



South East Grey Community Health Centre



Annual Report

2013-2014

Every One Matters

We are grateful for the ongoing support and funding received
from the South West Local Health Integration Network.

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*"Who looks
outside dreams,
who looks inside
awakens."*

- Carl Yung

Message from the Board Chairperson

It has been a year of achievement for the South East Grey Community Health Centre and we thank the staff, leadership and volunteers for all of their hard work and effort. We have served the patients, clients and the community well and we have built a Centre where people are welcomed and healed, both mentally, physically and spiritually.

The vision that inspired the creation of the Centre years ago has come to fruition. It is time now to build excellence into our programs and services and to work with our community partners to truly build a system of healthcare where every facet of care is integrated and where the patient is at the centre of everything we do.

To begin this process, the Board and the Executive Director engaged staff, our stakeholders and the community in the development of a vision, mission statement and strategic plan. We have also reaffirmed our values and we live those values each day.

We are proud of the strategic directions that have been established and believe that our plan integrates well into the South West LHIN Integrated Health Service Plan and the Minister's *Áction Plan for Health Care*".

A summary of our achievements is embodied in this annual report. I believe that these achievements are just the beginning of what I am sure will become a world class Community Health Centre.



Terry Mokriy – Board Chairperson

"Anyone who has never made a mistake has never tried anything new."

- Albert Einstein

To Our Stakeholders

This past year we were able to expand our access to services by partnering with the Bluewater School Board where we were able to establish an in-school clinic for counselling, primary care, sexual health and dietetics counselling to more than one-thousand students and also by partnering with the Victorian Order of Nurses where we were able to co-locate and establish a primary care setting in Dundalk offering similar services to the residents of Southgate.

We worked closely with our regional independent physicians and nurse practitioners and were able to assist their practices by delivering much needed allied health support (Social Work, Physiotherapy, Dietitian, Chiropracist) to over five thousand patients not rostered to our clinic.

In 2012 we signed agreements with the Townships of Grey Highlands and Southgate to offer an array of programs and services and are committed to working with the SW LHIN on the development of similar agreements with the Town of Chatsworth.

In the fall of 2012 we expanded our clinical hours of operation to include extended hours (8:30 to 7:30) Monday, Tuesday and Wednesday and early hours (8:00 to 4:30) on Thursday to facilitate Lab tests. Community programs are offered each night of the week (similar hours) except for Friday.

We signed an agreement with Public Health to host a dental clinic on site and also to offer sexual health counselling and low cost contraception to our clients.

We are working closely with our mental health community partners to define client needs and have collaborated on a number of program offerings.

Despite the best of intentions with regards to working closely with our community partners and stakeholders, we realize that we still have a long way to go, to truly create an integrated service delivery model that places the client at the centre. We are committed to making this a reality in the coming years.



Allan Madden – Executive Director

*"To give pleasure
to a single heart
by a single act is
better than a
thousand heads
bowing in
prayer."*

- Mahatma
Gandhi

Operations

Strategic Planning

In September 2012 SEGCHC launched a strategic planning process that will position the organization well for the next three to five years. The SEGCHC 2012-2015 Strategic Plan commits the Board and staff to improve the physical, mental and emotional well-being of clients we service and to develop the communities within our catchment area.

Our eight corporate objectives are as follows:

- 1. The South East Grey CHC will establish and implement primary and allied health care best practices for seniors, youth, individuals with chronic diseases, men and women.*
- 2. The South East Grey CHC will increase "Access to Care" by 50% by March 31, 2014.*
- 3. The South East Grey CHC shall establish and implement a "Balanced Scorecard" by March 31, 2013 which shall include a comprehensive quality program.*
- 4. The South East Grey CHC shall implement the "Accountability Framework" as a means to align our objectives with the SW LHIN and to drive performance and accountability.*
- 5. The South East Grey CHC will become an information management leader by implementing EMR, Great Plains, SharePoint, OLIS and SPIRE in-line with AOHC and CCIM guidelines by December 31, 2012.*
- 6. The South East Grey CHC shall launch a health promotion strategy in-line with community partners that will include a minimum of twenty-five (25) different initiatives by March 31, 2012.*
- 7. The South East Grey CHC shall meet or exceed all of our 2012-13 M-SAA and MoHLTC targets.*
- 8. Through the Quality Council, the South East Grey CHC along with our community system partners, shall develop and implement a minimum of five integrated health system quality improvement initiatives that impact patient/client care, reduce costs, eliminate waste and improve patient/client flow through the system.*

Accountability Framework System



The Accountability Framework System (AFS) is designed to guide the organization in all that we undertake. Developed with the involvement of staff and the public at large, the AFS reflects our five strategic directions and our core values.

