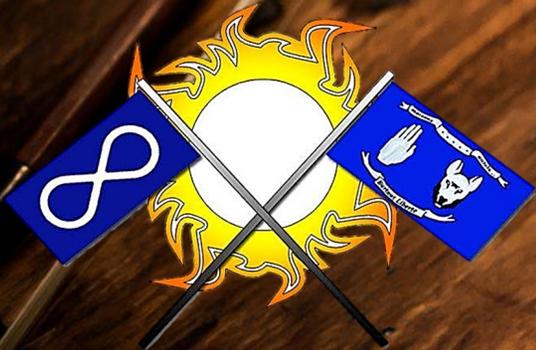


Enhanced Operations Annual Report 2017-2018

Year 2 Strategic Plan: Answering the Call



Métis Addictions Council of Saskatchewan Inc.



Métis Addictions Council of Saskatchewan Inc.

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Saskatoon, SK S7L 6X8

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Annual Report 2017-2018

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Our Story

The beginnings of MACSI's story emerged at a time of social and political change. At this time, Indigenous people across the nation were becoming more uneasy about experiences of disadvantage and the harms of alcohol use. A group of likeminded individuals came together to utter the first words of MACSI's story. Now, years later, with 48 years of continuous service to the people of our province, Métis Addictions Council of Saskatchewan Inc. (MACSI) has a long and abundant history. There have been several organizational transformations but MACSI's commitment to deliver substance addictions services for Métis, First Nations and all other citizens of Saskatchewan has remained constant.

Today, MACSI functions as a community based not for profit organization and is recognized as a key stakeholder in substance addictions. MACSI operates three treatment centres, located in Regina, Saskatoon and Prince Albert. Clearly, the story of MACSI is long and involved and is intertwined with the stories of countless people across our province.

Vision

MACSI values our Métis heritage, embraces our future and envisions a world for all people free of the harmful effects of addictions.

Mission

To empower individuals to make healthy choices in our communities through a continuum of addictions services including education, treatment and aftercare to restore a balanced harmonious, productive lifestyle.



www.macsi.ca

Values

Client-Centred Practice -We put the client at the centre of what we do.

Family Sensitive -We recognize the needs of families and the critical role supporting people with mental health and addictions problems.

Holistic View of Health -We believe in understanding and helping the whole person in ways that are holistic, include elements of Métis and First Nations culture, and are focused on recovery.

Respect-We believe that treating people with respect is a key guiding principle for any effective and healthy organization.

Continuous Learning-We foster creativity, discovery, learning and sharing of ideas.

Partnership-We build respectful, collaborative and effective partnerships.

Evaluation and Accountability-We improve, monitor and evaluate services. We will be accountable to our stakeholders.

Message from the Chair



Marlene Hansen, Chair
Métis Addictions Council of Saskatchewan Inc.

On behalf of the Métis Addictions Council Board of Directors, I would like to first thank our excellent staff at MACSI. Staff members, in all of our centres, continue to meet the many challenges that they face day-to-day. I am proud to say that these challenges have provided all involved with insight and balance to help with bonding and supporting one another, as well as creating a safe place for everyone that visits or stays in one of our three treatment centres, while working on their respective transformation for a better life. We have all recognized that, when working as a team, challenges simply become bumps in the road. Once again the MACSI Board would like to give a great big “THANK YOU” to ALL of the MACSI Staff for all your GREAT work!

As the Chairperson, and on behalf of the MACSI Board, I would also like to thank the Métis Nation for their understanding and support during the past year, and for providing the board with a seamless process for bringing on a new Chairperson appointed by the Métis Nation.

The MACSI Board would, of course, also like to say a huge thank you to the Ministry of Health for their support and sharing of its resources.

A highlight of this past year for MACSI was inviting an outside consultant to assist us, sort through our past and present challenges, and help us look to the future, staying open to the changes that need to be considered when working with our Indigenous Peoples during such vulnerable times in their lives. Our three houses, in Saskatoon, Regina, and Prince Albert, are all running very smoothly. The Day Program in Saskatoon is a great success story. We hope to be able to replicate that success in the other two centres, and to continue to push to utilize each centre to its full potential.

As the Chairperson of MACSI for many years, I will always be grateful for the knowledge, experience and growth that I have gained. It has been my privilege to serve with my colleagues, the many wonderful, dedicated Board Members. I will cherish the teachings that I have received from the staff members at MACSI. We will hang on, and never lose sight of the heart of MACSI and that it is PEOPLE we serve.

With respect,

Marlene Hansen

MACSI Team

MACSI is led and governed by a volunteer Board of Directors comprised of five voting members and a non-voting representative of the Ministry of Health. The Board of Directors assumes responsibilities for oversight in the development and application of MACSI's vision, mission, values and policy. A Métis Nation-Saskatchewan (MN-S) appointed Chair, and other board members, represent varying perspectives and regions of the province.

The daily operations of MACSI are administered by an Executive Director as well as a complement of senior directors, centre directors, addictions counsellors, addictions workers as well as office/support personnel.

Cree Proverb

Realize that we as human beings have been put on this earth for only a short time and that we must use this time to gain wisdom, knowledge, respect and the understanding for all human beings since we are all relatives.

Board of Directors



Pictured: Jackie Kennedy, Lawren Trotchie, Marlene Hansen, Patricia Tait.

Marlene Hansen, Chair
Jackie Kennedy, Vice Chair
Lawren Trotchie, Treasurer
Patricia Tait, Secretary

Senior Directors

Shauna Lafontaine, Executive Director

Adon Hoffman, Director of Finance and Administration

John Welden, Director of Human Resources

Beverly Palibroda, Director of Community Relations and Outreach

Curtis Brad, Director of Programming, Research and Development

Centre Directors

Lana Blondeau, Regional Director, Regina Centre

Karen Menard, Regional Director, Prince Albert Centre

John Welden, Regional Director, Saskatoon Centre

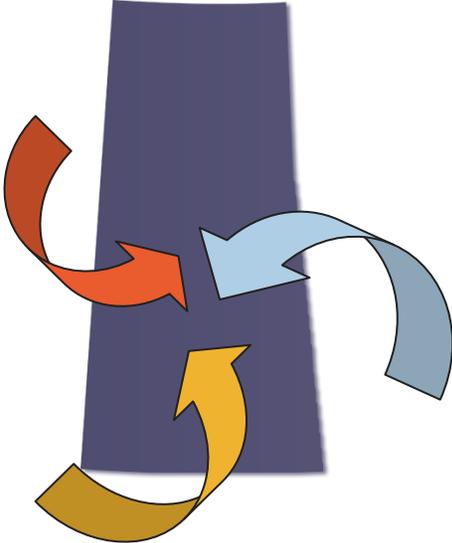
Meagan Maclean, Assistant Regional Director, Saskatoon Centre

MACSI At A Glance

49
years of service

812 total services accessed
2017-2018 fiscal year

3 treatment
locations
serving
Saskatchewan

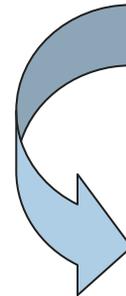


Outpatient

Stabilization



Aftercare



Day Program



Inpatient



MACSI At A Glance

329
Inpatient
services
accessed
from 3
locations

43

MACSI's Inpatient treatment is an abstinence based 28 day program. Clients take part in daily educational and therapeutic workshops, one to one counselling, cultural programming, community meetings as well as recreational and leisure activities.

