

Financial Statements of

**NORTH BAY REGIONAL
HEALTH CENTRE**

Year ended March 31, 2015



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INDEPENDENT AUDITORS' REPORT

To the Directors of North Bay Regional Health Centre

We have audited the accompanying financial statements of North Bay Regional Health Centre, which comprise the statements of financial position as at March 31, 2015, the statements of operations, changes in deficiency in net assets and cash flows for the year ended March 31, 2015 and notes, comprising 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 our 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, we consider 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 North Bay Regional Health Centre, as at March 31, 2015, and its results of operations and its cash flows for the year ended March 31, 2015 in accordance with Canadian public sector accounting standards.

Chartered Professional Accountants, Licensed Public Accountants

North Bay, Canada
June 9, 2015

NORTH BAY REGIONAL HEALTH CENTRE

Statements of Operations

Year ended March 31, 2015 with comparative information for 2014

(In thousands of dollars)

	2015	2014
Revenue:		
Ministry of Health and Long-Term Care / North East Local Health Integration Network	\$ 177,973	200,529
Cancer Care Ontario	6,110	5,499
Patient services	11,755	11,512
Preferred accommodation	2,129	2,380
Other	6,730	7,409
Uniquely funded programs (note 16)	27,516	27,206
Amortization of deferred equipment contributions	7,096	7,390
	239,309	261,925
Expenses:		
Salaries and wages	118,965	118,404
Benefit contributions	37,195	35,613
Medical staff remuneration	22,016	21,400
Drugs	6,341	6,062
Medical and surgical supplies	7,575	8,009
Amortization - equipment	7,903	8,154
Other supplies and services	33,489	35,272
Uniquely funded programs (note 16)	27,519	27,206
	261,003	260,120
Excess (deficiency) of revenue over expenses before the undernoted	(21,694)	1,805
Amortization of deferred contributions - buildings	10,783	10,774
Amortization of buildings	(10,987)	(10,973)
Government contribution for interest on other long-term obligations	20,209	20,554
Interest on long-term obligations	(21,794)	(22,141)
Excess (deficiency) of revenue over expenses from health centre operations	(23,483)	19
Rightsizing review final settlement	16,248	-
Working capital relief funding (note 17)	-	6,854
Excess (deficiency) of revenues over expenses	\$ (7,235)	6,873

See accompanying notes to financial statements.

NORTH BAY REGIONAL HEALTH CENTRE

Statements of Financial Position

March 31, 2015 with comparative information for 2014
(In thousands of dollars)

	2015	2014
Assets		
Current assets:		
Cash	\$ 341	195
Marketable securities (note 2)	509	509
Accounts receivable (note 3)	5,422	18,464
Inventories	2,516	2,528
Prepaid expenses	2,364	3,351
Current portion of long-term receivables (note 5)	1,545	1,630
	<u>12,697</u>	<u>26,677</u>
Capital assets (note 4)	514,912	525,623
Long-term receivables (note 5)	10,859	12,091
	<u>\$ 538,468</u>	<u>564,391</u>

Liabilities, Deferred Contributions and Deficiency in Net Assets

Current liabilities:		
Bank indebtedness (note 6)	\$ 26,833	17,070
Accounts payable and accrued liabilities (note 7)	50,879	40,912
Deferred contributions (note 8)	1,596	27,083
Current portion of long-term obligations (note 9)	7,887	7,562
	<u>87,195</u>	<u>92,627</u>
Long-term obligations (note 9)	385,411	390,448
Deferred capital contributions (note 10)	94,713	103,394
Post-retirement benefit obligation (note 11)	14,264	13,802
	<u>581,583</u>	<u>600,271</u>
Deficiency in net assets	(43,115)	(35,880)
Commitments and contingencies (note 14)		
	<u>\$ 538,468</u>	<u>564,391</u>

See accompanying notes to financial statements.

On behalf of the Board.



Director

NORTH BAY REGIONAL HEALTH CENTRE

Statements of Changes in Deficiency in Net Assets

Year ended March 31, 2015 with comparative information for 2014
(In thousands of dollars)

		2015	2014
Deficiency in net assets, beginning of year	\$	(35,880)	(42,753)
Excess (deficiency) of revenue over expenses		(7,235)	6,873
Deficiency in net assets, end of year	\$	(43,115)	(35,880)

See accompanying notes to financial statements.

