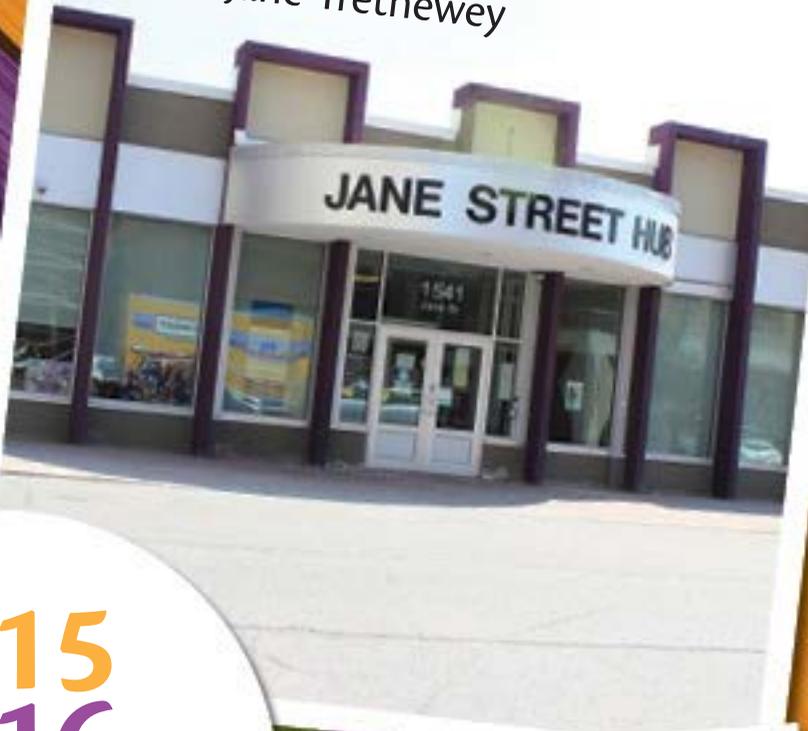


Unison Bathurst-Finch



Unison Jane-Trethewey

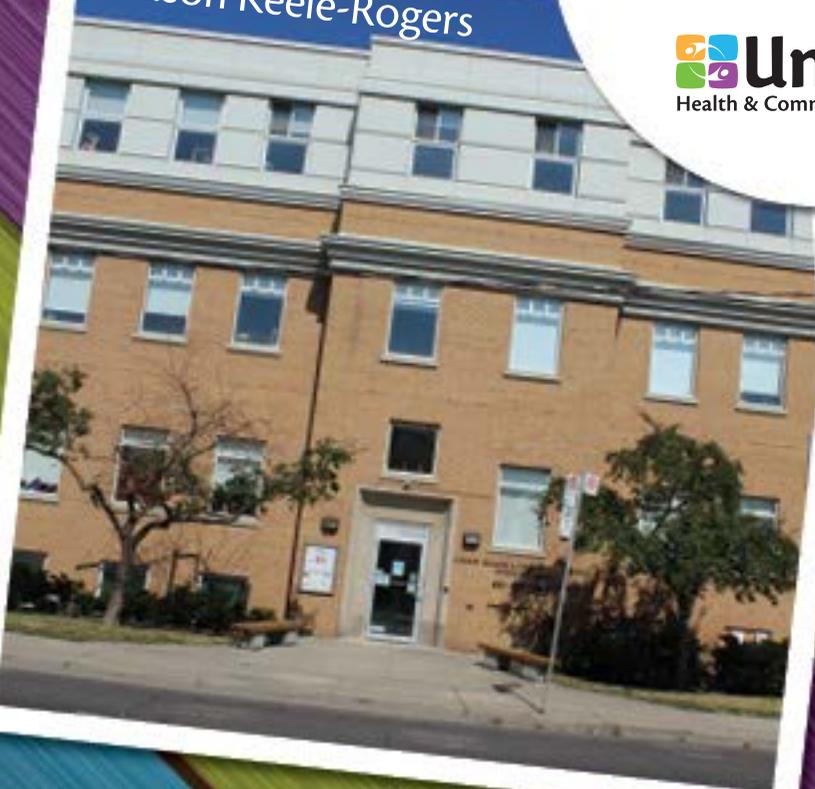


2015  
2016

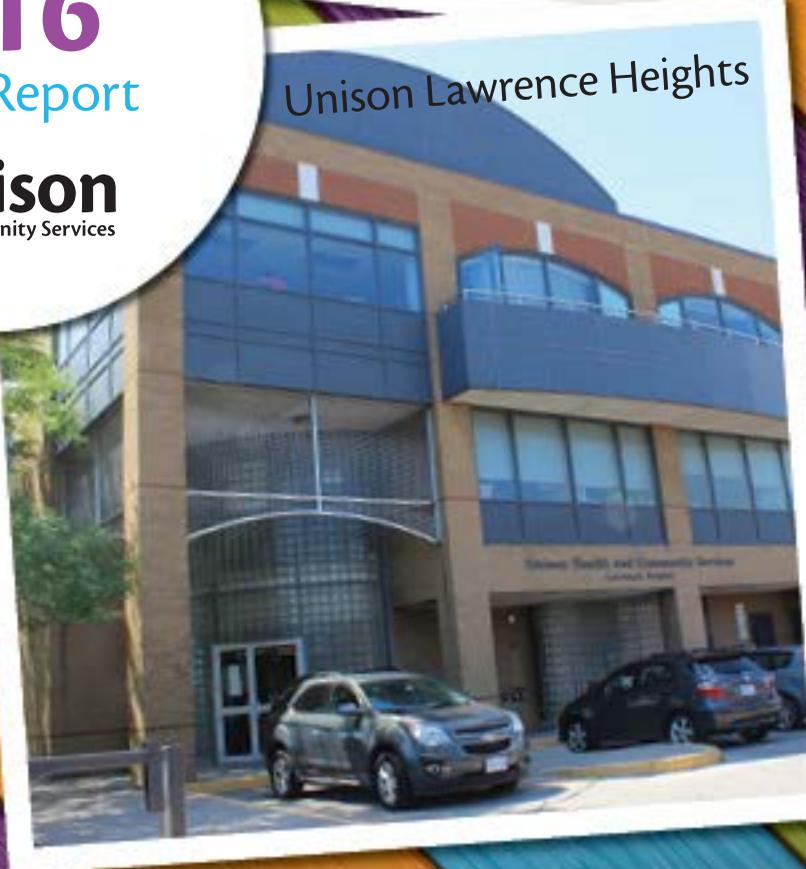
Annual Report

 **Unison**  
Health & Community Services

Unison Keele-Rogers



Unison Lawrence Heights



# Message from the Chief Executive Officer and the Board Chair

We are pleased to announce the approval of Unison's Strategic Plan 2016–2021. We would like to thank all our clients, stakeholders, funders and community partners who took the time to participate in surveys and focus groups that greatly informed our planning and decision-making. An overview of Unison's Strategic Plan 2016–2021 is included in this Annual Report.

**We are excited to report that work on many of the strategic priorities, such as improved client-centred care and health outcomes for our priority populations, is underway.**

A central feature of Unison's new strategic plan is identification of four priority populations. The priority populations are: people living with mental health and/or substance use issues, seniors with complex needs, youth experiencing barriers and LGBTQ+ communities. Each of these populations is unique and has specific healthcare and other needs, but they share their lack of equitable access to services and programs in northwest Toronto. While Unison will continue to serve a very diverse range of clients and communities, our staff have started

to look at how we can deepen our abilities and approaches to serve these particular priority populations. Over the next five years, Unison hopes to work with our partner agencies, stakeholders and funders to improve our priority populations' access to effective, high quality services in northwest Toronto.

