

# BEHAVIOURAL HEALTH FOUNDATION



## ANNUAL REPORT

APRIL 1, 2023—MARCH 31, 2024



***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  
2023-2024*

Peter Kingsley, K.C. President

Sachit Mehra, Vice President

Mike Calder

Brian Chrupalo

Lori Van Dongen

Michelle Ducharme

Lexus Genik

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)

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Intake Inquiries: [ATSintake@bhf.ca](mailto:ATSintake@bhf.ca)

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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.*

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## President's Remarks

*The Behavioural Health Foundation has a long history in Manitoba, and I am proud to have been part of it. Like any community, our history includes some moments of deep pride – the Grand Entry at our first Traditional powwow for instance or becoming the first treatment program in Canada to earn international accreditation. And there have also been times of worry and sadness, including losing former members to overdose or other tragic circumstances.*

*Every year, several hundred people join our Therapeutic Community, prompted by a desire to get help and to help others; and every year, of course, people also leave BHF. In between those notable moments, people carry on with crucial work of making this a safe and respectful place for everyday living, a place where everyone can learn, everyone can contribute, everyone can grow.*

*I would like to acknowledge some milestone moments of this past year. After many years at Lac Du Bonnet, the North Winds Sundance was held on beautiful new grounds in Teulon, MB in August 2023. We hosted a well-attended running event, Sean's Gallop for BHF in September 2023. Fifteen adult members celebrated their "one year" of achievements in the treatment program. Thirty people gained off-site employment while opting to continue living at BHF. Six newborn babies brought much delight to the community this past year. Work to restore the areas of the main building that had been damaged by a fire in 2022 was finally concluded this spring. Several new staff joined our team, and some key staff moved on to other challenges – most notably Marla Somersall who had been our Executive Director since June 2021. I would like to express my thanks to Marla for the work she did here, and for her expression of continued support for BHF.*

*The past year also saw some changes on the BHF Board of Directors. We were very pleased to have Brian Chrupalo, Kaitlynd Walker and Elder Mike Calder join the Board. We said good-bye and thank you most sincerely to Karen Beaudoin, Marian Deegan, Naureen Punjani, and Sean Gallop. For me personally, this will be my last time to present BHF's Annual Report to the public. Serving on a volunteer Board is challenging and time consuming, though certainly rewarding in many ways as well. After many years, it is time for me to wish my fellow Board members, BHF staff, and especially, BHF resident members well, and to entrust them with the task of leading and supporting an organization that I truly value.*

*As the BHF Philosophy says, "we must work and concentrate for today with a vision of tomorrow." I know everyone at BHF will continue to do that; I am confident that the outcome of that hard work will continue to be evident in the health and success of those who choose to be a part of the BHF community in the years to come. Thank you for your past contributions; best wishes for the future.*

*Peter Kingsley, K.C.  
President, BHF Board of Directors*





*53 Years in Manitoba*

**New &  
Noteworthy**



### *Early Years & School Age Classroom Garden*

With help from the Traditional Crew, the classrooms while working on a “Living Things” unit, purchased soil, plants and supplies to begin their garden. They planted lavender, rosemary, thyme, sage, oregano, parsley, lemon balm, peppermint, cedar, onion, tomato, pumpkin, watermelon, cucumber, squash, strawberry, celery, lettuce, and pepper. While they learned about plants, they participated in weeding, watering, and plant care. Thank you to all the teachers and volunteers who helped make this invaluable hands-on experience possible.



### *Upgraded Laundry Facilities*

## **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 .**





**BEHAVIOURAL  
HEALTH  
FOUNDATION**

## **Finances & Acknowledgements**

**BHF is thankful for the financial support from many private donors  
as well as the following during the fiscal year 2023-2024:**

**All Charities Campaign, Province of Manitoba**

**Canada Summer Jobs**

**Early Learning and Child Care**

**Jewish Foundation of Manitoba**

**Manitoba Education and Early Learning**

**Manitoba Families**

**Manitoba Mental Health and Community Wellness**

**Running Room**

**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 70 days.*
- 52% of adults who exited completed primary treatment.*
- 89% of adults were free from substance use and 100% reduced their substance use at exit from the program.*
- 15% of adults were employed or in another productive role upon exit.*
- 100% of adults had no new criminal justice system involvement during their treatment stay.*
- 12% of adults attended education during their treatment stay.*
- 29% of adults exited into stable or transitional housing.*

