Lake of the Woods District Hospital Financial Statements March 31, 2017



Lake of The Woods District Hospital Contents For the year ended March 31, 2017

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Management's Responsibility

To the Members of Lake of the Woods District Hospital:

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 judgment 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 composed primarily of Directors who are neither management nor employees of the Organization. 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 fulfils these responsibilities by reviewing the financial information prepared by management and discussing relevant matters with management. The Board is also responsible for recommending the appointment of the Organization'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 8, 2017

President and Chief Executive Officer

Vice President Corporate Services and Chief Finance Officer

Independent Auditors' Report

To the Members and Board of Directors of Lake of the Woods District Hospital:

We have audited the accompanying financial statements of Lake of the Woods District Hospital, which comprise the statement of financial position as at March 31, 2017 and the statements of operations, changes in net assets and cash flows for the year ended March 31, 2017 and a summary of significant accounting policies and other explanatory information.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these 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.

Auditors' Responsibility

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with Canadian generally accepted auditing standards. Those standards require that we comply with ethical requirements and plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditors' judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements 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 entity's internal control. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the financial statements present fairly, in all material respects, the financial position of Lake of the Woods District Hospital as at March 31, 2017 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.

Other Matter

Our audit was conducted for the purpose of forming an opinion on the financial statements as a whole. The supplemental information presented in Schedules 1-4 is presented for the purpose of additional analysis and is not a required part of the basic financial statements. Such supplemental information has been subjected to auditing procedures applied in the audit of the basic financial statements and, in our opinion, is fairly stated, in all material respects, in relation to the basic financial statements taken as a whole.

Kenora, Ontario June 8, 2017 MUP LLP
Chartered Professional Accountants
Licensed Public Accountants



Lake of the Woods District Hospital **Statement of Financial Position**

As at March 31, 2017

	2017	2016
Current assets		
Cash (Note 1)	\$ 5,127,710	\$ 3,942,811
Short-term investments (Note 2)	916,468	2,645,545
Accounts receivable (Note 3)	2,126,909	1,890,513
Inventory	579,243	612,082
Prepaid expenses	499,981	511,222
	9,250,311	9,602,173
Capital assets (Note 4)	19,104,676	18,510,003
	\$ 28,354,987	\$ 28,112,176
Current liabilities		
Accounts payable (Note 5)	\$ 6,829,466	\$ 6,695,967
Deferred contributions – donations and grants (Note 7)	1,178,469	511,734
g. a.m. (1000 /)	8,007,935	7,207,701
Accrued employee future benefit obligation (Note 6)	1,620,900	1,567,000
		1,007,000
	9,628,835	8,774,701
Deferred contributions		
Unamortized capital contributions (Note 7)	13,491,592	13,760,449
Commitments and Continuous is a (Alata C)	23,120,427	22,535,150
Commitments and Contingencies (Note 9)		
Net assets (debt)		
Invested in capital assets (Note 8)	5,613,084	4,749,554
Internally restricted for capital	370,856	1,326,535
Unrestricted net assets (deficit)	(749,380)	(499,063)
		(,300)
	5,234,560	5,577,026
	\$ 28,354,987	\$ 28,112,176

Approved on behalf of the Board





Lake of the Woods District Hospital Statement of Operations For the year ended March 31, 2017

