

**DOANE HOUSE HOSPICE**  
**AGM REPORT 2014**  
**Tuesday, September 9<sup>th</sup>, 2014**

**DOANE HOUSE HOSPICE INC.  
ANNUAL REPORT 2014**

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**DOANE HOUSE HOSPICE  
ANNUAL REPORT 2014**

**AGENDA**

- |   |  |
|---|--|
| 1. Welcome  | Debbie Johnston, President Chair             |
| 2. Approval of 2013 AGM Minutes                     | Debbie Johnston                              |
| 3. Annual Reports                                   | Staff  |
| 4. Financial Report<br>Audited Statements 2013/2014 | Pierre Bonhomme<br>Chaggares & Bonhomme C.A. |
| 5. Motion to Accept Reports                         |  |
| 6. Motion to Retain Auditors<br>2014 / 2015         |  |
| 7. Approval of Policies                             | Debbie Johnston / Juliet Irish               |
| 8. Nominations                                      | Bill Marshall                                |
| 9. Adjournment                                      |  |
| 10. 25 Years Celebration                            | Reflection and Recognition                   |

## **MISSION**

We are dedicated to enhancing quality of life through the provision of non-medical support for those affected by or caring for an individual with a life-threatening illness, and grief and bereavement support for those who are bereaved.

## **VALUES**

Client and Family Centered

Respect

Dignity

Integrity

Community Collaboration

## **VISION**

It is our vision that volunteer hospice care will be accessible to all individuals in our community. We strive to create sustainable programs and services through innovative fund development and volunteerism.

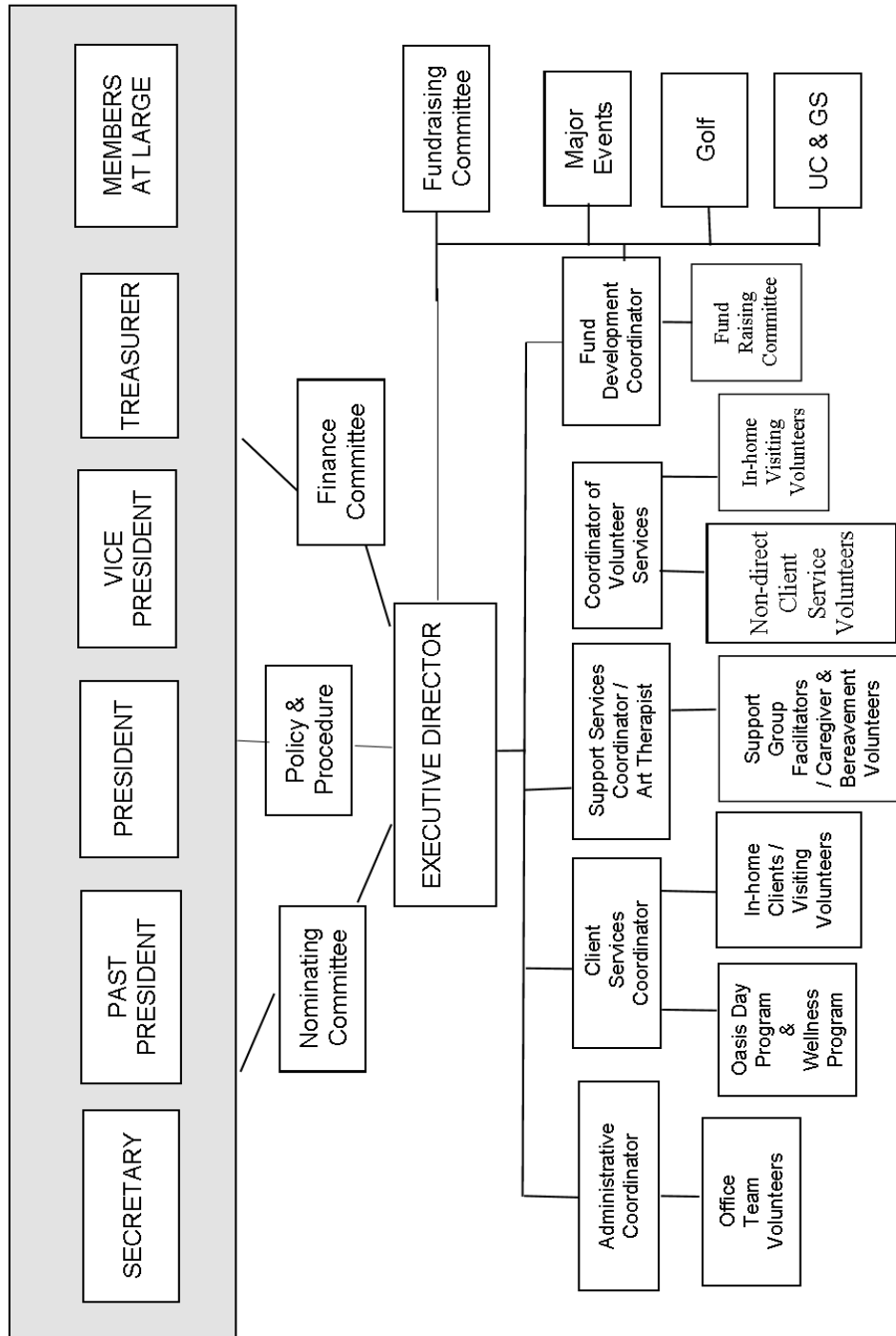
**DOANE HOUSE HOSPICE BOARD MEMBERS  
AGM 2014**

