

Sick of Waiting



***What Are We Sick
of Waiting For?***

***Why Are We Sick
of Waiting?***

***Look Inside
to Find Out How
You Got Loud
This Year.***



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

2016-2017 Annual Report

WHAT ARE WE SICK OF WAITING FOR?

- **Timely and accessible mental health care;**
- **Respect and esteem;**
- **Better treatment in society and a stigma-free Canada;**
- **The protection of psychological health and safety at work;**
- **Equal funding for physical and mental health care services;**
- **Better working conditions, job security, and stable housing;**
- **Better mental health education and supports in school.**

WHY ARE WE SICK OF WAITING?

- **Canadians are waiting an unbearably long time for mental health care.**
- **Canadians experience some of the longest wait times for doctors, specialists and in emergency departments compared to peer countries.**
- **Some people report waiting up to a year or more to see a mental health professional.**
- **Thousands of Canadian children in need of urgent mental health care will wait a year or longer for services**
- **The longer we wait for health care, the worse our health becomes; this holds true for mental health problems and illnesses as much as for physical illness**
- **Approximately four-thousand Canadians die by suicide each year, most of whom had a treatable mental illness at the time of their death.**

HERE ARE SOME STATS:

- **While many rely on their family doctors for mental health care, fewer than half (43%) of Canadians could get a same- or next-day appointment with their family doctor the last time they needed medical attention. Compare this to other countries like New Zealand (76%) and the Netherlands (77%)**
- **More than half of Canadians (56%) report waiting longer than 4 weeks to see a health care specialist, compared with the international average of 36%;**
- **Only 63% of patients with mental health problems or illnesses discharged from the hospital had a follow-up with a doctor compared to 99% of all patients who experienced heart failure.**
- **60% of people with a mental health problem or illness won't seek help for fear of being labeled.**
- **Two out of three employees won't tell their supervisor about their mental health problems or illnesses**

WHAT IS CAUSING US TO WAIT?

- **Wait times are long because mental health care is drastically under-funded compared to other parts of the health care system. While the federal government has pledged new funding, Canada still lags behind international peers when comparing the portion of health budget dedicated to mental health services**
- **Mental health problems affect a huge proportion of the population**
- **In any given year, 1 in 5 Canadians experiences a mental health problem.**
- **By the time Canadians reach 40 years of age, 1 in 2 have – or have had – a mental illness.**
- **Presently, Canada's system does not meet the increasing demand for proper mental health care**
- **Canadians will sometimes wait before getting help because mental health problems are so stigmatized.**
- **Canadians can wait indefinitely for some mental health care – like counselling – because it is not publicly funded.**

Table of Contents

Global Ends Policy and Mission Statement	1
Values	2
Our 2016-2017 Provincial Board of Directors.....	3
CMHA Saskatchewan Division Office Staff	4
Executive Director’s Report	5
Associate Executive Director’s Report	6
President’s Report	7
Public Policy Development.....	8
Public Education and Awareness	9
C.A.R.E.	9
Friends for Life	10
Gambling Awareness Program	11
Healing Through Humour.....	13
TRANSITION Magazine	13
Website and Facebook	13
Individual and Family Support	14
Direct Service	15
Justice Community Support Program	15
OSI-CAN	17
Our Branches	18
Battlefords	18
Kindersley	19
Melville.....	20
Moose Jaw	21
Prince Albert	21
Regina	24
Saskatoon.....	26
Swift Current.....	27
Weyburn	29
Resource Development	31
Financial Statements	33
Our Sponsors.....	Back Cover

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**

People with lived experience of mental illness, 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 strike 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.



Our 2016-2017 Provincial Board of Directors



Chet Hembroff
President



Noah Evanchuk
Member at Large



Darrell Downton
Regional Delegate



Grant Rathwell
Vice-President



Karen Gibbons
Member at Large



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Regional Delegate



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Kyle Moffatt
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Micheal Halyk
Regional Delegate



James Schwindt
Member at Large



Erskine Sandiford
Regional Delegate



Len Taylor
Regional Delegate



Karen Weran
Regional Delegate

CMHA Saskatchewan Division Office Staff

Phyllis O'Connor, Executive Director

Dave Nelson, Associate Executive Director

Don Powers, Director of Finance & Administration

Vera Thompson, Resource Development Coordinator & Telefund Office Manager

Sharon Wilson, Payroll/Benefits Clerk

Isabelle Johnson, Clerk

Donna Bowyer, Director, Friends for Life

Shauna Altrogge, Director, Gambling Awareness Program

Aeleisha Brooks, Southern Gambling Awareness Coordinator

Jenna Lothammer, Central Gambling Awareness Coordinator

Lorraine Scott, Northern Gambling Awareness Coordinator

Daniel Blondeau, Communications Coordinator

David Jones, Director, Justice Community Support Program

Garrett McNaull, Justice Community Support Worker (Regina)

Lesley Aimoe, Justice Community Support Worker (North Battleford)

Lisa Harder, Justice Community Support Worker (Saskatoon)

Julius Brown, Provincial Coordinator, OSI-CAN

Rebecca Rackow, Consultant, C.A.R.E. Program

CMHA Saskatchewan Division

Executive Director's Report

Phyllis O'Connor



Another year has come and gone. 2016-2017 was a time of change and action for CMHA Saskatchewan Division.

Back in June 2015, the Provincial Board voted approval for the formation of a new CMHA Branch in Melville. Work began in August 2015 to set everything up, and by early 2016 CMHA Melville Branch was in full operation. We welcome them to the CMHA family.

In August 2016, we welcomed Julius Brown to fill the position of Project Coordinator for the OSI-CAN PTSD support project. Julius is a confirmed strategist with proven leadership skills. He comes with a background in the United States Air Force as well as education in the fields of Criminal Justice and a minor in Business Management. Julius has put a lot of time and effort into building the OSI-CAN team, establishing networks of services in the communities where we

have support groups, and in expanding those support groups to other communities in the province. A full program report is included in this Annual Report. We welcome Julius to CMHA Saskatchewan Division. He has already proven to be a real asset to the project and those we serve.

In September 2016, several CMHA Staff and Board Members had the opportunity to attend the CMHA National Conference "Together by Design." This was a first-of-its-kind opportunity for key individuals and organizations in mental health, mental illness and addiction to put their collective minds together to bridge these sometimes disparate sectors. Thought leaders, researchers, people with lived experience, service providers and front-line workers came together to advance thinking and practice in mental health and addictions. The conference provided a robust and stimulating program of keynote speakers, presentations, panel discussions and excellent networking opportunities. I think we all came back with a wealth of new resources and ideas that can be applied to our work here in Saskatchewan.

In October, we welcomed Isabelle Johnson to the position of Front Desk Clerk. She comes with a great deal of experience in senior clerical positions as well as desktop publishing. Isabelle is also fluently bilingual (English/French), which will prove to be very helpful working with branches and divisions across Canada, as well as providing service here at Division Office.

Also in October, Daniel Blondeau joined the staff at CMHA Saskatchewan Division as the GAP Communications Coordinator. Daniel's skills in the area of graphics design and social media have already had a major impact on our social media and the materials we develop. His contributions to our work are very much appreciated.

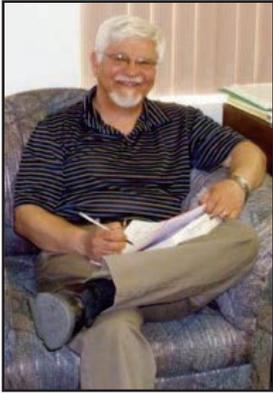
In February 2017, we attended the CMHA Bottom Line Conference. This conference provided an opportunity to share real experiences and successes while working toward the common goal of transforming Canadian workplaces into psychologically safe and supportive places where everyone can work safely and thrive. The theme of this year's Bottom Line Conference was "Transforming Workplace Culture: Agents and Allies." The conference provided a connection to agents and allies who continue to innovate in the research, technology, law and policy fields—all of whom are helping to create an upward momentum toward a fairer, more productive and satisfying working environment for all.

There are many more activities that will be covered in individual branch and program reports inside this Annual Report, so I won't go into further details regarding all the exciting things happening here at CMHA Saskatchewan Division. Suffice it to say, we are working hard in the areas of education and advocacy for adequate, timely and accessible mental health services in our province.

I want to take this opportunity to thank the Provincial Board, our volunteers and all the staff at CMHA Saskatchewan Division and our Branches for their outstanding support and hard work. Together we really can make mental health matter in the province of Saskatchewan.

Associate Executive Director's Report

Dave Nelson, RPN, RSW



This past year has been very active on the advocacy, public policy input and client support front.

Activities have included:

- Hiring a consultant to work collaboratively with Regina Qu'Appelle and other select Health Regions to discuss program gaps and set priorities if sufficient funding was available.
- A great deal of time and effort working with the Disability Income Support Coalition to reverse inappropriate cuts to persons receiving the SAID benefits and a successful reversal of Government policy on that issue. This affected several thousand persons with mental health and addictions issues in the province.
- Discussions with fundraisers for furniture and equipment for the new Saskatchewan Hospital, Battlefords as to how CMHA could work to support this worthy cause.
- Working collaboratively with the Ministry of Health and Regional Health Authorities regarding information to educate consumers regarding ECT with the goal of adequate and uniform information packages to all requiring them.
- Attendance at a very good Bottom Line Conference regarding workplace mental health and wellness, held in Vancouver in February 2017.
- A meeting with the Minister of Health on February 28, 2017 to discuss potential improvements with the move to a single Health Board.
- The hiring of a consultant to follow up with the Saskatchewan Human Rights Commission regarding the systemic discrimination paper presented in November 2016, drawing attention to systemic discrimination in the funding and delivery of mental health services.
- The hiring of a consultant to develop a curriculum and obtain funding for a C.A.R.E. program to support caregivers in our sector, both family and professional.
- Attended a conference sponsored by the Saskatchewan Separate School Board on dual diagnosis counselling techniques for persons with intellectual disability and mental health issues.
- Attended as a member of the Mental Health and Addictions Referent group since July 2016.
- Provided field mentoring and instruction to Social Work students interested in public policy development.
- Several interviews in the media regarding SAID benefits, cutbacks to mental health CBOs, etc.
- Met with government Human Services Caucus regarding Social Services and mental health issues.
- Facilitated Mental Health Coalition meeting featuring CMHA National Executive Director, Patrick Smith, in November 2016.
- Supported a variety of family/consumer calls regarding referrals and other related information.

President's Report

Chet Hembroff



This has been an especially busy year for CMHA Saskatchewan Division.

The Saskatchewan Division has 10 branches located throughout the province, and has direct responsibility for the operation of 4 branches. As well, we lead three province-wide programs: the Gambling Awareness Program (GAP), the Justice Community Support Program, and the Friends for Life, plus one new program, Operational Stress Injury - Canada (OSI-CAN), which began in the spring of last year in partnership with the Legion.

Once again, we offer our many thanks for the dedication and hard work of our Executive Director, Phyllis O'Connor, and our Associate Executive Director, Dave Nelson. The efforts of our executive directors to ensure that the mental health needs of Saskatchewan's residents are known, important, and supported are worth considerable praise.

One year has passed since the beginning of OSI-CAN, and Phyllis and Julius Brown have put in a significant amount of work to provide mental health programming to a new demographic across Saskatchewan. With Phyllis's help, OSI-CAN quickly took off and is now filling a gap in the lives of veterans and community first responders.

Phyllis, her team, and our dedicated planning committee have successfully shaped the Wade Moffatt Gala into a fundraising event for producing funds for CMHA and mental health programming, this year raising approximately \$20,000.

