



**Canadian Mental  
Health Association**

Haliburton, Kawartha, Pine Ridge

*Mental health for all*

# Annual Report

2018 / 2019

Canadian Mental Health Association

Haliburton, Kawartha, Pine Ridge



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## Board of Directors 2018/2019

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Drew Merrett

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**1,373** volunteer hours were completed by our dedicated board of directors this year.

# Message from our Board President and Chief Executive Officer



**Drew Merrett**  
Board President

This past year marked the 100th anniversary of the Canadian Mental Health Association. Founded in 1918 with the mission to improve the care and treatment of people with mental illness, today we're Canada's largest mental health charity with 11 divisions in all provinces and one territory and 75 community-based branches.

Locally, we continue to experience growth in our justice supports, housing and rent supplement units, early intervention peer support and supports for transgender, gender diverse, LGBTQ2S, indigenous and francophone populations.

This past year was our third-consecutive year of 100 per cent compliance with the Ministry of Children, Community and Social Services Quality Assurance Measures Compliance Inspection.

We launched a new Dual Diagnosis Collaborative Consultation Program in partnership with Peterborough Regional Health Centre and Tri-County Community Support Services. This interdisciplinary team inclusive of psychiatry, social work, behavioural supports and a patient navigator has eradicated our referral backlog from 2015 to 2017 and increased

supports to 142 individuals.

After receiving exemplary standing with Accreditation Canada in 2017, C.M.H.A. H.K.P.R. continues to uphold its commitment to quality improvement. Two critical projects targeted at improving the lives of clients are housing retention support and maximizing social enterprise opportunities. Significant focus has brought the clients' voice forward using the Ontario Perception of Care (OPOC) survey. This tool gathers client feedback on services resulting in further opportunities for quality improvement.

More highlights can be found throughout this annual report. None of these accomplishments would have been possible without dedicated direct service staff, management leadership, and board of directors' guidance.

This is a time of significant change and transformation in health care in Ontario with the formation of Ontario Health Teams. We are optimistic about the future of our branch as we are particularly well positioned to grow and become an even more influential and impactful provider of mental health services across our region.



**Mark Graham**  
Chief Executive Officer

# Accredited with Exemplary Standing



**454**  
— of —  
**456**  
standards met  
demonstrating  
**99.56%**  
compliance

In November of 2017, C.M.H.A. H.K.P.R. was accredited with exemplary standing by Accreditation Canada. Accreditation Canada is a not-for-profit, independent organization that provides national and international health care organizations with an external peer review process to assess and improve services provided to clients based on standards of excellence.

Health care organizations that participate in the accreditation programs evaluate their performance against national standards of excellence. These standards examine all aspects of health care, from patient safety and ethics, to staff training and partnering with the community. Health care staff devote time and resources to learn how to improve what they are doing so they can provide the best possible care and service to their patients and clients.

“I am very proud of the hard work demonstrated by our staff,” says Mark Graham, Chief Executive Officer. “This accreditation is our personal best, having gone beyond the requirements of Accreditation Canada against nationally recognized best practice standards. The results demonstrate a strong commitment to the quality and safety of services to our clients and their families.”

# Dual Diagnosis Program Attains 100 per cent Compliance



C.M.H.A. H.K.P.R.'s Dual Diagnosis program attained 100 per cent compliance with the Ministry of Children, Community and Social Services (M.C.C.S.S.) Ontario Regulation 299/10 under the Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act (Quality Assurance Measures). C.M.H.A. H.K.P.R. met all 108 policies and procedures pertaining to supported independent living residences and community participation supports and

services for the third consecutive year. This remarkable performance result is achieved by only 20 per cent of Q.A.M. monitored programs in Ontario.

In 2018, the Dual Diagnosis team began to restructure M.C.C.S.S.-funded day programming to align with other promising practices across the province, increasing numbers served and service interactions dramatically, and focusing on therapeutic and mental health-focused interventions.

