

**SIOUX LOOKOUT MENO YA WIN HEALTH CENTRE
ANNUAL GENERAL MEETING
Tuesday, June 14, 2022
from 1100 hours to 1200 hours
via Zoom Webinar**

AGENDA

The June 14, 2022 Annual General Meeting (AGM) is available for public viewing through Zoom.

1. Opening Prayer
2. Opening remarks by Board Chair
3. Remarks by First Nation Advisor to the Board and CEO
4. Directors Conflict of Interest Disclosure
5. Presentation of Agenda for the Annual General Meeting dated June 14, 2022.
6. Approval of Minutes of Annual General Meeting dated September 23, 2021 (MOTION)
7. Business Arising from the Minutes
 - 7.1 N/A
8. New Business
 - 8.1 Presentation of the 2021/22 Financial Statements (MOTION)
 - 8.2 Appointment of Auditors (MOTION)
 - 8.3 Introduction of Board Members and talk to home communities
9. Questions
10. Adjournment (MOTION)

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SIOUX LOOKOUT MENO YA WIN HEALTH CENTRE
ANNUAL GENERAL MEETING
Thursday, September 23, 2021 at 1100 hours
Via Zoom Webinar

Present: Ms. Sadie Maxwell (chair), Ms. Patricia Keesickquayash, Ms. Joyce Timpson, Ms. Teri Fiddler, Ms. Beatrice Anderson, Mr. James Cutfeet, Mr. Knowles McGill, Ms. Heather Lee, Mr. Douglas Semple, Mr. Dean Osmond, Ms. Kathy Loon, Dr. Dan Shilensky, Dr. Laurel Laakso, Ms. Selena Froude (recorder)

Regrets: Mr. Leroy Quoquat, Mr. Terry Jewell, Mr. John McKay, Ms. Christine Hoey, Mr. Joe Meekis, Mr. John Cutfeet, Mr. Roy Spence

The meeting was carried via Zoom. The meeting was called to order at 1105 hours.

1. Opening prayer

The opening prayer was given by Ms. Teri Fiddler.

2. Opening Remarks by Board Chair

- Ms. Sadie Maxwell introduced herself and welcomed everyone attending the AGM meeting.
- Everyone has been going through these uncertain times with the global COVID-19 pandemic. It's becoming an everyday life style change.
- She thanked all the employees of SLMHC for providing services to the Board, the people that provide health care services and all the things being done to continue safe operations of the hospital.

3. Address by First Nation Advisor to the Board and CEO

- Mr. Douglas Semple addressed community members and those in attendance in his language.

4. Directors Conflict of Interest Disclosure

There were no conflicts of interest disclosed.

5. Presentation of the Agenda

The agenda for the Annual General Meeting dated September 23, 2021 was presented.

6. MINUTES

6.1 Minutes of the AGM Meeting held September 24, 2020

The minutes of the Annual General Meeting held September 24, 2020 had been distributed and were reviewed for errors and omissions.

MOTION #ANN01/21

It was moved by Ms. Joyce Timpson that the board of directors approves the minutes of the September 24, 2020 Annual General Meeting. Seconded by Mr. Knowles McGill. **CARRIED**

7. BUSINESS ARISING FROM THE MINUTES

There was no business arising from the September 24, 2020 minutes.

8. NEW BUSINESS

8.1 Presentation of the 2020/21 Financial Statements

- The financial statements were presented at Resource Utilization Committee in August and approved at the September board meeting. We were provided with a clean audit.
- The auditors' role is to provide reasonable assurance of SLMHC financial position.
- The report shows a breakdown of current and long term liabilities. Any revenues are recognized all at once and get amortized overtime. We had a small surplus of 218,000 in 2021.

MOTION #ANN02/21

it was moved by Mr. James Cutfeet that the board of directors approve the 2020/21 Financial Statements as distributed and as recommended by RUC. Seconded by Ms. Joyce Timpson. **CARRIED**

8.2 Appointment of Auditors

It is a requirement that the board of directors approve our auditors every year at the Annual General Meeting.

