



Annual Report

2013 –
2014

The symbol **of excellence**
in long-term care.



Action **m**arguerite

Service & Compassion

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MAJOR HIGHLIGHTS OF 2013-2014

Actionmarguerite is dedicated to providing compassionate care in French and English to all its residents, helping them maintain their autonomy and independence whenever possible. To this end, Actionmarguerite offers the following programs and services:

- **Long Term Care Program** consisting of personal care homes at 450 River Road and 185 Despins for elderly people who can no longer live on their own.
- **Care for adults** with complex health needs, acquired brain injuries or chronic health conditions located at 185 Despins.
- **Dementia care and specialized care** for people suffering from dementia and related disorders.
- **Supportive Housing** for adults requiring 24-hour supervision and some assistance managing physical limitations or ongoing health conditions. This program is located at 187, de la Cathédrale Avenue and 875 Elizabeth Road.
- **Adult Day Programs** giving adults living in the community the opportunity to improve their well-being through social gatherings and activities.
- **Spiritual Care and Recreation Services.**
- **Rehabilitation Services and Social Work.**
- **Support Services:** (food services, housekeeping, maintenance and safety).
- **Volunteer Services.**
- **Human Resources and Financial Services** to St. Joseph Residence, Centre de santé de Saint-Boniface Health Centre and River Park Gardens (WRHA).


Actionmarguerite benefits from the quality, competence and dedication of its 700 staff members and 300 volunteers. We recognize their outstanding work in 2013-14. Together, we are proud to present this annual report and share insights on how the organization is achieving the main sponsorship

objectives of the Catholic Health Corporation of Manitoba, Manitoba Health Standards and the quality goals of the Winnipeg Regional Health Authority's Long Term Care Program.

As a vital partner of the Winnipeg Regional Health Authority and Manitoba Health, Actionmarguerite offers regional and specialized care programs that support those who, as they age, suffer from chronic diseases or behavioral difficulties due to dementia, acquired brain injuries or different forms of neurological diseases.

Its mission is to improve residents' and clients' quality of life by promoting their autonomy and their ability to remain as independent as possible. By supporting a welcoming environment, as well as a culture of respect and dignity, we continue to be sensitive to the needs of the people we serve, and the generous people who work and volunteer at Actionmarguerite. Our mandate is also to serve Manitoba's Francophone community and to embrace Winnipeg's cultural diversity.

This mission of caring with compassion is demonstrated in every action taken by staff and volunteers in providing safe, quality care and services to a vulnerable population. For many of our residents, we will be their last home. Actionmarguerite also strives to provide the best possible palliative and end of life care services by ensuring residents and their families are treated with dignity and respect.



'Over a number of years, the resident has always felt at home and I would say loved and cared for by the staff.'

Family member



The 2013-14 fiscal year is marked by a number of important events:

- Receiving of the Caritas Award from Catholic Foundation of Manitoba.
- Adopting a new 2014-2019 strategic plan.
- Celebrating the 25th anniversary of the opening of Foyer Valade and the 50th anniversary of the Ladies Auxiliary.
- Achieving 100% of Manitoba Health provincial standards at both personal care home sites.
- Achieving over 80% satisfaction from our residents and families.
- Achieving 65% of staff participation in our first ever staff engagement survey.

The year ended with the Caritas Award Diner. The event was not only a recognition of our past and present, but it was mostly a sign of trust for our future. We need to continue to tell the story to many staff and individuals, who may not know what a Grey Nun is. Some may have never seen a Grey Nun or may be of a different faith or belief; and many of the people we hire come from different cultures and languages.

These people represent our workforce today and in the future. Our staff and volunteers need to know the story of a women, Sainte Marguerite d'Youville, who despite her conditions in the early 1700s, saw a need, opened her home and welcomed the poor, the destitute, the sick and the aged.

It is this story that inspired the Grey Nuns and it is this story that continues to inspire our staff and volunteers today. The story of Sainte-Marguerite d'Youville is demonstration of faith, compassion, service and action. This inspiration is what will carry us forward in the future and ensure that the work of the Catholic Health Corporation of Manitoba, and ultimately the Church, will continue for decades to come.

Actionmarguerite's 2014-19 strategic plan established bold goals that set out a direction on how it plans to pursue this mission of service and compassion. By 2019, we will have significantly improved our organizational capacity and leadership by:

1. Strengthening our culture of compassion and care towards clients, families and staff.
2. Leading and being innovators in assisting clients to navigate the health system through the delivery of a continuum of care and services including: respite care, home care, day programs, assisted living, supportive housing, personal care and specialized complex care.
3. Becoming a preferred employer, through the creation a work environments that support safety and continuous improvement.
4. Diversifying its revenue sources by responding to new opportunities and by expanding our scope and services.
5. Continuing to be transparent and accountable to our sponsors, government and funding partners.
6. Ensuring that the Francophone community of Manitoba continues to access long term care services in French, as per our provincial mandate.

