



**Point St. Charles
Community Clinic**

A neighbourhood's health and solidarity!

Annual report 2023-2024

CLINIQUE COMMUNAUTAIRE
DE POINTÉ ST-CHARLES

500

This is the Clinic in 2023-2024...

5 313

distinct users
served by the
Clinic's various
services

A stimulating
interdisciplinary
work environment for

138
people

An internship
environment for

17

students in 2023-2024

2

sites
in Point St.
Charles

Nearly
50 000

procedures
carried out

An organisation
made up of

300
members

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Message from the Clinic Director and the Board of Directors

At the 2023 Annual General Assembly, members approved the Clinic's first strategic plan in almost 10 years. The work was carried out in a collaborative manner, in line with the Clinic's approach, with the aim of giving us a vision and strategic directions to support our future development.

This major step represents our collective determination to make our Clinic a model of community healthcare recognised throughout Quebec and far beyond. In a context where the evolution of the Quebec healthcare system may seem unfavourable to our community model (citizen governance, universality of care), the commitment of everyone is fundamental to the success of our project.

This annual report highlights the first results of our strategic planning. Firstly, we have undertaken a review of our clinical organisational structure in order to respond better to users by bringing teams closer together, decompartmentalising services and providing clinical and administrative support to professionals. One of the expected results is to make our users' pathways smoother and clearer.



Pierre Riley
Président



Martial Mainguy
Directeur général

Throughout the year, we also worked to strengthen the involvement of our members and users. We adopted a strategy for implementing the user-partner approach and organised a number of participatory events on health issues such as climate change, health reform and the new federal dental plan. Through these actions, we are confirming our desire to work collectively to improve our services, make our neighbourhood more resilient, raise awareness of political challenges and get involved to bring about change.

In November 2023, we had the pleasure of finally signing our funding agreement, confirming our respective commitments between the Clinic, the Ministry of Health and Social Services and the CIUSSS du Centre-Sud-de-l'Île-de-Montréal. The renewal of this agreement means we can finally look to the future with greater confidence. This agreement confirms our responsibility for the health of the population in Point St. Charles.

Finally, despite the financial challenges we have faced, we have maintained rigorous management of our resources, enabling us to continue providing quality services while ensuring the financial viability of our clinic.

Finally, we would like to express our gratitude to each and every professional, member and volunteer for their unwavering dedication to our clinic's mission over the past year. All these efforts have enabled us to significantly improve the quality of the care and services we offer our community. Together, we are making a difference and demonstrating the strength of our community model, by and for the people of Point St. Charles.

About us

Founded in 1968, the Point St. Charles Community Clinic is a non-profit organization (private under contract) with a CLSC mission. Its mandate is to provide front-line services in the Point St. Charles neighbourhood of Montreal. The Clinic offers medical and social services, while working on the social determinants of health.

The Clinic is the only citizen-governed organization in Quebec, whose members are residents of the Point St. Charles neighbourhood, to offer front-line CLSC services.

At the heart of these orientations lies a fundamental conviction: health is an essential and collective non-negotiable right.



Our vision

To be an example for community health in Quebec and an inspiring model around the world.

Our mission

To promote the full health of the population of the Point St. Charles neighbourhood by offering accessible, quality health and social services, focusing on prevention and the defence of rights, and encouraging civic involvement and inclusion.

Our values

Respect

People and their uniqueness

Collaboration

Working in collaboration with the various stakeholders

Engagement

Defending rights and advocating for health

Excellence

Best practices in community health

Eco-responsibility

Respect for the physical, social and economic environment

Our services

- **Routine medical and nursing care**
By appointment or walk-in
- **Psychosocial services**
Childhood and family | Youth | Adult
- **Midwifery services**
Complete maternity care, with priority given to vulnerable patients
- **Multidisciplinary services**
Occupational therapy | speech therapy | psychology | psycho-education | social work | dental hygiene
- **Nursing and psychosocial services in schools**
Dental hygiene | promotion and prevention | health services | psychosocial services
- **Home support**
Nursing, psychosocial and home care help | Palliative and end-of-life care | Occupational therapy and nutrition
- **Public health activities**
Vaccination | screening | STIs | etc.
- **Community development**
Support for citizen projects | collective organisation

