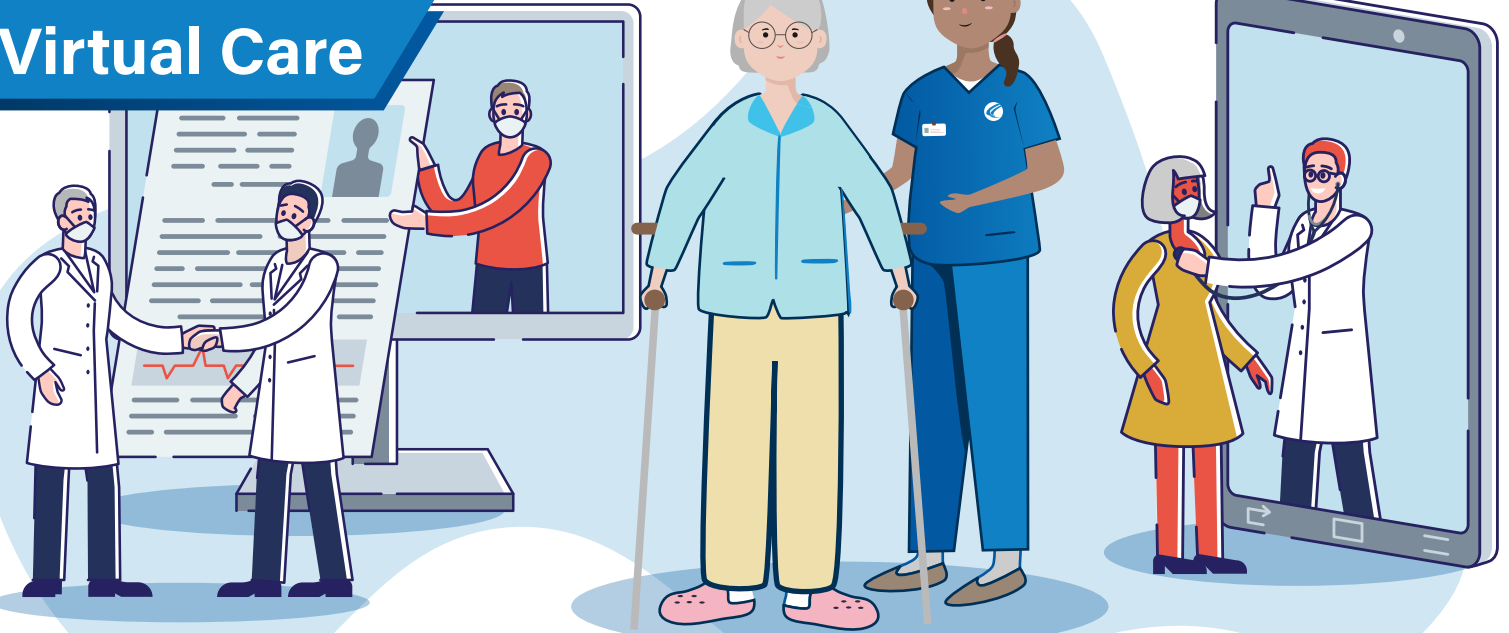


Virtual Care



Featured in this Report

Virtual Care Understanding its Benefits and Barriers

CANES first began in 1982 as a Home Maintenance program, servicing seniors' homes in Etobicoke and the Rexdale areas of Toronto. CANES Community Care has now grown to become a Not-For-Profit organization that assists clients while providing care services in the home, along with emotional and social support, while helping thousands of seniors to continue to take part in the life of their community.

- 1 Our Audience, Mission, Vision, and Values
- 2 Intro to our 2022 Annual Report Theme and Board of Directors
- 3-5 Joint Message from the CEO, Gord Gunning and the Chair of the Board, Doug Thomas
- 6 In the Headlines - Part 1: CANES adds a New Virtual Service and Adopts a Signature of Innovation
- 7, 8 2022 Annual Report Theme: *Virtual Care, Understanding its Benefits and Barriers***
- 9 In the Headlines - Part 2: CANES adds new Vehicles to its Fleet and Ride Connect Receives an Award
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- 15 Our Care Services and General Information

Our Audience

The CANES 2022 Annual Report provides our key stakeholders, clients, and partners with a summary of our operational and financial performance during the fiscal year from April 1st 2021 to March 31st 2022.