## Breezy Point

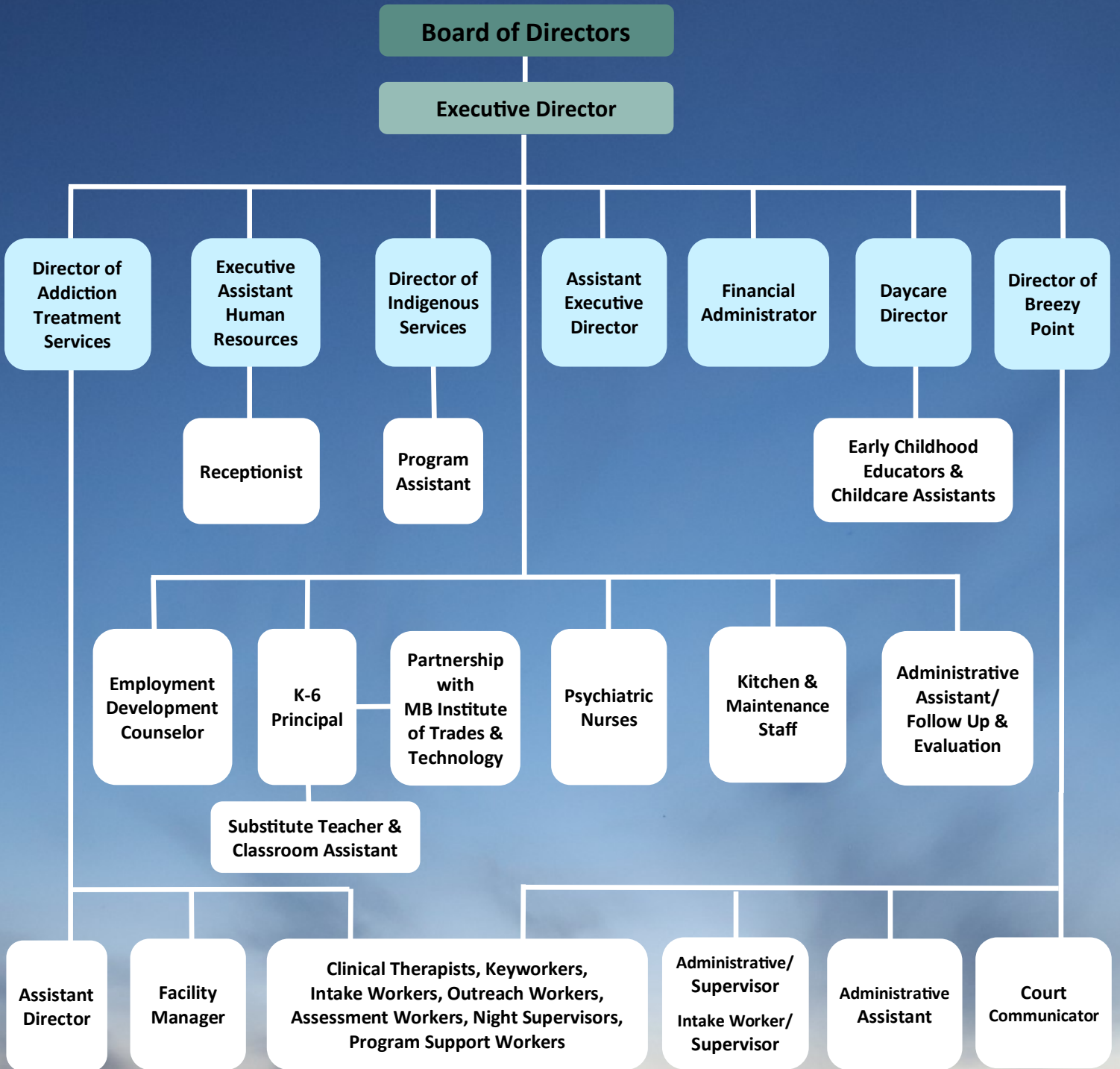
- The average length of stay of women who exited in the fiscal year was 73 days.*
- 53% of women who exited completed primary treatment.*
- 97% of women were free from substance use and 100% reduced their substance use at exit from the program.*
- 17% of women were employed or in another productive role upon exit.*
- 100% of women had no new criminal justice system involvement during their treatment stay.*
- 32% 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.*





# Organizational Chart, 2023-2024



Represents Senior Management

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# Management, 2023-2024





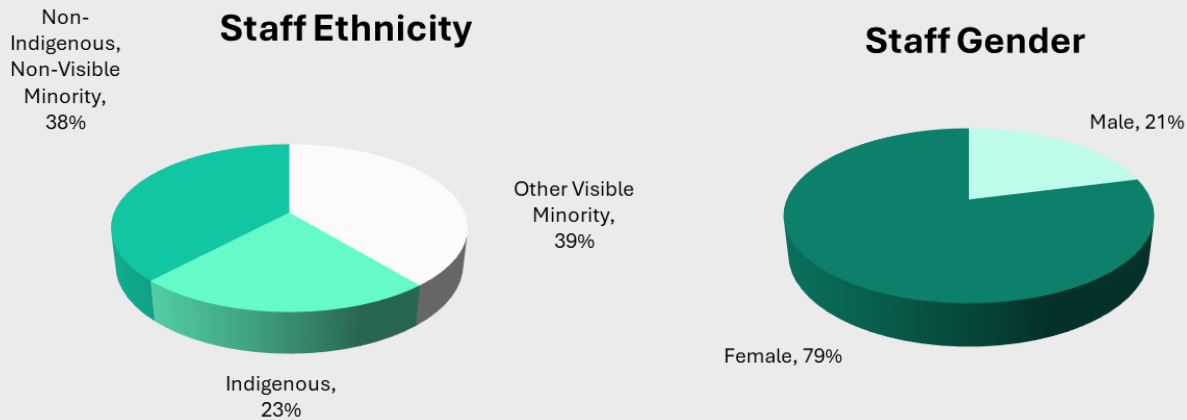
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# Staffing

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 70 staff; 51 were full time and 19 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
- Crisis Prevention Intervention
- Critical Incident Debriefing
- FASD Training
- Fire Extinguisher Training
- Fire Panel Training
- First Aid/CPR/Defibrillator Training
- Individual Treatment Plan Development
- Medication Management
- Mental Health Disorders
- Motivational Interviewing
- Naloxone/Overdose Training
- New Hire Training/Orientation
- Power Outages
- Staff Code of Ethics, Professional Conduct
- Suicide/Self-Harm Prevention & Intervention
- Therapeutic Community Training
- WHMIS
- Workplace Threats



# Programs & Services

## 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.



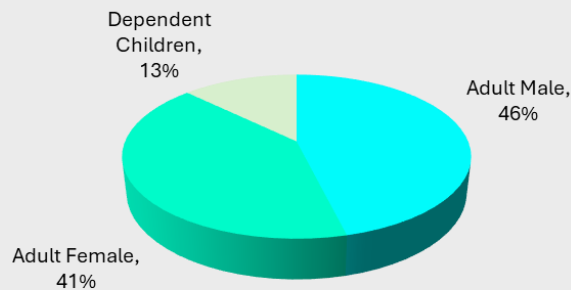


## Intake and Days Care

### Total Intakes BHF Programs 2023-2024

|                            |            |
|----------------------------|------------|
| Adult Males <sup>1</sup>   | 173        |
| Adult Females <sup>1</sup> | 154        |
| Dependent Children         | 48         |
| <b>Total Intakes</b>       | <b>375</b> |

### Total Intake in all Programs



### Days of Care Provided

|                                    |               |
|------------------------------------|---------------|
| Adults                             | 22,167        |
| Dependent Children                 | 4,790         |
| <b>Total Days of Care Provided</b> | <b>26,957</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. The collaboration has resulted in many clients completing the shorter-term AFM program prior to entering longer term treatment at BHF. Persons on the wait list can attend BHF outreach groups prior to entering BHF, which helps them become familiarized with BHF and more prepared for the program.

