

**Board of Directors**  
**AGENDA**

**Tuesday, February 20<sup>th</sup> @ 5:00pm**

<https://us02web.zoom.us/j/89375212038?pwd=YXZMd29hT1RCcFpEbVc5MW9YTldlUT09>

**Meeting ID: 893 7521 2038 Passcode: 494931**

<b>Item</b>	<b>Description</b>	<b>MRP</b>
<i>Information Session – Genie Demonstration – Tour will leave from the boardroom at 5PM</i>		
1.0	Call to Order and Introductions	Marjorie Belzile
2.0	Guest Speaker – Damon Goodwin – Research NB	
3.0	Declaration of Conflict of Interest	Marjorie Belzile
4.0	Approval of Previous Minutes: December 11, 2023*	Marjorie Belzile
5.0	Business Arising from the Minutes	
6.0	Standing Reports	
6.1	<b>Report from the President &amp; CEO*</b>	Geri Geldart
	6.1.1. Q3 Operating Plan Progress Report*	
	6.1.2. Q3 KPI Dashboard*	
6.2	<b>Research &amp; Ethics Committee</b>	Tracey Burkhardt
	6.2.1. Q3 Report of Committee Chair	
6.3	<b>Care Services Committee</b>	Lyne St-Pierre-Ellis
	6.3.1. Q3 Report of Committee Chair	
6.4	<b>Finance &amp; Administration Committee</b>	Pierre LeBlanc
	6.4.1. Q3 Report of Committee Chair*	
	6.4.2. Unaudited Financial Statements for period ending December 31, 2023*	
	6.4.3. Accounting Standards – Recording Depreciation*	
	6.4.4. York Care Foundation – Project Proposals*	
6.5	<b>Governance &amp; Audit Committee</b>	Deborah Wybou
	6.5.1. Governance & Audit Report of Committee Chair	
	6.5.2. Communication Strategy 2023-25*	
	6.5.3. Policy Approval	
	- Briefing Note – for Information*	
	- Policy Gov-Ends-P-530-Purpose* - original and amended	
	- Policy Gov-Ends-R-550-Residence of Choice* - original and amended	
	- Policy Gov-Ends-E-510-Employer of Choice* - original and amended	
6.6	<b>Report from the York Care Foundation Board Chair*</b>	Hector Losier

**7.0 New Business**

- |     |   |                         |
|-----|---|-------------------------|
| 7.1 | <b>Centre of Excellence Discussion Paper*</b> | <b>Geri Geldart</b>     |
| 7.2 | <b>CEO Evaluation</b>                         | <b>Marjorie Belzile</b> |
| 7.3 | <b>Vice Chair</b>                             | <b>Marjorie Belzile</b> |

**8.0 Other**

**9.0 Next Meeting: Monday, May 13, 2024 @ 5:30pm**

***\*Denotes attachment***

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**Proposed Motions**

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1. That the minutes of December 11, 2023, be approved.
2. That the unaudited financial statements for the period of October 1- December 31, 2023 be approved as presented.
3. That the recommendation to align to the accounting standards for not-for-profit organizations and record depreciation based on the useful life of the asset rather than the principal loan payments of mortgages on these assets be approved.
4. That the list of five project proposals be approved and presented to the York Care Foundation for consideration.
5. That the revised Communication Strategy 2023 - 2025 be approved as presented.
6. That Policy Gov-Ends-P-530 -Purpose, Policy Gov-Ends-R-550-Residence of Choice, and Policy Gov-Ends-E-510-Employer of Choice be approved as amended.

**Minutes of meeting of the Board of Directors for York Care Centre, 100 Sunset Drive,  
Fredericton NB,  
Meeting On December 11, 2023 at 5:30pm**

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

Regrets: Hector Losier (non-voting)

**1. Call to Order & Introductions**

The Chair, Ms. Belzile called the meeting to order at 5:31pm and welcomed Bryanna & Donna to the board along with round table introductions.

**2. Declarations 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 Minutes: October 3, 2023**

***It was moved by Deborah Wybou and seconded by Andrea Seymour that the Minutes of October 3, 2023 be approved by the Board of Directors. All in favour. - Motion carried***

**4. Business Arising**

None.

**5.0 Standing Reports**

**5.1 Report from the President and CEO**

Ms. Geldart provided an overview of her report which was circulated with the agenda package.

Highlights included:

- The operating plan quarter progress report was circulated with the agenda package. Members were advised that some of the annual workplan goals are delayed due to the staffing crisis experienced in August/September.
- Covid – Since no COVID transmissions occurred in the facility, the masking policy which was in place between September and November was successful. There was, however, a significant GI outbreak in September affected all units and many of the staff.
- Recruitment efforts have resulted in positive changes in our staffing status. Last week, staffing levels were at 100% of funded care hours. This week, the number has fallen to 95%. An RA training course will be held in the spring.

- The international recruits are continuing to arrive. YCC has leased three apartments to ensure that the new employees have access to temporary housing until they make their own arrangements.
- G. Geldart advised of three new hires in Administration Jennifer Vos, Executive Assistant and Board Coordinator; Tara Thibault, Communication & Marketing Coordinator; and Heather Harris-Jones, CFO.
- G. Geldart provided an update on CUPE contract negotiations. The conciliation process was unsuccessful with an impasse declared. The union will not be in a legal strike position until essential service designation agreements have been reached. Rumours regarding a potential illegal strike are related to proposed legislation that would move the nursing home pensions to a shared risk model. Senior leaders are reviewing and updating our strike plan.
- NB Association of Nursing Homes – NBANH representatives have met with the Deputy & Assistant Deputy of SD to share concerns regarding funding. A small group of administrators have formed a “Call to Action” group which may launch a public awareness campaign, independent of the Association. The board supported G. Geldart’s decision to not participate in this action.
- A letter has been sent to the deputy minister of Social Development detailing our concerns regarding the Nursing Home Waitlist process. A reply has been received, hopefully a meeting will occur before the end of this year.
- KPI Dashboard – The Quality of Care indicators remain positive, with the exception of restraint use. A quality improvement project, focused on restraints, is underway. G. Geldart highlighted that many of the quality of worklife KPIs, and the resident/family satisfaction KPIs showed a drop in scores in Q2. These results align with the staffing challenges experienced in August / September.

## **5.2 Research and Ethics Committee**

### **5.2.1 Q2 Research and Ethics Committee – Report of Committee Chair**

Ms. Burkhardt provided the report from the Research and Ethics Committee. Highlights included:

- The symposium was well attended and considered to be a success. The team are considering holding the event in September 2024, rather than November.
- Many of the current research projects will be completed by March 2024. There is potential for new project approvals, which may allow us to retain our current research coordinators.
- There will be a demonstration of Genie on February 20, 2024 at 5:15pm. A. Seymour asked if the presentation could be provided via zoom.
- Although not yet formally announced, we have been approved for a CABHI Discover and Adopt Grant. As part of the project, YCC will be seeking a partnership with an innovator who can help improve the resident dining experience.
- Centre of Excellence Discussion – The committee discussed the “Centre of Excellence” concept and the role that research can play in YCC’s evolution. Future committee discussions are required to determine our focus.

## **5.3 Care Services Committee**

### **5.3.1 Q1 Care Services Committee – Report of Committee Chair**

Ms. St-Pierre-Ellis provided the report from the Care Services Committee. Highlights included:

- The Adult Day Program is struggling to meet the numbers required for full capacity. The program is popular with participants, but there is turnover due to the declining health of participants. Reaching the full enrollment target may also be difficult given the limited room size.
- Family advocacy group has met twice since the last meeting. An on-line meeting was held recently. The group is being encouraged to identify a co-facilitator.

## 5.4 Finance and Administration Committee

### 5.4.1. Q2 Finance and Administration Committee – Report of Committee Chair

Mr. LeBlanc presented the Q2 Finance & Administration Report, including the following:

- The surplus for all companies is \$502,000. All companies have a cash balance.
- Plan to review the detailed reporting with the CFO to condense the reporting. Members have been asked to remain after the Board of Directors meeting if interested in taking part in the review/revision of these reports.

### 5.4.2 Unaudited Financial Statements for the period ending September 30,2023

The unaudited financial statements for the period ending September 30, 2023 were included in the meeting package.

***Motion: It was moved by Deborah Wybou and seconded by Doug Holt that the Board of Directors approve the unaudited financial statements with the amendment “deferred revenue for CIRA in the amount of \$10,715” for the period ending September 30, 2023 as presented by the Finance Committee.***

***All in favour.***

***Motion Carried***

## 5.5 Governance and Audit Committee

### 5.5.1 Q2 Governance and Audit Committee – Report of Committee Chair

Ms. Wybou presented the Q2 report from the Governance and Audit Committee. Highlights included:

- The committee will review the seven board policies which were last reviewed in 2016. The 3 Ends policies will be reviewed in Quarter 3, and the 4 Governance policies in the Quarter 4 meeting.
- A board education session was held on November 27th, and a board orientation session was held on December 5th.
- A donation of a large, embroidered replica of the York Country Council Coat of Arms was made to the Fredericton Museum.
- The committee suggests that a board retreat, prior to the next strategic planning cycle, might be useful. It may be an appropriate forum to consider the concept of “Centre of Excellence” and the implications for our next strategic plan.
- Scope and responsibilities of committees will be reviewed once the finance reporting refinement has been completed.

- To improve the process of board self-evaluation, a short survey will be sent to members following each committee and board meeting. Results will be shared with the Chairs, and a full report will be shared annually with the Board.

### **5.5.2 Communication Plan**

Ms. Geldart presented the Communication Strategy. The objectives are to elevate YCC's organizational presence, to build trust, to attract talent, and to build the YCC brand as a Centre of Excellence. The plan identified target audiences and primary messages. Priorities for 2023 – 2025 include circulation of an updated Resident Handbook, a refresh of the website, marketing strategies for staff and volunteer recruitment, as well as major fundraising events. Board members recommended that the strategy be amended to include key messages.

## **6.0 New Business**

### **6.1 Board of Directors Annual Workplan**

G. Geldart reviewed the upcoming elements of the board's annual workplan.

### **6.2 Board of Directors meeting Schedule Revised\***

The revised meeting schedule was included in the meeting package for the remainder of 2023-2024. February 20th Board of Directors meeting start time will be 5:15pm.

### **6.3 YC Foundation Report**

Ms. Geldart, presented on H. Losier's behalf, the Foundation report highlighting the following:

- Laugh for Care was held on October 28<sup>th</sup>. It was not a sellout, but with 200 tickets sold, the event was a financial success.
- Community Breakfast on November 25<sup>th</sup> served over 400 meals. The Foundation is pleased with the results, raising over \$2,300.
- The Wreath Campaign was a success with 600 wreaths sold by Foundation board members.
- Two new members have joined the Foundation board – Raymer Salvador and Sonya Gilks. The board was advised of the sad news that Paul Wentzel has passed away. Paul was a long-time supporter of York Care Centre and York Care Foundation. A donation to the York Care Foundation was made on behalf of York Care Centre.

## **7.0 The Board of Directors entered an in-camera session.**

***It was moved by Mr. Snowden that the meeting be adjourned.***

## **7.0 The Board of Directors entered an in-camera session.**

Next meeting date is February 20, 2024 at 5:15pm.

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Marjorie Belzile, Chair

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Jennifer Vos, Recorder



## **Report to the Board**

President & Chief Executive Officer

For the period: December 6, 2023 – February 14, 2024

### **Prepared By:**

Gerri Geldart, President & Chief Executive Officer  
Presented on Feb 20, 2024

## 1.0 STRATEGIC PLAN, OPERATIONAL GOALS AND KPI DASHBOARD

- A progress report on the operational goals is attached. Timeline for certain goals were adjusted to allow staff to focus on resolving the staffing shortage experienced in the fall. Our work on an Employee Engagement Framework and the Risk Management Framework have fallen behind.
- Jamie Roy's team is actively working on our Nursing Home Without Walls proposal and we expect to have this complete before the end of Quarter 4.
- Please note the following on the KPI Dashboard
  - Human resource indicators are trending in the right direction.
  - We have introduced two new indicators to track our use of temporary staffing agencies. Our usage increased during our recent staffing crisis, but this is an expensive and lower quality solution that we wish to limit.

