



MICs Group of Health Services

“Planning for a Better Tomorrow”

ANNUAL REPORT

2021 - 2022



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MICs Group of Health Services

Matheson – Iroquois Falls – Cochrane

Value Statement

Planning for a Better Tomorrow

Mission Statement

Partnering to deliver excellent health care for our communities.

Vision Statement

Quality care for everyone always!



Bingham Memorial – Matheson

“Caring for our Community”

Anson General – Iroquois Falls

“Personal Quality Care”

Lady Minto – Cochrane

“Caring Together”

MICs Group of Health Services

Strategic Plan 2018-2022



MICs Group of Health Services

Matheson – Iroquois Falls – Cochrane

"Planning for a Better Tomorrow"

Mission: Partnering to deliver excellent health care for our communities

Vision: Quality care for everyone always!

Values: Integrity – Respect – Accountability – Quality

How will we get there?

- ✓ Focus on person-centered care
- ✓ Ensure the safety of patients, residents and staff
- ✓ Ensure the sustainability of the organization
- ✓ Partner to achieve desired results
- ✓ Engage with our stakeholders

Strategic Direction	Goals for 2022
Person-Centered Care	<ul style="list-style-type: none"> • Optimize the transition of care for patients and residents • South Centennial Manor Redevelopment; improve seniors services • Collaborate with patients, residents and families for the best healthcare experience
Safety	<ul style="list-style-type: none"> • Continue to build a culture of trust and shared leadership in which everyone has both a right and a responsibility to speak up about issues that may impact safe and effective practice • Protect our staff and patients from violence • Improve pharmacy services
Sustainment	<ul style="list-style-type: none"> • Develop and implement strategies to support recruitment and retention of health professionals • Develop a Human Resources plan including medical staff • Maintain Financial Sustainability
Partnering	<ul style="list-style-type: none"> • Partner with other community organizations to expand and improve mental health care services • Develop our Ontario Health Team • Partnering with all 21 Wave 2 Northeast hospitals to plan the Meditech expense upgrade of EMR (ONE initiative)
Engagement	<ul style="list-style-type: none"> • Effectively engage with our Team Members and stakeholders • Endeavour to give patients and residents a meaningful voice

BMH Board Chair

Robert Dennis

Where have nine years gone?

I have had the pleasure of serving on the MICs Board of Directors for the past nine years and look upon this time as a great learning experience. It has been a pleasure to serve on the board and work with a great group of people.

The three local boards work together as one. There are no personal issues or arguments between members. We all get along and work together very well for the benefit of MICs and the communities we serve, live and work in. I am proud of this fact.

The Board members consist totally of volunteers, no wages or honorariums. They are conscientious because they are invested in their community or have a sense of community.

Volunteers and volunteerism seem to be in short supply these days. We need to promote volunteers to apply for a directorship even if just as a learning experience for one term (three years).

In those nine years, our board members have dealt with a variety of challenges:

- Community issues, hospital funding, COVID, staffing shortages due to COVID, ongoing physician shortages, raising funds for the hospital and long-term care facilities
- Non-urgent patient transfers, the ONE Initiative to implement the expansion of the Meditech Expanse health information system, facility renovations and upgrades to the kitchens and office space such as painting and repairs)
- These are just a few of the upgrades and modernizations carried out by the present Board.
- One of the most needed items is the upgrade and expansion of the dining room area in 2022 which is dependant on receiving funding.

In my nine years on the Bingham Memorial Hospital Board of Directors, I have been very proud of the management and staff who worked so hard for their communities during COVID. Some we lost to “burnout” and others changed careers for various reasons.

A short note to present and future Directors:

- Attend **all** meetings and participate.
- Make a choice as to which committees you are interested in participating in.
- Read, read and read again all the meeting agendas and attachments.
- Be prepared to debate issues and ask questions. There is no such thing as a stupid question. You need to be prepared for a meeting.
- Remember that the administration staff are a great source of information to tap into. If you need an answer to a particular question, call them. You will have an answer either the same day or next day.
- Getting an item or project approved at the Board level and receiving the required funds is very rewarding because it means that you have helped to provide a better service for your community, patients and residents in your facilities.



AGH Board Chair

Danielle Delaurier

PANDEMIC: This word sums up what has affected everyone and everything in our organization over the past few years. What we thought at the beginning would be a quick sprint has turned into a marathon. The past few years have been stressful and demanding both professionally and personally for everyone. The need to change and adapt has come at a pace never experienced before. Staff across the MICs organization have been called upon, time and time again, to deal with unprecedented challenges while facing their own fatigue and fears. We could not be prouder of our staff for never giving up and for their extraordinary response.

The pandemic has created additional financial pressures and the Ministry of Health and Ontario Health have worked closely with the Ontario Hospital Association to make sure our hospitals were well supported financially to respond to the pandemic. Because of this support and the work of our executive team in securing grants and keeping costs under control, Anson General Hospital is operating at a surplus and South Centennial Manor has significantly cut its deficit when compared to previous years.

