



*Coast Foundation Society (1974)*

**Strategic Plan**

**2005**

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# 2004 Coast Strategy Foundation

**Mission**  
 Coast Promotes Recovery of  
 Persons with Mental Illness

**Vision Elements**  
 Public awareness of Positive achievements of persons with mental illness & nature of recovery  
 Fewer Homeless & more persons with mental illness appropriately housed  
 Fewer service gaps - greater access to appropriate services  
 Fewer living in isolation - more fully participating in their community as a citizen, a volunteer, a worker

**Coast's Values**

<p><b>Values related to people of Coast</b>                  Health - <i>Mental, physical, spiritual and emotional</i>                  Recovery - <i>An individual journey</i>                  Respect - <i>Diversity, uniqueness and interdependence</i></p>	<p><b>Values related to the services Coast delivers</b>                  Partnering - <i>Peer support; internal and external</i>                  Person-centered - <i>individualized plans and choice</i>                  Integrity - <i>Honesty and fairness</i>                  Creativity and Innovation - <i>An entrepreneurial spirit</i>                  Stewardship - <i>Prudent and effective use of all natural, human and financial resources</i>                  Excellence - <i>Accountability, outcomes, service &amp; cost performance</i></p>
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**Strategic Themes**

<b>Pursuing Excellence</b>	<b>Responding to the Need</b>	<b>Building &amp; Reinforcing our Foundation</b>	<b>Engaging the Public</b>
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**Strategic Initiatives**

<p><b>Accreditation in 2006</b>                  - Implement Balanced Scorecard                  - Implement CRMS                  - Implement Goal Attainment Scaling                  - Develop Quality Coordinator position</p> <p><b>Develop Centre of Excellence</b>                  - Explore research partnership                  - Define concept more thoroughly                  - Test &amp;, if feasible, launch Capital Campaign</p>	<p><b>Increase housing by 10% per year</b>                  - Refine &amp; Implement Coast's Housing Plan                  * Sell &amp; Buy                  * Redevelop existing sites - eg. 11th &amp; Kingsway                  * Creative financing                  * Income Enhancement                  * Capital Fundraising</p> <p><b>10% Annual Growth in Jobs</b>                  - Develop Social Enterprises Society &amp; related businesses</p> <p><b>Clean Start</b>                  - Develop business plan</p> <p><b>Resource Centre</b>                  - Secure funding for 7-day week operation</p>	<p><b>Infrastructure development</b>                  - Homes Management                  - CQI Practices                  - Internal Communications</p> <p><b>Information Management</b>                  - CRMS rollout                  - Staff Training</p> <p><b>Human Resources</b>                  - Develop Long Term HR Strategy</p>	<p><b>Communications Plan</b>                  - Increase dedicated staff hours                  - Consider political strategy                  - build alliances with business, media and health community                  - support funding for important services</p> <p><b>Volunteer Program</b>                  - find funding for Volunteer Coordinator                  - develop Volunteer plan</p>
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**Strategic Initiatives**

## Executive Summary

Coast Foundation Society has had a long history of developing and providing an array of important community based programs supporting the recovery of persons with mental illness. It has become well known in the community for the quality and extent of its housing and community support and employment services. It also is known for its ability to develop and maintain creative partnerships with a broad range of non-profit organizations.

In the last few years, its visibility provincially has increased dramatically with the launch of the annual Courage To Come Back Awards in 1999 and the recent development of the Coast Mental Health Foundation in 2002. As well in 2003, Coast became the first organization of its kind in Canada to be accredited by the Canadian Council of Health Services Accreditation (CCHSA).

2005 and beyond sees the situation facing people with mental illness deteriorating and the context for Coast's work becoming more complicated. Cost of living and particularly housing in Vancouver is the highest in the country, while the "welfare" system is very porous leaving many people with serious mental illnesses living well below the poverty line and having an even more difficult time just surviving, let alone pursuing recovery. Long term financial restraint by the provincial and federal governments have strangled community resources for the past 10 years. As well, the concurrent reduction of provincial mental health resources and creation of 6 very large health authorities has reduced centralized mental health leadership. What's left has been consumed with the planning for the closure of Riverview Psychiatric Hospital and the transfer of resources to smaller regional facilities resulting in little money and time to address capacity concerns in the community. The combination has created larger "gaps" in the mental health system, more complaining about problems resulting from visibly mentally ill individuals in the community and little coordinated leadership or funding to respond.

In this context, Coast is proposing a four part strategy to take it forward for the future:

1. Pursuing demonstrably excellent services
2. Increasing service capacity to responding to the need
3. Building & reinforcing our infrastructure
4. Engaging the Public

The pursuit of excellence is really the demonstration of value to our funders and donors and most importantly, the people we serve. In an ever more competitive environment we must be able to demonstrate that by investing in Coast there is a real benefit to our clients. It is also involves the development of a quality culture at Coast, this is the ability of the organization to "frankly" assess itself and solve problems before they happen and improve on service and operational processes.

Responding to the need, is a pressure put on Coast to either develop or be a catalyst for the development of additional housing and community programs to fill the gaps in the support

system. In our high cost, low resource environment, innovative partnerships and financing schemes may be necessary in order to achieve this goal.

Building the infrastructure of Coast is an enabling strategy to address all of the other elements. Coast, though in a context of fiscal restraint, has added several programs over the past four years, which has put an increased pressure on our existing staff resources. To fulfill the other strategies, we need improved information management and support for critical functions.

Finally, we realize that public support can be a great enabler or disabler for people with mental illness and directly contribute to Coast's success. We rely more on fundraising efforts to develop and deliver critical services and we must earn and keep the trust of the public in order to successfully pursue our mission.

Coast will be monitoring achievement of these strategies through the implementation of a balanced scorecard. This is a means of monitoring quality at all levels of the organization through significant quality dimensions.

## **History**

Coast is celebrating its 30th anniversary in 2004. Formed in 1974 as part of the movement to provide better services to individuals living in the community with a mental illness, Coast has grown into a leading organization in the community mental health field. It now has over 540 people in supported housing, operates 10 Community Homes, 8 Transitional Cottages at Riverview, provides a large employment oriented Clubhouse & PACT employment programs on East 11<sup>th</sup> and a diverse Mental Health Resource Centre in Vancouver's downtown south. It also has developed a unique Discretionary Trust Program serving almost 200 clients.

Coast has always kept pace with the field. It has developed apartment housing that is second to none in building quality and support for residents. The Clubhouse is modeled on the well-recognized Fountain House program in New York City. More recently, Coast has demonstrated leadership in using partnerships to develop housing and has become the first organization of its kind accredited through the Canadian Centre for Health Services Accreditation.

Coast has always valued and fostered the participation of its members. The organization has adopted and strives to meet key psychosocial rehabilitation principles:

- Providing individuals with a sense of hope,
- Respecting individual differences,
- Offering choices and the preserving the right to direct one's own affairs
- Building on strengths rather than focusing on weaknesses.

Coast's development has occurred in partnership with other non-profit agencies that have emerged in Vancouver to meet the needs of people who have a mental illness. Coast is now

part of a complex network of services and Coast serves its members by both providing direct services and assisting them to access a broad range of other mental health and community support services.

With its growth and with the restructuring that has occurred in health care, Coast now stands as one of the largest autonomous organizations serving people who have a mental illness in BC and as a significant player in the field in Canada.

In the last six years Coast has raised its public profile by sponsoring the very successful Courage to Come Back campaign. In doing this, Coast has profiled the achievement of people who overcome disabilities and has confronted the stigma that is associated with mental illness. The success of the Courage campaign positions Coast to raise its profile on behalf of people who are recovering from a mental illness.

More recently Coast has incorporated an important affiliated organization, Coast Mental Health Foundation, which, though still in its infancy, is operating the Courage Awards and is leading Coast's fundraising and community relations efforts.

