

BUSINESS PLAN

CONNECTIONS PLACE SOCIETY



www.connectionsplace.org

Our Mission

The establishment of an Accredited Clubhouse International to provide people whose lives have been disrupted by mental illness the opportunity to recover meaningful and productive lives through reintegration within the workplace and the community.

TABLE OF CONTENTS

1. Introduction	.....	3
2. Financial Requirement	.....	6
3. Overview	.....	7
4. Our Program	.....	8
5. GAP Analysis of PSR Services in the GVA	.....	11
6. Development Plan	.....	13
7. Market Analysis	.....	16
8. Competitive Analysis	.....	17
9. Financial Information	.....	19
10. Board Members	.....	20
11. Community Support	.....	20

Appendices:

- a) PSR Review (Island Health September 2015)
- b) Clubhouse International Standards
- c) Letters of Support
- d) MoU World Association Psychosocial Rehabilitation (WAPR) and Clubhouse International
- e) Pathways Clubhouse Analysis
- f) Pathways Clubhouse Makes the Top 10 Charities in Canada
- g) Pathways Initial Campaign SROI Report

1. INTRODUCTION

Connections Place Society is a non-profit society whose goal is to provide psychosocial rehabilitation (PSR) for people with a mental illness in the Greater Victoria Area (GVA). We will help people who are at risk of falling through the gaps in existing support systems. We are an upstream service that will help newly diagnosed individuals, people who are at risk of homelessness, people who are homeless as well as those isolating at home.

1.2 Psychosocial Rehabilitation

Psychosocial rehabilitation is a process that facilitates the opportunity for individuals, disabled or handicapped by a mental disorder to reach their optimal level of functioning in the community. It implies both improving individuals' competencies and introducing environmental changes in order to improve their quality of life.” (World Health Organization & the World Association for Psychosocial Rehabilitation)

1.3 The Faces of Mental Illness

Mental illness has no name, no gender, no age. It does not prey on the elderly, nor does it seek out the uneducated. It does not favor a particular culture or socio-economic status. Without discrimination and without selection, mental illness will affect one in five persons.¹

The World Health Organization reports that one in four people will be affected and that stigma, discrimination and neglect prevent care and treatment from reaching people with mental disorders. ‘Where there is neglect, there is little or no understanding. Where there is no understanding there is neglect.’²

Despite this common prevalence those suffering from mental illness are often discriminated against and shamed. If society is not stigmatizing those with mental illness, many believe it to be a crutch, with 46% of the population believing mental illness is used as an excuse for poor behavior (Mental Health Commission of Canada, 2012).

Experiencing such stigma is “a barrier that can affect nearly every aspect of life, limiting opportunities for employment, housing and education. It can also cause the loss of family and friends” thereby exacerbating feelings of loneliness and isolation (Mental Health Commission of Canada – Stigma Discussion Report).

¹ Smetanin, P., Stiff, D., Briante, C., Adair, C., Ahmad, S. & Khan, M. (2011). *The life and economic impact of major mental illness in Canada*. 2011 to 2041. RiskAnalytics, on behalf of the Mental Health Commission of Canada.

² http://www.who.int/whr/2001/media_centre/press_release/en/

1.4 The Need

Ongoing support is often necessary for people suffering from mental illness. Persistent mental illness often has a devastating disruption to a person's life. It can separate and isolate people from typical daily activities. There is a need for the Clubhouse Model in the GVA as it is apparent from the following:

- *Victoria's Vital Signs 2016 Annual Check-up* outlines the most important issues facing Greater Victoria today (1) Housing/Homelessness (2) Cost of Living (3) Mental Illness.
- *How to 'Stop' Tent Cities? Help Residents Before Crisis, Mayors Say:* The UBCM convention held in Victoria in September, 2016³ Cabinet Minister Rich Coleman said, "The biggest challenge is, how do we stop these in the future?"
- Victoria's Mayor Lisa Helps said her city spent \$1.2 million in 2015 and \$1.1 million in 2016 to deal with people sleeping in parks, most of it for policing. The recently disbanded tent city cost Victoria another \$1.6 million.⁴
- Police report a 356% increase of calls related to mental health issues for the last five years⁵
- It costs the BC economy \$6.6 billion each year (Healthy Minds, Healthy People: BC Ministry of Health. Based on the GVA's population this equates to a cost to our community of \$493 million per year.
- The shift from institutionalized mental health treatment to community-based care has led to greater numbers of persons living with mental illness PMI living without adequate psychosocial supports. Community mental health support agencies are not adequately funded or resourced to cope with the growing demand. This imbalance, coupled with the general lack of public awareness about and tolerance for PMI has caused a dramatic increase in the number of police-PMI interactions. (Canadian Mental Health Association (2005). Police and mental illness: increased interactions. www.cmha-bc.org/research

