

SIOUX LOOKOUT MENO YA WIN HEALTH CENTRE
ANNUAL GENERAL MEETING
Thursday, September 28, 2023
9:00 am to 10:00 am
via Zoom/Boardroom A & B

AGENDA

The September 28, 2023 Annual General Meeting (AGM) is available for public viewing through Zoom.

1. Opening Prayer
2. Opening Remarks by Board Chair
3. Directors Conflict of Interest Disclosure
4. Presentation of Agenda for the Annual General Meeting Dated September 28, 2023
5. Approval of Minutes of Annual General Meeting Dated September 22, 2022 (**MOTION**)
6. Business Arising from the Minutes
 - 6.1 N/A
7. New Business
 - 7.1 Presentation of the 2022/23 Financial Statements (**MOTION**)
 - 7.2 Appointment of Auditors (**MOTION**)
 - 7.3 Presentation of the Amended SLMHC Corporate By-Laws (**MOTION**)
 - 7.4 Board Vice Chair Recommendation (**MOTION**)
 - 7.5 Introduction of Board Members and Talk to Home Communities
8. Questions
9. Adjournment (**MOTION**)

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**SIOUX LOOKOUT MENO YA WIN HEALTH CENTRE
ANNUAL GENERAL MEETING
Thursday, September 22, 2022 at 1100 hours
Via Zoom Webinar/Boardroom A & B**

Present: Ms. Sadie Maxwell (chair), Ms. Patricia Keesickquayash, Ms. Beatrice Anderson, Mr. Knowles McGill, Mr. Dennis Leney, Mr. Douglas Semple, Ms. Kathy Loon, Mr. Kevin Holder, Ms. Christine Hoey, Mr. Howard Meshake, Mr. Alvin Fiddler, Ms. Leanne Tyler, Mr. Mathew Hoppe, Dr. Dan Shilensky, Dr. Laurel Laakso, Ms. Cynthia Dwyer, Mr. Kevin Holder, Ms. Selena Froude (recorder)

Regrets: Mr. Terry Jewell, Mr. Joe Meekis, Mr. Roy Spence, Ms. Joyce Timpson, Ms. Teri Fiddler, Mr. Dean Osmond

Guest: Ms. Renee Southwind

The meeting was called to order at 11:15 am.

1. Opening prayer

The opening prayer was given by Ms. Renee Southwind.

2. Opening Remarks by Board Chair

- Ms. Maxwell introduced herself and welcomed everyone attending the Annual General Meeting (AGM).
- This past year brought many challenges to the hospital. The Covid-19 pandemic continues to put strain on our health care workers. The effects have been visual and felt by the dedicated staff and health care service providers within the hospital. Our dedicated staff continue to provide services to our patients. For their commitment, thank you.
- An organization Workplace Cultural Assessment was completed last year and will be reviewed further by the Board. The Board is committed to making positive changes for the betterment of the patients, clients, staff and health care service providers.

3. Directors Conflict of Interest Disclosure

There was no conflict of interest disclosed.

4. Presentation of the Agenda

The agenda for the Annual General Meeting dated September 23, 2022 was presented.

5. MINUTES

5.1 Minutes of the AGM Meeting held September 23, 2021

The minutes of the Annual General Meeting held September 23, 2021 had been distributed and were reviewed for errors and omissions.

MOTION #ANN01/22

It was moved by Mr. Dennis Leney that the Board of Directors approve the minutes of the September 23, 2021 Annual General Meeting. Seconded by Ms. Christine Hoey. **CARRIED**

6. BUSINESS ARISING FROM THE MINUTES

There was no business arising from the September 23, 2021 minutes.

7. NEW BUSINESS

7.1 Presentation of the 2021/22 Financial Statements

- The financial statements were presented at Resource Utilization Committee in June and approved at the Board of Directors meeting held in June. 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 \$80,000 in 2022.

MOTION #ANN02/22

it was moved by Mr. Knowles McGill that the Board of Directors approve the 2020/21 Financial Statements as distributed and as recommended by RUC. Seconded by Mr. Alvin Fiddler. **CARRIED**

7.2 Appointment of Auditors

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

MOTION #ANN03/22

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 2022/23 fiscal year. Seconded by Mr. Mathew Hoppe. **CARRIED**

7.3 Introduction of Board Members and Talk to Home Communities

Mr. Howard Meshake – is a board member representing Sioux Lookout First Nation Health Authority. He has been in Sioux Lookout for twenty-six years. He has been with Shibogama First Nation Council for fifteen years. His life is about volunteering. It has been challenging years. He is happy to be on the Board and is happy to be here.

Mr. Alvin Fiddler – is a board member representing First Nations Member at Large. He is from Muskrat Dam. He grew up in the bush, the land sustains us. He is a part of the Health Transformation for NAN. He appreciates the opportunity to be a part of the Board and supporting SLMHC.

Dr. Laurel Laakso – is the Chief of Staff at SLMHC. She wishes everyone a good morning. We have had many challenges this past year. There is a healthcare crisis across the world. The process of rebuilding will require a lot of team work.

Ms. Cynthia Dwyer – is the Director of Patient Care Services and the Chief Nursing Executive. She has been with the organization for fifteen years and is grateful to be included in the meeting today.

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 praises the quality of the William George Extended Care facility. The Healthcare received in this community has been remarkable. He is happy to be on the Board.

Ms. Christine Hoey – is a board member representing the Foundation. She was born and raised in Sioux Lookout. This is her town and she believes in it.

Mr. Dennis Leney – is a board member representing the southern community. He is on the Resource Utilization Committee. He appreciates working with everyone and he enjoys working with the Board.

Mr. Mathew Hoppe – is a board member representing Independent First Nations Alliance. He is the CEO. He is honored to come serve and be a part of this Board.

Ms. Renee Southwind – is the community liaison. She is from Kejick Bay and has been with SLMHC for twenty years. She enjoys working here.

Ms. Leanne Tyler – is a board member representing Lac Seul First Nation. She has worked as a Registered Nurse for thirty one years. She is the Nursing Director at Lac Seul First Nation. She is looking forward to this opportunity.

Ms. Beatrice Anderson – is a board member representing Shibogama First Nations Council. She wishes everyone a good morning and welcomes the new members. She has been a Health Director for nineteen years.

Ms. Patricia Keesickquayash – is a board member representing Mishkeegogamang First Nation. She wishes everyone a good morning. She is the Health Director for Mishkeegogamang. There have been many challenges over the years. Great to see the new members and welcome.

Dr. Dan Shilensky – is the President of the Medical Staff Association. He has been in Sioux Lookout for 3 1/2 years. It has been an honor working within the organization and it has been an amazing experience.

Ms. Kathy Loon – is the Executive Lead Indigenous Collaboration and Relations. She has been with SLMHC for ten years. It has been a pleasure sitting on the Board.

Mr. Kevin Holder – is the Chief Financial Officer working remotely out of Kenora. It has been an interesting year. He looks forward to a renewed Board.

