

Q3 Financial Report

For the nine months ending December 30th, 2024

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Prepared for: Finance Committee

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Statement of Financial Position

For the 9 months ended December 31, 2024

Highlights:

- Cash stability has improved
- Lottery Account funds used towards a new engine
- Increase in High-Interest Savings Account (HISA) driven by favorable interest rates
- No additional capital investments in Q3
- Liquidity* remains strong

*Liquidity is measured by an organization's ability to cover shortterm obligations with easily-accessible cash. This measure is called the Current Ratio, which is calculated as:

Acid Test Ratio = (Cash + Receivables) / Current Liabilities

CCN's Acid Test ratio is 2.13, which is strong & means the organization could cover more than double it short-term liabilities

	December 31, 2024	September 30, 2024
CURRENT ASSETS	\$	\$
Cash and bank		
Operating Account	287,978	171,086
Lottery Account	680	11,671
CCN High Interest Savings Account	986,212	968,512
Petty Cash	2,292	2,292
Accounts receivable	258,142	238,520
Prepaid Expenses	63,327	72,478
Investments		
RBC GICs	56,808	56,808
Accrued Interest on Investments	3,056	2,614
Port Hope - Credit Union Shares	-	-
Total Current Assets	1,658,496	1,523,981
Property, Plant & Equip		
Land	236,188	236,188
Equipment	259,599	272,595
Leasehold Improvements	2,256	2,707
Building	6,625,569	6,714,328
Vehicle	72,668	85,730
Total Property, Plant & Equip	7,196,278	7,311,547
Total Assets	8,854,774	8,835,528
LIABILITIES		
Current Liabilities		
Accounts payable and accrued liabilities	663,969	588,139
Government Remittances	-21,998	-76,808
Deferred grant revenue	79,988	
Deferred grant revenue Total Current Liabilities	79,988 721,959	
	•	78,099
Total Current Liabilities	721,959	78,099 589,431
Total Current Liabilities Deferred Contributions	721,959	78,099 589,431
Total Current Liabilities Deferred Contributions Long Term Liability Total LT Liabilities	721,959 7,196,278	78,099 589,431 7,311,547
Total Current Liabilities Deferred Contributions Long Term Liability Total LT Liabilities Fund Balances	721,959 7,196,278 7,196,278	78,099 589,431 7,311,547 7,311,547
Total Current Liabilities Deferred Contributions Long Term Liability Total LT Liabilities	721,959 7,196,278	78,099 589,431 7,311,547



Operating Statement

For the 9 months ended December 31, 2024

Observations:

- Organization is experiencing a revenue shortfall of \$306K
- Expenses are under budget (favourable to budget) by \$160K
- Emphasizes revenue challenges rather than expense management challenges
- YTD deficit of \$146K, up from a deficit of \$25K this time last year

	CURRENT	YTD	YTD	YTD	YTD	PY YTD	Annual
Community Care Northumberland	December	Actual	Budget	Variance	Variance %	Actual	Budget
Government Funding - Base	295,984	2,095,689	2,023,727	71,962	3.6%	1,961,756	2,698,302
Government Funding - One-Time	89,559	779,077	707,250	71,827	10.2%	352,496	943,000
Client fee recoveries	48,624	564,306	650,325	-86,019	-13.2%	619,602	867,100
Fundraising	3,902	34,621	92,400	-57,779	-62.5%	72,881	123,200
Donations	21,263	151,125	332,532	-181,407	-54.6%	770,179	443,375
Foundation Funding	49,705	341,921	500,681	-158,760	-31.7%	0	667,575
Grants	31,371	325,058	292,575	32,483	11.1%	400,178	390,100
Interest income/loss	4,080	46,534	42,000	4,534	10.8%	64,912	56,000
Amortization of Capital Contribution	43,717	387,982	385,205	2,777	0.7%	355,390	513,607
Other revenue	0	594	6,000	-5,406	-90.1%	8,838	8,000
Total Revenue	588,205	4,726,907	5,032,695	-305,788		4,606,232	6,710,259
Operating Expenses							
Salaries, Wages	297,134	2,644,199	2,799,060	-154,861	-5.5%	2,483,291	3,732,080
Benefits	52,621	430,158	441,952	-11,794	-2.7%	400,067	589,270
Medical Staffing	6,333	51,943	53,850	-1,907	-3.5%	48,413	71,800
Supplies	46,170	420,649	381,956	38,693	10.1%	400,276	509,275
General Sundry	20,764	181,175	199,716	-18,541	-9.3%	194,912	266,288
Travel - Staff & Service Delivery	21,415	239,294	256,988	-17,694	-6.9%	256,778	342,650
Professional fees	19,895	158,495	172,533	-14,038	-8.1%	156,682	230,044
Volunteer Recognition	48	7,815	7,736	79	1.0%	7,717	10,315
Fundraising	545	16,773	34,612	-17,839	-51.5%	32,703	46,150
Equipment Maintenance/Purchase	9,269	85,795	61,575	24,220	39.3%	75,873	82,100
Amortization of Capital Assets	43,717	387,982	385,205	2,777	0.7%	351,400	513,607
Contracted Out Services	4,502	74,467	74,685	-218	-0.3%	73,127	99,580
Occupancy - Rent/Lease/Taxes	16,875	174,601	162,825	11,776		150,231	217,100
Total Funances	E20 200	4 072 246	E 022 602	150 247		A 621 470	6 710 250
Total Expenses	539,288	4,873,346	5,032,693	-159,347 		4,631,470	6,710,259
Surplus or Deficit before Transfers	48,917	-146,439	2	-146,441		-25,238	0

