



VICTORIA  
HOSPICE

ANNUAL  
REPORT  
2016–17







*"Hospice has opened up my eyes to how you can live, how much happier you can be, how kind people can be."*

Gwen Fox, 93

Victoria Hospice patient, 2017



**VICTORIA  
HOSPICE**

## **OUR VISION**

Quality end-of-life care for all

## **OUR MISSION**

To enhance the quality of life for those facing advancing illness, death and bereavement through skilled and compassionate care, education, research and advocacy

## **OUR VALUES**

Respect

Commitment

Compassion

Collaboration

Integrity

Excellence

# THE VICTORIA HOSPICE SOCIETY BOARD WELCOMED THREE NEW DIRECTORS IN 2016–17

## BOARDS OF DIRECTORS

### Victoria Hospice and Palliative Care Foundation



Mark  
Appleton  
PRESIDENT



Clark  
Lawrence  
TREASURER



Deedrie  
Ballard  
DIRECTOR



Rob Gareau  
DIRECTOR



Colin  
Weavers  
DIRECTOR

### Victoria Hospice Society



Rob Gareau  
PRESIDENT



Deedrie Ballard  
VICE PRESIDENT



Clark Lawrence  
TREASURER



Brian Bolton  
DIRECTOR



Brenda Canitz  
DIRECTOR



Dr. Eric Charman,  
O.B.C.  
DIRECTOR



Steve Clark  
DIRECTOR



Terry Farmer  
DIRECTOR



Eileen Harper  
DIRECTOR



Zahra Rayani-  
Kanji, DIRECTOR



Marguerite  
Rowe, DIRECTOR



Tim Schober  
DIRECTOR

In September 2016, we welcomed **Terry Farmer**, Chair of the Board of Accent Inns, the award-winning, family-owned BC hotel chain which he founded in 1986, and **Marguerite Rowe**, an experienced healthcare executive with a consultancy specializing in strategic planning, change management, and continuous quality improvement.

Our most recent board director, **Brenda Canitz**, joined the board in March 2017. Brenda is a Medical Adjudicator with the Federal Government, has held senior nursing leadership positions with both the provincial and federal government, and has experience as an administrator across the healthcare continuum.

We asked Brenda, who spent several years as a volunteer on the Inpatient Unit, what she values most about Victoria Hospice. “The focus is always on the needs and desires of patients and their families,” says Brenda.

“Victoria Hospice is known worldwide for its innovative programs of community supports, interdisciplinary teams and extensive volunteer program. As a new Board Director, I hope we can continue to develop these services and integrate new and innovative models of support and services to our clients and their families. I am very interested in how we can continue to grow and evolve to be able to address the palliative care needs in the community.”

**The Victoria Hospice and Palliative Care Foundation** stewards and manages endowment and investment funds, principally through the cooperative program with the Victoria Foundation.

**The Victoria Hospice Society** determines annual funding priorities and ensures the organization’s mission and values are upheld.

# A MESSAGE FROM OUR CEO AND BOARD PRESIDENT

In this year's Annual Report, we shine a light on our community. It's staggering to think that 7,190 individuals and businesses in our community supported Victoria Hospice last year. The generosity of these donors funded more than half of our annual operating costs of \$8 million. Thanks to these individual acts, more than 1,000 patients received compassionate end-of-life care and 2,808 people were helped by our Bereavement Services following the death of a loved one in 2016-17.

This was an exceptional year in fundraising thanks to two gifts from ordinary Victorians who left extraordinary gifts in their Will. The estates of Lloyd A. Barrett and Judy Kedwell totalled \$3.8 million.

The resulting surplus has been earmarked to expand access to palliative care services, a goal we set out in our 2015-18 Strategic Plan, and remain wholly committed to achieving. Demographic projections indicate that the need for end-of-life care in our region will grow substantially in the years to come. According to Dr. Kelli Stajduhar, an internationally known expert in hospice palliative care research based at the University of Victoria, palliative care is on the cusp of significant change across Canada:

"Palliative care services and organizations are going to need to re-think how to best expand their scope to serve a wider and broader population of people with chronic life-limiting conditions brought about by the aging demographic. It needs to expand its vision beyond the service provision model to re-embrace its community-based roots."

In 2017-18, we will engage our stakeholders to formulate our next strategic plan, which will focus largely on our services, service delivery models, and the infrastructure required to support growth. In partnership with Island Health, we look ahead to determine how best to respond to a growing need for end-of-life care in our community.



Rob Gareau  
President, Victoria  
Hospice Society Board  
of Directors



Mischelle vanThiel  
Chief Executive Officer,  
Victoria Hospice

## Spotlight on Dr. Kelli Stajduhar



Collaboration is one of our core values at Victoria Hospice. We are fortunate to team up with award-winning scholars like Dr. Kelli Stajduhar, a leading hospice palliative care researcher based at the University of Victoria.

