WCHC
COMMUNITY
HEALTH CENTRE

2025-2026
Annual Report

Rooted in Community.
Growing Together.

Ben Hesch, and the Senior Management Team, had the pleasure of hosting Nicole Robinson, Chief Regional Officer of Ontario Health West in December 2025. We toured her through our St Jacobs location, and spoke to the unique client base we serve at Woolwich CHC.

Board & Committee Membership

Board of Directors

Cosma, Hanriett – Director
Feltz, Kathryn – Director
Hand, Johanne – Director
Healey-Martin, Jean – Secretary
Hesch, Benjamin – Chief Executive Officer
Hribar, Mike – Chair
Jobanputra, Ashok – Director
Monk Vanwyk, Dawna – Director
Seiling, Ken – Director
Shantz, Mack – Director
Shipley, Mike – Treasurer
Stanley-Horn, Greg – Director
Swatridge, Andrew – Vice Chair

Executive Committee

Healey-Martin, Jean – Secretary
Hesch, Benjamin – Chief Executive Officer
Hribar, Mike – Chair
Shipley, Mike – Treasurer
Swatridge, Andrew - Vice Chair

Alliance Board Liaison

Hand, Johanne - Director

Finance Committee

Cosma, Hanriett – Director
Hesch, Benjamin – Chief Executive Officer
Hribar, Mike – Board Chair
Jobanputra, Ashok – Director
Mendes, Matthew – Director, Finance & Operations
Shipley, Mike – Committee Chair/Treasurer
Feltz, Kathryn – Director

Nominations Committee

Healey-Martin, Jean – Board Secretary
Monk Vanwyck, Donna – Director
Swatridge, Andrew – Committee Chair/Vice Chair

Quality Committee

Rodriguez, Guillermo – Director, Primary Care
Healey-Martin, Jean – Committee Chair/Secretary
Hand, Johanne – Director
Hesch, Benjamin – Chief Executive Officer
Hribar, Mike – Board Chair
Jones, Gareth – Community Member
Monk Vanwyck, Dawna – Director
Stanley-Horn, Greg – Director

2025 - 2026

Strategy 2025 - 2030

Mission

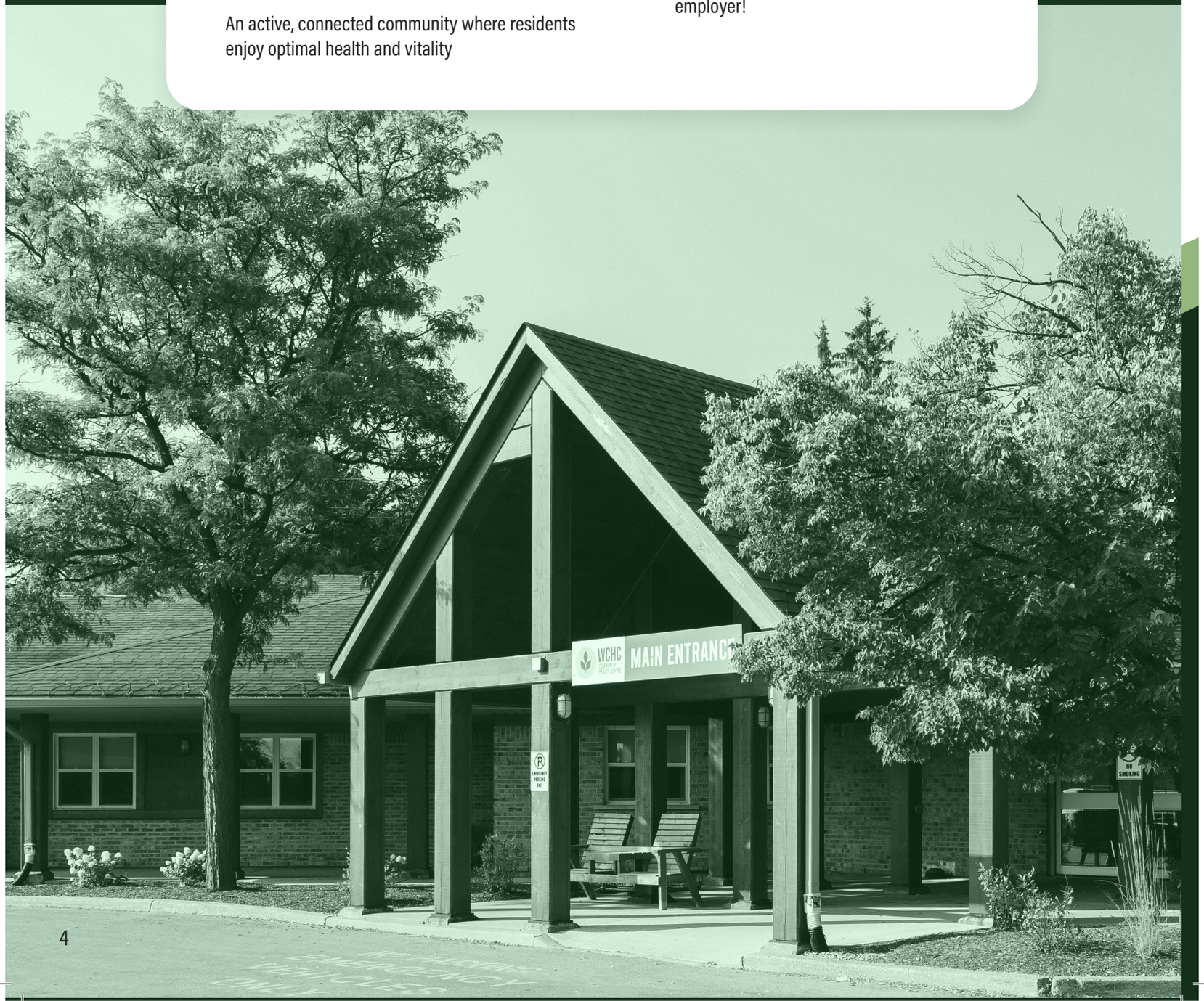
Enhancing health and well-being in our diverse and evolving communities in Woolwich, Wellesley and Wilmot

Vision

An active, connected community where residents enjoy optimal health and vitality

ASPIRATIONS 2030

- Expand our brand, integrated care model, and facilities for our growing and diverse communities in Woolwich, Wilmot, and Wellesley.
- Become a highly sought after CHC employer!



