

ANNUAL GENERAL MEETING AGENDA

Wednesday, June 19th, 2019

2:00 pm: Annual General Meeting

3:00 pm Social: Wine and Cheese

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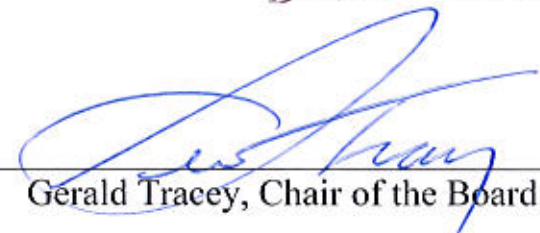
Adjournment

Adoption of 2019 Annual General Board of Directors Meeting Agenda

Resolved that the Agenda be adopted.

Moved by: 
Karen McEwen

Seconded by: 
Donna Anderson

Approved by: 
Gerald Tracey, Chair of the Board of Directors

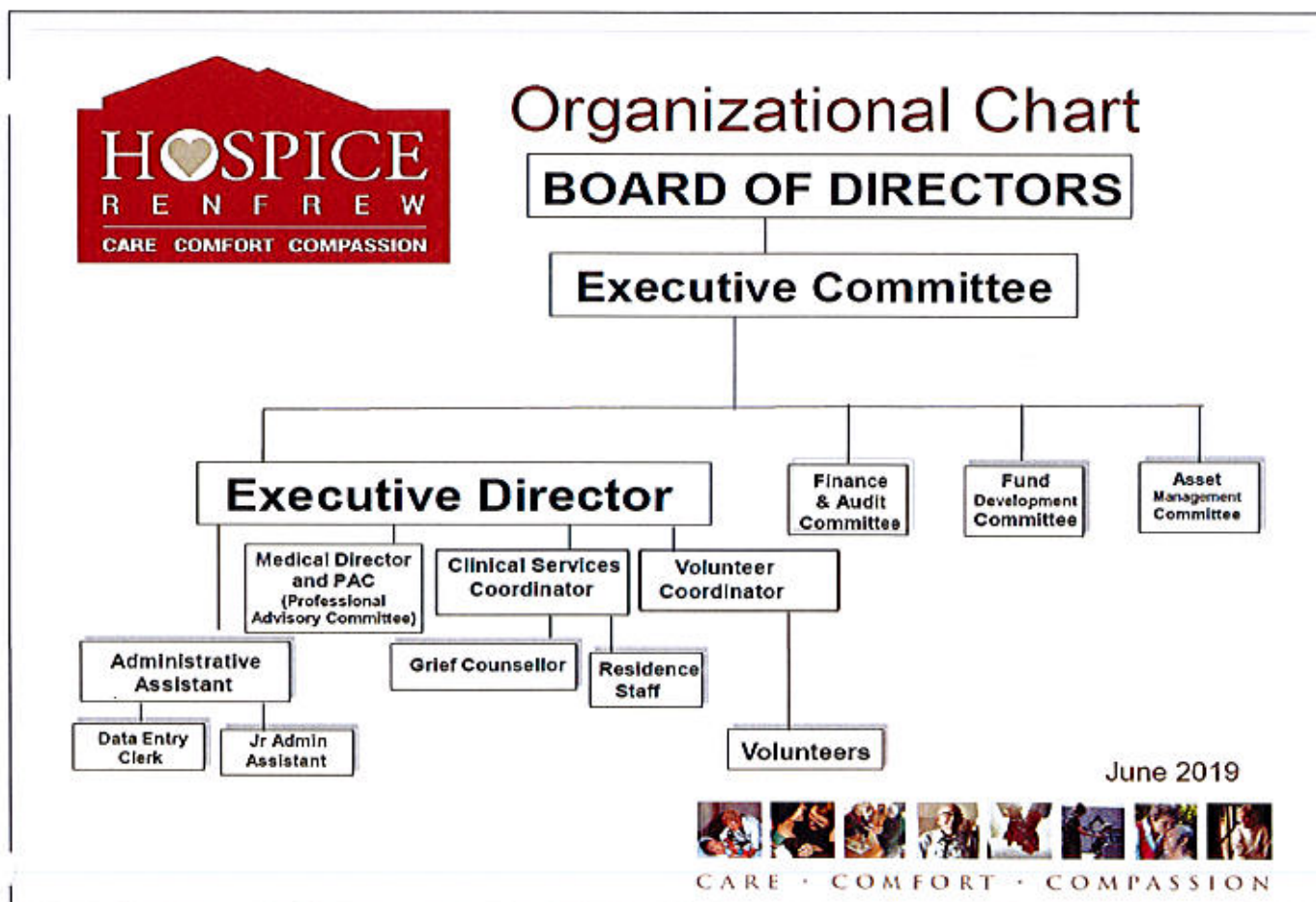
Approved by: 
Donna Anderson, Secretary of the Board of Directors

Date: 19 June 2019

MISSION AND OBJECTIVES

To assist terminally ill persons to live as fully as possible while maintaining their dignity and comfort, as well as providing support to family and friends.

- To provide pain and symptom management
- To improve the quality of life for people with advanced disease, and their families through the relief of concerns, whether physical, emotional, social or spiritual
- To preserve the quality of life, dignity and independence of the person
- To support family wellness and community involvement
- To affirm life and regard death as a normal process, and neither hasten or postpone death
- To assist the bereaved in dealing with grief
- To respect and work with all other disciplines and agencies, encouraging through education and good communication, a wider knowledge base of palliative care



MEETING: Annual General Board of Directors Wednesday 27 June 2018 – 3:00 p.m. to 4:00 p.m. Hospice Renfrew Inc. – 459 Albert Street	
Note taker:	Helen McGregor, Administrative Assistant
Attendees:	Donna Anderson, Bonnie Carty, Judy Cobus, Leo Hall, Karen McEwen, Bill McMahon, Owen Snider, Gerald Tracey, Maureen Sullivan-Bentz, George Wade and Dr. Philippe Pinard, and Advisors, Connie Legg and Jim MacKillican Regrets: Matt Beimers, Jamie Cybulski, John Cooke, other volunteers, staff and on call physicians

Agenda Topics

Attendance/Welcome	Gerald Tracey
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Attendance was taken, everyone was welcomed.

The agenda was reviewed. Motion to adopt the Agenda was moved by Donna Anderson and seconded by Karen McEwen; motion was carried. Mission and Objectives were read and Organizational Chart reviewed.

Minutes of 2017 Annual Meeting	Gerald Tracey
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The Minutes of the Annual Meeting from 24 May 2017 were reviewed.

Motion to adopt the 2017 minutes was moved by Karen McEwen and seconded by Bill McMahon. Motion was carried and Minutes were signed.

Audited Financial Statements	Bill McMahon
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A report was given on the 2017 audited financial statements.

A motion to have interim financial statements prepared by Ferguson & Kubisheski, was moved by Jim MacKillican and seconded by Karen McEwen.

Appointment of Auditors	Gerald Tracey
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A motion to appoint Ferguson & Kubisheski, Chartered Accountants, as auditors for Hospice Renfrew for the next year, was moved by Karen McEwen and seconded by Owen Snider. Motion was carried and the resolution was signed.

Executive Director Report	Maureen Sullivan-Bentz
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A report was given.

Director of Clinical and Volunteer Services	Judy Cobus
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A report was given.

