

# **BEHAVIOURAL HEALTH FOUNDATION**



## **Annual Report**

**APRIL 1, 2019—MARCH 31, 2020**





# Our Purpose

*The Behavioural Health Foundation Inc. is a therapeutic community with the purpose of providing long-term programming to persons experiencing addiction and co-occurring mental health problems and the chronically unemployed due to addictive behaviours. Dependents of these persons are also accommodated both in residence and in programs. This long-term purpose is designed to offer graduated opportunities aimed at equipping a person with the skills necessary for successful integration into normative society free of addictive behaviours.*

## ***Board of Directors***

***2019-2020***

Peter Kingsley, President

Sachit Mehra, Vice President

Marilyn Brick

Marian Deegan

Michelle Ducharme

Marlene Gallagher

Marcel Laurendeau

Doug Mercer

Naureen Punjani

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Dr. Kent Somers

Dan Trottier

Lori Van Dongen

Jean Doucha, Executive Director

Kuljeet Kaur, Executive Secretary



### **Behavioural Health Foundation Inc.**

Addictions and Co-occurring Mental Health Treatment

Box 250

35 ave de la Digue

St. Norbert, MB R3V 1L6

Telephone (204) 269-3430

info@bhf.ca www.bhf.ca

#### **Addiction Treatment Services**

Box 250, 35 ave de la Digue

St. Norbert, MB R3V 1L6

Intake Inquiries: Troy Burrows

Telephone: (204) 269-3430 ext. 140

#### **Breezy Point (Women's Program)**

Box 250, 35b ave de la digue

St. Norbert, MB R3V 1L6

Intake Inquiries: Cheryl Toms

Telephone: (204) 261-6111

Program accreditation provided by

[www.carf.org](http://www.carf.org)



## ***Thank You For Your Support***

*The Behavioural Health Foundation is located on Treaty One territory and the homeland of the Metis Nation. Our programs could not exist without the support of government departments, private businesses and agencies and members of the public. We are grateful for the ongoing support and pledge to continue our work to assist people in becoming productive members of society who can and will pay it forward.*

*The Board of Directors, staff and program members thank you.*



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## BHF Philosophy

*The philosophy is based on the belief that no person is an island unto themselves and that self-help comes from helping others. The positive power that resides in everyone can overcome the negative aspects of life. And, if we are to learn and to teach, we must attach ourselves to an environment that is created and dedicated to the betterment of humanity. We cannot cross a desert until we have prepared ourselves. We cannot travel the road of life blaming those about us, but rather we must accept responsibility for ourselves and each other and conquer each situation that we meet. Our pasts have been written and cannot be erased. Therefore, we must work and concentrate for today with a vision of tomorrow.*

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## President's Remarks

*I am pleased to present this Annual Report to our members, funders, supporters, and the public. It provides comprehensive information on services provided, days of care, population demographics, and outcome measurements. I hope it may also give readers a sense of the values and personal commitment to change that motivates our staff and resident members alike.*

*BHF has long recognized the importance of Indigenous teachings and ceremonies in helping individuals and families address addiction and co-occurring mental health issues. Over the past thirty years, with the help of many Elders and the leadership of Mike Calder, Director of Indigenous Services, BHF has developed strong and inclusive Indigenous programming. In our 2018 – 2019 Annual Report, we described the challenges we faced when changes to federal guidelines resulted in the loss of First Nations and Inuit Health Branch funding. We also described our gratitude to Bell Let's Talk Mental Health for committing to three years of significant support for Indigenous Services and our continuing efforts to secure the balance of funds needed to sustain this crucial programming. Those efforts bore*

*fruit in July 2019 when Manitoba Health, Seniors and Active Living announced its continuing Service Agreement with BHF would include funding for Indigenous cultural programming, an important acknowledgement that this is an integral part of our treatment model.*

*In July 2019, the provincial government also accepted BHF's long standing request to add additional treatment beds at the Breezy Point women's program, increasing funding from 10 beds to 14. While this may be a small increase in the overall number of addiction treatment spaces in Manitoba, it does help to reduce wait times for those who prefer a gender-specific milieu. Because of BHF's wholistic programming and open-ended length of stay, these four additional beds also contribute to the number of pregnant women who can be accommodated in a safe, abstinent and respectful community throughout pregnancy and beyond, or reunify with children already in care, while working toward their own personal goals, at their own pace, supported by staff and peers.*

*In addition to the two main residential buildings in St. Norbert, BHF owns several transition houses scattered throughout the neighbourhood. These houses amplify options for people who have completed primary treatment components but want to remain connected to the therapeutic community for an extended period of time. As with other aspects of broad-based and comprehensive services at BHF, maintaining and improving these houses in a climate of overall fiscal restraint, presents some logistical and financial challenges. Nevertheless, as pandemic restrictions began to be imposed across Manitoba, having our own transition housing proved invaluable. At the beginning of March, fifteen of our senior members were working off-site on a regular basis and returning to interact with other members in the evenings. Securing employment is an important step toward post-treatment success, but clearly difficult to reconcile with shelter-in-place plans for the ninety-five other adults and children then in residence. By dedicating the transition houses to those who opted to continue working off-site, we were able to support their employment goals while reducing risk to the larger population.*

*The start of the Covid-19 pandemic coincided with the ending of the fiscal year. Its full impact will undoubtedly inform next year's Annual Report and may be felt for some time to come. As 2019 – 2020 ended however, it was clear that BHF staff and residents had come together with commendable efficiency and resolve in the face of a then mostly unknown threat. The majority of staff continued to work without interruption, managing the necessary changes and adaptations while still maintaining essential programming and supporting residents. Executive Director Jean Doucha, Facility Manager Angela Antoine, Director of Maintenance Dean Storie, Cook Nichola Nelson, Nurses Pat Corner and Iulia Macavei, and Daycare Director Christina Kazmierczak all played crucial roles in keeping BHF safe and functioning well. Many thanks to each of them and to everyone who worked so hard in this critical period.*

*While the challenges of the pandemic are not entirely behind us and other challenges will undoubtedly arise, the achievements of 2019 – 2020 point to BHF's ability to remain steadfast, committed to welcoming and supporting people of all ages and backgrounds as they address the issues that led to addiction and move on to healthier, happier lives. To everyone involved – my fellow Board members, our funders, supporters, staff, residents and their families – thank you. Our work could not continue without you.*

Peter Kingsley, Q.C.

President, BHF Board of Directors



# Our Mission

To provide quality behavioural health services of a holistic nature to men, women, and dependent children leading to personal and family wellness in areas of education, employment, health and family values. The ongoing fulfillment of this mission will reduce the harm to individuals and family units that is caused by the misuse of substances, other addictive behaviours, and co-occurring mental health concerns.

## BHF Core Values

1. The Behavioural Health Foundation welcomes and promotes diversity in societal and cultural values amongst members.
2. Members have the right to be treated with dignity and respect.
3. Members have the right to receive treatment without discrimination regarding race, ethnic origin, gender, sexual orientation or age.
4. Members have the right to have their religious beliefs respected.
5. Members should recognize that the best interests of the client may be better served by referring or releasing the client to another agency or professional.