In this fiscal year, **329** services were accessed through MACSI's Inpatient Program. Although down slightly from the previous year, MACSI's clients came from all regions of the province and approximately 75% of those who attend Inpatient program complete their treatment stay.



130
Inpatient
Services
Accessed



122
Inpatient
Services
Accessed



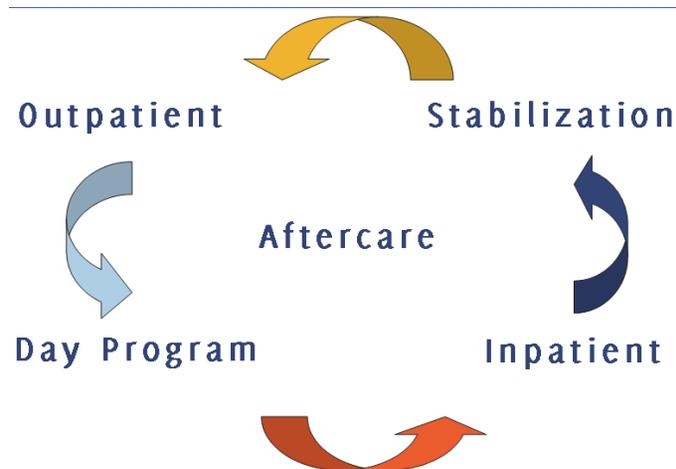
77
Inpatient
Services
Accessed

Outpatient Program

262 services were accessed from MACSI's three outpatient departments. This decrease in services could be attributed to improved tracking of transfers. Nonetheless, each location ran efficiently and outpatient counsellors completed a range of tasks including screening, assessment, referrals, intake, one to one counselling, treatment planning and aftercare.

Day Program

156 services were accessed through MACSI's harm reduction based Day Program. Day Program was launched at the Saskatoon Centre in 2010 and has successfully delivered 8 years of continuous service.



Stabilization

40 services were accessed through the 6-bed Stabilization Program offered out of the Prince Albert Centre. While this department was highly utilized and in demand, it was closed temporarily in December 2016 due to inability fill the counsellor role in this department, but reopened in November 2017.

Transitional and Aftercare

25 services were offered through the transitional and aftercare programs operating out of the Regina Centre. The transitional department has reduced the contracted beds from 6 to 4 .

Findings and Trends

MACSI is a proud Métis-led organization serving a wide variety of people and communities of Saskatchewan. We strive to understand the experiences and lives of the people we serve.

As with the rest of Canada, Saskatchewan citizens continue to present high rates of alcohol use. According to recent research, 70% of youth and 80% of Canadian adults reported consuming alcohol in the past year, making alcohol the leading psychoactive substance used by a wide margin (Canadian Centre on Substance Abuse 2014). MACSI Centres certainly see a majority of clients with concerns

around alcohol use, but we also see high usage of cannabis, opioids and other substances. What follows are additional details of what we have learned about those who accessed service in the past fiscal year.

12% Métis
64% First Nations
24% Non Aboriginal
(n=812)

46.4% females
53.6% males
377 females 435 males
(n=812)

Methadone Maintenance

9% of services are accessed by individuals who are prescribed methadone as part of their recovery plan. This finding is in keeping with recent years but we are also seeing more use of subox-

one. MACSI continues to work closely with clinics and prescribing physicians. Research shows that in Saskatchewan an equal number of females and males access opioid substitution treatment

Concurrent Disorders

Concurrent disorders are a serious health issue in Saskatchewan and across Canada. One means of assessing rates of concurrent disorders is through rates of prescribed psychiatric medication. However, many individuals present with mental health concerns but have not received a diagnosis or mental health treatment.

15% of services accessed are by those who are currently taking prescribed psychiatric medication. An additional approximate 2% take both methadone and psychiatric medication.

Legal Involvement

Approximately **40%** of clients have some form of legal involvement. This finding speaks to the complexity of lives and the harms associated with substance addictions. We have seen this number increase in this fiscal year.

Injection Drug Use

34% of services accessed were accessed by those with current or prior injection drug use. The trend indicating that MACSI serves a high proportion of individuals with previous or current injection drug use has been noted in recent years, and has also increased in this fiscal year.

Take Home Naloxone Kits

In response to increasing numbers of fatal and non fatal opioid poisonings in Canada, (the primary

concern being fentanyl) there has been a great deal of effort invested in increasing availability of Naloxone. This is a drug that temporarily reverses the effects of opioids and can save lives in opioid overdose situations.

In Saskatchewan, physicians prescribe naloxone directly to friends and family members who use opioids. Naloxone is also available through pharmacies, paramedics carry naloxone and some health regions in Saskatchewan have made take home naloxone kits available to at risk individuals and support people. (Canadian Centre on Substance Abuse 2016).

Overall Health

MACSI strives to provide holistic substance addiction treatment, meaning we recognize each person

as a whole being. There are mental, physical, emotional and social contributing factors leading to substance addiction and therefore treatment must address healing in a holistic manner.

It seems that at our MACSI centres, we see alarming rates of general poor health. Clearly substance addiction takes a toll on people in multiple ways. Of concern are higher rates of HIV, AIDS, diabetes and untreated and undiagnosed physical and mental health issues. Of note is the consequences of lack of routine health care. One example being seriously neglected and overlooked dental issues. With increasing complexity of substance addictions, MACSI will continue to see overall health problems in those we serve.

Audited Financial Statements

Management's Responsibility

To the Member of Metis Addictions Council of Saskatchewan Inc.:

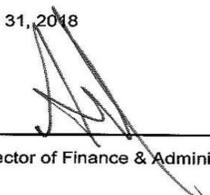
Management is responsible for the preparation and presentation of the accompanying financial statements, including responsibility for significant accounting judgments and estimates in accordance with Canadian accounting standards for not-for-profit organizations and ensuring that all information in the annual report is consistent with the statements. This responsibility includes selecting appropriate accounting principles and methods, and making decisions affecting the measurement of transactions in which objective judgment is required.

