaming of what can be and then working with what is - the strengths, skills and



resources that exist in our communities along with opportunities to build further capacity.

Our work in community development is most often inspirational. We have the privilege of working with individuals and groups from across our communities who are compelled to volunteer their time, creativity and skills, collaborating to make their communities and their collective lives better. By the nature of our work, where we provide support and partnership to a number of groups on a daily basis, we have the opportunity to appreciate the broad scope of community work that is happening across our catchment - work where neighbours collaborate to improve their communities for themselves and their families, the broader community and future generations.

As Community Developers we support an incredible amount of community-driven innovation and initiatives that demonstrate the extent of goodness and commitment that is so present across our communities. We bear witness to amazing creativity, motivation and generosity such as neighbours volunteering to enhance the current environment, residents engaging in advocacy with elected representatives and key decision-makers, community members working together to plan and create special events, and organizational and business partners strategizing on how to leverage our resources.

All of this to say that the work can be challenging and at times difficult. Working across our diverse perspectives, experiences and positions to reach common understandings, goals and strategies is at the heart of this work, and this can present incredible opportunities for enrichment. When we are able to work together through collaboration, inclusion and engagement there is much joy, inspiration and meaningful change to be harvested and shared. As employees, we feel true gratitude in having the opportunity to participate in this inspirational work.

by Geri Blinick, Community Developer



Transforming lives, one day at a time

The Addiction and Mental Health team has seen many changes since its inception, in 1988. Since this time, the team has changed locations, undergone name changes, increased staffing and greatly expanded client services. Some of the most significant changes, however, have been changing societal attitudes towards the work we do.

Bob Polak, a counsellor with the team for 27 years, recalls a time when Sandy Hill CHC was one of the only agencies offering a harm reduction approach: “some people were reluctant to refer

to us because we weren't an abstinence-based agency. At the time, it was the common belief that the best path to addictions recovery was through 12-step abstinence-based models and that other approaches to recovery were inferior.”

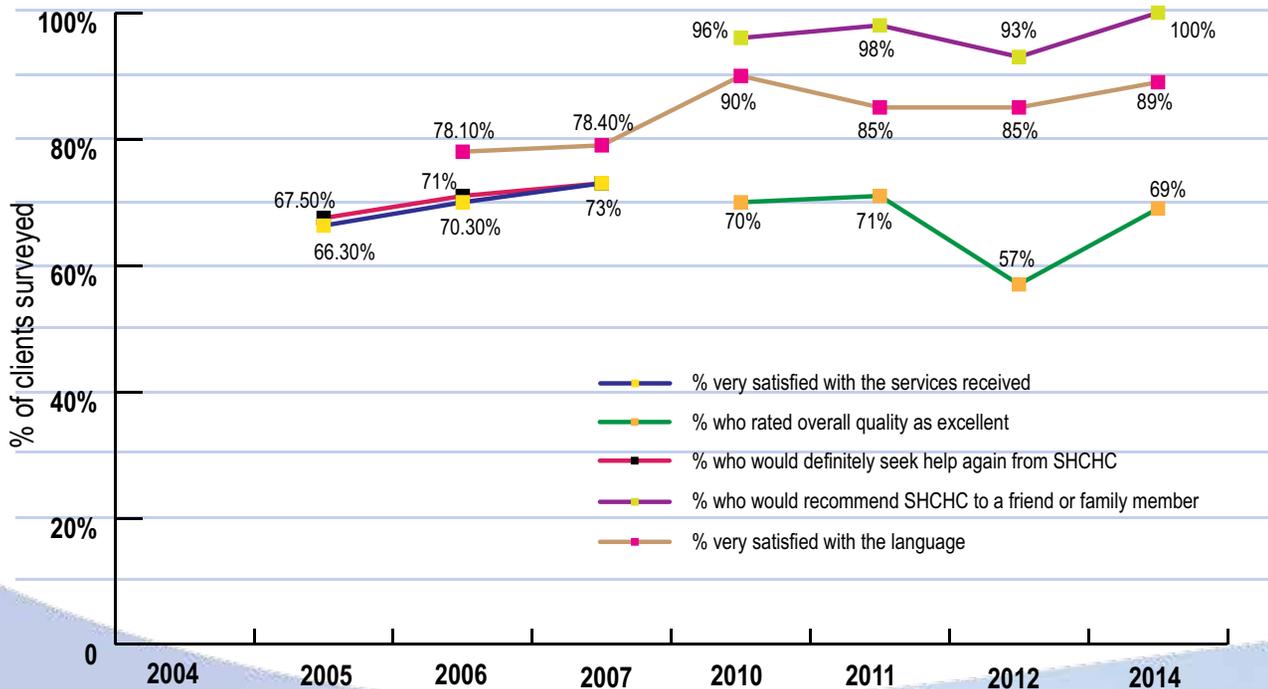
Since this time, many addictions agencies have adopted harm reduction approaches. The term ‘harm reduction’ has also been part of wider community discussions with regards to services such as needle exchanges and supervised injection sites. While these are great examples of harm reduction services, it's important to remember

