

Board of Directors
AGENDA

Monday, May 13, 2024 @ 5:30pm

<https://us02web.zoom.us/j/86454171159?pwd=bnZVbjM5SVNsblpUdHd5bW9Dc3FTUT09>

Meeting ID: 864 5417 1159 Passcode: 584254

Item	Description	MRP
1.	Call to Order	Marjorie Belzile
2.	Declaration of Conflict of Interest	Marjorie Belzile
3.	Approval of Agenda*	Marjorie Belzile
4.	Approval of Previous Minutes: March 25, 2024 & April 16, 2024*	Marjorie Belzile
5.	Business Arising from the Minutes	
6.	Standing Reports	
6.1.	Quarterly Update from the President & CEO	Geri Geldart
	6.1.1. Report from President & CEO*	
	6.1.2. Q4 Operating Plan Progress Report*	
	6.1.3. Q4 KPI Dashboard*	
	6.1.4. A Bit of our History	
6.2.	Research & Ethics Committee	Tracey Burkhardt
	6.2.1. Q4 Report of Committee Chair	
6.3.	Care Services Committee	Lyne St-Pierre-Ellis
	6.3.1. Q4 Report of Committee Chair	
6.4.	Finance & Administration Committee	Pierre LeBlanc
	6.4.1. Q4 Report of Committee Chair*	
	6.4.2. Unaudited Financial Statements period ending Mar 31/24*	
6.5.	Governance & Audit Committee	Deborah Wybou
	6.5.1. Q4 Governance & Audit Report of Committee Chair	
	6.5.2. Centre of Excellence Discussion Agenda*	
	6.5.3. Board Reappointments	
	6.5.4. Vice chair/Vice president	Marjorie Belzile
	6.5.5. Board Member Appointments	
	6.5.6. Policy Approval	
	- Policy Gov-O-265-Orientation of New Board Members*	
	- Policy Gov-R-0270-Reimbursement to members for out-of-pocket expenses*	

- Policy Gov-R-275-Resolution Book *
- Policy Gov-R-278-Retirement or Resignation Gifts*

6.6. Report from the York Care Foundation Board Chair*

Hector Losier

7. New Business

8. Next Meeting: Monday, June 24, 2024 @ 5:30pm

****Denotes attachment***

Proposed Motions

1. That the minutes of March 25, 2024, be approved.
2. That the minutes of April 16, 2024, be approved.
3. That the Board of Directors approve the unaudited financial statements for the period ending March 31, 2024 as presented by the Finance Committee.
4. That Lyne St-Pierre Ellis, Doug Holt, Brenda Bossé and Pierre LeBlanc be reappointed to the Board of Directors for a three-year team.
5. That Dana Bursey and Wayne Albert be appointed to the Board of Directors for a three-year term.
6. That the policies Gov-O-265-Orientation of New Board Members, Gov- R-270 – Reimbursement to Members for Out-of-Pocket Expenses, Gov-R-275 Resolution Book and Gov-R-278-Retirement or Resignation Gifts, be approved as amended.

**Minutes of meeting of the Board of Directors for York Care Centre
100 Sunset Drive, Fredericton NB,
Meeting on March 25, 2024 at 5:30pm**

Present: Marjorie Belzile, Lyne St-Pierre-Ellis, Pierre LeBlanc, Brenda Bossé (virtual)
Andrea Seymour(virtual), Tracey Burkhardt, Donna Curtis-Maillet, Bryanna White-
Aubé, Deborah Wybou, Geri Geldart (non-voting)

Regrets: Wayne Snowdon, Doug Holt, Hector Losier

Staff: Heather Harris-Jones

1. Call to Order & Introductions

The Chair, Ms. Belzile called the meeting to order at 5:30pm.

2. Declaration of Conflict of Interest

Ms. Belzile asked members to review the agenda and self identify if there was the potential for a conflict of interest. None identified.

3. Approval of Agenda

The agenda was amended and approved by the committee.

Motion: It was moved by Andrea Seymour and seconded by Pierre LeBlanc that the agenda be approved with the addition of item 6.2.5 – New signing officers for York Care Centre Inc., York Development Inc., Centre of Innovation & Research in Aging Inc., and York County Properties. All in favour.

- Motion Carried

4. Approval of Minutes – February 20, 2024

Motion: It was moved by Lyne St-Pierre-Ellis and seconded by Brenda Bossé that the Minutes of February 20, 2024 be approved by the Board of Directors. All in favour.

- Motion carried

5. Business Arising from the Minutes

5.1 Centre of Excellence Discussion Date

Ms. Geldart shared Monday, May 27th as the date for the Centre of Excellence discussion. This will be held in the YCC Boardroom from 5:00pm – 8:00pm. Currently researching facilitators for this event.

6. Standing Reports

6.1 Finance & Administration Report

Mr. LeBlanc provided an introduction of the proposed budget for 2024 – 2025, including the following:

- A Social Development revenue increase of 0.75% was assumed.
- Capital budget excludes 2 projects that have been brought to DTI from Social Development for consideration. These are partial or full replacement of our current Nurse Call system which is no longer supported by the manufacturer, and a method to cool resident rooms. DTI has hired consultants to complete feasibility studies and full cost analysis.
- Total revenue for York Care Centre, York Development Inc., Centre of Innovation & Research in Aging Inc., and York County Properties is \$26,299,388 (slight decrease of \$75,094). Expenditures total \$26,267,620 (a slight decrease of \$85,339), mostly in CIRA. Overall projected surplus is \$31,768.
- Commendation – excellent work by CFO, Heather Harris-Jones. There was a steep learning curve and many hours of hard work and consultations with the Senior Leadership Team.

6.2 2024 – 2025 Proposed Annual Budgets

Ms. Harris-Jones provided a detailed overview of the proposed 2024 – 2025 budget.

6.2.1 York Care Centre Inc.

- Total estimated revenue is \$24,164,860 versus expenditures of \$24,164,860 for a deficit of \$0.00. The education budget covers 1 RA course, non-unionized staff salary increases of 1% in April and 1% in October, and unionized staff salaries are fully costed at existing rates.
- Consultation fees include an administration review, strategic goals, board education and engineering costs for the front entrance accessibility review.

6.2.2 York Developments Inc.

- Ms. Harris-Jones explained that this budget is presented in three areas; Supportive Housing (31 units), Apartments (72 units), and Adult Day Program (ADP). Consolidated revenue is \$1,569,810 versus expenses of \$1,520,404. Operating fund balance is proposed to be a surplus of \$13,406. This includes the 4% increase for 31 Supportive Housing units. The same 4% increase is applicable to all 72 apartment units effective October 1, 2024.
- ADP has decreased their budgeted number of participants by 3, for a total of 8. This amount could change based on the approval from Social Development for \$230,000 for Nursing Home Without Walls program (NHWW).
- There was a brief discussion on NB Housing rent supplement. We will explore the feasibility of this transition in the next fiscal year as some of our residents could be eligible for this program.

6.2.3 Centre for Innovation & Research in Aging Inc.

- Total estimated revenue is \$556,444 versus expenditures of \$562,356 for a deficit of \$5,912. Lower revenue and matching expenditures as several projects near completion, and only 2 new projects have been awarded.

6.2.4 York County Properties Inc.

- Total revenue is \$20,000 versus expenses of \$20,000. This represents bank interest.

Motion:

It was moved by Pierre LeBlanc and seconded by Deborah Wybou that the 2024 – 2025 proposed annual budgets for York Care Centre Inc., York Developments Inc., Centre for Innovation & Research in Aging Inc., and York County Properties Inc. be approved as presented. All in favour.

- Motion Carried

6.2.5 New Signing Officers

Motion:

It was moved by Tracey Burkhardt and seconded by Deborah Wybou that Pierre LaBlanc, Marjorie Belzile, Heather Harris-Jones, Geri Geldart and Jamie Roy be the signing officers for York Care Centre Inc., York Development., Centre for Innovation & Research in Aging Inc., and York County Properties Inc. from this point on. All in favour.

