

# BEHAVIOURAL HEALTH FOUNDATION



## ANNUAL REPORT

APRIL 1, 2024—MARCH 31, 2025





*BHF acknowledges the traumatic, generational impact the Indian Residential Schools system has had on many Indigenous persons served by BHF and Indigenous staff persons of BHF. Our work takes place on Treaty One land and the homeland of the Red River Métis nation. It is our responsibility to reflect on the history of Manitoba, and to work and concentrate today with a vision of tomorrow.*





## Our Purpose



***The Behavioural Health Foundation is a therapeutic community with the purpose of providing long-term programming to adults experiencing addiction and co-occurring mental health concerns from a wholistic perspective that integrates socio-economic wellness.***

***Dependents of those attending BHF are also accommodated both in residence and in programs.***

***This long-term approach is designed to offer graduated opportunities for equipping a person with the vocational, interpersonal and communication skills necessary to successfully return to the community.***



*Board of Directors  
2024-2025*

**Brian Chrupalo, President**

**Tammy Hansen, Vice President**

**Hilda de Souza**

**Michelle Ducharme**

**Lexus Genik**

**Sachit Mehra**

**Cheryl Osborne**

**Dr. Lesia Shepel**

**Dr. Kent Somers**

**Kaitlynd Walker**



**Behavioural Health Foundation Inc.**

**[www.bhf.ca](http://www.bhf.ca)**

Addictions and Co-occurring Mental Health Treatment

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St. Norbert, MB R3V 1L6  
Telephone (204) 269-3430

[info@bhf.ca](mailto:info@bhf.ca)

**Addiction Treatment Services**

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Intake Inquiries: [ATSintake@bhf.ca](mailto:ATSintake@bhf.ca)  
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**Breezy Point (Women's Program)**

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St. Norbert, MB R3V 1L6  
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Telephone: (204) 261-6111

Program accreditation provided by  
[www.carf.org](http://www.carf.org)



*The Behavioural Health Foundation is located on  
Treaty One territory and the homeland of the Red River Métis Nation.*

**Thank You For Your Support**

*Our programs could not exist without the support of government departments, private businesses, agencies and members of the public. We are grateful for the ongoing support and pledge to continue our work to assist people in becoming healthier 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.





## President's Remarks

*BHF views itself as a community within a community; our Annual Report is one way to connect our unique Therapeutic Community of BHF residents and staff to the wider community of neighbours, funders, referral sources, government, and the general public. I hope this Report will give readers a sense of the comprehensive nature of our programs, and an appreciation of the continuing imperative for a place where dedicated and determined people can come together and support one another, working together to achieve both individual and common goals.*



*A significant event in the past fiscal year, was the arrival in July 2024 of our new Executive Director, Paula Hendrickson. Paula took on this leadership position as a generation of long-serving staff were retiring and the organization was adjusting to the social and financial challenges of the post-pandemic world. Under her leadership, and with the support of the senior management committee, BHF's programs underwent an accreditation review in November, earning a renewed three-year international accreditation by the Commission on Accreditation of Rehabilitation Facilities. In their report, CARF surveyors noted, "BHF provides residents with a strong foundation for life-long recovery from substance use disorder...with emphasis on patience, kindness, tolerance and inclusion."*

*In the spirit of aspiring to excellence, Paula has also spearheaded a broad process of reflection and review, gathering feedback and ideas from members of the Board, staff, residents, and other stakeholders. This comprehensive process will continue with the development and implementation of a new Strategic Plan, building on the organization's strengths and responding to the emergent needs and preferences of those who seek our services.*

*It is worth noting here that throughout 2024 – 2025, BHF's in-residence programs – both Addictions Services and the Breezy Point program – operated at nearly 100% capacity. In addition, attendance has been high at our pre/post-treatment support groups. This is a credit to the efforts of our intake and outreach staff, but it is also evidence that long-term, open-ended, family-inclusive wholistic services are very much needed and wanted in Manitoba. On behalf of the Board of Directors, thank you to everyone who helps sustain this much needed programming.*

*I would like to take this opportunity to personally acknowledge all the adults who chose to come into treatment at BHF this year, and to wish them the courage and vision they need to continue on that journey. Special congratulations are due to those who are parenting their children here and to those who achieved their "one year" in 2024 - 2025. Finally, I hope that this report may encourage individuals and families who are contemplating treatment to consider whether BHF may be place they are looking for – a place dedicated to health, safety, respect, and mutual support.*

**Brian Chrupalo**

*President, BHF Board of Directors*





*54 Years in Manitoba*

## New & Noteworthy



Mike Calder, BHF staff member of 44 years and Board of Directors member since 2023, retired from the Board and will be greatly missed. Thank you, Mike, for your decades of service to BHF and your immeasurable contributions to BHF's Indigenous Services., and the organization overall.

*Left, Elder Mike Calder*

The time has come to acknowledge Peter Kingsley, K.C. BHF Board member since 2014, Board Vice-President from 2015 to 2017, President of the Board from 2017 to 2024. Thank you for your years of dedication to BHF and for helping to shape the organization into what it is today.

*Right, Peter Kingsley, K.C.*



In 2024, Paula Hendrickson took on the role of BHF's Executive Director. She brings both experience and a fresh perspective. Thank you, and welcome to the BHF Team, Paula!

The Behavioural Health Foundation Inc. is proud to announce that in 2024, the organization was successful in its pursuit of 3-year CARF Accreditation, which is the maximum period of accreditation awarded.

CARF's "consultative peer-review accreditation process ensures that service providers meet international standards of quality, accountability, and continuous improvement."

"Accreditation is a comprehensive review to determine if a provider's services meet international standards of quality. Achieving accreditation means the provider is committed to delivering safe and effective services and ongoing performance improvement." ([www.carf.org/accreditation](http://www.carf.org/accreditation)).