It is a document to assess how well we are performing, and how our outcomes for 2021-22 are measured against the targets set out in our Strategic Plan, which are detailed further in our CANES Playbook and our Vision 2025 Documents.

CANES Community Care staff who deliver programs and services to our clients

Support partners who provide services and assist our clients and their families

Our clients, assisted living residents and recipients of our care programs and services

Federal and Provincial Governments who support CANES Programs and Services

Our Mission, Vision and Values

CANES Board of Directors and Senior Management Team, adopted a new Mission, Vision, and Values Statements in 2021 to lead CANES Community Care through 2021-2022 and beyond with a strong focus on Client and Family Centred Care.

Our Mission

Provide outstanding support and care services that enhance the lives of our clients, enabling them to remain home and in their community.

Our Vision

Live Well, Age Well
- with CANES Community Care.

Reputable

CANES is an acknowledged leader, preferred partner and employer of choice.

Reaching

CANES is always evolving, innovating and embracing opportunities to ensure our clients get the best care.



Our Values

Reliable

CANES is committed to consistently providing high quality care that clients can trust.

Responsive

CANES builds meaningful collaborations with clients, families and partners focused on optimal outcomes for the individuals we serve.



The delivery of health care has dramatically shifted due to the COVID-19 pandemic causing a move from in-person visits to some form of virtual care. CANES Community Care has also had to adjust how programs and services were delivered during the pandemic. One of these services was based around the idea of Virtual Care by providing a number of clients with tablets.

On Oct 13th, 2021, the Ontario Ministry of Health and College of Physicians and Surgeons sent a letter asking physicians to return to in-person patient visits. Their concern was that some physicians had not yet returned to giving their patients the option of in-person visits. The letters indicated that with greater understanding of how COVID-19 is transmitted and the high uptake of vaccination, the risk of resuming in-person visits was low, and not offering them may be harmful to patient care. While the province didn't specify the percentage of physicians that the letters were targeting, it's likely a small minority since most doctors have resumed in-person visits.

So how does CANES move forward adapting to this new technology, and how will it benefit our clients? Read further on pages 7-8 about how CANES implements a Virtual Care program and sees the **benefits**, but yet, also understands its **limitations and barriers** to its use with in our organization.

CANES Board of Directors

Janet Cadigan

Carla Eisnor

Kais Lakhdar

Kelly Stadelbauer
(Vice Chair)

Joanne Campbell
(Corporate Secretary)

Raveen Kalra

Joe McReynolds

Doug Thomas
(Board Chair)

Amit Chalam
(Treasurer)

Atul Kapoor

John Rattray



Gord Gunning,
Chief Executive Officer
CANES Community Care



Doug Thomas,
Chair of the Board
CANES Community Care

In our Spring Newsletter we referred to the idea that *“Success in not a Solo Venture”* and that has never been more true than during the past year. CANES Community Care is proud to report that 2021/22 was another blockbuster year thanks to our outstanding staff, partners, funders, and many supporters.

Once again this year the senior management team, supported by the Board of Directors, acted decisively by focusing on strategic priorities, evaluating key uncertainties, and creating action plans to execute on our deliverables. As a result, the agency met or exceeded all our performance targets for the year. The results are illustrated throughout this Annual Report but here are just a few highlights:

Governance:

The Board of Directors have been very active developing a Governance Policy Framework, reviewing governance policies and migrating to a new Board Portal to hold all related decision-making information. In addition, a full Board Evaluation Survey has been completed and reviewed in order to improve the overall effectiveness of the Board. Two new Board members have now been recruited and will be recommended to the Annual General Meeting on June 7, 2022. This will bring the volunteer Board to a full 12 members.

Pandemic Planning:

CANES continued to execute its Business Continuity Plan established at the outset of the pandemic. We maintained and strengthened our Response Teams and our Telecommuting Schedule for our Head Office staff. We have now modified our schedules to allow our staff back in Head Office a maximum of two days per week. We have built up an extensive inventory of Personal Protective Equipment (PPE) and we continue to support three Meals on Wheels organizations – Caledon, Brampton and Mississauga – who saw a significant reduction in their volunteer drivers concerned about exposure to COVID-19.