	Budget 2016/17	2017	2016
	(Unaudited)	2017	2010
Revenue (Schedule 1)			
Ministry of Health and Long Term Care/LHIN/CCO	\$ 32,297,062	\$ 33,187,247	\$ 32,515,260
Patient revenue from other payors	2,779,000	3,600,665	2,551,461
Differential and co-payment revenue	265,000	342,191	305,396
Other revenue and recoveries	3,100,021	3,053,958	3,111,058
Amortization of grants/donations equipment	925,000	828,745	745,141
Total Hospital Operating Revenue	39,366,083	41,012,806	39,228,316
Other programs, net of amounts repayable to funding	20,000,000	41,012,000	33,220,310
agencies (Schedules 3 and 4)	7,200,000	7,172,145	7,131,707
	46,566,083	48,184,951	46,360,023
Expenses			
Salaries, wages and employee benefits (Schedule 2)	26,052,612	25,518,940	25,746,250
Medical staff remuneration	5,228,700	6,305,404	5,018,275
Supplies and other expenses (Schedule 2)	5,638,723	5,972,197	5,515,085
Medical and surgical supplies (Schedule 2)	1,128,900	1,110,526	1,157,169
Drugs	1,414,155	1,189,567	1,358,780
Amortization of equipment	1,030,000	861,534	895,225
Bad Debts	26,250	27,707	28,489
Total Hospital Operating Expenses	40,519,340	40,985,875	39,719,273
Other programs (Schedules 3 and 4)	7,200,000	7,172,146	7,131,707
,	47,719,340	48,158,021	46,850,980
Surplus (deficit) before amorting the model of the contraction of the			
Surplus (deficit) before amortization related to buildings	(1,153,257)	26,930	(490,957)
Amortization of buildings	(1,150,000)	(1,235,220)	(1 107 005)
Amortization of deferred contributions related to buildings	890,000	865,824	(1,197,995) 847,623
a service service to delicate to buildings	(260,000)	(369,396)	(350,372)
		(,)	(000,072)
Surplus (deficit) for the year	\$ (1,413,257)	\$ (342,466)	\$ (841,329)

Lake of the Woods District Hospital Statement of Changes in Net Assets For the year ended March 31, 2017

				2017	2016
	Invested in Capital Assets	Internally Restricted For Capital	Unrestricted	Total	Total
Balance, beginning of year	\$ 4,749,554	\$ 1,326,535	\$ (499,063)	\$ 5,577,026	\$ 6,418,355
Surplus (deficit) for the year	-	-	(342,466)	(342,466)	(841,329)
Amortization of capital assets/deferred contributions related to capital assets (Note 8)	(387,004)	-	387,004	-	-
Interfund transfer (Note 8)	955,679	(955,679)	-	-	-
Net change in investment in capital assets (Note 8)	294,855		(294,855)	-	
Balance, end of year	\$ 5,613,084	\$ 370,856	\$ (749,380)	\$ 5,234,560	\$ 5,577,026



Lake of the Woods District Hospital Statement of Cash Flows

For the year ended March 31, 2017

	2017	2016
Cash flows from operations		
Surplus (deficit) for the year Adjustments for:	\$ (342,466)	\$ (841,329)
Amortization of capital assets	2,096,754	2,093,220
Amortization of deferred contributions related to capital assets	(1,709,750)	(1,606,473)
Increase in long term liability related to employee future benefits	53,900	73,600
	98,438	(280,982)
Change in non-cash operating working capital balances	(58,817)	(273,746)
	39,621	(554,728)
Cash flows from financing activities		
Increase in deferred contributions related to capital assets	1,440,736	2,738,257
Increase (decrease) in other deferred contributions	666,735	333
Purchase of capital assets	(2,691,270)	(1,452,014)
	(583,799)	1,286,576
Cash flows from investing activities		
Decrease in short-term investments	467,514	817,923
Net increase (decrease) in cash and equivalents	(76,664)	1,549,771
Cash and equivalents, beginning of year	6,053,605	4,503,834
Cash and equivalents, end of year	\$ 5,976,941	\$ 6,053,605
Cash and equivalents are comprised of:		
Cash	\$ 5,127,710	\$ 3,942,811
Short-term investments (Note 2)	\$ 5,127,710 849,231	2,110,794
Onor-term investments (Note 2)		
	\$ 5,976,941	\$ 6,053,605

For the year ended March 31, 2017

Operations

Lake of the Woods District Hospital ("the Hospital") was incorporated under a Private Bill (Lake of the Woods District Hospitals Act – Bill PR50) in 1968. The Hospital is principally involved in providing health care services to the City of Kenora. The Hospital is a registered charity under the Income Tax Act and accordingly is exempt from income taxes.

The financial statements have been prepared by management in accordance with Canadian public sector accounting standards, which sets out generally accepted accounting principles for government not-for-profit organizations. The Hospital has chosen to use the standards for not-for-profit organizations that include Sections PS 4200 to PS 4270. The significant accounting policies are summarized below.