## Finances & Acknowledgements

BHF is thankful for the financial support from many private donors as well as the following during fiscal year 2019-2020:

- Bell Let's Talk Mental Health
- Canada Summer Jobs
- Gray Academy Youth in Philanthropy
- Manitoba Economic Development and Training
- Manitoba Education & Training
- Manitoba Families
- Manitoba Health, Seniors and Active Living
- Red River Co-op Community Fund
- Shoppers Drug Mart We Love You Fund
- Thomas Sill Foundation
- Women's Endowment Fund, Jewish Foundation of Manitoba



*(from left) Sachit Mehra, Peter Kingsley*



*BHF Staff, 2019*



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# Outcomes & Effectiveness

BHF uses a variety of performance indicators to measure program outcomes. BHF strives to increase lengths of stay, help residents achieve employment and education goals, and reunite families.

## Addiction Treatment Services:

- The average length of stay of adults who exited in the fiscal year was 79 days.
- 60% of adults who exited completed primary treatment.
- 91% of adults were free from substance use and 100% reduced their substance use at exit from the program.
- 24% of adults were employed or in some other productive role upon exit.
- 99% of adults had no new criminal justice system involvement during their treatment stay.
- 25 adults enrolled in the Adult Education Centre and 56 credits were obtained by these participants.
- 10 adults had One Year celebrations in 2019-2020.

## Breezy Point:

- The average length of stay of women who exited in the fiscal year was 80 days.
- 63% of women who exited completed primary treatment.
- 94% of women were free from substance use and 100% reduced their substance use at exit from the program.
- 100% of women had no new criminal justice system involvement during their treatment stay.
- 4 women had One Year celebrations in 2019-2020

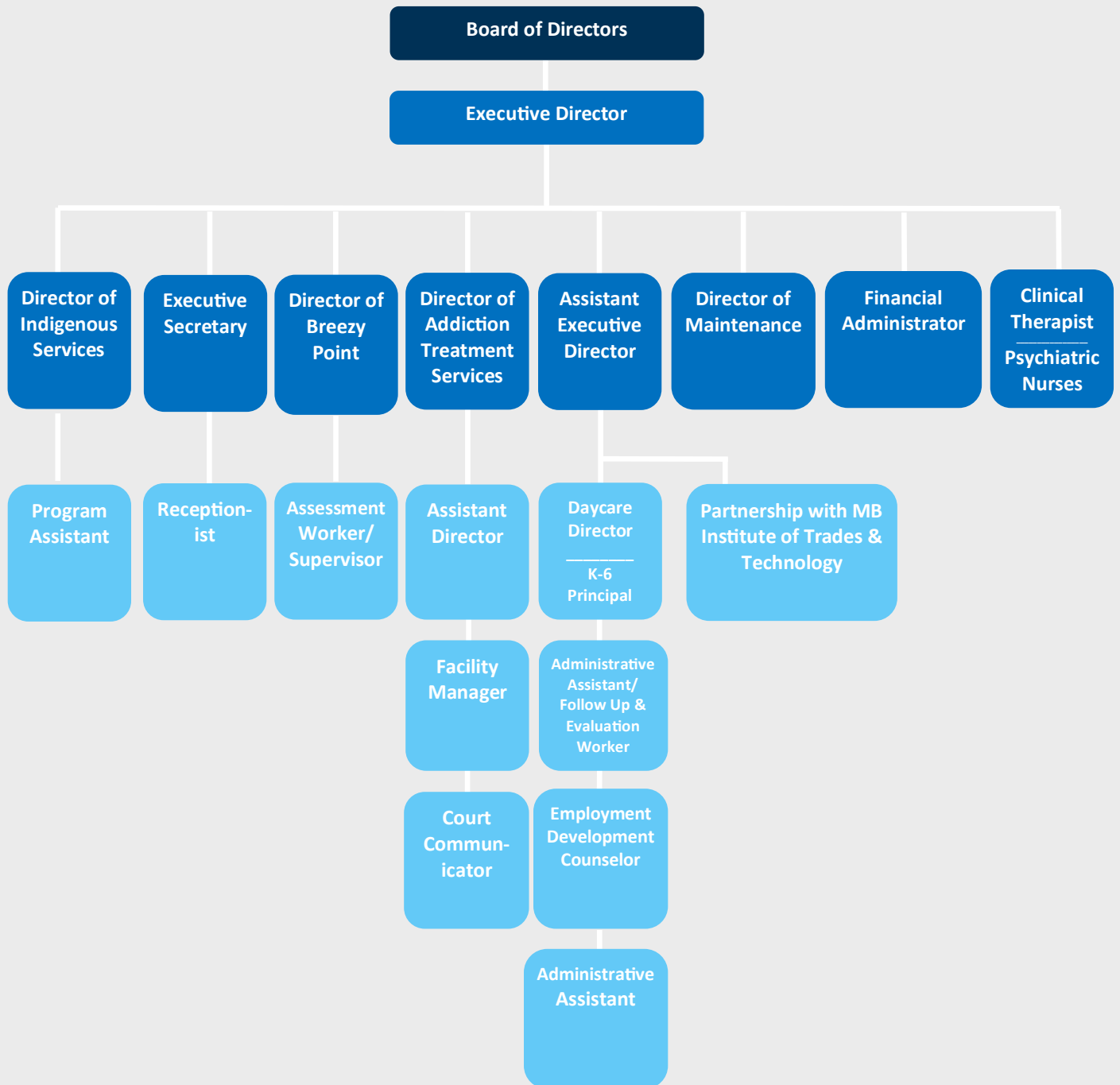
BHF performs Consumer-Based Program Evaluations twice yearly in all of its programs and asks residents to complete an Exit Questionnaire upon leaving the program. The summary of results for this reporting period showed positive results overall.





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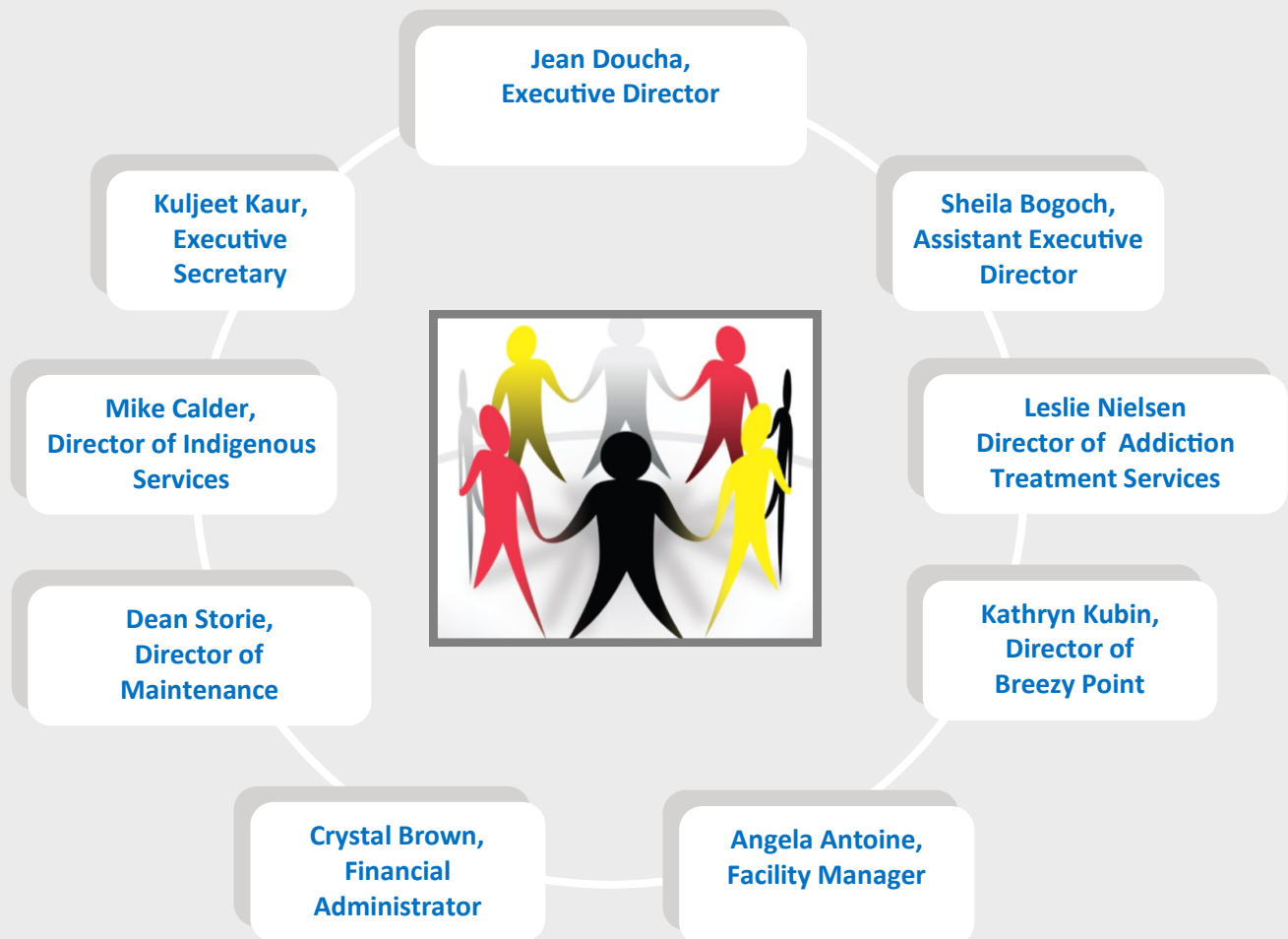
# Organizational Chart