Sustainable funding for housing and our unique support is needed urgently for this vital program. Our community has struggled with unaddressed mental illness since deinstitutionalization came into affect. The outcomes are sometimes plain to see with homeless individuals and tent cities. However, there is a segment of the population that is silent and suffering and we will help these people too.

³ *The Tyee*, September 28, 2016

⁴ *The Tyee*, September 28, 2016

⁵ *Times Colonist*, June 22, 2014

1.5 How We Will Help:

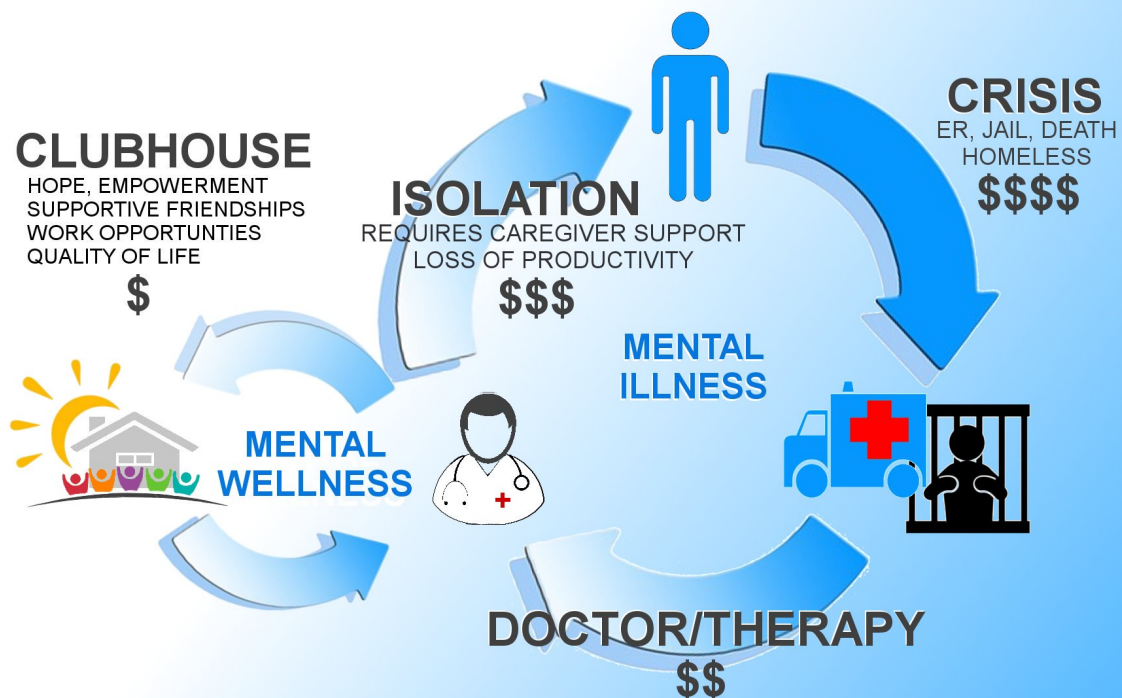
We will guide people with mental illness to social inclusion (housing, schooling, jobs and wellness) and help them maintain their physical and mental health. We will achieve this by becoming a member of 'Clubhouse International'. Clubhouse International is a multi-national non-profit organization that helps communities around the world create sustainable solutions for mental illness by developing and nurturing new and existing Clubhouses.

The Clubhouse model takes the form of an attractive community centre for those with mental illness to rebuild their lives and become productive members of society. It is a 'one stop shop' that covers housing, education, employment, social and wellness. Most importantly the Clubhouse Model is a community that opens the door to opportunities and meaningful relationships.

