



Canadian Federation of Mental Health Nurses

**Fédération Canadienne des Infirmières et
Infirmiers en Santé Mentale**

2013 Annual Report



2013 Annual Report

Index

1. 2013 AGM Agenda (Friday, October 4th)	pg 3
2. President's Report	pg 4
3. Treasurer's Report and Statements.....	pg 5
4. Provincial Directors Reports.....	pg 8
a. British Columbia	
b. Albertan (Report Included)	
c. Saskatchewan	
d. Manitoba	
e. Ontario (Report Included)	
f. Quebec (Report Included)	
g. Nova Scotia (Report Included)	
h. New Brunswick (vacant)	
i. Prince Edward Island	
j. Newfoundland & Labrador	
5. Other Reports.....	pg 13
a. Past Presidents Report	
b. National Office	
c. Membership	
d. Standards of Practice	
6. 2013 Election/Slate of Nominees.....	pg 17



CFMHN 2013 Annual Meeting
Friday, October 4th, 2013
7:30 am Pacific Standard Time

Agenda

1. Call to Order
2. Approval of Agenda
3. Introduction of Board of Directors
4. Approval of Minutes of the 2012 AGM, Toronto
5. President's Report
6. Reports from Provincial Representatives & Committee Chairs
7. Presentation of the 2012-2013 Financial Report
8. Election of the Board of Directors – Provincial Directors
 - British Columbia – Marlee Groening
 - Alberta – Joan Campbell
 - Saskatchewan – Holly Graham-Marrs
 - Manitoba – Ann Cooper
 - Ontario – Carmen Rodrigue (MHNIG representative)
 - Quebec – Hélène Clavet
 - Nova Scotia – Sherette Currie
 - New Brunswick – VACANT
 - Prince Edward Island – VACANT
 - Newfoundland & Labrador – Florence Budden

Note: The board will determine its Officers (President, Vice President, and Treasurer) at their first meeting after AGM.

9. Mental Health Standards of Practice
10. Adjournment



Presidents Report 2013

Lorelei Faulkner-Gibson RN, BSN, MN, CPMHN(c)



We have had another very active year for the Federation. Our primary focus for this past eighteen months has been this year's biennial conference in Kelowna BC. This has been a joint effort between me, in British Columbia, and my co-chair, Marg Osborne, in Alberta. We are very excited about this event and look forward to meeting many of you.

The themes for this year's conference reflect the Mental Health Commissions' Directions; Changing Lives framework. Our abstract submissions reflected a tremendous amount of work being conducted in nursing to this direction. We look forward to the conference presentations and poster displays. As well, we have gathered together a group of very talented and knowledgeable presenters to discuss aboriginal mental health successes and challenges, with direction for mental health nurses going forward. We wrap up the conference with a presentation regarding psychologically healthy workplaces which is important to all of us.

The federation continues to contribute to a variety of initiatives pertaining to mental health issues across the country. We continue to participate with CAMIMH and the Canadian Mental Health Alliance. As well, we are an active participant with the Canadian Network of Nursing Specialties contributing to a variety of Canadian Nurse's Association position statements. Through these organizations and other venues we have also contributed to Bill C300 regarding Suicide prevention. We are indebted to our previous President Lisa Crawley for her huge contribution of time and energy keeping the Federation visible and represented at meetings in Ottawa. We have also reached out to our western nursing partners within the Registered Psychiatric Nurses Association of Canada to forge communication and understanding regarding scope of practice and future directions.

We continue to have an active website and newsletter. Thank you to Joanna Lynch for her hard work this year keeping the newsletter and website engaging. Our new segment in the newsletter highlighting mental health nurses has been a wonderful addition to the program. We welcome Vi Ensoy, who will maintain the newsletter going forward.

Our member survey has taught us a lot about what you want to see going forward and we are incorporating those ideas into what we offer. Thank you to Sherette Currie, from Nova Scotia, who is the chair of the membership committee. We also have a number of opportunities for nurses to participate either as committee members or as board members. Please ensure to contact us to share your interest and knowledge with those across the country.