Over the fiscal year, BHF Intake/Outreach staff received 1624 calls, had 447 outreach client visits at RPC, and presented at 106 speaking engagements. Twenty Outreach/Grad groups were held at RPC for members of BHF.

<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 their personal information.

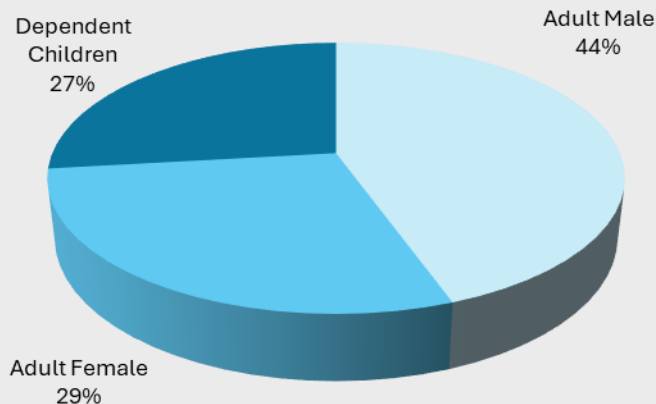


The Behavioural Health Foundation Addiction Treatment Services is internationally accredited. The bed-based addictions and co-occurring mental health treatment facility accommodates adults and dependent children. Members are housed in the main building, located in the community of St. Norbert, as well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

## Referrals & Wait List

A total of 1,636 referrals of adults and dependent children were made to the Addictions Treatment Services program in the 2023-2024 fiscal year. These referrals consisted of 728 men, 469 women, and 439 children. For referrals who were admitted into the program, the average time spent on the waiting list was 29 days.

### Addiction Treatment Services Referrals

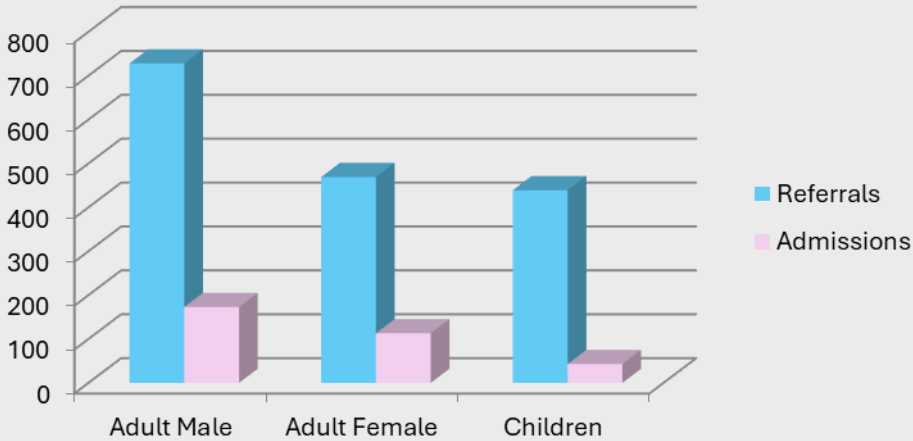


There are numerous reasons that referrals did not enter the program. Applicants

- experienced long waiting periods decided to seek other treatment or had changed their mind about attending treatment when bed space became available.
- were not eligible for the program due to histories of sexual offence, arson, other serious offences, active gang involvement, or the client being deemed a flight risk.
- could not navigate the program due to serious and persistent health/mental health or mobility concerns.
- had a previous history of poor program performance.
- presented as not having addiction issues.

