



Sandy Hill
Community Health Centre

Centre de santé
communautaire Côte-de-Sable

Every One Matters.
Chaque personne compte.

ANNUAL report 2016 2017

*Connecting our communities
to health and wellbeing
every day, in every way*





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

“ “ *I have been a client of the Centre for several years. When I arrive at the Centre, I have a place to park my car, I am greeted by a welcoming staff, I am assured to see a doctor, I have a person who takes care of my diabetes, one who takes care of my feet, another person sees for my diet, and finally a person who makes sure to keep my body in good shape. And all this for free. What do you want more? ” ”*

- Pauline, client

A message from the Board Chair and the Executive Director

Dear friends,

Over the past year, Sandy Hill Community Health Centre (SHCHC) has continued its efforts to transform our programs and services into ones that always put clients and residents at the centre of care. With the growing opioid and alcohol addiction challenges in Ottawa, the Centre has also expanded its focus to meet the growing challenge of addictions and mental health issues by working with both funders and partners to expand our mental health and substance use disorders services.

The continuous evolution of our health care system is a reflection of the changing needs of our community. New knowledge, scientific breakthroughs, new technology, and new medications and care techniques are all resulting in longer and healthier lives. At the same time, Ottawa - like other cities - is faced with significant increases in service demand. This demand is driven by a number of factors, including a growing aging population, changing demographic profiles, the influx of Syrian refugees, and many other factors.

Sustainably meeting these needs for the future requires Community Health Centres like SHCHC to not just react to changing needs, but to get ahead of the change curve. We need to transform and ready our system now. Our health and administrative professionals and leaders know finding and delivering the care solutions of tomorrow means thinking outside the box; that is, getting outside of our traditional comfort zones and envisioning care outside of our traditional settings such as hospitals. It means accelerating improved health outcomes for children and youth, adults and seniors in all the client populations and communities we serve by working together and utilizing our quality outcome driven care, outreach, community development and health and wellbeing education programs to their full potential. It means re-imagining SHCHC and all our diverse programs, services and sites, and transforming them into a seamless, non-fragmented, client-focused and highly integrated health network for the long term.

The new Supervised Injection Service facility, the Centre's integration with the Billy Buffet House of Welcome and the Vanier Social Pediatric Hub project are all aimed at putting the client at the centre of care. Delivery of care is designed from the client outward and is aligned with the Ministry of Health and Long-Term Care's bold new Patient-First vision. Based on our past successes, we are confident SHCHC will continue to push the boundaries of traditional thinking and act as a catalyst for this bold new Patient-First vision.

The dedication of staff, the Board and the community to SHCHC's mission is inspiring. We look forward to working with all of you in 2017-2018 to advance health equity and high quality of care for all of the clients and the communities we serve.

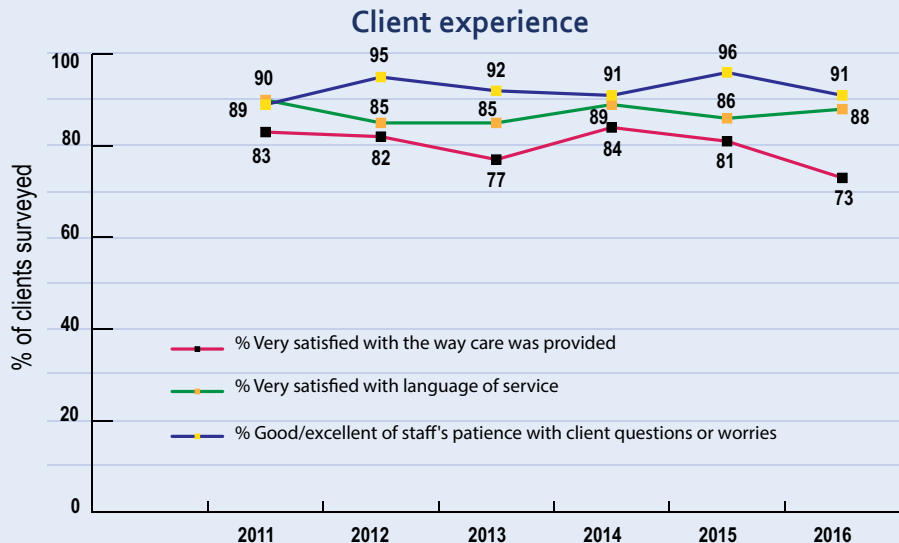
Thank you

Lynn Marchildon, Board Chair
David B. Gibson, Executive Director

Excellence in primary

“ We were impressed with Sandy Hill Community Health Centre as an organization that is clearly dedicated to meeting the needs of its expanding community, clearly focused on the social determinants of health, with staff who are passionate about what the organization does, with Board members who are thoughtful and caring stewards, and as a centre focused on quality improvement.”