New Initiatives:

With support from many sources, including our funders and valued sub-contractors, CANES was able to add a substantial number of new clients in both Brampton and Orangeville. With the approval of a series of Cluster Care contracts awarded by Central West Home and Community Care Support Services (CW HCCSS) CANES served 209 clients during the year with 138 currently on active service.

We were awarded a new contract from the City of Toronto, received a new contract from Mississauga Halton HCCSS, expanded our Transitional Care program and launched a Virtual Care pilot project. We have enrolled 86 clients in our Virtual Care program and have received 139 referrals from MH HCCSS with 60 clients active today.

High Intensity Supports at Home (HISH):

CANES maintained its lead role in several HISH programs in both the Central West and Mississauga Halton catchment area that form part of Ontario Health – Central Region. These much needed programs continue to operate with our partners VHA Home Healthcare, William Osler Health System, Halton Healthcare, the Region of Peel and the Region of Halton.

Continuous Quality Improvement (CQI):

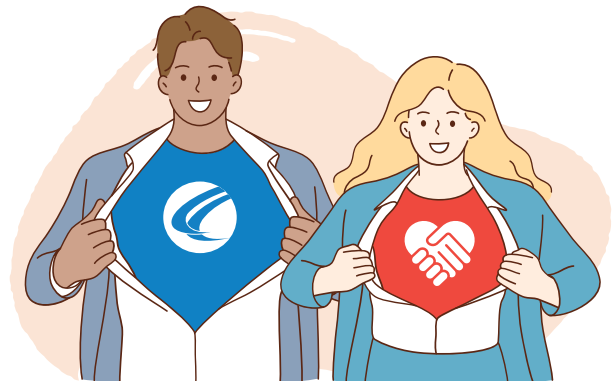
CANES is accredited with Exemplary Standing by Accreditation Canada and our four-year review cycle comes up for renewal in September 2022. CQI is something we work on every single day. This past year we have reviewed the Home Care standards, the Governance standards and the Leadership standards in preparation for our site visit by Accreditation Canada Surveyors this fall. We have also updated many of our policies to reflect best practice and to meet compliance requirements with new legislation. All of this is designed to continuously improve our care services to our clients.

Health Human Resources (HHR):

The CANES People & Culture Department has been very busy this year as the competition for qualified staff has been fierce. Despite these challenges, we have been very successful in attracting a variety of new talent including RNs, RPNs, PSWs, Schedulers and Drivers. A new on-line training service – HR Downloads – was implemented and 360-degree reviews were completed on the CEO, COO and CFO. Many HR policies were also reviewed and updated to ensure the agency is in compliance with new legislation and regulations.

Community Partnerships and Ontario Health Teams (OHTs):

We have maintained and strengthened our community partnerships while supporting the work of the Central West OHT and the Connected Care Halton OHT. As these OHTs evolve towards maturity CANES will continue to actively support new initiatives to better serve seniors in the community.



Strategic Priorities:

In order to stay focused on our strategic priorities and to assess future opportunities following the June 2022 provincial election the Board of Directors and senior management will hold a strategic planning meeting in which we will undertake an environmental scan, review our strategic priorities and determine what specific initiatives we will undertake in support of our strategy. As stated at the outset *"Success is not a Solo Venture"*. Our future success depends on the contributions and commitments of the many, not the few.

What to Expect Going Forward:

If history is a good teacher then we predict a very positive future for CANES and all our clients. With recent provincial government funding commitments being made to expand home care services, virtual care and long-term care we believe that CANES Community Care is very well positioned for the future. Watch for updates and reports of our evolution on the CANES website (www.canes.on.ca) or on our social media platforms.

Conclusion:

We would like to extend our heartfelt appreciation to our front-line staff, our clients, their families and caregivers, our community partners, our funders and our volunteer Board of Directors for your continued support and commitment. We are looking forward to a very rewarding 2022/23 and also to meet in person to work collaboratively and decisively to improve the health of all our clients and allow them to remain at home in their community.