Our greatest success has been the work of the Standards Committee, and chair Gloria McInnis-Perry. This truly national committee has worked diligently to revise and update the Mental Health Nursing Standards to ensure relevance, current and best-evidenced practice for use in your day to day work or for direction in clinical and academic settings. The committee will be presenting the standards at the conference, and new copies will be available in the new year.

From a financial perspective, as you will see in the attached Financial Report we have once again had a successful year, carefully managing our expenses. Thanks to our Finance Chair, Marg Osborne.

Finally, your Board of Directors will be meeting this October to review our strategic plan. We are committed to moving your organization forward in the years to come to be an active and strong voice for Mental Health Nurses.

Sincerely

Lorelei Faulkner-Gibson
President



Financial Report

Prepared By: Marg Osborne, Sherette Currie, Finance Committee
Doug Rosser, National Office

Please find on the next page the Balance Sheet and Income Statements for the Federation for the fiscal year ending June 30th, 2013.

The 2012-13 fiscal year was again a year of solid financial performance for the association. During this fiscal period we had a year-end surplus of \$8,760.00.

This success was primarily the result of the close monitoring of all expense accounts monthly by the Finance Committee. We did not run a national conference during this time frame so did not benefit from any conference surplus position (as we did the past year in Toronto). Any net proceeds from the Kelowna Conference will appear in next year's financial report.

Key Highlights of the Year Include:

- **BALANCE SHEET**
 1. Our "**Reserve Fund**" was maintained at the \$10,115.00 level.
 2. Our **cash flow** position remained healthy with \$14,783.00 on deposit while Accounts Receivable and Payable were minimal.
 3. As a result of the positive income of \$8,760.00, our Association's Net Member's Equity has risen to **\$44,438.00**, a healthy position equal to at least one year's operations.

- **INCOME STATEMENT**
 4. Income earned from membership fees continued to rise (almost 8%) and are heavily supported by the 100% of membership from the Ontario Mental Health Interest Group.
 5. We generated \$6,300.00 in revenues from employment ads on our website – down slightly from last year.
 6. After their years of support, the Canadian Nurses Association was no longer able to help subsidize 50% of our membership fees to CAMHMI. Therefore we paid the full \$3,000.00 membership ourselves.
 7. We have begun the investment into our new edition of the "Standards of Practice". During the past year we hired two academic researchers to conduct an intensive literature review as part of the Committee's work.
 8. Our national office and administrative costs were maintained at the same level.

Respectively Submitted on behalf of the Federation's Finance Committee:

Marg Osborne
Sherette Currie
Doug Rosser, National Office



Income Statement

	<u>Jul '12 - Jun 13</u>	<u>Jul '11 - Jun 12</u>
Income		
4000 · MEMBERSHIP FEES	26,032.90	23,980.00
4200 · ADVERTISING/PROMOTIONS	6,300.00	8,900.00
4400 · SPONSORSHIP & SUPPORT	0.00	1,500.00
4800 · OTHER ACTIVITIES	467.77	668.02
4900 · CONFERENCE INCOME	<u>0.00</u>	<u>9,500.00</u>
Total Income	32,800.67	44,548.02
Expense		
5000 · NATIONAL OFFICE	10,692.69	10,485.38
5100 · BOARD OF DIRECTORS	4,476.63	11,443.43
5200 · RELATED AFFILIATIONS	3,200.00	4,308.46
5300 · NEWSLETTER	350.00	0.00
5400 · WEB SITE	1,915.05	2,967.75
5500 · STANDARDS OF PRACTICE	3,076.00	532.13
5600 · MARKETING & PROMOTIONS	110.00	1,195.00
5900 · OTHER COSTS	175.00	125.00
5950 · National Conference Costs	44.39	0.00
6000 · PRE - CONFERENCE EXPENSES	<u>0.00</u>	<u>412.94</u>
Total Expense	<u>24,039.76</u>	<u>31,470.09</u>
Net Income	<u>8,760.91</u>	<u>13,077.93</u>



