



Hospice Muskoka

2010 – 2011 ANNUAL REPORT

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MISSION STATEMENT

Hospice Muskoka is a volunteer driven, community based, not-for-profit organization providing compassionate support to individuals and their loved ones of all ages and backgrounds, who are coping with end-of-life issues.

OUR VISION:

Hospice Muskoka is where individuals and families throughout South Muskoka who are facing serious illness, death, and grief will experience the best that humankind can offer.

We graciously acknowledge the support of the Ministry of Health, The District of Muskoka, The Town of Bracebridge, The Ontario Trillium Foundation and the Friends – Caregiver Respite Subsidy for their financial support. Without these subsidies, Hospice Muskoka could not support our clients in their journey.



HOSPICE ASSOCIATION OF ONTARIO



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BOARD OF DIRECTORS 2010-2011

Sean Usher	<i>Chairperson</i>
Pauline Bullock	<i>Treasurer</i>
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Kyla Taylor	

STAFF

Sandra Winspear	<i>Executive Director</i>
Michele dekonig	<i>Client Services & Volunteer Coordinator</i>
Janice Smith	<i>Administrator</i>
Elke Scholz	<i>Children's Expressive Arts Therapist</i>

A Message from the Board Chair

Funding Background

A)

1. 2010/2011 has been a year of ups and downs for our hospice. The continuing U.S. - created worldwide recession has made life difficult for many families and individuals through layoffs, cutbacks and company closures. The economic, social and political environment faced by healthcare and social services in general, and non-profit voluntary organizations in particular, make funding and fund-raising much more challenging.

2. The Government of Ontario has not increased support to Ontario's hospices for the last eight years, despite entreaties through the Hospice Association of Ontario – (now known, since mid-April, as Hospice Palliative Care Ontario)- and individual requests. Hospice Palliative Care capital expenditures are not reimbursed at all. The Hospice Palliative Care movement whether recognised as an intrinsic part of health and wellness is categorically just that; it is part of the continuum. To be able to die well without avoidable severe pain, psychological or spiritual trauma, surrounded by family and friends is what we wish for ourselves, and by extension, as compassionate human beings, wish for all. We need sustainable funding to provide hospice's suite of services in both capital and cash flow.

3. We are not asking untoward consideration either! Hospice Muskoka for example receives 20% of its expenditures from the Government of Ontario while raising the other 80% through heartbreaking fundraising. Meanwhile, our staff members receive dismal compensation for comparable jobs in public and private enterprise. And, all funds we raise are ``taxed`` at 2% to be used for our back-office services; mostly accounting. We have made several representations to say this is reprehensible and must be changed. It's so easy for someone detached from the hardship of funding exigencies to say 2% is a very small amount but, on \$100,000 that's \$2000. Tell that to underpaid staff members! As a result we look forward to restructuring our organization so our fundraising dollars are sheltered from this erosion.

4. Hospice care is less than half the cost of acute care in hospitals. Since this not only frees up much needed hospital space and reduces costs isn't it a no-brainer to provide for those who want to have end-of-life in a hospice setting? Studies show that most people want to die at home, yet there are large numbers who want to use a residential hospice. It makes sense for worn down family caregivers, to use hospice for their loved ones to help them recuperate for the coming trauma associated with bereavement.

North Simcoe Muskoka Local Health Integration Network

B)

1. The NSM LHIN has been a shining beacon for the future of wellness care and health care. Over 400 citizens across the NSM district, split up into specialized groups, have spent over the past year engaged in designing *a patient-centred continuum of care* instead of *the current medical-institutional centered system*. The continuum of care for people ranges from wellness care to illness care, rehabilitation and supportive care.

2. Patient records will be available to all medical people who are on record for each person's care. Only the information relevant to a specific medical person's need-to-know will show. The system is designed to provide the utmost privacy of a patient's records while serving to provide well-informed treatment. The specialized staff assigned to this task have taken each groups recommendations and designed them into the new integrated system.

Message from the Executive Director

Life is like a train ride. We get on. We Ride. We get off. We get back on and ride some more. There are accidents and there are delays. At certain stops, there are surprises. Some of these will translate into great moments of joy and some will result in profound sorrow. Anonymous

In many ways, this description of life describes the past year to a tee, as we continue to pursue new program directions, additional funding, raising funds to sustain our current programs and the ongoing transformation of health care in Ontario.

Hospice Muskoka continues to grow in service provision, with a 10% increase in 2010 – 2011 over the year before. However, we still remain in a position of having to raise over 80% of our operating funds through donations, events, grants and sponsorships. Hospice Muskoka, like many other nonprofits face several key challenges:

- *Increased demand for services as economic conditions decline, the population ages, and government services are reduced.*
- *Pressure on revenues as government budgets are frozen or decline, foundation endowments and giving has decreased, and individual donors have become more fickle.*
- *Increased accountability and transparency requirements from funders, and a greater need to measure and demonstrate impact.*
- *Staff and leadership (boards and volunteers) shortages as individuals retire and budgets are stretched.¹*

However, the commitment of the staff, volunteers, and board members to see us through these challenging times remains. The board is working to develop a clear strategy around the impact of Hospice Muskoka on the community it serves. We continue to seek out the skill sets in directors and volunteers who will have the experience to build on the excellent foundation already in place. Social media is the next great frontier to send out our message and to communicate our need for support – to build strategic relationships that will sustain the organization.

