



ANNUAL REPORT 2013-2014

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**De dwa da dehs nye>s Aboriginal Health Centre embodies the concept of:
“Taking care of each other amongst ourselves”**

Our Mission

To improve the Wellness of Aboriginal individuals and of the Aboriginal community by providing services which respect people as individuals with a distinctive cultural identity and distinctive values and beliefs.

MESSAGE TO OUR COMMUNITY

De dwa da dehs nye>s Aboriginal Health Centre works hard every day to bring the best possible service and support to the Aboriginal Communities of Hamilton and Brantford, Ontario.

As an organization run by and for Aboriginal People, we strive to live up to our name “De dwa da dehs nye>s” which when translated from the Cayuga language, embodies the concept of “Taking Care of Each Other Amongst Ourselves”.

We recognize the many health needs of our community, and the social determinants that affect our health as individuals who strive to survive and succeed in our life goals.

To meet the need of Our People, De dwa da dehs nye>s offers a number of traditional/cultural Health Services and Supports, as well as Western Medicine and its various services and supports. This includes the provision of Primary Care, Diabetes Management, Health Promotion, Transportation, Advocacy, Mental Health and Addictions, Patient Navigation, and Traditional Health Services and Supports.

It is our goal to always monitor and improve the service we provide, in order to give our patients and program participants the best health care, and service, that we can deliver.

In the fiscal year 2013 – 2014, the Board and Staff made significant strides to improve our quality of care, the number of programs and services provided, as well as to develop and nurture the infrastructure of the organization to support long-term sustainability and growth.

We have increased funder confidence as seen in the expansion of our budget, which has resulted in an increase of service being provided to our community, such as the addition of our new Patient Navigation program, Mental Health and Addictions services. Additionally, the organization was tasked by the Hamilton Niagara Haldimand Brant Local Health Integration Network to provide cultural sensitivity training workshops for numerous mainstream health organizations in the 2013-2014 fiscal year.

During this fiscal year, we have polled our patients to better understand their perception of any interaction and their overall experience when visiting the centre, implemented a Quality Improvement Plan, began serious discussions with community about Capital Planning, fully implemented our electronic medical record across every department within the organization to enhance the experience of those participating in our services/supports, adopted a full pension plan for organizational staff, and created an increased presence within mainstream community.

Based on our surveys, we have found that our patients feel very satisfied with the service they are provided to date. As an our organization, we also recognize that there is always room for improvement, and as such, we continuously improve our processes, and to support that improvement, we ask for feedback on a regular basis.

De dwa da dehs nye>s is committed to providing a healthy environment for our community, and as such, in 2013 - 2014, we adopted the Aboriginal Health Network's Walk the Talk Best Practice Guidelines, and were recognized publicly for that adoption.

We are very excited about where we are headed and we hope that you will take part as we work hard to creating a strong and vibrant future for our community.



REPORT FROM THE CHAIR

This year has been one of growth and continuous improvement for De dwa da dehs nye>s. We welcomed three new Board members. Amos Key Jr. started in May 2013. Janice Kahehti:lo Longboat and Bernice Downey attended their first meeting in January.

We were fortunate to receive funding for additional services this year including 3 Patient Navigators, Child Mental Health and Cultural Sensitivity Training. This year, with programs that have been added, we have had to rent space outside the main centre in both Brantford and Hamilton. There is a need for expanded facilities. There is no space to add additional services. There has been some pressure to provide added services in Niagara. Although developing a Niagara location aligns with programming, the Board has determined that should be deferred until there are appropriate facilities in Hamilton and Brantford. It will be important that the facilities provide an environment for health and wellness for individuals and the community in a combined western and traditional. An ad hoc Capital Planning Committee has been struck by the Board. If the opportunity arises, we are open to partnering with other Aboriginal Agencies to combine resources.

The term “Aboriginal” will be used to describe our community for the meantime however, the Board has recognized there is discomfort using this word and we will be altering this term based on community and organization feedback. Over the next year there will be a formal Community Consultation process to inform the Quality Program and Capital Planning process

The Quality Committee was established this year with approved Terms of Reference and the 2013-2014 Quality Goals. Board evaluation and skills list surveys were completed

The Board adopted the “Walk the Talk” Best Practice Guidelines for healthy living. We adopted these guidelines as a way to show leadership in health and wellness. We feel that if we can provide an example of healthy eating and healthy lifestyles at our events, the people who attend will carry on these teachings to friends and families and ultimately to all our communities.