Mr. Douglas Semple – is the CEO. He appreciates the presence here on the Board and the willingness to help and try and accomplish more. He appreciates the emotions that were shared around the table.

Ms. Sadie Maxwell – is the Chair of the Board representing Windigo First Nations Council. She was born and raised in Sioux Lookout. She is the Director of Operations at Windigo. There seven

first nation communities within their organization. We have wonderful people in our communities. She looks forward to working with the Board and our new members.

8. Questions

- N/A

9. ADJOURNMENT/CLOSING PRAYER

Ms. Sadie Maxwell thanked everyone for participating today.

The meeting was adjourned at 12:25 pm.

MOTION #ANN04/22

it was moved by Mr. Mathew Hoppe that there being no further business, the Annual General Meeting be adjourned at 12:25 pm. Seconded by Ms. Joyce Timpson. **CARRIED**

MR. DOUGLAS SEMPLE, SECRETARY

MS. S. MAXWELL, BOARD CHAIR

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Sioux Lookout Meno Ya Win Health Centre
Financial Statements
March 31, 2023

Sioux Lookout Meno Ya Win Health Centre

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Management's Responsibility

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

Management is responsible for the preparation and presentation of the accompanying financial statements, including responsibility for significant accounting judgments and estimates in accordance with Canadian public sector accounting standards. This responsibility includes selecting appropriate accounting principles and methods, and making decisions affecting the measurement of transactions in which objective judgement is required.

In discharging its responsibilities for the integrity and fairness of the financial statements, management designs and maintains the necessary accounting systems and related internal controls to provide reasonable assurance that transactions are authorized, assets are safeguarded and financial records are properly maintained to provide reliable information for the preparation of financial statements.

The Board of Directors is comprised primarily of Directors who are neither management nor employees of the Health Centre. The Board is responsible for overseeing management in the performance of its financial reporting responsibilities, and for approving the financial information included in the annual report. The Board fulfills these responsibilities by reviewing the financial information prepared by management and discussing relevant matters with management and external auditors. The Board is also responsible for recommending the appointment of the Health Centre's external auditors.

MNP LLP is appointed by the members to audit the financial statements and report directly to them, their report follows. The external auditors have full and free access to, and meet periodically and separately with, both the Board and management to discuss their audit findings.

June 19, 2023



Chief Executive Officer



Chief Financial Officer

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, 2023, and the statements of operations, changes in net assets, operations and changes in fund balance, 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, 2023, and the results of its operations, changes in net assets 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.

Thunder Bay, Ontario

June 19, 2023

MNP LLP

Chartered Professional Accountants

Licensed Public Accountants

Sioux Lookout Meno Ya Win Health Centre

Statement of Financial Position

As at March 31,	2023	2022
Current Assets		
Cash (Note 3)	6,249,967	9,712
Accounts Receivable (Note 4)	4,485,123	8,349,825
Inventory (Note 5)	343,826	414,349
Prepaid Expenses	755,702	825,997
Total Current Assets	11,834,618	9,599,883
Non-Current Assets		
Capital Assets (Note 6)	105,945,030	109,392,616
Total Assets	117,779,648	118,992,499
Trust Fund		
Short-Term Investments	-	3,775
Current Liabilities		
Bank Indebtedness (Note 3)	-	822,771
Accounts Payable and Accrued Liabilities (Note 7)	12,738,874	7,930,368
Deferred Revenue (Note 8)	98,321	106,630
Current Portion of Long-Term Debt (Note 9)	221,397	238,613
Current Portion of Post-Retirement Benefits Liability (Note 10)	94,600	101,600
Total Current Liabilities	13,153,192	9,199,982
Long-Term Liabilities		
Long-Term Debt (Note 9)	1,424,724	1,602,576
Post-Retirement Benefits Liability (Note 10)	2,951,400	2,958,300
Unamortized Deferred Capital Financing (Note 11)	98,743,319	101,692,711
Deferred Contributions - Restricted for Future Capital Asset Purchases (Note 12)	688,880	844,427
Total Long-Term Liabilities	103,808,323	107,098,014
Contingent Liabilities and Commitments (Note 15)		
Net Assets		
Unrestricted	(6,383,578)	(5,005,402)
Investment in Capital Assets (Note 13)	7,201,711	7,699,905
Closing Net Assets Balance	818,133	2,694,503
Total Liabilities and Net Assets Balance	117,779,648	118,992,499
Trust Fund		
Fund Balance - Dr. Hugh W. Allen Scholarship	-	3,775

Approved on behalf of the Board:

Sadie Maxwell - Board chair

Director

Knowles McGill - Treasurer

Director

The accompanying notes are an integral part of these financial statements

Sioux Lookout Meno Ya Win Health Centre

Statement of Operations

For the year ended March 31,	2023	2022
Revenue		
Ontario Health Base Allocation	38,217,589	37,220,002
Ontario Health One Time Payments	6,440,986	2,182,941
Ontario Health Pandemic Funding (Note 19)	4,141,380	5,958,522
Ministry of Health One-Time Payments	-	87,757
Ontario Health / Ministry of Health Recoveries	(575,929)	(485,872)
Other Revenue from Ministry of Health	855,332	834,713
Paymaster	199,510	358,089
Cancer Care Ontario Funding	86,572	100,356
Recoveries and Miscellaneous Revenue (Schedule 1)	4,469,699	4,606,036
Amortization of Donations and Grants for Equipment	366,077	303,979
OHIP Revenue and Patient Revenue from Other Payors	1,705,009	1,713,519
Differential & Copayment Revenue (Schedule 1)	1,106,655	999,957
Total Revenue	57,012,880	53,879,999
Expenses		
Salaries, Wages and Purchased Services (Schedule 3)	35,172,890	30,094,451
Employee Benefits (Schedule 4)	5,097,596	5,469,523
Employee Future Benefits (Recovery of) (Note 10)	(23,900)	303,000
Medical Staff Remuneration (Schedule 5)	2,628,083	1,898,249
Supplies and Other Expenses (Schedule 6)	11,836,353	11,539,699
Medical and Surgical Supplies	1,475,225	1,543,263
Drugs and Medical Gases	1,070,800	1,120,411
Interest Short Term	2,721	20,410
Equipment Amortization	885,750	855,835
Software Amortization	73,504	80,213
Rental / Lease of Equipment	126,670	65,188
Bad Debts	259,972	567,083
Total Expenses	58,605,664	53,557,325
Excess (deficiency) of Revenue Over Expenses (Expenses over Revenue) from Hospital Operations	(1,592,784)	322,674
Other Items		
Amortization of Deferred Contributions Related to Buildings	3,533,844	3,548,843
Amortization of Buildings	(3,731,373)	(3,752,164)
Interest on Long-Term Liabilities	(64,479)	(37,390)
Loss on Disposal of Capital Assets	(21,578)	(1,572)
	(283,586)	(242,283)
Other Votes and Programs - Revenues (Schedule 2)	4,969,055	2,810,119
Other Votes and Programs - Expenses (Schedule 2)	(3,341,750)	(2,707,235)
Other Votes and Programs - Provisions for Recovery (Schedule 2)	(1,627,305)	(102,970)
	-	(86)
Excess of Revenue over Expenses (Expenses over Revenue) for the Year	(1,876,370)	80,305

