INDEPENDENT AUDITOR'S REPORT AND FINANCIAL STATEMENTS

MARCH 31, 2021



Baker Tilly HKC

1021 George Street, PO Box 637

Hearst, ON Canada POL 1NO

T: 705,362,4261

F: 705 362 4641

hearst@bakertilly.ca www.bakertilly.ca

INDEPENDENT AUDITOR'S REPORT

To the Board of Directors of Hôpital de Smooth Rock Falls Hospital

Opinion

We have audited the financial statements of Hôpital de Smooth Rock Falls Hospital, which comprise the statement of financial position as at March 31, 2021, 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 Hospital as at March 31, 2021, and its results of operations and its cash flows for the year then ended in accordance with Canadian Public Sector Accounting Standards for Government Not-for-Profit Organizations.

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 Hospital 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.

Emphasis of Matter

We draw attention to Note 4 to the financial statements, which describes a matter that is subject to significant measurement uncertainty. Our opinion is not modified in respect of this matter.

ASSURANCE . TAX . ADVISORY



INDEPENDENT AUDITOR'S REPORT, (CONT'D)

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 for Government Not-for-Profit
Organizations, 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 Hospital'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 Hospital or to cease operations, or has no realistic alternative but to do so.

Those charged with governance are responsible for overseeing the Hospital'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 Hospital's internal control.



INDEPENDENT AUDITOR'S REPORT, (CONT'D)

- 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 Hospital'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 Hospital 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.

Chartered Professional Accountants

Baker Tilly HKC

Licenced Public Accountants June 2, 2021

FINANCIAL STATEMENTS

MARCH 31, 2021

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STATEMENT OF CHANGES IN NET ASSETS

YEAR ENDED MARCH 31, 2021

		Invested in ital Assets (Note 12)	 Unrestricted Surplus	Total 2021	 Total 2020
NET ASSETS (NET DEBT), BEGINNING OF YEAR	s	539,094	\$ (1,473,051)	\$ (933,957)	\$ (1,282,303)
EXCESS OF REVENUES OVER EXPENSES		-	1,446,742	1,446,742	348,346
NET CHANGE IN INVESTED IN CAPITAL ASSETS (Note 12)		(34,659)	34,659	-	•
NET ASSETS (NET DEBT), END OF YEAR	\$	504,435	\$ 8,350	\$ 512,785	\$ (933,957)

STATEMENT OF FINANCIAL POSITION

MARCH 31, 2021

		2021		2020
ASSETS				
CURRENT ASSETS				
Cash	\$	879,691	\$	166,436
Accounts receivable (Note 4)		1,226,257		255,851
Inventories		75,843		91,758
Prepaid expenses		60,998		58,744
		2,242,789		572,789
CAPITAL ASSETS (Note 5)		4,754,859		4,979,917
	<u> </u>	6,997,648	\$	
LIABILITIES CURRENT LIABILITIES				
	•	1 174 000	•	1011501
Accounts payable and accrued liabilities (Note 7) Deferred revenues (Note 8)	2	1,174,983	\$	1,211,791
Current portion of obligation under capital leases		482,092		305,025
Current portion of congation under capital leases		11,600		11,200
		1,668,675		1,528,016
OBLIGATION UNDER CAPITAL LEASES (Note 9)		107,282		119,289
DEFERRED CAPITAL CONTRIBUTIONS (Note 10)		4,131,542		4,310,334
POST-EMPLOYMENT BENEFITS PAYABLE (Note 11)		577,364		529,024
		6,484,863		6,486,663
NET ASSETS				
INVESTED IN CAPITAL ASSETS (Note 12)		504,435		539,094
UNRESTRICTED SURPLUS (NET DEFICIENCY)	_	8,350		(1,473,051)
		512,785		(933,957)
	\$	6,997,648	\$	5,552,706

COMMITMENTS AND CONTINGENCIES (Note 16)

On behalf of the board

Director, Juan Durul

Director, lugal Role

The accompanying notes are an integral part of these financial statements.