**CARF  
Accreditation**





# Our Mission

*To provide a person-centered culturally aware substance use and co-occurring mental health treatment program based on a behavioural health approach that focuses on holistic healing for adults and families seeking to live healthy and rewarding lives.*

## BHF Core Values

- 1. The Behavioural Health Foundation welcomes and promotes diversity in societal and cultural values.*
- 2. Members have the right to be treated with dignity and respect. They have the right to access services respectful of their race, ethnic origin, age, religion, gender, family status, political belief, and sexual orientation.*
- 3. BHF recognizes that the best interests of the person are sometimes best served by referring them to another agency or professional .*





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## **Finances & Acknowledgements**

**BHF is thankful for the financial support from many private donors  
as well as the following during the fiscal year 2024 - 2025:**

**All Charities Campaign, Province of Manitoba**

**Canada Summer Jobs**

**Early Learning and Child Care**

**Manitoba Education and Early Learning**

**Manitoba Families**

**Manitoba Mental Health and Community Wellness**

**Manitoba Department of Housing, Addictions and Homelessness**



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## Outcomes & Effectiveness

*BHF uses a variety of performance indicators to measure program efficiency, access, and outcomes. BHF strives to increase lengths of stay to help members achieve their long-term treatment goals, employment and education goals, reunite families, and reduce homelessness.*

## Addiction Treatment Services

- *The average length of stay of adults who exited in the fiscal year was 81 days.*
- *59% of adults who exited completed primary treatment.*
- *86% of adults were free from substance use and 99% reduced their substance use at exit from the program.*
- *18% of adults were employed or in another productive role upon exit.*
- *99% of adults had no new criminal justice system involvement during their treatment stay.*
- *12% of adults attended education during their treatment stay.*
- *34% of adults exited into stable or transitional housing.*

## Breezy Point

- *The average length of stay of women who exited in the fiscal year was 98 days.*
- *74% of women who exited completed primary treatment.*
- *96% of women were free from substance use and 100% reduced their substance use at exit from the program.*
- *21% of women were employed or in another productive role upon exit.*
- *100% of women had no new criminal justice system involvement during their treatment stay.*
- *38% of women exited the program into stable or transitional housing.*

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

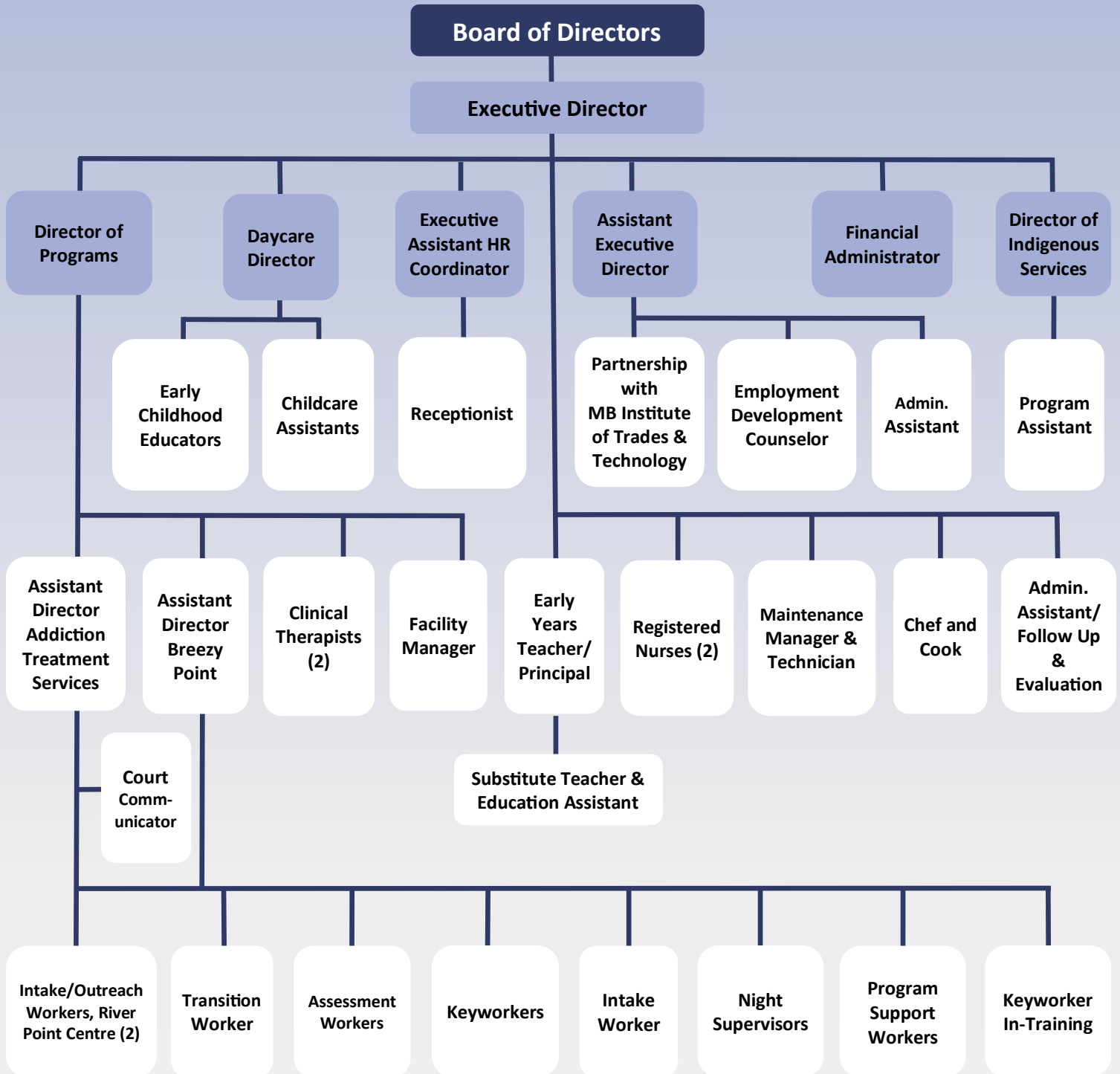
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# Organizational Chart, 2024-2025



