



# Annual Report – 2013-2014



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

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## Global Ends Policy and 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 Grant Rathwell

On this early April afternoon, surrounded by sweet sounds of spring, a sense of renewal is in the air! Again this year, we have much to celebrate as our mental health "family" comes together for our Annual General Meeting and Provincial Conference and to review the many activities and accomplishments that have helped us to be a strong, vibrant organization, committed to preventing mental illness and promoting mental health. Consumers, volunteers, funders and benefactors, and staff members from across Saskatchewan will come together in Regina on June 27<sup>th</sup> to share stories and celebrate the strong connections that unite us in one cause: mental health for all.

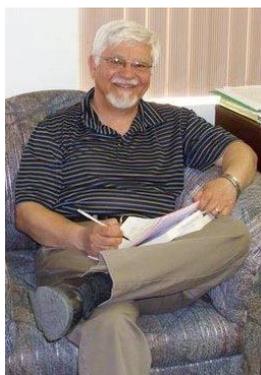
As we review the reports from various service sectors comprising CMHA Saskatchewan Division, I trust we will all share a strong sense of accomplishment and encouragement, united as one family, working together to improve mental health for all.

On behalf of our Board of Directors, I would like to sincerely thank our government and corporate funders, all of you who have supported us financially and otherwise, all of our staff throughout our various branches, and the many volunteers who have generously given of their time and talents on our behalf. Special thanks and appreciation are extended to David Nelson and the staff at Division Office for their excellent work. We appreciate the respectful, effective dialogue experienced this past year with our National CEO Peter Coleridge and the National Office staff. Thanks are also extended to our National Board Members, who continue to seek needed changes to help make CMHA more viable and effective as the national voice of our organization. Last, but not least, thank you to my fellow Board members for their support, guidance and thoughtful contributions during the past year.

Welcome one and all! Thank you for your interest and presence at our 2014 AGM and Provincial Conference profiling our Justice Community Support Program. Enjoy the day! Best wishes in our continuing journey together.

## Executive Director's Report

Submitted by Dave Nelson



A great deal of activity has marked the past year.

Implementation of our new Justice Community Support Program is well under way with over two-thirds of our client spaces filled. Kim Hoffman (Director), Garrett MacNaull, Nicole Buday and Lesley Aimoe are doing a great job of getting this program off the ground.

An expansion of our Gambling Awareness Program has resulted in our new Communications Coordinator for the program providing a great update to all our communications and website needs. We welcome Tricia Martin to this position.

As well, Lynn Hill has moved into a well-deserved retirement after 14 years of dedicated service to our Association. We wish her well and welcome Stacy Shields who is taking over as Receptionist at Division Office.

Our Association continues to advocate for improvements to the mental health system in our province, and has participated in the input sessions for the Mental Health and Addictions Action Plan held in Regina in the middle of April.

We also continue to sponsor our Coordinator, Tanya Condo, for the Mental Health Coalition to provide for a broader advocacy effort than only one agency or organization can do on its own. Tanya also functions as our Systems Navigator to help persons whenever possible who are looking for direction in a fragmented system.

In all, it has been a very active and productive year and we look forward to further enhancements to the Mental Health and Addictions system when recommendations to the Mental Health and Addictions Action Plan come out.

Have a great summer everyone!

## PUBLIC POLICY DEVELOPMENT

### COMMUNITY PARTNERSHIPS

The Canadian Mental Health Association (Saskatchewan Division) Inc. recognizes the value of collaboration and cooperation with other community groups in our efforts to provide and to advocate for improved services for individuals with mental health issues. To this end CMHA Saskatchewan has partnered over the years with a variety of community groups.

One of these partnerships has been with DISC (Disability Income Support Coalition). DISC is made up of a large cross section of disability advocates, consumers and organizations from across Saskatchewan who are committed to advocating for a respectful, dignified and adequate income support system. DISC members have joined together to speak as one voice, working toward a distinct (or separate) income system for people with disabilities. The major result of this collaborative effort has been the establishment of the SAID program (Saskatchewan Assured Income for Disability). More work is needed before SAID is fully operational. DISC continues to have a role on the Program Implementation Advisory Team and will continue to work toward an adequate income and fair assessment process.

CMHA Saskatchewan Division also plays an active role in PIND (Provincial Interagency Network on Disabilities). PIND works to promote positive initiatives that allow for the full and equal citizenship of people with disabilities in their communities. The objectives of PIND are:

- To share information on programs, services, initiatives and concerns amongst PIND members;
- To encourage networking with disability related organizations across Saskatchewan and other provinces as deemed appropriate;
- To work collaboratively on issues affecting persons with disabilities;
- To participate in critiquing/evaluating programs and services for people with disabilities and provide the feedback to the appropriate government officials and employees;
- To recommend initiatives that would meet the identified needs of people with disabilities to the appropriate government officials and departments;
- To publicly advocate on issues concerning all people with disabilities when appropriate.

CMHA Saskatchewan Division continues to take a lead role in the Saskatchewan Mental Health Coalition, a nonpartisan advocacy network of individuals, organizations and families with a stake in the field of mental well being. Along with educating the public about mental illness and mental health issues, the Coalition advocates for increased resources for the mental health system. They also encourage and conduct research to assess the effectiveness of all programs. The priority of the Saskatchewan Mental Health Coalition is to request that the Government of Saskatchewan and the mental health community

develop a comprehensive Mental Health Plan for Saskatchewan that builds on the work already done by the Mental Health Commission of Canada. Further information on the work of the Mental Health Coalition is available at [www.saskmentalhealthcoalition.ca](http://www.saskmentalhealthcoalition.ca)

## OTHER PUBLIC POLICY DEVELOPMENT ACTIVITIES

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

- Participation on the Psychiatric Nursing Advisory Committee
- Meetings with MLA re advocacy for Mental Health Coalition
- Attended meeting with Sask. Party Caucus on Human Services
- Attended announcement by the Minister of Health re Mental Health & Addictions Action Plan
- Filmed video re mental health with SIAST
- Participated in CMHA National Senior Management Team meetings and teleconferences
- Meetings re Mental Health Disposition Court
- Met with senior health/mental health official re mental health priorities and issues
- Meeting with representative from Australia re farm stress and discussions re our Systems Navigator, Mental Health Coalition and other activities
- Meeting with Minister of Health on a wide range of mental health related issues.

Public policy development activities continue to form a large part of the work at CMHA Saskatchewan Division. The need remains urgent to get our message out there to advocate for the needs of some of the province's most vulnerable citizens.

## PUBLIC EDUCATION AND AWARENESS

### Friends for Life

Submitted by Donna Bowyer, Director



Once again this year, we are very fortunate to have had business recognize the value and importance of mental health and understand the struggles people have with mental illness. Every organization I have worked with over the course of this year has demonstrated more compassion and a true desire to make things different from what they have been in the past. Organizations no longer want to ignore or pretend mental illness is rare. They no longer want to stigmatize people with mental illness. They want to make changes in their organizations that will make a difference. I have been presenting to major organizations when a manager has disclosed to fellow workers that she has a mental illness, and that she has to work daily to ensure she stays healthy. I attended an organization where they got all the managers together to take Mental Health First Aid training to ensure they provide a healthy environment for their staff. They want to do it right. The change I have seen is genuine. People truly want to make a difference; it is not just lip service. They want to make policies that are supportive and they want to eliminate the stigma that is attached to people with mental illness at all levels of the organization. Managers are accepting the responsibility that they are the role models for the staff when it comes to how we treat and value an employee that has a mental illness.

Communities also want to take the lead. It is inspiring to go into a community that is hosting training on mental illness and to see people come together from different parts of the community to take an issue like suicide and say, "We do not want to lose one more person to suicide. What can we do?" This program is not only making a difference here, but it also translates elsewhere as well. In one of the open sessions I did in Regina, a participant came up to me after to talk. He was a teacher from China who is studying at the University in Regina. He was so excited about what he had learned. He said they are not learning about life in the way Friends for Life presents the information. He wanted to take back whatever he can to his community to start to teach people about mental health and the things we can do to make a difference in our lives.

Over the last year I attended 99 events, including a number of radio interviews and displays. There were 2936 people that attended presentations over the year. These varied in length from an hour to two days. The shift that I have seen is that people are coming to us to ask for training, and we no longer need to engage people to help them realize the value in learning more about mental illness and mental health.

*"...the momentum of embracing mental health and mental illness training is growing. There is new insight and recognition that we can no longer hide it in a back room."*

It feels the momentum of embracing mental health and mental illness is growing. There is new insight and recognition that we can no longer hide it in a back room. People with mental illness are no longer prepared to be marginalized. They want to be recognized for who they are and for their contribution to the community and workplace. It is through the bravery of the people prepared to be identified that these changes will happen. Every day I am in amazement at the strength and bravery of people, not only with their struggle, but with their openness and desire to have people truly understand.



