

# Community Care Northumberland Board of Directors Meeting



**CommunityCare**  
NORTHUMBERLAND

**Friday, Sept. 29, 2023 – 10:00 am**

<https://us02web.zoom.us/j/83991934856>

Meeting ID: 839 9193 4856

Passcode: 629199

## **AGENDA**

<b>Item</b>	<b>Action</b>	<b>Lead</b>
<i>Board Education – Ethics and Governance</i>	Information	Josh
<i>Presenter – Josh Landry, Director &amp; Ethicist, Central East Regional Ethics Network</i>		
<b>1. CALL TO ORDER – Introduction of Board Members</b>		
1.1 Confirmation of Quorum	Motion	Jackie
1.2 Declaration of Conflict of Interest		Jackie
1.3 Approval of Consent Agenda		Jackie
1.4 Approval of Agenda		
<b>2. CONSENT AGENDA</b>		
<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>		
<b><u>Items:</u></b>		
2.1 Joint CCN/Foundation Board of Directors Minutes: August 16, 2023*	Motion	Jackie
2.2 Finance Committee Minutes: Sept. 15, 2023*		
2.3 Q1 Internal Controls*		
2.4 Updated Board Meeting Schedule & Committee Membership*		
<b>3. BUSINESS ARISING FROM MINUTES</b>		
3.1 Bed Expansion Update	Information	Trish
<b>4. BOARD BUSINESS/COMMITTEE MATTERS</b>		
4.1 Finance Committee – CCN Q1 Results*	Motion	Judy
4.1.1 - 2023/2024 MSAA (Multi-Service Accountability Agreement) Update*	Information	Trish
4.2 Strategic Plan Summary Report*	Motion	Trish
4.3 Foundation Update -	Information	Elaine
4.3.1. Relationship Agreement Memo & Agreement*	Motion	Trish
4.5 OHT-N Update/Advisory Council	Information	Trish/Jackie
<b>5. Motion to Terminate Meeting</b>		
Training with Tina – need more information on the Board portal? Stay behind and Tina will answer your questions.		

\*Indicates Attachments

**Next Regular Meeting: Monday, Oct. 27, 2023 – 10:00 am**

**Joint CCN/Ed's House Foundation Board of Directors Meeting Minutes**  
**Virtual Meeting – Wednesday, August 16, 2023 – 9:00 am**

**Present:** Elaine Azzopardi, Judy McLean, Cindy Anthony, Jessica Clarke, Sharron MacDonald, Tim Miller, Angela Grogan, Stephen Beauchamp, Selena Forsyth, Trish Baird, Tina Stephens, Sherry Gibson (Director, Hospice Services), Joel Scott (Director, Donor Relations)

**Regrets:** Jackie Gardner-Nix, Sharyl Ann Milligan, Tim Miller, Jaclyn Agueci (Treasurer, Ed's House Foundation)

<b>Topic</b>	<b>Discussion</b>	<b>Decision/Action</b>
<b>1.1 &amp; 1.2 Quorum &amp; Declaration of Conflict of Interest</b>	<p>The meeting was called to order by Elaine Azzopardi who welcomed everyone. There was a quorum present for both boards, and no conflicts of interest were declared.</p> <p>Welcome to our newest Board member, Angela Grogan, was extended and introductions of meeting members was made.</p>	No conflicts were declared.
<b>1.3. Approval of Agenda</b>	Approval of Agenda	<p>Motion by: Cindy Anthony to approve the agenda.</p> <p>2nd by: Jessica Clarke Carried.</p>
<b>2.1. Board Business/ Committee Matters</b>	<p>2.1 Ed's House 4 Bed Completion Discussion</p> <p>Trish led the Boards through a high-level report on Capital and Operating Cost – Completion of 4 Beds @ Ed's House. The report outlined the future operating costs of a 10 bed hospice, overall construction costs to complete the project and the capacity of the Foundation to take on a new Capital Campaign. Discussion and Q&amp;A's ensued.</p> <p>Board members expressed their support in opening the 4 suites and the identified need this will meet in the community.</p> <p>The Board expressed confidence in re-engaging original building Architects, BBA (Barry Bryan Associates) and builder, Dalren Limited, to complete this project.</p> <p>A Capital Campaign Strategic Outline report was circulated by Donor Relations Director, Joel Scott. Taking all the information outlined in the report, the Foundation Board felt confident that a Campaign with clear objectives tied to the completion of 4 suites at Ed's</p>	<p>Motion by CCN Board member Selena Forsyth: to move forward with the 4-suite completion in partnership with Ed's House Foundation.</p> <p>2nd by: Judy McLean Carried.</p> <p>Motion by CCN Board Member Sharron Macdonald: to approve the completion of the 4 suites enlisting the services of original Architects, BBA (Barry Bryan Associates) and builder, Dalren Limited.</p> <p>2nd by: Judy McLean Carried</p>

	<p>House is obtainable. There is still work to be done to solidify fundraising goals and marketing strategies, but the Foundation Board was comfortable moving forward. The Foundation Board will meet to identify a campaign target and timelines for public release of this information.</p> <p>CCN staff will keep both boards up to date on progress with regards to the Architects and builders to confirm timelines and costs moving forward.</p>	<p>Motion by Ed's House Foundation Chair Lynn Hardy: to move forward with a Capital Campaign to meet the financial requirements of the completion of 4 suites at Ed's House. 2nd by: Elaine Azzopardi Carried.</p>
<b>3.1 Termination</b>		Motion by: Selena Forsyth

## 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</p> <p>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</p> <p>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. MSAA 2023/2024</b>	<p>4. MSAA 2023/2024 Updates</p> <p>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**

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## INTERNAL CONTROLS/RISK MANAGEMENT

### Quarterly Reporting of Remittances April 1, 2023 – June 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:**



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Adam Kolisnyk  
CFO  
Campbellford Memorial Hospital



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Trish Baird (Sep 8, 2023 15:24 EDT)

Trish Baird  
Chief Executive Officer  
Community Care Northumberland



**Community Care**  
NORTHUMBERLAND

**BOARD MEETING SCHEDULE**

**September 2023 – June 2024**

<b>Friday, Sept. 29, 2023</b>	Zoom
Friday, Oct. 27, 2023	Zoom
Friday, Nov. 24, 2023	In Person/Xmas lunch *Location TBD
Friday, Dec. 15, 2023	<b>(if required)</b>
Friday, Jan. 26, 2024	Zoom
Friday, Feb. 23, 2024	Zoom
Friday, Mar. 22, 2024	In Person – Location TBD
Friday, April 26, 2024	Zoom
<b>Friday, May 31, 2024</b>	Zoom
June Board Meeting TBD	Zoom
June 2024 TBD	Annual General Meeting/In Person

**Board meetings are held on the 4<sup>th</sup> Friday of every month.**

**All meetings will begin at 10:00 am.**

**\*Please note** – Meetings for **Sept. 29<sup>th</sup>** & **May 31<sup>st</sup>** are the **5<sup>th</sup> Friday** of the month as Trish is away on the 4<sup>th</sup> Friday of these months.

