

# Hamilton Program for Schizophrenia

Annual Report

April 1, 2019 – March 31, 2020



# A Message from the Chair

As Chair, I can't recall or imagine a more challenging event to manage for a mental healthcare organization than a pandemic. Zoom meetings and months of social distancing have been challenging for all of us, although I am very impressed by the many positive daily efforts made by all HPS staff to ensure continuity is achieved and that the high standard of client care remains the focus during this very unusual time. Many thanks to all the staff for a job well done in managing with courage the many risks associated with this pandemic and in ensuring staff and clients are safe.

Eduard Veerman



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# Who We Are:

**The Hamilton Program for Schizophrenia (HPS) is a comprehensive, community-based treatment and rehabilitation program for adults with schizophrenia, optimizing their recovery based on their goals.**

HPS first became an entity in November, 1979. It originally was incorporated as "C.S.V.R. – Schizophrenia, Inc." (Community Social and Vocational Rehabilitation Program) and funded through the Hamilton Psychiatric Hospital (H.P.H.). The first meeting of the C.S.V.R. Board Members took place in April, 1980. The first location was at 350 King Street East, Suite 102, Hamilton. At that time "Hamilton Program for Schizophrenia was a program for C.S.V.R. – Schizophrenia, Inc."

In April, 1982, C.S.V.R. officially divested financially from H.P.H. Initial support for individuals with schizophrenia started gradually with a note that by September, 1983 there were "58 patients".

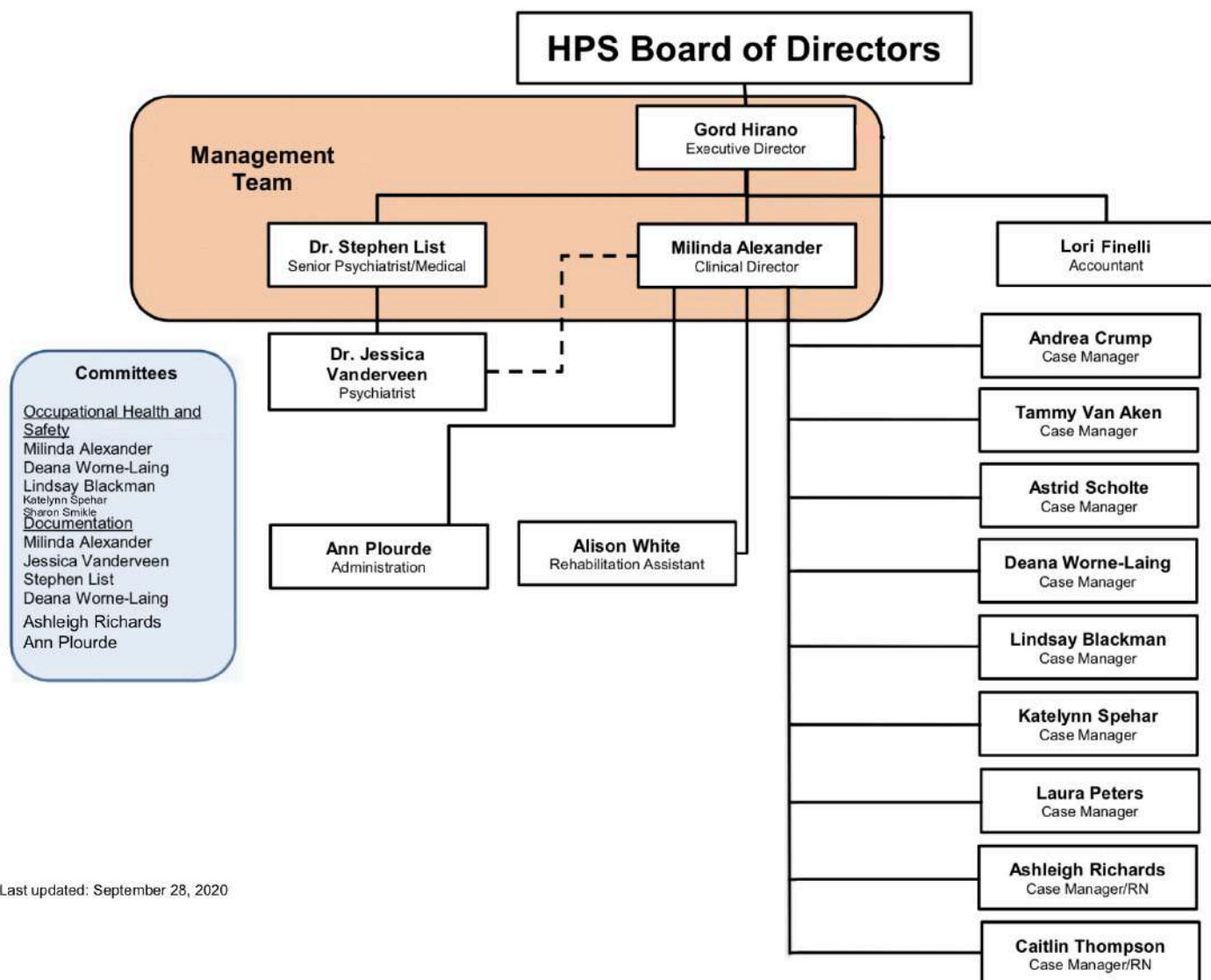
In November 1983, the program was officially renamed as the Hamilton Program for Schizophrenia (HPS) and the mandate for HPS included: "Providing comprehensive treatment and rehabilitation services to people with schizophrenia".

