



2008-2009 ANNUAL REPORT



CRCT

Community Resource Connections of Toronto

Message from the Board President and the Executive Director

2008-2009 saw CRCT evolve to a stronger organization in many ways, one poised to better address the changing demands of the work we do.

The Board was stable throughout the year, and the Finance Committee emerged to provide the direction for improved financial reports to the Board as well as becoming more involved in overseeing the financial operations of the organization.

With the commencement of David Lemire's role here as the Executive Director in the fall of 2008, the management team was strengthened, which impacted on the entire organization. The temporary two managers created opportunities for two staff to assume Acting Manager roles during the year.

Sheryl Lindsay served as the Acting Executive Director until David's arrival and is to be thanked and commended for her dedication to the organization during her entire tenure at CRCT but in particular during the past two years.

The Board began to review its governance role and with the support of Management Advisory Service (MAS) had a workshop on governance and began our Strategic Plan, scheduled to conclude by the end of June, 2009.

During this year we celebrated HOP's 20th anniversary and staff enjoyed a lunch and in-service on team building in February.

There was much activity in the sector this year, including the growing role of the Toronto Central LHIN. We received funding from the TC LHIN in January, 2009 for a 15-month "Aging at Home" project, performing outreach and support to isolated seniors in St. James Town. We began performing this outreach on a small scale on our own months prior, and Sheryl Lindsay secured this grant and saw her role expand to "Manager, Outreach Programs", which now includes HOP and STOP.

All of our employees and volunteers, including Board members, are to be congratulated for completing another successful year, seeing that CRCT continues to work with our clients and the community in partnership with many others to help enhance people's lives and provide support to the sector.



Lora Patton
Board President



David Lemire
Executive Director

Contents

The Community Resource Connections of Toronto (CRCT)	2
Minutes of Annual General Meeting.....	3
CRCT consolidated statement of operations and funds balance	4
The Health Promotion Program.....	5
Community Support Services (CSS)	6

Hostel Outreach Program (HOP)	8
The St. James Town Outreach Program.....	9
Mental Health Court Support Services (MHCSS) ..	10
Collaborations/Partnerships & Funders	11
CRCT 2008/09	12
Board of Directors	
Senior Management Staff	
Staff	

Community Resource Connections of Toronto (CRCT)

Since 1974, CRCT was created “to promote the health, welfare, education and rehabilitation of persons with emotional problems”, our staff, board, volunteers and partners have worked to support our clients and to increase society’s understanding of mental health.

In these pursuits, CRCT’s work has embodied the values of respect, freedom of choice, trust, self-determination, consumer-driven, collaboration, providing opportunities, justice, fairness, and equality.

We make a special effort to increase our learning, exploring, understanding, promoting and living the cultural and social experiences of other cultures, and to reflect these experiences in our work within an anti-oppression framework.



COMMUNITY RESOURCE CONNECTIONS OF TORONTO
366 Adelaide Street East, Suite 230, Toronto, Ontario M5A 3X9
(416) 482-4103

MINUTES OF ANNUAL GENERAL MEETING

Thursday, October 30, 2008

Held at YMCA Metro Central Auditorium, 2nd Floor
20 Grosvenor Street, Toronto, ON M4Y 2V5

1.0 CALL TO ORDER AND CONSTITUTION OF THE MEETING

There being a quorum present, Lora Patton welcomed all and call the meeting to order.

2.0 WELCOME BY THE PRESIDENT

Lora Patton introduced herself as the interim President and welcomed all those present to the 34th Annual General Meeting of Community Resource Connections of Toronto.

3.0 INTRODUCTION TO BOARD MEMBERS

Lora Patton introduced the Board members present.

4.0 MINUTES OF PREVIOUS ANNUAL GENERAL MEETING

Motion was made "To approve the minutes of the AGM held on October 30th, 2007".

Moved: Andrew Arifuzzaman

Seconded: Karen O'Connor

CARRIED

5.0 PRESENTATION OF FINANCIAL STATEMENTS

- 5.1 Andrew Arifuzzaman introduced Lyne Arseneau, the Auditor for Community Resource Connections of Toronto, to present the financial statements for the fiscal year 2007/08.