STRATEGIC PRIORITIES

Provide Equitable Integrated Care

1. Continue to improve and expand our
   - » Patient-centered, holistic approach
   - » Focus on SDoH
   - » Accessibility and Flexibility
2. Enhance our ability to respond to our growing & diverse populations
3. Increase operational efficiency

2030 Outcomes

- Increased interprofessional referrals
- Seamless and timely pathways of care (within and without)
- Increased commitment to gathering metrics to demonstrate holistic and equitable care
- We spend our budget with the greatest value for our community

Foster a Vibrant Culture of Excellence

1. Retain and attract talented and committed staff
2. Nurture trusting relationships throughout the organization
3. Encourage collaborative communication between staff members, teams, board members, and volunteers
4. Recognize and support our high performing teams

2030 Outcomes

- Stable cohort of staff with good retention compared to the sector
- A demonstration of staff engagement throughout the organization (e.g. ENPS)
- Board members are strong advocates for the staff and stakeholders in the provincial arena
- Staff grow in their careers

Boost our Sustainable Growth

1. Establish a process for future investments from the community & other funders
2. Augment:
   - » Our brand and profile with key stakeholders
   - » Our presence throughout Woolwich, Wellesley and Wilmot
3. Generate the opportunities to build/ expand clinical facilities & programming in Linwood, Breslau & St. Jacobs

2030 Outcomes

- WCHC has Foundation that enhances our impact on the community
- Expanded locations across the townships
- The go to place for healthcare in the 3 townships (we will be a strong force within KW4OHT)
- Strong relationships with key stakeholders and government officials (stakeholder mapping)

WCHC Staff

Last name, First name	Job Title
Aggie Marshall	Dental Assistant
Aidan Herzog-McArthur	Counsellor
Aleem Adatia	Physician
Amelia Ballak	Music Therapist - Counsellor
Amy Hill	Registered Nurse -Diabetes Educator
Anandita Gokhale	Physician
Andrea Vale	Dental Hygienist
Andreina Wu Chen	Physiotherapy Assistant
Arianne Dyack	Nurse Practitioner
Ashlynn Cartier	Youth Peer Worker
Asil Al-Shaibani	Registered Dietitian -Diabetes Educator
Barbara Bastien	Financial Clerk
Ben Hesch	Chief Executive Officer
Brittany Trueman	Registered Dietitian
Caley Klaassen	Counsellor
Cat Jeffrey	Patient Care Coordinator
Chelsea Emo	Medical Office Administrator
Chelsea Miller	Nurse Practitioner Student
Chris Pavy	Medical Office Administrator
Chris Tofflemire	Nurse Practitioner
Christina Schill	Fitness Instructor
Claire Gillies	Volunteer
Courtney Bauman	Community Outreach Worker
Craig Peters	Physician
Derek Mak	Nurse Practitioner
Donna Benallick-Arndt	Clinical Nurse - RPN

Last name, First name	Job Title
Em Buchenauer	Registered Nurse -Diabetes Educator
Esther Janzen	Community Ambassador
Gebre Berihun	Director, Community Services
Genevieve Crush	Physician
Guillermo Rodriguez	Director, Primary Care
Haley Court	Chiropodist
Hansa Gupta	Physician
Helen Houston	Medical Office Administrator
Hillary Maguire	Volunteer
Huyen Pham	Physician
Iris Huang	Accreditation Assistant
Jacob Balmer	Volunteer
Jane Logel	Medical Office Administrator
Jeff Kline	Facilities Operator
Jen Dignam	Physician
Jennifer Samson	Human Resources Generalist
Jorja Maier	Clinical Nurse - RPN
Julie Island	Physiotherapist
Karen Burgess	Nurse Practitioner & Provider Team Lead
Karlee Herrgott	Volunteer
Kate O'Brien	Medical Office Administrator
Katerina Bauman	Physician
Kathryn Steckley	Volunteer
Katie Hortobagyi	Registered Dietitian
Kelly Grindrod	Clinical Pharmacist
Kerri Benallick	Clinical Nurse - RPN

WCHC Staff

Last name, First name	Job Title
Khiria El Feghi	Physician - locum
Khush Talati	Medical Office Administrator
Kim Lorentz	Contractor
Kimberley Rumph	Nurse Practitioner
Krista Steinmann	Chiropodist
Kristin Mueller	HR Consultant
Laura Jakobs	Nurse Practitioner
Lauren Elford	Clinical Services Manager
Lauren Kells	Community Outreach Worker
Liz Krzyz	Fitness Instructor
Londyn Braunbarth	Clinical Nurse - RPN
Lynette Weber	Contractor
Mandy Beitz	Medical Office Administrator
Manni Hayer	Volunteer
Maria Boehm	Nurse Practitioner
Maria Dy	Clinical Nurse - RPN
Maria Peters	Contractor
Matthew Mendes	Director, Finance & Operations
Meghan O'Brien	Clinical Nurse - RPN
Mekalai Kumanan	Physician - locum
Mel Wallace	Executive Assistant
Melanie Alles	Fitness Instructor
Melissa MacDougall	Medical Office Administrator
Michelle Meggs	Clinical Nurse / Nurse Scheduling Coordinator
Michelle Schierholtz	Nurse Practitioner
Nancy Guay	Medical Office Administrator
Natalee Miller	Dietitian - GFK