The accompanying notes are an integral part of these financial statements

Sioux Lookout Meno Ya Win Health Centre
Statement of Changes in Net Assets
Operating Fund

For the year ended March 31, 2023

	Invested in Capital Assets	Unrestricted	2023 Total
Balance, beginning of year	7,699,905	(5,005,402)	2,694,503
Deficiency of revenue over expenses for the year (Note 13)	(812,284)	(1,064,086)	(1,876,370)
Net change in investment in capital assets (Note 13)	314,090	(314,090)	-
Balance, end of year	<u>7,201,711</u>	<u>(6,383,578)</u>	<u>818,133</u>

For the year ended March 31, 2022

	Invested in Capital Assets	Unrestricted	2022 Total
Balance, beginning of year	7,030,795	(4,416,597)	2,614,198
Excess (deficiency) of revenue over expenses for the year (Note 13)	(1,056,149)	1,136,454	80,305
Net change in investment in capital assets (Note 13)	1,725,259	(1,725,259)	-
Balance, end of year	<u>7,699,905</u>	<u>(5,005,402)</u>	<u>2,694,503</u>

The accompanying notes are an integral part of these financial statements

Sioux Lookout Meno Ya Win Health Centre
Statement of Operations and Changes in Fund Balance
Trust Fund

March 31,	2023	2022
Revenue	-	-
Expenses	3,775	-
Excess of Revenue Over Expenses (Expenses Over Revenue) for the Year	(3,775)	-
Fund Balance, Beginning of Year	3,775	3,775
Fund Balance, End of Year	-	3,775

The accompanying notes are an integral part of these financial statements

Sioux Lookout Meno Ya Win Health Centre Statement of Cash Flows

March 31,	2023	2022
Cash Provided By (Used In) Operating Activities		
Excess (deficiency) of revenue over expenses for the year	(1,876,370)	80,305
Items not involving cash		
Amortization of capital assets (Note 13)	4,690,627	4,688,212
Amortization of deferred provincial equipment and building grants (Note 11)	(3,899,921)	(3,633,635)
Loss on disposal of capital assets (Note 13)	21,578	1,572
	<u>(1,064,086)</u>	<u>1,136,454</u>
Changes in Non-Cash Working Capital Balances		
Accounts Receivable	3,864,702	(3,629,157)
Inventory	70,523	21,637
Prepaid Expenses	70,296	(6,584)
Accounts Payable and Accrued Liabilities	4,808,505	(819,206)
Deferred Revenue	(8,309)	40,309
Post-Retirement Benefits	(13,900)	313,000
	<u>8,791,817</u>	<u>(4,080,001)</u>
	<u>7,727,731</u>	<u>(2,943,547)</u>
Financing Activities		
Advances (repayment) of bank indebtedness	(822,771)	822,771
Advances of long-term debt	0	831,817
Repayment of long-term debt	(195,068)	(380,574)
	<u>(1,017,839)</u>	<u>1,274,014</u>
Capital Activities		
Purchase of capital assets (Note 13)	(1,264,619)	(2,678,162)
Capital grants and fund raising receipts (Note 13)	794,982	1,058,508
	<u>(469,637)</u>	<u>(1,619,654)</u>
Increase (decrease) in cash during the year	6,240,255	(3,289,187)
Cash, beginning of year	9,712	3,298,899
Cash, end of year	<u>6,249,967</u>	<u>9,712</u>
Supplementary cash flow information		
Interest paid	67,200	57,800
Interest income	87,457	5,911

The accompanying notes are an integral part of these financial statements

Sioux Lookout Meno Ya Win Health Centre

Notes to the Financial Statements

March 31, 2023

1. Significant Accounting Policies

Management's Responsibility for the Financial Statements

The financial statements of Sioux Lookout Meno Ya Win Health Centre (the "Health Centre") are the responsibility of management. They have been prepared in accordance with Canadian public sector accounting standards for government not-for-profit organizations, including the 4200 series of standards, as issued by the Public Sector Accounting Board.

The Sioux Lookout Meno Ya Win Health Centre Foundation is a separate entity whose financial information is reported separately from the health centre.

Nature and Purpose of the Organization

The Health Centre was created by Bill PR15 of the Ontario Legislature that received Royal Assent on December 14, 2001. The Health Centre's vision is to "be a centre of excellence for health through New and Expanded Services and Partnerships". The Health Centre is a not-for-profit organization that is exempt from corporate income taxes.

These financial statements reflect the assets, liabilities and operations of the Health Centre. They do not include the assets, liabilities or operations of the Sioux Lookout Meno Ya Win Health Centre Foundation, which, although associated with the Health Centre, is separately managed, and reports to a separate Board of Trustees.

In addition to the Health Centre's operating fund which reflects the activities of the day to day operations of the Health Centre, the financial statements also include the activities of the following programs:

Ministry of Health:

- Community Mental Health and Addictions Programs
- Community Support Services
- Rent Supplement
- Community Health Promotion

The operating results of these programs are recorded in Schedule 2 to the financial statements and their assets and liabilities are reported on the statement of financial position of the Health Centre. Program surpluses are recorded as repayable in the year incurred, except for those programs for which permission has been obtained to carry over surpluses for future program expenditures. In these cases, program surpluses have been recorded as deferred contributions. Program deficits are included in general operations, since they are not funded by the Ministry of Health. Adjustment settlements by the Ministry of Health are recorded when settled.

The Scholarship or Trust Fund, which records the activities related to the investments and granting of scholarships to students is for students enrolled at a post secondary institution in a health discipline.

Revenue Recognition

The Health Centre follows the deferral method of accounting for contributions which include donations and government grants.

Sioux Lookout Meno Ya Win Health Centre

Notes to the Financial Statements

March 31, 2023

1. Significant Accounting Policies (continued)

Revenue Recognition (continued)

Under the Health Insurance Act and Regulations thereto, the Health Centre is funded, primarily by the Province of Ontario, in accordance with accountability arrangements established by the Ministry of Health ("MOH") and Ontario Health ("OH"). The Health Centre has entered into a Hospital Service Accountability Agreement (the "H-SAA") and a Multi-Sector Service Accountability Agreement (the "M-SAA") for fiscal 2022-23 with OH that sets out the rights and obligations of the parties to the H-SAA and M-SAA in respect of funding provided to the Health Centre by OH. The H-SAA and M-SAA also sets out the performance standards and obligations of the Health Centre that establish acceptable results for the Health Centre's performance in a number of areas.