Last year, Dr. Stajduhar engaged in a number of research projects and workshops with Victoria Hospice clinical and educational staff. She says she values the invitations to collaborate and is impressed with our desire to ensure care and support is informed by research.

*"Victoria Hospice plays a pivotal role in the continuum of services provided for people who are dying and their families in our community. It is not a somber environment but one in which love, joy, and peace can be experienced in the midst of what can sometimes be challenging times."*

# CARE IS OUR CORE WORK

Our team of highly skilled physicians, nurses, counsellors, and volunteers provide quality end-of-life care for patients and their families on our inpatient unit and in the community.

## Who Do We Care For?

Our interdisciplinary team cares for patients, their families, and loved ones throughout their end-of-life experience.

In addition to providing compassionate, evidence-based palliative and hospice care, we offer range of services such as individual and group counselling, and practical resources such as help with funeral or memorial arrangements.

Following a death, highly-trained bereavement volunteers provide check-in phone calls with families for up to one year. Our care even extends to the broader community through our public bereavement programs.

## Where Do We Care?

### CARE IN THE COMMUNITY

Our Palliative Response Team (PRT) provides crisis intervention for patients and families in their homes. The PRT service includes 24-hour, on-call consultation and treatment by nurses and counsellors for symptoms that might otherwise require admission to the hospital, plus counselling through times of crisis.

Victoria Hospice palliative care specialist physicians also provide consultations for patients in homes, care facilities and hospitals.

### CARE ON THE UNIT

Our inpatient unit is located on the 3rd floor of the Richmond Pavilion at the Royal Jubilee Hospital and accommodates 17 patients.

- Seven beds are for patients requiring complex symptom management. **Average length of stay in 2016-17: 8 days**
- Nine beds are for patients who are at end-of-life. **Average length of stay in 2016-17: 17 days**
- One bed is for respite care. **Average length of stay in 2016-17: 8.5 days**
- **Number of patients admitted to the inpatient unit in 2016-17: 517**

## 2016–17 HIGHLIGHTS:

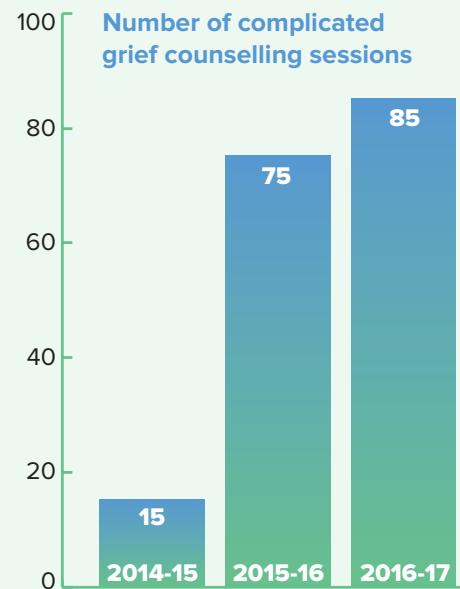
 We undertook an in-depth reassessment and redesign of several clinical and operational areas. Clinical teams focused on the analysis and implementation of a new nursing model. We also reviewed our community programs.

 We recruited for positions in nurse leadership, several new RNs and LPNs, Health Care Aides (a role introduced with the new nursing model), Coordinator of Spiritual Health, and Community Counsellors, with the goal of ongoing quality improvement and service expansion.

 We welcomed three new part-time physicians and expanded the number of consults and visits to patients in the community.

 We engaged in a process of patient journey mapping with Island Health's Palliative End-of-Life Care program, to identify service gaps and solutions related to community patient care.

 Bereavement Services continues ongoing development of its Telehealth counselling pilot project and its Complicated Grief Program, the first of its kind in Canada.





## Nursing Team Builds Stronger Connections

In 2017, the nursing team actively engaged in an initiative called the **Hospice Unit Nursing Team — Building a Stronger Connection**. This project involved developing a new charter and strategies to improve how nurses work together in a more cohesive and supportive way to enhance patient care. Says the team,

*"We would like to share our success, to become role models for healthy workplace relationships and present this as a new model for team building in other care settings."*

## Honouring Our Patients

Last year we redefined the title and role of *Coordinator for Religious and Spiritual Care* to *Coordinator of Spiritual Health*.

When Eshu Martin first assumed the role, he wanted to explore what rituals had been done at Victoria Hospice in the past. He asked if there were any practices or traditions that team members felt were particularly meaningful.

As a team, they decided to reintroduce a form of *Patient Honouring*. After a patient has died, a singing bowl is sounded as an invitation for all Hospice team members to gather and stand together in gratitude, and silent farewell to the patient. Eshu explains,

*"This brief ritual allows us to say, 'We thank you for the gift that was your life, and for the honour of caring for you until your death. Together we bid you farewell.'*

*"By participating in these kinds of rituals, we support each other in engaging wholeheartedly with our patients and families, and when the time comes, in letting go, so that we can engage wholeheartedly again with a new patient that comes into our care."*



Nurse Brianne Smith and Eshu Martin with the singing bowl

# "HOSPICE WAS THERE FOR ME THROUGH EVERYTHING."

## While I Breathe, I Hope

Nine weeks before Gena Pfister's husband John died of cancer in 1997, the couple embarked on a two-week cruise to Alaska. Though John was unwell, Gena says he enjoyed himself so much she would have kicked herself if they hadn't gone. "John was happiest on the water."