As part of the strategic plan, Unison aims to develop new and creative ways for clients, their families and community members to become more involved in providing innovative input and important feedback to plan and improve our services. In 2015, 900 clients completed Unison's client experience survey and we conducted surveys of community hub users at both hubs. We also regularly evaluate specific programs and service areas. Last year we introduced some standard evaluation questions for group program participants, which will help us to monitor the quality and effectiveness of the diverse range of programs we offer. We learned that many clients are very happy with our services and programs, but we still have work to do, such as making it easier to get primary care appointments when sick, and offering more choices in exercise and other group programs. Stay tuned for announcements of more new and different opportunities for clients and community members to give input in the coming months and years.

In order to achieve our strategic priorities, we need strong staff teams. In 2015, Unison took one important step in this direction with the formation of the Urban Health Team. This team



“I came to Unison regarding my health. My first visit was a learning experience. I was treated with respect and staff listened to my concerns. I enjoyed my visit and hope to come back.”

brings together health promoters and program staff from four locations, to engage and build capacity with the communities to promote healthy and equitable neighbourhoods. The team actively engages in the communities through projects like Residents First in the Lawrence Heights area and Rockcliffe Smythe Community Garden and Response and Recovery in wards 11 and 12; ongoing services, such as prenatal education, harm reduction and critical incident support; and contributions to ongoing community development networks.

Poverty continues to be a challenging situation for many of our community members living in northwest Toronto. We know that one out of every four children are living in poverty, facing housing and food insecurity. 46% of recent refugees and 33% of people in racialized groups live in poverty. Precarious employment is increasingly the norm and the cost of living in Toronto continues to rise. These realities push us at Unison to continue to enhance our services, programs and advocacy for system change.

We want to thank all our staff for their energy and dedication to achieving our vision of healthy communities, our Board of Directors, community partners and funders for guiding and supporting our work, and of course all our clients and communities for trusting us with your care. Thank you for your continued support as we look forward to another exciting year in our uncompromising commitment to deliver accessible and high quality health and community services to achieve our vision.



Michelle Joseph, CEO



Laurelle Knox, Chair

## Vision

Healthy communities.

## Mission

Working together to deliver accessible and high quality health and community services that are integrated, respond to needs, build on strengths and inspire change.

## Values

**Accountability:** As a publicly funded organization, we are responsible to our stakeholders. We strive for integrity in our work and for the effective use of resources. We seek improvement through critical enquiry and continuous learning.

**Collaboration:** We embrace partnerships, both inside and outside of our organization. We foster the active participation of community members in our work, and we celebrate our collective achievements.

**Equity:** We work to celebrate diversity and eliminate oppression in all its forms. We are committed to treating all people with dignity, honesty and respect, and we value individual choice and self-determination.

12,515

Primary health care clients seen

84,668

Primary health care visits

7,994

Program participants

232

Employees

223

Corporate members

190

Volunteers and student placements

4

Full-service locations

2015–2016  
By the  
Numbers

Spanish, Portuguese,  
Russian, Italian,  
Somali

Top 5 languages (after English)



# Strategic Plan 2016–2021

STRATEGIC PRIORITIES ]



## Client Centred Care

We will provide seamless programs and services that are evidence-based and which reflect the input that our clients provide for program/service design, planning, delivery and evaluation.

Integrate and use internal and external information sources to guide needs-based planning and service delivery

Implement seamless and universal intake and referral to facilitate service/system access and navigation

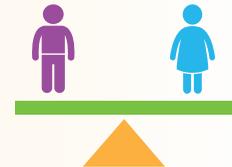
Implement strategies for clients to give meaningful input on policies/protocols and services/programs

Review, assess and enhance programs and services to ensure that they are safe, effective and meet client needs

STRATEGIC ]

## Equity

We will reduce gaps in services at Unison and work with our partners in the community to meet needs and achieve better health outcomes for our priority populations.



Enhance and increase mental health services and substance use supports available at Unison

Increase capacity of Unison to support LGBTQ+ clients and community members

Enhance programs and services for seniors with complex needs

Develop and implement an engagement strategy with/for youth experiencing barriers

STRATEGIC ENABLERS ]

## Stewardship and Optimization

We will improve health outcomes for clients and community members through responsible decision making and optimal use of our organizational resources.

