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MEETING OF THE BOARD OF DIRECTORS

November 27, 2024 • 6:00 p.m. – 8:00 p.m.

Hybrid Meeting
In Person: 1245 70 Avenue SE
Virtual Meeting ID: 863 6767 1962

Passcode: 156300

BOARD MEMBERS	<u>STAFF</u>
CHAIR: Angela Butler	Fiona McColl
Directors – Voting: Sheri Allen, Usman Ali, Malik Amer Mylene Tiessen, Michael Waite	y, Bill Brunton, Roxanne McKendry, Krista Pell, Anita Perry,
<u>REGRETS</u>	<u>GUEST</u>

AGENDA

Legend: Discuss (D); Discuss + Decision (DD); Information Only (FYI)

Time	Item No.	Description of Item	Process	Attached
6:00 pm	1.	Call to Order – A. Butler	D	
	2.	Consent Agenda – A. Butler • Includes: a. BoD Agenda for 27 November 2024 b. BoD Minutes from 30 October 2024 c. Action List d. Annual Board Calendar e. BoD Committee Reports ✓ Marketing & Development Committee Report	DD	7
	3.	✓ QI Committee Report ✓ ED Report Report from the Chair – A. Butler	D	
	4.	Executive Director's Report - F. McColl	D	
	5.	Primary Discussion Items a. Staff Holiday Bonuses - F. McColl	D	







	6.	BoD Committees - Discussion Items:		
		 a. Finance – U. Ali Rolling Budget Spreadsheet (See spreadsheet posted on portal) 	D	
		b. Governance – <i>S. Allen</i>	D	
		c. Human Resources – K. Pell	D	
		d. Quality Improvement - R. McKendry	D	
		e. Marketing & Development – A. Perry	D	
	7.	Other Business	D	
	8.	Safety and Quality Initiatives	D	
	9.	In Camera	D	
8:00 pm	10.	Adjourn		

Next Scheduled Board of Directors Meeting:

January 29, 2024 • 6:00 p.m. - 8:00 p.m.







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MEETING OF THE BOARD OF DIRECTORS

	Location	Date and Time	
1245 70 Ave	nue SE ● Calgary ● AB/Video Conference	October 30, 2024 ● 6:00 pm - 8:00 pm	
CHAIR	Angela Butler		
ATTENDEES	Usman Ali, Sheri Allen, Malik Amery, Bill Brunton, Fiona McColl, Anita Perry, Michael Waite, Mylene Tiessen		
REGRETS	Roxanne McKendry, Krista Pell		
NOTETAKER	Vicki Tang		

MINUTES

Agenda Item	Discussion		
1. Call to Order	Meeting called to order 6:01		
2. Consent Agenda	Approval of today's Consent Agenda: a. BoD Agenda for 30 October 2024 b. BoD Minutes from 25 September 2024 c. Action List d. Annual Board Calendar e. BoD Committee Reports ✓ Finance Committee Report ED Report		
3. Report from the Chair	 Each Committee Terms of Reference are included in the meeting materials. The Committee review and approve their TORs every three years and report to the Board when review an approval has been completed. The Board then reviews the TORs and approves. 		
	MOTION #1: Move to approve the Finance, Governance, HR, Marketing & Development and QI Committee Terms of Reference, as presented. MOVED by: M. Tiessen SECONDED by: A. Perry Carried.		







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4.	Executive
Di	rector's Report

Sage Soiree: Fiona thanked everyone who purchased tickets. Dave Kelley is the MC this
year and there will be a panel discussion with four grandmothers who are raising their
grandchild(ren) after the death of the grandchildren's parent(s).

Excellence in Care

- A Beautiful Dinner: A dinner was arranged at the Deane House for nine grandmothers who
 are raising their grandchildren. The women were feeling anxious about going to the dinner
 and connecting with the other attendees so the Director of CGC decided to have the
 counsellors attend and greet the guests when they all arrived. It was comforting to the
 guests to have the support of their counsellors.
- Fiona also shared that staff at Rosedale went above and beyond for a patient who was vulnerably housed and came to hospice with lice. Staff took great care in treating her lice and made sure her hair was clean and lice free during her time at Rosedale. Staff were also very good with the patient's seven children who lived in different areas of the city and were bussing to Rosedale to see her. When she passed, staff did all they could to contact each of her children to try and notify them all at the same time.