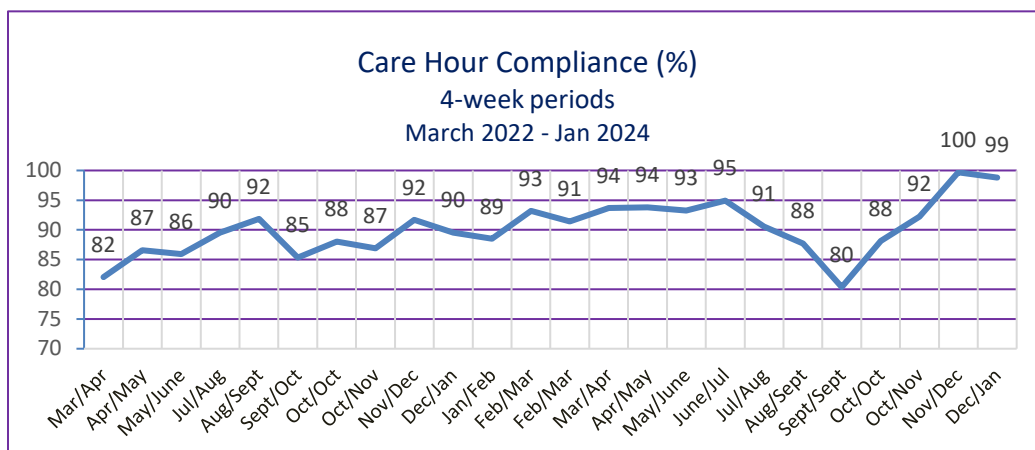
## 2.0 CARE SERVICES

### 2.1 CURRENT PANDEMIC STATUS & HIGHLIGHTS

- We experienced a period of COVID activity amongst staff and residents during the month of December. We followed Public Health guidelines and introduced masking when the outbreak was declared. With case activity settling in early January, we were able to remove the mask mandate by mid-January.

### 2.2 CRITICAL STAFFING SHORTAGE

- I am pleased to say that our staffing situation has improved significantly. We are now seeing the results of intensive recruitment and training. Our Care Hour Compliance has been in the 90's since mid-November. We have implemented weekly monitoring of recruitment and care compliance indicators as a means to prevent the crisis seen in Aug/September.
- We kept a number of beds closed during this time period as a means of reducing workload. The beds were re-opened in December.



### 2.3 NURSING HOME WAITLIST CONCERNS

- A letter was sent to the Deputy Minister of Social Development in December outlining concerns regarding the challenges our staff face when trying to work with the new system / process for managing the nursing home wait list. (attached). A meeting was held in early January in response to our letter. The feedback seemed to be received in the spirit of improvement, but we have had no further communication. We will continue to raise our concerns given the workload impact on our staff.
- Prioritization of Alternate Level of Care Patients – In early January, under the authority of the Nursing Home Act – regulation 85-187, the Minister of Social Development directed that ALC patients in the Saint John Regional Hospital would move to the top of the wait list for a 30-day period of time. This was a new process, and a number of glitches were encountered. However, York Care Centre admitted at least one resident from SJRH during this time period, a resident who had selected York Care as their preferred home.
- Further activations occurred throughout the month of January. As of today, ALC patients from DECH are still prioritized.
- The opening of the 60-bed Shannex Medley Hall should alleviate some of the pressure in the Fredericton area.
- Government announced approval for a 60-bed nursing home in Oromocto – expected to open in 2026.

## 3.0 PEOPLE AND CULTURE

### 3.1 RECRUITMENT

- Seven of the Philippine recruits have arrived and are fitting in well.
- We have rented three apartments to provide the new recruits with average cost temporary housing (up to three months) while they search for permanent housing. This arrangement seems to be working well.
- Shelley Kenny will be returning to the Philippines in March for a second mission, with the aim to hire 15 additional candidates.
- We will offer another Resident Attendant program in April.
- RN and LPN recruitment remains a challenge, but we are seeing some success.

### 3.2 CUPE NEGOTIATIONS

- Nothing new to report on the status of negotiations.
- The management team has completed an update of the strike plan.

### 3.3 PROFESSIONAL DEVELOPMENT

- The management and supervisory staff will be participating in a Conflict Management / Challenging Conversations workshop on March 7<sup>th</sup>.
- Planning is underway for a general staff “Wellness Day” on May 2<sup>nd</sup> which will provide opportunity for any staff member to participate in short workshops / activities focused on positive workplace practices and behaviors.
- The Senior Leadership Team are exploring options for providing a more formalized management development program. We hope to have a recommendation before the end of Quarter 4.

## 4.0 FACILITIES AND INFRASTRUCTURE

#### 4.1 TILE REMOVAL

- Recent investigation of loose tiles in the Best Building hallway indicates the need to have the flooring replaced (asbestos). Abatement, removal and replacement will be required at a cost of approximately \$30,000. We will submit a budget amendment request to cover the cost of this repair.

#### 4.2 CAPITAL PROJECTS

- Recent communication with DSD indicates that we will receive approval for one of our capital project requests. We had, in October 2023, requested two projects:
  - replacement of our nurse call system, and
  - engineering assessment to identify best approach for resident room air conditioning.
- DSD preference seems to be the engineering assessment, but we were able to highlight to urgency of the nurse call replacement. We expect further communication from DSD in the coming weeks.

### 5.0 OTHER ITEMS

#### 5.1 CENTRE OF EXCELLENCE – Discussion Paper & ResearchNB

- Included in the February board agenda package is a discussion paper on the concept of “Centre of Excellence.” Two of the board sub-committees (Research & Ethics, Governance & Audit) were asked to reflect on York Care Centre’s vision statement and to determine if any change in direction is necessary to allow us to achieve this strategic outcome. Discussion papers were prepared for each committee to facilitate their review. The Governance Committee requested these documents be consolidated and shared with the full board for information and to provide a foundation for future discussions.
- Also on the topic of Centre of Excellence, I have connected with Damon Goodwin, CEO of ResearchNB to gain his perspective on the potential for aging research development in New Brunswick. The sustainability of our research company, CiRA, is very dependent on funding. His knowledge and expertise will be helpful as we consider the Centre of Excellence question. For this reason, we have asked Mr. Goodwin to meet with the full board. I have asked him to provide an overview of the research landscape in NB, particularly, the aging research landscape. He will be joining us on February 20<sup>th</sup>.

#### 5.2 NB ASSOCIATION OF NURSING HOMES.

- NBANH has changed our Employee and Family Assistance Program provider. We are transitioning from Telus Health to Homewood Health.
- The “Call to Action” group will hold a media conference on Feb 15, 2024.
- The Association has issued a call for nominations for two awards. These awards will be presented at the annual meeting in May. We should consider possible nominations.
  - **The Lifetime Achievement Award** recognizes residents, staff, board members or volunteers from NBANH member homes, for individuals that are living or passed, for their noteworthy accomplishments and outstanding contributions to their community and/or their nursing home. Eligibility: This award is open to nursing home’s resident, staff, board member, or volunteer that is living or passed.
  - **The Resident-Centred Home Award** is presented to an active member that demonstrates significant progress in creating a home-like environment and promoting a relationship-centred culture. Eligibility: Must be a member of NBANH. The initiative should have been implemented within the past two years. This award nomination is open to the public.

#### 5.3 CENTRE FOR AGING + BRAIN HEALTH INNOVATION

- We were successful applicants under the CABHI Discover and Adopt funding opportunity. Through this program, we have the access to up to \$150,000 to test and adopt an innovative solution to a “pain area” in the delivery of long-term care. Our application focused on the need to improve the dining experience – with many of our residents unhappy with food temperature and food choice. We have selected “Suzy-Q” – a mobile steam cart – as the technology to test. The grant will be used to procure the technology and for staff time dedicated to the testing and adopt the innovation. We are quite excited by this opportunity. CiRA will lead the implementation team which will have participants from Dietary and Care Services.

#### **5.4 EVENTS**

- CiRA Open House – March 25, 2024
- NBANH Annual Conference – May 15 & 16, 2024

#### **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 October 1, 2023 – December 31, 2023 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  
February 14, 2024



**Operating Plan Tracker  
2023 – 2024  
Q3 Progress Update  
January 2024**

LEGEND



COMPLETE



ORIGINAL TARGET DATE



REVISED TARGET DATE



















OVERDUE

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

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"> <li>Increasing the variety of menu options</li> <li>Serving food with an acceptable temperature.</li> <li>improving the dining experience</li> </ul>	<ul style="list-style-type: none"> <li>Expansion of 3-wk menu to a 4-wk menu by Sept.</li> </ul>	Target moved from Q2 to Q4. Transitioning to the new dietary information system has taken longer than expected. Until fully implemented, introduction of the new 4-wk menu is delayed.				
		<ul style="list-style-type: none"> <li>Food temperature audits</li> </ul>	<b>COMPLETE</b>				
		<ul style="list-style-type: none"> <li>Resident and Family Survey</li> </ul>	<b>COMPLETE</b>				
	To assess the quality of care for residents by implementing bedside audits.	<ul style="list-style-type: none"> <li>Target 90% compliance for each unit.</li> </ul>	Falling behind on this initiative due to staff shortages. Hope to start audits in Q4.				
	As part of the Healthcare Excellence Project, to improve and implement the Advanced Caregiver Training course.	<ul style="list-style-type: none"> <li>Offer two courses by October 2023</li> <li>Submit final report to Healthcare Excellence Canada by December 2023</li> </ul>	<b>COMPLETE</b>				
			<b>COMPLETE</b>				
To improve the “welcoming” process for new residents and their families.	<ul style="list-style-type: none"> <li>Revise and distribute the YCC Handbook to all residents.</li> </ul>	<b>COMPLETE</b> Revisions completed in Q3. For distribution in January.					






Strategic Goal	Operational Goal	Measure of Performance	Progress	Q1	Q2	Q3	Q4
		<ul style="list-style-type: none"> <li>Establish a new "resident review" process occurring 4-6 weeks after admission by December 2023</li> </ul>	Target has been moved to Q4. Implementation delayed due to staffing shortages.				
	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"> <li>Establish improvement strategies for indicators (restraints, falls, antipsychotics) which fall below target by December 2023</li> </ul>	<b>COMPLETE</b> Improvement initiatives in place for restraints, falls and antipsychotics. Improvements are now being identified.				
To develop and implement a community outreach program.	To expand the Adult Day Program.	<ul style="list-style-type: none"> <li>Program to operate 5 days/week at 90% capacity by September 2023.</li> </ul>	Falling Behind. Program is operating 5 days per week, but has not reached 90% occupancy. Capacity and target occupancy to be re-evaluated.				
	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"> <li>Proposal to be submitted by June 2023.</li> </ul>	Target moved to Q4 to balance workload of involved staff.				
To enhance resident/client focused activity programs	To rebuild the Spiritual Care Program.	<ul style="list-style-type: none"> <li>Increase spiritual program to once weekly by September 2023.</li> <li>Hold monthly communion for residents by December 2023.</li> </ul>	Weekly service now in place.				
			Not in place yet. Continue to support the religious communities as they plan for reintroduction.				
	To rebuild the Recreation Program.	<ul style="list-style-type: none"> <li>Implement 2 new community-based activity programs by December 2023.</li> </ul>	<b>COMPLETE</b> GEMS and Pre-school programs now in place				










Strategic Goal	Operational Goal	Measure of Performance	Progress	Q1	Q2	Q3	Q4
	To improve residents' quality of life through participation in the SQLI Social Life Project.	<ul style="list-style-type: none"> <li>• Determine area of focus by conducting a resident needs assessment for residents to determine what area to focus on by September 2023.</li> <li>• Determine Social Life Project and implement by March 2024.</li> </ul>	<p><b>COMPLETE</b></p> <p>On track</p>			✓	
							🎯

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






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"> <li>Verification of schedule coverage for RNs, LPNs and RAs by Sept 2023.</li> </ul>	<b>COMPLETE</b>		✓		
	Recruit IEN's in partnership with the Provincial IEN Recruitment strategy	<ul style="list-style-type: none"> <li>Recruit and hire 10 IEN's by March 2024</li> </ul>	On track. Three candidates arrived in Q3. Three more have arrival dates in January 2024.				
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"> <li>Development of framework by November 30 with milestones for Q4.</li> <li>Monitor indicators of staff engagement through the use of quarterly pulse surveys.</li> </ul>	Target moved to Q4 due to staffing shortage.				
			Quarterly pulse surveys continue. Scores remain strong, but participation is waning. Surveys may be too frequent.	✓	✓	✓	
	To update the performance appraisal process	<ul style="list-style-type: none"> <li>New appraisal tool and process in place by March 2024</li> </ul>	In progress				
	To update the orientation program to include a mentorship component.	<ul style="list-style-type: none"> <li>An updated orientation program in place by March 2024.</li> <li>Assess impact on Year 1 retention rate.</li> </ul>	Not Started				
							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"> <li>Pilot project on one unit with Continuing Care Safety Assoc. to measure views pre/post training by June 2023.</li> <li>Provide training to remaining care areas reaching 90% of care services personnel by March 2024</li> </ul>	Falling Behind: Pre-survey completed. Training delivered on Tower 3. Awaiting results of pre/post evaluation.				
			Training to be offered throughout the Care Services group after evaluation results are reviewed. Training will be required on an ongoing basis. Support Services training underway.				
	To improve teamwork by testing a Team Nursing Pilot on Tower 2.	<ul style="list-style-type: none"> <li>Complete by March 2024</li> </ul>	Not started				
	Improve communication to staff regarding survey results, quality indicators, education, facility happenings via e-boards in staff rooms.	<ul style="list-style-type: none"> <li>Complete by November 30, 2023</li> </ul>	Target moved to Q4  Technology is in place. Equipment purchased. Content deployment somewhat delayed due to turnover in Communications.				
	To improve the quality improvement competency of leaders.	<ul style="list-style-type: none"> <li>Introduce framework in Sept 2023</li> <li>Provide training on the quality improvement model in Fall 2023.</li> </ul>	Framework introduction deferred until Q4.				
			<b>COMPLETE</b> Training provided in Q2.				
	To introduce improvement initiatives as outlined in the QI Annual Plan.	<ul style="list-style-type: none"> <li>Complete milestones identified in the QI Annual Plan.</li> </ul>	On track				
	To provide leadership development training based assessed needs.	<ul style="list-style-type: none"> <li>Needs assessment to be completed by August 2023.</li> <li>Implementation plan launched by December 2023.</li> </ul>	<b>COMPLETE</b> Needs assessment completed. Plan not yet finalized.				
			Target delayed to Q4 due to staff shortages.				

