



Annual General Meeting

June 13, 2018

**The Gathering Place
St. Paul's United Church
Warkworth**



Agenda

2018 Annual General Meeting

Welcome by Dr. Jan Hux, Chair, Board of Directors

1. **Adoption of the Agenda** Jan Hux
Motion to adopt the Agenda as presented:
2. **Approval of AGM Minutes of June 7, 2017** Jill Hutcheon
Motion to adopt the AGM Minutes of June 7, 2017:
3. **Report of the Chair** Jan Hux
4. **Report of the Treasurer** Gerry Hutcheon
5. **Review of Financial Statements 2016/2017** Gerry Hutcheon
Motion to accept the Financial Statements for 2016/2017:
6. **External Accountant for 2017/2018** Gerry Hutcheon
Motion to approve Bruce Taylor as external accountant for 2016/2017:
7. **Report of the Governance Committee** Dave Burnham
Motion to adopt the Report of the Governance Committee:
8. **Election of Board Members** Dave Burnham
Motion to elect as new board members:
Motion to elect returning board members:
Acknowledgement of retiring board members
9. **Remarks** Jan Hux
10. **Report of the Director of Clinical Services & Operations** Kerri-Anne Wilson
11. **Volunteer Recognition** Kerri-Anne Wilson
12. **Adjournment of Annual General Meeting** Jan Hux
Motion to adjourn the Annual General Meeting:



Annual General Meeting Minutes, 2017

Thursday June 7, 2017, 6:30 pm

Acorn Room, Campbellford Community Resource Centre

1. Call to Order

Jill Hutcheon welcomed members and guests to the 2017 Annual General Meeting.

2. Approval of Agenda

The agenda was amended to show that Gerry Hutcheon would present the 2016/2017 Financial Statements as reviewed by J. Bruce Taylor.

Motion to adopt the amended agenda:

Moved: Martin Edge

Seconded: Judy Kaufmann

Carried

3. Approval of Minutes of June 9, 2016

Motion to approve the 2015 Annual General Meeting minutes as presented:

Moved: Brenda Partridge

Seconded: Kathleen Powe

Carried

4. Report of the Chair

Jill Hutcheon described significant developments over the last year. In particular she described the provincial funding that was initiated last year and stressed that the funding provided for most of our nursing and PSW costs. She also described the effect on our relationship with Saint Elizabeth Community Foundation who provide financial assistance for shortfalls in the provincial government funding under a previously signed five-year agreement.

Jill further described the positive impact this funding has had on our operations, resulting in much higher occupancy rates and a better perception with our partners

relating to our full-time professional health care capabilities. She also stressed the very valuable non-financial assistance provided by Saint Elizabeth.

Given that the healthcare funding does not assist us with any of our extensive operating costs, Jill stressed the importance of continuing public financial support. In particular, she mentioned the significant donations made over the last year by residents and their families and friends. The funding for operational and capital needs will continue to be a significant priority in future.

Jill introduced Kerri-Anne Wilson and described her role and responsibilities. She also spoke of the work Kerri-Anne is doing in assisting proposed start-up hospices with advice and in maintaining effective relationships with allied organizations and working partners.

In conclusion, Jill spoke briefly about the new members joining the board and thanked them for offering their services.

5. Report of Director, Clinical Services and Operations

Kerri-Anne Wilson guided the meeting attendees through a comprehensive slide presentation showing the growth and progression of The Bridge Hospice over the last year. The statistics provided showed the increase in occupancy, the reasons leading to hospice care, the geographic originations and the referring sources.

Kerri-Anne then discussed further the split of expenditures representing 60% for resident care and 40% for other operational needs. She also discussed the various sources of revenue and the continuing need for fund development activities and volunteer commitment.

6. Report of the Governance Committee

Jan Hux as chair of this committee reviewed the status of the committee. She discussed the qualifications of the three candidates for the board of directors and invited members and attendees to review the CVs included in the agenda material.

