

### **Board of Directors**

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Amanda Virk (she/her)

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## Leadership Team (as of March 31, 2025)

Marlene Aguilar (she/her)
MANAGER, COUNSELLING SERVICES

Johnell Collins (she/her)

INTERIM MANAGER, HEALTH SERVICES

SYSTEMS AND SUPPORT

Juliet Cummins (she/her)

MANAGER, ACCOUNTING AND OPERATIONS

Muriel Ferrer (she/her)

DIRECTOR OF FINANCE AND OPERATIONS

Andrew Lodge (he/him)

MEDICAL DIRECTOR

Janellyn Marcial (she/her)

DIRECTOR OF DEVELOPMENT AND COMMUNICATIONS

Laurel McLennan (she/her)

DIRECTOR OF HUMAN RESOURCES AND ADMINISTRATION

Kara Neustaedter (she/her)

MANAGER, HUMMINGBIRD

Debra Radi\* (she/her)

INTERIM EXECUTIVE DIRECTOR

Richelle Reddy (she/her)

MANAGER, CRISIS SUPPORT SERVICES

Suzanne Robertson (she/her)

MENTAL HEALTH AND CRISIS SERVICES DIRECTOR

Haran Vijayanathan\* (he/him)

COMMUNITY HEALTH AND WELLNESS DIRECTOR

Privacy Officer\*

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# Message from our Board Chair & Interim Executive Director

On behalf of the Board of Directors, we are honoured to share a message of reflection and gratitude as we look back on another impactful year at Klinic.

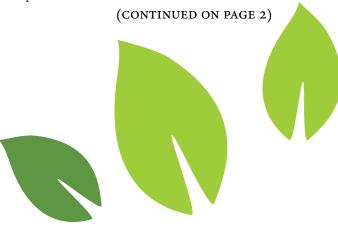
This past year has brought continued challenges, growth, and transformation. Through it all, our incredible Klinic team has remained committed to delivering high-quality, accessible, and inclusive health care. The work of dedicated staff, volunteers, and community partners has been nothing short of inspiring. Whether through clinical services, health promotion, outreach, or advocacy, their compassion and determination have touched countless lives.

This work has been guided by our strategic plan, which has provided purposeful direction for our efforts. Our plan, released in early 2022, is centered around four key priorities:

- Advancing our work in Reconciliation, Decolonization, and anti-oppression.
- Becoming a more diverse and inclusive organization.
- Enhancing the experience of our clients and participants.
- Expanding capacity for programs and services to make them as accessible as possible.

Over the past year, we've made strides toward our goals, driven by a shared vision for equitable, community-centred health care. While there is much to celebrate, we know the work is not done.

As a Board, we are dedicated to inclusive leadership and accountability, ensuring Klinic's services are shaped by the voices of those we serve. Community feedback indicates that clear communication, shorter wait times, comfortable waiting areas, and efficient scheduling can enhance the client experience. We learned this through Klinic's Client Satisfaction Survey, conducted from October 21 to November 1, 2024. This annual survey aims to recognize what we do well, identify where we must improve, and ensure community voices remain at the heart of our work. We've included the survey findings later in this report to promote transparency and reinforce our commitment to continuous learning and improvement.



We understand that health is not experienced in isolation; it is shaped by the relationships we build, the systems we navigate, and the environments in which we live. As we look ahead, we are beginning to reflect on the future of Klinic beyond the life of our current strategic plan, which extends to 2026, and the continued evolution of what Klinic's commitment to standing alongside communities most impacted by

racism, poverty, colonization, and systemic injustice

Together, we are building community health by strengthening relationships, creating safer and welcoming environments, and working to make services more accessible to all.

With appreciation,

**Kathy Majowski, RNBN** (she/her) CHAIR, BOARD OF DIRECTORS

**Deb Radi, PhD** (she/her/elle)
INTERIM EXECUTIVE DIRECTOR

### Vision

looks like in practice.

**Engaged** and healthy communities

## **Mission**

To offer primary health care, mental health care and community health services to enhance individual and community capacity.

### **Values**

Klinic remains rooted in our core value of **social justice for all**, recognizing that there are diverse needs and experiences for people who are most impacted by discrimination and oppression that must be addressed.

We are committed to providing safe, quality, holistic care that is person-centred.