Gambling  
Awareness  
Program

Submitted by Shauna Altrogge, Director

2014 marks the **20th anniversary** of the inception of this program which educates people about responsible gambling and addresses the social impacts of problem gambling. To honor this landmark accomplishment we wanted to reflect on our rich history and achievements, as well as the future of the program. Beginning in the summer of 2013 we embarked on a journey of rebranding, in order to ensure we are reflecting both our purpose and passion in our program name and logo.

**Rebranding** has been an exciting venture - complete with a new name & logo, display banners, and a range of supporting resources such as GAP booklets, promo cards, and promotional items to distribute during presentations, health fairs, and community events.

Joining our team this year was Jackie Phillips, Northern Coordinator, and Tricia Martin, our new Communications Coordinator to complement our team of seasoned staff David Jones and Rachel Clare.

Looking for ways to *shout out* to the larger community about GAP was a key facet to the rebranding. **Advertising** included a press release to the Saskatchewan Weekly Newspaper Association, an ad in the Saskatchewan Teachers Federation Bulletin and the creation of an electronic newsletter to promote our new name and invite provincial interest in the program.

This year, GAP delivered **216 community-based presentations**, surpassing our target by 26%! This is likely attributed to a full (and dedicated) staff team and the additional communications/advertising being developed as a result of our new Communications position. Staff had a presence at **35 display events** across Saskatchewan.

GAP was involved with the CMHA Saskatchewan **Division website** rebuild and Tricia was happy to lend her expertise on the initiative. Feedback has been positive!

**Youth presentations** were redeveloped to align with provincial curriculum (a big plus for educators), fall in line with our rebranding, enhance the visual aspects of the power points, and meet 4 key objectives. This is part of a larger strategy in which we 'anchor' key messages and evaluate students on the key messages, to provide data to help measure our effectiveness and impact with students.

During **Responsible Gambling Awareness Week May 4-10** staff will be busy attending a range of events with GAP resources and new banner bugs.

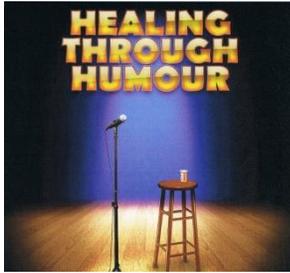
Interest has been shown in Regina and Prince Albert to see the **Problem Gambling Committees** start up again. Saskatoon has remained consistent over the years with dedicated members that created a new website, set up displays, and had an active role during Responsible Gambling Awareness Week.

The **VLT Outreach Project**, a joint project with SLGA, which involves having a real VLT on site during the larger display events has been well received. The GAP Team offers information through a hands-on experience about randomness, house advantage, illusions of control, and dispels common myths associated with the machines that can have a real impact on how someone plays the machine.



## Healing Through Humour

Submitted by Ian Morrison, Program Facilitator



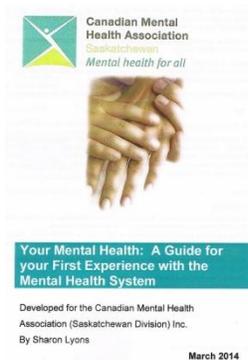
Healing Through Humour is a joint project of CMHA Saskatchewan Division and the Schizophrenia Society of Saskatchewan, designed to teach people living with mental illness and mental health issues the art of comedy. It also breaks down barriers of discrimination and builds self esteem through public performance.

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

Healing Through Humour has performed multiple shows in the four years of their existence, and has made two films in the summers of 2012 and 2013. They are always looking for new members to participate in the program.

Healing Through Humour has several projects in the proposal stages and if you would like to keep up to date on the group you can visit: [www.healingthroughhumour.com](http://www.healingthroughhumour.com)

## Your Mental Health: A Guide for your First Experience with the Mental Health System



In March 2014 CMHA Saskatchewan Division released the first edition of “Your Mental Health: A Guide for your First Experience with the Mental Health System”, which was developed by Sharon Lyons.

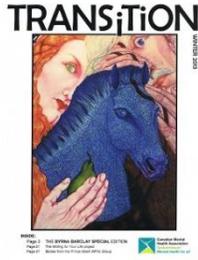
This brief guide is meant for people who are having their first experience with the mental health system: the new consumer, the family member and/or the friends. It may also provide new information for others.

The guide provides some basic information about mental health and mental illness, the providers of services consumers will encounter, the mental health community, and what to expect. Specific information should be requested from the mental health providers. The information is provided to help the consumer,

friend or family member advocate for the services that are needed.

To get your copy of the guide, contact CMHA Saskatchewan Division Office at 1-800-461-5483 (toll free) or 306-525-5601.

## Transition Magazine



Transition Magazine is published twice-yearly in the spring and in the fall. It is distributed free of charge to members of CMHA Saskatchewan Division, to CMHA Divisions and Branches across Canada, and to community-based and government organizations in Saskatchewan who have an interest in mental health/illness issues. Transition Magazine is also made available in PDF format on the CMHA Saskatchewan Division website at [www.sk.cmha.ca](http://www.sk.cmha.ca).

Transition publishes two kinds of works: those directly about current mental health issues; and those about the individual's personal experience of those same issues. Both kinds of work celebrate lives in transit – lives of change, growth and transformation.

## Website

In January 2014, thanks to the efforts of our new Communications Coordinator, Tricia Martin, our Receptionist/Editorial Secretary, Lynn Hill and the staff at CMHA National Office, we launched our brand new website. We are very excited about the new look and updated content. Check us out at [www.sk.cmha.ca](http://www.sk.cmha.ca)



## INDIVIDUAL AND 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 Saskatchewan Division Office frequently have the opportunity to assist individual consumers and their family members on a wide variety of issues. We have also contracted a part-time System Navigator, Tanya Condo, who assists in linking clients to service providers.

The following is a brief sampling of the type of assistance provided by the CMHA Saskatchewan Division Office throughout the past year:

- Assisted consumer with issues with employer re benefit entitlement and return to work assessment.
- Assisted consumer who was having problems getting a disability tax credit form completed by psychiatrist.
- Assisted a worker whose client was having potential problems entering the U.S. due to records on police file.
- Assisted individual with depression after being defrauded of a large amount of money.
- Assisted student to get meds covered and receive counseling.
- Assisted client with physical disabilities and mental health issues to find appropriate services.
- Assisted family member with bullying issue.
- Advocated for assistance with disabilities income support claim.
- Assisted transgender individual with advocacy for services.
- Assisted family members with concerns re parent rights to have knowledge of their daughter's treatment.

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 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

### Justice Community Support Program

The Justice Community Support Program (JCSP) is a new provincial initiative that assists clients who have both a mental illness; diagnosed or perceived by the use of professional judgment, and who have been convicted of a serious violent offense. This joint initiative involves the Canadian Mental Health Association, Saskatchewan Division, Adult Probation, Municipal Police Services, Crown Prosecutors and RCMP. All share an ongoing process of communicating, goal setting, and case management.

There is a referral process to the CMHA Justice Community Support



Program, which generally is lead by the Probation Worker of the client in question. The referral is then presented to a committee of representatives from the CMHA and the partnerships. It is at this point where a Justice Community Support Worker will be assigned to a client. The Justice Community Support Workers are located in Regina, Saskatoon and North Battleford and deliver a mental health and wellness focused program to the client. JSCP practice guidelines follow the guiding principles of the Mental Health Strategy for Canada.



It is imperative that the worker gathers information from law enforcement, crown prosecution, probation worker, families and community provider systems as necessary to create a fully informed working plan. Engaging the client, from the earliest stage possible, in assessing their own needs will lead to a plan that meets their own perceptions of what is needed and will also build trust between the worker and the client.

A typical circle of support plan would focus on activities and interventions that target the client's criminogenic needs, and may include the following:

- In-reach supports and services for individuals with mental illness who are currently serving sentences of incarceration.
- Reintegration planning from custody to community or from community sentence to post-sentence, which can include assisting in the development and maintenance of their relapse prevention plan.
- Addressing housing needs and barriers to maintaining residency.
- Insuring the client is on an optimal medication regimen and has sufficient medication to last at least until follow-up appointment.
- Insuring an integrated treatment approach is maintained for clients with co-occurring disorders.
- Initiating benefit applications/reinstatement to financial and other programs.
- Insuring the client has adequate identification, including photo ID.
- Transportation is arranged for client to/from appointments.
- Insuring the client has continuous access and resources for adequate food and clean clothing.
- Engaging client's family and/or other community based support services.
- Guidance through basic daily living skills.
- Teaching skills and techniques to minimize the negative interference of external factors.

The primary objective is to maintain the client's psychological health, guide their recovery process and promote the engagement of community-based treatment and services while addressing risk factors that promote their offending. The outcome expected also includes the reduction in recidivism, which equates to increased public safety.

## Battlefords Branch

Submitted by Jane Zielke, Executive Director

CMHA Battlefords Branch continues to offer Social/Recreational, Seniors, Life Skills and Training for Employment (TEP) programs to its members. At present, we have eight board members representing approved home operators, Community Mental Health Nurses, CMHA members and our community.