The year in figures

49 762

procedures carried out at the clinic

2 102

users reached by the Clinic's routine nursing services

2 642

users joined by the Clinic's medical team

12 243

procedures carried out by the medical team and routine nursing services

1 379

users served by the childhood and family, youth and schools teams

5 889

procedures carried out by the children and family, youth and schools teams

521

users served by home support services

29 525

procedures carried out by home support

138

users served by midwives

84

births attended by midwives

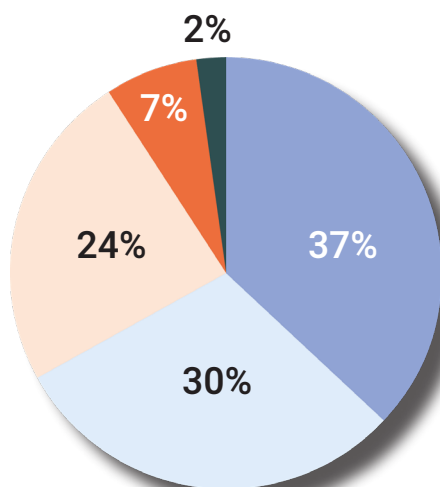
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users served by the adult/mental health team

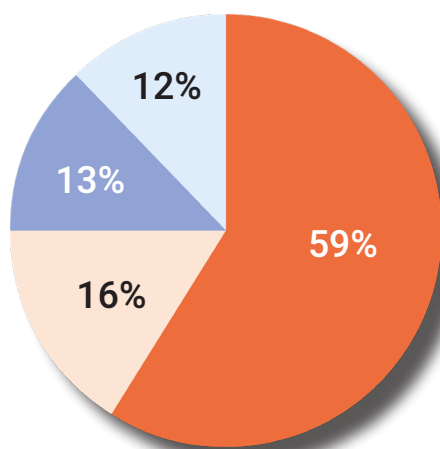
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procedures carried out by the adult/mental health team

Breakdown of users by service 2023-2024

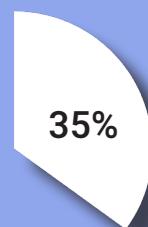


Breakdown of procedures by service 2023-2024

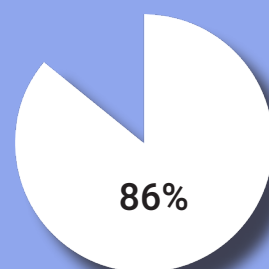


- Medical team
- Routine nursing services
- Multidisciplinary team
- Home support
- Midwives

% of PSC population reached by Clinic services

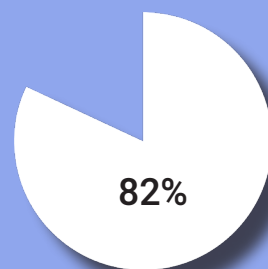


User satisfaction rate

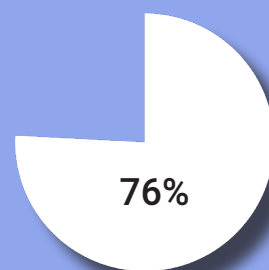


Satisfaction rate among clinic staff

according to the latest Pulse survey (December 2023)



Retention rate of Clinic staff



The Board of Directors



Maria-Inès Perez
Vice-president



Denis Charron
Board member



Mathieu Desjardins
Treasurer



Daniel Gendron
Board member



Marie-Yves-Rose Lamy
Secretary



Sebastian Mott
Board member



Louise Chapados
Board member



Marie-Chantal Vincent
Board member

9

Meetings

85%

participation between
September 2023
and June 2024

Board committees

- Audit Committee
- Human Resources Committee
- Governance and Ethics Committee
- Compliance and Quality Committee
- Health Action Committee

The year's major projects

1

Signing of the funding agreement

On November 27, 2023, the Clinic signed its new funding agreement with the Ministry of Health and Social Services and the CIUSSS du Centre-Sud-de-l'Île-de-Montréal, formalizing our contractual relationship with the Ministry and confirming our special status, as well as the Ministry's financial commitment to the Clinic for the next five years.