I was pleased to accept a plaque on behalf of our organization for our commitment to the “Walk the Talk” guidelines from the Aboriginal Health Network.

I was privileged to attend, with staff members, education sessions at the South Central Foundation (CSF) in Anchorage Alaska. There was a two day overview of the structure and operations of this primary care organization that serves the Native community in Anchorage. In addition we attended a session entitled “Core Concepts”, an intensive 3-day workshop that was developed to support SCF’s vision of a Native Community that enjoys physical, mental, emotional and spiritual wellness and its relationship-based operational principles. SCF believes our ability to develop relationships with clients directly impacts our effectiveness. The training experience was hands-on and interactive and included individual work, small learning circles, pairs and large group discussions to engage and respond. The tools we learned will be introduced to the organization, slowly, over time to assist clients, staff and Board on a journey toward wellness.

Chi miigwetch to Elder Walter Cooke for his guidance and wisdom in supporting the Board of Directors over the last year.

Finally, I thank my colleagues on the Board and our Executive Director, Constance McKnight, and her team for their time, dedication and hard work. Their commitment to improving the wellness of the Aboriginal individuals and the Aboriginal community is evident in the services which are provided that respect people as individuals with a distinctive cultural identity and distinctive values and beliefs. It has been an honour and a privilege to serve as Chair of De de dehs nye>s Board of Directors.

Respectfully,

Pat Mandy,
Chairperson

EXECUTIVE DIRECTOR'S REPORT

2 013 – 2014 was a busy year of activity for De dwa da dehs nye>s. It was a year of improving services for our community, creating internal policy and direction, and one of improving relationships with the broader community sector within the Hamilton Niagara Haldimand Brant Local Health Integration Network's (LHIN) catchment area.

Last year we lead the way for all Aboriginal Health Access Centres in the Province, as the first Aboriginal Health Access Centre to implement Nightingale on Demand, our new Electronic Medical Record (EMR). This EMR will help us to better service and support, not only the patients of our clinics, but will integrate the records of all program participants. This was done to enable our organization to better understand the needs of those we serve so we can offer additional services, increasing the quality of patient/ participant care and support to our community in the future. To further that project in 2013 - 2014, we implemented the EMR across all departments within the organization. This gives the organization an opportunity to collect internal aggregate data that will help us focus our quality improvement, and service expansion over the coming years. For example, we can see how many of our patients are referred from the Primary Health Care Clinic to Mental Health. To further that understanding, we can see the number of people receiving Mental Health services, the waiting list for mental health services, and then promote the data to create a case as to why we need further financial resources to expand mental health services. This EMR, although not perfect, has the capacity to support our efforts to improve the quality of care for those that engage the services and supports of De dwa da dehs nye>s.

Promotion of the "Our Health Counts" report continued to be a constant theme during this fiscal year. "Our Health Counts" is a unique, collaborative research project developed by OUR First Nations community for the benefit of OUR people. It is the culmination of two and half years of work, bringing to light missing population-based health information on First Nations adults and children living in an urban setting. Seven hundred and ninety people living in the city of Hamilton participated in detailed discussions to help us better understand how their health, housing, poverty, history of colonization and culture intersect." The full report, and its findings, can be found at www.ourhealthcounts.ca. The report was so well received for the accuracy of the research, that there is now

a provincial project to gather that same type of information from other communities to better inform the investments of the Government of Ontario in terms of the overwhelming needs of the Aboriginal community living within the Province of Ontario.

We also expanded our Mental Health and Addictions department to include an additional Team Lead and Concurrent Disorders Social Worker. This program partnered with our existing program which now includes six staff members. We now service Children, Adolescents and Adults with mental health and addictions support.

Health Promotions programming expanded from Fetal Alcohol Spectrum Disorder and Child Nutrition Program, Smoking Cessation, Healthy Eating / Active Living, and Diabetes Prevention programming, to include Right To Play, a program supporting the active living of Youth.