In discharging its responsibilities for the integrity and fairness of the financial statements, management designs and maintains the necessary accounting systems and related internal controls to provide reasonable assurance that transactions are authorized, assets are safeguarded and financial records are properly maintained to provide reliable information for the preparation of financial statements.

The Board of Directors is composed entirely of Directors who are neither management nor employees of the Organization. The Board is responsible for overseeing management in the performance of its financial reporting responsibilities. The Board fulfils these responsibilities by reviewing the financial information prepared by management and discussing relevant matters with management and external auditors.

MNP LLP is appointed by the Board to audit the financial statements and report directly to them; their report follows. The external auditors have full and free access to, and meet periodically and separately with, both the Board and management to discuss their audit findings.

May 31, 2018



Director of Finance & Administration

Independent Auditors' Report

To the Member of Metis Addictions Council of Saskatchewan Inc.:

We have audited the accompanying financial statements of Metis Addictions Council of Saskatchewan Inc., which comprise the statement of financial position as at March 31, 2018, and the statements of operations, changes in net assets, cash flows and the related schedules for the year then ended, and a summary of significant accounting policies and other explanatory information.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with Canadian accounting standards for not-for-profit organizations, and for such internal control as management determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditors' Responsibility

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with Canadian generally accepted auditing standards. Those standards require that we comply with ethical requirements and plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditors' judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the financial statements present fairly, in all material respects, the financial position of Metis Addictions Council of Saskatchewan Inc. as at March 31, 2018 and the results of its operations, changes in net assets and its cash flows for the year then ended in accordance with Canadian accounting standards for not-for-profit organizations.

Saskatoon, Saskatchewan

May 31, 2018

MNP LLP
Chartered Professional Accountants

119 4th Ave South, Suite 800, Saskatoon, Saskatchewan, S7K 5X2, Phone: (306) 665-6766, 1 (877)500-0778

MNP

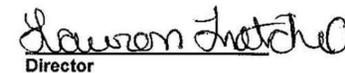
Metis Addictions Council of Saskatchewan Inc.
Statement of Financial Position

As at March 31, 2018

	2018	2017
Assets		
Current		
Cash	397,709	79,188
Goods and Services Tax receivable	12,414	11,910
Prepaid expenses	25,071	23,192
	435,194	114,290
Capital assets (Note 3)	964,671	934,909
	1,399,865	1,049,199
Liabilities		
Current		
Accounts payable and accrued liabilities	84,276	18,595
Accrued wages and benefits payable (Note 5)	253,463	190,823
Payable to Ministry of Health (Note 6)	278,416	176,277
Current portion of deferred contributions - capital assets purchased (Note 7)	53,500	33,500
Deferred contributions - funds unspent (Note 8)	78,551	-
	748,206	419,195
Deferred contributions - capital assets purchased (Note 7)	426,423	393,230
	1,174,629	812,425
Contingencies (Note 9)		
Net Assets		
Invested in capital assets	484,748	508,179
Externally funded programs	(259,512)	(271,405)
	225,236	236,774
	1,399,865	1,049,199

Approved on behalf of the Board of Directors


Director


Director

Metis Addictions Council of Saskatchewan Inc.
Statement of Operations

For the year ended March 31, 2018

	2018 Budget <i>(Unaudited)</i> <i>(Note 11)</i>	Core Services	Addiction Services	2018 Total	2017 Total
Revenues					
Ministry of Health	3,189,325	674,388	2,236,521	2,910,909	3,013,048
Other	-	410	25,868	26,278	25,478
Deferred surplus recognized <i>(Note 6 & 8)</i>	-	-	-	-	222,548
Deferred contributions recognized for capital assets <i>(Note 7)</i>	36,580	-	53,533	53,533	40,968
	3,225,905	674,798	2,315,922	2,990,720	3,302,042
Expenditures					
Core Services <i>(Schedule 1)</i>	691,876	655,268	-	655,268	656,332
Addiction Services <i>(Schedule 2)</i>	2,437,829	-	2,256,071	2,256,071	2,365,062
Board <i>(Schedule 3)</i>	25,000	19,530	-	19,530	11,654
	3,154,705	674,798	2,256,071	2,930,869	3,033,048
Excess of revenues over expenses before the following:	71,200	-	59,851	59,851	286,994
Amortization	71,200	1,356	70,033	71,389	77,611
Excess (deficiency) of revenues over expenses for the year	-	(1,356)	(10,182)	(11,538)	191,383

Metis Addictions Council of Saskatchewan Inc.
Statement of Changes in Net Assets

For the year ended March 31, 2018

	<i>Invested in Capital Assets</i>	<i>Externally Funded Programs</i>	2018	2017
Balance, beginning of year	508,179	(271,405)	236,774	45,391
Excess (deficiency) of revenue over expenses	(17,856)	6,318	(11,538)	191,383
Investment in capital assets	101,151	(101,151)	-	-
Receipt of deferred contributions	(106,726)	106,726	-	-
Balance, end of year	484,748	(259,512)	225,236	236,774

Metis Addictions Council of Saskatchewan Inc.
Statement of Cash Flows
For the year ended March 31, 2018

	2018	2017
Cash provided by (used for) the following activities		
Operating		
Excess of revenue over expenses	(11,538)	191,383
Amortization	71,389	77,611
Deferred surplus recognized	-	(186,319)
Deferred contributions for capital assets recognized	(53,533)	(40,968)
	6,318	41,707
Changes in working capital accounts		
Goods and Services Tax receivable	(504)	20,269
Prepaid expenses	(1,879)	26,262
Accounts payable and accrued liabilities	65,681	4,570
Accrued wages and benefits payable	62,640	(27,513)
Payable to Ministry of Health	102,139	140,048
	234,395	205,343
Financing		
Repayments of operating line of credit	-	(115,490)
Restricted contributions received for capital assets	185,277	-
	185,277	(115,490)
Investing		
Purchase of capital assets	(101,151)	(10,665)
Increase in cash resources	318,521	79,188
Cash resources, beginning of year	79,188	-
Cash resources, end of year	397,709	79,188

1. Incorporation and nature of the organization

Metis Addictions Council of Saskatchewan Inc. (the "Organization") was established in November 1969 as an organization called the Native Alcoholism Council ("NAC"), which was mandated to provide rehabilitation, education, and prevention services to all Aboriginal people seeking help for drug and alcohol abuse. NAC was incorporated under the authority of the Non-Profit Act of Saskatchewan on March 8, 1983, as the Saskatchewan Native Addictions Council Corporation ("SNACC"), and changed its corporate name in 1992 to the Metis Addictions Council of Saskatchewan Inc. The Organization is a Registered Charity under the Income Tax Act of Canada.

