

Hospice Renfrew Annual Reports 2014

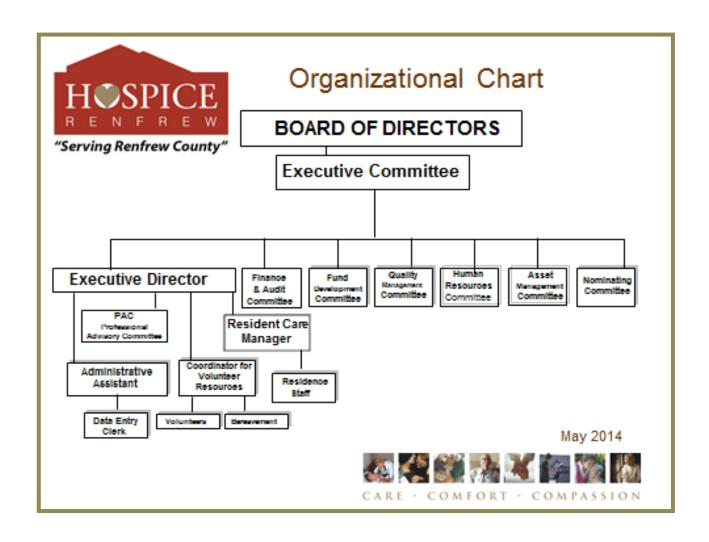


MISSION AND OBJECTIVES

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







EXECUTIVE DIRECTOR'S 2014 ANNUAL REPORT

Hospice Renfrew Mission Statement

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Objectives:

- 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 resident;
- 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 their grief;
- To respect and work with all other disciplines and agencies, encouraging, through education and good communication, a wider knowledge base of palliative care

EXECUTIVE DIRECTOR: Report

Hospice Renfrew continues to be a leader in the provision of end of life care in Renfrew County and across the province and has participated in local ,regional and provincial committees and working groups with a focus on the unique needs of rural hospice palliative care services. Hospice is a vital community hub for palliative and bereavement services dedicated to improving the quality of living and dying.

It's all about caring for residents and families. In the comfortable home-like setting of Hospice residents and families are an integral part of compassionate end of life care that celebrates life. Our excellent team of nurses, physicians and volunteers work diligently to help our residents and families come home for final closure and as fully as possible live remaining precious last moments without suffering.

In 2014 Hospice Renfrew provided residential end of life care and support to 67 residents and their families. Since our doors opened in January 2008 we have served close to 600 in house residents and families. The total number of residents served has



been consistent and risen slightly since opening in 2008, although lengths of stay have decreased significantly.

Funding was received from the LHIN to broaden capacity of the volunteer and bereavement programs and with the support of community partners, provided services to a growing number of those who are in need free of charge.

In Closing:

I am very pleased to welcome Maureen Sullivan-Bentz to the role of Executive Director for Hospice Renfrew. Maureen brings with her extensive experience and expertise in the field of health care and I am confident in her leadership to lead Hospice Renfrew through future development and success.

It has been a positive experience to serve as the founding Executive Director of Hospice Renfrew. Thank you to all the staff, volunteers and the Board of Directors for giving me the opportunity to lead such a wonderful organization as well as your dedication and support over the years. I sincerely wish you every success in your future endeavors.

Respectfully submitted;

Diane Caughey, RN, BScN Executive Director



RESIDENTIAL CARE 2014 ANNUAL REPORT



"The care was beyond our expectations. The love and kindness shown will never be forgotten."

The Care We Provide:

Our team is honoured to provide care, compassion and comfort free of charge to residents and families.

This year our team provided high quality palliative care to 67 residents and their families.

Our Staff:

We have a very active social committee for our staff at hospice – celebrating things like nurses week and our annual summer party. We hold regular monthly staff meetings and have been using these as opportunities for case-based learning through reviews and discussion. We also recognize the specific physical and emotional challenges this kind of work entails and are refining our staff debriefing methods.