**\*All in person meetings will have a virtual option.**



# Community Care

## NORTHUMBERLAND

### Committee Membership 2023/2024

EXECUTIVE	GOVERNANCE	FINANCE	FUNDRAISING	FOUNDATION
Jackie Gardner-Nix - <i>Chair</i>	Elaine Azzopardi - <i>Chair</i>	Judy McLean - <i>Chair</i>	Selena Forsyth – <i>Chair</i>	Lynn Hardy - <i>Chair</i>
Elaine Azzopardi – <i>Vice Chair</i>	Stephen Beauchamp	Tim Miller	Sharyl Ann Milligan	Elaine Azzopardi – <i>Vice Chair</i>
Judy McLean - <i>Treasurer</i>	Jessica Clarke	Stephen Beauchamp	Sharron MacDonald	Jaclyn Agueci - <i>Treasurer</i>
	Cindy Anthony	Jackie Gardner-Nix	Jackie Gardner-Nix	Stephen Beauchamp
		Angela Grogan	Sarah Turck (Community Member)	Cindy Anthony
		Donna Moulton (Community Member)		



## Finance Committee Agenda - Item 4. MSAA 2023-2023 Updates

This brief report outlines changes and additions we have received from our funders for the fiscal year 2023-24

### Ontario Health

We have an Multi Service Accountability Agreement (MSAA) with Ontario Health which funds all of our program activity classified under the 'Community Support Sector - CSS' & 'Palliative Care - PALC' including;

- Administration and Support Services
- Meals Delivery (Meals on Wheels)
- Service Arrangement/Coordination (Home Help and Home Maintenance)
- Case Management (Coordination costs for our Home First & Home at Last Programs)
- Social and Congregate Dining (Diners Clubs, Exercise and Falls Prevention Classes)
- Transportation (Volunteer and Specialized Transportation)
- Personal Support & Respite Services (Personal Support Worker in Home at Last and Home First Programs)
- Caregiver Support Programs
- Visiting – Social and Safety (Friendly visiting & Telephone Reassurance Checks)
- Visiting – Hospice Services (Volunteer Hospice Visiting program & Palliative Care Community Team)
- Support Service Training (Volunteer Peer Support Program & some Volunteer Management programming)

Base Funding 2023-24 \$1,963,980 (includes PSW wage enhancement-\$4,648)

One Time Funding 2023-24 \$ 84,670

**Health Service Provider (HSP):** Community Care Northumberland

**HSP Integrated Financial Information System (IFIS) Number:** 100346

**Project/Program Name:** 2023-24 Community Services 3% One-time Increase

Transfer Payment Business Entity (TPBE)	Fiscal Year	A	B	C	D=B+C	E=A+D	Project/Program Description/Purpose
		3% One-time Funding	One-time Meals Allocation	3% One-time Meals Allocation	SUBTOTAL of Meals Allocations	TOTAL	
Community Support Services (CSS)	2023/24	\$52,932	\$25,000	\$750	\$25,750	\$78,682	2023-24 Community Services 3% Increase including Meals funding
Palliative Care (PALC)	2023/24	\$5,988	-	-	-	\$5,988	
<b>Total Allocation</b>		<b>\$58,920</b>	<b>\$25,000</b>	<b>\$750</b>	<b>\$25,750</b>	<b>\$84,670</b>	

### Home and Community Care Support Services Central East

We have a service agreement with HCCSS to help fund the operations of the hospice residence. Details of what that funding covers was included in last months Board meeting if more detail is required.

Base Funding 2023-24 \$630,000 (stagnant since opening the residence)

One Time Funding 2023-24 \$283,800 (guaranteed for 24-25)

# Strategic Plan Summary Report

August 31, 2023

## Introduction

After a thorough strategic planning process consisting of stakeholder engagement and valuable Board discussions, we presented the Board of Directors with the draft strategic plan for Community Care Northumberland!

The draft was presented through an online survey to gather feedback for each strategic direction outlined in the strategic plan. This survey included a summary of each direction's impact statement and commitments and an opportunity to offer feedback on drafted mission, vision, and values options.

The survey was available to Directors from July 25 until August 15, 2023. A total of 11 responses were collected and used to represent the Board's feedback regarding the various components presented. The results are outlined below for your consideration.

Please contact me if you have any questions. I look forward to our continued work together.

Sincerely,

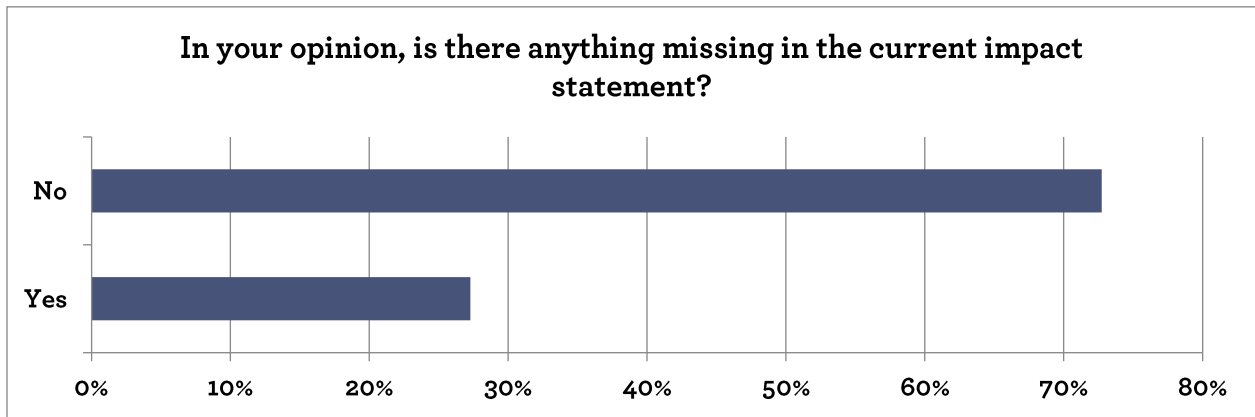


Danielle Rocheleau, CEO  
Laridae

# 1. Strategic Direction: Reenergized capacity, rejuvenated culture

## Impact Statement

By 2027, we will have implemented strategies to strengthen our staff and volunteer capacity, refresh our workplace culture, and enable financial flexibility for intentionally investing in and maintaining a healthy organization.

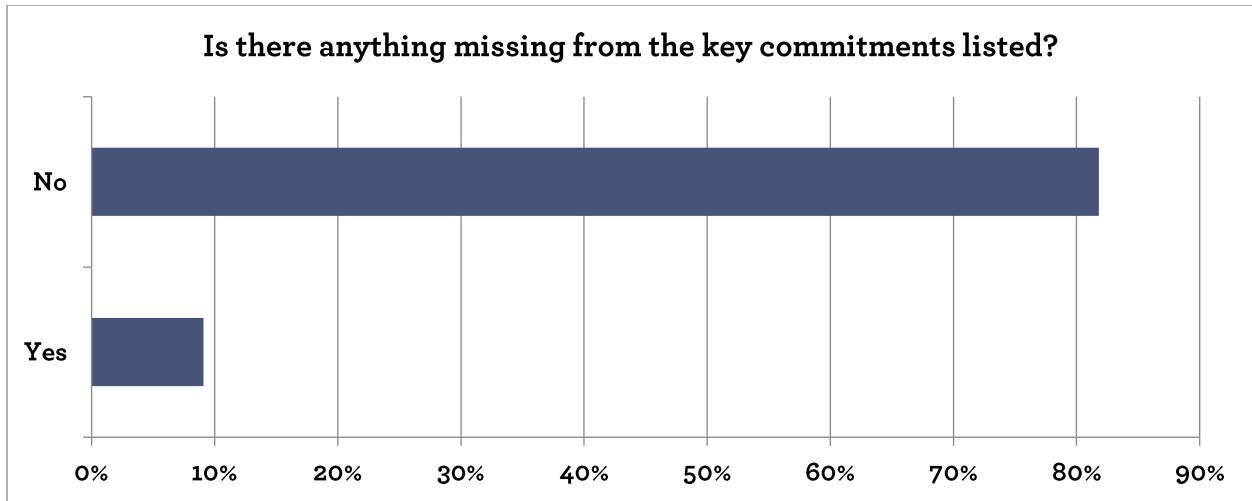


## Comments

Our current funding and donations doesn't allow us to be Financially flexible. There is a difference between that and financial stability.
Reference to OHRT code and ADOA standards
Yes: increasing our reach to those who need our services but are unaware of them

The following commitments were identified as priorities for the organization over the next 3 years:

- Reinforcing our staff and volunteer capacity through renewed strategies for attracting and retaining great people.
- Prioritizing health succession across all core roles.
- Driving fundraising strategies to promote financial stability.