In October 2013, we produced an insert in La Liberté and the Lance. This community report described many of Actionmarguerite's programs and services and marked the 50th anniversary of the foundation of Taché Centre Ladies Auxiliary and the 25th anniversary of Foyer Valade. The brochure and event were funded by the Foundation.



Donation from the Ladies Auxiliary - archives



Actionmarguerite's efforts over the last few years were rewarded during the 2014 Manitoba Health Standards visit at both our personal care home sites. This external review is done by Manitoba Health every two years as part of the provincial licensing requirements. In addition to meeting every single standard at both sites, each personal care home achieved 100% compliance with all review requirements. This perfect score is rarely achieved. The success is clearly the result of many people's dedication and determination to ensure that our residents are provided with a baseline of quality services and, in some cases, exemplary care. The external reviewers congratulated, in particular, the excellence collaborative work in areas of integrated care planning, clinical services, pharmacy, governance and safety.

Actionmarguerite spends approximately \$36 million in programs and services to clients. Staff wages represent 83% of the expenditure. They are our most important asset.

In 2013-14, we partnered with the Winnipeg Regional Health Authority in conducting our first ever independent staff engagement survey. Previously, we never had the opportunity to gather staff opinion in a manner that was proven to be reliable. The survey was also an opportunity to compare our staff results with the larger Winnipeg health system and best employers across other industries.

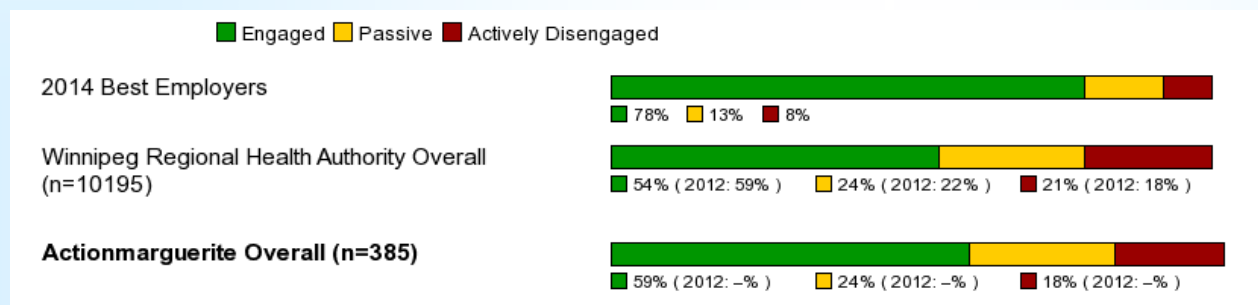
The main objectives of the survey was to assess the current levels of employee engagement, identify key drivers, strengths and areas of improvement. By understanding employee needs and issues, we have an opportunity to improve the two-way communication between management and staff on priorities relating to the creation of a culture based on accountability and responsibility.

We plan to conduct the same survey in October of 2014 (through AON Hewitt). This will provide us with a deeper understanding of engagement trends, while validating the results of our actions taken since the first survey in June of 2013 (Table 1).

Although we slightly scored higher than the WRHA in overall engagement, there are a number of challenges and opportunities that have been discussed with staff since the survey was completed. Our strength is clearly Actionmarguerite's reputation in the local community, as well as staff's sense of accomplishments.

Leadership, management and staff recognition are areas requiring improvement. In all areas of the organization, there continues to be work required to achieve a higher level of staff recognition. This goes beyond staff events such as long service awards and the annual staff BBQ. There is a deeper conversation to have with staff on the value of the work being performed and the work environment.

Table 1 – Overall Engagement Score



Leadership and management are two key elements in improving staff engagement. There is some recognition of the effectiveness of senior leadership (Table 2) and in its overall ability to provide a clear direction for the future. Managers are also supportive of their staff in order for them to succeed (Table 3).

The results of the survey were shared during 30 staff focus groups held over a four month period. Staff helped management identify the challenges and priorities. Specifically, staff require resources, tools and co-workers that are dependable, well-trained and

committed to excellent care. They also need managers to communicate more and to manage performance. The organization as a whole also needs to continue to work towards a work environment that values the work of all employees. Actionmarguerite’s success in the future continues to be its ability to attract strong and effective employees that are qualified and well trained to meet the needs of residents and families.

