



Kingston Community Health Centres
Centres de santé communautaire de Kingston

2026 ANNUAL REPORT

Care Happens Through People



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Introduction

The huge impact of Kingston Community Health Centres (KCHC) is possible because of staff, partners, volunteers, and community members who continue to show up, often in more than one role, but always with care. These quiet heroes do everything within their power to create change: offering their time, energy, and resilience to support others. They choose to be here because they believe in the mission, vision and values of our organization. Our clients choose us as well, even knowing they often have other ways to access services, because what we create here goes beyond health care. We create a space where people feel supported and understood, a place where they can say, “I know where I need to go.” Through strong and meaningful relationships, expanding programs, and responsive services, every day we build and foster a deep sense of safety, security, and trust. Together, we are building a stronger community and a better tomorrow simply by being there, again and again.



Board Chair Report

On behalf of the Board of Directors of Kingston Community Health Centres (KCHC) it is my honour to pass along our sincere thanks and gratitude to all the staff and volunteers of KCHC through this annual report. The effort, commitment, and care KCHC provides to its clients and patients is what makes this organization an integral part of the community and contributes to achieving our vision of a caring community that is healthy, connected, resilient, and inclusive of all people. KCHC is a leader in providing care and services to equity-deserving groups and people traditionally underserved in the community. This could not happen without the dedication of our staff and volunteers, and I'd like to take this opportunity to offer the Board's sincere appreciation to them for helping make KCHC the great place that it is.



The Board of Directors is committed to strong governance, accountability, financial stewardship, and transparency. The commitment the Board made when we moved to a closed membership was to meaningfully engage with KCHC. We want to hear community and client feedback, as well as to be visible and accessible to those we serve to ensure we are delivering the services in a way that the community needs. As part of that promise, board members will be intentional in joining various community activities offered by KCHC. Our hope is that attending these events will allow us to integrate and connect with the communities we serve, and to receive feedback through regular interactions that will inform and inspire us throughout the year.

I would like to once again thank everyone for their ongoing efforts to support our community.

A handwritten signature in black ink that reads "Marc Goudie". The signature is written in a cursive, flowing style.

Marc Goudie

Board Chair, Kingston Community Health Centres

CEO Report

This year marked an important milestone for Kingston Community Health Centres as we finalized our 2026–2028 Strategic Plan. The work was shaped through meaningful input from staff, clients, community members, partners, leadership, and our Board of Directors. I want to thank everyone who took the time to share their perspectives — the plan is stronger because of it.



What came through clearly in that process was both the growing complexity of need in our community and the important role KCHC continues to play. We're seeing increased demand across services, alongside rising pressures to housing affordability, mental health, and substance use — all while navigating constrained resources and an evolving policy environment.

Our new strategic plan is grounded in that reality. It focuses on three priorities: improving access and quality of services; advancing equity and inclusion; and strengthening the organization so we can continue to meet changing needs over time. These are not new ideas for KCHC, but they are areas where we know focused effort will drive meaningful change.

This year also underscored how quickly the landscape can shift. Recent policy decisions — particularly in harm reduction and newcomer supports — will have real impacts for people in our community and for the organizations that support them. What remains constant for KCHC is our responsibility to champion approaches grounded in evidence, informed by lived experience, and focused on improving health outcomes for the people who rely on them. We will also continue to work with partners across the system to ensure people can access the services and supports they need — whether that is primary care, mental health support, addiction treatment, or broader social services.

At the same time, I am optimistic about the future. Delivering on our work requires strong foundations. Over the coming years, we will continue to invest in our workforce, strengthen our internal systems, and ensure we are using our resources in ways that are sustainable and accountable. This is essential to maintaining both the quality of care we provide today and our ability to respond to future needs.

I want to thank our staff, physicians, volunteers, Board members, and community partners for your ongoing compassion, professionalism and commitment to our work — it matters most deeply.

Ben Gooch
CEO, Kingston Community Health Centres

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Program Highlights

Supporting vulnerable youth

When Nurse Practitioner Maggie McNabb joined KCHC in 2023, she brought with her years of experience in emergency and trauma nursing and a passion for supporting vulnerable youth through sexual assault response, child protection and care for survivors of human trafficking.

Today, she most often divides her time between the One Roof Youth Wellness Hub on Princess Street and our Midtown Kingston Health Home, working with young people aged 12 to 26, many of whom are navigating extraordinary challenges.



Having access to a centralized social service hub is vital for youth, offering medical, mental health, social, and housing support all in one place.”

Maggie McNabb
Nurse Practitioner, Midtown Kingston Health Home

At One Roof, no two days for Maggie look the same. Maggie’s schedule is often packed with appointments, but she still finds time for outreach — visiting encampments with the addictions or housing teams, seeing youth at RISE supportive housing, or even driving out to Cloyne to provide care at the local K-12 school.

“There are so many barriers for youth,” Maggie explains. “Stigma and not having ID, like a health card, make it hard to get medication, referrals or testing. Many don’t have a reliable phone (or any phone) so they miss appointments. And when services discharge clients after just a few missed visits, it can feel really discouraging for them.”

Maggie says having access to a centralized social service hub is vital for youth, offering medical, mental health, social, and housing support all in one place. Because centralized services like these typically only exist in larger urban centres such as Ottawa, Montreal or Toronto, youth from across the region often come to Kingston, or are even dropped off here, when they have nowhere else to go.

The transition from pediatric to adult care can also be a difficult time, with limited support for young people in this in-between stage. To help bridge the gap, teams at One Roof have begun