The new funding agreement will have to be renewed in 2028.

2

Adoption of the operational planning

Last year, members adopted the 2023-2026 strategic plan at the Annual General Assembly.

To ensure that the new strategic directions are kept up to date, an operational plan for the strategic plan has been drawn up. It was drawn up during workshops held by the Clinic's Coordinating Committee, then during a tour of the teams, in order to determine the issues to be prioritised, particularly in terms of prevention and health promotion.

3

Adoption of the new organisational structure

A new organisational structure has been put in place to provide more local support to teams and facilitate collaboration between services.

The positions of co-ordinators have become those of directors, to better reflect the expected levels of responsibility and accountability and to facilitate external communications.

Two Heads of Service are now responsible for managing the day-to-day operations of each directorate, freeing up the Directors to focus on the development, evaluation and continuous improvement of services. The new structure also includes four clinical advisor positions: two Nursing Advisors (NACs) for the Physical Health Department and two Clinical Activity Specialists (CASS) for the Multiservices Department, to provide better day-to-day support to service providers.

Report from the Health Action Committee

The committee defends the right to health and promotes a public, universal and accessible healthcare system.

Here is a summary of the committee's activities for 2023-2024.

Access to mental health care and services

Organisation of a webinar on mental health and the return to work: obstacles, issues and winning conditions. Sixty people took part!



Protection of personal health data

Meeting and exchange with the MSSS Data Governance Department regarding the application of the new Bill 5 on health and social services information in Quebec.



Access to dental care

Participation in the evaluation committee for community dental clinic pilot projects across the province.

Presentation to community groups and our provincial partners on the new Canadian Dental Care Plan. The presentation covered the eligibility criteria, the issues raised by the Health Action Committee and its position. It was given to three community groups and three national partners.



Citizen participation



Citizen participation has always been at the heart of the Clinic's project.

To mobilise its members and ensure user participation, the Clinic has updated its citizen involvement strategy.

The Clinic carried out various actions involving citizens over the course of 2023-2024.



Citizens' meeting on Bill 15

Information evening on Bill 15 (Dubé reform).

50 to 60 participants

Annual General Assembly 2023

Resumption of engagement after three years on Zoom.

99 participants



Citizen consultations on climate change

Information and discussion sessions at the Clinic and at Charlevoix metro station.

37 participants

Launch of the user-partner approach


Strategy for implementing the approach.

Call for projects from Clinic teams.



Key projects for the year

Excerpt from the Clinic's
2023-2026 Strategic Plan



Psychosocial services

Restoration of services

The waiting list has been reduced from 151 people on 31 March 2023 to 25 people on 31 March 2024.

Families without RAMQ

Accompaniment by the Clinic's midwives

Thanks to a partnership with **Médecins du Monde** and **Centre Alima** (social nutrition in pregnancy), 35 women without RAMQ were referred to the Clinic. These women were able to count on the support of Clinic midwives and receive perinatal care.

Generally speaking, migrant workers in the Montreal region, particularly students and non-status workers, are in a more difficult economic situation and generally have no medical coverage at the time of their pregnancy. This makes them and their unborn child particularly vulnerable.

PRIORITY 2

THE CLINIC IN ITS NEIGHBOURHOOD :

Services that meet
the needs of the population

Increasing access to services
with an inclusive approach

Increasing prevention and
health promotion activities

Updating our intervention practices

Reinforcing a culture of continuous
improvement in service quality

Cultural safety

Collaboration with SQIA

Establishment of a partnership with the Southern Quebec Inuit Association (SQIA) to provide culturally safe health services to the city's Inuit community.

Vaccination, dental hygiene and midwifery services.

A workshop was held to raise awareness of Indigenous realities among around 75 Clinic professionals and directors.

Home support **Occupational therapy**

Setting up a walking club to combat physical decline and social isolation among the elderly by promoting active ageing. Over 50 people have been reached through seven walking sessions.

Development of a universal accessibility project promoting the autonomy, commitment and social participation of PSC residents in their daily activities. 14 neighbourhood establishments were assessed and made aware of their accessibility, and a promotional video was produced.