MOTION #ANN03/21

it was moved by Mr. Knowles McGill that the board of directors approve the appointment of Meyers Norris Penny (MNP) as the organization auditors for the 2021/22 fiscal year. Seconded by Mr. James Cutfeet. **CARRIED**

8.3 Introduction of Board Members and talk to home communities

Ms. Patricia Keesickquayash – is a board member representing Mishkeegogamang First Nation. She is glad to be part of this AGM and wishes for a great meeting.

Mr. James Cutfeet – is a board member representing First Nations Member at Large. He is pleased to be here at the AGM and greetings to everyone.

Ms. Beatrice Anderson – is a board member representing Shibogama First Nations Council. She holds the position as health director. She wishes everyone a good morning and is happy to be a part of the AGM meeting.

Ms. Teri Fiddler – is a board member representing Traditional Healer/Elder. Greetings to everyone and she wishes everyone a good day.

Mr. Knowles McGill – is a board member representing the southern community. He is also the board treasurer and chair of the Resources Utilization Committee. He has been on the board for

numerous years. He is pleased to see members from the community joining into the AGM. He is happy to continue as a member of the board.

Ms. Joyce Timpson – is a board member representing the Municipality of Sioux Lookout. She has been on the board since 2012. She enjoys being here. She thanked everyone for another year. It has been a tough year but we are moving forward.

Dr. Dan Shilensky – is the President of the Medical Staff Association. He is pleased to be here at the AGM and is looking forward to continuing as a member of the board supporting SLMHC in our community.

Kathy Loon – is the Executive Lead Indigenous Collaboration and Relations at SLMHC. This is her first AGM. She was the traditional program manager for eight years and recently moved to the executive level. She would like to say hello to everyone and to the northern communities.

Dr. Laurel Laakso – is the interim Chief of Staff at SLMHC. She wishes everyone a good morning and hopes everyone is doing well. She thanks everyone for attending the meeting.

Ms. Heather Lee – is the President & CEO at SLMHC. She thanked everyone for joining the AGM today. She thanked all staff, physicians, clients, community members and community leadership. This past year with COVID-19 has been challenging for everyone. Normal routines have been disrupted. She appreciates the work that has been done to keep everyone safe. She wanted to recognize the federal holiday that is on September 30. The Ontario Hospital Association does not recognize the National Day for Truth and Reconciliation as a statutory holiday for hospitals. The organization will be providing orange shirts to staff, physicians and volunteers to wear on that day as we remember the many lives that have been lost and the unmarked graves that were found with the residential school system. She would like to address the community regarding the discussions on staffing challenges here at SLMHC. We are not unlike any other hospital in Ontario and our team is working hard to address those staffing challenges and physician shortages. We are surrounded with a wonderful team from SLRPSI and SLMHC who have come together to ensure services remain open. We are here to serve the needs of our community. Thank you for your support.

Ms. Sadie Maxwell – is the chair of the board representing Windigo First Nations Council. There are seven first nation communities within their organization. She thanked the board members for the direction and support they have provided over the past year. It has been a challenging year. She thanked the first nation communities. They have been vigilant with the COVID-19 fight and have done a remarkable job keeping the community members safe. They have put in so many hours to ensure the community is safe and for that I thank them.

9. Questions

- Ms. Joyce Timpson noted there may be some value in summarizing to the community members the direction the board is going with some of the discussions in the community.
- Mr. Knowles McGill noted the Board has directed the executive committee to seek a third-party Workplace Culture Assessment. We are proceeding with an RFP and will make the public aware as we continue to move forward.
- Ms. Heather Lee noted the senior executive team is fully engaged and willing to embrace the Workplace Culture Assessment. We look forward to seeing if there are processes and protocols within the hospital that we can improve on and make it an even greater place for patients to experience their care.

- Ms. Heather Lee noted an Employee Experience Survey was completed in the spring. She is happy to share with community members that the results are positive. The Patient Satisfaction Survey results are also higher than they have been in the past. We continue to monitor these on a weekly and monthly basis.

10. ADJOURNMENT/CLOSING PRAYER

Ms. Sadie Maxwell thanked everyone for participating today. Hopefully we have a better year. Take care everyone.

The meeting was adjourned at 1140 hours.