Debbie Johnston	President
Vacant	Vice President
Scott Allan	Treasurer (June 17, 2013)
Bill Marshall	Interim Secretary
Karen Close	Member at Large
Brent Forrester	Member at Large
Dan Carriere	Member at Large
Ruheena Sangrar	Member at Large
Christine Gordon	Member at Large

**DOANE HOUSE HOSPICE STAFF**

Juliet Irish	Executive Director
Jean Anderton	Administrative Coordinator
Alison Jane	Support Services Coordinator / Art Therapist
Cathy Kincaide	Client Services Coordinator
Julie Cruickshank	Fund Development Coordinator

**2013 / 2014 ORGANIZATIONAL CHART**



## **DOANE HOUSE HOSPICE INC. AGM MINUTES**

**Date and Location:** Monday, September 16, 2013 @ Doane House, Newmarket

**Meeting Commenced:** 6:09 pm

Present: Deputy Mayor John Able, Patricia Mosnia, Alison Jane, Jean Anderton, Barb Beamish, Julie Cruickshank, Richard Henniger, Mayor Geoff Dawe, Leslie Everson, Debbie Johnston, Bill Marshall, Brent Forrester, Ruheena Sangrar, Sandra Normandin, Joan Brooker, Dan Carriere, Merle McKnight, Sara Masci, Sara Fazini, Rose Ong, Susan Ball, Susan Henderson Harris, Susan Kent, Rob Goodale, Cathy Kincaide and Pierre Bonhomme.

**Also Present: Chair:** Debbie Johnston, **Recording Secretary:** Julie Cruickshank and **Executive Director:** Juliet Irish

Welcome and Introductions: Juliet Irish

Motion to Approve 2012 AGM Minutes: Moved by Susan Henderson, Seconded by Ruheena Sangrar

**Annual Reports:** President and ED Report:

47% increase in clients – impact of Stronach Cancer Centre.

Client base is younger and they are looking for alternatives to medication.

New program “Art for the Newly Diagnosed”

Challenging year due to loss of staff - reduction of 6 to 4. Thanks to staff for their dedication and support.

DHH will stay in current physical location for the next 3 years, then have a 2 year extension option with the Town of Newmarket.

Thanks from Chair to DHH staff, volunteers and ED for being able to provide such excellent service on a limited budget.

Art Therapy Program (Alison)

Juliet has been helping out with the meditation portion of the Newly Diagnosed Art Therapy 8 week program.

Quiet Reflections service held in July 2013 for children and teens who had lost their fathers. Very powerful and good closure for both teens and the remaining parent. Thanks to volunteers who helped with this program.

**Financial Report:**

Pierre Bonhomme from Chaggares Bonhomme

*Living Every Moment*

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Chaggares Bonhomme gave a qualified opinion for DHH to adopt the new Accounting Standards for Not for Profit Organizations.

Due to the cash nature of DHH fundraising, they are unable to recommend or implement strict financial controls over this area.

\$52,000 of externally restricted funds that show on the Balance Sheet are to be used for a specific purpose/program as deemed by the sponsor.

*Motion to accept 2012/2013 Financial Statements:* Moved by Julie Cruickshank, Seconded by Bill Marshall, Unanimously accepted.

*Motion to retain Auditors for 2013/2014:* Moved by Julie Cruickshank, Seconded by Ruheena Sangrar, Unanimously accepted.

### **Comments from Patricia Mosniak**

There is now and will be an increased demand in the future for the type of services DHH offers. A long term plan to address this demand is needed and she hopes to work with DHH to ensure that there are no gaps in services to clients.

### **Nominations: None**

Current list of Board members and their tenure was reported by Bill Marshall  
Announcement of resignations: Howard Goldby and Kirsten Nicolson

### **Launch of New Volunteer Café, Location:** On the DHH website

Purpose: To communicate with volunteers more effectively.

Content: Volunteer Manuals, Volunteer Hour collection, Training and Education (any courses offered central LHIN or Palcare) Communication module for HPCO training, Resources (articles, videos, ehospice), Getting to Know you (features volunteer profiles/bios to help connect disparate volunteer team, sharing insights/commonality among volunteer team), Help Wanted: Call for volunteers – information on fundraising activities, Blog.

Question: Can the volunteers who deal with clients with MS create a communication /blog on this area of the website?

Answer: There is a confidentiality/privacy of information issue surrounding this. We need to be cautious about launching this.