 Represents Senior Management



# Management



*(From left) Markus Chambers, Sachit Mehra, Jean Doucha, Terry Duguid, Peter Kingsley.*

# Staffing

BHF's array of services provide a variety of employment opportunities. In addition to program directors, other management and front line staff including Keyworkers and Support Workers for residents in treatment, BHF employs office, kitchen and maintenance staff, follow-up and outreach workers, program assistants, an Employment Development Counsellor, two Psychiatric Nurses, two Clinical Therapists, Early Childhood Educators, Child Care Assistants, teachers and education support workers. All staff have a variety of skill sets and they work together across BHF's departments and facilities to contribute to the treatment experience for individual adults and children of members.

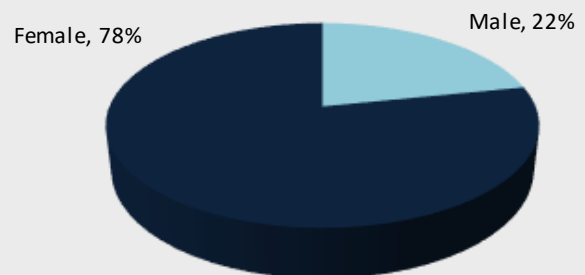
## Staff Demographics

As of March 31, 2019 BHF had 71 staff; 51 were full time and 20 were part time.

### Staff Ethnicity



### Staff Gender



## Staff Training

In addition to attending numerous community-based workshops and courses including Trauma Informed Care, BHF staff participated in a number of internal training sessions including:

- Indigenous Awareness and Cultural Competency
- Blood Spill Clean-up & Medical Emergencies
- Crisis Prevention Intervention
- Critical Incident Debriefing
- FASD Training
- Fire Extinguisher Training
- Fire Panel Training
- First Aid/CPR/Defibrillator Training
- Individual Treatment Plan Development
- Medication Management
- Mental Health Disorders
- Motivational Interviewing
- Naloxone/Overdose Training
- New Hire Training/Orientation
- Power Outages
- Staff Code of Ethics, Professional Conduct
- Suicide/Self-Harm Prevention & Intervention
- Therapeutic Community Training
- WHMIS
- Workplace Threats



## Program Description



The Behavioural Health Foundation Inc. is a therapeutic community (TC) providing long-term residential treatment for men, women, and family units experiencing issues related to substance use and co-occurring mental health concerns. The TC approach provides a highly structured environment with well-defined boundaries emphasizing moral and ethical accountability, community imposed sanctions, and contingencies such as privileges and attainment of status. Also emphasized is the idea of being a part of something greater than oneself to counter the pattern of isolation and narcissism often found amongst the substance abusing and co-occurring mental health population. (De Leon, 2000). A person is thought of as a

resident member of the therapeutic community, rather than as a client/patient, and the therapeutic community itself is defined as the physical and social environment within which the members live.

Therapeutic communities are deliberately designed to offer graduated opportunities to equip residents with the vocational, intellectual, emotional and spiritual skills necessary for successful reintegration into society. The peer hierarchy of work and community status defines the roles, functions, and relationships that mediate socialization and therapeutic change, while the peer culture encourages the norms, values, and beliefs of right living which guides the change.

## Member Profile

Although BHF residents have varied backgrounds, they initially share problems such as unhelpful behaviours, thoughts and emotions, non-productive interactions with others, and distorted perceptions of themselves and the world. In the TC model, substance use and co-occurring mental health problems are seen as disorders of the whole person. The array of life problems, the number of substance use issues, and motivation to change are different for each person entering treatment. There are however, some common themes that reflect the BHF population:

- Many new members arrive with histories of family dysfunction – including sexual, emotional and physical abuse, familial substance abuse, generational poverty, parental neglect, and multiple experiences in foster care.
- Drug related arrests and hospitalizations prior to entry are common.
- Many members have histories of unemployment or under employment. Hence, they possess few job skills and/or work experiences.
- Membership in the Behavioural Health Foundation is sometimes an alternative to being remanded or sentenced to a period of incarceration.
- Finally, the desire to improve the quality of one's life is a prerequisite to living at BHF. To achieve this, members come to BHF voluntarily.



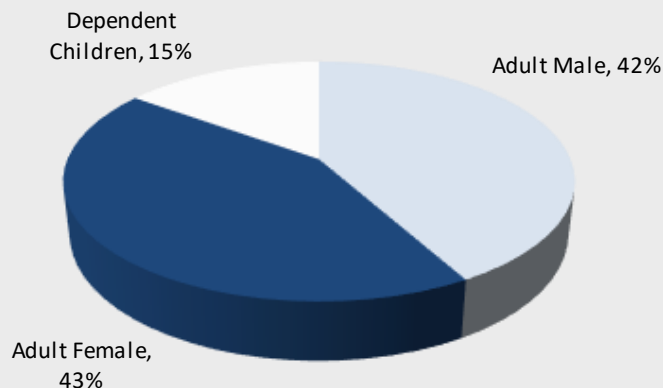
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# Intake and Days Care

## Total Intakes BHF Programs 2019-2020

Adult Males	175
Adult Females	180
Dependent Children	63
<b>Total Intakes</b>	<b>418</b>

## Total Intake in all Programs



## Days of Care Provided

Adults	29,485
Dependent Children	7,461
<b>Total Days of Care Provided</b>	<b>36,946</b>

## River Point Intake/Outreach Services

The Behavioural Health Foundation is one of three addiction and co-occurring mental health treatment providers operating out of the River Point Centre on Magnus Avenue in the Point Douglas area. Staffed by two Intake/Outreach Workers, BHF's River Point Centre offices provide information, support and solution-focused counselling to persons contemplating entering treatment and to those who have exited BHF's residential programs. Over the past year, there has been a noticeable increase in the number people wanting to maintain a connection with BHF post-treatment. For some, this may be an occasional phone call just to touch base. Others may be seeking help connecting to community resources, or visiting the office for counselling.