STATEMENT OF CASH FLOWS

YEAR ENDED MARCH 31, 2021

	2021	2020
OPERATING ACTIVITIES		
Excess of revenues over expenses	\$ 1,446,742 \$	348,346
Items not involving cash:	. , , ,	,
Amortization of deferred capital contribution - equipment	(173,417)	(142,087)
Amortization of deferred capital contributions - buildings	(373,582)	(387,055)
Amortization of deferred capital contributions - detox	(18,145)	(18,145)
Amortization of equipment	210,138	189,822
Amortization of buildings	402,147	415,346
Amortization of leasehold improvements - detox	19,090	19,090
Amortization of major equipment - detox	5,945	5,945
Gain on disposal of capital assets	-	(3,000)
Accrual for post-employment benefits payable	48,340	40,284
Change in:	1,567,258	468,546
Accounts receivable	(970,406)	9,766
Inventories	15,915	(13,934)
Prepaid expenses	(2,254)	(13,934)
Accounts payable and accrued liabilities	(36,808)	33,878
Deferred revenues	177,067	(92,180)
	-	
	750,772	405,542
FINANCING ACTIVITIES		
Repayment of obligation under capital leases	(11,607)	(15,172)
Proceeds of obligation under capital leases		137,046
	(11,607)	121,874
CAPITAL ACTIVTIES		
Capital contributions received	386,352	569,736
Capital assets additions	(412,262)	(711,767)
Proceeds from disposal of capital assets	-	3,000
Transfer of capital project in progress	-	116,906
	(25,910)	(22,125)
CHANGE IN CASH POSITION	713,255	505,291
CASH POSITION, BEGINNING OF YEAR	166,436	(338,855)
CASH POSITION, END OF YEAR	\$ 879,691	166,436

The accompanying notes are an integral part of these financial statements.

NOTES TO FINANCIAL STATEMENTS

MARCH 31, 2021

1. STATUS AND NATURE OF OPERATIONS

The Hospital, incorporated under the Ontario Business Corporation Act, without share capital, operates a 37 bed Hospital under the Charitable Institutions Act, at 107 Kelly Road, Smooth Rock Falls, Ontario. The Hospital is a Not-for-Profit Organization and, as such, is exempt from income taxes under the Income Tax Act (Canada).

2. SIGNIFICANT ACCOUNTING POLICIES

These financial statements 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 and includes the following significant accounting policies:

BASIS OF PRESENTATION

The financial statements include the assets, liabilities and activities of the Hospital. The revenues, expenses, assets and liabilities with respect to the operations of the Hospital Auxiliary and Foundation are not reflected in these financial statements except to the extent that the funds have been received from or disbursed to them.

REVENUE RECOGNITION

The financial statements have been prepared using the deferral method of accounting. Under the deferral method, revenues are recorded in the period to which they relate.

Under the Health Insurance Act and the regulations thereto, the Hospital is funded primarily by the North East Local Health Integration Network (NE LHIN) in accordance with the terms and conditions in the Hospital Service Accountability Agreement.

Unrestricted contributions, including operating grants, are recorded as revenue in the period to which they relate. Grants approved but not received at the end of the year are accrued.

Externally restricted contributions are recognized as revenue in the year in which the related expenses are incurred. Grants, donations and other contributions received for the acquisition of specific capital assets are recorded as deferred capital contributions and recognized into revenue at a rate corresponding with the amortization rate for the related capital assets.

Revenue from the provincial insurance plans, and uninsured patients, operational revenue and other services and recoveries are recognized as revenue when received or receivable if the amount to be recorded can be reasonably estimated and the collection is reasonably assured.

NOTES TO FINANCIAL STATEMENTS

MARCH 31, 2021

2. SIGNIFICANT ACCOUNTING POLICIES, (CONT'D)

INVENTORIES

Inventories of all hospital supplies are valued the lower of average cost and replacement value and include only those supplies located in central storage areas and not supplies that have been issued to departments for direct patient care.

