

Canadian Mental Health Association - Cariboo Chilcotin Branch

Annual General Meeting

2018-2019



FISCAL YEAR APRIL 1, 2018 - MARCH 31, 2019

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ANNUAL GENERAL MEETING MINUTES

CANADIAN MENTAL HEALTH ASSOCIATION – CARIBOO CHILCOTIN BRANCH

ANNUAL GENERAL MEETING MINUTES

ROOM 116 COOP BUILDING 51 SOUTH 4TH AVENUE
6:00PM, SEPTEMBER 17TH, 2018

Present were: Gay Sanders, President, Bob McNie, Vice President, John Stace-Smith, Treasurer and Directors Gary Leigh, Bev Lillico, Linda Goodrich, Peter James, Aaron Mannella

Staff: Janice Breck, Executive Director and Sarah Landry, Executive Assistant

- A. CALL TO ORDER:** 6:01pm by President Gay Sanders
- B. ESTABLISH THE NUMBER OF VOTING MEMBERS AND QUORUM:** Nine present voting members and needing a quorum of three, met.
- C. APPROVAL OF AGENDA:** *Motion that the agenda as presented in the AGM package presented at the meeting be approved made by Bev Lillico and 2nd by Peter James, carried.*
- D. ADOPTION AND APPROVAL OF MINUTES FROM LAST AGM held September 18TH, 2017:** *Motion that the minutes of last year's AGM as part of the AGM package available at the meeting be adopted and approved by Bob McNie and 2nd by Al Giddons, carried.*
- E. BUSINESS ARISING:** No business arising from minutes
- F. FINANCIAL REPORT:** Although no guests from PMT (Susan Woodward) were available to attend, the financial statements for the fiscal year ending March 31st, 2018 were circulated and highlights discussed. AM noted the huge increase in revenue from fundraising, so kudos to those who made this happen. Also, the year-end excess revenue of \$51,090 better than expected. *Motion to accept and approve the financial statements for 2017-18 as presented made by Aaron Mannella, 2nd by Peter James and carried.*
- G. ANNUAL REPORT:** Included in the AGM package containing reports from the President, the Executive Director, Program directors and coordinators of Employment, Jubilee Place, Family Solutions, Multiculturalism, Outreach Advocacy & Support, Crisis & Counselling, Community Based Victim Services, Residential and Rehabilitation Services and Administration & Fundraising. Thank you to Sarah Landry and Kayla for the professionally bound AGM package and from the BOD a resounding thanks to all the submitting managers and coordinators. There was a gentle reminder that the reports should all be completed for the fiscal year (not to date) and required after the 4th quarter reports complete. Again, thanks to all for the informative and concise reports. *A motion for the Board Members to accept the annual reports as presented in the AGM package was made by Gay Sanders, 2nd by Bob McNie and carried.*
- H. REVIEW VISION STATEMENT, MISSION STATEMENT AND PHILOSOPHY:** Gay Sanders led us through the presented mission and philosophy statements to ensure familiarity with them and ask if any changes were necessary. No changes necessary, just an awareness that the mission statement includes the substance use and addictive behavior as being within the scope of the organization.
- I. MEMBERSHIPS:** As of the meeting, September 17th, there were 26 paid up members

J. APPOINTMENT OF AUDITORS: *Motion that PMT Chartered Accountants be accepted as auditors for the CMHA-CCB fiscal year ending (March 31st, 2019) made by Linda Goodrich, , 2nd by Al Giddons and carried.*

K. ELECTION OF MEMBERS:

The following candidates whose two year terms were up have expressed their willingness to let their names stand for reelection: Gary Leigh, Al Giddons, Ollie Martins and Linda Goodrich. Aaron Mannella, Bev Lillico, Bob McNie, Gay Sanders, Peter James, Trevor Barnes (replacing John Stace-Smith), have also let their names stand to serve on the board.. All members elected by acclamation. The election of officers followed, and the following executive members were elected: Gay Sanders, President, Bob McNie, Vice President and Al Giddons, Treasurer. Sarah Landy will be called upon to fill the role of secretary for board meetings and take and circulate minutes.

L. OTHER BUSINESS: None

M. ADJOURNMENT at 6:26pm: Motion to adjourn made by Bev Lillico, 2nd by Bob McNie, carried.

/js

Approved by Gay Sanders: _____

Annual General Meeting Agenda

September 23, 2019

7:00 p.m. Room 116

- 1) CALL TO ORDER
- 2) ESTABLISH NUMBER OF VOTING MEMBERS AND QUORUM
- 3) APPROVAL OF AGENDA
- 4) ADOPTION OF THE MINUTES OF THE LAST ANNUAL GENERAL MEETING
- 5) BUSINESS ARISING FROM THE MINUTES
- 6) FINANCIAL REPORT
- 7) APPOINTMENT OF AUDITORS
- 8) ANNUAL REPORTS
- 9) REVIEW MISSION STATEMENT AND PHILOSOPHY
- 10) MEMBERS/NEW MEMBERS
- 11) ELECTION
- 12) OTHER BUSINESS
- 13) ADJOURNMENT

CMHA - CCB's Mission Statement and Philosophy

Purpose

The Canadian Mental Health Association Cariboo Chilcotin Branch (CMHA-CCB) is an innovative, non-profit society that has served the community of Williams Lake and area since the early 1970's. In April of 2005, the society merged with the Jubilee Care Society. We focus on at-risk client groups who face multiple barriers. Our programs target mental health consumers, disadvantaged youth, individuals and families of all types, serving more than 1000 individuals each year.

CMHA-CCB works with other service agencies, private enterprises, government ministries and communities to ensure access to effective and accountable services for our client groups. We assist clients to better themselves through self-improvement, employment and volunteer opportunities. Our goal is to enhance the economic, educational and social well-being of our clients.

Mission Statement

As the Nation-wide Leader and Champion for Mental Health, CMHA facilitates access to the resources people require to maintain and improve Mental Health and community integration, build resilience and support recovery from mental illness.

In BC, mental health, substance use and addictive behaviour are within the scope of the organization.

Branch Philosophy: We believe

- ✚ in enabling individuals, groups and the community of Williams Lake to increase control over and to enhance their mental health;
- ✚ in social justice;
- ✚ in individual and collective responsibility and;
- ✚ In access to appropriate and adequate resources and support and that these elements are critical to mental health and a personally satisfying quality of life.

President:

Well another year has come and gone, this was my last year as board chair as I am stepping down after 10 years. I'd like to take this opportunity of thanking my board members for having confidence in me for so long and also the staff who always give their friendship and warmth.

This has been a very difficult year in our finance department as it was decided to leave the co-op. Finance department and set up on our own, with the help of Janice our executive director and Sherry Yonkman our new finance girl it seems so far to have gone off quite smoothly. There is always a few hiccups on the way, next year should be looking a lot better.

Again I cannot thank Janice and her staff together with the board enough for a great year and a job well done!

Thank You all

Gay Sanders

President

Executive Director:

This past year has once again been a busy one. We added 2 new programs to our agency, Community Bridge to Housing First and Wildfire Relief Counselling. This meant 4 new staff added to CMHA-CCB. This brought about an extra challenge with the finance department, creating more work, and not enough staff to keep up, so we have continued to be behind this past year, with financial reports, reports to the Board and quarterly reports.

There were also changes to some staff in the Advocacy and Support Program as well as the Multiculturalism Program and the Employment Program. Codie had to go on emergency medical leave and we hired Andrew Frenette. While we were able to replace Codie, there was no training for Andrew and this made it challenging to fulfill contract obligations with Horton Ventures. In August of 2018, Horton Ventures let us know that the Government was making changes and they no longer would be partnering with us after March 2019.

Due to the wildfires in 2017, there has been many opportunities for training through workshops and webinars. Some of the trainings I have participated in have been: How to Read and Understand Financial Statements, Solution Focused Single Session Therapy, Psychological First Aid, Food Safe, First Aid and Critical Incident Training just to name a few.

In May of 2018 CMHA-CCB held its Strategic Planning session facilitated by Trevor Barnes. All staff and Board members were invited to the Friday evening session and the Board met for the Saturday session.

CMHA-CCB received a \$15,000.00 grant from CMHA BC Division for a program called Talk in Tough Times. This was a program related to the Wildfires and was offered through Facebook messaging. We received pamphlets and information to give out, and Sarah and Kayla would check the Facebook posts and responded to any questions or comments that were made.

We also received funding from Red Cross and United Way for the Wildfire Relief Counselling Program, Crisis and Counselling Program, Family Solutions Program, Community Based Victim Services Program and the Community Advocacy Program.

Through this past year I facilitated 2 Mental Health Awareness trainings to Tolko and one Mental Health Resources presentation for High School students at the Overlander Conference Centre. I also presented 2 workshops for the Wildfire Community Event at the Gibraltar Room.

The Multiculturalism Program hosted an Equity workshop for staff and Board members. I found it be a very beneficial workshop talking about the systemic racism that we are often not aware of. I am hopeful that we can continue this conversation in the future.

Fundraising events we did were Scrapbooking, Halloween Night, and Chocolate Covered Strawberries.

Other activities I participated in were Manager's meetings, staff meetings, and E.D. meetings both in person and by phone, Integrated Management Committee, Co-op meetings, Social Planning Council and Chamber of Commerce luncheon.

This past year has once again been a learning curve for me and I recognize that although I'm getting a little more comfortable, I still have a lot to learn. I want to thank the Board and the staff for your continued patience while I am still learning the ropes.

It has been a privilege to continue working for CMHA-CCB.