# Our Pillars: Knowledge, Hope, Belonging

C.M.H.A. H.K.P.R. operates on a strong foundation supported by three pillars, which support our belief that mental health for all is possible. Our pillars are:

**Knowledge:** Through education and open dialogue we can help to provide our community with a greater understanding of mental illness, and to eliminate stigma.

**Hope:** Through our services we are able to foster hope that we are a community where everyone who needs help, gets help.

**Belonging:** Through our programs we are able to promote belonging to a community, which is an important part of recovery.



## Mission, Vision, Values



### Our Mission

In partnership with clients, families and the community, we provide best practice services through education, advocacy, therapeutic supports and assistance with social determinants, to improve mental health recovery and quality of life.

### Our Vision

Mentally healthy people thriving in an inclusive society free from stigma.

### Our Values

- Self-Determination
- Social Justice
- Collaboration
- Diversity and Inclusion
- Innovation
- Accountability

# Recent Expansions

## Expanding Employment Supports to Kawartha Lakes

Employment develops a sense of meaning, purpose, inclusion, empowerment, security, social connections and hope. Vocational rehabilitation through our Employment Support program contributes to mental health recovery.

This year, C.M.H.A. H.K.P.R. received approval from the Ministry of Children, Community and Social Services to expand its specialized mental health employment services to Kawartha Lakes.

Our Employment Support program uses an evidence-based model called Individual Placement and Support (I.P.S.), which provides specialized vocational assistance for people living with a mental health concern to enter or re-integrate into the workforce.

I.P.S. helps people gain competitive part-time or full-time employment. This differs from other vocational rehabilitation approaches that support people through sheltered workshops, pre-employment programs, job-readiness training and other activities outside regular workplaces. Research shows rapid job placement with long-term, on the job assistance to maintain employment is more successful and cost effective than pre-vocational activities.

We work alongside individuals in this program to support an action plan, coping skills and mental wellness to ensure success.

## Expanding Mental Health Education

In April 2013, CMHA's Peterborough and Kawartha Lakes branches amalgamated to form the Haliburton, Kawartha, Pine Ridge Branch. This grew the catchment area to the City of Kawartha Lakes, Northumberland County, Haliburton County and the City and County of Peterborough. This growth brought on expansion in education services. New courses and corporate training boomed, which created aspirations for more advancement.

Partnerships with CMHA Durham and CMHA Hastings and Prince Edward Counties further expanded our education program to offer corporate and certificate training to these branches' service areas. Businesses throughout Durham, Hastings and Prince Edward are developing workplace cultures that enable staff to maintain their own mental health and support peers, boosting their businesses as a whole.

We're thrilled to see how this program has evolved as we continue toward our goal of creating mentally-healthy communities.

# Dual Diagnosis Collaborative Consultation Program Turns One!

On July 16, 2019, C.M.H.A. H.K.P.R. celebrated the one-year anniversary of the Dual Diagnosis Collaborative Consultation Program (D.D.C.C.P.). D.D.C.C.P. is a collaboration between C.M.H.A. H.K.P.R., Tri-County Community Support Services (T.C.C.S.S.) and the Peterborough Regional Health Centre (P.R.H.C.).

Previously known as the 'Dual Diagnosis Psychiatry Clinic', the program had a two-year waitlist and faced significant challenges in ensuring timely access to specialized psychiatric care due to limited resources.

In 2017, C.M.H.A. H.K.P.R. in collaboration with T.C.C.S.S. and P.R.H.C., began examining ways to increase access to the clinic and expand the scope of the program using a new model.

The new program model includes expanded psychiatry (from two to eight days a month), an on-site psychiatrist from P.R.H.C. four afternoons a week, and a multidisciplinary team consisting of a patient navigator, behavioural consultant and case management services.

## Goals and Objectives

### 1. Triage and reduce backlog of referrals received between 2015 to 2017.

The D.D.C.C.P. clinic was able to eradicate the backlog of referrals from 2015 to 2017 in its first year. Reviewing and triaging the waitlist from 2015 to 2017 allowed for more timely access to program resources. The program now has the capacity to see individuals on an urgent basis, as needed.