- Motion Carried

6.3 Report from the President & CEO

Ms. Geldart provided a report for the period of February 15, 2024 – March 20, 2024. Highlights included:

- Shelley Kenny has returned from the Philippines where 15 RA job offers were extended. The next RA course is expected to start in April 2024. Revised staff rotations, the Philippine recruitment and RA courses have substantially assisted with meeting care compliance requirements. February's care compliance was 100.44%.
- A leadership development event was held on March 7th entitled "Tackling Challenging Conversations" with facilitator, Stephen Franklin. There were 32 participants, including two from local nursing homes.
- The Senior Leadership Team met with BrunNet in March to review the Vulnerability Risk Assessment report. A comprehensive update will be brought to the Q4 Finance and Administration Committee for review and discussion.
- The April NB Association of Nursing Homes board meeting will include a review of the Call-to-Action group and the conflict created with the Association's CEO.
- The Seniors' Advocate's report on long-term care was extremely detailed. With so many recommendations it may take considerable time for the system to respond.
- The Healthy Seniors Pilot Project funding closes on March 31st. Although a small amount of project funding could be retained for certain activities (publication fees, conference fees, etc), funding cannot be used for salaries. As a result, employment contracts for four C.I.R.A. staff will not be extended beyond March 31st.

7. In camera: Board of Directors entered an in-camera session.

The meeting was adjourned at 6:50pm on a motion by P. LeBlanc.

Next meeting date is Monday, May 6, 2024 at 5:30pm.

Marjorie Belzile, Chair

Jennifer Vos, Recorder

DRAFT

Minutes of Board of Directors for York Care Centre
Special Meeting – via zoom
100 Sunset Drive, Fredericton NB,
Meeting on April 16, 2024 at 7:00pm

Present: Marjorie Belzile, Lyne St-Pierre-Ellis, Pierre LeBlanc, Brenda Bossé, Andrea Seymour, Donna Curtis-Maillet, Bryanna White-Aubé, Deborah Wybou, Doug Holt, Geri Geldart (non-voting)

Regrets: Tracey Burkhardt

Absent: Wayne Snowdon

Staff: Heather Harris-Jones

1. Call to Order & Introductions

The Chair, Ms. Belzile called the meeting to order at 7:02pm.

2. Declaration of Conflict of Interest

Ms. Belzile asked members to review the agenda and self identify if there was the potential for a conflict of interest. None identified.

3. Approval of Agenda

The agenda was approved with one item for discussion.

4. Management and Non-Union Salary Increase

Mr. LeBlanc shared the briefing note on notification from the Department of Social Development regarding pay increases for management and non-union staff for nursing homes. As nursing home staff salaries are subject to the Corporate Human Resources policy, nursing home staff, management and non-union, will receive the same increase as government employees, starting with 2% effective April 1st and another 2% effective October 1st. The cost of this increase is \$59.4K rather than the \$29.7K that was approved in the 2024-25 budget. A short discussion commenced, followed by the below motion:

Motion:

It was moved by Pierre LeBlanc and seconded by Andrea Seymour that the board match the increase provided by Social Development for management and non-union staff and approve a 2% increase, rather than the approved 1% increase, effective April 1st and October 1st, 2024.

All in favour.

- Motion Carried

The meeting was adjourned at 7:09pm on a motion by Doug Holt.

Next meeting date is Monday, May 13, 2024 at 5:30pm.

Marjorie Belzile, Chair

Jennifer Vos, Recorder

DRAFT



Report to the Board

President & Chief Executive Officer

For the period: March 21 – May 8, 2024

Prepared By:

Gerri Geldart, President & Chief Executive Officer
Presented on May 13, 2024



Report from the YCF Board Chair to the YCC Board of Directors May 13, 2024

1. Financials

- No major fundraising activities have occurred in the first four months of the year, yet we remain in a net positive position (+\$2,818).

2. Golf Fore Care

- The team is fully focused on the upcoming golf tournament. We have 26 teams enrolled (92% of goal).
- We expect a successful event on June 6th. Pray for sun....

3. Laugh For Care Dinner

- Save the date – November 9, 2024

4. Major Project

- The YCF Board reviewed the potential project list which was approved by the YCC Board in February. The project which is most interesting to the Foundation is the refurbishment of Tower 2. YCC staff have been asked to develop a detailed project description with costs for further consideration by the YCF Board.

5. Summer Concerts

- The Foundation is pleased to, once again, sponsor the summer concert series for the enjoyment of our residents, their families and the YCC community. Mark out your calendars now for:
 - i. June 24th with Mike Bravener as Elvis
 - ii. July 22nd with the Clifford Kelly Band
 - iii. August 19th with the Town Cats

Respectfully submitted

Hector Losier.

1.0 STRATEGIC PLAN, OPERATIONAL GOALS AND KPI DASHBOARD

- We have now completed four years of our current strategic plan and I am comfortable in saying that our work remains aligned with our strategic directions. I would encourage each of you to read the introductory paragraph for each pillar of the Operating Plan progress report. Each of these paragraphs provides the overview of the pillar and the key results we aimed to achieve over the course of the five-year plan. We still have room to improve, but we should be proud of our accomplishments.
- I am pleased to present our Operating Plan Q4 Progress Report. 84% of our operating goals/objectives were achieved. Certain projects were “put aside” when we reprioritized our work to address the staffing challenges in leadership and Care Services. Completion of certain elements of the Quality Framework and the Employee Engagement Framework have been deferred to 24/25, as has the development of the Risk Management Framework and a Fund Development Plan for York Care Foundation.
- On the KPI Dashboard, you will notice new results for our Resident Quality of Life Survey. These surveys were completed in late November / early December 2023. The Resident Survey results are very positive. Our results improved on 4 of the 5 scales and as compared to the other 11 organizations that participate in this survey, we ranked in the top three for each of these four scales (Staff responsiveness, Social Life, Food and Caring Staff). We were especially happy to see the improvement in the Social Life Scale given our results in the prior quarter. We saw a drop in the Personal Control Scale and this will become part of our quality improvement planning.
- You will also see on the dashboard, new results for the Family Quality of Life Survey. This is a new survey within the SQLI group. Although the overall score for the survey group is pending, we know that we ranked in the top 3 on each of the five scales. We achieved the top score on the “Global Rating” indicator.
- Our team is actively engaged in the development of our 24/25 Operating Plan which will be presented in June. At a high level, our focus will be on:
 - supporting the board in the development of a new Strategic Plan,
 - improving our Care Services (food, activity program),
 - conducting an RFP for Pharmacy services,
 - introducing the Nursing Home Without Walls program,
 - improving organizational culture / employee engagement,
 - replacing our nurse call system,
 - redesign of our front entryway to improve accessibility,
 - website refresh,
 - development of our risk management plan,
 - process improvement in the finance and HR areas, and
 - an exploration of various seniors housing options.

2.0 CARE SERVICES

2.1 NURSING HOME WITHOUT WALLS

- As reported at the last meeting, we have received approval for our NHWW proposal. Recruitment is underway for the program manager. We still expect to launch the program in June.

2.2 DSD INSPECTION

- We are preparing for our annual inspection which typically occurs in June/July. We are hoping that our staffing level improvements will be noted.

3.0 PEOPLE AND CULTURE

3.1 RECRUITMENT

- We are currently running a Resident Attendant course with 13 students enrolled. The course will be finished in early June. This will provide a significant increase in our summer staffing resources and, hopefully, will prevent a repeat of the staffing crisis experienced in 2023.

3.2 LABOUR RELATIONS

- CUPE – no movement on the outstanding contract, most likely due to the court challenge launched by CUPE regarding the legislated movement to a shared risk pension plan.
- NBNU – negotiations are scheduled to begin in May.

4.0 FACILITIES AND INFRASTRUCTURE

4.1 CYBERSECURITY RESPONSE PLAN

- As reported at Finance and Admin, we have engaged Brunnet in our work to improve the security of our IT systems. We have launched a cybersecurity education program (Beauceron Security) which will roll out to all employees – employee behavior can be the greatest risk to our systems. We have introduced “Huntress”, a back-end system monitoring service which will alert us to any unusual activity within our systems. We have introduced Multi-factor Authentication for the group of staff who have access to our most critical systems. We are still considering the best way to introduce MFA to the front-line staff. The current proposal to provide tokens to all staff is not considered to be practical or affordable.