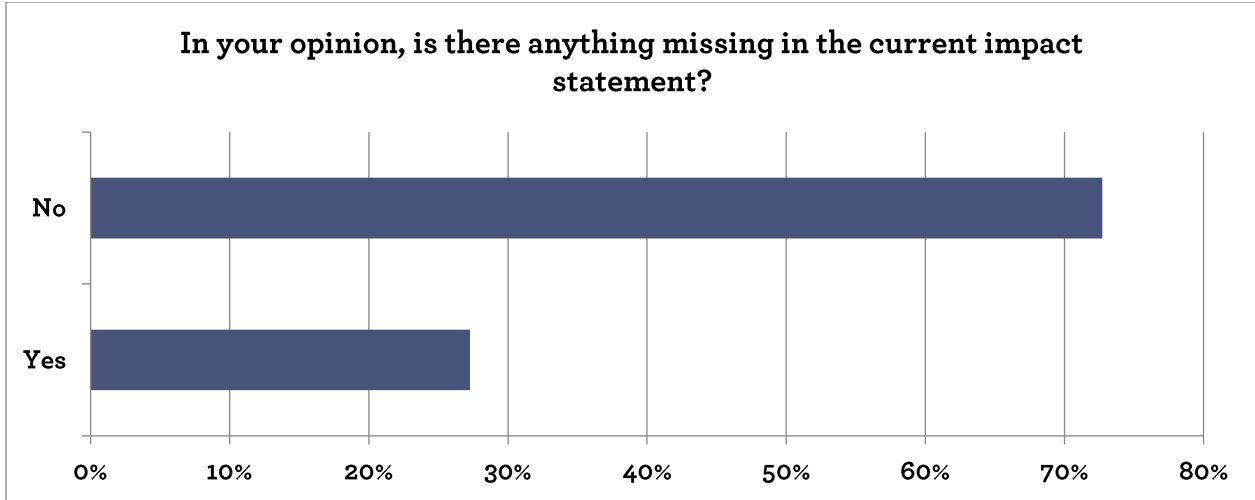
Comments

Brand recognition throughout the County
Renewed strategies must include updating salaries!

## 2. Strategic Direction: Cohesive identity, empowered community

### Impact Statement

By 2027, we will have enhanced our brand across Northumberland, built a strong network of champions, and increased awareness of the breadth of services and programs we offer to all age groups.

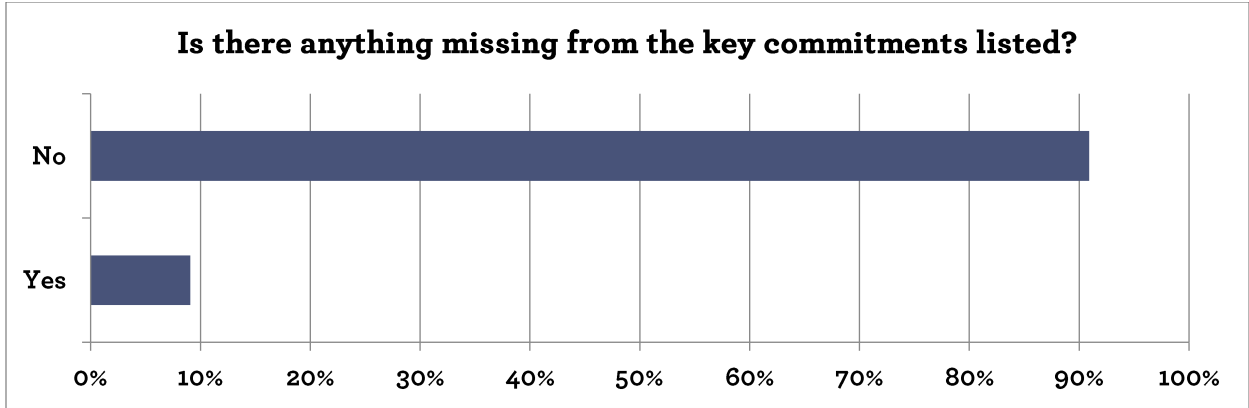


**Comments**

Rather than say enable, I would say “ continue to promote our brand across Northumberland, building a strong network of champions....
Reference to OHRT code and AODA standards
The goal is correct to me but not defined. How do we define increased awareness? What is a strong network champion? How can we measure brand enhancement? Should we include specifics in this statement?

The following commitments were identified as priorities for the organization over the next three years:

- Building a cohesive brand that supports our healthy reputation and increases our visibility across our community.
- Increasing community awareness through ongoing outreach and reciprocal relationships.
- Empowering our team and supporters with the information and tools to be champions.



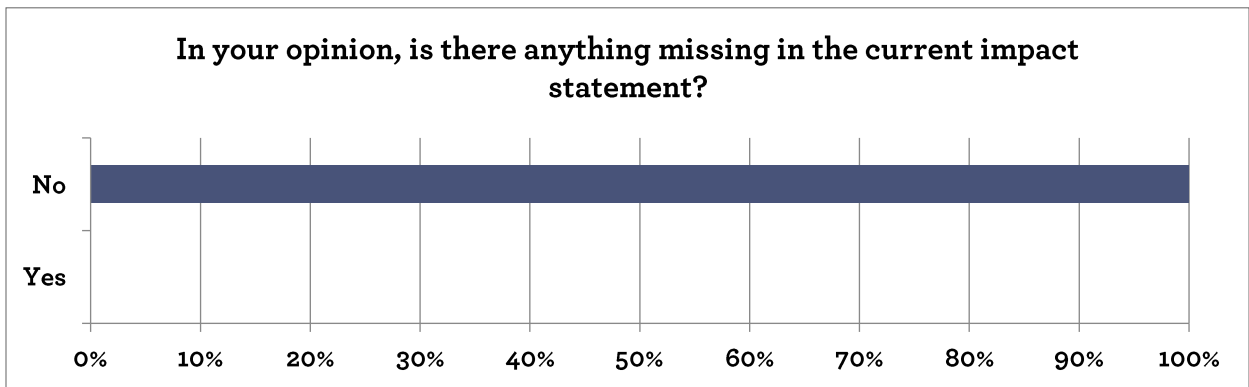
Comments

For the first 2 points, same as above ...do we want to define specifics?

### 3. Strategic Direction: Accessible programs, quality services

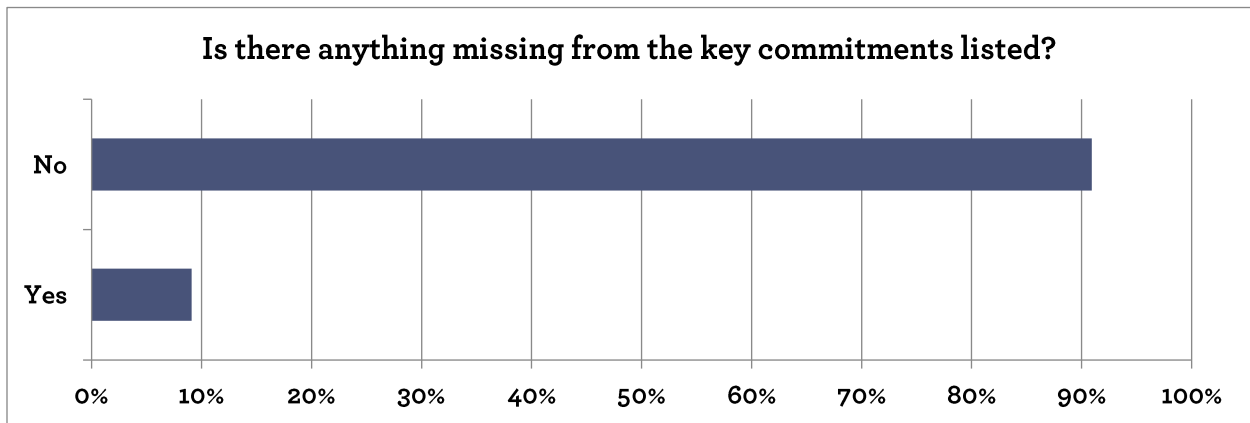
Impact Statement

By 2027, we will have effectively implemented meaningful changes to our programs and services through consistency, continuous improvement, and being an active community partner.



The following commitments were identified as priorities for the organization over the next three years:

- Focusing on the effective implementation of recent enhancements to service delivery.
- Collaborating across our community to streamline access to service.
- Modelling effective, engaging volunteer management practices.



**Comments**

Review of programs to ensure they are still relevant to the community and not being offered by other agencies.

