Financial Statements

Year ended March 31, 2023

MANAGEMENT RESPONSIBILITY STATEMENT

The accompanying financial statements of the Services De Santé De Chapleau Health Services ("the Hospital") are the responsibility of the Hospital's management and have been prepared in compliance with legislation, and in accordance with Canadian public sector accounting standards for government not-for-profit organizations established by the Public Sector Accounting Board of the Chartered Professional Accountants of Canada. A summary of the significant accounting policies are described in Note 2 to these financial statements. The preparation of the financial statements necessarily involves the use of estimates based on management's judgment, particularly when transactions affecting the current accounting period cannot be finalized with certainty until future periods.

The Hospital's management maintains a system of internal controls designed to provide reasonable assurance that assets are safeguarded, transactions are properly authorized and recorded in compliance with legislative and regulatory requirements and reliable financial information is available on a timely basis for preparation of the financial statements. These systems are monitored and evaluated by management.

The Board of Directors meets with management and the external auditors to review the financial statements and discuss any significant financial reporting or internal control matters prior to their approval of the financial statements.

The financial statements have been audited by Freelandt Caldwell Reilly LLP, independent external auditors appointed by the Hospital. The accompanying Independent Auditor's Report outlines their responsibilities, the scope of their examination and their opinion on the Hospital's financial statements.

Chief Executive Officer

Chair

June 7, 2023

INDEPENDENT AUDITOR'S REPORT

To: The Board of Directors of

Services De Santé De Chapleau Health Services

Opinion

We have audited the financial statements of Services De Santé De Chapleau Health Services, which comprise the statement of financial position as at March 31, 2023, 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 organization as at March 31, 2023, and its results of operations 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 organization 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.

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 organization'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 organization or to cease operations, or has no realistic alternative but to do so.

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

INDEPENDENT AUDITOR'S REPORT, continued

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 organization'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 organization'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 organization 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.

INDEPENDENT AUDITOR'S REPORT, continued

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.



FREELANDT CALDWELL REILLY LLP

Chartered Professional Accountants Licensed Public Accountants

Sudbury, Ontario June 7, 2023

Statement of Financial Position

March 31, 2023 with comparative figures for 2022

	2023	2022
Assets		
Current		
Cash and cash equivalents (note 3)	\$ 1,854,680 \$	2,574,077
Investments (note 4)	88,885	90,908
Accounts receivable (note 5)	785,116	580,328
Inventory	301,167	242,747
Prepaid expenses	80,929	74,298
	3,110,777	3,562,358
Receivable from Chapleau General Hospital Foundation (note 6)	82,276	136,197
Capital assets (note 7)	7,004,400	6,870,988
	\$ 10,197,453 \$	10,569,543
Liabilities and net assets (deficit)		
Current		
Accounts payable and accrued liabilities (note 8)	\$ 3,141,725 \$	2,861,518
Deferred contributions	307,841	307,841
Current portion of long-term debt	58,429	65,736
	3,507,995	3,235,095
Long-term debt (note 9)	282,737	339,967
Liability for post-retirement benefits (note 10)	870,400	836,600
Deferred capital contributions (note 11)	5,482,110	5,826,889
Asset retirement obligation (note 12)	258,181	
	10,401,423	10,238,551
Net assets (deficit)		
Unrestricted net assets (deficit)	(1,126,913)	(307,404)
Equity in capital assets (note 13)	922,943	638,396
	(203,970)	330,992

Contingent liabilities (note 14)

Approved		ne Board of Dir		. 41 . \
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Director _	Du	(secre	tary/Tra	easurer)

Statement of Operations
Year ended March 31, 2023 with comparative figures for 2022

		2023	2022
Revenues			
Chapleau General Hospital (Schedule 1 - Schedule of Operations)	\$	12,579,888 \$	11,918,511
Other Votes (Schedule 2)	Ф	1,393,843	1,433,162
Cedar Grove (Schedule 3)		322,698	322,555
Cedar Grove (Schedule 3)		322,090	322,333
Y		14,296,429	13,674,228
Expenditures			
Chapleau General Hospital (Schedule 1 - Schedule of Operations)		13,164,577	11,463,948
Other Votes (Schedule 2)		1,394,089	1,434,808
Cedar Grove (Schedule 3)		322,698	268,256
		14,881,364	13,167,012
Excess (deficiency) of revenues over expenditures before undernoted			
items		(584,935)	507,216
Interest and other investment income		51,996	7,015
Unrealized gain (loss) in market value of investments		(2,023)	4,751
Excess (deficiency) of revenues over expenditures	\$	(534,962)\$	518,982