4.2 MAJOR CAPITAL PROJECTS

- Our communication with the Department of Transportation and Infrastructure and Social Development leads us to understand that the Nurse Call Replacement is likely to occur in the fall/winter time frame. We have raised our position that the replacement product must integrate with our wireless telephone system. Apparently we are not part of the selection process, something which seems quite odd to me.
- We have not received any update on the ventilation / air conditioning project.

5.0 OTHER ITEMS

5.1 NB ASSOCIATION OF NURSING HOMES.

- The CEO of NBANH has tendered her resignation. Mike Keating has been engaged to provide support while a search occurs for a new CEO. As a board member, I am advocating for a degree of separation between past leadership of the organization and the search for a new leader. Beyond this, we should consider our position with respect to the mandate of the organization and the governance model of NBANH. A rebalancing of perspectives and priorities might be in order.
- Marjorie Belzile, Lyne St-Pierre-Ellis and I will be attending the Annual General Meeting of the NBANH on May 15th.

5.2 THE SENIORS ADVOCATE’S REPORT ON LONG TERM CARE

- Crickets since our last report.....

5.3 PROVINCIAL BUDGET

- We still do not know our funding for the 24/25 year. However, we have received notice of the

following increases:

- 2% COLA for management and non-bargaining positions in April
 - 2% COLA for management and non-bargaining positions in October
 - 2.7% increase in most elements of the supply budget
 - An additional 6.7% about the 2.7% for food, fuel, electricity and care supplies.
 - Increases to account for CPP employer contributions for the newly implemented CPP Enhancement.
- We hope to receive our final funding letter in June.

5.4 SUMMER CONCERTS

Thanks to the funding support of York Care Foundation, we will be holding three summer concerts in our front parking lot. Mark out your calendars now for:

June 24th with Mike Bravener as Elvis

July 22nd with the Clifford Kelly Band

August 19th with the Town Cats

5.5 ATTESTATION

I, Geri Geldart, in my capacity as the Chief Executive Officer of York Care Centre, hereby attest and certify that all mandatory deductions from our employees' wages for the period of January 1, 2024 – March 31, 2024 have been submitted as required by applicable laws, regulations, and contractual agreements. These deductions include federal and provincial income taxes, employment insurance, Canada pension plan, employee pension plans and union dues. Furthermore, I affirm that all voluntary deductions, such as health insurance premiums, retirement plan contributions, and any other authorized deductions, have also been processed correctly and in accordance with our policies and the agreements in place with our employees.

Respectfully Submitted
Geri Geldart
May 13, 2024



Operating Plan Tracker
2023 – 2024
Q4 Progress Update
April 2024



LEGEND



Pillar 1: Care to the Aging Population, Residents & Clients

YCC provides services to the residents living in our long-term care facility, those living in our independent apartments and supportive housing units, and other persons living in our catchment area. Within the range of services currently available, the Board of Directors is committed to continuing and enhancing its services to meet the changing demographics of YCC and its community.

Key Results
A. Improved resident / client quality of life B. Improved quality of care and services. C. Improve resident / client and family satisfaction. D. Increase participation in outreach programs. E. Meet or exceed standards, licensing requirements and key performance indicators. F. Increase the number of activities available.

Strategic Goal	Operational Goal	Measure of Performance	Progress	Q1	Q2	Q3	Q4	
To provide exceptional, person and family centred care and services through evidenced-based delivery models	To improve the quality of Dietary Services with a focus on: <ul style="list-style-type: none"> Increasing the variety of menu options Serving food with an acceptable temperature. improving the dining experience 	<ul style="list-style-type: none"> Expansion of 3-wk menu to a 4-wk menu by Sept. 	COMPLETE				✓	
		<ul style="list-style-type: none"> Food temperature audits 	COMPLETE		✓		✓	
		<ul style="list-style-type: none"> Resident and Family Survey 	COMPLETE	✓				
	To assess the quality of care for residents by implementing bedside audits.	<ul style="list-style-type: none"> Target 90% compliance for each unit. 	COMPLETE - Audit process has been launched. Baseline data is being collected. Process will continue into 24/25. Areas for quality improvement will be identified / addressed.					✓
	As part of the Healthcare Excellence Project, to improve and implement the Advanced Caregiver Training course.	<ul style="list-style-type: none"> Offer two courses by October 2023 Submit final report to Healthcare Excellence Canada by December 2023 	COMPLETE			✓		
			COMPLETE			✓		

Strategic Goal	Operational Goal	Measure of Performance	Progress	Q1	Q2	Q3	Q4
	To improve the “welcoming” process for new residents and their families.	<ul style="list-style-type: none"> • Revise and distribute the YCC Handbook to all residents. • Establish a new “resident review” process occurring 4-6 weeks after admission by December 2023 	COMPLETE			✓	
			COMPLETE				✓
	Participate in the NBANH Healthy Seniors Pilot Project to understand and improve our quality indicators, specifically around restraints, falls and inappropriate antipsychotic use.	<ul style="list-style-type: none"> • Establish improvement strategies for indicators (restraints, falls, antipsychotics) which fall below target by December 2023 	COMPLETE			✓	
To develop and implement a community outreach program.	To expand the Adult Day Program.	<ul style="list-style-type: none"> • Program to operate 5 days/week at 90% capacity by September 2023. 	COMPLETE - New capacity limit established to better reflect the space requirements of this program. Program operates 5 days per week. Marketing work has been successful, and the program is now operating near full capacity. Target for average daily census is now 8 – reduced from 11.				✓
	To expand outreach programming as part of the Nursing Home Without Walls program, with a focus on service navigation and social engagement.	<ul style="list-style-type: none"> • Proposal to be submitted by June 2023. 	COMPLETE Proposal submitted and approved! Program implementation expected to being in July 2024				✓

Strategic Goal	Operational Goal	Measure of Performance	Progress	Q1	Q2	Q3	Q4
To enhance resident/client focused activity programs	To rebuild the Spiritual Care Program.	<ul style="list-style-type: none"> • Increase spiritual program to once weekly by September 2023. • Hold monthly communion for residents by December 2023. 	COMPLETE - Weekly service now in place.		✓		
			COMPLETE - Communion services now in place.				✓
	To rebuild the Recreation Program.	<ul style="list-style-type: none"> • Implement 2 new community-based activity programs by December 2023. 	COMPLETE GEMS and Pre-school programs now in place			✓	
	To improve residents' quality of life through participation in the SQLI Social Life Project.	<ul style="list-style-type: none"> • Determine area of focus by conducting a resident needs assessment for residents to determine what area to focus on by September 2023. • Determine Social Life Project and implement by March 2024. 	COMPLETE			✓	
COMPLETE Focus of project is on Men's Social Engagement. Project will be presented to Care Committee and SQLI in April - May.						✓	

Pillar 2: Resources – People, Financial, Technological

For YCC to be a Centre of Excellence, it is essential that continued attention be given to our resources which include human, financial and technological resources.

Key Results
A. Satisfied workforce through wellness and a safe workplace. B. Improve staffing processes to enhance overall care; more time with residents / clients. C. Responsible fiscal management with a focus on continuous quality improvement. D. Enhance training to staff, clarify roles and ensure adequate supervision across YCC.

