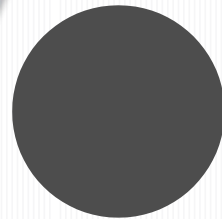
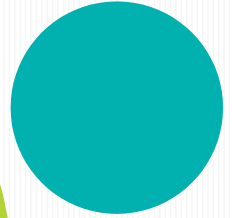


Annual Report

2015 / 16



Canadian Mental Health Association
Champlain East
Mental health for all

Association canadienne pour la santé mentale
Champlain Est
La santé mentale pour tous

VISION STATEMENT

To provide leadership in “recovery based” mental health and concurrent disorder services through a high quality system that is easily accessible to all citizens in the Counties of S. D. G. & Prescott-Russell.

MISSION STATEMENT

C.M.H.A. is committed to working in a partnership with individuals, families and community resources to enhance the development and continued support of mental health for all citizens.

GOALS OF OUR BRANCH

- #1 To promote mental health and improve positive attitudes towards mental illness.
- #2 To advocate with and on behalf of individuals living with a serious mental illness or a concurrent disorder and their families.
- #3 To ensure that clients have streamlined access to a comprehensive continuum of services.
- #4 To help people be successful and satisfied in the environment of their choice.
- #5 To provide services in both official languages.

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PRESIDENT’S AND EXECUTIVE DIRECTOR’S REPORT

This year the Board of Directors made a progressive decision to apply for Accreditation through the Qmentum Program from Accreditation Canada. Although the Board believes that the Branch is well positioned to undertake this initiative, there will undoubtedly be work in ensuring our policies and procedures reflect the standards of Accreditation. The date for the site survey is scheduled in November 2018.

Another decision of the Board was to create the Champlain East Mental Health Foundation to raise funds for the Branch programs. This separately incorporated, non-profit charity will operate some fund raising events and coordinate events run by outside groups. Presently the Foundation has received its Incorporation Papers and is awaiting its charitable designation.

Another decision of the Board was to create the Champlain East Mental Health Foundation to raise funds for the Branch programs.

In October, 2015 the Branch entered into a Memorandum of Understanding (MoU) with the City of Cornwall to work with individuals with hoarding issues in the United Counties of Stormont, Dundas and Glengarry. The MoU is for 18 months and terminates on March 31, 2017, with the intention to be renewed. It provides the Branch with funds for one Staff and \$40,000 annually to remove materials from clients’ homes.

The Board and Management are closely monitoring the impact of the document “Patients First: A Proposal to Strengthen Patient-Centered Health Care in Ontario”. This proposed plan focuses

specifically on ways to improve access to consistent, accountable and integrated primary care, home and community care, population health and public health services. Although its main emphasis is Primary Care, it introduces the concept of sub-LHIN areas among other issues that will have a bearing on the way the Branch delivers its services.

The President and Executive Director wish to thank the Board of Directors, Volunteers and Staff of CMHA Champlain East for their expertise and commitment during this interesting year. Together we continue to demonstrate leadership and integrity that has an enhanced impact on our community. We look forward to continue on this journey in the next year.

Together we continue to demonstrate leadership and integrity that has an enhanced impact on our community.

RELEASE FROM CUSTODY AT COURT PROTOCOL

The Protocol allows our Branch to arrange for the transportation of basic personal effects of inmates detained at the Ottawa Carleton Detention Centre (OCDC) with mental illness, intellectual disability or concurrent disorders upon their release at court, such as prescriptions, medication, house keys, ID, and health cards.

In November 2015, our agency participated in the Provincial Human Services & Justice Coordinating Committee (HSJCC) Conference. In conjunction with the OCDC, we presented on the topic of the revised Release from Custody at Court Protocol. 136 participants registered to attend this presentation. Interest in the Protocol was province-wide. Many participants became aware of the Protocol at the Conference and through a subsequent Webinar in December 2015 by the same presenters, viewed from 81 sites across Ontario. (Visit this link to access the audio recording of the webinar: <http://camh.adobeconnect.com/p88drvqc8ce/>).

The Minister of Community Safety and Correctional Services, Yasir Naqvi, referred to the Protocol in his remarks at the annual Conference.