2. Significant accounting policies

The financial statements have been prepared in accordance with Canadian accounting standards for not-for-profit organizations using the following significant accounting policies:

Cash

Cash consists of cash on hand and on deposit.

Capital assets

Purchased capital assets are recorded at cost. Contributed capital assets are recorded at estimated fair value at the date of contribution plus any costs incurred at the date of acquisition.

Amortization is provided using the straight-line method at rates intended to amortize the cost of assets over their estimated useful lives.

In the year of acquisition, amortization is recorded at the full amount. No amortization is charged in the year of disposal.

Buildings	25 years
Computer equipment	3 years
Equipment	10 years
Parking lot	10 years
Vehicles	5 years
Leasehold improvements	over the term of the lease

Financial instruments

The Organization recognizes its financial instruments when the Organization becomes party to the contractual provisions of the financial instrument. All financial instruments are initially recorded at their fair value, including financial assets and liabilities originated and issued in a related party transaction with management. Financial assets and liabilities originated and issued in all other related party transactions are initially measured at their carrying or exchange amount in accordance with Section 3840 *Related Party Transactions*.

At initial recognition, the Organization may irrevocably elect to subsequently measure any financial instrument at fair value. The Organization has not made such an election during the year.

The Organization subsequently measures all financial assets and liabilities at amortized cost.

Transaction costs and financing fees are added to the carrying amount for those financial instruments subsequently measured at amortized cost.

Financial asset impairment

The Organization assesses impairment of all of its financial assets measured at cost or amortized cost. Management considers whether a debtor is having significant financial difficulty; whether there has been a breach in contract, such as a default or delinquency in payments; in determining whether objective evidence of impairment exists. When there is an indication of impairment, the Organization determines whether it has resulted in a significant adverse change in the expected timing or amount of future cash flows during the year. Any impairment, which is not considered temporary, is included in current year excess (deficiency) of revenues over expenses.

Metis Addictions Council of Saskatchewan Inc.
Notes to the Financial Statements
For the year ended March 31, 2018

2. Significant accounting policies *(Continued from previous page)*

The Organization reverses impairment losses on financial assets when there is a decrease in impairment and the decrease can be objectively related to an event occurring after the impairment loss was recognized. The amount of the reversal is recognized in the excess (deficiency) of revenues over expenses in the year the reversal occurs.

Measurement uncertainty

The preparation of financial statements in conformity with Canadian accounting standards for not-for-profit organizations requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements, and the reported amounts of revenues and expenses during the reporting period.

Accounts receivable are stated after evaluation as to their collectability and an appropriate allowance for doubtful accounts is provided where considered necessary. Amortization is based on the estimated useful lives of capital assets.

These estimates and assumptions are reviewed periodically and, as adjustments become necessary they are reported in excess of revenues and expenses in the periods in which they become known.

Revenue recognition

The Organization follows the deferral method of accounting for contributions. Restricted contributions are recognized as revenue in the year in which the related expenses are incurred. Unrestricted contributions are recognized as revenue when received or receivable if the amount to be received can be reasonably estimated and collection is reasonably assured.

Deferred contributions related to capital assets represent the unamortized portion of restricted contributions that were used to purchase or renovate capital assets. Recognition of these amounts as revenue is deferred to periods when the related capital assets are amortized.

Pension

Employees of the Organization participate in a multi-employer defined benefit pension plan. The Organization follows defined contribution accounting for its participation in the plan. The total amount expensed in the current year was \$136,440 (2017 - \$160,251).

3. Capital assets

	2018	2017
	Accumulated	Net book
	Cost	amortization
	value	value
Land	12,100	-
Buildings	1,678,424	849,359
Computer equipment	58,915	53,935
Equipment	490,800	418,032
Parking lot	3,550	3,550
Vehicles	155,497	109,739
Leasehold improvements	48,176	48,176
	2,447,462	1,482,791
	964,671	934,909

4. Bank indebtedness

The Organization has access to a credit line with a maximum of \$100,000, bearing interest at RBC prime, which was, as at March 31, 2018, 3.45% (2017 - 2.70%). The credit line is secured by a general security agreement constituting a first ranking security interest in all property and subject to certain financial reporting covenants. As at March 31, 2018, the Organization was in compliance with its financial reporting covenants.

Metis Addictions Council of Saskatchewan Inc.
Notes to the Financial Statements
For the year ended March 31, 2018

5. Accrued wages and benefits payable

	<i>2018</i>	<i>2017</i>
Vacation accrual	116,079	111,449
Wages payable	81,305	65,655
Benefits payable	33,364	9,676
Government remittances payable	22,715	4,043
	253,463	190,823

6. Payable to Ministry of Health

Surplus payable \$278,416 (2017 - \$176,277) to the Ministry is per the revenue contribution agreement. The Ministry has approved retention of the 2017 surplus payable of \$176,277 by the Organization for capital expenditures, with the excess being used to reduce the Organization's accumulated deficit in externally funded programs.

7. Deferred contributions - related to capital assets

Deferred capital contributions consist of the contributions received for the purchase of capital assets. Recognition of these amounts as revenue is deferred to periods when the related capital assets are amortized. Changes in deferred capital contributions are as follows:

	<i>2018</i>	<i>2017</i>
Balance, beginning of year	426,730	459,956
Funding received for capital asset purchases	106,726	7,742
Less: Amounts recognized during the year	(53,533)	(40,968)
	479,923	426,730
Less: current portion	53,500	33,500
	426,423	393,230

8. Deferred contributions - funds unspent

Deferred contributions consist of unspent contributions and surpluses from prior years externally restricted for delivery of addictions programs. Recognition of these amounts as revenue is deferred to periods when the specified expenditures are made or the previous surplus is forgiven. Changes in the deferred contribution balance are as follows:

	<i>2018</i>	<i>2017</i>
Balance, beginning of year	-	194,061
Deferred surplus retained in accordance with restrictions placed by the Ministry of Health	176,277	-
Less: Deferred surplus on which restrictions were waived by the Ministry of Health	-	(186,319)
Less: Approved spending during the year	(97,726)	(7,742)
	78,551	-

Metis Addictions Council of Saskatchewan Inc.
Notes to the Financial Statements

For the year ended March 31, 2018

9. Contingencies

These financial statements are subject to review by the Ministry of Health. It is possible that adjustments could be made based on the results of their review.

As of the date of these statements, the Organization has been named as the defendant in one lawsuit. The outcome of such suit is not known at this time, and any damages that may be awarded are not estimable.

The Collective Bargaining Agreement with SEIU West expired on March 31, 2017. It is not possible at this time to estimate whether any additional amounts will be payable to SEIU West or its members for services provided to the Organization since the expiry dates of these agreements, as a new Collective Bargaining Agreement has not been negotiated and ratified. Any additional salary expenses and related funding will be recorded in the period in which final amounts are determined.