Table 2 – Effectiveness of Senior Leadership

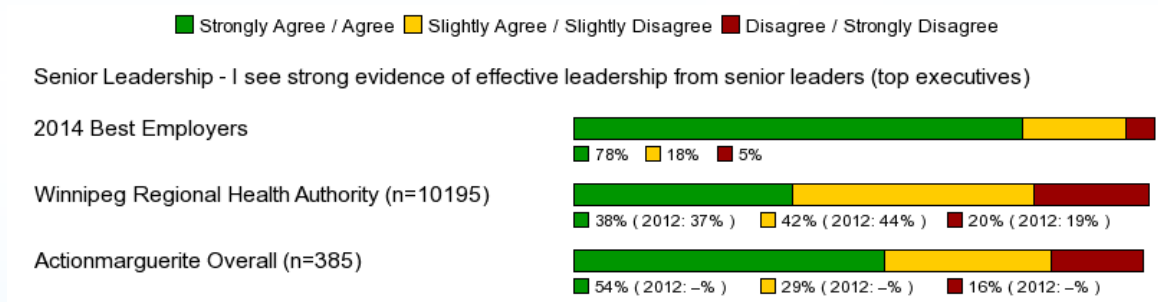
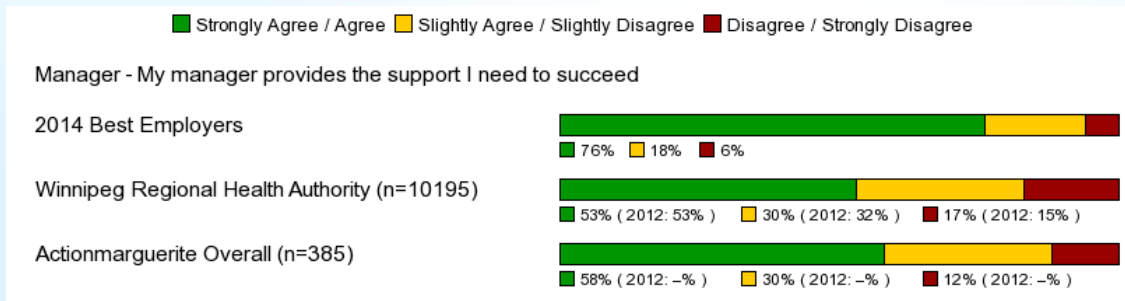