The Minister of Community Safety and Correctional Services, Yasir Naqvi, referred to the Protocol in his remarks at the annual Conference. Since that event, several agencies across the province have made direct inquiries to our agency, to which we have responded to assist them in developing their respective protocols (ie: CMHA-Windsor/Essex, CMHA-Hamilton, CMHA-Brampton, CMHA-Peel, and CMHA-Lambton/Kent).

Some additional contacts have occurred since the webinar:

The Chair of the Guelph HSJCC, Sharon Deally-Grzybowski, expressed interest in developing a similar program to effectively manage prisoners' belongings upon discharge from Maplehurst Detention Center at court, having contacted our Branch for support and consultation in developing such a program in their area. Our Program documents, forms and protocol will be shared.

Julie Prud'homme, Manager of OPP Transportation Program in Ottawa, Johanne Renaud, Hawkesbury Team Supervisor at CMHA-Champlain East, and Laurie Larocque, Deputy Superintendent of Programs at OCDC, are collaborating in creating a standardized form that could be used across Ontario to access the "Property Bags" upon release at Court.

This Protocol was featured in the Canadian Mental Health Association-Ontario Health Notes

Newsletter and the Provincial HSJCC Newsletter.

Some comments we received by the clients of this program:

“I was very happy that my belongings were able to be sent to court with me”, “It removes a big stress and it’s one less headache”, and “If we don’t have our things and we can’t return [to OCDC], we lose our cards and our money”.

Positive feedback from Russell OPP: “[This] has been incredibly successful in our area. It is well-organised by our involved community partners. Our officers physically handle the bags as a result of the coordinating that is done between CMHA and OCDC. This program causes minimal additional work for us while conversely making the Offenders’ transition easier”.

CMHA CLIENTS SERVED 2015 – 2016

1,240

Intensive Case Management

987

Information & Referral

88

Family

137

Rent Subsidies

389

Social Rehab / Recreation

27

Vocational / Employment

177

Diversion & Court Support

157

Hoarding

HOARDING

2-5% of the general population experience hoarding. To this end, we have developed and continue to enhance our Branch’s hoarding program to address the clinical features of pathological hoarding. Rational Emotive Behavioural Therapy (REBT) hoarding-specific training was designed for our agency, and delivered to staff by a forensic psychiatrist and nurse. This year, we have provided supportive intervention to 157 clients across Champlain East living with a hoarding disorder. Our Branch utilises a Clutter Screening Questionnaire to assist with an initial assessment.

Local Partnerships:

1. Hoarding Coalitions have been established in the Stormont, Dundas & Glengarry, as well as the Prescott-Russell* areas. They have developed their respective protocols. Here are some of the highlighted activities:
 - 4 Quarterly Sub-Committee Meetings in the last year
 - 2 Community Educational sessions with 82 attendees
 - 5 additional presentations were made by the lead Intensive Case Manager in SDG. As such, SD&G community agencies and municipalities are knowledgeable of the Protocol
 - 16 clients were referred based on the Protocol
2. A contract with the City of Cornwall was signed to provide services to 16 clients per year living with a hoarding disorder. The contract is for 1 full-time staff plus funds for clean-up services. We have enlisted local clean-up services.
3. Prescott-Russell Social Housing Services are managing their region's funds independently. Our Branch has made referrals to access required funding for specific clients living with hoarding, accordingly. OSPCA, Red Cross, and community partners participating in the local protocol are essential in collaboratively addressing the needs of this rural francophone population.

* *Protocole de collaboration pour les situations d'amasement compulsif dans les comtés unis de Prescott et Russell, 2011*

HEALTH LINKS

**5% of patients
account for
2/3 of health
care costs**

5% of patients account for 2/3 of health care costs. Community Health Links bring providers together to ensure the coordination of care for people with multiple, complex needs. There are 10 community Health Links in the Champlain region, 8 of which are active. This innovative model places patients/clients and family care providers at the centre of the health system. Through collaboration with providers of care, patients/clients will gain quicker access to the services they need, such as primary care and home and community care. The goals are to improve the health-care experience for people with multiple complex needs, reduce unnecessary visits to hospital emergency departments, and decrease overall health-care costs. The Champlain Local Health Integration Network (LHIN) and the Ministry of Health and Long-Term Care are providing dedicated funding and supports to Health Links across the province.

