

Board of Directors Meeting Minutes

Virtual Meeting – Friday, November 24, 2023 – 11:00 am

Present: Jackie Gardner-Nix, Elaine Azzopardi, Tim Miller, Angela Grogan, Judy McLean, Jessica Clarke, Cindy Anthony, Sharyl Ann Milligan, Trish Baird, Tina Stephens, Meaghan Spencer (Finance Manager, CMH) Jordyn Boivin (Financial Analyst, CMH)

Regrets: Stephen Beauchamp, Selena Forsyth, Sharron MacDonald

Topic	Discussion	Decision/Action
1.1 & 1.2 Quorum & Declaration of Conflict of Interest	The meeting was called to order by Jackie Gardner-Nix who welcomed everyone. There was a quorum present, and no conflicts of interest were declared.	No conflicts were declared.
1.3. & 2 Approval of Consent Agenda	Approval of Consent Agenda Move Lottery Activities Policy to item #4.1.1(a). for more discussion.	Motion by: Tim Miller to approve the amended consent agenda. 2 nd by: Angela Grogan. Carried.
1.4 Approval of Agenda	Approval of Agenda	Motion by: Cindy Anthony to approve the agenda. 2 nd by: Jessica Clarke. Carried.
3. Business Arising from Minutes	3.1 Bed Expansion Update Trish presented the Board with a detailed list of proposed constructions costs. Still waiting for the exact cost of construction from the builder, Dalren. The board felt comfortable moving ahead with estimated cost, up to \$700,000, with a suggestion to inquire about another possible quote for the installation of oxygen and suction for all 10 beds.	Motion by: Judy Mclean to approve the construction costs, up to \$700,000. 2 nd by: Jessica Clarke. Carried.
4. Board Business/Committee Matters	4.1 Finance Committee – CCN Q2 Financial Results Finance Committee Chair, Judy McLean, presented the Q2 Financial Results. Overall, CCN is in a positive position at the end of Q2. 4.1.1 F-70 Donor Recognition – New Policy Judy informed the Board that financial policy F-70 Donor Recognition has been reviewed by the Committee. Significant changes have been made. 4.1.1 (a) F-125 Lottery Activities policy was shared with the Board as a reminder of CCN's policy around the purchasing of tickets for Raffles, 50/50 or Nevada.	Motion by: Judy McLean to approve the Q2 Financial results. 2 nd by: Tim Miller Carried Motion by: Judy McLean to approve the changes made to F-70 Donor Recognition policy. 2 nd by: Jessica Clarke Carried For Information Purposes

	<p>4.2 Foundation Update There are quite a bit of activities happening for the Foundation. A Professionals night is being planned for some time after the holidays. A mail out is being developed, along with some policies and Terms of Reference. The date for Hand Bags event will be April 4, 2024 at the Best Western in Cobourg.</p> <p>4.3 OHT-N/Advisory Council Update Things are at a slow pace right now for the OHT-N as the new Co-Chairs are getting settled in and new staff are being recruited.</p> <p>4.4 In Camera Session</p>	<p>For Information Purposes</p> <p>For Information Purposes</p> <p>Motion by: Jessica Clarke to move into Camera. 2nd by: Angela Grogan. Carried.</p> <p>Motion by: Jessica Clarke to go out of Camera. 2nd by: Cindy Anthony. Carried</p>
3.1 Termination		Motion by: Judy Mclean