Executive Committee Report	Gerald Tracey
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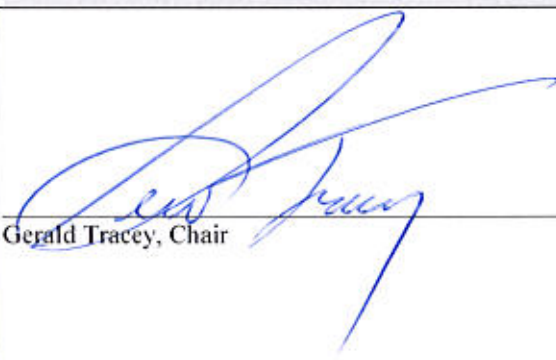

A report was given.

Finance Committee Report	Bill McMahon
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A report was given.

Signing Authority Resolution	Gerald Tracey
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A motion was presented to adopt Bill McMahon, Treasurer, Jim MacKillican and Doug Legg, as members of the Finance Committee, and Maureen Sullivan-Bentz, Executive Director, to have signing authority on all cheques and financial transactions of the organization with the second signature from any of the above mentioned with signing authority. This motion was moved by Karen McEwen and seconded by Owen Snider. Motion was carried and the resolution was signed.

Fund Development Committee Report	Owen Snider
A report was given.	
Asset Management Committee Report	George Wade
A report was give.	
Medical Director Report	Dr. Philippe Pinard
A report was given.	
Appointment of Medical Director	Gerald Tracey
A motion to appoint Dr. Philippe Pinard as Medical Director for Hospice Renfrew for the upcoming year, was moved by Bill McMahon and seconded by George Wade. Motion was carried and the resolution was signed.	
Appointment of Delegate Medical Director	Gerald Tracey
A motion to appoint Dr. Monica Bishop as Delegate Medical Director for Hospice Renfrew for the upcoming year, was moved by Karen McEwen and seconded by Owen Snider. Motion was carried and the resolution was signed.	
Appointment of Legal Counsel	Gerald Tracey
A motion to appoint John Cooke as legal counsel on a fee for service basis for the upcoming year was moved by Karen McEwen and seconded by Jim MacKillican. Motion was carried and the resolution was signed.	
Other Items	Gerald Tracey
<ol style="list-style-type: none"> 1. A thank you was given to all board members and committees for their support to Hospice Renfrew. 2. A thank you and presentation of flowers was given to the Maureen, Judy and Helen. 3. Gerald gave a touching speech on how fulfilling it is to serve as Hospice Renfrew Board Chair and the importance of continuing this wonderful hospice care. 	
Adjournment	
Motion to adjourn was moved by Owen Snider and seconded by Karen McEwen. Meeting was adjourned and a social hour followed.	
<div> Next Regular Meeting: Wednesday 19 September 2018 @ 2 pm @ Hospice Renfrew </div>	
<div>  Gerald Tracey, Chair </div> <div>  Donna Anderson, Secretary </div>	



2019-2020 Hospice Renfrew Board of Directors

Hospice Renfrew is governed by a volunteer board of directors that represents the interests of our residents and their families from across Renfrew County. Hospice Renfrew is pleased to welcome its Board of Directors for 2019-20.

	<u>Date joined</u> <u>Board Committee</u>
Chair: Gerald Tracey	4 May 2016
Treasurer: Bill McMahon	26 April 2011
Secretary: Donna Anderson	20 May 2014
Medical Director (non-voting): Dr. Philippe Pinard	18 April 2018 (delegate 2012-18)
Delegate Medical Director (non-voting): Dr. Monica Bishop	18 April 2018
Directors: Leo Hall	20 May 2014
Owen Snider	14 April 2015
Jamie Cybulski	4 May 2016
Karen McEwen	16 November 2016
George Wade	24 May 2017
Kevin Cherry	19 June 2019
* Advisory Member (non-voting): James MacKillican	20 August 2004
* Executive Director (ex-officio): Caroline McGee	11 February 2019

* non-voting members

HOSPICE RENFREW INC.
FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2018



INDEPENDENT AUDITOR'S REPORT

To the Directors of Hospice Renfrew Inc.,

Opinion

We have audited the accompanying financial statements of Hospice Renfrew Inc., which comprise the statement of financial position as at 31 December 2018 and the statements of operations, changes in net assets and cash flows for the year then ended, and notes to the financial statements, including a summary of significant accounting policies.

In our opinion, the accompanying financial statements present fairly, in all material respects, the financial position of Hospice Renfrew Inc. as at 31 December 2018, and the results of its operations and its cash flows for the year then ended in accordance with Canadian accounting standards for not-for-profit organizations.

Basis for Opinion

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

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

Management is responsible for the preparation and fair presentation of the financial statements in accordance with Canadian accounting standards for non-for-profit organizations, and for such internal control as management determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

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

Those charged with governance are responsible for overseeing Hospice Renfrew Inc.'s financial reporting process.

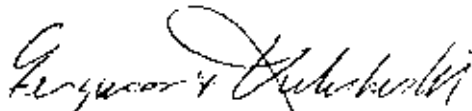
Auditor's Responsibility for the Audit of the Financial Statements

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

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

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

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



CHARTERED PROFESSIONAL ACCOUNTANTS, LICENSED PUBLIC ACCOUNTANTS

20 March 2019
Renfrew, Ontario

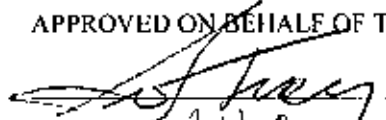
HOSPICE RENFREW INC.

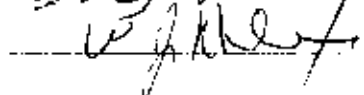
STATEMENT OF FINANCIAL POSITION

AS AT 31 DECEMBER 2018

	2018	2017
ASSETS		
CURRENT		
Cash	\$ 482,103	\$ 664,477
Short-term investments (Note 3)	98,222	100,991
Accounts receivable	36,435	46,551
Prepaid expense	8,062	7,885
Inventory	1,500	1,500
	626,322	821,404
BUILDING AND EQUIPMENT (Note 4)	1,400,327	1,276,305
OTHER		
Deposit on building improvement	-	55,175
Externally restricted cash for capital projects	6,497	58,125
	\$ 2,033,146	\$ 2,211,009
LIABILITIES		
CURRENT LIABILITIES		
Accounts payable and accrued liabilities	\$ 85,486	\$ 68,684
Government remittances payable	2,632	-
Deferred operating revenue	-	9,485
Current portion of debenture payable	-	111,453
TOTAL LIABILITIES	88,118	189,622
DEFERRED CONTRIBUTIONS (Note 6)	1,345,980	1,400,811
	1,434,098	1,590,433
NET ASSETS		
Unrestricted	599,048	37,930
Internally restricted (Note 7)	-	582,646
	599,048	620,576
	\$ 2,033,146	\$ 2,211,009

APPROVED ON BEHALF OF THE BOARD:

 Director

 Director

HOSPICE RENFREW INC.**STATEMENT OF OPERATIONS****FOR THE YEAR ENDED 31 DECEMBER 2018**

	2018	2017
REVENUE		
Donations	\$ 314,364	\$ 246,470
Fundraising events	341,198	311,025
Provincial grants	676,554	674,680
Other grants	85,985	101,623
Amortization of deferred contributions	61,328	54,952
Investment income	7,905	8,022
Realized loss on disposition of investment	(204)	-
Unrealized loss from financial instruments measured at market value	(1,294)	(722)
Miscellaneous revenue and recoveries	6,991	1,014
	1,492,827	1,397,064
EXPENDITURES		
Advertising and promotion	2,703	6,240
Amortization	78,518	64,179
Bank charges and interest	5,754	6,095
Events	21,437	28,522
Grief and bereavement services	1,293	17,992
Insurance	10,152	10,424
Interest on long term debt	3,869	9,185
Office	31,425	29,251
Parking	9,265	7,810
Physician on-call stipend	27,500	25,500
Professional fees	12,546	7,819
Repairs and maintenance	21,387	22,696
Supplies	47,651	38,880
Telephone	13,961	12,522
Wages and benefits	1,189,960	1,101,173
Training and education	12,958	4,968
Travel and conference	4,215	4,230
Utilities	19,761	20,609
	1,514,355	1,418,095
DEFICIENCY OF REVENUE OVER EXPENDITURES	\$ (21,528)	\$ (21,031)