## 4. Mission Statement

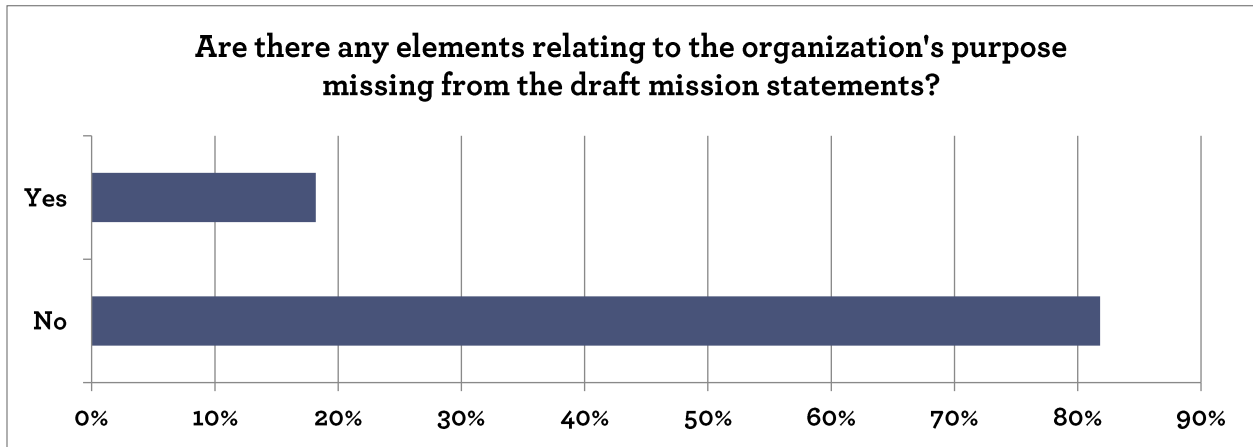
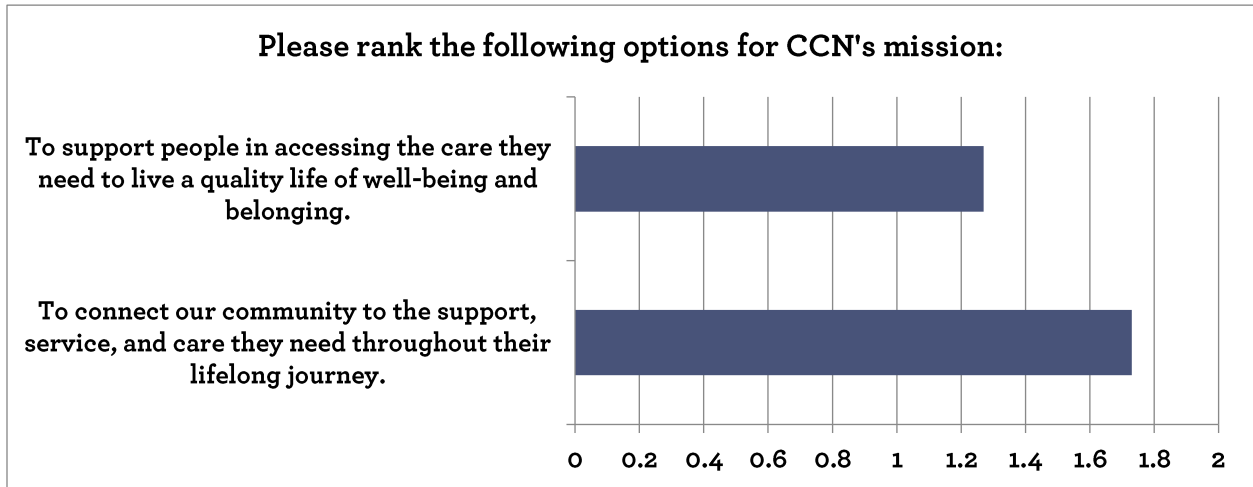
### 4.1. Options

Community Care Northumberland’s mission is:

- To connect our community to the support, service, and care they need throughout their lifelong journey.
- To support people in accessing the care they need to live a quality life of well-being and belonging.



## 4.2. Results



### Comments

# 2 does not speak to hospice services, especially end-of-life care offered at Ed's House.

If the 2nd draft is chosen, I don't believe it reflects the Hospice side.

## 5. Vision Statement

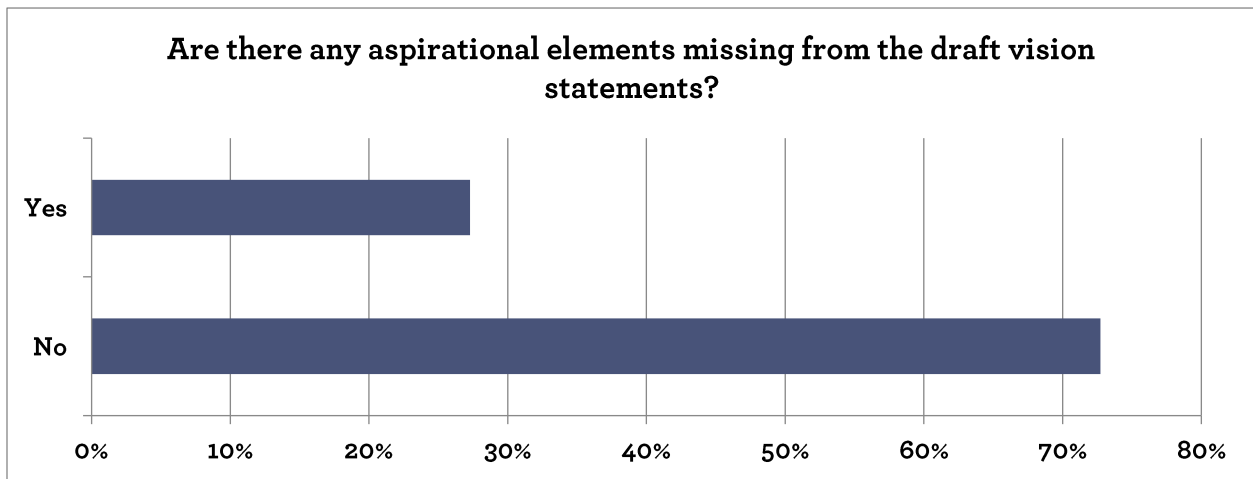
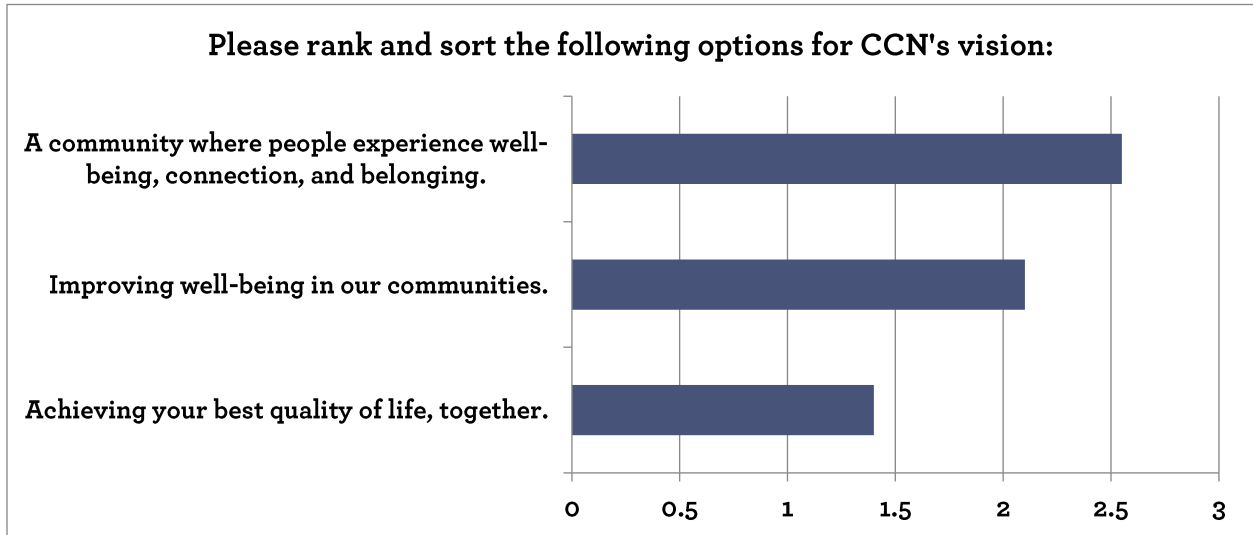
### 5.1. Options

- Improving well-being for people in our communities.
- A community where people experience well-being, connection and belonging.



