

# Healthy Living



# Healthy Minds

## 2010-2011 Annual Report



**Canadian Mental Health Assoc.  
(Saskatchewan Division) Inc.**

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## GLOBAL ENDS POLICY & MISSION STATEMENT

The Canadian Mental Health Association (Saskatchewan Division) Inc. is a volunteer based organization, which supports and promotes the rights of persons with mental illness to maximize their full potential; and promotes and enhances the mental health and well-being of all members of the community.

### Ends Policy 1 - Quality of Life

People with mental health problems will have healthy, personally satisfying relationships and an excellent quality of life. Such a life includes meaningful work, adequate income, good housing, accessible education and training, enjoyable recreational activities, friendship and fun with others. It also includes easy access to appropriate, effective, comprehensive health services in a community in which there is an understanding and acceptance of mental illness.

### Ends Policy 2 - Promotion and Prevention

There will be a reduced incidence and severity of mental illness in the community; mental health will be promoted throughout the community, and high-quality information on mental health and mental illness will be available to all.

### Ends Policy 3 - Autonomy and Human Rights

Mental health consumers, and families affected by mental illness, will be empowered and supported in their efforts to protect their human rights, and to freely make autonomous, reasonable and responsible choices and decisions.

## VALUES

The Canadian Mental Health Association (Saskatchewan Division) Inc. endorses the following values essential to fulfillment of the Global Ends Policy/Mission Statement:

- The future well-being and the quality of life of persons with mental illnesses depends on our ability to change attitudes toward mental illness. The Association must communicate that there is a high incidence of psychiatric and emotional disorders in our communities, which strikes more people every year than all other health problems combined.
- The Association is committed to promoting a quality of life for people who are psychiatrically disadvantaged.
- The Association strives to prevent mental illness and promote mental health.
- The Association is firm in its conviction that persons with mental illness have the potential to live normal, or near normal lives within the community and it, therefore, commits to advocating with them, or on their behalf to promote awareness of conditions surrounding mental illness, to monitor inadequate care, and foster better mental health, dignity and quality of life through community-based support and services.
- In all of its endeavours, the Association strives to offer consumers, colleagues and the public the highest standards of leadership, service and professionalism.
- The Association is committed to administering its affairs in a cost-effective and efficient manner and to working within the levels of community support.
- The Saskatchewan Division continually

reaffirms the leadership of the Canadian Mental Health Association, its partnership with community groups, government and non-government agencies and individuals, and its commitment to establish viable mental health programs, policies and services.

- Meaningful leisure activity is an essential source of self-esteem and position image. Leisure provides the opportunity to lead balanced lives, achieve our full potential and gain life satisfaction. The Canadian Mental Health Association (Saskatchewan Division) Inc. is committed to enhancing quality of life through recreation, programs and services.

## PRESIDENT'S REPORT

Submitted by Darrell Downton

With the difficulties experienced in agriculture because of the precipitation last year, money was tight but the support was still there. I think that indicates the importance of CMHA and its work to the people of Saskatchewan. When times are tight, people are still giving because I believe they value the work we are doing. I also believe that there is a growing awareness of the importance of mental health. This is a time of opportunity for CMHA (Saskatchewan Division) Inc.

I would like to thank the Dave Batters Golf Tournament for their work, which has resulted on the production of television commercial spots addressing the issue of depression and suicide. This is a very



valuable message presented in an excellent way.

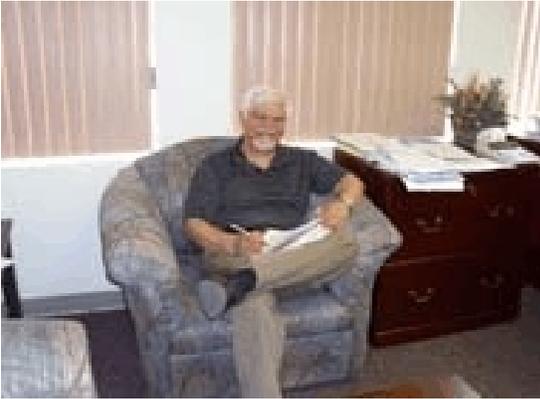
I would also like to highlight the excellent work CMHA Saskatchewan Division does in advising the government and pushing for change. This work has great value. One example is the clawback from Social Services being raised to \$200.00. For a person with a disability like myself, the extra \$75.00 per month makes a huge difference.

I believe strongly in the excellent work CMHA is doing and consider it a privilege to be President of such an excellent organization. I believe that what we are doing as an Association matters.

Finally, I would like to express my appreciation to the excellent people involved with CMHA Saskatchewan Division. Dave Nelson is doing an excellent job leading the organization and his tireless efforts are much appreciated. I would also like to thank the Division Office staff for their excellent work and dedication. I would like to commend the branches across the province for the great work they are doing, as well as the many volunteers who make our work possible. I would also like to extend a special thank you to the Provincial Board Members for meetings that are easy to Chair and for the excellent work they are doing.

Respectfully submitted  
Darrell Downton, President  
CMHA (Saskatchewan Division) Inc.

## EXECUTIVE DIRECTOR'S REPORT



Submitted by Dave Nelson

### ***“There is no health without mental health”***

I am writing regarding a tremendous opportunity to move the mental health system forward in our country, and in our province.

As I receive many calls from persons with lived experience in mental health and mental illness issues, I am aware of the similarity of the basic issues raised. These can include:

- I have been referred and re-referred to several different resources. None of them seem connected to the other, and they all want to start over again with my “story”.
- Why are there not more resources available for myself or my loved one? I cannot seem to have timely, or often any access to meet my needs.
- Why do I have to drive hours to get overstretched services in a larger center?

Perhaps the following quotes provide some explanation for these serious questions many people have:

*“The mental health and addiction system is not a system at all; rather, it is a series of silos, largely unconnected in any meaningful way.”*

Senator Michael Kirby (2010)

or, closer to home,

*“The national average spent on publicly funded mental health services was 6.1% of the provincial health budget and Saskatchewan spend approximately 5% of the provincial health budget on mental health.”*

Institute of Health Economics Study 2008

What could be behind these long-standing issues, which have caused untold suffering for those with mental health issues and their loved ones?

A large part of this question gets back to the tremendous opportunity I spoke of earlier, that being the renegotiating of the Federal/Provincial Health Accord across the Canada Health Act, otherwise known as Medicare.

Right in the preamble to the Canada Health Act, the primary purpose of Canadian Health Care Policy is noted as follows:

*“It is hereby declared that the primary objective of Canadian Health Care policy is to protect, promote and restore the physical and **mental well being** of residents in Canada and to facilitate **reasonable access** to health services without financial or **other barriers**.”*

So how does this lofty goal square with the totally under-funded and under-resourced mental health system we see?

Perhaps this explains things a bit:

The Canada Health Act is explicit that the only services that the provinces must pay

for, and provide in accordance with the principles of the Act are those services that are provided [in hospitals or by a doctor](#).

If there was ever a system of care that needs to be truly “in the community”, and only a small portion of the time in hospitals or requiring a doctor, it is the mental health system.

Counseling, rehabilitation, psychiatric home care and many other community-based, vitally important services, which are required to keep people out of hospital, are not covered and cost-shared by the Federal/Provincial Accord and are, therefore, at a tremendous disadvantage when it comes to funding them. This is in addition to the problem of stigma and the systemic discrimination that it breeds.

This has to change, and the upcoming 2014 renewal of the Canada Health Act Accord must be amended to require the provinces to provide equal access to a much broader range of services people need, not just the services people need that are provided by doctors and in hospitals.

Do we no longer need doctors and hospitals in mental health and generally? Absolutely not. However, the much-needed and never adequately funded services, including proactive and preventative services such as public education, early intervention and counseling will eventually ensure the never-ending growth of demand for hospital-based services will ease.

So what is the opportunity? We have just finished a federal election in which health care was an important, if ill defined issue. We are also coming up on a provincial election this fall.

Now is the time to become familiar with the critical issue of the Health Care Act funding for community-based mental health care,

and to impress upon candidates that, once again, (and this is particularly cogent in the home of Tommy Douglas and Medicare), that the province of Saskatchewan once again takes the lead on (and not merely follows) the much needed enhancement to the Canada Health Act.