NORTH BAY REGIONAL HEALTH CENTRE

Statements of Cash Flows

Year ended March 31, 2015 with comparative information for 2014

(In thousands of dollars)

	2015	2014
Cash flows from operating activities:		
Excess (deficiency) of revenue over expenses	\$ (7,235)	6,873
Adjustments for:		
Amortization of capital assets	18,890	19,127
Amortization of deferred capital contributions	(17,879)	(18,164)
Increase in post-employment benefit obligation	462	382
Loss on disposal of capital assets	-	3
	<u>(5,762)</u>	<u>8,221</u>
Change in non-cash working capital:		
Accounts receivable	13,042	(7,631)
Inventories	12	(30)
Prepaid expenses	987	102
Accounts payable and accrued liabilities	9,967	6,175
Deferred contributions	<u>(25,487)</u>	<u>(24,785)</u>
	<u>(7,241)</u>	<u>(17,948)</u>
Cash flows from investing activities:		
Decrease in long-term receivables	1,317	752
Proceeds from disposal of marketable securities	-	3,455
	<u>1,317</u>	<u>4,207</u>
Cash flows from capital activities:		
Purchase of capital assets	(8,179)	(2,962)
Proceeds from disposal of capital assets	-	2
	<u>(8,179)</u>	<u>(2,960)</u>
Cash flows from financing activities:		
Deferred capital contributions received	9,198	9,276
Principal repayment of long-term obligations	(7,412)	(6,403)
Proceeds on long-term obligations	2,700	-
Increase (decrease) in bank indebtedness	9,763	12,527
	<u>14,249</u>	<u>15,400</u>
Net increase (decrease) in cash	<u>146</u>	<u>(1,301)</u>
Cash, beginning of year	195	1,496
Cash, end of year	<u>\$ 341</u>	<u>195</u>

See accompanying notes to financial statements.

NORTH BAY REGIONAL HEALTH CENTRE

Notes to Financial Statements

Year ended March 31, 2015
(In thousands of dollars)

The North Bay Regional Health Centre (the "Health Centre") is incorporated without share capital under the laws of Ontario. Its principal activity is the provision of health care services in the District of Nipissing, Ontario and mental health services in Northeastern Ontario. The Health Centre is a registered charity under the Income Tax Act and accordingly is exempt from income taxes under section 149 of the Income tax Act.

1. Significant accounting policies:

The financial statements have been prepared by management in accordance with Canadian public sector accounting standards including the 4200 standards for government not-for-profit organizations. A statement of remeasurement gains and losses has not been included as there are no matters to report therein.

(a) Revenue recognition:

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

Under the Health Insurance Act and Regulations thereto, the Health Centre is funded primarily by the Province of Ontario in accordance with budget arrangements established by the Ministry of Health and Long-term Care ("MOHLTC") and the North East Local Health Integration Network ("NELHIN"). 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 the subsequent period.

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

Externally restricted contributions are recognized as revenue in the period in which the related expenses are recognized.

Contributions restricted for the purchase of capital assets are deferred and amortized into revenue on the straight-line basis, at rates corresponding to those of the related capital assets.

Revenue from patient and other services is recognized when the service is provided.

NORTH BAY REGIONAL HEALTH CENTRE

Notes to Financial Statements

Year ended March 31, 2015
(In thousands of dollars)

1. Significant accounting policies (continued):

(b) Inventories:

Inventories are stated at the lower of average cost and net realizable value. Cost comprises all costs to purchase, convert and any other costs in bringing the inventories to their present location and condition.

(c) Capital assets:

Capital assets are recorded at cost. Assets acquired under capital leases are initially recorded at the present value of the future minimum lease payments and amortized over the useful life of the assets. Minor equipment replacements are expensed in the year of replacement.

Construction in progress is not amortized until construction is complete and the facilities come into use.

Amortization is provided on the straight-line basis at the following range of annual rates:

Buildings, roads, sidewalks and landscaping	Various rates to 10%
Leasehold improvements	Various rates to 20%
Furniture and equipment	Various rates to 33%
Equipment under capital leases	30%

Long-lived assets, including capital assets subject to amortization, are reviewed for impairment whenever events or changes in circumstances indicate that the carrying amount of an asset may not be recoverable. Recoverability is measured by a comparison of the carrying amount to the estimated undiscounted future cash flows expected to be generated by the asset. If the carrying amount of the asset exceeds its estimated future cash flows, an impairment charge is recognized by the amount by which the carrying amount of the asset exceeds the fair value of the asset. When quoted market prices are not available, the Health Centre uses the expected future cash flows discounted at a rate commensurate with the risks associated with the recovery of the asset as an estimate of fair value.