Table 3 – Manager’s Support

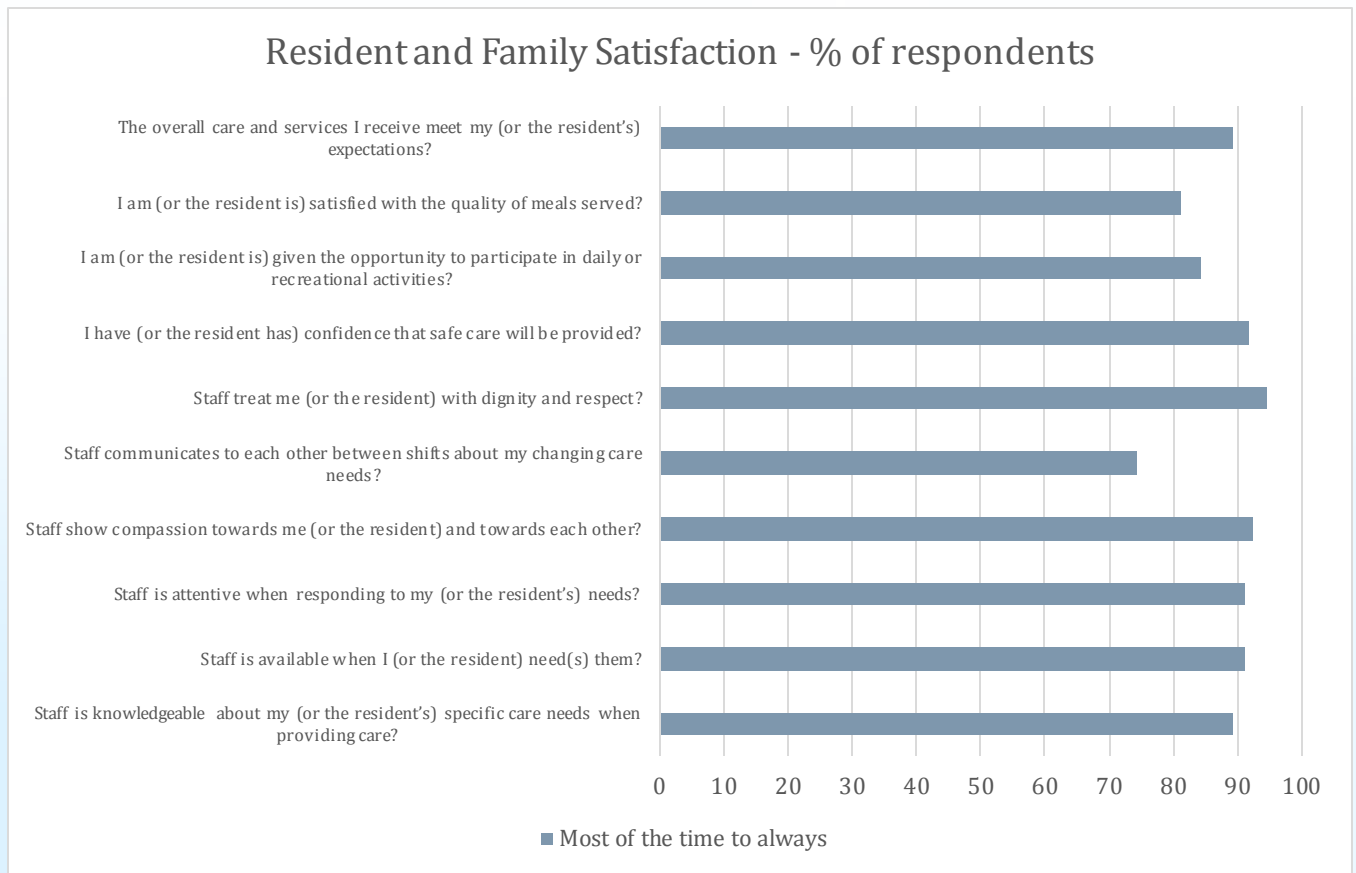


In June 2013, 28% of resident and family responded to a new satisfaction survey, conducted to determine how we could improve our care and services. Over 275 respondents evaluated staff overall performance; 50% of the answers were provided by families. Residents and families were asked to rate how their needs were being met (ie. always, most of the time, not often or never). Table 4 provides the results for those who rated us at “most of the time” to “always”.

The goal is to fully meet (at 100%) the needs of residents and families. Following the survey, steps were taken to improve our overall delivery of care and services. These included:

- Improve follow-up on the integrated care plans: Manitoba Health commented on the quality, interdisciplinary and follow through on Actionmarguerite’s care plans.

Table 4 – Resident and Family Satisfaction - % of respondents



- Conduct and publish audits: A detailed schedule and reporting system is in place to review audits conducted in clinical and supportive areas. These results are reviewed monthly, quarterly and annually.
- Educate staff on client service approaches: This includes more efforts placed in supporting staff to conduct themselves in manners consistent with the service industry.
- Increase opportunities for mindfulness training: The organization continues to take advantage of the opportunities to increase training in areas of mindfulness. Managers and staff have and continue to attend many of these sessions.
- Implement the “compassion project”: CHCM’s documentary on compassion continues to be viewed across the organization. Discussions among staff have proven beneficial in supporting teamwork and to understand the significance of demonstrating compassion in the delivery of care and services.
- Improve process for communication between shifts: The importance of relaying information on resident care between staff and during shift changes was also identified as part of the staff engagement focus groups. Work continues to support and train staff on the importance of communication and reviewing changes in the resident’s care plans.
- Offer ethics sessions for staff on issues of dignity and respect: Ethics workshops and education continue and contribute to greater awareness on the importance of showing dignity and respect when providing care and services.
- Continue staff training on mandatory education related to safety: There is an ongoing effort to improve our culture of safety through greater staff awareness in areas focusing on keeping residents safe and feeling secure in their environments.
- Improve individualized recreation and activity programs: The changing needs of residents continue to require innovative programming in order for residents to remain active and engaged in daily life activities. Important work was accomplished in the past year in providing art programs to residents. An art exhibit was offered to the public during the October 2013 open house and celebration of the Auxiliary’s 50th anniversary.
- Increase number and frequency of food audits and quality of meals served: There is an increased ability to demonstrate continuous improvement in meeting residents’ food requirements and preferences. Through audits, education and resident food committees, food services staff continue to offer a meal experience that is consistent and ensures that the residents’ dietary requirements are met.
- Monitor staff performance: Important progress has been achieved in conducting performance evaluations and having important conversations with staff in terms of career development, professional development and staff retention. The staff engagement survey clearly demonstrated that managing performance and conversations with their manager are significantly more engaged.



GOVERNANCE AND ACCOUNTABILITY FRAMEWORK

Actionmarguerite adopted its 2014-2019 strategic plan which outlines how it plans to achieve the Catholic Health Corporation of Manitoba (CHCM)'s Governance and Accountability Framework. The Board and Management of Actionmarguerite has strengthened its governing policies and financial controls. It has also implemented many of the WRHA Internal Audit Recommendations conducted in March 2013.

SPIRITUAL HEALTH

Our goal is to integrate spiritual health in key program areas and focus on the needs of the whole person.

CHCM's Compassion Project continues to be important and provides a unique opportunity for management and staff to reflect on how best to contribute to the creation of a compassionate and caring organization.