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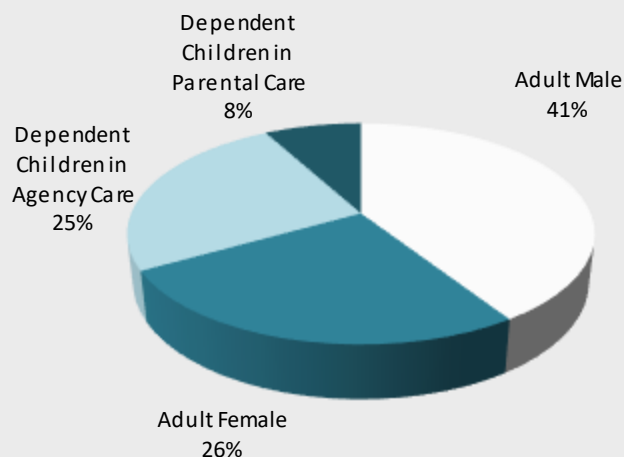
# Addiction Treatment Services

The Behavioural Health Foundation Addiction Treatment Services is internationally accredited. The residential addictions and co-occurring mental health treatment facility accommodates adults and dependent children. Members are housed in the main building, located in the community of St. Norbert, as well as in 6 transition houses in the nearby community. The maximum occupancy is 100 adults and children.

## Referrals & Wait List

A total of 2,319 referrals of adults and dependent children were made to the Addictions Treatment Services program in the 2019-2020 fiscal year. These referrals consisted of 1015 men, 551 women, 144 children in their parents' care, and 609 children in the care of Child & Family Services agencies. For referrals who were admitted into the program, the average time spent on the waiting list was 34 days.

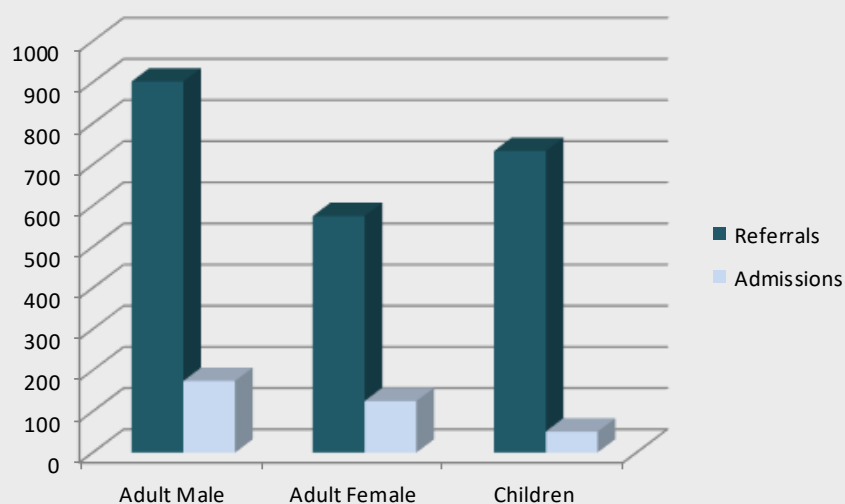
## Addiction Treatment Services Referrals



There are numerous reasons that referrals did not enter the program, as follows:

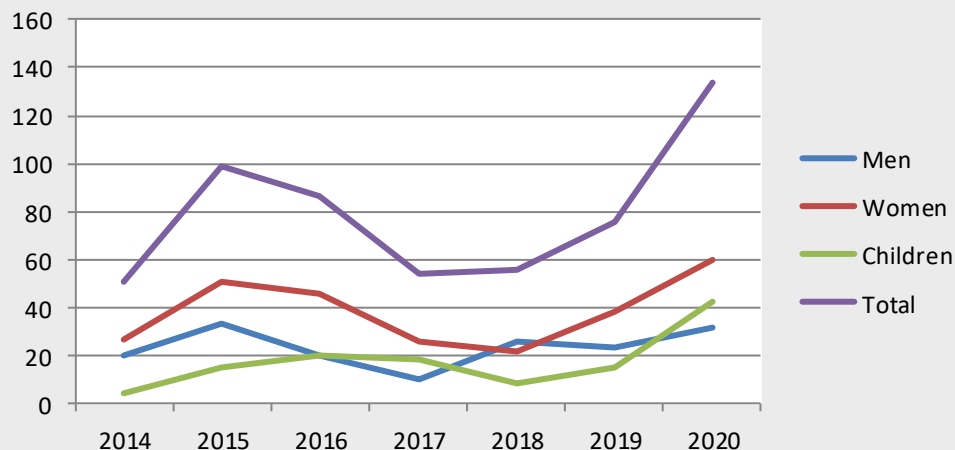
- Clients experiencing long waiting periods decided to seek other treatment or had changed their mind about attending treatment when bed space became available.
- Clients were found unsuitable for the program due to histories of sexual offence, arson, other serious offences or active gang involvement.
- Clients were unsuitable due to serious and persistent health/mental health or mobility concerns.
- Clients had a previous history of poor program performance.
- Clients were unsuitable due to having no addiction issues.