If the Health Centre does not meet its performance standards or obligations, the MOH/OH has the right to adjust funding received by the Health Centre. The MOH/OH is not required to communicate certain funding adjustments until after the submission of year-end data. Since this data is not submitted until after the completion of the financial statements, the amount of MOH/OH funding received by the Health Centre during the year may be increased or decreased subsequent to year-end.

Contributions approved but not received at year-end are accrued. Where a portion of a contribution relates to a future period, it is deferred and recognized in that subsequent period.

Unrestricted contributions are recognized as revenue in the year received or receivable if the amount can be reasonably estimated and collection is reasonably assured.

Restricted contributions related to general operations are recognized as revenue in the year in which the related expenses are incurred.

Restricted contributions for the acquisition of capital assets are deferred and amortized into revenue at a rate corresponding with the amortization rate for the related capital assets.

Patient related revenues are recognized as revenue when services are rendered and the amount to be received can be reasonably estimated and collection is reasonably assured.

Recoveries are recognized as revenue when the amount of the recovery can be reasonably estimated and collection is reasonably assured.

Contributed Services

There are a substantial number of volunteers who contribute a significant amount of their time each year to the Health Centre. Because of the difficulty of determining the fair value, contributed services are not recognized in these financial statements.

Cash and Cash Equivalents

Cash includes balances with banks and short-term investments with maturities of three months or less. Cash subject to restrictions that prevent its use for current purposes is included in restricted cash.

Sioux Lookout Meno Ya Win Health Centre

Notes to the Financial Statements

March 31, 2023

1. Significant Accounting Policies (continued)

Investments

Investments are recorded at fair value. Transaction costs related to the acquisition of investments are recorded against investment income. Sales and purchases of investments are recorded on the settlement date.

Fair value is determined at quoted market prices. The calculation of fair value is based upon market conditions and at a specific point in time and may not be reflective of future fair value.

Inventory

Inventory is stated at the lower of cost and net realizable value. Cost is determined on an average cost basis. Inventories consist of medical and general supplies that are used in the Health Centre's operations and not for resale purposes.

Capital Assets

Purchased capital assets are initially recorded at cost, except for capital assets purchased for other programs. Contributed capital assets are recorded at fair value at the date of contribution. When a capital asset no longer contributes to the Health Centre's ability to provide services, its carrying amount is written down to its residual value.

Minor equipment replacements are expensed in the year purchased, and software over a three year period. Construction in progress is not amortized until the project is complete and the facilities come into use.

Capital Assets are amortized over the useful life of the asset using the straight-line method. The capital assets are amortized as follows:

Land improvements	3 to 20 Years
Building and building service equipment	10 to 40 Years
Major equipment	3 to 20 Years
Residence - other land and buildings	10 to 40 Years
Residence - furniture and fixtures	3 to 20 Years

Asset Retirement Obligations

A liability for an asset retirement obligation is recognized at the best estimate of the amount required to retire a capital asset (or a component thereof) at the financial statement date when there is a legal obligation for the Health Centre to incur retirement costs in relation to a capital asset (or component thereof), the past transaction or event giving rise to the liability has occurred, it is expected that future economic benefits will be given up, and a reasonable estimate of the amount can be made. The best estimate of the liability includes all costs directly attributable to asset retirement activities, based on information available at March 31, 2023. The best estimate of an asset retirement obligation incorporates a present value technique, when the cash flows required to settle or otherwise extinguish an asset retirement obligation are expected to occur over extended future periods.

When a liability for an asset retirement obligation is initially recognized, a corresponding asset retirement cost is capitalized to the carrying amount of the related capital asset (or component thereof). The asset retirement cost is amortized over the useful life of the related asset.

Sioux Lookout Meno Ya Win Health Centre

Notes to the Financial Statements

March 31, 2023

1. Significant Accounting Policies (continued)

Asset Retirement Obligations (continued)

At each financial reporting date, the Health Centre reviews the carrying amount of the liability. The Health Centre recognizes period-to-period changes to the liability due to the passage of time as accretion expense. Changes to the liability arising from revisions to either the timing, the amount of the original estimate of undiscounted cash flows or the discount rate are recognized as an increase or decrease to the carrying amount of the related tangible capital asset.

The Health Centre continues to recognize the liability until it is settled or otherwise extinguished. Disbursements made to settle the liability are deducted from the reported liability when they are made.

Long-lived Assets and Discontinued Operations

Long-lived assets consist of capital assets. Long-lived assets held for use are measured and amortized as described in the applicable accounting policies. When the Health Centre determines that a long-lived asset no longer has any long-term service potential to the Health Centre, the excess of its net carrying amount over any residual value is recognized as an expense in the statement of operations. Write-downs are not reversed.

Deferred Revenue

Deferred Revenue is received from contributors who have restricted use of the funds for specific purposes. Recognition of these amounts as revenue is deferred to periods when the specific expenditures are made.

Deferred Contributions Related to Capital Assets

Deferred contributions related to capital assets represent the unamortized portion of contributed capital assets and restricted contributions that were used to purchase the Health Centre's capital assets. Recognition of these amounts as revenue is deferred to periods when the capital assets are amortized.

Compensated Absences

Compensation expense is accrued for all employees as entitlement to these payments is earned, in accordance with the Health Centre's benefit plans for vacation, sick leave and retirement allowances.

Post-Retirement Benefits

The Health Centre accrues its obligation for employee benefit plans. The cost of non-pension post-retirement and post-employment benefits earned by employees is actuarially determined using the projected benefits method pro-rated on service and management's best estimate of retirement ages and expected health care costs. The attribution period for such cost begins the date of hire of the employee to the date the employee becomes fully eligible to receive the benefits. The discount rate used to determine accrued benefit obligations is based on a year-end market rate of interest for high quality debt instruments with cash flows that match the timing and amount of expected benefit payments.

Adjustments arising from plan amendments, including past service costs, are amortized on a straight-line basis over the average remaining service period of employees active at the date of the amendment.

Sioux Lookout Meno Ya Win Health Centre

Notes to the Financial Statements

March 31, 2023

1. Significant Accounting Policies (continued)

Post-Retirement Benefits (continued)

The Health Centre is an employer member of the Healthcare of Ontario Pension Plan (the "Plan"), which is a multi-employer, defined benefit pension plan. The Board of Trustees, representing plan members and employers, is responsible for overseeing the management of the pension plan, including investment of the assets and administration of the benefits. The Health Centre has adopted defined contribution plan accounting principles for the Plan because insufficient information is available to apply defined benefit plan accounting principles. The Health Centre records as pension expense the current service cost, amortization of past service costs and interest costs related to future employer contributions to the Plan for past employee service.

Use of Estimates

The preparation of financial statements in conformity with Canadian public sector accounting standards requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the reporting period. Actual results could differ from these estimates.

Accounts receivable are stated after evaluation as to their collectability and an appropriate allowance for doubtful accounts is provided where considered necessary.

Amortization of capital assets and deferred capital contributions are based on the estimated useful lives of capital assets.

Accounts payable and accruals are based on historical charges for unbilled goods and services at year end.