CAPITAL ASSETS

The acquisition of capital assets are recorded at their historical cost less amortization. Contributed capital assets are recorded at fair value at the date of contribution. Betterments which extend the estimated life of an asset are capitalized. When a capital asset no longer contributes to the Hospital's ability to provide services or the value of future economic benefits associated with the capital asset is less than its net book value, the carrying amount is reduced to reflect the decline in the asset's value. The writedown is recorded in the statement of operations.

Amortization is calculated on a straight line basis using rates as set-out in the Ontario Health Care Reporting System Guidelines. The estimated useful lives of the assets are as follows:

Land	Not amortized
Land improvements	2 - 25 years
Buildings	20 - 40 years
Leasehold improvements - detox	25 years
Furnishing and equipment	3 - 20 yers
Information technology	3 - 5 years
Capital project in progress	Not amortized

The cost of capital projects in progress is recorded as capital assets and no amortization is taken until the project is substantially completed and the asset is ready for productive use. The Hospital allocates salary and benefit costs when personnel work directly in managing or implementing the capital project.

CONTRIBUTED MATERIALS AND SERVICES

Volunteers contribute significant hours of their time each year to assist the Hospital in carrying out certain charitable activities. The fair value of these contributed services is not readily determinable and, as such, is not reflected in these financial statements. Contributed materials are also not recognized in these financial statements.

NOTES TO FINANCIAL STATEMENTS

MARCH 31, 2021

2. SIGNIFICANT ACCOUNTING POLICIES, (CONT'D)

FUNDING

Under the current funding policy, the Hospital is essentially funded by using a budget base approved by the North East Local Health Integration Network. The Hospital is allowed to retain any excess of revenue over expenses derived from its operations and, conversely, retains responsibility for any deficit it may occur.

PENSION PLANS AND OTHER RETIREMENT BENEFIT PLANS

The Hospital provides defined retirement and post-employment benefits for certain employee groups and retirees. The benefits include pension, extended health care, dental and life insurance. The Hospital has adopted the following policies with respect to accounting for these employee benefits:

Multi-employer defined benefit plan

Substantially all of the employees of the Hospital are eligible to be members of the Hospitals of Ontario Pension Plan (HOOPP), which is a multi-employer, defined benefit, final average earnings, contributory pension plan. Defined contribution plan accounting is applied to HOOPP, whereby contributions are expensed when due, as the Hospital has insufficient information to apply defined benefit accounting.

Post employment benefits

- a) The costs of post-employment future benefits are actuarially determined using the projected benefit method prorated on service and management's best estimate of retirement ages, health care costs, disability recovery rates and discount rates. Adjustments to these costs arising from changes in estimates and experience gains and losses are amortized to income over the estimated average remaining service life of the employee groups on a straight line basis.
- b) Past service costs, if any, arising from plan amendments are immediately recognized.
- c) The discount rate used in the determination of the above-mentioned liability is the discount rate recommended by the Ministry of Health and Long-Term Care.

NOTES TO FINANCIAL STATEMENTS

MARCH 31, 2021

2. SIGNIFICANT ACCOUNTING POLICIES, (CONT'D)

FINANCIAL INSTRUMENTS

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

Fair Value

This category includes derivatives and equity instruments quoted in an active market. The Hospital has designated its cash as fair value as it is managed and evaluated on a fair value basis.

They are initially recognized at cost and subsequently carried at fair value. Unrealized 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.

The Hospital does not have any amounts to record on the statement of remeasurement gains and losses and therefore this statement has not been included in their financial statements.

Amortized cost

This category includes accounts receivable, notes, accounts payable and accrued liabilities and obligation under capital leases. 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.

Transaction costs related to financial instruments in the amortized cost category are added to the carrying value of the instrument.