They shared a deep love of adventure and enjoyed many a voyage at sea. In 1986 they purchased their third boat named *Dum Spiro Spero*, Latin for "While I Breathe, I Hope," a 10.5 meter Dufour steel pilothouse. They lived on the boat in Toronto until 1991 when they moved to beautiful Vancouver Island. They added a houseboat with all the modern conveniences and eventually docked at Angler's Anchorage in Brentwood Bay.

## The Palliative Response Team Provides Care Afloat

While still on the cruise in Alaska, Gena called to arrange an appointment with his oncologist for the day after they returned. "What did you go and do that for?" asked John wryly. Gena says he was as stubborn as they come, but he eventually agreed that it was time for hospice care. Four weeks later John's sister, Edna, arrived from her home in England to help look after him.



Gena had arranged for the Victoria Hospice Palliative Response Team (PRT) to provide care for John at home. *Dum Spiro Spero* was a modest home but one that was comfortable even without physical connections to dry land for long periods of time. John was relaxed there and the care team made life easier for Gena and Edna. "It was such a relief to know that we were never alone," she says.

Each day for the last three weeks of John's life the PRT climbed aboard their home at sea. Gena recalls those early summer visits fondly. While the nurses ensured that John's pain was managed, Gena had some reprieve from the role of caregiver and support from the counsellor.



In the evening, John would rest in the cockpit and ponder the sunset reflecting on the bay. He would talk about life—and death—with the visiting palliative care providers.

Thanks to the Palliative Response Team, John Crebbin was able to stay at home on their sailboat until he died on July 14th 1997.

### Love After Loss

In September of 1997, Gena joined a bereavement support group offered at Victoria Hospice. After losing John, she had no intention of ever marrying again. She didn't think it possible to find another soul who could match her passion for the sea.

On the first day of October at the group counselling session, Gena sat down across from a man wearing a sweatshirt with a line-drawing of a boat on the front. "I thought to myself, I bet I'm the only person in this room that knows what kind of boat that is."

The man was Hans Pfister, whose wife had recently died in Hospice care. Hans and Gena spent more and more time together, and their hearts opened up. "When I got to know Hans, I realized we had so much in common," she says.

They got married and travelled a great deal. Indeed Gena, now in her seventies, has voyaged on 37 cruises and visited 113 countries. Hans, now in his mid-eighties, is battling severe dementia and has been living in a care home for more than two years. Gena visits him several times a week.

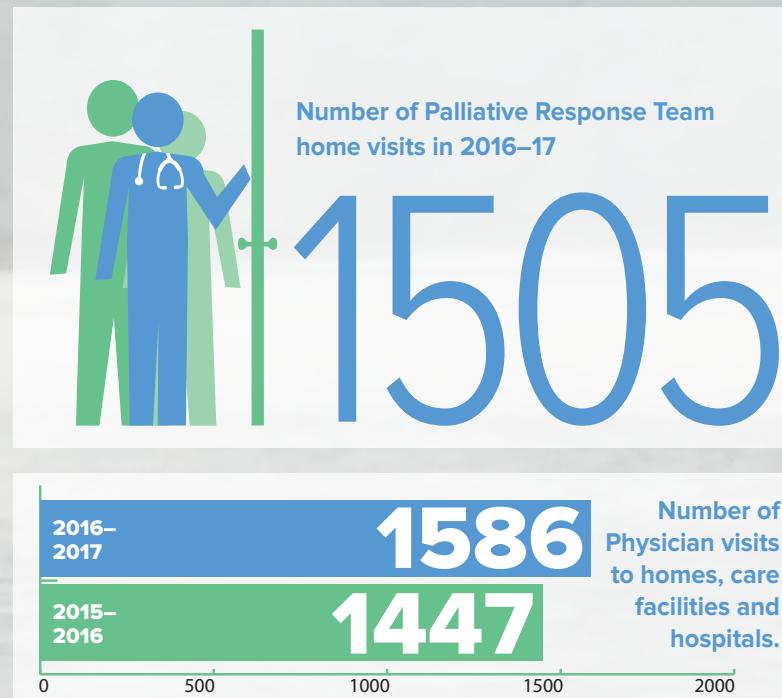
### A Mariner's Legacy

Gena's adventurous spirit is anchored by a no-nonsense, practical approach to life. Years ago, she and Hans discussed their estate plan and established a charitable legacy through their Trust.