The post retirement benefits liability is based on a tri-annual actuarial evaluation which is revised and updated annually.

These estimates and assumptions are reviewed periodically and, as adjustments become necessary, they are reported in the period in which they become known.

Financial Instruments

The Hospital classifies its financial instruments as either fair value or amortized cost. The Hospital's accounting policy for each category is as follows:

Fair Value

This category includes cash and investments. Financial instruments in this category are initially recognized at cost and subsequently carried at fair value. Changes in fair value are recognized in the statement of remeasurement gains and losses until they are realized, when they are transferred to the statement of operations.

Transaction costs related to financial instruments in the fair value category are expensed as incurred.

Where a decline in fair value is determined to be other than temporary, the amount of the loss is removed from accumulated remeasurement gains and losses and recognized in the statement of operations. On sale, the amount held in accumulated remeasurement gains and losses associated with that instrument is removed from net assets and recognized in the statement of operations.

Sioux Lookout Meno Ya Win Health Centre

Notes to the Financial Statements

March 31, 2023

1. Significant Accounting Policies (continued)

Financial Instruments (continued)

Amortized Cost

This category includes accounts receivable, accounts payable and long-term debt. They are initially recognized at cost and subsequently carried at amortized cost using the effective interest rate method, less any impairment losses on financial assets.

Sioux Lookout Meno Ya Win Health Centre

Notes to the Financial Statements

March 31, 2023

2. Change in Accounting Policies

Asset Retirement Obligations

Effective April 1, 2022, the Health Centre adopted the Public Sector Accounting Board's (PSAB) new standard for the recognition, measurement and disclosure of a liability for asset retirement obligations under PS 3280 Asset Retirement Obligations. The new standard establishes when to recognize and how to measure a liability for an asset retirement obligation, and provides the related financial statement presentation and disclosure requirements. Pursuant to these recommendations, the change was applied retroactively.

There was no material impact on the financial statements from the retroactive application of the new accounting recommendations.

Financial Instruments

Effective April 1, 2022, the Health Centre adopted the Public Sector Accounting Board's (PSAB) new recommendations for the recognition, measurement, presentation and disclosure of financial assets, financial liabilities and derivatives under Section PS 3450 Financial Instruments. The new Section is applied prospectively, and prior periods have not been restated. There was no material impact on the financial statements from the prospective application of the new accounting recommendations.

3. Cash

The Health Centre's bank accounts are held at one chartered bank. The Health Centre is exposed to credit risk on balances in excess of those guaranteed by the Canadian Deposit Insurance Corporation. The bank account earns interest at prime less 1.9%.

The Health Centre has an operating line of credit of \$4,000,000 that bears an interest rate of prime less 0.5%, is unsecured and is due on demand, and Corporate Mastercards repayable on demand and in accordance with standard terms and conditions. As at March 31, 2023 prime less 0.5% is 6.2% (2022 - 2.2%). As of March 31, 2023, there were unused credit facilities of \$4,000,000 (2022 - \$3,177,299).

4. Accounts Receivable

	2023	2022
Ministry of Health / Ontario Health	1,158,824	5,394,286
Insurers and Patients	1,778,078	1,633,065
Due from Trust Fund	-	14,000
Other	2,565,719	2,325,972
Allowance for Doubtful Accounts	(1,017,498)	(1,017,498)
	<u>4,485,123</u>	<u>8,349,825</u>

Sioux Lookout Meno Ya Win Health Centre
Notes to the Financial Statements

March 31, 2023

5. Inventory	2023	2022
Opening Balance	414,349	435,986
Purchases	2,240,781	2,397,543
Expensed	(2,311,304)	(2,419,180)
Ending Balance	343,826	414,349

6. Capital Assets	2023		2022	
	Cost	Accumulated Amortization	Cost	Accumulated Amortization
Land	363,026	-	363,026	-
Land Improvements	510,239	255,119	510,239	204,096
Building and Building Service Equipment	146,385,394	44,452,428	146,024,638	40,864,606
Major Equipment	15,645,522	12,264,104	16,132,861	12,581,946
Residence - Other Land and Buildings	79,548	67,048	79,548	67,048
	162,983,729	57,038,699	163,110,312	53,717,696
Net Book Value	105,945,030		109,392,616	

Assets with a net book value of \$526,029 (2022 - \$1,639,966) are under construction and have not been amortized in the financial statements.

7. Accounts Payable and Accrued Liabilities	2023	2022
Trade Accounts Payable	3,300,453	2,725,503
Accrued Salaries and Benefits	3,519,346	2,276,538
Payroll Remittances	440,887	404,454
Ministry of Health / Ontario Health	4,382,358	2,123,691
Other Payables and Accruals	1,095,830	400,182
	12,738,874	7,930,368

8. Deferred Revenue	2023	2022
Physician Recruitment	32,000	-
Research and Operations	66,321	106,630
	98,321	106,630

Sioux Lookout Meno Ya Win Health Centre

Notes to the Financial Statements

March 31, 2023

9. Long-Term Debt	2023	2022
Loan, bearing interest fixed at 2.96% (2022 - 2.96%), repayable in blended monthly payments of \$18,532, maturing January 29, 2026. Unsecured.	620,073	804,967
Loan, bearing interest fixed at 4.49% (2022 - 4.49%), repayable in blended monthly payments of \$6,721, maturing March 2027. Unsecured	1,026,048	1,036,222
	<u>1,646,121</u>	<u>1,841,189</u>
Less: current portion	221,397	238,613
	<u><u>1,424,724</u></u>	<u><u>1,602,576</u></u>

Principal repayments on debt in each of the next five years, assuming long-term debt subject to refinancing is renewed at similar rates and terms, are estimated as follows:

2024	221,397
2025	270,308
2026	238,926
2027	40,370
2028	42,117
	<u><u>813,118</u></u>

Long-term debt is subject to certain covenants with respect to insuring against all risks relevant to its business operation for amounts of the loans and assign the policies to the bank and assign, hypothecate or otherwise ensure all amounts are payable to the bank. At March 31, 2023, management believes the Health Centre is in compliance with all bank covenants.

Sioux Lookout Meno Ya Win Health Centre

Notes to the Financial Statements

March 31, 2023

10. Post-Retirement Benefits Liability

The Health Centre provides extended health care, dental and life insurance to all full-time employees, who enroll in the benefit plans and extends this coverage to the post-retirement period. The Health Centre accrues its obligations under these plans as the benefits are earned. Similar to most post-employment benefit plans (other than pension) in Canada, the Health Centre's plan is not pre-funded, resulting in a plan deficit equal to the accrued benefit obligation.