## **Coast Mission Vision & Values**

### ***Mission***

Coast's Board has recently reviewed and revised its Mission to read simply:

*Coast promotes recovery of persons with mental illness*

### ***Coast's Vision***

Coast's vision was written in 2000 and stated as:

*Coast has a vision that in five years everyone will be aware of the positive achievements of individuals who have had a mental illness. They will be aware that recovery is achieved through each individual's effort supported by a community that provides appropriate formal services and informal supports.*

*This awareness will be reflected in greater public and private support for people with a mental illness including:*

- *More people recovering from a mental illness will live in appropriate housing and fewer will be homeless,*
- *More people recovering from a mental illness will be able to access the full range of services that they need and there will be fewer who are receiving no*

- *support at all,*
- *More people recovering from a mental illness will be able to access recreation, volunteer and employment opportunities and fewer will be living in isolation,*
- *There will be more resources to enable universal access to needed services.*

*Coast Foundation will be associated with the achievements of individuals recovering from a mental illness as an organization that provides exemplary services in a member-driven cooperative community and as part of a network of organizations supporting recovery.*

Subsequent to the Board of Director's planning session in June, 2004, the Vision needs to be updated to reflect specific elements of that planning session which included:

- Growth targets for Housing & Employment
- Development of a Centre of Excellence
- Development of a network of Social Enterprises

It is recommended that the Vision statement needs be updated by the Board to address elements from recent planning activities.

## **Coast's VALUES**

**In 2003, Coast's Board approved a consistent values statement for Coast.**

Values related to the people of Coast:

- Health  
*Mental, physical, spiritual and emotional*
- Recovery  
*An individual journey*
- Respect  
*Diversity, uniqueness and interdependence*

Values related to the services Coast delivers:

- Partnering  
*Peer support; internal and external*
- Person-centered  
*Individualized plans and choice*
- Integrity  
*Honesty and fairness*
- Creativity and innovation  
*An entrepreneurial spirit*
- Stewardship  
*Prudent and effective use of all natural, human and financial resources*

- Excellence  
*Accountability, outcomes, service and cost performance*

# Strategy Development

## **Strategic Themes**

### **1. Pursuit of Excellence**

The foundation of Coast's future success will be its ability to demonstrate that it provides important community mental health services which efficiently promote recovery of persons with mental illnesses.

This is important as government funders and private donors are increasingly value conscious – needing to invest their own scarce resources in organizations that provide quality programs and services which promote recovery and who can objectively demonstrate the impact of their services.

Coast, to effectively pursue its mission, will need to continue its pursuit of quality and value in its services.

#### **1.1 Accreditation in 2006**

Coast was the first organization of its type to received accreditation through the Canadian Council of Health Services Accreditation in the fall of 2003. As a first review, the accreditation process identified several areas that needed improvement over the next three years. Some significant areas include:

- Lack of an organizational wide quality framework
- Lack of a formal ethics review process
- A need for a policy on research
- A need for a formal Human Resources and Information Management plans
- A coordinated infection control policy

Coast needs to continue to prepare for a successful 2006 Accreditation by:

- Implementing the Balanced scorecard as a foundation for a quality framework
- Fully implementing the CRMS Client Information System (CIS) as a means of monitoring and reporting on clients response to services
- Complimentary to the CIS is the Implementing an agency-wide Goal Attainment System to provide a standardized treatment or goal measurement tool
- Developing an Agency-wide Quality Coordination position at the Management level to coach, project manage, and facilitate the continued pursuit of quality in its services

## 1.2 Developing a Centre of Excellence

The concept of a Centre of Excellence has been around for some time in Health Care and generally speaks to specialized programs that combine *innovative multi-disciplinary research endeavours and action-oriented services*. Good examples of this include For example, the Centre of Excellence for HIV/Aids at Providence Health Care.

Centres' of Excellence offer many benefits including:

- Bringing more public and government attention to their "cause";
- Attracting research funding which may help pilot innovative community programs as well as prove the benefit of existing services;
- Facilitating fundraising for the centre's development– people like to give to quality services

The Board identified developing a Centre of Excellence at its 2004 retreat as part of the planning for the development of a building on the parking lot of Coast's 11<sup>th</sup> & Kingsway building.

Though Coast has a long history of developing innovative and effective community services for persons with mental illness, since the late 1970's (when it had a research director), it has not had the research element that must be a key part of a Centre of Excellence.

To further pursue this concept Coast must:

- Explore the possibility of engaging research partner(s), such as the Mental Health Evaluation and Community Consultation Unit at UBC, to facilitate the development of a Centre of Excellence;
- Engage the Coast community more broadly to discuss the interest in this strategic direction;
- Redefine and then test the concept in combination with the campaign feasibility study for the new Centre.

## 2. Responding to the Need

The need for effective community mental health services is greater than ever. With the slow closure of Riverview Hospital, there has been consistent downstream pressure on the mental health system to respond to the needs of very disabled individuals. This has resulted in an increase in acuity of clients across all spectrums of Coast's services. Of course, the challenges of working with people with addictions complicates efforts to support recovery.

In addition, the lack of a national housing program (since 1993) and a provincial housing program (since 2001) has exacerbated the shortage of affordable housing for persons with mental illness (as well as other vulnerable populations).

The situation facing people with mental illness has been additionally complicated through other public policy changes that has tended to make it more difficult to access “welfare”<sup>1</sup>, put time limits on some categories as well as waiting periods. This has placed additional pressure on some of the most vulnerable individuals who may be homeless or have other complex health needs.

Unemployment among persons with mental illness is unknown (it isn’t tracked), but it is estimated in the literature to be roughly 75 – 80% or more of persons with serious mental illness. This is one of the highest rates of unemployment for any category of disability.

The Board, at its recent retreat set two ambitious service growth targets for the society in the area of Housing and in Employment.

## **2.1 10% Annual Growth in Housing**

### ***Refine & Implement Coast’s Housing Plan***

A special Housing strategy planning session was held in May, 04 to develop strategies which would increase the capacity of Coast to develop housing. Seven strategies were identified which should be pursued, these include:

**Sell & Buy** - Reviewing Coast’s current properties and see if some should be sold and proceeds used to develop new or replacement facilities.

**Redevelopment of existing sites** – review current sites, particularly 295 E. 11<sup>th</sup> and see if additional housing could be included on the sites.

**Creative Alternative Financing** – identify and evaluate and if feasible implement, alternative financing strategies such as life leases, trust purchasing, etc.

**Income Enhancement** – look at strategies (employment & advocacy) to increase client incomes so they can acquire decent market housing.

**Capital fundraising Model** – Designate fundraising target for a new housing project, test concept with feasibility study and, if feasible, proceed with capital fundraising campaign.

**Mega-campaign** – Similar to above, but a significant (\$50 Million) campaign to build a war chest of strategies to “end homelessness”

Since this strategy was identified, the Board suggested building a fundraising case to build a Housing project on the Parking lot at 11<sup>th</sup> & Kingsway. It is possible to put 60 to 70 units of housing on that site within current zoning.

Various partnership opportunities have proven successful in the past and should again be pursued by the society. Opportunities like the 2010 Olympic games “athletes village” provide some opportunity to piggyback on current public policy activities. Finally, housing in Vancouver is so expensive, it must be supported by all levels of governments. Coast must include housing advocacy in a Communications strategy.

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<sup>1</sup> The generic term is used here to describe a complex Provincial income support system for people on regular welfare (\$500 per month), people with multiple barriers (\$600 per month) and persons receiving disability benefits (\$780 per month) all including \$325 provision for shelter costs.

The Housing strategy needs to be further evaluated and a more specific action plan worked out, particularly in context of the threat to close housing by the Vancouver Coastal Health Authority.

## **2.2 10% Annual Growth in Employment opportunities**

The benefits of full or even part-time gainful Employment are immense for persons with mental illness. Work provides economic independence from a harsh welfare system, immediately “cures” homelessness, provides a social network, provides much positive reinforcement, a professional (versus patient) identification, etc.

Participation in the work continuum – volunteer > casual/transitional > part-time > full-time is an important indicator of rehabilitation response and recovery.

### ***Developing Coast’s Social Enterprises***

Social enterprises are basically affiliated profit-oriented businesses that employ persons with disabilities in the businesses workforce. There is a growing movement in this field as it is effectively limitless in its opportunities and variety. The business customers, in essence, pays for the goods or services offered by the social enterprise and in turn pays the wages of the participants. Government or philanthropic funding can then be focused to support the training and rehabilitation efforts.

Coast has been attempting to enhance its employment programs through the development of affiliated social enterprises (Coast Landscapes, Sewing with Heart, Coast Catering). Recently it has contracted with an organization to review how best to pursue the development and management of social enterprises within Coast.

## **2.3 Clean Start (concurrent disorders)**

A program area piloted with the aid of a generous anonymous<sup>2</sup> donation is *Clean Start*. This initiative is aimed at building Coast’s capacity to support persons with an addiction in addition to mental illness. It is estimated that this is a very common occurrence in Vancouver with more than 50% of persons with a serious mental illness also having an addiction. Of course, an addiction alone is challenge for someone to overcome or successfully manage, adding a serious mental illness makes it an even more daunting task. Anonymous donor funding completes in the 2005/6 fiscal year, but the need for such an initiative will persist and expertise in this area will be very important for Coast’s competitiveness into the future.