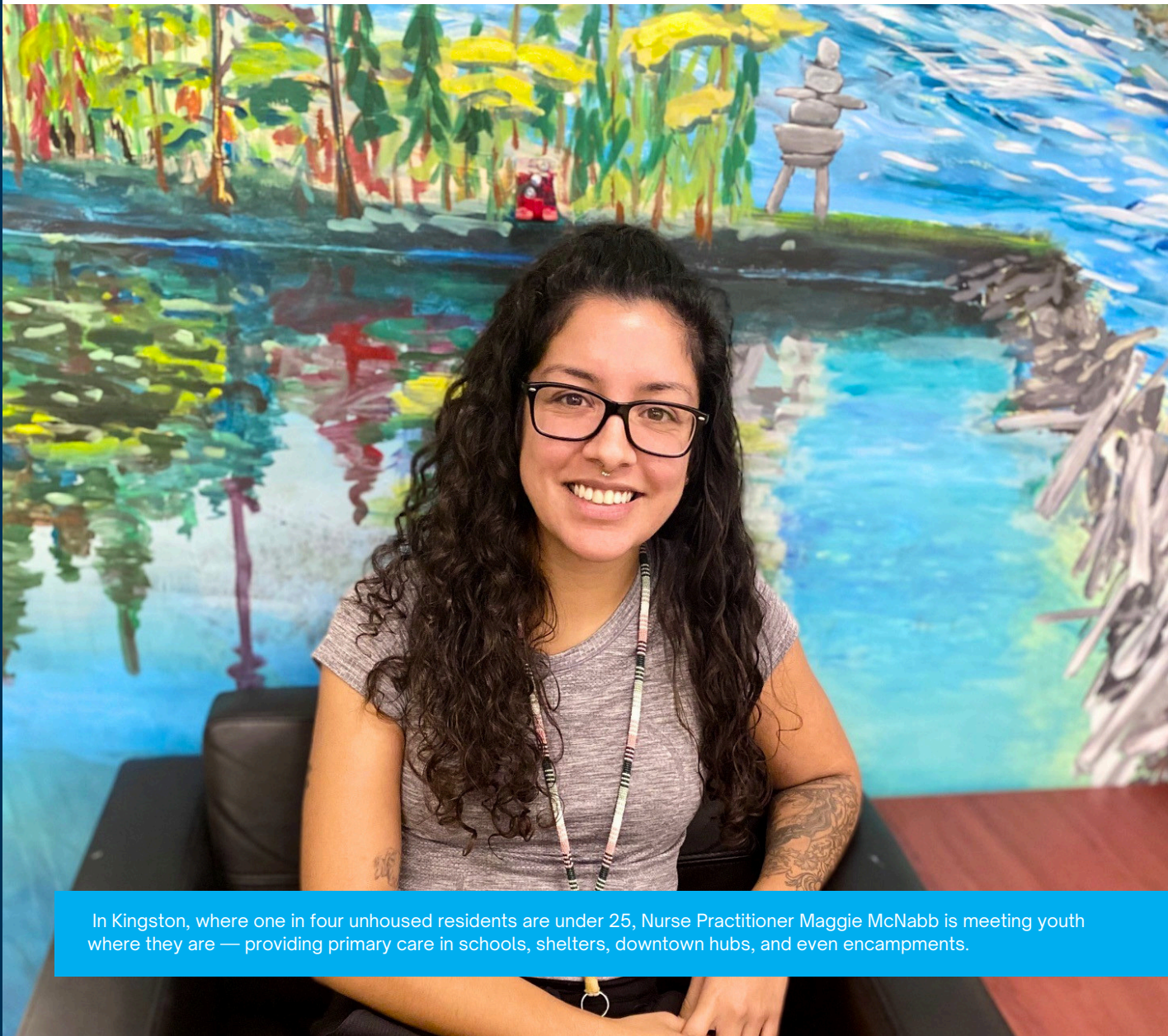
early transition planning to ensure youth are ready and supported as they move into adult services.

“We see youth who are dropped off from places like Cobourg or smaller towns because there aren’t many options for them elsewhere,” Maggie says. “They’re falling through the cracks, and we know it’s an important time to get them stable.”

Maggie shares one story that stands out about a young man who faced significant trauma and instability throughout his life. Apprehended by CAS as a child, he grew up in foster care and group homes and became a crown ward. As a teen, he turned to substances like alcohol and crystal meth, experienced incarceration, homelessness, and had his own child apprehended.

Through One Roof, he connected with the Crime Prevention program, accessed primary care and counselling, and enrolled in Youth Catalyst, where he maintained sobriety throughout the 16-week program. He earned his driver’s license, achieved ongoing recovery, and moved to Alberta to work full-time at a lumber yard.

“He’s now back in Kingston and still doing really well,” Maggie says proudly. “I find this population is incredibly open to change, and even small interventions can have a big impact on their life trajectory. Youth are resourceful, resilient, and have a great sense of humour, which makes my job so rewarding. They inspire me every day.”



In Kingston, where one in four unhoused residents are under 25, Nurse Practitioner Maggie McNabb is meeting youth where they are — providing primary care in schools, shelters, downtown hubs, and even encampments.

Saving lives with drug checking

“Drugs exist in every community. The reality is people are going to use them, and we need to keep people safe when they do,” says Justine McIsaac, Coordinator of KCHC’s Consumption and Treatment Services (CTS).

Kingston, like many communities across Canada, is in the grip of a drug poisoning crisis. To prevent overdoses and save lives, CTS (housed in the Integrated Care Hub) has introduced the area’s first-ever drug-checking program.

Using state-of-the-art spectrometry technology, developed right here in Kingston, CTS staff can now quickly test a range of substances for hidden dangers, helping people make safer choices when it comes to the substances they’re using.

“ *Drugs exist in every community.*

The reality is people are going to use them, and we need to keep people safe when they do.”

Justine McIsaac
Coordinator, Consumption and Treatment Services

“Here at CTS, people can come in and test their drugs on the spot, find out what’s really in them, and make safer decisions,” Justine explains. “Sometimes that means discarding them, using less, or warning their peers. It’s also a great opportunity to build rapport and relationships with people.”

The drug-checking program grew out of a partnership between Justine and Queen’s University. With Justine’s support, the university team secured a Health Canada grant to pilot their equipment locally, with backing from the municipality. The funding covered a \$30,000 spectrometer (called a Spectra) that can detect tiny traces of substances, even residue on paraphernalia, to determine exactly what’s in them.

Since the program was launched, people from across the community have come in to have their substances tested. In one case, a university student thought they were purchasing ecstasy, only to discover through testing that the pill was actually pressed fentanyl. Because they checked the pill before ingesting it, they were able to discard it, avoiding a possible overdose.

“Having the Spectra here is a game-changer, but it only gives part of the picture,” says Justine. “For more detailed results, we send samples to the Ontario Drug Checking Program in Toronto. They can analyze substances with even greater precision, identify trends in the local drug supply, and help us issue alerts when dangerous drugs are circulating. This partnership means we can protect both individuals and the community more effectively.”

Matthieu Prehu-Quillard, an Overdose Prevention Support Worker, says clients at CTS have found the program especially helpful for avoiding unexpected and dangerous additives, such as heavy tranquilizers including xylazine. For staff onsite, the program is also a game-changer, as it allows them to understand what substances clients have been exposed to and respond appropriately to keep people safe.

“Many clients do not want tranquilizers or benzodiazepines mixed into their drugs, as these substances can suppress breathing and increase the risk of overdose – even for those already using opioids,” Matthieu explains. “By testing their substances onsite, clients can make informed choices and avoid these dangerous combinations.”

The Spectra machine is now making its way into communities across Canada. Justine is also consulting with programs in the U.S. to help bring the technology south of the border.

With this advanced, locally developed tool, Kingston is fortunate to have a program that not only keeps clients safe but also strengthens the community’s ability to respond to an ever-changing landscape.