SUPPORT MENTAL WELLNESS

SUPPORT CLUBHOUSE

PROVEN COST-EFFECTIVE SOLUTION FOR MANAGING MENTAL ILLNESS SINCE 1948



www.preludeclubhouse.org

2. FINANCIAL REQUIREMENTS

CONNECTIONS PLACE BUDGET

Operating funds for first three years (in the range of \$1.5 million) while sustainable funding is sought.

	Yr 1	Yr 2	Yr 3
REQUIRED REVENUE	576,000	551,000	574,000
EXPENSES			
PERSONNEL EXPENSES			
Wages	210,000	255,000	255,000
Benefits (14%)	29,400	31,500	31,500
Training (including travel)	8,580	6,600	6,600
Total Personnel	247,980	293,100	293,100
FACILITY EXPENSES			
Lease (7,000sft @12)	87,600	87,600	87,600
Utilities (heat, electricity, water)	6,510	6,510	6,510
Capital Equipment	33,000	5,500	7,700
Janitorial Supplies	5,000	2,862	2,862
Maintenance/Repairs	4,580	4,580	4,580
Insurance	2,280	2,280	2,280
Renovation/installation (start up)	75,000	20,000	5,000
Total Facility	213,970	129,332	116,532
OTHER EXPENSES			
Office Supplies	15,020	15,020	15,020
Internet	1,200	1,200	1,200
Equipment (<\$200)	3,300	1,100	1,100
Equipment maintenance/repair	1,100	3,300	5,500
Telephone	4,926	4,926	4,926
Postage	1,898	1,898	1,898
Clubhouse International Membership	1,058	1,320	1,601
Clubhouse International Accreditation	0	0	3,000
Fundraising costs	4,400	6,600	11,286
Vehicle Rental/Staff Mileage	2,000	3,000	3,000
Food	20,000	30,000	50,866
Accounting/legal	3,300	5,500	6,356
Total Other	58,202	73,864	105,753
Subtotal all expenses	520,152	496,296	515,385
Administration 10% of sub-total expenses	52,015	49,630	51,539
TOTAL EXPENSES	572,167	545,926	566,924

3. OVERVIEW:

3.1 The History of Clubhouse⁶

Clubhouse International was established in 1994 to promote the development and strengthening of Clubhouses worldwide. It offers communities a scientifically validated, widely successful approach to recovery from mental illness; a best practice quality assurance system, and a global advocacy network with a strong tradition of successful partnerships. Today there are over 330 Clubhouses in operation worldwide.⁷

1948 the first Clubhouse was established - Fountain House in New York City. Fountain House was established by a group of ex-patients from a psychiatric hospital that provided 'members', adults and young adults diagnosed with mental illness, a place where they could work productively and have socially satisfying lives in spite of their illness.

In 2014 Clubhouse International signed a Memorandum of Understanding with the World Association for PSR (WAPR) concerning the worldwide collaboration to promote the best practices of community-based PSR methods, like the evidence-based Clubhouse model as a successful means to support the social inclusion and equal participation of people with mental disorders.

3.2 The Benefits of Connections Place joining Clubhouse International:

- Connections Place will belong to a worldwide federation of like-minded, evidence-based programs seeking to help citizens of all countries cope with mental illness.
- Contribute to the on-going evolution of International Standards for Clubhouse Programs by which all Clubhouses are evaluated.
- Receive technical assistance and on-site consultation as part of the accreditation program.
- Have the opportunity to achieve internationally recognized accreditation.
- Contribute to multi-Clubhouse research studies, empirically establishing the validity of the model.
- Start-up assistance and guidance to ensure successful outcomes.

⁶ <http://www.clubhouse-intl.org/history.htm#dev>

⁷ recent_ch_research_joel_tweet_092611.pdf

4. OUR PROGRAM:

4.1 International Standards:

Connections Place will follow the 37 International Standards (attached) that are the heart of the Clubhouse Community's success in helping people with mental illness to stay out of hospitals while achieving social, financial, educational and vocational goals. The Standards also serve as a "bill of rights" for members and a code of ethics for staff, board and administrators. The Standards ensure that a Clubhouse is a place that offers respect and opportunity to its members. The Standards provide the basis for assessing Clubhouse quality, through the Clubhouse International accreditation process. (Clubhouse International Resource Guide)

When you enter Connections Place you will find a place of business. You will be met at reception and see members and staff working to make lunch, answering phones, enter data into computers, administering a community bank, conducting tours, and literally everything else done in the community.