These financial statements reflect the assets, liabilities and operations of the Hospital. They do not include the assets, liabilities or operations of the Lake of the Woods District Hospital Foundation or the Lake of the Woods District Hospital Auxiliary, which, although associated with the Hospital, are separately managed, and report to separate Boards of Directors.

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

Ministry of Health and Long Term Care:

- Problem Gambling
- Adult Community Mental Health
- Lake of the Woods Addictions
- Remedial Measures
- CMH&A Admin
- Central Ambulance Communication Centre
- Ambulance Regional Training, Kenora

The operating results of these programs are recorded in Schedules 3 and 4 to the financial statements and their assets and liabilities are reported on the statement of financial position of the Hospital. 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 Ministries. Adjustment settlements by the Ministries are recorded when settled.



Revenue Recognition

The Hospital follows the deferral method of accounting for contributions.

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 and Long Term Care. 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.

The Hospital receives funding for operations for certain programs from the Ministry of Health and Long Term Care of Ontario. The final amount of operating revenue cannot be determined until the Ministry has reviewed the Hospital's financial and statistical returns for the year. Any adjustments arising from the Ministry's review is recorded in the period in which the adjustment is made.

Unrestricted contributions are recognized as revenue when received or receivable if the amount to be received 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 incurred. 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.

Revenue from the Provincial Insurance Plan and marketed services is recognized when the goods are sold or when the service is provided.

Contributed Services

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

Cash and cash equivalents

Cash and cash equivalents include cash and short-term investments with maturities of three months or less.

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 weighted average cost and net realizable value, less a provision for any obsolete or unusable inventory on hand.



For the year ended March 31, 2017

Capital Assets

Purchased capital assets are initially 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 residual value.

Minor equipment replacements are expensed in the year of replacement. Construction in progress is stated at cost, which comprises all direct and indirect costs of construction. Construction in progress is not amortized until the project is complete and the facilities come into use.

Capital assets are amortized on a straight line basis over the following periods of time:

Buildings and building service equipment - 40 to 50 years

Computer equipment

- 5 years

Furniture and equipment

- 5 to 20 years

Parking lot equipment

- 3 years

Compensated Absences

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

Employee Benefit Plans

The Hospital 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 included in the cost of the plan for the year.

The Hospital is an employer member of the Hospitals 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 future employer contributions to the Plan for past employee service.



For the year ended March 31, 2017

Use of Estimates

The preparation of financial statements is in conformity with Canadian public sector accounting standards which 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. These estimates and assumptions are reviewed periodically and, as adjustments become necessary, they are reported in the period in which they become known.

Accounts receivable are stated after evaluation as to their collectability and an appropriate allowance for doubtful accounts is provided where considered necessary. Provisions are made for slow moving and obsolete inventory. Amortization 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. Accrued employee future benefit obligations are determined based on actuarial valuation.

Financial Instruments

The Hospital recognizes its financial instruments when the Hospital becomes party to the contractual provisions of the financial instrument. All financial instruments are initially recorded at their fair value, including financial assets and liabilities originated and issued in a related party transaction with management.

At initial recognition, the Hospital may irrevocably elect to subsequently measure any financial instrument at fair value. The Hospital has not made such an election during the year.

The Hospital subsequently measures investments in equity instruments quoted in an active market and all derivative instruments, except those designated in a qualifying hedging relationship or that are linked to, and must be settled by delivery of, unquoted equity instruments of another entity, at fair value. Fair value is determined by published price quotations. Investments in equity instruments not quoted in an active market and derivatives that are linked to, and must be settled by delivery of, unquoted equity instruments of another entity, are subsequently measured at cost less impairment. With the exception of financial liabilities indexed to a measure of the Hospital's performance or value of its equity and those instruments designated at fair value, all other financial assets and liabilities are subsequently measured at amortized cost.

Transaction costs and financing fees directly attributable to the origination, acquisition, issuance or assumption of financial instruments subsequently measured at fair value are immediately recognized in the surplus/deficit for the current period. Conversely, transaction costs and financing fees are added to the carrying amount for those financial instruments subsequently measured at amortized cost or cost.



