



Canadian Hospice Palliative Care Association

Association canadienne de soins palliatifs



2014 - 2015 ANNUAL REPORT

“THAT ALL CANADIANS HAVE ACCESS TO QUALITY END-OF-LIFE CARE”

www.chpca.net
www.advancecareplanning.ca
www.hpcintegration.ca
www.ehospice.com
www.eolcaregiver.com
www.qelccc.ca



VISION AND MISSION STATEMENTS

VISION STATEMENT

“That all Canadians have access to quality end-of-life care.”

MISSION STATEMENT

The Canadian Hospice Palliative Care Association (CHPCA), a national health charity, is the national association which provides leadership in hospice palliative care in Canada.

CHPCA offers leadership in the pursuit of excellence in care for persons approaching death so that the burdens of suffering, loneliness and grief are lessened.

CHPCA will strive to achieve its mission through:

- Collaboration, leadership and representation;
- increased awareness, knowledge, and skills related to hospice palliative care of the public for health care providers, volunteers, and others;
- development of national norms of practice for hospice palliative care in Canada and the advancement of the palliative approach to care across all settings;
- support of research and knowledge translation on hospice palliative care;
- advocacy for improved hospice palliative care policy, resource allocation, and supports for caregivers.

Annex D, Saint-Vincent Hospital
60 Cambridge Street North
Ottawa ON K1R 7A5
CANADA

Telephone: (613) 241-3663
Toll Free: 1-800-668-2785 or 1-877-203-4636
Fax: (613) 241-3986
E-mail: info@chpca.net
Web Site: www.chpca.net

Charitable Registration Number: 13760 4195 RR 001

© 2015 Canadian Hospice Palliative Care Association



PRESIDENT'S REPORT



Dear CHPCA Colleagues, Supporters, Partners, and Friends,

It has been a pleasure and a privilege for the past two years to serve as president of the Board of Directors of the Canadian Hospice Palliative Care Association (CHPCA), an organization that continues to strive to be a primary leader actively engaged in moving forward with the current times and issues surrounding Hospice Palliative Care (HPC). As you read through the annual report, the expansive planning, work, connections, initiatives and partnerships that has and continues to take place is indeed evident. It embodies the dedicated work and advocacy of our Executive Director and CHPCA staff, with the support and leadership of a volunteer Board of Directors (made up of representatives from all 10 provincial hospice palliative care associations and others) representing you our great supporters.

We all have a continued concern and commitment in making sure that an integrated palliative and end-of-life care approach with sound principles and practices across all settings and sectors continues to advance and be supported. One way CHPCA works to achieve this is through ongoing strategic planning to follow through on current and future needs. Each year CHPCA updates a comprehensive workplan (WP) that reflects our five year strategic plan (SP) and goals and this WP focuses on four main areas: 1) Advocacy, Public Policy and Education, 2) Awareness and Communications, 3) National / Provincial Relationships and 4) Sustainability and Governance. I would encourage you to view in more detail our new strategic plan our website at www.chpca.net.

There are currently important upcoming elections and end of life discussions taking place across the country and what better time to make sure we are included and heard on issues around palliative and end-of-life care. Please feel free to draw upon the wonderful tools and resources from the CHPCA website (www.chpca.net) e.g. "Let's Talk About Hospice Palliative Care First" as well as the "Power of 10", and also from partner initiatives such as The Way Forward National Framework: A Roadmap for the Integrated Palliative Approach to Care (www.hpcintegration.ca), Advance Care Planning (www.advancecareplanning.ca), and the Quality End-of-Life Care Coalition of Canada (www.qelccc.ca).

As I transition into my role as past president, I wish to express a humble "attitude of gratitude" to everyone for their guidance and support during my term and look forward to continuing to work collectively as we progress toward quality palliative and end of life care delivery for ALL. Together we are working for a common cause that provides leadership and represents skilled, compassionate care in the community, homes, hospitals, and facilities at the bedsides of those facing progressive chronic



illness, dying, death and grief. Your support and involvement is vital to CHPCA's continued growth and this important work can be better achieved with our unified collaborative efforts.

I am proud to still be able to be a part of the HPC movement for over 30 years and in particular CHPCA since its formation in the early 90's. To each and every one who advocates for, promotes and provides HPC I wish to say -for all you do, I sincerely appreciate and thank you.

Sincerely,

Laurie Anne O'Brien
President CHPCA Board

"Gratitude is not only the greatest of virtues, but the parent of all others."
— Marcus Tullius Cicero



ANNUAL REPORT 2014-2015

The Canadian Hospice Palliative Care Association (CHPCA) is pleased to provide you with highlights of the CHPCA's activities throughout the 2014 – 2015 fiscal year.

The CHPCA Strategic Plan developed in 2010 guides the work of the association. The Strategic Plan 2011-2015 can be found at www.chpca.net. Our Strategic Plan has six new strategies.

These are:

Strategy #1: Integrate hospice palliative and end-of-life care principles and practices into all health settings.

Strategy #2: Educate health care providers in all health settings.

Strategy #3: Promote evidence-informed policy

Strategy #4: Build strong partnerships to improve hospice, palliative and end-of-life care

Strategy #5: Raise awareness about hospice palliative end-of-life care.

Strategy #6: Build the capacity of the Canadian Hospice Palliative Care Association

The CHPCA focused most of its work in the six main areas above, but continued to work on the following key areas in 2014 - 2015:

Advocacy, Public Policy and Education

Communication and Awareness

Sustainability and Governance

The following are short captions of some of the work of the CHPCA. For more detailed information, please contact our office at info@chpca.net or visit our re-vamped website at www.chpca.net.

Best wishes,

Sharon Baxter
Executive Director



ADVOCACY, PUBLIC POLICY AND EDUCATION

INFLUENCING NATIONAL POLICY DECISION MAKERS

The CHPCA's advocacy team, comprised of the Executive Director and the Communications Officer and others as recruited often from the Quality End-of-Life Care Coalition of Canada, advocated for hospice palliative care issues throughout 2014-2015.

This year, the CHPCA contributed to an "Advisory Panel on Healthcare Innovation" by submitting a written brief on the integrated palliative approach to care which was reviewed by a panel of experts in the healthcare field including Rona Ambrose. CHPCA also submitted a brief to the Finance Committee of the House of Commons in August 2014.

In addition, the CHPCA engaged government agencies such as Health Canada and other departments that play a pivotal role in end-of-life care to continue to advocate for quality hospice palliative care in Canada. The CHPCA connected with Minister McKay in light of the Supreme Court of Canada decision on physician-assisted death, to be included as a witness in formal consultations. Throughout 2014 and 2015, the CHPCA provided input during stakeholder consultations for the Canadian Medical Association's National Senior Strategy on Aging. In June of 2015, the CHPCA sent a formal letter to the Council of the Federation to encourage them to discuss hospice palliative care during their semi-annual meeting.