HOSPICE RENFREW INC.**STATEMENT OF CHANGES IN NET ASSETS****FOR THE YEAR ENDED 31 DECEMBER 2018**

	Operating	Internally Restricted	Total 2018	Total 2017
Balance beginning of year	\$ 37,930	\$ 582,646	\$ 620,576	\$ 641,607
Deficiency of revenue over expenditures for the year	(21,528)	-	(21,528)	(21,031)
Board approved net allocation (Note 7)	582,646	(582,646)	-	-
Balance end of year	\$ 599,048	\$ -	\$ 599,048	\$ 620,576

HOSPICE RENFREW INC.
STATEMENT OF CASH FLOWS
FOR THE YEAR ENDED 31 DECEMBER 2018

	2018	2017
CASH PROVIDED BY (USED FOR):		
OPERATING ACTIVITIES		
Deficiency of revenue over expenditures	\$ (21,528)	\$ (21,031)
Adjustments for non-cash items		
Amortization of building and equipment	78,518	64,179
Amortization of deferred contributions	(61,328)	(54,952)
Realized loss on disposition of investment	204	722
Unrealized loss on financial instruments measured at fair market value	1,294	-
Changes in non-cash working capital		
Accounts receivable	10,116	(5,194)
Prepaid expenses	(177)	435
Deferred operating revenue	(9,485)	9,485
Accounts payable and accrued liabilities	16,802	5,455
Government remittances payable	2,632	(2,120)
	17,048	(3,021)
FINANCING ACTIVITIES		
Decrease (increase) in cash externally restricted for capital purposes	51,628	(28,125)
Debenture repayment	(111,453)	(106,041)
Deferred contributions received	6,497	83,300
	(53,328)	(50,866)
INVESTING ACTIVITIES		
Purchase of short term investments	(2,729)	(2,302)
Proceeds from sale of short term investments	4,000	-
Decrease (increase) in deposit on building improvement	55,175	(55,175)
Purchase of - equipment	(18,738)	(4,706)
- building improvements	(183,802)	(34,905)
	(146,094)	(97,088)
CHANGE IN CASH DURING THE YEAR	(182,374)	(150,975)
CASH AT BEGINNING OF YEAR	664,477	815,452
CASH AT END OF YEAR	\$ 482,103	\$ 664,477

HOSPICE RENFREW INC.

NOTES TO THE FINANCIAL STATEMENTS

FOR THE YEAR ENDED 31 DECEMBER 2018

1. DESCRIPTION OF ORGANIZATION

Hospice Renfrew Inc. was incorporated without share capital on August 20, 2004 under the Ontario Corporations Act to operate a not-for-profit residential hospice, with programs and support services that meet the needs of terminally ill persons and their families. Hospice Renfrew Inc. is registered as a charity within the meaning of the Income Tax Act (Canada) and is exempt from income taxes provided certain requirements of the Income Tax Act are met.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

The financial statements were prepared in accordance with Canadian accounting standards for not-for-profit organizations and include the following significant accounting policies:

REVENUE RECOGNITION

Hospice Renfrew Inc. follows the deferral method of accounting for contributions, which includes donations and grants.

Funding is received from the Champlain Local Health Integration Network (LHIN). Operating grants are recorded in the period to which they relate. Grants approved during the reporting period but not received until after the end of the reporting period are accrued. Where a portion of a grant relates to a future period it is deferred and recognized in the subsequent period unless requested to be repaid by the funder at which time it will be classified as a liability.

Unrestricted contributions are recognized as revenue when received or receivable if the amount to be received can be reasonably estimated and collection is reasonably assured.

Externally restricted contributions are recognized as revenue in the year in which the related expenses are recognized. Amounts received for building and equipment are amortized into income on the same basis as the amortization expense is calculated on the related building and equipment.

FINANCIAL INSTRUMENTS

i) Measurement of financial instruments.

Hospice Renfrew Inc. initially measures its financial assets and financial liabilities at fair value adjusted by, in the case of a financial instrument that will not be subsequently at fair value, the amount of transaction costs directly attributable to the instrument.

Hospice Renfrew Inc. subsequently measures all its financial assets and financial liabilities at amortized cost, except for investments in equity instruments that are quoted in an active market, which are measured at fair value. Changes in fair value are recognized in the statement of operations in the period incurred.

Financial assets measured at amortized cost include cash, accounts receivable and externally restricted cash for capital projects.

Financial liabilities measured at amortized cost include accounts payable and accrued liabilities, government remittances payable and debenture payable.

HOSPICE RENFREW INC.

NOTES TO THE FINANCIAL STATEMENTS

FOR THE YEAR ENDED 31 DECEMBER 2018

2. cont'd

ii) Impairment

Financial assets measured at cost are tested for impairment when there are indicators of impairment. The amount of write down is recognized in the statement of operations. The previously recognized impairment loss may be reversed to the extent of improvement, directly or by adjusting the allowance account, provided that it is no greater than the amount that would have been reported at the date of reversal had the impairment not been recognized previously. The amount of the reversal is recognized in the statement of operations.

iii) Transaction costs

Transaction costs are recognized in the statement of operations in the period incurred, except for financial instruments that will be subsequently measured at amortized cost. Transaction costs related to financial instruments subsequently measured at amortized cost are capitalized and are included in the acquisition costs.

CONTRIBUTED MATERIALS AND SERVICES

A number of volunteers contribute their services to Hospice Renfrew Inc. each year. Due to the difficulty of determining the fair value, these contributed services are not recognized or disclosed in the notes to the financial statements.

Contributed materials are recorded, when received, at fair value. If an estimate of fair value cannot reasonably be made, both the asset and the related contribution is recognized at a nominal value.

CASH AND CASH EQUIVALENTS

Cash and cash equivalents consist of cash on hand and balances with banks and other financial institutions that is not otherwise externally restricted for capital projects..

INVENTORY

Inventory is valued at the lower of cost and replacement cost.

BUILDING AND EQUIPMENT

Building and equipment are recorded at cost and amortized on a straight line basis over their estimated useful lives as follows:

Building and building improvements	15-40 years
Equipment	3-5 years

MANAGEMENT ESTIMATES

The preparation of these financial statements in conformity with Canadian standards for not-for-profit organizations requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the current period. Significant estimates include those used when accounting for amortization. All estimates are reviewed periodically and adjustments are made in the statements as appropriate in the year they become known.