**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"> <li>Identify areas of concern along with action plans by September 30th. Implement 100% of plans by March 31st.</li> <li>Med carts to convert to reusable cups and spoons by August 31, 2023.</li> </ul>	Target moved to Q4. Assessment has been completed by Environmental Studies graduate student. Expect final report in January 2024				
			<b>COMPLETE</b>				
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"> <li>Complete audit of the current system and either enhance or replace current system by Sept 30<sup>th</sup></li> </ul>	<b>COMPLETE</b>				
	To make improvements to the facility's outdoor lighting	<ul style="list-style-type: none"> <li>Addition of more lighting in the front Dixon and back parking lot by September 30<sup>th</sup></li> </ul>	Target moved to Q4. Contract awarded. Awaiting contractor availability.				
	To replace aging equipment as necessary.	<ul style="list-style-type: none"> <li>Replacement of a commercial washing machine and a Burlodge oven by March 31st</li> </ul>	Complete.				


Strategic Goal	Operational Goal	Measure of Performance	Progress	Q1	Q2	Q3	Q4
	Expand on the current Disaster and Emergency Plan	<ul style="list-style-type: none"> <li>• Include a Cyber Security Response in Disaster and Emergency plan by March 2024</li> <li>• Establish a schedule for disaster plan exercises by September 2023.</li> </ul>	Risk scanning underway by contractor.				
			Complete. Plan in place to exercise all codes. An exercise will be conducted every two months.		✓		
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"> <li>• Complete by March 31, 2024</li> </ul>	Decision made to no longer pursue this objective.				
	To assess the financial viability of the Wetlands proposal	<ul style="list-style-type: none"> <li>• To complete a financial assessment in collaboration with CMHC by October 2023</li> </ul>	Decision made to no longer pursue this objective.				
	To establish operational agreements with DSD to take advantage of financial benefits available for non-profit housing.	<ul style="list-style-type: none"> <li>• To finalize agreements with GNB Housing prior to December 2023</li> </ul>	Not started. Target moved to Q4				
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"> <li>• Risk Matrix to be completed by November 2023.</li> </ul>	Delayed due to staffing shortages. Target moved to Q4				
	To develop risk mitigation plans to be developed for all high priority risks.	<ul style="list-style-type: none"> <li>• Risk mitigation plans in place by March 2024</li> </ul>	Not started.				

#### 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"> <li>Plan, with implementation targets, to be developed by August 2023.</li> <li>Implementation targets tracked quarterly.</li> <li>Improved employee rating of communication on quarterly survey</li> </ul>	In development Target moved to Q4 due to staffing changes.				
			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"> <li>New program or service established in alignment with Centre of Excellence concept by end of year.</li> </ul>	Exploration underway.  Offering educational opportunities to other homes. Providing assistance, when requested.				
	Establish a fund development plan for York Care Foundation	<ul style="list-style-type: none"> <li>Plan to be developed and approved by Sept 2023</li> </ul>	Target delayed due to staff changes.				
	Develop and implement a donor recognition policy for York Care Foundation	<ul style="list-style-type: none"> <li>Policy to be developed and approved by June 2023</li> </ul>	Completed				

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"> <li>• Increase recruitment by 10% by September 30, 2023 &amp; 20% by December 31, 2023</li> <li>• Launch a marketing campaign focused on volunteer recruitment.</li> </ul>	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"> <li>Complete needs assessment by September 30, 2023</li> <li>Establish plan for regular needs “check-ins”</li> </ul>	<p><b>COMPLETED IN Q3</b></p> <p>31 residents interviewed; meetings underway to discuss plan for a quality improvement initiative based on results.</p>			✓	
							
	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"> <li>Terms of reference developed by September 2023.</li> <li>Committee established by December 2023</li> </ul>	<p>Target moved to Q4</p> <p>Target moved to Q4</p>				
							
To foster relationships with researchers, stakeholders and members of the community.	Hold the 13 <sup>th</sup> Annual Aging Care and Research Symposium with an increase in attendance from the previous year.	<ul style="list-style-type: none"> <li>By November 2023</li> </ul>	<p><b>COMPLETE</b></p> <p>Successful Symposium held in November. Plans underway for 2024.</p>			✓	
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"> <li>By December 2023</li> </ul>	<p>Target moved to Q4.</p> <p>Event scheduled for March 25, 2024.</p>				

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

Results of the Dec 2023 survey expected in March 2024

Quality of Life - Resident Survey		SQLI - Most recent data - Dec 2022			
	2019	2021	2022	Rank	Progress
Personal Control (max 25)	15.1	17.0	16.0	<span style="color: orange;">●</span>	↓
Staff Responsiveness (max 25)	17	18.5	17.5	<span style="color: orange;">●</span>	↓
Social Life (max 30)	14.5	14.0	11.5	<span style="color: red;">●</span>	↓
Food (max 9)	5.1	5.0	5.3	<span style="color: orange;">●</span>	↑
Caring Staff (max 14)	8.7	8.8	7.9	<span style="color: orange;">●</span>	↓

Family Survey - International		SQLI - Most recent data - Dec 2022			
	SQLI	YCC	Rank	Progress	
Family Survey - Trust the staff (SQLI comparator)	88.0	100.0	<span style="color: green;">●</span>	↑	
Family survey - Average Score - (SQLI comparator)	87.0	94.0	<span style="color: green;">●</span>	↑	

Quality of Care		NEW			
	Q1 23/24	Q2 23/24	Q3 23/24	Target	Progress
Antipsychotics-no Dx psychosis (%)	4	5	4	18	↑
Residents with Pain (% of residents)	3	4	3	5	↑
Residents with Worsened Pain (%)	14	5	3	12	↑
Behavioral Symptoms Improved	7	12	4	10	↓
Behavioral Symptoms Worsened	11	8	13	10	↓
Symptoms of Depression Worsened	20	21	18	18	↑
Falls in last 30 days (% of residents who fell)	22	18	19	20	↓
Falls with injury - now only reporting major ii	0	0	2%	TBD	
New Pressure Ulcer	2	2	4	3	↓
Pressure Ulcer Worsened	2	2	5	3	↓
Physical Restraints (%)	20	22	18	14	↑
Hospitalizations (%) Includes overnight stays	5	4	7	3	↓

COVID - Days on Outbreak Status	23	10	18	0	↓
COVID - % Residents Fully Vaccinated	76	88	90	98	↑

Dashboard Updated on 05 February, 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		NEW			
	Q1 23/24	Q2 23/24	Q3 23/24	Target	Progress
Org Comms keeps me informed -% agree	67	60	56	80	↓
YCC -a great place to work- % agree	72	70	71	80	↑
Satisfied with my job -% agree	77	72	77	80	↑
Recommend as a place to work- % agree	73	68	75	80	↑

Human Resource Indicators		NEW			
	Q1 23/24	Q2 23/24	Q3 23/24	Target	Progress
Care hrs short per day	60	93	45	0	↑
RN hrs act to standard (%) in quarter	101	74	84	100	↑
Retention Rate -12 month look-back (%)	79	82	82	85	↔
NEW Temp Agency Use Hours in Quarter	380	969	2,320	-	↓
Resignations in 1st year employed	8	8	6	< 5	↑
Sick time / 1957 paid hours (std)	12.74	14.3	13.6	13	↑
Overtime % of Pd Hrs in quarter	5.3	7.7	7.2	4.0	↑
Worksafe Claims in quarter	0	2	0	0	↑

Financial & Support Indicators		NEW			
	Q1 23/24	Q2 23/24	Q3 23/24	Target	Progress
YCC YTD Expense Budget to Act Var \$	203,871	418,796	312,075		
YCC YTD Net Surplus(Deficit) \$	236,057	430,178	302,594		
YC Fdn - Net Profit Calendar Yr - Dec	6,430	30,669	34,911	29,340	↑
YTD Food Cost per Resident Day \$	11.21	12.32	12.19		
YTD Vacant Bed Day Penalty \$	4,750	6,750	7,000	1,500	↓
NEW Temp Agency Use \$ in Quarter	18490	50,118	124,959	-	↓

Operating Plan		NEW			
	Q1 23/24	Q2 23/24	Q3 23/24	Q3 Target	Progress
% Objectives Complete or On Track	51%	37%	60%	71%	↑
% Objectives Falling Behind	2%	11%	11%	0%	↔

**Finance Committee Chair’s Summary Report to Board of Directors  
9 months ending on December 31, 2023**

- The Finance Committee met on February 12, 2024.
- Reviewed the December 31, 2023 financial reports. They have been streamlined to report on a quarterly basis only. Further adjustments/refinements are expected during 2024. They are recommended to the board of directors for approval.
- The total year to date surplus is \$345,000 (\$302,000 is at YCC) which is about 1.74 % of the cumulative revenue of \$19.9 million.
- Recommended to the Board of directors that YCC align to the accounting standards for not-for-profit organizations and record depreciation based on the useful life of the asset rather than on the prior practice of depreciation being recorded at an amount equal to the principal loan payment on the mortgages. The external auditors and the Department of Social Development support the change in the YCC accounting policy. The one-time adjustment on the Statement of Financial Position (Balance Sheet) for the year ending on December 31, 2023 will be \$9,975,428.

**Summary of unrestricted financials as of December 31, 2023:**

<b>Company</b>	<b>Unrestricted Cash Balance</b>	<b>Payables/Accruals</b>	<b>Surplus(deficit)</b>
York Care Centre	\$1,814,000	\$3,234,000	\$302,000
York Developments Inc.	327,000	127,000	33,000
CIRA	302,000	38,000	10,000
York County Properties	449,000	2,000	0
<b>Totals</b>	<b>\$2,892,000</b>	<b>\$3,401,000</b>	<b>\$345,000</b>

**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
- Surplus at YCC can be attributed to salary surplus (\$409,000) and a surplus in heating (\$74,000) less one-time expenditures.

Pierre LeBlanc, Chair  
Finance Committee  
2024-02-13

**YORK CARE CENTRE INC.**  
**Statement of Financial Position**  
**12/31/2023**

	Current Month	Prior Month	Difference
<b><u>ASSETS</u></b>			
CURRENT			
CASH AND CASH EQUIVALENTS	1,813,974.50	1,819,478.66	(5,504.16)
CASH - RESTRICTED FUNDS	83,351.43	77,454.48	5,896.95
ACCOUNTS RECEIVABLE			
- RESIDENTS	96,059.38	81,831.18	14,228.20
- DEPT of SOCIAL DEVELOPMENT	27,492.00	21,937.00	5,555.00
- HST	64,506.46	39,519.66	24,986.80
- OTHER	61,371.33	61,208.76	162.57
INVENTORIES	148,058.66	148,058.66	0.00
PREPAID EXPENSES	240,289.27	311,716.83	(71,427.56)
LONG TERM RECEIVABLE	0.00	0.00	0.00
TOTAL CURRENT ASSETS	<u>2,535,103.03</u>	<u>2,561,205.23</u>	<u>(26,102.20)</u>
CASH RESTRICTED FOR FUTURE CAPITAL	0.00	0.00	0.00
LAND, BUILDING AND FURNITURE (Net)	<u>15,364,218.78</u>	<u>15,592,408.06</u>	<u>(228,189.28)</u>
TOTAL FIXED ASSETS	<u>15,364,218.78</u>	<u>15,592,408.06</u>	<u>(228,189.28)</u>
TOTAL ASSETS	<u><u>17,899,321.81</u></u>	<u><u>18,153,613.29</u></u>	<u><u>(254,291.48)</u></u>
<b><u>LIABILITIES</u></b>			
CURRENT			
PAYABLES & ACCRUALS	3,162,599.17	3,054,380.02	108,219.15
DEFERRED REVENUE	71,301.73	75,468.40	(4,166.67)
TOTAL CURRENT	<u>3,233,900.90</u>	<u>3,129,848.42</u>	<u>104,052.48</u>
LONG TERM			
LONG TERM DEBT	12,847,685.85	13,033,536.22	(185,850.37)
DEFERRED CONTRIBUTIONS	1,543,359.15	1,567,566.76	(24,207.61)
TOTAL LIABILITIES	<u>14,391,045.00</u>	<u>14,601,102.98</u>	<u>(210,057.98)</u>
<b><u>FUND BALANCES</u></b>			
FUNDS RESTRICTED	66,306.15	65,383.11	923.04
UNRESTRICTED	(94,524.24)	(94,249.24)	(275.00)
NET INCOME (LOSS) FOR PERIOD	302,594.00	451,528.02	(148,934.02)
TOTAL FUNDS	<u>274,375.91</u>	<u>422,661.89</u>	<u>(148,285.98)</u>
TOTAL LIABILITIES & FUNDS	<u><u>17,899,321.81</u></u>	<u><u>18,153,613.29</u></u>	<u><u>(254,291.48)</u></u>