This year, like many others, De dwa da dehs nye>s acted as a flow through agency and coordinator for projects that serve the needs of other Aboriginal organizations in the Hamilton Niagara Haldimand Brant Local Health Integration Network (HNHB LHIN catchment area. As it is, many Aboriginal organizations are unable to apply for health dollars, simply because of funding restrictions however, because we are a provincially recognized Health Care provider we are able to provide the opportunity for flow through allowing those organizations to continue to thrive. One such project this year was Cultural Sensitivity Training for Executive Directors, hospital staff, and Emergency Medical Service staff, working in mainstream organizations. This was a project of the Aboriginal Health Network, an HNHB LHIN wide initiative, that was created to build on, and support the cultural sensitivity needs of front-line workers in mainstream organizations. De dwa da dehs nye>s was responsible for coordinating this project and plans to coordinate future Aboriginal Health Network cultural sensitivity training initiatives in coming years.

There are also numerous community activities and events happening within the organization at any time of the year. Our staff, very much look forward to getting involved in community activities that allow them to interact as individuals, not professionals. This year, some of these activities included the

Brantford Easter Egg Hunt, the Brantford Christmas Party, the Hamilton Christmas Hamper project, the BOND Pow Wow that takes place every year at Gage Park in Hamilton, and annual Aboriginal Day festivities. These events bring the patients, participants, community, staff, and volunteers together in spirit and are positive experiences for all involved. These types of events emphasize the uniqueness of our community and all stakeholders involved with the organization.

Social Media involvement that started at the end of the 2012 - 2013 fiscal year with the usage of Facebook. Facebook is a commonly used application by many people within our community and it was important for the organization to embrace this medium of connecting with our constituency. Throughout the 2013 - 2014 our following on Facebook increased significantly, offering a wonderful opportunity to advertise programs and events, as well as to receive direct feedback from our community. This will remain a practice of De dwa da dehs nye>s, offering an excellent example of what Quality Improvement is, and demonstrates that when we improve on existing systems (ie. communication), we can better serve those who utilize our programs and services.

Quality Improvement is always on our minds here at De dwa da dehs nye>s, and during this last fiscal year, we began organizing our work with Quality Improvement in a more formal way. Everything we do and have ever done, has been based on improving our quality of service and support. As an organization, we have never formally put quality plans in place, measured results and reflected on future practice in a formal manner. During the 2013 – 2014 fiscal year, the Board of Directors established a Quality Committee with the responsibility of oversight of Quality Improvement within the organization. This was done to ensure processes of Quality Improvement were in place, and those plans for improvement are monitored and shared with the organization's stakeholders.

The "Walk the Talk" Best Practice Guidelines, originally created by the Southern Ontario Aboriginal Diabetes Initiative (SOADI), and adopted by the Aboriginal Health Network of the HNHB LHIN, were adopted by De dwa da dehs nye>s Aboriginal Health Centre in 2013 - 2014. We believe in promoting Health, and as such, we have adopted "Walk the Talk" Best Practice

Guidelines as a cornerstone document to our planning and programming throughout the organization. These guidelines are available on our organizational website at www.aboriginalhealthcentre.com.

Regardless of where you find yourself within the Aboriginal Health Centre, the culture and traditions of Indigenous People are at its core. We recognize that culture need always be the cornerstone of what De dwa da dehs nye>s is. It is for this reason that you will find traditional and cultural practices being taught and shared within the service departments of; Mental Health and Addiction, Health Promotion, Advocacy and Outreach, and Traditional Healing. Although the Primary Care department of our organization is based on the Western model of medicine, it is easy to find access and referrals to traditional programs and support within our clinics as well.

Our Aboriginal Health Centre is distinctive. Like other organizations in the community, we have numerous programs, services, and activities, however, having indigenous tradition and culture at our core, and a mandate to serve our Indigenous People, marks us as unique.

I thank the dedication, respect, and devotion of all of the volunteers, committee members, patients, program participants, organizational partners, our staff, and our Board of Directors. We all believe in what we do, how we fit into our community, and we know how to support each other. We are survivors, and we thrive well as a distinct organization, in a distinct community.

Miigwetch,

Constance McKnight
Executive Director

DEPARTMENT REPORTS

PRIMARY HEALTH CARE

De dwa da dehs nye>s embodies the concept of we're taking care of each other amongst ourselves.

Our mission statement for the organization as well as in primary care services and diabetes management is to improve the wellness of Aboriginal individuals and of the Aboriginal Community by providing services which respect people as individuals with a distinctive cultural identity and distinctive values and beliefs.