- Canadian Centre for Accreditation - preliminary report, April 2017



A highlight for Health Services this past year was welcoming over 100 Syrian refugees into our group practice. For many of the refugees, their first few weeks in Ottawa were spent living in a downtown hotel, as they worked with settlement agencies to find appropriate longer term housing.

As the refugees moved into their new permanent homes, we worked collaboratively with our community partners to take them into our primary care practice. This was an intense period of learning for the team as we increased our knowledge and efforts to provide culturally competent care to help the newcomers adapt to life as new Canadians. We adjusted our intake appointments to meet the needs of multi-generational families, whose priorities besides health care, included language training, attending school and other job training efforts. Almost all of the appointments required cultural interpretation, which added to the complexity and dynamic of the interactions with our new clients.

health care outcomes

Many of our new clients had only received minimal health care while in refugee settlements prior to coming to Canada. Along with assessing their acute care needs, the primary care team provided immunizations, screening for a number of conditions, pre- and post-natal care, and comprehensive follow-up of chronic conditions. We recognized that the health needs of newly arrived refugees differ from those who are born in Canada. The prevalence of diseases differs with exposure to disease, migration trajectories, living conditions and genetic predispositions.

Language and cultural differences, along with lack of familiarity with preventive care, can impair access to appropriate health care service. Knowing this, the primary care team spent a lot of time helping the clients learn about and navigate the Canadian health care system. As the acute and urgent health care needs were addressed, we were also able to refer and connect the clients with other services in the Centre such as smoking cessation, health coaching and counselling.

As well as providing much needed primary care to our newest clients, we also believe that our efforts contributed to the warm welcome Canada hoped to provide for Syrian refugees.





Overall utilization data

	2016-17	2015-16
Number of active clients	10,774	10,789
Number of face-to-face visits with clients	38,203	40,695
Number of people seen for Addictions and Problem Gambling counselling or case management	1,375	1,408
Number of people seen in Primary Care services (includes Chiroprody)	5,976	5,919
Number of people seen for visits related to chronic disease prevention and management	1,345	1,148

(Does not include Intensive Case Management, AIDS Bureau Programs, Community Engagement and Development)

“ Participating in the program helped me identify and correct the mistaken ideology that was preventing me from accomplishing important health goals. Having a healthier attitude and understanding my problems put me in a better situation to take steps in the right direction for more autonomy over my pain management. ”

- Participant in the Chronic Pain Self-Management Program

Integrated approaches to substance use disorders help clients succeed

There are two teams that work very closely in the Centre to provide a broad range of general social services, intake and counselling for addictions and mental health issues. 2016-2017 has been a busy year for Client Access Team (CAT) and Addictions and Mental Health Services (AMHS)!

As part of a provincial initiative, the CAT and AMHS teams worked with partners in the Champlain Local Health Integration Network (LHIN) to implement a staged screening and assessment process to support better service matching for clients with substance use concerns. Staff participated in a rigorous training and quality assurance process to become proficient in the administration of a new suite of screening and assessment tools, and, as a result, the intake process was significantly revised.

Quality improvement was a strong focus for the teams over the past year. A formal quality improvement initiative to reduce the time between intake and first counselling appointment was started in 2015-16. Impacts of this work were seen in 2016-17. By adopting new habits in waitlist management, the wait time from consult to service was decreased

by an average of four days and the variability of days waited was significantly decreased. CAT and AMHS also participated in a related provincial initiative to implement the Ontario Perception of Care Tool - a validated client experience survey that will be used to inform further quality improvement projects.

The teams have also worked hard to create more effective systems for coordination of care. New processes were implemented to support clients in accessing other services to enhance care plans and to collaborate with other service providers. Ongoing improvements in the way we use our electronic medical record have created greater and more effective communication related to internal referral, treatment planning and coordination of care.

““ *The respect and compassion that all staff have for clients really shines through.* ””
- Client





“ “ *The Core Strength and Stand-Up programs helped me further recover some of the capabilities which were lost in the motor vehicle collision of 2009. The programs helped by:*

- *showing me how to protect the joints and back by strengthening muscles in doing particular exercises;*
- *improving control over body movements, for example, to protect knees while walking;*
- *improving balance, weight distribution and stability while moving;*
- *improving breathing during physical efforts;*
- *improving peripheral vision;*
- *establishing habits of doing exercises daily;*
- *reducing the need for Oxycocet or other pain relievers in order to sleep;*
- *improving my mood.*

The list is not exhaustive. I feel lucky to have had this opportunity. Exercises done from previous knowledge (for example, after damaging a ligament) had helped, but all too slowly. It has been much better to be shown exercises by the knowledgeable and conscientious professional staff. Their example and advice helped with the recovery progress much more quickly. Thank you! ” ”

- Barry George, Client

Driving healthy change in our communities

SHCHC believes in supporting and developing active, engaged communities. The communities in which we work can face many barriers to full and equal participation: financial, linguistic, cultural and physical impediments can make healthy and engaged living difficult for many. The Community Development and Engagement (CDE) team works directly in neighbourhoods to reduce isolation, provide opportunities for residents to volunteer and build capacity and leadership to build stronger communities.