As in the past, Dave has been an amazing advocate for mental health funding, which was especially important in this year of budgetary turmoil. When provincial budget cuts began to target our province's most vulnerable, Dave made several public appearances and held many private meetings with Ministers of Health and Finance to bring this issue to light and affect significant change.

Phyllis and Dave also oversee the daily operations of CMHA Saskatchewan Division. On behalf of the Board, I want to thank them and the Staff for the work that we successfully do each year in support of people with mental health concerns, whether it be fundraising, accounting, program management, or providing and examining service needs. The staff at CMHA contributes to CMHA's continuous efforts to improve the service provisions and quality of life for mental health in Saskatchewan.

In order to meet the “ends” policies of CMHA (Saskatchewan Division), our work is focused on five main areas:

- **Public Policy Development**
- **Public Education and Awareness**
- **Individual and Family Support**
 - **Direct Service**
- **Resource Development**

PUBLIC POLICY DEVELOPMENT

Disability Income Support Coalition

CMHA Saskatchewan Division continues to take an active role in Disability Income Support Coalition (DISC). 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.

During 2016-2017, DISC was successful in getting the government to reverse changes to the program that would have resulted in reduced benefits for many individuals. Good media and public support all contributed to that success. Our 4th DISC survey also helped cement our position in place with 90% of the 1,100 people surveyed feeling payments should be increased.

2017 will see significant leadership changes in DISC. CMHA Saskatchewan Division is committed to actively supporting the important work of this group.

Advocacy Work

The advocacy work done in conjunction with CMHA National Office, CMHA Ontario Division and CMHA Toronto Branch has had a successful outcome with additional resources for mental health and addictions being provided by the Federal Government. While the additional resources will not bring mental health up to the level of funding recommended by the Mental Health Commission of Canada, it is a step in the right direction. Advocacy efforts will be ongoing to make sure that these additional resources are put into areas where they can have the greatest impact, such as actualizing some of the recommendations in the already existing Saskatchewan Mental Health and Addictions Action Plan.

Human Rights Commission

In 2016, CMHA Saskatchewan Division developed a document entitled “A Case for an Investigation by the Saskatchewan Human Rights Commission into Systemic Discrimination of the Mental Health System in Saskatchewan,” co-authored by David Nelson, Associate Executive Director, and Rebecca Rackow, BA (Hons.), Social Work Practicum Student. Copies of the report are available by contacting CMHA Saskatchewan Division at contactus@cmhask.com. This was presented to the Commission of the Saskatchewan Human Rights Commission on November 16, 2016. The document lays out a history of discrimination extending from the time of deinstitutionalization to the present day. Since November, meetings have been held between CMHA Saskatchewan Division and Human Rights staff with a view to collaboratively developing recommendations on where Federal Transfer Fund monies should go to begin to address this issue.

Provincial Health Regions

CMHA Saskatchewan Division has also worked in collaboration with the Ministry of Health to collect information packages on Electroconvulsive Therapy from the various Health Regions in the province. A review is being done to ensure continuity and content of information packages are being provided to patients. This will be especially important in view of the proposed move to a single Health Region.

A consultant has also been hired to contact the Mental Health and Addictions leadership in several Regional Health Authorities to discuss issues around positive changes those in leadership would like to see and/or already have underway in their respective regions, as well as potential issues around the consolidation of Regional Health Authorities. The consultant will also set up small family/consumer committees to attend meetings in each Health Region to provide community feedback/input into these changes. 2017 will be a year of change in Saskatchewan, and CMHA Saskatchewan Division is taking a keen interest in developments as they unfold.

Mental Health Coalition

CMHA Saskatchewan Division continues to take a lead role in the Saskatchewan Mental Health Coalition, a nonpartisan advocacy network of individual, 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 existing programs.

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 & AWARENESS

CAREGIVER AFFECTED RECOVERY EDUCATION (C.A.R.E.)

Rebecca Rackow, Consultant



The Caregiver Affected Recovery Education (C.A.R.E.) program is a brand new program aimed at helping people who care for vulnerable others. The goal of this education is to help formal and family caregivers maintain their own mental health by learning to prevent such things as Compassion Fatigue, Vicarious Trauma, and burnout and by recognizing these things before it affects their own mental health and their ability to provide adequate care for others. This year has seen the development of C.A.R.E. program education materials such as slides, a general workbook, and specific modules for presentations as well as brief, informative brochures. There has been some opportunity to promote this program to a local church congregation who expressed interest, the Rotary Eastview Club, and on the Listen Up! program on CJTR with Dave Morgan. The C.A.R.E. program is also working in collaboration with OSI-CAN to create a spousal support program for those who care for people with OSI/PTSD.



C. Caregiver
A. Affected
R. Recovery
E. Education

A program brought to you by:



Canadian Mental Health Association
Saskatchewan



"Self-care is not selfish or self-indulgent. We cannot nurture others from a dry well. We need to take care of our own needs first, then we can give from our surplus, our abundance."

Jennifer Loudon

*Pioneer of the
Self-care movement*





FRIENDS FOR LIFE Donna Bowyer, Director

Every year I get to travel and learn more about Saskatchewan. The new places I went this year were Milton, Watson, McLean, and Melfort. Each one holds a memory for me and something I've learned.

With Talk Today, CMHA National program, I had the opportunity to go meet the Western Hockey League teams of the Swift Current Broncos, Prince Albert Raiders, and Moose Jaw Warriors. With this program, CMHA provided safeTALK and the local CMHA Branch then provided the support to the team; in some cases, the team did some fundraising for the local CMHA Branch. With each team, I found the players and the support staff interested in learning more to be able to help or offer support to their team members as well as benefit their personal life.

It was also good to see the CMHA branches build more capacity within their branches when it comes to doing more community education and responding to the growing desire of their communities to become more educated and able to respond to the needs they see around them. Some branches were already doing this, and others are now taking up this area as part of their mandate. This makes us all stronger. Unfortunately, the rural areas where there aren't branches are still struggling to get their needs met, to know where to go and what they need. There is also the additional cost for transportation and time to go into the rural areas to provide this necessary mental health/illness understanding.

One area that I am noticing is in school age children. I am finding that the schools are looking for more opportunities to bring mental health/illness training into the school to be able to help the youth as they are moving forward in their life. In the near future, I will also be working with one school district to look at developing three sessions for parents to get a better understanding of mental illness in children with an emphasis on depression, and possibly including or adding another session on anxiety.

Businesses now recognize that they need to pay attention to the mental health of their employees and are doing training throughout their organization, through short and longer sessions. It seems to be almost like a wave: it starts off small and then slowly builds within the organization, with the ripple effect moving to other organizations. I often get a call where they start with, "I got your contact information from someone in organization. We would like some information on mental health in the workplace. Can you come to a staff meeting and give us some information for 30 minutes on?" That's the beginning.

The other area that seems to be growing is the concept of mindfulness. People are wanting to know about how to incorporate mindfulness into their life or their organization. People are wanting to look at the prevention side of mental health to become more proactive and not waiting to respond to an illness. This is definitely good news.

From the time I started working with CMHA, I have always seen my job as *working my way out of a job*. Of being in a community where we take care of our own mental health and the mental health of those around us, and not leaving those that are struggling alone and by themselves. I am optimistic that we are moving in the right direction on an individual basis. There is still a lot of work to do before we get there though.

It has been a good year, and I look forward to the upcoming year and new opportunities the Friends for Life program will find.



Shauna Altrogge, Director

The Gambling Awareness Program (GAP) is a long-standing program of the CMHA Saskatchewan Division, funded by the Community Initiatives Fund. CMHA wishes to express our gratitude for their continued financial support of our program.



GAP educates the people of Saskatchewan on responsible gambling and the potential risks associated with gambling. In 2016-2017, educational sessions were delivered to youth, post-secondary students, correctional and treatment facilities, RCMP cadets, some of our CMHA branches, and a range of human services agencies.

This year we welcomed Jenna Lothammer as the term Central Coordinator and Dan Blondeau as our Communications Coordinator, joining their colleagues Aeliesha Brooks and Lorraine Scott.



Communications carried forward our social media strategy and saw our engagement and following grow on Facebook. We were excited to launch two new animated videos focusing on In App Purchases and on how social gaming has grown. The addition of some new tools, such as a camera and mic, will allow GAP to develop some additional video content that can be shared in a range of ways. We look forward to working with our partners, such as Mobile Crisis and the Responsible Gambling Program at Casino Regina and Moose Jaw, to bring this to reality.

The coordinators visited over 90 different communities across the province this year, our dedicated team thus delivering an impressive 288 presentations! That is a lot of road time.

The GAP display was prominent at 40 community events, ranging from health and career fairs, food banks, and Welcome Week events at universities and colleges to bringing display programming to the public at shopping malls and hospitals.



DROP ZONE PLINKO

A new Plinko Game, designed as an educational responsible gambling (RG) tool, was incorporated into the range of display components, and was a hit with all age groups. The game is adaptable and quite versatile to meet the needs of different groups, environments, and events.

This year was one of accomplishment in GAP's Youth Outreach strategy. Staff visited 139 classrooms, sharing information, engaging students in a number of ways to expand their understanding of gambling. The youth module was revised to introduce some popular trends that are affecting kids. Talking with students "where they are at" and exploring the blurring lines between video gaming and gambling seems to resonate and lends credibility to the information shared. Keen interest and endorsement from a Regina Catholic School Division, Partnerships Consultant has raised our profile at the school level. It has culminated in a large number of presentations to schools in this region with promise it may generate future leads from other school divisions.

The Problem Gambling Committees met regularly and focused on different projects throughout the year. The Regina Committee sought provincial funding to help promote the new features of the Problem Gambling Help Line; although funding was not secured, the group continues to work together and seek out other opportunities. The Saskatoon and PA Committees continued to meet to share information, network, and develop more local-type projects. GAP also participates in the Prince Albert Addictions Awareness Committee (PAAAC) that launched and distributed COPE Magazine, written by youth that have experienced addictions, and are planning a Professional Development day to bring a number of programs in the community together to help support their clientele in the northern part of the province, expecting 150 people.



What people said about GAP this year...

“

I really think what you guys are doing is amazing... Glad to see a program exists to educate people on gambling. I am from Bosnia, educated in Germany, where mandatory curriculum included gambling. This most definitely made an impact on me!

U of R Student

I learned the psychology behind gambling games—the session explained the psychological reasoning behind why gambling becomes addictive (operant conditioning and dopamine). Very interesting! Thank you.

**Adolescent Development Student,
U of S**

I used to gamble as a way of coping with life. Having home, life, job and school problems really takes a toll... After a while I realized that I was overdoing it when there would not be much food in the house or I was wearing crappy looking clothes. I still gamble, but not as much. The session really helps those who don't understand about the effects of gambling and how it all works.

Lakeland College Student, Lloydminster

The presentation was very well done. Informative, clear, to the point. Made me realize different effects of gambling.

RCMP Cadet

Thank you! I'm seriously going to walk over to the casino right now and ban myself. I'm done with this. This is stupid; it's a waste of money. I really don't want to do this anymore.

RQHR, In-Patient

Thank you for making this SO relevant for my students! They could easily make connection to your presentation and I appreciate the focus on living life with BALANCE. Hands on games and videos were engaging for the students as well. Having outcomes from curriculum embedded in your presentations helps provide focus for learning—
THANK YOU!

Middle Years Teacher

I didn't know what gambling was until today—they are more than just games. My friends are constantly on their phones and I want to make sure they are not gambling.