Victoria Hospice is honoured to be one of several charities they selected. "Hospice was there for me through everything," she says. "It gives me great pleasure to know my gift will help other families."



Thank you, Gena and Hans, for your foresight, generosity, and tremendous legacy of compassion.



# EDUCATION AND RESEARCH

Thanks in large part to our generous community donors, Victoria Hospice engages in education, training and research to develop evidence-based clinical practices and to advance the field of palliative care across Canada and around the world.

Physicians, nurses, pharmacists, social workers, counsellors and other healthcare professionals look to Victoria Hospice to help them build basic, advanced, and complex skills in the field of palliative care.

We are proud to report that in 2016–17, the Education and Research department continued its growth trajectory with a total **1,339 learners**, up from 937 last year.

External Education (# of Learners)	2015–2016	2016–2017
Palliative Care Medical Intensive (5-days)	286	309
Psychosocial Care of the Dying & Bereaved (5-days)	77	78
Home Care & Hospital Nurse Training/ Orientation	40	69
Medical Learners	34	24
Practicums (nursing, counsellors & social workers)	7	6
Lectures, Workshops & Forums	254	579
Academic Half Days for Clinicians	24	22
<b><i>Subtotal: External Education Learners</i></b>	<b>722</b>	<b>1,087</b>
Internal Education (# of Learners)		
Lectures, Workshops & Forums	185	218
Staff Orientation (clinical, general & PRT)	30	34
<b><i>Subtotal: Internal Education Learners</i></b>	<b>215</b>	<b>252</b>
<b>TOTAL LEARNERS</b>	<b>937</b>	<b>1,339</b>

## 2016–17 HIGHLIGHTS:

● Expanded our partnerships with the University of Victoria, University of British Columbia and Pallium Canada and formalized new partnerships with Camosun College, City University, Dalhousie University, UNBC, University of Calgary and Yorkville University for education activities (practica).

● Our two flagship courses (*Palliative Care Medical Intensive* and *Psychosocial Care of the Dying and Bereaved*) were reviewed to align with palliative care professional competencies.

● We trained 454 professionals through both courses this year (up from 393 last year).

● We continued to expand the reach of our courses by bringing the *Palliative Care Medical Intensive* course to the BC Northern and Interior regions.

● We established a new partnership with Island Health's Centre for Inter-professional Clinical Simulation Learning to develop workshops for Victoria Hospice instructors in 2017.

● We successfully engaged seventeen clinical staff in research and quality improvement initiatives; an increase

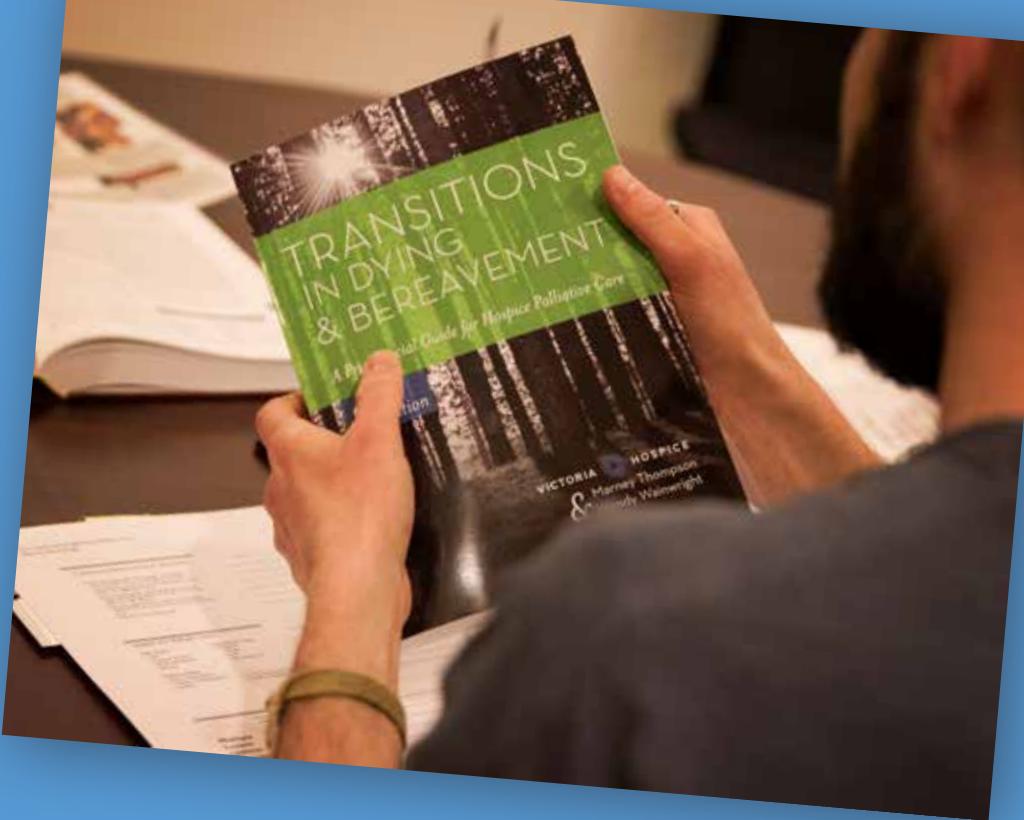
from 10 last year and three the year before. Three projects have been completed and manuscripts submitted to peer review journals.