Many capital budgets are coming in over budget due to pandemic factors. Some projects have had to be deferred due to cost while others have been significantly delayed due to material and contractor unavailability. The Ministry has given us the approval to carry over funding grants received due to these delays. Work has begun on the freight elevator at Anson General Hospital, the medical vacuum system and the negative air unit in Room 202 and the engineering work for the modernization of the passenger elevator is complete. The resurfacing of the parking lot and roads surrounding Anson General Hospital has been deferred.

Other delays due to the pandemic include the postponement of the Accreditation visit to October 2022, the implementation of the “ONE Initiative – One Person, One Record, One System” as well as the South Centennial Manor Redevelopment Project. This project is moving along but at a slow pace. The financial budget has been submitted to the external auditors for their review. Once this is completed, the financials and a communication plan will be submitted to the Ministry of Long-Term Care for their review and the Ministry will initiate a Public Consultation.

Our Quality Performance Plan demonstrates that Anson General Hospital and South Centennial Manor are committed to delivering high quality services with a focus on creating positive patient, resident and employee experiences. In an effort to improve our services, we continuously solicit feedback through various means and this data is collected, sorted, discussed and reported on. The MICs Quality Committee reports monthly to the board on quality initiatives. Despite the challenges of the COVID pandemic, Anson General Hospital and South Centennial Manor have been successful in achieving the performance target for most of the indicators in the Quality Improvement Plan (QIP) and continue to work diligently in making progress on the remaining 2021/2022 targets as well as the new targets identified for 2022/2023.

As of October 19, 2021, not-for-profit organizations such as public hospitals, have been removed from the Corporation Act and are now regulated by the Ontario Not-for-Profit Act (ONCA). As a result, MICs corporate by-laws were reviewed using the 2021 OHA Prototype Corporate By-Law to fully reflect and comply with the ONCA’s requirements.

Physician recruitment continues to be a priority and attracting physicians to rural communities is an ongoing challenge. The Board and Chief Executive Officer are actively working with the Worker Bees Committee to attract physicians to our communities. Recently, we were pleased to welcome Dr. Stryde to the Iroquois Falls Family Health Team. We have been fortunate to have a healthy complement of locums to cover our Emergency Departments. Nursing recruitment efforts are also ongoing as we are experiencing shortages at all our sites. Agency nurses are filling in the gaps for the time being and relocation of staff has been necessary at times to ensure the stability of services throughout the organisation.

The MICs Foundation recently hired a coordinator and they are now more active in raising funds for all our sites through the monthly 50/50 draws and other initiatives. Recently, the Royal Canadian Legion has made a sizeable donation of \$19,600. The MICs communities continue to be very generous and we are very appreciative of their support.

The Ministry of Long-Term Care has introduced legislation “*Fixing the Long-Term Care Act.*” Many changes will gradually be phased-in to improve the wellbeing and safety of residents in long-term care homes who have been greatly impacted by this pandemic. These changes will require additional resources and training. Most of our Long-Term Care residents have received their fourth vaccine and we are pleased to see that pandemic measures are being relaxed and residents are returning to pre-pandemic routines. It has been awesome to see all the pictures of our residents at South Centennial Manor enjoying various activities and gathering to socialize.

This past year has presented challenges for our staff but it has also revealed a strong team of talented and resilient professionals committed to offering safe, quality care to our residents and patients.

On behalf of the Anson General Hospital Board of Directors, I would like to thank all of the staff, physicians and volunteers for your courage, compassion and commitment.



LMH Board Chair

Patricia Dorff

We have come to the end of another year and it seems like little has changed! COVID is still playing havoc with all of us. The staff is feeling the effects of COVID-fatigue and there are more and more mental health issues to deal with. Our staff can't be measured in dollars and cents; they are priceless!!!

Below is the last fiscal year in review:

- We continue to work hard in order to recruit more physicians to our community. We are not unique in this as the physician shortage is province wide. With many physicians specializing, there are less of them going into family medicine. It is certainly challenging but we are working diligently with other community partners to fill our existing vacancies.
- We are developing and implementing plans to support recruitment and retention of all Allied Health Professionals in our area.
- Some of our capital projects are coming in over budget due to the higher cost of construction materials and may need to be deferred. One such project is the second phase of the lab renovations which is partly due to lack of materials and contractor availability.
- We continually strive to ensure our patients and residents have a voice that is heard.
- Unfortunately, our Gift Shop has been closed for the past two years but we were still able to donate \$500.00 bursaries to both local high schools. We are hoping to reopen by September.
- The annual Moose 98.1 Radio-thon raised over \$4,500.00 towards the purchase of an Anesthetic gas machine for our Operating Room.

With so much time on my hands – I came up with something I would like to share with you:

L – Loyalty of our staff can't be measured in dollars and cents. They are priceless.

M – Meeting the needs of other people in the community is our goal.

H – Helping ourselves has made us able to help others.

Enjoy your summer folks. Stay safe, happy and healthy.



Chief Executive Officer/LTC Administrator

Paul Chatelain

I am very pleased to submit my annual report as Chief Executive Officer and Long-Term Care Administrator of the MICs Group of Health Services. While this past year continued to be an unprecedented one, the report is a great opportunity to summarize and showcase the events that occurred during the year.

We welcomed three new Board Members this year: Fern Morrisette from Anson General Hospital, Susan Nelson from Lady Minto Hospital and Melissa Laderoute from Bingham Memorial Hospital. Despite the board vacancies and “virtual” meetings, we had a very productive year.