**MACSI Client,
Prince Albert**

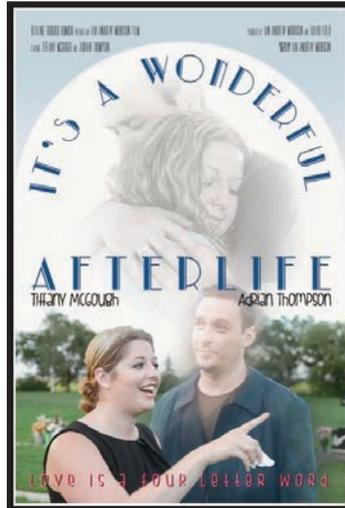
”

HEALING THROUGH HUMOUR

Ian Morrison
Program Facilitator



Healing through Humour is a program run through the Canadian Mental Health Association Saskatchewan Division in partnership with the Schizophrenia Society of Saskatchewan that teaches people living with mental health issues the art of comedy writing and performance. This year, we had a Variety Night fundraiser performance at the Artesian in Regina, and completed our first feature film, "It's a Wonderful Afterlife," which was screened at the Cineplex cinemas in Regina. We are in the process of recording our third comedy album. We hope to be giving you lots more comedy in the upcoming year.



Transition Magazine

Transition Magazine is published three times a year. 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/mental illness issues. Transition Magazine is also made available in PDF format on the CMHA Sask. Division website at <http://sk.cmha.ca/documents/transition-magazine/>

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 and Social Media

CMHA Saskatchewan Division has a website, Facebook, and Twitter presence.

Check them out to get the latest news, events, and information on a variety of mental health topics.



LATEST TWEETS

How do you feel about talking about mental health where you work? Do you feel like it's a safe environment?
<https://t.co/XDuvCXZnaa> May 9, 2017 8:03 pm

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 individuals, consumers and their family members on a wide variety of issues.

The following illustrates the type of assistance provided by the CMHA Saskatchewan Division Office staff throughout the past year:

Individual/Family Support Tracking		2015-2016				
Information re Caller:	Male	38	Female	78		
Calling for:	Self	51	Friend/Family	54	Coworker/Employer	8
	Tenant	1	Patient	1		
Reasons for Call:						
Seeking contact information		4				
Seeking general mental health information		17				
Seeking services/counselling		61				
Issue with insurance/LTD						
Workplace issue		9				
Legal issue		7				
Housing issue		4				
Addiction/alcohol use						
Education issue		1				
SAID/Social Assistance/Disability Pension issue		8				
Hoarding issue						
Immigration Issue		1				
Senior Issue		1				
LGBT						
Other issues		4				
	TOTAL CONTACTS	117				
Attempted to get information from other organization?						
Yes	8	No	51	Unknown		

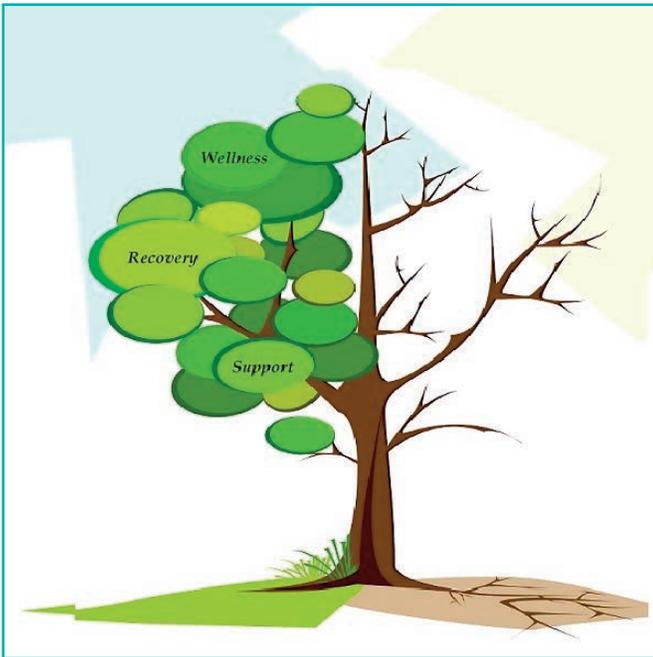
The above is just an overview of the type of requests for individual and family support received at Division Office on a regular basis. Division Office staff also provide verbal and print information on a wide variety of mental health topics—such as schizophrenia, bipolar disorder, depression, obsessive compulsive disorder, stress, workplace mental health—and how to contact the mental health clinic on an almost daily basis.



DIRECT SERVICE

JUSTICE COMMUNITY SUPPORT PROGRAM

David Jones, Director



The image of a tree is a common representation of life. We have adopted this image to convey that even a healthy life includes the reality of traumatic experience. The principle themes of the program – Wellness, Recovery, and Support – hold forth the potential of this healthy balance despite an ever-present sense of emptiness or suffering. For the reality of both hope and despair are part and parcel of a dynamic recovery process.



Program Description

The **Justice Community Support Program (JCSP)** is a partnership between the Saskatchewan Ministry of Justice and the Canadian Mental Health Association (Saskatchewan Division) Inc. as part of the provincial **Serious Violent Offender Response (SVOR)**.

Set up in 2013, the SVOR is a comprehensive, targeted, and evidence-based approach on public protection policy by reducing the risk of past offenders being involved in serious, violent crimes. Various agencies within the justice system—such as adult corrections, public prosecutions, and police services—along with the CMHA program collaborate on **integrated case planning** while leveraging innovative tools such as secure, web-based data management systems and integrated training.

This initiative is currently operating in Saskatoon and North Battleford and, in the fall of 2017, will be given formal status in Regina.

JCSP Workers' Role

The JCSP team is focused on individual rehabilitation through the delivery of one-on-one support and the establishment of links with available community resources and programs. A client's need for resources may include housing, income support, I.D. documentation, education and/or employment application, crisis response, anger management, and social recreation activities. With respect to client health concerns, it may be necessary to arrange appointments with a general practitioner, the mental health clinic and a psychiatrist, dentists, optometrists, or other health professionals.

The JCSP worker offers the client a period of intensive, interpersonal involvement to anticipate and resolve practical and emotional barriers to healthy living in the transition from prison to community. The client is encouraged to establish a positive community resource base to sustain the objective of "staying out of jail" beyond the transition of probation and the JCSP intervention. The well-being of the client improves the possibility for a crime-free future and fuller acceptance and participation in community.

The continued achievements of JCSP are in great measure due to the dedication and resourcefulness of the staff who are committed to the welfare of their clients. Each worker assists from 10 to 15 persons in any given period with many completing the program and some, unfortunately, dropping out. In all cases, it is an act of hopeful expectation to work with people who are at various levels of distress and to coordinate community services for their well-being. In the coming year, with provincial budgetary cutbacks, we see this as a most-challenging prospect.



Left to right: Garrett MacNaull (Regina), Lesley Aimoe (North Battleford), Lisa Harder (Saskatoon)

Highlights of 2016

- Staff have taken advantage of numerous training opportunities with tangible application to client work. Trauma, mindfulness, management, and interviewing skills have been the primary focus.
- A positive and cooperative atmosphere exists among the partners with a growing sense of respect and value in having CMHA involved in the SVOR.
- Stability is maintained despite changes in partnership personnel, with staff seen as resources for these changes.
- Initiative to develop a client management database system with a focus on client statistics, client program flow, and community impact.
- Continuing to develop a program image/identity that contributes to a professional and public representation of the program.
- Program presentation to the Northeast Youth Violence Reduction Partnership (Pelican Narrows, Sandy Bay, Deschambault Lake)—a youth violence reduction program. Follow-up likely in 2017!

Goals for 2017-2018

Further solidify the expertise and competences of all staff.

Define and promote the specific and unique role of the program within the partnership.

Prepare for possible program expansion by adapting the program infrastructure to include client management database tracking and social impact reporting.

Create a visible program identity.

Prepare an “awesomely incredible” presentation of the JCSP for the CMHA National Conference in September 2017.

OSI-CAN (OPERATION STRESS INJURY/PTSD SUPPORT INITIATIVE)

Julius Brown, Provincial Coordinator

OSI-CAN is a support group initiative with a target group of military, first responders and corrections, still serving and veterans, professional or volunteer. We originally started up in Regina but are now located in Weyburn, Moose Jaw, Saskatoon and Prince Albert. And we are still expanding throughout the province. One does not need an OSI/PTSD diagnosis or referral to attend our group. It is through our groups that other needs are identified and routed through our network of services providers.

We also have a support group for the Spouses of OSI sufferers and a Caregiver Affected Recovery Education program. Additional supports provided are housing, vocational training, counseling, psychosocial rehabilitation, PTSD service dogs, and Equine Assisted Therapy. The program continues to grow as we find more ways to help our men and women find recovery. #osicanrecover



**Operational Stress Injury/
PTSD
Support Initiative**

**Weekly Peer Support
Groups**
See Details Inside.

Partnered with



**“Resources for those who support
country and community.”**



&



**Operational Stress Injury/PTSD
SPOUSAL SUPPORT GROUP**

Bi-Weekly Support Groups
See Details Inside.



**Resources for the SPOUSES and Adult
family & friends of those who support
country and community**

Partnered with



BATTLEFORDS BRANCH

Jane Zielke de Montbrun, Executive Director

During the last week of April, CMHA Battlefords Branch moved to 1602 103rd Street, North Battleford. It is so exciting for us to be in our new home! We now have the space to effectively deliver programs and better manage the growth this organization has experienced in the last few years. Our organization continues to deliver social/recreational, life skills, and work experience programs to members. Drop-in program participants will enjoy the new space and our lunch program folks love their kitchen space. Our new home is accessible to all, including those with mobility challenges.

Main floor



Consultation room with computer access



Upstairs Common Area

Fundraising for our new building continues until we reach our goal of \$615,000. To date, board members and volunteers have raised \$355,000, and we have secured interim financing until our goal is reached. We have also tentatively sold our former location, which should realize another \$90,000. Our Garden Party is slated for June 16th and we hope this will bring us closer to reaching our goal.

At present, we have seven board members representing approved home operators, Community Mental Health Nurses, CMHA members and our community. We employ three FT program coordinators, three PT program assistants, and one PT job coach. Our seasonal staff attached to the David Laird Campground include three front desk attendants and a PT job coach. Two summer students will also join us this year with the assistance of grants from the federal and provincial governments.

The social recreation program participant count this past year is estimated at 2,000, while between 40 and 50 members took part in work experience. Life skills sessions were attended regularly by 30 individuals separated into three groups. As of March 31, 2017, we had 163 members, of which 65 were new to our organization.

Mental Health Week (MHW) 2017 events included a flag raising ceremony at North Battleford City Hall, our annual Walk for Awareness and a free community BBQ sponsored by Battle River Treaty 6 Health Centre (BRT6HC). Edwards Society and Saskatchewan Hospital supported MHW 2017 with a basement/bake sale and Talent Show, respectively. Our organization is holding a Semicolon Tattoo Day with all proceeds going to our building fund. We are grateful to Marc'd Up Tattoos in Turtleford for sponsoring this event. A Mental Health Fair will be held at Territorial Mall with Maternal Mental Health, Saskatchewan Hospital New Beginnings, AMGITS, Registered Psychiatric Nurses Association of Saskatchewan, residents of Saskatchewan Hospital (providing an art demonstration and music), the Balloon Man, and our organization all participating.

The Battlefords community assisted our branch throughout the year with donations for garage sales, support for BBQs and revenue from cash calendar sales. Approximately 150 members attended our 2016 Christmas Social and Dance. Approved Home Operators Association members held a Christmas Stocking Raffle raising \$800 for our building project. Through the generosity of businesses and individuals, all members in attendance received a gift in celebration of the holiday season. Our board of directors and approved home operators provided and served the Christmas supper, which was very much appreciated by all who attended.