Working in Connections Place is more than just regaining skills. The work gives everyone a chance to help others, make friends and start living a life of meaning and purpose. This supportive community naturally encourages people to set and achieve other goals in life.

4.2 The Work Ordered Day:

- Encourages members and staff together, side-by-side, in the running of the Connections Place. We will focus on strengths, talents and abilities. The work done in Connections Place is exclusively the work generated by our Clubhouse in the operation and enhancement of the Clubhouse community.
- Connections Place will be open at least five days a week. The work-ordered day parallels typical working hours.
- Our Clubhouse will be organized into one or more work units, each of which has sufficient staff, members and meaningful work to sustain a full and engaging work-ordered day. Unit meetings are held to foster relationships as well as to organize and plan the work of the day.
- All work in our Clubhouse is designed to help members regain self worth, purpose and confidence; it is not intended to be job specific training.
- Members have the opportunity to participate in all the work of the Clubhouse, including administration, research, enrollment and orientation, reach out, hiring, training and evaluation of staff, public relations, advocacy and evaluation of Clubhouse effectiveness.

The underlying belief of the Work-Ordered Day is that regardless of a member's disability every member has a contribution to make that will assist with achieving the work required of the Clubhouse. The belief of members being needed, expected and wanted portrays the message that we need you to be involved and

get the work done. This sense of belonging is very powerful and ultimately helps members to increase their self esteem and confidence.

Units vary from Clubhouse to Clubhouse depending on space. Some are able to accommodate a gift shop and others not for example. Here are the key units that we are striving to have for our members:

4.3 Food Services Unit (Café/Restaurant):

Members and staff will work together to shop for groceries, prepare and cook meals, serve lunch, clean up, and run the snack bar. Menu planning creates meaningful work in the afternoon to prepare for the days to come.

The kitchen will be the heart of Connections Place and you will find creativity, fun and teamwork. In summary the functions of this unit include: menu planning, inventory, shopping, food handling and safety, housekeeping and general kitchen maintenance, cash register operation/control, special event planning, catering, fundraising and individual/group cooking lessons.

4.4 Administration, Enrolment and Reach Out Unit

The unit provides administrative support, enrolment activities and reach-out services to the entire clubhouse. Through participation, members have the opportunity to develop and/or maintain a variety of office skills.

Examples of the work of this unit include:

- Administration (typing, photocopying, faxing, office supply control, data entry, conducting tours, maintaining enrolment forms and files, new member orientation and reception)
- Reach Out (attendance statistics, reach out calls and visits to members and special announcements)

4.5 Employment, Education and Finance Unit

This unit assists members to further their vocational and educational goals. Also, members involved in clubhouse finances assist with accounting for income, expenses and budgeting associated with all clubhouse units. Functions of this unit include:

- Employment - Enable members to return to paid work through:
 - Transitional Employment TE (Entry level/part-time/full support/coverage guaranteed for the employer.) Clubhouse finds businesses for their members to participate in paid work in the community. No resumes or job interview required. Members gain confidence, self-esteem and are able to develop a resume.
 - Supported Employment
 - Independent Employment

- Education - Assist members with educational goals including: Basic literacy skills, Secondary and Post Secondary. We believe that education is part of vocational success and we therefore will support members' education goals and aspirations. Members will obtain their GED, attend university, participate in workshops in the community and learning job related skills. Connections Place will connect members with scholarships, bursaries and tutors.
- Finance – encourage members with tracking income and expenses from unit operations, unit budgeting, banking, inventory control and ordering supplies

4.6 Maintenance Activities (shared by all Clubhouse Units Staff and Members)

- Maintaining hallways, washrooms and common areas
- Maintaining entrance ways and designated outside smoking area
- Cleaning windows and maintaining all clubhouse entrances

4.7 Social Planning

Members and staff meet once a month to plan and organize the social calendar. Our goal is for social to take place on Monday and Wednesday late afternoon/evening til 9:00 pm. Activities we are aiming for include: dining out, movies at a theatre, golfing, bowling, dance on Valentines Day. Connections Place will subsidize a portion of the cost. Activities will increase as Connections Place evolves.

4.8 Wellness Program

We recognize the connection between one's mental health and physical health. As such, we provide opportunities to be physically active and eat a balanced diet. We will go for daily walks have weekly yoga and low impact fitness classes, do gardening (horticulture unit) and will have a variety of on site gym equipment, as well as monthly presentations from a Dietician. Our goal is to provide free drop in passes for members to access the gym and swimming pools in local community centres.