## Referrals vs. Admissions

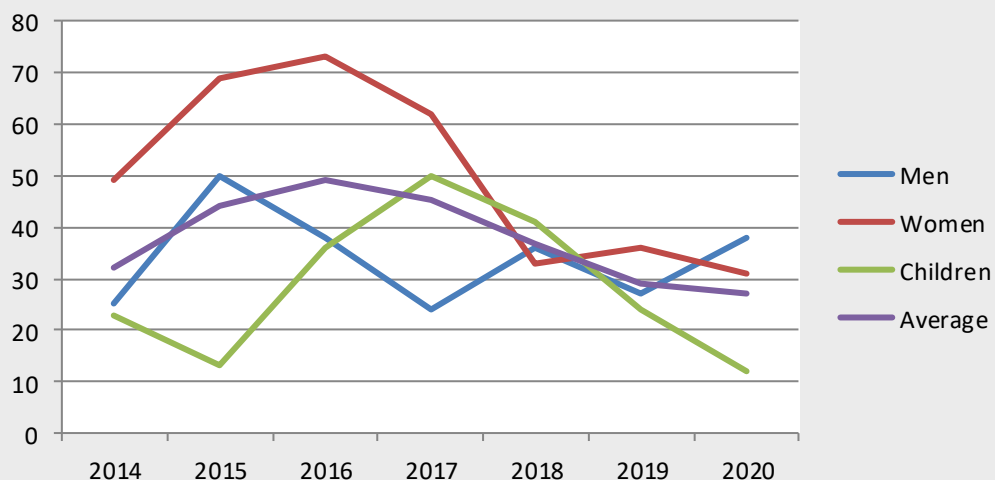


## Waiting List Statistics: a 7-Year Comparison

**Average Number of Clients on Wait List at Month-end**



**Average Number of Days Spent on Wait List, for Clients who Entered**





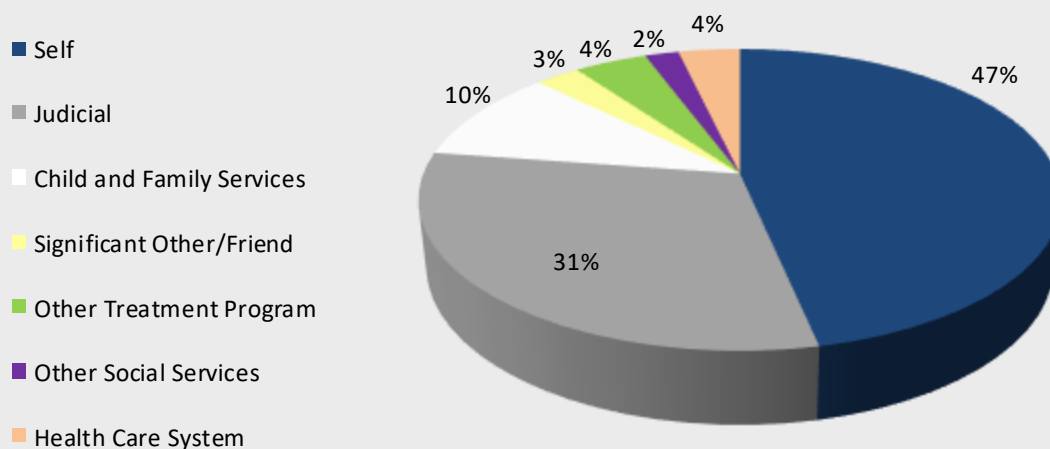
## Client Detail, Addiction Treatment Services

Total Intakes, Addiction Treatment Services	
Adult Males	175
Adult Females	125
Total Adults Admitted to Program	300
Children of Members	51
<b>Total Residents</b>	<b>351</b>

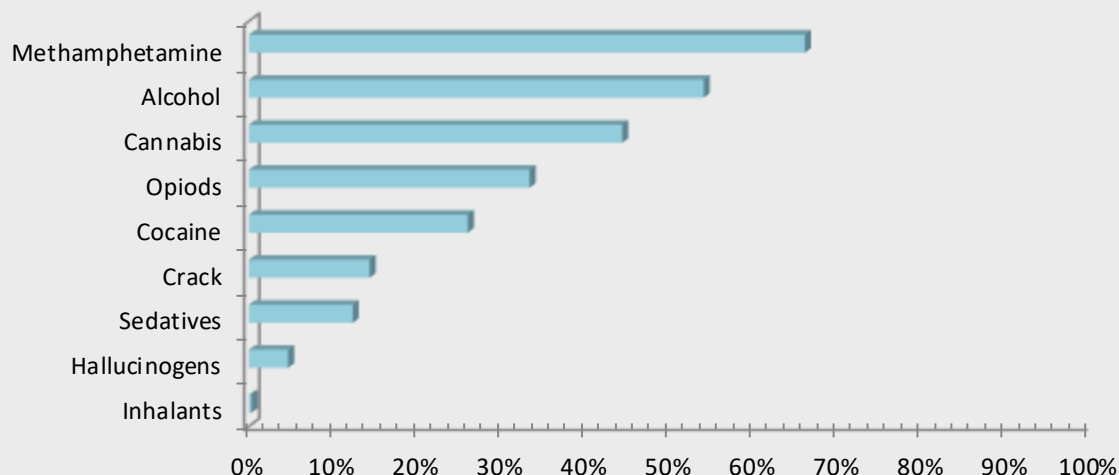
Average Age	32
Age Range	19-66
Average Length of Stay*	74 days
Completed Primary Treatment (30 days)	175 (58%)
Stayed over 90 days	84 (28%)

\* Twenty-two clients who entered during the 2019-2020 fiscal year remain in the program at the time of this report. These figures will increase until all clients exit the program.

### Intake Referral Sources



### Most Frequently Used Substances



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## Children of Members (Addiction Treatment Services)

During the 2019-2020 fiscal year, 51 children came to live at BHF Addiction Treatment Services program while their parents participated in treatment. At entry, 24 (47%) children were in agency care. The average length of stay of children was 129 days. Sixteen (31%) children had regular visitation with their parents at BHF prior to moving in. There were 6 babies born to mothers who entered the program pregnant. Of the 24 children who entered BHF in the care of Child & Family Services, 20 (83%), to date had successful reunifications where the parent regained custody of their child(ren) while in the program. An additional eight children who entered in 2019-2020 remain in the program with their parents at the time of this report.

## Post-Treatment Follow-Up

The Behavioural Health Foundation conducts a continuous 6-month follow-up study of program participants. The information below is based on clients who attended treatment during the fiscal period of April 1, 2018 to March 31, 2019. The fiscal 2019-2020 follow-up year (at the time of this report) is in progress, and the results will be available in the Systems Evaluation Report in early 2021.

Ex-residents are contacted 6 months after completion of primary treatment. They are asked a variety of questions such as whether or not they are using substances and to what extent, their employment status, educational pursuits, and if they have new criminal justice system involvement. Residents who participated in BHF's programs are asked to participate in a Satisfaction Survey. The comprehensive results of the ongoing follow up study are available in the annual Systems Evaluation Report. The following is a brief summary of some results of the 2018-2019 study.

### Substance Use Reduction

Of the 58 clients located and interviewed 6 months after completion of primary treatment, 74% significantly reduced their use of substances. The average reduction of substance use was 12.7 points on the World Health Organization's ASSIST Scale.

### Criminal Justice System Involvement

Fifty-nine percent of all residents who entered in the 2018-2019 fiscal year had involvement with the Criminal Justice System. They were on bail, probation or serving a conditional sentence. At the time of follow-up, 81% of located clients had no new involvement with the law.

### Employment

Upon entry, 91% of clients were unemployed. Only 9% had full or part time employment, were participating in full time vocational education programming, or were the homemaker of a household. At the time of follow-up, 48% of the clients located had become involved in these successful pursuits, a significant increase.

### Education

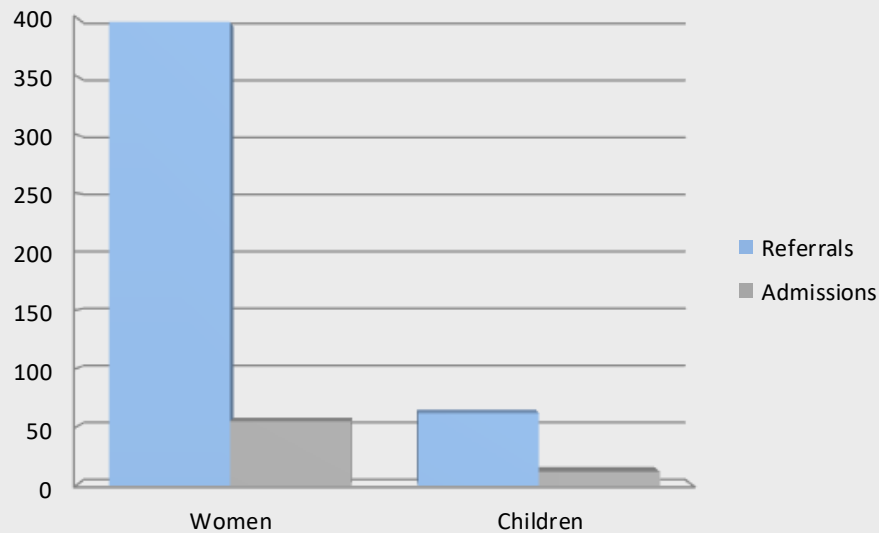
In this reporting period, 27 residents took advantage of the on-site Adult Education Centre. Ten of the 58 (17%) residents who were successfully contacted at 6 months were involved in educational pursuits, either at the St. Norbert Adult Education Centre, other centres, colleges, or universities. Many of these clients were pursuing their education in conjunction with full or part time jobs and/or while homemaking.





