



Tri-County Mennonite Homes

Aldaview Services

Greenwood Court | Nithview Community

Making Every Day Matter

REMEMBER*CELEBRATE*ENVISION

1968 - 2018

2018

ANNUAL GENERAL MEETING

Tuesday, September 18, 2018

7:00 pm

Avon Mennonite Church

90 Greenwood Court, Stratford, ON



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AGENDA
for
TRI-COUNTY MENNONITE HOMES
2018 Annual General Meeting
Tuesday, September 18, 2018 - 7:00 PM
AVON MENNONITE CHURCH

Musical Prelude by Greenwood Court Residents

Welcome: *Brenda Howorth*, Board Chair

Meditation: *Mel Lichty*, Avon Mennonite Church

Approval of Minutes of TCMH 2017 Annual General Meeting

- Held September 26, 2017 at Poole Mennonite Church – *Judy Johnson*, Board Secretary

Board Report – 2017-2018 – *Brenda Howorth*, Board Chair

Approval of Actions of the Board for the Fiscal Year April 1/17– March 31/18 – *Brenda Howorth*

Staff Reports

- **Annual Reports – 2017-2018**
- **Annual Business Plans – 2018-2019**
 - *Steve Lichty*, Chief Executive Officer, Tri-County Mennonite Homes
 - *Louise Lepp*, Executive Director, Aldaview Services
 - *Joyce Penney*, Executive Director, Greenwood Court
 - *Sandy Hall*, Executive Director, Nithview Community
 - *Frank Deutsch*, Executive Director, Corporate Services

Member Relations Report – 2017-2018 – *Frank Deutsch*, Executive Director Corporate Services

Auditor's Report 2017-2018 – *Charles Seebach*, Charles Seebach CA Professional Corporation

Treasurer's Report 2017-2018 – *Lloyd Koch*, Board Treasurer

Acceptance of Audited Financial Statements for the Fiscal Year Ending March 31, 2018

Appointment of Auditors for 2018-2019 Fiscal Year – *Lloyd Koch*, Board Treasurer

Election of Board Members – *Brenda Howorth*, Board Chair

- Nominating Committee Report – *Linda Shantz*, Nominating Committee Chair

Date of next Annual General Meeting

- Tuesday, September 24, 2019 – 7:00 pm – Cassel Mennonite church

Concluding Comments and Adjournment – *Brenda Howorth*, Board Chair

* Refreshments and fellowship for everyone following the meeting

Tri-County Mennonite Homes (TCMH)
Annual General Meeting Minutes
Tuesday, September 26, 2017 – 7:00 pm
Poole Mennonite Church

Present - Board Members: Brenda Howorth (Chair), Sheryl Crabbe, Janice Gingerich, Arlene Hoke, Dave Honderich, Judy Johnson, Linda Shantz, Philip Schroeder, Stephen Jantzi,
Regrets - Board Members: John Lichti (Vice-Chair), Robert Jantzi (Treasurer), Lynn Zehr
Voting Delegates: **44** attendees plus **9** Board members in attendance = total **53 Voting Delegates**
TCMH Staff: 8 attendees **Guests: 16 attendees**
TOTAL ATTENDEES: **77**

WELCOME – Brenda Howorth welcomed everyone and called the meeting to order at 7:05 pm. She thanked Poole Mennonite church for hosting. Noted that the minutes of the meeting will be taken by Ina Tizzard and advised that audio recording is being done for accuracy and will be deleted after the minutes are approved by the Board. Brenda introduced the Board Members present and acknowledged three Board Members who could not attend this evening. She welcomed Diana Li, Ministry of Community & Social Services; Doug Shantz, Board Chair, Fairview Parkwood Mennonite Homes; and Tim Kennel, Executive Director, Fairview Parkwood Mennonite Homes. She welcomed and thanked the voting delegates and noted that without a quorum, the AGM would not be able to proceed.

MEDITATION – Brenda Schultz – welcomed everyone to Poole Church and noted that she was asked by the Supply Pastor, Fred Redekop, to share the devotional this evening. She referenced the TCMH Mission, Vision, Value statement and noted that her father was one of the original board members of TCMH. She read from Ecclesiastes 12:3 in The Message Bible and shared how those verses describe many of the residents as they reach the stage where they can no longer care for themselves. She noted that compassion was at the top of the list of TCMH Values and that caring is as important as care. She referenced the words of the Apostle Paul in Colossians to “cloth yourselves with compassion, kindness, humility, gentleness and patience, and over all of these virtues, put on love which binds them all together.” She concluded by opening in prayer.

APPROVAL OF MINUTES OF SEPTEMBER 27, 2016 ANNUAL GENERAL MEETING - Judy Johnson, Board Secretary, thanked Brenda Schultz and welcomed everyone on behalf of the Executive Committee of the Board and gave a summary of the 2016 Annual General Meeting minutes, found in the AGM Report Booklet (a copy of which is available at TCMH Corporate Office). The minutes were reviewed and approved.

It was moved by Judy Johnson and seconded by Amos Gerber

That the minutes of the TCMH Annual General Meeting, held on September 27, 2016 at Hillcrest Mennonite Church be approved as printed. Motion carried.

TCMH BOARD REPORT – Brenda Howorth gave highlights from her written report including:

- 2018 will be a year of celebration and emphasizing successes over the past 50 years as we prepare to celebrate five decades of Tri-County Mennonite Homes, an achievement we are celebrating
- Our strength is in our vision and in the people who strive to carry it out every day
- Increasingly complex sector and we are experiencing the challenges that are industry wide
- Financial issues facing us. The management team are working very hard to have TCMH fiscally responsible
- Thanked Lynn Zehr, who was unable to attend, for completing two terms and served as Chair of the Building & Property Maintenance Committee
- Extend an invitation to the wider community to consider volunteering as a member of the board and thanked the volunteers who impact our residents lives in many ways
- Opened the floor for any questions and thanked everyone for attending
- Brenda introduced Steve Lichty to present the Annual Reports and Annual Business Plan.

ANNUAL REPORTS APRIL 2016 to MARCH 2017 and ANNUAL BUSINESS PLAN – APRIL 2017 to MARCH 2018

TCMH Corporate Services – Steve Lichty, CEO, thanked Brenda and everyone for coming introduced the Senior Leadership Team Members. He thanked Cathy Meidinger, former Executive Assistant who retired in February 2017 after eleven years at TCMH and introduced Ina Tizzard, the new Executive Assistant. He referenced the TCMH Annual Report beginning on page 11 and the TCMH Business Plan beginning on page 40 of the AGM Booklet and explained how each document is used.

- Each division sets their targets and they are measured by the Business Plan for the fiscal year April to March
- At the end of the year, all Operational Reports are compiled into the Annual Report. Explained the need to read both documents together to understand the happenings in each division, and collectively across TCMH.
- The Reports look at things from four perspectives with four objectives:
 - o First perspective = Residents & Clients
 - o Second perspective = Staff
 - o Third perspective = internal processes and the need to have continuous improvement
 - o Fourth perspective = sustainability – financial & environmental
- The Performance Objective for TCMH in the Annual Report reads CEO, the Annual Business Plan reads Corporate Services. It has been changed, so the staff now sets the plan. The objectives set last year don't necessarily carry on the same theme but is consistent with the Strategic Plan.
- The First perspective was to look at the potential for growth across TCMH. In the 55-year period between 1975 to 2030 the number of seniors in Canada is likely to quintuple, producing more need for higher level of service and more complex needs.
- Need to grow our operation to meet that need effectively. Corporate Services staff have gone on a different theme and looked at IT services, as the greatest area of dissatisfactions with residents is in the telecommunications services.
- The Second perspective prepared a plan for health and wellness for our staff as there is caregiver burnout. Corporate Services focused on the customer service provided to internal customers, other divisional staff. Health & Wellness has been picked up by other divisions, have expanded on it and made it better.
- The Third perspective focuses on management information systems. The current system is over 22 years old. This is colour coded amber as it was not finished as quickly as anticipated, but it will be completed in the next month or two. The objective this year is to train staff on how to use it.
- The last two objectives, plans for development and redevelopment across all divisions, got delayed due to other priorities but is still on the "to do" list. The last objective was to achieve a balanced budget. This also was not achieved which gives it very strong red. Will go into more detail when presenting on Nithview. Aldaview and Corporate Services was slightly better. Greenwood Court met with some challenges but got on track as the year went on. However, Nithview got worse as the year went on. Steve welcomed any questions. None were raised. He then introduced Laura Kocher to present.

Aldaview Services – Laura Kocher, Manager, reported on behalf of Louise Lepp, Executive Director. She began by expressing her pleasure to be here on behalf of Louise who sends her regrets as she is attending the National Leadership Consortium course this week. Laura introduced one Aldaview staff member in attendance and proceeded to share highlights from the past year at Aldaview. They include:

- Assessing and preparing for the changing support needs of the clients we serve. She shared a story about a client who started to experience challenges within the first year of living at Aldaview and joked that he was aging and shared his dream to live in a retirement home. As his mobility declined, Aldaview, worked with him to allow him to stay home and connect with seniors. A year ago, he was able to move into Suite 22, which he is quite happy to declare as "home".
- Part of this year's Aldaview Business Plan is recognizing the need for staff wellness. Not just physical health, but about options to employees that nurture their body, mind, heart and soul.
- She proceeded to acknowledge staff and expressed appreciation for their unwavering commitment and

TCMH Annual General Meeting Minutes - Tuesday, September 26, 2017 continued

compassion they bring to their role at Aldaview. She thanked the other divisions for their continued partnership. She welcomed any questions. None were raised. She then introduced Joyce Penney to present.

Greenwood Court – Joyce Penney, Executive Director introduced Greenwood leadership team members in attendance and thanked them for coming. She shared some highlights from her written report which begins on page 25.

- The Huron Perth Hospice Committee has been actively involved in Greenwood Court by using their meeting rooms and as a test site and are actively involved with staff. It is a great partnership.
- Referenced the CAPSE (Comprehensive Advanced Palliative Care Education) and indicated that this year another RN has taken the challenge to take the course. Now have more staff registered and actively taking the first level called “The Fundamentals of Palliative Care”.
- Have a new e-learning platform, new call bell system, new phone system. Have extended emergency services with a pendant system for people in apartments to get support in 24/7. Employees have secure video conferencing via Ontario Telemedicine, which gives access to a Doctor in another area in ON to gain knowledge and experience. Have a platform for managing wait lists and a quick system for accessing staff and residents in case of an emergency.
- Spoke last year about food services changes coming and they have occurred and are working well with more dining options and price adjustments.
- Greenwood Court is very similar to most retirement and LTC homes in Ontario, continue to struggle to obtain sufficient PSWs and registered staff. They are partnering with colleges to educate unskilled workers and new immigrants to take courses in health care.
- She thanked the health care staff, residents, families and volunteers for donations of time, money and care.
- She welcomed any questions. None were raised. She then introduced Steve Lichty to present.

Nithview Community – Steve Lichty, Former Acting Executive Director reported on behalf of the new Executive Director, Sandy Hall. He began by referencing the scripture at the beginning of the Annual Report which was given primarily with Nithview in mind. Nithview faced trials and it was challenging to see them as pure joy!

- The report shows some of the challenges and can be traced back to one root cause - the staff perspective.
- Nithview has been short staffed for quite a few years, the same challenge across health care, but has become increasingly severe at Nithview as they were unable to retain new staff. Weren't losing long-term staff, strictly new staff. It became extremely frustrating; therefore, was bringing in a lot of agency staff who don't know the residents. This lack and turnover affected the third perspective, the internal processes.
- The Ministry of Health noted the shortcomings in the quality of care, due to the agency staff not knowing our procedures and routines. The excessive use of agency staff also drove up costs. There was approximately \$375,000 spent on agency staff, which was \$165,000 higher than previous year. Some of the other financial losses were \$300,000 for restructuring which was for severance.
- Legal costs came because of poor quality of care that needed an internal investigation. Staff was suspended with pay and a grievance from the union resulted in a significant cost.
- When they became aware of just how serious the problem was, a survey was conducted for all Nithview staff which told what was needed to rectify the situation. Since the latter part of the last fiscal and this fiscal year, this has been the focus and some progress has been made. They are working hard and getting there.
- The annual inspection reports are on the ministry website. The one from Sep 2016 is not pleasant. The March 2017 one is much easier to read. Greenwood is quite short, they found zero instances of non-compliance. Aldaview is a different ministry and all issues are resolved before the inspector leaves the premises. Aldaview and Greenwood can achieve low levels of risk, there is no reason Nithview cannot, it will just take time.
- With the financial challenges, the results from the first five months indicate Nithview is running in the black and are doing better than budgeted. The first five months produced a cost saving due to no Executive Director.
- Steve welcomed any questions. None were raised. He then introduced Brent Leis to present.

TCMH Annual General Meeting Minutes - Tuesday, September 26, 2017 continued

MEMBER RELATIONS REPORT – Brent Leis, Director of Administrative Services, shared as follows:

- The full report is found on page 47 of the AGM booklet
- Received almost \$101,000 in donations in 2017. Over \$92,000 was disbursed towards programs and equipment to enhance the resident and client experience and to add to the quality of life and level of care.
- Tri-County also receives thousands of hours from dedicated volunteers assisting with a wide variety of services to our residents.
- Donors, whether donating time or money, don't give to institutions, they prefer to invest in ideas and people and programs whom they believe in. TCMH donors demonstrate they believe in work TCMH provides.
- Need to ensure that donors know and experience the impacts that their gifts make; therefore, we continue to develop new processes and procedures around fundraising and donations.
- TCMH continues to have individuals and companies who support through the Promissory Note program. Looking to the future and the strategic priorities and plans for redevelopment and expansion, there may be more opportunity to support TCMH in this capacity.
- Thanks to all members and dedicated staff who understand what is written in Luke 12: 48 "much is required from those to whom much is given". Your gifts of both time and money are helping to MAKE EVERY DAY MATTER for the people we serve. He welcomed any questions. None were raised.

APPROVAL OF ACTIONS OF THE BOARD FOR THE FISCAL YEAR APRIL 1, 2016 – MARCH 31, 2017 – Brenda Howorth referenced the Actions of the Board, included in the AGM Report Booklet on pages 48 & 49 and opened the floor for any questions.

It was moved by Dale Wagler and seconded by Floris Leis

That the Actions of the Board for the Fiscal Year April 1, 2016 to March 31, 2017 be accepted as written in the 2017 Annual General Meeting Report Booklet. Motion carried.