- Achieving your best quality of life, together.

## 5.2. Results



### Comments

Provide support, service, and connection.

Aside from one statement that I ranked as #1, in my opinion, these do not speak to end-of-life care offered at Ed's House.

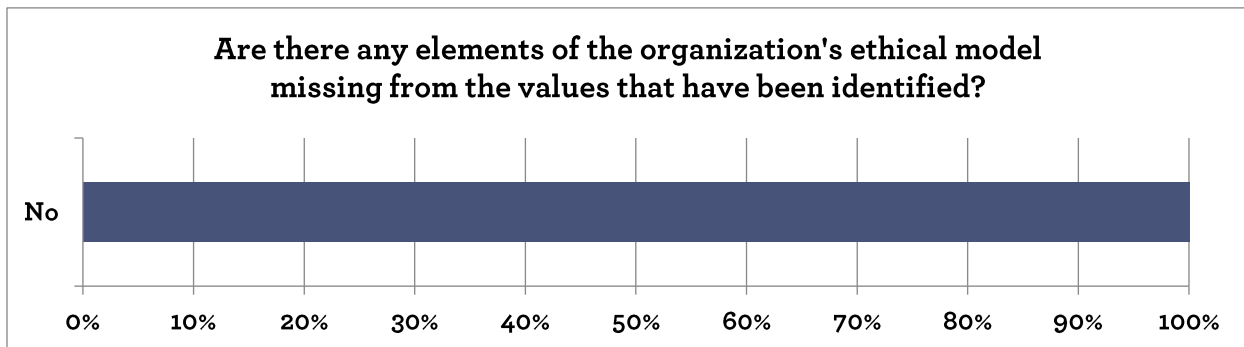
Again, not sure if what we do in our Hospice Services is reflected

## 6. Values

### 6.1. Options

- **Relationships:** we enter each conversation with care, ensuring equity, respect, and reciprocity.
- **Accountability:** we approach our work with integrity while balancing the voices of our funders, people, and community.
- **Community:** we are generous partners; together, we celebrate the strengths and respond to the needs of our community.
- **Compassion:** we deliver meaningful service supporting dignity and belonging through empathy, collaboration, and inclusivity.

### 6.2. Results



**Memo: August 1, 2023**

**TO: CCN Board of Directors & Ed's House Foundation Board of Directors**

**RE: Relationship Agreement between CCN & The Foundation.**

As a final step with finalizing the Relationship Agreement I met virtually with Sarah Jacob to discuss some final legal questions raised by both boards. In this memo I will try and summarize the comments from that conversation.

Sarah connected with CRA regarding the 'purpose' of the Foundation (paragraph 1.0) as she questioned it being so broad in nature when the name of the Foundation is very specific to the charity it supports. CRA reassured her that they are fine with the broad nature of the purposes even though the name of the Foundation is so specific. CRA prefers that the 'purpose' of the charity is kept broad.

### **Conflict of Interest**

Sarah did not feel the conflict-of-interest questions that arose were a problem at this point in time. Sarah felt that the fact we have a relationship agreement clearly identifies that both Boards are aligned and have purposely thought about their perceived and/or potential conflicts of interest and have identified those areas. She felt this was proactive approach and that we should not feel the cross representation of Board and staff was too much of a conflict of interest.

Both Boards have a Code of Conduct and Conflict of Interest policies which would guide the decisions during the meetings.

### **Point of View of the Donor**

Sarah brought up an excellent point in our discussion by looking at the relationship agreement from the point of view of a donor. A donor would see that by sharing services across two charities that this is an excellent use of resources. She also felt that having the shared role of CEO and other shared staff that this should continue until the work load changes and would be viewed as a good news story. Sarah felt there was nothing in the agreement that we should not be able to share with Donors if they asked.

### **Insurance**

Sarah did agree that the Foundation should be added as an endorsement to the insurance.

Below is a copy of the questions I sent to SMM Law. Yellow highlights were sections from the agreement. Green highlight is the final recommendation regarding the agreement.

This will be presented to the Foundation on August 8<sup>th</sup> at their Board meeting and the September CCN Board meeting.

Trish

### **Question 1**

Page 2

Section 1.0 – point f)

“Despite the lack of legal obligation imposed by this Agreement, the Boards have given proper consideration to, and agree to act in good faith in accordance with, its terms.”

Original Question – I think the general question is does this give the agreement any weight at all or is there any legal obligation or risks with this agreement?

**ANSWER – Sarah felt this was appropriate to say this in the agreement.**

## Question 2

Page 4

Section 3.0 – point b)

There will be cross-representation between the two Boards by having members of the CCN Board appointed to the Foundation Board on a regular basis. Currently, three (3) members of the Foundation Board are appointed from the CCN Board.

Original Question – Currently the foundation By-Laws are set up this way with the membership of the Board being 5 Directors (3 appointed from CCN and 2 elected from the community). Is this a direct conflict of interest and if so what is our best course of action to address it? Are there any risks that need to be address? How does this affect the autonomy of the Foundation? How do the appointed Directors deal with the inherent conflict of interest? Is this membership is problematic?

**ANSWER – See Conflict of Interest at beginning**

## Question 3

Page 4

Section 4.0 – point 4.1 a)

The CEO of CCN will act as the CEO of the Foundation. The CCN Director of Donor Relations and Communications will act on behalf of CCN and the Foundation. Other human resource support will be provided through staff employed at CCN. The Foundation may hire, on contract or other means, human resource support to complete specific functions required to meet their needs.

Question – Similar to area 2 above the question the Board is wondering if having the CEO and others act as the employees of both Corporations is this too much of a conflict of interest? With the sharing of the CEO and the three Board members (as above) should the two organizations be working towards operating “at arms length”, operating independently and without any undue influence over the decisions made by either board.

**ANSWER – See Conflict of Interest paragraph at beginning**

Lastly,

In light of the questions above regarding Conflict of Interest, should we have a Transitional Plan, one that would provide assistance to the foundation board until they can operate independently?

**ANSWER – Did not feel this was necessary. SMM Law will be looking at the Foundation By-Laws in the future to ensure they meet ONCA regulations and make any other suggestions around membership.**

**In conclusion, Sarah felt the agreement is ready for signature with a fully executed copy kept in the official minute book of both charities.**

## RELATIONSHIP AGREEMENT

between

**Community Care Northumberland**

("CCN")

and

**Ed's House Northumberland Hospice Care Centre Foundation**

(the "Foundation")

(each, a "Party", and collectively, the "Parties")

### DEFINITIONS SECTION

- I. "Agreement" means this relationship agreement, dated June 30, 2023.
- II. "Boards", collectively, means the boards of directors of Community Care Northumberland and Ed's House Northumberland Hospice Care Centre Foundation.
- III. "CCN" means Community Care Northumberland, a not-for-profit corporation incorporated under the laws of the Province of Ontario.
- IV. "CCN Board" means the board of directors of Community Care Northumberland.
- V. "CEO" means the Chief Executive Officer of Community Care Northumberland, who shall, in accordance with section 4.1(a), also be the Chief Executive Officer of Ed's House Northumberland Hospice Care Centre Foundation.
- VI. "Foundation" means Ed's House Northumberland Hospice Care Centre Foundation, a not-for-profit corporation incorporated under the laws of the Province of Ontario.
- VII. "Foundation Board" means the board of directors of Ed's House Northumberland Hospice Care Centre Foundation.
- VIII. "Hospice Services" means the Hospice Palliative Care programs administered by Community Care Northumberland, including community-based hospice programs, the hospice residence known as Ed's House, and all educational and special projects associated with same.
- IX. "Operational Requirements" means the costs associated with the provision of the Hospice Services, including the costs of renovations, equipment, upgrades, and maintenance of the facilities in which the Hospice Services are provided.