The CHPCA will continue to advocate for the best possible hospice palliative care for all Canadians in light of the upcoming election in the fall of 2015.

FEDERAL STRATEGY

The CHPCA submitted a brief to the House of Commons, Standing Committee on Finance for the pre-budget consultation in 2014. This brief brought attention to the issue of access to hospice palliative and end of life care in Canada. The federal government funded the Way Forward Integration Initiative from 2012-2015 which ended in January 2015. There are a number of informative discussion documents as well as the national framework. Look to the TWF section for further details.

The non-partisan Parliamentary Committee on Palliative and Compassionate Care released their report Not to Be Forgotten: Care of Vulnerable Canadians, in November 2011. The CHPCA and its partner groups received quite a bit of media pick up, and the report was well received by all. The CHPCA and the QELCCC continued to work with this Committee in 2014-2015 to ensure the recommendations put forth in this report are seriously considered by the federal government. Interestingly, two of the three co-chairs of this committee will not be running in the next federal election so we must start once again.

CHPCA and the QELCCC have worked hard on the new motion before the federal parliament which was subsequently passed 272 - 1 in early May 2014. There are details on this on our website. We continue to work both federally and in some cases provincially. We continue to make it a part of our



advocacy strategy.

CHPCA and the QELCCC has updated its election strategy for fall 2015 and this is available from the office.

KNOWLEDGE TRANSLATION (KT)

CHPCA continued to write letters of support and collaboration for Canadian Institutes of Health Research (CIHR) knowledge translation initiatives in 2014-2015. A few of our applications have resulted in partnerships, and we look forward to contributing to several projects throughout 2014-2015.

This year the CHPCA wrote letters of support for multiple organizations, including the Canadian Working Group on HIV and Rehabilitation, the Canadian Society of Palliative Care Physicians and Technology, Evaluation in the Elderly Network (TVN)

The CHPCA contributes their time and efforts to these projects as they align well with the CHPCA's belief that providers in all settings – including physicians, nurses, social workers, nursing aides, personal support workers and pharmacists -- must have the knowledge and skills to provide quality hospice palliative and end-of-life care, as well as the emotional and spiritual support to provide this care. The research initiatives we are involved in include work in Long term care, caregiver issues and primary care. We continue to write KT pieces in ehospice, on the various CHPCA websites or in other partner's communication pieces.

Sharon is a reviewer for CIHR call for proposal in 2014 and again in 2015.

QUALITY END-OF-LIFE CARE COALITION OF CANADA (QELCCC)

The CHPCA has served as the Secretariat for the Quality End-of-Life Care Coalition of Canada (QELCCC) since its inception in 2000, organizing the work of the Coalition including work-planning, coordination, minute taking, and report writing. As the Secretariat, the CHPCA continues to host teleconferences for the five QELCCC Committees (Executive; Advocacy; Research and Knowledge Translation; Caregiving; and Education). Since its inception in 2010, the QELCCC has used the second iteration of the Blueprint for Action: 2010 – 2020 report to guide its advocacy and policy efforts. In 2011-2012, these efforts resulted in the federal government funding of The Way Forward Integration Initiative. The QELCCC will continue to use the Blueprint to advocate for change so that all Canadians have access to high quality end-of-life care.

The Way Forward officially concluded in 2015; however the QELCCC will continue to work to disseminate the project's materials. In 2015, the QELCCC finalized its election kit with updates from the Way Forward project. The QELCCC also compiled an official letter to send out to each federal party in anticipation of the upcoming fall 2015 election to determine their status on quality end-of-life care. The QELCCC also submitted a motion on the integrated palliative approach to care to the National



Health Leadership Conference which was subsequently accepted.

CHPCA works closely with some of our QELCCC members to advance the uptake of hospice palliative care, including the Canadian Medical Association, Canadian Nurses Association, HealthcareCAN, many of the professional organizations as well as many of the disease organizations. We were thrilled to see the Canadian Cancer Society take on hospice palliative care as one of their three election goals. Also the Canadian Medical Association launched their Seniors strategy which includes hospice palliative care. The QELCCC will continue to work with healthcare organizations that are members with the ultimate goal of improving hospice palliative care at the federal level.

More information about the QELCCC, including its semi-annual and annual report, can be found at www.qelccc.ca.

THE WAY FORWARD: AN INTEGRATED PALLIATIVE APPROACH TO CARE

The focus of the final year of The Way Forward initiative was to complete all knowledge transfer products and tools – most importantly the final iteration of the National Framework and its accompanying resources – continued dissemination and outreach to identified stakeholders, several provinces and agencies on the adoption of the palliative approach, and the national Advance Care Planning (ACP) in Canada initiative all being central to outreach efforts.

The Way Forward partnered with Lakehead University's 'Improving End-of-Life Care in First Nations Communities' project (Dr. Mary Lou Kelley/Holly Prince) to develop and evaluate tools and resources to promote culturally appropriate advance care planning in First Nations communities in Canada. The tools piloted in four communities will then be accessible to other First Nations communities across Canada and supported through dissemination by the Assembly of First Nations. Some of the preliminary resources were showcased and reviewed by over 40 First Nations Home and Community Care coordinators from across the country at the Canadian Home Care Summit in November 2014.

We worked with the national ACP initiative to create an online interactive advance care planning workbook in support of an integrated palliative approach to care. It encourages earlier conversations about care and integrating palliative care earlier into the disease trajectory. TWF project also worked with Canadian Home Care Association to create a 'tools and practical strategies kit' for working caregivers in support of the palliative approach to care.

Signals Design Group was contracted in May 2014 to work with TWF team to develop knowledge translation tools and resources to effectively report on the most important aspects of what we've done and learned and ensure that settings and sectors see themselves in the work and take ownership for continuing to advance the palliative approach. This ensured that the palliative approach supporters/champions and government/policymakers understand how to move forward an integrated palliative approach to care.

The Way Forward had an afternoon session at the annual QELCCC face-to-face meeting in January 2015. This was an opportunity to update coalition membership of TWF initiative progress and impact and to highlight how the initiative was a catalyst for change over the past three years. Examples from



CHCA, CNA and the Alberta Government demonstrated how the Framework was adopted and adapted for different organizations and in provincial health care planning. Central to the discussion was an emphasis for stakeholders to harness TWF and continue to integrate a palliative approach to care in their organizations and communities.

Although the formal, funded part of The Way Forward initiative has ended, the concept of an integrated palliative approach is taking flight. Other people and organizations are stepping up to the challenge. The name of the initiative may become history, but its impact will continue as people across the country work to integrate a palliative approach into different care settings. CHPCA and the QELCCC will continue to be a catalyst for change. Until all Canadians have access to an integrated palliative approach to care across settings and people are comfortable having conversations about the kind of care they want towards the end of life, these organizations will keep pushing.