Strategic Goal	Operational Goal	Measure of Performance	Progress	Q1	Q2	Q3	Q4
Improve resident / client outcomes through efficient use of current funding model and resources	Review/modify staff schedules to ensure care hour targets can be achieved for each occupational group.	<ul style="list-style-type: none"> Verification of schedule coverage for RNs, LPNs and RAs by Sept 2023. 	COMPLETE		✓		
	Recruit IEN's in partnership with the Provincial IEN Recruitment strategy	<ul style="list-style-type: none"> Recruit and hire 10 IEN's by March 2024 	COMPLETE 9 arrived by year end. 10 th to arrived in late April.				✓
Enhance the staff experience, increase recruitment and improve retention.	To improve the workplace experience by developing and implementing a staff engagement framework	<ul style="list-style-type: none"> Development of framework by November 30 with milestones for Q4. Monitor indicators of staff engagement through the use of quarterly pulse surveys. 	COMPLETE Framework finalized by SLT.				✓
			COMPLETE	✓	✓	✓	✓
	To update the performance appraisal process	<ul style="list-style-type: none"> New appraisal tool and process in place by March 2024 	COMPLETE				✓
	To update the orientation program to include a mentorship component.	<ul style="list-style-type: none"> An updated orientation program in place by March 2024. Assess impact on Year 1 retention rate. 	COMPLETE				✓
							Future year




Strategic Goal	Operational Goal	Measure of Performance	Progress	Q1	Q2	Q3	Q4
	To reduce workplace injuries by implementing "All the Right Moves" training for care services personnel and auditing compliance.	<ul style="list-style-type: none"> Pilot project on one unit with Continuing Care Safety Assoc. to measure views pre/post training by June 2023. Provide training to remaining care areas reaching 90% of care services personnel by March 2024 	Project was not successful due to challenges associated with staffing levels and scheduling. A new model is required.				
			Unable to assess the training model therefore training did not proceed.				
	To improve teamwork by testing a Team Nursing Pilot on Tower 2.	<ul style="list-style-type: none"> Complete by March 2024 	COMPLETE - Project developed and launched successfully. Evaluation underway.				
	Improve communication to staff regarding survey results, quality indicators, education, facility happenings via e-boards in staff rooms.	<ul style="list-style-type: none"> Complete by November 30, 2023 	COMPLETE				
	To improve the quality improvement competency of leaders.	<ul style="list-style-type: none"> Introduce framework in Sept 2023 Provide training on the quality improvement model in Fall 23 	Framework introduction deferred until 24/25.				
			COMPLETE				
	To introduce improvement initiatives as outlined in the QI Annual Plan.	<ul style="list-style-type: none"> Complete milestones identified in the QI Annual Plan. 	Substantial Completion Employee Engagement and New Housing Options are delayed. Work continues in 24/25				
To provide leadership development training based assessed needs.	<ul style="list-style-type: none"> Needs assessment to be completed by August 2023. Implementation plan launched by December 2023. 	COMPLETE					
		COMPLETE					

Pillar 3: Environment – Building, Grounds and Equipment.

The internal and external environments are essential to ensure the well-being of our residents and ensure that staff and volunteers are functioning within a supportive and safe environment.

Key Results
<p>A. Continuous improvements in the internal and external surroundings.</p> <p>B. Positive feedback from residents, clients and families regarding our efforts to maintain our infrastructure in a “near new” state.</p> <p>C. Positive feedback from residents, clients and families articulating our ability to create a “home-like” atmosphere.</p> <p>D. Number of incidents are reduced/eliminated</p>


Strategic Goal	Operational Goal	Measure of Performance	Progress	Q1	Q2	Q3	Q4
Maintain the internal / external surroundings of all our residential facilities at a “near new” state.	To develop and implement an organizational-wide program based on Reduce, Reuse, Recycle.	<ul style="list-style-type: none"> Identify areas of concern along with action plans by September 30th. Implement 100% of plans by March 31st. Med carts to convert to reusable cups and spoons by August 31, 2023. 	<p>Waste Audit report received. Next steps will be to identify potential improvements for responsible waste reduction / diversion</p> <p>COMPLETE</p>				
							
Ensure a safe and secure environment for residents, clients and staff.	To make improvements to the facilities Public Address System	<ul style="list-style-type: none"> Complete audit of the current system and either enhance or replace current system by Sept 30th 	COMPLETE				
	To make improvements to the facility's outdoor lighting	<ul style="list-style-type: none"> Addition of more lighting in the front Dixon and back parking lot by September 30th 	COMPLETE				
	To replace aging equipment as necessary.	<ul style="list-style-type: none"> Replacement of a commercial washing machine and a Burlodge oven by March 31st 	COMPLETE				
	Expand on the current Disaster and Emergency Plan	<ul style="list-style-type: none"> Include a Cyber Security Response in Disaster and Emergency 	COMPLETE				

Strategic Goal	Operational Goal	Measure of Performance	Progress	Q1	Q2	Q3	Q4
		plan by March 2024 <ul style="list-style-type: none"> Establish a schedule for disaster plan exercises by September 2023. 	COMPLETE		✓		
Explore options to expand the senior's housing program.	To assess the potential to convert Hawkins House to a Level 2 Special Care Home	<ul style="list-style-type: none"> Complete by March 31, 2024 	Idea abandoned in 23/24 but with new focus on housing, we will review in 24/25				
	To assess the financial viability of the Wetlands proposal	<ul style="list-style-type: none"> To complete a financial assessment in collaboration with CMHC by October 2023 	Idea abandoned in 23/24 but with new federal & provincial programs, this project may be viable. Will consider in 24/25				
	To establish operational agreements with DSD to take advantage of financial benefits available for non-profit housing.	<ul style="list-style-type: none"> To finalize agreements with GNB Housing prior to December 2023 	Deferred due to staffing changes. Will pursue in 24/25. New federal and provincial housing programs may offer a significant benefit				
Develop and implement a comprehensive risk management plan.	To develop a comprehensive risk matrix to identify and prioritize potential risks.	<ul style="list-style-type: none"> Risk Matrix to be completed by November 2023. 	Deferred due to staffing changes. Will pursue in 24/25				
	To develop risk mitigation plans to be developed for all high priority risks.	<ul style="list-style-type: none"> Risk mitigation plans in place by March 2024 	Deferred due to staffing changes. Will pursue in 24/25				

Pillar 4: Partnerships – Strategic Alliances, Public Relations, Communications

To maintain and improve the services being provided both within the YCC facilities and within our catchment area, it is imperative that strong partnerships be established with out residents, staff, volunteers, health professionals, families, government and non-government agencies, and the community as a whole. Our partnership with the York Care Foundation is essential not only to increase the visibility of YCC but also to ensure that the Foundation can assist with financial and operational requirements.

Key Results
A. Increase volume and effectiveness of partnerships. B. Increase in number of volunteers, volunteer hours and programs. C. Residents, clients and families needs and preferences are met through partnerships. D. Improve communication with all stakeholders and partners. E. Increase marketing initiatives that promote YCCs profile in the community.

Strategic Goal	Operational Goal	Measure of Performance	Progress	Q1	Q2	Q3	Q4
To increase awareness and understanding of goals, objectives and proposed actions with YCC (Staff, Families, Volunteers and Partners).	To develop and implement a comprehensive communication plan which addresses internal and external audiences.	<ul style="list-style-type: none"> Plan, with implementation targets, to be developed by August 2023. Improved employee rating of communication on quarterly survey 	COMPLETE				✓
			Employee ratings of organizational communication have remained strong.	✓	✓	✓	✓
To increase YCCs leadership position in the community by improving the level and the volume of effective partnerships.	To identify new opportunities for YCC to evolve its role as a Centre of Excellence in partnership with other organizations (Region 3 nursing homes, AlzheimersNB, etc).	<ul style="list-style-type: none"> New program or service established in alignment with Centre of Excellence concept by end of year. 	COMPLETE Region 3 nursing homes are offered opportunity to participate in professional development events. Further discussion on Centre of Excellence concept will occur in 24/25				✓
	Establish a fund development plan for York Care Foundation	<ul style="list-style-type: none"> Plan to be developed and approved by Sept 2023 	Under development. Will carry over to 24/25				
	Develop and implement a donor recognition policy for York Care Foundation	<ul style="list-style-type: none"> Policy to be developed and approved by June 2023 	COMPLETE	✓			

Strategic Goal	Operational Goal	Measure of Performance	Progress	Q1	Q2	Q3	Q4
To increase volunteer participation.	Rebuild the Volunteer Program by increasing the number of active volunteers	<ul style="list-style-type: none"> • Increase recruitment by 10% by September 30, 2023 & 20% by December 31, 2023 • Launch a marketing campaign focused on volunteer recruitment. 	Targets achieved. Onboarding continues.		✓	✓	
			Target moved to Q4 due to staff changes.				✓

Pillar 5: Research – Discovery, Innovation, Knowledge Transfer

YCC wants to build a self-sustaining research centre that will focus on improving care, delivering services through a person-centered approach, and to implement evidence based best practices to the betterment of YCC clients.