### 1.0 PURPOSE AND SHARED UNDERSTANDING

CCN operates a full spectrum of community services and programming, including Hospice Palliative Care programs, community-based hospice programs, grief and bereavement services, and a 10-bed hospice residence (currently consisting of 6 operational beds and 4 unfinished suites) for end-of-life care;

The Foundation has been created to act as a Public Foundation to receive and maintain a fund or funds and to apply all or part of the principal and income therefrom, from time to time, to charitable organizations that are also registered charities under the *Income Tax Act* (Canada);

The Foundation has determined that among the services and programs offered through CCN, the Hospice Services closely align with the charitable corporate objectives of the Foundation.

Therefore, CCN and the Foundation are entering into this Agreement with the following purpose and shared understanding:

- a) The purpose of the Agreement is:
  - i) to provide a framework within which the Parties will work together to foster ongoing philanthropy in our community that assists CCN in meeting its Operational Requirements; and
  - ii) to clarify the respective roles and responsibilities of the Parties and their Boards of Directors in the advancement of philanthropic support for the Hospice Services.
- b) The Boards acknowledge that CCN faces many needs and opportunities and must prioritize such needs and opportunities within the context of local, regional and provincial priorities, CCN's specific mandate, the health needs of the community, and the availability of funding.
- c) The Boards understand that they are required to raise philanthropic funds (donations, bequests, and proceeds from special events) in support of the Operational Requirements.
- d) The Boards understand that philanthropic donors have many choices as to where to invest their gifts.
- e) The Boards also recognize a shared accountability to create a welcoming and rewarding environment for philanthropy at CCN.
- f) Despite the lack of legal obligation imposed by this Agreement, the Boards have given proper consideration to, and agree to act in good faith in accordance with, its terms.

## **2.0 ROLES AND RESPONSIBILITIES**

### **2.1 Identifying Priorities For The Use Of Philanthropic Funds**

- a) The CCN Board has responsibility for establishing the strategic direction of the Hospice Services as part of their regular Strategic Planning responsibility. The strategic plan and operational objectives of the Hospice Services will be shared on an annual basis with the Foundation.
- b) The CCN Board shall seek the support of the Foundation for those projects and purposes related to the Operational Requirements.
- c) The Foundation chairperson or designate, along with relevant staff, will participate in the development of the CCN's annual priority list specific to the Hospice Services. This list and funding request shall be made available to the Foundation Board in the third

quarter of the prior year.

## **2.2 Setting Fundraising Goals For The Use Of Philanthropic Funds**

- a) The Foundation Board has responsibility for setting and striving to meet ambitious yet achievable goals for the philanthropic support of the Operational Requirements.
- b) The Foundation Board will review CCN's identified priorities and will support those projects aligned with the Foundation's charitable corporate objectives, within the capacity of the Foundation, and with the interests of the philanthropic donor community. A report will be provided to the CCN Board following this review outlining the potential funding availability for the projects on an annual basis.

## **2.3 Accountability for the Application of Philanthropic Funds**

- a) The Foundation shall raise funds to support CCN as their highest priority. The Foundation may, from time to time, work with another charity or service organization in the joint pursuit of funds.
- b) The Foundation is responsible for the control and management of all assets of the Foundation, including prudent management of all gifts consistent with donor intent.
- c) When transferring funds to CCN, the Foundation shall clearly indicate any restrictions, limitations or designations attached to the transferred funds. It shall be the responsibility of CCN to honour such donor intent.
- d) It shall be the responsibility of the Foundation to seek CCN approval before accepting donations restricted to purposes that are not consistent with CCN's priorities.
- e) CCN may refuse gifts of equipment or property that are not needed or cannot be used by CCN to advance the provision of the Hospice Services.

## **2.4 Source of Philanthropic Funds**

- a) The Foundation shall be the principal agent of CCN in soliciting and managing charitable donations in support of the Hospice Services. All donations from individuals, corporations, service organizations, registered charities, groups and estates for the purposes of the Hospice Services will be received by and receipted by the Foundation.
- b) CCN will be the principal agent in soliciting and managing charitable donations in support of all other programs and services under its mandate.
- c) If a donation is received in support of both Parties, a recommendation will be provided to the Boards for approval on the designation of those funds.



- d) Registered charities, community groups, or individuals wishing to raise funds in support of the Hospice Services or using the name of either Party in the course of raising such funds will be referred to the Foundation to seek approval and guidance for such actions. This paragraph is intended to ensure consistent messaging within the community, completeness of donor records, and consistency in donor recognition.

## **2.5 Sharing of Information**

- a) Except for client, resident, donor, and personal information, the Parties agree to provide each other, on a timely basis, with full disclosure as it relates to the Hospice Services' strategic plans, forecasts and budgets, current financial position, and related progress reports, including the use of philanthropic funds.
- b) The use of this shared information shall be governed by the respective Codes of Conduct, Confidentiality Agreements, and Privacy Policies of each of the Parties.

## **3.0 COMMUNICATIONS**

- a) The Boards are committed to open and transparent communication and cooperation.
- b) There will be cross-representation between the two Boards by having members of the CCN Board appointed to the Foundation Board on a regular basis. Currently, three (3) members of the Foundation Board are appointed from the CCN Board.
- c) There shall be at least one (1) joint gathering of the CCN and Foundation Boards each year to share progress related to the Hospice Services and to discuss any other business of common interest to the Boards.
- d) The Chairs and Vice Chairs of the Boards, along with the CEO, shall meet jointly at least once a year to review CCN's long-term priorities.

## **4.0 SHARED SERVICES**

### **4.1 Human Resources Support**

- a) The CEO of CCN will act as the CEO of the Foundation. The CCN Director of Donor Relations and Communications will act on behalf of CCN and the Foundation. Other human resource support will be provided through staff employed at CCN. The Foundation may hire, on contract or other means, human resource support to complete specific functions required to meet their needs.

### **4.2 Infrastructure Support**

- a) CCN shall provide the Foundation with infrastructure support including but not limited to office and storage space within CCN, utilities, information technology services, server data

storage, and environmental services.

#### **4.3 Insurance Coverage**

- a) The liability insurance policy purchased by CCN for the CCN Board and staff shall also provide coverage for the Foundation Board and its staff and volunteers, including but not limited to property and casualty insurance, and Directors' and Officers' Liability Insurance. This coverage will be explicitly recorded on the insurance policy documents.

#### **4.4 Donor Events, Visits and Solicitation Calls**

- a) The CEO and the CCN Director of Donor Relations and Communications shall be available to the Foundation on reasonable notice for donor events, visits and solicitation calls. Other senior CCN leadership may be available on reasonable notice for periodic donor stewardship activities.
- b) The Parties will develop a joint communications strategy, subject to the approval of the Boards, to provide consistent messaging within CCN and the community at large with respect to CCN's needs for philanthropic support from the community for the ongoing provision of the Hospice Services.

#### **4.5 Service Agreement**

- a) A service agreement will be created to cover, at a reasonable cost, the Hospice Services and any other services that may be delivered by CCN on behalf of the Foundation. This agreement will be reviewed annually.

### **5.0 DISPUTE RESOLUTION**

- a) Each Party will use its best efforts to resolve issues and disputes by clearly articulating expectations, establishing clear lines of communication, and respecting each Party's interests.
- b) The Parties will use their best efforts to resolve any issues and disputes that might arise in a collaborative manner, at the earliest possible stage, through informal discussion and resolution.
- c) Any issues or disputes will be raised at regular meetings of the CEO and Board Chairs. The CEO may bring an issue or dispute to the Board Chairs at any time.
- d) If there are material issues or disputes that cannot be resolved, the CEO will develop a written statement describing the facts and events leading to the issue or dispute and listing potential options for resolution.

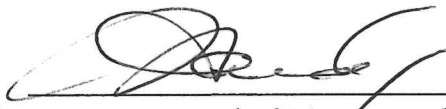
- e) If the issue or dispute cannot be resolved by the Board Chairs, then the Board Chairs will refer the issue or dispute to their respective Boards and/or Governance Committees. The Board Chairs will be expected to resolve the issue or dispute in an efficient and expeditious way that respects the objectives set out above.