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<sup>2</sup> The Anonymous donor provided a significant challenge donation to Coast over 3 years providing program enhancements and development opportunities in several areas

Coast should:

- Consider developing a consulting business plan for the Clean Start program
- Pursue specialized partnerships to support initiative after Anonymous donor funding ends.
- Maintain its emphasis on support and recovery for persons with concurrent disorders

## **2.4 Operating Mental Health Resource Centre 7 days a week**

The Mental Health Resource Centre on Seymour provides a critical support and access function for many people with mental illnesses. It is in a central location in the downtown core and has a wonderful facility. Unfortunately the centre has never been fully funded by VCH and has had to rely on a high degree of fundraising to maintain its current six day week operations.

The Mental Health Resource Centre can be seen as a best-practice service on many levels in responding to individuals with mental illnesses and addictions.

The centre's operations should be maximized for best community impact by operating on a 7-day week schedule with a full array of services including community outreach, peer support and member run initiatives.

To achieve this goal Coast needs to:

- Lobby VCH for additional core funding to permit seven day week operation for its core services
- Formalize partnership with Providence Health Care to second complementary professional staff as well as access potential funding to enable enhanced programming and to respond to primary care needs.
- Integrate MHRC services into Centre of Excellence Strategy
- Work with local community to see MHRC as a solution to some of the intense community concerns as well as to look at service/business partnerships.

## **3. Building and reinforcing the Foundation**

Since the last significant strategic planning exercise in 2000, Coast has gone through a major transition in all program and operating areas. These changes have increased Coast's relative competitiveness in the community mental health field vis a vis business and non-profit competitors and has increased its ability to continue to provide valuable mental health services.

In the past two years, Coast has gone through successful Accreditation, developed a new and successful partnership with the Forensic Psychiatric Commission and has added four

residential care facilities. Each of these activities has taken considerable efforts from key leadership staff and has increased the administrative burden on the organization. In addition, the Coast Mental Health Foundation is now in year two of its development and has added new directors and adopted a new fundraising strategy (Raising More Money<sup>3</sup>) to complement its very successful Courage To Come Back Awards event, its annual campaign and major gifts programs.

### **3.1 Infrastructure development**

Coast's infrastructure is both stretched and tired after the efforts of the past four years and needs to be reconstituted and reinforced in order to reinvigorate itself to take on future challenges. Coast needs to invest in training for staff, improve its performance management and look at the addition of key roles which will support the organization in pursuit of its mission.

Areas of need include:

Community Homes – with 10 homes to manage after October, 2004, the management needs of the homes must be reviewed

Quality Management – to follow-up on the 2003 accreditation and oversee the implementation of the CRMS & Balanced Scorecards and lead the full implementation of Continuous Quality Improvement practices across the organization

Communications – To achieve Coast's mission, Coast needs to begin to communicate the needs of its constituents to a broad community of publics.

### **3.2 Information Management**

Coast's information management strategy needs to be written and executed. Coast must implement the client information system (CRMS), including the customization of the system, rollout across the agency and, most importantly, the training of staff in the use of the system.

### **3.3 Human Resources Support**

In the context of the considerable change Coast has been through and the demands on the current staff, Coast needs to prepare a long-term human resources strategy to support the current staff, project long term needs and

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<sup>3</sup> Raising More Money is a model developed out of Seattle and focuses introducing people to the mission of the organization and hopefully recruiting multi-year donors at a once-per-year, one-hour event. Coast's first breakfast raised over \$100,000 in one hour over 5 years.

## 4. Engaging the Public

With the incorporation of the affiliated Coast Mental Health Foundation, Coast has fully adopted fundraising as an essential element to its long term success and viability as an organization. Since 1993 with Hydrecs House<sup>4</sup>, Coast has been utilizing individual and corporate philanthropy to facilitate the pursuit of its Mission. In 1994, Van City Credit Union initiated the *Everyone Deserves a Home* campaign in support of St. Margaret's Apartment raising over \$90,000, half went to St. Margaret's the balance was used to support the Mental Health Resource Centre Capital Campaign.

In 1999, Coast initiated the province wide Courage To Come Back Awards. This has been a truly inspirational awareness and fundraising event averaging over 600 people at the gala dinner since its inception and this year netted over \$100,000 as a fundraiser.



Coast Mental Health Foundation adopted a fundraising model called Raising More Money in 2003 which introduces people to Coast's Mission through monthly tours and a once a year, one-hour, ask event.

### 4.1 Communications plan

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<sup>4</sup> A 9 unit apartment block built with funds provide by the B.C. Hydro Employees Community Services Fund (HYDRECS). Hydro employees raised over \$215,000 from roughly 6,000 employees for the project and with corporate matches, the contribution from Hydro reached \$300,000 towards the \$1.2 Million cost of the project.

An element in the 2000 strategic plan and every strategic review since was the development of a Communications plan for the organization. In 2004, CMHF and CFS jointly sponsored a Communications committee with key members of both Boards and outside expert facilitation. A communications plan is underway, but Coast needs more than just a plan:

Coast needs to dedicate staff resources to the communications function to support efforts of the externally focused committee, but also spearhead internal communications efforts.

Coast needs to consider a skilled political lobbying strategy to further issues facing people with mental illness. Coast needs to utilize its excellent rapport with business leaders, media and the health and disability community to build alliances and bring issues forward.

The ultimate communications objective is to support the development of adequate resources for people with mental illnesses – access to treatment; decent homes; employment opportunities.

## **4.2 Volunteer Program**

An issue identified in the 2000 Strategic plan was the need for Coast to develop a formal volunteer program to harness the efforts of public volunteers, introduce them to the mission of Coast and, of course, enhance the quality of Coast's services and systems. The number of volunteers active in Coast has increased since then, but the full utilization of the increasing interest is being frustrated by lack of a consistent volunteer coordinator.

In addition the Raising More Money fundraising model is also identifying people who want to contribute with their time rather than or as well as through donations. It is not satisfactory to possibly turn away or frustrate this volunteer interest.

Coast needs to either dedicate fundraising revenues or pursue direct funding for a volunteer coordinator to screen and coordinate interest in volunteering at Coast.

## Background Information

### Environmental Context

The need for quality community based mental health services has never been higher in the Lower Mainland. There are many significant pressures that complicate the ability of Coast, or any other agency, to respond adequately to the need. These include:

- Downsizing and imminent closure of Riverview Hospital<sup>5</sup>
- 9 years of consistent budgetary restraint in a context of rising costs<sup>6</sup>
- Loss of National and Provincial Housing Programs<sup>7</sup>
- Increased complexity of health and addiction needs among people with mental illness<sup>8</sup>
- Increased poverty and its symptoms – homelessness<sup>9</sup>; diseases; reduced life expectancy
- Macro-Regional Health Management Model which has “buried” Mental Health Leadership<sup>10</sup>
- Pressure at all areas of mental health services
- Severe financial pressures and limiting funding opportunities for services which are increasingly being based on cost competitiveness and demonstrated outcomes/value
- Private sector competitive pressures
- Aging population leading to declining general health and increased utilization (competition for) of health resources
- Worry that “visible” unmet need may lead to a concerted NIMBY response which could spill over and impact existing services and frustrate the development of new programs
- Centralized Labour relations has provided cost control, but is cumbersome and has eroded Coast’s flexibility<sup>11</sup>
- Large and complex ethnic makeup in the community has significant implications for service delivery<sup>12</sup>

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<sup>5</sup> Riverview is scheduled to close in 2007, most mental health planning efforts and all new funding is focused on this goal.

<sup>6</sup> Vancouver has most expensive real estate in Canada and has experienced highest inflation, particularly in housing, in past year.

<sup>7</sup> There are some limited and targeted one-time funding opportunities (SCPI, Vancouver Agreement)

<sup>8</sup> Over 50% of persons with mental illness also experience co-occurring Addictions.

<sup>9</sup> The City of Vancouver estimates that 500 – 1200 people sleep outside on any given day with a large proportion having a mental illness.

<sup>10</sup> Provincial Mental Health Leadership is vastly diminished with only token staff complement; regionally, mental health management is identifiable at 3<sup>rd</sup> or 4<sup>th</sup> echelon of the organizational chart.