Key Results
<p>A. Improved quality of life for residents, clients, families and staff.</p> <p>B. Situated at the forefront of health and aging research and recognized as a reputable research organization.</p> <p>C. Increase level of quality research projects, partnerships and collaborations.</p> <p>D. Increase amounts of monetary support from granting agencies, governments, communities and foundations.</p>

Strategic Goal	Operational Goal	Measure of Performance	Progress	Q1	Q2	Q3	Q4
To increase involvement in research activities that focus on promoting and improving the social, emotional and physical well-being of seniors.	Conduct a facility-wide needs assessment to determine the direction and focus of future research studies and programming.	<ul style="list-style-type: none"> Complete needs assessment by September 30, 2023 Establish plan for regular needs “check-ins” 	COMPLETED IN Q3			✓	
							✓
	To ensure research activity is reflective of the needs, interests and issues of the YCC community, establish an advisory committee comprised of staff, families, and residents.	<ul style="list-style-type: none"> Terms of reference developed by September 2023. Committee established by December 2023 	<p>COMPLETE</p> <p>COMPLETE Membership established, pending resident representative. First meeting to be held in Q1.</p>				✓
							✓
To foster relationships with researchers, stakeholders and members of the community.	Hold the 13 th Annual Aging Care and Research Symposium with an increase in attendance from the previous year.	<ul style="list-style-type: none"> By November 2023 	COMPLETE			✓	
To promote and support the translation and transfer of research outcomes, new knowledge and innovation for the betterment of the aging population.	Plan a YCC open house for staff, residents, and family members to learn about the findings from our research projects.	<ul style="list-style-type: none"> By December 2023 	COMPLETE				✓

- Top 3 Ranking
- Middle 4 Ranking
- Bottom 5 Ranking
- ↑ Performance Improving
- ↓ Performance Declining
- ↔ Performance Staying about the Same

NEW

Quality of Life - Resident Survey

	2021	2022	2023	Rank	Progress
Personal Control (max 25)	17	16.0	15.0	●	↓
Staff Responsiveness (max 25)	18.5	17.5	17.6	●	↑
Social Life (max 30)	14	11.5	14.0	●	↑
Food (max 9)	5	5.3	5.6	●	↑
Caring Staff (max 14)	8.8	7.9	8.6	●	↑

Quality of Life - Family Survey

This is a new survey

	SQLI	YCC	Rank	Progress
Basic Needs	pending	72.0	●	
Respect and Trust	pending	69.0	●	
Visiting the Facility	pending	69.0	●	
Engaging in Care	pending	64.0	●	
Global Rating	pending	61.0	●	

Quality of Care

	Q2 23/24	Q3 23/24	Q4 23/24	Target	Progress
Antipsychotics-no Dx psychosis (%)	5	4	6	5	↓
Residents with Pain (% of residents)	4	3	5	5	↓
Residents with Worsened Pain (%)	5	3	12	12	↓
Behavioral Symptoms Improved	12	4	7	10	↑
Behavioral Symptoms Worsened	8	13	9	10	↑
Symptoms of Depression Worsened	21	18	13	18	↑
Falls in last 30 days (% of residents who fell)	18	19	18	20	↑
Falls with major injury - %	NA	2	1	0	↑
New Pressure Ulcer	2	4	2	3	↑
Pressure Ulcer Worsened	2	5	3	3	↑
Physical Restraints (%)	20	18	14	14	↑
Hospitalizations (%) Includes overnight stays	5	7	10	3	↓
COVID - Days on Outbreak Status	23	18	78	0	↓
COVID - % Residents Fully Vaccinated	76	90	NA	98	↔

Dashboard Updated on 08 May, 2024 by Geri Geldart

Resident & Family Survey - YCC

Survey conducted in Summer 2023

	2021	2023	Target	Progress
Resident Overall Rating (% scoring 3 or greater)	4.3	4.1	4.4	↓
Resident - Enjoy Meal Times	3.9	4.1	4.0	↑
Resident - Meaningful Activities	3.7	3.3	3.9	↓
Family Overall Rating (% scoring 3 or greater)	4.5	4.3	4.6	↓

Quality of Worklife

	Q2 23/24	Q3 23/24	Q4 23/24	Target	Progress
Org Comms keeps me informed -% agree	60	56	63	80	↑
YCC -a great place to work- % agree	70	71	66	80	↓
Satisfied with my job -% agree	72	77	77	80	↔
Recommend as a place to work- % agree	68	75	69	80	↓

Human Resource Indicators

	Q2 23/24	Q3 23/24	Q4 23/24	Target	Progress
Care hrs short per day	93	45	5	0	↑
RN hrs act to standard (%) in quarter	74	84	87	100	↑
Retention Rate -12 month look-back (%)	82	82	78	85	↓
Temp Agency Use Hours in Quarter	969	2,320	612	0	↑
Resignations in 1st year employed	8	6	6	< 5	↔
Sick time / 1957 paid hours (std)	14.3	13.6	13.6	13	↑
Overtime % of Pd Hrs in quarter	7.7	7.2	6.0	4	↑
Worksafe Claims in quarter	2	0	3	0	↓

Financial & Support Indicators

	Q2 23/24	Q3 23/24	Q4 23/24	Target	Progress
YCC YTD Expense Budget to Act Var \$	418,796	312,075	9,698		
YCC YTD Net Surplus(Deficit) \$	430,178	302,594	41,763		
YC Fdn - Net Profit Calendar Yr -Mar 24	30,669	34,911	2,818	2,505	
Food Cost per Resident Day \$	12.32	12.19	12.40		
Vacant Bed Day Penalty \$	6,750	47,250	8,875	1,500	↑
Temp Agency Use \$ in Quarter	50,118	124,959	37,508	-	↑

Operating Plan

	Q2 23/24	Q3 23/24	Q4 23/24	Q4 Target	Progress
% Objectives Complete or On Track	37%	60%	84%	100%	↑
% Objectives Falling Behind	11%	11%	16%	0%	↓

**Finance Committee Chair's Summary Report to Board of Directors
12 months ending on March 31, 2024**

- The Finance Committee met on May 6, 2024.
- Reviewed the March 31, 2024 unaudited financial reports. Further adjustments/refinements are expected during the March 31 2024 year-end process. The unaudited financial reports are recommended to the board of directors for approval.
- The total year to date surplus is \$120,000. \$42,000 is at YCC which is about .17 % of the cumulative revenue of \$24,7 million. Razor thin surplus. The surplus is a managed surplus with the previously reported surplus used to purchase necessary one-time items such as replacement beds, computers, and some to cover off inflation increases in supply costs.
- Staff complement (care and administration) is near approved levels which is great news for residents, for care staff, and for administration staff. The organizational efforts will gradually focus on methods to absorb the supplies inflation rates without having the salary surplus safety net. The amount of effort required will depend on the funding received from SD.