TREASURERS REPORT – Brenda Howorth reported further to the written report included in the AGM Report Booklet on behalf of Robert Jantzi, Board Treasurer, who could not attend the meeting.

- The report is found on page 50. She expressed appreciation for Steve's explanations and honesty and transparency to explain some of the financials.
- Revenue and expenditures figures are there. Continue to focus on debit reduction.
- The Capital reserve fund was drawn down in 2016/2017 to finance capital cost and additions without taking on more long-term debt.
- The Audited Financial Statements are found in Appendix A in the back of the booklet on pages 52-70.
- She then introduced the Auditor, Charles Seebach to present.

AUDITORS REPORT – Charles Seebach referenced the Audited Financial Statements included in Appendix A of the AGM Report Booklet (for a copy, please contact TCMH Corporate Office).

- He expressed thanks for allowing him to be the auditor of Tri-County and stated that the Audit went smoothly and is done with the assistance of Tri-County.
- Statements have been reviewed in detail with the Finance and Audit Committee and approved by the Board.
- The Auditors Report is a standard report issued for a non-profit organization.
- The organization did incur debt of expenditure over revenue of just over \$1 million, but as seen on page five of the Auditors Report, the statement of cash flow for operating activities was positive for the year which is a good sign.
- He referenced the last page of his report, the last note #12, which talks about the commitments the organization entered into with contracts and other commitments.
- He thanked everyone for their time and Brenda Howorth proceeded to give opportunity for any questions. None were asked. She then thanked Charles for his time.

Acceptance of Audited Financial Statements for the Fiscal Year ending March 31, 2017

TCMH Annual General Meeting Minutes - Tuesday, September 26, 2017 continued

It was moved by Brenda Howorth and seconded by George Schroeder

To accept, as presented, the Audited Financial Statements for Tri-County Mennonite Homes for the fiscal year ending March 31, 2017. Motion carried.

Appointment of Auditors for 2017-2018 Fiscal Year

It was moved by Brenda Howorth and seconded by James Shantz

That Charles Seebach, CA Professional Corporation, be appointed as auditor for TCMH for the 2017-2018 fiscal year. Motion carried.

ELECTION OF BOARD MEMBERS – Brenda Howorth thanked the Nominating Committee and asked Janice Gingerich, Committee Chair to report on behalf of the Committee and present the Nominees. Janice thanked the committee for their work in seeking out willing nominees to sit on the TCMH Board of Directors and proceeded to call the names of the Committee Members: Dwight Steinman, Larry Erb, Brenda Howorth, Stephen Yantzi, Steve Lichty and herself.

- The committee relies on personal knowledge of people within the supporting constituency for information for perspective candidates.
- Sheryl Crabbe joined the Board of Directors in January of 2017 which filled the last remaining spot.
- There are three Board members whose terms have been completed this year, creating three vacancies.
- Arlene Hoke and John Lichti have both agreed to let their name stand for a second term, thus potentially filling two of the three Board positions.
- Lloyd Koch has consented to let his name stand to join TCMH Board of Directors.
- Janice proceeded to nominate Arlene Hoke, John Lichti and Lloyd Koch for the 2017-2021 for-year term on the Tri-county Mennonite Homes Board of Directors.
- Brenda Howorth opened the floor for anyone to stand to serve on the Board of Directors. No further nominations were made.

Motion: It was moved by Brenda Howorth and seconded by Judy Johnson

That the nominations cease. Motion carried.

Motion: It was moved by Sheryl Crabbe and seconded by Philip Schroeder

That Arlene Hoke, John Lichti and Lloyd Koch be elected for the next four-year term (2017-2021) on the TCMH Board of Directors. Motion carried.

CONCLUDING COMMENTS AND ADJOURNMENT

- The mission of TCMH is continuing with the dedicated commitment of many people, the staff, volunteers and board members, standing committee members. Your presence tonight has confirmed your interest and commitment to further TCMH mission.
- Thanks to Cassell Mennonite Church for being flexible in their turn to host, to allow Avon Mennonite Church to serve as host, to coincide with TCMH's 50th Anniversary Celebrations. Thanks to Poole Mennonite Church for hosting this evening. Everyone was invited to join in fellowship and refreshments. Brenda closed the meeting in prayer.

MEETING ADJOURNED at 8:23 pm.

Recording Secretary: Ina Tizzard

Approved by: _____

Judy Johnson, Board Secretary

DATE OF THE NEXT AGM: Tuesday, September 18, 2018 at Avon Mennonite Church

TCMH BOARD REPORT

2018 Annual General Meeting

Brenda Howorth, Board Chair

I want to express my continuing admiration for the commitment and dedication of a community of likeminded people who have envisioned and carried out the mission of Tri-County Mennonite Homes over the past 50 years. This week of celebration has reinforced for me what a caring group can accomplish. Thank you most sincerely to the 50th Anniversary organizing committee for their creative work in highlighting what has made the work of TCMH so valuable over the past decades and helping us as a community to celebrate this achievement and focus our thoughts and resources toward what will continue to make TCMH an enviable place to live and work. We look forward to the rest of the week's activities.

Thank you for your presence at the Annual meeting tonight and the support we have enjoyed from our constituent congregations in the past and continue to ask for as we move into the future.

This sector of our healthcare journey in Ontario continues to experience many challenges. The ways to meet the needs of the senior members of our community are varied and need creative approaches. The past year at TCMH has seen ongoing dedication to the mission that drives us and the persistence to identify and plan for the challenges that face us continues to be the focus of leadership. We are grateful to the frontline staff as they provide the daily support to our residents and to the many volunteers who augment this care. The multidisciplinary approach I have seen in action as I attend meetings has been most encouraging. We hear about teamwork; about managers being present during weekends. Appropriate staffing is an ongoing challenge shared by everyone in this sector and as a Board we will continue to support creative thinking to meet this issue.

The past year has seen the maturing of the subcommittees put in place approximately three years ago. These working groups of staff, community members and Board members have strengthened the knowledge base of the Board members especially and will continue to forge a strong working relationship between all stakeholders. Several Board members were able to attend the AdvantAge conference (the organization overseeing not for profit services for seniors in Ontario) this spring and a learning session for Board members addressing governance issues was held in June. Several members of the Parkwood/ Fairview team were able to join us, and we look forward to continuing a sharing connection with them.

An area of focus in the past few months has been to prepare ourselves with a plan ready to implement when the promise of new capacity in long term care materializes and we should be well positioned with a clear sense of our priorities in place.

It has been a privilege to serve my terms on the Board of Directors of TCMH. The caring concern I have witnessed from interactions with family council, staff at professional advisory committee meetings, management at Board meetings and the energy and willingness to serve from my fellow Board members has given me hope that TCMH will continue to thrive.

ACTIONS OF THE BOARD FOR THE FISCAL YEAR APRIL 1/17 – MARCH 31/18

- Motion #350/04/17** *That the agenda for TCMH Board meeting #497, held April 25, 2017, be approved as amended.*
- Motion #351/04/17** *That the minutes of TCMH Board meeting #496, held January 1, 2017, be approved as amended.*
- Motion #352/04/17** *That Board formally ratified the motion which was approved by email on March 29, 2017: That the 2017-18 Quality Improvement Plans for Greenwood Court and Nithview Community be approved as written. (Note: As this motion was approved by email in the 2016/17 Fiscal year, it was also included in the 2016/17 Actions of the Board.)*
- Motion #353/04/17** *That the TCMH Board appoint Sheryl Crabbe to serve on the 50th Anniversary Planning Committee and the Quality and Risk Management Committee.*
- Motion #354/07/17** *That the agenda for TCMH Board meeting #498, held July 25, 2017, be approved as amended.*
- Motion #355/07/17** *That the minutes of TCMH Board meeting #497, held April 25, 2017, be accepted as written.*
- Motion #356/07/17** *That the 2016/17 Transfer Payment Annual Reconciliation be approved as presented, signed by the Board Treasurer, and submitted as required to the Ministry of Community & Social Services.*
- Motion #357/07/17** *That the TCMH Board accept the Audited Financial Statements and the Auditor's Report for the year ending March 31, 2017, as presented. It was accepted with the addition of a Note 12 on the Co-Generation Project.*
- Motion #358/07/17** *That the first quarter financial statements, for the period of April to June 2017, be accepted as presented.*
- Motion #359/07/17** *That the Charitable Disbursement Report for the period April to June 2017, be accepted as presented.*
- Motion #360/07/17** *That a recommendation be taken to the 2017 Annual General Meeting to appoint Charles Seebach CA Professional Corporation as auditors for TCMH for the fiscal year 2017/2018.*
- Motion #361/11/17** *That the agenda for TCMH Board meeting #499, held November 1, 2017, be approved as amended.*
- Motion #362/11/17** *That the minutes of TCMH Board meeting #498, held July 25, 2017, be accepted as written.*
- Motion #363/11/17** *That the Board approve the Board Committees of TCMH as listed above.*
- Motion #364/11/17** *That the Board approve the following people as signatories for TCMH. Chair – Brenda Howorth; Vice Chair – Stephen Yantzi; Treasurer – Robert Jantzi; Secretary – Judith Johnson; CEO & President – Stephen Lichty; Director of Administrative Services – Brent Leis; Executive Director Aldaview Services – Louise Lepp; Executive Director Greenwood Court - Joyce Penney; Executive Director Nithview Community – Sandy Hall; and that all financial institutions will be notified of the new list of signatories approved at this meeting.*
- Motion #365/11/17** *That the second quarter financial statements, for the period July to September 2017, be accepted as presented.*

- Motion #366/11/17** *That the Board approve a term loan with Kindred Credit Union to a maximum of Two Million Dollars (\$2,000,000), amortized over five years, at an interest rate of prime plus 0% to be used to finance various capital projects.*
- Motion #367/11/17** *That the three bed licenses from Ritz Villa be accepted as presented.*
- Motion #368/11/17** *That the TCMH Board accept, as presented, the Annual Report for Health & Safety for the year October 1, 2016 to September 30, 2017.*
- Motion #369/11/17** *That the TCMH Board give annual approval to the TCMH Health & Safety Policy (Umbrella).*
- Motion #370/01/18** *That the agenda for TCMH Board meeting #500, held January 30, 2018, be approved as amended.*
- Motion #371/01/18** *That the minutes of TCMH Board meeting #499, held November 01, 2017, be accepted as written.*
- Motion #372/01/18** *Having been made aware by senior management of the critical staffing shortages at Nithview Community Long Term Care and the serious risks for the safety of the residents, a motion is made to support the action plan proposed to address resident safety, such plan having been entered into the minutes of Board meeting # 500 held on January 30, 2018.*
- Motion #373/01/18** *That the third quarter financial statements, for the period October to December 2017, be accepted as presented.*
- Motion #378/04/18** *That the Board formally ratified the motion which was approved by email on February 28, 2018: That the 2018-19 Long Term Care Service Accountability Agreement between the Southwest LHIN and Tri-County Mennonite Homes be accepted, signed and submitted to the Southwest LHIN. (Note: As this motion was approved by email in the 2017/18 fiscal year, it is being included in the 2017/18 Actions of the Board.)*
- Motion #379/04/18** *That the Board formally ratified the motion which was approved by email on February 28, 2018: That the 2018-19 Long Term Care Service Accountability Agreement between the Waterloo-Wellington LHIN and Tri-County Mennonite Homes be accepted, signed and submitted to the Waterloo-Wellington LHIN. (Note: As this motion was approved by email in the 2017/18 fiscal year, it is being included in the 2017/18 Actions of the Board.)*
- Motion #380/04/18** *That the Board formally ratified the following motion which was approved by email on March 24, 2018: That the 2018-19 Quality Improvement Plans for Greenwood Court and Nithview Community be approved as written. (Note: As this motion was approved by email in the 2017/18 fiscal year, it is being included in the 2017/18 Actions of the Board.)*

TCMH ANNUAL REPORT – APRIL 1, 2017 TO MARCH 31, 2018

**“Let us not become weary in doing good, for at the proper time
we will reap a harvest if we do not give up.”**

Galatians 6:9

Introduction

- The Tri-County Mennonite Homes’ (TCMH) Annual Report and Annual Business Plan are the main instruments used by TCMH to establish performance objectives and to evaluate performance from four perspectives:
 1. How do we ensure that all our divisions are exceptional places to live for our residents and clients?
 2. How do we ensure that TCMH is an exceptional place to work?
 3. How will we sustain our ability to change and improve?
 4. How will we ensure that our physical assets are maintained and that we are financially sustainable?
- Performance objectives are set annually by each TCMH division. These performance objectives are approved by the TCMH Board of Directors at the April Board meeting. Throughout the year, each division reports on the progress being made towards achieving the objectives at the quarterly Board meetings.
- The TCMH Annual Report is a consolidation of the quarterly reports and are designed to provide a candid assessment for the Board and for the delegates at the TCMH Annual General Meeting on the actual performance of each of the divisions.
- The Annual Report covers from April 1, 2017 to March 31, 2018, to align with our fiscal year.