● We continued to enhance our strong reputation for training and education of medical learners. In 2016–17 we trained 23 Medical Residents—physicians seeking additional training before they go into Family Practice and eight other students, fellows and trainees. The 2017 graduating class of family medicine residents selected Victoria Hospice as the “Rotation of the Year”. See story on page 14.

# Award-Winning Textbook Gets an Update

First published in 2003, the second edition of *Transitions in Dying & Bereavement – A Psychosocial Guide to Hospice Palliative Care* was published in the fall of 2016.

Written by leading experts at Victoria Hospice, this resource for healthcare professionals encompasses the journey from diagnosis to bereavement, detailing appropriate assessment questions and interventions for each transition that dying patients and their families may face.



## Vancouver-based Doc Learns About Palliative Medicine at Victoria Hospice

*“In the 40 years of medical practice, the two courses I took at Victoria Hospice—Palliative Care Medical Intensive and Psychosocial Care of the Dying and Bereaved—were the best continuing education courses I’ve ever taken,” says Dr. David Hunt.*

Dr. Hunt practiced Emergency Medicine in Downtown Vancouver teaching hospitals for 18 years and then practiced pain medicine at the Complex Pain Centre at St Paul’s Hospital for more than 20 years. He recently joined the North Shore Palliative Pain Team at Lions Gate Hospital as a Palliative Care Physician. Says Dr. Hunt,

*“At Hospice, it’s not just a course, it’s an educational experience. Both courses were extremely well-organized with excellent content, textbook, delivery and pacing. Not only did the courses prepare me well, I enjoyed the collegial atmosphere and the opportunity to connect with Victoria Hospice staff. They truly are experts in the field.”*



# VOLUNTEERS

A volunteer's gift of time and deep caring releases a ripple effect felt across the entire organization and beyond. At Victoria Hospice, our volunteers' actions enable paid staff to provide enhanced services to hundreds of patients and families on the Hospice unit and in the community. Simply put, volunteers play an essential role in the success of our programs and services.

**15,274**

#### **Number of volunteer hours contributed to patient care, governance and support, by**

257

## active hospice-trained volunteers in 2016–17



## 2016–17 HIGHLIGHTS:

- |   |  |  |   |
|---|--|--|---|
|  We welcomed a new Manager of Volunteer Services, Sarah Beihsé. She has spent a great deal of time reviewing, refreshing and reinvigorating all aspects of our volunteer services program. |  An Island Health-wide implementation of Health Care Aides (HCA) means that much of the work of our Unit Volunteers is now restricted to the unionized roles of HCAs. As such, we are exploring a variety of new roles to keep our volunteers engaged and expanded ways to support our patients and families with volunteer services. |  Some of our exciting changes include the creation of new mentorships, in-service training, Saturday support sessions, departmental planning days, team meetings, celebrations, spotlights and volunteer resources. |  We revised processes for volunteer recruitment, intake, orientation, assignments and scheduling to increase volunteer capacity, opportunities and engagement. |
|---|--|--|---|



*"My work here gives me a deep appreciation for family, friends, health and the beauty around us."*

Mary, Spiritual Health Volunteer



*"Don't put things off, hug your loved ones, and be kind to everyone."*

Peggy, Community Volunteer



*"Contrary to popular perception, it's not a gloomy place. It's a place often filled with laughter and joy as families gather in support of their loved ones."*

Harry, Life Stories Volunteer



*"Connecting with others from the heart is a loving, caring and joyous way to live."*

Chris, Bereavement Services Volunteer



*"Music is a language that speaks when words fail."*

Suellen, Bedside Singer Volunteer

## Victoria Hospice Volunteers Exemplify Leadership, Compassion, and Dedication

In January 2017, **Deedrie Ballard** (Victoria Hospice Society Board Vice President), **Peter Malcolm** (former Victoria Hospice and Palliative Care Foundation Board President) and **Graham Robertson** (*Cycle of Life Tour* founder)



received the Sovereign's Medal for Volunteers, presented by The Honourable Judith Guichon, BC's Lieutenant Governor. The medal recognizes exceptional volunteers from across the country for their "significant, sustained, and unpaid contributions to their community."

# COMMUNITY SUPPORT & DONATIONS

## Community support from our generous donors is critical to our ongoing operation.

Our partners at Island Health fund roughly half of Victoria Hospice's \$8 million annual operating budget, but the remainder is raised through the philanthropic support of the Greater Victoria community by way of donations, sponsorships, grants, special events, and legacy gifts.

