



# Faces of Innovation

Annual Report | 2012 – 2013



SHERBOURNE  
Health Centre

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The images in this document  
are used for illustrative purposes only.



**Our Vision:** Healthy People. Healthy Communities.

**Our Mission:** Advance the equity and quality of care and services.  
Improve health for underserved communities.

**Our Values:** At Sherbourne Health Centre, we:  
Strive for excellence and quality  
Embrace diversity and difference  
Act with integrity and accountability  
Believe in equity and fairness  
Seek learning and innovation  
Promote collaboration and teamwork

# Faces of Innovation

2012 – 2013

## Introduction Message from the Chair

The year 2012 – 13 was one of achievement and change for Sherbourne Health Centre.

In support of Ontario's Excellent Care for All Act, we continued the growth of our quality and safety initiatives and submitted our first Quality Improvement Plan to Health Quality Ontario. Building on the strong foundation established with Sherbourne's Quality and Safety Dashboard, the new Quality Improvement Plan gave the Board a valuable opportunity to hear the voices of clients as they recounted their experiences of receiving our care and services. And, to shine a light on the impressive innovators within the Centre, we created a semi-annual Quality Champion Award to recognize staff members and teams who advance our quality goals.

Health care in Ontario is reforming at unprecedented speed and placing increasing responsibility on primary care centres to provide person-centred care and keep residents out of hospitals and emergency rooms as much as possible. This year, Sherbourne proudly became a partner in the emerging Mid East Toronto Health Link, a vehicle to achieve these goals and find ways to increase access, equity and quality in care.

The pending adoption of the Ontario Not-for-Profit Corporations Act gave the Board pause to review our membership policy to ensure compliance with new laws, while maintaining the spirit of community inclusivity upon which Sherbourne is built. Also

in governance, we continued board and policy development to ensure that we continue to have the capacity and strength to oversee the Centre.

Not all changes were driven by external forces however, and in this Annual Report we feature new initiatives and innovations conceived within our Centre. On behalf of the Board of Directors, I extend our appreciation and thanks to all our dedicated staff, volunteers, donors and funders for making these innovations happen. And, as our Founding CEO, Suzanne Boggild, steps down I would like to convey the Board's tremendous gratitude for her leadership and years of service. Suzanne has laid down a foundation of client service, quality and innovation at Sherbourne Health Centre of which we can all be proud.

*Marianne Smith, Board Chair*



“The year 2012 – 13 was one of achievement and change.”

## Introduction Message from the CEO

Since our inception, there are two elements of Sherbourne Health Centre that are particularly powerful: the vibrant diversity of our clients and staff; and our ability to create new, more effective and efficient ways of delivering care and services. It therefore seems fitting to bring these powerful elements together in the 2012 – 2013 Annual Report to showcase our Faces of Innovation.

In the following pages you'll find a sampling of recent innovations of which we are particularly proud: an award-winning Infirmity program that offers homeless people a way to receive life saving cancer treatment; group education sessions to increase the effectiveness of Hepatitis C treatment; partnerships that increase access to dentistry and cancer screening and learning forums to promote LGBT-positive health practices and policies.

Another significant and exciting achievement this year was the development of Sherbourne's new Strategic Plan. The Plan articulates

our vision for *Healthy People, Healthy Communities* and it will serve as a roadmap for Sherbourne's programs and services for the next five years.

In this, my final annual report, I would like to extend my heartfelt thanks to all the wonderful staff, volunteers, funders, donors and partners who have helped make Sherbourne Health Centre such a valued and special place. The depth of community service noted in this Annual Report would not have been possible without your amazing spirit of caring and innovation and your dedication to improving health access and equity. Working with you to create Sherbourne has been the most rewarding leadership opportunity of my career. I have every confidence that Sherbourne will continue to innovate and to care in a very special way for those who need it most.

*Suzanne Boggild, MHSA, FACHE*  
CEO

“In this, my final annual report, I would like to extend my heartfelt thanks to the wonderful staff, volunteers, donors and partners.”



## 2012 – 2013 In Brief

### Mobile Dental Clinic

After years of advocacy the Oral Health Coalition, a group of community-based organizations including Sherbourne, secured government funding to establish an accessible service for those who cannot afford oral health services. A Mobile Dental Clinic, operated by Toronto Public Health, now makes weekly stops at Sherbourne to provide free dental care for homeless and low-income clients.