Initiatives are broad and include poverty reduction, supporting groups to access and develop housing, food security, community leadership development, child and youth engagement, advocacy for social change, and active citizenship. This year has seen many successes in increased resident participation and leadership. Resident campaigning contributed to the creation of the City of Ottawa Equipass, and community groups moved towards self-management and sustainability. Priority neighbourhoods in 2015¹ saw 333 hours of volunteer time invested, \$14,380 in leveraged resources and an increase in resident led initiatives, increased programming, new partnerships and activities dedicated to addressing key issues.

¹ Source Ottawa Neighbourhoods Social Capital Forum



From left to right, SHCHC Community Developers Gerald Dragon, Lynda Giffen Clements and Chris Osler together with community members

Supporting environment to help

Over the past year, the political environment has rapidly shifted for the Oasis program. The growing recognition of the greatest drug safety crisis in Canadian history spurred the federal Liberal government to fast track its drug policy reform platform, first by making naloxone (the opioid overdose reversal drug) more accessible in Canada, then by signalling a supportive environment for supervised consumption site applications, and most recently in facilitating access to supervised injectable opioid treatment.

Last year, we conducted a successful community consultation on our Supervised Injection Service (SIS) model as we began the next phase of the arduous task of meeting the 26 requirements of the former law governing supervised consumption services. In February 2017, we submitted our application for an exemption under the Controlled Drugs and Substances Act, to operate a SIS within the existing Oasis program space. In March 2017, the Provincial Ministry of Health and Long-Term Care committed to funding the service, pending a successful exemption application.

Luc Cormier, Registered Nurse, and Rob Boyd, Director of Oasis Program

improve the quality of life for our clients

The emergence of illicit powdered fentanyl changed everything. This crisis within a crisis has left governments across Canada scrambling to respond. Media began reporting daily on the escalating crisis and the general public became more aware of the scope of this problem and began pressuring for action.

In many ways, the opioid crisis is this generation's AIDS crisis:

- initially perceived as impacting a small marginalized population;
- political response was offered begrudgingly often imbedded with moralistic judgement of other people's lifestyle choices;
- affected communities and loved ones were faced with multiple premature deaths and numerous layers of stigma;
- criminalization rather than public health is seen as the best response to "control the contagion";
- communities needed to organize and to demand a voice at the table where decisions were being made.

What is frustratingly different about the opioid crisis is that, unlike the AIDS crisis, we already have the medications that will extend and improve the quality of life of people who use opioids.

In addition to SIS, Oasis is expanding access to evidence-based substance use treatment integrated with mental health services and primary health care.

Our Case Management Services continue to provide critical psychosocial support to stabilize people, remove barriers to their recovery and connect them with people and resources to support their goals.

Our Drop-In continues to provide a space where people who use drugs feel respected and cared for. A place where they can develop as individuals and as a community to organize and take action where governments and agencies fail to act. We continue to look for ways to engage more marginalized people who use drugs through access to harm reduction materials, including a pilot of offering meth pipes and access to after-hours supplies.

While we might be tempted to pause, take a breath and reflect on this past year's achievements, we cannot. There is still so much more that is urgently needed to address this crisis including more access to treatment, drug analysis testing, advocacy for further drug policy reform and, of course, implementing Ottawa's first Supervised Injection Service.

“ I have been coming to Oasis for the last 5 years. What I like about Oasis is that there are a lot of people to help you. Whatever it is, they will find a way to accommodate you. Whether it's addiction, HIV or Hep C, there is someone there for you... because they really care. ”

- Tammy, Client

Improving access and coordination

SHCHC continued to make quality improvement a priority in 2016-17. Four formal Quality Improvement teams worked on our priority issues.

Through these initiatives, we were able to develop a better client management system for our Addictions and Mental Health Services, to streamline access to counseling.