Donations ensure that patients receive expert palliative care at our hospice unit and at home through 24-hour support from our Palliative Response Team and that their families receive specialized counselling services and support. Donors also support much of our education and research initiatives.

2016–17 was another exceptional year in fundraising. Our overall revenue increased by 100%, a feat made possible by generous estate gifts.

*We receive all  
gifts—including the  
gift of time from our many  
volunteers—with deep  
gratitude.*

Through these intentional acts of generosity and kindness, we received the two largest gifts in our history, from the estates of ordinary Victorians, Lloyd Barrett and Judy Kedwell, totalling \$3.8 million. Overall, we received \$5.1 million from estates—70% of this year's donation revenue and an increase of 239% over the previous year.

## Community Events

In 2016, the *Cycle for Life Tour*, an annual group cycling event each July, had a record-breaking year, raising \$152,856. Other Hospice-led events include *Hike for Hospice* in May and *Celebrate a Life* in December.

Dozens of third-party events also help us increase awareness in the community and raise much-needed funds. In total, third-party events raised nearly \$300,000 in 2016–17. Our largest third-party fundraising event is *Soccer is the Anneswer to Cancer*, which has raised more than \$265,000 for hospice care in our community since its inception.

## Anneswer to Cancer – Community Sports Scene Scores Big for Victoria Hospice

In 2010, Brett Hyslop's life was forever changed when his mother, Anne, was diagnosed with terminal cancer.

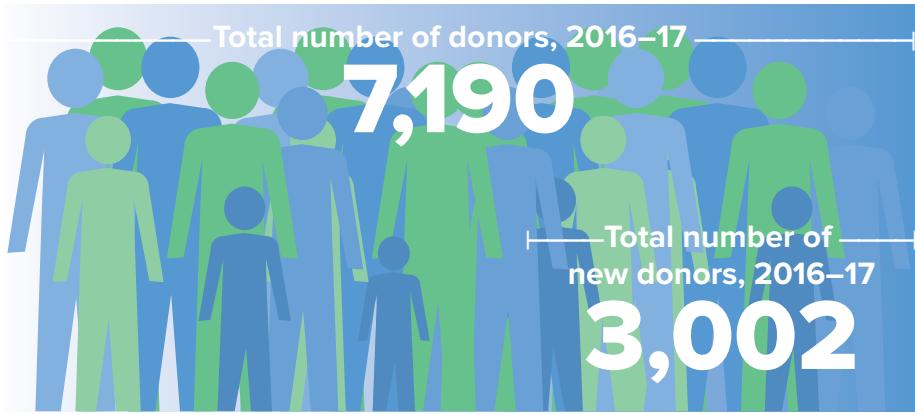
"My mum only spent 12 hours at Victoria Hospice but I am forever grateful to the staff who cared for her—and me—with such a deep level of compassion," shares Brett.

As a gesture of thanks, and a tribute to Anne, Brett and colleague Steph Steiner, launched *Soccer is the Anneswer to Cancer*, which is now Victoria Hospice's largest third party fundraising event.

Since 2016, *Anneswer to Cancer* has invited the Saanich Junior Braves Hockey Team into the fold. "Partnerships with other community sports teams enable us to expand our reach and raise awareness," says Brent. "For me, the best spin-off is introducing so many children to the concept of charity. We're teaching them the importance of giving back, because it's the right thing to do. I know my mom would be proud!"

Anne's granddaughter  
Annejolie





**Total Revenue for Operations  
2016–17**



## Hike for Hospice comes to you

In 2016, we launched *Hike On Your Site* as part of our annual *Hike for Hospice* memorial walk and fundraiser.

*Hike On Your Site* enables seniors with mobility issues to participate in the event by walking on location at their retirement communities. Five retirement communities participated in 2016 and by 2017 that number jumped to thirteen.

*Hike On Your Site* participants not only raised funds and awareness for Victoria Hospice, they engaged in physical activity and built a sense of community and purpose with their fellow residents.

AT LEFT: Centenarian Dot Larsen of Legion Manor Victoria, hiking around her building, undeterred by the pelting rain.

## Local Business Becomes Long-Term Sponsor of *Cycle of Life Tour*

In February 2017, Think Communications (a local Enterprise IT and Cloud Solution Provider) became the lead sponsor of the *Cycle of Life Tour*. The annual two-day group cycling fundraiser has raised more than \$365,000 for hospice care on Vancouver Island, two thirds of which has gone to Victoria Hospice.

"The staff at Victoria Hospice are true angels and this is our way of giving back," says David Saele, President and Founder of Think Communications. David and business partner Tony Woods have both been touched by end-of-life care.

In 2013, they each lost a parent to cancer four days apart and they say they were blessed to have hospice palliative care in their final days. "The love, support, kindness and compassion towards our parents and families changed our lives and helped us through very difficult periods," says David.