We have completed the fourth year of our Strategic Plan 2022, focusing on person-centered care, including our seniors and staff. While the pandemic has been our primary focus, I can attest that this goal and many others were achieved. We look forward in refreshing our new Strategic Plan beginning this fall.

Physician and professional staff recruitment and retention is our highest priority. The pandemic has taken a toll on all our team members including physicians. We have experienced a lot resignations and retirements as a result of staff burnout. The shortage of health human resources is a global phenomenon and more so in Northern Ontario. We have had to rely on a number of agency nurses and Emergency Department locum physicians to avoid closing beds and reducing services. We will continue to work closely with our partners including the colleges and our municipalities in promoting our incentive package to attract more physicians and nurses.

I am pleased to report that the organization has reported an operating surplus and met most of the targets set out in our Quality Improvement Plan in both the acute and the long-term care.

Our capital projects have been significantly delayed due to the pandemic and contractor shortages. We expect this will continue next fiscal year and the Ministry has extended our funding. We applied for, and were granted, over \$1.9 million in Exceptional Circumstance Program and HIRF funding from the Ministry of Health and Long-Term Care. We have used this to replace the Operating Room Air Handling Unit at the Lady Minto Hospital, chiller and freight elevator upgrade at the Anson General Hospital and a new oxygen concentrator at Bingham Memorial Hospital. We have completed Phase I of the Laboratory renovations at Lady Minto Hospital and are in the planning stages of the Pharmacy upgrade. We continue to work with Honeywell Solutions on the Energy and Facility Renewal program. This \$3.1 million program aims to address deferred maintenance, reduce the environmental footprint and save on utility and operational costs of over \$125,000 per year. Honeywell was also successful in applying for a \$2 million grant from the COVID-19 Resilience Infrastructure Stream of the Investing in Canada Infrastructure Program (ICIP). This is being applied to upgrade the air handling unit and improve ventilation in our Villa Minto Long-Term Care home. Finally, we received Ministry of Long-Term Care approval for the new 96-bed redevelopment and relocation of the South Centennial Manor. While this project has been delayed significantly due to the pandemic, we are still working closely with the Ministry and the architect.

Our Fundraising Committee and Foundation continue to be very proactive raising over \$2 million to date, including the MICs 50/50 monthly draws with the assistance of the newly hired Foundation Coordinator.

Finally, I would like to extend my sincere appreciation to the Board of Directors, Medical Staff, the Executive Team, all Team Members and of course our volunteers, especially during another challenging year. I am reminded every single day of the fatigue and mental health stress we all face, especially healthcare and front line workers, but I am also reminded of the great team we have here at the MICs Group of Health Services. It is certainly a pleasure to work with them, trying our best to be kind while keeping everybody safe...



Chief Nursing Officer

Isabelle Boucher

A Year in Review

Despite the challenges of the COVID-19 pandemic and the continued shortage of nurses, there are many successes to celebrate this year.

I would like to extend my sincere gratitude to our MICs Group of Health Services nurses for their knowledge, skill and expertise. I deeply respect their dedication to providing compassionate quality care. I salute their accomplishments and the impact they make in the lives of our patients, families and communities. I would also like to acknowledge our Leadership Team for the resilience and empathy they have demonstrated during this challenging time.

Highlights of the 2021-22 Fiscal Year

- **Person Centered Care**

Designated Care Partners: Family and designated care partners are viewed as essential to the physical, emotional, social and spiritual wellbeing of our patients. As such, our visitor guidelines were updated regularly and tailored to reflect the Public Health guidelines during the COVID-19 Pandemic. We wish to thank our families and visitors for their patience as we continue to look out for the wellbeing of their loved ones. We understand how frustrating this has been.

ONE Initiative: The MICs Group of Health Services is in the process of upgrading their current Electronic Medical Record (EMR) system to Meditech Expanse. At this time, there are several team members dedicated to specific working groups for this initiative. The MICs Group of Health Services, along with 22 other participating NEON hospitals, have negotiated a loan from TD bank in order to fund their appropriate share of the costs relating to the ONE expansion project. The Board of Directors has authorized the MICs Group of Health Services to borrow up to \$6M to be repaid over a 15-year period to finance its capital contribution to implement the ONE project.

This new EMR will result in improved quality and delivery of care for patients.

Benefits to patients include:

- An accurate record that moves with them within and between hospitals
- Care decisions being made based on the most up-to-date and accurate information available through the use of evidence-based standards
- Unified health records that reduce the likelihood of duplicate work and unnecessary tests
- More opportunities to enhance patient safety, deliver better outcomes and reduce harm

The ONE Initiative is scheduled to “go live” in February 2024.

- **Quality and Safety**

Pandemic Response: Under the leadership of our Infection Prevention and Control Program Leader, our team has pulled together seamlessly to continue delivering extraordinary care in the face of this unprecedented pandemic. Staff and physicians have worked tirelessly in uncertain circumstances to slow the spread of infection, care for those afflicted with the virus, and support each other.

Accreditation: Our on-site Accreditation Canada survey was deferred from February to October 2022 due to the pandemic. Our team remains committed to delivering safe and quality services and is looking forward to resuming their activities in the fall and preparing for our Accreditation on-site survey.