	2023	2022
Accrued benefit obligation	1,558,200	1,655,400
Unamortized actuarial gain	1,487,800	1,404,500
	3,046,000	3,059,900
Less: current portion	94,600	101,600
Accrued employee future benefits obligation liability at March 31	2,951,400	2,958,300

	2023	2022
Current year benefit costs	147,100	272,700
Amortization of plan improvements	-	111,300
Amortized actuarial gain	(129,500)	(23,000)
Interest on accrued benefit obligation	70,100	89,700
Reconciliation of plan funds (benefits payments)	(101,600)	(137,700)
	(13,900)	313,000

	2023	2022
Employee future benefit (recovery of) costs from Operations	(23,900)	303,000
Employee future benefit costs from Other Votes and Programs	10,000	10,000
	(13,900)	313,000

Retirement Benefits

Substantially all of the full-time employees and some of the part-time employees are members of Healthcare of Ontario Pension Plan. The plan is a multi-employer plan and therefore the Health Centre's contributions are accounted for as if the plan were a defined contribution plan with the Health Centre's contributions being expensed in the period they become due. Contributions made to the plan during the year by the Health Centre amounted to \$1,637,071 (2022 - \$1,842,461).

Post-Employment Benefits

The Health Centre extends post-employment life insurance, health and dental benefits to certain employee groups subsequent to their retirement. The Health Centre recognizes these benefits as they are earned during the employee's tenure of service. The related benefit liability was determined by an actuarial valuation study.

Sioux Lookout Meno Ya Win Health Centre

Notes to the Financial Statements

March 31, 2023

10. Post-Retirement Benefits Liability (continued)

Post-Employment Benefits (continued)

The major assumptions employed for the valuations are as follows:

a) Discount Rate

The present value as at March 31, 2023 of the future benefits was determined using a discount rate of 5.0% (2022 - 4.0%).

b) Extended Health Care Trend Rates

Extended health care costs were assumed to increase at 7.0% per annum in 2023 and decrease by 0.5% per annum thereafter to an ultimate rate of 4.0%.

c) Dental Costs

Dental costs were assumed to increase at 4.0% per annum.

11. Unamortized Deferred Capital Financing

Deferred capital contributions represent the unamortized amount and unspent amount of donations and grants received for the purchase of capital assets. The amortization of capital contributions is recorded as revenue in the statement of operations. Changes in the contributions capital deferred to future periods are as follows:

	2023	2022
Balance, beginning of year as stated	101,692,711	104,373,443
Contributions received during the year	794,982	1,058,508
Net contributions received during the year - restricted for future capital asset purchases	155,547	(105,605)
Amortization and prior period adjustment	(3,899,921)	(3,633,635)
Balance, end of year	98,743,319	101,692,711

Sioux Lookout Meno Ya Win Health Centre

Notes to the Financial Statements

March 31, 2023

12. Deferred Contributions - Restricted for Future Capital Asset Purchases

	2023	2022
Health Canada - New Hospital	345,236	345,236
Employee 50/50 draw	49,461	45,364
Health Canada - Telehealth Equipment	12,722	12,722
Northern Ontario School of Medicine - Equipment	149,390	149,390
Extended Care Unit - Activity Fund	2,797	2,797
SLMHC Foundation	116,300	283,241
Bursary donation	5,000	5,000
Aramark	7,974	-
Health Infrastructure Renewal Fund (HIRF) carryforward	-	677
	<u>688,880</u>	<u>844,427</u>

13. Investment in Capital Assets

(a) Investment in capital assets is calculated as follows:

	2023	2022
Capital assets	105,945,030	109,392,616
Amounts financed by Deferred Contributions	(98,743,319)	(101,692,711)
	<u>7,201,711</u>	<u>7,699,905</u>

(b) Changes in net assets invested in capital assets is calculated as follows:

	2023	2022
Excess (deficiency) of revenue over expenses:		
Amortization of capital grants	3,899,921	3,633,635
Amortization of capital assets	(4,690,627)	(4,688,212)
Loss on disposal of capital assets	(21,578)	(1,572)
	<u>(812,284)</u>	<u>(1,056,149)</u>
Net changes in investment in capital assets:		
Purchase of capital assets	1,264,619	2,678,162
Net contributions received during the year - restricted for future capital asset purchases	(155,547)	105,605
Deferred capital financing received	(794,982)	(1,058,508)
	<u>314,090</u>	<u>1,725,259</u>
	<u>(498,194)</u>	<u>669,110</u>

Sioux Lookout Meno Ya Win Health Centre

Notes to the Financial Statements

March 31, 2023

14. Pension Agreement

Healthcare of Ontario Pension Plan (the "Plan") provides pension service to more than 439,630 active and retired members and approximately 646 employers. Each year an independent actuary determines the funding status of the Plan by comparing the actuarial value of invested assets to the estimated present value of all pension benefits that members have earned to date. The results of the most recent actuarial valuation as at December 31, 2022 disclosed an actuarial surplus of \$16,129 million (2022 - \$17,567 million). The results of this valuation disclosed total actuarial liabilities of \$92,721 million (2022 - \$85,902 million) in respect of benefits accrued for service with actuarial assets at that date of \$108,850 million (2022 - \$103,469 million). Because the Plan is a multi-employer plan, any pension plan surpluses or deficits are a joint responsibility of member Ontario health care providers and their employees. As a result, the Health Centre does not recognize any share of the Plan surplus or deficit. Contributions made by the Health Centre to the Plan during the year amounted to \$1,637,071 (2022 - \$1,842,461).

15. Contingent Liabilities and Commitments

The Health Centre is a member of Health Care Insurance Reciprocal of Canada (HIROC). HIROC is a pooling of the public liability insurance risks of its members. All members of the pool pay annual premiums which are actuarially determined. All members are subject to reassessment for losses, if any, experienced by the pool for the years in which they are members and losses could be material. No reassessments have been made to March 31, 2023.

The Health Centre entered into a contract extension for a period of three years starting July 1, 2022 for dietary, laundry and housekeeping supply and management. The contract will expire June 30, 2025. The annual value of this contract is approximately \$831,000 (2022 - \$785,000), increasing approximately \$17,000 annually.

The Health Centre entered into a contract for renovations to the emergency department. As of March 31, 2023, the project has not yet been completed. The remaining costs are estimated at \$185,000 plus HST.

16. Economic Dependence

The Health Centre receives 87% (2022 - 87%) of its funding from the Ministry of Health and Ontario Health.

Sioux Lookout Meno Ya Win Health Centre

Notes to the Financial Statements

March 31, 2023

17. Financial Instrument Classification

The following table provides cost and fair value information of financial instruments by category.
The maximum exposure to credit risk would be the carrying value as shown below.