25<sup>th</sup>. Anniversary of DHH in May 2014

Stay posted to DHH website, lots of activities coming up geared towards celebrating the anniversary.

*Motion to Adjourn:* Moved by Julie Cruickshank, Seconded by Bill Marshall  
Adjournment: 7:01 pm



## **BOARD PRESIDENT REPORT**

*“Kindness is the language which the deaf can hear and the blind can see.”  
- Mark Twain*

Over the past year Doane House Hospice has continued to fulfil our mission within York Region by providing non-medical support that enhances the quality of life for those affected by or caring for an individual with a life threatening illness and bereavement support for those who are bereaved.

In 2013, our province underwent a provincial election. The results of that election yielded no change to the provincial party in power; however, as a result of, and pending the outcome of this election, many decisions regarding health and healthcare were deferred and there has been little change in the direction from the provincial health ministry with respect to hospice palliative care services.

Doane House Hospice clientele continued to increase in 2013, with a marked rise in the number of younger people seeking our services. Currently, our programs operate at maximum capacity and, working in close partnership with the wider community, our referrals come from a variety of sources including the Community Care Access Center, physician offices, the Stronach Cancer Centre, oncology staff as well as community members who are aware of our programs.

The toughest challenge that we currently face is a monetary one. In the 1990's, when the 7 York Region non-residential hospices were granted funding from the province, an agreement was reached to allow for equitable funding; in other words, the dollars available for non-residential hospice care in York Region were split amongst all 7 hospices. Although client caseloads in the Region have increased over the last 2 decades (Doane House Hospice carries one of the heaviest caseloads) there has been no increase in provincial funding or re-allocation of these funding dollars. Fundraising has been a staple of Doane House Hospices's operations and, as a result, our staff has spent many precious hours on fundraising efforts instead of focusing on our prime directive – our clients. The need for a pilot position of fundraising coordination became evident to us and a part time position was created in April of 2014, solely focused on raising fundraising dollars. This has not ended our advocacy efforts with the Local Health Integration Network (LHIN).

We continue to seek out opportunities to highlight the valued services that we provide, which are aligned to Ontario's Action Plan for Healthcare – Advancing Excellence in Local Healthcare and we are realistic about any funding increases given the current fiscal reality in Ontario.

Now is the time for the communities served by Doane House Hospice to show their commitment for the work performed by Doane House Hospice's amazing staff on behalf of our clients. As Board Chair, I ask you to stand behind this essential community organization to ensure that we can continue offering the programs and services that are so needed.

To all of the staff at Doane House Hospice, on behalf of the Board of Directors, I would like to thank each and every one of you for the amazing work that you do each and every day. It is our staff that makes Doane House Hospice the invaluable community support agency that it is.

Thank you,

Respectively submitted by:



Debbie Johnston  
President/Chair



## **VISITING VOLUNTEER REPORT**

*“Visiting Volunteers DO make a difference!”*



For 25 years Doane House Hospice (DHH) has been “dedicated to enhancing quality of life through the provision of non-medical support for those affected by or caring for an individual with a life-threatening illness, and grief and bereavement support for those dealing with the loss of a loved one.” Today’s clients are presenting with complex medical needs and this is where our collaborations with outside community agencies and supports help us better serve them. A cancer diagnosis covers our largest client population at 90% the remaining 10% consists of ALS, COPD, organ transplants, and end stage Multiple Sclerosis / Parkinson’s.

Our partnership with the Stronach Cancer Centre continues to grow. Our bi-monthly hospice palliative care team meetings provide an opportunity to bring together palliative care physicians, nurses, community professionals and the HPC team to ensure consistent collaborative support for our clients.

The role of the Client Services Coordinator, and the programs and services being offered at DHH continue to evolve in order to be able to better meet the client needs. My responsibility is intake, assessment and program placement for all clients, which includes case management of the in-home visiting volunteer program /client matches and support, as well as the Oasis Program, and the Mind Body Connection - Wellness Program.

The Mind Body Connection offered at DHH is often the conduit that brings many of our clients to the door. The feeling of being on a roller coaster is how one client described it and through the techniques taught in the wellness program it can help with an inner calm. Once they feel safe in the hospice environment they are encouraged to move through different programs, as and when they are needed. This supports them as they travel this journey.



\*For centuries, Meditation has been used to rally inner resources to exercise control over thoughts and emotions, and improve overall well-being. Meditation practices can help to reduce stress, improve capacity to cope with cancer, and feel better both emotionally and physically. Yoga can help exercise control over physical and emotional well-being by combining movements, breathing, stretching, body poses and meditation practices. Participants can achieve a sense of inner calm while enhancing the mind, body and spirit.