In the past year, we noted the departure of Father Alain Piché, who for many years served as the priest-chaplain at 185 Despins. Father Piché was a very important contributor to the program. We are also very fortunate to have Father Léo Couture join our team and he continues to provide Catholic services to our residents. We also renewed our agreement with Father Robert Campeau who is greatly appreciated by the residents at 450 River Road.

In addition to supporting our residents and families through a number of spiritual and cultural services, the team continues to evolve and to tailor their services to the needs of residents. In addition to attending workshops, the spiritual care department actively participates in the care conference and actively charts issues of concern related to residents' spiritual dimension. In addition to having introduced the comfort care programs for families, the team holds post-death briefings with staff to review and ensure that supports are in place at the end of life. The program continues to offer its memorial services as well as has introduced memorial boards on each unit to

mark the passing of residents, volunteers and staff who are known to the organization. We have created an end of life team at 450 River Road and are in the process of creating such a team at 185 Despins.

We have actively participated in the development of a more formal regional end of life program within the WRHA Long Term Care Program. This program consists of a measuring tool for the evaluation of end of life care in personal care homes. The survey will invite family members to provide valuable feedback to the program following a death in a personal care home. The program also offers end of life resource reference documents to support staff in preparing when end of life is imminent.

ETHICS

Our goal is to promote a culture of compassion and of ethical behaviors consistent with the mission and values.

We continue to extremely benefit from the presence of our clinical ethicists. Pat Murphy and George Webster actively participate and engage in the organization. In the past year, they have added to their service offering by providing a monthly communication to Board members and staff on important articles or current events in health care related to ethics. They continue to integrate their practice with other health professionals. They encourage teamwork, inter-professional relationships and place important value on our conversations with residents and families. Over the last five years, Actionmarguerite offers more comprehensive ethics training at the leadership level, and includes managers, physicians, social workers, nurses and health care aides. This continues to include:

- Nurses Ethics Lab every six weeks
- Social Work & Managers/Supervisor Ethics Labs



- Complex Care Rounds with Health Care Aids
- 5AB Ethics session every 6 weeks (12 sessions planned with Georges Webster)
- Resident & Family on-going consultations

The clinical ethics simulations continue to provide opportunities to clinical managers, social workers and nurses to discuss specific topics related to actual challenges faced by our staff; providing scenarios and tips for resolution in a fair and ethical manner. These labs have developed our skills in communication with residents, family and staff; conflict resolution; and dealing with difficult resident and family situations.



The ethics lab are a chance to learn in a very supportive environment. Very practical application of learning, i.e.: doing. Excellent, realistic ways to deal with challenging situations, people and conversations.

The Board of Directors have its annual education related to dealing with complex ethical issues at the governance level. The discussion from this educational session outlined the importance of the trusting relationship between the Board and the CEO, including an open and transparent dialogue on issues facing the organization that are beyond the Board's fiduciary and regulatory responsibilities.

In the future, we plan to continue to provide the Board and staff with regular educational opportunities. This would also include unit and department specific workshops on values and behaviors, communication and teamwork. Finally, we would like to sponsor an annual ethics conference on an ethical theme in long term care.

RESPONDING TO UNMET NEEDS

Our goal is to respond to client and community health needs, including cultural and language requirements with innovative programming in partnership with other providers.

In 2013-14, we actively participated in a WRHA Paneling Redesign Project in order to improve patient flow and reducing the number of interim placements in long term care. This new model of wait list management will challenge personal care homes in terms of resident admission and ensuring that it continues to respond to its community mandate.

We continue to expand our human resources services and software system to increase reporting, access and communication on critical metrics. One of the indicators we are now able to monitor more effectively are staff performance.

We received approval of a self-funding proposal for the replacement of the dish machine at 185 Despins, with proceeds from the operational efficiencies gained through restructuring food services. The \$500,000 investment will be paid through efficiencies. This is another example of our ability to improve our capital infrastructure without depending on Manitoba Health's capital planning process.

We continue to work with the WRHA to move forward on the development of behavioral and ABI units. This project will allow for the renovation of outdated units and the elimination of double rooms at 185 Despins. This should represent a capital investment of approximately \$1.6 million in renovations and operating revenues of approximately \$2 million per year in direct care services.

The plan also consists of developing further housing and supportive housing options in partnership with others, which might also be available for younger adults.



SUSTAINABILITY

Our goal is to improve financial sustainability by optimizing the delivery of care and services by achieving best practices.

Maximizing our resources ensures that we can offer more services to our residents and staff. In 2013-14, we made improvements to capital planning and equipment purchasing based on a 10-year plan. We continue to centralize our support operations and shared positions throughout the organization. We have also consolidated our financial reporting and restructured our food services.

We continue to improve our financial position in supporting housing in large part due to the renewal of the last Service Purchase Agreement (SPA). The current SPA expired in September of 2013 and negotiations are ongoing. The program is more sustainable and there are opportunities to improve the scope of services and programs.

