

## Finance Committee Meeting Minutes

### Zoom Meeting – Friday, Nov. 10, 2023 – 9:00 am

**Present:** Judy McLean, Jackie Gardner-Nix, Donna Moulton, Angela Grogan, Trish Baird, Tina Stephens, Adam Kolisnyk (CFO-CMH), Jordyn Boivin (Analyst, CMH), Meaghan Spencer (Finance Manager, CMH)

**Regrets:** Stephen Beauchamp, Tim Miller

Topic	Discussion	Decision/Action
<b>1. Quorum &amp; Approval of Agenda</b>	The meeting was called to order by Judy McLean and a quorum was present.	Motion by: Jackie Gardner-Nix to approve the agenda. Seconded: Angela Grogan Carried.
<b>2. Approval of Minutes</b>	2.1 Approval of previous minutes – Sept. 15, 2023	Motion by: Donna Moulton to approve the previous minutes. Seconded: Jackie Gardner-Nix Carried.
<b>3. Financial Statements</b>	<p>3.1 CCN Q Financial Results Jordyn presented the Committee with Q2 financial results. CCN is in a positive financial position overall at the end of Q2. Additional one-time funding totaling \$84,670 was received along with extra funding for the hospice beds at \$283,000. The Committee would like to see an addition added to the Notes section to indicate the balance of the deferred revenue account. This will be important when the Committee is discussing when to put in a request for funds to the Foundation.</p> <p>Another suggestion was adding 2 separate revenue lines showing investment income and the other showing interest earned from CIBC high interest account on the Statement of Operations.</p> <p>3.2 Internal Controls – Q2 2023/2024 Jordyn Boivin circulated the Q1 internal controls which have been signed by Trish and Adam Kolisnyk.</p>	<p>Motion by: Jackie Gardner-Nix to accept the Q2 Financial results as presented. Seconded by: Donna Moulton. Carried.</p> <p>For Information Purposes</p>
<b>4. Work Plan Items</b>	4.1 MSAA Refresh (Multi-Service Accountability Agreement) Trish informed the Committee that Ontario Health is going to extend the agreements for 2024/2025.	For Information Purposes

	<p>Trish indicated that although no budgets will be submitted to Ontario Health, CCN will create their own budget for 2024/2025.</p> <p>4.2 CCN/CMH Management Agreement Discussion The agreement between CCN and CMH (Campbellford Memorial Hospital) will expire in March of 2024. Conversation took place as to how the Committee wishes to move forward. Trish &amp; Adam have been working to stabilize and improve many of the reporting requirements over the last six months.</p>	<p>For the next Committee meeting a report will be prepared outlining the following:</p> <ol style="list-style-type: none"> <li>1. Information on 'best practice' in similar agencies of % of budget allocated for costs for financial reporting and accounting to total budget.</li> <li>2. Brief review of current contract and outcomes.</li> </ol>
<b>5. Policy Review</b>	<p>5. Policy Review The Committee reviewed the below mentioned policies and made the following recommendations: F-50 Designated Donations – No changes to this policy. F-60 Donation Receipts – No changes to this policy. F-125 Lottery Activities – No changes other than adding a sentence to the end that this policy should be shared with the Board and staff on a yearly basis. F-190 Use of Agency Property – No changes to this policy. F-70 Donor Recognition – Brand new policy created. This policy will be brought to the next board meeting outside the consent agenda.</p>	<p>Motion by: Donna Moulton to accept the new policy F-70 Donor Recognition and recommend being brought to the Board for approval. Seconded: Jackie Gardner-Nix Carried.</p>
<b>6. Terminate</b>		Motion by Donna to terminate.

**Next Meeting: Friday, January 12, 2024 – 9:00 am - Zoom**



**CommunityCare**  
NORTHUMBERLAND

## **Finance Committee Meeting**

**Friday, November 10, 2023 – 9:00 am**

### **MEETING AGENDA**

<https://us02web.zoom.us/j/89503047731>

Meeting ID: 895 0304 7731

Passcode: 791233

<b>Welcome &amp; Introductions - Trish</b>	<b>Speaker:</b>	<b>Document:</b>
1. Quorum & Approval of Agenda	Judy	Verbal
2. Approval of Previous Minutes – Sept. 15, 2023	Judy	Attached
3. Financial Statements		
3.1 – CCN Q2 Financial Results	Jordyn	Attached
3.2 – Internal Controls – Q2 2023-2024	Jordyn	Attached
4. Work Plan Items		
4.1 – MSAA Refresh (Multi-Service Accountability Agreement)	Trish	Verbal
4.2 – CCN/CMH Management Agreement Discussion	Trish	Attached
5. Policy Review		
F-50 Designated Donations, F-60 Donation Receipts	Judy	Attached
F-70 Donor Recognition, F-125 Lottery Activities		
F-190 Use of Agency Property		
6. Termination		

**Next Regular Meeting – Friday, January 12, 2024 – 9:00 am**

## Finance Committee Meeting Minutes Zoom Meeting – Friday, Sept. 15, 2023 – 9:00 am

**Present:** Judy McLean, Jackie Gardner-Nix, Tim Miller, Stephen Beauchamp, Donna Moulton, Angela Grogan, Trish Baird, Tina Stephens, Adam Kolisnyk (CFO-CMH), Jordyn Boivin (Analyst, CMH), Meaghan Spencer (Finance Manager, CMH)

Regrets:

Topic	Discussion	Decision/Action
<b>1. Quorum &amp; Approval of Agenda</b>	The meeting was called to order by Judy McLean and a quorum was present.	Motion by: Jackie Gardner-Nix to approve the agenda. Seconded: Donna Moulton Carried
<b>2. Approval of Minutes</b>	2.1 Approval of previous minutes – June 19, 2023	Motion by: Tim Miller to approve the previous minutes. Seconded: Stephen Beauchamp Carried.
<b>3. Financial Statements</b>	<p>3.1 CCN Q1 Financial Results            Jordyn presented the Q1 Financial results. The financials are trending in a positive manner for Q1. When reviewing the Cashflow Forecast, CMH Finance staff recommended pulling out up to \$200,000 from the CIBC High Interest account to and transferring it to the operating account. This will ensure there are ample funds to cover the day-to-day operations because in Oct. they are forecasting a decrease in funds until the end of year when donations tend to increase. The Committee felt comfortable with this recommendation and suggested that the funds being returned when the operating account forecast reaches \$500,000.</p> <p>3.2 Internal Controls – Q1 2023/2024            Jordyn Boivin circulated the Q1 internal controls which have been signed by Trish and Adam Kolisnyk.</p>	<p>Motion by: Tim Miller to accept the Q1 Financial results as presented.            Seconded by: Donna Moulton.            Carried.</p> <p>Motion by: Tim Miller to transfer up to \$200,000 from the CIBC High Interest Savings Account into the RBC operating account with the intention of returning all or a portion of the funds when the operating account forecast reaches \$500,00.00            Seonded: Donna Mouton            Carried.</p>
<b>4. MSA 2023/2024</b>	<p>4. MSA 2023/2024 Updates            Trish presented a report outlining additions and changes received from our funders for the fiscal year 2023/2024.</p>	