CMHA Battlefords Branch delivered I'm Thumbbody and CAPSS to children in four schools, and we continue to promote the importance of mental health in our community. We are the newest recipient of the Community Air Time award, which gives us extensive advertising on our three radio stations. We thank NorSask Farm Equipment and CJNB, Q98, and The Rock for this sponsorship.

In closing, sincere thanks are extended to Prairie North Health Region, CMHA Saskatchewan Division, BATC-Community Development Corporation, North Battleford Lions Club, North Battleford Kinsmen Rodeo, Battlefords United Way, W. Brett Wilson and Family Foundation, SPRA, Kinsmen TeleMiracle, individuals donors, and community volunteers for their support of CMHA Battlefords Branch this past year.

KINDERSLEY BRANCH

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 invite collaboration: CMHA 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 to connect those in need with many other treatment and informative sources. We serve the consumers and families in our communities through information, presentations, and support groups to assist in meeting mental health needs and to offer support in advocacy and coping skills as needed.

Kindersley Branch takes part in a variety of fundraising initiatives including selling cash calendars. It held 2 bake sales in 2016 and 1 so far this year, 2017. One of the community actions facilitated by the CMHA Kindersley Branch is the Community Christmas Hamper Program. This is the longest-running population health promotions program in the health region. Under this program, low-income families can apply to receive a food hamper for Christmas. In December 2016, the need was once again high, providing Christmas Hampers to 151 families in the Heartland Health Region. That worked out to 144 children and 190 seniors and adults.

The CMHA Kindersley Branch receives numerous invitations throughout the Heartland Health Region to provide various presentations, trainings, and programs. In 2016, we did 34 events covering 9 communities. So far in 2017, January, February, and March, we've held 13 events in 9 communities. Through this service, the CMHA Kindersley Branch is linked into the communities within the health region to do population health promotion, prevention and education, referrals and advocacy. The Kindersley Branch Coordinator and the Heartland Health Region Community Mental Health Nurses and Counselors have partnered to provide presentations to schools and groups in several communities throughout the Heartland Health Region. Some of the topics covered are:

- **Support Group** – Kindersley Support group is no longer meeting. A Mental Health Support Group in Eston was set up in partnership with the town of Eston and the Health Region with a Volunteer and the Branch President, who attends as time allows. Many resources and information are provided to this group as requested. The Branch Coordinator receives calls with questions and concerns and provides advocacy as needed to the members of this group as well as community members in other communities in the health region.

- **Depression/Anxiety/FRIENDS Program/LLTTF Program/Presentations** – In 2016, the Branch Coordinator provided 12 presentations on Anxiety and Depression to 824 individuals and 5 Anxiety and Depression presentations so far in 2017 (3-month period) to 90 individuals. The Branch Coordinator did a PTSD presentation on Remembrance Day to 15 individuals. The Branch Coordinator provided programs, information and resources on Anxiety in Kids with 6 FRIENDS Program sessions to 300 students and adults. The Branch President and Coordinator provided 13 Living Life To The Full (LLTTF) Program Sessions to 64 adults and 34 students. There was also 1 presentation by the Branch Coordinator on Tobacco for 34 students and 8 adults; and 1 by the Branch President to 48 students and 9 adults.
- **Suicide Prevention** – There were 4 safeTALK trainings provided in the Health Region in 2016 to 47 students and 43 adults. This brings the total of students trained in safeTALK to 287 and 800 individuals (students and adults) trained by the CMHA Kindersley Branch in safeTALK in the Health Region to date. In 2016, we had 7 interventions, 1 attempted suicide and 1 completed in the Health Region. We did 6 interventions involving high school students and 1 adult. As a result of the suicide, we received 11 requests for the safeTALK training. So far this year 2017, we have had 6 more interventions, 4 students as young as grade 5 and 2 adults. Since 2006, there have been 253 suicide interventions in the Health Region by the CMHA Kindersley Branch.
- **Safe Communities** – Our branch works on initiatives within the whole Safe Communities model to promote mental health and wellness through a comprehensive range of community-based services. Farm safety is important to our rural agricultural communities in prevention of accidents and having safe mentally healthy and healthy well-being families. Taking part in these programs and with our farm safety for kids program helps the branch link to our communities in the Health Region. This year, Volunteers did 8 presentations in farm safety to 155 kids who went through our display on grain safety (grain suffocation), PTO safety, and played our "Wheel of Misfortune" and learned about machinery safety. Once again this year, our branch participated in a variety of safe community initiatives with our farm safety exhibits, including a Farm Safety Presentation by the Branch Coordinator to 36 students and 12 adults.

The CMHA Kindersley Branch provides pamphlets and information displays for the Heartland Health Region Mental Health Services, The Salvation Army, Spokes Family Resource Center, the Crisis Center, schools and various groups as requested. The pamphlets are provided to us by CMHA Division. Many people who are experiencing symptoms of a mental illness have lost touch with their leisure lifestyles or have become socially isolated. Through the SPRA Grant, we have been able to fund community resources for participation in the following recreational activities for some of our consumers in the health region: local hockey (9), baseball (7) and football (3) games, North Battleford swimming day trips (3 outings). These leisure activities improve social skills to enhance enjoyment and enable consumers to build better relationships. Community committees that we are involved in are KICS (Kindersley Integrated Children' Services), KFCC (Kindersley Food Collation Committee) and other various community interagency committees throughout the Health Region, which we try to attend as time allows. The Kindersley Branch has 5 active Board members and 10 active program volunteers. Our programs are delivered within the Population Health Promotions model in which partnerships are formed with key organizations, such as the Heartland Health Region, Community Councilors, schools, town administration and other CBOs in the communities to provide our residents the resources, tools and education on mental health topics and to improve overall Mental Wellness in our Health Region.

MELVILLE BRANCH

Tim Ziola, President



The Melville Branch of the CMHA has had a very busy and fruitful year. Our year began with our first "Get Loud for Mental Health" event held on May 2, 2016. We invited the community to listen to Kara Molnar, a Melville branch board member and Registered Psychiatric Nurse, speak on the signs and symptoms of depression and stress. She also talked about the resources available locally and provincially. The event was well received with nearly 30 people in attendance.

Our branch was very fortunate to be the recipient of a donation (\$520) from a local yoga group (Little City Yoga) who held an event for "Mental Health Week."

On November 21, 2016, we held another event for the community, hosting two sessions with acclaimed stress expert, motivational speaker, and humorist, Gerry Friesen from Winnipeg. The first session was geared toward employers, employees, managers, and supervisors who were looking for better insight and understanding on mental health and stress in the workplace and work/life balance. The second session was for the general public and was titled "Neighbors Helping Neighbors." Gerry spoke about his personal experiences and struggles with mental illness and depression. Between both sessions, we saw approximately 60 people in attendance.



Melville Branch Board (L to R): Sue Sparrow, Michael Halyk, Kara Molnar, Vicki Ottenbriet, Ruth Cooper, Lesia Baker, Tim Ziola, and Kelsey Karius

On Tuesday, March 28th, 2017, our branch held its Annual General meeting at the Melville Community Works (MCW).

We are pleased to announce that Tim Ziola was acclaimed President for the 2017-2018 term. Vicki Ottenbriet will be Vice-President, Lesia Baker treasurer, and Kelsey Karius secretary.

This coming year will be exciting and productive. It was voted on and passed that all board meetings will now take place on the first Wednesday of every month at MCW. This permanent meeting room and date allowed us to hold our first "Mental Health Support Group" on May 3, 2017. This will be an ongoing monthly support group facilitated by our very own Kara Molnar, Registered Psychiatric Nurse.



Our branch is looking at hosting one or two more events for the upcoming year and looks forward to working with our Provincial Division in promoting "Mental Health for All."



Canadian Mental Health Association - Melville Branch presents
2 Seminars with Gerry Friesen
Acclaimed Stress Expert, Motivational Speaker, Humourist
www.gerryfriesen.ca

Gerry comes from a diverse background of experience, learning and discovery. It would appear that he has never found his niche in life and loves talking about it. Never short on humour, because after all humour can be a cover up for much deeper issues, Gerry is bound to share the stories, the experiences, the ups and downs of his life through stories, stories all of you will relate to. As a listener the one thing you can be assured of is that you will find an applicable life lesson through what you hear. Lessons that will help you in bringing back a semblance of sanity to the crazy world we live in.

<p>Seminar 1 Monday, November 21, 2016 – 1:00 p.m. Melville Community Works – 800 Prince Edward Street Approximate 3-hour session</p> <p>\$50.00 per person includes coffee, juice and snacks RSVP to Tim at Pharmasave by Friday, November 18</p> <p>Work/Life Balance & Understanding Mental Illness and Stress in the Workplace</p> <p>Learn what stress is - Stress and Safety - Building Resilience - Living a Balanced Life We live in a fast-paced world. The demands on us keep increasing. How do we bring back a sense of balance in a topsy-turvy world? This session is geared towards employers, employees, managers, supervisors who are looking for better insight and understanding on Mental Health and Wellness in the workplace.</p>	<p>Seminar 2 Monday, November 21, 2016 – 7:00 p.m. Melville Community Works 800 Prince Edward Street</p> <p>Seminar 2 is FREE and is open to the public.</p> <p>Neighbors Helping Neighbors</p> <p>When communities struggle whether through financial difficulties, loss of a loved one, loss of services or numerous other challenges, how can we help each other? Hear about One person's journey – 6 R's of Stress Management – Helping Others Care for the Caregiver.</p>
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Let's start the conversation!

For more information call Tim Ziola at 306-728-1068 or Kevin Kirkwood 306-728-9888

Sponsored in part by Kevin Kirkwood Farmfit Management, Pharmasave and The Melville Advance

MOOSE JAW BRANCH

Donna Bowyer, Program Director



This has been a really fun and exciting year. We have welcomed new Board Members to our Board with new energy and passion for our work.

This was a great year for fundraising and having organizations approach us and offer to help us with fundraising and donations. The Moose Jaw community fundraised \$15,935 for our programs. We also earned another \$6,800 in income from Training with Journey to Hope as our partner. The generosity of the community is crucial to our survival in the community. All of these donations went to support our Peer Support Programs.

We have a very successful **Peer Support Program**. On a monthly basis we have an average of 12 evening group activities as well as doing the one-on-one peer support. We have seen people who were once recipients of peer support now moving into the role of peer supporters. We have a number of groups that are monthly; some change based on direction from the members and some others change because of the season. We try to keep the cost reasonable; some programs are free. The new programs this year were the Story Telling Night—where people can tell a story, write a story, write a poem, or sing a song—and the Drumming for Healing, which is just getting started; at our first night, we had 13 participants. In 2017-2018, we are starting a Chess Club. One night a month we have a closed group. This group is for people who have taken the Art of Friendship classes. This allows them to meet together and practice socializing using the skills they learned. We have seen more referrals coming from Five Hills Health District into one-on-one Peer Support this year and we received about ¼ of the funding needed for the Peer Support Program rolled into core funding.

The Peer Supporters are also taking the initiative to organize a Pool fun night. Gabriel Turcotte, Peer Support Program Manager, will be helping with the implementation of their event.

Community Highlights

We were also excited to once again work with the Moose Jaw Warriors WHL team. We were available for support and offered them training in safeTALK. In turn they did two fundraising events for us, one at the beginning of the season, another during their awareness week in February. This allowed us to raise awareness in the sporting community through the Talk Today program.