Engage and enable staff to use skills and talents | Align agency resources to optimize effectiveness | Engage staff to co-create a great workplace

## Improvement and Change

We will continuously learn, improve and innovate in order to deliver the best quality services possible.

Use change management frameworks to improve our ability to undertake change

Use quality improvement frameworks to test, learn and adapt what we do

Use project management frameworks to undertake initiatives in a more systematic way

Over the coming five years our strategic priorities will focus on increasing access and improving outcomes for the following priority populations:



People with mental health and addictions

Seniors experiencing complex needs

Youth experiencing barriers

LGBTQ+ communities

# Unison Success Stories

**PROGRAM: Unison Links**  
**INDICATOR: Client Access to Service**

Unison Links was initiated in 2012, to expand Unison's role in helping clients and community members access internal Unison programs and services provided by community agencies. Currently, the Unison Links Program is offered at both the Keele Rogers and Lawrence Heights sites. At Unison Links, you will find social work/social services placement students or summer career students working together with Unison staff. Clients can drop in or phone during opening hours with no appointment required.

From April 2013 to April 2016, 2,485 clients sought help from Unison Links. Over 55% of clients heard about the program through our community health promotion program and flyers, and the rest were referred either by internal providers or community agencies. Almost 85% of clients visited the program in person; and the others called for resources and assistance.

There are numerous reasons why clients request information from Unison Links. Among them, clients look for more help on income support services (22%), immigration and settlement services (15%), food security (13%), housing services (12%), and general community services (10%). We were pleased to hear that over 95% of clients agreed that their needs were met. One of the unique services that Unison Links offers is forms completion. During this three-year period, the program assisted 626 clients in completing

various forms, such as the Canada Child Tax Benefit, the Canada Pension Plan and other forms.

Vivienne is a client who has been coming to Unison for a long time. She said, "I consider this drop-in resources centre especially helpful because it provides immediate services and assistance. Unison Links effectively helped me to accomplish many form filling tasks such as medical letters and complaint letters. Sometimes I found it hard to find someone to help me to complete forms and letters but Unison Links has definitely assisted me and I am very grateful for their help." She expressed great gratitude to all Unison Links staff for always being patient, polite and giving honest suggestions.

**PROGRAM: Housing Help Program**  
**INDICATOR: Collaboration**

Starting as a Home Share Program in the early 1980s, Unison has been providing a full range of housing help and eviction prevention services for clients who have had difficulties securing appropriate, decent and affordable housing. For clients living in Toronto with low and fixed incomes, recent statistics indicate that they need to wait at least eight to 10 years for subsidized social housing. Housing has long been a national crisis that greatly affects the wellbeing of clients.

In the York South-Weston riding, based on the 2010 census, close to 50% of households are rental units, compared to 45% in Toronto. The average household

“I like the doctors, especially their work places and their friendly talks.”

“Everything is excellent. I feel safe, calm and very grateful.”

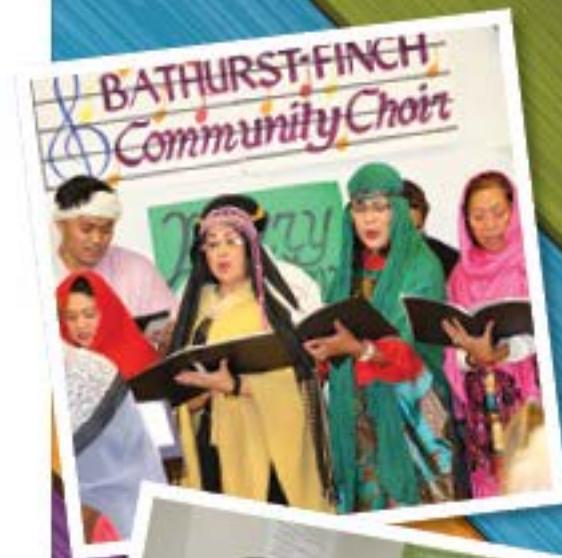
income in this riding is \$42,700, lower than the average across Toronto by \$3,000. People choose to live in this neighborhood mainly based on what housing accommodations they can afford. Unfortunately, many of them are forced to live in sub-standard housing, overcrowded environments, or neighborhoods where social supports are minimal.