How can you do this in a practical sense?

- Take out a membership in CMHA and join us in our advocacy efforts for change.
- Write a letter to the Premier reminding him of promises made regarding a plan for mental health and that it has not yet happened.
- Encourage the Premier to fund the proposal in the document “Charting a New Course for Mental Health’s Most Vulnerable” found at [www.cmhask.com](http://www.cmhask.com) .
- Write to your local MLAs and MPs, making them aware of the need for community services to be included in a new Federal/Provincial Accord re Medicare.

All those families and their loved ones (and, by the way, that could be any of us but for the “grace of God”) will thank you for doing so. I urge you to do so.

## SOCIAL WORK PRACTICUM 2011

Submitted by Terry Ann Dauvin

I arrived at the Canadian Mental Health Association (Saskatchewan Division) Inc. office bubbling with excitement and nervous energy. My arrival marked the beginning of my social work major practicum. Staff at Division Office were all very welcoming and proved to be eager to answer any questions I might have.

Throughout the duration of my practicum,

David Nelson has proven himself to be a fearless leader in the mental health community. He has demonstrated a contagious passion for mental health and the willingness to go above and beyond the call of duty to advocate for the well being of those affected by mental illness in the community.

My practicum with CMHA Saskatchewan Division has allowed me opportunities to network with different organizations, participate in professional, collaborative meetings, attend multiple conferences, assist in planning the provincial conference, and has expanded my awareness and passion for mental health.

As a family member of a person with mental illness, it brings comfort and hope to know that dedicated staff from different organizations have come together to be a voice for people that often go unheard.

## **PUBLIC POLICY DEVELOPMENT**

### **CONSUMER ADVISORY COMMITTEE**

The Consumer Advisory Committee is a standing committee of the Provincial Board with a mandate to advise the Board on all matters related to consumer involvement in Association programs and policies which affect mentally ill persons. It does this by monitoring policies and programs of all mental health services, ensuring consumers' issues are addressed and reflected in Association activities, and advocating on behalf of consumers to allow for empowerment of mentally ill persons. The Consumer Advisory Committee also advises the Association on recreation program development and delivery issues.

Consumer Advisory Committee meetings provide valuable direct input from consumers throughout the province, and help guide the direction of CMHA policies on a broad variety of issues.

We are excited to announce that funding has been approved for a special consumer conference on "Changes and Directions in Mental Health and Addictions and the Consumer's Role in this Changing Environment" to be held in the fall of 2011. Mental health consumers and CMHA Sask. Division senior leadership will have an opportunity to focus discussions for creative ways to improve wellness. Recommendations will be developed and distributed to all branches and other stakeholder groups.

Thank you to Doreen Bell and Darrell Downton, Co-Chairs, and the membership of the Committee for their time and dedication to the goals of CMHA Sask. Division.

### **COMMUNITY PARTNERSHIPS**

#### DISC & PIND:

Largely as a result of work done by the Disability Income Support Coalition (DISC) and the Provincial Interagency Network on Disabilities (PIND), the Saskatchewan Assured Income for Disability (SAID) was launched. This provides Saskatchewan people with long-term disabilities their own separate income program. It is significant that the SAID program was initiated through a truly collaborative approach, which has fostered a positive and effective relationship between the disability community and the Ministry of Social Services.

A Program Implementation Advisory Team (PIAT) was established to provide advice on the implementation and development of the SAID program. PIAT is working with Ministry

officials to develop terms of reference for staff training. Work on an assessment tool is also well underway.

The progress on this program is certainly appreciated but there is still the urgent need to address the issue of adequacy. It is important that we continue to encourage the Government to ensure that there is an adequate level of support to make a meaningful difference in the lives of those needing this support.

#### Mental Health Coalition:

CMHA Sask. Division continues to take a lead role in the Mental Health Coalition, although the main focus has been on the work through DISC. There is a great deal of crossover between the Mental Health Coalition, PIND and DISC, with a number of agencies sitting on all three of these groups. The value of this is seen when groups are all talking with the same voice in a coordinated way. When Government sees this kind of consensus, they start to recognize the need to respond.

#### Regina Qu'Appelle Regional Health Authority Strategic Planning Committee:

Dave Nelson is sitting on the RQRHA Strategic Planning Committee. A draft plan has been prepared discussing steps/levels of need and a significant community focus group opportunity is planned. The Consultant contracted to move this forward has been successful in focusing this on a "patient first" and "recovery" model.

It is hoped this work will spin off into other Regional Health Authorities and will ultimately lead to a Provincial plan for mental health.

#### Letter Writing Campaign - "Charting a New Course for Mental Health's Most Vulnerable"

Individuals struggling with long-term

psychiatric illness and/or high complex needs are amongst the most vulnerable members of our society. Their needs often go unexpressed by virtue of the individual's limitations. Their voices are among those most difficult to hear. It falls to all of us to listen, reflect and act to address their needs across the entire continuum of mental health care and service by providing appropriate facilities and programs, with appropriate resources and supports that other segments of society have come to expect.

To that end, CMHA Saskatchewan Division and the Schizophrenia Society of Saskatchewan launched a joint letter writing campaign asking individuals to write to the Minister of Health, the Premier and their local MLAs encouraging them to support the plan outlined in the document "Charting a New Course for Mental Health's Most Vulnerable". This document can be found on our website [www.cmhask.com](http://www.cmhask.com). We encourage everyone to add their voice to this cause.

#### Disability Education Support Koalition (DESK):

Canadian citizens have the right to a quality education and access to the supports they need to be successful in school. To that end, on September 30, 2010 a forum was held to launch the Disability Education Support Koalition (DESK). Representatives from a number of organizations brought forward their concerns with the assistance of Dale Kendel, acting as facilitator. As a result of that meeting, a report entitled "Pursuing Quality Education in Saskatchewan" was developed, which provided results and recommendations from the September 30<sup>th</sup> forum.

A survey was developed asking how individuals felt regarding important issues in the area of education for persons with

disabilities. The results were tabulated and will be used to assist DESK in building relevant advocacy issues to improve our education system for persons with a disability and their families.

A sampling of other activities in the area of public policy development are as follows:

- Meetings with the Registered Psychiatric Nursing Association of Sask. (RPNAS) stakeholders regarding Psychiatric Nurse Practitioners.
- Participation on the Psychiatric Nursing Education Advisory Committee.
- Meeting with the Executive Director of the Occupational Therapist Association regarding training needs.
- Attendance at Corrections consultation.
- Meeting with Chief Commissioner of the Sask. Human Rights Commission re mental health issues and changes to the Human Rights Code.
- Meetings regarding possible changes to community treatment order regulations.

Public policy development activities continue to form a large part of the work at CMHA Saskatchewan Division Inc. With the upcoming provincial election there is increased urgency to get our message out there to advocate for the needs of some of the province's most vulnerable citizens.

## PUBLIC EDUCATION & AWARENESS

### FRIENDS FOR LIFE

Submitted by Donna Bowyer, Director

We have been very fortunate to have had the support of the Cooperators over the last few years. The program is now in its second year of funding. The Cooperators recognized the importance of mental health in the workplace and made a decision to try to have an impact by contracting Friends for Life to do presentations. These presentations serve as a preventative measure that can have lasting effects long into the future.



CMHA has been working with Cooperators to encourage businesses to gain a better understanding that when someone goes off on sick leave for a mental health issue, they need to have the same treatment as someone that is off because of a physical health issue. Ultimately, we would like to have workers and workplaces recognize the early signs and seek treatment so there is no time lost and the impact on their life is minimal.

Over 2010, we were invited into 41 different agencies with 14 of those inviting us back to do multiple presentations. We did a total of 95 presentations, which impacted 2318 people. We have also done an additional 24

presentations from January to March 2011. Friends for Life also took part in a number of displays and conferences.

Friends for Life has worked in the city, in rural areas and in First Nations communities. People everywhere are realizing that until we start taking care of our mental health, we will not have healthy communities.

Friends for Life has also developed a number of new pamphlets and resources on topics such as:

- workplace wellness
- suicide
- workplace functionality
- grief and grieving
- and a mental health airplane

Friends for Life has also continued to be active in the area of suicide prevention. We continue to do ASIST and SafeTALK throughout the province. The Director has also taken additional training in “Tattered Teddies” - a three-hour program to be delivered to adults that work with children under the age of 12 years that have suicidal thoughts or ideations. We have also done many SuicideTalks, which is a one-hour discussion about suicide. These are presented everywhere from businesses to schools to community organizations. These suicide prevention programs are offered throughout the province.