### International Rotary Visit

More than 15 years after The Rotary Club of Toronto initiated the mobile Health Bus program that Sherbourne still operates today, the President of Rotary International, Mr. Sakuji Tanaka, visited Toronto to celebrate the 100th anniversary of The Rotary Club of Toronto and proudly toured one of the current two buses. With a keen and active interest in this special program, he acclaimed the great work being done by our Health Bus volunteers and staff providing health services and outreach to homeless and street-involved Torontonians.

### Clinical Space in St. James Town

The Rotary Club of Toronto continues to be a catalyst in reducing barriers to care with this year's Centennial Award this year to Sherbourne. Through their generosity, Sherbourne has been able to develop health clinic space within St James Town Community Corner. We hope to provide clinical services from this space in the near future.



## 2012 – 2013 In Brief

### New Leaders

Dr. Laura Pripstein, who has been a Staff Physician at Sherbourne for over six years, was named as the new Medical Director. Graeme Imrie also joined the senior management team in the newly created role of Director of Human Resources/Corporate Communications.

### Electronic Medical Record

Sherbourne has been a pioneer of electronic medical records system (EMR), having been ‘paperlight’ since the beginning. This year, we obtained funding to upgrade our EMR to a state of the art new system that will help make our services more effective and efficient. The implementation has begun and will be complete by the end of 2013.

### PINK Bus

In October, as part of their National Campaign Tour for cancer prevention, the Canadian Breast Cancer Foundation’s Pink Bus stopped at Sherbourne. Over thirty clients visited the PINK Bus to learn about women’s health. They played creative hands-on games, found out about the importance of pap tests in preventing cervical cancer and made appointments for mammograms to detect abnormalities that could indicate breast cancer. We are happy to have participated in the campaign to prevent cancer and to promote women’s health.

**Our Vision:** Healthy People. Healthy Communities.



## 2012 – 2013 In Brief

### Get Out!

Throughout the year, groups of LGBT youth got involved in physical and outdoor pursuits through a new Supporting Our Youth program called Get Out! Up to thirty participants enjoyed rock climbing, biking, skiing, horseback riding and canoeing trips to Lake Temagami, Ontario with other LGBT youth.

The program connects youth with outdoor activities they may have missed out on, for example because of lack of financial means, or because they are not seen to be ‘queer positive’. Adam Benn, Program Coordinator notes that: “the program reduces barriers to a healthy lifestyle for LGBT youth and helps them develop leadership skills and the habit of physical activity, which can prevent health conditions in later life”.

“Get Out has allowed me to connect with like-minded people. It’s not just about having a good time. It’s about challenging yourself in an unfamiliar setting, working as a team, conflict resolution and understanding group dynamics. I have learned many significant lessons from being a part of Get Out!”

– *Bryanna, Get Out! Participant*



## **INNOVATION in Cancer Screening and Care**

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### **Cancer Care for Homeless and Under-housed People**

In November, Sherbourne was honoured to receive the coveted Cancer Quality Council of Ontario Innovation Award for filling a serious gap in cancer care.

Cancer treatment is increasingly moving to a ‘home care’ model, with treatment administered in specialist centres and the patient recovering at home. Homeless people face significant barriers to accessing treatment because treatment and rehab facilities often do not accept clients with no fixed address. Undergoing chemotherapy while living on the street is impossible and shelters are unsuitable for cancer patients, who need a safe, hygienic environment to recuperate.

Oncologists faced the difficult decision of significantly adapting care plans or even forgoing life-saving treatment for homeless people.

Clients struggled to access cancer care in the existing model, and Sherbourne’s Infirmery team wanted to change that. They developed a model wherein up to 20% of beds in our Infirmery are allocated for clients in chemotherapy or radiation treatment. CCAC nurses administer chemotherapies (as in home-care situations) and Sherbourne staff help to monitor and manage side effects, ensure clients attend appointments, and provide psychosocial and other support.

Sherbourne’s competent and adaptable approach to care, gained from a decade serving homeless and under-housed people, gives clients a better chance of overcoming cancer, as well as improving their overall wellbeing. To date, twenty homeless people, aged 30 to 70 have received treatment for cancer in the Infirmery.