"*Cycle of Life* has become part of our company legacy," David says. They don't just give back; they actively participate each year. David, Tony and several staff make up the cycling team jovially known as *Them Think Boyz For Hospice*.



# MEDICAL RESIDENTS SELECT VICTORIA HOSPICE AS “ROTATION OF THE YEAR”

Established in 2004, the Island Medicine Program (IMP) delivers the University of British Columbia Doctor of Medicine Undergraduate Program in collaboration with the University of Victoria. IMP Family Medicine residents participate in rotations throughout the year in fields as varied as Psychiatry, Orthopedics, and Maternity.

In 2016-17, the graduating class of the IMP program awarded Victoria Hospice with the prize of Rotation of the Year. Meaning that, of all the rotations the residents experienced, Victoria Hospice was the best.

We asked medical Resident Kelsey Louie about his time at Victoria Hospice:

*“Staff were always available and eager to share their knowledge. They were fantastic role models. The physicians helped us focus on pain and symptom management and emphasized connecting with patients and their families. I really appreciated the focus on the patient experience. It was a nice change of pace to not be overly concerned with labs and imaging and paperwork.”*

*“What makes Victoria Hospice special is its caring and compassionate multidisciplinary team including nursing staff, palliative physicians, spiritual counsellors, and community care providers. As well, the volunteers also helped make it a special place for families, continually checking in and offering food, drinks or simply further emotional support.”*

BELOW FROM LEFT: Dr. Jody Anderson, Dr. Gail Sager, Dr. Christian Wiens and Dr. Christine Jones



# HOSPICE PROVIDES CONTINUING COMFORT

Katie graced the cover of last year's Annual Report with her mother, who spent her final months at Victoria Hospice.

She finds comfort in returning to the Hospice Rooftop Garden to reflect under her mother's favourite tree, the Japanese maple.

The Rooftop Garden is one of the many special touches that help distinguish the care and services we provide. Says Katie:

*"Hospice didn't feel like a hospital at all. It felt like home. And the garden was a sanctuary for my mom."*



## A Steady Flow of Support



In 1980, Gerald Moreau's brother received palliative care at home from an innovative team of doctors, nurses and counsellors – the founders of Victoria Hospice. His brother died in January 1981. Since then, Gerald has donated to Hospice each and every month.

"I am pleased to give to Victoria Hospice," he says. "I do it with conviction."

When his beloved wife Henriette died of cancer in 2007, the Victoria Hospice Palliative Response Team cared for her during her final weeks. Says Gerald: "They treated Henriette with such compassion and dignity." Not long afterwards, when Gerald was struggling with his grief, he picked up the phone one morning at 2am and called the Victoria Hospice Unit. "The woman I spoke to was so kind; she let me talk for as long as I needed."

Gerald has been a monthly donor for more than 35 years! His steadfast commitment to Victoria Hospice enables us to respond to families in need during times of medical or bereavement crises. Monthly donations provide us with a steady and dependable flow of resources.

Thank you, Gerald, and all of our loyal donors.

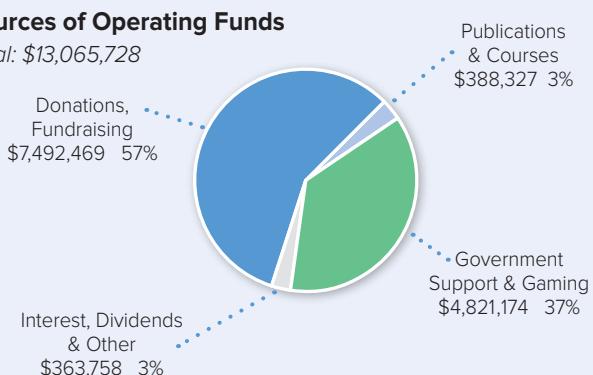
**Gerald Moreau, C.M., Ph.D.** is a Member of the Order of Canada and Professor Emeritus of the University of Victoria.

## Statement of Combined Operations Fiscal Year ending March 31, 2017

Operating Revenues	Fiscal 2017	Fiscal 2016	Fiscal 2015
Government Contracts	4,771,174	3,849,144	3,947,518
Donations & Fundraising	7,492,469	3,497,969	3,252,179
BC Gaming Commission	50,000	54,070	51,035
Thrift Boutique (closed)	0	0	184,748
Publications / Courses	388,327	398,241	392,038
Interest & Dividends	366,083	292,451	220,983
Other	(2,325)	82,697	71,127
	<b>13,065,728</b>	<b>8,174,572</b>	<b>8,119,629</b>
Operating Expenditures			
In Patient Nursing	2,921,097	2,966,092	2,739,561
Medical	843,253	789,101	758,295
Counselling / Bereavement / Spiritual	940,400	841,438	924,718
Community & PRT Nursing	859,838	866,347	875,367
Volunteer Services	137,111	127,892	134,514
Publications / Courses	300,673	231,646	250,316
Education & Research Services	334,316	362,499	306,369
Administration / Finance / Communications	991,464	765,860	949,255
Donations & Fundraising	688,175	600,023	694,425
Thrift Boutique	0	0	141,005
Committees / Projects / Misc.	224,958	66,433	174,733
Amortization	52,468	44,625	118,362
	<b>8,293,753</b>	<b>7,661,956</b>	<b>8,066,920</b>
Operating Surplus (Deficit)	<b>4,771,975</b>	<b>512,616</b>	<b>52,709</b>
Endowment & Investment Items			
Donations to Endowments	0	0	0
Endowment Fees & Valuation Gains (Losses)	262,226	(197,622)	210,555
Investment Fees & Valuation Gains (Losses)	331,188	(223,285)	226,451
	<b>593,414</b>	<b>(420,907)</b>	<b>437,006</b>
Change in Net Assets	<b>5,365,389</b>	<b>91,709</b>	<b>489,715</b>