We also continue to do presentations through Shaw Cable, which can be seen in part, or in whole, in Swift Current, Saskatoon, Prince Albert, Moose Jaw and surrounding areas. In partnership with community experts, we have covered many different mental health topics from the perspective of the person sitting at home and what they would like to know.

Friends for Life continues to work with the Chamber of Commerce in order to influence the non-traditional area of organizations.

We felt there was a need to reach out to others in the community.

Friends for Life is looking forward to the upcoming year, and the opportunities it will bring with it.

## PROBLEM GAMBLING COMMUNITY PROGRAM



Submitted by  
Shauna Altrogge,  
Director

Considering the barrage of Canadian and international gambling and problem gambling research - one thing remains clear. Gambling remains a popular form of entertainment and, for some people, the games they play can cause serious problems. The Program offers information through presentations, workshops and display opportunities to assist people to make healthy decisions related to their gambling. We distribute a wide range of resource materials, provide referrals to Problem Gambling counselors and self-help groups such as GA and Gam-Anon. CMHA is grateful to be in a position to continue to offer our services throughout the province, in large part due to the Community Initiatives Fund provision of financial support for our Program.

The CMHA Problem Gambling Community Program staff team, David Jones, Rachel Clare and Elizabeth Deobald, delivered an impressive 221 community-based presentations, with the majority of our outreach occurring in schools across the province. There is growing concern that today's youth represent the highest risk group for gambling problems. Our Program offers information to students, teachers and

parents about the risks of gambling. We explore the realm of on-line gambling and how the popularity of video gaming may be of concern.

Survey Monkey evaluations continue to provide the Program with helpful feedback from teachers. A sampling of what teachers are saying....*"Great presentation and energy. On time and professional."*, *"the visuals were great and the kids loved the kinesthetic examples."*, *"I found the presentation very informative and useful. The presentation was engaging and easy to listen to. Thank you for taking the time to share with our students."*

The remaining sessions were delivered mostly to policing agencies, corrections, youth centres, church groups, First Nations, post-secondary students and other community-based organizations.



This year our Program developed some new components to compliment the Myth Busting Display. In collaboration with the Ministry of Health, stand alone banners (banner bugs), a fun game called *Turn to Learn* and a *Beat the Ace* card game illustrating house advantage served to enhance our presence at large events and to draw people to our display. Over the course of one year, staff participated in 34 display events, reaching 17,690 people.

CMHA Program staff embarked on a new

strategy in reaching the general public. CMHA had a presence at four summer exhibitions - Regina, Prince Albert, Saskatoon and North Battleford. The Myth Busting display was visible at the trade show venues and a wide array of resources were distributed. The popular Mood Card, among considerable Ministry of Health items, were disseminated to those who stopped by. Public response was noticeably positive to the presence of the booth with expressions of *"keep up the good work"* or *"there needs to be more of this information for the public"*. They expressed gratitude that this program was in existence. Needless to say, staff had their share of perogies, elephant ears and the ever-popular spud-nuts during their long days on the exhibition grounds! More importantly, however, was the positive response from the public that was captured by evaluations and the fact we interacted with approximately 5,500 folks.



Renewed efforts to connect with older adults took root in our partnership with the Co-op grocery stores. The Problem Gambling Co-op campaign was offered in conjunction with the Senior Discount Days in most

locations in Regina, Saskatoon and Prince Albert. Six dates were chosen and collectively, CMHA reached 760 older adults. The display opportunity featured the promotion of the new older adult campaign, *They Don't Make Them Like They Used To*, inferring today's electronic slot machines are quite different from those mechanical machines of yesteryear. In addition to the Co-op Campaign, Program staff also participated in four seniors' week activities during Saskatchewan Seniors Week - September 27<sup>th</sup> to October 3<sup>rd</sup>.



### What's On the Line?

CMHA was on site at a number of colleges and universities in the larger cities this year to promote the new Health campaign, *What's On the Line?*.

Through our participation at 8 key events such as Welcome Week, Sex, Drugs & Rock'n'Roll, Frost Week and Winter Meltdown, we showcased the new display components that helped make it a success. Student surveys (253) indicated they learned a lot about gambling and problem gambling through their participation during the fun and engaging display. Student comments included... *"awesome, fun and effective"*... *"appreciated all the fun energy and how people felt invited to participate - great learning tool"*.

Overall, the CMHA Problem Gambling Community Program had a very busy and productive year. When I look back at the many events attended by staff, the list of presentations that were delivered to virtually every corner (and many points between) of Saskatchewan, I am reminded of the dedication and efforts made by the staff team to ensure our message is heard. Great pride is taken to deliver professional and polished presentations that offer delegates the latest data and statistics to ensure people walk away with information that is relevant to both their particular needs and that of their community.

Special thanks to Program Staff, support staff at Division Office, the Ministry of Health, and to the Community Initiatives Fund.

I look forward to another great year!

## HEALING THROUGH HUMOUR



Healing Through Humour is a project of the Canadian Mental Health Association (Saskatchewan Division) Inc., which is designed to teach people living with mental and physical disabilities to perform standup comedy as a way to break down barriers of discrimination and build self-esteem through public performance.

The facilitator for this project is Ian Morrison, a graduate of the Humber College of Comedy Writing and Performance in Toronto, Ontario.



Ian has developed an eight-lesson plan for participants, culminating in a public performance of their newly acquired skills. Performance allows the students the opportunity to tell their story through humour. By the end of the program, participants have a desire to promote against the stigma of the mentally ill. They also develop a passion for humour and have a positive experience. The audience also

benefits through exposure to individual stories, resulting in a reduction of stigma.

Check out the link to the “Healing Through Humour” website on [www.cmhask.com](http://www.cmhask.com) or check out performances at <http://www.youtube.com/user/HealingThroughHumour>.

## TRANSITION MAGAZINE



Transition Magazine is a semi-annual publication of two kinds of works: those directly about mental health issues; and those about individuals' personal experiences of those same issues. Both kinds of works

celebrate lives in transit - lives of change, growth and transformation.

Transition Magazine enjoys a wide distribution locally, provincially and nationally.

Transition Magazine is available free of charge to members of CMHA Saskatchewan Division Inc.

In order to make the most effective use of charitable dollars, effective January 2011 a hard copy of the publication will only be sent out to individuals requesting to receive it in that format. Should you wish a “no charge” subscription, please call (306) 525-5601 or 1-800-461-5483 or e-mail [contactus@cmhask.com](mailto:contactus@cmhask.com). We will be happy to place you on our mailing list.

Transition Magazine is also available in PDF format on our website [www.cmhask.com](http://www.cmhask.com). If you wish to provide your e-mail address, we will be happy to send you a notification

when new issues are available.

## INDIVIDUAL & FAMILY SUPPORT

While the main focus of the work of CMHA (Saskatchewan Division) Inc. is education and public policy development on a provincial scale to assist those experiencing mental health issues, the staff at CMHA Division Office frequently have the opportunity to assist individual consumers and their family members on a wide variety of issues. The following is a brief sampling of the type of assistance provided by Division Office throughout the past year:

- Provided information to a consumer on how to file a complaint re psychiatric services.
- Provided information to an employer on how to support an employee experiencing mental health issues.
- Provided referral information regarding depression and stroke.
- Assisted employees regarding coping with mental health concerns and problems at work.
- Provided information to individuals on a wide variety of mental health topics such as depression, social anxiety, multiple personality disorder, bipolar disorder, etc.
- Assisted a consumer from Ontario re information on the SAID program re a possible move to Saskatchewan.
- Assisted a consumer who just moved from Alberta to get connected to the mental health system in Saskatchewan.