Balance Sheet

	<u>30 Jun</u> <u>13</u>	<u>30 Jun</u> <u>12</u>
ASSETS		
Current Assets		
Chequing/Savings		
1000 · Main Operating Account	14,783.09	10,512.70
1010 · Reserve Fund GIC	<u>10,115.39</u>	<u>10,017.51</u>
Total Chequing/Savings	24,898.48	20,530.21
Accounts Receivable		
1200 · Accounts Receivable	<u>1,695.00</u>	<u>3,082.00</u>
Total Accounts Receivable	1,695.00	3,082.00
Other Current Assets		
1275 · Member Funds Due from CCard	5,687.00	6,556.00
1276 · CCard pymts for web ads	339.00	0.00
1310 · Advances to 2013 Conference	7,704.96	2,500.00
1325 · Pins Inventory	830.83	830.83
1335 · CFMHN Pens	920.00	920.00
1375 · Display Unit	914.17	914.17
1599 · Balance Due from 2011 Conf.	0.00	2,000.00
1600 · HST	<u>4,494.56</u>	<u>4,181.50</u>
Total Other Current Assets	<u>20,890.52</u>	<u>17,902.50</u>
Total Current Assets	<u>47,484.00</u>	<u>41,514.71</u>
TOTAL ASSETS	<u><u>47,484.00</u></u>	<u><u>41,514.71</u></u>
LIABILITIES & EQUITY		
Liabilities		
Current Liabilities		
Accounts Payable		
2000 · Accounts Payable	<u>3,045.27</u>	<u>3,836.89</u>
Total Accounts Payable	<u>3,045.27</u>	<u>3,836.89</u>
Total Current Liabilities	<u>3,045.27</u>	<u>3,836.89</u>
Total Liabilities	3,045.27	3,836.89
Equity		
3900 · Retained Earnings	35,677.82	24,599.89
Net Income	<u>8,760.91</u>	<u>13,077.93</u>
Total Equity	<u>44,438.73</u>	<u>37,677.82</u>
TOTAL LIABILITIES & EQUITY	<u><u>47,484.00</u></u>	<u><u>41,514.71</u></u>



Alberta
Marg Osborne, RN, Med, PhD

Alberta Provincial Report: Alberta Representative, Marg Osborne (out-going)

This report outlines the major Addiction and Mental Health priorities of 2013 – 2014 in Alberta. Through an ongoing strategic planning process Alberta Health Services (AHS), Alberta Health and several other Government of Alberta ministries developed the document ***Creating Connections: Alberta's Addiction and Mental Health Strategy to improve the health and mental well-being of Albertans.***

The purpose of the Alberta-wide collaborative strategy is to ensure maximum coordination and effective implementation of priorities. The strategy guides and supports the ability to move forward with common goals, clearly defined priorities and concrete actions. The purpose is grounded in positive and measureable gains for clients.

Laurie Beverley, RN, BN.MN, Executive Director, Addiction and Mental Health in Alberta is one of the executive leaders responsible for the overall planning and implementation of the strategy and has provided the detailed information for this report.

The Strategy establishes five strategic directions, each with specific priorities. Each is briefly mentioned as follows:

1. Build healthy and resilient communities
 - a. Primary Health Care Tools & Support
2. Foster the development of healthy children, youth and families
 - a. Depression / Anxiety Screening
 - i. Standards
 - ii. Clinical Pathway Development
 - b. Access to Child & Adolescent Provincial Bed Plan
 - i. Children's Mental Health Plan
 - ii. Children's Mental Health Standards
 - iii. FASD Health Equity
 - iv. Protection of Children Abusing Drugs
 - v. MH Capacity Building in Schools Initiative
 - vi. Provincial Bed Plan
 - vii. Off Service Guidelines
3. Enhance community-based services, capacity and supports
 - a. Basket of Fundamental AMH Services
 - i. Define Core Basket of Services
 - ii. Telemental Health Expansion
 - iii. Zone Integration and Clinical Standards
 - iv. Provincial Diversion Program
 - v. Provincial Family Violence Treatment Program
 - vi. Safe Communities
 - vii. Safe Communities Integrated Justice Services Project
 - viii. Safe Community Enhanced AMH in Corrections
 - ix. Provincial Opioid Dependency Program
 - x. Implementation of MH Amendment Act and Community Treatment Orders
 - xi. Alberta Forensic Mental Health Program
4. Address complex needs
 - a. Tertiary Care Framework
 - b. Complex Clients



- i. Persons with Developmental Disabilities
 - ii. Housing Supports
 - iii. Project Charter (AHS & Minister of Human Services)
- 5. Enhance assurance
 - a. Workforce Development
 - b. System Performance and Research
 - c. Quality Measurement
 - d. Policy Standardization
 - i. Harmonization of AMH Policies
 - ii. Suicide Risk Management Policy Suite
 - iii. Disaster Response/Pandemic Planning
 - iv. Standards (Emerg/Protective Services/EMS)
 - v. Responsible Gambling Strategy
 - vi. Suicide Prevention

Each of these Strategic Directions and Priorities has a phased-in implementation plan with detailed activities and outcomes. Many specific achievements have been accomplished to date.

This outline of Alberta provincial priorities provides the basis of future reporting from the incoming Alberta Representative to the Federation, Joan Campbell.

Joan will be able to provide highlights and progress on any of the above initiatives in 2014. It is a very exciting time in Alberta as the restructuring of health care into an integrated operational and care system provides an opportunity to coordinate Addiction & Mental Health Services within each zone and across the province.

I would like to sincerely thank all those who have supported me in my role as Alberta representative. It was indeed an honor to represent Allberta on the national level.



Québec
Hélène Clavet, RN, M.Sc.N

1. Provincial Activity:

In this past year a new law (#21) took place September 2012 which modified the professional's code in mental health and humanitarian relations and impacted change in the role of psychiatric/mental health nurses. Some nurses can do psychotherapy if they have specific formation and recognition. Others can proceed to evaluate mental health problems on young children if the nurses have a masters degree in psychiatric nursing and a clinical experience in that field.

Since 2009 multiple changes have been made in the law regarding nurse's practice including the obligation for nurses to write a legal document called: Nurse Therapeutical Plan (PTI).

In Quebec, there are 3000 psychiatric nurses but only 350 pay their membership to AQIISM, (nursing interest group). In April, a new board was elected and the new President is Lise Laberge. Each year a colloque has been hosted at the end of May or beginning of June. The goals are to bring mental health nurses together to exchange ideas about experiences in different psychiatric fields, promote research results, and talk of new ways to do client interventions. This year the colloque held in Riviere du Loup and the theme was: «The execution to the decision: 30 years evolution». Each year, a mental health nurse is recognize for his/her work in that field as a «Membre Émérite».

The Interest Group works often on the mental health practice with the Professional Association (OIIQ). Actually, their work touches on the improvement of interventions with suicidal patients and are in relations with healthcare system for that point.

Healthcare System:

The interest group (AQIISM) has been ask to give their comments on the way care is delivered to people and what kind of problems the people with mental health problems have. A report has been made and some modification are supposed to take place for giving best services, more easily to attend and more rapidly too. They work on having mental health services everywhere in each Quebec's region and facilitate access. The goal is to work with the person as a recovery pattern and to recognize their capacity.

Many nurses will retired in a short period of time since the average age of mental health nurses is now 54 years old. This will put a lot of pressure on younger's nurses and increase the risk of lost expertise and knowledge for the client.