Another highlight of this year was our Masquerade Ball. We were approached by people who worked with active and retired military personnel. They had decided to do a fundraiser for us and wanted to do a Masquerade Ball. They had the Bromantics, a cover band, playing an old-time dance, and we all had so much fun. From 4 to 84 years old, everyone was included. By the end of the dance, people were approaching the organizers asking when they would be doing it again.

This year we were at 45 events, 5 displays, and were covered multiples times in the media.

I am excited for the upcoming year. We once again have new Board Members with new energy and ideas. We also have a number of events we are planning for this spring, including Peer Supporter training, another Masquerade Ball, and the CMHA Provincial Conference in June.

PRINCE ALBERT BRANCH

Doug Kinar, Executive Director



Our goal is to provide Advocacy, Education, Programming and Services in the community of Prince Albert and area.

Advocacy and Education

The Prince Albert Branch continues to be involved in community partnerships with the CSC Community Advisory Committee, the PA Planning Advisory Committee, the PA Food Coalition and the Community Networking Coalition. We have combined Advocacy and Education. The CMHA PA Branch continues to create opportunities to Get Loud about Mental Health through Life Skills presentations and workshops (Mental Health First Aid and ASIST). The importance of community partnerships is critical for our organization.

The Prince Albert Branch hosts a number of Practicum students throughout the year including Sask Polytechnic CCA program, UofS Nursing students and First Nations University Social work students.

Vocational Programs

As Good As New, Kitchen & Coffee Service, Janitorial, BBQ, and Quilting

The purpose of the vocational programs is to provide an opportunity to develop potential transferable job skills, which may lead to integration into the workforce in the Prince Albert community or the community in which they live, therefore supporting job maintenance and community inclusion.

Each participant is supported as they learn how to apply personal marketing tools by preparing résumés, cover letters and where applicable, complete application forms.

Program supervisors support people participating in these programs to ensure a positive learning experience. People make a commitment to a work schedule, complete a weekly timesheet; appearance and punctuality are important; attendance is monitored; and a small honorarium is earned based on participation hours.

The effectiveness of the programs offered assists in maintaining and, in some cases, rebuilding independence, establishing day-to-day routines, as well as building confidence and social networks. Overall pride of workmanship is demonstrated by the commitment and the participation in their respective programs.

Housing and Support Group

Community Kitchen

Decent, safe, affordable housing is one of the most important factors that affect our mental well-being, physical well-being and social well-being. Housing provides a safe space where one feels protected and secure with a sense of privacy. Safe affordable housing can help establish day-to-day routines, rebuild and maintain confidence as they achieve independence, and social networks.

The Prince Albert Branch strives to offer safe, stable, affordable and supportive housing through our housing program. People are chosen for the program through a referral system with the Prince Albert Parkland Health Region. They have a choice of two 8-unit separate complexes at the Maple Ridge Apartments located on 18th St. West and at the newly built Rascher Place located on 7th St East. Having a choice as to where you live is an important factor in housing. The program supervisor is responsible for implementing strategies for participants to live an independent life successfully. This will include systems navigation, medication management, establishing day-to-day routines, employment support, and money management. Rent is based on affordable housing rates. Individuals may need hospital stays from time to time; however, this will not affect their tenancy unless a change is ordered by their psychiatrist. Taking care of one's mental health is expected and supported. Support is constantly changing and varies from individual to individual.

There are three components that contribute to the success of the housing program; first, it is flexible in order to meet the various needs of individuals; second, anyone living in our housing must agree to work one-on-one with our support worker; and third, participation in our Community Kitchen, which operates Mondays and Fridays, is a requirement.

The Prince Albert Parkland Health Region sees value in this program by pre-registering people who will be future candidates once their skills are developed. Participation supports social and skills development. It teaches or in some cases enhances cooking skills, recipe knowledge and implementation, food storage and clean-up. Menu ideas are created from "what's in our cupboards today." A weekly menu is created according to what is available. We participate in the Good Food Box program, which has resulted in individual participation. All meals prepared in the program will feed the lunch program on that day. It is rewarding to see the experienced people taking basic recipes and putting their own spin on them. For instance, meat loaf turns into hamburger puff simply by using a cake pan and adding a biscuit top. This comes from someone who had no idea how to cook anything more than macaroni and wieners, canned soup, chips and dip and cookies for dessert. She opened her cupboards one day and used what she had; the result was hamburger puff. That's achievement on many levels: she had groceries, she demonstrated and connected skills, knowledge, and ability. Now she loves making homemade spaghetti sauce and stir-fry with both chicken and beef. That is one of many success stories. Their participation connects a path to safety, security, connectedness and acceptance.

Educational Programs

Photography, Writing For Your Life, Art, Positive Coping, Music

The focus of these opportunities is part of a personal healing journey. At times the participant may want to enter a competition, have pieces published or chosen for a show. Then, there are deadlines, criteria expectations and personal scrutiny. If interested, people are supported as they may have to learn how to apply personal marketing tools by preparing résumés and cover letters; in some cases, the participant may have to apply for special funding in order to publish their works.

These programs allow the participant another form of expression when words cannot be found. The CMHA Art, photography, and Writing for Your Life groups combined with the Prince Albert Parkland Health Region and Sask North Acquired Brain Injury, will be hosting our 3rd annual Art Gala, "The Healing Journey," at the Prince Albert Arts Centre located on Central Avenue from May 1st to May 28th.

These programs are available for anyone wishing to participate. There is no participation fee. The opportunity to learn new skills, enhance old skills, and open pathways to healing that support the individual as they continue their journey to recovery. These programs are optional but, considering the ongoing support by the participants, it is quite clear they are necessary, valued and appreciated.

Recreational Programs

Coffee groups, colouring circles, pool or ping pong games, tunes playing in the distance, the odd peel of laughter and not to mention the line-up for a nutritious meal are a daily occurrence at the Nest Drop In centre, the hub of CMHA, where all the action happens. One of the highlights of our recreation program is bingo, played twice every week. Education programs—photography group, Writing for Your Life group, Art group—meet in the programs room throughout the week.

Peer support plays a huge role in organizing activities and events throughout the year. Special events might include pool and ping pong tournaments; celebrations such as Valentine's Day party, Halloween party, and Christmas Dinner. Outings to the lake for fishing and boating or just a wiener roast, picnics in the park, horseback and wagon rides, and a Rush game in Saskatoon have all been enjoyed.

Our Social Committee is peer-supported and very active throughout the year. They are responsible for all Nest activities. A highlight is our annual Chili Cook Off on Valentine's day. It is Doug Kinar, Executive Director, against any group; card decorating; cookie decorating; and a dance. Halloween features a haunted programs room, a dance and costume contest, and Christmas celebrations include our CMHA Branch Christmas Meal and finally Nest Christmas Celebration. Everyone receives a box of chocolates and a card.

Fundraising

BBQ: This program allows the participant an opportunity to display leadership, organizational, and communication skills through setup, operation and tear-down. BBQ food preparation and safe food-handling skills are practiced with sidewalk sales to the public during the summer.

People participating in this program make a commitment to a work schedule, complete a weekly timesheet; appearance and punctuality are very important. Program attendance is monitored and supported when necessary.

All in all, it has been a busy year as we navigate through grants, service contracts, creating new learning opportunities to grow as a branch, and as we continue to deliver a high standard of service to our participants as they pursue their journey to wellness and recovery.

REGINA BRANCH

Stacey Carmichael, Executive Director

CMHA Regina Branch had an outstanding 2016–2017 fiscal year!

We continue to operate our Pre-Vocational and Vocational Programs and are proud to have them meet the needs of over 900 members in Regina who are living with a mental illness. We work using a lens of continuous improvement and responsiveness and it is paying off. Our annual members' survey identified that our programs help keep people well, out of the hospital and connected to the community. We were busy with 211 new applications, we served over 10,000 meals, and we provided 83 individuals with an array of training and employment opportunities.

The Regina Branch developed a new program called “Community Engagement” to meet an identified need for information and support in our community and to help raise our agency profile. This program started in December with a part-time Director of Community Engagement. With help from the entire team, this program is making a substantial and positive impact on our branch and building compassion and understanding throughout the community.

In addition to presentations, tailored to meet the needs of various groups, Community Engagement has helped facilitate very successful awareness events. As an example, in February, through our partnership with the WHL Regina Pats Organization and TalkToday program, we were given the opportunity to host an awareness night at a home game.



One of the highlights of the year included hosting a very successful “Ride Don’t Hide” event. Ride Don’t Hide is a community bike ride sponsored by The Co-operators. The event saw over 250 riders and raised awareness and over \$52,000.00 for our branch.

Our building, located at 1810 Albert Street, is old yet so full of love and hope. Thanks to Eastview Rotary Club for helping us keep it as welcoming as possible by painting our TV/activity room. Going forward, we look forward to a continued relationship with the Eastview Rotary Club and we also welcome the opportunity to work with Farm Credit Canada and Punchline Comedy Night to see further improvements to our little piece of paradise in Regina.



We will build on our successes. We will continue to respond to our members’ needs with meaningful social and recreational programming. We will enhance our vocational training and orientation and provide more employment opportunities than ever before. We will strive to ensure we live in an all-inclusive, healthy community through a robust Community Engagement program and we will work hard to sustain it all.

Please visit our website at cmharegina.com and like or follow us on Twitter and Facebook to stay up-to-date on the great things we are doing in Regina.

SASKATOON BRANCH

Susan Saville, Executive Director



The CMHA Saskatoon Branch continues to offer:
Pre-Vocational Services, Vocational Counselling,
a Life Skills Program, Social Recreation Programs,
Mental Health First Aid, Mental Health First Aid for Adults who Interact With Youth,
Mental Health Works, Living Life To The Full,
Work Place Wellness Workshops, a Depression Support Group,
an Anxiety Support Group, and Volunteer Training.

This year, we added the RISE program, a partnership with the Bedford Road Collegiate and Sask Polytechnic Nursing program. Together we offer a mental health and wellness education program designed to increase mental health knowledge and reduce stigma. Our branch also participated in the Talk Today mental health partnership with the WHL, providing a safeTalk session to the Blades hockey players.

Our vocational team consists of three vocational counselors, Brenda Beaudry, Morgan Wickett and Jenna Neufeld; one Marketing Coordinator, Bart Voswinkel; and one Labour Consultant, Chalaine Senger. 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. Chalaine 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 pre-vocational program that helps participants develop new skills needed to cope in 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.

Chelsea Guest, Recreation Coordinator, coordinates a program that 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, Writers Group, Cooking Group, and Monday night sports & 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. Chelsea 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. This year we also added Rosalyn Kirkham to our staff to cover Carolyn when she is away and to assist us with grant writing, gathering statistics and developing a donor fundraising database. Carolyn and Rosalyn have numerous duties, one of the most important being to welcome new members, describe our programs and services, and ensure that current memberships are renewed. They are 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 Chalaine 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 of having employees trained in MHFA. Morgan and Chelsea are certified Living Life to The Full Trainers; they facilitate this very effective cognitive behavioural therapy self-help group.

In closing I would like to thank those of you who invest in CMHA: Saskatchewan Ministry of the Economy, Saskatchewan Parks & Recreation, Saskatoon Community Foundation, Kinsman Club of Saskatoon, Saskatoon Health Region, City of Saskatoon, Community Initiatives Fund, Affinity Credit Union, Federated Co-Operatives Limited, United Way Saskatoon & Area, and our many private donors. I would also like to thank our numerous volunteers and our CBO partners for helping make it possible to achieve our vision, mentally healthy people in a healthy society.