- Provided family members with information on a wide variety of mental health issues such as cognitive therapy for depression, timely referrals to Mental Health Clinic, depression and alcoholism, family members not taking medications, how to seek legal help, etc.
- Assisted family member with referral to psychiatrist who specializes in seniors with Alzheimer's Disease.
- Assisted family member with information/support re concerns regarding the level of programming available at the Regina Inpatient Unit.
- Assisted senior with information re long-term care.
- Assisted consumer who needed support re loss of her home to tax arrears.
- Assisted consumers with return to work issues.
- Assisted family members with referral to counseling.
- Assisted consumer with depression re applying for Social Assistance.
- Assisted consumer with information re assessment for tax credit.
- Assisted a landlord whose tenant was exhibiting symptoms of mental disorder.
- Assisted a consumer with issues re CPP disability benefits.
- Assisted a consumer with referral and assistance getting to an addictions centre.

The above is just an overview of the type of requests for individual and family support received at Division Office on a regular basis. Division Office staff also provide both

verbal and print information on a wide variety of mental health topics such as schizophrenia, bipolar disorder, depression, obsessive compulsive disorder, stress, workplace mental health, etc. on an almost daily basis.

## DIRECT SERVICE

### BATTLEFORDS BRANCH



Submitted by Brenda Kirtzinger, Executive Director

CMHA Battlefords Branch had another busy and prosperous year. Some of the highlights of our accomplishments are:

#### Social Recreation:

In order to accommodate the growing needs of this program, we posted a part-time Program Assistant position to allow the Program Coordinator office time for planning and coordination.

We appreciated the support of two summer students who assisted with many activities throughout the summer, including our annual one-week summer tour program.

We were also thankful that Prairie North Health Region provided one extra evening of weekly programming for our social/recreational programming. A total of 3093 registered participants (excluding drop-ins) took part in our evening and weekend programming. It is estimated that

approximately 360 drop-ins occurred throughout the year.

There were 278 social recreational programs held over the year, including one week-long tour and 12 mini tours.

#### TEP (Transitional Employment Program):

Another productive year was experienced by our TEP clients who in 2010-2011 provided service to:

- 19 yard maintenance clients
- 36 flyer deliver contracts
- 15 snow removal contracts, not including snow removal on 61 properties for the City of North Battleford.
- 17 other contracts including moving jobs, phone book delivery and sweeping, to name a few.
- Over 639 lunches served at our in-house lunch program.
- Over 200 days of cleaning the CMHA Battlefords Branch offices and operating our canteen.

#### Fundraising:

Strong community support was evident at all of our fundraising efforts this past year including:

- barbequed hamburger sales
- Cash Calendar sales
- casual Friday donations
- over 100 gifts generously donated by local businesses and community members for our annual client Christmas party and dance.

#### New Developments:

Some other events that set the stage for our year of progress included the following.

During Mental Health Week 2010, we held a

flag raising at City Hall in North Battleford, conducted a fundraising lunch, held a Friendship Tea and completed the second annual Walk for Awareness from Saskatchewan Hospital North Battleford to the CMHA Battlefords Branch office. We concluded Mental Health Week by holding the second annual Spring Fling Outdoor Dance in conjunction with Portage Vocational Services at the David Laird Campground.

Operational planning was conducted with staff in June 2010, followed by strategic planning with the Board in September 2010.

Our annual Christmas Dinner and Dance evening in December 2010 honoured both our clients and our volunteers. It was prepared, served and cleaned up by our Board of Directors and staff.

*We wish to thank all of our supporters and look forward to another fulfilling and challenging year of growth!*

Our Life Skills Development program, which was established in March 2010, has continued to grow and refine in 2010-2011.

In March 2011 we held a Winter Carnival for the youth in our community, which included both indoor and outdoor games and free hot dogs, cookies and hot chocolate to the children participating.

We wish to thank all of our supporters and look forward to another fulfilling and challenging year of growth!

## KINDERSLEY BRANCH

Submitted by Pam Welter, Branch Coordinator

Once again Kindersley Branch participated in a variety of safe community initiatives with our bike safety and farm safety exhibits. Our branch works on initiatives within the whole Safe Communities model to promote mental health and wellness through a comprehensive range of community-based services. Farm safety is important to our rural agricultural communities in prevention of accidents and having safe, mentally healthy families. Taking part in these programs and with our farm safety for kids program helps the branch link to our communities in the Health Region. About 200 kids went through our display on grain safety (grain suffocation), PTO safety, and played our “Wheel of Misfortune”, which was a hit with all the kids from ages 6 to 15.

Kindersley Branch also provided information and referrals regarding mental health needs and support in advocacy and coping skills as necessary, and as requested. The requests for counseling services as well as food and housing have increased. We receive an average of three requests per week. We were active in establishing and facilitation of a community garden in Kindersley. We are also active in the community initiatives to address the food security issues with the Kindersley Food Coalition (KFC).

Kindersley Branch takes part in a variety of fundraising initiatives, including Cash Calendars and bake sales, as well as sending out letters requesting donations.

Our Branch Coordinator and President have taken a crisis management course and are part of the TERT Team in the Health Region.

CMHA Kindersley Branch receives numerous

invitations throughout the Heartland Health Region to attend various events with our information and pamphlet display. This fall we were invited by the Town Council to attend an information and service session for the area. We also take part in the annual parade promoting our branch services and programs.

One of the community actions facilitated by CMHA Kindersley Branch is the Christmas Hamper Program. This is the longest running population health promotions program in the Health Region and unique to the area. Under this program, low income families can apply to receive a hamper for Christmas. Each family receives one month worth of groceries, a Christmas turkey, and gifts from Santa for the kids. This program is carried out in collaboration with numerous community groups. This year 122 families throughout the Heartland Health Region were supplied with a hamper. The program runs from September through to December from facilitation to completion just before Christmas.

## MOOSE JAW BRANCH

Submitted by Donna Bowyer, Program Director

Once again Moose Jaw Branch has undergone change. Donna and Dave were actively involved in a number of activities within the community.

Dave Moore took the lead with regard to the Seniors Mental Health Lens. He worked with local and provincial bodies to have them incorporate this into their planning of programs for seniors. Unfortunately, we found out that there was no longer funding available for the national project, and so it was left to what we could do on our own time and resources. We continue to encourage people to use this lens, but no

longer have the national connections for this project.

CMHA Moose Jaw Branch was part of a community initiative to bring an after school program to the South Hill Community. This program was funded through the Community Initiatives Fund and it ran from 2010 to February 2011. Parents found this to be a very valuable program, as we worked at teaching the children self-reliance skills. The first phase of the project was Grade 4 to 6, and the second phase was Grade 1 to 3. Unfortunately, we only had funding until the end of February. We may relook at this model in the future, but for now we are not looking at further funding.

CMHA Moose Jaw Branch continues to partner with the program for multicultural youth. This partnership includes the Multicultural Council, the Prairie South School Division, the Holy Trinity School Division, Mental Health and Addiction Services, RIC, and a number of other agencies. This program helps to transition new Canadian students that are aging out of high school or graduating into a career path that is reasonable for them. It may involve post-secondary, ABE, work or other career choices. This program continues to be very successful, although funding is constantly a concern.

The Branch also continues to work with the Asperger Parents in search of funding to provide socialization skills to young adults.

We have been very busy with presentations throughout the community. We presented in four of the high schools this year, as well as a number of elementary schools. In the high schools we did presentations on mental illness, as well as mental health issues. In the elementary schools we did the "I'm Thumbody" presentation (self-esteem for Grade 1-2) and CAPSS (Communication Skills Grade 5-6). We also had the opportunity to

take this to the Public and Separate Schools in Swift Current.

CMHA Moose Jaw Branch has also seen a change in staffing. Dave Moore has moved to a new position and Gayle Feist has been hired to assist the Program Director. We have also hired Tiffany Harder to work with the Multicultural Program. We were also fortunate to have had two students from the RPN program, who each spent three weeks working out of the Moose Jaw Branch. This brings some depth to the programs, as we are able to offer more opportunities in the schools.

The "Come Together" program continues to be active. We needed to move it to a new location this year, as the cost of using the church became more than we could afford. We now hold our meetings at the Resource Centre. The group meets once a month, with two birthday meetings each year. We also have some special events such as a summer picnic, Super Bowl party, Grey Cup party, Christmas party, karaoke party and a few others. These are times we all look forward to.