Seniors **Resumption of the PIED programme**

Two sessions, one in the winter at Cité des Batisseurs (15 participants) and one that started at the end of May at habitation André-Laureandeu (15 participants).

Vaccination **Walk-in and in various living environments**

Influenza vaccination up 71% on last year.

Doses administered

Influenza: 1078

Covid: 957

Pneumococcus: 151

Home support **Community health pilot project**

Seven educational workshops on the themes of healthy lifestyle habits, diabetes and high blood pressure (over 55 participants), held in the neighbourhood's various living environments and senior citizens' centres.

PRIORITY 2

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Dental hygiene

Dental health pilot project

Development of preventive dental care for 0-5 year olds to avoid the need for general anaesthesia when they need treatment for cavities.

Training for nurses in the child and family team to include systematic dental screening in their assessment protocol.

Around 70 children referred to dental hygienists for primary, secondary or tertiary preventive dental care.

With this pilot project, the Clinic is making a name for itself with the Montreal Public Health Department.

Priority issues for the Users' Committee



This committee is the guardian of users' rights. It ensures that users are treated with respect for their dignity and in recognition of their rights and freedoms.

1

Universal access ramp not compliant

Recommendations

- Carrying out the necessary work and updates to ensure safe and functional access for users with reduced mobility
- Temporary installation of a modular ramp

Response from the Board of Directors

The work on the access ramp for the Ash Street building is part of an overall project to bring the main entrance up to standard and refurbish the external structure. The budgets for the conservation of our buildings are separate from our day-to-day management and require the involvement of the CIUSSS du Centre-Sud-de-l'Île-de-Montréal (CCSMTL), which owns the buildings. For more than a year, we have been trying to clarify the roles and responsibilities of the CCSMTL and the Clinic with regard to the management of these budget envelopes and related projects. The situation was clarified in March/April 2024: the Clinic now bears full responsibility for these projects. We regained access to our budget plan, enabling us to confirm the scope of this project to bring the building up to standard. We have met with the landscape architect to draw up preliminary plans. We will shortly be setting up a project committee to consult the users' committee on these plans, particularly with regard to the Clinic's accessibility. We estimate that work could start in spring 2025. We will be temporarily adjusting the current ramp to prevent any associated risks (in particular, by filling in any apparent cracks).

2

Communication and support for users during the temporary absence of their family doctor

Recommendations

- Set up a proactive and effective communication system between the clinic, doctors and users
- Define a support system for orphaned and more vulnerable users

Response from the Board of Directors

During 2023-2024, 4 out of 10 doctors were absent for an average of one year. In total, these 4 doctors provide care for almost 2,000 users. Unfortunately, the current healthcare system does not allow an absent doctor to be replaced, and our existing doctors do not have the capacity to take on more users. However, the most vulnerable users have been referred to existing doctors to cover for absences. We invite users whose doctor is absent to make an appointment via the walk-in service at the Clinic or nearby clinics. We prioritise half of our walk-in spaces for these requests. Information is posted on our website and on our telephone greeting. An e-mail is also sent to users on this subject. In April 2024, one of our doctors left the Clinic. A postal letter was sent to all our users to inform them of the procedure to re-register on the GAMF waiting list. The Clinic strives to maintain proactive communication with its users, as well as the actions mentioned above. However, given the large number of users, we cannot provide medical services when no doctors are available. Unfortunately, this is the case throughout Quebec.

3

Appropriate communication and follow-up for home care following a hospital stay

Recommendations

- Improve coordination and clarity of procedures between the hospital, the Clinic and users
- Develop more effective communication mechanisms between users and the Clinic

Response from the Board of Directors

For all inter-institutional referrals, the Clinic works with the network's standardised tools. Each facility has its own procedure for discharging a user and for transmitting information about the discharge. All requests are processed by the clinical nurse assistant to the immediate superior (ICASI) in home support, who contacts the referring institution when necessary. However, we are not dependent on the working methods of external partners. We have never refused a request for post-hospital care due to a lack of documentation from external institutions. We systematically send a care worker to assess the situation at the user's home, and then create a bridge with the healthcare network via a key worker. It should be noted that we did not receive any official complaints from homecare users in 2023-2024 concerning the issues mentioned above. However, we will take your recommendation into consideration in our future actions.