Next Meeting – Friday, January 26, 2024 – 10:00 am – Zoom

Community Care Northumberland Board of Directors Meeting



CommunityCare
NORTHUMBERLAND

Friday, Nov. 24, 2023 – 11:00 am

<https://us02web.zoom.us/j/81890584088>

Meeting ID: 818 9058 4088

Passcode: 514468

AGENDA

Item	Action	Lead
1. CALL TO ORDER – Introduction of Board Members		
1.1 Confirmation of Quorum		Jackie
1.2 Declaration of Conflict of Interest		Jackie
1.3 Approval of Consent Agenda	Motion	Jackie
1.4 Approval of Agenda		Jackie
2. CONSENT AGENDA		
<i>The following items have been identified as part of the consent agenda for the regular meeting. A Director may request to move an item out of the consent agenda to further discuss or inquire about it before approval of the agenda.</i>		
<u>Items:</u>		
2.1 Board Minutes – Oct. 27, 2023*	Motion	Jackie
2.2 Finance Committee Minutes – Nov. 10, 2023*		
2.3 Internal Controls – Q2 – 2023/2024*		
2.4 Incident Report – Sept. 2022 – Sept. 2023*		
2.5 F-125 Lottery Activities*		
3. BUSINESS ARISING FROM MINUTES		
3.1 Bed Expansion Update	Information	Trish
4. BOARD BUSINESS/COMMITTEE MATTERS		
4.1 Finance Committee – CCN Q2 Financial Results*	Motion	Judy
4.1.1 – New Policy – F-70 Donor Recognition*	Motion	Judy
4.2 Foundation Update	Information	Elaine
4.3 OHT-N Update/Advisory Council	Information	Trish/Jackie
4.4 In Camera Session	Information	Trish
5. Motion to Terminate Meeting		

*Indicates Attachments

Next Regular Meeting: Friday, January 26, 2024 – 10:00 am - Zoom

Board of Directors Meeting Minutes
Virtual Meeting – Friday, October 27, 2023 – 10:00 am

Present: Jackie Gardner-Nix, Elaine Azzopardi, Tim Miller, Angela Grogan, Stephen Beauchamp, Selena Forsyth, Cindy Anthony, Sharyl Ann Milligan, Trish Baird, Tina Stephens, Kim Wilkinson (Community Paramedic Coordinator)

Regrets: Judy McLean, Jessica Clarke, Sharron MacDonald

Topic	Discussion	Decision/Action
Board Education	Northumberland Paramedics – Kim Wilkinson, Community Paramedic Coordinator, shared with the Board a high-level presentation on the Northumberland Community Paramedicine Program.	Presentation available on-Board portal.
1.1 & 1.2 Quorum & Declaration of Conflict of Interest	The meeting was called to order by Jackie Gardner-Nix who welcomed everyone. There was a quorum present, and no conflicts of interest were declared.	No conflicts were declared.
1.3. & 2 Approval of Consent Agenda	Approval of Consent Agenda	Motion by: Elaine Azzopardi to approve the Consent agenda as amended. 2 nd by: Cindy Anthony Carried.
1.4 Approval of Agenda	Approval of Agenda	Motion by: Selena Forsyth to approve the agenda. 2 nd by: Tim Miler Carried.
3. Business Arising from Minutes	3.1 Bed Expansion Update Trish is still waiting on the cost analysis from the builder, Dalren, and from the Architects, Barry Bryan Associates. Funding announcement for the beds is being planned for Friday, November 24, 2023, at 10:00 am. Please mark your calendars.	Trish will keep the Board updated on future progress.
4. Board Business/Committee Matters	4.1 Governance Committee – Mission, Vision, Values Report. The Governance Committee reviewed the options for the proposed new Mission, Vision, Values statement and after some discussion, the following statements were accepted. <i>Mission:</i> "To connect our communities to the support, service, and care they need throughout their lifelong journey." <i>Vision:</i> "A community where people experience connection and well-being."	Motion by: Angela Grogan to approve the amended Mission, Vision, Values statements as put forth by the Governance Committee. 2 nd by: Selena Forsyth Carried.