Our branch is involved in 3 of the 4 Health Links in the Champlain East region, and we look forward to participating on the 4th Health Link area upon its initiation. We have collaborated with the Health Links in our community by way of seconding an Intensive Case Manager with a view to building a sustainable Coordinated Care Plan model.

We have participated in a Leading Change Collaboratively leadership course, in collaboration with the Champlain LHIN, at the Telfer School of Management. The overall program objective is to collectively create and understand conditions that foster collaboration and focussed action in a network in order to keep patients with complex needs, and their families, at the centre of care.

Click on this hyperlink to view a quick video on Health Links across Ontario:
<http://www.health.gov.on.ca/en/pro/programs/transformation/community.aspx>

HEADSTRONG

HEADSTRONG is a national youth anti-stigma campaign launched by the Mental Health Commission of Canada (MHCC). This year the Canadian Mental Health Association - Champlain East hosted two Regional Summits in collaboration with the MHCC, (4) area School Boards (UCDSB, CDSBEO, CSDCEO, CEPEO) and its' many local community partners.

An English Summit was held on May 13, 2015 with students representing 10 high schools from the UCDSB and CDSBEO from across the region.

A French Summit was held on March 31, 2016 with students representing 8 high schools from the CSDCEO and CEPEO from across the region.



This initiative acts as a catalyst and coordinating agent between community organizations, schools, and youth in contributing to the reduction of stigmatizing attitudes and behaviors often associated with mental health problems and mental illness among youth and members of their communities.

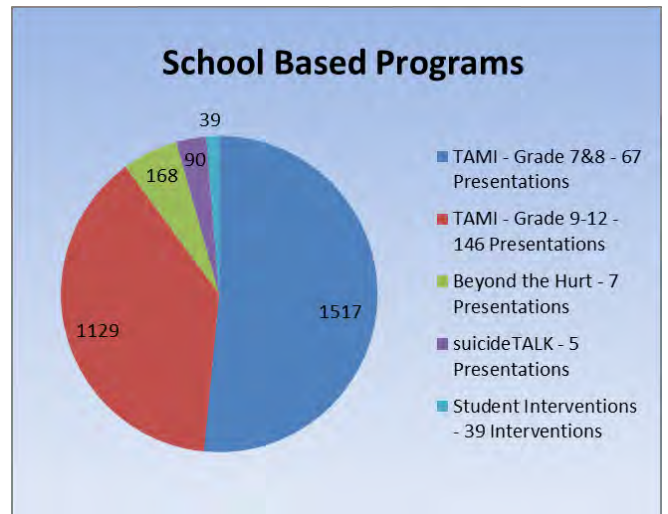
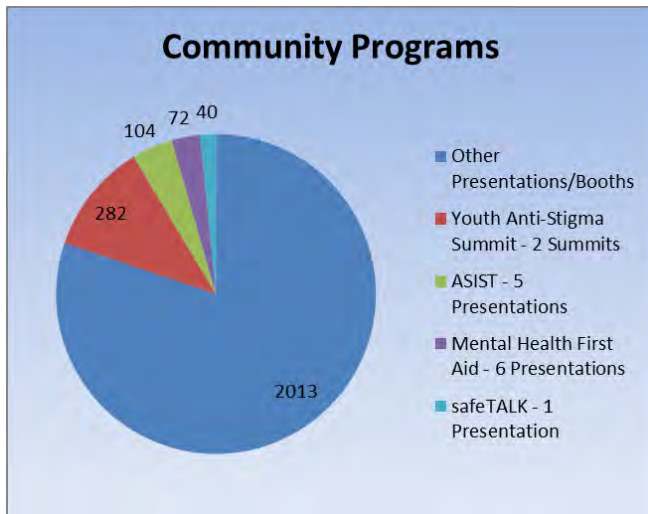
Youth are incredibly influential amongst their peers, within their schools, families, and communities. These day-long summits gave youth the required tools to help recognize stigmatizing behaviors and attitudes to allow for positive change in the places they study, work, play and live.

Over 260 students from across the five counties participated in these educational days where dialogue was created about mental illness, stigma, and the importance of young people seeking help.

In the morning, students had the opportunity to hear guest speakers share their inspirational story of hope and recovery with a mental illness. After lunch, students participated in a “Conversation Café” where they were encouraged to share ideas about stigma and action plans for change — what they can do to raise awareness in their own schools and communities.