Using spectrometry technology, staff at Consumption and Treatment Services site (inside the Integrated Care Hub) can now analyze a variety of substances for hidden risks, giving people the information they need to make safer choices.

Strengthening families and communities

Last fall, KCHC embarked on a new initiative called HIPPY (Home Instruction for Parents of Preschool Youngsters), and the SMART program (Supporting Mothers and Raising Toddlers), two internationally recognized home visiting programs designed to improve school readiness for children aged 18 months to five while strengthening families and communities.

HIPPY & SMART programs are unique in their approach. They meet families in their homes, where trained Home Visitors deliver activity packs, early learning tools, and peer support. The program equips parents to be their child's first and most important teacher, while also providing workforce development opportunities for Home Visitors, many of whom have lived experience with the challenges the families they support encounter.

“We know that one of the biggest challenges in school readiness is self-regulation,” said Helen Mabberty, KCHC’s Manager of Family & Community Health. “This program provides families with the activity kits needed to build on their development in the area of school readiness, including self-regulation.”

The HIPPY and SMART programs at KCHC are tailored for low-income families and will also serve Indigenous and newcomer families through partner agencies, including the Kingston Native Centre, Language Nest, and KEYS, reaching approximately 150 local children over the next two years.

Though new to Kingston, HIPPY is part of the national Mothers Matter Centre network and has been successful in communities across Canada. Its model is especially effective for families facing language, cultural, or systemic barriers to accessing traditional early childhood programs.



We’re not just strengthening families; we’re strengthening relationships between communities.”

Yu Jier Kou

Program Coordinator, Kingston Immigration Partnership



The two-year pilot is funded through a \$600,000 grant from the Community Foundation for Kingston & Area's Sisters of Providence Care of St. Vincent de Paul Community Impact Fund.

"When families can't reach out to services, the services need to reach in," said Yu Jier Kou, Program Coordinator for the Kingston Immigration Partnership, who helped lead the funding and development of HIPPY. "Home visiting builds trust and connection in a way that's personal and supportive. We're not just strengthening families; we're strengthening relationships between communities."



Staff from KCHC, KEYS Job Centre, Kingston Native Centre and Language Nest, Kingston Immigration Partnership, and the Community Foundation of Kingston & Area are pictured during the funding announcement last fall.

Responding to syphilis surge

Syphilis was once considered a disease of the past, but in 2022, Kingston experienced an outbreak and since then, rates have surged, particularly among women who use substances or lack stable housing.

At Street Health, Nurse Practitioner Natasha Larkin saw the surge firsthand. As a recent graduate, she had received limited training on syphilis, but the rising number of cases meant she had to quickly get up to speed on testing and treatment protocols. What followed was deeper involvement in public health efforts and eventually, a leadership role in a groundbreaking new study.

“I had to quickly educate myself,” Natasha recalls. “It just wasn’t on the radar during my NP training. But suddenly, it was everywhere.”

Natasha joined a collaborative group of Kingston-area healthcare professionals as part of a regional steering committee focused on syphilis prevention, with particular attention to the rise in congenital syphilis. Through this group, she built strong connections with public health officials and epidemiologists exploring new ways to reach high-risk populations.

With funding from Public Health Ontario, KFL&A Public Health launched a locally driven project that combined a newly approved point-of-care syphilis test with nursing outreach and medical directives. The goal: test and treat people where they are.

Traditionally, syphilis testing involves collecting a serum sample and sending it to a central lab, often resulting in delays of several days to two weeks. For people with unstable housing or limited communication access, those delays frequently mean missed results and missed treatment.

The new and first point-of-care test (POCT) for syphilis approved in Canada has changed that. It uses a simple finger-prick to collect blood and delivers results for both HIV and syphilis in under a minute. Providers can now diagnose and treat in one visit.

“This experience has allowed me to engage with patients at risk for syphilis in a more impactful and accessible way,” said Natasha. “Offering POCT has been empowering, especially for people who are transient, without phones, fearful of needles, or hard to reach again. It allows us to move care out of clinics and into the community, where conversations, education, and reconnection can happen naturally.”

Syphilis disproportionately affects people living in poverty. In Kingston, rising poverty rates, coupled with increased use of substances like crystal meth and fentanyl, are driving this public health crisis.

Many individuals avoid seeking healthcare due to past experiences of stigma, leading to deep mistrust and the prioritization of day-to-day survival over long-term care. Although syphilis is on the rise nationwide, the Kingston region has experienced an especially steep climb due to this complex intersection of social and structural factors.



This experience has allowed me to engage with patients at risk for syphilis in a more impactful and accessible way.”

Natasha Larkin
Nurse Practitioner, Street Health Centre

Removing the barrier of needing a follow-up appointment for test results makes care more immediate and manageable. It reduces anxiety, builds trust, and shows clients that healthcare systems are willing to try new approaches that actually work for them.

“The people most affected by syphilis are also the people most excluded from traditional healthcare,” says Natasha. “We have to meet them where they are. We need to listen to both patients and providers. That’s how we’ll make public health truly responsive and equitable.”

Natasha’s work with the regional steering committee has contributed to the Syphilis Point-of-Care Rapid Test and Immediate Treatment Evaluation (SPRITE) Study, a Canadian Institutes of Health Research-funded initiative designed to evaluate the real-world impact of rapid testing and immediate treatment on syphilis outcomes.

The study examines how point-of-care testing can reduce the time to treatment, improve access for equity-deserving populations, and decrease transmission rates. Natasha, as a key clinical lead on the study, has been instrumental in both the design and implementation phases, ensuring that the research stays grounded in the lived realities of the people most affected.

Looking ahead, Natasha hopes the SPRITE Study will support innovative approaches to delivering care to equity-deserving populations. The study’s findings will provide critical evidence on how point-of-care testing, in combination with immediate treatment, reduces barriers, strengthens care systems, and makes the case for sustained investment across Ontario.



Delivering exercise and connection to rural seniors

In May 2025, the RFL&A Allied Health Team received \$240,000 through the Older Adults Connecting and Belonging Grant from the Community Foundation for Kingston an Area to deliver exercise and social programming for older adults living in rural areas across Frontenac, Lennox & Addington.

“ *Our program is about more than exercise, it’s about prevention, connection, and aging well,*”

Katherine Taylor
Physical Activity and Chronic Disease Prevention
Lead, RFL&A Allied Health

Since then, the team has hired an Active Living Facilitator and launched a 13-week program in seven rural communities: Sharbot Lake, Verona, Sydenham, Newburgh, Tamworth, Napanee and Deseronto.

Now off to a strong start, the Otago Exercise Program includes one hour of physical activity tailored to frail older adults, followed by one hour of social connection. These social sessions feature engaging health promotion activities led by community providers, such as nutrition jeopardy, respiratory health bingo, art therapy, and mindfulness, as well as time to connect over games, puzzles, coffee, or tea.