We continue to receive excellent support from dedicated physicians who provide 24-hour care to hospice residents and families

Projects:

Ceiling lifts have been installed in two resident rooms through generous funding from the OutCare Foundation. The use of a ceiling lift system greatly minimizes the impact of transfer and increases the level of comfort to the residents.

LHIN funding was received for the enhancement of the volunteer and bereavement programs to meet prevailing and future Hospice Renfrew and community needs through collaborative partnerships with Carefor and local community support service agencies.

Education:

The care team is continually striving to improve care and implement best practice. Staff are actively involved in the occupational health and safety committee, regular staff meetings and fundraising events.



A total of 72 Staff and volunteers continue to benefit from ongoing palliative education through the generous contributions from the Whitham family education fund.

The Telelink system provided for us by the OutCare Foundation and Trillium continues to allow us to grow immensely with our educational opportunities. 341 hospice and community participants attended palliative education in 2014 through the use of this technology. Many of these events, including Community clinical rounds, directly impact the well-being care of clients in hospice and in the community. We are continuing to explore ways in which this technology can help alleviate some of our specific rural challenges and it is very exciting and promising.

Through successful partnerships with University of Ottawa, Algonquin College and Everest College, hospice also provided mentoring and preceptorship opportunities at hospice for future care providers.

Seven out of 13 Registered Nurses (54%) and 8 hospice-affiliated physicians have

completed the LEAP (Learning Essential Approaches to Palliative and End-of-Life Care) standardized education. We are also very proud to have 1 RN and Dr. Langlois certified as LEAP instructors.

"Other than home, Hospice Renfrew was a beautiful, wonderful place to spend our last days together. Thank you."

2014 - Who We Cared For:

- o Total number of residential residents and families served: 67
- o Total number of referrals: 115
- o Total number of deaths before admission: 40

Residential profile

- Average Length of stay is: 23 days
- o Average occupancy rate for 2014 of 87%
- 39% of admissions from the town of Renfrew
- o **61%** of admissions from remainder of Renfrew County.
- o 32% of residents were between the ages of 19-64
- o 68% of residents were over the age of 65
- Malignant disease: 86%
- Non-malignant disease: 14%
- o 6% of all admissions were discharged back to the community
- 44% of admissions from home
- 56% of admissions from hospital

"I am so thankful to all the staff for the wonderful care provided to my Mom, as well as compassion to my family during this difficult time. Thank you! What a wonderful caring place."



Family Surveys 2014:

I am also very proud to announce that we have received overwhelming positive responses from Family Satisfaction surveys. We realize, however, that we must continually strive to improve services and respond to the needs of our residents and families.

Thank you for the opportunity to serve the residents and families of Hospice Renfrew.

Mandy McGregor, RN, BScN, CHPCN© Resident Care Manager



VOLUNTEER RESOURCES 2014 ANNUAL REPORT

<u>Volunteers at Hospice Renfrew</u>: We currently have 61 volunteers to date. 11 new members were trained in the fall of 2014 and they have been integrated into the different teams with the exception of 3 people. These 3 outstanding either have been away for the winter or have had other commitments which have prevented them from starting their volunteering. Total number of volunteer hours donated:

2011: 3212.75 (**1.64** full time equivalents) 2012: 4939.75 (**2.5** full time equivalents) 2013: 5803 (**2.97** full time equivalents) 2014: 5867.25 (**3.0** full time equivalents)

Team Meetings: Since taking over as Interim Volunteer Coordinator, I have met with all the volunteer teams and we have discussed some of the activities which will be taking place throughout the year and how we can help in a volunteer role, for example baking for the Hike and helping in other ways with the Hike. We are forming a staff/volunteer team and will have t-shirts indicating such. The condition and upkeep of the gardens are a concern with the gardening team, so discussions continue with that. We will be having another meeting on April 8/15.

<u>Surveys:</u> I have not done any surveys or a newsletter this year and in discussion with Diane Caughey, we felt that these could wait until the new Volunteer Coordinator takes over. I do keep in close contact with the volunteers either on a personal basis, by e-mail or telephone. Everyone has been very supportive and helpful. We had one person from the Reception team die, Ilene Lemke.