4.9 Horticulture Unit:

Living in the City of Gardens our aim is to have a garden for Connections Place - for both floral creations and edibles.

5. GAP ANALYSIS OF PSR SERVICES IN THE GVA

5.1 Overview:

The Clubhouse and Alternatives Working Group (see below) requested a review of mental health PSR and recovery-oriented services in the region to identify strengths, gaps and opportunities to improve service. The review was to be evidence based or informed and was to be conducted by outside consultants.

The recent study (attached published by Dr. John Higenbottam and Dr. Regina Casey is entitled, 'Review of Greater Victoria Psychosocial Rehabilitation and Recovery Oriented Services' It identifies the strengths and challenges of IHA Mental Health Service Delivery through a recovery-oriented psychosocial rehabilitation lens.

Participants in the review included:

- Island Health Authority
- Moms Like Us (now Connections Place Society)
- Island Community Mental Health (ICMH)
- Victoria Cool Aid Society
- Victoria Municipality
- BC Schizophrenia Society Victoria
- Bipolar Disorder Society of BC
- Canadian Mental Health Association (CMHA)

5.2 Gaps/Needs in Services:

5.2.1

Social/Vocational Needs for Young People: *Stakeholders identify a need for service development to meet the social and vocation needs that will also engage young people.* The preferred option to meet this need specifically for *Moms Like Us* is for the development of an accredited Clubhouse (discussed in more detail in section 1.5.1). In addition, *family members identify a need specifically for a 'gathering place'* where their loved ones with mental illness can be part of a peer community.

5.2.2

Service/Vocational Requirements: *Greater coordination and/or integration of mental health services agencies is required. Linked to this point is an identified need for system navigation not only for service users and their families but also service providers. Navigation is a particularly acute problem for 'new' service users and their families.* Currently there is no 'map' which identifies and clarifies service pathways and resources.

5.2.3

Family Support: According to stakeholders family members/caregivers have limited opportunities to be involved in their loved ones' care, service design and delivery and research. *Family members identify a need for mentorship and 'in-reach' services to assist them living with their mentally ill relatives.*

5.2.4

Inconsistent Implementation of Programs: *While IHA is committed to Evidence Based and Evidence Informed approaches these approaches are not being consistently implemented. The development of supported employment and educational interventions are immediate priorities.*

5.2.5

Lack of Outcome Data: *The absence of outcome data needed to evaluate the outcomes of PSR and recovery oriented services for individuals, evaluate the effectiveness of PSR and recovery oriented service and to thoughtfully engage in future PSR and recovery service planning was noted.*

5.2.6

Improved Access Needed: *Service users and families agree on the need for better access to psychotherapies like Dialectical Behavior Therapy (DBT) and Cognitive Behavior Therapies (CBT) on an individual or group basis. In addition improved access to IHA mental health services i.e. Day Hospital and Victoria Mental Health Centre is required.*

5.2.7

Peer Support Urgently Needed: *Stakeholders acknowledge the urgent need for increased peer support services through the GVA.*

5.2.8

Education of Health Staff Needed: *There is an identified need for more mental health staff education in PSR and Recovery.*

5.2.9

Areas of Particular Need: *Areas identified where there is a particular need for more services include Peer Services, WRAP, Supported Employment and Supported Education.*

5.2.10

New Money Is Needed: *In addition, stakeholders expressed concerns that the funds for any new service, such as a Clubhouse, should not be taken from existing PSR and recovery programs; there was agreement that 'new' money is needed to develop new services. A number of potential local, provincial and possibly federal sources of funds should be further explored.*

5.2.11

Recommendations included an Accredited Clubhouse

Develop a social gathering place for people with lived experience. In addition to meeting social needs, this resource would provide peer support and mentoring that could; build on strengths, support the development of wellness and social skills and facilitate engagement in services such as Supported Education and Supported Employment. As noted, these functions may best provided by an accredited Clubhouse. The funding for this resource should be 'new money', perhaps acquired through a fund raising campaign.