Beginning April 1, 2014 our branch is expanding our TEP program to include job coaching/work experience for clients whose ultimate goal is regular employment in the community. We've hired another full time program coordinator and three part time job coaches – at present we have twelve clients participating in this new program.



In the fall of 2013, we purchased a new 15 passenger van for TEP. This was made possible by a grant from the Kinsmen Telemiracle, vehicle advertising spaces and donations from Lions Club. More than \$35,000 was raised to offset the purchase of this new vehicle.

Mental Health Week 2014 plans include our annual Walk for Awareness, a flag raising ceremony at the Town Hall in Battleford and a CMHA Battlefords Branch BBQ. Saskatchewan Hospital, Battle River Treaty Six, North Battleford Library and Edwards Society will be participating in some way during MHW in The Battlefords. The week's events will end with the North Battleford Psychiatric Nurses Association Champions of Mental Health Gala. This event recognizes businesses, volunteers and employers supporting persons with mental illness and is scheduled for May 10, 2014. We will deliver approximately 6500 flyers in the Battlefords to advertise events during MHW 2014. Our branch will be delivering (free of charge) small potted flowers to 50 businesses in The Battlefords to create some awareness of Mental Health Week – Saskatchewan Hospital Occupational Therapies is donating the plants and we are supplying the pots and dirt. Every pot will have a Mental Health Week flag stake and label that includes our information and recognition for Saskatchewan Hospital.

I'm Thumbody was delivered to about 120 to Grade Two students in four community schools before Christmas. This work shop will be offered to elementary schools each year. Communication and Problem Solving Skills (CAPPS) will be delivered to about 28 children attending the Battlefords Boys and Girls Club beginning the end of April. A grant from W. Brett Wilson and Family Foundation funded I'm Thumbody and Battlefords United Way provided funding for CAPPS.

The Battlefords community supported our branch throughout the year with donations for garage sales, fund raising BBQs and Cash Calendar sales. More than 170 members and volunteers attended our 2013 Christmas Social and Dance. This annual event continues to be popular and our community businesses and individuals play a huge part in the success of this evening – providing gifts and raffle items for members and home operators. Our board of directors and approved home operators provide and serve the Christmas supper which is very much appreciated by all who attend.

Sincere thanks is extended to Prairie North Health Region, Battlefords United Way, W. Brett Wilson and Family Foundation, volunteers and community members for their continued support of CMHA Battlefords Branch.

## Kindersley Branch

Submitted by Pam Welter, Branch Coordinator

CMHA Kindersley Branch is dedicated to promoting mental health and wellness through a comprehensive range of community-based services for individuals, families, groups and organizations within the Heartland Health Region. We have been working in the Kindersley area for 50 years to help address the needs of those with a mental illness, the prevention of mental illness, and the promotion of mental health.

We invite collaboration. Kindersley Branch is connected to a variety of mental health service providers and professionals in the Heartland Health Region. We invite partnerships to provide information regarding a variety of mental health topics or to connect those in need with many other informative sources. The branch provides responsible referral to other agencies, education and related supports as requested and as they may become necessary. To the families in our communities we provide appropriate information and referrals regarding their family member's mental health needs and support in advocacy and coping skills as necessary.



Kindersley Branch takes part in a variety of fundraising initiatives, including selling Cash Calendars and bake sales, as well as sending out letters requesting donations. One of the community actions facilitated by CMHA Kindersley Branch is the Community 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 food, a Christmas turkey,

and gifts from Santa for the kids. This program is done in collaboration with numerous community groups. This year 119 families throughout the Heartland Health Region were supplied with a hamper through this program.

The CMHA Kindersley Branch receives numerous invitations throughout the Heartland Health Region to attend various events with our information and pamphlet display. Through this service, CMHA Kindersley Branch is linked into the communities within the health region to do population health promotion, education, referrals and advocacy.

Once again this year, our 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 and physically healthy families. Taking part in these programs, along with our farm safety for kids program, helps the branch link to our communities in the health region. About 250 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 6 to 15.

The Kindersley Branch has done numerous presentations to schools and groups in several communities throughout the Heartland Health Region. Some of the topics covered are:

- Safe Communities – farm safety, car seat safety, bike safety, smoke free communities – volunteers booked 9 presentations.
- Let's Get Together – volunteers booked 3 presentations
- How to Drug Proof Your Kids – branch provided 6 sessions

- Depression – branch working with School Division in developing a HUB committee
- Youth Suicide Prevention – branch offering safeTALK Training for 60 students
- Suicide Prevention Guide for Schools – Branch worked on initiatives for schools through our involvement on the KICS Committee
- Suicide prevention programs and training for schools and communities – safeTALK training and KICS Committee
- Smoke Free Schools – Community Development and Communications Strategy – branch provided a host of information to keep schools updated with the resources
- Positive Thinking Brings Positive Attitude – one presentation booked

The Branch also offers the following programs:

- Balance – Work/life stress – 4 presentations booked
- CMHA Roles and Responsibilities
- Population Health Promotion from a Mental Health Point of View
- Determinants of Health Affecting Mental Well Being
- “wholam” – case study profiles of mental health services in our rural communities
- CHEERS – Understanding the Relationship between Alcohol and Mental Health
- Schizophrenia Partnerships Awareness Presentations
- safeTALK, ASIST and suicideTALK – Suicide intervention training—trained 280 individuals – CMHA Saskatchewan Division provided the materials for ASIST training in the Heartland Health Region.

Community committees that we are involved in are:

- KICS (Kindersley Integrated Children’s Services)
- KFCC (Kindersley Food Coalition Committee)
- HUB Committee (Kerrobart area)
- Various community interagency committees (Unity, Coleville, Macklin, Denzil, Major)

The Kindersley Branch Board consists of several volunteers as a result of the effective population health promotion through our community programs. The Kindersley Branch Board, volunteers and consumers provide links between health care professionals, communities, individuals and resources. Our programs keep the branch linked to the communities in the health region and with community partners. Our

programs are delivered within the Population Health Promotions model where key members in the communities are trained and provided with the resources to deliver and educate on mental health topics.

## Moose Jaw Branch

Submitted by Donna Bowyer, Program Director

We held our last Mayor's Luncheon this year. Although it was a success, we decided that we needed to find a new way of getting our message out. We were fortunate in being selected by Bell Canada and Clara's Big Ride, to host Clara Hughes in her ride across Canada. Although this ride will take place in June of 2014, we had to start our planning in the fall of 2013. We are so impressed with our community's support of Clara's Big Ride and CMHA in this challenge. A lot of planning and work has gone into the preparation for this event. We are also impressed with the people that have stepped forward to tell their story of recovery. Even with the stigma of mental illness that still looms around us, people want to break that stigma and are willing to step into the light and say "I have a mental illness and I am in recovery. You don't have to struggle by yourself in the shadows of life".



The Moose Jaw Branch moved toward Peer Support over the past year. The Board decided to use our reserve to add additional hours to focus more on Peer Support. We now have Peer Support groups meeting each week around different objectives. We still have the original Come Together group that meets monthly. This is a social group designed to remind people that they are more than their illness and getting to know each other as social people. We have the Moose Jaw Muse that focuses on writing. Moose Jaw Muse affords people an opportunity to learn to express themselves through their writing and to increase their skills. The next group we want to focus on is our young adults. We started a focus group, which meets for coffee monthly, to discuss the needs of the younger population and to respond. We have a group that focuses on physical activities and one that has become a game night. Each week there is another theme of peer support to take advantage of. The decisions and control of the groups are determined by the participants. Over the next year we want to expand and add more depth to these programs as the members want it.



I continue to do presentations throughout the region. There were some major shuffles that transpired with Shaw Communications this year and we are still trying to get things set up with them again. We have set up displays, worked within the schools, gone out into the rural areas, and continue to work on various committees, including Journey to Hope. This is an important committee as its focus is on training and educating around the issue of suicide prevention. We also piloted Living Life to the Full with high school students. It was greatly appreciated by the school, who felt that all students should have an opportunity to take this valuable life skills training. The obstacle is that it takes 8 weeks of classroom time and with the pressure to accomplish curriculum that is already set, it becomes hard to carve out more time within the classroom.

The Multicultural Youth Transition Program is once again working with young people that are new to our country to learn to navigate our learning establishments. The youth also find out how they can succeed in our culture and become contributing members in whatever field they choose. We see them mature in the safe and healthy environment they had not had an opportunity to experience until they arrived in Canada.

They see success in their future and a life they only dreamed of. We are able to help them find their way through the barriers that may be in front of them and realize that they can develop strategies and skills to manoeuvre around or through them. This is not without challenges.

We are excited about the coming year. Working with new people and organizations in our community, bringing mental illness and recovery more to the forefront, working more supportively to provide more value to our peer support program, and continuing to work with our community partners, all make 2014-2015 a year to look forward to.