From September to December 2025, 90 participants joined the program



across seven rural sites. Outcomes show clinically meaningful improvements in balance, mobility, strength, and perceived loneliness, with retention rates as high as 85 per cent — demonstrating strong engagement and meaningful gains in quality of life and functional independence.

From January to April, nine new groups were underway, welcoming 100 additional participants, with all groups set to relaunch again. To support ongoing engagement, a graduate group has also been introduced, allowing program alumni to continue meeting regularly for exercise and social connection.

The program will continue in rural communities until 2028, with plans to reach over 1,000 individuals across ten communities. Future expansion includes introducing additional group exercise options, such as Strong Bones, and strengthening partnerships with social service organizations and family medicine providers to better reach the most marginalized and isolated individuals.



Active Living Facilitator Carly Corrigan and Kinesiologist Katherine Taylor are leading this programming expansion in rural KFL&A.

Connecting to French-language primary care

Midtown Kingston Health Home is taking major steps to ensure that French-speaking residents in our community can access primary care in their first language.

As part of its journey toward French Language Service (FLS) designation, Midtown is leading the way in connecting unattached francophone residents with French-speaking primary care providers. This creates more opportunities for patients to discuss their health concerns in the language they are most comfortable with, enhancing trust, safety and overall care.

“When you’re sick, you’re not thinking in two languages,” explains Allan Katz, a Special Advisor with the French Language Health Services Network of Eastern Ontario who has been working with Midtown on its FLS designation. “Having French-speaking health care providers helps build trust, improves patient safety, and leads to better health outcomes. There’s still more work to do, but this first step at Midtown, along with recruitment efforts in Kingston, is very encouraging.”

Midtown has now established a centralized pathway to connect French-speaking residents of Kingston with a doctor or nurse practitioner. This work has been done in collaboration with Immigrant Services Kingston and Area (ISKA) and community partners such as ACFOMI and KEYS Job Centre. To date, everyone on Health Care Connect who was waiting for primary care in French has been successfully matched.

“Meeting these patients and addressing their concerns in French has been very fulfilling,” says Patricia Hoyeck, one of the physicians leading this work at Midtown. “Many appreciate being able to express themselves in their first language. It’s rewarding to connect culturally and fully understand their concerns.”

While not all team members are fully bilingual, Midtown is committed to being a welcoming home for Kingston’s francophone community. Phone interpretation and digital tools are always available to support communication when needed.



Continuing Loving Spoonful's legacy

After 16 years serving the Kingston community, Loving Spoonful announced in the fall of 2024 that it would be closing. Several of its programs, including Community Kitchens and the Kingston Community Gardens Network, have been taken on by KCHC's Community Development team, ensuring its legacy of connecting people to healthy food and fostering strong social connections continues.

Food insecurity remains a pressing issue in Kingston, with one in three households experiencing it — the highest numbers seen in 20 years. By adopting these programs, KCHC continues to support this critical need while helping residents access fresh food and build skills.

“We’re really excited to have the garden and cooking programs joining KCHC,” says Helen Mabberty, Manager of Family and Community Health. “Food insecurity is a huge issue in our community, and these programs bring people together while helping them learn new skills like cooking and gardening.”

“Participants are encouraged to share their favourite family recipes, celebrating culture, tradition, and community.”

Tibratā Gillies
Community Development Worker, Weller



KCHC now manages two key garden sites: the Calvin Park Library Education Garden and the Dutch Heritage Village Garden and Food Forest. These spaces supply fresh produce for KCHC cooking programs, the food pantry, and local charities such as Lunch by George, while also serving as welcoming community hubs.

KCHC also coordinates the Kingston Community Gardens Network, supporting 38 gardens, food forests, and orchards across the city where residents can grow their own food and connect with neighbours.

Cooking Connections and Open Kitchen continue to offer opportunities for adults to build food skills while strengthening social connections. Cooking Connections is an eight-week workshop for adults living with mental health or substance-use challenges, while Open Kitchen is a weekly drop-in at the Rideau Heights Community Centre where participants cook and share recipes together.

“Participants are encouraged to share their favourite family recipes, celebrating culture, tradition, and community,” says Community Development Worker Tibratā Gillies. “For many, the program feels like family.”

From planting seeds to sharing meals, these programs continue the spirit of Loving Spoonful while helping grow a stronger community.



KCHC now manages two garden sites, including the Calvin Park Library Education Garden and the Dutch Heritage Village Garden and Food Forest, supplying fresh produce for local programs. We also support the Kingston Community Gardens Network, coordinating 38 gardens, food forests, and orchards across the city where residents can grow food and connect with neighbours.

Transforming healthcare delivery

KCHC is leading a shift in how health care is delivered, moving toward a trauma-informed, community-based model that is now gaining attention beyond the region.

Through its social enterprise, Teach Resilience, KCHC is sharing its trauma-informed primary care training with other community health centres, schools, and social service agencies looking to strengthen how they support patients and communities alike.

Trauma-informed care recognizes the lasting impact of trauma on physical and mental health and emphasizes safety, trust, and understanding in every interaction. At KCHC, this approach has been embedded into primary care for years, shaping how providers engage with patients and respond to complex health needs.

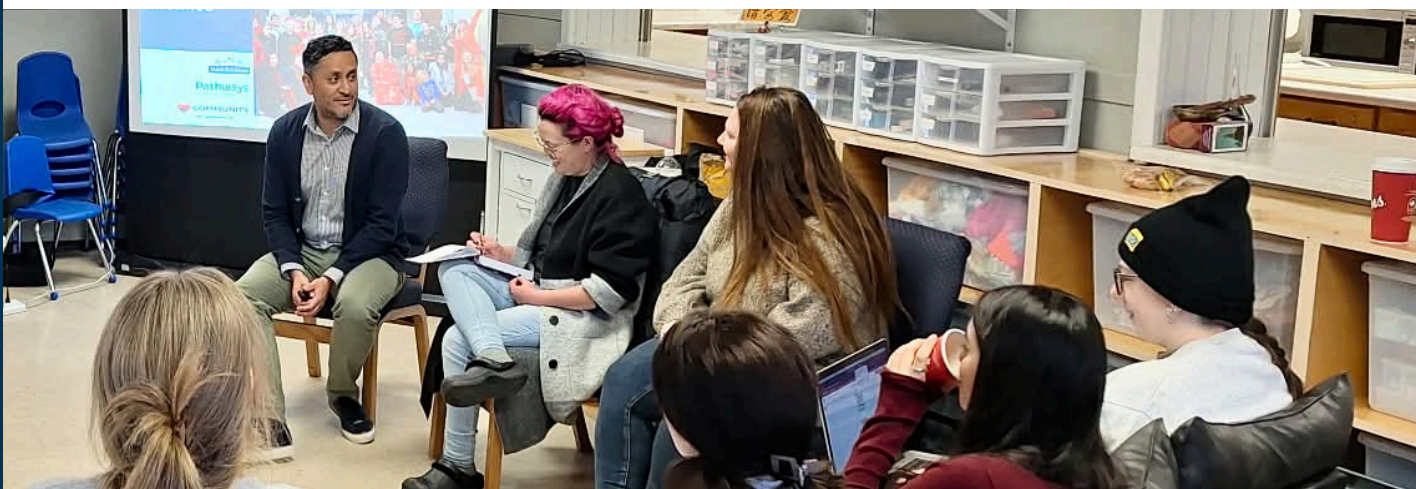
“Trauma-informed care isn’t just for certain patients — it should be a universal precaution,” says Dr. Mary Rowland, a key medical advisor and facilitator at Teach Resilience. “Understanding a person’s upbringing and life experiences is essential.”