Summary of unrestricted financials as of March 31, 2024:

Company	Unrestricted Cash Balance	Payables/Accruals	Surplus(deficit)
York Care Centre	2,028,000	3,227,000	42,000
York Developments Inc.	385,000	118,000	61,000
CIRA	248,000	39,000	17,000
York County Properties	449,000	2,000	0
Totals	3,110,000	3,386,000	120,000

Observations:

- All companies have a cash balance
- All payables can be paid as they become due
- All companies are in a breakeven or in a surplus position

Pierre LeBlanc, Chair
Finance Committee
2024-05-07

YORK CARE CENTRE INC.
Statement of Financial Position
3/31/2024

	Current Month	Prior Month	Difference
<u>ASSETS</u>			
CURRENT			
CASH AND CASH EQUIVALENTS	2,027,825	2,003,945	23,881
CASH - RESTRICTED FUNDS	75,463	75,912	-
ACCOUNTS RECEIVABLE			
- RESIDENTS	115,814	91,384	24,431
- DEPT of SOCIAL DEVELOPMENT	62,520	147,492	-
- HST	46,517	40,991	5,527
- OTHER	70,335	36,683	33,652
INVENTORIES	97,837	148,059	-
PREPAID EXPENSES	34,386	103,686	-
LONG TERM RECEIVABLE	-	-	-
TOTAL CURRENT ASSETS	<u>2,530,699</u>	<u>2,648,150</u>	<u>-</u>
CASH RESTRICTED FOR FUTURE CAPITAL	-	-	-
LAND, BUILDING AND FURNITURE (Net)	<u>14,703,511</u>	<u>14,928,432</u>	<u>-</u>
TOTAL FIXED ASSETS	<u>14,703,511</u>	<u>14,928,432</u>	<u>-</u>
TOTAL ASSETS	<u><u>17,234,210</u></u>	<u><u>17,576,582</u></u>	<u><u>-</u></u>
<u>LIABILITIES</u>			
CURRENT			
PAYABLES & ACCRUALS	3,226,658	3,300,677	-
DEFERRED REVENUE	<u>235,498</u>	<u>62,968</u>	<u>172,529</u>
TOTAL CURRENT	3,462,155	3,363,645	98,510
LONG TERM			
LONG TERM DEBT	12,290,135	12,475,985	-
DEFERRED CONTRIBUTIONS	<u>1,470,736</u>	<u>1,494,944</u>	<u>-</u>
TOTAL LIABILITIES	13,760,871	13,970,929	-
<u>FUND BALANCES</u>			
FUNDS RESTRICTED	66,406	64,876	1,529
UNRESTRICTED	-	-	-
NET INCOME (LOSS) FOR PERIOD	<u>40,127</u>	<u>272,206</u>	<u>-</u>
TOTAL FUNDS	<u>11,183</u>	<u>242,008</u>	<u>-</u>
TOTAL LIABILITIES & FUNDS	<u><u>17,234,210</u></u>	<u><u>17,576,582</u></u>	<u><u>-</u></u>

YORK CARE CENTRE INC.
Statement of Operations - Year to Date
12 MONTHS ENDING 3/31/2024

Description	Actual Previous YTD	Actual Current YTD	Budget Current YTD	Variance Budget vs Actual
REVENUE AND RECOVERIES				
Operating Revenue	23,251,154	22,988,649	22,998,219	- 9,570
Recurring Budget Amendments	-	-	-	-
Non-recurring Budget Amendments	358,295	437,954	437,954	-
Administration	443,162	456,765	434,569 *1.	22,196
Care Services	127,425	130,500	142,462 *2.	- 11,962
Operations	341,536	358,084	327,596 *3.	30,488
Deferred Contributions	300,534	290,491	290,491	0
TOTAL REVENUE AND RECOVERIES	<u>24,822,106</u>	<u>24,662,444</u>	<u>24,631,291</u>	<u>31,153</u>
OPERATING EXPENSES				
Administration	4,158,561	4,184,223	4,340,425 *4.	156,202
Care Services	10,435,478	10,364,516	10,452,953 *5.	88,437
Operations	6,876,958	6,965,237	6,725,901 *6.	-239,336
Mortgage Interest & Depreciation	3,115,052	3,106,705	3,111,100 *7.	4,395
TOTAL EXPENSES	<u>24,586,049</u>	<u>24,620,681</u>	<u>24,630,379</u>	<u>9,698</u>
NET SURPLUS (DEFICIT)	<u>236,057</u>	<u>41,763</u>	<u>912</u>	<u>40,850</u>
Less: Transfer to replacement reserve		<u>3,300</u>	<u>-</u>	<u>- 3,300</u>
(Increase) or Decrease in Operating Fund Accumulated Deficit		<u>38,463</u>	<u>912</u>	<u>44,150</u>

Notes (Actual to Budget):

1. Higher revenue due to higher Summer Student funding \$19.6K & interest \$4.4k.
2. Lower due to lower U of M Project revenue \$23.0K (completed in prior year) offset by Supplier recoveries \$10.8K.
3. Higher Resident Utility Recoveries \$6.6K, Café \$5.6K, Food Rebate/Food Recovery \$13.5K & Security Recovery \$4.7K.
4. Lower due to lower overall Salary/Payroll Costs \$86.6K, Education/Conference Costs \$66.7K, Board/Legal Costs/ Volunteer \$11.4K, Supply Costs \$2.1K offset by higher Bad Debt \$10.0K.
5. Lower due to lower overall Salary Costs \$365.0K , offset by higher Supply Costs \$80.8K, Minor Equipment Costs \$163.6K, & Recruitment Costs \$32.2k.
6. Higher due to higher Supply Costs \$95.7K, Small Equip. \$38.1K, Consulting \$30.6K, Salary Costs \$27.5K, Computers \$29.7K, Linen /Mattress \$20.6K, Events/Get Inspired \$2.0K offset by lower Utility/Building Maint. \$3.1K, Vehicle Costs \$1.8K.
7. Lower Depreciation due to lower capital purchases \$4.4K.

YDIDAT YORK DEVELOPMENT INC
Statement of Financial Position - CONSOLIDATED
3/31/2024

	Current Month	Prior Month	Difference
<u>ASSETS</u>			
CURRENT ASSETS			
CASH	385,407	381,108	4,299
ACCOUNTS RECEIVABLE	34,815	30,151	4,663
HST RECEIVABLE	3,647	1,529	2,118
PREPAID EXPENSES	-16,390	-5,333	-11,057
TOTAL CURRENT ASSETS	407,479	407,455	24
RESTRICTED CASH AND DEPOSITS			
REPLACEMENT RESERVE FUND	291,456	287,214	4,243
DEFERRED VACANCY SUBSIDY	46,117	45,918	199
TOTAL RESTRICTED CASH & DEPOSITS	337,573	333,132	4,442
FIXED ASSETS			
BUILDING & LAND 91 SUNSET DR	518,208	518,208	0
BUILDING & LAND 95 SUNSET DR	516,127	516,127	0
BUILDING & LAND 120 SUNSET DR	973,166	973,166	0
BUILDING & LAND 116 SUNSET DR PROJECT#2	1,333,457	1,333,457	0
BUILDING & LAND 116 SUNSET DR	2,062,837	2,062,837	0
BUILDING IMPROVEMENTS & EQUIPMENT	921,623	921,623	0
ACCUMULATED DEPRECIATION	-4,349,655	-4,335,081	-14,574
TOTAL FIXED ASSETS	1,975,762	1,990,337	-14,574
TOTAL ASSETS	2,720,814	2,730,923	-10,109
<u>LIABILITIES</u>			
CURRENT LIABILITIES			
ACCOUNTS PAYABLE & ACCRUED LIABILITIES	118,336	132,813	-14,476
DEFERRED REVENUE	10,117	12,925	-2,808
TOTAL CURRENT LIABILITIES	128,453	145,738	-17,284
LONG TERM DEBT			
MORTGAGE 116 SUNSET DRIVE	1,556,019	1,566,770	-10,751
TOTAL LONG TERM LIABILITIES	1,556,019	1,566,770	-10,751
DEFERRED CONTRIBUTIONS			
DEFERRED CONTRIBUTIONS RELATED TO CAPITAL ASSETS	3,002	3,168	-167
TOTAL DEFERRED	3,002	3,168	-167
FUND BALANCES			
REPLACEMENT RESERVE RESTRICTED	258,861	287,214	-28,352
VACANCY SUBSIDY RESERVE	46,117	45,918	199
EARNED SURPLUS	667,214	636,619	30,595
NET INCOME (LOSS) FOR PERIOD	61,148	45,497	15,652
TOTAL EQUITY	1,033,340	1,015,247	18,093
TOTAL LIABILITIES & FUND BALANCES	2,720,814	2,730,923	-10,109

YORK DEVELOPMENT INC
Statement of Operations - CONSOLIDATED
12 MONTHS ENDING 3/31/2024