The final iteration of The Way Forward National Framework: A Roadmap for the Integrated Palliative Approach to Care and all new resources are available on The Way Forward website.

ADVANCE CARE PLANNING (ACP) IN CANADA

The project Advance Care Planning in Canada is intended to raise awareness about the importance of advance care planning and to equip all Canadians – individuals, families, communities and health professionals – with the tools they need to effectively engage in the process.

April 16th, 2016 was our fourth National Advance Care Planning Day and the most successful to date! The 2016 Campaign focussed on a public health approach to advance care planning – with a key message being “don’t take chances.” New videos and other campaign tools were developed and the project leveraged traditional and social media to promote conversations about advance care planning. Community organizations and agencies across Canada conducted National Advance Care Planning Day activities in their communities.

With funding from the Movember Campaign, Prostate Cancer Canada, ACP in Canada began working with men with prostate cancer, their partners, families and caregivers to help them engage in advance care planning. One of the goals of ACP in Canada is to prepare health care professionals with the tools they need to facilitate advance care planning with their patients. To achieve this goal, ACP in Canada worked with primary care providers to develop the Primary Care Toolkit. In addition, ACP in Canada worked with CARENET to develop the Just Ask Campaign – with tools for health care professionals to help them engage in advance care planning and goals of care conversations.

The Advance Care Planning website (www.AdvanceCarePlanning.ca) continues to reach out to professionals, community members and all Canadians to raise awareness about the importance of advance care planning. The traffic on the website as well as the number of followers of our social media accounts (e.g. Facebook, Twitter) are constantly growing. ACP in Canada conducted a number of webinars to education professionals and the public across the country about the importance of advance care planning and how to engage.

The project funders for this project were the Prostate Cancer Canada and The GlaxoSmithKline Foundation.



COMMUNICATIONS / AWARENESS

COMMUNICATION STRATEGY

In January 2013, the CHPCA revised their Communication Strategy for 2013-2016. The strategy continues to elaborate on the same key messages and environment; however key communications strategies have changed significantly. The addition of new websites (www.eolcaregiver.com, www.ehospice.com, www.hpcintegration.ca) has increased the amount of content produced by the communications staff at any time. The increased use of social media has also changed the way in which the CHPCA communicates with the membership and the general public. The last large change in the communications strategy is ehospice, which is a site available as an app for both the iPhone and iPad, and will drastically change the way the public receives news about palliative and end-of-life care.

The Facebook and Twitter accounts for the CHPCA have grown significantly in 2014-2015 through increased content posting. ehospice has also increased in readership through original content submission and posting regularly.

The biggest issue that was covered by media in 2014-2015 was the Supreme Court of Canada decision to allow for physician-assisted death. The CHPCA released a policy update regarding this stating that the organization would use this momentum to continue to advocate for quality end-of-life care in Canada. The CHPCA also teamed up with Ian Bos, who is walking across Canada to raise funds and support for hospice palliative care in the latter half of 2015 and provided communications support to his campaign. The CHPCA designed and released a new iteration of its organizational brochure which includes updated content on its initiatives.

CHPCA launched the “Power of 10” campaign late in the fiscal year in an effort to garner attention to what hospice palliative care is, and pass that information on to 10 people you know. The campaign will continue in the new fiscal year.

CHPCA will continue to review its focus and activities in response to relevant socio-economic and political policy changes.

MEDIA AND PUBLIC RELATIONS

Due to the Supreme Court of Canada ruling regarding physician-assisted death, the CHPCA garnered quite a bit of media attention.

This year, the CHPCA took an active role in Ian Bos’ walk across Canada for hospice palliative care in order to reach out to media about his campaign and the importance of quality end-of-life care. The campaign has so far reached quite a bit of media attention and public awareness.

The CHPCA is very active in advocacy and continues to correspond with federal government representatives on a regular basis. The CHPCA also continues to provide advice and support to the provincial associations as they work with provincial and territorial governments on issues relating to health policy.



The CHPCA will continue to use public opportunities to garner media attention for key hospice palliative care issues.

SOCIAL MEDIA AND ONLINE ENGAGEMENT

The CHPCA's burgeoning social media presence continues to reaffirm our central mandate – the growing need for access to quality hospice palliative and end-of-life care. Twitter and Facebook are used to promote events and awareness campaigns, share statistics and research, stimulate discussion, and keep followers updated on CHPCA news, like the availability of resources.

The CHPCA's Online Event (webinar) Series continues to be extremely popular. Some of our more popular information-based topics this year included: "Spiritual Care Webinar Series: Palliative and End-of-life Care" and "Challenges Associated with Home-Based Palliative Care." To view past events please visit www.chpca.net/pastevents.

Over the past three years, the CHPCA has been working with an interdisciplinary team of hospice palliative care professionals to develop a program of education-based accredited online events. The 2014-2015 year saw eight events. These hour and a half long webinars were and continue to be accredited by the College of Family Physicians Canada and recognized by the Canadian Nurses Association. Tickets to these events can be purchased through Eventbrite, and past events will also be available for purchase on the CHPCA Marketplace.

AVISO

Starting in 2014, AVISO has switched from being a tri-annual membership newsletter to a bi-annual publication. It is now published in October and May each year through an electronic format and offers information to the CHPCA associates regarding research and policy developments in hospice palliative care, news and events, new research and other interest pieces both in Canada and internationally.

Regular features include: President's Report, Executive Director's Report, Provincial Association Updates, updates on the CHPCA projects and updates from the CHPCA Interest Groups and Committee work. AVISO also regularly features articles submitted from the hospice palliative care community on a variety of topics. In 2015-2016, the CHPCA will continue to offer AVISO to associates and encourage local service providers to submit local interest stories so that all associates will have a greater understanding as to what is happening at the local level. We will also continue to offer unique content that is only available to associates.

CHPCA WEBSITES

The CHPCA's website is updated on a continual basis. The CHPCA Marketplace website was launched in late summer 2012, and is still providing relevant hospice palliative care materials to the general public. This new site allows shoppers to easily browse and purchase great resources available for sale or download, including brochures, books, and past accredited webinar series. The CHPCA's online directory features over 615 hospices/organizations across the country. This online directory has been



designed to provide information on the availability of hospice palliative care services across Canada. It includes a listing of programs and services, their contact information, and where they provide care. Organizations that have their information listed receive materials from the CHPCA throughout the year related to upcoming events (i.e. National Hospice Palliative Care Week). The News and Events page of the website features the CHPCA's latest press releases and information about upcoming CHPCA events.

Please also visit www.advancecareplanning.ca, www.eolcaregiver.com and www.hpcintegration.ca to view other CHPCA projects.
ehospice

The CHPCA is the editor of the bilingual Canadian editions of ehospice, an international hospice palliative care news website and mobile application. There are a total of 11 editions, with each edition being managed by an international editor. ehospice keeps Canadians, and the broader international community, updated about news, views, opinions and profiles about the current state of hospice palliative care in Canada. The CHPCA staff writes many of the original articles for the site, but is always looking for new collaborators. Submit an article about what is happening in your community by emailing ehospice@chpca.net.