Pharmacy Upgrade: The MICs Group of Health Services Pharmacy will be undergoing construction and plans are in process to improve the sterile compounding program. This will ensure the National Association of Pharmacy Regulatory Authorities (NAPRA) standards for the safe preparation of hazardous and non-hazardous medications are met.

- **Nursing Recruitment and Retention**

The province's long-standing RN understaffing problem has become a human resource crisis magnified by the COVID-19 pandemic. The MICs Group of Health Services continues its efforts to recruit and retain nurses and has become reliant on the support of agency nurses for the past year. We continue to collaborate with the unions and foster relationships. This year, we attended recruitment fairs virtually.

- **Surgical Program**

MICs was successful in the recruitment of a full time general surgeon at Lady Minto Hospital. Despite the ramping down of surgical services during the pandemic, the program is now operating to our usual volumes.

- **Partnerships**

Supporting Mental Health: A Hospital Transfer of Care protocol was recently introduced following the collaboration between the Ontario Provincial Police (OPP) and other small northern hospitals. This collaboration focuses on the efficient access to care and treatment and enhancing the overall experience for mental health patients.

A referral pathway was also developed in collaboration with Minto Counselling Services. This was later strengthened by the addition of an iPad in each emergency room to facilitate consultations in a time of pandemic. MICs has also created and successfully implemented a Patient Attendant Program.

- **Patient Engagement**

Experience Surveys: Measuring the patient experience continues to bring valuable insight into the care we deliver. As we strive to deliver quality services, we continue to look at innovative ways to collect this data despite the COVID-19 pandemic. We developed a new process in the administration of the Emergency Department surveys and have seen an increase in our response rate.

Patient and Family Advisory Council (PFAC): Members of the Patient and Family Advisory Council continue to meet throughout the year and have been participating in various initiatives/projects. They have reviewed the Volunteer Program, patient brochures, Quality Improvement Plans, placement of QR codes and Experience Survey posters in the Emergency department. We have had a PFAC member join our Quality Committee of the Board. We have also welcomed a new member for the Cochrane community this spring and continue with recruitment of new members for the other communities.



MICs Chief of Staff

Dr. Joey Tremblay

As Chief of Staff of the MICs Group of Health Services, I am pleased to present the report for the 2021-2022 fiscal year.

Physician recruitment remains one of the top priorities. The MICs administration, the Worker Bees, the Executive Directors (ED) of the Family Health Teams and I have been actively engaged in recruiting physicians for all three communities. We are excited to announce the successful recruitment of physicians mentioned below and we remain invested in further recruitments.

The current family physician “need” is 1 for Iroquois Falls and Matheson, and 2-3 in Cochrane.

Our surgical program continues to thrive and provide high quality surgical services in Cochrane. We have successfully recruited Dr. Elkheir as our full-time surgeon in September 2021. His skill set and dedication have exceeded our expectations and we are thrilled that he has joined our team. In addition, three local dentists have joined our surgical program in the last year. Welcome Drs. Vockeroth, Clark and Nakashoji. Dr. Naskashoji is Cochrane’s newest dentist who has taken over Dr. Harris’ practice.

Our Emergency Departments remain stable with local and locum physicians.

Most of the MICs medical staff are NOSM faculty members who belong to the NOSM Timiskaming – Cochrane Education Group (LEG). Now that the pandemic has stabilized, we are preparing to resume in-person educational conferences which are for a diverse group including physicians, allied professionals and members of our communities. Our LEG participates in NOSM teaching programs at all three MICs sites. Not only do we supervise, guide and teach learners from NOSM but we welcome students from other schools as well. MICs hosts numerous types of learners/students such as physician assistants, nurse practitioners, nurses, medical students and medical residents.

The COVID-19 pandemic was a stressful and challenging time but I feel that it has brought strength to our organization. Although the daily challenges of the pandemic have slightly changed, we continue to strive to keep our three communities of patients, families and staff safe.

Overall, our hardworking crew has continued to join forces to achieve the best possible outcome for our three communities! This was made possible by the medical staff, administration and support staff.

We thank the MICs Board Members for their continued support!

AGH: Anson General Hospital

LMH: Lady Minto Hospital

BMH: Bingham Memorial Hospital

NOSM: Northern School of Medicine



Appendix I

MICs Group of Health Services

Summary Financial Statements

For the year ending March 31, 2022

BINGHAM MEMORIAL HOSPITAL

**INDEPENDENT AUDITOR'S REPORT AND
SUMMARY FINANCIAL STATEMENTS**

MARCH 31, 2022

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INDEPENDENT AUDITOR'S REPORT ON THE SUMMARY FINANCIAL STATEMENTS

To the Board of Directors of
Bingham Memorial Hospital

Opinion

The summary financial statements, which comprise the summary statement of financial position as at March 31, 2022 and the summary statement of operations for the year then ended, are derived from the audited financial statements of Bingham Memorial Hospital for the year ended March 31, 2022.

In our opinion, the accompanying summary financial statements are a fair summary of the audited financial statements on the basis described in note 1.