Local collaboration

The Clinic has always been firmly rooted in its community, working closely with neighbourhood groups to have an impact on health determinants and improve the living conditions of Point St. Charles residents.

Here is an overview of the year's main local collaborations.

Drawing up a neighbourhood portrait of the population's state of health

Two community organisation interns are actively involved in developing a partnership and a new citizen project.

Bridge-Bonaventure

The Clinic advocates the importance of sustainable mobility and social and non-market housing for development on a human scale.

Action-Gardien

The Clinic as active as ever in local consultation

- Member of Action-Gardien
- The Clinic is a member of the Action-Gardien Board of Directors
- Participation in more than 15 regular and thematic meetings
- Co-coordination of 2 consultation tables
- Participation in 6 committees

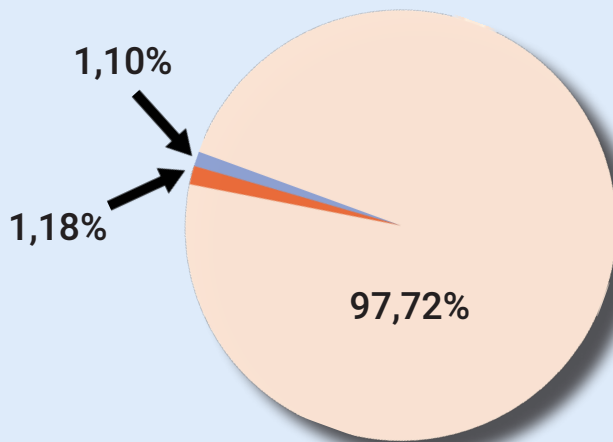
Carrefour d'éducation populaire

Pilot project for clear health communications

Conducting validation workshops with literacy participants. The aim was to ensure that the Clinic's basic information documents were clearly understood by as many people as possible, regardless of their literacy level.

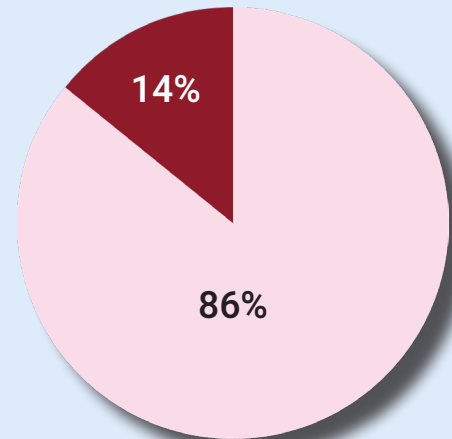
Finances

INCOME



| | |
|--|--------------|
| Ministry of Health and Social Services | 13 053 945\$ |
| Public Health | 157 622\$ |
| Other revenue | 147 370\$ |

EXPENSES



| | |
|----------------|--------------|
| Salaries | 10 927 964\$ |
| Other expenses | 1 786 739\$ |

| | |
|-----------------|--------------|
| Total income: | 13 358 937\$ |
| Total expenses: | 12 714 703\$ |
| Surplus: | 644 234\$ |

| | |
|---------------------------------------|-------------|
| Bringing our fund balance to: | 1 410 549\$ |
| • External allocations (Social Fund): | 101 657\$ |
| • Operating fund balance: | 1 308 892\$ |

Key elements

- Additional non-recurring income (not applicable on an ongoing basis): \$1,313,000
- 20% of vacancies partly filled by independent labour
- Adjustment of expenses and revenues in 2023-2024 to take into account additional costs resulting from collective bargaining in the health and social services network (remember that the Clinic manages its own working conditions).

Challenges

Developments in the healthcare system are not conducive to the Clinic's community health model. The centralisation that is taking place is contrary to the principle of citizen and local governance. The privatisation of care is undermining universal access, and approaches centred on procedures and targets are the opposite of an approach centred on individuals and their personal journeys.

Despite this, we at the Clinic intend to do our utmost to continue the work that sets us apart.

Reduction in the number of doctors due to absences

In 2023-2024, the Clinic's medical team saw 2,642 different users and performed 6,456 procedures.

This corresponds to a 16% drop in the number of users served compared with 2022-2023, when 3135 separate users were seen and 7,844 interventions performed.