The "Moose Jaw Muse", our writing group, continues to function very independently. This is a group that is run by the participants with support from some very dedicated community volunteers. Ted Dyck continues to be the advisor to the group and his dedication and expertise are very much appreciated. In the fall they had their first retreat and the participants appreciated the opportunity and the skills they came away with. Another retreat is planned for fall 2011 and we hope to have participation from some other CMHA Branches that have writing groups.

We would also like to express our thanks to the people that look after seeing that our bingos continue. Without their support, I'm not sure we could still be taking advantage

of bingos as a source of funding.

Once again, CMHA Moose Jaw Branch looks forward to the coming year.

## PRINCE ALBERT BRANCH

Submitted by Doug Kinar, Executive Director

The Prince Albert Branch goals are to provide Advocacy, Education, Programs and Services.

### Advocacy:

Prince Albert Branch is continually advocating on behalf of people coping with mental illness through participation on a variety of committees in the Prince Albert community, including the Housing Advisory Committee and the Race Relations and Social Justice Committee.

### Education:

We offer Mental Health First Aid Workshops and ASIST workshops in Prince Albert and area. Since we have begun presenting ASIST workshops, we have trained over 500 people. We have also trained over 260 people in Mental Health First Aid. In addition, we also provide a Life Skills presentation delivered on request to SIAST, First Nations University and other interested groups. CMHA Prince Albert Branch presented at the Community Schools Conference earlier this year.

### Programs:



Our programs are running as usual. We have 45 mental health clients participating in



our vocational programming, which includes the lunch program, As Good As New Store, independent living program and the Homestead Quilting program.

2010 has seen a minimum of 90 distinct clients that make use of the Drop In center at least once per month. We have served over 9,100 meals, designed and sewn many quilts that make their way across Saskatchewan, and the As Good As New Store continues to serve the community providing quality used clothing.

### Services:

Our new eight-unit apartment complex is a great success. All eight units are occupied and the tenants are happy to be living there. The support worker is doing a wonderful job working with the clients.

Canada World Youth is currently operating in Prince Albert. There are nine Canadians and nine Nicaraguans volunteering in our community. We look forward to their next rotation in the fall.

Our dedicated staff, although few in number, continue to work together to make a positive impact in our community. On behalf of the CMHA Prince Albert Branch Board of Directors and myself, I would like to express our continued gratitude and appreciation for their contribution to the success of our organization. We would also like to thank all of our supporters and funders for their contributions. This includes: Prince Albert and Area United Way, Prince Albert and Area Community Foundation, Community Initiatives Fund, Prince Albert Parkland Health Region,

Victoria Square Compounding Pharmacy, Conexus Credit Union, Greenland Waste Disposal Ltd., the Kinsmen Club of Prince Albert and all of the individuals who have made donations specific to our organization.

Working together can and does make a difference!

## REGINA BRANCH

Submitted by Margaret Fern, Executive Director

The past year has been a busy one and saw a number of staffing changes at the Canadian Mental Health Association, Regina Branch. In the Pre-Vocational program, two new Program Assistants are in place and provide excellent support to the members and the Pre-Vocational Supervisor on a daily basis. In the Vocational program, we have welcomed a new Vocational Team Leader, a new Job Coach, and a transfer to Food Services for one employee. A staff member who had been away on a year of leave was promoted from the Pre-Vocational program to supervise our Janitorial/Housekeeping position. At the Administrative level, there has been a change in the Director of Finance position.

The Pre-Vocational program continues to provide a myriad of services on a daily basis to the people who find our Club a welcome haven on a regular basis, or just an occasional drop-in basis.

The Vocational program has become more focused and organized in terms of supporting interested members in working towards the goal of community employment.

We have welcomed presentations from the Canadian Diabetes Association, and from experts on changes to savings legislation that benefit persons living with mental

illness. We have partnered with the Regina Mental Health Clinic to run a three-month Leisure Program to provide evening leisure activities to members living in Approved Homes. This was extremely well received. Recently, we have partnered with the Regina Mental Health Clinic and the Saskatchewan Pharmacists Association to make the PACT program available to interested members. This is an educational program that incorporates nutrition and exercise with a smoking cessation program. One of our staff was trained to present it along with a pharmacist. At the conclusion of the 8 week program, several of our members had stopped smoking for about three weeks.

Our special events this past year have included in-house holiday lunches at Easter and Thanksgiving and a wonderful, catered Christmas dinner and dance. This past Easter we placed a note in the City Beat section of the Leader Post asking for donations of frozen turkeys for the Easter dinner and were delighted with the generous response from the Regina community.

This spring I have been invited to make presentations to businesses on the subject of worklife balance/mental health and I have enjoyed that opportunity to speak to people and advocate on behalf of persons living with mental illness.

My personal thanks of the Board of Directors of CMHA Regina Branch for all their support and wise direction, and to the CMHA Regina Branch employees who go the extra mile for our members many times each day.

CMHA Regina Branch has many friends and partners that enable us to continue our work:

- A special thank you to the wonderful parishioners of St. George's Orthodox Cathedral who have come to CMHA on

several occasions and provided a fabulous home cooked lunch for the members.

- As always, much thanks to the Board members and volunteers who help out on special occasions.
- Our appreciation to our funding partners: Regina Mental Health Clinic, United Way of Regina, Service Canada, CanSask and the City of Regina.
- Many members of the community or businesses in town donate food to us from time to time and it is always welcomed by our members.
- And a very special thank you to a ten year old girl with a generous soul and a kind heart. Please see the following letter as it appeared in the Regina LeaderPost:

*“A Light to the Lives of Others”*

*It is quite common to read letters in the LeaderPost about the generosity of Regina residents. Let me share a special story about the generous heart of a 10-year-old girl called Rileigh.*

*Rileigh was with her family in Disneyland a while ago and saw a homeless person lying on the street. She asked her parents a lot of questions about that situation and what happens to such people in Regina, and her parents described for her the services we have here (although we have not nearly enough).*

*Rileigh made a decision about her birthday, which was coming up: she contacted friends and family and explained to them that, instead of gifts, she would appreciate donations of money to the Canadian Mental Health Association (Regina Branch). Last Friday, Rileigh and her mom came to visit and presented us with the \$250 she had collected - which she wanted to go toward*

*food for the folks who use our services. She told us she did not need birthday presents as she felt she had “enough stuff” and preferred to help others with the donation. She was assured that the money will go toward the Easter lunch that we will be serving to 115 of our clients here April 27, a full-meal-deal turkey dinner.*

*We want to publicly express our appreciation to this amazing 10-year-old girl and all of her friends and family who made this happen. I think there are many of us in Regina who are lucky enough to be able to say, also, that we have “enough stuff” and might consider following the lead of Rileigh and raising money for our own favourite causes - and thus bring light to the lives of those less fortunate.*

*Thank you Rileigh. You are a true inspiration.*

Margaret Fern, Executive Director  
CMHA Regina Branch

## SASKATOON BRANCH



Submitted by Carole Duhaime, Executive Director

*Our mission...CMHA Saskatoon Branch exists to assist and support people with mental illness to maximize their potential and to achieve positive mental health in their lives as community members. The enhancement of mental health in the community is achieved through programs and services, public education and advocacy.*

Public Awareness:

Raising awareness about mental illness continues to be an important role for CMHA in the Saskatoon community. Over the past twelve months I have delivered 8 Mental Health First Aid courses to 115 people. Numerous presentations were given with the topics including Mental Health Matters - Let's Talk About It, Self-Care for the Caregiver, Mental Health Matters in the Workplace and the Schizophrenia Society Partnership presentations as well as participation in the United Way Speakers Bureau.

Vocational Team:

The Life Skills program provides an opportunity for individuals to learn how to develop skills needed to cope with daily living situations, gain personal awareness and develop ways to attain realistic goals.

CMHA's existing vocational services include intake, assessment and support for an average of 120 clients per year, who wish to be competitively employed or pursue higher education in order to improve vocational outcomes. Actively contacting and supporting individuals throughout the year was equivalent to 422 times each month. Our Job Developer visited 657 businesses, 228 of which were new connections. Not only does this position target the hidden job market to promote the hiring of our clients, it is also an opportunity to tell the business community about the services and support we provide.