**Fundamental shared values are at the heart of our mission. They unite us and provide direction and focus for the organization's goals and objectives:**

1. We believe in care that ensures the dignity and rights of the individual.
2. We believe in care that optimizes our clients' recovery and provides them with opportunities to meet their individual rehabilitation goals.
3. We believe that both direct care and community partnerships allow us to provide our clients with various levels and duration of support tailored to their individual needs.
4. We believe in providing individual client care that is accessible and responsive to individual needs and goals in the community and, if needed, in a hospital setting.
5. We place high value on establishing and maintaining therapeutic alliances with our clients and families.
6. We believe in actively involving our clients in decisions that improve both their recovery and the rehabilitation services we offer.
7. We believe that each individual that works at HPS makes an important contribution and we value the pursuit of excellence, skill development and teamwork.
8. We believe in being accountable to our clients and we will endeavor to provide services in a responsible, effective and efficient manner.
9. We believe that education and research enhance our expertise and strengthen our partnerships in the community.
10. We believe in fostering community understanding about schizophrenia.



# Organizational Chart



Last updated: September 28, 2020



## **Outcomes & Effectiveness**

HPS uses a variety of performance indicators to measure program outcomes.

Client Record Management System (CRMS) is a comprehensive system which tracks data for a variety of indicators based on information that has been entered.

- 7228 total client attendance in groups
- 667 counselling and treatment sessions with psychiatrists

# Staffing

HPS's array of services are provided by a strong team with varied backgrounds. The multidisciplinary team includes program directors, administration staff, rehabilitation assistants, psychiatric physicians, and a clinical team which includes registered nurses, occupational therapists and social workers. Staff work together to contribute to the treatment of HPS clients.

## **HPS staff engaged in many clinical workshops this year:**

1. HPS hosted a Cognitive Adaptation Training Workshop to train existing case managers who had not received this training. Two participating staff members were also trained to sustain this training in the future at HPS.
2. A number of staff participated in various Acceptance and Commitment Therapy training sessions.
3. HPS hosted CPR/ First Aid training and continue to keep all staff current. HPS sent those who had not attended to ASIST training.
4. Two staff have completed their Concurrent Disorders Certificate Training through CAMH.