Revenue Variance Highlights

- Government Funding Base & One-Time: \$144K (5.3%) favorable variance driven by a 3.4% increase in base funding and a 0.6% increase in one-time funding for both PALC and CSS.
- Client Fees: \$86K (13%) unfavourable variance driven by continued lower-than-expected demand for Meals on Wheels services & decreased transportation revenue recovery.
- **Foundation Funding:** \$159K (32%) favorable variance was driven by increased funding that covered more hospice operating expenses than anticipated, resulting in less additional revenue being required to balance the programs.
- **Donations & Fundraising:** \$239K (56%) unfavorable variance resulted from donations being redirected to the Foundation and delays in the Letter Campaign due to the postal strike. As of the end of Q3, donations and fundraising have decreased by 53% compared to the same period in 2023/24, reflecting an \$115K decline from the previous year.
- **Grants:** \$32K (11%) favorable variance was driven by an increase in the Trent Hills Gas Tax, which was necessary to balance the program & a \$40K Grant from the county.

Subsequent events

• **New funding:** \$10.5K one-time funding for In-Home Services; \$6K one-time funding for Grief & Bereavement Services, and \$140K one-time funding for the van replacement was all confirmed in January.



Expense Variance Highlights

- Salaries & Benefits: \$167K (5.5%) favourable variance due to lower-than-expected salaries for the Hospice programs.
- **Supplies:** \$32K (8.4%) unfavourable variance driven by higher-than-expected costs for food, medical supplies, maintenance, and housekeeping at Ed's House following its expansion along with increased fitness expenses in Wellness.
- General Sundry: \$18K (9.3%) favourable variance primarily due to savings across all programs, with the most significant reductions in Administration and Nutrition Services.
- Professional Fees: \$14K (8.1%) favourable variance continuing to be driven lower-than-expected need for IT.
- Fundraising: \$11K (32%) favourable variance driven by lower-than-expected fundraising activity.
- Equipment Maintenance/Purchase: \$24K (39%) unfavourable variance driven by unexpected vehicle repairs including a new engine & multiple sets of winter tires.



	PCCT	FV	Ed's House	TOTAL
Hospice Services				
Government Funding - Base	231,716	161,588	472,500	865,804
Government Funding - One-Time	71,710	945	699,759	772,414
Fundraising	-	-	1,000	1,000
Donations	-	-	33,351	33,351
Foundation Funding	7,882	42,240	291,799	341,921
Grants	11,169	-	-	11,169
Interest Income/Loss	-	-	-	-
Amortization of Capital Contribution	-	-	339,927	339,927
Total Revenue	322,477	204,773	1,838,336	2,365,586
Operating Expenses				
Salaries, Wages	212,738	145,084	1,022,261	1,380,083
Benefits	32,337	25,931	140,490	198,758
Medical Staffing	-	-	51,943	51,943
Management fee transfers	47,088	18,531	108,285	173,904
Supplies	3,308	1,144	97,102	101,554
General Sundry	8,855	3,283	44,230	56,368
Travel - Staff & Service Delivery	3,682	203	354	4,239
Professional fees	343	-	2,127	2,470
Volunteer Recognition	-	-	3,589	3,589
Fundraising	-	-	3,672	3,672
Equipment Maintenance/Purchase	-	-	-	-
Amortization of Capital Assets	-	-	339,927	339,927
Occupancy - Rent/Lease/Taxes	14,127	10,595	24,359	49,081
Total Expenses	322,478	204,771	1,838,339	2,365,588
Surplus or Deficit before Transfers	(1)	2	(3)	(2)