ALDAVIEW SERVICES ANNUAL REPORT - APRIL 1, 2017 to MARCH 31, 2018

Summary

Green	Indicates that the objective is expected to be achieved by March 31, 2018
Amber	Indicates that the objective may not be achieved or only partially achieved by March 31, 2018
Red	Indicates that it is unlikely that the objective will be achieved by March 31, 2018

RESIDENT/CLIENT PERSPECTIVE: How do we ensure that all our division is an exceptional place to live for our residents and clients?	
1. To Develop a Palliative Care Program to enable Aldaview to offer continued care to clients to end of life	Green
EMPLOYEE PERSPECTIVE: How do we ensure that TCMH is an exceptional place to work?	
2. To Continue with on-going professional development opportunities for staff	Green
INTERNAL PERSPECTIVE: How will we sustain our ability to change and improve?	
3. To further develop and maintain a positive workplace culture and staff wellness	Green
PHYSICAL AND FINANCIAL PERSPECTIVE: How will we ensure that our physical assets are maintained and that we are financially sustainable?	
4. To Develop and strengthen current recruitment and increase efficiency of on-boarding practices	Green
5. To ensure financial sustainability	Green

ALDAVIEW SERVICES ANNUAL REPORT - APRIL 1, 2017 to MARCH 31, 2018

RESIDENT/CLIENT PERSPECTIVE: How do we ensure that all our division is an exceptional place to live for our residents and clients?			
Objective	Measures	Targets	Accomplishments
1. To develop a Palliative Care Program to enable Aldaview to offer continued care to clients to end of life	<ul style="list-style-type: none"> • Research educational opportunities & offer appropriate to staff • Evaluate past experience and identify learnings • Research resources available • Connect with other agencies providing palliative care 	<ul style="list-style-type: none"> • Have educated staff teams around Palliative Care/End of Life • Identify a space • Develop links with partners/Palliative Care Resources. Have an outline of Aldaview palliative care options/program 	<ul style="list-style-type: none"> • During the course of the year, the following educations were provided to staff around Palliative Care: <ul style="list-style-type: none"> ○ Palliative Care Gold Standard Framework in the Developmental Disability Community of Practice' ○ Fundamentals of Palliative Care course. ○ Palliative Care, End of Life Communication • Ten staff identified an interest in championing Palliative Care approaches within the agency and attended education. These staff will now form Aldaview's Palliative Care committee and provide support to staff teams providing Palliative Care in the future. • Work around this objective will be on-going beyond this year as the committee begins to meet and policies are reviewed, finalized and implemented.
EMPLOYEE PERSPECTIVE: How do we ensure that TCMH is an exceptional place to work?			
Objective	Measures	Targets	Accomplishments
2. To continue with on-going professional development opportunities for staff	<ul style="list-style-type: none"> • Develop the yearly educational plan • Identify which learnings are online/workshop • Seek input from employees and incorporate their feedback • Roll out the plan 	<ul style="list-style-type: none"> • To have planned monthly educational opportunities available for professional development for all staff across the agency. To build on goals identified by employees as part of their annual appraisals 	<ul style="list-style-type: none"> • At the beginning of the year all staff were asked to provide input into areas they would like to see further professional development opportunities across the agency. An Education Template was mapped out and below are some of the educations that were offered above and beyond the mandatory

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			<p>trainings required as part of Quality Assurance Measures:</p> <ul style="list-style-type: none"> ○ Emergency Specialized Response' training that teaches Bio, Psycho, Social approaches to supporting complex needs ○ Health & Safety Certification ○ Advocating for Clients 'Voices from a Silent Journey' ○ Social Enterprises for Developmental Service Agencies ○ SafeTALK training (Suicide prevention training)
INTERNAL PERSPECTIVE: How will we sustain our ability to change and improve?			
Objective	Measures	Targets	Accomplishments
<p>3. To further develop and maintain a positive workplace culture and staff wellness</p>	<ul style="list-style-type: none"> • Seek input from staff/ management group around wellness topics/ opportunities • Leadership initiate activities that develop teams • Wellness resource sharing through articles, workshops etc. • Decrease in sick days 	<ul style="list-style-type: none"> • To have a functional and productive staff/management committee • To have healthy employees and a positive workplace • To encourage use of EFAP resources 	<ul style="list-style-type: none"> • During the year the staff/management quality work life committee met on a regular basis & became more involved in initiatives and decisions around promoting workplace wellness. Below are a few of the initiatives that were implemented during the year: <ul style="list-style-type: none"> ○ clothing drive ○ 'Step challenge' during the month of October ○ wellness water challenge ○ Employee appreciation 'thank you' initiated by Leadership for Christmas and Easter ○ Articles featured in bi-weekly Staff newsletters around Mental Health and work life balance. ○ Compassion Fatigue workshop ○ Aldaview Wellness Fair

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PHYSICAL AND FINANCIAL PERSPECTIVE: How will we ensure that our physical assets are maintained and that we are financially sustainable?			
Objective	Measures	Targets	Accomplishments
4. To develop and strengthen current recruitment and increase efficiency of on-boarding practices	<ul style="list-style-type: none"> • Review current practices • Seek feedback from recent new hires on their experience • Identify improvements • Updated orientation package/ handbook. Exit surveys completed 	<ul style="list-style-type: none"> • To make onboarding and orientation of employees more efficient • To share information in a timely way and at the time the information is required by new hires. Have a process for exit survey information to be fed back to the division 	<ul style="list-style-type: none"> • A survey was developed about Current onboarding/orientation practices at the beginning of the year and circulated to the agencies newest employees. Feedback was gathered from the survey and from team leads across the staff teams, and as a direct result the following occurred through the year: <ul style="list-style-type: none"> ○ An Aldaview employee handbook was developed and will be used starting April 2018 for all new hires ○ New 'Appraisal' template was trialed and implemented April 2018 for all employee annual appraisals ○ A review of the orientation/training package for new staff was done, with changes made to how staff receive information and at what time during the hiring process. Some information was changed from hard copies to online access ○ New Exit survey being used for all employees leaving the agency – next steps to place survey in an online format
5. To ensure financial sustainability	<ul style="list-style-type: none"> • Financial statements budget 	<ul style="list-style-type: none"> • Meet 2017-18 financial targets as set in the 2017-18 budget 	<ul style="list-style-type: none"> • Financial targets were met throughout the year. Additional funding was received from MCSS to assist with purchase of lift equipment and to offset additional costs associated

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			with the implementation of the Fair workplaces Act which came into effect January 1, 2018.
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Summary

Green	Indicates that the objective is expected to be achieved by March 31, 2018
Amber	Indicates that the objective may not be achieved or only partially achieved by March 31, 2018
Red	Indicates that it is unlikely that the objective will be achieved by March 31, 2018

RESIDENT/CLIENT PERSPECTIVE: How do we ensure that all our division is an exceptional place to live for our residents and clients?	
1. Continue to expand patient-centred model of end-of-life care that will support our pursuit of excellence in palliative care	Green
2. Enhance recreation, spiritual care and program offerings	Green
3. To embark on dining changes in Long Term Care and Independent Living	Green
EMPLOYEE PERSPECTIVE: How do we ensure that TCMH is an exceptional place to work?	
4. To enhance communication as identified in 2016 Staff Survey	Green
5. Create a dynamic environment and culture of continuous learning	Green
6. Excellent people positioning for the future	Green
INTERNAL PERSPECTIVE: How will we sustain our ability to change and improve?	
7. Actively engage in research and apply best practices to achieve quality of life for residents	Green
8. To ensure that the safety and quality care of our residents meets or exceeds provincial averages	Green
PHYSICAL AND FINANCIAL PERSPECTIVE: How will we ensure that our physical assets are maintained and that we are financially sustainable?	
9. Maximize the use of marketing techniques	Green
10. Meet and exceed budget expectations	Red

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RESIDENT/CLIENT PERSPECTIVE: How do we ensure that all our division is an exceptional place to live for our residents and clients?			
Objective	Measures	Targets	Accomplishments
1. Continue to expand patient-centred model of end-of-life care that will support our pursuit of excellence in palliative care	<ul style="list-style-type: none"> • Knowledgeable families • Meet LSAA obligation for 2017-2018 • Policies that meet standards for end of life 	<ul style="list-style-type: none"> • We will implement one Palliative Care best practices, as per the LSAA obligations • We will continue to build on two best practises developed in 2016-2017 • Roll- out our Palliative Discharge Survey for LTC • Continue to develop relationships and memorandum of services with Stratford Perth Hospice • Educate families and staff about Advanced Care Planning to reduce hospital transfers 	<ul style="list-style-type: none"> • Obligations for the LSAA signed off by the ED/Board for 2017 – 2018. • Palliative Care survey finalized. • Rolled out Palliative Survey to LTC and RH areas. • Hospice site plans and architect was introduced at Volunteer Brunch – April. <p>Family Education</p> <ul style="list-style-type: none"> • Family Night hosted on Oct 23. Education occurred regarding Advanced Care Planning. <p>Staff Education</p> <ul style="list-style-type: none"> • Four support staff and PSWs completed fundamental course in Palliative Care. • RN completed CAPCE course.
2. Enhance recreation, spiritual care and program offerings	<ul style="list-style-type: none"> • Review 2016 Resident Survey comments (Independent Residents) • Increase one-to-one programing in Long Term Care are per-evidence based resources • Develop volunteer partnerships 	<ul style="list-style-type: none"> • One monthly education or event for Independent Apartments Residents • Increased use of Therapies (music, horticultural etc.) • Celebrate Canada 150 within our community • Connect with volunteers to establish a revised data base • Invite Board members to participate with special events 	<ul style="list-style-type: none"> • Education offered in the Months of Oct and Nov for Apartment and Retirement Residents – <i>MediSystem education</i>. Response poor therefore changed goals. • Bus service offered for independent shopping and events outings. • Greenwood now has a bus driver. • Music Therapist hours increased to two full days a week. • Enhancement of one-to-one programing in Recreation Department. • GWC Spiritual Care survey results completed in apartment area 41% response rate.

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			<ul style="list-style-type: none"> • Actions to include reviewing survey with Chapel Committee. Minimal changes implemented. • 150 Canada celebrations included <ul style="list-style-type: none"> ◦ decorate your door contest. ◦ Resident BBQ with a visit from John Natter, MP.
3. To embark on dining changes in Long Term Care and Independent Living	<ul style="list-style-type: none"> • Review 2016 Resident Survey comments (Independent Residents) • Long Term Care Act requirements • Resident Council response to resident choice • Menu feedback through a coordinated system 	<ul style="list-style-type: none"> • Establish focus groups for Greenway dining meal changes • Develop clear goals for project change in the Greenway dining • Explore options of Beverage Bar and Buffets • Introduce meal communication tools for show plates • Working with Food Committee and Resident Council. Introduce changes that continue to enhance services • Use capital funds to purchase chairs and flooring for Greenway 	<ul style="list-style-type: none"> • Completed focus groups for dining changes. • Dining Project - pricing and package options initiated in July. • Hostess style serving of beverages in Greenway Dining. • Received presentation of an alternate food supplier – analysing menu and pricing per to changing. • Outstanding area is capital funding for chairs and replacement of floors. Floors replaced in April 2018.
EMPLOYEE PERSPECTIVE: How do we ensure that TCMH is an exceptional place to work?			
Objective	Measures	Targets	Accomplishments
4. To enhance communication as identified in 2016 Staff Survey	<ul style="list-style-type: none"> • Knowledgeable staff working • Staff to become more aware o the resident's past 	<ul style="list-style-type: none"> • Internal events communication through Information Technology Systems - PCC, telephone systems & One-Call • "What about ME" Memory Boards to be developed with the BSO Team and Recreation Team • Work with IT provider to address staff room messaging 	<ul style="list-style-type: none"> • Communication Board for messaging staff outstanding. Blackcreek has not completed. • Eighteen Memory Name Boards have been ordered for our Heritage Unit (dementia) from our CDC funds. Families are encouraged to insert pictures and memory items. • "What about ME" project 75 % interview but not posted.

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5. Create a dynamic environment and culture of continuous learning	<ul style="list-style-type: none"> • Realign education and training within Greenwood 2017-2018 • Partner with Sienna to assist in continued learning • Partner with MOH & LTC-funded Nurse Practitioner (NP) to assist in education and training in the LTC division 	<ul style="list-style-type: none"> • Develop a new e-learning capacity within the home through “Surge Learning” • Develop new on-boarding program • Develop electronic on-boarding materials • Seek out & provide enhanced leadership and clinical training for registered staff • NP to assist with 2017 mandatory education within the home 	<ul style="list-style-type: none"> • Developed a new on-boarding program. This has been shared within Nithview. • Mandatory education has occurred various times (May June, Sept Dec 2017) with 99 employees attending. NP participated in education session. • Enhanced leadership for registered staff is being completed by our pharmacists’ and our Nurse Practitioner. • Gentle Persuasive Approaches (GPA) education held hosted, 37 staff attended. • Annual fire evacuation completed for Long Term Care and Retirement Home - Nov 30.
6. Excellent people positioning for the future	<ul style="list-style-type: none"> • Continue to provide opportunities for students from colleges and universities • Ensure career opportunities, succession planning and leadership development • Recruit and retain the right people 	<ul style="list-style-type: none"> • Develop innovative strategies for recruitment working with Conestoga College and Canada Job grants • Maintain relationships and connections to support student placements • Work with Health Force Ontario to recruit one Registered Practical Nurse or Registered Nurse should a full-time vacancy occur 	<ul style="list-style-type: none"> • Placements students from Conestoga (RN, RPN) finished their placement this quarter. RN placement planned for next quarter. • Due to the changes in the HFO program we are unable to participate. Our association is aware of LTC homes concern in the changes.
INTERNAL PERSPECTIVE: How will we sustain our ability to change and improve?			
Objective	Measures	Targets	Accomplishments
7. Actively engage in research and apply best practices to achieve quality of life for residents	<ul style="list-style-type: none"> • Uphold mandate for Nurse Practitioner funded by the MOHLTC • Participate in best practise engagements 	<ul style="list-style-type: none"> • Continue to partner with Nurse Practitioner through Greenwood Court and Knollcrest Lodge • Work with MOHLTC-funded Nurse Practitioner to develop one best practice for 2017 	<ul style="list-style-type: none"> • Research project ongoing into 2018 “<i>Advance Care Planning across Canada</i>”. This research project is being completed with Alberta, Ontario and Manitoba representatives.

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	through the LHIN and MOH & LTC	<ul style="list-style-type: none"> • Seek out opportunity for research involving Greenwood 	<ul style="list-style-type: none"> • Best practice project participated in 2017 <ul style="list-style-type: none"> ○ Virtual ET Nurse & ○ Clinical Support Tools
8. To ensure that the safety and quality care of our residents meets or exceeds provincial averages	<ul style="list-style-type: none"> • Develop relationships and standards with new pharmacy (Feb 2017) • Enhance care planning in the Recreation Department • Patient-First Act transformation • Develop systems internally relating to quality programs • Establish QIP measures and goals to meet HQO benchmarks 	<ul style="list-style-type: none"> • Ensure use of technology to obtain resident information, to promote discussions and changes using MDS, Clinical Connect, E-Health and OTN • Partner with SWLHIN Wound Management Program to increase capacity of wound prevention protocols • Collaborate with the SWLHIN to embark on the Patient-First Act • Ensure that all staff who code Resident Assessment Instrument Minimum Data Set (RAI-MDS) are trained and have completed annual test in AIS (Assessment & Intelligence Systems) • Review Greenwood Quality Committee Terms of Reference and align it with other committees within the home • Embark on Sienna audit progress and ensure corrective actions are taken • Use our 2017-2018 QIP submitted to Health Quality Ontario as a living measurement tool for quality. This tool speaks to effective transitions, resident satisfaction, emergency visits, medication safety & falls 	<ul style="list-style-type: none"> • Completed and on going • Clinical Connect still outstanding due to privacy signing. • Skin and Wound Training • Six PSW attended Ostomy and Skin care • One RPN attended RNAO Best Practices • Two staff (RNs) – completed 3M wound course • All staff completed AIS test for coding successfully. • Quality Committee Terms of Reference and aligned with Board involvement. Forwarded to participants for January meeting. • Meetings held with MediSystem key contacts to promote customer service and improve quality measures.