The Client or Patient is at the centre of everything that we do.

For more information please see the South East Grey Community Health Centre Strategic Plan 2012-2015.

Human Resources

After the Board approval of our 2012-2015 Strategic Plan, Allan Madden created a Performance Management Program (PMP) where the corporate objectives cascade down to the staff level. Allan met with each staff member monthly one-on-one to monitor goals and to define any needs that staff may have.

Finance/Administration and IT

Great Plains

The Centre was also the one of the first CHCs in Ontario to go-live with the new financial software system Great Plains. Owned by Microsoft, Great Plains is the system of choice for the province of Ontario. Once all CHCs have implemented GP, the statistical reporting capabilities will be tremendous.

Board Governance

In 2012-2013 we have been focusing on governance structure. Various committees of the Board of Directors have been created including Finance, Governance, Quality and a Community Engagement group.

Quality Improvement Plan

The Ontario Action Plan for Health Care focuses on quality in primary care and one element of Ontario's health care transformation agenda is the introduction of Quality Improvement Plans (QIPs) into primary care. QIP provide opportunity for health care organizations to move the quality agenda forward. On April 1, 2013 SEGCHC submitted their 2012/13 Quality Improvement Plan to the Ministry of Health and Long Term Care (MOHLTC) and SW Local Health Integration Network (SWLHIN). The SEGCHC QIP is focused on the quality dimensions of access innovation, integrated community, patient-centered quality care, and accountability.

We have significantly invested in the Association of Ontario Health Centre's (AOHC) Non-Operational Reporting Analytics (NORA) and Business Intelligence & Reporting Tool (BIRT) Project that will benefit Community Health Centres across the province. The NORA/BIRT solution will provide CHCs with better analytical tools to look at data across multiple programs, drive quality improvement, and make strategic planning decisions. In the future, the Ministry of Health and Long-Term Care and Local Health Integration Networks will benefit from NORA through reliable, quality-assured data to support planning in the areas of efficiency, accountability, access, and quality.

Website and IT

In May 2012, the SEGCHC website (www.segchc.ca) and our intranet for internal document management went live. IT support continues to be provided by Grey Bruce Health Services.

Clinical Operations

In May 2012, SEGCHC was one of the first of seventy-four Ontario-based CHCs to implement the electronic medical record software, Nightingale on Demand.

In line with our strategic plan and the objective to increase access to care, SEGCHC has implemented extended hours of operation.

SEGCHC staff continues to be very busy seeing students at our satellite clinic at Grey Highlands Secondary School, which opened in March 2012. In partnership with VON, we began seeing patients at a third satellite site in Dundalk in November 2012. We offer Nurse Practitioner, Social Work and Dietitian services through both the GHSS and Dundalk sites.

What our Clients/Patients are Saying

The Centre participated in the first annual patient survey conducted by an independent research firm. The Centre had an overall satisfaction rating of 93.53% - excellent results for our first year in operation! The following comments summarize the patient experience:

"I love that the centre is involved in health care provision in the school setting, as well as all the community work the centre does. Very successful model!"

"Everyone I've encountered at the Centre is always helpful, caring & efficient! And smiling! They know their clientele & try to accommodate pro-actively, what a great team!"

"I feel so much more comfortable talking to a health care professional who seems more on my level. We are able to make connections to different aspects of my health because I feel comfortable taking a bit of time to connect the dots with her."

"Everything leaves you with a personal encounter as opposed to just being processed."

"I feel your set up here is how future health care needs to go. You focus on prevention and that is the key. I never feel rushed and that is rare today as compared to a traditional doctor's office. You have also provided excellent care and services to my elderly mother. I am so happy that this service is available in our rural community!"

*"Kites rise highest
against the wind,
not with it."*

- Winston
Churchill

Achievements – Our Performance

SEGCHC Clinical Data Reporting 2011-14

	2013-2014	2012-2013	2011-2012
Total Patient Visits	20,988	17,071	N/A
Patients Rostered	2,470	1,296	503
Primary Care Visits	15,591	12,175	N/A
Allied Health Visits	5,397	4,896	N/A
Periodic Health Exams	664	263	80
Breast Cancer Screening	135	109	18
Cervical Screening	271	197	29
Influenza Vaccination	341	465	62
Colorectal Screening	364	184	22

SEGCHC Program Data Reporting 2011-14

	2013-2014	2012-2013	2011-2012
Senior's Fitness		662	33
Walking Program		2,001	1,083
Community Gardens		87	N/A
Good Food Box		67	N/A
Evening Fitness Programs		877	N/A
Youth Programs		377	136
Nutrition Education	798	406	168
Youth Counselling	965	661	71
Chiropodist - Foot Care	1098	698	38

We have much to be proud of this past year. Our clinical and program data far-surpassed the previous year and this was reflected in a reduction of ER visits to the Markdale Hospital.