People

 An offer letter has been sent to a candidate for the Director, Living with Advanced Illness Centre. Rani is a social worker and has a lot of experience in education and creating curriculum.

Sustainability

- Elevator Funding Project: It has not been officially announced (will be announced in December), but funding for the main elevator will be coming from a rotary group. The same rotary group is lobbying another rotary group to fund the small elevator.
- Major Gift: On October 21, staff received an email from the lawyer of a gentleman that toured Rosedale and SE Office in the summer. The lawyer let us know that there will be an endowment of \$19 million, of which Hospice Calgary will receive 40% (anticipating \$380,000/year), designated to the Living with Advanced Illness Centre. There will also be a second fund that is conservatively anticipated to be another \$300,000/year for LAIC. It is hoped that this will start in the spring, 2025, but could be 2026 and will be administered by the Calgary Foundation. In addition to the potential \$680,000 per year, the same donor is also giving a gift of \$1 million for Rosedale capital needs.
- Fiona met two insurance representatives at an AGM she attended who work with non-profits. While discussing insurance increases and costs, they mentioned they believe they could save Hospice Calgary money on insurance. A meeting is set up with one of the representatives for the end of November.
- Field Law's Community Fund Program voting is open. They fund local initiatives and Hospice Calgary has requested \$3,000 for Compassionate Care Beyond the Beside (LAIC Companion Program).







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	Government Relations
	• Fiona is working with GPA to get a meeting with Ministers who spoke at the Continuing Care Conference for follow-up and to see how we can support their statements at the conference.
5. Primary	Review Q2 Dashboard
Discussion Items	The Q2 Dashboard was included in the materials for Board review.
	• Fiona noted that at the last meeting when reviewing Q1, there was a question under the Brand KPI and what falls under 'public communication' - Public communication is strictly the e-blasts that are sent out.
	Organization Overview & Strategic Considerations
	Fiona presented a slideshow which will be posted to the Board portal. Highlights include:
	• There are 114 hospice beds in Calgary; Rosedale Hospice has 7 beds. All hospices have funding contracts with Alberta Health Services and all admissions in the Calgary zone are managed through Alberta Health Services, Hospice Access.
	Hospice Calgary specializes in grief counselling for people under 19 years old and supports families after a death at Rosedale, or through the Living with Advanced Illness Centre, but the majority of who we see are young families.
	• Current annual budget is just under \$5 million. Funding contracts are 2.4 million and the balance of \$2.6 million is fundraised.
	 Events raise approximately \$250,000 Grants that are received year over year total approximately \$200,000 Regular major donors total approximately \$100,000.
	Only certain positions are funded by contracts. Marketing & fund development and administration are virtually not funded by existing contracts. At Rosedale, food, maintenance and housekeeping are not funded.
	• Calgary Foundation reported that giving, including corporate giving has decreased by almost 30% in the last seven years and the rate of volunteerism has gone down almost 30% since 2018.
	Strategic Considerations for 2024-2025
	 Surveying stakeholders on strategic priorities Capital upgrades and costs LAIC – current funding ends March 31, 2025
	 Rosedale Hospice contract Wage gaps – counselling Accreditation preparation
6. BOD	Rolling Budget
Committees: Finance	• Rather than the Board reviewing the monthly financial statements, a spreadsheet has been created that will showcase where the organization is at, what was planned, where it is today