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Chairperson, Board of Directors of Community Care Northumberland

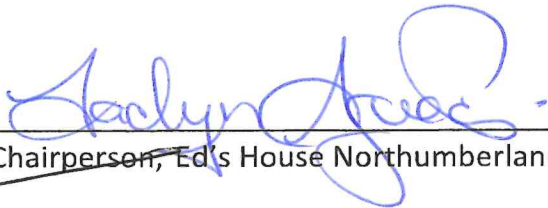
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CEO, Community Care Northumberland



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Chairperson, Board of Directors of Ed's House Northumberland Hospice Care Centre Foundation



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Vice Chairperson, Ed's House Northumberland Hospice Care Centre Foundation



TREASURER,



**Community Care**  
NORTHUMBERLAND

Q1 Financial Report

For the period ending June 30, 2023

# Statement of Financial Position

April 1, 2023 to June 30, 2023

## COMMUNITY CARE NORTHUMBERLAND

### Statement of Financial Position

For the Three Months Ending June 30, 2023

	June 30, 2023	March 31, 2023
<b>CURRENT ASSETS</b>	\$	\$
Cash and Bank	1,909,516	1,836,322
Accounts Receivable	604,948	725,711
Prepaid Insurance & Expenses	21,823	38,579
Investments	90,496	76,873
<b>Total Current Assets</b>	<b>2,626,783</b>	<b>2,677,485</b>
<b>Property, Plant &amp; Equip</b>		
Land	236,188	236,188
Equipment	273,308	282,840
Leasehold Improvements	5,571	6,163
Building	6,556,376	6,651,858
Vehicle	107,291	118,166
<b>Total Property, Plant &amp; Equip</b>	<b>7,178,735</b>	<b>7,295,214</b>
<b>Total Assets</b>	<b>9,805,518</b>	<b>9,972,699</b>
<b>LIABILITIES</b>		
<b>CURRENT LIABILITIES</b>		
Accounts Payable	497,288	500,546
Emp Remittances	(907)	(42,944)
Deferred grant revenue	808,929	962,244
<b>Total Current Liabilities</b>	<b>1,305,310</b>	<b>1,419,847</b>
Deferred Contributions	7,178,736	7,295,215
Long term Liability		
<b>Total LT Liabilities</b>	<b>7,178,736</b>	<b>7,295,215</b>
<b>FUND BALANCES</b>		
Net Assets	1,321,471	1,257,638
	<b>1,321,471</b>	<b>1,257,638</b>
<b>Total Liabilities &amp; Fund Balances</b>	<b>9,805,518</b>	<b>9,972,699</b>

# Statement of Operations

April 1, 2023 to June 30, 2023

**Community Care Northumberland**  
For the Three Months Ending June 30, 2023

	CURRENT June	YTD Actual	YTD Budget	YTD Variance	PY YTD Actual	Annual Budget
<b>Community Care Northumberland</b>						
Funding- LHIN	214,120	697,844	647,897	49,947	638,616	2,591,587
Funding- LHIN - One time	0	0	0	0	36,527	0
Client fee recoveries	73,186	220,905	225,009	-4,104	179,559	900,034
Fundraising	23,002	37,092	58,126	-21,034	106,459	232,503
Donations	163,998	355,058	360,573	-5,515	229,228	1,442,291
Grants	110,736	186,405	74,835	111,570	81,307	299,340
Interest income/loss	12,472	35,516	4,500	31,016	7,348	18,000
Amortization of Capital Contribution	38,826	116,479	104,174	12,305	108,776	416,696
Other revenue	1,125	1,125	0	1,125	4,646	0
<b>Total Revenue</b>	<b>637,465</b>	<b>1,650,424</b>	<b>1,475,113</b>	<b>175,311</b>	<b>1,392,466</b>	<b>5,900,451</b>
<b>Operating Expenses</b>						
Salaries, Wages & Benefits	324,267	975,621	942,215	33,407	941,417	3,768,858
Medical Staffing	5,144	15,355	17,950	-2,595	15,316	71,800
Supplies	53,204	142,475	134,311	8,164	111,217	537,245
General Sundry	23,060	70,752	62,107	8,646	60,377	248,426
Travel - Staff & Service Delivery	34,916	88,838	84,656	4,183	86,923	338,622
Professional fees	17,919	52,644	47,144	5,500	46,014	188,575
Volunteer Recognition	233	2,170	2,438	-268	1,146	9,750
Fundraising	12,304	22,197	5,375	16,822	30,111	21,500
Equipment Maintenance/Purchase	17,119	37,989	16,308	21,681	31,529	65,233
Amortization of Capital Assets	38,826	116,479	103,442	13,038	108,776	413,766
Contracted Out Services	6,781	23,525	16,532	6,994	30,130	66,126
Occupancy - Rent/Lease/Taxes	14,173	41,508	42,638	-1,130	43,794	170,550
<b>Total Expenses</b>	<b>547,946</b>	<b>1,589,553</b>	<b>1,475,113</b>	<b>114,440</b>	<b>1,506,750</b>	<b>5,900,451</b>
<b>Surplus (Deficit)</b>	<b>89,519</b>	<b>60,871</b>	<b>0</b>	<b>60,871</b>	<b>-114,284</b>	<b>0</b>

## Notes Regarding the Statement of Operations

**Ontario Health Funding** – In May, CCN received 2 deposits for \$52,500, one being on the 1<sup>st</sup> and the other being on the 31<sup>st</sup>. This is suspected to be caused by timing.

Additional One-Time funding was confirmed in June for \$47,300 per bed for a total of \$283,000 that was received as a lump sum on August 11<sup>th</sup>.

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

**Grants -** \$45,800 received in June from the Campbellford Seymour Community Foundation as a Service Recovery Grant.

**Salaries & benefits** – First Quarter salaries are more than last year due to an increase mainly in the Hospice services area, more specifically Eds House. The increase across all programs was expected and is a combination of staffing and timing.

**Fundraising** – More than budgeted for due to the Community Care Golf Tournament held in June.

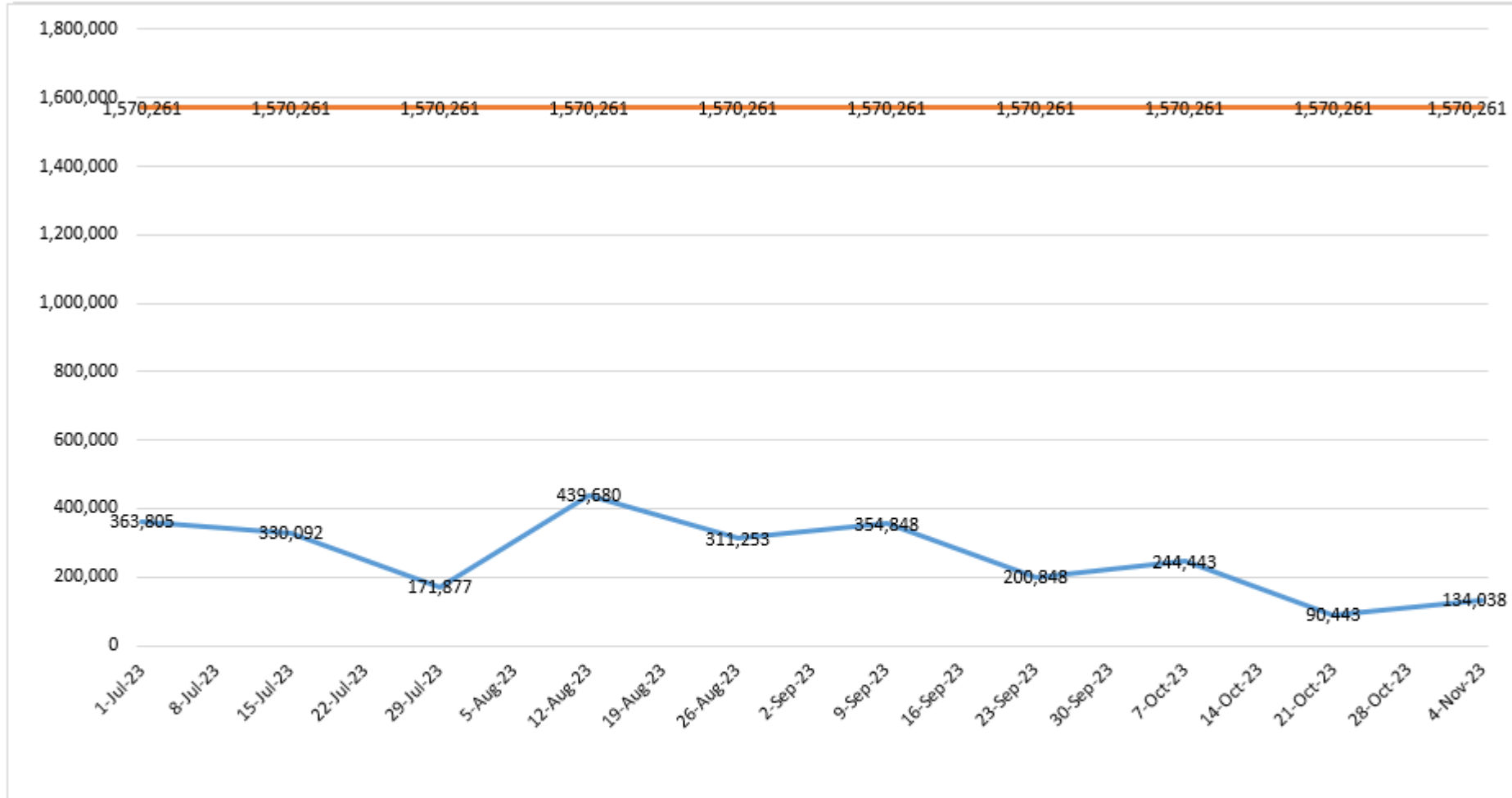
**Equipment Maintenance/Purchase** – More than budgeted for due to numerous vans breaking down and needing repairs as well as regular maintenance. In addition, there was a purchase of 8 Lenovo ThinkPads with warranty in May.