Hospice Services Operating Statement

For the 9 months ended December 31, 2024

Highlights:

- Hospice Services is maintaining a balanced position with support from the Foundation
- As the end of Q3, CCN had received \$33K in donations designated for Ed's House
- As of Dec 31st, CCN used ~\$342K of Foundation Funding to balance all 3 hospice programs
- Hospice programs used an avg. of \$49K/month in Q3; an increase from the \$37K/month required in Q2 – this rise is attributed to the Management and Donor Relations fee increases
- After the monthly \$30K deposits, the Foundation still "owes" CCN \$119K for operating costs incurred up to the end of Q3.
- **REQUEST**: Ask the Foundation Board for **\$119K** to cover the increased operating costs.



Fundraising Next Steps

Plan Development:

In the previous meeting, it was agreed that a structured fundraising plan is necessary to help CCN meet its financial goals for the 2025-2026 period.

Draft Plan:

The Director of Donor Relations has already created a draft version of the CCN Fundraising Plan, providing an initial framework for how the fundraising targets can be achieved.

New Position Proposal:

The draft plan recommends creating a new role to oversee fundraising efforts, ensuring focus and alignment with CCN's goals.

Reporting Structure:

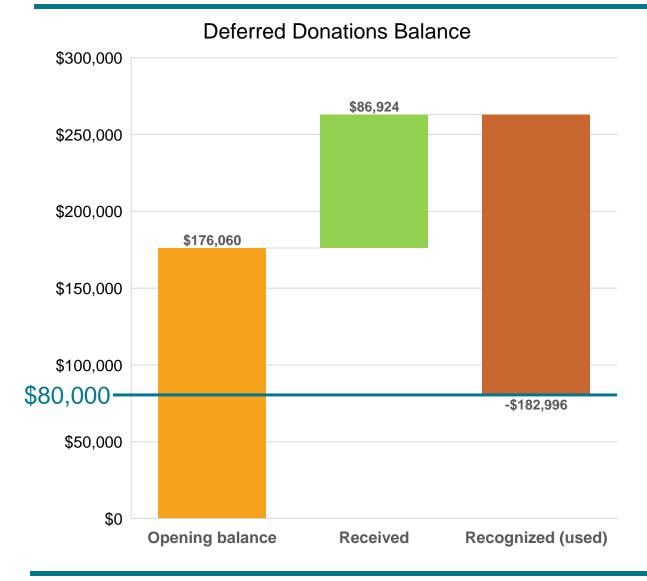
The proposed new employee would report directly to the Director of Donor Relations, ensuring clear communication and consistency in fundraising efforts.

Estimated Cost:

The salary range for this new position is projected to be between \$55,000 and \$60,000 per year, which would need to be factored into CCN's 2025/26 budget.