MOTION #ANN04/21 it was moved by Mr. James Cutfeet that there being no further business, the Annual General Meeting be adjourned at 1140 hours. Seconded by Ms. Joyce Timpson. **CARRIED**

MS. HEATHER LEE, SECRETARY

MS. S. MAXWELL, BOARD CHAIR

SF/
October 2, 2021



SIOUX LOOKOUT MENO YA WIN HEALTH CENTRE

March 31, 2022
Financial Statement Audit

June 6, 2022



To the Resource Utilization Committee and Board of Directors of Sioux Lookout Meno Ya Win Health Centre:

Opinion

We have audited the financial statements of Sioux Lookout Meno Ya Win Health Centre (the "Health Centre"), which comprise the statement of financial position as at March 31, 2022, and the statements of operations, changes in net assets and cash flows for the year then ended, and notes to the financial statements, including a summary of significant accounting policies.

In our opinion, the accompanying financial statements present fairly, in all material respects, the financial position of the Health Centre as at March 31, 2022, and the results of its operations, changes in net assets (net debt) and its cash flows for the year then ended in accordance with Canadian public sector accounting standards.

Basis for Opinion

We conducted our audit in accordance with Canadian generally accepted auditing standards. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are independent of the Health Centre in accordance with the ethical requirements that are relevant to our audit of the financial statements in Canada, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Other Matter

The supplementary information contained in the schedules is presented for the purpose of additional analysis and is not part of the basic audited financial statements. The information in the schedules was derived from the accounting records tested in forming an opinion on the financial statements as a whole.

Responsibilities of Management and Those Charged with Governance for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with Canadian public sector accounting standards, and for such internal control as management determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is responsible for assessing the Health Centre's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless management either intends to liquidate the Health Centre or to cease operations, or has no realistic alternative but to do so.

Those charged with governance are responsible for overseeing the Health Centre's financial reporting process.

Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with Canadian generally accepted auditing standards will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

As part of an audit in accordance with Canadian generally accepted auditing standards, we exercise professional judgment and maintain professional skepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Health Centre's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by management.
- Conclude on the appropriateness of management's use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the Health Centre's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the Health Centre to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation.

We communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.



Sioux Lookout Meno Ya Win Health Centre Statement of Financial Position



As at March 31,	2022	2021
Current Assets		
Cash (Note 2)	\$ 9,712	\$ 3,298,899
Accounts Receivable (Note 3)	8,349,825	4,720,668
Inventory (Note 4)	414,349	435,986
Prepaid Expenses	825,997	819,413
Total Current Assets	<u>9,599,883</u>	<u>9,274,966</u>
Non-Current Assets		
Capital Assets (Note 5)	109,392,616	111,404,238
Total Assets	<u>\$ 118,992,499</u>	<u>\$ 120,679,204</u>
Trust Fund		
Short-Term Investments	<u>\$ 3,775</u>	<u>\$ 3,775</u>

3. Accounts Receivable

	2022	2021
Ministry of Health / Ontario Health	\$ 5,394,286	\$ 1,989,659
Insurers and Patients	1,633,065	1,594,076
Due from Trust Fund	14,000	14,000
Other	2,325,972	2,028,880
Allowance for Doubtful Accounts	(1,017,498)	(905,947)
	<u>\$ 8,349,825</u>	<u>\$ 4,720,668</u>



Sioux Lookout Meno Ya Win Health Centre Statement of Financial Position



As at March 31,	2022	2021
Current Liabilities		
Bank indebtedness (Note 2)	\$ 822,771	\$ -
Accounts Payable and Accrued Liabilities (Note 6)	7,930,368	8,749,574
Deferred Revenue (Note 7)	106,630	66,321
Current Portion of Long-Term Debt (Note 8)	238,613	447,561
Current Portion of Post-Retirement Benefits Liability (Note 9)	101,600	137,700
Total Current Liabilities	9,199,982	9,401,156
Long-Term Liabilities		
Long-Term Debt (Note 8)	1,602,576	942,385
Post-Retirement Benefits Liability (Note 9)	2,958,300	2,609,200
Unamortized Deferred Capital Financing (Note 10)	101,692,711	104,373,443
Deferred Contributions - Restricted for Future Capital Asset Purchases (Note 11)	844,427	738,822
Total Long-Term Liabilities	107,098,014	108,663,850
Contingent Liabilities and Commitments (Note 14)		
Net Assets		
Unrestricted	(5,005,402)	(4,416,597)
Investment in Capital Assets (Note 12)	7,699,905	7,030,795
Closing Net Assets Balance	2,694,503	2,614,198
Total Liabilities and Net Assets Balance	\$ 118,992,499	\$ 120,679,204
Trust Fund		
Fund Balance - Dr. Hugh W. Allen Scholarship	\$ 3,775	\$ 3,775