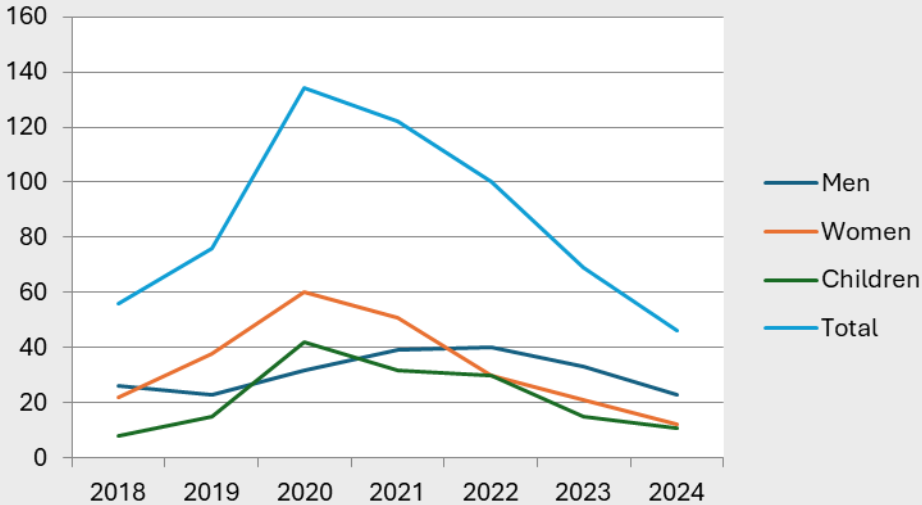


## Referrals vs. Admissions

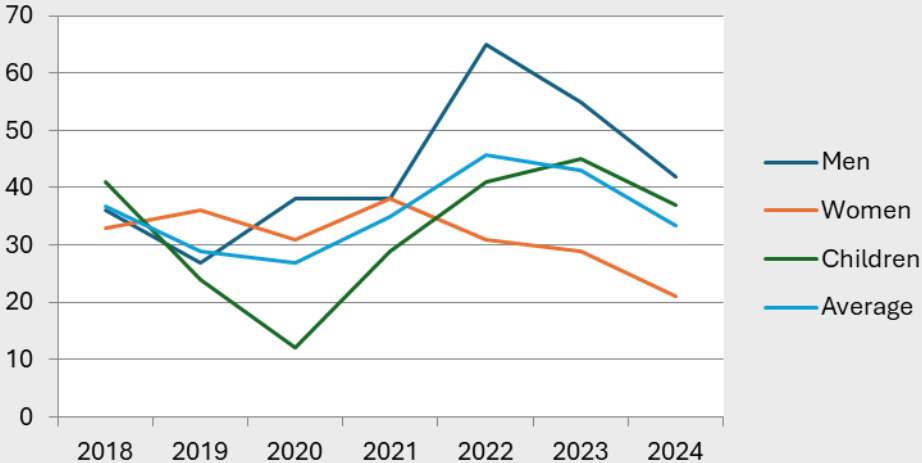


## Waiting List Statistics: a 7-Year Comparison

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



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

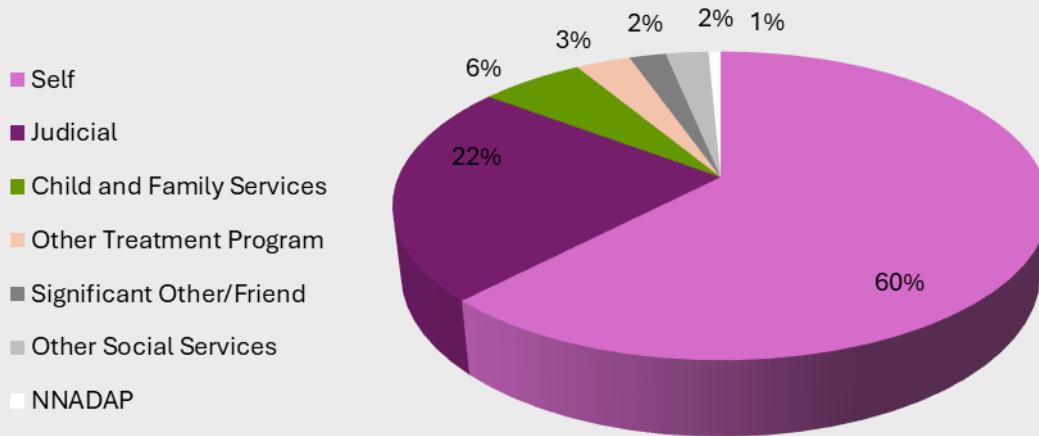


# Client Detail, Addiction Treatment Services

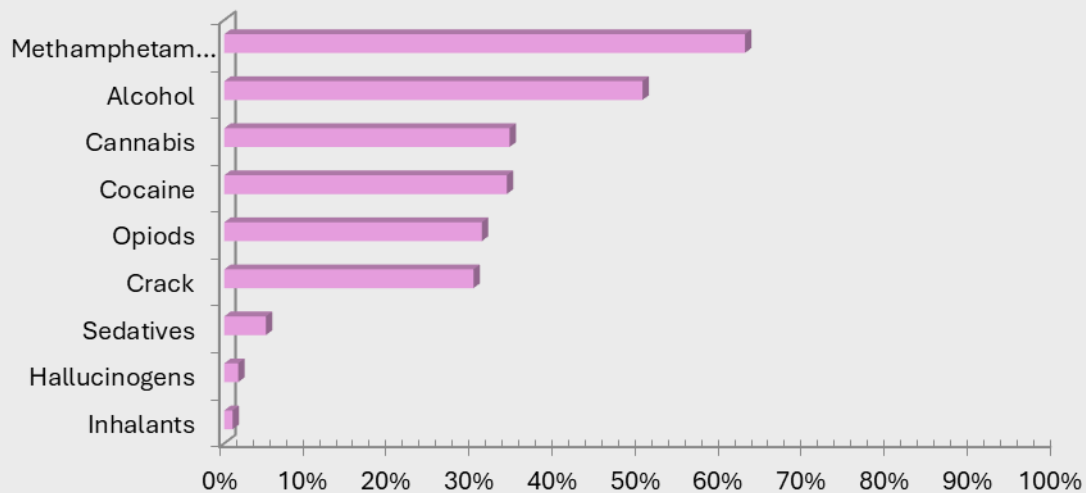
|  |            |  |                  |
|--|------------|--|------------------|
| <b>Total Intakes, Addiction Treatment Services</b> |            | <b>Average Age</b>                           | <b>35</b>        |
| <b>Adult Males</b>                                 | <b>173</b> | <b>Age Range</b>                             | <b>20-71</b>     |
| <b>Adult Females</b>                               | <b>113</b> | <b>Average Length of Stay*</b>               | <b>62 days</b>   |
| <b>Total Adults Admitted to Program</b>            | <b>286</b> | <b>Completed Primary Treatment (30 days)</b> | <b>148 (52%)</b> |
| <b>Children of Members</b>                         | <b>36</b>  | <b>Stayed over 90 days</b>                   | <b>63 (22%)</b>  |
| <b>Total Intakes</b>                               | <b>319</b> |  |                  |

\* Twenty clients who entered during the 2023-2024 fiscal year remain in the program at the time of this report. These figures will increase until all clients exit the program.

## Intake Referral Sources



## Most Frequently Used Substances





## Children of Members (Addiction Treatment Services)

During the 2023-2024 fiscal year, 43 children came to live at BHF Addiction Treatment Services program while their parents participated in treatment. At entry, 17 (40%) children were in agency care. The average length of stay of children was 96 days. The average will increase until all children who entered over the fiscal year exit the program. Seven (16%) children had regular visitation with their parents at BHF prior to moving in. Of the 17 children who entered BHF in the care of Child & Family Services, 12 (71%), 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, 2022 to March 31, 2023. The fiscal 2023-2024 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 2025.

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 2022-2023 study.