Assets to be disposed of would be separately presented in the statement of financial position and reported at the lower of the carrying amount or fair value less costs to sell, and are no longer amortized. The asset and liabilities of a disposed group classified as held for sale would be presented separately in the appropriate asset and liability sections of the statement of financial position.

NORTH BAY REGIONAL HEALTH CENTRE

Notes to Financial Statements

Year ended March 31, 2015
(In thousands of dollars)

1. Significant accounting policies (continued):

(d) Related entities:

The notes to financial statements include information for the following entities (note 13):

North Bay Regional Health Centre Foundation ("NBRHC Foundation")

(e) Employee post-retirement benefits:

The Health Centre 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 13 years.

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

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

(f) Funding adjustments:

The Health Centre receives grants from the NELHIN, MOHLTC and Cancer Care Ontario for specific services. Pursuant to the related agreements, if the Health Centre does not meet specified levels of activity, the MOHLTC, NELHIN or Cancer Care Ontario may be 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 to be payable. Should programs and activities incur a deficit, the Health Centre records any recoveries thereon when additional funding is received or receivable if the amounts can be reasonably estimated and collection is reasonably assured.

NORTH BAY REGIONAL HEALTH CENTRE

Notes to Financial Statements

Year ended March 31, 2015

(In thousands of dollars)

1. Significant accounting policies (continued):

(g) Contributed services:

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

(h) Financial instruments:

All financial instruments are initially recorded on the statement of financial position at fair value.

All investments, if any, held in equity instruments that trade in an active market are recorded at fair value. Management has elected to record investments at fair value as they are managed and evaluated on a fair value basis. Freestanding derivative instruments that are not equity instruments that are quoted in an active market are subsequently measured at fair value.

Unrealized changes in fair value are recognized in the statement of remeasurement gains and losses until they are realized, when they are transferred to the statement of operations.

Transaction costs incurred on the acquisition of financial instruments measured subsequently at fair value are expensed as incurred.

All financial assets are assessed for impairment on an annual basis. Where a decline in fair value is determined to be other than temporary, the amount of the loss is recognized in the statement of operations and any unrealized gain is adjusted through the statement of remeasurement gains and losses. On sale, the statement of remeasurement gains and losses associated with that instrument are reversed and recognized in the statement of operations.

(i) Use of estimates:

The preparation of the financial statements 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 periods specified. Significant items subject to such estimates and assumptions include the carrying amount of capital assets; valuation allowances for receivables, and inventories; valuation of financial instruments; and assets and obligations related to employee future benefits. Actual results could differ from those estimates. These estimates are reviewed periodically, and, as adjustments become necessary, they are reported in earnings in the year in which they become known.

NORTH BAY REGIONAL HEALTH CENTRE

Notes to Financial Statements

Year ended March 31, 2015
(In thousands of dollars)

2. Marketable securities:

Marketable securities consist of cashable fixed-term guaranteed income certificates with interest rates ranging from 2.30% to 2.35% and maturing in June 2015. The fair market value of the marketable securities is equal to their cost.

3. Accounts receivable:

		2015	2014
MOHLTC/NELHIN	\$	438	12,308
Cancer Care Ontario		360	153
Insurers and patients		3,264	3,986
Other		1,360	2,017
	\$	5,422	18,464

The reported balance of accounts receivable are net of an allowance for doubtful accounts of \$353 (2014 - \$2,132).

4. Capital assets:

March 31, 2015	Cost	Accumulated Amortization	Net book Value
Land	\$ 1,226	-	1,226
Buildings, roads, sidewalks and landscaping	526,479	51,803	474,676
Leasehold improvements	2,019	947	1,072
Furniture and equipment	98,342	60,404	37,938
Equipment under capital leases	-	-	-
	\$ 628,066	113,154	514,912

March 31, 2014	Cost	Accumulated Amortization	Net book Value
Land	\$ 1,226	-	1,226
Buildings, roads, sidewalks and landscaping	525,125	41,063	484,062
Leasehold improvements	2,019	713	1,306
Furniture and equipment	92,460	53,431	39,029
Equipment under capital leases	102	102	-
	\$ 620,932	95,309	525,623