	2023		
	Fair Value	Amortized Cost	Total
Cash	\$ 6,249,967	\$ -	\$ 6,249,967
Accounts Receivable	-	4,485,123	4,485,123
Accounts Payable	-	(12,738,874)	(12,738,874)
Long-Term Debt		(1,646,121)	(1,646,121)
	<u>\$ 6,249,967</u>	<u>\$ (9,899,872)</u>	<u>\$ (3,649,905)</u>

	2022		
	Fair Value	Amortized Cost	Total
Cash	\$ 9,712	\$ -	9,712
Accounts Receivable	-	8,349,825	8,349,825
Accounts Payable	-	(7,930,368)	(7,930,368)
Bank Indebtedness	-	(822,771)	(822,771)
Long-Term Debt	-	(1,841,189)	(1,841,189)
	<u>\$ 9,712</u>	<u>\$ (2,244,503)</u>	<u>\$ (2,234,791)</u>

The following table provides an analysis of financial instruments that are measured subsequent to initial recognition at fair value, grouped into Level 1 to Level 3 based on the degree to which the fair value is observable:

Level 1 fair value measurements are those derived from quoted prices (unadjusted) in active markets for identical assets or liabilities using the last bid price;

Level 2 fair value measurements are those derived from inputs other than quoted prices included within Level 1 that are observable for the asset or liability, either directly (i.e. as prices) or indirectly (i.e. derived from prices); and

Level 3 fair value measurements are those derived from valuation techniques that include inputs for the asset or liability that are not based on observable market data (unobservable inputs).

	2023			
	Level 1	Level 2	Level 3	Total
Cash	\$ 6,249,967	\$ -	\$ -	\$ 6,249,967

	2022			
	Level 1	Level 2	Level 3	Total
Cash	\$ 9,712	\$ -	\$ -	\$ 9,712

Sioux Lookout Meno Ya Win Health Centre

Notes to the Financial Statements

March 31, 2023

18. Financial Instrument Risk

The Health Centre, as part of its operations, carries a number of financial instruments. It is management's opinion that the Health Centre is not exposed to significant interest, currency, credit, liquidity or other price risks arising from these financial instruments except as otherwise disclosed.

Liquidity Risk

Liquidity risk is the risk that the Health Centre will not be able to meet its financial obligation as they fall due. The Health Centre has a planning budgeting process in place to help determine the funds required to support the Health Centre's normal operating requirements on an ongoing basis. The Health Centre ensures that there are sufficient funds to meet its short-term requirements, taking into account its anticipated cash flows from operations and its holdings of cash and cash equivalents. To achieve this aim, it seeks to maintain cash balances to meet, at a minimum, expected requirements for a period of at least 90 days. All amounts in accounts payable are current.

Interest Rate Risk

Interest rate risk is the risk that the value of a financial instrument might be adversely affected by a change in the interest rates. Changes in market rates may have an effect on the cash flows associated with some financial assets and liabilities, known as cash flow risk, and on the fair value of other financial assets or liabilities, known as price risk.

The Health Centre is exposed to interest rate risk on its long-term debt as they are fixed rates. The Health Centre's long-term debt have fixed interest rates ranging from 2.95% - 4.49% (2022 - 2.95% - 4.49%).

Contractual maturities of long-term debt are disclosed in Note 9.

19. Ministry of Health Pandemic Funding

In connection with the coronavirus pandemic (COVID-19), the MOH funded a number of programs intended to assist hospitals with incremental operating and capital costs resulting from COVID-19. In addition to these funding programs, the MOH is also permitting hospitals to redirect unused funding from certain programs towards COVID-19 costs, and other budgetary pressures through a broad-based funding reconciliation.

While the MOH has provided guidance with respect to the maximum amount of funding potentially available to the Health Centre, as well as criteria for eligibility and revenue recognition, this guidance continues to evolve and is subject to revision and clarification subsequent to the time of approval of these financial statements. The MOH has also indicated that all funding related to COVID-19 is subject to review and reconciliation, with the potential for adjustments during the subsequent fiscal year(s).

Sioux Lookout Meno Ya Win Health Centre

Notes to the Financial Statements

March 31, 2023

19. Ministry of Health Pandemic Funding (continued)

Management's estimate of MOH revenue for COVID-19 is based on the most recent guidance provided by MOH and the impacts of COVID-19 on the Health Centre's operations, revenues and expenses. As a result of Management's estimation process, the Health Centre has determined a range of reasonably possible amounts that are considered by Management to be realistic, supportable and consistent with the guidance provided by the MOH. However, given the potential for future changes to funding programs that could be announced by the MOH, the Health Centre has recognized revenue related to COVID-19 based on the lower end of the range. Any adjustments to Management's estimate of MOH revenues will be reflected in the Health Centre's financial statements in the year of settlement.

Details of the MOH funding for COVID-19 recognized as revenue in the year are summarized below:

	2023	2022
Funding for incremental COVID-19 operating expenses	3,463,729	4,981,681
COVID-19 assessment centre funding	194,311	325,116
Pandemic pay funding	-	104,900
Other pandemic funding	483,340	546,825
	4,141,380	5,958,522

Details of MOH funding for COVID-19 recognized as revenue with Other Votes and Programs in the year are summarized below:

Community Mental Health and Addictions	10,000	-
Community Support Services	5,000	-
	15,000	-

Details of MOH funding for COVID-19 included in deferred contributions in the year are summarized below:

COVID-19 one-time renovations & equipment	-	61,367
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Sioux Lookout Meno Ya Win Health Centre

Notes to the Financial Statements

March 31, 2023

20. COVID-19 Impacts

In response to COVID-19 and consistent with guidance provided by the MOH and other government agencies, the Health Centre has implemented a number of measures to protect patients and staff from COVID-19. In addition, the Health Centre has actively contributed towards the care of COVID-19 patients and the delivery of programs that protect public health.

The Health Centre continues to respond to the pandemic and plans for continued operational and financial impacts during the 2024 fiscal year and beyond. Management has assessed the impact of COVID-19 and believes there are not significant financial issues that compromise its ongoing operations. The outcome and timeframe to a recovery from the current pandemic is highly unpredictable, thus it is not practical to estimate and disclose its effects on future operations at this time.

Sioux Lookout Meno Ya Win Health Centre
Schedule 1 - Other Revenues
(Unaudited)

March 31,	2023	2022
Recoveries and Miscellaneous Revenues		
Indigenous Services Canada	401,550	324,253
Recoveries External	3,468,468	3,492,179
Recoveries Internal	446,670	711,460
Recoveries Interdepartmental	50,373	50,373
Donations	-	13,734
Investments and Interest	87,457	5,911
Other Revenue	15,181	8,126
Total Recoveries and Miscellaneous Revenues	4,469,699	4,606,036
Differential & Copayment Revenues		
Worker Safety and Insurance Board (WSIB)	10,638	15,927
Non-Resident	218,906	162,821
Uninsured Residents	247,742	153,113
Private Pay and Other	629,369	668,096
Total Differential & Copayment Revenues	1,106,655	999,957

Sioux Lookout Meno Ya Win Health Centre
Schedule 2 - Other Votes and Programs
(Unaudited)