### Substance Use Reduction

Of the 52 members located and interviewed 6 months after completion of primary treatment, 37 (71%) significantly reduced their use of substances. The average reduction of substance use was 15.2 points on the World Health Organization's ASSIST Scale, equating to the reduction of two substances used on a daily basis.

### Criminal Justice System Involvement

Sixty-one percent of all members who entered in the 2022-2023 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, 88% of located clients reported having no new involvement with the law.

### Employment

Upon entry, 94% of clients were unemployed. Only 6% 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, 60% of the clients located had become involved in these successful pursuits, a significant increase.

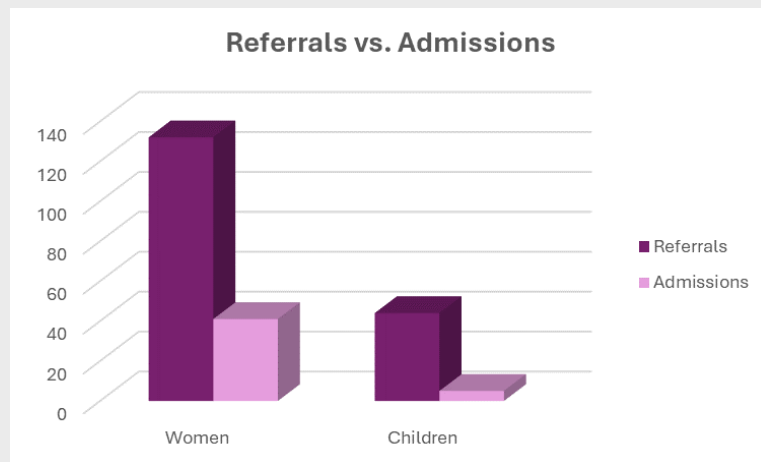
### Education

In this reporting period, 18 members took advantage of the on-site Adult Education Centre. Five of the 57 (9%) 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. Many of these clients 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 who may have children up to the age of 4. 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 offering 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.

## Referrals & Wait List



| Wait List  | 2021-2022 | 2022-2023 | 2023-2024 |
|--|-----------|-----------|-----------|
| Average Days on Wait List for Women who Entered      | 39        | 29        | 25        |
| Average Days on Wait List for Children who Entered   | 15        | 11        | 1         |
| Average Number of Women on Wait List at Month end    | 22        | 19        | 10        |
| Average Number of Children on Wait List at Month End | 4         | 3         | 3         |

## Client Detail

|                                      |          |
|--------------------------------------|----------|
| Average Age of Women                 | 32       |
| Age Range                            | 22-60    |
| Average Length of Stay in Treatment* | 78 days  |
| Completed Primary Treatment          | 22 (54%) |
| Women who stayed over 90 days        | 12 (29%) |

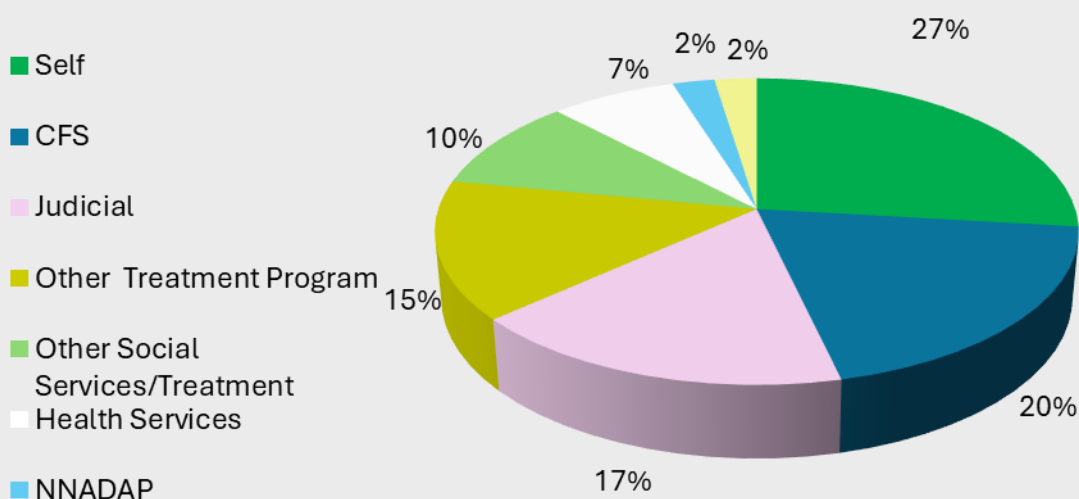
*\*Five members who entered during the 2023-2024 fiscal year remain in the program at the time of this report. This number will increase until they exit the program.*



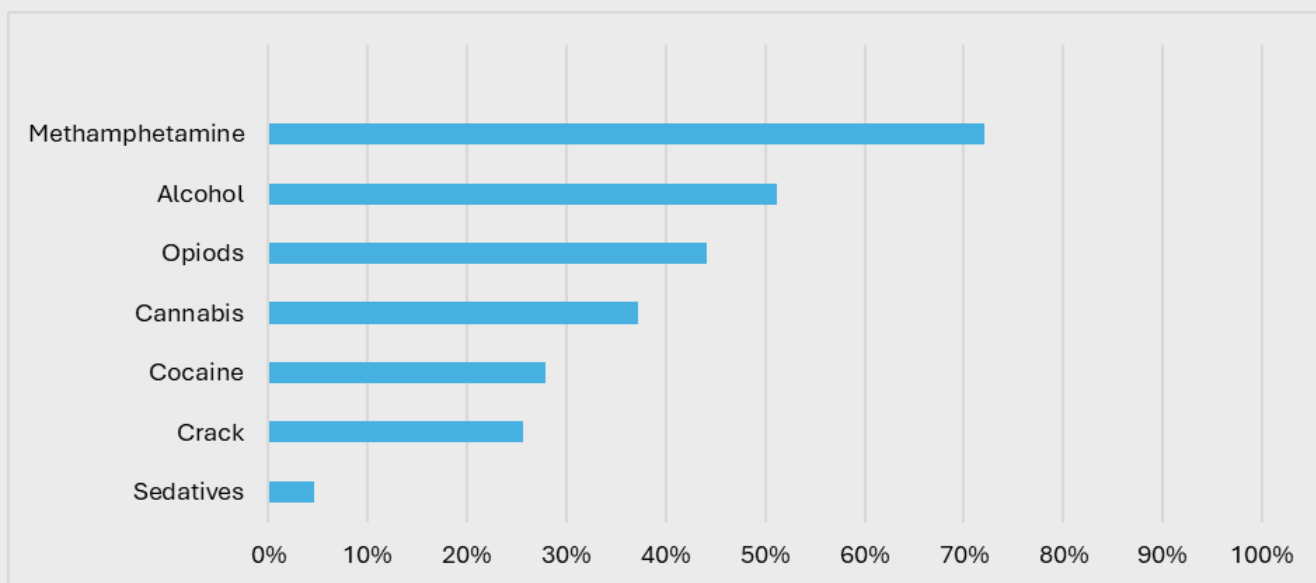
There were 41 intakes at Breezy Point during the 2023-2024 fiscal year. Referral sources included self, judicial, mental health services, other treatment programs including transfers from BHF’s Addiction Treatment Services program, and Child and Family Services. Thirty-nine (61%) of these women were from the City of Winnipeg, 16 (39%) were from elsewhere in Manitoba. Thirty-three women (80%) were Indigenous.