The adult day program continues to be in a positive financial position. The program's participation rate continues to be below 70%, despite consolidation with Golden Links Programs which closed on March 31, 2013. The goal is still to find an alternative location for this program as it would be better suited within a community setting.

Actionmarguerite continues to find ways of achieving a balanced position. The St. Vital site has incurred a deficit for the third year in a row and steps are being taken to prevent concurrent deficits. This may require further consolidation of services in order to achieve the financial targets.

In reviewing the last 10 years, there is a gradual erosion in funding due to inflation and operating costs. Although there were important investments made in nursing staff through the hours of care project, there are clear trends indicating that personal care homes, funded at the median funding rate, will continue to experience annual deficits which will further erode their reserve funds.



In the next 24 months, Actionmarguerite needs to address a number of issues under sustainability:

- The development of a risk management program in the following areas: human talent, emergency response, infrastructure and equipment replacement.
- The development of fundraising strategies for the future development of programs, services and capital improvements.
- The ongoing implementation and maximization of new software and technology, including expanding Quadrant Workforce (leave management, ability management, time and attendance), a major upgrade of our Electronic Patient Record (Momentum) and the introduction of new security monitoring technology.
- The ongoing management of leadership succession and management development.
- The strengthening of Board governance and oversight of a number of business operations, including Foundation and other ancillary operations (i.e.: financial contracts and other administrative services).

The sustainability of the organization will continue to be challenged as Manitoba Health and the Winnipeg Regional Health Authority introduce new corporate practices and policies that add to the level of reporting and transparency. There is an increased scrutiny and accountability required under new legislation (Bill 6 – Accountability and Transparency) requiring more reporting and disclosure of business practices. Actionmarguerite introduced a new conflict of interest policy as well as new procedure of the allocation of expenditures between the different business entities

The Service Purchase Agreement with the WRHA for the delivery of personal care home services will come to an end on March 31, 2015.

EXCELLENCE

Our goal is to achieve 100% of Manitoba Health standards for personal care homes and 100% implementation of the WRHA-LTC quality plan.

Excellence can only be achieved when everyone is working towards it. This was achieved in part in 2013-14 with meeting 100% of all the Manitoba Health Standards at both sites. This required the commitment and dedication of all staff as Manitoba Health Standards cover a broad range of operational requirements.

In addition to meeting the standards, the 2013-14 fiscal year included:

- Decrease in the number of critical incidents due to the Fall Prevention Program.
- Increase in optometry clinics for residents.
- Implementation of the pressure ulcer reduction program.
- Increase in the number of days of the dental program.
- Implementation and monitoring of performance evaluations.
- Creation of a PIECES support team at AMSV with one for St. Boniface in 2014 (PIECES is a specialized training program for staff working with clients suffering from dementia).
- Addition of a 3rd day orientation of nurses.
- Introduction of a SAFE Meal delivery initiative at St. Vital.
- Improvement in the management and monitoring of costs from med-surge, gloves and incontinence products.
- Increase in safety audits, including the use of sliders.
- Introduction of interdisciplinary education session from critical incident reviews.
- Introduction of team building session (recreation in 2013).
- Participation in the WRHA Collaboration Care Interdisciplinary Model of Care.
- Participation in WRHA Boot Camp for new managers.
- Increase in number of student practicums (social work, nursing, health care aids, administrative assistant and recreation).



- Implementation of the print optimization strategies to reduce costs.
- Improvement to staff work space and work environments.
- Creation of a new staff lounge.

The Board of Director monitors monthly and quarterly a number of quality indicators including the number of complaints, use of agency staff, costs of medication, wait times in hospital and community for personal care homes, supportive housing vacancy rates, day program participation rates, percentage of audits completed, number of PHIA breaches as well as a number of clinical indicators from the Minimum Data Set (MDS) regional data base:

- Percentage of residents with pain
- Percentage of resident whose pain worsened
- Percentage of resident on antipsychotics without a diagnosis of psychosis
- Percentage of residents whose behavioral symptoms worsened
- Percentage of residents in daily physical restraints
- Percentage of residents who fell in the last 30 days
- Percentage of residents with a newly occurring stage 2 to 4 pressure ulcer
- Percentage of residents whose stage 2 to 4 pressure ulcer worsened
- Percentage of residents whose mood from symptoms of depression worsened

These indicators enable the Board and its Program Quality Committee to compare historical results with other personal care homes. Regional and local strategies, education and audits are introduced in order to improve the overall quality score.

Actionmarguerite also participated with the University of Manitoba Centre for Health Policy in developing a provincial report card methodology, including the public reporting of quality indicators in personal care homes. The work of the Centre and Actionmarguerite's role on the advisory committee will continue in 2014-15 with the expectation that the Manitoba Centre for Health Policy will produce its final report to the Minister of Health by the end of 2014.