Deferred Donations

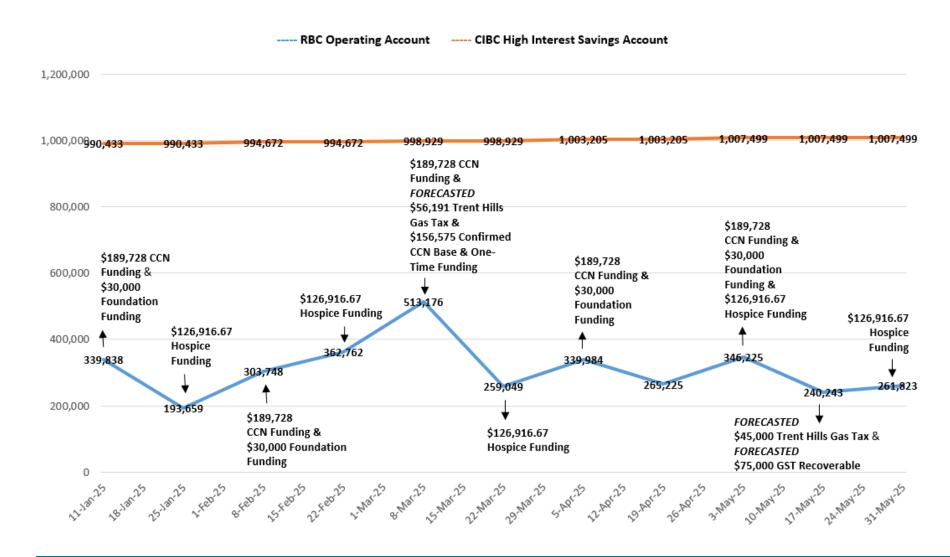


Highlights:

- As of Q3, \$80K sits in Deferred Donations, broken down by:
 - \$18K for Nutrition Services
 - \$9.5K for In-Home Services
 - \$3.5K for Wellness Services
 - \$49K for Transportation Services



Cashflow



Highlights:

- In 2024, the HISA had an avg. interest rate of 4.28%.
- Monthly Foundation deposits of \$30K began in October
- Cash levels remained stable in Q3, without a forecasted need for a transfer from the HISA
- The 1x funding announced in January is included in the forecast as a lump sum at the beginning of March



Risk Management – Refresher

Risk Management refresher

An 'Integrated Risk Management' (IRM) program is the mechanisms for identification, evaluation, and prioritization of risks followed by a coordinated application of resources to minimize, monitor, and control the probability or impact of unfortunate events. Simply put, risk management helps us prepare for the unexpected.

Board responsibilities

The Board of Directors of CCN has the role and responsibility for ensuring program quality and effectiveness, which includes the mitigation of risk to patients, clients, visitors, staff & organizational assets. To satisfy these goals, it is recommended that the Finance Committee receive quarterly updates to review the risk profile of the organization.

Current State

- ✓ The Board has a policy on Risk Management (BD-130, last reviewed Oct 31, 2019)
- ☐ Define and roll-out an overarching process for staff



Risk Management – Assessing Risk

The Risk Matrix (shown to the right) will be used to rank risks, based on:

1. Impact

CCN staff will assess risk impacts (how bad?) by considering the losses or consequences that could result if a particular risk were to be realized in the following domains:

- Care (harm to patients, staff, or visitors)
- Workforce Resources: Recruitment & Retention
- Financial loss
- Infrastructure loss or Service interruption
- Stakeholder Confidence
- Regulatory compliance (e.g. building code compliance for Ed's House)

2. Likelihood

CCN will assess risk likelihoods by considering:

- The controls already in place
- The expected frequency of occurrence

Rate the risk to determine which risks should take priority over another.

Example: Low Likelihood [2] x High Impact [4] = Rating of 8 (Medium Level)

Impact										
Likelihood		1	2	3	4	5				
		Very Low	Low	Medium	High	Very High				
Very High	5	5	10	15	20	25				
High	4	4	8	12	16	20				
Medium	3	3	6	9	12	15				
Low	2	2	4	6	8	10				
Very Low	1	1	2	3	4	5				

Risk Level:

1, 2, 3, 4	Low
5, 6, 8, 9, 10	Medium
12, 15, 16	High
20, 25	Very high



Risk Management – Practical Example

The following is an example of a risk that has been identified, scored & a mitigation strategy defined on the Risk Register...



INTEGRATED RISK MANAGEMENT PROGRAM

Risk Management Register

Last reviewed by the Risk Management Committee on DD/MM/YYYY

Identific	ation			Detailed A	Assessment	Mitigation & Control				
Dete	Impact populated automatically adjust Likelihood		المعانات ال	populated automatically						
Date Added	Risk Category	Description of Risk	Type of Risk	Impact Score	populated automatically; adjust Impact Score to change	basis	Likelihood	adjust Liklihood Score to change	Risk Level	Counter-measure or Solution
DD/MM/	Select from dropdow	, 	▼ Select from dropdov ▼	1 to 5 ▼	Impact description	<i>Dropdown</i> ▼	1 to 5	Likelihood description	_	▼
	Facilities	Aged transportation equipment may lead to breakdowns & temporary loss of programming	Intrastructure	3	Loss or interruption 1 - 2 day without critical system impact	Broad descriptors	4	Will probably happen/recur	12.0	Contact local auto-body shops to obtain priority repair status. Source replacement vehicle as a backup.