Twenty-five (61%) of the 41 women were mothers whose children were either in CFS care or the care of extended family. The total number of children among this population was 60, an average of 2.4 children per mother. Four (10%) of the intakes were pregnant women. Thirty-nine (95%) of the women who entered Breezy Point were unemployed at entry. At the time of this report, 5 of the women who entered in the last fiscal year remain in the program. The facility also housed 5 children over the fiscal year.

### Breezy Point Referral Sources



### Most Frequently Used Substances



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## 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, 2022 to March 31, 2023. The fiscal 2023-2024 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 2025.

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 2022-2023 study.

### Substance Use Reduction

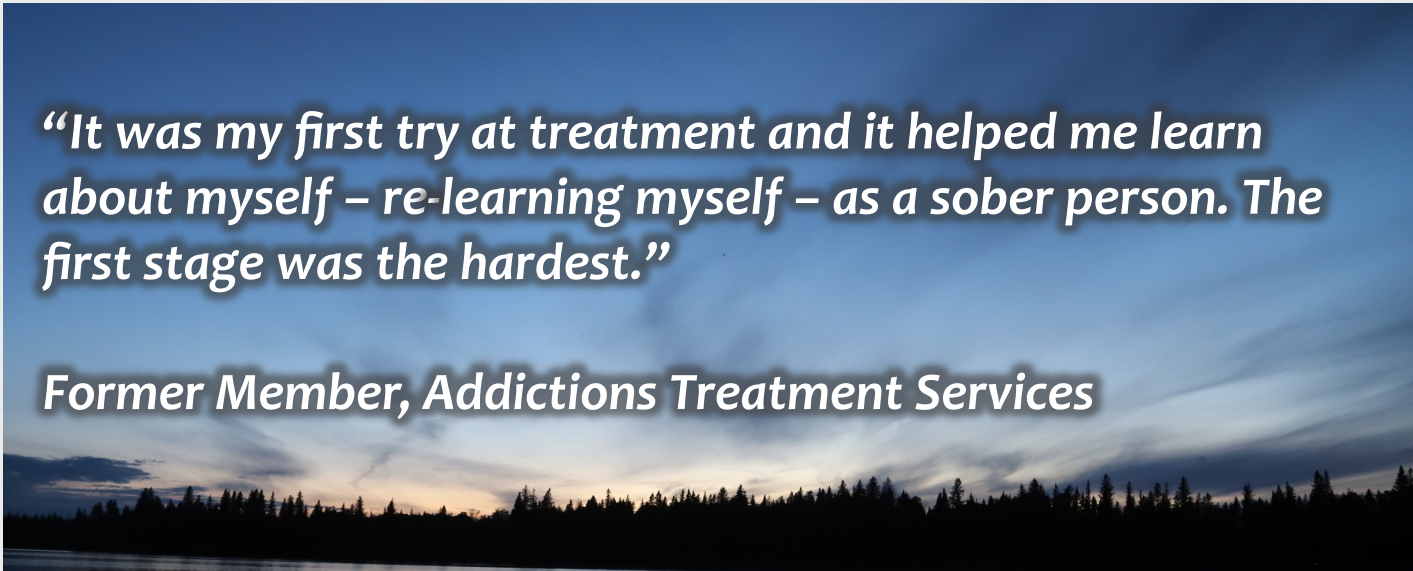
Of the 13 women located and interviewed 6 months after completion of primary treatment, 11 (85%) significantly reduced their use of substances. The average reduction of substance use was 14.6 points on the World Health Organization's ASSIST Scale.

### Criminal Justice System Involvement

Twenty-six (45%) of all members who entered in the 2022-2023 fiscal year had involvement with the Criminal Justice System. They were on bail or probation. At the time of follow-up, 11 (85%) of located women had no new involvement with the law.

### Employment & Education

Upon entry to the program, only 3 (5%) of the women had employment or were homemaking full time. Of the 13 women who were located 6 months after completion of primary treatment, 8 (62%) were involved in successful pursuits of working, homemaking, or attending education full time.



*“It was my first try at treatment and it helped me learn about myself – re-learning myself – as a sober person. The first stage was the hardest.”*

*Former Member, Addictions Treatment Services*



The Behavioural Health Foundation'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.

There were 13 full moon ceremonies and a total of 128 women and 20 children (current, past and community members). In this year, the Director of Indigenous Services, Angela Antoine, passed the full moon teachings onto Kassia Woodhouse who is a program graduate, now a keyworker in training, and now ceremony provider.