Students were also able to visit several community partner booth exhibits to gather information on mental health/wellness and mental illness. Thank you to the Eastern Ontario Health Unit, Seaway Valley Community Health Centre, Children and Youth Mental Health Programs (CCH), Youth Net, Valoris for Children and Adults of Prescott-Russell and Équipe Psychosociale.

MENTAL HEALTH PROMOTION STATISTICS



We would like to thank our funders, including: United Way S.D.&G., United Way of Prescott-Russell, Subway Franchise (Pascal, Jacques & Christian Brunet, owners), our corporate fundraising sponsors and volunteers for making it possible to provide mental health promotion in our local communities, therefore reducing the social impact of mental illness.

2016 EMPLOYEE SATISFACTION SURVEY

As part of our Strategic Direction, CMHA Champlain East strives “to be an employer of choice in mental health”. One method of assessing this goal is to conduct an annual employee satisfaction survey. This year, our objective was to measure the health of our organization and its employees compared to our 2012 employee survey. Based on the “Work Life Pulse Tool”, the survey measures the quality of work life, providing a snapshot of key work environment factors, individual outcomes and organizational outcomes.

The survey was distributed to 40 unionized employees and we received 37 responses providing a 93% response rate. The 2016 Employee Satisfaction rate is an impressive 89%.

Compared to our 2012 survey results of 88%, the results are indicative of a highly engaged workforce. On behalf of the Board of Directors and the Management Team, we thank our employees for participating in the survey and contributing to a great place to work.



NEW HUMAN RESOURCE DATABASE



Throughout the year we worked on a new human resource software program for our staff. Lanteria HR system manages the entire lifecycle of an employee. From the recruitment process to performance and learning management, this operating system provides us with a paperless platform for the HR Team, Managers and Employees to manage all our HR processes and Document Library.

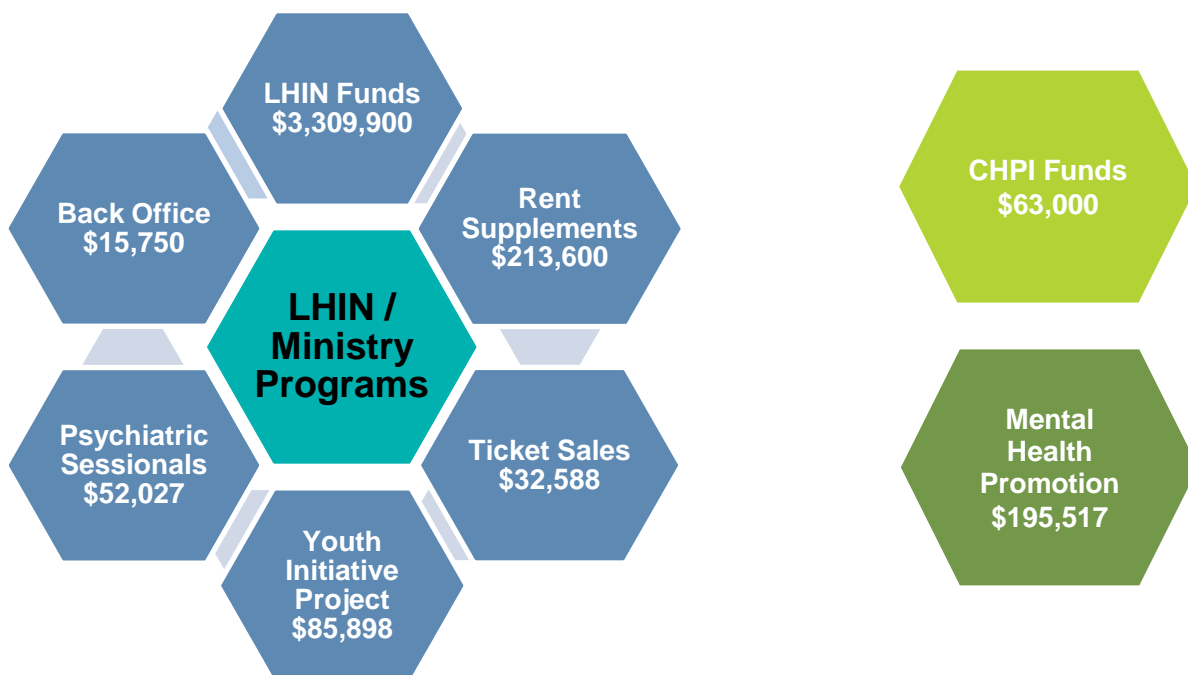
In customizing the HR database, we took the opportunity to incorporate the elements of the Core Competency Library for the Mental Health and Addictions Sector. Core competencies define behaviors that guide the recruitment, evaluation and development of employees that best reflect the work that is performed by the Branch.