	Highlights included the increase of \$283,800 for the current 6 hospice beds.	
<b>5. 2023/2024 Workplan</b>	<p>5. Review of Work Plan for 2023/2024</p> <p>The additions to the Work plan are as follows:</p> <ol style="list-style-type: none"> <li>1. Adding the policies that correspond to Work plan items for review at the same time: <ol style="list-style-type: none"> <li>1.3 Fee Schedule – (Policy – F-80)</li> <li>3.1 Inventory of Investments – (Policy – F120)</li> <li>4.2 Insurance Review – (Policy – F-110)</li> </ol> </li> <li>2. Item 6.5 (CCN/CMH Agreement Review) will be put on the workplan for November for further discussion.</li> <li>3. Item 3 – Donations, Bequests &amp; Investments – Review &amp; Submission of funding request to the Foundation added to January.</li> </ol> <p>5.1 Review of Committee Terms of Reference</p> <p>The only addition on the Terms of Reference is adding the word “Ed’s House Foundation” to the end of the sentence under “Donations &amp; Bequests”.</p>	<p>Trish will schedule a Finance Committee orientation for Angela, our newest Board member. Other Committee members are welcome to join as a refresher. This will be organized after the 3<sup>rd</sup> week of October.</p> <p>Tina will send out an updated Work Plan to the Committee members once it is updated.</p>
<b>6. Policy Review</b>	<p>6. Policy Review Timeline Discussion</p> <p>A financial policy summary document was presented. It shows the current review status of CCN financial policies that Tina keeps updated. There are currently 6 policies that have not been reviewed in the last 3 years. Trish and Tina will review and make recommendations regarding any changes and then send out to the Committee for suggestions. These policies will be brought back for the November meeting for further discussion.</p>	Tina will email out the policies in Word version with highlighted suggestions for the Committee to review and make further suggested changes.
<b>7. In Camera Session</b>	The Committee moved into Camera.	<p>Motion by: Jackie Gardner-Nix to move into Camera. Seconded: Donna Moulton Carried.</p> <p>Motion by: Tim Miller to move out of Camera. Seconded: Angela Grogan Carried</p>
<b>6. Terminate</b>		Motion by Stephen Beauchamp to terminate.

**Next Meeting: Friday, November 10, 2024 – 9:00 am - Zoom**



**Community Care**  
NORTHUMBERLAND

Q2 Financial Report

For the period ending September 30, 2023

# Statement of Financial Position

April 1, 2023 to September 30, 2023

COMMUNITY CARE NORTHUMBERLAND

Consolidated Agency

Statement of Financial Position

For the Six Months Ending September 30, 2023

	September 30, 2023	June 30, 2023
<b>CURRENT ASSETS</b>	<b>\$</b>	<b>\$</b>
Cash and bank	1,839,819	1,909,516
Accounts receivable	645,400	604,948
Prepaid Expenses	51,606	21,823
Investments	106,013	90,496
<b>Total Current Assets</b>	<b>2,642,838</b>	<b>2,626,783</b>
<b>Property, Plant &amp; Equip</b>		
Land	236,188	236,188
Equipment	263,777	273,308
Leasehold Improvements	4,980	5,571
Building	6,460,895	6,556,376
Vehicle	96,416	107,291
<b>Total Property, Plant &amp; Equip</b>	<b>7,062,257</b>	<b>7,178,735</b>
<b>Total Assets</b>	<b>9,705,094</b>	<b>9,805,518</b>
<b>LIABILITIES</b>		
<b>Current Liabilities</b>		
Accounts payable and accrued liabilities	417,302	497,288
Emp Remittances	148,465	-907
Deferred grant revenue	819,347	808,929
<b>Total Current Liabilities</b>	<b>1,385,113</b>	<b>1,305,310</b>
Deferred Contributions	7,062,258	7,178,736
Long Term Liability		
<b>Total LT Liabilities</b>	<b>7,062,258</b>	<b>7,178,736</b>
<b>Fund Balances</b>		
Net Assets	1,257,723	1,321,471
<b>Total Liabilities &amp; Fund Balances</b>	<b>9,705,094</b>	<b>9,805,518</b>

*Community Care Northumberland*  
*Consolidated Agency*  
**Statement of Operations**  
For the Six Months Ending September 30, 2023

# Statement of Operations

April 1, 2023 to September 30, 2023

Community Care Northumberland	CURRENT September	YTD Actual	YTD Budget	YTD Variance	YTD Variance %	PY YTD Actual	Annual Budget
Funding- LHIN	223,093	1,349,947	1,295,793	54,154	4.2%	1,283,130	2,591,587
Funding- LHIN - One time	19,022	302,822	0	302,822		98,302	0
Client fee recoveries	51,898	411,282	450,017	-38,735	-8.6%	370,352	900,034
Fundraising	333	39,371	116,252	-76,881	-66.1%	194,162	232,503
Donations	86,928	366,433	721,145	-354,712	-49.2%	497,985	1,442,291
Grants	32,665	284,741	149,670	135,071	90.2%	199,465	299,340
Interest income/loss	13,169	73,654	9,000	64,654	718.4%	17,517	18,000
Amortization of Capital Contributio	38,826	232,957	208,348	24,609	11.8%	217,552	416,696
Other revenue	0	8,713	0	8,713		9,711	0
<b>Total Revenue</b>	<b>465,934</b>	<b>3,069,920</b>	<b>2,950,225</b>	<b>119,695</b>		<b>2,888,176</b>	<b>5,900,451</b>
<b>Operating Expenses</b>							
Salaries, Wages	257,467	1,631,490	1,619,413	12,077	0.7%	1,614,972	3,238,827
Benefits	41,185	272,564	265,016	7,548	2.8%	259,945	530,031
Medical Staffing	5,288	31,018	35,900	-4,882	-13.6%	30,808	71,800
Supplies	42,450	262,158	268,623	-6,465	-2.4%	237,133	537,245
General Sundry	18,903	135,463	124,213	11,250	9.1%	115,866	248,426
Travel - Staff & Service Delivery	34,666	177,327	169,311	8,016	4.7%	173,578	338,622
Professional fees	13,742	99,808	94,287	5,521	5.9%	92,271	188,575
Volunteer Recognition	718	7,024	4,875	2,149	44.1%	7,286	9,750
Fundraising	820	24,474	10,750	13,724	127.7%	51,989	21,500
Equipment Maintenance/Purchase	1,494	59,700	32,617	27,083	83.0%	50,840	65,233
Amortization of Capital Assets	38,826	232,957	206,883	26,074	12.6%	217,552	413,766
Contracted Out Services	7,627	47,380	33,063	14,317	43.3%	62,477	66,126
Occupancy - Rent/Lease/Taxes	14,787	87,296	85,275	2,021	2.4%	87,983	170,550
<b>Total Expenses</b>	<b>477,973</b>	<b>3,068,659</b>	<b>2,950,226</b>	<b>118,433</b>		<b>3,002,700</b>	<b>5,900,451</b>
<b>Surplus or Deficit before Transfers</b>	<b>-12,039</b>	<b>1,261</b>	<b>-1</b>	<b>1,262</b>		<b>-114,524</b>	<b>0</b>



# Notes Regarding the Statement of Operations

## Revenue

**Ontario Health Funding** - One-Time funding for \$47,300 per hospice bed equaling a total of \$283,000 was received as a lump sum on August 11<sup>th</sup>. Additional One-time funding for a total of \$84,670 (\$25,000 for Meal Services, 3% increase for CSS totaling \$53,682, and 3% increase for PALC totaling \$5,988) was confirmed and \$19,022 was received on September 1<sup>st</sup>. As well as there was a surplus recovery of \$13,550 for CSS which also occurred on the 1<sup>st</sup> of September.

**Client Fees**- Consistently averaging higher this QTR than last year's average but still under budget.

**Other Revenue** - Combination of revenue for CCN assistance to CMH Payroll and reimbursement for additional Audit Fees

## Expenses

**Salaries & benefits** - Second quarter salaries are slightly more than last year due to an increase mainly in the Hospice Services area, more specifically Eds House, and summer student expenses. This increase across all programs was budgeted for and is a combination of overtime and timing.

**Sundry** - More than budgeted due to training costs in the Volunteer Peer Support Program early in the year, higher costs in insurance and some IT processing costs.