HOSPICE RENFREW INC.
NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2018

3. SHORT TERM INVESTMENTS

	2018	2017
Mutual fund at market value	\$ 98,222	\$ 100,991

4. BUILDING AND EQUIPMENT

	Cost	Accumulated Amortization	Net 2018	Net 2017
Building and building improvements	\$ 1,833,006	\$ 465,438	\$ 1,367,568	\$ 1,246,357
Equipment	264,029	231,270	32,759	29,948
	\$ 2,097,035	\$ 696,708	\$ 1,400,327	\$ 1,276,305

5. DEBENTURE PAYABLE

	2018	2017
Debenture payable to Ontario Infrastructure Projects Corporation (OIPC). The debenture bears interest at 5.04% with blended semi-annual payments of \$57,842 and matured on December 3, 2018. The debenture was repaid in full in 2018.		
Current portion	\$ -	\$ 111,453
	-	111,453
	\$ -	\$ -

6. DEFERRED CONTRIBUTIONS

	Capital	Whitham Education	Other	2018	2017
Opening balance	\$ 1,297,561	\$ 100,000	\$ 3,250	\$ 1,400,811	\$ 1,372,463
Contributions received	6,497	-	-	6,497	83,300
Amortized to revenue	(61,328)	-	-	(61,328)	(54,952)
Closing balance	\$ 1,242,730	\$ 100,000	\$ 3,250	\$ 1,345,980	\$ 1,400,811

HOSPICE RENFREW INC.

NOTES TO THE FINANCIAL STATEMENTS

FOR THE YEAR ENDED 31 DECEMBER 2018

6. cont'd

Included in the balance above is \$109,747 (2017 - \$161,375) of unspent contributions from donors to be used for specific operational expenses and capital additions. Unspent contributions are comprised of:

	Capital	Whitham Education	Other	2018	2017
Opening balance	\$ 58,125	\$ 100,000	\$ 3,250	\$ 161,375	\$ 133,250
Restricted contributions received	6,497	-	-	6,497	83,300
Restricted contributions expended	(58,125)	-	-	(58,125)	(55,175)
Closing balance	\$ 6,497	\$ 100,000	\$ 3,250	\$ 109,747	\$ 161,375

7. INTERNALLY RESTRICTED NET ASSETS

The Board of Directors of the corporation passed a motion in 2018 to transfer previously internally restricted amounts to unrestricted net assets. Details of the transfers from internally restricted amounts to unrestricted net assets are detailed below:

	Capital Asset Replacement Reserve Fund	Sustainability Reserve Fund	2018	2017
Opening balance	\$ 328,448	\$ 254,198	\$ 582,646	\$ 603,677
Allocations from:				
Internally restricted revenue	-	-	-	134,107
Interest	-	-	-	5,641
Unrestricted net assets	-	-	-	50,000
Allocations to:				
Unrestricted net assets	(328,448)	(254,198)	(582,646)	(210,779)
Ending balance	\$ -	\$ -	\$ -	\$ 582,646

8. COMMITMENTS

The corporation entered into a twenty-one year lease with Renfrew Victoria Hospital on May 7, 2007 to lease land which holds the corporation's building. The corporation pays one dollar of rent per year pursuant to terms provided in the lease.

HOSPICE RENFREW INC.

NOTES TO THE FINANCIAL STATEMENTS

FOR THE YEAR ENDED 31 DECEMBER 2018

9. FINANCIAL INSTRUMENTS

Risk and concentrations

Hospice Renfrew Inc. is exposed to various risks through its financial instruments. The following analysis provides a measure of the organization's risk exposure and concentrations at the balance sheet date 31 December 2018.

Liquidity risk

Liquidity risk is the risk that an organization will encounter difficulty in meeting obligations associated with financial liabilities. The organization is exposed to this risk mainly in respect of recurring operating deficits in nine of the eleven fiscal years it has operated.

Interest rate risk

Interest rate risk is the risk that the fair value or future cash flows of a financial instrument will fluctuate because of changes in market interest rates. The organization is not exposed to interest rate risk as at the end of the 2018 fiscal year as it no longer has interest bearing financial instruments.

10. SUBSEQUENT EVENT

In January 2019 Hospice Renfrew Inc. was informed by the LHIN that it authorized one-time funding of \$197,166 to be provided to the organization in the 2019 fiscal year. The one-time funding is to be used for specified capital asset additions and operating expenses.

11. COMPARATIVE FIGURES

Certain comparative figures have been reclassified to conform to the current year's presentation. These reclassifications did not affect the excess of expenditures over revenues otherwise reported for that year.

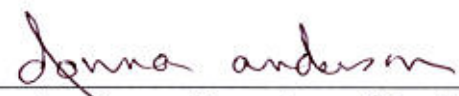
Appointment of Auditor(s)

Resolved that the Chartered Professional Accountants Ferguson & Kubisheski are hereby appointed auditors of Hospice Renfrew for the ensuing year (2019) or until their successor(s) has/have been duly appointed.

Moved by: 
Karen McEwen

Seconded by: 
Gerald Tracey

Approved by: 
Gerald Tracey, Chair of the Board of Directors

Approved by: 
Donna Anderson, Secretary of the Board of Directors

Date: 19 June 2019



EXECUTIVE DIRECTOR'S 2018 ANNUAL REPORT

Executive Summary

It has been an exciting and challenging few months. We have successfully recruited Clinical Services Coordinator and a Volunteer Coordinator. We had a national fundraising campaign, with great success. We are in the process of implementing our Education Plan and we are moving to a Quality Improvement Service Delivery Model. With the assistance of the Board of Directors and their investment of easy to use software. This will assist us identify Performance, Strategic Direction and help us manage Risk.

Occupancy Rate

- 2018 76%
- YTD in 2019 80%. January February at 70%. March April May 86%

Chart displays Resident bed days for the last three years

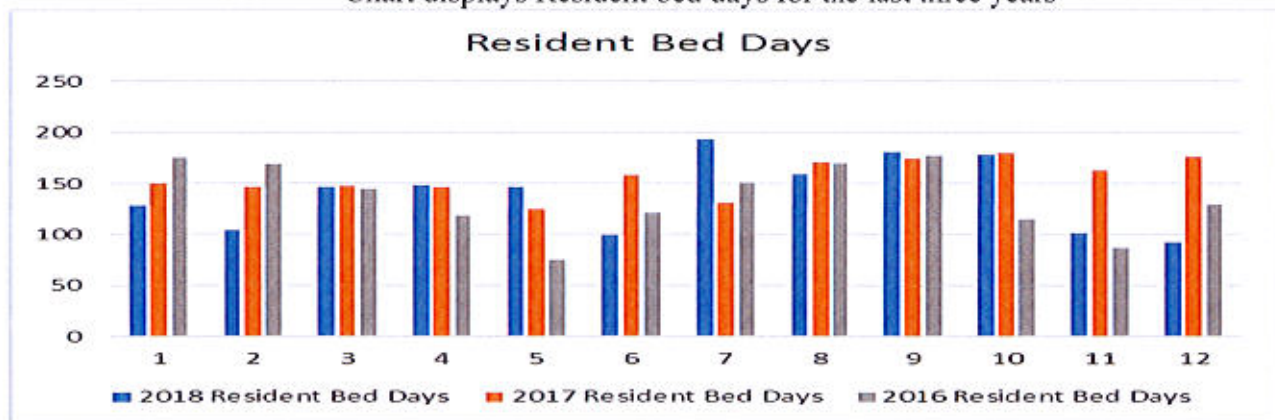
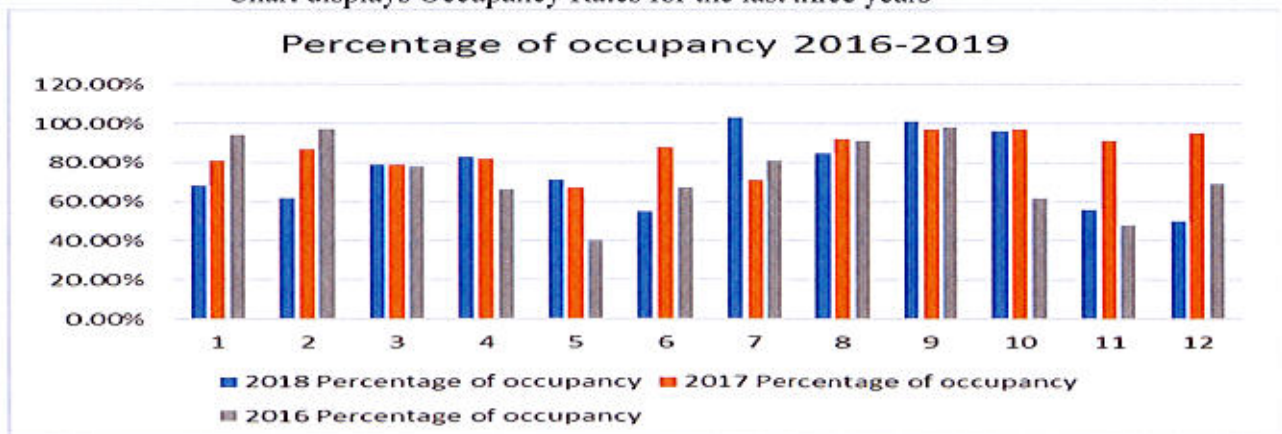