Primary Care and Diabetes Management service providers maintain clinic schedules by supporting and scheduling longer appointment times to ensure that we build and maintain trusting relationships and open communication between our providers and patients to support and understand the lifestyles of the unique families and individual(s) we provide care for.

Medical Student / Nursing Student Placements

- From April 1, 2013 - March 31, 2014 our primary care staff provided learning opportunities for medical and nursing students from within Canada, the United States and Australia. The students represented a total of 5 educational institutions for clinical placements at our Health Centres in both Hamilton and Brantford including McMaster University, Everest College, University of Toronto, D'Youville College (USA) and 1 International Medical Student from Canberra, Australia.
- Total Student Placements = **10**
- Total Clinic hours for all placement students = **878 hours**

Quality Improvement Plan

- Open wait list to schedule intake process appointments for individuals and families without a family doctor
- Recognize and understand barriers and issues involving patients who are no-shows for scheduled primary care and diabetes management appointments
- Decrease total number of no show appointments
- Collaborate with Traditional Healing to introduce clinical teams to the AHC Traditional Healers, cultural services, circles and sweatlodge ceremonies provided by the Traditional Healing department

Primary Care Services Statistics April 1, 2013 - March 31, 2014

QUARTERLY TOTALS PRIMARY CARE

INDICATORS	Q1-2013	Q2-2013	Q3-2013	Q4-2014	TOTAL
Clients Seen Hamilton	698	697	761	565	2721
Clients Encountered Hamilton	998	1138	1762	1378	5276
Clients Seen Brantford	879	1033	1085	1317	4314
Clients Encountered Brantford	1101	1176	1297	1351	4925
Total No Shows Hamilton	197	140	251	161	749
Total No Shows Brantford	217	204	239	295	955
INDIVIDUALS SERVED IN 2013-14					1453

Respectfully,

Angela Naveau,
Manager of Clinic Services

DEPARTMENT REPORTS

TRADITIONAL HEALING

Traditional Healing had community partnerships Children's Aid Hamilton. The Children's Aid partnership is made up of Circles for aboriginal youth in care. We meet twice monthly with culturally appropriate programming and activities facilitated by various elders and teachers and crafts people.

Our Department partnered with Health Promotion to deliver the Beauty of Stories Project. Health Promotion received funding from New Horizons for Seniors and hosted 3 individual sessions with recognized elders from various communities.

We also created a model for a new program based on the book "Fearless Living" It is a 7 week program which brings our fears to the surface and offers a simple step by step process to conquer and overcome those fears to promote a more peaceful environment.

Traditional Healing saw the implementation of Women's Sweatlodge and Full Moon Ceremonies. These are separate events facilitated by the same person..Nancy Rowe from New Credit. Participants/stakeholders are finding this service to be an invaluable asset on their respective healing journeys.

Traditional Healing saw a closer relationship with the clinicians in terms of them being more aware of the programs/ services offered by Traditional Healing so that they can better refer their patients. Presentations were made at their regular clinical meeting by our Healers and Facilitators.

Our regular programming includes:

- Walter's Healing Journey (26 wks) Brantford and Hamilton)
- Attitudinal Healing (14 wks)
- Grief Recovery (7 wks)
- Spiritual Warriors Roadway Course (20 wks.)
- Jane Burning Workshops (3 per year at both
- Individual Sessions with Jane Burning for energy work (Reiki) and Spiritual guidance. 4 per month at both sites.
- Healing Sound Spa Workshops (2 at both sites)

TRADITIONAL HEALING STATS 2013 - WALTER COOKE

One on One	350
Healing Journey Circles	910
Big Drum	308
Jail Program	75
Sweatlodge	88
Camp	300
Diabetes Program	32
Workshops, Presentations, Teachings	4,403
TOTAL	6,466

Walter Cooke, our Elder continues to be an ambassador for the Centre in his many presentations, openings and teaching engagements within the city of Hamilton and surrounding communities.

Respectfully,

Janet Hill,
Manager of Traditional Healing Services

MENTAL HEALTH AND ADDICTIONS

The goal of the Mental Health and Addictions Services department of the Aboriginal Health Centre is to administer a mental health program for Aboriginal people that ensures Aboriginal people have access to culturally appropriate mental health services and programs, and to promote empowerment of Aboriginal people in determining their own mental health care needs.