<sup>11</sup> Coast as an individual employer has limited “vote” influence in Bargaining with a broad-based community tabled dominated by Home Support Employers and Massive cost-conscious Health Authorities.

<sup>12</sup> The Lower Mainland is the most ethnically diverse area in Canada and probably North America. This complicates communications efforts and service delivery for individuals with mental illness and their families.

In contrast to the above, there are several elements in the environmental context in which Coast operates which will support its efforts to pursue its mission:

- Greater acceptance of Mental Health needs and causes as a bona-fide philanthropic need<sup>13</sup>
- Some competitive organizations may find financial and program pressures more difficult to bear than Coast and may be unable to cost-effectively operate <sup>14</sup>
- Increasing public policy cry for National/Provincial Housing programs in response to increasing visibility of homelessness.
- The Vancouver 2010 Olympic games provides some opportunity to piggyback on facility development and employment opportunities, though it also provides a significant sponsorship risk<sup>15</sup>.
- Greater corporate interest in mental health<sup>16</sup>

## ***Ethnicity***

Vancouver's CMA had the highest proportion of visible minorities of all such urban areas in Canada, according to the 2001 Census. About 37%, or 725,700 people, belonged to a visible minority group, up from 31% in 1996 and 24% in 1991. Vancouver's visible minority population was almost entirely Asian, primarily a result of immigration trends in the past 20 years. One-third of people in Vancouver was Asian in 2001, up from 28% in 1996 and 21% in 1991. Over one-half (53%) of Vancouver's Asian population was Chinese. The remainder was South Asian (including East Indian, Punjabi and Pakistani), as well as Filipino, Korean, Southeast Asian or Japanese.

Vancouver was home to 342,700 Chinese in 2001, up from 279,000 in 1996 and 175,200 in 1991. Its Chinese population accounted for 17% of its total population, the highest proportion of any census metropolitan area. In contrast, Toronto's Chinese population of 409,500 accounted for only 9% of its population.

Vancouver's 164,400 South Asians, the second largest visible minority group, represented 8% of its population. The number of South Asians increased from 120,100 in 1996, when they represented 7% of the population, and 86,200 in 1991, when they accounted for only 5%.

Mental illness cuts across all ethnic barriers equally well, but each cultural group responds differently to people and issues surrounding mental illness.

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<sup>13</sup> This is tempered by the challenge of increasing competitive pressures for fundraising dollars.

<sup>14</sup> Coast has "won" some Tenders recently due to its size and quality and this trend could continue into the near future.

<sup>15</sup> The Sydney Games in Australia resulted in a significant diversion of corporate sponsorships away from charities in the community to the Olympic games.

<sup>16</sup> The emergence of the Business & Economic Roundtable on Mental Health and recognition that Mental Health issues – specifically depression and anxiety disorders – are the fastest growing category for long term absences from the workplace and rank #2

Coast needs to increase its cultural competence to assure it serves its current clients with mental illness well and to create a generally more supportive community context. Strategies include:

- Recruitment of appropriate ethnic representatives to the Boards and Committees of Coast
- Explicitly include ethnic issues in communications plans
- Reviewing staff composition and consider ethnic specific roles
- Review opportunities for specialized services such as Yaffa House<sup>17</sup>

#### Top 10 countries of birth of 1990s' immigrants, Vancouver, 2001\*

	Immigrated 1991-2001	%
<b>Total of all 1990s' immigrants</b>	<b>324,815</b>	<b>100.0</b>
China, People's Republic of	58,495	18.0
Hong Kong, Special Administrative Region	48,915	15.1
Taiwan	38,125	11.7
India	30,445	9.4
Philippines	25,865	8.0
South Korea	14,840	4.6
Iran	12,205	3.8
Viet Nam	6,810	2.1
United States	6,225	1.9
United Kingdom	6,205	1.9
* Includes data up to May 15, 2001		

#### ***Planning Implications of External Review***

The challenging context will press Coast to maximize the use of its current resources and explore innovative ways to develop new opportunities. In particular these areas must be developed for Coast to compete into the future:

- Coast must be able to demonstrate cost efficiency and program value to retain or increase funding opportunities;
- Coast must be able to effectively participate and lead public policy deliberations, particularly in the area of housing, which is so expensive and needs significant senior government support to be viable.
- Coast must be able to deliver culturally competent services

<sup>17</sup> Yaffa House is Vancouver's first Kosher group home, operated by Coast in partnership with Yaffa Housing Society – a family supported Jewish organization – and Vancouver Resource Society

- Coast must balance opportunity and risk in developing new services

## **Internal Situation**

Since the comprehensive Strategic Plan was adopted in 2000, Coast has persistently pushed forward in order to achieve the ambitious goals that were set out in that document<sup>18</sup>. These goals were pursued in the context of major reorganizations in the Health Care system and significant resulting financial challenges.

The Board, Staff and Members worked extremely hard at addressing issues as they arose and continued to focus on the longer term direction for the society to better set the stage to meet these ambitious goals.

## ***Achievements from 2000 Strategic Plan***

There were many recommendations outlined in the 2000 Strategic plan that have been fully or partially achieved by the Society. These include:

- Approval of new Mission, Vision and articulation of core values
- Developing the interdependent Coast Mental Health Foundation to spearhead fundraising and community relation's efforts.
- Becoming the first organization of its kind in Canada to achieve Accreditation through Canadian Council of Health Services Accreditation (CCHSA)
- Reorganization and development of unique Discretionary Trust Program
- Establishment of dedicated HR Advisor position
- Establishment of a new Governance Model articulating Board, Committee and Management Responsibilities
  - Establishment of Annual Open Spaces Members & Staff forum
  - New Committees (Governance, Quality Improvement & Risk Management, Communications)
- Development of many Donor funded programs<sup>19</sup>
- Achieving capacity development through Program Additions and Enhancements<sup>20</sup>
- Significant reorganization of every area of the society to respond to financial challenges, become efficient and focus/specialize efforts.
- Developing a service development criteria policy that helps guide decisions on program development opportunities.
- Initiate in-service training programs on Psychosocial Rehabilitation concepts

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<sup>18</sup> Building the Coast Community: Celebrating Achievement, Creating Opportunity, April 2000

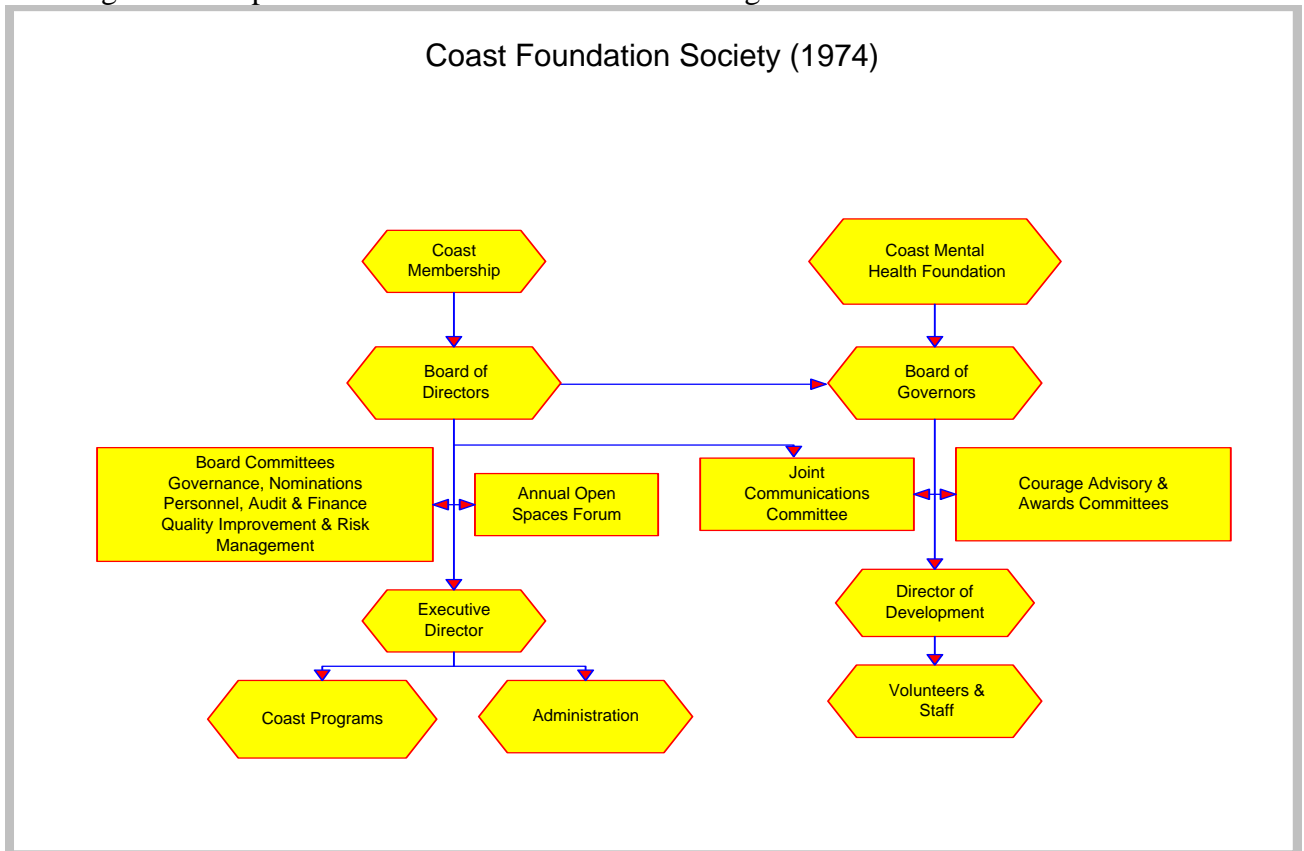
<sup>19</sup> Resource Centre Outreach, Family Support, PSR Programs, Peer Support, Transitional Housing, Job Developer/Landscaping