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	and how it will look in the future for the balance of the year. The intent of this new reporting is to have better sightlines in terms of sustainability and liquidity.
	• The monthly unaudited financial statements will still be reviewed by the Finance Committee and will be posted to the Board portal.
6. BOD	Bill will be retiring from the Board at the end of 2024.
Committees: Governance	The Committee is asking Board members to look within networks and see if anyone would be interested in joining the Board. Would like to recruit for fund development, finance and legal.
	• It was suggested for fund development to possibly look at someone who works in corporate giving, not just someone who works in fund development.
6. BOD Committees: Human Resources	No report. Next meeting is January 13, 2025.
6. BOD Committees: Quality Improvement	No report. Next meeting is November 19, 2024.
6. BOD Committees: Marketing & Development	Anita has received a draft of the Marketing & Fund Development Strategic Plan. It will be reviewed at the next meeting in November.
8. Accreditation Update	No update.
9. Other Business	Staff Bonuses
	• As the organization is projecting a significantly lower deficit than what was budgeted and with the recent successes, the Board has asked if it is possible to look at adjusting the \$25,000 allocation for bonuses. As at September 30, 2024, payroll is approximately \$130,000 below budget which also gives room for adjustments.
	Fiona will look at different options and will send details to the Board.
10. Safety & Quality Initiatives	Fiona noted the Finance Officer's willingness to improve financial processes and reporting.
11. In Camera	In camera began 7:24
12. Adjourn	7:46 p.m.
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Next meeting date: November 27, 2024







BOARD OF DIRECTORS OF HOSPICE CALGARY

FISCAL YEAR 2024-2025 (APRIL 1, 2024 TO MARCH 31, 2025)

ACTION LIST

ACTIVE ITEMS

October 30, 2024
No Action Items
September 25, 2024
No Action Items
May 27, 2024
No Action Items
April 24, 2024
No Action Items

ACTION LIST

COMPLETED ITEMS

Agenda Item No.	Description of Item	Lead	Deadline	Status	Details







BOARD OF DIRECTORS F2024-2025 ANNUAL WORK CALENDAR

(APRIL 2024 - MARCH 2025)

		April 24, 2024			
	APR	Review Board Effectiveness Survey			
	A	Board Recruitment Update			
		May 29, 2024			
		Guest Speaker: Allen Kroeker			
01		Review Audit Financial Statements, if available			
Q1	MAY	Financial Update			
		Review/Approve BoD Slate			
		Review/Approve Officer Slate			
		AGM Preparation			
	JUN	June 25, 2024			
	3011	Annual General Meeting			
	JUL	NO BOARD MEETING			
	AUG	NO BOARD MEETING			
02		September 25, 2024			
Q2		Board Education Malagara Nava Based Manakana			
		Welcome New Board Members Parisary Mission 8 Vision Statements for relevance (refer to conscitto a if			
	SEP	 Review Mission & Vision Statements for relevance (refer to committee if needing revision) - Every three years – Next Review 2025 			
		 Appoint bylaw and policy review committee (if necessary) 			
		Receive Monthly Financial Update			
		Mid-Year financial update and key issues identification			
		October 30, 2024			
	OCT	Board Education			
	OCT	 Approve Committee TORs (if required) Every three years – Next Review 2024 			
		Receive Monthly Financial Update			
Q3		November 27, 2024			
	NOV	Board Education Reseive Monthly Financial Undate			
		Receive Monthly Financial Update Projected 4th quarter issues and 'high-level' plans for next fiscal year.			
		 Projected 4th quarter issues and 'high-level' plans for next fiscal year Annual Board/Donor Stewardship reports and calls 			







BOARD OF DIRECTORS F2024-2025 ANNUAL WORK CALENDAR

(APRIL 2024 - MARCH 2025)

	DEC	NO BOARD MEETING						
		January 29, 2025						
	JAN	Board Education						
		Receive Monthly Financial Update						
		New Fiscal Year Budget Discussion						
		 Policy Review – Executive Expectation – Next Review January 2025) 						
04		February 26, 2025						
α.	FEB	Board Education						
		Receive Monthly Financial Update						
		Board Recruitment Discussion/Skills Matrix Review Board Effectiveness						
		Survey/Individual Board Member Surveys initiated						
,								
	MAR	March 26, 2025						
		Board Education						
		Board Recruitment Update						
		Strategic Risk Management Plan review						
		Financial Update						
		Review/Approve Annual Budget						
		Review ED Position Description (Due for Review March 2027)						



REPORT TO THE BOARD OF DIRECTORS

Date: November 22, 2024

Committee Name: Marketing & Development Committee

Chair: Anita Perry

The Committee met on November 21, 2024. Main points of the meeting are summarized below.

New Committee Member

The Committee welcomed Thea Hiebert, Marketing & Communications Officer to the Committee.