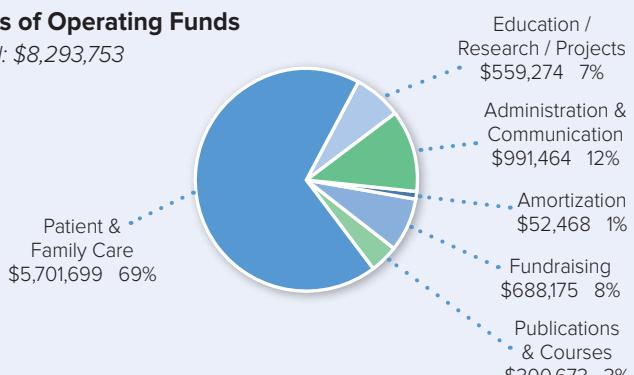
### Sources of Operating Funds

Total: \$13,065,728



### Uses of Operating Funds

Total: \$8,293,753



## Statement of Combined Financial Position Fiscal Year ending March 31, 2017

Assets		Fiscal 2017	Fiscal 2016	Fiscal 2015
Cash & Prepaids		2,127,290	303,031	990,238
Accounts Receivable		83,310	48,314	167,903
Publications Inventory		15,818	7,912	12,567
Endowment & Restricted Funds		5,967,606	2,969,319	3,139,965
Investment & Insurance Funds		5,082,820	4,463,401	3,501,614
Equipment & Building		234,603	190,650	142,011
Irrevocable Trust Receivable		<u>95,601</u>	<u>178,934</u>	<u>178,934</u>
		<u>13,607,048</u>	<u>8,161,561</u>	<u>8,133,232</u>
Liabilities				
Payable to Vancouver Island Health Authority		409,188	309,627	236,522
Accounts Payable & Accrued Liabilities		341,262	335,026	423,874
Deferred Revenues		<u>271,977</u>	<u>297,676</u>	<u>355,228</u>
		<u>1,022,427</u>	<u>942,329</u>	<u>1,015,624</u>
Equity				
Invested in Capital Assets		234,603	190,650	142,011
Endowment Funds (externally restricted)		1,917,606	1,917,606	1,917,606
Retained Investment Earnings (internally restricted)		0	1,051,713	1,222,359
Reserves Fund (internally restricted)		4,050,000	0	0
Operating Fund Balances (unrestricted)		<u>6,382,412</u>	<u>4,059,263</u>	<u>3,835,632</u>
		<u>12,584,621</u>	<u>7,219,232</u>	<u>7,117,608</u>
		<b><u>13,607,048</u></b>	<b><u>8,161,561</u></b>	<b><u>8,133,232</u></b>

## TREASURER'S REPORT

Victoria Hospice's 2016–2017 fiscal year was one for the record books. The Society and Palliative Care Foundation Statement of Combined Operations for the year shows an Operating Surplus of \$4,771,975, driven by the two largest estate gifts in Victoria Hospice's 34-year history, combined with strong investment performance and effective cost control by management.

Prior year endowment and investment fund valuation losses were recovered with further gains and higher invested balances increased investment income and the overall combined surplus to \$5,365,389. The surplus allowed for the funding of a new Operating Contingency Reserve within the Foundation to support future Society operations for a limited time in the case of a shortfall in fundraising revenues, which have represented more than 40% of the Society's operating revenues in recent years.

The annual external audits of both the Society and Palliative Care Foundation produced unqualified audit reports and did

not identify any financial reporting concerns, misstatements, or internal control deficiencies. (*Copies of the reserves policy and audited financials are available upon request.*)

The 2017-2018 fiscal year is off to a good start. We commenced the second year of our three-year Service Agreement with VIHA which provides a significant increase in funding from previous contracts. Also, the Society received half of its \$1.4 million fundraising budget for the year in the first quarter thanks to further significant estate gifts.

Sincerely,



Clark Lawrence, BCom, CPA, CA  
Board Director & Treasurer,  
Victoria Hospice



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HOSPICE



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Charitable Registration Number  
11928 4230 RR0001