MONTHLY UPDATE AND E-BLASTS

The CHPCA's Monthly Update is now in a more digestible format. As always, the electronic e-blast continues to highlight recent key activities related to hospice palliative care policy issues, as well as the CHPCA activities. But, the new format, with hyperlinked headlines and brief updates, provides readers with a snapshot of important ehospice headlines, where further details that can be read immediately or a more convenient time. Currently the Monthly Update is sent to over 6,000 individuals in English and over 1,200 individuals in French.

Press releases, media advisories and event-specific information and invitations are sent out through periodic e-blasts. Anyone wishing to receive the CHPCA Monthly Update and e-blasts can be added to the distribution list by signing up on the CHPCA website or by sending a request to info@chpca.net or ehospice@chpca.net.

POLICY CHAMPIONS AND POLICY ALERTS

The CHPCA maintains an e-mail list of policy champions who are periodically sent information and breaking news regarding hospice palliative care issues. This e-mail list is designed to quickly contact key individuals interested in hospice palliative care advocacy and public policy issues. In 2013-2014, the CHPCA broadened its reach, sending all policy alerts to the full membership. The CHPCA continue to do this for the 2014-2015 year.

In 2015, the CHPCA sent out multiple policy alerts. These included blasts surrounding the Supreme Court of Canada decision regarding physician-assisted death to update the CHPCA membership about



our organization's response to it. The CHPCA also sent out an alert surrounding the "Power of 10" campaign for National Hospice Palliative Care Week with information on how to access resources.

We have received good feedback so far from these policy alerts and we will continue to use these e-blasts for future advocacy.

TEXT TO DONATE

TELUS has continued to generously sponsor the Text to Donate program. In partnership with the provincial associations this innovative campaign was found to be most effective at conferences and large events.

With a simple text message you can donate \$10 to CHPCA. All you have to do is text HOSPICE or SOINSPAL to the number 20222 on your cell phone. You can even set up a monthly donation or donate up to three times a month to help us ensure quality hospice palliative care for all Canadians. CHPCA thanks TELUS for their continued funding and commitment to the program.

CHAMPION'S COUNCIL

As the hospice palliative care field grows, it has evolved to include numerous people from outside the hospice palliative care community offering to lend their voice and be champions for the cause. In the fall of 2010 the Canadian Hospice Palliative Care Association launched its Champion's Council. The Champion's Council is comprised of a group of key leaders in Canada who have offered to improve the profile of hospice palliative care across the country. They include industry leaders and current/retired MPs and Senators. The Champion's Council continues to show leadership on the issue of by changing the face of hospice palliative care in Canada and providing strong advocacy.

Simply put, the mandate of the Champion's Council is to advance the cause of hospice palliative care in Canada. It is the responsibility of corporate Canada to ensure that their employees are well supported through employer-driven compassionate care leave benefits. One way to do this is to improve leave for employees who need to take time off work to care for ailing loved ones. Last year's Compassionate Care Benefits research project entailed surveying the Top 100 Employers in Canada and asking them about their leave policy for employees in such a situation. Based on this report, a survey was created for the Human Resources Professionals Association (HRPA) asking HR professionals questions regarding the issue of compassionate care benefits in the workplace. The Champion's Council will use this report to further improve understanding of the importance of caregiving in our society and the employee's need for support from their employers during difficult times.

The Champion's Council had a face to face meeting in Ottawa hosted by Russell Williams in October at Rx&D. Several of the Champions also met with representatives from all three parties of the Parliamentary Committee on Palliative and Compassionate Care in November to discuss national strategies, frameworks and blueprints in hospice palliative and end-of-life care. Several champions were also busy with speaking engagements with the express intent of advancing the profile of hospice



palliative care in Canada.

The Honourable (ret.) Sharon Carstairs, P.C. and staunch advocate for hospice palliative care in Canada, was awarded the Quality End-of-Life Care Coalition of Canada (QELCCC) third annual Award of Excellence in Advocacy. Sharon gives many passionate speeches on the subject of hospice palliative care and has worked tirelessly as an advocate at the local and national level.

To see a list of the Champion's Council members, please see page 30 or you can also view it online at <http://www.chpca.net/about-us/our-team/champion's-council.aspx>.

CHPCA MARKETPLACE

The 2014 – 2015 fiscal year saw an increase in sales for the CHPCA Marketplace. The showcasing of new items on the 'Featured' page enabled our customers to quickly link to the item description. As well, there were additions to the Online Event Series of recorded webinars, which brought the available recordings to a total of fifteen. Although accreditation is not available for archived recordings, they are still an excellent source for general knowledge and education.

There were a few new resources added to the Marketplace this year. Added to the Marketplace is a book by Mary Francis from Saint John, New Brunswick titled, "The Sisterhood of Widows" which contains sixteen stories of grief, anger and healing.

New from Kath Murray, Life and Death Matters is "Integrating a Palliative Approach: Essentials for Personal Support Workers," textbook and workbook.

We still continue to offer our familiar resources such as the ever popular, "Caregiver's Guide: A Handbook About End-of-Life Care," as well as the Pallium Palliative Pocketbook, Living Lessons resources, Advance Care Planning (ACP) resources and an array of books and manuals, research documents, information brochures and CDs and DVDs.

All items can be viewed and ordered through our online marketplace at www.market-marche.chpca.net.

We will continue to be represented at the CHPCA Marketplace booth at national and provincial conferences when possible.

LIVING LESSONS PARTNERSHIP

The Living Lessons® Partnership involves a number of components, including national policy development, communication support and the Living Lessons® Information Service. The Living Lessons® Information Service continues to provide valuable end-of-life information and support to organizations, caregivers, health care professionals and the general public across Canada and beyond. It is still as important as ever to raise awareness of the importance of end-of-life care, not only to the patients, families and caregivers, but to the general public as well. The Living Lessons® Information



Service continues to be a valuable source of information for inquiries regarding: resources for patients, caregivers, volunteers, family members, doctors, nurses, social workers, spiritual counsellors, researchers, those working in pediatrics, rural health workers, pharmacists, alternative medical care providers, those focused on aboriginal issues, volunteer groups, students, media and the general public. As the need for palliative care increases, so do the requests for information on the availability of hospice palliative care services throughout Canada. The importance of, and need for, end-of-life care resources remains in the forefront to all those dealing with end-of life care.

HIKE FOR HOSPICE PALLIATIVE CARE

The Hike for Hospice Palliative Care took place across Canada on Sunday, May 4, 2014. This year marked the eleventh year for the hike and was the most successful to date. The event hosted more participants than any other year, with over 6,000 hikers and over 100 participating sites raising more than \$1,700,000. Funds raised during the Hike for Hospice Palliative Care stay in the community in which they were raised and are intended to help fund the specific hospice palliative care programs in that community.