Summary Financial Statements

The summary financial statements do not contain all the disclosures required by Canadian Public Sector Accounting Standards for Government Not-for-Profit Organizations. Reading the summary financial statements and the auditor's report thereon, therefore, is not a substitute for reading the audited financial statements of Bingham Memorial Hospital.

The Audited Financial Statements and Our Report Thereon

We expressed an unmodified audit opinion on the audited financial statements of Bingham Memorial Hospital in our report dated June 22, 2022.

Management's Responsibility for the Summary Financial Statements

Management is responsible for the preparation of the summary financial statements on the basis described in note 1.

Auditor's Responsibility

Our responsibility is to express an opinion on whether the summary financial statements are a fair summary of the audited financial statements based on our procedures, which were conducted in accordance with Canadian Auditing Standards (CAS) 810, Engagements to Report on Summary Financial Statements.

Baker Tilly HKC

Chartered Professional Accountants
Licenced Public Accountants
June 22, 2022

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BINGHAM MEMORIAL HOSPITAL

SUMMARY STATEMENT OF OPERATIONS

YEAR ENDED MARCH 31, 2022

	2022 Budget (Unaudited)	2022 Actual	2021 Actual
REVENUES			
Ministry Funding	\$ 7,848,131	\$ 8,399,243	\$ 8,341,661
Ontario Health Insurance	35,000	47,155	36,057
Other patient care revenue	526,200	554,647	560,476
Recoveries and other revenues	73,700	246,317	94,518
Amortization of deferred capital contributions - equipment and software	75,000	50,586	75,976
Other votes	3,000	3,000	3,000
	<u>8,561,031</u>	<u>9,300,948</u>	<u>9,111,688</u>
EXPENSES			
Salaries and wages	4,078,129	4,300,122	4,106,851
Employee benefits	1,218,720	1,437,365	1,334,467
Medical staff remuneration	1,017,453	956,551	979,186
Supplies and other expenses	2,056,153	1,804,009	1,576,548
Medical and surgical supplies	90,000	137,482	113,320
Drugs and medical gases	144,000	64,132	129,406
Loss on disposition of capital assets	-	6,524	-
Amortization of equipment and software	148,000	188,107	167,537
Other votes	3,000	3,000	3,000
	<u>8,755,455</u>	<u>8,897,292</u>	<u>8,410,315</u>
EXCESS OF REVENUES OVER EXPENSES (EXPENSES OVER REVENUES) FROM OPERATIONS	<u>(194,424)</u>	<u>403,656</u>	<u>701,373</u>
AMORTIZATION OF BUILDINGS			
Amortization of deferred capital contributions - buildings	225,000	333,410	322,139
Amortization of capital assets - buildings	(225,000)	(517,582)	(490,179)
	<u>-</u>	<u>(184,172)</u>	<u>(168,040)</u>
EXCESS OF REVENUES OVER EXPENSES (EXPENSES OVER REVENUES)	<u>\$ (194,424)</u>	<u>\$ 219,484</u>	<u>\$ 533,333</u>

BINGHAM MEMORIAL HOSPITAL
SUMMARY STATEMENT OF FINANCIAL POSITION
MARCH 31, 2022

	2022	2021
ASSETS		
CURRENT ASSETS		
Cash	\$ 602	\$ 602
Accounts receivable	535,478	401,674
Prepaid expenses	41,816	-
Inventories	198,486	209,232
Short-term investment	161,954	161,224
Due from MICs Group of Health Services	3,863,483	3,513,437
	<u>4,801,819</u>	<u>4,286,169</u>
CAPITAL ASSETS	<u>6,914,692</u>	<u>6,867,006</u>
	<u>\$ 11,716,511</u>	<u>\$ 11,153,175</u>
LIABILITIES		
CURRENT LIABILITIES		
Accounts payable and accrued liabilities	\$ 576,947	\$ 404,177
Deferred revenue	79,403	130,057
	<u>656,350</u>	<u>534,234</u>
POST-EMPLOYMENT BENEFITS	755,034	719,202
DEFERRED CAPITAL CONTRIBUTIONS	<u>4,404,792</u>	<u>4,218,888</u>
	<u>5,816,176</u>	<u>5,472,324</u>
NET ASSETS		
INVESTED IN CAPITAL ASSETS	3,027,761	2,757,059
UNRESTRICTED	<u>2,872,574</u>	<u>2,923,792</u>
	<u>5,900,335</u>	<u>5,680,851</u>
	<u>\$ 11,716,511</u>	<u>\$ 11,153,175</u>

BINGHAM MEMORIAL HOSPITAL
NOTE TO SUMMARY FINANCIAL STATEMENTS
MARCH 31, 2022

1. BASIS OF PRESENTATION

The accompanying summary financial statements have been prepared with the same accounting standards as the audited financial statements of Bingham Memorial Hospital for the year ended March 31, 2022.

The summary financial statements do not contain all the disclosure required by Canadian Public Sector Accounting Standards for Government Not-For-Profit Organizations. The summary statements of changes in net assets and cash flows, and the notes to the financial statements are not included.

The complete set of financial statements and the auditor's report can be obtained from the management of Bingham Memorial Hospital.