<sup>20</sup> New Programs include: Candela Place (Partnership with MCC Housing), Nurses Alumni Apartments, Clean Start, Riverview Cottage Programs I & II, Bridge House, KS Homes (Shaw, Chester & Pender effective Oct. 2004), Watson House (Spring 2005), Coast Landscapes,

- Development of excellent computer infrastructure and internal communications (email) system
- Developed Concurrent Disorders expertise and provided extensive training in this important area
- Preparing Long term capital plan and addressing several major capital renovations to most seriously compromised buildings<sup>21</sup>

## Governance

Coast has gone through a significant transition in its governance model since the Strategic Plan in 2000. There are two significant changes, one the development of an affiliated Coast Mental Health Foundation with the explicit mandate to raise funds and awareness for Coast’s services. The second was a review and redefinition of the Governance model resulting in the adoption of a modified Carver<sup>22</sup> model of governance.



Coast Mental Health Foundation was incorporated in 2002. The members of CMHF are the directors of Coast Foundation Society who appoint the Governors for CMHF. Currently there are 11 governors in CMHF two of whom sit on both boards.

<sup>21</sup> Coastview, Frances Court, McLean, China Creek, and Clark Apartments, Coast Clubhouse/Admin Building

<sup>22</sup> Dr. John Carver is a non-profit governance specialist who has developed a governance model when strictly applied would have boards develop policy and staff implement, with Boards having little interest in the how, only the results.

The new Governance model for Coast was adopted in the summer of 2002 and involved the review and re-articulation of the mandate of all committees of the board and the introduction of a second membership based consulting event called Open Spaces to complement the Annual General Meeting of the Society.

Coast's membership stands at roughly 400 members with the large majority being clients of the society. The membership elects an 18 person Board of Directors of whom 6 are clients of the society representing one of four constituencies and 12 are at large directors. In addition to the Open Spaces session in the spring, Coast has an ongoing Planning & Partnership Committee that includes 2 directors, management & line staff and client representatives from across the organization to review new and current program issues.

## Finances

Though funding for most programs has either been frozen or declined since 2000, the following table indicates overall funding growth over the four years was over 23%, mostly due to the increase in the number of programs and expanded fundraising proceeds. This growth has been achieved through Coast becoming more cost/effective, reducing the average cost of service and, as a result, becoming competitive when tendering on new programs through Health Authorities.

Revenues	Fiscal year				
	2000	ending	2004		
Government					
VRHB	\$5,425,314		\$6,466,399		
PHSA			\$456,325 <sup>23</sup>		
MHR	\$512,944		\$592,501		
BCHMC	\$1,385,172		\$1,751,848 <sup>24</sup>		
CMHC	\$186,597		\$121,101		
HRDC	\$379,175		\$307,599		
Total Government		\$7,889,202	79.6%	\$9,695,773	79.0%
Fundraising					
Gaming	\$163,128		\$191,896		
Other	\$169,051		\$495,906		
Total Fundraising		\$332,179	3.4%	\$687,802	5.6%
Rents		\$1,294,830	13.1%	\$1,493,145	12.2%
Other Income		\$398,013	4.0%	\$399,001	3.3%
<b>Total Revenues</b>		<b>\$9,914,224</b>		<b>\$12,275,721</b>	
<b>Revenue Growth</b>	<b>23.82%</b>				

<sup>23</sup> Provincial Health Services Authority funds Coast Cottage Program at Riverview – has since doubled in scope in 2004/5

<sup>24</sup> This includes one-time funding of \$485,273 for major repairs to Frances Court & McLean – offsetting expense included in Property & Maintenance costs. Net annual operating funding from BCHMC has declined.

<b>Expenses</b>				
Salaries & Benefits	\$5,365,965	53.0%	\$6,481,812	52.8%
Interest	\$898,770	8.9%	\$740,389	6.0%
Program Costs	\$537,145	5.3%	\$748,331	6.1%
Property & Maintenance Costs	\$2,028,208	20.0%	\$2,913,606	23.7%
Supplies & Office	\$480,845	4.8%	\$610,666	5.0%
Staff & Professional costs	\$318,498	3.1%	\$314,753	2.6%
Depreciation	\$487,016	4.8%	\$465,906	3.8%
<b>Total Expenses</b>	<b>\$10,116,447</b>		<b>\$12,275,463</b>	
<b>Net Operating Surplus (deficit)</b>	<b>(\$202,223)</b>	<b>-2.00%</b>	<b>\$258</b>	<b>0.00%</b>

Funding is still a critical concern with one program area; Coast Mental Health Resource Centre is seriously under-funded and relying heavily upon proceeds from fundraising. As well, infrastructure needs are not explicitly funded and most of the new projects provide little overhead towards core costs.

What's not presented in the income statement is the growth of the Coast Trust program. This program now has almost 200 trusts under administration with a value of roughly \$4 Million. Though this program is in better shape than it was in 2000, it still needs to become more cost effective in order to be viable over the longer term. This program has a strategic review scheduled for late September.

## **Facilities**

Coast has a diverse array of housing and community programming properties throughout the City of Vancouver and in Coquitlam. Though Coast owns a substantial number of properties (often with significant use restrictions), many of its properties are either on leased land, which limits Coast's tenure, or it is either leased or provided as part of its operating agreements (see table).

	<b>Sites</b>	<b>Cost</b>
<b>Owned Properties</b>	<b>24 sites</b>	<b>\$10,210,957</b>
<b>Leasehold Properties</b>	<b>6 Sites</b>	<b>\$8,663,331</b>
<b>Leased Sites (free)</b>	<b>7 sites</b>	<b>Nominal</b>
<b>Partnership sites</b>	<b>4 sites</b>	<b>Nominal</b>
<b>Total Sites</b>	<b>41</b>	<b>\$18,874,288</b>

30 sites require Coast to maintain and repair and renovate as necessary, while the 11 Leased/Partnership sites are maintained by others<sup>25</sup>. Coast properties have had an extensive review undertaken over the past few years and many significant and costly issues have been addressed<sup>26</sup>.

Only a few buildings remain to have significant structural issues addressed:

- Cherry Doors Community Home – which is totally unsuitable for its current residents and should be rebuilt or, if that is not feasible, sold and funds used to reinvest in new housing.
- St. Margaret's Apartments – has significant water penetration problems and is on BCHMC's priority list

Operationally this area of Coast has had a dramatic transformation since 2000 with elimination of the position of Resident Managers in most of the apartment blocks replaced by a crew of Building Operators and Maintenance workers who can be assigned to address facility maintenance and repairs when and where needed.