“Our clients have shown incredible strength going through cancer treatment... It’s quite inspirational.” – *Dr. Laura Pripstein, Medical Director*



## **Our Impact** Innovation Highlights

### **Cancer Awareness Ready for Education and Screening (CARES) Project**

The Rotary Club of Toronto Health Bus program partnered with Women's College and St. Michael's Hospitals on the CARES project. This pilot project engaged street-involved sex workers to increase their cervical and breast cancer screening rates, and raise awareness about the importance of early cancer detection. A Nurse Practitioner, an Outreach Worker and a Peer Worker offered pap tests and provided health education, all on board the Health Bus. Plans are now underway to spread this model with a larger group of community health agencies and an expanded mandate to provide STI screening and connect clients with primary health care providers. The CARES-Sherbourne experience will be presented later this summer at the, "In Sickness & in Health" International Conference in Montreal.

### **INNOVATION in Community Capacity Development**

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#### **Rainbow Health Ontario (RHO) Public Policy Institute**

In October, we launched our RHO Public Policy Institute, an innovative training program for individuals interested in engaging in public policy. The program is for lesbian, gay, bi and trans (LGBT)

community members wishing to learn how policy changes can impact on the well-being of LGBT communities.

Participants from across Ontario came together for eight day-long sessions facilitated by leading policy experts. They learned how to use public policy as a tool for social change at all levels of government and how to translate community needs into policy language.

While many positive changes have been made in the last four decades, our Public Policy Institute has created community capacity and expertise throughout Ontario to engage with public institutions in reducing systemic discrimination and inequality in health and social service provision.

"The skills I have learned are invaluable. The Public Policy Institute gave me both the tools and the opportunity to affect policy change in my community. I am moving forward fearlessly with policy issues!"

– *Leanne, Public Health Nurse, London, Ontario*

## Our Impact Innovation Highlights

### Building Capacity to serve Gender Independent Children and their Families

In recent years RHO has received a growing number of calls from parents and service providers seeking community-based information and resources for families with gender independent children (children whose gender expression and/or gender identity differs substantially from that expected of their assigned gender). To date there have been very few resources that address the stigma, discrimination and social exclusion many of these children face, which research shows can lead to experience poor mental and physical health in later life. In Ontario, “there are few supports for Gender Independent Children; those that exist are often difficult for families to find.”

Working with a thirty person advisory committee of parents, clinical providers, researchers, mental health counselors, educators and social workers from across Ontario, we developed comprehensive materials

to educate health and social services providers. The materials have received high praise from service providers and families who were hungry for high quality resources that support an affirming approach to gender diversity in children. The fact sheet was lauded by Dr. Diane Ehrensaft, a leading US-based Psychologist, as “the best resource I’ve ever seen”. All of these resources, as well as links to supportive providers, are now available on the RHO website.

### INNOVATION in Women’s Health

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#### Hepatitis (Hep) C Women’s Group

Sherbourne’s group for women with, and at risk from Hep C: SHHH (Sherbourne Health Hep C Help) is an example of a new, collaborative approach to promoting health in our community. Every Thursday up to 25 women and trans women come together to learn

“In Ontario there are few supports for Gender Independent Children; those that exist are often difficult for families to find.” – *Jake, Project Coordinator*



## Our Impact Innovation Highlights

about transmission, reducing harm, and living with and treating Hep C. For the women, aged between 20 and 65, the group is a chance to bond with their peers in a safe, women-led environment. They empower themselves with information about their physical and emotional wellbeing, as well as socialize and develop trusting relationships with health care providers.

The group serves as both an information-sharing, confidence-building prelude to an intensive medical treatment regime, and a support for women already in the program.

“I was introduced to the program and thank god! I was feeling hopeless with the stress of no treatment, no housing, no support and felt mentally unbalanced. Through the program, I was able to obtain mental health care, a liver specialist, a psychiatrist, a family physician, and a Hep C nurse.”

– Jennifer, Hep C Program Graduate

## WINK Peer Development and Quality Improvement Award

The inaugural Sherbourne Quality Improvement Award was awarded to the team to who oversee the Women in Need ‘Klinik’ (WINK) program. WINK was conceived to help street-involved women and trans women by providing a space where they can access primary care and mental health counselling on their own time. WINK also offers a nutritious breakfast and a safe, sociable environment for women to develop life skills and self-esteem.