Motion was made "To accept the 2007/08 Audited Financial Statements and the auditor's report as presented".

Moved: Andrew Arifuzzaman

Seconded: Amy Wah

CARRIED

- 5.2 Motion was made "To appoint Lyne Arseneau as auditor for 2008/09 fiscal year for a remuneration to be decided by the Board".

Moved: Andrew Arifuzzaman

Seconded: Karen O'Connor

CARRIED

6.0 ELECTION OF BOARD MEMBERS

Lora Patton introduced the members of CRCT who have been nominated to become members of the CRCT Board of Directors.

Slate of Nominees

Motion was made "To accept the slate of nominees: Andrew Arifuzzaman (2nd Term), Lora Patton (2nd Term), Wayne Skinner (2nd Term), Debora Kuiper, Catherine McLarney to the Board of Directors of Community Resource Connections of Toronto as circulated at the meeting".

Moved: Karen O'Connor

Seconded: Amy Wah

CARRIED

7.0 ADJOURNMENT

Motion was made "To adjourn the Annual General Meeting".

Moved: Andrew Arifuzzaman

Seconded: Karen O'Connor

CARRIED

CRCT consolidated statement of operations and funds balance for the year ended March 31, 2009

	2009	2008
Income		
Funding by the Ministry of Health Toronto Central LHINS	\$ 5,462,441	\$ 5,151,042
Funding by other agencies	7,000	36,000
Donations	850	743
Interest	14,615	36,060
Other	8,022	8,733
	5,492,928	5,232,578
Expenses		
Salaries and benefits	\$ 4,284,177	\$ 4,189,959
Referred out services	41,408	40,496
Professional fees	91,787	106,288
Audit and accounting	36,506	35,791
Rent	140,530	133,800
Office supplies and expenses	167,726	84,502
Telephone	50,305	49,167
Travel	91,374	88,593
Staff and volunteer education and training	46,294	51,304
Program supplies	254,556	64,510
Insurance	4,378	4,253
Personnel placement and advertising	14,339	23,602
Client expenses	61,993	33,325
Family Outreach and Response program	72,868	68,173
Trillium Project	—	58,699
United Way Winter Relief	7,200	14,371
Seminar expenses	—	4,102
Amortization	96,302	117,647
	5,461,743	5,168,582
Excess of income over expenses	31,185	63,996
Funds balance at the start of the year	825,759	761,763
Less-refunded to the Ministry of Health	292,465	—
	564,479	825,759
Funds balance at the end of the year	564,479	825,759

The Health Promotion Program

The Health Promotion Program is unique in that it addresses gaps, barriers, and access and equity issues for consumers in both the mental health and broader system.

In the past year we have helped organize another successful international conference focusing on emerging best practices in the field of recovery, bringing dynamic international and Canadian speakers to Toronto to share their knowledge.

As well, we are partnering with CMHA Ontario and others in piloting an innovative psycho-education program combining practical diabetes health information with group based physical activity. Both our website and “Making Choices” resource guide are updated regularly, providing valuable information and resources to both consumers and working professionals. A “Wellness and Recovery” newsletter is published four times a year, and is distributed to over 500 subscribers across North America. We have developed and delivered mental health training to outside agencies such as Toronto Community Housing Corporation and Toronto Children’s Aid Society. We have participated in and presented at a number of conferences over the past year. In March 2009, the Mental Health Commission of Canada sponsored a health promotion conference in which we presented a proposal for using the “Navigating Mental Health Services in Toronto” guides as a template for others to use in their own contents and settings. Strong interest was shown in this proposal by senior staff at the Mental Health Commission. Hundreds of copies of the guide were distributed at the conference, and much positive feedback was received. By attending the conference we were also able to learn about other best practices currently being used. The agency has committed to developing better outcome measurements and evaluations of the services we provide. Partly this is being driven

by the expectations of our funder, as well as our desire to ensure that we are managing our resources to the best of our ability and we are effective in our work. In recognition of this, HPP has had some of an emphasis in this area. CRCT will have more capacity to properly evaluate our own programs and provide valuable information to help us measure and refine the services we offer to our clients.