Social Recreation Program:

Participants continue to show enthusiasm and attendance for

*“Variety’s the very spice of life, that gives it all its flavor.”*  
William Cowper

activities which promote physical fitness. Among the most popular are Tai Chi, Yoga, Monday night basketball and bowling. Did you know that bowling as a sport event has been traced back to 1366 in England, during the reign of King Henry VIII, and is believed to be one of the oldest sports in the history of the world? Over 100 million people in more than 90 countries practice the game, making it one of the most popular and universally loved forms of recreation on the planet.

Brain fitness activities help the mind process information more quickly, and more efficiently, as well as improving the ability to perform multiple tasks at the same time. Activities at CMHA fostering brain stimulation are quilting, scrap booking, bingo and writers’ group.

People’s health choices and practices are strongly influenced by the conditions of society and the environment where they live, learn, work and play - homes, schools, workplaces and community settings. CMHA aims to provide a positive, safe and welcoming environment physically, mentally, socially, intellectually and spiritually through activities such as walking in the field house to build physical endurance, yoga to promote flexibility and relaxation, learning a new skill such as photography or being part of a team bowling. Over the past year, individuals participated in activities 3220 times!

A huge part of our success is due to the overwhelming number of volunteer hours (891 to be exact); individuals dedicated to providing their time, talent and enthusiasm to assist with providing quality, ongoing programming.

## SWIFT CURRENT BRANCH

Submitted by Ruth Smith, Executive Director

Much time has been spent looking for funding and finding ways to make ourselves more efficient. I have applied for many different grants - have received a few and have been turned down for a few as well.

The core of the Swift Current Branch programming is our meal program, with educational, social/recreational and vocational programming also holding significant importance. We normally feed between 20 to 25 people for lunch and 4 to 8 people for breakfast. This number has been slowly increasing over the last year. It has been harder this year to find donated beef because of the rise in prices but we have started a partnership with one of the local abattoirs and will see where this takes us. This year a brother of one of our clients planted potatoes for us, which has proven very helpful. We still receive donations from the community such as "left overs" from funerals, fall suppers, etc. but this slows down somewhat in the spring.

Swift Current Branch has two programs that are financially self-supporting and two that are run out of the CMHA building that I was able to obtain grants for. Our vocational program suits just about every need if a client chooses to take part. Our social/recreational program is broad and covers diverse needs. The quit smoking group has been very successful and we have two clients who have been "smoke free" for over five years, some who have quit for a lesser time, and some who are still trying. Clients who have been successful offer their experience, strength and hope to those still struggling. We also have guest speakers come in to offer their expertise (RDSP, nurses, Healthy Lifestyles, dieticians, addictions counselors). Whatever the

special need, we try to find someone who has experience in the area and have them come in to share their knowledge.

Volunteers are essential to making our programs a success. Bill teaches our writing group, Deb helps with computer needs, people come in and do armchair visits, and Benita does our bookkeeping and tax receipts. We could not run such broad programs without the assistance of our volunteers and the community. We also had the opportunity to work with the Katimavik program again this past year and I have applied for 2011. Swift Current Branch is no longer working bingos as it has become too difficult to find volunteers for this work.

The Swift Current Branch will once again be hosting our Mayor's Lunch and Walk-a-Thon in May. We will also be the host branch for the Provincial Conference and AGM in June.

We continue to carry out improvements on our building and are in the process of getting the windows changed. We hope the new windows will help to keep the building warmer in the winter and cooler in the summer.

Swift Current Branch continues to work very closely with our community partners: McKerracher, Partners in Employment and the Salvation Army. It has been a privilege to work with such caring people.

## WEYBURN BRANCH

Submitted by Gladys Perepeluk, Program Director



It is hard to believe that 18 years have passed since I was hired as the Director of the CMHA Weyburn Branch. As I write my final report in this role, and reflect on the past 18 years, I hope that I have given back at least a small measure of what I have gained through the opportunities of working as your Program Director.

The support of the Weyburn community has been outstanding with their monetary donations, food donations and overall acceptance of people with mental illness. Through this past year it has been wonderful to work with Troy Kramm, and now Debra Acton as well. Troy has enhanced the Vocational Program by coming up with new ideas and creating consistency among clients and work loads. Due to the increase in monetary funds coming into the Centre, we are able to offer quality recreation time and outings.

Programming continues to be a success, with Vocational and Pre-Vocational excelling. Our four-day-a-week meal program is ongoing with regular good attendance. During my time here I have seen the consumers' progress artistically and have seen how much they have improved their skills.

Finally, I want to thank the consumers for their hard work in helping CMHA move forward and in making it what it is today. I will be forever grateful to Susan Grohn,

Velda Coulter and Erskine Sandiford for their ongoing support and for allowing me to do my job. In conclusion, I would also like to thank Joan Kilbride for her support, friendship and at times, for just listening to me vent.

## ADMINISTRATION

## RESOURCE DEVELOPMENT

Submitted by Joan Kilbride, Director of Resource Development

Over the years, CMHA Saskatchewan Division has seen its base of support grow in the community. Important fundraising and awareness raising events like the Teddy Bear Affair, our Direct Mail campaigns and the Cash Calendar lottery continue to grow, fostering new, mutually beneficial relationships with local business and decision makers. Without the consistent financial support of our partners and sponsors, we would not have the kind of successful fundraisers and "friend raisers" we have at present. We are so grateful to those organizations and individuals who give generously to our events. Through their support, these partners show they recognize the importance of mental health and realize the significant position the CMHA plays in the promotion of mental health.

The public awareness media campaigns associated with the annual Teddy Bear Affair Dinner and Auction and the Cash Calendar Lottery, have made a significant difference to the overall success of these projects. CMHA received well over \$40,000 in-kind support from the Star Phoenix, Global and C95 in 2010. This support is invaluable for presenting our message to past, present and future supporters of the Association.

The Association's volunteers have been

essential to our fundraising efforts as well. A select group of dedicated volunteers continue to be one of CMHA's most valued resources.



### Cash Calendar

The Cash Calendar, which displays the artwork of people who use the services of the CMHA across the province, creates awareness of the many talents people experiencing mental health problems possess.

For over 20 years the CMHA Saskatchewan Division has raised funds through the sale of our lottery Cash Calendar. This year the calendar sold for \$35 and offered over \$71,000 in prizes.

We would like to express our sincere appreciation to the dedicated sales team, delivery groups and the CMHA Branches that contributed to the success of the 2010 Cash Calendar project.

### Teddy Bear Affair

This event is unique to our Association. Held in Saskatoon in February, the winter picnic and auction revolves around the central concept of "a bit of summer in the midst of winter - a way to chase away those winter blues".

Once again the auction featured unique teddy bears dressed by the Sask-Tel

Pioneers, the West Jet magic heart raffle, a round trip for two provided by Via Rail, as well as celebrity items and silent and live auction items donated by local and provincial businesses and corporations.

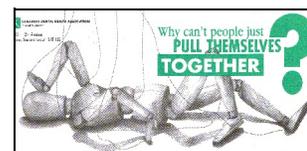
The Teddy Bear Affair is indeed an appropriate fundraising opportunity for the CMHA. By suggesting comfort, safety and personal, loving contact, the teddy bear image is a symbol of hope working against the pain of dislocation and isolation, often debilitating obstacles for people with mental illnesses.



Due to the hard work and dedication of our many volunteers, the event continues to be a successful fundraiser. As special thanks to our loyal auctioneers, Ken McCullough and Richard Sawarsky, who generously give of their time and energy, so necessary to ensure the success of this event.

### Direct Mail Campaign

CMHA has developed an effective direct mail campaign, which continues to raise funds for the Association, as well as providing public education.



### Bingo

The Canadian Mental Health Association, Saskatchewan Division Inc. continues to see a modest income from the proceeds of bingo generated at the Centennial Bingo Hall. Thank you to our group of very dedicated volunteers who have continued to support us throughout the years.

## FINANCIAL STATEMENTS

Canadian Mental Health Association (Saskatchewan Division) Inc.  
Financial Statements  
March 31, 2011

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**INDEPENDENT AUDITORS' REPORT**

To the Members  
Canadian Mental Health Association (Saskatchewan Division) Inc.

We have audited the accompanying financial statements of the **CANADIAN MENTAL HEALTH ASSOCIATION (SASKATCHEWAN DIVISION)** which comprise the balance sheet as at March 31, 2011 and the statements of operations and net assets and cash flows for the year then ended, and a summary of significant accounting policies and other explanatory information.