**Travel** - Travel costs are higher because of more volunteer and staff travel as we come out of COVID.

**Volunteer Recognition** - More than budgeted for due to the Volunteer Appreciation Event held in July.

**Equipment Maintenance/Purchase** - More than budgeted for due to significant van repairs specifically in July.

**Contracted Out Services** - More than budgeted for due to an increase in fitness classes and hired transportation.

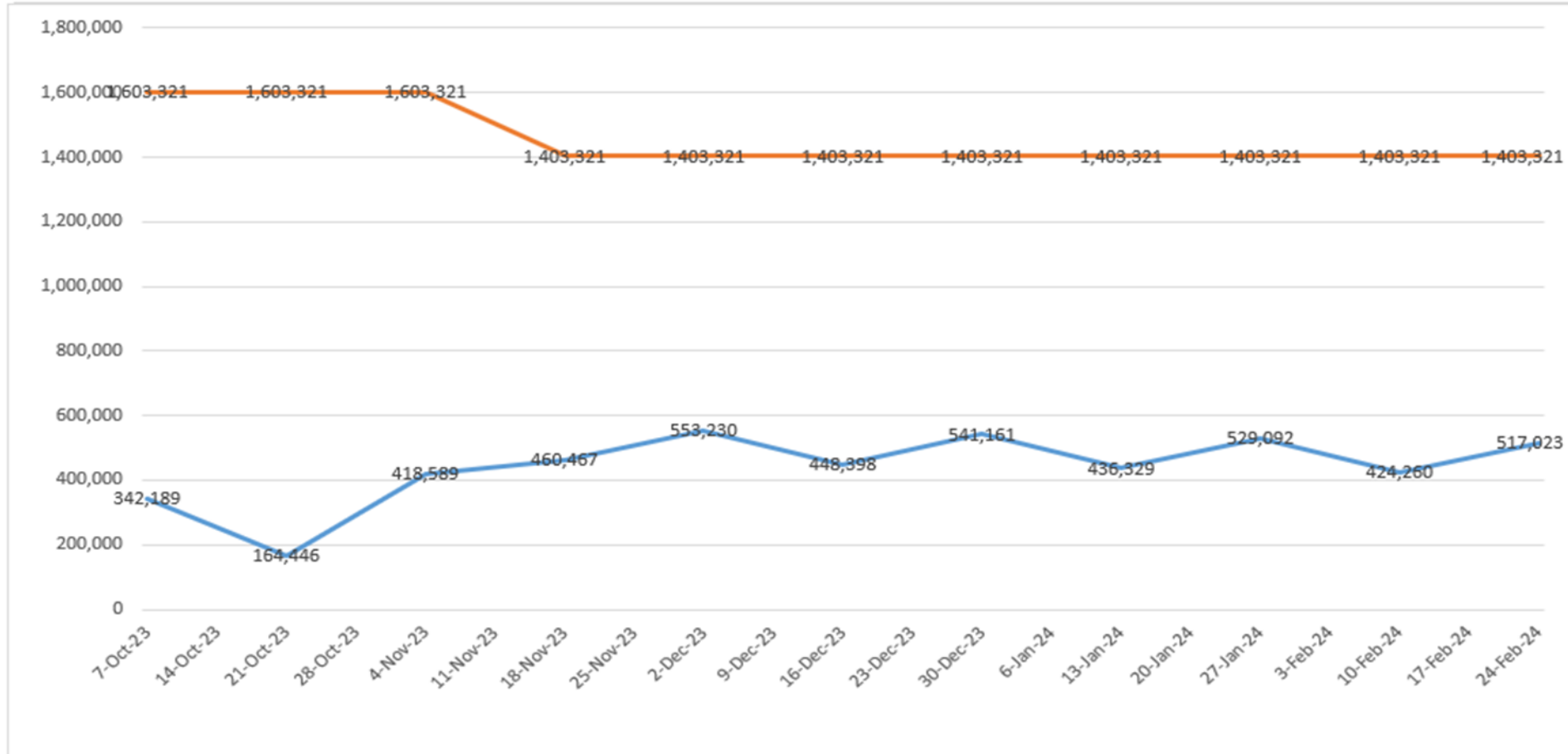
**COMMUNITY CARE NORTHUMBERLAND**

**Hospice Services**

For the Six Months Ending September 30, 2023

	PCCT	Hospice	Ed's House	TOTAL
<b>Hospice Services</b>				
Funding- LHIN	\$177,663	\$100,123	\$369,440	\$647,226
Funding- LHIN - One time			283,800	283,800
Fundraising			227	227
Donations	44,278	29,923	163,142	237,343
Interest income/loss			32,768	32,768
Amortization of Capital Contribution			207,267	207,267
<b>Total Revenue</b>	<b>221,941</b>	<b>130,046</b>	<b>1,056,644</b>	<b>1,408,631</b>
<b>Operating Expenses</b>				
Salaries, Wages	142,027	93,497	592,458	827,982
Benefits	24,107	17,505	82,108	123,720
Medical Staffing			31,018	31,018
Management fee transfers	37,260	11,982	51,593	100,835
Supplies	1,386	932	49,659	51,977
General Sundry	7,922	2,522	26,762	37,206
Travel - Staff & Service Delivery	3,755	240	1,833	5,828
Professional fees			832	832
Volunteer Recognition	990			990
Fundraising			7,389	7,389
Equipment Maintenance/Purchase			346	346
Amortization of Capital Assets			207,267	207,267
Occupancy - Rent/Lease/Taxes	4,491	3,368	5,462	13,321
<b>Total Expenses</b>	<b>221,938</b>	<b>130,046</b>	<b>1,056,727</b>	<b>1,408,711</b>
<b>Surplus or Deficit before Transfers</b>	<b>3</b>		<b>(83)</b>	<b>(80)</b>

# Cashflow Forecast



Orange Line is CIBC High Interest Savings Account

Blue line is RBC Operating Account

**Forcasted Amounts Included:**

- \*LHIN monthly funding for all programs
- \*Salaries and Benefits average spend based on actuals
- \*HST Rebate (November)
- \*\$200,000 Transfer from CIBC Account to Operating Account (November)
- \*Other amounts included are: average weekly deposits and Cheque run/EFT amounts



### Performance Key

	Performance Meets or Exceeds
	Performance Below Standard

### PERFORMANCE INDICATORS 2023-2024 Q2

#### Year to Date

SERVICE ACTIVITY	2023/2024 Target	Q2 2022-2023	Q2 2023-2024	Budget to Date	Variance	Comments
Home Help/Home Maintenance - # of Matches	470	356	408	235	173	Home Help and Maintenance matches continue to rise, exceeding target. Matches have risen because of an increase demand for service. We have been able to recruit additional workers to try to keep with this demand.
Home Help/Home Maintenance- Individuals	395	327	363	198	166	Home help and Maintenance individuals served continues to rise, exceeding target. Additional workers have been recruited to try and keep up as referrals don't seem to be slowing down.
Home at Last/Home First Hospital Referrals - Visits	540	371	318	270	48	Home at Last and Home First referrals remain steady from NHH & CMH.
Home at Last/Home First Hospital Referrals - Individuals	440	301	272	220	52	Home at Last and Home First referrals remain steady from NHH & CMH.
Meals Delivery - Meals Delivered	39,000	19,633	18,344	19,500	-1,156	Due to the price increase as of April 1, 2023 we have seen a decrease in HMOW & FMOW orders. Currently we have funding available to help some clients with subsidies and we are currently providing subsidies to 16 clients. The Nutrition team has been working on and will continue to work on promotional activities to increase meals to meet ministry targets.
Meals Delivery - Individuals	590	432	425	295	130	We are still meeting ministry targets for individuals served but slightly down from this time last year and this is attributed to the recent price increase.
Social and Congregate Dining/Exercise & Falls - Attendance Days	15,000	4,795	9,029	7,500	1,529	Community Diners have now increased and are happening throughout the county. Wellness workshops continue to increase in both numbers and events. Extra Exercise & Fall Prevention classes were happening since we had a full time summer fitness instructor.
Social and Congregate Dining/Exercise & Falls - Individuals	1,500	628	1,079	750	329	With Diners happening throughout the county, we are reaching some clients again. As we add more workshops & classes, especially Aqua Fit in the summer months, we are reaching more clients. Full time fitness instructor increased our numbers.
Transportation - Visits	35,000	15,502	19,190	17,500	1,690	Transportation visits have had a vast increase as many programs are up and running. We have worked very closely with several rural programs to get clients to sessions. We have been fortunate to have several new volunteers join our service which has allowed us to accept more rides for clients.
Transportation - Individuals	2,500	1,509	1,306	1,250	56	We have been getting many referrals from VON, LTC and dialysis service. We have noticed an influx of clients who have recently moved to the area. New clients will use the service for an immediate need initially but are returning to use the service again at a later time.