Guest Speaker

Eman Nassef, Fundraising Specialist was a guest at this meeting and gave an informative presentation on Direct Response Campaigns. After analyzing past campaigns, a plan has been made for future ones, including more sophisticated ask strings and list segmentation; and utilizing google analytics and link tracking to observe donor communications preferences

Funding Updates

- Sage Soiree: Budgeted \$71,000 (includes donations, silent auction, part of ticket price and raffle). Expect to be over budget. Details will be provided when final numbers are in.
- Casino: Budgeted \$75,000 and received approximately \$84,000.

Direct Mail Campaign

Direct mail was sent just before the mail strike. There is an action plan in place to address disruptions from the strike - e-blasts and telephone calls to donors who do not use email.

Major Gift Minimum Threshold Amount

In line with other work to ensure donors are well recognized, staff are reviewing what the minimum should be to be considered a major gift. Currently, the threshold is \$1,000 which feels too low. Staff will be researching what is generally considered major gifts from individuals and corporations.

Appeal Letter

The Committee reviewed a letter from the Palliative Care Society of the Bow Valley. It was an appeal letter for donations and was written from, and signed by, their Board Chair. The Committee discussed whether this would be an appropriate and effective communication for Hospice Calgary. Anita will discuss at the Board meeting.

Fund Development & Marketing Plan 2024 - 2026

The draft Plan was reviewed by the Committee and comments were provided. Staff will review comments/suggestions and provide a revised version to the Committee.

Board Best Practices - Committee Tasks

The Committee reviewed the tasks and Anita will follow-up with Fiona to discuss further.







Government Relations

It is still unknown where hospices will fit in the new restructuring. Fiona is working with GPA to have a follow-up meeting with Ministers Nixon and LaGrange to share recommendations.

Next Committee Meeting: February 11, 2025







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REPORT TO THE BOARD OF DIRECTORS

Date: November 21, 2024

Committee Name: Quality Improvement Committee

Chair: R. McKendry

The Quality Improvement Committee met in-person on November 19, 2024. Highlights of the meeting include:

Portfolio Updates/New Initiatives

Operations

Renovations are nearing the latter of phase 2. There was a delay with the flooring and phase 2 should be done the second week - end of December. Coming into phase 2, there have been some improvements - there is a location change of the toilets, more colour has been added to the rooms, fixtures have been updated and charging ports have been added. A lot of the changes that have been made are a result of direct comments from patients and families.

Living with Advanced Illness Centre

The new Director, Living with Advanced Illness Centre will start on January 6, 2025. She has very strong clinical supervisor expertise which is needed for the growing demand for counselling. She will shadow Ruth December 16 and 17th.

The Companion Council continues to grow and become more established. This council is important for safety and QI initiatives and allows for volunteers to connect. They had a get together in October and will have another one in January.

The Telephone Bereavement Support has brought on four new volunteers. There will be an engagement event in December.

Dying to Know: LAIC's Program Coordinator presented at the last Dying to Know series and spoke about positive approach to care. She is certified in positive approach care and has also offered a workshop for staff and volunteers.

New Initiative: LAIC and CGC are working together to improve triage and management of referrals. As referrals increase, the objective is to provide clarity on how to manage referrals based on the state of illness and age of clients ensuring that the right client is seen by the right counsellor at the right time.

Children's Grief Centre

September - December is very busy time with programming focussed on supporting back to school and the holidays.

November 21, 2024 is Children's Grief Day and staff have been preparing for Light the Path/Light the Porch. The Children's Grief Centre has been holding a Light the Path event since 2020 as a place for clients to gather and has been a meaningful event for families and community. This year, Light the Path is being held at the SE offices and has expanded to include Light the Porch - an opportunity for those who are not able to attend or for those who care about a child who is grieving to show support.

A new hire started on November 5. She is working as a 0.5 FTE Counsellor and 0.5 FTE Community Engagement Coordinator.

One counsellor started maternity leave on November 15, 2024.

CGC has partnered with LAIC to host caregiver information sessions. CGC hosted three sessions and LAIC hosted one session.