*Management's Responsibility for the Financial Statements*

Management is responsible for the preparation and fair presentation of these financial statements in accordance with Canadian accounting standards for not for profit organizations, and for such internal control as management determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

*Auditors' Responsibility*

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with Canadian generally accepted auditing standards. Those standards require that we comply with ethical requirements and plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditors' judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. An audit also includes evaluating the appropriateness of accounting principles used and the reasonableness of accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our qualified audit opinion.

*Basis for Qualified Opinion*

In common with many non-profit organizations, the association derives a portion of its revenue from cash receipts, the completeness of which is not susceptible to satisfactory audit verification. Accordingly, our verification of these revenues was limited to the amounts recorded in the records of the association and we were not able to determine whether any adjustments might be necessary to revenues, excess of revenues over expenditures, assets and surplus.

*Qualified Opinion*

In our opinion, except for the effects of the matter described in the Basis for Qualified Opinion paragraph, the financial statements present fairly, in all material respects, the financial position of the **CANADIAN MENTAL HEALTH ASSOCIATION (SASKATCHEWAN DIVISION) INC.** as at March 31, 2011 and its financial performance and its cash flows for the year then ended in accordance with Canadian accounting standards for not for profit organizations.

  
Dudley & Company  
Chartered Accountants LLP

Regina, Saskatchewan  
May 25, 2011

**CANADIAN MENTAL HEALTH ASSOCIATION  
(SASKATCHEWAN DIVISION) INC.**

Balance Sheet  
As at March 31, 2011

**ASSETS**

	2011	2010
<b>CURRENT ASSETS</b>		
Cash and term deposits	\$439,982	\$423,002
Accounts receivable	47,249	31,778
Receivable from branches	12,193	22,857
Prepaid expenses	<u>8,827</u>	<u>9,158</u>
Total Current Assets	508,251	486,795
<b>PROPERTY AND EQUIPMENT - note 4</b>	<u>268,302</u>	<u>248,275</u>
Total Assets	<u>\$776,553</u>	<u>\$735,070</u>

**LIABILITIES AND NET ASSETS**

<b>CURRENT LIABILITIES</b>		
Accounts payable and accrued liabilities	\$ 82,836	\$ 95,862
Deferred revenue - note 10	49,560	47,682
Payable to branches	0	96
Current portion of long term liabilities - note 5	<u>22,135</u>	<u>12,935</u>
Total Current Liabilities	154,531	156,575
<b>LONG TERM LIABILITIES - note 5</b>	<u>83,876</u>	<u>86,490</u>
Total Liabilities	<u>238,407</u>	<u>243,065</u>
<b>NET ASSETS</b>		
Invested in property and equipment	268,302	248,275
Appropriated - note 6	119,530	86,530
Unappropriated - page 3	<u>150,314</u>	<u>157,200</u>
Total Net Assets	<u>538,146</u>	<u>492,005</u>
Total Liabilities and Net Assets	<u>\$776,553</u>	<u>\$735,070</u>

**SICK LEAVE BENEFITS - note 8**

**COMMITMENTS - note 9**

Approved on behalf of the Board of Directors:

\_\_\_\_\_

The accompanying notes form an integral part of these financial statements.

**CANADIAN MENTAL HEALTH ASSOCIATION  
(SASKATCHEWAN DIVISION) INC.**

Statement of Operations and Net Assets  
For the year ended March 31, 2011

<b>REVENUE</b>	<u>2011</u>	<u>2010</u>
Government grants:		
Saskatchewan Lotteries	\$ 60,950	\$ 60,950
Community Initiatives Fund	343,199	338,493
Saskatchewan Health, core funding	237,497	235,160
Donations in-kind	3,464	0
Other grants - note 7	84,925	59,308
Fundraising projects	434,555	462,370
Rental	34,937	34,506
Community fund appeals	23,267	25,411
Other revenue and recoveries	51,501	12,501
Branch administration recoveries	13,712	15,645
Donations	14,502	12,359
Interest	1,488	1,904
Total Revenue	<u>1,303,997</u>	<u>1,258,607</u>
 <b>EXPENSES</b>		
Salaries and benefits		
Executive and general	297,077	286,995
Gambling program	210,703	201,253
Resource development	150,164	151,755
Public education	50,026	15,823
Research	0	3,658
General and administrative	125,370	123,311
Fundraising projects	187,354	195,967
Public education	39,922	27,277
Occupancy	64,138	62,470
Gambling program	72,873	86,375
Contributions to branches	5,138	40,201
Research	0	6,249
Amortization	22,796	22,980
Interest on long term debt	6,938	7,713
Gifts to qualified donees	65	50
Public service announcements	25,292	0
Total Expenses	<u>1,257,856</u>	<u>1,232,077</u>
 <b>EXCESS OF REVENUE</b>	 46,141	 26,530
 <b>NET ASSETS, BEGINNING OF YEAR</b>	 <u>157,200</u>	 <u>120,001</u>
	<u>203,341</u>	<u>146,531</u>
 <b>(INCREASE) DECREASE IN APPROPRIATION</b>		
Investment in property and equipment	( 20,027)	5,570
Building Fund	( 3,000)	( 7,000)
Program Fund	( 15,000)	0
Mental Health Development Fund	( 15,000)	0
Problem Gambling Fund	0	12,099
	<u>( 53,027)</u>	<u>10,669</u>
 <b>NET ASSETS, END OF YEAR</b>	 <u>\$ 150,314</u>	 <u>\$ 157,200</u>

The accompanying notes form an integral part of these financial statements.

**CANADIAN MENTAL HEALTH ASSOCIATION  
(SASKATCHEWAN DIVISION) INC.**

Statement of Cash Flows

For the year ended March 31, 2011

	<u>2011</u>	<u>2010</u>
<b>CASH FLOWS FROM (FOR) OPERATING ACTIVITIES</b>		
Cash receipts from grants	\$728,063	\$778,885
Cash receipts from self-generated revenues	575,714	356,723
Cash paid to suppliers	( 518,801)	( 354,940)
Cash paid to employees and equivalents	( 729,772)	( 637,949)
Interest received	1,488	2,769
Interest paid	<u>( 6,938)</u>	<u>( 7,713)</u>
Cash Flows From (For) Operating Activities	<u>49,754</u>	<u>137,775</u>
<b>CASH FLOWS FROM (FOR) INVESTING ACTIVITIES</b>		
Additions to property and equipment	<u>( 39,360)</u>	<u>( 17,410)</u>
<b>CASH FLOWS FROM (FOR) FINANCING ACTIVITIES</b>		
Increase (decrease) in long term debt	<u>6,586</u>	<u>( 31,019)</u>
Net change in cash position	16,980	89,346
<b>CASH POSITION</b> - beginning of year	<u>423,002</u>	<u>333,656</u>
- end of year	<u>\$439,982</u>	<u>\$423,002</u>

The accompanying notes form an integral part of these financial statements.

**CANADIAN MENTAL HEALTH ASSOCIATION  
(SASKATCHEWAN DIVISION) INC.**

Notes to the Financial Statements  
March 31, 2011

**1. GENERAL**

The association is incorporated under the Non-Profit Corporations Act of Saskatchewan. It is a volunteer based organization that, together with its 15 branches and rural committees, supports and promotes the rights of persons with mental illness to maximize their full potential through education, recreation opportunities, advocacy programs and services, and promotes and enhances the mental health and well being of all members of the community.

As a non-profit organization, the association is exempt from income taxes under Paragraph 149(1)(L) of the Income Tax Act.

**2. BASIS OF PRESENTATION**

The Saskatchewan Division is comprised of the division office in Regina and 15 branches and rural committees. These financial statements account for the operations of the division office including the Problem Gambling Community Development Program and administrative services for the branches. The financial statements also account for operations on a division-wide basis including public education, advocacy, research and public awareness.