Represents Senior Management



# Management, 2024-2025





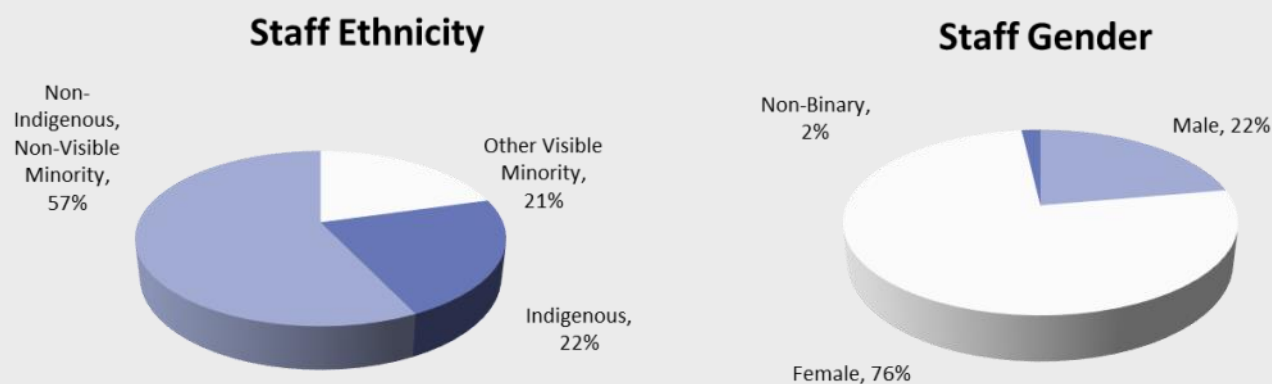
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# Staffing

BHF's array of services provides a variety of employment opportunities. In addition to program directors, other management and front line staff including Keyworkers and Support Workers for members 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, a Teacher/Principal 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, 2024 BHF had 63 staff; 49 were full time and 14 were part time.



## Staff Training

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

- Indigenous Awareness and Cultural Competency
- Blood Spill Clean-up & Medical Emergencies
- Co-occurring Disorders Education Curriculum
- 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
- 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 bed-based treatment for adults 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 members 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 members have varied backgrounds, they initially share problems such as self-defeating 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, multiple experiences in foster care, and generational trauma from residential schools and the sixties scoop and other impacts of colonization.
- Drug related arrests and hospitalizations prior to entry are common.
- Many members have histories of unemployment or under-employment. Many arrive from communities where skill development and employment opportunities are very limited.
- 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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## **Program Applicants & Wait List**

There were 1556 referrals<sup>1</sup> involved in BHF's intake system over the 2024-2025 fiscal year. These were persons entering into the intake system as well as individuals carrying over from the 2023-2024 fiscal year. Of them, 902 (58%) identified as male, 653 (42%) identified as female, and one as non-binary. For both of BHF's programs, 1214 were men and women interested in BHF's Addiction Treatment Services program, 92 were women interested in the Breezy Point women-only program, and 250 were women interested in either program, or whichever had the first available bed. Referrals are from both the wider community as well in incarceration, 788 (51%) were persons who were incarcerated at the time of first contact with the intake team.

Most referrals are single individuals and/or persons hoping to reunite with children. In fact, 490 (31%) of adult referrals had children who were in agency care or in care of others, for example extended family members. There were 1101 children among these referrals. Of the 71 (5%) of referrals who did have children in their care, there were 143 children. There were 27 referrals who reported being pregnant. Forty-six (3%) of referrals were persons wishing to enter as couples into BHF's family program, with or without children in their care.

Of the referrals, 1233 (79%) did not enter BHF's programs. Some were deemed unsuitable for BHF's programs for reasons including histories of violent and/or sexual offences, arson, offences involving children, other serious offences, active gang involvement, being deemed a flight risk, or a history of poor program performance. Others were assessed as unable to navigate the program due to serious and persistent health/mental health and/or mobility concerns.

Other referrals who were accepted to enter BHF's programs did not enter for various reasons, including:

- were no longer interested and/or did not communicate with BHF's intake team for a period of 3 months, for reasons unknown.
- decided to seek other treatment or had changed their mind about attending treatment when bed space became available.
- did not show up to their scheduled bed-date.
- had their bail denied or were sentenced to a period of incarceration while on the wait list.

For adult referrals entering the program from the wait list, the average wait time was 37 days. The median wait time was 17 days.

***"Behavioural Health Foundation, Inc. (BHF) is a passionate, soulful, and culturally sensitive organization that provides long-term residential programming in the Manitoba area for persons and family units experiencing a variety of addictions or co-occurring mental health concerns."***

**-CARF Accreditation Report, January 2025**

<sup>1</sup>"Referrals" are either self-referred or referred by others.





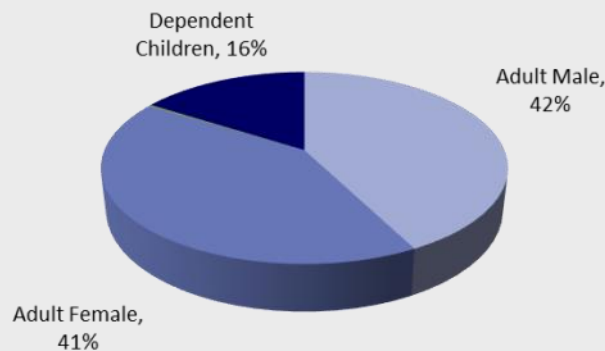
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## Total Intakes BHF Programs 2024-2025

## Intake and Days Care

Adult Males <sup>2</sup>	159
Adult Females <sup>2</sup>	155
Non-Binary <sup>2</sup>	1
Dependent Children	60
<b>Total Intakes</b>	<b>375</b>

### Total Intake in all Programs



## Days of Care

Adults	30,489
Dependent Children	6456
<b>Total Days of Care Provided</b>	<b>36,945</b>

## River Point Intake/Outreach Services

The Behavioural Health Foundation has two Intake/Outreach Workers working primarily at the River Point Centre on Magnus Avenue in Point Douglas. BHF's RPC offices provide information, support and solution-focused counselling to persons contemplating entering treatment and to those who have exited BHF's residential programs. BHF's workers collaborate with AFM staff, Main Street Project and women's detox.

BHF Outreach staff participated in five community resource events throughout the year. The first BHF Outreach Reunion was held in December of 2024. In addition, BHF Outreach staff fostered relationships with various organizations over the year including Makoon, RAAM, MOST and others.