Recipient of the 2013 Hoedown:

**Mind Body Connection was sponsored in part by Magna International**



Visiting Volunteers do make a difference! They provide valuable support for individuals and their families and more importantly, bring a little normalcy back to the client's life. Volunteers are involved in this program because they care. Volunteers visit clients in their homes, offering companionship and practical support as well as short-term relief for their caregivers. Our volunteers are there to listen without judgment and with compassion and offer practical help with day-to-day needs such as shopping, appointments and outings. Each client is individually assessed by the Client Services Coordinator and with their help a care plan is put in place and then the client is matched with an appropriate volunteer who works with our professional staff to ensure the clients and their families receive the highest quality care. The support commitment can range from short term and one offs, to long term. One client and volunteer have been together for 11 years!



***"I value all of the support and caring from staff and the volunteers."***

**- Client**

*Living Every Moment*

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The Oasis Program continues to thrive and provide a safe environment for social interaction and activities that illness can often restrict. This 4 hour program runs every Thursday and Friday.

We have had the opportunity to go on a few outings this past year as well as welcome various guests offering music, reflexology, painting and spa services.



During this Fiscal year the Oasis program has offered 400 hours of programming, donated 5,552 volunteer hours and served over 70 individual clients. We could not offer this amazing programming without the help of over 20 dedicated volunteers.

*“The Doane House Hospice has provided a safe, loving, sharing environment that I was unable to find anywhere else.”*

**- Oasis Client**

\*\* “Together we can transform the cancer experience, optimizing quality of living beyond just fighting the disease. Children, adolescents, young adults, individuals in mid-life and those in their senior years—individuals of every age are affected by cancer. Their emotional and psychosocial needs—and those of their families—are unique and they will change over time. Access to high quality, age appropriate psychosocial resources and information can help.”

Respectively Submitted

Cathy Kincaide R.N. - Client Services Coordinator

Oasis Lunch Sponsors:



Kingsway Arms

Lifecorps International



\* <http://www.wellspring.ca>

\*\*CAPO (Canadian Association of Psychosocial Oncology) leads nationally and globally in promoting capacity for, and excellence in psychosocial oncology services to enhance the wellness of individuals and families.

**SUPPORT SERVICES COORDINATOR REPORT**

*"We are still a family of four, even though Mommy died."  
"I love you to specks with dust in my heart. I love you to ashes when  
you're falling apart. I love you Daddy and Grandma."*

– Children's Bereavement Art Therapy

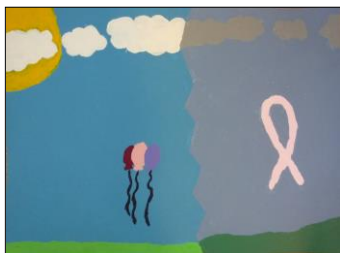


*Helping Kids in Africa*  
Child Bereavement Art Therapy Group



*Mommy's Smile Lit Up a Room*  
Child Bereavement Art Therapy Group

The **Support Services Programs** provided individual and group support to caregivers, newly-diagnosed clients and bereaved clients. Talk groups were offered in the afternoon and evening and included the Bereavement Walk and Talk Group which runs year round and meets weekly at Fairy Lake. Art Therapy Groups provided anticipatory grief and bereavement support for children and teens, and a new 8-week Bereavement Art Therapy group was established in conjunction with the Guidance Department at Newmarket High School. The Newly-Diagnosed Art Therapy Group also provided emotional and psychosocial support for young women. All of these groups were assisted by or facilitated by a number of trained volunteers, who provide valuable support for DHH clients. I continue to receive messages of gratitude from clients enrolled in these groups.



*I Miss My Mother*  
Teen Bereavement Art Therapy



*My Brother Died for What?*  
Teen Bereavement Art Therapy



*Life after My Brother Drowned*  
Teen Bereavement Art Therapy Group

The 2<sup>nd</sup> Quiet Reflections evening was held on April 1<sup>st</sup>, 2014 and children (ages 7 to 10) from the Bereavement Art Therapy Group attended with their families. A Powerpoint presentation highlighted the art, photos, and memories that the children had created in their 8-week Program.

Original art pieces were displayed and a young child read a poem she had written to honour her grandfather. Some children chose music that held special meaning for their loved one. *Amazing Grace (My Chains are Gone)* reflected the times a young girl attended church with her grandmother and the lessons she learned from her grandma's volunteer work in Africa. Another grandmother loved to vacuum her house to Pavarotti's version of *Nessum Dorma*. Music played a central part in this grandma's life and she requested the *Downton Abbey* theme, *Did I Make the Most of Loving You?* be played in the last hours of her life. Parents who attended this reflective evening were moved by the children's creative responses to grief and loss, and by their courage to share their loss.

A Bereavement Volunteer Training took place on June 12, 2014. New volunteers with strong 1:1 counseling and bereavement backgrounds will provide 1:1 support for clients when my caseload increases at various times during the year.



The Memory Bears Project continues to provide comfort for DHH clients and for families in the community. Our current seamstresses are very dedicated and have taken on large projects throughout the year, but a campaign to find more seamstresses is needed.

Photo: A large order of 18 Memory Bears was made to honour the life of a special father and husband. One of our wonderful seamstresses gladly took on the order this summer when there was a shortage of seamstresses and the family was so grateful.