that harm reduction has a much wider application that impacts all of the work we do with clients. In counselling services, this is reflected in our destigmatizing of substance use and mental health concerns, our respect for client's self-efficacy in determining their own goals, our discussions on how to reduce the consequences of unhealthy behaviors, and celebrating success throughout every step of the change process.

The Addiction and Mental Health team is proud to have offered harm reduction services from the beginning and encouraged by changing societal attitudes. Offering and expanding our harm reduction services at SHCHC has never been about making a political statement, but rather comes from our ongoing commitment to excellent client care.

by Brittany Morris, Counsellor and Clinical Administrator, Addiction and Mental Health Services

Client experience



“I went from extremely depressed to well on my way to being healthy. Kind, excellent, great people, with knowledge to make a difference. Plus services that are financially accessible. Amazing work!”

- Client

Trusted, compassionate care

Imagine that you never really felt like you belonged anywhere. Imagine that everywhere you went you thought people were looking down on you, judging you. Imagine that you reach out to people around you for help but they turn you away and blame you for your poor health. Imagine feeling isolated, disconnected, rejected. Imagine despair.

Now imagine going to a place where people care about you unconditionally. Imagine not feeling ashamed of yourself. Imagine you do not have to worry about being judged, possibly for the first time in your life. Imagine being around people who are like you and understand the unspoken pain. Imagine being around health care providers who never give up on you, never blame you, but do encourage any positive change you make. Imagine feeling included, connected, accepted. Imagine hope.

Established in 1996, the Oasis Program of the Sandy Hill Community Health Centre has become one of the largest and most comprehensive health care interventions for people with complex substance use disorders in Canada.

Oasis emerged as a response to the barriers people who use drugs experienced when accessing traditional medical and social services, primarily due to the stigma associated with their problematic use of illegal drugs. Over the years, Oasis has developed and grown in its response to the emerging needs of marginalized people who use drugs in Ottawa.

Whether the need is to get safer injecting and smoking equipment, specialized addictions medicine, getting involved in advocating on issues that impact their health, accessing primary health care and HIV and hepatitis C treatment, individual

or group counseling, case management or intensive support, the Oasis program is designed to match people's needs no matter where they are in the change process.

As a program that is responsive to ever changing community needs in a politically charged field of work, it is difficult to say what is in Oasis' future. There is no road map, only possibilities on the horizon - supervised injection, stimulant substitution treatment, heroin assisted therapy, low threshold employment as well as upstreaming the work we do through drug policy reform.

Our pragmatic approach to the challenges faced by the difficulty of change is buoyed by our constant hope for optimal recovery and health for everyone with whom we work.

by Rob Boyd, Director of Oasis Program

Overall utilization data (does not include Intensive Case Management (ICM), AIDS Bureau Programs, community engagement/development)

	2014-15	2013-14
Number of active clients	10,608	11,030
Number of face-to-face visits with clients	40,573	28,601
Number of client and community member attendances to personal development group programs	9,277	7,685
Number of people seen for Addictions and Problem Gambling counselling or case management	1,532	1,028
Number of people seen in Primary Care services	4,550	3,887
Number of people seen for visits related to chronic disease prevention and management	684	501

“Here, at Oasis, you are treated like a human being and not a statistic. People here are not about a pay cheque and are very supportive!”

- Client

Spreading awareness, because it matters

Client health promotion has been an integral part of the Sandy Hill Community Health Centre since its inception. "Underlying all services and programs at SHCHC is the strong philosophy of helping clients take charge of their own health and their own community, and act to their own benefit. Creative social and health action are the foundation of this health centre." - Susan MacMurray, SHCHC Health Planner, 1990.

