



# 2014

## Annual Report



South Riverdale  
**COMMUNITY**  
HEALTH CENTRE



Ontario's Community  
Health Centres  
Every One Matters.



**Ontario**  
Toronto Central Local Health  
Integration Network



# Message from Board President & CEO

## The work of a community health centre is never done, nor should it be.

Our focus at SRCHC is on ensuring that the Centre's community is welcoming to everyone, even as we adapt to the inevitable and perpetual changes around us. We know that this can be challenging. But, sometimes, these very challenges can galvanize, engage and present us with new opportunities.



This year, our local community has experienced many changes: the closing of the historic Broadview Hotel, which was home to over 40 people; the creation of condominiums that seemed to have sprung up overnight; and an increase in upscale establishments for those who can afford them. In addition, the threat of displacing the Red Door family shelter brought a diverse spectrum of community members together; they vociferously endorsed the value of an inclusive neighbourhood and successfully ensured the shelter's continuance on Queen Street.

**This has long been a community that is rooted in the values of social justice and equity.**

We have advocated for and against laws (whether federal, provincial or local) according to whether they reflect these values. And, not surprisingly, we have been effective in some ways and lost ground in others. Nevertheless,

**Board Members (L to R):** Kelly Clarke, Victoria Bowman, Jill Barber, Wan Chin Cheong, Susan Vardon, Kelly Murphy, Mona ElSayeh, Linda Rozmovits

**Missing:** David Willis, Joanna Carroll, Cliff Ledwos, Laurie Poole





we have been able to put our 'stake' in the ground with respect to: environmental issues; healthcare for people without insurance or means; safe, affordable housing; minimum wage increase; healthy food; and more accessible and affordable transportation.

This is also a year in which we have deepened existing partnerships and created new ones in communities and areas of need. We have increased our diabetes and respiratory health services, supported newcomers and families and expanded our Hepatitis C and harm reduction programming. We have also increased the number of clients who use our services. Despite the challenges, it has been a very productive year indeed.

Our staff is committed and hard-working. The community board is thoughtful and strategic. Members of the broader community hold us accountable and demand our vigilance. Service users will continue to vote with their feet.

As we end this year and move into the next, we will engage in developing a new strategic plan. And we will ask:

**“How can SRCHC continue to demonstrate and support a community that feels like ‘home’ to everyone?”**

As we contemplate this question, we must remember that it is our collective contributions that will ensure we continue to be inclusive, open, inquisitive and value-based..... one person at a time. What can each of us do towards that end?

Be well,

**Lynne and David**





# Celebrating 40 Years of Community Health

The South Riverdale Community Health Centre (SRCHC) opened its doors at a former police station on Pape Avenue in November, 1976. After outgrowing the Pape Avenue facility, SRCHC moved to the current building on Queen Street East in June, 1998.

Over the last 39 years, the Centre has increased staffing from three full-time health professionals (two doctors and a nurse practitioner), a cleaner and a bookkeeper to 150 staff working with 7,809 unique clients.

In 2016, SRCHC will be celebrating our 40th anniversary. We are proud of the work we have been able to do with the diverse populations within both the local community and the broader health care sector.

## 1970s

- **1976** SRCHC opens and receives its first clients.
- **1977** SRCHC first Annual General Meeting is held, with 75 people attending.

## 1980s

- **1981** AIDS symptoms are first seen at SRCHC; it is identified as a disease in 1983.
- **1982** SRCHC and the City of Toronto carry out Canada's largest screening for lead levels in blood, testing 2,300 schoolchildren and adults.
- **1983** Our first legally recognized chiropodist starts work.

## 1990s

- **1992** The Board changes from hands-on to policy-making. It is now comprised of 12 community members.
- **1993** The first full year that we have an environmental health promoter.
- **1998** SRCHC moves to Queen and Heward, our current location.
- **1999** The Health Information Centre opens with mainly volunteer staff. A harm reduction worker develops programs for injection drug users.

**“I am real.  
I am the same person here  
that I am at home”**





## 2000s

- **2002** A breast health program for Chinese women begins, plus a diabetes education network and early-years JumpStart programs for families at risk.
- **2002** The Canadian Institute for Health Information recognizes our work on a training manual on environmental risks during pregnancy. Medicare advocate Roy Romanow receives an Atkinson Foundation award at the Centre.
- **2005** The Centre advocates for a bike lane on Dundas Street and starts a bicycle clinic. SRCHC wins the City of Toronto bicycle commuting award.
- **2007** COUNTERfit coordinator Raffi Balian receives the national Rolleston Award at the International Conference on Drug-Related Harm in Vancouver.
- **2007** SRCHC is a host site for the 16th International AIDS Conference, held in Toronto. Delegations from around the world come to observe our harm reduction program.

## 2010s

- **2010** Healthy Eating for Life, which develops healthy recipes in Chinese and English, receives an award from the Association of Ontario Health Centres as a Model of Care in Health Promotion.
- **2010** The COUNTERfit Harm Reduction Program received the Jay Browne Living Legacy Award by the Ontario HIV Treatment Network in recognition of excellence, leadership and innovation in the field of HIV/AIDS and to advance the work of community leaders. The award is supporting the development of a memorial project for drug users.
- **2010** SRCHC becomes the host site for the Toronto Central LHIN Regional Coordination Centre for diabetes.
- **2011** SRCHC opens a satellite office in the Crescent Town/Victoria Village Neighbourhood.

- **2012** The Riverdale Food Working Group starts the South Riverdale Good Food Market in partnership with FoodShare Toronto and Queen East Presbyterian Church.
- **2013** SRCHC establishes a satellite clinic at the City Adult Learning Center offering primary care and social work supports.



- **2015** Congratulations Sustaining Health Advantage Initiative (SHAi) program for their award from the Association of Ontario Health Centres (AOHC) for excellence in community engagement



We will be spending time planning ways to mark this important anniversary. Details will be released through our website ([www.srchc.ca](http://www.srchc.ca)) and in local papers. We look forward to celebrating with you as we commit to a continuation of our work together over the next 40 years.



