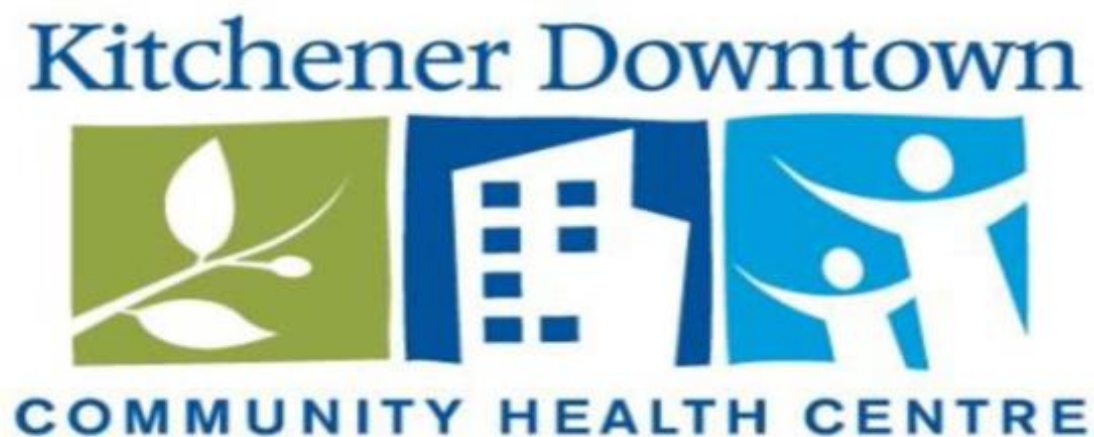


Kitchener Downtown Community Health Centre

Annual Report 2019 - 2020



Vision

A Healthy Community Where Everyone Matters

Mission

Act as an agent of change to build community capacity and deliver client-centered primary health care, with emphasis on people experiencing barriers

Remarks of the Chair and CEO

It has been an incredible year of change at Kitchener Downtown Community Health Centre. The Health Centre has been successful in expanding our reach to the clients and communities we have been entrusted to serve. This year we have developed and supported a new leadership team that has led our vision of “Everyone Matters” under the guidance of Elizabeth Beader, our new CEO.

In Primary Care, we welcomed 1,054 new patients to our practice last year, we have introduced new roles including patient navigators and patient assistants to support patients in navigating the Health Centre while navigating the Health Care System, and we have transitioned to a new Electronic Medical Record.

In Health Wellness, we have expanded our response to community need by developing a Dental Program for Seniors At Risk in partnership with the Region of Waterloo Department of Public Health and Emergency Services. We have increased community reach by providing Primary Care Outreach Services to ACCKWA, St. John’s Kitchen, House of Friendship, Ray of Hope, SHOW, OneRoof, Anselma, Alcontrol, and the Kitchener Public Library. We have expanded our Breastfeeding Buddies programs significantly through our partnership with the Lyle S. Hallman Foundation and the Region of Waterloo Department of Public Health and Emergency Services.

In our Finance and Business Operations, we have been successful in securing new funding, creating risk mitigating policies, and renovating to create increased welcoming spaces, better workflow and new programs. We have initiated an electronic system of capturing employee data, leading to significant cost and time savings.

KDCHC has been privileged to participate in the Inner-City Health Alliance. The Alliance acknowledges that the needs of individuals living in vulnerable conditions are surpassing organizational capacity and as we work together, we can find new ways to support individuals with addictions and/or homelessness. These efforts build on the excellence of KDCHC’s IPC team and enables Kitchener Downtown client-serving organizations to live the principles:

No one is turned away; We are here, how can we help; Those we serve teach us best to help; Improve the Health System by busting barriers

Strategically, the Board has looked to stretch our reach in meeting our Vision and Mission through a voluntary integration. We have signed a preliminary agreement with the Sanctuary Refugee Health Centre, welcoming 5,000 patients and close to 20 staff under the KDCHC umbrella. We know the synergies between the two organizations will complement our strengths and enhance opportunities for improved responsiveness. Many thanks to Dr. Mike Stephenson with his mission-driven organizational excellence. We welcome him and his team as part of our organization.