Respectfully Submitted,

Janice Breck

Executive Director

Homeless Outreach Program:

This year consisted a lot of bringing clients to the ministry in order to book appointments 124 times and had them in my office 71 times for their first call and some of them had phone numbers they could be reached at. I also met with Red Cross four times to see what we could do for mutual clients and on one occasion helped them by bringing a client to Gateway because of suicidal thoughts. I gave away furniture and other household items to individuals in need, a total of 40 times and picked up items 45 times in total. I attended a psychological first aid course, an addiction workshop for Ian's worker's, Homeless action plan meetings, 2 poverty reduction meetings, attended multiple PICC meetings, Traveled to Kamloops for data-base training and last but not least met with Dave Dickson and a meeting in Penticton/Williams Lake working on safer communities. I dealt a lot with the Aboriginal court system. Helped clients with moving furniture. Helped many Clients fill out forms. I also had to arrange for a translator for a French speaking client. Went to ministry for clients with and for clients many times, many different reasons and some because some clients aren't allowed in the Ministry Office. Gave rides to clients for various reasons. Referred multiple clients to Matthew upstairs at Women's contact society, and many to our advocate for disabilities and to the Housing First Project. This Last Halloween I Organized haunted house fundraiser at CMHA, it was a fun and good hit with the community. All of my clients range in variety from individuals form the Chiwid house, the hospital and many other locations around Williams Lake and area. Helped one of my clients get his ducks in a row to move back to Quebec which was successful. Gave away many soaps/shampoo's and other donated toiletries (As supplies lasted) from the office. During the heat wave we had I also went into the community and distributed water bottles to individuals who needed it. Helped client get situated into Baker Manor. Assisted the RCMP to get an elderly client off the street and back to his community! I try to do many walk a bouts weekly except when dealing with kidney stones which ended up being a five month ordeal this time period. Even though I'm doing outreach I had dozens clients who decided I was their counsellor and needed to talk.

Submitted by:

Wayne Lucier

Homeless Outreach

Jubilee Place:

2018/2019 has been a busy year for Jubilee Place, we started out with limited access to our parking lot due to road construction that is still going on to this day, this caused some issues with services for our clients not being able to access the building, to provide home care or other various services that are required for clients.

Jubilee place has had 9 participants move out on their own, and all seem to be doing well in the community. We still have many follow up meetings with these former participants and we provide support where we can.

Jubilee Place evicted 5 participants this year with the causes ranging from aggressive behavior to drug activity, or general abuse of the participant agreement and RCMP involvement. Jubilee Place also lost a long term participant due to his battle with cancer, his family were here and were with him at the time of his death. We have planted a tree in our lot by the gazebo with the money donated by the family.

Units 23-33 and the restaurant have had new vinyl flooring installed as well as new lights and a few baseboard heaters as well, we are waiting for funding to do some additional flooring in the rest of the units in the future.

Jubilee Place has had all the stucco removed and new siding installed along with new vents, this has really improved the look of the building.

We have lost Natasha who was a casual employee and have hired Keegan Reid who is a young psychology student at TRU. The participants seem to like Keegan as well as the staff.

Jubilee place has one double room vacant at the moment but will have it filled as soon as we are done with cleaning and maintenance. We have 22 applicants on our wait list and continue to work with other agencies to find suitable housing and programs for our participants.

Respectfully,

Mike Charon

Transitional Housing Program Manager

Family Solutions:

Submitted by: Bettina Egert, Program Manager & Family Counsellor

The Family Solutions Program (FSP) offers supportive counselling and group programs for parents, adolescents and children with a variety of family, relationship and individual mental health issues. In the majority of cases we provided a combination of individual, couple (parents), family and group sessions, offering social/emotional support, advocacy and skill development based on individual needs and goals of clients.

CONNECT: For the 12th year we provided the *Connect* Parenting Program. *Connect* is a 10-week psycho-educational group format for parents and has been developed by the *Maples Adolescent Treatment Center*. It is tailored for caregivers of youths with behavioral difficulties and focuses on the building blocks of secure attachment, by helping parents acquire knowledge and develop skills to enhance sensitivity, reflection, and effective emotional regulation in parenting.

To obtain and maintain a group facilitation license a minimum of two facilitators are required and each needs to participate in a multi-step training and supervision process provided by Maples Program Supervisors.

Margaret Anne Enders, an experienced youth counsellor, and our FSP family counsellor Dana Hamblin co-facilitated 2 group cycles over the past year. They obtained their facilitator licenses in 2015 and 2016, and have both facilitated several groups. We continue to receive steady referrals for *Connect* and engagement and attendance rates have been high for both groups. Feedback from participants was again extremely positive and the parents considered the group experience and the presented material on attachment as very helpful for parenting. Dana and Margaret Anne were commended for their excellent facilitation skills, knowledge about the material and great teamwork.

TAKE A BREAK SUPPORT GROUP: CMHA Kelowna has started a program called Family Navigator in 2016. The Interior Region Family Navigator works collaboratively with CMHA branches throughout the Interior Region and their community partners to help parents/caregivers access relevant programs and services based on their individual needs. The program also offers support groups. At *Take a Break* parents can meet other caregivers/parents, make connections, share experiences, and learn enhanced coping skills. Topics of discussion include: mental health issues, substance use, strategies for mental wellness, boundary setting, and communication skills. Dana attended the facilitator training which was provided by CMHA Kelowna and started the group in Williams Lake. We had a few parents attending so far, but it has been challenging to fully develop the group program due to lack of referrals. We have invested a significant amount of time last year again to further promote the program in the community, but haven't received the desired interest. We plan to give it another try next year.

INTEGRATIVE YOGA THERAPY: Bettina has been partnering with the Satya Yoga Studio and has delivered three six-week *Integrative Yoga Therapy* courses, one for adults and two for youth in grades 10 & 11. The programs are designed to alleviate emotional distress and foster self-regulation by focusing on the body mind connection and somatic exercises. This practice is sensitive to people with traumatic experiences and accessible to anyone. Group sessions were offered in connection with individual counseling support. We have received funding from the Red Cross through the Wildfire Recovery Program to cover program expenses for 2 years. This financial support allows us to offer the courses at no cost for participants. Bettina developed all program components and course outlines in pursuit of a Master of Arts Degree with a concentration in Integrative Therapy and co-facilitated the groups with Tricia McLellan, an experienced Yoga Therapist. All 3 programs received tremendous interest and overwhelmingly positive feedback from participants, and clients asked for continuation of the program. Bettina summarized the program design, research methods and evaluations for the courses (*Integrative Yoga Therapy – A Case Study of Combining Body, Breath and Movement with Traditional Therapy*). The next course is planned for May of 2019 for children at the ages of 8-11.

SUICIDE SUDDEN DEATH COMMITTEE: Bettina continued coordinating and chairing the Suicide Sudden Death Committee (SSD C) for the past year, however asked for someone else to take over this time-consuming position after 10 years in this role. Committee members provided interim assistance with some of the duties and Cheryl Jacques agreed to assume the position in April of 2019. Cheryl's role as RCMP Victims Assistance Worker is a perfect fit with this coordinator role, as she is directly involved in all cases of suicide and sudden death.

Purpose of the committee is ongoing prevention in a variety of forms (information, education), as well as intervention (coordinated responses in cases of suicidal ideation, death by suicide or sudden death, to reduce fallout, e.g. suicide or PTSD).

The committee has been hosting the annual gathering on February 12 of 2019 and this year's suicide prevention event was targeted towards grade 8 students at the Columnetza campus. As suggested by school staff, we changed the format of the event and offered several small mini workshop stations, where the 200 attending students cycled through, instead of one single large presentation. The stations offered interactive activities, including breath practice and exercises addressing themes as bullying and the use of social media. General resources and information on suicide and mental health were provided. Based on feedback from teachers and service providers, the event was well organized and students engaged very well in all activities. Collaboration amongst service providers to set up and facilitate the event was excellent.

The effectiveness of the Suicide Sudden Death Committee's work proved again in positive collaboration during the intervention in several cases of last year's suicides. Review meetings provide opportunity to evaluate strengths and gaps in responses and services. The committee decided to update the current community protocol, to further enhance smooth collaboration in delivering effective service responses. In particular the chain of communication was identified as an area which will need to be reviewed.

CLINICAL ISSUES: FSP Counsellors helped clients deal with a spectrum of issues. The most often encountered problems in 2018/2019 were parenting issues; separation / blended families / single parents; depression; anxiety; substance abuse; family violence and abuse; bullying; parent teen conflict; teen defiance and rebellion; school problems; lack of attachment between parents and children; lack of emotional self-control; parental emotional fatigue and lack of positive parenting skills; teen relationship problems; grief and past trauma;

STATISTICS: High numbers in new referrals have continued this year in comparison with past years and we processed 209 new referred cases. In comparison to last year this constitutes a 7 % increase and we already had a 17 % rise of referrals last year from 2016/17. In many of our cases we see several family members individually, therefore we decided to count individual service recipients in the future to provide a more accurate account of client numbers.

Self-referrals together with referrals from former clients remain the largest referral source with 54 percent, followed by 22 percent of various community referrals, 11 percent by MCFD and 10 percent by schools.