We value relationships – with our colleagues, with our clients and within our communities.

We **value diversity** and promote equity, inclusion and accessibility. We strive to ensure that our organization and our work reflects and honours the communities we serve.

On our path towards Truth and Reconciliation, Klinic will work to **decolonize** systems and practices with cultural humility.

# **Your Support in Action**



27,052

primary care appointments delivered

+ 9,052 above our goal



9,230

individual primary care visits
+673 from last year



5.313

Trans Health program visits
+38 from last year



1,071

Hummingbird visits program launched in 2023



7,543

MWMS visits

+841 from last year



28,906

# of crisis lines calls answered 53% answer rate



3,616

STI Klinic visits

+673 from last year



13,705

mental health counselling sessions delivered

+1981 from last year



1,994

drop-in counselling sessions delivered

+128 from last year



187

public education sessions delivered

+15 from last year



48,050

safer drug use supplies distributed

+3200 from last year



297

Trans Health Peer support provided to clients on the waitlist

+2 from last year



16,158

volunteer hours worked in Crisis and SACP programs

+5696 from last year

# Client Experience Feedback

## Findings from Klinic's Fall 2024 Client Satisfaction Survey

From October 21 to November 1, 2024, Klinic administered a Client Satisfaction Survey to celebrate the service and support we do well, and to hold our organization accountable to the needs and gaps in our practices.

This was our first client survey done post-Covid since 2018. While we hoped to have 370 participants, we were pleased that 71 people took part. To ensure continuous improvement, our goal is to do this survey annually.

Thank you to all our clients who participated in the survey. This critical feedback will help us in our commitment to develop quality, person-centred care. We would also like to thank our social work students, welcome volunteers, and our staff—especially the community hosts and Indigenous cultural support staff who administered the survey with community.



## **Services Received**



Other (please specify): 37% (Coffee/snacks, harm reduction supplies)



Outreach Services & STI Klinic: 11%



**Primary Care: 18%** (Physician/Nurse Practitioner)

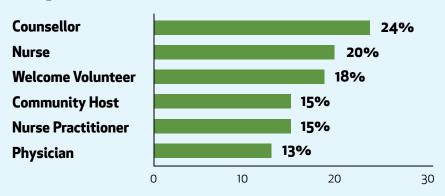


Trauma Counselling: 10%
Drop-In Counselling: 8%

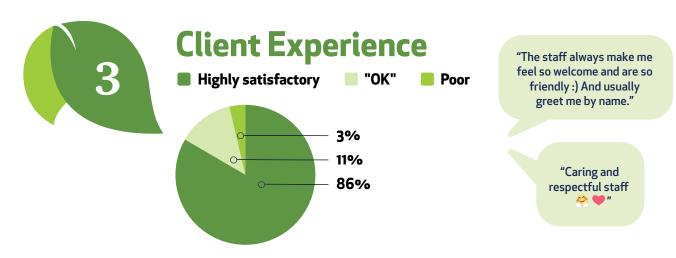
- Top responses highlight a demand for non-clinical and outreach supportive services for immediate needs.
- Primary care & mental health services remain as significant part of Klinic's utilization.

# **Top Provider Interactions**

2



• Top responses highlighted the balance between clinical and non-clinical roles.



 High satisfaction levels (86%) of client experience, with friendly and caring staff, a welcoming atmosphere, and comprehensive care.

# **Client Demographics**

- Education: High School Graduates 45%
- Indigenous Respondents: 33%
- 2SLGBTQIA+ Respondents: 51%
- ✓ Low-Income Households: 37%
- Age: 20-39 47%
- Language: English 80%
- Disabilities: 43%



- The participants' diversity underscores the importance of culturally sensitive & inclusive services.
- Disabilities & low-income households highlight the need for accessible and supportive services. Younger adults & high school literacy may guide allocating resources to meet their needs.



# **Program-Specific Findings**

- Clients valued being heard.
- Medical staff explained treatments clearly.
- Welcoming environment and sense of community were appreciated.
- Personalized care was highly valued.

"They were very friendly and went above and beyond for my child."

"I am happy that I can come and see people volunteers here with smiles and a hello." "How friendly MA was, as well as the reception staff, and how encouraging she was that I am strong and can accomplish my goals."