Statement of Changes in Net Assets

Year ended March 31, 2023 with comparative figures for 2022

	-	Unrestricted net assets (deficit)	Equity in capital assets	Total 2023	Total 2022
Balance, beginning of year	\$	(307,404)\$	638,396 \$	330,992 \$	(187,990)
Excess (deficiency) of revenues over expenditures		(324,924)	(210,038)	(534,962)	518,982
Invested in capital assets		(494,585)	494,585	i#8	
Balance, end of year	\$	(1,126,913)\$	922,943 \$	(203,970)\$	330,992

Cash Flows Statement

Year ended March 31, 2023 with comparative figures for 2022

1	2023	2022
Cash flows from operating activities		
	\$ (534,962)\$	518,982
Adjustments for non-cash items	, , , ,	•
Amortization of capital assets	746,880	706,214
Amortization of deferred capital contributions	(546,044)	(521,519)
Increase in post-retirement benefits liability	33,800	43,800
Unrealized loss (gain) on market value of investments	2,023	(4,751)
Accretion of asset retirement obligation	9,202	•
	(289,101)	742,726
Change in non-cash working capital items		
Accounts receivable	(204,788)	277,964
Inventory	(58,420)	(26,762)
Prepaid expenses	(6,631)	10,077
Accounts payable and accrued liabilities	280,207	445,980
· ·	(278,733)	1,449,985
Cash flows from financing activities		
Recovery of advances to (advances to) Chapleau General Hospital		
Foundation	53,921	67,571
Principal payments on long-term debt	(64,537)	(100,827)
	(10,616)	(33,256)
	(10,010)	(33,230)
Cash flows from capital activities		
Deferred capital contributions received	201,265	149,075
Purchase of capital assets	(631,313)	(605,471)
	(430,048)	(456,396)
Increase (decrease) in cash	(719,397)	960,333
Cash, beginning of year	2,574,077	1,613,744
Cash, end of year	\$ 1,854,680 \$	2,574,077

Other information:

Cash is comprised of cash and cash equivalents. Refer to notes 2(b) and 3 for additional information.

Notes to the Financial Statements

Year ended March 31, 2023 with comparative figures for 2022

1. Nature of operations

Services De Santé De Chapleau Health Services ("the Hospital") is principally involved in providing health care services to the residents of the Chapleau area. The Hospital is incorporated without share capital under the Corporations Act (Ontario) and is a charitable organization within the meaning of the Income Tax Act (Canada) and accordingly is exempt from income tax.

2. Significant accounting policies

These financial statements are prepared using Canadian public sector accounting standards for government not-for-profit organizations including PS 4200 series of standards as issued by the Public Sector Accounting Board. The significant policies are detailed as follows:

(a) Revenue recognition

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

Under the Health Insurance Act and Regulations thereto, the Hospital is funded primarily by the Province of Ontario in accordance with budget arrangements established by the Ministry of Health ("MOH") and Ontario Health ("OH"). Operating grants are recorded as revenue in the period to which they relate. Grants approved but not received at the end of an accounting period are accrued. Where a portion of a grant relates to a future period, it is deferred and recognized in that subsequent period.

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

Externally restricted contributions are recognized as revenue in the year in which the related expenses are recognized. Contributions restricted for the purchase of capital assets are deferred and amortized into revenue on a straight-line basis, at a rate corresponding with the amortization rate for the related capital assets.

Restricted investment income is recognized as revenue in the year in which the related expenses are recognized. Unrestricted investment income is recognized as revenue when earned.

Revenue from the Provincial insurance plan, preferred accommodation, and marketed services are recognized in the period in which the goods are sold or the service is provided.

(b) Cash and cash equivalents

Cash and cash equivalents include cash and short-term investments with maturities of three months or less from their date of acquisition, which are readily convertible into a known amount of cash, and are subject to an insignificant risk to changes in their fair value.

Notes to the Financial Statements

Year ended March 31, 2023 with comparative figures for 2022

2. Significant accounting policies, continued

(c) Investments

The organization records its investments at fair value. Changes in fair values during the year are included in revenue or expenditures on the statement of operations.