### Performance Key

	Performance Meets or Exceeds
	Performance Below Standard

PERFORMANCE INDICATORS 2023-2024 Q2			Year to Date			
SERVICE ACTIVITY	2023/2024 Target	Q2 2022-2023	Q2 2023-2024	Budget to Date	Variance	Comments
Home at Last/Home First PSW - Hours of Care	1,100	527	457	550	-93	HAL PSW and HF respite hours are down due to a lower volume of referrals and more HAL referrals requiring only transportation.
Home at Last/Home First PSW Hours - Individuals	230	123	127	115	12	HAL PSW and HF Respite individuals served remain steady.
Caregiver Support - Visits	310	159	122	155	-33	Visits are slightly down from this time last year. Used to have 2 brokered workers matched with Caregiver clients, now there is only 1 match.
Caregiver Support - Individuals	12	7	7	6	1	Number of clients is slightly above target, and matching this time last year.
Visiting - Social & Safety - Visits	20,750	7,915	7,127	10,375	-3,248	In some cases, we do not have enough volunteers to call clients on a daily basis, we only get calls out a few days/week. Also, many new clients are signed up for a few days a week, not daily calls causing the visits to be less.
Visiting - Social & Safety - Individuals	225	158	181	113	69	Continues to exceed target but many clients do not want daily calls therefore decreasing the number of visits but maintaining and increasing number of individuals.
Visiting - Hospice - Visits	4,500	2,290	3,400	2,250	1,150	Direct support volunteer visits in hospice residence are now being collected in this category in addition to visits completed in client homes.
Visiting - Hospice - Individuals	430	323	522	215	307	Numbers continue to rise due to ongoing engagement with community partners and increased demand for services.
Hospice Residents - Individuals Served		71	65	0	65	Number of residents admitted are down from this time last year. There were a few long-term residents, therefore not as much bed turnover.
Hospice Residents - Occupancy rate	80%		76%			Occupancy rate is slightly below Ministry requirement, however, our average length of stay is stable this fiscal year and adequately meeting our eligibility criteria. Referrals remain unpredictable, but as we raise awareness about Ed's House with the community, we expect to see an increase in referrals.
Personal Distress Alarms - Individuals	140	132	123	70	53	Stats in this program will likely continue to go down. Our units require land lines and many clients no longer have land lines and therefore must go to other options.
Total Individuals Served	8,100	4,011	4,470	4,050	420	Exceeding the target and higher than previous years Q as programs open up and clients access more services
Total Visits	61,570	26,593	30,565	30,785	-220	The total visits are slightly below target but considerably higher than the same time last year. Visits will continue to rise as programs continue to open up.
# of Volunteers - Individuals	872	446	580	436	144	Increase of volunteers this quarter due to end of summer, CCN events, word of mouth and exposure on social media.
# of Volunteers - Hours	91,193	17,983	19,556	45,597	-26,041	Volunteers are taking more frequent and longer vacations, as well as scaling back the number of hours they give to focus on other priorities. This seems to be the trend across the volunteer sector.



**CommunityCare**  
NORTHUMBERLAND

<b>SECTION:</b>	Financial	<b>POLICY:</b>	Designated Donations
<b>DATE ISSUED:</b>	July 9, 2001	<b>NUMBER:</b>	F – 50
<b>REVIEWED:</b>	Nov/14, Jan/19		
<b>REVISED:</b>	Feb/19	<b>NEXT REVIEW:</b>	

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### **Policy**

To ensure donor requests can be fulfilled and are within the statutory guidelines for charities, prior to accepting designated donation, CCN will review and determine whether the conditions can be fulfilled.

### **Procedure**

1. Prior to accepting any donation with a designation, The Director of Donor Relations will make recommendations to the CEO, who will review the conditions of the designation and ensure that statutory requirements are met.
2. If approved, the gift will be accepted with the stated designations.
- ~~3.~~ The conditions will be documented and kept for recording purposes within a relevant database.
4. Every attempt will be made to uphold the conditions placed on the donation. If the conditions cannot be met, the donor will be informed as soon as possible. Alternative arrangements may be agreed to or the unexpended portion of the donation returned.
5. If the donor is deceased or legally incompetent, and CCN is unable to contact a legal designate, the donation will be used in a manner that is as consistent as possible with the donor's original intent.

**ADMINISTRATIVE MANAGEMENT AGREEMENT – COMMUNITY CARE NORTHUMBERLAND**

THIS AGREEMENT MADE THIS 31<sup>st</sup> DAY OF March 2021

BETWEEN:

**CAMPBELLFORD MEMORIAL HOSPITAL**  
Hereinafter called the “Hospital”

And

**COMMUNITY CARE NORTHUMBERLAND**  
Hereinafter called “CCN”

WHEREAS, based upon its extensive experience in the administrative field, Campbellford Memorial Hospital is prepared to, and desires to render, administrative services to Community Care Northumberland.

AND WHEREAS, Community Care Northumberland desires to contract with Campbellford Memorial Hospital for the performance of these administrative services; to be performed on both premises.

Both parties agree that the goals of this management agreement will include the following:

- A) Develop a quality integrated support service solution capable of meeting future needs
- B) Improve linkages with each partner in the agreement
- C) Pool resource dollars to provide and/or expand expertise for partners
- D) Free up resources to dedicate to front-line service delivery of either partner
- E) Expand the ability to meet increasingly complex administrative and financial requirements
- F) Generate cost and process efficiencies
- G) Strengthen the Rural Health Hub Concept
- H) Provide enhanced decision support for each partner
- I) Incorporate Best Practices amongst partners and external agencies.
- J) Seek future opportunities to share resources to the benefit of both parties.

NOW THEREFORE, the parties hereto agree as follows:

1. Campbellford Memorial Hospital will perform the following services for CCN (the “Services”):
  - A) Establish, operate and oversee the computerized accounting system for:  
General Ledger, Accounts Receivable/Payable, Payroll, Billing Systems, Budgeting and Financial Reporting.
  - B) Ensure timely and accurate accounting and reporting of financial information to the CCN Board of Directors including Monthly statements to the appropriate CCN Director/Manager..
  - C) Provide technical expertise in conjunction with the CCN auditors to ensure that accounting systems provide strong internal control.
  - D) Provide Payroll processing services for CCN direct employees
  - E) CMH will provide IT services as outlined in Appendix A.