Writedowns on financial assets in the amortized cost category are recognized when the amount of a loss is known with sufficient precision, and there is no realistic prospect of recovery. Financial assets are then written down to net recoverable value with the writedown being recognized in the statement of operations.

NOTES TO FINANCIAL STATEMENTS

MARCH 31, 2021

2. SIGNIFICANT ACCOUNTING POLICIES, (CONT'D)

MEASUREMENT UNCERTAINTY

The preparation of financial statements in conformity with Canadian Public Sector Accounting Standards for Government Not-for-Profit Organizations requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities at the date of the financial statements, and the reported amounts of revenues and expenses during the period. Significant areas requiring the use of estimates include: the allowance for doubtful accounts receivable, the useful life of capital assets, accrued liabilities, actuarial estimation of post-employment benefits, contingencies and revenue recognition of certain restricted contributions. Actual results may differ from management's best estimates as additional information becomes available in the future.

3. FINANCIAL INSTRUMENT CLASSIFICATION

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

			228	2021		
			10	Amortized		
		Fair Value	_	Cost	_	Total
Cash	\$	879,691	\$	-	\$	879,691
Accounts receivable	\$	-	\$	1,226,257		•
Accounts payable and accrued liabilities	\$	-	\$	(1,174,983)	\$	(1,174,983)
Obligation under capital leases	\$	-	\$	(118,882)	\$	(118,882)
	22			2020		
				Amortized		
		Fair Value	_	Cost		Total
Cash	\$	166,436	S	-	\$	166,436
Accounts receivable	\$		\$			255,851
Accounts payable and accrued liabilities	\$	-	\$			(1,211,791)
Obligation under capital leases	\$	•	\$	•		(130,489)

NOTES TO FINANCIAL STATEMENTS

MARCH 31, 2021

3. FINANCIAL INSTRUMENT CLASSIFICATION, (CONT'D)

The following provides details of financial instruments that are measured subsequent to initial recognition at fair value, grouped into levels 1 to 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 and 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).

		Level 1		Leve	el 2	Level 3		Total
Cash	\$	879,691	\$		\$	-	\$	879,691
There were no transfers between	levels	for the yea	r ende	d Marc	h 31, 2	021.		
ACCOUNTS RECEIVABLE								
						2021		2020
Health services					s	2021 86,485	<u> </u>	
Health services Grants and others					s		\$	2020 148,006 36,532
					\$	86,485	s	148,006
Grants and others					s	86,485 1,082,001	\$	148,006 36,532

Included in grants and others is an estimated contribution receivable of \$859,700 for working funds deficits. The contribution is based on the March 31, 2020 working capital deficit and is subject to decrease following a review by the funder. The decrease cannot be reasonably estimated at this time and the amount could be significant and material. The decrease, if any, will be recognized in the year it is made known by the funder.

\$ 1,226,257 \$

255,851

NOTES TO FINANCIAL STATEMENTS

MARCH 31, 2021

5. CAPITAL ASSETS

	 Cost	Accumulated Amortization	2021 Net	2020 Net
Land and land improvements	\$ 102,575	\$ 36,781	\$ 65,794	\$ 65,794
Buildings	12,737,619	9,160,495	3,577,124	3,926,673
Leasehold improvements - detox	461,732	184,456	277,276	295,761
Furnishing and equipment	4,521,214	3,959,883	561,331	573,248
Information technology	639,751	588,758	50,993	66,223
Capital project in progress	 222,341	 _	222,341	52,218
	\$ 18,685,232	\$ 13,930,373	\$ 4,754,859	\$ 4,979,917

During the year, the Hospital wrote-off \$9,127 (2020 - \$8,505) in equipment that was obsolete or damaged and fully amortized which resulted in a gain on disposal of capital assets of \$0 (2020 - \$3,000).

6. BANK INDEBTEDNESS

The Hospital has an authorized line of credit of \$600,000 as at March 31, 2021, bearing interest at prime + 1% and is secured by a general security agreement. The Hospital has no outstanding balance as at March 31, 2021 (2020 - \$nil).