Community Health Centres have always acknowledged the critical role of health promotion in improving the health of the population they served.

Since 1975, the Sandy Hill CHC has worked with clients to nurture and maintain the best possible health of individuals, families and the community. Over the years, the comprehensive range of health services at SHCHC has included many types of individual and group health promotion activities. These have included Community Health Fairs, Seniors Exercise Groups, Smoking Cessation Support, Healthy Eating and Cooking, Chronic Disease Self Management Programs and Health Coaching on a variety of issues. Staff has also participated in numerous provincial health promotion initiatives.

As part of the centre's continuing commitment to health promotion, we established our Health Promotion and Chronic Disease Management (HPCDM) team in 2008. This brought together in one team our Physical Activity Specialist, Health

and Wellness Coach, Dietician and Nurse Health Promoter. Along with an Administrative Assistant and Team Leader, the HPCDM team works with clients, colleagues and community partners to design and deliver client-centred health promotion activities. While health promotion is the focus of our team, health promotion principles are ingrained in the work of all SHCHC staff as reflected in the Association of Ontario Health Centres' Model of Health and Wellbeing.

by Julie Tessier, Team Leader/Health and Wellness Coach, Health Promotion and Chronic Disease Management

"I wish that more people could benefit from the kind of services and programs Sandy Hill CHC has to offer. For health issues, I am very lucky to be here and get the services I do. Keep it up - SHCHC is a model!"

- Client



"I am very happy that Sandy Hill CHC is here, because it is strongly needed, especially in this area!"

- Client

2014-2015 Financial Report

Report of the independent auditor on the Summary Financial Statements

To the members of Sandy Hill Community Health Centre, Inc./Centre de santé communautaire Côte-de-Sable, Inc.

The accompanying summary financial statements, which comprise the summary statement of financial position as at March 31, 2015, and the summary statement of operations for the year then ended and the related note, are derived from the complete audited financial statements of Sandy Hill Community Health Centre, Inc./Centre de santé communautaire Côte-de-Sable, Inc. for the year ended March 31, 2015. We expressed an unmodified audit opinion on those financial statements in our report dated June 17, 2015.

The summary financial statements do not contain all the disclosures required by Canadian accounting standards for not-for-profit organizations. Reading the summary financial statements, therefore, is not a substitute for reading the complete audited financial statements of Sandy Hill Community Health Centre, Inc./Centre de santé communautaire Côte-de-Sable, Inc.

Management's responsibility for the Summary Financial Statements

Management is responsible for the preparation of a summary of the audited financial statements on the basis described in Note 1 to the summarized financial statements.

Auditor's responsibility

Our responsibility is to express an opinion on the summary financial statements based on our procedures, which were conducted in accordance with Canadian Auditing Standard (CAS) 810, "Engagements to Report on Summary Financial Statements."

Opinion

In our opinion, the summarized financial statements derived from the complete audited financial statements of Sandy Hill Community Health Centre, Inc./Centre de santé communautaire Côte-de-Sable, Inc. for the year ended March 31, 2015, are a fair summary of those financial statements, on the basis described in Note 1 to the summary financial statements.

Welch LLP
Chartered Professional Accountants
Licensed Public Accountants
Ottawa, Ontario
June 17, 2015

Note to the Summarized Financial Statements for the year ended March 31, 2015

1. Basis of preparation

These summarized financial statements are derived from the complete annual audited financial statements of Sandy Hill Community Health Centre, Inc./Centre de santé communautaire Côte-de-Sable, Inc. for the year ended March 31, 2015. The complete annual audited financial statements are prepared in conformity with Canadian accounting standards for not-for-profit organizations.

A copy of the complete audited financial statements is kept on file at Sandy Hill Community Health Centre, Inc./Centre de santé communautaire Côte-de-Sable, Inc. and will be provided upon request.