Motion to adopt the report of the Governance Committee:

Moved: Jan Hux

Seconded: Bob Henderson

Carried

7. Election of Board Members

Motion to elect as new directors Dave Burnham, Carrie Cleverdon, and Michael Kaufmann:

Moved: Jan Hux

Seconded: Martin Edge

Carried

Motion to elect returning board members Gerry Hutcheon, Judy Kaufmann, Craig Kerr, Kathleen Powe

Moved: Dennis Gebhardt

Seconded: Martin Edge

Carried

8. Report of the Treasurer

Gerry Hutcheon reported that the financial status is significantly stronger at the end of the 2016/2017 financial year than at the beginning. He reviewed the financial statements briefly and commented again on the importance of future fund development efforts. He answered questions for attendees.

9. Review of Financial Statements 2016/2017

Gerry Hutcheon reviewed the work of J. Bruce Taylor and discussed his remarks concerning the clean status of the review.

Motion to accept the financial statements for 2016/2017:

Moved: Gerry Hutcheon

Seconded: Kathleen Powe

Carried

10. External Accountant for 2017/2018

Motion to approve Bruce Taylor as external accountant for 2016/2017:

Moved: Gerry Hutcheon

Seconded: Jill Hutcheon

Carried

11. Adjournment of AGM

Motion to adjourn the Annual General Meeting:

Moved: Bill Hogle

Seconded: Judy Kaufmann

Carried

12. Guest Speaker Stan Fergusson

Bill Hogle introduced the guest speaker Mr. Stan Fergusson who then addressed the meeting. Mr Fergusson gave a brief review of his public and business career, as well as some of his personal interests. He then addressed his key message that centered on the acronym K.A.S.H.

‘K’ stands for knowledge. Knowledge offers the ‘gift of right thinking’. Wisdom offers the ‘gift of right action’.

‘A’ represents ‘attitude’.

‘S’ represents ‘skills’.

‘H’ represents ‘habits’.

He urged people to get involved with organizations of interest to them and to provide leadership in the process. He noted that no organization rises above its leadership. The presentation was very well-received by all. Jan Hux expressed the thanks of all attending for his inspiring message.

13. Volunteer Appreciation

Kerri-Anne Wilson spoke to the importance and value of the many hospice volunteers. She presented individual certificates to the volunteers present.

14. Conclusion of Evening

The activities of the evening were concluded at approximately 8:15.



Report of the Chair

2018 Annual General Meeting

Delivered by Jan Hux

Welcome again to everyone here this evening. As I complete my term as Board Chair, I would like to report to you on the highlights of this past year, and also to thank each of you for your continuing support. Your hard work, generosity and commitment are what ensure that The Bridge Hospice remains a unique and valuable resource for our community.

This year we are celebrating an important anniversary – it is now five years since we welcomed our first resident. That was such a critical milestone for a project that had been nurtured from a seemingly unlikely dream for our three visionaries to a shared vision of a dedicated team of volunteers, to the building of the beautiful home that we are all so proud of. Each of those important phases looked forward to the time when we could serve residents and their families with high-quality, personalized end-of-life care that was available close to home.

For five years we have been bringing that dream to reality for our community. At tonight's meeting we will hear a gratifying story of the growing number of people served, the growing breadth of services provided, consistent funding generously donated and demand on the healthcare system alleviated. But perhaps more importantly, over those five years we have heard hundreds of heartfelt stories of burdens lifted, fears alleviated and touching family moments created and enabled.

We continue to be assisted in delivering on our mission by a strong group of resident care volunteers who provide direct support to residents and their families and collaborate seamlessly with our professional health care staff. We are grateful for the way they enable us to provide the caliber of personalized care we aspire to.

As you know, last year we were fortunate to be named as recipients of Government of Ontario funding to support the direct delivery of nursing and personal support services. With these funds in place, we can be assured that we will be able to meet our ongoing health care needs well into the future.