10. Commitments

The Organization has entered into various lease agreements with estimated minimum annual payments as follows:

2019	55,500
2020	51,792
2021	51,792
2022	9,191

11. Budget information

During the year, the Board approved its operating budget based on planned expenses relating to the current year funding as identified in the service agreement and other current year sources of revenue. This budget was also identified on the quarterly reports. The budget balances have been attached for information purposes only and are unaudited.

12. Financial instruments

The Organization, as part of its operations, carries a number of financial instruments. It is management's opinion that the Organization is not exposed to significant interest, currency, credit or other price risks arising from these financial instruments except as otherwise disclosed.

Liquidity risk

Liquidity risk is the risk that the Organization will encounter difficulty in meeting obligations associated with financial liabilities. The Organization's exposure to liquidity risk is dependent on the collection of accounts, purchasing commitments and obligations of raising funds to meet commitments and sustain operations.

Interest rate risk

Interest rate risk is the risk that the value of a financial instrument might be adversely affected by a change in the interest rates. Changes in market interest rates may have an effect on the cash flows associated with some financial assets and liabilities, known as cash flow risk, and on the fair value of other financial assets or liabilities, known as price risk.

The Organization is exposed to interest rate cash flow risk on its bank indebtedness which bears interest at a floating rate.

13. Economic dependence

The Organization's primary source of revenue is provincial government grants from Saskatchewan Ministry of Health. The grant funding can be cancelled if the Organization does not observe certain established guidelines. The Organization's ability to continue viable operations is dependent upon maintaining its right to follow the criteria within the annual service agreement. As at the date of these financial statements the Organization believes that it is in compliance with the annual service agreement.

14. Income taxes

The Organization is registered as a charitable organization under the *Income Tax Act* (the "Act") and as such is exempt from income taxes and is able to issue donation receipts for income tax purposes. In order to maintain its status as a registered charity under the Act, the Organization must meet certain requirements within the Act. In the opinion of management, these requirements have been met.

Metis Addictions Council of Saskatchewan Inc.
Schedule 1 - Schedule of Core Services Expenditures
For the year ended March 31, 2018

	<i>2018 Budget (Unaudited) (Note 11)</i>	<i>2018</i>	<i>2017</i>
Expenses			
Advertising	5,480	2,126	541
Automobile insurance	1,450	1,657	1,360
Bank charges and interest	3,500	3,940	4,304
Building insurance	6,576	5,266	5,578
Director liability insurance	990	990	990
Professional and legal fees	30,650	63,395	32,934
Rent	48,240	46,119	46,009
Repairs and maintenance	13,110	5,356	3,154
Salaries, wages and benefits	524,370	460,318	513,882
Staff recruitment and education	11,400	1,372	1,267
Supplies: food	500	178	97
Supplies: housekeeping	530	57	364
Supplies: office	17,100	42,651	27,373
Supplies: programming	750	131	120
Telephone	6,800	5,886	6,238
Travel	15,210	10,119	7,605
Utilities	5,220	5,707	4,516
	691,876	655,268	656,332

Metis Addictions Council of Saskatchewan Inc.
Schedule 2 - Schedule of Addiction Services Expenditures
For the year ended March 31, 2018

	<i>2018 Budget (Unaudited) (Note 11)</i>	<i>2018</i>	<i>2017</i>
Expenses			
Advertising and promotion	8,390	777	773
Bank charges and interest	800	240	1,142
Building insurance	25,107	17,833	18,738
Director liability insurance	1,650	2,290	1,650
Professional fees	4,050	6,915	957
Property taxes	210	215	208
Repairs and maintenance	68,550	73,781	54,052
Salaries, wages and benefits	1,972,995	1,825,124	1,973,460
Staff recruiting and education	18,400	6,897	2,317
Supplies: food	126,000	107,431	118,176
Supplies: housekeeping	14,100	25,632	10,671
Supplies: medical	4,825	1,900	707
Supplies: office	22,300	46,259	40,473
Supplies: programming	33,500	29,214	19,026
Telephone	29,800	23,721	27,470
Travel	40,200	28,661	26,154
Utilities	66,952	59,181	69,088
	2,437,829	2,256,071	2,365,062

Metis Addictions Council of Saskatchewan Inc.
Schedule 3 - Schedule of Board Expenditures

For the year ended March 31, 2018

	2018 <i>Budget</i> <i>(Unaudited)</i> <i>(Note 11)</i>	2018	2017
Expenses			
Director liability insurance	1,320	1,320	1,320
Honorarium	8,000	6,365	4,368
Hotel	2,800	1,641	753
Meetings	1,500	1,391	1,254
Sustenance	2,500	1,563	746
Telephone	2,200	1,650	1,650
Training	1,680	-	-
Travel	5,000	5,600	1,563
	25,000	19,530	11,654

Program and Service Delivery



Our Treatment Centres

Prince Albert

This center is currently running three programs out of the Prince Albert Center. The Outpatient Program has seen a number of Counsellor changes throughout the year. In 2018, the center welcomed an old employee into the Counsellor position and she has remained in this position until the present time. Secondly, Prince Albert hosts a 28-day Inpatient Program, which has also seen a number of changes throughout the year, with respect to counsellors. The program was running with one Counsellor for a good part of the year, and the client numbers are down, due to the unfortunate shortness of qualified Counsellors applying to the center.

MACSI was also able to reopen the Stabilization Unit in the month of November, and has a good standing relationship with the Brief and social detox in Prince Albert. Our PA facility has a total of 16 inpatient beds and 6 stabilization beds.

Saskatoon

This center is currently running three programs out of the Saskatoon Center. There is an outpatient program that had one Counselor for majority of the year and has a large amount of clientele utilizing this service. As well as the 28-day Inpatient Program which was short a Counsellor for a few months of the year however was able to keep the numbers up. There is also the Day Program, which is run on a drop-in basis, Monday to Friday in the afternoons from 1:00 pm to 4:00 pm. This program currently has the highest numbers of all of our MACSI programs, as it is run on a 6-week rotation and is more flexible than the Inpatient Program. The Day Program is run from the stand point of harm reduction. There are a total of 15 inpatient beds in this facility.

Regina

MACSI is currently running 2 programs directly from the Regina Centre. The Outpatient Program and the 28-day Inpatient Program are held onsite at the treatment centre. MACSI also runs an Aftercare Pro-

gram, which is currently being run out of house, at the All Nations Hope Network. The center has also seen a change of Inpatient Counselors throughout the year, and this has also affected the numbers. There are a total of 12 inpatient beds, as well as 4 transition beds that are part of a partnership with the Health Region.