The Hike for Hospice Palliative Care continues to be successful in helping to raise awareness of the many challenges within the hospice palliative care field and is a wonderful avenue to promote the phenomenal work that volunteers and professionals perform daily.

Throughout the year, many hike sites took the opportunity to recognize and thank their valuable donors, sponsors, and volunteers for their hard work on the hike by hosting special appreciation ceremonies, barbeques, and other celebrations.

The 2014 Hike also marked the seventh year for the Hike for Hospice Palliative Care online fundraising website. In early 2014 the CHPCA switched online fundraising website providers. The new online website is provided by Blackbaud's event fundraising software, TeamRaiser. The new system allows the hike sites to do a number of individual customizations to their personal fundraising websites, which previously wasn't available with the other provider. The online tool continues to work well by allowing hikers to easily collect and manage donations online.

The CHPCA would also sincerely like to thank and recognize the National Sponsors for their commitment to this important event.

This year's sponsors were:
The GlaxoSmithKline Foundation
Bayshore Home Health
Arbor Memorial



NATIONAL HOSPICE PALLIATIVE CARE WEEK

May 4-10, 2014 marked National Hospice Palliative Care Week, which showcased hospice palliative care programs and services across Canada and encourages people to discuss issues related to the end of their lives. The communications team, under the guidance of the Advisory Committee, decided to create a more proactive campaign for 2014. Rather than the traditional graphic-heavy themed poster, the 2014 campaign was information based, clearly and accurately representing the current state of hospice palliative care in Canada. The poster was an infographic, centered on the tagline: “Busting the Myth about Hospice Palliative Care.” The poster then contained three graphics with common myths and statistics related to access to palliative care, who hospice palliative care is for, and when those should be receiving care. Additionally, three bookmarks were developed mirroring the messaging of the posters. The CHPCA encouraged Week participants to mail these bookmarks to key decision makers like hospital CEOs and local members of parliament.

The CHPCA coordinated a free webinar titled “Helping Patients and Families Address the Myths in Palliative Care and Bereavement” and was hosted by Dawn Cruchet and Karen Wagner. The sold out event attracted 410 participants from across the country. The event discussed some of the many myths surrounding palliative care and bereavement, including the questions; can you tell when someone is going to die?, does a dying person “choose” the moment of death?, is it true that “palliative care” means “no more hope?”, and if a family member is present when death occurs, will the grief be easier?

Planning for the 2015 National Hospice Palliative Care Week began in the winter 2015.

NATIONAL CAREGIVER DAY

The Canadian Hospice Palliative Care Association, in partnership with CBI Health Group, celebrated National Caregiver Day on April 4, 2014. This year, the CHPCA coordinated the online event titled “The Evolving Nature of Family Caregiving” hosted by Kate McCrady, RN for CBI Health Group and Louise Hanvey, Project Manager, Advance Care Planning in Canada. The free event saw over 220 participants and discussed the evolution of the informal family caregiver and how the patient and caregiver drive the plan of care; nurses are the co-pilot.

The Canadian Hospice Palliative Care Association (CHPCA) in partnership with CBI Health Group also created a poster to raise awareness for National Caregiver Day, drawing audiences to our website and to promote the online event. Each year, National Caregiver Day is a day for family and informal caregivers – family, friends, neighbours – to be acknowledged and celebrated.

CANADIAN HOSPICE PALLIATIVE CARE LEARNING INSTITUTE

In light of the success of the 2012 Learning Institute, the CHPCA decided to hold a second event of its kind on June 6 – 8, 2014. Located in beautiful Banff, Alberta, overlooking the mountain tops from



the Banff Centre, the CHPCA's Learning Institute provided a serene place for individuals to come together for an intense learning weekend. The program, which was directed towards intermediate and advanced learning levels, was facilitated by 40 of the finest hospice palliative care professionals as faculty from across Canada.

Throughout the year, the CHPCA worked with a large group of volunteers, comprising of people who represented the various areas and aspects of palliative care, this group formed the Learning Institute Program Committee. The function of the committee was to assist in framing and outlining the five streams that were to be presented during the Learning Institute. The Program Committee met several times with the CHPCA in an effort to assist in shaping the direction of learning that was scheduled to happen throughout the three day event. The Program Committee also worked together to select a list of the most qualified faculty for each stream. The CHPCA is pleased to report that nearly the entire suggested faculty agreed to be a part of the event.

The program consisted of five streams. These five streams included:

- Communication Skills, Advocacy, Social Media and Advance Care Planning
- Organizational Development and Leadership
- Inter-Professional Education and Practice Presented by Pallium Canada
- Clinical Practice: Palliative Care and Chronic Disease
- Clinical Practice: How Do We Improve our Care: Spirituality, Dignity Therapy and Quality Improvement

The sponsors of the 2014 Canadian Hospice Palliative Care Learning Institute were:

- Bayshore HealthCare
- Purdue Pharma
- Revera
- Canada's Research-Based Pharmaceutical Companies – Rx&D
- The Way Forward
- CBI Health Group

In response to the overwhelming success of the 2014 event, the CHPCA will be returning to Banff from June 3-5, 2016 to host the 3rd biennial Canadian Hospice Palliative Care Learning Institute. Stay tuned for more details!

The 2014 Learning Institute also consisted of planning and preparation for the Canadian Hospice Palliative Care Conference. The CHPC Conference is to be held October 29th – November 1st, 2015 in Ottawa, Ontario, where the CHPCA will host between 500-700 health professionals comprised of physicians, nurses, administrators, social workers, therapists, pastoral care providers, academics, volunteers, and students.

Join us at the next Canadian Hospice Palliative Care Conference on October 29th – November 1st, 2015 in Ottawa, Ontario!



NATIONAL ONLINE DIRECTORY OF HOSPICE PALLIATIVE CARE PROGRAMS AND SERVICES

Since launching the Canadian Directory of Hospice and Palliative Care Programs and Services in 2002, the CHPCA has leveraged broad access to information concerning the availability of hospice palliative care programs and services in every province and territory in Canada. The searchable directory currently contains contact information for more than 615 hospice palliative care programs and services in Canada. The directory underwent an update in 2011 to match the look and feel of the new CHPCA's website. This update also consisted of the integration of new fields of information which were collected as a part of a directory update project occurring in 2010. The CHPCA continued to work throughout the 2014-15 fiscal year to maintain the directory and undertook an updating project during the summer of 2014, to ensure that the information contained is the most up-to-date information available. The CHPCA's directory was integrated onto the ehospice website in 2012 and continues to be a useful tool. Using the locations of the programs and services listed on the CHPCA's Directory, ehospice provides a location map of services. When clicked on, users are linked directly back to the CHPCA's directory for more detailed information.