These resources are administered through the Central East Local Health Integration Network and we continue to work collaboratively with them and other agencies in our community to



ensure access to high quality end-of-life care in the setting of choice for individuals and their families.

We are also grateful for the ongoing investment by Saint Elizabeth that allowed us to provide consistent professional health care services at the bedside even before the announcement of provincial funding and which continues to augment that funding. We are now in year three of a five-year agreement with Saint Elizabeth and we continue to look for ways to work collaboratively with them as they expand their efforts and investments into the residential hospice space. Like the Government of Ontario, they are providing leadership to strengthen palliative care and we congratulate them on their efforts.

Valuable as these investments are, they do not cover the ongoing operating and capital costs of the hospice. Expenses such as hydro, heating and cooling systems, phones, internet, supplies, equipment, property maintenance, house cleaning and staff salaries are all important to maintain the hospice for the use, comfort and safety of our residents and their families.

It is because of the ongoing dedicated efforts of our volunteers on the fundraising side and the generous support of our community that we have been able to meet these needs. Through our annual community events, donations, grants and third-party support, we have been able to consistently respond to our needs. As well, we have created a greater focus on fund development from a strategic perspective at the Board level and have brought in outside skill to support our efforts. Rob Tonus, a seasoned fundraiser, joined us this spring and will be working to further develop our strategy and the tools we will need to be effective in raising the funds we require going forward.

However, all of that investment and effort in fund development would be for naught if we did not have the consistent and generous support of the community behind us. We remain immensely grateful for the trust you demonstrate in our work as you allow us to care for your loved ones and for the commitment you show in your ongoing financial support.

We appreciate your help to increase awareness of the hospice and introduce us to organizations and people with like-minded interests. In an effort to bolster awareness of both our work and the values that inform the care we deliver, we invested a significant amount of time in developing our brand this past winter. Brand can often be dismissed as merely a logo or a colour scheme, but a well-developed and communicated brand is far more than that. A strong and effective brand has been described as “the value of a promise consistently kept”. Over five years we have been consistently striving to keep our promise and this year we have worked at articulating that promise in ways that will resonate with potential residents, with their healthcare providers and with potential donors. Our new brand will help us tell our story and

The Bridge Hospice

Financial Statements

March 31, 2018

(unaudited)

The Bridge Hospice

March 31, 2018

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Review Engagement Report

To the Board
The Bridge Hospice

I have reviewed the accompanying financial statements of The Bridge Hospice that comprise the statement of financial position as at March 31, 2018, and the statement of operations and changes in net assets, and cash flows for the year then ended, and a summary of significant accounting policies and other explanatory information.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with Canadian accounting standards for not-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.

Practitioner's Responsibility

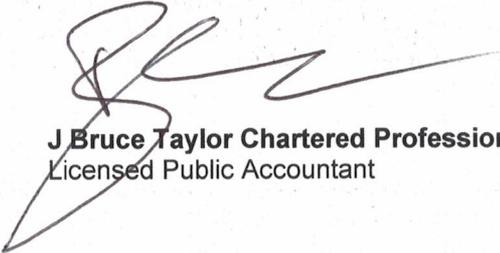
My responsibility is to express a conclusion on the accompanying financial statements based on my review. I conducted my review in accordance with Canadian generally accepted standards for review engagements, which require me to comply with relevant ethical requirements.

A review of financial statements in accordance with Canadian generally accepted standards for review engagements is a limited assurance engagement. The practitioner performs procedures, primarily consisting of making inquiries of management and others within the entity, as appropriate, and applying analytical procedures, and evaluates the evidence obtained.

The procedures performed in a review are substantially less in extent than, and vary in nature from, those performed in an audit conducted in accordance with Canadian generally accepted auditing standards. Accordingly, I do not express an audit opinion on these financial statements.

Conclusion

Based on my review, nothing has come to my attention that causes me to believe that the financial statements do not present fairly, in all material respects, the financial position of The Bridge Hospice as at March 31, 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.