Actionmarguerite's challenge will continue to be human resources recruitment and retention. In 2013-14, there were a number of retirements of senior leadership and professional staff. The renewal and succession of our leadership will require our experienced leaders to mentor, train and support new talents who, with their energy and dedication, will maintain the momentum required to achieve our goals. In 2013-14, we were successful in recruiting new managers and supervisors in key areas. We are confident that these individuals will contribute positively to our future.

LINGUISTIC MANDATE

Our goal is to create capacity to support the French language designation and mandate to serve the Francophone population.

The provincial mandate to provide French language services to the Winnipeg's and Manitoba's Francophone population is increasingly important to fulfill Actionmarguerite's vision of being a leading provider of long-term care and exceptional health services in French and English.

Actionmarguerite has finalized its Manager's Guide for the implementation of French Language Services. This guide provides an overview of our policies with respect to French language services and provides managers with easily accessible information to help support active offer of French and English services. The organization's ability to maintain and build capacity in providing French language services is becoming increasingly challenging. As services and staffing levels increase, the ability to find quality bilingual staff is more difficult, in large part due to the increasingly competitive market for bilingual staff and the ongoing flow of retirements.

The ability to recruit and retain qualified and bilingual staff will continue to be a challenge, although in the last four years, improvements were made in some categories and not in others (Tables 5 and 6). There is a requirement to invest more resources in supporting this mandate, especially in the areas of active offer training, language training and translation services. The cultural and linguistic diversity of our workforce as



well as resident's families will require that our staff be more sensitive and capable of providing active offer at all times.

We continue to work at the regional and provincial level to support the development of tools and resources that will contribute to increase the organization's capacity. We participate at the provincial level on the joint Santé en français –Manitoba Health working group on the development of Manitoba Health policy on bilingual workforce in health care. Although the results of this working group is long term, it does bring together senior human resources professionals to standardize the approach in dealing with the application of language qualifications and collective agreements.

We also participated in the development of the WRHA strategic plan. The regional support continues to be an important resource in the development of tools to support the implementation of the regional French language policy.

Manitoba Health made official the designation of Actionmarguerite with the passing of new regulations for the Bilingual and Francophone Facilities and Programs Designation under *The Regional Health Authorities Act*. The regulation clarifies the designation beyond the licensing of personal care homes.

Table 5 Percentage of Equivalent Full Times (EFT) who Meet the Linguistic Qualification at Actionmarguerite (Saint-Boniface) Inc.

<i>St. Boniface - 2011 to 2014</i>	<i>2011</i>	<i>2012</i>	<i>2013</i>	<i>2014</i>
<i>Administration</i>	81%	86%	76%	75%
<i>RN / RPN</i>	56%	58%	49%	63%
<i>LPN</i>	64%	57%	39%	30%
<i>HCA</i>	39%	45%	46%	47%
<i>Allied Health</i>	75%	93%	66%	83%
<i>Other</i>	72%	53%	68%	71%
<i>Housekeeping/laundry</i>	81%	84%	87%	87%
<i>Dietetics</i>	69%	68%	73%	71%
<i>Day Centre Program</i>	62%	85%	67%	56%
<i>Supportive Housing</i>	51%	49%	55%	50%
TOTAL	56%	58%	57%	58%



Table 6 Percentage of Equivalent Full Times (EFT) who Meet the Linguistic Qualification at Actionmarguerite (Saint-Vital) Inc.

<i>St. Vital 2011 to 2014</i>	<i>2011</i>	<i>2012</i>	<i>2013</i>	<i>2014</i>
<i>Administration</i>	100%	100%	91%	83%
<i>RN / RPN</i>	65%	53%	45%	51%
<i>LPN</i>	59%	81%	65%	70%
<i>HCA</i>	62%	101%	70%	70%
<i>Other</i>	90%	100%	100%	100%
<i>Housekeeping/Laundry</i>	96%	98%	100%	79%
<i>Dietetics</i>	69%	70%	37%	36%
<i>Total</i>	80%	91%	69%	69%



CONCLUSION

Actionmarguerite continues to improve and ensures that its mission is carried out faithfully and in accordance to the values of the Catholic Health Corporation of Manitoba and the Grey Nuns. To do so, we rely on a very large number of staff and volunteers to dedicate themselves to the wellbeing of others.

It is important to thank all the staff, volunteers, donors and Board Members who contribute to the success of the organization. They always keep the residents and community in mind when performing their work.

There is also a strong partnership and collaboration established between our staff and our unions in achieving a work environment that is productive, respectful and just. Our partners, and in particular the WRHA Long Term Care Program, have supported the development and mission of Actionmarguerite.