I would like to thank all the volunteers we have had over the last year, and the ones we continue to work with on our Board and in our adventure with Clara's Big Ride. We depend on your enthusiasm and commitment to making our community a healthier, and more inclusive community for everyone to live in.

## Prince Albert Branch

Submitted by Doug Kinar, Executive Director

The Prince Albert Branch goals are to provide advocacy, education, programs and services.

**Advocacy:** We are continually advocating on behalf of people living with mental illness through participation on a variety of committees in the Prince Albert Community, including the Citizen's Advisory Committee.

**Education:** We offer Mental Health First Aid workshops and ASIST workshops in Prince Albert and the surrounding area. In addition, we provide a Life Skills presentation, delivered as requested to SIAST, First Nations University, and other interested groups.

**Programs:**



Our vocational programs continue to be filled to capacity with mental health participants and they are running as expected. Our vocational programming includes a lunch program, As Good As New store, Independent Living program, Homestead Quilting program and a Support Worker who assists those living in our



Maple Ridge Apartments.

Our Writing for Your Life Group continues to thrive under the guidance of Lynda Monahan and her assistant Rod Thompson. We hosted Writers Retreat in Prince Albert on March 28 & 29, 2014 under the direction of Mr. Ted. Dyck. Lynda graciously opened her home for billets to help reduce the overall cost for the participants. We began the Retreat with a casual gathering at Lynda's on Friday evening and Saturday the Retreat was held at Par Place. It was a lovely day, the fireplace was blazing, the participants were engaged and the food was delicious. All who attended had a great time and we look forward to hosting another Writers Retreat in the future.

The Art group continues to work and experiment in a multitude of mediums. These have included paint, pencil, charcoal, pottery, stained glass birdhouses and many more wonderful projects to pursue.

**Services:**



Support services for our Maple Ridge Apartment tenants, as well as for those that visit the Drop In Center continue to be provided.

We continue to encourage practicum students from the First Nations University and SIAST.

Our dedicated staff, although few in number, continue to work together to make a positive impact in our community. On behalf of the 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. These include: Prince Albert and Area United Way, Prince Albert and Area Community Foundation, Community Initiatives Fund, Prince Albert Parkland Health Region, Saskatchewan Housing Corporation, the City of Prince Albert, Homelessness Partnering Strategy, Maple Leaf Foods and all the individuals who have made donations specific to our organization.

Working together can and does make a difference!

## Regina Branch

Submitted by Kevin Huber, Executive Director



Since Regina Branch's last report in April of 2013, we have undergone several staffing changes, faced funding challenges, and initiated some new changes to make our Branch more efficient and effective in our delivery of services to consumers, members, and clients. Our membership has grown to approximately 600; the number of non-member clients accessing our services is

dramatically on the rise; and the number of private donations from a variety of sources is increasing. Community interest in Regina Branch is also increasing as we work hard to promote mental health and draw a much larger segment of the Regina community towards learning more about us and what we do to serve all persons living with mental illness.

Once again, our highlighted services continue to be:

- Pre-Vocational Programs: Drop-In Centre (sometimes referred to as the "Club"), mental health awareness events, special activities, peer support, engagement, open-microphone (public speaking), holiday celebrations, art therapy, music, volunteer work, dances/parties, Rider game activities, community tours throughout Regina, knitting, yoga, etc.
- Vocational Programs: Employment and training to assist clients to enter or re-enter the competitive labour market. Our vocational programs and work training opportunities include:
  - ✓ Janitorial and Housekeeping
  - ✓ Administrative Support/Assistant
  - ✓ Kitchen/Food Services
  - ✓ Canteen/Confectionary
  - ✓ Laundromat
  - ✓ Employability Skills Development Training

- Other Programs: The Reel Anti-Suppressants Theatre Group, The Free Spirit Band, Wellness Club, Anxiety Management Workshop, Daily Lunch Program and guest presenters on a variety of topic areas such as nutrition, hygiene, managing a home budget, etc.

Much of what has been reported this year is quite similar to last year's report. The change for Regina Branch will be in our deliverables and how we manage ourselves to achieve those deliverables.

The demands for accountability of how funding is to be used are increasing. As well, how the types of programming we offer in our core services meets the criteria for best practices and measured in the Program Outcome Model are now becoming the primary basis for receiving funding. Large corporate (including government) sponsors want to know how and where their money is being spent. They want to know the effectiveness and efficiency of the program being supported; program measures for success; program (validated) evaluation and assessment tools being utilized by the organization; collaborative partnerships established with other community-based organizations; documentation through report writing (case plans) and summary reports (daily, monthly, quarterly, yearly) etc. that are clear, concise, current, chronological, detailed and specific in the information being shared; and, the level of professionalism exhibited by the organization and its staff in service delivery and role modeling in the community.

For Regina Branch, this coming fiscal year (2014-2015) is going to be a challenging one. This is, however, not to be taken as "doom and gloom"; rather it is an opportunity for Regina Branch to grow and prosper in new ways. There will always be problems. For a community-based organization that is a given. Accessing funding from the corporate world is a relatively competitive endeavour, and the reality of the situation is that no CBO can stand pat and believe they will automatically receive financial support. Thus, to ensure Regina Branch remains a viable, long-term investment for sponsors to assist persons living with mental illness, we must become more innovative, creative and motivated to evolve some of our programming to new levels.

This is going to be the year where we sharpen our core services and prove our success through the utilization of the Program Outcome Model in every aspect of Regina Branch. Words are to become actions, and actions are to become desired outcomes. Our commitment to all persons living with mental illness is to continue our campaign against stigmatization and keep mental health awareness at the forefront of our business activities at all times.

## Saskatoon Branch

Submitted by Susan Saville, Executive Director



CMHA Saskatoon Branch continues to offer Vocational Counselling, a Life Skills Program, Mental Health First Aid and a Social Recreation Program.

Our vocational team consists of two Vocational Counselors, Brenda Beaudry and Morgan Wickett, one Marketing Coordinator, Bart Voswinkel and one Labour Consultant, Sandy Stotz. The Vocational Counsellors support and assist individuals to identify and pursue their individual goals, which may include attending secondary or post-secondary classes, finding full or part-time work, volunteering or sustaining and maintaining employment. The Marketing Coordinator establishes partnerships with other agencies, employers, educators and members in the business

community by sharing information and facts about mental illness to dispel the stigma and to create new opportunities for job seekers and for employers. The Labour Consultant assists employers to explore the importance of mental wellness in a workplace and to learn about the tools available to help improve productivity, financial performance and risk management along with recruitment and retention. Sandy also assists employers to understand, develop and sustain a psychologically healthy and safe workplace in order to meet the Psychological Health and Safety National Standard of Canada.

The Life Skills Program is offered twice a year to a total of 24 participants. Peter Warkentin, the Life Skills Coach, guides people through this prevocational program that helps participants develop new skills needed to cope with daily living situations. Attending Life Skills helps an individual to identify their strengths and their weaknesses, to set realistic goals and to achieve them. In addition to being a Life Skills Coach, Peter recently became a certified Wellness Recovery Action Plan (WRAP) trainer, which means that he has one more set of tools to assist people in achieving their own life goals and dreams. WRAP is an evidence-based practice designed to increase personal empowerment and improve quality of life. This will complement the components of the current Life Skills program.

Jenna Neufeld, Recreation Coordinator, coordinates a program which encourages participants to join in a variety of activities. A newsletter is circulated detailing the upcoming activities/events so that participants are able to pick and choose and plan ahead. This is a very popular program as individuals regularly attend Quilting, Bowling, Art Group, Women's Group, Yoga, Writers Group, Cooking Group, Tai Chi, Scrapbooking, the Book Club and Monday night sports and games. The summer program includes a dog walking program, swimming, BBQs, tours to the art gallery and outings to the many events held in Saskatoon over the summer. Jenna recruits, trains and coordinates a number of volunteers to oversee the activities and the groups. We are fortunate to have so many volunteers willing to dedicate their time and energy to ensure that participants enjoy the programs.

Carolyn Burnett is the Administrative Generalist. She has numerous duties, one of the most important being to welcome new members, describe our programs and services, and ensure that current memberships are renewed. Carolyn is responsible for payroll, managing both accounts receivable and payable and keeping track of all the intricate details necessary to operations.

In addition to their job duties, Brenda, Jenna and Sandy are Certified Mental Health First Aid Instructors. We are seeing an increase in requests for the training as the community begins to recognize the benefits the benefits of having employees trained in Mental Health First Aid.

In closing, I would like to thank those of you who invest in CMHA; Saskatchewan Ministry of the Economy, Saskatchewan Parks and Recreation, Saskatoon Community Foundation, Royal University Hospital Foundation, Saskatoon Health Region, City of Saskatoon, Service Canada, United Way Saskatoon and Area, and our many private donors. I would also like to thank you numerous volunteers and our CBO community partners for helping to make it possible to achieve our vision; mentally healthy people in a healthy society.