With funding from the Wellesley Institute, we are working on a joint project called “Recovery through the Lens of Cultural Diversity.”

Essentially this is about nurturing and creating a community of practice in which service providers work together with consumers to bring cultural diversity into the mainstream of the recovery model. Along the same theme, the Supportive Housing

and Diversity toolkit was launched in the past year. A number of housing providers across the city have committed to implementing key components of the toolkit within their own programs.

HPP continues to play a leadership role within the sector in developing practical strategies for improving equitable access to mental health resources. We continue to make “Navigating Mental Health Services in Toronto” available free of charge. In the past year, over 10,000 copies have been distributed in seven different languages. Arabic is the newest addition, with both traditional and simplified Chinese added at the end of this year.



Community Support Services (CSS)

EAST

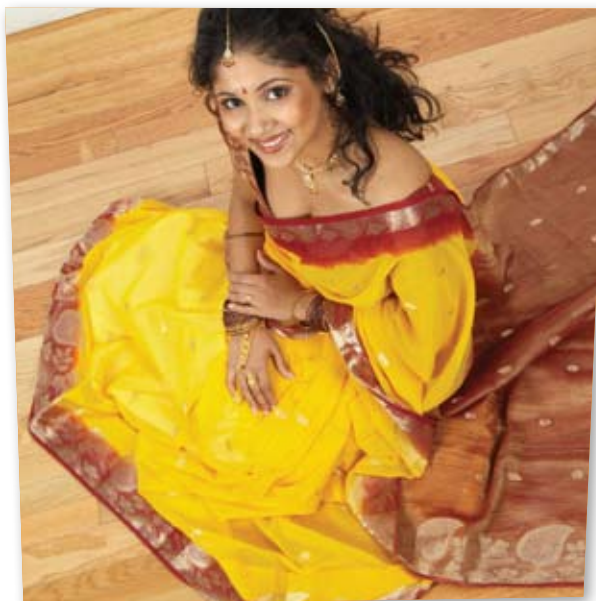
The East CSS team of CRCT consist of 14 team members and a manager. Seven staff member have general caseloads, four staff members work with families where one parent has a mental health issue and three staff members work with young people in the “first episode in psychosis” program. The geographic area covered is Scarborough and east North York. Though team members accept all eligible referrals, there are four positions focused in the Tamil, Chinese and Caribbean communities. Our team members are from diverse backgrounds and speak 13 languages between them

Based on information from the team members, in the past year 24 clients avoided visits to hospital emergency rooms; 40 clients were prevented from having hospitalizations; 40 clients secured employment or participated in employment training programs and 19 clients found stable housing through our support and work with them.

Staff participated in Wellness Recovery Action Planning (WRAP) training and an in-depth concurrent disorders training in partnership with COTA Health. The training has resulted in staff from CRCT and COTA Health co-facilitating (along with a consultant) a group with participants challenged with concurrent disorders. In conjunction with peer facilitators, staff will continue to run groups geared to clients with concurrent disorders and the East Team Manager participates on a steering committee that develops and coordinates the plans for the concurrent disorder project. This project has three phases over three years with a goal of building capacity to work with clients with concurrent disorders.

Trained staff have also started a WRAP group co-facilitated with a consumer/survivor, with 9 clients attending regularly. This WRAP group is participating in an evaluation process. In line with their performance appraisal goals and interests; most staff attended numerous workshops and conferences.

The Manager of the East Team continues to participate with 10 other partners in the Access 1 centralized access project. This project was fully launched on March 2, 2009. This CRCT manager is working with partner agencies to facilitate new referrals which would have previously been made to CRCT, to go through ACCESS 1. This manager also participates on the Scarborough Quadrant Committee, which with partners in the mental health system, identifies and addresses gaps, barriers and other relevant mental health issues in Scarborough. East team partners include Centenary Health Centre, Catholic Cross Cultural Services, CAS, Family Residence, Birkdale Shelter, Robertson House, West Hill Community Health Centre, the East Scarborough Storefront and COTA Health. In addition to receiving referrals from these partners, CRCT staff provides consultation and education and training when there is a request.