PROFESSIONAL DEVELOPMENT: Among the training events FSP staff attended were: 2.5 days course on Trauma Informed Yoga for Health Care Providers, presented by Sarah Holmes de Castro, MA, ERYT200; 2-day Solution Focused Training, provided by the Canadian Solution Focused Brief Therapy Center; 2 hours presentation by Dr. Kristin Buhr on treatment of anxiety and mood disorders; 3 hours workshop on equity and diversity by Joanna Gislason; 3 hours *Reconciliation* workshop, facilitated by Johnathan Whonnock; 1 day Talking Circle Workshop; 1 day Critical Incident Debriefing Workshop; Mindscapes and Landscapes: Integral Systems and Change Processes as Viewed Through an Ecopsychological Lens, online post graduate 3 months course delivered by Dr. Hilary Leighton, MEd, IBP, PhD, Registered Clinical Counsellor;

COMMUNITY LIAISON: We were again active in the Williams Lake community by chairing and serving on several committees, and attending community events: Suicide/Sudden Death Committee (SSD C); Communities That Care (CTC); Integrated Youth Team (IYT); Wildfire Resilience Committee; Wildfire Information EXPO;

HUMAN RESOURCES: This past year continued to be impacted by the wildfire crisis during the summers of 2017 and 2018 and the traumatic effects on clients and staff. Staff's health seemed to be affected by the additional stress factor, and we experienced again high numbers in absenteeism.

Tasha Reynolds joined our team for a few months to support the program with counselling and the Take a Break Group. Her position was financed through the Wildfire Relief funding MCFD provided.

Multiculturalism:

It was an eventful year in the Multiculturalism Program with some exciting new directions and many new partnerships. We focused much of our time this year on providing opportunities for marginalized voices to be heard and developing relationships with local First Nations agencies, governments, and individuals, as well as individuals from other cultural backgrounds and immigrant communities.

Funding

Gaming funding has been an on-going test, trying to fully understand and meet all the regulations set by the Community Gaming Grants Branch of the Ministry of Community, Sport and Cultural Development. With the Multiculturalism Program's elastic design and delivery model, in order to remain responsive to community need, it becomes very challenging to adhere to the complex and complicated rules. Amongst other reporting strategies, we have been developing a better system to keep track of volunteer hours and in-kind contributions to more accurately reflect and assess how our programs are being resourced in the community. Nevertheless, it continues to be a very challenging task to come up with additional 25 % of non-government funding as required by the Gaming Branch. With the assistance of Shandi Warkentin, proposal writer for the Community Services COOP, we submitted our proposal for the 2019-20 fiscal year and funding was approved for the same amount as for 2018/19. Due to gaming regulation, our 2018/19 funding period ended in January of 2019 and the new fiscal year started Feb 13, 2019.

Our application to the Ministry of Tourism, Arts and Culture for the Equity Audit Grant was approved last year for \$ 6000, to implement the proposed project of organizational assessment, to identify areas of opportunity for our own improved cultural proficiency. An extension was granted for project completion in February of 2019.

We received another \$ 6000 grant through the Organization against Racism & Hate (OARH) to deliver some reconciliation work for the community and another \$ 1000 for our ongoing OARH community networking.

Human Resources

Last year was marked by many changes in program staffing. Tracey Elkins and Al-Lisa McKay were hired at the end of April of 2018 as Program Coordinators to work together with Margaret Anne Enders. Margaret Anne provided training for the new staff members and then resigned from her role in June of 2018. Tracey and Al-Lisa shared the Coordinator position until October when Tracey decided to leave, and Al-Lisa took on all program duties for the remaining year, working 25 hours per week.

Interfaith Bridging - Women's Spirituality Circle (WSC)

The Women's Spirituality Circle held its fifth annual gathering on January 27, 2019 at the Seniors Center. The events title was *Women's Wellness Expo*. The theme of the gathering was Health and Wellness through Diversity: It was designed to help women realize that there are many diverse avenues towards health and wellness within this community and offered by various cultures and traditions. Over 100 women from diverse backgrounds (ages, cultures, abilities...) attended the event, from all walks of life. The gathering was planned by a committee, consisting of women from various cultural backgrounds, each bringing a different perspective, and led by MC Program

Coordinator Al-Lisa McKay. The committee was volunteer, which resulted in many hours of volunteer service. The event was an enormous success for both the multiculturalism program and the participants.

Other events coordinated by Al-Lisa throughout the year included monthly social teas and sharing circles, attended by a varied group of women. Topics of those meetings were focusing on wellness through creativity and diverse healing modalities as well as planning for the Women's Wellness Expo.

Intercultural Bridging – Harmony Series

Culture Cafe

Al-Lisa planned and hosted quarterly ethnic multicultural film nights with discussions after the films. These events were held at CMHA and future plans have been laid to partner with the Williams Lake Arts Center and hold the events at their much larger and more comfortable center. Access to their mailing list will also help more people know about these wonderful informative evenings.

Expressions of the Soul

An evening of poetry and music, held at the New World café on October 26. 35 people enjoyed 7 performers of poetry, song, loop pedal, guitar music, from a diverse group of cultural backgrounds.

Twin Schools

In 2018/19 we matched up the grade 4 class at Marie Sharpe with the grade 3-6 class at Sxoxomic Community School at Esk'etemc, for learning about multiculturalism and developing relationships. The program took place from September 2018 to March 2019 and involved classroom visits and field trips, coordinated by Al-Lisa together with the classroom teachers. Marie Sharpe students were visiting their partner class at Esk'etemc and the Sxoxomic students came to town for a day at Marie Sharpe. Both visits were a huge success and the students really integrated throughout the day. The feedback from students and teachers was extremely positive, and many new friendships were created.

Anti-Racism Programming

Race Talks

A Community Cultural Celebration event was hosted on November 20 2018, in partnership with the Cariboo Chilcotin Partners for Literacy. We hosted a community potluck of sharing cultures, company and food of various regions of the world. Guest speaker Virginia Gilbert spoke about her culture and experiences and other participants shared stories about their culture and acts of racism they had experienced.

Anti-Racism Advisory Council

The main achievement of our anti-racism work over the past year has been to bring together a new advisory body which is founded upon principles of equity, diversity, and which works together in full partnership to better address matters of inequality and structural racism within our local institutions. Overall the current committee is home to cultural representatives from diverse backgrounds such as Secwepemc, Dakota-Cree, Metis and German with room for many more. One of the focus areas of the committee this year was to further develop concrete materials on combating racism, through increasing incident reporting, with use of the Community Protocol brochure supported by an anti-racism awareness media campaign.

Anti-Racism Community Protocol

The Protocol Brochure is in its fifth iteration and was worked on this year by the new Anti-Racism Advisory Council, which redrafted an original community statement, in keeping with current time and climate of what is going on in Williams Lake and beyond. We hope to keep continuing to use and improve this document and work towards a systemic approach to addressing and preventing acts of race hatred, by promoting use of this tool, concrete and constructive responses to racism incidents, and by helping those who need support in challenging and calling out discrimination.

Antiracism Poster Campaign

For this campaign we continued to develop posters with positive messaging encouraging changes in behavior, which are distributed via social media and posted all around town in local businesses and community gathering spots. The campaign challenges racist thought and invites “compassion, respect, change, humanity, and harmony” in differently themed posters. This strategy brings a face to diversity in Williams Lake, offering images that will act as a support and encourage respect for minorities.

Equity Audit

The Equity Audit grant project was successfully completed at the end February of 2019. Joanna Gislason, human rights lawyer and leadership advisor, specializing in equity projects, supported MCP staff with the planning and facilitation of a workshop to address Systemic Racism within the workplace. The presentation was offered to all CMHA CCB staff and board members and covered human rights law, implicit bias and an anti-racism approach to mental health services. The workshop was held on Feb 14 and attended by 14 participants.

Reconciliation Grant Project

The Multiculturalism Program has partnered with the Indian Residential School Survivors Society (IRSSS) to host a Reconciliation workshop for the community. Al-Lisa was coordinating the workshop and John Whonnock was presenting on reconciliation topics and facilitated dialogue. The event was hosted on March 12 and we had 10 people attending from CMHA and the community.

Respectively Submitted,

Al-Lisa McKay Multiculturalism Program Coordinator

Bettina Egert Multiculturalism Program Manager

Outreach Advocacy & Support Program:

The Outreach Advocacy and Support Program is funded through a Gaming Grant. As part of Gaming, we are required to raise 25% of the contract amount. We have been able to meet this requirement through in-kind donations.

This is a very important program that provides support to marginalized clients. During this past year, the Advocacy worker attended Doctor Appointments with clients, assisted clients with disability applications, attended appointments at the Ministry Office and offered Life Skills.

The Advocacy worker also collaborates with the Homeless Outreach Program, the Brain Injury Program and the Community Bridging to Housing First Program.

Theresa Adams had been the Outreach Advocacy & Support worker until November of 2018, then Alyisha Knapp was hired.

Respectfully Submitted,

Janice Breck

Executive Director

Community Bridge to Housing First Program

BACKGROUND

Conventional approaches to homelessness suggest that people need to address the issues that caused their homelessness before they can be housed: addictions, mental illness, unemployment, poverty and other issues. Housing First approaches recognize that being homeless causes extreme stress, and makes all the other issues more complicated and difficult to address.

THE PROGRAM

The Community Bridge to Housing First Program offers support and rent supplements to people who are homeless. We work in partnership with other organizations and services to find housing, assist in the transition from homelessness to housing, and work to support each participant to set and achieve their goals, with a focus on recovery and making healthy choices.

The only criteria for the program is that the person is homeless. We complete a vulnerability assessment that helps us understand each person's history and challenges, as well as their strengths and needs for support. We do our best to match their needs to available housing.

The time it takes to get someone housed varies, depending on their needs and the availability of suitable housing.

The 2018-2019 was an eventful year for the Community Bridge to Housing First Program! Our biggest highlight was finding a new home with the Canadian Mental Health Association! This move has helped us reach more people and help our tenants find a 'one-stop-shop' solution to community services. The other huge advancement by the program was the securing of more funds from both the United Way and Red Cross. With this added funding we were able to hire a new support worker in February 2019 in order to help with the increased level of applications.