## **Swift Current Branch**

Submitted by Ruth Smith, Executive Director

CMHA Swift Current Branch has hired Daniel Murphy Kennedy "Murphy" in the position of Assistant Director. He currently works on Thursday and Friday and I work Monday to Wednesday. Working days may change according to the need, but the hours worked each month do not. In June hours will go to 50/50.

We are upgrading our web site and are looking at using the CMHA National template. The cost is very reasonable and it would look similar to what Saskatchewan Division Office has launched. The National Office staff are great to work with. Murphy is taking the lead on this project.

The 2014 Mayor's Luncheon was held on May 6<sup>th</sup> and the guest speaker was the Lieutenant Governor of Saskatchewan, Vaughn Solomon Schofield.



The Jimmy Richardson Walk for Wellness will be in September again in 2014. It starts from our building going to the downtown Market Square where the Mayor and I will address the crowd, followed by a barbeque.

We will again be helping with the pancake breakfast to kick off the Swift Current fair. Breakfast costs \$2.00 and the proceeds are donated to CMHA Swift Current Branch. In the past several years this has resulted in a donation of \$1500.00.

For several years CMHA Swift Current Branch has worked with the community in planning the Community Christmas Meal held on December 25<sup>th</sup> at the Salvation Army. This is a much-needed program in Swift Current and has been very successful.

We have received a grant again this year to be able to offer our vocational program. This has been exciting.

Staff members have been utilizing the on-line training that CMHA Saskatchewan Division has set up for the use of all branches. This program is really appreciated!

The CMHA Swift Current Branch Board has voted to change our Mission and Vision to correspond with CMHA National's Mission and Vision. We are working on a strategic plan for Swift Current Branch, articulating our core functions.

We hope to work with Donna Bowyer, Director of Friends for Life, to bring the ASIST program to Swift Current.

Our volunteers here at the Centre are an amazing group! We have a volunteer IT worker who has come and helped us set up our computers to work best for all of our staff. We have just received word from the Health Region that they will be donating up-to-date computers and our IT worker will once again assist us in getting things up and running. We also want to recognize all of the people who help us sell cook books, bake goodies, assist with the Walk-a-Thon and Mayor's Luncheon, and a gentleman who is a retired newspaper reporter and who helps us with our press releases.

***We are so fortunate here in Saskatchewan to have such a caring and giving community!***

## Weyburn Branch

Submitted by Tasha Collins, Program Director

Thanks to the generous support of the Weyburn and District United Way and Canada Post, CMHA Weyburn was able to continue supporting our community members who are affected by mental illness. This allowed CMHA to offer quality programming to individuals with mental illness and provide services to the community. 2013 was another exciting year at



CMHA Weyburn. We saw many changes here at the Resource Center, with staffing, programming and community involvement.



In 2013 one of our goals was to develop, improve and maintain a Youth Program at the Centre. This program was up and running early March 2013. The Youth Program is for all youth between the ages of 10 and 16 who wish to participate and attend. The program runs Monday through Thursday from 3:30 to 5:30 p.m. during the school year and Monday through Thursday, 2:00 to 5:00 p.m. during the summer. The Youth Program at our centre provides another safe, fun environment for youth to visit and participate in activities. It is a place for youth to come

learn, engage and become active. There are many youth who are affected by mental illness. What many people do not realize is that the onset of mental illness usually happens before the age of 18. Through our programming we are not only able to provide some education and resources to the youth, but also a place to go if they have questions or concerns. We have noticed the importance of relationships with the youth and have found many of them have been able to open up and discuss some of the issues they are facing. We are able to provide prevention and intervention methods, if needed, to help youth grow and mature in a healthy way. We have been able to connect with youth in a manner that is fun, positive and exciting. We are currently looking for new ways to recruit youth to the program. We tend to have high numbers during the summer and lower numbers during the school year.



Our adult Vocational Programming offers yard maintenance, snow shoveling, refuse hauling, cleaning contracts and small moving jobs. Another part of our vocational programming involves clients preparing and providing hot lunches four days a week to approximately 12 to 18 people. We also offer special event pot lucks, which can draw in crowds of 20 or more community members. The meal program has been enhanced with consumers also doing some baking for birthdays, snacks and other events.



This year we were able to continue with Life Skills, writers group and sewing programming much more consistently as we had a third staff member. This allowed us to not only improve the consistency in which programming was offered, but allowed us to provide to provide additional programming more often. Some of the additional programming consisted of swimming, gardening, playing pool, crafts, visits to the Humane Society (to play with the animals) and knitting at the public library. We have implemented

exercise programming as well that has consisted of staff and consumers visiting Iron Bar Fitness. This is offered twice a week. We continue to offer day trips once a month (during the spring and summer) where the staff and clients travel to another location for programming. We were also able to take some consumers on a summer trip to visit Drumheller. This was a wonderful trip and a great experience for everyone who attended.



Our community involvement included volunteering at the Humane Society,



along with the United Way Communithon. This year, for the first time, we held a Consumer Art Gala in May during Mental Health Week. It was a great way to showcase our clients' talent and provide them with a special evening. All the proceeds for the art pieces went directly to the artists. We also hosted our annual Mayor's Luncheon, and participated in the "Adopt a Planter" program. The Centre held our Valentines Day fundraiser again this year (chocolate and vanilla cupcakes), along with holding a garage sale and trade show. All of these were great ways to connect our clients with the community and to provide vocation programming at the same time.



Working together with WASES, CMHA Weyburn Branch hosts Community Connections meetings where many different service providers from the community get together three times per year to talk about the services each entity can provide.

We also held our first two safeTALK workshops and we look forward to providing the training to our community in the future.

I get excited when I think about the amount of services and programming we are offering now, and I look forward to improving them along with introducing others. We are also happy to announce that we have received funding through the Community Initiatives fund to cover one-half of the wages for our third staff member working with the Youth Program. This will enable us to continue the program for 2014-2015. We want to improve this program and work towards finding sustainable funding because without funding we would have to discontinue our youth program. There is a lot of value in the program, and we would like to see it reach other branches within CMHA in Saskatchewan.

## ADMINISTRATION

### Resource Development

Submitted by Joan Kilbride, Director of Resource Development

Public education goes hand-in-hand with all fundraising initiatives. Basically, people give to organizations they "know" or have heard about and with which they have a connection. For this reason, public education and awareness are absolutely necessary for the success of our initiatives.

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 fundraisers. This support is invaluable for presenting our message to past, present and future supporters of the Association.



#### TEDDY BEAR AFFAIR

This year's Teddy Bear Affair was held at the Radisson Hotel Saskatoon on Saturday, February 8, 2014.

Over the years, the Teddy Bear Affair has brought in over \$440,000 in support of the Association, and has helped raise the CMHA's profile in Saskatchewan. All money

raised from this event stays in Saskatchewan supporting provincial initiatives like the Friends for Life Suicide Prevention Program.

Once again guests enjoyed a delicious buffet and had the opportunity to participate in the live and silent auction, which featured prizes donated by local artists and the business community. Each live auction package has its own teddy bear appropriately and creatively dressed by the Sask-Tel Pioneers to reflect the nature of the donated items. For example, the Via Rail package included the travel bear dressed by the Sask-Tel Pioneers as well as a round trip for two by Via Rail, Saskatoon to Vancouver in sleeper class. The package includes sleeping accommodation and meals on board and is valued at \$5200 plus taxes.

The public awareness media campaigns provided by Global and C95 have made a significant difference to the overall success of the event.

Once again, the hard work and dedication of Ken McCulloch and Duane Heisler, our auctioneers for the evening, and Kevin Stanfield, Master of Ceremonies (Global), not only raised funds for the Association, but added to the fun and entertainment for the evening.

Thank you to our patrons, Affinity Credit Union and Dakota Dunes Casino, as well as our sponsors, Sask-Tel Pioneers, Mosaic, WestJet, North Ridge Development, Eli Lilly, Novatex Industrial Screen Printers, Sask. Energy, Dudley & Company Chartered Accountants LLP, VIA Rail Canada and the Saskatchewan Turkey Producers.



#### CASH CALENDAR

With the new technology implemented in 2012, we continue to increase productivity, resulting in the room reaching the goal set for the 2014 Cash Calendar sales.

This fundraising project has not only proved to be a very lucrative lottery for the Association, but has also become a very successful public awareness tool. The Calendar is unique as it displays the art work of people who use our services throughout the province. Many of our members are gifted with talents and skills left dormant due to financial and social restraints. The Calendar has given them the opportunity to develop their artistic talents, to enhance social interaction and physical skills, and to realize some monetary gain through the use of their art work. The Calendar sold for \$35 and offered 365 chances to win over \$72,000 in prizes.

Proceeds from the sale of the lottery calendar are used to support the Friends for Life Program, which provides public awareness and education in suicide prevention through school and community presentations.