1. Cash

The Hospital's bank accounts are held at chartered banks. The accounts earn interest at prime less 2% (0.59% at March 31, 2017). The amount held in the ER Group bank account (\$88,204, 2016 - \$77,100) is used exclusively to fund the payment of the ER Physicians and associated administrative costs. The amount held in the Psychiatry bank account (\$155,195, 2016 - \$115,490) is used exclusively to fund the payment of the Psychiatrists and associated administrative costs.

2. Short-term Investments

Short-term investments	Market Value	2017	2016
Copperfin GIC – 1.85% maturing April 23, 2017, redeemable Copperfin GIC – 1.05% maturing May 5, 2017, redeemable Copperfin GIC – 2.05% matured April 20, 2016, redeemable Copperfin GIC – 1.25% matured May 1, 2016, redeemable	\$ 303,620 545,611 -	\$ 303,620 545,611 -	\$ 297,504 - 1,063,290 750,000
Copperiin Gic – 1.25% matured May 1, 2010, redeemable	849,231	849,231	2,110,794
CIBC Flexible – 0.95% maturing July 11, 2017 Copperfin GIC – 1.85% matured January 5, 2017, redeemable	67,237 -	67,237 -	- 534,751
	67,237	67,237	534,751
	\$ 916,468	\$ 916,468	\$ 2,645,545

Fair values for the above investments are considered to approximate market values.

3. Accounts Receivable

	2017	2016
Ministry of Health and Long Term Care Insurers and patients Other	\$ 757,919 656,492 727,692	\$ 620,925 471,531 817,779
Allows and for the left Lance of	2,142,103	1,910,235
Allowance for doubtful accounts	(15,194) \$ 2,126,909	(19,722) \$ 1,890,513

The carrying value of accounts receivable approximates fair value because of the short maturity of these instruments and because they are subject to normal credit terms.



4.	Capital Assets			
4.	Capital Assets			2017
			Accumulated	Net book
		Cost	Amortization	Value
	Land	\$ 212,775	\$ -	\$ 212,775
	Buildings and building service equipment	31,467,883	18,265,173	13,202,710
	Computer equipment	3,181,650	2,781,208	400,442
	Furniture and equipment	17,526,768	14,414,099	3,112,669
	Parking lot equipment	336,063	336,063	-
		E2 725 420	25 706 542	46 020 E0E
	Construction in present	52,725,138	35,796,543	16,928,595
	Construction in process	2,176,081		2,176,081
		\$ 54,901,219	\$ 35,796,543	\$ 19,104,676
				2016
			Accumulated	Net book
		Cost	Amortization	Value
	Land	\$ 212,775	\$ -	\$ 212,775
	Buildings and building service equipment	31,223,681	17,029,852	14,193,829
	Computer equipment	3,486,513	3,032,879	453,634
	Furniture and equipment	16,637,514	13,734,840	2,902,674
	Parking lot equipment	336,063	336,063	· · ·
		51,896,546	34,133,634	17,762,912
	Construction in process	747,091	_	747,091
	,	\$ 52,643,637	\$ 34,133,634	\$ 18,510,003
		<u> </u>	V 0.1,100,001	¥ 10,010,000
5.	Accounts Payable			
	,		2017	2016
	Vacation benefits payable		\$ 1,719,687	\$ 1,791,800
	Accrued salaries		523,047	1,292,430
	Trade accounts payable		2,303,838	1,411,678
	Due to Ministry of Health and Long Term Care		773,227	863,009
	Other payables and accruals		617,410	469,683
	Payroll remittances		886,931	861,126
	Sick leave benefits payable		5,326	6,241
	Sisting payable		A 0000 400	0,241



\$ 6,695,967

\$ 6,829,466

6. Accrued Employee Future Benefit Obligation

The Hospital provides extended health care, dental and life insurance benefits to all unionized, full time employees who enrol in the benefit plans and extends this coverage to the post-retirement period. The Hospital accrues its obligations under these plans as the benefits are earned. The most recent actuarial valuation of employee future benefit was completed as at April 27, 2017.