As you can see, the Risk Score of 12 corresponds to the matrix on the last slide. In practice, the scoring system is merely a guide to allocate resources around mitigation efforts. The process of tracking & discussing risks is of vastly more importance.



Risk Management – Next Steps

Proposed approach

- ☐ Review Board Policy for Risk Management (RM)
- ☐ Create an internal RM policy
- Communicate with Directors & Managers (need & high-level plan)
- Create a Risk Register template (simplifies the process for adding to & updating the register)
- Education & engagement w/ Directors & Managers: Tailoring the Risk Register for CCN
- Establish an internal 'Risk Management Working Group'
- ☐ Establish a Committee & Board report schedule
- ☐ Assessment of risks with internal expertise including senior management
- □ Review and confirm the risks with Executive team & Board
- ☐ Schedule regular meetings to add new risks & review mitigation strategies for existing ones
- ☐ Create process for staff identification of new risks



Volumes



Performance Key



Performance Meets or Exceeds Performance Below Standard

PERFORMANCE INDICATORS 2	024-2025 Q3		Year to Date			
SERVICE ACTIVITY	2024/2025 Target	Q3 2023-2024	Q3 2024-2025	Budget to Date	Variance	Comments
Home Help/Home Maintenace - # of Matches	470	540	678	353	326	Exceeding target. Matches are up significantly from same period last year due to increased Brokered Worker recruitment giving us the ability to get clients off the waitlist. The waitlist currently sits at 70 people.
Home Help/Home Maintenance- Individuals	395	462	524	296	228	Exceeding target. Individuals served is also up significantly from last year due to the increased recruitment.
Home at Last/Home First Hospital Referrals - Visits	540	481	499	405	94	Exceeding target. Home at Last referrals from NHH and CMH hospitals are up so far this year.
Home at Last/Home First Hospital Referrals - Individuals	440	394	400	330	70	Exceeding target. Individuals served are also up so far this year due to the increased HAL referrals.
Meals Delivery - Meals Delivered	39,000	26,503	25,039	29,250		Clients are not ordering as many meals or cance ling meals due to cost of meals/moving/more family help. The Nutrition team continues to promote programs and work on benchmarking with other organizations to understand our comparators.
Meals Delivery - Individuals	590	493	480	443		The number of individuals is down in comparison to last year, but we are still exceeding the ministry target. Clients are not ordering as many meals as before the price increase but the overall number of individuals remains strong.
Social and Congregate Dining/Exercise & Falls - Attendance Days	15,000	14,553	17,993	11,250	6,743	Numbers continue to rise in these areas as compared to this time last year. Staff have increased the number of workshops, exercise classes and community diners. The current waitlist for exercise classes is at 37 people.
Social and Congregate Dining/Exercise & Falls - Individuals	1,500	1,316	1,353	1,125	228	We are slightly up from last year and meet targeting well. We continue to reach clients with new interests with new workshops.
Transportation - Visits	35,000	24,503	25,780	26,250	-4/0	A slower quarter due to many volunteers being unavailable during the Thanksgiving and Christmas season. This is often a slower time, as many offices are closed for extended periods. A few new volunteers have been recruited as drivers which has helped us get close to our target.
Transportation - Individuals	2,500	1,516	1,342	1,875		This tends to be a slower quarter as mentioned above. Our cancellations were higher due to clients and offices closing due to weather and illness. I would expect a positive 4th quarter, as we have seen many reschedules and requests coming in early for January and February.