**YORK CARE CENTRE INC.**  
**Statement of Operations**  
**12/31/2023**

Description	Actual Previous YTD	Actual Current YTD	Budget Current YTD	Variance Budget vs Actual
<b>REVENUE AND RECOVERIES</b>				
Operating Revenue	17,547,796	17,193,234	17,248,664	-55,430
Recurring Budget Amendments	0	0	0	0
Non-recurring Budget Amendments	279,954	140,685	126,915	13,770
Administration	348,242	345,523	330,177	15,347
Care Services	97,310	93,628	106,846	-13,218
Operations	247,568	265,455	245,697	19,758
Mortgage / Loan Payments	225,400	217,868	217,868	0
<b>TOTAL REVENUE AND RECOVERIES</b>	<b><u>18,746,270</u></b>	<b><u>18,256,395</u></b>	<b><u>18,276,168</u></b>	<b><u>-19,773</u></b>
<b>OPERATING EXPENSES</b>				
Administration	3,085,216	2,944,238	3,050,865	1 106,626
Care Services	7,815,134	7,557,812	7,837,260	2 279,448
Operations	4,978,212	5,123,189	5,044,426	3 -78,763
Mortgage / Loan Payments	2,323,551	2,328,562	2,333,325	4 4,763
<b>TOTAL EXPENSES</b>	<b><u>18,202,113</u></b>	<b><u>17,953,801</u></b>	<b><u>18,265,875</u></b>	<b><u>312,075</u></b>
<b>NET SURPLUS (DEFICIT)</b>	<b><u>544,157</u></b>	<b><u>302,594</u></b>	<b><u>10,292</u></b>	<b><u>292,302</u></b>
Less: Transfer to replacement reserve		<u>2,475</u>	<u>0</u>	<u>-2,475</u>
(Increase) or Decrease in Operating Fund Accumulated Deficit		<u>300,119</u>	<u>10,292</u>	<u>294,777</u>

1. Lower due to lower overall Salary / Payroll Costs \$69.7K, Education / Conference Costs \$45.4K, Board / Legal Costs \$4.8K offset by higher Bad Debt \$14.2K, and Supply Costs \$3.1K.
2. Lower due to lower overall Salary Costs \$349.9K , offset by higher Supply Costs \$36.3K, Minor Equipment Costs \$18.2K, and higher Recruitment Costs \$16.8k.
3. Higher due to higher Supply Costs \$55.1K, Small Equipment \$40.5K, Consulting Costs \$28.7K, Computer /Ass. Costs \$19.0K Salary Costs \$10.9K, Events / Get Inspired \$6.1K offset by lower Utility / Building Maint. \$73.6K, Linen /Mattress \$9.0K.
4. Lower due to timing of new year Capital purchases \$4.8K.

**YORK DEVELOPMENT INC**  
**Statement of Financial Position - CONSOLIDATED**  
**12/31/2023**

	Current Month	Prior Month	Difference
<b><u>ASSETS</u></b>			
<b>CURRENT ASSETS</b>			
CASH	326,791	349,768	-22,977
ACCOUNTS RECEIVABLE	30,817	36,684	-5,867
HST RECEIVABLE	1,384	614	769
PREPAID EXPENSES	15,924	27,063	-11,138
TOTAL CURRENT ASSETS	<u>374,917</u>	<u>414,129</u>	<u>-39,212</u>
<b>RESTRICTED CASH AND DEPOSITS</b>			
REPLACEMENT RESERVE FUND	278,670	246,066	32,603
DEFERRED VACANCY SUBSIDY	45,496	45,293	203
TOTAL RESTRICTED CASH & DEPOSITS	<u>324,166</u>	<u>291,360</u>	<u>32,806</u>
<b>FIXED ASSETS</b>			
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	-4,305,932	-4,291,358	-14,574
TOTAL FIXED ASSETS	<u>2,019,485</u>	<u>2,034,060</u>	<u>-14,574</u>
TOTAL ASSETS	<u><u>2,718,568</u></u>	<u><u>2,739,549</u></u>	<u><u>-20,981</u></u>
<b><u>LIABILITIES</u></b>			
<b>CURRENT LIABILITIES</b>			
ACCOUNTS PAYABLE & ACCRUED LIABILITIES	108,890	112,193	-3,303
DEFERRED REVENUE	18,198	21,560	-3,362
TOTAL CURRENT LIABILITIES	<u>127,088</u>	<u>133,753</u>	<u>-6,665</u>
<b>LONG TERM DEBT</b>			
MORTGAGE 116 SUNSET DRIVE	1,588,273	1,599,024	-10,751
TOTAL LONG TERM LIABILITIES	<u>1,588,273</u>	<u>1,599,024</u>	<u>-10,751</u>
<b>DEFERRED CONTRIBUTIONS</b>			
DEFERRED CONTRIBUTIONS RELATED TO CAPITAL ASSETS	3,501	3,668	-167
TOTAL DEFERRED	<u>3,501</u>	<u>3,668</u>	<u>-167</u>
<b>FUND BALANCES</b>			
REPLACEMENT RESERVE RESTRICTED	278,670	274,476	4,193
VACANCY SUBSIDY RESERVE	45,496	45,293	203
EARNED SURPLUS	642,619	645,619	-3,000
NET INCOME (LOSS) FOR PERIOD	32,921	37,715	-4,794
TOTAL EQUITY	<u>999,705</u>	<u>1,003,103</u>	<u>-3,398</u>
TOTAL LIABILITIES & FUND BALANCES	<u><u>2,718,568</u></u>	<u><u>2,739,549</u></u>	<u><u>-20,981</u></u>

YORK DEVELOPMENT INC  
Statement of Operations - CONSOLIDATED  
12/31/2023

	ACTUAL YTD	BUDGET YTD		VARIANCE
<b>REVENUE</b>				
RENTALS	567,214	567,582		-368
TENANT SUBSIDY	-17,041	-18,783		1,742
RENT SUPPLEMENT - SH	97,241	97,241		0
ADULT DAY PROGRAM FEES	83,306	113,850		-30,545
WASHER & DRYER REVENUE	8,174	8,325		-151
INTEREST INCOME	13,470	7,818		5,652
REVENUE - SD CARE HOURS	112,398	75,917		36,481
REVENUE - OTHER CARE HOURS	5,446	1,987		3,459
REVENUE - TENANT SERVICES	180,414	182,136		-1,722
AMORT OF DEFERRED CONTRIB (SD Funding)	56,542	56,543		-0
RECOVERY PROJECT WORKERS (Summer Students)	14,159	3,600		10,559
MISCELLANEOUS INCOME	23,220	20,349		2,871
<b>TOTAL REVENUE</b>	<b>1,144,543</b>	<b>1,116,565</b>	<b>1</b>	<b>27,978</b>
<b>OPERATING EXPENSES</b>				
<b>Wages &amp; Benefits</b>	406,650	380,687	2	-25,963
<b>Tenant / ADP Client Support (Food Costs)</b>	47,302	61,486	3	14,184
<b>Maintenance</b>	323,481	324,449	4	968
<b>Administration</b>	203,019	221,864	5	18,844
<b>Depreciation</b>	131,170	118,383	6	-12,787
<b>TOTAL OPERATING EXPENSES</b>	<b>1,111,623</b>	<b>1,106,869</b>		<b>-4,754</b>
<b>NET EARNINGS (LOSS) FOR PERIOD</b>	<b>32,921</b>	<b>9,696</b>		<b>23,224</b>
LESS: TRANSFER TO				
REPLACEMENT RESERVE	18,000	/year		
REPLACEMENT RESERVE - SUPPORTIVE	18,000	/year		

Notes:

- Higher than budget SH Care hrs \$39.9K (combined), SH Project Workers (summer students) \$10.6K, SH Interest \$5.7K, offset by lower ADP Program Fees (fewer clients) \$30.5K.
- Higher than budget SH Wages/Benefits (care hrs) \$44.4K offset by lower ADP Wages/Benefits \$12.0K & YDI \$6.5K.
- Lower than budget Food Costs SH \$6.2K, ADP (fewer clients) \$8.0K.
- Lower than budget Replacement Reserve Expense YDI/SH \$8.2K, Electricity YDI/SH \$4.5K (reduced consumption), Grounds Maint YDI/SH ( snow removal) \$4.9, Building Exp ADP (under review) \$4.4K, Supplies (mainly ADP) \$3.5K offset by higher Repairs & Maint YDI \$22.4K (Flood & Water Damage Vestibule), SH \$6.3 (Unit Turnover Maint).
- Lower than budget legal fees YDI/SH (delayed to February & est to be lower) \$9.4K, Office Supplies \$3.9K & Other \$0.5K.
- Higher than budget depreciation (budget does not reflect the updated loan agreement) \$12.8K.

- \* YDI - Independent Living Units 91, 95 and 120 Sunset
- \* SP - Support Housing Units 116 Sunset
- \* ADP - Adult Day Program

**Centre for Innovation and Research**  
**Statement of Financial Position**  
**12/31/2023**

	Current Month	Prior Month	Difference
<b><u>ASSETS</u></b>			
CURRENT			
CASH AND CASH EQUIVALENTS	301,794.32	370,025.66	(68,231.34)
ACCOUNTS RECEIVABLE	4,119.76	12,150.20	(8,030.44)
ALLOWANCE FOR DOUBTFUL ACCOUNTS	0.00	0.00	0.00
HST RECEIVABLE	8,689.34	8,633.38	55.96
PREPAID EXPENSES	0.00	0.00	0.00
LONG TERM RECEIVABLE	0.00	0.00	0.00
TOTAL CURRENT ASSETS	<u>314,603.42</u>	<u>390,809.24</u>	<u>(76,205.82)</u>
CAPITAL ASSETS			
EQUIPMENT AND FURNITURE	16,186.37	16,186.37	0.00
ACCUMULATED DEPRECIATION	<u>(12,984.68)</u>	<u>(12,778.08)</u>	<u>(206.60)</u>
	3,201.69	3,408.29	(206.60)
TOTAL ASSETS	<u><u>317,805.11</u></u>	<u><u>394,217.53</u></u>	<u><u>(76,412.42)</u></u>
<b><u>LIABILITIES</u></b>			
CURRENT			
ACCOUNTS PAYABLE AND ACCRUED LIABILITIES	30,903.84	62,443.55	(31,539.71)
DUE TO YORK MANOR INC.	5,271.44	6,927.13	(1,655.69)
DUE TO YORK DEVELOPMENTS INC.	1,467.20	7,694.59	(6,227.39)
DEFERRED REVENUE	<u>248,399.96</u>	<u>284,524.36</u>	<u>(36,124.40)</u>
TOTAL CURRENT	286,042.44	361,589.63	(75,547.19)
<b><u>FUND BALANCES</u></b>			
FUND BALANCES			
FUNDS UNRESTRICTED	21,662.87	21,662.87	0.00
NET INCOME (LOSS) FOR THE PERIOD	<u>10,099.80</u>	<u>10,965.03</u>	<u>(865.23)</u>
TOTAL FUNDS	31,762.67	32,627.90	(865.23)
TOTAL LIABILITIES & FUNDS	<u><u>317,805.11</u></u>	<u><u>394,217.53</u></u>	<u><u>(76,412.42)</u></u>

**Centre for Innovation and Research  
Statement of Operations - CONSOLIDATED  
12/31/2023**

	<b>ACTUAL YTD</b>	<b>BUDGET YTD</b>	<b>VARIANCE</b>
<b>REVENUE</b>			
GENERAL CONTRIBUTIONS	33,750	33,750	0
PROMOTE PHYS ACTIVITY PROJECT	89,000	0	89,000
IMPROVE IMMUNIZATION PROJECT	12,503	12,503	0
POLYPHARM APP PHASE 2 PROJECT	15,074	64,551	-49,477
GENIE PROJECT	130,096	150,112	-20,016
PASSIVE AWARE PROJECT	108,565	122,811	-14,246
PASSIVE AWARE AT HOME PROJECT	23,438	37,500	-14,062
A DAY IN THE LIFE PROJECT	33,732	37,500	-3,768
HEC ADVANCED CAREGIVER TRAINING	10,010	0	10,010
INTEREST INCOME	19,995	5,400	14,595
STUDENT FUNDING	8,796	5,605	3,191
SYMPOSIUM	44,148	40,000	4,148
<b>TOTAL UNRESTRICTED REVENUE</b>	<b>529,107</b>	<b>509,732 *1.</b>	<b>19,374</b>
<b>OPERATING EXPENSES</b>			
<b>WAGES &amp; BENEFITS</b>	13,271	5,605 *2.	-7,666
<b>ADMINISTRATION</b>	83,318	79,371 *3.	-3,947
<b>PROJECT RELATED EXPENDITURES</b>	422,418	424,977 *4.	2,559
<b>TOTAL EXPENSES</b>	<b>519,007</b>	<b>509,953</b>	<b>-9,054</b>
<b>NET EARNINGS (LOSS)</b>	<b>10,100</b>	<b>-221</b>	<b>10,321</b>

**Notes:**

- \*1. Higher than budget Project Income (2 projects approved after budget) \$99K, Symposium \$4.1K, Student Funding \$3.2K, Interest Income \$14.6K offset by Lower Projects, (multiple issues caused delayed spends; Covid impacted student agreement with NBCC for Polypharm, Research Nurse departed early for Genie, resulting in fewer resources over the projects) \$101.6K Combined.
- \*2. Higher than budget Summer Students \$7.7K , (Other Employee Wages charged to projects \$308.8K).
- \*3. Higher than budget Symposium Costs \$6.6 offset by small reduced spends across several accounts.
- \*4. Project expenditures align with project revenue above (in grey).