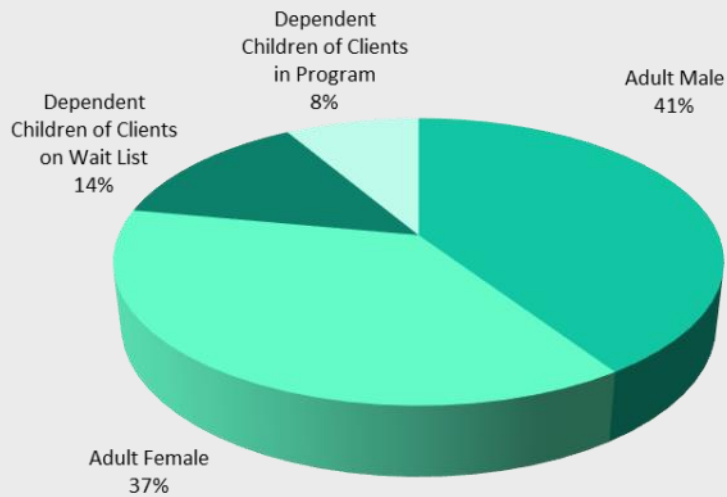
Over the fiscal year, BHF Intake/Outreach staff received 675 calls, had 525 outreach client visits at RPC, presented at 96 speaking engagements, held 48 Outreach/Grad groups, and conducted 13 Outreach events and tours.

<sup>1</sup>Members are categorized with the gender to which they identify. If members do not identify with traditional gender definitions, BHF reports information in a manner that best protects personal information.

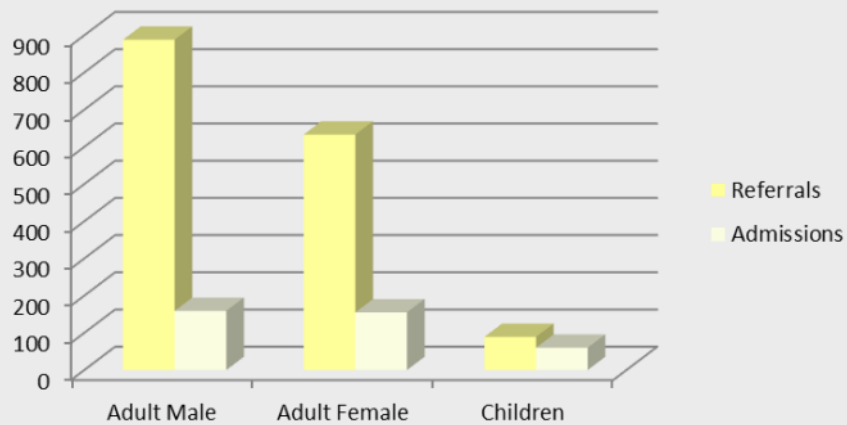


At the end of the 2024-2025 fiscal year, there were 59 persons on the BHF wait list.

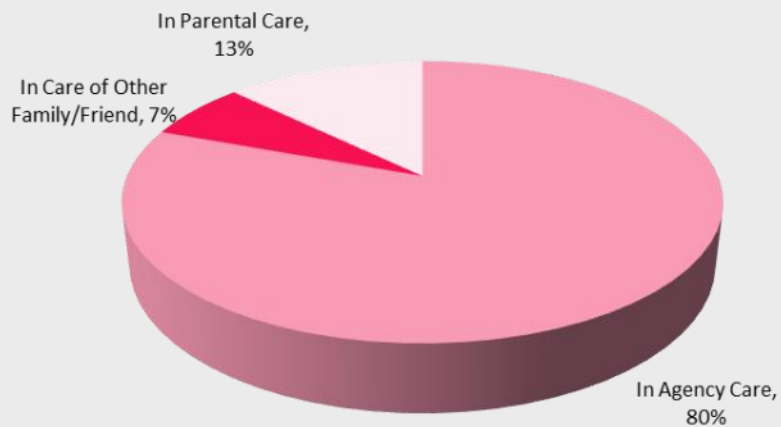
### Clients on Wait List at Year-end



### Referrals vs. Admissions



### Children of Adults on Wait List





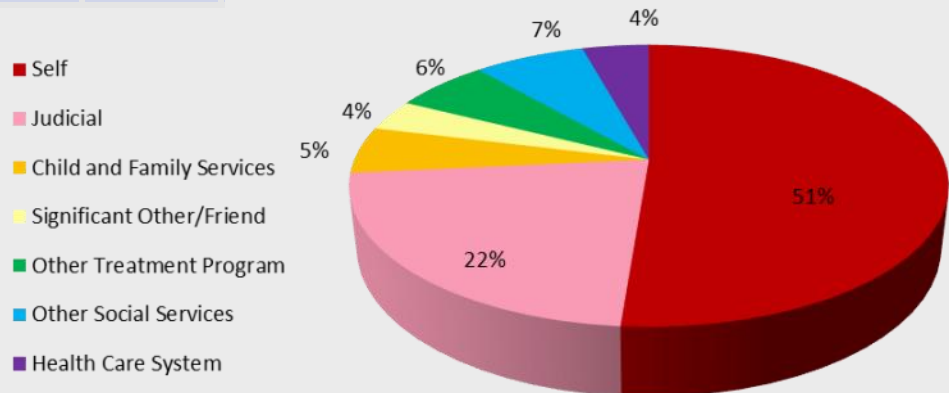
# Addiction Treatment Services (ATS) Program for Adults & Families

The Behavioural Health Foundation Addiction Treatment Services is internationally accredited. The bed-based 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.