Accountability

Multi-Sector Service Accountability Agreement

The Executive Director and the Board Chairperson signed a Multi-Sector Service Accountability Agreement on April 1, 2011 which links the Centre's performance to funding received through the South West Local Health Integration Network (SW LHIN). *The Local Health System Integration Act*, 2006 requires that the LHIN and the Centre enter into a service accountability agreement. The agreement enables the LHIN to provide funding to the Centre for the provision of services. It supports a collaborative relationship between the LHIN and the Centre to improve the health of Ontarians through better access to high quality health services, to co-ordinate health care in local health systems and to manage the health system at the local level effectively and efficiently.

South East Grey CHC - Board of Directors

Terry Mokriy – Chairperson

Trevor Kendall – Vice Chair/Treasurer

Jane De Jong

Susie Furlong

Dr. Martha Rogers

Paul Tessier

Marion Carson

Report of the Independent Auditor

To the Board of Directors and Members of the South East Grey CHC

We have audited the accompanying financial statements of South East Grey Community Health Centre, which comprise the statement of financial position as at March 31, 2014 and the statement of operations and changes in fund balances and cash flow statement for the year ended March 31, 2014, and a summary of significant accounting policies and other explanatory information.

Management's Responsibility

Management is responsible for the preparation of these financial statements in accordance with Canadian accounting standards for not-for-profit organizations and for such internal control as management determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with Canadian generally accepted auditing standards. Those standards require that we comply with ethical requirements and plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the Centre's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Centre's internal control. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our qualified audit opinion.

Opinion

In our opinion the financial statements present fairly, in all material respects, the financial position of South East Grey Community Health Centre as at March 31, 2014, and the results of its operations and its cash flows for the year ended March 31, 2014 in accordance with Canadian accounting standards for not-for-profit organizations.

Gaviller & Company LLP
LICENCED PUBLIC ACCOUNTANTS
Owen Sound, Ontario
June 18, 2014

MPP Bill Walker and Health Promoter - Crystal Ferguson working together on the Oral Health Campaign.



Statement of Financial Position

South East Grey Community Health Centre
As at March 31, 2014

	2014	2013
ASSETS	\$	\$
Current		
Cash	510,580	340,897
Accounts Receivable	4,563	1,493
HST Rebate Receivable	61,886	
Prepaid Expenses	13,654	12,312
	590,683	354,702
Capital Assets	184,399	302,481
Total Assets	775,082	657,183
LIABILITIES		
Current		
Accounts Payable and Accrued Liabilities	481,326	295,658
Due to MOHLTC	92,275	51,962
Deferred Revenue	17,083	7,072
	590,684	354,692
Deferred Capital Contributions	184,398	302,480
Total Liabilities	775,082	657,172
Unrestricted Net Assets	11	11
Total Liabilities and Fund Balances	775,082	657,183

Statement of Operations and Changes in Fund Balances

South East Grey Community Health Centre
As at March 31, 2014

	2014	2013
REVENUES	\$	\$
Funding from South West LHIN - Operating	2,727,200	2,724,000
Other Income	6,219	4,411
Amortization of Deferred Capital Contributions	118,082	118,082
	2,851,501	2,846,493
EXPENSES		
Salaries, Wages and Benefits	1,941,081	1,878,705
Operating Supplies and Expenses	481,202	669,460
Medical and Surgical Supplies and Drugs	25,934	23,512
Community One Time Expense	244,900	104,772
Amortization	118,082	118,082
Total Operating Costs	2,811,199	2,794,531
Excess of Revenues Over Expenditures for the Year before Due to MOHLTC	40,302	51,962
Due to MOHLTC	(40,313)	(51,962)
Excess of Revenue Over Expenditures for the Year	(11)	-
Unrestricted Net Assets at Beginning of Year	11	11
Unrestricted Net Assets at End of Year	0	11

Basis of the Summary Financial Statements:

South East Grey Community Health Centre (the “Centre”) has prepared these summary financial statements to be included as part of its annual report. The Centre has determined that the level of aggregation presented is adequate for the readers of the annual report. The audited financial statements may be obtained from the Centre.

Ambulatory patient receiving post-operative wound care from clinical RN.



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