Hélène Clavet, M.Sc.inf
Quebec Provincial Representative



Nova Scotia

Sherette Currie, RN, BA, CPMHN(c)

1. Provincial activity:

PMH Nursing: The Nova Scotia Mental health Nurses Association continues to meet regularly and is growing in numbers. They continue to produce a Newsletter in order to keep their membership and all nurses connected and up to date. On May 9th their AGM was held along with an educational presentation and another meeting and educational session has been scheduled for October. In addition to this they plan to once again host a post CFMHN conference symposium following this years 2013 National conference in order to share all the wonderful information with those in our province that are not able to attend. Congratulations to this group for all your hard work and dedication to the profession.

Professional: Our professional Nurses Council continues to be on hiatus due to some operational difficulties, but we hope to look at this and have it up and running again as this is a valuable asset.

Health authority: CDHA continues to use the newly created suicide risk management manual, and suicide policy and forms. As well Capital Health has an online training program for health professionals. The hope is that by educating health professionals they will lessen the number of suicides that occur.

There have been many changes this past year with the amalgamation of the Mental Health Program with the Addictions prevention and treatment program. It was felt that across the country and in almost every health district in Nova Scotia, mental health and addiction services have been integrated to better serve the public. This approach was also identified in the provincial mental health and addictions strategy. As a result mental health and addictions was integrated under a single director.

We continue to work on collaboration and information sharing, reorganization of the recovery and integration portfolio and are working with families through Meriden.

As well our health and wellness minister Maureen Macdonald had released Nova Scotia's first ever government-wide strategy for mental health and addictions care called Together We Can: The Plan to Improve Mental Health and Addictions Care for Nova Scotians. We continue to work on this five-year plan that outlines 33 actions to provide better care sooner for Nova Scotians living with mental illness and addictions and their families. For more information visit:

www.gov.ns.ca/health/mhs/mental-health-addiction-strategy.asp

Education: There are 120 certified nurses in Psychiatry and Mental Health in Nova Scotia ! Congratulations to all the Nurses in NS who recently received their certification or recertification. Way to go! As well there continues to be ongoing educational opportunities (i.e. Suicide risk assessment and intervention program, Psychiatric Mental Health Nursing program, Academic day etc...)

Issues or concerns identified: Due to fiscal restraints out of province activities continue to be on hold, which limits participation in conferences etc outside our own province.



ONTARIO
CARMEN RODRIGUE, RN, MScN, CPMHN(C)

1. **Provincial Activity:** The executive members of Mental Health Nurses Interest Group (MHNIG) of Ontario held a strategic planning meeting in November 2012 in Toronto. The 2013-2015 goals that were established are the following:
 - a) To increase participation and engagement of membership and students in MHNIG existing and future opportunities
 - b) To promote mental health education
 - c) To strengthen articulation of mental health nursing identity
 - d) To build and strengthen relationships
2. **Membership:** MHNIG's current membership is 964.
3. **Members Survey:** The MHNIG sent out a survey to its members in order: a) to request feedback with regards to its strategic goals, b) to provide an opportunity for members to share thoughts and ideas and c) to seek members' involvement in MHNIG activities.

Thanks to all members who provided feedback regarding the survey.
4. **Annual General Meeting:** The Ottawa satellite hosted the MHNIG AGM via OTN on October 26, 2012 with participants from Toronto & London and Hamilton in attendance.
5. **Education:** Two excellent educational sessions were held in the afternoon of the 2012 AGM. Lisa Crawley, President (2012) of the Canadian Federation of Mental Health Nurses provided a presentation related to the 'Human Rights Issues that Affect Persons with Mental Health Disabilities and Addictions' and Mary Bartram, Director, Mental Health Strategy of Canada, Mental Health Commission of Canada presented on the 'Mental Health Strategy of Canada'.
6. **CPMHN(C) certification** – The MHNIG - Ottawa satellite continues to offer a 2 day workshop in the month of February via OTN to prepare nurses for the Canadian Nurses Association certification exam, specifically in Psychiatric and Mental Health Nursing.