SWIFT CURRENT BRANCH

Cortney Reynolds, Executive Director

The Swift Current Branch of CMHA had a year of change with Executive Director of seven years, Ruth Smith, retiring in December 2016, and Cortney Reynolds being hired to take over this role. Ruth spent three weeks training Cortney and

providing her with a great foundation for her new role. Cortney has worked in Swift Current for 13 years, most recently as a Regional Intersectoral Committee Coordinator, which provided her with extensive knowledge of the services and resources available in our community as well as established relationships with many service providers and organizations.

The Swift Current Branch runs a clubhouse model. Our participants are members who pay a small monthly membership fee and contribute to the operation of the clubhouse by volunteering for yard and building tasks and providing input at monthly member meetings. We offer a cold breakfast and hot lunch program daily from Monday to Friday. In 2016, we served 7,325 meals to our members. We also offer a variety of educational, life skills, social and recreational programs to approximately 45 members monthly. We have recently implemented Personal Plans that we are working on with each of our members to help them identify and achieve goals they set out for their recovery as well as give us information that we can use to tailor our programs to help them meet these goals. We have been trying some new and exciting programs at CMHA that have been very successful.

Our programs include:

- Community Kitchens
- Painting classes
- Participation in a SPCA Fundraiser
- Evening special events (movie night at the theatre, NHL play-off party)
- Bowling (regular and glow)
- Mini-golf

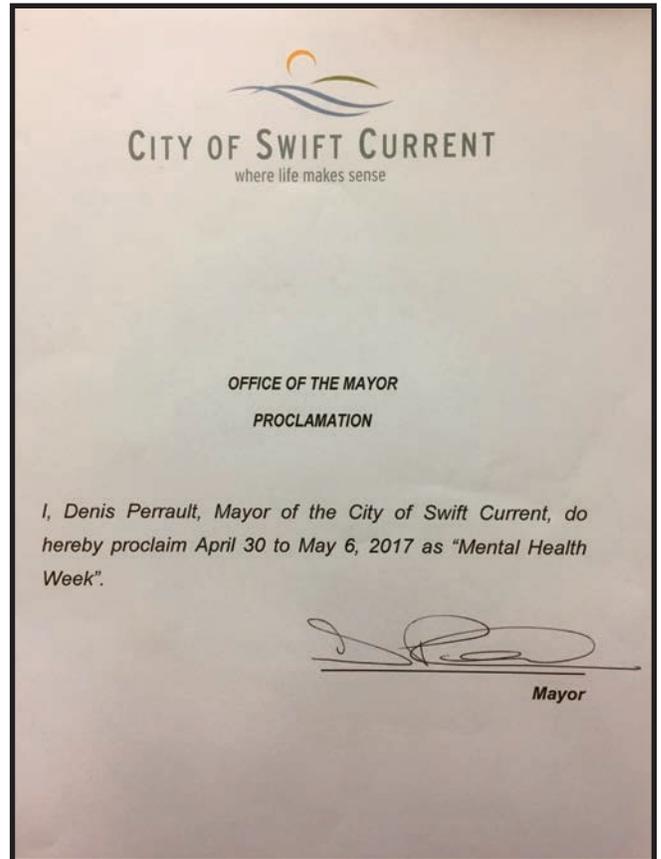
We continue to receive tremendous support from our community. Some of our contributors this year included Swift Current United Way, City of Swift Current, Swift Current 100 Women Who Care, and Living Sky Casino (SIGA) among many other very appreciated contributions.

We also receive many food donations from local Hutterite Colonies, farmers, and gardeners for our meal program.



CMHA Swift Current participated in Talk Today with the local WHL team, the Swift Current Broncos. We were on the morning show at the local radio station, participated in the puck drop, had a kiosk at the game, and spoke during the 2nd period intermission to bring awareness to mental health and suicide prevention. We hope to continue to grow this partnership each year. We asked a local family to join us for the ceremonial puck drop to honour their son who lost his battle with schizophrenia in 2011.

We participated in the Mental Health Week May 1-7th. Our local reporters were on hand when we proclaimed this week at City Hall. The 13th Annual Mayor's Luncheon was a great success with Kyle Moffatt as our guest speaker.



WEYBURN BRANCH

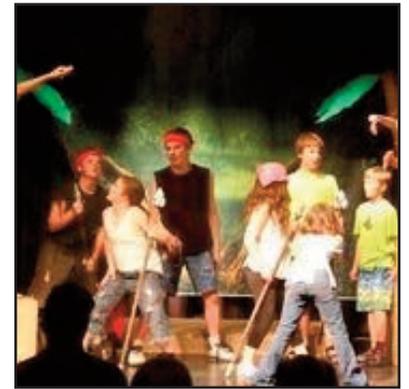
Tasha Collins, Program Director



Thanks to the generous support of the Sun Country Health Region, Weyburn and District United Way, Community Initiatives Fund, Sask Parks and Recreation, as well as Sask Lotteries and the City of Weyburn, CMHA Weyburn was able to continue supporting our community members who are affected by mental illness. This allowed the branch to offer quality programming to individuals living with mental illness as well as youth within our community. 2016-2017 was another exciting year at CMHA Weyburn.



Our Youth Theatre program includes youth between the ages of 9 and 16. The program staff members promote growth and development for youth by providing a safe, fun environment for youth to visit and participate in activities. This program allows the youth to grow, mature, and become leaders through positive programming while having the opportunity to explore their creative side. Our objectives for the youth programming is to encourage self-esteem, confidence, inclusion, and leadership, all while developing new skills.



During Mental Health Week in May of 2016, the theatre group performed their production “Summer Island.” The group had two showings with over 120 community members in attendance. We received very positive feedback about the program and performance from youth, parents, caregivers, and community members.

In the fall, the youth program focused on specific skill building as well as improv; this group performed at CMHA Weyburn’s Christmas party in December. This program is gaining ground and respect within our community, and our goal is to find sustainable funding for this program so we can offer it to the community consistently for many years to come.

CMHA Weyburn holds many events throughout the year to increase awareness and public education. We also work with the Sun Country Health Region to provide ASIST Training (suicide intervention training) for adults, and CMHA Weyburn provides safeTALK to community members as well.

Last year our Mental Health Week was packed full of wonderful events including:

- We hosted our annual Mayor’s Luncheon with guest speaker Jayne White.
- We partnered with Under Your Skin to offer our community its first-ever Semi-Colon Tattoo event. 55 Tattoos were completed.
- Détente Spa offered manicures to the community by donation to CMHA Weyburn.
- A meet-and-greet with Constable Jeffrey Bartsh, who raised awareness and funds for our branch by running a full marathon in uniform.
- Our youth theatre program held two performances.

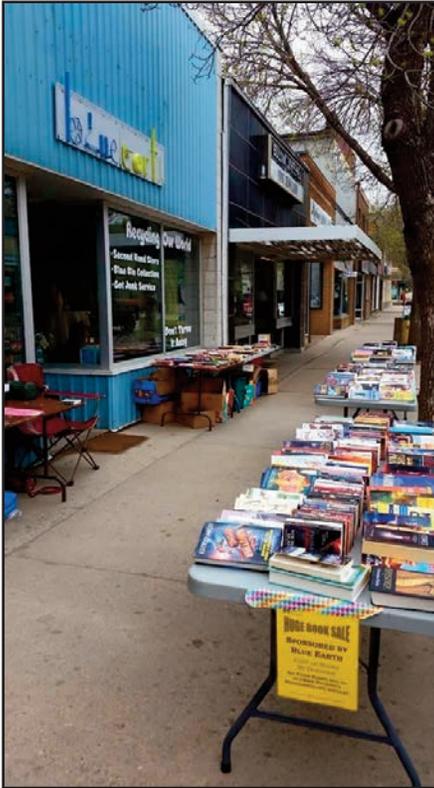


Our adult programs and services—including socialization, educational, and recreational services—were well attended. We provide many different options, some of which include free coffee for consumers and visitors, board games, TV/sitting area, walks, bowling, sewing, art program, writers’ group, gardening, baking, playing pool, and day trips. There was a special opportunity this year where consumers who wanted to participate were treated to a half-hour flight above Weyburn by a local pilot. This came to be after staff member Bernadette Green donated a prize she had won; this was a unique experience I’m sure no one will forget.



the Weyburn Branch Vocational training consists of our work crew and meal program. The work crew consists mostly of men; they provide services to the community in the form of refuse hauling, lawn care, snow removal, small moves, along with a cleaning contract with the Weyburn Livestock Exchange. Our meal program is made up of consumers (mostly ladies) who work together to provide lunch for those attending the centre Monday through Thursday (between 8 and 15 people). This program also works to provide lunches for our Community Connections Meetings, and lunches or baking for other events held at the centre like our annual Trade Show.

In terms of Self-Help, we provide Life Skills programming on Tuesdays for consumers. This program covers a wide variety of topics, from hygiene and coping skills to budgeting and social skills. The CMHA Weyburn Branch is a community resource drop in centre that can offer support, programming, links to other community resources, or just an ear for someone who needs one. We also provide meeting space for a local NA group that meets every Thursday at our branch.



Our community involvement included volunteering at the United Way Communithon as well as participating in the “Adopt a Planter” program through the City of Weyburn, where consumers helped to pick out and plant flowers as well as maintain a planter in downtown Weyburn. We continue to help our local Salvation Army with refuse hauling when we can. Our partnership with Blue Earth has grown; we were again lucky to receive donations from a book sale where all the books were donated by Blue Earth and all proceeds from the sale came back to the CMHA Weyburn Branch. In December, we held our 6th annual Trade Show, which again was very successful; our vendor list was full and we had over 100 visitors to the centre. This past February, our centre held a new Valentine’s Day fundraiser where our consumers participated in making Dog Toys for our “Show your Puppy Luv” event. We sold the toys for \$10.00 each, with a promise to share \$3.00 from each sale to our Local Humane Society. Not only do these events raise the profile of CMHA within Weyburn, but they also connect our consumers with the community and provide programming at the same time. CMHA Weyburn also hosts and provides the meals for our Community Connections Meetings— working together with WASES, we developed these meetings as a place where many different service providers from our community could get together three times a year to talk about the services each entity provides, thus allowing each provider a way to communicate as well as recognize whether there are holes in the programs and services provided within the Weyburn and area community.



I am very excited about the direction our centre is moving toward: CMHA Weyburn has been able to raise the profile of mental health within our community, and I believe our new partnerships and relationships within the community will further this initiative. We are consistently working on ways to improve programs and services as well as looking for ways to provide new programs. CMHA Weyburn is happy to announce that once again we have received funding through the Community Initiatives Fund to cover some of the wages for our third staff member working with the youth program. This enabled us to continue the theatre program from February 2017 into the fall. We look forward to continuing this program and working toward establishing sustainable funding for this valuable program.

Thank you, CMHA, for a wonderful 2016-2017 year!