There were 68 sweats and they were attended by 805 current, past and community members, including children. Two hundred and four current members, including children, attended the North Winds Lodge to smudge. Two hundred and forty-seven current members of Addiction Treatment Services and Breezy Point attended North Winds to participate in drumming which included children. Thirty members attended to bead. One hundred and three members of both ATS and BP participated in cleaning sage and 105 participated in harvesting and cleaning sweetgrass. Thirty members of ATS and BP participated in harvesting and cleaning cedar and thirty-eight participated in making tobacco ties.

*"I'm maintaining my sobriety. Everything I learned in the program, I put to use. Tools I got from Traditional help me get over stuff that is negative. We are parenting full time and living as a family."*

*-Former Member, Addictions Treatment Services*

## Therapy, Assessments & Consultations



*Elliot, therapy dog.*

The majority of adults entering BHF are affected by significant past trauma. In the 2023-2024 fiscal year, this was reported by 218 of 327 (67%) adult Intakes. New 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. Two hundred and forty (73%) reported these concerns. This helps to inform individual treatment plans as well as safety plans when needed.

Mental health services at BHF may include access to auricular acupuncture, meditation groups, therapy dog visits through St. John Ambulance, Grief and Loss Groups, and individual, couples, or family therapy. BHF's Clinical Therapists provide consultation and training to treatment staff, participate in crisis management, and collaborate with agencies to support residents with complex mental health needs.

## Medical

People seeking treatment at BHF are often impacted by unmet needs in terms of both physical and mental health. BHF nurses work to provide direct help or to connect members to other resources. They monitor medication and assist residents and treatment staff in setting appropriate goals around mental and physical health.

BHF is fortunate to have a collaborative partnership with Access Fort Garry, including an onsite weekly clinic and a good referral system for those individuals who have not had a primary care provider prior to entry. 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 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.



Support Services are an array of 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

BHF has a long-standing partnership with the Manitoba Institute of Trades and Technologies (MITT) to operate the St. Norbert Adult Education Centre on-site at BHF, providing a supportive and welcoming environment for diverse adult learners. The student body is a mix of BHF residents and adults from the surrounding communities. People 18 years of age and older may work toward a Mature Student High School Diploma or upgrade credits in preparation for post-secondary education. Classes are scheduled Monday – Thursday in morning, afternoon, or evening blocks; students may register full-time or part-time. Sixteen students graduated in June 2024, six of whom were BHF members.

## BHF K—6 School

BHF's Kindergarten – Grade Six program is funded through Manitoba Education and Early Learning as an Independent School with one certified Teacher/Principal and two Education Assistants. The program focusses on students' individual needs and strengths, and on creating a positive school experience for every child. Unique features of this program include access to on-site Indigenous teachings and ceremony, close collaboration with BHF Daycare, and a respectful connection between parents and school. Twenty children were enrolled in the classroom over the 2023 – 2024 school year, with lengths of stay varying from less than one week, to eight months. The Teacher/ Principal also assisted parents in setting up on-going education supports for their children as part of exit planning.

## BHF Daycare

On-site licensed childcare is a unique support for families in treatment. Early Childhood Educators and Child Care Assistants work with parents and the Therapeutic Community as a whole to provide a safe and developmentally appropriate environment and to foster a positive sense of family and cultural identity. All parents volunteer at the daycare for at least one week, providing an opportunity for staff and parents to learn from one another. BHF Daycare is licensed for 4 infants, 8 preschoolers, and 12 school age children. In the fiscal year 2023 – 2024, forty-nine children were enrolled in the daycare with lengths of stay varying from a few days to twelve months. BHF gratefully acknowledges Manitoba Education and Early Learning whose individualized funding arrangement makes the provision of on-site care possible.



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## Employment Development

Employability is an important part of wholistic treatment. The majority of adults in treatment were unemployed at entry and face numerous challenges in preparing to gain employment. Barriers include interrupted or incomplete education, poor or non-existent employment histories, repeated experiences of discrimination, and diminished self-confidence. Further barriers include lack of ID, dependence on payday lenders, and lack of funds for work-related needs such as bus pass, tools, work boots or safety equipment.

BHF is fortunate to network with other agencies in addressing these barriers. BHF's Employment Development Counsellor assists program members in applying for birth certificates through SEED Winnipeg's Access to ID fund, and in setting up bank accounts through Assiniboine Credit Union's Financial Access Program. As a Canada Revenue Agency Community Volunteer Income Tax (CVITP) site, BHF is able to assist members in filing tax returns which in turn allows them to apply for federal benefits. BHF's Employment Development Counsellor assists members to enter or re-enter the paid work force at whatever point makes sense in their individual treatment plan. In the fiscal year 2023- 2024, seventy-eight adults enrolled in this programming. Thirty of those participants secured employment prior to exiting treatment, while a further thirty became "employment ready", having identified employment goals and transferable skills, prepared their resumes, discussed job search strategies, and learned about workplace rights and responsibilities.

***"I'm glad I humbled myself to ask for help getting off drugs. I was heavily addicted to fentanyl. I still use tools that I learned at BHF. Relapse was always a big issue for me but now I am sober and doing really well, working and close with my family"***

***-Former Member,  
Addiction Treatment Services***



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## Food Services

The BHF kitchen is a vital part of the organization. Kitchen staff ensure meals are nutritious, well-prepared and on time. They supervise Addiction Treatment Services members on the kitchen crew, teaching safe food handling practices, operation and care of kitchen equipment, food preparation and food service. Over the course of a year, the staff and crew produce thousands of meals, snacks, and refreshments for special events. Under the supervision of the BHF Chef, crew members may earn their provincially recognized Food Handler Certificate, preparing them to seek work in any food service establishment. Program graduates often comment that experience in the BHF kitchen provided valuable experience and solid training for future employment.



## Maintenance

BHF's numerous buildings and expansive grounds make possible the breadth of activities and services that contribute to truly wholistic programming. Throughout 2023 – 2024, the Director of Maintenance and his helpers continued to address issues and complications related to a serious fire that had occurred in the rear annex of the main building in August 2022.

