



Regional
HIV/AIDS
Connection

Community Inspired. Courage Driven.

ANNUAL REPORT 2015/16



Serving Perth, Huron, Lambton, Elgin, Middlesex and Oxford Counties

WHAT'S INSIDE

Executive Message.....	2	Community Relations.....	10
John Gordon Home.....	5	Financials.....	12
Strategic Plan.....	4	Thank you.....	12
Client Services.....	6	Our People.....	14
Education.....	8		

At Regional HIV/AIDS Connection (RHAC), we are community-inspired and dedicated to positively impacting the lives of individuals and diverse communities living with, at-risk for, or affected by HIV/AIDS and Hepatitis C.

Our Year at a Glance



20,000+
educational
resources
delivered to the
community



39,000+
condoms
provided



11,806
volunteer
hours logged—
equivalent to
6.5 full-time
employees



1,565
volunteer hours
logged by PHAs



40+
memberships
to external
groups/
committees



6
lives saved

THE COURAGE to Do What is Right



2015 was a milestone year for RHAC as we celebrated and reflected upon our 30th year, we officially amalgamated with John Gordon Home and the Board began to develop its new Strategic Plan, paving the way for our future priorities.

Following two years of work, the newly incorporated Regional HIV/AIDS Connection officially commenced on April 1st, 2015 with an integrated Board of Directors, a new Director joining the Leadership Team (Bruce Rankin, now Senior Director, RHAC) and a merging of two, unique work-place cultures. Since then we have successfully merged our HR policies (a major undertaking); integrated our accounting/payroll systems; enhanced client services; and continue to work on collaborative service and care models.

In the summer of 2015 we held our annual GIPA/MIPA ceremony in the John Gordon Home Healing Garden to re-dedicate RHAC to the Ontario Accord and its principles – the greater and meaningful involvement of people with HIV/AIDS. Poignantly, the walkway to the “healing” garden was adorned with signs reflecting what RHAC means to PHAs. By fall we were fully immersed in a number of local, provincial and national issues impacting the HIV/AIDS and Hepatitis C sectors.

Examples of community collaborations on new initiatives included: **London's Community Plan** regarding Street Level Women at Risk, a housing-first approach to working with women engaged in street level sex work; **London Middlesex Community Drug Strategy; Managed Alcohol Program; Safe-Injection Site Research Study**, and the **We Speak** project aimed at men in the African Caribbean community.

It was a year of celebration and rewards for RHAC. This could not have been more apparent than on the **Evening of the Red Scarf** in November or, one day later, when we joined partners to win a Pillar Community Innovation Award for our **Naloxone Project**. However, along with our peaks came our valleys. With community partners, we continued to face increasing challenges associated with poverty and

faced by people with HIV/AIDS in the 1980's became the foundation upon which we have built today's programs and services.

In conclusion, while it is important that we always celebrate our achievements, never in recent history has our value statement been more important: Therefore, we truly believe joining "The Home with a Heart" with an agency that espouses "The Courage to Do

The Courage to Do What is Right:

- Challenging and addressing the stigma faced by marginalized people who need access to health care
- Providing a compassionate, supportive and welcoming environment to people who are seldom welcomed anywhere in our community
- Standing up and voicing positions that may draw criticism and indeed the ire of some in our community, such as our principles of harm reduction and the decriminalization of HIV.

addiction in our region, especially London. This was further compounded by the societal stigma related to addiction and mental health, often leaving our clients at further risk. Recent news stories, highlighting some of London's most vulnerable people, affirmed this.

While we have made strides in our advocacy and human rights work for the LGBTQ community, we know that stigma infused homophobia continues to contribute to new HIV infections in the gay/bi/trans communities. Our founders and predecessors displayed tremendous courage in doing the right thing thirty years ago. Challenging the health care system and our society-at-large to confront fear and stigma

What is Right" has been a good marriage. It has only been a year; we have work to do; yet our combined staff, Board, and volunteers are better—together — at touching lives, transforming lives and saving lives.



Brian Lester
EXECUTIVE DIRECTOR



Mana Khami
BOARD PRESIDENT

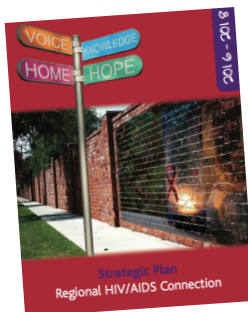
Strategic Plan

RHAC proudly committed to our new Strategic Plan for 2016-18. After 30 years of serving the community, new strategies will increase our capacity to fulfill our mission, and address changing needs to ensure we remain relevant and vital for our clients.