(d) Inventory

Inventory held for consumption is recorded at the lower of cost and replacement cost. Cost is determined using the purchase cost method.

(e) Related entity

The notes to the accompanying financial statements include information of Chapleau General Hospital Foundation. This entity is not consolidated in these statements. The Hospital has an economic interest in the entity.

(f) Capital assets

Purchased capital assets are recorded at cost. Contributed capital assets are recorded at fair value at the date of contribution. When a capital asset no longer contributes to the Hospital's ability to provide services, its carrying amount is written down to its estimated realizable value.

Amortization is provided on assets placed into use on the straight-line basis over their estimated useful lives as follows:

Land improvements5 to 15 yearsBuildings20 to 30 yearsEquipment5 to 15 years

Notes to the Financial Statements

Year ended March 31, 2023 with comparative figures for 2022

2. Significant accounting policies, continued

(g) Pension plans and other retirement benefit plans

The Hospital accrues its obligations for employee benefit plans. The cost of non-pension post-retirement and post-employment benefits earned by employees is actuarially determined using the projected benefit method pro-rated on service and management's best estimate of retirement ages of employees and expected health care costs.

Actuarial gains (losses) on the accrued benefit obligation arise from changes in actuarial assumptions used to determine the accrued benefit obligation. The net accumulated actuarial gains (losses) are amortized over the average remaining service period of active employees. The average remaining service period of the active employees covered by the employee benefit plan is 11 years.

Past service costs arising from plan amendments are recognized immediately in the period the plan amendments occur.

The Hospital is an employer member of the Healthcare of Ontario Pension Plan (The "Plan), which is a multi-employer, defined benefit pension plan. The Hospital has adopted defined contribution plan accounting principles for this Plan because insufficient information is available to apply defined benefit plan accounting principles. The Hospital records as pension expense the current service cost, amortization of past service costs and interest costs related to the future employer contributions to the Plan for the past employee service.

(h) Funding Adjustments

The Hospital receives grants from Ontario Health ("OH") and the Ministry of Health ("MOH") for specific services. Pursuant to the related agreements, if the Hospital does not meet specified levels of activity, OH or MOH are entitled to seek recoveries. Should any amounts become recoverable, the recoveries would be charged to operations in the period in which the recovery is determined payable. Should programs and activities incur a deficit, the Hospital records any recoveries thereon when additional funding is received or receivable if the amounts can be reasonably estimated and collection is reasonably assured.

(i) Contributed services

The Hospital is dependent on the voluntary services of many individuals. Since these services are not normally purchased by the Hospital and because of the difficulty in estimating their fair market value, these services are not recorded in these financial statements.

Notes to the Financial Statements

Year ended March 31, 2023 with comparative figures for 2022

2. Significant accounting policies, continued

(j) Financial instruments

(i) Measurement of financial instruments

The organization initially measures its financial assets and financial liabilities at fair value adjusted by, in the case of a financial instrument that will not be measured subsequently at fair value, the amount of transaction costs directly attributable to the instrument. Amounts due to and from related parties are measured at the exchange amount, being the amount agreed upon by the related parties.

The Hospital subsequently measures its financial assets and financial liabilities at amortized cost using the effective interest rate method, except for investments which are subsequently measured at fair value. Changes in fair value are recognized in the statement of operations in the period they occur.

Financial assets measured at amortized cost include cash and cash equivalents and accounts receivable.

Financial liabilities measured at amortized cost include accounts payable and accrued liabilities and long-term debt.

Financial assets measured at fair value include investments.

(ii) Impairment

Financial assets measured at other than fair value cost are tested for impairment when there are indicators of possible impairment. When a significant adverse change has occurred during the period in the expected timing or amount of future cash flows from the financial asset or group of assets, a write-down is recognized in the statement of operations. The write down reflects the difference between the carrying amount and the higher of:

- the present value of the cash flows expected to be generated by the asset or group of assets;
- the amount that could be realized by selling the assets or group of assets:
- the net realizable value of any collateral held to secure repayment of the assets or group of assets.

When events occurring after the impairment confirm that a reversal is necessary, the reversal is recognized in the statement of operations, in the period it is identified and measurable, to the amount of the previously recognized impairment.