Highlights from the 2018-2019 year are:

65 Applications Received!

(Reasons for Applications not accepted onto program are: loss of contact with client, applicants leaving the community, or applicants currently housed and not actively homeless)

16 People Housed!

Applicant Demographics include: 7 Males, 7 Females, 1 Transgender, 6 Aboriginal

Respectfully Submitted,

Leah Martin

Participant Support Coordinator

Crisis & Counselling:

I am submitting this report as the Program Manager of the Crisis and Counselling Program and Supervisor of the Community Based Victim Services Program and I will endeavor to identify some of the highlights and progress made over this past year.

Crisis Line:

Williams Lake Crisis Line is an active member of the Interior Crisis Line Network (ICLN) which includes four other communities, Vernon, Kelowna, Trail and Cranbrook. Between the five communities we are able to offer crisis line services 24/7, 365 days per year. My role is Program Manager and Cher Sytsma is Supervisor of the Crisis Line centre here in Williams Lake. We train and supervise a team of volunteers that support the three lines (1-800-Suicide, 310-Mental Health and the Interior Crisis Line) from 4:30 to 8:30 Monday to Saturday every week. This fiscal year we held two six week – 40 hour Crisis Line training courses, one in the spring and the other in the fall and entertained at two appreciation dinners for our volunteers.

Please find attached the ICLN Annual Report: Williams Lake 2018/19 Fiscal Year Report. An important highlight of this report for our Williams Lake Crisis Line is that our ICLN incoming line had an increase of 62% over the previous year and a 75% increase in 310 Mental Health calls. The call handling was managed by a significantly reduced staff of dedicated volunteers.

(Please note attached graphs)

Counselling Program:

As two dedicated counsellors in the counselling program we offered direct counselling services to 119 males, 403 females, 36 couples and 92 no shows for a total of 577.5 hours.

As part of the counselling program we offer both Healthy Relationship and Anger Management Strategy groups for men and women. These groups are held throughout the year as required.

Other Highlights:

(Please refer to attached Community Education Statistics for 2018/19)

Mental Health Awareness Week was in May. The Mental Health Advisory Committee hosted a luncheon at the Clubhouse, and then joined the Clubhouse participants on a walk to the bowling alley. The committee also set up resource tables to share information regarding mental health at Cariboo Memorial Hospital and the Recreational Complex.

The Suicide Sudden Death Committee held their Suicide Awareness event in February at Lake City Secondary Columneetza Campus. We worked in five breakout groups of grade 8/9 students numbering approximately 200 and the focus was on suicide/mental health and the correlation to social media.

In September I attended the Annual Crisis Line Association of B.C. (CLABC) Conference and AGM. During this conference, we as ICLN take the opportunity to meet for a day and a half to update and discuss issues and ideas directly related to our services and volunteers for our Crisis Line. The CLABC's vision to have one number in the Province and have PHSA fund that vision is still on the table.

The Suicide Awareness Day was September 10th, we set up at Save-On Foods with a manned resource table, had open discussions with a broad spectrum of our community and sold hot dogs and beverages. With sales and donations, we cleared 400.00 for program use

Beyond the Blues was held on October 11th, but because the school was overwhelmed with activities, we chose to hold this year's event at Thompson Rivers University – Williams Lake Campus. We collaborated with approximately 12 other agencies and had a cross section of ages and community participants that numbered approximately 100 at the event.

Throughout the year, I chair the Mental Health Advisory Committee meetings held at the Clubhouse, we meet 10 times throughout the year. I was also part of the Suicide Sudden Death Committee, which meets on a monthly basis, and we also attend the monthly CLABC meetings, Interior Crisis Line meetings to discuss the 1-800SUICIDE and 310 Mental Health Support Lines, twice a month.

Thank you once again for the opportunity to work for such a great organization!

Respectfully submitted,

Heather Silvester

Crisis & Counselling Program Manager



Canadian Mental Health Association
 Cariboo Chilcotin
Mental health for all

**FISCAL YEAR 2018/2019
 FOR CMHA-CC COUNSELLING PROGRAM**

Client Genographics:

Female	403	Emergency	30
Male	119	Low Income	79
Gender/Other	0	No Shows	92
Couples	36	New Clients	69
TOTAL:	558		

Ages:

12>	0
12 to 18	6
19 to 30	129
31 to 45	161
46 to 65	274
>65	24
TOTAL:	594

Total Sessions in Minutes

	# of	Total Hrs	# of	Total Hrs	# of	Total Min
0:15	4	1	1:00	515	1:45	1.75
0:30	10	5	1:15	14	2:00	10
0:45	2	1.5	1:30	17.5	Total Hrs Counselling: 577.5	

PROBLEM AREAS:

Academic	11	Mental Illness	136
Alcohol/drugs	39	Mental/Psych. Abuse	5
Anger	163	Parent/Adult Child	53
Anxiety	278	Parent/Child Conflict	6
Assault	3	Parent/Teen Conflict	4
Brain Injury	25	Phase of Life	28
Bullying	5	Physical Abuse	4
Child Abuse	2	Pregnancy	2
Communication	106	Relationship	189
Cultural/Identity Abuse	2	Self Esteem	89
Depression	269	Separation	18
Family Problems	87	Personal Identity	9
Financial	78	Sexual Abuse	1
Financial Abuse	0	Sexual Assault	0
Grief	140	Spousal Assault	3
Interpersonal	30	Stress	222
Job	77	Suicide Attempt	0
Legal	6	Suicide Ideation	25
Loneliness	122	Other	1
Medical	22	Total	2260

REFERRED

	By	To
AA/AN		
Alcohol Drug Counsellor		
CMHA	28	
Doctor	131	
Family Member	48	
Friend	60	
Hospital	0	
Legal	4	
MCFD	1	
MH	16	
Ministerial	3	
Other Court	1	
Probation	22	
RCMP	37	
School	4	
Self	149	
Shelter	0	
Other	54	
TOTAL:	558	0

Community Education Statistics for the Year 2018-2019

MONTH	Community Educational Training/Workshops	# of Staff Facilitating	# of Participants	Total # Group/Prep Hours per staff participating
<i>APRIL 2018</i>	CL Training 3, 5, 10, 12, 17, 19, 24, 26	2	7	40.0
	Women's Spirituality – Resiliency Through Mental Health Awareness	1	10	4.0
<i>MAY</i>	Crisis Line Training May, 1, 3, 8 10.	2	7	20.0
	Mental Health Awareness Workshop – Tolko Mill	1	17	2.0
	Mental Health Awareness Workshop – Tolko Mills	1	20	2.0
		1	25	4.0
	Stress and Stress Management Workshop – Gibraltar Room	1	35	2.5
		1	25	4.0
		1	20	2.5
	Regeneration Workshop – Gibraltar Room			
		2	40	4.0
	100 th Anniversary of CMHA Chocolate Extravaganza			
Mental Health Awareness week luncheon and bowling celebrated with members of The Clubhouse and Mental Health Awareness Committee (MHAC)	2	30	4.0	
MHAC resource table for Mental Health Awareness Week set up at Cariboo Memorial Hospital and the Recreational Complex	1	30	2.0	
	1	50	4.0	
<i>JUNE</i>	Healthy Relationships Workshop 5, 12, 19	1	7 couples	9
		1	7 couples	21

<i>JULY</i>	Anger Management for Women on the 2, 9, 16	1 1	7 7	9 15
	Anger Management for Men on the 17, 24 31	1 1	15 15	9 15
<i>AUGUST</i>	Anger Management for Women on the 12, 19, 27	2	7	9.0
	Anger Management for Men on the 7, 14	2	15	6.0
<i>SEPTEMBER</i>	World Suicide Prevention Day set up at Save On Foods with resource table and refreshments	2	50	8.0
<i>OCTOBER</i>	Crisis Line Training 16, 18, 23, 25	2	8	20.0
	Beyond the Blues with support from the MHAC held at TRU oct 11	1 1	100 100	7.0 30.0
<i>NOVEMBER</i>	Crisis Line Training 1, 6, 8, 13, 15, 20, 22, 27	2	8	40.0
<i>DECEMBER</i>				
<i>JANUARY 2019</i>	CL Volunteer Dinner belated Christmas Party	2	12	6.0
<i>FEBRUARY</i>	Suicide and Sudden Death Committee presentation at Columneetza School	1	225	8.0
<i>MARCH</i>	Crisis Line Awareness Week – interview with local paper and on line to educate the public	1	10	2.0
<i>Total</i>				<u>466 TOTAL HOURS</u>



ICLN Site Report: Williams Lake 2018/19 Fiscal Year

Canadian Mental Health Association (Williams Lake) crisis line site is one of five partners within the Interior Crisis Line Network providing 24/7/365 evidence-based emotional support, risk assessment, de-escalation, safety-planning and emergency intervention to people across the Interior Health Authority. Williams Lake Crisis Line Workers (CLWs) serve callers on the regional Interior Crisis Line Network and on the two provincial services (1800 Suicide and 310Mental Health Support).