KDCHC has strategically engaged in the new model of Health Care in Ontario – Ontario Health. KDCHC is represented on the Newcomer/Refugee Table, the Homelessness Table, and the Primary Care Table. We look forward to the positive impacts this new way of working will bring to the individuals and communities we serve.

...And then the COVID-19 pandemic hit. KDCHC stood in leadership against this unknown virus, that quickly became a significant health issue. The Health Centre kept its doors open from the beginning with three principles:

- Keeping our staff and their families safe;
- Staying open for client and communities who are at their most vulnerable
- Screen for COVID-19 and direct those with symptoms to the appropriate channels of care

As well, the Health Centre redeployed resources to the Inner City Health Alliance COVID Homeless/Health Tactical Regional Response through Primary Care in Shelters, Primary Care Drop In, EMR Sharing of Information, PPE Training, Food Hamper Distribution and Screening.

Finally, we have said good-bye to several staff during this year of transition. We thank them all for their contributions to compassionate, flexible and competent client care, and wish them well in their future endeavours. We say good-bye to Jennifer Bechtel, Past Chair, who has led the Health Centre through significant organizational change with passion and acumen. We say good-bye to Julia Alemayehu, Secretary of the Board who has brought community insights to the Board’s strategy. You both will be missed.

We have experienced some turbulent waters in the past year, and we are moving through the “change cycle” with growth, strength and innovation. Many thanks to our Board for their strategic thinking and clarity of Vision. Much appreciation to our leadership team. Tremendous thanks to our staff who are looking to our future role of serving those in greatest need in an evolving health care system with compassion and excellence. It has been a privilege to walk alongside our clients and communities with a view to improving the health outcomes and meet the unique health goals of those whom we serve.

Jason Spencer
Chair of the Board

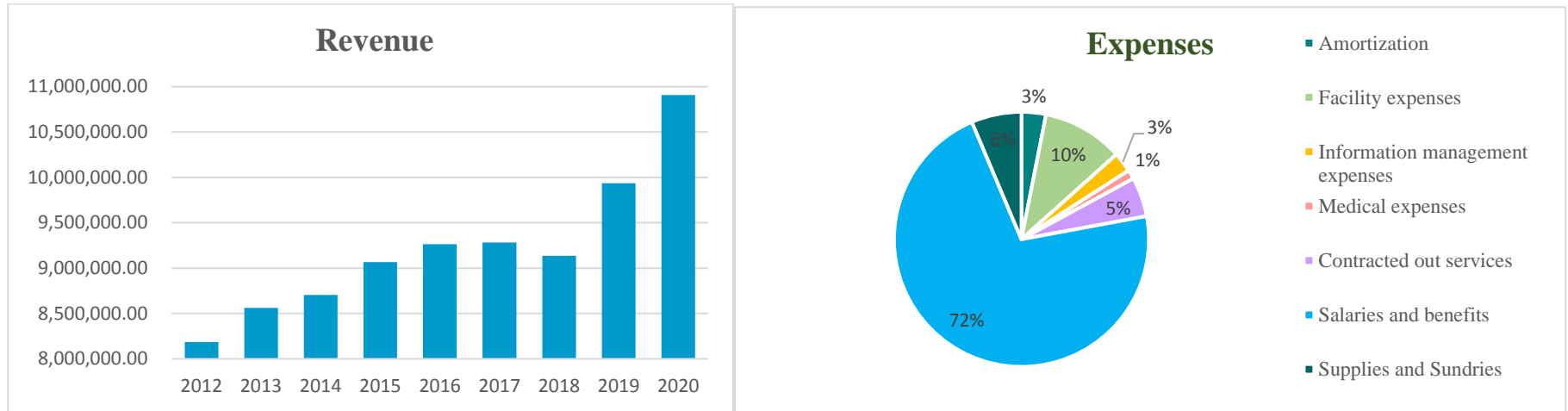
Elizabeth Beader
CEO



Left to right:
Rosemary McCrie
Jamie Gaulton
Rob Howe
Dennis Watson
Jason Spencer, Chair
Wendy Pratt
Amy Sproule-Jones
Rob Jones
Martha Knowlton
Mike McDonald