Over the past year, our dedicated staff on the East Team have worked hard to assist the people who receive services from us to accomplish their goals and to live meaningful lives. With partners, we continue to ensure that the mental health and relevant systems continue to develop to meet the needs of consumer/survivors and their families.

WEST

West team clients are very satisfied with the services they are currently receiving. A comprehensive client survey was conducted in April 2009 by an independent researcher who found few criticisms and much praise for the work we do with our clients.

“Without CRCT I would be still sitting home alone. Now I have direction in my life.”

Assistance with housing ranked the highest on everyone’s list, but there are many other areas where our clients reported we were making a difference in their lives through our support.

Counselling, employment, accessing resources, dealing with bedbugs, bureaucracy and the courts were areas that our clients indicated their CSS staff supported them to achieve their goals. A growing area of concern is the increasing number of clients who struggle with diabetes as an ongoing health concern. In fact, one worker has 75% of her caseload diagnosed with diabetes. With compelling numbers like that, we have engaged in a number of different activities to help our clients cope and adjust to this reality. Psycho-education, cooking and nutrition groups, exercise and diet resources, help with glucosometers and improved access to primary health care are just some of the ways we are helping our clients lead a healthier lifestyle.

Above all else, the unique relationships we forge with our clients remain the cornerstone of our work. On the road to recovery, CSS West community support workers help provide the framework for helping clients choose their own path, find their own voice and reintegrate into the community.

CRCT plays an important role in ensuring that service standards are consistently high. Regular supervision, bi-annual file audits, on-going professional education – these are some of the ways the agency strives to maintain quality services. In a rapidly changing environment, CRCT is ensuring that staffs are up-to-date with changes in the sector.

Partnerships have always been a cornerstone of how we do our work, and that commitment has been strengthened in the past year. The Dundas–Osler Partnership (COTA, CAMH, Mainstay and CRCT) has been in existence for many years and we continue to innovate and collaborate with our partners. Two of our CSS West workers get every second referral from the general psychiatric unit at CAMH. At a meeting this spring to renew the formal agreement, CAMH staff stated:

“We love making referrals to CRCT; we never see those clients again.”

Our Somali Program continues to provide innovative quality health care to an underserved community. Focus group feedback included the following comments: assistance with housing, legal, immigration and employment issues was crucial and seen by clients as having a dramatic impact on their quality of life. Weekly community meetings were also highly rated as a form of tangible support and an opportunity to build friendships.

Hostel Outreach Program (HOP)

The Hostel Outreach Program (HOP) turned 20 years old this year. An event was held along with the men's HOP team to acknowledge this milestone. It was well attended by past and present staff, clients, and community partners.

This year HOP served 144 women. The majority of referrals came from the hostels, but also from drop-ins, hospitals inpatient and emergency rooms, the courts and the community at large. HOP also continues to do some street outreach to vulnerable women with mental health issues that are not connected to any other services.

Ninety one of the 144 women obtained permanent housing by the end of the year. This housing includes supportive housing, Toronto Community Housing, private market, senior's housing, long term care and boarding homes. We continue to see a need for a full range of housing from independent living to 24 hour support. There is a particular gap in housing for women who have concurrent disorders. HOP staff, together with our community partners, have been involved in advocating for housing based on a harm reduction model this past year.

HOP continues to employ its philosophy of flexible, portable, individualized service based on outreach and the creation of a trusting working relationship with each woman. We believe in a holistic approach that looks at all aspects of a person's life. To that end we work with women not just on housing and mental health needs, but in all areas that impact their well-being.

HOP's Aboriginal women's group, Healing Through Arts, in partnership with Native Women's Resource Center has continued to grow and thrive. It is held on a weekly basis and about 20 women a week attend to talk, relax and to create art together. The group has displayed and sold their art work at Pow Wows and other First Nations events in the city.

HOP continues to provide a number of social events throughout the year such as summer camp, fall and spring day trip events, the Holiday party and the summer barbeque to name a few. HOP will be starting a WRAP group this year facilitated by a HOP survivor and staff.