REPORT OF THE PAST PRESIDENT LISA CRAWLEY

CFMHN participated with CNA in providing feedback regarding the Federal Framework for Suicide Prevention Act which states that “a federal plan designed to disseminate information, promote the use of research, share best practices and affect public attitudes towards suicide and its prevention is in the interest of all Canadians”. Further, the Act (Section 2b) states that the Government of Canada must establish a federal framework for suicide prevention that assumes responsibility for six areas of work:

- i. providing guidelines to improve public awareness and knowledge about suicide;
- ii. disseminating information about suicide, including information concerning its prevention;
- iii. making publically available existing statistics about suicide and related risk factors;
- iv. promoting collaboration and knowledge exchange across domains, sectors, regions and jurisdictions;
- v. defining best practices for the prevention of suicide; and
- vi. promoting the use of research and evidence-based practices for the prevention of suicide.

The feedback was designed to answer questions about current efforts in Canada, best practices, mechanisms and models in promoting, sharing and disseminating information, and most importantly, the perspectives and experiences of representatives of federal, provincial, and territorial governments, non-governmental organizations, and concerned individuals. This will be shared with the federation membership when the consultation and findings have been completed.

As well your board has been active at Canadian Alliance on Mental Illness & Mental Health whose vision is:

“We envision a country where all Canadians enjoy good mental health. Canadians with a lived experience of mental illness, their families and care providers must have access to the care, support and respect to which they are entitled and in parity with other health conditions.”

On October 8th, CFMHN as a member of CAMIMH and as part of the Faces of Mental Illness is scheduled to meet with MP's across Parliament Hill to increase knowledge and awareness of mental health issues. Following this full day on the Hill, their Excellencies, The Governor General of Canada and Mrs. Sharon Johnston are hosting a BBQ on October 9th and have invited stakeholders in the mental health community.



National Office Report Doug Rosser, General Manager

The past year has continued to be a busy one for the CFMHN's National Office. The National Office is essentially responsible for the following core administrative functions:

1. All financial management/accounting
2. Membership database
3. Support to the President and Board of Directors
4. Strategic Planning guidance
5. Web advertising sales
6. Publication of e-newsletter (September, 2012)
7. Conference management services & support to the national conference

Our online **membership database** is directly linked to the association's website. Members (and future members) can renew their memberships and update personal information online. Membership renewal notices are sent out in December and "follow-up" reminder notices are sent at the end of January and early March.

Web advertising has become a very successful new source of income for our association. During the recently concluded fiscal year we earned \$6,100.⁰⁰ which represented 22 hospital employment ads. This more than offset our full website operational costs which is a great help to our budget. We hope this service continues to grow – please visit our site frequently to review new job postings.

E-Communications with our membership is a new priority for the office. Historically we prepared and distributed traditional "hard copy" newsletters but increasing postage and production costs was making this an expensive undertaking. Effective September of last year the Board authorized the National Office to produce a bi-monthly e-newsletter. We hope that this increased frequency will allow us to remain in closer contact with you – our members – on key national issues impacting on the profession. During the past year we managed to get four e-newsletters out to the membership.

Administrative support for the Federation is provided under contract to First Stage Enterprises in Toronto. We work with a large number of similar national and provincial organizations much like CFMHN to provide support to the efforts of your Board of Directors and numerous committees.

If you ever need to reach the National Office please do not hesitate to contact the individuals below who work on the CFMHN's file:

- General Manager: Doug Rosser drosser@firststageinc.com
- Membership Inquiries: Jessica Kerr jessica@firststageinc.com
- Web Advertising: Brian Craig brian@firststageinc.com

Please visit our website www.cfmhn.ca



Membership Committee Report (2012- 2013)

Current Members: Sherette Currie, Chair; Anna Boyechko, Karen MacLaren, Miriam Cohen

Membership committee focus: is to participate in activities aimed at the retention of the current membership as well as the promotion of interest in the CFMHN to promote recruitment of new members and interest groups.