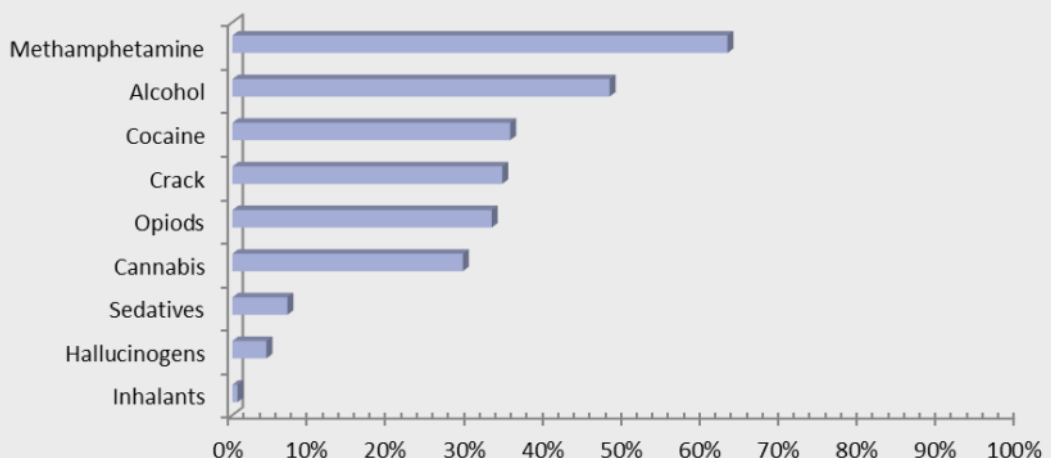
Total Intakes, ATS	
Adult Males	159
Adult Females	119
Adult Non-Binary	1
Total Adults Admitted to Program	279
Children of Members	51
Total Intakes	330

Average Age of Adults	35
Age Range of Adults	18-59
Average Length of Stay <sup>3</sup>	74 days
Completed Primary Treatment (30 days)	165 (59%)
Stayed over 90 days	94 (34%)

## Referral Sources of ATS Intakes



## Most Frequently Used Substances



<sup>3</sup>Twenty-six adults who entered during the 2024-2025 fiscal year remain in the program at the time of this report. This figure will increase until all clients exit the program.



## Children of Members (Addiction Treatment Services)

During the 2024-2025 fiscal year, 51 children came to live at BHF Addiction Treatment Services program while their parents participated in treatment. At entry, 25 (49%) children were in agency care. The average length of stay of children was 92 days. The average will increase until all children who entered over the fiscal year exit the program. Fourteen (27%) children had regular visitation with their parents at BHF prior to moving in. Of the 25 children who entered BHF in the care of Child & Family Services, 24 (96%), to date had successful reunifications where the parent regained custody of their child(ren) while in the program.

## 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, 2023 to March 31, 2024. The fiscal 2024-2025 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 2026.

Participants 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. Participants 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 2023-2024 study.

### Substance Use Reduction

Of the 44 members located and interviewed 6 months after completion of primary treatment, 38 (86%) reduced their use of substances. The average reduction of substance use was 12.5 points on the World Health Organization's ASSIST Scale.

### Criminal Justice System Involvement

Fifty-six percent of all members who entered in the 2023-2024 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, 86% of located clients reported having no new involvement with the law.

### Employment

Upon entry, 93% of clients were unemployed. Only 7% 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, 52% of the clients located had become involved in these successful pursuits.

### Education

In this reporting period, 12 members took advantage of the on-site Adult Education Centre. Five members were attending education at exit, and three of the 44 (7%) members 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. Some were pursuing their education in conjunction with full or part time jobs and/or while homemaking.

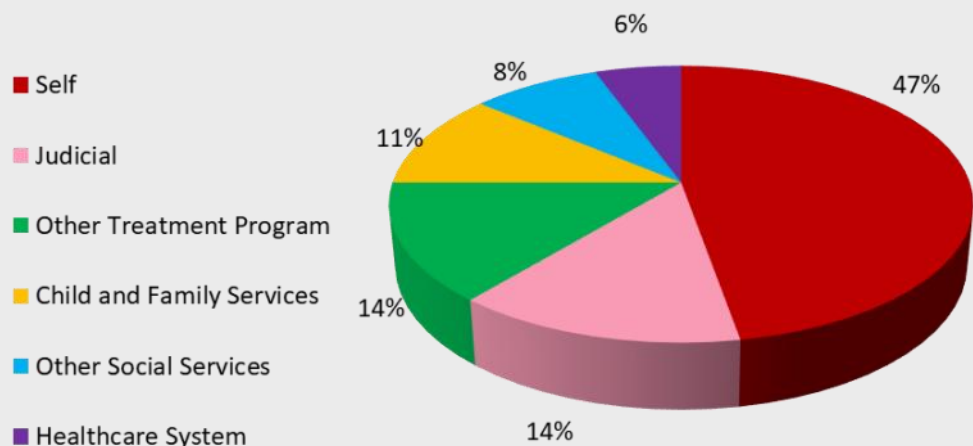


Breezy Point provides service for adults identifying as women. Members may have children up to the age of 4 living with them at Breezy Point. Members are accommodated in the environment of a female-identifying space while dealing with their substance use and lived experiences. The need for gender-specific spaces is an identified need in the sheltering and treatment community. BHF offers an important treatment environment by providing a program that is not time limited, where parents can feel safe and focus on treatment and past trauma as well as on their children, whether they enter as a family or reunify while in the program. Breezy Point is a 14-bed facility.

Total Intakes, Breezy Point		Average Age of Women	
Adult Females	36	Age Range	19-50
Children of Members	9	Average Length of Stay in Treatment <sup>4</sup>	96 days
Total Intakes	45	Completed Primary Treatment	26 (72%)
		Women who stayed over 90 days	16 (44%)

There were 36 intakes at Breezy Point during the 2024-2025 fiscal year. Referral sources included self, judicial, healthcare system/mental health services, other treatment programs including transfers from BHF's Addiction Treatment Services program, Child and Family Services and other social services. Twenty (56%) of these women were from the City of Winnipeg, 16 (44%) were from elsewhere in Manitoba. Thirty-two women (89%) were Indigenous.