J Bruce Taylor Chartered Professional Accountant
Licensed Public Accountant

Warkworth, Ontario
June 13, 2018

The Bridge Hospice

Statement of Financial Position

March 31, 2018

(unaudited)

	2018	2017
Assets		
Current Assets		
Cash	\$ 50,852	\$ 150,690
Short term deposits	288,470	143,113
Grants receivable	600	600
Health care funding receivable	10,942	1,021
GST/HST recoverable	5,232	6,129
Prepaid expenses	1,175	1,291
Total Current Assets	357,271	302,844
Land, building and equipment (note: 2)	431,969	451,318
Total Assets	\$ 789,240	\$ 754,162
Liabilities and Net Assets		
Current Liabilities		
Accounts payable and accrued liabilities	\$ 23,120	\$ 4,393
Payroll taxes payable	3,376	3,251
Total Current Liabilities	26,496	7,644
Deferred Grants and Funding		
Fundraising sponsorships	6,135	4,750
Total Liabilities	32,631	12,394
Net Assets		
Surplus	756,609	741,768
Total Liabilities and Net Assets	\$ 789,240	\$ 754,162

Approved on Behalf of the Board:

The accompanying notes are an integral part of these financial statements.
J Bruce Taylor Chartered Professional Accountant

The Bridge Hospice

Statement of Operations and Changes in Net Assets

For the Year Ended March 31, 2018

(unaudited)

	2018	2017
Revenue		
Health care service and operating cost funding (note: 3)	\$ 379,277	\$ 323,101
Donations and supporters	154,895	122,167
Fundraising	67,333	59,595
Interest income	5,683	2,281
Operating grants	3,000	8,000
Memberships	320	320
	610,508	515,464
Fundraising expenses	11,482	9,188
	599,026	506,276
Operating expenses		
Accounting and legal	2,332	2,079
Advertising, promotion and publicity	6,326	8,813
Amortization	23,047	23,186
Health care service (note: 3)	371,686	259,296
Hospice and resident care expenses	9,051	11,273
Insurance	2,452	1,795
Interest and bank charges	2,170	1,736
Maintenance and utilities	15,891	16,656
Memberships and professional development	2,855	3,350
Office and administration	11,808	11,019
Professional fees	6,517	2,767
Salaries and wages	132,550	86,023
Total operating expenses	586,685	427,993
Operating surplus of revenue over expenses	12,341	78,283
Non operating revenue and expenses		
Capital restricted grant revenue	2,500	4,224
Net surplus of revenue over expenditures	14,841	82,507
Net assets, beginning	741,768	659,261
Net assets, ending	\$ 756,609	\$ 741,768

The accompanying notes are an integral part of these financial statements.
J Bruce Taylor Chartered Professional Accountant

The Bridge Hospice

Statement of Cash Flows

For the Year Ended March 31, 2018

(unaudited)

	2018	2017
CASH FLOWS FROM OPERATING ACTIVITIES:		
Surplus of revenues over expenses	\$ 14,841	\$ 82,507
Amortization	23,047	23,186
Increase in grants receivable	-	(600)
Increase in health care funding receivable	(9,921)	(971)
Decrease (increase) in GST/HST recoverable	897	(3,077)
Decrease (increase) prepaid expenses	116	(565)
Increase (decrease) in accounts payable and accrued expenses	18,727	(19,506)
Increase in payroll taxes and government remittances payable	125	2,369
Decrease in deferred health care service and operating cost funding	-	(8,617)
Increase in deferred fundraising sponsorships	1,385	1,250
TOTAL CASH FLOWS FROM OPERATING ACTIVITIES	49,217	75,976
CASH FLOWS FROM INVESTING ACTIVITIES:		
Building and equipment additions from general account	(1,198)	(13,560)
Building and equipment additions from capital grants received	(2,500)	(4,224)
Additions to short term deposits and accrued interest	(145,357)	(604)
NET CASH USED BY INVESTING ACTIVITIES	(149,055)	(18,388)
Net increase (decrease) in cash and cash equivalents	(99,838)	57,588
Cash and cash equivalents, beginning of year	150,690	93,102
Cash and cash equivalents, end of year	\$ 50,852	\$ 150,690