The Quality of Care Committee, comprised of Board members, community members and managers, recognized WINK’s success integrating inter-disciplinary teams and providing client-focused care for often marginalized women, noting that clients are actively involved in their own care and help shape its outcome. Notably, sixty clients have been connected with primary care providers within the Sherbourne Family Health Team.

## Our Impact Innovation Highlights



The program took on an empowering new dimension with the introduction of HIPS (Healthy Initiatives, Promoting Safety Project), a multi-agency initiative that helps street-involved women develop outreach skills so that they can support other women to engage in their own health care and have control over their lives. We are proud to be part of a network where ten women, including two from WINK, graduated from the program and are currently supporting their peers and actively engaged in their communities.

“I was in the sex trade for twenty years. I came through the HIPS program, now I’m working with women that need help getting identification, health care and housing. Society brushes them off – It makes me feel good that I can help put women on the right path. Everyone [in the program] is so supportive and non-judgmental.”

– Bev, HIPS Outreach Worker

## Service Statistics

Program	Total Actual 2012 – 13 Volume
LGBT Health	
LGBT Clinical Team	11,833
Mental Health/Counselling	3,391
SOY	9,505
Parenting Network	12,652
<b>LGBT Subtotal</b>	<b>37,381</b>

Program	Total Actual 2012 – 13 Volume
Urban Health	
Urban Clinical Team	13,294
Mental Health/Counselling	1,105
Hepatitis C Program	3,624
Health Buses	20,113
Infirmery	13,790
<b>Urban Subtotal</b>	<b>51,926</b>

Program	Total Actual 2012 – 13 Volume
Newcomer Health	
Newcomer Clinical Team	4,829
Mental Health/Counselling	1,486
Diabetes Education	1,457
Health Promotion	1,122
<b>Newcomer Subtotal</b>	<b>8,894</b>

**SHC Programs Total**  
**98,201**

## Thank You

David describes the illness that brought him to Sherbourne's Infirmary as "liver abscesses and cancer-lite". Too weak to care for himself and without family who could help, he was grateful for the "really great care" he received here. He wanted to give back, especially when he learned that many of Sherbourne's services for marginalized and low-income clients rely on financial support from the community. He contacted us to ask: "How can I help you raise the money you need?"



David's call coincided with an exciting new partnership between Sherbourne and Raising the Roof, who support long-term solutions to homelessness through their annual Toque Campaign. Throughout winter 2012, our staff and volunteers sold Raising the Roof's trademark colourful toques, during early morning stints at Union Station, at music and cultural events, and as part of a nation-wide campaign on Toque Tuesday. A portion of net proceeds will support the Infirmary, WINK and SOY's Monday Night Drop-In. All of these programs connect homeless, vulnerably housed and street-involved clients to critical resources that help them in the longer-term.

It takes patience, persistence and a ready smile to sell toques at any time, but especially early in the morning on a freezing day. With his gentle but charismatic approach, David was so successful that staff affectionately called him "The Toque Whisperer".

*"If it wasn't for Sherbourne I'm not certain I would have survived. Raising money for Sherbourne was extremely edifying because it's such a great place! It really made me feel like part of a greater good."*

*– David, Volunteer (back row, right)*

## Thank You

Our volunteers, donors and partners inspire us and strengthen our work and every contribution makes an impact. Here we celebrate the groups, organizations and institutions who supported our work so generously in 2012 – 13:

The Government of Canada, the Government  
of Ontario and the City of Toronto  
The Ada W. Slaight Fund and the Vital Toronto Fund  
at the Toronto Community Foundation  
American Eagle Outfitters  
ArtReach Toronto, a project of Tides Canada Initiatives  
The Big Carrot Natural Food Market  
BMO Financial Group  
Community One Foundation  
The Dušan Nedelko Foundation  
exeQutive  
Fly and Fire on the East Side  
The Geoffrey H. Wood Foundation  
Gift To A Star  
The Harold E. Ballard Foundation  
The Katharina Weger Foundation

K.M. Hunter Charitable Foundation  
The Marjorie and Joseph Wright Memorial Foundation  
Mountain Equipment Co-operative  
Paloma Foundation  
Pride Toronto  
RBC Foundation  
REALTORS Care Foundation  
The Rotary Club of Toronto  
TELUS Toronto Community Board  
TD Bank Group  
Tippet Foundation  
Toronto Arts Council  
Toronto Arts Foundation  
Toronto Gay Ski and Snowboarding Club  
Toronto Real Estate Board  
Xtra



People support Sherbourne in many ways. Volunteers and fundraisers give their time, energy and inspiration; monthly and annual donors, and those who make bequests in their wills ensure the continued success of our initiatives today and for future generations. However you choose to help, thank you – you make a world of difference.