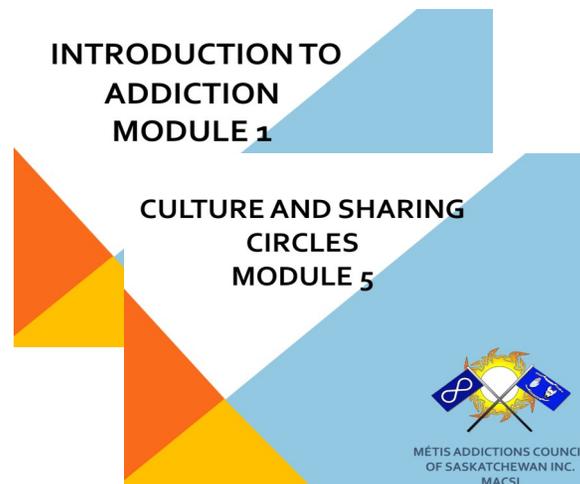
Aftercare Services

MACSI's vision for empowering clients, families, and communities plays out in the ongoing evaluation and adaptation of treatment techniques. The Road to Recovery Aftercare Program addresses the following topics over a six-week term:

- Setting Goals
- Attitudes And Beliefs
- Relapse Prevention
- Communication
- Stress And Emotional Wellbeing
- Humour In Recovery
- Medicine Wheel Teachings
- Spirituality

Educational Modules

As a response to the 2016/2017 Programming Work Plan to enhance services through training initiatives, an in-house Modular Based Educational Program was created and implemented to meet the evolving training needs of MACSI front-line staff. The program was designed from the content of the employee feedback forms. The content for the Five Modules consisted of a combination of existing MACSI policies and procedures, MACSI standards, Provincial Clinical Principles for Alcohol and Drug Services.



Engaging with Community

MACSI's commitment to work with the public to enhance service delivery by finding creative ways to reduce stigma continues. This year MACSI has worked hard extending our networking to include agencies outside of Addiction and Mental Services. By building this wide-ranging networking base, MACSI is moving into the broader continuum of care, versus being on the peripheral of it. Some of these connections include University of Saskatchewan, Camponi Housing Corporation, READ Saskatoon, Canadian Diabetes Association, the Out-Post Health Care, Oxford House Regina, and the FASD Network of Saskatchewan.



Human Resources



66 Employees

**3 Employees with
20+ years of
service**

**14 Employees
with 5+ years of
service**

Recruitment

MACSI has expanded their search for team members who not only embody the organization's diverse heritage, but also have values that align with that of the organization. Rather than using the generic job sites, the recruitment search expanded to campuses, community events, and the MACSI Facebook website. MACSI plans to continue to widen the reach of its recruitment, branching out to posting jobs on the website, estimated for completion, next fiscal year.

A larger pool of candidates means a greater selection of qualified individuals that are welcomed onto the MACSI team. Having a team built on diverse backgrounds, education and experience, means a more enriching experience for the clients. A diversified team means diversified strengths enabling each MACSI team member can capitalize on each other strengths and learn from one another, solidifying the bond of a tight knit team. MACSI watched their labour pool welcome new grads, with fresh ideas teaming up with senior counsellors with years of field experience. This mentorship style

of staffing, allowed the new grads to transition well into the professional environment with guidance from mentors. MACSI also welcomed Counsellors with a background in Child Family Services and Social Work, balancing out the Addictions focused training of the majority of the staff.

Employee

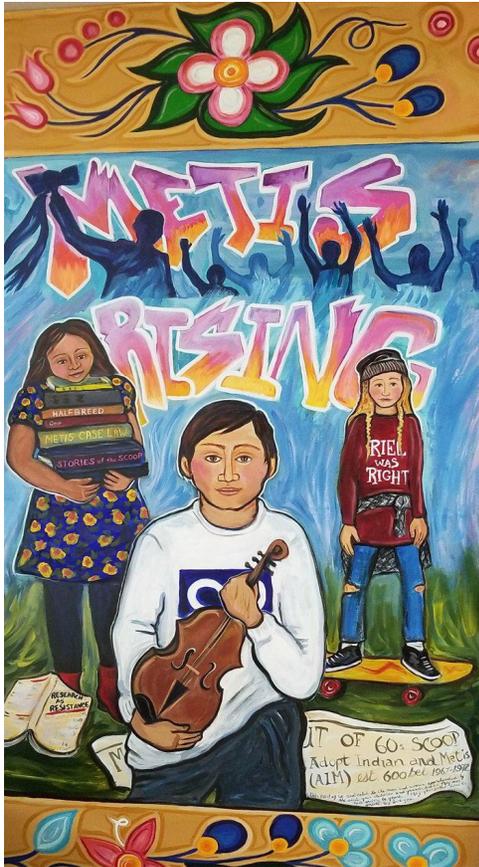
Engagement

A focus at MACSI was placed in employee engagement strategies, using small gestures of recognition and friendly staff competitions to strengthen the bond among team members and increase employee retention. Christmas cards and gift cards for the holidays, birthday cards and small gestures of thanks were used to promote recognition, conversation and thanks.

Friendly competition was also used between the 3 MACSI centers in order to promote team building. Over Christmas, a month long competition with varying events surrounding Christmas Cheer, Christmas sweater and decorating contests took place, with a finale pizza party being awarded to the entire staff. A bannock bake-off took place at each center, where the various cooks mailed in their bannock

baking for a blind taste test. The winner was awarded a trophy, for the first annual Bannock Cup at MACSI.

At MACSI, it's the small gestures and tokens that count and more importantly engage staff and clients in breaking down their walls and stresses of the everyday to have fun. MACSI believes that a more engaged staff ultimately means better client care and superior employee retention for the long term.



Training

Training continues to be a crucial aspect in employee retention and an ongoing challenge at each center. In order to provide a concrete focus in this area, a Training Manual began development. The goal of the manual was to be able to provide consistent, concrete training for every position. The manual focuses on procedure related training and specific job duties incorporating performance management to be built into the manual, providing a more relevant performance review strategy. In addition to the manual the following training took place:

- Mental Health First Aid training for each center
- Payroll training
- OHS training for relevant team members
- Future planning for Naloxone training

Training will continue to be a focus of MACSI moving into next fiscal year, where the completed training manual will be implemented and an increased push for external training will continue.

Policy Updates

In order to support the motivation for training and performance management, it was crucial to consider the existing policy manual. As times change, MACSI understands that policies and the policy manual must also evolve with them. While some policies became moot, it was realized that many policies were missing that were reflective of the day and age we live in.

A third party contractor was outsourced in order to work on incorporating new policies such as: A social media policy, cell phone policy and the updating of several other existing policies, where required. Unfortunately, the policy manual and product proposed did not align with the goals of the organization that were set out in the initial discussion and now the policy manual is pending completion until next fiscal year.