ANSON GENERAL HOSPITAL

**INDEPENDENT AUDITOR'S REPORT AND
SUMMARY FINANCIAL STATEMENTS**

MARCH 31, 2022

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INDEPENDENT AUDITOR'S REPORT ON THE SUMMARY FINANCIAL STATEMENTS

To the Board of Directors of
Anson General Hospital

Opinion

The summary financial statements, which comprise the summary statement of financial position as at March 31, 2022 and the summary statement of operations for the year then ended, are derived from the audited financial statements of Anson General Hospital for the year ended March 31, 2022.

In our opinion, the accompanying summary financial statements are a fair summary of the audited financial statements on the basis described in note 1.

Summary Financial Statements

The summary financial statements do not contain all the disclosures required by Canadian Public Sector Accounting Standards for Government Not-for-Profit Organizations. Reading the summary financial statements and the auditor's report thereon, therefore, is not a substitute for reading the audited financial statements of Anson General Hospital.

The Audited Financial Statements and Our Report Thereon

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Management's Responsibility for the Summary Financial Statements

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Baker Tilly HKC

Chartered Professional Accountants
Licenced Public Accountants
June 22, 2022

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ANSON GENERAL HOSPITAL
SUMMARY STATEMENT OF OPERATIONS
YEAR ENDED MARCH 31, 2022

	2022 Budget (Unaudited)	2022 Actual	2021 Actual
REVENUES			
Ministry funding	\$ 10,000,441	\$ 11,535,432	\$ 11,367,707
Ontario Health Insurance	255,500	221,461	170,364
Other patient care revenues	322,030	289,048	265,089
Recoveries and other revenues	529,650	611,908	474,764
Gain on disposition of capital assets	-	229,988	-
Amortization of deferred capital contributions - equipment and software	30,000	35,426	36,227
Other votes	3,150	3,150	3,150
	<u>11,140,771</u>	<u>12,926,413</u>	<u>12,317,301</u>
EXPENSES			
Salaries and wages	5,478,783	5,500,965	4,936,623
Employee benefits	1,681,694	1,533,376	1,569,855
Medical staff remuneration	157,770	935,605	122,314
Supplies and other expenses	3,111,875	2,796,903	2,733,187
Medical and surgical	199,500	248,185	206,955
Drugs and medical gases	250,000	152,703	205,173
Amortization of equipment and software	180,000	237,980	219,182
Other votes	3,150	3,150	3,150
	<u>11,062,772</u>	<u>11,408,867</u>	<u>9,996,439</u>
EXCESS OF REVENUES OVER EXPENSES FROM OPERATIONS	<u>77,999</u>	<u>1,517,546</u>	<u>2,320,862</u>
AMORTIZATION OF BUILDINGS			
Amortization of deferred capital contributions - buildings	450,000	462,616	503,129
Amortization of buildings	(510,000)	(758,780)	(689,432)
	<u>(60,000)</u>	<u>(296,164)</u>	<u>(186,303)</u>
EXCESS OF REVENUES OVER EXPENSES BEFORE OTHER PROGRAM	<u>17,999</u>	<u>1,221,382</u>	<u>2,134,559</u>
OTHER PROGRAM			
Statement of Operations - South Centennial Manor	-	28,281	(126,303)
EXCESS OF REVENUES OVER EXPENSES	<u>\$ 17,999</u>	<u>\$ 1,249,663</u>	<u>\$ 2,008,256</u>

ANSON GENERAL HOSPITAL
SUMMARY STATEMENT OF FINANCIAL POSITION
MARCH 31, 2022

	2022	2021
ASSETS		
CURRENT ASSETS		
Cash	\$ 500	\$ 500
Accounts receivable	897,074	1,923,843
Inventories	278,844	253,584
Due from MICs Group of Health Services	2,039,209	-
	<u>3,215,627</u>	<u>2,177,927</u>
CAPITAL ASSETS	<u>15,938,616</u>	<u>15,599,383</u>
	<u>\$ 19,154,243</u>	<u>\$ 17,777,310</u>
LIABILITIES		
CURRENT LIABILITIES		
Accounts payable and accrued liabilities	\$ 1,041,544	\$ 412,993
Deferred revenue	105,028	105,028
Due to MICs Group of Health Services	-	885,566
Mortgage payable	-	38,200
Current portion of capital contribution repayable	12,000	12,000
	<u>1,158,572</u>	<u>1,453,787</u>
CAPITAL CONTRIBUTION REPAYABLE	<u>144,000</u>	<u>156,000</u>
POST-EMPLOYMENT BENEFITS	<u>1,513,159</u>	<u>1,462,342</u>
DEFERRED CAPITAL CONTRIBUTIONS	<u>9,684,386</u>	<u>9,300,718</u>
	<u>12,500,117</u>	<u>12,372,847</u>
NET ASSETS		
INVESTED IN CAPITAL ASSETS	<u>6,967,833</u>	<u>6,142,883</u>
UNRESTRICTED	<u>(313,707)</u>	<u>(738,420)</u>
	<u>6,654,126</u>	<u>5,404,463</u>
	<u>\$ 19,154,243</u>	<u>\$ 17,777,310</u>

ANSON GENERAL HOSPITAL

NOTE TO SUMMARY FINANCIAL STATEMENTS

MARCH 31, 2022

1. BASIS OF PRESENTATION

The accompanying summary financial statements have been prepared with the same accounting standards as the audited financial statements of Anson General Hospital for the year ended March 31, 2022.