NORTH BAY REGIONAL HEALTH CENTRE

Notes to Financial Statements

Year ended March 31, 2015

(In thousands of dollars)

5. Long-term receivables:

	2015	2014
Municipal contributions (i)	\$ 9,622	10,335
Recruitment loans:		
Acute care physicians (ii)	2,581	3,075
Psychiatrists (iii)	201	311
	12,404	13,721
Current portion of long-term receivables	1,545	1,630
	\$ 10,859	12,091

- (i) Municipal contributions receivable are recorded at their net present value using the effective interest rate method and a discount rate of 4.75%.
- (ii) Recruitment loans for acute care physicians are non-interest bearing and partially forgivable provided certain contractual conditions are met by the recipient physician.
- (iii) Recruitment loans for psychiatrists are non-interest bearing and fully forgivable provided certain contractual conditions are met by the recipient physician.
- (iv) The reported balance of long-term receivable are net of an allowance for doubtful accounts of \$201 (2014 - \$740).

6. Bank indebtedness:

Bank indebtedness consists of draws on an unsecured line of credit of \$35,000 (2014 - \$35,000). The credit facility bears interest at the bank's prime lending rate less 0.75%.

NORTH BAY REGIONAL HEALTH CENTRE

Notes to Financial Statements

Year ended March 31, 2015

(In thousands of dollars)

7. Accounts payable and accrued liabilities:

	2015	2014
Accounts payable and accrued liabilities:		
- NELHIN/MOHLTC	\$ 6,737	2,825
- Cancer Care Ontario	251	133
- Other funding agencies	724	164
- Trade payables	15,502	17,136
Payroll accruals:		
- Salaries and wages	16,591	8,759
- Employee deductions payable	4,230	3,867
- Vacation pay and other entitlements	6,844	8,028
	\$ 50,879	40,912

8. Deferred contributions:

Deferred contributions represent unspent funding externally restricted for specific programs received in the current and/or prior period that are related to a subsequent period.

	2015	2014
Provincial funding for long-term obligation	\$ 171	7,137
Protected mental health envelope	-	18,048
Other programs	1,425	1,898
	\$ 1,596	27,083

NORTH BAY REGIONAL HEALTH CENTRE

Notes to Financial Statements

Year ended March 31, 2015

(In thousands of dollars)

9. Long-term obligations

	2015	2014
Long-term obligation, unsecured, payable in monthly installments of \$2,389, bearing interest at 5.55%, final installment due June 2040	\$ 388,587	395,490
Available \$3 million credit facility, unsecured, principal repayable on each draw in equal annual installments over a period of six years, bearing interest at bank prime lending interest rate	2,011	2,520
Long-term obligation, secured over related assets, payable in monthly installments of \$21,877, bearing interest at 4.00% and payable over 20 years at the completion of the project. At March 31, 2015, payments have not yet commenced.	2,700	—
	393,298	398,010
Current portion of long-term obligations	7,887	7,562
	\$ 385,411	390,448

Scheduled principal repayments in each of the next five years and thereafter are as follows:

2016	\$ 7,887
2017	8,342
2018	8,675
2019	9,007
2020	9,329
2021 and thereafter	350,058
	\$ 393,298

NORTH BAY REGIONAL HEALTH CENTRE

Notes to Financial Statements

Year ended March 31, 2015
(In thousands of dollars)

10. Deferred capital contributions:

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

	2015	2014
Balance, beginning of year	\$ 103,394	111,092
Contributions received during the year	9,198	9,276
Add: amounts transferred from deferred contributions	—	1,190
Less: amounts amortized to revenue	(17,879)	(18,164)
Balance, end of year	\$ 94,713	103,394

11. Post-employment benefit obligation:

The Health Centre sponsors a post-retirement defined benefit plan for medical, life insurance and dental benefits for employees with various cost-sharing arrangements as determined by their collective agreements and conditions of employment. The most recent valuation of the employee future benefits was completed as at March 31, 2015. The next full valuation of the plan will be as of April 1, 2018.