Special Events: 1) The annual Celebration of Life was held on Sept. 28/14 with the largest attendance of family members ever present at a C of L. There were 75-80 members present and the percentage od families represented was 26% which has been consistent over the years. The staff and volunteers contributed by reading Reflections, participating in the Rose ceremony, sending out invitations, helping with setup before and tearing down after plus having baked goods for the social following. All family members present expressed their thanks and appreciation for the care and support of Hospice and for the celebration.

- 2) <u>The Christmas Appreciation Celebration</u> went well and was enjoyed by all. The Chinese gift exchange continued to be a fun event and Diane Caughey had a great quiz.
- 3) The Spring Appreciation Tea will be held on April 22/15 and this year we have 5 volunteers who will receive their 5 year awards. We will have a guest speaker, Sharon Carstairs coming to speak to us.
- 4) A workshop called "Mourning and the Holiday Season" facilitated by Ian Henderson, Life Coach and Grief Educator was held on Nov.26/14 in the evening. It was well attended by the broader community and many vocally expressed their feelings of varied forms of grief.

Recognition Events: Two volunteers have been nominated for the OutCare Foundation Bursary to attend the Annual Palliative Care Education days in May 2015. Again, we have a wonderful volunteer who will receive the June Collwood award on April 19/15 in Toronto. We also plan to send 2 or 3 volunteers to the 3 day training of advanced Grief and Bereavement at the Ruddy Shenkman Hospice in Kanata. This is still being organized with the volunteers.



<u>Grief and Bereavement:</u> Carol Ann Simson sees the residents 3 times a week and has been well accepted by the residents and families. She is very unassuming and gently suggests how problems can be handled without being intrusive. She has listened to some family concerns and given suggestions as necessary. She has also seen two clients from the community which has proven very helpful. The G&B program is still evolving and will be an ongoing project in the future.

Darlene Meleskie, Interim Volunteer Coordinator



EXECUTIVE COMMITTEE 2014 ANNUAL REPORT

This has been a year of transition for Hospice Renfrew.

Our fiscal year started by welcoming four new members to our Board of Directors. These talented and dedicated people have quickly taken on the challenges and advisory responsibilities of voluntary Board membership.

One of the major accomplishments of our Board of Directors this year was the creation of a Fund Development Committee. This team has helped the Board develop a strategic plan by focusing on communication priorities to attract funding, strengthen our reputation and build the Hospice Renfrew brand.

A great deal of time and energy was involved in the recruitment and hiring of our new Executive Director. Diane Caughey had been very gracious to give us six months' notice of her pending retirement, and as a recruitment committee we were determined to find the right person with the right skill set to move forward with the amazing work that had already been done to make our Hospice second to none.

We are fortunate indeed to have Maureen Sullivan-Bentz as our successful candidate for this position.

Our next challenge will be to recruit and hire a volunteer coordinator to continue with the incredible work our volunteer teams contribute on a daily basis. Many thanks to Darlene Meleskie for taking on a six month contract to oversee this position. The volunteer programs are doing well and flourishing under her direction.

The Hospice could not function without the dedication and hard work of our staff and volunteers. This has not been an easy year for all involved, yet our patients and families were well cared for, and the organization has continued to reflect the priorities of Care, Comfort and Compassion.

On a personal note, special thanks to Helen McGregor our administrative assistant. It would be interesting to know how many times in a day someone says "ask Helen...she will know" and indeed she usually does!

Hospice Renfrew is not a house or a facility, it's a group of people who work together to ensure that families are able to spend their last days surrounded by Care Comfort and Compassion. It's a privilege to be part of such a place.

Connie Legg Board Chair



FINANCE COMMITTEE 2014 ANNUAL REPORT

2014 in Review

- * Completion of yearend financial statements and audit files in January 2015
- * Audited 2014 financial statements completed and received in February 2015
- * Review of finite limit of funds under current funding formula
- * Continued operation of fund raising bank account by Doug Legg
- * Continued financial advice provided to Diane and Helen

2015 Challenges

- * Adoption of 2015 financial budgets (adopted in February)
- * Continued Provincial funding formula consultation
- * Assist fund development Committee to develop financial strategies including growth of the Rural Reflections Donor Wall and other fundraising initiatives
- * Forecasting of future financial requirement to ensure Hospice goals are met
- * Continued support to other committees and staff on financial matters
- * Review of financial capacity to fund 2015 and future years' employee compensation policies

Thank you to Connie Legg, Chair person, Committee members; Jim MacKillican, Charles Bulmer, Doug Legg, and Karl Murphy and members of other committees for their input and support.