Together, we are challenged by the increasing demands on the health system, but also committed to leading in adapting our programs and services to meet the needs of the citizens of Manitoba.

This annual report briefly describes all the good deeds that transpire over the course of 12 months. Ultimately, our success is only measured by the quality of life and opportunity we provide to our residents, clients and families. We continue to aspire to always being compassionate and focused on the present in order to respond to the genuine need of residents and clients. We are proud and humbled to be of service to this very important population.



Actionmarguerite (Saint-Boniface) Inc. and Actionmarguerite (Saint-Vital) Inc.
Condensed Combined Financial Statements

CONDENSED COMBINED STATEMENTS OF FINANCIAL POSITION

March 31, 2014 and March 31, 2013

	2014 \$	2013 \$
Assets	<u>32,248,605</u>	32,122,094
Liabilities & Deferred Contributions	<u>27,989,202</u>	28,163,072
Fund Balances	<u>4,259,403</u>	3,959,022
	32,248,605	32,122,094

CONDENSED COMBINED STATEMENTS OF OPERATIONS AND CHANGES IN FUND BALANCES

Year ended March 31, 2014 and March 31, 2013

	Operating Fund	Ancillary Operations and Internally Restricted Funds	Capital Fund	2014 Total \$	2013 Total \$
Revenue:					
Winnipeg Regional Health Authority	26,835,686	-	-	26,835,686	26,583,930
Resident and service fees	<u>8,301,732</u>	-	-	<u>8,301,732</u>	8,054,375
	35,137,418	-	-	35,137,418	34,638,305
Amortization of deferred contributions	-	-	943,843	943,843	910,292
Offset income	<u>737,033</u>	<u>183,493</u>	-	<u>920,526</u>	882,175
	35,874,451	183,493	943,843	37,001,787	36,430,772
Expenses	35,630,693	12,282	1,056,858	36,699,833	36,046,948
Excess (deficiency) of revenue over expenses before the undernoted	243,758	171,211	(113,015)	301,954	383,824
Winnipeg Regional Health Authority prior year adjustments	-	(1,573)	-	(1,573)	-
Winnipeg Regional Health Authority future employee benefits recoverable	72,544	-	-	72,544	6,034
Employee future benefits	<u>(72,544)</u>	-	-	<u>(72,544)</u>	(6,034)
Excess (deficiency) of revenue over expenses	243,758	169,638	(113,015)	300,381	383,824
Fund balances, beginning of year	-	2,898,951	1,060,071	3,959,022	3,575,198
Transfer to Capital Fund	(59,943)	(38,255)	98,198	-	-
Transfer of Personal Care Home Program surplus	(70,149)	70,149	-	-	-
Transfer of Adult Day Program surplus	(8,413)	8,413	-	-	-
Transfer of Supportive Housing Program surplus	<u>(105,253)</u>	<u>105,253</u>	-	-	-
Fund balances, end of year	-	3,214,149	1,045,254	4,259,403	3,959,022

These combined financial statements represent an aggregation of the financial statements of Actionmarguerite (Saint-Boniface) Inc. and Actionmarguerite (Saint-Vital) Inc., which are under common control. All significant inter-company balances and transactions have been eliminated. The condensed combined financial statements do not contain all disclosures. For more detailed information on the organization's financial situation, results of operations and cash flows, readers should refer to the related complete combined financial statements which are available at our offices.



**Fondation Actionmarguerite Foundation Inc.
Condensed Financial Statements**

CONDENSED STATEMENT OF FINANCIAL POSITION
December 31, 2013 and December 31, 2012

	2013	2012
	\$	\$
Assets	<u>2,984,398</u>	2,740,217
Liabilities	4,914	7,536
Fund Balances	<u>2,979,484</u>	2,732,681
	2,984,398	2,740,217

CONDENSED STATEMENT OF OPERATIONS AND CHANGES IN FUND BALANCES
Year ended December 31, 2013 and December 31, 2012

	2013	2012
	\$	\$
Revenue:		
Fundraising & Donations	34,628	40,413
Investment income	<u>327,913</u>	188,852
	362,541	229,265
Expenses	<u>115,738</u>	101,770
Excess of revenue over expenses for the year	246,803	127,495
Fund balances, beginning of year	<u>2,732,681</u>	2,605,186
Fund balances, end of year	2,979,484	2,732,681

Investments

	2013	2012
	\$	\$
Term deposits	1,000,000	900,000
Investments - The Winnipeg Foundation:		
Managed	1,796,225	1,581,809
Endowment	<u>81,824</u>	70,114
	1,878,049	1,651,923
	<u>2,878,049</u>	2,551,923

The condensed financial statements do not contain all disclosures. For more detailed information on the Corporation's financial situation, results of operations and cash flows, readers should refer to the related complete combined financial statements which are available at our offices.