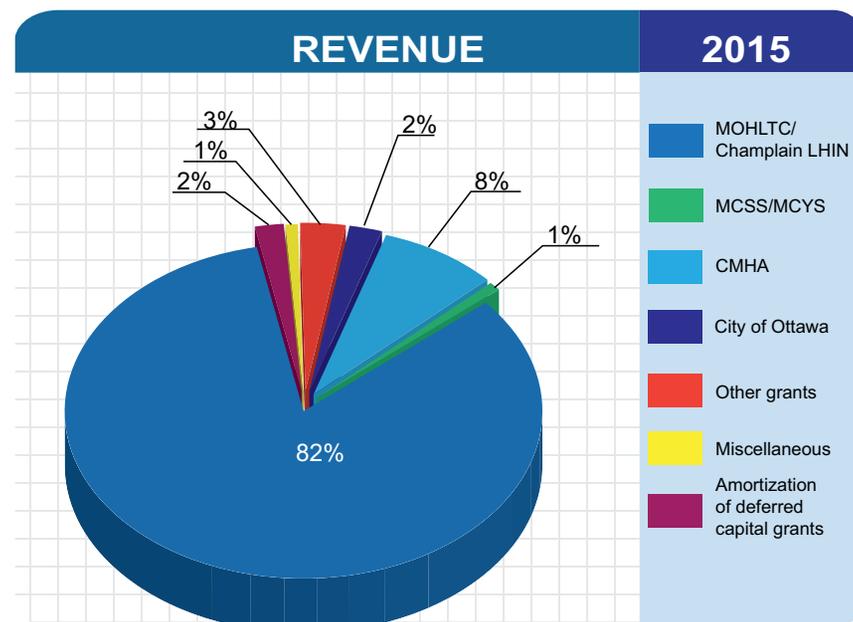
The criteria applied by management in preparing these financial statements is outlined in the paragraph below.

The figures presented in these summarized financial statements agree with or can be recalculated from the figures presented in the complete audited financial statements. Management believes that the summarized financial statements contain the necessary information and are at an appropriate level of aggregation so as not to be misleading to the users.

Summary Statement of Operations

Year ended March 31, 2015

REVENUE	2015	2014
Ministry of Health and Long-Term Care / Champlain Local Health Integration Network	\$ 9,456,670	\$ 9,140,572
Ministry of Community and Social Services / Ministry of Children and Youth Services	71,144	71,144
Canadian Mental Health Association	967,943	971,888
City of Ottawa	287,086	210,974
Other grants	399,584	279,334
Miscellaneous	111,458	109,972
Amortization of deferred capital grants	216,264	251,600
Total revenues	11,510,149	11,035,484
EXPENSES		
Salaries and benefits	9,285,163	8,958,730
Program related expenses	942,552	827,278
General and administrative expenses	839,330	870,607
Non-recurring expenses	141,265	103,360
Amortization	216,264	251,600
Total expenses	11,424,574	11,011,575
Net revenue before items below	85,575	23,909
Repayable to funders	(43,650)	(20,599)
Transferred to deferred revenue	(36,786)	0
Net revenue	\$ 5,139	\$ 3,310



For complete details, please refer to the audited financial statements and notes available from the Centre.

Summary Statement of Financial Position

Year ended March 31, 2015

	2015	2014
ASSETS		
Current Assets		
Cash	\$ 582,170	\$ 878,717
Grants and other amounts receivable	227,586	232,580
Prepaid expenses	105,994	86,398
	<u>915,750</u>	<u>1,197,695</u>
Capital Assets	<u>3,330,034</u>	<u>3,535,491</u>
	<u>\$ 4,245,784</u>	<u>\$ 4,733,186</u>

	2015	2014
LIABILITIES AND NET ASSETS		
Current Liabilities		
Accounts payable and accrued liabilities	\$ 462,952	\$ 727,526
Repayable to funders	51,206	58,176
Deferred revenue	130,535	146,075
	<u>644,693</u>	<u>931,777</u>
Deferred Contributions related to Capital Assets	<u>2,393,534</u>	<u>2,598,991</u>
	<u>3,038,227</u>	<u>3,530,768</u>
Net Assets		
Unrestricted funds	264,252	259,113
Restricted funds	6,805	6,805
Invested in capital assets	936,500	936,500
	<u>1,207,557</u>	<u>1,202,418</u>
	<u>\$ 4,245,784</u>	<u>\$ 4,733,186</u>

*We would like to gratefully
acknowledge the continuous
support of our funders, community
partners and private donors.*

40 years of SHCHC history / 40 ans d'histoire du CSCCS

Date of incorporation of the Sandy Hill Community Development Corporation (SHCDC): May 28, 1973. / La date d'incorporation du Sandy Hill Community Development Corporation, le 28 mai 1973.