**3. SIGNIFICANT ACCOUNTING POLICIES**

a) Property and Equipment

Property and equipment are recorded at cost. Amortization is calculated at a rate of 5% on buildings and 20% on equipment and vehicles using the declining balance method.

b) Fund Accounting

The association follows the deferral method of accounting for contributions. Restricted contributions are recognized as revenue in the year in which the related expenses are incurred. Unrestricted contributions are recognized as revenue when received or receivable if the amount to be received can be reasonably estimated and collection is reasonably assured. Investment income is recognized as revenue when earned.

c) Financial Instruments

It is management's opinion that the association is not exposed to significant interest, currency or credit risks arising from its financial instruments and that the fair value of the financial assets and liabilities approximates their carrying value due to their short term nature.

d) Use of Estimates

The amounts recorded for the allowance for doubtful accounts and estimated useful life of capital assets are based on management's best estimate. These estimates are reviewed periodically and as adjustments become necessary they are reported in earnings in the period in which they become known. By their nature, estimates are subject to measurement uncertainty and the effect on the financial statements of any changes in estimates could be significant.

**CANADIAN MENTAL HEALTH ASSOCIATION  
(SASKATCHEWAN DIVISION) INC.**

Notes to the Financial Statements  
March 31, 2011

4. PROPERTY AND EQUIPMENT	2011		2010	
	Cost	Accum. Amort.	Cost	Accum. Amort.
Land	\$ 13,635	\$ 0	\$ 13,635	\$ 0
Buildings	458,328	258,689	418,968	249,216
Equipment	119,764	77,604	116,300	67,497
Vehicle	<u>27,926</u>	<u>15,058</u>	<u>27,926</u>	<u>11,841</u>
	<u>\$619,653</u>	<u>\$351,351</u>	<u>\$576,829</u>	<u>\$328,554</u>
Net Book Value		<u>\$268,302</u>		<u>\$248,275</u>

During the year, office equipment valued at \$3,464 was donated to the organization.

5. LONG TERM LIABILITIES	2011	2010
a) Royal Bank		
- fixed mortgage, bearing interest at 6.86%, payable in monthly installments of \$1,617 including interest, secured by property and maturing June 1, 2015.	\$ 86,374	\$ 99,425
b) Royal Bank		
- monthly payments of \$741 including interest at 4.21%, secured by general security agreement, maturing August 1, 2013.	<u>19,637</u>	<u>0</u>
	106,011	99,425
Less current portion	<u>22,135</u>	<u>12,935</u>
	<u>\$ 83,876</u>	<u>\$ 86,490</u>

Principal payments due in each of the next five years based on the above terms are approximately as follows:

2012	\$ 22,135
2013	23,473
2014	18,790
2015	17,081
2016 and beyond	<u>24,532</u>
	<u>\$106,011</u>

6. APPROPRIATED NET ASSETS	Problem Gambling Fund	Building Fund	Program Fund	Mental Health Fund	Total
Balance, beginning of year	\$ 0	\$ 30,016	\$ 28,257	\$ 28,257	\$ 86,530
Increase (decrease)	<u>0</u>	<u>3,000</u>	<u>15,000</u>	<u>15,000</u>	<u>33,000</u>
Balance, end of year	<u>\$ 0</u>	<u>\$ 33,016</u>	<u>\$ 43,257</u>	<u>\$ 43,257</u>	<u>\$119,530</u>

**CANADIAN MENTAL HEALTH ASSOCIATION  
(SASKATCHEWAN DIVISION) INC.**

Notes to the Financial Statements  
March 31, 2011

**7. OTHER GRANTS**

Other grants are comprised of the following:

	<u>2011</u>	<u>2010</u>
Eli Lilly	\$ 9,757	\$ 4,250
Sask. Arts Board	0	7,000
Sask. Liquor and Gaming Authority	36,593	28,258
Sask. Parks and Recreation Assoc.	0	9,000
The Co-operators	35,000	7,500
Sask. Assoc. for Community Living	0	3,300
Other	<u>3,575</u>	<u>0</u>
Total Other Grants	<u>\$ 84,925</u>	<u>\$ 59,308</u>

**8. SICK LEAVE BENEFITS**

The corporation provides non-vesting sick leave benefits to its employees pursuant to union agreements and administrative policies. At March 31, 2011, management estimates that accumulated sick leave credits total \$214,521.

**9. COMMITMENTS**

The division has entered into operating leases for office equipment, the annual rental for which amounts to \$5,079 to 2014.

**10. DEFERRED REVENUE**

Deferred revenue consists of the following:

	<u>2011</u>	<u>2010</u>
Eli Lilly	\$ 7,309	\$ 17,066
The Co-operators	37,500	22,500
Other	<u>4,751</u>	<u>8,116</u>
Total Deferred Revenue	<u>\$ 49,560</u>	<u>\$ 47,682</u>

**11. PENSION CONTRIBUTIONS**

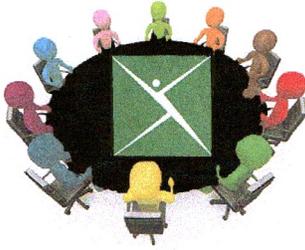
Employees become eligible for pension after 1820 hours of service. The plan is a defined contribution registered pension plan. The employer pays 6% of gross salary into the plan on a monthly basis.

	<u>2011</u>	<u>2010</u>
Total Contributions During the Year	<u>\$ 45,976</u>	<u>\$ 34,565</u>

**12. CAPITAL MANAGEMENT**

The entity considers its capital to be the balance maintained in its Unappropriated Net Assets. The primary objective of the entity is to invest its capital in a manner that will allow it to continue as a going concern and comply with its stated objectives. Capital is invested under the directions of the board of directors with the objective of providing a reasonable rate of return, minimizing risk and ensuring adequate liquid investments are on hand for current cash flow requirements. The entity is not subject to any externally imposed requirements of its capital.

## 2010-2011 PROVINCIAL BOARD OF DIRECTORS



Darrell Downton, President  
Susan Grohn, Past President  
Grant Rathwell, Vice-President  
Sharon Lyons, Treasurer

Members at Large: Krista Bakke  
Doreen Bell  
Noah Evanchuk  
Bryan Leier  
Kathleen Thompson  
Lindy Thorsen

Regional Delegates: Mike Petty  
Bill Pringle  
Erskine Sandiford  
Michael Seiferling  
Fred Stephens

## CMHA (SASKATCHEWAN DIVISION) INC. DIVISION OFFICE STAFF



David Nelson, RPN, RSW  
Executive Director

Joan Kilbride, Director of Resource Development

Don Powers, Director of Finance

Donna Bowyer, Director of Friends for Life

Shauna Altrogge, Director, Problem Gambling Community Program  
Rachel Clare, Problem Gambling Community Development Coordinator - Saskatoon  
David Jones, Problem Gambling Community Development Coordinator - Regina  
Elizabeth Deobald, Problem Gambling Community Development Coordinator - Prince Albert

Phyllis O'Connor, Executive Secretary  
Sharon Wilson, Payroll/Benefits Clerk  
Lynn Hill, Receptionist/Editorial Secretary for Transition Magazine

# Mental Illness Affects Us All

## How Can You Help Make a Difference?



Becoming a member of CMHA (Saskatchewan Division) Inc. is a good way to show your support. Memberships are available in the following categories:

Participant (consumer)	\$2.00
Individual	\$15.00
Supporting	\$30.00
Professional	\$50.00
Lifetime	\$150.00

There are also different levels of annual support:

Platinum Donor	\$1,000.00 +
Gold Donor	\$750 - \$999
Silver Donor	\$500 - \$749
Bronze Donor	\$300 - \$499
Supporter	\$100 - \$299
Donor	\$10 - \$99

Some of our supporters have chosen to set up pre-authorized monthly donations (withdrawn on the 15<sup>th</sup> or 30<sup>th</sup> of each month).

Still others have shown their support by donating through a will or through gifts of life insurance.

Donation is easy. Just visit our website at [www.cmhask.com](http://www.cmhask.com) and click on the Canada Helps button or contact us at:

CMHA (Saskatchewan Division) Inc.  
2702-12th Avenue  
Regina, SK S4T 1J2  
(306) 525-5601 or 1-800-461-5483  
[contactus@cmhask.com](mailto:contactus@cmhask.com)

No matter what the manner of support, CMHA (Saskatchewan Division) Inc. sincerely appreciates each and every donation in support of those we serve.



The Canadian Mental Health Association (Saskatchewan Division) Inc. is a charitable organization dependent upon donations, memorial gifts and bequests, United Way, Donor's Choice and Sask. Lotteries for support.



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