	ACTUAL YTD	BUDGET YTD	VARIANCE
REVENUE			
RENTALS	763,183	781,393	- 18,210
TENANT SUBSIDY	- 21,976	- 25,044	3,068
RENT SUPPLEMENT - SH	127,883	107,699	20,184
ADULT DAY PROGRAM FEES	110,774	151,800	- 41,026
WASHER & DRYER REVENUE	10,597	11,100	- 503
INTEREST INCOME	18,883	10,424	8,459
REVENUE - SD CARE HOURS	160,057	101,223	58,834
REVENUE - OTHER CARE HOURS	6,631	2,650	3,981
REVENUE - TENNANT SERVICES	244,119	243,427	692
AMORT OF DEFERRED CONTRIB	75,390	75,390	- 0
RECOVERY PROJECT WORKERS	14,159	3,600	10,559
MISCELLANEOUS INCOME	30,960	27,132	3,828
TOTAL REVENUE	1,540,660	1,490,794	*1. 49,866
OPERATING EXPENSES			
WAGES & BENEFITS	542,140	504,361	*2. - 37,779
TENANT / ADP CLIENT SUPPORT COSTS	63,283	81,981	*3. 18,698
MAINTENANCE	427,752	432,599	*4. 4,847
ADMINISTRATION	271,443	292,485	*5. 21,042
DEPRECIATION	174,894	157,844	*6. - 17,050
TOTAL OPERATING EXPENSES	1,479,512	1,469,270	- 10,241
NET EARNINGS (LOSS) FOR PERIOD	61,148	21,524	39,625
LESS: TRANSFER TO			
REPLACEMENT RESERVE	18,000	/year	
REPLACEMENT RESERVE - SUPPORTIVE	18,000	/year	

Notes (Actual to Budget):

- Higher than budget SH Care hrs \$62.8K, SH Rent Supplement \$20.2K, Project Workers (students) \$10.6K, SH Interest \$8.5K, Misc \$3.8K, offset by lower ADP Program Fees (fewer clients) \$41.0K & rental Income \$15.1K.
- Higher than budget SH Wages/Benefits (care hrs) \$69.4K offset by lower ADP Wages/Benefits \$26.9K & YDI \$4.7K.
- Lower than budget Food Costs SH \$8.0K, ADP food costs \$10.7K (fewer clients).
- Lower than budget Electricity YDI/SH \$11.9K, Other Utilities \$2.3K, Snow Removal \$2.3K, Building Exp ADP \$5.9K, Supplies (mainly ADP) \$4.0K, Repair & Maintenance \$1.6 offset by higher Replacement Reserve Expense \$17.2K (Flood & Water Damage Vestibule), Minor Equip \$6.1K .
- Lower than budget legal fees \$8.5K, Office Supplies \$5.3K & Board/Advertising/Dues/Misc/Audit Other \$7.3K.
- Higher than budget depreciation (budget does not reflect the updated loan agreement) \$17.1K.

* YDI - Independent Living Units, SP - Supportive Housing and ADP - Adult Day Program

Centre for Innovation and Research
Statement of Financial Position
3/31/2024

	Current Month	Prior Month	Difference
<u>ASSETS</u>			
CURRENT			
CASH AND CASH EQUIVALENTS	248,277	230,502	17,775
ACCOUNTS RECEIVABLE	1,013	1,992	-
ALLOWANCE FOR DOUBTFUL ACCOUNTS	-	-	-
HST RECEIVABLE	8,854	8,822	32
PREPAID EXPENSES	-	-	-
LONG TERM RECEIVABLE	-	-	-
TOTAL CURRENT ASSETS	<u>258,144</u>	<u>241,316</u>	<u>16,828</u>
CAPITAL ASSETS			
EQUIPMENT AND FURNITURE	16,186	16,186	-
ACCUMULATED DEPRECIATION	-	-	-
	<u>13,604</u>	<u>13,398</u>	<u>207</u>
	2,582	2,788	-
TOTAL ASSETS	<u><u>260,726</u></u>	<u><u>244,105</u></u>	<u><u>16,621</u></u>
<u>LIABILITIES</u>			
CURRENT			
ACCOUNTS PAYABLE AND ACCRUED LIABILITIES	32,718	58,495	-
DUE TO YORK MANOR INC.	5,270	5,870	-
DUE TO YORK DEVELOPMENTS INC.	943	232	712
DEFERRED REVENUE	183,347	142,804	40,543
TOTAL CURRENT	<u>222,278</u>	<u>207,400</u>	<u>14,878</u>
<u>FUND BALANCES</u>			
FUND BALANCES			
FUNDS UNRESTRICTED	21,663	21,663	-
NET INCOME (LOSS) FOR THE PERIOD	16,785	15,042	1,744
TOTAL FUNDS	<u>38,448</u>	<u>36,705</u>	<u>1,744</u>
TOTAL LIABILITIES & FUNDS	<u><u>260,726</u></u>	<u><u>244,105</u></u>	<u><u>16,621</u></u>

Centre for Innovation and Research
Statement of Operations - CONSOLIDATED
12 MONTHS ENDING 3/31/2024

	ACTUAL	BUDGET	ACTUAL VS
	YTD	YTD	BUDGET
REVENUE			
GENERAL CONTRIBUTIONS	45,000	45,000	-
PROMOTE PHYS ACTIVITY PROJECT	89,000	-	89,000
IMPROVE IMMUNIZATION PROJECT	12,503	12,503	-
POLYPHARM APP PHASE 2 PROJECT	70,736	86,068	- 15,332
GENIE PROJECT	190,426	200,150	- 9,724
PASSIVE AWARE PROJECT	147,625	163,748	- 16,124
PASSIVE AWARE AT HOME PROJECT	23,438	50,000	- 26,562
A DAY IN THE LIFE PROJECT	33,732	50,000	- 16,268
HEC ADVANCED CAREGIVER TRAINING	10,010	-	10,010
INTEREST INCOME	23,412	7,200	16,212
STUDENT FUNDING	7,356	5,605	1,751
SYMPOSIUM	45,588	40,000	5,588
TOTAL UNRESTRICTED REVENUE	698,825	660,274 *1.	38,551
OPERATING EXPENSES			
WAGES & BENEFITS	8,796	5,605 *2.	- 3,191
ADMINISTRATION	95,774	92,200 *3.	- 3,574
PROJECT RELATED EXPENDITURES	577,469	562,469 *4.	- 15,001
TOTAL EXPENSES	682,039	660,274	- 21,766
NET EARNINGS (LOSS)	16,785	-	16,785

Notes:

- *1. Higher than budget due to overall higher Project Income \$15.0K, Symposium \$5.6K, Student Funding \$1.8K, Interest Income \$16.2K.
- *2. Higher than budget Summer Students \$3.2K , (Other Employee Wages charged to projects \$417.8K).
- *3. Higher than budget Symposium Costs \$5.5k offset by small reduced spends across several accounts.
- *4. Project expenditures align with project revenue above (in grey).