ADMINISTRATIVE MANAGEMENT AGREEMENT – COMMUNITY CARE NORTHUMBERLAND

- F) CMH will share specialized knowledge on an adhoc basis with CCN (for example review of RFP procedures, HR processes, etc)
2. Community Care Northumberland will:
- A) Provide unrestricted access to individuals within CCN during normal business hours to obtain necessary accounting information.
  - B) Provide access to all information relevant to the provision of the Services on a need to know basis and subject to the confidentiality provisions herein.
  - C) Work with the Hospital to ensure the support and cooperation of CCN employees while providing the Services.
3. CCN agrees to indemnify and hold the Hospital harmless from any liability which may be imposed against the Hospital by reason of the breach of this Agreement or negligent acts or omissions of CCNs employees. The Hospital agrees to indemnify and holds CCN harmless from any liability, which may be imposed against CCN by reason of the breach of this Agreement or negligent acts or omissions of the Hospital.
4. The Term of this Agreement shall be for a period of 3 years, commencing on the first day of April 2021 (the “Commencement Date”) and ending on the 31st day of March 2024.
5. This Agreement may be extended for further 3 year term(s) subject to mutual written agreement of both parties 6 months prior to the end of the preceding Term or renewal term, and subject to such changes in the services and budget as may be agreed upon for the renewal term.
6. It is agreed that the contract amount for the Services rendered hereunder shall be ONE HUNDRED and THIRTY SEVEN THOUSAND DOLLARS (\$137,000.00) per annum plus applicable taxes for the first year of this agreement. Fees will be payable in monthly installments beginning on date that is thirty days following the Commencement Date. Any amounts due hereunder shall bear interest from the date due at the rate of 5% per annum..
7. The contract amount will be increased each year during this contract beginning April 1<sup>st</sup> 2022, by 1% per annum to cover wage inflation. For a renewal of this agreement, the fees will be negotiated three months prior to the start of any renewal period..
8. In the event that services are required that are significantly above the agreed levels, then additional adhoc charges may be negotiated between the parties for additional services.
9. This Agreement may be terminated during the Term by either party through written notice of at least six (6) months to this effect sent via Registered Mail to the other party.
10. It is agreed by the parties hereto that in the event of an alleged breach of any of the provisions of the Agreement, the offended party shall, by written notice, give to the offending party thirty (30) days, commencing with the receipt of said notice, to correct the alleged breach. In the event said alleged breach is not so remedied within the thirty (30) day period, the offended party may, in its discretion give written notice to the offending party, that it is terminating the Agreement. In the event of such termination, the Hospital shall be paid for Services rendered to the termination date, and any overpayment shall be reimbursed by the Hospital to CCN forthwith. Notwithstanding the foregoing, the non-defaulting party shall have all rights and remedies available to it at law.



**ADMINISTRATIVE MANAGEMENT AGREEMENT – COMMUNITY CARE NORTHUMBERLAND**

11. This Agreement, when fully executed, shall supersede any and all prior and existing Agreements, either oral or in writing, and contains all the covenants and agreements between the parties with respect to the subject matter of this Agreement. Any amendment or modification to this Agreement must be made in writing and signed by the parties hereto.
12. It is agreed by the parties hereto that without limiting its obligations or liabilities hereto, each party hereto will obtain, maintain and pay for during the period of this Agreement, the following insurance:
  - A) Professional Liability Insurance with limits of not less than two million dollars (\$2,000,000) per claim, to cover claims arising out of the rendering of or failure to render any professional service under the Agreement.
  - B) Workplace Safety and Insurance Board (WSIB) coverage. The Occupational Health and Safety Act for Ontario requires that all persons working in Ontario be covered, even if the employer is not an Ontario-based company. If CCN or CMH is assessed any extra levies or assessment as a result of an injury or death to an employee (worker) of CCN or CMH or due to unsafe working conditions, these extra amounts will not be reimbursed by either party.
  - C) Errors and Omissions Liability Insurance with limits of not less than two million dollars (\$2,000,000) per claim, to cover claims arising out of the rendering of or failure to render any professional service under the Agreement.
  - D) Commercial General Liability insurance with limits of not less than two million dollars (\$2,000,000) inclusive per occurrence for bodily injury, death and damage to or loss of use of property. Such insurance shall include but shall not be limited to the following terms and conditions:
    - Products and Completed Operations
    - Owners and Consultants Protective
    - Contractual Liability;
    - Broad Form Property Damage;
    - Personal Injury
    - Cross Liability and Severability of Interest;
    - Medical Payments
    - Non-Owned Automobile Liability including contractual liability
    - Contingent Employers Liability
    - Employees as Additional Insureds.

The insurance policies shall name the parties, its directors, officers, employees, agents and contractors as Additional Insureds, only with respect to the terms of this Agreement (except on Workers Compensation and Professional Liability insurance), with a cross liability and severability of interests clauses. Such insurance shall be primary without right of contribution from other insurances available to either party, and shall extend to cover the employees of the insureds hereunder.

All insurance policies shall include a provision whereby the insurers agree to provide not less than thirty (30) Days written notice prior to any insurance policies being materially altered, cancelled, or terminated by the insurers.

Each party must have an account in good standing with its respective Workers Safety Insurance Board and provide evidence of same upon request from time to time.

ADMINISTRATIVE MANAGEMENT AGREEMENT – COMMUNITY CARE NORTHUMBERLAND

Each party shall be responsible for any deductibles, exclusions and/or insufficiencies of coverage relating to such policies.

Prior to commencing the work, certificate(s) of insurance evidencing the insurance required by this Agreement in a form satisfactory to each other and with insurance companies satisfactory to each other and shall provide evidence of continuing coverage on request.

13. It is agreed by the parties hereto that any information concerning the business or affairs of each other, their directors, officers, agents, physicians, employees, clients, and volunteers of which they become aware of in the course of providing Services shall:
- A) be treated as confidential;
  - B) not be disclosed to any third party or to the partners personnel except as may be required under this Agreement; and
  - C) not be used for any purpose other than that contemplated by this Agreement.

It is agreed by the parties hereto that any combination of information which includes such information shall be treated as confidential even if individual parts thereof are not confidential. The Partners shall use all reasonable efforts to keep such information confidential, using a standard of care no less than the degree of care that the recipient would be reasonably expected to employ for its own confidential information.

In the event that either Partner is required by any applicable law to make disclosure of any such information, they shall consult with each other to the extent reasonably practicable in advance as to the contents and timing of such disclosure.

14. Conflict of interest is defined as a situation in which an individual uses, or is perceived to use, information, influence, and/or resources of an organization primarily for personal benefit, or insurance against personal loss, or for that of related individuals, or to benefit organizations to which they belong without prior disclosure of affiliation.

Any possible conflict of interest on the part of either party, any of its sub-contractors and any of their respective advisors, partners, directors, officers, employees or volunteers, shall be disclosed to the Chief Executive Officer of the Hospital or the Chief Executive Officer of CCN, respectively.

15. Conflict resolution between the partners is to be sought through discussion in a timely fashion. In case of a serious impasse, an independent third party should be contracted to act as facilitator/mediator. Several steps are available and should be used sequentially when addressing a disagreement, including:
- (i) The staff involved in the disagreement will attempt to resolve the disagreement. If not successful:
  - (ii) The CEO of the Hospital or CEO of CCN will take steps to resolve the disagreement. If still not resolved:
  - (iii) The respective Boards of Directors shall try to resolve the disagreement.
  - (iv) Third party assistance may begin at any time by mutual agreement.

16. **CCN acknowledges that (a) this Agreement (together with related records) is subject to the Freedom of Information and Protection of Privacy Act (the “Act”), which applies to records in the**

**ADMINISTRATIVE MANAGEMENT AGREEMENT – COMMUNITY CARE NORTHUMBERLAND**

custody or control of Ontario hospitals; and (b) such records may be subject to requests for access under the Act.

**17. Representations, Warranties, and Covenants**

- (i) CCN represents and warrants that:
  - a) it has the requisite power and authority to execute and deliver this Agreement and perform its obligations set out herein; and
  - b) the entering into of this Agreement will not result in the violation of any of the terms and provisions of any Agreement, written or oral, to which it may be a party.
  
- (ii) Hospital represents, warrants, and covenants that:
  - a) it has the requisite power and authority to execute and deliver this Agreement and perform its obligations set out herein;
  - b) the entering into of this Agreement will not result in the violation of any of the terms and provisions of any Agreement, written or oral, to which it may be a party;
  - c) the Hospital has the experience, knowledge, capacity, and qualifications to perform the Services; and
  - d) the Hospital shall ensure that all persons providing Services are properly qualified and that they deliver the Services in accordance with all applicable laws and industry best practices.

**18. Relationship of the Parties**

The Hospital is an independent contractor and will not act as CCN's agent, nor shall it or its employees, contractors, agents, or subcontractors be deemed to be an agent, contractor, or employee of CCN for the purposes of any employee benefit program, income tax withholding, unemployment benefits, or otherwise. Neither party shall incur any obligation on the other's behalf, nor commit the other in any manner without the other's prior written consent.