	<p>Values: Relationships: we enter each relationship with care, ensuring equity, respect, and collaboration.</p> <p>Accountability: we approach our work with integrity while balancing the voices of the people, community, and funders.</p> <p>Community: we are engaged partners and together we celebrate our strengths and respond to the needs of our community.</p> <p>Compassion: we deliver meaningful service supporting dignity and belonging through empathy, collaboration, and inclusivity.</p> <p>4.1.1. Board Questionnaire Results The Governance Committee reviewed the results of the annual Board Questionnaire results, and a high-level report was circulated. A couple of suggestions were made:</p> <ol style="list-style-type: none"> 1. Use of acronyms. Suggested not to use acronyms. 2. Board Education – first 20 mins for presentation and 10 min for Q&A. If time runs out maybe questions could be sent to the presenter directly afterwards. <p>4.2 – Foundation Update Foundation still meets on a weekly basis. Currently setting up timelines and workplans. Many new ideas are in the works to attract new donors.</p> <p>4.3 OHT-N/Advisory Council Update Announcement was made that the OHT’s are going to receive funding for the next 3 years. 12 ‘accelerator’ OHT’s have been announced to move towards Incorporation and to also integrate ‘Home and Community Care Services’ (formerly Community Care Access Centres) in their models. The Governance Advisory Council is in somewhat of a holding pattern as key staff have moved on. Recruitment efforts for the Director and Project Manager will be starting shortly and there are now two new Co-Chairs of the Collaboration Council (Taryn Rennicks, ED at the Community Health Centres of Northumberland and Susan Walsh, CEO of Northumberland Hills Hospital).</p>	<p>For Information Purposes</p> <p>For Information Purposes</p> <p>For Information Purposes</p>
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	<p>4.4 November Meeting – In person – Christmas Lunch</p> <p>As stated previously in the meeting, the funding announcement for the residence beds will coincide with the November Board meeting. The announcement will be at 10:00 am, with the in-person Board meeting beginning at 11:00 am. There will be a Christmas lunch to follow the meeting. A virtual option for the board meeting will be available to those who cannot attend in person. There will be more details to follow.</p>	For Information Purposes
3.1 Termination		Motion by: Selena Forsyth

Next Meeting – Friday, November 24, 2023 – 11:00 am – In-Person – Virtual Option Available

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
1. Quorum & Approval of Agenda	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.
2. Approval of Minutes	2.1 Approval of previous minutes – Sept. 15, 2023	Motion by: Donna Moulton to approve the previous minutes. Seconded: Jackie Gardner-Nix Carried.
3. Financial Statements	<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>
4. Work Plan Items	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 & 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"> 1. Information on 'best practice' in similar agencies of % of budget allocated for costs for financial reporting and accounting to total budget. 2. Brief review of current contract and outcomes.
5. Policy Review	<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>
6. Terminate		Motion by Donna to terminate.

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

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WWW.COMMCARE.CA

INTERNAL CONTROLS/RISK MANAGEMENT

Quarterly Reporting of Remittances July 1, 2023 – Sept. 30, 2023

Community Care Northumberland's compliance with the financial and reporting obligations as set out by the following Government Ministries is as follows:

Canada Customs & Revenue Agency: All employee payroll deductions and employer contributions including Income Tax, Canada Pension Plan, Employer Health Tax and Employment Insurance premiums have been remitted.

Workplace Safety & Insurance Board: All Workplace Safety & Insurance Board premiums and assessments have been remitted in accordance with requirements.

Ontario Ministry of Finance: There were no Retail Sales Taxes due to the Ministry for the period in accordance with requirements.

Ontario Ministry of Health: All required reporting to Ontario Health East and Ministry of Health and Long-Term Care have been remitted in accordance with requirements.

Completed by:

Adam Kolisnyk
Adam Kolisnyk (Nov 2, 2023 15:51 EDT)
Adam Kolisnyk
CFO
Campbellford Memorial Hospital

Trish Baird
Trish Baird (Nov 1, 2023 15:52 EDT)
Trish Baird
Chief Executive Officer
Community Care Northumberland

Community Care Northumberland – For Nov 24th Board Meeting – Consent Agenda Item.

