



Rideau Community  
Health Services



ANNUAL  
REPORT  
2013/2014

## Rideau Community Health Services Board Members

Graeme Bonham-Carter, *Chair*  
Tom Rankin, *Vice-Chair*  
Don Dutton, *Treasurer*  
Janice Hopkins, *Secretary*  
Pamela Blackstock, *Director*  
John Mundy, *Director*

Wendy Quarry, *Director*  
Roderick Fournier, *Director*  
Ainsley Charles, *Director*  
Christina Dolgowicz, *Director*  
Bill Lough, *Director*  
Wynn Turner, *Director*



## Vision

Healthy people  
creating  
healthy communities



# Chairperson and Executive Director's Report

## Did You Know?

This year marks the 40<sup>th</sup> Anniversary of Rideau Community Health Services (RCHS).

Incorporated in 1974, the Merrickville Medical Centre became Merrickville District Community Health and Services Centre (MDCHSC) in 1984. At this time the organization officially became a Community Health Centre. MDCHSC expanded to include Rideau Valley Diabetes Services (RVDS) in 2003 and Smiths Falls Community Health Centre (SFCHC) in 2006. In November 2012, RCHS became a host to the South Lanark, Leeds and Grenville Telemedicine Services, a region within the South East Telemedicine program. RCHS is the oldest rural Community Health Centre in Ontario.

Unlike other provinces, Ontario health service provider (HSP) organizations are governed by local boards. The purpose is to make health care responsive to local needs and conditions, rather than being subject to a 'one size fits all approach', implemented through regional health authorities. Two highlights of the past year for the RCHS Board have been 1) the work of the Community Engagement Committee, and 2) the involvement of the Board in the Rideau Tay Health Link (RTHL). Both activities emphasize the benefits (and complexities) of using local governance boards.

The Board's Community Engagement Committee (CEC) organized a well-attended membership meeting (December 12 in Merrickville) to develop ideas about community involvement in RCHS. Members said they want to be more engaged in discussion and debate about community health and to participate as volunteers, as board members or committee members, recruiting new members, in advocating for Community Health Care and for RCHS, in fundraising, in work that improves the community and the health of individuals and the community. The CEC is now active in expanding membership and keeping members better informed about RCHS. This is an example of how local governance can promote community engagement.

RCHS is the 'coordinating' organization for RTHL and, with the active support of the Board of the Perth and Smiths Falls District Hospital, organized a Board-to-Board meeting for all 13 of the organizations in RTHL. The purpose was to develop consensus among all the Boards involved, to get an update on developments in Health Links (including others besides our own) and to understand better how member Boards can best contribute to the success of Health Links. A second Board-to-Board meeting is planned for June. The role of Boards in Health Links is not yet clear, but the need to work together on all aspects of health is agreed by all.

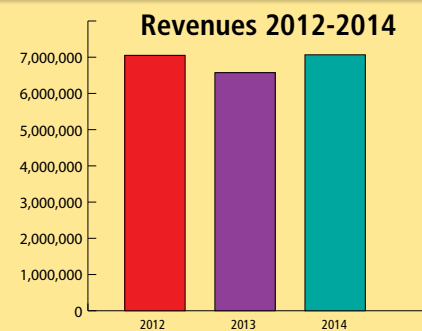
Board and staff have been active this past year in preparing for an accreditation review (end of April) by the Canadian Centre for Accreditation (CCA). The accreditation team noted that "RCHS has a strong and committed board dedicated to the organization and ensuring quality services". They mentioned the Board's comprehensive self-evaluation process, and liked our systematic approach to evaluating legislative compliance.

RCHS strongly supports the idea that community health should be more than doctors and hospitals, and the 'model of health and wellbeing' advocated by the Association of Ontario Health Centres aptly expresses this philosophy. RCHS has always supported activities that promote health, but 3 recent examples of how we are promoting this view through Memoranda of Understanding and financial services are 1) the new Lanark Leeds and Grenville Food Hub (promoting the production and distribution of local healthy food), 2) the Physician Recruitment Taskforce (getting new doctors to move to Smiths Falls), and 3) the coordination and secretariat role we now play in the RTHL.

Finally, we would like to thank the Board members and the staff of RCHS for their dedication and commitment throughout the past year.

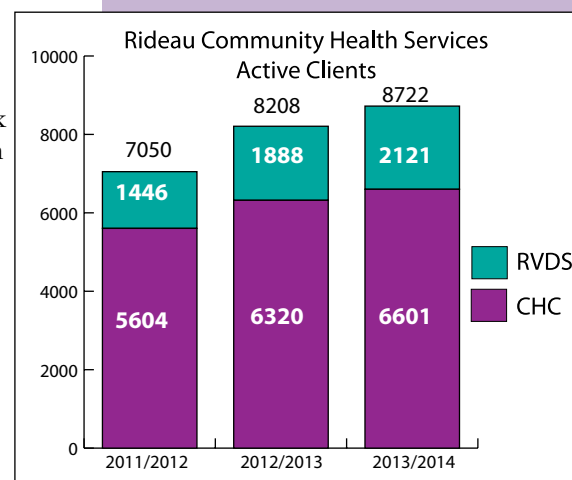
**Graeme Bonham-Carter**  
Chair

**Peter McKenna**  
Executive Director



STATEMENT OF OPERATIONS			
	2012	2013	2014
REVENUES:	\$7,026,825	\$6,604,202	\$7,090,508
EXPENSES:			
Salaries & Benefits	\$5,524,900	\$5,185,592	\$5,190,044
Operating	\$1,474,469	\$1,428,939	\$1,906,679
Total Expenditures	\$6,999,369	\$6,614,531	\$7,096,723
Excess of Revenue over Expenditures	\$27,456	-\$10,329*	-\$6,215*

\* The deficit is created due to an accounting difference in the amortization of capital assets and its related funding. This has no effect on cash flow.



### Technology at RCHS



Technology has become a key tool for service delivery to our Clients and in our daily business. It is used for Client care, communications, planning, reporting, research, finances and education. To

ensure we have full access and high availability to the technology, we are continuing to grow our capacity and plan for contingencies. Our Smiths Falls site has had the benefit of a backup generator since opening in its current location and in the Spring of 2014, a generator was installed at our Merrickville site.

The RCHS IT Department supports our three sites, 80 staff members, 127 workstation and laptops and 15 servers as well as the many other devices, software and other technologies we use every day.

### Winning Smiles

Low income clients and community members benefitted from one time funding from the SELHIN for dental care. Between December 2013 and March 2014, 112 low income and uninsured adults in Lanark Leeds and Grenville Counties received 1147 individual treatments at the SFCHC dental clinic or from community dentists. Eleven individuals received partial or full dentures.

Before



After





## Telemedicine Services

From April 1, 2013-March 31, 2014 RCHS telemedicine services has

- completed 1344 clinical appointments for a total of 2881 people (some sessions are done in groups).
- saved clients from having to travel 199,430 km between April 1<sup>st</sup> 2013 and March 31, 2014. (Savings of approximately \$100,000)

We are now providing access to over 20 different speciality areas by telemedicine

## Mission

*As a community-governed organization within Ontario's health and social service system, we engage individuals and communities to improve health.*



Rideau Community  
Health Services



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Every **One** Matters.

[www.rideauchs.ca](http://www.rideauchs.ca)