Sincerely,

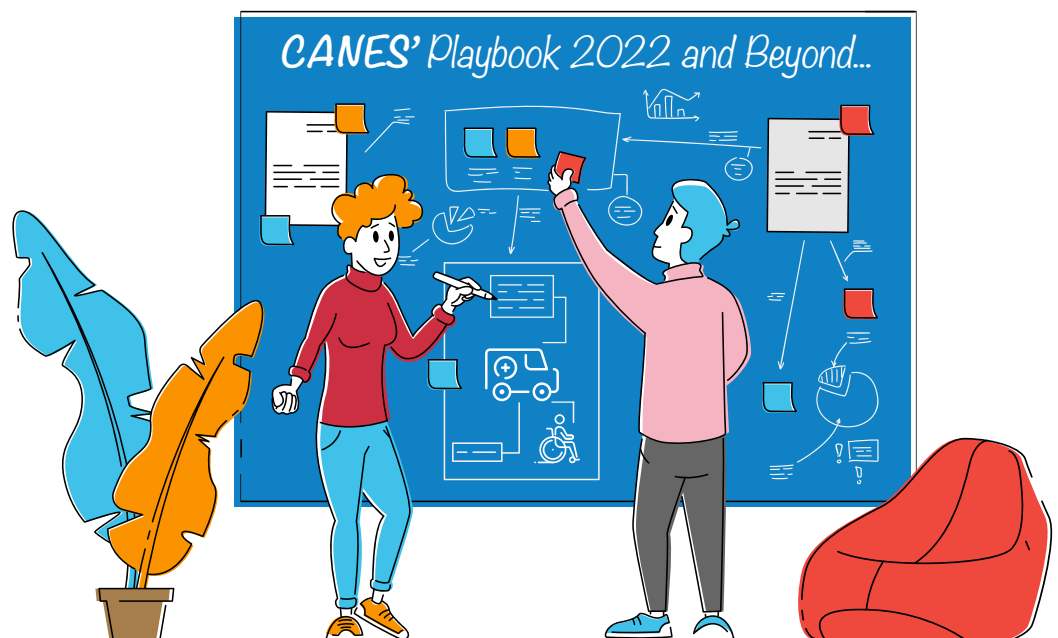


Gord Gunning, CEO,
CANES Community Care

and



Doug Thomas, Board Chair,
CANES Community Care



Bringing Quality Care Home®



CANES Implements Virtual Voice-Video, On-Demand Language Interpretation Services.



CANES Community Care is pleased to announce that it has formed a new partnership with Voyce. The Voyce app, made available on staff's mobile devices, gives CANES' Personal Support Workers (PSWs), Ride Connect drivers, and Home Maintenance workers the ability to break down language barriers on the spot through video communications while out in the field.

The Voyce app connects the user to a live, professional language interpreter on demand, typically in 20 seconds or less, to facilitate a real-time conversation that both parties can see and hear to ensure the most effective communication possible. The expansive network of medically trained interpreter staff represents more than 235 languages and dialects, ensuring that no matter how many different languages are spoken across the CANES network, Voyce provides someone who speaks yours.

CANES Adopts a New Operational Mission Statement and a Signature of Innovation.



Operational Mission

To align our strategic and operational plans with our in house talent and external partnerships to achieve our key performance targets. We will do this by managing our human capital, leveraging technology and establishing partnerships to build our capacity, to scale and expand the scope of our care services to achieve a positive impact on our clients lives.

Signature of Innovation

<p>Explore new opportunities</p>	<p>Disrupt traditional thinking</p>	<p>Promote agility</p>	<p>Be exceptional partners</p>
<p>Launch new services quickly</p>	<p>Execute well</p>	<p>Reach for a transformative impact</p>	<p>Encourage a culture of innovation</p>



CANES' 2022 Annual Report Theme

- A brief look into the future of homecare



Benefits of Telehealth and Virtual Care

While popularized by the pandemic, virtual care is not new. Psychiatry was one of the earliest adopters of virtual care. This consisted of patient counselling through emails or chat sessions. As a result, patients were provided with greater comfort and discretion, and more timely care. Our Caregiver Counselling Program, as well as our Behavioural Supports programs, have both strongly benefitted in the form of telehealth and virtual communication, including our team of Social Workers that have been in touch with isolated seniors and their caregivers virtually throughout the pandemic.