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Volunteers

Staff reached out to a handful of patient care volunteers to review the buddy checklist. When someone wants to be a patient care volunteer, they are required to do two buddy shifts with current volunteers and there is an old checklist that is out of date and confusing. Volunteers have reviewed it and are giving feedback for changes.

15 volunteers attended the Interagency Palliative Care Training in October.

There will be two holiday open houses for patients, families, staff and volunteers:

- Calgary Philharmonic Orchestra Choir will be performing at Rosedale
- RBC Volunteers are coming in on December 14 to set up three holiday stations: cookie decorating, gingerbread house decorating and card making.

Patient walks: Staff reached out to other volunteer managers to inquire if they have policies around taking patients off of grounds for short walks. None of them have a written policy but pretty much all allow off grounds walks with volunteers. Insurance has been checked and the organization is covered. A checklist will be put together for volunteers to take patients for walks.

Rosedale

Staff attended a wellness and information retreat that focussed on contemplative practice.

There have been a few new RN and HCA hires to top up the casual pool.

Staff wellness: Social committee added some equipment for stretching for staff, family, volunteers and patients.

New Initiative: Laundry Process - the need for additional laundry bins was identified and the process was reviewed with a lens of infection prevention & control, efficiency, and limiting risk of lifting injuries for staff. New bins were purchased and stored in laundry room for clean linens, rolling cart added to laundry room to transport full clean linen baskets up to patient care floor. A process was created for bagging dirty linens inside dirty laundry bins to help minimize risk with heavily soiled/contaminated linens.

ED Office

We are close to meeting our goal to having the money to replace the elevator at Rosedale. Will receive confirmation in December.

It was announced at Sage Soiree that a \$1 million gift was received from an individual donor for Rosedale capital needs.

Hospice Calgary QI Goals

The Committee reviewed the organization's QI goals and updates were provided.

Ethics

At the last Ethics Committee meeting, the group discussed a breach of privacy that happened with a patient's family member.

QI Committee Goals

The Committee were included for review and were tabled pending additional revisions.

Policy Review

The following policies were reviewed and approved:

- A-3: Rosedale Access, Admissions, Service Provision
- A-4: Determination of Patient Death at Rosedale Hospice
- B-4: Clinical Investigations







- B-5: Infection Prevention and Control: Rosedale Hospice
- Pleural Catheter Management
- B-16 Pressure Ulcer Prevention and Wound Management
- B-20: Central Venous Catheter Care
- B-24: Continuous Bladder Irrigation
- E-7: Visiting Animals: Infection Prevention and Control (Rosedale and SE Office)
- F-11: Protection for Persons in Care

Incident Reports

Incident reports follow for Board review.

QI Moment

Roxanne presented a video: SBAR Tool Overview and Example.







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2024-2025 Quarter 2 Infection Tracking Report (July 2024 - September 2024)

2024-2025 Quarter 2 Infection Tracking Report

For quarter two infection reporting, our admission numbers include April through September. For YTD, we have had 30 patients admitted and none of them came with an existing infection that we track. It is worth noting that we have had 232 days of bed closures due to renovations and the bed bug issues earlier this fiscal year. So all data thus far reflects operations at only 82% of what would normally be our capacity. Lower numbers could thus be both a reflection of IPC initiatives and also fewer patients/bed days.

For the first two quarters, there were 7 reported infections. You will notice that there are more infections noted than number of patients developing infections. Two reasons - firstly several patients developed more than one infection (that would be both multiple iterations of the same infection, or different types of infections) or secondly, the patient was admitted prior to April 1 and their admission data is tracked in the previous year numbers. That is why # of infections developed during the stay doesn't necessarily equal the number of infections in monthly tracking.

At this point last year, there were 15 reported infections. So even with the diminished capacity being part of the reason, there were fewer infections overall.