Programs and Services can register at: <http://www.chpca.net/family-caregivers/directory-of-services/add-a-service.aspx>.

CHPCA INTEREST GROUPS

The CHPCA continues to encourage its members to join and utilize its eight Interest Groups. These Interest Groups were created by the members as a means of sharing information across Canada and abroad. These groups also create an opportunity for individuals working or volunteering in hospice palliative care to share best practices and to network with other individuals in the same area of work. The members of the Interest Groups typically meet face to face each year just before the association's Annual General Meeting.

Information can be shared by the groups in the following ways:

- Free space in the Association's newsletter AVISO
- Space on the CHPCA website devoted to each of the Interest Groups
- Access to Message Board / List Serve

For more information about the CHPCA interest groups, please visit: <http://www.chpca.net/become-a-member.aspx>.

CANADIAN NETWORK OF PALLIATIVE CARE FOR CHILDREN (CNPCC)

The Executive Committee of the CNPCC is an active committee comprising of professionals from across Canada with a focus on pediatric issues. Their purpose is to provide leadership in pediatric hospice palliative care and to advocate for greater and more equal access for children of all ages, along



with their families, to high quality palliative care programs, whatever their geographic location.

This year the committee completed their new terms of reference, and began looking at upgrading the CNPCC website. The CNPCC continues to be involved with the International Children's Palliative Care Network (ICPCN) and the Quality End of Life Care Coalition of Canada (QELCCC) and has representation on their committees.

As last year's first Pediatric Award of Excellence was awarded by acclamation, the committee worked to produce a Pediatric Award of Excellence purpose and eligibility document and nomination/ submission forms for this year's submission process. Once completed, these documents will be made available on the CHPCA website at: <http://www.chpca.net/about-us/awards/award-of-pediatric-excellence.aspx>.

The CNPCC continues to promote education initiatives while monitoring and responding to pediatric palliative care issues across the country. The CNPCC's website, which is currently designed and managed by a volunteer and is found at: www.cnpcc.ca and is linked to the CHPCA's website at: www.chpca.net/about-us/our-team/task-groups.aspx.

CANADIAN HOSPICE PALLIATIVE CARE NURSES GROUP

The Canadian Hospice Palliative Care Nurses Group (CHPC NG) elected executive is made up of palliative care nurse leaders from across the country who volunteer their time and energy to fulfill the group's mandate. They remain committed to its mission and goals and welcome change and the ability to grow as a group. The Nurses Group (NG) had another very productive year, focusing on building an infrastructure that would allow for continued growth of the organization and concentrating on the three key priorities that were identified in their work plan including Visibility, Governance and Capacity Building.

Some of the key accomplishments include:

- Initiating the new Message Board;
- Partnering with CNA and CHPCA to complete the 2015 End-of-Life Care Position Statement;
- Presenting at conferences and submitting articles to provincial and national publications;
- Transferring the process for initial registration and renewal of membership from provincial associations to CHPCA;
- Developing criteria for two new hospice palliative care nursing awards to be initiated in 2016;
- Reviewing and revising the Terms of Reference and renaming them By-Laws;
- Developing policies and structures for all Standing Committees and Working Groups;
- Cultivating relationships with Canadian Association of Schools of Nursing (CASN) in particular the Palliative and End of Life Care Educators Interest Group;
- Aligning with CASN for input/consultation on competency development;
- Supporting the Canadian Nurses Association (CNA) Specialty Nursing Program and continuing professional development for certified online study groups;
- Developing the first a Half-Day Satellite Session to be held at the CHPCA Conference;
- Responding to correspondence and requests from groups such as CNA, CASN, Health Canada and other nursing specialties;



- Coordinating CHPC Nurses Group responses to invited surveys;
- Serving as a member group on the Canadian Network of Nursing Specialties;
- Interacting with provincial Hospice Palliative Care Nurses Interest Groups;
- Serving as invited panel members at numerous healthcare and public events;
- Successfully nominating Judy Simpson, Past-President, for one of the two CNNS representatives on the CNA Board of Directors for the 2015-2017.

The NG has been unified and strong, has worked collaboratively as a team and as noted above had another successful year supporting the enhancing hospice palliative care nursing in Canada. They look forward to working for and with their members in the coming year.

INTERNATIONAL ISSUES

CHPCA is very involved in International Issues and promotes advocacy, twinning and education both within Canada and on the international scene.

CHPCA is also an active member of the Worldwide Hospice Palliative Care Alliance (WHPCA) and the International Children's Palliative Care Network (ICPCN). The Executive Director sits on both of the organizations Board of Trustees as well as their advocacy committees. The mandate of WHPCA is to promote hospice palliative care worldwide, including pain and symptom management.

CHPCA has also increased its international collaboration through its work on ehospice, for which an individual report can be found under the CHPCA websites and ehospice section.

Our current goal is to help CHPCA affiliates to increase international involvement. In 2015 we will launch a twinning initiative.

Please refer to the last section of this report for more details on the WHPCA and ICPCN.

NATIONAL/PROVINCIAL ASSOCIATION RELATIONSHIP

The CHPCA continues to work in close partnership with the provincial hospice palliative care associations. In 2014 a new Memorandum of Understanding (MOU) was created to align with the CHPCA's new By-Laws. The MOU was approved by the CHPCA Board of Directors in October 2014 and has since been signed on by each of the provincial hospice palliative care associations.

Throughout 2014/2015 the CHPCA and the provincial hospice palliative care associations continued to work according to the terms of the new Memorandum of Understanding to further strengthen the valuable relationship between the organizations. The main joint initiatives occurring throughout the year were in areas of information sharing, education and advocacy, and memberships. The membership committee, which was formed in 2011 with the objective of meeting with representatives of each provincial association to discuss issues of joint membership strengthening, continues to meet semi-annually with great success. In 2014 these meetings continued to discuss



the change in membership structure as a part of the changes made to the CHPCA's bylaws. The new bylaws, in accordance with the institution of a new Federal Not-for-Profit Act, meant that the CHPCA's membership structure had to be changed. The new members consist of a representative from each of the provincial associations, plus five members-at-large. Each of these members serves on the CHPCA's Board of Directors. Former members of the CHPCA are now categorized as CHPCA Associates for individuals and Affiliates for groups and continue to receive the same benefits as before with exception to the ability to vote at AGM's. Issues of membership recruitment and retention, marketing, and other membership discussions continued throughout 2014 with great success and have proven to help strengthen the ties between provincial and national memberships.



SUSTAINABILITY AND GOVERNANCE

BOARD OF DIRECTORS

The CHPCA is led by an active, dedicated board of directors. In October 2014, the board hosted the association's Annual General Meeting via teleconference as the meeting was scheduled for the day after the shooting in Ottawa.