**3 years**  
of waitlisted referrals  
eliminated in **one year**



## 2. Develop a model of multidisciplinary collaborative practice.

### Outcome:

A multidisciplinary model was developed using a team approach to respond to referrals, providing effective supports and services.



The D.D.C.C.P. team presenting at the 2019 PASE conference.

## 3. Increase collaboration amongst developmental services, mental health and primary care sectors to support individuals with dual diagnosis, before and after they attend our clinic. Cross-sector linkages enable more individuals and their care teams to gain timely access to services that support wellness and recovery.

### Outcome:

- Referral pathways incorporate direct referrals from P.R.H.C., reduce the number of visits to the emergency department, direct individuals to the right community resources at the right time, and reduce the number of unnecessary repeat emergency department visits.

- Treatment plans are shared with community partners in the developmental services sector, mental health and primary care.
- The multidisciplinary team, in addition to clinic appointments, accommodates hospital visits, group home visits and visits at patients' homes.
- The multidisciplinary team presented "When Neurodevelopment Disorders Meet Neurocognitive Disorders" at the 2019 Psychiatric Assessment Services for the Elderly (PASE) conference which focused on dementia treatment and supports for individuals with intellectual disabilities.

## Testimonials

X has had a wonderful experience working with Dr. Shayamal. She does not rush appointments and speaks directly to the person supported as well as staff. It is very clear that she does not push medications and wants to see that behavioural interventions are not working before she starts a new medication and or increases a dosage."

"...Dr.Shayamal clearly shows her concern for people living with a developmental disability being (in some cases) over medicated or on medications that were not required."

# Lived Expertise Advisory Panel: Recipients of the Distinguished Service Award

The stigma of mental illness can sometimes be more harmful for the person experiencing it than the illness itself.

Alex Wilding, acting chair of the Lived Expertise Advisory Panel (L.E.A.P.) says typically in mental health organizations there is zero consultation with the recipients of services, and that she has experienced a higher level of stigma among mental health professionals than in other areas of her life.

C.M.H.A. H.K.P.R. prides itself on providing client and family-centred care grounded in self-determination, collaboration and inclusion. However, the long-standing attitude of 'doing for' needed to drastically change to 'doing in partnership with' service users. So, in November 2016, L.E.A.P. was established. L.E.A.P. is a diverse group of volunteers who have been service users at C.M.H.A. H.K.P.R. within the past two years. Volunteers act as advisors on policy changes, provide feedback on programming and help make sure the service users' needs and wants are understood by staff and at the centre of care.

Contributions in the past three years include a training program for staff to support development of a client and family-centred culture of care, which was delivered to over 65 new employees this year, as well as input on policy, documentation, service delivery and system changes.



**C.M.H.A. H.K.P.R. is way ahead of other mental health organizations in terms of its view and inclusiveness of the service user. We hope that L.E.A.P. will lead to a more consistent, respectful and consultative experience."**

~ Alex Wilding, acting chair of (L.E.A.P.)

Thanks to L.E.A.P. volunteers for their commitment, wisdom, voice and guidance as well as helping staff walk alongside service users in partnerships of respect, dignity and trust.

# Safe Beds Clients Enjoy New Intake Room



Top Ride Don't Hide fundraisers Jim Rainey and Rob Seguin visit the new Safe Beds Intake Room.

Crisis Safe Beds is a beautiful mature home in Peterborough with six residential beds that provide individuals a short stay in a safe, supportive environment to help them through their crisis. Until recently however, aside from the compassionate and skilled Crisis Safe Beds workers, the initial entry into Safe Beds was anything but welcoming.

Bed bugs are one of Peterborough's major pests and before clients enter the house, they are given clean clothing and their personal belongings are placed in a heated tent for four hours. This greatly reduces the risk of infestation in the home.