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PHYSICAL AND FINANCIAL PERSPECTIVE: How will we ensure that our physical assets are maintained and that we are financially sustainable?			
Objective	Measures	Targets	Accomplishments
9. Maximize the use of marketing techniques	<ul style="list-style-type: none"> • Ensure Greenwood is competitive in the senior market • Use PCC software program to ensure a complete resident wait list 	<ul style="list-style-type: none"> • Expand the database in retirement living to improve waitlist management by adopting the new CRM system within PCC • Plan open house for Fall 2017 • Develop a plan for a virtual tour • Enhanced bathing/shower areas – LTC tub and showers in Apartments and Retirement • Review all admission material to ensure it is up-to-date (LTC & RHA) 	<ul style="list-style-type: none"> • Unable to complete data base fully. Will roll into 2018 -2019. • Due to security issues, open house was cancelled Fall 2017. This will be reviewed Fall 2018. • Additional security cameras, new monitoring website and signage installed due to resident concerns. • Four showers installed in the Loft (RHA). • All admission material for LTC & RHA has been updated with new logo, pricing, policies and service options. • New rate developed for non-funded beds, due to occupancy issues for over two months. Offered a lighter version of care.
10. Meet and exceed budget expectations	<ul style="list-style-type: none"> • TCMH Board Financial Committee approval • Review chemical suppliers to meet TCMH needs • Capital budgets to be reviewed 	<ul style="list-style-type: none"> • Review month statements and variances • Leadership Team to gain enhanced knowledge of financial systems • Efficiency in lighting in resident living areas • Efficiency gained through replacement of all water faucets • Ensure capital projects have a focus on sustainability 	<ul style="list-style-type: none"> • Monthly statements were outstanding for most of the year. • New nav: financial system shown to team. Have not begun to use. • Lighting on hold due to capital limitations. • Accepted an award from Festival Hydro “Save on Energy Program”. • New chemical supplier completed install. This company is used by all TCMH. <p>Capital Items</p> <ul style="list-style-type: none"> • Co Gen delivered to site. Set up will continue over into 2018-2019.

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			<ul style="list-style-type: none"> • Carpet Replacement booked for April 2018. • Laundry and Maintenance shop out for tender. Build 2018-2019.
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Acronym	Description	Acronym	Description
LSAA	Long-Term Care Home Service Accountability Agreement	RHA	Retirement Home Act
BSO	Behaviour Supports Ontario	OTN	Ontario Telemedicine Network
MOH & LTC	Ministry of Health & Long-Term Care	SWLHIN	South West Local Health Integration Network
QIP	Quality Improvement Plan	PCC	Point Click Care <i>(computer software used of clinical chart and financial)</i>
HQO	Health Quality Ontario	RAI-MDS	Resident Assessment Instrument- Minimum Data Set <i>(is the standardized assessment tool for admission, quarterly, significant change in health status and annual assessments for each resident)</i>
NP	Nurse Practitioner <i>(FYI at GWC we share a NP with Knollcrest as a special funded opportunity)</i>	PAC	Professional Advisory Committee <i>(Internal committee with Care Partners – Medical Advisory, Pharmacist, Public Health, Dietitian, Restorative and our leadership)</i>

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RESIDENT/CLIENT PERSPECTIVE: How do we ensure that all our division is an exceptional place to live for our residents and clients?	
1. To adapt to the evolving needs of our residents in Long-Term Care by providing a safe, secure, and comfortable home for both the cognitively well and the cognitively unwell	Amber
EMPLOYEE PERSPECTIVE: How do we ensure that TCMH is an exceptional place to work?	
2. To improve team work within work units, across departments and between management and front-line staff	Green
INTERNAL PERSPECTIVE: How will we sustain our ability to change and improve?	
3. To reduce staff attrition, use of agency staff, and costs for staff overtime	Red
PHYSICAL AND FINANCIAL PERSPECTIVE: How will we ensure that our physical assets are maintained and that we are financially sustainable?	
4. To ensure the financial sustainability of Nithview Community	Red

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RESIDENT/CLIENT PERSPECTIVE: How do we ensure that all our division is an exceptional place to live for our residents and clients?			
Objective	Measures	Targets	Accomplishments
1. To adapt to the evolving needs of our residents in Long-Term Care by providing a safe, secure, and comfortable home for both the cognitively well and the cognitively unwell	<ul style="list-style-type: none"> • LTC Residents' Satisfaction surveys • Family Satisfaction surveys • Number of Critical Incident reports for LTC 	<ul style="list-style-type: none"> • Continuous improvement in all areas 	<ul style="list-style-type: none"> • Family Satisfaction Survey revealed improved scores overall. • Resident Satisfaction Survey revealed improved scores overall. • Number of complaint per quarter remain consistently low. • Strengthened and consistent leadership will positively impact on Critical Incident reporting to the Ministry of Health. • Managers began working weekends in September and continue to do so to assist with managing emerging issues and assist on the front lines given our short staffing. • In the early part of the year new full-time positions were created in Recreation and Resident Life Coordinators. These positions were instrumental in meeting our compliance objectives to remove our compliance orders. • Several staff appreciation events were held to demonstrate our commitment to the work our staff perform for our residents.
EMPLOYEE PERSPECTIVE: How do we ensure that TCMH is an exceptional place to work?			
Objective	Measures	Targets	Accomplishments
2. To improve team work within work units, across departments and between	<ul style="list-style-type: none"> • HR metrics provided to the Quality and Risk Management Committee • Resident Quality Inspection results 	<ul style="list-style-type: none"> • Continuous improvement in all areas 	<ul style="list-style-type: none"> • The focus of this year has been staff recruitment and retention as it relates to front line staff and Managers.

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<p>management and front-line staff</p>	<ul style="list-style-type: none"> • Retirement Homes Regulatory Inspection results 		<ul style="list-style-type: none"> • The home completed all the inspection protocols and approximately 60 % of the program evaluations. This enables staff to learn what the MOH is looking for when they are conducting investigations. • On line staff education via Surge Learning demonstrated a 92% compliance to end of 2017, this is a significant improvement given education has not been a focus in the past. • The evacuation exercise in both LTC and RH was completed with very positive results. • Continued to work on building a cohesive team with our Pharmacy. This year our partnership with the Pharmacy has improved our quality indicator to reduce the use of antipsychotic medications. • The Pharmacist has been an integral member of our Professional Advisory Committee and managing medication errors. • Continue to strengthen our partnership with Sienna. Utilize their skills and resources to help guide our operations. Continue to refine policy development and post for staff access. • Three registered staff participated in the Humber assessment course and three completed the 3M wound care program.
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INTERNAL PERSPECTIVE: How will we sustain our ability to change and improve?			
Objective	Measures	Targets	Accomplishments
3. To reduce staff attrition, use of agency staff, and costs for staff overtime	<ul style="list-style-type: none"> • HR metrics provided to the Quality and Risk Management Committee 	<ul style="list-style-type: none"> • To reduce staff attrition to less than 10% • To reduce use of agency staff to less than 25% of the 2016-17 fiscal year • To reduce staff overtime costs by 25% from the 2016-17 fiscal year 	<ul style="list-style-type: none"> • Following the departure of the summer students, the home received several resignations. This created an environment where we were faced with a critical shortage of staff. • Agency use, and overtime were used extensively to enable us to maintain safe staffing levels. Despite this, the Home continued to be short staffed on each shift which prompted a report to the LHIN and the Ministry of health.
PHYSICAL AND FINANCIAL PERSPECTIVE: How will we ensure that our physical assets are maintained and that we are financially sustainable?			
Objective	Measures	Targets	Accomplishments
4. To ensure the financial sustainability of Nithview Community	<ul style="list-style-type: none"> • 2017-18 budget • 2017-18 financial results 	<ul style="list-style-type: none"> • To prepare a balanced budget for the year • To achieve a small surplus for the fiscal year 	<ul style="list-style-type: none"> • Various expenses in this year exceeded our budgetary allocations such as arbitration and legal expenses. • Two former Managers sought financial awards for constructive dismissal however we were able to abate these claims with only a few legal charges through consultation with our Lawyer. • The once-a-year staff education payout grossed approximately \$41K, this is a new expense as this level of education has not been achieved in the past. The home met its obligations with regards to mandatory training. • Additional staffing was also used to manage the outbreak in October and to perform the flu shots for residents and staff.

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			<ul style="list-style-type: none">• With budget projections communicated to us regarding budget being in a positive state or close to margins, and the absence of financial statements, it was a difficult task to determine accurate fiscal accountability. We welcome better oversight in this area with improved communication.
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Summary

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RESIDENT/CLIENT PERSPECTIVE: How do we ensure that all our division is an exceptional place to live for our residents and clients?	
1. Develop customer service standards for IT services	Green
EMPLOYEE PERSPECTIVE: How do we ensure that TCMH is an exceptional place to work?	
2. Providing clear communication to the Divisions	Red
3. Talent engagement	Green
INTERNAL PERSPECTIVE: How will we sustain our ability to change and improve?	
4. Complete Management Information Systems	Red
5. Efficient Reporting	Red
PHYSICAL AND FINANCIAL PERSPECTIVE: How will we ensure that our physical assets are maintained and that we are financially sustainable?	
6. Develop best practice service standards with external stakeholders	Green
7. Increase building efficiency	Green

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RESIDENT/CLIENT PERSPECTIVE: How do we ensure that all our division is an exceptional place to live for our residents and clients?			
Objective	Measures	Targets	Accomplishments
1. Develop customer service standards for IT services	<ul style="list-style-type: none"> • Increase in resident satisfaction • Decrease in wait times for IT requests and assistance 	<ul style="list-style-type: none"> • Working with Blackcreek, establish service standards for resident wait times for IT concerns 	<ul style="list-style-type: none"> • A service contract was entered into with Blackcreek Technologies to provide support for all of TCMH's telecommunications. • The contract included service standards and led to significant improvements in our customer service. • It continues to be a challenge working with Rogers and Bell from whom we purchase the basic services. • During the year we were able to provide enhanced telecommunications for the residents of Nithview Village by adding Wi-Fi and telephone service.
EMPLOYEE PERSPECTIVE: How do we ensure that TCMH is an exceptional place to work?			
Objective	Measures	Targets	Accomplishments
2. Providing clear communication to the Divisions	<ul style="list-style-type: none"> • Increase in employee satisfaction • Increase in overall understanding of the processes that are occurring at the Corporate level 	<ul style="list-style-type: none"> • Increased knowledge on roles and responsibilities in Corporate Services 	<ul style="list-style-type: none"> • Customer service standards were developed for Finance, HR, and Facilities Services. • The recruitment processes were streamlined which enabled us to reduce substantially the total length of time for the recruitment cycle, (i.e. from the identification of a vacancy through recruitment and selection to a confirmed hire).
3. Talent Engagement	<ul style="list-style-type: none"> • Recognizing the skills and attributes that all our current employees have • Encouraging all employees to bring forward ideas or 	<ul style="list-style-type: none"> • Recognize employees for their contributions and suggestions • Devise a plan to implement suggestions from employees when the 	<ul style="list-style-type: none"> • Employee forums were held in the spring and fall in both New Hamburg and Stratford to encourage input from staff and to provide communication about TCMH plans and

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	<p>suggestions to help better TCMH</p> <ul style="list-style-type: none"> • Provide opportunities for feedback from all employees 	<p>suggestion is going to benefit the organization</p>	<p>activities. The forums were held throughout the day to facilitate attendance for staff from all shifts.</p> <ul style="list-style-type: none"> • Additional forums were held for unusual issues of major significance, i.e. changes to benefit plans. • Divisions were notified when long service milestones are reached so that these achievements could be celebrated.
INTERNAL PERSPECTIVE: How will we sustain our ability to change and improve?			
Objective	Measures	Targets	Accomplishments
4. Complete management Information Systems	<ul style="list-style-type: none"> • Complete Microsoft Dynamics (NAV) for all three divisions and Corporate Services 	<ul style="list-style-type: none"> • To provide training and educational opportunities to the management teams in all three divisions • To go live with NAV financials for July 1, 2017 • To go live with NAV HR for October 1, 2017 	<ul style="list-style-type: none"> • Financial component of NAV went live November 2017, but at year end additional work was still required to provide reports to managers. • Human Resources component of NAV was on hold at year end due to the need for more configuration and re-configuration.
5. Efficient Reporting	<ul style="list-style-type: none"> • Timely reporting to the Ministries • Timely and meaningful reports can be sent to decision makers 	<ul style="list-style-type: none"> • To be determined once NAV has been implemented 	<ul style="list-style-type: none"> • The delays in the implementation of NAV has resulted in an inability to provide timely and meaningful reports to decision makers. This will be a high priority for 2018-19.
PHYSICAL AND FINANCIAL PERSPECTIVE: How will we ensure that our physical assets are maintained and that we are financially sustainable?			
Objective	Measures	Targets	Accomplishments
6. Develop best practice service standards with external stakeholders	<ul style="list-style-type: none"> • Streamline purchase services • Negotiate contracts with current external stakeholders • Use comparative data to create benchmarks 	<ul style="list-style-type: none"> • Decrease the number of cheques written to various vendors • Provide a continuity of care for the organization by having fewer main purchase service agreements • Revise, implement and negotiate current 	<ul style="list-style-type: none"> • Most vendors now invoice TCMH electronically and approximately 2/3 are paid through Electronic Funds Transfers. Monthly cheques have been reduced from about 375 to 110 per month. • Work is continuing to consolidate accounts from

TCMH CORPORATE SERVICES ANNUAL REPORT – APRIL 1, 2017 to MARCH 31, 2018

		agreements with service providers divisions	<p>vendors, e.g. Union Gas, Rogers, Bell, to streamline processing and payments.</p> <ul style="list-style-type: none"> • Contracts for telephone services at Greenwood and Nithview and been renegotiated through Costek to reduce costs. Costek is continuing to negotiate reduced rates for Wi-Fi and cable TV.
7. Increase building efficiency	<ul style="list-style-type: none"> • Decrease in electrical bills 	<ul style="list-style-type: none"> • Completion by March 31, 2018 	<ul style="list-style-type: none"> • Electrical and other utility bills have remained constant, or decreased slightly, despite increases in costs from utilities. • Savings are due to scrutiny of electrical bills to identify errors in overbilling; locking in fixed rates for supply of natural gas; installation of more energy efficient mechanical and electrical equipment.