The board has three main committees that help support the association in effective operation. These committees are the:

Executive Committee

Organizational Development Committee

Finance Committee

In 2014 a decision was made to change the Awards Committee, a former board committee, into a committee of the association. This decision was made in light of the changes made to the new not-for-profit legislation which dictates that board committees can only be comprised of members of the board. The Awards Committee has always functioned with representation from members both on and off the board and it was felt that to ensure

Awards Committee

The board continues to manage the Balfour Mount Champion Award, while the Awards Committee continues to manage the Award of Excellence and the Pediatric Award of Excellence. In 2014, a decision was made to change the schedule of the awards to be every second year, as opposed to annually, to coincide with the CHPC Conference which is now held biennially.

ORGANIZATION DEVELOPMENT COMMITTEE

The Organizational Development Committee (ODC) is a committee of the Board of Directors charged with overseeing the ongoing development and governance of the CHPCA.

The ODC operates with the following three sub-committees:

Policy Subcommittee: The Policy Subcommittee oversaw the annual perpetual calendar ensuring that current policies were reviewed and affirmed as per the perpetual calendar. In 2014 a review of all of the CHPCA's policies was undertaken by the committee to ensure adherence to the new By-Laws.

Nominations/Bylaws Subcommittee: The Nominations/Bylaws Subcommittee oversaw the nomination process for the Secretary / Treasurer of the Board of Directors. The committee met regularly throughout the year to discuss updates required to the By-Laws.

Membership Subcommittee: The Membership Subcommittee oversaw the joint membership initiative occurring between the CHPCA and the provincial associations.



PHYSICIAN ASSISTED DEATH WORKING GROUP

The Euthanasia and Assisted Dying Working Group continued to meet throughout 2014-2015. As a number of current court cases put euthanasia and assisted suicide in the forefront of Canadian awareness, the Euthanasia and Assisted Dying Working Group met to discuss strategies on how to disseminate correct information about hospice palliative and end-of-life care.

On February 6, 2015, the Supreme Court of Canada struck down the ban on physician assisted death. As a result, the committee continued to distribute the “Let’s Talk About Hospice Palliative Care First” campaign as well as developing the “Power of 10” campaign, with the intention of creating dialogue by Canadians on hospice palliative care as the first consideration.

This committee is very active at this point in time giving CHPCA guidance on this current issue. The committee will continue to monitor activity and the legal status of the decision, which is expected to be implemented nationwide by January 1, 2016.



EXTERNAL ORGANIZATION LIAISON

HEALTH CHARITIES COALITION OF CANADA (HCCC)

In the fall of 2014, Members of the Health Charities Coalition of Canada* (HCCC) joined forces to bring a strong message that Canada needs enhanced support for the 6.1 million Canadian caregivers who are providing necessary support to a family member or friend with a long-term health condition, disability or aging need.

HCCC members met with parliamentarians, policy makers and party leaders to recommend that the Government of Canada expand the Employment Insurance Compassionate Care Benefit by increasing the benefit period from 6 weeks to a minimum of 26 weeks within a 52 week period. This change will provide some income security and enable caregivers to provide vital support to Canadians who are living with disease while maintaining a strong link with their employers.

*The Health Charities Coalition of Canada is a member-based organization comprised of national health charities and patient groups who represent the voice of patients at all levels of the health continuum. HCCC facilitates the collaboration of Canada's health charities to achieve excellence in health policy, practice and research.



INTERNATIONAL ISSUES

The CHPCA is also an active member of the Worldwide Hospice Palliative Care Alliance (WHPCA) and the International Children's Palliative Care Network (ICPCN). The CHPCA has also increased its international collaboration through its work on ehospice, for which an individual report can be found under the CHPCA websites and ehospice section.

WORLDWIDE HOSPICE PALLIATIVE CARE ALLIANCE (WHPCA)

The CHPCA is also an active member of the Worldwide Hospice Palliative Care Alliance (WHPCA). Sharon Baxter sits on the Board of Trustees of the WHPCA as well as on the executive and membership committees. Sharon also chairs the WHPCA Advocacy Committee. The WHPCA is active in international, regional and national advocacy. The WHPCA is the secretariat for World Hospice Palliative Care Day held in early October each year. This past year CHPCA coordinated the World Day materials and website.

A hospice palliative care resolution was passed at the World Health Assembly in Geneva in early May 2014. Please visit our website for further details.

INTERNATIONAL CHILDREN'S PALLIATIVE CARE NETWORK (ICPCN)

ICPCN sits on the board of trustees of WHPCA and there was an opening on the board of ICPCN for an official WPCA representative. Sharon Baxter was nominated and assumed this position. ICPCN is a UK registered charity working out of South Africa and is charged with raising issues around children's hospice palliative care worldwide. ICPCN is doing wonderful work, and Sharon sits on both the Board of Trustees and the Advocacy Committee. Dr. Marli Robertson from Calgary is the official Canadian representative to ICPCN.

ICPCN is currently working on an awareness campaign for their tenth year. More details can be found on our website <http://www.icpcn.org>.



NATIONAL OFFICE STAFF

(EFFECTIVE MARCH 31 /15)

Sharon Baxter
Executive Director

Cheryl Spencer
Administrative Coordinator, Hike Coordinator and co-coordinator of the National Conference

Laureen Nickerson
Administrative Assistant, membership and marketplace

Tamir Virani
Communications/Policy Officer, media, co-coordinator Week campaign, editor of AVISO and ehospice

Elizabeth Balsom
Fundraising and Communications Assistant, co-coordinator Week campaign and the National conference, coordinator social media, member of ehospice team

Kelly MacLaren
Partnership and Development Officer

Savanah Ashton
Project Assistant: The Way Forward Initiative

Giovanna Acres (part-time)
Project Assistant: ACP in Canada initiative

Anna Johann
Project Coordinator, Advance Care Planning

Sandie Lessard (part-time contractor)
Finance Officer

Louise Hanvey (contractor)
ACP in Canada Initiative

Leanne Kitchen Clarke (contractor)
The Way Forward Initiative



SUPPORTERS

The CHPCA relies heavily on the support that we receive from our generous partners and sponsors whose financial assistance keeps us in operation. We would like to acknowledge our current partners and thank them for their ongoing support.

PARTNER LEVEL (\$50,000+)

CBI Health Group
GSK
Health Canada
Prostate Cancer Canada

COMPASSION LEVEL (\$25,000 - \$49,000)

Arbour Memorial
Bayshore Home Health Care
Canada's Research-Based Pharmaceutical Companies (Rx&D)
Canadian Partnership Against Cancer (CPAC)
Cancer Care Ontario
McMaster University
Purdue Pharma

DIGNITY LEVEL (\$10,000 - \$24,999)

Revera Living

COMFORT LEVEL (\$5000 - \$9,999)

Employment and Social Development Canada (ESDC)
The Order of Saint-Lazarus

The CHPCA would like to acknowledge the considerable in-kind donation of time made by our dedicated and hard-working board of directors. Without their efforts, the CHPCA would not be able to accomplish so many of the important activities outlined throughout this report.