Incident/Complaint Report – Oct 1, 2022 to Sept 30 2023

Number of Incidents this period – 16

Number of complaints this period - 1

Type of Incident	Details	Resolution	Immediate Changes Required/Next Steps
Medical	<ol style="list-style-type: none"> 1. A client using our transportation service stumbled when getting into a CCN van seat and ended up on the floor in a sitting position. Driver ensured client was not hurt and was able to assist client into their seat and continued to appointment. 2. During a drive, while the vehicle was going through a 'round about', the seat in the van moved and the client and seat ended up on the floor. The client was strapped into the seat. The driver stopped, ensured the client and other passengers were safe with no injuries presented. The driver re-secured the seat and passenger and continued drive to client's home. Driver discussed the incident with the caregiver. 3. Volunteer delivering MOW's followed procedure to enter clients home to deliver. The volunteer found the client on the floor, non-responsive. Volunteer called 911 and waited for emergency personnel to arrive. Volunteer reported incident to office. 4. Staff member experienced light-headedness while at work. Was taken by Manager to hospital to get checked out. 5. Two staff members experienced back injury when repositioning a resident in Eds House. One report came immediately after incident, the second report came one month following the date of incident. 6. Client in the Falls Prevention Class lost his balance and fell to the floor. He broke his fall by holding onto a chair near by but this did have an impact on his arm. Client was able to get up on his own with verbal assistance from the instructor. 	<ol style="list-style-type: none"> 1. Follow up immediately with caregiver regarding the incident, staff followed up with client and caregiver the next day to ensure they were okay. No medical attention required. 2. Manager called caregiver to ensure they had the correct information and inquire on the client. No injuries were reported. 3. Manager offered to cover the rest of volunteers shift but volunteer wanted to continue. Manager met volunteer at the end of their shift to discuss incident and offer assistance at any time. 4. Staff member was examined by ED staff and discharged. 5. Injury reported to Manager, shifts were covered by other staff, WSIB claim submitted. 6. The instructor talked to client at the end of the class to ensure he was okay. He was also called the next day. No medical injuries reported. 	<ol style="list-style-type: none"> 1. Education to all drivers to ensure client is securely seated before attending to other duties. 2. Discussion with driver on incident. Re-education on ensuring chairs in vehicle are locked into position. In addition, ensuring clients who are unsteady on their feet sit in a double seat for additional support. 3. No changes required. 4. No changes required. 5. Staff were reminded about equipment available to them for safe lifting and encouraged them to use the equipment to prevent any injury. Staff also took 'Safe Body Mechanics' training with CCN Kinesiologist. 6. No changes required