To accomplish our goal, we provide:

- Individual Counseling Services
- Couple Counseling Services
- Family Counseling Services
- Alternative Dispute Resolutions circles :
Hamilton & Niagara regions
- Mental Health & Wellness Circle in Koo Ga Da Win
(a Seniors initiative)
- Individual Support Services at Native Women's Center –
Honoring the Circle
- Participation in Health Fairs and school based
programming
- Individual Support Services for referrals from the
Aboriginal Liaison program with the
Hamilton-Wentworth District School Board
- Process referrals for mental health assessments
- Arrange psychiatric assessments for adult, child, and
youth psychiatry



During the 2013 – 2014 fiscal year, with support of the Ministry of Children and Youth Services we were able to continue to grow our Children and Youth programming to full capacity.

With additional support of the HNHB LHIN, we also increased our service to include a Mental Health Team Lead, and a Concurrent Disorders Social Worker.

Unfortunately, we also saw the end of our Addictions Worker position with the re-profiled Homelessness Initiative monies received from Human Resources and Social Development Canada.

Respectfully,

Manager of Mental Health and Addictions Services

DEPARTMENT REPORTS

HEALTH PROMOTION

2013 - 2014 was a year of unceasing momentum for the Health Promotions Department at De dwa da dehs nye>s. This year we have a headcount of 1,279 adults, 887 youth and 753 children attend our programs. We have a headcount of 2,694 people that attended our community events and 1,110 people attended health fairs that we were present at.

This year we delivered the "Healthier YOU" and the "Mino Bnoojiinh" FASD and Child Nutrition Program in both of our sites. The Ministry of Health has committed funding to the Healthier YOU program until 2016. The Ministry of Child and Youth Services has committed to funding the FASD program until March 31st 2014. We have also had the Right To Play program in our Brantford Community, this program will be finished at the end of September 2014.

The Healthier YOU program delivers a three-prong program initiative: Smoke Free Ontario, Healthy Eating Active Living and Diabetes Prevention.

The Smoke Free Ontario program delivered:

- Smoking cessation circles.
- Smoking cessation workshops.
- One on one counselling.
- Cultural interventions that target our youth.
- Nicotine Replacement Therapies.

The FASD and Child Nutrition Program delivered:

- The Women's Sharing Circle program.
- Men's Support Group and Drumming Circle.
- Nutrition Bingo program.
- Community Feasts for Thanksgiving and Christmas in Brantford.
- Community Hampers for the Hamilton community.
- Health and cultural teachings in the schools.
- Family support drop-in programs.

The FASD and Child Nutrition Program delivered:

- Community Easter Egg Hunt (April)
- Best Start Parent Fair (April)
- Open Drums for Breast Cancer (May)
- Aboriginal Solidarity Day Festival in Brantford and Hamilton. (June)
- Wellness Wednesday. (July)
- Family Day in Gage Park. (August)
- "Keep The Waters Clean" virtual Campaign for FASD day. (September 9th)
- Sisters in Spirit Vigil. (October 4th)
- Thanksgiving Feast (October)
- Foot care events for Diabetes Prevention Month (November)
- The Beauty of Stories (November/December)
- Holiday Feast and Holiday Hampers to increase food security. (December)
- Health Fair at Cathedral High school (January)
- Family Day Family Camp (February)
- Social Dancing Workshop (March)
- Therapy Thursday (March)
- Sexy Health Carnival (March)

The Healthy Eating Active Living and Diabetes Prevention programs delivered:

- Chi gong, meditation, yoga and other fitness initiatives.
- Walking challenges.
- Family camp program.
- Healthy cooking classes.
- Traditional teachings, gardening workshops, art classes.
- Swimming passes.
- Drumming.
- Moccasin-making, beading, rattle-making and social dancing.

Right To Play/ Beauty of Stories Project

We had the Right To Play program at De dwa da dehs nye>s this year. The Right To Play program was exclusively working in our Brantford community and led afterschool programming throughout this year. The focus of this program was to promote leadership and life skills in Aboriginal youth.

The Beauty of Stories Project was one-time grant from the New Horizons for Seniors funding. We hosted three events that featured First Nations Elders sharing their stories, knowledge and teachings. This initiative was created to give our seniors a platform for visibility and an opportunity to share their knowledge.