We would also like to once again offer a special "thank you" to our lawyer John Peart of Nelligan O'Brien Payne who has given tirelessly of his time for over ten years. His guidance and knowledge has served us beyond measure.



BOARD OF DIRECTORS 2014-2015

(Effective March 31, 2015)

EXECUTIVE COMMITTEE:

President – Laurie Anne O'Brien
Past President – Sarah Walker
Vice President – Rick Firth
Treasurer – Jeff Christiansen
Manitoba Provincial Member – Val Paulley

PROVINCIAL MEMBERS:

Alberta – Leslie Penny
British Columbia – Meg Milner
New Brunswick – Pamela Mansfield
Newfoundland – Linda Abbott
Nova Scotia – Carolyn Marshall
Ontario – Marg Poling
Prince Edward Island – Jodi Swan
Quebec – Maryse Bouvette
Saskatchewan – Jeff Christiansen

Consumer Member-at-Large:
Beryl Cable-Williams

CHPCA BOARD COMMITTEES

(Effective March 31, 2015)

EXECUTIVE COMMITTEE:

Chair: Laurie Anne O'Brien

ORGANIZATION DEVELOPMENT COMMITTEE:

Chair: Sarah Walker

POLICY SUB-COMMITTEE:

Chair: Leslie Penny

NOMINATIONS/BY-LAWS SUB-COMMITTEE:

Chair: Sarah Walker

MEMBERSHIP SUB-COMMITTEE:

Chair: Rick Firth

FINANCE COMMITTEE:

Chair: Jeff Christiansen



CHPCA TASK GROUPS / COMMITTEES

(Effective March 31, 2015)

CANADIAN NETWORK OF PALLIATIVE CARE FOR CHILDREN (CNPCC):

Chairs: Hal Siden & Marli Robertson

PAD COMMITTEE:

Chair: Sharon Baxter

VOLUNTEER ISSUES TASK GROUP:

Chair: Joan Williams

AWARDS COMMITTEE:

Chair: Donna Kavanagh

LEGAL AND HUMAN RIGHTS COMMITTEE:

Chair: Sharon Baxter

CHPCA CHAMPION'S COUNCIL

(Effective March 31, 2015)

Mr. Russell Williams, (Chair), President
Canada's Research-Based Pharmaceutical Companies (Rx&D)

Ms. Kathryn Butler Malette, Chief Human Resources Officer (retired)
The House of Commons Canada

Hon. Sharon Carstairs (retired), P.C.
The Senate of Canada

Mr. Bill Greenhalgh, CEO
Human Resources Professionals Association

Mr. Michael Sangster, Vice President of Government Relations
TELUS Canada

Hon. Michael MacDonald
The Senate of Canada

Mr. Jon Fairest, President & CEO
Sanofi Canada



FINANCIAL STATEMENTS

The Canadian Hospice Palliative Care Association is pleased to present the Financial Statements for the period of April 1, 2014 – March 31, 2015.

The Board of Directors each year reviews the audited statements as prepared by our external auditor, Ouseley Hanvey Clipsham Deep LLP, and the results of that review are the approved financial statements as seen here in this report. We are pleased to be able to share with you our Statement of Financial Position and Statement of Revenue and Expenditure.



CANADIAN HOSPICE PALLIATIVE CARE ASSOCIATION

ASSOCIATION CANADIENNE DE SOINS PALLIATIFS

STATEMENT OF FINANCIAL POSITION
AS AT MARCH 31, 2015ÉTAT DE LA SITUATION FINANCIÈRE
AU 31 MARS 2015

	2015	2014	
CURRENT ASSETS			ACTIF À COURT TERME
Cash	\$ 78,837	\$ 168,005	Encaisse
Investments (note 3)	350,000	350,000	Placements (note 3)
Accounts receivable	121,337	148,185	Compte débiteurs
Prepaid expenses	138,250	90,306	Frais payés d'avance
	688,424	756,496	
CAPITAL ASSETS (note 5)	3,311	8,160	IMMOBILISATIONS (note 5)
	\$ 691,735	\$ 764,656	
CURRENT LIABILITIES			PASSIF À COURT TERME
Accounts payable and accrued liabilities	\$ 146,324	\$ 228,185	Comptes créditeurs et frais courus
Deferred revenue (note 4)	311,112	347,634	Revenu reporté (note 4)
	457,436	575,819	
NET ASSETS			ACTIFS NETS
Internally restricted (note 7)	42,485	-	Grevés d'affectations d'origine interne (note 7)
Unrestricted	191,814	188,837	Non affectés
	\$ 691,735	\$ 764,656	



CANADIAN HOSPICE PALLIATIVE CARE ASSOCIATION

ASSOCIATION CANADIENNE DE SOINS PALLIATIFS

STATEMENT OF OPERATIONS
FOR THE YEAR ENDED MARCH 31, 2015

ÉTAT DES OPÉRATIONS
POUR L'EXERCICE TERMINÉ LE 31 MARS 2015

	2015	2014	
REVENUE			REVENU
Conference	\$ 181,646	\$ 454,567	Congrès
Donation	288,896	357,203	Dons
Grants	811,808	933,699	Subventions
Interest	3,536	4,375	Intérêt
Membership fees	52,660	69,186	Cotisations des membres
Administrative services	59,460	51,100	Services administratifs
Resource material	71,623	50,317	Documentation
Miscellaneous	153,219	20,251	Divers
	1,622,848	1,940,698	
EXPENDITURE			DÉPENSES
Advertising and promotion	3,656	8,504	Publicité et promotion
Amortization	4,849	5,290	Amortissement
Bank charges	6,730	31,209	Frais bancaires
Communications	31,500	30,248	Communications
Contracted services	613,515	784,216	Services impartis
Dues and subscriptions	5,505	6,311	Cotisations et abonnements
Facility rentals	77,017	140,636	Location des installations
Human resources	468,131	511,733	Ressources humaines
Insurance	4,017	3,901	Assurance
Meeting costs	5,905	26,235	Coût des réunions
Office supplies	19,304	12,004	Fournitures de bureau
Postage	34,742	12,162	Affranchissement
Printing	103,709	68,491	Impression
Professional fees	7,273	6,659	Honoraires professionnels
Rent	39,852	47,249	Loyer
Teleconferences	5,123	7,654	Téléconférences
Telephone and facsimile	9,162	19,895	Téléphone et télécopie
Training and professional development	7,073	898	Formation et perfectionnement professionnel
Translation	40,805	53,487	Traduction
Travel	89,360	151,800	Déplacements
Voluntary recognition and honoraria	158	1,518	Honoraire et reconnaissance des bénévoles
	1,577,386	1,930,100	
NET REVENUE FOR THE YEAR	\$ 45,462	\$ 10,598	REVENUS NETS POUR L'EXERCICE