Based on client requests, as well as my interest in using all of the healing arts, I look forward to planning future projects such as a Children's Bereavement Choir, and Body-casting for newly-diagnosed clients. It is a joy to continue my work at Doane House Hospice and I feel blessed to work with such caring staff and volunteers.

Respectfully submitted,

*Alison Jane*

Alison Jane  
Support Services Coordinator, Art Therapist

Sponsored in part by:



*"When I found out that my mother got breast cancer, I was sad. I told Alison about my feelings and she helped me with my feelings."*

**- Child, age 5**

## **VOLUNTEER COORDINATION REPORT**

*“Awesome, wonderful, they are empathetic, compassionate; they make you feel special which comes from their hearts.”*

**- Doane House Hospice Client**



2014, is the year that Doane House Hospice reflects and celebrates 25 years of volunteerism. What started out in 1988 as a volunteer- led, home- based support system for individuals and families meeting the challenges of a life threatening diagnosis became what hospice is today. So, it started with the training of 30 volunteers, to provide psychosocial support to 48 clients, and has now grown to 140 volunteers supporting 600 clients and their families, from diagnosis through to bereavement.

All our volunteers go through training and orientation, but for those volunteers who will be working directly with clients, they commit to a minimum of 30 hours of palliative care training provided by Palcare Network for York Region. This is a life



course, but is truly an inspiration when you are able to interact with facilitators and experts, volunteers, past clients and professional individuals, who want to give back to families requiring hospice palliative care. We also encourage our volunteers to continue with ongoing education through our monthly support meetings, and community workshops.

*“We are blessed to have them; thank you doesn’t express how truly thankful I am” – Client.*

This past year we have welcomed 23 new volunteers to join our team. Volunteer recruitment has remained our focus, with an increasing client base, we need to ensure we have sufficient volunteers, so that our seasoned volunteers don’t burn out, and our new volunteers are properly mentored to be able to continue offering the best possible care and commitment.

Our organization is governed by a volunteer board of ten individuals from the community, who believe in our Mission, Vision and Values.



*Living Every Moment*

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This active board thrives on sharing their valuable skills and expertise while setting the strategic direction of Doane House Hospice to be one of the leaders in the field of hospice palliative care.

This past year we appreciated our volunteers with an evening of good food, good company and comradery. We would like to thank Thompson Funeral Home, Road House & Rose Funeral Home and Taylors Funeral Home for sponsoring the evening at the Mandarin Restaurant – a good time was had by all!

We honoured volunteers through the Character Community Foundation of York Region, and the Ministry of Immigration and Citizenship as well as this year's prestigious June Callwood, Circle of Outstanding Volunteers Award, which was presented to Suzanne Henderson at the Hospice Palliative Care Ontario conference in April.



On behalf of Jean Anderton, Alison Jane, Cathy Kincaide, Julie Cruickshank and myself, I would like to thank you all for the commitment you have made to Doane House Hospice and our clients; you really do make a difference!

*“She transitioned from a skeptical participant initially, to thoroughly anticipating and enjoying her weekly hospice events. Her hospice experience was truly a life line.....for mum it became a safe place to have cancer, but more a place where she could share her feelings, have new experiences and build friendships unrelated to her diagnosis. She was a very determined woman and a trooper as far as managing the disease, but, we believe her involvement and attachment to those of you at hospice sustained her life far beyond what she, or any of us, expected For that, we are so grateful to you all at Doane House Hospice.”*

**– Client’s Family**

Respectively Submitted,

Our volunteers have donated in total over 14, 500 hours this year.



Juliet Irish  
Executive Director

Partially funded through:

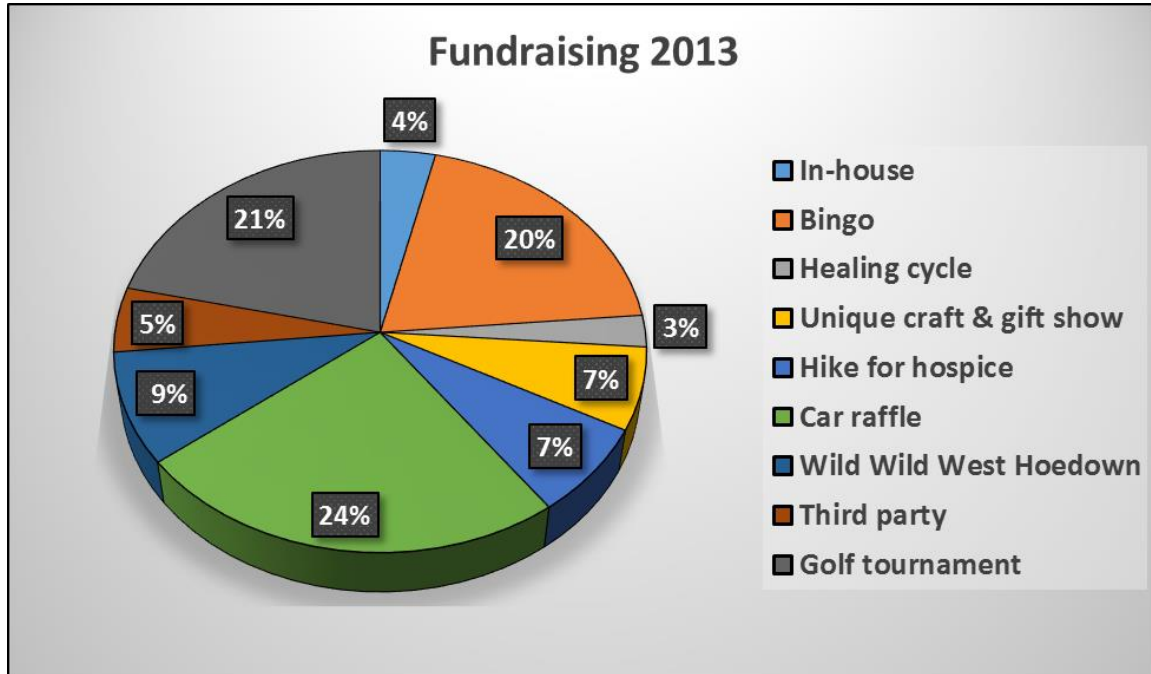
The Local Health Integrated Network (Central LHIN) via



**THE CORNERSTONE OF DHH – 2013/2014 VOLUNTEERS:**

Scott Allan	Suzanne Henderson	Rose Ogrady
Aida Batten	Susan Henderson-Harris	Rose Ong
Susan Ball	Michael Harris	Georgina Novocich
Barbara Beamish	Carolyn Hirnyj	Lois Parker
Lily Bershtein	Gail Hirst	Brigitte Proteau
Ali Boreyri	Betty Holder	Danielle Quimet
Robert Bradley	Tricia Hurtubise	Michael Rankin
Kirby Brock	Debbie Johnston	Wendy Robinson
Joan Brooker	Rachel Kampf	Mikaela Romain
Monika Brown	Susan Kent	Ava Ross
Maureen Burleson	Christine Kerr	Steve Ross
Elizabeth Campbell-Brown	Anahiti Kiani	Andrea Roth-Trimble
Dale Caranci	Bridget Kilgallon	Judy Ryan
Dan Carriere	Jennifer King	Taylor Sanders
Carol Celenza	Stephanie King	Ruheena Sangrar
Terresa Chevrefils	Judy Konaka	Patricia Sarginson
Lindsay Clar	Heather-Anne Lambert-McKay	Trudy Schneider
Karen Close	Kyla Licescu	Charlotte Smart
Cathy Connor	Doreen Kolkman	Bhavini Solanki
Lisa Dattoli	Libera Maloney	Fiona Stevenson
Judy Degeling	Candice Marcovich	Eleanor Tancreti
Dianna Durisin	Lesley Marcovich	Leslie-Anne Thoms
Barbara Dymott	Raymond Mark	Catherine Tremblay
Dawn Ellis-Mobbs	Bill Marshall	Alex Van Hemert
Leslie Everson	Sara Masci	Rin Van Hemert
Karen Faris	Cathy Mason	Antoinette VanderHoeven
Carol Forn	Judith McKay	Lara Verastegui
Tiana Forfari	Merle McKnight	Una Walshe
Brent Forrester	Gail McPhail	Jennifer Wang
Julia Funk	Sandy Michaud	Michael Wasylenky
Cynthia Galang	Thomas Moncton	Phil Watkins
Joan Gallagher	Don Montague	Janet Weiss-Townsend
Gary Gilbert	Makoa Mosquera	Rustin White
Howard Goldby	Alison Moss	Donna Witteman
Violet Gomez	Nagwa Mounir	Karen Woolhead
Rob Goodale	Jim Muie	Peggy Wrightson
Christine Gordon	Muhammed Mukadam	Meagan Wurster
Antonietta Greco	Zameer Mukri	Sandford Yang
Sabrina Greco	Sandra Normandin	Anna Zuccon

**FUND DEVELOPMENT COORDINATOR REPORT**



Event fundraising increased by 15% over 2012 despite the cancellation (due to poor ticket sales) of our annual Food Celebration event.

Two successful, new fundraising initiatives were launched in 2013: Hike for Hospice and the New Roads for Hope Car raffle. In addition, Doane House Hospice, in conjunction with Hospice Georgina and Hospice Richmond Hill, were recipients of proceeds from the Magna Wild Wild West Hoedown charity event.

As a result of an objective formed during the Fall 2013 Strategic Planning Session and a Board recommendation, a Fundraising sub-committee was created to develop a strategy for DHH fundraising. This sub-committee presented an Operating Fund Development Plan to the Board in February 2014 which was subsequently approved for execution in 2014/2015. The Fundraising sub-committee meets on a regular basis to review the status of the plan and detailed Fundraising tracking reports are now included in the monthly Board meeting agenda.