Until this year, the intake process was done in a dimly-lit garage with cold concrete

floors and a shower curtain used as a make-shift changing room. In the winter it was freezing and in the summer, stifling.

Thanks to funds raised from 2018 Ride Don't Hide, over \$20,000 was allocated to renovate this room to make it welcoming and safe for clients and staff.

The transformation is remarkable. The new Intake Room is warm, bright, clean and welcoming. It has a private change room and comfortable seating for clients. Jean Kehoe, Program Manager, C.M.H.A. H.K.P.R. says, "It impacts the client's stay in a positive way by decreasing fear and unknowns and increasing comfort, which starts the process of alleviating and de-escalating their crisis."

None of this would have been possible without the money raised through Ride Don't Hide. We would especially like to thank our top fundraiser, Michael Post, and his team "Break the Silence;" the runners-up for the top fundraising spot, Jim Rainey, Rob Seguin and Denise Vallee; and the top corporate team "Century 21/Corus Entertainment Cyclers."

## Numbers at a Glance

### Community Engagement and Education



151

public education  
sessions



3,811 individuals  
received education

84

trained in Applied Suicide  
Intervention Skills Training  
(ASIST)

71

trained in SafeTalk

236

trained in Mental Health  
First Aid

### Growing Our Digital Presence



2,240

twitter followers

423.4K

tweet impressions



11% increase to 1,322

Likes for our Facebook following



Breathing new life into our Instagram,  
now with 387 followers

www.cmhahkpr.ca had

129,298

page views

an average of

10,774

page views  
per month



# Events in the Community

We are so grateful for all the support and dedication that the community has shown in raising funds and mental health awareness through events this year and in years past. To all of the folks who organized, volunteered, and participated in the many community events this year, thank you. Through your support we are

able to continue providing meaningful programs and services across our four counties. Whether you ran, cycled, golfed, played baseball, shared your artistic talents, promoted or attended these events, you helped raise over \$100,000 for our programs and services. What an amazing community we belong to. Thank you.



Wards Lawyers Kids' Road Hockey Tournament



Run for Mental Health



Herod Financial Golf Tournament



Friday Night Lights



Ride Don't Hide



First Responders Cup

# Building a Connected Health Care System

As the Ontario government moves toward a connected public health care system, local organizations join forces to build health teams under the new Ontario Health Team (O.H.T.) model.

O.H.T.s will provide a new way of organizing and delivering care that is more connected to patients in their local communities. This new approach will help local health care agencies work together to reduce wait times, improve pathways to services, and ease the transition for patients across the continuum of care.

At maturity, O.H.T.s will serve as a single point of clinical and fiscal responsibility for a group of patients and will provide seamless access to various types of health care services, including:

- Primary care
- Hospitals
- Home and community care
- Palliative care
- Residential long-term care
- Mental health and addictions

O.H.T.s can be governed in three ways: by amalgamating all participating partners, establishing a new corporation to govern

providers within a team or developing network partnerships.

Developing network partnerships allows organizations to retain a higher level of autonomy while still promoting collaboration and efficiency gains.

There are four steps to becoming a designated O.H.T. including self-assessment, full application, site visit, and designation. Currently, interested groups of providers and organizations are being assessed for their ability to meet readiness criteria for forming an O.H.T. It will take several years for Ontario Health Teams to be fully operational across the province, and our government will ensure that transitions are done over time to ensure seamless patient care.

## Peterborough O.H.T.

In preparation of forming a Peterborough Health Team, C.M.H.A. H.K.P.R., along with local health care providers and community partners, recently submitted an O.H.T. self-assessment to the Ministry of Health to determine readiness for becoming a designated O.H.T.

Following an extensive review of the self-assessment, the Ministry of Health has advanced the Peterborough Health Team to the second step of the process, to complete a full O.H.T. application. The ministry expressed that the Peterborough Health Team demonstrated a strong commitment to all O.H.T. model components and showed a high degree of readiness.