We have been working hard in follow up to 2012's AGM, and have been meeting regularly to look at various ways to increase and maintain our membership. We had initiated a group meeting of all the provincial representatives and plan to organize another one in order to brainstorm ways to keep each other connected and informed. Some ideas that we have implemented include provincial rep. biographies and a face book page. Thank you to all our members for your continued support, and welcome to all of our new members, we are glad to have you as part of CFMHN. We'd also like to once again congratulate the Mental Health Nurses Interest Group of Ontario for the continuing strong membership support – your members form a very important base for our national association. It has been a great summer and a great Year and I wish you all the best. Feel free to contact me with any questions or concerns. And if you are interested in joining any of our various committees feel free to contact myself for further information.

CFMHN Membership 2013

Province	2013	2012	2011
AB	20	14	12
BC	34	26	18
MB	15	10	12
NB	3	5	11
NL	7	6	20
NS	21	16	26
NT	1	1	1
ON (Individual)	37	40	37
PE	1	22	10
QC	6	5	7
SK	8	15	5
YT	0	1	0
Other	0	1 (London,UK)	1(Cambodia)
MHNIG (Ontario Interest Group)	976	958	896
Total	1129	1120	1,056

Respectfully submitted,
Sherette Currie
CFMHN Membership Chair



**Standards Committee Report
Gloria McInnis-Perry, Chair
2012-2013**

1. **Current members:** Gloria McInnis-Perry, Chair; Elaine Santa Mina (Co-Chair), Ann Greene (Co-Chair) Susan Chong, Marlee Groening, Gwen Campbell MacArthur, Kathy Wong, Carrie McCallum, Sylvia Buisson,, Edna Carloss, , and Robert Meadus.
2. **Purpose of the committee:** The intention of the standards' committee is to review, revise and provide a draft update of the Canadian Standards for Psychiatric Nursing Practice to the Board and membership .
 - a. **Number of meetings in reporting period:** The Committee as a whole met three times last year. However, the chairs met with their sub-committee working groups on many occasions to work on specific items related to the integration of the survey results, scoping the literature and revising the Standards. The three chairs also met several times for the past 6 months to discuss sub-committee work, integrate changes and prepare a presentation for the National Conference.
 - b. **Outcomes to date:**
 - i. **Revision of the CFMHN Standards has been completed.**
 - ii. **Input to the Board has been completed.**
 - iii. **Presentation for National Conference has been created.**
 - c. **Communication of Process/ Webpage:** Ann Greene forwards all minutes and resources onto the webpage. Emails and teleconferences remain the main source of communication.
3. **Issues or concerns identified:**
 - a) **Translation of the Standards Document to French**
 - b) **Other dissemination and educational processes remain to be determined.**
 - c) **Considerations and lessons learned for the next Standards of revision.**
4. **Next steps:**
 - a) To present at National Conference (Oct 2013)
 - b) To make final revisions after input (translate into French)
 - c) Communicate updates and concerns.
 - d) Develop a manuscript for publication
 - e) Present process and outcomes at appropriate conferences/forms.

Sincerely submitted,
Gloria McInnis-Perry DNSc., RN., CNS., CPMHN



**2013-14 Board of Directors
Slate of Nominees
(Two year term)**

Terms Continuing for One More Year (Expiring October 2014)

- | | |
|----------------------|---------------|
| - Joan Campbell | Alberta |
| - Holly Graham-Marrs | Saskatchewan |
| - Ann Cooper | Manitoba |
| - Carmen Rodrigue | Ontario (new) |
| - Sherette Currie | Nova Scotia |

Nominees to be Confirmed for Two Year Terms (Expiring October 2015)

- | | |
|-------------------|-------------------------------|
| - Marlee Groening | British Columbia |
| - H el ene Clavet | Quebec |
| - Florence Budden | Newfoundland/ Labrador |
| - Vacant | New Brunswick* |
| - Vacant | Prince Edward Island * |