Offloading at home support services due to significant shortage of auxiliary (ASSS) and nursing staff

Although the ministry is calling for an increase in the number of home support services provided to the public, budgets for hiring new resources are hard to come by. At the same time, the Quebec government is working hard to minimise the use of independent workers (agencies), which is contributing to the staff shortage.

Despite this, there is no waiting list for our Home Care Services. The psychosocial waiting list has been reduced from almost a year to less than 90 days. For other professionals (physiotherapists, occupational therapists and nutritionists), waiting times have been greatly reduced to less than a year. At the Clinic, every effort is made to do more with less!

Services tailored to people with an intellectual disability, a pervasive developmental disorder or a physical disability, as well as their carers

Given the long delays in accessing specialised services, the Clinic is adapting to meet the needs of young people and their families. There is currently a gap in services to support young people with ID, PD or PDD in developing their autonomy. Families find it difficult to manage their child's day-to-day life and, in some cases, their child's behaviour.

- 70 neighbourhood families benefit from the Family Respite Grant
- Development of a partnership with the CRDI TED to ensure that referrals to the Clinic are prioritised appropriately.
- Clarification of service corridors with regional institutions regarding diagnostic assessments to facilitate the work of care providers and reduce the challenges of accessing a specialized physician

Birthing centre

In April 2024, we learned that construction of the birthing centre had been postponed for at least 5 years. With sharp decline in the number of births in Quebec, and particularly in Montreal, the project was not included in the Quebec Infrastructure Plan by the CIUSSS du Centre-Sud-de-l'Île-de-Montréal, which is responsible for prioritising real estate projects in its territory. The CIUSSS owns the Clinic's buildings.

In 2023-2024, the Clinic's midwives attended 84 births:

- 42 birthing centre births (Pointe Claire)
- 15 home births
- 27 hospital births

Increasing homelessness : findings and the beginnings of a collective project

- Survey of clinical teams confirming that the number of cases at the Clinic is increasing
- Involvement of the Clinic in local (Sud-Ouest/Verdun) and regional (Montréal) homelessness initiatives.
- Established links with CIUSSS Centre-Sud to develop training and service corridors to meet this growing need. Accompaniment and support were provided for routine services and psychosocial intake.
- In the neighbourhood, community groups and the Clinic are giving serious thought to the issue, to ensure that they are able to offer the right kind of help to people experiencing homelessness, and to prevent potential challenges to the social mix.

An internship that makes a difference to a community

From September 2023 to April 2024, Marie-Hélène Gauthier completed her master's internship in social work with the Clinic's community planning and development team. She developed a partnership with the SQIA (Southern Quebec Inuit Association) to help give better access to health care to the city's Inuit community. Considering that laws, policies, standards and institutional practices are sources of discrimination and inequity in healthcare for Indigenous communities, and knowing that the services received by these communities are often of poorer quality, Marie-Hélène's internship project was more than relevant and consistent with the Clinic's values of collaboration, commitment and excellence.

To develop a working relationship with SQIA, Marie-Hélène took part in various activities organised by the organisation to establish relationships that respected the community's culture and ways of doing things. She took the time to establish a relationship of trust and to fully understand the needs and issues of the Inuit people. This work has made a significant difference in establishing links with the resource and implementing decolonial practices within the Clinic. The Joyce Principle, which aims to guarantee all Indigenous people the right to equitable access, without discrimination, to all social services and health care, as well as the right to enjoy the highest attainable standard of physical, mental, emotional and spiritual health, was adopted in 2021. Marie-Hélène's internship represents a major step forward in addressing colonial health issues, and has enabled the Clinic to move from words to deeds.



Many thanks to Marie-Alexandre Côté, Daniel Gendron, Kathleen Gudmundsson and Sebastian Mott for their contributions to the Board of Directors over the past year. The entire Clinic team wishes you the best of luck in your future endeavours!

Thank you to everyone who contributed to the production of this annual report:

Patricia Aylwin, Céline Bianchi, Ariane Carpentier, Valérie Drouin, Martial Mainguy, Nathalie Parent, Pierre Riley, and all the Clinic's teams and committees.

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