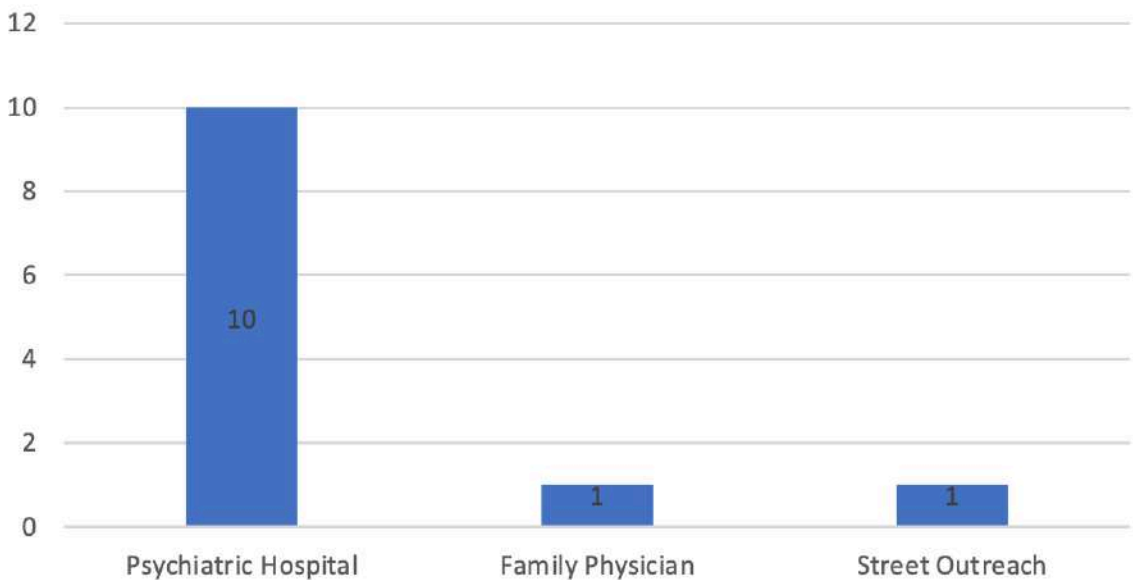
# Intake & Wait List

HPS is one of four intensive case management mental health organizations in Hamilton which uses the centralized Intensive Case Management Access Coordination (IntAc) process. Potential clients are referred to IntAc in a number of ways including self-referral. The IntAc Coordinator will then contact the potential client and meet with him or her to obtain consents and gather further information. The IntAc coordinate then meets every 3 weeks to discuss the eligibility of the client and which agency of the four would be best suited for their needs and/or other resources that can be recommended. Once it is determined that a client will have their needs best addressed at HPS, they will be admitted into the program after concluding an initial intake appointment with one of the HPS psychiatrists



## 12 NEW ADMISSIONS

Intake Source of Referral

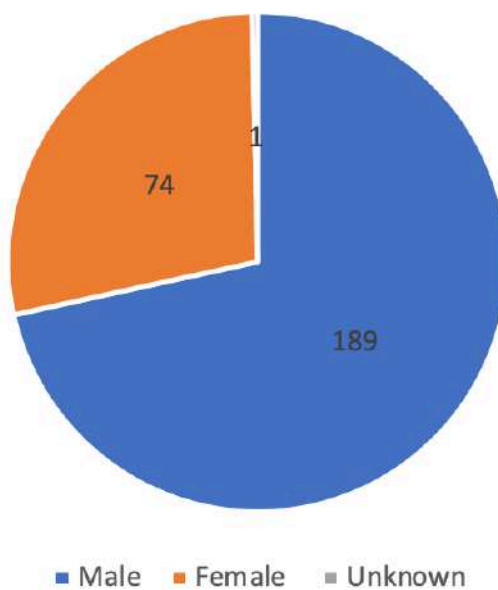




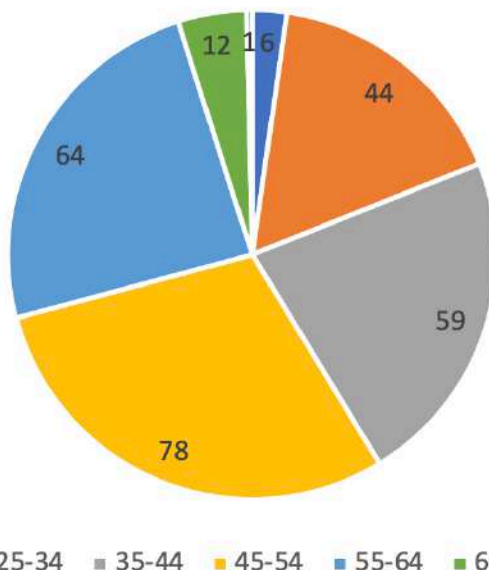
# Client Demographics

HPS serves clients from a wide range of backgrounds. Although HPS clients are all residences of LHIN 4, they have varied ages, ethnicities and socio-economic backgrounds. HPS clients are primarily male with about 72% of the program identifying as such.