6. DEVELOPMENT PLAN

6.1 Our Mentor: Mr. Dave MacDonald, ED, Pathways Clubhouse Richmond

Over the past 30 years Dave has become a leader in the Clubhouse movement internationally. He has evaluated similar programs all over the world, including, England, Korea, Sweden, Finland and throughout the United States. In 1994 Dave left Pathways Clubhouse for one year to open a Clubhouse in Perth, Australia. Dave is now the Canadian expert on the Clubhouse Model and programs throughout BC and western Canada consistently approach Dave for advice and guidance on how to start up Clubhouses in their own communities.

Today Pathways Clubhouse has a membership of over 1000. 200 people walk through our doors every month, and 100 people have safe, decent and affordable housing. Over the past 30 years, hundreds of people have returned to work and pursued education. Members of Pathways Clubhouse have access to affordable meals everyday and a welcoming environment that is open 365 days a year.

Dave MacDonald will assist with our start-up and help guide us through every step.

6.1.1 Clubhouse Funding

Sustainable government funding is required to ensure that this vital program endures to help people rebuild their lives now and into the future. Clubhouse budget requirements detailed on page 6.

6.1.2 Building and Space:

A Clubhouse needs to have its own identify and space. As outlined in the Standards, Clubhouses should separate from mental health centres or institutional settings. The Clubhouse should be designed to facilitate the work-ordered day and at the same time be attractive, adequate in size, and convey a sense of respect, dignity and community.

- 100 sq. ft. per member is a general figure to go by. We are estimating for a building to be approximately 6,000 sq. ft. with a large commercial kitchen and restrooms. It is important to think about growing membership; therefore, a larger building we could grow into to would be ideal.
- The building should have access to public transportation, shopping and banking facilities.
- Consideration of access to potential transitional employment opportunities is key.
- The space should be image-enhancing and reflect the important work that happens in the Clubhouse. Large open spaces are preferable rather than lots of rooms with walls.
- A large dining area for seating and a conference meeting room for the many regularly scheduled policy or administrative meetings.

6.1.3 Housing Funding

Rental accommodation in the GVA is difficult to find and pay for even with a good income. For those with mental illness the problem escalates substantially to the point that people with mental illness are at risk for homelessness.

We envision approximately 24 units, modelled on the Pathways apartment complex, 'Alexandra Court'.

A building with that could accommodate both housing and the Clubhouse would be ideal. In addition to have space to rent out to others – office or retail would be a bonus to help offset the costs of Clubhouse operations.

In addition to one's mental well-being, housing is also tied to one's physical well-being and social well-being. Good housing can help rebuild and maintain independence, day to –day routines, confidence and social networks. Research shows that people living with a mental disorder who live where they want to are more likely to have a job, social supports and a higher quality of life than those whose housing doesn't meet their needs.

We will help members find access to housing and provide mental health support through the operation of the Clubhouse. Each member receives a support staff who provides tailored services to the member to ensure they maintain their housing. Staff helps members with budgeting, grocery shopping, tenancy disputes, social assistance claims and crisis support to name a few..

6.1.4 The First Days of the Clubhouse

Once a Director has been hired, she /he will introduce themselves to the mental health community that will be making referrals to the Clubhouse, or those people who are themselves potential members of the Clubhouse. Initially the Director will work as part of the working group. *The working group will arrange introductions, meetings and even a reception for the new Executive Director and include all family groups, consumer groups, mental health organizations, government officials, funders and potential Transitional Employment employers.*

The initial days the working group will focus on what the working group identifies as being the most important tasks. The kitchen is often identified as the most important unit to develop first, therefore, the preparation and serving a meal to a group of people becomes an area to focus on. *The important point is that Clubhouses need to grow through a process of deciding what is important to their particular community. Ideally there should be at least two staff per unit – planning and structuring the units will develop as needs arise and funds permit.*

The first few days it is important to create an atmosphere with a sense of belonging and trust. Greeting members each day, calling those that may have initially come but not returned, or potential members, and talking opening about the direction of the Clubhouse with all those involved helps to foster a sense of caring and responsibility for those involved.

6.1.5 Hiring Staff:

With funding in place, hiring key staff members becomes a priority. If possible, members should be included in this process in screening resumes, participating on interview panels, providing tours for applicants. This builds a sense of ownership right from the beginning and shows the members that their opinion counts. If members are included and the new staff person does not work out, then there is a sense of shared responsibility and the group owns it, not an individual. This is an important example of building relationships in the Clubhouse.