Through the creativity and dedication of our team; the commitment of our joint stakeholders and ultimately the community's ownership of their own journey to wellness, we have been able to deliver these programs and events. Nya:weh to everyone for all they have contributed. It has been my privilege and blessing to recall all the work of 2013 - 2014.

Respectfully,

Anastasia Blackey,
Manager of Health Promotions and Education Services.

DEPARTMENT REPORTS

ADVOCACY AND OUTREACH

The 2013 – 2014 fiscal year was one of excitement for our Advocacy and Outreach Department.

Senior's transportation was moved under the responsibility of the department, and a new Patient Navigator program was launched.

The Advocacy and Outreach Department is responsible for individual advocacy/navigation throughout the LHIN and systemic advocacy within Hamilton and Brantford, senior's transportation in both Hamilton and Brantford, and the organization's "Over the Counter" medication program for our Hamilton community members who are homeless, or at risk of homelessness.

During the fiscal year, we serviced an advocacy client case load of 40 at the Hamilton and Brantford sites, whilst serving a total of 255 individuals. Included, are 8 in-home appointment visits, in partnership with other community agencies.

Our department conducted one presentation, consulted regularly with other Health Care and Social Service organizations in both the Aboriginal and mainstream community, conducted cultural sensitivity training, a 4 session Woman's Circle in collaboration with the Mental Health and Addictions Department, and was involved in numerous community events for the purpose of promotion of the organization, and the specialized programs offered by the department.

Transportation Services supported 994 individuals to medical appointments throughout the year.



The Over the Counter Medication Assistance Program serviced 135 homeless individuals with over the counter medication and health supplies.

Respectfully Submitted,

Tara Williams

Manager, Advocacy & Outreach Services

In March 2014, the Aboriginal Patient Navigator program was launched, and was being fully utilized by March 31st. The program is proving to be an organizational Best Practice, and is greatly impacting the communities in the regions of Niagara, Hamilton and Brant.

Although sometimes challenging, the work of the Advocacy and Outreach Department is very fulfilling. We are making a quality of life difference in the lives of many of our community members, and we look forward to continuing that trend in years to come.



2013 – 2014

BOARD OF DIRECTORS



Chair

Pat Mandy

Vice Chair

Brad Johnson

Treasurer

Kevin Sulewski

Secretary

Terry Ramirez

Members at Large

Fred Loft
Amos Key Jr.
Lina Rinaldi
Bernice Downey
Dr. V. Janice Kahehti:io Longboat