Last name, First name	Job Title
Paula Ballak	Clinical Nurse - RPN
Penny Bedford	Counsellor
Rachel Eby	Clinical Nurse - RPN
Rachel Jensen	Clinical Nurse - RPN
Rasha Salem	Fitness Instructor
Rayan Hassan	Medical Office Administrator
Sanya Sanya	Medical Office Administrator
Sewmi Pathiraja	Laboratory Technician
Shivi Yashi	Nurse Practitioner
Su Heise	Clinical Nurse - RPN
Tariq Abdulhadi	Health Promoter / CS Team Lead
Tracy Best	Medical Office Administrator/Team Lead
Tricia Martin	Fitness Instructor
Venissa Kisnasammy	Clinical Nurse - RPN
Vishal Saxena	Dentist
Wendy Lebold	Nurse Practitioner
Will Van Heiningen	Physician
Bernadette Vanspall	Physiotherapist (Retired)

Service Impact Testimony (Counselling)

"A client came very close to completing suicide in the summer. His depression was very severe, and he was hospitalized at that time. He then attended psychotherapy sessions and social prescribing services. His depression is now in remission, he has a new apartment, is exploring returning to work, has hope for his life again, and just became the proud owner of 2 cats" (Psychotherapist)

Catchment Area & Priority Populations

Catchment Area

WCHC serves a geographical catchment area that includes the territory of Woolwich Township, Wellesley Township and Wilmot Township, with some areas of Perth County:

WCHC operates three sites: the main office in St. Jacobs, the site in Wellesley, and the site in Linwood.

Each site serves part of WCHC's catchment area:

- The St. Jacobs site provides primary health care to registered patients living in Woolwich Township.
- The Wellesley site and Linwood site provide primary health care to registered patients living in Wellesley, Wilmot and Perth.
- Residents from across WCHC's catchment area may access health education programs as well as chiropody & allied health services offered at any site.

Priority Populations

Among the residents of WCHC's catchment area, priority for primary health care intake and program development is placed on populations that may experience greater barriers to health or barriers to accessing health resources. Our priority populations collectively include:

- Anabaptist Group
- Seniors (60+) and their caregivers
- Non-OHIP covered residents
- Families with young children (0-6)
- Farm Families, including those from conservative Mennonite groups
- Youth (14-19 years of age)
- Newcomers

The general population is not considered to be a priority population. However, in setting priorities for primary health care intake and program development, WCHC will consider self-identified factors that increase the risk for poor health:

- "barriers to health", such as presence of chronic disease, social isolation, family history of significant disease, etc.
- "barriers to accessing health resources", such as low income, literacy issues, or lack of transportation, etc.

Report of the Chief Executive Officer & the Board Chair

Fiscal Year 2025–2026

As Woolwich Community Health Centre (WCHC) moves through its 43rd year of service, the 2025–26 fiscal year stands out as one of both significant expansion and increased complexity. This year tested our ability to lead, adapt, and collaborate across a rapidly evolving primary care landscape, while remaining grounded in our commitment to equitable, integrated, community driven care for the residents of Woolwich, Wellesley, and Wilmot Townships.

Throughout the year, WCHC advanced major capital projects, expanded primary care capacity well beyond targets, strengthened internal systems, and deepened its role as a trusted partner and advocate for rural health within the regional and provincial health systems.

Infrastructure and Facilities

Infrastructure development was a major focus throughout the year and laid the groundwork for future growth across all sites.

Planning for a St. Jacobs expansion advanced considerably. Locating and surveying were completed, and architectural design work progressed through the year, including exploration of a two storey build option to support future program and workforce growth. Minor variance applications and foundation permits were approved by the Township of Woolwich, allowing the foundation work to begin, positioning the project for the next stages of development.

In Wellesley, the clinic continued to provide stable and accessible primary care to the community. Attention turned to sustainability planning, utilities management, and ensuring the site continued to meet the needs of staff and patients alike.

Progress in Linwood reflected both opportunity and challenge. Significant work was undertaken with the Township of Wellesley and the Older Order Mennonite community, resulting in completed Memoranda of Understanding and initial design development for a new clinic space. Donations began flowing, from individuals and corporations, toward the Linwood project, and community commitment to the vision of expanded local care remained strong.

Beyond existing sites, exploratory work began in Wilmot and Breslau, with early discussions focused on securing appropriate spaces and exploring opportunities in partnership with municipalities.

Technology and Information Management

The continued modernization of WCHC's digital infrastructure was an important theme across the year. SharePoint migration progressed successfully, improving security, knowledge management, and collaboration, including the creation of dedicated digital workspaces for teams and the Board.

Cybersecurity emerged as a growing priority across the sector. WCHC conducted a Cyber Security Incident Response tabletop exercise, strengthening systems and addressing identified vulnerabilities. These efforts reinforced WCHC's commitment to protecting client data and ensuring organizational resilience in an increasingly digital healthcare environment.

Financial Stewardship and Organizational Management

Strong financial oversight remained a hallmark of WCHC's operations. Budget planning, quarterly reporting, and compliance requirements were consistently met, with regular review by the Finance Committee and Board. While year to date fluctuations occurred due to the timing of capital expenditures and reserve usage, financial projections remained stable and well managed.