This year HOP welcomed two new staff, Jackie Saleh and Shirley Dudgeon, who are replacing Rebecca Penn (educational leave) and Karen Edwards (St. James town Outreach) for the next year. The HOP team said goodbye to one of our long time staff, Marg Robinson, who worked 18 years with HOP and has now transferred over to the Mental Health Court Support Program. We wish Marg all the best!!!

In light of our 20 years of service CRCT would like to acknowledge those HOP staff that have been with the program for over 10 years: Karen Edwards, Adrianna Leblanc, Sheryl Lindsay, Louise Nimigon and Cara Redden. CRCT thanks them for their dedication and ongoing service.

HOP looks forward to another busy and challenging year. The demand for service continues and the program will strive to remain as responsive and effective as ever over this coming year.



St. James Town Outreach Program

The St. James Town Program (STOP) is CRCT newest program. CRCT staff began working in St. James Town in November 2007 providing outreach and support to isolated individuals with serious mental health issues. This was in response to a meeting organized by the St. James Town Mental Health Action Group comprised of Public Health, tenant representatives, Toronto Community Housing and Greenwin Property Management. The group called together a number of organizations in the area as they had identified a number of people with mental health issues that needed support to maintain their housing. Many of these individuals were older and would not go out to get service, but rather required an outreach approach. CRCT agreed to provide 2 staff on a part-time basis to begin this outreach and assess the need of these tenants.

Once the outreach process began it was clear there are many individuals in great need and living in very desperate and sad circumstances. CRCT together with a number of community partners submitted a proposal to the Toronto Central LHIN under the Aging at Home initiative. In January of 2009, CRCT received funding for 2 full time outreach workers for St. James Town as well as funding for 3 home support workers to be provided through Central Neighborhood House. CRCT was fortunate that two experienced and dedicated staff applied to work in this new program. Emma Thomas transferred from the Mental Health Court Support Program and Karen Edwards, who was part of the original outreach team to St. James Town, transferred from HOP.

At this time the STOP program has 43 clients. STOP staff have been co-coordinating clean up of apartments and linking people to the supports that they need. To date none of the residents have been evicted and only two have required any contact with a hospital. They are also getting connected to a wide variety of services such as homemaking, CCAC, primary health care, mental health care, and community programs.

This is an exciting and challenging initiative that prevents homelessness, reduces social isolation, facilitates appropriate utilization of hospital resources, and improves the quality of life for many older adults in the St. James Town community.



Mental Health Court Support Services (MHCSS)

First funded in 1995 the MHCSS continues to offer onsite Support/Diversion and short term case management and linkage to community supports for people living with mental health issues who are in conflict with the law. These services are provided at both Old City Hall and College Park. Old City Hall provides a consolidated Mental Health Court.

This program continues to experience a high volume of clients at both sites and provides a crucial service to people with relatively low risk offences. Referrals are made for clients to mental health services and other supports in the community. Staff also seek resources for people who are not being diverted, but still in need of mental health support in the community.

Our partnership with the Mental Health and Justice Network provides much needed housing to high risk clients with serious mental health issues and chronic homelessness. Our partners are CMHA and House-link Community Homes. Our 5 housing workers support 64 individuals in these units and have made a significant impact in helping to develop their sense of belonging in the community and to have stable housing. The case managers provide support to clients recently released from custody and prioritize referrals from probation and parole.

The concurrent case manager position provides case management services to individuals with mental health and addictions issues. The focus on liaising with agencies that provide safe beds, withdrawal management services and treatment program so that these client can more easily access the services they need.

The court support staff have been busy in the last year with 3 staff graduating with MSW degree from the University of Toronto. In addition, staff have participated in training and co-facilitated at conferences and educational venues in and around Toronto. Our staff continue to provide informal presentations and training to numerous social service agencies and other partners in the justice/mental health field who deal with our clients on a regular basis in the GTA.

Staff continue to upgrade their skills and seek training in areas such as anger management, concurrent disorder, post traumatic stress disorder and trauma training, which will enhance their skills and help in the work they do with our diverse client base.