At the same time of course, all the usual tasks of keeping the grounds, vehicles, machinery and buildings in good repair, continued. Amongst these, two notable accomplishments during the year were the installation of several new windows at the on-site St. Norbert Adult Education Centre, and the long-awaited replacement of the motor on the food service elevator.

*"I learned a lot from my "In Charge" role in laundry. The traditional program was also very helpful to me".*

*-Former Member,  
Addiction Treatment Services*

**BEHAVIOURAL HEALTH FOUNDATION INC.**  
**SUMMARY STATEMENT OF FINANCIAL POSITION**  
**MARCH 31, 2024**

The following is a summary of the financial position of the Foundation as at March 31, 2024. Audited financial statements are available upon request.

|   | <b>2024</b>         | <b>2023</b>         |
|---|---------------------|---------------------|
| <b>ASSETS</b>   |                     |                     |
| Current assets:   |                     |                     |
| Cash  | \$ 60,847           | \$ 728,989          |
| Accounts receivable                                     | 418,338             | 493,050             |
| Prepaid expenses and other assets                       | <u>120,108</u>      | <u>110,091</u>      |
|   | 599,293             | 1,332,130           |
| Capital assets  | 1,189,581           | 1,245,031           |
| Restricted cash – replacement reserve funds             | 47,847              | 27,847              |
| Marketable securities – general operations              | 1,143,937           | 365,681             |
| Marketable securities – stabilization reserve fund      | <u>1,687,560</u>    | <u>1,523,518</u>    |
|   | <u>\$ 4,668,218</u> | <u>\$ 4,494,207</u> |
| <b>LIABILITIES</b>                                      |                     |                     |
| Current liabilities:                                    |                     |                     |
| Accounts payable and accrued liabilities                | \$ 348,791          | \$ 221,072          |
| Current portion of long-term debt                       | <u>40,800</u>       | <u>37,000</u>       |
|   | 389,591             | 258,072             |
| Long-term debt  | 1,152               | 41,649              |
| Deferred contributions                                  | 10,000              | 10,000              |
| Deferred capital contributions                          | <u>18,148</u>       | <u>20,436</u>       |
|   | 418,891             | 330,157             |
| <b>NET ASSETS</b>                                       |                     |                     |
| Invested in capital assets                              | 1,129,481           | 1,145,946           |
| Internally restricted – stabilization reserve           | 1,687,560           | 1,523,518           |
| Internally restricted – repairs and maintenance reserve | 20,000              | 40,000              |
| Externally restricted                                   | 47,847              | 27,847              |
| Unrestricted  | <u>1,364,439</u>    | <u>1,426,739</u>    |
|   | <u>4,249,327</u>    | <u>4,164,050</u>    |
|   | <u>\$ 4,668,218</u> | <u>\$ 4,494,207</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, 2024**

The following is a summary of the Foundation's operations for the year ended March 31, 2024. Audited financial statements are available upon request.

|  | <b>2024</b>             | <b>2023</b>              |
|--|-------------------------|--------------------------|
| <b>Revenues</b>  |                         |                          |
| Fees for services  | \$ 653,136              | \$ 758,954               |
| Grants   | 3,888,788               | 3,645,802                |
| Donations  | 11,206                  | 13,413                   |
| Net investment income  | 173,768                 | 44,412                   |
| Other  | 484,350                 | 434,044                  |
| Fire insurance proceeds  | 24,117                  | 30,000                   |
| Gain on disposal of capital assets                               | <u>-</u>                | <u>17,213</u>            |
| <b>Total revenues</b>  | <b>5,235,365</b>        | <b>4,943,838</b>         |
| <b>Expenses</b>  |                         |                          |
| Salaries and benefits  | 2,734,255               | 2,528,609                |
| Shelter  | 668,838                 | 608,285                  |
| Care   | 1,435,761               | 1,612,896                |
| Administration   | <u>311,234</u>          | <u>201,883</u>           |
| <b>Total expenses</b>  | <b>5,150,088</b>        | <b>4,951,673</b>         |
| <b>Excess (deficiency) of revenue over expenses for the year</b> | <b><u>\$ 85,277</u></b> | <b><u>\$ (7,835)</u></b> |

(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 2021 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?

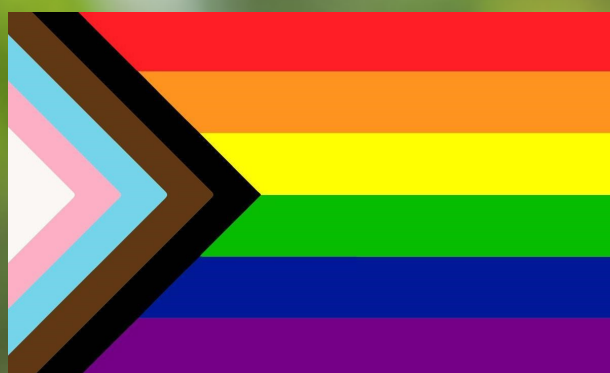
After an organization applies for accreditation of its services or programs, CARF sends professionals in the field to conduct an on-site survey to determine the degree to which the organization meets the standards. CARF surveyors also consult with staff members and offer suggestions for improving the 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.**

**“I got custody of my kids. I’m drug and alcohol free, and my charges are in the past. My cultural involvement at ATS is ongoing and regular. I’ve developed a positive relationship with my partner and family.”**

**“BHF is a building block if you’re new to recovery to re-establish yourself. I’ve been drug and alcohol free since I left BHF and I still attend sweats.”**

**“The program worked perfect for our family. We entered transitional housing after exiting ATS, sober, and reunited with our other kids and worked on just being a family again”**



**“I have a routine, I wake up every morning now. I have plans for the future. My life is on track. Emotions when you’re coming off drugs can be very difficult and staff were helpful and understanding.”**

**My style of communication has changed. I’m forward thinking and my thoughts are organized. The program was beneficial in a multitude of ways. There are various ways to be hopeful.**

**I’ve been clean for one year now. My kids all live with me. My kids are doing much better.**

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