NOTES TO FINANCIAL STATEMENTS

MARCH 31, 2021

7. ACCOUNTS PAYABLE AND ACCRUED LIABILITIES

	 2021	 2020
Trade Payroll related Accrued liabilities	\$ 542,486 607,815 24,682	\$ 641,810 550,857 19,124
	\$ 1,174,983	\$ 1,211,791

8. DEFERRED REVENUES

	 2021	2020
Aging at Home Program	\$ 145,286	\$ 135,386
Detox operations	40,732	41,770
EMR upgrade	94,061	94,061
HIRF	175,074	- ^
Hospice funding	-	15,000
Physician office integration	7,282	7,282
Foundation and others	 19,657	 11,526
	\$ 482,092	\$ 305,025

Due to the ongoing COVID-19 pandemic restrictions and circumstances (see further detail in note 19), the construction projects funded by the Health Infrastructure Renewal Fund have been delayed and as such, the funding was not fully spent on March 31, 2021. The Hospital obtained approval from the funder to defer this unspent contribution.

NOTES TO FINANCIAL STATEMENTS

MARCH 31, 2021

	· · ·	2021		2020
Concentra Bank, Commercial Leasing Services capital lease, bearing interest at 4.17%, repayable in blended monthly payments of \$1,545, due August 2029, secured by equipment with a net book value of \$111,804	s	118,882	\$	130,489
Less current portion		11,600		11,200
	\$	107,282	\$	119,289
The principal instalments to be paid over the next five fiscal years	are a	s follows:		
2022	\$	11,600		
2023		12,300		
2024		12,800		
2025		13,300		
***		13,900		
2026		£4.000		
2026 Subsequent years		54,98 <u>2</u>	1	

Interest charges of \$5,109 (2020 - \$3,194) were expensed to the accounts of the Hospital.

NOTES TO FINANCIAL STATEMENTS

MARCH 31, 2021

10. DEFERRED CAPITAL CONTRIBUTIONS

Deferred capital contributions represent the unamortized 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. The changes in the deferred capital contributions balances are as follows:

	2021	2020
CAPITAL GRANTS AND CONTRIBUTIONS		
Balance, beginning of year Received in current year	\$ 15,452,245 386,352	\$ 14,882,509 569,736
Balance, end of year	15,838,597	15,452,245
ACCUMULATED AMORTIZATION		
Balance, beginning of year Amortization - buildings Amortization - leasehold improvement - detox Amortization - equipment	(11,141,911) (373,582) (18,145) (173,417)	(10,594,624) (387,055) (18,145) (142,087)
Balance, end of year	(11,707,055)	(11,141,911)
	\$ 4,131,542	\$ 4,310,334

NOTES TO FINANCIAL STATEMENTS

MARCH 31, 2021

11. POST-EMPLOYMENT BENEFITS PAYABLE

The Hospital extends post employment life insurance, extended health coverage and dental benefits to employees subsequent to their retirement. The Hospital recognizes these benefits as they are earned during the employees' tenure of service. The related benefit liability was determined by an actuarial valuation performed on April 26, 2021 for the year ending March 31, 2021.

The following table outlines the components of the Hospital's accrued post-employment benefit liability:

		2021		2020	
Accrued employee future benefits obligation Unamortized actuarial gain (loss)	\$	479,165 98,199	\$	605,191 (76,167)	
Accrued employee future benefits liability	_\$_	577,364	\$	529,024	

The following table outlines the components of the Hospital's post-employment benefit expense:

		2021	2020	
Expected obligation, beginning of year Unamortized actuarial loss	\$	605,191 \$ (76,167)	575,485 (86,745)	
Accrued benefit liability, beginning of year		529,024	488,740	
Current service cost Interest on accrued benefit obligation Amortization of actuarial loss Benefit payments		30,123 20,696 9,765 (12,244)	29,141 19,565 10,578 (19,000)	
Benefit expenses and payments	•	48,340	40,284	
	\$	577,364 \$	529,024	

NOTES TO FINANCIAL STATEMENTS

MARCH 31, 2021

11. POST-EMPLOYMENT BENEFITS PAYABLE, (CONT'D)

The above amounts exclude contributions to the Hospitals of Ontario Pension Plan, a multiemployer plan, described in note 13.