The accrued benefit obligation is recorded in the financial statements as follows:

	2015	2014
Balance, beginning of year	\$ 13,802	13,420
Add: Benefit costs	1,149	1,072
	14,951	14,492
Less: Benefit contributions	(687)	(690)
Balance, end of year	\$ 14,264	13,802

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

NORTH BAY REGIONAL HEALTH CENTRE

Notes to Financial Statements

Year ended March 31, 2015

(In thousands of dollars)

11. Post-employment benefit obligation (continued):

The significant actuarial assumptions adopted in measuring the Health Centre's accrued benefit obligations are as follows:

	2015	2014
Discount rate	5.41%	5.52%
Dental cost trend rates	3.75%	4.00%

Extended health care costs are 7.5% in the first year, decreasing by 0.25% per annum to an ultimate rate of 4.75% (2014 - 5%)

12. Pension plan:

The majority of full-time and part-time employees of the Health Centre are eligible to be members of the Plan which is a multi-employer defined benefit plan. Contributions to the Plan made during the year on behalf of employees amounted to \$11,551 (2014 - \$11,254).

13. Related entity:

The Health Centre has an economic interest in the NBRHC Foundation. The NBRHC Foundation was incorporated by Letters Patent under the Ontario Corporations Act on September 30, 1999 as a not-for-profit organization and is a registered charity under the Income Tax Act. Its primary goal is to provide ongoing resources for patient-focused care, education and research.

During the current year, the Health Centre received total contributions of \$1,771 from the NBRHC Foundation (2014 - \$2,214).

14. Commitments and contingencies:

(a) Lifecycle and maintenance costs

In February 2007, the former North Bay General Hospital ("NBGH") signed an agreement with Plenary Health North Bay GP ("Plenary") to build, maintain and finance the NBRHC facility. Plenary commenced facility construction in March 2007 with substantial completion in June 2010.

Upon completion of construction, annual payments of approximately \$6.8 million for lifecycle and facility maintenance costs commenced for a period of 30 years, with the final payment due in May 2041. A portion of the payment is subject to indexing for increases in cost of living, labour, insurance and energy and utilities.

The MOHLTC has approved an annual grant to fund the lifecycle component of these payments and negotiations are ongoing for a long-term funding arrangement for the MOHLTC's share of the facility maintenance costs, with the expectation being that this funding will be incorporated into the Health Centre's operating grants.

NORTH BAY REGIONAL HEALTH CENTRE

Notes to Financial Statements

Year ended March 31, 2015

(In thousands of dollars)

14. Commitments and contingencies (continued):

(b) HealthCare Insurance Reciprocal of Canada:

The Health Centre is a member of the HealthCare Insurance Reciprocal of Canada ("HIROC"). HIROC is a pooling of the liability insurance risk of its members. All members pay annual deposit premiums which are actuarially determined and are subject to further assessment for losses, if any, experienced by the pool for the years in which they are members. As at March 31, 2015, no assessments have been received by the Health Centre.

(c) Legal matters and litigation:

The Health Centre is involved in certain legal matters and litigation, the outcomes of which are not presently determinable. The loss, if any, from these contingencies will be accounted for in the periods in which the matters are resolved. With the exception of specific matters noted below, management is of the opinion that these matters are mitigated by adequate insurance coverage.

Prior to the current year, the NBGH was named as a co-defendant in a statement of claim. The action is claiming damages that are in excess of the insurance coverage that the NBGH held at the time of the incident. It is the Health Centre's position and that of its legal counsel that the likelihood of loss, if any, is not determinable at this time and the Health Centre has not recorded a liability for any amount relating to this claim. Damages and legal costs, if any, relating to this matter would be recognized in the year they become determinable.

Prior to the current year the NBGH was named as a co-defendant in a statement of claim where the date of occurrence was prior to the current insurance policy period. There is a dispute between the previous and current insurers as to which policy coverage extends to this claim. It is the Health Centre's position and that of its legal counsel that the likelihood of loss that is not covered by insurance, if any, is not determinable at this time and the Health Centre has not recorded a liability for any amount relating to this claim. Damages and legal costs, if any, relating to this matter would be recognized in the year they become determinable.

(d) Employment matters:

During the normal course of business, the Health Centre is involved in certain employment related negotiations and has recorded accruals based on management's estimate of potential settlement amounts where these amounts are reasonably determinable. Where amounts are not reasonably determinable, costs, if any, relating to these matter would be recognized when known.

NORTH BAY REGIONAL HEALTH CENTRE

Notes to Financial Statements

Year ended March 31, 2015

(In thousands of dollars)

14. Commitments and contingencies (continued):

(e) Letters of credit:

As at March 31, 2015, \$1,234 (2014 - \$10) of letters of credit have been issued with respect to performance contracts. These arrangements are secured by a general security agreement.