A significant organizational shift occurred with the transition of finance services in house. The hiring of a Director of Finance and Operations and the onboarding of an internal bookkeeping function improved financial clarity, timeliness, and governance capacity, while reducing dependence on external service models.

This fiscal year also marked important progress in establishing the independent WCHC Foundation. Legal review and production of Articles of Incorporation and By Laws for the Foundation were completed to ensure compliance with the Ontario Not for Profit Corporations Act, setting the stage for more structured fundraising and long term philanthropic growth.

Report of the Chief Executive Officer & the Board Chair

People, Culture, and Workplace Wellbeing

Throughout the year, WCHC remained committed to supporting its staff amid increasing system pressures and workforce challenges. Recruitment and retention adjustments were implemented, including sector aligned compensation increases and targeted pay enhancements for Nurse Practitioners. These efforts occurred against the backdrop of persistent primary care workforce shortages and ongoing advocacy for sector wide investment.

Several organizational structure enhancements were introduced to better support staff and operational flow, including the creation of new leadership and coordination roles in clinical management, medical office administration, facilities support, and human resources. These changes reflected WCHC's commitment to evolving as an organization—remaining responsive, efficient, and supportive of both staff and community needs.

Employee wellbeing continued to be a strategic priority. Survey work, Joint Health and Safety Committee initiatives, and the development and implementation of a comprehensive Employee Wellness Strategy aligned directly with WCHC's Strategic Plan pillar of fostering a vibrant culture of excellence. Leadership coaching, media training for senior management, and improvements to internal communication, further strengthened organizational health.

Programs, Services, and Community Impact

The most significant service related achievement of the year was the continued success of the Integrated Primary Care Team (IPCT) expansion. IPCT funding supported expanded interprofessional staffing and strengthened partnerships with community organizations, allowing WCHC to embed comprehensive, team based care models across sites; this expansion work significantly advanced provincial and regional objectives related to primary care attachment and health system integration.

Community based programs and partnerships continued to thrive. Engage Rural matured into a formalized collaborative, bringing together health and social service organizations across four townships to improve rural service pathways and advocate for regionally responsive models of care. Partnerships with the Centre for Family Medicine, community counselling agencies, and public health partners enhanced access to chronic disease management, mental health services, preventative care, and outbreak response.

Individual excellence was also recognized, most notably through national recognition of WCHC's Social Navigator for outstanding leadership in social prescribing, this award highlighted the tangible impact of WCHC's integrated, person-centred care approach.

System Leadership and Advocacy

WCHC continued to assert itself as a highly respected system leader at the local, regional, and provincial levels. The CEO and Board Chair maintained strong, trusted relationships with township mayors, health system executives, Ontario Health West leadership, KW4 Ontario Health Team partners, and the Alliance for Healthier Communities, ensuring rural priorities were consistently represented in decision making forums.

Continued

WCHC's influence extended directly to the highest levels of government. The CEO participated in the Association of Municipalities of Ontario (AMO) conference as part of the Township of Wilmot delegation, engaging directly with the Minister of Health to advance local and rural health priorities. Through the Alliance for Healthier Communities, the CEO engaged with Dr. Jane Philpott to dialogue around Primary Care Action Team investments to meaningfully expand access to primary care.

WCHC's leadership and results were further recognized by Ontario Health West, when Chief Regional Officer Nicole Robinson visited WCHC to hear firsthand about the organization's success with IPCT Round 1 funding. This investment is already delivering expanded primary care access for the residents of Woolwich, Wellesley, and Wilmot, and positioning WCHC as a model for rural system innovation.

Through sustained advocacy, visible leadership, and proven results, WCHC continues to be a trusted partner to the Ministry of Health and Ontario Health—ensuring rural experience, innovation, and outcomes inform provincial policy and system planning.

Strategic Direction and Looking Ahead

With the Strategic Plan now approved and operationalized, 2025–26 marked a transition from planning to action. The organization entered the new fiscal year with a clear roadmap focused on three core pillars: providing equitable integrated care, fostering a vibrant culture of excellence, and supporting sustainable growth.

As WCHC looks ahead, it does so from a position of strength, grounded in community trust, supported by engaged staff and leadership, and guided by a clear strategic vision. The challenges facing primary care and community health remain significant, but WCHC enters the next chapter with confidence, resilience, and a deep commitment to the communities it serves.

Respectfully submitted by,

Benjamin Hesch
Chief Executive Officer

Mike Hribar
Board Chair

Report of the Director, Finance & Operations

The 2025-2026 year has been one of significant advancement in strengthening the operational and financial foundation of Woolwich Community Health Centre. Focused efforts were made to enhance internal capacity, improve financial oversight, and build scalable systems to support the rapid organizational growth and service expansion across the Woolwich, Wellesley, and Wilmot communities.

A key priority was the transition of financial services back in-house. This shift has improved the timeliness, accuracy, and accessibility of financial reporting, while enabling more proactive financial management. Alongside this, the organization successfully completed its annual budget process, strengthened audit readiness, and enhanced internal controls through improved procurement practices, approval workflows, and documentation standards. These changes position WCHC to meet increasing accountability requirements while maintaining flexibility to respond to emerging needs and new growth.

Operationally, significant progress was made in modernizing infrastructure and supporting facility expansion projects across multiple sites, including St. Jacobs and Linwood. Investments in systems such as security access, IT infrastructure, and facilities management processes have improved both staff experience and organizational resilience. The introduction of a new facilities management position as well as centralized operations tracking, updated incident reporting, and equipment management systems has strengthened day-to-day efficiency and risk management at the WCHC.