The major actuarial assumptions employed for the valuations are as follows:

Discount rate

The present value as at March 31, 2021 of the future benefits was determined using a discount rate of 3.21% (2020 - 3.29%) which is the discount rate recommended by the Ministry of Health and Long-Term Care.

Extended Health Coverage

Extended Health Coverage is assumed to decrease by 0.5% per year to an ultimate rate of 4.5%. As of March 31, 2021 the rate is assumed to be 6.5% (2020 - 7%).

Dental costs

Dental costs remained stable at 4% per annum (2020 - 4%).

NOTES TO FINANCIAL STATEMENTS

MARCH 31, 2021

12. INVESTED IN CAPITAL ASSETS

Invested in capital assets is calculated as follows:

		2021	2020
Capital assets	\$	4,754,859	\$ 4,979,917
Obligation under capital leases		(118,882)	(130,489)
Deferred capital contributions		(4,131,542)	(4,310,334)
	_\$	504,435	\$ 539,094

The interfund transfer and the change in invested in capital assets is calculated as follows:

	2021	2020
Amortization of capital assets	\$ (637,320) \$	(630,203)
Purchase of capital assets	412,262	711,767
Amounts funded by deferred capital contributions	(386,352)	(569,736)
Repayment of obligation under capital leases	11,607	15,172
Amortization of deferred capital contributions	565,144	547,287
Capitalization of capital project in progress	_	(116,906)
Proceeds of obligations under capital leases	 -	(137,046)
	\$ (34,659) \$	(179,665)

13. RETIREMENT BENEFITS

Substantially all of the Hospital's employees are members of the Hospitals of Ontario Pension Plan (the "Plan"), which is a multi-employer defined benefit pension plan available to all eligible employees of the participating members of the Ontario Hospital Association. Contributions to the plan made during the year by the Hospital on behalf of its employees amounted to \$355,811 (2020 - \$342,678) and are included in the statement of operations. As this is a multi-employer pension plan, these contributions are the Hospital's pension benefit expenses. No pension liability for this type of plan is included in the Hospital's financial statements as no contributing employer or employee has any liability, directly or indirectly, to provide the benefits established by this plan beyond the obligation to make contributions pursuant to this pension plan policies. The most recent actuarial valuation of the Plan at December 31, 2020 indicated that the Plan is fully funded on a solvency basis.

NOTES TO FINANCIAL STATEMENTS

MARCH 31, 2021

14. FOUNDATION AND AUXILIARIES

(a) The Smooth Rock Falls Hospital Foundation is an independent corporation without share capital which has its own Board of Directors. The Foundation holds funds to be used for the benefit of or to enhance or improve the services provided by the Smooth Rock Falls Hospital or other qualified donees. The Foundation is responsible for fundraising activities carried out on behalf of the Hospital and donations or bequests made to the Hospital are recorded as Foundation revenue.

In the course of the year, the Foundation donated an amount of \$188,580 (2020 - \$11,882) for the Hospital to purchase equipment.

(b) The Smooth Rock Falls Hospital Auxiliaries is an independent organism of volunteers which has for a goal to raise money in order to help the patients of the Hospital by contributing with the purchasing of new equipment and new infrastructure. They have their own Board of Directors and volunteers.

In the course of the year, the Auxiliaries donated an amount of \$500 (2019 - \$0).

The financial results of these two entities are not consolidated in the financial statements of the Hospital.

15. RELATED PARTY DISCLOSURES AND INTER-ENTITY TRANSACTIONS

In the normal course of its operations, the hospital has entered in service or purchase agreements with related parties and/or inter-entities.