6.1.6 Training Staff & Members

Comprehensive Clubhouse Training Bases are housed in some of the strongest Clubhouses in the world. Participants will have the opportunity to be immersed in the unique 'culture' of a Clubhouse, working alongside with people who have mental illness and the Clubhouse staff. Participants have both experiential and didactic opportunities to fully explore all the essential components of a strong Clubhouse program.

If our budget permits this is the ideal situation, however, Pathways in Richmond has offered to assist with our training should the need arise.

6.1.7 Identifying Transitional Employment (TE) Employers for the Clubhouse

TE is a cornerstone of Clubhouse International Clubhouses. It is vital to get TE operating as soon as possible. Helping our members return to paid employment is a primary function of the Clubhouse as a service to it's members. It is also a high profile success for the Clubhouse. Success breeds success. If a Clubhouse can start members working in TE the day that the Clubhouse doors open it goes a long way towards promoting the Clubhouse with potential new members, funders and others in the community. Successful employment programs are also often a magnet for additional funding from government and private organizations.

7. MARKET ANALYSIS

7.1 Findings from the PSR Review (Island Health)

'In terms of demographics, there is an over representation of people with serious mental illness some of whom are homeless within the GVA. This is in part, due to drift from other regions of the province and the country. At the same time, there has been significant growth in the population of the GVA. These demographic factors present particular challenges for mental health and substance use services in the GVA

7.2 Statistics

Mental illness is the leading cause of hospital admission for those aged between 15 and 34 years of age, and the second leading cause of hospital admission for those aged 35 to 44.⁸

“Of the 37,270 hospital admissions to Greater Victoria in 2011/12 (169,153 patient days), mental diseases and disorders were responsible for the most patient days, (34,311 or 20.3%).⁹

People with mental illness are also over represented in the statistics on substance abuse and homelessness. Homelessness is over represented in the statistics on accidental deaths and deaths by overdose and suicide.¹⁰

It is estimated that 90% of suicides in Canada are linked to mental illness.¹¹

Mental illness is more prevalent than cancer, diabetes or heart disease (WHO). By 2020, behavioural health disorders will be the #1 cause of disability worldwide surpassing all other illness (SAMSHA – Substance Abuse and Mental Health Services Administration).

The need is clear that a proactive, upstream program to help prevent police interactions, repeated hospitalizations and homelessness is urgently needed. Clubhouse International is a vital program that will help the people we house and also those within the greater community.

⁸ Conference Board of Canada (2012). Mortality due to mental disorders. Retrieved from: <http://www.conferenceboard.ca/hcp/details/health/mortality-mental-disorders.aspx>

⁹ Island Health (2014). Local Health area profile Greater Victoria (61). Prepared by Planning and Community Engagement, December 2014. P. 41

¹⁰ Sean Condon and Jenn McDermid (2014). Dying on the streets, homeless deaths in British Columbia. Megaphone

¹¹ MedicineNet.com (2015). Retrieved from: <http://www.medicinenet.com/script/main/art/asp?articlekey=84760>

8. COMPETITIVE ANALYSIS

8.1 Existing Services in the GVA

The current PSR programs do not have a strengths-based approach. Outcomes are not readily available and service navigation is a problem for service users and their families. Very little choice is available for recovery and services tend to be prescribed and clinical.