Notes to the Financial Statements

Year ended March 31, 2023 with comparative figures for 2022

2. Significant accounting policies, continued

(k) Use of estimates

The preparation of financial statements in accordance with Canadian public sector accounting standards for government not-for-profit organizations requires management to make estimates that affect the reported amounts of assets and liabilities at the date of the financial statements, and the reported amounts of revenues and expenditures during the reporting period. Actual results could differ from management's best estimates as additional information becomes available in the future. Estimates used in the preparation of the accompanying financial statements include estimated allowances for uncollectible accounts receivable, realizable value of inventory, estimated useful lives of capital assets, certain accrued liabilities, deferred revenue, asset retirement obligation and post-employment benefits liability.

(1) Asset retirement obligation ("ARO")

The organization recognizes an estimate of the liability associated with an ARO in the financial statements at the time the liability is incurred. The estimated net present value of the ARO is recorded as a liability, with a corresponding increase in the carrying amount of the related assets. The capitalized amount is amortized over the estimated life of the assets. The liability amount is increased each reporting period due to the passage of time and the amount of accretion is recognized in profit or loss for the period. The ARO can also increase or decrease due to changes in the original estimated undiscounted costs, or changes in the timing of these expenditures. Actual costs incurred upon settlement of the ARO are charged against the ARO to the extent of the liability recorded.

3. Cash and cash equivalents

Included in cash and cash equivalents is cash and guaranteed investment certificates.

4. Investments

Investments are recorded at market value and consist of a cash balance with a market and cost value of \$9,698, and an investment balance with a market value of \$79,187 (cost value of - \$73,357).

5. Accounts receivable

	2023	2022
Grants and other Patients, tenants and service recipients HST rebates	\$ 424,414 \$ 235,670 125,032	420,873 88,837 70,618
	\$ 785,116 \$	580,328

Notes to the Financial Statements

Year ended March 31, 2023 with comparative figures for 2022

6. Receivable from Chapleau General Hospital Foundation

The advances to Chapleau General Hospital Foundation, a related entity (notes 2(e) and 18), are unsecured, non-interest bearing and without fixed terms of repayment.

7. Capital assets

***************************************	 		2023	2022
	Cost	Accumulated amortization	Net	Net
Land Land improvements Buildings	\$ 278,804 17,729,062	\$ 264,526 12,385,628	\$ 82,133 \$ 14,278 5,343,434	82,133 21,418 5,607,540
Equipment	8,335,662	6,771,107	1,564,555	1,159,897
(6	\$ 26,425,661	\$ 19,421,261	\$ 7,004,400 \$	6,870,988

Cost and accumulated amortization at March 31, 2022 amounted to \$25,545,369 and \$18,674,381 respectively.

8. Accounts payable and accrued liabilities

		2023	2022
	dh		
General accounts payable and other	\$	1,303,595 \$	1,129,748
Ontario Health/ Ministry of Health		930,601	1,045,951
Payroll related		708,413	685,819
Payroll related - Bill 124 wage increase		199,116	<u> </u>
	\$	3,141,725 \$	2,861,518

Included in accounts payable and accrued liabilities are government remittances payable of \$52,165 (2022 - \$102,959).

On April 1, 2023 an arbitration decision was released awarding additional wage increases for ONA nurses and health-care professionals working in Ontario Hospitals. This decision came after Bill 124 was struck down as a violation of the right to free collective bargaining. Given the arbitration decision, the Hospital has made an accrual to account for back pay for all Union employees, including those in ONA. This accrual represents the following wage increases which were awarded in the arbitration decision, in addition to the original 1% increase passed under Bill 124:

Effective April 1, 2020 - an additional 0.75% (total 1.75%) Effective April 1, 2021 - an additional 1.0% (total 2.0%)

Services De Santé De Chapleau Health Services Notes to the Financial Statements Year ended March 31, 2023 with comparative figures for 2022