Behavioural	<ol style="list-style-type: none"> 1. CCN Driver dropped off a client at home. Their son approached the driver displaying aggressive, agitated/irritable behaviour with complaints regarding the requirements from CCN of the client using a wheelchair because of mobility challenges. The Driver tried to explain requirements to them. They began swearing and mocking the driver. The driver left once the client was out of the vehicle. 2. Client who uses transportation displayed rude and aggressive behaviour to office staff and volunteer driver. Client did not agree with following the rules related to their transportation booking which is covered through a third party. 3. Client using our van service would not follow policy limiting the number of grocery bags and other items during their trip. The multiple items created a tripping hazard for other riders and client was not able to keep all of their property with them when making other stops. 4. Client came into the Brighton office to use phone to call their case worker. Client became very agitated on the phone and hung up then left the office. Client came back 5 minutes later and wanted to make the same phone call. The client began arguing with CCN staff and exhibited aggressive behaviour. Staff asked him to leave. 5. Report came from family members regarding their mother receiving Friendly Visiting from a volunteer that they wanted ended. They felt that the relationship was crossing too many boundaries and was becoming problematic. 	<ol style="list-style-type: none"> 1. Driver contacted the Manager immediately to report the behaviour. The Manager contacted the son to understand what the confrontation entailed. The son does not want to provide a wheelchair for his father to use the service as we have requested. The son will be taking the father to his appointments moving forward. 2. Manager discussed with client why the drive could not go ahead as requested. Manager spoke with third party contact who investigated the behaviour. Third party has put any future transportation coverage for this client 'on-hold'. 3. Manager met client in person to reiterate the rules regarding bag limits and provided multiple suggestions for moving forward. Client was not accepting of those suggestions. Client was told we could not accommodate her trips if she would not comply with bag limits. A letter was sent to the client outlining the conversation and providing the copy of limitations for riders. 4. Staff called Manager to report what happened. Staff were instructed that if they felt unsafe to lock the office door and in particular if there was only one person in the office. 5. Friendly Visitor had been contacted previously that the visits were to be discontinued but then restarted them after a period of time. Volunteer let the office know this happened and the family was fine with it. Manager called the family to confirm and received a conflicting story. Volunteer was informed that they were not to visit the client any further. A follow-up registered letter was sent to the volunteer. 	<ol style="list-style-type: none"> 1. No changes required. 2. No further changes. 3. No further changes. 4. Staff are aware that they can lock the door if they feel it necessary. 5. Staff discussed incident within the team to ensure documentation on events like this are kept accurately and up to date.
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	<p>6. Client who used our services went into arrears and refused to address money owing and work with us for a payment plan. Needed additional drives for treatments but refused to pay any costs. Staff were not able to provide service, client became very belligerent, rude over the phone and sent threatening emails to Manager.</p>	<p>6. Manager spoke with the client letting her know the consequences of her behaviour. The client was removed from client roster and a registered letter was sent to client outlining the steps needed to be taken if they wanted services again.</p>	<p>6. No further changes</p>
Property Damage	<p>1. Volunteer Driver was with a client driving, another car veered into his lane and hit his car. Minor damage to care, no injuries to driver or client in the car.</p> <p>2. Staff reported a strong odor in the office. Checked dehumidifier in basement ensuring it was draining properly. Suspected a dead rodent in the basement as this has happened in the past. Contractor was called to inspect property. Contractor attended and removed a dead mouse. No other cause of the odor was found. Staff reported strong odor remained after weekend away. Staff were sent home to work. Contractor suggested to replace furnace filters. Next day, odour was dissipating.</p>	<p>1. Volunteer Driver and other vehicle driver stopped and shared information. Volunteer reported that the other driver provided compensation to have the damage repaired. Manager called both driver and client the next day to ensure everyone was okay and there were no medical injuries.</p> <p>2. CEO and Director met to plan for mitigation of further issues. Have a monthly plan for checking on basement devices and monitor situation.</p>	<p>1. No changes required.</p> <p>2. Nothing further at this time.</p>
Privacy Breach	<p>1. A volunteer in the Hospice Services program left Personal Health Information of a client they were matched to in a phone message meant for their supervisor. Unfortunately, the Volunteer mistakenly left this message on another clients phone.</p> <p>2. Employee emailed out a form to 8 organizations for an upcoming volunteer fair. Mistakenly on the form was credit card information from a previous participant organization.</p>	<p>1. Manager met with Volunteer to discuss breach of privacy information. Both clients were contacted by telephone to discuss the breach. Volunteer decided to take an indefinite break from direct support.</p> <p>2. All eight organizations were contacted and asked to disregard and destroy document sent. Organization whose information was shared was contacted and situation explained. Process was changed to ensure 'fillable forms' were blank before being distributed.</p>	<p>1. No further changes required.</p> <p>2. No further changes required.</p>
Complaints	<p>1. A formal complaint was sent to the CEO regarding the rate of pay with our home-help workers. The complainant felt that we were being complicit in negotiating low rates of pay for workers salaries</p>	<p>1. CCN Manager responded to the complainant explaining how the program operates, determination of client user fees and the difference between Home & Community Care</p>	<p>1. Subsequent to this complaint, received in September 2022, the hourly rate for contracted workers was increased by \$3/hr three</p>