Unison is one of the few agencies in Toronto maintaining a drop-in housing help and eviction prevention services model. No appointment is needed for clients to bring housing concerns to an experienced housing worker. Housing Help serves more than 1,200 individuals and families annually. Services include: general housing searches; landlord mediation; Housing Connections application and review; applications for Low-Income Family Energy Assistance Program (LEAP), Ontario Electricity Support Program (OESP) and the Rent Bank Program; specialized housing help; and the Streets to Homes Follow-Up Program. In addition, our weekly Community Kitchen Program is a gathering place for many clients to support them with food security and social adjustment. This program caters nutritious and healthy breakfast and lunch for more than 80 clients weekly.

The following is an example to reflect how the Housing Help Program works in collaboration with other Unison teams to support clients with complex needs:

A client walked into the office with tears in her eyes and a flask of alcohol in her hand to soothe her pain due to her life's struggles and living conditions. She dropped in wanting help to move from her current unit due to the physical and emotional abuse she was experiencing from a close family member.

Working with the client, the housing worker identified a safe place for her to stay until we were able to process her application for Special Priority Housing. Due to lack of supporting documents, the client was referred to Unison's Legal Services to obtain an affidavit. The client was also referred to Unison's Counselling Services. With support



“Thank you for teaching us how to prevent diabetes as well as how to prepare healthy food on a small budget.”

letters from her counsellor and housing worker, her Special Priority Housing application was approved. A few months later she was transferred to her preferred location and housing unit.

**PROGRAM: Primary Care at Bathurst-Finch**  
**INDICATOR: Access to Primary Care**

A new primary care client at Unison's Bathurst-Finch site, a newcomer to Canada, was looking for a job as a commercial vehicle driver. The client needed glasses with corrective lenses, but could not afford to pay for an eye examination (which is not covered by OHIP) and prescription eyeglasses.

The Bathurst-Finch staff collaborated with VSP Mobile Eye Care, a free eye examination and eyeglasses charitable project, to conduct a clinic on site in August of 2015. The client called in the morning of the eye care clinic, and was able to get an appointment with his Unison primary care doctor that same morning. (The Bathurst-Finch site provides advanced access to primary care clients to see their providers for urgent health reasons.) The doctor could not sign off on the Ministry of Transportation form indicating that the client was fit to operate a commercial vehicle — since the client needed eyeglasses with corrective lenses. The doctor referred the client to the mobile eye clinic and the client got an appointment for later that day. Another problem arose though: the form was required at the Ministry by the end of the day in order to issue the driver's license. If the client's eye exam took place at the end of the day, he wouldn't be able to bring the completed report to the Ministry of Transportation in time.

Our doctor walked the client to the mobile eye care clinic and explained the urgent need of the client. Our client was able to have his eye test in the morning, and received his new pair of glasses by noon. The doctor then signed the Ministry's form, and the client went straight to the Ministry of Transportation office.

Our client was very thankful for the help he received from Unison, the doctor and partners of the eye clinic. Good luck to our client in his endeavour to settle in a new country with a "clear" path!

The success of this story was attributed to both the client's easy access to Unison primary health care, and collaboration between Unison and its community partners in bringing additional services and resources to clients.



**PROGRAM: Diabetes Education Program**  
**INDICATOR: Client-Centred Care**

Ontario's Action Plan for Healthcare and the Toronto Central Local Health Integration Network have a consistent message for service providers to deliver the "right care, at the right time and right place" as well as support the delivery of client-centred services. Unison's Diabetes Education Program (DEP) provides assessment, education, monitoring and support for diabetes management in a friendly and welcoming atmosphere. Speaking with Unison clients who did not show up for scheduled DEP appointments revealed that the accessibility and familiarity of service locations were the reasons that these clients missed their appointments. Therefore, the DEP team decided to focus on offering accessible services at the "right place" by creating mobile clinics.