This year also marked important progress in long-term sustainability initiatives. Work began to establish the WCHC Foundation, including governance, banking, and financial structures, to support future fundraising and community investment. Additionally, strategic work was undertaken to evaluate financial systems, including exploration of cloud-based solutions to enhance real-time reporting and decision-making capabilities.

Collectively, these efforts reflect a continued commitment to operational excellence, financial stewardship, and building the infrastructure required to support high-quality, accessible care for our growing communities.

Finance Highlights

- Transitioned financial services in-house, improving reporting timeliness, accuracy, and internal oversight
- Successfully led the annual budgeting process, including development of more detailed and structured financial planning tools
- Strengthened audit readiness through improved documentation, reconciliations, and standardized financial processes
- Enhanced procurement and financial approval processes to align with Broader Public Sector requirements and best practices
- Improved tracking and management of grants, funding allocations, and year-end financial close processes
- Advanced financial reporting capabilities, including exploration of cloud-based systems and real-time budget monitoring
- Supported financial planning and setup for increased government funding, new initiatives including the WCHC Foundation.

Operations Highlights

- Supported multiple capital and expansion projects, including St. Jacobs renovations and Linwood site development
- Implemented improved facilities management processes, including maintenance planning and centralized tracking systems
- Modernized security and access systems across sites (fobs, cameras, and monitoring improvements)
- Led transition and optimization of service contracts (e.g., cleaning, waste management) to improve efficiency and cost management
- Developed and launched centralized operations request and incident reporting systems to enhance responsiveness and accountability
- Established IT and equipment inventory tracking and lending systems to improve asset management
- Strengthened infrastructure planning, including IT/network modernization and support for digital transformation initiatives
- Improved tenant management processes, including lease adjustments, cost recovery, and communication systems

Matthew Mendes
Director, Finance & Operations

Report of the Finance Committee

The Financial Statements for the year ending March 31, 2026, indicate that Woolwich Community Health Centre continues to operate within its Board-approved budget while maintaining strong alignment with Ontario Health funding agreements and organizational priorities. WCHC has sustained a stable and well-managed financial position, reflecting its ongoing commitment to sound financial stewardship, accountability, and transparency in the management of public funds.

With the extension of the Multi-Sector Service Accountability Agreement (MSAA) through 2027, the organization benefits from continued funding stability, supporting both current service delivery and long-term planning.

Since the Board delegates financial oversight to the Chief Executive Officer and staff, the role of the Treasurer and Finance Committee is to review financial statements, monitor performance, and ensure that financial practices comply with generally accepted accounting principles and public sector accountability requirements.

In our opinion, WCHC continues to demonstrate strong financial management practices, with appropriate internal controls in place and no concerns regarding the handling of funds.

Significant items addressed during the 2025–2026 fiscal year included:

- Successful transition to bringing finance services in-house, strengthening internal capacity, improving timeliness of reporting, and enhancing overall financial oversight
- Continued oversight of financial performance, including detailed review of budget-to-actual results, forecasts, and emerging financial pressures
- Strengthening of financial reporting clarity and transparency to support Board decision-making
- Enhancements to financial policies, procurement practices, and approval frameworks
- Ongoing focus on risk management and internal financial controls
- Receipt and allocation of targeted funding to support organizational priorities, including:
  - $108,500 in Recruitment & Retention funding
  - $211,300 in Stabilization funding
  - $669,000 in continued IPCT (Round 1) funding
  - $913,600 in IPCT (Round 2) funding
  - $321,822 in physician compensation adjustments
- Investments in capital infrastructure and facility improvements, including continued renovations in St. Jacobs and plan expansion in Linwood
- Advancements in IT infrastructure, cybersecurity, and operational modernization to improve efficiency and service delivery
- Targeted investments to address recruitment, retention, and labour market pressures, supporting workforce stability and service capacity

Operating Environment

During the fiscal year, WCHC continued to navigate a challenging financial environment marked by increasing demand for services, rising operating costs, and ongoing compensation pressures. Ontario Health funding supported these pressures, enabling the organization to maintain service delivery while advancing strategic priorities.

The Finance Committee ensured that resources were allocated appropriately to support both immediate operational needs and long-term sustainability.

Audit and Compliance

The annual audit confirmed that appropriate financial controls and processes are in place. WCHC continues to meet all Ontario Health reporting requirements, including SRI and MIS submissions, and adheres to broader public sector accountability standards.

Ongoing efforts have focused on strengthening audit readiness, documentation practices, and financial process consistency across the organization.

The Finance Committee would like to thank its members for their continued commitment and oversight, as well as the staff who support financial operations and reporting. Their contributions are critical to maintaining WCHC's strong financial foundation.

Looking Ahead

The Finance Committee remains focused on ensuring long-term financial sustainability in a constrained funding environment. Priorities for the coming year include enhancing financial systems and reporting tools and supporting the successful implementation of the 2025–2030 Strategic Plan.