The accompanying notes are an integral part of these financial statements.
J Bruce Taylor Chartered Professional Accountant

The Bridge Hospice

Notes to the Financial Statements

For the Year Ended March 31, 2018

(unaudited)

1. Significant Accounting Policies

a. Nature of organization and basis of preparation

The Bridge Hospice (the hospice) was incorporated on November 4, 2006 without share capital under the Ontario Business Corporations Act. The hospice is a Registered Charity which for Canadian income tax purposes is exempt from income tax under the Income Tax Act.

The purpose of the hospice is to offer the people of Northumberland County and region a home where practical care, guidance and compassion are provided for those dying, and those who support them.

These financial statements have been prepared in accordance with Canadian accounting standards for not-for-profit organizations.

b. Short term deposits

Short term deposits are held to maturity and valued at cost, which is calculated as original cost plus accrued interest.

c. Land, building and equipment

Land, building and equipment is stated at cost. Amortization is provided over the estimated useful life of the assets using the methods below for financial reporting purposes. Maintenance, repairs and minor renewals and betterments are expensed; major improvements are capitalized.

Amortization is calculated using the declining balance method as follows for the major classes of assets:

Land	NIL
Building	4%
Furniture, fixtures and equipment	20%

d. Grants and other funding

The hospice records grants and other funding received as revenue in the statement of operations and changes in net assets, in the period of the qualifying expenditures. The hospice differentiates between operating and capital as designated under the grant conditions. Grants and other funding received for which the qualifying expenditures have not been made are accordingly deferred, and reported as deferred grants or other funding in the statement of financial position.

The Bridge Hospice

Notes to the Financial Statements

For the Year Ended March 31, 2018

(unaudited)

1. Significant Accounting Policies

e. Revenue recognition

All unrestricted revenue is recognized in accordance with industry practice in the period received and pledges are not recognized until received.

Restricted donations and giving are segregated from general revenue and recorded in revenue in the period the related expense is incurred. Undisbursed restricted donations and giving are deferred and are recorded in the statement of financial position as deferred revenue until such time as the related expense is made.

The mission of the hospice is dependent upon and thankful for many hours contributed by its volunteers and members. Because of the difficulty of determining their fair value, contributed services are not recognized in these financial statements.

f. Use of estimates

The preparation of financial statements in accordance with Canadian accounting standards for not-for-profit organizations requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. The reported amounts and note disclosures are determined using management's best estimates based on assumptions that reflect the most probable set of economic conditions and planned courses of action. Actual results could differ from those estimates and would impact future results of operations and cash flows. Areas requiring the use of estimates include amortization rates of capital assets and accrued liabilities.

2. Land, building and equipment

			2018	2017
	Cost	Accumulated Depreciation	Net Book Value	Net Book Value
Land	\$ 36,712	\$ -	\$ 36,712	\$ 36,712
Building	434,482	(72,064)	362,418	375,561
Furniture, fixtures and equipment	66,378	(33,539)	32,839	39,045
Total	\$ 537,572	\$ (105,603)	\$ 431,969	\$ 451,318

The Bridge Hospice

Notes to the Financial Statements

For the Year Ended March 31, 2018

(unaudited)

3. Health care service and operating cost funding

Revenue - Health care service and operating cost funding

In November 2016, the hospice entered into an agreement with the Ministry of Health and Long Term Care to provide funding through the Central East Local Health Integration Network toward those costs directly related to the care of the hospice residents.

The hospice also has an agreement with the Saint Elizabeth Community Enterprise to provide financial support to the hospice to fund direct care services in the hospice not covered by the Ministry of Health and Long Term Care.