#### DIRECT MAIL

Mental illness affects people of all ages in all kinds of jobs and at all educational levels. Each year approximately 90,000 Saskatchewan residents will suffer from a depressive disorder. The stigma that surrounds mental illness prevents many from asking for help until it is too late. Silence is the greatest enemy. Our direct mail campaign not only raises funds for the Association, it also continues to provide awareness and public education, which helps to reduce the stigma of mental illness in the community.

#### 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 continue to support us throughout the year.

As a non-profit, charitable organization, the Canadian Mental Health Association (Saskatchewan Division) Inc. depends upon the good will and support of our many volunteers, sponsors and donors. Without this support we could not run successful programs and services at any cost to the people who use our services. We would like to thank all of these partners – those organizations, businesses, corporations and individuals who give so generously. Through their support the CMHA remains a major player in the promotion of mental health in Saskatchewan.



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

**Financial Statements**

**March 31, 2014**

DUDLEY & COMPANY LLP

**CANADIAN MENTAL HEALTH ASSOCIATION (SASKATCHEWAN DIVISION) INC.**  
**Index to Financial Statements**  
**March 31, 2014**

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DUDLEY & COMPANY LLP

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## INDEPENDENT AUDITOR'S REPORT

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

We have audited the accompanying financial statements of Canadian Mental Health Association (Saskatchewan Division) Inc., which comprise the balance sheets as at March 31, 2014 and March 31, 2013 and the statements of operations, changes in net assets and cash flows for the years ended March 31, 2014 and March 31, 2013, 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.

### Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on our audits. We conducted our audits in accordance with Canadian generally accepted auditing standards. Those standards require that we comply with ethical requirements and plan and perform the audits 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 auditor's 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 policies 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 in our audits is sufficient and appropriate to provide a basis for our qualified audit opinion.

*(continues)*

Independent Auditor's Report to the Members of Canadian Mental Health Association (Saskatchewan Division) Inc. *(continued)*

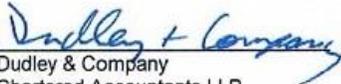
Basis for Qualified Opinion

In common with many not-for-profit organizations, Canadian Mental Health Association (Saskatchewan Division) Inc. derives revenue from fundraising activities the completeness of which is not susceptible to satisfactory audit verification. Accordingly, verification of these revenues was limited to the amounts recorded in the records of Canadian Mental Health Association (Saskatchewan Division) Inc.. Therefore, we were not able to determine whether any adjustments might be necessary to fundraising revenue, excess of revenues over expenses, and cash flows from operations for the years ended March 31, 2014 and March 31, 2013, current assets and net assets as at March 31, 2014 and March 31, 2013

Qualified Opinion

In our opinion, except for the possible 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 Canadian Mental Health Association (Saskatchewan Division) Inc. as at March 31, 2014 and March 31, 2013 and the results of its operations and its cash flows for the years then ended in accordance with Canadian accounting standards for not-for-profit organizations.

Regina, Saskatchewan  
June 18, 2014

  
Dudley & Company  
Chartered Accountants LLP

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

**Balance Sheet  
As at March 31, 2014**

	<i>March 31</i> <b>2014</b>	<i>March 31</i> <b>2013</b>
<b>ASSETS</b>		
<b>CURRENT</b>		
Cash	\$ 313,678	\$ 243,553
Investments (Note 3)	493,957	427,143
Accounts receivable	40,656	110,332
Receivable from branches	22,307	10,812
GST receivable	12,834	6,987
Prepaid expenses	23,805	10,734
	<u>907,237</u>	<u>809,561</u>
TANGIBLE CAPITAL ASSETS (Note 5)	254,965	240,847
INTANGIBLE ASSETS (Note 6)	7,275	9,126
	<u>\$ 1,169,477</u>	<u>\$ 1,059,534</u>
<b>LIABILITIES AND NET ASSETS</b>		
<b>CURRENT</b>		
Accounts payable and accrued liabilities	\$ 89,821	\$ 54,494
Wages payable	62,393	57,907
Current portion of long term debt (Note 7)	17,081	18,790
Deferred revenue (Note 13)	238,984	211,993
	<u>408,279</u>	<u>343,184</u>
LONG TERM DEBT (Note 7)	24,550	41,614
	<u>432,829</u>	<u>384,798</u>
NET ASSETS	736,648	674,736
	<u>\$ 1,169,477</u>	<u>\$ 1,059,534</u>

**ON BEHALF OF THE BOARD**

\_\_\_\_\_ *Chair*  
\_\_\_\_\_ *Director*

The accompanying notes form an integral part of these financial statements

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

**Statement of Operations**

**Year Ended March 31, 2014**

	2014	2013
<b>REVENUE</b>		
Saskatchewan Health	\$ 260,723	\$ 254,870
Saskatchewan Lotteries	75,396	73,200
Saskatchewan Justice	229,880	10,000
Regina Qu'Appelle RHA	6,250	16,250
Community Initiatives Fund - GAP	420,000	348,348
Other grants (Note 14)	172,242	100,778
Fundraising	468,991	506,218
Donations (Note 12)	75,031	45,645
Rental	40,234	36,037
Other revenue and recoveries	120,751	51,211
Community fund appeals	21,247	24,182
Branch administration recoveries	13,892	13,887
Interest	5,050	4,332
National conference	-	58,960
	<u>1,909,687</u>	<u>1,543,918</u>
<b>EXPENSES</b>		
Amortization of intangible assets (Note 6)	1,394	2,281
Amortization of tangible assets (Note 5)	18,985	17,812
Bad debts	1,664	-
Justice Community Program	44,474	4,835
Contributions to branches	80,119	29,851
Fundraising	201,691	200,299
Gambling Awareness Program	104,300	76,197
Gifts to qualified donees	190	50
Interest on long term debt (Note 7)	3,476	4,825
General and administrative	160,701	117,278
National conference	-	43,484
Occupancy	65,349	61,281
Public education	93,401	80,889
Public service announcements	34,002	33,304
Research	21,777	6,053
Salaries and benefits (Schedule 1)	1,011,726	779,754
	<u>1,843,249</u>	<u>1,458,193</u>
<b>EXCESS OF REVENUE OVER EXPENSES FROM OPERATIONS</b>	<b>66,438</b>	<b>85,725</b>
<b>OTHER INCOME (EXPENSES)</b>		
Loss on disposal of assets (Note 5)	(4,526)	(11,346)
<b>EXCESS OF REVENUE OVER EXPENSES</b>	<b>\$ 61,912</b>	<b>\$ 74,379</b>

The accompanying notes form an integral part of these financial statements

**CANADIAN MENTAL HEALTH ASSOCIATION (SASKATCHEWAN DIVISION) INC.**  
**Statement of Changes in Net Assets**  
**Year Ended March 31, 2014**

	Unappropriated	Appropriated - see Note 8	Invested in Capital Assets	<b>2014</b>	2013
<b>NET ASSETS - BEGINNING OF YEAR</b>	\$ 200,000	\$ 224,762	\$ 249,974	\$ 674,736	\$ 600,357
Excess of revenue over expenses	12,267	49,645	-	61,912	74,379
Amortization of tangible capital assets	18,985	-	(18,985)	-	-
Amortization of intangible assets	1,394	-	(1,394)	-	-
Loss on disposal of assets	4,526	-	(4,526)	-	-
Purchase of tangible capital assets	(33,775)	-	33,775	-	-
Purchase of intangible assets	(3,397)	-	3,397	-	-
<b>NET ASSETS - END OF YEAR</b>	<b>\$ 200,000</b>	<b>\$ 274,407</b>	<b>\$ 262,241</b>	<b>\$ 736,648</b>	<b>\$ 674,736</b>

The accompanying notes form an integral part of these financial statements

**CANADIAN MENTAL HEALTH ASSOCIATION (SASKATCHEWAN DIVISION) INC.**  
**Statement of Cash Flows**  
**Year Ended March 31, 2014**

	2014	2013
<b>CASH FLOWS FROM (FOR) OPERATING ACTIVITIES</b>		
Cash received from grants	\$ 1,261,158	\$ 913,290
Cash receipts from self-generated revenues	728,651	745,799
Cash paid to suppliers	(791,258)	(661,942)
Cash paid to employees	(1,007,240)	(761,140)
Interest received	5,050	4,332
Interest paid	(3,476)	(4,825)
Cash Flows From (For) Operating Activities	<u>192,885</u>	<u>235,514</u>
<b>CASH FLOWS FROM (FOR) INVESTING ACTIVITIES</b>		
Purchase of capital assets	(37,172)	(12,720)
Purchase of investments	(66,815)	(127,308)
Cash Flows From (For) Investing Activities	<u>(103,987)</u>	<u>(140,028)</u>
<b>CASH FLOWS FROM (FOR) FINANCING ACTIVITIES</b>		
Repayment of long term debt	(18,773)	(23,473)
<b>INCREASE IN CASH</b>	<b>70,125</b>	<b>72,013</b>
CASH - BEGINNING OF YEAR	<u>243,553</u>	<u>171,540</u>
<b>CASH - END OF YEAR</b>	<b>\$ 313,678</b>	<b>\$ 243,553</b>

The accompanying notes form an integral part of these financial statements

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

**Notes to Financial Statements**

**Year Ended March 31, 2014**

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**1. NATURE OF OPERATIONS**

Canadian Mental Health Association (Saskatchewan Division) Inc. is incorporated under the Non-Profit Corporations Act of Saskatchewan. It is a volunteer based organization that, together with its fifteen 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.