Volumes

Home at Last/Home First PSW - Hours of Care	1,100	692	772	825	-53	PSW hours are up over the same period last year due to the increase in Home at Last referrals but still slightly below target due to a large number of Home at Last cancellations by hospital.
Home at Last/Home First PSW Hours - Individuals	230	181	233	173	61	Exceeding target. Home at Last individuals served are up over same period as last year due to the increase in referrals.
Caregiver Support - Visits	310	172	435	233	203	Exceeding target. Caregiver Support visits are up over the same period as last year as referrals for the service have increased and matches are very active. The majority of these visits are caregiver relief hours, where Brokered Workers are spending time with the client in their home, allowing their loved one to get out and take a break.
Caregiver Support - Individuals	12	8	12	9	3	Exceeding target. Number of individuals are up due to increase in referrals.
Visiting - Social & Safety - Visits	20,750	11,013	9,159	15,563	-6,404	Visits continue to decrease. We have received 1/3 less social & safety referrals compared to same time last year (66 compared to 16). We are still not able to run the Senior Centres Without Walls due to problems with the program platform. The waitlist for Friendly Visiting is 89.
Visiting - Social & Safety - Individuals	225	311	302	169	133	We are meeting ministry target, although, Individuals are down slightly in comparison to last year. This is likely related to the decrease in referrals from the above mentioned programs.
Visiting - Hospice - Visits	4,500	4,363	4,251	3,375	876	Although, visits are slightly down from the same time last year, we still are exceeding target numbers and feel we will do so in Q4.
Visiting - Hospice - Individuals	430	616	637	323	315	This number continues to rise as it correlates to the needs of the aging cohort.
Hospice Residents - Individuals Served		93	116	0	116	Individuals Served: Number of residents served is up since this time last year, due in part to the expansion from 6 to 10 beds in April 2024. While admissions are unpredictable, the census ranged from 2 residents to 9 residents throughout Q3.
Hospice Residents - Occupancy rate	80%	90%	65%	1	0	Occupancy rate is below Ministry requirement and down by 25% since this time last year. Admissions are based on the fluctuating needs of the community and efforts are made to ensure physicians are aware of the expansion to 10 beds and admission criteria for hospice. Heading into 2025, it is projected that occupancy rates will increase as local physicians and partners are aware of hospice residence services.
Personal Distress Alarms - Individuals	140	133	108	105	3	Continues to decrease. Will complete the program evaluation and decide next direction of the programs as units are becoming obsolete.
Total Individuals Served	8,100	4,070	3,915	6,075	-2,160	Total number of individuals is slightly down from the same time last year and this number is also attributed to the re-calculation of the "unique" individuals served by the organization.
Total Visits	61,570	41,072	40,802	46,178	-5,376	Total number of visits also just slightly down from the same time last year. Overall visits remain below target as is the same outcome in the Transporation & Friendly visiting programs.
# of Volunteers - Indiviudals	872	601	547	654	-107	Although recruitment efforts are the same, less volunteers onboarded this quarter in all programs as well as volunteers retiring mainly due to health issues.
# of Volunteers - Hours	91,193	28,461	35,068	68,395	-33,327	Volunteer hours under target due to lack of volunteers, and with volunteers taking vacation, particularly for friending visiting and transportation.



Appendix: Deferred Donations Detail

Community Care Northumberland

Deferred Donations Summary For year ending March 31, 2025

		OCSA MOW	OCSA Vaccine	SSAH	NEARN	BRI MOW	Canadian Legion Branch 103 Donation	Canadian Legion Branch 30 MOW Donation	Senior Centers Without Walls	Campbellford Seymour Foundation Youth Grant	МТО	Deferred THR Grants	Central Transportation	Lakeshore
		Grant	Grant	Grant		Donation								
OPENING	176,060	6,834	7,304	5,569	3,027	23,368	9,000	-			14,857	10,247	48,716	47,139
Received Current Year	86,924	-	-	9,350	500	4,700		3,000	956	2,500	27,696	•	38,222	-
Recognized Current Year	- 182,996	- 6,834	- 5,908	- 14,515	-	- 14,271		-	- 956	- 2,500	- 29,500	- 3,196	- 82,256	- 23,060
BALANCE	79,988	-	1,396	404	3,527	13,797	9,000	3,000	-	-	13,053	7,051	4,682	24,079
<u>GL</u>	_													
01-1-4384600		-	1,396	404	3,527	13,797	9,000	3,000	-	-				
00-1-4384690											13,053			
00-1-4384670												7,051		
00-1-4384695													4,682	
00-1-4384680						9,404								24,079
00-1-4384650														
00-1-4384630														



Appendix: Abbreviation Detail

HISA: High Interest Savings Account

PPE: Property, Plant & Equipment

CSS: Community Support Services

PALC: Palliative Care

IRM: Integrated Risk Management

RM: Risk Management