Community Relations and Outreach

Communication Strategies

MACSI has worked toward and made significant gains, with respect to having a greater community profile and presence throughout Saskatchewan. Because of the many benefits gained from consistent messaging and a collaborative approach, the Director of Community Relations has increased work with team members on planning and marketing of MACSI programs and events.

April marked the beginning of the fiscal year and entry into year 2 of the Strategic Plan *Answering the Call*. The Director of Community Relations dedicated significant time developing an annual work plan related to the strategic priority of Daily Operations. The Director of Community Relations also continued to provide support to the Prince Albert Centre, primarily related to payroll, human resources tasks such as letters, meetings and employee orientation.

Outreach

The Director of Community Relations and Outreach holds responsibility to direct MACSI's outreach activities. As such, part of the role is to identify and participate in opportunities for community involvement. A range of activities were completed this fiscal year with the following as highlights:

Participation in committee meetings such as FASD Provincial Coordinating Committee, FASD Awareness planning and Northern Gambling Awareness Committee.

Attendance and commentary at MACSI Saskatoon Centre's annual FASD Community Awareness Walk (September 2017)

Delivered a variety of presentations, including to Saskatoon United Way representatives, presentations to post-secondary students from Saskatchewan Polytech and First Nations University of Canada.

Connected with referral agents and partners associated with methadone and harm



reduction programs.

Involvement in a collaborative research project. The research aims to assess MACSI treatment modules, identify one module to develop into an iPad app and involve MACSI clients in testing the app. The Director of Community Relations was involved in the next phase of research proposal development. This involvement is positive for MACSI and stands to expand the ability of addictions service providers to meet the needs of individuals with diverse cognitive abilities. The Director of Community Relations and Outreach continued involvement with the CIHR grant proposal. Telephone meetings and emails were exchanged with researchers in order to provide feedback on the proposal, share MACSI's findings, trends, statistics and prepare a draft letter of support.

The Director of Community Relations attended two networking events in Prince Albert. The event at the Foodbank was an annual fundraiser and a good opportunity to support a community partner. The AL Anon presentation and networking event

offered opportunity to build a stronger connection with 12 step support program. The speakers offered a compelling case as to how professionals in the addictions sector can be a bridge for individuals to find community support.

Social Media

Over the course of the fiscal year a variety of social media posts were made. The page has been more active and has presented valuable information and insight into a variety of addictions, social justice and health related issues.



Organizational Support & Leadership

The Director of Community Relations actively supported the year one strategic goal of Human Resources by taking the lead on new employee onboarding at the Prince Albert Centre. The onboarding approach was implemented with the aim of achieving improved retention. Additionally, the Director of Community Relations was invited to speak at quarterly staff meetings to discuss MACSI as a whole, vision, mission, values etc.

Answering the Call

MACSI takes the “views and voices of the people of our province as a catalyst and starting point for change...”



MACSI Prince Albert



Daily Operations

Working in alignment with MACSI's Strategic Plan, MACSI Prince Albert Centre worked within the Year 2 strategic priorities of Finance, Facilities, Marketing and Partnerships. It was a very busy and full year.

MACSI Prince Albert Centre had a building appraisal completed by April 3, 2018. In April, we held the quarterly Staff meeting for the center. Stabilization was still closed in the month of April. In May, the Center had a mandatory water shut off due to the City of Prince Albert completing a water flushing system. All fiscal year ends 2016-2017 CIDS entries of ADGS and files completed. Inpatient clients were able to attend Kairos Blanket Ceremony at the Indian and Métis Friendship Center. SPI inspection was completed and passed. The Stabilization Unit continued to be closed in May. In June, the Prince Albert Regional Director's work plan was completed. The Regional Director recruited and hired full-time Maintenance position. Inpatient cli-

ents were able to attend Indigenous Author book launch at the Prince Albert Multicultural Council. Intakes for Outpatient picked up from previous months, inpatient intakes stayed around the same level, and our Stabilization Unit was still temporarily closed in June.

In July, we saw some building upkeep. Super Service assessed and fixed the boiler system. An exterminator was brought in to treat a infestation of wasps found in the wall cavity. Callbacks were being made, regarding the opening up of Stabilization Unit. Outpatient programming continued to see increase of clients, Inpatient programming saw the same level of intakes and stabilization continued to stay closed.

August was another busy month for the center. Three casual addiction workers were hired. Maintenance had been steadily working to improve the feel of the Stabilization Unit. All bedrooms, hallways and lounge were repainted. The full-time cook had an immediate sick leave. Our Regional Director met with Core Office in August, regarding the Stabilization Unit reopening. The Regional Director was able to hire a full-time cook immediately after the previous one went on leave. Elder activity was increased to bi-weekly, including more cultural components into the program.

In September, clients were able to do a lot of activities such as mini-golf, NA convention, and glow bowling. MACSI Director of Finance and Administration came to Prince Albert Center for facility inspection. As well, our Regional Director went to Regina for a two-day seminar on Opioid and Fentanyl abuse.

October was busy getting the Stabilization Unit up and running. The entire unit was cleaned, repainted and furnished with curtains and beds. The unit was accommodated with new energy-efficient lighting, as well as fan/light combinations. Public health conducted an inspection. A new Stabilization Unit counsellor was hired and orientated. In November, stabilization was re-opened. In December, our Regional Director went on leave. Also, a new Assistant Regional Director was hired.

The Prince Albert Center closed for Christmas break. One client was transported to Saskatoon Center, other clients successfully completed treatment before the closing. On January the Center re-opened. Clients were not booked in until the middle of the month. A new Outpatient Counsellor started in January, to take over from a counsellor who transferred to Saskatoon Center.

January was slower for programming/client intakes, as the Center team re-opened and was transitioning into new roles. February saw smaller intake numbers, as there was one Counsellor for the inpatient department. Our new Assistant Regional Director attended the Manager's meeting in Saskatoon. The Assistant Regional Director and the Outpatient Counsellor started to provide resource sessions to the Community Training Residence.

Three members of MACSI Board of Directors came to the Center for a tour then a meet and greet with the staff. March client numbers stayed in the same lower numbers since the re-open, due to staff shortages. The Inpatient Counsellor was still the only one in the department for programming. The new Stabilization Unit Counsellor continued to train for the department. Prince Albert Center had its quarterly staff meeting, and there was a great turnout. The Assistant Regional Director attended the strategic planning in Saskatoon, for a very nice ending to the fiscal year.



MACSI Saskatoon



Complex Needs

Trying to meet the demands of diverse and complex clientele meant greater pressure on the counsellors to meet the demand for one to one interactions and to maintain a therapeutic group dynamic. The complex needs of clients led to concerns about lack of treatment readiness, how these factors influence group dynamics and recovery for others and what MACSI could do about it.