TCMH ANNUAL BUSINESS PLAN – APRIL 1, 2018 TO MARCH 31, 2019

35. For I was hungry and you gave me something to eat, I was thirsty And you gave me something to drink, I was a stranger and you invited me in,
36. I needed clothes and you clothed me, I was sick and you looked after me, I was in prison and you came to visit me.
37. Then the righteous will answer him, 'Lord, when did we see you hungry and feed you, or thirsty and give you something to drink?
38. When did we see you a stranger and invite you in, or needing clothes and clothe you?
39. When did we see you sick or in prison and go to visit you?'
40. The King will reply, 'Truly I tell you, whatever you did for one of the least of these brothers and sisters of mine, you did for me.'

Matthew 25:35-40

Introduction

- The Tri-County Mennonite Homes' (TCMH) Annual Business Plan shows the performance objectives that have been set for each TCMH division. These performance objectives are used to translate our mission, vision and values into concrete goals and actions for the current year.
- Each performance objective is intended to be clear, specific, realistic and measurable.
- The Annual Business Plan covers from April 1, 2018 to March 31, 2019, to align with our fiscal year.
- The performance objectives have been designed to balance resident/client-defined quality, employee empowerment, continuous improvement and financial sustainability by focusing on these four questions:
 1. How do we ensure that all our divisions are exceptional places to live for our residents and clients?
 2. How do we ensure that TCMH is an exceptional place to work?
 3. How will we sustain our ability to change and improve?
 4. How will we ensure that our physical assets are maintained and that we are financially sustainable?
- The TCMH operational objectives and the managers' performance objectives are readily available to residents, clients, staff, community partners and other stakeholders on the TCMH website and through other media.

CEO ANNUAL BUSINESS PLAN – APRIL 1, 2018 to MARCH 31, 2019

RESIDENT/CLIENT PERSPECTIVE: How do we ensure that all our divisions are exceptional places to live for our residents and clients?			
Objective	Measures	Targets	Initiatives
1. To expand our services for the broader fulfillment of our mission	<ul style="list-style-type: none"> • Market demand of prospective residents and clients for accommodation and services • Feasibility studies for the costs and benefits of each potential project 	<ul style="list-style-type: none"> • Identification and prioritization of development and redevelopment projects • Business plans for each project identified as a high priority 	<ul style="list-style-type: none"> • Review and evaluate our current wait lists • Literature review of demographic data to assess future demand • Assessment of capital costs • Assessment of impact on operating budgets • Assessment of alternatives for financing • ROI calculations
EMPLOYEE PERSPECTIVE: How do we ensure that TCMH is an exceptional place to work?			
Objective	Measures	Targets	Initiatives
2. To capitalize on the skills and knowledge of our staff by encouraging their input	<ul style="list-style-type: none"> • Formal channels for on-going staff input • Informal channels for on-going staff input 	<ul style="list-style-type: none"> • A formal structure for staff input on how to make TCMH a better place to live and work • Enhanced informal channels for staff input 	<ul style="list-style-type: none"> • Assess effectiveness of current channels • Review purpose and structure of staff associations and similar formal bodies
INTERNAL PERSPECTIVE: How will we sustain our ability to change and improve?			
Objective	Measures	Targets	Initiatives
3. To develop a balanced scorecard to benchmark and measure TCMH performance and improvement	<ul style="list-style-type: none"> • Resident satisfaction • Employee engagement • Internal processes • Financial, physical and environmental sustainability 	<ul style="list-style-type: none"> • Benchmarks of current performance • Set short term and medium terms targets for continuous improvement 	<ul style="list-style-type: none"> • Review scorecards and dashboards for other organizations in our sectors • Identify the most useful data to measure for each of the four perspectives • Determine what data is readily available • Select the most useful measurements
PHYSICAL AND FINANCIAL PERSPECTIVE: How will we ensure that our physical assets are maintained and that we are financially sustainable?			
Objective	Measures	Targets	Initiatives
4. To develop a strategy and framework for a capital fundraising campaign	<ul style="list-style-type: none"> • Feasibility of a capital campaign • Evaluation of alternatives, e.g. donations, gifts in kind, interest-free loans, etc. 	<ul style="list-style-type: none"> • Establishment of a capital campaign team, plan, budget and goals 	<ul style="list-style-type: none"> • Review best practices for fundraising in our sector • Review successes and failures of previous campaigns • Identify potential competitive campaigns in our region and sectors

ALDAVIEW SERVICES ANNUAL BUSINESS PLAN – APRIL 1, 2018 to MARCH 31, 2019

RESIDENT/CLIENT PERSPECTIVE: How do we ensure that all our divisions are exceptional places to live for our residents and clients?			
Objective	Measures	Targets	Initiatives
1. To ensure services and supports promote independence and self-determination for clients	<ul style="list-style-type: none"> • Evidence based assessments • Evaluate past experience and identify gaps for learnings • Support strategies directly reflect individuals needs as identified by the individual 	<ul style="list-style-type: none"> • Identify independent living skills • Focus on an employment/business opportunity • Increase natural supports and community inclusion 	<ul style="list-style-type: none"> •
EMPLOYEE PERSPECTIVE: How do we ensure that TCMH is an exceptional place to work?			
Objective	Measures	Targets	Initiatives
2. To continue to develop a healthy quality work life culture	<ul style="list-style-type: none"> • Employee survey shows increase in satisfaction • Staff requests/follow up • Involvement of Committee in workplace 	<ul style="list-style-type: none"> • On-going staff appreciation initiatives throughout the year • Staff feeling valued for their contributions • Schedules are a fit for staff and supported individuals • Effective Quality Work Life Committee within the workplace 	
INTERNAL PERSPECTIVE: How will we sustain our ability to change and improve?			
Objective	Measures	Targets	Initiatives
3. To use resources mindfully, with a focus on the environment	<ul style="list-style-type: none"> • Reduction in waste • Decrease in supplies/costs • Placing support hours where supports needed 	<ul style="list-style-type: none"> • Recycle programs • Green bin / composting • Use of garden spaces • The agency is a good steward of resources 	<ul style="list-style-type: none"> •
PHYSICAL AND FINANCIAL PERSPECTIVE: How will we ensure that our physical assets are maintained and that we are financially sustainable?			
Objective	Measures	Targets	Initiatives
4. To roll out a fundraising project	<ul style="list-style-type: none"> • Money raised • Attendance at an event • Project goal met 	<ul style="list-style-type: none"> • Raise funds to meet a project goal identified across the agency as a need 	<ul style="list-style-type: none"> •
5. To ensure financial sustainability	<ul style="list-style-type: none"> • Financial statements • Budget 	<ul style="list-style-type: none"> • Meet 2018-19 financial targets as set in the 2018-19 budget 	<ul style="list-style-type: none"> •

GREENWOOD COURT ANNUAL BUSINESS PLAN – APRIL 1, 2018 to MARCH 31, 2019

See legend at end of report

RESIDENT/CLIENT PERSPECTIVE: How do we ensure that all our divisions are exceptional places to live for our residents and clients?			
Objective	Measures	Targets	Initiatives
1. To enhance the Resident admission process in Long Term Care and Retirement areas	<ul style="list-style-type: none"> • LTC Resident and Family survey results 2017 • Admission Survey • Family satisfaction at admission care conference in LTC • Verbal satisfaction in Retirement Home • Discharge survey results 	<ul style="list-style-type: none"> • Resident & Family response post admission • >80% resident satisfaction on LTC resident admission audit • 100% review of all admission material including LTC contracts • Complete an audit of Long Term Care resident files by year end 	<ul style="list-style-type: none"> •
2. To continue to enhance Volunteer engagement at GWC	<ul style="list-style-type: none"> • Invite Board Members to participate in GWC events • Connect with present volunteers and celebrate their accomplishments • Participation in the TCMH 50th Anniversary week of events 	<ul style="list-style-type: none"> • Offer one large volunteer celebration in April • Redesign the GWC website for ease of volunteer applications • Review and redesign the volunteer policies including on-boarding and handbook • Host a volunteer / employee 50th Anniversary event day • Engage and inform our community of the 50th Anniversary events 	<ul style="list-style-type: none"> •
EMPLOYEE PERSPECTIVE: How do we ensure that TCMH is an exceptional place to work?			
Objective	Measures	Targets	Initiatives
3. Ensure GWC provides a dynamic work environment and culture of continuous learning	<ul style="list-style-type: none"> • Knowledgeable staff working at GWC • On-going professional development • Flexible scheduling to accommodate the staff members 	<ul style="list-style-type: none"> • Work with IT provider to address staff room messaging – outstanding from 2017/18 • Increased staff satisfaction on next employee survey • Evaluation on-boarding program developed in 2017 • % completion of employee handwashing audits • On-going staff appreciation initiatives throughout the year • Upload Home policies to new web-based platform • Redesign of laundry and review environmental 	<ul style="list-style-type: none"> •

GREENWOOD COURT ANNUAL BUSINESS PLAN – APRIL 1, 2018 to MARCH 31, 2019

See legend at end of report

		practices and staff process once completed	
4. Excellent people positioning for the future	<ul style="list-style-type: none"> • Continue to provide opportunities for students from colleges and universities • Maintain relationships and connections to support community placements • Ensure career growth opportunities, succession planning and leadership development • Recruit and retain the right people 	<ul style="list-style-type: none"> • Develop innovative strategies for recruitment working with colleges and job grants • Develop capacity within the home through “Surge Learning” for education and policy awareness • Engage in free learning opportunities from stakeholders such as MOH, LHIN, ORCA 	•
INTERNAL PERSPECTIVE: How will we sustain our ability to change and improve?			
Objective	Measures	Targets	Initiatives
5. Actively engage in research and apply best practices to achieve quality of life for residents	<ul style="list-style-type: none"> • Uphold mandate for Nurse practitioner funded by the MOHLTC • Participate in best practice engagements through the LHIN and MOH & LTC • Patient First Legislation 	<ul style="list-style-type: none"> • Continue to partner with Nurse Practitioner through Greenwood Court and Knollcrest Lodge • Work with MOHLTC funded Nurse Practitioner to advance GWC best practices • Seek out opportunities for research involving Greenwood 	•
6. To continue implementation of innovative quality care and service for GWC residents	<ul style="list-style-type: none"> • Increased data quality of LTC resident • Increased awareness of BSO and recreation programs (Family Survey 2019) • LSAA Agreements • HQO – Quality Plan 2018-2019 • ORCA engagement on member website • Seasons Care resident audits in LTC & RHA areas 	<ul style="list-style-type: none"> • Improved CMI for home • Increased restorative programs for residents • Continue development of Point Click Care system for therapeutic tracking of programs • Number of informed families at care conference by sharing data • Introduce new dementia programs – such as Java Memory Care and Godly Play 	•

GREENWOOD COURT ANNUAL BUSINESS PLAN – APRIL 1, 2018 to MARCH 31, 2019

See legend at end of report

		<ul style="list-style-type: none"> • Use our 2018-2019 QIP submitted to Health Quality Ontario as a living measurement tool for quality. This tool speaks to wound management, resident experience, safe care, and medication safety • Implementation of a LTC hydration program • Investigate menu management programs for food service and menu enhancement • Participation in ORCA knowledge learning center for best practises in Retirement Living • Completion of LSSA commitment of French Language and Indigenous Learning 2018-2019 	
PHYSICAL AND FINANCIAL PERSPECTIVE: How will we ensure that our physical assets are maintained and that we are financially sustainable?			
Objective	Measures	Targets	Initiatives
7. Meet budget expectations	<ul style="list-style-type: none"> • TCMH Board financial committee approval • Capital budget • Benchmark competitor pricing in Retirement Living 	<ul style="list-style-type: none"> • Review monthly statements and variances • Embark with Financial Department the upgraded PCC system for resident reports (i.e. N3, N1 and Tax notices) • Leadership Team to gain enhanced knowledge of financial systems • Seek opportunities to increase revenues through new programs or services • Efficiency gained through replacement of thermostat's on first apartment area • Build and develop GWC Laundry Department Spring 2018 	<ul style="list-style-type: none"> •

GREENWOOD COURT ANNUAL BUSINESS PLAN – APRIL 1, 2018 to MARCH 31, 2019

See legend at end of report

LEGEND

Acronym	Description	Acronym	Description
LSAA	Long-Term Care Home Service Accountability Agreement	RHA	Retirement Home Act
BSO	Behaviour Supports Ontario	OTN	Ontario Telemedicine Network
MOH & LTC	Ministry of Health & Long-Term Care	SWLHIN	South West Local Health Integration Network
QIP	Quality Improvement Plan	PCC	Point Click Care <i>(computer software used of clinical chart and financial)</i>
HQO	Health Quality Ontario	RAI-MDS	Resident Assessment Instrument- Minimum Data Set <i>(is the standardized assessment tool for admission, quarterly, significant change in health status and annual assessments for each resident)</i>
NP	Nurse Practitioner <i>(FYI at GWC we share a NP with Knollcrest as a special funded opportunity)</i>	PAC	Professional Advisory Committee <i>(Internal committee with Care Partners – Medical Advisory, Pharmacist, Public Health, Dietitian, Restorative and our leadership)</i>
ORCA	Ontario Retirement Communities Association	CMI	Case Mix Index – <i>a measurement for funding in Long Term Care</i>