**YORK COUNTY PROPERTIES**  
**Statement of Financial Position**  
**2023-12-31**

ASSETS

CURRENT ASSETS

CASH	\$449,170
ACCOUNTS RECEIVABLE	2,087
TOTAL CURRENT ASSETS	\$451,257

LONG-TERM ASSETS

PROPERTY AND EQUIPMENT

YORK FARM	\$7,601
TOTAL PROPERTY AND EQUIPMENT	\$7,601
TOTAL ASSETS	\$458,852

LIABILITIES

CURRENT LIABILITIES

ACCOUNTS PAYABLE AND ACCRUALS	\$2,087
TOTAL CURRENT LIABILITIES	\$2,087

LONG TERM LIABILITIES

TOTAL LONG TERM LIABILITIES	\$0
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DEFERRED CONTRIBUTIONS

TOTAL DEFERRED	\$0
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FUND BALANCES

OPERATING SURPLUS	\$449,170
CAPITAL FUND	7,601
TOTAL FUNDS	\$456,771

TOTAL LIABILITIES & FUND BALANCES	\$458,852
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YORK COUNTY PROPERTIES  
Statement of Operations  
9 MONTHS ENDING 12/31/2023

	CURRENT MONTH	BUDGET MONTH	VAR ACTUAL VS BUDGET	ACTUAL YTD	BUDGET YTD	VAR ACTUAL VS BUDGET
REVENUE						
INTEREST INCOME	2,086	1,667	420	17,953	15,000	2,953
TOTAL REVENUE	<u>\$2,086</u>	<u>\$1,667</u>	<u>\$420</u>	<u>\$17,953</u>	<u>\$15,000</u>	<u>\$2,953</u>
OPERATING EXPENSES:						
SALARIES & BENEFITS						
	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>
BUILDING & GROUNDS						
PROPERTY TAXES	\$0	\$0	\$0	\$299	\$299	\$0
	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$299</u>	<u>\$299</u>	<u>\$0</u>
ADMINISTRATION						
REIMBURSEMENT OF PARENT COMPANY EXP.	\$2,086	\$1,638	\$449	\$17,654	\$14,738	\$2,916
BANK INTEREST & CHARGES	-	-	-	-	50	(50)
	<u>\$2,086</u>	<u>\$1,638</u>	<u>\$449</u>	<u>\$17,654</u>	<u>\$14,788</u>	<u>\$2,866</u>
TOTAL OPERATING EXPENSES	<u>\$2,086</u>	<u>\$1,638</u>	<u>\$449</u>	<u>\$17,953</u>	<u>\$15,087</u>	<u>\$2,866</u>
OPERATING SURPLUS (DEFICIT)	<u>\$0</u>	<u>\$29</u>	<u>(\$29)</u>	<u>\$0</u>	<u>(\$87)</u>	<u>\$87</u>
NET SURPLUS (DEFICIT)	<u>\$0</u>	<u>\$29</u>	<u>(\$29)</u>	<u>\$0</u>	<u>(\$87)</u>	<u>\$87</u>

## BRIEFING NOTE

**To:** Finance & Administration Committee  
**From:** Heather Harris-Jones, CPA, CMA (Chief Financial Officer)  
**Date:** January 30<sup>th</sup>, 2024  
**RE:** Qualified Opinion – Depreciation Method

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**Purpose:** To seek approval to change our depreciation method and record depreciation on the original building based on the estimate useful life and more importantly align with the current accounting standards for Not -for-Profit Organizations.

**Background:** Late 1990's - early 2000's changes were made to the accounting standards for Not -for-Profits on the criteria for acceptable depreciation methods and in particular that the method must be linked to the useful life of the asset. York Care Centre records depreciation on the original building equal to the principal reduction of the related long-term debt which is no longer an acceptable basis for recording depreciation. As a result, we now receive a Qualified Opinion on our annual financial audits noting that our depreciation method is a departure from ASPNO. **This means we are not following accounting standards for not for profits and are recording higher depreciation or writing off the assets too quickly (over expensing and reducing the value of the asset).**

**Considerations:** To transition to record depreciation based on the useful life of the assets requires a years-to-date restatement of our statements and an adjustment to our current year depreciation booked. In 2022 and 2023 depreciation was over booked by \$1,168,917 and \$1,111,765. The accumulative value of this over statement of depreciation is \$9,975,428. The restatement will increase the long-term asset balance and the Invested in Capital Assets balance on the Statement of Financial Position (see attached revised statement). A note to the statements will reflect the changes years to date.

Organizations rely on accurate financial information for decision making. The expectation is that the financials comply with the accounting standards set for the organization type. Accounting standards provide the criteria and appropriate handling of transactions for assets, liabilities, expenses and revenue (the law for accountants).

**Recommendation:** To align to the accounting standards for not for profit and record depreciation based on the useful life of the asset rather than the principal loan payments of mortgages on these assets.

**YORK CARE CENTRE INC.**

Statement of Financial Position

March 31, 2023

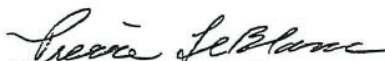
	Operating Fund	Replacement Reserve	Residents Trust	Activity Fund	2023	2022
<b>ASSETS</b>						
<b>CURRENT</b>						
Cash	\$ 2,141,190	\$ 3,082	\$ 38,033	\$ 2,136	\$ 2,184,441	\$ 1,379,807
Accounts receivable (Note 4)	159,076	-	19,364	-	178,440	225,562
Due from related parties (Note 5)	41,084	-	-	-	41,084	62,143
Inventory	148,059	-	-	-	148,059	122,092
Prepaid expenses	48,059	-	-	-	48,059	43,775
	2,537,468	3,082	57,397	2,136	2,600,083	1,833,380
<b>CAPITAL ASSETS (Note 6)</b>	17,267,996	-	-	-	17,267,996	19,720,916
	<b>\$ 19,805,464</b>	<b>\$ 3,082</b>	<b>\$ 57,397</b>	<b>\$ 2,136</b>	<b>\$ 19,868,079</b>	<b>\$ 21,554,295</b>
<b>LIABILITIES</b>						
<b>CURRENT</b>						
Accounts payable and accrued liabilities (Note 7)	\$ 3,507,141	\$ -	\$ 871	\$ -	\$ 3,508,012	\$ 2,948,911
Deferred revenue	108,802	-	-	-	108,802	110,179
Current portion of long term debt (Note 8)	2,230,292	-	-	-	2,230,292	2,167,739
	5,846,235	-	871	-	5,847,106	5,226,829
<b>LONG TERM DEBT (Note 8)</b>	12,290,048	-	-	-	12,290,048	14,520,290
<b>DEFERRED CONTRIBUTIONS RELATED TO CAPITAL ASSETS (Note 9)</b>	1,761,228	-	-	-	1,761,228	2,061,761
	19,897,511	-	871	-	19,898,382	21,808,880
<b>NET ASSETS (LIABILITIES)</b>						
<b>UNRESTRICTED</b>	(1,078,476)	-	-	-	(1,078,476)	(1,295,930)
<b>INVESTED IN CAPITAL ASSETS</b>	986,429	-	-	-	986,429	971,126
<b>RESTRICTED</b>	-	3,082	56,526	2,136	61,744	70,219
	(92,047)	3,082	56,526	2,136	(30,303)	(254,585)
	<b>\$ 19,805,464</b>	<b>\$ 3,082</b>	<b>\$ 57,397</b>	<b>\$ 2,136</b>	<b>\$ 19,868,079</b>	<b>\$ 21,554,295</b>

CONTINGENCIES (Note 10)

ON BEHALF OF THE BOARD



Director



Director

**YORK CARE CENTRE INC.**

**Statement of Financial Position**

**March 31, 2023**

**DRAFT**

	Operating Fund	Replacement Reserve	Residents Trust	Activity Fund	2023	2022
<b>ASSETS</b>						
<b>CURRENT</b>						
Cash	\$ 2,141,190	\$ 3,082	\$ 38,033	\$ 2,136	\$ 2,184,441	\$ 1,379,807
Accounts receivable (Note 4)	159,076	-	19,364	-	178,440	225,562
Due from related parties (Note 5)	41,084	-	-	-	41,084	62,143
Inventory	148,059	-	-	-	148,059	122,092
Prepaid expenses	48,059	-	-	-	48,059	43,775
	2,537,468	3,082	57,397	2,136	2,600,083	1,833,380
<b>CAPITAL ASSETS (Note 6)</b>	27,243,424	-	-	-	27,243,424	28,527,428
	\$ 29,780,892	\$ 3,082	\$ 57,397	\$ 2,136	\$ 29,843,507	\$ 30,360,807
<b>LIABILITIES</b>						
<b>CURRENT</b>						
Accounts payable and accrued liabilities (Note 7)	\$ 3,507,142	\$ -	\$ 871	\$ -	\$ 3,508,013	\$ 2,948,911
Deferred revenue	108,802	-	-	-	108,802	110,179
Current portion of long term debt (Note 8)	2,230,292	-	-	-	2,230,292	2,167,739
	5,846,236	-	871	-	5,847,107	5,226,829
<b>LONG TERM DEBT (Note 8)</b>	12,290,048	-	-	-	12,290,048	14,520,290
<b>DEFERRED CONTRIBUTIONS RELATED TO CAPITAL ASSETS (Note 9)</b>	1,761,228	-	-	-	1,761,228	2,061,761
	19,897,512	-	871	-	19,898,383	21,808,880
<b>NET ASSETS (LIABILITIES)</b>						
<b>UNRESTRICTED</b>	(1,078,476)	-	-	-	(1,078,476)	(1,295,930)
<b>INVESTED IN CAPITAL ASSETS</b>	10,961,856	-	-	-	10,961,856	9,777,638
<b>RESTRICTED</b>	-	3,082	56,526	2,136	61,744	70,219
	9,883,380	3,082	56,526	2,136	9,945,124	8,551,927
	\$ 29,780,892	\$ 3,082	\$ 57,397	\$ 2,136	\$ 29,843,507	\$ 30,360,807

**CONTINGENCIES (Note 10)**

**ON BEHALF OF THE BOARD**

\_\_\_\_\_  
Director

\_\_\_\_\_  
Director

# Tovertafel – The Magic Table

Improving the quality of life and quality of care for seniors living with dementia.

- Tovertafel is an award winning dementia care innovation that has become an indispensable in over 6000 care communities world-wide. Developed in the Netherlands, the Tovertafel is the first serious games system of its kind. Residents, staff and relatives alike are able to experience the benefits first had.
- Using this technology promotes physical activity, improves relationships between residents and staff and increases the opportunity for enjoyable shared activities with residents and their families.



The Cost

## Our Residents

Tovertafel stimulates physical activity, social interaction and cognition, resulting in real, measurable effects on resident well-being.

## Families

“Families are blown away by what this technology can do. It unlocks the imagination of our residents and for a few precious moments, it helps our residents, our families and caregivers rediscover who these extraordinary individuals truly are”

*Pam Tokarczuk, Alzheimer's & Dementia Program  
Director, New Jersey*

## Our Staff

By facilitating social interaction, and reducing restlessness and tense behavior, the Tovertafel helps strengthen staff and resident relationships and lightens workload.

## The Cost

\$18,000 for one unit, which includes:

- two ceiling mounts and two remotes,
- access to ten core games, seasonal games and updates,
- 2 year subscription to additional games (\$1 600 after the first two years)
- onsite and hands-on training for the team.

**New Quote  
Required.**

**The Ask – we are asking for \$36,000 for two Tovertafel Units.**

# Music Therapy Program

Improving the quality of life and quality of care for seniors living with dementia.

- York Care Centre, in partnership with Arpeggio Music Therapy, has offered a small program since 2008, offering one afternoon per week.
- Music therapy interventions have proven to help with the effects of sundowning



## Our Residents

Music engages residents in extraordinary ways. Those who may not be able to speak, may start to say or sing words to a familiar song. You may see residents who are socially isolated, who started with one-to-one sessions, join into group sessions.