Missing from Photo:
Mike Nowakowski

FINANCES



TARGET ACHIEVEMENT

Funder Target Achievement (MSAA Targets)			
The WWLHIN has expectations of service delivery achievements. This is how we have performed:			
MSAA Indicators	Target (2019-20)	Performance Standard	Actual
Cervical Cancer Screening Rate (PAP tests)	70%	>56%	58%
Colorectal Screening Rate	60%	48-72%	48%
Inter-professional Diabetes Care Rate	95%	76-100%	93%
Influenza Vaccination Rate	20%	16-24%	45%
Breast Cancer Screening Rate	50%	40-60%	54%
Retention Rate (For NPs and Physicians)	95%	>=76%	90%
Access to Primary Care	100%	95-100%	84%

*For full audited 2019/20 financial statements, please contact Tracy Bryden, Director of Finance and Business Operations

SOCIAL PRESCRIBING

This year, KDCHC has been busy building the foundations for a new social prescribing initiative that launched in March 2020.

Social prescribing is a way to support our clients' health and well-being by responding to their need for social connectedness. While community programs and other non-medical supports have always been a part of the work we do, social prescribing breaks new ground by building intentional links between health and community services, and establishing ways to document, and evaluate the progress.

What will social prescribing look like at KDCHC?

- Care providers at KDCHC identify clients who could benefit from social connection and other non-medical supports.
- Care providers make a social prescription – or referral – after fulsome discussion and input from the client.
- KDCHC link workers connect the client to appropriate resources and continue support the client in their journey to well being.
- The client feels connected to social and community supports that positively influence their overall health and well being.

KDCHC will continue to offer community programs that promote healthy living, social benefit from social connections, and develop a “sense of belonging” amongst participants. KDCHC will also establish partnerships with other community partners to support this social prescribing work.

Here are some steps we took to prepare for social prescribing in 2019-2020 KDCHC:

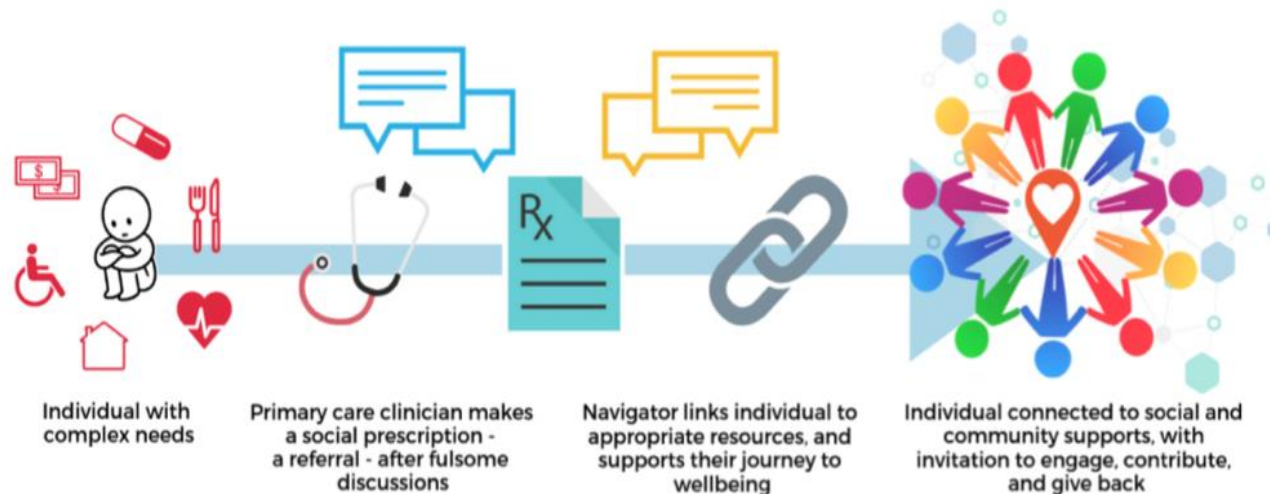
- ⇒ Formed an internal working group
- ⇒ Developed a social prescribing framework for KDCHC.
- ⇒ Provided in-services and updates at staff meetings
- ⇒ Added social prescribing tracking tools to our EMR software
- ⇒ Assigned “link worker” duties to relevant staff
- ⇒ Received project funding through the Kitchener Waterloo Community Foundation
- ⇒ Participated in a provincial community of practice hosted by the Alliance for Healthier Communities.