The committee thanks Diane and Helen for their support and guidance.

Bill McMahon Board Treasurer



FUND DEVELOPMENT COMMITTEE 2014 ANNUAL REPORT

The Fund Development Committee focussed its time on two major projects this past year. The first represented a significant effort by the committee with respect to the development of a new three year strategic communications plan. Over the summer and fall the committee utilized an accepted communications methodology and framework to identify the following:

- Our communications objectives;
- What messages we want to deliver and want understood;
- Identify the people this information must reach and influence;
- Determine the communications channels to use;
- Ascertain work to be done, timelines resources needed; and
- Create a three year plan

The draft Communications Strategy was the major focus of the Hospice Annual Board Retreat held on November 24 at the Galilee Retreat Centre in Arnprior. During our plenary and lively break out sessions Board members provided constructive feedback. We also identified and prioritized projects needed to be completed over the next three years as part of the plan.

The final Communications Strategy was approved by the full Hospice Renfrew Board at its December 2014 meeting. Since that time the Fund Development Committee is addressing the possibility of developing Trillium Grant proposals for several of the identified projects including: the update of Hospice Renfrew web site, and communication and fund development functions.

The second major effort focussed on elevating the profile and contribution of Hospice Renfrew to major service organizations in our communities. Committee members met with Rotary and Lions chapters over the fall and winter months. Our presentations focussed on the importance of palliative care to Renfrew County residents and how Hospice Renfrew is playing a leadership role in the delivery of palliative care. We were overwhelmed by the response and support received. Rotary donated a cheque in the amount \$8000.

Also we are delighted to announce a \$30,000 five year financial support from six Lions Chapters in Renfrew County. The Lion's chapters recognized for their collaboration in support of palliative care in Renfrew County include: Renfrew, Arnprior, Calabogie, Douglas, Beachburg, Denbigh/Griffith. Over the coming months Hospice Renfrew will refurbish each of its six rooms for residents and dedicate each one to the aforementioned Lions Chapters. A special dedication ceremony will be held on June 4, 2015 at Hospice Renfrew to recognize the \$30,000 five year financial support by the Lions.



It has been a very productive inaugural year for the Fund Development Committee. As Chair I would like to acknowledge the outstanding contribution of all committee members for their leadership and contribution. However, I believe a final note of recognition is due to committee member Mr. Doug Hewitt White for his contribution in the development of Hospice Renfrew's three year Strategic Communications Plan.

Don Di Salle Chair



HUMAN RESOURCES COMMITTEE 2014 ANNUAL REPORT

The Human Resources Committee consisted of Norah Hewson, Donna Anderson,
Sharon Blemkie and Bill McMahon. The committee met regularly to review and
recommend human resources policies to the Board of Directors for their consideration.

2014 presented numerous human resource challenges as the Board strived to replace our retiring Executive Director. The transition to our new Executive Director is currently taking place.

As well, salary grids and compensation policies for all staff continue to be reviewed for implementation in 2015.

The committee thanks Diane and Helen for their support and guidance.

2014 saw the retirement of committee member Norah Hewson and welcoming of Donna Anderson to the committee.

Bill McMahon Chair



ASSET MANAGEMENT COMMITTEE 2014 ANNUAL REPORT

Committee members:

Rob Dougherty, chairman George Wade
Millie Ritchie Will Briscoe
Don Burchat Diane Caughey

Meetings are scheduled for the second Tuesday of each month at 0900hrs.

The past year has been a relatively quiet one for the committee. I am happy to report that there were no major incidents to be dealt with. I would like to thank Diane Caughey for her dedication to detail in ensuring that the hospice building is properly maintained in order to provide a safe and comfortable environment.