## **Programs**

Coast's programs have evolved from the early 70's with its first Drop-in centre and the Hooper Apartments. It now offers the one of (if not the) largest and most diverse array of supported housing for persons with mental illness in Canada. Many of its housing programs have pioneered new, cost effective approaches which now have been adopted by the field.<sup>27</sup>

Coast programs have adopted the Psychosocial Rehabilitation philosophy as a backbone of their service philosophy which relies on key principles

## **Core Principles of Psychosocial Rehabilitation<sup>28</sup>**

- Recovery is the ultimate goal of PSR. Interventions must facilitate the process of recovery.
- PSR practices help people re-establish normal roles in the community and their reintegration into community life.
- PSR practices facilitate the development of personal support networks.
- PSR practices facilitate an enhanced quality of life for each person receiving services.

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<sup>25</sup> For Example, BC Buildings Corporation maintains the 8 Coast Cottages, Affordable Housing maintains Seymour Place, MCC Housing maintains Candela Place, Vancouver Resource Society maintains Yaffa House.

<sup>26</sup> Total re-pipes of several buildings. Several buildings have had significant water penetration problems fully addressed.

<sup>27</sup> Block Apartments, Transitional Housing, Supported Independent Living, were founded by Coast as well as innovative financing systems like Hydrecs House, St. Margaret's Apartments, Yaffa House, and other "Partnership projects".

<sup>28</sup> Source, International Association of Psychosocial Rehabilitation Services

- All people have the capacity to learn and grow.
- People receiving services have the right to direct their own affairs, including those that are related to their psychiatric disability.
- All people are to be treated with respect and dignity.
- PSR practitioners make conscious and consistent efforts to eliminate labeling and discrimination, particularly discrimination based upon a disabling condition.
- Culture and/or ethnicity play an important role in recovery. They are sources of strength and enrichment for the person and the services.
- PSR interventions build on the strengths of each person.
- PSR services are to be coordinated, accessible, and available as long as needed.
- All services are to be designed to address the unique needs of each individual, consistent with the individual's cultural values and norms.
- PSR practices actively encourage and support the involvement of persons in normal community activities, such as school and work, throughout the rehabilitation process.
- The involvement and partnership of persons receiving services and family members is an essential ingredient of the process of rehabilitation and recovery.
- PSR practitioners should constantly strive to improve the services they provide.

## **Coast Community Programs**

Coast's programs started in the community with the first drop-in centre in Mount Pleasant in 1972. They have grown and expanded since then to include a greater emphasis on supporting people to return to work, adoption of PSR principles, and, with the introduction of the Mental Health Resource Centre to the downtown, an increased emphasis on responding to basic human needs and supporting the connection of individuals to supported environments

### **Clubhouse & Pact**

Coast's clubhouse evolved from the original drop-in centre and was modeled after the original clubhouse, Fountain House in New York. It was the first and is the largest clubhouse in British Columbia and offers the complete clubhouse model; work-ordered day; business hour operations; volunteer work units; transitional employment; supported employment and independent placement.



PACT Employment Services was initiated in 1982 as the first specialized employment centre for persons with mental illness in Canada. It has gone through some changes through the years, but continues to focus on helping people with mental illness attain independent full or part-time jobs. It is funded through HRSD Canada to supplement the services that normally would be offered through their own offices.

## Social Enterprises

Through the Clubhouse and the Mental Health Resource Centre there have been natural evolutions of employment activities which become to look business-like. The Clubhouse used to offer Janitorial services for hire, the Resource Centre evolved a self-help gardening business into a landscaping enterprise (Coast Landscapes). Recently a *Sewing with Heart* and *Coast Catering* business concepts have been developed.

Advantages of Social Enterprises is they can minimize government or donor funding required and target maximum employment opportunities to Coast's participants.



## Mental Health Resource Centre

Coast's Mental Health Resource Centre originally opened in 1993 with funding from the second phase of the Riverview hospital downsizing initiative. It was aimed at building

community capacity to ultimately respond to the reduction in size of Riverview hospital. It has moved three times since its inception moving into its 12,000 sq. ft. permanent home on August 3, 2000<sup>29</sup>.

The Mental Resource Centre has proven to play an critical role in the recovery of persons with mental illness living in the downtown core. It offers:

- Safe and secure environment
- Low cost food, free showers, clothes
- Support in accessing welfare, primary health care, addictions, psychiatric services
- Companionship
- Involvement in a myriad of volunteer and personal development programs
- Free computers and internet use
- Recreational and cultural activities
- Access to casual and part-time employment opportunities

Currently there are over 2,000 members of this centre with 500 active users monthly.

## **Clean Start**

Coast recognized that mental illness is often accompanied by a addiction to alcohol or drugs which complicates recovery<sup>30</sup>. In 2003, with assistance of an Anonymous Donor, Coast initiated “Clean Start” a program to build Coast’s capacity to support people with addictions within the organization.

### **Coast Concurrent Disorders Project Goals and Objectives**

- Increase awareness & acceptance among staff & members of concurrent disorders.
- Create a variety of educational programs & addiction supports available to all Coast members.
- Increase a level of competency among Coast staff regarding concurrent disorders by providing staff with universal, transferable skills necessary to address mental health & addictions issues.
- Incorporate best practices in concurrent disorders management into Coast policies, procedures & practices.
- Create active outreach program to substance using / addicted members to help them in continuing recovery through engagement, support & access to community resources.

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<sup>29</sup> Coast raised/secured more than \$1.7 million to build the Resource Centre

<sup>30</sup> Estimates vary, but consistently it is reported that over 50% of people with a serious mental illness has an addiction (concurrent disorder) to alcohol or other substances.

- Establish peer support network of Coast members in recovery who would acquire skills for effective peer support / mentorship through educational & training opportunities created by Coast.
- Involve community partners in mutual training & easy access to services provided by community programs.
- Influence traditionally delivered mental health & addiction services by reinforcing, advocating for & modeling integrated program for concurrent disorders.

## **Financial Trusts Program**

In 1998, two clients came to Coast afraid they were in jeopardy of losing their disability benefits for receiving additional sums of money. One was receiving a small inheritance and the other a retroactive payment from the Canada Pension Plan. These two cases became the catalyst for Coast to develop the Financial Trust Program.

People with serious and persistent disabilities, including those with a mental illness, receive basic BC disability benefits of approximately \$786 per month. This amount includes shelter allowance and living expenses. Individuals who receive disability benefits are allowed to have a maximum of \$3,000 in liquid assets or \$5,000 in liquid assets if they have a dependent. This includes monies in bank accounts, savings bonds, RRSP's, etc. If a recipient of disability benefits receives, for example, an inheritance or retroactive CPP payments, their benefits are suspended until their liquid assets fall below the \$3,000 level. As a result of this government policy, people with severe and persistent mental illnesses are forced to live in chronic poverty that result in poor nutrition and substandard housing conditions.

After some research, Coast became aware that BC law permitted disability benefit recipients to preserve their additional assets by sheltering those funds within trust. By only using the trust to assist in the purchase of specific items such as medication, medical aids, medical services, education and the cost of independent living, these people could keep and spend their additional assets without fear their benefits might be suspended.

Despite the fact that the creation of a trust is a legitimate means by which to shelter additional assets, most clients who receive disability benefits are not informed of this option. Instead, many government Employment Assistance Workers<sup>31</sup> advise clients that spending their money was the only way to re-qualify for disability benefits, presently known as PWD benefits. In their haste to comply, individuals often recklessly spent their money without any type of planning. Their only concern was to re-qualify for disability benefits.

And so, with the help of VanCity Credit Union, Coast Foundation Society established the Financial Trust Program as part of its mandate to improve the lives of people with mental illnesses. By establishing and managing trust funds, Coast enhances the economic, social and physical well-being of seriously ill people and helps them improve their quality of life.

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<sup>31</sup> To be fair this program is not widely understood by EAW's

Since its establishment the Trust program has grown rapidly from its modest start to currently having 250 active or pending Trusts with well over \$4,000,000 in funds. Evaluations of the program have shown extremely high satisfaction and significant impact on the beneficiary's quality of life. The program's main benefit is it will set up trusts as small as \$5,000 (the marketplace generally only looks at trusts approaching \$500,000) and is geared to supporting people with mental illnesses, something that traditional trust institutions are reluctant to do.

Coast has several strategic issues to review for the Trust program:

- Streamlining administrative systems and costs so there is less administrative burden
- Reviewing and confirming of the role of the Trust Advisory Council
- Interest other organizations or partners to, in particular, focus on needs of disabled individuals who don't have a mental illness<sup>32</sup>
- Reviewing legal structure
- Developing long term cost-effective business plan

## Housing Programs

Coast pioneered the supported housing movement in Canada with the opening of the Hooper Apartments in September, 1974. This housing program was able to demonstrate the importance of quality housing in the stabilizing of an individuals health and the economic value to the community at large by reducing the burden on hospital and other health and social services.