Care Connections is the newly developed health care delivery system in North Simcoe Muskoka which focuses on integration, partnership and shared resources. Hospice Muskoka has developed an integration plan that would see closer ties with the other five hospices in our region. We continue to be active in networking with the Hospice Palliative Care Ontario (formerly, Hospice Association of Ontario and Ontario Palliative Care Association), The North Simcoe Muskoka Palliative Care Network, The North Simcoe Muskoka Community Support Service Collaborative and the Muskoka Seniors Planning Table. Through these various planning forums, greater strength will emerge in programs that meet the changing needs of our citizens.

I look forward to continuing in the paths we have begun and to work towards our dream of a palliative care bed program in our community.

Respectfully submitted,
Sandra Winspear, Executive Director

¹ Adapting and Thriving – Public Policy Forum, March 2011

Out and About...



65 Hikers laced up on Sunday, May 1 and Monday, May 2, 2011 in Bracebridge and Gravenhurst to raise over \$6,000 for Hospice Muskoka. The Royal Bank Corporate Team warms up before the hike.



On Tuesday October 26, 2010, family members of the late Ron Freeburn cut the ribbon to formally open the 4th Palliative Care Room in South Muskoka Memorial Hospital. Money to furnish and decorate the room came through funds raised in a charity motorcycle ride. The room is uniquely outfitted with a Murphy bed which folds down for family members to sleep on.

Hospice Muskoka Client Services Coordinator Michele deKoning (left) receives another delivery of lap blankets from Mary Leger (right), a Hospice Muskoka Volunteer and representative of St. James Anglican Church in Gravenhurst.



BEING PRESENT...

210 clients were served in 2010-2011: **120 individuals (57%)** aged > 65 yr; **47 individuals (22.5%)** aged 19 – 65 yr; **43 individuals (20.5%)** aged 0 – 21 yr.

115 individuals (55%) of clients served received **Hospice Palliative Care**
95 individuals (45 %) of clients served received **Bereavement Support**

South Muskoka Hospital Friendly Visiting

Unfortunately, not everyone is in a position to stay at home through their illness. Some clients are followed by their volunteer into hospital where they continue to visit. Occasionally, families who are trying to provide care to a loved one in hospital may be referred to hospice through hospital staff. For many however, family are not often as available as the individual may need.

Of the 115 Palliative Clients:

In 2010-2011 43 individuals (37%) of the total clients were served in hospital.

In 2010-2011 11 individuals (10%) of the total clients were served in long term care residences.

In 2008-2009 61 individuals (53%) of the total clients were served in their homes.

Of the 95 Grief & Bereavement Clients:

Grief and Recovery Program

This program is designed for children and youth aged 6 – 18 who may have lost a family member or loved one, either suddenly through trauma or violence or after a prolonged illness, and sadly sometimes, as they themselves face death at an early age. This is a client-centered program connecting life and art enabling the child or youth to explore and express themselves through Expressive Art Therapy when words may fail them. Hospice Muskoka was pleased to offer a special Grief, Loss, Trauma Workshop in Gravenhurst Public School to a group of 10 special needs students, courtesy of a grant from the District of Muskoka.

In 2010-2011 30 children (32%) of the total clients receiving bereavement support

Sharing and Caring Program

Hospice Volunteers are available for one-to-one grief support. There is a library of books and videos available for loan. Referrals to this program has significantly increased in 2010 – 2011 as health care professionals, clergy and the community learn of its benefits to help individuals come to terms with significant loss.

In 2010-2011 55 individuals (58%) of the total clients receiving bereavement support

Six Simple Weeks

A unique self-support program for individuals experiencing loss such as widows, widowers, and parents who have lost a child, parents of still-born babies or those who have died shortly after birth, siblings, and close relatives, friends, and loved ones. The curriculum is practical and activity based with participants encouraged to share their stories as they work through their grief.

In 2010-2011 10 individuals (10%) of the total clients receiving bereavement support

Our Supporters...

Ministry of Health
North Simcoe Muskoka Local Health Integration Network
District of Muskoka
The Town of Bracebridge
Ontario Trillium Foundation
The Friends – Caregiver Respite Subsidy

Brad Burgess Chartered Accountant
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Muskoka Magazine
National Bank
Northern Lights Steel Orchestra
Oakrun Farms Bakery
Rodney's Oyster Bar
Smellies Copy & Print Shop
Stacy & David Cynamon
The Muskokan

The programs would not be possible without the care and dedication of our volunteers and staff.



Care ~ Dignity ~ A Time To Reflect



Hospice Muskoka

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**Charitable Registration
89033 3263 RR0001**