## Referral Sources Of Breezy Point Intakes

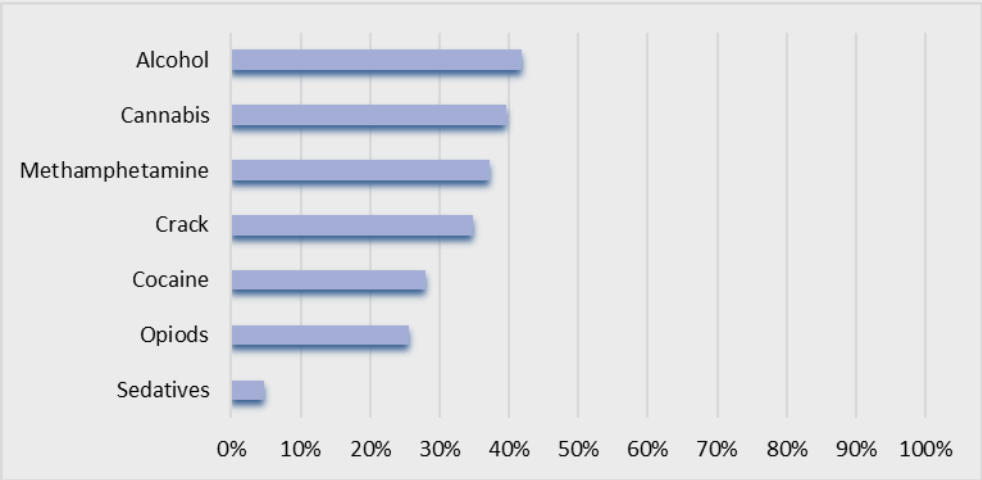


<sup>4</sup>Three members who entered during the 2024-2025 fiscal year remain in the program at the time of this report. This number will increase until they exit the program.



Twenty-seven (75%) of the 36 women were mothers whose children were either in CFS care or the care of extended family. The total number of children among this group was 59, an average of 2.2 children per mother. Four (11%) women entered Breezy Point with a child in their care at entry and one woman was pregnant. All of the women who entered Breezy Point were unemployed at entry. At the time of this report, 3 of the women who entered in the last fiscal year remain in the program. Nine children entered the program in the fiscal year to reside with their mothers.

**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, 2023 to March 31, 2024. The fiscal 2024-2025 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 2026.

Members 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. Members 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 2023-2024 study.

**Substance Use Reduction**

Of the 12 women located and interviewed 6 months after completion of primary treatment, 9 (75%) significantly reduced their use of substances. The average reduction of substance use was 15.9 points on the World Health Organization’s ASSIST Scale.

**Criminal Justice System Involvement**

Twelve (30%) of all members who entered in the 2023-2024 fiscal year had involvement with the Criminal Justice System. They were on bail or probation. At the time of follow-up, 12 (100%) of located women had no new involvement with the law.

**Employment & Education**

Upon entry to the program, only 2 (5%) of the women had employment or were homemaking full time. Of the 12 women who were located 6 months after completion of primary treatment, 8 (67%) were involved in successful pursuits of working, homemaking, or attending education full time.

*“BHF is committed to assisting residents and their children with many complex issues related to mental health and substance use issues. The therapeutic community is designed to offer gradual opportunities for equipping a resident with the vocational, intellectual, and communication skills necessary for successful integration into society, free of addiction. Program components consist of addiction counseling, including group, family, and individual counselling; traditional Indigenous activities; criminal justice/family support services; mentoring; work activities/employment readiness; outreach; community services; alumni services; and licensed child day care. BHF provides residents a strong foundation for lifelong recovery from substance use disorder and has helped many persons in recovery continue to maintain healthy lifestyles. Sound recovery principles are embraced, along with emphasis on patience, kindness, tolerance, and inclusion. Furthermore, BHF is an effective, mission-driven organization that is improving the lives of the residents and offering hope and opportunities for healing, growth, and recovery.”*

-CARF Accreditation Report, January 2025



Staff Holiday Gathering,  
December 2024



## Indigenous Services



BHF's Traditional Grounds and Indigenous Services are integral to BHF's programs. An array of ceremonies and activities take place both on and off-site, contributing to individual members' treatment experiences and to the wider community as a whole.

Although members of BHF have very diverse backgrounds, in this fiscal year 77% of adults entering BHF self-declared Indigenous ancestry. Regardless of background, all BHF members are welcomed, and benefit from BHF's Indigenous Services.

Sweats were held approximately twice a week and were attended by current, past and community members, including children. There were full moon ceremonies. Women and children (current, past and community members) attended. In addition, the Northwinds Lodge Sundance took place in August and was well attended by BHF residents and community members.

Members of ATS and Breezy Point, including children, attended the Northwinds Lodge to smudge and to participate in drumming. Members attended to bead, and to participate in cleaning sage. Members participated in harvesting and cleaning sweetgrass. Members of ATS and BP also participated in harvesting and cleaning cedar and making tobacco ties.

*"The (Indigenous Services) program strives to balance and bring harmony to the residents' physical, emotional, and spiritual health through medicine wheel teachings. The program is inclusive of all religions, backgrounds, and beliefs, given that there are similarities in Indigenous teachings and ceremonies. The program is enriched by sweat lodges for both children and adults as well as other ceremonies to help build families' understanding of the seven Indigenous teachings of wisdom, truth, humility, love, bravery, respect, and honesty."*

**-CARF Accreditation Report, January 2025**



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## Clinical Services

### Therapy, Assessments & Consultations

Two Clinical Therapists provide direct mental health services to members of BHF's programs. Services can range from crisis management, individual therapy, group therapy, family therapy, meditation groups, auricular acupuncture, Grief and Loss groups, and assessment services. BHF's Clinical Therapists and Psychiatric Nurses also provide consultation and training to treatment staff regarding co-occurring mental health disorders, medication management, treatment planning, and collaborate with agencies to support residents with complex mental health needs and make referrals when necessary. Additionally, with support from St. John's Ambulance, a specially trained therapy dog makes regular visits to BHF to provide therapeutic animal contact.

These are crucial services, as the majority of adults entering BHF have been diagnosed or report mental health issues. In the 2024-2025 fiscal year, 253 of 315 (80%) of adult Intakes had indicated mental health concerns on their Applications for Admission to BHF. Two hundred and twenty-six (72%) reported histories of trauma. Members are screened for past and present mental health concerns, including past diagnoses, mental-health-related hospitalization, and/or self-harm or self-harm ideation. This information helps to inform individual treatment plans as well as safety plans when needed. Mental health services are also provided to children of members when necessary.