The problems with the fire alarm system were rectified after meeting with Siemens representatives.

Gardening Committee – Our gardening committee is an active, independent committee with a separate budget for the purchase of supplies and materials. The members of that committee should be commended for the manner in which the grounds are kept. One can only imagine what the cost would be to have this work contracted out.

One of the new projects that the committee has been working on is the refitting and renaming of the patients rooms. It has been a pleasure to work with Don DiSalle who has taken the lead on this worthwhile project.

It has been a pleasure to meet with Diane over the years and I hope her retirement years are good years.

Your input and ideas for improvement to the facility are always welcome. Feel free to contact any member of the committee with your suggestions.

Rob Dougherty Chair



MEDICAL ADVISOR 2014 ANNUAL REPORT

2014-2015 has been a busy year at hospice Renfrew. We continue to have a core group of physicians who provide call for the hospice. A number of other physicians look after their own patients when they are in the hospice.

This year we have provided care for patients from all across the county. Our primary diagnosis continues to be malignancy but we do provide end of life care for non malignant conditions as well.

As many are aware the Supreme Court has asked the government to come up with legislation around the assisted suicide issue. As physicians we will wait to see how the legislation is created. The goals of hospice care however are comfort care for the end of life and at this time I do not see the legislation having much effect on the hospice.

Diane has been a wonderful support for the medical staff and we shall miss her presence but look forward to working with our new director.

Unfortunately our application for on call funding from the Ministry of Health was denied based on volume. I have submitted an appeal but given the current fiscal concerns of the Ministry of Health I do not anticipate a positive response. Despite that our physicians still continue to provide on call for the hospice.

The telehealth set up is used for our weekly rounds and for education purposes and continues to be a valuable tool.

Thanks to the board and staff for supporting the physicians and the hospice. We look forward to working together over the coming year.

Dr. Stephanie Langlois Medical Advisor



NOMINATING COMMITTEE 2014 ANNUAL REPORT

The Nominating Committee of Hospice Renfrew endeavours to have a Board of Directors reflective of the community, with balanced competencies as well as geographical representation from Renfrew County.

Nominating Committee Members:

- ➤ Connie Legg, Board Chair
- > Don DiSalle, Vice Chair

- ➤ Bill McMahon, Treasurer
- ➤ Jim MacKillican, Advisory

Non-profit boards have a collective responsibility to maintain public trust. Accountability for a non-profit board is all about:

- ➤ Being answerable for the organizations actions
- Accepting the consequences of the organizations actions, positive or negative
- Accepting responsibility to those affected by the organizations actions, or inaction
- An internal drive to evolve and become a better quality, efficient and effective organization

Non-profit boards accomplish tasks with the following organizational structure:

- > Bylaws-rules and regulations that govern boards operations
- Executive Officers-leadership responsibilities on the board
- ➤ Committees-efficient way to get "detail" work of board done
- ➤ Job Descriptions-expectations of board members and committees
- ➤ Meetings-where the board conducts business
- ➤ Decision making process-how the board arrives at resolutions

Our present Executive Committee:

➤ Board Chair – Connie Legg

Secretary – Donna Anderson

➤ Treasurer – Bill McMahon

- ➤ Vice Chair Don DiSalle
- ➤ Executive Director Diane Caughey

Emeritus/Advisory:

Karl Murphy – Past Chair

➤ Jim MacKillican – Past Chair

New Board Members as recommended by the Nominating Committee

Owen Snider

BOARD SLATE OF OFFICERS 2015

Chair – Connie Legg Vice-Chair – Don DiSalle Treasurer – Bill McMahon Secretary – Donna Anderson **Medical Advisor** – Dr. Stephanie Langlois **Executive Director** – Maureen Sullivan-

Bentz (ex-officio)

Members:

Karl Murphy, Leo Hall, Rob Dougherty, Will Briscoe, Doug Hewitt-White

*Advisory – Jim MacKillican *Honourary – Dr. Arthur Dick

Connie Legg

Board Chair

^{*}non-voting members