*Breezy Point is a fourteen-bed women's facility. Dependent children under the age of two are also housed at the facility. Referral numbers for Breezy Point exceed the number of intakes.*

## Referrals & Wait List



Wait List	2017-2018	2018-2019	2019-2020
Average Days on Wait List for Women who Entered	28	22	42
Average Days on Wait List for Children who Entered	37	0	1
Average Number of Women on Wait List at Month End	9	10	27
Average Number of Children on Wait List at Month End	2	0	1

## Client Detail

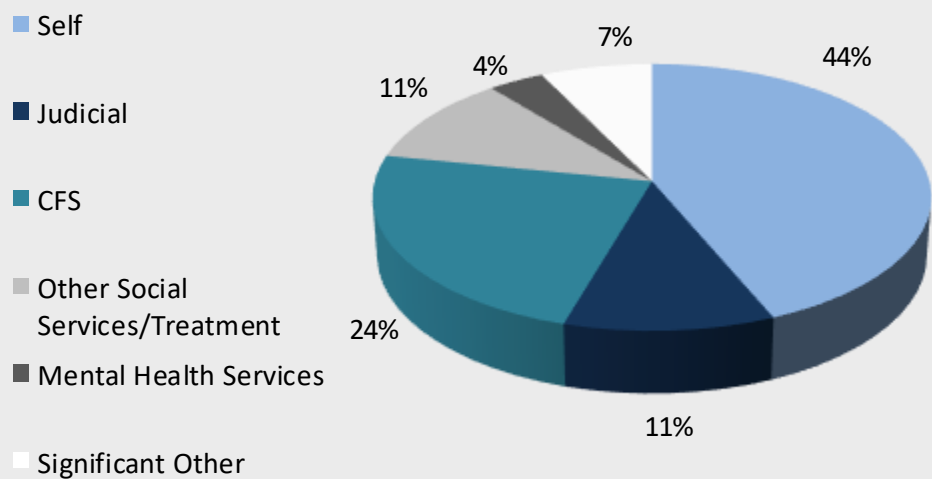
Average Age of Women	28
Age Range	21-47
Average Length of Stay in Treatment*	72*
Completed Primary Treatment	31 (56%)
Women who stayed over 90 days	19 (35%)

*\*Six clients who entered during the 2019-2020 fiscal year remain in the program at the time of this report. This number will increase until they exit the program.*

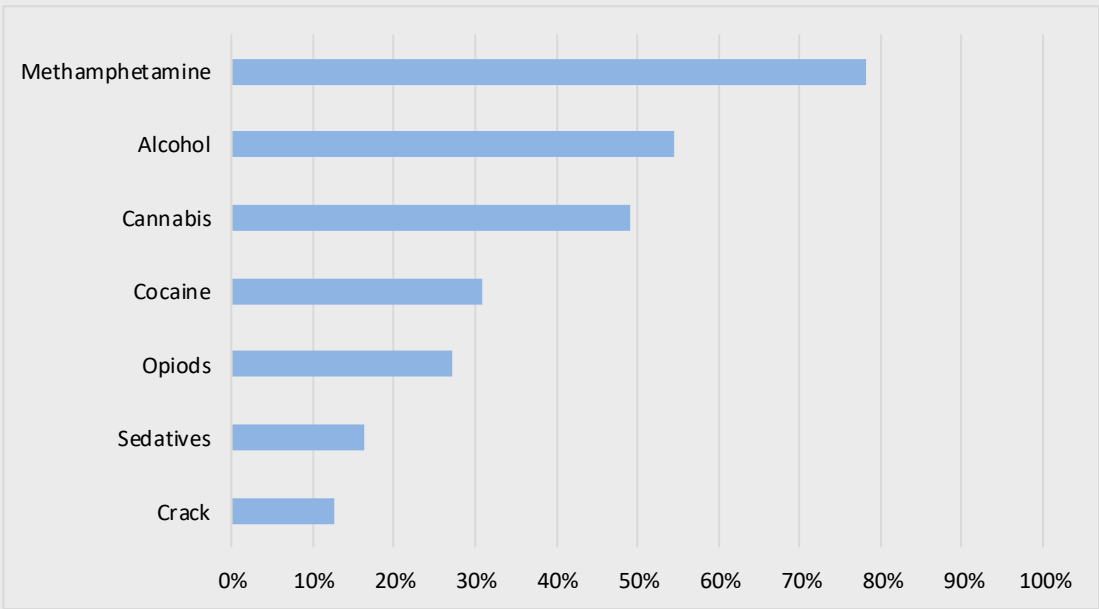
There were 55 intakes at Breezy Point during the 2019-2020 fiscal year. Referral sources included self, judicial, mental health services, other treatment programs including transfers from BHF’s Addiction Treatment Services program, and Child and Family Services. Forty-one (75%) of these women were from the City of Winnipeg and 14 (25%) were from elsewhere in Manitoba. Forty-six women (83%) were Indigenous.

Forty-three (78%) of the 55 women were mothers whose children were either in foster care or the care of extended family. The total number of children among this population was 105, an average of 2.4 children per mother. Twelve (22%) of the intakes were pregnant women. Fifty-one (93%) of the women who entered Breezy Point were unemployed at entry. At the time of this report, 6 of the women who entered in the last fiscal year remain in the program. The facility also housed 12 children during the fiscal year.

### Breezy Point Referral Sources



### Most Frequently Used Substances





# Breezy Point Follow-Up

The Behavioural Health Foundation conducts a continuous 6-month follow-up study of program participants. The information below is based on women who attended treatment at Breezy Point during the fiscal period April 1, 2018 to March 31, 2019. The fiscal 2019-2020 follow-up year (at the time of this report) is in progress, and the results will be available in the Systems Evaluation Report in early 2021.

Ex-residents are contacted 6 months after completion of primary treatment. They are asked a variety of questions such as whether or not they are using substances and to what extent, their employment status, educational pursuits, and if they have new criminal justice system involvement. Residents who participated in BHF's programs are also asked to participate in a Satisfaction Survey. The comprehensive results of the ongoing follow up study are available in the annual Systems Evaluation Report. The following is a brief summary of some results of the 2018-2019 study.

## Substance Use Reduction

Of the 11 women located and interviewed 6 months after completion of primary treatment, 7 (64%) significantly reduced their use of substances. The average reduction of substance use was 15 points on the World Health Organization's ASSIST Scale.

## Criminal Justice System Involvement

Twenty-six (58%) of all residents who entered in the 2018-2019 fiscal year had involvement with the Criminal Justice System. They were on bail or probation. At the time of follow-up, 100% of located women had no new involvement with the law.



## Employment & Education

Upon entry to the program, three (7%) of the women had employment or were homemaking full time. Of the 11 women who were located 6 months after completion of primary treatment, 5 (45%) were involved in successful pursuits of working or homemaking full time and two (9%) were attending education full time.