Coast has expanded and diversified the housing since 1974, but is still pressured by demand that far outstrips capacity. Thousands of people with mental illness are in need of quality, affordable housing with the appropriate supports.



## Supported Housing

Coast's Supported Housing Programs enables people with a mental illness to live independently in affordable, self contained living units through the collective effort and support provided by Coast Community Mental Health Workers and other community mental health agencies.

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<sup>32</sup> The Law Foundation and Vancouver Foundation jointly funded Coast's trust program to increase viability and to develop a Trust Administration manual that would advise other interested non-profit organizations. As Coast is one of only organizations in province providing this service and need is so great, there is considerable compassionate pressure to expand client group to other persons with disabilities.

Supported Housing Programs are designed to provide support and skill training to individuals with mental illness to assist them to live in their own accommodation of their choice. Accommodation is provided either in apartments that Coast owns and operates, or in the chosen by individual clients market housing with the provision of a rental subsidy. The Supported Housing Program currently provides housing and supportive services to over 400 mental health services consumers

Currently, the Coast Apartment Programs consists of:

- Supported Independent Living Program
- Staffed Block Apartments
- Satellite Apartment Program
- Family Support program
- Partnership Programs<sup>33</sup> (The Dr. Peter Centre)

### Goals of the Supported Housing Program

- To provide or assist in acquiring safe, appropriate, affordable, adequate and secure accommodation that promote the mental health services consumers improved life satisfaction.
- To provide, driven by psychosocial rehabilitation principles, readily accessible, individualized, and skilled support services to consumers to enable them to learn, re-learn and maintain daily living skills necessary for successful community living.
- To increase housing stability and tenure for the individuals following their entry to the program.
- To provide alternatives to institutional and residential care by promoting movement from structured residential or treatment programs to supported independent living.
- To provide a living environment in which clients can utilize their independent living skills in real-life situations and are exposed to typical community settings and expectations.
- To increase and maintain individuals ability to live independently as evidenced by their decreased dependence on the formal mental health system, ability to move to a housing service with less supports and reduced number of the incidents of decompensation and re-hospitalization.
- To work cooperatively and collaboratively with other service providers to ensure an integrated, consistent and continual services.

**Supported Independent Living Program (SILP)** provides subsidised housing to over 140 individuals. The program allows consumers to rent a suite of their choice, receive a rent subsidy and be supported by assigned to them Community Mental Health



<sup>33</sup> Partnership blocks include: Candela Place (MCC Housing Society & McLaren Housing), Yaffa House, LTD

Worker. This includes Seymour Project a Affordable Housing Society project that houses 30 SIL tenants, and Candela Place a MCC Housing Society building that houses 20 SIL tenants.

**The Satellite Housing Program** has tenants/consumers living in the 31 scattered throughout Vancouver suites that are either owned by Coast or rented in the general housing market.

**The Family Support program** provides support to 4 tenants in Sil units, and 13 tenants in Ltd Units. The LTD Units are a partnership with Coast Foundation Society and Living The Difference (LTD) Housing Society, whereby Coast provides a CMHW and LTD provides a select number of units for Coast clients. The clients are housed under the provision that they are family units and have children living with them. The purpose of this three year limited support program is providing mental health and parenting support to clients of this program.

## Community Homes

People with a mental illness need different levels of support available to them and Coast offers a wide range of housing options. Community Homes provide 24-hour staffing in a home-like atmosphere for those who are unable to live independently. Individuals have the opportunity to develop life skills in a supportive environment, where independence and self-reliance are promoted. Residents are able to come and go freely, have some privacy and participate in making decisions about home routines and activities available. Coast embraces the psychosocial rehabilitation model to foster independence and choice



### *Four to Six to Ten Homes*

Coast owns and operates six Community Homes and works in partnership with Katherine Sanford Housing Society with four additional Homes<sup>34</sup>. The homes are staffed 24 hours a day by trained personnel who provide counseling, life skills coaching, life planning, medication administration and crisis management. All are licensed under the Community Care Facility Licensing Act, which requires high standards for staffing, health care, food, housekeeping services, and facility maintenance. Regular inspections ensure regulations are followed.

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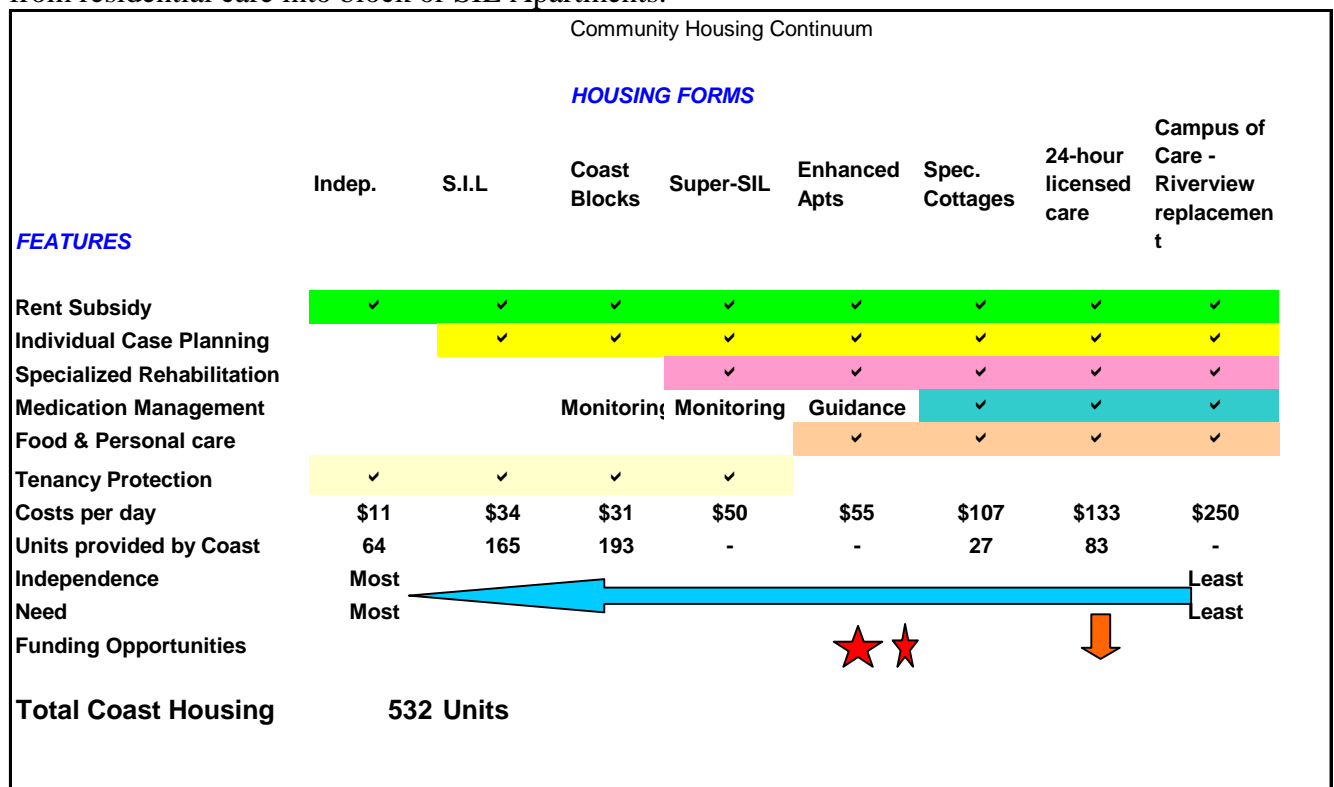
<sup>34</sup> Bridge House operations were commenced in June, 2003, while Pender, Shaw and Chester Homes were commenced on October 11, 2004 after Coast was selected through a tendering process with Vancouver Coastal Health Authority

For some of our residents their Community Home is a temporary home where they can develop life skills necessary to live independently. For others it is a relatively permanent residence offering safety, security, support and a caring community where they can feel that they belong.

### Community Homes – Regional Housing Plan

A significant threat/opportunity for Coast is the recent proposal by the Vancouver Coastal Health region to refocus their housing funding. Essentially VCH are attempting to respond to the severe need for additional housing within a restrictive budget by directing resources away from the relatively expensive residential care resources to less expensive and more independent opportunities.