Total # of patients for the year		30	
# admitted with pre-exisiting infec	tion	0	0.00%
(# adm with GI - C. Diff)		0	0.00%
(# adm with GI - noro)		0	0.00%
(# adm with Rs - flu/COVID)		0	0.00%
(# adm with GU - VRE/pseudomon	as)	0	0.00%
(# adm with - hep)		0	0.00%
(# adm with - HIV)		0	0.00%
(# adm with wound inf)		0	0.00%
(# adm with derm - mrsa)		0	0.00%
# infections developed during stay		2	6.67%
(# with GI - C. Diff)		0	0.00%
(# with GI - noro)		0	0.00%
(# with GI - thrush)		1	3.33%
(# with Rs - flu/COVID)		0	0.00%
(# with Rs - pneumonia)		0	0.00%
(# with GU - VRE)		0	0.00%
(# with GU - uti)		0	0.00%
(# with derm - mrsa/cellulitis/shin	gles)	0	0.00%
(# with derm - wound)		1	3.33%
(# with - Other)		0	0.00%







	Monthly Tracking:	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Total
	(# with GI - C. Diff)													0
	(# with GI - noro)													0
	(# with GI - thrush)	1	1											2
(# 1	with Rs - flu/COVID)													0
(# w	ith Rs - pneumonia)													0
	(# with GU - VRE)													0
	(# with GU - uti)		1	1										2
(# with derm - mrs	a/cellulitis/shingles)													0
(# with der	m - wound/abscess)	1					1							2
	(# with other)		1											1
	Other:		nasal										Total	7

	2021-2022	%	2022-2023	%	2023-2024	%	2024-2025	%
Total patients for the year	103		85		77		30	
# pt admitted with pre-existing infection	6	5.83	2	2.35	3	3.9	0	0
# admitted with GI - C. Diff	2	1.94	2	2.35	1	1.3		
# admitted with GI - noro								
# admitted with Resp flu/covid	1	0.97			1	1.3		
# admitted with G.U VRE, pseudomonas								
# admitted with - hepatitis	2	1.94						
#admitted with - HIV								
# admitted with - wound infection								
# admitted with dermal - MRSA	1	0.97			1	1.3		
#pt developed infection during stay	28	27.18	24	28.24	23	29.87	2	6.67
# developed GI - C. Diff	0	27.10	0	20.24	0	23.07	2	0.07
# developed GI - noro	0		0		0			
# developed GI - thrush	6	5.83	11	12.94	9	11.69	1	3.33
# developed Resp flu/covid	3	2.91	5	5.88	3	3.9	1	3,33
# developed Resp pneumonia	0	2.31	0	3.00	0	3.3		
# developed G.U VRE	0		0		0			
# developed G.U uti	10	9.71	4	4.71	6	7.79		
# developed dermal - MRSA/cellulitis/shingles	4	3.88	3	3.53	1	1.3		
# developed dermal - wound infection	2	1.94	0	5.55	2	2.6	1	3.33
# developed Other infection	3	2.91	1	1.18	2	2.6	_	
Total number of infections over year	24	2.52	31	2120	27	2.0	7	
# infections - C. Diff	0		0		0			
# infections GI - noro	0		0		0			
# infections GI - thrush	6		11		11		2	
# infections Resp flu/covid	0		8		3			
# infections Resp pneumonia	0		0		0			
# infections G.U VRE	0		0		0			
# infections G.U uti	9		5		10		2	
# infections dermal - MRSA/cellulitis/shingles	5		5		1			
# infections dermal - wound infection	1		1		1		2	
# infections - Other	3		1		1		1	







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Incident Report – Q1 (April 2024 - June 2024) Rosedale Hospice

Privacy

Incident

• Sharing of a patient's family member's personal information without consent.

Administration

Incident

• Patient admitted and conflicting report given from hospital unit regarding if patient had received his oral meds that morning (including 4 anti-seizure medication). Referring team from AHS acute care informed of incident.

Care & Treatment

Incident

• Blunt filter needle with cap on found in patient's bedding, no syringe attached.

Medical Device/Equipment

Incident

Portable O2 concentrator malfunctioned while patient outside, nursing staff not able to fix with trouble shooting, no
other portable tanks or concentrators available. Patient had to come back inside to reconnect to concentrator in his
room.

Disruptive Behaviours - Sexual Assault

Incident

• Patient inappropriately touched HCA staff member's buttocks twice while transferring to tub despite staff telling him not to touch her there and providing alternative places for him to put his hands during transfer.