#### **Peterborough Health Team local health care providers and community partners:**

- Canadian Mental Health Association Haliburton, Kawartha, Pine Ridge
- CarePartners
- CBI Home Health
- Closing the Gap Healthcare
- Community Care Peterborough
- Curve Lake First Nation
- Fourcast
- Hospice Peterborough
- Kawartha Therapy Services
- Kawartha Participation Projects Foundation
- Nightingale Nursing Services
- Patient and Family Advisory Council
- Peterborough AIDS Resource Network
- Peterborough Family Health Team
- Peterborough Housing Corporation
- Peterborough County-City Paramedics
- Peterborough Regional Health Centre & Peterborough Regional Health Centre Foundation
- Riverview Manor

- Rubidge Retirement Residence
- SE Health
- VON Canada (Peterborough, Victoria, Haliburton Site)

#### **Kawartha Lakes O.H.T.**

The self-assessment submission to form a City of Kawartha Lakes O.H.T. has progressed to the status of 'In Development' as announced by the Ministry of Health on July 18. The designation of 'In Development' means that the Ministry will provide additional resources as partners further develop their submission.

Co-led by Ross Memorial Hospital and Community Care Health and Care Network (formerly Community Care City of Kawartha Lakes), the collaborating partners for the City of Kawartha Lakes O.H.T. include:

- Brock Community Health Centre
- Canadian Mental Health Association Haliburton, Kawartha, Pine, Ridge
- CarePartners
- Client/Indigenous representatives
- Community Care Health and Care Network
- Extendicare Kawartha Lakes and Lakeland Village
- Kawartha North Family Health Team
- Ross Memorial Hospital



# Assertive Outreach Suicide Prevention

In June 2016 we launched the Assertive Outreach Suicide Prevention (A.O.S.P.) program in partnership with the Peterborough Regional Health Centre (P.R.H.C.). The A.O.S.P. program was created due to a generous donation from Team 55, a local suicide initiative with the goal of a suicide safer community.

In the past year, 19 individuals were served by the A.O.S.P. program in Kawartha Lakes and 54 in Peterborough. No individuals have died by suicide while receiving support from A.O.S.P.

From these individuals, we have learned that trauma is a factor in almost all cases of those who have made a serious suicide attempt. Most of them were not previously

known, nor were they connected to community mental health resources.

We have submitted two proposals to the Ministry of Health and Long-Term Care to secure annualized funding for A.O.S.P. and have implemented a collaborative safety plan for individuals who use the program.

All A.O.S.P. staff have completed group facilitation training at St. Michael's Hospital. The group, Skills for Safer Living, is for individuals who have suicidal ideation or have had recurrent suicide attempts. One of our next steps is to pilot this group in Peterborough and eventually expand out to Kawartha Lakes.



## Client Testimonials

“I think this is an amazing program that has really helped me to get to know the real me, and open up and speak about things that I have held in for a long time. It feels so good to be able to get everything out. I think they need more programs and people like this.”

“We need to support this program. It is an urgent need in our community. I am glad this program is getting media attention so that those in the community in need know about it.”

“It will save lives.”



73 individuals  
received supports



0 individuals  
who received support from A.O.S.P.  
have had a further suicide attempt  
while receiving services

## Around the Clock: 24/7 Crisis Support

Imagine for a moment that you are experiencing a crisis... You are alone. You don't know who to call. You don't know who or where to turn to for help. You are stuck. Take a moment to feel that.

Now, take a step back and imagine you are in the same crisis... This time you are surrounded by empathic, confident and competent people who are all focused on supporting you.

Can you feel the difference?

Our 24/7 crisis support line, Four County Crisis, ensures that any person experiencing a crisis has free, timely, and professional crisis support. Four County Crisis Manager, Jeff Cadence, believes that crises can be resolved, not just diminished, with the real-time effective collaboration and coordination of supports and services that Four County Crisis offers.