YCPDAT YORK COUNTY PROPERTIES
STATEMENT OF CHANGES IN FINANCIAL POSITION
3/31/2024

ASSETS

CURRENT ASSETS

CASH	449,170
ACCOUNTS RECEIVABLE	2,086
TOTAL CURRENT ASSETS	<u>451,256</u>

LONG-TERM ASSETS

PROPERTY AND EQUIPMENT

YORK FARM	7,601
TOTAL PROPERTY AND EQUIPMENT	<u>7,601</u>
TOTAL ASSETS	<u><u>458,857</u></u>

LIABILITIES

CURRENT LIABILITIES

ACCOUNTS PAYABLE AND ACCRUALS	2,086
TOTAL CURRENT LIABILITIES	<u>2,086</u>

LONG TERM LIABILITIES

TOTAL LONG TERM LIABILITIES	<u>-</u>
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DEFERRED CONTRIBUTIONS

TOTAL DEFERRED	<u>-</u>
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FUND BALANCES

OPERATING SURPLUS	449,170
CAPITAL FUND	7,601
TOTAL FUNDS	<u>456,771</u>

TOTAL LIABILITIES & FUND BALANCES	<u><u>458,857</u></u>
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YCPDAT YORK COUNTY PROPERTIES
Statement of operations
12 MONTHS ENDING 3/31/2024

	ACTUAL YTD	BUDGET YTD	VAR ACTUAL VS BUDGET
REVENUE			
INTEREST INCOME	24,066	20,000	4,066
TOTAL REVENUE	24,066	20,000	4,066
OPERATING EXPENSES:			
SALARIES & BENEFITS	-	-	-
BUILDING & GROUNDS			
PROPERTY TAXES	299	299	-
	299	299	-
ADMINISTRATION			
REIMBURSEMENT OF PARENT COMPANY EXP.	23,767	19,651	4,116
BANK INTEREST & CHARGES	-	50	50
	23,767	19,701	4,066
TOTAL OPERATING EXPENSES	24,066	20,000	4,066
OPERATING SURPLUS (DEFICIT)	-	0	0
NET SURPLUS (DEFICIT)	-	0	0



York Care Centre

Board Session

- 1. Purpose:** The purpose of the project is to facilitate a deep discussion between the York Care Centre, board, and committees, to develop a clear definition of what it means for the Centre to be a Centre of Excellence in Long Term Care.
- 2. Date:** May 27th, 5 p.m. to 8:00 p.m.

Agenda

1. Welcome and Introductions and Background (5 p.m. to 5:30 p.m.)
2. Defining a Centre of Excellence (5:30 p.m.–6:00 p.m.)
 - a. Exercise #1: What does a Centre of Excellence mean to you?
3. Where We Are Today (6:00 p.m. to 6:30 p.m.)
 - a. Exercise #2: What do we excel at?
4. Where Do We Want to Be (6:30 p.m. to 7:00 p.m.)
 - a. Exercise #3: What does the future look like?
5. How Do We Get There (7:00 p.m. to 7:45 p.m.)
 - a. Exercise #3: What is Needed to Achieve the Centre of Excellence?
6. Next Steps and Wrap Up (7:45 p.m. to 8:00 p.m.)

YORK CARE CENTRE
Corporate Governance Policy

Type: Governance Process	Date Issued: February 2005
Title: Orientation – new Board Members	Page: 1 of 1
Approved by: Board of Directors	Gov-O-265
Date Reviewed/Revised: 11/16	

The Chair or delegate, along with the President and Chief Executive Officer is responsible for orientation of all new Board Members.

Accordingly:

All new Board Members will be given a tour of the facility as well as a Board Manual.

YORK CARE CENTRE
Corporate Governance Policy

Type: Governance Process	Date Issued: February 2005
Title: Orientation – new Board Members	Page: 1 of 1
Approved by: Board of Directors	Gov-O-265
Date Reviewed/Revised: 11/16; 04/24	

The Chair or delegate, along with the President and Chief Executive Officer is responsible for orientation of all new Board Members.

Accordingly:

1. All new members of the Board of Directors will be provided with a comprehensive orientation program which addresses the organization’s mandate, its governance structure, board member responsibilities and the nature and scope of its operations.
2. An orientation session will be conducted within 2 months of joining the Board.
3. Resource documents for the board will be available on the board portal.
4. The board portal will contain the relevant legislation, the bylaws, policies and procedures of the board, terms of reference of board committees, the Code of Ethics and Professional Conduct and the Strategic Plan.
5. An orientation plan will be developed and approved by the Board of Directors.
6. All new Board Members will be given a tour of the facility.

Changes made to add a bit more structure and detail to the orientation program.

YORK CARE CENTRE
Corporate Governance Policy

Type: Governance Process	Date Issued: March 25, 2013
Title: Reimbursement to members for out-of-pocket expenses	Page: 1 of 1
Approved by: Board of Directors	Gov-R-270
Date Reviewed/Revised: 11/16	

The legislation and letters patent establishing York County Properties, York Manor Inc. and York Development Inc. provides that members of the Board are to serve without remuneration but that nothing is to preclude the reimbursement of out-of-pocket expenses incurred by members in carrying out their responsibilities as members.

Accordingly:

Members of the Board and its Committees are expected to attend scheduled meetings and be prepared to discuss and resolve matters submitted for consideration. Documents and information in support of matters to be considered are circulated in advance of meetings. These documents/information are provided to members by electronic means.

Members travel to meetings at their own expense using their vehicles. In addition most members prefer to, or have to, translate the documentation received, at their expense, from an electronic format to a printed version.

Therefore members are to be reimbursed for travel costs incurred in attending meetings and additional costs (i.e. ink, paper, etc.) incurred in translating documents from an electronic to a printed format as follows:

- a) Travel expenses:
The greater of \$15.00 or the provincial mileage rate per meeting attended
- b) Other expenses:
\$50.00 per annum for members who attended a minimum of 5 meetings and who incur costs in translating documents from an electronic to a printed format

YORK CARE CENTRE
Corporate Governance Policy

Type: Governance Process	Date Issued: March 25, 2013
Title: Reimbursement to members for out-of-pocket expenses	Page: 1 of 1
Approved by: Board of Directors	Gov-R-270
Date Reviewed/Revised: 11/16; 04/24	

The legislation and letters patent establishing York County Properties, York Manor Inc. and York Development Inc. provides that members of the Board are to serve without remuneration but that nothing is to preclude the reimbursement of out-of-pocket expenses incurred by members in carrying out their responsibilities as members.

Purpose

This policy outlines the guidelines for reimbursement of expenses incurred by members of the Board of Directors when conducting official business on behalf of the organization.

Policy

1. Members of the Board of Directors are eligible for reimbursement of reasonable and necessary expenses incurred in the performance of their duties for the organization.
2. Travel to and from regular meetings of the Board and Board sub-committees is not considered an eligible expense, as these are integral to the responsibilities of board membership.
3. Eligible travel expenses may include transportation (e.g., airfare, mileage reimbursement for personal vehicles), accommodation, meals, and other incidental expenses directly related to official business activities. All expenses must be reasonable and will be reimbursed in accordance with the organization's travel policy (Corporate Policy T-14 Travel Policy)

YORK CARE CENTRE
Corporate Governance Policy

Type: Governance Process	Date Issued: March 2005
Title: Resolution Book	Page: 1 of 1
Approved by: <i>Board of Directors</i>	Gov-R-275
Date Reviewed/Revised: 11/16, 01/23	

Policy:

A Resolution Book, containing all the resolutions approved by the Board of Directors, listed and numbered by year from 1984 onwards, will be maintained and accessible.

YORK CARE CENTRE
Corporate Governance Policy

Type: Governance Process	Date Issued: March 2005
Title: Resolution Book	Page: 1 of 1
Approved by: Board of Directors	Gov-R-275
Date Reviewed/Revised: 11/16, 01/23; 04/24	

Policy:

A Resolution Book, containing all the resolutions approved by the Board of Directors, listed and numbered by year from 1984 onwards, will be maintained and accessible.

No changes are recommended.

YORK CARE CENTRE
Corporate Governance Policy

Type: Governance Process	Date Issued: October 2007
Title: Retirement/Resignation Gifts	Page: 1 of 1
Approved by: Board of Directors	Gov-R-278
Date Reviewed/Revised: 11/16, 06/22	

Policy:

To recognize those Directors who have served on the Board of Directors, the Finance and Administration Committee may approve up to twenty-five dollars (\$25.00) per year on a gift of recognition for Board Members retiring or resigning.

YORK CARE CENTRE
Corporate Governance Policy

Type: Governance Process	Date Issued: October 2007
Title: Retirement/Resignation Gifts	Page: 1 of 1
Approved by: Board of Directors	Gov-R-278
Date Reviewed/Revised: 11/16, 06/22, 05/24	

Policy:

1. *To recognize those Directors who have served on the Board of Directors for at least one three-year term, gifts of recognition in the amount of up to twenty-five dollars (\$25.00) per year of board service may be provided.*
2. *Annually, the Governance and Audit Committee will ensure that all eligible retiring or resigning members are recognized at the annual general meeting of the Board.*

DRAFT