New fundraising initiatives planned for 2014/2015 include a Wine & Art event and two Direct Mail campaigns.

We are deeply grateful for the continued support of our volunteers, sponsors and event participants who help to make our fundraising events a success. Their support allows us to continue to be a community leader, responding to the needs of our demographic, by providing free of charge, quality programs and services.

Respectfully submitted by: Julie Cruickshank, Fund Development Coordinator

## **TREASURER'S REPORT**

In opening, I feel that we took a number of positive steps this year to improve the organizations financial systems and reporting, along with actions to improve our future financial viability.

That being said, operationally it was another very difficult year. The organizations operating deficit was \$43,859, approximately the same as the prior fiscal year. These deficits are being funded from prior years accumulated surpluses, but this is obviously not sustainable. The revenues for the current year were 2% less than the prior year, with reductions in general donations, grants and government funding being almost offset with increase revenue from event fundraising. On the expense side, expenses were lower in the current year by 1%, with the reductions in administration and program costs being almost offset by increases in the expenses incurred for the additional event fundraising revenue.

The balance sheet is liquid, with virtually all of the organizations being held in cash or short-term investments. Regarding liabilities, they are also stable, with the exception being that the loan owing to the Town of Newmarket, for the Doane House premises, has been fully paid off. Currently the lease for the building is under review and monthly rent is being paid equivalent to the loan payment. The net assets (accumulated surplus) is \$136,564 and the reduction from the prior year is due to the annual operating deficit.

The Board has been active in the past year in planning actions to help turn around the annual financial deficits that have occurred for the last two years. A financial strategy sub-committee was formed and was successful in preparing a Financial Strategic Plan that was presented to the Board. This plan focuses on revenue generation, and maps out the specific areas of where we feel we can be most successful on raising funds, and plans on how to achieve the goals. This was also an integral part of the budget preparation process, giving greater credibility to the budgetary outputs. We must recognize that the fund raising environment has become incredibly competitive, but I am more confident of our success with a sound plan.

From a reporting standpoint, there are several highlights.

The audit went smoothly and the audited financial statements are attached with the AGM package. Please note that the audit opinion is qualified with respect to the auditor's ability to assess the completeness of the revenue – this is consistent with the prior year and is a standard reporting item in virtually all charities.

There was considerable effort made this year to streamline the internal reporting to improve efficiency. I am confident that the improvements made will not only improve the timeliness and quality of reporting but will reduce the staff cost and cost of external bookkeeping and audit verification.

In summary, while there is considerable work to be done to get the organization back to an annual surplus, I feel that there have been a number of tangible actions taken in this year to position us to do so. As Treasurer I am appreciative of the support of the Board in these actions and look forward to reporting more positive results in the future.

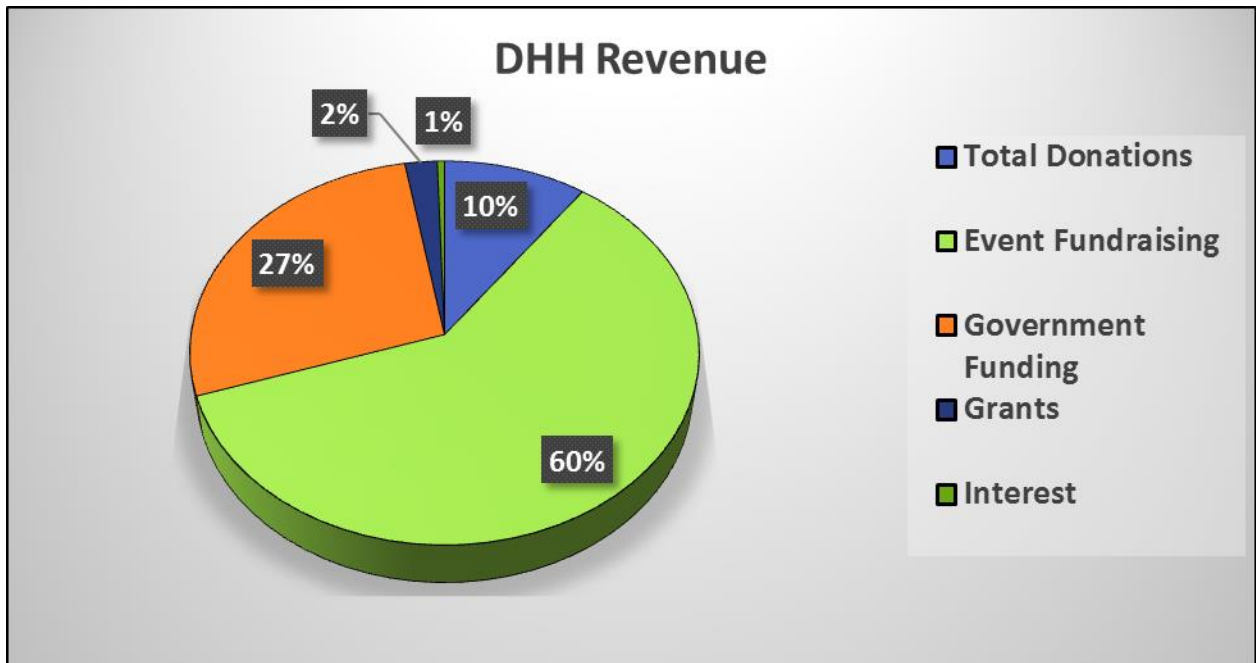
This ends my report for the 2014 Annual General Meeting of Doane House Hospice.