Year	Total Current Assets	Total Current Liabilities	Working Capital (Deficiency)
2022	\$ 9,599,883	\$ 9,199,982	\$ 399,901
2021	\$ 9,274,966	\$ 9,401,156	(\$ 126,190)
2020	\$ 7,439,992	\$ 7,983,498	(\$ 543,506)
2019	5,947,575	7,419,453	(1,471,878)
2018	6,064,999	6,609,578	(544,579)

6. Accounts Payable and Accrued Liabilities

	2022	2021
Trade Accounts Payable	\$ 2,725,503	\$ 1,385,992
Accrued Salaries and Benefits	2,276,538	2,442,830
Payroll Remittances	804,454	143,331
Ministry of Health / Ontario Health	2,123,691	2,753,177
Other Payables and Accruals	400,182	2,024,244
	\$ 7,930,368	\$ 8,749,574



SIoux LOOKOUT
Meno Ya Win
HEALTH CENTRE

Sioux Lookout Meno Ya Win Health Centre
Statement of Operations

For the year ended March 31,	2022	2021
Revenue		
Ontario Health Base Allocation	\$ 37,730,002	\$ 36,487,007
Ontario Health One Time Payments	2,182,941	366,091
Ontario Health Pandemic Funding (Note 17)	5,958,522	3,752,006
Ministry of Health One Time Payments	87,797	-
Ontario Health / Ministry of Health Recoveries	(485,872)	(623,823)
Other Revenue from Ministry of Health	834,713	808,021
Paymaster	358,089	203,285
Cancer Care Ontario Funding	100,356	73,356
Recoveries and Miscellaneous Revenue (Schedule 1)	4,606,036	4,198,450
Amortization of Donations and Grants for Equipment	303,979	240,027
CHIP Revenue and Patient Revenue from Other Payors	1,713,519	1,377,601
Differential & Copayment Revenue (Schedule 1)	999,957	1,231,865
Total Revenue	53,879,999	49,156,840
Expenses		
Salaries, Wages and Purchased Services (Schedule 3)	38,094,451	26,629,741
Employee Benefits (Schedule 4)	5,469,523	5,249,194
Employee Future Benefits (Note 8)	303,000	172,700
Medical Staff Remuneration (Schedule 5)	1,896,249	1,781,592
Supplies and Other Expenses (Schedule 6)	11,539,699	10,165,491
Medical and Surgical Supplies	1,543,263	1,303,777
Drugs and Medical Gases	1,120,411	904,206
Short Term Interest	20,410	-
Equipment Amortization	855,835	767,797
Software Amortization	60,213	77,678
Rental/Lease of Equipment	65,188	111,010
Bad Debts	567,083	285,839
Total Expenses	53,917,325	47,449,225
Excess of Revenue Over Expenses from Hospital Operations	322,674	707,615
Other Items		
Amortization of Deferred Contributions Related to Buildings	3,548,843	3,787,625
Amortization of Buildings	(3,752,164)	(3,747,582)
Interest on Long-Term Liabilities	(37,390)	(49,715)
Loss on Disposal of Capital Assets	(1,872)	-
	(242,283)	(9,672)
Other Votes and Programs - Revenues (Schedule 2)	2,816,119	3,155,250
Other Votes and Programs - Expenses (Schedule 2)	(2,707,235)	(2,672,688)
Other Votes and Programs - Provisions for Recovery (Schedule 2)	(102,970)	(482,564)
	(86)	-
Excess of Revenue over Expenses for the Year	\$ 80,305	\$ 697,943

Funding for incremental COVID-19 operating expenses
COVID-19 assessment centre funding
Funding for revenue losses resulting from COVID-19
Pandemic pay funding
Working Capital Funding
Other pandemic funding