1

Ensuring Our Programs Respond to Evolving Needs

- To continue to develop and apply harm reduction as a priority service
- To ensure programs are informed by reliable evidence, and the changing needs of our community
- To strengthen collaborative and shared services in the region
- To develop and strengthen programs for identifying, measuring, and reporting outcomes



2

Growing Community Engagement

- To actively support research enhancing the quality and effectiveness of RHAC programs/ services
- To continue leading as an advocate for people with HIV/AIDS and Hep-C
- To grow educational, preventative, and awareness programs
- To increase engagement with defined local communities, in alignment with the new provincial AIDS Strategy and Hep-C services
- To continue as a voice in local/ provincial/national forums

3

Developing Our Capacity to Serve

- To develop a comprehensive Human Resources Strategy for RHAC staff
- To enhance services and supports to clients, staff, and volunteers with developed infrastructure strategies
- To undertake a branding initiative for RHAC, and align an annual, multi-channel communications strategy
- To develop a multi-year Fund Development and Income Diversification Strategy
- To continue governance growth and effectiveness by undertaking a governance review that includes risk management perspectives

To learn more about our Strategic Plan, please contact
Regional HIV/AIDS Connection or visit hivaidconnection.ca.



John Gordon Home

2015 was an exciting year as JGH formalized its amalgamation with RHAC. Now operating as a program under the umbrella of RHAC, JGH has continued to be the **Home with a Heart**. The consolidation of our services has supported exciting new directions, and strengthens the care we deliver our residents. JGH has been responding to the unfolding challenges of HIV/AIDS and HCV in our community for over two decades. Historically Canada's first AIDS hospice, we are now focused on providing transitional care to assist people with access to treatment, and improve their quality of life.

The ultimate goal is that upon discharge from JGH, residents will have the right supports in place to lead long and healthy lives. Through amalgamation, we are strengthening our collective responses to service delivery.

At the centre of our growing success is the collaboration and commitment of our board members, staff, volunteers, and partners. At RHAC, a robust volunteer program has enhanced our volunteer supports. Together, our administrations have also developed an integrated human resources platform to the benefit of our dedicated staff. With RHAC, we have



11

new residents



20

occupants in total



26

volunteers —2 are
previous residents



963

volunteer
hours logged

Over the last year, we have begun integrating RHAC case management into the John Gordon Home; ensuring residents work with a case manager who assists them through their transitions and care plans.

continued our flexible and responsive services as part of a larger family. With increasing capacity, and the greater potential for growth, we look forward to the success of RHAC and the John Gordon Home's united efforts.



Client Services

Client Services continued to be innovative and responsive during the 2015/16 year.

We respond to changing needs in the community by learning from our clients. Every day, their involvement shapes our services and success. Agency initiatives, such as policy review and development, continued to benefit from the valuable inclusion of clients and PHAs. Our ongoing commitment to the Ontario Accord and the Greater and Meaningful Involvement of PHAs was reflected in our annual GIPA ceremony, hosted in 2015 in

the beautiful gardens of the John Gordon Home with staff, clients, and Board members present. Through ongoing discussions to address needle disposal in our community, clients recommended our newest product: pocket-sized sharp containers to increase the safe disposal of syringes.

RHAC continues to attract a variety of stakeholders and partners with our reputation, and progressive approach. We have developed new opportunities with community partners to enhance service options available to clients

including the **We Care Program**, a partnership with the Infectious Disease Care Program, and London InterCommunity Health Centre to further enhance individuals' access to HIV treatment.

The Ontario Integrated Supervised Injection Services Feasibility Study, a partnership with Ontario HIV Treatment Network and Counterpoint, began to assess the possibility of supervised injection services in London. Client surveys were facilitated by 3 Peers, interviewing more than 200 injection drug users to determine



their health care needs. With their contribution, RHAC is shaping the future of harm reduction in London, Ontario.

Client Services provided a variety of supports to more than 3,000 individuals in the last year. We supplied approximately \$2,500 in food vouchers to support healthy food options for clients. **Our Country Cupboard** program continued to support clients thanks to generous food donations from our community. We also facilitated 27 group sessions with a range of activities, including **Lunch and Learns** and social events. Our biggest events included our annual holiday dinner and summer barbeque, where we hosted over 132 clients, family, and friends, shared a meal, and celebrated the seasons. With the launch of the new Hep-C medication **Harvoni**, in October 2014, our Hep C Care Team has doubled the number of clients eligible to access treatment. The new medication has minimal side effects; treatment is 8-12 weeks (formerly 24 weeks) with a cure success rate of 94-99%. The Hep C Peer Team continues to be involved in multiple outreach activities, increasing education and awareness of Hep C and treatment.

The Naloxone Program—a partnership with London InterCommunity Health Centre, London Area

Network of Substance Users, and Middlesex London Health Unit—continues to distribute Naloxone, which reverse the effects of overdose. Along with our partners, we were very proud to win a Pillar Community Collaboration award for the Naloxone Program!

Counterpoint continues to be recognized as the busiest Needle Syringe Program in Ontario.