Transactions carried out by the hospital with related parties and/or inter-entities are carried out at their fair value. Following the analysis of Standard PS2200 and PS3420, no additional disclosure is required.

NOTES TO FINANCIAL STATEMENTS

MARCH 31, 2021

16. COMMITMENTS AND CONTINGENCIES

- (a) The Hospital participates in the Healthcare Insurance Reciprocal of Canada (HIROC). HIROC is a pooling of the public liability insurance risks of its hospital's members. All members of the HIROC pool pay actuarially determined annual premiums. All members are subject to assessment for losses, if any, experienced by the pool for the years in which they were members. No assessments have been made for the year ended March 31, 2021.
- (b) The nature of the Hospital's activities are such that there is usually litigation pending or in progress at any one time. With respect to claims as at March 31, 2021, it is management's position that the Hospital has valid defences and appropriate insurance coverage in place. No provision has been made in these financial statements to reflect any of these claims. Any settlements which may arise will be reflected in the financial statements in the year the amount is determined.
- (c) The Hospital, on behalf of the Cochrane District Detoxification Centre, signed a service agreement with the North Cochrane Addiction Services Inc. The Hospital shall pay North Cochrane Addiction Services Inc. an annual fee of \$103,907 in 12 equal monthly instalments. The agreement is effective as of April 1st, 2021 and is renewable yearly.
- (d) The Hospital, on behalf of the Cochrane District Detoxification Centre, signed a lease agreement with The Corporation of the Town of Smooth Rock Falls. The Hospital shall pay the Town an annual amount of \$53,878 in monthly payments of \$4,490. The agreement is effective as of April 1, 2020 to March 31, 2025. The annual lease will be increased by 2% each year.
- (e) The Hospital signed an equipment leasing agreement with Xerox on November 29, 2019, starting December 15, 2019, for a term of 55 months, payable with quarterly instalments of \$1,075.
- (f) As of March 31, 2021, the Hospital has further commitment of \$181,500 in relation to current capital projects in progress.

17. ECONOMIC DEPENDENCE

The Hospital receives the majority of its revenue through a funding agreement with the North East Local Health Integration Network and the Ministry of Health and Long-term Care. The Hospital's continued operations are dependent on this funding agreement and on satisfying the terms of the agreement.

NOTES TO FINANCIAL STATEMENTS

MARCH 31, 2021

18. FINANCIAL INSTRUMENTS

CREDIT RISK

Credit risk is the risk of financial loss to the Hospital if a debtor fails to make payments of interest and principal when due. The Hospital is exposed to this risk relating to its cash, notes receivable and accounts receivable. The Hospital holds its cash accounts with an Ontario Provincial Agency who are insured by the Deposit Insurance Corporation of Ontario DICO. In the event of default, the Hospital's cash accounts are insured up to \$100,000 (2020 - \$100,000).

The Hospital performs ongoing credit evaluations of their accounts receivable and maintains provisions for potential credit losses to minimize credit risk.

There have been no significant changes from the previous year in the exposure to risk or policies, procedures and methods used to measure the risk.

The Hospital measures its exposure to credit based on how long the amounts have been outstanding. An impairment allowance is set-up based on the Hospital's historical experience regarding collections. The amounts outstanding at year-end are as follows:

	 Current	31-60 days	6	1-90 jours		90+ jours	 Total
Health services Grants and	\$ 75,930	\$ 6,650	\$	254	\$	3,651	\$ 86,485
others	982,720	44,133		42,115		13,033	1,082,001
HST rebate Allowance for doubtful	65,271	-		57.S		- T-1	65,271
accounts	-	(3,595)		(254)	_	(3,651)	(7,500)
	\$ 1,123,921	\$ 47,188	\$	42,115	\$	13,033	\$ 1,226,257

INTEREST RATE RISK

The Hospital is exposed to interest rate cash flow risk to the extent that its bank indebtedness bears interest at a floating interest rate based on the banks prime rate. The Hospital does not use hedges or derivatives to mitigate this risk. However, the Hospital believes that this risk is low and not material.