NITHVIEW COMMUNITY ANNUAL BUSINESS PLAN – APRIL 1, 2018 to MARCH 31, 2019

RESIDENT/CLIENT PERSPECTIVE: How do we ensure that all our divisions are exceptional places to live for our residents and clients?			
Objective	Measures	Targets	Initiatives
1. To adapt to the evolving needs of our residents in Long-Term Care by providing a safe, secure and comfortable home for both the cognitively well and the cognitively unwell	<ul style="list-style-type: none"> • LTC Residents' Satisfaction surveys • Family Satisfaction surveys • Number of Critical Incident reports for LTC • Quality indicator scores • MOHLTC inspections with no orders • Sustainable recruitment and retention of staff 	<ul style="list-style-type: none"> • Continuous improvement in publicly reported Quality indicators • Improve and sustain improvements outlined on our QIP • Meet LSAA commitments • Improve and sustain mandatory MOHLTC programs • Financial viability • Decrease risk level with the MOHLTC 	<ul style="list-style-type: none"> •
EMPLOYEE PERSPECTIVE: How do we ensure that TCMH is an exceptional place to work?			
Objective	Measures	Targets	Initiatives
2. To improve team work within work units, across departments and between management and front-line staff	<ul style="list-style-type: none"> • HR metrics provided to the Quality and Risk Management Committee • Resident Quality Inspection results • Retirement Homes Regulatory Inspection results 	<ul style="list-style-type: none"> • Maintain accountability framework • Staff education and skills development • Secure staff to maintain continuity and team building • Continue with culture transformation 	<ul style="list-style-type: none"> •
INTERNAL PERSPECTIVE: How will we sustain our ability to change and improve?			
Objective	Measures	Targets	Initiatives
3. To reduce staff attrition, use of agency staff and costs for staff overtime	<ul style="list-style-type: none"> • HR metrics provided to the Quality and Risk Management Committee 	<ul style="list-style-type: none"> • To reduce staff attrition to less than 10% • To reduce use of agency staff to less than 25% of the 2017-18 fiscal year • To reduce staff overtime costs by 25% 	<ul style="list-style-type: none"> •
PHYSICAL AND FINANCIAL PERSPECTIVE: How will we ensure that our physical assets are maintained and that we are financially sustainable?			
Objective	Measures	Targets	Initiatives
4. To ensure the financial sustainability of Nithview Community	<ul style="list-style-type: none"> • 2017-18 budget • 2017-18 financial results 	<ul style="list-style-type: none"> • To provide the Directors with regular financial reports and strategies for cost containment • Mitigate staff layoffs • Maintain or improve CMI 	<ul style="list-style-type: none"> •

NITHVIEW COMMUNITY ANNUAL BUSINESS PLAN – APRIL 1, 2018 to MARCH 31, 2019

		<ul style="list-style-type: none">• Meet 2018-19 financial targets as set in the 2018-2019 budget	
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CORPORATE SERVICES ANNUAL BUSINESS PLAN – APRIL 1, 2018 to MARCH 31, 2019

RESIDENT/CLIENT PERSPECTIVE: How do we ensure that all our divisions are exceptional places to live for our residents and clients?			
Objective	Measures	Targets	Initiatives
1. To increase resident satisfaction with telecommunications	<ul style="list-style-type: none"> • Resident Satisfaction surveys • Family Satisfaction surveys 	<ul style="list-style-type: none"> • Continuous improvement 	<ul style="list-style-type: none"> • Analyse Maintenance Care tickets to evaluate response times, identify recurring issues, etc. • Analyse complaints about telecommunications • Develop and implement preventative and corrective measures
EMPLOYEE PERSPECTIVE: How do we ensure that TCMH is an exceptional place to work?			
Objective	Measures	Targets	Initiatives
2. To improve customer satisfaction with Corporate Services	<ul style="list-style-type: none"> • Customer Service standards • Customer Satisfaction survey 	<ul style="list-style-type: none"> • Continuous improvement 	<ul style="list-style-type: none"> • Analyse results of 2017 Customer Satisfaction survey • Implement appropriate preventative and corrective measures • Conduct new survey in October 2018
3. To ensure fairness and competitiveness in our compensation policies and practices	<ul style="list-style-type: none"> • A standard format for job descriptions of all positions • Job evaluations • Market analysis • Pay equity analysis 	<ul style="list-style-type: none"> • Updated job descriptions by December 2018 • Completion of market analysis and job evaluations by February 2019 • Updated compensation grid and completion of pay equity analysis by March 2019 	<ul style="list-style-type: none"> • Develop a standard format for job descriptions • Review job requirements for each position with hiring managers • Evaluate all positions using the updated job descriptions • Complete a market survey for similar positions in our sectors • Update compensation grid as appropriate • Retain an external consultant to conduct a pay equity analysis
INTERNAL PERSPECTIVE: How will we sustain our ability to change and improve?			
Objective	Measures	Targets	Initiatives
4. To complete implementation of NAV Financial and NAV HR	<ul style="list-style-type: none"> • Enhanced reports from NAV financial • Implementation of NAV HR 	<ul style="list-style-type: none"> • Fully functional NAV Financial • Fully functional NAV HR 	<ul style="list-style-type: none"> • Liaise with Sparkrock to complete NAV HR • Collaborate with EDs to determine their needs

CORPORATE SERVICES ANNUAL BUSINESS PLAN – APRIL 1, 2018 to MARCH 31, 2019

5. To provide timely and meaningful reports to internal and external customers	<ul style="list-style-type: none"> • Compliance with deadlines of government ministries and agencies • Customer Satisfaction surveys 	<ul style="list-style-type: none"> • All reports to government ministries and agencies submitted on time • All reports to internal customers completed as set out in customer service standards 	<ul style="list-style-type: none"> • Identify due dates for all government reports • Diarize milestones required to achieve compliance • Collaborate with EDs to determine their needs for reports from Corporate Services
PHYSICAL AND FINANCIAL PERSPECTIVE: How will we ensure that our physical assets are maintained and that we are financially sustainable?			
Objective	Measures	Targets	Initiatives
6. To improve our budgeting process	<ul style="list-style-type: none"> • Operating and capital budgets • Monthly financial reports • Year end financial reports 	<ul style="list-style-type: none"> • Balanced operating budgets • Monthly financial results meet or exceed budget expectations or corrective actions taken • Year end financial results meet or exceed budget expectations 	<ul style="list-style-type: none"> • Collaborate with operating divisions on their needs • Collaborate with the Finance and Audit Committee on their expectations • Review reporting requirements of MOHLTC, MCSS, etc. • Review best practices in our sectors • Implement policies, procedures and practices to meet the needs of all stakeholders
7. To develop an effective process for managing cash flow	<ul style="list-style-type: none"> • Adequate working capital • Timely repayment of commercial long-term debt • Timely repayment of promissory notes as required by note holders 	<ul style="list-style-type: none"> • Appropriate cash resources to meet all financial obligations in a timely manner • Retirement of all long-term debt in an orderly manner 	<ul style="list-style-type: none"> • Analyze cash requirements based on previous years • Analyze current year's budgets • Evaluate needs for capital, debt repayment, etc.
8. To develop a new five-year plan for capital expenditures	<ul style="list-style-type: none"> • Reports on the status of our major building elements • Reports on the status of our major pieces of equipment • Capital needs of all departments of all divisions 	<ul style="list-style-type: none"> • Completion by December 31, 2019 	<ul style="list-style-type: none"> • Collaborate with other divisions to determine their capital needs • Complete integrity studies for our facilities • Identify energy and cost saving initiatives

TCMH MEMBER RELATIONS REPORT

2018 Annual General Meeting

Frank Deutsch, Director of Corporate Services

Each year Tri-County Mennonite Homes receives support for our mission through members and friends who donate their time and money. Not only do we use all the government funding we receive to support our residents and clients, the contributions you provide help us to fulfill our unique mission and allow us to provide leadership in service to the clients, residents, and families that we serve.

VOLUNTEERS

Tri-County Mennonite Homes is blessed with many volunteers who generously support us with their time. The lives of our residents and clients are greatly enhanced because of their dedication to our organization. Our volunteers assist with meals, serve in our tea room and our café, host Christmas parties, porter residents, organize the church and garden clubs, operate the general store, visit residents, provide entertainment and more. With the help of our volunteers we provide many additional services that would not otherwise be available to our residents and clients.

DONATIONS

Donations of money and time enable us to enhance the quality of care we provide beyond what can be provided solely from government funding. Tri-County Mennonite Homes is a registered charity with the Canada Revenue Agency so all financial donations are receipted for tax purposes. We received donations from many generous supporters who provided funds to help us improve our services. In 2017/18 we received approximately \$104,000 in financial donations.

All of the money donated to Tri-County Mennonite Homes is used to support the programs we offer to the seniors and developmentally disabled people we serve. TCMH was pleased to disburse over \$44,000 this year in charitable distributions towards programs and equipment to enhance resident and client experience. Most notably, Aldaview new kitchen at one of the homes, Greenwood sleep chair, and Greenwood music program. As well, the Nithview and Greenwood Chapels combined to disburse over \$42,000 to support other eligible Charities.

The gifts that are provided through charitable donations add significantly to the quality of life and level of care for the people served by Tri-County Mennonite Homes. We thank all our supporters who have generously donated.

PROMISSORY NOTE PROGRAM

In addition to the funds we receive from charitable giving Tri-County Mennonite Homes is fortunate to have individuals and companies who approach us and offer to lend us money to fulfill our mission. The Promissory Note Program is a great way to support the Tri-County Mennonite Homes mission in addition to, or instead of charitable giving. Those who support us with money on loan receive an interest rate at a premium over bank GIC rates, and at the same time they are supporting a worthy cause.

The rates of return and the stability of this program have been of benefit to both Tri-County Mennonite Homes and those who have participated by lending us funds for our work. We are very appreciative of the support and confidence expressed by those who invest with us.

As TCMH strives to achieve our strategic priorities of redevelopment and expansion, our donors and investors will play an important role in successfully achieving our goals.

Thank you to all members and friends who have supported us with their time and money.

TCMH BOARD TREASURER'S REPORT

2018 Annual General Meeting

Lloyd Koch, Treasurer

Our auditors, Charles Seebach CA Professional Corporation, completed their audit as at March 31, 2018. In their opinion the financial statements present fairly in all material respects, the financial position of Tri-County Mennonite Homes as at March 31, 2018 in accordance with Canadian accounting standards for Not-for-Profit Organizations.

Total revenue for the year was \$19,618,537, this was \$688,348 higher than the previous year. The most significantly increase in revenue was related to Residents revenue in the amount of \$618,441. Total expenditures ended up at \$20,602,952, this increased from the previous year by \$653,960. The most significant increase in expenditures was related to Residents nursing and medical in the amount of \$384,888.

Tri-County Mennonite Homes has experienced significant deficits over the last few years. Rising costs in the Long-Term Care portion of the business is the main driver of these deficits. The TCMH Board and leadership are currently formulating a plan to achieve a balanced position.

NOMINATING COMMITTEE REPORT 2018 Annual General Meeting

The 201/18 Nominating Committee, which includes Linda Shantz (Current Board Member and Nominating Committee Chair), Brenda Howorth (Current Board Chair), Stephen Yantzi (Current Board Vice Chair) Dwight Steinman, Larry Erb (Previous Board member) and Steve Lichty (CEO), will present their report at the September 18th Annual General Meeting.

Note: The three-year term was created to fill a vacancy. The normal board term is four years.

2018 AGM - TRI-COUNTY MENNONITE HOMES BOARD OF DIRECTORS (4-year term and *3-year term)

<i>Term Ending</i>	<i>Director Name</i>	<i>Term Being Served</i>
2022	Dave Honderich	(2 nd 4-year term)
2022	Judy Johnson	(2 nd 4-year term)
2022	Debbie Deichert	(1 st 4-year term)
2021	Arlene Hoke	(2 nd 4-year term)
2021	John Lichti	(2 nd 4-year term)
2021	Lloyd Koch	(1 st 4-year term)
2020	Robert (Bob) Jantzi	(2 nd 4-year term)
2020	Philip Schroeder	(1 st 4-year term)
2020	Stephen Yantzi	(1 st 3-year term)
2019	Janice Gingerich	(2 nd 4-year term)
2019	Linda Shantz	(1 st 4-year term)
2019	Sheryl Crabbe	(1 st 4-year term)
<i>Term Ending</i>		
2018	Brenda Howorth	(2 nd 4-year term)

2017/2018 TCMH Executive Committee

<i>Chair</i>	Brenda Howorth
<i>Vice-Chair</i>	Stephen Yantzi
<i>Secretary</i>	Judy Johnson
<i>Treasurer</i>	Robert (Bob) Jantzi
<i>Board Member</i>	Linda Shantz
<i>Ex Officio</i>	Steve Lichty

TCMH NOMINATING COMMITTEE

Introduction of Debbie Deichert

For TCMH Board of Directors

Debbie Deichert has been the Executive director of the Alzheimer Society of Perth County for the past ten years. Prior to that, she was with the Grey Bruch Huron Perth District Health Council.

She believes in the importance of giving back to the community, both personally and through work. Debbie leads her staff team by example, as she is involved in numerous local health care committees: Co-chair of the Huron Perth Area Provider Table; Co-Chair of the Huron Perth Geriatric Co-Operative; and one of the partner organizations for the three-year Changing Care Project – Connecting the Dots for Caregivers.

Debbie is a strong advocate for the people who receive services from the Society. Always looking for innovative ways to collaborate to make more programming available. She is very proud that the Society was the recipient of the chamber of Commerce Business Excellence Award for Community Service three times in eight years, which is a Chamber record.

Family is very important. Their home is filled with lots of love and laughter and she and her husband, Ron, always welcome – with open arms – their thirteen grandchildren, ranging in age from one to eleven years old.

APPENDIX

Auditors Report and Audited Financial Statements

**TRI-COUNTY MENNONITE HOMES
FINANCIAL STATEMENTS**

For the year ended March 31, 2018

Charles Seebach CA
Professional Corporation

Charles Seebach CA

Professional Corporation

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Baden, Ontario N3A 3J7
T 519-634-8558
F 519-634-8388
Web: www.seebachca.ca

INDEPENDENT AUDITOR'S REPORT

To the Members of Tri-County Mennonite Homes

Report on the Financial Statements

I have audited the accompanying financial statements of Tri-County Mennonite Homes, which comprise the Statement of Financial Position as at March 31, 2018, the Statement of Changes in Net Assets, the Statement of Operations, and Statement of Cash Flows for the year ended March 31, 2018, and a summary of significant accounting policies and other explanatory information.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with Canadian accounting standards for Not-for-Profit Organizations and for such internal control as management determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

My responsibility is to express an opinion on these financial statements based on my audit. I conducted my audit in accordance with Canadian generally accepted auditing standards. Those standards require that I comply with ethical requirements and plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgement, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

I believe that the audit evidence I have obtained is sufficient and appropriate to provide a basis for my qualified audit opinion.


Basis for Qualified Opinion

In common with many not-for-profit organizations Tri-County Mennonite Homes derives revenue from donations and contributions, the completeness of which is not susceptible to satisfactory audit verification. Accordingly, verification of these revenues was limited to the amounts recorded in the records of Tri-County Mennonite Homes. Therefore, I was unable to determine whether adjustments might be necessary to donation revenues, net revenue over expenditures and cash flows from operations for the year ended March 31, 2018, current assets and net assets as at March 31, 2018.