"My doctor is the kindest and most amazing GP I've ever had. I'm so grateful to her [...] and how holistically she treats me. I feel like a person and not just a patient."

"The counsellor really listened to my needs and put me on a waitlist and provided me with information about extra services." "Wait times: Got here right at 3:30 and it took long to be seen."

## Recommendations



Make waiting areas more comfortable for people who feel anxious or stressed.

Efficient Scheduling:

Organize appointments better to make services run more smoothly.

Clear Communication:

Explain who the different service providers are and what they do. Keep clients updated about any delays in a simple and clear way.

Shorter Wait Times:

Make sure people don't have to wait too long.

\*Source: Klinic Quality Assurance Committee, & Campos, C. (2025, January 28).

Klinic client experience survey. Survey delivered from October 21 to November 1, 2024.

\*Klinic's Crisis Lines were not included as part of this survey.

# **Public Education Report**

Nadia La Rosa, MTIEC Coordinator & Facilitator (she/her)
Erin Phillips, Public Education Trainer (she/her)
Vycki Atallah, Public Education Coordinator, MTIEC Trainer (she/her)



Klinic's Public Ed Team

### **Public Education**

Over the past year, the Public Education program delivered 114 workshops that focused on mental health and wellness, including suicide prevention, crisis counselling skills, self-injury, and self-care and stress-management.

Suicide Prevention, as well as self care and stress management, were our most requested workshops this year. We engaged learners across many sectors including education, justice, health care, allied health, and community organizations. The demand for support and education for suicide prevention is important in destignatizing conversations about suicide in all settings.

# Manitoba Trauma Information and Education Centre (MTIEC)

At the MTIEC, we continue to focus on empowering our learners to incorporate trauma-informed care and vicarious trauma into their practice.

This year, we delivered 85 workshops to learners from a variety of settings including non-profits, healthcare, government, and the legal/criminal justice system.

MTIEC also chairs the Manitoba Trauma Network. The network provides opportunities to meet, collaborate, share knowledge on trauma-informed practices, assist with referrals, and offer each other support.

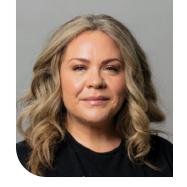
#### **Milestones:**

- Rural communities reached included: Kinosao
   Sipi (Norway House), Pinamootang First Nation,
   Roseau River Anishinabe First Nation, Beausejour,
   Portage La Prairie, and Winkler.
- Indigenous Communities and organizations in Manitoba reached included: Makoon Transition Inc., Island Lake Youth Council, Bison Spirit Leadership (University of Manitoba), Shawenim Abinoojii, Ka Ni Kanichihk, Manitoba First Nations Education Resource Centre, United Church Indigenous Ministry and Justice, National Centre for Truth and Reconciliation (University of Manitoba), Centre for Aboriginal Resources Development, and Indigenous Youth Mentorship Program (University of Manitoba).
- Piloted and delivered an updated 3-hour workshop on self-injury geared for service providers who work with youth. Participants included staff from Toba Centre for Children and Youth, New Directions, Winnipeg Police Services, lawyers, and health practitioners.
- Launched a blog post section on the MTIEC website. These posts are meant to bring awareness to events, resources, and best practices on traumainformed care.

As demand for our well-known services grows, we've expanded group sizes and are booked months in advance. Public Education and MTIEC also refer to other organizations when appropriate. We remain committed to meeting people where they are, reducing barriers, and building awareness, skills, and capacity to support others in both personal and professional settings.

# Counselling and Crisis Services

Suzanne Robertson,
Mental Health and Crisis Services Director (she/her)



Historically—and still today—crisis counselling, therapy, and healing spaces have not always been safe or accessible for every body and every identity. In alignment with Klinic's strategic plan, the Mental Health and Crisis Services departments aim to create safer and inclusive spaces where individuals with varied and intersecting identities can access therapy and counselling.

We have begun this work in several ways, including engaging community members, service providers, staff, and academic spaces to help shape services based on leading practice standards that support both current clients and those who have previously faced barriers to access. Notable barriers to our services included: a) gender binaries with restrictive and definitive inclusion/exclusion criteria, and b) having long waitlists and wait times to access services.