	2022	2021
	\$ 4,981,681	\$ 1,483,700
	325,116	197,638
	-	511,168
	104,900	919,235
	-	489,100
	546,825	151,165
	\$ 5,958,522	\$ 3,752,006

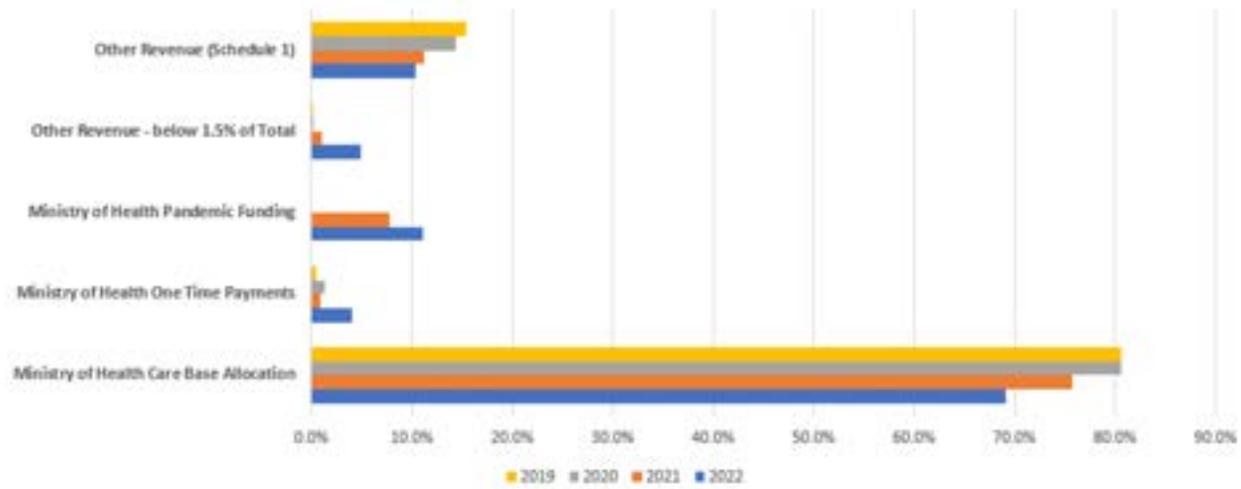


**Sioux Lookout Meno Ya Win Health Centre
Statement of Cash Flows**



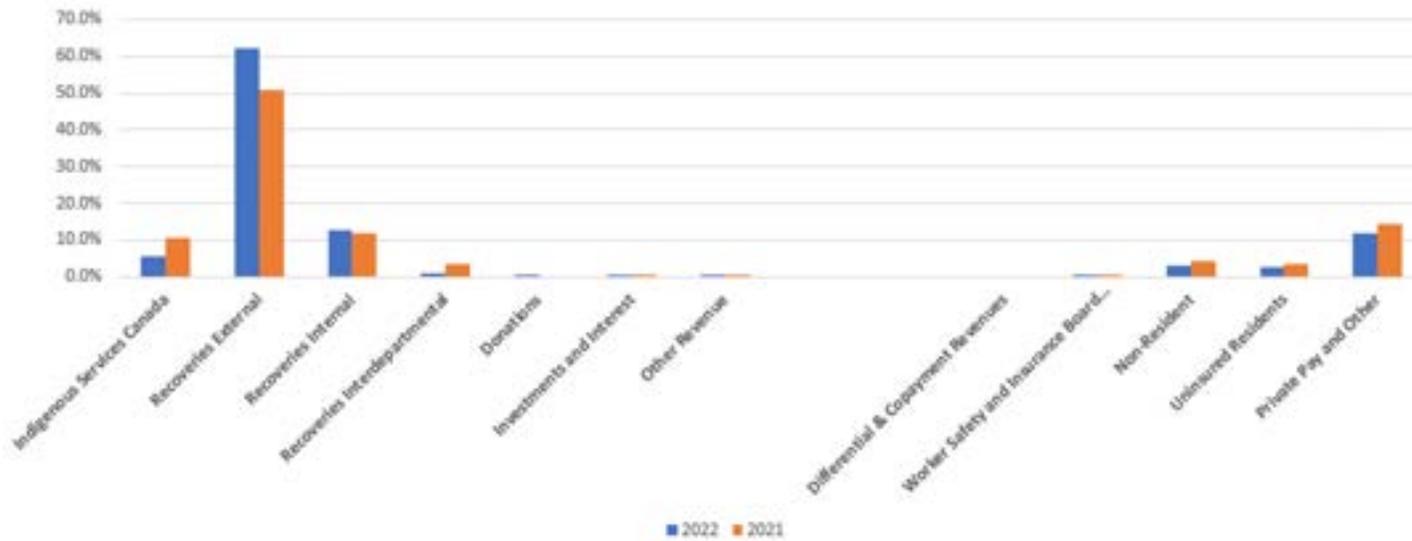
March 31,	2022	2021
Cash Provided By (Used In) Operating Activities		
Excess of revenue over expenses for the year	\$ 80,305	\$ 697,943
Items not involving cash		
Amortization of capital assets (Note 12)	4,688,212	4,593,257
Amortization of deferred provincial equipment and building grants (Note 10)	(3,633,635)	(4,027,653)
Loss on disposal of capital assets (Note 12)	1,572	-
	<u>1,136,454</u>	<u>1,263,547</u>
Changes in Non-Cash Working Capital Balances		
Accounts Receivable	(3,629,157)	(1,657,545)
Inventory	21,637	(123,021)
Prepaid Expenses	(6,584)	(150,720)