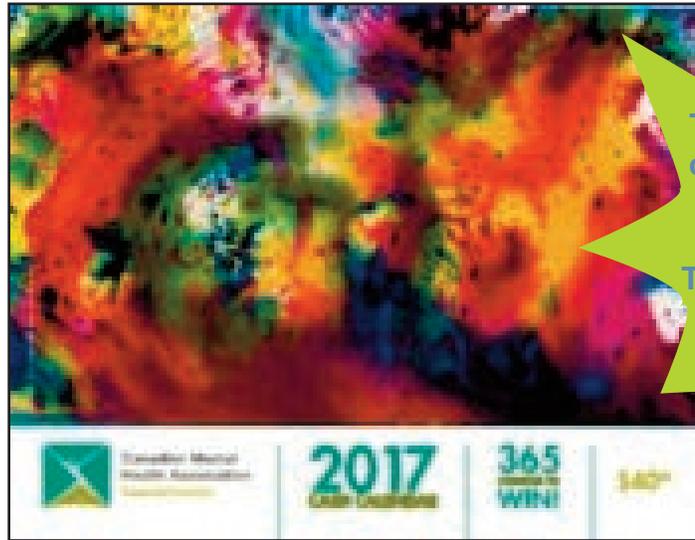
RESOURCE DEVELOPMENT

CMHA is dedicated to supporting and promoting the rights of persons with mental illness to maximize their full potential through education, advocacy, programs, and services. These programs and services provide a stabilizing support for people affected by mental illness, reducing their dependence on costly alternatives, such as hospitalization or institutionalization. The work of CMHA provides a cornerstone for a healthier community.

As a charitable, non-profit association, CMHA is dependent upon the goodwill and support of the community. Fundraising and “friend” raising initiatives like the Cash Calendar lottery ensure that vital programs in support of people affected by mental illness continue to provide for their needs.

Cash Calendar Lottery

This project has not only proven to be a very good fundraiser for the Association, but has also become a very successful public awareness tool. The calendar is unique as it displays the artwork of people who use our services throughout the province as well as community members. 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 artwork.



Total value of cash & prizes is almost \$89,000.

The cost of the calendar is \$40.

Bingo

The Canadian Mental Health Association (Saskatchewan Division) continues to see a modest income from the proceeds of bingo generated at the Centennial Bingo Hall. Due to the dedicated group of volunteers who run the bingo for CMHA, very little staff time needs to be devoted to the bingo operation. The Board and staff of CMHA Saskatchewan Division extend their sincere appreciation to these individuals. We couldn't do it without you!

Direct Mail

Public education goes hand-in-hand with all fundraising initiatives. People give to organizations they “know” or have heard about and with which they have a connection. For this reason, public education and awareness is absolutely necessary for the success of our direct mail campaigns. They not only raise funds for the Association, but they also continue to provide awareness and public education, which helps to reduce the stigma of mental illness in the community.

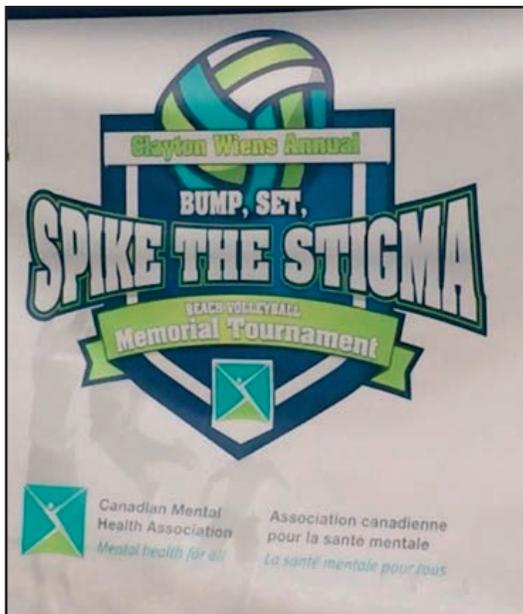
Planned Giving

CMHA Saskatchewan Division continues to expand our efforts in the area of planned giving. Planned gifts are dedicated in the present but realized in the future through estate plans. It is a way to carry your legacy forward. Through education and stewardship activities, CMHA Saskatchewan Division is encouraging individuals to think to the future.



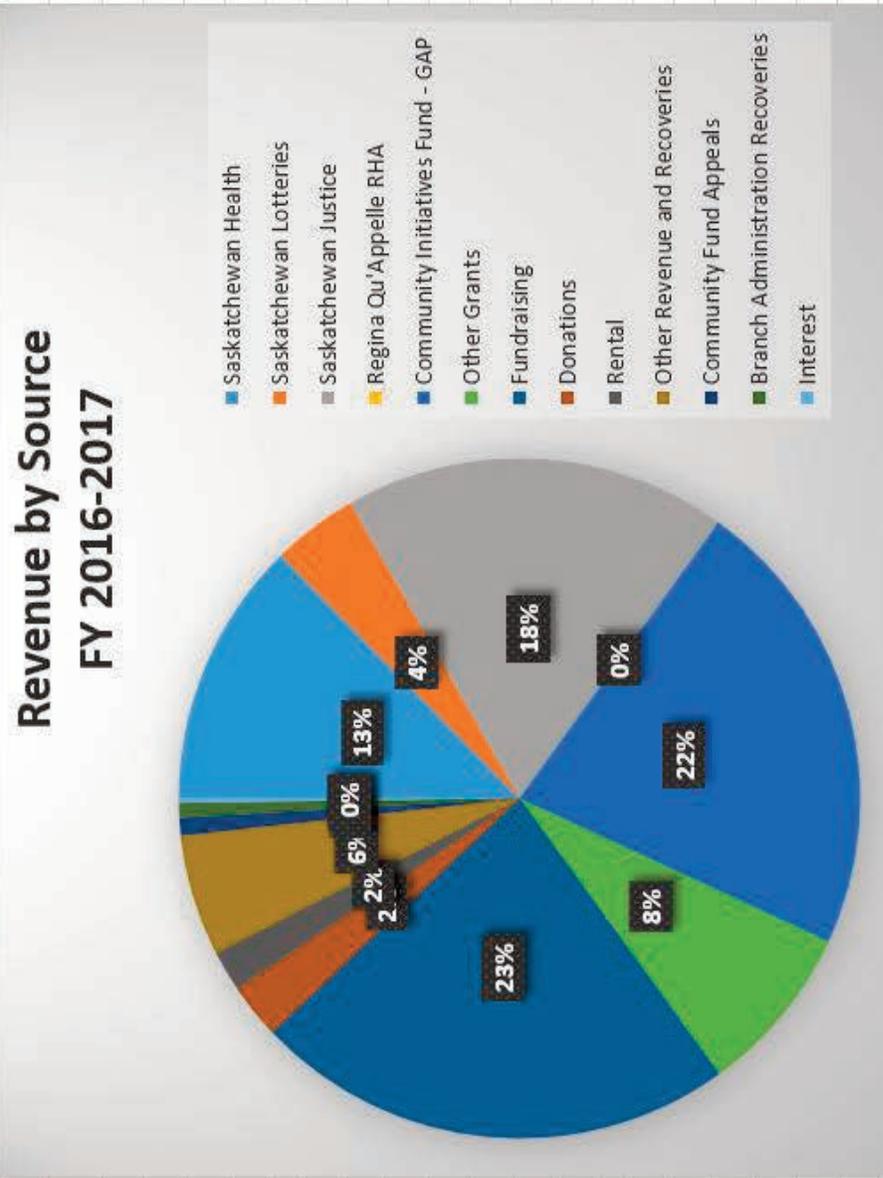
Special Events

As well as the above activities, a number of special fundraising events are carried out over the course of the year. CMHA Saskatchewan Division would like to thank all the dedicated volunteers and businesses who support these events.



Canadian Mental Health Association (Saskatchewan Division) Inc.

Revenue by Source	
Fiscal Year 2016-2017	
Saskatchewan Health	\$255,631
Saskatchewan Lotteries	\$82,387
Saskatchewan Justice	\$367,352
Regina Qu'Appelle RHA	\$0
Community Initiatives Fund - GAP	\$444,137
Other Grants	\$164,160
Fundraising	\$462,279
Donations	\$52,232
Rental	\$40,235
Other Revenue and Recoveries	\$115,966
Community Fund Appeals	\$17,065
Branch Administration Recoveries	\$14,092
Interest	\$4,266
Total	\$2,019,802



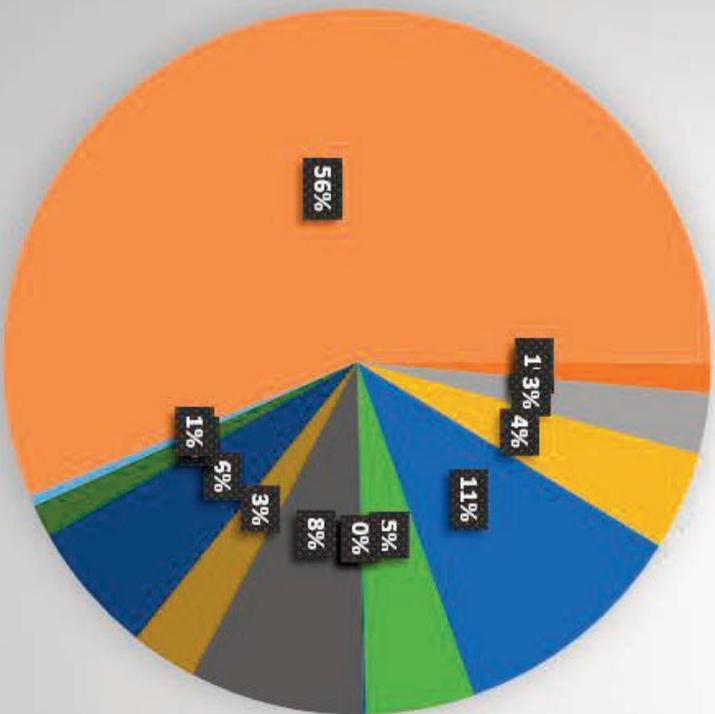
Expenses by Program

Fiscal Year 2016-2017

Amortization of Intangible Assets	\$931
Amortization of Tangible Assets	\$27,352
Justice Community Support Program	\$56,702
Contributions to Branches	\$89,938
Fundraising	\$219,731
Gambling Awareness Program	\$99,323
Gifts to Qualified Donees	\$2,000
Interest on Long-Term Debt	\$0
General and Administrative	\$161,321
Occupancy	\$60,326
Public Education	\$122,053
Public Service Announcements	\$30,105
Research	\$10,000
Salaries and Benefits	\$1,128,484
Total	\$2,008,266

Expenses by Program

FY 2016-2017



- Amortization of Intangible Assets
- Amortization of Tangible Assets
- Justice Community Support Program
- Contributions to Branches
- Fundraising
- Gambling Awareness Program
- Gifts to Qualified Donees
- Interest on Long-Term Debt
- General and Administrative
- Occupancy
- Public Education
- Public Service Announcements
- Research
- Salaries and Benefits

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

Financial Statements

March 31, 2017

CANADIAN MENTAL HEALTH ASSOC. (SASK DIVISION) INC.
Index to Financial Statements
March 31, 2017

	Page
INDEPENDENT AUDITOR'S REPORT	1 - 2
FINANCIAL STATEMENTS	
Balance Sheet	3
Statement of Operations	4
Statement of Changes in Net Assets	5
Statement of Cash Flows	6
Notes to Financial Statements	7 - 14
Salaries and Benefits (<i>Schedule 1</i>)	15

INDEPENDENT AUDITOR'S REPORT

To the Members of Canadian Mental Health Assoc. (Sask Division) Inc.:

We have audited the accompanying financial statements of Canadian Mental Health Assoc. (Sask Division) Inc., which comprise the balance sheets as at March 31, 2017 and March 31, 2016 and the statements of operations, changes in net assets and cash flows for the years ended March 31, 2017 and March 31, 2016, 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.

Basis for Qualified Opinion

In common with many not-for-profit organizations, Canadian Mental Health Assoc. (Sask 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 Assoc. (Sask 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, 2017 and March 31, 2016, current assets and net assets as at March 31, 2017 and March 31, 2016.