9. **Long-term debt**

	2023	2022
4.98% RBC mortgage, payable \$3,165 monthly including interest, secured by the Cedar Grove apartments located at 101 Pine Street, maturing June 2032.	279,913 \$	303,749
3.58% RBC mortgage, payable \$2,242 monthly including interest, secured by the Cedar Grove apartments located at 101 Pine Street, maturing November 2024.	45,562	70,354
1.99% Ford Credit vehicle loan, payable \$698 monthly including interest, maturing February 2025, secured by specified equipment with a net book value of \$13,161.	15,691	23,671
4.7% GE equipment loan, payable \$3,590 monthly including interest, repaid during the year.	360	6,281
4.01% IBM software loan, payable \$278 monthly including interest, repaid during the year.		1,648
Less current portion	341,166 58,429	405,703 65,736
\$	282,737 \$	339,967
Estimated principal repayments are as follows: 2024 2025 2026 2027 2028	58,429 53,268 27,165 28,549 30,003	
Subsequent years	143,752	
\$	341,166	

Notes to the Financial Statements

Year ended March 31, 2023 with comparative figures for 2022

10. Liability for post-retirement benefits

The Hospital provides for the reimbursement of dental and extended health care expenses to retired employees provided that certain specified conditions are met. An actuarial calculation of the future liabilities thereof has been made and forms the basis for the liability reported in these financial statements.

The most recent valuation of the employee future benefits was completed as at March 31, 2023.

	2023	2022
Balance, beginning of year Add: Benefit costs Less: Benefit contributions	\$ 836,600 \$ 70,900 (37,100)	792,800 73,600 (29,800)
	\$ 870,400 \$	836,600

Similar to most post-employment benefit plants (other than pension) in Canada, the Hospital's plan is not pre-funded, resulting in a plan deficit equal to the accrued benefit obligation.

The main assumptions employed for the valuations are as follows:

Interest (discount) rate:

The obligation as at March 31, 2023 of the present value of future liabilities and the expense for the period ended March 31, 2023 was determined using an annual discount rate of 3.89% (2022 - 3.21%). This corresponds to the provincial cost of borrowing rate recommended by the MOHLTC.

Dental cost trend rates: 5.00% per annum (2022 - 3.00%).

Extended Health Care trend rates: 5.60% per annum (2022 - 5.37%).

Notes to the Financial Statements

Year ended March 31, 2023 with comparative figures for 2022

11. **Deferred capital contributions**

Deferred capital contributions represent the unamortized and unspent balances of donations and grants received for capital asset acquisitions. Details of the continuity of these funds are as follows:

	2023	2022
Balance, beginning of year Additional capital contributions received in the year Less amounts amortized to revenue	\$ 5,826,889 \$ 201,265 (546,044)	6,199,333 149,075 (521,519)
Balance, end of year	\$ 5,482,110 \$	5,826,889

In the current year, \$139,158 of HIRF Funding was not spent at March 31, 2023. This funding was not spent due to COVID-19. The funding was approved by the Ministry of Health to be carried over to 2023/2024.

12. Asset retirement obligation

The Hospital's asset retirement obligation represents management's best estimate of the present value of costs that are expected to be incurred for asbestos removal from the buildings located at 6 Broomhead Road, Chapleau and at 101 Pine Street, Chapleau. At March 31, 2023 the estimated discounted asset retirement obligation is \$236,982 at 6 Broomhead Road and \$21,199 at 101 Pine Street for a total asset retirement obligation obligation of \$258,181. There was accretion of \$9,202 for 6 Broomhead Road in fiscal 2023.

The asset retirement obligation for the building located at 6 Broomhead Road was calculated using a model provided by the Ministry of Health whereby the square footage was multiplied by a rate provided by the MOH to remove the asbestos from the building. The obligation related to the building at 101 Pine Street was estimated by a professional engineering firm.

The estimated future value is \$412,592 at March 31, 2037 using a discount rate of 4.04% over the estimated remaining useful life of the building of 14 years as estimated by management. The asset relating to the obligation is amortized over the remaining life of the building. There was amortization of \$15,185 expensed in fiscal 2023. It is management's intention to remove the asbestos located in the building at 101 Pine Street, Chapleau in the next fiscal year.