Accounts Payable and Accrued Liabilities	(819,206)	1,180,802
Deferred Revenue	40,309	-
Post-Retirement Benefits	313,000	182,700
	<u>(4,080,001)</u>	<u>(567,784)</u>
	<u>(2,943,547)</u>	<u>695,763</u>
Financing Activities		
Advances of bank indebtedness	822,771	-
Advances of long-term debt	831,817	204,405
Repayment of long-term debt	(380,574)	(233,806)
	<u>1,274,014</u>	<u>(29,401)</u>
Capital Activities		
Purchase of capital assets (Note 12)	(2,678,162)	(1,084,747)
Capital grants and fund raising receipts (Note 12)	1,058,508	322,073
	<u>(1,619,654)</u>	<u>(762,674)</u>
Decrease in cash during the year	(3,289,187)	(96,312)
Cash, beginning of year	3,298,899	3,395,211
Cash, end of year	\$ 9,712	\$ 3,298,899

COMPARATIVE FUNDING BY SOURCE



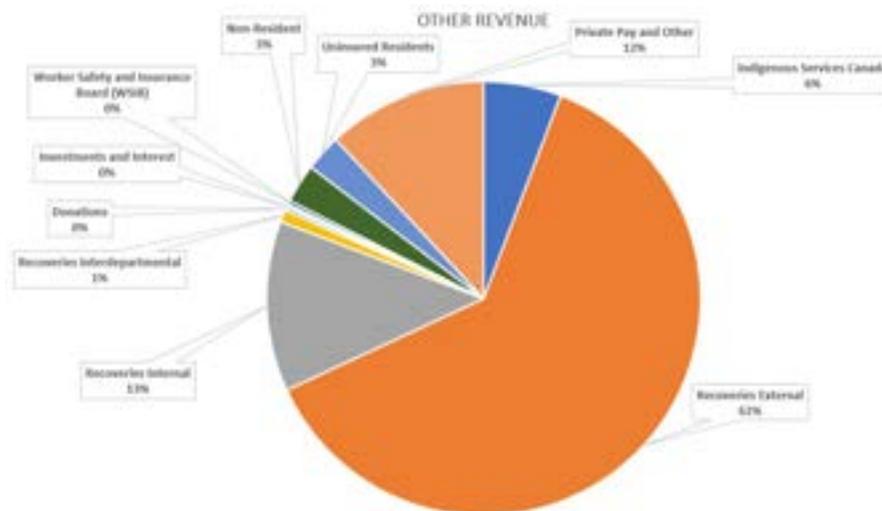
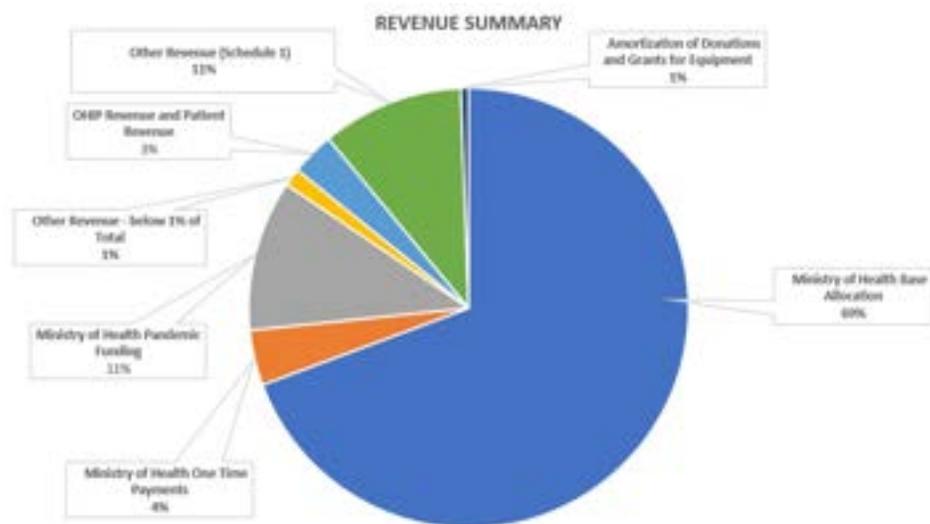