## Expansion Necessary

*We provide 4 hours of music therapy per week but there is a need to expand the program so that more residents can benefit.*

## New Ideas- Community Choir

Many residents have strong music backgrounds and talents. A choir, facilitated by the therapist, for interested residents, families, staff and volunteers could unite diverse members of YCC. Such a choir could perform for the community and potentially collaborate with YCF to raise funds.

## The Cost

The hourly cost for the Music Therapist is \$48/hour.  
The cost of an additional four session each week would cost \$10, 400  
York Care Centre currently funds \$15,000 per year of Music Therapy services.

**The Ask – we are asking for \$10,400 per year to expand the Music Therapy Program to expand the frequency of the current program and explore the opportunity to establish a Community Choir.**

# Virtual Windows

Enjoy the sounds and sites of the world, just as if they were right before you. Encounter the world, and be healed by nature.

The virtual window would allow our residents to experience places around the world virtually. There are areas within our facility that do not offer a window to the outside world. This window would engage the residents with sounds of the forest, ocean and other types of nature.

This technology can help with sundowning by offering images that are progressive and change as the day progresses, and also change by season.

Another interesting part of this technology is the opportunity to enjoy different celebrations that residents may not otherwise be able to attend. For example: Canada Day fireworks.



## Hundreds of Scenes

There are multiple scenes to choose from, allowing the staff to customize the display to match resident preferences.

## Multisensory

This technology incorporates video and sound creating a realistic experience for the resident, rather than a static picture.

## Live Streaming

The technology has the capacity to project live-streamed events such as Fireworks, parades, etc. thereby allowing residents to participate in world-wide events.

*The screens can incorporate light into dark spaces and hallways*

## The Cost

\$3400 for one unit, which includes:

- installation,
- Twelve virtual scenes

**New Quote  
Required.**

**The Ask – we are asking for \$17,000 for five virtual window units.**

# Extending Memory Lane to Tower 2

Incorporating the learnings from the Birch Grove Memory Lane Project in a refurbishment of Tower 2, to include new paint scheme, limited use of murals, dementia-friendly way finding, etc.

- The recent update of the Birch Grove Unit (Memory Lane Project) has been a positive enhancement for our residents, families and
- Tower 2, which is home to residents with advanced dementia, is also in need of a refurbishment which would incorporate a soothing colour scheme, updated furnishings, social spaces, sensory stimulation features, etc.



## Our Residents

Providing a safe and secure environment which is designed with the unique needs of those with advanced dementia will improve the quality of life for our residents.

## Families

The transition from Birch Grove to Tower 2 can be difficult for families. Ensuring that Tower 2 has the environment and the features which are most appropriate for this resident population will be comforting and reassuring for families.

## Our Staff

Our staff have expressed a strong desire to see the refurbishment of Tower 2. They want the residents to have all of the advantages of environment features suited for those which advanced cognitive decline.

## The Cost

The full cost cannot be determined until a team has been able to develop and cost a project plan. However, the Memory Lane Project cost just over \$50,000 for a 24 bed unit. We can expect this project to be in the range of \$100,000 - \$120,000/

## The Ask

**We are asking for approval to establish a project team who would be responsible for developing a fully costed proposal that would be less than \$120,000**

# Wheelchair Accessible Garden Swing

A family-friendly way to safely increase outdoor activity for our residents.

- It is important for nursing homes to provide safe and accessible outdoor spaces for residents.
- Outdoor activities can improve physical health, mental health and increase opportunities for meaningful socialization.
- The swing's exclusive attribute is its ability to bring together those confined to a wheelchair and the abled bodied in a relaxed and socially inviting atmosphere. Since the entire platform swings, the wheelchair remains in a level position during the gliding motion, thus all swing occupants can enjoy the same swing motion simultaneously.



Provides opportunity for social engagement with all ages and enhancing the ability to “connect” with loved ones, but doing a shared activity that is loved by all.

Encourages outdoor experiences, promotes movement and physical activity, promotes social engagement, expands sensory experiences, and eases anxiety and depression,

The swing can be installed on the property adjacent to Claremont Drive and would be accessible from the parking lot.

## The Cost

- To purchase from a US manufacturer, the estimated cost is \$13,000.
- The cost to install may involve installing a concrete pad – estimated cost of \$12,000
- No other Canadian manufacturer has been identified.
- The option of a self-build has not been explored.

## The Ask

We are asking for \$25,000 for one swing



# Communication Strategy 2023 – 2025

# COMMUNICATION STRATEGY

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A consistent and purposeful communication strategy for the York Care Centre group of companies is essential to achieve the goals defined in the Strategic Plan 2020 – 2025, by sharing messages regarding the work we carry out and by being recognized as leaders in the long-term care sector.

The following objectives collectively aim to elevate our organizational presence, build trust, attract talent, and build our brand in the community.

1. To increase recognition and awareness of our organization, we will execute targeted campaigns showcasing the scope of our services.
2. To foster trust in our services, we will communicate success stories and testimonials.
3. To share our vision and strategies, we will utilize a variety of channels to regularly communicate our strategic plan.
4. To attract and retain top talent, we will highlight our culture and career opportunities.
5. To establish a strong, recognizable brand, we will create a cohesive narrative across channels reflecting our values.

# TARGET AUDIENCES AND PRIMARY MESSAGES

Over the next two years, our strategy will focus on the following audiences:

<b>Audience</b>	<b>Primary Messages</b>
<b>Residents and Families</b>	<ul style="list-style-type: none"> <li>• Welcome to York Care Centre</li> <li>• Scope of services, key people and policies</li> <li>• Activities and events providing opportunities for family engagement.</li> <li>• Operational changes (visiting, infection control)</li> </ul>
<b>Staff</b>	<ul style="list-style-type: none"> <li>• General news</li> <li>• Strategic plan and operating plan</li> <li>• New policies/programs</li> <li>• Opportunities – jobs, education, activities, fun events</li> <li>• Recognition</li> <li>• Quality of care and service</li> <li>• Accomplishments</li> <li>• Research activity</li> </ul>
<b>Community</b>	<ul style="list-style-type: none"> <li>• Highlight our mission, service, events and achievements with a focus on building awareness and trust.</li> <li>• Employee recruitment messages highlighting culture and opportunity.</li> <li>• Volunteer recruitment messages highlighting opportunity to contribute.</li> <li>• Fundraising support highlighting accomplishment, events and opportunities to contribute.</li> <li>• Marketing of new programs, such as Adult Day Program.</li> <li>• Sharing of research outcomes.</li> </ul>
<b>Government (provincial, municipal, schools)</b>	<ul style="list-style-type: none"> <li>• Communication which highlights accomplishments and challenges.</li> <li>• Highlight opportunities for collaboration with schools.</li> </ul>

# CHANNELS

Over the next two years, our priority will be to develop and utilize the following channels to share our primary messages.

Channel	Target Audience	Objectives / Primary Messages
Website	<ul style="list-style-type: none"> <li>Families</li> <li>Community</li> </ul>	<ul style="list-style-type: none"> <li>Scope of service</li> <li>Updates</li> <li>Activities and events</li> </ul>
Email	<ul style="list-style-type: none"> <li>Staff</li> <li>Families</li> <li>Potential Donors</li> </ul>	<ul style="list-style-type: none"> <li>Updates</li> </ul>
Social Media	<ul style="list-style-type: none"> <li>Community</li> <li>Residents and Families</li> <li>Supporters / Donors</li> </ul>	<ul style="list-style-type: none"> <li>Activities and events</li> <li>Volunteer and employment recruitment</li> <li>Building awareness and trust</li> </ul>
Electronic Display Boards	<ul style="list-style-type: none"> <li>Staff</li> <li>Residents / Families</li> </ul>	<ul style="list-style-type: none"> <li>Activities and Events</li> <li>Accomplishments</li> </ul>
Family Advocacy Meetings	<ul style="list-style-type: none"> <li>Families</li> </ul>	<ul style="list-style-type: none"> <li>Scope of services, key people and policies</li> <li>Activities and events providing opportunities for family engagement.</li> <li>Operational changes (visiting, infection control)</li> </ul>
Resident Handbook	<ul style="list-style-type: none"> <li>Residents and Families</li> </ul>	<ul style="list-style-type: none"> <li>Welcome to York Care Centre</li> <li>Scope of services, key people and policies</li> </ul>
Newsletters	<ul style="list-style-type: none"> <li>Staff</li> <li>Residents &amp; Families</li> </ul>	<ul style="list-style-type: none"> <li>New policies/programs</li> <li>Opportunities – jobs, education, activities, fun events</li> <li>Recognition</li> <li>General news</li> </ul>
Formal Documents	<ul style="list-style-type: none"> <li>Community</li> <li>Donors</li> </ul>	<ul style="list-style-type: none"> <li>Annual reports for YCC and YCF</li> <li>Program specific pamphlets and brochures.</li> </ul>

## 2023 – 2025 PRIORITIES

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1. Continue to use and develop standard branded communication tools (email advisories, poster formats, newsletter format, PowerPoint standard, etc)
2. Continue to use social media to promote awareness and foster trust.
3. Complete the development and distribution of the Resident Handbook in 2023.
4. Introduce Virtual Family Advocacy Meetings in 2023, in addition to the regular in-person meetings.
5. Develop a twelve-month rolling content calendar to support strategic communication.
6. Develop marketing strategies for major fundraising events (golf tournament and Fall Dinner).
7. Introduce a communication strategy to support staff recruitment.
8. Introduce a communication strategy to support volunteer recruitment.
9. Complete a website refresh in 2024.
10. Introduce Staff E-boards in 2024.
11. Consider the development of a crisis communication plan in 2024.

## RESOURCE REQUIREMENTS

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Most resources which will be required to support this plan are currently available or in the current year budget, including:

1. Staff – Marketing and Communications Coordinator has been hired.
2. Software – graphic design
3. Social media accounts
4. Website Refresh - \$20,000 in current year budget
5. Equipment – photography, display monitors
6. Advertising budget

New

## KEY MESSAGES

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1. York Care Centre is dedicated to setting the standard for excellence in long-term care. Our commitment goes beyond caregiving; we actively drive positive change and advocate for the overall well-being of seniors, making a lasting impact in the field.
2. At York Care Centre, we're dedicated to giving high quality care and looking out for the well-being of our residents. We're proud to be a trusted name in long-term care, and our goal is to make you feel safe and at ease when choosing us. Your comfort and peace of mind matter to us, and we're here to provide a caring environment that feels just right for you. We take an individualized and person-centred approach to your care.
3. Our focus is on creating a positive and engaging environment that promotes not just physical health but also emotional, spiritual and social well-being for a more fulfilling life.
4. We're firmly rooted in our community, cherishing our rich history. Our ongoing connection inspires us to design activities and services that meet the unique needs of our residents and their families.
5. We have a team of caring experts who bring skill, compassion, and a genuine commitment to providing high quality care to our residents and families.
6. At York Care Centre, we want to be at the forefront of excellent care practices. We are always looking for new ideas and approaches to enhance long-term care.
7. At York Care Centre, we take pride in being more than just a workplace – we're a community. Here, our team of staff and volunteers experience a supportive and enriching environment, fostering a culture of continuous learning. We believe in creating a space where individuals can not only contribute their skills but also grow personally and professionally.
8. Our strong community engagement is at the core of who we are. Through meaningful outreach programs and collaborations, we aim to enrich the lives of both residents and community members, contributing to an enhanced overall quality of life.

New

## QUICK PITCH – YORK CARE CENTRE

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1. York Care Centre is a community dedicated to transforming care for older adults, focusing on excellence, innovation, and community impact.

2. The center goes beyond routine care to enhance residents' quality of life, fostering an environment where they can truly thrive.

3. York Care Centre prioritizes being a great place to work and volunteer, fostering a positive and engaging atmosphere for staff and volunteers alike.

4. Innovation, research, and strong partnerships with the community are integral to the center's approach, aimed at continuously improving the care experience and extending positive impact beyond its walls.

**York Care Centre's strengths lie in its commitment to quality of life and person-centered care. With a reputation for excellence, a dedication to innovation and research and our strong community partnerships, we are leaders in the field, contributing to a future where senior care is not just a service but a transformative and fulfilling experience, for our residents, our staff and our volunteers.**



## BRIEFING NOTE

**To:** Governance Committee of the Board of Directors

**From:** Geri Geldart, President and CEO

**Date:** January 29, 2024

**RE: Policy Review – Ends Policies**

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### Purpose

To provide the Governance and Audit Committee with background necessary to review the following Ends governance policies:

- Gov-Ends-E-510 – Employer of Choice
- Gov-Ends-P-530 - Purpose
- Gov-Ends-R-550 – Residence of Choice

### Background

#### A. Overview of Policy Governance (Carver Model)

Policy Governance, often referred to as the Carver Model, is a governance framework developed by John Carver. It provides a structured approach to organizational governance, emphasizing the separation of ownership and operational responsibilities. The framework is designed to enable boards to effectively govern their organizations by focusing on policy development, strategic leadership, and clearly defining the board's role in relation to management.