This strategy has both a budgetary as well as service logic. The cost per day per person is lower in SIL and Enhanced apartments<sup>35</sup> and, of course, tenants have their own suites, and more privacy. Normally, these settings would be preferred by clients and, indeed, at Coast we have pioneered the transitional housing programs in early 1990 to facilitate movement from residential care into block or SIL Apartments.



<sup>35</sup> The term Enhanced Apartment reflects a program based in an Apartment Block or a cluster of suites where clients have their own suite, but would receive medication support, access to a food program and light housekeeping assistance in addition to the support of community mental health staff. It has been piloted in Vancouver by the Kettle Friendship Society with clients being relocated from Riverview Hospital.

The Housing plan has implications for Coast as, to finance the more independent housing options, VCH has indicated it will be closing up to three of Coast's older Community Homes.

Coast's housing strategy has been developed in part to respond to this threat. The strategy is aimed at identifying facility improvement opportunities in the Community Homes and creating a broader housing continuum which increase capacity and preclude the need to consider closing homes.<sup>36</sup>

## Coast Cottages

In April, 2003, Coast entered into an agreement with the Forensic Psychiatric Services Commission<sup>37</sup> to provide a transitional housing program on the grounds of Riverview Hospital in Coquitlam. This is significant for many reasons. First, it is the most significant service Coast has ever developed outside of Vancouver. Second, it reflects Coast's first significant partnership with FPSC. The initial program was for 12 residents in three cottages. The purpose was to prepare residents for ultimate discharge/placement in the community.



In June, 2004, a second contract was entered into with FPSC for 5 additional cottages serving 15 additional residents. This enhanced program provides a broad variety of supported environments that complement the institutional services and prepare individuals for ultimate relocation to community based services across the province.

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<sup>36</sup> A significant concern to Coast is that the closure of residential care beds is short-sighted. These facilities are spread throughout the city and are well accepted in their communities. If closed, they will not be replaced – ever.

<sup>37</sup> The Forensic Psychiatric Services Commission (FPSC) is a multi-site health organization providing specialized hospital and community-based assessment, treatment and clinical case management services for adults with mental illness who are in conflict with the law. The hospital is located in Coquitlam at Colony Farm (which is across the street from the Cottage program site at Riverview Hospital).

## **Human Resources**

An immense strength of Coast Foundation is its large and dedicated group of very experienced staff. Average seniority at Coast is in excess of 9 years across all job classifications. More and more, Coast has employees who have been able to find a career working in different program areas across the agency.

The 2000 Strategic plan identified a need for training and support in the principles of Psychosocial Rehabilitation. Considerable effort has been undertaken in the past four years to support in-service training in PSR including the contracting of an in-house trainer. As well, through Clean Start, extensive training has been offered focusing on increasing staff's capacity to respond effectively to the needs of persons with concurrent disorders.

In the past year, we have invested in a Human Resource Information Management system to aid in our Human resource planning. This has only been partially activated and needs greater integration with the Payroll system and a "scheduling" add-on is currently being contemplated.

Relations with the H.E.U., Coast's primary union, have been very constructive considering the challenges the field and coast has withstood over the past few years. Most grievances have been resolved without the need for troubleshooters or arbitration.

A challenge for the organization has been the limited role of mental health in province-wide bargaining. Most Coast employees are members of the Community sub-sector group where mental health employers/employees are in the minority. As a result there is limited influence in bargaining by either the representatives of employers or employees and over successive collective agreements, Coast believes its particular needs and issues have been poorly addressed. A recent resolution at the HEABC AGM supported by Coast and most other Mental Health organizations is aimed at seeking some solution to this problem, hopefully to help create collective agreements that are more reflective of the needs of both workers and employers in the field.

The role of Human Resource Advisor has proven to be indispensable for Coast, particularly with the demand of Accreditation, service growth and change and the myriad other details that need stewardship. A goal is to provide additional support to this position to enhance its capacity.

### **Strategic Human Resource Issues:**

An outcome of Accreditation has identified the need to develop and articulate a comprehensive human resource plan for the organization that would involve a critical analysis of the skills and capacity of the current workforce and trends (eg. demographics, retirements, skill needs, etc.) or other factors which may affect Coast's workforce.

Another area of improvement for the organization to be included in the human resource plan is in the area of performance management. Developing a comprehensive system to review the progress and support the development of staff at all levels of the organization.

## ***Quality Improvement***

In the 2000 Strategic plan, Coast defined a path to pursue Quality Improvement with the first comprehensive task being that of becoming accredited through the Canadian Council on Health Services Accreditation. In October, 2003 Coast became the first organization of its kind in Canada to be successfully accredited by CCHSA, receiving a 3-year award.

The process of accreditation pushes an organization towards a quality culture by forcing itself into a comprehensive (exhaustive) self-review process against nationally developed standards for similar organizations in health care. Four cross-agency quality areas are surveyed: Leadership & Partnership; Human Resources; Information Management; and Environment and, in addition, every program area is surveyed against Mental Health Program standards.

The Accreditation process identified several areas for improvement including:

- Develop a formal process for consultation on ethical issues.
- Develop a quality improvement plan for the entire organization and support each team in developing its own quality improvement initiatives.
- Formalize the process for risk management across the organization. Integrate this risk management plan with the quality improvement initiatives.
- Allocate resources to develop policies and procedures for infection control and infectious disease management.
- Standardize the policies and procedures for the release of information.
- Develop a formal process for ethical review of research proposals.
- Develop a formal human resources plan.
- Develop a formal information management plan.
- Ensure that performance appraisals are done consistently and develop a common tool to use in performance reviews.

Since the survey was completed, excellent progress has been made on all of the above areas including the development of a comprehensive balanced scorecard that will monitor the quality of Coast's operations across four domains of quality:

- Excellent Services to Clients
- Stewardship
- Education/Research
- Worklife

A foundation piece is the adoption of a comprehensive Goal Attainment System that permits the monitoring of how well Coast's clients are meeting their own goals. Both of these

instruments should inform, staff, managers and the directors on the specific or overall quality of the organization.

The system was designed over the summer of 2004, the complete rollout of this system is to be completed by the fall of 2005.

### **Evidence Based Practices**

Evidence Based practices refers to the assurance of the safety and effectiveness of services gained from multiple studies and evaluations (Evidence). Unfortunately in the area of Psychosocial Rehabilitation services there is a dearth of solid research supporting interventions. *PSR interventions are complex ones aimed at enhancing role performance and quality of life as well as changing affects and cognitions. They address elements of the intervention context such as administrative policies, provider training, and consumer interactions with employers and landlords that would be considered outside the bounds of traditional clinical interventions.*<sup>38</sup>

Policy makers and governments are adopting evidence-based practices because it is believed that such interventions should result in the safest, most potent, and efficient services.

### **Coast Mental Health Foundation**

The Coast Mental Health Foundation was incorporated in October, 2002 with the purposes of:

Receiving gifts, bequests, trusts, funds and property and beneficially, or as a trustee or agent, to hold, invest, develop, manage, accumulate, and administer funds and property for the purpose of disbursing funds and property to the Coast Foundation Society provided that it remains a “qualified donee” as defined by the Income Tax Act and other “qualified donees”

Conducting any and all activities and exercise any and all such powers as are necessary for the achievement and furtherance of the purposes of the Foundation

CMHF evolved out of the consistent attempts by Coast to raise funds to either provide capital<sup>39</sup> or operating funds to enhance its services. The Board of Coast identified the need to spend more time on this effort and decided to set up the independent but related foundation.

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<sup>38</sup> **KNOWLEDGE ASSESSMENT: A MISSING LINK BETWEEN KNOWLEDGE DEVELOPMENT AND APPLICATION** H. Stephen Leff, Ph.D., Virginia Mulkern, Ph.D., Robert E. Drake, M.D., Ph.D., I. Elaine Allen, Ph.D., Clifton M. Chow, Ed.M.

<sup>39</sup> Coast Clubhouse, Hydrecs House, Coast Mental Health Resource Centre were all bought or built through separate Capital Fundraising Campaigns

CMHF is still in its infancy, but currently offers a comprehensive development program including:

- Courage To Come Back Awards
- Celebration of Hope Breakfast
- Monthly Orientation tours
- Major gifts program
- Annual fund campaign
- Planned Giving Program

Strategic issues for the Foundation include:

- Developing feasibility study for a housing capital campaign
- Fully building the Multi-year giving program
- Efficient management and maximizing benefit of Courage Awards
- Developing an external communications strategy complementary to Coast