Language change was imperative. Shifting from "men's" and "women's" programming in the EVOLVE program to "people who experience violence and abuse" and "people who use abusive behaviors in their relationships" was extremely powerful in creating a space where people could see themselves and their relationship experiences within our services. We recognize that language can perpetuate harmful patriarchal and colonial stereotypes about gender and heteronormativity. This necessary change ensures trauma-informed care is reflected across our programming. Looking ahead, we continue to work with providers and community members to ensure safer and inclusive content and service delivery.

Entering 2024, Klinic's trauma counselling waitlist had 499 people, with up to a four year wait for service. To better meet the needs, we closed the intake process to develop new assessment tools and shift our service delivery model to increase accessibility and decrease wait time. We are open for intakes again, prioritizing people with limited or no access to counselling.

## **Training**

Klinic's volunteer training and onboarding model is continually updated using feedback and statistics from service users.

Through the Public Health Agency of Canada's Distress Line Equity Fund, we conducted research on how to provide better services on our crisis lines through our *Building 2SLGBTQIA+ and Indigenous Knowledge Foundations* project.

Two very important aspects of this work were the ability to provide honouraria for folks to share their stories, and the collaboration with organizations to facilitate these crucial conversations. There was an overwhelming interest from the public to participate, which speaks volumes on how critical this work is.

Klinic also certified three Eye Movement Desensitization and Reprocessing (EMDR) counsellors, began consultation training, and is training five more counsellors, aiming to offer free community access to EMDR therapy.

## **Collaboration**

Klinic remains active in partnerships across the gender-based violence sector, academia, and mental health services. Members of our team also hold advisory roles within the mental health and crisis sector. Advocacy and development of safer practices and services is at the heart of our collaborations. I am incredibly proud of our team's work.

#### **PROGRAM HIGHLIGHT**

# Hummingbird

In early 2023, the Manitoba government made a commitment to support those impacted by sexual assault and intimate partner violence. The result was the creation of community-based programming to complement the existing Sexual Assault Examiner (SANE) program at Health Sciences Centre (HSC), giving people a choice on where to access care.

This enhanced response focused on expanding Klinic and Ka Ni Kanichihk's existing sexual violence programming to include medical care from Forensic Nurse Examiners. At Klinic, the program began to take shape under the name Sexual Assault Crisis Response and Healing Program. We collaborated with many stakeholders in healthcare, government, and legal sytems to ensure we could create clear pathways to access our services. During Sexual Assault Awareness month in April 2024, Elder Billie Schibler gifted the program name *Hummingbird*, sharing that hummingbirds represent resilience and healing.

Together with Ka Ni Kanichihk's Walking with our Relatives program, we continue to develop our relationship with one another so clients and relatives can choose the best possible care for their own healing needs.

From the earliest stages in program development, Klinic sought feedback from individuals with lived experience of gender-based violence to see our space, hear our ideas, and provide feedback. Initially named our Survivor Council, this group claimed for themselves the name *Ogijiita Council*, meaning warrior spirit. Led by a Knowledge Keeper and Klinic staff, Ogijiita members guide all facets of Hummingbird's program development. They are also invited to participate in training sessions, Klinicled development days, and cultural activities such as ribbon skirt making, drumming group, and most recently, a rattle-making workshop.



**Hummingbird Team** 

I am incredibly proud of this team's work and look forward to the creative ways we will connect with our community in 2025.

Today, Hummingbird is a wraparound program staffed with Forensic Nurse Examiners, a medical director, a systems navigator, counsellors, and advocates. We are fortunate to also have a growing team of volunteer advocates who provide a depth of coverage we simply could not fulfill without them.

As the response to receive care continues to rise, we commit to provide increased accessibility, safety, and timely support to anyone who needs it.

## **Hummingbird Highlights**

- **804** clients were seen by our Forensic Nurse Examiners
- 179 people were supported during medical appointments or during police statements by an advocate
- 1071 Hummingbird visits
  - 24 Third Party Reports were completed
    - 4 Protection Orders were applied for and granted



# **Health Services Report**

Haran Vijayanathan, Community Health and Wellness Director (he/him) Andrew Lodge, Medical Director (he/him)





This was our first full year in our new space on Sherbrook Street without the challenges of the pandemic, and it gave us a chance to reflect, learn, and grow.

With Klinic's strategic plan in mind, we've begun to adapt our services to better meet the needs of our community, with a focus on connecting individuals to care. This work has allowed us to reflect on our systems, strengthen partnerships, and identify barriers to access and care, both at Klinic and through external service providers.