The Saskatchewan Division is comprised of the division office in Regina and fifteen branches and rural committees. These financial statements account for the operations of the division office including the Gambling Awareness Program, Justice Community Support 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.

The Canadian Mental Health Association (Saskatchewan Division) Inc. is a charitable organization, as described in Section 149 of the *Income Tax Act*, and therefore is not subject to either federal or provincial income taxes.

**2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES**

Revenue recognition

- a) Grants - Revenues from grants and other sources that relate to specific projects are recognized as revenue when the related expenses are incurred.
- b) Other grants and donations - Revenue is recorded in the fiscal period to which they apply.
- c) Fundraising and other revenue - Revenue is recognized when received.
- d) Rental - Revenue is recorded in the month to which it pertains .
- e) Interest - Interest on fixed income investments is recognized over the terms of these investments using the effective interest method.

Fund accounting

Canadian Mental Health Association (Saskatchewan Division) Inc. follows the deferral method of accounting for contributions. Revenue received in advance is deferred to the future operating period.

Unappropriated net assets reports the general operations of the organization.

Appropriated net assets consist of the Building Fund, Program Fund and Mental Health Fund. These funds are internally restricted and increases to or withdrawals from these funds require board approval.

(continues)

**CANADIAN MENTAL HEALTH ASSOCIATION (SASKATCHEWAN DIVISION) INC.**  
**Notes to Financial Statements**  
**Year Ended March 31, 2014**

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2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES *(continued)*

Financial instruments

- a) Measurement of financial instruments - The organization initially measures its financial assets and financial liabilities at fair value. The organization subsequently measures all its financial assets and financial liabilities at amortized cost. Changes in fair value are recognized in the statements of operations in the period incurred. Financial assets measured at amortized cost include cash, accounts receivable and fixed income investments. Financial liabilities measured at amortized cost include accounts payable and debt.
- b) Impairment - At the end of each reporting period, the organization assesses whether there are any indications that a financial asset measured at amortized cost may be impaired. Objective evidence of impairment includes observable data that comes to the attention of the organization, including but not limited to the following events: significant financial difficulty of the issuer; delinquency in payments; or bankruptcy. When there is an indication of impairment, the organization determines whether a significant adverse change has occurred during the period in the expected timing or amount of future cash flows from the financial asset. If identified, the organization reduces the carrying amount of the asset to the present value of cash flows expected to be received. The carrying amount of the asset is reduced directly or through the use of an allowance account. The amount of the reduction is recognized as a bad debt in the statement of operations. When the extent of impairment of a previously written-down asset decreases and the decrease can be related to an event occurring after the impairment was recognized, the previously recognized impairment loss is reversed to the extent of the improvement, directly or by adjusting the allowance account. The amount of the reversal is recognized in the statement of operations in the period the reversal occurs.

*(continues)*

**CANADIAN MENTAL HEALTH ASSOCIATION (SASKATCHEWAN DIVISION) INC.**  
**Notes to Financial Statements**  
**Year Ended March 31, 2014**

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2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (*continued*)

Capital assets

The costs of capital assets are capitalized upon meeting the criteria for recognition as a capital asset, otherwise, costs are expensed as incurred. The cost of a capital asset comprises its purchase price and any directly attributable cost of preparing the asset for its intended use.

A capital asset is tested for impairment whenever events or changes in circumstances indicate that its carrying amount may not be recoverable. An impairment loss is recognized in the statement of operations when the carrying amount of the capital asset exceeds its fair value.

An impairment loss is not reversed if the fair value of the capital asset subsequently increases.

- a) Tangible capital assets - consist of property, furniture and equipment and are measured at cost less accumulated amortization. Amortization is provided for on a declining balance basis over their estimated useful lives.
- b) Intangible assets - consist of separately acquired computer application software and is measured at cost less accumulated amortization. Amortization is provided for on a declining balance basis over its estimated useful life.

Buildings	5%
Furniture and office equipment	20%
Vehicle	20%
Computer equipment	20%
Computer software	20%

One half of the amortization rate is used in the year of acquisition.

Net assets invested in capital assets

Net assets invested in capital assets comprises the net book value of capital assets.

Management estimates

The preparation of these financial statements in conformity with Canadian accounting standards for not-for-profit organizations requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities, the disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the current period. Significant estimates include those used when accounting for amortization and the impairment of financial assets. All estimates are reviewed periodically and adjustments are made to the statement of operations as appropriate in the year they become known.

**CANADIAN MENTAL HEALTH ASSOCIATION (SASKATCHEWAN DIVISION) INC.**  
**Notes to Financial Statements**  
**Year Ended March 31, 2014**

3. INVESTMENTS

	2014	2013
Guaranteed Investment Certificates	<b>\$ 493,957</b>	<b>\$ 427,143</b>

Investments maturing within 12 months from the year-end date are classified as current.

The fixed income securities have effective interest rates ranging from 0.8% to 1.3% with maturity dates within twelve months or less.

4. FINANCIAL INSTRUMENTS

The organization is exposed to various risks through its financial instruments and has a risk management framework to monitor, evaluate and manage these risks on an annual basis. The following analysis provides information about the organization's risk exposure and concentration as of March 31, 2014:

Credit risk

Credit risk arises from the possibility that parties may default on their financial obligations, or if there is a concentration of transactions carried out with the same party, or if there is a concentration of financial obligations which have similar economic characteristics that could be similarly affected by changes in economic conditions, such that the association could incur a financial loss. The organization is exposed to credit risk from its producers. An allowance for doubtful accounts is established based upon factors surrounding the credit risk of specific accounts, historical trends and other information. The organization has a significant number of producers which minimizes concentration of credit risk.

The maximum exposure of the organization to credit risk is represented by the balance as shown on the balance sheet for cash and accounts receivable.

Cash and investments: Credit risk associated with cash and fixed income investments is minimized substantially by ensuring that these assets are invested in major financial institutions.

Accounts receivable: Credit risk associated with trade accounts receivable is minimized by the organization's diverse customer base. The organization monitors the amount of credit extended when deemed necessary.

Liquidity risk

Liquidity risk is the risk that the organization will not be able to meet a demand for cash or fund its obligations as they come due. The organization is exposed to this risk on its accounts payable and accrued liabilities.

The organization meets its liquidity requirements by monitoring cash flows from operations and holding assets that can be readily converted into cash.

*(continues)*

**CANADIAN MENTAL HEALTH ASSOCIATION (SASKATCHEWAN DIVISION) INC.**  
**Notes to Financial Statements**  
**Year Ended March 31, 2014**

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4. FINANCIAL INSTRUMENTS *(continued)*

Market risk

Market risk is the risk that the fair value or future cash flows of a financial instrument will fluctuate because of changes in market prices. Market risk is comprised of currency risk, interest rate risk and other price risk.

The organization is exposed to market risk on its cash and investments.

Currency risk

Currency risk refers to the risk that the fair value of financial instruments or future cash flows associated with the instruments will fluctuate relative to the Canadian dollar due to changes in foreign exchange rates.

The organization does not transact in foreign currencies and therefore is not exposed to this risk.

Interest rate risk

Interest rate risk refers to the risk that the fair value of financial instruments or future cash flows associated with the instruments will fluctuate due to changes in market interest rates. In seeking to minimize the risks from interest rate fluctuations, the organization manages exposure through its normal operating and financing activities.

The exposure of the organization to interest rate risk arises from its interest bearing assets. Cash and cash equivalents includes amounts on deposit with financial institutions that earn interest at market rates.

The organization manages its exposure to the interest rate risk of its cash by maximizing the interest income earned on excess funds while maintaining the liquidity necessary to conduct operations on a day-to-day basis.

The primary objective of the organization with respect to its fixed income investments is to ensure the security of principal amounts invested, provide for a high degree of liquidity and achieve a satisfactory investment return.

Other

There have been no changes in the organization's risk exposures from the prior year.

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

**Notes to Financial Statements**

**Year Ended March 31, 2014**

**5. TANGIBLE CAPITAL ASSETS**

	Cost	Accumulated amortization	2014 Net book value
Land	\$ 13,635	\$ -	\$ 13,635
Buildings	485,407	288,796	196,611
Furniture and office equipment	32,648	14,766	17,882
Vehicle	27,926	21,337	6,589
Computer equipment	37,417	17,169	20,248
	<u>\$ 597,033</u>	<u>\$ 342,068</u>	<u>\$ 254,965</u>
	Cost	Accumulated amortization	2013 Net book value
Land	\$ 13,635	\$ -	\$ 13,635
Buildings	468,392	278,896	189,496
Furniture and office equipment	28,332	13,369	14,963
Vehicle	27,926	19,690	8,236
Computer equipment	27,823	13,306	14,517
	<u>\$ 566,108</u>	<u>\$ 325,261</u>	<u>\$ 240,847</u>

Tangible assets acquired during the year were \$33,775 (2013 - \$12,720). During the year, tangible capital assets were written off and a loss on disposal of assets was recorded for \$672 (2013 - \$11,346) and is shown on the statement of operations.