**19. Notice.**

Any notice required or desired to be given hereunder shall be delivered in person or sent by prepaid registered mail, or fax or email if confirmation of delivery is obtained, addressed as follows:

- (a) To CCN at: 174 Oliver Rd., P.O. Box 1087, Campbellford, ON K0L 1L0  
1-705-653-0955
  
- (b) To Hospital at: 146 Oliver Rd., Campbellford, ON K0L 1L0  
1-705-653-1140

or at such other address as may be furnished in writing from time to time by either party to the other. Any notice mailed as aforementioned by registered mail shall be deemed to have been received three (3) business days after the posting thereof, and by electronic means, the first business day following delivery.

**20. General Provisions**

- a) **Governing Law.** This Agreement shall be construed in accordance and governed by the laws in force in the Province of Ontario and as interpreted by the Courts of that Province.
- b) **Assignment.** No party to this Agreement may assign this Agreement without the prior written consent of all of the other parties.
- c) **Benefit of the Agreement.** This Agreement shall enure to the benefit of and be binding upon the respective heirs, executors, administrators, successors and permitted assigns of the parties hereto.
- d) **Further Assurances.** Each of the Parties shall promptly do, make, execute, deliver, or cause to be done, made, executed or delivered, all such further acts, documents and things as the other Parties may reasonably require from time to time for the purpose of giving effect to this Agreement.
- e) **Waiver.** No waiver of any provision of this Agreement shall constitute a waiver of any other provision, nor shall any waiver of any provision of this Agreement constitute a continuing waiver unless otherwise expressly provided.
- f) **Time of the Essence.** Time shall be of the essence in the performance of obligations pursuant to this Agreement.
- g) **Survival.** Rights and obligations under this Agreement which by their nature should survive, including, but not limited to any and all payment obligations invoiced prior to the termination or expiration hereof, will remain in effect after termination or expiration hereof.
- h) **Severability.** The invalidity or unenforceability of any provision of this Agreement shall not affect the validity or enforceability of any other provision of this Agreement, which shall remain in full force and effect.

ADMINISTRATIVE MANAGEMENT AGREEMENT – COMMUNITY CARE NORTHUMBERLAND

IN WITNESS WHEREOF, the parties hereto have executed this Agreement, by their officers thereunto duly authorized, on the day and year first written above.

CAMPBELLFORD MEMORIAL HOSPITAL,

Per:

\*

\_\_\_\_\_  
Board Chair

\*

\_\_\_\_\_  
President & CEO


COMMUNITY CARE NORTHUMBERLAND,

Per:

\*

  
\_\_\_\_\_  
Board Chair

\*

  
\_\_\_\_\_  
Chief Executive Officer

**APPENDIX “A”**

Information Technology Equipment and Services Agreement Between  
Community Care Northumberland  
AND  
Campbellford Memorial Hospital

Definitions:

- Provider: Campbellford Memorial Hospital (CMH)
- Information Technology (IT) Shared Service: within the scope of this document the provider role refers to the management, design, procurement, development, maintenance, enhancement and delivery of computer based systems with respect to software applications, hardware infrastructure, and the support of corporate business processes and workflows. Please note this contract does not cover desktop support.
- Party – Community Care Northumberland (CCN)

Guiding Principles:

- Our core guiding principle is high quality and equitable service to all staff, partners, clients and patients, regardless of location.
- All human resources are part of a single shared service team with work assignments directed centrally regardless of which entity acts as the paymaster.
- All IT assets will be the fiscal responsibility of the corporation to which they are located or to the corporation to which they provide a sole purpose regardless of physical location. Multi-corporate shared assets will be purchased by the provider, however, annual support and maintenance will be shared among all participants based on the agreed upon fee structure
- Privacy and Data Sharing agreements not in existence today will be created between participating partners.
- Mutual Respect and commitment to retaining each partners' cultural identify.
- All activities are intended to provide cost and operational efficiencies that enable the partners to maximize quality client care, quality services, and ensure the appropriate allocation of resources towards patient. Cost efficiencies will be first applied to resolving any inequities, then will be equitably shared according to the defined model.
- All parties will endeavour to maintain the latest technology. Software releases should not be allowed to fall more than two releases behind. Every effort will be made to remain current. Upgrades will be mutually planned and coordinated.
- Every effort will be made to minimize risk, instability, exceptional costs, or financial penalties, and is in keeping with each partner's budget cycle. Adjustments will be planned, budgeted and financed appropriately in a coordinated process.
- CMH is supportive of growing Information Technology (IT) services to other health care providers to increase value for the community and to provide added value to partners

Purpose:

- This document is an addendum to the Master Agreement to the above parties.
- The purpose of this initiative is to:
  - Provide IT Services 8 x 5 business hours (8 am – 4 pm) or as mutually agreed from time to time on an exception basis
  - Work collaboratively with other regional and vendor partners

## ADMINISTRATIVE MANAGEMENT AGREEMENT – COMMUNITY CARE NORTHUMBERLAND

- Leverage common resources to support corporate objectives and joint initiatives

### Fees:

- CCN will compensate CMH for services rendered pursuant to this described service as follows:
  - CMH labour support costs are included in the contract amount.
  - 100% of any out of pocket costs exclusively attributed to CCN and as mutually agreed;
  - 0% of any costs incurred exclusively for CMH;
  - 100% of any travel costs from CMH for CCN business per the travel policy of the employee's paymaster;

### Processes:

- Over time and in a prioritized manner, all parties will work collaboratively to standardize processes, procedures, and policies in support of the services provided in scope.

### After hour support:

- CCN CEO and Directors will be provided the cell phone number of the Coordinator of Information Systems & Information Technology for emergency after hours support if a available. Please note there will be a 4 hour minimum charge at time and half for this support.
- When the Coordinator of Information Systems & Information Technology is on holiday or off CIO of CMH in conjunction with CCN's third party desktop support and CMH's after hours support will be the after hours support based on the type of issue.

### Scope:

- All parties shall share a service that delivers like quality. Priority will first be given based on clinical acuity for exceptional events after which it is based upon equity.
- People: will be directed by common leadership to the tasks and objectives necessary to support like quality to all parties equitably as defined.
- Process: services will be governed by common processes where possible and distinctly where depicted in the service designation chart below. The chart defines scope. New services are the value add brought by the partnership. Future services are not included but will be mutually developed as mutually agreed and beneficial for both parties:

### Shared items between CCN & CMH

- Network Switch by CCN Campbellford office
- Fiber run to Network switch by CCN Campbellford Office
- Network gear that is between the core switches and the NASs
- NASs
- Core UPSs
- VMware SA
- Core Network
- Backup Solution
- Core VM Servers (hardware)
- SAN

### Owned by CCN exclusively

- All of CCN Virtual Servers
- CCN Desktops and laptops
- Firewalls in CCN offices

**ADMINISTRATIVE MANAGEMENT AGREEMENT – COMMUNITY CARE NORTHUMBERLAND**

- MFPs (including service contracts) and printers located in CCN offices
- Software that only CCN uses
- CCN telephone systems and handsets
- CCN cell phones and smartphones
- CCN website
- CCN Projectors
- Telephone and internet connections
- Any network gear past the network switch by CCN Campbellford office
- CCN physical server

Service	Provider or Partner	CCN
Data Centre Facilities	X	
Network, Routers, Gateways & TeleCom Testing, Change Management, Validation of Functionality Implementation, deployment, and upgrade Downtime, configuration, utilization, patches, etc.	X X	X
Servers Testing, Change Management, Validation of Functionality Implementation, deployment, and upgrade Downtime, configuration, utilization, patches, etc.	X X	X
Storage Testing, Change Management, Validation of Functionality Implementation, deployment, and upgrade Downtime, configuration, utilization, patches, etc.	X X	X
Devices Testing, Change Management, Validation of Functionality Implementation, deployment, and upgrade Downtime, configuration, utilization, patches, etc.	X X	X
Office Automation Testing, Change Management, Validation of Functionality Implementation, deployment, and upgrade Downtime, configuration, utilization, patches, etc.	X X	X
Interfacing Testing, Change Management, Validation of Functionality Implementation, deployment, and upgrades Downtime, configuration, utilization, patches, etc.	X X	X
Software support or maintenance for Consolidated Client Management solution		X
Organizational Adoption, Relationship, and Change Management Quality Reviews, local resource allocation, service level objectives Quality and Performance, Policy definitions, process improvement Service Level Agreements, Service Delivery Transformation Planning	X X	X
New Services Strategic, leadership succession, financial, project gateway planning	X	X