The summary financial statements do not contain all the disclosure required by Canadian Public Sector Accounting Standards for Government Not-For-Profit Organizations. The summary statements of changes in net assets and cash flows, and the notes to the financial statements are not included.

The complete set of financial statements and the auditor's report can be obtained from the management of Anson General Hospital.

LADY MINTO HOSPITAL

**INDEPENDENT AUDITOR'S REPORT AND
SUMMARY FINANCIAL STATEMENTS**

MARCH 31, 2022

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INDEPENDENT AUDITOR'S REPORT ON THE SUMMARY FINANCIAL STATEMENTS

To the Board of Directors of
Lady Minto Hospital

Opinion

The summary financial statements, which comprise the summary statement of financial position as at March 31, 2022 and the summary statement of operations for the year then ended, are derived from the audited financial statements of Lady Minto Hospital for the year ended March 31, 2022.

In our opinion, the accompanying summary financial statements are a fair summary of the audited financial statements on the basis described in note 1.

Summary Financial Statements

The summary financial statements do not contain all the disclosures required by Canadian Public Sector Accounting Standards for Government Not-for-Profit Organizations. Reading the summary financial statements and the auditor's report thereon, therefore, is not a substitute for reading the audited financial statements of Lady Minto Hospital.

The Audited Financial Statements and Our Report Thereon

We expressed an unmodified audit opinion on the audited financial statements of Lady Minto Hospital in our report dated June 22, 2022.

Management's Responsibility for the Summary Financial Statements

Management is responsible for the preparation of the summary financial statements on the basis described in note 1.

Auditor's Responsibility

Our responsibility is to express an opinion on whether the summary financial statements are a fair summary of the audited financial statements based on our procedures, which were conducted in accordance with Canadian Auditing Standards (CAS) 810, Engagements to Report on Summary Financial Statements.

Baker Tilly HKC

Chartered Professional Accountants
Licenced Public Accountants
June 22, 2022

ASSURANCE • TAX • ADVISORY

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LADY MINTO HOSPITAL

SUMMARY STATEMENT OF OPERATIONS

YEAR ENDED MARCH 31, 2022

	2022 Budget (Unaudited)	2022 Actual	2021 Actual
REVENUES			
Ministry funding	\$ 13,881,864	\$ 13,978,020	\$ 14,204,460
Cancer Care Ontario	600,000	814,271	745,702
Ontario Health Insurance	210,114	209,945	178,798
Other patient care revenues	288,978	236,695	210,194
Recoveries and other revenues	1,059,050	1,086,119	1,051,956
Gain on disposition of capital assets	-	252,117	-
Amortization of deferred capital contributions - equipment and software	120,000	164,335	115,224
Other votes	4,350	4,350	4,350
	<u>16,164,356</u>	<u>16,745,852</u>	<u>16,510,684</u>
EXPENSES			
Salaries and wages	7,237,602	7,099,310	6,778,336
Employee benefits	2,171,281	2,032,963	2,217,572
Medical staff remuneration	1,810,952	1,740,831	1,949,563
Supplies and other expenses	3,588,439	3,112,932	3,285,799
Medical and surgical	269,500	384,462	357,007
Drugs and medical gases	431,500	1,211,509	740,660
Amortization of equipment and software	352,500	313,646	393,742
Other votes	4,350	4,350	4,350
	<u>15,866,124</u>	<u>15,900,003</u>	<u>15,727,029</u>
EXCESS OF REVENUES OVER EXPENSES FROM OPERATIONS	<u>298,232</u>	<u>845,849</u>	<u>783,655</u>
AMORTIZATION OF BUILDINGS			
Amortization of deferred capital contributions - buildings	225,000	363,036	364,506
Amortization of capital assets - buildings	(500,000)	(940,644)	(866,281)
	<u>(275,000)</u>	<u>(577,608)</u>	<u>(501,775)</u>
EXCESS OF REVENUES OVER EXPENSES BEFORE OTHER PROGRAM	<u>23,232</u>	<u>268,241</u>	<u>281,880</u>
OTHER PROGRAM			
Statement of Operations - Villa Minto Nursing Home	-	(212,546)	(288,847)
EXCESS OF REVENUES OVER EXPENSES (EXPENSES OVER REVENUES)	<u>\$ 23,232</u>	<u>\$ 55,695</u>	<u>\$ (6,967)</u>