### Medical

Two Psychiatric Nurses work closely with ACCESS Fort Garry. In Manitoba, ACCESS Centres are "one-stop locations" for individuals and families living in the community area to help provide more coordinated, accessible health and social services especially for those with many needs. ACCESS Centres are unique to each community they serve ensuring that the needs of the community are met. ACCESS Fort Garry brings together key partners in one location to better serve the needs of the community, including the Winnipeg Regional Health Authority (WRHA) and Government of Manitoba (Department of Families and Department of Health, Seniors and Active Living). BHF's relationship with ACCESS includes onsite weekly clinics and a referral system, both needed as people seeking treatment at BHF often do not have a primary healthcare provider.

The medical team's goals are improved health for program participants and building strong and productive relationships with the broader health care system for the benefit of individuals and families at BHF. Nurses monitor medication and assist residents and treatment staff in setting appropriate goals around mental and physical health. BHF nurses also work closely with Public Health on communicable disease prevention and management, healthy parenting and early childhood development, healthy sexuality, tobacco use reduction, immunizations and other public health issues.



The Behavioural Health Foundation's Support Services are 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 is BHF's on-site school for adult learners. In partnership with the Manitoba Institute of Trades and Technologies (MITT), SNAEC provides the opportunity for people 18 years of age and older to work toward a Mature Student High School Diploma or upgrade credits in preparation for post-secondary education, just steps away from BHF's main buildings. Students at SNAEC are not only members of BHF's programs, but adults from the greater community as well. Students come from diverse places and backgrounds, and benefit from a welcoming and supportive environment tailored for adult learners. Students may register full time or part time, and classes are scheduled mornings, afternoons and evenings to accommodate learners who are also working and/or parenting. In the 2024-2025 school year, 20 BHF members attended SNAEC and earned 27 credits. Two members attended MITT campus and completed a skilled trades certificate program.



### BHF K—6 School

Manitoba Education and Early Learning funds BHF's Kindergarten to Grade 6 Independent School. A certified Teacher/Principal and two Education Assistants staff the school that is exclusively for students whose parents are in BHF's Addiction Treatment Services program. There is close collaboration with the treatment team, BHF's Indigenous Services, and Daycare programs. Parents and students benefit from the wholistic approach to addressing students' strengths and needs, as well as exit-planning to ensure the continued success of students.

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## BHF Daycare

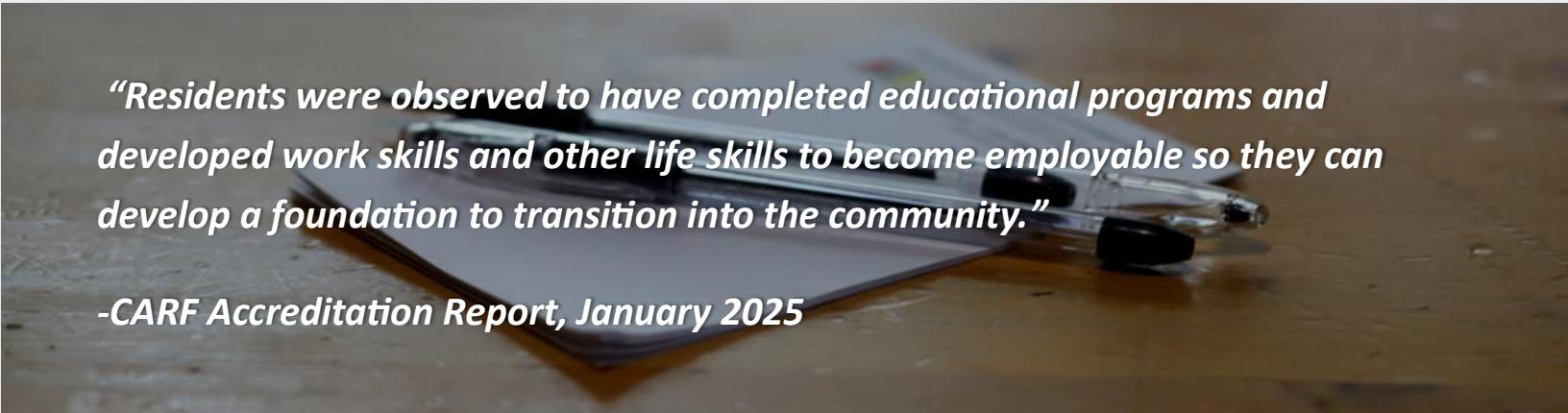
Licensed for 4 infants, 8 preschoolers and 12 school-age children, BHF's daycare is staffed by Early Childhood Educators who work closely with parents, classroom, and adult treatment staff. Children and parents at BHF benefit from the developmentally appropriate spaces, structured routine and early childhood learning. The daycare, having access to BHF's Indigenous Services, collaborates to provide cultural and educational opportunities for children and families. Healthy snacks and educational field trips are part of daycare programming. When the number of children at BHF exceeds the number of daycare spaces, space-sharing schedules are implemented. The daycare's individual funding is provided through Manitoba Education and Early living.

## Employment Development

Obtaining employment is one of the most common goals established by adults in their Individual Treatment Plans (ITPs) at BHF. The journey to becoming employable can be harder for adults who do not have employment histories, who did not graduate High School, and/or do not possess trade skills. Persons experiencing homelessness, not having identification or a bank account, and access to transportation or computers often have to overcome those primary challenges before a job can even become possible. The majority of adults entering BHF's programs are unemployed at the time they chose to seek treatment.

BHF's Employment Development Program is designed to help members enter or re-enter the workforce if that goal is in that person's life-plan. While residing in the therapeutic community, participants are given the opportunity to enroll. Of the residents who exited BHF over the fiscal year 2024-2025, 62 attended the Employment Development program. Twenty-two (35%) of residents who participated were employed at the time of their exit from BHF. Some of the areas of support and learning provided through Employment Services are:

- Identifying transferable skills
- Learning job search strategies
- Resume preparation
- Birth certification acquisition
- Income tax filing
- Opening bank accounts
- Learning workplace rights
- Access to the internet
- Learning transportation
- Obtaining federal benefits
- Learning employer responsibilities
- Employment counselling



***“Residents were observed to have completed educational programs and developed work skills and other life skills to become employable so they can develop a foundation to transition into the community.”***

***-CARF Accreditation Report, January 2025***



## Food Services

Critical to the therapeutic community and the everyday routine, the BHF kitchen is staffed by a Chef, a Cook, an in-residence member in charge (I/C) and a crew of another ten members. Meals at BHF are of high quality and nutritious. Wide varieties of main courses, sides and beverages are provided for breakfast, lunch and supper. Supplementary to meals; an array of fruits, cereals, breads, soups, salads and desserts are provided to offer diverse options for members' food preferences, dietary restrictions or practices. Menus are planned in accordance with Canada's Food Guide and posted weekly.