Our Mobile Withdrawal Management Services (MWMS) continues to be an award-winning and internationally recognized program. Last year, the program received the Collaborative Mental Health Care Award from the College of Family Physicians of Canada/Canadian Psychological Association. Chantelle Partyka, nurse, and Becky Lambert, peer with the program, received the award on behalf of Klinic. The team also had the opportunity to present at an international conference in Portugal.

The **Trans Health Klinic** remains an ever-evolving program, driven by significant legislative changes that recognize gender-affirming care as basic health care.

This news brings a great deal of work to ensure providers and community members are up to date on the latest service provisions for care. As Manitoba's provider for gender-affirming care, our team has started to offer educational sessions tailored for healthcare providers looking to expand their scope of practice, and for community members who want to learn more about their own transition journey.

Over the past year, the team has made significant strides to create a more efficient system, successfully reducing wait times for intake, from one year down to nine months. While there is still work to be done to improve access to the full range of care needs, a strong foundation has been established to support ongoing progress and system improvements.

Klinic is now the only community health centre in Winnipeg with a dedicated drop-in STBBI (STI Klinic) program. Demand remains high thanks to our judgement-free care, however with limited funding and staffing we must turn people away. Despite this, our team is committed to improving services to reach more individuals.



We are proud to offer a **Primary Care** program that supports community members who cannot access fee-for-service health care. Our waitlist remains under 10 individuals, with an average wait time of less than three months. The team-based model allows for increasing numbers of clients to be seen through a comprehensive, holistic approach directed at individuals in our community with complex needs.

Klinic maintains relationships with The University of Winnipeg, Tec Voc, Neecheewam and New Directions ensuring convenient access to community-based care. Further strengthening our community-based care model, we established new partnerships with Oshki-Giizhig, Life's Journey, and RaY. These partnerships allow us to connect more individuals with primary care services.

We are so grateful to have such a dedicated team—from our Agency Assistants, Community Hosts, and Indigenous Cultural Support Worker who warmly welcome people as they arrive, to our Floor Medical Assistants and Medical Assistants who guide them to the right spaces, and our practitioners and lab staff who provide high-quality care to everyone who walks through our doors.

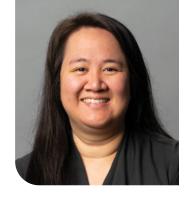


Some of the MWMS team with award



# **Fundraising Report**

Janellyn Marcial, Director of Development and Communications (she/her)



We're in the final stretch of Klinic's 2022/26 strategic plan, and as I reflect on our strategic directions and priorities, I think about the ongoing partnerships we've built and what that means for our organization.

Since 2022, Belinda Bigold—owner of Winnipeg's High Tea Bakery—has called on other bakeries and small businesses to support us during Trans Day of Visibility (TDOV), where 100% of the proceeds come

> to us. This year, High Tea Bakery and Black Market Provisions baked up some delicious treats, and raised a record \$5043.20 for our Trans Health Klinic!

> We've also built strong community partnerships with organizations like Modo Yoga, who support us TDOV, and Little Brown Jug, who hosts an annual Punk Prom featuring live punk music and drag performances.

through their Karma classes during

Ongoing allyship and financial support from initiatives like these make it possible for us to continue strengthening our services—whether it's assisting

with ID changes, providing gender-affirming items like binders, or meeting other essential needs in our community.

In addition to financial contributions, gifts in kind have played a meaningful role in supporting our organization. Thanks to a generous donation of over 60 cell phones from Broadstreet Properties, our clients were able to access and stay connected to health care and social services appointments. We also received support from Assiniboine Park Zoo, the Winnipeg Symphony Orchestra, and The Royal Manitoba Theatre Centre who provided our clients with opportunities to experience

Winnipeg's tourism and arts scene. Removing financial barriers for clients through in-kind donations allows us to stretch our dollar further while building stronger connections with the people we serve.

As we look to the future, our team is looking at ways to do Community-Centric Fundraising, a fundraising model that is grounded in equity and social justice. We recognize that both the health care system in which we operate, and traditional models of fundraising are rooted in colonial structures. So, what does this mean for fundraising through the lens of reconciliation and decolonization?