SCHEDULE 1 - OTHER REVENUE

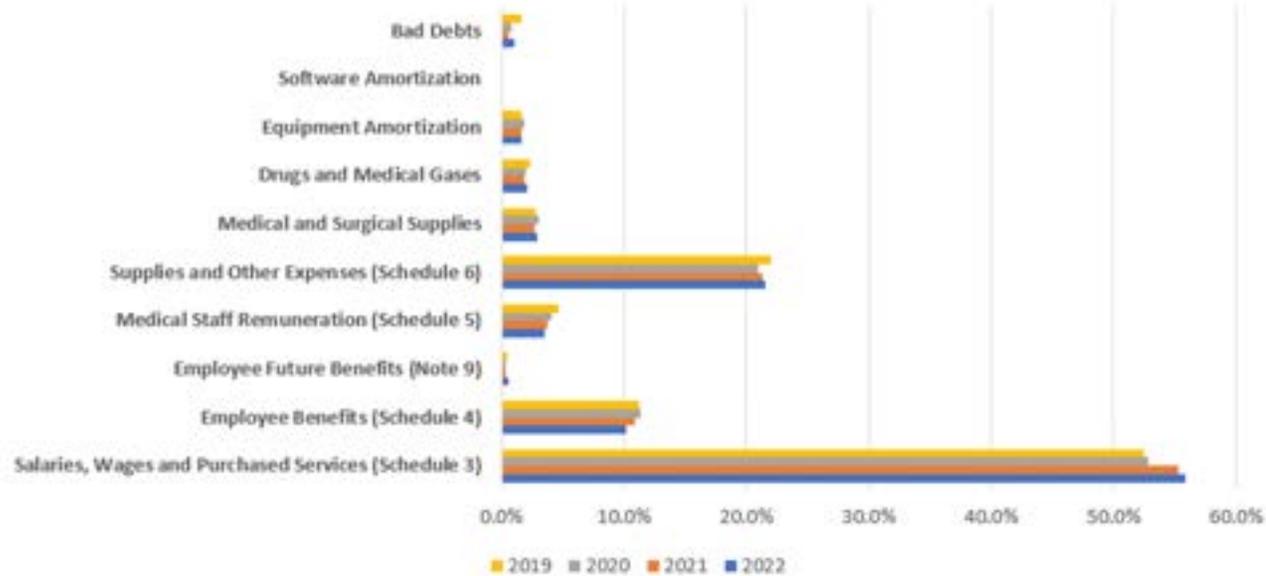




SIOUX LOOKOUT
Meno Ya Win
HEALTH CENTRE



EXPENSE AS A PERCENTAGE OF REVENUE



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