FACTS + FIGURES:



6

lives saved through
Naloxone Program



2.7

million
needles distributed



18,300

client visits



900

new clients



Education

It was a dynamic and collaborative year for the Education Department. With our partners at **African Canadian Federation of London and Area (ACFOLA)**, **Western University's Black Students' Association**, and the **Options Clinic**, we were able to coordinate a strong organizational presence at two health fairs that focused on health and wellness among London's local African, Caribbean, and Black communities. We also continued to collaborate with **United Kutz** barbershop, which afforded us the privilege of connecting with the diverse communities they serve. United Kutz staff has remained engaged and supportive, standing as strong community leaders who have helped us continue to both strengthen our

education work, and further our reach by facilitating relationship-building among RHAC staff and the community at large.

In response to the rising STI rates among individuals living in long-term care, the Women's HIV/AIDS Community Development Coordinator supported professional development related to HIV awareness in the long-term care sector. Additionally, coordinators in the Education Department leveraged strengths and networks while working together to organize community events in recognition of Black History Month and International Women's Day. This collaborative work significantly augmented the engagement of local Francophone service providers at

the planning table and increased community support and participation at these events as a result.

Further, we were excited to see that the **Gay Guys' Book Club** not only continued to flourish, but also gained momentum. Most notably, several book authors—such as **P.A. Brown** and **Raziel Reid**—joined the group for lively discussion!

Finally, the Education Department's **GBMSMT2S & HIV Community Development Coordinator** played a role in supporting the work of the organization's overarching regional outreach and engagement portfolio by providing a staff development workshop at Sarnia Lambton Public Health and a training session at **Sexual Assault Survivors' Centre** in Sarnia to support capacity-building for engaging and serving diverse communities. Although it was originally

FACTS + FIGURES:



86
presentations
to 3,800 people



221
community
partner
meetings



5,500
packets of lube
distributed

intended for only four staff, the latter professional development opportunity was in such high demand that the host organization ultimately opened up registration for the session, which resulted in the registration of 21 staff.



Community Relations



Branding, awareness, and stakeholder-appreciation were the focus of our Community Relations work in 2015/16. From amalgamation and our 30th Anniversary, to volunteer recognition and client engagements, successful initiatives—such as our **Red Scarf Project**—were strategically planned to maximize communications. Positive messaging was essential during a year of increased public and media awareness, in response to community-based issues such as London's Drug Strategy, the Supervised Injection Services study, and the release of local HIV rates.

Honouring our history, telling people who we are today, identifying future priorities, and giving thanks and gratitude were the key features of our messaging. At the launch of our first-ever **Evening of the Red Scarf**, we reflected and commemorated with powerful video messages on these themes. During our 30th year, we asked clients—including PHAs, volunteers, and partners—to tell us what RHAC meant to them. Their responses served as powerful, visual reminders of the impact we work to achieve.

In the last year, we have begun refreshing our major publications; ensuring new communications have a look that reflects the agency's evolution. We also initiated an audit of our website with plans for a coming re-launch.

Throughout our region, we continued to liaise and work with community groups and committees. In addition, we planned and delivered on the most comprehensive social media strategy to-date, delivering key messages in the counties we serve, and beyond. Community Relations supported other departments in planning and delivering digital media campaigns to targeted populations, such as the priority populations identified by the Ontario AIDS Bureau. RHAC also provided research and recommendations on new and emerging markets, contingent on future funding from the federal government.

In spite of a vacancy in our Fund Development portfolio for several months, we achieved positive responses to all of our 2015/16 grant applications. With the hiring of our new Fund Developer, we also secured a new grant from **The Johansen-Larsen Foundation**. At the time of print, we further await results from two new funders. We continued to benefit from the generosity of long-time supporters, such the Schulich students involved in **Tachycardia**; Rainbow Cinemas' hosting of **Rocky Horror Picture Show**; and the nearly 30 restaurant owners who supported **A Taste for Life**, reaching almost \$50,000 in 2015, and \$52,000 in 2016!

As our work continues to evolve, Community Relations thanks the volunteers and supporters who energize all of us at RHAC.