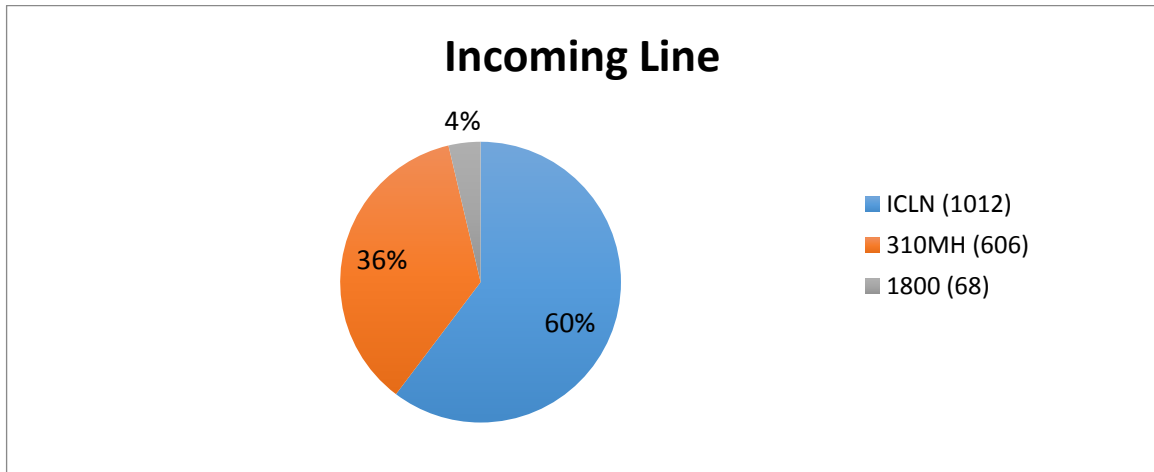
Key Highlights Include:

- ❖ **Williams Lake site remained a key support during the escalated Fire Season of 2018** providing resources, information and insight to support other ICLN partners in turn provide empowering support for callers ranging from crisis oriented callers to First Responders.
- ❖ **Provides key coverage that allows Trail site to have important offline time during evening period. Provided 24,898 minutes of support** (skilled emotional support, assessment, de-escalation, resources, safety planning & intervention as needed), an increase of **56% increase over the previous year.**
- ❖ **Answered 72% more calls than last year with 1,740 calls in 2018/19. Williams Lake has the third highest average call length (14.3 minutes)** investing time needed to de-escalate and support callers on all three crisis line programs (ICLN, provincial mental health and provincial suicide line).
- ❖ **61% of callers implied or inferred an improvement in their ability to cope** by the end of the call. This is the highest percentage of calls identified with coping improvement within the ICLN.
- ❖ Williams Lake site **had representation at most Provincial Network Operations meetings and ICLN partner meetings** and was **in good standing with the provincial criteria** providing support on all three crisis line services in 2018/19.
- ❖ **Interventions make up 1.8% of calls** which speaks to the commitment to work collaboratively with callers to de-escalate, engage in safety plans and direct to more sustainable/appropriate interventions
- ❖ **Williams Lake represented ICLN at the Crisis Line Association of BC as President of their Board from 2009-2017.**

Additional Statistics:

1) General Information:

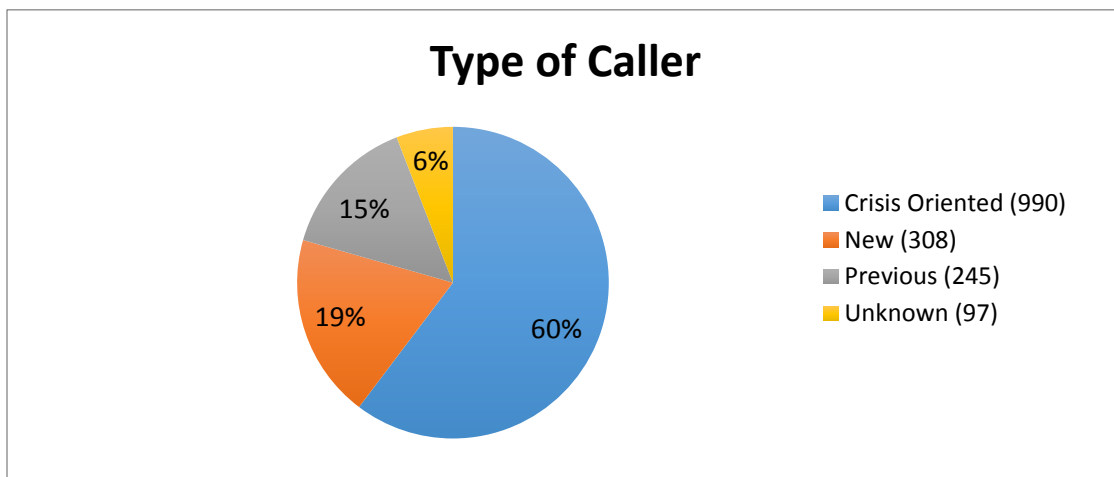
- ❖ **INCOMING LINE:** Williams Lake answers calls on all three crisis line services and similar to other ICLN partners, the majority of their calls come through the Interior Crisis Line Network. **ICLN calls increased by 62%** over the previous year and a **75% increase in 310Mental Health calls**. All ICLN sites saw reduction in 1800Suicide calls as more people within IH are beginning to call the National Suicide Prevention Service which is why there are plans for ICLN partners to join that service in 2019/20.



❖ **KNOWN/NEW CALLERS:**

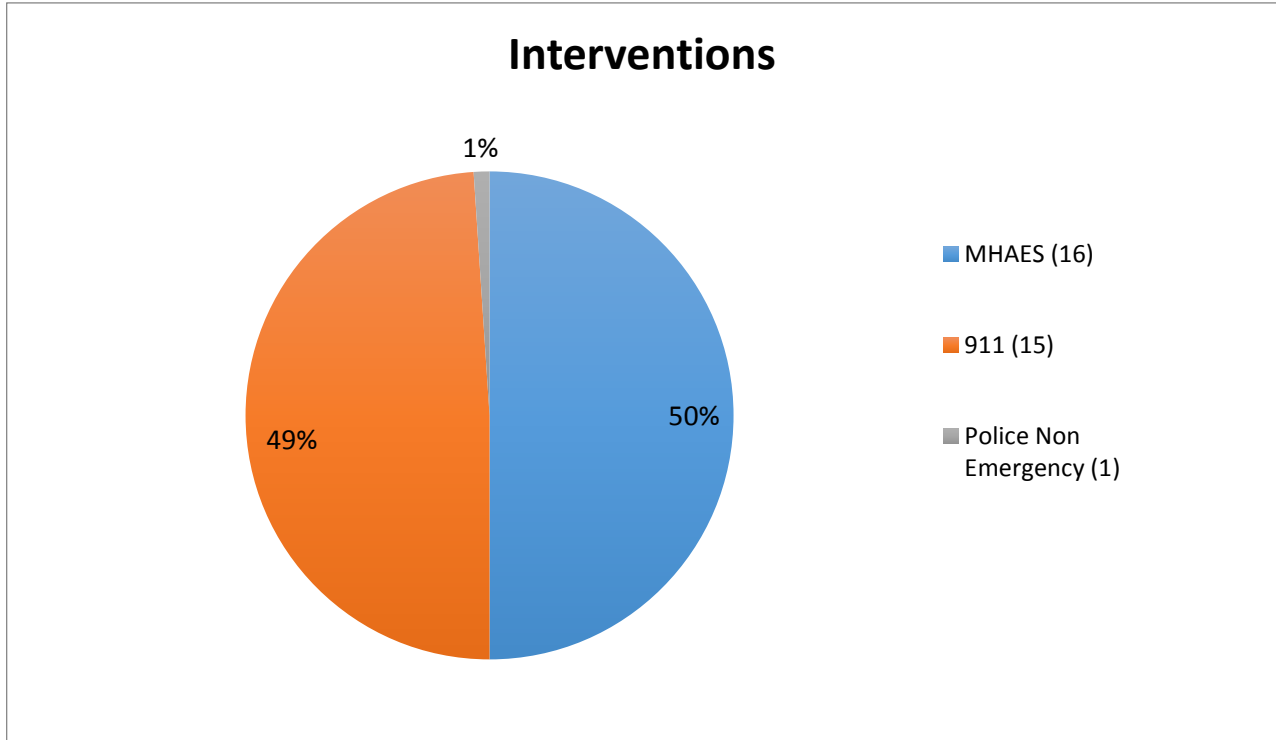
One of the valuable services CLWs provide is in supporting callers who use the crisis line to self-manage their mental health/substance use concerns.

- ❖ **75% of callers supported by Williams Lake CLWS were known to the crisis line either as Crisis Oriented Callers or previous callers.** These callers can escalate and reach out to CLWs to collaborate on safe plans resulting in fewer interventions (e.g. 911, Emergency Department visits, emergency meetings with Mental Health workers)



❖ **INTERVENTIONS:**

- ❖ With vast majority of calls, CLWs are able to work within the evidence-based model of 'collaborative engagement' (a recommendation of the American Association of Suicidology) to ensure intervention is with caller consent and that safety plans are developed through engagement of both caller and crisis line worker. **Intervention with consent increased 12% over last year (69% of interventions)** which reflects Williams Lake's commitment to collaboration (22 interventions with consent versus 10 without).
- ❖ **Interventions are required in only 1.8% of overall calls** due to focus on collaborative engagement. There was a marked increase in shifting interventions from 911 to MHAES services as available. **911 interventions were down 63% compared with last year.**