Operating expense - Health care services

In January 2016, the hospice entered into a five-year agreement with a sister organization, Saint Elizabeth Health Care, to provide direct resident care PSW (Personal Support Worker) and nursing services, to support those services currently provided by the hospice.

4. Financial instruments

The hospice's financial instruments consist of cash, short term deposits, and accounts payable. It is management's opinion that the hospice is not exposed to significant risk arising from these financial instruments.

Carrying value

The carrying values of the hospice's monetary assets and liabilities approximate their fair values due to their short-term and fixed nature.

Credit risk

The hospice does not extend credit to earn revenue and accordingly is not exposed to credit risk.

Interest rate risk

The hospice is not exposed to interest rate risk as the capitalization and working capital of the hospice does not rely on financing.

Currency risk

The hospice in the normal course of operations does not engage in foreign currency denominated transactions and is not exposed to currency risk.

Liquidity risk

Liquidity risk is the risk that an entity will encounter difficulty in raising funds to meet cash flow commitments associated with financial instruments. To manage this operating risk, the hospice monitors its budgets and forecasts and maintains an adequate working capital to cover operations. The hospice does not embark on other expenditures without already having adequate funding in place.



Report of the Governance Committee

**Annual General Meeting
June 13, 2018**

The Governance Committee consists of Jan Hux (Chair), Dave Burnham, Craig Kerr, William Hogle and Jill Hutcheon.

The Governance Committee and entire board would like to thank the following retiring Directors for their many contributions during their term:

- a) Martin Edge
- b) William (Bill) Hogle
- c) Ruth Wojtiuk

The Governance Committee would like to recommend the following appointments for membership to the board for a three-year term:

- a) Kim Stephens-Woods
- b) Fred Thomson

Please refer to their brief biographies at the end of this report.

At the first meeting of the board to be held immediately following this meeting, the Governance Committee will nominate the following for positions on the executive of the board:

- a) Chair – Dave Burnham
- b) Vice-Chair – Mike Kaufmann
- c) Treasurer – Gerry Hutcheon
- d) Secretary – Craig Kerr
- e) Past Chair – Jan Hux

These positions are confirmed annually by the board following the general meeting of the membership.

Respectfully,

Jan Hux, Committee Chair

Term ends in 2019	
Jill Hutcheon	completed 2 terms
Jan Hux	completed 2 terms
Kent Tisher	completed 1 term
Term ends in 2020	
Dave Burnham	completed 1 term
Carrie Cleverdon	completed 1 term
Gerry Hutcheon	completed 2 terms
Judy Kaufmann	completed 2 terms
Mike Kaufmann	completed 1 term
Craig Kerr	completed 2 terms

Board Nominees

Kim Stephens-Woods

Recently retired, Kim and her family moved to Havelock two years ago. Originally from Mississauga, Kim became a Registered Nurse in 1979. She subsequently obtained her BScN from McMaster University and her Masters in Nursing from D'Youville College in Buffalo, NY. She also holds her CHE designation from the Canadian College of Health Leaders, and is an Associate Clinical Professor at McMaster University in the School of Nursing.

She has worked in many organizations and held various roles throughout her career – most recently at Ross Memorial Hospital in Lindsay, where she oversaw the palliative care program.

With her recent retirement, Kim is becoming more actively involved in the community, and hopes to be able to make a positive contribution as a Board Member.

Fred Thomson

Fred has an extensive background in agriculture, including 18 years with Agriculture Canada, 20 years with the Crop Insurance Commission of Ontario (now Agricorp), and most recently with AgCall as a project manager for corporate clients.

Fred lives on a Campbellford-area Century farm that has been continuously farmed by his family since 1854. He grows crops and operates a custom seed cleaning business. Always embracing new challenges, he and his son Adam recently established a hop yard on the farm.

Fred understands the demands of providing end-of-life care at home, and views The Bridge Hospice as a wonderful and much-needed service for the community.