True transformation in this space begins with reimagining our role—recognizing how Klinic can contribute meaningfully within a broader ecosystem to build engaged, healthy, and resilient communities. This means looking beyond transactional giving and building relationships based on reciprocity, trust, and care.

Our donors and funder are more than just supporters—you are advocates, co-creators of change, and partners with us in this work. Thank you for helping us create a foundation for lasting change.



Haran accepts a generous donation from Belinda Bigold of High Tea Bakery



# **Volunteer Services Report**

Curt Sparkes, Coordinator Volunteer Recruitment and Training, Community Health and Education (he/him)



The Volunteer Program at Klinic saw growth in many new and exciting ways over the past year, and volunteers have continued to bring their kindness, dedication, and talents to enrich our programming.

The **Crisis Program** piloted a new condensed training opportunity to decrease barriers for volunteer applicants with sufficient skills in counselling and suicide assessment. This option reduces the training time commitment from 85 to 30 hours. Two condensed groups over the past year trained ten volunteers who may not have otherwise been able to participate. Five regular Crisis Training groups trained 71 new volunteers, and ten Crisis volunteers grew into shift supervisor roles which continues to help build our capacity in the Crisis Room.

Our **Sexual Assault Crisis Program** (SACP) volunteer training content was updated based on community feedback to reflect anti-oppressive and anti-racist practices, and we put that training into practice with two of our most recent training groups. SACP volunteer opportunities that have only been offered to female-identifying applicants has expanded based on community feedback to now welcome applicants of all genders.

**9-8-8 Suicide Crisis Helpline** has continued to build both the momentum and size of their volunteer pool. These volunteers work entirely remotely which allows them to participate from sites beyond the Winnipeg perimeter. Our remote responders now include volunteers from Lorette, Anola, and St. Adolphe, with more training groups scheduled this year.

Our **Welcome Volunteer** program continued to run at near-full capacity, providing the first point of contact for many visitors to the Klinic office. We are proud to watch these volunteers continue to learn and grow in their ability to balance the evolving needs of community members, clients, and staff.

The past year has brought new growth in many exciting areas of the Volunteer Program and continued to plant seeds for future growth. Volunteers are an exciting inspiration for doing this critical and rewarding work.





## **Financials**

Klinic ended the fiscal year with a modest surplus of \$36,766 and total revenues of \$19.3 million. This positive outcome reflects our ongoing commitment to strong financial stewardship, including improved efficiency in receivables collection, which helped

stabilize operations. As we look ahead, Klinic remains focused on building collaborative relationships with our primary funders to develop sustainable agreements that reduce funding shortfalls and align more closely with our program goals and mission.



# \$37K SURPLUS



#### Where the funding is from:

WRHA: 79.8%
Province of MB: 10.5%
Federal Government: 1.4%
Other: 8.4%

#### Where our funding goes:

Mental Health & Crisis Support: 45.6%

Health Services: 39.4% Administration: 15.0%

#### Total raised from donations

Does not include donations that qualify as deferred revenue



# Thank you

to all incredible volunteers, staff, and healthcare professionals. Your dedication, care, and efforts make an impact every day. We're truly grateful for the work you do.



To the Members of Klinic, Inc. o/a Klinic Community Health:

#### **Opinion**

We have audited the financial statements of Klinic, Inc. o/a Klinic Community Health (the "Organization"), which comprise the statement of financial position as at March 31, 2025, and the statements of operations, changes in net assets and cash flows for the year then ended, and notes to the financial statements, including a summary of significant accounting policies.

In our opinion, the accompanying financial statements present fairly, in all material respects, the financial position of the Organization as at March 31, 2025, and the results of its operations and its cash flows for the year then ended in accordance with Canadian accounting standards for not-for-profit organizations.

#### **Basis for Opinion**

We conducted our audit in accordance with Canadian generally accepted auditing standards. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are independent of the Organization in accordance with the ethical requirements that are relevant to our audit of the financial statements in Canada, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

#### Other Information

Management is responsible for the other information. The other information comprises the annual report but does not include the financial statements and our auditor's report thereon. The annual report is expected to be made available to us after the date of this auditor's report.

Our opinion on the financial statements does not cover the other information and we will not express any form of assurance conclusion thereon.