Other benefits of virtual care include bridging the geographical divide — allowing clients in small urban and rural areas access to care — and increased client convenience. It can reduce the need for seniors to leave their home, due in part to reduced travel time but also because seniors are able to wait at home until the appointment occurs. There is also the reduced cost and stress of not having to find and pay for parking or other transportation woes.

Barriers of cost, time and convenience associated with in-person appointments can be enough for some clients to delay care, which may result in downstream emergency room visits if the client's condition worsens. Seniors who have pain or mobility limitations are often challenged by their ability to travel. Virtual care can mitigate these barriers by providing more patient-centred options. Also, we should not forget that virtual care minimizes the spread of infections due to sitting in waiting rooms. Lastly, virtual care may allow some physicians to offer more flexibility by taking patients' visits outside of their normal office hours.

A look into CANES' Virtual Care Pilot Program

CANES has been successfully operating Transitional Care Programs since 2017, with a virtual care component added in early 2021. In these programs, CANES teams work with regional hospitals across the Central West Home and Community Care catchment area to transfer patients out of a hospital setting who can benefit from community-level personal support and allied healthcare services. These programs are designed to serve clients aged 55 years or older with advanced healthcare needs.

The virtual care pilot program is delivered through tablets that are Wi-Fi enabled, and have data-enabled SIM cards to overcome accessibility concerns. The tablets are pre-loaded with software that allows clients and/or their loved ones to connect to a host of healthcare providers with ease, including their care coordinator, primary care physician or nurse practitioner, specialist, or mental health professional. The software apps include: Microsoft Teams (connecting with medical professionals), Google Duo (for social connections), Zoom (for either type of communications), as well as popular easy to learn social gaming applications including Chess, Solitaire, Candy Crush, and Board Hunt. To date, CANES has arranged hundreds of client interactions.

CANES is proposing an expansion to the program to deliver virtual care in 8 assisted living sites, where currently CANES serves at least 310 clients at any given time across these sites. Further, our significant client base is growing rapidly, while a noted constant is the need of the clients: Connecting with healthcare providers and family in an efficient and safe manner. In addition, clients have voiced a great need to connect with family members, other social supports, mental healthcare professionals, and partake in social activities.

Barriers to Virtual Care

Critics of virtual care contend it is impersonal and can take away from the rapport between doctor and patient, or caregiver to client. Nuances that a physician or an in-home caregiver picks up on during an in-person visit might be missed. Also, many seniors may not have access to the technology or tech literacy to manage virtual care.

However, many of these barriers can be overcome. Access to the internet among Canadians aged 65 and older more than doubled to 68 percent from 32 percent between 2007 and 2016. In 2020, more than 27 per cent of Canadians spent 20 or more hours per week on the internet. In addition, just as physicians and caregivers are taught how to assess patients in person, physicians and caregivers can be taught how to conduct virtual care visits as part of their training, going forward.

Certain medical appointments do require an in-person visit. These include physical tests, vaccines, some specialist referrals and clinical treatments. In addition, some patients may prefer seeing their doctor in-person. And for those patients, in-person visits should still be an option. However, many believe we should not return to pre-pandemic procedures and disregard the valuable advancements made in virtual care to improve patient-centred care and the quality of our healthcare systems.



CANES Expands Ride Connect and Home Maintenance Fleet with 8 New Vehicles.

With recent funding from Ontario Health, CANES has been awarded 4 new Vehicles that we will be adding to our Ride Connect Fleet. CANES will also be adding 2 more new vehicles to our Home Maintenance team, as well as another 2 to our growing Ride Connect Fleet. All together they will include 3, 2022 Dodge Ram Promaster full size vans with side ramp for wheelchair accessibility, and 1 with a rear entry wheelchair lift. 3, 2022 Dodge Grand Caravans all with rear wheelchair access ramps. As our Ride Connect service continues to grow in popular demand, our fleet of vehicles needs to be upgraded each year as more clients require rides to and from their medical appointments. We will also be adding 2, 2022 Dodge Ram Promaster City vans that will be driven by our Home Maintenance workers.