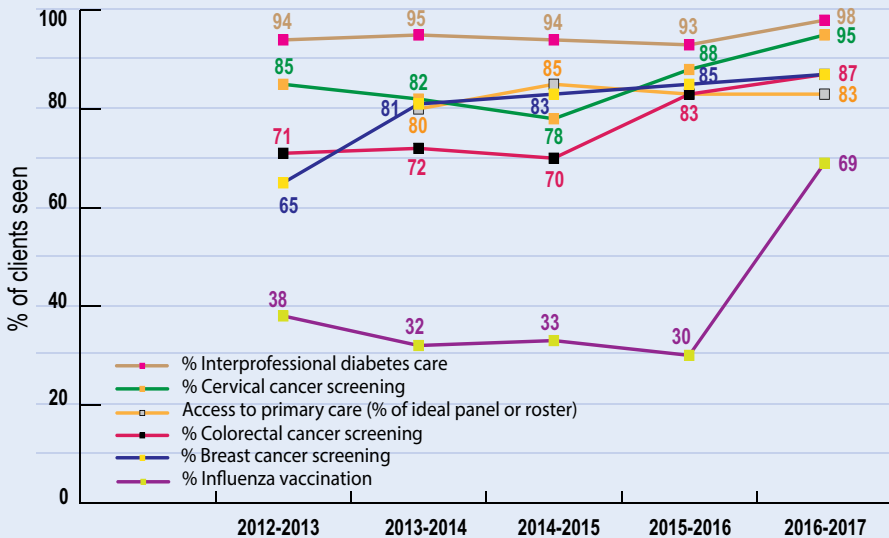
In primary care, we also developed a report system to better match our test requisitions with results as they come in electronically, helping us to identify outstanding test results in a timely way.

We have improved our system for onboarding and orienting new staff, students and volunteers, improving their experience and reducing risk to staff, clients and the organization as a whole.

The Oasis program has been working to improve the flow and efficiency in the clinic, streamlining processes and removing barriers, making it easier for clients to access their provider in a timely way.

Concurrently, program teams worked towards improving priority system indicators. The Centre's Primary Care team significantly improved the results for colon and cervical cancer screening in 2016-17, continuing their leading performance among our primary care peers in Ontario.

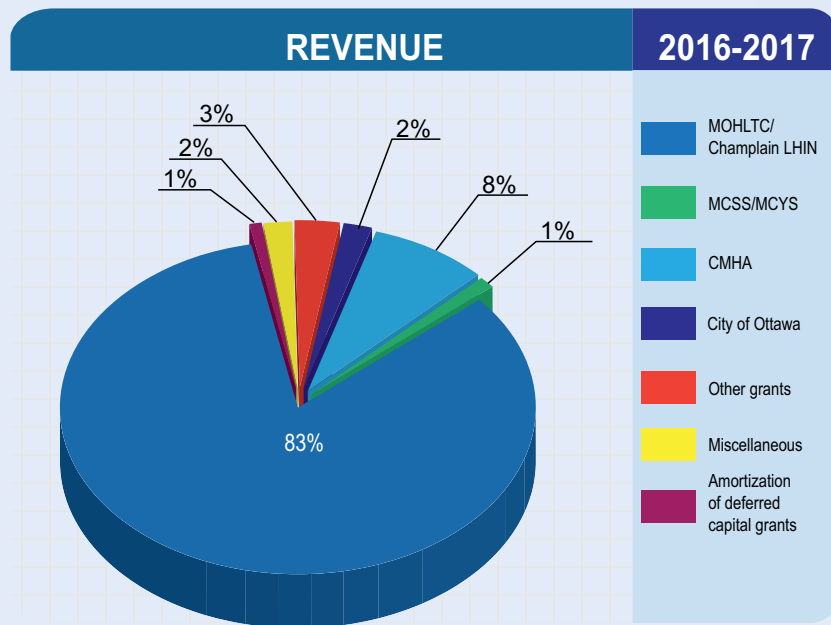
Quality primary care indicators



Driving sustainability through operational efficiencies

Sources of revenue

Year ended March 31, 2017



For complete details, please refer to the audited financial statements and notes available on the Centre's website.

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

Board of Directors

Lynn Marchildon	- Chair
Dana Mersich ^(R)	- Vice-Chair
Filip Szadurski	- Vice-Chair
Ross Taylor	- Vice-Chair
Lisa Julia Gorman	- Secretary
Kenneth Workun	- Treasurer
Edward Brian Legris	- Board Director
Karen McMullen	- Board Director
Aynsley Morris	- Board Director
Marguerite Nadeau	- Board Director
Francis Reardon	- Board Director
Edward Speicher	- Board Director
Sarah Stirling-Moffet	- Board Director
Brook Dodds	- Staff Representative

^(R) - Resigned

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 Sandy Hill CHC
 @SandyHillCHC
 Sandy Hill Community Health Centre

Design: Cristina Coiciu

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
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

Supported by



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