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Service	Provider or Partner	CCN
Capacity Planning Integration coordination, solution standards, design configuration Project prioritization, resource planning, tactical planning, Chg Mgt Relationship management, policies, trends, Service levels, process Planning Solution adoption leadership Systems Operations Management Project Implementations	X X Consult X X Consult X X	Consult X X X X Consult Consult
Future Services for consideration: Business Continuity Disaster Recovery  Data Warehouse Collaboration Platforms Virtual Health Decision Support and Analytics	X X  X X X X	Consult X  X X Consult Consult

**ADMINISTRATIVE MANAGEMENT AGREEMENT – COMMUNITY CARE NORTHUMBERLAND**

IT Response Matrix

	Priority	Initial Response	Current Diary Updates	Future Diary Updates	Resource Commitment	Escalation Process
High Priority	0: Disaster; Significant Loss; Widespread Down	Acknowledge within 15 mins	Initial + critical event	Every 30 mins	Continuous effort – all resources. CIO or Organization Director Coordinates	<u>All IT leadership immediately</u> , vendor(s), DR/BC Services, facilities services, DR Coordinators
	1: Priority Applications Down; Data Centre Environmental Faults; Facilities or Departments Down; Live Service Unavailable; Service Levels Exceeded by 20%	Acknowledge within 15 mins  6 hr resolve 90% of time	Initial + critical event	Every 30 mins	Continuous effort – all available resources related to the issue. Manager Coordinates.	<u>Immediate</u> : responsible Manager, vendor(s), facilities  <u>&gt;2 hours</u> : Director. VP by eMail. Vendor Escalation.
Medium Priority	2: Data Loss or Corruption; Patient / Client Services Affected; System(s) down; Performance Concerns	1 Hrs  8 business hr resolve 90% of time	Initial + critical event	Initial + Every hour	Continuous effort – specified senior Tier 3 resources. PM Coordinates.	<u>&gt;2 hours</u> no diary entries: responsible coordinator  <u>&gt;4 hours</u> no diary entries: responsible Manager
	3: Security Concern; Redundant Route down; Incorrect System Results; Business Applications Impact; Operational confusion After full security review and all current security issues have been resolved.	2 Hrs  8 business hr resolve	Initial + critical event	Initial + Every 4 hours	Assignee - same day	<u>&gt; 24 hours</u> with no diary entries: eMail responsible Coordinator  <u>&gt; 36 hours</u> with diary entries: eMail responsible Manager.
Low Priority	4: Localized impact; workflow efficiency impact; workaround; alternative methods	5 Business Hrs  40 business hr resolve	Initial + critical event	Initial + Every Day	Assignee works with client to mutually satisfactory resolution time	<u>&gt;24 hours</u> with no diary entries: eMail the responsible Coordinator  <u>&gt;48 hours</u> with diary entries, e-mail the responsible Manager.
	5: Instruction problems; cosmetic; nice-to-have; alternatives	End of next business day	NA	Initial + 4 days	Within 4 days identify if it will be accepted, who owns it, and when the next development cycle will account for it	

Please note that hours in this table are in business hours and do not include any delays caused by outside sources.



## CommunityCare NORTHUMBERLAND

<b>SECTION:</b>	Financial	<b>POLICY:</b>	Donation Receipts
<b>DATE ISSUED:</b>	July 9, 2001	<b>NUMBER:</b>	F – 60
<b>REVIEWED:</b>	Nov/17, Jan/19		
<b>REVISED:</b>	Nov/17	<b>NEXT REVIEW:</b>	

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### Policy

All donations (gifts, bequests, gifts in kind) received by a representative of CCN (volunteer, staff, board or committee members) becomes the property of CCN. CCN will ensure that all donations will be administered for the purposes for which they are given and/or the betterment of the organization as a whole.

Donation receipts will be issued by CCN for all gifts received in accordance with the policies and requirements of the Canada Revenue Agency.

### Procedure

1. When a monetary donation is received, it will be deposited into the bank account within seven working days.
2. A charitable receipt will automatically be issued for any cash donations of \$20.00 or more. Upon requests from donors, receipts for lesser amounts will be issued.
3. Donation receipts must be prepared using the approved computer program with information backed up on a regular basis.
4. The receipt must contain the following information:
  - a) a statement that it is an official receipt for tax purposes
  - b) name and address in Canada of our organization as recorded with the Canada Revenue Agency
  - c) the registration number assigned by the Canada Revenue Agency
  - d) When the donation is by cash or cheque, the day on which the donation was received.
  - e) Where the donation is a gift of property, the day on which the donation was received, a brief description of the property, and the name and address of the appraiser of the property if an appraisal is done.
  - f) The day on which the receipt was issued if it differs from the receipt date
  - g) Name and address of the donor
  - h) The amount of the donation
  - i) Signature of an approved signing authority as per CCN By-Laws.
5. Where a receipt is lost and a new receipt is issued, the replacement receipt must be clearly identified as a replacement receipt and must show the serial number of the receipt which it replaces. A receipt which is spoiled must be marked 'cancelled' and both the original and duplicate retained.
6. Donation receipts are not to be issued when the price of admission to an event includes participation in a lottery, draw, or game of chance where the prizes have more than a nominal value.
7. Receipts will be issued no later than February 28<sup>th</sup> for donations received in the previous calendar year.



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8. Donations of property will require documentation that supports the value assigned to the property for charitable donation purposes and under no circumstances can the value assigned exceed the fair market value of that property on the day the donation was received.



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<b>SECTION:</b>	Financial	<b>POLICY:</b>	Donor Recognition
<b>DATE ISSUED:</b>	July 9, 2001	<b>NUMBER:</b>	F – 70
<b>REVIEWED:</b>	Jan/19		
<b>REVISED:</b>	Nov/17, Feb/19	<b>NEXT REVIEW:</b>	

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**Policy**

To provide suitable and appropriate acknowledgement of donations, all donations (gifts, bequests, gifts in kind) will be recognized by Community Care Northumberland.

**Procedure**

1. Thank you letters, signed by the Board Chairperson or designate will be sent to donors for amounts of \$20.00 or more.
2. Donations in memory of someone will be acknowledged with a letter to the family of the person being remembered. The letter will include the names of the donors unless the donor requests anonymity.
3. Additional recognitions for donations may be made as determined by the Board of Directors.



## CommunityCare NORTHUMBERLAND

<b>SECTION:</b>	Financial	<b>POLICY:</b>	Donor Recognition
<b>DATE ISSUED:</b>	July 9, 2001	<b>NUMBER:</b>	F – 70
<b>REVIEWED:</b>	Jan/19		
<b>REVISED:</b>	Nov/17, Feb/19	<b>NEXT REVIEW:</b>	

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### Policy

To provide suitable and appropriate acknowledgement of donations. All donations (gifts, bequests, gifts in kind) will be recognized by Community Care Northumberland.

### Procedure

Community Care Northumberland Donor Relations staff will work to acknowledge every gift with the following guidelines. At any time, a donor may request additional public recognition or decline public recognition.

### Gift Acknowledgement

#### Gifts of \$20 - \$999:

- Thank you letter and Income Tax receipt if applicable for gifts over \$20 will be issued within 30 business days. Donations made online will receive email acknowledgement. All thank you letters will be signed by the CEO, or Director of Donor Relations.
- All donations over \$500 receive a personal thank you call from the Director of Donor Relations or appropriate staff member.