## Financial Statements Statements of operations years ended March 31, 2013 and March 31, 2012

Revenue	2013	2012
Ministry of Health and Long-Term Care (“MOHLTC”) and Toronto Central Local Health Integration Network (“Toronto Central LHIN”) funding	\$ 7,033,485	\$ 7,212,540
Amortization of deferred capital contributions	1,119,813	1,196,974
Family Health Team	2,877,108	2,642,862
Fundraising	224,409	230,270
MOHLTC Health Research Grants	900,924	904,740
Other grants and guarantors	5,000	44,400
Trans Health Grant	117,763	171,633
Supporting Communities Partnership Initiative	47,010	53,420
Other revenue and recoveries	154,505	135,719
	<b>\$ 12,480,017</b>	\$ 12,592,558

Expenses	2013	2012
Building services and utilities	\$ 1,214,285	\$ 1,561,504
Finance	322,214	490,673
Information systems	483,105	471,874
Administration	533,434	534,529
Communications	7,123	26,737
Human Resources	376,407	272,088
Fundraising	91,244	77,558
Clinical service		
Primary care and Family Health Team	3,707,735	3,773,741
Infirmary	1,387,979	1,402,452
LGBT primary care	1,507,357	1,746,017
Health bus/mobile	529,143	567,962
Naturopathic clinic	14,435	37,842
Trans Health	117,763	171,633
Rainbow Health Ontario	777,835	783,693
Amortization of capital assets	1,145,344	1,223,714
	<b>\$ 12,215,403</b>	\$ 13,142,017
Excess (deficiency) of revenue over expenses	\$ 264,614	\$ (549,459)

## Financial Statements Statements of financial position as at March 31, 2013 and March 31, 2012

<b>Assets</b>	<b>2013</b>	<b>2012</b>
Current assets		
Cash	\$ 2,661	\$ 5,573
Accounts receivable	244,443	303,661
HST receivable	149,765	162,873
Prepaid Expenses	237,825	134,872
Inventory	37,970	62,970
	<b>\$ 672,664</b>	\$ 669,949
Capital assets	<b>\$ 20,545,060</b>	\$ 21,087,776
	<b>\$ 21,217,724</b>	\$ 21,757,725

<b>Liabilities</b>	<b>2013</b>	<b>2012</b>
Current liabilities		
Line of Credit	\$ 32,574	\$ 372,903
Accounts payable and accrued charges	1,319,757	1,316,379
Deferred revenue	572,510	477,399
	<b>\$ 1,924,841</b>	\$ 2,166,681
Deferred capital contributions	<b>\$ 19,752,250</b>	\$ 20,315,025
	<b>\$ 21,677,091</b>	\$ 22,481,706

<b>Fund Balances (deficit)</b>	<b>2013</b>	<b>2012</b>
Invested in capital assets	\$ 792,810	\$ 772,751
Unrestricted	(1,252,177)	(1,496,732)
	<b>\$ (459,367)</b>	\$ (723,981)
	<b>\$ 21,217,724</b>	\$ 21,757,725

## Looking Forward

2013 – 14 will see the appointment of a new Chief Executive Officer, replacing Suzanne Boggild, who has stepped down after fourteen successful years. The Senior Management Team, in consultation with staff and partners will put Year 1 of the Strategic Plan 2013 – 18 into action.

Surveyors from Accreditation Canada will visit Sherbourne Health Centre to assess how we have performed against health care best practices since we were granted Accreditation with Commendation in 2009.

Sherbourne will work with partners in the Mid East Toronto Health Link to address health priorities in the neighbourhood.



# Faces of Innovation

2012 – 2013





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