8.2 Why is Connections Place Unique (what sets it apart from existing programs):

- ***We will guide people to social inclusion*** (jobs, schooling, housing and wellness) *all under one roof. This will help with system navigation – connecting members to other services in the GVA.* We help people newly diagnosed as well as those with a long term illness
- Housing: ***Clubhouse International are pioneers in housing the at risk population with 60 years experience.*** 99% of the members of Fountain House (the original Clubhouse are housed).
- We are ***non-clinical*** and our staff and our members (not patients or clients) work together side-by-side ensuring the important work of our clubhouse is carried out – you will often not be able to tell who is a member and who is a staff person.
- ***Purposely under-staffed*** as it is the members who are needed and wanted to perform the important work of the Clubhouse.
- We will be a ***working community*** based on the belief that members are partners in their own recovery, rather than passive recipients of treatment and that meaningful work and relationships are integral to mental health.
- ***Focus is on long-term recovery*** – there are *no time limits* to membership. The goal is for people to get people back to work or school, however, if they need extra time or to return they are always welcome.
- ***Outcomes are available*** that demonstrates that accredited Clubhouses promote recovery, reduces hospital stays, help members obtain community-based employment, are cost effective and improve quality of life (appendices research paper – will send later)
- We are ***part of a network*** of 330 Clubhouses worldwide that help 100,000 people each year reclaim their lives.
- We will strive (with adequate funding) to be ***open 7 days per week*** (including statutory holidays). Christmas will be celebrated on Christmas Day for example.
- We will institute ***‘Double Trouble Meetings’*** for those with a dual diagnosis of mental illness and chemical abuse. We will connect people with addiction to services in our community.
- ***Reach-Out:*** This will include visiting the psychiatric hospital and inviting patients to the Clubhouse to have lunch and find out what programs are available. If you are a member of the Clubhouse and you haven't attended the Clubhouse recently – you will receive a friendly call.
- ***Peer Support occurs naturally*** through the shared activities that take place in the Clubhouse.
- For ages 18+ and will develop ***programs for young adults and high school students*** too as our mentor has done successfully in Richmond BC.

- The Clubhouse model has been accepted for inclusion as **evidence-based best practice by United States Substance Abuse and Mental Health Services Administration (SAMHSA)**
- Fountain House (original Clubhouse) is **a recipient of the Conrad N. Hilton Humanitarian Award** – the highest humanitarian award in the world. This reflects on all Clubhouses globally.

9. FINANCIAL INFORMATION

By joining the network of Clubhouse International we can expect to achieve the same outcomes as our fellow clubhouses. Pathways our mentor Clubhouse has achieved a Societal Return on Investment (SROI) of \$14. saved in societal costs for every \$1 invested in the Clubhouse.

9.1 Societal Return on Investment

Success Markets Inc. based in Washington DC, completed their independent review of Pathways in April 2014 (attached initial Capital Campaign SROI Report)

Social return on investment (SROI) is a principles-based method for measuring [extra-financial value](#) (i.e., environmental and social value not currently reflected in conventional financial accounts) relative to resources invested. It can be used by any entity to evaluate impact on [stakeholders](#), identify ways to [improve performance](#), and enhance the performance of investments. (Wikipedia)

With adequate funding Connections Place can expect the same outcomes (Building on Strength Report) that Pathways achieves including the SROI results.

9.2 Public and Private Foundations

Although it is uncommon for Foundations to be provide perpetual funding for a Clubhouse it is not uncommon for them to provide start-up funds or capital funds or one-time grants.

9.3 Community Contributions

Our goal is to establish community support as Pathways has. Their annual report lists 5 pages of supporters that includes: Vancouver Coastal Health Authority, City of Richmond, BC Housing, BC Responsible & Problem Gambling, Coast Capital Savings, Private Foundations, Richmond Community Foundation, The Variety Club, BC Psychiatric Association, West Jet, Richmond News, The Vancouver Aquarium, BC Lions, numerous businesses and individuals.

Raising community awareness of the need for Connections Place will continue by hosting public events and forming relationships with local businesses and partners.

10. BOARD MEMBERS

Alex Ashby, Cherry Lynn Brown, Trevor Dyck (Sgt. Saanich Police Dept.), Fred Haynes (Co-Chair and Saanich Councillor), Paul McKivett (Treasurer), Sandy McManus, Jill Moores, Andrea Paquette (ED Stigma Free Society), Paul Reshaur (Sgt. RCMP Westshore), Jackie Powell (Chair), Carl Stovel (retired psychiatrist)

11. COMMUNITY SUPPORT

- The Saanich Legacy Foundation is our partner to help bridge the time between now and when we receive charity status – they issue tax receipts to donors.
- 1,000 signatures supporting the establishment of a Clubhouse have been collected along with support letters from
- 36 Letters included in the appendices from Mayors of the GVA, Police Chiefs, physicians as well as local MP's and MLA's
- Uptown Mall, Yellow Cab Taxi, Seafirst Insurance support our initiative by offering space at no charge, event insurance coverage and taxi service for guests.
- We have had three public events and good turnout for all three.
- Momentum is building and activities planned for 2017
- As we build support and momentum, the goal is to ultimately follow in our mentor's footsteps and be able to list five pages of supporters that include individuals, businesses and government agencies
- Connections Place voted in March 2017 by the 100+ Women Who Care to receive \$25,000