In connection with our audit of the financial statements, our responsibility is to read the other information identified above when it becomes available and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the audit or otherwise appears to be materially misstated.

When we read the annual report, if we conclude that there is a material misstatement therein, we are required to communicate the matter to those charged with governance.

#### Responsibilities of Management and Those Charged with Governance for the Financial Statements

Management is responsible for the preparation and fair presentation of the 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.

In preparing the financial statements, management is responsible for assessing the Organization's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless management either intends to liquidate the Organization or to cease operations, or has no realistic alternative but to do so.

Those charged with governance are responsible for overseeing the Organization's financial reporting process.

#### MNP LLP

True North Square 242 Hargrave Street, Suite 1200, Winnipeg MB, R3C 0T8

1.877.500.0795 T: 204.775.4531 F: 204.783.8329





MNP.ca

#### Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with Canadian generally accepted auditing standards will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

As part of an audit in accordance with Canadian generally accepted auditing standards, we exercise professional judgment and maintain professional skepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud
  or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is
  sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material
  misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve
  collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to the audit 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 Organization's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by management.
- Conclude on the appropriateness of management's use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the Organization's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the Organization to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the financial statements, including the
  disclosures, and whether the financial statements represent the underlying transactions and events in a
  manner that achieves fair presentation.

We communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

Winnipeg, Manitoba

June 4, 2025

MWP LLP
Chartered Professional Accountants



## Klinic, Inc. o/a Klinic Community Health Statement of Operations For the year ended March 31, 2025

	Operating Fund	Capital Asset Fund	Donation Fund	2025	2024
Revenues					
Grants					
Winnipeg Regional Health Authority	15,328,547	51,538	-	15,380,085	13,888,872
Province of Manitoba	2,028,154	-	-	2,028,154	1,136,036
Centre for Addiction and Mental Health	572,271	-	-	572,271	232,114
Government of Canada	264,422	-	-	264,422	_
University of Winnipeg	199,470	-	-	199,470	170,725
Addictions Foundation of Manitoba	90,650	-	-	90,650	126,044
Workers Compensation Board	69,365	-	-	69,365	65,000
Shared Health	-	-	-	-	1,047,890
Winnipeg Foundation	-	-	-	-	9,617
United Way	-	-	-	-	3,750
University of Manitoba	-	-	-	-	19,266
Other	198,738	-	-	198,738	1,275,781
Rent	· -	176,650	-	176,650	81,655
Amortization of deferred revenues (Note 8)	-	132,570	-	132,570	381,247
Donations	16,946	•	67,696	84,642	72,593
Workshops	52,698	-	•	52,698	45,576
Interest	33,938	-	55	33,993	26,690
	18,855,199	360,758	67,751	19,283,708	18,582,856
Expenses Amortization Bad debts Benefits and payroll tax (Note 11) Insurance Medical remuneration Medical supplies Membership and license fees Mortgage interest Office supplies Other Professional fees Repairs and maintenance Salaries Travel and transportation Utilities and property taxes Volunteer services	50,073 124,578 2,779,302 20,379 1,805,570 164,643 271,760 - 246,789 358,106 114,627 512,778 11,830,482 67,479 118,881 4,557	608,101 - - 1,236 - - - 101,242 - - - - - - - - - -	- - - - - - 1,918 - 605 - - - - 2,523	658,174 124,578 2,779,302 21,615 1,805,570 164,643 271,760 101,242 246,789 360,024 114,627 513,383 11,830,482 67,479 118,881 4,557	570,096 186,521 2,525,861 27,963 1,676,422 180,031 95,345 116,211 240,933 438,830 116,188 553,108 11,690,134 50,891 113,417 5,446
Excess (deficiency) of revenue over expenses pefore pre-retirement leave	385,195	(349,821)	65,228	100,602	(4,54
Pre-retirement leave (Note 10)	(63,836)	-	-	(63,836)	10,208
Excess (deficiency) of revenue over expenses	321,359	(349,821)	65,228	36,766	5,667

Please note: full audited financial statements are available upon request by contacting Klinic at 204-784-4090, emailing klinic@klinic.mb.ca or by visiting klinic.mb.ca.



The accompanying notes are an integral part of these financial statements





167 Sherbrook Street Winnipeg, MB R3C 2B7 204-784-4090 klinic@klinic.mb.ca

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