With funding from Ontario Ministry of Health, Sandy Hill Health Centre opens its doors at 278 Friel offering bilingual primary health care services with two physicians, a nurse and a secretary/receptionist.

Hiring of first Centre Coordinator, Dennise Albrecht. Move to new location at 250 Somerset Street East; began to work towards a multi-service model, emphasizing health education and promotion activities. / Recrutement de la première coordonnatrice du Centre, Dennise Albrecht. Déménagement au 250, rue Somerset Est; début des travaux sur un modèle de services multiples, axé sur des activités d'éducation et de promotion de la santé.

Establishes the Senior's Information Centre; receives approval from the Regional Social Services Department to become a Community Service Centre. Begins a partnership with the Addiction Research Foundation to develop an addiction and assessment referral service funded by the Ontario Ministry of Health.

Major provincial investment for CHCs, bringing them into the mainstream. The principle of democratic participation, always practised at the Centre, was formally adopted as a specific policy within the Centre and between SHCHC and the broader community. The Centre's corporate name changed from the Sandy Hill Community Development Corporation to the Sandy Hill Community Health Centre, Inc. / Investissement provincial majeur pour les CSC, afin de les intégrer aux services habituels. Le principe de participation démocratique, toujours appliqué au Centre, a été formellement adopté comme politique spécifique au sein du Centre, ainsi qu'entre le CSCCS et l'ensemble de la collectivité. Le nom du Centre passe de Sandy Hill Community Development Corporation à Centre de santé communautaire Côte-de-Sable Inc.

Centre receives charitable status. It expands and opens a "walk-in" clinic. Moved to temporary location at 24 Selkirk Street in Vanier. / Le Centre reçoit le statut d'organisme de charité. Le Centre prend de l'expansion et ouvre une clinique sans rendez-vous. Déménagement à un emplacement temporaire, le 24, rue Selkirk à Vanier.

SHCHC works with the Ottawa Council on AIDS and other organizations to develop the Oasis model; Oasis Program opens at 100 Marie Curie. Centre sponsors the Oasis Program for people living with or at risk of contracting HIV/AIDS. / Collaboration avec l'Ottawa-Carleton Council on AIDS et d'autres organismes pour élaborer le modèle Oasis; inauguration du programme Oasis au 100, Marie Curie. Le Centre parraine le programme Oasis pour les personnes ayant contracté ou étant susceptibles de contracter le VIH/SIDA.

Centre undergoes first successful accreditation review, Building Healthier Organizations. / Premier examen d'accréditation couronné de succès: Bâtir des communautés en santé.

SHCHC is the largest CHC in Ontario. / Le CSCCS est le plus grand CSC en Ontario.

The Board of Directors hires new Executive Director, David Gibson. SHCHC initiates a 2-year transformative organizational renewal plan. / Le conseil d'administration recrute un nouveau directeur général, David Gibson. Le CSCCS amorce un plan de deux ans sur la transformation et le renouvellement de l'organisation.

SHCHC receives French Language Health Services Designation (FLS) from the Ministry of Health Long Term Care (MOHLTC). / Le CSCCS reçoit un certificat de désignation en vertu de la Loi sur les services en français, décerné par le ministère de la Santé et des Soins de longue durée (MSSLD).

SHCHC receives second FLS Designation under Ministry of Children and Youth Services. SHCHC receives funding from the Champlain LHIN for Methadone Maintenance Treatment and primary care services for people who have problematic substance use. / Réception d'un deuxième certificat de désignation en vertu de la Loi sur les services en français, décerné par le ministère des Services à l'enfance et à la jeunesse. Le CSCCS reçoit un financement du RLISS Champlain pour le traitement de substitution par la méthadone et les services de soins primaires à l'intention des toxicomanes.

Centre receives funding to renovate 221 Nelson Street building. / Le CSCCS reçoit les fonds nécessaires pour rénover l'immeuble du 221, rue Nelson.

Primary Care Outreach Program is launched. / Lancement du Programme de soins primaires communautaires.

SHCHC celebrates the 40th Anniversary! / Le CSCCS célèbre le 40^e anniversaire!