**COMMUNITY CARE NORTHUMBERLAND****Hospice Services****For the Three Months Ending June 30, 2023**

	PCCT	Hospice	Ed's House	TOTAL
<b>Hospice Services</b>				
Funding- LHIN	\$87,500	\$49,887	\$210,000	\$347,387
Fundraising			207	207
Donations			34,057	34,057
Deferred Donations Used	24,068	14,023	189,374	227,465
Interest income/loss			15,527	15,527
Amortization of Capital Contribution			103,634	103,634
<b>Total Revenue</b>	<b>111,568</b>	<b>63,910</b>	<b>552,799</b>	<b>728,277</b>
<b>Operating Expenses</b>				
Salaries, Wages	73,341	46,882	308,854	429,077
Benefits	12,026	8,554	43,983	64,563
Medical Staffing			15,355	15,355
Management fee transfers	18,630	5,991	25,797	50,418
Supplies	446	399	29,905	30,750
General Sundry	3,609	1,137	13,918	18,664
Travel - Staff & Service Delivery	2,268	20	1,718	4,006
Volunteer Recognition	14			14
Fundraising			5,915	5,915
Equipment Maintenance/Purchase			156	156
Amortization of Capital Assets			103,634	103,634
Occupancy - Rent/Lease/Taxes	1,237	928	3,650	5,815
<b>Total Expenses</b>	<b>111,571</b>	<b>63,911</b>	<b>552,885</b>	<b>728,367</b>
<b>Surplus(Deficit) before Transfers</b>	<b>(3)</b>	<b>(1)</b>	<b>(86)</b>	<b>(90)</b>



# Cashflow Forecast



Orange Line is CIBC High Interest Savings Account

Blue line is RBC Operating Account

Forecasted Amounts Included:

- \*LHIN Monthly Funding for all programs
- \*Salaries and Benefits average spend based on actuals
- \*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 Q1			Year to Date			
SERVICE ACTIVITY	2023/2024 Target	Q1 2022-2023	Q1 2023-2024	Budget to Date	Variance	Comments
Home Help/Home Maintenance - # of Matches	470	297	321	118	204	Number of matches up up over last year. Waitlist is currently back up to 153 due to increased demand and not enough workers. Will continue to work on attracting new workers.
Home Help/Home Maintenance- Individuals	395	280	301	99	202	Number of individuals served is up over last year. Current waitlist is 153. Will continue to work on attracting new workers.
Home at Last/Home First Hospital Referrals - Visits	540	197	168	135	33	Home at Last and Home First referrals remain steady from NHH & CMH.
Home at Last/Home First Hospital Referrals - Individuals	440	160	146	110	36	Home at Last and Home First referrals remain steady from NHH & CMH.
Meals Delivery - Meals Delivered	39,000	9,308	9,577	9,750	-173	Overall MOW units have increased over the same time last year. Due to the price increase as of April 1, 2023 we are anticipating a decrease in HMOW & FMOW orders. As financial difficulties continue for clients, we will balance this with subsidies. Staff are working on promotional activities for the fall and will continue to work towards meeting ministry targets.
Meals Delivery - Individuals	590	331	348	148	201	Number of individuals exceeding target.
Social and Congregate Dining/Exercise & Falls - Attendance Days	15,000	1,913	4,338	3,750	588	Community Diners have now increased and are happening throughout the county. Wellness workshops continue to increase in both numbers and events. Exercise & Falls Prevention classes are happening in both community locations and retirement homes.
Social and Congregate Dining/Exercise & Falls - Individuals	1,500	323	821	375	446	With Diners happening throughout the county, we are reaching some clients again. As we add more workshops & classes, we are reaching more clients.
Transportation - Visits	35,000	7,346	11,603	8,750	2,853	We have had a steady increase; many people are having consults and surgeries that have been on hold. Many more services and groups are returning to pre-pandemic numbers.
Transportation - Individuals	2,500	786	945	625	320	Many programs such as VON & Community Living Adult day programs are back to full scheduling giving CCN an influx of referred clients. Many Long Term care facilities have been using our services as well to get take residents out into the community.

PERFORMANCE INDICATORS 2023-2024 Q1 Continued			Year to Date			
SERVICE ACTIVITY	2023/2024 Target	Q1 2022-2023	Q1 2023-2024	Budget to Date	Variance	Comments
Home at Last/Home First PSW - Hours of Care	1,100	255	250	275	-25	HAL PSW and HF Respite hours are slightly under target but consisten with previous year.
Home at Last/Home First PSW Hours - Individuals	230	66	69	58	12	HAL PSW and HF Respite individuals served remain steady.
Caregiver Support - Visits	310	87	56	78	-22	Visits are slightly down from this time last year. Used to have 2 brokered workers matched with Caregiver clients, now there is only 1 motch.
Caregiver Support - Individuals	12	5	4	3	1	Number of clients is slightly down from this time last year but still exceeding target.
Visiting - Social & Safety - Visits	20,750	4,016	3,431	5,188	-1,757	Numbers down, we have lost some clients due to relocation, LTC and death. Many new clients are signing up for a few days a week, not daily calls causing the visits to be less.
Visiting - Social & Safety - Individuals	225	147	167	56	111	Continues to exceed the 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	1,156	1,625	1,125	500	Visits have increased significantly over this time last year. We continue to reengage volunteers, post COVID, to meet the increasing client/family needs.
Visiting - Hospice - Individuals	430	243	397	108	290	Completed numerous community partner outreach information sessions which resulted in increased referrals.
Hospice Residents - Individuals Served		32	37	0	37	Number of residents are up from this time last year.
Hospice Residents - Occupancy rate	80%	83%	72%	0	0	Occupancy rate slightly below Ministry requirement. Average length of stay is shorter (13.8 days) this quarter compared to 2022/2023 Q1 (17.7 days). As we serve more individuals within our community, and raise awareness about Ed's House, we expect to seen an increase in referrals.
Personal Distress Alarms - Individuals	140	122	113	35	78	This program continues to have no waitlist.
Total Individuals Served	8,100	2,495	3,459	2,025	1,434	Exceeding the target and higher than previous years Q as programs open up and clients access more services
Total Visits	61,570	12,802	16,883	15,393	1,491	The total visits have increased over this time last year due to programs opening up and clients accessing more services.
# of Volunteers - Individuals	872	417	467	218	249	Increased recruitment, exposure on social media, word of mouth, CCN events has contributed to an increase in volunteers and applications.
# of Volunteers - Hours	91,193	9,059	9,538	22,798	-13,260	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.