In January, Teach Resilience delivered Trauma-Responsive Training at WellFort Community Health Services. These impactful sessions were offered to WellFort staff, as well as primary care partners from WellFort’s Primary Care Neighbourhood Network in Peel Region and North Etobicoke, along with additional practices across the Central West Ontario Health Team primary care network.

Building on this momentum, additional trainings have been scheduled with the University of Toronto and Gateway Community Health Centre, with further discussions underway to bring training to the Barrie Ontario Health Team in the fall.

The one-day, in-person training is offered as a Queen’s University–accredited course and has already been attended by over 2,000 health care providers in the KFL&A region. Teach Resilience has also co-hosted two training sessions with the Frontenac Lennox & Addington Ontario Health Team, reaching many local doctors and clinicians.

"Our goal is to make trauma-informed approaches a standard practice across Ontario, and partnering with organizations like WellFort is a critical step in that journey," explains Roger Romero, Trauma-Informed Team Lead at Teach Resilience. "By equipping more providers with these tools, we can help communities deliver care that is more responsive, equitable, and truly centred on the needs of the people they serve."



Expanding access to primary care

KCHC has officially opened its new Access+ Clinic at 797 Princess Street, marking an important step in expanding care for people without a family doctor or nurse practitioner.

Open Mondays, Tuesdays, Wednesdays and Fridays, Access+ brings together several key services in one place, including KCHC's Well Baby Care Clinic, Newcomer Bridging Clinic, and Sexual Health Services (including STI quick tests). The clinic also offers prenatal and preventive care, including cancer screenings, for people who do not currently have a primary care provider.

The need for these services continues to grow. In 2025 alone, KCHC's Well Baby Clinic cared for 202 unattached infants between the ages of 0 and 18 months, while more than 260 unattached pregnant clients accessed prenatal care. Of those expecting parents, 11 per cent required medical interpretation during their appointments, highlighting the importance of culturally and linguistically accessible care. permanent provider, the transition is smoother and safer.

“ Access+ reflects KCHC's commitment to equitable, connected, and accessible care.”

Meghan O'Leary
Director of Clinical Services

“If there's one thing I want people to know about Access+, it's that this clinic was built with the sole purpose of removing barriers and ensuring that no one is left behind in their journey to receive timely, compassionate care,” says the Clinic's Manager Sienna Thomas. “Access+ is more than a clinic. It is a continuation of KCHC's values, providing services that are accessible and available to those who need them most.”

Ontario is undergoing a transformation of its primary care system to improve access for millions of residents, including more than

Access+ Clinic
A part of Kingston Community Health Centres



30,000 people in Frontenac, Lennox and Addington who are still waiting for attachment. The FLA OHT has made progress with several new health homes, but some populations like newcomers, refugees and families with young children, continue to face added barriers. Cuts to local sexual health clinic hours have also created another area of need, which Access+ is helping to meet.

“Access+ reflects KCHC’s commitment to equitable, connected, and accessible care,” says Meghan O’Leary, KCHC’s Director of Clinical Services. “It’s a place where people will be able to access our various population-health services and preventive care in a timely way, meeting their immediate needs, while we continue to support their transition to ongoing primary care.”

Another important element to Access+ is its ability to provide primary care in more than 20 languages through its use of onsite medical interpretation. This ensures that clients can communicate confidently about their health in the language of their choosing. This is particularly helpful for people who are new to Canada, who are unsure of how Ontario’s healthcare system works and who may have had limited access to medical attention in the past.

“Newcomers and refugees often arrive with complex health needs, and not all primary care providers are familiar with this population’s experiences,” explains Ed Cho, Nurse Practitioner at Access+. “The Bridging Clinic gives us the time to stabilize medical concerns, complete screenings, and help patients learn to navigate the system, so that when they move on to a permanent provider, the transition is smoother and safer.”



KCHC’s new Access+ Clinic at 797 Princess Street offers care for people without a primary care provider, including Well Baby Care, Newcomer Bridging Clinic, Sexual Health Services (including STI quick tests), prenatal care, and preventive services such as cancer screenings.

Evolving from client to colleague

Sheena Lyons' path to becoming a community outreach worker at the Napanee Area Community Health Centre is deeply personal and rooted in struggles she now sees reflected in the people she supports every day.

Raised in foster care, Sheena eventually went to live with her aunt, who later became unhoused. For six months, they survived in a tent until, and at just 17, Sheena ran away to live in an abandoned apartment building. Despite the chaos around her, she persevered — she continued attending high school and graduated. Yet the weight of instability took its toll. She turned to substances to cope with stress, eventually entering an abusive relationship and later becoming pregnant.

The birth of her son, Dominick, became the catalyst for Sheena to seek support from KCHC's Better Beginnings program, a service that helped young parents and families in Kingston's North End. The program's home visits proved to be a turning point in her life.