VIRTUAL MACHINE WARE - VMWare

We have introduced Virtual Machine Ware or VMWare to our server network, which has given us greater flexibility and redundancy for our network. By running multiple operating systems and multiple applications on the same physical server, virtualization lets us reduce costs while increasing the efficiency and utilization of our existing hardware.

This year we lost a physical server due to a hard drive failure that would have affected staff's ability to work. Because of VMWare the servers on that host automatically moved to a working host and staff experience 0% down time, no one even noticed what had taken place. As we have become more and more reliant on technology and move ever closer to being paperless, VM environments have become increasingly a requirement.



FINANCIAL STATEMENT

As of March 31, 2016

Assets		
Current		
Cash and term deposits	\$552,451	
Accounts Receivable	\$62,705	
Prepaid Expenses	\$5,701	
		\$620,857
Capital		
		\$335,817
		\$956,674
Liabilities & Net Assets		
Current		
Accounts Payable	\$337,682	
		\$337,682
Net Assets		
Unrestricted net assets	\$283,175	
Invested in capital assets	\$335,817	
		\$618,992
		\$956,674
Statement of Operations		
Revenues		
Ministry of Health	\$3,575,527	
Fundraising	\$27,704	
Donations	\$113,011	
Registration Fees	\$36,200	
Interest	\$3,122	
Memberships	\$280	
Back Office Charges	\$15,750	
CHPI Funding	\$63,000	
Ticket Sales	\$32,588	
Youth Anti-Stigma Initiative	\$15,200	
Youth Initiative Project	\$85,898	
Total Revenues		\$3,968,280
Expenditures		
Advertising & Promotion	\$4,390	
Bank Charges	\$698	
Dues	\$12,029	
Fundraising	\$17,008	
Insurance	\$12,828	
Office	\$33,805	
Psychiatric Sessionals	\$52,027	
Professional Fees	\$34,378	
Program Services	\$44,032	
Public Education	\$11,974	
Repairs & Maintenance	\$60,230	
Rent	\$433,740	
Salaries and Benefits	\$3,022,128	
Telephone	\$51,584	
Training	\$19,332	
Travel	\$72,666	
Utilities	\$39,891	
Volunteers	\$3,959	
Total Expenditures		\$3,926,699
Excess of revenue over expenditures	\$41,581	
Investment in capital assets	-\$52,713	
Deficit / Surplus before settlements		-\$11,132
Current Year Settlement		-\$1,216
Deficit / Surplus for the year		-\$12,348
Unrestricted Net Assets, Beginning of Year	\$295,523	
Unrestricted Net Assets, End of Year	\$283,175	

This audited financial statement was prepared by Craig Keen Despatie Markell LLP. A detailed bilingual copy of this statement is available upon request.

GOVERNANCE

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Vice President
Carleen Hickey

Past Treasurer
Terry Dubé

Treasurer
Jason Dilamarter

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Executive Director
Michael Lloyd

Program Director
Raquel Beauvais-Godard

Manager of Human Resources
Rosanne Fortier

Manager of Operations
Bill Woodside

Manager of IT
Peter Labelle

Manager of Mental Health
Promotion
Joanne Ledoux-Moshonas

Team Supervisors
Johanne Renaud
Kim Height
France Anik Campeau



Main Office

329 Pitt Street
Cornwall, ON K6J 3R1

Hawkesbury Office

444 McGill Street
Hawkesbury, ON K6A 1R2

Satellite Offices

Alexandria, Casselman,
Morrisburg,
Rockland, Plantagenet

Telephone: 613-933-5845

Toll free: 1-800-493-8271

Fax: 613-936-2323



office@cmha-east.on.ca



www.cmha-east.on.ca



CMHA Champlain East / ACSM Champlain Est