#### Gifts of \$1,000 - \$9,999:

- Thank you letter and Income Tax receipt if applicable will be issued within 30 business days and will include a handwritten note from the Chief Executive Officer or the Director of the department the donation is specified for.
- For donations that are not eligible for tax receipts or for donations made online where email tax receipts are issued, a handwritten thank you card from the Chief Executive Officer, the Director of the department the donation is specified for, or the Director of Donor Relations will be sent.
- Acknowledgement on social media/press release is an option if the donor is amenable to public recognition.

#### Gifts over \$10,000:

In addition to the recognition included in the previous categories:



- With the Donors permission, their donation will be featured in the Community Care Northumberland newsletter.
- If the Donor chooses to, Community Care Northumberland will submit a press release including a photographed cheque presentation to the local media along with acknowledgement on social media.

**In Memory Donations:**

1. Donations in memory of someone will be acknowledged with a letter to the family of the person being remembered. The letter will include the names of the donors unless the donor requests anonymity. The amount of the donation will be kept confidential.

**Additional Recognitions:**

1. Additional recognition for donations may be made as determined by the Director of Donor Relations.



**CommunityCare**  
NORTHUMBERLAND

<b>SECTION:</b>	Financial	<b>POLICY:</b>	Lottery Activities
<b>DATE ISSUED:</b>	July 10/2012	<b>NUMBER:</b>	F – 125
<b>REVEIWED:</b>	Jan/19		
<b>REVISED:</b>	Jan/16	<b>NEXT REVIEW:</b>	

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Lottery activities are an element of the overall fundraising plan of Community Care Northumberland. This policy outlines conduct of these activities and will ensure Community Care Northumberland’s compliance with the Alcohol and Gaming Commission of Ontario (AGCO).

**Lottery activities include the following:**

1. Nevada Tickets
2. Raffles
3. 50/50 draws

**1. Nevada Tickets**

In order to establish a Nevada ticket outlet, Community Care Northumberland must complete an application form that has two signing officers. The signing officers cannot purchase any Nevada tickets at these licensed outlets.

Employees Community Care Northumberland cannot purchase any Nevada tickets at these licensed outlets.

The Chairperson of the Board of Directors of Community Care Northumberland cannot purchase any Nevada tickets at these licensed outlets.

**2. Raffles**

In order to receive a raffle license Community Care Northumberland must complete an application form that has two signing officers. The signing officers cannot participate in the raffle by purchasing a ticket. If the prize amount is over \$10,000 CCN may be required to secure a line of credit from their banking institution.

Employees of Community Care Northumberland cannot participate in the raffle by purchasing a ticket if the prize board is over \$500.00 or has acted as the signing officer for the raffle.





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The Chairperson of the Board of Directors of Community Care Northumberland cannot participate in the raffle by purchasing a ticket if the prize board is over \$500.00 or has acted as the signing officer for the raffle license.

A member of the Board of Directors of Community Care Northumberland cannot participate in a raffle by purchasing a ticket if the prize board is over \$1,000.00 or has acted as the signing officer for the raffle license.

### **3. 50/50 Draws**

In order to receive a raffle license Community Care Northumberland must complete an application form that has two signing officers. The signing officers cannot participate in the raffle by purchasing a ticket.

Employees of Community Care Northumberland cannot participate in the 50/50 draw by purchasing a ticket if the prize board is over \$500.00 or has acted as the signing officer for the raffle license.

The Chairperson of the Board of Directors of Community Care Northumberland cannot participate in the 50/50 draw by purchasing a ticket if the prize board is over \$500.00 or has acted as the signing officer for the raffle license.

A member of the Board of Directors of Community Care Northumberland cannot participate in a 50/50 draw by purchasing a ticket if the prize board is over \$1,000.00 or has acted as the signing officer for the raffle license.

### **Miscellaneous Compliance Issues**

In accordance with the ACGO policy, no tickets will be sold intentionally to any minor. If the winner's name selected is a minor, Community Care Northumberland will adhere to AGO standards. No prize will be awarded and will be held in trust for the minor until they are 18 years of age.

In accordance with the ACGO policy, if a winner's name selected is deceased at the time of the draw, Community Care Northumberland will adhere to AGO standards. The prize will be awarded to the estate of the deceased.



**SECTION:** Financial **POLICY:** Use of Agency Property

**DATE ISSUED:** July 9, 2001 **NUMBER:** F – 190

**REVIEWED:** Nov/14, Jan/19

**REVISED:** Nov/08 **NEXT REVIEW:**

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### **Policy**

Community Care Northumberland will share its facilities, equipment, and resource materials, where possible with its volunteers or with other agencies whose activities relate to CCN mandate and who agree to abide by established procedures.

### **Procedure**

1. Directors and Program Managers will maintain procedures for the loan or rental of meeting space, equipment, or resource materials.
2. Conditions of a loan or rental will include:
  - a) non-interference with CCN activities
  - b) An agreement to accept responsibility and pay the replacement value of damage or lost equipment or resource materials.
  - c) Agreement to return facilities to their original condition.
  - d) Agreement to observe security measure (e.g., lock doors, not let unauthorized people into facilities)
  - e) Returning any equipment or resource material within the specified time period.

\* See attached Template for Rental Agreement



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NORTHUMBERLAND

## Community Care Northumberland Address of Location

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### Permit for the Rental of Community Care Office Facilities

Name of Organization:

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Name of Applicant:

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Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

\_\_\_\_\_ Business: \_\_\_\_\_

Date(s) required:

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Rental Hours – From: \_\_\_\_\_ To: \_\_\_\_\_

Nature of Gathering:

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Areas to be used:

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Additional Notes:

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Fee: yes \_\_\_\_\_ no \_\_\_\_\_ amount \$ \_\_\_\_\_

Receipt of office key & alarm procedures: \_\_\_\_\_

Returned Key: \_\_\_\_\_ (please initial) Date: \_\_\_\_\_

Details of Liability Insurance: Company \_\_\_\_\_ Policy Number \_\_\_\_\_



## Emergency Checklist

1. Telephone & list of emergency numbers: \_\_\_\_\_
2. Reviewed exits and emergency exits: \_\_\_\_\_
3. Fire Alarms and extinguishers: \_\_\_\_\_
4. First aid kit: \_\_\_\_\_
5. Location of cleaning supplies: \_\_\_\_\_

## User Responsibilities:

1. Applicants shall be responsible for the conduct and supervision of all persons admitted to the facilities and shall see that regulations are observed.
2. The facilities must be left in the same condition as they were before occupancy (dishes used washed, sinks rinsed, etc.). Any additional cost for extra janitorial services will be charged to the organization.
3. Only the room and equipment specified in the permit shall be used. The room should be left in the set-up before rental (i.e. chairs stacked, tables returned to previous location)
4. A key for the front door and code for the alarm system will only be issued to one person per rental group. This key and code must be kept secure and confidential and is not to be shared with any other member of the rental group for security and confidentiality purposes. The group is responsible for any charges related to false alarms because of incorrect use of the alarm system. Replacement costs for the loss of keys will be the responsibility of the user.
5. Applicant accepts liability for all damages arising out of bodily injury sustained by persons under his/her charge and property damage done by persons under his/her charge or through the applicant's neglect. Community Care Northumberland is not responsible for any personal property on premises.
6. Applicant waives all rights of action against Community Care Northumberland, and agrees to indemnify Community Care Northumberland from any actions or causes of actions against Community Care Northumberland taken by any person under his/her control.
7. Priority for rental permits will be given to activities sponsored by Community Care Northumberland. Community Care Northumberland reserves the right to cancel any permit.
8. Violations of any of these conditions may result in cancellation of the rental contract.

Note 1. The premises are designated as a No Smoking building.



**CommunityCare**  
NORTHUMBERLAND

**These signatures verify that the applicant has reviewed the emergency check list and acknowledges their user responsibilities.**

**Applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Director/Program Manager:** \_\_\_\_\_

*\* Additional items may be added depending on office location.*