Respectfully submitted,

Mike Shipley
Treasurer and Chair of Finance Committee

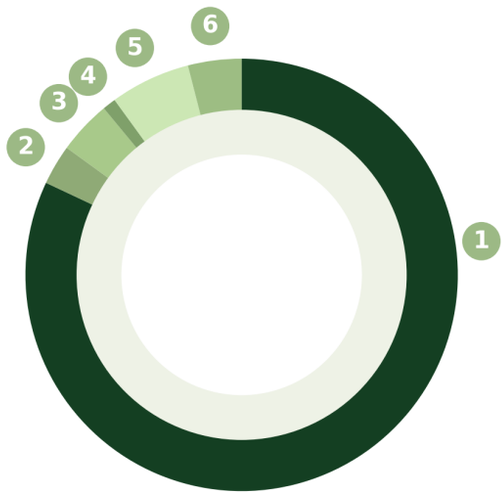
Condensed Statement of Operations & Accumulated Surplus

Year ended March 31, 2026 with comparative figures for 2020 to 2026

Revenues	2025-26	2024-25	2023-24	2022-23	2021-22	2020-21
Ministry of Health & Long Term Care	$7,853,857.00	$6,588,198.00	$8,378,760.00	$8,428,561.00	$8,009,931.00	$8,009,824.00
Grants	$670,470.00	$1,002,238.00	$1,094,577.00	$466,684.00	$329,746.00	$512,846.00
Other revenue and recoveries	$164,022.00	$206,480.00	$323,709.00	$148,847.00	$158,208.00	$127,615.00
Investment income (loss)	$35,609.00	$64,512.00	$112,985.00	$34,543.00	$30,325.00	$31,477.00
Rental and Common Area Fees	$150,088.00	$152,794.00	$136,652.00	$148,691.00	$100,174.00	$92,604.00
Other	$82,947.00	$83,310.00	$152,678.00	$70,123.00	$18,803.00	$10,221.00
Total Revenues	**$8,956,993.00**	**$8,097,532.00**	**$10,199,361.00**	**$9,297,449.00**	**$8,647,187.00**	**$8,784,587.00**

Expenditures	2025-26	2024-25	2023-24	2022-23	2021-22	2020-21
Salary, benefits, relief	$6,585,354.00	$5,831,131.00	$4,866,679.00	$4,458,972.00	$4,519,126.00	$4,511,317.00
Medical and surgical supplies	$65,140.00	$105,334.00	$97,136.00	$85,350.00	$80,398.00	$61,304.00
Supplies and sundries	$922,371.00	$766,136.00	$1,659,943.00	$797,855.00	$702,994.00	$857,692.00
Furniture & Equipment	$64,251.00	$140,713.00	$272,285.00	$10,727.00	$15,245.00	$10,693.00
Contracted out expenses	$120,097.00	$138,437.00	$155,140.00	$135,067.00	$115,847.00	$132,728.00
Buildings and grounds	$656,872.00	$633,348.00	$628,475.00	$799,537.00	$459,224.00	$404,988.00
Other – excluded amortization	$32,128.00	$190,108.00	$2,100,697.00	$2,179,721.00	$2,084,932.00	$2,068,606.00
Amortization	$112,016.00	$122,752.00	$105,598.00	$105,599.00	$108,393.00	$99,144.00
Total Expenditures	**$8,558,229.00**	**$7,927,959.00**	**$9,885,953.00**	**$8,572,828.00**	**$8,086,159.00**	**$8,146,472.00**

	2025-26	2024-25	2023-24	2022-23	2021-22	2020-21
Excess of revenues before undernoted	$398,764.00	$169,573.00	$313,408.00	$724,621.00	$561,028.00	$638,115.00
Surplus repayable	$-	$-	$(355,941.00)	$(755,682.00)	$(494,101.00)	$(627,877.00)
Excess of revenues over expenditures	$398,764.00	$169,573.00	$(42,533.00)	$(31,061.00)	$66,927.00	$10,238.00
Accumulated surplus, beginning of year	$2,404,836.00	$2,235,263.00	$2,277,796.00	$2,308,857.00	$2,241,930.00	$2,231,692.00
Accumulated surplus, end of year	$2,803,600.00	$2,404,836.00	$2,235,263.00	$2,277,796.00	$2,308,857.00	$2,241,930.00

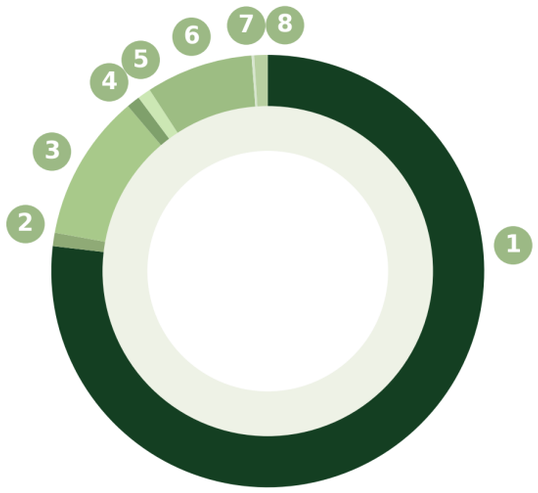


Breakdown of Revenue Categories for 2025-26

1. Ministry of Health/Ontario Health West — 82%
2. Ministry of Health/Regional Diabetes Program — 3%
3. Ontario Seniors Dental Program — 4%
4. Public Health Agency of Canada — 1%
5. Other Sources/Grants — 6%
6. Capital Fund — 4%

Breakdown of Expense Categories for 2025-26

1. Salaries, Benefits, Relief — 77%
2. Medical Supplies — 1%
3. General Supplies/Sundries — 11%
4. Furniture/Equipment — 1%
5. Contracted Out Expenses — 1%
6. Buildings and Grounds — 8%
7. Other — 0%
8. Amortization and Capital Assets — 1%



Report of the Nomination and Leadership Committee

The Nomination and Leadership Committee Membership included Andrew Swatridge, Jean Healey-Martin and Dawna Monk Vanwyck. I'd like to thank all the members of the committee for their hard work this year.

Our efforts focus on two pillars, the strategic recruitment of new directors and the ongoing education of our current board members. By combining these two areas, we ensure the board remains up to date in its skill set and deeply rooted in the organization's mission.