	<p>who are typically a 'gendered group of workers'. The complainant strongly encouraged CCN to look at its compensation structure.</p>	<p>Services and Community Care Northumberland.</p>	<p>months later to help recruit additional workers and to lower our waitlist.</p>
<p>Compliment</p>	<p>Note to Colleen & Kelly, CCN staff who organized the first Volunteer Fair Ladies, I cannot say it enough today, I've been telling anyone who will listen – yesterday was BRILLIANT. Huge bravo to the both of you and CCN for organizing and bringing to life a truly phenomenal event. You should be very proud. Love love loved it all. Thank you for having NHH part of the fun!!</p> <p>Note to Ashley our Kinesiologist who teaches Falls Prevention Classes.</p> <ul style="list-style-type: none"> - A gentleman from Forrest Dennis Seniors Centre gave a wonderful review of this program during his reassessment and made great strides over the 12 weeks - Another client said "you do such a good job with the class, I absolutely love coming here <p>Note below from a Eds House resident's family</p>		

Dear Staff, Volunteers and Members

Do you know why you make such a significant difference to a loved ones "End of Life" journey?

I watched your gentle hands carefully touch my husband's shoulders and calm her nervous mind.

I watched as you spoke in quiet tones to reassure him that he was in a safe and nurturing environment and kept him free of pain.

I watched as you allowed him to surround himself with his favourite music all day and all night.

I watched you keep him in clean clothes (that you washed) and looking pretty cool in his matching gown and pillowcase.

I watched you offer family and visitors food and refreshments in comfortable settings - indoors and out.

I watched as you watched and I was moved by the commitment and tenderness of every dedicated staff member.

Ed's House is a remarkable place and I am grateful that my husband got to experience this wonderful and special care at his "End of Life" journey.

We need more places like Ed's House across our country.

A simple thank-you seems hardly enough, but we do indeed wish to express our sincere gratitude.

Sincerely and with grateful hearts.

The family of Clifford Brooks (July 4) — Norma Brooks, James Brooks & Jennifer McMurtry.





CommunityCare
NORTHUMBERLAND

SECTION:	Financial	POLICY:	Lottery Activities
DATE ISSUED:	July 10/2012	NUMBER:	F – 125
REVEIWED:	Jan/19, Nov/23		
REVISED:	Jan/16	NEXT REVIEW:	Nov. 2026

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 of 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.



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.

This policy will be shared with the Board of Directors and employees on a yearly basis.



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
CURRENT ASSETS	\$	\$
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
Total Current Assets	2,642,838	2,626,783
Property, Plant & Equip		
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
Total Property, Plant & Equip	7,062,257	7,178,735
Total Assets	9,705,094	9,805,518
LIABILITIES		
Current Liabilities		
Accounts payable and accrued liabilities	417,302	497,288
Emp Remittances	148,465	-907
Deferred grant revenue	819,347	808,929
Total Current Liabilities	1,385,113	1,305,310
Deferred Contributions	7,062,258	7,178,736
Long Term Liability		
Total LT Liabilities	7,062,258	7,178,736
Fund Balances		
Net Assets	1,257,723	1,321,471
Total Liabilities & Fund Balances	9,705,094	9,805,518

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
Total Revenue	465,934	3,069,920	2,950,225	119,695		2,888,176	5,900,451
Operating Expenses							
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
Total Expenses	477,973	3,068,659	2,950,226	118,433		3,002,700	5,900,451
Surplus or Deficit before Transfers	-12,039	1,261	-1	1,262		-114,524	0

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 11th. 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 1st. As well as there was a surplus recovery of \$13,550 for CSS which also occurred on the 1st 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.