### Client Gender



### Client Age (Years)



Minimum age: 21  
Maximum age: 77  
Average Age: 47

# Group Programming

HPS continues striving to create engaging programming for the Social Rehabilitation program.

HPS has a repertoire of creative group programming:

- **Wellness Check-in:** Runs once a week and takes the form of a group/peer support session. The session includes a learning portion at the start led by staff member, followed by an open group discussion. The group is especially helpful for clients who don't always need one to one support with a case manager.
- **Cooking Club:** Aims to promote a healthy diet while helping individuals to further develop their culinary skills, and increase socialization.
- **Friday Social Group:** Clients meet to discuss current events over a cup of coffee and a snack.
- **Gaming Group:** Clients get together and play various interactive video games.
- **Leisure Group:** An activity group that allows clients to participate in combined leisure and social activities. Examples of activities include: wood painting, holiday crafts, trivia and board games
- **Movie Group:** Clients watch a movie together at HPS
- **Ping Pong & Games:** Clients play a friendly game of ping pong, or a board game at HPS.
- **Sweet Donations:** Clients are given the opportunity to practice baking skills and give back to the community.
- **Travelling Cup:** Clients meet at a different café in the downtown core of Hamilton to chat and enjoy a cup of coffee together.
- **Volleyball:** HPS clients join clients from another local mental health agency to play a few friendly games of Volleyball at a nearby recreation center.
- **Walking Group:** Clients get together to chat and enjoy a leisurely stroll around local Hamilton neighborhoods
- **Breakfast Club:** Provides clients the opportunity to make a healthy breakfast. This allows clients to learn new recipes and improve their cooking and socialization skills.
- **Cottage Studio:** Promotes mental health through creative art. "Cottage" members are offered complimentary space and art supplies, in a relaxed social environment.



HPS rehabilitation staff also plan at least one outing into the community each month to promote socialization and engagement with the Hamilton Community. Outings include events such as sports matches, gallery visits and museum tours.

# Accreditation

In May 2019, HPS was awarded with a three-year CARF Accreditation under the category of Behavioural Health.

HPS continues to meet all expectations and standards of quality as indicated by CARF guidelines.



# Financial Statement

## HAMILTON PROGRAM FOR SCHIZOPHRENIA INC.

### Statement of Operations

Year Ended March 31, 2020

	2020	2019
<b>REVENUES</b>		
Ontario Ministry of Health and Long Term Care <i>(Note 7)</i>	\$ 1,902,782	\$ 1,902,891
Ontario Ministry of Health and Long Term Care - Capital Asset Funding <i>(Note 7)</i>	1,200	1,200
One time grant funding	2,132	-
Compensation recovery	19,482	11,008
	<u>1,925,596</u>	<u>1,915,099</u>
<b>EXPENSES</b>		
Amortization of capital assets	1,200	1,200
Bank charges	3,177	2,846
Client social and recreation	42,942	37,760
Client wage supplement	11,395	10,842
Consulting fees	7,887	24,056
Donations	175	-
Duplicating charges	1,862	1,661
Employee benefits	295,304	284,126
Insurance	13,326	13,693
Living skills	4,417	1,929
Meetings	5,007	5,529
Memberships	3,279	13,012
Minor equipment purchases	773	12,544
Office and general	18,006	18,615
Office rent and property taxes	136,270	125,902
Postage	1,886	1,816
Professional fees	8,803	8,831
Repairs and maintenance	28,657	16,290
Salaries and wages <i>(Note 9)</i>	1,276,477	1,277,285
Staff training	17,748	26,811
Telephone	16,569	14,449
Transportation and parking	30,436	25,646
	<u>1,925,596</u>	<u>1,924,843</u>
<b>DEFICIENCY OF REVENUES OVER EXPENSES</b>	<u>\$ -</u>	<u>\$ (9,744)</u>