During this period, the committee prioritized the expansion of the board's collective knowledge through educational initiatives for the upcoming fiscal year. These activities are designed to deepen our understanding of the specific needs within our priority populations, ensuring that our governance remains responsive to the unique challenges faced by seniors, youth, farm families, and our local Mennonite communities. This continuous learning ensures that every director is equipped with the cultural and social context necessary for effective decision-making.

Furthermore, the committee remains dedicated to maintaining high standards of board engagement and fiduciary oversight. By consistently monitoring participation, we ensure that every member is contributing meaningfully to our strategic goals. We would like to thank the candidates, staff, and stakeholders who have participated in this process. Your engagement is essential to building a leadership team that is prepared to guide the organization forward with clarity and purpose.

Respectfully submitted by,

Andrew Swatridge
Chair of the Nominating Committee

Testimony (Youth)

"The Wellesley Youth Centre is a great place. Whether I'm showing up to volunteer or to attend a program, it's my favourite part of the week and something I look forward to all the time. I've never had space that's been so accepting and supportive of me, and it's refreshing every time I walk through the door. I'm free to create anything I may not be able to at home, and the staff are all such wonderful and affirming people to be around. The youth centre is like an escape of sorts. The staff are also incredible listeners and have listened to me on multiple occasions with some issues. It means the world to have this place and these people in my life. Thank you to everyone who makes the youth centre accessible and possible!"

Report of the Quality and Risk Committee

The Quality and Risk Committee has primary responsibility for assisting the WCHC Board of Directors in performance of its governance role for overseeing and ensuring the quality of client care and services, including clinical care, client safety, and administrative services provided by WCHC. As well, it is responsible for the non-financial risk of the WCHC. This committee performs their functions under the Excellent Care for All Act, 2010.

Significant activities/accomplishments of the Quality and Risk Committee during the 2025-2026 fiscal year included:

- Increased our panel size to 100%
- The current waitlist has been cleared
- To address space constraints, a new clinic is being built in Linwood and expansion to the St Jacobs clinic is occurring.
- Plans to develop a clinic in New Hamburg to address needs in Wilmot township
- Have hired 2 new primary teams (10+ staff) to handle the increased client load.
- The Risk Heat Map and Register is reviewed and updated at every Quality and Risk Meeting.
- Online appointment booking has reduced wait times
- Introduced a secure AI scribe tool for providers to use in appointments
- Developed a Mobile Device Usage and Reimbursement Policy for staff such that providers are given an agency device to limit the risk of client health information being compromised on their personal devices.
- Increased cyber security and training programs for staff

- Coordinated response to vaccinations for measles, with the program to continue in the coming year
- WCHC's immunization project is one of the 12 projects selected nationally and funded to continue for a third year
- Health Promotion/Education programs well attended
- Our System Navigator continues to provide personalized support to clients, coordinating workshops at Sprucelawn senior apartment in St. Jacobs, and a program (SCALE) focused on supporting, caregiver awareness, learning and empowerment (in partnership with the Ontario Caregiver Organization- OCO)

I would like to thank the active 2025-2026 members of the Quality and Risk Committee: Johanne Hand (Director), Mike Hribar (Board Chair), Gareth Jones (Community Representative), Greg Stanley-Horn (Director), Dawna Monk Vanwyck (Director), Health Centre Staff: Mel Wallace (Executive Assistant), Benjamin Hesch (Chief Executive Officer) for their contributions to this committee.

Respectively Submitted by,

Jean Healey-Martin
Chair of Quality and Risk Committee

Report of the Director, Primary Care

Over the past year, the Primary Care Team has undergone a period of significant growth, innovation, and transformation, all grounded in a continued commitment to delivering patient-centered, accessible, and high-quality care. As demand for primary care services continues to rise, the team has responded with thoughtful expansion, new models of care, and the integration of digital tools to better meet the needs of the community.

A major milestone this year was achieved through expansion funding, which enabled the successful attachment of over 2,675 new patients to primary care services. This effort reflects a deliberate focus on improving access for unattached and underserved individuals, ensuring that more members of the community are connected to ongoing, comprehensive care. Supporting this increase in patient volume required parallel investment in people. The team expanded to include additional clinicians and support staff, strengthening interdisciplinary collaboration and enhancing overall capacity to deliver timely and coordinated care.

Innovation has also been a defining theme of the year. The introduction of an online booking system has modernized how patients access care, making it easier and more convenient to schedule appointments while reducing administrative burden on staff. Building on this digital transformation, the team also piloted the use of AI-powered medical scribes. Although early experiences demonstrated limited meaningful improvements in provider workflow, we are optimistic that finding the right tool will allow clinicians to spend more time focused on direct patient care while maintaining accurate and efficient documentation.

At the same time, the team has strengthened its capacity to provide care for patients through appointing a patient care coordinator. Enhancements in this area have improved coordination with patients and families, supported care in preferred settings, and reinforced the team's ability to deliver holistic care across the full continuum of life.

Recognizing that access is not only about appointments but also about communication and understanding, the team made significant strides in improving how patients are onboarded and engaged. A more streamlined onboarding process was introduced for newly attached patients, making it easier to register, access services, and connect with care providers. Alongside this, new tools for secure messaging and information sharing have improved the timeliness and clarity of communication between patients and the care team. Patients are now better supported with access to test results, care plans, and follow-up instructions in a secure and accessible manner.

To further enhance patient understanding and engagement, the team expanded the use of digital educational resources, including short videos covering common conditions, preventive care, and how to navigate available services. These tools have helped standardize information sharing while empowering patients to take a more active role in managing their health.

Despite this rapid growth and transformation, the Primary Care Team has maintained a strong focus on quality. Efforts to strengthen continuity of care, enhance chronic disease management, and improve preventive care have remained central to the team's work. Patient feedback continues to reflect improvements in access, reduced wait times, and overall positive care experiences.