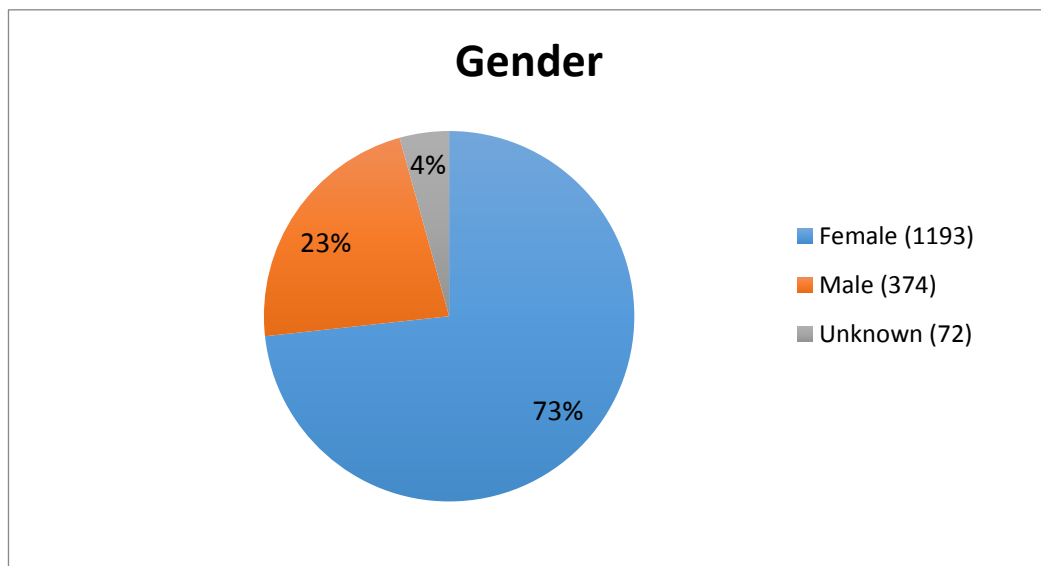


❖ Additional supports to callers included;

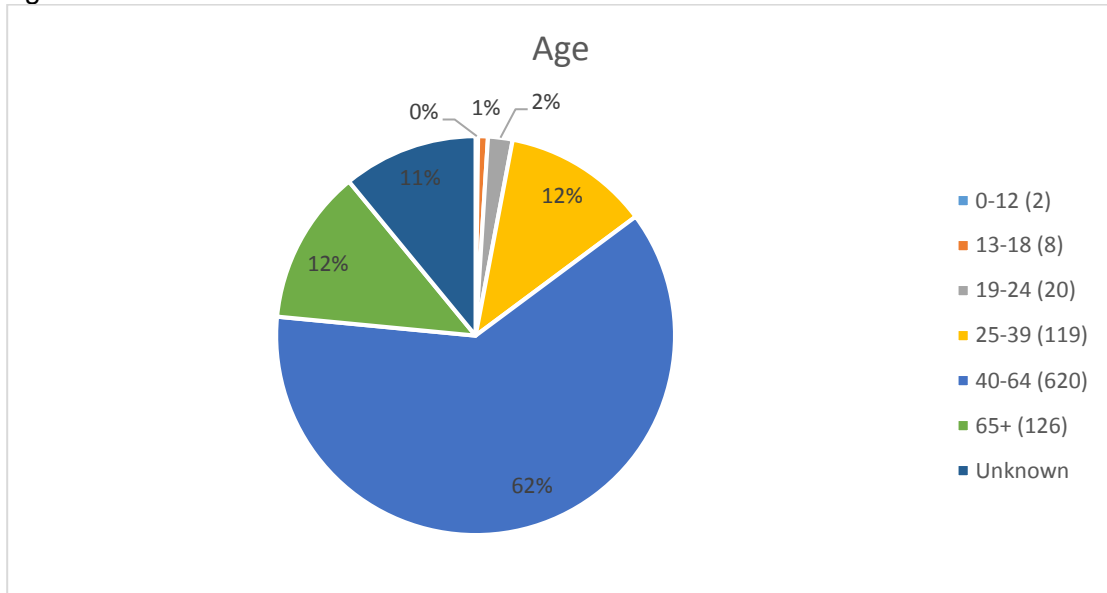
Support/Resource Offered in Safe Planning	
No Referral Needed/Wanted	1405
Other	49
811 Health Link	43
Mental Health – Non Emergency	38
Mental Health – Emergency	28
Counselling/Therapy	28
Police Emergency	23
Local/Other Crisis Line	18
Medical – Non Emergency	17
Medical – Emergency	13
Support Group	9
Shelters/Transportation	8
Family/Friends	6
MCFD/Child Protection	1

2) **Caller Demographics:**

❖ **GENDER:** Statistics show continued emphasis of female callers, however, there remains a steady rise of male callers occurring.



- ❖ **AGE:** Though majority of callers remain in the 40-64 age range, which is in keeping with previous years and ICLN sites, there is a decrease in calls from youth under 19 and a 55% increase in young adults (19-39). As with the other ICLN sites, there was a marked increase in callers over 65 (118% increase) which is important to support feelings of isolation, burdensomeness and/or abuse that can culminate in suicidal thought which is increasing in the elder population.
- ❖ High number of Unknowns is very common for this statistic as CLWs are trained to only tag age if the caller self-identifies.



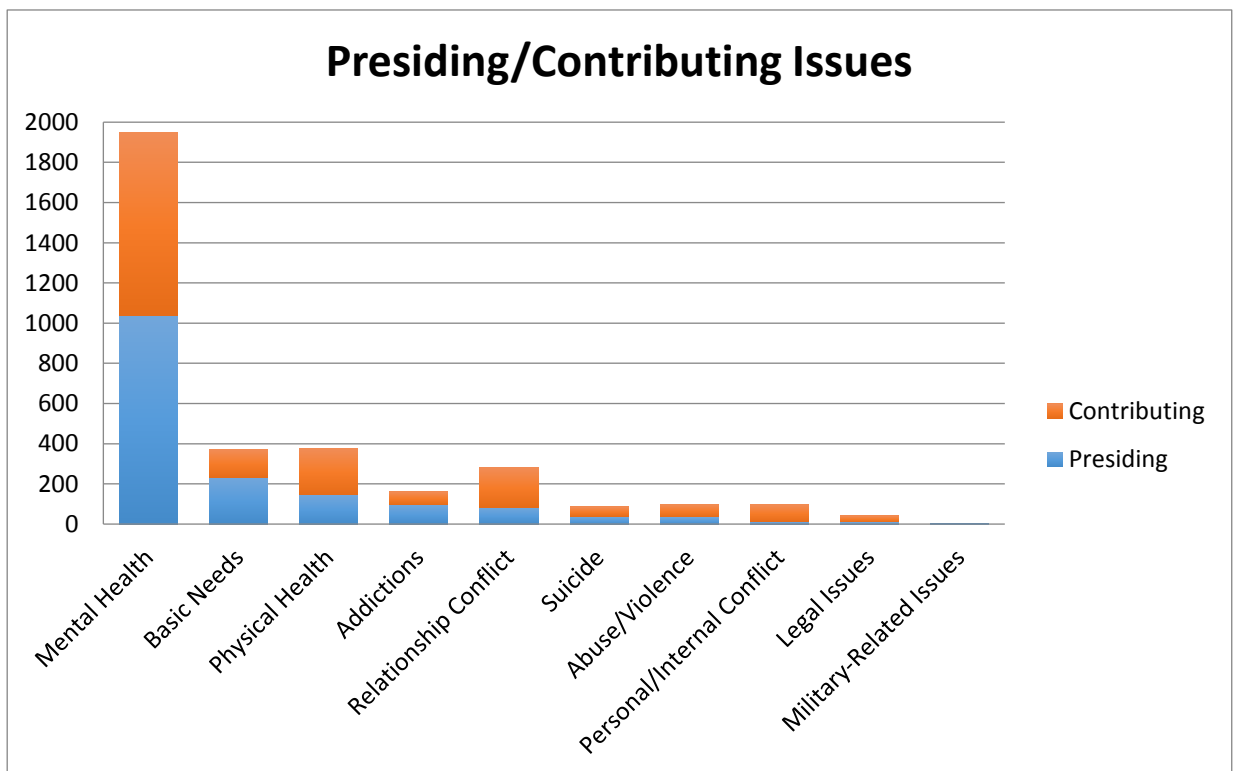
- ❖ **1st PARTY/3rd PARTY:** In keeping with previous years, majority of callers are calling for themselves. It is important to note that when someone is calling due to concern about another person, CLWs are trained to provide support to the concerned 3rd party as well as offering to do outgoing calls if appropriate (e.g. suicide-related) for the person in question. Overall there was a 97% increase in 3rd party calls with people reaching out in concern for others. When 3rd parties call in, the Crisis service engages on the ‘person of concern’ as well as working with the 3rd party around their personal self-care and coping strategies navigating the concern.
 - 1st party/Self= 1,551 (95%)
 - 3rd party under 19= 12 (1%)
 - 3rd party over 19= 73 (4%)
- ❖ **SELF-IDENTIFY:** As per direction from IH, ICLN sites currently do not ask the Aboriginal self-identifying questions of all callers. Only callers who self-identify as First Nations, Metis, or Inuit are recorded. In 2018/19, two people self-identified as Aboriginal.
- ❖ Regardless of the number of people, it is important to note there is a cultural safety training embedded within the revised Crisis Line Worker initial training as well as the opportunity for workers to attain deeper cultural online training via IH. In addition, the IH Indigenous

Wellness goals are embedded into the standard Crisis Line Training. This commitment is made to support accessibility and safety for all Aboriginal callers.