Chart displays Occupancy Rates for the last three years





Occupancy rates are directly impacted by turnover rate. This could be impacted by when a resident is discharged and when we are ready to move a new resident in.

Moving forward we will improve turnover rate and the process for admitting our unoccupied beds.

Outreach Education

We will be developing further our Outreach Education program. This will include the foundational work already started and expanding it further. This will include speaking at service groups, spiritual organizations and engaging the youth of our communities.

Financial

The finance committee will report about the 2018 financial status. In 2019 we will remodel our budgeting process to have input from the frontline staff, Managers and myself.

We are going to review our purchasing habits to look for areas of improvement and implement best practice in our service to the residents, families and staff.

Community partnership and engagement:

We have started to integrate with the other visiting hospice and they have been a great support during this transition. We also participate with the Interest group surrounding the Highway 60 Health Team.

Information Technology Update:

We are developing an online education program to have a standardize approach to orientation, health & safety and compliance with mandatory education for staff and volunteers.

We have invested in Stratim software to improve our Quality program. *"Organizational performance measurement tells us how well the organization is doing at whatever it does. Performance measures describe how the organization defines performance. In the SOAR (strategy, oversight, action and results) framework, performance corresponds with the 'Results' component. It does not deal with the 'Action' component - or what gets done to make things better. Performance focuses on the facts: Are we getting better or not?"* More information will be coming out in the next few months.

We have made a presentation to the Fund Development committee surrounding our fundraising platform and we are hopefully moving towards a user-friendly software



platform. This will work with our existing accounting software and give us the freedom to merge giving accounts.

We are working with Valley Bytes around cybersecurity and CASL compliance. – CASL protects consumers and businesses from the misuse of digital technology, including spam and other electronic threats. It also aims to help businesses stay competitive in a global, digital marketplace. Learn about the legislation as well as how to protect yourself from spam and how to report it when necessary.

Asset Management

With the assistance of this committee we have installed a new fire panel, done a complete review of the existing equipment.

Next steps are to move to adding this to our accounting software to manage depreciation and warranty of these assets.

Sincerely Submitted
Caroline McGee
Executive Director



CLINICAL SERVICE COORDINATOR'S 2018 ANNUAL REPORT

Summary

I was honoured to accept the position of Clinical Services Coordinator just two short months ago. Prior to accepting this role I was a staff member who came in for each shift feeling as though I had a purpose. That purpose was to make a positive difference in the lives of our residents and their families as they journeyed towards end of life. I left every shift feeling as though I had accomplished just that. I didn't give much thought to the "whys and hows" of the accomplishment I felt; I just knew I felt a sense of peace and contentment with the care I had been able to provide at Hospice.

As I ventured into my new role as Clinical Care Coordinator it quickly became apparent how much time and effort went into managing a successful hospice and the strategies that were being developed on a management level that had given me the tools I required to provide exceptional care as a hospice nurse. Though there is much to learn in the upcoming months and years, I feel very privileged to have been given an opportunity to contribute to Hospice in a new and influential way.

Human Resources

2018 represented significant changes for Hospice staff with turnover in staff and management, the implementation of a new schedule and integration of 12 hour shifts, after six months of rotation through the latest schedule, staff have expressed overall satisfaction due to improved home/work life balance and more days off for self-care and preservation. This was realized through a self directed employee survey.

3 of our staff attended the Annual HPCO conference and reported back to our nursing staff about the training they attended. In 2019 we will look at continuing to evaluate the scheduling practices and opportunities to improve. The health care sector as a whole is having a shortage of Registered staff and Personal Support Workers. We will work to be an employer of choice to ensure we meet the needs of our residents. We are looking at implementation of an employee engagement survey and an education plan to ensure we are supporting our staff's clinical practice.

Our nursing team remains committed to ongoing improvement in communication and education in order to continue to deliver exceptional care to our residents and their families. With the development and implementation of a new report sheet, nursing staff have improved communication during shift changes and with interdisciplinary team members to ensure optimal delivery of care. The use of electronic charting was also implemented providing a more efficient exchange of resident information between nursing staff, physicians and counselor. Changes to clinical practices were developed and applied to an improved narcotic administration record resulting in a reduction in medication errors. New care plans were implemented to streamline goals of care and to improve clinical practice regarding nursing assessments and documentation. Next we with the help of our software vendor we will move towards electronic medication administration.



These changes will position Hospice to be in compliance with College of Nurses Standard of Care while contributing to the enhancement of resident outcomes. As well, copies of our evolving admission agreement and select policies, including updated smoking policies, are now provided to our residents and families on admission. This practice contributes to an improved understanding and compliance with hospice principles and ensuring we are using best practice guidelines.

Equipment

New equipment has been purchased to contribute to the comfort and safety of Hospice residents. The purchase of a bladder scanner will assist nursing staff in non-invasive determination of volume of bladder content. A new portable lift was also purchased to replace outdated lift systems. The new lift mechanical sit to stand lift. This lift comfortably assists residents from a sit-to-stand position and while giving us the ability to measure a resident weight, if required, during use. This helps in the calculation of our residents' medication administration. Going forward In-service training is currently being organized to ensure safe and efficient use of the new equipment.

"We, as a family, always felt welcome to visit and stay as long as we wanted. It truly meant the world to us to be able to spend every second with her. Staff truly made us feel at home during the worst time in our lives. The care was excellent. The staff were excellent."

Caregiver Survey Results 2018

In 2018 McMaster University discontinued its pilot study which surveyed bereaved caregivers to assess the experience of the caregiver and resident end of life. Of the surveys sent out, 12 were returned for analysis. The participants rated the level/quality of care their loved one received during the last three months of life. This included care provided by CCAC, family physicians, cancer centers, long term care facilities, hospitals and finally Hospice Renfrew.

Hospice Renfrew received an average of 92% of excellence in categories of Provision of Respect and Dignity as well as Overall Care Provided. 83% excellence in categories of Relief of Physical Pain and Management of Other Symptoms. Hospice Renfrew received an excellent rating for Emotional Support in 75% of surveys received and 58 % in Spiritual Support. It is important to note that in all categories, ratings were significantly reduced due to questions being left unanswered or not applicable in individual circumstances.

