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## *Annual Report 2016-17*

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We are pleased to report on the following Highlights for the OCCHC Year 2016-17:

### **1) Strategic Plan – Programs, Services, & Operational Goals**

- a) 85% of *Year One Goals* of the Strategic Plan 2016-19 were underway or complete. Of particular note:
- i. *New Walk-In Mental Health counselling* at the OCCHC gained awareness and momentum
  - ii. *System Navigation / Outreach services* were re-established in *Ingersoll* at the Ingersoll Nurse Practitioner Clinic
  - iii. *Name Change* – very positive reaction from wide range of community stakeholders
  - iv. Fully *CCA Accredited* in our first National Accreditation process
  - v. *Client Advisory Team* to the Board was created
  - vi. *Corporate By-Laws* and *Policy and Procedure Manual review* were completed
  - vii. *Capital Project* – consistently monitoring and responding to the requests of the Capital Branch as we work our way through their new Approval Template & Process
  - viii. Adjustments to processes and procedures in *Primary Care* were trialed / implemented in order to strengthen efficiencies and support client access to services
  - ix. OCCHC partially funded the Situation Table Community Report-Back event and materials
- b) OCCHC introduced the *Baby Box program*, distributing to various drop-off points in Oxford (free upon completion of on-line certification) ~ The Baby Box began in Finland in 1938 as a way to lower infant mortality rates. It was recently introduced in Ontario in June 2016. It was also a way to educate new mothers and help ensure all babies got an equal start in life, particularly beneficial for low income families. Parents can expect to receive a safe-certified mattress, diapers and a variety of childcare products.
- c) Development and implementation of chronic disease programs including Diabetes Boot Camp, COPD, Osteoporosis, and Pulmonary Rehabilitation.

## **2) Community Development**

- a) Co-Led the Oxford *Community Index of Wellbeing Survey* process, executed by the Canadian Index of Wellbeing office out of University of Waterloo. Launched results of the Survey in February 2017 with more than 100 stakeholders, and efforts continue to anchor the report in the work of many agencies
- b) Co-Led (with CMHA) the *Oxford Health Link* Steering Committee plus implementation Year One ~ fully staffed with Full Time Project Manager
- c) Co-Led (with OECYC and Public Health) the development of an *Oxford Child and Youth System Planning Table* – the foundation for moving forward is established
- d) Co-Lead Agency (with CMHA and ADSTV) to assist in a proposal for assisted-living LHIN funding for the redevelopment of *Blossom Park*, Woodstock
- e) Lead Agency *Oxford Homelessness Prevention Pilot* – funded 2 years by the United Way Oxford.
- f) Lead Agency *Oxford Oral Health Access Initiative* – funded 2 years by the United Way Oxford

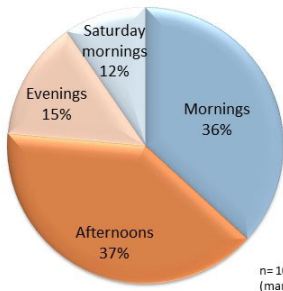
### **OCCHC Community Engagement Representation:**

- g) Situation Table – Working and Steering Committees
- h) Oxford Mental Health and Addictions Network
- i) Area Provider Table (LHIN funded Agencies)
- j) Oxford Local Immigration Partnership (LIP)
- k) Oxford Addictions Treatment Strategy Working and Steering Committees
- l) Suicide Prevention Oxford Leadership Collaborative
- m) Oxford Suicide Prevention Committee
- n) Health Link Leadership Collaborative, South West LHIN
- o) Quality Advisory Committee, South West LHIN
- p) Human Services Justice Coordinating Committee
- q) Food Secure Oxford – Social Planning Council Oxford County
- r) LHIN Subregion Integration Table – Primary Care Reform (Note: membership now confirmed)
- s) Future Oxford Partnership – a community Board dedicated to overseeing / implementing the *Future Oxford Sustainability Plan*, with 70+ actions supporting the areas of Community Oxford, Economy Oxford, and Environment Oxford
- t) Tillsonburg Resource Network
- u) CATER – Community Action Traumatic Event Response, partnership
- v) Oxford Drug Awareness Committee
- w) Mental Illness Awareness Week community team
- x) Mental Health Week community team

### 3) Client Satisfaction – Snapshots from 2016-17 Survey

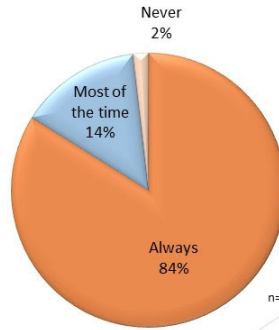
#### Is it easy for you to come to the Health Centre?