# 2014 Year in Review Snapshot

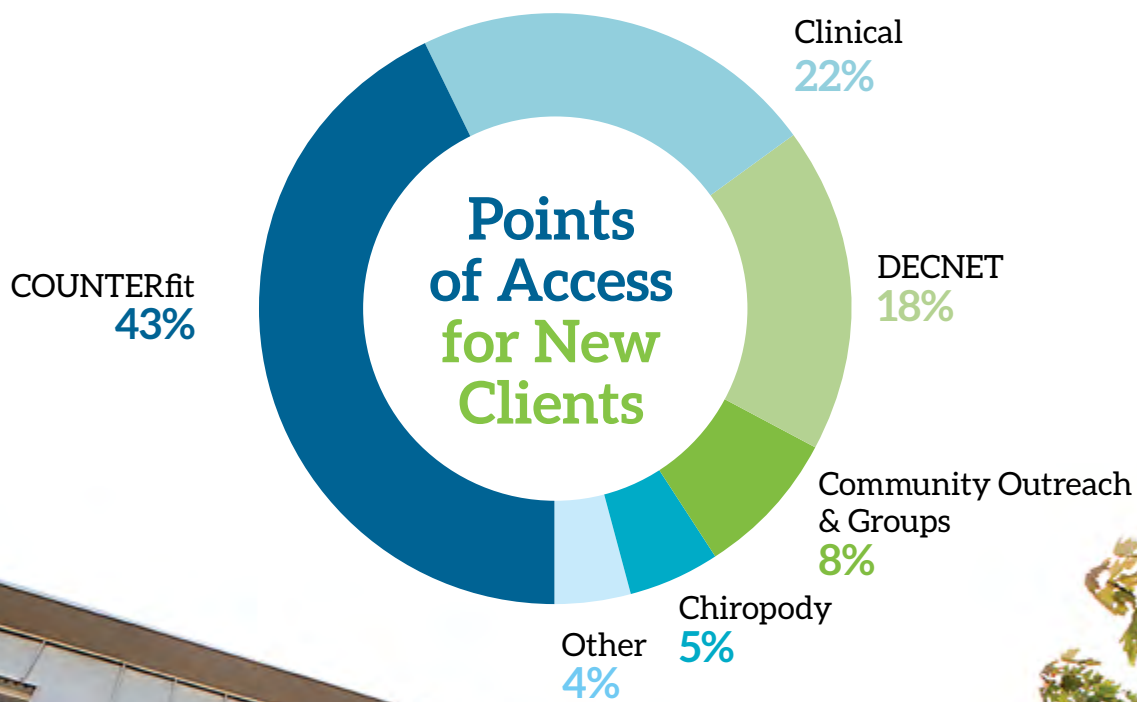
**7,809**

Total Number of Clients  
Served (new+existing)

**1,022**

Number of New Clients

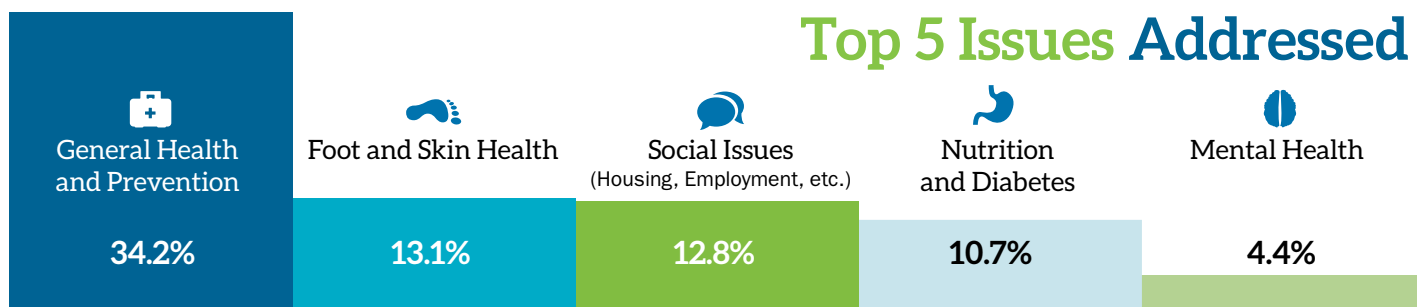
**90** ACCESS  
POINTS  
to SRCHC  
services or programs



## Total Number of Interactions by All Provider Types

 **58,131** 

## Top 5 Issues Addressed



### Health Promotion Groups

NUMBER OF GROUPS **49**

**668** TOTAL NUMBER OF GROUP SESSIONS

TOTAL NUMBER OF ATTENDEES **6,382**

### Garden Workshops

Neighbourhood Elementary Schools Involved **3**

**938** Total Number of Students Involved

Total Number of Workshops Delivered **189**

### Harvest Meal Program

**1,135** meals served

over a 5 week period in 3 community locations

### Community Engagement Workers with SHAI program facilitated

**48 WORKSHOPS**

about healthy living opportunities  
in **3 neighbourhoods**  
in **10 different languages**  
reaching **1,000 participants**

## AWARDS

- Sustaining Health Advantage Initiative award from the Association of Ontario Health Centres for Excellence in Community Engagement

## EXPANSION OF SERVICES

- New Physiotherapy services
- 2 Community Kitchens started in the Pape Cosburn community
- Expansion of Peer Based programming – 33 peers working across all programs at the Centre
- Grant to expand the rooftop garden

## ADVOCACY

- Advocacy to keep Red Door Shelter in the Community
- Challenged changes on Interim Federal Health Laws

## RESEARCH

- Published research demonstrating the ongoing success of the Toronto Community Hepatitis C Program

# Vision, Mission and Values

The three dimensions of vision, mission and values frame the purpose or “what” of the organization. They describe the aspirations and the principles influencing how people within the organization treat each other, clients, communities, and partners as it strives to achieve its priorities.



## VISION

**Empowered, healthy and thriving communities where everyone belongs.**

## MISSION

South Riverdale CHC's mission is to improve the lives of people that face barriers to physical, mental, spiritual and social well-being. We do this by meaningfully engaging our clients and communities, ensuring equitable access to primary health care, and delivering quality care through a range of evidence informed programs, services and approaches.

## VALUES

**Health Equity**

**Social Justice**

**Inclusion & Respect**

**Holistic Approach**

**Meaningful  
Community Engagement**

**Evidence Informed Practice**



# Strategic Directions



Three strategic directions have been developed through the strategic planning process. These directions contribute to achieving the vision while operating consistently with the mission. They will enable South Riverdale CHC to continue to build on our strengths and be responsive to the needs and opportunities for the communities that we serve.