The survey results confirm the provision of exceptional care at Hospice Renfrew throughout the continuum of care.



The Grief and Bereavement Team

This team includes Tracey Cummings and fully-trained hospice grief and bereavement volunteers are Darlene Meleskie (former Hospice RN), Barbara Gallagher, Susan Kuzella, Barbara Duncan (RN), Carol Ann Simson (RN) and Maureen Brennan. Working together as a team, we offer a range of grief and bereavement services pre-admission, during residence and after a loss to provide a full continuum of care:

- **Tour and talk**
An opportunity for potential residents/family members to meet the Resident and Family Support Counselor/staff/volunteers to tour the hospice, to discuss “fit” and to address any questions or concerns about hospice palliative care.
- **In-house visits with residents and family members**
Resident and Family Support Counselor provide psycho-social, spiritual and grief support to hospice residents and their family members while the resident is in care at hospice. Visiting support also provided by grief and bereavement volunteers. Home locations of residents in 2018 include: Renfrew, Arnprior/Braeside, Pembroke, Eganville, White Lake, Golden Lake, Palmer Rapids, Out of area, Beachburg, Foresters Falls, West Meath.
2018: 31 residents/families
- **Caregiver Evening Away**
This self-care event held a few times a year at hospice is an opportunity for caregivers to have a home-cooked meal, care services (reflexology, manicure/facials, massage, reiki and therapeutic touch), emotional support and some laughs. Care specialists donate their time. Hospice volunteer care providers are Jan Bujold, Judy Faught and Carolyn Gendron. Hospice staff care providers are Sabrina Guyea, Amy Barr and Tracey Cummings. Community care providers are Tracey Liebig (From the Ground Up) and The Beauty Barr. We try to extend the opportunity to those on the wait list needing additional support and other caregivers in the community.
1 evening held in 2018/2 caregivers from hospice in attendance
- **Phone Support Program**
Three trained grief and bereavement volunteers provide four or more bereavement calls to each identified family member for one year following the death of their loved one at hospice. This time can be extended for those who require more support. People are referred to the monthly support group and for one-on-one support as needed. Feedback from participants is overwhelmingly positive.
68 people contacted in 2018
- **Monthly Grief Support Group**
Two volunteers and the Resident and Family Support Counselor facilitate two monthly drop-in support groups for bereaved persons. The second group now held in the evening at hospice is a new addition since October 2018. These groups are open

to anyone in the community. At Christmastime we also hold a special holiday support group which is always well attended. We are grateful for the free use of space at the Renfrew Library for the afternoon group and to Valley Heritage Radio and Whitewater Events for continuing to promote the support group in the Ottawa Valley.

15 groups held in 2018: 37 participants; 82 interactions

Referrals - direct from hospice: 14; indirect from hospice 4; from community 19

- **“Celebration of Life” – Memorial Service**

This is our annual community gathering of bereaved families and friends, featuring a memorial to lost loved ones, music, prayer, poems, social time and support.

Additional resident and family support volunteers joined the team again this year to create this special event. New this year, was the venue at Bonnechere Manor, which was an intimate, warm setting and we incorporated a decorative sand pouring ceremony for family members to mark the journey of their loved one. Again this year, staff RN Natalie Walters and her sister Tierney graced us with their angelic voices accompanied by guitar. Father Brennan joined us in prayer and gave a wonderful tribute to recently deceased hospice volunteer Joan Sherlock. Following the event, a compilation of the order of service, readings and photos were forwarded to those families who could not attend (25 families).

48 hospice families were invited- 26 responded; 22 did not; 90 guests attended event, plus staff/volunteers; 23 bereaved families represented of 48

- **Grief and Bereavement Counseling**

23 individuals served formally through 1:1 sessions provided by Resident and Family Support Counselor. Service provided for served hospice family members requiring additional support and to select others in the community by referral. Referrals received from local family doctors, the LHIN, Renfrew County Mental Health Services, The Ottawa hospitals. Sessions conducted in person at hospice, at hospital, in the home, or by phone or email

15 people connected with hospice directly or indirectly and 8 people through external referral.

Ages served: 1 child, 1 youth, 15 adults, and 6 seniors (65+)

Locations of participants include Renfrew, Arnprior, Out of the area, Cobden, Petawawa, Eganville, White Lake, Pembroke.

In addition, 41 individuals were served informally through phone support or brief 1:1 support

- **Grief and Bereavement Outreach and Training 2018 by Resident and Family Support Counselor**

Formal In-house training to 9 new volunteers

Eganville seniors (10)

Sisters of St. Joseph Pembroke (22)

Willis College Arnprior PSW Program (13)



As we move forward, let us acknowledge that with our limited resources, we are doing a lot to help people and families in Renfrew County as an organization. We must remember always to take care of ourselves to keep our teams and spirit strong. It is well known that there is a shortage of free grief and bereavement support in this county, so there will always be more we can do. I sincerely feel blessed to be part of Hospice Renfrew.

Above and Beyond

I am in constant veneration of the day-to-day activities that transpire at Hospice. We have an exceptional interdisciplinary team that envelopes clinical excellence to assess, intervene and plan for best possible outcomes. Clinical services are delivered with the utmost respect and compassion. The result is preservation of dignity and enhancement of quality of life for Hospice residents and positive experiences and memories for their loved ones.

In recent weeks, we provided an opportunity for a resident to share his daughter's wedding day by hosting a small wedding in our common room. Another resident celebrated a wedding anniversary at Hospice with renewing of vows ceremony and the release of butterflies on Hospice grounds. Very recently a new resident of Hospice enjoyed a birthday celebration with her family in our charming gazebo. The celebration of milestones at Hospice Renfrew reminds us all to live well and to celebrate life at every stage.

"The care my brother received at Hospice was awesome. The employees there are truly angels."

"Hospice was loving, caring, attentive. Staff are wonderful people."

"The care my husband of 62 years received at the Renfrew Hospice was the greatest and the way I was treated was excellent. I've nothing but good words to say about it."

"My feelings were that they are a godsend."

Respectfully Submitted
Cindy Stafford
Clinical Services Coordinator



VOLUNTEER COORDINATOR'S 2018 ANNUAL REPORT

Volunteer Program

Commitment remains strong from our volunteer group. 2 volunteers retired from the team in 2018 after completing 10 years of service.

In 2018 our volunteer hours were down from 2017 by 656.45 hours; as well as, number of people volunteers were in contact with was down in 2018 from 2017 by 646.

In 2018 gardening team spent 150 hours over the spring and summer revamping the gardens, keeping up with weeding, watering and ensuring all looked great for the garden tour that was held in June. The team also planted 6 new evergreens that was donated by a family member. They were later enjoyed by all when the Christmas lights were lit up.

Hospice Renfrew was proud to nominate Pat Debenham for the 2018 June Callwood Award. This was given to the individual who constantly extends herself beyond the usual requirements of the volunteer. Pat joined Hospice in 2008 and not only does volunteer on the front lines to support residents and families, she also is a member of our reception team. Pat attended the annual HPCO conference that was held in April 2018.

Volunteers in our Grief and Bereavement attended a Grief education day in Ottawa. The course taught participants how facilitate a Grief and Support group. Our monthly Grief and Support is now held offsite as well and has grown to approximately 10 participants.

There were many volunteers who helped out in the 3rd party event like the Golf Tournament; as well as, starting their own fundraiser for Hospice – cottage getaway. 10 volunteers set up at the Renfrew fair to sell quilts and raffle tickets.

In the fall we had a training session, which was a planned volunteer education day to support their work. Some volunteers did attend.