LADY MINTO HOSPITAL

SUMMARY STATEMENT OF FINANCIAL POSITION

MARCH 31, 2022

	2022	2021
ASSETS		
CURRENT ASSETS		
Cash	\$ 1,145	\$ 1,145
Accounts receivable	982,920	785,245
Prepaid expenses	101,955	106,269
Inventories	461,734	416,577
Due from MICs Group of Health Services	3,546,899	2,624,696
	<hr/> 5,094,653	<hr/> 3,933,932
LONG-TERM RECEIVABLES	35,715	51,905
CAPITAL ASSETS	17,507,185	16,054,287
INTANGIBLE ASSET	308,538	347,106
	<hr/> \$ 22,946,091	<hr/> \$ 20,387,230
LIABILITIES		
CURRENT LIABILITY		
Accounts payable and accrued liabilities	\$ 1,104,591	\$ 716,909
POST-EMPLOYMENT BENEFITS	1,573,691	1,530,946
DEFERRED CAPITAL CONTRIBUTIONS	9,660,009	7,587,270
	<hr/> 12,338,291	<hr/> 9,835,125
NET ASSETS		
INVESTED IN CAPITAL ASSETS	8,792,154	8,899,043
UNRESTRICTED	1,815,646	1,653,062
	<hr/> 10,607,800	<hr/> 10,552,105
	<hr/> \$ 22,946,091	<hr/> \$ 20,387,230

LADY MINTO HOSPITAL

NOTE TO SUMMARY FINANCIAL STATEMENTS

MARCH 31, 2022

1. BASIS OF PRESENTATION

The accompanying summary financial statements have been prepared with the same accounting standards as the audited financial statements of Lady Minto Hospital for the year ended March 31, 2022.

The summary financial statements do not contain all the disclosure required by Canadian Public Sector Accounting Standards for Government Not-For-Profit Organizations. The summary statements of changes in net assets and cash flows, and the notes to the financial statements are not included.

The complete set of financial statements and the auditor's report can be obtained from the management of Lady Minto Hospital.

Appendix II

MICs Group of Health Services

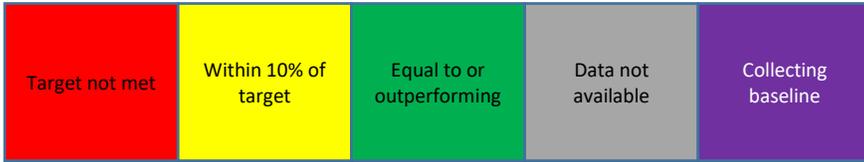
2021-2022 Corporate Scorecard



CORPORATE SCORECARD 2021/2022

A C C O U N T A B I L I T Y
 Q U A L I T Y
 I N T E G R I T Y
 R E S P E C T

Vision: Quality care for everyone always!
Mission: Partnering to deliver excellent health care for our communities
Values: Integrity – Respect – Accountability – Quality



QIP = Quality Improvement Plan

CB = Collecting Baseline

X = Suppressed Data

		Anson General Hospital / South Centennial Manor				Bingham Memorial Hospital / Rosedale				Lady Minto Hospital / Villa Minto			
		Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
Effective	Total Margin			8.64%				2.02%				-1.33%	
	Medication Reconciliation at Discharge	56%	71%	44%	70%	70%	50%	70%	60%	67%	70%	70%	90%
	Potential Avoidable ER Visits (LTC) QIP												
Patient Centered Care	Resident Satisfaction(End of Life) (LTC) QIP	CB	CB	CB	CB	CB	CB	CB	CB	CB	CB	CB	CB
	ER Client Satisfaction QIP		100%	98%	93%	100%	82%	89%	88%	67%	91%	67%	88%
	Inpatient Client Satisfaction QIP	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%
	Acknowledgement of Complaints	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
	Acknowledgement of Complaints (LTC)	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
Efficient	% of Total Alternate Level of Care Days	67%	63%	62%	61%	78%	76%	83%	71%	33%	27%	39%	67%
Safe	Falls resulting in injury (% LTC)	2%	2%	2%	0%	0%	0%	14%	0%	5%	0%	0%	0%
	Hand Hygiene Compliance Before (Hospital)	70%	97%	100%	93%	100%	100%	100%	79%	89%	98%	96%	74%
	Hand Hygiene Compliance Before (LTC)	95%	98%	98%	93%	100%	96%	96%	94%	100%	97%	100%	72%
	Hand Hygiene Compliance After (Hospital)	96%	100%	93%	90%	100%	100%	100%	92%	93%	97%	100%	85%
	Hand Hygiene Compliance After (LTC)	97%	99%	99%	99%	100%	96%	100%	94%	100%	95%	100%	64%
Workplace Violence Incidents QIP	3/4	1/5	1/5	0/2	2/1	0/1	0/1	0/0	6/2	6/4	6/4	4/1	
Timely	Discharged Patient Summaries QIP	58%	61%	52%	78%	61%	57%	42%	50%	40%	38%	27%	63%
Worklife		Annual		Reported in March									
	Turnover Rates	4%											
	Sick Incidents												
	Employee Satisfaction												

Appendix III

Patient Activity for 2021-2022

	BMH	LMH	AGH
Adult Admissions			
• Acute	101	374	287
• Complex Continuing Care			
• Alternate Level of Care	4	6	21
Total Patient Days			
• Acute	1,793	5,637	2,702
• Complex Continuing Care	1,929	2,123	4,309
Emergency Visits	1,823	8,502	5,076
Laboratory Visits	2,136	6,242	6,855
Radiology Visits	562	2,007	2,084
Physiotherapy Visits	132	535	1,204
Oncology Visits	n/a	433	n/a
Surgical Services / Endoscopy Visits	n/a	366	137
Ontario Telehealth Network Visits	68	327	328
Visiting Specialty Clinic Visits	n/a	303	315