Notes to the Financial Statements

Year ended March 31, 2023 with comparative figures for 2022

13. Equity in capital assets

		2023	2022
Capital assets, net book value	\$	7,004,400 \$	6,870,988
Amounts financed by long-term debt	Ψ	(341,166)	(405,703)
Unamortized deferred capital contributions		(5,482,110)	(5,826,889)
Asset retirement obligation		(258,181)	=
Ending equity in capital assets	\$	922,943 \$	638,396
The change in equity in capital assets is calculated as follows:		2023	2022
		2023	2022
Purchase of capital assets	\$	631,313 \$	605,471
Amounts of capital contributions received		(201,265)	(149,075)
Amounts funded by long-term debt		-	(€
Principal payments on long-term debt		64,537	100,827
Amortization of deferred capital contributions		546,044	521,519
Amortization of capital assets		(746,880)	(706,214)
Accretion of asset retirement obligation		(9,202)	-
	\$	284.547 \$	372.528

14. Contingent liabilities

The nature of the Hospital's activities is such that there may be litigation pending or in prospect at any time. With respect to claims at March 31, 2023, management believes the Hospital has valid defences and appropriate insurance in place. In the event any claims are successful, management believes that such claims are not expected to have a material effect on the Hospital's financial position.

15. Credit facilities

The Hospital has available to it, an RBC demand loan to a maximum of \$200,000 with interest payable at prime plus 0.4%. As at March 31, 2023 there is a balance of \$Nil owing on this loan (2022 - \$Nil).

Notes to the Financial Statements

Year ended March 31, 2023 with comparative figures for 2022

16. **Pension plan**

Substantially all of the employees of the Hospital are members of the Healthcare 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. Plan members will receive benefits based on the length of service and on the average of annualized earnings during the five consecutive years prior to retirement, termination or death that provide the highest earnings.

Pension assets consist of investment grade securities. Market and credit risk on these securities are managed by the Plan by placing plan assets in trust and through the Plan investment policy.

Pension expense is based on Plan management's best estimates of the amount, together with the amounts contributed by employees, required to provide a high level of assurance that benefits will be fully represented by fund assets at retirement, as provided by the Plan. The funding objective is for employer contributions to the Plan to remain a constant percentage of employees' contributions.

Variances between actuarial funding estimates and actual experience may be material and any differences are generally to be funded by the participating members. The most recent actuarial valuation of the plan indicates the plan is fully funded. Contributions to the plan made during the year by the Hospital on behalf of its employees amounted to \$466,400 (2022 - \$458,214) and are included in the statement of operations.

At December 31, 2022, the HOOPP had total assets of \$185.1 billion (2021 - \$217.2 billion) and an accumulated surplus of \$11.0 billion (2021 - \$28.5 billion).

17. Comparative amounts

Certain 2022 comparative amounts have been reclassified to conform with the financial statement presentation adopted for 2023. The changes do not affect previously excess of revenues over expenditures or net assets.

Notes to the Financial Statements

Year ended March 31, 2023 with comparative figures for 2022

18. Related entity

The Chapleau General Hospital Foundation was created with the purpose of promoting and participating in fundraising initiatives for programs and capital projects. Pertinent financial information of the Foundation is as follows:

		2023	2022
Assets	\$	1,211,363 \$	1,314,267
	61		
Liabilities	\$	82,277 \$	136,197
Fund balance		1,129,086	1,178,070
	\$	1,211,363 \$	1,314,267
Results of Operations:			
		2023	2022
Revenues:			
Donations	\$	92,942 \$	54,214
Investment income		32,792	31,801
Fundraising		24,148	19,967
Total revenue	\$	149,882 \$	105,982
Expenses:			
Other expenses	\$	45,736 \$	54,016
Charitable contributions		70,267	42,110
Total expenses	\$	116,003 \$	96,126
Other income (expense):			
Gain on sale of investments	\$	9,645 \$	100,074
Unrealized gain (loss) on market value of investments		(92,508)	(83,274)
	\$	(82,863)\$	16,800
Excess of revenue over expenses	\$	(48,984)\$	26,656

All charitable contributions were directed to the Hospital, of which the Chapleau General Hospital Foundation approved contributions of \$70,267 (2022 - \$42,110) to be used for capital acquisitions.

Notes to the Financial Statements

Year ended March 31, 2023 with comparative figures for 2022

19. Financial instruments

Transactions in financial instruments may result in an entity assuming or transferring financial risks to or from another party. The organization is exposed to the following risks associated with financial instruments and transactions it is a party to:

(a) Credit risk

Credit risk is the risk that one party to a financial transaction will fail to discharge a financial obligation and cause another party to incur a financial loss. The organization is exposed to credit risk associated with its cash and cash equivalents, investments, accounts receivable, and receivable from Chapleau General Hospital Foundation.