Scott Allan

The Local Health Integrated  
Network (Central LHIN) through:



Treasurer



The 2013/2014 audit was undertaken by Chaggares & Bonhomme Chartered Accountants.  
Please contact DHH if you would like a copy of the full financial statements

**DOANE HOUSE HOSPICE INC.**  
Statement of Financial Position  
March 31, 2014

	2014	2013
<b>ASSETS</b>		
<b>CURRENT</b>		
Cash	\$ 59,332	\$ 28,220
Accounts receivable (Note 4)	14,732	15,235
Prepaid expenses	4,895	3,068
Cash in trust (Note 5)	6,883	52,302
Short term investments (Note 6)	70,830	110,000
	<b>\$ 156,672</b>	<b>\$ 208,825</b>
<b>LIABILITIES</b>		
<b>CURRENT</b>		
Accounts payable and accrued liabilities	\$ 9,654	\$ 12,315
Current portion of long term debt	-	5,217
Deferred revenue (Note 7)	10,454	10,870
	<b>20,108</b>	<b>28,402</b>
<b>NET ASSETS</b>		
Unrestricted	99,681	98,121
Internally restricted	30,000	30,000
Externally restricted	6,883	52,302
	<b>136,564</b>	<b>180,423</b>
	<b>\$ 156,672</b>	<b>\$ 208,825</b>

**DOANE HOUSE HOSPICE INC.**  
Statement of Revenues and Expenditures  
Year Ended March 31, 2014

	2014	2013
<b>REVENUES</b>		
Donations	\$ 24,352	\$ 37,493
Event fundraising	146,454	127,351
Government funding	66,758	70,215
Grants	5,500	11,000
Interest	1,230	2,139
	<b>244,294</b>	<b>248,198</b>
<b>EXPENDITURES</b>		
Administration & facility	65,631	69,446
Event fundraising	32,157	15,322
Program costs	190,365	206,302
	<b>288,153</b>	<b>291,070</b>
<b>DEFICIENCY OF REVENUES OVER EXPENDITURES</b>	<b>\$ (43,859)</b>	<b>\$ (42,872)</b>

On Behalf of the Board:



**Doane House Hospice would like to sincerely thank all the groups and businesses listed below for their kind and generous support throughout the year:**

Allied Global	Mylan Pharmaceuticals ULC
Amica Newmarket	Newmarket Lions Club
Atcan Self Storage	Newmarket Lioness Club
Aurora Smile Centre	NewRoads Automotive Group
BFI Canada Inc. (Progressive Waste Solutions Ltd.)	Newmarket Veterans Assoc.
Brown, Lois MP Newmarket / Aurora	No Frills
Buffalo Wild Wings LD Canada LP	North Newmarket Lions Club
Cannon Hygiene	Ontario Secondary School Federation
Catholic Women's League St. Chrysostom	Qualicare Home Services
Cattanach Hindson LLP	Roadhouse & Rose Funeral Home
Chaggares & Bonhomme	Royal Canadian Branch 426
C.J. Couvrette Investments Inc.	St. Louis Bar and Grill
Cobs Bakery	Simone Performance Imports
DataLinks Enterprises Limited	Sinclair Dental Co. Ltd.
Davis LLP	Smith, Williams & Bateman Insurance Brokers Ltd.
Denton's Canada LLP	Starbucks
Dillon consulting Ltd.	Sunrise of Aurora
Doggieville	T.D. Canada Trust
Eddystone Meats	Taylor Funeral Home
Forest Contractors Ltd.	Telizon
Gap Inc.	The JBL Group
Gem Healthcare Services	The Healing Cycle Foundation
Global Pet Foods	The Leonard and Gabryela Osin Foundation
Goodyear Mars Tire Newmarket / Aurora	The Lion & Firkin
Grist Mill Family Physicians	The McClelland Financial Group
Hollandview Trail Retirement Residence	The Montana Group
Huron Heights Secondary School	The Optimist Club of Newmarket
IBM Canada	The Toskan Cassale Foundation
Investors Group	Thompson Funeral Home
International Brotherhood of Electrical Works	Tor Can Waste Management Inc.
L.H. Lind Realty Group	Town of Newmarket
Lloyd E. Baker Limited	Turf Care Employees Fund
Marcus & Co. Estate Buyers.	United Way of York Region
Mom 2 Mom	VandenBosche Jewellers
	York Regional Police

(Please do forgive us if we have omitted anyone!)

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