1973 • 1974 • 1975 • 1978 • 1980 • 1981 • 1982 • 1985 • 1987 • 1988 • 1989 • 1990 • 1994 • 1995 • 1996 • 1997 • 1999 • 2000 • 2001 • 2002 • 2003 • 2005 • 2006 • 2008 • 2009 • 2010 • 2011 • 2013 • 2014 • 2015

SHCDC conducts a community needs assessment and finds that 24% of Sandy Hill residents were without a family doctor. First Annual General Meeting of the SHCDC. / La SHCDC effectue une évaluation des besoins communautaires et découvre que 24 % des résidents de la Côte-de-Sable n'ont pas de médecin de famille. Première assemblée générale annuelle de la SHCDC.

Introducing social services in the Centre with a seconded social worker from the Regional Municipality of Ottawa-Carleton. / L'introduction des services sociaux au Centre avec un travailleur social détaché par la Municipalité régionale d'Ottawa-Carleton.

Addition of health promotion through students; Centre begins working toward a multi service model. The SHCHC becomes a founding member of the Association of Ontario Health Centres (AOHC). / Addition de la promotion de la santé grâce à des étudiants; le Centre commence à travailler en vue d'un modèle de services multiples. Le CSCCS devient membre fondateur de l'Association des centres de santé de l'Ontario (ACSO).

Établissement du Centre d'information pour personnes âgées (Senior's Information Centre); approbation des services sociaux régionaux afin d'en faire un centre de services communautaires. Début d'un partenariat avec la Fondation de la recherche sur la toxicomanie (FRT) afin d'élaborer un service d'aiguillage et d'évaluation financé par le ministère de la Santé de l'Ontario.

Project Salud - SHCHC partners with Nicaraguan's twin, Villa Venezuela. / Projet Salud, où le CSCCS travaille en partenariat avec son organisme jumelé du Nicaragua, Villa Venezuela

Centre moves to new building at 221 Nelson Street. / Le Centre déménage dans un nouvel immeuble, au 221, rue Nelson.

Executive Director Dennise Albrecht resigns; Sue MacMurray is appointed as new Executive Director. / La directrice générale Dennise Albrecht démissionne et est remplacée par Sue MacMurray.

SHCHC works with mental health community agencies, the Ottawa Hospital and the Ottawa Police Service to plan and implement the first mental health crisis service in Ottawa. SHCHC is beta site for first Electronic Medical Records (EMR) system for CHCs in Ontario. / Collaboration avec des organismes communautaires de santé mentale, l'Hôpital d'Ottawa et le Service de police d'Ottawa pour planifier et mettre en œuvre le premier service de crise en santé mentale à Ottawa. Le CSCCS est le lieu d'essai pilote du premier système de dossiers médicaux électroniques pour les CSC en Ontario.

SHCHC has over 150 staff, 100 volunteers, and more than 70 community partners managing and delivering programs and services in primary care, social services, addictions services, health promotion and education, community development, mental health crisis and advocacy. / Le CSCCS compte plus de 150 employés, 100 bénévoles et plus de 70 partenaires communautaires qui gèrent et exécutent des programmes et services en soins primaires, des services sociaux, des services pour toxicomanes, la promotion et l'éducation en matière de santé, le développement communautaire, les crises en santé mentale et la défense des intérêts dans ce domaine.

Champlain Local Health Integration Network (LIHN) begins new regional health planning and funding role. / Le Réseau local d'intégration des services de santé (RLISS) Champlain commence à jouer un nouveau rôle en matière de planification et de financement de la santé régionale.

Oasis Program re-locates to 221 Nelson Street. / Le programme Oasis déménage au 221, rue Nelson

Partnership established with Canadian Mental Health Association to develop Intensive Case Management Program. / Conclusion d'un partenariat avec l'Association canadienne pour la santé mentale pour élaborer un programme de gestion des cas graves.

Partnerships with United Way for Strathcona Heights and the Homework Club at Viscount Alexander Public School begin. / Début des partenariats avec Centraide pour Strathcona Heights et le club des devoirs à l'école publique Viscount Alexander.

SHCHC receives a provincial Health Equity Award for new health clinic for street-involved youth. Clinic opens at Youth Services Bureau, Downtown Centre. / Le CSCCS reçoit un prix provincial sur l'équité en matière de santé pour la nouvelle clinique de santé à l'intention des jeunes de la rue. La clinique ouvre ses portes au Centre du Bureau des services à la jeunesse.