ABORIGINAL HEALTH ACCESS CENTRES

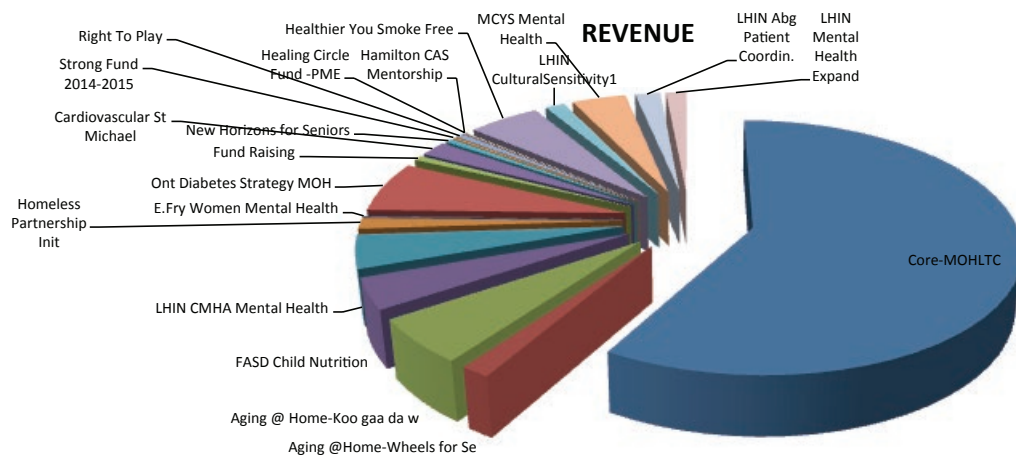


CORE ATTRIBUTES DE DWA DA DEHS NYE>S AND
OF ALL OUR SISTER ABORIGINAL HEALTH ACCESS
CENTRES IN ONTARIO

2013-2014 FINANCIAL SUMMARY

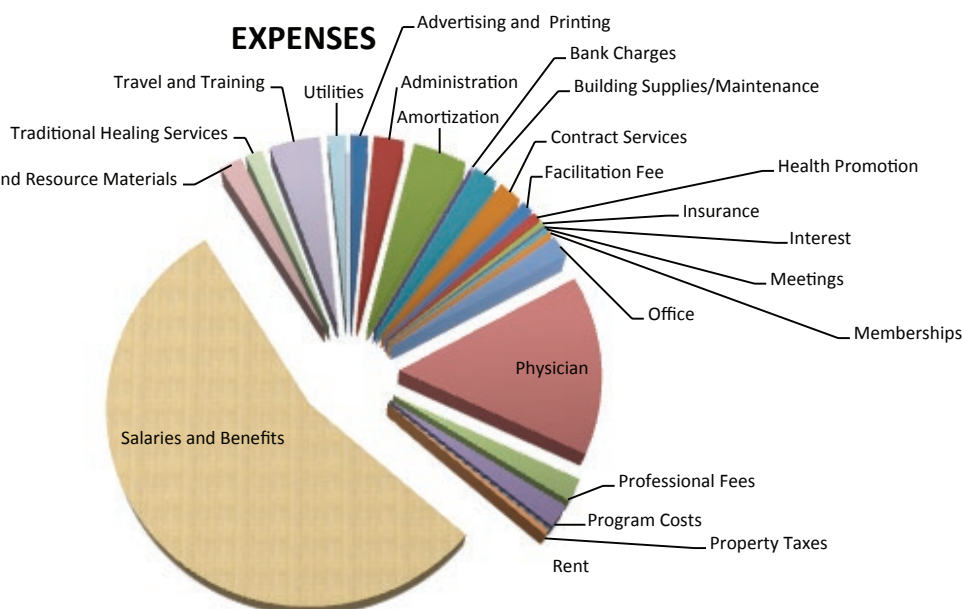
Revenue

Core-MOHLTC	\$2,519,994.00
Aging @Home-Wheels for Se	\$66,590.88
Aging @ Home-Koo gaa da w	\$245,367.12
FASD Child Nutrition	\$170,200.00
LHIN CMHA Mental Health	\$185,869.00
Homeless Partnership Init	\$60,000.00
E.Fry Women Mental Health	\$3,500.00
Ont Diabetes Strategy MOH	\$281,600.00
Fund Raising	\$27,992.60
Cardiovascular St Michael	\$84,868.87
New Horizons for Seniors	\$23,880.00
Strong Fund 2014-2015	\$11,272.00
Right To Play	\$23,651.25
Healing Circle Fund -PME	\$5,352.45
Hamilton CAS Mentorship	\$4,154.18
Healthier You Smoke Free	\$223,900.00
LHIN CulturalSensitivity1	\$60,730.00
MCYS Mental Health	\$169,545.00
LHIN Abg Patient Coordin.	\$78,950.00
LHIN Mental Health Expand	\$63,499.00