At March 31, 2017, the Hospital's accrued benefit obligation relating to post-retirement benefit plans was \$1,620,900 (2016 - \$1,567,000). Similar to most post-employment benefit plans (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 significant actuarial assumptions adopted in estimating the Hospital's accrued benefit obligations were as follows:

Discount Rate for calculation of Net Benefit Costs (during Fiscal 2017)		3.76% per annum
Discount Rate to determine Accrued Benefit Obligation for disclosure (at end of Fiscal 2017)		3.56% per annum
Dental Cost Trend Rates		4.0% per annum
Extended Health Care Trend Rates		8.0% in 2017; decreasing by 0.25% per annum to an ultimate rate of 5.0% per year
Retirement age		Age 59 or immediate if older than 59
Full eligibility age Members electing coverage at retirement		Age 55
CUPE & Non-Union Full Time ONA Full Time		80% 65%
	2017	2016
Retirement and Other Employee Future Benefit	Total Employee	Total Employee
Liabilities	Future Benefits	Future Benefits
Accrued benefit liability at beginning of period Expense for the year Funding contributions (total)	\$ 1,567,000 198,200 (144,300)	\$ 1,493,400 203,400 (129,800)
	\$ 1,620,900	\$ 1,567,000



6. Accrued Employee Future Benefit Obligation (Continued from previous page)

Retirement and Other Employee Future Benefit Expenses	2017 Total Employee Future Benefits		2016 I Employee ire Benefits
Current year benefit cost Interest on accrued benefit obligation Recognized actuarial gains	\$	96,200 69,700 32,300	\$ 100,300 63,300 39,800
	\$	198,200	\$ 203,400

Included in salaries, wages and employee benefits in the statement of operations is an expense of \$53,308 (2016 - \$73,600) regarding employee future benefits.

7. Deferred Contributions

a) Deferred Contributions - Donations and Grants

Deferred contributions represent funding received for programs which will be utilized for future years.

2017		2016
\$ 1,178,469	\$	511,734

b) Deferred Contributions - Unamortized Capital Contributions

Deferred capital contributions related to capital assets 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.

·	 2017	2016
Balance, beginning of year	\$ 13,760,449	\$ 12,628,665
Additional contributions received	1,440,736	2,738,257
Less: amounts amortized to revenue	(1,694,569)	(1,592,764)
Less: amounts amortized to CMH&A other revenue	(4,557)	(4,152)
Less: amounts amortized to RTC Kenora other revenue	(5,423)	(4,513)
Less: amounts amortized to CACC other revenue	(5,044)	(5,044)
	\$ 13,491,592	\$ 13,760,449



8. Net Assets Invested in Capital Assets

a) Investment in capital assets is calculated as follows:			
	2	2017	2016
Capital assets Amounts financed by:	\$	19,104,676	\$ 18,510,003
Deferred contributions	(1	3,491,592)	(13,760,449)
	\$	5,613,084	\$ 4,749,554
b) Changes in net assets invested in capital assets is calculated as follows	s:	2045	22.42
Excess of expense over revenue:		2017	 2016
Amortization of buildings Amortization of deferred contributions	\$ ((1,235,220)	\$ (1,197,995)
related to buildings		865,824	847,623
Amortization of equipment Amortization of deferred contributions		(861,534)	(895,225)
related to equipment Amortization of deferred contributions Amortization of deferred contributions		828,745	745,141
related to other programs		15,181	13,709
•	\$	(387,004)	\$ (486,747)
Net change in investment in capital assets: Purchase of capital assets Amounts funded by deferred contributions Amounts funded by internally restricted funds	\$	2,691,270 (1,440,736) (955,679)	\$ 1,452,014 (1,661,722) -
	\$	294,855	\$ (209,708)
Amounts internally restricted for capital asset purchases during the year		955,679	(1,076,535)
-	\$	863,530	\$ (1,772,990)

9. Commitments and Contingencies

A group of Hospitals, including the Hospital, have formed the 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 were members and these losses could be material. No reassessments have been made to March 31, 2017.



For the year ended March 31, 2017

10. Pension Plan

Substantially all of the employees of the Hospital 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 \$2,082,075 (2016 – \$2,067,826) and are included in employee benefits in the statement of operations.