**6. INTANGIBLE ASSETS**

	2014	2013
Computer software	\$ 14,837	\$ 22,086
Accumulated amortization	<u>7,562</u>	<u>12,960</u>
	<u>\$ 7,275</u>	<u>\$ 9,126</u>

Intangible assets acquired during the year were \$3,397 (2013 - \$0). During the year, intangible capital assets were written off and a loss on disposal of assets was recorded for \$3,854 (2013 - \$0) and is shown on the statement of operations.

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

**Notes to Financial Statements**

**Year Ended March 31, 2014**

**7. LONG TERM DEBT**

	<u>2014</u>	<u>2013</u>
Royal Bank - fixed mortgage, bearing interest at 6.86%, payable in monthly instalments of \$1,617 including interest. Secured by property and maturing June 1, 2015.	\$ 41,631	\$ 57,566
Royal Bank - monthly payments of \$741 including interest at 4.21%. Secured by a general security agreement and maturing August 1, 2013.	-	2,838
	<u>41,631</u>	<u>60,404</u>
Amounts payable within one year	<u>(17,081)</u>	<u>(18,790)</u>
	<u>\$ 24,550</u>	<u>\$ 41,614</u>

Principal repayment terms are approximately:

2015	\$ 17,081
2016	18,290
2017	6,260
	<u>\$ 41,631</u>

**8. APPROPRIATED NET ASSETS**

	<u>Building Fund</u>	<u>Program Fund</u>	<u>Mental Health Fund</u>	<u>2014</u>	<u>2013</u>
Balance, beginning of year	\$ 68,094	\$ 78,334	\$ 78,334	\$ 224,762	\$ 164,953
Increase (decrease)	16,548	16,548	16,549	49,645	59,809
	<u>\$ 84,642</u>	<u>\$ 94,882</u>	<u>\$ 94,883</u>	<u>\$ 274,407</u>	<u>\$ 224,762</u>

**9. SICK LEAVE BENEFITS**

The organization provides non-vesting sick leave benefits to its employees pursuant to union agreements and administrative policies. At March 31, 2014 management estimates that accumulated sick leave credits total \$268,074 (2013 - \$231,028).

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

**Notes to Financial Statements**

**Year Ended March 31, 2014**

**10. 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>2014</u>	<u>2013</u>
Total contributions during the year	<b>\$ 47,985</b>	<b>\$ 42,920</b>

**11. COMMITMENTS**

As at March 31, 2014, the organization has an operating lease on its office equipment at \$5,044 per year. The lease for new equipment will replace the expired lease in 2014.

**12. DONATIONS**

During the year, a one time donation was received from Shoppers Drug Mart Life Foundation for \$52,303 of which \$45,475 was not applied to a specific project. As the donation is not restricted the entire donation is in donation revenue and is included in the unappropriated surplus. During the prior year, there was a bequest received for \$15,333 which is included in donations revenue.

**13. DEFERRED REVENUE**

Deferred revenue consists of the following:

	<u>2014</u>	<u>2013</u>
Canada Post	\$ -	\$ 36,350
Canadian Labour Congress	<b>2,933</b>	2,933
Community Initiatives Fund - Weyburn	<b>15,833</b>	-
Eli Lily	-	4,546
Other	<b>3,145</b>	2,601
RBC Foundation	<b>20,833</b>	29,168
Regina Qu'Appelle RHA	-	6,250
Sask Arts Board	-	3,750
Sask Justice - Operating	<b>152,593</b>	60,000
Sask Justice - Startup	<b>34,647</b>	-
Shopper's Drug Mart	-	26,395
The Co-operators	<b>9,000</b>	40,000
	<b>\$ 238,984</b>	<b>\$ 211,993</b>

**CANADIAN MENTAL HEALTH ASSOCIATION (SASKATCHEWAN DIVISION) INC.**  
**Notes to Financial Statements**  
**Year Ended March 31, 2014**

14. OTHER GRANTS

Other grants are comprised of the following:

	2014	2013
Canada Post	\$ 36,350	\$ 28,650
Community Initiatives Fund - Weyburn	4,167	-
Eli Lilly	4,546	-
ISC	-	5,000
Other	331	986
RBC Foundation	58,334	20,832
Sask Arts Board	3,750	12,500
Sask Liquor and Gaming Authority	30,264	25,310
Sask Writers Guild	1,000	-
SaskTel	2,500	2,500
The Co-operators	31,000	5,000
	<b>\$ 172,242</b>	<b>\$ 100,778</b>

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

**Salaries and Benefits**

*(Schedule 1)*

**Year Ended March 31, 2014**

	<b>2014</b>	<b>2013</b>
Gambling Awareness Program	<b>\$ 256,562</b>	<b>\$ 200,858</b>
Executive and general	<b>372,625</b>	<b>330,032</b>
Justice Community Support	<b>139,057</b>	<b>-</b>
Public education	<b>34,544</b>	<b>53,207</b>
Resource development	<b>208,938</b>	<b>195,657</b>
	<b><u>\$ 1,011,726</u></b>	<b><u>\$ 779,754</u></b>

The accompanying notes form an integral part of these financial statements

## 2013-2014 Provincial Board of Directors

Grant Rathwell, President  
Darrell Downton, Past President  
Sharon Lyons, Vice-President  
Bill Pringle, 2<sup>nd</sup> Vice-President  
Bryan Leier, Treasurer

### MEMBERS AT LARGE

Noah Evanchuk      Karen Gibbons      Heather Hadjistavropoulos      Chet Hembroff  
Kathleen Thompson      Lindy Thorsen

### REGIONAL DELEGATES

Susan Grohn      Erskine Sandiford      Michael Seiferling      Crystal Bittman

## CMHA Saskatchewan Division Office Staff

Dave Nelson, RPN, RSW, Executive Director  
Phyllis O'Connor, Assistant Executive Director  
Don Powers, Director of Finance & Administration  
Joan Kilbride, Director of Resource Development  
Sharon Wilson, Payroll/Benefits Clerk  
Lynn Hill, Receptionist & Editorial Secretary for Transition Magazine  
Vera Thompson, Telefund Office Supervisor  
  
Donna Bowyer, Director of Friends for Life

Shauna Altrogge, Director, Gambling Awareness Program  
David Jones, Southern Gambling Awareness Coordinator  
Rachel Clare, Central Gambling Awareness Coordinator  
Jackie Phillips, Northern Gambling Awareness Coordinator  
Tricia Martin, Communications Coordinator

Kim Hoffman, Director, Justice Community Support Program  
Garrett MacNaull, Justice Community Support Worker (Regina)  
Lesley Aimoe, Justice Community Support Worker (North Battleford)



**Canadian Mental  
Health Association**  
Saskatchewan  
*Mental health for all*

## MEMBERSHIP FORM

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/Town: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_ Date: \_\_\_\_\_

### MEMBERSHIP TYPE

New                       Renewal

Expiry Date: March 31, 20\_\_\_\_

Amount: \$ \_\_\_\_\_

Please make cheques payable to CMHA

<input type="checkbox"/> Participant	\$ 2.00
<input type="checkbox"/> Personal	15.00
<input type="checkbox"/> Supporting	30.00
<input type="checkbox"/> Professional	50.00
<input type="checkbox"/> Patron	150.00

To become a CMHA member, simply fill out the form and send it, along with your payment, to the CMHA Division office, or contact your local branch.

By joining CMHA you will help support social, vocational and recreational programs designed to help those people affected with mental illness to lead productive lives.

Your membership fees will also be used to help provide education and create mental health awareness throughout Saskatchewan.

Members receive TRANSITION with a regular, current, CMHA membership.

Charitable Organization # 10686 4044 RR0001

### PLEASE INDICATED MEMBER'S BRANCH

<input type="checkbox"/> Battlefords	<input type="checkbox"/> Regina
<input type="checkbox"/> Estevan	<input type="checkbox"/> Saskatoon
<input type="checkbox"/> Kindersley	<input type="checkbox"/> Swift Current
<input type="checkbox"/> Moose Jaw	<input type="checkbox"/> Weyburn
<input type="checkbox"/> Prince Albert	<input type="checkbox"/> Division

DIVISION OFFICE - 2702 12th Avenue, Regina, SK S4T 1J2  
Phone 306 525-5601 or 1-800-461-5483 ● email: [contactus@cmhask.com](mailto:contactus@cmhask.com)

*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 Saskatchewan Lotteries for support.*



RBC  
Children's Mental  
Health Project