## Lead System Change

## Invest in Organizational Health

## Strengthen Our Strategic Partnerships, Alliances, and Outreach



**“Everyone has different paths.  
It doesn’t matter  
what you have done,  
it’s what you do next  
that is important.”**



# Staff with Lived Experience

A SRCHC priority is to expand program delivery opportunities for individuals with lived experience. Individuals with lived experience provide a variety of supports at the centre such as peer support, health education, program design advice, group facilitation, self-management supports, client accompaniment, and individual advocacy.

During the last three years, a SRCHC focus has been to expand its work with people with lived experience. The goals are to provide developmental employment opportunities and to make SRCHC more reflective of the community. The meaningful involvement of such individuals in program planning and development strengthens organizational accountability, innovation, relevance and quality of care.

Some other positive outcomes include reduced isolation, improved health and health knowledge, fewer barriers to access and enhanced program design and delivery. In passing on information and sharing knowledge, persons with lived experience are often more successful than those without.

Several SRCHC programs such as Diabetes Education, Sustaining Health Advantage Initiative (SHAI), Hepatitis C and Harm Reduction (CounterFIT) hire people with lived experience.

## FEEDBACK

Evaluation of the community support worker program found that Hep C knowledge and confidence increased after the training, as did indicators of self-esteem, empowerment, social support and quality of life. Participants were able to reframe life experiences to create a positive space in which they learned from and supported their peers.

## HEALTH & STRENGTH ACTION GROUP

The Health and Strength Action group (HSAG) is a group of local people who live on low incomes. We work together to raise awareness about issues important for our community, to gain support and to build our collective power to make progress towards real change.

Members of HSAG believe that everyone has the right to a life with health and dignity. The work of the group focuses on three main areas: adequate income for people receiving social assistance (Ontario Works and Ontario Disability Support Program), for minimum wage workers, and affordable public transit.

We are actively engaged in several campaigns alongside other communities including the *Ontario Put Food in the Budget (PFIB)* campaign and the *\$15 and Fairness* campaign to raise minimum wage and improve employment standards, as well as the Fair Fare Coalition. Members have also participated in the City of Toronto Poverty Reduction Strategy.

The work of HSAG strives to be educational. Members have facilitated interactive workshops with participants in diabetes education programs, students at local schools and shared their organizing experience with other community groups. We have mapped social inclusion/exclusion in the area and shared our work with people living in the neighbourhood.

We also celebrate successes. Social assistance rates went up fifty dollars over the last two years and minimum wage will be \$11.25 in October (up from \$10.25). We understand the raises are not enough, but we know our work and the work of many other people have made some difference. We know the changes we want to see will take a long time. What we learn, how we support each other, and how we encourage and support others is as important as each success along the way.

**“The Health Centre gave me the only chance  
I have ever received to work in my profession.**

I don't consider my position a survival job. I consider it a professional job.

Thanks ... for giving me this opportunity. I feel very happy....” *Community Engagement Worker SHAI Program*





## VOICES OF PEOPLE WITH LIVED EXPERIENCE

**“(Working here) gave me stability and financial independence.  
It makes me feel good about myself.”**

In addition to being part of the group, “K” began offering his time as a volunteer. K was eventually hired as a Hepatitis C support worker and has been in this role for three years. He always wanted to give back to the program and talk about shared experiences.

**“The program works.  
It gives people hope and helps  
them find self respect.”**

Other Hep C Support Workers had this to say:

**“I am a role model  
for other people.”**

People have seen me grow through my work. I was seen as a street involved active drug user, messed up. Now people see how I have morphed into something quite different.”

**“ To realize in spite  
of the past, that  
people are resilient.”**

Jill has worked at SRCHC since 2011, starting as a volunteer with the Harm Reduction program. She was able to bring her knowledge of women and their drug use into the organization.

“I have worked with DECNET as a peer worker giving diabetes training to people who are homeless, in shelters, and who have mental health issues. It's been wonderful to be able to contribute to a community that is often stigmatized and discriminated against. I see myself as a worker and mentor, nurturing and empowering people. We are not as different as we think we are. SRCHC encapsulates what community is all about. Bringing and uniting the marginalized into norms of society.

I consider it my civic duty to give back to the community that has given so much to you. It is important that people open their eyes to common elements as opposed to differences.”