Qualified Opinion

In my opinion, except for the effects of the matter described in the Basis for Qualified Opinion paragraph, the financial statements present fairly, in all material respects, the financial position of Tri-County Mennonite Homes as at March 31, 2018 and of its financial performance and its cash flows for the year ended March 31, 2018 in accordance with Canadian accounting standards for Not-for-Profit Organizations.

Baden, Ontario
July 31, 2018

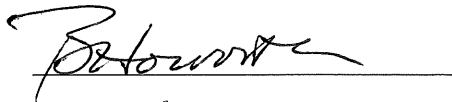

Charles Seebach CA Professional Corporation
Authorized to practise public accounting by
The Institute of Chartered Accountants of Ontario


TRI-COUNTY MENNONITE HOMES
Statement of Financial Position
As at March 31, 2018
(With comparative figures as at March 31, 2017)

ASSETS

			2018	2017
CURRENT				
Cash on hand and in bank - general - Note 9		\$	578,329	\$ 129,350
Accounts receivable - residents			148,855	100,438
Accounts receivable - other			397,793	357,711
Prepaid expenses			172,433	289,375
			<u>1,297,410</u>	<u>876,874</u>
Cash on hand and in bank - trust			2,420	2,583
CAPITAL ASSETS - Note 1, 3, 6	Cost	Accumulated Amortization		
Land	\$ 2,271,603	\$ -	2,271,603	2,271,603
Parking and landscaping	632,282	322,661	309,621	324,443
Buildings	48,535,228	24,409,104	24,126,124	25,287,012
Vehicles and computer equipment	1,402,632	667,716	734,916	325,811
Leasehold improvements	337,988	314,224	23,764	44,596
Equipment and furnishings	6,771,627	3,353,663	3,417,964	3,226,954
Land planning & development costs	419,942	-	419,942	229,904
	<u>\$ 60,371,302</u>	<u>\$ 29,067,368</u>	<u>31,303,934</u>	<u>31,710,323</u>
TOTAL ASSETS			<u>\$ 32,603,764</u>	<u>\$ 32,589,780</u>

APPROVED ON BEHALF OF THE BOARD:

 Board Member

 Board Member

TRI-COUNTY MENNONITE HOMES
Statement of Financial Position - Continued
As at March 31, 2018
(With comparative figures as at March 31, 2017)

LIABILITIES

	2018	2017
CURRENT		
Accounts payable	\$ 950,841	\$ 404,756
Accrued expenses	1,175,662	970,062
Government remittances payable	157,880	41,901
Advance payments - residents	9,427	14,034
Current portion of long term liabilities	3,175,085	3,114,127
	<u>5,468,895</u>	<u>4,544,880</u>
Trust liability	2,420	2,583
LONG TERM LIABILITIES		
Deferred income	12,729,908	12,281,530
Deferred donation revenue	213,213	249,686
Mortgages payable - Note 3	4,608,285	4,864,685
Notes payable - Note 4	5,010,020	5,030,020
	<u>22,561,426</u>	<u>22,425,921</u>
Less: Current portion	3,175,085	3,114,127
	<u>19,386,341</u>	<u>19,311,794</u>
TOTAL LIABILITIES	<u>24,857,656</u>	<u>23,859,257</u>
NET ASSETS		
Net assets invested in capital assets	8,955,721	9,534,087
Unrestricted net assets	(1,209,613)	(803,564)
TOTAL NET ASSETS	<u>7,746,108</u>	<u>8,730,523</u>
TOTAL LIABILITIES AND NET ASSETS	<u>\$ 32,603,764</u>	<u>\$ 32,589,780</u>

TRI-COUNTY MENNONITE HOMES

Statement of Changes in Net Assets

For the year ended March 31, 2018

(With comparative figures for the year ended March 31, 2017)

	Invested in Capital Assets	Unrestricted	Total 2018	Total 2017
Balance, beginning of the year	\$ 9,534,087	\$ (803,564)	\$ 8,730,523	\$ 9,749,326
Net revenue over expenditures	(1,987,820)	1,003,405	(984,415)	(1,018,803)
Change in investment in capital assets	1,409,454	(1,409,454)	-	-
Balance, end of the year	\$ 8,955,721	\$ (1,209,613)	\$ 7,746,108	\$ 8,730,523

TRI-COUNTY MENNONITE HOMES
Statement of Operations
For the year ended March 31, 2018
(With comparative figures for the year ended March 31, 2017)

	2018	2017
<u>Revenue:</u>		
Residents' revenue - provincial subsidies	\$ 9,737,308	\$ 9,658,794
Residents' revenue	9,495,533	8,877,092
Contracts	-	2,331
Donations - Note 5	106,520	100,943
Interest	7,427	17,786
Other revenue	271,749	273,243
	19,618,537	18,930,189
<u>Expenditures:</u>		
Residents' social services	3,022,552	2,920,712
Residents' dietary- Note 1,(c)	2,465,895	2,323,038
Residents' nursing and medical	7,527,724	7,142,836
Residents' housekeeping services	424,121	404,779
Residents' laundry and linen services	219,752	210,236
Property and building costs	2,404,344	2,399,859
Administrative costs	2,262,939	2,222,863
Interest expense	139,373	158,215
Mortgage interest	148,432	153,593
Non-funded respite beds	-	97,687
Amortization - parking area and landscaping	36,861	35,449
Amortization - buildings	1,547,683	1,538,641
Amortization - vehicles and computer equipment	123,516	78,439
Amortization - leasehold improvements	20,834	20,834
Amortization - equipment and furnishings	258,926	241,811
	20,602,952	19,948,992
(NET EXPENDITURES OVER REVENUE) / NET REVENUE OVER EXPENDITURES	\$ (984,415)	\$ (1,018,803)

TRI-COUNTY MENNONITE HOMES
Statement of Cash Flows
For the year ended March 31, 2018
(With comparative figures for the year ended March 31, 2017)

	2018	2017
CASH FLOWS FROM OPERATING ACTIVITIES		
Net expenditures over revenue	\$ (984,415)	\$ (1,018,803)
Items not requiring an outlay of cash:		
Capital asset amortization	1,987,820	1,915,173
Life lease amortization	(576,375)	(558,841)
	427,030	337,529
Net changes in working capital balances:		
Decrease (increase) in accounts receivable	(88,496)	237,275
Decrease (increase) in prepaid expenses	116,942	35,438
(Decrease) increase in accounts payable	546,085	(43,794)
(Decrease) increase in accrued expenses	205,600	(61,658)
(Decrease) increase in government remittances payable	115,979	(191,176)
(Decrease) increase in advance payments - residents	(4,607)	(9,577)
(Decrease) increase in trust liability	(163)	650
(Decrease) increase in deferred income	(34,901)	(32,704)
	1,283,469	271,983
CASH FLOWS FROM FINANCING ACTIVITIES		
Proceeds on life lease contracts	1,914,081	2,491,802
Life lease payouts	(890,899)	(1,046,250)
Decrease (Increase) in Mortgage receivable principal	-	141,968
Mortgage principal repaid net of advances	(256,400)	(790,082)
Notes payable principal repaid net of advances	(20,000)	(754,763)
	746,782	42,675
CASH FLOWS FROM INVESTING ACTIVITIES		
Purchase of capital assets	(1,581,435)	(2,255,372)
	(1,581,435)	(2,255,372)
INCREASE / (DECREASE) IN CASH DURING THE YEAR	448,816	(1,940,714)
CASH, BEGINNING OF YEAR	131,933	2,072,647
CASH, END OF YEAR	\$ 580,749	\$ 131,933
CONSISTING OF		
Cash on hand and in bank	\$ 578,329	\$ 129,350
Cash on hand and in bank - trust	2,420	2,583
	\$ 580,749	\$ 131,933

The accompanying notes are an integral part of these financial statements.

TRI-COUNTY MENNONITE HOMES
Schedule 1 - Divisional Statement of Operations
For the year ended March 31, 2018

	Corporate Services 2018	Nithview Community 2018	Greenwood Court 2018	Aldaview Services 2018	Total 2018
Revenue:					
Residents' revenue - provincial subsidies	-	4,559,463	2,356,180	2,821,665	\$ 9,737,308
Residents' revenue	-	5,386,420	3,749,534	359,579	9,495,533
Donations - Note 5	105,520	935	-	65	106,520
Interest	7,427	-	-	-	7,427
Other revenue	112,535	45,640	113,009	565	271,749
	225,482	9,992,458	6,218,723	3,181,874	19,618,537
Expenditures:					
Residents' social services	-	603,221	239,734	2,179,597	3,022,552
Residents' dietary- Note 1, (c)	-	1,429,187	965,792	70,916	2,465,895
Residents' nursing and medical	-	4,796,399	2,731,325	-	7,527,724
Residents' housekeeping services	-	303,977	120,144	-	424,121
Residents' laundry and linen services	-	156,624	63,128	-	219,752
Property and building costs	518,851	1,075,485	654,291	155,717	2,404,344
Administrative costs	943,000	471,837	332,446	515,656	2,262,939
Interest expense	139,373	-	-	-	139,373
Mortgage interest	148,432	-	-	-	148,432
Amortization - parking area and landscaping	-	18,309	18,461	91	36,861
Amortization - buildings	-	806,902	715,141	25,640	1,547,683
Amortization - vehicles and computer equipment	90,026	20,822	8,905	3,763	123,516
Amortization - leasehold improvements	20,834	-	-	-	20,834
Amortization - equipment and furnishings	1,523	133,909	122,829	665	258,926
	1,862,039	9,816,672	5,972,196	2,952,045	20,602,952
(NET EXPENDITURES OVER REVENUE) /					
NET REVENUE OVER EXPENDITURES	\$ (1,636,557)	\$ 175,786	\$ 246,527	\$ 229,829	\$ (984,415)

TRI-COUNTY MENNONITE HOMES
Schedule 1 - Divisional Statement of Operations
Comparative figures for the year ended March 31, 2017

	Corporate Services 2017	Nithview Community 2017	Greenwood Court 2017	Aldaview Services 2017	Total 2017
Revenue:					
Residents' revenue - provincial subsidies	-	4,629,643	2,266,102	2,763,049	\$ 9,658,794
Residents' revenue	-	4,976,606	3,567,162	333,324	8,877,092
Contracts	-	-	-	2,331	2,331
Donations - Note 5	100,195	748	-	-	100,943
Interest	17,786	-	-	-	17,786
Other revenue	95,991	98,598	77,537	1,117	273,243
	213,972	9,705,595	5,910,801	3,099,821	18,930,189
Expenditures:					
Residents' social services	-	544,907	222,185	2,153,620	2,920,712
Residents' dietary- Note 1(c)	-	1,359,737	894,691	68,610	2,323,038
Residents' nursing and medical	-	4,528,808	2,614,028	-	7,142,836
Residents' housekeeping services	-	285,256	119,523	-	404,779
Residents' laundry and linen services	-	146,221	64,015	-	210,236
Property and building costs	532,429	1,046,413	691,549	129,468	2,399,859
Administrative costs	874,177	528,874	312,366	507,446	2,222,863
Interest expense	158,215	-	-	-	158,215
Mortgage interest	153,593	-	-	-	153,593
Non-funded respite beds	-	-	97,687	-	97,687
Amortization - parking area and landscaping	-	18,364	16,994	91	35,449
Amortization - buildings	-	814,061	698,940	25,640	1,538,641
Amortization - vehicles and computer equipment	39,141	16,707	8,434	14,157	78,439
Amortization - leasehold improvements	20,834	-	-	-	20,834
Amortization - equipment and furnishings	1,523	129,514	110,102	672	241,811
	1,779,912	9,418,862	5,850,514	2,899,704	19,948,992
(NET EXPENDITURES OVER REVENUE) /					
NET REVENUE OVER EXPENDITURES	\$ (1,565,940)	\$ 286,733	\$ 60,287	\$ 200,117	\$ (1,018,803)

TRI-COUNTY MENNONITE HOMES

Notes to the Financial Statements
For the year ended March 31, 2018

PURPOSE OF THE ORGANIZATION:

Tri-County Mennonite Homes is an organization based in New Hamburg, Ontario operating residences and programs for seniors and developmentally challenged individuals. Tri-County Mennonite Homes is incorporated under The Corporations Act (Ontario) as a not-for-profit organization and is a registered charity under the Income Tax Act.

Tri-County Mennonite Homes comprises the following operating divisions (see Schedule 1):

- (a) Corporate Services
- (b) Nithview Community
- (c) Greenwood Court
- (d) Aldaview Services

1. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES:

These financial statements have been prepared in accordance with Canadian accounting standards for not-for-profit organizations and are in accordance with Canadian generally accepted accounting principles.

- (a) The capital assets are recorded at cost and are being amortized on a straight-line basis at the following annual rates:

Building	2.9%	(over 35 years)
Parking area and landscaping	10% - 25%	(over 10 -25 years)
Furniture and equipment	5%-10%	(over 10-20 years)
Leasehold improvements	10%-20%	(over 5-10 years)
Vehicles and computer equipment	10%-20%	(over 5-10 years)

- (b) Replacement equipment, and new equipment eligible for subsidy, have been recorded as an expenditure for the year rather than as an asset and amortized. Total new and replacement equipment reported this way for 2018 is \$108,327 and in 2017 it was \$59,135.
- (c) Provincial funding requirements do not require that inventory be taken into account when determining expenditures for the year, therefore, inventories have not been shown on these financial statements.
- (d) Revenue recognition

Residents' revenue, contracts, and other miscellaneous revenue are recorded when the service is provided. The Ministry of Health and Long-Term Care, which provides long-term care funding to the organization, requires an Annual Long-Term Care Home Overall Reconciliation. If the organization has underspent in any funding envelope, the organization will need to reimburse the Ministry. An estimate of the funding repayable has been made by the organization and a reduction has been made in the funding revenue amount.

Donation revenue is recorded when received except for donations made to major capital projects which are deferred and amortized to match the assets amortization (see - Note 5).

Interest revenue is recognized when earned.

TRI-COUNTY MENNONITE HOMES

Notes to the Financial Statements
For the year ended March 31, 2018

(e) Use of Estimates

The preparation of financial statements in accordance with Canadian Accounting Standards for Not-for-Profit Organizations requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities at the date of the financial statements, and the reported amounts of revenues and expenditures during the reporting period. The organization uses estimates for allowances for bad debts, amortization of capital assets over their useful lives, and accrued expenses (including provincial subsidies). Actual results could differ from management's best estimates as additional information becomes available in the future.