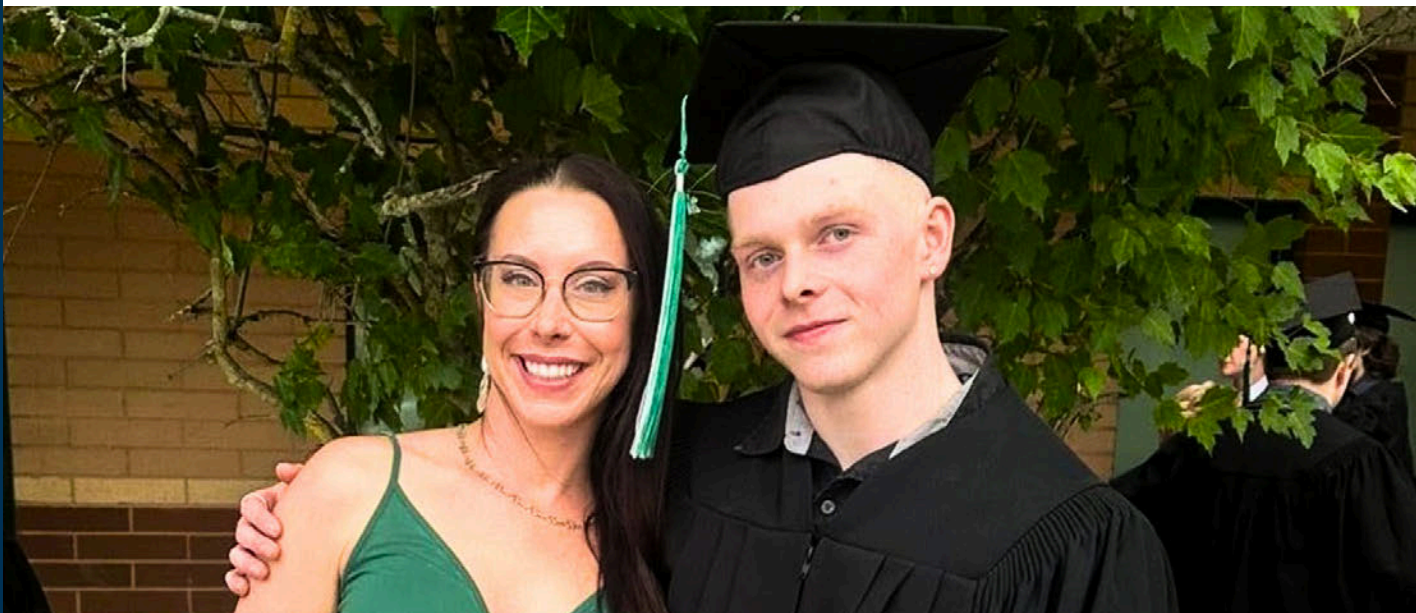
"It was Jessica MacDonald (now with our Thrive program) who saved me," Sheena says. "She would come visit me and my son at home. I wasn't allowed to leave, but Jess kept showing up and eventually got me out. She also encouraged me to go to college, and here I am, 14 years later, working for the same agency."

Her work is wide-ranging: helping clients with medical appointments, groceries, grief, recovery, and more — all while breaking down stigma and navigating complex systems. And her clients echo the impact of her presence and the stability that safe housing can bring.

"When I first got housed, I slept for two weeks straight. I didn't know how heavy it all was until I stopped carrying my bags everywhere," says one client, who has lived in transitional housing for the last five years. "It's nice to have all the supports working together under one roof. I now have ID, a bank account, and doctors that I didn't have before, and I'm very grateful."

Sheena's story is a powerful reminder of the full-circle impact KCHC can have on people's lives. And now, that impact is rippling outward. Her son Dominick, the baby Jess once visited in those early Better Beginnings days, recently graduated high school.

"I couldn't be prouder," Sheena says. "He's why I kept going."



Supporting students like never before

For many children, everyday moments like returning to class after recess or joining group activities can feel overwhelming. These transitions can bring up strong emotional reactions, often linked to underlying stressors such as difficulties at home, experiences of bullying, past trauma, or neurodivergence.

For students facing complex challenges, schools and families often need to reach out for additional support in the community, which is where a new partnership between KCHC and the Limestone District School Board comes in.

Led through a new collaboration between the interdisciplinary primary care teams at Weller and Midtown, Teach Resilience and the Limestone District School Board, the Collaborative Care Initiative (CCI) is helping bridge gaps between health and education like never before. At the centre of this work is KCHC's Pediatric Occupational Therapist, Amanda Hall, who works across both clinical settings and the school board to coordinate care and ensure students receive the wraparound support they need to thrive.



KCHC is helping in so many ways, including rostering children in need of primary care and providing access to wraparound support with an allied health team.”

Amanda Hall
Pediatric Occupational Therapist

“We build goals together with families, teachers, and health providers, ensuring children receive support that addresses both school and home challenges. Every child’s plan is tailored, from behaviour and classroom strategies to individual health and family goals,” Amanda explains. “KCHC is helping in so many ways, including rostering children in need of primary care, providing access to wraparound support with our Allied Health Teams, and collaborating with other community agencies to enhance capacity when working with children and families who have higher needs for support.”

The Collaborative Care Initiative doesn’t stop at the school doors either. Programs like HIVE (Healthy Individuals, Vibrant Environments), now provides children in Grades 1–6 and their caregivers a safe, welcoming space to learn, play, and connect both after school and on the weekend at our Weller site and the Rideau Heights Community Centre. Each session features creative, screen-free activities, like STEM projects, arts and crafts, cooking, and workshops with local experts.

Lego Club, another extension of this work, uses a Lego Therapy framework to help children

develop communication, social, and executive function skills. During March Break, children spent four mornings building Lego kits, practicing teamwork, and developing conflict resolution skills under the guidance of KCHC staff and volunteers. The program's hands-on approach gives children opportunities to practice social skills in a supportive, structured environment while having fun.

“We want to engage kids and families in activities off-screen, highlight community resources, and provide connections where needed,” says Stephanie Wight, HIVE's Program Coordinator. “The HIVE environment is welcoming, and families can build relationships, learn, and simply enjoy time together.”

Summer programming like this will continue to expand by offering Home Alone courses, and a child-friendly introduction to gardening.

These programs will help provide consistent routines, skill-building opportunities, and community connections, supporting children to thrive outside the classroom while offering families guidance and support to navigate challenges at home.



HIVE (Healthy Individuals, Vibrant Environments) is a free weekly program for children in Grades 1-6 and their caregivers. It runs Wednesday evenings at Weller and Saturday mornings at the Rideau Heights Community Centre.

Bringing Indigenous culture to KCHC

A meaningful milestone took place at KCHC's Weller Avenue site last summer with the raising of a new tipi as part of a new Indigenous Spaces and Places initiative.

This regional effort was designed to incorporate Indigenous culture, artwork and imagery into health-care settings, creating welcoming and healing environments. Led by the Frontenac, Lennox and Addington Ontario Health Team, in collaboration with KCHC and Three Things Consulting, the initiative supported six local health organizations in partnering with Indigenous artists, Knowledge Keepers, and Elders to co-create these spaces.

“This project is about creating culturally safe and inclusive spaces — making visible what has too often been ignored or erased,” said KCHC CEO Ben Gooch. “We're honoured to be one of six organizations participating in this initiative, a powerful step toward reconciliation and representation in health spaces across KFL&A.”

Other participating organizations include Kingston Health Sciences Centre, the South East Regional Cancer Program, Addiction and Mental Health Services KFL&A, Lennox and Addington County General Hospital, Queen's Family Health Team and the KFL&A Public Health.