Our Home Maintenance crew is also on the move constantly, going from home to home installing Grab bars, providing free Home Safety Inspections, and assisting our clients with any house hold issues they may have. These new windowless city vans will help store the tools and equipment our Handymen need to provide our clients with the quick, convenient and reliable service that enable them to continue to live at home.



Ride Connect Program Receives Award

CANES Ride Connect program was presented with the Volunteer MBC's Business Vitality Award for their outstanding service during the pandemic in helping to deliver meals during one of the most challenging times in history. The drivers (Pictured below) were not only instrumental in delivering hot and frozen meals throughout Peel Region, but also bringing a friendly smile to the people on their routes. The Victorian Order of Nurses Peel (Meals on Wheels Mississauga), Caledon Meals on Wheels, and Brampton Meals on Wheels are so thankful to the CANES drivers and the administrative team for making this happen.



CANES Community Care offered thirteen different care services to almost 5,000 clients living in Brampton, Malton, Etobicoke, and Woodbridge as well as providing accessible transportation and homecare services throughout Mississauga, Oakville, Milton and Halton Hills this past year. Statistics included are from the CW-LHIN area, unless stated otherwise including the MH-LHIN.

PROGRAMS and CARE SERVICES	NUMBER OF INDIVIDUALS			UNITS OF SERVICE		
	2019 2020	2020 2021	2021 2022	2019 2020	2020 2021	2021 2022
● Homemaking/Respite/Cluster/Personal	451	492	679	34,491	51,274	97,938
● Caregiver Support and Counselling	402	424	396	3,661	4,590	4,094
● Assisted Living	359	345	367	106,727	97,131	101,180
🏠 City of Toronto HFA (Homes For the Aged)	59	59	59	11,680	11,680	11,680
● Home Maintenance	1,016	798	1,021	3,623	5,165	4,905
● Congregate Dining	451	626	660	663	626	660
● Friendly Visiting	72	76	76	2,887	4,288	4,095
● Ride Connect Transportation *(Stats include MH-LHIN, CW-LHIN and rides to Malton Care Clinic)	1,029	1,135	915	58,841	47,079	48,965
● Home@Last	278	250	268	668	682	728
● High Intensity Supports at Home (HISH) *(Stats include both MH-LHIN, CW-LHIN areas)	N/A	142	174	N/A	52,443	72,256
● Intensive Seniors Community Team	30	39	39	1,530	1,950	1,685
● Psychogeriatric Resource Consultant	N/A	N/A	N/A	N/A	952	670
● Transitional Care *(Stats include both MH-LHIN, CW-LHIN areas)	125	149	206	96,340	189,720	179,137
TOTAL Cumulative total*	4,705	4,535	4,833	337,616	467,580	527,993
Volunteer Activities *(Cumulative total)	56	37	35	1,666	2,966	2,774

CANES continues to serve clients inside their own homes while offering 360 degrees of quality care services that allow them to remain living throughout their community. We strive to support our clients to maintain their independence through the delivery of almost **530,000 units of service** annually, while serving over **4,800 individual clients**.





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Fax: 905 845 8615
www.bdo.ca

BDO Canada LLP
360 Oakville Place Drive, Suite 500
Oakville ON L6H 6K8 Canada

Report of the Independent Auditor on the Summary Financial Statements

To the Directors of CANES Community Care

Opinion

The summary financial statements, which comprise the summary statement of financial position as at March 31, 2022 and the summary statement of operations for the year then ended (the "Summary Financial Statements"), are derived from the audited financial statements of CANES Community Care (the "Organization") for the year ended March 31, 2022.

In our opinion, the accompanying summary financial statements are a fair summary of the audited financial statements, in accordance with the criteria disclosed in Note 1.

Summary Financial Statements

The Summary Financial Statements do not contain all the disclosures required by Canadian accounting standards for not-for-profit organizations. Reading the Summary Financial Statements and the auditor's report thereon, therefore, is not a substitute for reading the Organization's audited financial statements and the auditor's report thereon.

The Audited Financial Statements and Our Report Thereon

We expressed an unmodified audit opinion on the audited financial statements in our report dated June 1, 2022.