Changes to the intake process, additional training and discussion at staff meetings improved these matters but this issue continues to be a concern that will be addressed in coming months. A focus on cultural/traditional teaching is a very important part of therapy.

April was Easter month, we had an Easter egg hunt as well as goody bags for the clients. In May, clients attended a Pow-Wow at Wanuskewin. Fun was had by all, as they enjoyed all the different dances and drumming. In June, the staff and clients went out to Batoche for the day, they had a tour and teachings of the graveyard, as well as all the buildings and their significance to Batoche. Clients en-

joyed dressing up with the clothes they had at one of the buildings and enjoyed a picnic before coming back to Saskatoon. In September, staff and clients supported a FASD Awareness Walk, barbecue and events hosted by MACSI. In December our centre received bedding from Métis Justice for all 15 beds, as well as two \$50.00 gift cards for miscellaneous items, we gave a tour to the Executive Director, as well as other staff. We mentioned that we had an unfortunate situation, in where our Day Program clients were previously offered hampers from a MACSI counsellor who was no longer with us, and therefore they would be losing out. Métis justice asked how many hampers we needed and they donated all 22 hampers with turkeys and all the sides that were required for a turkey dinner. They also purchased all the toys for the kids and the Executive Director knitted hats and mittens for all the hampers. We were so grateful to Métis Justice, and they continued being a support for our clients, by providing us with \$50 gift cards. All hampers were handed out at the client/staff Christmas potluck on December 21st. MACSI staff wrapped gifts for the Inpatient clients and had our nightshift staff put them under the tree, so clients had a gift to open Christmas morning. The clients were so thankful. Christmas Day, our Regional Director came in and prepared the

turkey for the dinner and all the fixings and the staff came in to check on clients and wish them a Merry Christmas. In February, we had a Counsellor transfer from Prince Albert, and she became a casual in our centre. In March, we had Bev Bishop transfer from Regina. Both brought much knowledge and experience; we are blessed and very thankful to have both of these Counsellors as part of the Saskatoon team. In March, we had a potluck Easter Luncheon for staff and clients. We allowed all clients to bring one support person to the lunch. Everyone enjoyed this great time together.



16th Annual FASD Walk

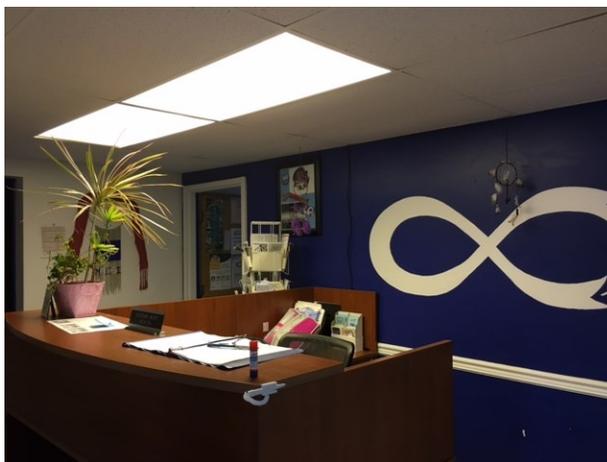
MACSI Saskatoon Centre was proud to host the 16th Annual FASD Walk for Awareness. The event was a great success and had well over 100 people participate in the presentations, luncheon, and walk. The community was able to lend its support for this important cause in a number of ways. For example, several dignitaries attended the walk and spoke, or provided entertainment at the event. Saskatoon Police Service provided a police escort on the walk. Community businesses and organizations provided donations to help offset costs of hosting this event. We are grateful for the ongoing support.

Day Program Success

Now in its 8th year of operation, Day Program has proven to be a valuable link in the continuum of addictions services in Saskatoon. Based on evaluation completed in the previous year, the program content and delivery saw a few adjustments that worked out well. Attendance numbers for Day Program remained stable and throughout the year there were many occasions with daily attendance reaching 20 or more with as many as 40 on a few occasions. Community resources continue to be an important part of Day Program and include pet therapy, AIDS Saskatoon and STR8UP.



MACSI Regina



Cultural Program

MACSI is a Métis-led organization with a commitment to offering culturally informed programming. Finding ways to incorporate cultural elements into our programming is an ongoing challenge at MACSI Regina. We continue to have one of our Addictions Workers come forward and offer to share cultural teachings with MACSI clients. This is a positive solution to an ongoing challenge; our employees are able to share passion and knowledge of culture, while we are able to enhance the services we offer. We look forward to being able to include many more cultural components in our treatment for clients, in the near future.



Improved Aftercare Program

In November, our Regina Regional Director met with the CEO of All Nations Hope Network (ANHN) to see if we could further strengthen our working relationship, by delivering our MACSI Aftercare Program from their facility. The All Nations Hope Network is located in the core central area of our community, where many of our clients are. The proposal was accepted and another meeting was scheduled for us to explain our program to the staff of ANHN. Our Outpatient Counsellor and Regional Director attended this meeting in December and all staff involved are now excited to be working together and bringing in this great program to help all our of clients. This idea was another go at making a change of this program to see how MACSI could reach out with aftercare services to our clients in our community. Thank you

ANHN for the new adventure! This was a true highlight of the year for our facility here in Regina!

Road to Recovery...
MACSI Aftercare Program

Monday afternoons 2:30-4:30 pm

All sessions will be held at
ALL NATIONS HOPE
2135 5th Avenue - Red Ribbon Room

To Register drop in or call:
MACSI Centre 306-522-3681 or
All Nations Hope 306-924-8424 Ext: 222

6 Week Program Topics:

- Setting Goals
- Attitudes and Beliefs
- Relapse
- Communication
- Stress and Emotional Well being
- Humour in Treatment
- Medicine Wheel Teachings
- Spirituality

Every new day is a chance to change your life.

Community Support

In September, staff and clients supported a FASD Awareness Walk, barbecue and events hosted by Aboriginal Family Services. The FASD Committee that our outpatient Counsellor sits on organized this event. They handed out FASD T-shirts to participants and we all enjoyed the events and beautiful weather we had for this walk.

Something New

In December, our centre received a new van! All of our Regina staff are excited that we finally got the new vehicle, as we had been waiting a long time for this to happen. This was the biggest highlight of the year for our centre!

Christmas season this year was also very exciting for the clients and the centre. Staff got together and decided that we wanted to give back and help out a past client and family, so we all contributed \$10.00 each, which went towards a gift card for a past client that is doing well in their recovery. The client we chose was very surprised and very grateful for the gift. We also had a wonderful Christmas meal for clients and their guests, and staff. We put out presents on Christmas morning for the clients that were here. They were grateful for their gifts.