(continues)

Independent Auditor's Report to the Members of Canadian Mental Health Assoc. (Sask Division) Inc.
(continued)

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 Assoc. (Sask Division) Inc. as at March 31, 2017 and March 31, 2016 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
May 18, 2017


Dudley & Company LLP
Chartered Professional Accountants

CANADIAN MENTAL HEALTH ASSOC. (SASK DIVISION) INC.

Balance Sheet

As at March 31, 2017

	<i>March 31</i> 2017	<i>March 31</i> 2016
ASSETS		
CURRENT		
Cash	\$ 428,491	\$ 672,732
Investments (Note 3)	110,000	165,744
Accounts receivable	107,763	13,108
Receivable from branches	8,619	12,134
GST receivable	1,002	11,292
Prepaid expenses	22,374	21,394
	678,249	896,404
TANGIBLE CAPITAL ASSETS (Note 5)	274,868	293,471
INTANGIBLE ASSETS (Note 6)	3,725	4,656
LONG TERM INVESTMENTS (Note 3)	365,595	110,215
	\$ 1,322,437	\$ 1,304,746
LIABILITIES AND NET ASSETS		
CURRENT		
Accounts payable and accrued liabilities	\$ 92,929	\$ 89,374
Wages payable	62,438	70,517
Deferred revenue (Note 12)	168,978	158,299
	324,345	318,190
NET ASSETS	998,092	986,556
	\$ 1,322,437	\$ 1,304,746

ON BEHALF OF THE BOARD

_____ Chair

_____ Director

The accompanying notes form an integral part of these financial statements

CANADIAN MENTAL HEALTH ASSOC. (SASK DIVISION) INC.

**Statement of Operations
Year Ended March 31, 2017**

	2017	2016
REVENUE		
Saskatchewan Health	\$ 255,631	\$ 261,132
Saskatchewan Lotteries	82,387	79,988
Saskatchewan Justice	367,352	430,490
Regina Qu'Appelle RHA	-	7,200
Community Initiatives Fund - GAP	444,137	432,695
Other grants (Note 13)	164,160	92,200
Fundraising	462,279	423,360
Donations (Note 11)	52,232	113,096
Rental	40,235	39,236
Other revenue and recoveries (Note 11)	115,966	86,850
Community fund appeals	17,065	24,274
Branch administration recoveries	14,092	14,092
Interest	4,266	6,051
	2,019,802	2,010,664
EXPENSES		
Amortization of intangible assets (Note 6)	931	1,164
Amortization of tangible assets (Note 5)	27,352	30,029
Justice Community Program	56,702	90,619
Contributions to branches	89,938	111,415
Fundraising	219,731	196,764
Gambling Awareness Program	99,323	83,241
Gifts to qualified donees	2,000	-
Interest on long term debt	-	679
General and administrative	161,321	165,863
Occupancy	60,326	63,875
Public education	122,053	115,946
Public service announcements	30,105	37,297
Research	10,000	-
Salaries and benefits (Schedule 1)	1,128,484	1,058,263
	2,008,266	1,955,155
EXCESS OF REVENUE OVER EXPENSES FROM OPERATIONS	11,536	55,509
OTHER INCOME (EXPENSES)		
Loss on disposal of assets (Note 5)	-	(44)
EXCESS OF REVENUE OVER EXPENSES	\$ 11,536	\$ 55,465

The accompanying notes form an integral part of these financial statements

CANADIAN MENTAL HEALTH ASSOC. (SASK DIVISION) INC.
Statement of Changes in Net Assets
Year Ended March 31, 2017

	Unappropriated	Appropriated - see Note 7	Invested in Capital Assets	2017	2016
NET ASSETS - BEGINNING OF YEAR	\$ 200,000	\$ 488,429	\$ 298,127	\$ 986,556	\$ 931,091
Excess of revenue over expenses	(19,534)	31,070	-	11,536	55,465
Amortization of tangible capital assets	27,352	-	(27,352)	-	-
Amortization of intangible assets	932	-	(932)	-	-
Purchase of tangible capital assets	(8,750)	-	8,750	-	-
NET ASSETS - END OF YEAR	\$ 200,000	\$ 519,499	\$ 278,593	\$ 998,092	\$ 986,556

The accompanying notes form an integral part of these financial statements

CANADIAN MENTAL HEALTH ASSOC. (SASK DIVISION) INC.

**Statement of Cash Flows
Year Ended March 31, 2017**

	2017	2016
CASH FLOWS FROM (FOR) OPERATING ACTIVITIES		
Cash received from grants	\$ 1,235,064	\$ 1,414,319
Cash receipts from self-generated revenues	700,013	708,906
Cash paid to suppliers	(838,635)	(808,049)
Cash paid to employees	(1,136,563)	(1,052,020)
Interest received	4,630	8,049
Interest paid	-	(680)
	<u>(35,491)</u>	<u>270,525</u>
CASH FLOWS FROM (FOR) INVESTING ACTIVITIES		
Purchase of capital assets	(8,750)	(25,389)
Proceeds on disposal of capital assets	-	775
Purchase of investments	(200,000)	-
Disposal of investments	-	225,000
	<u>(208,750)</u>	<u>200,386</u>
CASH FLOWS FROM (FOR) FINANCING ACTIVITIES		
Repayment of long term debt	-	(23,235)
INCREASE (DECREASE) IN CASH	(244,241)	447,676
CASH - BEGINNING OF YEAR	672,732	225,056
CASH - END OF YEAR	\$ 428,491	\$ 672,732

The accompanying notes form an integral part of these financial statements

CANADIAN MENTAL HEALTH ASSOC. (SASK DIVISION) INC.

Notes to Financial Statements

Year Ended March 31, 2017

1. NATURE OF OPERATIONS

Canadian Mental Health Assoc. (Sask 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 Assoc. (Sask 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 ASSOC. (SASK DIVISION) INC.

Notes to Financial Statements

Year Ended March 31, 2017

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 ASSOC. (SASK DIVISION) INC.
Notes to Financial Statements
Year Ended March 31, 2017

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 ASSOC. (SASK DIVISION) INC.
Notes to Financial Statements
Year Ended March 31, 2017

3. INVESTMENTS

	2017	2016
CURRENT TERM		
Guaranteed Investment Certificates	\$ 110,000	\$ 165,744

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

The fixed income securities have effective interest rates ranging from 0.5% to 1.25% with maturity dates within fifteen months or less.

LONG TERM

	2017	2016
Guaranteed Investment Certificates	\$ 365,595	\$ 110,215

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, 2017:

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.

(continues)

CANADIAN MENTAL HEALTH ASSOC. (SASK DIVISION) INC.

Notes to Financial Statements

Year Ended March 31, 2017

4. FINANCIAL INSTRUMENTS *(continued)*

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.

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 ASSOC. (SASK DIVISION) INC.

Notes to Financial Statements

Year Ended March 31, 2017

5. TANGIBLE CAPITAL ASSETS

	Cost	Accumulated amortization	2017 Net book value
Land	\$ 13,635	\$ -	\$ 13,635
Buildings	506,528	318,374	188,154
Furniture and office equipment	32,648	23,492	9,156
Vehicle	71,248	30,209	41,039
Computer equipment	51,339	28,455	22,884
	<u>\$ 675,398</u>	<u>\$ 400,530</u>	<u>\$ 274,868</u>
	Cost	Accumulated amortization	2016 Net book value
Land	\$ 13,635	\$ -	\$ 13,635
Buildings	503,755	308,544	195,211
Furniture and office equipment	32,648	21,203	11,445
Vehicle	71,248	19,949	51,299
Computer equipment	45,362	23,481	21,881
	<u>\$ 666,648</u>	<u>\$ 373,177</u>	<u>\$ 293,471</u>

Tangible assets acquired during the year were \$8,750 (2016 - \$25,389). During the year, tangible capital assets were written off and a loss on disposal of assets was recorded for \$0 (2016 - \$44) and is shown on the statement of operations.

6. INTANGIBLE ASSETS

	2017	2016
Computer software	\$ 14,837	\$ 14,837
Accumulated amortization	<u>(11,112)</u>	<u>(10,181)</u>
	<u>\$ 3,725</u>	<u>\$ 4,656</u>

There were no intangible assets acquired during the year (2016 - \$0). During the year, no intangible capital assets were written off and no losses on disposal of assets were recorded (2016 - \$0).

CANADIAN MENTAL HEALTH ASSOC. (SASK DIVISION) INC.
Notes to Financial Statements
Year Ended March 31, 2017

7. APPROPRIATED NET ASSETS

	Building Fund	Program Fund	Mental Health Fund	2017	2016
Balance, beginning of year	\$ 142,649	\$ 172,890	\$ 172,890	\$ 488,429	\$ 426,343
Transfer from surplus	31,070	-	-	31,070	82,086
Transfer to surplus	-	-	-	-	(20,000)
	<u>\$ 173,719</u>	<u>\$ 172,890</u>	<u>\$ 172,890</u>	<u>\$ 519,499</u>	<u>\$ 488,429</u>

8. SICK LEAVE BENEFITS

The organization provides non-vesting sick leave benefits to its employees pursuant to union agreements and administrative policies. At March 31, 2017 management estimates that accumulated sick leave credits total \$277,674 (2016 - \$248,339).

9. 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.

	2017	2016
Total contributions during the year	<u>\$ 62,754</u>	<u>\$ 54,933</u>

10. COMMITMENTS

As at March 31, 2017, the organization has an operating lease on its office equipment at \$5,044 per year.

11. DONATIONS AND OTHER REVENUE & RECOVERIES

During the current year, there were bequests received for a total of \$15,062 (2016 - \$81,929) which is included in donations. None of the bequests received had any restrictions placed on the use of the funds.

CANADIAN MENTAL HEALTH ASSOC. (SASK DIVISION) INC.
Notes to Financial Statements
Year Ended March 31, 2017

12. DEFERRED REVENUE

Deferred revenue consists of the following:

	<u>2017</u>	<u>2016</u>
CMHA Swift Current	\$ 837	\$ -
Canadian Labour Congress	2,933	2,933
Community Initiatives Fund - Weyburn	6,333	15,833
Heartland	2,556	-
Other	496	12
South Saskatchewan Community	5,260	-
Sask Justice - Operating	-	6,662
Sask Health - Dave Batters Golf Tournament	14,000	10,000
Wade Moffatt Gala - ticket sales	15,150	12,859
3D Petroleum	121,413	110,000
	<u>\$ 168,978</u>	<u>\$ 158,299</u>

13. OTHER GRANTS

Other grants are comprised of the following:

	<u>2017</u>	<u>2016</u>
Community Initiatives Fund - Weyburn	\$ 22,500	\$ 25,000
Other	100	1,451
RBC Foundation	-	43,189
Sask Association for Community Living	3,850	-
Sask Liquor and Gaming Authority	11,883	5,060
SaskTel	2,500	2,500
South Saskatchewan Community	4,740	-
3D Petroleum	118,587	15,000
	<u>\$ 164,160</u>	<u>\$ 92,200</u>

CANADIAN MENTAL HEALTH ASSOC. (SASK DIVISION) INC.

Salaries and Benefits

(Schedule 1)

Year Ended March 31, 2017

	2017	2016
Gambling Awareness Program	\$ 260,458	\$ 257,580
Executive and general	348,597	321,856
Justice Community Support	275,070	286,192
Public education	36,285	42,624
Resource development	153,669	150,011
OSI CAN	54,405	-
	\$ 1,128,484	\$ 1,058,263

The accompanying notes form an integral part of these financial statements

CMHA Saskatchewan Division Sponsors

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

We want to express our sincere appreciation to our sponsors:

