

CANADIAN MENTAL HEALTH ASSOCIATION, ONTARIO

**CANADIAN
MENTAL
HEALTH
ASSOCIATION,
ONTARIO**

**2003/2004
ANNUAL
REPORT**



CANADIAN MENTAL
HEALTH ASSOCIATION, ONTARIO
L'ASSOCIATION CANADIENNE
POUR LA SANTÉ MENTALE, ONTARIO

WWW.ONTARIO.CMHA.CA

Honorary Patron



THE LIEUTENANT GOVERNOR OF ONTARIO
LA LIEUTENANTE GOUVERNEURE DE L'ONTARIO

June 2004



As Honorary Patron of the Canadian Mental Health Association, Ontario, I am happy to extend greetings to staff, volunteers and sponsors on the occasion of your Annual General Meeting and publication of your Annual Report.

The important work that CMHA, Ontario, provides to the community illustrates your commitment to the mental health and well being of all Ontarians. This includes partnerships like Mental Health Tune Up and Making Gains in Addiction and Mental Health, initiatives in the area of education and knowledge transfer, and advocacy in support of people with mental illness, their families, and loved ones.

Mental illness has a direct impact on one in five Ontarians and indirectly on the remaining four who are family members, friends, and co-workers. CMHA, Ontario, together with partners, decision makers, and those in the community, is working to raise awareness about mental health and to reduce the stigma and discrimination that too often accompanies mental illness.

Please accept my sincere congratulations on all you have achieved in 2003-2004 and best wishes for the year to come.

James K. Bartleman

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MESSAGE FROM THE PRESIDENT AND THE CEO

During the recent provincial election, the Canadian Mental Health Association, Ontario, the 33 CMHA branches across the province, their local and provincial partners, and many, many clients, family members, staff and volunteers worked tirelessly to get the message out to candidates that the mental health of Ontario's citizens matters. Those of us who closely watch the fortunes of mental health, as an election topic and as it is covered by the media, noticed a substantial increase in coverage for our issues before, during, and after the election. Many CMHA branches in their local communities also sought and obtained the support of their city councils and, provincially, the Ontario Association of Chiefs of Police passed a resolution demanding investment in community mental health services. We continue to work as a team, even though the election is over, because our message is vital and can never be heard too often by decision-makers and the public at large.

The election of a new Ontario government has brought renewed hope for an investment in community mental health services, self help and family supports. The Minister of Health and Long-Term Care, George Smitherman, released nine regional Mental Health Implementation Task Force reports shortly after he took office. These reports offered almost 1000 recommendations for the improvement of the mental health system in Ontario, accompanied by a call for substantial investment.

Our website (www.ontario.cmha.ca) continues to grow as a trusted source of mental health information. A new design features soothing colours and graphics, seasonal visuals, and increased searchability. As with last year, we are experiencing an ever-upward trend in visitors, peaking in October 2003 with almost 18,000 visitors and 111,831 page views. These traffic figures represent a 124% increase over October 2002. The Internet continues to grow in strength as a communication tool. Canadians, in particular, turn to the web for their health information.

Mental Health Works (www.mentalhealthworks.ca), a project of CMHA, Ontario, launched this past year as a newly minted business unit. This project offers training, information and materials to businesses interested in effectively managing employees with mental health problems in their workplaces. It helps employers and employees understand the signs and symptoms of mental illness and offers information on early return to work and complex accommodation. Businesses have welcomed Mental Health Works with open arms.

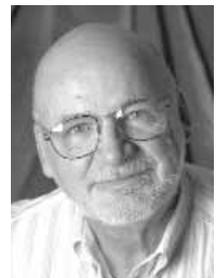
Mental Health Tune Up, a resource fair open to the public and planned in partnership with the Ontario

Psychological Association, was held in May 2003 in the Barbara Frum Atrium of the CBC building in downtown Toronto. Approximately 2000 people attended the two-day event, and a standing-room-only audience was on hand to hear Andy Barrie, of CBC Radio One, host the opening ceremonies and applaud the Mental Health Champion Award recipient, the Honourable Michael Wilson. Keynote speaker was Ellie Teshler of the Toronto Star.

The year presented many opportunities for the board of directors of CMHA, Ontario to step forward and take a leadership role in advocacy for people with mental illness and their families. The President's Network and the Provincial Branch Forums continue to provide important feedback for the work carried out by the Provincial Office, as the environment in which we operate changes at an ever-increasing pace. In the past year, the Branch Forum engaged in lively discussion related to the provincial election as well as forming the Public Issues Workgroup to provide ongoing advice and direction on government and public relations issues.

The board provided support as both volunteers and participants in the Making Gains 2003 conference held in Niagara Falls in October 2003, along with our partners, the Ontario Federation of Community Mental Health and Addiction Programs, the Centre for Addiction and Mental Health and the Alcohol and Drug Recovery Association of Ontario. This conference was one of the best ever and set the stage for an even bigger and better conference in October 2004.

At CMHA, Ontario, we help people every day. With the ongoing fiscal pressures on health care in our province, the generous participation of our donors means more to people with mental illness and their families than ever. We want to thank our donors from the bottom of our hearts for your continuing support because, without you, we wouldn't be there to help.



NEIL MCGREGOR
PRESIDENT



BARBARA EVERETT, PH.D.
CHIEF EXECUTIVE OFFICER

Neil McGregor Barbara Everett

NEIL MCGREGOR
PRESIDENT
BOARD OF DIRECTORS
CMHA, ONTARIO

BARBARA EVERETT, PH.D.
CHIEF EXECUTIVE OFFICER

MAKING GAINS 2003

Making Gains



In Mental Health & Addictions

Research, recovery and renewal was the theme of the Making Gains conference that took place in Niagara Falls from September 28 to October 1, 2003. CMHA, Ontario, in partnership with the Centre for Addiction and Mental Health, the Ontario Federation of Community Mental Health and Addiction Programs and the Alcohol and Drug Recovery Association of Ontario, hosted the sold-out event for over 350 participants.

The conference had six streams: Addictions; Dual Diagnosis; Organizational Strategies in Times of Change; Recovery; Evidence-Based Practices in Mental Health and Addictions; and Concurrent Disorders. The opening panel highlighted the research of the participants in the Community Mental Health Evaluation Initiative, which has provided evidence-based support for the value of community mental health services.

Conference highlights included the participation of the Honourable James Bartleman, Lieutenant Governor of Ontario, and Senator Michael Kirby, who represented the views of the Standing Senate Committee on Social Affairs, Science and Technology on the issue of mental health in Canada. At next year's conference, Senator Kirby will update attendees on the progress of the committee meetings.

Planning for Making Gains 2004, to take place in Toronto in October 2004, is well underway. Information is available at www.makinggains.ca.

FUND DEVELOPMENT

Today it seems that people are giving to more than one charitable organization and they are more aware than ever of who they want to give to and how they want to give.

Mental illness often does not get the attention it should because of the stigma that goes along with it. But at CMHA, Ontario, we are not deterred. As a matter of fact, we feel that there is an increased reason to give. Challenges to mental health affect all Canadians. Health Canada recently estimated that 20% of us will have a mental illness and the remaining 80% will be indirectly affected by its impact upon a family member, friend or colleague. Whose life has not been touched in some way?

That's why we offer you an opportunity to invest in your own mental health. CMHA, Ontario prides itself on providing comprehensive and up-to-date information.

Our goal at CMHA, Ontario is to be the primary source of information about mental health, mental illness, and policy in Ontario and to be a compassionate place to turn when people are in need of help for themselves, a friend or a loved one. Without the financial support of our generous donors and corporate supporters, we would not be able to assist those in need.

Whether it's through the various publications that we provide, through our website which is available 24 hours a day, 7 days a week, through a friendly phone call or a conference or public education event, we are able to provide knowledge that will inform and empower people to make choices in their lives about their mental health.

To help provide better service to our donors, last year we made a substantial change and brought our donor database in-house so we can

respond immediately to any questions or concerns. This ensures that we are responding quickly and accurately to you, our valued donor.

A recent donor survey showed that most respondents had a friend or family member with a mental illness. This again speaks to the importance of helping not only those with a mental illness, but those who are providing care or support.

Thank you to the many individuals and corporations who are helping to overcome the stigma of mental illness and to improve the quality of life for so many people in Ontario.

To receive information about making a charitable bequest to CMHA, Ontario, contact Susan Macartney at 416-977-5580 ext. 4122. This is an excellent way to reduce your estate taxes and increase inheritances to loved ones.

MENTAL HEALTH TUNE UP 2003

The second Mental Health Tune Up grew by leaps and bounds in 2003, moving into the Barbara Frum Atrium of the CBC Broadcasting Centre and hosting approximately 2,000 people over May 6 and 7. Over 50 organizations participated in the community resource fair, and ten featured seminars were delivered over the two days.

The fair had representation from a wide variety of mental health resources, including hospitals, non-profit organizations, employee assistance programs and others. The seminars covered a broad range of mental health topics, from children's mental health to workplace issues.

The event opened with a keynote address by

Toronto Star columnist Ellie Teshler in a ceremony which also featured the CBC's Andy Barrie. The Honourable Michael Wilson was presented with the first Mental Health Champion Award later that afternoon.

Other highlights of the event included the Talk with a Doc booth, which allowed the public to consult with a mental health professional, and the Video Corner, which ran a series of excellent films throughout the two days.

Shortly after Mental Health Tune Up 2003 concluded, planning began for Mental Health Tune Up 2004.



The past year has been a whirlwind of activity for the Mental Health

mental health **WORKS**

Works team. During this time we have developed, piloted and revised an exceptional workshop to assist workplaces in managing the duty to accommodate employees experiencing mental illness. Scripts were written, interviews conducted and videos produced, and resource materials were created and printed. Consulting services for accommodation and return-to-work planning for people with mental illness have been initiated. A trainer certification process was established with the first six certified trainers graduating in March 2004. An agreement to share revenues with CMHA branches is being finalized. New workshops for employees are in development and Mental Health Works is being asked to participate in conferences and speaking engagements all over the province.

In addition, Human Resource Development Canada has accepted a proposal to fund Mental Health Works North. This project will see the creation of both web-based and CD e-learning as well as live presentations that address the unique needs of rural and remote communities. This is an exciting time that promises to lead to a new understanding about mental health and mental illness in the workplace.

This year, staff at CMHA Ontario raised \$2,240.37 in an internal fundraising campaign with proceeds going to a CMHA branch program. The money was donated to the CMHA, Lambton County Branch, to assist with a new program called "Kids Have Stress Too!" which is delivered by two trained facilitators throughout Lambton County. "Kids Have Stress Too!" is an educational program designed to help parents and caregivers of children of preschool age to 9 years of age. It is offered in two 2-hour sessions that teach participants how to recognize stress in their children, identify stressors and find out how to teach their children to handle stress effectively. Children without effective strategies for dealing with stress can experience problems ranging from poor health to poor relationships with friends and family to difficulty in school. These stress management strategies are designed to help children gain a sense of control, to learn how to relax and to develop a "can do" attitude.

The program is flexible and non-prescriptive and can be adapted for use in a number of ways with parents, guardians, grandparents and other caregivers.

WE ALL BELONG CAMPAIGN

The We All Belong Campaign, with its unique approach to public education, has been changing communities across the Northeast Region. Community leaders have commented on the tremendous impact of hearing personal stories of someone who lives with a mental illness. They have also appreciated the opportunity to ask what is needed and what can be done in their communities to make them more inclusive.

Community leaders from throughout the entire Northeast Region have received the campaign's Key Influencer presentation. They include 32 town/municipal councils, MPPs, police chiefs, officials and detachments, hospital boards and senior administrators, fire department personnel, school boards and principals, editors and reporters from newspapers across the region and mental health and addiction treatment staff. Community leaders who live with a mental illness in secret have disclosed their own experiences on several occasions; they have indicated they are relieved that mental health issues are finally being talked about more openly.

Another key result of the campaign has been the reports from consumers and family members who feel more empowered to voice their needs and concerns within their own communities since being involved in We All Belong. "Participants have built confidence in their

abilities and go on to many successes, including employment," says campaign co-chair Karen Wilkinson from CMHA, Ontario (one of the founding partners of the campaign along with the Centre for Addiction and Mental Health and the Northeast Mental Health Centre).

The campaign has created a model of partnership among key stakeholders within the mental health system. With the field's movement to a recovery-oriented system, the campaign has actually provided the opportunity to model this relationship for recovery. In its fifth and final year, in addition to its continued roll-out of Key Influencer presentations to a wider target audience, the campaign will hold the 3rd Annual Video Contest (open to consumers and family members who tell their stories through the use of video/film) and the Finale Team Summit with keynote speakers Scott Simmie and Julia Nunes. The final report, describing the full range of campaign activities including the evaluation component and associated outcomes, will also be distributed.



We all belong.

Une communauté pour tous.

MOLSON INDY BIKE CHALLENGE

Since 1996, CMHA, Ontario has participated in the Molson Indy Bike Challenge, a fun, friendly and competitive event sponsored by the Molson Indy Festival Foundation. Teams of 10 obtain pledges to race and raise money for Toronto charities, including CMHA, Ontario. This year, 130 participants from 13 teams came out to race for CMHA, Ontario at Exhibition Stadium, raising a total of \$22,322. A big thank you to our wonderful corporate supporters who donated great prizes, and to our participants for their commitment, dedication and determination. Wasn't it fun?



Thanks to our Molson Indy Teams

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 McMillan Binch
 Osler Harkin & Harcourt

GOVERNMENT RELATIONS

The past year has been a promising one for the profile of mental health in Ontario, particularly among provincial legislators and policy-makers. Throughout the year, CMHA, Ontario conducted the Meeting-A-Month campaign with CMHA branches, encouraging staff and volunteers to meet with their local government representatives to remind them of the importance of mental health in their community. In the fall of 2003, the provincial election campaign provided a rare opportunity for CMHA, Ontario and local branches to intensify their collective efforts to put mental health on the agenda.

During the election campaign, CMHA, Ontario developed the Action Centre on the organization's website. The Action Centre provided fact sheets, template press releases and letters to help branches, and anyone else concerned about mental health care in Ontario, communicate with their candidates. Also provided were resources to help people with mental illness vote in the election, and a summary of election-related news and events. This material was regularly distributed through an electronic newsletter throughout the campaign period. Since the election, government-related news and events continue to be communicated through the introduction of the Public Issues section of the weekly Mental Health Notes newsletter and in the online Action Centre at www.ontario.cmha.ca.

The results of the joint communications efforts of CMHA, Ontario and branches were excellent. Over the six-week period of the election campaign, close to 70 stories related to the need for more mental health funding ran in newspapers in communities of all sizes across the province. The issue of mental health funding was included in all three of the main party platforms.

After the election, outreach to government regarding the importance of community mental health services continued at a high level. CMHA branches have been instrumental in collaborating with other mental health service providers and stakeholders in their communities, and in educating their MPPs, municipal government representatives and local media outlets. CMHA, Ontario has worked to facilitate communications efforts at the branch level by providing centralized support and materials, as well as conducting government relations and outreach at the provincial level.

CMHA, Ontario has also collaborated with colleagues and partners both within and outside the mental health sector, to ensure that the need for investment in mental health services is well known by decision-makers at all levels. Together with branches, and our partners, CMHA, Ontario will continue to advocate for appropriate community mental health services for all Ontarians.

CMHA, ONTARIO ACHIEVEMENT AWARDS

The Canadian Mental Health Association, Ontario Achievement Awards Program recognizes the volunteers, consumers, staff, and organizations that contribute to the important work of enhancing mental health for the people of Ontario and exemplify the spirit of CMHA. The 2003 recipients were honoured on June 13 at the CMHA, Ontario Achievement Awards.

CONSUMER PARTICIPATION AWARD – Martha Wright, Chatham

OUTSTANDING STAFF AWARD – Aleta Armstrong-Harvey, CMHA, Barrie-Simcoe Branch

OUTSTANDING VOLUNTEER SERVICE AWARD – Sheila Dresser, CMHA, Peel Region Branch

MEDIA AWARD - Jim Coyle, Toronto Star



Left to right – Martha Wright, Aleta Armstrong-Harvey, Jim Coyle, Laura Nashman (Peel Region), Jean Kerr-Penny.
Absent – Sheila Dresser

SPECIAL RECOGNITION AWARD – Jean Kerr-Penny, CMHA, Nipissing Regional Branch

WORK AND WELL-BEING AWARD – The Region of Peel

THE KNOWLEDGE CENTRE - www.ontario.cmha.ca

Studies show that half of all Canadians turn to the Internet for health information. The increasing demand for high-quality mental health information is demonstrated by the growing number of visitors to the CMHA, Ontario website. During the past year, close to 127,000 people have visited the site, viewing almost 1 million pages. This represents double the number of visitors and page views compared with the preceding year.

The goal of the Knowledge Centre is to build the best online source for facts about mental illness and the mental health system in Ontario. In July 2003, we relaunched the website with an up-to-date design, a new navigation system, and the content reorganized into logical subject areas. All aspects of the new site combine to make it more user-friendly. Behind the scenes, an improved content-management system now allows more rapid site development and uninhibited growth.

New content published during the past year includes "Recovery Rediscovered," a policy paper exploring the implications of a recovery model for Ontario's mental health system, "Mass Media and Mental Illness: A Literature Review," five papers on the mental health of children and youth, a chronology of mental health reform in Ontario, fact sheets on medical

marijuana, mental health funding, and other topics, information about federal and provincial privacy legislation, three issues of *Network* magazine (both in print and online), and Mental Health Notes, our weekly e-mail newsletter. On the private side of the website, we published the complete CMHA, Ontario Board Manual, among other management resources for CMHA staff and volunteers across the province.

At the end of March 2004, we launched a new section of the website focusing on the 33 local CMHA branches in Ontario. Featuring an interactive map of the province and a searchable database, the Local Branches section provides visitors with a clear picture of where the branches are located, what programs and services they offer, and how to find them.

The Knowledge Centre continues to maintain the website and publish a newsletter for the Community Mental Health Evaluation Initiative (CMHEI), a multisite evaluation of community mental health programs in Ontario. Recent issues of the newsletter have profiled the work of researchers studying the effectiveness of case management for homeless clients and the benefits of consumer/survivor initiatives.

PUBLICATIONS

CMHA, Ontario writes and distributes a magazine, newsletters, brochures, and fact sheets for various audiences, including consumers, family members, mental health professionals, students, and researchers. All publications are available at the website at www.ontario.cmha.ca.

• Network

Network is CMHA, Ontario's popular magazine, published three times a year. It brings together a variety of perspectives on issues of importance to everyone with an interest in mental health. In the past year, *Network* has focused on primary care reform, the Community Mental Health Evaluation Initiative, and the topic of disclosure, including an interview with the Hon. James K. Bartleman, Lieutenant Governor of Ontario.

• Mental Health Notes

Our weekly e-mail newsletter provides the most up-to-date information on mental health policy, research and advocacy from Canada and around the world. Summaries of the week's most important mental health news, stories from communities across the province, upcoming events, job announcements, and links to new online resources keep our audience well informed. Sign up online at www.ontario.cmha.ca, or send an e-mail to smcartney@ontario.cmha.ca with "subscribe" in the subject field.

AUDITORS' REPORT

**TO THE MEMBERS OF
CANADIAN MENTAL HEALTH ASSOCIATION - ONTARIO DIVISION**

We have audited the statement of financial position of Canadian Mental Health Association – Ontario Division as at March 31, 2004 and the statements of revenue and expenses, changes in net assets and cash flows for the year then ended. These financial statements are the responsibility of the Association's management. Our responsibility is to express an opinion on these financial statements based on our audit.

Except as explained in the following paragraph, we conducted our audit in accordance with Canadian generally accepted auditing standards. Those standards require that we plan and perform an audit to obtain reasonable assurance whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation.

In common with many charitable organizations, the Association derives part of its revenue in the form of donations and ticket sales, the completeness of which is not susceptible to satisfactory audit verification. Accordingly, our verification of these revenues was limited to the amounts recorded in the records of the Association and we were not able to determine whether any adjustments might be necessary to fundraising revenue, excess of revenue over expenses, assets and net assets.

In our opinion, except for the effect of adjustments, if any, which we might have determined to be necessary had we been able to satisfy ourselves concerning the completeness of donations and ticket sales referred to in the preceding paragraph, these financial statements present fairly, in all material respects, the financial position of the Association as at March 31, 2004 and the results of its operations and its cash flows for the year then ended in accordance with Canadian generally accepted accounting principles.

Deloitte & Touche LLP

**CHARTERED ACCOUNTANTS
TORONTO, ONTARIO
APRIL 23, 2004**

**Statement of Financial Position
March 31, 2004**

	2004	2003
ASSETS		
CURRENT		
Cash	\$270,545	\$279,601
Short-term investments (market value \$898,143; 2003 - \$703,909)	807,406	680,085
Accounts receivable	111,984	97,542
Prepaid expenses	103,873	51,309
	<u>1,293,808</u>	<u>1,108,537</u>
CAPITAL ASSETS (Note 4)	141,671	124,168
TOTAL ASSETS	\$1,435,479	\$1,232,705
LIABILITIES		
CURRENT		
Accounts payable and accrued charges	\$222,963	\$205,140
Due to Government of Ontario	6,763	5,097
	<u>229,726</u>	<u>210,237</u>
DEFERRED CONTRIBUTIONS (Note 5)	192,545	178,340
TOTAL LIABILITIES	422,271	388,577
NET ASSETS		
INVESTED IN CAPITAL ASSETS (Note 6)	130,197	103,021
INTERNALLY RESTRICTED (Note 8)	517,453	502,998
UNRESTRICTED	365,558	238,109
TOTAL NET ASSETS	1,013,208	844,128
TOTAL LIABILITIES AND NET ASSETS	\$1,435,479	\$1,232,705

**Statement of Revenue and Expenses
March 31, 2004**

	2004	2003
REVENUE		
Grants - Ministry of Health and Long Term Care	\$1,581,820	\$1,577,542
Fundraising (Note 9)	-	123,070
Bequests	369,316	293,845
Branch membership fees	149,000	147,750
Investment income	31,467	20,265
Special projects	334,419	251,033
Other	65,815	124,245
	<u>2,531,837</u>	<u>2,537,750</u>
EXPENSES		
Knowledge Centre	1,212,168	1,067,376
Communications and marketing	196,235	327,227
Management, operations and support services	552,415	697,204
Special projects	321,773	251,033
Amortization of capital assets	39,262	37,845
Writedown of short-term investments	-	24,329
Fundraising (Note 9)	40,904	-
	<u>2,362,757</u>	<u>2,405,014</u>
EXCESS OF REVENUE OVER EXPENSES	\$169,080	\$132,736

APPROVED BY THE BOARD

Neil P. Morgan Director

John C. Anderson Director

Statement of Changes in Net Assets Year ended March 31, 2004

	2004		2003		
	Invested in Capital Assets (Note 6)	Internally Restricted (Note 8)	Unrestricted	Total	Total
BALANCE, BEGINNING OF YEAR	\$103,021	\$502,998	\$238,109	\$844,128	\$723,945
(DEFICIENCY) EXCESS OF REVENUE OVER EXPENSES	(23,331)	-	192,411	169,080	132,736
NET INVESTMENT IN CAPITAL ASSETS	50,507	-	(50,507)	-	-
INTER-FUND TRANSFER	-	14,455	(14,455)	-	-
BALANCE, END OF YEAR	\$130,197	\$517,453	\$365,558	\$1,013,208	\$856,681

Statement of Cash Flows Year ended March 31, 2004

	2004	2003
NET INFLOW (OUTFLOW) OF CASH RELATED TO THE FOLLOWING ACTIVITIES		
OPERATING		
Excess of revenue over expenses	\$169,080	\$132,736
Items not affecting cash		
Writedown of short-term investments	-	24,329
Loss on disposal of capital assets	481	3,388
Amortization of deferred capital contributions	(16,412)	(15,419)
Amortization of capital assets	39,262	37,845
	192,411	182,879
Changes in non-cash working capital items		
Accounts receivable	(14,442)	(44,642)
Prepaid expenses	(52,564)	(12,097)
Accounts payable and accrued charges	17,823	13,303
Due to Government of Ontario	1,666	3,224
Deferred contributions - non-capital	23,878	65,357
	168,772	208,024
INVESTING AND FINANCING		
Net additions to investments	(127,321)	(227,634)
Net endowment funds transferred (Note 7)	-	(12,553)
Purchase of capital assets	(57,246)	(30,291)
Deferred contributions - capital grants	6,739	9,461
	(177,828)	(261,017)
NET DECREASE IN CASH	(9,056)	(52,993)
CASH, BEGINNING OF YEAR	279,601	332,594
CASH, END OF YEAR	270,545	279,601

1. PURPOSE OF THE ORGANIZATION

The Canadian Mental Health Association – Ontario Division is a volunteer-based provincial organization, with a mandate to advocate with and provide programs and services for people with mental disorders and to enhance, maintain and promote the mental health of all individuals and communities in Ontario. The Canadian Mental Health Association - Ontario Division is incorporated under the Corporations Act of Ontario as a not-for-profit organization and is a registered charity under the Income Tax Act.

2. SIGNIFICANT ACCOUNTING POLICIES

These financial statements comprise the accounts of Ontario Division's Provincial office. The results of the Division's branches are not included in these financial statements.

These financial statements have been prepared in accordance with the accounting standards for not-for-profit organizations published by the Canadian Institute of Chartered Accountants, using the deferral method of accounting for contributions.

Revenue recognition

Restricted contributions are recorded as deferred contributions, and taken into revenue in the year in which the related expenses are incurred. Contributions restricted for the purchase of capital assets are deferred and taken into revenue at rates corresponding to the rates used to amortize the related capital assets.

Unrestricted contributions are recognized as revenue when received or receivable if the amount to be received can be reasonably estimated and collection is reasonably assured.

Endowment contributions are recognized as direct increases in net assets.

Restricted interest income is recognized as revenue in the year in which the related expenses are incurred.

Unrestricted interest income is recognized as revenue when earned.

Short-term investments

Short-term investments, comprising bonds and marketable securities, are recorded at the lower of cost and market value.

Capital assets

Purchased capital assets are recorded at cost. Donated capital assets are recorded at fair value at the date of contribution. Amortization is provided on a declining balance basis at a rate of 30% for computer hardware and software and 20% for office equipment and furniture and fixtures. Leasehold improvements are recorded at cost and amortized on a straight-line basis over the term of the lease.

Overhead costs

Overhead costs, consisting of building occupancy and certain other costs, are allocated to programs based on management's estimate of actual usage of those resources by each program. Those costs which cannot be readily allocated to individual programs are classified as management, operations and support services.

Financial instruments

The carrying value of all financial assets and liabilities approximate their fair value due to their relatively short term to maturity.

Management estimates

The preparation of financial statements in conformity with Canadian generally accepted accounting principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities, the disclosure of contingent assets and liabilities at the date of the financial statements, and the reported amounts of revenue and expenses during the period. Actual results could differ from such estimates.

3. POST-EMPLOYMENT BENEFITS

The Association prospectively adopted the new Canadian generally accepted accounting standard for post-employment benefits effective April 1, 2000. The Association accrues its obligations under post-employment benefit plans and the related costs. Previously, amounts were expensed when paid. The Association has adopted the following policies:

The cost of post-employment benefits is actuarially determined using best-estimate assumptions developed by the Association.

The benefit obligation is amortized over the expected duration of the benefit payments, which is 12 years.

At March 31, 2004 the Association's accrued benefit obligation relating to post-employment is as follows:

	2004	2003
Accrued benefit obligation	\$47,900	\$47,900
Unamortized portion of accrued benefit obligation	(38,300)	(40,700)
Amount recorded in accounts payable and accrued liabilities	\$9,600	\$7,200

The significant actuarial assumptions adopted in estimating the Association's accrued benefit obligation are as follows:

Discount rate	7.0%
Health benefits cost escalation	10.5% in 2001 decreasing by 1% per annum to an ultimate rate of 4.5%

The expense related to post-employment benefits is \$6,053 (2003 - \$7,934).

4. CAPITAL ASSETS

	2004		2003	
	Cost	Accumulate Amortization	Net Book Value	Net Book Value
Leasehold improvements	\$27,040	\$10,126	\$16,914	\$20,475
Computer hardware	135,889	75,615	60,274	72,626
Computer software	104,957	59,348	45,609	4,144
Office equipment	19,561	12,944	6,617	9,593
Furniture and fixtures	45,998	33,741	12,257	17,330
	\$333,445	\$191,774	\$141,671	\$124,168

5. DEFERRED CONTRIBUTIONS

Deferred contributions represent unspent resources externally restricted for specific purposes. Changes in the deferred contribution balance are as follows:

	Opening Balance	Receipts in year	Disbursed in year	Ending Balance
Communications Strategist Project	\$ 6,020	\$ -	\$ 4,818	\$ 1,202
Mental Disorders Research Project	40,808		22,882	17,926
Annual Conference Partners	12,389	164,740	174,712	2,417
Mental Health Week	9,025	114,295	75,150	48,170
Citizens for Mental Health Project	1,341	42,261	37,930	5,672
Suicide Intervention Training	2,595	-	-	2,595
Ministry of Health and Long-Term Care - Special Projects	9,286	-	2,094	7,192
- Capital grants	21,147	6,739	16,412	11,474
Gender and Mental Health Project	-	10,000	-	10,000
Network Magazine Sponsorship	-	7,500	-	7,500
Voice Project	-	100,175	21,778	78,397
Mental Health in the Workplace Initiative	75,729	82,900	158,629	-
	\$ 178,340	\$ 528,610	\$ 514,405	\$ 192,545

Communications Strategist Project

In fiscal 2003 the Association and its participating local CMHA branches initiated a project to jointly fund the engagement of a communication strategist to assist the Association with the achievement of its corporate communication goals.

Mental Disorders Research Project

In fiscal 2003 restricted funds were received to be spent on the research of mental disorders.

Annual Conference Partners

The Association holds its annual conference in partnership with various other organizations. Funds are advanced by these partners to fund initial conference costs.

Mental Health Week

The Association holds its annual Mental Health Week in partnership with another organization. The funds on hand represent funds received from outside sponsors for the event.

Citizens for Mental Health Project

The Citizens for Mental Health project is a broad consultation among Ontario stakeholders to obtain advice regarding what federal mental health policy should contain.

Suicide Intervention Training

These funds, received from the Ministry of Correctional Services will be spent on suicide intervention training or on other related activities.

Ministry of Health and Long-Term Care- Special Projects

The amount represents funds received for various special projects in partnership with the Ministry of Health and Long-Term Care and will either be used for future related projects or refunded to the Ministry of Health.

Ministry of Health and Long-Term Care - Capital Grants

These funds represent capital funding for assets purchased through the Ministry of Health and Long-Term Care program. The amount will be amortized into income at rates corresponding to the rates used to amortize the related capital assets. During the year, \$16,412 was amortized into income.

Gender and Mental Health Project

These funds provided by the Canadian Institute of Health Research, will be used to provide public education relating to the issue of significant weight gain experienced by women who have been prescribed psychotropic medication.

Network Magazine Sponsorship

These funds will be spent on the re-design of Network Magazine.

Voice Project

These funds provided by Health Canada, will be used to undertake a demonstration project to identify the federal public policy framework relevant to home care and community mental health.

Mental Health in the Workplace Initiative

These funds are provided by the Ministry of Citizenship, Culture and Recreation to fund the "Mental Health in the Workplace" initiative. These funds have now been fully utilized and the initiative is on-going on a self-sustaining basis.

6. INVESTED IN CAPITAL ASSETS

A. Invested in capital assets represents the following:

	2004	2003
Capital assets	\$ 141,671	\$ 124,168
Less amounts financed by:		
Deferred capital contributions	11,474	21,147
	\$ 130,197	\$ 103,021

B. Change in net assets invested in capital assets is calculated as follows:

	2004	2003
Deficiency of revenue over expenses		
Loss on disposal of capital assets	\$ 481	\$ 3,388
Amortization of deferred capital contributions	(16,412)	(15,419)
Amortization of capital assets	39,262	37,845
	\$ 23,331	\$ 25,814

Net investment in capital assets

Purchase of capital assets	\$ 57,246	\$ 30,291
Amounts funded by deferred capital contributions	(6,739)	(9,461)
	\$ 50,507	\$ 20,830

7. GLENN R. THOMPSON SCHOLARSHIP FUND

In June 2001 the Board of Directors established the Glenn R. Thompson Scholarship Fund through donations from friends and associates of Glenn R. Thompson. The principal portion of the fund was invested to earn investment income and it was the intention of the Association to ultimately transfer this fund to York University to administer. The income earned will be used to award scholarships to a student of the faculty of social work at York University. In December 2002, the fund balance totaling \$12,553 was transferred to York University.

8. NET ASSETS INTERNALLY RESTRICTED

	2004	2003
Operating Reserve	\$ 200,000	\$ 200,000
Knowledge Centre Development	200,000	200,000
Ontario Division Resource Development	100,000	74,709
Non-Chartered Territories Development	17,453	17,453
Mental Health Week	-	10,836
	\$ 517,453	\$ 502,998

These internally restricted amounts are not available for any purpose other than those specified, without approval of the Board of Directors.

Operating Reserve

At the discretion of the Board of Directors, these funds may be applied to fund any future operating deficits.

Knowledge Centre Development

(formerly known as Information Centre Development)

At the discretion of the Board of Directors, these funds may be applied to fund the continuing development of the Knowledge Centre.

Ontario Division Resource Development

The fund was established to facilitate developmental fundraising activities. Each year, 25% of any annual surplus of Core operations is allocated to augment the Fund up to a maximum amount of \$100,000. In 2004, \$25,291 was allocated to the fund (2003 – \$35,296). All expenditures from this Fund require the prior approval of the Board of Directors. During the year there were no expenditures approved by the Board (2003 - \$8,438).

Non-Chartered Territories Development

An amount equal to 50% of the net proceeds from the sale of break open tickets made at retail outlets located in non-chartered territories is being set aside to finance future delivery of services in those areas. In 2004, there were no amounts allocated to the fund (2003 - \$Nil).

Mental Health Week

Funds totaling \$10,836 representing the surplus realized by mental health week in 2002, were utilized to partially fund mental health week 2003.

9. FUNDRAISING

The Association has entered into certain agreements with its branches that result in the sharing of the revenue derived from fundraising activities.

The amount due to the branches at year-end in the amount of \$27,794 (2003 - \$46,251) has been included in accounts payable and accrued charges.

2004				
	Revenue	Expenses	Revenue Sharing	Association's Share
Donations	\$ 261,705	\$ 219,064	\$ 23,279	\$ 19,362
Candy dispensing program	7,301	-	3,481	3,820
Nevada tickets	274,399	182,164	65,300	26,935
Other fundraising activities	94,683	181,189	4,515	(91,021)
	\$ 638,088	\$ 582,417	\$ 96,575	\$ (40,904)

2003				
	Revenue	Expenses	Revenue Sharing	Association's Share
Donations	\$ 244,815	\$ 129,001	\$ 39,899	\$ 75,915
Candy dispensing program	59,160	-	28,245	30,915
Nevada tickets	241,624	162,435	57,544	21,645
Other fundraising activities	43,876	49,281	-	(5,405)
	\$ 589,475	\$ 340,717	\$ 125,688	\$ 123,070

10. PUBLIC SECTOR SALARY DISCLOSURE ACT

The Association is an employer subject to the Public Sector Salary Disclosure Act 1996. In calendar year 2003, one employee met the above disclosure requirement. Dr. Barbara Everett, Chief Executive Officer, was paid a salary and taxable benefits of \$116,060.

11. COMMITMENTS

The Association leases its premises and certain office equipment under the terms of lease agreements expiring in December 2009 and June 2006 respectively. Minimum annual rental payments for the next five years under these agreements are as follows:

2005	\$ 87,576
2006	87,576
2007	78,577
2008	76,500
2009	58,100
	\$ 388,329

CMHA Branches in Ontario

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39 High St
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Brant County Branch
44 King Street, Suite 203
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Fax: 519-752-2717
E-mail: mail@cmhabrant.on.ca
Web: www.cmhabrant.on.ca

Chatham-Kent County Branch
240 Grand Ave W, Ste 100
Chatham ON N7L 1C1
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Fax: 519-351-9203
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Web: www.cmhakent.com

Cochrane Timiskaming Branch
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905-774-2800
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55 Ontario St S, Ste 25
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540 Huron St
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Peel Branch
Resource Centre (for information and referral)
3181 Wolfedale Rd, Unit 3
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Fax: 905-804-0120
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