The tipi at Weller will remain open year-round, providing a private and sacred space for ceremony, reflection, and connection for clients, staff, and visitors.



Staff Spotlights



Zoe McDonald

Community Liaison, Self-Management Program of Southeast Ontario

I help promote the Self-Management Program of Southeastern Ontario and connect people to our free workshops for adults with ongoing health conditions, their loved ones, and healthcare professionals. What I love most is hearing participants' stories and feedback, especially when they share how the workshops improved their health and reduced feelings of isolation. I'm grateful to be part of the work we do at KCHC and to see the difference it makes in people's lives.



Dima Saab

Family Physician, Weller Clinic

I believe primary care is the cornerstone of our health care system and allows us to advocate for our patients and their communities. The most rewarding part of my job is building connections with patients and their family members and supporting their wellness with the help of my amazing interdisciplinary colleagues. Working at KCHC means providing community-focused, patient-centred primary care with a health-equity lens.



Jennifer Griffith

Overdose Prevention Support Worker, Consumption Treatment Services

Many people still think we're enabling drug use, but what we're actually doing is providing safety, dignity, and support for people who use substances. Having lost my children's father to substance use, I know that in today's drug poisoning crisis, the first and most important step on the path to recovery is keeping people alive. Spending time with clients and letting them know how much they're loved — that's everything to me. I'm a hugger, and sometimes that simple connection means the world.

Staff Spotlights



Jonol Akkash

Receptionist, Immigrant Services Kingston and Area

I have been a part of the ISKA team for almost 3 years. I love meeting people from different countries and helping clients in a way that feels familiar and comfortable to them. I see how ISKA makes a real difference in the lives of newcomers and as a newcomer myself, I know how much this support matters. ISKA helped me work toward my goals as an immigrant, and now I'm proud to give back to others in the same way."



Ashley Greveling

Certified Respiratory Educator, Rural Frontenac, Lennox and Addington Allied Health Team

I've worked at RFL&A for over seven years now. I love working in community health care and being able to build rapport with my patients. Having the one-on-one time to properly educate them and support their self-management going forward is really important to me. I work with a wide range of patients including children as young as four who have been recently diagnosed with asthma as well as seniors who are living with COPD. Supporting patients at different stages of life makes the work both challenging and incredibly rewarding.



Amanda Brown

Executive Assistant, Corporate Services

I have been an Executive Assistant since 2024, after spending six years with our Thrive program as a Counsellor/Individual Support Worker. My passion has always been supporting vulnerable people, specifically those who use substances and are navigating trauma and mental health challenges. So many people at KCHC are here because they genuinely care about others and want to make a positive impact. That "cross-pollination" and building new relationships with staff is incredibly rewarding.

Staff Spotlights



Edward Cho

Nurse Practitioner, Midtown Kingston Health Home and Access+

Working at KCHC means joining like-minded individuals to care for some of Canada's most marginalized populations. My favorite part of the job is navigating complex cases, working alongside phenomenal colleagues, and building relationships with patients to share both the good and the challenging moments. It's especially rewarding to support refugees starting new lives after fleeing violence, often with nothing but clothes on their backs.



Jessica MacDonald

Counsellor/Individual Support Worker, THRIVE

What inspires me most are the families I work with and their resilience and determination to break cycles of trauma and give their children a better start. I also love collaborating with colleagues and community partners to support families in meaningful ways. Working at KCHC has shaped who I am today, and I often joke that I'm a "lifer" because I truly love this work.



Ren Sauve

Registered Early Childhood Educator, EarlyON

My role at KCHC is incredibly rewarding because I get to watch kids and their parents learn and grow. I enjoy being there to support parents, reassure them that they're doing an amazing job, and remind them not to stress about the little things. This year, I'm also leading a support program for dads who are working to be the best they can be for their kids, their partners, and their co-parents. Seeing parents gain confidence and families grow stronger is what makes this work so special.

Staff Spotlights



Shannon Ruddy

Community Development Worker, Napanee Area Community Health Centre

I've been part of the NACHC team since 2022, facilitating youth programs, coordinating the Back-to-School Backpack Campaign and Operation Warm Toes, managing harm reduction supplies, writing grants, and partnering with local agencies to strengthen support networks for young people in Napanee. I also co-facilitate PRISM, a weekly drop-in for 2SLGBTQIA+ youth and allies, offering a safe, supportive space to connect through positive activities. I'm grateful to support local youth and celebrate wins while helping them navigate the challenges of adolescence.



Amitis Medifar

HCV Community Liaison, Street Health Centre

I work as the Hepatitis C Community Liaison at Street Health, where a big part of my job is building connections with other agencies and community organizations. I coordinate outreach initiatives like Hep C pop-ups, roundtables, and community events that help bring awareness to our Hepatitis C program and connect people with care. What inspires me to continue doing this work is seeing how even small acts of outreach, compassion, and connection can make a meaningful difference in someone's day.



Lucas Rychlo

Data Specialist, Ontario Harm Reduction Distribution Program

As a Data Specialist, I provide digital tools and expertise to support our operations across Ontario. By managing a centralized database and creating tools to make it easily accessible, I help ensure more accurate decision-making. The most rewarding part is performing process improvement — taking an older process and transforming it into something more systematic, intuitive, and effective. When we realize “this is working just as we wanted!” it's a great feeling.

Programs and Services

Weller

Baby Care Basics (*in partnership with A Great Start for Families*)

Breast Feeding Support

Bridges Out of Poverty

Child Psychiatry

Community Development

Community Gardens

Community Kitchens

Counselling/Social Work

Dental Services

Diabetes Education

Dietitian

Early Years (*including EarlyON and ON y va*)

Family Health Educators

Flu Clinic

Foot Care

Fun and Friendly Crafts

Getting Ahead in a Just Getting by World

Good Food Box

Harm Reduction

Healthy Smiles Ontario

Home Instruction for Preschool Youngsters (*HIPPY*)

Indigenous Community Development

Kinesiology

Lung Health

Neurology

Occupational Therapy

Older Adults Hub

Operation Warm Feet

Oral Health Program

Pathways to Education

Pathways to Education Go FAR (Alumni Support)

Pediatrics

Pharmacist

Practical Assistance

Prenatal Classes

Prenatal and Obstetrical Care

Primary Care (Physicians and Nurse Practitioners)

Psychiatry

Regional Self-Management

Seniors Food Box

Serve and Return

Sexual Health Clinic

Smoking Cessation

Social Prescribing

Special Events

STI Quick Testing

Super Seniors

Teach Resilience

Thrive

Transgender Health Program

Unnamed Youth Project

Virtual Care – Ontario Telemedicine Network (OTN)