FACTS + FIGURES:



54%
of volunteer
hours logged
during the Red
Scarf Project



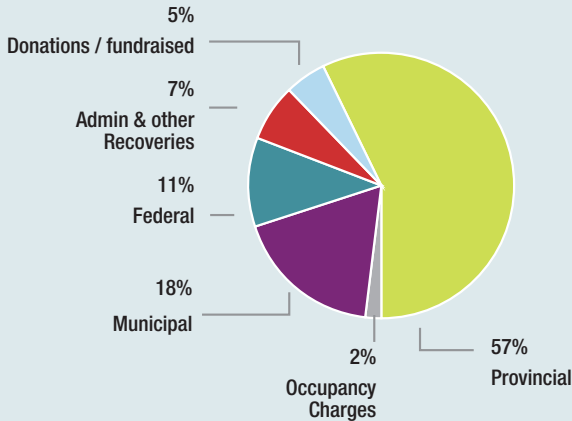
1,371
scarves made
for the Red
Scarf Project
and AIDS
Awareness
Week



84
hours of
professional
development
training for PHAs
with the Ontario
AIDS network

Financials

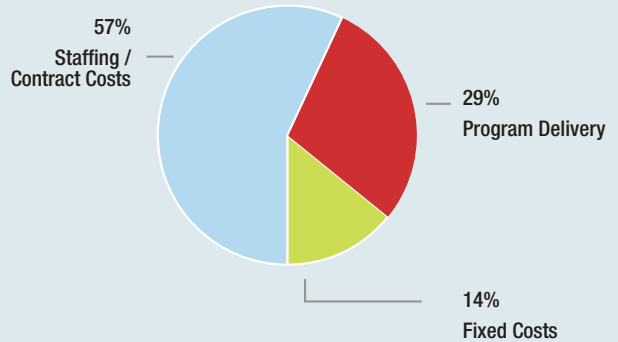
REVENUE



TOTAL \$3,025,194

Total does not include in-kind donations

EXPENSES



TOTAL \$2,995,155

Thank you

Without the commitment and dedication of our amazing volunteers and partners, we would not thrive as a respected organization that makes a difference. We are humbled and grateful for all that they have done and for all that they continue to do to make RHAC a place that positively impacts others – in so many ways. Thank you!

Brian Lester



- Former RHAC member Kevin Murphy honoured with the RHAC Honour Roll Award



- Fred Lush and Andy McLean recognized with the RHAC Voice, Knowledge, Hope Award



- Mana Khani recognized with Business London's 20 Under 40 Award

REVENUE	King Street	John Gordon Home	TOTAL
Federal	318,718		318,718
Provincial	1,162,483	552,715	1,715,198
Municipal	488,767	70,020	558,787
Total Government Funding	1,969,968	622,735	2,592,703
Occupancy Charges		67,559	67,559
Fundraised	112,708	3,500	116,208
Donations	30,670	2,489	33,159
Admin & Other Recoveries	142,527	73,038	215,565
TOTAL REVENUE	2,255,873	769,321	3,025,194
EXPENSES			
Staffing / Contract Costs	1,178,022	517,385	1,695,407
Program Delivery	835,485	38,575	874,060
Fixed Costs	202,327	223,361	425,688
TOTAL EXPENSES	2,215,834	779,321	2,995,155



- Bonita Cope, Dr. Stephen Barr, Laura Janecka, Chris Bellamy, Michael McCauley, Liam Priest, and Niko Hoekstra received 2015 Ontario Volunteer Service Awards



Our people

STAFF

Brian Lester
Executive Director

Bruce Rankin
*Senior Director, John
Gordon Home/Acting
Executive Director,
RHAC (2016)*

Sonja Burke
*Director of
Counterpoint Harm
Reduction Services*

Karen Burton
*Needle & Syringe
Program Coordinator/
Harm Reduction Case
Manager*

Toby Clipperton
PSW

Carlen Costa
*HIV Regional Resource
Coordinator*

Josie DeBorger
PSW

Rose Diamini
RPN

Caren Fair
PSW

Sherry Fama
PSW

Meredith Fraser
Director of Education

Carin Fraser
Case Manager

Lila Hemphill
HCV Support Worker

Wesley Heney
*GBMSMT2S &
HIV Community
Development
Coordinator*

Blair Henry
*Harm Reduction Case
Manager*

Mike Joudrey
Office Manager

Andy MacLean
*IDU Outreach Worker/
Harm Reduction Support
Worker*

Mary Mann-
McCavitt
*Nutrition Services
Coordinator*

Emily Marcoccia
*Director of Community
Relations*

Kori McCoskey
Administrative Assistant

Mike McGregor
IDU Outreach Worker

Martin McIntosh
*Community Relations
Coordinator*

Ian MacLeod PSW
Marsha Milliken
*HCV Educator/Support
Worker*

Rob Newman
Peer Support Worker

Mercy Nleya
*Multicultural
HIV Prevention
Coordinator*

Raymond Okeke
RPN

Yvonne Rimbault
*Resident Care
Coordinator, RPN*

Miriam Rivera
Case Manager

Glenda Robillard
Director of Operations

Samantha Scott
*Harm Reduction
Support Worker*

Nick Scrivo
HCV Support Worker

Jason Sinnicks
PSW

Christopher
Sterling-Murphy
*Gay Men's HIV
Prevention Worker*

Gijo Varghese
RPN

Holly Taylor
*Women's HIV/
AIDS Community
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Melissa Whaling
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Kelly Wright
*Director of HIV
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