Management's Responsibility for the Summary Financial Statements

Management is responsible for the preparation of the summary financial statements in accordance with the criteria disclosed in Note 1.

Auditor's Responsibility

Our responsibility is to express an opinion on whether the Summary Financial Statements are a fair summary of the audited financial statements based on our procedures, which were conducted in accordance with Canadian Audit Standards (CAS) 810, 'Engagements to Report on Summary Financial Statements'.

BDO Canada LLP

Chartered Professional Accountants, Licensed Public Accountants

Oakville, Ontario
June 1, 2022

CANES Community Care Summary Statement of Financial Position

March 31 **2022** **2021**

Assets

Current

Cash	\$ 6,512,996	\$ 4,635,405
Accounts receivable	1,096,017	2,154,160
HST receivable	102,883	61,697
Prepaid expenses	145,471	101,765
	7,857,367	6,953,027

Investments

Capital assets

	1,715,376	1,500,251
	1,704,101	1,533,664

\$ 11,276,844 **\$ 9,986,942**

Liabilities and Net Assets

Current

Accounts payable and accrued liabilities	\$ 6,699,392	\$ 5,970,037
Deferred revenue	94,843	177,556
	6,794,235	6,147,593

Deferred capital contributions

Deferred rent

	1,355,701	1,402,060
	473,796	476,442

8,623,732 **8,026,095**

Net assets

Funds invested in capital assets	348,400	131,604
Internally restricted - Reserve Fund	1,641,698	1,135,483
Internally restricted - Jennie May Fund	368,677	364,767
Unrestricted	294,337	328,993
	2,653,112	1,960,847

\$ 11,276,844 **\$ 9,986,942**

On behalf of the Board:

Douglas Thomas
_____ Director

Amir Chelani
_____ Director

CANES Community Care Summary Statement of Operations

For the year ended March 31	2022	2021
Revenue		
Government grants and allocations	\$ 18,207,486	\$ 17,215,340
Program services	11,236,312	5,403,443
Other revenue	1,117,308	953,705
Staffing services	392,834	837,898
Fundraising and donations, net	8,419	4,339
Gain on disposal of capital assets	2,000	1,223
Amortization and write down of deferred capital contributions	457,453	380,424
	<u>31,421,812</u>	<u>24,796,372</u>
Expenditures		
Remuneration, benefits and purchased services	25,514,612	19,462,177
Administrative and occupancy	3,544,262	3,406,992
Other	1,074,346	1,016,991
Amortization	611,452	534,295
	<u>30,744,672</u>	<u>24,420,455</u>
Excess of revenue from operations	677,140	375,917
Investment gain	15,125	26,810
Net excess of revenue over expenditures	\$ 692,265	\$ 402,727

Notes to the Summary Financial Statements

1. Summary Financial Statement Preparation

Management is responsible for the preparation of the summary financial statements. The summary presented includes only the summary statement of financial position and the summary statement of operations. It does not include the statement of changes in net assets, statement of cash flows, or the notes to the financial statements.

Copies of the March 31, 2022 audited financial statements are available at the CANES Community Care head office.

CANES Community Care gratefully acknowledges the on-going financial support of our funders and supporters.

Ministry of Health

Central West Local Health Integration Network (CW-LHIN)

Mississauga Halton Local Health Integration Network (MH-LHIN)

City of Toronto

Ontario Community Support Association

Ontario Health Teams (OHTs)

Meals on Wheels

Grant Funding as Available

Fundraising Initiatives

Department of Veteran Affairs Canada

Donor Individuals and Organizations

Fees for Services



Veterans Affairs
Canada

Anciens Combattants
Canada

Home Care

- Homemaking/Personal and Respite Care
- Home Maintenance
- Assisted Living
- Intensive Seniors Community Team

Programs

- Transportation
- Friendly Visiting
- Caregiver Counselling
- Community Outreach
- Congregate Dining

Specialty Services

- Home at Last
- Behavioural Supports
- Transitional Care
- HISH (High Intensity Supports at Home)



Bringing Quality Care Home®

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@CANESCommunity



Virtual Care

The Future of Home Care