Volunteer and Student Opportunities

Programs and Services



Midtown Kingston Health Home

Diabetes Education
Dietitian
Early Years (including EarlyON and ON y va)
Family Health Educators
Flu Clinic
Foot Care
Fun and Friendly Crafts
Getting Ahead in a Just Getting by World
Good Food Box
Harm Reduction
Healthy Smiles Ontario
Home Instruction for Preschool Youngsters (HIPPY)
Indigenous Community Development
Kinesiology
Lung Health

Settlement and Immigration Services

Immigrant Services Kingston and Area (ISKA)
Kingston Immigration Partnership (KIP)
Prevention Diversion Services for Homelessness Prevention

Consumption & Treatment Services

Acute/Episodic Care
Frontenac Paramedic Services
Harm Reduction Supplies
Naloxone Training and Distribution
Opioid Overdose Prevention
Primary Care (NPs and RNs)
Referrals to Health and Social Services
Sexual Health Clinic
Wound Care

One Roof Youth Wellness Hub

Primary Care (Nurse Practitioner)



Programs and Services



Access+

Well Baby Care Clinic
Preventive Care and cancer screening
Sexual and reproductive health services
Prenatal care for unattached
Refugee Health Bridging Clinic
Occupational Therapy
Care Coordinator - Collaborative Care Initiative CCI (with ALCDSD)
STI quick tests
Practical assistance

Seniors Programming

Board Games
Book Club
Exercise Programs
Knitting Club
Penguins
Pole Walking
Speaker Series

Barrack

Ontario Harm Reduction Distribution Program (OHRDP)
Street Health Centre
Addiction Medicine
Catalyst Program (Crystal Meth Contingency Management)
Community Development
Counselling/Social Work/Case Management
General Internal Medicine Clinic
Harm Reduction Supplies
Hepatitis C Program
Harm Reduction Supplies
Naloxone Training and Distribution
Ontario Telemedicine Network (OTN)
Outreach Worker
Peer Program

Pharmacy
Practical Assistance
Primary Care (Physicians, NPs and RNs)
Psychiatry
Rapid Access Addiction Medicine (RAAM)
Self-Swab HPV Testing
Sexual Health Clinic
Shuttle Service for Clients
Smoking Cessation
Specialty Clinics
Spirometry Clinic
Tenant Support Program
Ultrasound Clinic

Programs and Services



Napanee & Interprofessional Primary Care

Access Clinic – Acute Episodic Care
Best Care Partnership
Counselling/Social Work
Community Health and Chronic Disease Management
Dental Services
Diabetes Education
Dietitian
Digital Health Connector
Embedded Internal Medicine Clinic
Harm Reduction Supplies
Oral Health Program
Primary Care (Physicians and Nurse Practitioners)
High-Risk Foot Care
Kinesiology Services

Naloxone Training and Distribution
Ontario Telemedicine Network (OTN)
L&A Back to School Campaign (with Napanee Salvation Army)
L&A Operation Warm Toes (with Napanee Salvation Army)
Physiotherapy
Practical Assistance
Respiratory Therapy
Respirology Clinic
Rural Youth Services
Smoking Cessation
STI Quick Testing
Tenant Support Program
Volunteer Opportunities



KCHC Statistics

110

refugees and newcomers have received primary care at Access+ since opening in November 2025

35

referrals to Occupational Therapy via the Collaborative Care Initiative since November 2025

457

people supported with smoking cessation counselling and Nicotine Replacement Therapy through KCHC's STOP program

1,800+

attendees at Regional Self-Management sessions

3,500

Downloads from Kingston Immigration Partnership Welcome to Kingston APP

6,800

people have received primary care at Midtown Kingston Health Home in the first 20 months of operation.

2,000+

connections with students at Pathways to Education, with over 68% of meetings focusing on academics and/or checking in on student well-being

KCHC Financials

Kingston Community Health Centres Statement of Financial Position

As at March 31, 2026

	2026	2025
Assets		
Current		
Cash (Note 3)	13,944,585	13,175,586
Amounts recoverable	1,587,563	2,072,483
Prepaid expenses	51,040	29,621
	15,583,188	15,277,690
Capital assets (Note 4)	12,409,302	13,042,144
	27,992,490	28,319,834
Liabilities		
Current		
Accounts payable and accruals (Note 5)	3,840,691	5,208,505
Current portion of deferred contributions related to capital assets (Note 6)	439,043	439,043
Deferred revenue	1,448,237	407,752
Current portion of long-term debt (Note 7)	159,088	153,517
Due to Ministry of Health ("MOH") (Note 8)	2,837,265	3,314,047
Due to other funders	23,049	34,824
	8,747,373	9,557,688
Deferred contributions related to capital assets (Note 6)	8,496,967	8,936,010
Long-term debt (Note 7)	2,614,293	2,773,381
	19,858,633	21,267,079
Fund Balances		
Healthy Smiles	124,020	124,020
Unrestricted General Fund	4,534,886	3,653,253
Invested in Capital Building	1,388,508	1,388,508
Special Purpose	1,592,050	1,368,450
Special Purpose Externally Restricted	494,393	518,524
	8,133,857	7,052,755
	27,992,490	28,319,834

KCHC Financials

Kingston Community Health Centres Statement of Operations

For the year ended March 31, 2026

	2026	2025
Revenue		
Ontario Health East - Ministry of Health (Schedule 1)	18,509,330	17,893,159
HIV and Hepatitis C, Addictions and Substances Programs (Schedule 2)	18,016,451	17,344,181
Ministry of Children, Community and Social Services Citizenship and Immigration Division (Schedule 3)	70,000	220,000
Immigration, Refugees and Citizenship Canada funding (Schedule 4)	875,441	716,952
South East Health Unit (Schedule 5)	717,176	764,422
Pathways to Education Canada (Schedule 6)	888,933	825,700
United Way Serving KFL&A (Schedule 7)	250,973	242,779
City of Kingston (Schedule 8)	1,335,685	1,168,112
Other funds (Schedule 9)	13,319,403	10,952,746
	53,983,392	50,128,051
Expenses		
Salaries and benefits	25,828,040	19,985,910
Operating	24,819,125	27,128,617
	50,647,165	47,114,527
Excess of revenues over expenditures before other items	3,336,227	3,013,524
Other items		
Amounts repayable to MOH and other funders	(950,586)	(1,830,101)
Net amounts transferred to deferred revenue	(1,304,537)	(342,419)
	(2,255,123)	(2,172,520)
Excess of revenue over expenditures	1,081,104	841,004



ANNUAL REPORT 2026

KINGSTON COMMUNITY HEALTH CENTRES

Thank you to our Partner Agency:



United Way
Kingston, Frontenac,
Lennox and Addington

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