...OUTCOMES OF SOCIAL PRESCRIBING

- Clients experience improved mental health, are more physically active, and feel less lonely,
- Providers can use their time more effectively by redirecting clients with non-medical needs to more suitable resources,
- Communities see improvements in social connectedness and feelings of belonging.

Here are some of the KDCHC community programs that brought people together in 2019-2020:

- Art Program
- Breastfeeding Buddies
- Culture Kitchen
- Eat Well Spend Less
- Gardening Program
- Knitting Program
- Walking Group
- Yoga
- ...and more!





Breastfeeding Buddies is a volunteer peer-based breastfeeding support program run out of the Kitchener Downtown Community Health Centre that aims to promote breastfeeding by helping all families gain access to evidence-based information and community resources. Using an informed decision-making model that aligns with the WHO commitment to child and maternal health, parents will receive empathetic, nonjudgmental help to meet their breastfeeding goals.

KDCHC GIVES BACK!

On March 5th, a team of KDCHC staff members volunteered at Ray of Hope. Together, we were able to prepare and serve a spaghetti dinner to approximately one hundred and seventy members of our community. This was funded through an anonymous KDCHC donor.

This was an excellent way to make a difference in our community, strengthen partnerships with other service agencies, serve one of our priority populations, and spend quality time with fellow KDCHC colleagues. A special thank you goes out to all employees who volunteered their time to make this initiative a big success.



Celebrating Staff

Innovation Awards



When the pandemic hit in March 2020, we needed to shift most of our face to face appointments to virtual appointments and fast. Andrea, our Ontario Telemedicine Nurse (OTN) and Kayla, our Clinical Assistant immediately ensured that our clinical staff were all set up with OTN accounts and access. Patients also needed to be set up and trained. A few weeks later our Electronic Medical Record offered a virtual video conferencing component. Andrea and Kayla again made sure that all our clinical staff and appropriate patients were up and running as quickly as possible to access this virtual appointment platform. This involved many, many hours of supporting staff and patients alike. In addition, Andrea supported the Diabetes Team and Breastfeeding Buddies to be able to offer classes virtually (OTN and Zoom), and not just to KDCHC patients, but to people across Ontario. This innovation allowed our staff to provide the needed care to patients and remain safe during the pandemic.

Ivanna, RPN, noticed there was a need for some of our patients who have high blood pressure to self-monitor at home. Blood pressure (BP) monitoring units were purchased to lend to patients for home use for up to 6 weeks.

Ivanna also spearheaded the 24-hour ambulatory BP monitoring at KDCHC. This also provides much needed information to our providers and supports treatment decisions for those patients with hypertension

Patients who have been started on new medications to lower blood pressure are able to see the benefit of the medication, which supports adherence to treatment and as well, gives our providers better information regarding the efficacy of specific treatment for the patient. This has improved decision making and patient centered care at the health centre.



FUNDERS AND DONORS

Funding Partners

- Waterloo Wellington Local Health Integration Network
- Waterloo Region Public Health
- Waterloo Region Community Services
- Langs CHC – Regional Diabetes Program
- Ministry of Employment and Social Development
- Ministry of Health and Long-Term Care – Midwifery Program
- Lyle S. Hallman Foundation

Donors

- Kitchener Waterloo Community Foundation
- 100 Women Who Care Waterloo Region
- University of Waterloo - Waterloo Health Professions Committee
- KDCHC Board Members
- KDCHC Staff Members
- KDCHC Volunteers