15. Financial risks and concentration of credit risk:

(a) Credit risk:

Credit risk refers to the risk that a counterparty may default on its contractual obligations resulting in a financial loss. The Health Centre is exposed to credit risk with respect to accounts receivable and other investments.

The Health Centre assesses, on a continuous basis, accounts receivable and provides for any amounts that are not collectible in the allowance for doubtful accounts. The maximum exposure to credit risk of the Health Centre at March 31, 2015 is the carrying value of these assets.

Management considers credit risk to be minimal as most of the accounts receivable balance is collected in a timely fashion.

There have been no significant changes to the credit risk exposure from 2014.

(b) Liquidity risk:

Liquidity risk is the risk that the Health Centre will be unable to fulfill its obligations on a timely basis or at a reasonable cost. The Health Centre manages its liquidity risk by monitoring its operating requirements. The Health Centre prepares budget and cash forecasts to ensure it has sufficient funds to fulfill its obligations.

Accounts payable and accrued liabilities are generally due within 60 days of receipt of an invoice.

There have been no significant changes to the liquidity risk exposure from 2014.

NORTH BAY REGIONAL HEALTH CENTRE

Notes to Financial Statements

Year ended March 31, 2015

(In thousands of dollars)

16. Uniquely funded programs:

The Health Centre administers a number of programs which are separately funded. The revenues and expenses related to these programs are recorded separately from the base funding operations of the Health Centre and any excess or deficiency of revenue over expenses is settled with the funding agencies on an annual basis.

(a) MOHLTC/NELHIN funded programs:

	2015	2014
Revenue:		
Community mental health	\$ 5,857	5,891
Substance abuse	2,624	2,608
Central ambulance communication centre	2,306	2,230
North East specialized geriatric services	2,358	1,404
Other programs	303	338
	13,448	12,471
Expenses:		
Community mental health	\$ 5,857	5,891
Substance abuse	2,624	2,608
Central ambulance communication centre	2,306	2,230
North East seniors' geriatric services	2,358	1,404
Other programs	306	338
	13,451	12,471
Excess (deficiency) of revenue over expenses	\$ (3)	—

NORTH BAY REGIONAL HEALTH CENTRE

Notes to Financial Statements

Year ended March 31, 2015

(In thousands of dollars)

16. Uniquely funded programs (continued):

(b) Other government funded programs:

	2015	2014
Revenue:		
Land ambulance service	\$ 6,037	5,913
Regional children's psychiatric centre	2,031	1,792
Grants assistance	3,760	4,764
Wordplay	1,574	1,609
Client information management system	621	657
Paramedicine	45	—
	14,068	14,735
Expenses:		
Land ambulance service	\$ 6,037	5,913
Regional children's psychiatric centre	2,031	1,792
Grants assistance	3,760	4,764
Wordplay	1,574	1,609
Client information management system	621	657
Paramedicine	45	—
	14,068	14,735
Excess of revenue over expenses	\$ —	—

17. Working capital relief funding:

In March 2014, the Health Centre was advised that it was eligible for one-time working capital relief funding over the next three fiscal years to improve its adjusted working funds deficit position. The Health Centre is eligible to receive these funds in three annual installments of \$6,854, provided that it meets certain conditions. The funding received is restricted in use to reducing the Health Centre's working capital deficit and cannot be used to fund operating or capital expenditures. For the year ended March 31, 2015, the Health Centre did not meet the condition of the funding and did not receive the annual installment of \$6,854.

18. Change in accounting policy:

The Health Centre adopted Public Sector Accounting Board Standard PS 3260 Liability for Contaminated Sites effective April 1, 2014. Under PS 3260, contaminated sites are defined as the result of contamination being introduced in air, soil, water or sediment of a chemical, organic, or radioactive material or live organism that exceeds an environmental standard. This Standard relates to sites that are not in productive use and sites in productive use where an unexpected event resulted in contamination. The Health Centre adopted this standard on a retroactive basis and there were no adjustments as a result of the adoption of this standard.

NORTH BAY REGIONAL HEALTH CENTRE

Notes to Financial Statements

Year ended March 31, 2015
(In thousands of dollars)

19. Comparative information:

Certain 2014 comparative information has been reclassified to conform to the financial presentation adopted for 2015.