In the past year we have been visited by other service providers interested in setting up similar court support programs outside of Toronto and have lent our advice and expertise to them on an informal basis as well.

Mental Health Court Support Services Program Facts

APRIL 2008-
MARCH 2009

Number of clients referred to program 700 (both courts)

Percentage of clients who were homeless (College Park, 17%) (Old City Hall 18%)

Average age of clients served (College Park 45-54) (Old City Hall 35-44)

Gender (College Park Courts; women 41%; male 59%); (Old City Hall; women 30%; male 70%)

Percentage of clients with concurrent disorders (College Park 20%); (Old City Hall 26%)

Number of clients in Mental Health and Justice Housing Program 64

Collaborations and Partnerships

CRCT could not provide the wide range of services we do if we didn't work collaborative with many partner agencies. Some of the many organizations that we have worked with in the past year are listed below.

- 416 Drop-in
- ACCESS 1
- Access Alliance Multicultural Community Health Centre
- Accommodation, Information and Support (AIS)
- Across Boundaries
- Adelaide Resource Centre for Women
- Afghan Association of Ontario
- Afghan Women's Counselling & Integration Community Support Organization
- Anishnawbe Health Centre
- Building Bridges, Breaking Barriers Access Project
- Canadian Centre for Victims of Torture (CCVT)
- Canadian Mental Health Association
- CAS Scarborough
- Catholic Cross Cultural Immigrant and Settlement Services
- Central Neighbourhood House
- Centre for Addiction and Mental Health (CAMH)
- Centre for Excellence in Refugee and Immigration Studies (CERIS)
- City of Toronto – Family Residence
- Community Radio Golis
- Community Support and Research Unit of CAMH
- Consumer/Survivor Information Resource Centre of Toronto
- Cornerstone
- COSTI Immigration Services
- COTA Health
- Davenport Perth Neighbourhood and Community Health Centre
- Dr. Bob Heyding
- Dr. Shammi
- Dr. Steve Nugent
- East Scarborough Storefront
- Eden Community Homes
- Evangeline Residence
- Family Outreach and Response
- Florence Booth Shelter
- Fred Victor Centre
- Good Shepherd Homes Inc.
- Homes First Society
- Homeward
- Hong Fook Mental Health Association
- Houselink Community Homes
- House of Compassion
- Islamic Social Services and Resources Association
- LOFT
- Mainstay
- Manse Road Group Home
- Mary's Home
- Meeting Place Drop-in
- Mental Health and Justice Network
- Metro Housing and Support Agency Directors Group
- Midaynta Community Services
- Ministry of Attorney General
- Native Women's Resource Centre
- Neighbourhood Information Post
- Nellie's
- North York General Hospital
- PARC
- Parkdale CHC
- PASS Project
- Pathways
- Polycultural Immigrant and Community Services
- Progress Place
- Queen West CHC
- Red Door Shelter
- Regent Park CHC
- Rouge Valley Health System
- Sabawoon Afghan Family Education and Guidance Centre (SAFE Centre)
- Scarborough Addiction Services Partnership (SASP)
- Scarborough Housing Consortium
- Sistering
- Somaliland Women's Organization
- South Asian Women's Centre
- St. Christopher House
- St. Joseph's Health Centre
- St. Michael's Hospital
- Street Haven
- Street Health
- Sunnybrook Health Sciences Centre
- Syme-Woolner Neighbourhood and Family Centre
- The Salvation Army Hostel Services
- Toronto East General Hospital Withdrawal Services
- Toronto North Support Services
- University Health Network
- West Hill Community Health Centre
- Women's Own Detox Centre
- Women's Residence
- York University

Funders

CRCT is appreciative of the support offered by the following funders.

Toronto Central LHIN

The Ministry of Health and
Long-Term Care

The Ontario Trillium Foundation

The EJLB Foundation

The United Way of Greater Toronto



Community
Resource
Connections

of Toronto

366 Adelaide Street East, Suite 230
Toronto, ON M5A 3X9
t. 416.482.4103
f. 416.482.5237

www.crct.org