Meals are always well-prepared and on time, using safe food-handling practices and high standards of freshness. In addition to regular meals, snacks and beverages are provided at break times in the main building and in BHF's daycares. BHF's Food Services are also tasked with the catering of special events at BHF, feeding members, children, staff and visitors.

The kitchen crew are trained and involved in the operation and care of commercial kitchen equipment, food preparation and food service. Crew members have the opportunity to earn their provincially recognized Food Handler Certificate, preparing them to seek work in any food service establishment. Many members report learning valuable life skills working in the BHF kitchen.

## Maintenance

BHF's Maintenance Department is tasked with ensuring the numerous buildings, acres of grounds, machinery and vehicle fleet are kept safe, clean, attractive and in good repair. The Maintenance Manager and Technician carry out this work with the assistance of members in-residence and in collaboration with outside trade contractors when necessary. The Service Crew consists of approximately 25 rotating members who keep the buildings clean and take care of garbage and recycling. The Outdoor Crew, another 10 members, perform landscaping duties such as grass cutting and snow clearing. A notable accomplishment during the 2024-2025 fiscal year were painting and redecorating of the mail hallway of the main building, including a mural.

***"It is clear that the residents and their needs are the organization's top priority. It is a value-driven organization, and its beliefs contribute to and shape its positive and welcoming workplace culture."***

***"The overall concept and execution of the therapeutic community model is remarkable. Residents can easily be mistaken for staff, given their contributions to the program."***

***"BHF is transparent and open to feedback and to learning from residents, personnel, and other stakeholders. It is clear that the organization's leadership and staff members have worked hard to make improvements."***

**-CARF Accreditation Report, January 2025**

**BEHAVIOURAL HEALTH FOUNDATION INC.**  
**SUMMARY STATEMENT OF FINANCIAL POSITION**  
**MARCH 31, 2025**

The following is a summary of the financial position of the Foundation as at March 31, 2025. Audited financial statements are available upon request.

	2025	2024
<b>ASSETS</b>		
Current assets:		
Cash	\$ -	\$ 80,847
Accounts receivable	1,403,377	418,338
Prepaid expenses and other assets	<u>121,728</u>	<u>120,108</u>
	1,525,105	599,293
Capital assets	1,125,792	1,189,581
Restricted cash – replacement reserve funds	47,847	47,847
Marketable securities – general operations	405,636	1,143,937
Marketable securities – stabilization reserve fund	<u>1,999,569</u>	<u>1,687,560</u>
	<u>\$ 5,103,949</u>	<u>\$ 4,668,218</u>
<b>LIABILITIES</b>		
Current liabilities:		
Bank indebtedness	\$ 20,010	\$ -
Accounts payable and accrued liabilities	481,925	348,791
Current portion of long-term debt	<u>1,191</u>	<u>40,800</u>
	503,126	389,591
Long-term debt	-	1,152
Deferred contributions	10,000	10,000
Deferred capital contributions	<u>16,168</u>	<u>18,148</u>
	529,294	418,891
<b>NET ASSETS</b>		
Invested in capital assets	1,108,433	1,129,481
Internally restricted – stabilization reserve	1,999,569	1,687,560
Internally restricted – repairs and maintenance reserve	20,000	20,000
Externally restricted	47,847	47,847
Unrestricted	<u>1,398,806</u>	<u>1,364,439</u>
	<u>4,575,655</u>	<u>4,249,327</u>
	<u>\$ 5,103,949</u>	<u>\$ 4,668,218</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, 2025**

The following is a summary of the Foundation's operations for the year ended March 31, 2025. Audited financial statements are available upon request.

	2025	2024
Revenue		
Continuing service fees	\$ 4,197,001	\$ 3,886,500
Fees for services	798,548	653,136
Net investment income	343,960	173,768
Other	481,537	484,350
Fire insurance proceeds	29,962	24,117
Donations	14,902	11,206
Recognition of deferred capital contributions	1,980	2,288
Total revenue	<u>5,867,890</u>	<u>5,235,365</u>
Expenses		
Salaries and benefits	2,933,933	2,734,255
Care	1,579,492	1,435,761
Shelter	614,539	668,838
Administration	414,598	311,234
Total expenses	<u>5,542,562</u>	<u>5,150,088</u>
Excess of revenue over expenses for the year	<u>\$ 325,328</u>	<u>\$ 85,277</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 and the homeland of the Métis Nation, 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 Education and Early Learning 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 2024 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.





**BHF is an inclusive  
and welcoming  
environment.**



**"My kids are back with me and having our family back together, being a good mom is everything to me."**

**"First time in my life I am making change. I want to be a productive member of society, staying out of jail."**

**"I learned to live with my comrades as a community who help each other out. I came out of my shell. I can talk to people now and interact in a healthy way without drugs or alcohol. I'm busy doing productive things with my time everyday and have a routine. I can build healthy friendships. I can be reliable. I can be me."**

**"I've become a leader, a role model, independent and getting back into school, pretty much everything has changed."**

**"You're a totally different person when you're off drugs."**

**"This is the longest I've been sober in 3 years, the most happiest I've felt in forever."**

**"It's given me confidence, discipline, and self-control back. It's made me patient and grateful."**

**"Learning to open up about my feelings and taken about them out loud. I've become close to others for support which I've never done before."**

**"I like that it helps you to get back on your feet, it helps with education and offers as long-term treatment as you desire. It helps you get set-up to go back into the community."**

**Behavioural Health Foundation Inc.  
Addictions and Co-occurring Mental Health Treatment  
[www.bhf.ca](http://www.bhf.ca)**