*Staff training session facilitated by Director of Addiction Treatment Services, Leslie Nielsen*

*The Clinical Services component of the Behavioural Health Foundation provides consultation and training to all BHF programs and staff as well as individual and family assessment/therapy to residents and their families. The following provides an overview of Clinical Services activities.*

## Therapy, Assessments & Consultations

Of the 355 adult intakes in 2019-2020 (Addictions Treatment Services and Breezy Point combined) 335 were screened for past and present mental health concerns. One hundred and sixty-six (50%) declared to have a past mental health diagnosis, past mental-health related hospitalization, and/or self-harm or self-harm ideation. Two hundred and twelve (63%) reported having suffered significant trauma.

In 2019, BHF hired a second Clinical Therapist to provide much needed services. Through the 2019-2020 year, BHF's Clinical Therapists provided direct mental health services to over a hundred residents. This included individual, group, family and couple's therapy. In an effort to address systemic challenges, therapy services were not only provided for residents of BHF, but also for the children of residents. Additionally, a therapy dog program was initiated with the cooperation of St. John's Ambulance, which provides a specially trained dog to attend BHF and provide residents with therapeutic animal contact.

In addition to therapy and assessments with individuals, the Clinical Therapists and Psychiatric Nurses provided consultation and training to treatment staff regarding co-occurring mental health disorders, medication management, treatment planning, crisis situations, and referrals with complex mental health needs.

## Medical

The BHF Psychiatric Nurses assist in monitoring medication use and ensure all medical and psychiatric needs are met throughout residents' stay. This involves networking with pharmacies, physicians, and other organizations to ensure continuity of care. The nurses provide consultation and education to both staff and residents on a variety of topics as the needs arise. The nurses trained staff in overdose response, including the use of nasal Naloxone, as well as co-occurring disorders. During this fiscal year, the BHF Psychiatric Nurses continued the relationship with Access Fort Garry and organized weekly on-site satellite clinics at BHF for health assessments and medication refills. The nurses also continued the relationship with Public Health Services to meet the prenatal and postnatal needs of women, as well as supported visits with the Families First program and Healthy Start for Mom and Me program. As we have all been affected by the recent COVID-19 pandemic, our nurses helped implement new guidelines and practices to maintain the safety of our community. This included close monitoring of COVID-19 signs and symptoms, isolation and social distancing practices, and education on hand hygiene.





*Support Services are those departments which support the daily functioning of the treatment program or enhance the experience and learning of program participants. Support Services include Education, Child Care, Employment Development, Maintenance, and Food Services.*

## St. Norbert Adult Education Centre

The St. Norbert Adult Education Centre (SNAEC) is operated by Manitoba Institute of trades and Technology (MITT) in partnership with the Behavioural Health Foundation. SNAEC offers adults 19 years of age and older the opportunity to complete a Grade 12 Mature Student Diploma or to upgrade high school courses in preparation for post-secondary education. The student body is a mix of BHF residents and adults from the surrounding

communities. SNAEC recognizes the importance of adult education and the positive impact it has on individuals, families and communities. Though physical classes at SNAEC were suspended as of March 20, SNAEC teachers worked diligently to set up alternate avenues for teaching lessons and staying connected with students. Despite the challenges posed by the pandemic, twenty BHF members completed one or more credits in the 2019 – 2020 school year, and two BHF members were among the twelve students who graduated.



*Classroom, St. Norbert Adult Education Centre*

## BHF K—6 School

BHF's on-site Kindergarten – Grade Six program operates through Manitoba Education and Training as an independent school with one certified Teacher/ Principal and two Education Assistants. Programming focuses on responding to students' individual needs and strengths, while following Manitoba curriculum guidelines. A unique strength of this program is the opportunity to integrate children's school experiences into wholistic planning for families. This includes access to on-site Indigenous Services, a collaborative relationship with BHF daycare staff, and an empathetic connection between classroom staff and parents. Following the March 13 suspension of physical classes, the K – 6 teacher maintained contact with all families, providing individualized home assignments and consulting with parents as to students' needs and progress. In the course of the 2019 – 2020 school year, a total of twenty children participated in the K – 6 classroom. BHF gratefully acknowledges funding from Manitoba Education and Training to operate this unique school.

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## BHF Daycare

On-site licensed childcare is a unique support for families dealing with addiction and co-occurring mental health issues. Early Childhood Educators and Child Care Assistants work with parents and the therapeutic community as a whole to provide a safe, stimulating and developmentally appropriate play environment and to foster a positive sense of family and cultural identity. As in the previous year, the Daycare Director provided a variety of parenting education workshops for parents whose children are in residence with them and for those hoping to reunify in the future.

BHF Daycare is licensed for four infants, eight preschoolers and twelve school aged children. In the period April 1, 2019 – March 31, 2020, 66 children were accommodated in the various age groups, with individual length of stay varying from 3 days to 30 weeks (and still enrolled at the end of the fiscal year). When the province announced that child care centres would be closed due to the pandemic, BHF applied to keep our centre open. All families using the daycare were living in the therapeutic community and children would remain in daily contact with one another whether the daycare was closed or not. In these circumstances, Early Learning and Child Care agreed that BHF Daycare should remain open and continue to provide programming in a child-centered and professionally supervised setting.

BHF gratefully acknowledges Early Learning and Child Care whose support and individualized funding agreement makes the provision of on-site quality child care possible.

## Employment Development

Employment readiness is an integral component of wholistic addictions treatment. The majority of adults who come to BHF are unemployed at entry and face numerous challenges in gaining employment. Barriers include interrupted or incomplete education, poor or nonexistent employment histories, lack of role models, repeated experiences of systemic discrimination, and diminished self-confidence. Some barriers are very specific – lack of ID, lack of bank account/ dependency on pay day lenders, ineligibility for federal benefits due to not filing income tax declarations, inability to pay for a bus pass, work boots or other necessary items.

BHF is fortunate to be able to network with other agencies and programs in addressing barriers to employment and financial stability. In the 2019 – 2020 fiscal year, 112 birth certificate applications (for treatment program members and their children) were completed with the Employment Development Counsellor's assistance and funding through SEED Winnipeg's Access to ID program. Over the course of the fiscal year, BHF continued as a referral site for the Assiniboine Credit Union's Financial Access Program, helping adults in treatment to set up bank accounts. As a Canada Revenue Agency Community Voluntary Income Tax Program (CVITP) site, BHF was also able to assist eighty-five program members in filing tax returns, which in turn allows them to apply for federal benefits.

BHF's Employment Development Program assists members in preparing to enter or re-enter the paid work force at whatever point makes sense in their individual treatment plan. In the fiscal year 2019 – 2020, one hundred eleven adults enrolled in this programming. They identified transferable skills, prepared resumes, discussed job search strategies, and learned about employment rights and responsibilities. Thirty-eight individuals obtained employment while still residing in the therapeutic community. BHF gratefully acknowledges Manitoba Education and Training for their contribution toward the Employment Development program.



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## Food Services

The BHF kitchen is a vital part of the organization. Kitchen staff ensure meals are nutritious, well-prepared and presented on time. In addition, they supervise Addictions Treatment Services members on the kitchen crew, teaching safe food handling, operation and care of kitchen equipment, food preparation and food service. In the course of a year, kitchen staff and crew work together to produce thousands of meals, coffee break snacks for adults, morning and afternoon snacks for children at the daycare, and refreshments for numerous special events. With the on-set of the Covid-19 pandemic, kitchen staff implemented careful changes in kitchen/ dining room procedures to ensure everyone's continued health and safety. Program graduates often comment that experience in the BHF kitchen provided valuable work experience and life skills.