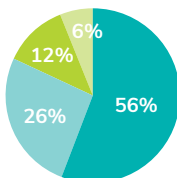
### Four County Crisis



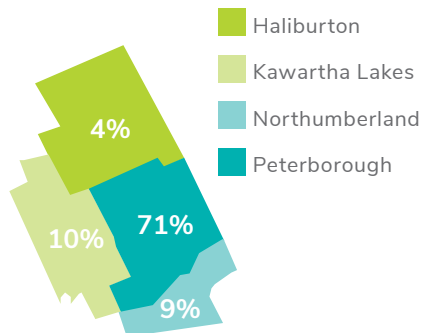
2,928 individuals  
were supported



18,609  
calls and interactions



aged 16-24  
aged 25-54  
aged 55-84  
unspecified



### Safe Beds



5,647  
interactions



188  
unique  
admissions



1,877  
face-to-face interactions  
resulting in



1,597  
residential days

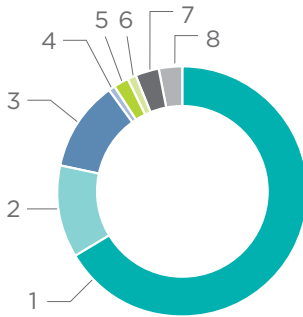


153  
new clients

# Financials

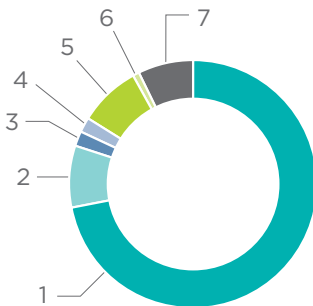
Statement of Revenue and Expenses\* April 1, 2018 - March 31, 2019

## Revenue



	2019	2018
1 ● Ministry of Health and Long-Term Care/LHIN	\$8,636,092	\$8,209,387
2 ● Ministry of Health and Long-Term Care-Housing	\$1,562,555	\$1,627,014
3 ● Ministry of Children, Community, and Social Services	\$1,328,422	\$1,272,912
● Ministry of Training, Colleges, and Universities	\$166,805	\$166,792
4 ● Municipal Funding	\$81,960	\$34,349
5 ● Other Charitable Grants	\$260,867	\$63,364
6 ● Rental Income	\$147,067	\$138,994
7 ● Donations/Fundraising/Training Revenue	\$400,143	\$288,748
8 ● Interest/Sales/Misc.	\$405,006	\$272,770
	<b>\$12,988,917</b>	<b>\$12,074,330</b>

## Expenses



	2019	2018
1 ● Salary and Benefits	\$9,290,636	\$8,486,355
2 ● Program Expenses	\$1,061,201	\$809,076
3 ● Office Expenses	\$217,363	\$204,298
4 ● Professional Fees (Psychiatry)	\$306,230	\$308,430
5 ● Occupancy Costs	\$1,038,820	\$1,330,953
6 ● Fundraising	\$57,093	\$42,157
7 ● Rent Supplement	\$953,354	\$841,919
	<b>\$12,924,697</b>	<b>\$12,023,188</b>
	<b>2019</b>	<b>2018</b>
Excess of Revenue Over Expenses	<b>\$64,220</b>	<b>\$51,142</b>

\*Audited financial statements available upon request



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Haliburton, Kawartha, Pine Ridge  
*Mental health for all*



*years of  
community*

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## Contact Us

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### **KAWARTHA LAKES PROGRAMS & SERVICES**

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2nd Floor  
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Psychosis Intervention)  
415 Water Street  
Peterborough, ON K9H 3L9  
705-748-6687

### **Major Funders**

Central East Local Health Integration  
Network

Ministry of Health and Long Term  
Care- Housing Program

Ministry of Children, Community & Social  
Services

Ministry of Training, Colleges, and  
Universities

City of Peterborough

City of Kawartha Lakes

United Way of Peterborough & District

United Way of City of Kawartha Lakes

Ontario Trillium Foundation

### **Major Donors (over \$5,000)**

Wards Lawyers PC

Team 55

We would also like to thank our many  
event sponsors!