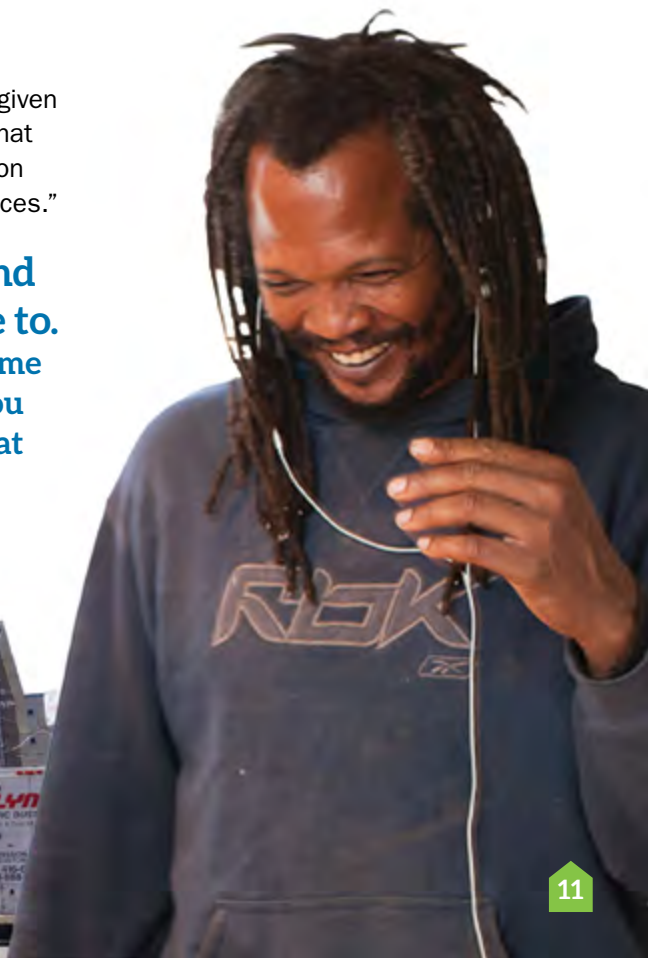
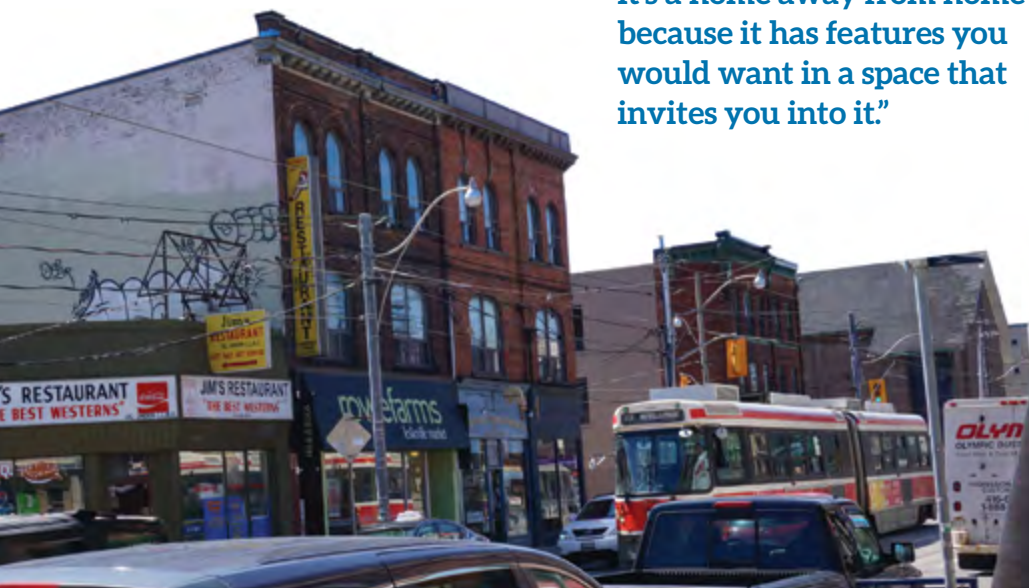
**“SRCHC is inviting, and  
a great place to come to.  
It's a home away from home  
because it has features you  
would want in a space that  
invites you into it.”**

Eltherida is another peer working with the Diabetes program, leading workshops on diabetes education and management. She works with Bangladeshi communities.

“I am diabetic. I am teaching what I need to learn. By teaching it makes me more aware of nutritional information I must inculcate in my head

**I'm giving back  
and helping out.”**

**“Working here  
helped stabilize my life.  
It gives me a sense of  
responsibility and purpose.”**



# Chronic Disease Prevention & Management

The Chronic Disease Prevention and Management (CDPM) Team provides comprehensive, integrated and holistic health care, support and education to people living with (or at risk of) chronic conditions like asthma, chronic obstructive pulmonary disease, diabetes and chronic pain.

The inter-professional CDPM team works across disciplines and programs to improve health, reduce risk, minimize complications and improve quality of life for those who have one or more chronic conditions. Preventing chronic disease, particularly for at-risk communities, is a key focus; as well, providing support, skills and knowledge to help people self-manage their health condition(s) is a goal. As a team, we are committed to a holistic approach to health. We consider both the physical and mental aspects of chronic disease; we try to understand how the social determinants of health (like housing, income and culture) influence the person's ability to manage their health care. Our task is to improve access by reducing barriers at the individual, community and systems levels.

We have a commitment to community feedback and the integration of peers with lived experience into our programs. Our partnerships with other health organizations and community programs is critical to meeting the needs of our various communities.



## DIABETES IN THE REAL WORLD

The Diabetes in the Real World (DRW) committee examines the broader systemic, community and world issues that affect diabetes management. The committee works toward increasing education, awareness and access for people living with diabetes and the community as a whole. The group's vision is to empower and educate individuals to promote health and wellness with a focus on diabetes self-management.

DRW meets monthly to discuss issues around food security, healthy living and food literacy. The group is interested in sharing information with the broader community and has hosted a number of events such as *Solving Your Food Puzzle* and *Food for Thought: Busting Food Myths*. The committee has also participated in a storytelling workshop delivered by the Self-Management Program in order to learn ways to captivate and engage others. The group is in the planning stages of a future event on food literacy.

The DRW committee has partnered with the Good Food Market and the Daily Bread Food Bank to gain a better understanding of how these programs run. Our goal is to use this information to improve food security for group members and the larger diabetes community.



## SMOKING AWARENESS GROUP

The Primary Care Asthma Program offers care and support around asthma and chronic obstructive pulmonary disease (COPD). Over the last year, the mandate of the program has expanded to address smoking support. The smoking support group is for people who are in all stages of change; it is focused on the development of self management skills and awareness about smoking. Participants are offered support during five stages of change: awareness, harm reduction, cutting down, quitting and abstinence (staying quit).

The group uses a harm reduction approach which involves lowering the health risks associated with tobacco use such as encouragement to smoke outdoors, inhale small puffs from their cigarette, and smoke less of the cigarette. During monthly meetings, participants are taught skills to manage cravings, minimize triggers, deal with stress and cope with negative thoughts.

Nicotine replacement therapy (NRT) is used for some clients as a way to improve home air quality and increase lung capacity. In addition to NRT, clients also benefit from combination therapy which includes medication, counselling and lifestyle changes. Since smoking is associated with onset of COPD, the goal of the program is to reduce the effects of COPD symptoms, which can include coughing in the morning, shortness of breath on exertion and chest tightness.

So far, about 50 people have registered with the smoking awareness group. Many have reported the benefits of the group's approach: greater awareness of smoking hazards, benefits of cessation, techniques to identify habits and cut down. With these changes, participants are closer to improved lung health and, ultimately, the reduction or prevention of COPD.

## TOGETHER EVERYONE ACHIEVES MORE (TEAM)

This drop-in group aims to create a positive, supportive environment. Members can receive support and feedback around diabetes self-management, as well as acknowledge the role of mental health in diabetes management. Every other week, the group welcomes anyone who has Type 2, or pre-diabetes, in addition to lived experience in the mental health system.

TEAM has elements of peer support and education. Topics are decided by the group and delivered by a social worker, nurse or dietitian. Discussion topics have included how to manage diabetes, meal planning on a budget, physical activity, mindfulness, and awareness about community resources related to mental health and diabetes. The group is successful in empowering group members to build a stronger sense of connection and belonging, both within the group and the broader community.

**“When people find out someone cares about them, they start caring about themselves.”**



# Newcomers and Families

Through its centre-wide equity initiatives, the Newcomers and Families Team facilitates many programs including community health and screening, parenting, and health and wellness. Programs that address food access and nutrition are also based within this team.

Our mission is to provide culturally-diverse programs and services to the community, with a focus on newcomers and families. We offer co-ordinated, interprofessional services that help newcomers to Canada feel settled and integrated into their new environment. Better health is supported by addressing the social determinants of health and by supporting individual and community well-being.

## MEN'S GROUP

The SRCHC men's group has been meeting since January, 2014. The group was formed in response to a lack of access to important services such as health care and mental health resources.

About 20 men attend the weekly group. Its mission is to engage men in self-directed and community-driven initiatives that enhance their wellbeing through mutual support, empowerment and self-directed living. Participants have access to resources, information, meaningful interactions and opportunity for skill-building. Some of the topics discussed this past year include housing, sexual health, building and sustaining healthy relationships, food security, men's physical and mental health, wellbeing and social justice.

**"We all have struggles, they don't have to lead our lives. They don't have to define us. We can rise above it."**





## DENTAL BUS

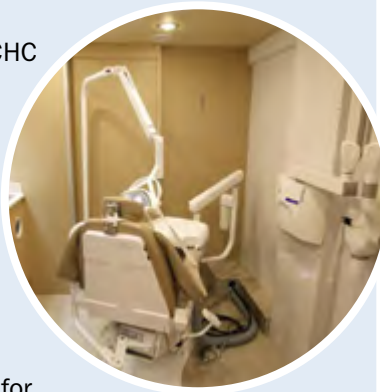
Since January 2015, SRCHC has been working with Toronto Public Health to provide dental care services. It has been a long-time goal of the Centre to provide accessible dental care.

SRCHC now has mobile dental services available for community members who do not or cannot access dental care.

Before accessing the mobile clinic, many clients had been living with mouth pain. According to one person who recently accessed the mobile clinic,

**“I just wanted to thank you! That was a great experience. I went in thinking it was going to be tremendously painful and it wasn’t! (The clinicians) made me feel totally comfortable, explained everything and did an amazing job!”**

The mobile unit is on-site twice a month. The bus is staffed with a dentist, a dental assistant, a hygienist and an outreach worker. It is equipped to provide dental services including fillings and extractions. SRCHC will continue to work with other community health centres across the province to urge government to fund accessible, affordable dental services.



## ANTI-STIGMA ART PROJECT CAMH

This project, in partnership with the Centre for Addiction and Mental Health, explores the impact of racialized discrimination and stigma on the mental health of Muslim women. The group uses silk screening and upcycling (repurposing) as a means of self-expression. Our goal is to provide a safe place for Muslim women to share their stories with one another and then to discover a creative outlet to share their experiences with the community through art.

The group met weekly throughout the Fall of 2014 and Winter of 2015. About 14 women participated in this program. Art work will be displayed throughout the community and within SRCHC in the coming months.



**“Now have free will to speak out and express myself”**

“I can do or say anything – before I felt I couldn’t speak out.”

“There is an opportunity to share the message that we are human –not oppressed... not depressed... not that different.”

“Because of the project/staff (workers), they encouraged us to speak... before I was scared to speak in public... the project has encouraged me to speak.”

# Urban Health Team

The Urban Health Team focuses on meeting the needs of community members who have difficulty accessing health services and supports due to poverty, homelessness, mental health issues and drug use. The large multi-professional team works collaboratively to ensure low-barrier, welcoming services and supports for these community members.

The team provides a wide range of innovative programs, including: a large, multi-service harm reduction program (ensuring provision of supplies, equipment and support throughout the day, evening and weekend); a Hepatitis C program which provides treatment to active drug users; a twice-weekly drop-in medical clinic for individuals who have difficulty keeping medical appointments; programs for women who are using drugs and involved in sex work, and those using drugs and living with mental health issues; medical services for marginalized, vulnerable seniors with complex physical and mental health issues; and homeless people living with mental health issues.

**“The HCV program at SRCHC saved my life. It gave me something to look forward to and a sense of belonging. This isn’t like other treatment groups.”**



## NEW MEDICATION OPTIONS FOR PEOPLE LIVING WITH HEPATITIS C

For the past eight years, SRCHC has run a support group and treatment program for people living with Hepatitis C (HCV). Hundreds of individuals have accessed HCV care since the program began, people who would otherwise not have been able to access hospital-based HCV services. Eight years ago we were the only community-based option for marginalized people living with HCV. Today, 16 teams throughout the province offer similar services modeled on the success of SRCHC’s program. In addition to providing direct client services, the SRCHC team is active with national and international networks, conducting research and advocating for more accessible treatment options for people with HCV.

New, better tolerated and more effective treatments for people with Hepatitis C have been approved by Health Canada. Instead of taking 6-12 months of multiple pills daily and a weekly injection of interferon (which had difficult to manage side effects), the new generation of antiviral medication is all oral (no more interferon!), shorter in duration and far more effective. The new treatment has much higher cure rates – over 90-95% in most cases. These medications were recently approved for coverage by the Ontario government which means that many more of our clients will be able to access treatment and cure their Hepatitis C.





## SHELTER

South Riverdale and its surrounding neighbourhoods have seen dramatic changes both to physical landscape and demography. Affordable housing has decreased as multi-family units have been transformed into single family homes. SRCHC has been actively involved in housing issues. We have hosted forums to discuss the implications of a changing neighbourhood for low income populations, as well as concerns about affordable housing in southeast Toronto.

Staff, clients, and volunteers have been actively involved in a push for 24 hour drop-in centres for women and trans populations. We have made deputations to City Hall, raising concerns about shelter occupancy for women, recognizing that vulnerability increases without shelter. This advocacy paid off with over \$2.5 million allocated for two 24-hour drop-ins for Toronto's east and west end communities.

## ADVOCACY FOR SEX WORKERS

The SRCHC Women's Harm Reduction Program has been involved in advocacy against the criminalization of sex work and the implementation of Bill C-36, Protection of Communities and Exploited Persons Act. Bill C-36 recriminalizes sex workers while also criminalizing the buying of sex. The bill prevents sex workers from working together or hiring third parties to improve safety. SRCHC has been working with sex workers and other organizations such as Sistering, Maggie's, and the Bad Date Coalition to help create safer working conditions for sex workers.

In collaboration with York University, SRCHC is involved with research that will explore the realities of prostitution policies on street-based sex workers.





# City Wide Programs

SRCHC is the lead agency for a number of Toronto Central LHIN wide initiatives that have a city wide impact. Services include TCLHIN Diabetes Program, Toronto Central Self Management Program, Regional Decision Support and Teleophthalmology.

## SELF MANAGEMENT

The Toronto Central Self-Management Program (TC SMP) is an outcome of the Ontario Diabetes Strategy funded by the Ministry of Health and Long Term Care. Hosted by South Riverdale Community Health Center, TC SMP supports a variety of self-management workshops for community members living with chronic conditions. We also work with health care providers by offering workshops on improving communication between providers and patients with chronic conditions.

Workshops are offered in community centres, Family Health Teams, cultural organizations, community-based organizations and hospital outpatient programs. To date, there are 100 community members and health care providers who have been trained to facilitate the workshops. Facilitators have experience with a chronic condition or as a caregiver. Ongoing volunteer feedback reveals that the process of sharing information and providing mentorship assists in the management of their own chronic conditions.

In 2013, Choices and Changes was launched to mentor health care providers and reinforce health care communication skills. This program continues, offering over 20 workshops since the program began.

In 2014, PEP Talk, another self-management skill building workshop, was added. The goal of PEP Talk is to support healthy foot care practices for people with diabetes. Chiropractors and people with diabetes have been trained to facilitate this workshop.



## TELEOPHTHALMOLOGY

Now continuing into its second year, the goal of this pilot project for people with diabetes is to increase access to and awareness of eye screening in order to diagnose and treat preventable diabetic retinopathy. An average of 60% of clients screened during the 2014/15 fiscal year were diagnosed with eye disease including diabetic retinopathy. This project is a partnership with Ontario Telemedicine Network and Dr. Michael Brent (University Health Network).

Teleophthalmology involves a visual acuity exam, ocular pressure measurement and photographs taken of your retina while your pupils are dilated. The information and photographs are sent to the specialist for review. Individuals who may require eye care or follow-up will be referred to ophthalmologists and optometrists. Teleophthalmology is covered under OHIP and available at no cost to the person with diabetes (those without coverage are also accepted). Currently, the program is offered at South Riverdale and several CHC partner locations including Flemingdon Health Centre, Parkdale Community Health Centre and Anishnawbe Health Centre.





# Programs and Services



In addition to health care services provided by doctors, nurses, nurse practitioners, social workers, and case workers, SRCHC offers a range of health promotion programs and community initiatives. Below is a list of programs offered at SRCHC this past year. For more detailed information about programs and services, please visit our website at [www.srchc.ca](http://www.srchc.ca)

## Chronic Disease Prevention & Management

- Chiropody
- Community Outreach (Shelter and Drop-ins)
- Diabetes Education of Community Network of East Toronto (DECNET)
  - Diabetes Support, Education and Management at various sites
  - Diabetes Cooking Groups (English and Chinese)
  - Diabetes in the Real World
  - Diabetes Prevention Program
  - Diabetes Support Groups (English and Chinese)
  - Mental Health and Diabetes Group
  - Pre-diabetes Group
- Flu Clinics
- Physiotherapy
- Prenatal Clinic
- Primary Care Asthma Program (and COPD)
- Red Door Shelter Outreach
- Smoking Awareness Group

## Urban Health

- Community and Agency Outreach
- COUNTERfit Harm Reduction Program
  - Common Ground (Mental Health & Harm Reduction)
  - Community Cooking Program
  - Drug Use Memorial Project
  - Fixed Site
  - Grief and Loss Project
  - Mobile Outreach Program

- Satellite Site Program
- Women's Circle
- Women's Drop In
- Crisis Outreach Service for Seniors (COSS)
- Drug Users Memorial Group
- First Steps to Home Program Partnership
- Multi-Disciplinary Outreach Program
- Toronto Community Hepatitis C Program

## Newcomer and Families

- Anti-Stigma Art Project
- Blake Food Garden Project
- Breastfeeding Clinic & Support Group
- Chinese Cancer Support Group
- Chinese Newcomer Women's Group
- City Adult Learning Centre (CALC) Outreach
- Dental Bus
- Dundas and First Nation School Garden Project
- East York Neighbourhood Initiative (EYNI)
  - Community kitchens, Children's garden, Women's sewing group
- Gentle Tai Chi
- Good Food Box
- Good Food Market Hub
- Healthy Child Screening
- Jump Start Early Years
- Men's Group
- Parenting Group
- Peer Nutrition Program
- Plain Language Group
- Postpartum Adjustment Group
- Rooftop Garden Group

- Seniors Wellness
- Sustaining Health Advantage Initiative (SHAI)
- Tai Chi Classes
- Vibrant Informed Prosperous Group
- Women's Health Screening Clinic

## Organizational Health Systems

- Bike and Walk Ward 30
- Bike Repair Clinic
- East York Neighbourhood Initiatives
- Fair Fare Coalition
- Health and Strength Action Group
- Put Food in the Budget
- Rooftop Garden

## City Wide Programs

- Physiotherapy
- Regional Decision Support
- Teleophthalmology
- Toronto Central Diabetes Program
- Toronto Central Self Management Program



# Community Grants



**“Through growth, I inspire people.  
Give people hope in that they see change can occur.”**

Each year, SRCHC gives out grants for local initiatives. Called “**Grants for a Healthy Community**,” the intent is to provide financial support for locally-based programming. Funds for this program come from the agency’s Special Purpose Fund. The Board, with membership approval, uses some of the interest earned to support groups who have goals aligned with the Centre’s values and beliefs. The program has an annual budget of \$3,000. The maximum amount of any one grant is \$1,000. In 2014/15, three groups received support from the Special Purpose Fund:

## HEALTHY COMMUNITY PROGRAM GRANTS

Ralph Thornton Centre Rivertowne Breakfast Program	\$1,000
Planning South Riverdale	1,000
East York Neighbourhood Initiative Women’s Sewing Drop In Program	1,000
TOTAL	\$3,000



## EAST YORK NEIGHBOURHOOD INITIATIVES: WOMEN'S SEWING GROUP

The Women's Sewing Group is part of East York Neighbourhood Initiatives (EYNI). The Sewing Group is a new program which provides a space with sewing equipment and supplies. It allows women to share skills and companionship, with a potential for networking and micro-entrepreneurship.

The women meet monthly at Bethany Baptist Church to work on collective or independent sewing projects. Because experience and knowledge levels vary, there is a lot of sharing among participants. With the community grant, they have been able to purchase two more sewing machines and one serger. They bought additional supplies such as thread, scissors, fabric and an ironing board. In addition, the group has started a small resource library.

After the participants indicated a desire to learn new skills, the group planned a free Learn to Sew program for women age 13 and older; this ran for seven weeks during July and August. The drop-in program continues once a month in the Pape Cosburn Community.

## SAFETY FIRST RIVERTOWNE BREAKFAST

Safety First is an initiative of Rivertowne residents to improve local safety and wellbeing. The program was initially established to provide breakfast for families in need living in the neighbourhood. Its volunteer-run Breakfast Program is one of its programs and serves a healthy meal each Friday morning to over 90 community members. Those who are not able to attend breakfast receive a hand-delivered meal from a Safety First volunteer.

Grant funding was used to provide a consistent source of funds to purchase food for the program.

A group of volunteers prepares and serves the breakfasts each Friday while, at the same time, building skills around event planning and community outreach.

## PLANNING SOUTH RIVERDALE

The Planning South Riverdale (PSR) committee wants to promote a healthy and inclusive neighbourhood. One of the PSR's key values is that that South Riverdale continues to serve a diverse mix of people and a broad range of businesses to support the community. Having a variety of establishments within a 5-10 minute walk of home or work allows people to accomplish major trip purposes by walking. This contributes to better health by increasing physical activity and reducing congestion and emissions that cause air pollution.

We have noticed significant changes to South Riverdale businesses over the last decade. Once a mix of retail and services serving people who have a wide range of incomes, there is now a shift towards higher end stores and restaurants. In addition, rising rents mean that some retailers are no longer able to afford to remain in our community. While we can appreciate the variety and interest this brings to our neighbourhood, we have concerns that more affordable retail and services are no longer able to operate in South Riverdale.

PSR used funding from Grants for a Healthy Community to conduct research on how the retail environment in South Riverdale supports the needs of our more vulnerable population. Findings from this research will be used to educate the public and support better community planning. The research is ongoing and the group plans on sharing its results to date at a community forum.



# Financial Highlights

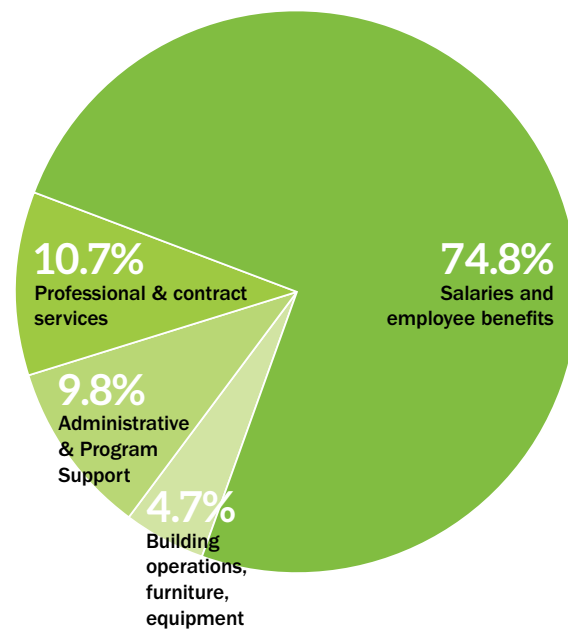
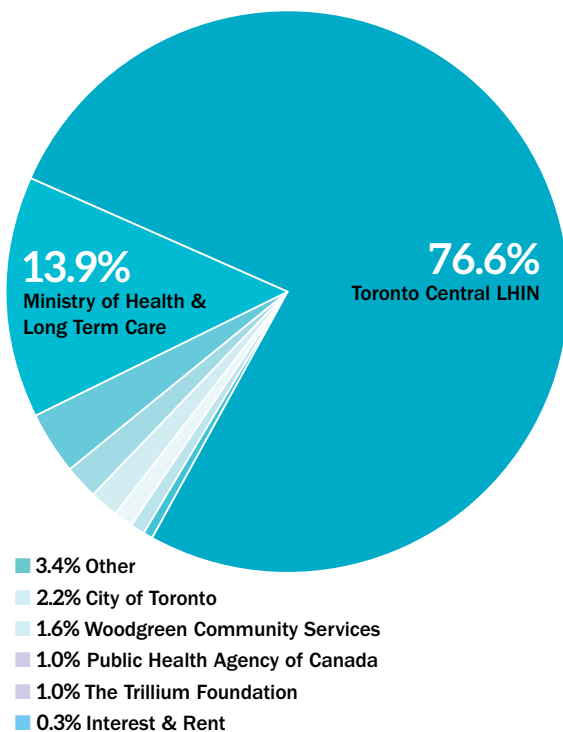


## OPERATING REVENUE & EXPENSES

Period ended March 31, 2015

	2014-2015	2013-2014
<b>REVENUE</b>	<b>\$9,923,151</b>	<b>\$9,513,608</b>
Toronto Central LHIN	\$7,602,163 <b>76.6%</b>	\$7,461,825
Ministry of Health & Long Term Care	1,377,905 <b>13.9%</b>	1,296,894
Public Health Agency of Canada	95,907 <b>1.0%</b>	95,907
City of Toronto	221,172 <b>2.2%</b>	154,718
The Trillium Foundation	97,116 <b>1.0%</b>	60,587
Woodgreen Community Services	156,205 <b>1.6%</b>	163,514
Other	341,435 <b>3.4%</b>	248,717
Interest & Rent	31,248 <b>0.3%</b>	31,446

	2014-2015	2013-2014
<b>EXPENSES</b>	<b>\$9,923,151</b>	<b>\$9,513,608</b>
Salaries and employee benefits	\$7,425,874 <b>74.8%</b>	\$6,900,442
Administrative & program support	967,747 <b>9.8%</b>	932,537
Building operations, furniture & equipment	469,543 <b>4.7%</b>	440,279
Professional & contract services	1,059,987 <b>10.7%</b>	1,240,350



These summarized statements have been extracted from the South Riverdale Community Health Centre's audited financial statements for the year ended March 31, 2015. A copy of the complete financial statements prepared by Management and audited by the chartered accountancy firm of Deloitte LLP is available to any member of the public upon request.



# Volunteers

## Thank you volunteers.

SRCHC values all those who give their time and commitment to the health centre. Volunteers and community participants are involved in the board, harm reduction program, self management program, good food market and a range of other ways in the organization.

Abdullah Johnson  
Abha Shrestha  
Agnes Song  
Akemi De Castro  
Alexandria Wood  
Alice Lee  
Alice Wood  
Alicia Dellegrazie  
Ambaro Guled  
Ana Begazo  
Andreas Tiligada  
Andrew Dopwell  
Anne Le Quang  
Annie Hoang  
Antoinette Pare  
Arlene Silverstein  
Aronela Benea  
Arunthia Zaidi Urm  
Ashley Martins  
Basma Aldaher  
Benjamin Livingstone  
Beverley Baptiste  
Bill Banks

Bin Yu Xu  
Bintou Diakite  
Brian Brown  
Bryce Smith  
Carlyn Zwarenstein  
Carmen Morris  
Caroline Cole  
Carolyn Macdougall  
Cherry Chen  
Cindy Tsai  
Clarisse Nangue  
Cliff Ledwos  
Clint Drury  
Colin Peckham  
Crystal  
Cynthia Macgillivray  
Danette Steele  
Danuta Smith  
Danya Zhao  
Darla Fairfax  
Darrell Clayton  
Dave Labarrie  
David Willis

Deirdre Callery  
Denice Koo  
Denise Galbraith  
Derek Howe  
Derek Tuck  
Deron Douglass  
Dolly Menna-Dack  
Donna Payton  
Donna Richards  
Douglas Tyrell  
Duyen Le  
Ed Walker  
Edward Chin  
Elizabeth Cabral  
Elizabeth Eaves  
Elsie Petch  
Emily Glazer  
Erin Krusky  
Erlinda Verzosa  
Estella Baird  
Evelyn Instenberg  
Florence Taylor  
Fred Cole  
Georgette Manena  
Glen Jessamy  
Gu, Hui Ying  
Hafsah Siddiqui  
Harold Howe  
Hywel Tuscano  
Iain McLaren  
Imre Gorzsas  
Ina Radziunas  
Irina Petrova  
Ismat Tahira  
James Logan  
Jason Fleming

Jason Qian  
Jean-Paul Boulanger  
Jen Volk  
Jennifer Kim  
Jerome Nguyen  
Jill Barber  
Jim Neff  
Jim Vuong  
Joan Patch  
Joanna Carroll  
Joanne Lewis  
John Ankcorn  
John Moore  
Jose Antonio Diaz  
Galvis  
Joyce McIntosh  
Judy Murray  
June Robertson  
Jyotsana Sharma  
Kaarina Wilson  
Karen Gold  
Kari Piiparinen  
Katelynn Rutherford  
Kayla Emans  
Kelly Clarke  
Kelly Murphy  
Ken Phung  
Kerseri Scane  
Kristina Ohlsson  
Kwok Wah Leung  
Laurie Poole  
Layth Al-Kinani  
Leigh Caplan  
Leki Ymele  
Linda Rozmovits  
Lisa Higgins  
Lisa Li Wang  
Lisa Mallia  
Lorne Dube  
Louis Fliss  
Mahmuda Hossain  
Marcela Tomas

Mari Vella  
Maria Teresa Diaz  
Mary Neilans  
Matthew Aeichele  
Maya Nikoloski  
Melanie Abbottsaway  
Melissa Menezes  
Michael Coons  
Michele Cooney  
Michelle Wu  
Mike Descouteaux  
Mina Eslami  
Miu Lin Wong  
Mona Elsayeh  
Monica Zhang  
Naseema Dar  
Natalie Liu  
Nicola Bartley  
Nicole Georgoussis  
Nilufar Shireen  
Nilufer Begum  
Norma Levitt  
Patrick Duff  
Patty Wong  
Paul Vaughan  
Peggy Colacci  
Peter Potzky  
Peter Yu  
Ping Cheung  
Qin Kong  
Ralph Peeling  
Rhonda Kotowick  
Richard Carey  
Richard Dunlop  
Richard Parker  
Risa Corbett  
Robinson Gill  
Rocelo Sena  
Ron Hastings  
Ron Marshall  
Ron Williams  
Ryan Anderson

Saara Muhaseen  
Safia Parveen  
Sandy Fung  
Sandy Moniz  
Sara Petranic  
Sarah Grant  
Sasha Whiting  
Shaheen Choudhury  
Sherlyn Hu  
Shirley Polissat  
Simon  
Spenta Mazkooori  
Staci Kentish  
Stanley Jorgensen  
Stephanie Phan  
Stephen Hall  
Steven Zigomanis  
Suela Cela  
Summer F  
Susan Cheong  
Susan Himel  
Susan Vardon  
Tasleem Ismail  
Teresa Salzmann  
Tessa Burtally  
Tharwat Awamleh  
Timothy St. Jules  
Tracy Yuan  
Tymm  
Victoria Bowman  
Victoria Tremblett  
Wan Chin Cheong  
Wendy Lio  
William Murray  
Yan Fen Yao  
Yi Man Ng  
Yong Yenfeng (Helen)  
Yucai Dai  
Yvonne Villafana  
Zhaoyi Zhong  
Zorah Lalji

This past year, over two hundred volunteers have contributed 9,332 volunteer hours at SRCHC

### Here's the cast of thousands who put this together:

Jason Altenberg  
Randal Boutilier,  
12thirteen Design Inc.  
Shirley Cheng-Kerr  
Kathleen Foley

Grace Ho  
Laura Mullin,  
Spark Productions  
Lynne Raskin  
Melissa Tapper

Chris Tolley,  
Spark Productions  
Susan Weiss, Editor  
Shannon Wiens







Empowered, healthy  
and thriving communities  
where everyone  
belongs.



South Riverdale  
**COMMUNITY**  
HEALTH CENTRE

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