Pension expense is based on the Plan management's best estimates, in consultation with its actuaries, of the amount 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 as at December 31, 2016 indicates the plan is fully funded.

11. Financial Instruments

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

12. Related Entities

The Hospital has an economic interest in Lake of the Woods District Hospital Foundation (the "Foundation") and Lake of the Woods District Hospital Auxiliary (the "Auxiliary"), which the Hospital does not control or have significant influence over. Both of these organizations raise funds for the Hospital for the purchase of capital assets.

During the year, the Foundation and the Auxiliary transferred \$593,384 (2016 - \$795,220) and \$32,500 (2016 - \$73,916) respectively to the Hospital for capital asset purchases.

13. Comparative Figures

Certain comparative figures have been reclassified to conform with the current year's presentation.

14. Budget Amounts

Budget amounts are unaudited.

15. Economic Dependence

The Lake of the Woods District Hospital receives 80.9% (2016 – 82.9%) of its funding from the Ministry of Health and Long Term Care and Northwest Local Health Integrated Network.



Lake of the Woods District Hospital Schedule 1 - Revenue For the year ended March 31, 2017 (Unaudited)

			(Unaudited)
	Budget 2016/17	2017	2016
Ministry of Health and Long Term Care/LHIN/CCO			
Global Funding	\$ 15,235,114	\$ 17,034,214	\$ 14,509,041
Quality Based Procedures	2,705,975	1,813,912	2,245,320
Health Based Allocation Methodology	7,635,795	7,806,095	8,670,171
	25,576,884	26,654,221	25,424,532
One time and other funding	4,370,062	4,573,080	4,965,993
Cancer Care Ontario	2,350,116	1,959,946	2,124,735
	32,297,062	33,187,247	32,515,260
Patient Revenue from Other Payers		*	
Workplace Safety and Insurance Board			
-Inpatient	10,000		4 500
-Outpatient		40 402	4,592
Non-residents of the province	62,000	48,492	47,091
-Inpatient	225 000	240 474	250 444
-Outpatient	225,000	348,174	252,144
Non-residents of Canada and uninsured residents	715,000	775,210	703,570
-Inpatient	45,000	84,171	35,291
-Outpatient	140,000	136,808	97,937
OHIP	1,487,000	2,114,855	1,332,866
Ambulance services	95,000	92,955	77,970
	2,779,000	3,600,665	2,551,461
Differential charges for preferred accommodation	210,000	154,220	215,682
Chronic care co-payments	55,000	187,971	89,714
	265,000	342,191	305,396
Other Revenue and Recoveries			
Investment income	50,000	44,690	53,243
Food services	215,000	220,918	201,587
Ancillary operations	268,453	238,339	252,261
Parking	320,000	293,682	296,530
Laboratory services	730,000	698,301	
Other revenue and recoveries	1,508,568	1,546,726	710,548
Donations	8,000	11,302	1,589,922 6,967
	3,100,021	3,053,958	3,111,058
Subtotal	\$ 38,441,083	\$ 40,184,061	\$ 38,483,175



Lake of the Woods District Hospital Schedule 1 - Revenue

For the year ended March 31, 2017 (Unaudited)

	Budget 2016/17	2017	2016
Subtotal from previous page	\$ 38,441,083	\$ 40,184,061	\$ 38,483,175
Amortization of grants/donations of equipment	925,000	828,745	745,141
Total Hospital Operating Revenue Revenue from other programs, net of amounts repayable	39,366,083	41,012,806	39,228,316
to funding agencies (Schedules 3 and 4)	7,200,000	7,172,145	7,131,707
Total Revenue	\$ 46,566,083	\$ 48,184,951	46,360,023



Lake of the Woods District Hospital Schedule 2 – Hospital Expenses For the year ended March 31, 2017 (Unaudited)