Offering a mobile diabetes team consisting of certified diabetes educators to work out of physician and pharmacy offices serves as an opportunity to enhance the accessibility of Unison's DEP services for our clients. This allows external clients to receive a "one-stop shop" in their health care to increase accessibility and minimize travel, and have comprehensive, seamless diabetes care. This also offers DEP providers the opportunity to work collaboratively with the clients' family physicians and pharmacists to provide better quality care for the clients. Through this, physicians will get an opportunity to see DEP providers' competence in diabetes management, typically resulting in more referrals to the DEP program.

Over the last year, the DEP has conducted 47 clinics and 174 client visits. We are looking forward to continuing to provide services to our clients by bringing our services where they are needed.

“They're the best social workers.”

“I like everything about the yoga program. It makes me get out of the house and to the program; it makes me feel better than staying home all alone.”

## Our team

Our staff is a group of incredibly dedicated professionals that includes clinicians, legal professionals, diabetes educators, community workers and administrative staff. Our staff culture is key to retaining and recruiting the very best and we are proud of our team. We value the many contributions of each and every member of our team and the significant impact they make on the health of our communities.



## Board of Directors

Our Board of Directors is elected by our membership every year at the Annual General Meeting.

- Laurelle Knox, *Chair*
- Andrea K. Shreeram, *Vice-Chair*
- Alex Dow, *Vice-Chair*
- Tanya Sinha, *Treasurer*
- Dana Chmelnitsky, *Secretary*
- Aiman Flahat
- Fadumo Diriye
- Geoff Cowper-Smith
- Laverne Blake
- Maureen Simpson
- Naureen Siddiqui
- Shabnum Budhwani

# Summary Financial Statements

## Report of the independent auditor on the summary financial statements

### To the Members of Unison Health and Community Services

The accompanying summary financial statements, which comprise the summary balance sheet as at March 31, 2016, and the summary statement of operations for the year then ended, are derived from the audited financial statements of Unison Health and Community Services (“Unison”) for the year ended March 31, 2016. We expressed an unmodified audit opinion on those financial statements in our report dated June 27, 2016.

The summary financial statements do not contain all the disclosures required by Canadian accounting standards for not-for-profit organizations. Reading the summary financial statements therefore, is not a substitute for reading the audited financial statements of Unison.

#### Management’s Responsibility for the Summary Financial Statements

Management is responsible for the preparation of a summary of the audited financial statements in accordance with Canadian accounting standards for not-for-profit organizations.

#### Auditor’s Responsibility

Our responsibility is to express an opinion on the summary financial statements based on our procedures, which were conducted in accordance with Canadian Auditing Standard (CAS) 810, “Engagements to Report on Summary Financial Statements.”

#### Opinion

In our opinion, the summary financial statements derived from the audited financial statements of Unison Health and Community Services for the year ended March 31, 2016 are a fair summary of those financial statements, in accordance with Canadian accounting standards for not-for-profit organizations.