As of June 13th, 2019 our current active roster is 62 due to some have taken a leave for summer and or personal reasons. We have 2 new volunteers join us in January 2019, and I have had 2 new calls showing interests in joining.

So far this year we are at 2606.25 hours and have had contact 9203 from January until the end of May 2019.



On May 5th, 2019 we held our Hike for Hospice which was a great success this year raising \$124,000.00.

Our volunteer appreciation dinner was held on May 22nd, 2019. We had around 40+ attendees. All the volunteers who attended; as well as, who was not able to make it received a jar of honey in appreciation for all they do for hospice. The honey was made locally and was donated by a local family. The special evening was very well received.

Some on going plans for the year going into 2020 include:

- Updating their files.
- Providing all with proper training from Saint Elizabeth online learning system for volunteers thru HPCO.
- Inquiring about having a course either at hospice or locally for food and safety handling course.
- We will be recognizing 5 year and 10 year commitment to Hospice.

Fundraising

Edward Jones Classic Golf Tournament is well on its way, with 50/50 and raffle tickets being sold for a chance to win a Bunkie. This was gratefully donated by Ken Dillabough. Been communicating with Kevin Cherry who is the organizer if this year's golf event and looking forward to this big day in August 2019.

Hospice is all about life and living not just death. I have witnessed such an amazing group of dedicated men and women in the very short time I have came on as the Volunteer Coordinator. Everyone here helping in all areas. Whether it be gardening, to baking after an already full afternoon of resident and family support always smiles and glad to be here. We have a wonderful group of volunteers. It has been such a joy getting to meet them all and being part of Hospice Renfrew.

Kind Regards,
Debroah Coelho
Volunteer Coordinator



EXECUTIVE COMMITTEE 2018 ANNUAL REPORT

I've heard it said *the best way to find yourself is to lose yourself in the service of others*. So with that in mind, I want to express my heartfelt thanks to each and every member of the board and the many individuals who comprise the volunteer corps at Hospice Renfrew. Volunteering is one of the greatest contributions individuals can make to facilities like this, our community, country and society in general.

It is only because of your generous sharing of time, talents and in many situations, money, that Hospice Renfrew exists for the purpose of providing terminally ill residents with the opportunity to pass from this life with dignity, in the comfort of these premises surrounded by a team of loving, dedicated and committed staff who do everything they can to ensure the well being of those who occupy our rooms.

While Hospice Renfrew becomes a home away from home, everyone here is committed to meeting the needs of individuals. So many times I meet families who have used this facility and it fills me with pride that I belong to such a wonderful organization. To hear them sing the praises of Hospice Renfrew is a wonderful testament to our outstanding staff.

It reminds me of another reference to the contributions of volunteers: Volunteers don't get paid, not because they are worthless, but because they are priceless.

To our staff, I express on behalf of the board, our gratitude for providing the services you do. Granted, you are paid, but it takes special people to work in this kind of facility and setting and I thank you all for carrying out your duties professionally and going the extra distance to truly "adopt" our residents and treat them like family, with the respect and dignity they deserve.

It has been a year of change for Hospice Renfrew as we said good-bye to Maureen Sullivan Bentz and Judy Cobus. Both were loyal and dedicated employees who often times worked under duress caused by uncertainties in funding. Both have moved on to new healthcare positions. It is my hope and wish we will soon be properly funded allowing us to devote more time to governance and less time rising to the challenges of finding operating funds.

I want to say a special thank you to Donna and Bill for all of their time in the last year attending executive committee meetings between board meetings and dealing with several issues that required immediate attention. There were times when we felt overwhelmed, frustrated and burdened with a workload that seemed unfair to volunteers.

That is behind us now and our new administrative team is doing an excellent job leading Hospice Renfrew into the future. I want you to know how much I enjoy, as your chair, working with our new Executive Director, Caroline McGee, and how amazed I am at how fast she become familiar with our operations. She grasped the workings of this facility



quickly, and with her past experiences in the health field she has also been able to bring about new ideas and changes I feel will be good for Hospice Renfrew. I must also say how surprised I was to learn a few things about her. When we met for the first time for an interview, she didn't appear to be the type of person pursuing her pilot's licence, nor the kind of person who would sit down to a juicy burger, French fries and gravy, all washed down with a can of Pepsi! I look forward to a wonderful relationship with our new ED.

I would also like to welcome again Cynthia Stafford to the position of clinical director, and Deborah Coelho as volunteer co-ordinator. Again, we look forward to a long and fruitful relationship with both of you.

To our medical director, Dr. Philippe Pinard, I express our gratitude for his role here at Hospice.

Thank you also to Helen who has been here from the very beginning and continues to be a wonderful resource person along with her other duties.

As we complete another term it is with a degree of sadness that two of our current board members will not be at this table when we return for our next meeting. Karen McEwen and Matt Beimers are retiring from the board. We extend our thanks to both of them for their dedication to Hospice Renfrew and their contributions to its operations.

I would like to welcome Kevin Cherry to the board. Having some familiarity with his family, I know he will be a great asset to Hospice Renfrew.

We are in uncharted waters as major changes are rolled out by the new government over the next several months. I don't think any one of us has the foggiest idea where residential hospices will end up in the mix. But I am optimistic the ministry will recognize the value and importance of Hospices like this one and ensure we are more fairly funded in the future so that we can direct most or all of our attention to governing rather than worrying how much money we have left in the bank.

So once again to each and every one of you who is part of this wonderful facility and team, I express my heartfelt thanks.

I will leave you with this thought:

No matter what happens or how bad it seems to be today, life does go on and it will be better tomorrow.

***Thank you
Gerald Tracey, Chair***



FINANCE COMMITTEE 2018 ANNUAL REPORT

Members of the Board, Committees and the Public:

2018 proved to be a challenging year. The continued efforts of the members of all Committees and staff resulted in an almost break-even picture from a financial perspective. We achieved our operating budget objectives while maintaining our principle goals of Care, Comfort and Compassion.

Commenced in 2016, the basement renovation project was continued in 2017 and completed in the early months of 2018, providing a modern security system, air quality system and a first-class board and training facility. This project was completed at a cost of approximately \$270,000 with third party contributions of \$200,000. In January 2019 Champlain LHIN provided Hospice Renfrew with funding of approximately \$70,000 to finance the shortfall.

Revenue sources continue to be a major challenge for the Committee and the Board. The provincial funding formula is not adequate for a six-bed residential hospice. Ongoing discussions with the provincial elected representatives and Champlain LHIN have been unsuccessful in obtaining required funding to sustain operations. The Board Chair and our Executive Director continue to explore alternative funding scenarios with other health care providers.

In April 2019 Hospice Renfrew adopted the following motion: "That Hospice Renfrew advise Randy Penney at Renfrew Victoria Hospital that it is willing to participate in the development of an Early Adopter – Ontario Health Team model, subject to a satisfactory review of the terms and conditions of the Call for Proposal from the Ministry of Health and Long-Term Care; Hospice Renfrew has provided input to the Highway 60 Health Team submission." Hospice Renfrew awaits further information on status of the early adopter submission.

The 2019 budget estimates are being achieved; however, cash flow may be problematic in 2021 based on current financial projections. The proactive approach by the Board to address this issue hopefully results in the continued delivery of the high level of service of palliative care to our community.

The Finance Committee continues to collaborate with the other Committees and staff as required.

Thank you to Board Chair Gerald Tracey, Jim MacKillican, Charles Bulmer, Doug Legg, Leo Hall and Matt Beimers for their input and support.