#### B. Key principles of Policy Governance include:

- 1. Ends Policies:** These policies articulate the desired outcomes, impacts, or changes that the organization exists to achieve. Ends Policies are the board's way of expressing the intended results, benefits, or impacts for the *organization's stakeholders*. They are future-oriented and provide a clear direction for organizational success. Written with a long-term perspective, these mission-related policies embody the Board's vision and the organization's reason for being.
- 2. Executive Limitations Policies:** These policies set boundaries on executive authority, defining the acceptable means and methods for achieving the Ends defined by the board. Executive Limitations Policies help ensure that the organization operates within ethical, legal, and prudential constraints. These policies limit the means by which Ends shall be achieved.
- 3. Board President & CEO Linkage Policies:** These policies establish the delegation of authority from the board to the CEO. They define the authority and accountability of the CEO, allowing the board to focus on its strategic role. Through these policies, the board clarifies the manner in which it delegates authority and how it evaluates performance relative to Ends and Limitations.
- 4. Governance Process Policies:** These policies outline the processes the board will use to govern effectively, including board structure, decision-making processes, board self-monitoring and the specifics of its own job.

## C. Ends Policies

### 1. Characteristics of Ends Policies

- Future-Oriented: Ends Policies articulate the long-term aspirations and impacts the organization aims to achieve.
- Stakeholder-Focused: They define the benefits and changes the organization seeks to provide to its stakeholders, such as clients, customers, or the community.
- Measurable and Observable: Ends Policies should be crafted in a way that allows for the measurement and observation of the desired outcomes.

### 2. Importance of Ends Policies

- Strategic Clarity: Ends Policies provide a clear strategic direction for the organization, guiding decision-making and actions.
- Accountability: By defining the desired outcomes, Ends Policies enable the board to hold the executive accountable for achieving the organization's purpose.
- Communication: Ends Policies serve as a means of communicating the organization's mission and goals to internal and external stakeholders.

### 3. Monitoring Ends Policies

- Regular Assessment: The board should regularly monitor progress toward achieving the ends outlined in the policies.
- Data-Informed Monitoring: Monitoring should be based on relevant data and evidence, allowing the board to make informed assessments.

*“An issue is an Ends issue if, and only if, it directly describes what good, for whom, or at what cost. If not, it is not an Ends issue—no matter how important, no matter who decides it, no matter how closely related it is to goals, strategies, mission, or perceived Board work. Ends language is never about what the organization will be doing; it is always about what will be different for those it serves. Distinguishing ends from means enables the Board to free itself from trivia, to delegate clearly and powerfully, and to turn its attention to large issues.” Margaret Kiep, The Carver Model of Policy Governance, Unitarian Universalist Association, 2019*

## D. Current Status

York Care Centre has three Ends Policies, which are very briefly stated.

### 1. Gov-Ends-E-510 – Employer of Choice

*York Care Centre is an organization based on a foundation of character and a culture of excellence and thus is an employer of choice for health professionals and support staff.*

### 2. Gov-Ends-P-530 – Purpose

*The purpose of York Care Centre is to create and operate a centre of excellence in aging care.*

### 3. Gov-Ends-R-550 – Residence of Choice

*York Care Centre is recognized as a state-of-the-art facility which provides a safe and home-like environment and thus is the resident of choice for those seeking the highest quality of life and care.*

## E. Recommendation:

It is recommended that the Governance Committee review / amend the revisions to each of the three ends policies as presented by the Chief Executive Officer.

**YORK CARE CENTRE**  
**Corporate Governance Policy**

<b>Type: Ends</b>	<b>Date Issued: November 30, 2009</b>
<b>Title: Purpose</b>	<b>Page: 1 of 1</b>
<b>Approved by: Board of Directors</b>	<b>Gov-Ends-P-530</b>
<b>Date Reviewed/Revised: 11/16,</b>	

*The purpose of York Care Center is to create and operate a center of excellence in aging care.*

Current Version

**YORK CARE CENTRE**  
**Corporate Governance Policy**

<b>Type: Ends</b>	<b>Date Issued: November 30, 2009</b>
<b>Title: Purpose Of York Care Centre</b>	<b>Page: 1 of 1</b>
<b>Approved by: Board of Directors</b>	<b>Gov-Ends-P-530</b>
<b>Date Reviewed/Revised: 11/16; 02/2024</b>	

**Purpose**

The purpose of York Care Centre is to create and operate a Centre of Excellence in Aging Care that consistently provides exceptional and innovative services to enhance the quality of life for seniors. The organization is committed to being a leader in aging care, fostering an environment that promotes dignity, compassion, and a high standard of comprehensive care and support for residents, tenants, and clients.

**Desired Outcomes**

- **Dignity and Respect for Residents:**

To uphold the dignity and respect of all residents, York Care Centre will create an environment that respects their unique identities, preferences, and histories. York Care Centre will promote the autonomy of residents, to ensure that residents are able to actively participate in decisions related to their care.

- **Exceptional Quality of Care and Quality of Life**

Residents at York Care Centre will receive care that prioritizes their physical, emotional, and social well-being. The organization will strive to exceed industry standards and benchmarks in delivering aging care services.

- **Innovation in Aging Care Practices:**

To enhance the overall care experience of residents, York Care Centre will identify, adopt and implement innovative practices and technologies. To contribute to the evolution of aging care standards, York Care Centre will actively seek out and contribute to research and advancements in aging care.

- **Community Engagement and Collaboration:**

To foster connections, understanding, and support for aging care initiatives, York Care Centre will actively engage with the broader community. Collaborative partnerships with external entities, such as educational institutions, businesses and healthcare organizations, will be sought to enrich the knowledge and resources available to the Centre of Excellence.

**Monitoring and Evaluation:**

The Board of Directors will monitor progress toward achieving the outcomes outlined in this Ends Policy through regular reports and assessments provided by the executive leadership team. Data related to resident satisfaction and the adoption of innovative practices will be considered in the evaluation process.

**Review Date:** This Ends Policy will be reviewed as needed, and at least every five years, to ensure its continued relevance and alignment with the evolving needs and goals of York Care Centre.

**YORK CARE CENTRE**  
**Corporate Governance Policy**

<b>Type: Ends</b>	<b>Date Issued: November 30, 2009</b>
<b>Title: Residence of Choice</b>	<b>Page: 1 of 1</b>
<b>Approved by: Board of Directors</b>	<b>Gov-Ends-R-550</b>
<b>Date Reviewed/Revised: 01/14; 11/16;</b>	

*York Care Center is recognized as a state of the art facility which provides a safe and home-like environment and thus is the residence of choice for those seeking the highest quality of life and care.*

Current Version

**YORK CARE CENTRE**  
**Corporate Governance Policy**

<b>Type: Ends</b>	<b>Date Issued: November 30, 2009</b>
<b>Title: Residence of Choice</b>	<b>Page: 1 of 1</b>
<b>Approved by: Board of Directors</b>	<b>Gov-Ends-R-550</b>
<b>Date Reviewed/Revised: 01/14; 11/16; 02/2024</b>	

**Purpose**

York Care Centre aims to be recognized as a state-of-the-art facility, providing a safe and home-like environment that positions it as a residence of choice for individuals seeking a high quality of life and care.

**Desired Outcomes:**

- **State-of-the-Art Facility**  
To ensure it remains at the forefront on senior care facilities, York Care Centre will invest in and maintain cutting-edge infrastructure, technology, and amenities. The organization will continually assess and update its facilities to meet or exceed industry standards for safety, accessibility, and resident comfort.
- **Safe and Home-Like Environment**  
To ensure the safety and security of residents, York Care Centre will implement rigorous safety protocols, emergency preparedness measures, and ongoing risk assessments. A warm, inviting, and home-like atmosphere will be cultivated, fostering a sense of belonging and community among residents.
- **Residence of Choice for Quality of Life**  
To support the physical, mental and emotional well-being of the residents, York Care Centre will incorporate activities, programs, and services focused on the quality of life. The organization will strive to create an environment that encourages social interaction, personal growth, and a sense of purpose for each resident.
- **High Quality of Care:**  
To maintain and improve the health and vitality of the residents, York Care Centre will provide care which is tailored to the unique needs of each resident. Continuous improvement initiatives will be implemented to enhance care practices and ensure compliance with best practices in aging care.
- **Resident and Family Satisfaction:**  
To ensure the satisfaction of residents and their families, York Care Centre will actively seek and respond to feedback. Regular surveys and feedback mechanisms will be employed to measure satisfaction levels and identify areas for improvement.

**Monitoring and Evaluation**

The Board of Directors will monitor the achievement of the outcomes outlined in this Ends Policy through regular reports from the executive leadership team. Key performance indicators related to facility upgrades, quality of care, quality of life, resident satisfaction, and safety measures will be considered in the evaluation process.

**Review Date:**

This Ends Policy will be reviewed as needed, and at least every five years, to ensure its continued alignment with the evolving needs and goals of York Care Centre.

**YORK CARE CENTRE**  
**Corporate Governance Policy**

<b>Type: Ends</b>	<b>Date Issued: November 30, 2009</b>
<b>Title: Employer of Choice</b>	<b>Page: 1 of 1</b>
<b>Approved by: Board of Directors</b>	<b>Gov-Ends-E-510</b>
<b>Date Reviewed/Revised: 11/16</b>	

*York Care Center is an organization based on a foundation of character and a culture of excellence and thus is an employer of choice for health professionals and support staff.*

Current Version

<b>YORK CARE CENTRE</b> <b>Corporate Governance Policy</b>	
<b>Type: Ends</b>	<b>Date Issued: November 30, 2009</b>
<b>Title: Employer of Choice</b>	<b>Page: 1 of 1</b>
<b>Approved by: Board of Directors</b>	<b>Gov-Ends-E-510</b>
<b>Date Reviewed/Revised: 11/16; 02/2024</b>	

### Purpose

York Care Centre is committed to being an organization based on a foundation of character and a culture of excellence, positioning itself as the employer of choice for health professionals and support staff.

### Desired Outcomes

- **Foundation of Character**

The organization will establish and uphold a strong foundation of character and ethical conduct in all aspects of its operations. To create an environment where all employees feel valued and supported, York Care Centre will foster a workplace culture that promotes respect, fairness, accountability, and inclusivity.

- **Culture of Excellence**

York Care Centre will cultivate a culture of excellence that encourages continuous learning, innovation, and a commitment to delivering the highest quality of care and services. Excellence will be reflected in all aspects of organizational performance, including staff professionalism, resident care, and community engagement.

- **Professional Development and Training**

York Care Centre will invest in the professional development and training of its staff, ensuring that they have the skills and knowledge necessary to excel in their roles. Opportunities for ongoing education and advancement within the organization will be actively promoted and supported. The organization will support research and learning initiatives that contribute to the growth and advancement of the aging care field.

- **Staff Well-being and Work-Life Balance**

Recognizing the importance of work-life balance and mental health, York Care Centre will provide employee wellness programs, flexible scheduling options, and supportive policies to enhance the overall work experience for staff.

### Monitoring and Evaluation

The Board of Directors will monitor the achievement of the outcomes outlined in this Ends Policy through regular reports from the executive leadership team. Employee satisfaction surveys, retention rates, and assessments of organizational culture will be key indicators in the evaluation process.

### Review Date

This Ends Policy will be reviewed as needed, and at least every five years, to ensure its continued alignment with the evolving needs and goals of York Care Centre.

## Report from the YCF Board Chair to the YCC Board of Directors February 14, 2024

### 1. Financials

- The YCF operates on a calendar year basis. We had a successful year in 2023 with an estimated net income of \$38,660, final results pending. ***This is 30% above our original plan!***

### 2. Golf Fore Care

- Organizing efforts are in high gear for our annual golf tournament.
- Save the date – June 6<sup>th</sup> at West Hills Golf Course.
- You can show your support for YCC and YCF by entering a team or by being a sponsor.

### 3. Laugh For Care Dinner

- Plans are underway for the 2024 Laugh for Care Dinner.
- Save the date – November 9, 2024

### 4. Bingo

- Although Bingo is not a significant fundraiser for the Foundation, it is a major contributor to the social life of the residents and families of York Care Centre. Attendance is always strong and it is wonderful to see residents and their families enjoying a recreational event, together.
- Bingo is held the first Thursday of each month (6:00 – 8:30 PM) and relies on volunteer participation. We would welcome anyone who wants to help out and become part of the social life of York Care Centre.

### 5. All Nations Charity

- The All Nations Charity organization ceased operations in February 2024. YCF used this organization to operate the Play2Care 50/50 program. Our profit from this venture in 2023 was only \$1,040.
- No plans for an alternative to this lottery have been developed at this time.
- We continue to offer a staff 50/50 program. Net proceeds in 2024 were \$4,170

Respectfully submitted

Hector Losier.