*Clarke Derming LLP*

Toronto, Ontario  
June 27, 2016

CHARTERED ACCOUNTANTS  
Licensed Public Accountants

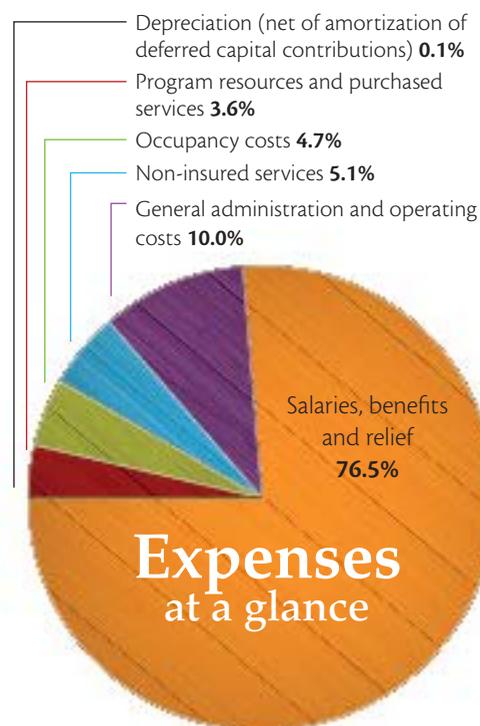
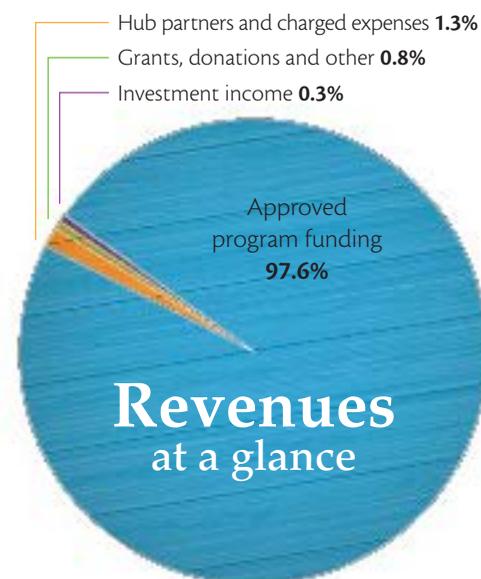
*Complete audited financial statements available upon request from the office of the Finance Director.*

## Summary balance sheet AS AT MARCH 31, 2016

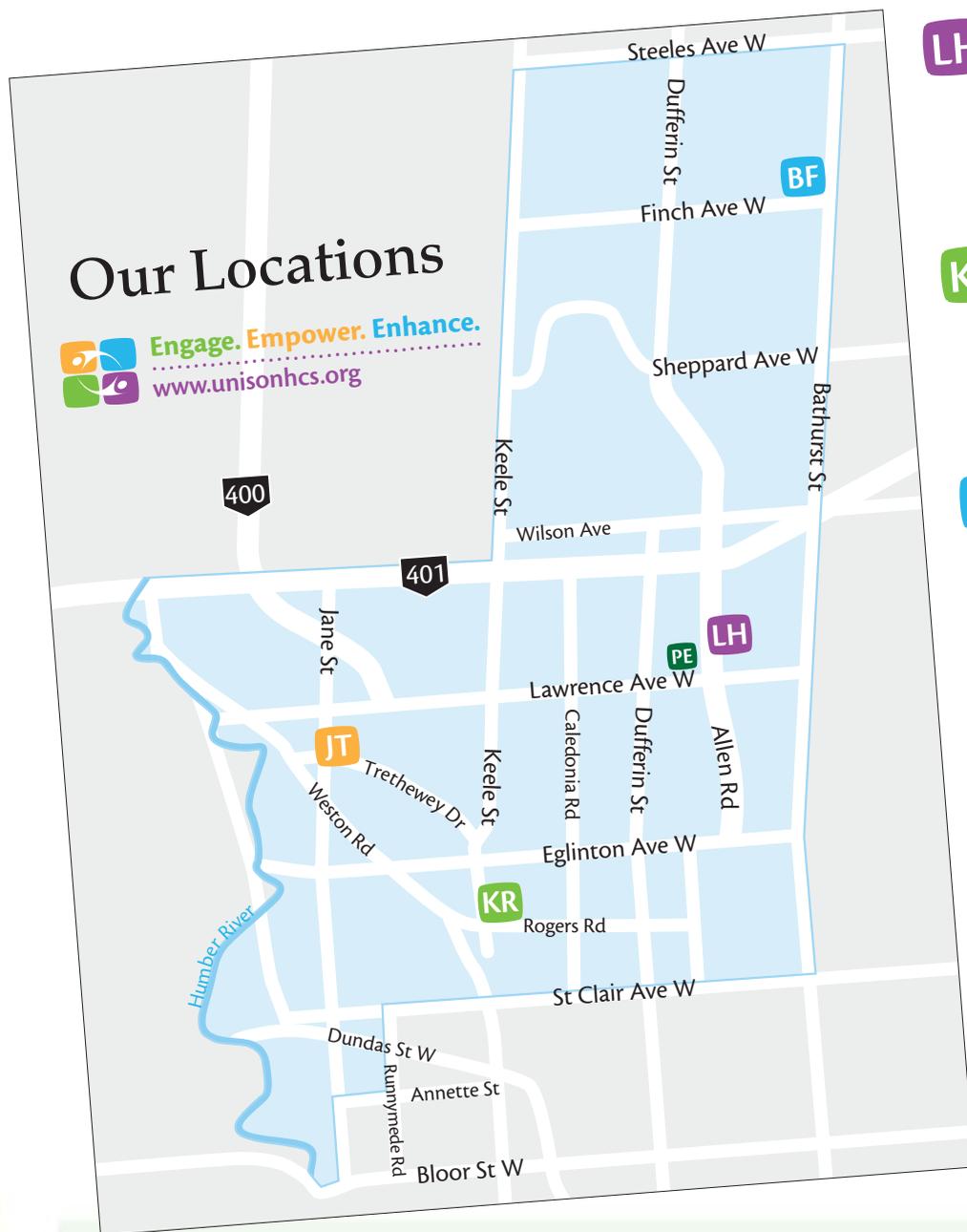
	2016	2015
<b>Assets</b>		
Current assets		
Cash, short-term deposits and marketable securities	\$ 5,180,101	\$ 7,643,375
Accounts receivable and prepaid expenses	732,143	791,291
	5,912,244	8,434,666
Property and equipment	13,439,951	14,050,500
	19,352,195	22,485,166
<b>Liabilities</b>		
Current liabilities		
Accounts payable, accrued liabilities and deferred revenue	2,024,520	2,109,109
Accounts payable - due to funders	381,858	2,809,496
	2,406,378	4,918,605
Deferred capital contributions	12,094,309	12,686,006
	14,500,687	17,604,611
<b>Net Assets</b>		
Invested in capital assets	1,345,642	1,364,494
Internally restricted funds	702,458	702,458
Reserve for capital replacement	118,371	118,371
Unrestricted fund	3,317,591	3,302,137
Unfunded payroll obligations	(632,554)	(606,905)
	4,851,508	4,880,555
	\$ 19,352,195	\$ 22,485,166