Medication

Incident

- Order for medication administration time changed from 1200 to 2000hr, RN accidentally gave at 1200 as she had missed order for time change.
- New orders flag not put up or put up and then slid down after MD wrote order. Order from 1100 not noticed until 1600 transcribed at that time. Email to medical director to remind physicians to fully engage tab at bottom of flag to make sure it does not slide down.
- Pharmacy sent medication supply with incorrect label of concentration. (label read 500mcg/mL and the supply
 was 100mcg/mL). Caught by night shift and fax sent to pharmacy to notify of error. Correct medication
 concentration sent. Does not appear patient received incorrect dose due to error.
- Error in order for acetaminophen on pharmacy generated MAR. Caught when nurse checking new MAR. Fax sent to pharmacy to notify of error.
- Increased med dose not reflected in strip caught after 2 incorrect doses given pharmacy/MD notified.







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- Incorrect dose: 1 mg of hydromorphone as read order 1-2 when dose was 1.2 mg nurse self aware and questioned self after giving.
- Morphine ampules with broken tops sent from pharmacy. Aware of lot # etc.
- Incorrect dose on methadone given (1mg given instead of 0.5mg), noticed when count being dose at next shift change. Human error.
- Missed dose (messy hand written MAR).
- Medication order not written by physician despite intent to leave order.
- Continuous medication order not clearly written leading to much confusion when Nurse needed to transcribe to MAR.
- Medication discontinued on admission with note to see new order, new order not written by physician despite intent. Missed medication order not caught until 2 days later.
- 1630 BGM missed & correlating dose of insulin not given; error not caught until 2100.
- Wrong dose of ibuprofen administered nurse gave 400mg ibuprofen per patient request, physician order was for 200 - 300mg
- New patient MAR not sent by pharmacy for 2 weeks in a row, requiring Nurse to transcribe MAR by hand.

Falls

Incident

All falls related to the patients having changing functional status with lack of insight into their changing abilities.
 In 3 of the instances, the patients were bending down to pick something up off the floor and lost their balance. In the 4th instance, the patient was attempting to change their clothing independently and lost their balance







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Incident Report – Q2 (July 2024 - September 2024) Children's Grief Centre

• No Incidents to report for Q2







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OHS Committee Report – Q2 (July 2024 - September 2024) Rosedale Hospice & Sage Centre

	Rosedale
Good Catches (OHS Reportable)	• 10: 8 security - doors unlocked on evening rounds, 2 fire – oven left on.
Injuries related to conditions or maintenance of equipment, building or grounds	 1 potential back injury – staff member when getting up at end of shift, felt pain in back. No identifiable event over preceding shift to cause injury. Submitted to WCB just in case. Their investigation ruled it was not a workplace incident and denied claim coverage. Staff returned to work in 2 days. No further follow up needed. 1 cut – staff member cut hand on whiteboard in hallway as she was going by. Minor first aid performed and documented on first aid record. House manager covered sharp edges with plastic covers. First aid record to be stored in separate First Aid Records Binder for 3 years. No further follow up needed.
Injuries related to patient lifting or transfers	• N/A
Reported incidents of patient/client violence	• N/A
Education & Resources aimed at Employee Wellness	Contemplative practice education day: September 27, 2024.
Mandatory Education driven by OHS initiatives	Fall 2024: Potential topics are indigenous awareness, staff wellness.
	SE OFFICE
Good Catches (OHS Reportable)	9: 7 security – lights on and blinds open overnight, doors not dead-bolted, doors left ajar, 1 fire – dishwasher left on over the weekend, 1 slip – water spill found and cleaned up.
Injuries related to conditions or maintenance of equipment, building or grounds	• N/A
Injuries related to patient lifting or transfers	• N/A
Reported incidents of patient/client violence	• N/A
Education & Resources aimed at Employee Wellness	 Sit restarting at main office, Social committee has planned schedule for next year, Halloween costume contest
Mandatory Education driven by OHS initiatives	Fall 2024. Potential topics: JHI review, some component of violence prevention, hand hygiene, emergency preparedness, how to handle difficult calls.

Board Advocacy

- Thanks to Roxanne, Mylene, Sheri, and Anita for attending Sage Soiree and Angela for her speech as the opening event!
- Thanks Sheri for donating the Philharmonic singers – see reminders → for more details.
- Thanks Bill for your service on the Board since joining in January 2020!