NOTES TO FINANCIAL STATEMENTS

MARCH 31, 2021

18. FINANCIAL INSTRUMENTS, (CONT'D)

LIQUIDITY RISK

Liquidity risk results from the Hospital's potential inability to meet its obligations associated with the financial liabilities as they become due. For the past years, short-term liquidity has been in a deficit position. The Hospital believes that with the continued financial support of the NE LHIN that its current sources of liquidity are sufficient to cover its currently short-term cash obligations. Management believes that long-term cash obligations will be covered by current funders.

There have been no significant changes from the previous year in the exposure to risk or policies, procedures and methods used to measure the risk.

19. COVID-19 PANDEMIC AND IMPACT ON OPERATIONS

On March 11, 2020, the World Health Organization categorized COVID-19 as a pandemic. The potential economic effects within the Hospital's environment and in the global markets, possible disruption in supply chains, and measures being introduced at various levels of government to curtail the spread of the virus (such as travel restrictions, closures of non-essential municipal and private operations, imposition of quarantines and social distancing) has had an impact on the Hospital's operations. It has been affected by both the reduction of certain revenues and the increase of additional expenses. However, management has been able to curtail the impact through tight controls over the discretionary expenses and the receipt of additional government contributions.

This pandemic is still ongoing and management is unable to further estimate the length and gravity of this outbreak. Management is continually monitoring and assessing new information and recommendations from health and government authorities as it becomes available, and will continue to respond accordingly.

20. SUBSEQUENT EVENT

Subsequent to year end, the Hospital signed a memorandum of understanding regarding a large capital project to upgrade IT equipment, systems and software. The cost will be shared amongst other hospital in the region. The Hospital's estimated share of the cost will be approximately \$1,200,000 over the next two years, excluding operating costs.

SCHEDULES TO FINANCIAL STATEMENTS

YEAR ENDED MARCH 31, 2021

SCHEDULE OF NORTH EAST LHIN				Schedule 1
		2021 Budget (Unaudited)	2021 Actual	2020 Actual
NE LHIN - base allocation NE LHIN/MOH - one-time funding	\$	6,344,517 244,400	\$ 6,479,314 855,077	\$ 6,363,323 265,108
	\$	6,588,917	\$ 7,334,391	\$ 6,628,431
SCHEDULE OF AMORTIZATION OF BUILDINGS	- N	ŒT		Schedule 2
		2021 Budget	2021	2020
		(Unaudited)	 Actual	 Actual
Amortization of deferred capital contributions - buildings Amortization of buildings	\$	(393,317) 421,077	\$ (373,582) 402,147	\$ (387,055) 415,346

SCHEDULES TO FINANCIAL STATEMENTS

YEAR ENDED MARCH 31, 2021

SCHEDULE OF OTHER PROGRAMS				Schedule 3
		2021	22	
		Budget	2021	2020
	((Unaudited)	Actual	Actual
REVENUES				
NE LHIN base allocation	\$	899,185 \$	899,185 \$	899,185
NE LHIN/MOH - other		7,863	171,739	18,031
Amortization of deferred capital contributions - leasehold				
improvements - detox		18,145	18,145	18,145
Other revenue and paymaster		170,000	14,833	152,350
Municipal taxes		2,775	2,775	2,775
		1,097,968	1,106,677	1,090,486
EXPENSES				
Amortization of leasehold improvements - detox		19,090	19,090	19,090
Amortization of major equipment - detox		5,945	5,945	5,945
Employee benefits		185,931	230,512	183,770
Municipal taxes		2,775	2,775	2,775
Salaries and wages		676,604	681,945	681,875
Supplies and other expenses		208,568	167,355	197,976
		1,098,913	1,107,622	1,091,431
EXCESS OF EXPENSES OVER REVENUES	\$	(945)	(945) \$	(945)