(f) Contributed materials and services

Volunteers contribute many hours per year to assist the organization in carrying out its service delivery activities. Because of the difficulty of determining their fair value, contributed services are not recognized in the financial statements. Contributed materials are not recognized in the financial statements unless they would normally be purchased by the organization and their fair market value can be ascertained.

(g) Financial Instruments

Measurement of financial instruments

The company initially measures its financial assets and liabilities at fair value, except for certain non-arm's length transactions.

The company subsequently measures all its financial assets and liabilities at amortized cost using the effective interest method.

Financial assets measured at amortized cost include accounts receivable, interest receivable, HST receivable, mortgage receivable, and other receivables.

Financial liabilities measured at amortized cost include the accounts payable and accrued liabilities, grant and subsidy overpayments, and deferred income.

Impairment

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

Transaction costs

The company recognizes its transaction costs in net income in the period incurred. However, financial instruments that will not be subsequently measured at fair value are adjusted by the transaction costs that are directly attributable to their origination, issuance or assumption.

TRI-COUNTY MENNONITE HOMES

Notes to the Financial Statements

For the year ended March 31, 2018

2. BANK OVERDRAFT:

The bank overdraft is secured by a general security agreement. Tri-County Mennonite Homes has an authorized line of credit of \$300,000 at prime rate, of which \$300,000 remained unused as at March 31, 2018.

The organization has a revolving term loan due on demand of \$500,000 with interest at prime, of which \$500,000 remained unused as at March 31, 2018. The loan is to assist in funding multiple draws on private notes that cannot be immediately funded from private sources. The loan is secured by a general security agreement.

The organization has a revolving term loan on demand of \$2,000,000 with interest at prime, of which \$1,451,796 remains unused as at March 31, 2018.

TRI-COUNTY MENNONITE HOMES

Notes to the Financial Statements
For the year ended March 31, 2018

3. MORTGAGES AND TERM LOANS PAYABLE

	2018	2017
(a) The term loan is payable to the Kindred Credit Union, New Hamburg, Ontario. It is repayable in monthly instalments of \$37,150, including principal and interest at a rate being charged by the Credit Union on its Variable Rate Loans. The rate charged at March 31, 2018 was 3.45% per annum. Due on demand.	\$ 1,045,219	\$ 1,453,224
(b) The mortgage, split into two portions, is payable to the Kindred Credit Union, New Hamburg, Ontario for the redevelopment of Nithview Home. Subsequent to the year-end, the mortgage was renewed until May 6, 2023.		
(i) One portion of the mortgage is repayable in monthly instalments of \$20,969, including principal and interest at a rate of 3.44% per annum, due May 6, 2018.	1,527,574	1,723,354
(ii) One portion of the mortgage is repayable in monthly instalments of \$20,730, including principal and interest at a rate being charged by the Credit Union on its Variable Rate Loans. The rate charged at March 31, 2018 was 3.45% per annum, due May 6, 2018.	1,487,288	1,688,107
(c) The term loan is payable to the Kindred Credit Union, New Hamburg, Ontario. It is repayable in monthly instalments of \$10,550, including principal and interest at a rate being charged by the Credit Union on its Variable Rate Loans. The rate at March 31, 2018 was 3.45% per annum. Due on demand.	548,204	-
	\$ 4,608,285	\$ 4,864,685

The above mortgage and term loans are secured with:

- Registered General Security Agreement.
- First All Purpose Collateral Mortgage registered over property located at 200 Boullee St., New Hamburg, Ontario registered for \$11,400,000 (NBV \$16,064,163).
- First All Purpose Collateral Mortgage registered over property located at 90 Greenwood Drive, Stratford, Ontario registered for \$2,350,000 (NBV \$10,263,745).
- All shares and payments that are on account at Kindred Credit Union (\$465,138).

TRI-COUNTY MENNONITE HOMES

Notes to the Financial Statements
For the year ended March 31, 2018

3. MORTGAGES AND TERM LOANS PAYABLE (continued)

Repayment of the loans are as follows:	2019	\$ 1,916,196
	2020	318,632
	2021	331,144
	2022	343,812
	2023	356,964
	Subsequent	<u>2,074,590</u>
		\$ 5,341,338
Additional financing after year-end		<u>(733,053)</u>
		<u>\$ 4,608,285</u>

Subsequent to the year-end, the organization renewed the mortgages in (b) above. At that time, the organization also added an additional \$733,053 to the mortgage. The repayments above reflect the terms of the new mortgage. The total mortgage is for \$3,682,000 at a fixed interest rate of 3.79%. Monthly instalments of \$36,861, including principal and interest is due May 6, 2023. The security remains as prior to year-end.

4. NOTES PAYABLE:

	2018	2017
These notes are owing to private individuals with interest rates varying from 2.50% to 4.05% based on the prevailing rates at the time of investment and subsequent renewals.	\$ 5,010,020	\$ 5,030,020

Repayment of the notes are as follows:	2019	\$ 616,000
	2020	351,223
	2021	395,000
	2022	407,390
	2023	613,000
	Demand	<u>2,627,407</u>
		<u>\$ 5,010,020</u>

The demand notes are shown as long term debt as they relate to the acquisition of capital assets, with repayments generally replaced with new notes.

TRI-COUNTY MENNONITE HOMES

Notes to the Financial Statements
For the year ended March 31, 2018

5. DONATIONS:

	2018	2017
Donations received by Tri-County Corporate	\$ 105,311	\$ 96,971
Deferred donations recognized during the year	36,474	36,474
	141,785	133,445
Other disbursements	(35,265)	(32,502)
Net donations revenue	\$ 106,520	\$ 100,943

6. CONTINGENT LIABILITY:

In 2007 the organization received \$150,000 from the Ministry of Community and Social Services to fund the renovation of 140 Waterloo Street, New Hamburg, for Aldaview Services. In the event of a future sale of the premises the organization must return 46%, its proportionate share of the acquisition cost, of the net sale proceeds. As there is no intention to sell the premises and the value of the premises at the potential future sale date cannot be determined an estimate regarding the amount of future liability cannot be determined. Further, the liability will be offset by the actual proceeds on the sale of the premises. Therefore, no liability has been accrued.

Additionally, during 2008 the organization received \$400,000 from the Ministry of Community and Social Services to fund a renovation at Nithview Home for use by Aldaview Services for a period of 30 years. If the organization cannot fulfill its commitment to the Ministry to provide residential accommodations it would be obligated to return a prorated portion of grant monies received. As no conditions currently exist that indicate an inability to fulfill the organization's commitment, no liability has been accrued.

7. FINANCIAL RISKS:

The organization is exposed to various risks through its financial instruments. The following analysis provides a measure of the company's risk exposure and concentrations as at March 31, 2018.

(a) Liquidity risk

Liquidity risk is the risk that an entity will encounter difficulty in meeting obligations associated with financial liabilities.

The organization is exposed to this risk mainly in respect of its long-term debt and accounts payable.

The organization meets its liquidity requirements by preparing and monitoring detailed forecasts of cash flows from operations, anticipating investing and financing activities and holding assets that can be readily converted into cash. The company has a short-term unsecured bank facility in place should it be required to meet temporary fluctuations in cash requirements. Currently the bank facility has not been drawn upon.

There has been no change to the risk exposure from 2017.

(b) Credit risk

Credit risk is the risk that one party to a financial instrument will cause a financial loss for the other party by failing to discharge an obligation.

TRI-COUNTY MENNONITE HOMES

Notes to the Financial Statements
For the year ended March 31, 2018

The organization provides credit to its clients in the normal course of its operations. It maintains provisions for contingent credit losses which, once they materialize, are consistent with management's forecasts. The organization does not normally require a guarantor.

Concentration of credit risk arises when a group of clients have a similar characteristic such that their ability to meet their obligations is expected to be affected similarly by changes in economic or other conditions. As for the accounts receivable, the organization does not run any significant risk with respect to a single client.

There has been no change to the risk exposure from 2017.

(c) Market risk

Market risk is the risk that the fair value or future cash flows of a financial instrument will fluctuate because of changes in market prices. Market risk comprises three types of risk: interest rate risk, currency risk, and other price risk.

(d) Interest rate risk

Interest rate risk is the risk that the fair value or future cash flows of a financial instrument will fluctuate because of changes in market interest rates.

The entity is exposed to interest rate risk on its fixed and floating interest rate financial instruments. Given the current composition of long-term debt (proportion of debt at a fixed interest rate compared to a floating interest rate), fixed-rate instruments subject the entity to a fair value risk while the floating-rate instruments subject it to a cash flow risk. Changes in the bank's prime lending rate can cause fluctuations in interest payments and cash flows. The Company does not use derivative financial instruments to alter the effects of this risk.

There has been no change to the risk exposure from 2017.

(e) Currency risk

Currency risk is the risk that the fair value or future cash flows of a financial instrument will fluctuate because of changes in foreign exchange rates.

The company has no foreign sales and therefore is not currently exposed to currency risk.

(f) Fair value

The fair value of cash, temporary investments, accounts receivable, bank indebtedness, accounts payable, and client deposits is approximately equal to their carrying value due to their short term maturity date. Notes payable on demand with a floating interest rate and its carrying value, as reflected in the financial statements, approximates fair value. Notes payable with a fixed maturity and mortgages payable have a fixed interest rate and its carrying value, as reflected in the financial statements, approximates fair value.

There has been no change to the risk exposure from 2017.

TRI-COUNTY MENNONITE HOMES

Notes to the Financial Statements
For the year ended March 31, 2018

8. CAPITAL RISK MANAGEMENT

The organization's objectives when managing capital are to safeguard the organization's ability to continue as a going concern. Capital is defined by the organization as all general and restricted funds.

The Board's objective is to provide working capital for the organization's operating expenses. Deposits and withdrawals are administered by management and are authorized by Board passage of the annual operating budget.

The organization's objectives when managing externally imposed capital requirements from capital grants received is to safeguard the organization's ability to repay those grants if the externally imposed criteria cannot be met.

The organization's overall strategy with respect to capital risk management remains unchanged from the year ended March 31, 2017.

9. INTERNALLY RESTRICTED FUNDS

The organization has internally restricted a balance as a capital reserve. The Board of Directors must approve any payments made from this fund. At March 31, 2018 the balance is \$333,163.

10. SERVICE CONTRACT/CFSA APPROVAL WITH THE MINISTRY OF COMMUNITY AND SOCIAL SERVICES:

Aldaview Services has a Service Contract/CFSA Approval with the Ministry of Community and Social Services. A reconciliation report summarizes by service (project code), all revenues and expenditures and identifies any resulting surplus or deficit that relates to the Service Contract/CFSA Approval.

A review of these reports show the following services to be in a surplus (deficit) position as at March 31, 2018.

<u>Service Name</u>	<u>Surplus/(Deficit)</u>
Developmental Services Supported Independent Living	\$ (1,228)
Developmental Services Community Participation	(809)
Developmental Services Supported Group Living	(10,897)
Developmental Services Caregiver Respite	(52)

11. COMPARATIVE FIGURES:

Certain figures presented for comparative purposes have been reclassified to conform with the current year's presentation.

TRI-COUNTY MENNONITE HOMES

Notes to the Financial Statements
For the year ended March 31, 2018

12. COMMITMENTS:

Under a Master Service Agreement for internet and ethernet services, the organization is committed to a 60-month agreement beginning in July 2016, for the amount of \$49,680 plus HST per year.

Under a Consulting Service Agreement for partial management consulting services, signed November 10, 2015, the organization is committed to a 36-month agreement beginning in November 2015 for the amount of \$66,000 plus HST.

In 2017 the organization entered into a full-service information technologies support agreement until December 31, 2019 for the amount of \$84,792 plus HST per year.

In 2017 the organization entered into a cable services contract until September 30, 2021. The annual amounts are:

October 1, 2017 to September 30, 2018	\$103,686 plus HST
October 1, 2018 to September 30, 2019	\$106,788 plus HST
October 1, 2019 to September 30, 2020	\$109,989 plus HST
October 1, 2020 to September 30, 2021	\$113,289 plus HST

During the year, the organization accepted a proposal to construct a Cogeneration CHP System at Greenwood Court. The total cost is not to exceed \$595,500 plus HST. As at March 31, 2018, \$300,000 plus HST has been paid.

During the year, the organization signed a Memorandum of Understanding with the Mitchell Nursing Home to purchase three bed licenses for a total of \$75,000. The payment will be made after Mitchell completes its redevelopment with an estimate closing of June 1, 2020.

During the year, the organization accepted a proposal to construct a maintenance shop at Greenwood Court for \$214,817 plus HST.

During the year, the organization accepted a proposal for a laundry room addition at Greenwood Court for \$185,460 plus HST.



Tri-County
Mennonite Homes
Aldaview Services
Greenwood Court | Nithview Community

Making Every Day Matter

Mission, Vision & Values

∞ Our Mission ∞

Making Every Day Matter

∞ Our Vision ∞

Anticipate the needs of seniors and individuals with developmental disabilities and respond with housing, care and supportive services

Challenge and encourage our residents, clients, staff and volunteers to achieve their fullest potential

Be leaders in providing holistic responses to the physical, spiritual, social and emotional needs of our communities

Look at challenges from new angles, respond with curiosity and ingenuity, and implement innovative solutions

Expand all aspects of our services for the broader fulfillment of our mission

∞ Our Values ∞

Compassion: Caring is as important as care.

Respect: Respect is measured by how we treat each other and how we honour the aspirations and choices of each individual.

Trust: We trust each other with both the large and small events of life.

Faith: We demonstrate our Christian faith through our actions.

Stewardship: We are committed to managing responsibly our financial and physical resources, while prioritizing respect for the environment.

Community Minded: Our Mennonite heritage teaches us that, by partnering together, we can achieve more.



**Tri-County
Mennonite Homes**

Aldaview Services
Greenwood Court | Nithview Community

Making Every Day Matter

CORPORATE OFFICE
200 Boullee Street
New Hamburg, ON N3A 2K4
519-662-2718



**Aldaview
Services**

A Division of
Tri-County Mennonite Homes

Making Every Day Matter

ALDAVIEW SERVICES
332 Hamilton Road
New Hamburg, ON N3A 2K2
519-662-5174



**Greenwood
Court**

A Division of
Tri-County Mennonite Homes

Making Every Day Matter

GREENWOOD COURT
90 Greenwood Drive
Stratford, ON N5A 7W5
519-273-4662



**Nithview
Community**

A Division of
Tri-County Mennonite Homes

Making Every Day Matter

NITHVIEW COMMUNITY
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