Reminders

- ☑ December 5 5:30pm Staff Holiday Party at Heritage Park. RSVP to Vicki asap.
- ☑ Dec. 14 11:00am to 3:00pm Festive Open House @ Rosedale. From 11-12 members from the Calgary Philharmonic will be preforming. Board members welcome!

Stories & Feedback

Another Google 5 Star Review:

Rosedale Hospice is a place where the life and wishes of a patient are of utmost importance and their death a dignity to be protected. We as a family cannot express how thankful we are that our mom/grandma/great grandma spent her final week there.

They provided a caring and safe space for us all to be together with her. They were so responsive to her every need and ask, and remarkably to ours as her grieving family.

Rosedale Hospice now holds a very special place in our memories as it was home to a loving and peaceful end to our loved one's life. Words really can't express our thanks.







Strategic Priorities

Excellence in Care



We strive to provide the best care possible.

Our services are person-centred and align with client, patient, and family needs.

People

People are at the centre of everything we do.



It is important to attract and retain staff/volunteers. People can be their authentic selves. People recommend us.

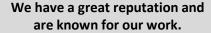
Sustainability



We have the resources to carry out our mission.

We have a clear business focus and make the most out of every dollar.

Brand





Our brand aligns with our services, our messaging is clear, and our website is effective.

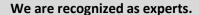
Quality & Safety



A focus on quality and safety is infused in every activity.

We strive to continuously improve. Risk management and contingency planning are priority. Good-catch culture.

Expertise





We are known as thought leaders and a workplace of choice. We are capacity builders. Evaluation of our services is a key function.







November 2024



Excellence in Care

- CGC recognized Children's Grief Awareness Day on Nov. 21 with the "Light the Porch" initiative encouraging people to put luminaries on their porches on the 21st and eventing memorial event at our SE Offices.
- Open house Dec. 14 for Rosedale families, volunteers, and staff.
 Philharmonic choir performance and RBC volunteers offering 3 activity stations.



People

- The new Director of LAIC, Rani Murji, will shadow with Ruth on December 16-17, and then officially start January 6.
- A CGC Counsellor has left on maternity leave and another new Counsellor started Nov.
 We still have 2 positions vacant.
- LAIC is hiring another Counsellor to meet the demand of young families needing support during illness. Interviews will be conducted by the 2 Directors on Dec. 16 & 17.
- Rosedale staffing (patient care and house staff) remain stable. Topping up casual pools for holidays coverage.



Sustainability

- \$1 million dollar major gift from Al Osten was received November 12. The gift has been moved to join other designated funds in our high interest savings account which currently has the best interest rate (over shorter term GIC's). An agreement for the \$1 million needs to be completed.
- In August we submitted an application for funding with the Calgary Foundation for LAIC (approx. \$100K ask). We have made it to the next step a meeting with the grant committee (Dec. 2).
- We received a small increase from AHS ("accommodation funding") for Rosedale and it was retroactive to April 1.
- We heard from Rotary Club North that they are giving funding for small elevator at Rosedale. Amount to be confirmed but we think it's \$35K)
- Sage Soiree on target to be just over budget
- We received our casino proceeds \$84K (\$9K over budget)







November 2024



Brand

- A press release about Children's Grief Awareness Day was sent to media.
 Calgary Tower and Olympic Plaza were lit up blue in recognition of Children's Grief Awareness Day.
- We have both a tv interview and radio interview early December for the the Calgary Children's Foundation telethon in partnership with Global news and QR770 news.



Quality & Safety

- Patient Care volunteers are reviewing the buddy shift checklist to provide feedback for updating it.
- LAIC Companion Program Volunteers are meeting monthly to provide feedback, and volunteers are now incorporated in the volunteer training.
- I met with an alternative insurance provider and will work to get a proposal about business and D&O insurance which could save at least \$10K annually. I will share more about this in person.
- Approached by Health Quality Council of Alberta to provide feedback on workforce stress, burnout, wellness, etc. for a report to AB Health.



Expertise

- 150 people reached through various education events (Dying to Know, inservices for schools, AHS)
- Toured Rosedale for social work staff from new Cancer Centre.