3) Presiding & Contributing Issues

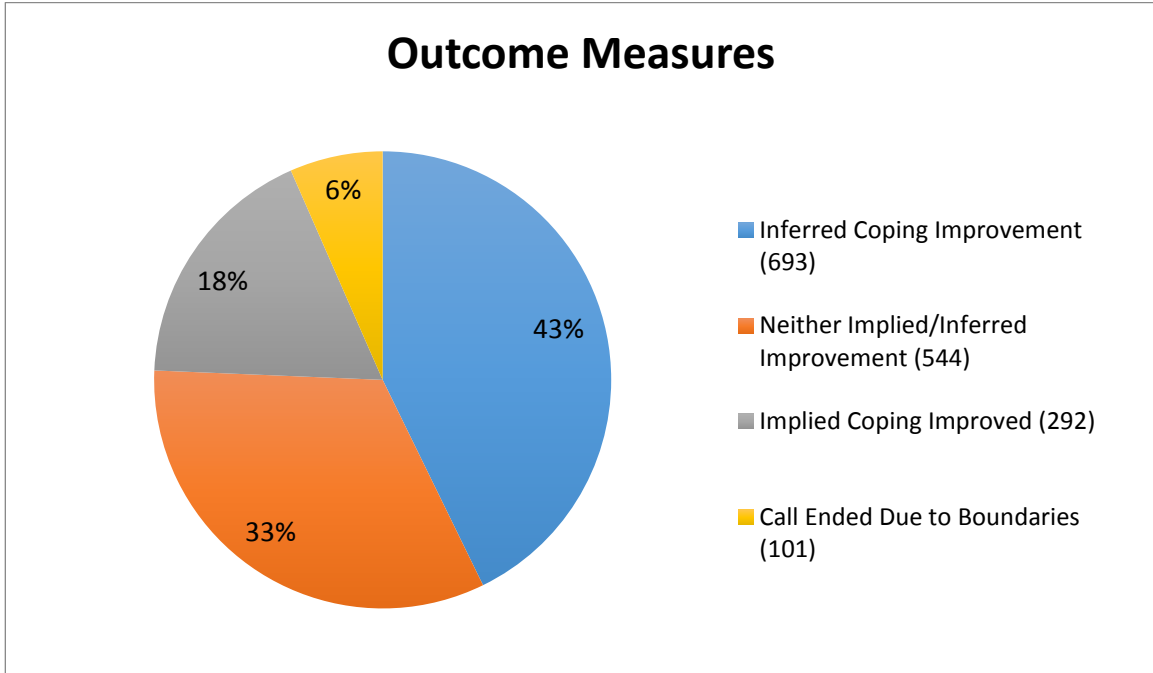
- ❖ The following chart and graph represents the primary & contributing issues that caused callers to reach out. At times long-standing or existing Mental Health and Substance Use issues are present and may not be identified as the primary concern if the caller is focused on a housing issue. Combining Presiding and Contributing factors relating to **MH concerns there was an increase of 54%** over last year. **Addiction-related calls remained static while Suicide-related calls increased by 50%.** The **largest increase was in Basic Needs calls increasing 156%**. Important to note, while Presiding Issue is a provincially required data field to complete, Contributing Issue is not.

Issue	Presiding	Contributing
Mental Health	677	583
Physical Health	59	63
Relationship Conflict	35	71
Basic Needs	106	37
Addictions	97	67
Suicide	24	34
Abuse/Violence	18	19
Personal/Internal Conflict	11	19
Legal Issues	11	7
Military Related Issue	0	0



4) Outcome Measures:

- ❖ Outcome measures identified that **61% of callers expressed or implied an improvement in coping strategies** by the end of the call with Williams Lake CLWs in 2018/19.
- ❖ This is of particular importance in supporting callers impacted by the escalating Fire Season.



Contribution to ICLN:

- ❖ Williams Lake is a foundational support to ICLN as they contribute to online coverage during a difficult to fill period of weekday/weekend evenings as well as being contributors to active discussions around crisis oriented caller protocols.
- ❖ Williams Lake was a core contributor to the creation of support materials for Crisis Line Workers in helping those impacted by the Fire Season navigate their stressors and a response system overwhelmed at times with delays.
- ❖ Williams Lake attended bi-weekly Interior Crisis Line Network and monthly provincial Network Operations meetings and contributed to discussions on protocols, call handling for crisis oriented callers and day-to-day operational issues.
- ❖ In 2018/19, they were in good standing with the Crisis Line Association of BC with call answer rates above the provincially required 50% network minimum and were working within provincial protocols.
- ❖ Williams Lake implemented revised ICLN training for all volunteers and staff and remain a strong support around evidence-based training.

Key Challenge Faced/Opportunity for Growth:

- ❖ **Ongoing Volunteer Recruitment:** Williams Lake engages in ongoing volunteer recruitment to support the natural attrition of volunteers. Through this effort they continue to build capacity and resilience within their community as volunteers take their skills into their personal and professional lives.
- ❖ **Fire Season:** Williams Lake site was closed due to evacuation relating to last year's significant Fire Season. Some volunteers did not return to their role as they needed to attend to their own personal stresses and realities. Despite this, Williams Lake rebounded quickly and missed few shifts once they re-opened.
- ❖ **Provided Key Support to CLW:** When a CLW in Kelowna ICLN site was subpoenaed, Williams Lake offered confidential counseling as their Crisis Line site managers and staff also work within CMHA Cariboo's Counselling service. This offer increased the volunteer's sense of support contributing to the support provided through Kelowna. Shows the strength of the service to work together to navigate challenges.

Goals Heading into 2018/19:

Williams Lake focus is on strengthening support within Williams Lake and larger community as it supports a significant geographic area within the ICLN network. In addition, there are the ICLN goals of;

1. Preparing for joining National Suicide Prevention Service and potential chat/text service as capacity allows;
2. Investment in volunteer recruitment, accessible training dates/times and community engagement to improve Crisis Line Worker numbers and call answer rates;
3. Sharing Better Practices for more consistent service.

Additional Information:

Financial information has been provided directly to IH via CMHA (Williams Lake) Accounting Department. Quarterly statistical reports (Provincial Health Services Authority) and additional information is available through Asha V Croggon, Program Manager, Interior Crisis Line Network or Janice Breck, Executive Director, CMHA Williams Lake.

Community Based Victim Services:

Community Based Victim Services (CBVS) work with individuals who are experiencing or have experienced Relationship Violence, Sexual Assault, and/or Stalking and Criminal Harassment. CBVS provides Justice related services to all victims and genders of family and sexual violence. An individual does not have to report the crime to the police or be involved in the Criminal Justice System to receive support services from CBVS. In addition to Justice related services, CBVS also provides education for individuals and/or community workshops on relationship violence; safety planning for adults and children; short term emotional support; information and referrals to other community agencies and information on basic court process for criminal court and family court.

CBVS accepts referrals from any agency, professional and/or self-referrals from clients. An initial assessment is completed with the client over the telephone and/or in person to determine the clients' needs and then an appropriate time frame for an initial intake appointment is scheduled. Based on the intake appointment, further assessments are done to determine what other community professionals may be utilized for further referrals out, such as counselling, the P.E.A.C.E Program for children who witness violence, Transition House, Women's Outreach Workers, Crime Victim Assistance Program, etc. consents are signed and then the CBVS worker liaises with other community agencies for referrals as per their best practices procedures. Follow-up appointments and/or telephone calls are scheduled to ensure the client is receiving direct services as required/identified.

At the start of this fiscal year, there were 54 Client Files open. Throughout the fiscal year there were an additional 117 client files opened, for a total of 175 Clients receiving supportive services throughout the fiscal year. This is almost double the caseload compared to 2017/18 fiscal year's 60 new files. Of the files which were opened this fiscal year, 99 were females and 17 were males and 1 identified as an "other". Seven clients were children and 102 were adults. 98 files were partner abuse, 7 were child abuse, 1 was senior abuse and 6 were other "familial". 58 Files were conclude this reporting period.

This year CBVS accompanied 58 clients for court support for a total of 326 hours, this is up from 18 clients for 125 hours previous fiscal year.

Education on Relationship Violence continues to be a major component for CBVS. 106 appointments for one hour each were scheduled for The Healthy Relationship Program (HRP). HRP is a five week program where individuals work through *the Relationship Workbook* by Kerry Moles. The workbook helps clients to identify abusive behaviors, exploring their values, evaluating their relationship, and moving forward in making good decisions. Eighteen appointments were completed on *The Impact of Domestic Violence on Infants, Children and Teens*. Each appointment is a 2 hours and consists of a video "*First Impressions, Exposure to Domestic Violence and the Child's Developing Brain*" by the Ministry of Justice, Attorney General's Office of California, followed by a Power Point Presentation developed by CBVS which addresses the following areas:

- Defining what Domestic Violence is;
- The cycle of violence and how people get caught up in it;
- Generational impact of domestic violence; and
- The impact of domestic violence on infants/children and teens.

In addition to regular educational programming CBVS provides in office, CBVS also provided information to both the Junior and Senior High classes on Healthy Relationships, a four week course for all students in grade 9 to 12 in the fall and winter semesters. A six week program was also offered to Women on *Codependency*, which started October 16, 2018.

Bail Reviews are a protocol developed in collaboration with the Williams Lake Crown Counsel, Community Corrections, CBVS, Ministry for Children and Families, Williams Lake RCMP, and Court Registry. Bail Reviews are essentially an opportunity for the Victim, of a reported criminal offence which is before the Criminal Justice System, to give input on *An Application to a Judge to Change a Condition of Bail*, which the accused has requested. This is a scheduled two hour appointment with a CBVS worker which includes education on relationship violence, safety planning and completing paperwork with the victim's input which is presented to Crown Counsel. The purpose of the Bail Review is to determine if it is in the public's best interest for conditions of Bail to be removed and/or changed and providing information to a presiding judge for determination. CBVS completed a total of 21 two hour appointments for this purpose.

The Domestic Violence Emergency Response (DVER) program is a community Protocol with the Williams Lake RCMP, Telus BC, Kenar Alarms and the Williams Lake CBVS. In efforts to keep the highest of risk domestic violent victim's safe, within their residence, the Protocol offers the ability to put a silent alarm system into the victim's residence. The alarm is activated by a remote fob. The alarms are owned by CMHA. Currently CMHA owns eight alarm panels, of which five clients utilized this program during this fiscal year.