## Summary statement of operations YEAR ENDED MARCH 31, 2016

	2016	2015
<b>Revenues</b>		
Approved program funding	\$ 18,637,486	\$ 17,689,990
Hub partners and charged expenses	247,936	294,947
Grants, donations and other	150,759	269,991
Investment income	50,106	109,101
	19,086,287	18,364,029
<b>Expenses</b>		
Salaries, benefits and relief	14,613,711	14,033,659
Depreciation (net of amortization of deferred capital contributions)	18,852	27,450
Program resources and purchased services	686,631	723,457
Occupancy costs	904,789	885,540
Non-insured services	972,222	592,525
General administration and operating costs	1,919,129	1,912,971
	19,115,334	18,175,602
Excess of revenues over expenses for the year	\$ (29,047)	\$ 188,427



# Our Locations



**LH** **Lawrence Heights**  
12 Flemington Road  
Toronto, ON M6A 2N4  
Phone: 416-787-1661

**KR** **Keele-Rogers**  
1651 Keele Street  
Toronto, ON M6M 3W2  
Phone: 416-653-5400

**BF** **Bathurst-Finch**  
540 Finch Avenue W.  
Toronto, ON M2R 1N7  
Phone: 647-436-0385

**JT** **Jane-Trethewey**  
1541 Jane Street  
Toronto, ON M9N 2R3  
Phone: 416-645-7575

**PE** **Pathways to Education**  
Lawrence Square  
700 Lawrence Avenue W.  
Suite 440B  
Toronto, ON M6A 3B4  
Phone: 416-787-6800

## Unison Health and Community Services gratefully acknowledges funding from:

Toronto Central Local Health Integration Network • United Way Toronto  
City of Toronto • Legal Aid Ontario • Pathways to Education™  
Ministry of Community and Social Services  
Ministry of Health and Long Term Care • The Ontario Trillium Foundation  
Public Health Agency of Canada



Ontario's Community  
Health Centres  
Every One Matters.