When would you like to have appointments/services?



n=104 answers  
(many people picked multiple answers)

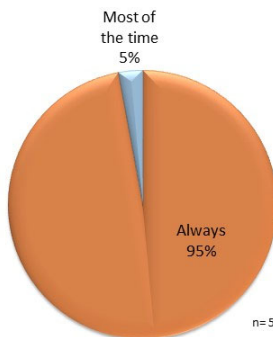
Are we accessible?



n=56

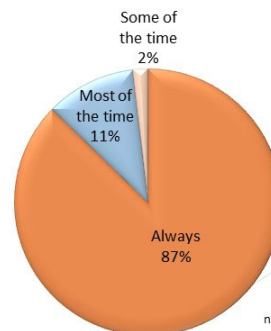
#### How do you find our services?

Are services provided in a language that is comfortable for you and that is sensitive to your culture?



n=55

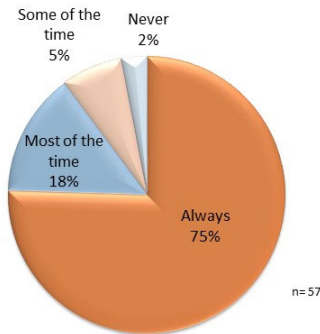
I receive services when I need them.



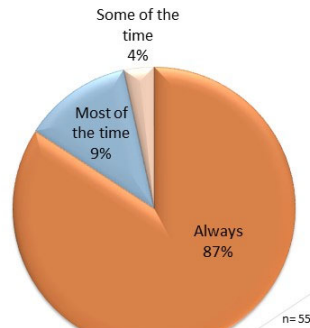
n=55

## Are you happy with our programs?

Are you satisfied with the opportunities to participate in the planning of the programs you need?



Are you satisfied with the services/programs that you receive through the Health Centre?



## What do you think of our services/programs?

*"More services in Tillsonburg"*

*"One hour follow-up after training courses."*

*"informative hands on and do a lot anti smoking and physio"*

*"Craving change was super helpful."*

*"I suggest having a coordinator talk to the recreation coordinator next door at Oxford Self-Help Network. More promotion between the two buildings on groups, resources, etc would be great. Plus, having your staff put on groups; educational or recreational, there would be excellent."*

*"I really like all the doctors and practitioners I've seen"*

*"They should have more evening hours."*

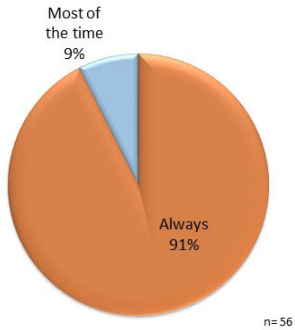
*Need "more groups"*

*Best part of the health centre is "the cooking classes, nutrition, diabetic info."*

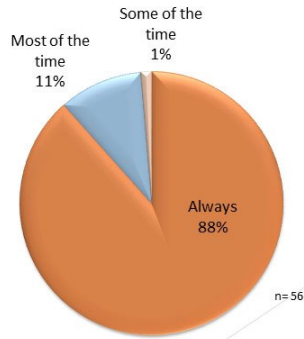
*"Everyone works together, different specialties, etc."*

# What do you think of our staff?

Do you trust us to keep your information private?



Are we easy to talk to and do we explain things in a way that you can understand?



## We want to improve. We value your input.

*"Woodstock needs more available walk-in."*

*"mainly no appointments available, need to use walk-in or ER"*

*"Have more GPs, open some alternative staff who have low or no wait times to the public who need them. ie. psychiatrist, and respiratory therapists"*

*"Have reminder calls."*

*"I believe if I could have the same Dr. or nurse practitioner it would be much better"*

*"More doctors."*

*"More? Of same?"*

*"Have not been able to access services here because of emergencies, can't wait 3-7 days"*

*"there is a difference in treatments/every one has a different opinion and we come home confused"*

*"less wait time to see Dr."*

#### 4) Human Resources

- a) We were challenged by the unexpected departure of two Full Time Physicians – one FT Physician was added in February 2017, and Locum Physicians were recruited
- b) Throughout the year, a new Physiotherapist was introduced in our Episode of Care Clinic; a vacancy in a Therapist position was held pending decisions on budget; a new Nurse Practitioner was hired; project managers for our two United Way projects, as well as Oxford Health Link, were recruited; and a FT Medical Receptionist was added.

#### 5) Accountability

- a) Received and deployed new Recruitment and Retention funding from the LHIN ~ reaching a standardized target % for benefits, and increasing wages for Nurse Practitioners and Dietitians
- b) Met Multi-Sectoral Service Accountability Agreement (MSAA) indicators – Access to Primary Care rates; Cervical Cancer Screening; Colorectal screening; Inter-professional Diabetes; Flu vaccinations; Breast Cancer screening; and Retention Rate for Nurse Practitioners and Physicians
- c) Year-End Financial position (April 2016-March 2017) ~ a surplus, primarily due to Physician vacancies.

*Respectfully Submitted:*

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Vanessa Giuliano, Board Chair

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Randy Peltz, Executive Director

.....*You Belong*.....