	Budget 2016/17		2017		2016
Salaries, Wages and Employee Benefits					
Administrative and Support Services	\$ 6,755,107	\$	6,551,349	\$	6,569,512
Nursing Inpatient Services	9,801,393	•	9,978,346	Ψ	9,973,206
Ambulatory Care Services	3,905,891		3,530,110		3,603,022
Diagnostic and Therapeutic Services	4,898,666		4,947,989		4,975,178
Regional Stroke & Ontario Breast Screening Program	72,013		56,921		61,718
Education	103,385		125,545		100,783
Marketed Services	396,157		232,760		384,016
WSIB NEER Assessment	45,000		42,020		5,215
Future Employee Benefits	75,000		53,900		73,600
	\$ 26,052,612	\$	25,518,940	\$	25,746,250
					20,7 10,200
Supplies and Other Expenses					
Administrative and Support Services	\$ 3,034,166	\$	3,397,738	\$	3,024,581
Nursing Inpatient Services	415,265	•	470,045	Ť	472,448
Ambulatory Care Services	541,081		467,062		431,022
Regional Stroke & Ontario Breast Screening Program	1,675		115		729
Diagnostic and Therapeutic Services	1,328,808		1,308,742		1,317,635
Education	87,481		84,660		53,044
Marketed Services	230,247		243,835		215,626
	\$ 5,638,723	\$	5,972,197	\$	5,515,085
Medical and Surgical Supplies					
Administrative and Support Services	\$ 80,150	\$	71,073	\$	68,013
Nursing Inpatient Services	602,127	•	571,267	*	582,572
Ambulatory Care Services	390,072		414,274		427,407
Diagnostic and Therapeutic Services	56,257		52,797		78,663
Regional Stroke & Ontario Breast Screening Program	-		122		113
Education	294		975		314
Marketed Services			18		87
	\$ 1,128,900	\$	1,110,526	\$	1,157,169



Schedule 3 – Northwest Local Health Integrated Network
Community Mental Health and Addictions Programs
For the year ended March 31, 2017
(Unaudited) Lake of the Woods District Hospital

	Problem Gambling	Adult Community Mental Heath	Lake of the Woods Addictions	₩ ≥	Remedial Measures		CMH&A Admin	2017 Total	2016 Total
Revenue Northwest Local Health Integrated Network Recovery to LHIN Other	\$ 217,133	\$ 1,211,113 (5,702) 4,558	\$ 2,443,899 - 62,636	₩	20,285	•	685,388	\$ 3,872,145 (5,702) 772,867	\$ 3,657,293
	\$ 217,133	\$ 1,209,969	\$ 2,506,535	S	20,285	S	685,388	\$ 4,639,310	\$ 4,594,800
Expenses Salaries and employee benefits Supplies and other expenses	\$ 182,495 34,638	\$ 900,398 309,571	\$ 1,824,171 682,364	€	19,760	49	428,358 257,030	\$ 3,355,182 1,284,128	\$ 3,365,619 1,229,181
	\$ 217,133	\$ 1,209,969	\$ 2,506,535	S	20,285	4	685,388	\$ 4,639,310	\$ 4,594,800
Surplus before amounts repayable	· ₩	₩	· •	₩	•	49	•	· •	·
Amounts repayable	·	· •	·	4	•	₩.	•	49	· •
Surplus (deficit) for the year	49	· •	· •	ક્ક	٠	₩.	'	· &	- چ



Lake of the Woods District Hospital
Schedule 4 – Ministry of Health and Long Term Care
Emergency Health Services Programs
For the year ended March 31, 2017

or me year ended March 31, 2017 (Unaudited)

	Central Ambulance Communication		Ambulance Regional Training, Kenora	oulance Regional Training, Kenora		2017 Total		2016 Total
Revenue Ministry of Health and Long Term Care Other	& 	2,227,333	.	344,725 24,958	•	2,572,058 102,288	€	2,578,314 84,358
	\$ 2,	2,304,663	49	\$ 369,683	9	\$ 2,674,346	69	2,662,672
Expenses Salaries and employee benefits Supplies and other expenses	& 	1,776,405	φ	145,033 209,166	4	1,921,438	€	1,954,726 582,181
	\$ 2,	2,178,637	8	354,199	49	2,532,836	69	2,536,907
Surplus before amounts repayable	€	126,026	49	15,484	49	141,510	↔	125,765
Amounts repayable/deferred		(126,026)		(15,484)		(141,510)		(125,765)
Surplus (deficit) for the year	s	ł	(s)	•	(A	ŧ	છ	•