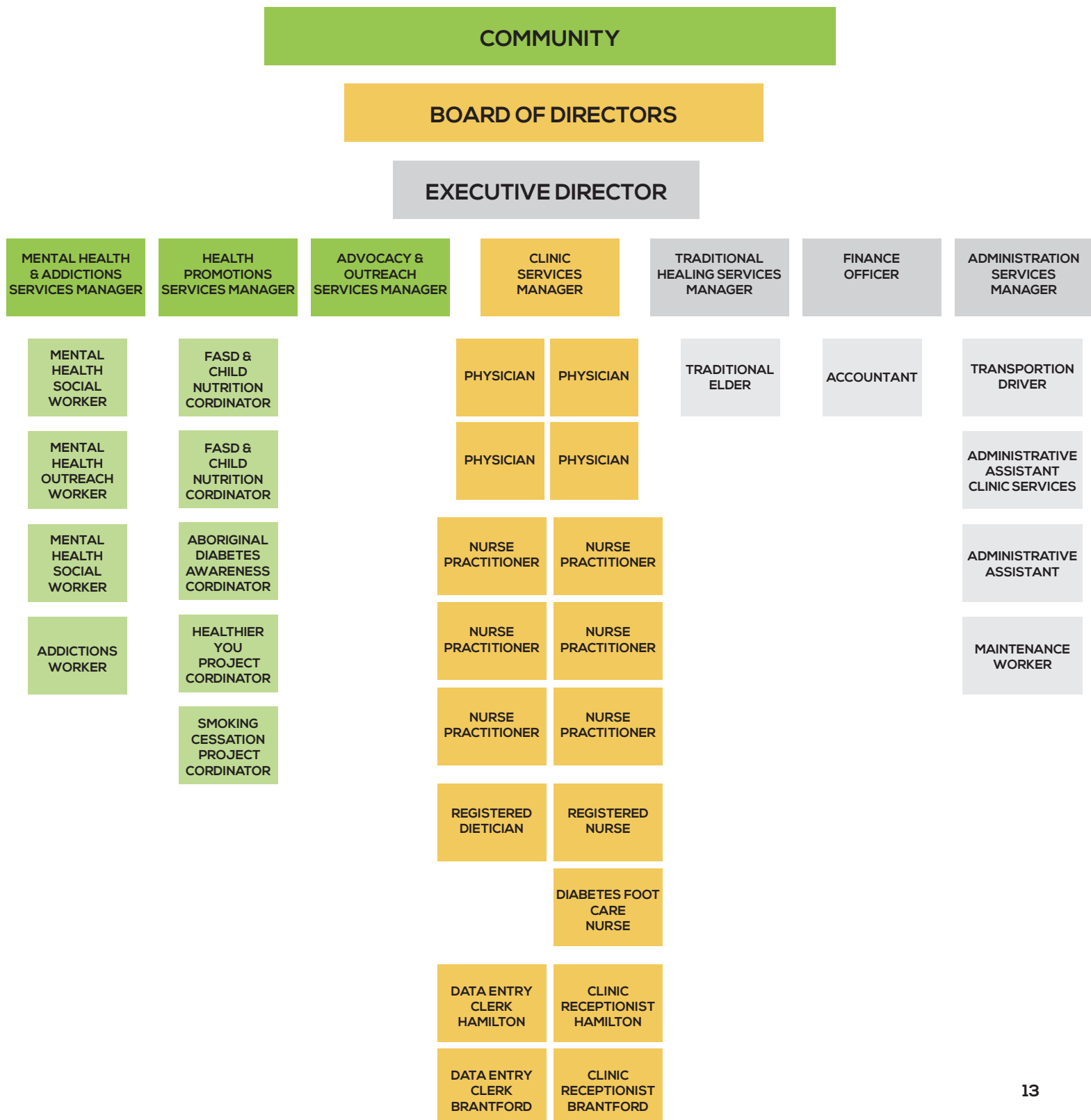


Expenses

Advertising and Printing	\$61,036.00
Administration	\$107,583.00
Amortization	\$193,123.00
Bank Charges	\$2,626.00
Building Supplies/Maintenance	\$86,327.00
Contract Services	\$84,320.00
Facilitation Fee	\$43,785.00
Health Promotion	\$32,716.00
Insurance	\$17,841.00
Interest	\$5,554.00
Meetings	\$15,463.00
Memberships	\$12,988.00
Office	\$78,628.00
Physician	\$642,338.00
Professional Fees	\$82,671.00
Program Costs	\$83,599.00
Property Taxes	\$3,107.00
Rent	\$20,235.00
Salaries and Benefits	\$2,375,445.00
Supplies and Resource Materials	\$81,080.00
Traditional Healing Services	\$60,418.00
Travel and Training	\$179,400.00
Utilities	\$63,570.00



2013-2014 ORGANIZATIONAL CHART





De dwa da dehs nye>s Aboriginal Health Centre embodies the concept of:
“Taking care of each other amongst ourselves”

Our Mission

To improve the Wellness of Aboriginal individuals and of the Aboriginal community by providing services which respect people as individuals with a distinctive cultural identity and distinctive values and beliefs.



Hamilton Location
 678 Main Street East
 Hamilton, ON, L8M 1K2
Tel: (905) 544-4320

Brantford Location
 36 King Street East
 Brantford, ON, N3T 3C5
Tel: (519) 752-4340