CBVS continues to work collaboratively with community partners. The Integrated Case Assessment Team (ICAT) was developed in 2012, and it consists of community partners who work with identified highest risk clients involved in relationship violence. The committee involves the Chiwid Transition House, Stopping the Violence Outreach Worker, Stopping the Violence Counsellor, Adult Mental health, Cariboo Memorial Hospital, Ministry of Social Development, MCFD, RCMP, all the Victim Services Agencies, and Community Corrections. The purpose of ICAT is to access the highest risk victims and to do a comprehensive safety plan. We meet on a monthly basis to review safety plans and/or the status of ongoing clients. We also meet on an emergency basis when a new file is to be introduced to the team and/or a situation changes for a client who is already on the caseload of ICAT.

In 2018, Charley started her training as a Therapy Dog for CBVS. She successfully completed her Level 1 and 2 training. However, she was unable to complete her Level 3 exam and it was determined she would no longer be an ideal candidate for a therapy dog with Victim Services. As a result, Charley was retired and no longer performs and functions/duties with CBVS as of October 1, 2018.

In January, 2018, the Williams Lake Victim Services (CBVS, Aboriginal VS and RCMP VS) agencies reviewed the local protocol for Williams Lake Victim Services. Changes were made to reflect current legislation. At this time, we also included Alexis Creek RCMP VS as we recognize many of their clients are transient and often relocate back and forth between the Williams Lake policing district and Alexis Creek policing district.

Additional funding received from contractor due to the Wildfires of 2017, Tasha Reynold's, a third year Human Services student at Thompson River University was able to secure one day employment a week with CBVS starting in January 2018. This increased to 4 days a week in

September, 2018. Tasha continued to be employed by CBVS until the end of March, and then she formally resigned her position with CBVS upon the completion of her contract.

In December, 2018 a grant proposal was submitted for Domestic Violence Prevention/intervention workshops for \$30,000.00. In March, 2019, CBVS was notified we were one of 10 successful applicants for the grant and invited to North Vancouver, to meet with the Honorable Mike Farnworth, Minister of Solicitor General and Public Safety. In meeting with Mike Farnworth, we discussed the need for the grants in our respective communities, the trends we are aware of as well as it was an opportunity to share information with the other applicants. Upon attending the meeting, CBVS learned we were the only applicant north of the lower mainland, and all other applicants had received funding for their projects up to four years in a row. This is exciting to know we may be able to have this particular grant available for year(s) to come.

In January, 2019, a grant proposal was submitted for Human Trafficking Program, for \$28,000.00. In previous years, the WL Boys and Girls Club (WLBGC) had successfully held this grant. However, with changes in the administration, WLBGC wrote a letter of support for CBVS to apply for the grant and to work in collaboration with CBVS. In March, 2019, CBVS was notified we were one of the successful applicants and funding would be made available in April 2019 to hire a facilitator.

In January, Tasha and I both attended a six week condensed course on Family Law. Then in February, I attended a Youth Trauma six week condensed course. Both courses were offered through the Thompson River University Williams Lake Campus.

I continue to liaise, debrief and assist both RCMP VS and Aboriginal VS in court throughout the calendar year. Generally we try to meet informally, at least once a month for this purpose.

It has been an honor working the Staff, Management and Board of Directors at the Canadian Mental Health Association this reporting period.

Respectfully submitted,

Penny Stavast

Program Manager, CBVS

Residential and Rehab Program:

Residential and Rehabilitation Programs

The 2018/2019 year was all about settling into our new location at 113 4th Ave North for Jubilee Division programs. The change of environment was a bit of a challenge to adjust to but overall the residents have adapted well to the new location and. In September of 2018 we increased our capacity to 10 beds and added a designated Acquired Brain Injury Bed. We have made use of every inch of living space on the main floor of this building and will need to renovate if we plan to expand further. Over the course of the year we had numerous problems with trespassing in the back courtyard and theft. Security cameras and changes to the fence seem to have resolved those issues.

All secondary care, tertiary care and acquired brain injury beds have been full this year with no vacant days and a waitlist for placement. We have 1 client who is currently waitlisted for extended care and this is the only bed movement I anticipate in the near future.

The current staffing model is no longer adequate for the changing needs of this program and will need to be reassessed in the next fiscal year as the need for support and the increase in comorbidity in our resident population has increased significantly. Our activity director spends a majority of her time attending to medical appointments. Activity calendars are developed monthly at resident council meetings and usually include bingo, movie nights, and shopping outings. We continue to attempt to engage clients in physically active activities but interest is low.

The current lease with Vantage Living for the space at 113 4th Ave is up for renewal in January of 2020 and discussions have been initiated with both Vantage Living and Interior Health to secure a new contract.

ABI/SOP

The ABI program continues to grow. There were 8 new referrals over the last fiscal year with only 2 discharges. The development of the ABI bed at Jubilee House helped to alleviate some of the pressure in this program but to serve 20 clients on an 18 hour a week schedule is a tight fit. Monday drop in is one way that Alyisha is able to multi- task and tend to needs of multiple clients. We continue to advocate to IHA for an increase to the hours in this program.

The SOP program was impacted by the weather during 2018/ 2019. The smoke in the summer and the cold winter inhibited the client's ability to get out into the community. There was also staffing shortages during the

Year that led to interruptions to the program. In the spring of 2019 the decision was made to stop contract jobs in the community and change the way SOP is delivered.

Homeless Outreach

Wayne continues to have a large caseload. In addition to finding housing for and providing subsidies for multiple people, he reports approximately 300 interactions with the ministry to assist with accessing financial aid in the 2018/19 year.

The furniture donation and redistribution is also a big component of this program. There were 45 separate donation and an additional 40 redistribution appointments this year.

Wayne also does an incredible job of connecting his clients to other services in the community. His stats indicate he connected clients with alternate agencies outside of the ministry over 50 times.

Semi- Independent Living

The joint housing committee with IHA mental health was reinstated this year and I attend monthly meetings to discuss SIL subsidies as well as bed utilization for community mental health beds at Jubilee House, Glendale Place and in IHA funded family care homes. The guidelines for the SIL program were reviewed and updated.

Respectfully Submitted,

Tereena Donahue RN

Manager Residential and Rehabilitation Programs

Clubhouse

The clubhouse also had some adjustment issues getting used to the new space. We thought the lack of lighting would be the big issue of being placed in the basement but it turns out not having immediate access to a yard and temperature control has been the big challenge. It is really cold down there but if you put on a sweater and pop in you will definitely see that the clubhouse is a gem. The clubhouse is an informal setting, the coffee is always on and there is always an activity of some sort on the go but underneath the party atmosphere there is a place of safety and support for our members. The clubhouse offers a safe place for our members to drop in, socialize, get information, network, access services, and share their thoughts and ideas.

Catherine comments on a typical day at the club are as follows

The clubhouse is the “fun Place” but the focus is always on the client and their autonomy.

We all talk. We talk a lot. We discuss Health and Wellness, books, movies, budgets, finances, community resources, dispute resolutions, manners, social norms and sharing. We talk about meal management, groceries, recipes and more budgets. We talk about family, pets and doctors’ appointments.

We talk about who Brad Pitt will marry next and which share sheds we like best.

Socializing is a big deal at the clubhouse as well as on outings or day trips such as Billy Barker Days.

Within the community we socialize on Pie and coffees, the Saturday matinee, golfing and bowling.

For this fiscal year the clubhouse bus has transported clients over 2400 kms.

We celebrate ALL the occasions and even invented one called “anti-winter party”, held in the spring when we are tired of winter weather.

We also mourned two deaths this year.

It’s been a busy year and we all look forward to the next, one day at a time.

Sincerely,

Catherine Doverspike

Clubhouse Coordinator

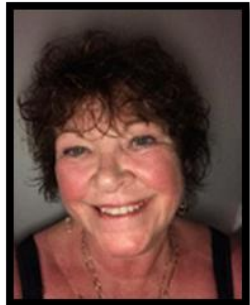
CMHA-CCB Program Managers/Supervisors:



Gay Sanders
President



Janice Breck
Executive Director



Heather Silvester
Crisis & Counselling
Program Manager



Bettina Egert
Family Solutions
Program Manager



Tereena Donahue
RN
Manager Residential &
Rehabilitation Program



Penny Stavast
Victim Services



Mike Charron
Transitional Housing
Program Manager



Wayne Lucier
Homeless Outreach

CMHA-CCB Staff:

CMHA MAIN OFFICE

- Janice Breck
- Heather Silvester
- Wayne Lucier
- Sarah Landry
- Kayla Bush
- Ashley Coleman
- Stacey Moberg
- Alyisha Knapp
- Tasha Reynolds
- Andrew Frenette
- Theresa Adams
- Dana Hamblin
- Penny Stavast
- Bettina Egert
- Leah Martin
- Marne Sellars
- Cher Sytsma

JUBILEE HOUSE

- Tereena Donahue
- Ida Knapp
- Audrey Rankin
- Fran Wells
- Amanda Shields
- Della Westwick
- Christine Hapsburg
- Glenda Johnson
- Tamara Mayoh
- Amanda Burbridge
- Catherine Doverspike
- Alyisha Knapp
- Angela Tate
- David Faubert

JUBILEE PLACE

- Mike Charron
- Theresa Adams
- Tina Rogers
- Jim Richards
- Daniela Calzavacca
- Dragan Jukic
- Rob Anderson
- Natasha Wiebe

CMHA-CCB Board of Directors:

- Gay Sanders
- Bob McNie
- Linda Goodrich
- Bev Lilloco
- Al Giddens
- Ollie Martens
- Aaron Mannella
- Peter James
- Trevor Barnes