## BRIEFING NOTE

### Exploring the Concept of a “Centre of Excellence”

#### AGENDA ITEM:

Centre of Excellence Concept

#### ACTION REQUIRED:

Approval

Discussion

Information

**MOTION:** No motion required.

#### 1. INTRODUCTION

Our vision statement is “York Care Centre will be a Centre of Excellence in Long Term Care”. The board has asked two committees (the Research and Ethics Committee, and the Governance and Audit Committee) to consider if YCC is moving forward in its vision to be a Centre of Excellence. We lack a common understanding of the meaning of “Centre of Excellence”, the range of possibilities that being a Centre of Excellence brings to YCC, as well as a view of our status as a Centre of Excellence.

As we move forward, we need to consider what opportunity exists for York Care Centre to establish itself as a Centre of Excellence. This paper attempts to describe the concept of a Centre of Excellence and explore some of the opportunities that the Board of Directors should explore.

#### 2. CENTRE OF EXCELLENCE: CONCEPT & USE

##### 2.1 General

The concept of "Centre of Excellence" has been used to refer to a team or group within an organization that has significant expertise and knowledge in a particular area or field. This group is often responsible for developing and sharing best practices, providing training and support to other departments, and driving innovation and continuous improvement across the organization. A Centre of Excellence typically consists of a core team of experts with a deep understanding of the relevant concepts (technology, practices, processes) in their area of focus.

They may be responsible for conducting research and development, evaluating new technologies, and providing guidance to other departments.

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*The goal of a Centre of Excellence can be to promote excellence and drive improvement by establishing a dedicated team focused on the specific area of interest.*

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## 2.2 Beyond the Organization

While the term "Centre of Excellence" generally refers to a team within an organization there may be other interpretations depending on the context. For example,

- In academia, a Centre of Excellence may refer to a research Centre or institute that is focused on advancing knowledge in a particular field, such as a Centre of Excellence for Neuroscience or a Centre of Excellence for Environmental Science.
- In healthcare, a Centre of Excellence may refer to a hospital or healthcare facility that is known for its expertise and success in treating a particular condition or disease, such as a Centre of Excellence for Cancer or a Centre of Excellence for Heart Disease.
- In sports, a Centre of Excellence may refer to a training facility or program that is dedicated to developing elite athletes in a particular sport, such as a Centre of Excellence for Soccer or a Centre of Excellence for Gymnastics.

In each of these contexts, the term is used to identify *a group that is dedicated to achieving excellence and driving innovation in a particular area or field.*

## 2.3 Not Always a Physical Location

A Centre of Excellence (COE) does not necessarily have to be a physical location. While some COEs may be housed in a dedicated facility, others may exist solely as a virtual team. The focus of a COE is on expertise, knowledge sharing, and innovation, rather than on a physical space. For example, a COE focused on a specific area of healthcare may consist of a team of experts located in different parts of the country or world, who collaborate remotely using technology such as video conferencing, shared databases, and online collaboration tools. This virtual team may provide support, guidance, and training to individuals at different locations, and may develop best practices and protocols that can be shared across a network.

## 2.4 The Organization as the Centre of Excellence

While a "Centre of Excellence" (COE) is typically associated with a specialized team within an organization, it is possible for an entire organization to be labeled a "Centre of Excellence" if it is *widely recognized for its expertise, innovation, and excellence in a particular area or field.* In some

cases, an organization may establish a COE as part of its effort to maintain its status as a leader in a particular area or field. This COE may be responsible for driving innovation and excellence across the organization, promoting best practices, and providing training and support to other departments.

## 2.5 Centre of Excellence in Long Term Care- Research

The goal of establishing a Centre of Excellence within long term care should be to promote excellence in care delivery, improve outcomes for residents, and provide support and resources for staff members, families, and caregivers.

In the realm of aging research, Centres of Excellence play a crucial role in addressing the multifaceted challenges associated with aging populations. They amalgamate diverse disciplines such as gerontology, medicine, psychology, sociology, kinesiology and technology to comprehend the complexities of aging and develop comprehensive solutions.

These Centres often offer training, disseminate information, and collaborate with global partners, contributing significantly to scientific advancements and public health policies.

Within the context of **long-term care**, examples of Centres of Excellence (COEs) include:

- *The National Institute on Aging (NIA)*: the NIA resides within the National Institutes of Health in the US. The NIA doesn't operate as a single Centre but functions as a hub for funding and supporting multiple Centres of Excellence across the country. These Centres focus on various aspects of aging research, ranging from neurodegenerative diseases like Alzheimer's to social and behavioral aspects affecting the elderly.
- *The Institute for Aging Research at Hebrew SeniorLife*: Based in Boston, this organization stands out as a dedicated Centre focusing on musculoskeletal and neurological issues in the aging population. Extending beyond medical treatment, their research also addresses environmental, social and lifestyle factors influencing aging outcomes.

In Canada, several notable Centres of Excellence focus on aging research.

- *Baycrest Centre*: Located in Toronto, Ontario, Baycrest serves as a world leader in cognitive neuroscience, aging and brain health, encompassing research, education and healthcare delivery. Baycrest is home to the Rotman Research Institute, a pioneer in cognitive neuroscience and brain functioning in aging individuals.
- *Centre on Aging at University of Manitoba*: With a focus on multidisciplinary research, policy development, and community engagement, the Centre on Aging aims to address societal challenges related to aging, fostering improved well-being and quality of life for older adults.
- *The Centre on Aging at Mount Saint Vincent University* – has a similar focus on issues relating to aging and the elderly population.

- *NB Institute for Research, Data and Training in Aging (NB-IRDTA)* – they advance research and decision-making by providing access to secure, privacy-protected data and other resources. They are unique because they provide researchers with access to pseudonymized personal level administrative data in a secure, and controlled environment.
- *Institute for Life Course and Aging*: Located at the University of Toronto, the institute conducts extensive research on the social, biological, and psychological aspects of aging. They also offer multidisciplinary training programs for future researchers in this domain.
- *Concordia University Research Chair in Aging and Public Policy*: Based in Montreal, the CURCAPP focuses on public policy and its impact on aging populations.

## 2.6 Centre of Excellence in Long Term Care – Beyond Research

While many Centres of Excellence focus on research, there are organizations that prioritize other aspects beyond research, such as clinical care, education, advocacy, and community outreach.

- *Centre for Aging + Brain Health Innovation* – part of Baycrest, CABHI is dedicated to accelerating innovations in the aging and brain health sector. It focused on supporting and accelerating the implementation of innovation products, services and practices that directly impact the lives of older adults and individuals affected by brain health issues. It collaborates with a wide range of stakeholders, including researchers, healthcare professionals, businesses, and caregivers, to facilitate the development and implementation of innovative solutions for aging and brain health. CABHI's specific focus on innovation implementation and scaling, rather than being solely research-oriented, sets it apart as a unique entity.
- *The Reitman Centre at Mount Sinai in Toronto*, Ontario: the Centre is renowned for its provision of clinical care and support services for seniors, and their families, who are dealing with various mental health and cognitive challenges, including dementia and depression.
- *AGE-WELL Network of Centres of Excellence* – primarily focuses on developing and implementing innovative technologies and services to support aging individuals and caregivers, with a focus on policy change.
- *The Canadian Centre for Activity and Aging (CCAA)*, located at Western University, provides certifications, workshops, and programs to train fitness and health professional in catering to the needs of older adults, promoting active and healthy aging through physical activity.
- *The Schlegel-UW Research Institute for Aging*: a significant collaboration between the Schlegel Villages, a long-term care and retirement home provider in Ontario and the University of Waterloo. This partnership is committed to advancing academic research but also concentrates on translating research outcomes into tangible improvements in the care and well-being of seniors. Research areas include dementia care, therapeutic recreation, social connectedness, innovative care models and quality improvement in long-term care. The Centre stands out for its commitment to applying research findings in practical and impactful ways within the community of aging individuals, aiming to influence policy and practice.
- *Centre of Excellence in Frailty-Informed Care*: The Centre of Excellence honours Perley Health's longstanding commitment to research, learning and continuous improvement, and to

delivering ever-greater value to the healthcare system and the community. The Centre leads and participates in innovative initiatives that advance quality of care, along with relevant research and knowledge translation.

- *The Ontario Centres for Learning, Research, and Innovation in Long Term Care* – is a team of experts who work remotely to continue supporting long term care homes across the province. The “Centre” is funded by the Ministry of Health and is “hosted” by Baycrest, Bruyere and Schlegel UW Research Institute *for Aging*.
- *West Park (Toronto)* advertises their Long-Term Ventilation Centre of Excellence *which, in addition to providing direct care to patients who rely on long-term ventilatory support, also provide health care provider training, sharing of best practices and supporting patients through care transitions.*
- *Government of New Brunswick* – As part of the FutureNB Initiative (experiential learning focus) the Department of Education and Early Childhood Development has launched several “Centres of excellence” to give students the opportunity to interact with experts and gain career experience in entrepreneurship, health care and social work. The health care Centre of excellence includes Shannex and the NBANH as a long-term care partners.

### **3. THE CENTRE FOR INNOVATION AND RESEARCH IN AGING – CIRA**

After several years of engaging with partners, on a variety of research projects, the YCC board created CIRA as a separate organization, primarily to protect the organization’s interests if commercialization of any research outcomes was possible. Although some of CIRA’s projects have involved older adults living in the community, the mandate of CIRA is to conduct research which benefits the residents of York Care Centre.

CIRA has strengths in applied research which encompasses the majority of its work. The studies have primarily focused on improving the quality of life of older adults living in long-term care, assisted living, or independent living. Research studies have also included in-house quality improvement initiatives, staff education and training, and support for informal caregivers and family members. CIRA has not engaged in activities related to advocacy, or public policy. One area we could improve on would be ‘innovation’. To date only one of our projects has resulted in a unique innovation in which CIRA owns the intellectual property: MedReviewRx. Other current innovation projects include PassiveAware and the Discovery + Adopt funding from the Centre for Aging + Brain Health Innovation (CABHI).

#### 4. THE QUESTION

The Board will soon focus on developing a strategic plan for the 2025-2030 timeframe. The Board will consider if its vision remains to be a Centre of Excellence. Part of their consideration will be to examine the benefits associated with being a Centre of Excellence and to determine the focus of this Centre of Excellence.

**The Governance Committee is asked to consider if York Care Centre is currently operating as a Centre of Excellence in Long Term Care, and if we should consider any change in direction which would allow the organization to realize its Strategic Vision.**

#### 5. POINTS FOR CONSIDERATION

- a) Are we leaders in the delivery of long-term care?
  - Do our quality indicators suggest that we are leaders?
  - What is our reputation?
  - Are we leaders in introducing best practices, innovations, etc.
  
- b) Should our focus be on residential long-term care, or do we take the broader perspective of aging care – residential and community?
  - Our largest program is residential long-term care. However, we also provide supportive housing, independent living, day programming and, soon, the Nursing Home Without Walls program.
  - Which service lines should be considered in the Centre of Excellence model?
  
- c) Partnerships
  - There is potential, with funding, to offer best practice support to other homes. These homes are eager for such support.
  
- d) Sustainability of funding
  - York Care Centre does not receive funding to support “Centre of Excellence” work.
  - A portion of C.I.R.A.’s revenue offsets costs within York Care Centre. C.I.R.A.’s lack of long term funding is a significant issue.
  - Current staffing model of Y.C.C. makes it challenging to provide services beyond the traditional.
  
- e) CIRA
  - Has CIRA evolved into its full role as a Centre of Innovation and Research in Aging?
  - C.I.R.A has established strong academic relationships and is seen as credible research partner.

- C.I.R.A.'s activity has been primarily focused on research. However, the company was created with several objectives (as outlined in the Articles of Incorporation)
  1. *To engage in and promote excellent research, education, knowledge transfer and policy evaluation in aging care;*
  2. *To engage and encourage partners who shared a common interest to come together for the purpose of conducting research and create new knowledge in the field of elder care;*
  3. *To seek funding for multi-disciplinary research in the field of aging and aging care;*
  4. *To develop and advance relevant technologies, knowledge, policy analysis and best practice development for aging care;*
  5. *To establish, receive and maintain a fund or funds for the purposes of engaging partners and organizations in research, education, knowledge transfer and academic pursuits relative to aging.*
  6. *To create a centre of excellence in which best practices are developed and disseminated to the long-term care system, in which research is constantly yielding new insights and directions in their field of elder care and staff are trained in the latest and best practices in elder care;*
  7. *To organize a variety of mechanisms through which new knowledge in aging care is transferred into practice; such mechanisms will include symposia, on-line training, webinars, and other methods as may be developed;*
  8. *To foster a close and well-functioning relationships with academic institutions, service providers and other organizations with similar goals to strength their mandates and programs on aging care;*
  9. *To effect collaboration at a level that encourages and supports the development of alternatives to institutionalization a growing aging population;*
  10. *To create an environment and research capability that will permit services and intellectual capital innovations to be marketed to government agencies, associations, trade organizations and private sector for purposes of conducting research on topics of relevance in the field of aging care.*

PREPARED FOR:

The York Care Centre Board of Directors

PREPARED BY:

Geri Geldart

February 14, 2024