## Maintenance

BHF's numerous buildings and attractive setting help to make possible the breadth of activities and services that make the residential programs truly wholistic. The Director of Maintenance and his helpers are tasked with keeping the grounds, buildings and machinery in good repair, ensuring a safe and comfortable environment for staff, residents and visitors. They meet that challenge admirably. Notable maintenance projects of the 2019 – 2020 year included a new fence for the daycare play yard, a new hot water tank at the main residence, new doors for the North Wind Lodge, and the purchase of tires for the tractor and two pickup trucks.



During the fiscal year, 78 sweats were held at the sacred grounds in St. Norbert for BHF program participants as well as community members. One hundred and forty community members attended these sweats. In July of 2019, BHF was host to Mike Calder's (Director of Indigenous Services) Sundance ceremony. Eighty-six dancers participated. One Sundance preparation ceremony took place in advance. Four full moon

ceremonies were held in St. Norbert. Fifty-nine female residents from BHF and 16 women from the community attended these ceremonies. The Ghost Dance ceremony was cancelled for October. Residents and staff worked on the traditional grounds, gathering rocks for sweats and cutting wood for sacred fires. Several days were spent gathering and harvesting various traditional medicines. Several naming ceremonies were completed upon request. Residents and staff worked on various traditional arts and crafts projects. A 2019 calendar with artwork from residents and staff was put together for mass production and included the dates of all of our ceremonies. Traditional counselling and teachings are available upon request.



*Mike Calder, Elder and Director of Indigenous Services*

**BEHAVIOURAL HEALTH FOUNDATION INC.**  
**SUMMARY STATEMENT OF FINANCIAL POSITION**  
**MARCH 31, 2020**

The following is a summary of the financial position of the Foundation as at March 31, 2020. Audited financial statements are available upon request.

	2020	2019
<b>ASSETS</b>		
Current assets:		
Cash	\$ 190,669	\$ 84,052
Accounts receivable	341,244	224,410
Prepaid expenses and other assets	<u>2,685</u>	<u>9,745</u>
	534,598	318,207
Capital assets	1,394,117	1,455,330
Assets held for sale	889,646	869,436
Restricted cash – replacement reserve funds	27,847	27,887
Marketable securities – stabilization reserve fund	<u>-</u>	<u>253,217</u>
	<u><b>\$ 2,846,208</b></u>	<u><b>\$ 2,924,077</b></u>
<b>LIABILITIES</b>		
Current liabilities:		
Accounts payable and accrued liabilities	\$ 291,443	\$ 294,397
Current portion of long term debt	27,000	25,000
Current portion of deferred contributions	<u>-</u>	<u>60,000</u>
	318,443	379,397
Deferred capital contributions	147,578	149,963
Deferred contributions	10,000	10,000
Long term debt	<u>144,365</u>	<u>175,776</u>
	620,386	715,136
<b>NET ASSETS</b>		
Invested in capital assets	1,964,820	1,974,027
Internally restricted	1,471,006	1,469,681
Externally restricted	27,847	27,887
Unrestricted	<u>(1,237,851)</u>	<u>(1,262,654)</u>
	<u><b>2,225,822</b></u>	<u><b>2,208,941</b></u>
	<u><b>\$ 2,846,208</b></u>	<u><b>\$ 2,924,077</b></u>

(unaudited summary statement – audited financial statements are available upon request)

**BEHAVIOURAL HEALTH FOUNDATION INC.**  
**SUMMARY STATEMENT OF OPERATIONS**  
**FOR THE YEAR ENDED MARCH 31, 2020**

The following is a summary of the Foundation's operations for the year ended March 31, 2020. Audited financial statements are available upon request.

	<b>2020</b>	<b>2019</b>
<b>Revenues</b>		
Fees for services	\$ 807,371	\$ 845,549
Grants	3,626,800	3,179,560
Donations	17,470	9,035
Investment income	1,325	2,828
Other	<u>403,688</u>	<u>399,357</u>
<b>Total revenues</b>	<u>4,856,654</u>	<u>4,436,329</u>
<b>Expenses</b>		
Salaries and benefits	2,506,274	2,334,574
Shelter	647,348	635,222
Care	1,458,023	1,333,518
Administration	<u>228,128</u>	<u>193,489</u>
<b>Total expenses</b>	<u>4,839,773</u>	<u>4,496,803</u>
<b>Net income (loss) for the year</b>	<u>\$ 16,881</u>	<u>\$ (60,474)</u>

(unaudited summary statement – audited financial statements are available upon request)





**BEHAVIOURAL  
HEALTH  
FOUNDATION**

# Operating Authorities & Accreditation

- The Behavioural Health Foundation Inc. (BHF) is located on Treaty One land, at 35 avenue de la Digue in St. Norbert, Manitoba.
- BHF is a federally registered charitable organization (Revenue Canada Charitable Organization Registration Number 12933 3027 RR0001).
- BHF is registered provincially under Section X of the Companies Act of the Province of Manitoba.
- BHF Day Care is licensed by Manitoba Family Services under the Community Child Care Standards Act.
- BHF's Addiction Treatment Services and Breezy Point program are CARF accredited under the category of Behavioural Health, Integrated Alcohol and other Drugs/Mental Health. Included in this program accreditation are the following Core Program Designations: Community Housing, Residential Treatment, and Therapeutic Communities. BHF's programs have been accredited since 1993.
- In March, 2018 BHF was again awarded three-year CARF Accreditation, the highest achievable accreditation period.

## What is CARF?



CARF is a private, not-for-profit organization that promotes quality rehabilitation services. It does this by establishing standards of quality for organizations to use as guidelines in developing and offering their programs or services to consumers. CARF uses the standards to determine how well an organization is serving its consumers and how it can improve. The CARF standards are developed with input from consumers, rehabilitation professionals, state and national organizations, and funders. Every year the standards are reviewed and new ones are developed to keep pace with changing conditions and current consumer needs.

## What Does It Mean to be Accredited?

After an organization applies for accreditation of its services or programs, CARF sends professionals in the field to conduct an on-site survey to determine the degree to which the organization meets the standards. CARF surveyors also consult with staff members and offer suggestions for improving the quality of services. CARF-accredited programs and services have demonstrated that they substantially meet internationally recognized standards. CARF accreditation means that you can be confident that an organization has made a commitment to continually enhance the quality of its services and programs, and its focus is on consumer satisfaction.

## The Benefits of Accreditation to You, the Consumer of Services

Choosing CARF-accredited programs and services gives you the assurance that:

- The programs or services actively involve consumers in selecting, planning and using services.
- The organization's programs and services have met consumer-focused, state-of-the-art international standards of performance.
- These standards were developed with the involvement and input of consumers.
- The organization is focused on assisting each consumer in achieving his or her chosen goals and outcomes.



**“Everything has  
changed in my life.  
I have my kids back.”**

**“I have a good job  
and I make money  
now.”**

**“The program brought me back  
down to earth, it grounded me.  
The tools I have gained are the  
reasons for the  
success I’m having in my life.”**

**“I got my children back,  
I have a job and a  
future. The program  
changed everything  
for me. ”**

**“Going on many months of a  
clean-living life now. My  
relationships have been  
repaired with family and  
friends. I work out two hours  
a day.”**

**“I built friendships and I  
have a network of  
support.”**

**“I didn’t know  
how it felt to be  
free from drugs  
and alcohol.”**

**“I would like to be a  
keyworker there  
one day.”**

**Behavioural Health Foundation Inc.  
Addictions and Co-occurring Mental Health Treatment**