	Community Mental Health and Addictions Programs					Community Support Services	For the year ended March 31, 2023	For the year ended March 31, 2022
	Substance Abuse	Problem Gambling	Community Mental Health	Administration	Rent Supplement			
Revenue								
Ontario Health / Ministry of Health	3,499,098	84,793	1,126,442	-	90,317	102,000	4,902,650	2,798,250
OH / MOH One-Time Pandemic Funding (Note 19)	10,000	-	-	-	-	5,000	15,000	-
Sessional Fee Funding	-	-	10,994	-	-	-	10,994	8,858
Other Revenue and Recoveries	29,443	-	-	10,967	-	-	40,411	3,011
Total Revenue	3,538,541	84,793	1,137,436	10,967	90,317	107,000	4,969,055	2,810,119
Expenses								
Salaries and Wages	850,539	1,495	195,836	527,654	-	66,512	1,642,036	1,654,422
Employee Benefits	192,991	364	48,052	135,105	-	19,180	395,692	354,479
Employee Future Benefits	-	-	-	10,000	-	-	10,000	10,000
Medical and Surgical Supplies	7,244	-	-	25	-	4,795	12,064	19,070
Supplies and Sundry Expenses	47,233	-	-	99,232	-	4,149	150,614	178,493
Equipment Expenses	629	-	-	17,110	-	444	18,183	19,097
Contracted Out Expenses	840,987	-	-	-	90,317	-	931,304	289,817
Buildings and Grounds Expenses	-	-	-	181,857	-	-	181,857	181,857
Total Expenses	1,939,623	1,859	243,888	970,983	90,317	95,080	3,341,750	2,707,235
Net Revenue (Expense) Before Other Items	1,598,918	82,934	893,548	(960,015)	-	11,920	1,627,305	102,884
Allocated Administration	(170,080)		(789,934)	960,015			-	-
Net Revenue Before Recoveries	1,428,838	82,934	103,614	-	-	11,920	1,627,305	102,884
Ontario Health / Ministry of Health Recoveries	(1,428,838)	(82,934)	(103,614)	-	-	(11,920)	(1,627,305)	(102,970)
Net Revenue After Recoveries	-	-	-	-	-	-	-	(86)

Sioux Lookout Meno Ya Win Health Centre
Schedule 3 - Salaries, Wages and Purchased Services
(Unaudited)

March 31,	2023	2022
Patient Care		
Ambulatory Care	4,136,819	4,148,734
Centre for Complex Diabetes Care	323,652	375,037
Community Health and Support Services	563,220	561,327
Diabetes Education	504,836	435,513
Diagnostics Imaging	1,608,181	1,652,409
Extended Care Unit	1,855,490	1,569,632
Inpatient Wards	12,928,664	8,771,532
Laboratory	2,005,323	1,550,999
Operating Room	1,266,909	961,181
Pharmacy	424,898	408,728
Therapeutic Services	1,352,053	1,317,418
Visiting Specialist	2,591	-
Total Patient Care	26,972,636	21,752,510
Support Services		
Administration	2,596,000	2,959,362
Environmental Services	1,406,236	1,311,499
Food Services	821,258	812,875
Information System Support	532,617	443,076
In House Education	248,804	256,369
Marketed Services	229,669	206,255
Materials Management	408,315	353,524
Patient Information	985,167	981,546
Physical Plant	972,188	1,017,435
Total Support Services	8,200,254	8,341,941
Total Salaries, Wages and Purchased Services	35,172,890	30,094,451

Sioux Lookout Meno Ya Win Health Centre
Schedule 4 - Employee Benefits
(Unaudited)

March 31,	2023	2022
Benefit and Vacation % in Lieu	327,409	387,570
Canada Pension Plan	1,190,269	988,989
Dental Insurance	160,084	152,751
Employer Health Tax	402,479	459,791
Employment Insurance	323,787	350,068
Extended Health Care Insurance	289,319	354,504
Group Life and Accidental Death & Dismemberment	80,505	84,469
Hospital Pension Plan	1,503,614	1,716,810
Long-Term Disability Insurance	170,798	194,499
Other	503,032	512,672
Semi-Private Insurance	2,188	3,844
Workplace Safety & Insurance Board	144,112	263,556
Total Employee Benefits	5,097,596	5,469,523

Sioux Lookout Meno Ya Win Health Centre
Schedule 5 - Medical Staff Remuneration
(Unaudited)

March 31,	2023	2022
Centre for Complex Diabetes Care	10,000	10,000
Clinical Laboratory	19,437	18,357
Chief of Departments	233,837	-
Temporary Physician Compensation	402,415	101,294
Diagnostic Readings	1,195,614	1,089,235
Emergency Department	74,500	-
Employee Health	-	9,000
Hospital On Call Coverage	668,238	655,860
Visiting Specialist	24,042	14,503
Total Medical Staff Remuneration	2,628,083	1,898,249

Sioux Lookout Meno Ya Win Health Centre
Schedule 6 - Supplies and Other Expenses
(Unaudited)

March 31,	2023	2022
Patient Care		
Ambulatory Care	210,540	210,007
Centre for Complex Diabetes Care	51,720	56,473
Community Health and Support Services	46,769	0
Diabetes Education	179,116	140,098
Diagnostics Imaging	441,649	442,616
Extended Care Unit	134,501	116,492
Inpatient Wards	454,674	436,955
Laboratory	1,193,781	1,354,051
Operating Room	83,744	88,713
Pharmacy	365,667	290,131
Therapeutic Services	40,333	42,282
Visiting Specialist	101,109	60,301
Total Patient Care	3,303,603	3,238,119
Support Services		
Administration	876,235	1,014,035
Small Hospital Transformation Fund Projects	527,367	536,003
Environmental Services	333,826	353,362
Food Services	502,711	459,610
Information System Support	2,068,181	1,871,740
In House Education	77,802	75,050
Marketed Services	1,042,712	881,501
Materials Management	74,890	(18,670)
Patient Information	143,290	228,731
Physical Plant	2,885,736	2,900,218
Total Support Services	8,532,750	8,301,580
Total Supplies and Other Expenses	11,836,353	11,539,699

Sioux Lookout Meno Ya Win Health Centre
Schedule 7 - Indigenous Services Canada Programs
(Unaudited)

	Radiology	Admitting	Non-Invasive Cardiology	Remote Diabetes Monitoring	Indigenous Transitions Facilitator	For the year ended March 31, 2023	For the year ended March 31, 2022
Revenue							
Indigenous Services Canada	67,106	100,592	20,194	103,658	110,000	401,550	324,253
Other Revenue and Recoveries	41,724	-	22,717	-	-	64,441	-
Total Revenue	108,830	100,592	42,911	103,658	110,000	465,991	324,253
Expenses							
Salaries and Benefits	185,214	76,182	170,388	46,960	85,810	564,554	782,855
Administration Fee	20,037	9,696	19,907	5,727	8,581	63,948	51,992
Medical Fees	17,992	-	28,340	-	-	46,332	46,332
Supplies and Other Expenses	1,769	21,452	343	10,312	-	33,876	59,688
Equipment	436	-	-	-	-	436	2,563
Total Expenses	225,448	107,330	218,978	62,999	94,391	709,146	943,430
Net Revenue (Expenses)	(116,618)	(6,738)	(176,067)	40,659	15,609	(243,155)	(619,177)