Bill McMahon, Chair and Board Treasurer

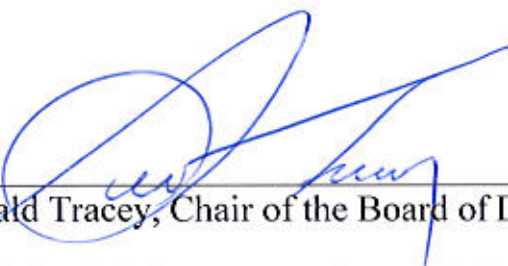


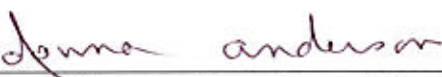
Motion: Signing Authority 2019-2020

Resolved that: Hospice Renfrew entrusts Bill McMahon as Treasurer of the Board of Directors, Jim MacKillican and Doug Legg as members of the Finance Committee, and Caroline McGee, Executive Director, will have signing authority on all cheques and financial transactions of the organization with the second signature from any of the above mentioned with signing authority.

Moved by: 
Karen McEwen

Seconded by: 
Donna Anderson

Approved by: 
Gerald Tracey, Chair of the Board of Directors

Approved by: 
Donna Anderson, Secretary of the Board of Directors

Date: 19 June 2019



FUND DEVELOPMENT COMMITTEE 2018 ANNUAL REPORT

Thank you to the Renfrew and Renfrew County community for the tireless, enthusiastic financial support given to Hospice Renfrew over the past year and indeed, the past many years. The revenue from this source amounted to about \$525,000 and we are on track this year to equal or exceed that total!

LHIN grants were received for \$161,000 (general expenditures), \$17,500 (fire panel) and \$18,210 (equipment and furnishings). Discussions are underway regarding the nature and availability of funding going forward.

2018 special fundraising events included: Hike for Hospice - \$138,000, Holly Jolly Radiothon - \$60,000, Aikenhead's golf tournament - \$31,000, Dunbar barn sale/hike team - \$25,000, Vacation Lottery - \$17,240, Tim Horton's cookie campaign - \$15,000, Civitan Club fishing derby - 10,000, Celebration of Life - \$9,693, Secret Garden Tour - \$4,000. Several other community events and fundraising efforts brought in much appreciated revenue to Hospice over the year.

2018 was the last year for the Aikenhead golf sponsorship for Hospice. Thanks are due for their several years of support through this popular event. Edward Jones held their initial golf tournament for Hospice in 2018 (\$4,200) and plans are well advanced for this year's event, already over subscribed. Thank you to Kevin Cherry and his team. We look forward to a long, fruitful community relationship.

Many organizations and companies in the community provide in-kind support and direct sponsorship support to Hospice and Hospice related events as well. Again, much appreciated – we cannot survive without this sort of assistance.

Special thanks are due to the residents of the County and beyond who regularly direct a portion of their charitable dollars to Hospice. Government financial support does not cover all of our operational expenditures. Also, thanks to those who remember Hospice in memory of a friend or loved one who was resident here at Hospice this past year or earlier.

The current membership of the fund development committee includes community members Jamie Cybulskie, Suzanne Gaudet, Connie Legg, Owen Snider and Cathy Watson along with senior Hospice staff, Caroline McGee and Debroah Coelho. Many thanks are due to members Karen McEwen, Judy Cobus and Maureen Sullivan Benz who served on the committee over the past year providing valuable input to our discussions and supporting fund development activities.

Submitted by:
Owen Snider, Chair



*Tabled until
next monthly
meeting*

Motion: Micharity Software Implementation

A meeting was held with the Fund Development Committee and the operations staff which new Micharity software, for Fund Development, was introduced. There would be significant savings in 2019 and 2020. Up to 40% annually and we would have a better product for fundraising.

We recommend that the operations staff enter into an agreement and develop a plan to transition to the new software.

Resolved that: Hospice Renfrew implements Micharity Software for quality improvement with fund development.

Moved by: _____

Seconded by: _____

Approved by: _____
Gerald Tracey, Chair of the Board of Directors

Approved by: _____
Donna Anderson, Secretary of the Board of Directors

Date: _____



ASSET MANAGEMENT COMMITTEE 2018 ANNUAL REPORT

Committee Members:

George Wade

Millie Ritchie

John Bistko

Maureen Sullivan Benz

It has been a comparatively quiet year for the Asset Management Committee following the completion of the basement renovation. This year there have been some kitchen appliances replaced and some minor repairs to our building.

As a result of the annual fire alarm inspection, our fire alarm system was deemed out of compliance. The system has been replaced, with the cost covered by a Government of Ontario grant.

A retractable awning has been installed, to provide shade to the patio area. Already our residents and visitors have been enjoying this new feature.

Under Millie Ritchie's guidance the committee has been updating the inventory of our assets and the maintenance contact list.

The committee would like to thank Helen McGregor and Colette Yemen for their ongoing attention to our maintenance requirements.

The Garden Committee continues their hard work to maintain the excellent gardens and grounds that enhance Hospice. Their efforts are much appreciated by the residents, their families and visitors and our staff and volunteers.

George Wade

Chair



MEDICAL DIRECTOR's 2018 ANNUAL REPORT

We continue to accept patients for end of life care and pain and symptoms management. The patients come from all areas of the county of Renfrew. The beds have been mostly all occupied.

As before, we continue to prioritize our admissions based on diagnosis, location of resident (home vs facility), and type of care (end of life vs. symptoms management and respite).

The community family physicians continue to follow their own patients. Patients from other communities are followed by one of our regular hospice physicians: myself, Dr. Bishop, Dr. Langlois. We continue to have support from the Pain and Symptom Management Team at Elizabeth Bruyere in Ottawa. In 2018, we implemented a new cannabis policy. There has been no significant concerns regarding it.

Sincerely,


Philippe Pinard
Medical Director




Appointment of Medical Director

Resolved that Dr. Philippe Pinard be appointed as Medical Director for the upcoming year (2019) or until a successor has been duly appointed.

Moved by: 
Bill McMahon

Seconded by: 
Karen McEwen

Approved by: 
Gerald Tracey, Chair of the Board of Directors

Approved by: 
Donna Anderson, Secretary of the Board of Directors

Date: 19 June 2019



Appointment of Delegate Medical Director

Resolved that: Dr. Monica Bishop be appointed as Delegate Medical Director for the upcoming year (2019) or until a successor has been duly appointed.

Moved by: Owen Snider
Owen Snider

Seconded by: Donna Anderson
Donna Anderson

Approved by: Gerald Tracey
Gerald Tracey, Chair of the Board of Directors

Approved by: Donna Anderson
Donna Anderson, Secretary of the Board of Directors

Date: 19 June 2019



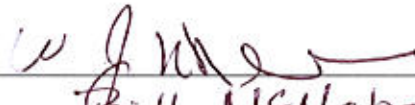
Motion for Appointment of Legal Counsel

Resolved that John M. Cooke be appointed as legal counsel on a fee for service basis by the Board of Directors of Hospice Renfrew for the upcoming year (2019) or until a successor has been duly appointed.


Moved by: _____


Kevin Cherry

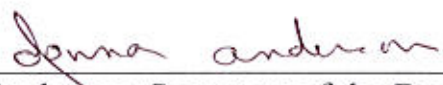
Seconded by: _____


Bill McMahon

Approved by: _____


Gerald Tracey, Chair of the Board of Directors

Approved by: _____


Donna Anderson, Secretary of the Board of Directors

Date: _____

19 June 2019