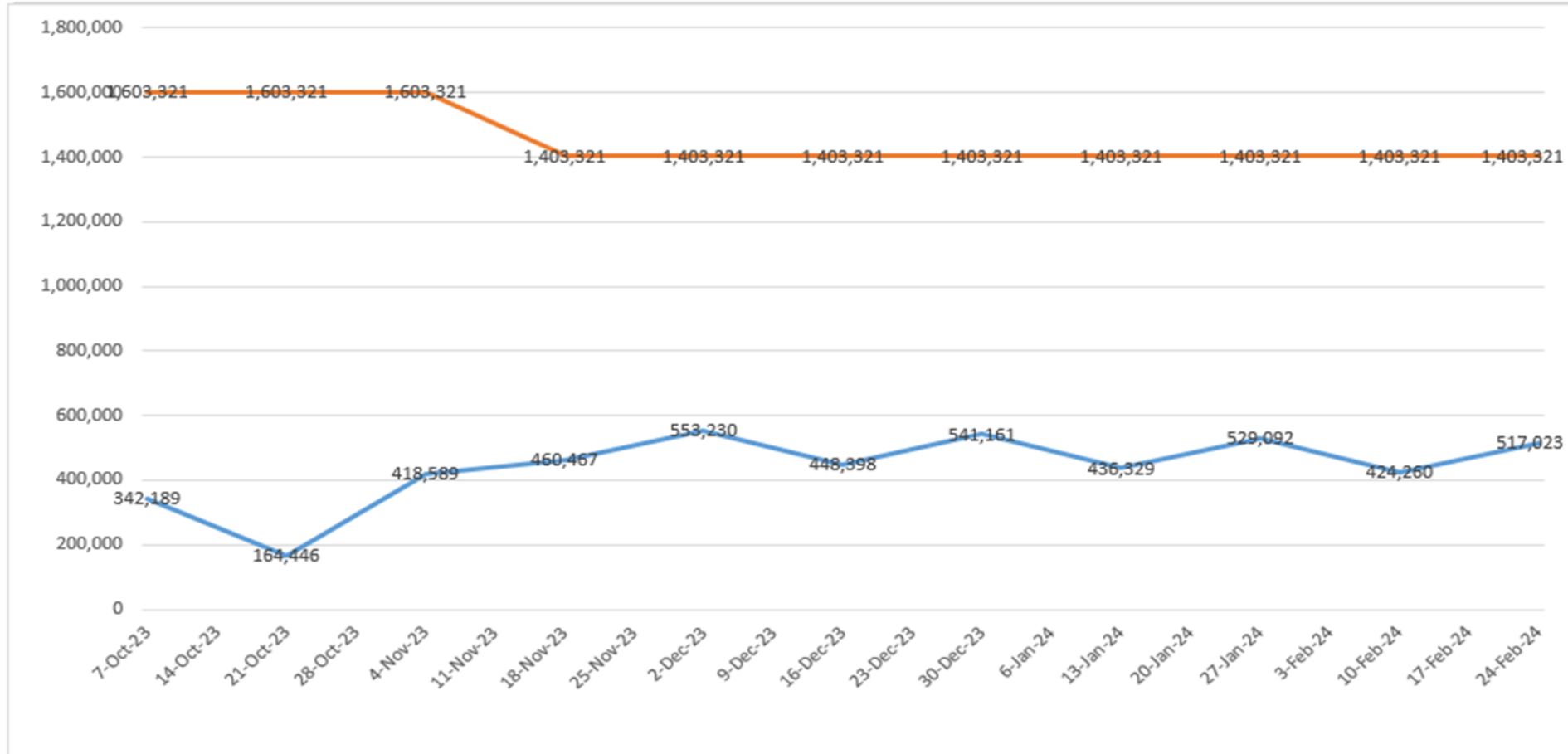
COMMUNITY CARE NORTHUMBERLAND

Hospice Services

For the Six Months Ending September 30, 2023

	PCCT	Hospice	Ed's House	TOTAL
Hospice Services				
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
Total Revenue	221,941	130,046	1,056,644	1,408,631
Operating Expenses				
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
Total Expenses	221,938	130,046	1,056,727	1,408,711
Surplus or Deficit before Transfers	3		(83)	(80)

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

SECTION:	Financial	POLICY:	Donor Recognition
DATE ISSUED:	July 9, 2001, Nov. 10, 2023	NUMBER:	F – 70
REVIEWED:	Jan/19		
REVISED:	Nov/17, Feb/19, Nov/23	NEXT REVIEW:	Nov. 2026

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.