As with any period of growth, challenges remain. Demand for services continues to exceed available capacity, and providers face ongoing workload pressures. At the same time, the increasing reliance on digital tools highlights the need for continued integration and optimization. These challenges, however, also present opportunities for further innovation, collaboration, and system-level improvement.

Looking ahead, the team will continue to build on this strong foundation by optimizing digital solutions, expanding team-based care models, and strengthening both access and community-based services. Recruitment and retention will remain a priority, ensuring the team is well-positioned to meet the evolving needs of the population.

Overall, this year marks a period of meaningful progress. The successful attachment of 2,675 patients, expansion of specialized services, and modernization of patient onboarding and communication processes demonstrate a responsive and forward-thinking primary care model. The Primary Care Team remains committed to improving access, advancing quality, and delivering better health outcomes for the community it serves.

Respectfully submitted by,

Guillermo Rodriguez
Director, Primary Care

Report of the Director, Community Services

Health Promotion, Education and Information

WCHC's health promotion programs aim to improve the health of community members. We offer a variety of workshops: health education, fitness classes, adult games night, art classes, a walk and talk group, breastfeeding for moms, women's health days, farm safety days and much more. Community members from Woolwich, Wellesley and Wilmot Townships, Kitchener and Waterloo attend our educational sessions.

Key Statistics	
Number of workshops and Groups run in 2025/2026	# of Participants
536	**7,969**

Youth Mental Health Project

With financial support from a local donor, we implemented a pilot youth mental health project. The fund allows WCHC to collaborate with our partners Woolwich Community Services, Woolwich Counselling Centre and Inter-faith Counselling Centre and expand our wrap around services for children/youth at the Elmira and Wellesley Youth Centres

Key outcomes of the project:

- run 127 children/youth groups on a variety of activities, including homework club, inter-generational and mental wellness program
- 1,218 children and youth attended a variety of mental health and physical health focus activities

Women's Health Day

Our Women's Health Day event focuses on Old Order Mennonite and Amish women. We host two events a year with a variety of sessions: women's physical and mental health, nutrition, Palliative care, CPR, car safety and more. The WR Community Foundation provided financial support for this event. in 2025, we had over 92 women attended the event.

Gesundheit fur Kinder (GFK)
Prenatal & Postnatal for Low German Speaking Mennonites

Celebrating over 30 years of funding from the Public Health Agency of Canada (PHAC), GFK continues to make an impact on the Low German Speaking Mennonites. This fiscal year alone, 77 mothers and over 100 children participated in 20 educational sessions, with weekly attendance averaging 29 participants.

Immunization Partnership Fund

With funding from Public Health Agency of Canada (PHAC), we implemented a 2-year project to promote routine immunization within the Mennonite and rural communities. Our immunization project is one of the 12 projects select-ed nationally and funded to continue for a third year.

- We vaccinated 690 people, achieving 153% of our target of 450

Community Diabetes Program

WCHC's Diabetes Education Program supports people in the rural townships to prevent and/or help self-manage their diabetes through education, information and treatment.

- 893 people with pre-diabetes and type 2 diabetes served
- 576 people participated in group education classes focused on pre-diabetes and type 2 diabetes

Systems Navigation

At WCHC, we aim to assist people in learning more about the community and social supports available to them. Through our system navigation program, we provide information and connection to the resources and supports in the community that help improve health and wellbeing. This may include social programs, transportation support, assistance completing forms, and much more. This service is available to both WCHC clients, and members of the community.

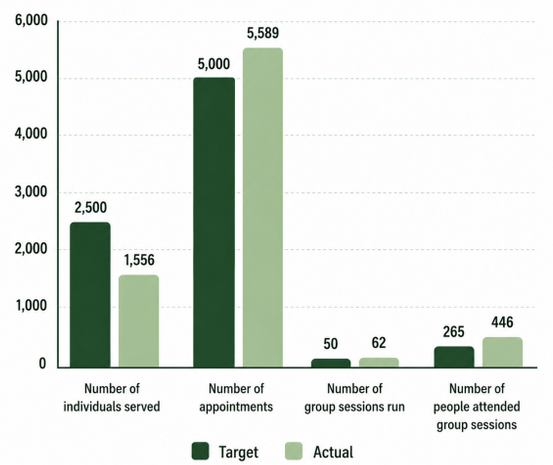
- 353 people were supported in accessing community resources; connected clients to over 20 community programs and organizations.

Counselling, Physiotherapy, Chiropody, and Dietitians Services

While our counsellors address mental health, and physiotherapists and chiropodists focus on physical health, the die-titians help clients to improve overall wellness through nutrition and healthy eating.

Key Statistics:

- 1,556 individuals served with a total of 5,589 appointments
- A total of 62 group sessions on variety of mental health, physical health and nutrition topics with 446 participated.



Partnership and Community Engagement

We are consistently building and maintaining strong relationships with:

- Sprucelawn Seniors Apartment in St. Jacobs to offer health education on a variety of topics.
- Woolwich Township and Community Care Concepts and hosted the 2025 Seniors Health Fair attended by more than 100 seniors and 25 organizations
- Woolwich Counselling Centre, Interfaith Counselling and Woolwich Community Services to run youth mental health program at the youth centres in Wellesley and Elmira
- Township of Wellesley on a variety of projects, including dedicated space for a Youth Centre, and summer club for children
- The Community team participated in more than 20 community partnership committees.

Respectfully submitted by,

Gebre Berihun
Director, Community Services

WCHC
COMMUNITY
HEALTH CENTRE

2025-2026 Annual Report

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