The organization minimizes risk associated with cash and cash equivalents, and investments by holding these financial assets with large reputable financial institutions with high credit ratings.

The organization has credit risk associated with its accounts receivable balances of \$785,116 (2022 - \$580,328). The organization manages its exposure to this credit risk through managements on-going monitoring of accounts receivable balances and collections including performing credit valuations on a regular basis. An allowance for bad debts is recorded when applicable.

Refer to note 2(j)(ii) regarding the organizations policies for assessing impairment of financial assets measured at other than fair value, which includes its receivable from Chapleau General Hospital Foundation.

(b) Liquidity risk

Liquidity risk is the risk that the organization cannot repay its obligations when they become due to its creditors. The organization has liquidity risk exposure associated with its accounts payable and accrued liabilities of \$3,141,725 (2022 - \$2,861,518). The organization reduces its exposure to liquidity risk by ensuring that it documents when authorized payments become due, and through extensive budgeting and monitoring cash requirements to ensure adequate cash resources or arrangements exist repay creditors including long-term debt interest and principal payments as those liabilities become due.

20. Subsequent event

Subsequent to the year end, the organization was amalgamated with Family Health Team and continues to operate under the legal name Services De Santé De Chapleau Health Services. This transaction has no impact on the financial statements as at March 31, 2023.

Services De Santé De Chapleau Health Services Chapleau General Hospital Operations - Schedule Of Operations Year ended March 31, 2023 with comparative figures for 2022

	2023	2022
Revenues		
Ministry of Health	\$ 9,476,823 \$	9,239,588
Physician funding	885,155	879,229
Recoveries and miscellaneous	829,452	476,471
Patient accommodation	699,950	680,550
Amortization of deferred capital contributions	545,296	520,771
Patient services	143,212	121,902
	12,579,888	11,918,511
Expenditures		
Salaries and wages	6,665,175	5,636,056
Supplies and other (including amortization of \$308	-,,	-,,
(2022 - \$8,847))	2,969,983	2,535,211
Employee benefits	1,686,968	1,516,396
Physician remuneration	1,056,316	1,038,839
Amortization of capital assets	720,111	671,893
Employee future benefits	41,703	49,416
Interest and bank charges	15,119	16,137
Accretion of asset retirement obligation	 9,202	, E
	13,164,577	11,463,948
Excess (deficiency) of revenues over expenditures	\$ (584,689)\$	454,563

Services De Santé De Chapleau Health Services Other Votes - Schedule Of Operations Year ended March 31, 2023 with comparative figures for 2022

	2023	2022
Revenues		
Turning Point Mental Health	\$ 379,155 \$	363,503
Home Support Program	295,382	280,447
Assisted Living	231,018	280,520
Nursing Station	192,163	203,890
Nurse Practitioner	174,981	186,576
Medical Clinic	57,363	51,763
Turning Point Addictions	35,515	35,515
Foundation salaries and benefits	26,016	28,698
Municipal taxes	2,250	2,250
	1,393,843	1,433,162
Expenditures		
Turning Point Mental Health	379,156	363,503
Home Support Program	295,382	280,44
Assisted Living	231,018	280,520
Nursing Station (including amortization of \$2,861 (2022 - \$2,861))	192,163	203,890
Nurse Practitioner	174,981	186,570
Medical Clinic (including amortization of \$3,446 (2022 - \$3,446))	57,608	53,224
Turning Point Addictions	35,515	35,513
Foundation salaries and benefits	26,016	28,698
Municipal taxes	2,250	2,250
Developmental Services	94	18:
	1,394,089	1,434,808
Deficiency of revenues over expenditures	\$ (246)\$	(1,646

Services De Santé De Chapleau Health Services Cedar Grove - Schedule Of Operations Year ended March 31, 2023 with comparative figures for 2022

	2023	2022
Revenues		
Rent and accommodation charges	\$ 226,317 \$	215,876
Elderly Person Centre	75,985	81,828
Provincial subsidy - Apartments	20,326	23,870
Other income	70	981
	322,698	322,555
Expenditures		
Building operations	121,298	100,264
General and administrative	105,261	66,997
Elderly Person Centre	75,985	81,828
Amortization - Buildings	20,154	19,167
	322,698	268,256
Excess (deficiency) of revenues over expenditures	\$ - \$	54,299